

Inquiry into the Role and Potential

of the

National Broadband Network

Submission by
the Consumers e-Health Alliance (CeHA)

to the

House of Representatives
Standing Committee on Infrastructure and
Communications

In Respect to e-Health, Education and the N.B.N

26 April 2011

Further submission to that of 11 March 2011

CeHA is a collective of consumer oriented organisations and people who have displayed active positive interest in the e-Health / Tele-Health program. Our initial activities have been highlighted the major blockages to effective implementation i.e. Ownership, Governance, Leadership and the community wide 4C's: "Communication - Co-operation - Collaboration - Co-ordination".

CeHA seeks agreed standards at all levels and for all affected community sectors to be appropriately represented at the same table at the same time. CeHA provides the avenue for the tabling of ideas, concerns, needs, information on eHealth in which development we have a common interest and which directly affects the individual lifestyles of every citizen including their individual health needs at all times.

Our earlier submissions, including that from the Leukaemia Foundation express the tenor of the concepts that are motivating CeHA.

Attached are presentations by CeHA Representatives at the recent NeHTA / DOHA organised "Vision for E-Health" 4 cornered round table held in Sydney - 30 March 2011. A full record of proceeding has been made available by NeHTA on "Refer Liz Jones emails".

It is now DOHA practice to appropriately link Tele-Health with E-Health.

This is particularly so as Australia first formally founded an eHealth policy with the initial parliamentary enquiry "Health On Line an enquiry into Health Information Management and TeleMedicine" which reported in October 1997.

There is much to be learnt from that report and the analysis of its recommendations.

There is also much to be learnt from the failure to implement key recommendations on governance and standards and surrendering of the then leading position which Australia had in this important field.

We now have another opportunity.

Let us get the E-Health / Tele-Health implementation process right this time.

Key message which was accepted by the Consumer Reference Forums:-

"KEEP IT SIMPLE".

We also attach the CeHA paper. "PCEHR - Consumer Aspirations and Issues" Authored by Eric Browne and referred to by Anna Williamson during her presentation in Brisbane on 18 April 2011. We are pleased to accede to the Committee's request for tabling a copy thereof.

This comprehensive summary was presented to NeHTA during the recent series of consumer forums but whilst it is posted on their in house website "eHealth Collaborative". It has not as yet been widely distributed or discussed.

The other principal issues which CeHA recommend as requiring priority attention are:-

STANDARDS

This vital issue has been variously referred to throughout the enquiry and in our formal input over time. It is encapsulated within our public summary: -

Consumers and service providers note there are many suppliers of eHealth implementation technology. They can be both competitive and complementary to each other. All naturally think they have the best idea. There is probably no one best idea within this very complex environment. This situation is unlikely to be ever resolved except within a viable market. There cannot be such a market until acceptable standards are in use across the total community which will enable efficient interconnectivity and interoperability.

PCEHR - THE IMPORTANCE OF EDUCATION AND TRAINING

Whilst understanding that PCEHR will not be introduced on its scheduled launch date 1 July 2012 as a big bang nation wide event, its progressive release will place tremendous pressure on the health service providers.

NeHTA has announced that the initial services to changeover from manual operation will be:-

- Referrals
- Medication management / prescriptions
- Test reports eg pathology, X Rays
- Discharge reports
- GP health summaries

This will affect a very considerable percentage of the workforce that in total comprises over 850,000 operators employed in approx 80,000 establishments serving 23 million prospective customers.

The National eHealth Network is in the business of providing the infrastructure to enable a vast quantity of disparate type documents to be interchanged and recorded. At least 80% of these are estimated to occur in the private sector, to which very little pre-planning has yet occurred, let alone been finalised, or fully presented to the affected parties.

When that process has been completed in accordance with the "Concept of Operations" (Con-Opts) document, released by Minister Roxon on 12 April 2011 and timetabled for completion of public discussion on 31 May 2011 and **implementation** discussions made by 30 June 2011. A program for education and training suited to the coverage targeted for 1 July 2012 will be required to encompass the affected workforce and consumers. We are awaiting the details. The need for a team effort is apparent.

We understand that the above is not relevant to the NBN system or its prospects in the short term but many of the needs over the longer term are obviously recognised within the submissions to this enquiry.

It seems to us that the principles outlined in our advocacy re the national eHealth infrastructure network will have similar application to the NBN.

We offer these views arising out of the request made to us at the earlier hearing in Brisbane via Anna Williamson of the Leukaemia Foundation in relation to their association with CeHA.

We suggest that in relation to the vital issues of governance, program ownership, responsibility and management we have had the cart before the horse right from the beginning in spite of the very clear advice to the contrary.

We have consistently drawn attention to this historical evidence.

Pertinent references are made throughout the range of submissions to the Committee. In particular we noted the points made by Newcastle University "NBN is not an end in itself" and "NBN success will be measured on how all life aspects are transformed on a national basis" and similarly to quote the Tele-Health Society "the success of NBN will require more than just building a network".

We suggest the issue still needing to be seriously addressed:

HOW TO AND BY WHOM?

In part we suggest this is exemplified by the type of partnership with St Vincent's Hospitals and Mater Health illustrated by University of Wollongong and similarly by others.

It is also quite clearly stated by NSW Health in their closing comments within their submission.

(<http://www.aph.gov.au/house/committee/ic/nbn/subs/Sub117.pdf>)

We trust this submission will be helpful to the Committee.

Peter Brown - Convenor

CeHA - Consumers e-Health Alliance