

East Arnhem Communities of Excellence
Program

Strengthening our Health System Strategy (2020 – 2025)

Enabled by digital health capabilities and new ways of working

Working collaboratively for all Territorians









## Acknowledgement of Country



We acknowledge the Traditional Custodians of the countries on which we work and live and recognise their continuing connection to land, waters and community.

We would also like to specifically acknowledge the Gumatj and Rirratjingu people, Traditional Custodians of the land on which we gather today.

We pay our respect to Elders past, present and future and to their cultures.

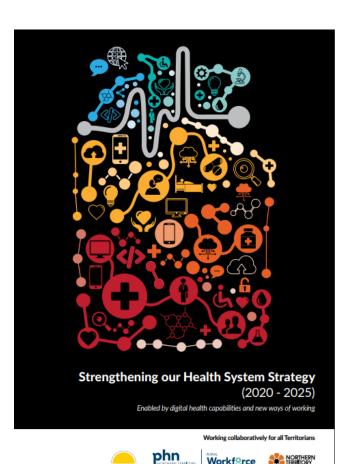
# Strengthening Our Health System Strategy 2020 - 2025



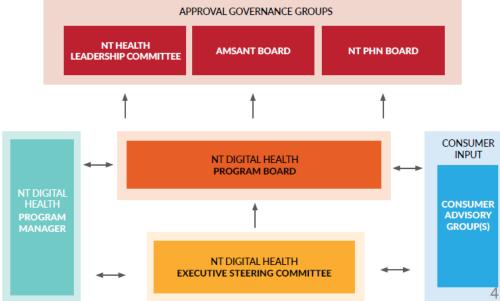


## Overview of Strengthening our Health System Strategy 2020-2025











## Overview of Strengthening our Health System Strategy 2020-2025



The Strengthening Our Health System Strategy 2020 – 2025 (the Strategy) is based on a collaborative partnership between NT Health, AMSANT and NT PHN (NT Partnership) to work together on the priorities and investments that will most benefit the people of the Northern Territory.

The Strategy focuses on taking a collaborative approach across four strategic goals:

- 1. Building healthier communities by empowering our people and communities to actively engage in their healthcare journey.
- 2. Enabling our workforce to improve current healthcare delivery approaches and embrace new ways of working.
- 3. Connecting our health system to ensure effective digital connections between systems, people and processes.
- **4. Harnessing innovation** to pursue technological advancements and innovation that will benefit our health system.

The first approved program under the Strategy is the *East Arnhem Communities of Excellence* which is referenced under Strategic Goal 1: Building healthier communities.



#### Staged approach





STAGE 1: First 6 months

Mobilise the Strengthening our Health System Strategy 2020-2025



STAGE 2: Years 1, 2 and 3

Early priorities



STAGE 3: Years 3, 4 and 5

**Building momentum** 

A work program will be developed based on the following high-level roadmap. This roadmap is based on three broad planning stages for the delivery of the strategy with key activities that will need to occur in each stage to set us up for success.



#### NT Partnership Principles



Our partnership approach is underpinned by collaborative leadership with shared and coordinated implementation.

The following key **principles** reflect our commitment to work together to strengthen our health system for the benefit of all Territorians :

- We are driven by the desire for better health and wellbeing outcomes for all Territorians.
- We foster opportunities to **share information and work collaboratively**, including timely communication and consultation.
- We model partnerships and working relationships on principles of respect, trust and integrity in all our interactions.
- We establish accountable and transparent governance to oversee priorities and manage investment.
- We develop and/or progress priorities by **leveraging existing assets and capabilities** and will avoid duplication.
- We adopt best practice health information and data standards aligned to national and local legislative frameworks and Indigenous
  data sovereignty requirements.
- We take an agile and flexible approach to codesign and co-production of our agreed priorities.
- We are committed to building greater digital literacy and digital inclusion for our health workforce and the population we support.
- We take a pragmatic approach to digital technologies and innovation to ensure our solutions are fit-for-purpose and deliver value within the context of the Northern Territory.
- We are open to each partner's individual objectives and priorities.

## **Australian Digital Health Agency**

**Communities of Excellence Program** 





#### Australian Digital Health Agency



## Australian Digital Health Agency – core program funding body

The Australian Digital Health Agency is the Australian Government statutory agency responsible for coordinating the national implementation of the Digital Health Strategy.

Through the former Council of Australian Governments Health Council, the agency reports directly to state and territory health ministers and the federal minister for health.

The agency is lead by its chief executive officer, board, and is subject to directions issued by the minister for health on the approval of all state and territory health ministers.





















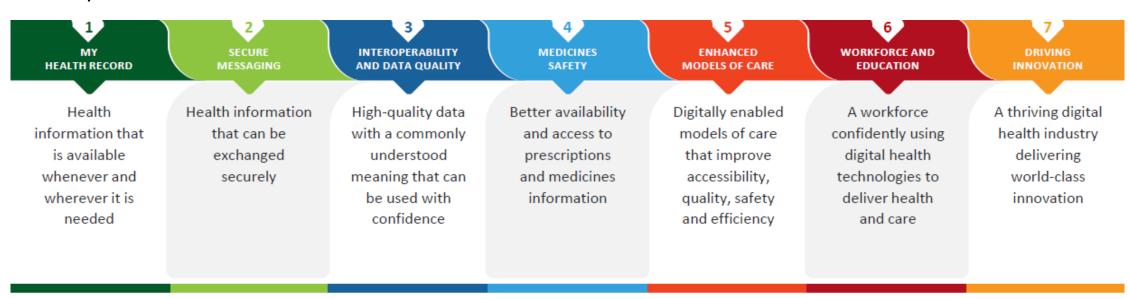


#### Australian Digital Health Strategy



The National Digital Health Strategy is establishing the foundations for a sustainable health system that constantly improves. It underpins and coordinates work that is already happening between governments, healthcare providers, consumers, innovators and the technology industry.

The outcomes you can expect to see are covered by seven high level strategic priorities or 'pillars' of digital health improvements.





#### Communities of Excellence Program



- The Communities of Excellence program is a national initiative led by the Agency. Its aim is to embed digital health capabilities across targeted communities and use the learnings from these fully connected communities to create a toolkit that will enable scalable replication across the country.
- The announcement of East Arnhem as a region for the Communities of Excellence program is the result of ongoing collaboration between NT PHN, AMSANT and NT Health to promote improved integration across the primary, secondary and acute health care system.

#### Core workstreams:

- ✓ connect healthcare providers to the national My Health Record system,
- ✓ support the expansion of telehealth capabilities across the care continuum,
- ✓ drive greater use of secure messaging to exchange clinical information across different care settings and state borders,
- ✓ enable the use of electronic prescriptions in general practices and community pharmacies, and;
- ✓ build digital health literacy and participation of healthcare practitioners, patients and their families.



All healthcare providers registered and connected to My Health Record



Adding value to clinical practice, improved continuity of care and decision support



Regular viewing and uploading of clinical documents



Delivering benefits to empowered patients and the Community



Improve safer use of medicines



Sharing lessons learnt to other communities



#### Benefits of Communities of Excellence





## We expect to deliver a range of benefits through the program

- First and foremost enhancing the patient experience
- Reduce the need for patients to travel off country into the city through use of telehealth
- Medicines safety improvements
- Rapid access to the right care in the right setting using secure messaging technology

### **Local context**

# **East Arnhem Communities of Excellence Program**





#### Overview of East Arnhem Communities of Excellence Program

Establish secure messaging as the delivery channel for health information exchange



The Agency has a signed contract with the Department of Health to invest \$750,000 during 2020/2021 financial year towards the East Arnhem CoE Program. A schedule of contract deliverables is in place for 2020/2021 financial year which was agreed between the NT Partnership and the Agency, including delivery of the following priorities:

My Health Record (MHR)	

Objectives	Program Outcomes
Maximise connection and access to the	East Arnhem health care providers are connected and routinely access the MHR as part of clinical practice.
national My Health Record (MHR)	Increased active participation and engagement by community members in their healthcare.
Improve remote healthcare by leveraging	East Arnhem health care providers have reliable telehealth capability
telehealth where clinically appropriate	Telehealth is considered a clinically safe and usable healthcare delivery model

East Arnhem health care providers communicate with other

health care providers via secure digital messaging





#### My Health Record



#### **Objective**

1. Maximise connection and access to the national My Health Record (MHR)

#### **Issues**

- Staff cannot find information in MHR efficiently and seek information from other sources.
- Connectivity issues
- Connection between CIS and MHR is slow impacting user experience

#### **Outcomes**

- East Arnhem health care providers are connected and routinely access the MHR as part of clinical practice.
- ▶ Increased active participation and engagement by community members in their healthcare.

#### **Potential Improvement opportunities**

- ► Education through access to on-line resources
- ► Training in MHR
- Collaboration with Communicare for improved useability and functionality of MHR



#### Telehealth



#### **Objective**

2. Improve remote healthcare by leveraging telehealth where clinically appropriate

#### **Outcomes**

- East Arnhem health care providers have reliable telehealth capability.
- ➤ Telehealth is considered a clinically safe and usable healthcare delivery model.

#### Issues

- Connectivity and bandwidth
- Lack of support to schedule, coordinate and manage telehealth processes at both ends
- Telehealth infrastructure and facilities
- Privacy and security (physical and digital)

#### **Potential Improvement opportunities**

- Mental health and SEWB
- Antenatal care
- ► Chronic disease management
- Patient access to GPs / specialists services (after-hours)
- GP access to specialists (to potentially reduce referrals and improve continuity of care)



#### Secure messaging





#### **Objective**

**Establish secure messaging as** the delivery channel for health information exchange

#### **Outcomes**

East Arnhem health care providers communicate with other health care providers via secure messaging.

#### **Issues**

- ► National interoperability between secure messaging providers
- ► Lack of trust in secure messaging due to unreliable addressing (not returned to sender) and a general lack of confidence in secure messaging.

#### **Potential Improvement opportunities**

- eReferrals in MHR
- Improve process for clinical documents (e.g. discharge summary / specialist letter) to referrer

### Thank you









