

# 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),<sup>1</sup> 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
Best Start End User Guide	V0.2	Penny Elliot	Review	06/12/2019
Best Start End User Guide	V1.0	Bronnie Farnell	Update	15/05/2020
Best Start End User Guide	V1.2	Bronnie Farnell	Update	15/08/2020
Best Start End User Guide	V1.5	Bronnie Farnell	Update	25/11/2020

<sup>1</sup> 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

## 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

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

## PMS Assessment form feed

Best Start writes back to the PMS the following

- A short consult note confirming that a Best Start Pregnancy Assessment has been completed.
- The LMP and EDD
- Height
- Weight
- Screening (which can be interpreted by Patient Dashboard and other tools e.g. Mōhio)
- Blood Pressure
- Recall for Pertussis
- Recall checking on midwife engagement
- Recall for Fluvax.

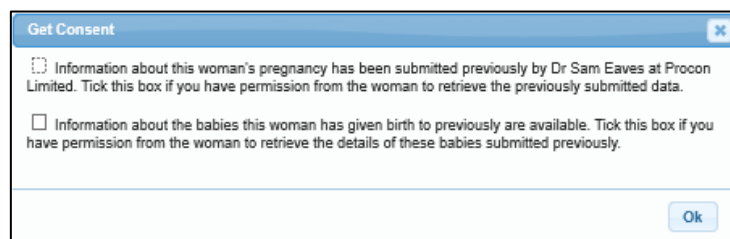
The form, as completed, is saved to "Forms". The formatted assessment is saved to the patient's outbox.

PMS integrates to Best Start with

- Medical history
- Medications
- Ht
- Wt
- BP history

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.



**Get Consent**

Information about this woman's pregnancy has been submitted previously by Dr Sam Eaves at Procon Limited. Tick this box if you have permission from the woman to retrieve the previously submitted data.

Information about the babies this woman has given birth to previously are available. Tick this box if you have permission from the woman to retrieve the details of these babies submitted previously.

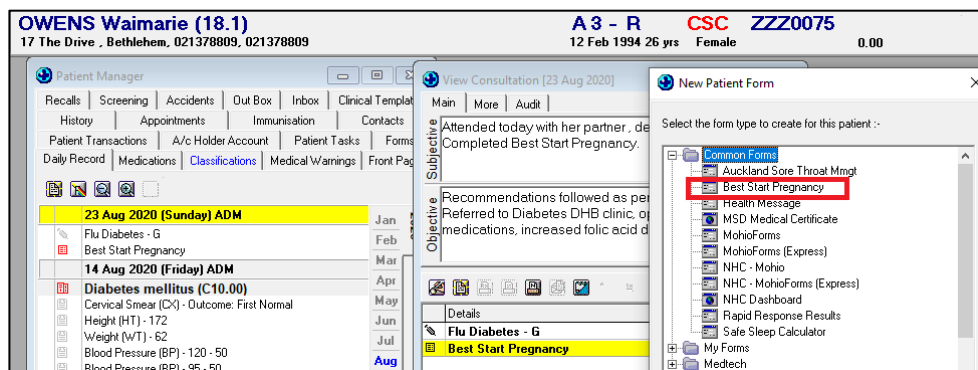
Ok

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.



**OWENS Waimarie (18.1)**  
17 The Drive, Bethlehem, 021378809, 021378809

**A 3 - R CSC ZZZ0075**  
12 Feb 1994 26 yrs Female 0.00

**New Patient Form**

Select the form type to create for this patient :-

- Common Forms
  - Auckland Sore Throat Mngt
  - Best Start Pregnancy**
  - Healin Message
  - MSD Medical Certificate
  - MohioForms
  - MohioForms (Express)
  - NHC - Mohio
  - NHC - MohioForms (Express)
  - NHC Dashboard
  - Rapid Response Results
  - Safe Sleep Calculator
  - My Forms
  - Medtech

## Consent

The 'tick box' indicates the woman has given verbal consent to data collection for the purpose of the Gen2040 Project. The non-identifiable data is solely for the purpose of evaluation and improving outcomes for hapū Māmā and their pēpi, particularly pēpi Māori.

The **information button** activates a descriptive summary of the data collection request for the Gen2040 equity project.

## Parking

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.

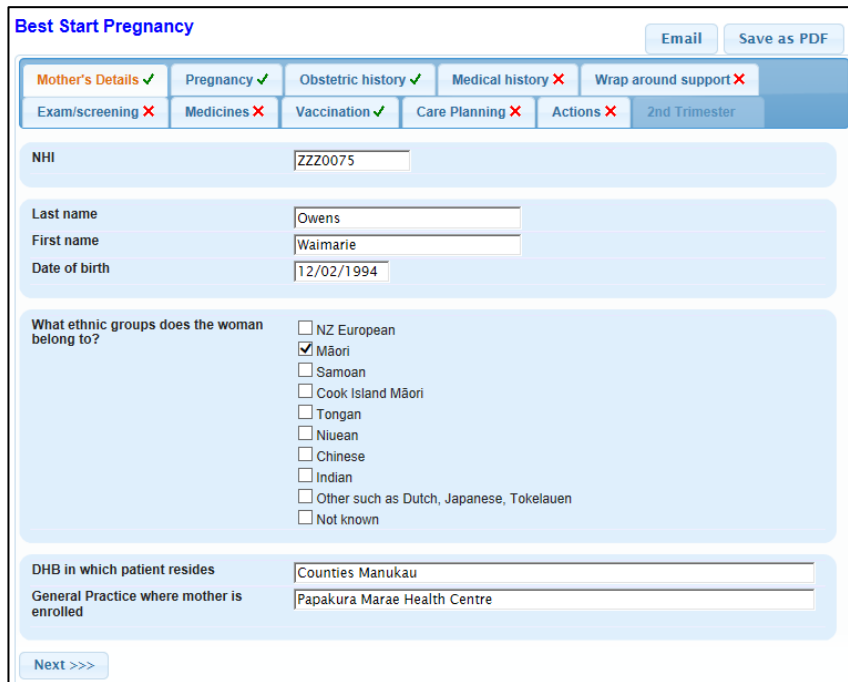
## Best Start Pregnancy

*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

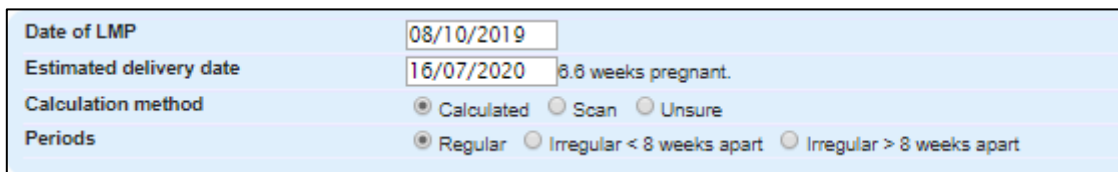
General Practice where mother is enrolled

[Next >>>](#)

### 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

Estimated delivery date  8.6 weeks pregnant.

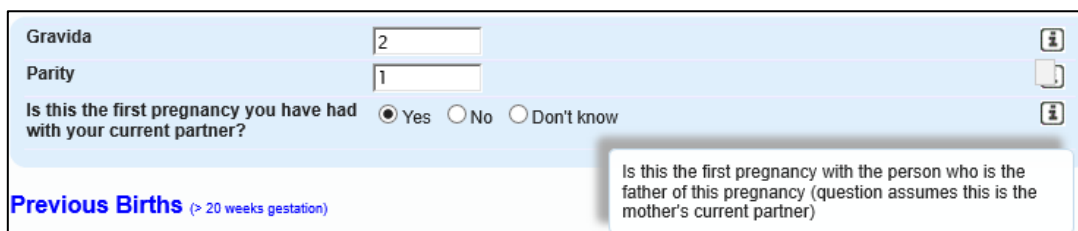
Calculation method  Calculated  Scan  Unsure

Periods  Regular  Irregular < 8 weeks apart  Irregular > 8 weeks apart

New Pregnancy LMP EDD

### Obstetrics History

Gravida and Parity, and partner detail.



Gravida  i

Parity  i

Is this the first pregnancy you have had with your current partner?  Yes  No  Don't know i

**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.

Add Baby
✕

Baby's first name

Year born

Gestation (in weeks)

Gender  Male  Female  Indeterminate

Ethnicities of the baby

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

Multiple birth?  Single  Twin  Triplet  Other

Birth method Birth weight

Spontaneous  grams, or  lb  oz  
 Vacuum Extraction (Ventouse)  
 Forceps  
 Caesarean - Emergency  
 Caesarean - Elective

Outcome  Alive  Stillbirth  Other cause of death i

Did you have any pregnancy-related health conditions in this pregnancy?  Yes  No

Congenital problems

*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**

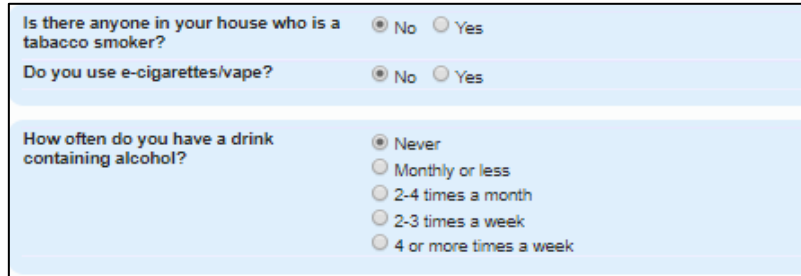
Over the last two weeks, have you been bothered by:

<p>Feeling nervous, anxious, or on edge?</p> <p><input checked="" type="radio"/> No <input type="radio"/> Yes</p>	<p>Not being able to stop or control worrying?</p> <p><input checked="" type="radio"/> No <input type="radio"/> Yes</p>
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*Medical History Anxiety*

### Support

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



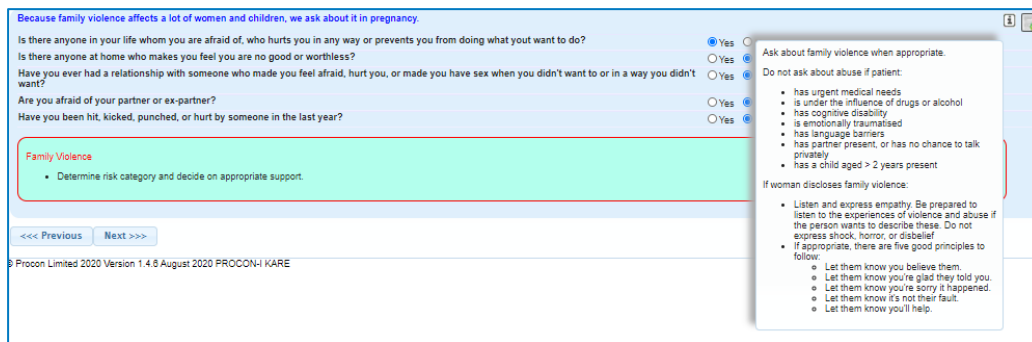
Is there anyone in your house who is a tobacco smoker?  No  Yes

Do you use e-cigarettes/vape?  No  Yes

How often do you have a drink containing alcohol?  Never  
 Monthly or less  
 2-4 times a month  
 2-3 times a week  
 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.

Ask about family violence when appropriate.

Do not ask about abuse if patient:

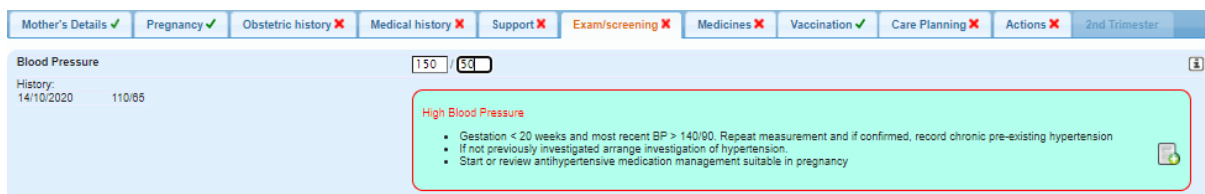
- has urgent medical needs
- is under the influence of drugs or alcohol
- has cognitive disability
- is emotionally traumatised
- has language barriers
- has partner present, or has no chance to talk privately
- has a child aged > 2 years present

If woman discloses family violence:

- Listen and express empathy. Be prepared to listen to the experiences of violence and abuse if the person wants to describe these. Do not express shock, horror, or disbelief.
- If appropriate, there are five good principles to follow:
  - Let them know you believe them.
  - Let them know you're glad they told you.
  - Let them know you're sorry it happened.
  - Let them know it's not their fault.
  - Let them know you'll help.

### Exam & screen

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



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

Blood Pressure 150 89

History: 14/10/2020 110/65

**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.

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

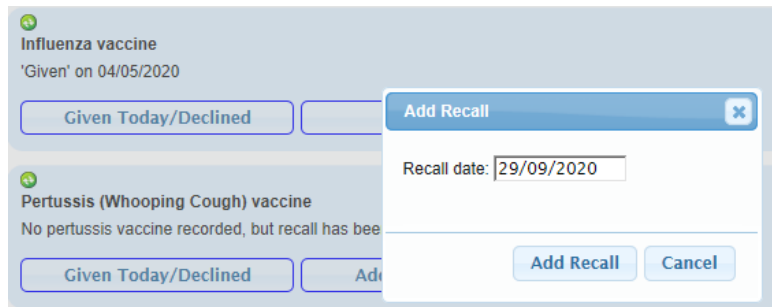
Rongoā or other cultural or traditional healing practices?  Yes  No

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.



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.




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

[Empty text box]

**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

[Empty text box]

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 ✕

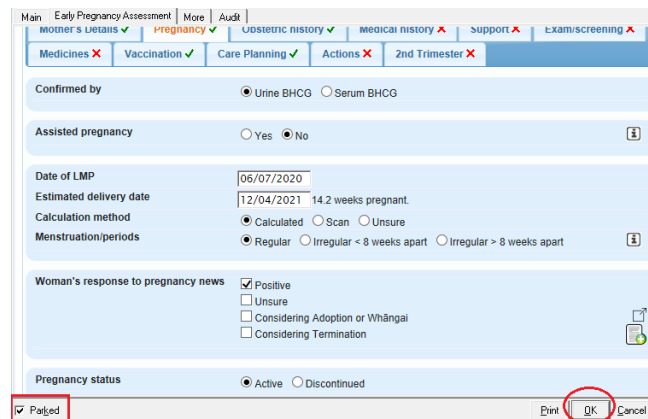
 Pregnancy successfully submitted

## Park

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

To park

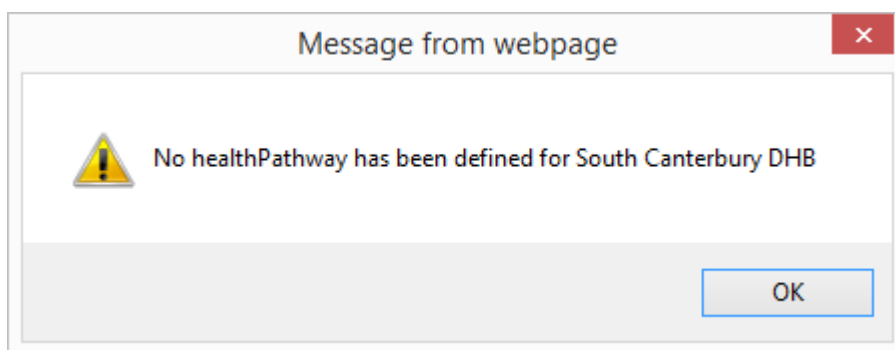
1. Click on Park
2. Click ok.



## 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.

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



If we have a link but it is not localised:

