

Divisions of General Practice

Information Management Maturity Framework
(IMMF)

Toolkit — IM planning templates
linked to Division business plans

Information Management Maturity Framework (IMMF)

Toolkit – IM Planning Templates

Purpose

The purpose of the “IM planning templates linked to Division business plans” is to assist Divisions to address the action tasks below.

Action Tasks	Capacity Gap	IMMF Element
Integrate the IM plan with the Division’s strategic and annual business plans, with defined IM outcomes integrated into the Division’s programs and services.	Defined to Managed	Divisional Context
Develop an IM plan for the Division, with defined IM outcomes integrated to the Division’s programs and services.	Defined to Managed	Divisional Capabilities
Develop an IM plan for the Division to implement IM principles, policies and standards, and to define IM outcomes, for each of the Division’s programs and services.	Reactive to Defined	Divisional IM Management

These tasks, which should have been identified from the Information Management Maturity Framework (IMMF) gap analysis and toolkit specification, are the culmination of the IMMF tools for a Division to achieve a “Defined” level of maturity, and establish the basis for more advanced “Managed” maturity.

This tool draws together the capability gained from other information management (IM) tools to provide templates that will enable Divisions to deliver the objectives identified in their Business Plans. The IM Planning templates will ensure that the key IM principles – accessibility, usability, accountability, and integrated approach, coordination and planning, optimising value and continuous improvement, are imbedded into Division business planning.

To use these templates, Divisions will need to use the outcomes and understanding gained from other tools, to develop a single view of how IM planning can contribute to achieving a Division’s business goals. Specifically these IM Planning Templates are dependent on:

- Sample IM Policies and Standards
- Sample IM Job Descriptions
- Staff IM Training and Support Guidelines
- Guidelines for IM Issues Registers
- Guidelines for Defining IM Outcomes
- Checklists for incorporating the ILC into Division’s programs and services

Explanatory notes

This tool provides templates for CEOs to use for IM planning and ultimately to develop a Division IM Plan. The details of each Division’s IM Plan will always reflect the local business objectives and their unique financial and governance constraints. These templates are designed to provide a common approach for IM planning and to assist each Division to develop an IM Plan appropriate to their own circumstances.

CEOs can use the IM templates to help prioritise demands on available time and to schedule resources. The tool can be used for all of a Division’s activities, not just the Divisions of General Practice Program National Performance Indicators (NPIs), or those activities funded by government, and will be applicable to all Divisions regardless of size.

By developing a formal IM Plan, a CEO or Division Board will be able to consolidate a single view of the IM tasks needed to support the Division’s business objectives and then to prioritise and manage the use of staff, technology and budget funds against competing priorities.

A good IM Plan will also allow a CEO to clearly establish the links between IM activities and business outcomes. This is often necessary to attract project based funding or to justify requests for scarce resources or skills. It is assumed that the Division has developed a formal Business Plan and has used that plan to define the IM Scope of Work and identified the IM outcomes necessary for that Plan. The same senior staff involved in business planning should be the major contributors to IM planning.



Instructional design

This tool consists of three Parts:

- Part 1 – Templates for scheduling and applying resources to IM Outcomes
- Part 2 – Template for a Divisional IM Plan
- Part 3 – Sample Division IM Plan using the IM Template

Part 1 – Templates for scheduling and applying resources to IM Outcomes

These templates use the methodology of the IMMF to assist all Divisions to schedule IM outcomes on the basis of effort versus impact and dependency planning. Resources should be applied to each outcome based on the four workstreams and assigned to the relevant programs or projects within the Division. CEOs should use these templates to group IM Outcomes into program responsibilities or, as separate projects with individual project manager accountability. All IM activities should be assigned with a specific accountability, an allocation of resources and budget, and a specified timeframe for completion.

Part 2 – Template for a Divisional IM Plan

CEOs should use this template as a guide for the structure and content of their own internal requirement for an IM Plan.

Part 3 – Sample completed Division IM Plan using the IM Template

This part provides a sample completed IM plan using the template that supports specific objectives of a typical Division Business Plan. The sample plan assists the CEO to see specific examples of IM planning for specific common business plan objectives. CEO and senior staff may wish to seek advice from other Divisions who have been successful in developing IM plans linked to specific programs.

Summary of outcomes and resources

Workstreams	Outcomes	Resources
New processes and procedures to be adopted	<p>The Division has an annual IM plan and most staff are familiar with the Division's IM objectives and major projects.</p> <p>The Division's IM Plan integrates local IM principles, policies and standards into all the Division's programs and services.</p> <p>The Division's IM Plan includes:</p> <ul style="list-style-type: none"> • Measurable IM outcomes for all of the Division's programs and services. • Consideration of the requirements for all IMMF elements and criteria. • The impact of emerging IM trends, technology and issues. • All technology tools and staff IM training for the Division's business requirements. • Standard processes and procedures for the re-use of information between the Division's programs and services. 	<p>Tool is facilitated for the development of new processes.</p>
To use IM technology within the Division to further business plan goals	<p>New IM tools implementation and additional staff training are defined for all of the Division's programs and services as part of an IM plan.</p> <p>IM Technology is applied as an enabler to further Division business plan goals.</p>	<p>Facilitated for the transfer of technology.</p>
Culture and change management requirements	<p>The IM plan incorporates change management into the Division's annual planning cycle and strategic plan.</p>	<p>Mentored for the adjustments in culture needed for an IM Plan.</p>



Part 1 – Templates for scheduling and applying resources to IM Outcomes

Introduction

This part gives Divisions a set of templates that can be used for scheduling and applying resources to IM Outcomes. These templates use the methodology of the IMMF to assist all Divisions to schedule IM outcomes on the basis of effort versus impact and dependency planning.

Scheduling and applying resources to achieve IM Outcomes should be prioritised around Division business plan goals and objectives. The IM Outcomes produced should be grouped into program responsibilities or separate projects. Once this is done, resources can then be applied to each outcome based on the four workstreams and assigned to the relevant programs or projects within the Division.

Scheduling Outcomes for an IM plan

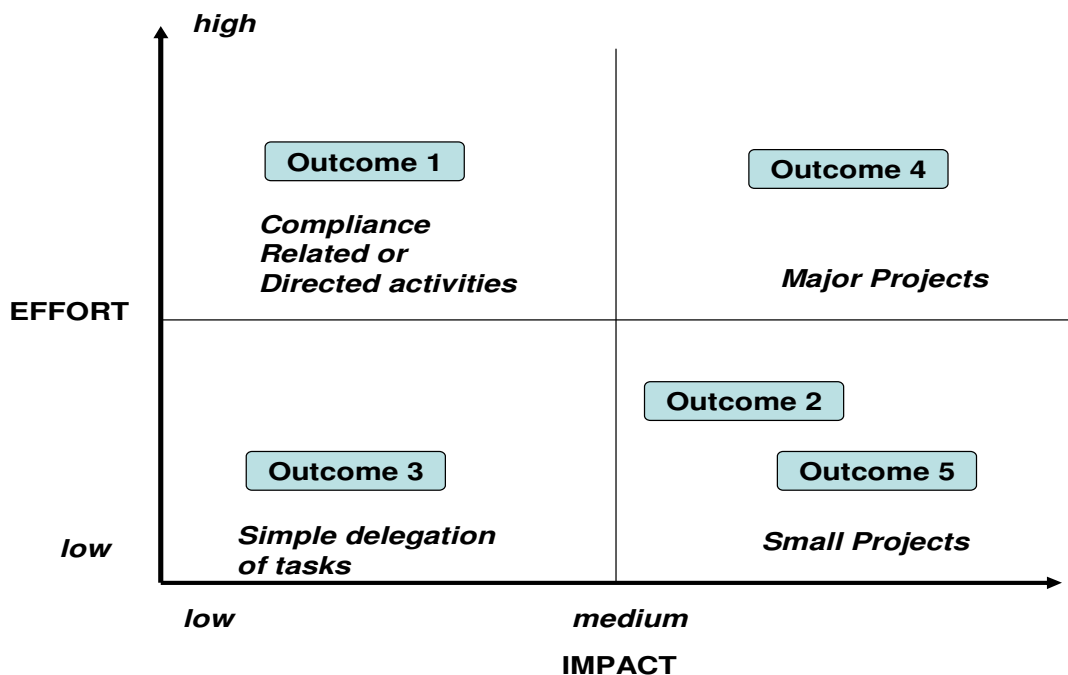
There are many ways a CEO may schedule the IM outcomes developed from their Business Plan in order to develop an IM plan. For example, outcomes may be scored for importance and risk against the Division's business plan KPI. This is an approach already used in the top-down gap analysis step of the IMMF.

To assist all Divisions, regardless of their current level of IM maturity and IM planning, the IMMF recommends an approach using two simple measures of an outcomes priority. They are for effort versus impact and dependencies.

Outcomes are compared on their level of effort to implement versus the expected impact that the initiative will have on the Business Plan. Those of low effort and high impact may be likely candidates to begin small projects to gain some initial successes, and tasks that are low effort and low impact may become simple delegations to staff. The effort/impact chart can be used separately for each work stream or as a collective tool to compare the outcomes for all four workstreams.

Outcome Analysis by Effort versus Impact

Example Template 1. Outcome Analysis by Effort versus Impact





High Effort / Low Impact

These outcomes involve a considerable degree of effort on the part of the Division and result in an impact that does not contribute very much to a Division's business goals. For example, a request (or direction) from a State health authority for Divisions to report details of individual contacts by Division staff with members on reporting practices for notifiable diseases. This would involve a "one-off" report collecting information that may not be normally collected with no explicit link to a Division's business goal. Achieving such an outcome may require effort across all workstreams:

- People: staff would need some training on what needs to be collected and reported.
- Process: there would need to be some procedures written to ensure a consistent collection of data.
- Technology: it may be necessary to acquire a new software application to manage the one-off collection.
- Culture: collecting a set of data of not great use for the Division would increase cynicism and scepticism. This would need to be managed by a significant communications strategy.

Low Effort / Low Impact

These outcomes involve very little effort for a minor impact. For example, publishing a set of directions for travelling to the Division offices on the Division website.

- People: staff would use an existing skill.
- Process: no real change to procedures
- Technology: technology already exists
- Culture: no real effect on culture.

High Effort / High Impact

These outcomes involve a considerable degree of effort and result in a high impact contribution to the Division's business goals. For example, a project to classify and tag (with keywords) all the records held in Division share drives and paper files is likely to be a major effort if starting from the beginning; but it could result in all staff being able to rapidly locate information when needed, saving the need for re-creating information resources and other work already completed.

- People: staff would need to be trained in how to classify and tag records; then in searching techniques.
- Process: procedures would need to be developed to ensure all new records were classified and tagged.
- Technology: an electronic document management system would most likely need to be acquired.
- Culture: changes to culture would be required to have information seen as a resource that needs managing.

Low Effort / High Impact

These outcomes involve very little effort and result in a high impact contribution to the Division's business goals. For example, implementing a register of IM issues involves very little effort, but the knowledge gained by having issues documented, tracked and resolved may result in considerable improvements to productivity.

- People: very little new skills would be needed. It could be done through a discussion at a team meeting.
- Process: a simple process would need to be put in place (this could be done by modifying an existing resource e.g. Tool "Guidelines for an IM issues register")
- Technology: could be as simple as a spreadsheet, or a paper diary.
- Culture: some change in culture would be needed.

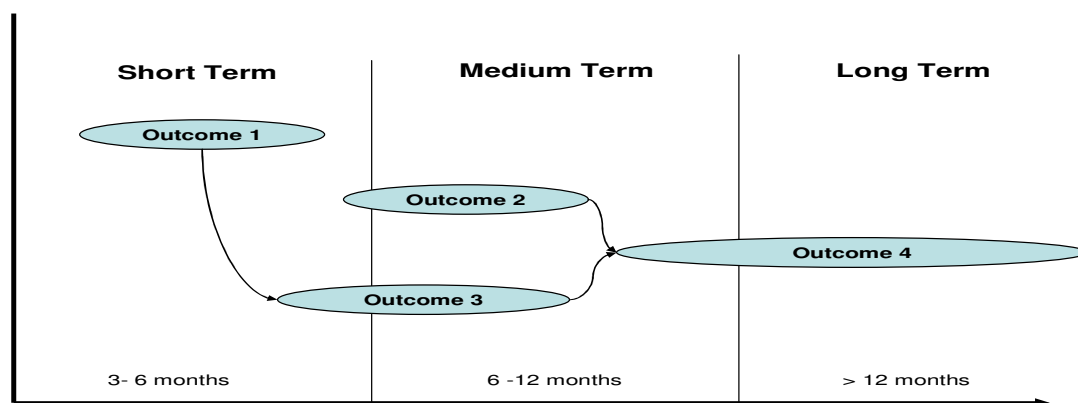


Outcome Analysis by Dependency

In order to complete a project that involves multiple outcomes, it is sometimes not possible to prioritise the outcomes in terms of effort / impact, as some outcomes need to be in place before others can be achieved. That is, the achievement of one outcome is dependent on achieving an earlier one, e.g. a Division needs to have a sound capability to implement data validation techniques before it can report reliable data.

In these situations, Divisional planning processes then look at the grouping of related outcomes over time. The CEOs can judge for themselves or seek advice to identify the dependencies between outcomes and the availability of resources to attempt more than one outcome simultaneously.

Example Template 2: Outcome Analysis by Dependency



This leads to a high level plan, or series of plans, which can be managed against short, medium or long-term timeframes and be coordinated to deliver objectives aligned to the priorities of the Division and its business plan. CEOs should refer to the tool “Guidelines for IM in project management” for further details on implementing IM principles into the Division’s project management methodology.

Grouping and Resourcing IM Outcomes for an IM Plan

The achievement of IM Outcomes can be organised and resourced in any number of different ways. The two most effective ways of grouping and resourcing IM outcomes to produce an IM Plan are by work stream or by program area.

Grouping by workstream

This is where a project or set of IM outcomes is delegated according to need. This may include a perceived need for people skills, processes, technology and a change to culture. Thus all the skills and training outcomes specified in the plan are allocated to a specific workstream manager for training who is then responsible for the IM skills and knowledge outcomes for all of the Divisions program areas. This approach delegates accountability directly for each of the four workstreams and the workstream manager responsible for delivering outcomes across all program areas in the Division.

Grouping by Program

A program is a related set of goals specified in the Division’s business plan. Most Divisions maintain programs for:

- Division Executive and Administration
- Practice support
- Quality Use of Medicines
- Aged Care
- Australian Better Health Initiative (ABHI)
- Australian Primary Care Collaboratives (APCC)
- Access to Allied Psychological Services (Mental Health)



If IM outcomes are to be grouped and managed by program, then each program manager will be assigned a series of projects and outcomes based on each of the four workstreams. Thus IM is managed by program with responsibility for the appropriate skills and knowledge, processes, technology and culture delegated separately to each program manager.



Part 2 – Template for a Divisional IM Plan.

This Part sets out a template for a generic Divisional IM plan. Divisions should use this template as the starting point for their IM Plan and may wish to add additional sections depending upon local needs.

IM Vision Statement

This is a brief statement of the overall strategic IM objectives of the Division, linking the IM Plan to the Divisions Business Plan. Refer to the IMMF Tool “Sample IM policies and standards”.

Reference should also be made to all associated Division plans, e.g.:

- Strategic Plan and Annual Business Plan
- HR Plan
- Budget Plan
- Other Business Plans the Division may have.

Impact of emerging IM trends, technology and issues

This is a discussion of how emerging IM trends, technology and issues may affect the delivery of the goals specified in the IM Plan.

Division’s IM Principles, Policies and Standards

Reference to any internal or external IM principles, policies or standards used in the development of the plan or relevant to the IM scope of work. Refer to the IMMF Tool “Sample IM policies and standards”.

IM Scope of Work

The IM Scope of Work is the summary of IM outcomes that needs to be done to enable the Division’s business plans to be achieved. Typically, IM outcomes are prioritised against the objectives or activities of the Division’s business plan. Alternatively, the scope of work may be expressed as major projects, minor projects and business as usual activities. Refer to the IMMF Tool “Guidelines for defining IM outcomes”.

Division Technology tools

This should identify and describe the priority requirements for Division-wide technology tools required in support of the IM Plan.

Division IM Training

This should identify and describe the Division wide IM training required in support of the IM Plan.

Grouping and resourcing of all IM outcomes for all of the Division’s programs and services

IM projects and outcomes must be assigned to individual managers within the Division for accountability. Each manager should then be assigned resources for the completion of their assigned tasks.

Projects and outcomes can be grouped around Division Programs and Services or by workstream. Depending on the approach taken, separate headings are required for each program or workstream.

Under each paragraph heading, the paragraph should describe:

- The IM outcomes or projects to be achieved;
- Key resources and staff allocated to each outcome;
- Budgets and other constraints;
- Timeframe; and
- QA and reporting requirements.

Information Planning

This is a detailed description of the Division’s specific processes and procedures for information planning, specifically for the re-use of Information across Programs and over time. Include all processes and procedures adopted for the three tiered model of information planning, i.e.

- What is the immediate requirement for the information?
- What use, reporting or analysis can be anticipated by other users in the Division?
- How else may the information be needed in the future?



SWOT Analysis of IMMF Elements and Criteria

This is a review of the strengths, weaknesses, opportunities and threats for each of the IMMF elements and criteria. This will give the CEO an independent view of IM priorities against the 32 criteria in the IMMF.

This section should list the criteria identified under each heading as a strength, weakness, opportunity or threat. The worksheet below can be used for the SWOT analysis by associating a “SWOT” indicator against each criteria in the matrix. An example matrix using this technique is displayed below.

Context	Capability	Management	Compliance	Lifecycle	Users
Culture S	Individual Competencies W	Leadership S	Data Quality T	Planning W	Staff Satisfaction and Awareness O
Change Management O	External Advisors T	Strategy S	Security T	Collection and Capture O	Staff Training and Support O
External Awareness S	Tools W	Policies and Standards S	Privacy S	Organisation O	GP Satisfaction and Awareness O
	Technology Integration W	Roles and Responsibilities O	Business Continuity W	Use and Dissemination O	GP Training and Support O
	Project Management W	Program Integration O	Compliance T	Maintenance W	
		Risk Management W		Disposal W	
OVERALL ASSESSMENT					
S	W	S	T	O	O



Part 3 – Sample IM Plan

This part gives an example of an IM Plan and there is an example provided of the kind of content required for each of the sections of the Plan specified in Part 2.

IM Vision Statement

Mid Town Division of General Practice has a Business Plan for 2008-9 which has set three main objectives.

These are:

- To support general practice in producing improved health outcomes for their patients.
- To work with General Practice to create a fulfilling professional environment for their members.
- To ensure that the Division meets its contracted obligations in reporting information to Government on chronic disease and other health issues.

To support these objectives, the Division programs and services must ensure that information systems are designed and implemented to easily locate and retrieve information and to facilitate sharing the information within and between programs and services, with other members of the Divisions Network and with government agencies, subject to legal constraints.

Our vision is for the Division to continuously improve its capacity for information management, with specific emphasis on ensuring that:

- Division managers will establish and apply quality control procedures to ensure the information they produce meets the demonstrated needs of all internal and external stakeholders and is timely, relevant, accurate and convenient to use.
- All IM plans and practices are to be aligned to the lifecycle of information: creation, capture or collection, organisation, storage, access and use, and disposal (destruction or permanent retention).
- All relevant Division staff are to have practical experience of, or be aware of, the workflows and processes for handling clinical data in general practices.
- Division staff have a trusted relationship with GPs and their practice team. There is a mutual recognition of the value of clinical data to improve practice performance and, the Division is regarded as a subject expert in the collection, entry, validation and analysis of clinical data.
- All staff are aware of the definitions and principles of IM, and the Division's data is valued as a strategic asset which can be used to improve business outcomes.
- There is active support for IM initiatives from all staff and a reward/recognition structure exists for individuals and teams whose initiatives improve IM outcomes.

This IM Plan should be read with the other Division level management plans i.e.:

- Division Budget 08/09
- Funding Agreements and NPIs with the Department of Health and Ageing (DoHA)
- Division Policy and Procedures Manual.

Impact of emerging IM trends, technology and issues

Decreasing cost of broadband internet will enable some peer group support amongst GPs to be done through regular video conferencing using Voice over Internet Protocol (VoIP) facilities provided by the Division. This will help advance the business objectives of improving health outcomes and of creating a fulfilling professional environment for members.

Use of State Based Organisation purchased Clinical Audit Tool will assist practices to improve health outcomes for their patients.



Division's IM Principles, Policies and Standards

In developing the IM Plan, the Division has incorporated the IM principles, policies and standards developed using the IMMF. Specifically this year we will focus on continuous improvement using PDSA cycles for:

- Improving data quality through validation processes applied at the time data is collected;
- The use of surveys to regularly obtain feedback on our staff and GP members' levels of awareness and satisfaction of our IM services; and
- Conducting a complete information audit to assist us to define our requirements for information security, risk management and business continuity.

IM Scope of Work

The IM Scope of Work is the summary of IM outcomes that needs to be done to enable the Division's business plans to be achieved. Typically, IM outcomes are prioritised against the objectives or activities of the Division's business plan. Alternatively, the scope of work may be expressed as major projects, minor projects and business as usual activities. Refer to the IMMF Tool "Guidelines for defining IM outcomes".

No specific example is available here as it is necessary to have completed a specification of IM outcomes against the business plan's objectives, before you can define a statement for the Division's IM Scope of Work.

The IM Scope of Work should provide a sense of the range of the major IM projects or tasks to be completed against each of the Division's main business objectives, and also establish the CEO's priorities and the main effort for IM during the year. So to further embellish the template, the IM Scope of Work could be structured as:

IM Priorities for the Year Ahead

- A
- B
- C
- Main effort for IM

Business Objective 1 – " _____ "

- Major IM projects
- IM Outcomes (deliverable + standard)

Business Objective 2 – " _____ "

- Major IM projects
- IM Outcomes (deliverable + standard)

Etc....

Division Technology tools

The major IM technology tools to be used this year are:

- Divisions Information System (DIS) for Customer Relationship Management (CRM) data on member practices;
- An upgrade of the desktop system to Windows Vista for improved security;
- Introduction of internet tools for VoIP communications and web meetings; and
- Establishment of an online survey tool for both internal staff and external feedback.

Division IM Training

The Division-wide IM training activities to be delivered during the year are:

- completion of the IMMF Checklist by all staff;
- privacy and IM security training to be completed as part of staff induction; and
- staff training on General Practice's desktop practice management and clinical systems.

Grouping and resourcing of all IM outcomes for all of the Division's programs and services

This example assumes that the Division has grouped IM outcomes by program areas for accountability. Thus each of the program areas, as defined under the organisational structure within the Division, should have a separate heading. Under each heading, the CEO should specify the IM projects or outcomes that are assigned, along with the planning information each manager needs to know.



If there is a great deal of similarity in the outcomes between different programs, then it may be better to assign accountability for IM outcomes against workstreams with designated managers rather than programs.

- Division Executive and Administration
 - The IM outcomes or projects to be achieved
 - Key resources and staff allocated to each outcome
 - Budgets and other constraints
 - Timeframe, and
 - Quality Assurance and reporting requirements
- Practice support
 - As above
- Quality Use of Medicines
- Etc....
- Aged Care
- Australian Better Health Initiative (ABHI)
- Australian Primary Care Collaboratives (APCC)
- Access to Allied Psychological Services (Mental Health)

Information Planning

The Division is to implement a series of new initiatives to improve information planning processes and procedures, to optimise our ability for the reuse of information and for long-term planning.

- All information collection needs analysis documents and all data collection documents and other material is to be circulated through the executive team for review before use.
- All program managers should confirm the possible reuse of this information and specify any incremental additional information that may be of value for a different purpose.
- The IM Manager is to review all information collection plans to confirm organisation, classification and storage requirements and to validate that all reporting requirements have been considered.



SWOT Analysis of IMMF Elements and Criteria

After completing an IMMF SWOT analysis of the Division's IM capacity and its current plans, the following observations have been made:

- **Strengths**
 - Context - Culture and external awareness
 - Capabilities - nil
 - Management - Leadership, strategy, and policies
 - ILC - nil
 - Compliance and Quality – Privacy
 - User Perceptions - nil
- **Weaknesses**
 - Context – Nil
 - Capabilities – Individual competencies, tools, Integration and project management
 - Management – risk management
 - ILC – planning, maintenance and disposal
 - Compliance and Quality – business continuity
 - User Perceptions
- **Opportunities**
 - Context – Change management
 - Capabilities – nil
 - Management – roles and responsibilities, program integration
 - ILC – collection, organisation and dissemination
 - Compliance and Quality – nil
 - User Perceptions – User and GP awareness training, support and satisfaction
- **Threats**
 - Context – nil
 - Capabilities – External advisors
 - Management – nil
 - ILC – nil
 - Compliance and Quality – Security, privacy, and compliance
 - User Perceptions – User and GP awareness training, support and satisfaction



References

Library and Archives Canada - The Information Management Capacity Check Tool

Available at <http://www.collectionscanada.ca/information-management/002/007002-2003-e.html>

Treasury Board of Canada – IM Portal

Available at http://www.informationmanagement.gc.ca/index_e.asp

Government of Alberta, Canada - Information Management Topics

Available at <http://www.im.gov.ab.ca/index.cfm?page=imtopics/index.html>

SAS Institute Enterprise Data Management Maturity Model

Available at <http://whitepapers.techrepublic.com.com/whitepaper.aspx?docid=278923>

Meta Group Information Maturity Model

Available at http://mike2.openmethodology.org/index.php/Information_Maturity_Model

ISO 15489 – Records Management Parts 1 and 2

Available at <http://www.naa.gov.au/recordkeeping/rkpubs/advices/advice58.html>

Dawes, Martin & Ucheckukwu – Knowledge Management in Clinical Practice, a systematic survey of information seeking behaviour in physicians. International Journal of Medical Informatics, Vol 71 (2003), pp 9-15.

Shu-hsien Lao, Knowledge management and applications literature review from 1995 – 2002, Expert Systems with Applications, Vol 25 (2003), pp 155-164.

Kirk, Joyce (1999) "Information in organisations: directions for information management", Information Research, 4(3)

Available at <http://informationr.net/ir/4-3/paper57.html>

Tasmanian Government Project Management Methodology and Tools Resource Center

Available at http://www.egovernment.tas.gov.au/themes/project_management.

Project Smart.co.uk Resources

Available at <http://www.projects smart.co.uk/introduction-to-project-management.html>

Booz, Allen, Hamilton – Ten Guiding Principles of Change Management

Available at http://www.boozallen.de/media/file/guiding_principles.pdf

NHS National Prescribing Center in the UK – PDSA Cycles

Available at http://www.npc.co.uk/mms/FiveMinGuides/library/5m_pdsa.htm

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