

**WRITTEN QUESTION TO THE MINISTER FOR HEALTH AND SOCIAL SERVICES
BY THE DEPUTY OF ST. JOHN
ANSWER TO BE TABLED ON TUESDAY 7th JUNE 2011**

Question

Further to the response given to Deputy R.G. Le Hérisssier of St. Saviour's written question on 3rd May 2011, could the Minister detail –

- (a) what IT packages the department has received for the £10,928.686 referred to;
- (b) what percentage is consultant fees;
- (c) what percentage, if any, relates to contractors fees and salaries;
- (d) how the contractual issues for the delay from October 2010 for the Patient Administration system were overcome, who extended the contract until June 2011 and what additional costs, if any, will there be in giving this extension;
- (e) will any such additional costs be met by Health and Social Services or the contractor?

Answer

- (a) The £10,928,686 expenditure to date (2006 up to end February 2011) forms part of the £12m total ICR budget. The expenditure relates to:
 - development and implementation of the Child Health Care System
 - development and implementation of the Electronic x-ray and imaging system (RIS/PACS)
 - development of the patient administration system (PAS)
 - development of Pharmacy system (to be implemented alongside the PAS system)
 - purchase, testing and installation of all associated hardware plus wireless technology
 - associated overhead costs including training and backfill for clinical staff involved in development of the ICR project
 - development of an electronic patient record (EPR) for the Emergency Department (to be implemented alongside the PAS system)
 - development of an EPR for Maternity (to be implemented alongside the PAS system)
- (b) Of the expenditure to date 19.82% relates to contractors fees and salaries (£2,166,079). This spend on contractors predominately relates to 2009 and 2010.
- (c) see above.

- (d/e) The target date for completion of the PAS project was originally October 2010. This was extended to 11 June 2011 in order to undertake a number of system changes/developments aimed at improving functionality and ensuring the system better supported HSSD's business processes.

The decision to change the completion date was taken by the Minister on the recommendation of the ICR's Senior Responsible Office (SRO) – in this case the Hospital Managing Director – in consultation with the ICR Board which includes senior IT and clinical staff. The number of ICR contractors supporting this extended completion date is significantly reduced with the remaining contracts, who are on weekly rolling contracts, costing a total of £15,200 per month.

HSSD and the system suppliers are negotiating additional clinical functionality in lieu of any additional costs incurred HSSD. These negotiations are commercially sensitive. It would not therefore be appropriate to disclose details at the moment.