

Patient & Client Management Systems news

An integral part of HealthSMART, Victoria's Whole-of-Health ICT Strategy

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Introduction

HealthSMART, Victoria's Whole-of-Health Information and Communication Technology (ICT) Strategy, has been developed to provide direction and guidance for the development and implementation of ICT across the Victorian public health sector.

iSOFT and TrakHealth contracts

After an extensive procurement process contracts have been signed with two vendors to provide a Victorian patient and client management systems solution.

iSOFT will provide the HealthSMART integrated patient and client management system via i.Patient Manager, while TrakHealth will provide the stand-alone HealthSMART client management system, TrakCare.

The HealthSMART Patient & Client Management Systems solution will provide, for the first time in Victoria, a shared, integrated platform of patient and client tools that will

fundamentally change the approach to the provision of information technology to the Victorian Public Health Sector.

The signing of both contracts brings to a close the procurement phase of the Patient and Client Management Systems Project. This phase has been significant in terms of both time and resources and has been characterised by the participation of a very large number of individuals representing their colleagues and the sector. Such extensive consultation means that health professionals get the best possible solution, selected by and for, health professionals.

Statewide implementation planning studies

An implementation planning study (IPS) is nearing completion with iSoft for the integrated solution, and an IPS has recently commenced with TrakHealth for the standalone solution.

A statewide IPS consists of a number of components that define the way agency implementations will be undertaken. The major components of an IPS are:

- **Governance structure:** operation and membership of the health agency steering committee, health agency project team, project reporting and issue and risk management
- **Technical architecture:** hardware and configuration required to run the application
- **Integration strategy:** interfaces and messaging requirements for the applications to send and/or receive information
- **Data migration strategy:** types and volumes of information which will be extracted from the legacy applications currently in use and then loaded into the new applications
- **Reporting:** local reporting requirements in addition to the DHS reporting requirements
- **Implementation strategy:** all phases and activities undertaken for an agency to commence an implementation through to the system 'go-live'

Patient & Client Management Systems Portfolio

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- **Training strategy:** the categories and numbers of staff to be trained and the component of the application in which staff will be trained.
- **Environment management:** the technical environments which will be in use ie. test, training and production and the ongoing management.

At the same time, work is being undertaken towards the final definition and delivery of a statewide footprint for each application.

Statewide Footprint Committee

'Statewide footprint' refers to the HealthSMART versions of i.Patient and TrakCare to be implemented in Victorian Public Health Sector agencies. The statewide footprint defines the functionality and specifications to which the application is built and implemented across the state. A local IPS allows for small customisations at each agency, but on the whole, the statewide footprint defines what the end product will look like and how it will be implemented. This ensures that the application is a true statewide solution and customisations at each agency are kept to a minimum.

The Statewide Footprint Committee comprises representatives of the lead agencies. It meets on an 'as required' basis. Its role is to monitor the use of the HealthSMART patient and client management applications, and at certain points, undertake reviews to ensure that the functionality continues to meet Victorian requirements.

Annual reporting changes are one example of where applications may require modification in order to meet new reporting requirements. In addition to reporting, as agencies implement the system, they will find that the system could be modified to better support their work practices.

When these enhancements are identified, the Statewide Footprint Committee will evaluate and prioritise the requested changes and as funding is made available, the vendor will be requested to develop the required functionality.

Together with the definition of the State Wide Footprint, an extensive gap analysis has been undertaken. The gap analysis process defines any parts of the existing version of the software that requires enhancement or modification in order to support the delivery of care in a Victorian-specific way. From this process, the vendor incorporates the identified gaps to extra functionality to the Victorian product.

Frequently asked questions

Q. What is the difference between the iSOFT system and TrakHealth system?

The iSOFT Integrated Patient and Client Management System is i.Patient Manager and includes 'bed-based' functionality as well as community health functionality for use by health services and rural alliances. The TrakHealth standalone Client Management System is 'TrakCare' and provides community health functionality only. It will be used by independent community health agencies.

Q What functionality do the systems have?

Both solutions have the following functions:

- Patient/client identification and registration (PMI)
- Alerts management
- Consent and privacy management
- Problem identification, assessment and referral management
- Waiting list management
- Health promotion
- Case management
- Appointment/resource scheduling
- Non-admitted/community billing and brokerage
- Document/medical record management
- Clinical classification
- Freedom of Information management
- System administration
- Reporting (internal and statutory).

In addition, the i.Patient Manager solution has the following functions:

- Emergency presentation
- Maternity bookings
- Theatre management
- Bed management
- Admissions/transfers/discharges
- Inpatient billing
- Cancer registration.

Q. Will agencies be required to produce a business case for implementing the Patient and Client Management Systems?

Lead agencies are required to submit a business case to their Board for the implementation of the HealthSMART Patient and Client Management Systems. A standardised business case template will be available to all agencies participating in HealthSMART. Lead agencies are prepared to share their business case development process and documentation.

Q. What assistance will be provided to agencies during implementation?

For the community sector, two implementation teams will assist agencies to prepare for and implement the TrakHealth system. Application support specialists will assist the primary lead agency health services with the implementation of the iSOFT system before transitioning into the HealthSMART Data Centre. These two groups will assist agencies to get ready for implementation, configure the system, train staff and test the system.

Q. What is the planned implementation schedule?

The statewide implementation planning studies (IPS) are underway and the implementation schedule is being finalised. At this stage, the first independent community health agency is scheduled to commence implementation in the fourth quarter of 2006. Subsequent implementations will occur in a staged approach.

Q. I heard there has been a demonstration of the TrakHealth product. When is the next one and when can I view the iSOFT product?

A demonstration of the TrakHealth application was held on 29 March 2006. More than 60 senior metropolitan health service managers and representatives attended the demonstration.

The session provided a very broad overview of the product and included a discussion on agency readiness to implement and a draft agency implementation approach.

More demonstrations are being planned to demonstrate specific areas of functionality.

A demonstration of the integrated patient & client management system is being organised. At the moment, the format of the demonstration and dates are being finalised with the vendor. Once finalised, these dates will be widely communicated to the sector.

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