

Telehealth celebrates 5 years

Princess Alexandra Hospital **Telehealth Centre**

Celebrating 5 years of Telehealth



OPEN DAY

Friday 28 July 11:00am - 1:00pm

Light lunch provided

The PAH Telehealth Centre is celebrating its 5-year anniversary and over 10,000 telehealth appointments.

There will be an Open Day held on the Friday the 28th of July from 11am.

The day will include tours, an opportunity to meet Centre for Online Health researchers, telehealth equipment demonstrations, and prizes.

The PAH Telehealth Centre is a specially designed telehealth space, with fully equipped clinical consultation rooms, meeting spaces, and specially trained staff to help facilitate telehealth outreach.

Metro South's telehealth activity has quickly and steadily grown throughout its collaboration with the COH.

Join us the 28th of July to find out more. All are welcome!



Edition 2—July 2017

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Team member profile:

Sean Halloran

Telehealth Service Manager — PA Telehealth Centre

As Telehealth Services Manager, Sean oversees day-to-day operations and clinical services development for the Princess Alexandra Hospital Telehealth Centre. His primary responsibility is to work collaboratively with University of Queensland's Centre for Online Health and Metro South Health stakeholders to identify, develop and enhance of a broad range of clinical telehealth services to be delivered from the PA Hospital. In addition to the development of clinical services, Sean and his team are responsible for providing education, training and technical support to clinical and administrative staff including the development of training guides and telehealth workshops.



Prior to joining the Centre, Sean worked with University of Queensland's Centre for Research in Geriatric Medicine to assist in the development of the Comprehensive electronic Geriatric Assessment (CeGA Online) software system which underpins the tele-geriatrics work done from the Centre.

Telehealth service profile:

A Multi-Disciplinary Renal Telehealth Service

Renal and Chronic Kidney Disease (CKD) patients sometimes travel long distances to access ongoing services. The Logan Hospital has established a telehealth service to address the issues of patients travelling up to 100kms (2 hrs) round trip to visit a CKD clinic. This service provides patients with access to a Renal Consultant, Pharmacist, Dietician, Diabetes Educator, Social Worker and Psychologist. Just like the hospital's face to face clinic, patients see one or multiple clinicians with each visit. Resources at Logan Hospital are stretched with limited access to consult rooms and car parking so telehealth was an obvious solution.

The aim has been to create a link between Logan and Beaudesert Hospitals for the provision of Renal services to the local community. The service hopes to reduce travel time for patients, promote and increase telehealth within the community, and provide a patient centred care approach to renal patients.

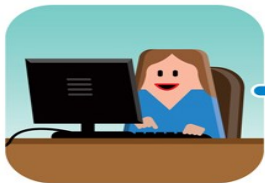
“The Logan Hospital has established a telehealth service to address the issues of patients travelling up to 100kms (2 hrs) round trip to visit a CKD clinic. “

Outcomes so far have been positive with 98% of patients “delighted” to attend a clinic closer to home. At time of writing the clinic had been running weekly for 4 months and is booked out for months in advance. Although still early days, this service looks to provide a sustainable model of multidisciplinary service delivery that could be replicated by other similar teams.

Lessons learnt:

- Telehealth is a patient-focussed option for reducing travel burden
- Nurses at the patient end need a separate observation room and time to complete direct data entry for access by the consultant
- Buy in from all stakeholders along with planning contributed to the services' success
- Patient movement between clinicians and communication between clinicians during clinics continues to be a work in progress.





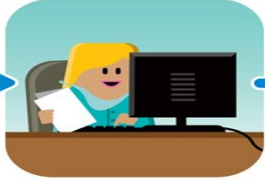
Clinician programs/updates monitor based on patient's condition.



Patient completes vital signs collection and responds to symptom management questions.



HomMed Monitor securely transfers medical data over network.



Clinician reviews patient assessment data and updates care plan and acts on patient events.



Physician remotely views on smartphone the patient updates and changes in condition.



Physician updates the recommended care plan to patient and clinical oversight team.

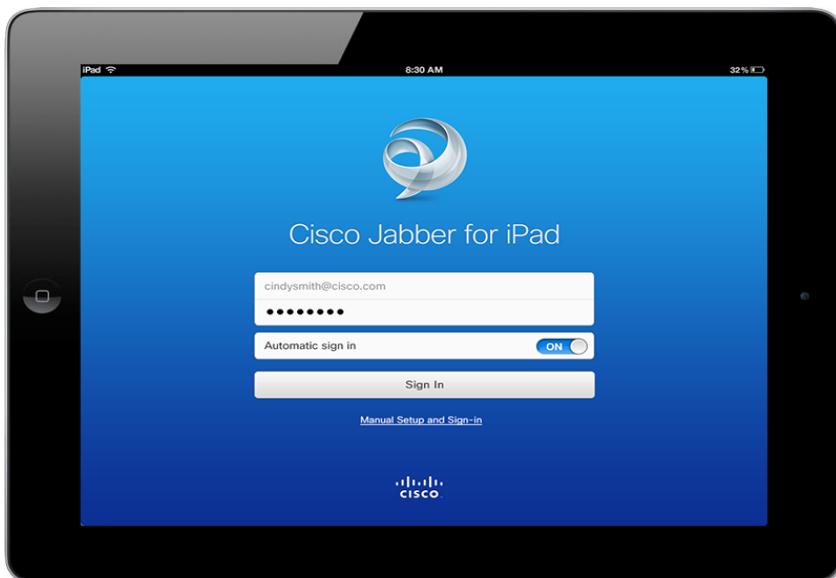


Technology Profile: *Telehealth on your iPad*

Did you know you can use your QH iPad to conduct telehealth consultations? For example, nurses doing outreach in the community are able to link up to specialists in the hospital while they are with their patients ensuring flexible and responsive patient care.

The software is free to download from the app store, however your department will have to purchase a licence. The application is called Cisco Jabber and the licence is available through the Online IT Store, under the video tab, and at \$250 excluding gst (as at 10/07/2017) it is an easy way to provide patient centred care.

For support or training please contact the Metro South Telehealth Coordinator or the PAH Telehealth Centre on 3176 8181 (mshhs.telehealth@health.qld.gov.au).



Fast Facts

Did you know.....

Facts from the Australian 2016 Telehealth conference:

- Telehealth is being used more as a regular part of service delivery and daily staff activities.
- A bottom-up approach to implementing telehealth is crucial for success.
- Grants are available for innovative models of care using telehealth.
- Challenges include paperwork and scheduling errors and Medicare constraints.
- Telehealth offers long-term psychosocial benefits for children through remote follow-ups and locally delivered chemo.

UPCOMING EVENTS

- Successes and Failures in Telehealth
30-31 October 2017—Brisbane
To register go to:
<http://event.icebergevents.com.au/sft-2017/register/delegate-registration-2017>
www.sftconference.com

Research Profile:

Substitution rates of video consultations for traditional consultations at a tertiary public hospital.

Liam CAFFERY ¹, Monica TAYLOR ¹, Anthony SMITH ¹, Karen LUCAS ²
Centre for Online Health, The University of Queensland, Australia ¹,
Metro South Health, Queensland Government, Australia ²

AIM

To find the rate of substitution of telehealth for traditional outpatient consultations in a tertiary public hospital and to identify opportunities for increasing telehealth activity.

METHODS

Retrospective outpatient activity data for both telehealth and traditional consultations were obtained for a 12 month period (April 2015 to March 2016) for the Princess Alexandra Hospital (PAH), Brisbane. Data were stratified by specialty clinic. We calculated the telehealth eligible substitution rate and the overall telehealth substitution rate for certain specialities that run both telehealth and traditional outpatient clinics. To calculate the telehealth eligible substitution rate the numerator was the number of video consultations and the denominator was total number of consultations (telehealth plus traditional consultations) for telehealth eligible patients i.e. patients residing outside of the metropolitan Brisbane catchment area for PAH. To calculate the overall telehealth substitution rate the numerator was the same as above, however, the denominator included all consultations regardless of the patient's place of residence.

RESULTS

Our dataset included video consultations (N=1088) and traditional consultations (N=41 951). Overall telehealth substitution rate was 2.5% and telehealth eligible was 17.5%. When stratified by specialty, the telehealth eligible substitution rates were: rheumatology 42.0%, 5.4%; Gamma Knife[®] radiosurgery 37.0%, 16.5%; haematology 14.7%, 2.4%; nephrology 15.4%, 0.2%; cardiology 3.6%, 0.6%; spinal injuries 8.1%, 2.1%; dermatology 6.9%, 1.1%; endocrinology 49.0%, 11.5%; and neurology 5.0%, 1.0%.

CONCLUSION

The overall telehealth substitution rate is substantially lower than the telehealth eligible substitution rate. This is due to the majority of patients being from local catchment areas which are currently ineligible for video consultations with the PAH. A reportable key performance indicator from inception for telehealth may have contributed to the Gamma Knife[®] radiosurgery having the highest observed overall telehealth substitution rate (16.5%). In-home video consultations with patients who reside in metropolitan areas may increase the overall telehealth substitution rate.



For bookings or further information please call 3176 8181 or alternatively email pah_telehealth@uq.edu.au