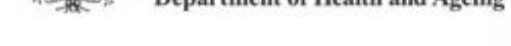
Telehealth in the Home: Palliative Care, Aged Care and Clinical Rehabilitation in SA

Funded by the Australian Government under the National Broadband Network (NBN) Enabled Telehealth Pilots Program'









Project Collaborators:

Flinders University

South Australian Local Health Network

Country health SA

Southern GP groups, ACH

scope

- investigating the effect of online technologies to support aged and palliative care patients in the home

- team approach integrating patients, carers, GPs, primary health care providers, aged care facilities and specialist services

three Clinical streams

- Rehabilitation in the elderly: including people recovering from stroke or fractures
- Palliative care: support of home-based patients and their carers.
- Aged: clinical care and assessment in RACFs

core technology

- direct desktop video access with clinical nurses and therapists
- mobile tablets
- NBN, 3G and ADSL Internet access
- assessment and monitoring applications
- activity monitoring (Fitbit)
- self-management websites

desktop video conferencing



tablet video for patients





activity & weight monitoring





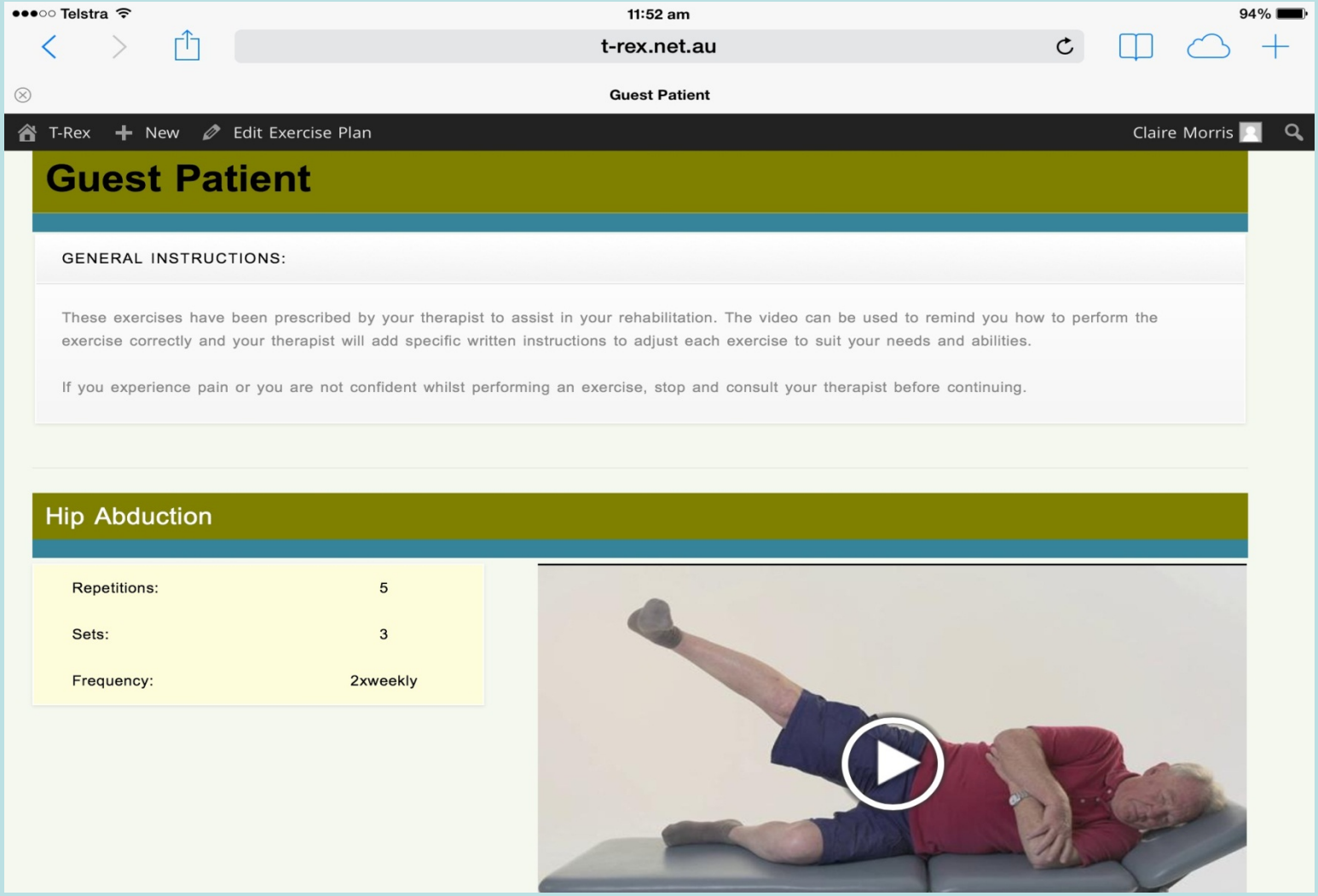




Rehabilitation

- 61 patients to end of April
- Exercise application
- AQoL-4D Basic – baseline and discharge
- Geriatric Depression Scale – baseline and discharge
- Falls Diary – every two days

exercise application



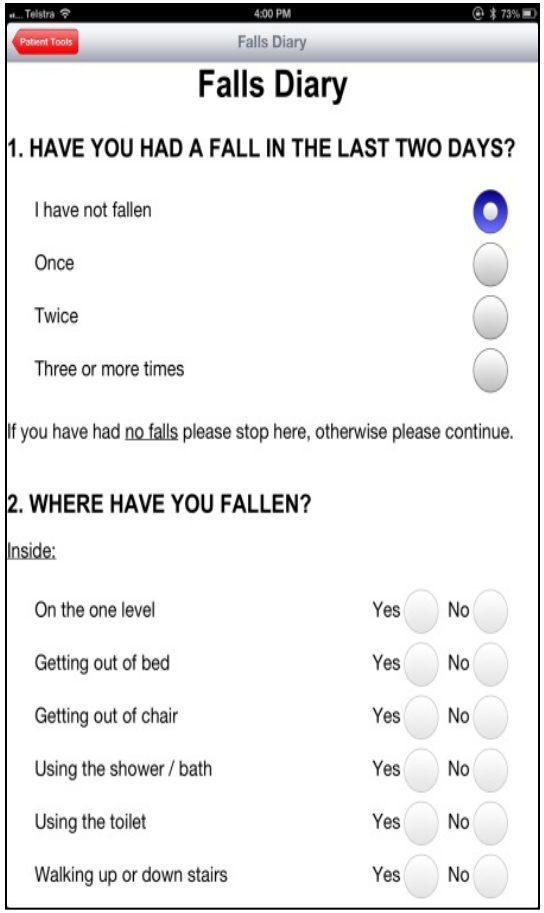
Palliative Care

- 32 patients to end of April
- daily and weekly Alerts
- symptom Assessment Scale
- Australia-modified Karnofsky Performance Status Scale
- Health Care Utilisation Diary
- AQoL-4D Basic
- Caregiver Assessment Questionnaire

Aged Care

- 44 patients to date
- older people in Strathalbyn and Waikerie Residential Aged Care Facilities – geriatric assesment
- uses SA Health Digital Telehealth Network
- also linking to private nursing home

Applications





evaluation

- **clinical service efficiency** - staffing, clinical time, travel, accommodation
- **effectiveness** - care planning, integrated care, decision making
- **training and accreditation** - needs and guidelines
- **sustainability** – funding, costs, uptake

Telehealth in the Home – preliminary results to April - clinical

- reduces travel time, doubles through-put
- improves ‘dose’ of intervention
- more timely intervention – reduced readmissions?
- well received by clinicians and participants
- 3G access moves telehealth into post-acute care
- driving new models of care, new care teams (integrated technical requirement)

travel

- *[Specialist is] the other side of Adelaide and just to get an appointment to go and talk to him, we felt, was ridiculous! [Patient is] not comfortable in a van and to drive all the way over to there just to have a little talk that could be over Skype – why not use Skype if we can?[Carer 7].*

increases ‘dose’

You don’t slack off at all because you know that on the Monday, on the Wednesday or Friday, there’s going to be someone there to talk to you. So you keep up with everything that you’ve been doing so you can give a report on those days [Patient 1].

timeliness

- *[For] people who are rehabilitating after an operation and are away from the central areas, I think it's going to be a wonderful system [Patient 5].*

convenient

- *And in your own home, that's something you don't even dream of, but it happened! It can happen. So that was good [Patient 2].*
- *Because I don't drive at all, it's really difficult, transport-wise, and it would've involved me in lots of time more than I needed to be spending doing that [Patient 2].*

acceptance

Oh, I was a bit nervous the first week because it was something new. It was easy to pick up [Patient 5].

The iPad was easy. [Patient 6]

I found it easier to ask questions. Easier than when I go to a doctor. [Patient 5].

Telehealth in the Home – preliminary results to April - technical

- low end commodity tech is effective in changing clinical care
- 3G works for post-acute, with transition to broadband for more chronic intervention
- not all video clients are equal – VIDYO vs Jabber

considerations

- specific guidelines on quality of care and service needed
- the technology required to support telehealth will vary between organisations
  eg aged care settings are often “low tech”
- interoperability with existing telehealth networks and information systems
- alignment to EMRs and personal EHRs

innovation and research

- integrated technical and clinical teams
- technical solutions evolve rapidly
- new Care models being tested
- on-going evaluation

challenges

- embedding technical support in clinical teams to provide confidence in the day to day service delivery of telehealth.
- new requirement for ICT services to support tablets, in patients' homes
- home use depends on the availability of consumer level internet services

Opportunities

- Over to You!