MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 102-13

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

DATE: 2013 September 19

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NEW RESOURCE LENDING SYSTEM

Recommendation

It is recommended that Report No. 102-13 re New Resource Lending System be received for information.

Key Points

- MLHU's previous electronic Resource Lending System presented challenges over time that negatively impacted the effectiveness and efficiency of the resource distribution system and the entire Health Unit computer network.

- A functional needs assessment informed the development of a new and significantly improved system that enables the scheduling, organization, maintenance, distribution, and monitoring of resources to ensure staff and community partners have efficient access to resources for the effective implementation of their programs and services.

The Previous Resource Lending System

The Resource Lending System (RLS) in place at the Health Unit since about 1994 was a custom-designed electronic inventory, scheduling, sign-out and check-in system for use by staff, containing videos/DVDs, posters, displays, teaching kits, and other resources. The system was used primarily by Family Health Services, and Sexual Health and Chronic Disease and Injury Prevention teams, although each staff member had access to it through their desktop computer.   A 0.5FTE Administrative Assistant (AA) in Family Health Services (FHS) was, and still is, assigned to manage the resource room and the RLS system. Other service areas contributed to funding the service on a 'by use' basis ($10 per resource), to assist in paying for the FHS AA's time to maintain, pull and replace the resource, and manage the RLS system in general. This system was working well for the staff managing and accessing it, although over its years of use several functional deficiencies were noted, and a number of malfunctions of the system occurred that were not fully rectifiable.

In 2009, challenges intensified when MLHU migrated from a Novell to a Windows server/directory network environment, as the RLS was designed to run on the Novell system. A few computers remained in a designated area within FHS for staff to use for scheduling resources. Access to RLS through these computers was slow and inconsistent. Maintaining these computers running on Novell was negatively affecting the entire MLHU network. In 2012, a 'work-around' was identified that did address this challenge somewhat, although the solution to this did create some other quirks with the system and was not an acceptable long-term solution. It became apparent that a new Resource Lending System was needed.

Assessing Needs for a New Resource Lending System

For the new system, the goal was to create an agency-wide system of distributing, scheduling, organizing, maintaining, and monitoring Health Unit resources, with an up-to-date inventory database, that would ensure staff and community partners had efficient access to resources to support the effective implementation of their programs and services.

In order to help develop a system that would meet staff needs and the intended goal, staff conducted a survey with all program teams that had been using the existing system. The needs assessment assisted in determining what staff and managers thought about 1) what the application should be able to do (i.e., its core and secondary functions); 2) what resources the RLS would manage; 3) who the users of the system would be; and 4) how users would interact with the system. The information generated from the needs assessment was used to guide our decisions about software, and ultimately, to inform the software development process.

Once there was a clear picture of what was needed, staff investigated whether there was any appropriate off-the-shelf software that be purchased. As part of this process, staff contacted a number of health units in the province to determine how they managed their resource lending systems and what software they might be using, if any. The search for off-the-shelf software and for suitable solutions from other health units did not prove fruitful. As a result, the Health Unit put out a Request for Proposals to find a vendor that could build a resource lending system. ResIM, the developer working on the Health Unit's new website, was the successful vendor contracted to create the new Resource Lending System.

Functional Improvements of the New RLS

The new system has a number of functions that make it superior to the previous system, such as the following:
- Access anytime and anywhere, through the internet
- Easy reservation and cancellation process
- Ease of communication between system users and system administrator
- Pictures of every resource (in addition to the written description)
- RFID scanning system for tracking check-in and check-out
- Google-like search function

Conclusion/Next Steps

The Health Unit's previous Resource Lending System time presented challenges over time that negatively impacted the effectiveness and efficiency of the resource distribution system and the entire Health Unit computer network. A needs assessment was completed to inform the process of developing a new electronic Resource Lending System with ResIM. System development is completed, with minor 'tweaks' being made during implementations. Training on the new system is currently underway; as it is a user-friendly application, training needs are minimal. The initial staff training has elicited positive feedback regarding system functionality. Users will shift from using the old to the new system by the end of June. In the future, staff will look at expansion of the hardware system to 201 Queens Ave. and Strathroy Offices, as well as, further consider the distribution of equipment and pamphlet resources through the Resource Lending System.

This report was prepared by Ms. Heather Lokko, Program Manager, Reproductive Health Team and Ms. Milly Stetsyuk, Program Administrative Assistant, Reproductive Health Team.

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