

NEW

Directions

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On September 25, Chris Renaud, Chief Information Officer of the Health Services I&IT Cluster, announced that staff performing identified I&IT functions within the ministry's program areas would join the Health Services Cluster. This consolidation involves a change in reporting relationship for 136 employees across the province, who represent nine program areas. While the functions and accountability have shifted from the program areas to the cluster, the employees will remain in their current locations.

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I&IT move to cluster benefits staff and the public

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Chris Renaud, Chief Information Officer of the Health Services I&IT Cluster

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“As the ministry moves towards a stewardship role with strong information management capabilities, we anticipate a greater demand for more flexible, coordinated, high quality and cost effective I&IT services from all parts of the ministry,” said Renaud at a Queen’s Park town hall meeting where he spoke recently with I&IT staff. “This need could not be effectively met using the old model whereby individual ministry program areas managed their own I&IT resources. To best support the ministry’s stewardship focus and to deliver more efficient and responsive government operations and public services, I&IT needs to be managed in a consolidated, integrated way,” he said.

The new Health Services I&IT Cluster is responsible for developing and maintaining applications; delivering staff infrastructure products and services such as desktop computing, software suites, help desk, e-mail, printers, and servers; and providing technical support for Information Management such as hardware, operating systems, and databases.

The cluster, which supports the business needs of both the Ministry of Health and Long-Term Care and the Ministry of Health Promotion, will continue to be the point of contact for staff to get the I&IT services needed to support their work.

MOHLTC will benefit from this new, integrated cluster approach to managing ministry I&IT resources through the accelerated use of technology and product standards as well as the implementation of best practices. Common processes and centralized management of I&IT assets will position the ministry

to take advantage of new process and cost efficiencies. In addition, I&IT performance reporting and measurement will be an important component of service delivery.

Working in the cluster environment will offer new opportunities for the ministry’s I&IT technical staff. They will be able to develop expertise through more varied assignments, share knowledge and best practices on behalf of all their ministry clients, and take advantage of more learning opportunities.

In March 2006, the Business I&IT Integration Governance Group (BIGG), a joint program area and cluster I&IT committee, was established to ensure that the ministry’s I&IT goals and delivery align with its new stewardship business priorities (see July 7, 2006 issue of *NEW Directions*). This group has served as the steering committee for the consolidation of the ministry’s I&IT resources into the cluster.

Renaud acknowledged that by working closely with the Transition Team and the program area managers, the cluster will ensure that continuity of I&IT services to ministry employees and the public will be the number one priority during the change-over period.

“This consolidation is exciting for the Ministry of Health and Long-Term Care as it marks an early milestone in its transition towards grouping services to align with the ministry’s stewardship model,” said Renaud. “It also aligns with the OPS e-Ontario strategy to modernize I&IT services and ensure consistent, integrated I&IT services to the OPS user community and, in turn, the public.” ■

Service Renewal and Alignment Project moves forward

The Service Renewal and Alignment Project (SRA), led by Assistant Deputy Minister Gail Paech, was initiated on September 28. The project team will assess the OHIP registration and claims businesses processes and supporting IT systems.

The work of the SRA aligns with the ministry’s transition

objective — to change the way that we do business by being less involved in the front line delivery of services and administration. It is also supports the government’s commitment to modernize service to Ontario families and businesses.

To conduct this assessment, the project team will work closely with program areas in the Health

Services Division and Health Services I&IT Cluster to understand the complexity of the work. Part of the operational assessment will also be to meet with other business areas of the ministry to identify where linkages exist with the OHIP system. The assessment is expected to be complete in 2007. ■

Acute Services and Community Health Divisions Project Update

With their first three priority projects up and running (see the September 8 issue of *NEW Directions* for an overview of the Financial Transaction Processing Function, LHIN Relationship Office, and Compliance Inspection Enforcement Function projects), the Acute Services and Community Health Initiatives project team continues their focus on identifying functions currently performed by employees in the Regional Offices that will transfer to the ministry, finalizing business processes that will support these functions in the new organization, and clarifying roles and responsibilities.

Here is a look at two new projects underway in the Acute Services and Community Health (ASCH) Divisions:

Issues Management and Media Relations Functions
Ministry Lead: Deanna Blair
Sponsor: Deputy Minister Ron Sapsford

The current issues management and media relations processes are co-ordinated within the ministry in each of the seven Regional Offices, the Acute Services and Community Health corporate office, and the Communications and Information Branch (CIB). Of the total issues managed, approximately 70 per cent relate to the ASCH Divisions, 20 per cent relate to the Public Health Division, and 10 per cent relate to the other divisions.

A project group will be struck to provide recommendations that will clarify the roles and responsibilities between the ministry and the LHINs, with respect to the issues management and media relations functions.

A key focus of the project will be to work with the CIB and LHINs to develop the business processes and protocols that will ensure that issues continue to be addressed thoroughly and quickly in the new organization. For the media relations and issues management functions to be effective, they require good organization, collaboration, and co-ordination.

“There are approximately 600 issues and media related products completed per month in the ministry,” said Deanna Blair, project lead. “This high volume requires considerable staff resources in the CIB, the Regional Offices, and the corporate divisions.”

According to Blair, it is estimated that half of those issues managed by the ASCH Divisions will go the LHINs. “However, of these issues a significant number will still require ministry input in order to capture and communicate information that has provincial implications,” she confirmed. ■



Capital Process Working Group
Ministry Lead: David Stolte
ADM Sponsor: Maureen Adamson

Many groups across the ministry have important functions in carrying out the ministry’s role for health capital redevelopment, which results in the building of hospital, community health care and long-term care facilities across the province. Portions of capital processes currently occur across the ministry and will be led in the new organization by the new Health System Investment and Funding Division.

As the Regional Offices have been a key link between the facilities in their area and the ministry, a capital process working group has been put in place that will establish new relationships related to capital.

“The working group is developing a plan on how the capital related work in the ministry will continue to be done in the future” said ministry lead David Stolte. “Specifically, the work that the Regional Offices do to enable the capital process to be effective needs to be accommodated in the new ministry organization.”

Stolte confirmed that the group’s focus is to develop a plan for those capital projects that require an urgent transfer within the ministry to ensure that they continue to be supported with the appropriate resources. ■

“The working group is developing a plan on how the capital related work in the ministry will continue to be done in the future.”

Integration key to transition project streams

“The project team is responsible for developing a detailed work plan complete with a critical path, to ensure that key activities are completed on time and the needed resources from other project streams are identified in order to get the work done.”

One of the biggest challenges in a transition as far-reaching as the one underway in the Ministry of Health and Long-Term Care, is to integrate and manage the high volume of transition projects throughout the organization.

The ministry’s overall transition work plan has been structured into 13 integrated project streams, each with a unique set of responsibilities and a timeline plan. With new business practices, staff functions, and technologies needed to achieve the ministry’s stewardship objective, these projects represent the wide-range of work necessary to complete a successful transition, including organizational design, human resource supports, and leadership training.

“The project team is responsible for developing a detailed work plan complete with a critical path, to ensure that key activities are completed on time and the needed resources from other project streams are identified in order to get the work done,” said Stephen Pinkus, program manager of the Transition Team’s Project Management Office. “They must also identify what they are dependent on from other project streams. It’s a very complex process.”

Here is a detailed look at the work underway in four of the 13 project streams; others will be highlighted in upcoming issues. The remaining nine project streams include Human Resources Transition, Implementation/ Launch Process, Stewardship, Communications, Leadership Development, Change Management, Facilities and Real Estate, and Technology and Technology Support. It is important to keep in mind that the components of

many of the projects will need to be complete before work can begin in other projects; while streams such as Communications, Change Management, and Stewardship run throughout the duration of the transition.

1. High-Level Process Design

The new stewardship priorities will change the ministry’s roles and responsibilities with stakeholders, resulting in a need for new business processes and relationships, and new demands for information. The High-Level Process Design Team looks at the ministry’s current business functions and processes and how these processes are carried out, and then determines where and how they will fit into each of the ministry’s new divisions.

This team identifies gaps (program or services that are needed in the new organization that do not exist in the current ministry), overlaps (programs and services that could fit into more than one of the new divisions), and external moves (programs and services that will be assigned to organizations outside of the

ministry). This thorough upfront analysis will reduce the risk that important staffing, information management, and infrastructure resources are missed in the new organization. Much of the work of this team has been completed.

2. High-Level Organizational Design

The High-Level Organizational Design team is responsible for providing answers to the question: what will the new ministry look like when the transition is complete?

This team develops the overall organizational structure needed for the ministry to carry out the day-to-day business as stewards of the health care system. To do this, they compare the ministry’s current business processes and services to those that will be required in the new organization. This helps them determine the most effective organizational structure.

3. Detailed Process Design/ 4. Detailed Organization Design

The Detailed Process and Organization Design teams work

directly with each Assistant Deputy Minister (ADM) as they begin to fill in the details of their new divisions. As the ADMs are responsible for their division’s specific business processes and organizational structure, it is important that they play an active role through the transition phases and that a consistent and integrated approach to developing these details is used across all divisions.

Detailed Process Design:

Detailed process design maps out, down to the activity level, the processes to be used to run a division’s operation including the business and technology systems.

Detailed Organization Design:

Once the detailed processes are determined, the Detailed Organization Design team works with this information to create an organizational chart of the positions required — right down to the unit and job level — that will get the division’s work done. The work in this stream will occur at different stages across divisions, as staff is placed in the organization’s new structure. ■

TRANSITION DIVISION LEADS SUPPORT ADMS

A division lead has also been assigned to support each ADM through the entire transition process, as they manage the wide-range of change activities in their division. Each lead brings a specific area of expertise to the ministry’s Transition Team. According to Assistant Deputy Minister of Transition Debbie Fischer, the leads provide information and guidance to the ADMs as they put the work that needs to be done in their division into priority sequence, and complete their detailed process and organization designs and organizational staff moves.

“Each division faces unique issues and challenges as they move through the transition process to reach their end state goals,” said Fischer. “As the resident expert in their assigned division, the lead has a solid understanding of the division’s business. This allows them to assume the key role in many division-related projects, identify risks along the way, and ensure that the ADMs are aware of important decisions that need to be made in all of the project stream areas.” ■