


THE UNIVERSITY OF WESTERN AUSTRALIA
 Princess Margaret Hospital for Children

LIVE TELE-OTOLOGY CONSULTATIONS VERSUS STORE AND SEND:

THE KIMBERLEY EXPERIENCE


Tu Trang Tran
 Professor Harvey Coates
 Dr Paul Bumbak



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SERVICE PROBLEMS - PMH

- **ONLY** tertiary public paediatric health service in WA
- ↑ vol of referrals
- **Long waiting time** (ENT clinic appts & surgery)
 Sept 2011 – 1598 waiting for 1st appt, 432 on WL
 Sept 2012 – 2779 waiting for 1st appt, 410 on WL
- ↑ **DNA rates** (ENT clinic appts & surgery)
- **Adds strain to service & resources**



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SERVICE PROBLEMS – PMH (2)

- Affects the quality of care delivered
- Impacts KPI, ABF & NEST - (Key Performance Indicator, Activity Base funding, & National Elective Surgery Targets)
- 75% country pts DNA

2011 PMH ENT OUTPT COUNTRY DATA REPORT (SEPT 2011)								
	Country							
	South West	Goldfields	Great Southern	Kimberley	Midwest	Pilbara	Wheat belt	Total
ENT	46	31	23	14	29	23	54	220


Sept 2011 – 421 pt ref & 505 pt seen in clinic

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WA HEALTH SERVICES

KIMBERLEY REGION


- Furthest site
- 424,517 square km
- 45,763 in 2010
- 36% are Indigenous
- 1st site to trial adhoc PET



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AIMS OF PET

- ↑ access to paediatric ENT care
- Link TH to deliver an extra Outpt service
- Improve clinic utilisation & activity
- Document & track the tele-otology activity



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AIMS OF PET (2)

- ↓ travel & associated costs
- ↓ stress (family & health service)
- Better collaboration & communication
- Provides resource, support & guidance for remote regions



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PET REQUIREMENTS

<p>PMH</p> <p>Personnel</p> <ul style="list-style-type: none"> • ENT Consultant • ENT CNS • TH coordinator • ? ENT Clinic clerk support <p>Venue</p> <ul style="list-style-type: none"> • Telehealth centre • Videoconference equipment /facilities <p>Administration Support</p> <ul style="list-style-type: none"> • Computer, phone, fax 		<p>REGIONAL SITE</p> <p>Personnel</p> <ul style="list-style-type: none"> • Regional medical officer or hospital contact • Community nurse ear health coordinator (CEHN) or ? Aboriginal Health Worker (AHW) • Regional TH coordinator <p>Venue</p> <ul style="list-style-type: none"> • Telehealth centre • Videoconference equipment /facilities <p>Administration Support</p> <ul style="list-style-type: none"> • Computer, phone, fax, & car
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PET SERVICE PROFILE

- Children with ENT condition living in remote areas of WA
- Age criteria – <17yrs (Children should be accompanied)
- [PMH ENT Telehealth@health.wa.gov.au](mailto:PMH.ENT.Telehealth@health.wa.gov.au) - triaged
- Registered Clinic with an ENT Consultant
- Wed am (0830hr -1200hr) negotiable
- No cost to family



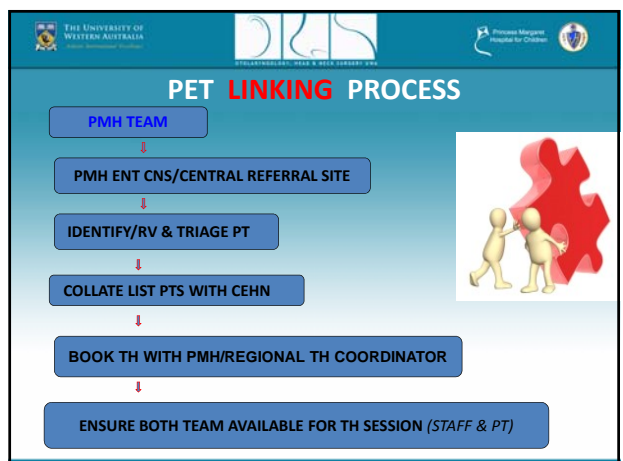


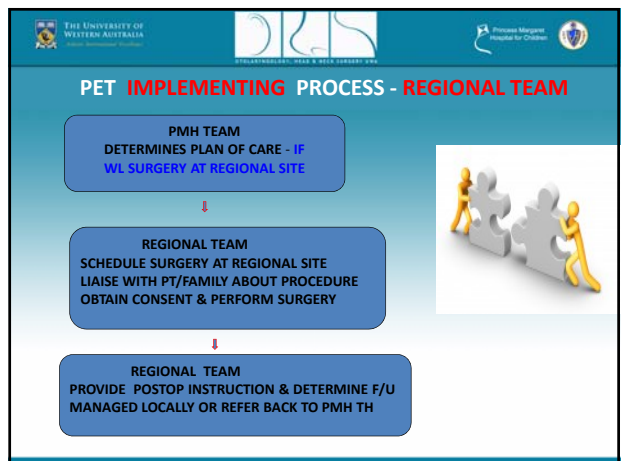
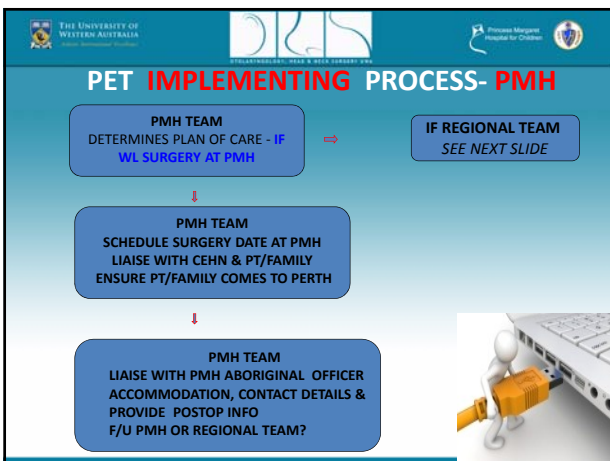
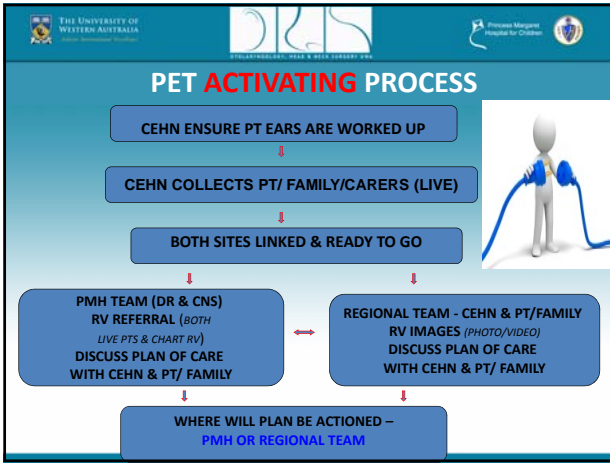
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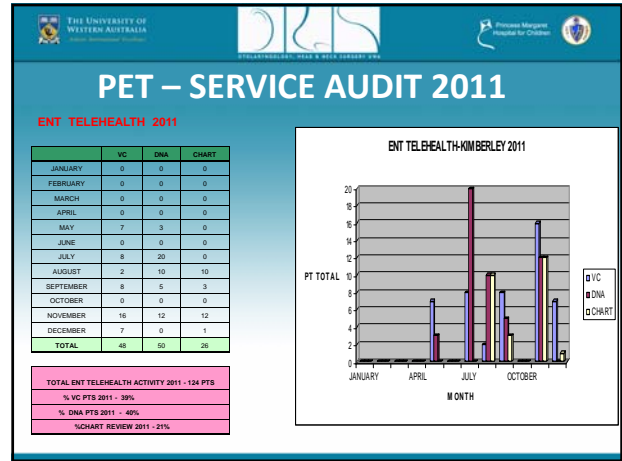
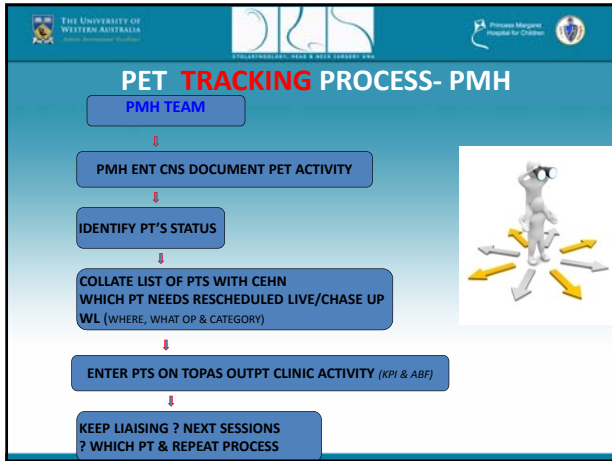
- Pt demographic details & contact person
- Ref reason & by whom
- Provisional diagnosis
- Current management plan
- Past medical history
- Family history
- Diagnostic test (audiogram, tympanogram, otoscopy images, tonsil grade)
- Other relevant findings

LEFT
Otoscope image left ear:

The slide features a list of seven bullet points. To the right of the list is a circular inset image showing an otoscope view of a left ear. Below the image is the text 'LEFT Otoscope image left ear:'.








- ### CHALLENGES – PT/FAMILY
- **Kimberley region** (remoteness, climate)
 - **Children/family health needs & awareness**
 - **Attendance** (location & availability - live vs chart review vs DNA)
 - **Time** (travelling, work/school/home environment)
 - **Cost** (accommodation, living expense, loss of income)
 - **Resources** (car, phone, local health services)
-

- ### CHALLENGES – BOTH SERVICES
- **Kimberley region** (remoteness, climate)
 - **PET activity** (DNA vs attendance, live vs chart review)
 - **Time** (collate data, screen pt, collect pt)
 - **Resources** (phone, computer, car, equipment, TH facilities)
 - **Technical issues** (otoscope, connection, folders too large to store & send)
 - **Committed team** (available, dedicated & skilled appropriate)
-

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BENEFIT OF PET-PT/FAMILY


- ↓ **stress** (*more family/community support*)
- ↓ **time** (*travel, distance, away from family/school*)
- ↓ **Personal \$** (*travel & accommodation*)
- ↓ **waiting time & ↓ DNA rate** (*clinic & surgery appointment*)
- **Greater pt/family involvement & control in decision making**



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BENEFITS PET – BOTH SERVICES

- ↑ **access ENT care**
- ↑ **Outpt activity & service**
- **Register pts directly onto the WL**
- ↓ **DNA rate both sites**
- ↓ **travel & associated cost (personal, health services)**



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BENEFITS PET – BOTH SERVICES (2)

- **Ease of reviewing pt & directing pt care**
- **Improve d/c planning & f/u**
- **Greater pt/family involvement in decision making**
- **Sharing health info** (*different specialities & different regions if families relocate*)



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BENEFITS PET – BOTH SERVICES (3)

- **Minimal infrastructure in delivery of service**
- **Provides resource, support & guidance for remote regions** (*discuss issues, pts, innovative research & best practice & to ensure remote health services are consistent with tertiary standard of care*)
- **Utilising existing resources** (*tap & build*)




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TELEHEALTH: HEAR & HOLD TOGETHER™

SUMMARY - PET

- TH helps to deliver innovative service despite ongoing challenges
- Only successful with a dedicated team
- TH needs to be open & flexible
- Provides communication framework to bring change
(practice & type of service available)
- Tap & build on existing TH services




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TELEHEALTH: HEAR & HOLD TOGETHER™

“To succeed in business you need a clear, unambiguous goal and not be deflected from it. You need to motivate people to be passionate about achieving that goal. You need to develop great relationships and aim to be the best in the world at what you do.”

Michael Chaney (AO), chairman of Woodside and NAB, and former managing director of Wesfarmers.



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- **Mrs Linda Hannig** – Regional Telehealth Coordinator, Kimberley
- **WACHS Telehealth Program**
- **WACHS PATS Officers**
- **Rural & Remote Clinicians**
- **Our Patients & Families**



THANK YOU