

## STAFF REPORT INFORMATION ONLY

# Toronto Public Health Capital Budget Variance Report for the Five Months Ended May 31, 2014

Date:	July 23, 2014
То:	Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

### SUMMARY

This report provides an update to the Board of Health on the Toronto Public Health (TPH) Capital Budget Variance for five months ended May 31, 2014.

TPH spent \$1.140 million or 22.8 percent of the 2014 Approved Capital Budget of \$4.991 million. The year-end capital expenditure is projected to be \$4.345 million or 87.1 percent of the approved cash flow.

#### **Financial Impact**

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

#### **DECISION HISTORY**

The TPH 2014 Approved Capital Budget of \$4.991 million is comprised of the following Information Technology Projects:

- Healthy Families/Healthy Living (HF/HL) System Integration
- Web Re:Brand TPH Implementation
- Infectious Disease Control Information System
- Healthy Families/Healthy Living (HF/HL) Point of Care
- CDC Wireless Rollout
- Healthy Environment Inspection System

#### COMMENTS

As at May 31, 2014, TPH spent \$1.140 million or 22.8 percent of the 2014 approved cash flow of \$4.991 million. The year-end capital expenditure is projected to be \$4.345 million or 87.1 percent of the approved cash flow.

	2014	As of May 31, 2014, 2014			Year End	
	Approved Cash Flow	Actuals \$	Variance \$	Spent %	Projected Actuals \$	%
HF/HL Systems Integration	487,588	173,967	313,621	35.7	487,588	100.0
WEB re:Brand TPH Implementation	302,652	78,070	224,582	25.8	302,652	100.0
Infectious Disease Control Information System	687,533	337,292	350,241	49.1	687,533	100.0
HF/HL Point of Care	2,233,768	454,304	1,779,464	20.3	1,771,470	79.3
CDC Wireless Rollout	602,000	3,222	598,778	0.5	418,887	69.6
Healthy Environment Inspection System	677,000	93,211	583,789	13.8	677,000	100.0
Total	4,990,541	1,140,065	3,850,476	22.8	4,345,130	87.1

As part of its project management process and consistent with the City's practice, TPH has adopted a colour code (i.e. green, yellow or red) to reflect the status of capital projects. The overall status of each capital project is based on budget, schedule and scope considerations. The colour codes are defined as follows:

- Green on target to meet project goals (scope/functionalities), and on budget and schedule
- Yellow at risk of not meeting certain goals, some scope, budget and/or schedule issues and corrective action required; and
- Red at risk of not meeting goals, significant scope, budget and/or schedule issues and corrective action required.

The following provides summary information on projects within the 2014 Capital Budget.

#### • <u>HF / HL Systems Integration:</u>



The purpose of this project is to develop and integrate several different systems into the Toronto Community Health Information System (TCHIS) framework including the Provincial Integrated Services for Children Information System (ISCIS). ISCIS-TCHIS integration involves the design and implementation of the necessary interfaces to facilitate electronic transfer of data between the two systems.

The benefits of the enhanced system include: 1) enabling TCHIS to comply with legislation surrounding records retention; 2) reducing duplication of work by unifying over 30 legacy applications; 3) reducing risk by increasing data security and integrity; and 4) enhancing public health nurses' (PHN) ability to provide better quality service to more clients by enabling access to comprehensive client files and TPH resources.

The HF/HL Systems Integration project's capital expenditures totaled \$0.174 million representing 35.7 percent of the 2014 approved cash flow of \$0.488 million. Currently, this project is on schedule, in scope and the budget will be fully spent.

#### <u>Web Re:Brand TPH Implementation:</u>



The purpose of the project is to redesign the TPH website and implement the corporate content management software to automate the web posting process in order to improve the accuracy, relevance and timeliness of web content. TPH will conduct a content, structural and functional review of the web site to identify improvements in functionality and usability. TPH will continue collaborating with the corporate Web Revitalization Project to implement the priority improvements identified during the TPH web content migration.

The Web re:Brand project's capital expenditures totalled \$0.078 million representing 25.8 percent of the 2014 approved cash flow of \$0.303 million. Currently, this project is on schedule, in scope and the budget will be fully spent.

#### Infectious Disease Control Information System:



This project will implement a provincially mandated national public health information system. This system will encompass an immunization information system, a vaccine ordering and distribution system, health alerts, and a case, contact, and outbreak management system for reportable diseases. TPH is partnering with the Province to develop a system that will meet both the provincial requirements and the complex needs of the City of Toronto. This 100 percent provincially funded project uses TPH expertise and diverse requirements to assist in the on-going development and implementation of the pan-Canadian Panorama System for infectious disease control.

As one of six Builder Health Units in the Province, TPH's involvement is funded by the Ministry of Health and Long-Term Care (MOHLTC) and includes developing the implementation approach, product evaluation, configuration, data migration, and reporting to ensure that the solution meets TPH's requirements and aligns with its business processes.

Implementing this system will provide TPH with a comprehensive, inter-operable integrated public health information system that, once fully implemented, will replace existing obsolete systems and provide Ontario's Public Health professionals - both provincially and locally - with: 1) a common immunization registry, improving the understanding of immunization coverage vaccine rates and strengthening immunization programs; 2) a shared view of vaccine inventory, increasing the efficiency of vaccine delivery and the redistribution of

vaccines during an outbreak and supporting timely and rapid response to a vaccine shortage in one area or another in the Province; and 3) a common repository of communicable disease and outbreak data, reducing the risk to the population through early detection, rapid verification and appropriate response to epidemic-prone and emerging disease threats.

The Infectious Disease Control Information System project's capital expenditures totalled \$0.337 million representing 49.1 percent of the 2014 approved cash flow of \$0.688 million. Currently, this project is on schedule, in scope and the budget will be fully spent.

#### • <u>HF / HL Point of Care:</u>



This project will implement wireless devices which securely communicate with the TCHIS system and synchronize data between the mobile units and the TCHIS database. Implementing this project will: 1) increase quality of care through enabling professional staff to have access to materials, documents, health promotion literature and related policies and procedures on-site during a home visit; 2) improve accuracy of documentation by reducing the time gap between client interaction and documentation of these interactions; 3) improve compliance to documentation guidelines, standards and policies; 4) provide increased accountability with regard to the information contained within the customer record; and 5) increase quantity of care through point of care (POC) access by enabling staff to spend a greater proportion of each work day engaged in professional level program and service delivery.

The HF/HL Point of Care project's capital expenditures totalled \$0.454 million representing 20.3 percent of the 2014 approved cash flow of \$2.234 million. Delays in our ability to purchase and test mobile devises in 2013 and early 2014 will defer rollout into 2015. Hiring of support personnel has been deferred to 2015 due to reduced number of users to support. This necessitates the carryover of \$0.462 million into 2015.

#### • <u>CDC Wireless Rollout:</u>



This project will enable staff in the Vaccine Preventable Disease (VPD), TB and Personal Service Settings (PSS) components of the Control of Infectious Disease /Infection Control (CID/IC) programs to enter into and access data directly from health information management systems while in the field. Wireless technology will be used to improve CDC business processes and service to clients.

The CDC Wireless Rollout project capital expenditures totalled \$0.003 million representing 0.5 percent of the 2014 approved cash flow of \$0.602 million. Delays in hiring of the project team in 2014 will defer the completion of the TB Directly Observed Therapy (DOT) mobile

application and rollout of devices until 2015. Additional contracted resources will be acquired in 2015 to accelerate completion of mobile application in 2015. This necessitates the carryover of \$0.183 million into 2015.

#### <u>Healthy Environment Inspection System</u>



This project will provide Public Health Inspectors while in the field with mobile access to the Toronto Healthy Environments Information System (THEIS). The corporate Remote Computing System (RCS) mobile solution utilized by Buildings and Municipal Licensing will be leveraged to provide mobile functionality to inspectors. As a result, this solution will: i) allow inspection data to be entered and printed at the inspection site thereby reducing travel time required to return to the office and reducing the need to enter data in the office; ii) reduce the overall time to perform inspections; and iii) eliminate duplicate data entry by HE clerical staff and Toronto Health Connections.

The Healthy Environment Inspection System project's capital expenditures totalled \$0.093 million representing 13.8 percent of the 2014 approved cash flow of \$0.677 million.

Currently, this project is on schedule, in scope and the budget will be fully spent.

## CONTACT

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## SIGNATURE

Dr. David McKeown Medical Officer of Health

#### ATTACHMENT

Appendix 1:TPH 2014 Capital Budget Variance Report for the Five Months Ended May 31, 2014