

New Zealand sets out its roadmap to interoperability

Written by Kate McDonald on 22 September 2020.



New Zealand's Health Information Standards Organisation (HISO) has set out a detailed roadmap to take the health and disability system towards interoperability, publishing a living document that it plans to update annually with quarterly reports.

The roadmap solidifies HL7's Fast Healthcare Interoperability Resources (FHIR) specification as the main standard

underpinning an API-based architecture, with the previously favoured openEHR framework no longer being considered for HISO standards.

Key elements include participating in the NZ government's Digital Identity Trust Framework, introducing a national terminology service and value set authority, and building an API infrastructure mainly using the FHIR standard.

There are a set of guiding principles shaping NZ's approach to interoperability, which include no blocking of data, a commitment to data sharing, nationally agreed standards, common capabilities and an adaptive, data-driven system.

The roadmap describes four themes with descriptions of what the current state is, what the future state is, how the health sector will get there and what should be achievable in five years.

The themes are:

- connecting and identifying
- using the same languages
- unblocking access to information
- enabling joined-up services

Under the connecting and identifying theme, the current state shows there are problems with different levels of connectivity around the country and a digital divide in access to online services for consumers

National health information systems are also hosted on a closed network that limits their reach to providers and consumers, and key foundational services such as the National Health Index (NHI) and the Health Provider Index (HPI) require modern APIs.

The plan is shift to secure internet-based connectivity, digital identities for consumers and all health and disability workers, and common directories of providers and services.

Under the second theme of using the same languages, the roadmap says the current system has a patchwork of different data standards and while key terminology and code set standards have been determined, their adoption level is low.

“The same terminologies, code systems and data standards must be used everywhere for health data to be properly communicated,” it says.

The plan is to shift to standardised terminologies, code systems and data sets, conformity assessment and product certification against standards, and supporting tools and resources for code systems and data sets.

This will be done by accelerating the move to key international standards for terminology and replace legacy approaches and will involve establishing a conformity assessment and product certification process.

It will also involve building an online data dictionary and terminology service and publishing national code sets online.

“We are committed to SNOMED CT as our principal standard for terminology,” it says. “We will accelerate the system-wide move to SNOMED and retire legacy terminologies and code sets. Most urgently, we will complete the upgrade from Read codes to SNOMED in primary care, leading the interagency R2S stewardship group.”

“We will introduce a national terminology service and value set authority, and supply implementers with a free and open source terminology server in-a-box solution, packaged with our latest SNOMED release.

“The NZ Universal List of Medicines (NZULM) and NZ Formulary will continue to be enhanced as foundational services, steering towards complete use of SNOMED and its tools and APIs with each project. We will follow the example of the NHS Digital Unified Test List to fully digitise with SNOMED underpinnings the NZ Pathology Observation Code Sets (NZPOCS).”

The first iteration of the NZPOCS is due to be published in October with the online data dictionary and terminology service established in January.

The third theme is unblocking access to data. This will allow consumers to have access to their own information and for clinicians to have all relevant information about the patient. To do so, the roadmap says, the data held at source must be readily accessible.

“While pockets of interoperability exist, outdated messaging, forms-based and document-oriented modes of information sharing hold sway,” it says. “Key integration specifications that should be publicly available are not.

“Patient information in many places is locked behind proprietary and obscure interfaces or not surfaced at all.”

The plan is to shift to standardised interfaces across all trusted data sources, the establishment of mechanisms, rules and safeguards for personal control over health information, and the integration of consumer-generated data with provider-collected data.

This will be done by driving an open standards and open source approach to interoperability and will involve building an API infrastructure as part of the digital health ecosystem, mainly using the FHIR standard.

It will also see the establishment of a record locator service that securely indexes health information from trusted sources to make it accessible in a controlled way.

“openEHR tools and detailed clinical models are welcome in the environment, but they will not be delivered by national programmes nor positioned as HISO standards,” the roadmap says. “Previously, under our now-withdrawn reference architecture for interoperability, openEHR had a level of endorsement, but FHIR is now more prominent and this is where our efforts will go.

“We will investigate an emerging token-based scheme for information sharing that builds on the previously-endorsed XDS registry-repository model and promises to become an important standard for data portability. One candidate to test this approach is a consumer-controlled health record, derived from GP2GP patient notes transfer.”

The final theme is enabling joined-up services. This will see the regional clinical data repository, e-referral, e-order, transfer of care and shared care solutions that have been built to different standards around the country redefined so they can interoperate.

HISO plans to shift towards process and service integration around the consumer, with support for new technologies and new models of care.

This will see NZ establish an interoperability maturity model and regularly assess functionality, standards, adoption level and governance. This will use the Global Digital Health Partnership's global interoperable maturity model, which is currently being developed.

The interoperability roadmap is available [here](https://www.health.govt.nz/system/files/documents/publications/hiso-10083-2020-interoperability-roadmap-11sept2020.pdf) (<https://www.health.govt.nz/system/files/documents/publications/hiso-10083-2020-interoperability-roadmap-11sept2020.pdf>).

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