



# Practice Management System (PMS) Certification

- responsive to clinical and health needs



The Primary Care Practice Management Systems (PMS) Requirements Project was commissioned by the National Health IT Board to define and prioritise desired clinical, functional and non-functional requirements required from a PMS, together with interoperability needs of a PMS within the broader eco-system (beyond the traditional walls of the practice).

The context of health care delivery is changing from transactional care to on-going responsibility for a patient with shared care where required. This needs to be supported by health information systems including practice management systems that are responsive to emerging clinical and health pathway needs.

The project has created an evaluation framework to enable an objective assessment of progress by vendors towards systems that can support delivery of quality care both today and in the future.

The objective is to publish, in a public forum, an evaluation that has been derived through:

- a./ vendor self-assessment of their respective PMS product(s) against a set of criteria and
- b./ an independent and facilitated process of evaluation by an expert panel against the criteria.

The objectives are that for the sector this will provide a credible, independent and accurate appraisal of PMS systems to help inform purchasing decisions and, for vendors, the process will enable them to have a clearer understanding as to the requirements and priorities of the market.

In deriving the initial set of requirements, the message we received from our consultation with the sector was: "Start with a small though strategic list of requirements and an effective governance process and mandate and evolve from that point"

We distilled the feedback down to five recurring and consistent themes and present these as the five highest areas of need or functional focus. These are:

## The High Five – initial requirements focus

**PUBLISHED** (standards based) APIs (ways of sharing information between systems)

**STRUCTURED** data within the PMS

**SUPPORT** for interoperability standards, with e-Discharge and e-Referral the priorities

**INFORMATION** security, access and privacy

**DEVELOPING** consensus on usability guidelines including managing "alert fatigue"

We are working with NIHI (The National Institute for Health Innovation) to facilitate the first review of the four PMS vendor's products against an RFI around the high-five areas.



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**These findings will be made freely available to the market, be downloadable from the Patients First web-site, and purchasers will be encouraged to use the assessments when considering future purchases of PMS applications.**

There is an independent review panel that has been formed for this purpose that has membership including General Practitioners, Practice Nursing, Practice Management, health informatics and technical architecture. The panel is chaired by Dr Jim Vause.

## The process

The five focus areas were translated into a more detailed set of requirements which were then distributed to the PMS vendors in June 2011 in the form of a Request for Information (RFI).

Vendor participation is voluntary on the basis that, in the absence of receipt of an RFI response, NIHI and the Panel will note that no response has been received and the panel will provide a best-efforts narrative based on their knowledge of the relevant products

Responses have been received and the panel are currently reviewing these

The panel will provide narrative and feedback in the form of a report published to the sector. The timeframe for this is estimated to be October 2011

The panel has also been asked to contribute to the next round of requirements the vendors will be reviewed on.

## The results

The Panel, aided by the Project team and the Chair, will author a report on their findings against each focus area

for each PMS application. This will include the vendor self-assessments and the panels commentary.

Finally the assessment will contain for each focus area an overall commentary that will be provided by the panel and which will summarise the degree to which each vendor meets the short term goals of the area of focus, the gaps that exist, the strategies that have been demonstrated by the vendor to be in place to meet the gaps and a sense of the product's longer term development direction against the vision enunciated by the panel.

These findings will be made freely available to the market, be downloadable from the Patients First web-site, and purchasers will be encouraged to use the assessments when considering future purchases of PMS applications.

## The future

The panel will provide input to further themes and the review process repeated for those new themes. It is also assumed that the process will be repeated from time to time (proposed six-monthly) for all themes to identify new requirements or thinking and to assess changes in vendors' products and specifications.

Based on current progress, the results from the process are due to be published in October 2011.

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