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NZ health IT director: Sharing health info is a hurdle in NZ

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Mr Graeme Osbourne led to the establishment of the National Health IT Board of New Zealand as its executive chair. He supervised the development and introduction of National Health IT Plan and is presently director of the National Health IT Board, New Zealand. Mr Osbourne speaks to BioSpectrum about the new healthcare system in New Zealand, which is being executed and delivered under his leadership. Excerpts from the interview:

What is the need of a connected healthcare plan? How will it benefit patients?
Our objective is to work towards a future where health professionals will be able to access and share health information online. This indicates that patients would receive better and safer care because their healthcare providers would have complete access to their medical history, enabling the physicians to take better treatment decisions.

Also, through this network, even the individuals will have access to their complete health information. We also guide district health boards in the process of choosing IT vendors for the project. With the new system, we aim to bring consistent healthcare support for four million people in New Zealand.

What are the challenges in implementing IT solutions at district level?
The biggest challenge is that clinicians do not have any interactions amongst themselves and are not willing to share information with each other, so it becomes a challenge to instigate new ideas, thoughts or plans consistently. We are spending a lot of time in finding hospitals that can partner with us and communicate further with clinics and hospitals boards to implement the solution.

Another challenge is lack of appropriate funding, and hence we are working with lot of domestic as well as international ICT companies in New Zealand. We are insisting on software solutions to bring solutions that can be easily implemented at district level. And the third challenge is ensuring a system that is easy enough to get implemented across the hospitals and clinics.

Is Electronic Health Record the most critical aspect of this whole interconnected healthcare system?
When we started this project in 2010, we had made it clear that electronic health record system is not the only element that the healthcare community has to think of. We are looking at an ecosystem of shared information so that people can have the choice of knowing about their treatment and physicians can consider their patients as aware. In an electronic health record, a physician can see the history of the patient, but we are looking at a system that helps patient and physicians to decide the best treatment possible.

Electronic health record is important, but not enough. If I am a clinician and I am seeing a patient for a first time, it is of great help to me to see a patient past records but it should also make you decide what are the things you want to consider to understand as individuals, and what are the things that a patient is doing that are non-medical and is helping him.

What are the concerns of individuals about sharing their private information in the ecosystem?
New Zealand has mixed population, where there are conservative as well as liberal thinkers on sharing their health information. New Zealand has legislation guidelines that clearly indicate that patient information is owned by the patient and before sharing with doctors or clinicians, their consent is mandatory. Community understanding and support of the appropriate use of the available information is very critical for the effective utilization of the resources.