



Health Informatics Society Australia Ltd.

2008-2009

HISA Pre-Budget Submission

1. Introduction

As Australia enters 2008 it faces unprecedented pressures on its health systems, with mounting demands for and on health services and increasing concerns with performance, quality and safety of the care delivered. A core enabler of improvement in the quality, safety and efficiency of health services is the appropriate investment in and use of information technology in the health sector. In the last decade many consider that Australia has made inadequate investments in the health sector IT infrastructure and that those investments that have been made, have not been coordinated and managed for the best outcome.

Despite recognition in most other advanced countries of the need for attention to be paid to this segment, Australia sits without a plan for how it will deliver its eHealth future. There is not yet even a clearly articulated and shared vision of what we expect our investments in eHealth to deliver. In addition to an inability to define our future and guide our development, there has also been little attention paid to assisting the effective implementation of the eHealth systems that are currently being implemented in both the public and private sectors.

It is within this context that the Health Information Society of Australia provides the following pre-budget submission.

2. Lack of Agreed Plan and Vision Significantly Increases eHealth Costs and Risks

The delivery of a fully interoperable health system, which extends across state borders, supports the private and public sectors and is accessible by the diverse array of healthcare providers, as well as consumers, is a task of enormous complexity. It is also an activity that could profoundly influence the everyday lives of many Australians.

To deliver such an intricate and socially influential program demands the effective balancing of the complex and often conflicting stakeholder requirements with the pragmatic elements of systems capabilities, cost, and available human resources. The failure to do this leads to the wastage of financial and human resources that has often been characteristic of health IT systems implementation in Australia.

There is no doubt that the standards and infrastructure elements which the National EHealth Transition Authority (NEHTA) has so far been charged with delivering are important for Australia. But more important is ensuring that these elements will combine to deliver a health system which fits the requirements of the health consumers, providers, and the Government and that they can be delivered by industry. To achieve this demands a broadly-shared vision, and a plan by which we can guide and measure our progress.

To be effective such a plan needs to come from close engagement with stakeholders; health consumers, providers, government and the supporting technology industries. This vision and plan needs to be such that it can guide not only NEHTA and other Government policy but also energise the healthcare providers and their vendors so that there is a common focus throughout the healthcare delivery chain.

Such a plan does not exist and its absence is having a substantial impact on the ability of Australia to deliver its hoped for outcome improvements from eHealth. In the past 2 years NEHTA, has suffered from this lack of direction and has been criticised for its inability to engage. The recent Boston Consulting Group report on NEHTA performance¹ and the HISA submission to that study² highlighted NEHTA's

- Inability to deliver on their work plans
- Inability to spend a large portion of their budgets
- Inability to effectively engage with their key stakeholder groups

At the same time an extensive HISA analysis of our eHealth status³, (contributed to by of over 200 ehealth professionals) delivered a disturbing evaluation of Australia's slow and uncoordinated progress towards an effective eHealth environment. This study especially highlighted the absence of planning and engagement and its significant effect on service provision.

While recognised as important by both the Boston Consulting Group report on NEHTA and the Australian Health Information Council (AHIC) interim report⁴, neither NEHTA nor AHIC has done this, nor it would seem do they have the trust of the stakeholders to get the necessary buy-in for a consensus plan.

In summary, Australia's eHealth development program lacks a broadly agreed plan and is substantially disconnected from the needs of the key stakeholders. Consequently it is unlikely the current eHealth investment will deliver on the Government's needs and the consumer and healthcare provider's requirements.

Recommendation 1

That Government fund the collective engagement of the key health stakeholder groups in the development of an agreed vision and plan for eHealth in Australia. This plan should be aimed at delivering on the service, cost and quality benefits that support the needs within the government's health priority areas.

This group should be independent of the existing NEHTA and AHIC organisations and encompass providers, vendors and health consumers, in addition to Federal and State Governments.

¹ BCG Report on the NEHTA Review December 07:

http://www.nehta.gov.au/index.php?option=com_docman&task=doc_download&gid=421&Itemid=139

² HISA Submission to the Boston Consulting Group NEHTA Review, HISA Report, August 07:

http://www.hisa.org.au/files/doc/submission_to_BCG_NEHTA_Review_v4_Public_Release.pdf

³ A Vision for an Australian Healthcare System Transformed by Health Informatics, HISA Report; November 07:

http://www.hisa.org.au/files/doc/A_Vision_for_an_Australian_Healthcare_System_Transformed_by_Health_Informatics_v8_Public_Release.pdf

⁴ AHIC Preliminary Strategic Work Plan

<http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-ehealth-ahic>

3. Lack of Workforce Capacity Jeopardises eHealth Deliverables

One of the key findings of the Boston Consulting Group report on NEHTA⁽¹⁾ was the severe impact that a lack of skilled Health informaticians is having on the ability of NEHTA to deliver on its goals. This impact is characteristic of the situation across the entire health industry. The lack of appropriately trained IT and health professionals puts Australia at significant risk of being unable to effectively implement and maintain its current health IT systems and infrastructure let alone the development that is planned.

This situation has been exacerbated by a significant reduction in the number of institutions providing undergraduate and post graduate training in health informatics. While there are continuing educational programs in health information management, this is only a small element of the required skill set. What is needed are trained IT and health professionals that understand the domain of health informatics, which includes data, communications, security and privacy, systems implementation and evaluation amongst a range of other issues.

These skills are not easily transferrable from other information technology specialities as health information has unique characteristics which separate it from other information types. The enormous complexity of the information and its delivery processes, together with the level of required privacy, security and accuracy of the data, reflect an information environment of unequalled complexity, where errors can readily endanger lives or ruin relationships and careers. It is for this reason that NEHTA has identified the absolute requirement for trained professionals in this area and the consequent need for staff to be recruited from overseas - and yet there is a world-wide shortage of people with these skills.

While recruitment of international staff may fill the short term requirement of NEHTA, it will not solve the long term staffing problems as NEHTA's solutions are deployed throughout the healthcare industry. The lack of trained staff will lead to poor systems implementation and support, with the commensurate increase in costs and risks to the healthcare consumer.

Recommendation 2

That Government make a substantial increase in the funding of graduate and post graduate education programs as well as the deployment of professional development programs for IT and health professionals to enhance expertise in health informatics.

In addition Government should support a health informatics accreditation program similar to the Australian Computer Society "Practicing Computer Professional" (PCP) and the "UK Certified Health Information Professional" (UK CHIP) programs to better describe the skills required and identify those that have them to provide a reliable guide for employers.

4. Need To Improve the Current Return on Investment of eHealth Systems

With our health system under stress and millions of dollars being spent annually on the current deployment of health IT systems throughout Australia there is an urgent need to deliver immediate assistance in making these implementations more interoperable, enabling them to better deliver on their promised economic and quality benefits. Attention to these issues further supports the role of NEHTA in the effective delivery of standards and operating processes.

In Australia, the fact that two standards complying systems suppliers can still be unable to effectively communicate due to their individual interpretation of standards has been a significant barrier to the delivery of state or national level health systems interoperability. This issue is made the more challenging in the Australian health system where there is a diversity of private and public health service suppliers.

Resolution of this issue requires a process that brings the vendor community together to deliver the common implementation of standards, an activity which is often initially not seen as being in

their individual commercial interests. The critical need is to do this in a fashion which fosters innovation and cooperation between vendors to ensure the delivery of the lowest cost, most effective systems across the community.

This is not a standards setting activity and needs to be delivered external to the standards development bodies, by an organisation in which vendors have a significant involvement. In the US and Europe this has been effectively delivered through the industry driven "Integrating the Healthcare Enterprise" (IHE) activities⁵. These operations physically bring vendors together in a commercially non-competitive environment where their technical experts are charged with the task of taking specific sets of standards and making them work in particular health care scenarios across a broad range of systems.

Bringing these otherwise competing technical communities together with a common purpose enables the development of highly innovative solutions to unique local interoperability issues with the resultant IP being spread amongst the broad healthcare IT community. This operation also strongly fosters the development of local health software community, further strengthening Australia's capability to deploy and support the major IT systems and infrastructure required for an effective and reliable eHealth environment in Australia and to compete overseas.

Importantly these cooperative engagement processes can be implemented to provide both short and long term improvement in the benefits delivered through the current systems implementations. They will also further benefit from the outcomes of NEHTA's work over the next two years, but they deliver their benefits independent of those activities.

Recently a number of Australian system vendors and key associations have become founding members of the IHE International organisation with the intent of leveraging the substantial resources of IHE International in the further development of health system interoperability in Australia. This program is currently supported by a small number of volunteers and is unable to deliver the services required to fully support Australia's planned transition in eHealth.

Recommendation 3

The Government fund the further development of an open, IHE type process to engage and focus health system vendors in Australia. This process needs to be external to the existing NEHTA standards and infrastructure creation activities.



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⁵ Health Initiative Blueprint: Building Consensus for Common Action, eHealth Initiative Report, October 07:
<http://www.ehealthinitiative.org/blueprint/>