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**Introduction**

The project schedule shows what needs to be done, which kind of resources need to be utilized, and the due date of the project. It includes start date and end dates along with the milestones that should be met to complete the project on time. According to wrike.com, It is used with work breakdown structure (WBS) for distributing work among team members. To gain a better understanding of the project status there needs to be regular updates of the project schedule. This paper covers the project schedule of Oak Township Medical Center which includes its activities and tasks, sequence of project activities, estimated and assigned duration of each task, relationships, and dependencies between tasks including lead and lag time, tasks, and their dependencies to create the project schedule.

**Activities and Tasks**

According to kissflow.com, the 5 basic steps in the project management process are Project initiation, project planning, project execution, project monitoring, controlling, and project closing. Activities and Tasks of OTMC are described below.

**Project Initiation**

Build project team.

Develop a project charter.

**Project Planning**

Conduct meetings with stakeholders.

Configure MAS

**Execution**

Develop, schedule, and conduct staff training.

Implement MAS in pilot units.

Collect feedback.

**Monitoring and Controlling**

Analyze pilot feedback.

Implement hospital-wide MAS

Monitor for any issues.

**Project Closing**

Evaluation post implementation

Continuous support and adjustments.

**Sequencing the Project Activities**

Activity sequencing is identifying and scheduling the activities that make up a project. This logically ensures that all the needed steps occur correctly and assists us in optimizing resources efficiently. (Guthrie, 2022) Tasks are sequenced based on dependencies and logical progression. Project initiation happens first before collecting requirements. Once the requirements are collected the project charter is developed. The project charter needs to be completed before talking to the stakeholders. After talking to the Stakeholders MAS configuration must happen. MAS configuration must be completed before training starts. Pilot implementation must be done after training. Feedback after Pilot implementation advises for a full phase Roll that eventually leads to Evaluation and Support.

The Total project plan has 5 steps with multiple subtasks. The project work breakdown is as follows

**Estimated duration (24 weeks out of 26-week time provided)**

Team formation/Requirements Collection: 3 weeks (15 working days)

Project Charter: 2 weeks (10 working days)

Stakeholder Meetings: 2 weeks (10 working days)

MAS configuration: 2 weeks (10 working days)

Training: 2 weeks (10 working days)

MAS Pilot Implementation: 2 weeks (10 working days)

Feedback Collection: 2 weeks (10 working days)

Analyze Pilot Feedback: 2 weeks (10 working days)

MAS Full Rollout: 3 weeks (15 working days)

Evaluation and Support: 4 weeks (20 working days)

**Task Dependencies**

Requirements Collection → project charter

Project charter → Stakeholders meeting

Stakeholder meeting → MAS configuration

MAS configuration → Training

Training → Pilot Implementation, Feedback Collection

Feedback Collection → Analysis

Pilot Implementation → MAS Full Rollout

MAS Full Rollout → Evaluation and Support

**Lead and Lag Time relationship and dependencies.**

Training can start after talking to the stakeholders and when the final touches on MAS Configuration are completed (Lead time: 1 week).

There can be a lag of 1 week after Pilot Implementation before going into Full Rollout to address feedback.

**Tasks and dependencies determined to create the project schedule.**

After carefully considering the workflow and the best practices in project management tasks and dependencies are determined. To make sure it is a structured approach that minimizes risk every phase is made to build on the previous one. Project initiation and planning will establish the preliminary work and align stakeholders. Collecting requirements is important to know the present process and identify needs that directly impact the system configuration phase. Training is crucial in understanding the process, staff needs to be educated on the new system. The pilot study will allow test in a controlled environment. It will make sure that issues are identified and resolved before implementing it in the entire organization. Things must happen in a particular order for the result to be successful in a project. One way to execute a project successfully is to plan a task as it must be done and know its dependencies. If we can anticipate these task dependencies, then we will be able to schedule them with more accuracy. When we are managing task dependencies, we need to identify and document the task relationships, communicate dependencies, monitor progress, and adjust the schedule as needed to accommodate any changes or delays. (Laoyan, 2024)

The overall objective of MAS was to reduce medication administration and comply with regulatory requirements. Every task corresponds to a needed action to implement the system. For instance, installing hardware, designing software, and training staff. The various modules at OTMC are not fully implemented. Dependencies between tasks are mostly based on other system status. For example, some tasks depend on Result reporting being fully operational before fully implementing MAS because it may rely on the Result reporting system. The project is divided into many phases, such as initial setup, planning, implementation, and evaluation. Each step has a specific task with dependencies established between these steps, for instance, the implementation phase cannot be done until hardware and software installation are completed. Training cannot be started before the prior phase is completed.

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**Potential Scope Creep and Preventing Strategies**

Added Regulatory Requirements: While the project is ongoing, there might emerge new regulations necessitating change to the system. A prevention strategy for this would be conducting a thorough review in the requirement collection phase and forming a review committee for monitoring changes while the project is running. As the project progresses, many project requirements are added and if there is not a clear decision-making authority it can be difficult to assess it these new requests are in or out of scope. Scope creep may occur when there is no scope management. Lack of stakeholder involvement contributes to scope creep. (Larson & Larson, 2009) Per Wrike, there needs to be 100% transparency and accountability that will make it easier to monitor for change with the prevention of unauthorized change to project scope. A platform where everything related to the project is visible to all stakeholders will make sure that the scope creep is kept at bay.

In the case of OMTC Scope Creep can occur through Stakeholder Requests and stakeholders such as new CMIOs, nurses, doctors or any other can request additional features such as advance clinical decision-making tools or integrate nonmedication functions. The mitigation strategy for this is developing a project charter with a clearly defined project scope approved by all the stakeholders. Change control process along with stakeholders meeting regularly should be included.

Healthcare regulations change rapidly, and new federal or state-level requirements may cause alterations to the MAS. They could expand the project's scope if they are integrated into the system post-launch. The mitigation strategy for this can be regularly monitoring federal as well as stage changes and forming a flexible system that allows future compliance updates without a full-scale **System fix.** Moreover, Wrike promotes 100% transparency and accountability, making it easier to monitor changes and prevent unauthorized alterations to the project scope. By providing a platform where all project details, updates, and changes are documented and visible to all stakeholders, Wrike ensures that scope creep is kept at bay. Scope creep comes with project delays, going over the budget, or roadblocks but it is not a bad thing all the time. We all know that change is inevitable, and people need to evolve, over time presenting a project that answers need usually means changing the scope. Therefore, scope creep is a reality that a great project manager plans and expects. (Gurnov, 2024) Developing a project charter as well as reporting project status

MAS at OTMC can encounter unexpected challenges while integrating with another system, in this case, Stakeholders can request MAS functions that extend the original scope, such as integrating unrelated patient data from other systems **The mitigation strategy is to** set a clear boundary between what the MAS system at OTMC should handle versus what needs to be handled by other modules in the HIS. In the initial planning phase, outlining integration needs with the involvement of IT specialists can be done to prevent unplanned integration.

High Resistance from Staff: If there is high resistance from staff, then it might take longer than the allocated time to complete the project. There is an increase in project scope because of training needs. Regularly updating staff, providing, and receiving feedback, engaging them in the project as well as providing adequate training will help promote acceptance and ease the transition.

**Conclusion:**

By implementing this structured approach, the facility can effectively manage the MAS project, and decrease the likelihood of scope creep with successful implementation within the allocated time and budget.

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