

Western Queensland Primary Health Network Telehealth-Care Guide




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WESTERN QUEENSLAND
An Australian Government Initiative

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Purpose



The purpose of this guide is to support General Practice networks and Commissioned Service Providers to gain a broader acceptance and understanding of the value and quality improvement opportunities of integrating Telehealth in their practice. This guide outlines how Telehealth is central to the successful implementation of comprehensive primary health care within the Western Queensland context and is complimentary to national, state and industry developed clinical standards, codes of practice and guidelines. Our objective is to continue to support a dynamic and adaptive rural and remote health professional workforce prepared to integrate this safe, effective and valuable virtual modality within the Western Queensland Health Care Home Model of Care.



Telehealth in Western Queensland

Across Australia digital technology is enabling innovation in the way health care is delivered. It has continued to unlock efficiency and access to care and is transforming the way we communicate with each other, customise our systems of support for clinicians, and how we connect and empower patients in their care needs. In Western Queensland, the part that Telehealth plays in a wider primary health care strategy is significant and a critical enabler to support better health outcomes for our rural and remote populations.

As a Commissioner of primary health care services, WQPHN is uniquely positioned to collaborate with allied health, nursing and general practice providers, as well as partner organisations and associates to promote Telehealth as an inimitable aspect of care modalities available to Western Queenslanders. During the COVID-19 pandemic, an unprecedented number of primary care patient encounters were transitioned to virtual care and the WQPHN Telehealth-Care Guide has been developed to help articulate the commissioning context and assist health professionals and provider organisations to strengthen the quality, safety and competency of virtual care as an adjunct to normal clinical practice.

This important digital adjunct to face to face care is being guided through a range of professional and industry led initiatives and also underpinned by contemporary professional guidance and standards.¹

Timely and convenient access to care is a determinant of good health and Telehealth has the ability to remove barriers and address many of the key challenges accompanying the delivery of care to widely dispersed rural and remote population catchments such as Western Queensland. In its broadest sense, Telehealth modality includes video, telephone, text and email and often a combination of these communication modalities to safely compliment face to face encounters with patients.

Telehealth has the potential to improve health through redesigning how health care is organised and delivered with integration of virtual modalities. Building a sustainable primary telehealth delivery platform requires significant organisational leadership, workforce development and alignment of incentives linked to quality and affordable care.^{2,3}

When considering health system design and patient activation, the question of delivering people to services or services to people is a dilemma for health authorities the world over. People living in rural and remote areas experience poorer health outcomes compared to their regional and urban counterparts⁴, and Telehealth provides an important solution to many practical limitations that clinicians and consumers encounter on a daily basis. Integrating competency, meaningful use and capability of Telehealth modalities and embedding this into the model of care is essential as we continue to improve and innovate our execution of a comprehensive primary health care strategy in Western Queensland.

What is Telehealth-Care?

Integrating this virtual form of care extends the reach of care, reduces the need for client travel, supports choice in healthcare service delivery options and can be customised around individual self-care needs.

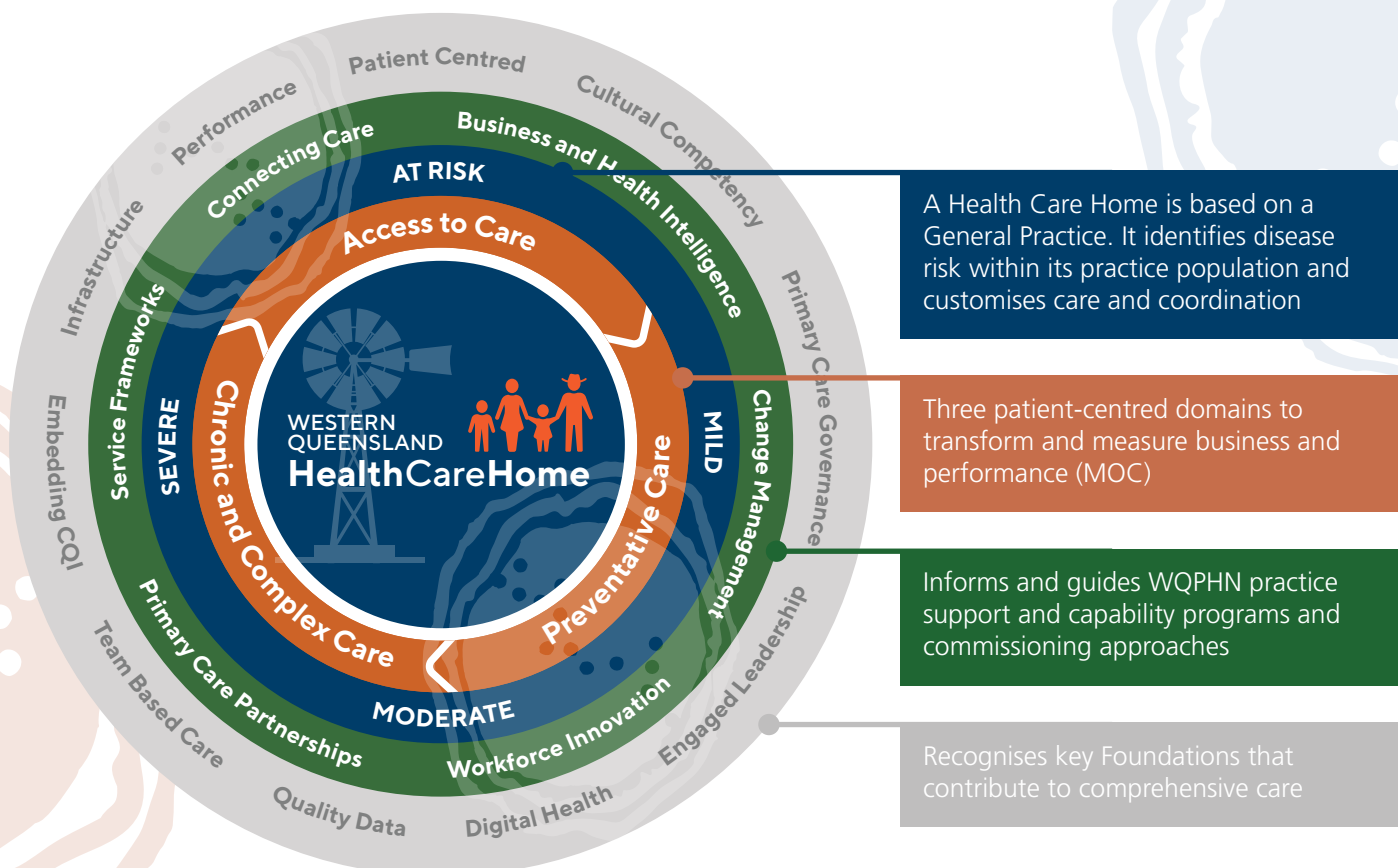
The term Telehealth-Care is a way in which WQPHN seeks to describe the use of telehealth communication to support care continuity within the context of the WQ Health Care Home Model of Care. It defines remote virtual delivery between a health professional and a patient, or between health professionals to support integrated, high quality, patient-centered and safe clinical care. It ensures access to services, patient focused resources, convenience, affordability and support in knowledge and expertise and has proven benefits to both consumers and practitioners.³ Integrating this virtual form of care extends the reach of care, reduces the need for client travel, supports choice in healthcare service delivery options and can be customised around individual self-care needs.



Telehealth-Care in the WQ Health Care Home

WQPHN promotes Telehealth-Care as an adjunct to face to face encounters within its Western Queensland Health Care Home Model of Care (WQHCH MOC)⁵ and build the capability of Commissioned Provider Networks. An expanded uptake of Telehealth-Care will enhance innovation, within multidisciplinary and specialist care settings. The WQHCH MOC is a proven framework that can improve the quality, capacity and efficacy of primary care.

WESTERN QUEENSLAND HEALTH CARE HOME

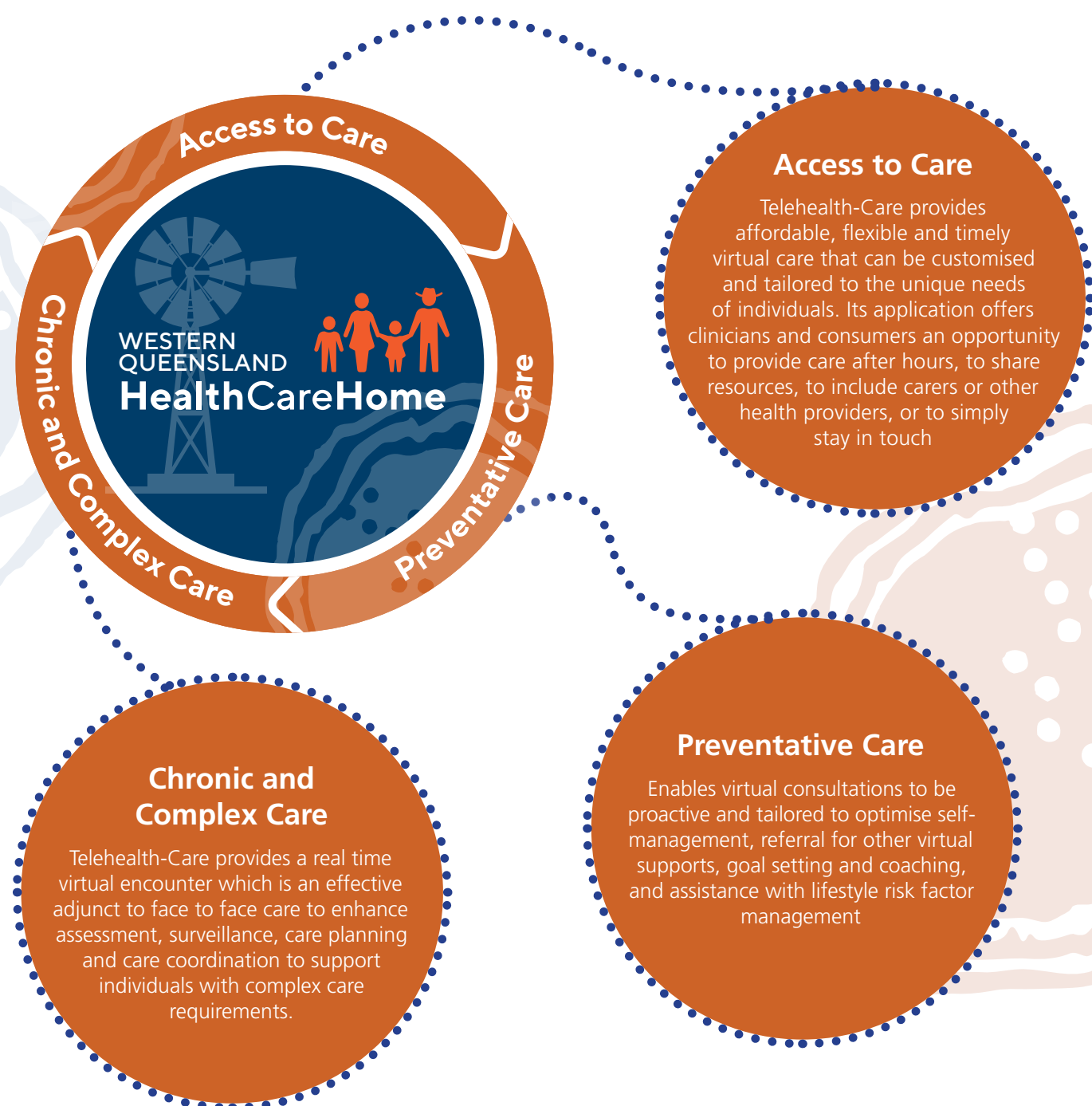


Embedding Telehealth-Care within a primary health Model of Care provides context and will stimulate meaningful use of virtual encounters as part of planned and structured care. Consumers will benefit from Telehealth-Care options that link and integrate care across their local general practice and other health services, supporting individual and team-based support within a virtual setting. Integration of Telehealth-Care will increase the capacity of general practice,⁶ allied health, and nursing⁷ and create greater flexibility, and more person-centred care.⁸ Providing a simple link between consumers and primary health, social care, specialist and hospital based services can offer timely support for people with complex care needs and also increase the focus on early intervention and prevention.⁹

When commissioning primary health care services in Western Queensland, Telehealth-Care will provide an opportunity to consider the efficiency and value of services and most importantly the experiences and assessment of consumers and clinicians in adopting Telehealth-Care as an adjunct to face to face services.

WQ HCH MODEL OF CARE DOMAINS

Integrating a Telehealth-Care approach supports the three core domains central to the WQ HCH MOC.



Benefits of Telehealth-Care

The adoption of Telehealth-Care extends the reach of GPs and other care providers and can assist health professionals to make it easier for patients to access a broader range of health care services and systems. Virtual care options which compliment face to face support and where there are established relationships invariably translates to a better patient experience.^{8,9} Telehealth-Care can also help improve medication adherence, health monitoring, and patient accountability.¹⁰



A survey conducted by Deloitte in 2016 regarding Consumer Priorities in Health Care Survey¹¹ showed that establishing a care relationship was a top priority for consumers. Consumers trust their providers and wanted a personalised experience with them. The “personalisation of care” was the top-ranked measure among consumers, ranked higher than measures related to cost or convenience. This measure includes personalised experiences with providers (for example, feeling heard and understood, not feeling rushed, and being provided with access to resources and information).

BENEFITS FOR CONSUMERS

- **Personalised** video, phone, text, email or combination of all
- **Convenience** for patient in the comfort of their own home or venue of their choice
- **Saving on cost** of travel and time away from home
- **Timely access** to important interventions, diagnosis and prevention and follow-up after appointments or hospitalisation / surgery
- **Reduced anxiety** relating to missing appointments, cost of organising travel arrangements, leaving home for extended periods
- **Opportunity for virtual consultations** with GP, allied health, nursing or medical specialist services **between visits**
- **Access to wider range of services** regardless of location
- **Virtual review** after post-operative or acute episodes
- **Larger networks** of care as carers or family can be involved in consultation either remotely or locally.
- Clients can use **technology to measure own** clinical observations and track health outcomes
- **Identify the human and social services** required to support people working with clients at one time
- **Opportunity to participate** in virtual team care and case conferencing
- **Remote access** to lifestyle risk factor management tools and resources to increase independence and self-management
- Support to gain confidence and knowledge of using technology, but also access to resources and tools that can **help self-management**
- **Confidential** and private conversations

BENEFITS FOR HEALTH PROVIDERS

- **Opportunity to provide remote consultations** between face to face visits
- **Reduced time** spent travelling and lower cost of travel and accommodation
- Ability to talk to clients in their **home environments**
- Opportunity to **package program of care support** to include combination of telehealth options designed around needs of client and improve self-management
- Opportunity to **case conference with other care providers** and extend scope of practice through shared consultation with other professionals
- **Remove barriers** that contribute to DNA (weather, cost to patient, convenience etc.)
- **Extend hours of operation** including after-hours support or weekend consultation options
- **Virtual waiting room** to organise telehealth consultations into daily workflow
- **Ability to easily connect** with patients and carers in same place and time
- Opportunity to provide **patient advocacy** and help connect to other care (e.g. social care)
- Access to secure connections that **meet privacy requirements** and assist patient confidence and literacy in digital health
- **Reduced costs** to patient transport subsidies and schemes.
- **Reduced professional isolation** and access to continuing education, peer support and supervision for remote clinicians
- **Improved communication**, and professional networks across healthcare providers

Commissioning and Measuring the Benefits of Telehealth-Care

WQPHN *Commissioning for Better Health Guide* highlights this dynamic real-time change process and important considerations for service provider and practice networks in our rural and remote context.¹² Commissioning aims to continuously improve and redesign health care systems through a provider capability and population health outcome lens, and strives to address challenges impacting on health improvement while simultaneously managing healthcare costs. Telehealth-Care is an important enabler that will continue to influence national and state reform initiatives and contribute to greater efficiency and quality. Recent MBS reforms and refinancing options, patient reported experiences, clinical re-design, engaged leadership, patient activation measures and workforce facility will contribute to improved health outcomes for clients of our services.^{2,13}

Furthermore, the capacity of Telehealth to support greater person-centred care has been identified by the

Australian Commission on Safety and Quality in Health Care. Other important benefits are reported benefits when Telehealth is integrated into the everyday practice across primary care settings in rural and remote regions of Australia.⁸

Current health intelligence and data analysis will be tailored to ensure visibility of contemporary Telehealth-Care indicators which demonstrate improved performance through integrating telehealth as an authentic component of everyday care. From a commissioning context, measuring benefits of telehealth and its value-add to care will be designed across the four domains of the quadruple aim.¹⁴ Increasingly population health data and reported patient and service provider experiences within the WQ HCH are demonstrating the positive impacts of Telehealth-Care against quadruple aim outcome measures. WQPHN analysis will continue to use this planning and evaluation paradigm.¹⁵



QUADRUPLE AIM BENEFITS OF TELEHEALTH-CARE

IMPROVING POPULATION HEALTH

- Leveraging from telehealth to extend the reach and connection to rural and remote populations and WQPHN localities.
- Enabling access to hard to reach and very remote population segments for health support
- Enabling care to be customised around the priority population segments and health conditions
- Regular ongoing consultation and management of chronic disease will reduce readmissions and reduced length of stay
- Opportunity to provide promotion and prevention activities via telehealth modalities will increase individual's health literacy and awareness

IMPROVING PROVIDER EXPERIENCE

- Reduced professional isolation, communication, networking and collaboration
- Increased sustainability of service delivery options
- Less travel time and reduced time out of practice, fatigue and costs
- Access to professional education
- Knowledge and confidence in integrating telehealth into everyday practice
- Supporting flexible workplaces and ensuring remote health providers are well connected and supported in their roles

IMPROVING PATIENT AND CARER EXPERIENCE

- Person centred care customised to individual
- Access to a combination of Telehealth-Care options
- Access the full suite of services aligned with health needs and management plan
- High quality virtual care equivalent to face to face options where indicated
- Timely access and follow up, including after hours
- Inclusion of family and carers as well as other clinicians
- Increased knowledge and confidence improving independence and self management
- Telehealth-Care aligned within model of care, supporting patient activation and evidence based outcome measures

IMPROVING COST OF HEALTH SYSTEMS

- Reduction in costs to patients and carer to attend face to face consultations suitable for telehealth
- Reduction in patient related travel subsidies
- Less time out of practice and lower travel and accommodation costs
- Timely follow-up for vulnerable patients resulting in a reduction in unplanned emergency and hospital attendance
- Reduction in the cost of DNA
- Virtual team care arrangements, case conferencing and collaboration between primary and social care providers reducing cost to patient and increasing efficiency of planned and structured care

Supporting the Uptake and Adoption of Telehealth-Care

Telehealth offers benefits for patients, their carers, healthcare workers, communities and the health system as a whole through improved access, availability, and efficiency of quality healthcare. Patient-centred, clinician-led telehealth provides an efficient and effective model of care that complements face-to-face consultations.² While telehealth has generally received a greater uptake in hospital settings, uptake and adoption of telehealth in rural and remote primary care settings has been challenging in comparison.^{16,17} Greater support targeting appropriate technology and interoperability, knowledge of providers and patients and financing of the change processes¹⁸ is needed to capitalise on the benefits. The COVID-19 pandemic has highlighted how these factors can constrain Telehealth being easily embedded into everyday practice.¹⁹

WQPHN recognises that many commissioned service providers have rapidly transitioned to Telehealth in the current pandemic environment and practical support will be necessary to ensure these virtual modalities are integrated into the established model of care to ensure continuity of services to clients across Western Queensland.²⁰ Whilst the current operating environment is in response to COVID-19, this event provides WQPHN with the opportunity to support practices and commissioned service providers to access important infrastructure, business processes, workforce support, partnerships and information management

Telehealth is a disrupter and planning is essential to ensure strategies are locally focused, underpinned by financial incentives, built on existing partnerships, enabled through clinical champions, compliant with security and privacy considerations and providing flexibility to adapt to changing clinical redesign requirements.

to secure Telehealth-Care solutions at the heart of its comprehensive primary health care strategy long term.

There are significant opportunities for telehealth to reduce the costs associated with healthcare delivery and improve access and quality of services for both consumers and clinicians.^{21,22}



COMMISSIONING FOR INCREASED CAPABILITY – CHANGE MANAGEMENT SUPPORT

WQ HCH MATURITY

- Tailoring telehealth into the WQ HCH Model of Care implementation
- Enabling virtual networks across team care (including medical and nursing specialist services)
- Co-design, test and adopt evidence based approaches to support integration of face to face and telehealth modalities for complex patients
- Ensure models adopted are culturally safe and secure
- Embed telehealth into clinical consultations for very remote and hard to reach population segments

INFRASTRUCTURE

- Enabling data integrity and system interoperability
- Supporting vendor-based improvements that enable interoperability
- Adopt Healthdirect videocall, Healthily GoShare resources, refeRHealth etc.
- Supporting consistent, affordable and supportive 'best of breed' technology for universal adoption
- Collaborate with regional stakeholders to ensure infrastructure support options in very remote towns

FINANCING

- Optimisation of MBS telehealth items and care pathways
- Define base-line financial requirements for telehealth and indicate activity thresholds in WQPHN service provider contracts
- Continuous quality Improvement activities and collaboratives
- Support for skill development
- Capacity building support for change management, equipment upgrades and digital tools of trade

EDUCATION AND TRAINING

- Customise resources for general practices, service providers and consumers
- Enable telehealth literacy across practice and provider networks to enable confident and efficient use of digital tools
- Supporting clinical and consumer champions to co-design and promote resources, webinars and other curricula that drive cultural change and adoption of Telehealth-Care
- Ensure linkage to national standards, codes of practice and other contemporary practice guides to increase the how, when and why to use telehealth within individual and team environments

PRIORITY POPULATIONS

- Support telehealth enablement for support integrated management AND prevention of chronic illness
- Support telehealth enablement of mental health support within stepped care and where indicated as a co-morbidity
- Tailor specific telehealth responses for Aboriginal and Torres Strait Islander people
- Increase telehealth integration within the WQ Child and Family Framework
- Increasing telehealth utilisation in Residential Aged Care Facilities

INNOVATION

- Support innovation through tailored quality improvement initiatives that can be scaled
- Enable academic partnerships to ensure evaluation and evidence gathering capability of what is working well
- Support selected projects to address identified barriers and obstacles to uptake across priority population segments
- Collaborate with partner organisations and professional bodies to enable rapid development of new processes and technologies

ENABLING COLLABORATION AND REFORM

Australia's National Digital Health Strategy²³ (NDH Strategy) details the vision, based on an evidence base of benefits, and outlines tangible outcomes that have been committed to by the health Ministers from every Australian government. The Medicare Benefits Schedule (MBS) Review Taskforce and Primary Health Care Advisory Group (PHCAG) are contributing to the 'Healthier Medicare' initiative²⁴ which will guide further reforms to telehealth and Model of care considerations.

The NDH strategy outlines the roles and responsibilities of Commonwealth, State and Territories, private enterprise, non-government organisations and other key stakeholders to support the uptake and adoption of key actions to progress the digital health ecosystem. It is this process of working together at all levels that is important to empower our health workforce, patients, and provide the tools of trade that enable uptake and meaningful use of modern digital services and products. In the table below are some examples of actions which have been developed and progressed to develop the foundations to support the digital health ecosystem.

STATE AND NATIONAL	FUNDING REFORM	DIGITAL ENABLERS
<ul style="list-style-type: none"> • Australian Digital Health Strategy • Australian Health Practitioner Regulatory Agency (AHPRA) Guidelines for Technology-based Patient consultations • Queensland Health Telehealth Program • Australian Medical Association • Australian College of Rural and Remote Medicine (ACCRM) and Royal Australian College of General Practitioners (RACGP) • Australian Nursing and Midwifery Federation (ANMF) and ACNP and CRANaplus • Peak Allied Health professional bodies standards and guidelines • National Aboriginal and Torres Strait Islander health plan • ACSQHC National Safety and Quality Digital Mental Health Standards (Draft) 	<ul style="list-style-type: none"> • "Healthier Medicare" Initiative • Expanded MBS Item numbers for services delivered by telehealth • Increased practice incentive payments to support practices to maintain critical services and patients continue to received quality care • Tailoring of workforce payments and block funding to support development of skills, knowledge and cost of Telehealth-Care • Preference for affordable integrated systems and support 	<ul style="list-style-type: none"> • Improved broadband infrastructure and connectivity in remote areas including free wifi services • Healthdirect videocall • Healthily Goshare resources • ePrescription • Interoperability of software and devices • Vendor and discipline specific products and end to end connectivity • My Health Record integration • refeRhealth • eMental health tools

Guidelines and Standards

SOURCE	ITEM	CONTACT DETAILS
AHPRA (and Medical Board)	<p>Each National Board's Code of conduct is available on the Board's website.</p> <p>For medical practitioners, the Medical Board of Australia's Good Medical Practice: a code of conduct for doctors in Australia.</p> <p>For psychologists, the Australian Psychological Society's Code of Ethics.</p> <p>For nurse and midwives, the Nursing and Midwifery Board of Australia's Code of conduct for Nurses, Code of Conduct for Midwives and Standards of Practice.</p>	<p>AHPRA Board's Code of Conduct https://www.ahpra.gov.au/</p> <p>Medical Practitioners https://www.medicalboard.gov.au/Codes-Guidelines-Policies/Code-of-conduct.aspx</p> <p>Psychologists https://www.psychology.org.au/About-Us/What-we-do/ethics-and-practice-standards/APS-Code-of-Ethics</p> <p>Nurse and Midwives https://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx</p>
RACGP Standards and Policies	<p>Guide to providing telephone and video consultations in general practice.</p> <p>This guide will help specialist general practitioners (GPs) and broader practice teams provide safe and effective telephone and video consultations during these unprecedented times, and outlines the clinical, administrative and technical considerations for practices introducing this mode of healthcare delivery for the first time.</p>	https://www.racgp.org.au/running-a-practice/practice-management/business-operations/providing-patient-care-during-covid-19-telehealth
ACCRM	The purpose of the ATHAC Telehealth Standards Framework is to provide health and medical colleges, clinicians and health care organisations with a common approach to the development of craft specific guidelines to assist members in the establishment of quality telehealth services.	http://www.ehealth.acrrm.org.au/acrrm-telehealth-guidelines
Nursing and Midwifery	Telehealth Standards: Registered Nurse. The Telehealth Consortia comprising the Australian Nursing Federation (ANF), Australian Practice Nurses Association (APNA), Australian College of Nurse Practitioners (ACNP), Australian College of Midwives (ACM) and CRANApplus. The broader project delivers a set of activities designed to give nurses and midwives the confidence and skills to participate in, and contribute to the provision of health care through Telehealth technology.	https://crana.org.au/uploads/pdfs/Telehealth_Standards_Registered_Nurses_1.pdf
Agency for Clinical Innovation (NSW Health)	Telehealth in Practice. This guide provides the foundations to build a dynamic and adaptive workforce that can confidently integrate technology to assist all facets of service delivery.	https://www.aci.health.nsw.gov.au/_data/assets/pdf_file/0008/509480/ACI_0261_Telehealth_guidelines.pdf
AHPRA COVID-19	Registered health practitioners are playing a vital role in treating and containing the novel coronavirus that causes COVID-19. This is an unprecedented situation and we know you are working hard to keep people safe in a demanding and fast-changing environment. AHPRA have developed information which outlines our expectations of how registered health practitioners will use telehealth in the context of the COVID-19 pandemic.	<p>https://www.ahpra.gov.au/News/COVID-19.aspx</p> <p>https://www.ahpra.gov.au/News/COVID-19/Workforce-resources/Telehealth-guidance-for-practitioners.aspx</p>
ACSQHC	National Safety and Quality Digital Mental health Standards currently being developed but will provide a best practice guide for service providers and mental health service users.	https://www.safetyandquality.gov.au/sites/default/files/2020-04/UPDATED%20national_safety_and_quality_digital_mental_health_standards_-_consultation_draft_-_feb_2020_0.pdf

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Australian Government

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WESTERN QUEENSLAND

An Australian Government Initiative



SCI QUAL
INTERNATIONAL



Western Queensland PHN acknowledges the traditional owners of the country on which we work and live and recognises their continuing connection to land, waters and community.



We pay our respect to them and their cultures and to elders past and present.