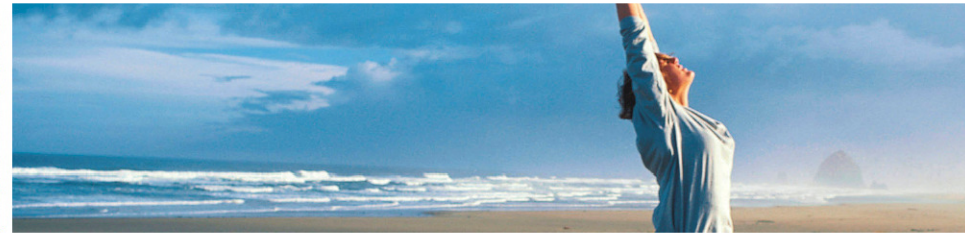
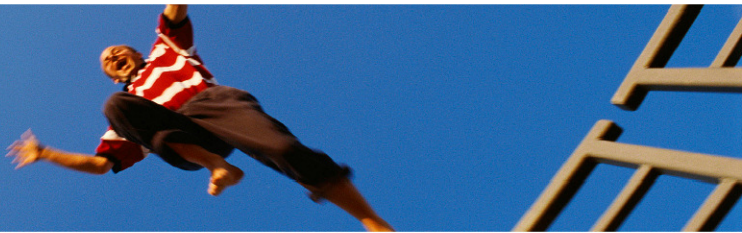


nehta

eHealth



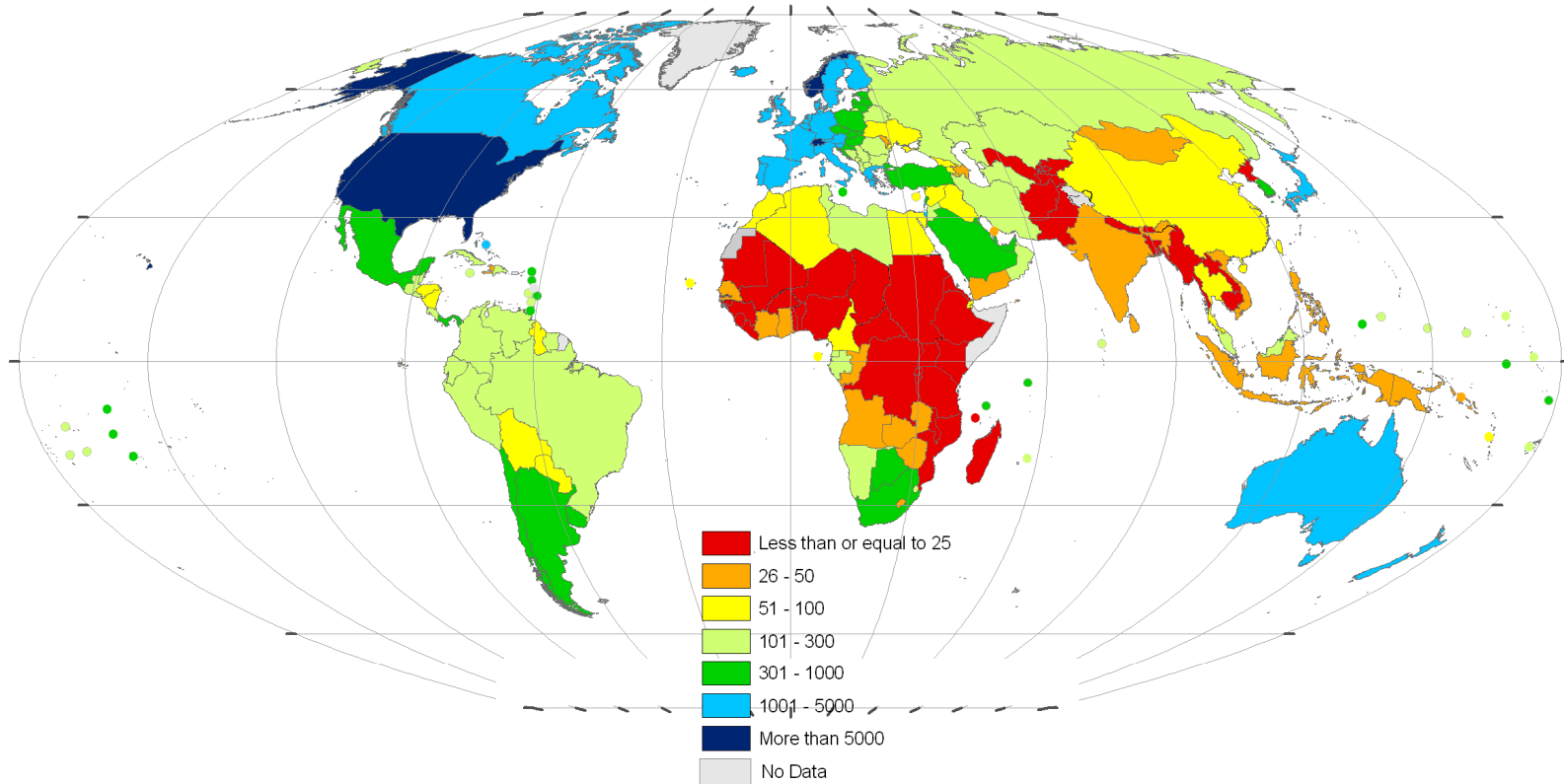
Ken Nobbs  
Program Manager – Medical Products

- Total population: 20,530,000
- Gross national income per capita (PPP international \$):  
34,060
- Life expectancy at birth m/f (years): 79/84
- Healthy life expectancy at birth m/f (years, 2003): 71/74
- Total expenditure on health per capita (Intl \$, 2005):  
3,001
- Total expenditure on health as % of GDP (2005): 8.8

Figures are for 2006 unless indicated. Source: [World Health Statistics 2008](#)



Total expenditure on health per capita, 2004  
(in US\$)



 **World Health Organization**  
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The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.

**Data Source: National Health Accounts unit, Evidence and information for policy, World Health Organization**

Map Production: Public Health Mapping and GIS Communicable Diseases (CDS), World Health Organization



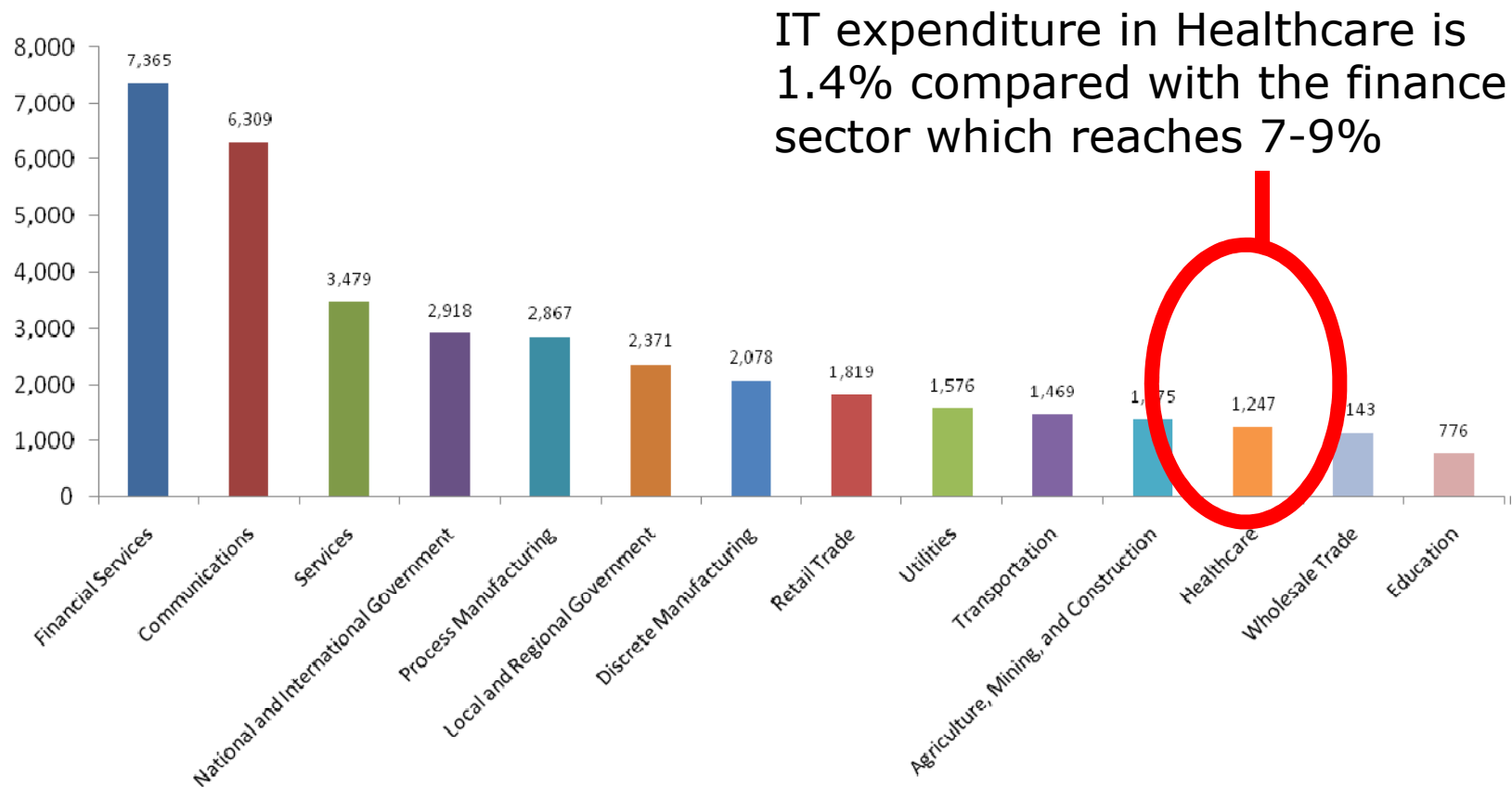
- We treat a lot of people
  - 6.7 million people received accident and emergency services in public hospitals in 05-06
- We spend a lot of money. In 2005–06:
  - \$86.9 billion was spent on health in Australia
  - 755 public hospitals with 54,601 beds,
  - 284 private hospitals with 25,252 beds
  - ~18,000 full time equivalent General Practitioners
- We get excellent results
  - Australians enjoy one of the highest life expectancies in the world at 80.62 years



- Chronic disease is on the rise
- Our ageing population is increasing demand for healthcare services
- Treating complex healthcare problems is expensive
- The healthcare workforce has not kept pace with the growing demand for services
- Our health system is better equipped to treat your heart attack than preventing it from happening in the first place



Despite current successes, there are opportunities to improve through the use of technology



Source – Deloitte e-health strategy 2008 and Gartner



NEHTA was established out of recognition that only a national approach will work.

- Representing 6 States, 2 Territories and the Commonwealth in delivering eHealth reform

Our vision is to:

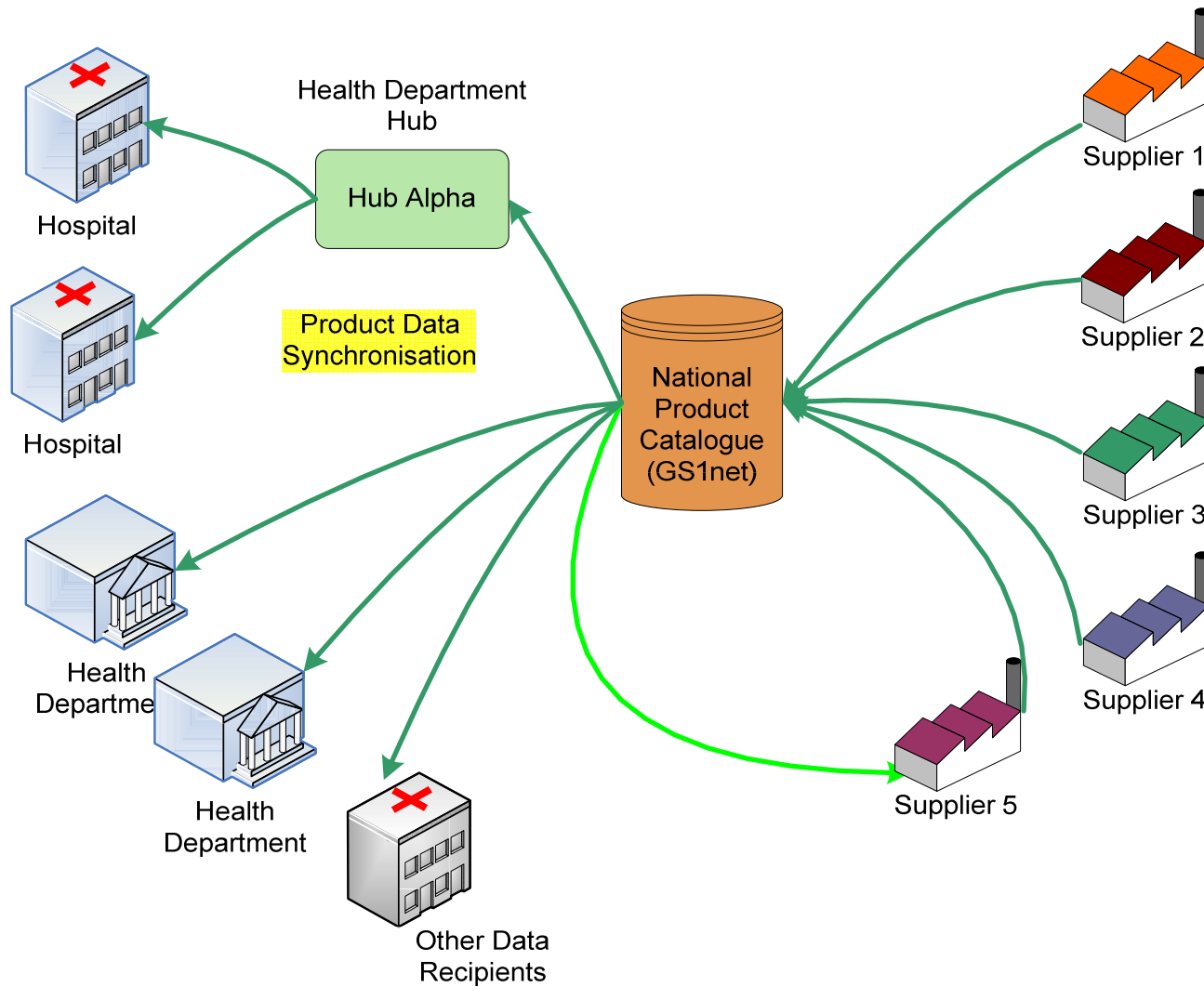
- Develop better ways of electronically collecting and securely exchanging health information, and
- Facilitate e-health systems that unlock quality, safety and efficiency benefits



- **Right Patient:** Individual health Identifier (IHI)
- **Right Provider:** Health Provider Identifier (HPI-I and HPI-O)
- **Right Information:** Clinical Models and Terminologies (SNOMED CT)
  - International Health Terminology Standards Development Organisation (IHTSDO)
  - Australian Medicines Terminology
- **Right Product: National Product Catalogue (NPC) and National eProcurement solution**
- **Consistent Messaging protocols and processes**
  - HL7 and IT-14 (ISO standards)
- **Sent Securely:** Core Connectivity / National Authentication Service for health (NASH) / Service Instance Locator (SIL)

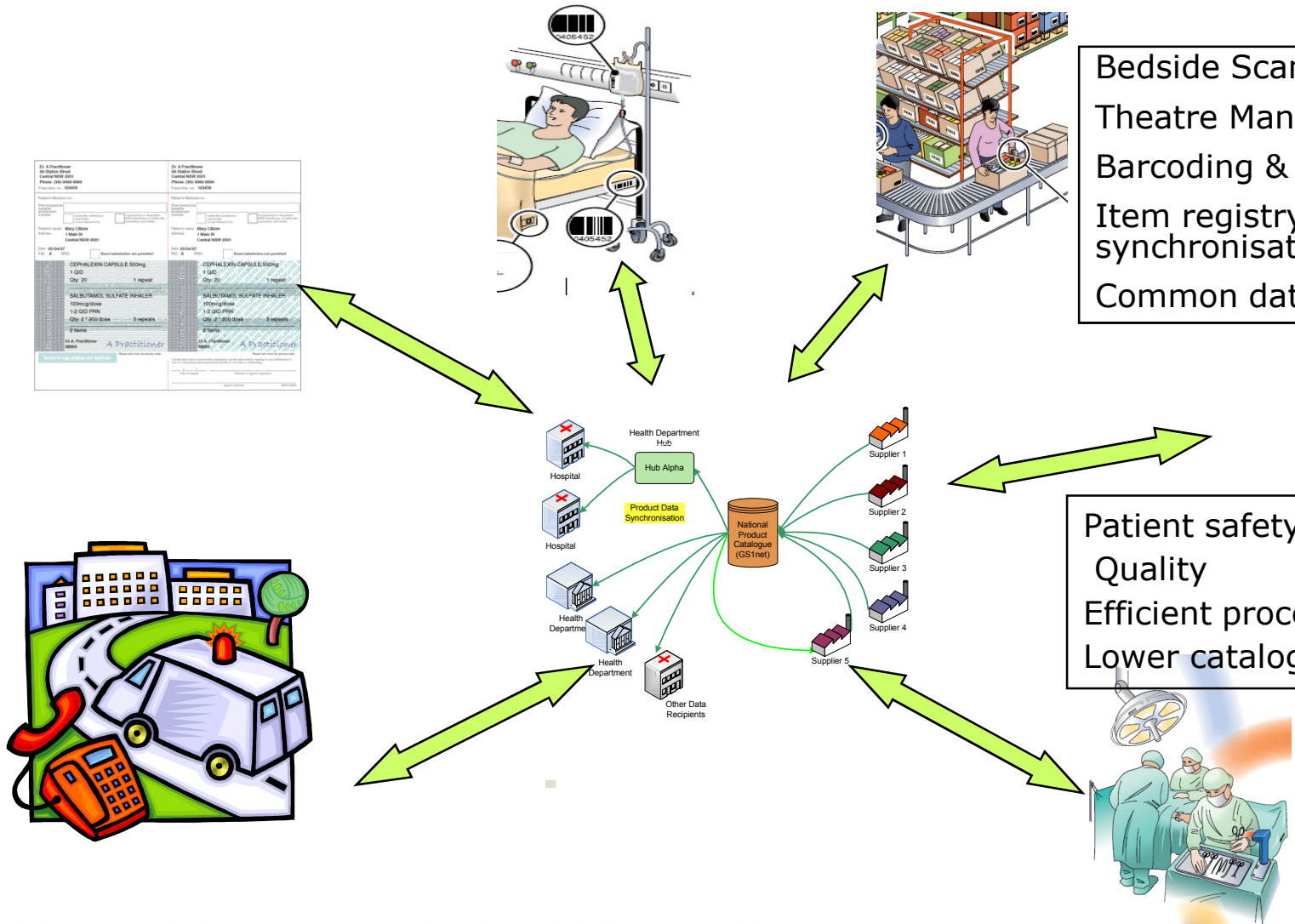






Bedside Scanning /  
Theatre Management  
Barcoding & Data Capture  
Item registry and  
synchronisations  
Common data standards

Patient safety /  
Quality  
Efficient process  
Lower catalogue maintenance



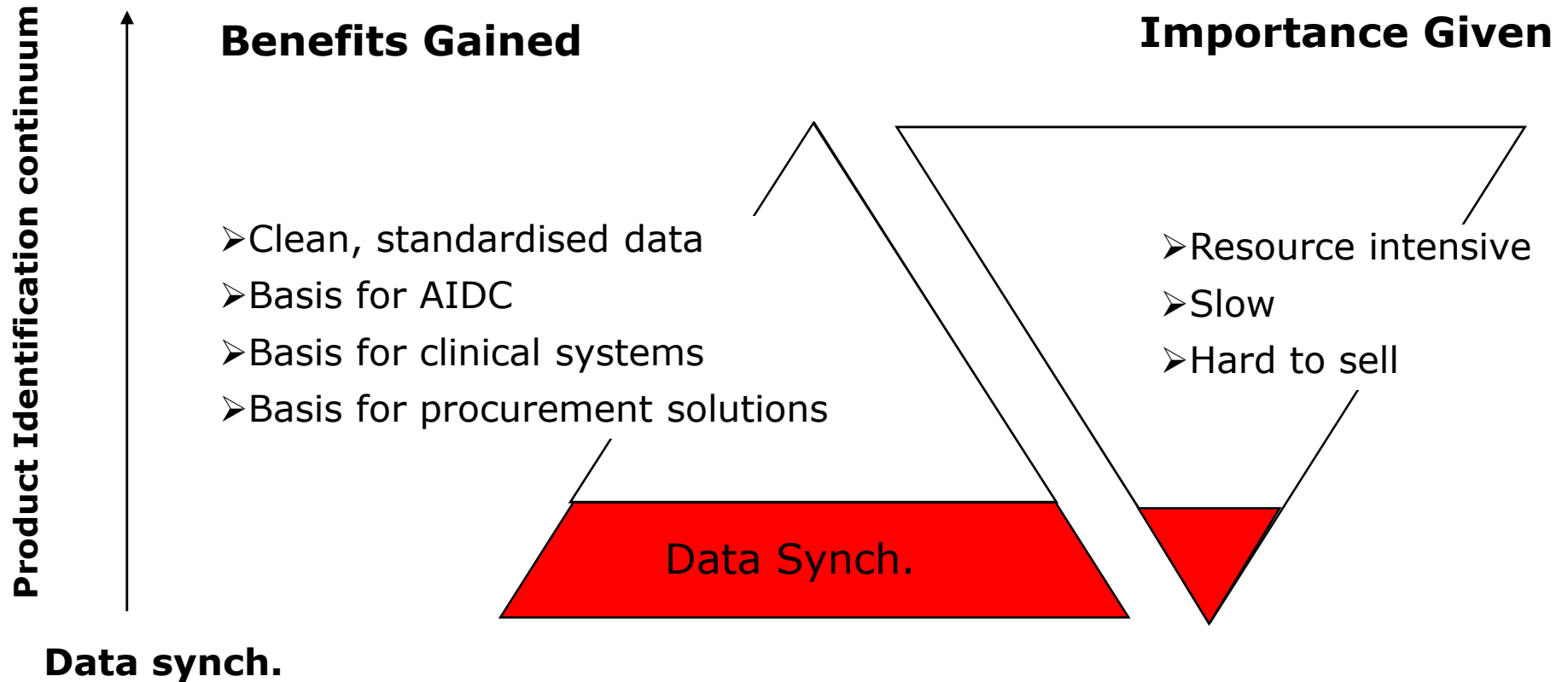
<p>Dr. A. Prashant 10, 11th Street Cantonment, Mysore Phone: 0824 222 2222</p> <p>Dr. A. Prashant 10, 11th Street Cantonment, Mysore Phone: 0824 222 2222</p>	<p>Dr. A. Prashant 10, 11th Street Cantonment, Mysore Phone: 0824 222 2222</p> <p>Dr. A. Prashant 10, 11th Street Cantonment, Mysore Phone: 0824 222 2222</p>
<p>CEPHALEXIN CAPSULE 500mg 1 QID Qty: 20 1 request</p> <p>SALBUTAMOL SULFATE INHALER 100mg/200mcg 1 QD PRN Qty: 2 / 200-dose 5 requests 2 items</p>	<p>CEPHALEXIN CAPSULE 500mg 1 QID Qty: 20 1 request</p> <p>SALBUTAMOL SULFATE INHALER 100mg/200mcg 1 QD PRN Qty: 2 / 200-dose 8 requests 2 items</p>



- One supplier –
  - 47% of all pricing errors in purchase orders result from public hospital data errors at a cost of \$40K p.a.
- A typical tender submission requires more than 50 fields per item -
  - Up to 60 days preparation. Inconsistency in data formats used in tender responses were found to have caused delays to tender evaluation timing by approximately 4 weeks, whilst the tender responses were returned to their original (and requested) format.
- One health jurisdiction has estimated that the cost of cataloguing a new item in a hospital system –
  - \$47 at an hour per record =>10,000 items (a standard health catalogue) = cost \$470,000 and take over 10,000 hours of effort (1 person full time for 5 years), excluding data maintenance time.
- Australian estimates indicate that nationally in the areas of outpatient and community dispensing –
  - 1/100 prescriptions are dispensed incorrectly, equating to 1-2 million events per annum; 36% lead to incorrect medication being dispensed, 35% the correct medication at an incorrect strength and 21% the incorrect dose form.



**Bedside scanning**



- Data Synchronisation is core to improvements in eHealth.
- Data Synchronisation is often difficult to get going.
- Lack of Data Synchronisation leads to unnecessary replication of effort and errors leading to quality and cost issues in healthcare.
- Data Synchronisation forms a solid base from which technologies can derive significant benefits.



# Questions

