

Public Health

The mission of the Public Health Department is to improve the health of our communities by preventing disease, promoting wellness, and ensuring access to needed health care. Planning for capital needs is key to fulfilling this mission.

The Capital Improvement Plan identifies the projects that will be needed over the next five years to maintain, support, and enhance the capital infrastructure of the Public Health Department and enable the department to continue to meet the public health and safety net health needs of Santa Barbara County residents.

The electronic health record (EHR) system is a major initiative for the Department. The move to a paperless medical records system will result in improvements in the quality, safety, and efficiency of healthcare. This project is estimated to cost \$2,200,000.

The pharmacy software replacement will enhance the workflow and operations of the Department's three pharmacies. The project will move forward after the implementation of the EHR project in order to ensure interoperability between the systems. The cost for the project is estimated to be \$150,000.

For information on the Santa Barbara County Public Health Department you can go to the website at <http://www.sbcphd.org>.

Electronic Health Record System - Countywide

Function: Health & Public Assistance

Department: Public Health

StartDate: 7/1/2007

EndDate: 6/30/2010

Description

This project plans for and makes recommendations regarding the feasibility of procuring, financing, and installing an Electronic Health Record (EHR) system. As the implementation of an EHR has become a key item on the Federal health agenda, Health Information Technology is increasingly seen as a solution to promote the quality, safety and efficiency of health care. Increasing numbers of hospitals, clinics and physicians are implementing EHR's in their practice settings. The Public Health Department (PHD) has been exploring the feasibility of implementing an EHR in its seven clinics over the past year.

The planning phase, phase 1, will include hiring a Project Manager who will map all of our existing processes and workflow, establish multidisciplinary work groups involving medical providers and various levels of staff, and assist PHD in identifying key functionality needed for an EHR in our clinic setting. The second phase will involve procurement, set-up, and initial implementation of the selected system. It will take multiple years to implement the project.

As the planning phase involves staff time and input, an annual loss of \$200,000 of revenue is expected to occur in the first 2 years because staff will not be working on billable services.

Status

Currently PHD is in the planning phase for this project. A Steering Committee has been formed and, after a delay of one-year because of budget constraints, a Project Manager is expected to be hired by 12/31/09.

Net Impact on Operating Budget

A project manager or healthcare industry consultant will be hired (\$300,000 for 18 months) and 2.0 FTE added after six months (\$185,000). Services and supply costs are estimated at approximately \$10,000/yr. When complete, on-going costs are estimated to be offset by reduced medical transcribing costs and salary and benefit savings.



Estimated Project Costs

Construction Costs		Annual O & M Costs	
Preliminary	300	Utilities	0
Design	0	Maintenance	0
Acquisition	0	Personnel	185
Construction	0	Other	200
Other	1,900		
Total Cost	2,200	Total Cost	385

Source of Funds	Fund	Prior Year(s) Expense	Est Act 2008-09	Proposed 2009-10			Projected Requirements					Five Year Total	Future Years	Project Total
				Carry Forward	New Funding	Year 1 Total	Year 2 2010-11	Year 3 2011-12	Year 4 2012-13	Year 5 2013-14				
Public Health Fund	0042				150	150	2,050					2,200		2,200
Totals					150	150	2,050					2,200		2,200
Operating & Maintenance Costs for Fund 0042					Year 1 Impact:		286	385	385	385	385	1,441		

Major Equipment - Fully Funded

Pharmacy Software Replacement

Function: Health & Public Assistance

Department: Public Health

StartDate: 7/1/2009

EndDate: 6/30/2010

Description

This project will improve workflow within Public Health's three Pharmacies and provide additional functionality. The current outdated Pharmacy software will be replaced with more current technology that will provide scanning, electronic filing, auto-replenishment, auto-faxing, and remote processing of prescriptions. A new staffing model of a higher ratio of pharmacy technicians to pharmacists will be possible due to remote processing; this will address ongoing staffing issues and emergency staffing issues related to sudden illnesses as well as a pandemic.



Status

Currently the Department is requesting preliminary information from pharmacy software vendors and plans to conduct a formal Request For Proposal. Preliminary analysis has been completed and desired functionality has been identified.

Net Impact on Operating Budget

Replacing the existing pharmacy system is not expected to increase on-going costs. There is the potential to reduce labor costs and allow for staff to assist in filling prescriptions from a remote location.

Estimated Project Costs

Construction Costs		Annual O & M Costs	
Preliminary	0	Utilities	0
Design	0	Maintenance	0
Acquisition	0	Personnel	0
Construction	0	Other	0
Other	150		
Total Cost	150	Total Cost	0

Source of Funds	Fund	Prior Year(s) Expense	Est Act 2008-09	Proposed 2009-10			Projected Requirements					Five Year Total	Future Years	Project Total
				Carry Forward	New Funding	Year 1 Total	Year 2 2010-11	Year 3 2011-12	Year 4 2012-13	Year 5 2013-14				
Public Health Fund	0042				150	150						150		150
Totals					150	150						150		150

Operating & Maintenance Costs for Fund 0042		Year 1 Impact:								
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