**Project Worksheet**

Instructions: Use this worksheet to draft the deliverable of the project.

1. **Business Requirements Document (BRD)**

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| Project Scope |
| Improving operations within a hospital currently struggling with challenges such as patient management, outdated technology, and communication inefficiencies between departments. |

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| Stakeholders |
| * Hospital Administration * Doctors * Nurses * Pharmacy * IT department * Admissions |

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| Business Objectives |
| The Hospital aims to   * Improve patient management and reduce patient wait times * Foster improved communication between key hospital staff * Streamline patients’ records to reduce errors and faster access |

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| Functional Requirements |
| * Collect manage and store patient records, diagnosis and treatment * Easy to assess or update information on patient records * Faster communication between hospital staff * Updates on Doctor calendar and availability to schedule appointments |

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| Non-functional Requirements |
| * Maintain regulatory compliance * Maintain HIPPA policy |

1. **Scenario: Digital Transformation in Healthcare**

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| Stakeholder | Role | Interest | Influence | Involvement |
| Hospital Administration | Welcome patients, collect and assess patients’ records, Schedule and validate appointments. Finances, policy implementation, and coordinating staff. Project sponsor | High | High | Final approval |
| Doctors | See patients, patients’ history and create diagnosis, treatment options and prescribe drugs. End Users | Medium | Medium | System feedback |
| Nurses | Administer treatment, drugs. End Users | Medium | Medium | System feedback |
| Patients | System beneficiaries | Low | Low | Feedback post-implementation |
| Admissions | Assess patients’ information, coordinating admissions. End Users | High | High | System feedback |
| Pharmacy | Provide drugs. End Users | Low | Low | System feedback |
| IT department | Implement, maintain and help staff use new systems. Technical support | High | High | System implementation |

1. **Gap Analysis Table**

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| Current State | Desired Future State | Gaps Identified | Proposed Solutions |
| Manual records | Integrated Electronic Medical Record (EMR) System | Manual records are slow, tedious to assess and prone to errors | Use a digitized, centralized EMR system that allows real-time updates on patients’ information, lab results be easily assessed by other necessary departments |
| Delayed communication | Real-time interna messaging system | Updates on patient records have to be physically transferred and recorded to an in each department | Introduce real-time messaging systems |
| Manual scheduling of appointments | Appointment Scheduling software | Appointments are manually created which can lead to errors, oversights and slow responses to cancellations | Appointment management system to avoid overlaps, and fill cancellations quickly |
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1. **Process Flow Diagrams – To be created in a diagramming tool, such as Lucidchart**
2. **Prioritization Matrix**

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| Requirement ID | Title | Impact | Feasibility | Priority |
| RQ-001 | EMR system | Digital record keeping to provide real-time updates and reduce errors.  Faster communication between departments | High | High |
| RQ-002 | Appointment management system | Faster scheduling and fill cancellations. Reduced wait times | High | High |
| RQ-002 | Internal messaging system | Faster messaging between staff to provide quick in-app and text notifications | High | Medium |
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1. **Technology Assessment Document**

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| Current technology:  Manual record keeping |
| Proposed technology:  Electronic Medical Record (EMR) system |
| Justification for changes:  To provide faster, more efficient and streamlined record keeping to reduce errors and improve efficiency with integrated Appointment scheduling and in-app messaging to reduce patient wait-times and communication delays. |