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#### Moving a Commercial Forecasting Product to Open Source

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#### STC: History



- ➤ 1988 STC founded to provide information services and proprietary products to public entities
- > 1999 Commercial forecasting product
  - » Integrated in STC's proprietary IIS product
    - ➤ Utilizes ACIP guidelines
      - » Evaluates immunization history for compliance
      - » Forecasts "Recommended, Minimum and Past Due Dates"
      - » Returns reasons an immunization does not meet administration criteria
    - ➤ Allows state specific customization through user interface
      - » Age cut off for forecasting specific vaccines
      - » Forecast future doses only after dose 1 administered
      - » Dose specific settings for minimum age or interval settings

#### STC: History



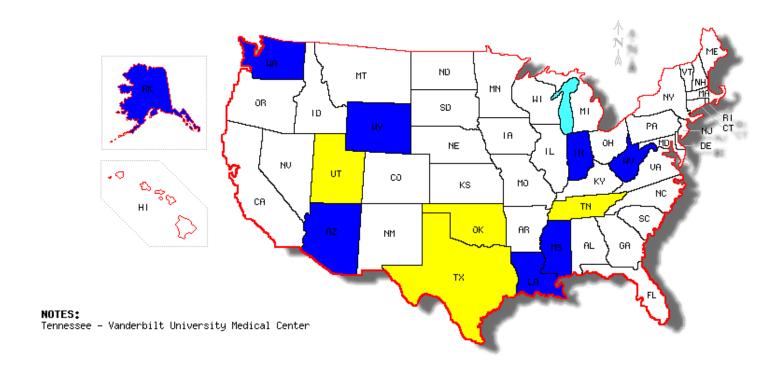
- > 2006 Stand Alone Forecaster
  - » IIS neutral
  - » Web service via SOAP messaging
  - » Available to state clients by purchasing license/client hosted or subscription web service
  - » Client consortium participation

- ➤ 2012 Open Source study with Dandelion Software and Research
  - » Evaluate Open Source licensing options
  - » Marketing opportunities

#### Consortium of Sites Using Forecaster



- IWeb Forecast
- Forecast Web Service



#### **Business Considerations**



- Why move to Open Source model?
  - » Software acquisition may be easier for public entities
    - ➤ Limited federal and state funding
    - ➤ State procurement mechanisms
  - » Increased product uptake opens doors for other business opportunities
    - ➤ 2012 Vanderbilt University Medical Center Pilot
    - ➤ Opportunities in private sector
- > Impact on current business model
  - » Potential decrease in revenue
  - » Response of existing customers

## The Open Source Move



#### Steps to move to Open Source

- » Legal: Licensing options
  - Existing published Open Source licenses
  - > Develop own product specific license
    - » Open Source to Public Health Entities
    - » Commercial product available to private entities
- » Apply for software copyright
- » "Package" software for distribution
  - ➤ Source Code
  - > Executable Code
  - **>** Documentation

## The Open Source Move



- > Develop multiple integration strategies
  - » Open Source without vendor support
    - > Delayed release schedule for forecast updates
  - » Open Source with option of vendor support
    - ➤ ACIP schedule updates within 30 days of release
    - ➤ Help Desk Support and access to subject matter experts
    - > Participation in client consortium
    - ➤ Input for product enhancement through consortium
  - » Subscription based web service

#### Conclusions



- ➤ Moving to Open Source is not difficult
- Open Source requires different business strategy
  - » Where does revenue come from now?
  - » What new markets are available?
- Open Source can renew product interest
- Improved product visibility opens new market areas
- ➤ Increased product uptake may lower maintenance costs for customers who choose support

#### **DSR Role**



#### > DSR Role

- » DSR is dedicated to improving public health
- » DSR considers STC to be a critical participant in improving public health
- » DSR supports STC moving towards offering more Open Source products
- » DSR expects that by offering more open source options STC will be able to increase their support of public health goals



- ➤ Software and Business
- Open Source History
  - » Unix
  - » Free Software Foundation
  - » Open Source Initiative
- License Types
  - » Original Proprietary
  - » Copyleft, GPL Style
  - » Free as in freedom, not free as in beer
  - » Permissive



#### **>** Ownership

- » Release copyrighted software under any number and type of license
- » May charge for distribution of software
- » Enforce trademark rights
- » Determine who can contribute to the software project

## Open Source at STC



- ➤ STC acceptance of Open Source
- ➤ Technical staff has long history using open source tools and concepts:
  - » Open source technical solutions are preferred
  - » Open source development processes are preferred
  - » Proprietary applications have been avoided if possible
  - » Many STC technical staff are proponents of open source

## Open Source at STC



- >STC is offering open source because:
  - » Public health is by nature collaborative and fits well with open source
  - » Open source presents new marketing opportunities
  - » Reduces risk of investing in obsolete technology



- ➤ 1969: Unix Bell Labs
- Bell Laboratories
- » Originally distributed at a nearly free cost
- » Users would make local changes and improvements
- » Eventually Unix was commercialized and locked down
- ➤ 1983: Free Software Foundation (FSF)
  - » Richard Stallman began writing OS
  - » Advocated for full user control
  - » Movement eventually created Linux
- ➤ 1998: Open Source Initiative (OSI)
  - » Practical instead of philosophical
  - » New term "Open" instead of "Free"





- General License Types
  - » Original Proprietary
  - » Copyleft, GPL Style
  - » Open Source Permissive
- Popular Examples
  - » Apache License 2.0
  - » BSD 3-Clause "New" or "Revised" license
  - » BSD 2-Clause "Simplified" or "FreeBSD" license
  - » GNU General Public License (GPL)
  - » GNU Library or "Lesser" General Public License (LGPL)
  - » MIT license
  - » Mozilla Public License 2.0
  - » Common Development and Distribution License
  - » Eclipse Public License

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#### ➤ Ownership

- » All open source software must be owned
- » Owner may release copyrighted software under any number and any type of licenses including free, open, or proprietary
- » The owner or any user may charge for distribution of software
- » Owner can continue to enforce trademark rights
- » Owner can determine who can contribute to the original software project



- ➤ Cost of Open Source Software
  - » Open software itself is often free or inexpensive
  - » Installation, configuration, improvements, changes, training have a definite cost
  - » Proprietary solutions are often packages
    - ➤ Straight forward cost structure
    - ➤ Additional "free" benefits with software purchases
  - » Open solutions require extra support
    - ➤ Vendor or client can manage
  - » Free software does not translate to no cost



- ➤ Open Source can reduce cost
  - » Cost reductions can be achieved by:
    - ➤ Investing in efficient software architecture
    - > Focusing on economies of scale
    - Leveraging software for multiple uses
    - ➤ Maintaining legacy software
    - Bridging gaps in unsteady funding
  - » Good product management reduces costs
    - Software vendor can lead this
    - Community can lead this



- Open Source matches Public Health environment
  - » Works best with collaborative support
  - » Supports community sharing
  - » Works well under unpredictable funding streams
  - » Well suited for niche applications
- ➤ Open Source is not a panacea
  - » Shifts overall responsibility for software application towards user community

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#### Conclusion



- Open Source software can help build strong working relationships between public health agencies and their software vendors
- Open Source software can allow public health agencies to better cooperate
- Open Source software can help our community reach our goals