# Statement of Work

## For

## Learning Management System

Between:      *Regional Medical Center (RMC)*

   and:        *TBD*

Prepared by:
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      Matt Valentine (CIO)

      For MMI 408 – Medical Technology
      Acquisition and Assessment

Effective Date: _____

Under Contract #: _____

Under Contract Name: _____

_____

# Table of Contents

<div align="center">**Statement of Work**</div>

## 1.0  Introduction

### 1.1 Project Title

This work is being performed for the acquisition, installation, and implementation of a Learning Management System for Regional Medical Center (RMC).

This Statement of Work (SOW) is made and entered by and between Regional Medical Center *("RMC")* and TBD. ("TBD") This SOW incorporates by reference the terms and conditions of Contract Number [*TBD*] in effect between RMC and TBD.  In case of any conflict between this SOW and the Contract, the Contract shall prevail. The RMC and Contractor agree as follows:

### 1.2 Background

RMC is a 300 bed hospital that services the Chicagoland area and strives for quality improvement in patient care.  For the past ten years, RMC has maintained a paper file system for all employee continuing education records.  Employees are required to present a paper certification that their required training is completed. The human resource department then files the certificate in the employee's file. The numerous limitations to this practice were exposed during a recent Joint Commission survey.  It was a cumbersome and lengthy process to provide the proper documentation.  In addition, the surveyors questioned the validity and accuracy of the documentation. RMC received an unsatisfactory mark in this area.

RMC wishes to acquire and deploy an electronic Learning Management System (LMS) to facilitate the delivery and documentation of the continuing education requirements for our staff.  The primary driving factor in this is the ability to easily demonstrate compliance with the Joint Commission (TJC) training certification requirements.  The chosen LMS must have proven experience in helping hospitals achieve a "satisfactory" rating or higher for TJC accreditation, specifically in the area of monitoring and tracking required employee continuing education.  The implementation of an electronic LMS will complement our initiatives for increasing our footprint in adopting healthcare technology and quality improvement. We are currently in the process of implementing an EMR to help reduce medical errors and improve patient safety.  The implementation of an electronic LMS will complement and help support our dedication of improvement in the quality of care through ensuring our staff members are in compliance with the most recent and required education.

### 1.3 Objectives

System selection and implementation objectives were determined by the Executive Committee (CNO, CIO, and CEO) with inputs from the Clinical Lead, Compliance Officer, and Human Resources Manager.  The committee used a consensus process based on the Delphi Technique to determine the highest priority objectives.  Each committee member submitted their top three highest priority objectives or other important aspects of the LMS acquisition project.  All priories were then rank ordered by each

member and a collective rank was determined. The top three priorities were used. A tie for third place was obtained between two priority objectives that were very similar. It was decided to merge these two sets together instead of further voting to break the tie. See appendix A for the voting results.

The top priority objectives determined by the committee for this project are:

1. Strong implementation project management, reflected in 10 key project milestones.

2. A clearly defined set of deliverables and scope of work that include the software system, project management planning documents, training, system content, and documentation.

3. System functionality that jointly supports RMCs quality initiatives for continuous improvement in patient care, patient safety, and compliance as well as security and ease of deployment and maintenance, minimizing the total cost of ownership.

The scope of work expected for this project is described in section 5.0 below. The anticipated project deliverables are described in section 5.3. The expected key project milestones are described in section 5.4.

Key system functionality objectives include the following items:

- The system must demonstrate proven success helping a hospital in meeting Joint Commission accreditation requirements and achieving a "satisfactory" rating.

- The system must ensure easy monitoring and tracking of required continuing education for all staff members.

- The system must support our quality initiative for quality improvement in patient care and patient safety.

- The system must allow for easy customization and access for all departments who are involved in monitoring employee continuing education.

System features should include the following:

- The system should be deployed in a Software as a Service model to minimize support requirements from the internal Information Services organization. The following items should be considered for incorporation into the Request for Proposal (RFP).

  o The system should be web hosted, accessible from a web browser, allowing multiple simultaneous users.
  o The system should allow remote access.
  o The system should include multiple web platform and mobility support.
  o The system should be "zero install" without requiring plug-ins or other add-ons.
  o The system should minimize total cost of ownership (TCO).
  o The system should include a Service Level Agreement (SLA), including 24 hour access.

- The system should include backup and disaster recovery planning.

- The system must provide adequate security that is both easy to use and at the same time protects critical hospital data.  The following items should be considered for incorporation into the Request for Proposal (RFP).

  - The system should provide secure access via https.
  - The system should provide periodic SAS70 / SSAE16 security audit results.
    - See http://sas70.com/sas70_overview.html
    - See http://ssae16.com/
  - The system should use hospital login credentials (Active Directory, Single-Sign-On SSO and LDAP integration) to avoid requiring users to maintain additional credentials.

- The system should provide content management capabilities.  The following items should be considered for incorporation into the Request for Proposal (RFP).

  - The system should provide a rich set of content, including:
    - Content development tools that facilitate the creation of customized, department-specific content.
    - Baseline of pre-built, hospital training modules.
  - The system should be standards-compliance, including:
    - Ability to support reusable content via import and export.
    - Ability to support SCORM, AAIC, and IMS compliance (See http://www.adlnet.gov/).
      - SCORM - Sharable Content Object Reference Model
      - AICC - Aviation Industry CBT (Computer Based Training) Committee
      - IMS - Instructional Management Systems
    - Compliance with HIPAA security and privacy requirements, where applicable.

## 1.4 Reference to other applicable documents
- See Joint Commission training documentation compliance requirements
- See SCORM - Sharable Content Object Reference Model – standards for Learning Management Systems

## 2.0  Staffing Roles and Responsibilities

## 2.1 Staffing

**Project Manager – Contractor**
The Contractor's Project Manager is: TBD (to be determined)

Name: *TBD*
Address: *TBD*
City: *TBD*
State: *TBD*
Zip: *TBD*

Organization: *TBD*
Phone: *TBD*
Cell: *TBD*
Fax: *TBD*
Email: *TBD*

**Project Manager – Organization**
The Organization's Project Manager is:

Name: Patrick D. Hayes, PMP
Address: 123 Michigan Avenue
City: Chicago
State: IL
Zip: 60601
Organization: Regional Medical Center
Phone: (312) 555 - 8000
Cell: (312) 555 - 0829
Fax: (312) 555 - 8001
Email: patrick_hayes@rmc.org

**2.2 Roles and Responsibilities Matrix**

**Contractor Staff, Roles and Responsibilities**

| Role | Responsibilities |
| --- | --- |
| Sales / Account Manager | The account manage will maintain the ongoing relationship with the customer, before, during, and after the installation of the LMS. |
| Project Manager | The project manager will interface with the hospital's project manager to ensure the project's success. The project manager will allocate contractor's resources to complete all project tasks. The project manager will hold regular project status meetings to update stakeholders on the state of the project, any issues, and next steps. 40 hours of project management time have been included in the project proposal. Additional project management time will be available to the hospital at a rate of $100 per hour. |
| Installer | The installer will perform all technical installation tasks, including provisioning of the hosted server and installation of the LMS software. 16 hours of installation and support have been included in the project proposal. Additional technical installation and customization will be available to the hospital at a rate of $175 per hour. |
| Trainer | The trainer will provide training to the hospital's LMS system administrators and "super users." Training will be provided via remote web-conference sessions. 40 hours of training have been included in the project proposal. Additional training will be available to the hospital at a rate of $115 per hour. |
| Content Developer | A content developer is available to develop content modules for the hospital's training modules. The development of three content modules have been included in the project proposal. Additional content development will be available to the |

| | hospital at a rate of $150 per hour. |
|---|---|
| Compliance Advisor | The vendor's compliance officer should be an available resource to the project to provide expert advice and guidance for Joint Commission training requirements and can guide our organization to achieve a "satisfactory" rating. |

## Organization Staff, Roles and Responsibilities

The "C-suite" will have decision-making authority to approve the selection and purchase of a Learning Management System that meets the needs of RMC.  The Chief Executive Officer (CEO) will have final approval authority with participation from the Chief Nursing Officer (CNO) and the Chief Information Officer (CIO).  The Clinical Lead, Compliance Officer, and Human Resources Manager will be key members of the core decision-making team and must sign-off on system requirements and the implementation project plan.

All project planning and meetings will be held on RMC premises in the hospital's executive boardroom.

The roles and responsibilities of each individual are described as follows:

| Role | Responsibilities |
|---|---|
| Chief Executive Officer (CEO) - Justin | The CEO has ultimate approval authority for the purchase of the LMS.  The CEO must commit the financial resources to implement the system and is accountable to the Board of Directors for the success of the system.  The CEO will receive bi-weekly reports along with recommendations from the CNO and CIO. |
| Chief Information Officer (CIO) – Matt | The CIO will ensure that the LMS aligns with the overall strategic plan of RMC.  The CIO must agree to the purchase of the selected LMS, assessing that the LMS meets the technical requirements for the hospital.  The CIO must commit any technical resources needed to implement the system and wishes to minimize those resources.  IT project management team resources will be assigned by the CIO and will be responsible for ensuring the technology infrastructure remains intact with limited disruption to clinical workflow during EMR implementation. |
| Chief Nursing Officer (CNO) – Melody | The CNO will function as the overall champion for the LMS project and will show the clinicians the benefits of the LMS and obtain global support for the LMS.  The CNO must agree to the purchase of the selected LMS, assessing that the LMS meets the needs of the nursing staff, a large portion of the hospital user-base.  The CNO must commit a number of nursing resources needed to train and roll-out the system and will work closely with the CIO to ensure clinical workflow is not negatively impacted. |
| Chief of Medical Staff – Justin | The chief of staff will identify all vital stakeholders and will work with the clinicians to promote the LMS through demonstrations, interviewing, and Q&A sessions. He will provide timely feedback during the project to the CIO and CNO if clinical workflow is negatively impacted through oral and written surveys from staff.  He will lead an internal committee to gather pros and cons of system implementation. |
| Compliance Officer – | The compliance officer will make sure that the LMS meets all organization |

| Melody | security and privacy requirements. She will establish the continuing education compliance guidelines and will work closely with the staff member(s) hired with Joint Commission accreditation experience to ensure all requirements are met and implemented in a manner which is ethical and appropriate and meets the needs of the hospitals quality initiative. |
|---|---|
| Human Resource Manager – Matt | The HR manager will coordinate the transfer of all paper information into the LMS and will establish guidelines for using the LMS and corrective action measures if an employee is non-complaint regarding continuing education requirements. He has a vested interest in ensuring that any employee information is kept confidential where appropriate and will meet regularly with the CIO to ensure the technology infrastructure is satisfactory and includes all necessary firewalls and permissions for accessing employee records.  The HR Manager will provide input to the CIO that the system meets the needs of the HR department for reporting and ease-of-use.  The HR Manager will ultimately be responsible for day-to-day management of the system and content. |

| Function | Workgroup/Individuals | Primary Responsibility |
|---|---|---|
| Functional, Performance and Acceptance Testing | <ul><li>CNO, Clinical Lead, Compliance Officer</li><li>Outsourced hired staff member</li><li>Staff with LMS experience</li><li>Staff without LMS experience</li></ul> | <ul><li>Develop SOW and project plan for testing workgroups</li><li>Develop functional testing plans</li><li>Develop performance testing plans</li><li>Develop test cases</li><li>Develop committees to meet regularly to review testing plans (weekly initially)</li></ul> |
| System Operation and Administrations | <ul><li>CIO, HR, Clinical Lead, CNO</li></ul> | <ul><li>Develop and maintain SOW and project plan for system operations</li><li>Provide input into the development of business requirements</li><li>Evaluate and assess LMS against new workflow</li><li>Perform functional, performance and acceptance testing</li><li>Review work of other workgroups</li><li>Meet regularly to review and reassess testing plans and business requirements</li></ul> |

| Design and develop policies and procedures for continuing education requirements | • Compliance Officer<br>• Human Resource Manager<br>• Chief of Medical Staff<br>• Risk Management | • Establish mandatory continuing education requirements<br>• Design education modules and establish material to be included<br>• Define evaluation and requirements to successfully complete the module<br>• Define tracking and monitoring parameters<br>• Define timelines for module completion<br>• Define non-compliance and corrective action |
|---|---|---|
| System Operation and Administration | • CIO<br>• CNO<br>• Chief of Medical Staff | • Develop project plan for system operations and administration<br>• Provide input in the development of high level requirements<br>• Final approval of any change request<br>• Evaluate, select, procure, and install management tools<br>• Develop implementation strategy<br>• Develop transition phase<br>• Develop downtime procedures and disaster recovery plan |

### 3.0  Key Assumptions

The following key assumptions are made about the LMS system implementation:

- Culture and Leadership

  o The LMS initiative has sufficient administration and leadership support to be successful. The leadership of the hospital recognizes the value of the system and strategic importance in patient care improvement initiatives.
  o The selected LMS and vendor will be a good fit for our organization and there will be minimal overall resistance to the implementation of an electronic LMS.
  o The LMS with integrate with and further enhance the learning culture of RMC.
  o Long-term viability of vendor's business will be adequately assessed and a determination of the need for source code escrow should be made before moving forward.

- Resources

  - End-user training can be delivered in a recorded web conference and made available to end-users at a time convenient for them.
  - Key resource allocations and team members will not conflict with the EHR implementation also in progress.
  - The vendor will provide a set of templates for system testing and recommended hospital's policies and procedures for using and maintaining the system.
  - The vendor will supply sufficient on-site technical support during implementation and go-live and will be available for 24 hour support afterwards.

- Technical

  - Existing network infrastructure and desktop PC environment (web browser versions, etc.) can support the selected LMS without hardware upgrades, operating system updates, or additional hidden software charges.
  - Sufficient PC workstations exist to support access to the system by all users.
  - Historical paper-based data can be import into the system in a timely manner that makes the data usable.
  - Vendor will provide sufficient training and technical support to implement the system in a timely manner.
  - System performance (responsiveness) will be adequate to use the system based on existing connectivity bandwidth and other factors.
  - Vendor's service-level-agreement (SLA) will be a critical component. 3 reference accounts that have been using the system for over 1 year are needed and will be contacted to review their experiences with the system.

## 4.0  Risks

*TODO: Risks should be statements – not questions*

- Will vendor host the system on a common platform with other customers?  Will upgrades occur across all customers simultaneously, or will the hospital's system be isolated and upgradable on its own schedule?

- What is the impact on available internet bandwidth on the system?  What are the bandwidth requirements?  Does the vendor perform sufficient system monitoring to know that they have adequate bandwidth to their hosting environment to support access?

- Has the vendor performed a risk analysis on the system, such as FMEA or similar?  Does the vendor have a risk management plan?

- Does the vendor provide on-going, real-time monitoring of the system in order to proactively detect and address system issues?

- Does the vendor follow an internal Quality Management System with respect to system development and testing?

- Lack of buy-in from department heads, staff members and key decision makers
- EMR implementation will take up too many key resources
- Proposed mitigation strategy will include weekly meetings including decision makers (CNO, CIO, HR, Clinical Lead) and project managers (from both RMC and HCLMS) to discuss and assess if new test plans and resources need to be updated to meet the most current demands.

## 5.0  Scope of Work

The scope of this project is to acquire, install and implement an electronic LMS for a minimum of 5000 concurrent licenses for hospital staff members given the authority to monitor and track employee continuing education requirements. The LMS vendor (HCLMS) will provide training, implementation, post-live training, support and documentation for JCAHO accredited requirements to achieve a "satisfactory" rating and to pass any planned or unplanned audits.

The LMS will be installed and implemented by HCLMS on a server purchased and owned by RMC and located on the premises of RMC.  It will meet all the technology infrastructure standards provided by the CIO.

RMC will use existing staff members who have experience and or exposure and no experience or exposure to an LMS, to be a part of the project planning and testing as well as a hired experienced outsourced individual (s) who have experience in JCAHO accreditation standards.

Our approach to implementation will be a "phased" approach which will provide a more seamless implementation to our existing workflow.  This will help mitigate negative impact to daily tasks and activities of the staff members. The phased approach implementation will be broken down into Phase I, Phase II and Phase III.  The projected start date is 11/5/12 ending 02/01/13.

The scope of the contract is to obtain a web based SaaS LMS application with licenses for a minimum of 1000 concurrent users.  All application design, training, implementation, post implementation, and documentation will be provided by Healthcare LMS. This will allow RMC to plan, implement, and assess continuing education requirements for all employees.

## 5.1 Inclusions

- Project management and oversight throughout the project, including a development, maintenance, and approval of detailed project plan (Microsoft Project, or similar).

- Provision of software server environment (virtual) to host the system, and installation of all software components.
- Remote training of system administrators and super users, via online web conference.
- Development of 3 training content modules, to be determined at the start of the project.
- System documentation, described below.

| Task | Resource | Location |
|------|----------|----------|
| Design learning modules, content, and evaluation method | RMC – Chief of Medical Staff, Human Resource Manager, Compliance Officer | RMC |
| Consolidate continuing education initiatives on a scalable web-based platform | Healthcare LMS | Remotely and at RMC |
| Install LMS application on all workstations | Healthcare LMS | RMC |
| Upload previous continuing education records to the LMS | RMC – Human Resource Manager, Compliance Officer | RMC |
| Communication, education, and training for end users | Healthcare LMS to train super users at RMC. RMC will handle training of staff | RMC |
| Implementation of LMS | Healthcare LMS | RMC |
| On/Off site technical support | Healthcare LMS | Remotely and at RMC |
| Develop a monitoring program and notification system of non-compliance | RMC - Human Resource Manager, Compliance Officer will design the system. Healthcare LMS will design the technical aspects. | Remotely and at RMC |
| Develop a retrieval process that can search for completed continuing education certifications in a timely and consistent fashion | Healthcare LMS | Remotely |

| | Task | Assigned To | Start | End | Dur | % | Nov | Dec | Jan | Feb |
|---|---|---|---|---|---|---|---|---|---|---|
| | Phased Approach LMS Implementation | HCLMS | 11/5/12 | 2/1/13 | 61 | | | | | |
| 1 | Phase I – Customization, Adding Logins, Users, Passwords, Templates | HCLMS | 11/5/12 | 11/16/12 | 10 | | | | | |
| 2 | Phase I – Build Testing Plans | HCLMS and RMC | 11/19/12 | 11/30/12 | 9 | | | | | |
| 3 | Phase I – Train the Trainer | HCLMS | 12/3/12 | 12/7/12 | 5 | | | | | |
| 4 | Phase I – Train group 1 ( champion team on system use) | HCLMS | 12/17/12 | 12/21/12 | 5 | | | | | |
| 5 | Phase II – Train group 2 | HCLMS | 1/7/13 | 1/11/13 | 5 | | | | | |
| 6 | Phase III – Train group 3 | HCLMS | 1/28/13 | 2/1/13 | 5 | | | | | |

## 5.2 Exclusions

- Development of additional content modules are beyond the scope of this proposal.

Accessing the LMS from outside the RMC network is not in the scope of the project. An employee must use a VPN account to utilize the LMS while off site. Integrating the LMS with regulatory agencies is not within scope.

## 5.3 Deliverables

- Access to the fully operational system software environment.
- Access to all system documentation and manuals.
- Template policies and procedures for the hospital's use of the system.
- Template system acceptance test plan for the hospital's use during system testing.
- Access to vendor's security management, risk management, system development and quality plans.
- Access to vendor's SAS70 / SSAE16 audit results for hosted environment.

| Key Deliverable | Responsibility | Acceptance Criteria | Approval Required |
|---|---|---|---|
| Statement of work | RMC project manager | Must use SOW templates | CNO |

| Business Requirements Document | CIO, CNO, Clinical Lead | | RMC Project Manager |
|---|---|---|---|
| Design Specifications | CIO | Must adhere to existing technology infrastructure | Approved by key decision makers (CEO, CNO, Clinical Lead, HR) |
| Installed LMS | HCLMS implementation team | Must meet all requirements as mentioned in the project schedule and any other pertinent items agreed upon between RMC project team and HCLMS | RMC Project Manager |
| Project Status Report | HCLMS Project Manager | | RMC Project Manager |

| Deliverable | Quantity | Progress Reports | Completion Date |
|---|---|---|---|
| Learning modules and content | 100 continuing education modules | Bi-weekly status reports | 6 weeks prior to go live date |
| Evaluation Methods | 100 continuing education evaluation methods or tests | Bi-weekly status reports | 6 weeks prior to go live date |
| Installation of LMS on all work stations | 750 workstations | Monthly status reports | 2 weeks prior to go live date |
| Consolidate continuing education initiatives on a scalable web-based platform | 100 continuing education modules | Bi-weekly status reports | 6 weeks prior to go live date |
| Training sessions | 150 training sessions for all employees | Monthly status reports | 2 weeks prior to go live date |
| Testing documents and scripts | 50 testing scripts and test cases | Bi-weekly status reports | 6 weeks prior to go live date |
| Retrieval Process | Ability to retrieve and print out all documentation | Bi-weekly status reports | Functionality tested 2 weeks prior to go live. Post live to prove concept after 4 weeks of LMS use. |
| Implementation of LMS | Convert all continuing education processes to | Weekly status reports | During go live |

| | | | |
|---|---|---|---|
| | the LMS | | |
| Concurrent user sessions | 1000 concurrent user sessions | Bi-weekly status reports | 4 weeks prior to go live date |
| Upload all previous continuing education credits to LMS | All employee records will be uploaded prior to go live | Bi-weekly status reports | 4 weeks prior to go live date |
| Continuing education policies and procedures | All compliance, security, and privacy policies for the LMS | Bi-weekly status reports | 6 weeks prior to go live date |
| Performance testing | 25 performance tests including usability, user satisfaction, and speed of application | Bi-weekly status reports | 4 weeks prior to go live date |

## 5.4 Milestones

- Project Kick-Off (within 60 days of contract approval)
- System installation
- System administrator training
- System configuration
- Content module development
- Acceptance testing
- End-user training
- Go-live (within 90 days of project start)
- Monitoring and support
- 30 day follow-up (30 days after go-live)

| Milestone | Target Percent | Target Completion Date |
|---|---|---|
| Continuing education learning modules content | 50% modules complete | |
| Continuing education learning modules evaluation process | 50% completion | |
| Conversion to web-based platforms | 50% conversion | |
| Installation of LMS on workstations | 50% installation | |
| Concurrent user sessions | 500 concurrent sessions | |
| Training sessions | 50% employees trained and educated on LMS | |

## 6.0 Work Approach

- This project will use the PMBOK (Project Management Body of Knowledge) based methodology, where applicable.

- Project status updates will be provided in writing at least bi-weekly.
- Project management status meetings will occur at least bi-weekly, and more frequently as needed.

## 7.0 Completion Criteria and Final Acceptance Criteria

### 7.1 Completion Criteria

- Project completion will require that all project milestones have been completed.
- Project completion will require that the system acceptance testing has been completed with passing results.
- All issues and questions that arise during the installation and implementation will be documented in an issue tracking tool.  Project completion will require that all open issues have been reviewed, resolved, and accepted.

### 7.2 Final Acceptance

- Final acceptance will be based on demonstrated evidence that all documented requirements stated in the System Requirements in section 1.3 have been met.

## 8.0  Schedule

The overall project status will be tracked using the schedule below. Progress will be defined by three colors.

Green = Task is on target for completion date.

Yellow = Task is in jeopardy of falling behind completion date.

Red = Task is behind and is not scheduled to be completed on time.

Any changes to the project plan and schedule will be made in writing, and approved by the project team.

| Task Description | Milestone Parameter | Progress/Percent Complete | Estimated Completion Date | Actual Completion Date |
|---|---|---|---|---|
| **System configuration** | 50% LMS Configuration | | | |
| **Installation of software components** | 50% Installation on hospital wide work stations | | | |
| **Content module development** | 50% Module Development | | | |
| **Conversion of modules to web-** | 50% of Modules available online | | | |

| Task Description | Milestone Parameter | Progress/Per cent Complete | Estimated Completion Date | Actual Completion Date |
|---|---|---|---|---|
| **based platform** | | | | |
| **Develop three training modules on the LMS** | 75% of Training modules complete | | | |
| **Super-User training** | 50% of super-users trained | | | |
| **End-User training** | 50% of end-users trained | | | |
| **Uploading previous continuing education credits** | 50% of data uploaded | | | |
| **Security and privacy polices** | 75% compliance with security and privacy polices | | | |

## 9.0  Project Management

A project manager will be assigned to initiate, plan, execute, monitor, control, and complete the implementation of the LMS. The contractor's project manager will provide a detailed project plan at the start of the project, including all milestones.  A bi-weekly project status report covering the following areas will be required.

- System configuration
- Installation of software components
- Content module development
- Conversion of modules to a web-based platform
- Development of training modules
- Super-user training
- End-user training
- Uploading previous continuing education data into the LMS
- Security and privacy policies and procedures
- Communication plan and documentation
- Testing documents, scripts, and results
- Performance testing results
- Implementation status

A Gantt chart will be utilized to display the various tasks with projected completion dates.  This will be reviewed during a weekly meeting with the project team and stakeholders.  The project manager will listen to change request and have the final approval decision.  The following team members are responsible for providing weekly reports to the project manager.

| Report | Responsible Team Member |
|---|---|
| **System configuration** | Vendor |

| | |
|---|---|
| **Installation of software components** | Vendor |
| **Content module development** | Compliance Officer |
| **Conversion of modules to a web-based platform** | Vendor |
| **Development of training modules** | Vendor |
| **Super-user training** | Vendor |
| **End-user training** | Education Officer |
| **Uploading previous continuing education data into the LMS** | Human Resource Manager |
| **Security and privacy policies and procedures** | Risk Management Officer |
| **Communication plan and documentation** | Chief of Medical Staff |
| **Testing documents, scripts, and results** | Quality Assurance Officer |
| **Performance testing results** | Quality Assurance Officer |
| **Implementation status** | Vendor |

## 10.0 Relevant Organizational Policies Standards, Supported Software and Computing Environment

See section 1.3 (objectives and requirements) for required standards and detailed computing environment requirements.

## 11.0  Timeline and Period of Performance

The period of performance for this project will start within 60 days of the execution of the contract and SOW and the work tasks are estimated to continue through 90 days following start of the project.  The Organization has the right to extend or terminate this SOW at its sole discretion.

## 12.0  Compensation and Payment Schedule

Regional Medical Center shall pay Contractor an amount not to exceed two hundred thousand dollars for the performance of all activities necessary for or incidental to the performance of work set forth in this SOW. Contractor's compensation for services rendered shall be based on Contractor's Prices as set forth in this section defining the staff and hourly rate plus expected hours per component of the project as follows.

| Position | Rate per hour |
|---|---|
| **System administrator** | $250 per hour |
| **System Analyst** | $100 per hour |
| **Quality Assurance Analyst** | $75 per hour |
| **Training Personnel** | $50 per hour |

**Implementation and Conversion**

| | |
|---|---|
| Conversion of data | 75,000 less 20% for holdback |

| Training | 25,000 less 20% for holdback |
|---|---|
| Implementation | 100,000 less 20% for holdback |

| Phase/Task | Hours per task | Upon Completion of Milestone/Deliverable | Percent Payment per Phase |
|---|---|---|---|
| **Conversion of data**<br>**A. System configuration**<br>**B. Conversion of modules to web-based platform**<br>**C. Upload previous data** | System Administrator<br>A.      50<br>B.      25<br>C.      5<br>System Analyst<br>A.      200<br>B.      150<br>C.      150<br>Quality Assurance Analyst<br>A.      55<br>B.      55<br>C.      55<br><br>Total Hours: 745 | A.      50% configuration<br>         100% configuration<br>B.      50% conversion of data<br>         100% conversion of data<br>C.      50% data uploaded<br>         100% data uploaded | A.      15%<br>         15%<br>B.      15%<br>         25%<br>C.      15%<br>         15% |
| **Training**<br>**A. Develop training modules**<br>**B. Super-user training**<br>**C. End-user training** | System Administrator<br>A.      20<br>B.      8<br>C.      8<br>Training Personnel<br>A.      40<br>B.      140<br>C.      140<br><br>Total Hours: 356 | A.      50% completion<br>         100% completion<br>B.      50% completion<br>         100% completion<br>C.      50% completion<br>         100% completion | A.      15%<br>         15%<br>B.      15%<br>         15%<br>C.      15%<br>          25% |
| **Implementation**<br>**A. Installation of software components**<br>**B. Go live support** | System Administrator<br>A.      40<br>B.      40<br>System Analyst<br>A.      150<br>B.      450<br>Quality Assurance Analyst<br>A.      50<br>B.      210<br><br>Total Hours: 940 | A.      50% completion<br>         100% completion<br>B.      50% implemented<br>         100% implemented<br>6 weeks post implementation | A.      15%<br>         15%<br>B.      30%<br>         40%<br>6 weeks post implementation |

After final acceptance, the project manager will give approval to pay the holdback to the contractor.

All invoices must include detail of tasks and deliverables being billed for. All tasks and deliverables being billed for must be reviewed and accepted by the Regional Medical Center project manager prior to the approval of each invoice.

All activities are expected to take place in the greater Chicago area, thus no travel expenses are expected or authorized.

### 13.0  Miscellaneous

N/A

### 14.0  Appendices

- Appendix A: *LMS Consensus priority objectives*
- Appendix B: *LMS System Specifications document*
- Appendix C: *LMS sample project plan*
- Appendix D: *LMS system features matrix*

### Execution/Signature Blocks

In Witness Whereof, the parties hereto, having read this SOW for *[Learning Management System]* in its entirety, do agree thereto in each and every particular.

SO AGREED.                                    SO AGREED.

*[CEO, Regional Medical Center]*              [TBD]


_____              _____
Signature                                     Signature


_____              _____
Print or Type Name                            Print or Type Name

_____              _____
Title:                                        Title:

_____              _____
Date:                                         Date: