

# Telehealth - The Virtual Specialist in Your Home



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# Nepean HITH History

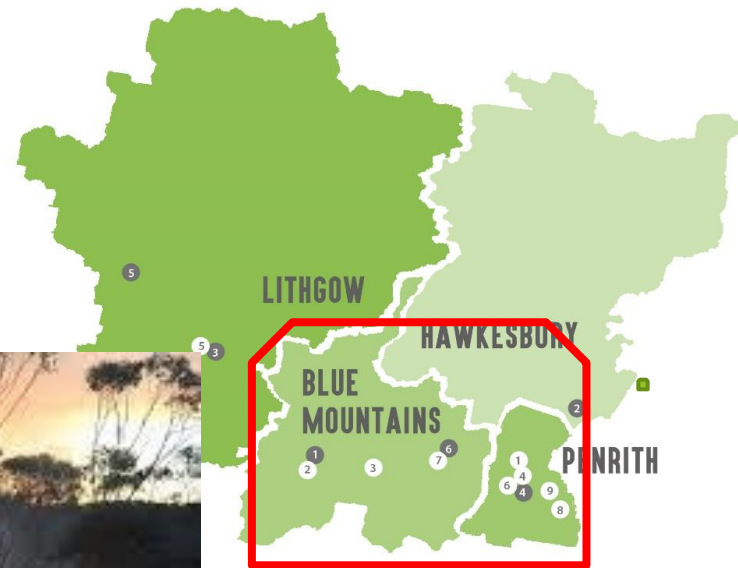


- ▶ Nepean Hospital located Nepean Blue Mountains LHD
- ▶ Western Sydney - Penrith foot of the blue mountains - up the mountains and beyond
- ▶ Nepean Hospital, Springwood and Katoomba. Lithgow and Portland
- ▶ Outreach Service commenced 1996- HITH affiliation in 2015
- ▶ Medical governance of Infectious Disease Team -1998
- ▶ Servicing 360,000 residents in geographic area spanning almost 10,000 square km

# NEPEAN OUTREACH HITH

- ▶ Nepean hospital (teaching ) 520 bed- currently prior redevelopment
- ▶ Katoomba Hospital 50- 99 beds
- ▶ Geographically diverse - city to country roads in 10 kms
- ▶ 3 x Senior Staff Specialists'
- ▶ NUM
- ▶ CNS2
- ▶ RNs x 12 FTE
- ▶ Administration staff x1                      0.6 FTE pharmacist

# Area covered by Nepean HITH



District Anzac Memorial Hospital  
District Health Service  
Health Centre  
al

- ① Cranebrook Community Health Centre
- ② Katoomba Community Health Centre
- ③ Lawson Community Health Centre
- ④ Lemongrove Community Health Centre
- ⑤ Lithgow Community Health Centre
- ⑥ Penrith Community Health Centre
- ⑦ Springwood Community Health Centre
- ⑧ St Clair Community Health Centre
- ⑨ St Marys Community Health Centre

# IDENTIFIED A GAP

- ▶ Identified there was need to extended access of specialist nursing care
- ▶ Improved consistent access to ID medical reviews
- ▶ Enable increased service capacity to b.d. for cellulitis
- ▶ Upper mountains pts need to return to BM ED for evening dose of IVAB and possible review by different ED physician
- ▶ Need identified by RN's - extended LOS for upper mountains patients due to inconsistencies in review process - not directly linked to ID



# What we did

- ▶ Ministerial enhancement led to 2 x RN positions
- ▶ Trial PM visit for upper mountains Patients with cellulitis
- ▶ Reduced travel ( associated issues in mountain weather ) for pt's and their families
- ▶ Reduced wait times in BM ED for 15 min infusion +/- possible medical review by differing doctors
- ▶ Streamlined access to ID team for review and consultation

# Telehealth- nursing in the 21<sup>st</sup> century

- ▶ RN's given iPads
- ▶ Uniquely designed APP specifically for Nepean HITH service
- ▶ Collaborative with ID team , university, nursing staff
- ▶ Utilised video conferencing for upper mountains pts unable to travel to Nepean for ID review.
- ▶ Nursing staff present and facilitated the video review from the pts home - able to act instantly on MO directive.
- ▶ Medical staff review from NOS clinic



# Objectives measured

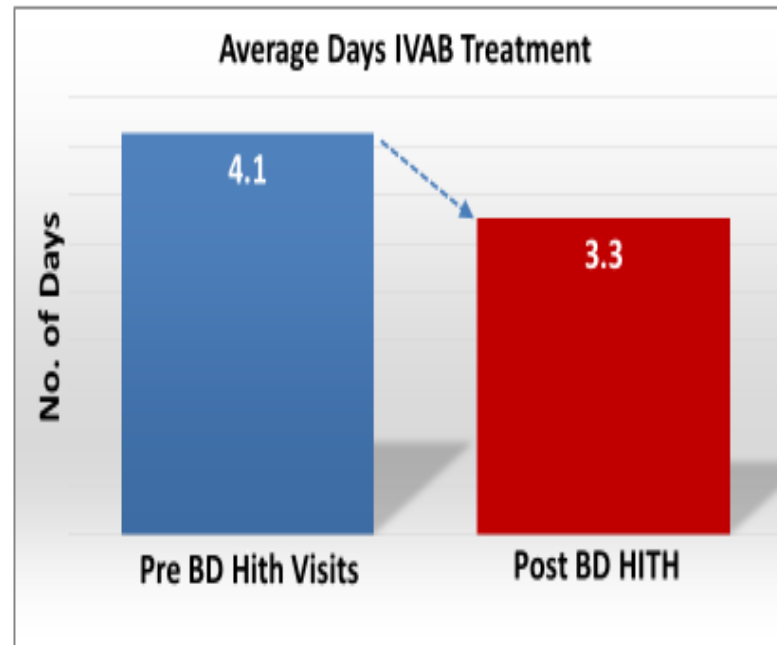
- ▶ Number of days on IVAB
- ▶ Number of presentations to Blue Mountains ED - approx. 1 hour drive from Nepean Hospital
- ▶ Number of Telehealth consultations undertaken
- ▶ In line with national Standards



# Number of days on IVAB

- ▶ Reduction 21%

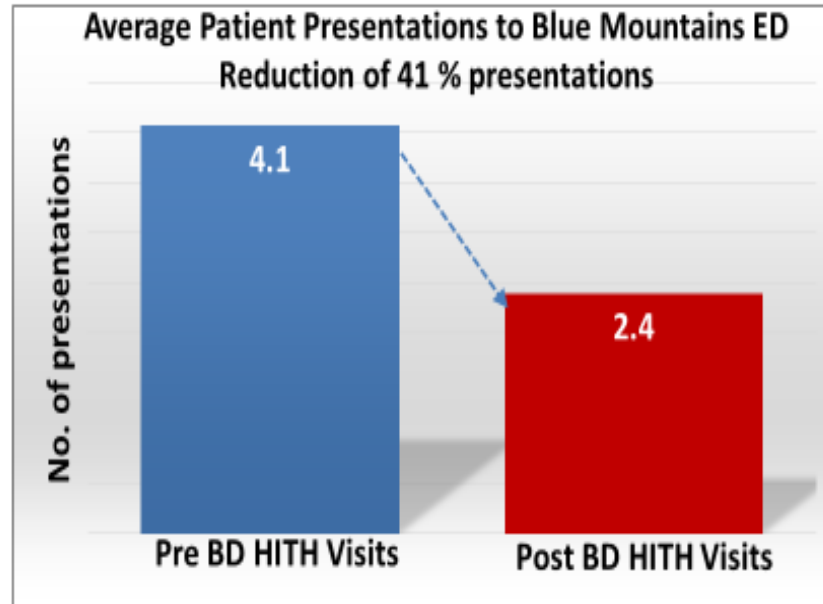
## Snapshot - 5 months data:



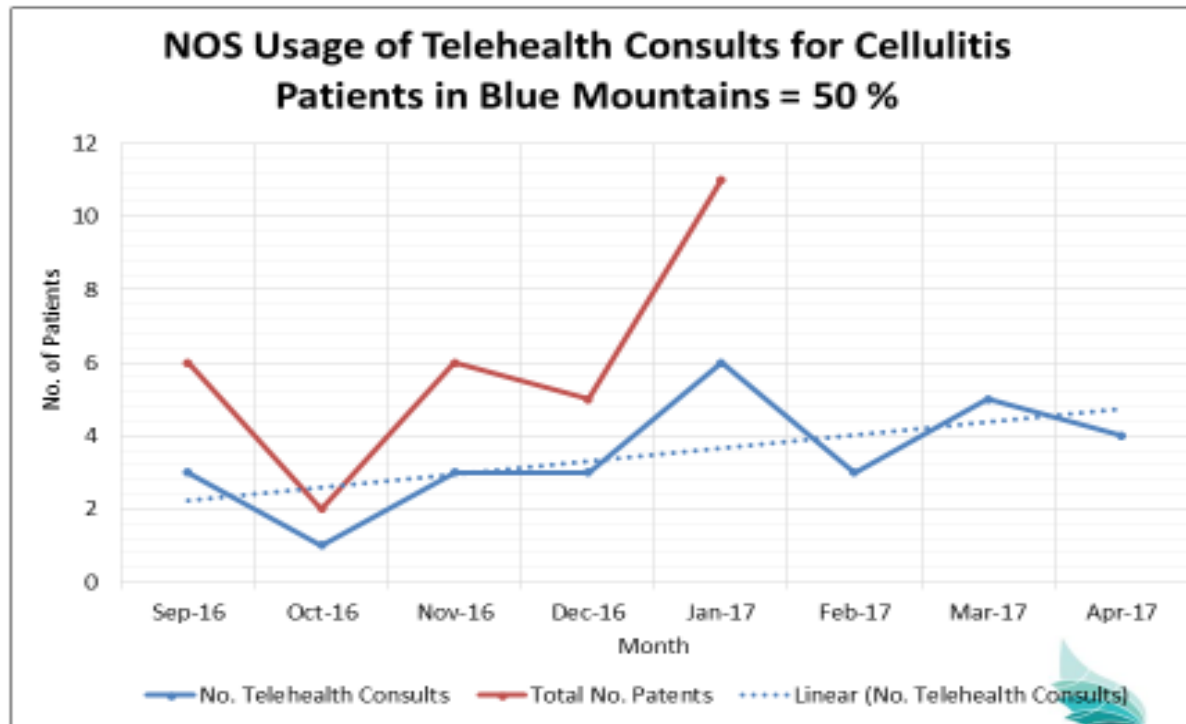
# Number of ED presentations

- ▶ Reduced by 99 visits
- ▶ Saving \$40 K

## Snapshot - 5 months data:



# Telehealth consultation in 5 months

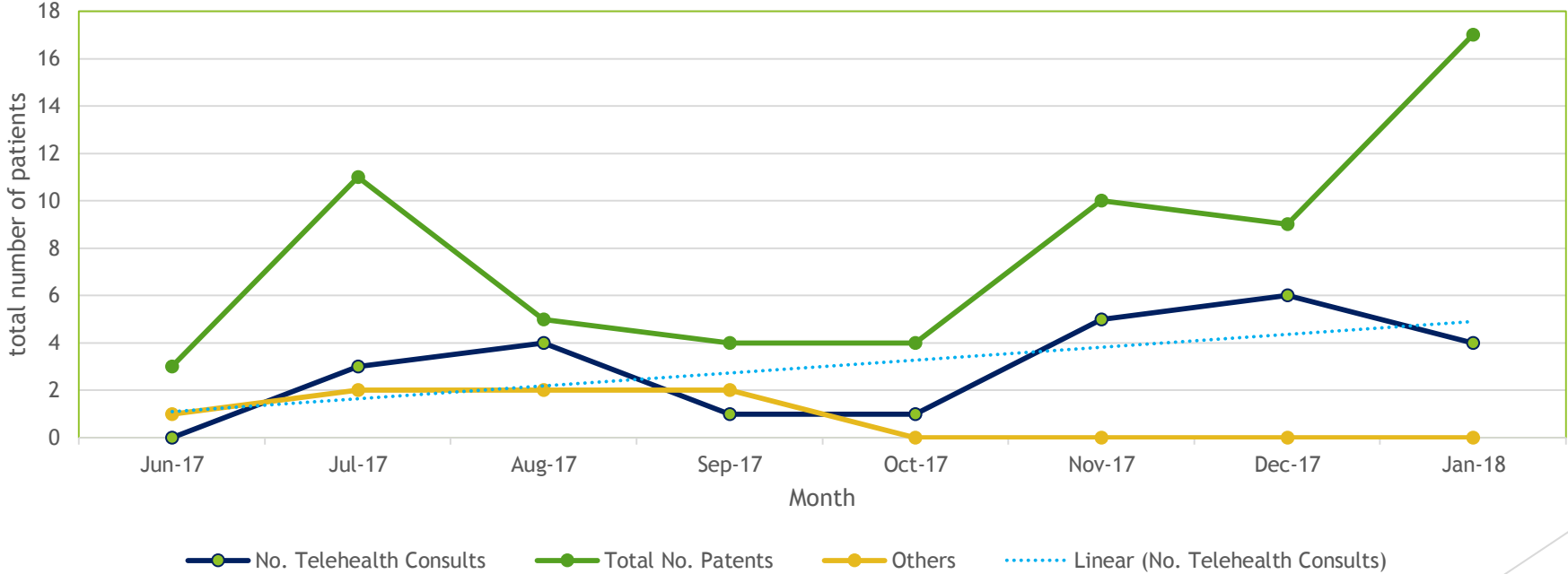


# Results 5 month period

- ▶ Reduction in ED BM presentations by 41 %
- ▶ Reduction in LOS by 21 % for cellulitis
- ▶ Reduction in days on IVAB
- ▶ Reduced risks associated with cannulation
- ▶ 100% of ALL pts with cellulitis received ID review within 72 hrs of HITH admission

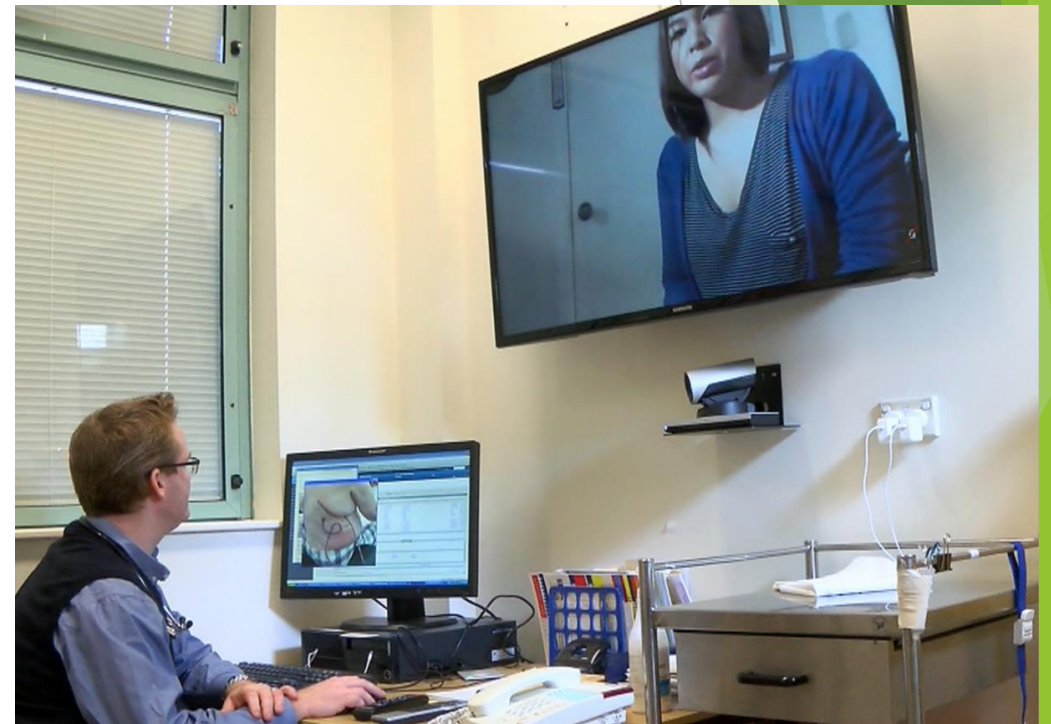
# Recent Data Snapshot

## NOS Usage of Telehealth Consults for Cellulitis Patients in Blue Mountains



# Positive outcomes

- ▶ 50% of upper mountains patients
- ▶ Avoided travel by access to Telehealth
- ▶ Reduction in health costs
- ▶ Continuity of care
- ▶ Improved patient satisfaction
- ▶ Telehealth usage increased for all patients with mobility /transport issues
- ▶ Model of care that is transferable across the LHD



# Alignment with National Standards

- ▶ Standard 2 - PARTNERING WITH CONSUMERS
  - Reduce need for admission or re-presentation to hospital
  - Improve patient satisfaction
- ▶ Standard 3 - PREVENTING AND CONTROLLING HAI
  - Reduce time PIVC indwelling
  - Potential exposure in ED
- ▶ Standard 4 - ANTIMICROBIAL STEWARDSHIP
  - Reduce unnecessary administration of antibiotics