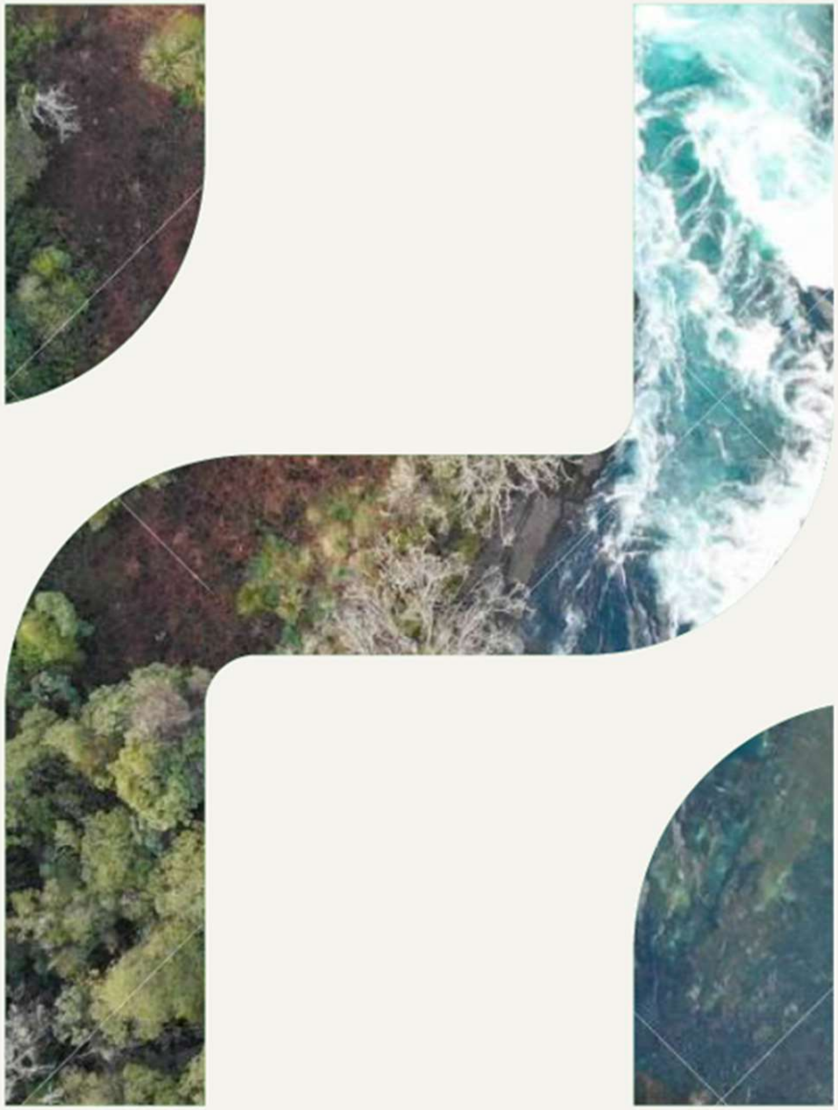

Nau mai, haere mai

Welcome to the Hira webinar for health and disability providers, clinicians and consumers

Friday 10 December 2021

HIRA

Mihi

Nau mai rā ki tēnei kaupapa whakahirahira, otirā he kaupapa hei whakapiki ake i te hauora o te tangata, o te whānau, me te iwi whānui o Aotearoa.

Ko Hira tēnei!

Welcome, let us invite you to our source of new services that will improve the health and wellbeing of our people, our whānau and our communities in New Zealand.

This is Hira!

About this webinar

- What Hira will deliver and why it’s needed
- Co-design approach
- What consumers and providers have told us so far
- Hira tranches and workstreams
- Priorities for the next 6 months
- Incorporating the clinical and consumer perspectives
- Approach to future engagement

About Hira

- Hira is a te reo Māori word that means ‘to have a significant bearing on future events; a widespread effect’
- Hira will:
  - bring together a person’s health data into a virtual electronic health record
  - put New Zealanders in control of their health data and allow them to contribute healthcare information
  - provide timely access to patient information at point of care
  - give visibility of who is working with a consumer
  - enable an equal partnership between consumers and providers
  - improve the quality and timeliness of analytic data
  - lay the foundations for a digitally enabled health system

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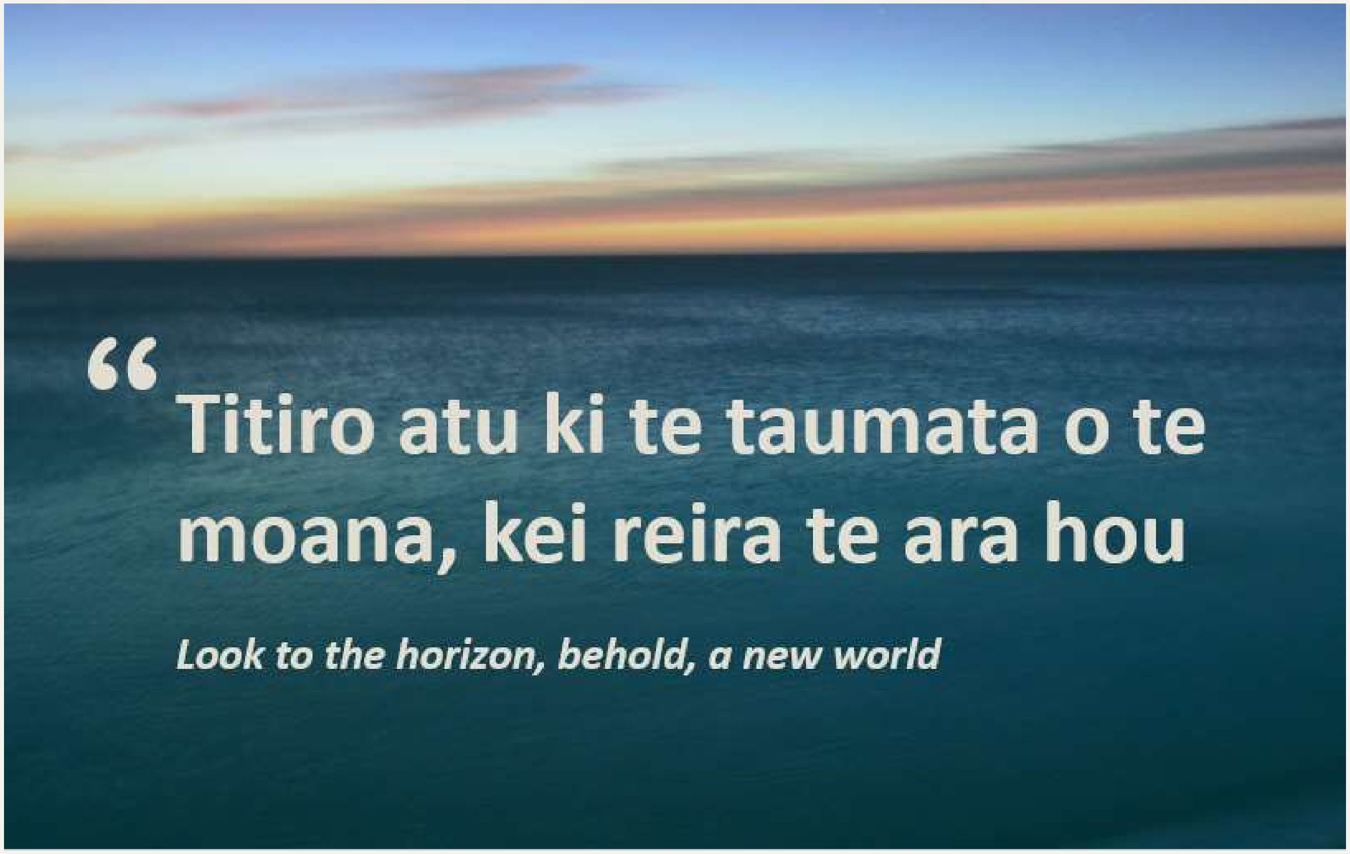
Co-design approach

To ensure Hira meets the needs of Māori and whanau, it needs to be co-designed in a way that embraces Te Ao Māori ideals and practices

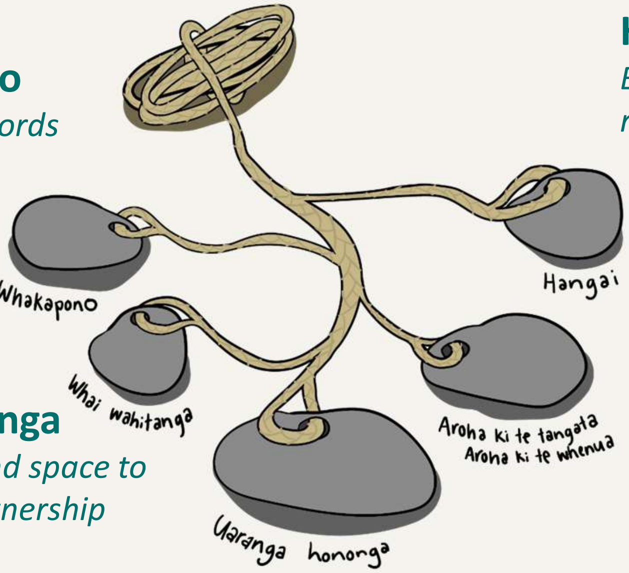


“Titiro atu ki te taumata o te moana, kei reira te ara hou

Look to the horizon, behold, a new world

Anchor stones / nga punga

Our anchor stones – or ‘nga punga’ – will hold us steady but also give us flexibility in how we work



Whakapono
Turning our words into actions

Hangai
Being reflective and responsive to what is needed

Whai wahitanga
Creating time and space to develop our partnership

Aroha ki te tangata
Aroha ki te whenua
With aroha for both tangata and whenua.

Uaranga hononga
Building trusted relationships together

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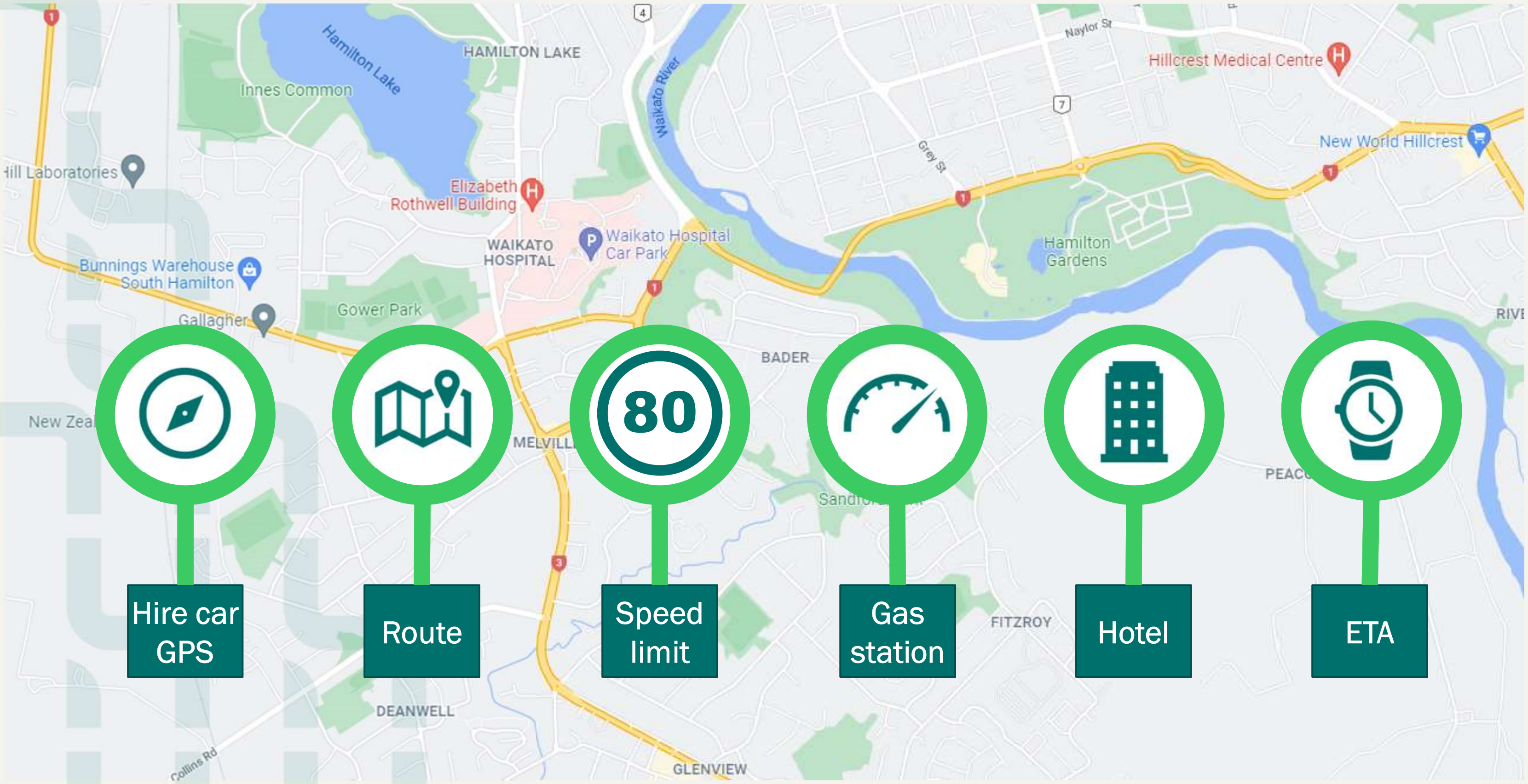
Drivers for change

"Data needs to be much more at the centre of decision making in the system, and this requires us to be much more determined about the type, standard, and relevance of the data that is collected."

H&DSR Interim Report

- Health information fragmented and difficult to access
- Lack of data standards
- Time wasted searching for information
- Lack of visibility of who is involved in a consumer's care
- Consumers unable to directly access their information
- Unclear privacy, governance, data sovereignty, social licence
- Data rich, insights poor

Enabling a future experience



Hire car GPS

Route

Speed limit

Gas station

Hotel

ETA

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Hira is

- An ecosystem of multiple solutions and technologies
- An iterative programme
- A partnership with health providers and innovators
- A market of interoperable services

Hira is not

- A centralised, all-in-one, technology solution
- A monolithic project
- A programme that ignores existing solutions
- A programme of exclusive products and services

Looking at New Zealanders' health information needs

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New Zealanders and whānau at the centre

- The Hira team has held interviews, focus groups and workshops with New Zealanders, whānau, clinicians, providers and advocates
- We are developing an understanding of:
  - how people currently interact with the health and disability system
  - what people and providers think about having a central place to view and update health information
  - how Hira can support people to better manage their health and more actively participate in healthcare decisions
  - how Hira can support providers to improve health and disability services

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What we’ve heard from New Zealanders

- Providers should have access to their health information
- Frustration at having to ‘repeat their story’ multiple times
- Want to share health information with trusted whānau and carers
- Concerns about discrimination
- Some people would like to restrict access to specific health information
- Some people need support to access online information

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What we’ve heard from practitioners

- Patient information often needs to be collated from different systems
- Practitioners want easy access to complete information wherever they are and whenever they need it
- Providers want to be able to use their current systems or a device of their choosing
- Access to complete and accurate medicines information is essential
- Emergency providers need immediate access to critical health information
- National data standards are needed

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Privacy and security are paramount

- Privacy and security-by-design approach
- Certification process overseen by Data Governance Board
- New Zealanders will be able to see:
  - where health information is held about them
  - who is authorised to access their data
- Māori data is owned by whānau, hapū and iwi
- Hira programme will help educate about data ownership and privacy

Hira personas

- We are using ‘personas’ to map out how Hira can change the way New Zealanders interact with the health and disability system
- This is helping us understand how Hira can support people to have better health and wellbeing. For example, through:
  - better access to information for consumers, clinicians and providers
  - delegating access to whānau involved in their care
  - tailoring services to meet the specific needs of individuals and whānau
  - better service integration and more self-service and telehealth options

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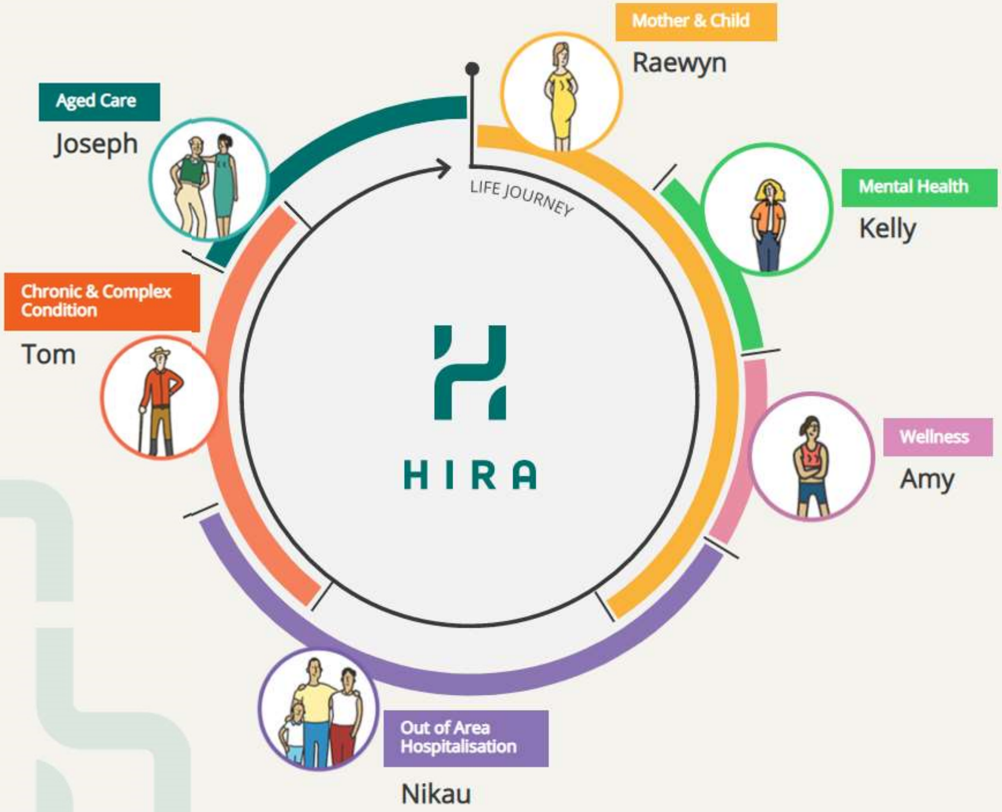
A family of personas



Persona example

Persona and backstory

Mother & Child

Raewyn

BACKSTORY

Raewyn is a Pākeha woman in her early 30's and is currently unemployed. She lives by herself in unstable accommodation after leaving her partner who was violent towards her. She has struggled with alcohol and drug addiction issues in the past, and has previously had an unplanned pregnancy which resulted in a child who her auntie looks after most of the time. Since then she has been trying to get back on her feet. After feeling nauseous for a few days Raewyn suspects that she is pregnant again and is worried about how she will cope on her own.

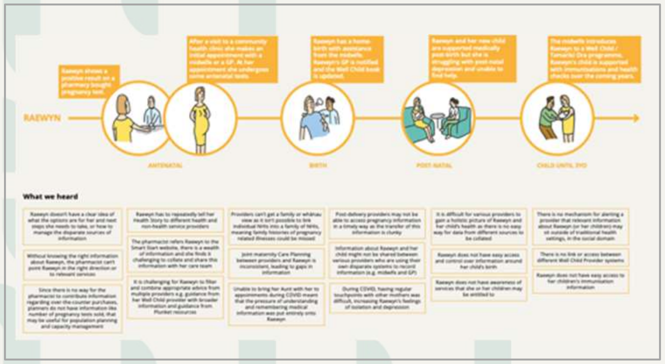
Themes explored:
Maternity, immunisations, social determinants of health, post natal depression, linking social data with health data, allied health provision, navigating complex services and providers

TOUCHPOINTS

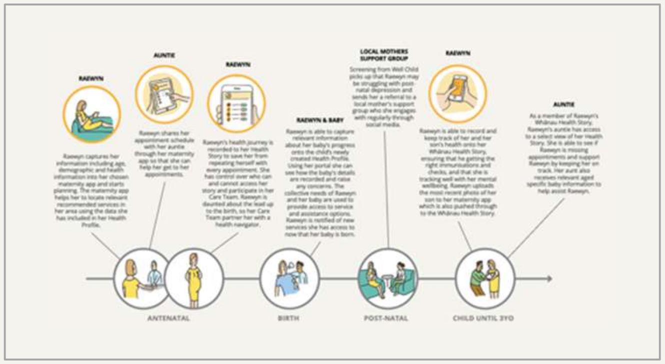
"The MCIS is a maternity record for women, but women get forgotten in that."

Provider, Interviews

Current state experience



Potential future state experience



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Question break

Hira work programme and governance

Hira milestones

Electronic Health Record proposed	2015
Govt requests PBC (nHIP)	Aug 2019
Govt endorses PBC (Hira)	Apr 2021
Govt endorses Tranche 1 DBC	Oct 2021
Tranche 1: Launch	Mid 2024
Tranche 2: Connect	Mid 2026
Tranche 3: Extend	Late 2026

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Tranche one workstreams

Data & Channels

Data Services

Create and/or aggregate data sources

Trusted Sources

Includes:
- Medicines
- Demographics
- Entitlements (CSC)
- Immunisations
- Labs and testing

Discovery includes:
- Primary care
- Entitlements
- Sector services

Data Governance

Channels

Leverage and/or consume data sources for presentation in consumer and provider services

Consumer Services
Universal access

Provider Services
Universal access

Marketplace and Developer Portal

Enablers

Deliver foundational capabilities to support delivery in Tranche 1

Operational Services

Identity
Includes access management, authorisation & preferences

Interoperability

Event Notification Service, Integration Platform

Change & Adoption

Work with stakeholders to support uptake of services

Engagement

Customer Journeys

Digital Enablement

Onboarding

Service Adoption

Literacy & Inclusion

Next six months

Change & Adoption

- Engagement
- Develop additional personas
- Resourcing and recruitment

Data & Channels

- Develop marketplace persona
- Initial marketplace/developer portal
- Initial data services
- Standards/policy/data governance

Enablers

- Operational support for initial delivery
- Digital identity extensions
- Commercial framework
- Certification/accreditation process
- Build platform core

Programme Management Office

- Governance arrangements
- Procurement process

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Delivering value

Release 1 (phased)
May 2022

Access basic patient information
Health provider information
COVID-19 immunisations and tests
My Health Account

Sector benefits

- Less need to verify information
- Access services wherever you are
- More service delivery methods
- Widen sector access to health data
- Providers can offer more services

Release 2 (phased)
June 2022

Update some patient details
Update iwi affiliation
CSC entitlements
Contact tracing

Sector benefits

- Consumers can update own data
- More reliable contact information
- Less time confirming information
- Improved ability to meet needs of specific communities
- Faster contact tracing

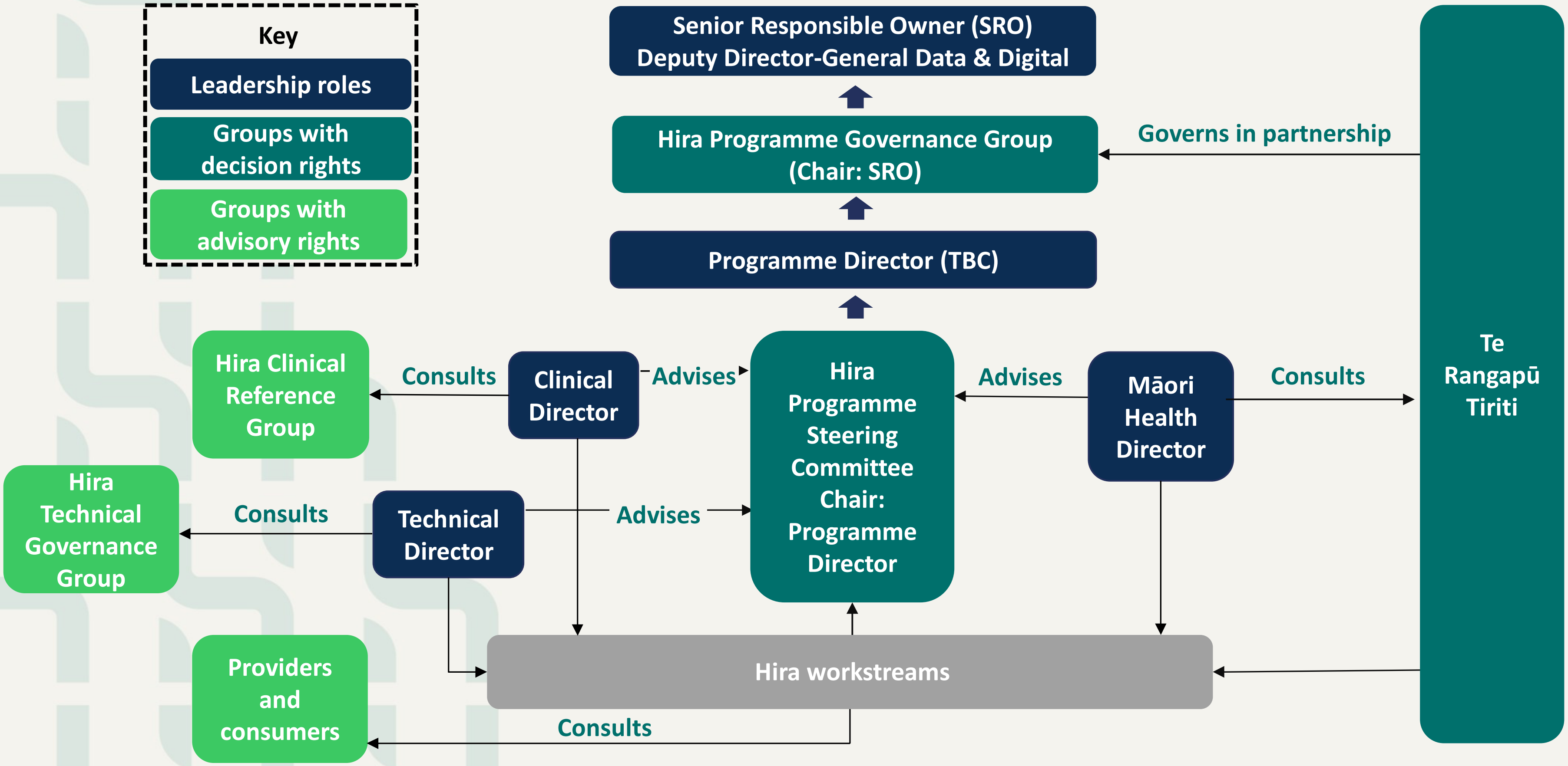
Release 3 (public)
Aug 2022

Address validation service
Clinical terminology services
Access to 3rd party services

Sector benefits

- More accurately capture and classify health information
- Better informed decision making
- Enhanced collaboration and coordination on health plans

Governance



Key

- Leadership roles
- Groups with decision rights
- Groups with advisory rights

Senior Responsible Owner (SRO)
Deputy Director-General Data & Digital

Hira Programme Governance Group
(Chair: SRO)

Programme Director (TBC)

Hira Programme Steering Committee
Chair: Programme Director

Te Rangapū Tiriti

Governs in partnership

Clinical Director

Technical Director

Māori Health Director

Hira Clinical Reference Group

Hira Technical Governance Group

Providers and consumers

Hira workstreams

Consults

Advises

Advises

Advises

Consults

Consults

Consults

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Incorporating a clinical perspective

Clinical Director (and team)

- Strategic, independent, future-focused clinical leadership
- Advocate for the clinical workforce
- Key influencing role to drive change and inspire improvements
- Leads Clinical Reference Group and will draw on additional expertise
- Focus on supporting clinical workforce to adopt Hira

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Clinical Reference Group

- 12 health practitioners with clinical expertise to guide Hira
- Multidisciplinary, diverse and inclusive membership
- Provide a voice for health practitioners and communities
- Ensure clinical relevance by:
  - developing guidance, principles, standards for content
  - advising on issues arising across the workstreams
  - working through problems to enable Hira's success

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Future engagement

Measured and Incremental

- Transparent
- Practical
- Inclusive
- Authentic

Communications and engagement aligned with Hira delivery timeframes
Building confidence and enabling constructive engagement

Rapid Rēhita online enrolment service

Problem

Barriers to enrolling with a GP include:

- **Traditional** - cost, transport and time; inefficient manual processes
- **Form** - health literacy, errors and incorrect answers
- **Hidden** - unapproachability, harder to reach populations, hesitancy

Solution

The Rapid Rēhita team designed a process to make it easy for GPs to digitise enrolments:

- Point of care provider sends link
- Patient clicks link, completes form
- Form arrives in GP inbox
- GP practice uploads form to PMS

Discussion

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