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Digital	Solution	s Division			Build	ing 1, Lv 10 C	anberra H	lospital, G	arran			1		Н	ealth	
gra	ted Diag	nostic Ima	ging Solution (II	DIS) Project	ACT:	2606				-:30						
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1			Data Migration Professional Se		rvices N	N	GST	14,500.00	1,450.0	600	66806	712102	21437	9999	99	
							otal (incl.		15,950.00				er's Notes			
				Arsavilli	sting Officer's Name (Printed) * Telephone Number * 92 6174 8729					Purcha	sing Ome	er s wote:	5.		- 5537	
885 Mo	untain Hig ter, 3153	hway		1 2 2 3 1 1	all Address* Dev.arsavilli@act.gov.au						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	E REF *	35882-3			Certificate by Authorised Officer											
Government Guidelines for Purchasing: If the value of this Requisition is: Under \$25,000. One written quote required; \$25,000 to under \$200,000, A minimum of three written quotes required; or Chief Executive (CE) approval where				(i) (ii) (iii) Author	certify that: under the Financial Management Act (1996), I am authorised by the Chief Executive Officer of the Department/Authority to make this commitment and approve the total value of this requisition; funds are available and expenditure is essential; and the financial coding is correct. uthorised Officer's Signature Authorised Officers Name (Printed)											
less than 3 quotes; S200,000 and above, Must Invite Pablic Tender, or Chief Executive (CE) approval where a restricted/single select tender access is undertables.					Sandra Cook rised Officer's Position Title or, Future Capability & nance Sandra Cook Position Number E01025					Purcha	se Order	No.: H				

Please Send Your Purchase Request and ALL Relevant Documentation by FAX: 62050806 or via Email To: acthealthsupply@act.gov.au

The Canberra Hospital - Data Migration Professional Services - Go-Live Support

12 July 2018



Quotation Number: 35882-3

Your Contact:

Direct Line: Mobile No:

e-mail:

com

Your reference: Our reference:

Date:

12.07.2018

Web Address:

www.siemens.com.au/healthcare

12 July 2018

The Canberra Hospital Yamba Drive GARRAN, ACT, 2605

Thank you for providing Siemens Healthcare with the opportunity to bid for your project. Siemens have been active in Australia and New Zealand for more than 135 years. Siemens is a trusted partner and with our technology based solutions, we address many of the critical issues facing Australia today.

We are confident that our offering will bring advantages in superior quality, workflow and trendsetting applications. These clinical outcomes are complemented by a maximum return on your investment.

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Section A - Executive Summary, including a brief 'at a glance' system overview with pricing.

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We trust this proposal meets and exceeds both your clinical and business requirements.

Should you require any assistance please do not hesitate to call me on

Yours sincerely Siemens Healthcare Pty Ltd

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- low life cycle costs for increased return on investment
- compact system designs to minimize space requirements.

We provide you with a powerful, affordable system that supports the clinical and financial success of its users. In addition, our service offerings and life program provide continuous support encompassing:

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- stay competitive with up-to-date systems
- education and training
- broaden your knowledge and expertise
- services and support
- · feel confident in our proactive service solutions and reliable support offerings
- information and communication
- be informed, get connected.

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- local responsiveness
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Life

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Pricing Summary

Description	Qty	Price (excl GST)	Price (Inc GST)
Professional Services – Go-Live Support	1	\$14,500.00	\$15,950.00

Section B – Detailed Configuration

Item Description

1 Professional Services - Go-Live Support

Siemens will provide remote professional services to support the Canberra RIS/PACS go-live. Siemens will support both the RIS and PACS data migration activities including the bulk and delta data migration tasks.

The professional services works are associated to the go-live support requirement are detailed

- a) STATEMENT OF WORK Integrated Diagnostic Imaging Solution Siemens RIS-PACS Solution RIS Transition-Out V1.3 dated 26th June 2018.
- b) UCPH Digital Solutions Program SoW Siemens PACS Transition Out v0.07 dated 26th June 2018



Siemens Healthcare Pty Ltd.

www.siemens.com.au/healthcare

885 Mountain Highway Bayswater Victoria 3153 Australia

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DIGITAL SOLUTIONS DIVISION

CLEARANCE FORM



TRIM Reference No.

Subject/Title	IDIS Pro	oject – Additional v	vork order fo	or Siemens RIS da	ata migration f	or go-live
Action requested	凶	FOR DIRECTOR C	LEARANCE	\boxtimes	FOR CIO CL	EARANCE
	\boxtimes	FOR SIGNATURE			FOR CLEAR	ANCE
Action officer	Name:	Darcy Row	Title:	Project Officer	Ph: 02	6174 8732
Date submitted	6/8/20	18		Due date: 15,	/8/2018	
Reason for urgency (if applicable)						
						a .
As part of the Integrated Diagno diology Information System a migration during the transition t covers these additional services.	stic Ima nd Pictu o IDIS. T	re Archiving and Co	ommunicati	on Systems (RIS-	PACS) vendor,	to assist with data
Senior Manager clearance	X	APPROVED	Name:	Dev Arsavilli		
Serior Wanager Generalice		ALTROVED	Signature:		Date:	2/8/18
By approving this document you are ap correct, grammatically correct and spel		at the document is cor	A.T	J		
Finance Manager clearance (If financial implications are more than \$20,000)		APPROVED	Name: Signature:	Liu :	Date:	
Director Clearance Delegation of up to \$100,000 including GST		APPROVED	Sandr Signature:		eter McNiven Date:	8/8/18
`enior Manager, Office of the ¿IO		APPROVED	Name: Rel	becca Heland	Date:	8/8/18
CIO clearance Delegation of up to \$250,000 including GST		APPROVED APPROVED W	ITH CHANG	GES .	PLEASE DISC	USS
	Pete	er O'Halloran		Signatu Date:	re:	
Comments				Date		
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Resubmit Details	Dat	e•				±i
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REGISTER OF PURCHASING DECISION (ROPD)

		NonSto	ck Requisition (REF No.):
the vend	current Radiology dor, to assist with over weekend and Purchases und 3. If over \$25K proceed to bot	y Information System a data migration during this work order covers der \$25K only require (3) wriften quotes mu	g Solution (IDIS) Project, there is a work order with Siemens, and Picture Archiving and Communication Systems (RIS-PACS) the transition to IDIS. This does not include support during the sthese additional services. one written quotation, once obtained please proceed to box list be obtained. If three quotes were obtained please lify justification for not obtaining required number of quotes
NOTE	E: Director General	Authorisation is required fo	or orders over \$25K (GST Incl) where less than 3 quotes have been sourced.
i.	\boxtimes	supplier has the neces	s are only available from the one supplier in Australia or only one ssary technical expertise to supply and provide satisfactory maintenance, support or warranty.
ii.		equipment or the area	I economy the requirement must be compatible with existing a has standardised on a particular item after inviting rethe original equipment.
Othe	er:		
3.	Outline quotes	obtained and justifica	ation for purchasing decision:
Sup	pplier: Siem	ens	Quote: 35882-3 (\$15,950.00 incl GST)
Sup	oplier:		Quote:
Sup	oplier:		Quote:
Co	ntract awarded	to Supplier:	
		ort of purchasing dec	cision: As Siemens is the vendor for the current RISPACS, they a migration services.
	Source of Fund		
1.	Recurrent Expe Budget	nse 2. P&E Pro	ogram 3. Donation 4. Special Purpose Funding
Oth	er:Preject -	66806 - Integrated Diagr	nostic Imaging Solution (IDIS) Project
5.	Endorsements:		e endorsed by relevant delegates (as appropriate). Refer to ACT Health for specific guidance on endorsements required:
Bio	medical Enginee	ring:	Workplace Safety:
Info	rmation Manage	ment (IT):	Sterilising Services:
Pro	perty Manageme	ent & Maintenance:	Infection Control:
Pro	duct Manager:		Other:
NO	TE: Source Funding	g and Endorsements MUST	be completed, otherwise the Purchase Request may not be processed.

6.	Purc	hasing	Approval	
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Requesting Officer:	_Dev Arsavilli	Signature:	Dol	Date:	7	1811	18
Authorising Officer:	_Sandra Cook	Signature:	Heek	Date:	8	,8,	18

NOTE: General Authorisation is required for orders over \$25K (GST Incl) where less than 3 quotes have been sourced. ACT Health Supply Services USE GNLY

__Signature: ____ Purchasing Officer: _ Date:

NOTE: This document is to be attached to the supplier quotations and a non-stock requisition before being sent to the Authorising Officer and ACT Health Supply Services

Areas	indicate	d with a	ST FOR NONSTO in Asterisk * to be this Request: Please	completed	by the l	Requesting Goods 🗌	Officer. Service		Consultancy		R)	5		G	4C	nent
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Supplier Details * Siemens Healthcare Pty Ltd (Australia)			-	tequesting Officer's Name (Printed) Telephone Number ov Arsavili 02 6174 8729					H S	Purcha	sing Offic	er's Notes	51			
885 Mo	untain Hig	hway	(Masteria)	90.500.000	ddress*	Dev.arsavil	i@act nov	1,500	174 0125		~					
Bayswater, 3153, VIC QUOTE REF * 35882-3			Linding	Certificate by Authorised Officer												
F Good for the value of the val	vernment G ue of this Re der \$25,000, ,000 to unde tes required, than 3 quoti	uidelines for quisition is: One written r \$200,000, a or Chief Exercis;	Purchasing: quole required; A minimum of three written reutive (CE) approval where	(ii) (iii) (iii) Authoris	under the I Executive C approve th funds are a the financi	Financial Manage	ment Act (19: artment/Auth is requisition enditure is ess t.	96), I am au hority to ma ; ;ential; and	thorised by the Chie ke this commitment officers Name (Pri	t and						
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Please Send Your Purchase Request and ALL Relevant Documentation by FAX: 62050806 or via Email To: acthealthsupply@act.gov.au

The Canberra Hospital - Data Migration Professional Services - Go-Live Support

12 July 2018



Quotation Number: 35882-3

Your Contact:

Direct Line: Mobile No: e-mail:

Your reference: Our reference:

Date:

12.07.2018

Web Address:

www.siemens.com.au/healthcare

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- broaden your knowledge and expertise
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Quotation Number: 35882-3

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Description Item

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Siemens Healthcare Pty Ltd.

www.siemens.com.au/healthcare

885 Mountain Highway Bayswater Victoria 3153 Australia

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From: Sent: To: Cc: Subject: Attachments:	Arsavilli, Dev Thursday, 2 August 2018 10:42 AM Cook, Sandra (Health); Sidhu, Rajpal; O'Halloran, Peter (Health) RE: Vulnerability Assessment - IDIS.pdf [DLM=For-Official-Use-Only] Vulnerabilities summary.pdf
Hi	
Please see attached a raw extract We will talk through this during the	t of vulnerabilities from SSICT Security.
Kind Regards,	
эv	
Dev Arsavilli Project Manager Phone: 02 6174 8729 Mobile Future Capability and Governance Brance 2-6 Bowes Street, Phillip ACT GPO Box 8	Email: Dev.Arsavilli@act.gov.au ch Digital Solutions Division Health Directorate ACT Government 825, Canberra ACT 2601 act.gov.au
From: O'Halloran, Peter (Health) Sent: Thursday, 2 August 2018 10 To:	
<rajpal.sidhu@act.gov.au></rajpal.sidhu@act.gov.au>	act.gov.au>; Cook, Sandra (Health) <sandra.cook@act.gov.au>; Sidhu, Rajpal ment - IDIS.pdf [DLM=For-Official-Use-Only]</sandra.cook@act.gov.au>
Hi Tab	
security assessment) available for	provider have offered to make Rajpal (the original analyst who undertook the any discussions with your team that may be required to assist in resolution of this details are in the signature block below.
Kind regards	
Peter	
Peter O'Halloran MACS Snr CP JP Chief Phone: 02 6205 1100 Email: Peter.OHal Digital Solutions Division Health Direct Level 2, 4 Bowes Street, Phillip ACT 2606 Personal Assistant - Jamie Isaacson 02 62	lloran@act.gov.au torate ACT Government GPO Box 825, Canberra ACT 2601 act.gov.au
From: Crossley, Nick	10 DA4
Sent: Wednesday, 4 July 2018 5:0 To: <	O PIVI
Cc: Arsavilli, Dev < Dev. Arsavilli@a	act.gov.au>

Subject: FW: Vulnerability Assessment - IDIS.pdf [DLM=For-Official-Use-Only]

Importance: High

HI and Nick

Please see attached results of penetration testing that has been performed. Unfortunately the result status is a fail. The Vulnerabilities listed as CRITICAL (purple) <u>must</u> be resolved before moving into production.

Can you please commence remediation into this ASAP? Changes will need to be implement across all environments, not sure of the top of my head if this impacts any testing we have done?

Regards

Nick Crossley

Project Manager MAIPM, CPPM | Shared Services ICT Health

Phone: +61 2 6207 8919 | Mob

Shared Services | Chief Minister, Treasury and Economic Development Directorate | ACT Government Building 1, Lv 10 Canberra Hospital, Garran ACT | PO Box 11, WODEN ACT 2606 | www.act.gov.au

From: Sidhu, Rajpal

Sent: Wednesday, 4 July 2018 4:35 PM

To: Crossley, Nick < Nick. Crossley@act.gov.au>

Cc: Carriage, Nathan < Nathan.Carriage@act.gov.au>; Flynn, Ian < Ian.Flynn@act.gov.au>

Subject: Vulnerability Assessment - IDIS.pdf [DLM=For-Official-Use-Only]

Good afternoon,

Please see attachments for the vulnerability assessment of IDIS. If you have any questions please contact me.

Regards,

Rajpal Sidhu | ICT Security Analyst | ICT Security Team

Phone: +61 2 6207 9688 | Fax: +61 2 6207 6144

Shared Services | Chief Minister, Treasury and Economic Development Directorate | ACT Government

Callam Offices C2, Easty Street, Philip ACT | GPO Box 158 Canberra ACT 2601 | act.gov.au

From:

Sent:

To: O'Halloran, Peter (Health) Cook, Sandra (Health); Duggan, Mark (Health) Cc: Subject: IDIS Exec Management Meeting dot points - 31/07/2018 4:00pm [SEC=UNCLASSIFIED] RE: Order IDs - Review of yesterday's messages [SEC=UNCLASSIFIED] Attachments: Hi Peter, Please see below dot points for the IDIS Exec Management Meeting today at 4:00pm. Action Items: to provide an update to this group before next meeting on Agfa's plan on fixing the critical 1. and and high security vulnerable (pen testing) issues. 2. Dev A to discuss with Sandra and identify any option that can be identified to start data migration in to preprod while Agfa resolves the issues. a. We have arranged a meeting with ICT Security and the Change Managers from SSICT and DSD to meet with Sandra on Wednesday 1 August at 16:00 hours. Failed Security Assessment of Agfa Infrastructure: Yesterday during a schedule review meeting with (Agfa PM)
 joined and gave me some information on the Security Vulnerability Issues and Remediation: is still chasing Agfa Global to give him a plan and dates on the code fixes for the top two security issues All the tickets have been logged and being investigated As of yesterday thinks that no resolution may be found by the go-live date and mentioned that these issues may be considered as improvements for next release for which he does not have a date yet. Agfa are planning to propose a workaround to lock the environment from the internet except for a VPN access via ACTGOV network for Agfa Global to support the environment.

Arsavilli, Dev

Tuesday, 31 July 2018 12:52 PM

Agfa Project Management and Resource Management:

connection.

images and results).

I spent around three hours this week helping
 get up to speed with the project and Agfa activities.

Engage Suite would need public internet access.

engage with external clients post go live.

 He is building a new schedule (not using and pre-requisites and resourcing.

I asked them about the antivirus updates and they said that they can manage via the VPN

also mentioned that this will cause an issue for Engage Suite (the GP portal for

The project scope is to configure and setup the Engage suite ready for business to

- So far has picked up very well and my confidence levels are much better than before we all yet to see.
- I have another hour to this week to go through schedule with and also have meetings set to do twice a week catch-up and progress discussions leading up to go-live.

eOrders work on Critical Path:

- Agfa have proposed that they would commit to IDIS project three days this week (Monday to Wednesday).
- We did not receive any updates yesterday.

- Last week we sent them 11 items (attached) that they need to answer this week (we need a commitment date from Agfa on completing this work).
- MKM on the other hand are waiting for Agfa to complete the eOrders configuration.
 - o They can't to do anything at this stage until Agfa configuration completion, which is now delayed.
 - They need five more days to complete and planning to do vendor testing next week.
 - Sarah from MKM is planning to come and sit with our testers to do this testing next week in the hope that Agfa configuration/development will be completed this week.

On-demand Image migration instructions for testing:

- Did not receive any document on this yet
- I reminded yesterday (have been seeking this for approx. 4 weeks)
 - He has the document with him I believe but he has some questions and waiting for answers from the relevant Agfa resources still.

Via and Vitria Integration:

- In the last meeting suggested that the resource will commence work on 14 August (Agfa received PO on 28 June)
- No further updates at this stage

BI Module for Testing:

- · We need more clarity on this
 - In the last meeting suggested that the BI module is ready and just needs a copy from its current environment to IDIS TEST
 - But was suggesting mid-August planned work
- According to schedule we are planning to start SIT (System Integration Testing) 3 September
- As BI is not integration it can be tested in parallel to SIT but we need BI module fully tested and signed off before UAT which is scheduled to start on 17 September.

Other interface delays:

- No progress on Healthlink and faxing as yet.
- Testing team is ready to test these interfaces.

Kind Regards,

Dev

Dev Arsavilli | Project Manager
Phone: 02 6174 8729 | Mobile | Email: Dev.Arsavilli@act.gov.au
Future Capability and Governance Branch | Digital Solutions Division | Health Directorate | ACT Government
2-6 Bowes Street, Phillip ACT | GPO Box 825, Canberra ACT 2601 | act.gov.au

From:

(Health)

Sent:

Tuesday, 24 July 2018 11:35 AM

To:

Barrett, Scott (Health); (Health)

Cc:

Subject:

RE: RIS Data Migration Activities [SEC=UNCLASSIFIED]

Hi Scott,

Attachments are currently being extracted for RIS data migration and Siemens had advised work being done on the following servers SIESDM2 and RIS-APP-1.

The extraction has been on for a couple of weeks now (work started on the 5th of July). I am not sure if the increased activities are a result of the same.

Regards,

| IDIS Data Migration Analyst - UCPH Digital Solutions Program

From: Barrett, Scott (Health)

Sent: Tuesday, 24 July 2018 11:26 AM

To: (Health) <

(Health) < act.gov.au>

Alam, Azwer (Health)

Alam, Azwer (Health); DSD Diagnostic Imaging Systems (Health)

<Azwer.Alam@act.gov.au>; DSD Diagnostic Imaging Systems (Health) <DSD.DIS@act.gov.au>

Subject: RIS Data Migration Activities

Hi All,

Are there any RIS data migration activities currently occurring/have occurred in the last few days?

We are noticing an unexpected CPU increase on the SLR DB and I was just wondering if data migration may be the rause.

We're about to raise this with Siemens support but it would be helpful if we can provide any associated information to them when we raise the job.

Thanks

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government

Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au



Integrated Diagnostic Imaging Solution (IDIS)

Data Migration Plan

DOCUMENT CONTROL

Version	Version	Created By	Description
00.01	1/5/2018		Initial draft plan
00.02	24/7/2018		Updates after Test Cycle 5 and go-live planning

RELATED DOCUMENTS

Version	Name	Endorsed By	
V4.0	[AUS - ACT] Data Migration Strategy	Agfa	
V00.08	IDIS Siemens RIS-PACS Data Migration Specification		72
V0.4	RIS PACS Data Extraction Specifications		
V1.4	RIS_Data_Migration_CSV_Layout	Agfa	
V1.2	DICOM Data Migration CSV Layout	Agfa	
V1.0	Data Migration Summary		

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	3.1.	Discovery and Analysis	
	3.2.	Siemens Engagement	
	3.3.	Extraction	
	3.4.	Transformation	5
	3.5.	Agfa Load	6
	3.6.	Testing	6
	3.7.	Production Migration	6
1	Sun	aman/	5

Purpose

The purpose of this document is to provide a high level plan for the migration of all relevant data from the current Siemens RIS and PACS to the replacement Enterprise Imaging System (AHEI), to be known as the Integrated Diagnostic Imaging System (IDIS).

Background

In a project of the size and importance of the IDIS project, successful Data Migration from the incumbent system is a major component of a successful outcome. It also requires a significant commitment of resources from all involved parties to ensure success. To that end, ACT Health required early delivery of the Agfa Data Migration approach and also engaged an experienced data analyst resource very early in the project.

Agfa presented a Data Migration Strategy that was accepted by ACT Health (see related document '[AUS - ACT] Data Migration Strategy'). This plan was prepared based on that strategy and covers every phase of the Data Migration process, as follows:

- Discovery and Analysis of Siemens RIS and PACS.
- Engagement with Siemens to assist with migration activities.
- Design and development of:
 - Extraction routines from Siemens databases
 - Transformations of data from Siemens to Agfa formats where required.
- Preparation of Data Migration Specification (see related document 'IDIS Siemens RIS-PACS Data Migration Specification').
- Delivery of data to Agfa in accordance with Agfa file specifications (see related documents 'RIS_Data_Migration_CSV_Layout' and 'DICOM Data Migration CSV Layout'.
- Rigorous testing of the end-to-end migration process

This document defines the approach that has been developed to ensure that all the above phases are successfully completed.

3. Approach

3.1. Discovery and Analysis

This phase is intended to allow a full analysis of the existing information system, to determine the quality of the data and any actions required to mitigate/remediate poor data. It

will also help identify the clinically relevant data that must be migrated. The findings from this analysis phase will be fully documented.

3.2. Siemens Engagement

Siemens will be engaged to assist with:

- Initial data analysis. This will include the provision of regular backups of the Production RIS and PACS databases to allow the Data Migration Analyst to fully understand the current data structures and content.
- Development of the Data Migration Specification, specifically the mapping of Siemens database fields to the relevant fields in the Agfa Data Migration files.
- Provision of sample extracts for testing Data Migration.
- Provision of the final Production data extracts.
- Support during system cutover.

3.3. Extraction

The ACT Health Data Analyst will work with both Siemens and Agfa to specify the set of data that will be extracted from the Siemens system in the correct format for loading into IDIS. For each round of testing, Siemens will provide a sample set of data to ACT Health extracted according to the known requirements, in the format specified by ACT Health.

After each round of testing, ACT Health will provide feedback to Siemens, who will adjust their extraction routines as necessary and provide an amended extract. This process will continue until the test migration into IDIS passes all test cases.

For Production migration, Siemens will:

- Provide an initial extract of all Production data, according to the finalised Data Migration Specification, to a specified date and time.
- Provide backups of the RIS and PACS databases as at the time of the extract.
- At an agreed time shortly before scheduled Production go-live, provide a Delta extract and backups. This is designed to minimise the set of data that must be migrated at go-live.
- At go-live, deliver a final delta extract and associated backups. These backups will be retained by ACT Health and used to provide an archive for historical reporting and query purposes.

3.4. Transformation

There will be a number of actions required to transform the Siemens data into the format required for successful loading into IDIS. These include:

- Verifying that the provided extracts are in the correct format for migration.
- Verifying patients with PMI. PMI will return a set of valid patient mrn's that will be
 used to produce a verified set of RIS patient data. PMI will also provide a full extract
 of active patients for seeding the IDIS patient database as part of the initial
 Production load.
- Converting various codes (e.g. marital status, gender, etc.) from the values used in the Siemens system to those used in IDIS.
- Verifying that all data relationships are valid, i.e. that orders, procedures and results are consistent within all the provided data.
- Producing audits of all manipulation performed on the extracts

3.5. Agfa Load

For each round of testing and the Production migration process, the transformed data will be provided to Agfa in a format that meets Agfa Data Migration specifications. This includes:

- Provision of the set of RIS data files, covering patients, procedures and reports.
 Additional information that could not be migrated at a data item level will be provided as attachments in an additional set of files.
- Provision of the set of PACS metadata files, covering Studies, Series and image references.

Agfa will use its Data Migration utilities to load the data into the relevant (Test or Production) system.

3.6. Testing

There will be a number of test cycles performed before the full set of Production data is loaded. These cycles will follow, as far as possible, the same process that will be used for Production. Only the initial full load of patient data from PMI will not be performed during the Test phase. Testing will verify not only that the data has been loaded and correctly linked with associated images, but also that it is correctly displayed within the target IDIS system.

3.7. Production Migration

Migration into the Production environment will start well before the full system go-live date. This is necessary to ensure that sufficient recent images have been moved from the Siemens image store to IDIS. There are approximately 330 million images in the existing system, covering almost ten years of digital imaging, and the intention is to ensure that a minimum of the most recent two years' images will be available prior to system go-live. To do this an initial load of all RIS and PACS data is necessary. The initial load also depends upon other factors, including:

Formal accreditation of the Production infrastructure by ACT Health.

- Formal acceptance of the IDIS system configuration as built, and subsequent migration to the Production environment, including the initialisation of all underlying base data (providers, procedures codes, etc.).
- All ACTPAS and EDIS demographic interfaces fully developed, tested and migrated to ACT Health Production.

Once the above prerequisites have been completed, the approach will be:

- Finalise the schedule for:
 - Initial Production extract from Siemens
 - o Pre-production delta extract
 - Final delta extract to coincide with go-live.
- Request Siemens to begin full Production data extracts, and provide RIS and PACS backups as at that time. The ACTPAS/EDIS – IDIS ADT message interfaces should be initialised at this time, and messages queued until the patient load is complete.
- Receive extract of all current active patients from PMI. Verify format and provide to Agfa to begin patient load. Once load complete (expected to take 3 – 4 days), perform spot verification checks and patient count audits.
- Receive Siemens deliverables:
 - Restore RIS and PACS backups to for Data Analyst use.
 - Send patient extract to PMI for verification and remediation.
 - Begin data transformation process.
 - Finalise remaining transformations and audit checks on receipt of remediated patient extract and associated documentation from PMI.
- Send all Data Migration files to Agfa.
- Agfa initiates RIS Migration. It is planned that this load will be done in time-bounded tranches, starting with all data for the most recent two years. This will allow DICOM image migration to begin earlier, given that the total expected time to load all RIS data will be between 20 25 days, but less than three for an initial two-year tranche. On completion, validate the loaded data and audit. Estimates for Production migration timeframes, based on the performance during the various test cycles, are included in the related document 'Data Migration Summary'.
- Agfa initiates DICOM image migration. Based on the most recent test cycle, image
 migration is expected to continue for 13 15 weeks, including across the go-live
 date, with the intent being to have at least the most recent two years' images loaded
 prior to go-live. Current estimates indicate that these will take approximately four
 weeks to load.

The delta migration will follow the same process as above, apart from the patient load. That will be a once-off operation at the commencement of migration, then kept in sync with ACTPAS through the active ADT message interface in pre-Prod. The final delta, at go-live, will be a similar, but much shorter, process as well.

4. Summary

This document should be read in conjunction with the listed related documentation. It provides the high-level approach to Data Migration, and all technical aspects have been included in the relevant specifications. In addition, there is no schedule provided here; the actions listed in this plan will be dependent on the final project schedule leading up to golive.

Heland, Rebecca (Health

From:

Sent:

Tuesday, 24 July 2018 11:45 AM

To:

Barrett, Scott (Health); (Health); (Health); (Health)

Cc:

Alam, Azwer (Health); DSD Diagnostic Imaging Systems (Health); (H

Hello Scott,

Yes that is correct, we are in the process of generating a high volume of documents as part of the migration project. SIESDM2 was being used as the original share to dump these documents but we are now using the new share location provided to us by ACT Health.

Kind Regards,



Siemens Healthcare Pty Ltd

160 Herring Road Macquarie Park NSW 2113

Tel: +61 (0) 2 9491 5009 Mobile: Email:

Internet: www.healthcare.siemens.com.au



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From: (Health) [mailto	act.gov.au]
Sent: Tue, 24 July 2018 11:35 AM	
To: Barrett, Scott (Health);	
2 	Alam, Azwer (Health); DSD Diagnostic Imaging Systems (Health)
Subject: RE: RIS Data Migration Activities [SEC	=UNCLASSIFIED1

Hi Scott,

Attachments are currently being extracted for RIS data migration and Siemens had advised work being done on the following servers SIESDM2 and RIS-APP-1.

The extraction has been on for a couple of weeks now (work started on the 5th of July). I am not sure if the increased activities are a result of the same.

Regards,

IDIS Data Migration Analyst - UCPH Digital Solutions Program Email: E
From: Barrett, Scott (Health) Sent: Tuesday, 24 July 2018 11:26 AM
To: (Health) <
Cc: Alam, Azwer (Health)
<azwer.alam@act.gov.au>; DSD Diagnostic Imaging Systems (Health) <dsd.dis@act.gov.au> Subject: RIS Data Migration Activities</dsd.dis@act.gov.au></azwer.alam@act.gov.au>
Hi All,
Are there any RIS data migration activities currently occurring/have occurred in the last few days?
We are noticing an unexpected CPU increase on the SLR DB and I was just wondering if data migration may be the cause.
We're about to raise this with Siemens support but it would be helpful if we can provide any associated information to them when we raise the job.
Thanks
Scott
Scott Barrett Manager Direct Phone: 02 6174 8039 Direct Email: scott.barrett@act.gov.au Diagnostic Imaging Systems Diagnostic & Medication Systems Hub Phone: 02 6174 8750 Email: DSD.DIS@act.gov.au Technology Operations Branch Digital Solutions Division Health Directorate ACT Government Level 10, Building 1, Canberra Hospital, Garran ACT GPO Box 825, Canberra City ACT 2601 act.gov.au
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From: (Health) Tuesday, 24 July 2018 10:09 AM Sent: (Health) To: Subject: RE: Emailing: IDIS Data Migration Plan v0.02.docx [SEC=UNCLASSIFIED] Attachments: IDIS Data Migration Plan v0.02 (002).docx The document looks fine, I have just added a few comments. Regards, | IDIS Data Migration Analyst - UCPH Digital Solutions Program Mobile : act.gov.au ----Original Message----(Health) From: Sent: Tuesday, 24 July 2018 9:36 AM (Health) < act.gov.au> Subject: Emailing: IDIS Data Migration Plan v0.02.docx [SEC=UNCLASSIFIED] Your message is ready to be sent with the following file or link attachments: IDIS Data Migration Plan v0.02.docx

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.

From:

Griffiths, Jessica (Health)

Sent:

Tuesday, 17 July 2018 12:17 PM

To:

(Health);

Divvela, Venkat (Health)

Cc:

Arsavilli, Dev

Subject:

Data Migration Defects

Attachments:

data migration Defects 160718.xlsx; Details for Defect # 5040; Details for Defect # 5053; Details for Defect # 5046; Details for Defect # 5030; Details for Defect # 5043;

Details for Defect # 5028; Details for Defect # 5023

Hi All,

Please see attached a list of all the opened data migration defects. I have been through them all and added comments and re-assigned some back to Venkat to be closed.

Plant there are 7 defects that I have highlighted red that I need your feedback back on, 3 of them are attachments that are viewable in EI but not scheduling for example pregnancy, finclass etc.

Thanks, Jess

Jess Griffiths | RIS Admin Project Officer – Integrated Diagnostic Imaging Solution Project

Phone: (02) 61748730 | Email: Jessica.Griffiths@act.gov.au

Future Capability & Governance | Digital Solutions Division | Health Directorate | ACT Government

Canberra Hospital, Garran ACT | PO Box 11, Woden ACT 2606 | act.gov.au

From:

Barrett, Scott (Health)

Sent:

Tuesday, 17 July 2018 11:03 AM

To:

Duggan, Mark (Health); Griffiths, Jessica (Health); Arsavilli, Dev; Lawrence, Natasha (Health); Hamilton, Stephen (Health); Wilson, Sam (Health); Bush, Leigh (Health); Saunder, Kate (Health); Health); Goodridge, Angela (Health); Hoolihan, Ashley (Health); Krause, Amy (Health); Menzies, Aimee (Health); Row, Darcy (Health); Cook, Sandra (Health); Health); Crossley, Nick; Green,

James (Health); Bevan, Ross (Health); Devries, Melissa (Health)

Subject:

Ordered Studies

Attachments:

Ord to Pt Called for as of 03072018 0924am.xlsx; Open Orders.xlsx

Hi All,

As discussed in today's meeting, please see the attached spreadsheets for details of ordered studies in Siemens

Spreadsheet 1 'Ord to Pt Called for as of 03072018 0924am' shows all orders, by modality, that are at either Ordered, Scheduled or Pt Called for status from 2014 onwards.

Spreadsheet 2 'Open Orders' shows all orders as above but not with the modality counts but with all the extra ordering information and clinical history.

Please feel free send me any questions you might have.

Thanks

Scott

Scott Barrett | Manager

Direct Phone: 02 6174 8039 | Direct Email: scott.barrett@act.gov.au

Diagnostic Imaging Systems | Diagnostic & Medication Systems Hub | Phone: 02 6174 8750 | Email: DSD.DIS@act.gov.au

Technology Operations Branch | Digital Solutions Division | Health Directorate | ACT Government Level 10, Building 1, Canberra Hospital, Garran ACT | GPO Box 825, Canberra City ACT 2601 | act.gov.au



REGISTER OF PURCHASING DECISION (ROPD)

NonStock Requisition (REF No.):

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	of what is to be purc		doot them is a sec.	romant to have
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ii. equi	reasons of overall ecor pment or the area has ers/quotations for the o	standardised of	n a particular item af	
Other:				
3. Outline quotes obtai	ned and justification	for purchasing	g decision:	
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Comments in support of	f purchasing decision	n: These two Oa	akton resources have	been on the IDIS projec
since inception and hold a	great deal of project-s	specific knowle	dge. Selected upon	- SS-ICT pomoly
4. Source of Funding:			arose from	AFT.
Recurrent Expense Budget	2. P&E Progran	n 3. Doi	nation 4. Spec	ial Purpose Funding
Other: Project - 66806	5 – Integrated Diagnostic	Imaging Solutio	n (IDIS) Project	
5. Endorsements: Purch	ase Requests must be endo			Refer to ACT Health
Biomedical Engineering:_		Workplace Safe	ty:	
Information Management	(IT):	Sterilising	g Services:	
Property Management & N	vlaintenance:	Infection	n Control:	
Product Manager:		Other:		
NOTE: Source Funding and E	Endorsements MUST be co	ompleted, otherwis	se the Purchase Reques	t may not be processed.
6. Purchasing Approva	d:			
equesting Officer:Dev A	Arsavilli	Signature:Ţ	2	Date: 13 / 7/18
Requesting Officer:Dev Authorising Officer:Peter	O'Halloran	Signature: 🎉		Date: 17,7, 2018
NOTE: General Authorisation	on is required for orders or	ver \$25K (GST Incl) where less than 3 quo	
		Ith Supply Service		
Purchasing Officer:		Signature:		Date:/_/

NOTE: This document is to be attached to the supplier quotations and a non-stock requisition before being sent to the Authorising Officer and ACT Health Supply Services

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DIGITAL SOLUTIONS DIVISION

CLEARANCE FORM



TRIM Reference No.

Subject/Title	e		al of Schedule 5 fr				ata Migration a	and
Action requ	ested		FOR DIRECTOR (CLEARANCE	_	FOR	CIO CLEARAN CLEARANCE	CE
Action office	er	Name:	Dev Arsavilli	Title:	IDIS Project Manager	Ph	i: 61748729	
Date submit	ted	13/07/1	.8		Due date:	20/07/18		
Reason for u	irgency (if applica	able)				34		
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Director Clea	arance	P	APPROVED	Sand	ra Cook	Peter McI	Niven	7
Delegation of up	to \$100,000 includir	ng GST	Section Common Control	Signature		1 12	Date: (6/	7/18
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CIO clearance Delegation of up to \$250,000 including GST RECEIVED By Louise Kael at 8:39 am, Jul 17, 2018 Comments	APPROVE APPROVE Peter O'Halloran	ED WITH CHANG	SES Signa	PLEASE DISCUSS RESUBMIT sture: 1734	2018-
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Consult IT Panel

SCHEDULE 5 - Work Order

WORK ORDER FOR Integration & Data Migration Analysis IDIS Project NOTE: This Work Order is issued by the Territory in accordance with the terms and conditions of the ICT Consulting and related Business Services Agreement Ref C2009.234 which the Territory and the Contractor entered into on 24 November 2009 and any additional terms and conditions specified in this Work Order. 13 July 2018 SC130718-01 ID of Work Order: 2 Oakton Services Pty Ltd 3 Contractor Name: and 4 Specified Personnel Name: **Duty Statement:** Specified Services: ACT Health is seeking a service of multiple skill sets to (Scope of Work, designated role and specific undertake a work package related to data migration, tasks to be performed) integration, and technical solution architecture. The work package is required for the RIS-PACs replacement project to provide resources that can provide guidance over the delivery of data migration and integration points. Oakton resources have provided services in the analysis space on this already and continuation of these resources to guide the delivery of these elements of the project are required. Technical Analysis Services: (details of the relevant Services to Data Analysis be delivered) Integration Analysis Architecture & Solutions Design N/A Limitation of Contractor's Liability for this Work Order: (if applicable) Contract duration - July 2018 to October 2018 8 Additional Terms and Conditions applicable to this Work Order: **Applicable Third Party Warranties:** N/A 10 N/A Warranty Period: 11 Remote Vendor Access Policy: (if applicable) N/A 12 **Delivery Location:** Level 10 Building 1, The Canberra Hospital Up to a value of \$243,200 (exclusive of GST) 13 **Total Cost:** Specified Personnel resourcing: 14 Breakdown costs associated with total cost: Name Daily rate Total cost Days required (ex GST) (ex GST)

		76
		76
15	Additional Service Levels: (if applicable)	N/A
16	Other Requirements: (if applicable)	N/A
	SME – A regional SME is defined as a small to medium enterprise with up to 200 FTE employees based within the South East Region of Councils (SEROC)	
	The ACT Government Regional SME Policy as follows: To support regional SME's the Territory will weight regional SME's or respondents who subcontract to regional SME's through an evaluation criterion. A regional SME is defined as a small to medium enterprise with up to 200 Full Time Employees (FTE) based within the SEROC.	
	The RFQ asked respondents to confirm whether they are a regional SME or, alternatively, if not a regional SME, whether or not the respondent intends to subcontract a component of the contract to a regional SME in the event they are selected as the preferred supplier.	
	It is anticipated that no subcontracting will be necessary to meet the requirements of the RFQ.	
	When the responses to the RFQ were evaluated, the following applied: A 5% weighting if the respondent is a regional SME.	
17	Work Order Term:	From 16/07/2018 To 31/10/2018
18	Deliverables by Specified Personnel:	Technical Integration Analysis 1. Interface analysis (approx. 38 systems) 2. Guidance of the delivery of the integration required
		Data Migration Develop data specification current state in preparation for data migration Guidance and oversight over the data migration processes
19	Directorate Contact:	Sandra Cook Sandra.cook@act.gov.au 02 6205 1451

20	Approvals for insurance (and communications) costs: (as applicable)	Not Used
	Approved by Financial Delegate: Signature: P. D. Name: PETER O'HALLORAM, C10 Date: 17 JULY 2018	Approved by Contractor: Signature:
	Approved by SS ICT – Contracts and Licensing Manager: Signature:	

Contractor <u>must not</u> commence the provision of these Services until both the Financial Delegate <u>AND</u> SS ICT- Contracts and Licensing Manager has signed a copy of this Schedule 5, and has been provided to the Contractor.

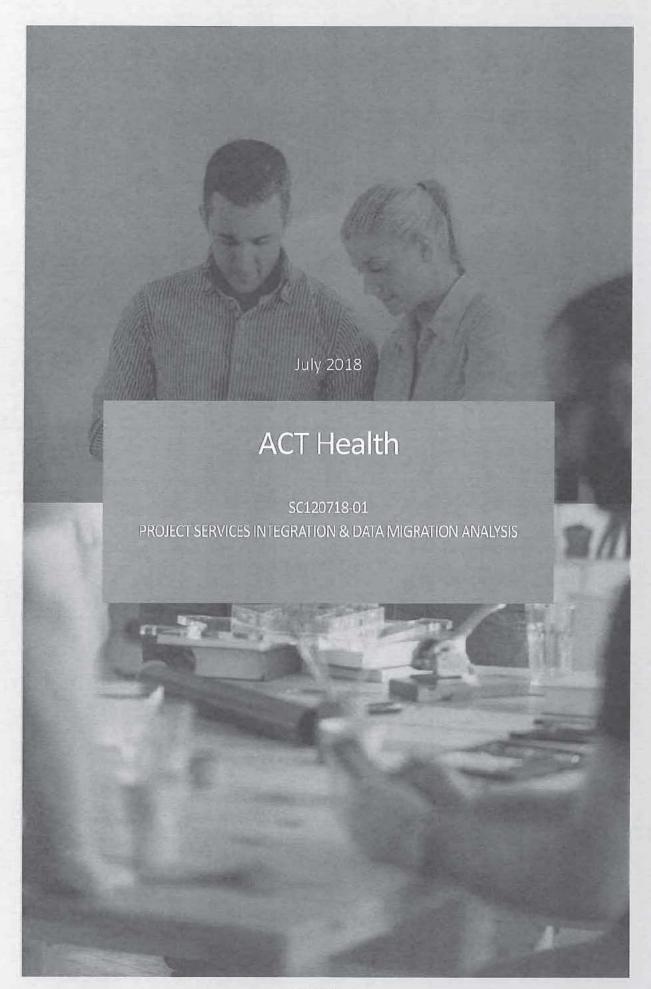


Consult IT Panel

SCHEDULE 4 - REQUEST FOR QUOTATION (RFQ) PRESCRIBED FORM

NO	TE: This Request for Quotation is requested of the	FOR Integration & Data Migration Analysis he Contractor by the Territory in accordance with the terms and			
		Business Services Agreement Ref C2009.234 which the Territory			
	and the Contractor entered into on 24 Nove this Request for Quote.	mber 2009 and any additional terms and conditions specified in			
Mai	me of Contractor:	Oakton Services Pty Ltd			
-	No:	SC120718-01			
	e of Issue:	12 July 2018			
-	sing Date for lodgement of response by	COB 13 July 2018			
	tractor:				
Cor	tact details of manager/project manager of	Sandra Cook			
this	RFQ:	sandra.cook@act.gov.au			
		02 6205 1451			
1	Date of Submission:	To be inserted by Contractor			
2	Specified Personnel Name:	and			
3	Specified Services:	Duty Statement:			
	(Scope of Work, designated role and specific	ACT Health is seeking a service of multiple skill sets to			
	tasks to be performed)	undertake a work package related to data migration,			
		integration, and technical solution architecture.			
		The work package is required for the RIS-PACs replacement			
		project to provide resources that can provide guidance over			
		the delivery of data migration and integration points. Oakton			
		resources have provided services in the analysis space on this			
		already and continuation of these resources to guide the			
		delivery of these elements of the project are required.			
4	Services: (details of the relevant Services to	Technical Analysis			
	be delivered)	Data Analysis			
		Integration Analysis			
		Architecture & Solutions Design			
5	Limitation of Contractor's Liability:	N/A			
6	Additional Terms and Conditions applicable to this RFQ:	N/A			
7	Applicable Third Party Warranties:	N/A			
8	Warranty Period:	N/A			
9	Remote Vendor Access Policy: (if applicable)	N/A			
10	Delivery Location:	Required on site at ACT Health Canberra Hospital Woden			
		campus and other locations within ACT offices as required.			
11	Total Cost:	Contractor to provide			
12	Breakdown costs associated with total cost:	Hourly rate / daily rate (ex GST):			

Additional Service Levels: (if applicable)	N/A	
Other Requirements: (if applicable)	N/A	
Expected Work Order Term:	July 2018 – October 2018	
Deliverables by Specified Personnel:	Technical Integration Analysis 1. Interface analysis (approx. 38 systems) 2. Guidance of the delivery of the integration required	
	Data Migration 1. Develop data specification current state in preparation for data migration 2. Guidance and oversight over the data migration processes	
Directorate Contact:	Sandra Cook sandra.cook@act.gov.au 02 6205 1451	
Approvals for insurance (and communications) costs: (as applicable)	Not Used	
Approved by Requesting Officer:	Approved by Contractor:	
Name: Peter O'Halloran Date:12 December 2016	Name:	
	Other Requirements: (if applicable) Expected Work Order Term: Deliverables by Specified Personnel: Directorate Contact: Approvals for insurance (and communications) costs: (as applicable) Approved by Requesting Officer: Name: Peter O'Halloran	



oakton

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SERVICES

ACT Health is seeking a service of multiple skill sets to undertake a work package related to specialist project services for data migration, integration, and technical solution architecture.

The work package is required for the RIS-PACs replacement project to provide resources that can provide guidance over the delivery of data migration and integration points.

Oakton resources have provided services in the analysis space on this already and continuation of these resources to guide the delivery of these elements of the project are required.

SPECIFIED PERSONNEL



PRICING

Pricing has been calculated on a Time and Materials basis using the maximum possible billing days for a period up to 31 October.

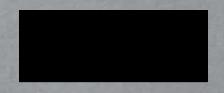
Resource	Daily rate ex GST	Duration ¹	Estimated Total ex GST

ASSUMPTIONS



¹ https://www.timeanddate.com/date/workdays.html?d1=16&m1=7&y1=2018&d2=31&m2=10&y2=2018&

CONTACT



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CANBERRA UNIT 2 45 WENTWORTH AVENUE KINGSTON ACT 2604 AUSTRALIA T +61 2 6230 1997 F +61 2 6230 1919

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PERTH LEVEL 2, 160 ST GEORGES TERRACE PERTH WA 6000 AUSTRALIA T ++51 8 9222 8300

HYDERABAD KRISHE-E 8-2-293 PLOT 499 ROAD 36 JUBILEE HILLS 500033 HYDERABAD INDIA T +91 40 23552694 VOIP: +61 3 9617 0294

Heland, Rebecca (Health)	
From: Sent: To: Cc: Subject:	Friday, 13 July 2018 3:30 PM (Health) [AUS - ACT] DICOM Header update [SEC=UNCLASSIFIED]
Hi	
See below in red	
Kind Regards,	
Holiday alert:	July 27 th – August 15 th
NV, http://www.agfahealthcare.com http://blog.aqfahealthcare.com	
IBAN Customer Account BE2037510459	Belgium RLE Antwerp VAT BE 0403.003.524 IBAN Operational Account BE81363012356224 92856 ING Belgium NV, B-1000 Brussels er: http://www.aqfahealthcare.com/maildisclaimer
From: (Health) Sent: Friday 13 July 2018 7:20 To: Cc: Subject: RE: [AUS - ACT] DICOM F	[mailto act.gov.au] [mailto act.gov.au] [mailto act.gov.au] [mailto act.gov.au]
Thanks	
ineader update? [KEV] No, we only 'know' this is to these studies will fail the AMT vols there a way to check if the action merged through a live ADT messative. [KEV] No, we don't have tools the state of the state	
As long as these studies are raise	ios work as expected, Scenario 4 should be a rare occurrence. d as exceptions and there is a manual way of matching the orders to the studies occed, with this identified as a known migration issue.
Thanks,	
IDIS Data Migration Email:	Analyst - UCPH Digital Solutions Program
	Sent: To: Cc: Subject: Hi See below in red Kind Regards, NV, http://www.agfahealthcare.com http://blog.agfahealthcare.com R.O.: Septestraat 27, B-2640 Mortsel, IBAN Customer Account BE203751045' Click on link to read important disclaim From: (Health) Sent: Friday 13 July 2018 7:20 To: Cc: Subject: RE: [AUS - ACT] DICOM H Thanks For scenario 4, when the study is reader update? [KEV] No, we only 'know' this is: These studies will fail the AMT v Is there a way to check if the actimerged through a live ADT messative in the could EI be used to identify PID1 [KEV] Not that I'm aware of I am happy that the first 3 scenar As long as these studies are raise post migration, I am happy to protect the could EI be used to identify PID1 [KEV] Not that I'm aware of I am happy that the first 3 scenar As long as these studies are raise post migration, I am happy to protect the could EI be used to identify PID1 [KEV] Not that I'm aware of I am happy that the first 3 scenar As long as these studies are raise post migration, I am happy to protect the could EI be used to identify PID1 [KEV] Not that I'm aware of I am happy that the first 3 scenar As long as these studies are raise post migration, I am happy to protect the could EI be used to identify PID1 [KEV] Not that I'm aware of

From: [mailto]
Sent: Friday, 13 July 2018 2:57 PM

	303
To: act.gov.au> Cc: (Health) < act.gov.au> Subject: [AUS - ACT] DICOM Header update [SEC=UNCLASSIFIED]	_
Hi	
I have added my comments below in red.	
Kind Regards,	
→ Holiday alert: July 27 th - August 15 th	
http://www.agfahealthcare.com http://blog.agfahealthcare.com	
R.O.: Septestraat 27, B-2640 Mortsel, Belgium RLE Antwerp VAT BE 0403.003.524 IBAN Operational Accoun IBAN Customer Account BE20375104592856 ING Belgium NV, B-1000 Brussels Click on link to read important disclaimer: http://www.agfahealthcare.com/maildisclaimer	t BE81363012356224
From: (Hoalth) [mailto	

 From:
 (Health) [mailto]
 act.gov.au]

 Sent:
 Friday 13 July 2018 3:46

 To:
 C:
 (Health)

Subject: RE: [AUS - ACT] DICOM Header update [SEC=UNCLASSIFIED]

Thanks

I think I understand the process at your end, but I am still unsure of the outcomes for some of the scenarios. I have put together all the different merge scenarios that I can think of and the possible outcomes. Could you please go through them and verify the same.

Scenario 1

Extract has order against PID 1, no merges through live feed, Source PACS Study Image header has PID 1 Outcome: Order and Study in EI both migrated against PID 1

[KEV] Correct, scenario without merge Outcome: Order and Study in El match

Scenario 2(tested and passed, but the test scenario does not fully replicate the scenario in production. This is because a live ADT merge message in test will not alter the Study image header in source PACS, but it will in production)

Extract has order against PID 1, PID 1 merged to PID 2 through live feed, Source PACS Study Image header has PID 2 Outcome: Order in EI migrated against PID 2

But using the information from your processing steps below, I am unsure of the outcome for the Study migration. AMT triggers C-Move for the study, order has PID 1 in AMT, but Study Image header has PID 2. This study will not be included in StudyUID_PatientID.xls, as this merge has occurred through live feed after extraction, so no visibility of the merge at the time of extraction.

The PID in the image header (PID 2) actually matches the PID in EI (PID 2), so if the above C-Move triggers successfully, study should match order and no duplicates should be created in EI

[KEV] This scenario was indeed tested and will work on EI, as long as the PID matches between order and study on EI the match is OK.

This is the default scenario for how merges show work on RIS/PACS.

Outcome: Order and Study in El match

Scenario 3

Extract has order against PID 1, no merges through live feed, Source PACS Study Image header has PID 3(Study images are on a previous merged MRN, as this is a case of unsuccessful merges in Siemens)

Outcome: Order in El migrated against PID 1

AMT triggers C-Move for the study, order has PID 1 in AMT, but Study Image header has PID 3. This study will be included in Study_UID_PatientID.xls, the image header should therefore be updated with active PID (PID 1) provided in the file.

The PID in the image header (PID 1 after header update) matches the PID in EI, so Study migrated as expected against PID 1

[KEV] Correct, study will be send over AMT for header update and will arrive on El with the correct PID. Outcome: Order and Study in El match

Scenario 4

Extract has order against PID 1, PID 1 merged to PID 2 through live feed, Source PACS Study Image header has PID 3(Study images are on a previous merged MRN, as this is a case of unsuccessful merges in Siemens)

Outcome: Order in El migrated against PID 2

Unsure of the outcome for the Study migration (this is the scenario that we have been discussing in this email chain) AMT triggers C-Move for the study, order has PID 1 in AMT, but Study Image header has PID 3. This study will be accluded in StudyUID_PatientID.xls, but the active PID specified in the file (PID 1) is not active any more as this has been merged to PID 2 through a live ADT message. The image header will therefore be updated PID 1, not PID 2. The PID in the image header (PID 1 after header update) does not match the PID in EI (PID 2), duplicate EI orders created for the same study.

[KEV] Correct, order and study don't match when the study arrives on El.

Outcome: Order and Study don't match on El

I apologise for repeating my questions regarding the same issue.

But the fact that some of the scenarios cannot even be replicated in the test environment makes it all the more essential to understand how the system would behave in each of the above scenarios.

So could you please verify the outcomes for me?

Thanks,

l IDIS Data Migi lobile : Email:	ration Analyst - UCPH Digital Solutions Progr act.gov.au	ram
from: [mailto] [mailto] [mailto] [mailto]	3 6:12 PM	
o: (Healt	h) < act.gov.au>	
Cc: Scription of the control of the	Deplae <	
ubject: [AUS - ACT] DICOM	Header update [SEC=UNCLASSIFIED]	
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see my comments below		
· · · · · · · · · · · · · · · · · · ·	FL	DICOM
· · · · · · · · · · · · · · · · · · ·	El Rationt ID 2/major)	DICOM Potiont ID 3
ee my comments below	El Patient ID 2(major) Patient ID 1(minor)	DICOM Patient ID 3 (previous minor)

The Extract has the orders and Studies against PID 1.

The Extract also provides a file (StudyUID_PatientID.xls) with studies that need a DICOM Header Update, Example – Image header for the above Study to be updated from PID 3 to PID 1

PID 1 is merged to PID 2 through a live ADT message

The orders and Studies are migrated against PID 2 in EI

[KEV] The ORDERS and STUDIES are never migrated at the same point in time.

So, here we have 2 options:

- The ORDER and STUDY has been migrated to EI > The PID merge will happen on all data in EI, so all should be good.
- Only the ORDER has been migrated to EI -> The PID merge will happen on all data in EI, so the ORDER will be 'linked' to the new PID 2 (EI will remember PID1 as old PID)

The details in EI are then used to trigger the move of the DICOM image.

[KEV] This is incorrect, the C-MOVE is triggered by AMT, the information in AMT is static and only based on the provided extracts

If the PID in EI (PID 2) is different to the PID on the DICOM header (PID 3) – Look up the StudyUID_PatientID.xls file to check if this DICOM image needs an update

[KEV] See my comment above.

The C-MOVE is triggered by AMT, only when the StudyUID has an entry in the StudyUID_PatientID.xls file, the study is send

over the AMT server, to update the PID in the header and forward the study to EI. In this example, the update was on the

live feed, so unknown to AMT.

So at this point, in the case where 'Only the ORDER has been migrated to El'.

- → We have the ORDER in EI with PID2 (still knowing the PID1 was the old PID)
- We trigger a move for the STUDY from SOURCE to EI directly and the header has PID3
- → No match = double line/order in EI

My understanding of the issue,

The StudyUID_PatientID.xls references PID 1 as the active Patient ID for the DICOM update, but PID 1 has now been merged to PID 2.

But instead of looking up for the active PID in the StudyUID_PatientID.xls, could you not look into EI for the correct Patient ID (PID 2), the patient ID in the DICOM header will then match the Patient ID in EI

Kind Regards,



→ Holiday alert: July 27th - August 15th

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		566
From: (Health) [mail Sent: Wednesday 11 July 2018 5:22 To: Cc: Subject: DICOM Header update [SEC=		
Even after our discussions from yester updates fail to happen as expected. I have listed below, my understanding		out the exact reasons why DICOM header you please verify?
Extract Patient ID 1	El Patient ID 2(major) Patient ID 1(minor)	DICOM Patient ID 3 (previous minor)
Image header for the above Study to be PID 1 is merged to PID 2 through a live The orders and Studies are migrated a The details in EI are then used to trigge	UID_PatientID.xls) with studies that be updated from PID 3 to PID 1 e ADT message against PID 2 in EI ter the move of the DICOM image. The PID on the DICOM header (PID 3) and the PID on the DICOM header (PID 3).	need a DICOM Header Update, Example – – Look up the StudyUID_PatientID.xls file
merged to PID 2.	e PID in the StudyUID_PatientID.xls,	ne DICOM update, but PID 1 has now been could you not look into EI for the correct Patient ID in EI

Thanks, Junitha

Hi

From: [mailto: Sent: Monday, 9 July 2018 4:37 PM

To: [Health] (Health) (Health) (Health) (Health) (Health) (Health) (Health) (Health) (Health) (Sirisha.Mandapati@act.gov.au); Divvela, Venkat (Health) (Venkat.Divvela@act.gov.au); Subject: [AUS - ACT] Data extract for Patient Merge test [SEC=UNCLASSIFIED]

But indeed, with a list of new PIDs the DICOM migration can update these DICOM headers.
 That would solve the problem and was tested before, so that is OK.
 The sheet with Study UIDs and active Patient IDs (StudyUID_PatientID.xls) was provided for DICOM header

update with the small sample extract provided for merge testing.

This is my understanding of the process, please correct me if I am wrong.

Was this update implemented for this round of testing?

[KEV] This was not done during the merge test, but we know from previous tests that this works

In any case, where the merge would be send to El and <u>not</u> to the Siemens PACS and the new
PID is not somewhere on the provided lists, these will result in the double lines in El as you
can see from the last test. These types of studies will be reported on the migration 'Exception list'
as 'migrated, failed validation'.

If EI can identify orders and procedures to be migrated against the right PID (in scenarios where the migrated data is still referencing the merged MRN), can't we do something similar to the DICOM header update too?

Is there a way for your code to check if the PID provided in the list (StudyUID_PatientID.xls) is active, if not, can your code not find the active PID for the same? I understand that this adds to the complexity of the code needed for DICOM update, but my understanding is that the system should have all the required information needed for the DICOM header update.

Could you please analyze if this is a possible option?

[KEV] El only makes that link for the HL7 side, I did test this before sending out my response just to be sure. So on the DICOM side these assumptions are not made, the data needs to match the HL7 order, if it doesn't fully match, manually actions will be needed.

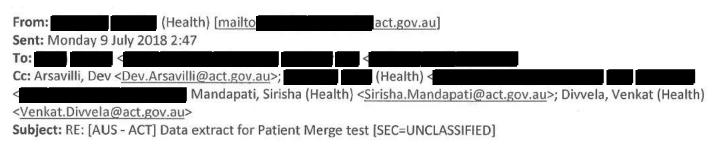
The migration tools have a static database, once everything is setup, no real time checks are possible. We don't seem to have situations where the merges would be executed over ADT and not forwarded to the connected PACS systems.

Kind Regards,



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Thanks

Please see my comments below.

Could you please look into the issues identified in Scheduling?

Thanks,

Mobile :	[Email:	act.gov.au				
From:	[mailto	10 W W				
Sent: Friday,	6 July 2018 5:13 P	M	n co			12
To:	(Health)	<	act.gov.au>;	<		e
Cc: Arsavilli, E	Dev < Dev. Arsavilli	@act.gov.au>;	(Health) <		
<	N	1andapati, Sirisha	(Health) < Sirisha.M	andapati@act.go	ov.au>; Divvela,	Venkat (Health
< Venkat. Divve	ela@act.gov.au>;	<				
Subject: RE: [AUS - ACT] Data e	xtract for Patient I	Merge test [SEC=UI	NCLASSIFIED]		
Cert W ex						
The Schodulin	ng nart is handled	by my collogue	(in CC)			

I have a day of today and will have a close look on Monday.

- But indeed, with a list of new PIDs the DICOM migration can update these DICOM headers. That would solve the problem and was tested before, so that is OK. The sheet with Study UIDs and active Patient IDs (StudyUID_PatientID.xls) was provided for DICOM header update with the small sample extract provided for merge testing. Was this update implemented for this round of testing?
- In any case, where the merge would be send to EI and not to the Siemens PACS and the new PID is not somewhere on the provided lists, these will result in the double lines in EI as you can see from the last test. These types of studies will be reported on the migration 'Exception list' as 'migrated, failed validation'.

If EI can identify orders and procedures to be migrated against the right PID (in scenarios where the migrated data is still referencing the merged MRN), can't we do something similar to the DICOM header update too?

Is there a way for your code to check if the PID provided in the list (StudyUID_PatientID.xls) is active, if not, can your code not find the active PID for the same? I understand that this adds to the complexity of the code needed for DICOM update, but my understanding is that the system should have all the required information needed for the DICOM header update.

Could you please analyze if this is a possible option?

Kind Regards,



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From: (Health) [mailto: act.gov.au] Sent: Friday 6 July 2018 4:23 Cc: Arsavilli, Dev < Dev. Arsavilli@act.gov.au >; (Health) < Mandapati, Sirisha (Health) <<u>Sirisha.Mandapati@act.gov.au</u>>; Divvela, Venkat (Health)

<Venkat.Divvela@act.gov.au>

Subject: RE: [AUS - ACT] Data extract for Patient Merge test [SEC=UNCLASSIFIED]