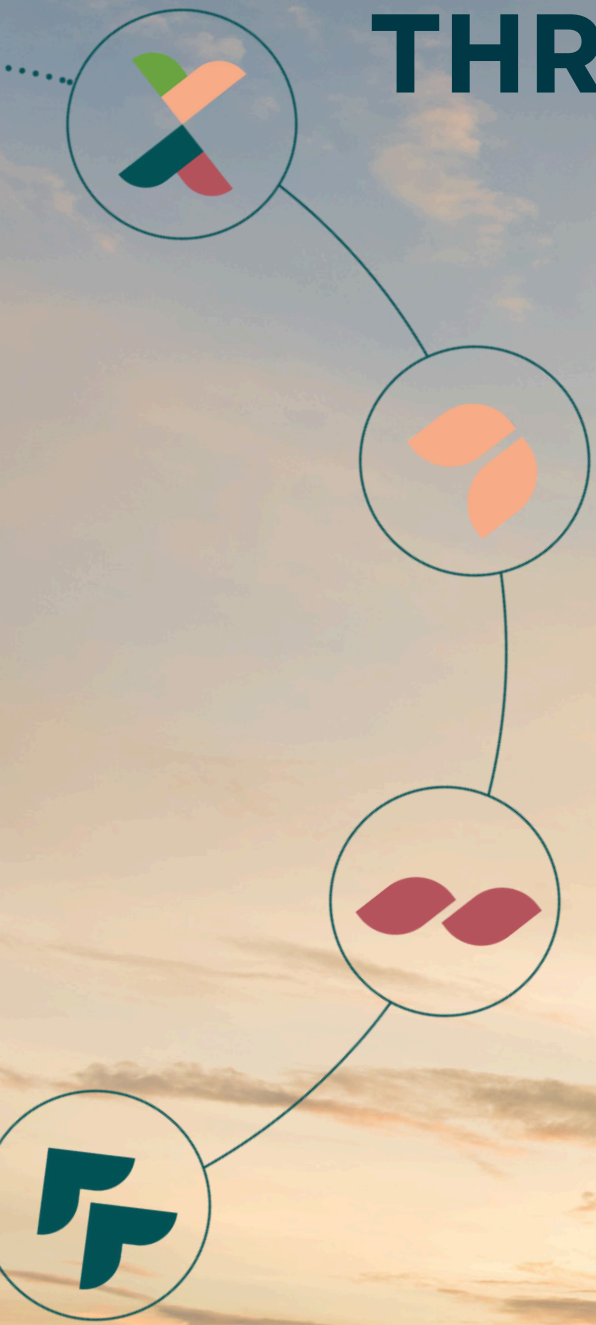


A DISCUSSION:
**LEADING CHANGE
THROUGH DATA &
INSIGHTS**

BASED ON CONVERSATIONS WITH HEALTH
SECTOR PROFESSIONALS AT THE 2024
HiNZ DIGITAL LEADERSHIP SUMMIT

WITH SUPPORT FROM



Foreword

Over the past few years, we have navigated several complex challenges in the health sector at a fast pace. While the urgency of the pandemic has cooled off, there is still much to be done to improve healthcare services in Aotearoa. As a leading technology company in the digital health space, we're excited to be part of the change in shifting towards an insights-driven culture across the sector.

Data and insights are an integral part of leading transformation in our sector, particularly as the advent of AI brings some promising opportunities to tackle wide-ranging problems, including delivery, accessibility, equity, and workforce development. But as we know, AI can only be part of the solution and we require strong leaders who can steer the ship. Leading change through analysis and actionable insights is a strategic advantage, one that we'd encourage health leaders to prioritise in their upcoming agendas.

Being able to analyse data and turn it into action gives us a leg up. As we take advantage of developing technologies, using data to drive efficiency and innovation has never been more within reach. The challenges we face—integrating massive data sets, ensuring data quality, outcomes measurement, and building a capable workforce and culture—are stepping stones to building a future where our health sector is effective, responsive, and fit for purpose.

We might not have all the solutions yet, but we're confident they're out there. While technology can handle the grunt work, we still need people to design, create, and respond to the needs of our sector. It is up to us to ask the right questions, pull the right information, and build our systems so that every New Zealander can access healthcare when and how they need it.

This overview was compiled based on notes taken from conversations our team had at the 2024 HiNZ Digital Health Leadership Summit. We'd like to thank all the participants who contributed to this discussion. Your experiences and whakaaro are deeply valuable and sow the seeds of the change we all hope to bring about for the people we serve.



Jo Scothern
CE, Wild Bamboo



Data collection practices

Participants raised challenges with data collection and usage, integrating data systems within the healthcare context.

Most participants shared that data was being collected to some extent, but were unsure what the data was used for and if it was even in a usable state. Data is also collected in different systems, making it difficult to synthesise and make useful: *“We’re connecting pipes that don’t have the same liquid.”* Integrating disparate data systems is important for creating cohesive, comprehensive insights that can drive strategic decision-making. Working to implement interoperability standards would facilitate the exchange of data across systems, enabling healthcare professionals to access comprehensive patient records and insights.

Similarly, it was noted that an existing barrier to effective data collection is setting up collection methods without burdening already-stretched healthcare professionals. Issues such as poor data coding and system inconsistencies often hinder streamlined data collection processes. To mitigate these challenges, there should be investment in methods that enhance data coding accuracy and promote standardisation across different systems. Addressing inconsistencies ensures the reliability and consistency of collected data, which would optimise its usage without adding unnecessary workload.

Once data is in a usable, streamlined form, actionable insights can then be pulled to address some key sector challenges.

We’re dealing with multiple systems of data to make sense of... How do we generate usable insights for decision-makers and come up with answers?

We don’t want to over-collect data that isn’t going to be utilised. Collecting poor quality data detracts from our actual roles.

Clinicians at the table expressed that they experience high levels of digital burnout and felt unsupported to train and keep up with rapidly developing digital systems, all while operating in a stretched climate where there is not enough capacity to fulfil demand. They supported the idea of collecting data, but in ways that didn’t ‘reinvent the wheel’.

The quality of data is not restricted to its format or structure, but the lens that is used to define the parameters of the data is important. In essence, we must ensure that we are asking the right questions to determine the quality of the input. We must centre people in our data practices to warrant the collection of meaningful, relevant data while balancing quantitative metrics with qualitative insights. Advocating for person-centred data practices entails actively involving patients, experts, support workers, and healthcare providers in the data collection process, soliciting their input on the types of data points that are most valuable for informing care decisions. A suggested starting point is to shift the conversation back, away from the metrics to identifying the underlying human need behind it. In many cases, this results in realising the original metric is not the most appropriate measure, which would prompt a shift to alternative metrics to meet the same need. This mitigates the risk of measuring arbitrary results that are not meaningful.

Participants in the discussion recognised there were quality pieces of data in silos, especially existing knowledge in pockets that has not been picked up on from recorded data points. There are questions around how to collate this information from sources to feed into the data input. Furthermore, there was a strong sentiment amongst participants that having access to large amounts of data does not guarantee its value. Part of the data collection process is making data valuable and usable by ensuring its accuracy, relevance, and accessibility. Once this has been achieved, it can be put towards informing insights for strategic decision-making.



Using data safely

Stewardship and sovereignty

Issues of governance and sovereignty must be considered during the collection and use of data. As raw data collected from people will be used extensively in the process, it is imperative to understand its intended use and who defines its parameters.

Some discussion participants regarded stewardship to encompass the responsibility and guardianship over data, while others felt strongly about sovereignty, which offers the individual rights and ownership over their data. All agreed that data must be used ethically, responsibly, and in the best interest of all stakeholders. Data collectors must recognise the privilege they hold and affirm their responsibility to utilise the data in a way that respects the human rights of the individuals.

Under sovereignty, ownership should remain with the individuals, but holders of data must emphasise privacy, control, and access rights for individuals.

The goal is to move from a state of being ‘data-rich but insight-poor’ to one where data drives meaningful insights and actionable outcomes.

One important question to ask is how to balance between big scale analysis and the ability for frontline care providers to self-serve and access data themselves for information they need to best serve their patients.

When integrating insights into decision-making, it is inevitable that data must be shared with other parties. To balance the need for data sharing with privacy concerns, we must explore methods of sharing data in an anonymous manner. By anonymising data, sensitive information can be protected while still being utilised for valuable insights.



Keeping people at the centre of change

Participants agreed that to achieve better population health outcomes, it is imperative to consider the voices that aren't in the room and to prioritise underserved groups. We must ensure that data collection methods are inclusive and representative of diverse populations. Without concerted effort in capturing the needs and voices of underrepresented groups, it is difficult to avoid perpetuating biases and disparities in healthcare delivery.

Effectively leading people through insights-led transformation requires strong leadership and foresight to dig into what the data stories tell us. Including diverse perspectives, such as those reflected in Māori data, is imperative for achieving health equity. Leveraging data and insights can help address disparities in healthcare delivery and prevent individuals from falling through the cracks. By identifying patterns, trends, and areas of improvement, we can implement targeted interventions and ensure equitable access to quality care for marginalised groups.

One suggestion emerged where rather than solely focusing on those who are already engaged with healthcare services, there is a need to divert attention towards understanding the reasons behind low uptake users. By identifying barriers to access and engagement, healthcare providers can tailor interventions to better meet the needs of users who may lag behind.

**The solutions lie in the stories,
but quantifying the human
condition is difficult.**

Participants raised the complexities around capturing and using qualitative data and storytelling. While it is relatively straightforward to measure inputs and activities using quantitative measures, assessing outcomes is a more nuanced task. Clinicians and healthcare professionals are often not trained to measure outcomes effectively, leading to a focus on processes that may no longer be relevant, rather than results.

There is much to be gained from complementing quantitative data with qualitative data to gain a more comprehensive understanding of healthcare outcomes. Quantitative data provides valuable insights into healthcare outcomes, but it often lacks context and depth. Currently, some contracts lack alignment between outcomes, measures, and reporting, which further adds to confusion when trying to drive progress. The solutions lie in the stories, and integrating qualitative data and personal stories into clear measures leads to a more comprehensive understanding of the factors influencing health and wellbeing.

A data-driven decision-making culture

Truly embracing data-driven decision-making requires more than just technological infrastructure—it necessitates a fundamental shift in organisational culture and mindset. To see meaningful change, leaders must foster a culture that values data insights to guide proactive care and strategic interventions.

A strong vision of what the transformation looks like is crucial for bringing staff onto the waka, which is key to effective change management. For organisations to implement a data-driven culture, staff must understand what is required of them and how they can contribute. Participants expressed that they have not seen a clear vision, leading to confusion and disengagement. Co-design should begin from the ideation phase and involve diverse stakeholders to ensure buy-in. People want to know what's expected of them and how they are going to contribute to the journey, and it's important to remember that this might change throughout the process.

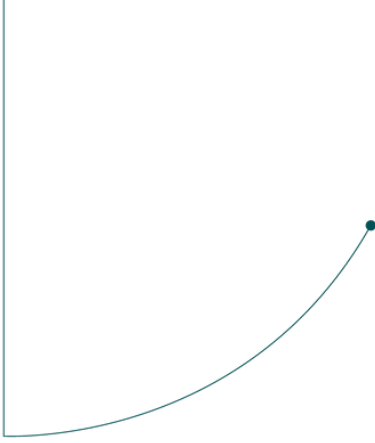
Part of effective co-design is weaving in whakawhanaungatanga. Intentionally making time for relationship-building is essential for fostering collaboration and trust among stakeholders. Engaging people at all levels from the beginning ensures that everyone feels invested in the cultural shift towards data-driven decision-making.

There is a need to shift towards measuring outcomes rather than metrics, and metrics should be constantly evaluated to check they are still telling the stories in alignment with outcomes, rather than feeding a political narrative. Metrics should be used to measure progress objectively, avoiding subjective interpretations that may shine a light on some parts of reality but ignore significant other parts.

In a data-driven culture, people should be supported to embrace new technologies. To improve uptake, leaders should invest in digital literacy and upskilling. This will allow staff to understand the potential of data and effectively participate in co-designing solutions, and have the capability to easily implement data collection and processing practices into their work.

“If you can't measure it, then it's not helpful” means that lots of insights are lost. We still work in a system that doesn't value the stories.





He aba te mea nui o te ao?

What is the most important thing in the world?

He tangata, he tangata, he tangata

It is the people, it is the people, it is the people



Wild Bamboo is the charitable software company behind Recordbase, a client management solution for the social sector and Tūtohi, a pioneering data analysis and insights team at the forefront of innovation in impact reporting. Our purpose is to enrich the performance of organisations through unleashing the power of data and insights. We're proud to be developed by the sector for the sector, and to support Aotearoa's social care and community organisations to make a difference.