An interview with Jeff Oltmann

Biography: Jeff Oltmann has over 20 years of experience in engineering, line management and program management with industry leaders such as Sequent, IBM, Prisma and Gould. He built a 50 person hardware development organization delivering boards, integrated circuits and systems and achieving ISO 9000 compliance in the process. Jeff has received his PMI certification and his management experience includes running programs with budgets of over $100 M and worldwide teams of over 100 members spanning marketing, engineering service and manufacturing. Jeff is an expert in the use and adaptation of many PM tools including Microsoft Project. Jeff has a consulting practice, Synergy Professional Services, specializing in new program management technology. Jeff is an Adjunct Professor with OHSU’s Division of Management.

Interviewer-Hello Jeff, you were recently interviewed in the recent ‘Step By Step Project Management Institute Network Journal’ in June of 2012. In the article it mentions that there are multiple types of project management. Specifically mentioned are two types, Waterfall and Agile. Could you tell me a little more about those?

Jeff-There are many flavors of project management methodology but there are three major ones. The older one that has been around the longest is plan driven and is also known by the name ‘Waterfall’ and its emphasis is to do a good quality plan up front and then focus on executing that plan and making it come true in order for the project to be successful.

That works very well-efficiently in environments where you have a pretty good view of what the future project looks like-your crystal ball is pretty good.

You can use the waterfall method on any size project all the way from a small project that focuses on a specific aspect of some problem or something you want to change or you could use it on a huge project that covers the waterfront of issues you are working on.

Interviewer-How does Agile differ from Waterfall?

Jeff-Agile is on the opposite side of the spectrum from plan-driven so agile focuses on being very flexible and very reactive. For example you might have a plan driven project that is nine months long and the waterfall way you would do that is that early on in month one or two you would create a plan that roughly covers the outline of what the project should do all the way through the end of month nine. In agile you take a different approach. You would take that nine month project and break it up into a series of what are usually called sprints. You can think of them as miniature projects like pearls strung on a pearl necklace. Instead of doing one long project you do a bunch of really short projects, with short meaning 2-4 weeks per project. Then you insist that at the end of every one of those short-miniature
projects you have something working, useful and testable. The next pearl in the string can then build on and advance a little further. It’s a very incremental step-by-step approach.

Agile came out of the software development world. The techniques of agile have been practiced for decades but they have never had a formal name, and about 10 years ago some software development professionals got together and put it in a package. It has taken the software development industry by storm and is transforming the software development world right now. And it is starting to trickle into project management and there are a few folks on the leading edge who are looking at how to apply Agile techniques to things other than software projects. Portland has become a hotbed for Agile, and has become more advanced in it than any other area of the country. As a result, the project management community here has been exposed to Agile quite a bit and so there is a lot of leading thinking going on right now in this area about agile.

**Interviewer**-You mentioned in the article that Portland is a hub and on the leading edge of project management. Could you expand on that comment?

**Jeff**-There are a number of reasons but one of them is that the global expert in applying agile techniques outside of software lives here in Portland. He is a fairly famous author and in fact I was on his review committee and he is pioneering that area. That is one of the reasons that I said Portland is advanced in this area. Also, the Project Management Institute is the number one global body for certification and professional development for project managers. The Portland chapter is very strong. It has over 1300 members which is very large and very active for a city of this size. The local chapter is fairly influential and is pushing these leading edge topics and trying to get people to pay attention to them.

**Interviewer**-Is that also due to the high-tech history of Portland?

**Jeff**-That probably helps. High Tech companies tend to be pretty sophisticated at project management because it is necessary for their survival.

**Interviewer**-How do you see agile and waterfall being applied in Healthcare?

**Jeff**-The strongest application of project management in healthcare is in healthcare IT and that probably comes from the technology roots. People in that part of healthcare already have connections to the high-tech industry and so they have picked up some of those techniques and brought them in. Outside of healthcare IT and bioinformatics the application of project management is much spottier. It’s a lot more ad-hoc. People just do what feels like the right thing to do but there is not much understanding of the methodology or the concepts and how they might apply. Where there is, some of it tends to be waterfall, particularly in construction-the building of healthcare facilities. Those folks come from the construction industry which has a long history of waterfall project management so they have brought some of those techniques in. But when you are talking about clinical areas, hospital administration, clinic expansion and transformation there is less project management. My rough guess is that waterfall is used for about 75% of healthcare projects. There is a small group of people that are practicing agile by accident. They don’t know that it’s agile or that it has agile techniques in it but they have discovered them and are using them.
Interviewer: So it seems like the parts of healthcare connected to other industries tend to have a greater awareness of project management methodologies while those areas of healthcare that are internally focused are not as aware of the possibilities for project management in healthcare.

Jeff: Interestingly I think that healthcare research is a good fit for agile type techniques because where agile shines is where there is a lot of change and you don’t really know what is going to happen in the future. The very nature of research is discovery. You can’t map out a roadmap, at least not at a very detailed level so I think agile is pretty good for that. In the article you may have read about the bio-nutritionists, they were actually at Oregon Health & Science University. We started running the project using waterfall techniques and as the article indicates it got very frustrating because they spent more time planning changes in direction than they actually did getting work done. We switched to agile and things went much more smoothly because the method they were using for running their project was much more adaptable.

Interviewer: In the project management class you teach at OHSU, what kind of people take your class, and do you have examples of how students have applied project management techniques in the workplace?

Jeff: The MBA students are striking in their variety. They are from all over the place. I have had doctors, nurses, nurse managers, unit administrators, those responsible for some area of a clinic or hospital. I’ve had people from healthcare IT, and we even have folks who are not from healthcare, but they would like to get into it. There are some commonalities among them despite that diversity. They all have work experience and range from relatively early in their career to late in their career and wanting to add to their skill sets. They want to build up their management skills and their understanding of management which is something almost all of them did not get in their previous education. They have been focused much more on their health and medical specialties and did not get much of the management knowledge. Typically they are very enthusiastic to learn and are excited about the possibilities. They are a smart group; vocal, engaged, and a real pleasure to work with.

As to how they apply project management, it really varies a lot. Many of them take the project management techniques right back to their jobs with them and I hear back within a week or two that “I tried a certain technique and it helped my meetings be more organized” or “helped my work group get done more efficiently” or “I was able to persuade my boss or a funder that this was a good project to do and they ought to support it because I used the techniques in the class to help communicate to them about the value of the project.”

One of the best things about project management is that projects happen everywhere, in every aspect of healthcare or every type of industry, projects are the lifeblood of many types of organizations so the tools and techniques are very applicable in all sorts of different cases. One of the things I really enjoy is seeing the light-bulb go on when I am able to show somebody some of these techniques and how it will help them make their challenges easier. Like you said at the beginning of the interview, the high tech world has been living and breathing project management for decades and they sometimes stumble or get it wrong, but in general the level of sophistication is very high. But that has not trickled into education, healthcare and other industries. I love being able to show people these tried and true techniques. The response is often “Oh my gosh! This made my life so much easier!”
Interviewer: For a person working in healthcare, how would you suggest they learn more about project management and perhaps move towards advanced project management?

Jeff: Since I am on faculty with OHSU’s Division of Management the first thing I have to say is take a class in one of the programs like the Graduate Certificate in Healthcare Management or the Master of Science in Healthcare Management. There are also a variety of short workshops in project management. I offer a two-day workshop on my own and that’s a nice way to get an overview of the whole thing. There are some good books out there although there is not a lot written about project management in healthcare but there is a guide for researchers that was written by the Howard Hughes Medical Institute. It talks about how to do research in medical fields and they have one chapter on project management in healthcare. It’s a pretty good, basic introduction.

Interviewer: Can you tell me about your project management specialties and your recent road trip to Hawaii?

Jeff: I have a couple of specialties in my practice. Besides project management I focus on something called portfolio management which is the strategic investment side of projects. How do you invest your organizational resources in a collection of projects in the best possible way? I also focus on something called program management and program management is the art and science of managing a collection of projects together in an integrated way to achieve a common result. For example OHSU recently deployed EPIC as did a number of other healthcare organizations. Deploying EPIC within OHSU could be managed as a program. There were dozens of specific projects to implement pieces of that but the entire deployment and that whole collection of projects was managed together under the auspices of a single group of people to make sure it all came together, because if one or two of those projects under the umbrella of the program had not done its part at the right time then the whole thing could have been a failure. Another possible application of program management right now is in the implementation of Coordinated Care Organizations (CCO’s). This means a lot of change for many healthcare organizations, clinics, payers, all sorts of things, so just a single project is not going to typically be enough to transform to a CCO model, but you also can’t have a big uncoordinated collection of projects either because they all need to work together to achieve that objective of becoming a CCO. You could manage that as a program.

With that background, several years ago I was asked by a national company to develop a professional development curriculum for their advanced program managers across the country and I did that for about 2½ years. I took a lot of that curriculum that I had developed for that company and put it into an intensive two-day workshop that covered a lot of the aspects of running programs. I piloted that in Portland a year and a half ago at the request of the local chapter of the Project Management Institute. That went very well so I was asked by the Project Management Institute of San Francisco to teach it down there. I also taught it in Honolulu at the University of Hawaii. These are topics that are for senior project managers who have been in the field for a long time or managers who are running projects at large organizations and need to know how all this stuff fits together, so it’s a little more of a specialized, senior audience. There is a real gap, being that there is a lot of very basic project management education out there and there’s good books out there, but there is not a lot of stuff for this specialized area of ‘how do we manage this collection of stuff so it works effectively.’