

# **eHealth in Australia and elsewhere: A comparison and Lessons for the Near Future**

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# Overview

- Introduction
  - eHealth
  - Australian eHealth agenda
- eHealth success in Australia - Areas for consideration
  - eHealth policy
  - Expectations and stakeholder engagement
  - Adoption
  - Technology infrastructure and human resources
  - Economic and legal perspective
- Closure

# eHealth

- eHealth is eagerly embraced around the world
- Planning and preparation is vital, but **past experiences** could hold a key to success
  - Challenges vastly underestimated in the past
- **Several contributing factors,**
  - Funding, Fragmented governance of health services, Reluctance to change and adoption by professionals, Lack of research evidence on benefits, Deficiency of appropriate policy models, Negative political influence
- Can learn from past experiences

# eHealth in Australia

- Latest venture - Personally Controlled Electronic Health Record (PCEHR)
  - Released on 1<sup>st</sup> of July 2012.
  - Initial investment of about \$467 million with further investment to follow
- eHealth intends to
  - Simplify the patient journey, Improve quality of care, Reduce costs
- Expectations - Return of investment
  - Approximately 11.5 billion in net direct benefits between 2010 and 2025 (Australian government + private sector + households + GPs + specialists + allied health clinics) – Deloitte
  - \$7 billion savings arising from eHealth - NEHTA
- A year on, there is very little evidence of eHealth benefits

# eHealth in Australia cont...

- The PCEHR system face numerous challenges and issues
  - Policy, Transparency of operations, Criticism from users – consumers and healthcare professionals and providers, Opt-in Vs Opt-out, Privacy, Usability



The screenshot shows the top navigation bar of The Australian news website. The main headline reads "AUSTRALIANIT PROVIDING NATIONAL SECURITY BY THE THOUSANDS" with a Lockheed Martin logo. Below this is a navigation menu with categories like NEWS, OPINION, NATIONAL AFFAIRS, BUSINESS, TECHNOLOGY, HIGHER ED, MEDIA, SPORT, ARTS, EXECUTIVE LIVING, TRAVEL, VIDEO. The article section is titled "GOVERNMENT" and features the headline "Most doctors reject e-health record system as 'white elephant'" by Fran Foo, dated July 16, 2013. The article text states: "A VAST majority of doctors continues to shun the government's \$467 million e-health record system, with about 58 per cent saying they would never participate in the scheme. Some have warned that the opt-in, personally controlled e-health system, designed as an online summary of people's health information, risks becoming a white elephant." To the right of the article is an opinion piece by Stuart Kennedy, titled "The new 4K format offers extraordinary visuals and dazzling clarity", accompanied by a photo of Stuart Kennedy and a yellow graphic with a gear icon.

# eHealth in Australia cont...

- Australia is not alone in facing these challenges
  - Other countries have already faced similar challenges; some have overcome them whilst others have not
  - **What lessons are there to be learnt?**
- **Countries**
  - Canada
  - Denmark
  - New Zealand
  - Singapore
  - USA
  - UK

# Lessons Learnt

- eHealth Policy

- Australia has a fragmented governing model
  - E.g. Differences in privacy legislation and community services
    - E.g. Privacy was a large contributing failure factor in the US
- A coherent national policy has shown success
  - E.g. Denmark, New Zealand, Singapore
- Nationally consistent policies are slowly immersing
  - Long term pathways must be laid
  - Issues such as appropriate stakeholder management and regional cooperation need to be addressed

# Lessons Learnt cont...

- Expectations and Stakeholder engagement
  - What do the consumers/providers/professionals want?
    - Cater for their needs
  - Success where clinicians were engaged in the development
    - E.g. Denmark, Canada and Singapore
  - Failure where there was a lack of engagement
    - E.g. UK
  - Consumer engagement, awareness programs (now done through Medicare Locals), training programs

# Lessons Learnt cont...

- Adoption
  - System built to cater for the needs rather than adapt
    - E.g. UK's HealthSpace was not designed to the expected needs of the majority of the population
  - The medical profession demand a critical mass of people registered for it to function properly
    - The opt-in model makes this a challenge
    - E.g. UK's opt-out model had a low number of opt-out requests
  - Financial incentives, technical support, and functionalities that appeal to the users
    - E.g. Denmark, New Zealand, Canada and Singapore

# Lessons Learnt cont...

- Technological Perspective
  - Proprietary software by vendors
    - Have to pass the Conformance, Compliance and Accreditation (CCA)
      - Compared to UK and USA, Australia has taken the right path
  - eHealth Skills and Knowledge of healthcare staff
    - E.g. In Denmark, primary care practitioners were given paid technical support to improve adoption
    - E.g. In Singapore, clinicians were given technology support

# Lessons Learnt cont...

- Economic perspective
  - Justifiable return of investment
  - ROI measurement should reflect the expectations of the eHealth initiative
    - E.g. Canada's ROI measurement based on patient safety and quality and effectiveness of healthcare delivery
  - Investment alone will not guarantee success
    - E.g. UK spent approx. £2 billion but did not meet the expectations
    - Methodical and planned
      - E.g. How effective are Medicare Locals?

# Lessons Learnt cont...

- Legal perspective
  - Australia seems to be on track
    - E.g. Recent amendments to privacy law
  - The effects of the changes are yet to be seen
    - E.g. Mandatory notification – depends on data breach detection

# Closure

- Lessons can be learnt from the experiences of other countries
- However, every country has its own unique challenges
  - E.g. Privacy in Singapore is different to Australia, Population – Denmark has only 5 million people, Political landscape
  - An eHealth initiative must consider the characteristics of its target community and its own unique expectations, healthcare system, economic status and legal framework
- Must invest in research
  - And use the results
- Limitations
  - Number of countries (other EU countries), High level view

***THANK YOU***



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