



IU HEALTH TRANSITIONS EVS IN 17 HOSPITALS TO ONE STRATEGIC PARTNER

A Case Study



Indiana University Health

RAPID, PROACTIVE MOBILIZATION PLAN ACCELERATES SERVICES CONSOLIDATION

Indiana University Health has 17 hospitals across the state, each delivering on the joint mission of treating the whole person through innovation and excellence in care, education, research and service.

While all the hospitals shared one unifying mission, they each operated their own environmental services (EVS) programs. Some hospitals managed their EVS in-house, while others outsourced them to different service partners. This inconsistency resulted in inefficiencies and redundant costs across the network.

In early 2020, the healthcare system identified that a lack of standardization and cohesive approach in EVS at all its hospitals was not the most optimal, effective and efficient approach. In particular, it found incongruent and limited performance measurement standards and outcomes were hindering continuous improvement opportunities.

To fix this issue, IU Health decided to bring EVS under one systemwide support umbrella, with a single outsource partner. The organization wanted to identify all options, strategies, best practices and protocols to achieve its standardization business goals, including cost reductions and savings, high-quality service delivery, patient and employee experience, and more effectively deliver IU Health's brand promise.

IU Health chose Aramark, which had been managing EVS in two of its locations for four years. The impact across the healthcare system was immediate and significant. Within eight months, IU Health achieved its best systemwide throughputs in six years.

How Aramark Helped IU Health Deliver on Brand Promise:

- Business goal standardization
- Cost reductions and savings
- High-quality service delivery
- Elevated patient and employee experience

The IU Health team credits several factors for the successful transition of 17 hospitals in a short timeframe, including the deployment of a proven mobilization process, a “seek-to-understand” philosophy, a proactive “act-with-urgency” attitude and a “right-to-win” cultural alignment objective. These were backed up by a strategy that was thoughtful, deliberate and agile. As a result, both administrators and staff members were engaged in and excited about the transition, which helped to support and accelerate the entire process.



Deploying a Wave Transition Schedule

With a focus on minimizing impacts to the organization's culture and community, the Aramark/IU Health mobilization team created a "wave" or phased approach to the services transition. Along with providing a manageable framework for change, this approach also minimized negative impact on caregivers and patients.

IU Health's services transition was organized into five waves. A "seek-to-understand" philosophy guided the order in which the hospitals were phased into the new single-provider service structure. Understanding how each facility operated, how they were interconnected, and their individual leadership structures informed the ideal transition schedule.

The transition plan also accounted for other factors, such as the number of beds in each facility and the critical nature of the patients' healthcare needs, as well as each hospital's unique culture and community. Armed with these insights, the mobilization team created a blueprint and projected timeline for the phased transition.



Mobilization Plan Accelerates Changeover

During the mobilization phase, the teams worked together in a well-coordinated partnership on every task, with a defined plan of action guiding the entire process. Regular meetings facilitated clear, consistent communication and efficient project alignment. Shared tasks provided a deep understanding of processes.

To help support the wave schedule, IU Health provided a dedicated project manager as a key point of contact within the organization. This ensured all issues received immediate response. To support the transition, Aramark provided a mobilization team that included a local bench of leaders — including three subject matter experts in EVS.

The mobilization team began detailed work right away — such as scheduling EVS staff training. Having local experts on the team proved to be particularly beneficial when COVID-19 travel restrictions prevented on-site participation by support personnel from other locations.

3 BIG WINS FOR IU HEALTH-ARAMARK PARTNERSHIP

WIN 1: TRANSITIONED EVS AT 17 HOSPITALS

A proven mobilization process, a “seek-to-understand” philosophy and an “act-with-urgency” attitude guided IU Health’s large and complex transition from multiple EVS programs to a single service provider through a waved approach.

The process was not frantic, but slow and steady to ensure nothing fell through the cracks. In seeking to understand, the teams worked together to meet, share ideas and forge relationships that would carry them through the process and beyond. The urgency factor ensured that tasks were addressed proactively and without delays.

The team embarked on a travel marathon to all four corners of Indiana and visited the 17 IU Health hospitals. They were able to tour each facility, hold face-to-face meetings with key staff members and share valuable ideas and insights.

As a result, the partner clearly understood each facility’s individual needs. For example, they understood what cleaning tools and products each facility used, along with patient room cleaning schedules so that equipment and workflow could be optimized more efficiently and with valued staff input.

WIN 3: DELIVERED A RAPID RESPONSE EVEN DURING CHALLENGING TIMES

The mobilization team adopted an “act-with-urgency” philosophy early in the transition process, and before the COVID-19 outbreak, which made a significant difference in IU Health’s pandemic response.

In fact, the new level of consistency in EVS helped the entire healthcare system better manage the monumental challenges brought on by COVID-19. Everyone was executing against the same game plan in an organized and concerted fashion. This sharpened the team’s ability to effectively operate several supportive services transitioning out of the pandemic, as healthcare department services normalized across the entire system.

WIN 2: REINFORCED CULTURE AND RETAINED 90% OF TEAM MEMBERS

To maintain and enhance the long-forged culture at IU Health, the new team took a “right-to-win” approach. This meant becoming grounded in the organization’s existing culture and being careful with language and conscious of Midwestern values.

This approach was demonstrated by regular meetings that enabled continual two-way communication prior to each transition. Collaborative communication generated empowerment and management-level buy-in, which filtered down through the employee ranks. As a result, employees didn’t feel displaced or unappreciated and an EVS team retention rate of 90% was achieved.

In fact, rather than causing resistance among the staff members, the transition generated excitement. As each facility transitioned to the new services partner, employees happily anticipated making the switch. Because of the genuine team enthusiasm for change, the tentative projected transition dates became actual transition dates.

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