Secure exchange of health information is a core foundation of Australia’s expanding digital health program and is being promoted by the Sydney North Primary Health Network (SNPHN) for increasing use in the region’s Residential Aged Care Facilities (RACFs).

The GRACEMED study identified less than 10% of residents’ medication charts matched the records of their treating GP, and suggested that improving use of digital systems to support clinical handover could improve patient safety.

SNPHN is exploring ways in which My Health Record (MyHR) and secure message delivery (SMD) could be used to facilitate the increasingly complex nature of care in RACFs.

SNPHN invited 103 local RACFs to undertake a baseline questionnaire, followed by semi-structured interviews with facility managers to establish current communication processes with hospitals, GPs, and pharmacies. Simultaneously, GPs were surveyed to determine the issues and barriers they face delivering care to patients in RACFs.

36% of RACFs responded with 56% indicating they would benefit from more knowledge regarding the use of Digital Health Technology (DHT) to support medication management and improved clinical handover. 57 GPs responded to the “GP Aged Care Survey”. Improved communication, particularly sharing of patient information and medicine concordance were the most commonly identified issues.

6 RACFs are undertaking a trial evaluating the use of DHT to improve communication between care providers. Five facilities have successfully registered with MyHR, however technical issues have prevented all but 1 from being able to access the record via their clinical software system.

SMD has been implemented in all 6 RACFs and is being used to notify GPs of non-urgent incidents reports, for sharing of medication charts with pharmacy, for exchange of RMMR reports, and for greater accuracy of clinical notes between hospital and RACF.

Use of DHT has the potential to reduce workflow duplication, and to provide accurate and up to date information for sharing with other healthcare providers eg. during acute admission.

SNPHN is continuing to work with local providers to overcome challenges in adoption and use
of DHT. Our next steps will be to expand the trial to include additional RACFs and pharmacies, conduct a 12 month follow up survey of participants, and continue raising awareness amongst local hospital clinicians of access to MyHR information via the NSW Health clinical portal.

References:

Keywords: digital health; aged care; clinical handover