

The Z-A of system selection

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A highly interactive session

1. How many are involved in a selection right now?
2. How many expect to be involved in next five years?
3. What kinds of systems do you expect to be selecting?
 - AP only
 - AP/CP
 - specialized (eg, molecular path)

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Selecting the right system is what percentage of the success of a system ?

4.

90-100

70-90

50-70

30-50

10-30

0-10

Rating of possible criteria

The following are possible activities and criteria for selection of an LIS

- not in chronological order
- not in order of importance
- some are critical, some are useful, some are ...

I'll go through them all, Z-A – then go through them again, and ask you to vote for the five most important – and for two that are RBI's (really bad ideas).

If you don't use your 5+2 votes, I'll assume that your preferred selection method is the coin-flip.

Z

Check the KLAS score of every vendor in the field

Y

Does vendor have medical technologists
and/or pathologists on staff

X

exclude systems using obsolete I/T
technology

W

Financial stability of the vendor

V

From the vendor, get a complete list of all
live sites

T

Hospital CIO decree: laboratories/pathology will use vendor X. You have no involvement in this decision.

S

Interview your lab staff and clients; what are key characteristics of the new system?

R

Investigate 10-year track record of vendor
parent company

Q

list of all the functions you may need

P

Look only at web-based systems

O

Negotiate the lowest price available

N

phone calls to a large subset of the sites
identified

M

Request vendor to send you a list of reference sites similar to your lab

L

Score all RFP responses, calculate a composite functionality score

K

select sites to be visited based on your calls

J

Select sites to visit that vendor suggests are comparable with your site

I

Send the RFP to every vendor you are aware of, asking that they answer all questions, send back to you

H

Small company

G

System must use certain development tools/architecture - only consider systems with that.

F

Vendor provides extensive demos at your site, so that all your staff can see the functions

E

Very large company

D

Visit three or four sites running the software

C

Write an RFP with all functions you need or may need, assigning weights to each item

B

You are a small specialty lab doing xxxx.
What LIS does the leading national xxxx
reference lab use? Select that LIS

A

You provide scenarios to vendor to demonstrate during a demo at you site

What criteria or activities have I missed?

????

AA

Do I really need to replace the system I
already have??

Re-engineering

Add-on modules

Etc.

U

Gather a list of all the vendors that advertise offering such a system

Now, back through all the activities

Please vote “important” for five, and “very bad idea” for two

Anyone not voting goes on record as favoring the coin-flip method

Criteria A-H

- A You provide scenarios to vendor to demonstrate during a demo at you site
- B You are a small specialty lab doing xxxx. What LIS does the leading national reference lab use? Select that one
- C Write an RFP with all functions you need or may need, assigning weights to each item
- D Visit three or four sites running the software
- E Very large company
- F Vendor provides extensive demos at your site, so that all your staff can see the functions
- G System must use certain development tools/architecture - only consider systems with that.
- H Smallll company

Criteria I-O

- I Send the RFP to every vendor you are aware of, asking that they answer all questions, send back to you
- J Select sites to visit that vendor suggests are comparable with your site
- K select sites to be visited based on your calls
- L Score all RFP responses, calculate a composite functionality score
- M Request vendor to send you a list of reference sites similar to your lab
- N phone calls to a large subset of the sites identified
- O Negotiate the lowest price available

Criteria P-U

P Look only at web-based systems

Q list of all the functions you may need

R Investigate 10-year track record of vendor parent company

S interview your lab staff and clients; what are key characteristics of the new system?

T Hospital CIO : lab/path will use vendor X. You have no involvement in this decision.

U Gather a list of all the vendors that advertise offering such a system

Criteria U-Z

- U Gather a list of all the vendors that advertise offering such a system
- V From the vendor, get a complete list of all live sites
- W Financial stability of the vendor
- X exclude systems using obsolete I/T technology
- Y Does vendor have medical technologists/pathologists on staff
- Z Check the KLAS score of every vendor in the field

Comments on the criteria ...

Case study 1

Hospital lab – pathologist started choosing a system to support multiple departments, political flak – we want the best system for our LAB

"ok, we will have to send RFP".

Case study 2

Hospital lab - created 176 page single spaced RFP - sent out to a dozen vendors - got five responses - one clearly not suitable. But some responses clearly contradicted what had been seen at site visits.

Case study 3

Hospital wrote a one-line RFP "we want the system installed at Hershey Medical Center"

Case study 4a

Hospital lab - very impressive series of demos – all the staff thought this would be a wonderful system – purchased

Case study 4b

BUT

- no reference checks
- vendor moribund.
- Had to completely replace within 3 years

How do you spell demo ??

Demo?

D – E – M – O – N

(the “N” is silent)

Case study 5

State agency

- sent and scored RFP
- insisted on a particular technology
- but didn't check references
- development site had never opened the distribution disk.
- Third state had just begun implementing.

Multimillion dollar failure, delayed implementation of the public health network by 5+ years.

Case study 6

CEO visited the "vision center" in the midwest, signed up for all the products - but few of them existed.

Hence the term "hallucination center"

Case study 7

Hospital CEO and CIO decreed that all systems would be supplied by their preferred vendor.

The CEO stated in a meeting "it doesn't matter whether the software works or not, we are going to use the products supplied by xxxx"

Interesting to note that the CIO's previous four hospitals all "preferred" that same vendor

Questions

- Thoughts? Comments? Objections?
- If you think of something later, please eMail - raller@usc.edu