

## Project Portfolio Executive Summary for May 2014

McKesson Horizon Surgery Manager Implementation for Northwest Hospital project successfully completed in March. eFCS Phase 4 project completed in February. HR/Payroll Modernization project has begun and is now reporting status to the IT Strategy Board.

### UW Enterprise Projects

Projects - Green	Sponsor	Oversight Level *	Project Health **	Overall Risk Rating ***	Budget Rating	Schedule Rating	Scope Rating	Issues Rating	Actual Cost (Project Life)	Budget (Project Life)
<b>HR/Payroll Modernization</b>	V'Ella Warren Mindy Kornberg Cheryl Cameron Paul Ishizuka	3 - OCIO	Green	8	2	2	2	2	\$753,211	\$67,464,473
<p><b>Project Status:</b> We are currently in the design (architect) phase of the project, which will run through October 2014. The key objectives of the design phase are to:</p> <ul style="list-style-type: none"> <li>• Standardize business processes specific to HR, payroll, benefits, compensation, absence management, time tracking, and talent management.</li> <li>• Identify key changes to existing business processes and impacted roles to develop necessary communication and training.</li> <li>• Validate system integration points with Workday.</li> <li>• Develop the Workday system configuration requirements</li> </ul>										
<b>EDMS Implementation Project</b>	Gary Quarfoth Ann Anderson	2 - OCIO	Green	8	2	2	2	2	\$3,150,000	\$5,361,192
<p><b>Project Status:</b></p> <ul style="list-style-type: none"> <li>• We are prepared to launch the GCA Pilot on May 9th.</li> <li>• In April, the team completed final testing and training, as well as load testing on our evaluation environment. Deployment to production will take place the week of April 28th.</li> <li>• On April 24th, we delivered a statement of work/recommendations to the Admissions Modernization project. This project will be very complex, and consume the majority of our resources and time for most of the rest of the year. We have confirmed with both EDMS Sponsors and Admissions Sponsors that the Admissions efforts are top priority for the EDMS team in the coming months. In May, we will be getting a more detailed schedule together, and we will be able to better share the impacts of the project on the EDMS Program schedule.</li> </ul>										

## Project Portfolio Executive Summary for May 2014

Projects - Green	Sponsor	Oversight Level *	Project Health **	Overall Risk Rating ***	Budget Rating	Schedule Rating	Scope Rating	Issues Rating	Actual Cost (Project Life)	Budget (Project Life)
eFECS Phase 4	Susan Camber	2 - UW	Completed	8	2	2	2	2	\$875,250	\$2,176,590
<p><b>Project Status:</b> Reduced scope eFECS Phase 4 deliverables went live to campus on February 3, 2014. Team will continue to work on a short-term proposal transitioning from project to ongoing support in maintenance over the course of the next several months. Deliverables will be managed as a priority 3 effort on the Finance Program Book of Work.</p>										

## Project Portfolio Executive Summary for May 2014

### UW Medicine Projects

Projects - Green	Sponsor	Oversight Level *	Project Health **	Overall Risk Rating ***	Budget Rating	Schedule Rating	Scope Rating	Issues Rating	Actual Cost (Project Life)	Budget (Project Life)
<b>Epic Enterprise Specialty Implementation (EESI)</b>	Johnese Spisso James Fine	3 - UW	<b>Green</b>	8	1	2	2	3	\$16,497,000	\$49,680,000

**Project Status:** The EESI Project is currently in the Implementation Readiness Phase and remains on target to achieve the planned May 20, 2014 go-live date at all target clinics. An initial go-live of the practice management modules (Registration and Scheduling) at Northwest Hospital specialty clinics took place successfully on 4/29/14.

**Current major activities include:**

- Go-Live support of the 8 Northwest Hospital specialty clinics on the Registration and Scheduling modules
- Continued end-user classroom training
- Continued change management engagement events: Town Halls, Preference Labs, Dress Rehearsal Events
- Continued ongoing implementation readiness assessment
- Continued preparations for the 5/20/14 go-live across the entire scope of specialty clinics
- Onboarding and orientation of initial batch of contractor user support specialists
- Planning for follow-on Ambulatory EHR Optimization Project

**Upcoming major milestones include:**

- Go-live of all in-scope specialty clinics on 5/20/14
- Transition of project activities to ongoing support and to the optimization project on 6/30/14
- Project closeout report publication on 8/15/14

**Major Risks/Issues:**

The current primary risk is related to general adoption and efficient use of the ambulatory EHR by the physician community. As a core tool for clinic operations, the EHR has the potential to disrupt operations. Avoidance and mitigation strategies have been executed to reduce this risk.

The EHR support team is also focused on understanding the impact of existing production intermittent response time issues. Initial investigation indicates the addition of the specialty clinics will **not** exacerbate these issues. The team will evaluate the risk of applying corrective patches to Windows software at a point so close to the go-live.

Previously identified risk associated with the abstraction of clinical information into Epic has been avoided. Abstraction continues per plan.

**Note:** % Complete and Actual Cost are as of 2/28/14. The percent completion appears smaller than expected due to the significant increase in labor effort planned to support the go-live effort.

## Project Portfolio Executive Summary for May 2014

Projects - Green	Sponsor	Oversight Level *	Project Health **	Overall Risk Rating ***	Budget Rating	Schedule Rating	Scope Rating	Issues Rating	Actual Cost (Project Life)	Budget (Project Life)
<b>BusinessObjects Enterprise (BOE) Migration</b>	Lori Mitchell Maureen Hooley	2 - UW	Green	9	1	2	3	3	\$5,286,740	\$7,214,088
<p><b>Project Status:</b> Phase 1 (Hospital Billing and Meaningful Use) and Phase 2 (Professional Billing) of BusinessObjects Enterprise (BOE) Migration project have completed three releases each with over 70 new reports being deployed in the new reporting platform. The data foundation built in both phases will be leveraged for ongoing report migration as part of the operational effort.</p> <p>Additionally, the governance structure (with both data owners and data stewards) as well as access processes and policies are in place to ensure future success.</p> <p>Phase 3 (Clinical and Meaningful Use) of the migration project has completed the first release of over 20 Epic model reports deployed. We have a new clinical sponsor, Dr. Jane Fellner, who took the place of Dr. Sarah Kramer, who has left the organization. We anticipate another 20+ reports to be deployed in the week of 4/28 as part of Release 2.</p>										
<b>McKesson Horizon Surgery Manager Implementation for Northwest Hospital</b>	James Fine Cynthia Hecker	2 - UW	Completed	6	1	2	2	1	\$2,490,009	\$4,978,961
<p><b>Project Status:</b> The McKesson Project was implemented in February 2014. The project is complete and the project team members have returned to their normal work role.</p>										

Projects – Complete	Sponsor	Oversight Level *	Monitor of Benefits/Value Realized
<b>CHARMS:</b> Project went live 8/1/10	Lori Mitchell	3 - OCIO	Biennial performance report due summer 2011
<b>UW Medicine McKesson v15 Upgrade:</b> Project went live 2/22/12	Paul Ishizuka	2 - OCIO	
<b>ORCA Computerized Provider Order Entry (CPOE):</b> Project went live 9/24/12	James Fine	3 - OCIO	

## Project Portfolio Executive Summary for May 2014

* Oversight Level Key	
1	Overseen by UW management and staff. Requires OCIO approval and reporting if over delegated authority.
2	OCIO approval required and regular project reporting. QA reporting required, maybe internal or external. OCIO may recommend project to be full TSB oversight.
3	High severity &/or high risk, subject to full TSB oversight, which includes TSB approval, written reports to the TSB, periodic status reports to the TSB by the agency director and staff, and submission of other reports as directed by the TSB. External QA reporting required.

** Project Health Key	
<b>Green</b>	Project is on time, on budget, and within defined scope. <b>Overall Risk Rating where 4-9 is Green.</b>
<b>Yellow</b>	Changes to scope, budget, or resources have placed project at some risk. Project has the potential for delays or scope changes. <b>Overall Risk Rating where 10-14 is Yellow.</b>
<b>Red</b>	Major changes to scope, budget, or resources have placed project at critical risk. One or more of the following must change in order to proceed: project schedule, resources, budget, scope. <b>Overall Risk Rating where 15-20 is Red.</b>

**Note for UW Medicine:** project oversight levels 2 & 3 report to UW management

*** IT Project Risk Ratings	
Current Risk Rating	Use the scale below to rate current performance on <b>Budget, Schedule, and Scope</b> (select appropriate number for each)
Budget =	1 = Performing better than project plan; ahead by 5% or more 2 = Performance is on plan
Schedule =	3 = Behind plan, but within 5% of original targets 4 = Behind plan between 6% to 10% and likely to use/using contingency
Scope =	5 = Greater than 10% behind plan and more than half of contingency used
Current Risk Rating	Use the scale below to rate current impact of <b>Issues</b> and other factors relevant to the project (select one number for this measure)
Issues =	1 = No risks or issues identified at this time 2 = Some identified but minor, no impacts anticipated 3 = Some that could impact the project are being managed, with minimal impact anticipated 4 = Significant risks/issues/other factors identified but not yet managed 5 = Risks/issues being managed but will have significant impact (greater than 10%) on project budget, schedule and/or scope