Testimony
Information Technology Committee
September 9, 2010
North Dakota Department of Health

Good morning, Chairman Robinson and members of the Information Technology Committee. My name is Kirby Kruger, and I am the director of the Division of Disease Control and the state epidemiologist for the North Dakota Department of Health. I am here today to provide an update on the Department of Health's electronic disease reporting system, Maven, as of August 27, 2010.

The Maven system became operational January 1, 2010, with all but four of the components functioning. The product has performed to our expectations with no major deviations and only minor surprises so far. The four components that are pending completion are needed but are not critical to our day-to-day operations; they are:

1. NETSS Conversion – allows us to move our historical disease data from the NETSS system to our new Maven system. This system is undergoing one last check by us before we sign off as completed.
2. NEDSS Extract – allows us to package our disease data and send it to the Centers for Disease Control and Prevention (CDC) in the format the agency requires. CDC has made its comments and the vendor is making changes.
3. STDMIS Conversion – allows us to move our historical sexually transmitted disease (STD) data into our new Maven system. We are working to resolve one issue: a number of gonorrhea cases are being misclassified as chlamydia cases. Because this is a one-time conversion, if the number of cases being misclassified is small, we may just elect to change these manually.
4. STD Extract – allows us to send STD data to the CDC in the format the agency requires. A test file has been sent to CDC, and we are waiting for comments.

The project is on budget, and the scope of the project has not changed since we started. The project has taken longer than expected, however. We had hoped the project would become operational in October of 2009, but we missed that mark by three months. We knew that the four components that are pending would take more time and be more complicated.

Some of the lessons learned in the process include:

1. We underestimated the project timeline. A certified project manager may have been able to help determine realistic timelines.
2. We did not have enough depth in our staff when the project started. At the beginning, only one person on our staff had working knowledge of the system and how to configure it. When she left early in the project, several people in the office became involved to create more depth. However, this process took a lot of time.
3. In the future, we plan to include a dedicated project manager in any large IT projects.
4. Finally, a lesson we learned from previous experience with a different software developer was applied to this project; that is, don't rush and compromise the product just to meet established timelines.

I would like to comment on the vendor we have been working with, Consilience Software. The people we have worked with have been very responsive and very open to our suggestions for improvements, and they continue to work hard to bring this project to completion. This is vastly different from our previous experiences with another vendor.

We are hoping to have all four of these components operational by December 31, 2010.

This concludes my testimony. I am happy to answer any questions you may have.