

nehta

National E-Health Transition Authority
www.nehta.gov.au



eHealth implementation

Peter Fleming, NEHTA CEO

AUSTRALIAN HEALTHCARE SUMMIT

23 March 2011



NEHTA's purpose

Lead the uptake of eHealth systems of national significance; and coordinate the progression and accelerate the adoption of eHealth by delivering urgently needed integration infrastructure and standards for health information



From the National eHealth Strategy



eHealth is one of the most important opportunities to:

- Improve the quality and safety of healthcare
- Reduce waste and inefficiency
- Improve continuity and health outcomes for patients

The facts speak for themselves



Australia's life expectancy is one of the highest in the world, second only to Japan

In 1996, chronic disease accounted for 80 per cent of the burden of disease, measured in terms of loss of years and quality of life

Over three million Australians, or nearly one in seven, suffer from chronic disease

Health expenditure as a proportion of Australian GDP has more than doubled over the last four and a half decades from 3.8% to 9%

Impact on consumers



It is estimated 5,000 Australians die each year due to adverse medical events.¹

Up to one in six (18%) medical errors are due to inadequate patient information.²

Nearly one in three (30%) unplanned hospital admissions in those over 75 years are associated with prescribing errors.³

1 Australian Patient Safety Foundation, www.consultmagazine.net

2 Australian Institute of Health and Welfare, *Australia's Health 2002*, 2002

3 Chan. M, 2001, Internal Medicine Journal, Adverse drug events as a cause of hospital admission in the elderly; 31: 199-205

Impact on clinicians



Clinicians spend around a quarter of their time collecting information rather than treating patients.⁴

ePrescription systems in Sweden, the US and Denmark increased health provider productivity per prescription by over 50%.⁵

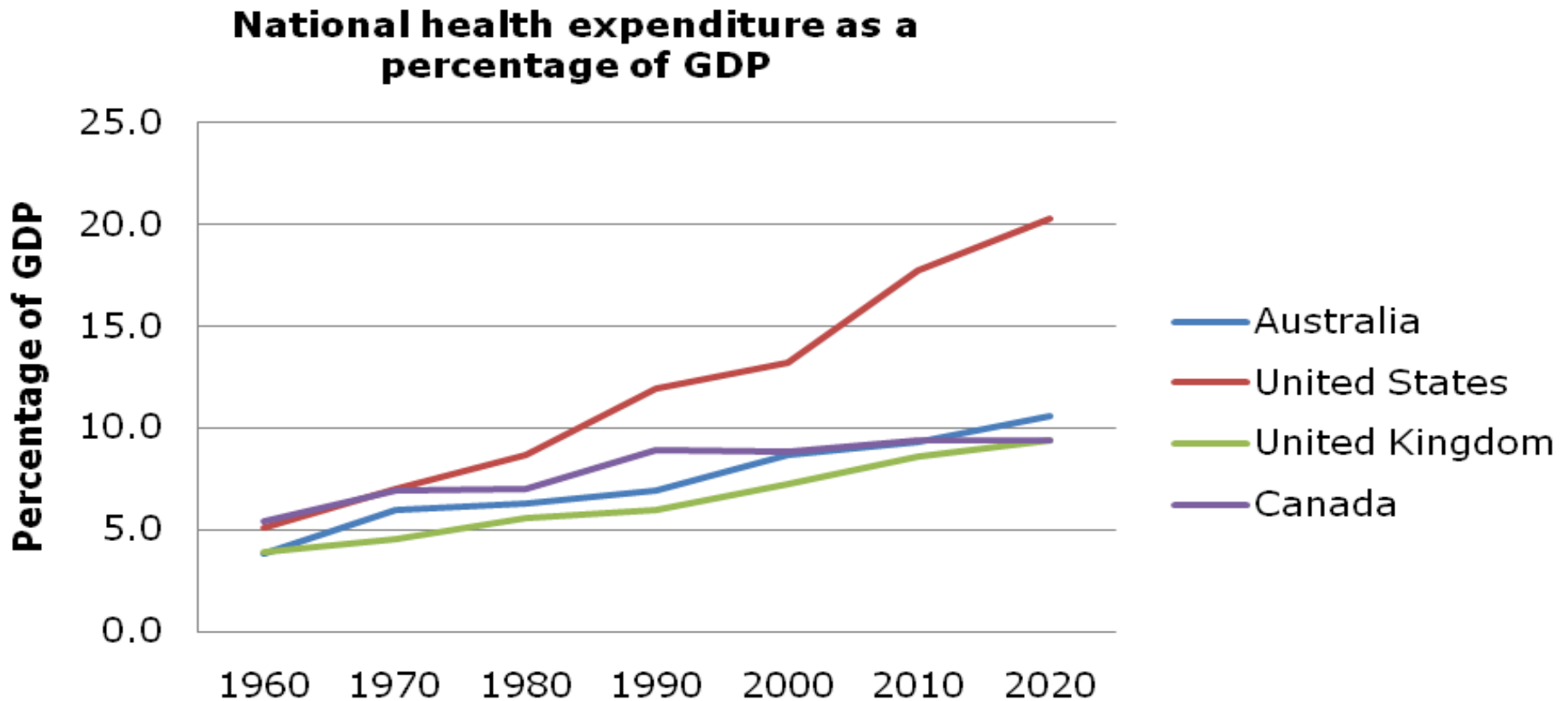
eReferrals in Europe reduced the average time spent on referrals by 97%.⁶

4 For Your Information, Australia Audit Commission, Canberra, 1995

5 Karl A Stroetmann KA, Jones T, Dobrev A, Stoetmann VN, 'An Evaluation of the Economic Impact of Ten European E-Health Applications', 2007

6 Ibid

Impact on the economy



NEHTA work program

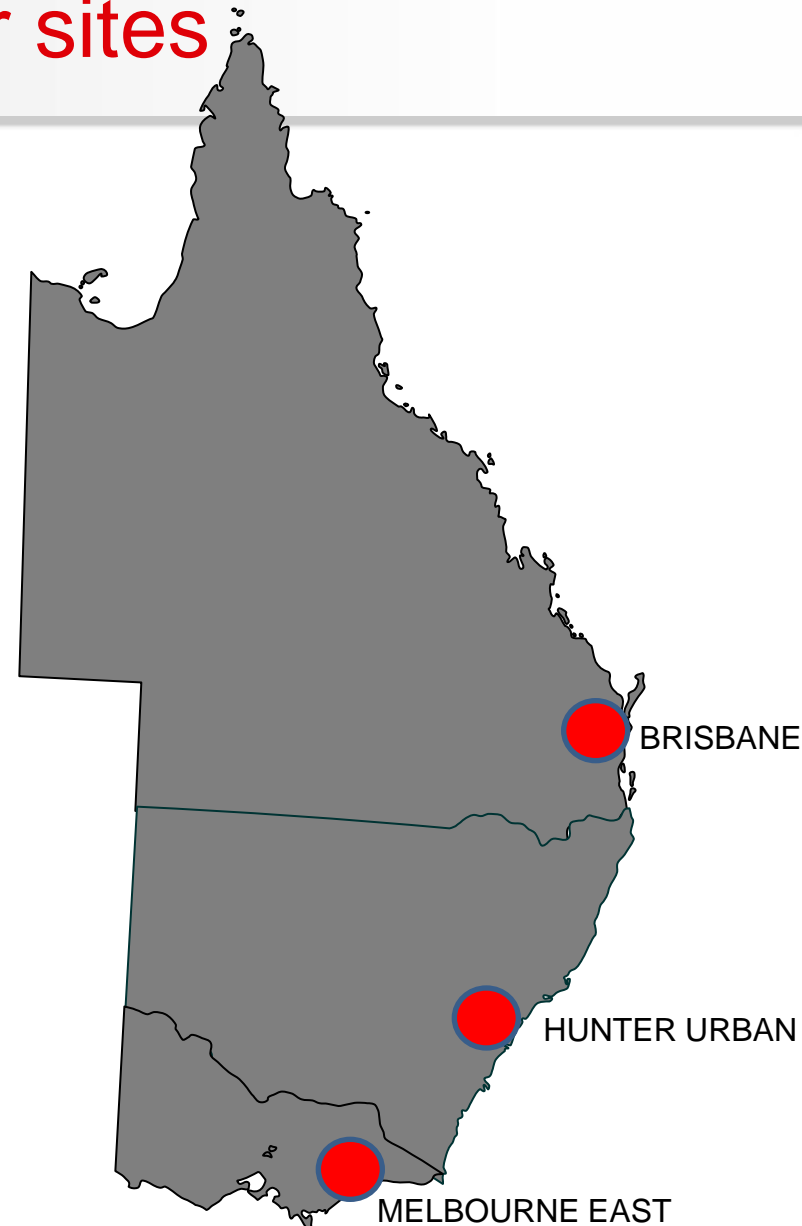
Individual Electronic Health Record	Clinical Information	Individual Information	Shared Information	(Others)
E-Health Services	Shared Health Profile	Event Summaries	Self Managed Care	Complex Care Management
E-Health Solutions	ePathology	eDischarge	eReferral	eMedications
National Infrastructure Components	Terminology	Secure Messaging	Identifiers	Authentication

Making it happen: Early adopter sites

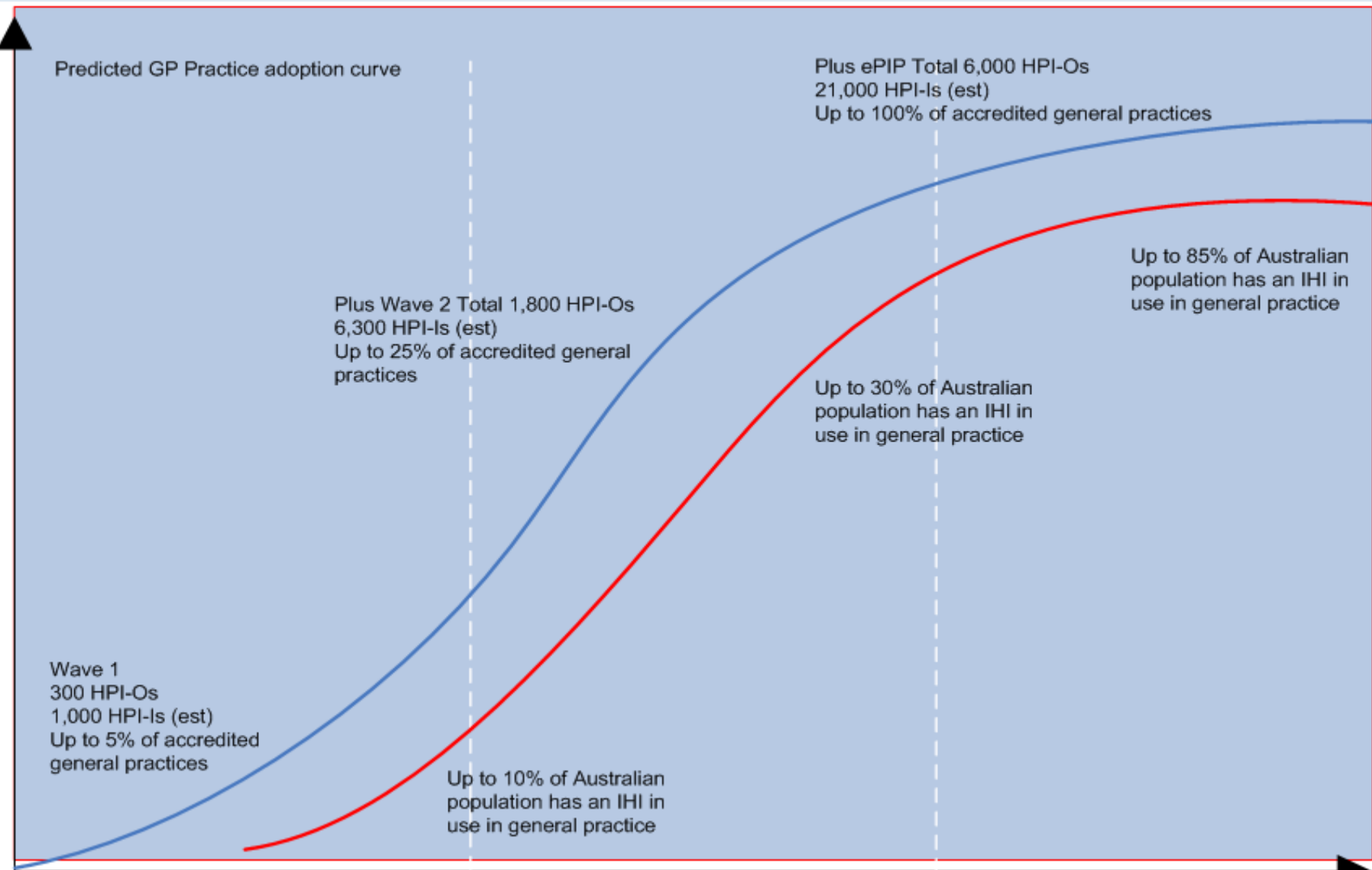
The Commonwealth has provided funding to: Hunter Urban Division of General Practice (HUDGP), GP Partners Limited, and Melbourne East General Practice Network Limited (MEGPN) to work with NEHTA to prepare implementation plan proposals for lead implementation projects.

WAVE 1 TARGETS (Per Site)

- 100 Practices
- 270,000 Patients with IHI
- 3 templates in use with HIH
- 81 Practices using NEHTA Referral
- 81 Practices using Summary Health Record
- 30,000 Consented patients (registered for information sharing)



Adoption curve for HI in General Practice



Predicted GP Practice adoption curve

Plus ePIP Total 6,000 HPI-Os
21,000 HPI-Is (est)
Up to 100% of accredited general practices

Plus Wave 2 Total 1,800 HPI-Os
6,300 HPI-Is (est)
Up to 25% of accredited general practices

Up to 85% of Australian population has an IHI in use in general practice

Up to 30% of Australian population has an IHI in use in general practice

Up to 10% of Australian population has an IHI in use in general practice

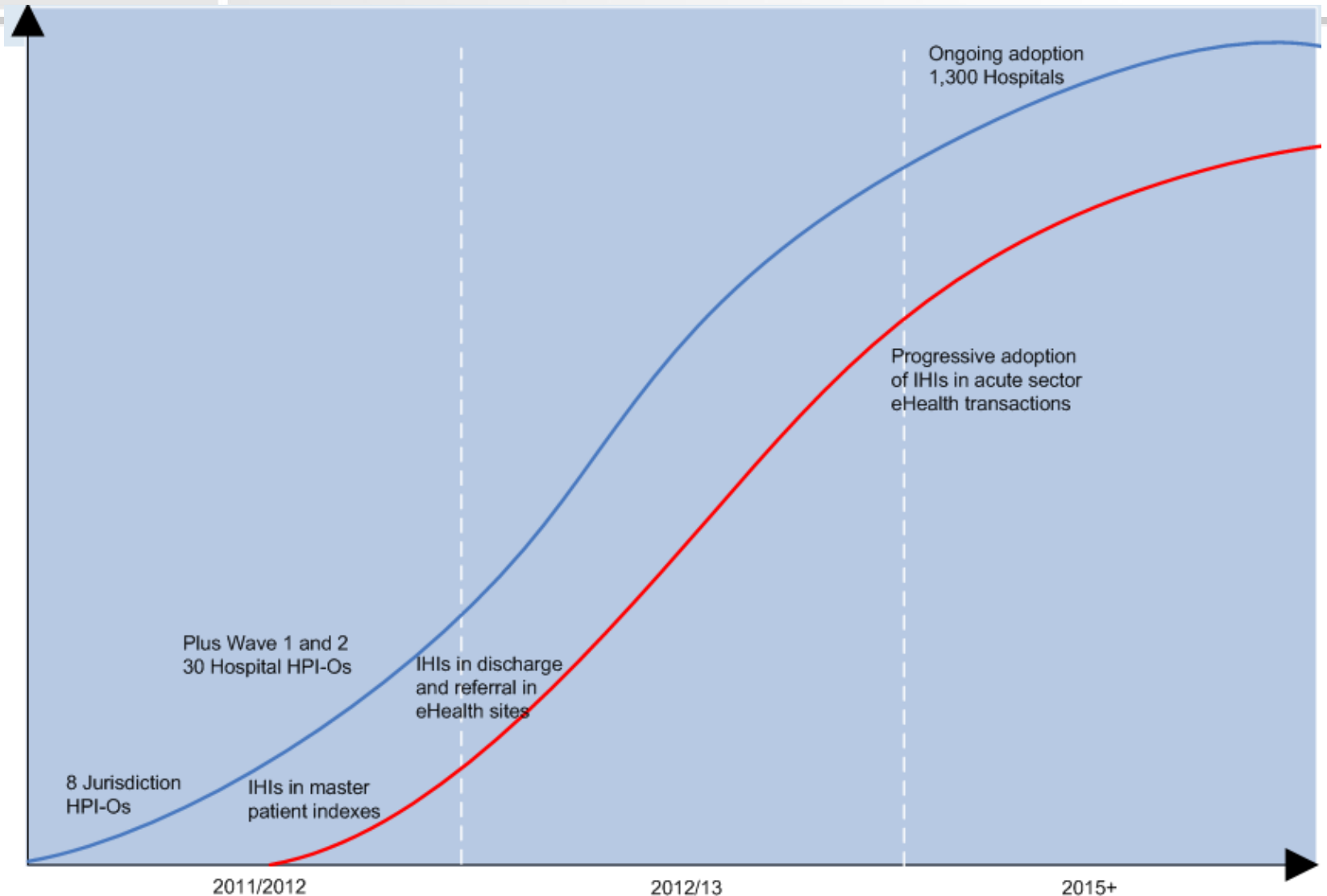
Wave 1
300 HPI-Os
1,000 HPI-Is (est)
Up to 5% of accredited general practices

2011

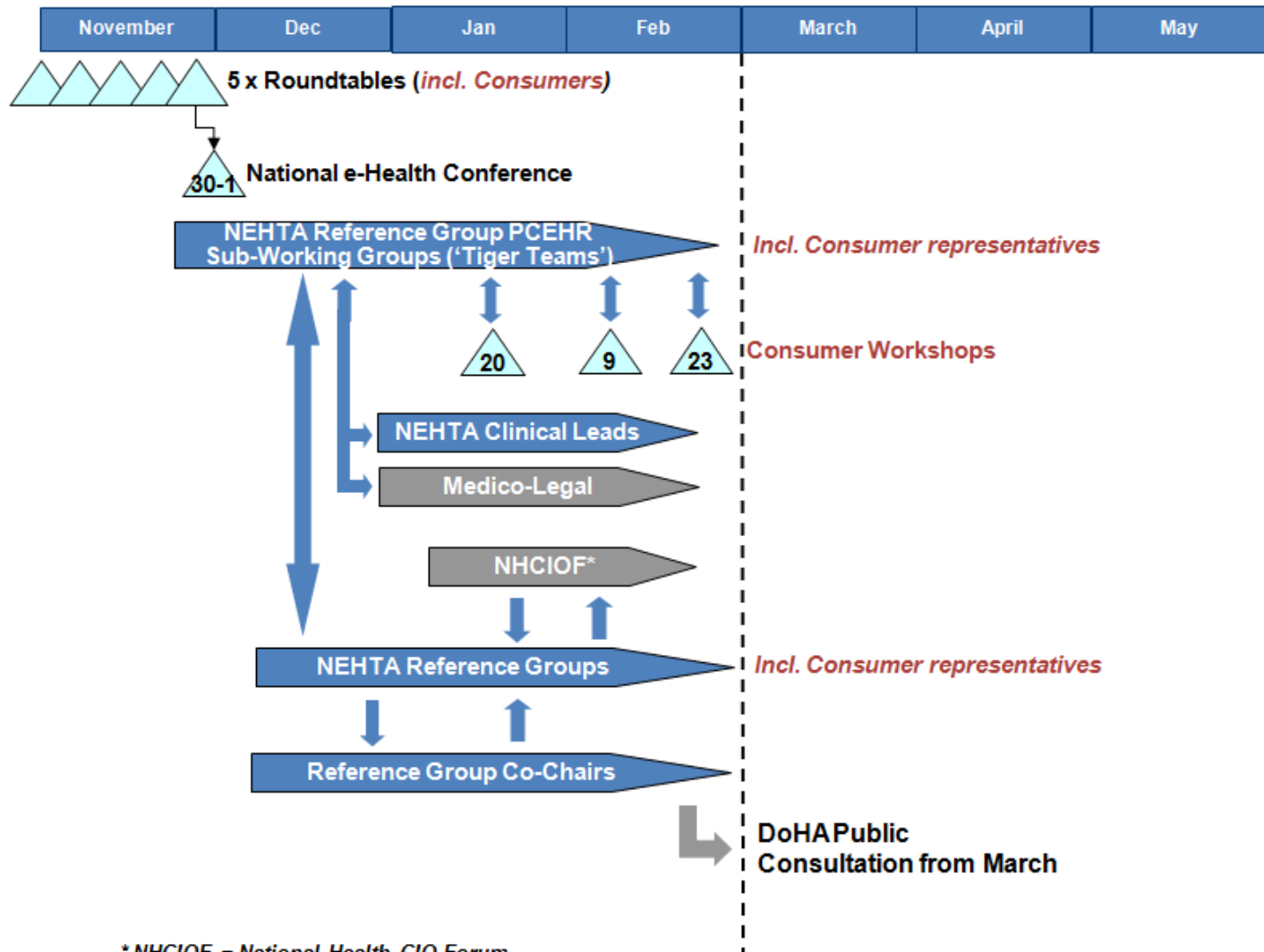
2012



Adoption curve for HI in Acute Care



Engagement and Consultation



Thank you

Questions

