



GP2GP putting patients at the heart of the system



We are delighted to announce the general release for Electronic Patient File Transfer – otherwise know as GP2GP – commenced with a Pilot on 1 July 2011 and is now going into general release. After so many years in discussion, planning and design, it is exciting to finally have a working solution.

Every year in New Zealand, over 375,000 patient files are transferred between general practices as patients move around the country. While almost all GPs use computerised practice management systems so consequently almost every New Zealander has an electronic medical record, today these records are still being mailed across the country as hard copies and manually re-entered, if at all, every time a patient file is transferred.

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The current process is neither person centred, nor provider friendly. The absence of any standards for, or capability to, effectively transfer patient records fails to provide relevant historical information in the right place at the right time to support ongoing quality care.

This results in a significant safety risk each and every time a person changes their GP. The patient's health information remains trapped in a series of disconnected silos centred around their general practice instead of being a longitudinal record of all relevant medical information with the person at the centre. This situation results in disconnected episodic care and causes fractured management of chronic conditions. The risk factors for patients build up over time.

The manual transfer of patient notes between general practices is also highly inefficient and frustrating for practices. Considerable time and effort has to be spent re-entering information when a patient joins a new clinic. This manual process has enormous potential for errors which may have patient safety implications. It is easy for inefficiencies to result from the repetition of health care activity arising from the inability to see activities and results across a person's care path.

GP2GP provides the capability to all general practices to electronically transfer their patients' electronic medical

records safely, securely and in a way that retains content and meaning when received by another practice.

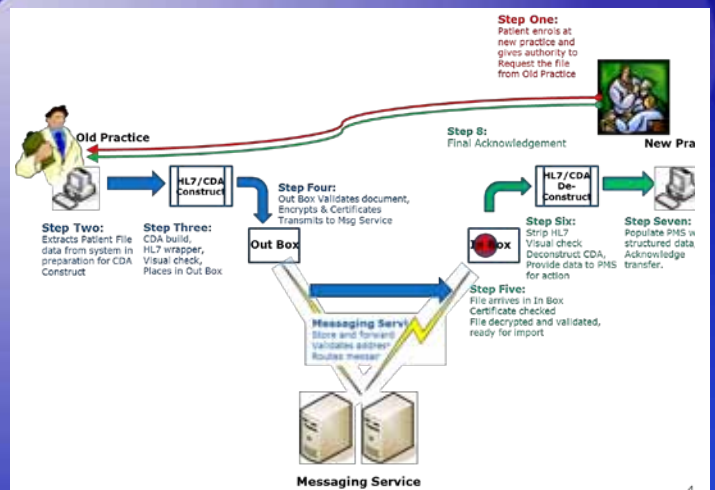
GP2GP facilitates changes to the practice management applications that enable medical record to be electronically transferred from one GP to another. The entire medical record is transferred in a structured and searchable format.

To ensure compatability between all the different practice management systems, GP2GP has developed a standard dataset and data model for primary longitudinal care records. GP2GP has also developed a primary care messaging standard that is agnostic of its transport mechanism and could eventually be extended for other electronic events including electronic hospital discharges. These standards provide a base capability to transfer health information that, with appropriate consent, could extended beyond general practice to become a more widely used provider-to-provider solution.

GREAT for Patients

As we continue to work towards a person centred health information environment it is clear GP2GP will deliver a significant range of benefits to patients.

GP2GP will stop or reduce the loss of medical history every time a person moves and will ensure their most important health information is available to their new doctor. General practitioners are concerned about the lack of clinical information about new patients that may be held by other providers. This presents a risk that patients safety may be jeopardised if clinical decisions are made in the absence of critical information. Of particular concern is the lack of information on medications prescribed by other providers – this increases the risk of accidental harm due to unforeseen drug reactions and risks treatments being ineffective.





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With GP2GP, general practitioners will have detailed knowledge of their new patient's current medication, allergies, current problems and past medical history. Having this knowledge at their fingertips will lead to improved clinical decision-making so that the right care can be provided at the right place and at the right time thus reducing the risk to patient safety during the handover of care. Access to a patient's previous clinical history will also reduce the number of duplicate lab tests, which can be uncomfortable as well as inconvenient for patients.

GP2GP makes it easy for patients to be supplied with a copy of their medical record on request. This will improve accuracy, trust and engagement by letting patients verify their own information. The opportunity to involve individuals, their families and whanau in their healthcare through sharing their medical records with them enables general practices to move towards person centred healthcare.

GREAT for general practice

Reducing the administrative load by spending less time printing and mailing an outgoing patient's medical record, and re-entering an incoming patient's record will be a big plus for general practices. Patient records will also be presented in a format that is structured, easy to read and searchable so key pieces of information can be located by more efficiently than thumbing through reams of scanned pages that may not be illegible or difficult to read. GP2GP will also improve the value of the interaction with patients as there will be less time spent ordering duplicate tests and eliciting patient information that has already been captured elsewhere.

GP2GP also delivers benefits to the wider sector. Reducing the number of duplicate tests and improving health outcomes will clearly benefit the health and disability system by cost savings and increased performance. The interoperability standards GP2GP has developed and implemented can also be used by other sector e-event initiatives including electronic hospital discharges, e-Referrals, provider-to-provider and the Primary Care Minimum Dataset.

The project has included the four main general practice practise management system vendors – MedTech, Houston,

My Practice and Intrahealth – who all incorporated a common data exchange 'toolkit' produced by Health Alliance.

Around 65 sites throughout New Zealand were involved in the pilot phase, and feedback was reviewed and incorporated before the general release of the solution to the wider audience.

Naturally, the vendors wanted to hold off deployment until the solution was perfect, and of course the sector wanted to see the functionality delivered earlier. On one hand we could have a situation where functionality would never get delivered as it could always be just that little bit better, or it would be delivered too soon, resulting in poor acceptance due to issues arising. We believe we are now at the point where we have a quality product and we can launch the service with confidence.

All those involved in developing GP2GP agree that this project was significantly harder and vastly more complex than originally anticipated. It is only through tremendous goodwill, cooperation, individual persistence and significant investment in time and effort that we have reached this point.

The release of GP2GP and a range of other initiatives should be seen as first steps, not the destination, and we confidently expect on-going improvements in the technologies that support general practice in New Zealand.

Source of information in this paper:

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