Enclosure 3
Exhibit 1
Face Sheet
For Technological Needs Project Proposal

County Name: Lake

Project Name: Electronic Health Record Project

This Technological Needs Project Proposal is consistent with and supportive of the vision, values, mission, goals, objectives, and proposed actions of the Mental Health Services Act (MHSA) Capital Facilities and Technological Needs Component Proposal.

We are planning to, or have a strategy to modernize and transform clinical and administrative systems to improve quality of care, operational efficiency, and cost effectiveness. Our Roadmap for moving toward an Integrated Information Systems Infrastructure, as described in our Technological Needs Assessment, has been completed. This Project Proposal also supports the Roadmap.

We recognize the need for increasing client and family empowerment by providing tools for secure client and family access to health information within a wide variety of public and private settings. The Proposal addresses these goals.

This proposed Project has been developed with contributions from stakeholders, the public and our contract service providers, in accordance with California Code of Regulations (CCR), Title 9, Sections 3300, 3310 and 3315(b). The draft proposal was circulated for 30 days to stakeholders for review and comment. All input has been considered, with adjustments made as appropriate.

Mental Health Services Act funds proposed in this Project are compliant with CCR Section 3410, non-supplant.

All documents in the attached Proposal are true and correct.

County Director	
Name: Kristy Kelly	Signature:
Phone: (707) 263-4338	Date:
Email: kristyk@co.lake.ca.us	

Chief Information Officer	
Name: Martin Franusich	Signature:
Phone: (707) 263-2288	Date:
Email: martinf@co.lake.ca.us	

County Director	
Name:	Signature:
Phone:	Date:
Email:	

Enclosure 3
Exhibit 2
Technological Needs Assessment

County Name: Lake

Project Name: Electronic Health Record Project

Provide A Technological Needs Assessment Which Addresses Each Of The Following Three Elements

1. County Technology Strategic Plan Template
(Small Counties have the Option to Not Complete this Section.)

This section includes assessment of the County's current status of technology solutions, its long-term business plan and the long-term technology plan that will define the ability of County Mental Health to achieve an **Integrated Information Systems Infrastructure** over time.

Current Technology Assessment

List below or attach the current technology Systems In Place.

1.1   Systems Overview

List Or Attach A List Of The Hardware And Software Inventory To Support Current Systems.

1.2   Hardware

1.3   Software

1.4   Support (i.e., Maintenance and/or Technical Support Agreements)

Plan To Achieve An Integrated Information Systems Infrastructure (IISI) To Support MHSA Services

Describe the plan to obtain the technology and resources not currently available in the county to implement and manage the IISI. (Counties may attach their IT Plans or complete the categories below.)

1.5   Describe how your Technological Needs Projects associated with the Integrated Information System Infrastructure will accomplish the goals of the County MHSA Three-Year Plan.

1.6   Describe the new technology system(s) required to achieve an Integrated Information System Infrastructure.

1.7 - Note the Implementation Resources Currently Available.

Oversight Committee:	○ Yes	○ No
Project Manager	○ Yes	○ No
Budget:	○ Yes	○ No
Implementation Staff in Place:	○ Yes	○ No
Project Priorities Determined:	○ Yes	○ No

1.8 - Describe Plan To Complete Resources Marked "No" Above.

1.9 - Describe the Technological Needs Project priorities and their relationship to supporting the MHSA Programs in the County.

2. Technological Needs Roadmap Template

This section includes a Plan, Schedule, and Approach to achieving an Integrated Information Systems Infrastructure. This Roadmap reflects the County's overall technological needs.

Complete a Proposed Implementation Timeline with the Following Major Milestones.

2.1   **List Integrated Information Systems Infrastructure Implementation Plan and Schedule or Attach a Current Roadmap (example below).**

Needs Assessment and RFP/Vendor Selection - 2006
Infrastructure - 2007
Practice Management - 2008
(Electronic registration, scheduling and billing with contract providers & state)
EHR "Lite" Clinical Notes and History - 2009-2010
(Document imaging or Clinical Notes Module, or EHR "lite")
Ordering and Viewing-Prescribing and Lab - 2010-11
(Computerized Provider Order Entry: Lab/Rx ordering/reporting)
Full EHR - 2012
(Full EHR interface with contract providers)
Fully Integrated EHR and PHR - 2014
(Interface from Counties, EHR and PHR)

2006	2008	2009	2010	2012	2014
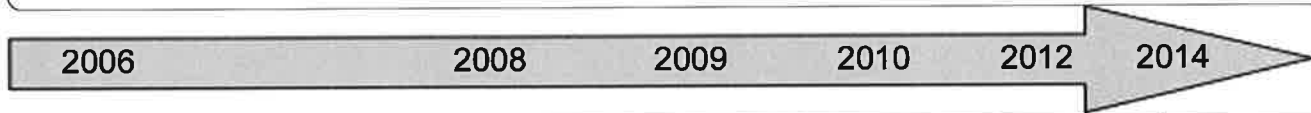
Needs Assessment and RFP/Vendor Selection	Infrastructure	Practice Management	EHR "Lite" Clinical Notes and History	Ordering and Viewing-Prescribing and Lab	Full EHR	Fully Integrated EHR and PHR

2.2   **Training and Schedule (List or provide in Timeline Format...Example Below)**

Training Schedule for 2008	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Basic System Nav	X											
Admin Staff	X											
Clinicians		X										
Contract Providers		X										
Client Look-up			X									

2.3 **Describe your communication approach to the Integrated Information Infrastructure with Stakeholders (i.e., Clients and Family Members, Clinicians, and Contract Providers).**

Lake County Mental Health invited stakeholders to provide input on the EHR Project at the Community Planning Meeting on May 15, 2009, and the Public Hearing on June 25, 2009. In addition, LCMH will provide relevant updates via the Lake County website and e-mail/mail, with hard copies available upon request at the Lake County Mental Health clinics.

2.4 **Inventory of Current Systems (May include System Overview provided in County Technology Strategic Plan).**

Anasazi: Client Data System, Assessment System, Treatment Plan System, Scheduling System, Fiscal System.

2.5 **Please attach your Work Flow Assessment Plan and provide Schedule and List of Staff and Consultants Identified (May complete during the Implementation of the Project or RFP).**

Will complete during the implementation of the Project.

2.6 **Proposed EHR component purchases [May include information on Project Proposal(s)].**

Included on Project Proposal.

2.7 **Vendor Selection Criteria (Such as Request for Proposal).**

Anasazi, our current vendor, will provide system upgrade software and services. Lake County Information Technology Department will handle our hardware procurement needs.

2.8 **Cost Estimates associated with achieving the Integrated Information Systems Infrastructure.**

Included on Budget Worksheet.

3. County Personnel Analysis (Management and Staffing)
(Small Counties have the Option to Not Complete this Section.)

Major Information Technology Positions	Estimated #FTE Authorized	Position Hard to Fill? 1 = Yes 0 = No	Estimated #FTE Needed in addition to #FTE Authorize
A. Information Technology Staff (Direct Service)			
Subtotal A			
B. Project Managerial and Supervisory			
CEO or Manager Above Direct Supervisor			
Supervising Project Manager			
Project Coordinator			
Other Project Leads			
Subtotal B			
C. Technology Support Staff			
Analysts, Tech Support, Quality Assurance			
Education and Training			
Clerical, Secretary, Administrative Assistants			
Other Support Staff (Non-Direct Services)			
Subtotal C			
Total County Technology Workforce (A + B + C)			

Enclosure 3
Exhibit 3
Technological Needs Project Proposal Description

County Name: Lake

Date: Jan 11, 2010

Project Name: Electronic Health Record Project

Check at Least One Box from Each Group that Describes this MHSA Technological Needs Project

- ☐ New System.
- ☑ Extend the Number of Users of an Existing System.
- ☑ Extend the Functionality of an Existing System.
- ☑ Supports Goal of Modernization / Transformation.
- ☑ Support Goal of Client and Family Empowerment.

Indicate the Type of MHSA Technological Needs Project

> Electronic Health Record (EHR) System Projects (Check All that Apply)

- ☑ Infrastructure, Security, Privacy.
- ☑ Practice Management.
- ☑ Clinical Data Management.
- ☑ Computerized Provider Order Entry.
- ☑ Full Electronic Health Record (EHR) with Interoperability Components (Example: Standard Data Exchanges with Other Counties, Contract Providers, Labs, Pharmacies).

> Client and Family Empowerment Projects

- ☑ Client/Family Access to Computing Resources Projects.
- ☐ Personal Health Record (PHR) System Projects
- ☐ Online Information Resource Projects (Expansion / Leveraging Information-SharingServices)

> Other Technological Needs Projects that Support MHSA Operations

- ☐ Telemedicine and Other Rural / Underserved Service Access Methods.
- ☐ Pilot Projects to Monitor New Programs and Service Outcome Improvement.
- ☐ Data Warehousing Projects / Decision Support.
- ☑ Imaging / Paper Conversion Projects.
- ☐ Other.

Indicate the Technological Needs Project Implementation Approach

☐ **Custom Application**

Name of Consultant or Vendor (if applicable):

☑ **Commercial Off-The -Shelf (COTS) System**

Name of Vendor:

Anasazi Software

Microsoft SQL Server

☑ **Product Installation**

Name of Consultant or Vendor (if applicable):

Implementation of Anasazi modules - Anasazi conversion consultants
Conversion to Microsoft SQL Server from DataFlex - County IT and Anasazi consultants

☐ **Software Installation**

Name of Vendor:

Project Description and Evaluation Criteria (Detailed Instructions)

Small County?   ☑Yes   ☐No

Complete Each Section Listed Below.

Small counties (under 200,000 in population) have the Option of submitting a Reduced Project Proposal; however, they must describe how these criteria will be addressed during the implementation of the Project.

A completed Technological Needs Assessment is required in addition to the Technological Needs Project Proposal. Technological Needs Project Proposals that are for planning or preparation of technology are not required to include hardware, software, interagency, training, or security considerations. These items are indicated with an "*".

Project Management Overview   (Medium-to-High Risk Projects)

Counties must provide a Project Management Overview based on the risk of the proposed Project. The Project must be assessed for **Risk Level** using the worksheet in **Appendix A**.

For Projects with Medium to High Risk, the County shall provide information in the following Project management areas.

Independent Project Oversight

Integration Management

Scope Management

Time Management

Cost Management

Quality Management

Human Resource Management (Consultants, Vendors, In-House Staff)

Communications Management

Procurement Management

For Low-Risk Projects, as determined by the Worksheet in Appendix A, the above Project Management Reporting is Not Required.

Instead, the County shall provide a Project Management Overview that describes the steps from concept to completion in sufficient detail to assure the DMH Technological Needs Project evaluators that the proposed solution can be successfully accomplished. For some Technological Needs Projects, the overview may be developed in conjunction with the vendor and may be provided after vendor selection.

The Lake County Electronic Health Record project contains several components: Anasazi software implementation, database conversion to Microsoft SQL Server, conversion of paper charts to electronic records, purchase of additional hardware, and ongoing service/maintenance costs.

Implementation of the following Anasazi modules/components is planned:
Fiscal System - Accounts Payable Module
Managed Care Organization System
Doctor's Homepage
California Cost Report
Human Resources System

For each module/component, the implementation steps are as follows:
1. Negotiate appropriate contract amendments with Anasazi.
2. Initial installation of module in Lake County's system.
3. Performance of a workflow analysis led by Lake County's Project Lead and Anasazi's Project Manager.
4. Identification and documentation of configuration parameters required within the module/component.
5. Development of training agenda and support materials.
6. Testing of system including final configuration changes.
7. Training of clinical and support staff on use of the new functionality.

County IT, working in conjunction with Anasazi consultants, will perform the Anasazi database conversion from DataFlex to Microsoft SQL Server. This conversion will entail converting DataFlex data files to Microsoft SQL Server tables and migrating the data from the current server to an existing SQL server.

Conversion of paper charts to electronic records will be outsourced to a medical records conversion company to be identified. County IT will manage this project.

Purchase of hardware will include laptops for use by Outreach and Crisis workers, document scanners for scanning mental health records, e-Signature pads for capturing electronic approvals, and a wireless projector for presenting information at MHSA community planning meetings and public hearings. County IT will manage the procurement process.

Finally, funds are being requested for the ongoing service and maintenance costs of the EHR, wireless service for the laptops, and Network of Care for FY 09/10 only in order to maintain the balance of the Capital Facilities and Technological Needs Component funds for the planned Capital Facilities Project.

Project Cost

Technological Needs Projects will be reviewed in terms of their cost justification. The appropriate use of resources and the sustainability of the system on an ongoing basis should be highlighted. Costs should be forecasted on a Quarterly basis for the life of the Project.

Costs on a Yearly and Total basis will also be required for input on Exhibit 3 - Budget Summary.

Please see Exhibit 3 - Budget Summary.

Nature of the Project

Extent to which the Project is Critical to the Accomplishment of the County, MHSA, and DMH Goals and Objectives.

The implementation of the additional Anasazi modules/components will allow Lake County Mental Health to more fully and effectively utilize our Electronic Health Record system. By integrating our systems, we will be able to streamline workflows and eliminate manual processes and duplicate entry. In addition, organizational data will be centralized to allow for real-time access to the data and more flexible and comprehensive reporting.

Degree of Centralization or Decentralization Required for this Activity.

By its nature, this project promotes centralization by eliminating the use of multiple external systems.

Data Communication Requirements associated with the Activity.

The EHR system already supports all of the communication requirements for this activity.

Characteristics of the Data to be Collected and Processed (i.e., source, volume, volatility, distribution, and security or confidentiality).

The data to be collected and processed is data that is currently being managed by LCMH staff using external systems. Accounts payable and payroll data will be entered and managed in Anasazi by Fiscal staff, as Managed Care data will be by MC staff. Doctors and licensed clinicians will enter Doctor's Homepage information. Fiscal staff will utilize the data in the system to produce Cost Report. Security and access to the data will be managed by County IT.

Degree to which the Technology can be Integrated with Other Parts of a System in achieving the Integrated Information Systems Infrastructure.

As this functionality will be imbedded in the EHR system, it will be fully integrated.

Hardware Considerations * (As Applicable)

Compatibility with Existing Hardware, Including Telecommunications Equipment.

Physical Space Requirements Necessary for Proper Operation of the Equipment.

Hardware Maintenance.

Existing Capacity, Immediate Required Capacity and Future Capacity.

Backup Processing Capability.

Software Considerations * (As Applicable)

Compatibility of Computer Languages with Existing and Planned Activities.

Fully compatible.

Maintenance of the Proposed Software (e.g., vendor-supplied).

Included within existing support agreement.

Availability of Complete Documentation of Software Capabilities.

Provided with system implementation.

Availability of Necessary Security Features as defined in DMH Standards noted In Appendix B.

Consistent with all other aspects of the EHR system.

Ability of the Software to meet Current Technology Standards or be Modified to meet them in the future.

Consistent with all other aspects of the EHR system.

Interagency Considerations* (As Applicable)

Describe the County's interfaces with contract service providers and state and local agencies. Consideration must be given to compatibility of communications and sharing of data. The information technology needs of contract service providers must be considered in the local planning process.

Training and Implementation * (As Applicable)

Describe the current status of workflow and the proposed process for assessment, implementation and training of new technology being considered.

For each module/component, Lake County's Project Lead and Anasazi's Project Manager will work with the project team to complete the performance of a workflow analysis. Configuration parameters required within each module/component will be identified and documented. A training agenda and support materials will be developed. Testing of the system including final configuration changes will be done. Training of clinical and support staff on use of the new functionality will be scheduled and completed.

Security Strategy * (As Applicable)

Describe the County's policies and procedures related to Privacy and Security for the Project as they may differ from general Privacy and Security processes.

Protecting Data Security and Privacy.

No Policy or Procedure changes will be required.

Operational Recovery Planning.

No Policy or Procedure changes will be required.

Business Continuity Planning.

No Policy or Procedure changes will be required.

Emergency Response Planning.

No Policy or Procedure changes will be required.

Health Information Portability and Accountability Act (HIPAA) Compliance.

No Policy or Procedure changes will be required.

State and Federal Laws and Regulations.

No Policy or Procedure changes will be required.

Project Sponsor(s) Commitments [Small Counties May Elect to not Complete this Section]

Sponsor(s) Name(s) and Title(s)

Identify the Project Sponsor Name and Title. If multiple Sponsors, identify each separately.

Commitment

Describe each Sponsor's commitment to the success of the Project, identifying resource and management commitment.

Approvals/Contacts

Please include separate signoff sheet with the Names, Titles, Phone, E-mail, Signatures, and Dates for:

Individual(s) responsible for preparation of this Exhibit, such as the Project Lead or Project Sponsor(s).

Signatures

Prepared By

Name:	Jim Isherwood	Title:	MHSA Coordinator
Signature:		Date: 07-10-2009	Phone: (707) 995-2973

Email Address: jimi@co.lake.ca.us

Name:		Title:	
Signature:		Date:	Phone:

Email Address:

Enclosure 3
Exhibit 4
Budget Summary
For Technological Needs Project Proposal

County Name: Lake

Project Name: Electronic Health Record Project

(List Dollars in Thousands)

Category	(1) 08/09	(2) 09/10	(3) 10/11	(4) Future Years	(5) Total One-time Costs (1+2+3+4)	(6) Estimated Annual Ongoing Costs*
Personnel						
Total Staff (Salaries and Benefits)						
Hardware		10,000			10,000	
From Exhibit 2						
Total Hardware		10,000			10,000	
Software						
From Exhibit 2						
Total Software						
Contract Services (list services to be provided)		100,000			100,000	
Anasazi (or other vendor)		75,000	80,000		155,000	
County IT		5,000	5,000		10,000	
Total Contract Services		180,000	85,000		265,000	
Administrative Overhead						
Other Expenses (Describe)						
Total Costs (A)		190,000	85,000		275,000	
Total Offsetting Revenues (B) **						
MHSA Funding Requirements (A-B)		190,000	85,000		275,000	

*   Annual Costs are the ongoing costs required to maintain the technology infrastructure after the one-time implementation.

**   For Projects providing services to Multiple-Program Clients (e.g., Mental Health and Alcohol and Drug Program clients),
     Attach a Description of Estimated Benefits and Project Costs allocated to Each Program.

Notes:

This Budget Summary is based on the attached budget worksheet which details the preliminary hardware, contract services, and ongoing cost estimates by line item. The cost estimates for several line items are still to be determined. Approximately $90,000 has been built into the budget for these items. As the cost estimates come in, adjustments may be made to the Capital Facilities and Technological Needs Component distribution of funds.

Estimated annual ongoing costs for FY 09/10 alone have been requested. Lake County Mental Health will fund these costs through alternate means beginning FY 10/11 in order to maintain the balance of the Capital Facilities and Technological Needs Component funds for the planned Capital Facilities Project.

Type		Item	Units	Estimated Cost/Unit		Estimated Total Cost	
Hardware		Laptop - MHSA	1	$	1,154.63	$	1,154.63
Hardware		Laptop - Outreach	1	$	1,154.63	$	1,154.63
Hardware		Laptop - Children	1	$	1,154.63	$	1,154.63
Hardware		Laptop - Older Adult	1	$	1,154.63	$	1,154.63
Hardware		Laptop - Crisis	1	$	1,154.63	$	1,154.63
Hardware		Wireless Projector	1	$	395.00	$	395.00
Hardware		Document Scanners	2	$	652.78	$	1,305.56
Hardware		e-Signature Pads	5	$	525.38	$	2,626.90
Hardware Total						$	10,100.61
Contract Services	AP implementation	Anasazi	1	$	11,385.00	$	11,385.00
Contract Services	AP implementation	County IT - Diane	2	$	65.00	$	130.00
Contract Services	AP implementation	County IT - Martin	16	$	65.00	$	1,040.00
Contract Services	MC implementation	Anasazi	1	$	27,405.00	$	27,405.00
Contract Services	MC implementation	County IT - Diane	2	$	65.00	$	130.00
Contract Services	HR module implementation	Anasazi			tbd		tbd
Contract Services	HR module implementation	County IT - Diane	2	$	65.00	$	130.00
Contract Services	Doctors Home Page implementation	Anasazi	1	$	31,735.00	$	31,735.00
Contract Services	Doctors Home Page implementation	County IT - Diane	2	$	65.00	$	130.00
Contract Services	Cost Report implementation	Anasazi			tbd		tbd
Contract Services	Cost Report implementation	County IT - Diane	2	$	65.00	$	130.00
Contract Services	SQL database conversion	Anasazi	1	$	6,000.00	$	6,000.00
Contract Services	SQL database conversion	County IT - Diane			tbd		tbd
Contract Services	SQL database conversion	County IT - Diane	16	$	65.00	$	1,040.00
Contract Services	Document imaging project	Anasazi			tbd		tbd
Contract Services	Document imaging project	County IT - Diane	8	$	65.00	$	520.00
Contract Services	EHR interface	Anasazi			tbd		tbd
Contract Services	EHR interface	County IT - Diane	8	$	65.00	$	520.00
Contract Services Total						$	80,295.00
Ongoing Costs Per Year		Anasazi support (based on $5000 plus DH add'l support costs)	12	$	5,180.00	$	62,160.00
Ongoing Costs Per Year		County IT support				$	17,670.00
Ongoing Costs Per Year		Doctor's HomePage Drug Database Access Fee (based on 6 concurrent users)	12	$	336.00	$	4,032.00
Ongoing Costs Per Year		Wireless Service	48	$	44.99	$	2,159.52
Ongoing Costs Per Year		Network of Care website	12	$	720.00	$	8,640.00
Ongoing Costs Per Year		Network of Care eLearning	12	$	85.00	$	1,020.00
Ongoing Costs Per Year Total						$	95,681.52
Grand Total						$	186,077.13

Enclosure 3
Exhibit 5
Stakeholder Participation
For Technological Needs Project Proposal

County Name: Lake

Project Name: Electronic Health Record Project

Counties are to provide a short summary of their Community Planning Process (for Projects), to include identifying stakeholder entities involved and the nature of the planning process; for example, description of the use of focus groups, planning meetings, teleconferences, electronic communication, and/or the use of regional partnerships.

Stakeholder Type (e.g., Contract Provider, Client, Family Member, Clinician)	Meeting Type (e.g., Public Teleconference)	Meeting Date
All	Community Planning Meeting	05-15-2009
All	Public Hearing	06-25-2009