

Decision Making Under Pressure at BJC Healthcare

Healthcare

CLIENT

BJC Healthcare, one of the largest nonprofit healthcare organizations in the U.S., serves greater St. Louis with 13 hospitals and multiple community health locations. Its nationally recognized academic hospitals, Barnes-Jewish Hospital and St. Louis Children's Hospital, are affiliated with the Washington University School of Medicine.

CHALLENGE

A freak incident (involving a raccoon, a fire and a transformer) led to a power outage at all 13 hospitals and several service organizations—impacting the care of thousands of patients and affecting thousands of employees. When the power failed, the standard “hot switch” flip to a redundant power source failed for unrelated reasons, and the health system was running on generator power. This represented a high-risk, single-point-of-failure, unacceptable situation.

As time passed, pressure mounted. Stakeholders no longer trusted the IT processes, were concerned about vendor and supplier support, and demanded to be part of the decision on how best to move forward. Stress was mounting with each passing hour.

Distrust was not limited to the IT process. When BJC brought facilitators in to use KT's Decision Analysis methods to guide the way forward, some of the decision makers (a team of high-level stakeholders, IT vendors, IT management and experts) opposed this approach. Prior to beginning the analysis, one team member who opposed KT, wrote down the alternative he believed eventually would be selected.

SOLUTION

BJC's KT-trained facilitator helped the decision-makers evaluate alternative courses of action, assess risks and make a final decision. The team used the data gathered and evaluated acceptable risks by dividing their task into two separate analyses: one to determine the best method for achieving the switchover to power, and one to determine the best time to make the switch.

The Decision Analysis was highly successful, power was restored and issues resolved. KT's systematic rigor kept the tone objective, reduced volatility and clarified the mission. The right people, with the depth of expertise needed, were in the room. High-level stakeholders who were not in the room, including the CIO, received consistent, organized and articulated information that detailed the thinking behind the decision making. The team member that opposed the use of KT Decision Analysis had quickly abandoned the solution he had written down prior to the analysis and was now a convert. His solution, initially favored by many stakeholders, would have used an additional 7,000 hours and \$265,000 in Information Systems resources and 26,560 hours and \$660,000 in hospital resources. It is difficult to measure the additional dollar impact on patient safety, employee productivity and other risks.

Any doubts in the effectiveness of KT processes have evaporated and those involved in the Decision Analysis actively promote its use across the organization.



SCORECARD

Decision-making quickly becomes a high-stakes game within the healthcare industry. Using Decision Analysis, BJC Healthcare:

- Saved in excess of \$800K in hospital time and resources
- Implemented a major reduction in patient risk
- Brought objectivity to risk management
- Created agreement among a diverse team
- Provided a structure for key stakeholders to understand how the decision was made

BJC HealthCare™