

NZ Vision for Health Technology

The Vision for Health Technology outlines how we see technology shaping the way New Zealanders 'live well, stay well and get well' in 2026.





NZ Vision for Health Technology

The world of technology is advancing rapidly and affecting many aspects of our daily lives such as the way we shop, bank and travel. Health services are also being transformed by emerging technologies, changing what, how, where and when services are provided, as well as who provides them.





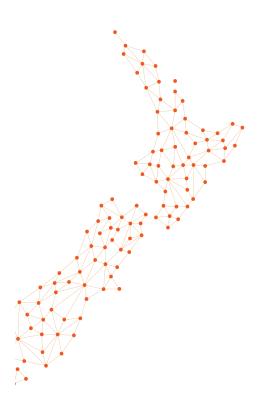
Technology is revolutionising health systems. Robots and other automated systems are carrying out repetitive and predictable processes, advanced analytics are providing new insights into complex health problems, and research breakthroughs in human science are making 'personalised medicine' a reality for more and more people.

New Zealand Health Strategy

The Vision for Health Technology underpins the New Zealand Health Strategy 2016, which sets the direction our health and disability services need to take into the future. The Vision outlines how we see technology shaping the way New Zealanders 'live well, stay well and get well' in 2026.







Development of the Vision

The Vision for Health Technology has been developed with engagement from more than 70 health professionals and consumers. Workshops were held in Auckland, Wellington and Christchurch over four weeks in April 2017, supported by online discussions. Content for the vision was then created and themes were defined.

This is a 'living' Vision that will be refined and adapted over time in response to changing needs and emerging technology, as well as feedback from stakeholders.

The Vision will guide the development of the Ministry's Digital Health Strategy and technology strategies by the sector.

The Vision: Nine Themes

Life centred	VALUE A HIGH PERFORMANCE Sustained change & innovation	Collaborative care
Informed choice	VALUE A HIGH PERFORMANCE Value for NZ	Closer to me
Responsive, predictive, personalised	Actionable insights	Accessible, trusted information



Life centred

Technology empowers people to flourish by fully participating in their health care.

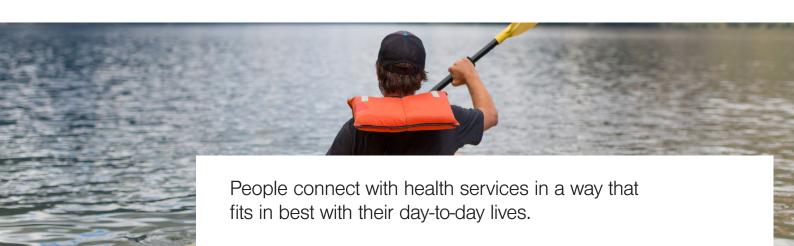




New Zealanders are 'health smart' - they have access to, and understand, all the health information they need.



Health (traditional and non-traditional), social and other support services and information are integrated with a person's circle of care.





Informed choice

People make informed choices about the health and social services that work best for them and have access to information to help them make those choices.





People have full access to their own health information and control over who else can access it.





People can choose services based on convenience and cost.

Health services are more convenient with 'virtual' options available to all New Zealanders through a range of technologies.





Closer to me

Care is provided closer to where people live, learn, work and play.





Investment in health services does not create inequity for those who use them.



Confidence

Better access

Better access to technology removes isolation as people and communities are more connected.

New Zealanders have confidence that they can access the best value care and technology.





Sustained change & innovation

We take advantage of opportunities offered by new and emerging technologies. These technologies are improving the health services available and enabling New Zealanders to live well.





A digitally capable and enabled workforce is embracing the use of technology which impacts positively on the way people live, work and play.

The sector is enabled and has incentive to:





Support different and flexible health services.

Maximise the use of technology.



We discover, develop and share effective innovations across the system.

Technology change is considered in a New Zealand context so it adds value to our health services and is sustainable.



Value for NZ

Technology is improving people's experience of care, health status and best-value use of resources.





Value is measured and information is used to openly drive learning and decision-making that will lead to better performance.



Investment targets inequities in knowledge and education, service access, connectivity and access to technology.





Collaborative care

Health services, social and support services, whānau, communities and technology operate as a team in a high-trust system that works together with the person at the centre of care.





Use of technology optimises people's navigation of the collaborative care system and the choices they make.





Responsive, predictive, personalised

Technology responds proactively to changing needs, knows a person's preferences and anticipates their needs.



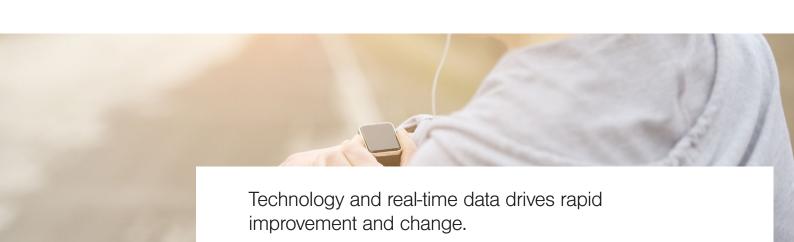


Individuals participate as full partners in their own health.

Data to personalise services

Data about individuals and their lives is used to personalise and tailor health services in a way that suits each unique individual.







Actionable insights

Data and technology improves evidence-based decisions. Health data from individuals and communities is used to inform health planning and policy and address inequities.





Real-time data from multiple health, consumer and social sources informs action, proactive monitoring, and interventions for individuals and populations.





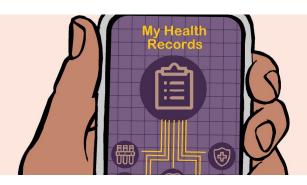
Proactive monitoring and data analysis drives continuous improvement and supports a culture of learning within health services.





Accessible trusted information

Health information is secure, reliable, accurate and accessible when, where and in the form it is needed.





People have full access to their own health information and can provide, or prohibit, access to others.

Choice of technology

A choice of technologies are available for people to access, use and contribute information in the way they want to.



Standards allow sharing of information

Standards allow technology to work together and allow us to make changes easily and efficiently. Standards allow sharing of information and drive action based on access to data, common language and shared understanding.



Looking to the future

What could digital healthcare look like in 2026? How will people interact with their doctor, nurse and other health professionals? What sort of devices and applications will be available to individuals, health professionals, researchers and innovators?













Consumer



- I feel supported to be in control of my own health using a variety of wearable and telehealth devices.
 My personal avatar can access all of my health information.
- My health care is co-ordinated by a virtual team of health professionals, all of whom have secure access to my health record.
- Access to my health information is controlled by me and audited to ensure privacy and confidentiality.
- My monitoring device alerts me early to potential health problems and the GP chatbot contacts me to discuss any abnormal readings. An appointment is automatically booked for me at my preferred time.
- My AI health care assistant provides some health information translation, such as reminding me why it is important for me to take medicine with food.
- If I am discharged from hospital, the community supports I need are automatically put in place by my multi-agency care team, which is alerted in real-time about my changing requirements.
- If I live remotely, my care is delivered virtually from larger centres, meaning I get the same level of care as any other New Zealander.
- Overall, I am healthier and I feel confident that my health problems are detected and addressed early.



Community nurse

- My assistant AI recalls my schedule to me as I am driven to my first appointment. This will include any change requests from my clients.
- I narrate my patient assessments into my mobile device and this is automatically loaded to the individual's care plan for everyone within their care team to see.
- Hospital specialists are alerted to my assessments by artificial intelligence software, which recommends a medication change for the patient. This is authorised by the specialist.
- Genetic testing is widespread and drives highly personalised care plans for my patients.
- Machine learning algorithms monitor my patients virtually via readings from their telemedicine and wearable devices. I am alerted to any abnormal readings and presented with a range of possible actions.
- Automated systems mean I have more time to spend with my patients.





Doctor

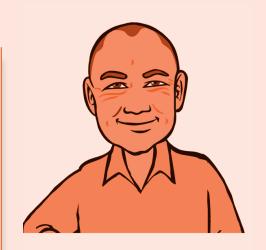


- My day is spent guiding my patients through various significant health events as their routine healthcare needs are self-managed and provided virtually at a time and place that suits them.
- Part of my day is spent in virtual clinics, which are delivered via digital technology in a patient's home, aged care facility, or elsewhere.
- My AI assistant helps me diagnose patients according to their health record and current readings being relayed from their devices.
- I order tests and investigations through my wearable device and am notified of any test and procedure results outside expected parameters.
- I prescribe via my wearable device. Prescriptions are produced by 3D printer in a dispensing facility and the medication delivered to the patient by drone.
- I have multi-functional devices, such as a handheld imaging machine, to detect abnormalities.
 This information is relayed in real-time to specialists to review if required.
- Consultation with specialists is often virtual via 3D holograms which are shared with the patient and health care team.



Innovator - developer

- I am directly connected with the consumers and providers of healthcare and wellbeing services and can hear first-hand what they want from technology. This gives greater market share to start-ups like mine that are able to be agile and make changes to suit their needs.
- My developers work in an open source environment where companies co-operate rather than compete. Health providers pay for the delivery, customisation, management and hosting of my technologies, rather than software licenses.
- All systems use approved international standards.
 Only systems that are fully interoperable are active in the market.
- The app market is consumer-driven. Consumers control their health information and can choose what systems or applications have access to their data for specific use cases. They can also choose to make their information available to developers.
- Apps can securely access information from nonhealth systems and databases of people's genetic information – either directly or via a system that brokers these connections.
- New apps are registered with an approved service, which automatically verifies that my app meets agreed requirements.





Researcher



- I have access to a wide range of anonymised datasets, with approval for research purposes given directly by the consumers who control their own data.
- The consumer-led approach to data access gives me access to a range of 'soft data' via consumers apps, giving greater insight into a population's feelings and thoughts at any given time.
- Data is collected via joined up everyday devices in real-time (e.g. cellphones, coffee makers, lamps and wearable devices), genomics, surveillance equipment and clinical records.
- My research is targeted towards solving real world problems and feeds into clinical decision support and risk stratification systems.
- With real-time data available from many sources, research is forward-looking, capturing trends and assessing their implications.
- Research projects involve creating dynamic models, rather than the old 'static snapshots'.
- I work with vulnerable populations, looking at data with them and deciding together on the best interventions.



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