

**Sent:** Monday, October 26, 2009 8:20 AM

**Subject:** UPDATE FROM THE CEO -- Electronic Health Record

Dear Colleagues:

As you know, in August, we made the decision to end the development of our UCare electronic health record system with GE. We had hoped to develop a new, state-of-the-art system with GE but after years of delays, we determined that our better course was to rapidly implement an established electronic health records system. In the interim, we will continue to use the UCare systems we already have in place.

In August, I also appointed a task force, led by interim Chief Operating Officer Ken Jones, to evaluate the options we had. The task force included a broad cross-section of leadership from UCSF Medical Center and the School of Medicine, including Dean Sam Hawgood, as well as School of Pharmacy Dean Mary Anne Koda-Kimble. This task force worked closely with our KSA consultants who have special expertise in electronic health record systems, and it consulted with numerous academic medical centers in the UC system and nationally who have recently implemented these systems.

The task force developed a detailed list of criteria for the new vendor, including having a fully integrated inpatient and outpatient system, a proven track record of success in academic medical center environments such as ours, and having extensive experience with children's hospitals, cancer hospitals and the unique billing issues of California hospitals.

After a detailed analysis of six potential vendors, we have made a decision to begin negotiations with Epic for the installation of its electronic health record system at UCSF. Epic has very high satisfaction scores from organizations that have implemented its systems, and it has a track record for getting installations done in a timely manner. Based on our extensive review, we have determined that it is uniquely suited to address the criteria we have identified as necessary for UCSF. Also, Epic is operational at Kaiser, many Sutter facilities, and at UCSD and UCD medical centers. We believe that these current relationships have significant benefits for UCSF, both for facilitating referrals of patients and enabling us to leverage the experience of our UC colleagues in implementing and maintaining the system. Ultimately, with Epic, we expect that we will be able to develop a UC-wide standard for clinical documentation and we will be able to use cross-campus data for clinical research.

Epic staff will visit UCSF for a series of demonstrations of its systems during November (dates are still to be determined). We will immediately appoint a number of implementation work teams for the project, led by

clinicians and supported by IT staff. We will ask these teams to visit other Epic sites to understand how others have implemented the system to facilitate our effort at UCSF. We hope to conclude contract negotiations with Epic in the first quarter of 2010 so that work with Epic can begin in earnest next spring. While we cannot definitively say how long the total implementation effort will take, we expect to have both the majority of the inpatient and outpatient functionality up in approximately two years.

I understand the frustration in our prior efforts over the past several years, and the concern that we are facing another two years of this work. However, because we are going with an established, proven system, we can have much greater confidence that in two years we will have the tools that our clinicians need to improve the quality and safety of the care they provide.

I will keep you apprised of our progress, and I thank you in advance for your support of this incredibly important initiative for UCSF.

Thank you for your commitment to UCSF and our patients.

Sincerely,

Mark R. Laret  
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