

5th March 2009

Andrea Pettett
 Chief Executive Officer
 New Zealand Health IT Cluster Inc.
 PO Box 25 233
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 Wellington

HEALTH MANAGEMENT SYSTEM COLLABORATIVE OF NZ DISTRICT HEALTH BOARDS: REQUEST FOR INFORMATION DECEMBER 2008

Dear Andrea,

We received your letter of 18th February in which you represent the views of your members with respect to the Health Management System Collaborative (HMSC) RFI and seek further engagement with MOH and the DHB collective as the RFI progresses.

As we were unaware that the Cluster had also sent blind copies of the letter to other people in the sector, nor forewarned that the letter would be made immediately available to your general membership and the press, we included your letter in distribution material provided to the HMSC members for their governance meeting (Allen Hesketh also sits on this group), which was held only last Friday. Please advise whom you copied your original letter to and confirm that you will forward this reply to the same audience.

Moving on to the content of your letter, the HMSC appreciates that the NZ Health IT Vendor community are one of many key stakeholder groups vitally interested in what this RFI represents both for suppliers to, and users of, the NZ Health system. We have been asked to reply on behalf of the HMSC.

1. Support

The HMSC notes and appreciates your strong support of the stated transformational vision and collaborative approach being taken by the member DHBs, and supported by MOH. You should be aware that recent RFIs previously released by individual DHB members of the HMSC failed to solicit the kind of innovative and collaborative responses we have received from NZ based vendors to this collaborative RFI. This, in itself, is seen as a positive outcome and all local and incumbent vendors have been encouraged to use the RFI process as a means to inform the HMSC how the vision might best be achieved.

2. Concerns

Your letter relays a number of perceptions and concerns held by various individuals within your membership. Some of these are also held by other participants in the sector and, as it happens, all of these have previously been tabled with the HMSC for their awareness and consideration in establishing the project terms of reference. In summary, your letter raises concerns for your members' interests:

- An apparent preference for an all encompassing monolithic solution rather than “the current best of breed standards based interoperable approach”, around which most of your membership is currently structured
- little or no public debate about such alternatives

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- progressing in advance of an updated national health IT strategy (which your membership would like to influence or at least debate)
- a pre-disposition towards a specific offshore model and supporting vendor
- the potential economic impact upon our local health IT industry, particularly if a single-solution offshore vendor were selected
- the risk that the RFI process creates a hiatus that limits short-term revenue opportunities for your members

The HMSC feel that these concerns are best addressed in two ways:

1. We understand how RFI interpretations and other activity in the market might lead certain stakeholders to fear that a preferred service delivery model and allied IT solution is favoured, and that this might disadvantage them.

With respect to this RFI process, please be assured by the following:

- The HMSC has released this RFI in order to become informed about potential solutions and approaches to achieving the vision. This includes consideration of both technology and transformation / implementation.
 - This is considered to be an essential education and learning phase as well as a pre-cursor to an RFP (procurement phase).
 - There are absolutely no preconceptions or preferences as to what might be the best approach or source of solution.
 - Clinical and primary care engagement is critical and fundamental to this process.
 - MOH has confirmed, as you have, that the RFI vision is appropriate for NZ. Being informed by the market at the same time NZHIS is being refreshed is viewed as complementary rather than contradictory.
 - Once RFI content is fully digested and preferred approaches are established via this collaboration (including, by then, any requirements arising from NZHIS), then a RFP may be released seeking “contractable proposals” based on detailed requirements.
 - Vendors wishing to participate in this process must do so via compliant RFI responses.
 - The HMSC will not engage with vendors nor the Cluster regarding RFI considerations outside of the RFI process.
2. With respect to your members’ collective interests, desire to influence NZHIS and matters of economic / procurement policy, we suggest that this is best explored via the Cluster’s communication channels with MOH’s Information Directorate. Alan Hesketh has agreed to be your initial point of contact as the other formal recipient of your letter.

Your letter also contained some general observations and opinions about matters such as “an EHR” and other aspects of how the vision might best be achieved. These will no doubt be reflected in RFI submissions from your members and brought into consideration in that way.

This is potentially a “tipping point”, where sector participants collaborate to make dramatic improvements in health care delivery and outcomes in NZ, enabled in part by better use of information technology. We are pleased that some of your members have determined how they might individually and collectively best participate in this, as evidenced by their formal RFI responses.

On behalf of the HMSC,



Joanne Wakelin
Principal Consultant

cc. HMSC members, Alan Hesketh,