

Update for September 2011

SUBMIT is a web-based project to improve patient Wait List management and Wait Times reporting for surgeons and hospitals in the CE LHIN. The product, Novari Health, is being implemented in 7 Hospitals with surgical programs and will be completed by March 2012.

Work completed in September

Note: Phase I has moved from the Planning to Implementation stage for all three hospitals.

1. RVHS: Rouge Valley Health System has completed their full rollout of the GO LIVE process for their surgeons. Over a two week period, the hospital used the train the trainer model with key hospital staff who then trained the surgeons' assistants.
2. TSH: The Scarborough Hospital's Test Environment will be signed off in September. The revised implementation model uses the Test Environment for review and completion of any changes needed, which shortens the timeframe and simplifies the implementation and rollout in Live. Novari provided education for TSH key stakeholders.
3. LHC: Lakeridge Health System's Test Environment signoff has been completed and their production or "Live" build has begun.
4. PICIS: Testing of the 3rd interface is ongoing. The test team from RVHS and LHC are going through a set of test cases. Signoff of the 3rd interface is to be completed Sept. 25, and full testing of all interfaces (i.e. End to End testing) will be completed by the end of Sept.
5. Internet access: Internet access for Surgeon's offices has been installed and is in use at TSH and RVHS.
6. Phase II planning: Preparations have begun and a package of implementation templates has been developed. An initial kick-off meeting with each of the Phase II hospitals was undertaken in September.
7. Phase II budgeting: A review of the budget has begun with the CE LHIN. Negotiations with the vendor will begin at the end of Sept.
8. CCO approvals: The SUBMIT project received approval for Phase I hospital participation in Cancer Care Ontario's project for complex migration from Access to Care – CCO.
9. Agreements: Documentation and agreements prepared for review and signature for each organization:
 - Memorandum of Understanding;
 - Revised Governance package including internal and external SUBMIT model;
 - Hospital software agreements for the interface and the field testing; and
 - Draft Data Sharing Agreement for hospitals to both host and share the information.
10. DI requirements for NOVARI: Discussion with the Diagnostic Imaging group to develop user requirements for Novari (after Phase II) was initiated.
11. eHealth Achieve submission: The project team provided a submission to the Achieve awards panel in the spring for the integration and innovation awards.

Challenges during September

1. WTIS project alignment: Project alignment has begun at CCO. The challenges have been to: understand the requirements of CCO changes into the Novari system and ensure that the information is quickly provided to NOVARI for them to develop the changes.
2. Internet access: Testing identified several unique issues with using the internet to run Novari. Intensive testing with the equipment vendor has solved most of the issues. Printing for all users and some access issues are still being resolved.
3. PICIS OR system interface: Testing on the three interfaces has been slow and complex. The schedule for completion has extended two weeks past the expected completion date.
4. Additional provider licences: TSH identified in August an additional 8 providers requiring licenses that were not originally included in the first budget. Novari will provide additional licenses to cover these providers.
5. Agreements: Completion of Agreements for participating hospitals have not all been signed. In October, the formal agreements will be reviewed and signed to complete Phase I.

Next Steps in October

1. Completion of GO LIVE for all three hospitals
2. Documentation and further use of the PSS module (system supporting the pre-op clinics)
3. Management of internet access to the organizations
4. Formalization of change and issues management processes
5. Phase II planning continues
6. Standards subcommittee of the WTSPG to review what data standards can be implemented in Novari to support regional reporting
7. Access to the LHIN for the aggregate data for their review
8. Discussions with the DI group and Novari on development of the DI application

Business Value

1. Offer a web-based solution to the surgeons to electronically manage their wait lists and provide automated rule-based data to the provincial WTIS without data duplication
2. Connect the Surgeon's Wait List management, OR booking, Pre-screening Clinics and Admissions areas to provide a real-time and transparent view of patient progress
3. Provide electronic transfer of booking packages and supporting documentation
4. Provide access for Surgeons to all their OR bookings at multiple privileged site(s)
5. Ability to provide aggregate data (viewing and reporting) to improve the data quality and reporting of Wait Times at a regional level