DA TORONTO

HL19.11 REPORT FOR INFORMATION

Toronto Public Health Capital Budget Variance Report for the Twelve Months ended December 31, 2016

Date: May 3, 2017 To: Board of Health From: Medical Officer of Health Wards: All

SUMMARY

This report provides an update to the Board of Health on the Toronto Public Health (TPH) Capital Budget Variance for the twelve months ended on December 31, 2016.

Toronto Public Health spent \$4.060 million or 88.6% of the 2016 Approved Capital Budget of \$4.584 million.

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 2016 Approved Capital Budget of \$4.584 million is comprised of the following Projects:

Information Technology:

- Infectious Disease Control Information System
- HF/HL (Healthy Families/Healthy Living) Point of Care
- CDC (Communicable Disease Control) Wireless Rollout
- Healthy Environment Inspection System (Mobile)
- TPH Datamart Data Warehouse Phase 2
- Electronic Medical Record Phase 1

Facilities:

• Relocation and Expansion of Scarborough Dental Clinic

As of December 31, 2016, TPH spent \$4.060 million or 88.6% of the 2016 Approved Capital Budget of \$4.854 million as shown in Table below:

	2016				
	Approved Cash Flow		Actuals	Variance	Spent
		\$	\$	%	
Infectious Disease Control Information System	518,000	512,018	5,982	98.8	
HF/HL Point of Care	846,800	793,917	52,883	93.8	
CDC Wireless Rollout	1,135,610	1,110,862	24,748	97.8	
Healthy Environment Inspection System (Mobile)	942,024	670,721	271,303	71.2	
TPH Datamart Data Warehouse - Phase 2	806,994	754,360	52,634	93.5	
Electronic Medical Record - Phase 1	232,000	218,162	13,838	94.0	
Relocation and Expansion of Scarborough Dental Clinic	102,000	-	102,000	-	
Total	4,583,428	4,060,041	523,387	88.6	

Capital Budget Variance Report for the Twelve Months ended December 31, 2016

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 2016 Capital Budget.

• Infectious Disease Control Information System:

Overall Project Status	
Green	

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 provincial requirements and the complex needs of the City of Toronto. This 100% 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 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, interoperable and integrated public health information system that will replace existing obsolete systems and provide Ontario's public health professionals – provincially and locally with: 1) a common immunization registry to improve the understanding of immunization coverage rates and strengthen immunization programs; and 2) a shared view of vaccine inventory, increasing the efficiency of vaccine delivery and the redistribution of vaccines during an outbreak to support a timely and rapid response to a vaccine shortage anywhere in the province.

As part of the ICON (Immunization Connection Ontario) pilot, TPH will implement a web interface for the public to submit immunization records and the Ministry will provide tools to allow health units to validate client and immunization data collected from their websites against existing Panorama records, and import the data electronically into Panorama.

The Infectious Disease Control Information System project's capital expenditures totalled \$0.512 million representing 98.8% of the 2016 approved cash flow of \$0.518 million. Funds totalling \$0.003 million will be returned to the province and \$0.003 million will be carried forward to 2017 for contracted services to support required enhancement to ICON.

HF / HL Point of Care:

Overall Project Status
Yellow

This project will implement wireless devices which will communicate securely with the Toronto Community Health Information System (TCHIS) 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 with documentation guidelines, standards and policies; 4) provide increased accountability with information contained within the customer record; 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 program and service delivery; and 6) enhance the infrastructure of the TCHIS system to improve reliability and reduce risk of inoperability.

The HF/HL Point of Care project's capital expenditures totalled \$0.794 million representing 93.8% of the 2016 approved cash flow of \$0.847 million. Unavailability of contracted services to perform the planned assessment pertaining to the application security and reporting architectural changes necessitates the carry forward of \$0.053 million to 2017 to perform the assessment and required technical architectural changes.

• CDC Wireless Rollout:

Overall Project Status	
Green	

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

The CDC Wireless Rollout project's capital expenditures totalled \$1.111 million representing 97.8% of the 2016 approved cash flow of \$1.136 million. Delay in supplying mobile devices by the vendor and in processing hardware acquisition necessitates the carry forward of \$0.025 million to 2017 in order to purchase the required devices and hardware.

• Healthy Environment Inspection System (Mobile)

Overall Project Status Yellow

This project will implement a mobile application and wireless devices for Food Safety and Health Hazard (Pools & Spas and Rabies), Bed Bugs, Special Events and Premises inspections leveraging the corporate Remote Computing System (RCS) solution.

The Healthy Environment Inspection System project's capital expenditures totalled \$0.671 million representing 71.2% of the 2016 approved cash flow of \$0.942 million. Based on the review of sequencing of future rollouts it has been determined that some planned enhancements and the acquisition of required contracted resources will be deferred to 2017. This necessitates the carryover of \$0.271 million into 2017 to complete planned deliverables.

• TPH Datamart Data Warehouse - Phase 2

Yellow

Building on the accomplishments of phase 1, this project will support further improvements in reporting, performance measurement and decision making across

twenty (20) additional data sources within TPH programs. Implementing this project will enhance TPH operations by improved monitoring of performance and analyzing trends to adjust programs and meet mandatory Ministry of Health and Long-Term Care reporting requirements in a timely manner.

The Datamart Data Warehouse - Phase 2 project expenditures totalled \$0.754 million representing 93.5% of the approved 2016 cash flow of \$0.807 million. Deferral of planned development, data analysis and reporting necessitates the carry forward of \$0.053 million for the extension and contracted services.

• Electronic Medical Record - Phase 1

Overall Project Status	
Yellow	

This project will replace a system that has reached its end of life with a new client information system to provide a comprehensive electronic record of patients' health-related information for those seen in sexual health and methadone clinics, creating efficiencies in business processes and improved client care.

The Electronic Medical Record - Phase 1 project's capital expenditures totaled \$0.218 million representing 94.0% of the 2016 approved cash flow of \$0.232 million. As a result of unexpected project team vacancies some project activities will be deferred to 2017, requiring the carryover of \$0.014 million into 2017 to complete planned deliverables.

• Relocation and Expansion of Dental Clinic at Scarborough Civic Centre

Overall Project Status
Yellow

The TPH dental clinic at the 160 Borough Drive will be relocated to 150 Borough Drive. The new larger facility will be compliant with the Accessibility for Ontarians with Disabilities Act (AODA), and will address health and safety concerns created from overcrowding at the current location. This clinic will also increase access to dental services for adults on social assistance through Ontario Works (OW), adults with disabilities in the Ontario Disability Support Program (ODSP), and refugee claimants accessing healthcare through the Interim Federal Health Program (IFHP) and decrease wait times as a result of improved service delivery.

As a result of delays with the RFQ process, no expenditures were made in 2016. This requires the carry forward of \$0.102 million to 2017.

CONTACT

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SIGNATURE

Dr. Barbara Yaffe Acting Medical Officer of Health Dr. Eileen De Villa Incoming Medical Officer of Health

ATTACHMENTS

Appendix 1 – TPH 2016 Capital Budget Variance Report for the Period Ended December 31, 2016