Deloitte.

HIM **health information management**
quality information
for better health

BC Health Organization Information Governance Summit 2017
Putting IG to Work

September 2017

A dynamic, leading network of healthcare organizations in Ontario saw an opportunity to disrupt the analytics eco-system and developed an innovative strategy in less than 16 weeks

1 WHAT WAS THE SITUATION AND WHO INFORMED OUR THINKING?

2 WHAT DID WE WORK TOWARDS?

3 WHAT ARE THE LESSONS LEARNED?

WHAT WAS THE SITUATION AND WHO INFORMED OUR THINKING?

While a large number of data initiatives exist in Ontario, there remains an unmet need of timely access to longitudinal views of clinical, -ohmic and patient-derived data

THE CLIENT

A dynamic network of 13 academic and community hospitals affiliated with a university - *does not function as an integrated delivery network or as a unified clinical research organization*

The value for collaboration is underpinned by the need for:

A holistic patient view

Population scale

Economies of scale

OUTPUTS

▶ Current State Assessment

▶ Health Analytics Strategy
(data, privacy, governance, architecture and technology)

▶ 3-Year Implementation Roadmap

The creation of a shared and integrated health analytics strategy is viewed to be a key strategic lever to propel the Client towards the progressive development of an advanced learning health system with accelerated quality improvement, population health management and clinical research capabilities

There is a growing recognition that health care organizations cannot successfully operate within value-based care and population health agendas without robust data and analytics

Global trends and lessons learned from other geographies for similar types of collaboratives helped to inform the vision and overall strategy – GOVERNANCE IS TOP OF MIND

We also have RECENT LIVED EXPERIENCE of working side by side with major transformative data, information management and analytics initiatives focused on population health, research and quality improvement in Ontario:

WHAT DID WE WORK TOWARDS?

A number of situational constraints and natural tensions were identified through current state discovery – which informed future state consultations and the recommended governance model and path forward

Privacy legislation & custodianship models

Variety of user/stakeholder interests around access to and use of data

Different types of organizations
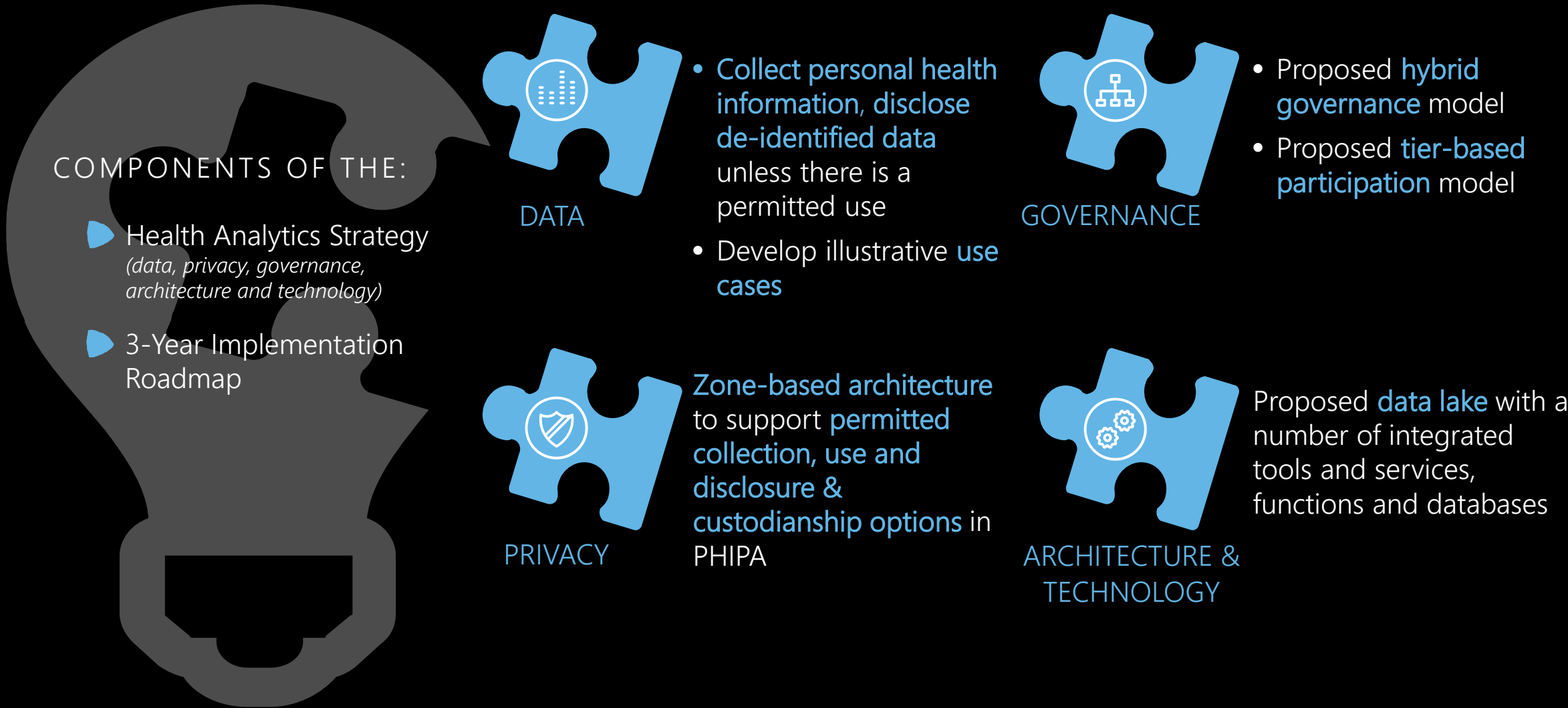
Acceptable spectrum of data visibility

Varying levels of data management capabilities & analytics maturity

Guiding Principles to Overcome Constraints & Tensions

i. Enables the APPROPRIATE USE of data for patient well-being

ii. FLEXIBLE AND AGILE to support varying analytics capacity and capability

iii. SCALABLE to allow membership to evolve and adapt over time

iv. LEVERAGES EXISTING assets, investments and expertise

v. MANAGES AND MINIMIZES RISKS related to security of patient oriented data
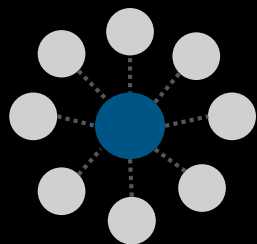
vi. RESPECTS PRIVACY

The analysis, strategy and roadmap developed during the first phase of planning will facilitate an understanding around the willingness and capacity to further solidify the future state
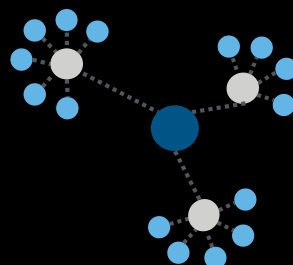
COMPONENTS OF THE:

▶ Health Analytics Strategy
(data, privacy, governance, architecture and technology)

▶ 3-Year Implementation Roadmap

DATA

- Collect personal health information, disclose de-identified data unless there is a permitted use
- Develop illustrative use cases

GOVERNANCE

- Proposed hybrid governance model
- Proposed tier-based participation model

PRIVACY

Zone-based architecture to support permitted collection, use and disclosure & custodianship options in PHIPA

ARCHITECTURE & TECHNOLOGY

Proposed data lake with a number of integrated tools and services, functions and databases

Developing a Co-Governed Approach: What models were considered?

CENTRALIZED	HYBRID/ FEDERATED	DECENTRALIZED
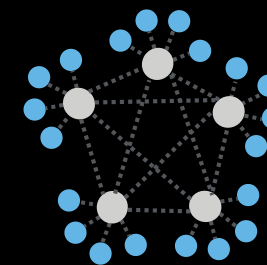
Definition

- One centralized owner of accountability
- All organizations are only informed or consulted

- One *Hub* accountable for leadership and oversight
- Many *Spokes* across organizations share accountability under the leadership of the Hub

- No centralized owner
- Accountability resides in functional stacks (also known as lines of business) for their own area

Examples in collaborative model

One lead entity has accountability for the Platform (e.g., a single lead institution)

A lead entity may be accountable for certain aspects of the Platform (e.g., research), while governance of other aspects are the accountability of the participating organizations (e.g., data)

All participating organizations are governed separately, but may agree to adhere to standard processes and protocols for sharing data

LEGEND ● Lead/Central Organization ● Participating Member ● Members' Internal Structures

A hybrid governance model which centralizes governance oversight and tactical oversight and execution while setting standards for organizational participants

GOVERNANCE

COMPONENTS OF THE GOVERNANCE MODEL

▶ Board of Directors & Governance Oversight Committee

▶ Business Operations Office

▶ Tactical and Execution Oversight Working Groups

▶ Communities of Practice

{ A TIERED-PARTICIPATION MODEL WAS THE BREAKTHROUGH }

Strikes a balance between the unique environment of each organization (e.g., risk tolerance, capacity) and the value that can be derived from the Platform with increasing membership. Organizations would, over time, opt to move up the tiers.

▶ Data Shared   ▶ Working Together

▶ Data Access   ▶ Fees

▶ Analytics and Services
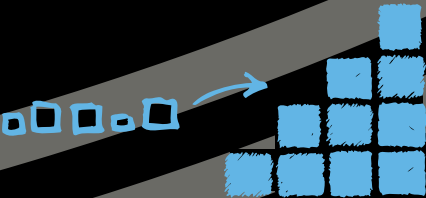
WHAT ARE THE LESSONS LEARNED?

How you start shapes your overall success. It is critical to do the 'big thinking' about strategic components early in the planning process as decisions become the framework for execution

DEVELOP USE CASES

FOCUS ON STRATEGIC COMPONENTS

DON'T BOIL THE OCEAN

CALL TO A HIGHER ORDER

WILLINGNESS TO PIONEER CHANGE TOGETHER

CONCESSIONS & CHANGES IN ATTITUDE

THE INTERESTS OF THE COLLECTIVE

CLEAR DECISION-MAKING CRITERIA & PROCESS

FOUNDATION FOR COLLABORATION – *What needed to be in place?*

Continuing the Conversation

YOUNG LEE

Partner, Deloitte

Canadian Health Transformation
Service Line Leader (Health
Analytics Lead)

ylee@deloitte.ca

THOMAS
O'SHAUGHNESSY

Partner, Deloitte

Western Canada Health Leader

thoshaughnessy@deloitte.ca

JAMIE SAWCHUK

Partner, Deloitte

jsawchuk@deloitte.ca

Deloitte.