



The Health Services Authority is responsible for the provision and administration of primary and secondary levels of healthcare services and public health functions for residents of the three Cayman Islands through a 124-bed hospital on Grand Cayman, a 18-bed hospital in Cayman Brac, satellite outpatient clinic in Little Cayman and four District Health Centers on Grand Cayman offering the most comprehensive range of inpatient and outpatient services in a single health system in the Cayman Islands.

BUSINESS ANALYST – FINANCIAL

Salary range: CI\$59,349 – CI\$69,157 per annum

The Business Analyst provides support to the Financial and Administrative Applications (Registration, Scheduling, Master Patient Index, Patient Accounting and Medical Records) but may move among support groups to meet changing priorities or to gain experience through cross training.

The HSA's Information Systems section is organized into 3 main groups: Technical Services, Application Services, and Statistical Services. Applications Services is responsible for the analysis, design, building and maintenance or procurement of all applications running on the HSA's central network, including the EMR system, Cloud solutions, Patient portal, Medical Device Interfaces, Microsoft Office applications and access to Integrated Resource Information Systems (IRIS) applications. In Applications Services, 8 Business Analysts report to the Manager of Clinical and Financial Applications, who in turn reports to the Chief Information Officer. Business Analysts in the Application Services group are each responsible for specific groups of applications. The general responsibilities, qualifications and experience required are similar irrespective of the group, although the detailed skill set may vary (e.g. EMR Vendor AR skills, EMR Vendor Laboratory skills, Microsoft Office skills, Intranet, Web Hosting etc).

Primary Responsibilities:

Provide support to Electronic Medical Record (EMR) users which includes, but not limited to Registration, Scheduling, Charge Service, Master Patient Index, Patient Accounting and Medical Records. This support includes the Helpdesk function, ensuring that all requests for assistance, whether for guidance in usage of EHR or any of its extensions, for set-up of new features/functionality, for informal training. Ensuring that requests for assistance are properly logged in the Information Systems problem logging system, are assigned, and responded to in a timely manner, and that the solution is well documented for later reference. Participate in the implementation, upgrade and testing of the various EHR modules or other Business Applications as assigned, and in any other implementations of EHR related applications that maybe requested and approved by CIO or the Manager of Clinical and Financial Applications. Analyze current and proposed processes and procedures using available standards, methods, and tools to recommend and implement improvements. Coordination of the training of end users to make effective use of the system tools as they relate to the use of the EMR software. This may include new user training, refresher courses and enhancement training in written, electronic and/or classroom format. Maintenance and monitoring of the applications to ensure optimal functioning and trouble shooting. This may include audits of the systems and outputs. Continued education to remain current on applications and aware of product improvements and new recommendations.

Qualifications and Experience:

Possess a Bachelor's degree preferably in a, medical related field, with a minimum of 3 years post-graduate experience OR more mature entrants should possess 8 years of relevant experience and present evidence of an aptitude for analysis and design work. Experience must be relevant to the Financial or Administrative Departments and Applications (Registration, Scheduling, Charge Services, Master Patient Index, Patient Accounting and Medical Records). Have experience working in the configuration, implementation, or support of a Hospital EMR application. Familiar with Microsoft Office Products and possess excellent planning organizational, communication and inter-personal skills and the ability to work with minimum supervision while keeping tight deadlines.

Must achieve a high level of knowledge of many different aspects of how the HSA operates. Supporting over 40 sections of the HSA demands the ability to quickly access and analyze complex business needs, encompassing many disciplines and professional backgrounds. This requirement is much greater than would be considered "normal" in most organizations.

A remuneration and benefit package, commensurate with experience and qualifications will be offered to the successful candidates. If you are interested in joining our dynamic team of professionals, please forward your resume and HSA application online to: hsa.jobs@hsa.ky using PDF format.

IMPORTANT: HSA Application Forms must accompany all resumes or they will not be considered for processing.

Applications can be located with each Job Description on www.hsa.ky

Deadline for all posts: December 12, 2021

My health. My team. My choice.



Job Description – Financial Business Analyst

Job title	Business Analyst	Job Holder	<i>Open</i>
Reports to	Chief Information Officer	Section	Information Services

Background Information

The Cayman Islands Health Services Authority (“HSA”) provides and administers health care services and public health functions for residents of the Cayman Islands in accordance with the National Strategic Plan for Health.

Services are delivered primarily through the 124-beds at the Cayman Islands Hospital (the country’s principal health care facility), and the 18-beds at the Faith Hospital on Cayman Brac. Ancillary services are offered at district health centres, and clinics for dental and ophthalmologic care. Residents of Little Cayman can access care through the island’s clinic, which is a purpose-built facility.

The HSA's Information Systems section is organized into 3 main groups: Technical Services, Application Services, and Statistical Services. Applications Services is responsible for the analysis, design, building and maintenance or procurement of all applications running on the HSA's central network, including the EMR system, Cloud solutions, Patient portal, Medical Device Interfaces, Microsoft Office applications and access to Integrated Resource Information Systems (IRIS) applications. In Applications Services, 8 Business Analysts report to the Manager of Clinical and Financial Applications, who in turn reports to the Chief Information Officer.

Business Analysts in the Application Services group are each responsible for specific groups of applications. The general responsibilities, qualifications and experience required are similar irrespective of the group, although the detailed skill set may vary (e.g. EMR Vendor AR skills, EMR Vendor Laboratory skills, Microsoft Office skills, Intranet, Web Hosting etc.) The post holder is assigned to support the Financial and Administrative Applications (Registration, Scheduling, Master Patient Index, Patient Accounting and Medical Records) but may move among support groups to meet changing priorities or to gain experience through cross training.

Job Purpose

The post-holder must analyze, define, design, test, deliver, modify, maintain and support the development and implementation of HSA applications this is to include but not limited to the Electronic Medical Record (EMR) Application. This should meet the identified simple and complex business needs of the Health Services Authority (HSA), utilizing the necessary resources and skills, within agreed parameters of cost, timescales and quality.

To coordinate and provide ongoing training to users on the Business Applications, and as necessary create and update training and user manuals. To provide Helpdesk support for the Business Applications.

In co-ordination with the main HSA Information Systems Helpdesk, and when necessary contact Application Vendors support to find solutions to user problems and system faults. To provide documentation on all problems and solutions.

Dimensions

Our current EMR, is an integrated hospital information management system including Registration, Scheduling, Charge Services, Master Patient Index, Patient Accounting, Order Entry, Inpatient Management, Clinical Documentation, Laboratory, Radiology, Pharmacy and Medical Records.

There are approximately 500 users of the EMR throughout the HSA.

Each Financial Business Analyst is assigned a specific group of Financial/Administrative Applications within the EMR, for which they are responsible, this will include, but not limited to Registration, Scheduling, Charge Service, Master Patient Index, Patient Accounting and Medical Records. While cross training between Business Analysts will take place, the post holder will have primary responsibility for supporting their assigned application group.

As new applications are included in the EMR or other systems, the role of each Financial Business Analyst will expand lending support.

Financial Business Analyst may be required to be on call outside the normal 8:30am – 5:00pm working hours.

Duties and responsibilities

- 30% Provide support to Electronic Medical Record (EMR) users. This support includes the Helpdesk function, ensuring that all requests for assistance, whether for guidance in usage of EMR or any of its extensions, for set-up of new features/functionality, for informal training.
- 15% Correction of software defects, are handled promptly and effectively. Ensuring that requests for assistance are properly logged in the Information Systems problem logging system, are assigned and responded to in a timely manner, and that the solution is well documented for later reference.

Contact Software Vendor to create a logged service request when necessary to resolve problems with the EMR software, and following up until the problem has been resolved satisfactorily and the service request is closed. All calls to EMR Vendor must be properly documented for later reference. Coordinate the download of software service packs from EMR, and once applied, ensure such patches are thoroughly tested prior to having them applied to the production environment.
- 15% Participate in the implementation, upgrade and testing of the various EMR modules or other Business Applications as assigned, and in any other implementations of EMR related applications that may be requested, and approved by the CIO or the Manager of Clinical and Financial Applications.

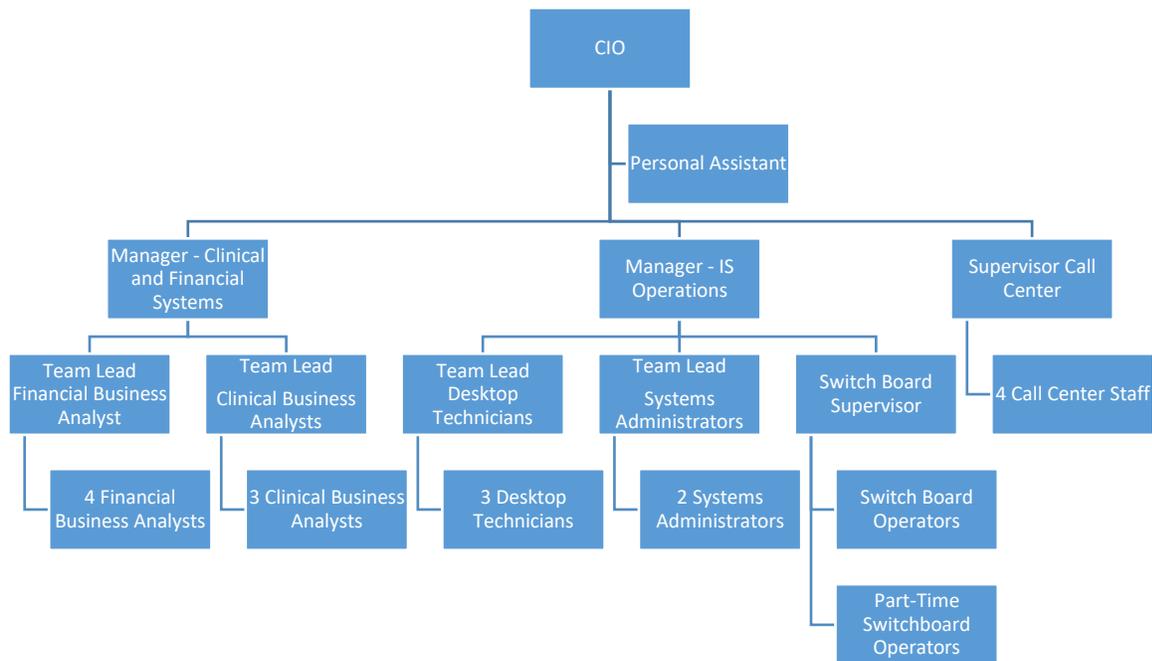
- 10% Analyze current and proposed processes and procedures using available standards, methods and tools in order to recommend and implement improvements.
- 5% Communicate efficiently with all users, offering support and advising them of changes in EMR or other business Application procedures or new features.
- 10% Coordination of the training of end users to make effective use of the system tools as they relate to the use of the EMR software. This may include new user training, refresher courses and enhancement training in written, electronic and/or classroom format.
- 10% Maintenance and monitoring of the applications to ensure optimal functioning and trouble shooting. This may include audits of the systems and outputs.
- 5% Continued education to remain current on applications and aware of product improvements and new recommendations.

Qualifications, Experience & Skills Requirement

The post-holder should:

- Possess a Bachelors degree, preferably in a business, medical or computer related field, with a minimum of 3 years post-graduate experience OR more mature entrants should possess 8 years of relevant experience and present evidence of an aptitude for analysis work. Experience must be relevant to the Financial or Administrative Departments and Applications (Registration, Scheduling, Charge Services, Master Patient Index, Patient Accounting and Medical Records).
- have experience working in the configuration, implementation or support of a Hospital EMR application.
- possess excellent planning, organizational, communication and inter-personal skills and the ability to work with minimum supervision while keeping tight deadlines.
- have a keen interest in, and aptitude for, working with computer technology and the ability to work as a team player.
- have familiarity with Microsoft Office products.
- have teaching skills and be able to present to large groups.
- Must achieve a high level of knowledge of many different aspects of how the HSA operates. Supporting over 40 sections of the HSA demands the ability to quickly access and analyze complex business needs, encompassing many disciplines and professional backgrounds. This requirement is much greater than would be considered "normal" in most organizations. There is a need to maintain high levels of professional knowledge and experience of fast changing technology, and techniques whilst being relatively isolated from professional associations, conferences, seminars, and similar events.

Reporting Relationship



Direct reports

The post holder does not directly supervise other staff, but may be designated as a Team Leader. However post-holder will be asked to lead projects which will require the leadership of groups which do not directly report to the post-holder or the IS department.

Other Working Relationships

The post holder will be required to liaise directly with HSA Information Systems staff, Chief Information Officer, nursing, physicians, the HSA Senior/Section Leadership; and vendors, notably those from our EHR Vendor. Excellent interpersonal skills and the ability to work with individuals at all levels of the institution is also essential.

Decision Making Authority and Controls

For strategic analysis and planning decisions, the post-holder's recommendations are reviewed by Manager of Clinical and Financial Applications or the Chief Information Officer. Although operating under the general day-to-day supervision of the Manager of Clinical and Financial Applications, the post-holder has authority to make decisions on his/her own work assignment, appropriate problem resolution, support and training issues, within the constraints of the project's standards and his/her area of responsibility. Post holder must adhere to change management procedure as stipulated by H.S.A, however recommendations can have significant impact in the following areas financial, patient care, employee morale and public image. In addition, the post holder is expected to interpret the strategic plan of the organization and translate that plan into an overall metrics and data analysis strategy, in conjunction with the CIO.

Working Conditions

Normal office working environment. More than 90% of the job will involve the use of the computer. Above normal use of the telephone is expected in a helpdesk setting. Long and abnormal hours are worked in order to meet tight deadlines, and to implement system changes which must sometimes be done outside normal working hours. Required to provide user support outside normal working hours on a scheduled on-call rotation.

Physical requirements

Sedentary position with repetitive use of computers. Allowing necessary breaks to attend to helpdesk request or meetings.

Problem/Key Features

Must achieve a high level of knowledge of HSA's many different business and clinical processes. Supporting over 40 sections of the HSA demands the ability to quickly assess and analyze business needs, encompassing many disciplines and professional backgrounds. This requirement is much greater than would be considered "normal" in most organizations. There is a need to maintain high levels of professional knowledge and experience of fast changing performance metrics in healthcare, and data analysis techniques while being relatively isolated from professional associations, conferences, seminars, and similar events.

Evaluation Metrics

- Number of Completed Projects
- Number of Work Orders Completed
- Positive Financial Impact of Projects
- Patient Safety Goals of Projects
- Improved Patient Outcomes achieved through Projects

Approved by:	Chief Information Officer
Date approved:	23-Nov-2017
Reviewed:	November 2020
Next Review	

