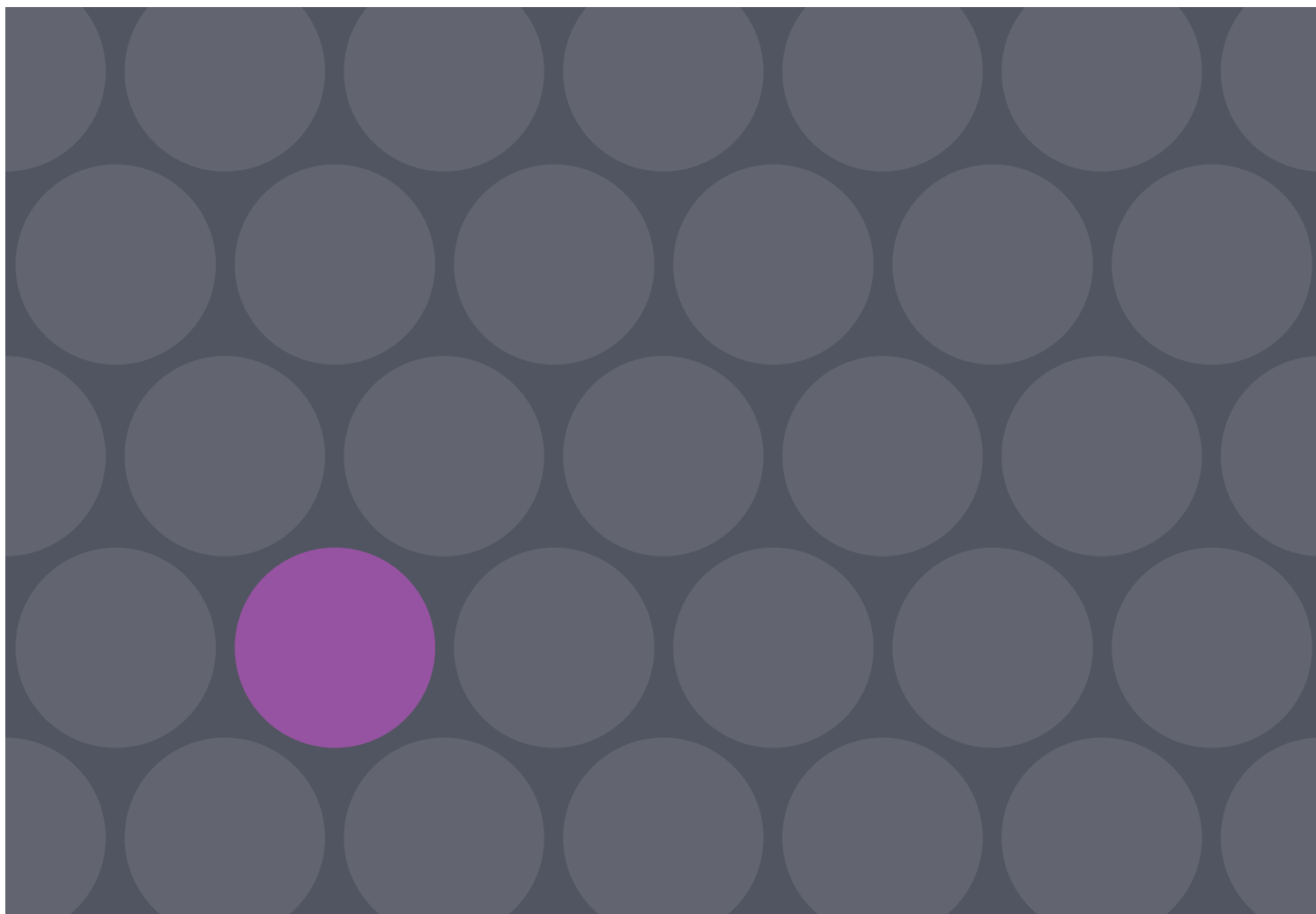


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PROCEEDINGS

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Agile development and public private partnering solving the problem of non-patient, urgent and emergency messaging to community providers

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1. Waitemata District Health Board
2. Healthpoint

INTRODUCTION

Waitemata District Health Board (DHB) has been working with Healthpoint Ltd to develop a cloud-based communication platform to improve communication of non-patient clinical information from the DHB, and other health organisations, to primary care health providers (including general practices, Urgent Care Centres, community pharmacies, NGOs and other community based health service providers). This is currently a challenge for Waitemata DHB and other health providers within the Region in communicating emergency and urgent messages. Currently Waitemata DHB channels urgent messages through an automated fax system and Primary Health Organisations (PHOs) while non-urgent messages are distributed through the PHOs or published in the monthly Primary Care Newsletter. Unfortunately, key messages do not always meet target groups in an effective or timely manner. In addition, the DHB is not always able to confirm that a message has been received or read.

USE OF TECHNOLOGY AND/OR INFORMATION

With the support of Waitemata DHB, Healthpoint Limited developed the cloud-based communication platform. It enables health organisations, like DHBs, to publish and push key messages to primary care providers ('Recipients') using a variety of methods depending on clinical risk and recipients' preferences. The platform has been designed to enable additional groups of providers, like NGOs, to be added as 'Recipients' at a later stage. 'Publishers' such as PHOs, Pharmac, ACC and MOH can also be brought into the platform.

IMPLEMENTATION/PROCESSES

The solution was developed by Healthpoint in consultation with Medtech, MyPractice, Healthlink, Vodafone, ARPHS, Labtests and supported by Waitemata DHB in a successful public private partnership. The project used the lean, agile development process. Over 40 workshops, interviews, meetings were held between January – June 2017 with primary care, publishers and key stakeholders where hypotheses were presented and assumptions tested. IP and an API enabling data and processes which are currently available in the Healthpoint directory has been utilised by the platform. This optimising speed of development, implementation and activity.

CONCLUSION

WDHB and potentially the other 3 Northern DHBs will be utilising this technology from the mid August 2017 for emergency and non-urgent clinically relevant messages. Benefits of the project are: • Reduced organisational and patient risk as key messages can be directly communicated to nominated parties within specified timeframes; • 'Recipient' workloads are reduced via the platform prioritising messages (same hour, same day, same week) and reducing message duplication. Lessons learnt, themes: How private/public partnering can support innovation and implementation. Advantages of agile development processes. Innovation lead by customer values and needs.

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