

Population Health Information Tool

- PHIT (2006-2008) Action Research Study
- PHNs in LHO Dublin North Central
- Funded by HSE and the NCNM
- Launched by the HSE (2011).
- In 2012 a pilot project funded by the ICHN
 - Test digital data entry of PHIT
 - Create business case for e.version of PHIT

Public Health Nursing in Ireland

Key Role

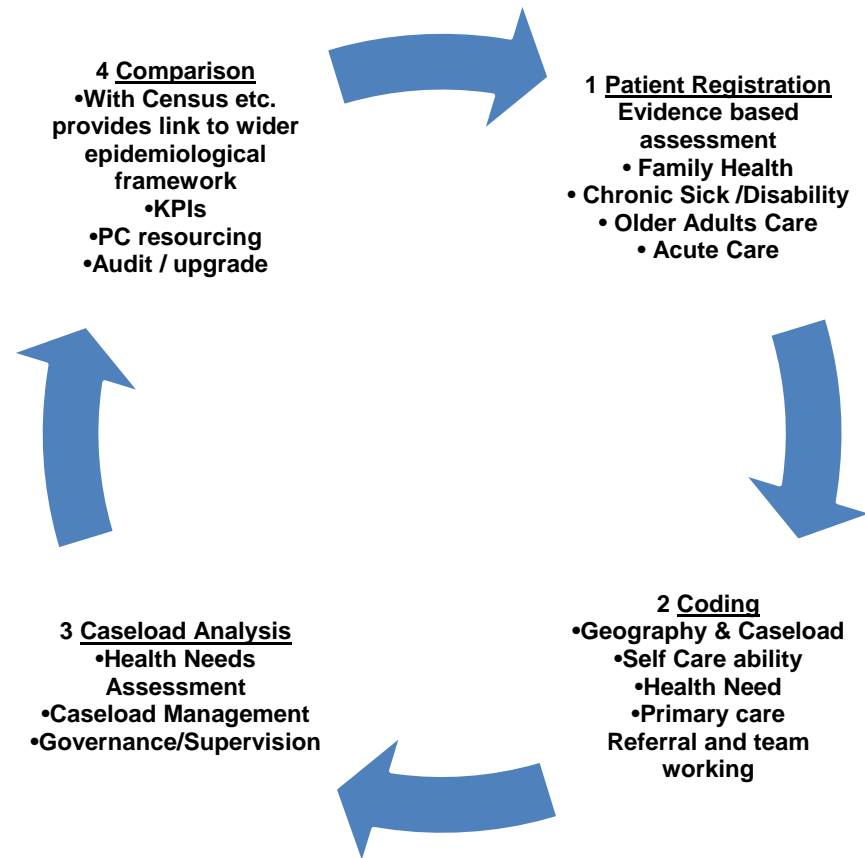
- Identify individual and population need through a continuous system of registration and analysis
- Case Finding Surveillance & Analysis



Background to PHIT

- Existing project developed with practitioners based on requirements over 4 years
- Developing a pragmatic tool for population health data collection within public health nursing

PHIT Data Life Cycle



Structure & Framework

- **Care Plan / Assessment**
- Medication / Tx
- Status Active / Inactive
- Care Plan Interventions / Evaluation
- HC Continuation Sheet
- Register Templates
- Quarterly & Annual Summaries
- Reports, Views & Summaries

Date Assessment commenced:		PHIT Pilot Assessment Form No: <input type="text"/>	
<input type="checkbox"/> Administration: Pages 1-4 <input type="checkbox"/> Activities of Living: Page 5 <input type="checkbox"/> Home Care: Page 6 <input type="checkbox"/> Treatments / Medications / Summary: Pages 7-9 <input type="checkbox"/> Consent: Page 10		Confidential File Please Return to: Nurse: _____ Health Centre: _____ Phone: _____	
GMS : Yes <input type="checkbox"/> No <input type="checkbox"/> GMS Number:		<input type="text"/>	
Private Health Ins: Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="text"/>	
Health Identification Number:		<input type="text"/>	
Reason for Assessment:	Referral Agent:	Referral Agent Details:	
Referral In <input type="checkbox"/>	Acute Hospital <input type="checkbox"/> G.P. <input type="checkbox"/>	_____	
Reactivation of Case <input type="checkbox"/>	CIT / CRT <input type="checkbox"/> Primary Care <input type="checkbox"/>	Reason for Referral:	
Case Found <input type="checkbox"/>	Patient / Carer <input type="checkbox"/> Social Work <input type="checkbox"/>	_____	
Case Review <input type="checkbox"/>	Palliative Care <input type="checkbox"/>	_____	
Other <input type="checkbox"/>	Other <input type="checkbox"/>	_____	
Patient Details: Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/>			
Surname:	<input type="text"/>		
First Name:	<input type="text"/>		
(Preferred)	<input type="text"/>		
Date of Birth	<input type="text"/>	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	<input type="text"/>
		Mother's Maiden Name:	<input type="text"/>
Address 1	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	DED	<input type="text"/>
Landline	<input type="text"/>		
Mobile	<input type="text"/>		
Address 2	<input type="text"/>		

Nurses Signature:

Quarterly & Annual Summaries

Provide Information on:

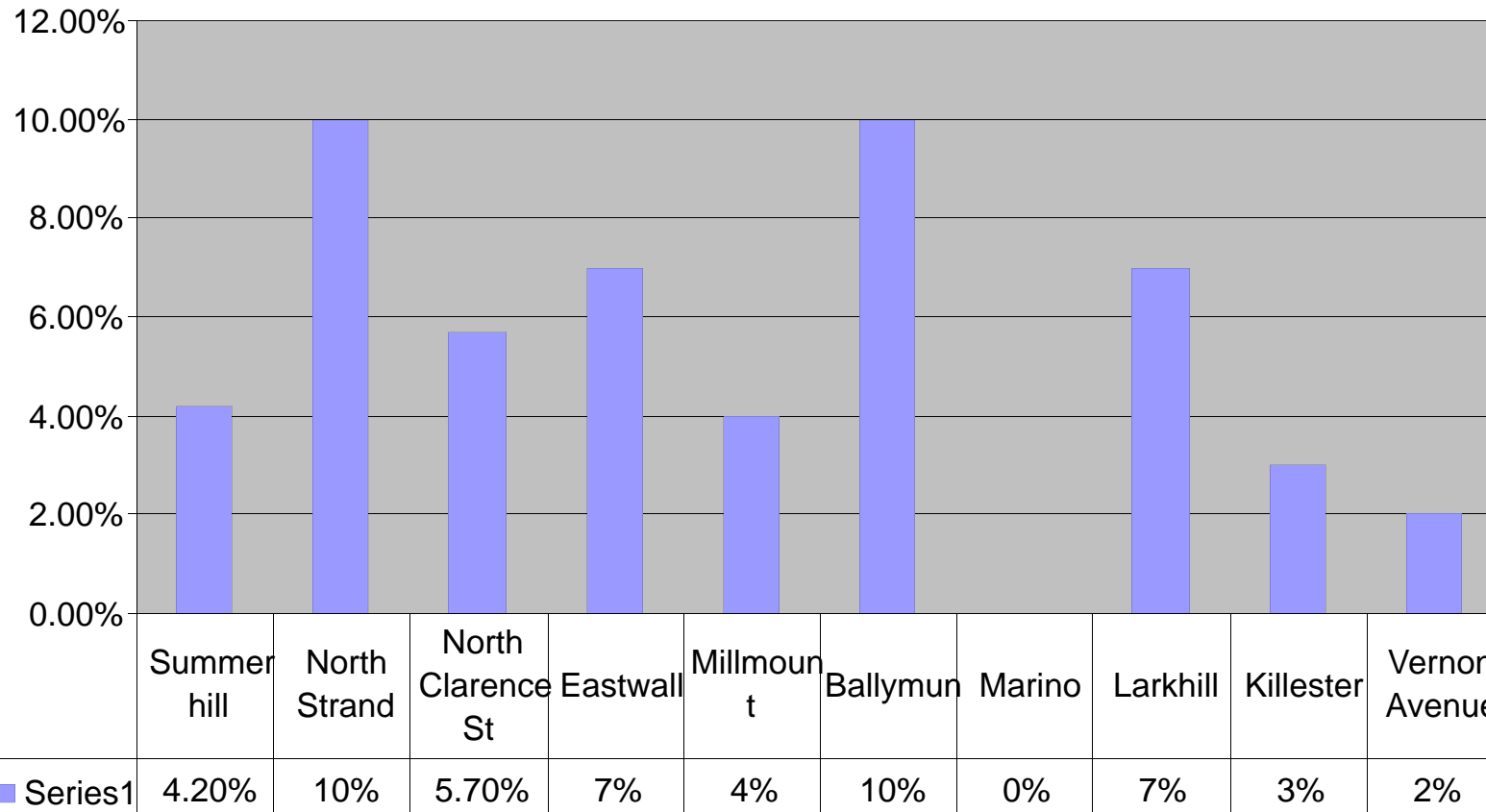
- Acute and chronic care need
- Family Health Outcomes
- Performance Indicators
- Case Review Rate
- Case Dependency Rate
- Geographic Caseload Composition & Need
- Population Health

Register 1 Family Health

2,000 approx. New Births Annually

15% received outside 48 hour PI and Low Birth Weight Average 5.7%

Low Birth Weight (less than 2.5Kgs) 4th Quarter 2011 DNC

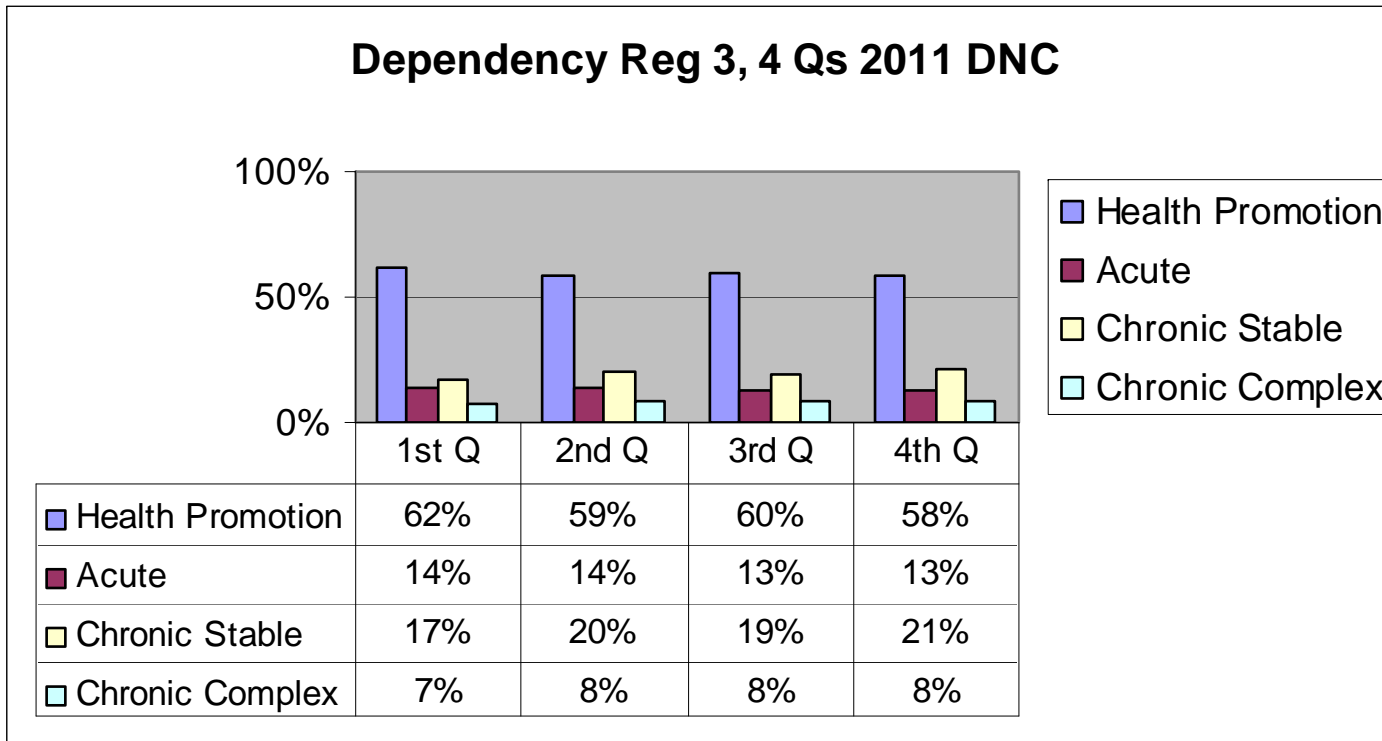


Register 2 Annual Outcomes Chronic Sick /Disability

- 430 new patients annually with total 1,504 on Register most likely to be between 45 and 64 years of age
- Highest incidence in Network 1 and 2 reflecting demographic profile
- Most frequent diagnosis: mental health, neurological disease, chronic wound care
- Significantly higher smoking rates
- Average continuing care need = 5 years

Register 3: Older Adults

893 new Older Adults per annum with Total 6,307 on Register
 8% with high dependency needs (suitable for SAT assessment)



Register 4: Acute Care

- 3,601 Acute Care Episodes
- 69% are Older Adults
- Most having need for wound care
- Most referred from acute services
- 50% continuing to chronic care need
- 76% of those continuing are 65 years+ with co-morbidity

Nursing Treatments (Interventions)

19,282 nursing treatments recorded in 2011

'Setting Up' home care most frequently
recorded followed by:

- Wound Care
- Medication
- Continence
- Nutrition Management

Project Aims

Pilot Phase Aim: Proof of Concept

1. To pilot a digital version of the PHIT using a digital pen as a vehicle for data collection.
2. To deliver point of care nursing documentation without duplication or transcription having a positive impact on time management and co-ordination of care
3. To ensure that future electronic versions of PHIT are designed in accordance with integrated services framework
 - Data dictionary with associated clinical reference terminology codes
 - Adoption of Harmonised standards used to define information and data models
 - High level business case with value proposition articulated

Pilot Project Activities 2012 – Phase 1

Pilot : Proof of Concept digital data entry

1. Development and use of templates using digital pen
2. Pre- testing in clinical simulation laboratory
3. Liaising with HSE on network access and data storage
4. Training small number of staff for pilot data collection
5. Addressing governance and data protection issues.



Pilot Project Phase 2

Phase 2 : Health Informatics Development

1. Select preferred standards for development of phase one and two
 - EN12967 HISA
 - EN13940 Contsys
 - ISO 13606 / HL7 version 2.4
2. Develop business case with HSE ICT for regional/national roll out
3. Consultation and communication with key stakeholders
4. Identify core requirements to realise integrated solution of electronic PHIT in the future
5. Identify champions for executive sponsorship
6. Report back on initial pilot study

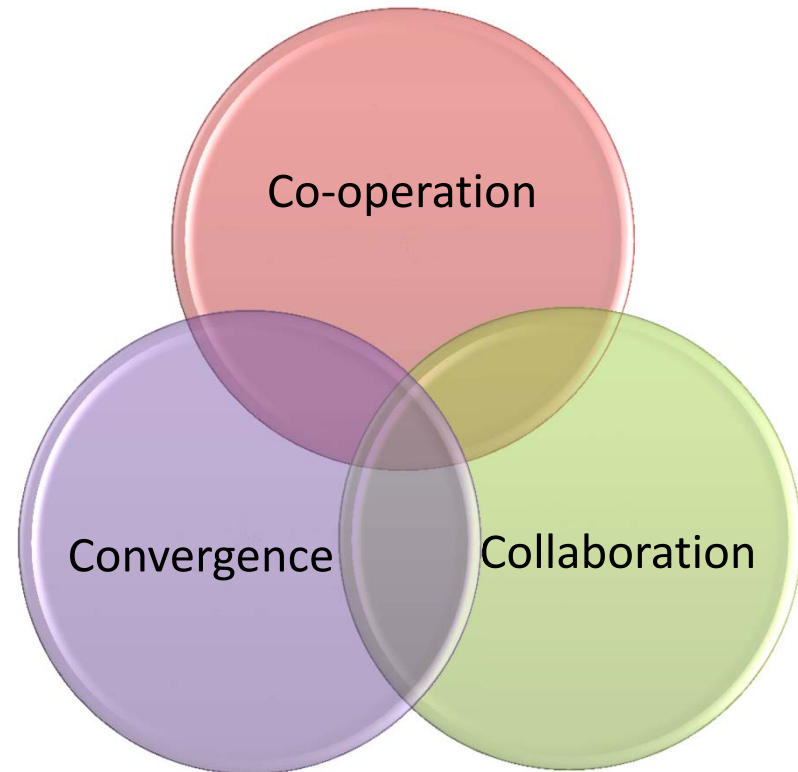


Nursing Informatics Landscape

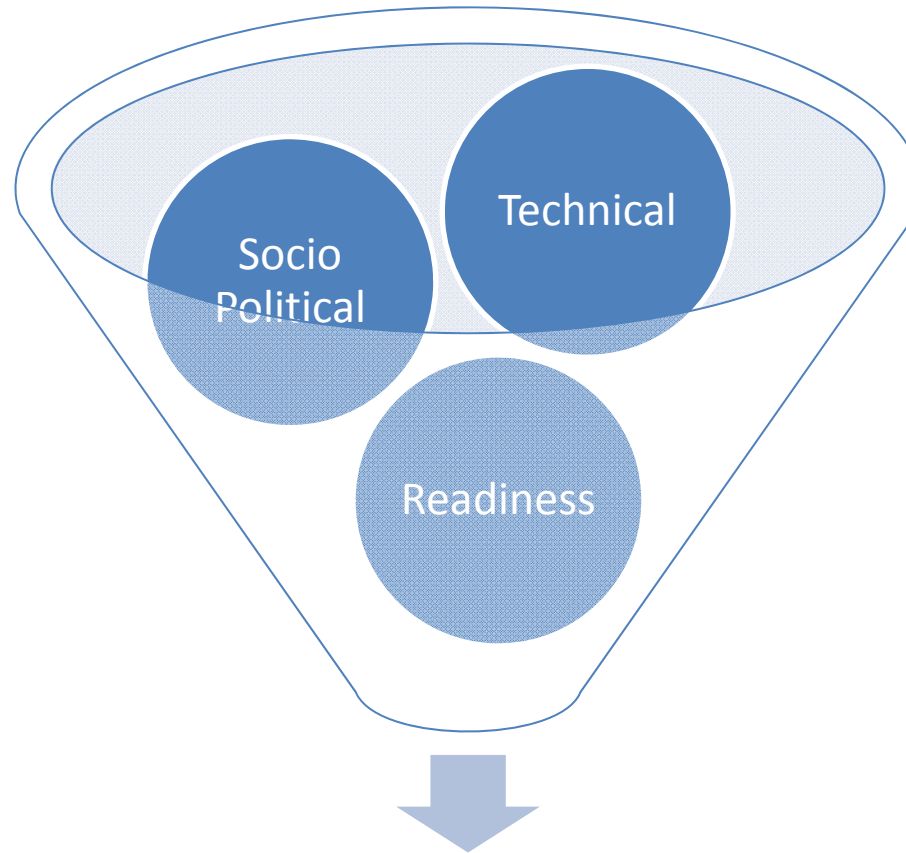


Big Picture Ecosystem Roadmap

- Transatlantic eHealth Roadmap
- ACENDIO HISINM
- eHealth Summit May 2013



Challenges Encountered?



Proactive versus Reactive

Leadership in Nursing & Midwifery

Some personal reflections

- HISINM New Strategic Plan
- Readiness for engagement a key priority

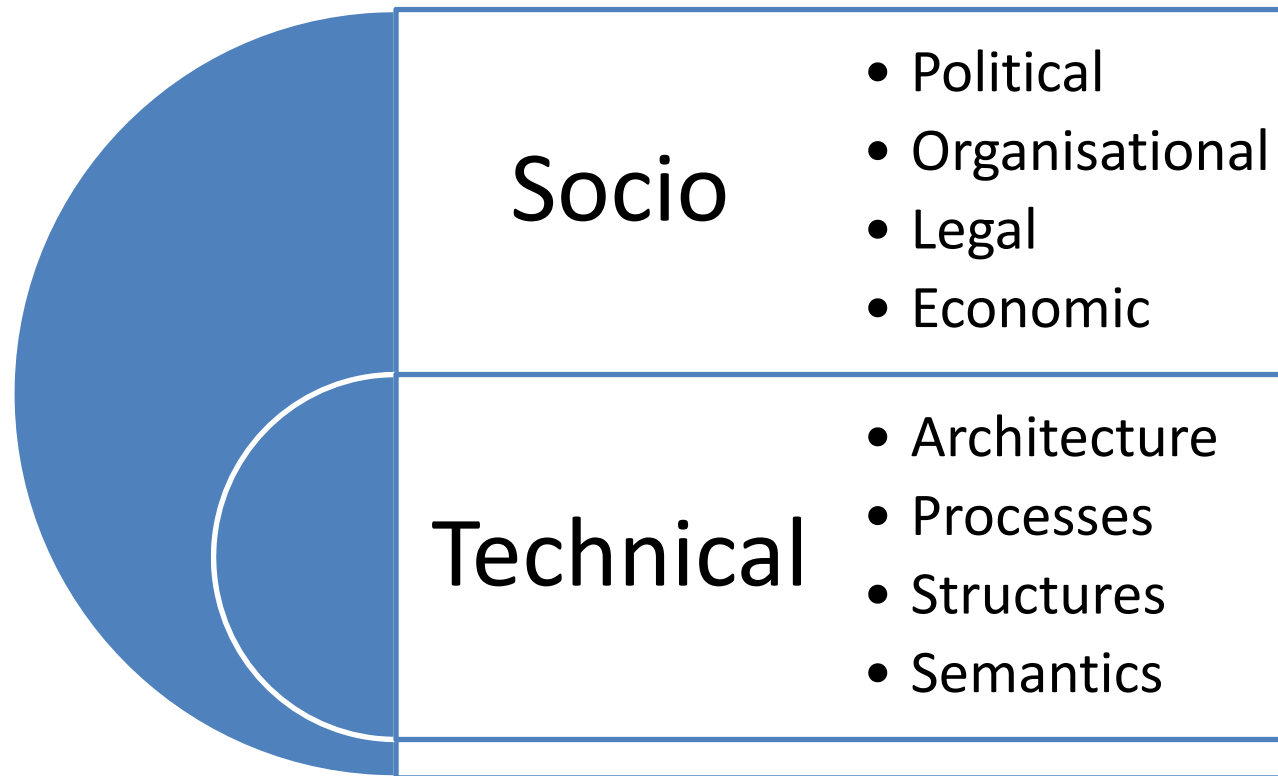
Culture Eats Strategy for Breakfast

eHealth, EHR & Interoperability

- First steps in this process of development is design for interoperability

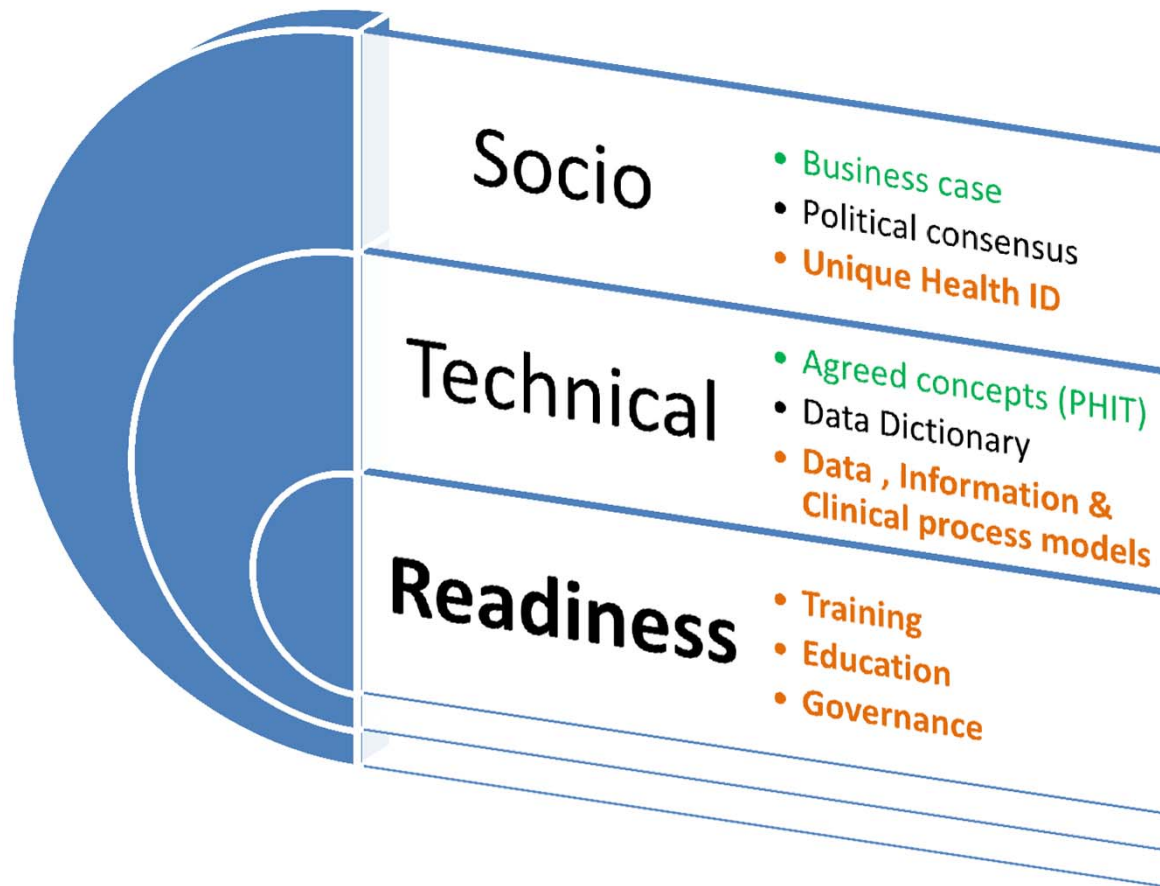


Interoperability Requirements



Interdependent Relationships Kay S, 2012

PHIT & Interoperability



Green = Significant work completed Orange = Started Black =Awaiting Decisions

Data Dictionary

Will not be done until
Ireland has acquired a
license from IHTSDO



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