

**IT INVESTMENT CAPITAL FUND
PROJECT CLOSE OUT REPORT**

To: Information Technology Strategy and Investment Committee
John Vittner, Office of Policy & Management

FROM: Steve McConaughy; DPH Information Technology

AGENCY/PROJECT NAME: DPH / Medical Facility Complaints Website, Automation and Document Storage

PROJECT MANAGER: Surjit Sethuraman

REPORTING PERIOD: Project Inception through 6/1/2016

Total Funds Requested: \$ 97,407

Bond Commission Approval(s): Date: Nov. 2014 Amount: \$ 97,407

Accumulative Total Capital Fund Expenditures to Date:

Pre-Encumbered	\$ 35,400
Encumbered	\$ 40,601
Expensed	\$ 15,203
Remaining from allocation	\$ 6,203

Brief Project Description/Summary:

Medical Facility Complaints Automation and Document Storage Project is intended to eliminate a legacy paper laden, manual process. This will modernize the cycle of receiving complaints by DPH from clients and the general public, organizing the reports and documentation of investigations of those complaints and report to the CMS; then making them available to support judicial proceedings if allegations progress that far. This envisioned paperless system will provide a public facing electronic portal and provide a Case based repository that is supported by mobile computing and an automated electronic filing system. This will allow DPH to better ensure the safety and wellbeing of those in long term care facilities in the State of Connecticut, and will save DPH Staff time and money. .

List Project Goals and Deliverables Completed:

Project Goals:

- Automate the Complaint and Survey process of Facility Licensing and Investigation section.
- Eliminate the need to generate and archive large volumes of paper documentation
- Speed up the inspection cycle by reducing steps required to process findings
- Simplify the complaints submission process by developing a single web based portal
- Implement a process so that needed records can be accessed by inspectors while on site performing inspections and documentation can be remotely uploaded for confirmation and/or collaboration with supervisory staff

Phase 1 Automation of the Facilities Complaints process:

Has been completed. DPH has successfully been able to

1. Re-resign the business process around registering complaints so that:
 - a. It begins with starting with receiving complaints from the public directly into a electronic format through online forms.
 - b. Complaints initiated by the administrative staff are handled electronically and are logged into ASPEN directly, attaching the complaints and any supporting documentation directly into the Application which initiated the investigation cycle.
 - c. The system generates Electronic acknowledgement letters to the complainants.
 - d. Nurse Consultants are prompted to view the Survey and Original complaints received from the complainant in their laptops wherever they are logged in; from the DPH office or other locations from the field.
 - e. Nurse consultants investigate the validity and circumstances of the complaint; collecting the exhibit documents for the complaint electronically and attaching all pertinent exhibits directly into the complaints document from the field.
 - f. Supervisor nurse consultants are prompted to review the complaints and exhibit documents directly from the application.
 - g. Supervisors communicating with the Processing and Administrative staff electronically to close the complaint and sent the necessary letters to the facility and complainant. As well as closing the official case appropriately within CMS
2. Upgrade devices that are assigned to investigation staff to support remote login and easy conversion to using electronic documentation as the primary document of record.
 - a. To facilitate the automation process we deployed 32 Laptops and so that Nurse Consultants can complete their work from the field. Each inspector was issued
 - i. HP 810 "Twist" Lap Top computer
 - ii. VPN token Key for accessing the DPH network
 - iii. Write Fax number for receiving faxed documents directly
 - iv. Verizon Hot spot - to allow:
 1. cellular communications to the internet from any location and
 2. WIFI collaboration using STARnet amongst deployed inspection teams
 - v. USB encrypted memory sticks for collecting data electronically directly from inspected facility
 - b. Laptop docking stations have been deployed to replace all desktop CPU's for all inspectors. This has allowed the unit to
 - i. Reduce equipment and ongoing support costs by eliminating duplicate systems from the environment
 - ii. Eliminate redundant software installations and mismatches (Often Laptop and desktop versions of software was different versions creating confusing using even simple applications like MS-Office or Internet Explorer).
 - iii. Increase the security of the systems by improving the ability to keep patches and virus scan definitions up to date because laptops are being plugged in to the wired network regularly and receiving updates automatically
 - iv. Decrease manual processes required because password changes are coordinated and Safe boot synchronization is automated
 - v. Reduce the number and complexity of file transfers required in preparing for inspections. Downloaded documents can be posted directly to the laptop being carried to the inspection. This eliminates the need for a shared FTP "Cloud" location as a transfer point.

- c. Purchased additional stationary equipment to optimize the DPH office environment to support electric documentation and inspection processes
 - i. Deployed medium volume document scanners (50 page capacity) in strategic locations for uploading paper to the ASPEN system
 - ii. Equipped support staff with Adobe Acrobat to modify exhibit documentation as needed
 - iii.

As currently deployed we have met these milestones with this project::

1. A new FLIS complaint page (<http://www.ct.gov/dph/fliscomplaint>) was created in the DPH website which contains the instructions for the complaint form that can be downloaded, filled and sent to the common FLIS complaint mailbox.
2. Nurse Consultants are able to write up findings and attach the exhibit documents electronically from the field to the application.
3. Supervising nurse consultants are able to access the finished complaints and their supporting documents from the system without any intervention or delay, from their offices within the DPH physical location.
4. As a measure of acceptance, A total of 302 complaints have been entered using the automation process so far (as of June 1, 2016) and this number continues to grow on a daily basis

Printed: 06/01/2016

ACTS Hotline Call Summary 01/01/2016 to 12/30/2016

Hotline	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Total
Complaint	0	46	70	95	88	3	0	0	0	0	0	0	302
TOTAL CALLS	0	46	70	95	88	3	0	0	0	0	0	0	302

Phase 2: (Secondary adopters)

Phase 2 of this project will involve adopting this model of Mobile Computing and remote access to other areas within DPH. There are multiple levels of inspection and field work done throughout the agency and most aspects of this Mobile Computing model can be utilized in those areas. The initial targets will include (in approximate order of modernization):

1. Facilities Licensing Inspections Section (FLIS) Survey Teams - This unit is also a CMS supported function and will be almost an identical rollout. Planning for rollout to this area has already begun and hardware replacement is in process.
2. Immediate Jeopardy Unit
3. Reportable Events Group - Investigation of reported events (including accidents) within Long term care Facilities
4. Clinical Laboratory Improvement Amendment (CLIA) Investigating Laboratories within CT for compliance and recertification
5. Behavioral Health Out Patient facilities – Investigate all aspects of facilities that support substance abuse and psychiatric facilities in CT.
6. HIV Case Management – Field Case managers can utilize this same model and in addition. This will support functionality in the modernized STD program which is in the process of being updated through other grant funding.

Project Replication Opportunities:

This project was conceived as a narrowly focused solution to the Facilities Complaints section within FLIS. The department is already rolling out the implementation of this through the rest of the Inspection teams within FLIS and with entering incidents to be investigated in self-

reported events for nursing homes. DPH is planning on expanding this model for other areas that utilize mobile work forces including the HIV outreach workers. We are unaware of specific needs of other agencies for field connectivity but this model would be an appropriate cost saving model for any agencies who have employees reporting from the field.

Key Lessons Learned:

The DPH initial project plan was developed around utilizing the BEST hosted FileNet services as the electronic Data store for documents. After significant sustained efforts we were unable to develop a workable model that incorporated this resource and were never able to determine what the pricing model would be for licensing or storage. This had to be abandoned as a key component of the project.

This project was much better accepted when the decision was made to replace desktop PC's with laptops and docking stations. This allowed mobile workers to be working exclusively on one device as opposed to switching between a laptop in the field and another Desktop when in the office. This greatly assisted password synchronization and update/patch management, and reduced the burden on the IT helpdesk and support staff.

Business process changes and training inspectors to ask for documentation electronically –is a key component of the success of this project. Providing easy means of accepting electronic documents without having to print to paper and then scan back in became critical. Electronic Fax numbers and USB storage devices have been assigned to each inspector to receive documents. Modems and VPN keys are provided so that documents can be uploaded directly into the secure Aspen File share.