

Planning is the Key for Successful Outcomes

By Douglas K. Halverson

It seems that we hear a lot about the importance of planning, especially about strategic planning. When an organization makes the decision to invest in a mega expansion project, there is clearly an incredible amount of careful decision making that must take place to ensure its ultimate success. Some projects pose a host of complexities that challenge our ability to be comprehensive in our planning. The ability to anticipate obstacles and address all the minute details that are critical to a project can easily be missed. The staffing plan for Mayo Clinic's Proton Beam Therapy (PBT) project is an example of a praiseworthy planning effort that has at least three essential components: 1) a staggered timetable that insures sufficient staffing levels upon opening; 2) identifies the necessary incremental staff and accompanying expertise level; 3) and a careful analysis of the training and education needs of current staff to insure readiness.

First, a strategically delineated timetable that takes into account the difficulty of recruiting the right candidates with the technical expertise in the highly technical area of proton beam therapy is vital. Getting the posting launched, screening the candidates, gathering references, arranging travel and interviews, solidifying the offer, and arranging relocation all need to be accounted for as part of a prudent timetable.

Rebecca Hinchley, operations manager for the Mayo Clinic Rochester Proton Therapy Program (PBT) in Rochester, Minn., noted that once the business plan was approved for the PBT project, a meeting was set up with each supervisor involved in hiring new staff for the Proton Beam Therapy Program. With their input, job posting windows were determined based on the length of training and degree of difficulty in recruitment. Once this was done for each group, the information was placed into one spreadsheet similar to a Gantt chart. This tool was then used to help determine the recruitment for each year with adjustments easily made if hiring priorities change.

Vickie Miller, operations administrator for the Mayo Clinic Department of Radiation Oncology in Arizona, also noted that this tool has been invaluable in communication with leadership and setting expectations on the staffing needs for this large multiple year project. Leadership can clearly see the projected needs over the years of the project and plan for these in the incremental staffing plan for the institution. The spreadsheet shows a well thought out staffing plan, makes it easier to outline changes in the staffing plan over multiple years of the project, helps obtain approval for changes quickly from leadership as the plan is clear for each year, and tracks changes for budget planning and adjustments. Flexibility in the staffing plan to accommodate both the needs of the proton facility and the institution is key in successfully managing this project.

Arriving at the appropriate lead time for the various incremental positions to be filled clearly has budget implications as well which adds to the importance of the timetable. While there is no template for calculating the precise time to hire for a given position, reviewing historical data on previous hires for similar positions can help arrive at a reasonable time frame. Human

Resources (HR) can be part of the discussion on phased hiring for major projects and can help facilitate working on a timetable that is both feasible and realistic.

Secondly, projecting the number of incremental staff that will be involved in a major expansion also must be calculated carefully. Benchmarking with other companies can be helpful. Misguided planning on the staffing levels needed to open a new practice will impact the success of the operation; therefore, organizations need to put considerable analysis into this component.

A key contributor to the planning effort, Christopher Brent, administrator for the Mayo Clinic Department of Radiation Oncology in Rochester, notes that it is critical to communicate with upstream and downstream clinical departments that may be impacted by the new practice, as well as administrative and support areas such as Finance, Contracting & Payer Relations, Medicare Strategy, Marketing, Biomedical Engineering, and Environmental Services to coordinate staffing level changes that ensure adequate operational support for the new program. As many metrics as applicable also need to be examined so that the projected staffing level will be as close as possible to meet the needs. For example, after studying the staffing model for the proton center, it was clear that our greatest need would be for an increase in the number of Radiation Therapists. By working collaboratively with the Mayo School of Health Sciences, plans were made to adjust the number of entering students so that our target number could be met by 2015.

According to Brenda Cook, Mayo Clinic Arizona operations manager, “technological change of this magnitude requires thoughtful consideration of the assets necessary for the successful completion of the project. This consideration includes evaluating the incremental staffing needs that correlate appropriately with the construction timetable. The education and training of staff directly relate to the knowledge and experience level of those hired early in the process, as these individuals must have the skill, abilities, and experience to ensure effective and timely training activities.” Inasmuch as the staffing numbers need to strive to align with the needs of the department, new initiatives like the PBT do need to allow for potential adjustments if necessary. Obtaining the authority from leadership to make changes without extensive delays will keep the project moving forward.

Third, an assessment of the education and training needs of staff currently working within the expanding department that will be expected to help fill roles in the new operation must be done. In the case of the PBT project, the highly technical nature of proton beam therapy will require that staff become knowledgeable of the new equipment to ensure the delivery of quality patient care. Since much of the training will be done on site, trainers have already begun learning the proton therapy approach. Rather than send an entire staff outside of the organization for the specialized proton training, it is far more efficient to do the training in phases and have the training done on site. By carefully planning the training to take place on an organized staggered timetable, the department will have a fully trained staff while simultaneously maintaining the operation of the conventional radiation therapy approach without any major disruptions. This can only be done when leaders develop carefully designed strategic training plans.

Vickie Miller also noted that hiring key strategic positions early in the project and filling these with experienced proton staff will help to jump start training. These individuals can not only help develop the training plan but can start the process early with current staff. These individuals will also provide support and backup to the staff as they learn new roles within the proton facility.

Finally, Mayo's PBT project and the related planning is truly an example of how a department can avoid making hasty reactive decisions that are often made in the midst of panic. By working collaboratively with HR and all the other departments that will play a role in the PBT operation, planning for a project as major in scope as the PBT is a far less daunting undertaking. It takes considerable vision to plan and project needs several years into the future, but as overwhelming as this task is, the PBT plan that put forth a timetable, that identified the necessary incremental staff, and that identified the education and training needs several years prior to the day of the opening, is a gem worthy of praise.

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This project was a success due to the contributions of:

- Rebecca Hinchley, operations manager for the Mayo Clinic Rochester Proton Therapy Program (PBT) in Rochester
- Christopher Brent, administrator for the Mayo Clinic Department of Radiation Oncology in Rochester
- Vickie Miller, operations administrator for the Mayo Clinic Department of Radiation Oncology in Arizona
- Brenda Cook, Mayo Clinic Arizona operations manager