

**E Health
Annual Report 2013
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Remote area Aboriginal medical services such as Nganampa Health Council operate in the most challenging e-health environment in Australia. We have limited telecommunication and technical support options, need access to our systems 24 hours a day, share data across multiple locations and deal with highly confidential patient information.

Despite these challenges, the Health Council's e-health systems continue to be robust, and stable. The past year has seen these systems strengthened further. An overriding principle of our e-health developments is that where possible, mission critical systems should be outsourced. Our key e-health resource is the Communicare Clinical Information System (CCIS). The CCIS has been moved to a data centre managed by the company that owns the CCIS. This means one company is responsible for both the hardware and the software, reducing the risk of incompatibilities. This new arrangement has been successful and has reduced the number of problems.

The Health Council has used the CCIS since 2007. Our use of this system has been extremely successful and after six years of operation it is clear that the system has resulted in a number of benefits. The timely and focussed delivery and coordination of quality clinical services, together with program management, development and evaluation would no longer be practicable without the CCIS. Tracking and reporting on activity, outputs and outcomes for government likewise now depend fundamentally on the CCIS. The CCIS has resulted in improved staff satisfaction, timely supervision and support, the ability of key staff to work off site, and better informed and supported continuous quality improvement processes. There is evidence that these systematic improvements are leading to improved health outcomes for our patients.

This year has seen a consolidation of other important e-health developments. Video conferencing units have now been installed at seven locations including our six main clinics. The units are being regularly used and are principally being used for mental health consultations. Despite the limitations with our internet connections, the picture and sound quality is generally sufficient to allow the consultations to occur. We would expect the use of this technology to continue to increase.

The Health Council launched a new intranet site. As with our CCIS, the hosting of the intranet site is outsourced. The site contains a number of new features including a search function, calendars, staff directories and some on-line forms. Most of the new features have been received positively although there is a need for some improvements. We have plans to increase the functionality of this site further.