

# ROLLING OUT YOUR HOSPITAL'S MOBILITY STRATEGY & SECURE TEXTING SOLUTION

The Definitive Guide

### **OVERVIEW**

While smartphones, tablets, pagers, and other mobile devices in hospitals are as common as tongue depressors, IT departments and healthcare leaders still struggle to develop guidelines around these invaluable tools and implement strategies to guide their use. Why should it matter that physicians want to use their phone or tablet to send messages to colleagues if it makes their jobs easier? First, federal laws require that identifiable patient information be kept secured, and neither standard texting nor emailing are considered secure methods of communication. And second, mobile devices become significantly more useful if they are integrated with the facility's employee directory and on-call schedule.

So what is the best way to rein in the herd of mobile devices at your facility and bring order to the field? There is, of course, no single correct answer, but with the experiences of many hospitals as our guide, this paper offers a roadmap to defining and deploying a full mobility strategy, from setting up the plan through end-user adoption.

### PRE-DEPLOYMENT CHECKLIST

For all projects, success begins with careful planning. In this case, pre-deployment activities revolve around researching and defining details such as who the users are, what devices will be used, and which applications will be accessed.

#### **DEFINE YOUR USERS**

The first question to ask is who needs to use what device. Think about departments throughout your hospital, from patient floors to the lab to transport. Who has pagers, Wi-Fi phones, voice badges or other mobile communication devices today? Does their usage require inclusion in a mobility strategy to promote efficient workflows and secure patient information? Would other devices be more appropriate for specific workflows?

#### DETERMINE WHAT APPLICATIONS/SYSTEMS YOUR USERS WILL NEED TO ACCESS

After determining who your users are you can identify which systems and applications they will need to access. Examples include drug references, directory lookup, on-call information, the electronic medical record (EMR), and alerts from clinical systems.

Note that determining what users need to access is an important step in determining which communication networks (e.g., Wi-Fi) should be utilized.

#### IDENTIFY EXACTLY WHICH SMARTPHONES AND TABLETS ARE IN USE AT YOUR ORGANIZATION

Use a survey to determine what platform, model, carrier, and version of smartphones/tablets employees have. Understanding this information up front will help you plan your operational processes and what level of support you can/are willing to offer.

## ESTABLISH WHO WILL PAY FOR DEVICES AND CELLULAR/DATA PLANS

Determine what your organizational policies are as far as who pays for what. Do you allow only hospital-issued devices? Are you a bring-your-own-device (BYOD) facility? Are both methods used for different departments or positions? Answers to these questions help you then determine who will pay for the hardware, cellular, and data plans, whether that means individuals, departments, or other groups. This will also affect how much control you have over how devices are being used.

#### MAXIMIZE YOUR COVERAGE

Determine what coverage limitations exist in your facility by testing all cellular carriers and each Wi-Fi network you have, and possibly look for other coverage options. Also, enabling devices to use both the cellular and Wi-Fi networks in your building will expand coverage.

Consider Wi-Fi network login requirements. Can these be programmed to occur automatically so users do not have to log in every day?

#### CONSIDER YOUR DISASTER RESPONSE PROCEDURE

Beyond the day-to-day workflows and processes, how do mobile devices fit into your disaster response procedures? Which staff members carry pagers in the event cellular/data networks become jammed during a wide-scale disaster? Are cloud-based redundancy options required in the event of a data center outage?

## ROLL OUT THE PRODUCT IN YOUR IT/TELECOM DEPARTMENT

Do a small, five to 10 user rollout in IT/Telecom to test the solution and policies. This also helps ensure you know how the product works and can support it.

#### JOIN A USER GROUP

Ask your secure texting vendor about joining their user group. Attend regular meetings to learn how others are managing their deployments and what lessons they've learned in the process.

### **INITIAL TRIAL**

After establishing your goals and criteria for a mobility strategy (the who and what), it is time to explore the how with small trials outside of your IT group. This is also the perfect opportunity to discover unforeseen hurdles, flesh out more plan details, and learn tricks to rolling out the solution successfully to larger groups. Your goal is to build excitement among the user community for this new technology. Getting buy-in from the right people is key.

#### SELECTION OF TRIAL USERS

Select a cross-section of employees using different devices who work in different areas of the hospital. Be sure to include clinical users in the initial deployment and use existing messaging processes/devices side by side with the new solution. This can help build confidence and markets the availability of the solution within clinical departments. Finding a clinical leader to champion your efforts will be extremely beneficial to overcoming obstacles.

#### END USER TRAINING

Determine the best way to train new users in your organization. Oftentimes a combination of approaches will ensure users understand the product and your operational procedures and expectations. Consider the following:

- One-on-one training in the office
- Webinars both live and on-demand options
- Establishing a 'super user' within your team who is the go-to resource for pop-up training needs

#### **BUILD OPERATIONAL PROCESSES**

Determine how users will sign up for your new secure messaging solution, including who they will contact in your organization. Will they send an e-mail to IT/Telecom, submit a web ticket, or visit the IT office in person?

Define your policy for lost devices. Consider details such as what someone should do if a device is lost or forgotten at home. Does your facility provide spares? Can you forward messages to a pager/other device to ensure shift coverage? Is the employee financially responsible for anything if the device is owned by the hospital?

Establish the procedures for communication devices in the operating room (OR). Will messages be forwarded to other users for a specified period of time? Will a designated staff member be given access to devices during surgery? Are messages to be forwarded to an operating room display or other device within the OR?

Collaborate with clinical staff to gain buy-in on how the application fits into their communication processes. How will your new solution change interaction with operators? Will call-backs no longer be required? When and for what reasons should users reply to messages? How much time will new processes save caregivers and other staff?

#### TRAIN MESSAGE SENDERS ON AVAILABILITY OF DELIVERY RECEIPT INFORMATION

Provide training on the meaning of message response status and determine your protocols for declined or undelivered messages, including escalation rules.

#### DEVELOP BATTERY LIFE BEST PRACTICES

Educate users on the need to charge smartphones every day and deploy charging cables in common areas for back-up. For emergencies, keep a stock of external chargers and battery packs. Develop a plan for handling devices that lose their battery life.

### ROLLOUT

At this point in your deployment, most of the details have been filled in and you will have a solid mobility strategy document for your facility. Initial trials should have identified most technological and procedural issues and given you the opportunity to start developing internal champions to assist with the final phase — rolling out the application across your organization.

#### MARKET THE APPLICATION'S AVAILABILITY

Let departments know that the capability now exists for messaging to users carrying smartphones and tablets. Catch attention with email, posters, newsletters, and kickoff events to generate excitement and let users know how to sign up/get the application. Positive word-of-mouth is your best marketing tool.

#### EXPECT QUESTIONS

You will receive many questions during the first 48 hours after product rollout. Expect very basic questions. Many users will not know what the App Store or Google Play are or how to silence their phone. Don't worry, the questions will quickly subside once the basics are out of the way.

#### COMMUNICATE VALUE

Ensure that the value of "what's in it for me" is communicated. This is a great way to employ the champions you identified during initial trials. Get them to tell the story for you and share what they've learned and experienced. Messages from other clinicians will be the most powerful at eliciting change within the organization. Highlighted benefits might include less time spent calling back to confirm receipt of a message, the ability to message to anyone in the organization from the mobile device, and message security and traceability.

#### MONITOR USAGE

Look at the adoption rate and usage of the new secure messaging solution. Are there certain areas where more communication would be beneficial to boost compliance? Are there workflows that could be further modified to promote adoption of the application?



### SUMMARY

A mobility strategy is a complex series of considerations, and it will likely continue to evolve. This document is intended as a guide to prompt thoughts on the common challenges faced by hospitals during the design, implementation, and continued evolution of a written mobility strategy. Harnessing the diversity of mobile devices used in the delivery of patient care truly is possible, especially with the right plan.



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