

Best Start Pregnancy Tool

End User Guide

Best Start background

Best Start Kōwae (modules) provides tools which enable consistent comprehensive best practice assessment of health and wellbeing needs of a hāpū māmā and her pēpī throughout the pregnancy utilising appropriate enquiry, investigations, management and referral to support services.

The Best Start Pregnancy tool has been constructed by considering what constitutes best practice in pregnancy care in New Zealand and consolidates this in one tool.

Wellbeing, equity and child health are key government priorities.

The point of difference for the Best Start Pregnancy tool is the built-in decision support, enabling identification of issues and early intervention, which ultimately will improve health and wellbeing outcomes for hāpū māmā and pēpī.

Generation2040 proposes a focus on pēpī Māori, from conception (or confirmation of pregnancy Māori),¹ maternal antenatal care to the 6-week pēpī assessment and helping māmā access existing services.

About this manual

This manual explains Best Start functionality for end users and describes how to use the workflow to capture data for assessment of hāpū māmā.

Glossary

Abbreviation	
EDD	Estimated Date of Delivery
EPAT	Early Pregnancy Assessment Tool
LMP	Last menstrual period
PMS	Patient Management System
URL	Uniform resource locator, a protocol for specifying addresses on the internet

Document Control

Document	Version	Assigned to	Type	Date
Best Start End User Guide	V0.1	Bronnie Farnell	Author	29/11/2019
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Best Start End User Guide	V1.0	Bronnie Farnell	Update	15/05/2020
Best Start End User Guide	V1.0	Bronnie Farnell	Update	15/08/2020

¹ The pregnancy ethnicity question: 'is your baby/pēpī Māori?'

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Introduction and overview

The workflow expectation is that the Best Start form will follow common practice , with embedded tools to support decision making activities and provide information on best practice presented in support of an assessment response.

Access

Best Start Assessment tool is embedded into the PMS as an advanced form, the tool is available via secure URL for end users without access via PMS.

PMS	Tool access
Indici SEHR	Yes
Medtech 32	Yes
Medtech Evolution	Yes
My Practice	Yes
Intrahealth-ProfileMac	Browser version
I'health Profile Windows	Browser version
Best Practice VIP Gold	Yes

Functionality

The tool has the following functionality:

- Is a web form embedded into the Practice Management System (PMS)
- It can be parked and resumed at another time
- The tool requires a consent to view after the initial submission
- The user interface is a set of 'tabs' to enable easy workflow navigation
- The form writes back to the PMS system.
- The workflow provides access to evidence-based decision support including links to HealthPathways
- Supports invoicing for Section 88 services.

Decision Support

The tool provides a means to build algorithm for decision support, used for complex assessments facilitating early intervention for best practice in primary care.

Icons

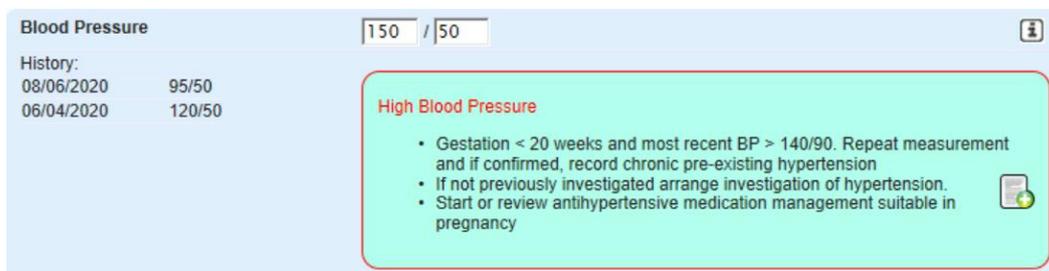
The icons serve as a "traffic sign" leading the user to a function, data file or recommendation.

Icon	Description
	Decision support information detail relating to the question
	Launches Health Pathways or practice equivalent assessment, management information guide
	Launches community pharmacy guide on safe medication practice in pregnancy
	Patient handout on ante natal blood tests
ICON	refresh

Workflow

Navigation is via a set of tabs, within each tab are question sets, responses are captured using a checkbox, radio button (yes/no) or free text fields (max. characters 125). On the **next** command the next tab opens, the ability to move between tabs is at user discretion. Once questions have been answered the tab is ticked ✓, categories with outstanding questions to be answered are denoted by **X**, unanswered questions within the tab are displayed in **red** font.

Decision Support is triggered by answers to questions, the support can be recommendations which land in the Actions tab, the recommendations appear in an aqua filed alongside or below the question



Blood Pressure 150 / 50 

History:

08/06/2020	95/50
06/04/2020	120/50

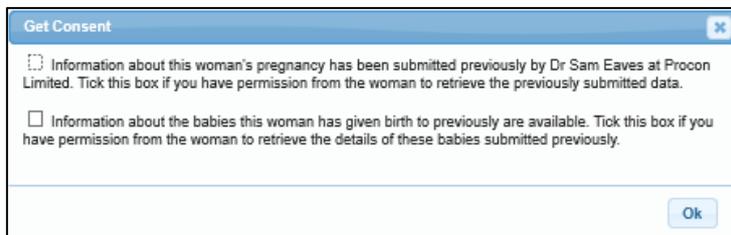
High Blood Pressure

- Gestation < 20 weeks and most recent BP > 140/90. Repeat measurement and if confirmed, record chronic pre-existing hypertension
- If not previously investigated arrange investigation of hypertension.
- Start or review antihypertensive medication management suitable in pregnancy 

Recommendations are supported by links to Healthpathways. The information fields provide an additional layer of support as to why the questions has been asked.

To start an assessment

1. Click on Advanced Forms (shiftF3)
2. Select Best Start
3. Click ok to start a new form or acknowledge information permissions consent using check boxes, this acknowledges the user has permission to access the assessment previously started.

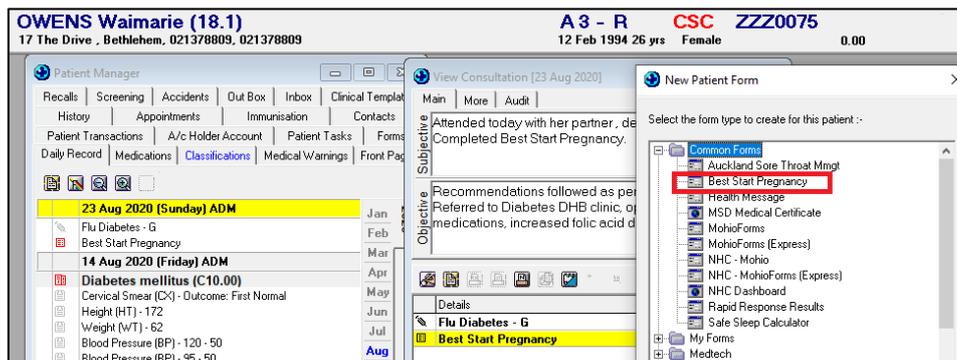


Consent window

Launch from PMS

The form is accessed via Module, Advanced Forms, New Form (Shift F3). The form will auto populate with data from the PMS; demographics, medical conditions, and regular medications.

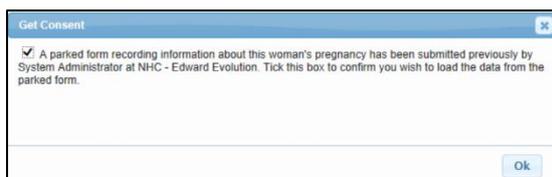
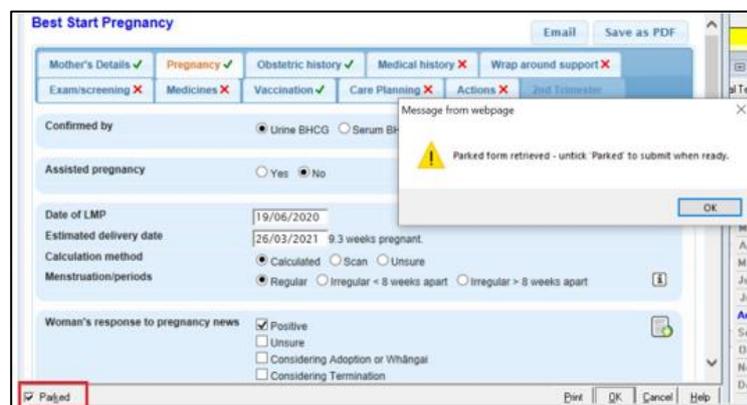
Any triggers set in the form will activate from the PMS.



The assessment can be parked.

To unpark

1. Double click on the assessment from Consult Details window or access via Shift F3
2. Check the consent box
3. Uncheck the Parked box, bottom left corner of the windows.

Best Start Pregnancy

Mother's Details ✓	Pregnancy ✓	Obstetric history ✗	Medical history ✗	Support ✗	Exam/screening ✗
Medicines ✗	Vaccination ✓	Care Planning ✓	Actions ✗	2nd Trimester	

Best Start Tabs

The following summarises each category.

Mothers Details

Populates from the PMS; provides NHI, Last and First Names, DoB, and Ethnic Groups. The DHB is identified to link the localised support services, the General Practice enables us to provide reporting.

Best Start Pregnancy Email Save as PDF

Mother's Details ✓	Pregnancy ✓	Obstetric history ✓	Medical history ✗	Wrap around support ✗
Exam/screening ✗	Medicines ✗	Vaccination ✓	Care Planning ✗	Actions ✗
2nd Trimester				

NHI

Last name

First name

Date of birth

What ethnic groups does the woman belong to?

- NZ European
- Māori
- Samoan
- Cook Island Māori
- Tongan
- Niuean
- Chinese
- Indian
- Other such as Dutch, Japanese, Tokelauen
- Not known

DHB in which patient resides

General Practice where mother is enrolled

Pregnancy

Covering EDD, LMP, confirmation of pregnancy by method, Urine BHCG or Blood BHCG. ethnic group pēpi belongs to, IWI affiliation, and initial response to pregnancy news.

On selection of Māori, the IWI selection fields are activated. By consenting to sharing iwi data we can provide non-identifiable information to iwi to support the well-being of their iwi. Verbal consent is required.

Date of LMP	<input type="text" value="08/10/2019"/>
Estimated delivery date	<input type="text" value="16/07/2020"/> 8.6 weeks pregnant.
Calculation method	<input checked="" type="radio"/> Calculated <input type="radio"/> Scan <input type="radio"/> Unsure
Periods	<input checked="" type="radio"/> Regular <input type="radio"/> Irregular < 8 weeks apart <input type="radio"/> Irregular > 8 weeks apart

New Pregnancy LMP EDD



Obstetrics History

Gravida and Parity, and partner detail.

Gravida	<input type="text" value="2"/>	
Parity	<input type="text" value="1"/>	
Is this the first pregnancy you have had with your current partner?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know	
Previous Births (> 20 weeks gestation)		Is this the first pregnancy with the person who is the father of this pregnancy (question assumes this is the mother's current partner)

Add Baby captures detail of previous births; including names, year of birth, gestation, gender, weight, birth method, outcome, common complications and congenital problems. This information needs to be manually entered once, it will auto-populate with each subsequent pregnancy.

Multiple birth? <input checked="" type="radio"/> Single <input type="radio"/> Twin <input type="radio"/> Triplet <input type="radio"/> Other	
Birth method <input checked="" type="radio"/> Spontaneous <input type="radio"/> Vacuum Extraction <input type="radio"/> Forceps <input type="radio"/> Ceasarean - Emergency <input type="radio"/> Ceasarean - Elective	Birth weight <input type="text" value="4200"/> grams, or <input type="text" value="9"/> lb <input type="text" value="4"/> oz
Outcome <input checked="" type="radio"/> Alive <input type="radio"/> Stillbirth <input type="radio"/> Other cause of death	
Did you have any pregnancy-related health conditions in this pregnancy? <input type="radio"/> Yes <input checked="" type="radio"/> No	

Obstetric History Outcomes

Medical History

Long term health conditions with information populating from PMS. Manual entry is through checkboxes with free text fields available to capture more detail. A list of options for Personal or Genetic conditions is provided. Mental Health and Anxiety questions are extracted from PHQ2 and GAD7 respectively.

Anxiety Screening	
Over the last two weeks, have you been bothered by:	
Feeling nervous, anxious, or on edge? <input checked="" type="radio"/> No <input type="radio"/> Yes	Not being able to stop or control worrying? <input checked="" type="radio"/> No <input type="radio"/> Yes

Medical History Anxiety

Support

Focussing on the environment, capturing data on cigarettes, drug and alcohol, healthy homes and intermittent family violence.

Is there anyone in your house who is a tobacco smoker?	<input checked="" type="radio"/> No <input type="radio"/> Yes
Do you use e-cigarettes/vape?	<input checked="" type="radio"/> No <input type="radio"/> Yes
How often do you have a drink containing alcohol?	<input checked="" type="radio"/> Never <input type="radio"/> Monthly or less <input type="radio"/> 2-4 times a month <input type="radio"/> 2-3 times a week <input type="radio"/> 4 or more times a week

Screening Environment

The i (information) popup provides a prompt on when and how to ask questions related to family violence.

Because family violence affects a lot of women and children, we ask about it in pregnancy.  

Is there anyone in your life whom you are afraid of, who hurts you in any way or prevents you from doing what you want to do? Yes No

Is there anyone at home who makes you feel you are no good or worthless? Yes No

Have you ever had a relationship with someone who made you feel afraid, hurt you, or made you have sex when you didn't want to or in a way you didn't want? Yes No

Are you afraid of your partner or ex-partner? Yes No

Have you been hit, kicked, punched, or hurt by someone in the last year? Yes No

Family Violence

- Determine risk category and decide on appropriate support. 

Exam & screen

Baseline recordings, routine and infection risk screening and STI. Previous Blood Pressure results will populate the window under History.

Blood Pressure / 

History:

08/06/2020	95/50
06/04/2020	120/50

Heart Sounds Normal Abnormal

Pre-pregnancy Weight Kg BMI: 21 (recorded 02/03/2020)

Weight today Kg BMI: 21.6

Height Cm

Weight Gain in Pregnancy

- Refer to [Healthy Weight Gain in Pregnancy Poster](#)
- Recommended weight gain of 11-16kg 

Healthy diet and weight gain for BMI recommendations Education provided Written information provided

Routine Screening

Medicines

Current medications will populate from PMS with fields to capture supplements, remedies and rongoā (traditional medicines). Pregnancy Medications; Folic Acid, Iodine, Aspirin, Calcium and Vitamin D questions and decision support recommendations triggered by data capture in previous categories.

Review Medications: (Long term or prescribed in last 6 months)

No long term medications recorded.

Medication review

Nil

Any supplements or alternative medications? Yes No

Rongoā or other cultural or traditional healing practices? Yes No

Already taking folic acid? Not currently Regular dose (0.8mg daily) High dose (5mg daily)

Reasons for high dose folic acid

- History of neural tube defect in mother, father or their children
- Maternal diabetes mellitus
- Coeliac disease (or other malabsorption state)
- Sickle cell anaemia
- Spina bifida
- Anencephaly
- Taking antiepileptic medications
- No reasons for high dose folic acid

Prescribed today Not required Regular dose (0.8mg daily) High dose (5mg daily)

Medications

Vaccinations

Influenza and Pertussis vaccination status, with the ability to add a Recall, when selected an "Add Recall" pop up window appears, providing the user with a date picker to enter recall date, this functionality is only supported in PMS.

Influenza vaccine
'Given' on 04/05/2020

Given Today/Declined

Pertussis (Whooping Cough) vaccine
No pertussis vaccine recorded, but recall has been added

Given Today/Declined Add Recall

Add Recall

Recall date: 29/09/2020

Add Recall Cancel

Vaccinations Add Recall

The Given Today/Decline button in the assessment opens the "immunisation" section in the PMS enabling the user to record either a decline or a given (or anything else appropriate). Once the user has recorded status in PMS the user clicks on the "refresh" button, the display will update the status.

Care Planning

Capturing delivery choices, during pregnancy, labour and birth and post-natal contraception.

Identifying and confirming a LMC, with links through to Find Your Midwife website and the ability to add a recall to follow up on LMC engagement.

Have you thought about where you may want to have your baby? Community birthing unit At home

Maternity care
 Midwife
 Requires secondary or tertiary care
 Private Obstetrician

Has a midwife been confirmed?
 Yes No

Information provided on finding a midwife

Find Your Midwife:

Message from webpage

 Recall set for 1 week

Care Planning Birthing choices

Actions

Summarises assessment data capture that has triggered an action.

Action required	
Not yet actioned	
No further action required	

Healthy Homes

- Consider requesting Healthy Homes Initiative. Check criteria in pathway 

No Further Action Required
 Action Required
 Completed

Referred

Last updated 31/08/2020 by System Administrator (NHC - Edward Evolution)

Family Violence

- Determine risk category and decide on appropriate support. 

No Further Action Required
 Action Required
 Completed

Weight Gain in Pregnancy

- Refer to [Healthy Weight Gain in Pregnancy Poster](#)
- Recommended weight gain of 11-16kg 

No Further Action Required
 Action Required
 Completed

Last updated 31/08/2020 by System Administrator (NHC - Edward Evolution)

Action Summary Tasks

Send email

The form can be sent as a pdf within the assessment, the end user must gain consent and acknowledge in the popup window.



Send email

Email pregnancy summary to:

I have discussed the security and privacy implications of sending this information by email with the mother and have received her consent to send this information by email to the above recipient.

Save as a PDF

Summarises assessment into Report format and presents as pdf. Annotates name of assessor and date of assessment. PDF can be saved to desktop/file and emailed to referral agency.

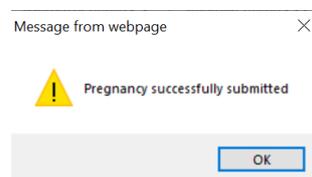
To **edit** a saved assessment

1. Launch the patient on the palette
2. Click on Module,
3. Click on Advanced Forms
4. Click on New
5. Click on Best Start Pregnancy or Shift F3, a popup window will alert the user to “Get Consent” to access the form.

Submit

To complete the form

1. Click on Submit



Message from webpage

! Pregnancy successfully submitted

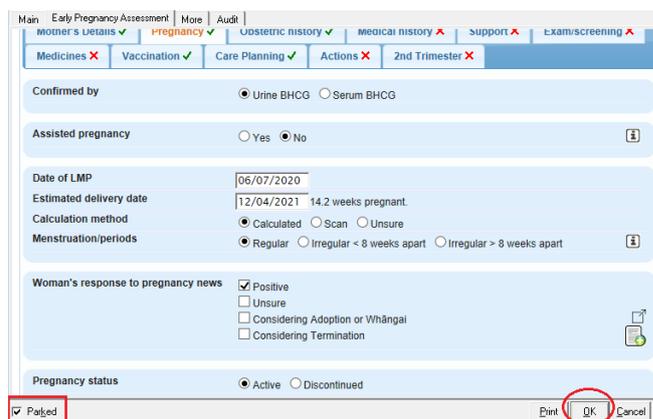
OK

Park

Enables the user to park the form to complete later or by another user

To park

1. Click on Park
2. Click ok.



Main | Early Pregnancy Assessment | More | Audit

WOMEN'S DETAILS | Pregnancy | Obstetric history | Medical history | Support | Exam/screening

Medicines X Vaccination ✓ Care Planning ✓ Actions X 2nd Trimester X

Confirmed by Urine BHCG Serum BHCG

Assisted pregnancy Yes No

Date of LMP

Estimated delivery date 14.2 weeks pregnant.

Calculation method Calculated Scan Unsure

Menstruation/periods Regular Irregular < 8 weeks apart Irregular > 8 weeks apart

Woman's response to pregnancy news Positive Unsure Considering Adoption or Whāngai Considering Termination

Pregnancy status Active Discontinued

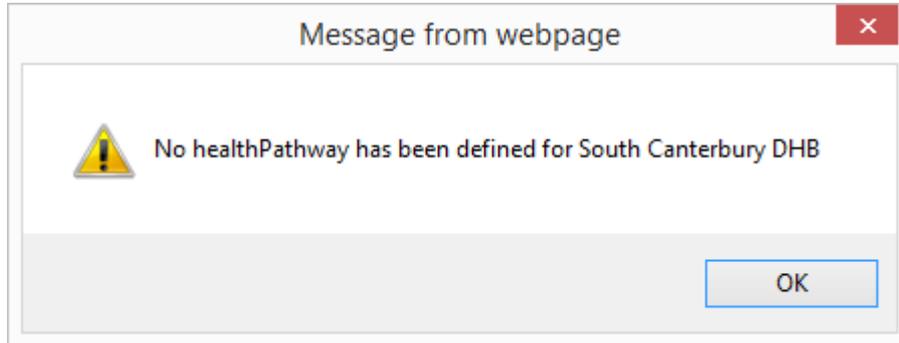
Parked



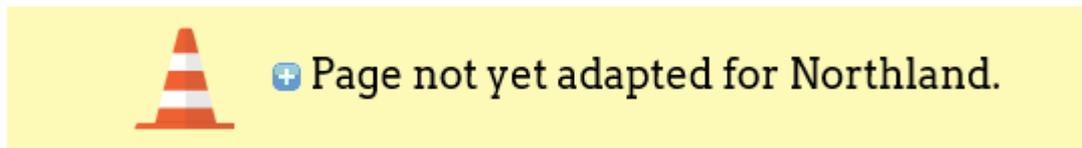
HealthPathways

We rely on your local HealthPathways editor to provide us with the links, we work to have these localisations ready for Go Live, rarely they are not available. If not, and the PHO wishes to proceed with some form of pathways support we can with consent from Auckland Regional Pathways team install their pathways as a short-term solution.

If there is no link to healthPathways provided for the DHB:



If we have a link but it is not localised:



If