



## Regional Consumer Meetings

Dunedin – 15 August 2008

### Agenda

Item	Agenda	Presenter
<i>Light refreshments on Arrival</i>		
1	<b>Welcome and Introductions</b>	Jean Park
2	<b>Housekeeping</b>	Jean Park
3	<b>Specific items around initiatives</b> <ul style="list-style-type: none"> <li>• Security of health Information</li> <li>• Electronic prescribing and dispensing of medications</li> <li>• Standardising clinical data</li> <li>• Patient-approved transfer of medical records between GPs</li> <li>• A model for the exchange of health information in New Zealand</li> </ul>	Dougal McKechnie
4	<b>Views and Discussion</b>	Facilitator
5	<b>Next Steps</b>	Dougal McKechnie
6	<b>Other business/wrap up</b>	Facilitator
7	<b>Close</b>	Jean Park

### Attendees

J B Munro  
Megan Barrett  
Margaret Perley  
Maree Ross  
Alan Shanks  
Dougal McKechnie  
Jean Park  
Anthony Nally  
Elspeth Mclean  
Catherine Daly

Taieri/Strath Taieri PHO  
Taieri & Strath Taieri PHO  
Student Health Services, University of Otago  
Student Health Services, University of Otago  
Dunedin Council of Social Services  
HISAC  
  
Otago DHB  
Otago Daily Times  
Well Dunedin PHO

## Apologies

Dr Tim Gardner	Outram Medical Centre
Serina Coughy	Geneva Health - experience more
Michael Gibson	
Sue Russell	Dunedin Council of Social Services
Grant Taylor	Otago DHB
Dr. Michael Furlong	Otago DHB
John Simpson	Otago and Southland DHB's

## Notes of discussion and views

- Security of health information is a primary concern.
- Method of collecting ethnicity data is ambiguous, and ultimately considered to be of questionable value.
- Fundamental question: if patient details are shared between providers involved in episodes of care or made available to a 'patient vitals' repository - will it make my life better?
- In respect of the 'patient vitals' concept:
  - Who has access to the information and how will it be limited to those who need access?
  - Who will keep it updated and ensure it is correct and accurate?
  - How will data breaches be managed and will individuals be notified of breaches?
  - Will an individual be able to opt-off or will it be an opt-in only system?
- In respect of electronic prescribing and dispensing:
  - Should GPs be notified if medication is not dispensed?
  - Will the individual be advised by the prescriber that notification of non-dispensing will be provided?
  - Where a medication may be substituted, should this be allowed if it is not currently provided for?
  - Will this eventually be extended to non-GP prescribers in the community?
- Self reporting by patients - no obvious place allowed for this in the model.
- Benefit to patient – in any aspect of the model – this needs to be made very clear.

## Agreed actions and follow-up

- Provide plain English-language summaries about specific initiatives. These need to focus on what does it mean for individuals and what are the benefits from a patient / individuals perspective?
- Need to find ways that we can communicate the various security and safety measures in place so we can engender trust and confidence.
- The 'patient vitals' concept should be explained in the context of patient / individuals benefit. In advancing the patient vitals concept we must address the information accuracy and quality issues.
- Back-up and disaster recovery processes need to be articulated in ways that patients / individuals can understand them.

- Provide a copy of the overview of HIS-NZ presentation to participants.
- Gather more information about the proposed NHI education campaign and inform participants.