From:	Special Broadcast
Sent:	Wednesday, 6 March 2019 4:00 PM
То:	Special Broadcast
Subject:	Staff consultation – FSR Program Business Case for Change

Categories:

info only



Queensland Health | QHEPS

6 March 2019

## **Dear colleagues**

This July, Queensland Health is planning to transition away from our current finance and materials management information system (FAMMIS) to a modern system called SAP S/4HANA.

The most important part of any change is how we prepare and support our staff to adjust to the new, contemporary system. To this end, the Financial System Renewal (FSR) Program is working with every Hospital and Health Service (HHS) and the Department of Health (the Department) to ensure staff are engaged and consulted on proposed changes that will stem from the implementation of the new system.

It is essential that all staff are aware there will be no job losses stemming from the S/4HANA implementation, but there will be the need for some staff to undertake new or changed activities or processes in certain areas.

The transition to the new system will not affect everyone in Queensland Health – in fact, the large majority of staff across HHSs and the Department will be unaffected. These changes

do however present exciting opportunities for us to think about our current work practices and how we might do things differently, and better.

Today, the program, in partnership with every HHS and the Department has released a Business Case for Change.

The Business Case describes proposed changes arising from the upgrade to S/4HANA and the result of these changes across Queensland Health. The Business Case includes local attachments with specific information on each HHS' and the Department's implementation.

The Business Case is intended to support meaningful consultation and provide staff with an opportunity to have genuine input into the transition to S/4HANA. It is also an opportunity to learn about how staff will be supported through the process.

Feedback is strongly encouraged and an extended three-week consultation period has been allocated, to allow staff the opportunity to understand changes as part of the S/4HANA rollout. The consultation period commences today and will conclude at 5.00pm on Tuesday 26 March 2019.

I encourage all staff to speak with their line managers and provide feedback on proposed changes through their local channels. Support options available to staff include your local line manager, your HHS's or Department's transition lead, your HR team, your union, if you are a member and your local employee assistance provider. For more detail you can refer to the relevant attachment of the Business Case.

Your feedback is important and I appreciate your input and support in the successful rollout of S/4HANA across Queensland Health. I hope you are looking forward to the new opportunities that will come from working in a contemporary system that will support our organisation's needs, and our staff, now and into the future.

To view the Business Case for Change, visit the FSR Program QHEPS page.

## Kind regards

#### **Barbara Phillips**

Deputy Director-General Corporate Services Division

#### **Queensland Health**

Queensland Government, 33 Charlotte Street, Brisbane QLD 4000



Please do not reply to this email, as this account is monitored irregularly

From:	Salli Graham
Sent:	Friday, 10 May 2019 5:25 AM
То:	news; Laura Verney
Cc:	Natalie Patch
Subject:	FSR communications contact
Categories:	Laura

Hi Laura

Can you please let me know who is the lead for FSR communications. I was part of our FNQ project group meeting yesterday and I have some concerns about the communications plan and resources coming to HHSs to help them with their local comms.

Perhaps it could be a topic for Monday's teleconference and they could participate and answer questions?

Thanks Salli

## Salli Graham

Director Communications and Engagement Office of the Chief Executive Cairns and Hinterland Hospital and Health Service Level 2, 85 Spence St, Cairns Qld 4870 salli.graham@health.qld.gov.au P: 07-4226 3290 M: Find us on Facebook



Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and future

From:	Laura Verney
Sent:	Friday, 10 May 2019 10:11 AM
То:	Salli Graham
Cc:	Natalie Patch; news
Subject:	RE: FSR communications contact

HHS

Categories:

Hi Salli,

Best contact will be the FSR communication team that you can reach on 3131 1570.

Thanks,

Laura

From: Salli Graham
Sent: Friday, 10 May 2019 5:25 AM
To: news <news@health.qld.gov.au>; Laura Verney <Laura.Verney@health.qld.gov.au>
Cc: Natalie Patch <Natalie.Patch@health.qld.gov.au>
Subject: FSR communications contact

Hi Laura

Can you please let me know who is the lead for FSR communications. I was part of our FNQ project group meeting yesterday and I have some concerns about the communications plan and resources coming to HHSs to help them with their local comms.

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Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and future

From:	Emmy Kubainski
Sent:	Monday, 27 May 2019 9:52 AM
То:	news; Andrew Christie
Cc:	eHealth-Comms
Subject:	RE: Financial System Renewal Project interview

Categories:

Hi Glenn,

The FSR project doesn't fall within eHealth.

Glenn

Barbara Phillips is the SRO for FSR. A good contact would be Jessica Hogan (3082 0556) in Corporate Services.

Cheers,

Emmy

From: news

Sent: Monday, 27 May 2019 9:39 AM

To: Emmy Kubainski <Emmy.Kubainski@health.qld.gov.au>; Andrew Christie <Andrew.Christie@health.qld.gov.au> Cc: eHealth-Comms <eHealth-Comms@health.qld.gov.au>; news <news@health.qld.gov.au> Subject: FW: Financial System Renewal Project interview

Hi guys,

Heads up. Will give you a call once we've had a look.

Cheers, Glenn

From: Lion, Patrick <<u>PLion@Seven.com.au</u>>
Sent: Monday, 27 May 2019 9:19 AM
To: news <<u>news@health.qld.gov.au</u>>
Subject: RE: Financial System Renewal Project interview

Hi, thanks, I'd like the interview today.

From: news [mailto:news@health.qld.gov.au]
Sent: Monday, 27 May 2019 9:18 AM
To: Lion, Patrick
Cc: news
Subject: RE: Financial System Renewal Project interview

Hi Patrick,

We'll look into it and get back to you. What's your deadline - when were you hoping to film?

Cheers, Kat From: Lion, Patrick <<u>PLion@Seven.com.au</u>>
Sent: Monday, 27 May 2019 9:05 AM
To: news <<u>news@health.qld.gov.au</u>>
Subject: Financial System Renewal Project interview

Hi team,

I would like to interview someone from Queensland Health today about the Financial System Renewal project which is scheduled to go live on July 1.

I imagine the interview would cover and seek to confirm details on budgets, costs, timelines, reasons relating to:

- Current progress ahead of the July 1 launch. I hear staff are worried over issues including training, access to the system, whether the project will be right for July 1, and more cost pressures, that hospitals are being told to pre-order items in case it goes wrong
- A simple explanation of what the system does what equipment and materials hospitals order through it, anything else it is used for, any link with the payroll system, the problems with keeping it because it's old.
- The first incarnation of this project launched in 2013: the budget then (maybe \$80m), the cost after cancelling it (\$36m according to an QAO report I read), the reasons for cancelling it, when it was cancelled.
- The second attempt to launch: \$105m allocated in 2016 and what problems have been experienced since. There were delays when it should have launched at least last year and the Budget is now listed at \$135 million. Why has this cost risen above the original allocation? I'd like to know how many deadlines have been missed.

I would also like to shoot some overlay footage of staff working on the project.

Please let me know when I can bring a camera crew around.

Patrick Lion State Political Editor | Seven News Queensland



Seven Network (Operations) Limited Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

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#### 

From:	Glenn McDougall
Sent:	Monday, 27 May 2019 11:45 AM
То:	Robert Hoge
Cc:	news; Natalie Patch; Elise Meakin
Subject:	FSR draft response

Glenn

Categories:

Hi Hoges,

Here is a draft response:

#### Please attribute to ...

The new finance, business, procurement and supply chain logistics solution is live and running.

The technical piece is done, the software works and it is roll out ready.

It is our absolute priority to make sure our people are ready for the new system. We are taking the time to make sure our staff across the Department and 16 Hospital and Health Services are trained and confident with the system and that back-office processes are ready for go live. We are also working with our suppliers to make sure they are ready.

We also recognise that the 15,000 staff that will be affected have to continue to perform their actual jobs at the same time as training and preparing for significant changes.

We will not cut the system over unless our people are ready for it.

Once live, the system will allow us to modernise how we approach business, finance and logistics in the state's largest entity--Queensland Health--replacing a 20-year-old system with a modern system in use right around the world

It will be rolled out operationally over the next few months and remains on track for go live early in the new financial year.

Two cutover simulations--effectively full dress-rehearsals--will be run before the system comes into full use.

#### Background

The system is separate to payroll and will not impact how staff get paid.

Large, complex systems projects are carefully planned and managed, but there will always be instances where emerging issues or additional scope can only be identified once a project has commenced. This is the case in any very large IT project in the public or private sectors.

That's why these large projects are regularly reassessed and scope, costs, or timelines re-examined where necessary. Any extra costs will be managed within the existing Department of Health budget, and will not require extra funding from the government. The final cost will be known at the end of the project.

Queensland Health is the state's largest business. The new system takes care of finance, business and logistics needs and so far, 102,435 pieces of data have been/are being loaded into the master data set. This includes everything

from third-party business information, invoice details, receipts, logistics and warehouse data--pretty much everything a large business needs to know to operate in a modern financial system.

ENDS

From:	Glenn McDougall
Sent:	Monday, 27 May 2019 2:18 PM
То:	Robert Hoge
Subject:	FSR
Attachments:	RE: Media enquiry - FSR project; RE: FSR Project - media response ; 190227 DoH media response - IT News - FSR additional funding.docx

Hi Hoges,

Please see the responses to IT News in Feb and Aug 2018, and Feb 2019. Can't see that we've done any others – I'll keep looking.

Cheers, Glenn

From:	Laura Verney
Sent:	Monday, 19 February 2018 9:32 AM
То:	Kate Whitehouse
Cc:	news
Subject:	RE: FSR Project - media response

#### Hi Kate,

Please see updated response below- we've just made some slight tweaks to soften the deadline and make it higher level information.

This is fine to go back to IT News now.

Please attribute this response to a spokesperson from the Financial System Renewal Project: The Financial System Renewal (FSR) Project is on track to transition Queensland Health from the current Finance and Materials Management Information System (FAMMIS) to the new business, finance and logistics solution by 31 December 2018.

A prototype of the of the SAP S/4HANA solution was completed and delivered in March 2017 and has been evaluated by Subject Matter Experts from across Queensland Health. This system is similar to that implemented by the Department of Natural Resources and Mines and Queensland Treasury.

The solution is currently being configured and is expected to be ready by August 2018, following a period of multi-stage testing involving user acceptance and integration testing.

The 'technical go-live' will be followed by a comprehensive support and training program to enable staff to transition to the new system. Staff will then commence operating in the new system towards the end of the year.

After a competitive, two-stage market-based process, KPMG were engaged as the FSR Project's Change Management Partner.

KPMG are working collaboratively with Queensland Health to deliver change management services, including an innovative support and training approach.

The term of engagement includes two stages being awarded with stage one covering an initial period, at a value of \$2.7 million and stage two covers the period of implementation at an estimated value of \$11.6 million.

Best, Laura

From: Kate Whitehouse Sent: Monday, 19 February 2018 9:02 AM To: Laura Verney Cc: news Subject: RE: FSR Project - media response

Hi Laura/news team,

Can you please follow up with Robert to see if the media response is okay to go back to the journalist this morning?

Thanks, Kate

#### Kate Whitehouse (nee Robinson)

Communications Lead, Financial System Renewal Project 07 3074 2170 kate.whitehouse2@health.qld.gov.au | FSRCommunications@health.qld.gov.au From: Laura Verney Sent: Friday, 16 February 2018 5:05 PM To: Kate Whitehouse Cc: news Subject: RE: FSR Project - media response

Hi Kate,

Robert would like some tweaks made to the response and run past Barb and KPMG also. Can you please let the journalist know that we won't be able to get them a response until Monday when there is more time for review?

Much appreciated, Laura

From: Kate Whitehouse Sent: Friday, 16 February 2018 4:47 PM To: news Subject: FSR Project - media response

Hi media team,

As discussed earlier, please see attached our response to the IT News enquiry regarding the Financial System Renewal (FSR) Project.

Can you please let me know if you have any issues with the response?

I'll get this back at 5pm.

Will give you a call to follow up.

FYI, this has been approved by James Kelaher (CFO, Metro North) and the MN media team.

Cheers, Kate

#### Kate Whitehouse (nee Robinson)

Communications Lead, Financial System Renewal Project 07 3074 2170 kate.whitehouse2@health.qld.gov.au | FSRCommunications@health.qld.gov.au

# Queensland Health

# Media response



Enquiry received: Journalist:	Tuesday, 26 February 2019 Justin Hendry
Organisation:	IT News
Deadline:	12pm – Wednesday, 27 February 2019
Subject:	Media enquiry - financial systems renewal project

## **Questions:**

- 1. According to Queensland's IT dashboard, Queensland Health approved an additional \$30.4 million in funding for the FSR project sometime between November and December last year. Can you confirm this occurred and when the funding was approved?
- 2. What will the funding be used for? Is it to address integration complexities and change management activities?
- 3. Can you provide a brief summary of the integration complexities and who the system integrator is?
- 4. Where is the department currently at with the project and when is the system expected to go-live?

## **Response:**

## Please attribute the following to a Queensland Health spokesperson:

The Finance System Renewal is a complex system that will change many ways we do business. It will completely replace financial administration right across Queensland Health.

Additional funding was approved in December last year to ensure a smooth transition to the program – across the state and the system.

This additional funding means more work can be done to support each of the Hospital and Health Services and the Department throughout the transition and implementation process.

The project is on track and the system will go-live from July this year.

ENDS

Media contact: 3708 5376







From:	news
Sent:	Thursday, 23 August 2018 11:03 AM
То:	Justin Hendry
Cc:	news
Subject:	RE: Media enquiry - FSR project

Hi Justin,

Our response to your enquiry is below -

Please attribute the following to a Queensland Health spokesperson:

The Financial System Renewal (FSR) Program is moving Queensland Health to a contemporary business, financial and logistics solution.

While large, complex system projects are carefully planned and managed, there will always be instances where emerging issues or additional work can only be identified once a project has commenced.

That's why projects like FSR are regularly reassessed and scope, costs, or timelines re-examined where necessary. It is about making sure the people and systems are ready.

Any changes would reflect extra - and rigorous - systems testing, more training for people using the system and more support once the system is live.

The program is on track to be delivered this financial year.

#### **Background:**

The FSR program is replacing the Finance and Materials Management Information System (FAMMIS), which no longer meets industry best-practice standards, is out of vendor maintenance, and presents increasing future risks in terms of its stability and performance.

The Department of Health and all 16 Hospital and Health Services across Queensland will benefit from the increased efficiency and reliability of a modern, user-friendly new system.

ENDS

Thank you, Laura

From: Justin Hendry [mailto:JHendry@nextmedia.com.au]
Sent: Wednesday, 22 August 2018 3:28 PM
To: news <news@health.qld.gov.au>
Subject: RE: Media enquiry - FSR project

Ah oops. Sorry about that.

Should read COB August 23.

Cheers,

#### **Justin Hendry**

#### Journalist, iTnews

nextmedia Pty Limited Level 6, Building A, 207 Pacific Highway, St Leonards NSW 2065 P: +61 2 9901 6182 E: jhendry@nextmedia.com.au

From: news [mailto:news@health.qld.gov.au]
Sent: Wednesday, 22 August 2018 3:26 PM
To: Justin Hendry <<u>JHendry@nextmedia.com.au</u>>
Cc: Kate Whitehouse <<u>Kate.Whitehouse2@health.qld.gov.au</u>>
Subject: RE: Media enquiry - FSR project

Hi Justin,

Can you please confirm your deadline for this request?

Thanks, Laura

From: Justin Hendry [mailto:JHendry@nextmedia.com.au]
Sent: Wednesday, 22 August 2018 3:11 PM
To: Kate Whitehouse <Kate.Whitehouse2@health.qld.gov.au>
Cc: news <<u>news@health.qld.gov.au</u>>
Subject: Media enquiry - FSR project

Hi Kate,

Hope you're well.

I have a couple of questions about the financial system renewal project, and was wondering if you are still the person to direct these to?

- 1. Queensland's IT dashboard indicates the project is suffering delays and an anticipated funding shortfall associate with integration complexities and change management activities. How much is the anticipated funding shortfall?
- 2. Can you detail what the integration complexities are?
- 3. The dashboard also indicates a change request would be submitted to address the concerns, with an outcome anticipated this month. Has the change request been submitted and/or approved?
- 4. What is the revisited date for the new SAP ERP system to be up and running?

It would be great if you could get something back to me by COB February 23.

Kind regards,

Justin Hendry Journalist, iTnews



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\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

From:	Robert Hoge
Sent:	Monday, 27 May 2019 3:01 PM
То:	Glenn McDougall
Cc:	news
Subject:	FW: FSR figures

Glenn

Categories:

Hey Glenn,

This is the PL stuff.

Can you see what we can get – based around info already on the record, which will help with timeliness. I will tell him we will do our best to have something to him tomorrow morning.

- Robert

From: Lion, Patrick <PLion@Seven.com.au>
Sent: Monday, 27 May 2019 1:49 PM
To: Robert Hoge <Robert.Hoge@health.qld.gov.au>
Subject: FSR figures

#### Hi Robert,

I'm disappointed I've waited five hours today to get so little so far when I was more than upfront about what I wanted to ask about in an interview.

I am happy if you wish to provide the below figures by email today because I appreciate some of these figures/dates are historical and date back to 2013ish.

But an on camera interview is required and fair given this is a TV story and that is the medium and there are more questions to be answered and information to be explained to get your side of the story.

Queensland Health should be able to provide someone to talk through a project that has had a troubled journey to date and virtually no media coverage or parliamentary debate from my searches.

Can you provide a full list of everything that this system does for hospitals and is used by?

#### **FIRST ATTEMPT**

What was the budget for this replacement when Queensland Health first decided to do this?

What time period did this attempt take place?

The auditor general put the cost of cancelling it at \$36.25million here on page 54. Is that correct? <u>https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits</u>

Why was it cancelled?

Anything else you wish to add?

#### SECOND ATTEMPT

DOH-DL 18/19-092

In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

This auditor-general report in February this year. It says this was supposed to go live around November 1, 2018. Is this correct? https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits

Can you please provide a full list of start dates which have been missed and rescheduled under this attempt of the project?

How many staff need to be trained?

How many staff have been trained to date?

As discussed, please forward on any previous media coverage or Hansard of this you mentioned as I have not seen anything in my searches beyond an obscure IT website which has reported regularly over the past few years. I am happy to consider any?

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From:	Robert Hoge
Sent:	Monday, 27 May 2019 5:26 PM
То:	Lion, Patrick
Cc:	news
Subject:	Re: FSR figures

Categories: Robert

We're on it, Patrick.

When we spoke at lunch I confirmed the FSR software is in place and works, and training is happening. It's an important change with new stuff to learn but our people are smart and they're up for it.

You've asked for info from as far back as 2013 and the team is pulling stuff together.

Chat tomorrow, Robert

#### Get Outlook for iOS

From: Lion, Patrick <plion@seven.com.au>
Sent: Monday, May 27, 2019 3:38 pm
To: Robert Hoge
Cc: news
Subject: RE: FSR figures

It's difficult to form a view when you haven't provided information for the past 6.5 hours.

From: Robert Hoge [mailto:Robert.Hoge@health.qld.gov.au]
Sent: Monday, 27 May 2019 3:29 PM
To: Lion, Patrick
Cc: news
Subject: RE: FSR figures

Thanks Patrick,

The team is pulling together some further info. I'm not sure at this stage if that extra background you've asked for will be much further beyond existing on-the-record info.

I'm nervous – heading towards disappointed myself – that you seem to have already formed a view about this issue before having the info in front of you.

Robert

From: Lion, Patrick <<u>PLion@Seven.com.au</u>>
Sent: Monday, 27 May 2019 1:49 PM
To: Robert Hoge <<u>Robert.Hoge@health.qld.gov.au</u>>
Subject: FSR figures

#### Hi Robert,

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From:	Robert Hoge
Sent:	Tuesday, 28 May 2019 10:03 AM
То:	Barbara Phillips; Jessica Hogan
Cc:	news; Jasmina Joldic
Subject:	FW: more FSR questions
Categories:	Media Issues, Robert

Team,

FYI – not running tonight.

- Robert

From: Lion, Patrick <PLion@Seven.com.au>
Sent: Tuesday, 28 May 2019 9:46 AM
To: Robert Hoge <Robert.Hoge@health.qld.gov.au>
Subject: more FSR questions

Hi Robert,

As discussed, in addition to yesterday's questions about figures and dates, can I please get these answered today.

I would still prefer to have someone from Queensland Health talk on camera to explain your side if a story proceeds.

#### QUESTIONS

#### **GENERAL SYSTEM QUESTIONS**

Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Is there an exposure or connection to the payroll in this system?

Roughly how many transactions a day are processed through FAMMIS?

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

#### **FIRST ATTEMPT**

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

#### SECOND ATTEMPT

Is this process just Queensland Health - or one/multiple contractors involved?

#### **CURRENT SITUATION**

So how would you describe the roll out ahead of the launch on July 1?

Roughly how many staff are involved with this system?

I'm told staff haven't been trained and are worried they can't get access to it?

How many staff have to be trained?

How many have been trained to date?

Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

Can you guarantee it will launch in full on July 1?

Can you guarantee there will be no problems once it is live?

Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

Can you guarantee that figure won't rise again?

Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

What other measures have you taken to protect the department's operations if there are problems?

Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

Patrick Lion State Political Editor | Seven News Queensland



Seven Network (Operations) Limited Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

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From:	Robert Hoge
Sent:	Tuesday, 28 May 2019 9:46 AM
То:	Lion, Patrick
Cc:	news
Subject:	RE: FSR figures

Robert

Hi Patrick,

**Categories:** 

Some background on the new software system to help you form a view.

The Financial and Materials Management Information System (FAMMIS) currently used by Queensland Health is an older system that needs updating. Queensland Health is transitioning from its current finance and materials management system to a contemporary business, finance and logistics solution called S/4HANA. This will change the way Queensland Health manages operational procurement, supply chain logistics and finance recording. The new system does not form part of the process for paying staff.

Changes for suppliers include

- Queensland Health is moving to 17 different ABNs (reflective of our 17 companies) and it is recommended suppliers note the ABN on the purchase order (PO).
- Queensland Health system reference numbers including materials numbers and supplier material numbers will be changing.
- There will be changes to the format of PO numbers and Queensland Health cost centre numbers.
- There will be changed terms and conditions on POs.
- For framework orders or value orders, suppliers will receive a purchase order number only.
- There will be a central inbox for Queensland Health invoices

FAMMIS is more than 21 years old, heavily customised, out of vendor maintenance, and no longer has an upgrade path.

It is time for Queensland Health to transition to a new system—one that supports the organisation to manage key business functions across finance, logistics and asset management.

SAP S/4HANA is the next generation enterprise resource planning (ERP) business suite being rolled out across Queensland Health. It is an intuitive, user-friendly system that will transform Queensland Health's approach to finance, business and logistics. S/4HANA will enable Queensland Health to keep up-to-date with technological advances, adopt best practice processes and benefit from higher-quality data. It's designed for the future with one important principle at its core—to make business processes simpler for staff.

Queensland Health is committed to job security and there will be no job losses as a result of the implementation of S/4HANA.

That's a bunch of the background.

Let me know what else may be useful.

- Robert

From: Lion, Patrick <PLion@Seven.com.au> Sent: Monday, 27 May 2019 3:38 PM To: Robert Hoge <Robert.Hoge@health.qld.gov.au> Cc: news <news@health.qld.gov.au> Subject: RE: FSR figures

#### It's difficult to form a view when you haven't provided information for the past 6.5 hours.

From: Robert Hoge [mailto:Robert.Hoge@health.qld.gov.au]
Sent: Monday, 27 May 2019 3:29 PM
To: Lion, Patrick
Cc: news
Subject: RE: FSR figures

Thanks Patrick,

The team is pulling together some further info. I'm not sure at this stage if that extra background you've asked for will be much further beyond existing on-the-record info.

I'm nervous – heading towards disappointed myself – that you seem to have already formed a view about this issue before having the info in front of you.

• Robert

From: Lion, Patrick <<u>PLion@Seven.com.au</u>>
Sent: Monday, 27 May 2019 1:49 PM
To: Robert Hoge <<u>Robert.Hoge@health.qld.gov.au</u>>
Subject: FSR figures

Hi Robert,

I'm disappointed I've waited five hours today to get so little so far when I was more than upfront about what I wanted to ask about in an interview.

I am happy if you wish to provide the below figures by email today because I appreciate some of these figures/dates are historical and date back to 2013ish.

But an on camera interview is required and fair given this is a TV story and that is the medium and there are more questions to be answered and information to be explained to get your side of the story.

Queensland Health should be able to provide someone to talk through a project that has had a troubled journey to date and virtually no media coverage or parliamentary debate from my searches.

Can you provide a full list of everything that this system does for hospitals and is used by?

#### FIRST ATTEMPT

What was the budget for this replacement when Queensland Health first decided to do this?

What time period did this attempt take place?

The auditor general put the cost of cancelling it at \$36.25million here on page 54. Is that correct? <u>https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits</u>

Why was it cancelled?

#### SECOND ATTEMPT

In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

This auditor-general report in February this year. It says this was supposed to go live around November 1, 2018. Is this correct?

https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits

Can you please provide a full list of start dates which have been missed and rescheduled under this attempt of the project?

How many staff need to be trained?

How many staff have been trained to date?

As discussed, please forward on any previous media coverage or Hansard of this you mentioned as I have not seen anything in my searches beyond an obscure IT website which has reported regularly over the past few years. I am happy to consider any?

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From:	Glenn McDougall
Sent:	Tuesday, 28 May 2019 11:11 AM
То:	Jessica Hogan; Robert Hoge
Cc:	news; Natalie Patch
Subject:	RE: more FSR questions

Glenn

Categories:

Hi Jess,

I'd like to get something done by early afternoon – say 2:00, in which case it'd be great if I can have the info before 1:30.

Thanks, Glenn

Glenn McDougall Senior Media Advisor Strategic Communications | Department of Health p: 07 3708 5377 | m:

From: Jessica Hogan
Sent: Tuesday, 28 May 2019 11:02 AM
To: Robert Hoge <Robert.Hoge@health.qld.gov.au>; Glenn McDougall <Glenn.McDougall@health.qld.gov.au>
Cc: news <news@health.qld.gov.au>; Natalie Patch <Natalie.Patch@health.qld.gov.au>
Subject: RE: more FSR questions

Hi Robert and Glenn,

Jesper's team will send across info for the below questions before lunchtime. It wont be crafted into any sort of messaging - I've told him that's fine because you will take care of that.

Glenn – are you working towards any sort of times frames in terms of having a response to Robert for review?

Kind regards Jess

Jessica Hogan Director, Office of the Deputy Director-General, Corporate Services p: 3082 0556 m: e: Jessica.hogan@health.qld.gov.au

From: Robert Hoge
Sent: Tuesday, 28 May 2019 10:03 AM
To: Barbara Phillips <<u>Barbara.Phillips@health.qld.gov.au</u>>; Jessica Hogan <<u>Jessica.Hogan@health.qld.gov.au</u>>;
Cc: news <<u>news@health.qld.gov.au</u>>; Jasmina Joldic <<u>Jasmina.Joldic@health.qld.gov.au</u>>
Subject: FW: more FSR questions

Team,

FYI – not running tonight.

- Robert

From: Lion, Patrick <<u>PLion@Seven.com.au</u>> Sent: Tuesday, 28 May 2019 9:46 AM To: Robert Hoge <<u>Robert.Hoge@health.qld.gov.au</u>> Subject: more FSR questions

Hi Robert,

As discussed, in addition to yesterday's questions about figures and dates, can I please get these answered today.

I would still prefer to have someone from Queensland Health talk on camera to explain your side if a story proceeds.

#### QUESTIONS

#### **GENERAL SYSTEM QUESTIONS**

Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Is there an exposure or connection to the payroll in this system?

Roughly how many transactions a day are processed through FAMMIS?

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

#### **FIRST ATTEMPT**

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

#### SECOND ATTEMPT

Is this process just Queensland Health - or one/multiple contractors involved?

#### **CURRENT SITUATION**

So how would you describe the roll out ahead of the launch on July 1?

Roughly how many staff are involved with this system?

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How many staff have to be trained?

How many have been trained to date?

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Can you guarantee there will be no problems once it is live?

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Can you guarantee that figure won't rise again?

Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

What other measures have you taken to protect the department's operations if there are problems?

Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

Patrick Lion State Political Editor | Seven News Queensland



Seven Network (Operations) Limited Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

From:	Glenn McDougall
Sent:	Tuesday, 28 May 2019 3:11 PM
То:	Robert Hoge
Cc:	Natalie Patch; Elise Meakin; Laura Verney; news
Subject:	FSR Questions with Answers GM.docx
Attachments:	FSR Questions with Answers GM.docx



Glenn

Hi Hoges,

I've cleaned up the answers provided by Jesper via Jess.

Cheers, Glenn

#### QUESTIONS

#### **GENERAL SYSTEM QUESTIONS**

Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

The new system is much broader than FAMMIS and is highly integrated. It will do management accounting, billing, accounts payable, inventory management, general ledger, reporting, real estate, warehousing and logistics, procurements, payment, projects and capital, asset management and maintenance.

Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

Everything that Queensland Health buys will make its way into and through the system.

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Yes. Other large health systems use also SAP or Oracle.

Is there an exposure or connection to the payroll in this system?

There is a separate system that pays our staff. There is no link between the new ERP system and paying staff.

Payroll payment figures will be posted to the cost centres in the new ERP system for accounting purposes.

Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

Queensland Health supports FAMMIS with a number of vendors supporting us to do this including SAP. The system is officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new

system.

#### **FIRST ATTEMPT**

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

If you're talking about SAPHIR, this was cancelled by the previous government.

#### SECOND ATTEMPT

Is this process just Queensland Health - or one/multiple contractors involved?

The program uses a combinations of Queensland Health employees, contractors and consultants. Inherently this is an SAP product so obviously SAP are involved. Consultants assist Queensland Health based on particular needs and experience in testing, security, performance, delivery and change. This is no different to any other program where you try to get the best resources in the market for your project.

#### **CURRENT SITUATION**

So how would you describe the roll out ahead of the launch on July 1?

Moving to a new ERP system is challenging as it has a much broader scope and is highly integrated. The new system is much broader than FAMMIS. The broader health system has significant variation in how it operates due to different needs across Queensland, different size of facilities and the levels and types of services provided. The new system introduces better practice and standardisation that requires a level of change that is challenging in any environment. We believe it is worth the investment. Once we have standard systems and practices in place we will be able to use this valuable information to help improve health care, get better value for money, increase transparency and support decision making at the front line.

Roughly how many staff are involved with this system?

15,000

I'm told staff haven't been trained and are worried they can't get access to it?

**DOH RTI 5232** 

Training is being delivered in a number of ways: eLearning, face to face, and through webinars

eLearning has been available since April 2018 and we continue to release more content aligned to learning pathways from the Training Needs Analysis work undertaken to date.

Face to face training started on the 22 May 2019 for real estate and continues through to go live. We will also provide refresher training after go live in our hyper care period.

We have also included training as a component of the ongoing support model and have a strong vision for business improvement once we go live and embed the system into our business.

How many staff have to be trained?

15,000 (see response below)

How many have been trained to date?

See response below

Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

Yes, for the past few weeks, we've had purchasing staff working on cleaning up purchasing data to ensure readiness for go live. This generally happens in readiness for go-live. The cleaner the data is the cleaner things will be when we cut over to the new system.

I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

We are training some staff after go live as they are not all critical for day 1 go live.

Can you guarantee it will launch in full on July 1?

We have already answered this one

Can you guarantee there will be no problems once it is live?

Like all large ICT system implementations, there are no guarantees, and there will be pockets of things that we might need to deal with including connectivity issues, access and permissions as people change jobs all the time, re-training needs etc. This is the same for all systems. We are putting in place support arrangements and hyper care for 3 months to help people at the program levels.

Each HHS and HoD organisation are also putting in place their own support processes. We will support our staff in go live and beyond. They will all need time to become familiar with new ways of working, but feedback that we have had so far in broad terms has been positive about the system.

Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

See below

Can you guarantee that figure won't rise again?

#### Yes - the program cost will not increase

Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

This is not the same as payroll in any way. This is an ERP system implementation. Payroll touches all staff, and this doesn't.

The primary areas of focus are supply of material to the front line, maintenance of our hospitals to make sure they continue to operate, and how we pay our vendors. We are also putting in place contingency plans to deal with the window when we cut over to the new system as some activities must stop for a time. This is normal in any replacement program.

**DOH RTI 5232** 

Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

This is normal for any project like this. For example, NSW Health did the same.

This is done as a contingency measure for all these types of projects. When we cut over between the old system to the new system, we must halt transactions in the old and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

FAMMIS will remain in place to allow for end-of-year close well into the new financial year. We generally keep the legacy system in place for a period up to 12 months to ensure we can access old data. This will move to a read-only state once formally audited and closed off.

#### QUESTIONS FROM YESTERDAY

#### **FIRST ATTEMPT**

What was the budget for this replacement when Queensland Health first decided to do this?

SAPHIR (between April 2012 to mid 2014) \$23-28M (I need this confirmed though) – PREVIOUS GOVERNMENT

FSR \$105m ex GST (13 December 2016 to 1 July 2018)

FSR revised to \$135.4m (13 December 2016 to July/Aug 2019)

What time period did this attempt take place?

#### See above

The auditor general put the cost of cancelling it at \$36.25million here on page 54. Is that correct? <u>https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits</u>

#### <mark>???</mark>

Why was it cancelled?

We don't know why SAPHIR was cancelled. This was a decision of the previous government.

Anything else you wish to add?

#### SECOND ATTEMPT

In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

The program increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program.

We are also investing in making sure the vendor community a ready to go and to ensure that we have the right fail safe mechanisms in place to cut over to the new system in the most efficient way with minimal disruption to Queensland health business when we go live.

This auditor-general report in February this year. It says this was supposed to go live around November 1, 2018. Is this correct?

https://www.qao.qld.gov.au/reports-parliament/health-2017-18-results-financial-audits

Can you please provide a full list of start dates which have been missed and rescheduled under this attempt of the project?

Originally 1 July 2018

The HHS CFOs suggested July 2019 with a fresh financial year which we put out as a July 2019 business go-live.

We are now suggesting a 1 August business go-live to allow for additional training, cutover preparation.

How many staff need to be trained?

We are training just in time which is best practice. There are detailed training needs analysis and training pathways set. Approximately 15,000 staff needed to be trained. Some of these are light touch - they just do approvals or look at reports. Some are medium users who do requests and some other transactions in the system. And there are heavy users who work in the system for a large part of their role.

How many staff have been trained to date? Approximately 30 per cent.

As discussed, please forward on any previous media coverage or Hansard of this you mentioned as I have not seen anything in my searches beyond an obscure IT website which has reported regularly over the past few years. I am happy to consider any?

There has been no media coverage, that we are aware of, other than 3 stories in IT News as you mentioned.

#### Lauren Roberts

From:	Jessica Hogan
Sent:	Tuesday, 28 May 2019 4:25 PM
То:	Glenn McDougall
Cc:	Robert Hoge; news
Subject:	Re: FSR Questions with Answers GM RH v3.docx

Categories: Glenn

Thanks Glenn, will look at this with Jesper in about 10 mins and let you know. Jess

From: Glenn McDougall <glenn.mcdougall@health.qld.gov.au>
Sent: Tuesday, May 28, 2019 4:19 pm
To: Jessica Hogan
Cc: Robert Hoge; news
Subject: FSR Questions with Answers GM RH v3.docx

Hi Jess,

Robert and I have had a go at this and made some changes - I've also flagged a couple of things with comments - are you and Jesper happy with the answers? If so can you please progress it on to Barb.

Thanks, Glenn

Glenn McDougall Senior Media Advisor Strategic Communications | Department of Health p: 07 3708 5377 | m:

#### QUESTIONS GENERAL SYSTEM QUESTIONS

## Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

The new system is much broader than FAMMIS and is highly integrated. It will do management accounting, billing, accounts payable, inventory management, general ledger, reporting, real estate, warehousing and logistics, procurements, payment, projects and capital, asset management and maintenance.

## Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

As the system is responsible for allocating expenditure against cost centres, almost everything that Queensland Health buys will be accounted for in the system.

## Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Yes. Other large health systems use also SAP or Oracle.

#### Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff. There is no link between the new ERP system and paying staff.

#### Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down? No. Queensland Health supports FAMMIS, with a number of vendors supporting us to do this, including SAP. The system is officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new system.

#### FIRST ATTEMPT

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

If you're talking about SAPHIR, this was cancelled by the previous government.

#### SECOND ATTEMPT

Is this process just Queensland Health - or one/multiple contractors involved?

The program uses a combinations of Queensland Health employees, contractors and consultants. Inherently this is an SAP product, so obviously SAP is involved.

#### **CURRENT SITUATION**

So how would you describe the roll out ahead of the launch on July 1?

It's a challenge but our people are the best – and they're up for it. The new system is much broader than FAMMIS. The new system introduces better practice and standardisation that requires a level of change that we believe is worth the investment. As these standard systems and practices come into place we will be able to use this valuable information to help improve health care, get better value for money, increase transparency and support decision making at the front line.

#### Roughly how many staff are involved with this system?

15,000

I'm told staff haven't been trained and are worried they can't get access to it?

Commented [GM1]: I added this - is it true?

Training is being delivered in a number of ways: eLearning, face to face, and through webinars. Early training has been underway since April 2018 and we continue to release more content aligned to learning pathways from the Training Needs Analysis work undertaken to date.

Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and have a strong vision for business improvement once we go live and embed the system into our business.

#### How many staff have to be trained?

15,000 (see response below)

#### How many have been trained to date?

See response below

Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

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I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

We are training some staff after go live as they are not all critical for day 1 go live.

Can you guarantee it will launch in full on July 1?

#### We have already answered this one

#### Can you guarantee there will be no problems once it is live?

Like all large ICT system implementations, there are no guarantees, and there will be pockets of things that we might need to deal with including connectivity issues, access and permissions as people change jobs all the time, re-training needs etc. This is the same for all systems. We are putting in place support arrangements and hyper care for 3 months to help people at the program levels.

Each HHS and HoD organisation are also putting in place their own support processes. We will support our staff in go live and beyond. They will all need time to become familiar with new ways of working, but feedback that we have had so far in broad terms has been positive about the system.

Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

See below

Can you guarantee that figure won't rise again?

#### Yes - the program cost will not increase.

Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

The technical piece is done, the software works, and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place.

Commented [GM2]: Are we comfortable with saying this?

The primary areas of focus are supply of material to the front line, maintenance of our hospitals to make sure they continue to operate, and how we pay our vendors. We are also putting in place contingency plans to deal with the window when we cut over to the new system as some activities must stop for a time. This is normal in any replacement program.

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This is normal for any project like this. For example, NSW Health did the same.

This is done as a contingency measure for all these types of projects. When we cut over between the old system to the new system, we must halt transactions in the old and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

## Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

FAMMIS will remain in place to allow for end-of-year close well into the new financial year. We generally keep the legacy system in place for a period up to 12 months to ensure we can access old data. This will move to a read-only state once formally audited and closed off.

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The program increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program.

#### Lauren Roberts

Categories: Robert, Glenn

All,

A new version with some substantial changes.

Can we use this as our working copy.

Thanks, Robert

From: Jessica Hogan Sent: Tuesday, 28 May 2019 5:27 PM To: Glenn McDougall Cc: Robert Hoge; news Subject: RE: FSR Questions with Answers GM RH v3.docx

Hi Glenn,

Just a couple of changes and some things highlighted in yellow that Jesper and I thought might need to change. Let me know if you want to discuss.

Thanks Jess

Jessica Hogan Director, Office of the Deputy Director-General, Corporate Services p: 3082 0556 m: e: Jessica.hogan@health.qld.gov.au

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## QUESTIONS GENERAL SYSTEM QUESTIONS

# Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

The new system is much broader than FAMMIS and is highly integrated. It will do management accounting, billing, accounts payable, inventory management, general ledger, reporting, real estate, warehousing and logistics, procurement, projects and capital, asset management and maintenance.

# Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

The system is responsible for allocating expenditure against cost centres, which means that almost everything that Queensland Health buys will be accounted for through the system.

### Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Yes. Other large health systems use also SAP or Oracle.

## Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff.

### Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

## I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

No. Queensland Health supports FAMMIS, with a number of vendors supporting us to do this, including SAP. The system is officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new system.

#### FIRST ATTEMPT

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

It would be misleading to characterise the change between 2013 and 2016 as a 'delay'. The project was cancelled and rescoped.

#### SECOND ATTEMPT

Is this process just Queensland Health – or one/multiple contractors involved? The current program uses a combinations of Queensland Health employees, contractors and consultants. Inherently this is an SAP product, so obviously SAP is involved.

#### **CURRENT SITUATION**

**So how would you describe the roll out ahead of the launch on July 1?** The software is in place and the system is roll-out ready. Our focus now is on training for users and finalising any process changes required. Extra training is rolling out across June and July, with ongoing support built in beyond that period.

#### Roughly how many staff are involved with this system?

Do you mean delivering the project?

#### I'm told staff haven't been trained and are worried they can't get access to it?

Training is being delivered in a number of ways: eLearning, face to face, and through webinars. Early awareness raising and training has been underway since April 2018.

Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and we have a strong vision for business improvement once we go live and embed the system into our business.

#### How many staff have to be trained?

Numerous staff have been undertaking training based on their usage of the system. There are around X high-level super users of the system who require detailed training. Others who may only use the system once every few months will be trained over coming months.

## Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

Yes, for the past few weeks, we've had purchasing staff working on cleaning up purchasing data to ensure readiness for go live. This generally happens in readiness for go-live. The cleaner the data is the cleaner things will be when we cut over to the new system.

## I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

Some staff may only use the system two or three times a year. Current training is focussed on user-need.

#### Can you guarantee there will be no problems once it is live?

The software system is in place and essentially roll-out ready. It's a robust system and our people are up for the challenge. We are not expecting significant issues.

## Each HHS and the DoH is also putting in place their own local support processes. Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

Yes. The project increased its budget last year to allow for changed scope and extra training. This has previously been reported by government and media.

#### Can you guarantee that figure won't rise again?

Yes - the program cost will not increase.

Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that? The technical piece is done, the software works, and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place.

### Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

This is normal for any project like this. For example, NSW Health did the same. This is done as a contingency measure for all these types of projects. When we cut over between the old system to the new system, we must halt transactions in the old system and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

## What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

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In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

The program increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program. This increase was approved and reported by government last year. Glenn McDougall Senior Media Advisor Strategic Communications | Department of Health p: 07 3708 5377 | m:

#### news

From: Sent: To: Cc: Subject: Attachments: Jessica Hogan Tuesday, 28 May 2019 5:28 PM Glenn McDougall Robert Hoge; news RE: FSR Questions with Answers GM RH v3.docx FSR Questions with Answers GM RH v4.docx

**Categories:** 

Glenn

Hi Glenn,

Just a couple of changes and some things highlighted in yellow that Jesper and I thought might need to change. Let me know if you want to discuss.

Thanks Jess

Jessica Hogan Director, Office of the Deputy Director-General, Corporate Services p: 3082 0556 m: e: Jessica.hogan@health.qld.gov.au

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The system is responsible for allocating expenditure against cost centres, which means that almost everything that Queensland Health buys will be accounted for in the system.

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss?

Yes. Other large health systems use also SAP or Oracle.

#### Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff. There is no link between the new ERP system and paying staff.

#### Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

No. Queensland Health supports FAMMIS, with a number of vendors supporting us to do this, including SAP. The system is officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new system.

#### FIRST ATTEMPT

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

If you're talking about SAPHIR, this was cancelled by the previous government.

#### SECOND ATTEMPT

Is this process just Queensland Health - or one/multiple contractors involved?

The current program uses a combinations of Queensland Health employees, contractors and consultants. Inherently this is an SAP product, so obviously SAP is involved.

#### CURRENT SITUATION

So how would you describe the roll out ahead of the launch on July 1?

It's a challenge but our people are the best – and they're up for it. The new system is much broader than FAMMIS. The new system introduces better practice and standardisation that requires a level of change that we believe is worth the investment. As these standard systems and practices come into place we will be able to use this valuable information to help improve health care, get better value for money, increase transparency and support decision making at the front line.

Roughly how many staff are involved with this system?

Commented [GM1]: I added this - is it true?

Commented [JH2R1]: Not sure re this statement – can we change this?

#### 15,000

#### I'm told staff haven't been trained and are worried they can't get access to it?

Training is being delivered in a number of ways: eLearning, face to face, and through webinars. Early training has been underway since April 2018 and we continue to release more content aligned to learning pathways from the Training Needs Analysis work undertaken to date.

Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and we have a strong vision for business improvement once we go live and embed the system into our business.

#### How many staff have to be trained?

Around 15,000 (see response below)

How many have been trained to date?

See response below

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We are training some staff after go live as they are not all critical for day 1 go live.

#### Can you guarantee there will be no problems once it is live?

Like all large ICT system implementations, there are no guarantees, and there will be pockets of things that we might need to deal with including connectivity issues, access and permissions as people change jobs all the time, re-training needs etc. This is the same for all systems. We are putting in place support arrangements and a hypercare period to help people access the support they need at a program level.

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The program increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program. This increase was approved by Government during late 2018.

#### Lauren Roberts

From:	Glenn McDougall
Sent:	Wednesday, 29 May 2019 9:17 AM
То:	Natalie Patch
Cc:	news
Subject:	FW: FSR Questions with Answers GM RH v3.docx
Attachments:	FSR Questions with Answers GM RH v5.docx

Categories:

Glenn

Hi Nat, here 'tis.

Cheers, G

Glenn McDougall Senior Media Advisor Strategic Communications | Department of Health p: 07 3708 5377 | m:

From: Robert Hoge
Sent: Tuesday, 28 May 2019 8:35 PM
To: Jessica Hogan <Jessica.Hogan@health.qld.gov.au>; Glenn McDougall <Glenn.McDougall@health.qld.gov.au>
Cc: news <news@health.qld.gov.au>
Subject: Re: FSR Questions with Answers GM RH v3.docx

All,

A new version with some substantial changes.

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Jessica Hogan Director, Office of the Deputy Director-General, Corporate Services p: 3082 0556 m: -----Original Message-----From: Glenn McDougall Sent: Tuesday, 28 May 2019 4:20 PM To: Jessica Hogan <<u>Jessica.Hogan@health.qld.gov.au</u>> Cc: Robert Hoge <<u>Robert.Hoge@health.qld.gov.au</u>>; news <<u>news@health.qld.gov.au</u>> Subject: FSR Questions with Answers GM RH v3.docx

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**Categories:** 

From:	Natalie Patch
Sent:	Wednesday, 29 May 2019 10:04 AM
То:	Jessica Hogan
Cc:	news; Glenn McDougall; Robert Hoge
Subject:	RE: FSR Questions with Answers GM RH v3.docx

Glenn

Thanks Jess - did Barb mention if she wanted the DG to see this before it goes?

From: Jessica Hogan
Sent: Wednesday, 29 May 2019 10:04 AM
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Cc: news <news@health.qld.gov.au>; Glenn McDougall <Glenn.McDougall@health.qld.gov.au>; Robert Hoge
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Let me know if any issues. Jess

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Cc:	Robert Hoge; Laura Verney
Subject:	FW: FSR Questions with Answers GM RH v3.docx
Attachments:	FSR Questions with Answers GM RH v6.docx

Categories:

Hi G-Bob

Can you please send the attached info to Patrick.

Glenn

Please reiterate that as discussed with Hoges, this is background info to help him understand the issue and we'll get him an on-the-record response later today.

Thanks

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Yes. Other large health systems also use systems like SAP or Oracle.

#### Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff.

#### Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

## I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

No. Queensland Health supports FAMMIS, with a number of vendors supporting us to do this, including SAP. The system is over 20 years old and officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new system.

#### FIRST ATTEMPT

In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

It would be misleading to characterise the change between 2013 and 2016 as a 'delay'. The project was cancelled and rescoped.

#### SECOND ATTEMPT

Is this process just Queensland Health – or one/multiple contractors involved? The current program uses a combination of Queensland Health employees, contractors and consultants. Inherently this is an SAP product, so obviously SAP is involved.

#### **CURRENT SITUATION**

**So how would you describe the roll out ahead of the launch on July 1?** The software is in place and the system is roll-out ready. Our focus now is on training for users and finalising any process changes required. Extra training is rolling out across June and July, with ongoing support built in beyond that period.

#### Roughly how many staff are involved with this system?

Do you mean delivering the project?

#### I'm told staff haven't been trained and are worried they can't get access to it?

Training is being delivered in a number of ways: eLearning, face to face, and through webinars. Early awareness raising and training has been underway since April 2018.

Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and we have a strong vision for business improvement once we go live and embed the system into our business.

End to end process training is also occurring through statewide workshops.

#### How many staff have to be trained?

Numerous staff have been undertaking training based on their usage of the system. There are around 7,000 core users of the system who require detailed training. Others who may only use the system once every few months will be trained over the coming months.

### Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

Yes, for the past few weeks, we've had purchasing staff working on cleaning up purchasing data to ensure readiness for go live. This generally happens in readiness for go-live. The cleaner the data is the cleaner things will be when we cut over to the new system.

# I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

Some staff may only use the system two or three times a year. Current training is focussed on user-need.

#### Can you guarantee there will be no problems once it is live?

The software system is in place and essentially roll-out ready. It's a robust system and our people are up for the challenge. We are not expecting significant issues.

Each HHS and the DoH is also putting in place their own local support processes.

### Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

Yes. The project budget was increased last year to allow for changed scope and extra training. This has previously been reported by government and media.

#### Can you guarantee that figure won't rise again?

Yes - the project budget will not increase.

**DOH RTI 5232** 

## Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

The technical piece is done, the software works, and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place.

## Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

This is normal for any project like this. For example, NSW Health did the same. This is done as a contingency measure for all these types of projects. HHSs also routinely stock up as part of normal hospital operations over periods such as the flu season and holiday seasons. When we cut over between the old system to the new system, we must halt transactions in the old system and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

# What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

# Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

FAMMIS will remain in place to allow for end-of-year close well into the new financial year. We generally keep the legacy system in place for a period up to 12 months to ensure we can access old data. This will move to a read-only state once formally audited and closed off.

In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

The project budget increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program. This increase was approved and reported by government last year.

From:	news
Sent:	Wednesday, 29 May 2019 12:04 PM
То:	Lion, Patrick
Cc:	news
Subject:	RE: FSR figures

Hi Patrick,

As discussed with Robert, here is some information for background – not for attribution. If there is anything in the background you would like an on-the-record response to, please let us know. We'll provide an on-the-record response later today.

Kind regards,

Glenn

# QUESTIONS GENERAL SYSTEM QUESTIONS

## Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

The new system is much broader than FAMMIS and is highly integrated. It will do management accounting, billing, accounts payable, inventory management, general ledger, reporting, real estate, warehousing and logistics, procurement, projects and capital, asset management and maintenance.

# Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

The system is responsible for allocating expenditure against cost centres, which means that almost everything that Queensland Health buys will be accounted for through the system.

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss? Yes. Other large health systems also use systems like SAP or Oracle.

### Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff.

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#### DOH RTI 5232

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From:	Robert Hoge
Sent:	Wednesday, 29 May 2019 1:49 PM
То:	Lion, Patrick
Cc:	news
Subject:	Financial System Renewal questions
Categories:	Robert, Glenn

Hi Patrick,

Re your FSR questions, you can attribute the comment below to a Queensland Health spokesperson:

"The technical piece is done, the software has been tested, it works as planned, and is ready to roll out. We're now finalising staff training and ensuring all local processes to support the new system are in place. While the system software is in place and working now, full go-live preparation are underway and will be done by August 1. The extra one month allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics.

"This system is separate to payroll and will not impact how staff get paid.

If there's anything else you need, please let me know.

Cheers, Robert

# **Robert Hoge**

Executive Director – Strategic Communications Branch

Phone: 07 3708 5360 Phone: Address: 33 Charlotte St, Brisbane Qld 4000 Email: robert.hoge@health.gld.gov.au

**Queensland Health** Strategic Communications, Corporate Services Division



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From:	Katharine Wright <katharine.wright@ministerial.qld.gov.au></katharine.wright@ministerial.qld.gov.au>
Sent:	Wednesday, 29 May 2019 3:00 PM
То:	Robert Hoge
Subject:	RE: FSR lines

If this hasn't gone, min hadn't a small change. All good if it has.

"The technical piece is done, the software works and it is roll-out ready. We're now finalising staff training and ensuring all local processes to support the new system are in place. While the system software is in place and working now, full go-live preparation will occur during the month and will be done by August 1. This timing allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics.

#### BACKGROUND

This system is separate to payroll and will not impact how staff get paid

From: Robert Hoge <Robert.Hoge@health.qld.gov.au>
Sent: Wednesday, 29 May 2019 1:27 PM
To: Katharine Wright <Katharine.Wright@ministerial.qld.gov.au>
Subject: FW: FSR lines

Kat,

FYI.

- Robert

From: Robert Hoge

Sent: Wednesday, 29 May 2019 1:26 PM

To: Barbara Phillips <<u>Barbara.Phillips@health.qld.gov.au</u>>; Jessica Hogan <<u>Jessica.Hogan@health.qld.gov.au</u>>; Cc: Jasmina Joldic <<u>Jasmina.Joldic@health.qld.gov.au</u>>; Natalie Patch <<u>Natalie.Patch@health.qld.gov.au</u>>; Subject: RE: FSR lines

Barb,

Had a double-up. Can we see if DG is happy with this and get it out ASAP.

- Robert

"The technical piece is done, the software works and it is roll-out ready. We're now finalising staff training and ensuring all local processes to support the new system are in place. While the system software is in place and working now, full go-live preparation will occur during the month and will be done by August 1. The extra one month allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics.

#### BACKGROUND

This system is separate to payroll and will not impact how staff get paid

#### From: Robert Hoge

Sent: Wednesday, 29 May 2019 12:47 PM

To: Barbara Phillips <<u>Barbara.Phillips@health.qld.gov.au</u>>; Jessica Hogan <<u>Jessica.Hogan@health.qld.gov.au</u>>; Cc: Jasmina Joldic <<u>Jasmina.Joldic@health.qld.gov.au</u>>; Natalie Patch <<u>Natalie.Patch@health.qld.gov.au</u>> Subject: RE: FSR lines

Done. Just added one word.

"The technical piece is done, the software works and it is roll-out ready. We're now finalising staff training and ensuring all local processes to support the new system are in place. While the system software is in place and working now, full go-live preparation will occur during the month and will be done by August 1. The extra one month allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics. The system is separate to payroll and will not impact how staff are paid."

BACKGROUND This system is separate to payroll and will not impact how staff get paid.

From: Barbara Phillips

Sent: Wednesday, 29 May 2019 12:46 PM

To: Robert Hoge <<u>Robert.Hoge@health.qld.gov.au</u>>; Jessica Hogan <<u>Jessica.Hogan@health.qld.gov.au</u>> Cc: Jasmina Joldic <<u>Jasmina.Joldic@health.qld.gov.au</u>>; Natalie Patch <<u>Natalie.Patch@health.qld.gov.au</u>> Subject: Re: FSR lines

I wonder if we can include local processes rather than just processes ?

Get Outlook for iOS

From: Robert Hoge <<u>robert.hoge@health.qld.gov.au</u>>
Sent: Wednesday, May 29, 2019 12:43 pm
To: Barbara Phillips; Jessica Hogan
Cc: Jasmina Joldic; Natalie Patch
Subject: FSR lines

#### Barb,

Proposed on-the-record statement to Ch 7. It's short but the journalist has substantial other background detail in the questions we've answered already.

#### DRAFT STATEMENT

"The technical piece is done, the software works and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place. While the system software is in place and working now, full go-live preparation will occur during the month and will be done by August 1. The extra one month allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics. The system is separate to payroll and will not impact how staff are paid."

#### BACKGROUND

This system is separate to payroll and will not impact how staff get paid.

Robert

**Robert Hoge** Executive Director – Strategic Communications Branch

Phone: 07 3708 5360 Phone: Address: 33 Charlotte St, Brisbane Qld 4000 Email: robert.hoge@health.qld.gov.au

**Queensland Health** Strategic Communications, Corporate Services Division



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From:	Jessica Hogan	
Sent:	Wednesday, 29 May 2019 3:06 PM	
То:	Kevin Hamilton; Internal Communication	
Cc:	Robert Hoge	
Subject:	Urgent: message from Barb Phillips	
Attachments:	Internal staff communication_FSR_Final.docx	

Hello Kevin and team,

As discussed earlier today, the attached message has been approved by Barb to be sent under her name to Department of Health staff.

The message should be sent at 3.50pm (or as soon as possible after that).

Please give me a call if any issues.

Many thanks Jess



# Jessica Hogan

Director Office of the Deputy Director-General, Corporate Services Division, Department of Health p: 07 3082 0556 | m: a: Level 14, 33 Charlotte Street, Brisbane QLD 4000 w: Queensland Health | e: jessica.hogan@health.qld.gov.au

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# **FSR** extension

# Internal communication

On Friday last week the Financial System Renewal (FSR) Program Board met to discuss the status of readiness activities in preparation for S4/HANA go-live. It was acknowledged that an enormous amount of effort has been directed towards readiness activities and that significant progress has been made to prepare our people, systems and processes for change.

Thank you for all your work so far.

Although the technical piece is ready and the software works, we now need to ensure staff readiness and training has been completed and all processes to support the new system are in place.

No change of this scale and complexity is without its challenges and we want you to know that we have listened to the requests to allow our people some further preparation time before go-live.

Based on the advice of the Board, the Director-General yesterday endorsed a four-week extension to the S4/HANA business go-live date, to 1 August 2019.

This is a very complex change process for Queensland Health that is being jointly delivered by 19 entities. Responsibility for the success of this system lies with us all.

The Director-General's absolute priority is to ensure our people are supported during the change to S4/HANA. It's important that everyone involved in using the new system understands their individual role, so that critical processes like procure to pay are able to function smoothly and continue to enable clinical service delivery.

This extra time will allow additional focussed effort to four key areas:

- Strengthening system training, so that all core users have been offered training opportunities before the system goes live.
- 2. Better understanding of local business processes so front line staff understand changes to how they do their work, on and off the system.
- Ensuring people know how to access the help and support they need during and after the system goes live.
- 4. Extra preparation activities around cutover planning, including additional cutover 'dress rehearsals' to ensure a smooth transition.

The FSR Program will work with Hospital and Health Services and the Department on additional activities to reinforce local readiness planning including scenario-based integration workshops across the state and focussed training of superusers.

This extension does not impact on the technical delivery of the S4/HANA system. The system solution is currently in pre-production with master data being loaded in readiness for business use. The extension to time will however allow users to log into the system before business go-live and validate that they have access to what they need.

For the transition to be successful we all need to be ready, so that as a system we are collectively ready – and that responsibility lies with each of us. We need to do this together.

Thank you for your ongoing support as we prepare for go-live.

From: Sent:	Laura Verney Wednesday, 29 May 2019 5:02 PM
То:	externalrelations@premiers.qld.gov.au
Cc:	news
Subject:	Health media wrap
Attachments:	RE: FSR figures; Financial System Renewal questions
Categories:	Laura

Hi DPC team,

Please find health response of note below -

1. Ch 7 enquiring about FSR project. *Background and response attached*.

Thanks, Laura

# Laura Verney

Media and Issues Team Leader

Phone: 07 3708 5378 | Mobile: Address: Level 3, 33 Charlotte St, Brisbane QLD 4000 Email: <u>laura.verney@health.qld.qov.au</u>

Queensland Health | Strategic Communications Branch



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From:	news	
Sent:	Thursday, 30 May 2019 9:04 AM	
То:	Ryan Groube	
Cc:	news	
Subject:	RE: Afternoon wrap	
Attachments:	RE: FSR figures	

Hey Ryan,

Attached is the background we provided the journo, and a short quotable response below.

"The technical piece is done, the software has been tested, it works as planned, and is ready to roll out. We're now finalising staff training and ensuring all local processes to support the new system are in place. While the system software is in place and working now, full go-live preparation are underway and will be done by August 1. The extra one month allows for further staff training and system familiarisation. There will also be ongoing support available for staff using the system.

"Once live, the system will allow us to modernise how we approach business, procurement and logistics.

"This system is separate to payroll and will not impact how staff get paid."

Cheers, Kat

From: Ryan Groube
Sent: Thursday, 30 May 2019 8:57 AM
To: news <news@health.qld.gov.au>
Subject: RE: Afternoon wrap

Hi team,

Would you be able to send a copy of the Channel 7 FSR response as an fyi?

Kind regards,

**Ryan Groube** Public Affairs Manager Public Affairs Unit

Townsville Hospital and Health Service



E <u>Ryan.Groube@health.qld.gov.au</u>

W www.health.qld.gov.au/townsville

**Townsville Hospital and Health Service** 100 Angus Smith Drive, Douglas, QLD 4814 From: news Sent: Wednesday, 29 May 2019 5:03 PM To: news <<u>news@health.qld.gov.au</u>> Subject: Afternoon wrap

# SCB:

Media enquiries/events:

- •
- Ch 7 with follow up FSR questions. *Response sent.*
- •
- •

Issues: Nil

From:	Lion, Patrick <plion@seven.com.au></plion@seven.com.au>	
Sent:	Friday, 31 May 2019 9:27 AM	
То:	Robert Hoge; news	
Subject:	delay	
Categories:	Kat, Media Issues	

Hi team,

Ms Phillips has also of course been involved in the delay this week about FSR.

Can I please talk to someone on camera? If not, I require a response by 1pm please.

Questions

Does Queensland Health have a staff training problem given the FSR issues already raised?

Given this is Ms Phillips again, is this delay related to the FSR delay?

Anything else you wish to add?

Questions

Patrick Lion State Political Editor | Seven News Queensland

> Seven Network (Operations) Limited Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

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From: Sent: To: Subject:	news Friday, 31 May 2019 11:10 AM Natalie Patch FW: delay
FYI	
<b>Sent:</b> Friday, 31 Ma <b>To:</b> Robert Hoge <r <b>Subject:</b></r 	[mailto:PLion@Seven.com.au] y 2019 9:27 AM obert.Hoge@health.qld.gov.au>; news <news@health.qld.gov.au> delay</news@health.qld.gov.au>
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Patrick Lion State Political Editor | Seven News Queensland



Seven Network (Operations) Limited Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

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From:	news	
Sent:	Friday, 31 May 2019 10:12 AM	
То:	Robert Hoge	
Cc:	news; Laura Verney	
Subject:	DRAFT: expenditure delegations	

#### Please attribute the below to a Queensland Health spokesperson:

Expenditure delegations are an important aspect when investing tax payer dollars.

Simplifying expenditure delegations aims to reduce red tape, while still ensuring the most appropriate people can exercise powers to make financial decisions.

We'll take as much time as we need to get the balance right. A deadline shouldn't govern the result.

#### Background - not for attribution:

This project is managed by Health Support Queensland, and is in no way related to the Financial System Review.

#### **ENDS**

Cheers,

## Kat Acampora

Senior Media Officer

Phone: 07 3708 5383 | Mobile: Email: <u>kat.acampora@health.qlo.gov.au</u> Address: Level 3, 33 Charlotte St, Brisbane QLD 4000 *Please note, I work from home on Wednesdays* 

Queensland Health | Strategic Communications Branch







Queensland's Health Vision: By 2026 Queenslanders will be among the healthiest people in the world.

Queensland Health acknowledges the Traditional Owners of the land, and pays respect to Elders past, present and future.

 From: Lion, Patrick <PLion@Seven.com.au>

 Sent: Friday, 31 May 2019 9:27 AM

 To: Robert Hoge <Robert.Hoge@health.qld.gov.au>; news <news@health.qld.gov.au>

 Subject:
 delay

Hi team,

Ms Phillips has also of course been involved in the delay this week about FSR.

Can I please talk to someone on camera? If not, I require a response by 1pm please.

Questions

Does Queensland Health have a staff training problem given the FSR issues already raised?

Given this is Ms Phillips again, is this delay related to the FSR delay?

Anything else you wish to add?

Questions

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From: Sent: To: Cc: Subject:	news Friday, 31 May 2019 1:29 PM Barbara Phillips; Michael Walsh; Jasmina Joldic news; eHealth-Comms; Robert Hoge Final: delay
Categories:	Kat
Hi all,	
Below is the final r	response provided to the journalist regarding
- FYI on a	additional questions & response on yesterday's topic.
Cheers,	
Kat	
Get <u>Outlook for iO</u>	<u>S</u>
From: news <news@< th=""><th>오health.qld.gov.au&gt;</th></news@<>	오health.qld.gov.au>
Sent: Friday, May 33	l, 2019 12:58 pm
To: Lion, Patrick	
Cc: news	
Subject: RE: procure	ement plan delay and staff movements
Hi Patrick,	
Polow is a response	

Below is a response to your enquiry.

#### Background – not for attribution:

This project is managed by Health Support Queensland, and is not related to the Financial System Review.

**ENDS** 

Cheers,

Kat

# Media & Issues

Phone: 07 3708 5376 Email: <u>news@health.qld.gov.au</u> Address: Level 3, 33 Charlotte St, Brisbane QLD 4000

Queensland Health |Strategic Communications Branch



Queensland Government



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Patrick Lion
State Political Editor | Seven News Queensland



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#### DOH RTI 5232

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From:	news		
Sent:	Friday, 31 May 2019 3:03 PM		
То:	Lion, Patrick		
Cc:	news		
Subject:	RE:		
Attachments:	RE	delay	

#### Hi Patrick,

Are you referring to your enquiry on

? If so, I responded hours ago. See attached.

Cheers, Kat

From: Lion, Patrick <PLion@Seven.com.au>
Sent: Friday, 31 May 2019 2:59 PM
To: news <news@health.qld.gov.au>
Subject:

#### Have you got a response please

Patrick Lion State Political Editor | Seven News Queensland



#### Seven Network (Operations) Limited

Sir Samuel Griffith Drive | Mt Coot-tha | Brisbane QLD 4066 Australia Postal Address: GPO Box 604 | Brisbane QLD 4001 Australia

From: Sent: To: Cc: Subject:	Robert Hoge Monday, 3 June 2019 9:32 AM Barbara Phillips; Kylie Ramsden; Luan Sad Jasmina Joldic; Kat Acampora; news Fwd: New CH7 enquiry:	likaj delay
Categories:	Kat	
Barb,		
FYI.		
Let's talk after Min/	DG.	
Kat, can you check with finance what the DG's delegation level is. It will probably be on QHEPS and Mark O may be able to provide some general info.		
Can you please also flick back to PL lines similar to the piece - ie if he's suggesting this is putting procurement or finance at risk, we'd like a specific right if reply. That can go to him straight away.		
- Robert		
Get Outlook for iOS		
From: Kat Acampora <kat.acampora@health.qld.gov.au> Sent: Monday, June 3, 2019 9:27 am To: Robert Hoge Cc: Natalie Patch; Elise Meakin; Laura Verney Subject: New CH7 enquiry: He's back. See below. Cheers,</kat.acampora@health.qld.gov.au>		
Kat		
From: Lion, Patrick <       PLion@Seven.com.au         Sent: Monday, 3 June 2019 8:44 AM         To: news <       news@health.qld.gov.au         Subject: RE:       delay		
Hi,		
A couple more if I could please get a response by midday. I don't think they are too involved.		

QUESTIONS

Thanks for your help.

From: news [mailto:news@health.qld.gov.au] Sent: Friday, 31 May 2019 12:59 PM To: Lion, Patrick Cc: news Subject: RE: delay

Hi Patrick,

Below is a response to your enquiry.

This project is managed by Health Support Queensland, and is not related to the Financial System Review.

ENDS

Cheers, Kat

Media & Issues

Phone: 07 3708 5376 Email: <u>news@health.qld.gov.au</u> Address: Level 3, 33 Charlotte St, Brisbane QLD 4000 Queensland Health | Strategic Communications Branch







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#### Questions



#### **Patrick Lion**

State Political Editor | Seven News Queensland



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### Lauren Roberts

From:	Barbara Phillips
Sent:	Monday, 3 June 2019 12:38 PM
То:	Kat Acampora; Jasmina Joldic
Cc:	news; Robert Hoge
Subject:	Re: FOR REVIEW - expenditure delegations

**Categories:** 

Good with me thanks

Get Outlook for iOS

From: Kat Acampora <kat.acampora@health.qld.gov.au>
Sent: Monday, June 3, 2019 11:13 am
To: Barbara Phillips; Jasmina Joldic
Cc: news; Robert Hoge
Subject: FOR REVIEW - expenditure delegations

Kat

Hi Barb and Jasmina,

See below response to Patrick's latest enquiry. Hoges is happy with it. Please let me know if you have any changes.

We'll aim to get it to him as soon as possible.

#### Please attribute to a Queensland Health spokesperson:

Expenditure delegations will remain as is until our new, simplified process is in place.

#### Background only – not for attribution:

All businesses have their own set of rules for expenditure delegations, and this is just our version.

Expenditure delegations are provided to positions, not to individual staff. Delegations are assigned based on business needs, and all positions are assessed for the need. All staff with a delegation receive training and guidance to ensure they understand their responsibilities before exercising any delegation.

All expenditure has a delegation of some sort.

#### ENDS

Cheers,

Kat Acampora Senior Media Officer

Phone: 07 3708 5383 | Mobile:

DOH-DL 18/19-092

Email: <u>kat.acampora@health.qld.gov.au</u> Address: Level 3, 33 Charlotte St, Brisbane QLD 4000 *Please note, I work from home on Wednesdays* 

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From: Lion, Patrick <<u>PLion@Seven.com.au</u>>Sent: Monday, 3 June 2019 8:44 AMTo: news <<u>news@health.qld.gov.au</u>>Subject: RE:delay

From: news [mailto:news@health.qld.gov.au] Sent: Friday, 31 May 2019 12:59 PM To: Lion, Patrick Cc: news Subject: RE: delay

Hi Patrick,



This project is managed by Health Support Queensland, and is not related to the Financial System Review.

#### ENDS

Cheers, Kat

### Media & Issues

Phone: 07 3708 5376 Email: <u>news@health.qld.gov.au</u> Address: Level 3, 33 Charlotte St, Brisbane QLD 4000

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Subject:	delay		

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Can I please talk to someone on camera? If not, I require a response by 1pm please.

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Does Queensland Health have a staff training problem given the FSR issues already raised?

Given this is Ms Phillips again, is this delay related to the FSR delay?

Anything else you wish to add?

Questions

#### Patrick Lion State Political Editor | Seven News Queensland



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### 

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### Lauren Roberts

From:	news
Sent:	Monday, 3 June 2019 2:10 PM
То:	Robert Hoge
Subject:	FW: RE: FSR figures

Here you go.

From: news Sent: Wednesday, 29 May 2019 12:04 PM To: Lion, Patrick <PLion@Seven.com.au> Cc: news <news@health.qld.gov.au> Subject: RE: FSR figures

Hi Patrick,

As discussed with Robert, here is some information for background – not for attribution.

If there is anything in the background you would like an on-the-record response to, please let us know. We'll provide an on-the-record response later today.

Kind regards,

Glenn

### QUESTIONS

### **GENERAL SYSTEM QUESTIONS**

Can you please list the full list of things that FAMMIS/the new FSR do for hospitals?

The new system is much broader than FAMMIS and is highly integrated. It will do management accounting, billing, accounts payable, inventory management, general ledger, reporting, real estate, warehousing and logistics, procurement, projects and capital, asset management and maintenance.

### Can you list the full range of equipment bought through this – food, surgery tools, beds, toilet paper, medicine, bandages?

The system is responsible for allocating expenditure against cost centres, which means that almost everything that Queensland Health buys will be accounted for through the system.

Is it correct it is used for hospitals to run their overall budget, calculating profit and loss? Yes. Other large health systems also use systems like SAP or Oracle.

### Is there an exposure or connection to the payroll in this system?

No. There is a separate system that pays our staff.

### Roughly how many transactions a day are processed through FAMMIS?

About 5 million transactions and 50 million line-items per annum

I have read a lot about FAMMIS being "out of vendor support" and a risk for some years as it is old and introduced in 1997. Does this mean it does not have any IT support if it breaks down?

No. Queensland Health supports FAMMIS, with a number of vendors supporting us to do this, including SAP. The system is over 20 years old and officially out of support however SAP still does work under contract to make sure we can operate the system. This is one of the reasons for the new system.

### FIRST ATTEMPT

## In addition to the previous figures, a question in light of your comments this morning. Why was it cancelled? What were the problems?

It would be misleading to characterise the change between 2013 and 2016 as a 'delay'. The project was cancelled and rescoped.

### SECOND ATTEMPT

### **Is this process just Queensland Health – or one/multiple contractors involved?** The current program uses a combination of Queensland Health employees, contractors and consultants. Inherently this is an SAP product, so obviously SAP is involved.

### **CURRENT SITUATION**

### So how would you describe the roll out ahead of the launch on July 1?

The software is in place and the system is roll-out ready. Our focus now is on training for users and finalising any process changes required. Extra training is rolling out across June and July, with ongoing support built in beyond that period.

### Roughly how many staff are involved with this system?

Do you mean delivering the project?

### I'm told staff haven't been trained and are worried they can't get access to it?

Training is being delivered in a number of ways: eLearning, face to face, and through webinars. Early awareness raising and training has been underway since April 2018. Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and we have a strong vision for business improvement once we go live and embed the system into our business.

End to end process training is also occurring through statewide workshops.

#### How many staff have to be trained?

Numerous staff have been undertaking training based on their usage of the system. There are around 7,000 core users of the system who require detailed training. Others who may only use the system once every few months will be trained over the coming months.

# Why were staff working overtime at your Bowen Hills O'Connell Terrace office over the weekend? I'm told they had to do overtime because they are struggling to get things done in time. How many staff did so at this office?

Yes, for the past few weeks, we've had purchasing staff working on cleaning up purchasing data to ensure readiness for go live. This generally happens in readiness for go-live. The cleaner the data is the cleaner things will be when we cut over to the new system.

### I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

Some staff may only use the system two or three times a year. Current training is focussed on user-need.

### Can you guarantee there will be no problems once it is live?

The software system is in place and essentially roll-out ready. It's a robust system and our people are up for the challenge. We are not expecting significant issues.

Each HHS and the DoH is also putting in place their own local support processes.

### Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

Yes. The project budget was increased last year to allow for changed scope and extra training. This has previously been reported by government and media.

### Can you guarantee that figure won't rise again?

Yes - the project budget will not increase.

DOH RTI 5232

## Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

The technical piece is done, the software works, and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place.

# Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

This is normal for any project like this. For example, NSW Health did the same. This is done as a contingency measure for all these types of projects. HHSs also routinely stock up as part of normal hospital operations over periods such as the flu season and holiday seasons. When we cut over between the old system to the new system, we must halt transactions in the old system and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

### What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

## Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

FAMMIS will remain in place to allow for end-of-year close well into the new financial year. We generally keep the legacy system in place for a period up to 12 months to ensure we can access old data. This will move to a read-only state once formally audited and closed off.

DOH RTI 5232 In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

The project budget increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program. This increase was approved and reported by government last year.

#### Lauren Roberts

From:	Robert Hoge
Sent:	Monday, 3 June 2019 2:13 PM
То:	Katharine Wright
Cc:	news
Subject:	FW: RE: FSR figures

**Categories:** 

Glenn, Mins

Kat,

Patrick asked for background info and an on-the-record statement.

You'll see below that we confirmed with him no increase in cost with the one month extra training time.

- Robert

From: news
Sent: Wednesday, 29 May 2019 12:04 PM
To: Lion, Patrick <<u>PLion@Seven.com.au</u>>
Cc: news <<u>news@health.qld.gov.au</u>>
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It would be misleading to characterise the change between 2013 and 2016 as a 'delay'. The project was cancelled and rescoped.

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DOH RTI 5232

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Face to face training is underway and we will provide refresher training and continued support after go-live. Training is a component of the ongoing support model and we have a strong vision for business improvement once we go live and embed the system into our business.

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## I understand some staff are being trained after July 1 according to plans circulated. Why – wouldn't it be better to have everyone trained?

Some staff may only use the system two or three times a year. Current training is focussed on user-need.

### Can you guarantee there will be no problems once it is live?

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Each HHS and the DoH is also putting in place their own local support processes.

## Why have we seen a rise in cost to \$135 million for this stage from \$105m? When did this occur. Online says it was late last year?

Yes. The project budget was increased last year to allow for changed scope and extra training. This has previously been reported by government and media.

### Can you guarantee that figure won't rise again?

Yes - the project budget will not increase.

### Staff have told me there is a fear over the go-live date and people are comparing it to the payroll in terms of if the department is ready. How do you respond to that?

The technical piece is done, the software works, and it is roll-out ready. We're now finalising staff training and ensuring all processes to support the new system are in place.

# Robert Hoge yesterday confirmed info I had – that all hospitals have been told to have at least an extra week's supplies in store for the launch day. Can you explain why this is the case and what supplies these are?

This is normal for any project like this. For example, NSW Health did the same. This is done as a contingency measure for all these types of projects. HHSs also routinely stock up as part of normal hospital operations over periods such as the flu season and holiday seasons. When we cut over between the old system to the new system, we must halt transactions in the old system and migrate the data to the new, so that we can continue to work as seamlessly as possible.

There is a short closure window. So, we are stocking up to make sure that necessary supplies get to the front line as usual. We will practice our cutover process to make sure that this happens in a timely manner and that people know what to do. Again, this normal for any project like this.

## What other measures have you taken to protect the department's operations if there are problems?

We are setting up manual operational processes between the warehouses and the local stores to ensure that stock is available just in case. All hospitals will stock up to their normal seasonal level – for example for flu and flood season. Manual order processes are also being put in place and

the relationships with vendors reinforced should direct orders be necessary. We are taking all precautions to make sure that the cutover will happen smoothly, is practiced, and that the right contingency plans are in place.

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## Will you turn off the old FAMMIS system, then turn on the new one? Or will they both be live at the same time for a while?

FAMMIS will remain in place to allow for end-of-year close well into the new financial year. We generally keep the legacy system in place for a period up to 12 months to ensure we can access old data. This will move to a read-only state once formally audited and closed off.

### In 2016-17, Queensland Health had \$105m allocated. The digital dashboard says this has been increased to \$135 million and mentions the problems/"red light" late last year. When and why was this money increased? It was reported in March on an IT blog.

The project budget increase was to allow for change management, training, communication and engagement, further S4/Hana system development, testing and support costs for the duration of the program. This increase was approved and reported by government last year.