



Tips and Tricks: Preparing to Shadow What are the next steps?

1. Identify a goal and plan to achieve that goal.

Some options include:

- a. Discover patient/staff pathway and flow
- b. Process improvement
- c. Patient experience
- d. Staff engagement
- e. Costing (Patient /Pathway Experience+Back office Processes+Consumables)
- f. **Note:** No matter the goal, it is important to initially observe the pathway from the patient's perspective to engage them and staff. It is the most approachable way to get started and collect valuable data that can be built upon to achieve any other goal at a later date.

2. Determine the start and stop point of the shadowing experience. Break that large experience into smaller segments that can be shadowed within a few hours or a day. Examples include:

- i. Overall experience start/end point: Pneumonia patient when they enter A/E until when they are discharged from the hospital.
 1. Examples of smaller pieces and Shadowing goal of the day:
Shadow the discharge process or shadow the A/E visit
 - ii. Overall experience start/end point: Surgical patient from the office appointment visit to schedule surgery until hospital discharge after surgery.
 1. Examples of smaller pieces and shadowing goal of the day:
Shadow the SOC visit, shadow physiotherapy session in the hospital, shadow patient education class
- b. **Note:** It can be difficult to shadow the entire experience in a single day. While it is ideal to shadow the same patient(s) through the smaller segments, it is also **not necessary** to follow the same patient through the entire multi-day or month(s)-long experience. Since the patient pathway is being shadowed from the patient perspective, it is likely the same at least 80% of the time.



Tips and Tricks: Preparing to Shadow

3. **Create a shadowing roadmap.** List the smaller segments that need to be shadowed. This list can change over time depending on what initial data indicates about the patient pathway.
4. **Anticipate and coordinate with internal stakeholders** to identify the days/times when patients will be present.
 - i. If possible, identify peak times when patients will be present and shadow during those times so that maximum data can be captured.
 - ii. Note: If shadowing a process that can fluctuate depending on the time of day or day of the week, such as discharge, A/E or patient rounding, plan to shadow during variable times to determine what the true current state is for the pathway at each time.
- b. **Contact internal stakeholders** to explain why you are shadowing and what you wish to accomplish (process mapping of patient experience, staff/patient engagement, process improvement, costing, etc)
 - i. Reference “Shadowing in Progress” postcard on www.goshadow.org/resources.
 - ii. If applicable, ask for a schedule so that the appropriate patients can be identified ahead of time.
- c. Plan to) **pre-shadow** or **walk the patient pathway with all shadowers** 1-2 days in advance of the initial shadowing. Spend no more than 5-10 minutes in each segment of the pathway. Introduce shadowers to staff and explain the purpose of shadowing, that no staff or patient-identifying info will be collected and that qualitative feedback and process improvement ideas are welcome.
 - i. Ask staff to give a tour of the patient pathway in their segment of the experience.
 - ii. Take notes about the anticipated patient pathway and note the details below to compare to the actual patient pathway after shadowing.
 1. Ask how long patients normally spend there, who they encounter, for how long, aspects that often go well and often don't go well.
 2. Ask how the transition is to and from each area from the patient and staff perspective.



Tips and Tricks: Preparing to Shadow

3. Reference “Shadowing in Progress” postcard on www.goshadow.org/resources.
 - iii. Note any initial observations such as locations of unclear signage, anticipated time of discharge, rounding, etc.
5. **Advanced:** After pre-shadowing, use goShadow to set up a template of the experiences and segments that will be shadowed.
- a. Experiences are patients to be shadowed. This information can be taken from a schedule provided or entered as a placeholder.
 - i. Title can include: Date, Time of Scheduled appointment, Type of appointment, Patient initials
 1. “01 12 19 0845 New Patient AD”
 - b. Segments represent the patient pathway that will be observed. For a SOC visit, they could include:
 - i. Registration/Waiting Room
 - ii. Exam Room/Evaluation
 - iii. Labs/Diagnostic Imaging
 - iv. Patient Education
 - v. Check Out
 - c. If the shadower has an idea of the people/places who will encounter the patient during the segment, these can be pre-populated into the segments. Examples include:
 - i. Registration/Waiting Room
 1. Locations: Reg Desk, Waiting room,
 2. People: Registrar
 3. Task: Check-in time, Wait time
 - ii. Exam Room/Evaluation
 1. Locations: Exam Room 1
 2. People: Medical assistant, nurse, student, physician
 3. Task: intake (weight, blood pressure, general questions about health, med rec), Wait time
 - iii. Labs/Diagnostic Imaging
 1. Locations: X-Ray waiting room, X-Ray changing room, X-ray room, EKG room, Blood draw room, Bathroom
 2. People: X-ray tech, phlebotomist, EKG tech
 3. Task: Taking X-ray, Time to do MRSA swab, Wait time



Tips and Tricks: Preparing to Shadow

- iv. Patient Education
 - 1. Locations: Waiting room, Patient Education Room
 - 2. People: Student, Educator
 - 3. Task: Video time, Time to schedule surgery, Wait time
 - v. Check Out
 - 1. Locations: Reg Desk, Waiting room,
 - 2. People: Registrar
 - 3. Task: Check out time, Wait time
6. On the **day of shadowing**, arrive early to say hello to staff in the area where the shadower will meet with the patient. If possible, ask staff to identify the patient as they enter so that shadower can introduce themselves and ask the patient if their experience can be observed.
- a. Shadow patient(s) through the identified segment using goShadow or a pen/paper template (www.goshadow.org/resources). Shadow the experience **objectively through the eyes of the patient**. Put yourself in their shoes as they move through the experience.
 - i. Please note the following:
 - 1. **Where** the patient and family go
 - 2. **Who** the patient and family interact with
 - 3. **Observations** of what the patient experiences or does not experience
 - 4. **The time** that the patient spends in each location interacting with caregivers and other staff
 - 5. Note aspects of the experience that go **well** or could be **improved** (these can be indicated by swiping for the thumbs up/down icons)
7. After shadowing, thank the patient and staff for allowing you to observe their experience. Let them know the next steps and if subsequent shadowers will return and when.
8. Within 24-48 hours of shadowing, **review actual-shadowing data and pre-shadowing observations**.
- a. Look for gaps between perceived pathway/experience and actual.
 - b. Note staff and patient feedback and compare to pre-shadowing observations and feedback from staff.



Tips and Tricks: Preparing to Shadow

- c. In shadowing data, flag/tag any feedback or timers of interest. Note why they are of interest and any follow-up steps.
9. **Create a plan to shadow again.** Communicate anticipated timeline with staff.
 - a. Shadow anywhere from 3-10 patients in each small segment before moving on to the next segment of the pathway.
10. **Aggregate Data.** Using Excel or the goShadow reporting platform, create and download process maps, time studies, opportunity/accolade reports, and a comprehensive report.
 - a. Discuss with your team what information should be shared with other stakeholders and staff.
 - b. Determine next steps based off of the team goals, shadowing roadmap and data collected.
 - i. If data is consistent with previous shadowing, opt to shadow the next segment of patient care pathway.
 - ii. Highlight areas for improvement and/or identify what went well during the experience.
 1. If shadowing for quality improvement, identify tests of change and low hanging fruit.
11. **Communicate with staff.** Explain next steps, analysis of the collected data and how their feedback is being integrated into the next steps.
12. **Shadow again.** Communicate anticipated timeline with staff.
 - a. Shadow anywhere from 3-10 patients in each small segment before moving on to the next segment of the pathway.
 - b. Follow steps above as needed to achieve team goals and assemble complete patient care pathway.