CareConnect
Health Information Exchange

NEWSLETTER

September 2021

Go Live Edition

MARKING A MILESTONE

After nearly two years in development, we are excited and proud to announce that the CareConnect HIE is now live.

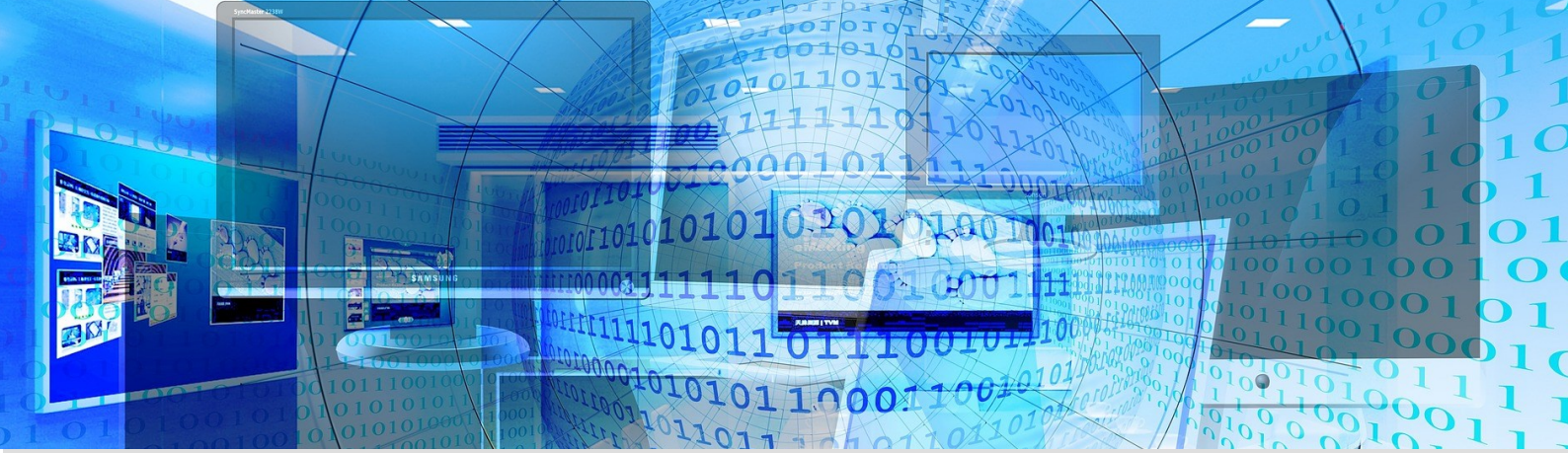
I believe this represents a significant milestone in the history of the South African private health sector and opens the door to progressive and innovative new ways of doing business and delivering healthcare.

While we have reached this important milestone, the HIE is still very much a work in progress. With Phase 1B expected to come on line in early 2022 and preparing for the participation by all-important role players like Radiologists, Pathologists and other clinicians, our real work has only just begun.

There is no doubt that the Covid-19 pandemic has forced the world headlong into the 4IR and it seems fitting, therefore, that we are able to introduce this first industry wide HIE into our health sector at this time

I would like to extend enormous gratitude to our Board of Directors - representing the six Founding Member organisations - for their support throughout the process. I also wish to thank the members of the various working groups and project teams that assisted in bringing this project to fruition. To the staff of CareConnect, thank you for your tireless commitment to the project.

Dr Biddie Biddulph, CEO



FROM DREAM TO REALITY

Transforming the concept of an industry wide HIE into reality takes a special person - someone with determination, smarts and grit. Add in a pandemic to the mix, and that special individual becomes something akin to a Superhero. We chat to Dr Rolan Christian on his role in leading the development of the CareConnect HIE (in a pandemic) and the milestone that this represents for South Africa's private health sector.

Q: What have been your highlights of the past two years?

A: The ability to see past competitive issues towards collaboration takes immense maturity and insight. Without exception, every participant, from the Founding Members to our technical partners, has demonstrated this maturity with the recognition that the HIE is bigger than any one organisation. What is also apparent is that there is enormous mutual respect and understanding for each other's contribution to the HIE. What we've achieved in 12 months is nothing short of phenomenal. It has been wonderful to witness the collective drive from all parties to ready the HIE for 'go live'.

The decisions we've made – from the choice of infrastructure and architecture to the governance structures that we've put in place – have ensured high levels of quality to the project delivery. Our governance structures accommodate everyone. They are efficient, practical, progressive and democratic. There is opportunity for everyone to table their views and open, robust discussions have allowed different views on very complex issues during the development phase. When decisions are made, they are made with the success of the HIE in mind and in the best interest of the project and the healthcare sector.

Q: And the lowlights?

A: Covid-19 - waves 1, 2 and 3 - have added enormous pressure to the project teams. After all, the health sector has borne the brunt of the pandemic and resources have been stretched to capacity. The individuals from our Founding Member organisations who are working on the development of the HIE are often the same individuals who are also working tirelessly within their own companies to run the projects necessary to respond to the pandemic and save lives.

A key learning that we have taken from the pandemic is that there is greater awareness and need for a HIE to enable the sharing and exchange of information. Covid-19 will be with us for a long time and I'm confident that the development of more clinically focused use cases to respond to this disease will be high on the agenda for CareConnect HIE and its Founding Members.

Q: On that note, has the pandemic and the learnings on tracking, tracing and vaccination caused a change in course as to how future use cases are viewed?

A: There have been many discussions in the various working groups around this. The clinicians are exploring use cases for Covid-19 and other clinical areas that will be of benefit to the health system. There is a lot of excitement amongst the Founding Members who see the potential for future use cases that will add real value to the sector. From our side, we have begun compiling a repository of potential future use cases, based on global trends and discussions with our Founding Members.

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Q: InterSystems, the organisation providing the platform that the CareConnect HIE is built on, has had much experience in building HIEs in other parts of the world. What learnings have you taken from this?

A: I believe that our relationship with InterSystems has been mutually beneficial. We have gained tremendous insights from them about managing our agreed to consent principles from a technical point of view and how data should be structured, managed and mapped. In turn, we have helped them understand and navigate the complexities of the SA health landscape.

Q: How does the CareConnect HIE differ from those in other parts of the world?

A: The key difference is that most HIEs are state funded and run, with private sector players utilising them. The CareConnect HIE is borne from the private sector but with the intention of adding value for the public sector in time.

In most other areas of the world, there are multiple HIEs under one health system. These could be per state, per vertical or per group. In South Africa's healthcare IT market, there are a number of mini-internal exchanges that are used specifically within the walls of the hospitals, PMAs, provider groupings and the like to manage their own specific data needs. We view ourselves as being an overarching, industry HIE facilitating the work of those operating within the system.

The other key difference is the way in which consent is managed. In South Africa, the six Founding Members manage the consent of their members/patients to share data with the HIE, whereas in many HIEs around the globe, the consent is managed by the HIE.

Q: Does the fact that we have parallel health systems in the country have an impact on the HIE?

A: Yes, and the sooner there is a bridge between the two, the better it will be for the health system. We believe that the CareConnect HIE can be the bridge between the two and the mechanism that enables greater access to quality clinical and demographic data which will improve healthcare overall.

Q: What would your dream be for the evolution of the CareConnect HIE?

I see it as a hub for both the public and the private sectors. The CareConnect HIE will be a critical enabler for our health system, one that fosters innovation and integration all with the necessary governance structures in place to ensure fairness.

> ***"The CareConnect HIE can be the bridge between the private and public health sectors and the mechanism that enables greater access to quality data to improve healthcare overall."***

This HIE has been built with the gold standard of governance and security to protect clinical data – the most sensitive of information. We now have the experience to navigate the regulatory, political, commercial and technical terrains that come with a HIE. We have also built trust within the industry and could expand what we have to service the entire health system, thereby providing greater access to healthcare.

Q: How do you see the CareConnect HIE facilitating greater cohesion within SA's health sector?

The HIE is data driven and the data provides the narrative. If the participants of the HIE share as much data as possible, the HIE becomes THE source of truth. This is ultimately the value of a HIE. So, if data is not shared then the HIE will decrease in value. It's in the interest of all public and private sector stakeholders to securely and lawfully share data to ensure that the HIE works and that the entire sector benefits from it.

WELCOME TO OUR NEW RECRUITS

Julia Chauke

With a qualification in Project Management from UNISA, Julia has comprehensive and thorough experience in all areas of project management and integration. She is passionate about project management and this is what motivates her to be results-driven.

Ephraim Malane

Ephraim holds a BSC degree in Mathematics and Computer Sciences from University of Limpopo. He has acquired experience as a full stack developer with diverse skills in web-related technologies. Ephraim inherently understands that the customer is the single most valuable asset in an organization and is motivated by his pursuit of customer-driven focus.