Government of Western Australia

WA Country Health Service

Healthier country communities through partnerships and innovation

Values

Community | Compassion | Quality | Integrity | Justice

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Executive Lead Telehealth
COO Strategy & Reform
WA Country Health Service

Emergency Telehealth Service (ETS)
an Essential service to support rural Western Australia and remote communities

WA Country Health Service (WACHS)

7 distinct & diverse regions
- 8 regional hospitals
- 15 district hospitals
- 47 rural hospitals
- 50 nursing outreach or health centres
- 24 community mental health services
- 4 inpatient mental health units
- 175 population health facilities

What is Telehealth? Nothing New 1954

- “the use of Information and Communication Technology applications to provide health and long-term care services over a distance” (WHO, 2010)
- Used in:
  - Education and training
  - Store and Forward Applications
  - Home Monitoring

August 2012

Bob (FACEM) was sceptical of the telehealth technology – “how am I to give proper medical care”

What about GPs?
Mixed … proof in the pudding and majority are on board

Resident FACEM’s
Visiting FACEM’s
**EQUITY**

ETS commenced August 2012 = 8 pilot sites

- Early observations:
  - accessibility/availability
  - education – dedicated team
  - governance
  - clinical standards

**October 2017**

Nearly OOS 57,000 since 2012 – 78 hospitals – 7 regions

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**Service development principles**

- Consultant-led safe, consistent, quality, effective emergency medicine.
- Equity & Advocacy best possible outcome for country patients.
- Governance and operational management – Country led, compliance with WACHS clinical governance pathways/policies + consult quality of service in a country context.
- Collaborative regional engagement
- Regional decision making and local protocols guide intra-regional transfers with appropriate guidance and negotiation from the ETS physician.

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**ETS Flowchart**

- Site welcomes and gathers data for triage and specialist support
- High acuity ATS 1 & 2 require pathway + local/supervision VC
- ATS 3-5 may be “consult” share screen or VC with a wait

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**Nurse Co-ordinator**

**ETS - Virtual Service Delivery & Virtual conversations**
Collaborative Development of ETS

- Importance of relationships
  - Nurses and ETS doctors
  - Trust in the clinical setting
- Opportunities for hands-on learning and skill development
  - Well defined model that aligned easily with existing systems
  - Consulting and noticing
- Introduced Consultant - FACEM 'ownership' of patient care
  - Improved communication and handover
  - Collaboration

MORE THAN SERVICE ACCESS

- ETS opened up opportunities for:
  - Improved governance
  - Consolidation of clinical standards
  - Dedicated ETS education program
  - Need to empower local nurses to work with FACEMS at new level of expertise, yet within scope of practice
  - Local nursing staff 'hungry' for education

EDUCATION - Flexible (Blended) Learning Framework

Successful education program

- Real Time Capacity Building
- Videoconferencing
  - Practical
  - Theory
- Simulation
- eLearning Program
- ETS HELP
- Face to face education
  - ETS Staff
  - Clinical specialties

From didactic, information rich sessions…….

………To practical, skill based sessions…….
LED TO = ETS HELP
(Health Emergency Learning Program)

- Packaged Practical Skills, Lectures, Videos & Useful links, recorded education sessions
- Located on the WACHS LMS
- Access whenever, wherever
- ETS Education Coordinator maintains HELP

Overall Impact of ETS

- Addressing shortfall of doctors in emergency settings in rural and remote
- Building strong clinical relationships with metropolitan based EM specialists and rural clinicians
- Improved access to timely medical care
- This with other access improvements decreased clinical incidents

ETS has contributed to increased numbers of medical consultations in WACHS small hospitals

ETS: Top 10 referring sites 2016/17

<table>
<thead>
<tr>
<th>Site</th>
<th>Consultations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dongara</td>
<td>1691 (10%)</td>
</tr>
<tr>
<td>Roebourne</td>
<td>1446 (8.6%)</td>
</tr>
<tr>
<td>Jurien Bay</td>
<td>1013 (6%)</td>
</tr>
<tr>
<td>Onslow</td>
<td>925 (5.5%)</td>
</tr>
<tr>
<td>York</td>
<td>919 (5.4%)</td>
</tr>
<tr>
<td>Kalbarri</td>
<td>622 (3.7%)</td>
</tr>
<tr>
<td>Boddington</td>
<td>593 (3.5%)</td>
</tr>
<tr>
<td>Coral Bay</td>
<td>515 (3.1%)</td>
</tr>
<tr>
<td>Cunderdin</td>
<td>453 (2.7%)</td>
</tr>
<tr>
<td>Pingelly</td>
<td>450 (2.7%)</td>
</tr>
</tbody>
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Consistently positive evaluations
Successes and Failures in Telehealth 2017

Game Changer – Proof
Medical response October 2012
Telerehealth plays vital role in Southern Cross medical response

1. Multiple casualty
2. Small Hospital
3. Delayed arrival & co-ordinated
4. Critical care, timely communication
5. Efficient co-ordination

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You met Peter Earlier - Farmer - December 2012
Peter – “I wouldn’t be alive today. I’d be dead if it wasn’t for the ETS doctor and the nursing staff at Cunderdin Hospital.”

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Chloe and Mum – July 2017
Benefits of early intervention by Specialist Physician...
Success

R4R government funding

We tell the stories – multi media

Celebrate & promote success

Patient stories & quotes

Telehealth Awareness Week – Annual

November: Attach Acute Inpatient Service for
1. Deteriorating patient
2. Dr not available short term

Thank you & we welcome you