

Memorandum

Date: Sept. 25, 2015

To: All staff and physicians/medical staff

From: Mary Ackenhusen, President & CEO, Vancouver Coastal Health
Dianne Doyle, President & CEO, Providence Health Care
Carl Roy, President & CEO, Provincial Health Services Authority

Re: **Lions Gate and BC Children's & BC Women's Hospitals Chosen as Initial Sites for Clinical & Systems Transformation Project Implementation**

We want to update you on our latest planning regarding the implementation of the Clinical & Systems Transformation (CST) project.

As you know, we have retained Cerner to assist the CST team in completing and implementing a new project plan. An important early decision in developing this new project plan is to confirm the first sites to implement, and we want to ensure we are making this decision on the basis of proven principles for successful implementation. Best practice in a multi-site project like CST is to begin implementation in a mid-sized hospital with a wide range of clinical services, before moving on to more complex or specialty sites, so as to enable learning and testing in a moderately but not extremely clinically-complex setting.

Based on these principles, and extensive consultation between representatives from across our organizations, we are pleased to advise that implementation of CST will begin with Lions Gate Hospital (LGH), followed by BC Children's & BC Women's (C&W) Hospital. Sechelt Hospital, which shares a similar existing Cerner system to C&W's, will also be implemented at roughly the same time as C&W. A number of factors were considered:

- LGH is an ideal mid-sized hospital, large enough to offer a wide range of services, including oncology and pediatric care.
- LGH has an aging and fragile technology system that requires replacement.
- Our timeframe to begin implementation of CST has been delayed, as a result of the project reset. C&W's new Teck Acute Care Centre will open to patients in November 2017. This timing could create the risk of C&W having to undertake two large change efforts at the same time.
- Implementing at LGH first will build the experience of the CST team before moving on to more specialized and complex implementations, helping ensure success.
- Enabling the option for C&W to move in to its new facility with its existing Cerner system will reduce the risk associated with undertaking two large change initiatives at the same time.

It's important to note that we are still determining the timing and details of these implementations, and consulting with operations and clinical leaders on the sequencing of other sites. Confirming the first two sites will enable the team and Cerner to complete the new initial project plan, and we will communicate these details as they are finalized in the coming weeks.

In the meantime, we would like to thank staff and physicians for your ongoing support of this important project, and the benefits it will deliver for patients, families and care teams.

For more information

We will continue to provide regular updates on the project to keep you informed. If you have any questions or concerns, please email us at info@CSTproject.ca.

Questions and Answers

Q: When will specific implementation dates be announced?

A: We will not have firm dates until we have finalized the new project plan. This plan will give us a clear picture of the work required to finish design, build and test the new clinical processes and system, and prepare for implementation.

Q: How does this new plan work with the C&W Redevelopment Project timelines?

A: Specific timing around implementing CST at C&W will be determined in consultation with C&W leadership as part of the new CST project plan.

Q: What about Sechelt Hospital?

A: Sechelt Hospital will remain one of the early sites to implement CST. We expect that Sechelt will implement at roughly the same time as C&W, or just before or after.

Q: When will the order of implementation for other sites be announced?

A: We anticipate the preliminary order of the other sites to be established by November, following consultation with clinical and operations leaders. This order will be tentative, and will be confirmed or revised as the project proceeds.