Scope Management Principles

Connect Care consolidates disparate health information systems into an integrated clinical information system (CIS). This can streamline stakeholder experiences while promoting informational, relational and intentional continuity. Achieving systems integration means that some applications will be replaced and some gaps will need to be filled. Scope management is about identifying important clinical, functional or safety gaps, prioritizing gap-mitigation strategies and filling gaps by interoperating or interfacing with systems that work with Connect Care. The following principles use Integration-Interoperation-Interfacing concepts to guide scope management decisions.

	Principle	Implications
1.	Replace fragmented systems with a seamless information ecosystem that allows patients, providers and policy-makers to achieve best possible outcomes.	Integration is favoured, when possible, over Interoperation or Interfacing to build informational, relational and knowledge continuity.
2.	Functional gaps in the Connect Care offering will be defined where significant clinical or safety needs are not addressed by the CIS.	Continuity of information, relationships and guidance is prioritized over convenience or personal preference (when in conflict).
3.	A business case describing a clinically important functional gap will reference pre-defined major and minor gap criteria.	Major criteria include safety, quality, and vendor capability while minor criteria consider ease-of-use, system efficiency and fiscal efficiency.
4.	Demonstrated gaps will be addressed by through CIS development or enhancement whenever feasible.	Any new development will leverage contributions and experience of other vendor clients.
5.	Persisting gaps will be addressed through standards-based Interoperation or Interfacing that preserves health record integrity.	Selection of systems to fill gaps will consider adherence to sustainable system-to-system or application-to-application information exchange standards.
6.	Fair process will be used to select systems to fill functional or safety gaps, while preserving informational, relational and intentional continuity as much as possible.	Analysis and recommendations will reflect clinical, operational, technical, fiscal, scalability and sustainability considerations.
7.	Gap mitigation recommendations will be reviewed by Connect Care governance using a transparent process.	Applications for gap recognition and mitigation will use standardized decision-request requirements.
8.	Inconclusive or contentious gap-mitigation recommendations will be escalated to the Connect Care Executive Committee for final decision-making.	The merits and timing of a decision-challenge will be reviewed in light of Connect Care critical pathways and dependencies.

Alberta Health Services