Introduction to the Shared Digital Health Record

Guide for Primary Care

Version 2 - August 2026

Same workflow, connected data,
better care everywhere

Health New Zealand
Te Whatu Ora

Introduction

This guide provides information about the Shared Digital Health Record data service to help primary care providers make an informed decision about participating.

A separate guide provides step-by-step instructions on how to register and onboard your organisation for information sharing services with Health New Zealand | Te Whatu Ora (Health NZ). A copy can be found on our webpages: Steps to get access to health data[1]

A third guide: *Shared Digital Health Record: patient communications and managing privacy choices* provides information and resources on communicating with staff and patients about the Shared Digital Health Record, as well as managing patient privacy choices. A copy can be found on our webpages: Shared Digital Health Record help and support (healthnz.govt.nz/SDHR-help).

> If you have questions about the Shared Digital Health Record data service or feedback on this guide, complete the Shared Digital Health Record provider support form:
>
> Help and support – Shared Digital Health Record (healthnz.govt.nz/SDHR-help)

[1] https://www.healthnz.govt.nz/health-professionals/guidance-standards/topic/digital-technologies/digital-services-hub/for-health-service-providers/how-to-get-access-to-health-data

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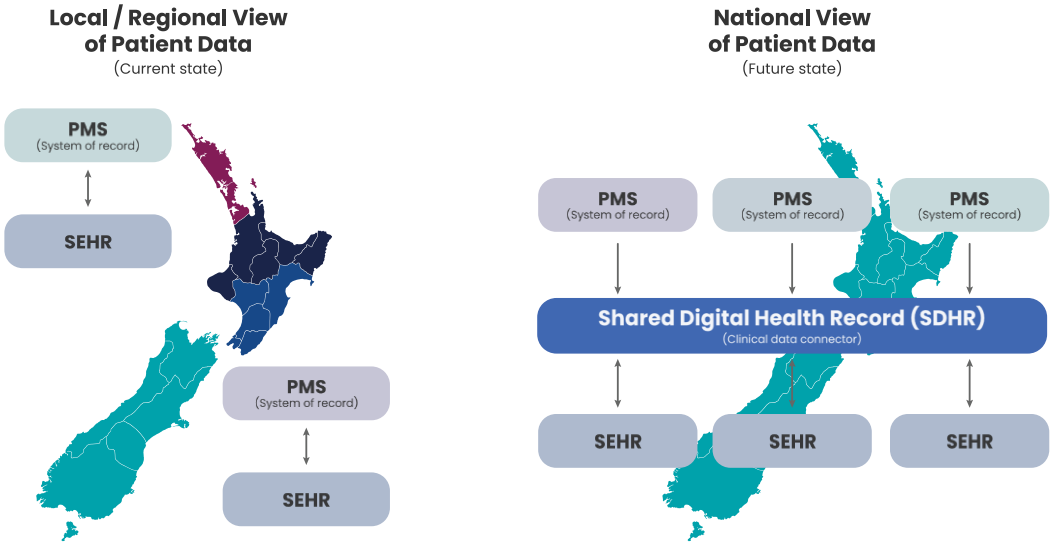
1.0 Overview

1.1 About the Shared Digital Health Record

Health NZ is developing the Shared Digital Health Record – a data service that will enhance the information clinicians' access through existing shared electronic health records (SEHR) by providing a national view of patient health information.



Shared Digital Health Record providing a national view of patient health information

If a person is away from home and needs urgent medical care, the healthcare provider will be able to see their important health information – such as existing health conditions and medications. They will be able to make treatment and care decisions based on a more complete understanding of a person's health.

The Shared Digital Health Record is not a new application, clinical tool, or patient portal. It is a data service which connects health information across the country. Clinicians will be able to view this data through their existing systems, e.g., their SEHR.

Health NZ is working with healthcare consumers, health professionals and health IT suppliers to develop this service, to give healthcare providers a more complete, national view of their patients' health information.

Health NZ will support primary health organisations (PHOs) to work with general practices to collect read-only versions of data held in practice management systems (PMSs). There are no changes to the workflow for clinicians. Health NZ is working with PMS vendors to ensure data sharing is happening in the background, to minimise disruption to day-to-day business.

Patients can limit the information shared via their healthcare provider or contact Health NZ to completely opt out of having their information shared through the Shared Digital Health Record.

1.2 Participating in the Shared Digital Health Record: Overview

> Your PMS remains the authoritative system of record for patient data.
>
> Data shared through the Shared Digital Health Record will only be used for clinical purposes and is separate from data being collected for other initiatives like the National Primary Care Dataset.

Register your interest. The first step in participating in the Shared Digital Health Record is to register your organisation's (practice's) interest. This is done via an online form which collects basic details and checks eligibility to join the service.

Due diligence and assurance checks. Your organisation will need to complete a privacy and security assessment to confirm its practices can safely share patient information with Health NZ.

Information Access and Use Agreement and supporting Shared Digital Health Record schedules. Your organisation will need to enter into the Health NZ Information Access and Use Agreement. This agreement will also include individual service schedules setting out the specifics for providing data (PMS information acquisition schedule) and viewing data (data service schedule) through the Shared Digital Health Record.

More information about these steps is provided in the *Joining Health NZ information sharing services* guide. A copy can be found on our website: Steps to get access to health data**Error! Bookmark not defined.**

Notify patients: You'll need to provide information about the Shared Digital Health Record to your patients and give them an opportunity to consider their participation options. Patients are opted in by default but can limit what is shared or completely opt out of the Shared Digital Health Record. They can also change their sharing preferences at any time. A minimum three-week notification period will happen before any patient data is acquired. Health NZ has developed communication resources and templates to support communication to patients. More information is provided in the *Shared Digital Health Record: patient communications and managing privacy choices* guide: Shared Digital Health Record help and support (healthnz.govt.nz/SDHR-help)

Secure PMS data sharing. Patient information from participating practices is securely copied from the PMS into the Shared Digital Health Record in two stages:

- **Initial data load for enrolled patients only:** Selected historical information about enrolled patients who remain opted in will be copied to the Shared Digital Health Record during the initial set up with your PMS.

- **Ongoing updates:** Anytime an opted in patient's record is updated in the PMS, a copy is also shared with the Shared Digital Health Record. This includes updates for enrolled, new and casual patients.
  More information is provided in the *Shared Digital Health Record: patient communications and managing privacy choice* guide: Shared Digital Health Record help and support (info.health.nz/SDHR-help).

Health NZ national dataset sharing. The Shared Digital Health Record will also share on-demand information from other Health NZ national datasets, such as immunisations from the Aotearoa Immunisation Register and medications from the Medicines Data Repository.

Viewing patient information for clinical care. Health information provided by the Shared Digital Health Record will become available over time. Regional SEHR services like HealthOne, indici SEHR, Your Health Summary and ManageMyHealth SEHR will be able to start integrating with Shared Digital Health Record data sources from late 2026. Clinicians will hear more from their SEHR provider when they begin sharing patient information from the Shared Digital Health Record.

For a process map about participating in the Shared Digital Health Record see Appendix 1

1.3 Information that will be shared

The Shared Digital Health Record has been designed to support clinical decision making. Health NZ worked with a clinical advisory group to understand what information is useful for diagnosis and care.

1.3.1 Information collected from your PMS

Participating practices' PMSs will send a copy of the following information to the Shared Digital Health Record.

- **Health conditions** – such as asthma, diabetes, and other conditions (sometimes referred to the 'Classifications list' in PMSs)

> Medtech users: Any conditions recorded in the 'Patient History' section of Medtech will not be sent to the Shared Digital Health Record.

- **Observations** – including vital signs like temperature, heart rate, blood pressure, respiratory rate, pulse oximetry (SpO2); as well as weight, height and others.
- **Allergies and intolerances** – for example, an allergy to a medicine like penicillin.
- **Future additions – appointment details and consultation notes**. Information may include details around the type of visit, date and facility.

> Further discussions will be undertaken with the sector about consultation notes and how these would be provided.

No information will be shared where PMS confidentiality settings have been applied, or the patient has opted out of the Shared Digital Health Record.

1.3.2 Health NZ national datasets

The following information will be shared from existing Health NZ datasets, while respecting the privacy choices of patients:

- **Immunisation history** – from the Aotearoa Immunisation Register
- **Medications** – prescribed and dispensed medicines from the Medicines Data Repository
- **Future additions: Diagnostics** – such as laboratory and radiology results
- **Future additions: Secondary care information** – such as referrals, clinical letters and hospital discharge summaries.

1.4 Access to the information

SEHR providers will be able to begin transitioning their systems to use the Shared Digital Health Record data sources from late 2026. After these systems are updated, their clinical users will begin to have national access to patient information for providing care.

Immunisation and medication data is expected to be integrated with the Shared Digital Health Record later in 2026. Access to primary care data is expected to be from mid-2027.

You will hear more from your SEHR provider on what and when you'll have access to the Shared Digital Health Record data.

It is expected that clinical SEHR users from the following healthcare settings would have access:

- ambulance
- hospitals
- medical practices (including general practice, urgent care, online general practice and after-hours services)
- pharmacy
- residential facilities with responsibility for the resident's medical care.

Note: This list may change, and the guide will be updated if new healthcare settings are added.

In the future, patients may also have access to their information in the Shared Digital Health Record, if a patient portal develops this functionality and the vendor meets Health NZ's information sharing privacy and security requirements.

Health NZ will oversee:

- which healthcare settings can access the information: for example, general practice, first responders, urgent care and telehealth
- the types of information they can see.

To view the information in the Shared Digital Health Record, organisations must:

- have a signed Health NZ Information Access and Use Agreement and associated Shared Digital Health Record data service schedule
- use an approved SEHR – SEHR providers will also enter into an Information Access and Use Agreement with Health NZ and must meet strict privacy and security requirements.

There are strong privacy and security controls in place to protect patient data and to monitor who accesses it. For more information, refer to section 3 on Privacy, controls and security measures.

2.0 Shared Digital Health Record benefits

It is important for practices and patients to fully understand the benefits and impacts of sharing information when deciding whether to participate in the Shared Digital Health Record.

2.1 Benefits for patients

The Shared Digital Health Record will give healthcare providers access to their patients' important health information, no matter where they are in the country. This will give them a more complete picture of a person's health, so they can make informed decisions about treatment and care.

It will be especially helpful for people with long-term conditions, who see multiple clinicians. With the Shared Digital Health Record, those clinicians will be able to see the care others have provided, meaning the patient may not need to answer repeated questions or tests. It will also be very valuable in emergency situations, particularly if a person is unable to communicate.

Without access to a shared health record:

- The healthcare provider must diagnose and treat based on the information the patient can give them.
- There may be no access to information about the patient's health conditions, vital signs, or allergies to medicines – healthcare providers can spend time trying to find this information.
- Tests or investigations may have to be repeated.
- The patient has to remember and repeat their medical history, which can be stressful and difficult, especially when they are unwell.

With the Shared Digital Health Record:

- The healthcare provider can access the patient's core health information, even if they are from another region, and quickly provide safe, appropriate treatment.
- The patient receives care quickly, making it less likely they will return to their GP even sicker. This takes pressure off their general practice by reducing workload.

Example: Travelling for work

Currently: A woman from Wellington visits Auckland for work. At a meeting, she begins to slur her speech. She is taken to hospital with a suspected stroke. Because she is from Wellington, doctors in the hospital in Auckland cannot access her medical information.

With the Shared Digital Health Record: Auckland hospital staff can access her medical history. They see she has a history of migraines with speech loss. They can treat her quickly, knowing this important information.

For more patient benefit scenarios, see Appendix 2: Patient benefits

2.2 Benefits for healthcare providers

More complete information about a patient: Clinicians will be able to access more information about their patient upfront, helping them to make better decisions about their care.

Example: Treating students from out of town

Currently: Margaret Perley is head of Student Health Services at Otago University. She says that 85% of their students aren't from Dunedin, with many from the North Island.

"At the moment, if we see a student from the North Island, we often have to call or email their general practice to get the information we need. A lot of people can't remember things like the medication they're on or their lab results. Sometimes a double appointment is needed to allow time for this information to come through."

With the Shared Digital Health Record: "Having access to the health information of students who are away from home will really enhance the care we are able to provide. Being able to look that information up when the patient is in the room is really important. Having immediate access to a person's health information will be so much better for practices and patients."

2.3 Impact on practice operations

The Shared Digital Health Record will have minimal impact on healthcare providers' business-as-usual activities. The workflow and the systems you use remain the same and you will continue to use your PMS as the authoritative system of record for your patients' data.

2.4 PMS remains authoritative system of record

The Shared Digital Health Record takes a read-only copy of the data from your PMS; it doesn't change or update it. Your PMS is the authoritative system of record for patient data.

2.5 Māori data governance

Adoption of Te Kāhui Raraunga Māori Data Governance model for the Shared Digital Health Record project was endorsed by the project governance group. Work on the practical application of the model is in the early stages.

This work will include ensuring governance arrangements, consumer representation, and practice participation align to Te Kāhui Raraunga model. It will identify opportunities to ensure data infrastructure is designed to support the inherent rights and interests of Māori in relation to the collection, ownership and application of Māori data.

2.6 No break glass option

The Shared Digital Health Record has no 'break glass' option as it will not collect a person's information from the PMS or share information from other Health NZ national datasets if they have opted out or limited access to their information.

This means clinicians may see minimal or no information in the SEHR for that person during a health appointment or in an emergency. If information has been withheld, a notification will appear in the clinician's SEHR. This lets them know that not all information is available and that they may need to ask the person directly for more details, or follow up with other providers.

2.7 You don't need a shared record system to take part

Your practice can still take part in the Shared Digital Health Record, even if you don't use a SEHR. You can still provide your patients' information from your PMS. This makes sure key health information is available to other clinicians if your patients need urgent or unplanned care, anywhere in the country. However, without a SEHR in place, your clinicians won't be able to view information from the Shared Digital Health Record, when providing care to casual patients.

Speak with your PHO about your SEHR options.

3.0 Privacy, controls and security measures

3.1 Privacy principles

The privacy principles the Shared Digital Health Record adheres to are:

- **Transparency and choice**: Patients understand why their information is being collected and shared and have a way to opt out.
- **Respecting existing preferences**: Any privacy settings in PMSs will be respected and maintained.
- **Purpose of use limited**: Patient data is used only for delivering healthcare, to maintain clinician and consumer trust.
- **Auditable**: All access to patient information is logged, with patients being able to request a copy of their shared health records and who has viewed them.

See our website for the full consumer privacy statement and privacy impact assessment (PIA): Privacy: Shared Digital Health Record[2]

3.2 Compliance and legal standards

Health NZ has been working with privacy experts to ensure the Shared Digital Health Record is compliant with the following:

- Privacy Act 2020, including Privacy Principle 3A (IPP3A) – requiring consumer notification when their data is being collected indirectly
- Health Information Privacy Code 2020
- Health Information Governance Guidelines: August 2017
- Government Digital Delivery Agency (GDDA): Information Sharing Standard July 2025.

3.2.1 Summary of compliance requirements

Health NZ has designed the Shared Digital Health Record to:

- meet mandatory security and privacy requirements
- have appropriate governance for the display of health information that is safe for use in clinical settings
- have robust role-based access controls to ensure information is accessed appropriately.

[2] https://www.healthnz.govt.nz/privacy/wider-sharing-of-your-health-information/privacy-shared-digital-health-record

In onboarding to the Shared Digital Health Record, your organisation must do the following:

Providing patient information to the Shared Digital Health Record

- Put in place processes to inform patients about the Shared Digital Health Record and give them an opportunity to opt out or restrict access to certain records. Privacy materials and guidance are provided to assist you to do this.

Accessing patient information via the Shared Digital Health Record

- Display required privacy materials before access to patient data begins.
- Ensure the Shared Digital Health Record information is only being used clinically, to assist with the delivery of patient care.
- Put in place processes to monitor and audit information access, and ensure access to information and its use is aligned with that purpose. This may be completed with the support of your SEHR provider on behalf of your organisation.

3.3 Shared Digital Health Record protections

Healthcare organisations accessing the Shared Digital Health Record through existing shared health records systems must meet certain criteria to protect patient privacy.

- **Access must be justified**: Only healthcare staff with a valid reason can view a patient's record.
- **Role based access**: Restricts system access based on a user's role within an organisation.
- **Data use**: Shared Digital Health Record data can only be used for individual patient care, not for planning, reporting or population health.
- **Regular audits**: Organisations must allow/agree to checks and reports on who accessed data and identify and correct any instances where access to information was unjustified.
- **Detailed logging**: All access to the Shared Digital Health Record data is logged, including the system used, the organisation and facility, and identity of the system users (including their HPI CPN – unique health practitioner identifier).

3.4 Shared Digital Health Record security

Keeping patient data safe in the Shared Digital Health Record involves strong security measures and a coordinated approach between Health NZ, health IT vendors, and system administrators.

The technical design of the Shared Digital Health Record supports security features, including but not limited to:

- encryption of data at rest and in-transit
- access management and authentication capabilities
- security logging and monitoring
- infrastructure protection controls such as firewalling, DDoS protection, threat detection, and malware protection
- rigorous security reviews prior to being given the authority to operate.

The Shared Digital Health Record is being built on a modern secure platform which is actively assessed for compliance against Health NZ's cyber security requirements.

In addition, Health NZ has adopted a risk management approach to identify, assess and manage security risks on an on-going basis.

How security is managed

- Multiple layers of protection are used to keep data secure.
- Access to data is controlled through secure application programming interfaces (APIs) managed through Health NZ's Digital Services Hub.
- The database is hosted on Amazon Web Services in line with NZISM and the GDDA guidelines.
- Authentication and authorisation are managed by the Health NZ Connector Plane which applies security policies to all requests and includes robust logging and auditing of all access to health records.

Practice management systems (PMSs)

- PMSs remain the authoritative source of primary care information.
- They have existing security controls in place for patient information and are required to protect this information.
- They must meet strict security standards, including the Health Information Security Framework (HSIF) and level three of the National Cyber Security Centre's (NCSC) Capability Maturity Model (C-MM), to share data with the Shared Digital Health Record.
- Data is shared using secure Fast Healthcare Interoperability Resources (FHIR) APIs, not direct database access. FHIR is a global standard for exchanging healthcare information electronically.

Shared health records systems

- Systems like HealthOne, indici SEHR, Your Health Summary and ManageMyHealth SEHR must meet Health NZ's security standards to connect to the Shared Digital Health Record services. This includes meeting Health Information Security Framework (HSIF) and level three of the NCSC C-MM.
- They must have role-based access controls, with access limited to clinical staff who are providing treatment.
- They must maintain an audit log of all access to data and ensure information is correctly displayed.
- These systems will access the Shared Digital Health Record on demand, meaning patient information does not need to be duplicated in multiple applications across the health system.

Speak with your PHO about your SEHR options.

4.0 Shared Digital Health Record PMS eligibility

If your organisation is interested in providing patient data to the Shared Digital Health Record, check your PMS meets the following eligibility requirements.

The *Joining Health NZ information sharing services* guide has detailed, step-by-step instructions on how to register and onboard for information sharing with Health NZ: Steps to get access to health data[Error! Bookmark not defined.]

> If the PMS software your practice uses isn't listed, complete the Shared Digital Health Record provider support form: Help and support – Shared Digital Health Record (healthnz.govt.nz/SDHR-help)

4.1 Medtech users

Your practice must be on MedTech Evolution version 9.0.0 or above to share patient information to the Shared Digital Health Record. Your practice must also have Medtech ALEX®. Medtech 32 is not compatible with the Shared Digital Health Record.

For information on how to check what version you're on, refer to the *Requirements to onboard to the Shared Digital Health Record service in Medtech* section of the *Medtech ALEX® & Health NZ Shared Digital Health Record* user guide.

4.2 indici users

Your practice must be on indici version 2.3.4.5 or above to share patient information with the Shared Digital Health Record.

All practices that use indici are automatically upgraded as per their standard rollout schedule. You can check the version number in the footer of the indici browser.

For any issues or questions, contact indici at support@indici.nz or call 07 929 2090.

4.3 MyPractice users

Your practice must be on MyPractice version 26.6.9673.20811 or above to share patient information with the Shared Digital Health Record.

For information on how to check which version you're on, refer to the *Check your practice is eligible* section of the *User guide for MyPractice & Health NZ Shared Digital Health Record.*

5.0 Help and support

5.1 General help and support for healthcare providers

If you need further help and support for the Shared Digital Health Record, our Shared Digital Health Record Help and Support (healthnz.govt.nz/SDHR-help) webpage has:

- practical resources and training materials
- patient communication tools
- onboarding guidance and support
- contacts for onboarding, technical support, privacy and security questions, and patient enquiries.

5.2 Health NZ help and support for patients

Direct your patients to Health NZ to:

- ask a question about the Shared Digital Health Record
- completely opt out (or back in to) the Shared Digital Health Record

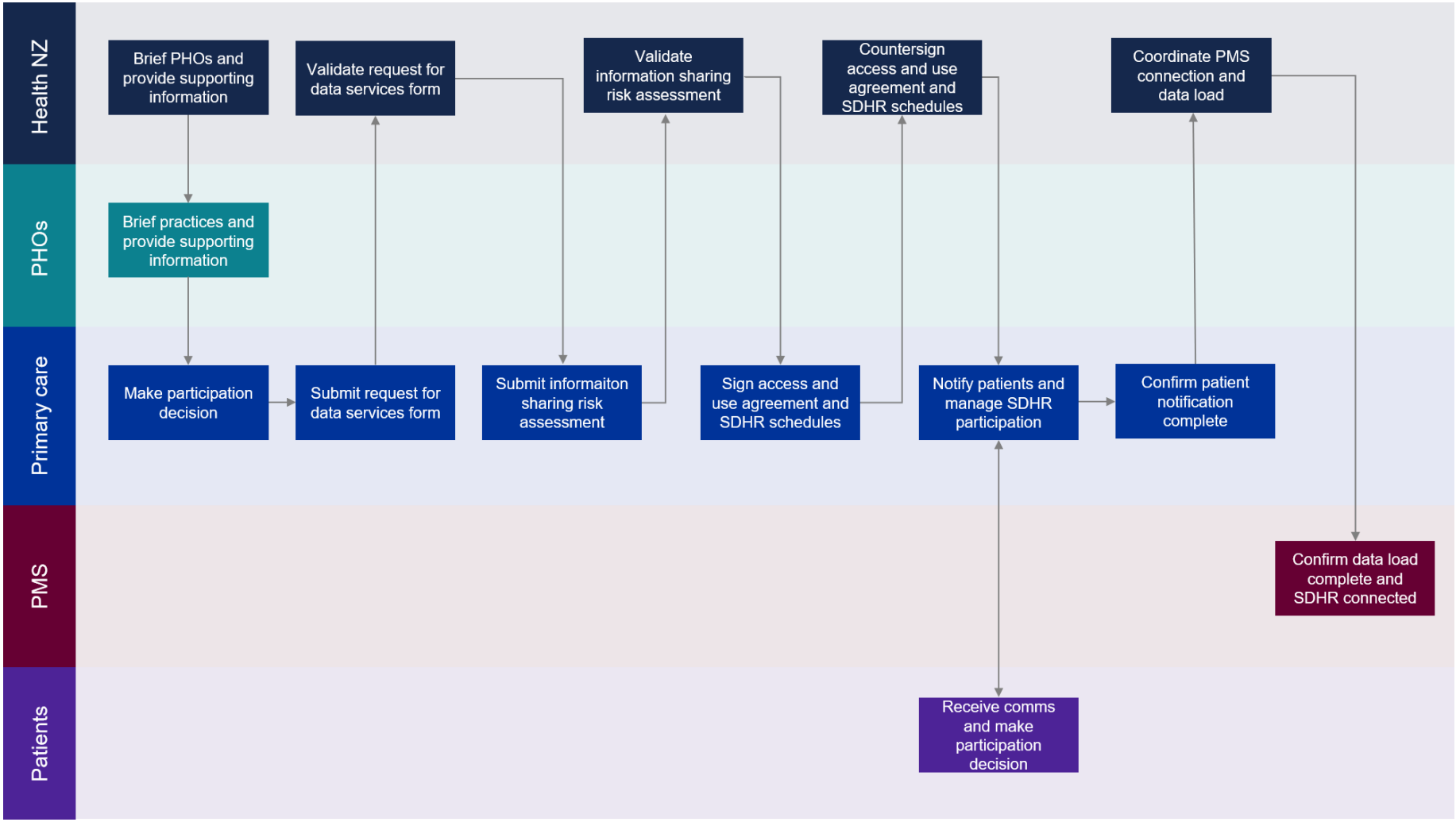
They can contact us by:

- phoning 0800 144 751
- emailing customerservice@health.govt.nz

5.3 Patient privacy questions or complaints

Patients with a privacy question or complaint can contact customerservice@health.govt.nz.

Appendix 1: Participating in the Shared Digital Health Record process map



Appendix 2: Patient benefits

Travelling for work

Currently: A woman from Wellington visits Auckland for work. At a meeting, she begins to slur her speech. She is taken to hospital with a suspected stroke. Because she is from Wellington, doctors in the hospital in Auckland cannot access her medical information.

With shared health information: Auckland hospital staff can access her medical history. They see she has a history of migraines with speech loss. They can treat her quickly, knowing this important information.

Visiting whānau

Currently: An 80-year-old man from Hamilton is visiting his grandchildren in Christchurch and is hurt in a fall. He is allergic to a pain killer but can't remember which one. The ambulance crew can't access his health information to check.

With shared health information: Ambulance crew access the man's health information and see which medication he's allergic to. He is given alternative pain relief safely and without delay.

Festival goer

Currently: An ambulance crew at a Gisborne festival treats a fainting festival goer from Christchurch who is unable to communicate. They treat him for suspected heat exhaustion; unaware he has a heart condition.

With shared health information: The person's heart condition is noted in his shared health information. He is taken to hospital urgently and receives the correct treatment and care.

Sick child

Currently: A rural woman is caring for her grandchildren. During the night, the two-year-old develops a cough and starts breathing faster. Nan knows he has had breathing problems before but cannot recall the details, reach his parents, or confirm his medicines or hospital history. Concerned she might miss something serious, an online GP recommends ED assessment. Nan drives nearly an hour to hospital in the middle of the night with three children.

With shared health information: The online GP can see the child's record, including previous viral wheeze, prescribed inhalers, and no history of severe attacks or intensive care admissions. After a video assessment, the GP reassures Nan that the toddler is safe to stay home, explains his usual management plan, and outlines warning signs to watch for. A long trip to ED in the middle of the night is avoided.