



**Lakeridge  
Health**

# **The Clinical Information System Partnership**

Clinical Transformation through Technological Innovation

October 28, 2015

# Objectives

1. Lift the CELHIN Clinical Information System (CIS) hold order
2. Address CELHIN questions
3. Provide comfort on financial capabilities
4. Obtain support from the CELHIN that our clinical risk and needs outweigh financial risks

# CE LHIN Request

1. Clear articulation of the **governance structure** for the CIS project
2. An outline of how hospitals will **finance the purchase** of the software and hardware to build and implement the CIS; and
3. Assurance that your partners are moving to one data centre and **fully integrated Information Technology support structure** with a common help desk for shared back-office services

# HIS Renewal Advisory Panel Requirements

1. Strong **partnership model** based on the **optimal** level of **consolidation**, and **supported by relevant LHINs**
2. An evidence-based **procurement plan** including a full assessment of **procurement risks** aligning with **provincial standards and specifications**
3. A **long-term financing plan** that:
  - Is based on a careful analysis of both capital and ongoing operating expenditures;
  - Is based on sound financial management policies, such as matching borrowing to the life of assets;
  - Does not compromise a facility's ability to meet capital or equipment needs;
  - Has the approval of the hospital's board; and,
  - Is accompanied by a written confirmation that the ministry will not be asked to provide any additional funding on a multi-year basis for HIS renewal or for other known or anticipated life-cycle capital replacement requirements.

# Governance / Partnership

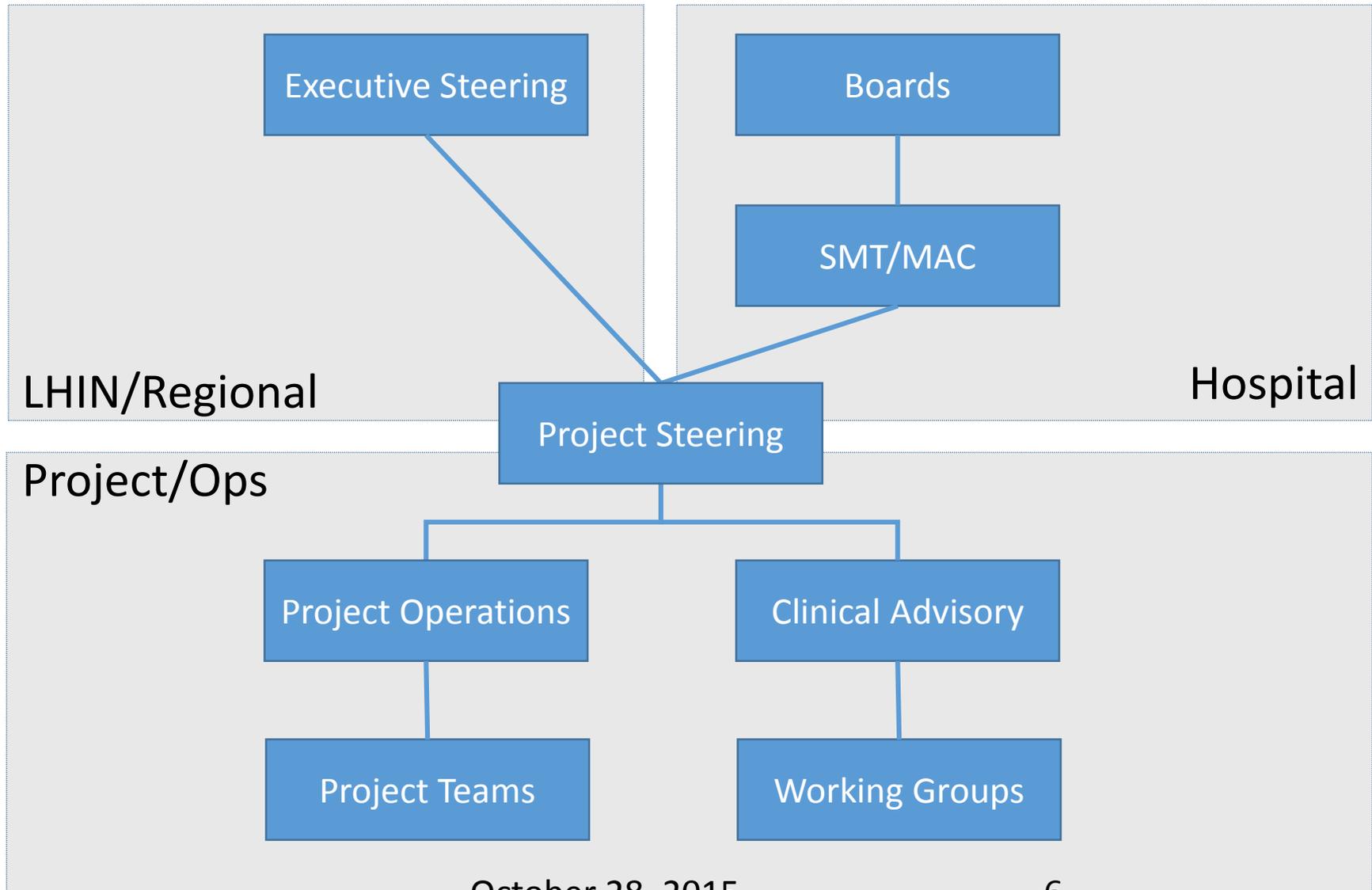
## Have

- Memorandum of Understanding
- Governance – Best practices from LHS, Grey-Bruce
- Cost-sharing model

## Need

- Common procurement
- Privacy and data sharing agreements
- Plan to develop a master agreement
- Implementation and sequencing

# Decision Making

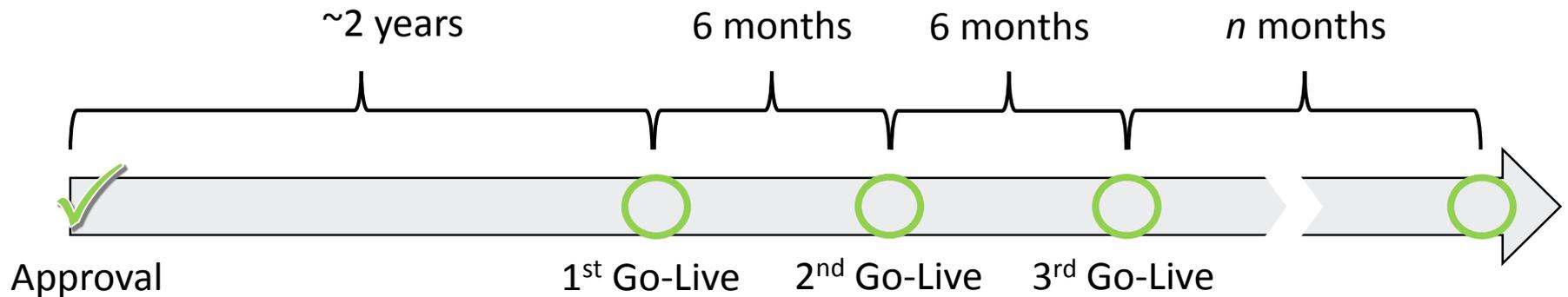


# Self-Financing

- Boards of Directors committed to fund
- Conservative modelling of costs
- Cost sharing a function of partner revenue

# Deployment Timeline

Some partners need more time to finance;



# Operating Impact

- +1-2% of Organizational revenue
- 30-40% recovered through operational savings
- Additional transformational savings, tied to scope

# Shared Services

- Common clinical system
  - One shared system
  - One distributed support team
- Core IT (Clinical, Business, Infrastructure)
  - Defining scope when project was frozen
  - Consolidate based on business case analysis
- Extended Benefits and Opportunities
  - Shared clinical resources (Pharmacy, Lab)
  - Off-hours support
  - Synergies

# Procurement

## MOHLTC Concerns

- Ability to expand hubs to the 'right' size
- Right system at the right price
- Procurement and implementation risks
- Consistency of practice and standards

## Our Approach

- Expansion-ready, open to joining a leader
- Competitive procurement for best price
- Risk management plan
- Principle of using external standards

# The Need

- Patient safety
  - Communication
  - Medication Management
  - Continuity of Care
  - Standardized Care
- Physician recruitment and retention
- Efficiency / HSFR

*“The **greatest capital need** involves the acquisition of a **modern clinical information system** to replace the myriad of systems and manual processes that currently exist. The Board and leadership is aware that the **current system is a significant liability** and in many respects poses **risks** including **inefficiencies**, lack of **accurate and timely data** for clinical and decision support, and detriments to physicians and health provider **recruitment and retention**. The organization is encouraged to work with their Foundation, LHIN and the Ministry to recognize this **critical shortcoming** and develop a plan to ensure the organization, its people and patients have a clinical information system commensurate with any modern hospital.”*

- Ross Accreditation Report



# The Risks

**Action**

**Inaction**

