

Technology for social justice

Inforchange Australia creates social equality and opportunity by empowering people through access to information technology and enabling the exchange of information and ideas.



HIC 2009

Implementing eReferral and Service Coordination in the Health and Community Sector – from the bottom up

Purpose of the presentation

Showcase the use of eReferral to facilitate service coordination in Victoria

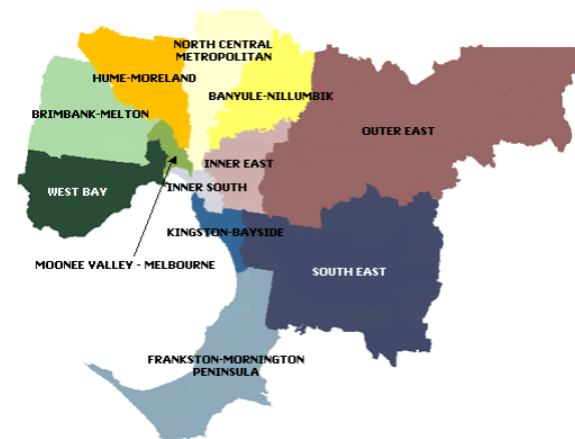
To enable a collaborative approach to service provision across the region that will simplify entry and access to, and allocation of services for clients, carers and families

Implementing eReferral

Background

Project objectives

- To develop a web based application to assist in the planning and co-ordination of care
- Referral of clients in need of community based health services.
- To meet the needs of agencies providing primary care and community support services including:
 - Public organisations
 - Private organisations
 - Not-for-profit agencies



Initial catchment

- Outer East Primary Care – OEHCSA
- Inner Eastern Primary Care - IEPCP

Implementing eReferral

Background

Project Approach

- Collaborative effort between Infoxchange Australia, Primary Care Partnerships and Department of Human Services.
- Development of Service-to-Service (S2S) eReferral web application and platform
- Leveraged Infoxchange Service Seeker directory
- Active engagement model with primary care providers

Implementing eReferral

Who was involved initially...

- HACC Service Providers - Councils
- Community Health
- Hospitals –ED, SW
- Aged Care Service Providers (ACAS)
- Case Management Service Providers
- Commonwealth Carelink Centers

Implementing eReferral

Implementation in each network

- Information Session – Managers & Staff
- Meetings to discuss who should be involved
- Surveys to map referral volumes and pathways
- Check Agency & Service Readiness
- Updating information on Service Seeker directory
- Discuss referral protocols & intake processes
- Address privacy and security concerns
- Training – user and resource
- Go live
- On going support



S2S service coordination at work in Victoria today

- 12 Primary Care Partnerships
- 4,200 practitioners in 270 agencies, 975 services
- 200,000 referrals to date
- Integration with GPs using HL7 (via Argus)
- Integration with RDNS (Camillus)
- Fax and PKI email gateway for other providers

Service Coordination:

- 9.7 Average views per referral
- 3.5 Average status changes per referral
(Acknowledge -> Action Initiated -> Service Provision -> Closed)

Who is using S2S eReferral today?

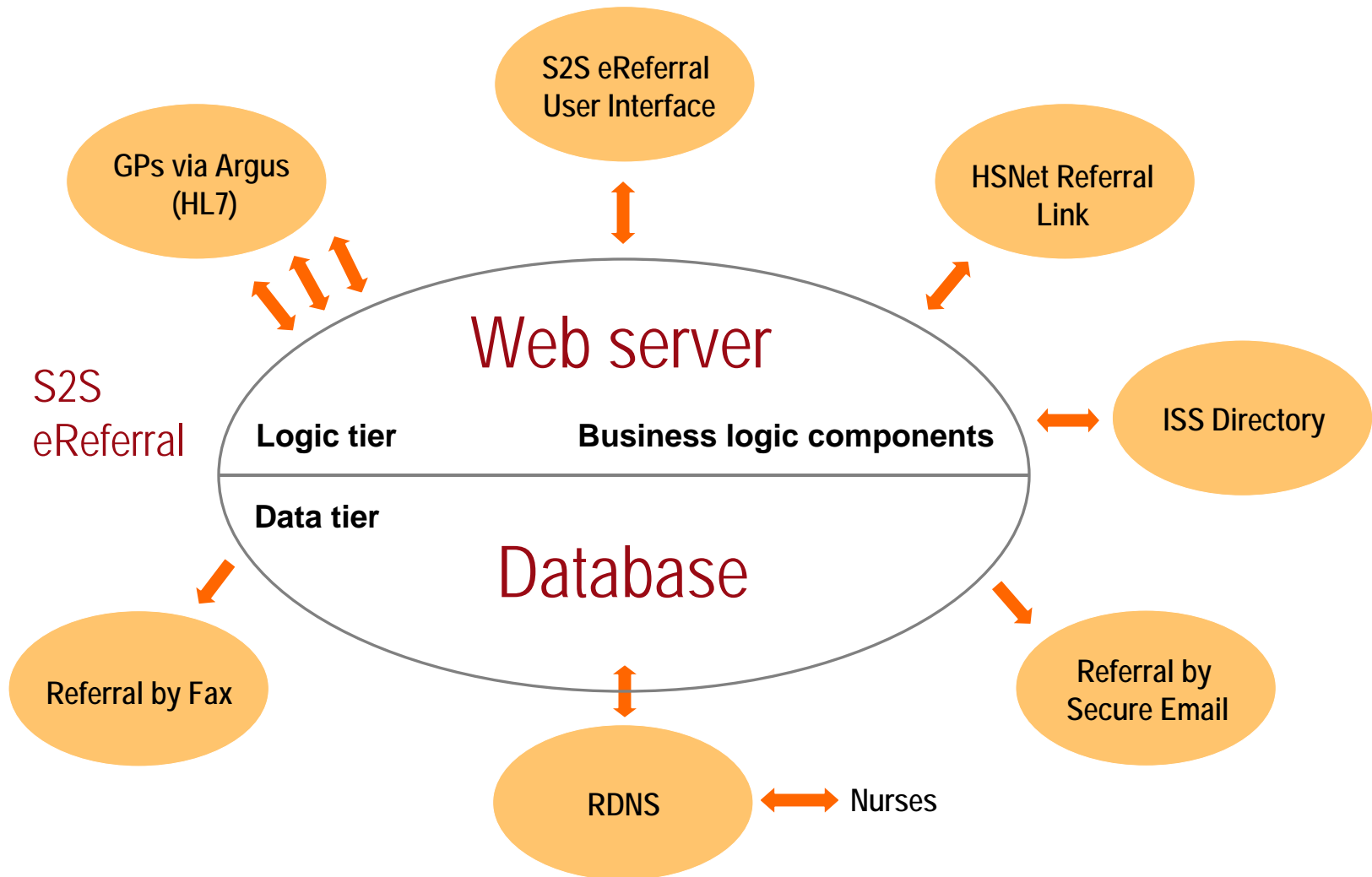
- HACC Service Providers
- Community Health
- Councils
- Hospitals – Discharge, ED, SW, Wards
- Disability Services
- Aged Care Service Providers
- Palliative Care
- Drug & Alcohol Services
- Counselling
- Youth Services
- Accommodation Providers
- Case Management Service Providers
- Commonwealth Carelink Centers

What is S2S eReferral?

A secure web based application enabling health and welfare agencies to efficiently manage client information and referrals

- Security and privacy (SSL 128 Bit)
- Central storing repository
- Supports Privacy and Health information legislation
- Supports service coordination
- Use of standard inter-agency referral forms
- FAX and PKI gateways
- Robust reporting functionality
- System preferences and protocols
- Governance and operations structures

S2S Architecture



S2S Workflow.....

Secure Login

- Client consent to search or add
- Input Consumer Information

Initial Needs Identification

- Complete online SCTT or Attach information from CMS

Referral

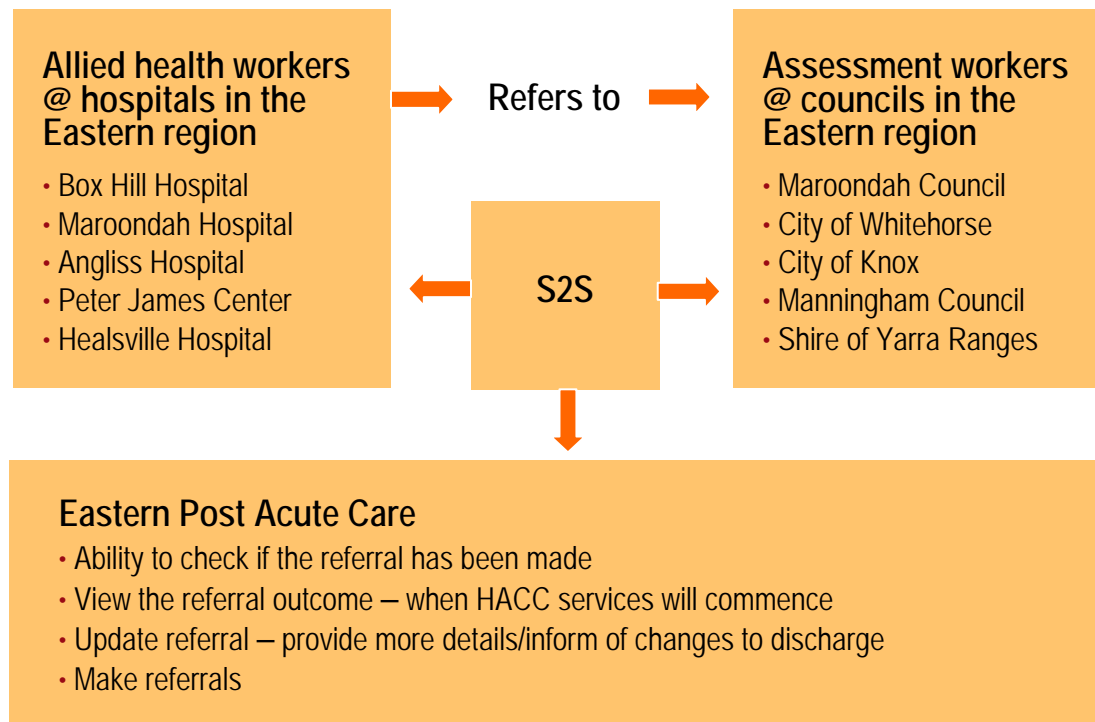
- Select services to send to
- Complete cover sheet
- Consent and send

Care Coordination

- Referral feedback and communication

Acknowledgement → Assessment → Service provision → Close

Service coordination at work....



Benefits

- Secure referral via web
- Timely feedback
- Provide referral outcomes
- Central storage – able to view at anytime
- Client does not have to repeat story
- Avoid duplication
- Able to track client within service system
- Foster trust & cooperation in the service sector
- Enhance communication
- Time & cost savings

With eReferral I can be confident the referral will be received and be secure

Annabelle Bishop,
Occupational
Therapy
Coordinator at
Colac Area Health

Referrals by eReferral do not go astray and the forms are easy to follow

Janet Trupp,
Community
Programs (Aged &
Disability) at
Banyule City
Council

It is a virtually foolproof method of ensuring referrals end up in the appropriate hands very quickly

Ann-Marie Deeker,
Emergency Care
Co-ordinator at Box
Hill Hospital

Challenges

Who we are engaging

- Variety of service providers ranging in size from small one/two person services to very large agencies
- A mix of community-based, volunteer, private, government and semi - government agencies
- Expanding waiting lists
- Low staff to client ratios
- Providers dealing with an increasing number of clients with complex or multiple needs

Challenges

- Establishment and expansion of the network
- Commitment from the right power brokers
- Adapting and customising to existing work place practices
- The right mix of Referral Generators and Referral Receivers
- Change management
 - improve IT skills
 - likelihood of having to duplicate information
- Privacy concerns
- Sustainability model
- IT Infrastructure and support
- Inter agency trust

Where to from here

- Expansion in Victoria to other service sectors
- Extending coverage across Australia
 - NSW respite coordination – live in FNC, MNC and Southern regions
 - NSW HACC trials – live in Grafton Clarence
 - More to come
- Further integration with other eReferral gateways and client management systems
- Engagement with NEHTA on national eReferral and directory standards

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Find out more

Amodha Ratnayeke

Telephone (03)9418 7417

Mobile 0401 009 091

Email: amodha@inforxchange.net.au

www.s2s.org.au