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CCCN Project Assessment

CCCN Steering Committee
February 16, 2007

Eleanor Littman, Project Director
Marta Hotell, Project Manager



Agenda

- Current Project Requirements
- Assessment of Point of Care Requirement
- Staff Recommendations
- Committee Discussion
- Refining Future Requirements
- Next Steps



Current Project Requirements

- Community-wide registry (incl. safety net)
- Able to expand to Monterey, San Benito(?)
- Diabetes ⇔ Other chronic diseases
- Supports existing point-of-care tool
 - Non-EHR users
 - Transition to EHR
- Minimum software development

[October, 2006 Sustainability Analysis]

Analysis of Alternatives

	#1 Current Registry	#2 Buy DMS	#3 Solutions
Cost to complete	\$	\$\$\$	\$\$
Expandability	○	●	●
Scalability	○	○	○
Collaboration	○	○	●
Grant funding	○	○	●
Potential revenue	○	○	○
Community coordination	●	○	●



Assessment of Point of Care Requirement

- Review of Current and Projected Usage
 - Utilization Statistics
 - User Interviews
- Assessment and P of C tool Statement of Work from Thuridion
 - Completion of Current Work Requirements
 - P of C Development Environment
 - Completion of open bugs and required enhancements
 - Preparation of tool for maintenance and support



Assessment of Point of Care (cont.)

- Evaluation of Solutions and P of C tool
 - Tomas Moran (Solutions/Bizin) Statement of Work
 - Transition to Solutions Backend
 - Integration of P of C tool into Solutions
 - Walter Sujansky Evaluation and Recommendations
 - Conversion of P of C tool to Solutions backend
 - Evaluation of P of C tool for long term maintenance and supportability



Staff recommendation #1

Eliminate Point of Care tool as a Project Requirement

Rationale:

- Continued use of current tool:
 - Too many resources required
 - Too little usage
 - Too many changes in current and projected environment for projected value
- Purchase / Implementation of other 'off the shelf' applications with P of C capability (e.g. Docksite; Meditrx)
 - Same issues at this point in project



Staff recommendation #2

Discontinue use and support of point of care registry

Rationale:

- Re-direct remaining project funds to plan and implement other Project requirements (e.g. community-wide chronic disease registry)
- Head start for pursuing other grant funding for HIE including County AHRQ grant



Staff Recommendation #3

Transition Plan to support users, staff and research

- Maintain end user support of CCCN registry during transition
- Transition of CCCN registry back to PMG operation
- Extract current CCCN registry data
 - Provide current users with their information
 - Retain extracted data for further CCCN research
 - Preserve data for later usage in community wide chronic disease repository
- Set time line



Re-examine Project Requirements

- Community-wide registry (incl. safety net)
- Able to expand to Monterey, San Benito(?)
- Diabetes ⇒ Other chronic diseases
- Minimum software development
- *Support existing point-of-care tool*
 - *Non-EHR users*
 - *Transition to EHR*



Next Steps...

- Re-define requirements
 - Chronic disease repository
 - (Real time) Health Information exchange
 - Other?

- Staff Assessment
 - Next level of Solutions
 - Alternative HIE software
 - HealthVision
 - Medstat
 - Elysium
 - Etc.



First a community discussion...

- What is our vision of health information exchange in Santa Cruz County in 3 to 5 years?
- How should we get there?