



# Emerging Healthcare Technology

Introducing our team

# Our People



## Jon Herries

Jon has recently returned to NZ from four years in Ireland where he was working in Healthcare and Technology consulting for EY. Previously Jon established the Integrated Care Collaborative for CCDHB and was involved in project management, technology development and analytics. He originally trained and practiced as a Physiotherapist.



## Eileen Duddy

Eileen has worked at the Ministry for the last 10 years where the majority of the time has been in an advisory capacity across IT strategy and investment. More recently working with DHBs and Treasury during the Investor Confidence Rating (ICR) process gaining insight to asset management, P3M3 and benefits management. She comes from UK where she has worked across various organisations within the NHS.



## Mary Crowe

Mary joined the Emerging Health Technology team after six years as a Business Analyst within the Ministry, specialising in Immunisation IT systems. Prior to that she was based in Dunedin administering agreements with Primary and Secondary health providers. She likes pina coladas and getting caught in the rain.



# Emerging Health Technology

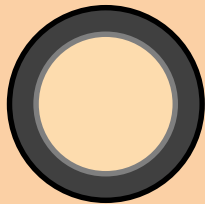
What is  
emerging?

What is  
technology?

Why is this  
important?

## Horizon 1

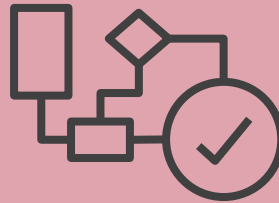
Solutions make  
the status quo  
more effective



For example new tyres  
which make stopping and  
cornering safer in the rain

## Horizon 2

Solutions which  
are a bridge to a  
successful future



An algorithm that makes  
the car safer for the driver

## Horizon 3

Solutions which  
are disruptive



A car that drives itself

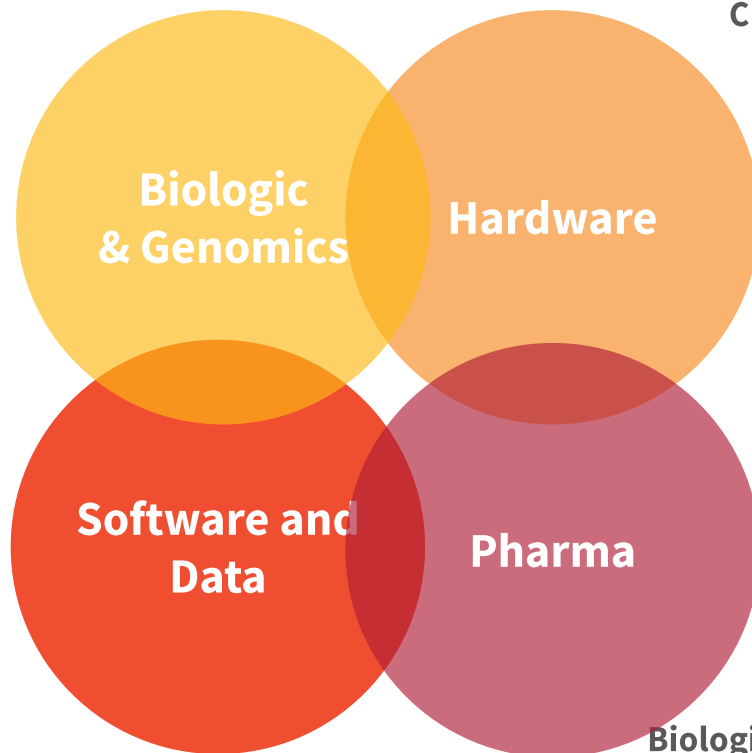


# Emerging Health Technology

What is  
emerging?

What is  
technology?

Why is this  
important?



**Problems and  
Solutions will  
overlap in these  
domains**

Clinical Care  
10%

Biologic &  
Genomics  
30%

Behaviour,  
Environment &  
Individual  
Circumstances  
60%

**We need to think  
beyond patient  
facing  
technologies**



More than **7**  
per day

●  
1960

2017





In 2008 a whole genome sequence  
cost

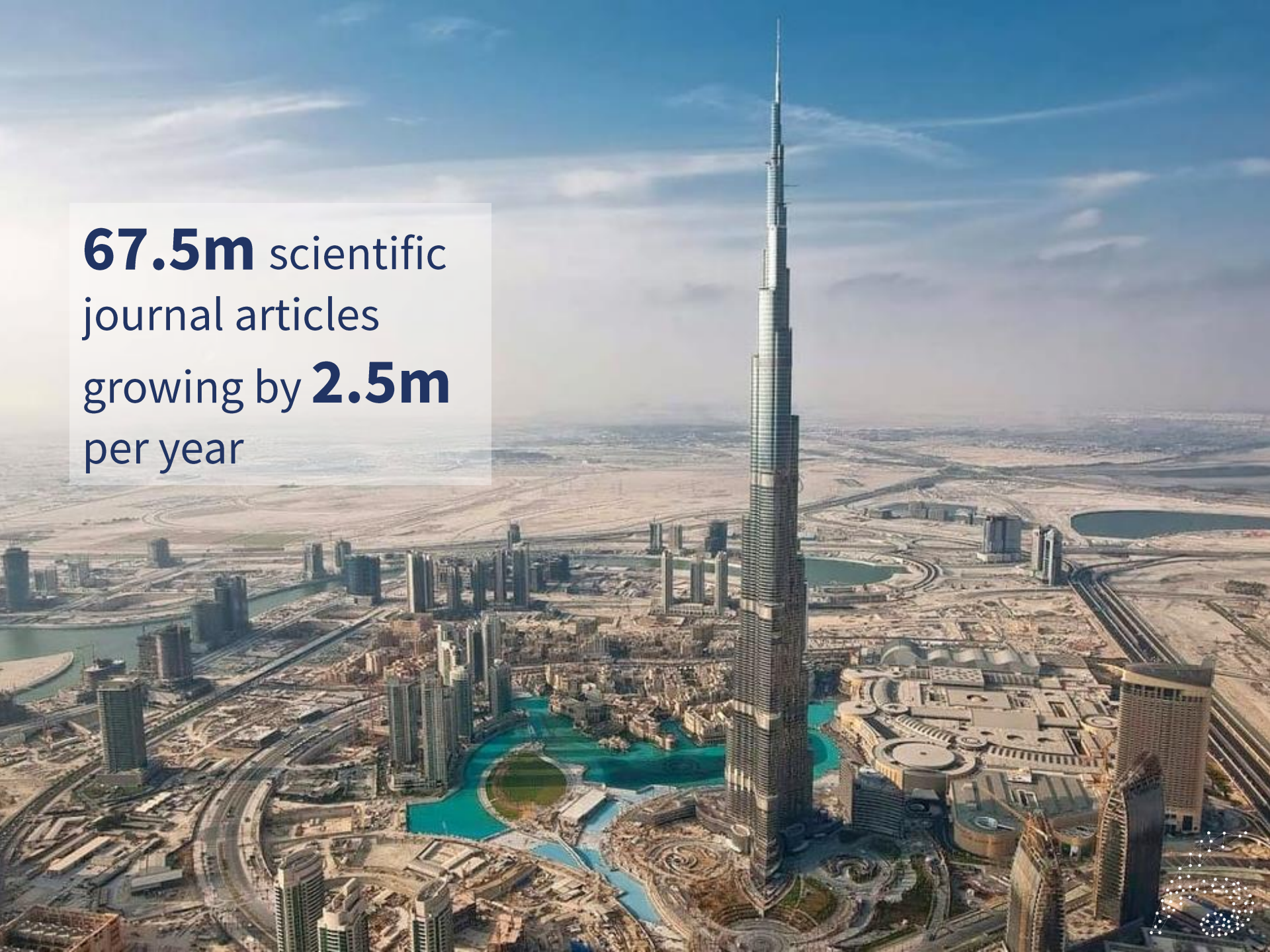
**USD\$10 million**

*“a new and scalable sequencing  
architecture expected one day to  
enable a **\$100** genome”* Illumina





**67.5m** scientific  
journal articles  
growing by **2.5m**  
per year



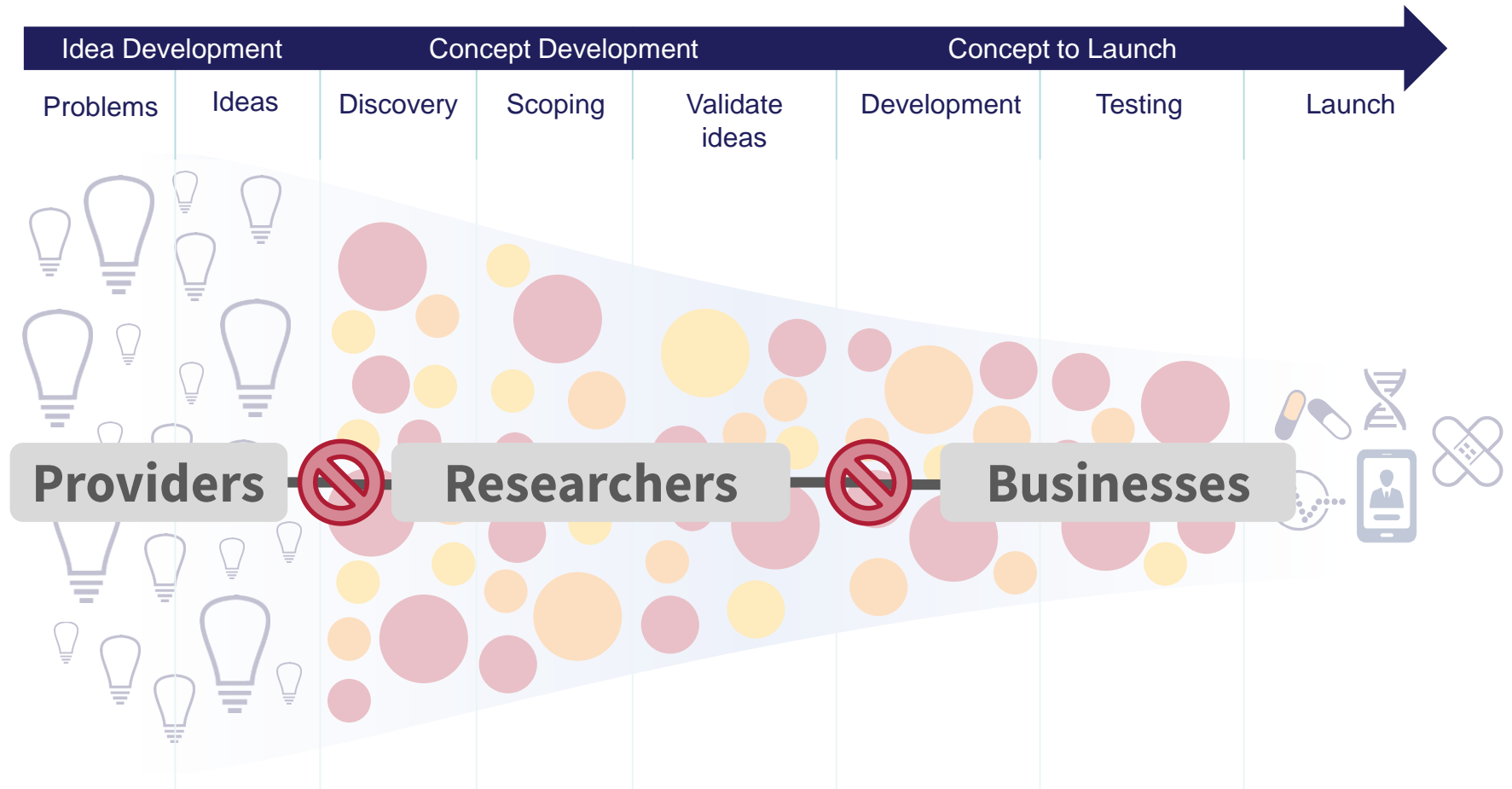


Evidence takes  
**years** to become  
best practice





# Where is there a problem?



# What would success look like?

1. Emerging Health Technology has a demonstrable impact on care and service delivery



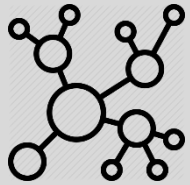
2. Emerging Health Technology becomes available quickly across the system

3. We will create a sustainable network of people who will help deliver Emerging Health Technology



# Our Plan

## People



**Building a sustainable network**



**Curating our knowledge and experience**



**Health Technology Literacy**

## Technology



**Advisory Services**



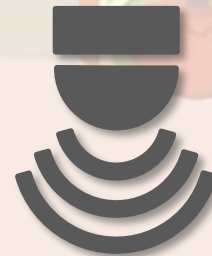
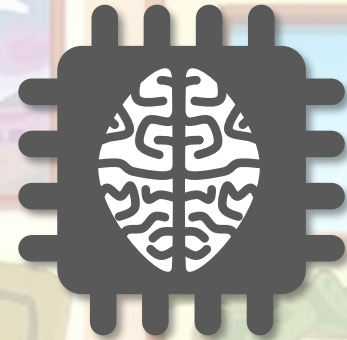
**Emerging Health Technology Thought Leadership**



**Health Technology Incucelerator**



# How could older people live better in their homes?





**Continue the  
conversation in  
Yammer**



**[www.yammer.com/emerginghealthtechnology/](https://www.yammer.com/emerginghealthtechnology/)**