After more than 35 years, my career has offered me a myriad of opportunities to participate in and advise on both projects and organizations. Each has its own story as well as its common attributes.

For Wait Times, I have had a great line of sight into this latest evolution of the project – moving from project mode to a fully operational model. The Wait Time Information System (WTIS) has been a unique project in many respects. The team of government, users, vendors and Cancer Care Ontario (CCO) staff collaborated to implement the WTIS across the province in tight time frames. The project’s leader capitalized on a wide variety of attributes of successful initiatives that preceded the WTIS, utilizing the principles of solid project management and exhibiting a relentless focus on results, user involvement and transparency.

And now the program must evolve to a new stage in the life cycle, moving out of the project domain and into the mainstream of operations. This transition asks for new competencies, coupled with the same laser focus on results. The WTIS is, after all, still evolving, and enhancements to the system are continuing at a rapid pace, with new users, new procedures and new applications. To add complexity, the Ministry of Health and Long-Term Care has grown the Access to Care program to address emergency room length of stay and has asked CCO to expand the WTIS to support this component as well. Even as this expansion continues, the organization has been tasked with the responsibility of creating an organizational design and staffing model that is sustainable and cost-effective, while retaining the agility and responsiveness that were hallmarks of the successful incubation of the WTIS.

Projects require teams and collaboration on many levels, but they are also stand-alone entities with a project mentality. They are successful in part because they are elevated out of the mainstream of an organization. But every successful project must accomplish the move from its project status either to wind down or to fully integrate within the organization.

Projects require teams and collaboration on many levels, but they are also stand-alone entities with a project mentality. They are successful in part because they are elevated out of the mainstream of an organization. But every successful project must accomplish the move from its project status, either to wind down or to fully integrate within the organization. In the case of the WTIS project, its early success transitions into the operational Wait Time Information Program (WTIP).
Many of the attributes of a successful project must be accommodated in the sustainment organization. For example, the articles in this journal have emphasized user involvement as a critical success factor in the implementation of the WTIS. User engagement is as essential in the permanent program model as it was in the project model. However, the emphasis has begun to shift from user input on system design and focus on implementation support to understanding customer satisfaction and ongoing user input to system enhancements and upgrades.

In the previous two years, CCO has focused on updating its information strategy and has recognized the need to enhance its organizational design to support new demands. The challenge of accommodating those changes, while recruiting for a large number of positions and supporting the knowledge transfer from project staff, has created stresses and strains on the organization.

System deployment must now incorporate routine maintenance and normal life cycle issues – where security patches, routine preventative maintenance and hardware upgrades must be part of the calendar – while minimizing the impact to users.

All of this work must be managed by a smaller group of permanent individuals who are willing to commit to the program without a specific time horizon. This means a new level of staff and resource management – attracting, training and retaining the right staff and giving them opportunities for career growth. The new performance paradigm requires people who are ready for the long haul, not only the series of almost breathless sprints that represented the previous pace and tone of the project.

The WTIS came to CCO both because of the agency’s desire to improve cancer surgery wait times and a willingness to take a risk and participate in a project to improve outcomes in the larger health system. CCO also has a proven track record for complex, province-wide implementations. Projects such as the Pathology Information Management System, Computerized Physician Order Entry System and Collaborative Cancer Stage Capture demonstrated the organizational competencies for large projects. Only a few organizations in Ontario have the corporate DNA to support such work. CCO also included performance management as an essential tenet of its operating framework, and this experience would prove invaluable in rolling out the WTIS and establishing the WTIP.

The ongoing sustainment and growth of the program – absorbing the project within the organization and growing the organization to envelop a project that increases staff and responsibilities by 100% or more – is now asking another competency from CCO.

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The benefit for CCO has been in building its capacity for sustained management so that the organization can continue to take on new challenges and support the use of data retrieved through the WTIS for performance management, creating a culture of accountability and proving the transformative power of information.

Healthcare often falls short in achieving the desired outcomes from information management/information technology projects. The health system landscape is littered with projects abandoned because they failed to deliver value early enough to sustain the support required to make it through the long haul, or projects that dwindled after the initial implementation because, once the spotlight moved to the user, support disappeared.

It is in this transition period that CCO is offering a true measure of its capabilities.

About the Author
Denise Zarn served as Acting CIO for CCO from October 2008 to May 2009. Denise was a senior executive in the healthcare practice of a major consulting firm, with experience across Canada and in the US. She led the first major, successful Computerized Physician Order Entry project in Canada more than 20 years ago. She is now an independent consultant.