Telehealth Resource Package

Introduction

This Agency for Clinical Innovation (ACI) Telehealth Resource Package is designed to assist ACI staff and members of ACI clinical networks, taskforces and institutes to implement Telehealth as a service delivery method.

Telehealth is a tool that can improve the delivery of health care programs to patients, facilitate the delivery of Models of Care and other health related activities and provide equity of access including for people who may be disadvantaged.

This resource includes the following documents:

Telehealth key messages outlines what Telehealth is (providing some definitions), how Telehealth relates to the ACI (and our role), and some high level practical information on 'how to do' Telehealth.

Why Telehealth? describes various contexts in which Telehealth can be utilised, the key drivers for its use and the benefits of its application. This document is meant to get you thinking about how Telehealth can be applied in ACI to benefit the treatment and care of patients.

Telehealth Implementation- Considerations for Success is aimed at assisting the successful implementation of Telehealth at a local level as a service delivery method. Several areas that need to be addressed for successful Telehealth implementation are outlined including organisational, funding, implementation (consisting of planning and sustainability logistical, evaluation) and technical factors.

Telehealth has great potential to facilitate better health outcomes within NSW Health.

For further information or to discuss the use of Telehealth in your network please contact Chloe Moddel, Telehealth Implementation Officer, ACI on +61 (02) 9464 4654 or chloe.moddel@aci.health.nsw.gov.au.
Telehealth Key Messages

What is Telehealth?

• **Telehealth** is the secure transmission of images, voice and data between two or more units via Telecommunication channels, to provide clinical advice, consultation, monitoring, education and training and administrative services

• Telehealth services use Information and Communication Technologies (known as ICTs) to deliver health services

• Telemedicine is the use of information and communication technologies, specifically to provide, support and improve access to quality clinical health care

• Remote patient monitoring is the monitoring of patients outside of conventional clinical settings (e.g. in the home) which may increase access to care for patients and decrease healthcare delivery costs

• Telehealth can be a real-time, convenient and cost-effective alternative to the more traditional face to face way of providing medical care, advice and education

• Telehealth can provide services where care may not be available locally

• Telehealth is about the clinical care of patients, not technology

Telehealth and the ACI

• There are a number of parts of the health system that have a role in delivering Telehealth. The Ministry of Health provides the planning, policy and service development, HealthShare NSW provides the technical advice and support, the ACI develops and supports implementation of Models of Care and protocols for service delivery and the Local Health Districts (LHDs) deliver these services.

• The use of Telehealth aligns with the ACI Strategic Plan in providing equity of access for all people including those who may be disadvantaged, and improving the delivery of health care programs to patients.

• Telehealth can help deliver and facilitate ACI Model of Care delivery and other health related activities.

• Telehealth should be evidence-based for success.

• Telehealth needs to be seen as enhancing, replacing or changing delivery to improve a service (e.g. outpatient clinics).

How to do Telehealth

• Technology alone does not bring about the change in practice; a key issue is behaviour change. There are organisational, funding and implementation factors that need to be addressed (please refer to Telehealth Implementation- considerations for success document).

• There are various modalities in which Telehealth can be delivered (for example videoconferencing, telephone, email- data image transfer).

• There are a number of Medicare rebates and incentives available for the use of Telehealth for patient video consultations.

• It is important when utilising Telehealth to perform testing to ensure the technology is appropriate and adequate training of staff is provided to ensure they are confident in how to use the equipment, including troubleshooting.

• Telehealth facilities (specifically videoconferencing) are available in the majority of hospitals and/ or community health centres throughout NSW.

• Seek advice on ACI’s videoconferencing etiquette to ensure the successful implementation and use of Telehealth modalities.
Why Telehealth?

This document outlines the context in which Telehealth can be delivered, key drivers for its use, and the benefits it can have to both clinicians and patients.

Ways you could deliver Telehealth

A diverse range of healthcare services can be provided while utilising Telehealth. These can include (but are not limited to):

- Time critical treatment (for example care required in the Emergency Department).
- Scheduled care (for example ward rounds, outpatient clinics, psychiatry appointments, follow-up care).
- Remote patient monitoring (for example through education or care in the home, patient self management).
- Coordinated integrated care across the health system (for example within the community care setting, transitional care of patients).
- Preventative care and health promotion (keeping people healthy and providing triggers for early intervention).
- Education for clinicians (including case discussions, debriefs, grand rounds, seminars).

Telehealth key drivers

- Increasing specialisation and knowledge is required within teams to support best practice quality clinical care.
- A focus on patient centred care and the need for patients to manage their conditions with support from secondary and tertiary care.
- There are workforce shortages of specialists, doctors and nurses in rural and remote areas. The increasing demand on the existing workforce is largely due to increased rates of the ageing population and chronic illness. Telehealth can help meet this demand by optimising the use of the existing workforce in healthcare.
- Chronic care patients need access to specialist services that may not be available in their local area.
- The need to reach isolated communities, Aboriginal Medical Services (AMS) and Residential Aged Care Facilities (RACF).
- The need to improve equity and access to care services for rural and remote areas.

Benefits of Telehealth

- Increased access to specialist care and specialist input to care which has, in the past not been available.
- Promotes self care management (promoting patients to manage and take control of their conditions) leading to empowerment of patients.
- Reduces feelings of isolation for clinicians and patients.
- Keeps the patient close to home to receive treatment and care, reducing travel costs and separation from their family.
- Communication sharing between clinicians to improve clinical education, decision making and safe treatment of patients.
- Allows clinicians to feel part of a team even if they are located in a rural area. Improve efficiency of care provided to patients.
Telehealth Implementation – Considerations for Success

This document relates to the implementation of Telehealth services for ACI Clinical Networks, Institutes and Taskforces.

It provides you with a high level overview of key areas that need to be considered and addressed to successfully implement Telehealth (specifically videoconferencing) at a local level as a service delivery method.

Key requirements for the successful implementation of Telehealth services have been broken down into a number of categories:

1. Organisational issues
   - Telehealth is about clinical care of patients, not technology.
   - The service should be ‘needs driven’ - a needs assessment and analysis should be conducted at the outset to define the area/s of need and how/ if Telehealth can address this need.
   - Telehealth is best applied where there is a defined Model of Care for service delivery and care.
   - Explore and identify the key stakeholders and partnerships required and involve them in the planning of the service.
   - Bottom-up approach for implementation should be planned in consultation with local clinicians who will drive the change on the ground and will create a sense of ‘ownership’ at the local level.
   - Top- down management approach is required for successful implementation and long term strategic planning.
   - Telehealth should be integrated into everyday practice to encourage sustainability.

2. Funding issues
   - Long term funding is key to encourage sustainability.
   - Gain an understanding of the associated costs required for the service (for example staff and technology required).
   - Develop a financial plan outlining how the service will be funded for both the start up phase and ongoing costs.
   - Identify who is going to fund this service and if there are any reimbursements available.
   - Medicare reimbursement and incentives are available for patient video consultations. For more information on this click [www.mbsonline.gov.au/telehealth](http://www.mbsonline.gov.au/telehealth)
3. Implementation factors

Planning and sustainability
• Effective planning and consultation are required in the design phase of the service.
• Develop a communications plan to promote and raise awareness of the services available.
• Appropriate change management practices and resources are to be made available at a local level to embed Telehealth as part of standard practice to overcome resistance and maximise acceptance.
• Guidelines and procedures are to be developed for the appropriate interactions between sites.
• Telehealth needs to be seen as replacing and/or improving current processes—Integrate the service into existing practice so it can become a routine part of service delivery.
• Schedule regular clinics or sessions rather than occasional sessions.
• Consider if service(s) will cease with the implementation of Telehealth.
• Telehealth has the ability to empower consumers to have a greater role and control over their healthcare (for example self management, care in the home).
• Ensure medical indemnity insurance has been addressed if video consultations are to occur.

Logistical issues
• Identification of a Telehealth contact at a local level to provide training and support to encourage uptake and support the behaviour change.
• Identification of human resources required to drive and deliver the service.
• Coordination of the service is required at the site/s (including rosters, bookings, charging, follow up).
• Both clinicians and managers need to be active in the planning and implementation phase.
• ‘Clinical champions’ help drive the change at a local level which key for successful implementation.
• Clinicians need sufficient opportunity to learn how to use the equipment to become comfortable with it prior to implementation, including troubleshooting techniques.
• Ensure the service is convenient, efficient and timely for patients and staff.

Evaluation
• Evaluate the performance of the service—measure the outputs and identify reasons for both success and or failure (reasons for failure can be addressed if applicable).

4. Technological requirements
• Technical requirements need to meet operational demands for clarity of picture and sound (connection speed requirements will vary depending on what the purpose is).
• Adequate infrastructure needs to be available to support the service.
• All the sites need to be compatible with the identified infrastructure.
• Receive technical support and training, especially during the start up phase.
• Equipment should be convenient, easily accessible and easy to use.
• For further information on technical requirements and available resources click http://internal.health.nsw.gov.au/telehealth/procedural_issues.html