My Health Record

CLINICAL RESEARCH STUDY OVERVIEW

Australian Government
Australian Digital Health Agency

THINKPLACE

What is the clinical research study seeking to achieve?

The Australian Digital Health Agency wants to improve access to medicines, allergies and adverse reactions information in the My Health Record system, to better support medicines reconciliation processes and reduce adverse events. To do this, the agency will be undertaking a research study in October and November of 2016, engaging with a range of healthcare providers to understand how the design of medicines information in My Health Record system could be optimised for use.

This data within the My Health Record system comes from a range of sources - hospital discharge summaries, shared health summaries, prescriptions from general practitioners, dispense records from pharmacies, specialist letters, consumer entered information and others. There are also multiple local clinical information systems and practice management solutions that handle and format the data. The data is used in a wide variety of settings, workflows and situations, and in a range of contexts with unique characteristics.

The research will seek to deepen understanding how the Agency should evolve the design of medicines related data in the My Health Record system, sensitive to this complex context, and so improve how users interact with, consume and contribute to consumer medicines related data.

As part of the research, and building on previous research and consultations, the research team will seek to:

1. **Understand what people do.**
   Explore activities, tasks, workflows, decision making, information use etc, to understand why and how

2. **Understand the everyday.**
   Observe in-situ (go to where participants live and work)

3. **Begin with simple questions.**
   Rather than focus on technical concepts or My Health Record system in particular, focus on the context and how people work today within their natural systems

4. **Have a beginner's mind.**
   Conduct the research without assumptions, and be open to learning how people work, their perspectives and their needs/preferences/pain points

5. **Capture information that builds a narrative.**
   Where permitted, use photos and audio recording to help communicate to the My Health Record system design team the real context that My Health Record must support

The research will be undertaken by the Agency in partnership with ThinkPlace, a public good research and design consultancy headquartered in Australia.

Focussing questions

The key questions that will be explored are:

"What experience do clinicians have as they interact with clinical information systems when they add and view medicine, allergy and adverse reaction information on their patient's behalf and what impact does this have on patient care?"

1. **What are the challenges of arriving at a list of current and ceased medicines, allergies and adverse reactions? What are the trusted sources?**
2. **How do clinicians engage with software, patients and other providers to determine what medicines a patient is taking, including over-the-counter, and complementary medicines information (as advised by the consumer) , and the reasons why they are taking them (indications)?**
3. **What are the pain-points and clinical safety risk-points of the systems used and in the context of their use?**
4. **How does the environment, location, technology, and devices used impact access, viewing, comprehension and data entry of medicines, allergies and adverse reaction information?**
5. **What information would clinicians like to know at a glance, and what through deeper scrutiny? How does the context (eg: clinical events, admission, discharge, medicines review, claiming/billing) change the information needed?**

Where we will look

Priority scenarios we would like to explore include:

Transition Scenario	Example scenarios and settings for our research
Transition between community care and acute care	• Hospital Emergency Department • Pre-admission clinic • General Practice • Residential Aged Care Facility • Rural/remote transfer to tertiary facility • Hospital Pharmacist medicines reconciliation
Transition between acute care and community care	• Discharge planning • Hospital Pharmacy • Residential Aged Care Facility • General Practice • Community Pharmacy • Post discharge Pharmacist Review
Community/outpatient care	• Chronic Disease Management Teams • Allied Health services • Oncology services • Mental Health services • Community Pharmacies • Maternal and Child Health services • Home care nurses • General practice

Potential research participants

- General Practitioners
- Aged Care Facility Nurses
- Hospital Emergency Department clinicians (doctors, triage nurses)
- Hospital Preadmission Clinic staff
- Hospital Specialists
- Private Specialists
- Ambulance Officers
- Hospital Pharmacists
- Community Pharmacists

What the research will look/feel like.

The in-depth exploratory interviews will be a one-on-one, face-to-face interactions with clinicians in their place of work. This is an exploratory process and requires genuine engagement with the participant and the skills to help pinpoint areas of pain, areas of opportunity and general areas of importance from their perspective.

This is an important feedback gathering technique in which we preferably spend time with a participant in their own space, such as their office, that will facilitate us understanding their context. With participant consent, we will take audio recordings, photograph important artefacts/interactions, and take notes throughout the session to help document the clinical experience meaningfully and without risking the privacy or safety of participants or others in their clinical environment.

Interview format: 1 interview participant and 2 interviewers.

Interview length: 60 - 75 mins

Research will occur under strict consent, privacy and safety parameters, and all participants will be briefed and asked for consent prior to research commencing.