From hospitals to project organizations

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If you think only private corporations can call themselves project organizations, think again. Hospitals around the world are increasingly seeing themselves as project organizations and relying on project groups to explore and implement new technologies.

Meanwhile, healthcare workers participating in these projects are developing skills they otherwise would not learn through their regular work.

The concept behind project organizations is very simple. Project groups - usually with members of different professional backgrounds - are brought together for a specific purpose during a given period of time. Once the project ends, the project group is dispersed again.

The Malmö University Hospital is among the hospitals currently making use of project groups to implement new technologies. The hospital is one of the ten in Southern Sweden to provide medical care for the 1.1 million residents of the region.

Prior to 1998, most blood gas analyses were done in the central lab of the Malmö University Hospital. As the new technology enabled near-patient testing, creating a common system covering operations, maintenance, QA, billing, and IT became a top priority for the hospital.

In 2000, the hospital's Department of Clinical Chemistry formed a project group to design, develop, and coordinate a model for effective blood gas testing at the point of care.

Quality assurance (QA) and cost effectiveness were top priorities for the group, who was particularly interested in exploring how IT could increase the quality of information processing and thus QA.

The project group, led by an MD, was made up of seven professionals:

Full-time	Part-time
2 medical lab technicians	Electronic engineer
	Clinical chemist
	Quality manager
	IT & technical expert
	Accountant

According to Per Simonsson, Lab Manager at the hospital's Department of Clinical Chemistry, handpicking the project members contributed to the its success. "It was not enough to want to participate in the project.

You also had to be able to contribute to the group in a certain way. Therefore, we picked out the best people - individually and in such a way that they could complement one another," he explains.

The challenge of participating in such a project was a major motivation for those saying yes to it.

"Most people working in labs are not trained in or used to work in projects," says Per Simonsson. The two medical lab technicians - Agneta Hägglöf and Gunilla Lundström - who work in the project full-time, agree.

"I have learned a lot from participating in the project group on a professional and personal level," says Agneta Hägglöf.

"Especially the training of the nurses was a great challenge. To stand in front of them and explain how to measure blood gases in a clear and down-to-earth manner requires you to develop certain communication skills. It was also challenging to plan the project and to live up to the responsibility that comes with having decision-making power."

Being involved in the development of models and the discussions with the wards and the supplier has, according to the two medical lab technicians, also helped them develop skills they otherwise would not learn.

Positive results, positive spin-offs

Two years after its formation, the project group has achieved what it originally set out to do.

Malmö University Hospital Project Group - Results

- Definition of clinical demands for blood gas analyses, including department-specific and local demands
- Customized solutions to meet the needs specified above with focus on QA
- Development and implementation of a program for training, service, and logistics (ordering, distribution, and storage of reagents and spare parts)
- Development of a billing model for the clinical departments based on the tests validated
- Installation of a LAN-based IT system for connectivity
- Transferability of results
- Effective involvement of supplier in all phases of the project

Seven departments (Intensive Care, Emergency, Surgery, Infectious Diseases, Orthopedics, Obstetrics, and Pediatrics) are currently responsible for their own blood gas analyses based on the solution implemented by the project group. The central lab is still responsible for quality control procedures and maintenance of the analyzers.

The positive results have encouraged the hospital to form other project groups and continue to function as a project organization.

"Right now, for example, there is a project group working on a model to improve the sorting of sample specimens coming to the laboratory," says Rolf Thämlitz, Head of Logistics at the Department of Clinical Chemistry. "Other hospitals have contacted us to hear more about the work of our project organization," he adds.

According to Per Simonsson, the project has also led to many positive spin-off effects. The communication between the central lab and the wards not only increased, but also improved, making it easier to communicate new procedures and routines.

Increased communication between the two groups has also led to better insight into and thus increased appreciation of the work of each group.

The wards followed the project closely.

That is no surprise to Rolf Thämlitz. "The different departments have helped finance the project by paying not only for validated tests, but also for instruments, reagents, and services provided by the supplier. This has led to a great involvement on the part of the wards. Because of their financial interest in the project, they gave the project the attention it deserved and helped with what they could."

According to Per Simonsson, the project also has fueled a demand for additional POC instruments.

Whole-hearted commitment makes all the difference

Per Simonsson cites many elements that have contributed to the project's success: allocating the necessary resources, choosing the right project members, and empowering them - just to name a few. However, there is one element the project could not have done without: whole-hearted commitment from the project group.

"When you want to achieve something good, you have to be willing to invest the necessary resources - both human and economic," Per explains. The commitment Per refers to kept the project on track, even though the project had - interestingly enough - no fixed deadlines.

"It was important for all the project members to feel they had time to ask all questions, explore all possibilities," he clarifies.

"Our opinion has always been that if we are going to do this, we might as well do it right. Of course, we had to pay attention not to lose momentum. But commitment combined with constantly communicating with the wards about their expectations have helped us to stay on track."

According to Per, it is all about being professional. And as he so wisely puts it: "We need to be professional, if we are to be taken seriously by the rest of the organization."

Below, you will find a list of things the Department of Clinical Chemistry recommends to those considering project groups:

Things to consider when forming project groups

- Choose members so their skills and backgrounds complement one another
- Budget to have at least one person working full-time in the project group
- Involve those affected by the project in the work of the project group - for example by sharing decision-making responsibilities and/or splitting project-related costs
- Give the project group the necessary time and freedom to do their work
- Give the project group decision-making power
- Use your suppliers as collaborative partners. Their knowledge and experience can help you get a clear idea of what your options are
- Commit yourself to the project
- Be professional. By taking the project seriously, you will inspire others to do the same.

For more information on the division of Clinical Chemistry of the Malmö University Hospital, go to http://www.labmedicin.org.

Interviewers

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