Putting Together Your Go Live Plan

Putting together a Go Live Plan can be a daunting task especially if you have never done it before. A Go Live Plan should provide structure but not micro manage the individuals. Striking this balance can be more of an art form than a science!

Here are some key elements that any Go Live Plan must have to be successful:

- Command Center Organizational Structure
- Communication Channels
- Issue Resolution and Escalation Procedures
- Staffing/Support Matrix for all Modules
- Roles and Responsibilities

Critical Code

As more and more hospitals are implementing their Advance Clinical Modules, it is important to understand the frustration of care givers when the system is not working as designed especially when patient care is hindered. As you approach your plan, you may want to give this situation extra attention by having Critical Code Protocol. A Critical Code is similar to your hospital emergency codes i.e. Code Blue, Pink, and etc. I would recommend that you stay away from the color codes so that there is no confusion with the emergency codes. In my past, we did a Code M – for Meditech. The Code M was only to be used for clinical areas when patient care was going to be hindered and no Go Live Support Personal were in the vicinity. It was NOT to be used for resetting PINs, passwords or other minor issues. If the nurse found that she could not distribute a medication, or a nursing assessment was not functioning properly, the individual would contact that help desk and would state they had a Code M situation. The Help Desk personal would request the nature of the code, the individuals name, department/unit, and room number. A Code M would be called over the public address system to the unit and room number. The Go Live team members would then go to the room to assist with the issue at hand. This method has been very successful and gives the clinical community the extra assurance that patient care would not be jeopardize during a project go live.

Rolling Out and Communicating Your Plan

I have seen great plans simply go wrong mainly due to the fact that they were not communicated or not communicated effectively or consistently. The roll out your plan needs to be as thought out and planned as creating it. Here are some ideas you will want to consider that have been successful.

- Town Meetings – invite your Implementation team, IS Team, Management Team, and Executive Team to a series of meetings (consider various shifts) where you present your plan. Make sure you leave time for questions.
- Paper Copies of Your Go Live Plan – hand out copies of your Go Live Plan.
- Power Point Presentation – Cover your major topic but follow your plan. As you give your presentation, the participants can follow along with the paper copy of the plan.
- Electronic Copy of Your Go Live Plan – place an electronic copy of your go live plan on your intranet or shared folder that is available to the organization. When people call looking for a copy, you can send them the link.
- Email – send out an "all users" email with the highlights of your plan. You can use your power point presentation as a starting point.
- Physicians – make sure you get invited to any physician meetings to go over the plan or have a special meeting for the physicians. Make sure you highlight the Critical Code. This will help alleviate any anxiety about patient care.
- Support Team – take some extra time to bring the Support Team together to discuss the plan from their perspective. This may take multiple meetings, but it will be worth it. These are the people who make that plan happen, so if they don't understand it; it can be disastrous for the project.

During Go Live

When you are planning your staffing for Go Live, make sure that you include a 30 minute overlap. This time is so critical for communication to be passed from one shift to another. I have seen this trip up many great projects and go live. The Command Center Chiefs need to meet, but each team needs to meet as well and to pass on critical information to the next shift.

During your Go Live, you may want to strongly consider a daily town meeting. The town meeting would be to bring everyone back together that wants to participate. This provides an opportunity to state what the current issues are, what has been resolved, and to get a feel for what is happening in the departments. This can help dispel any rumors, collect any additional information, and give a sense of confidence that all the issues are account for and are being handled. You can also very quickly get a sense if your Go Live Plan is working and make any necessary adjustments. I can't express strongly enough to make sure you thank everyone in the room for their involvement and participating in making the project successful. This can help the moral of the team over the next few days.

The next few pages are a copy of a sample triage process flow and an Issue Report form.
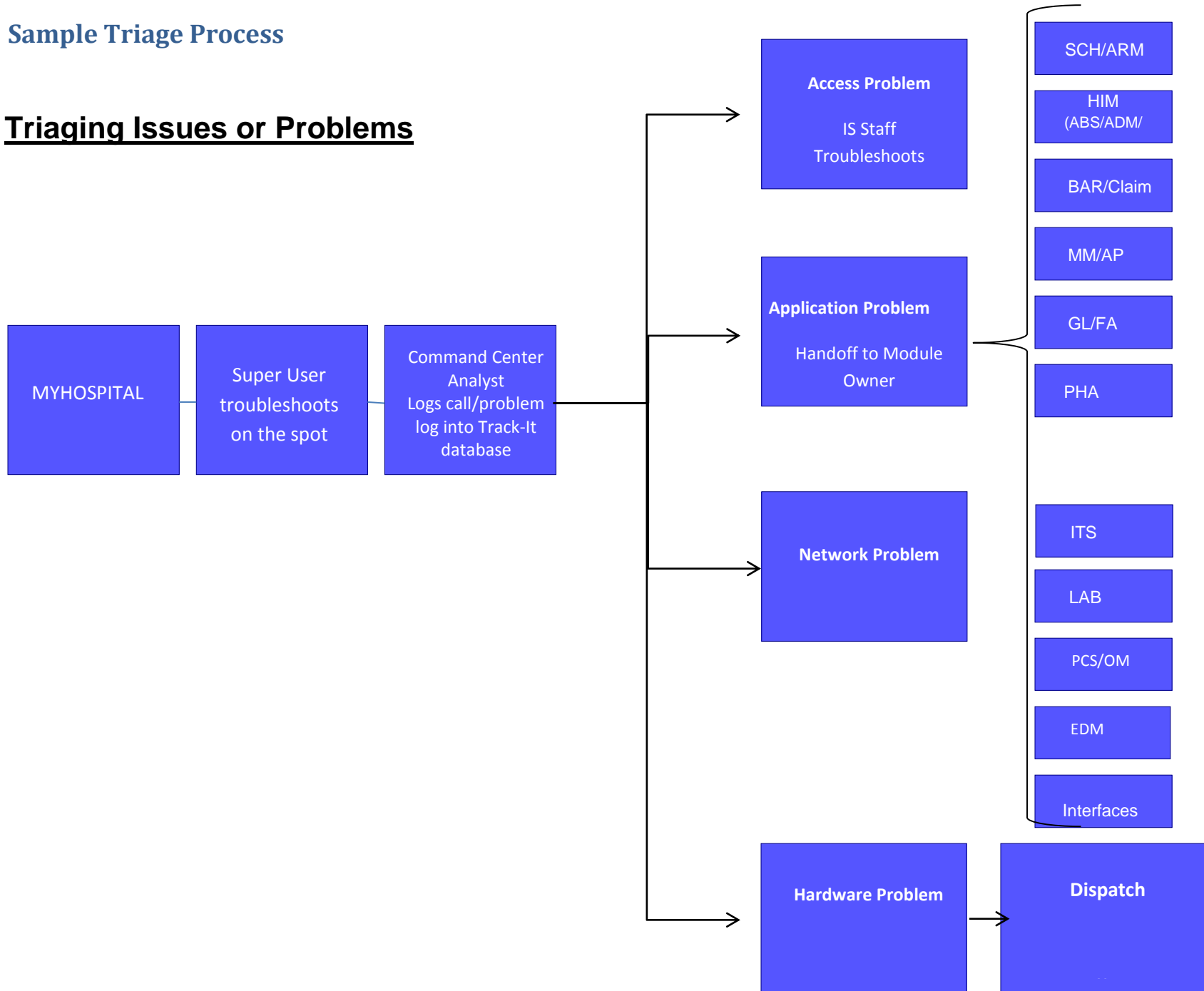
Sample Issue Reporting Form

Requestor(s): (Note end-user &/or Reporting User)	Extension:	Location:
Module:	**Date:**	**Time:**

Facility: (circle one) IH Hospital East Campus North Campus West Campus Brentwood Hospital Memorial Hospital

Type of Concern/Issue: *(circle one)*

Menu **Access** **System** **Functionality** **Process** **Reports** **Connectivity** **Faxing**

Printing: **Labels** **Forms**

Hardware: Network Name _____ **IP Address:** _____

Interface: (note) _____ **Other: (note)** _____

Problem Description: *(Include as much documentation as possible, note the routine, the steps to re-create the issue, or attach screen shots)*

To be completed by IS and Go-Live Command Center Support

Priority: (REQUIRED: Circle one)

CRITICAL (RED) **URGENT (YELLOW)** **NON-URGENT (GREEN)**

MEDITECH Service Issue (Task) #: (if applicable)	Track It #:	Assigned to:

Resolution: (to be completed by person resolving the issue)

Resolved By:

Sample Triage Process

Triaging Issues or Problems

MYHOSPITAL

Super User troubleshoots on the spot

Command Center Analyst Logs call/problem log into Track-It database

Access Problem

IS Staff Troubleshoots

Application Problem

Handoff to Module Owner

Network Problem

Hardware Problem

Dispatch

SCH/ARM

HIM (ABS/ADM/

BAR/Claim

MM/AP

GL/FA

PHA

ITS

LAB

PCS/OM

EDM

Interfaces

When Do You End Your Go Live Plan?

That is a great question and the answer is not the same for all projects. There are several things that you will want to look at when contemplating this question.

- Are there any critical issues that are affecting patient care or the financial stability of the organization?
- Are the support issues coming in with the same severity and at the same rate as before go live. Basically, you are asking yourself if you are back to normal support levels.
- Have you been through all shifts and rotations? If you went live on Monday, normal weekend shifts start on Friday, so you will have be prepared to handle the volume that arises.
- User Confidence – this is more difficult to gauge, but you can get a feel if the organization is adapting to the new work flow. User confidence can be affected by technical problems, so take everything into consideration. Make sure that you are looking for a majority of the organization when considering this.
- Executive Leadership – this can be a good place to get a pulse for where they think their departments are at. It is not just the IS Staff that has staffed up to cover the project, and you will need their buy in on the actual time line.