

Transforming community care: Remote and virtual AT LAST!

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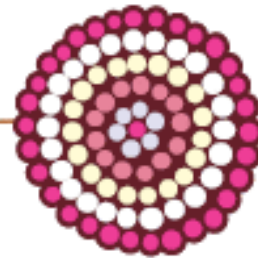


Acknowledgement of country and people

We acknowledge the traditional owners of the land on which we present to you today, on Gadigal land in the Eora nation.

We also acknowledge the traditional custodians throughout WA and their continuing connection to the land, waters, and community on which we provide our health service.

We pay our respects to all members of Aboriginal communities and their cultures and acknowledge the wisdom of Elders both past and present.



OUR STORY

We are here today to share our experiences of a project, undertaken to transform a community service in Western Australia. Showing how digital technology can enable a community healthcare service to operate more efficiently and improve staff satisfaction.

We hope to highlight the challenges faced but focus on the positive influence a partnership between clinical informatics and service delivery can have.

Rehabilitation in
the Home

OUR PURPOSE

Provide rehabilitation and care coordination at or close to home

Our service

10,000 referrals a year



7 Metro bases



Covers 6,500 kms



3 Service streams



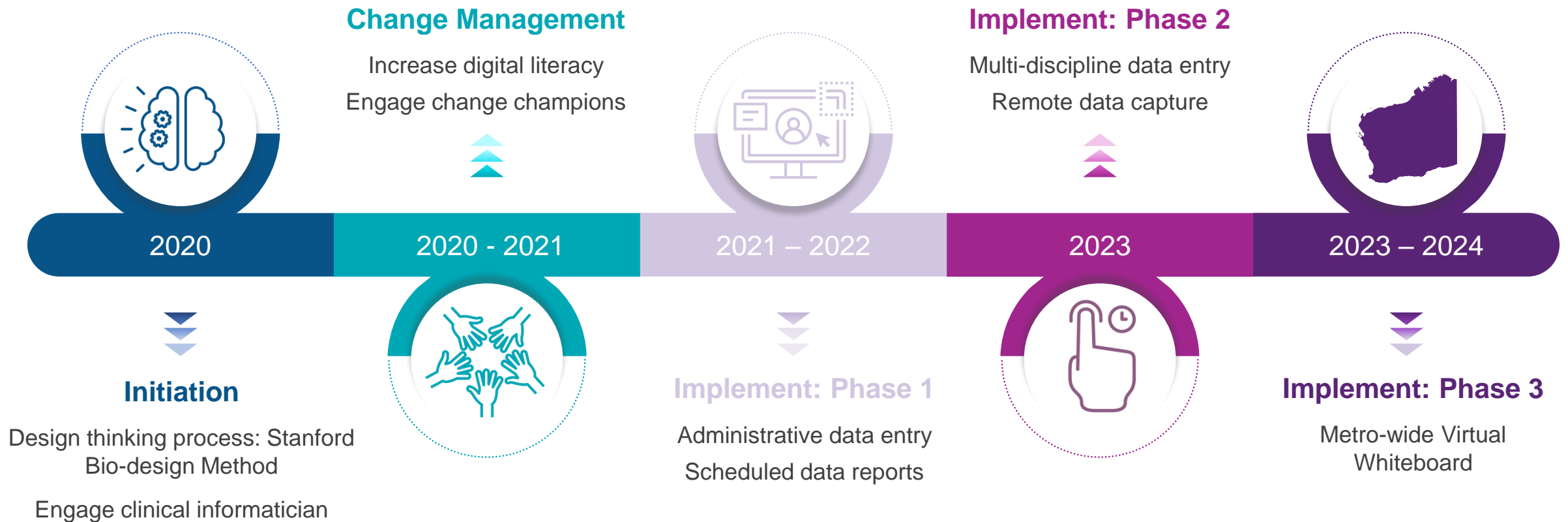
Multi-disciplinary team



The problem

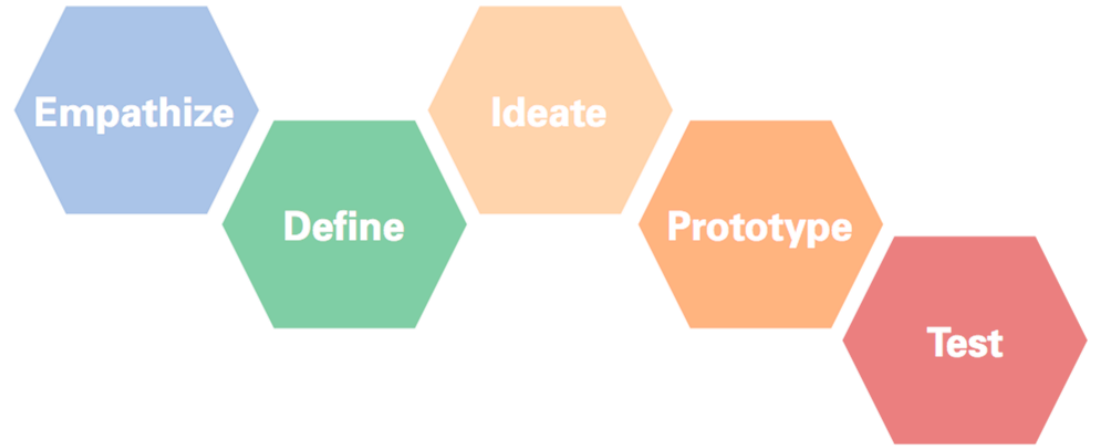
Our Transformation Journey

How did we get to where we are now?



Our Transformation Journey

How did we get to where we are now?



Initiation - 2020



Empathise

Make sense of and learn about the problem. Investigate what related work has been done before, determine if the initially identified problem is really a problem.

Interviews, shadowing, seek-to-understand, non-judgmental.

Prototype

Design and review. Start simple and address priorities.
Stakeholder check point.

Test

System interface and operational capability.
Multiple scenarios and roles.

Define

Explore the problem(s). Review all stakeholder insights. Map personas and identify priorities, challenges, benefits and risks.

Ideate

Share ideas, prioritise, diverge, brainstorm and consult.

Our Needs

Data collection tool	Provide remote access
Patient journey board	Secure
Mobile and desktop capabilities	Interactive
Multi-user access and entry	Adaptable
Communication platform	



Change Management – 2020/21

Change Management

10 years of service knowledge and digital interest

Trust and understanding goes a long way

Training, exposure, focus groups.

Overcome resistance to change; 'buy-in' and service wide change champions helped sustain engagement

One point of contact for staff and informatics team

Test champions at all bases included administrative staff



Implement: Phase 1 - Dec 2021



Power Apps Rehabilitation in the Home (RITH)

All Patient List

RITH Base	UMRN	Full Name	Refer...	Suburb	Paperwor...	Likely dat...	C...	Risk Fact
RkPG			RGH	KWINAN...	Yes	6/07/2022	R...	No
RkPG			RGH	COOLOO...	Yes	28/11/20...	O...	No
AHS			AHS	MADDIN...	Yes	1/02/2022	D...	N-

The Application

Microsoft Power Apps, Dataverse, Power BI

The interface was easy to use. Had 'quick wins' for a community MDT such as multiple view lists and deep links to other health systems. Our first phase of implementation replaced an archaic data collection platform that led to scheduled dashboard reporting. Resources such as user guides, quick guides and business rules assisted education and roll out.



Implement: Phase 2 - 2021

Reporting and MDT data entry

Live dashboards that upload data directly to Area Managers
Executive directorate have immediate access to monthly reports
60% of staff were using the application

Improved data integrity and compliance led to increased efficiencies.
Increased data availability has led to innovative research projects that no longer require tiresome paper note audits
Adaptable dashboards allow for customisation to suit varied audience report structures and requirements.



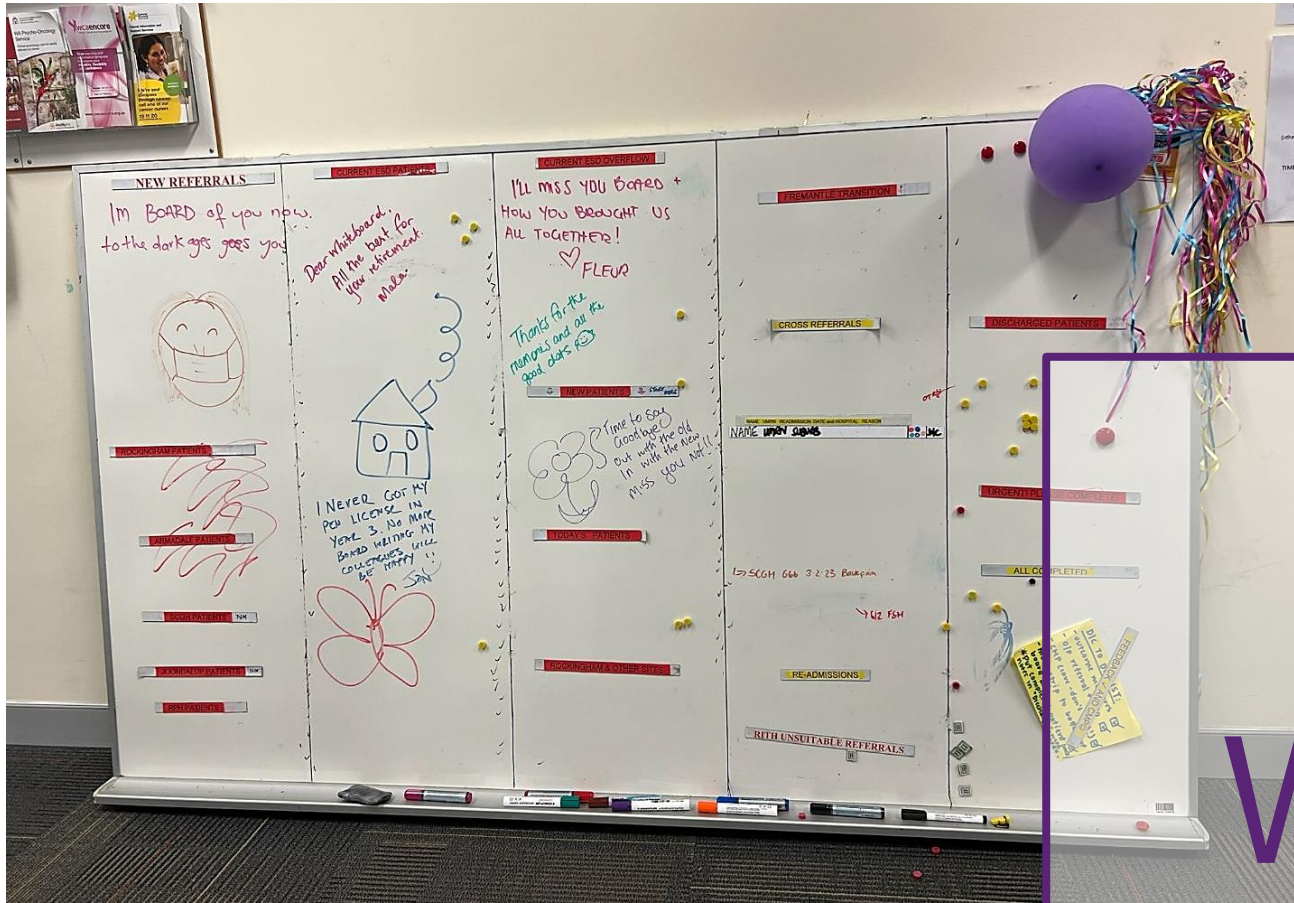
Implement: Phase 3 - Jan 2022



NORTH

UMRN	Full Name	Suburb	RITH Entry	PT	OT	SW	SP	Diet	TA	Med
		ELLENBROOK	2/08/22	AW	TM	KP	SB X			
		HERNE HILL	7/09/22	AH	SSp				KS	
		MORLEY	13/09/22	MS	SS	KP x			KS	
		VIVEASH	15/09/22	MT					LV	
		BAYSWATER	17/09/22	MS	TM	LW		JHx	KS	Y
		MORLEY	18/09/22	MS		LW			KS	
		BAYSWATER	18/09/22	MS	TMx	KP		JHx	KS	
		ELLENBROOK	19/09/22	AH	TM X			JH	KS	
		BRIGADOON	20/09/22	AH						

Metro-wide Virtual Whiteboard (VWB)
95% of staff are now using the application
All 7 sites run solely from a VWB
A live virtual whiteboard, accessible remotely provides visibility of all our patients across an entire metropolitan community service.
Enabled caseload sharing and, equitable work loads and increased inter-site team morale.



Goodbye Whiteboard!

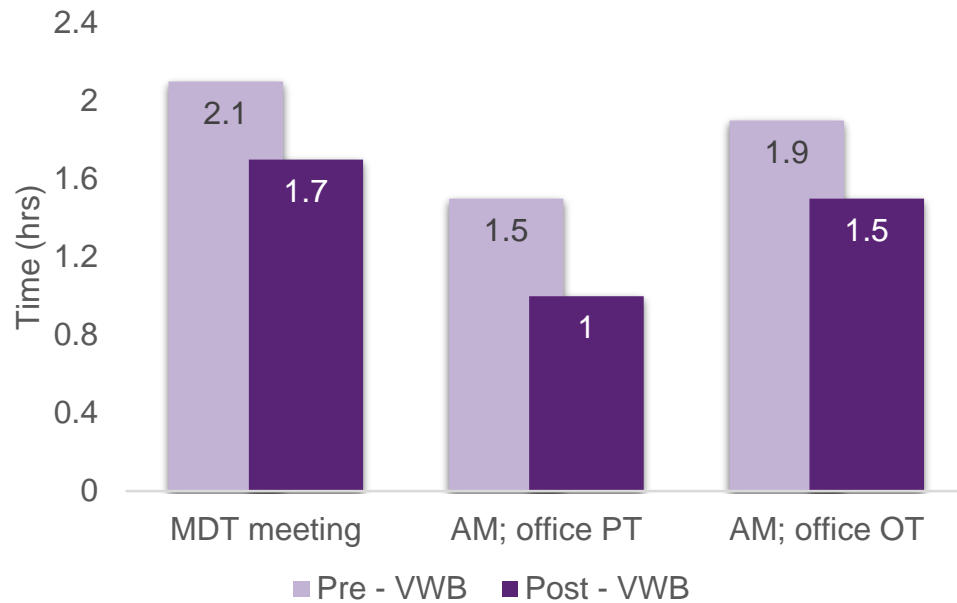
Increased staff satisfaction in areas such as team morale, feeling heard, engaged to think innovatively.



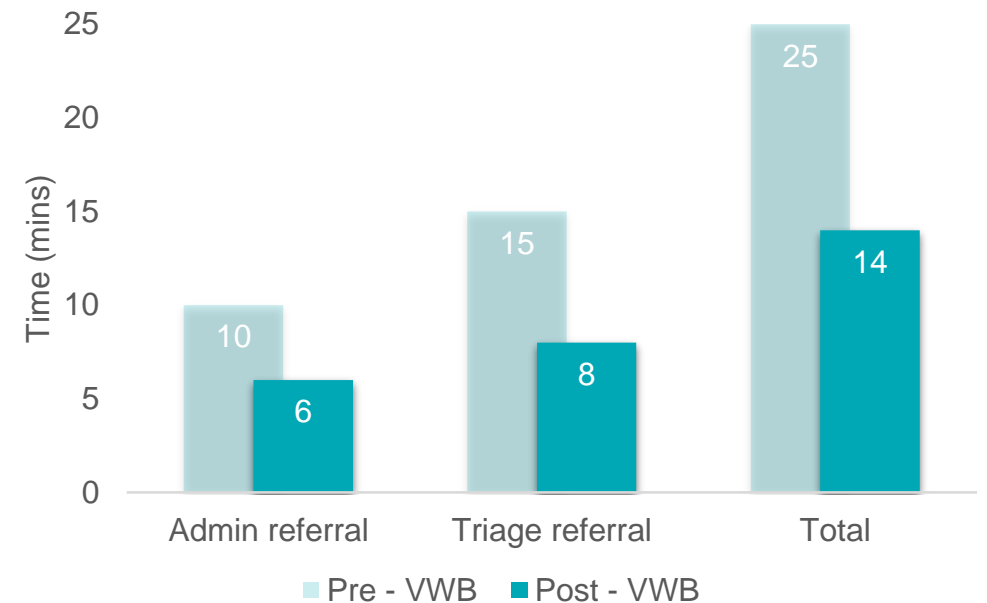
The wins

- Increased clinical capacity
- Increase administrative capacity
- Ability to access our data immediately

Clinical time saved



Admin time saved per referral





Engage

Ask

What matters?

What works?



Research

Test/Trial

Explore

Learn



Support

Small steps

Open communication

Ongoing change

Our experiences



More than IT

Solution agnostic

Clinically focussed



Bridge

Digital awareness

Key contact

Embedded in the
service



Efficiencies

Success

Improve



Enable

Train

Joint purpose

Growth



Learn

Knowledge transfer

Foster culture

Expand workforce
capability

Acknowledge WITH THANKS

- 👍 RITH team, management and admin stronghold
- 👍 SMHS Informatics
- 👍 SMHS Innovation hub
- 👍 Survey and test participants
- 👍 Microsoft

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Any questions?