Primary-Acute Care Interface Data Project
UPDATE
30th Nov 2020

Project Overview

This project aims to better use the rich supply of healthcare data in SA to improve continuity of care; particularly as people transition between care provided in our hospitals and care provided within the community setting (across the primary/acute care interface).

Context

Achieving a coordinated and smooth progression of care in the context of chronic disease, multiple healthcare providers and different care settings is a complex, multifaceted challenge. Vital information and time are lost, and patients' outcomes can be compromised at several points within the system, particularly when they are being referred or admitted into a hospital and upon discharge into the care of their regular doctor. Poor care continuity during such transitions carries a higher risk of preventable adverse events such as increased emergency department visits, hospital readmissions, and even disabilities or death.

Continuity of care has been recognised as a long term and significant health system challenge in South Australia. One critical aspect underpinning continuity of care is the timely provision and effective flow of accurate patient information. This project focusses on this key aspect and will explore how we can build on current digital health initiatives and health service reform to more effectively use data to improve care as people transition between the hospital and community setting (or across the primary/acute care interface).

For more information on the project please read our Background Briefing Paper.

Project Plan

This project is supported by the Australian Government's Medical Research Future Fund (MRFF) as part of the Rapid Applied Research Translation program (MRF9100005). The project will be conducted in a series of phases over the next two years with a required completion date of June 2022.

Phase 1: Establishing the team

The first phase of the project saw the establishment of the Project Steering Committee that will drive the project reporting to the HTSA Board. This committee meets monthly and is comprised of health service decision makers, clinicians, researchers, data experts and community members

Phase 2: Situational analysis

The situational analysis was conducted by HTSA project staff and was primarily informed by a series of interviews with health service decision makers, and primary and acute care clinicians as well as focus

groups with patients and carers. The [Consumer Report](#) is available online, and the full situational analysis will be posted to the [Project Site](#) December 1st.

Phase 3: Solution scoping and selection

The Stakeholder Forum planned for November 30th to discuss these findings and inform the next steps has been cancelled due to COVID-19. Instead this update is being provided to all registered attendees and the Steering Committee is developing an alternate strategy to keep the project on track whilst ensuring the level of healthcare and consumer partnership and input required. A high-level summary of the situational analysis is presented in the section below, and we welcome your feedback.
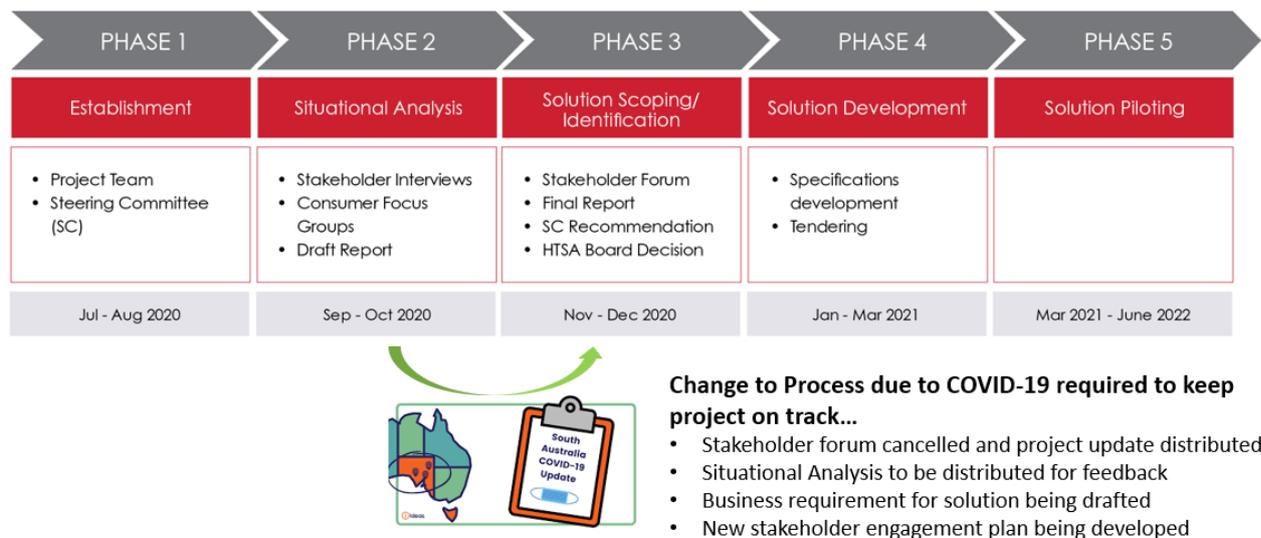
PHASE 1	PHASE 2	PHASE 3	PHASE 4	PHASE 5
Establishment	Situational Analysis	Solution Scoping/ Identification	Solution Development	Solution Piloting
• Project Team • Steering Committee (SC)	• Stakeholder Interviews • Consumer Focus Groups • Draft Report	• Stakeholder Forum • Final Report • SC Recommendation • HTSA Board Decision	• Specifications development • Tendering	
Jul - Aug 2020	Sep - Oct 2020	Nov - Dec 2020	Jan - Mar 2021	Mar 2021 - June 2022

Change to Process due to COVID-19 required to keep project on track...
- Stakeholder forum cancelled and project update distributed
- Situational Analysis to be distributed for feedback
- Business requirement for solution being drafted
- New stakeholder engagement plan being developed

Figure 1 – Revised project plan

Summary of Situational Analysis

The situational analysis was conducted by HTSA project staff and was primarily informed by a series of interviews with health service decision makers, and primary and acute care clinicians as well as focus groups with patients and carers.

What is the need?
a) To provide real time transfer of healthcare information between primary and hospital care providers that is readily accessible at point of care to assist healthcare decision making.
b) To track the patient journey across the system to support coordination of care, identify gaps in care and ultimately improve services
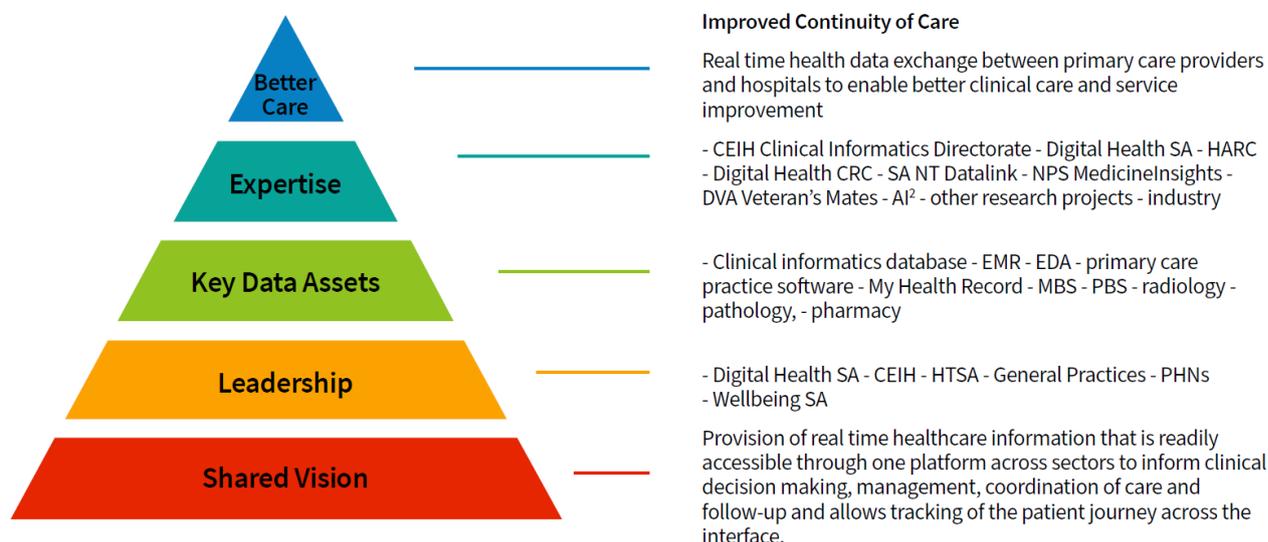
What's been done in other states?
Other states have progressed projects that address either a) supporting real-time transfer of clinical information, or b) provide deidentified unit/aggregate level data for service improvement. The reasoning for this is largely around patient consent issues and the lack of availability of a state-wide electronic medical record.

What can be done in SA?
The advice of experts in SA is that the technology exists to provide a solution that captures data once and uses it to both support real-time transfer of clinical information and the development of a multi-source enduring linked data asset which can be used to inform health service improvements.
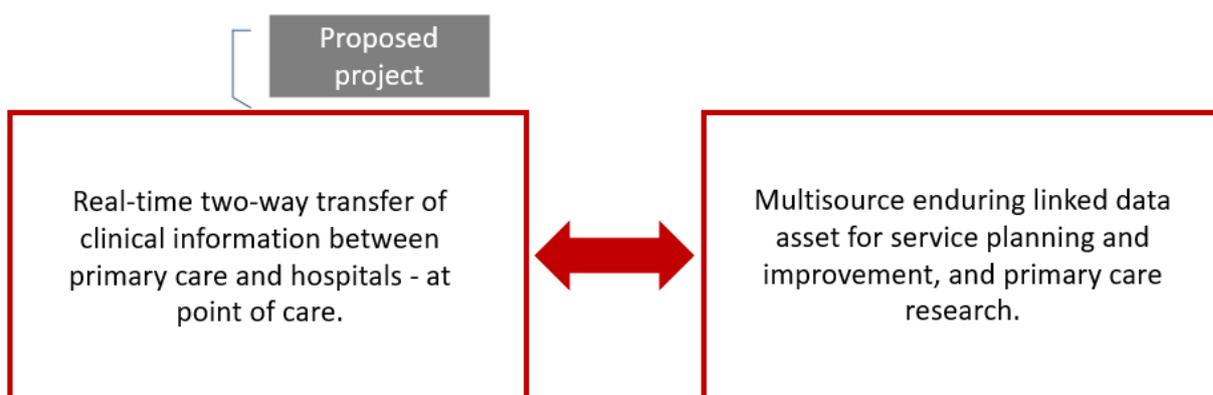
What can we build on in SA?

In South Australia we are well positioned to better use data to improve continuity of care, building on the current willingness for change, existing leadership and governance and significant infrastructure, data assets and expertise within the state.

Improved Continuity of Care

Better Care — Real time health data exchange between primary care providers and hospitals to enable better clinical care and service improvement

Expertise — - CEIH Clinical Informatics Directorate - Digital Health SA - HARC - Digital Health CRC - SA NT Datalink - NPS MedicineInsights - DVA Veteran's Mates - AI² - other research projects - industry

Key Data Assets — - Clinical informatics database - EMR - EDA - primary care practice software - My Health Record - MBS - PBS - radiology - pathology, - pharmacy

Leadership — - Digital Health SA - CEIH - HTSA - General Practices - PHNs - Wellbeing SA

Shared Vision — Provision of real time healthcare information that is readily accessible through one platform across sectors to inform clinical decision making, management, coordination of care and follow-up and allows tracking of the patient journey across the interface.

What is SA's Opportunity?

The Vision: to build a state-of-the art, state-wide real time data asset that can improve clinical care and healthcare services

Proposed Project: To develop and pilot a technical solution that connects General Practice and hospital Electronic Medical Record data at point of care (e.g. medications, discharge information etc)

Proposed project

Real-time two-way transfer of clinical information between primary care and hospitals - at point of care.

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Multisource enduring linked data asset for service planning and improvement, and primary care research.

Next Steps (Dec 2020-Mar 2021)

- Steering Committee will draft business requirements for the proposed project
- Clinical/consumer consultation process to determine key needs and considerations
- Establish a working group to develop technical specifications
- Tender process