National Immunisation Workshop
Sept 7 2017
LinKIDS Canterbury - Learning from the NIR
Bridget Lester, Project Specialist, Canterbury DHB
There are a variety of health services available to children at birth or within their first 5 years of life, that not all parents are aware of or their children are being connected to health services.

To encourage DHBs to ensure children are connected with these services, the MoH has set a specific performance target – that 95% of children enrolled in Community Dental, Well Child and General Practice Services at three months of age.

To achieve this a number of DHBs have developed multi enrolment forms, however Canterbury DHB wanted to better understand the system and processes before we did this.
In Canterbury there is a Well Child Tamariki Ora Networking Group, who took on responsibility for overseeing the multi-enrolment process.

This group is made up of:
- WCTO providers
- New-born Hearing Screening
- Before School Check
- Immunisation
- Maori and Pacific Providers.
WHAT IS OUR AIM?

- To ensure that all parents in Canterbury know about available health services and that children are connected to these health services.
To enable us to better understand our Health System we looked at the following:

- What was working - looked at current successful child health programmes
- What is not working well - looked at the current gaps within our system, what did we need to achieve – where are our issues.
- Worked with the WCTO Facilitator, to better understand the patients needs and understanding of the system.
- We also looked at what other DHBs were doing, because we wanted to ensure a level of national consistency.
CURRENT SUCCESSFUL SYSTEM

In 2009 CDHB undertook a Review of Immunisation services.

• **Clinical Leadership** (General Practice, Practice Nurse, Management), Pharmacy, Maternity, Medical Officer of Health and Maori.

• **Good Measurement** - clear targets set by the MoH, and a good dataset to enable these targets to be monitored.

• **Service Model** – around working as team, regardless of service location. Following the system change, the DHB work hard to track and trace every children and developed the DHB Missed Events Services – to work with general practices, families and outreach to facilitate vaccinations.
CHALLENGES WITH CURRENT SYSTEM

• There is no DHB wide child health database, which captures all services and children.

• There are a number of children not accessing these health services, as the system is not connecting new children to our DHB.

• There are a number of children who are being recalled for services, which it looks like the DHB is not reaching, but they have actually left our DHB.

• Service challenges
  • WCTO - Choice of provider, Role Clarification, Database, Timely Referral
  • Oral Health Services - Enrolment process, Database
  • Ethnicity
PARENTS VOICE

- At a Well Child Tamariki Ora provider level we undertook patient interviews so we could better understand their needs. This told us
  - Patients wanted choice of services
  - Wanted to be better connected
  - Wanted providers that would support and listen to them
  - Often felt unsupported by providers, who were just ticking a box.
  - Often parent did not know about health services, and did not know what their children were entitled too, especially those new to our DHB.
• Other DHB had developed multi-enrolment forms to be completed at birth, these are then sent to someone load the initial information, and normally copy and share with other services.

• South Canterbury had developed a new to South Canterbury DHB form.

• Canterbury wanted to build on these ideas.
LEARNINGS FROM THE NIR?

- We looked the NIR and determined it follows patients around the system – once a child has been identified as left the DHB, or new to the DHB – their patient record is updated.

- We also looked at the way the DHB uses the NIR to identify and track every child – could this be used too as the WCTO database as well?

- We had the Titanium database, but this was not live – what could we do to make this as up-to-date as possible?

- Children at birth go on the NIR, then parents are given the choice to opt them off – could this be applied to other health services?
WHAT IS OUR AIM?

- To ensure that all parents in Canterbury know about available health services and that children are connected to these health services.
WHAT DID WE NEED TO ACHIEVE THIS?

· We needed a way to connect children to health services, in a seamless manner. To achieve this we needed
  1. We needed a way to capture a child at birth
  2. Capture children when they moved in and out of our DHB, to reduce duplication and time spent recalling children who were not living in our DHB (4000 kids on the Oral Health Database).
  3. A system that was easy and simple to use – and that did not require excessive amounts of administration hours.
  4. We needed clear process and clinical leadership.
WHAT DID WE DEVELOP?

· LinKIDS is the child health coordination service with three key functions
  1. Managing around newborn enrolments in Canterbury
  2. Managing patient flows in and out of the DHB
  3. Providing a support service to parents to link them with Child Health Services
NEW-BORN ENROLMENT PROCESS

- The New-born Enrolment Process sees all newborn enrolled in a suite of child health services at birth
  - Oral Health
  - New-born Hearing Screening
  - National Immunisation Register, and through this early notification to general practice
  - Well Child initial notification

- Families can choose to opt out of one or all of these services, by contacting LinKIDS after the birth of their child.
NEWBORN ENROLMENT PROCESS
Canterbury

Congratulations on the arrival of your new baby. Your child is entitled to FREE health services. Your child’s details are recorded at birth and will be shared with the following services to enrol your baby in these services.

Universal Newborn Hearing Screening Early Intervention Programms
Every year in New Zealand, up to 170 babies are born with significant hearing loss. Without early detection, these babies may have speech and language delays and be unable to develop adequate communication skills. You will be offered a free newborn hearing screening to check whether your baby can hear well. The screening test is simple and will not hurt or harm your baby. You can be with your baby during screening and you will be told the results straightaway. If you are not satisfied with the result you will be given an appointment for an appointment for an appointment for a second test. The information you provide is confidential to the ORS and to the National Screening Unit which monitors the programme. 

National Immunisation Register (NIR)
NIR is a computerised information system that records immunisation in New Zealand. All health professionals are quickly notified when you vaccinate your child has been given and ensure the right vaccine is given at the right time.

You will receive a letter from NIR telling you to confirm your child’s details and that you are happy for their information to be held.

Your General Practice (GP) Team
Your GP team provides a range of free services for children from birth to 13 years. Providing your child’s information will ensure they are enrolled with a General Practice.

You need to contact your General Practice team to confirm this enrolment before baby’s six-week check.

Community Dental Services
This is a free service for children and adolescents 0-18 years of age. Your child’s first visit will usually begin to appear shortly after the first 6 months of age. Dental education, preventative and basic treatment are provided free of charge from Community Dental Services. Your child will be automatically enrolled in these services at birth. Arrangements will be made for your child to be seen before they are two years of age. Your local provider will provide you with advice and support until this first visit occurs. Talk to them if you have issues, and they will be keen to see your child sooner at Community Dental Services.

EBaby
As parents you will have the opportunity to identify your child’s ethnicity. This may not be exactly the same as the mother’s ethnicity, so your GMC will ask you a standard ethnicity question for your child.

Well Child Tumutari Ora Provider
This is a free service that will support you to ensure your child grows and develops to their full potential. This is offered to all New Zealand children from birth to four years. The enrolment information you have provided assists the Well Child provider that your child has enrolled Well Child Services are provided by five local organisations. Please see options below. Your GMC will confirm your child’s birth at.

Well Child Tumutari Ora Services are provided by these groups:

<table>
<thead>
<tr>
<th>PROVIDER</th>
<th>WHAT DO THEY OFFER?</th>
<th>CONTACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taumarere &amp; Owera Trust</td>
<td>Health focussed service across Canterbury</td>
<td>0800 65 9917</td>
</tr>
<tr>
<td>Phonet</td>
<td>Community health service across Canterbury</td>
<td>03 385 3700</td>
</tr>
<tr>
<td>Public Health Nursing Service</td>
<td>Community health service for the Waikato and Bay of Plenty regions</td>
<td>0800 330 650 (Waikato)</td>
</tr>
<tr>
<td>Taumata Health</td>
<td>Health focussed service in Taumarere</td>
<td>07 315 5807</td>
</tr>
<tr>
<td>Ika Health</td>
<td>Health focussed service in Taumarere</td>
<td>07 585 1020</td>
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When do these visits occur?

<table>
<thead>
<tr>
<th>TIME</th>
<th>CHECK</th>
<th>COMPLETED BY</th>
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</thead>
<tbody>
<tr>
<td>Birth-4 weeks</td>
<td>Newborn Check</td>
<td>Midwife</td>
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<tr>
<td>4-11 weeks</td>
<td>Newborn Check</td>
<td>Midwife</td>
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<td>24-48 weeks</td>
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</tr>
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<td>52-60 weeks</td>
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</tr>
<tr>
<td>6-12 months</td>
<td>Well Child Assessment</td>
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</tr>
<tr>
<td>2 years</td>
<td>Well Child Assessment</td>
<td>Well Child Tumutari Ora</td>
</tr>
<tr>
<td>3 years</td>
<td>Transfer from Midwife to Well Child Tumutari Ora Service and Community Dental Service</td>
<td>General Practitioner Team</td>
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<td>4 years</td>
<td>Immunisations</td>
<td>General Practitioner Team</td>
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<td>5-6 years</td>
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<td>13-15 years</td>
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<td>18-21 years</td>
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</tr>
<tr>
<td>22-25 years</td>
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</tr>
<tr>
<td>26-28 years</td>
<td>Well Child Assessment</td>
<td>General Practitioner Team</td>
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</table>

Information Sharing

The demographic information (Name, Date of Birth, Gender, Ethnicity, Contact details) recorded by your GMC at your child’s first visit, will be electronically or manually passed to the health organisation “Service” identified on the form. This process will be coordinated by UHKDS (Health Communication Services, Geraldton), located alongside the COHIS National Immunisation Register team.

The information held by UHKDS will be used to:
1. Support your child’s enrolment with the Services listed on this form.
2. Ensure that demographic information from Services to ensure children remain engaged in Services.

The purpose of sharing this information is to ensure that children are enrolled in the Services as quickly and efficiently as possible and to ensure that the Services have as up to date information as possible to be able to meet with parents and guardians to deliver these Services. 

Declining or Opting out of these services

Declining enrolment

If you do not want to enrol your child in any or all of these Services, please contact UHKDS on 0800 555 121, once your child is born. You can decline enrolment in these services at any time, once your child is born.

Opting out

If you wish to have your child enrolled, but do not want your child’s information to be shared with them by UHKDS, or between them as detailed above, you can opt out of this information sharing process. To opt-out of this information sharing please phone UHKDS on 0800 555 121 once your child is born. You will be asked to sign an opt-out paper to finalise this process. It will then be your responsibility to contact each Service to enrol your child.

Declining or opting out of these Services will not impact access to other Health and Disability Services. If you elect to decline an opt-out you can change your mind at any time by contacting UHKDS.

April 2017

phone: 0800 155 121
email: UHKDS@health.govt.nz
PO Box 1690, Greymouth
WHAT DO WE WANT TO USE IT FOR?

- In the 3rd trimester – LMCs are asked to share the New-born Enrolment information with parents. Copies of this are also available at birthing suite.

- At birth the child's data is collected from Caresys to share with Oral Health, NIR and New-born Hearing Screening.
  - Information is also shared with WCTO providers but this does not remove the need for a formal referral at between 2-4 weeks of age.
  - For all homebirths, BBA or children not born in a CDHB facility – manual enrolment will be required – this will occur via the current NIR 1 form.

- We want to be able to share this information between service providers to locate children who are not accessing services.

- A record is kept of children moving to or out of our DHB and any notified deaths and share this among the service providers.
PATIENT TRANSFERS

- LinKIDS sits alongside the CDHB NIR team.
- Our LinKIDS administrator – has taken over the management of the NHI registration report, looking for children new to our DHB
- As the NIR a real time database, it is the best source of patient transfers. All children new to CDHB, or who have moved DHBs are notified to LinKIDS. A record of these are shared with the Child Health services, to ensure children are connected with these services.
LinKIDS Master Spreadsheet is updated with the following information:

- Child’s NHI, name, address, caregiver, contact numbers and any additional information we are made aware of.
- This applies to all children who have transferred in and out of our DHB, gone overseas, deceased, homebirths, BBA. This is emailed to the services on a weekly basis to update their databases (since May approx. 1090 records)
- Deceased notifications are flagged and emailed immediately upon notification.
- All families (immigrants, transients, refugees etc) new to the DHB are sent a welcome letter and ‘New to Canterbury’ flyer which advises them on services and support available to them.
- Opting Off - we are notified via phone or email, a letter is sent to the family to confirm this. The relevant service will be notified who will then follow their standard process for opt offs.
WHAT DO THE SERVICES DO WITH THE INFORMATION

• Dental – will send a welcome letter to confirm enrolment, and indicate a recall will occur at the next milestone age eg 2,3,4 years old

• NBHS – to cross reference with their database and contact any new babies

• WCTO – to track deceased children (linkage processes to yet to be worked through and agreed)

• General Practice – use the data from NIR to B code children, to enable their E enrolment.

• NIR – to load and contact any new children.
1st June 2017

Dear [Care_Giver_Name],

Welcome to LinkIDS Canterbury

We are aware that you have recently moved into the Canterbury Region. Your child/children may be eligible for a variety of core health services such as:

- Newborn Hearing Screening
- Oral Health services
- National Immunisation Register
- General Practice
- Well Child Tamaki Ora

We have shared your information with these services to assist in enrolment. Your child/children’s health is very important to us and our aim is to ensure all families are connected with these services and can access them if needed.

Please find enclosed the following resources: “Are you a new family to Canterbury?” which may be helpful to you.

If you do not want your child/children’s information to be shared please contact LinkIDS on the details below.

Yours faithfully,

[Care_Giver_Name]

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NEW to New Zealand?

[Details on services for new arrivals]

Caring for your children

[Information on services for children]

Are you a new family to Canterbury?

[Further information and how to enrol]
FEEDBACK AROUND LINKIDS

- In the 4 months, no children have been opted off LinKIDs
- We have received no complaints from parents
- We have though been contacted by parents who did not know about services, and they have now been connected
- LMCS have been supportive of the change, and like the fact they don’t need to complete another form.
LINKIDS RECORDS UNTIL 31 AUGUST

**Individual Records**

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<td><strong>Grand Total</strong></td>
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<td><strong>578</strong></td>
<td><strong>225</strong></td>
<td><strong>912</strong></td>
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FUTURE OPPORTUNITIES

- Improved linkages between DHBs for transfer of patients for all services, not only NIR
- New to CDHB form – roll out wider e.g. large employers, preschools
- Improved patients information – HealthInfo
- Linking children with other Child Health services – eg Early Start, B4SC

- At a national level, we should be looking at ways to use the NIR to support other services, could it be the national child health database?
QUESTIONS?

- Further information contact
- bridget.lester@cdhb.health.nz
- LinKIDs@cdhb.health.nz
- phone 0800 555 121