



Australian Government
Australian Digital Health Agency

Digital Health: A Human Imperative

Tim Kelsey, Chief Executive Officer

Sunday 30 July 2017

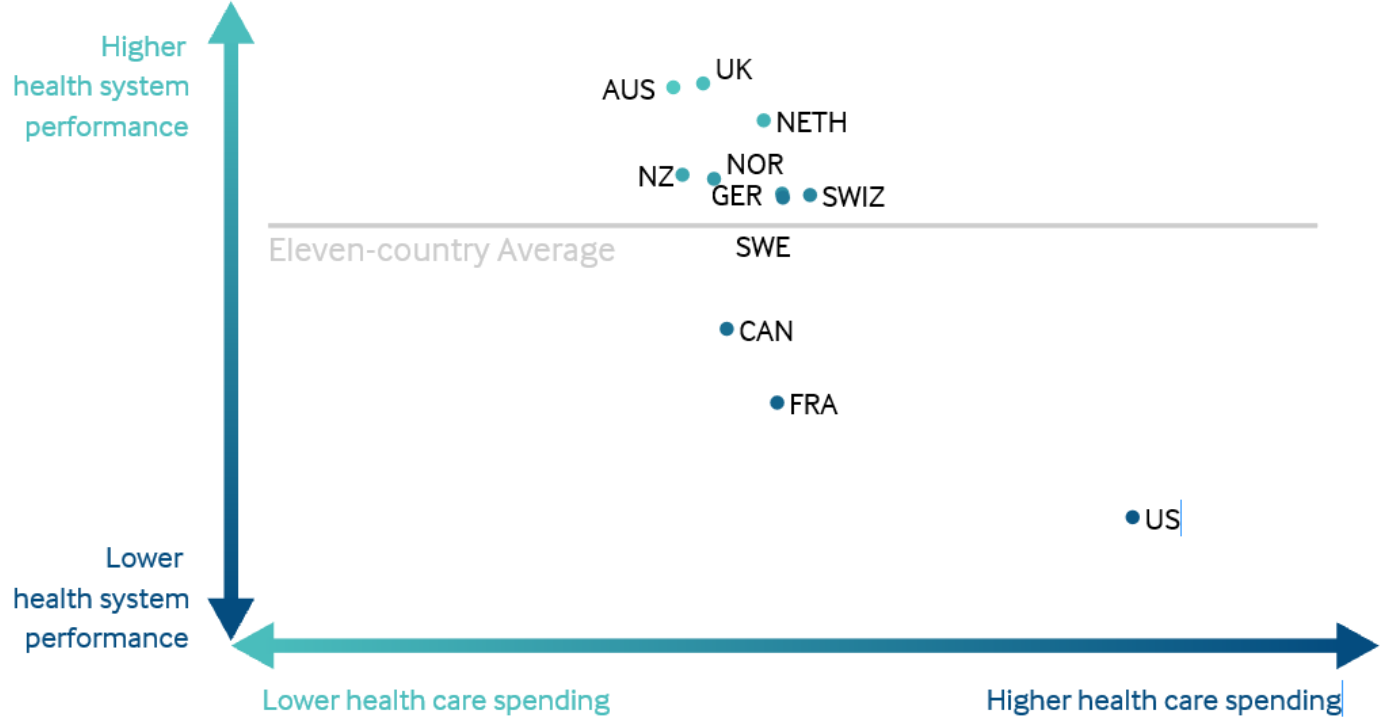
www.digitalhealth.gov.au

Australia produces high quality health outcomes

“Australia ranks highest on Administrative Efficiency and Health Care Outcomes, and is among the top-ranked countries on Care Process and Access”

Commonwealth Fund (2017)

Exhibit 5. Health Care System Performance Compared to Spending



Note: Health care spending as a percent of GDP.

Source: Commonwealth Fund, 2017

Better use of digital information can improve it further

An average 13% of appointments in general practice need follow up because of missing information and 10% of GPs waste time every day searching for missing clinical information.

Content shared digitally between clinicians and patients means reduced risk of lost information

223,000 patients admitted to hospital due to adverse drug events costing \$1.2billion – 2-3% of all hospital admissions.

Medicines information available securely online reduces safety risk

14% of pathology tests are ordered due to lack of access to patient history.

People and clinicians will be able to see results of previous tests

“The use of digital technologies to deliver healthcare can be an enabler to support the delivery of better patient outcomes. Digital technology does hold great promise but the literature clearly indicates technology is not a solution on its own. Digital innovations must provide benefit and in most cases, complement existing proven models of care.

Royal Australian College of General Practitioners, submission to National Digital Health Strategy, 2017



Healthcare professionals want digital health services



Top 5 activities **health professionals** want to use digital technologies to help better support them to deliver health services

Activity	Currently using a computer, smart phone or tablet %	Not using, but interested in using a computer, smart phone or tablet %	Not interested in using a computer, smart phone or tablet for this activity %
Sharing health records with my patients	25	59	7
Transferring prescriptions to the pharmacy	25	56	8
Providing interactive decision-making support	32	53	6
Communicating with patients before or after consultations	33	49	7
Sharing health records with other practitioners	43	45	4



Citizens want digital access to health and care services



Australians value our **high quality** healthcare practitioners and workers, and generally experience **affordable** and **accessible** care



Over **65%** of respondents say the Australian healthcare system is difficult to navigate. People want to know the cost, quality, and availability of services



Over **45%** of respondents had difficulty accessing healthcare when they needed it. Top reasons given:

- Cost,
- Location, and
- Couldn't get an appointment



More than **four times** as many people want to access their personal health information on their smart phone than do currently



The **top three** activities people want to be able to do on their mobile device:

1. Manage their medications
2. Track their health
3. Request refill prescriptions



The Australian Digital Health Agency

The ADHA is funded by all Australian Governments. It designs and operates national digital health services and set data standards that:

- Give **consumers more control of their health and care** when they wish it
- **Connect and empower healthcare professionals**
- Promote **Australia's global leadership in digital health and innovation**

The ADHA reports to its Board, appointed by the Minister.

The ADHA is the system operator for the My Health Record, and a number of other clinical information systems and standards, and commenced operations on 1 July 2016.

“When patients move between care settings, the absence of complete and up-to-date medication data can contribute to instances of care becoming high risk, resulting in medication misadventures and unnecessary hospital readmissions

Pharmacy Guild of Australia, submission to National Digital Health Strategy 2017



The role of the ADHA



- Co-ordinate, and provide input into, the ongoing development of the National Digital Health Strategy;
- Implement those aspects of the National Digital Health Strategy that are directed by the Ministerial Council;
- Develop, implement, manage, operate and continuously innovate and improve specifications, standards, systems and services in relation to digital health, consistently with the national digital health work program;
- Develop, implement and operate comprehensive and effective clinical governance, using a whole of system approach, to ensure clinical safety in the delivery of the national digital health work program;
- Develop, monitor and manage specifications and standards to maximise effective interoperability of public and private sector digital health systems;
- Develop and implement compliance approaches in relation to the adoption of agreed specifications and standards relating to digital health;
- Liaise and cooperate with overseas and international bodies on matters relating to digital health.



The National Digital Health Strategy: delivery to 2022

MY HEALTH RECORD	Health information that is available whenever and wherever it is needed
SECURE MESSAGING	Health information that can be exchanged securely
INTEROPERABILITY AND DATA QUALITY	High-quality data with a commonly understood meaning that can be used with confidence
MEDICATION SAFETY	Better availability & access to prescriptions & medicines information
ENHANCE MODELS OF CARE	Digitally-enabled models of care that drive improved accessibility, quality, safety and efficiency
WORKFORCE EDUCATION	A workforce confidently using digital health technologies to deliver health and care
DRIVE INNOVATION	A thriving digital health industry delivering world-class innovation



My Health Record

An electronic summary of an individual's health information that **can be shared securely online** between the individual and registered healthcare providers involved in their care to support improved decision making and continuity of care.

“ My Health Record is the future of medicine.

Dr Michael Gannon, President, Australian Medical Association

“ Prioritise making the My Health Record shareable and used by all health professionals and in all health settings. This fundamental step will have massive benefits to consumers who will be able to trust that their information is being adequately communicated.

Consumers Health Forum of Australia

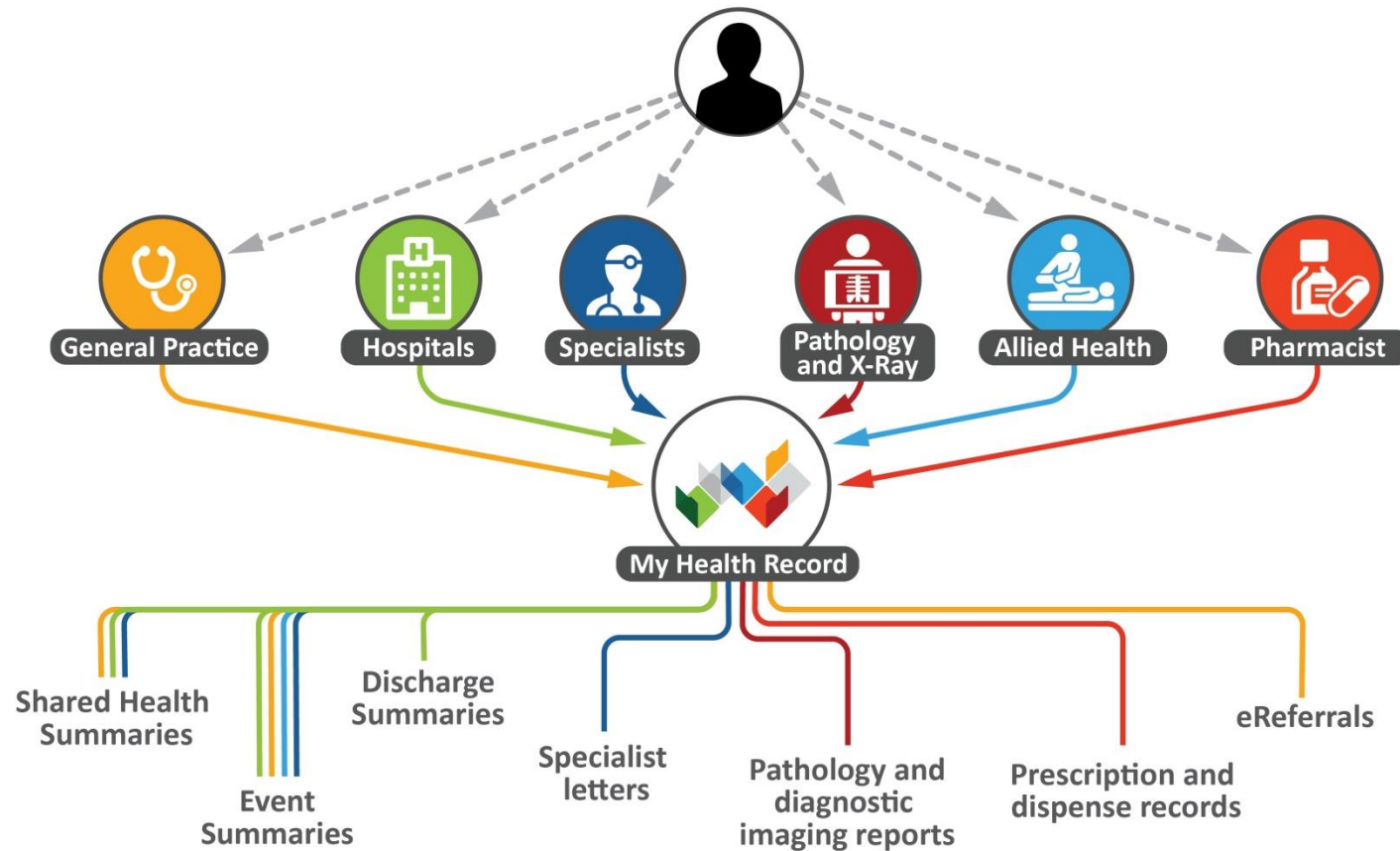


Key Facts

- Two out of three patients experience a medication error of some sort on admission to hospital
- Empowering people with health care information to support self-management could save \$1,300 to \$7,515 per patient per year.
- Sharing information electronically about tests could reduce unnecessary duplication by approximately 18% and significantly lower hospital re-admission rates.



How does My Health Record work?



Privacy and Access: a new standard in patient confidentiality

A person controls who has access to their My Health Record.

- They can choose to decline access to specific documents in their My Health Record.
- They can set up a pin code that will mean only clinicians with permission can access their My Health Record.
- They can subscribe to SMS or email alerts that report in real time when registered provider organisations access their My Health Record.
- In an emergency, a clinician can exercise a 'break glass' facility – but instances are carefully monitored and reported to the citizen.
- All instances of access to My Health Record are monitored.





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My Health Record

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Register for a My Health Record



What is a My
Health Record?



Getting a My
Health Record



Managing your My
Health Record



Managing Access,
Privacy and Security



For Healthcare
Providers

Welcome to My Health Record

My Health Record is a secure online summary of your health information. You can control what goes into it, and who is allowed to access it. You can choose to share your health information with your doctors, hospitals and other healthcare providers.

Other questions you might have:



My Health Record Opt-out Participation Trials

Nepean Blue Mountains and Northern Queensland

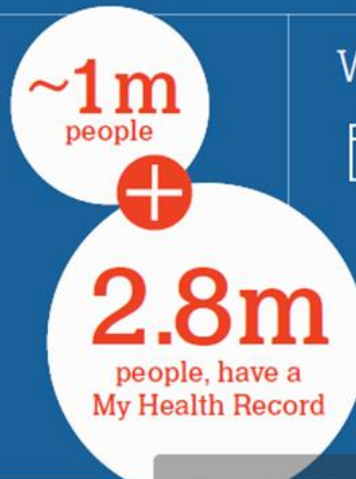
As part of the My Health Record opt-out participation trials, individuals in Nepean Blue Mountains and Northern Queensland had an opportunity to have a My Health Record automatically created for them.^ As a result of the trial:



More than
9 out of 10
people across the two trial areas had
a My Health Record created for them

Only **1.9%** of the population* in the two trial areas opted-out of having a My Health Record created for them.

Nearly 1 million
individuals joined
the 2.8 million
people who are
already benefiting
from having a
My Health Record.



What's next in the My Health Record Trials?



- Individuals were able to access their newly-created records for the first time.

- Individuals can set access controls and add emergency contact information to their My Health Record.



- Healthcare providers can view patients' newly-created My Health Records.

- Authorised doctors and healthcare providers connected to the system can upload to their patients' My Health Records.

My Health Record Statistics

as at 16 July 2017



Australian Government
Australian Digital Health Agency



My Health Record

Consumer Statistics



5,010,160 Consumers registered

Demographic
Breakdown



54% are female



46% are male

Age Range	Aged 20 or less		Aged 20-39		Aged 40-64		Aged 65 or higher	
% of total registrations	36%		25%		25%		14%	
State	ACT	TAS	SA	NT	NSW	VIC	QLD	WA
% of population	24%	20%	19%	21%	21%	16%	28%	16%

Approximately 21% of Australia's population
is registered for a My Health Record

Provider Registrations



10,143 Healthcare providers registered

Organisation Type*	Count
General Practices	6,145
Public Hospitals and Health Services	760
Private Hospitals and Clinics	161
Retail Pharmacies	1,372
Aged Care Residential Services	168
Other categories of healthcare providers including Allied Health	1,271
Organisations with a cancelled registration	266

* Organisation type based on Healthcare Provider Organisation (HPI-O) data, except for Hospital provider data which is based on jurisdictional reported facilities that are connected to the My Health Record system.

My Health Record Usage



Clinical Document Uploads 2,509,636

Shared Health Summary	942,426
Discharge Summary	1,071,984
Event Summary	292,624
Specialist Letter	51,153
eReferral Note	29
Pathology Reports	96,565
Diagnostic Imaging Report	54,855



Prescription and Dispense Uploads 11,177,677

Prescription Documents	8,708,429
Dispense Documents	2,469,248



Consumer Documents 141,455

Consumer Entered Health Summary	88,568
Consumer Entered Notes	37,810
Advanced Care Directive Custodian Report	13,897
Advance Care Planning Document	1,180



Medicare Documents 521,078,653

Australian Immunisation Register	1,439,321
Australian Organ Donor Register	490,935
Medicare/DVA Benefits Report	306,691,661
Pharmaceutical Benefits Report	212,456,736



A mobile health record for every Australian by 2018

The Australian Government has invested **\$374.2 million** over two years to ensure every Australian has a My Health Record, unless they prefer not to.

Roll-out of the **opt-out model** to all Australians, and will continue and improve operations of My Health Record, while making it easier for health providers to register for the system.

Will increase the number of **pathology and diagnostic imaging reports**.

Improve the accuracy, timeliness, visibility and accessibility of **medicines information** in the system.



Implementation

- If a person doesn't already have a My Health Record, a record will be automatically created for them in 2018, unless they chose not to have one.
- The Agency will work with the community early next year to provide further information on the My Health Record.



My Health Record information for:

Name: [Surname] [Given name]

Sex: Male

DoB: 25 Aug 1980

IHI: 8003 XXXX XXXX 9403

Allergies and adverse
reactions referenced in
this My Health Record

Tramadol



Find available medicine information in this My Health Record

The My Health Record contains documents that have been uploaded by healthcare providers from their connected clinical information systems, and may contain additional information entered by the owner of this My Health Record or one of their carers.

This view should not be wholly relied upon as a complete record of medicines related information.

View generated on 7-Feb-2017 at 12:53

Document preview list

Last updated 08-Dec-2016
7 weeks ago

Latest Shared Health Summary

30-Nov-2015
13 months ago

Latest Discharge Summary

10-Jul-2016
6 months ago

To assist you to find medicines related information on this patient's My Health Record, screen previews are provided (where available) with links to the source documents where more detailed information can be obtained.

IMPORTANT: Some documents do not allow for a preview of medicines information, and should be opened by the links provided.

Document preview list

Filter by keyword (medicines and ingredients):

Sort by:

Newest to oldest

Filters:

All authors

Last 12 months

All document types

[Reset all](#)

[Show more filtering options](#)

View source document(s)	Date	Active ingredient(s)	Medicine brand or trade name	Directions	Author
Prescribe	08-Dec-16 7 weeks ago	Budesonide, Eformoterol fumarate dihydrate	Symbicort 200mcg;6mcg Powder for Inhalation	2 Twice a day as asthma preventer	Jerry Davidson
Latest dispensed	08-Dec-16 7 weeks ago 1 dispense	Celecoxib	Celebrex 200mg Capsule Dispense differs 3 months before as CELECOXIB (RBX) 200mg CAP	1 Daily prn for joint pains.	Jerry Davidson
Prescribe	03-Dec-16 8 weeks ago	Influenza Vaccine - Inactivated, split virion	Fluarix Trivalent Syringe		Jerry Davidson
Prescribe	03-Dec-16 8 weeks ago	Prednisolone	Prednisolone 25mg Tablet	1 Daily As directed for 10 d then stop	Jerry Davidson
Dispense	19-Aug-16 5 months ago	SIMVASTATIN	SIMVAR 80mg TAB	Take ONE tablet before bed for cholesterol	Jerry Davidson
Prescribe	14-Jul-16 6 months ago	Pregabalin	Lyrica 25mg Capsule	1 In the evening without regard to meals increase	Jerry Davidson
Discharge Summary	10-Jul-16 6 months ago	This document does not allow for a preview of medicines information. Click here to view the source document.			Dr James T Becker



My Health Record

Benefits



Avoid adverse drug events



Improved systems through secondary use of data



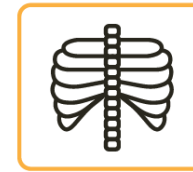
Enhanced patient self-management



Improvements in patient outcomes



Reduced time gathering information



Avoided duplication services



Digital technology can enable improved health and care outcomes but....

- How will you make sure nobody is left behind? 'Digital inclusion is a basic human right,' Aboriginal care worker, Western Australia.
- How good is the data? Digital information sharing will support improvements in quality but may also expose poor record keeping.
- How safe is my data? Healthcare providers will need to be best in class in promotion of information governance and security.
- What are the benefits? International need for research focus on evaluation of impact on improved outcomes.
- How will you work with the community to make sure these services are what people want? Health services will need to find new ways of collaborating with industry and civil society on the design of health services – especially those which depend on digital data.



‘It helps me care for my patient safely at home’

Queensland GP 2017



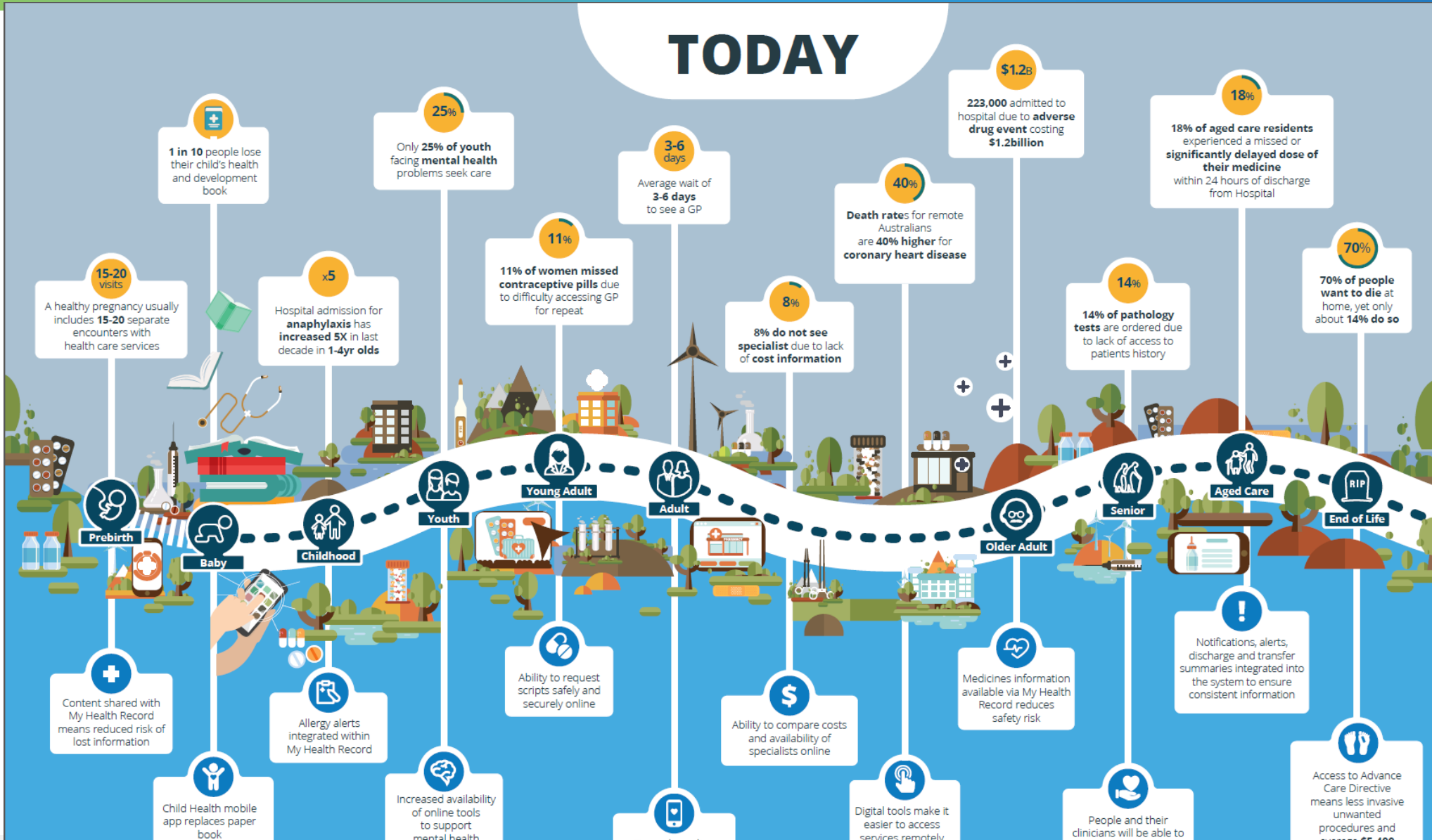
Kevin is a 48 year old man with multiple chronic conditions including diabetes, renal failure and hypertension. He was admitted to hospital after a serious cardiac event. His GP visited Kevin at home shortly after he left hospital and had not yet received the discharge summary in his practice, but by viewing the summary in My Health Record was able to see that five of Kevin’s medications had changed. His GP was able to provide immediate follow up care to Kevin regarding the medication changes.

“I was able to prepare and print the prescriptions for the new medicines and use the discharge summary as a checklist when I visited Kevin and reviewed the medication. Without this information I would not have been able to provide the follow up care I needed to.”

He was then able to upload a new Shared Health Summary for Kevin, ensuring the new medication regimen was available in his My Health Record to other care providers.



TODAY



FUTURE