Telehealth helping to fight stroke

When Col Carter suddenly became unable to move his left arm and leg and could not see out of his left eye or talk, his wife Sharon feared the worst and called an ambulance to their home in the NSW mid north coast township of Kempsey.

“The paramedics told me Col was having a stroke and took him straight to Port Macquarie Hospital’s Emergency Department,” said Sharon. “It was an incredibly worrying and stressful time.”

A new project called Telestroke, led by eHealth NSW and the Agency for Clinical Innovation (ACI), is improving outcomes for patients like 68-year-old Col, who has recovered as well as possible from a stroke which could have caused far more severe health problems.

Upon assessing Col at Port Macquarie Hospital around midnight, Dr Daniel Smith knew they had to act fast. He arranged for Col to be ‘seen’ by Dr Bill O’Brien, a neurologist based 350km away at Gosford Hospital on the Central Coast, using NSW Health’s universal communications platform Skype for Business.

Upon virtually assessing Col’s case and reviewing his brain scans, Dr O’Brien immediately recognised the severity of Col’s...
Chief Executive’s message

It is always encouraging for me to see new signs of the digital health agenda gaining momentum and support in NSW and across the nation. In his keynote address to the Australian Healthcare Week conference, recently held in Sydney, NSW Health Minister Brad Hazzard called technology “a golden path forward to be able to make a difference for our patients”. That gained traction on social media as news agencies reported it.

At the same conference, I co-presented with Sydney Local Health District Chief Executive, Dr Teresa Anderson, on the power of partnerships when it comes to implementing digital health capabilities across NSW Health. Extending across traditional organisational and jurisdictional boundaries, these partnerships are creating a comprehensive digital health environment and making real inroads in the digital transformation of our health system. Examples of effective partnerships, such as the Telestroke project, the Glucose Management View in EMR and Wireless Core technology, feature strongly in this issue of eHealth News.

The partnering theme was echoed by a number of colleagues from across the country who presented their progress with implementing telehealth solutions to improve patient outcomes. Following her recent address to the Australian Telehealth conference, the Secretary of NSW Health, Ms Elizabeth Koff, reflected on “an inspiring morning talking digital health and its revolutionary potential to deliver better value care for patients”.

Another encouraging sign came from the Federal Government in the form of a $55-million investment through its Cooperative Research Centre (CRC) program to further develop Australia’s digital health technology and services industry. NSW Health is a key partner organisation in this CRC, which provides a further boost to the digital health agenda in Australia and will help to place us as an international leader in a field that’s transforming the patient experience and outcomes.

Our mission – to forge ahead with the digital transformation of Australia’s largest public health system – has never been more important. Keep up the good work.

Dr Zoran Bolevich
Chief Executive
Chief Information Officer
eHealth NSW

Get social!

Want to keep up with the latest at eHealth NSW? Get social and follow us on Twitter and LinkedIn, where we’re posting about key announcements, go-lives, initiatives and interesting news.

Go ahead and like and share our posts to get the good eHealth NSW word out there!

eHealth NSW LinkedIn Page: https://www.linkedin.com/company/ehealth-nsw/
We have 3,365 followers on the eHealth NSW LinkedIn Page. The top five country of followers is Australia, India, United Kingdom, United States and New Zealand.
Over 530 staff have listed eHealth NSW as their employer in LinkedIn – please join us!

eHealth NSW Twitter: https://twitter.com/eHealthNSW
We have over 1,050 Twitter followers. A popular Tweet of late was one quoting Zoran saying the success of the $200m @DigiHealthCRC bid is “a real boost to the #digitalhealth agenda in Australia and will help place us as an international leader in a field that’s transforming the #patient experience”.

Improving digital diabetes management

In partnership with the Agency for Clinical Innovation (ACI) and Local Health Districts, eHealth NSW has made two significant steps towards supporting better, safer care for those managing diabetes with the approval of new electronic medical record (eMR) functionality for monitoring and reviewing a patient’s treatment, and the commencement of its roll-out.

One in five acute-care hospital admissions require diabetes management, while at the same time insulin represents one of the top causes of medication errors and adverse events.

In early March, the ACI announced approval and support for the Insulin Design Focus Group’s new Glucose Management View solution to be made available within the eMR.

The ACI’s Endocrine Network expects that safer prescribing and administration of insulin will occur as a result of having this new medication management tool available within the eMR.

In another milestone for March, the Glucose Management View successfully went live in South Eastern Sydney Local Health District.

The eMR Connect team is now planning the roll-out of the Glucose Management View, which was originally developed in partnership with Sydney Local Health District, across other LHDs and will apply the ACI Endocrine Network’s strong recommendations that:

- All sites currently live with eMeds should prioritise the implementation of Glucose Management View as soon as practicable
- All sites yet to go live with eMeds should prioritise the addition of Glucose Management View to their scope.

An informative video about the Glucose Management View can be viewed here.

Talking patient-centred initiatives

eHealth NSW staff recently showcased the organisation’s key patient-centred initiatives and programs at the Patient Experience Symposium to over 580 delegates including numerous consumer representatives.

The booth’s theme was Partnering with Industry and Health Agencies to Deliver Patient-Centred Care.

Promoted were eHealth NSW’s achievements in EMR Connect, HosPark App, Patient Wi-Fi, Telehealth and HealtheNet, and the new engagement site for the National Children’s Digital Health Collaborative which NSW Health is leading on behalf of the Australian Digital Health Agency – www.childrenscollaborative.com.au

The event also provided an excellent opportunity to hear the views and experiences of consumer representatives on the digital transformation of the NSW public health system.
Continued from page 1

condition and referred his case to Dr Ferdinand Miteff at Newcastle’s John Hunter Hospital. The team organised for Col to be airlifted to John Hunter Hospital at 3am, allowing Dr Miteff to perform critical clot retrieval surgery without delay.

“Col went from having no movement in his left arm or left leg and no vision in his left eye and being unable to speak, to be able to move and see again and in recovery the next morning at 7am,” said his wife Sharon. “It was amazing.”

Col benefited from an exciting and life-saving new telehealth project that harnesses technology and breaks down barriers to time-critical treatments for stroke sufferers in regional NSW.

The Telestroke project is improving outcomes for patients who present to Port Macquarie and Coffs Harbour Hospitals with stroke symptoms.

With plans for it to be extended to hospitals in Hunter New England and the Central Coast ahead of potential statewide implementation, the Telestroke project is enabling patients to have a brain scan onsite, which is then assessed in real time by a remote neurologist.

The specialist provides a diagnosis and treatment can begin immediately. Previously patients may have needed to be transferred to city hospitals, which delayed their treatment for hours.

Up to 1.9 million brain cells die each minute following a stroke, making treatment time-critical and crucial to a patient’s chances of recovery.

Almost 19,000 strokes will take place in NSW in 2018 alone and many of those will occur in regional areas which have a higher incidence of stroke but fewer specialist physicians, said ACI Stroke Network Manager Kate Jackson.

“The Telestroke project allows us to bridge distances and deliver world-class stroke assessment, treatment and management, irrespective of location,” said Ms Jackson.

“Regional Australians are 19 per cent more likely to suffer a stroke than their metropolitan counterparts. All Australians should have access to best-practice treatment and this is a major step in the right direction.”

Stroke Foundation NSW State Manager Teresa Howarth said while the results of this project were preliminary, they demonstrated the power of telehealth across NSW and Australia.

“Stroke is one of Australia’s biggest killers and a leading cause of disability, but it does not need to be this way,” said Ms Howarth.

“Stroke can be treated. We must ensure all Australians – no matter where they live – have access to the stroke treatment we know saves lives and reduces disability.

“The Telestroke project is already making a difference to stroke services on NSW’s Mid North Coast and a similar program has had some fantastic outcomes in Victoria.”

Ms Howarth said being cared for by a specialised stroke team is one of the most effective ways of treating a person after a stroke.

“As our population ages and lifestyles become more sedentary, stroke’s burden on the community and health system is increasing,” she said.

“We must continue to make the most of the technology available to us to save lives and enhance recovery.”

---

eHealth NSW Privacy Contact Officer appointed

Lois Villarosa has been appointed eHealth NSW’s Privacy Contact Officer, responsible for managing any eHealth-related privacy issues and complaints, and coordinating and overseeing privacy compliance activities.

Ms Villarosa works in the Policy and Briefings team within the Investment, Strategy and Architecture directorate and holds a Bachelors of Commerce (Economics), a Bachelors of Laws, and a Masters of Laws (Commercial, Corporate and Taxation Law). She is currently working towards completing a Masters of Economics.
Enhanced eMR performance for two more LHDs

Tens of thousands of clinicians working at hospitals in Sydney and South Western Sydney Local Health Districts are benefiting from faster and more reliable performance of the electronic medical record (eMR), thanks to the recent successful upgrade and migration of their eMR domain to the Government Data Centre (GovDC).

The eMR system shared by these LHDs is large and complex, with the capacity to support more than 7,000 users concurrently. Each day, the LHDs see more than 60,000 user logins, 200,000 charts opened and 13,000 medications administered.

And now, following the successful migration of the Cerner eMR domain for those LHDs to GovDC, response times have improved by 150 per cent and 97.9 per cent of all eMR transactions take less than two seconds.

“The transition was a significant undertaking and the collaboration between our Districts, eHealth NSW and Cerner is to be congratulated,” Dr Teresa Anderson and Amanda Larkin, Chief Executives of Sydney and South Western Sydney LHDs respectively, said in a memo.

Hailing the transition to GovDC as an “important part of the digital transformation of our health services”, Dr Anderson and Ms Larkin said that for a system so complex, they were thrilled to see such an improvement in the reliability of essential clinical functions while meeting the LHDs’ future growth requirements.

Led by Clara Chan, eHealth NSW’s Clinical Applications Reliability Improvement (CARI) Program oversaw the migration with support from colleagues within Service Delivery.

Driving disability employment

HealthShare NSW, eHealth NSW and JobAccess recently co-hosted an interactive session in support of taking action to create a diverse and inclusive workplace.

The event included engaging presentations from Don Elgin, triple Paralympic medallist and athlete manager and Thérèse Campbell, Group Manager, Government & Stakeholder Relations, Work Health Group.

Although there are over two million Australians of working age with disability, just over one million are employed and another 114,900 are looking for work.

The event highlighted best practice examples in disability employment, the benefits of an inclusive workplace and the support offered to get us there.
Wireless Core technology roll-out imminent

Statewide ‘Wireless Core’ technology is now live across eHealth NSW, HealthShare NSW and the Pillars, providing secure and consistent Wi-Fi roaming capabilities for staff using laptops and mobile devices at these NSW Health Agencies.

This important foundational infrastructure capability will now be progressively deployed to all Local Health Districts and Specialty Health Networks across the state.

Once fully deployed it means all 135,000 NSW Health staff will be able to connect seamlessly to Wi-Fi, no matter where they are working.

In a series of successful go-lives organised by the Conference, Collaboration and Wireless (CCW) team with assistance from Service Delivery teams in March, the project will now work with LHDs and SHNs to determine each location’s specific needs.

The technology will support deployment of statewide wireless applications such as My Food Choice, as well as enabling technology improvement opportunities for staff working in entities which regularly travel across LHD boundaries, such as NSW Ambulance.

“This platform is a game changer in supporting the delivery of modern healthcare,” said Jason Matthews, Program Manager for eHealth NSW’s CCW program.

“The Statewide Wireless Core platform leverages the investments made by eHealth NSW in the Health Wide Area Network (HWAN) and LHD Campus Network and Wi-Fi deployments and upgrades. The platform will enable staff to securely and seamlessly access the services and systems they need to complete their day-to-day tasks, even when they roam across LHDs and between different NSW Health facilities.

“Moving forward, the platform also has the capability to support the secure connectivity of all sorts of network-enabled devices that exist in hospitals today, as well as those that will exist in the future.”

Staff to participate in innovation projects

The Innovation team at eHealth NSW is preparing to explore ways to enable eHealth NSW staff to participate in short-term initiatives which tackle the challenges faced by NSW Health.

Now part of the Investment, Strategy & Architecture (ISA) directorate, the Innovation team has been working with industry partners to collate creative proposals to the challenges faced by those working for NSW Health and the patients for whom they care.

The response has been excellent, with 147 submissions received from industry partners and the research community to address nine of the challenges facing the NSW public health system.

In the next phase, the Innovation team will identify the needs of the Pillars, Local Health Districts and Speciality Health Networks and match them with the proposals to conduct proof of concept projects.

Employee engagement is a priority and the Innovation team is committed to working with all levels of the organisation to empower staff to participate in these exercises. Stay tuned.
Sutherland Hospital is the latest to welcome eHealth NSW’s Electronic Record for Intensive Care (eRIC), giving clinicians better access to valuable information on patients being treated in its Intensive Care Unit (ICU).

eRIC is now live in 169 ICU beds throughout nine hospitals across NSW, seven of which transitioned from paper-based charting to electronic, including Sutherland in South Eastern Sydney Local Health District (LHD).

South Eastern Sydney LHD joins Mid North Coast and Northern NSW LHDs in having introduced eRIC across all of its Intensive Care Units (ICUs).

Replacing paper forms, eRIC is an electronic Clinical Information System that integrates ICU patient data to improve patient safety and provide better clinical decision-making.

Dr Grant Eruini-Bennett, ICU Director at Sutherland Hospital, said eRIC is providing more time for clinicians to care for a patient.

“Less time will be spent recording, allowing clinicians to spend more time on direct patient care by the bedside,” Dr Eruini-Bennett said. “We now have improved access to patient medical records including past admissions.

“Through the electronic access of this information, it allows for better data collection and benchmarking.”

Phil Marshall, eRIC Clinical Change Manager at Sutherland Hospital, welcomed the increased safety and efficiencies eRIC has delivered.

“Paper note folders falling apart and getting ripped and lost is a thing of the past,” said Mr Marshall.

“With eRIC, we are able to access patient information from anywhere in the unit and medical officers have better access to prescribing information, rather than needing to locate the one paper National Inpatient Medical Chart (NIMC).”

Katie Bishop, Acting CIS Manager at Prince of Wales Hospital (POWH) and Sutherland Hospital ICUs, who has participated in three eRIC go-lives, said eRIC promotes better clinical care.

“The clinicians are now able to get data that automatically populates,” Ms Bishop said. “With eRIC, ICU clinicians have full visibility of the patient data electronically, which is stored in one location.”

Tracey Millie, Nurse Unit Manager at Sutherland Hospital ICU, said eRIC is improving processes and practices within the ICU.

“eRIC provides easy access to a multitude of information including pathology and imaging, as well as policies and patient assessment charts,” said Ms Millie.

The next go-live of eRIC will take place at John Hunter Hospital and Wollongong Hospital in mid-June. A further eight go-lives are scheduled throughout 2018 and ongoing deployment discussions continue with other LHDs for potential go-lives in the latter part of the year.
More than 150 representatives from Health Agencies across the state learned about developments with HealthRoster and heard from other LHDs about their experience of its new and improved functionality at the 2018 HealthRoster open day held in Sydney on 1 March.

The rostering program sponsor, Robyn Burley, NSW Health’s Executive Director of Workforce Planning and Development, spoke of how rostering is a strategic priority for NSW Health and the imminent launch of a Rostering Strategy for NSW Health.

Brian Shimadry, Director, Workforce Planning and Performance at the Ministry, unveiled the Rostering Capability Framework, an approach to improve rostering practices and processes across the health network.

Attendees were also updated on the progress of HealthRoster implementation and the roadmap for development over the next 12 months. Other presentations focused on Casual Staff management, Pay Period Confirmation, how to raise enhancement requests and on Rostering Improvement activities.

Mid-morning, attendees were split into four groups for targeted presentations focusing on workforce management, nurse rostering practices, medical rostering and rostering administration.

Feedback highlighted how much attendees valued the contributions from LHDs and Health Agency speakers, who presented on a variety of topics.

“The HealthRoster open day is an opportunity for us to meet with our stakeholders face-to-face and get to know each other better. It also gives us a real insight into the challenges and expectations people have around rostering," said HealthRoster Program Director, Gary Rubie.

“I would particularly thank those LHDs and Health Agencies that presented on the day, as attendee feedback told us how much our customers really appreciate hearing from their peers.”

Presentations from the day and further information can be viewed on the eHealth NSW intranet HealthRoster site.
eHealth NSW and HealthShare NSW celebrated International Women’s Day at a thought-provoking and conversation-starting forum attended by more than 140 staff members in Chatswood.

The 8 March event featured a presentation by Dr Margaret Byrne, who examined the latest statistics on gender equality in the workplace and some of the barriers women face.

“Data shows us that in most developed countries, women have either reached or exceeded parity with men around education level yet the gap around pay and seniority levels is growing,” said Dr Byrne, an academic with expertise in executive development and change management.

“In Australia, 50 per cent of the workforce is female but there is a gender pay gap of 17.3 per cent. This amounts to about $1M over a woman’s career.”

At eHealth NSW, which has a 39 per cent female workforce, 47 per cent of its managers are female but there is only 12 per cent female representation at a senior (tier 1-3) level.

“We have a very strong commitment in our Business Plan for 2017-21 to gender equality in eHealth NSW and in particular to helping our female colleagues rise to more senior leadership roles in our organisation,” eHealth NSW Chief Executive Dr Zoran Bolevich told attendees.

“But what’s stronger than words is action. We are developing a Gender Equality Action Plan which will detail the initiatives we’ll put in place to address the issues and suggestions raised at today’s event and in the workshops we held around this issue last year.”

To combat gender inequality, Dr Byrne stressed the importance of building and sustaining inclusive cultures and looked at what organisations can do to support women’s career progression at all levels, as well as steps women can take to help themselves.

“I encourage all of you to take small, regular, positive actions to make eHealth NSW and HealthShare NSW more inclusive businesses where everyone – whatever their gender or background – feels that they belong and can contribute” she said.

For more information about eHealth NSW’s gender equality work, contact Lisa Prescott in the Culture and Organisational Development team at Lisa.Prescott@health.nsw.gov.au or on 8644 2071.

Dr Margaret Byrne presenting on gender equality

---

**DR BYRNE’S TIPS FOR ENCOURAGING AN INCLUSIVE CULTURE**

---

**Five things women can do for career progression**

- Manage up and across. Learn how to influence.
- Be seen, participate and speak up.
- Develop your executive competence.
- Learn how to design a short, succinct, compelling argument - a ‘pitch’.
- Use the latest research findings to help you set and achieve goals that matter to you.

**Five things men can do**

- Question when you notice a lack of women.
- Use inclusive language, behave inclusively.
- Encourage women colleagues to step up.
- Call out any inappropriate behaviour you witness.
- Ensure women get credit for their contributions.
Central Coast LHD now fully eMeds enabled

Central Coast Local Health District (LHD) reached a significant milestone in April when it became the first to have a district-wide implementation of the electronic medical record (eMR) and electronic medication management (eMeds) systems.

Central Coast LHD took a comprehensive approach from the outset, planning to adopt the eMeds system within the first quarter of 2018.

As part of a collaborative project with Northern Sydney LHD, this undertaking is the first ‘stacked-approach’ to a series of go-lives and, the outcome, the first signal of its success and value.

A stacked approach focuses on designing and building for multiple facilities and then rolling out to all sites back to back.

The completion of the Central Coast LHD component of the plan has effectively provided access to digitally empowered care for all four of its main facilities as well as the satellite renal units.

Long Jetty Hospital was the final site to become eMeds enabled on 18 April, following on from Gosford, Woy Woy and Wyong Hospitals.

The milestone was achieved as a result of a close collaboration with the LHDs’ project teams, facility staff, eMR Connect and Cerner, and underpins the delivery of smarter and safer patient care.

The state-wide roll-out of eHealth NSW’s transformative program continues to intensify, with 16 eMR2 and 17 eMed new sites scheduled to go live over the coming three months.

At present, there are 157 eMR2-enabled sites and 34 with eMeds, many of which are actively working with eHealth NSW’s eMR Connect Program to analyse and report on positive impacts – for patients, clinicians, nursing and pharmacy staff alike.

Concord ICU now on eMeds

Concord Hospital’s Intensive Care Unit has gone live with electronic medication management (eMeds), introducing the system in its 13-bed mixed intensive care and high-dependency unit on a six-month trial basis.

The project includes enhanced clinical pharmacy services, computers beside every patient’s bed and customisation to support the specialised care delivered in the ICU.

It will integrate with the electronic medical record in use across the hospital, which improves the continuity of patient care.

Sydney Local Health District’s Chief Medical Information Officer, Dr Angus Ritchie, said the ICU implementation is an important step in optimising the LHD’s electronic information systems to deliver improved quality and safety of patient care.

The eMeds system is now operational across all inpatient areas at Concord and Royal Prince Alfred Hospitals hospitals, with Sydney Local Health District’s Health Informatics and ICT Services working toward the implementation of eMeds in maternity and at Canterbury and Balmain Hospitals in 2018.
Improving supply chain management

eHealth NSW’s Corporate Analytics team, part of the new Service Delivery directorate, has successfully delivered a new reporting solution, known as Tidy Systems, for HealthShare NSW’s Food Services division.

The solution sources data from 14 instances of CBord, the information management system for Food Services, and integrates to Tidy Systems to provide a highly visual view of key data.

The solution aims to help managers keep track of stock levels and suppliers. It also provides a range of weekly and monthly reports to give sites visibility on how they are performing against a suite of Key Performance Indicators (KPIs).

KPIs include how quickly goods were received, the level of product loss as a percentage of purchases, as well as any stocktake variance and how many manual purchase orders were created.

The dashboard shows sites how they are performing at a glance against these nine KPIs with a rating out of 10 as well as trends by month.

A site comparison report helps managers to understand how their site is performing compared to others of a comparable size. Sites performance can also be viewed against sector, other LHDs and by region depending on user permissions.

A weekly results report provides a more detailed breakdown of the site’s KPI performance across the month. This helps sites to identify any potential issues early so that action can be taken to help put the site back on track to meeting or exceeding its KPIs.

A detailed monthly dollar view is also available which provides breakdowns of discretionary products purchased, product loss values and stock take values for the month. It provides important financial context to overall site performance and the top 10 lists can be used to prioritise improvements.

A supplier KPI summary shows sites if suppliers are meeting expectations in regards to delivery, lead times and short dated instances, and a supply chain costing tool reports actual spend against supplier contracts. A dashboard is also available for planning and forecasting providing a view of purchase volumes against actual volumes over time.

“These reports are helping us to embed new ways of working as part of our Tidy Store Rooms Framework,” said Zdenka Fuller A/Manager, Supply Chain and Product Development, Food Services, HealthShare NSW.

“They are contributing to the ultimate aim of providing patients with choice, a better meal experience, fast and efficient service at lower or the same cost, and ensuring our food service operations are sustainable.”

“The dashboards, KPIs and reporting are integral to how sites plan and forecast what stock they need, help to ensure suppliers are delivering what’s needed, and sites can check they are doing the activities required to order the right things from suppliers at the right time.”

Director Corporate Applications with eHealth NSW’s Service Delivery directorate, Ryan Jehn, said the Corporate Analytics team was to be congratulated on delivering the solution in a six-month timeframe.

“This was a challenging piece of work, drawing data from so many instances of CBord, but the response to what has been delivered has been fantastic and should really help Food Services to achieve real savings and make a difference to the quality of meals for patients,” Mr Jehn said.
eHealth NSW leads major change to drug terminology

eHealth NSW’s Clinical Content team is spearheading a significant change to medicine ingredient names, having identified more than 2,000 product records requiring amendment following a major review of the Hospital Pharmacy Product List (HPPL).

Following extensive testing and stakeholder engagement, amendments to the HPPL – the standardised terminology data set used within the i.Pharmacy application – were enacted in the i.Pharmacy production environment on 12 March.

The changes were necessary after the International Harmonisation of Ingredient Names (IHIN) Reform, released by the Therapeutic Goods Administration in 2015, called for amendments to over 200 active ingredient names used in Australia to align with names used internationally.

This has impacted ingredient names appearing on medicines packaging and documentation such as product information (PI) and consumer medicines information (CMI).

In response, the Clinical Content team, now part of the Service Delivery directorate, worked with NSW Health stakeholders for the past three years to collaboratively plan and implement the required changes within clinical information systems within the four-year transition period ending April 2020.

“This is the single biggest terminology update the team has coordinated and the most significant change to Australian medicines terminology in recent times,” said Monica Middleton, Clinical Content Service Team Lead.

“However, it was necessary to ensure the HPPL dataset was in line with reference sources.”

The team is continuing to update and manage changes at a local level, with a review required by April 2023 to remove the TGA dual labelling, in line with manufacturers’ product packaging updates.

iPM team’s proactive measure to improve clinical data quality

eHealth NSW’s iPM Application Support team reached an exciting milestone in March with its implementation of the Patient Manager Application Rules Validation Engine at Southern NSW and Murrumbidgee Local Health Districts.

This new functionality enables the creation of custom pop-up messages to guide user interactions with the application at the time of data entry. This notifies users when to make corrections to patient details, admission, outpatient appointment and waiting lists, ensuring that patient level and presentation activities entered in iPM are consistent and accurate.

iPM is a source of truth for patient demographic and presentation data, delivered to several downstream clinical and business applications including eMR, Enterprise Patient Registry (ePR), and the Ministry’s EDWARD and Health Information Exchange (HIE).

This initiative will deliver significant improvements to data quality at the point of entry for users, reducing errors and the need for manual data correction.

A collaborative effort between eHealth NSW and LHD application teams, Tanyia John, PAS/ASU Team Leader for Southern NSW and Murrumbidgee LHD Support, was pleased with the smooth implementation, noting the “eHealth NSW iPM Support team provided exceptional support with this implementation and ongoing support.”