

Agile health care organisations

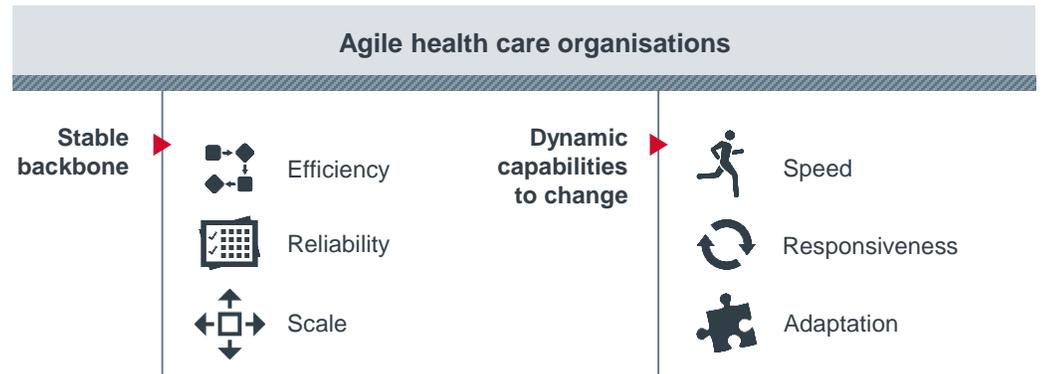
Educational briefing for non-IT executives

Executive summary

A growing number of organisations, regardless of industry, recognise the need to be both stable and agile. Stability enables efficiency, reliability, and scalability, while agility enables responsiveness and adaptation. Agile health care organisations have both a stable backbone and dynamic capabilities to change. Our research indicates agile organisations do two important things well:

1. They use “two-speed IT,” a flexible approach to IT development that incorporates elements of both Waterfall and Agile methodologies.
2. They extend agile approaches beyond IT to benefit the entire organisation.

Two pillars of agility



The Waterfall approach

Traditionally, most organisations have used what is called **the Waterfall approach** for IT-enabled initiatives. In this model, every phase of implementation—the analysis, the design, the coding, the testing—is performed sequentially. This requires the completion of one phase before starting the next, and all phases of the project must be completed, sometimes taking years, before rolling the technology out.

The Waterfall approach works well in some cases, such as for back-end systems like EMRs (electronic medical records)—what we’ve termed “systems of record.” These are systems where speed and flexibility are less important than the quality and stability of the product. However, the downside of this implementation methodology is that it’s time consuming and doesn’t allow for in-the-moment adjustments if the solution doesn’t meet the underlying business needs.

The Agile approach

Because of these limitations, many organisations are starting to adopt a second, parallel process known as **the Agile approach**. Under this model, teams develop technology in incremental chunks, getting consistent customer feedback between iterations and delivering the product in smaller steps.

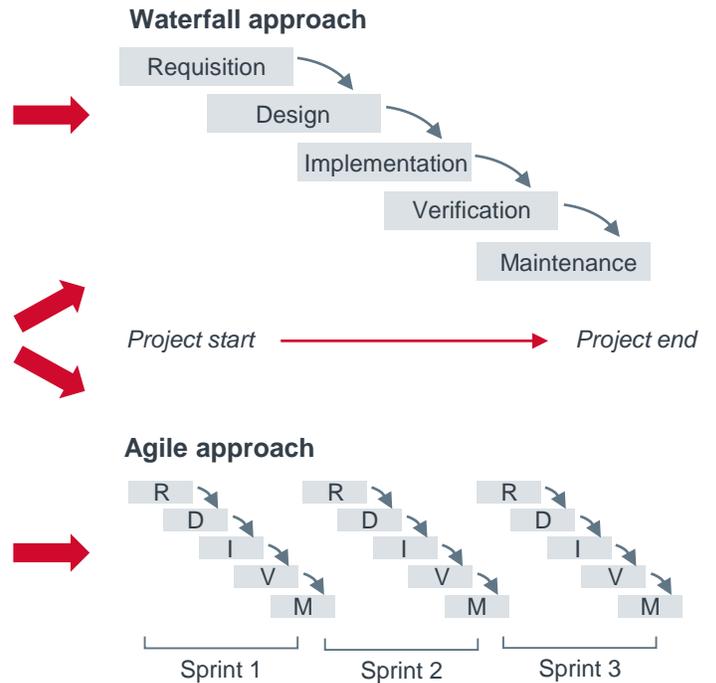
This model makes sense for new, customer-facing systems like online scheduling—what we’ve termed “systems of engagement”—or really anywhere that speed to market is critical. It can also be used for ongoing refinement after an initial Waterfall implementation, most commonly for certain analytical systems like data warehouses—what we’ve termed “systems of insight.”

“Two-speed IT” uses both Waterfall and Agile approaches

Systems of record (e.g., EMRs) typically use traditional methodologies for initial implementation

Systems of insight (e.g., data marts and data warehouses) are well suited for Agile after implementation

Systems of engagement (e.g., customer-facing systems for access or bill paying) typically use Agile methodology



Extend Agile beyond IT

Agile has its roots in software development, but it can be applied across a number of areas in health care. Agile focuses on the **rapid delivery** of a product in **working increments** where the **entire team** is responsible for the end result. Agile is best suited for work that is iterative in nature and can be accomplished within the boundaries of a single team. Areas such as application maintenance, website development, mobile application development, report writing, and analytics are other potential candidates for adoption. Agile is more of a concept than a strict methodology or standard, so different variations or “flavours” have emerged.

How to get started on your Agile journey

Key action items health care leaders can take to prepare their organisations for Agile:

- ❑ **Start with a pilot, but choose carefully.** EMR implementations may be a poor choice for Agile due to the large number of stakeholders and the high risk of the endeavour. More contained efforts like EMR optimisation, web work, mobile application development, and business intelligence work are a better fit for a pilot.
- ❑ **Choose the team members carefully.** People who are comfortable with team-based work are better suited to Agile than those with an independent streak.
- ❑ **Engage the whole team.** Full participation is important when establishing the processes, standards, and techniques to be used—but supplement them with an experienced coach.
- ❑ **Take a balanced approach to planning the new process.** Don’t over-plan or under-plan the new process. Being too prescriptive from the start leads to trouble, but so does being too general. Make it clear to every team member how work will progress and acknowledge that it will not go perfectly at first.

For more information on Agile



Related resource: See our [Agile IT Report](#) on advisory.com.

Source: Advisory Board interviews and analysis.

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