Improving secure electronic transmission between health care providers—the Western Melbourne Report

There are numerous projects in the health sector currently attempting to support the flow of clinical information between key providers. In essence all of these projects have been striving to supply a cost effective means of delivering a secure electronic communications network for the transferring of sensitive health information.

Early in 2005 the Western Melbourne Division of General Practice (WMDGP) engaged CNS Health to provide a secure communication platform to transfer confidential patient, clinical and healthcare information between GPs and healthcare providers. This system has been locally renamed 'Western Melbourne Report'. The initial scope of the project was to link GPs and Private Specialists to allow for referrals and reports to be exchanged securely. However the potential of this communication platform to link a virtually unlimited number of health providers to GPs was recognised.

In late 2005 Western Health became a partner in the project and integrated the daily faxed / posted notifications and reports to GPs into 'Western Melbourne Report' as it was recognized that the current system was costly to the sender and receiver, unstable, and had issues associated with security and misfiling. A Steering Committee was established with representatives from WMDGP, Western Health, General Practice, Private Specialist and the vendor (CNS Health) and a 6 month trial project commenced. Although initial implementation of the 'Western Melbourne Report' commenced in August 2005, the official trial phase began in February 2006.

Outcomes for General Practice

The trial group commenced with 60 providers from both general practice and the private specialist sector using 6 different types of clinical software Medilink, Genie, Bluechip, Zedmed, MedTech 32 and Medical Director.

In consultation with all stakeholders, the following two components of secure messaging were agreed on and transmitted during the trial:

1. Communication between GPs and Specialists
2. Reports from Western Health to GPs
   - ✓ Endoscopy Reports (Footscray Only)
   - ✓ Deceased Advice
   - ✓ Outpatient Appointment Advice
   - ✓ Elective Waiting List Advice
   - ✓ Waiting List Advice
   - ✓ Admission Advice
   - ✓ Same Day Admission Advice (including Pregnancy Day Stay Unit Advice)
   - ✓ Discharge Advice

   To date over 4585 messages have been sent and received via 'Western Melbourne Report' to 14 General Practices. 90% of reports have been generated from Western Health.

Summary of findings

- This project has successfully achieved its aim of supplying a cost effective means of delivering a secure electronic communications network between services providers for the transfer of sensitive health information.
- For practices as an alternative to the AUTOFAX system, sending status reports/notifications to GPs via 'Western Melbourne Report' has proved to be efficient and effective. Messages sent electronically and stored against patient results in the practice software has made a significant contribution to work processes in private practice environment.
- With the trial group of GPs and small number of Private Specialists having already adopted the 'Western Melbourne Report' as a secure means of transferring sensitive patient information, the solution has clearly been successful in both acceptance of the product and the changing of work processes and practices.
- Important to the success of this project was the high level of collaboration between Western Health, WMDGP, GP's, Private Specialists and the vendor (CNS). The in-kind resources from CNS for software development made the trial of this solution possible. CNS and WMDGP provided 'Western Melbourne Report' software and the implementation services to GPs and Private specialists at no cost.

Outcomes for Partners

The implementation of a secure messaging solution for GPs and Western Health in Western Melbourne has improved the timeliness and security of receiving patient information. The use of a point to point secure system as well as practice management processes whereby clinical documentation can be easily integrated into the practice information systems has enhanced the sharing and delivery of clinical information. It has also enhanced the partnerships that currently exist between service providers in the region.

Moving Forward

The project has been successful for the 6 month trail period and is continuing to operate. Commitment has been made by participating partners to further develop and continue the operation of 'Western Melbourne Report' and to commence discussions with neighbouring Divisions and other interested parties.

WMDGP has recently elevated the project to core service status. From here on in the focus will be:

- Providing increased support to practices to encourage the take up PKI
- Implementing a 'Western Melbourne Report' roll-out strategy for all western region GPs and Private Specialists
- Adapting this secure platform to other Division program areas. This has already commenced in the ATAPs program between participating GPs and psychologists.

CONTACT: Heidi De Paoli, Operations Manager, Western Melbourne Division of General Practice
(03) 9689 4566 hdepaoli@westerngp.com.au

Building healthy communities through partnerships
Indigenous Communities

Main findings of the partnership

Western Suburbs Indigenous Gathering Place is an Aboriginal community controlled health organisation. Westgate Division and the Western Suburbs Indigenous Gathering Place have been working together with community health, childrens' services and local government to improve access to services for the indigenous communities across two local municipalities following a population analysis which revealed that approximately 1000 indigenous people were not using local mainstream services.

The aim of the collaboration was servicing the indigenous communities with the first phase being to reach young families in a booming growth area with a service which would focus on bringing indigenous children, family and carers together to enjoy each other's company, exchange ideas and have fun together while giving each other support.

Effective links between the partners provided important direct and long term benefits and value to all sectors. Benefits for the Division included increasing partnerships with other organisations that could build significant capacity for program implementation and future initiatives. One of the highlights is the development of a wellness program for Aboriginal communities.

Outcomes

A satellite centre for the indigenous community was opened in early 2006, which is based within a mainstream service. This structure has enabled the community to access other mainstream GP and allied health services. A mobile play group services the young families from both municipalities and as a consequence other services are introduced and made available to the families as they become familiar with the surroundings.

Feedback from general practitioners has been positive since they have welcomed locally based services which are culturally appropriate for the indigenous communities. This has also resulted in the design of a framework for the capture of ATSI data across many programs of the Division.

'Our Mind Our Body Our Spirit' Wellness Program

This eight-week health and wellness program run separately for indigenous men and women focuses on prevention, early intervention and active health promotion models. The program measures health and well being, what services have been chosen post the program, and whether inequalities have been reduced in the case of men and women accessing services and health information.

Program achievements:

- dispelling myths regarding health issues
- identifying barriers indigenous people face in health settings
- increase in physical activity
- education about nutrition
- weight management strategies
- increasing social interaction within the community
- encouraging access to and use of mainstream health services
- increasing cultural identity

Self esteem issues are also an area of focus. Men and women work together within a group setting to address a range of presenting issues including post traumatic stress syndrome, drug and alcohol issues, sexuality, self esteem, anxiety and depression.

The Division has gained immeasurably through a more sustained interaction with an indigenous agency. This has impacted from the Board down to program development and implementation with more culturally sensitive programs being introduced and ensuring that current programs reach our indigenous communities.

This has cemented the relationship with the Western Region Indigenous Gathering Place and has enabled the Division to address Koori issues which has a potential for major development in the future.

CONTACT: Corinne Siebel, Chief Executive Officer, Westgate Division of General Practice
(03) 9399 4862 corinne.siebel@westgategp.com

Partnerships addressing workforce shortage in the after hours period

There is a national and global shortage of general practitioners that can not be reversed in the short term. This shortage is occurring at a time of increased demand for primary care services due to our ageing population, chronic disease, shorter hospital stays and increased consumer expectations. Workforce solutions in our area can not only be solved through the recruitment of more general practitioners but through the development pragmatic, integrated and workable support systems. These systems make a difference where it matters: access to primary care services and sustaining rural general practice. In our rural area, with limited health resources, such systems are built by local partnerships that allow health resources to be shared. The Grampians After Hours Service (GAHS) is a system built on partnerships that assists the rural general practitioners and our rural community to participate in consistent and quality services in the after hours period.

The system's success is based on cooperation between GPs, general practices, Health Services and most importantly the rural community it services. The GAHS, currently funded from the Commonwealth After Hours Primary Medical Care Program is an integrated rural after hours care system. It utilises shared health resources and capacity to provide a confidential, reliable and consistent after hours health service from 6:00pm to 8:30am, 7 days a week.

The GAHS Team

GAHS is a virtual rural after hours general practice clinic. Practices across our Division switch their clinic phones at 6.00pm to a shared after hours clinic nurse who provides a triage service to general practices across a geographical isolated 62,500km2 and a population of 78,000. This nurse sits within one of our rural hospitals and is a valued member of the general practice team. The after hours clinic nurse operate on a rotating roster from 4 hospital sites. We currently have a team of 6 nurses. Local management by WVDGP ensures the system can be flexible and responsive to all, enabling the service to function across our diverse geographical area.

GAHS provides the community with access to a quality local after hours service system regardless of where they live and incorporates expert knowledge of local infrastructure and accessible health care services both in and out of hours. The GAHS Clinic Nurse has a clinical role that not only includes triaging patients, but also:

- Discussing patients needs with GPs over the phone;
- Participating in clinical problem solving taking into account the geography, and resources available locally;
- Facilitating phone contact or face to face assessment by Emergency Department nurses and or GP;
- Facilitating a GP appointment in the morning;
- Ensuring continuity of care between services, by informing GP of after hours contact made by their patients.

To date the service has received over 10,000 calls and reduced calls to GPs by over 60%. The annual Division member survey reinforced that GPs value this service. The service has effectively reduced the burden of after hours on rural GPs while improving the quality of service to the consumer and supporting skill development in the rural health service nursing workforce.

An established regional and partnership approach also provides a framework to engage new partners. The establishment of the Victorian Governments state wide health assist line Nurse - on –Call, has raised concerns of duplication of effort and increased referrals to general practitioners in the after hours period. The management team of GAHS have been able to establish a partnership with the management team of NOC to ensure the appropriate management of people in our area in the after hours period. Protocols have been developed that ensure that consumers from our area who contact NOC and need after hours primary medical care are transferred to GAHS. GAHS and NOC and sharing data to measure the impact of NOC in our area.

The main lesson learned is that the Division is a trusted organisation and well placed to bring partners together across our region. Being a not - for – profit organisation that advocates for diverse communities across a region, allows the Division to engage town based agencies to participate in systems outside their historical patterns. This in turn allows health resources to be shared creating increased capacity for general practice to provide quality services in our area.

CONTACT: **Jane Measday, Senior Projects Manager, West Vic Division of General Practice**
(03) 5352 4804 j.measday@westvicdiv.asn.au