

OSHCA 2001



Open Source Acquisition Policy

- **Brian Bray**
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Panel Objectives



- Is buying open source software different?
 - Package software (COTS)
 - Turnkey systems
 - Custom software
 - In-house software

Introductions



- Brian Bray, Minoru (Spirit)
- John Fox, ICRF (OpenClinical)
- Andrew Ho, UCLA (OIO)
- Rick Marshal, VA (Vista)
- Yves Paindaveine, EC (RIS)
- Simion Pruna, RO, (BSTB)
- Chris Richardson, VA (Vista)

Evidence-Based Software



- Concept from Spirit project
- Stages:
 - Innovation stage
 - Evidence stage
 - Commercialization stage
 - Operational stage
- Vision of health care informatics future
- "Production line" for open source software

Evidence-Based Software



- **Innovation stage**
 - Innovators exchange software and ideas to build, critique, and refine software base
- **Open source benefits**
 - Innovation can move to new areas -- reinventing standard components not needed
 - everyone can innovate (not just copyright holder)
 - Innovations can be combined
 - Incremental innovation

Evidence-Based Software



- Evidence stage
 - Deployment in experimental and pilot settings close to innovation groups
 - Evaluation for clinical and cost impacts
- Open source benefits
 - Special license, payments, and legal agreements not required
 - Interior (source code) inspection and repair
 - Safer for independent groups to pilot
 - Combination of innovations at the pilot stage

Evidence-Based Software



- Commercialization stage
 - Vendors convert research results into solutions
 - Vendors become innovators for software they distribute and support providing feedback
- Open source benefits
 - Vendor neutral, simple and effective means of technology transfer
 - combine software with hardware, practices, support and infrastructure
 - local adaptation and integration
 - support close to customer

Evidence-Based Software

- Operational stage
 - Software reaches care delivery organizations
- Open source benefits
 - Increased competition
 - Increased rate of innovation
 - Lower cost
 - Lower risks related to long term viability
 - No vendor lock-in


Patient is a major beneficiary

Policy Implications



- Very different for innovators and care delivery.
- Large organisations manage innovation through internal pilots.
- Vendors are required.
- With open source, the customer chooses the policy model (eg: COTS vs Custom).

Realizing Benefits for Innovators



- Evaluate open source components on their merits
- Pay attention to licenses because your own work will be subject to the terms
- Establish an open source culture
- Participate in the community to manage dependencies
- Start small and grow into it

Realising Benefits in Care Delivery



For More Information



- Openhealthtm mailing list
 - <http://openhealth.com/en/healthcare.html>
- SPIRIT web portal
 - <http://www.euspirit.org>
- OSCHA
 - <http://www.oshca.org>