

Annual Report
Business Highlights
2015 - 2016





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WE ARE HEALTHDIRECT AUSTRALIA



Our vision

To be a key part of a quality Australian health system by helping consumers manage their own health through leveraging technology to enable timely access to health and related services.

We were established by the Council of Australian Governments with a mandate to deliver telehealth and digital health services. Working in partnership with federal, state and territory governments, we help address key priorities and challenges within the health, ageing and social service sectors.

We are working at the forefront of digital health and have been responsible for building national digital health infrastructure that will support the next tranche of progress in digital health in this country.

Our purpose

We believe that all Australians should have access to the information and advice they need to manage their health and wellbeing. To achieve this, we proactively identify areas of unmet need and develop and deliver solutions using our core capabilities:

- Aggregation, procurement and evaluation of publicly funded health and related services.
- Design and implementation of innovative digital health services.

Our shareholders

We are jointly funded by the Australian Federal Government and the governments of the Australian Capital Territory, New South Wales, Northern Territory, South Australia, Tasmania, and Western Australia.



OUR YEAR AT A GLANCE



This year we handled more than **80 million requests** for health and related information and advice.

This was achieved through:



14 million
visits
to our websites

66 million
transactions
on the National Health
Services Directory



2 million
contacts
handled by our helplines



Every
15 seconds
one of our operators
managed a contact

27,000
website links
to resources from our
information partners



1000
new pages
of content created
across our websites



Half a million
visits to the healthdirect
Symptom Checker

55,000
visits
to the healthdirect app



4,000
Video Calls

CHAIR'S STATEMENT



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“Our organisation has evolved from procuring and managing a single telephone triage service to offering multiple services with integrated telephone and digital channels across a range of health, ageing, human and social services.”

This year has been a significant one for Healthdirect Australia. We are now in our 10th year of operation and this milestone has provided an opportunity to reflect on where we have come from and future opportunities.

As a national, government-owned, not-for-profit organisation we help people manage their health and wellbeing through a range of different information and advice services. Our work is underpinned by a shared vision with our Australian government shareholders to provide accessible and quality healthcare for all, which is delivered efficiently and effectively and uses the latest technology.

As we move into the next decade, it is important to acknowledge the dramatic change in the way people access health services. People have come to expect a level of personalisation and convenience from their health services, similar to their experiences in other sectors such as retail and banking.

Our organisation has also made a significant shift, evolving from procuring and managing a single telephone triage service to offering multiple services with integrated telephone and digital channels across a range of health, ageing, human and social services. All these solutions put consumers at the heart of service delivery.

We now have an advanced digital capability underpinned by our Health Portal Platform – a cloud-based secure environment for running bespoke gateways, websites and other technology services. It allows us to deliver highly-scalable, cost-effective digital services for our shareholders, which comply with the highest Australian Government security and privacy standards.

The company has operated within budget this year, utilising funds held over from prior years. While this presents as an operating deficit for the year, it simply reflects that we have used unexpended funds from previous years as new services are developed and rolled out over multi-year timeframes.

In January we welcomed new members to our Board of Directors, bringing additional highly relevant skills to the Board. The continuing directors Julie Thompson, Anthony Lawler and I were joined by Michael Beckoff, Wayne Cahill, Peter Dowling and Jane Muirsmith. I would like to acknowledge and thank Karen Dado and Susan Forrester, our outgoing Directors, for their commitment and dedication to Healthdirect Australia during their tenure.

The new Board looks forward to working with the CEO and his team to continue to grow the organisation as an industry leader in providing quality, remotely delivered health and related services, and continuing to support our government shareholders in delivering their visions for a better health system.

A handwritten signature in black ink that reads "Patricia McKenzie".

Patricia McKenzie, Chair

CEO'S INTRODUCTION



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“At Healthdirect Australia we believe that all Australians should have access to the information and advice they need to manage their own health and wellbeing. It is this vision that underpins everything we do.”

The healthcare landscape is constantly evolving, driven by a range of factors such as rising healthcare costs, workforce shortages, the ageing population and increased rates of chronic disease.

Consumer expectations are also prompting the need for change, as people are more informed, have more motivation to take control of their health and wellbeing, and are more mobile and connected than ever before.

In light of this need to constantly innovate and deliver what consumers want and expect from services, we have made significant enhancements to a number of our services this year.

The My Aged Care gateway experienced a substantial increase in demand this year, following the introduction of a new screening process which determines people's eligibility to be assessed for aged care services. To ensure we continued to deliver a high level of service, we worked to improve our processes and scaled the service to increase our capacity to handle the extra demand by opening a new contact centre in Queensland.

We introduced a new operating model for the after hours GP helpline to ensure it better meets the needs of people in

rural and remote areas who find GP services difficult to access after hours. We also expanded Pregnancy, Birth and Baby so that it now caters for parents with children up to five years of age and introduced maternal and child health nurses to answer calls to the service.

A number of new services were added to our portfolio. This year we introduced Carer Gateway on behalf of the Department of Social Services. This is a significant service which provides much needed information and support to Australia's 2.7 million unpaid carers, through a new website and telephone contact centre.

The service leverage's Healthdirect Australia's expertise in integrated digital platform design and centralised telephony solutions. Our agile service development approach ensures that people are connected to the information, services and support that they need, where and when they need it.

Another important piece of work undertaken this year was the review of the National Health Services Directory commissioned by the National Health Chief Information Officer (CIO) Forum. The directory was acknowledged as a key piece of digital health infrastructure moving forward, providing a central source of information that supports both consumers and health professionals looking for information about health and related services, and enabling secure electronic messaging between health professionals and organisations.

Looking ahead, there are many exciting opportunities on the horizon for Healthdirect Australia as we move into our next decade of operation.

One project is the new Digital Mental Health Gateway being established as part of the Australian Government's mental health reforms. We are working with experts in the mental health sector and the Australian Government to lead the co-design of the Gateway. This includes conducting community workshops and undertaking stakeholder engagement activities to ensure that people with mental illness, their families and carers are connected to the information, services and support they need, where and when they need it.

I would like to thank all the staff of Healthdirect Australia for their outstanding work this year and the Board of Directors led by Patricia McKenzie, the Standing Committee led by Julie Crowe, and Joint Customer Advisory Committee led by Susan Burke, for their guidance and support.

Colin Seery, CEO

OUR NETWORK OF SERVICES

NATIONAL SERVICES

healthdirect



healthdirect
after hours GP helpline



National Health
SERVICES DIRECTORY



pregnancybirth&baby



mindhealthconnect



Carer Gateway



myagedcare



STATE SPECIFIC SERVICES



Get Healthy - **NSW, Qld, SA**



NSW Palliative Care After Hours Helpline - **NSW**



NSW Quitline - **NSW**



Medicines Line - **WA, NT, SA, NSW, ACT, Tas**

Non-occupational post exposure prophylaxis helpline - **WA, SA**

Residential aged care line - **WA**

Ambulance Secondary Triage - **WA, NSW**

Outpatients Direct - **WA**

SA Parenting Helpline - **SA**

The Parent Line - **Tas**



We deliver a range of telehealth and digital health services. These include large scale national services and bespoke local solutions.



Website



Telephone service



Video call



Mobile app



ENHANCING OUR SERVICES

Healthdirect Australia designs and delivers innovative services to provide every Australian with 24/7 access to trusted information and the advice they need to manage their own health and wellbeing.

This year, we have enhanced a number of our services to ensure they remain of high quality, are delivered efficiently and achieve the best outcomes for the people who use them.

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healthdirect provides 24/7 access to health professionals and health information via a nurse triage helpline and a range of online services, to help Australians make more informed health decisions.

Enhancing our online presence

The healthdirect website receives an average of 135,000 visits each week from people searching for health information.

This year we redesigned the healthdirect website to give our visitors a better user experience, through extensive user testing. This informed a cleaner look, simpler navigation, consistency across menus and sidebars to help people find information more quickly, and more prominently displayed content from our information partners.

We understand that when searching for health information, people often want to locate their nearest health professional or service provider. The wealth of information contained within the National Health Services Directory is now more accessible through an updated service finder tool, to make this search easier.

An additional benefit is that Google and other search engines can find these records more easily, and list them higher on search results. Given that nearly 6 million visitors enter the healthdirect website via a search engine, this means we are helping more people find the right service for their needs, when they need it.

A new mobile app

More than 4 million visits, accounting for 50 per cent of all visits to our healthdirect website, are made using mobile devices and there has been a corresponding increase in the use of mobile apps.

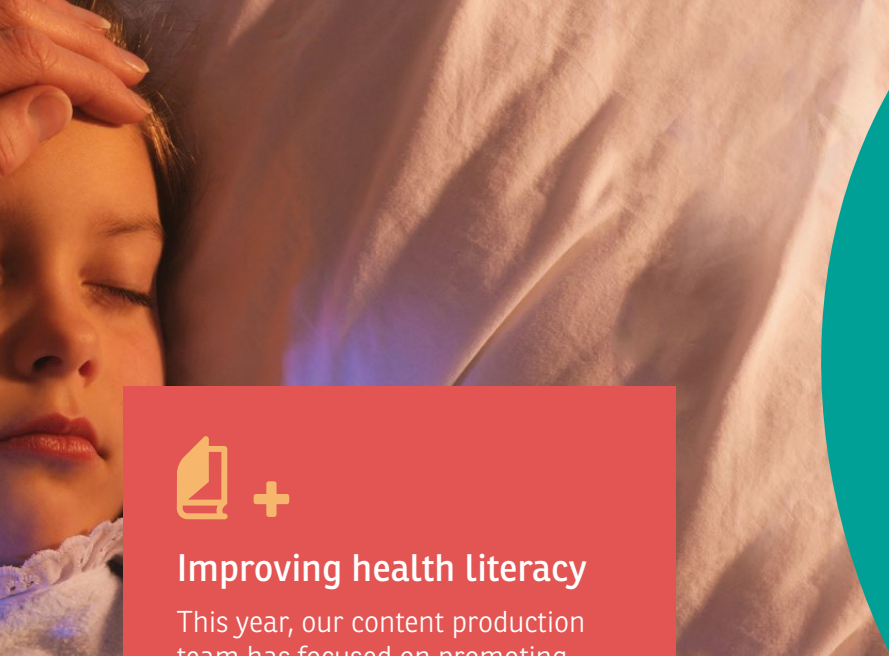
We developed the new healthdirect app to give our mobile audience easy access to our full range of online tools and information via a channel that continues to grow in popularity. The healthdirect app combines information from the website, the healthdirect Symptom Checker and the service finder tool with quick and easy navigation for people on the go. The app has been downloaded more than 22,000 times since it was launched in October 2015.

A seamless experience across channels

This year we upgraded the healthdirect helpline with the launch of a new decision support tool to assist nurses during the triage process, and a new customer record system which streamlines how information is managed. These improvements also enable the integration of the helpline with our online tools.

People who use the Symptom Checker are now provided with a unique reference number at the end of their session which they can provide to the healthdirect nurse if they call the helpline. This allows the nurse to see the questions asked and the answers provided, helping them assess the caller's needs faster.

The healthdirect nurses can also provide callers with additional support by emailing them information from the website about their health concerns, and sending them details of local and relevant healthcare services by SMS. This helps people to better understand their health issue, be easily directed to appropriate health services and promotes more informed decision making.



Improving health literacy

This year, our content production team has focused on promoting health literacy through a range of improvements to how content is organised on the healthdirect website.

For example, more than 7000 pages in the newly developed medicines section are supported by educational articles about how to read Consumer Medicine Information (CMI) leaflets, how antibiotics work, advice on differences between branded and generic medicines, and options for children's medicines.

An anatomy page hosts a selection of articles about how different parts of the body function and links to information about related health concerns. This is an easy-to-use educational tool which is helping children and adults learn about the human body.



Advice given

healthdirect helpline

| | |
|---|-------|
| See a doctor (ranges from immediately to within 72 hours) | 43.5% |
| Emergency department immediately | 17.8% |
| Self-care | 12.9% |
| Speak to telephone GP | 8.3% |
| Activate Triple Zero (000) | 7.7% |
| Other | 9.8% |

“

The healthdirect helpline has been advising callers about their health concerns since 2007, and this year achieved the significant milestone of 6 million calls since inception.”



Top 5 caller concerns

healthdirect helpline

- 1 Previously assessed by a healthcare provider
- 2 Medication question
- 3 Abdominal pain (adult)
- 4 Chest pain
- 5 Head injury



Top 5 symptoms

healthdirect Symptom Checker

- 1 Abdominal pain (all ages)
- 2 Sexual health and lower body
- 3 Rashes and skin problems
- 4 Diarrhoea and vomiting
- 5 Feeling sick or unwell



Top 5 pages visited

healthdirect website

- 1 Symptom Checker
- 2 Bleeding between periods
- 3 after hours GP helpline
- 4 Gastro intestinal illnesses
- 5 How to lower cholesterol



healthdirect

Phillip, Joy and Simon

Phillip often turns to healthdirect when he, or one of his family members, has a health concern, and finds both the helpline and the online tools to be invaluable resources.

"One day I'd had a rash covering my whole body for nearly 24 hours and I wasn't sure if that was okay. I was at work and needed to look up information quickly so I went straight to the healthdirect website and checked my symptoms on the Symptom Checker.

"The symptoms I had led to a recommendation to call the healthdirect helpline, and I called straight away. The nurse thought I needed to see a GP pretty quickly, so I made an appointment for that day. I'd recommend the healthdirect Symptom Checker to other people – it was straightforward, quick and easy, and covered a good range of things you could have trouble with."

Phillip lives with his wife, Joy, and their three year old son, Simon. On one occasion when Simon was unwell and seemed to be getting worse, Phillip called the helpline for advice about what to do.

"Simon had been sick for about three days with what seemed to be a cold, and he had a fever too. One night he woke up around 1am with a really bad hacking cough. We were concerned he was going to stop breathing but we didn't want to take our sick son to the emergency department unnecessarily. I called healthdirect to check if it was an emergency or not.

"The nurse listened to his breathing and checked different things. I explained the background of the last few days and what symptoms he had displayed, and she was fairly confident that he was okay at that time but we should see a GP the next day. She gave us some things to look out for which could indicate he was getting worse. I stayed with him during the night to keep an eye on him and we took him to the GP the next day."

Phillip was impressed by the nurse who handled his call and how thoroughly she assessed Simon's symptoms.

"The nurse was really professional. The way she took the time to listen, double check, and make sure she was getting the right information was really reassuring."

Living in regional Tasmania, Phillip and Joy find the helpline provides them with another option when they need health information or advice.

"If anything happens outside of normal hours the only option apart from the helpline is the emergency department, and that could mean waiting for hours. It saves us time, it saves us a lot of worry and it gets us advice really quickly about what to do. That's pretty invaluable for us."







The after hours GP helpline is an extension of the healthdirect helpline, providing people with access to medical advice and support from a telephone-based GP at night, on weekends and public holidays.

Callers to the service are first assessed by a registered nurse, and based on their symptoms may be given the option to speak with a GP.

This year medication queries continue to be the among the most common reasons people call the helpline, and the most common advice given to callers is for them to manage their condition at home or until they can see a GP in regular business hours.

Supporting people most in need

In response to an evaluation of the effectiveness of the after hours GP helpline, in October 2015 we implemented a revised service model to better support people who do not have access to face-to-face GP services in the after hours period.

There were two major changes to the service – adoption of a call back model, and revised operating hours.

Call back option from a GP

The after hours GP helpline is designed for people who will benefit from speaking with a GP, rather than people who need to see a health professional immediately. In line with this, the service was transitioned from immediately transferring the caller to a GP to a more efficient call back model.

The healthdirect helpline nurse may now offer a call back from a GP within 15 minutes or within one hour, depending on the severity and urgency of the caller's health issue. This change ensures that callers with the greatest need still speak to a GP quickly, and improves the workflow by streamlining how calls are managed.

Revised operating hours

There is a significant lack of face-to-face GP services outside of Australia's major cities in the after hours period. Callers outside major cities can access the service at times when regular GP services are unavailable (on weekdays from 6pm-7.30am, on Saturdays from midday, and all day on Sundays and public holidays).

For callers within major cities, access is available at times when local face-to-face GP services are unavailable and typically the only alternative is for people to attend an emergency department (on weekdays from 11pm-7.30am, on Saturdays from 6pm, and all day on Sundays and public holidays).



after hours GP helpline

Tamara and Kenzie

When Tamara's daughter Kenzie was born, staff at the hospital gave her a fridge magnet with the number of the after hours GP helpline. Living in Kalgoorlie, Western Australia, the number has come in handy more than once for Tamara and her family.

"On one occasion I suspected Kenzie had a urinary tract infection. I called the helpline and the GP called back about 15 minutes after we'd spoken to the nurse. We described the symptoms and the GP advised it was more than likely worms. The GP told us we needed worming tablets and some Panadol to help with her symptoms. I actually had both here at home so we didn't even need to go out to the pharmacy."

More recently, Kenzie hit her head playing with their family dog on a weekend camping trip and Tamara was worried the situation could be serious.

"The dog literally bowled her over and she got knocked onto the hard sand. A few hours later, back at the tent, she wanted to lie down and fell straight to sleep. This was a bit unusual as she doesn't really nap. We went to wake her up an hour later and she was crying to the point of being inconsolable. We let her go back to sleep, but a couple of hours later she woke up screaming, holding her head and saying that it hurts."

"That was a bit terrifying, and I was thinking that something's just not right."

"It was raining, and I had to drive up the road a few kilometres to find phone service. I rang the helpline and told the nurse what had been going on, and the nurse asked if she'd hit her head. When I said yes, the nurse put us straight through to the ambulance service instead of getting the GP to call us back, as she thought we needed to get Kenzie checked out straight away. We met the ambulance when it arrived and took Kenzie to the nearest hospital which was about an hour's drive away in Esperance. She had concussion."

Tamara feels that the after hours GP helpline helps her to find solutions in a remote location with limited after hours GP services.

"Usually you're calling at two or three in the morning, feeling helpless, because the normal things aren't working, or your child's just not at an age when they can tell you what's wrong. If you can describe the symptoms to someone on the line and they can help you figure out what to do, then it gives you more confidence and makes you feel calmer."

"It makes a massive difference to our lives because we're really lacking services living this remote."



Advice given

after hours GP helpline

| | |
|---|-------|
| Self-care advice and see a doctor/health provider within normal operating hours | 56.1% |
| Self-care at home | 14.8% |
| See a GP immediately | 13.8% |
| See a GP immediately (no GP available - go to emergency department) | 7.5% |
| Emergency department immediately | 6.4% |
| Other | 1.4% |



Top 5 caller concerns

after hours GP helpline

- 1 Rash
- 2 Abdominal Pain (adult)
- 3 Vomiting
- 4 Medication questions
- 5 Colds and flu



Australian Government



myagedcare

My Aged Care is the gateway to the Australian aged care system. Its purpose is to make it easier for older people, their families and carers to access information on ageing and aged care, have their needs assessed and to be supported to find and access aged care services.

Healthdirect Australia works with the Australian Government Department of Health to deliver key components of the My Aged Care gateway. We manage the My Aged Care website and contact centres, and contribute to the provision of information to consumers and their representatives as well as client registration and screening.

Service improvements

In July 2015, My Aged Care significantly expanded and the contact centres began registering and screening clients to determine their eligibility to be assessed for aged care services. This led to a higher than expected demand for My Aged Care services and higher than forecasted incoming calls and correspondence. In collaboration with the Department of Health, we have worked to ensure people who use My Aged Care receive timely support by increasing our capacity to manage the demand for service and continuously improve processes.

As well as the existing contact centre in Box Hill, Victoria, a new contact centre opened on the Gold Coast, Queensland on 1 July 2015. This saw the call handler workforce expand to more than 300. By August 2016, the number of call handlers will have increased to more than 480, as a third contact centre is established in Wollongong, New South Wales.

The contact centres use a nationally consistent screening process to ensure equitable access to Commonwealth Government-funded aged care services based on a person's needs and eligibility. This year we have implemented a more efficient screening process which reduces the number of questions clients answer, and enables trained call handlers to confidently make more informed decisions based on information provided by clients, leading to better care outcomes.

In February 2016, Aged Care Assessment Teams (ACATs) began using My Aged Care to conduct comprehensive assessments for people who have more complex care needs and may require a coordinated care package to remain in their homes or are considering moving into an aged care facility. This change means that assessments for Commonwealth Government-funded services are now streamlined through My Aged Care in all states, except Western Australia.

In partnership with the Department of Health, we have been working hard to ensure a high level of service is delivered through My Aged Care. This year, overall customer satisfaction with the services provided by the contact centre was 96 per cent.

Website enhancements

The My Aged Care website has been significantly enhanced through new tools and functionality.

A fee estimator has been added to the website to help people estimate the costs of some Commonwealth Government-funded services. The service finders have also been enhanced to enable people to find and compare service offerings and pricing information about Commonwealth Government-funded aged care services. The service finders have also been expanded to include information about some privately available services through the National Health Services Directory.

“

"The continued evolution of My Aged Care aligns with wider reforms in the aged care sector which streamline the system and make connecting people to services simpler."



Managing demand

My Aged Care services have been in high demand this year



The contact centre has handled more than **1.2 million contacts**



The contact centre has screened more than **344,000 people** to determine their eligibility for aged care services



The contact centre team has grown from **165** to more than **300 full-time employees**



The website has received more than **1.4 million visits** which is an increase of 24 per cent on traffic from the previous 12 months

Content on the website has been reviewed and enhanced. There is additional information about quality indicators in residential aged care facilities, integrated health and aged care services in small rural and remote communities, and new content about home support assessments. By providing people with easily accessible information, the website helps empower people to make informed decisions about their care.



Top 5 pages visited

My Aged Care website

- 1 Find a service
- 2 Make a referral
- 3 Aged care homes (nursing homes)
- 4 Help at home
- 5 What help can I get?



Top 5 caller concerns

My Aged Care helpline

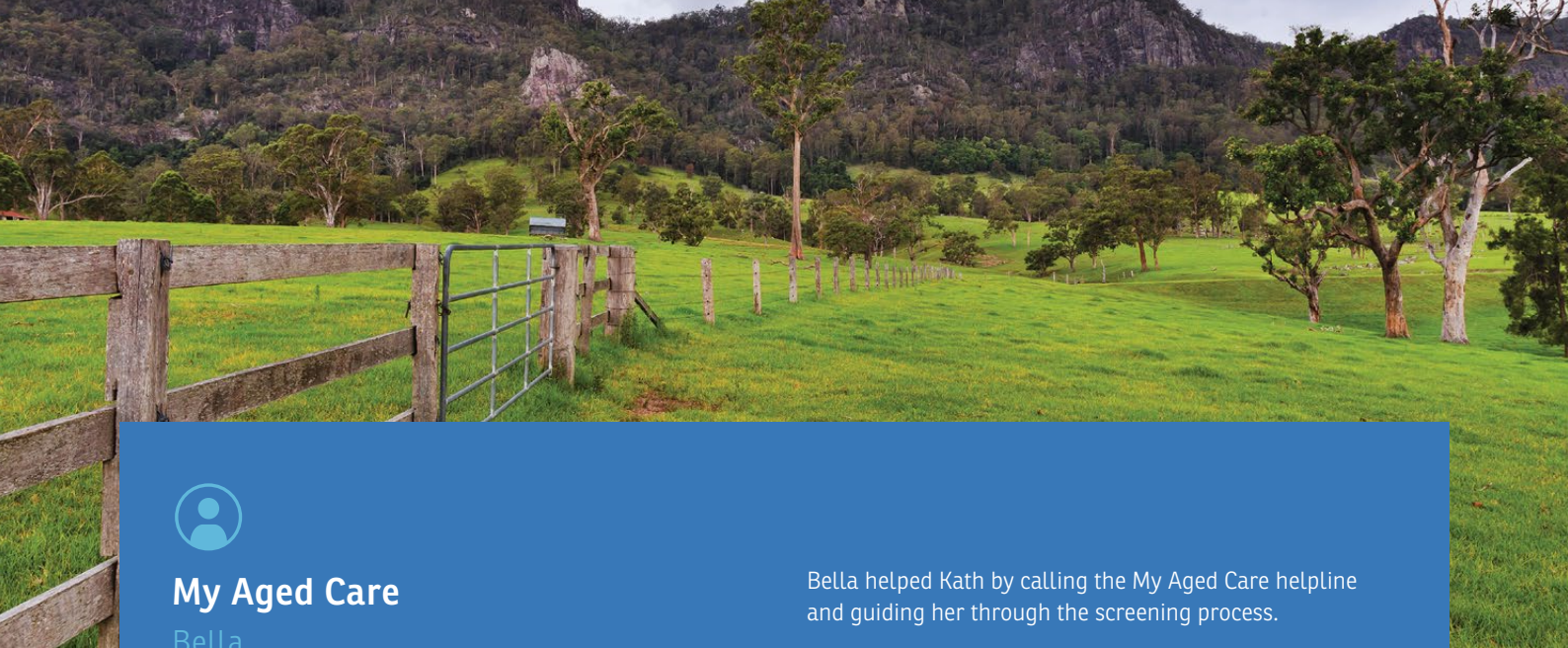
- 1 Community based care information
- 2 Financial assessment
- 3 Accommodation
- 4 Community based care
- 5 Care fees and charges



Top 5 enquirers

My Aged Care contact centre

- 1 Existing client
- 2 Family/friend/carer of existing client
- 3 Service provider
- 4 General public
- 5 Assessor



My Aged Care

Bella

Bella* lives in rural NSW and sometimes helps her older friends contact aged care services, because she knows it can be daunting for them to ask for help when they need it. Before My Aged Care, Bella found it could be very difficult for herself and others to navigate the aged care system.

"I have an older friend, Betty*, who sustained a serious fracture about seven years ago. When I asked what help she was getting at home, she said 'none'. She was having trouble getting through to someone on the telephone and just gave up. It took me three weeks of persistence to actually talk with someone about getting her some care, and it was a little while after that before we were able to get things started."

This year, Bella helped another friend of hers, Kath*, as her health was deteriorating and she needed some assistance to be able to stay in her own home.

"Kath lives alone and was becoming sicker over time. Her mobility is limited, and she had developed some serious circulation problems. They weren't getting better, so I took her to see a local GP. We talked about the assistance Kath needed to be able to manage her health issues and stay in her own home, and I took some brochures about the My Aged Care service.

"Kath was initially resistant, but I printed out a lot of information from the My Aged Care website for her to read. The information helped her to realise she was eligible for these services and they would allow her to stay at home as long as she could."

Bella helped Kath by calling the My Aged Care helpline and guiding her through the screening process.

"The person on the other end of the phone was very respectful, and asked Kath's permission for me to answer questions on her behalf. My being the intermediary helped - if she'd been asked herself what her mobility was like, she would probably have said 'I manage really well' when her movement is actually seriously restricted. At the end of the call we were given a reference number and referred for someone to come and assess her for home care."

Shortly after the initial call, Kath had to go to hospital for surgery and Bella was able to give the reference number to the team at the hospital who were looking after Kath. They worked with My Aged Care to arrange an assessment for at home care when Kath left the hospital.

Bella has been impressed by the way the system works now that things are centralised, and feels it's much easier to get help than before My Aged Care was available.

"I think things have significantly improved. It was a completely different experience using My Aged Care, and from that one phone call everyone swung into action. I've told other people about the service - it was a brilliant starting point because it opened all the doors."

*names have been changed for privacy reasons.



“

“Website visits to Pregnancy, Birth and Baby tripled compared to the previous year, with almost 3.5 million people visiting the site.”



pregnancybirth&baby

Pregnancy, Birth and Baby is a national telephone, video call and website service that supports expecting parents and parents, families and carers of children aged up to five years.

The service offers free, non-judgemental advice, guidance and emotional support on a wide range of pregnancy and parenting topics, while also providing referrals to local health services when necessary.

Service progress

Customer satisfaction with the service is extremely high at over 97 per cent. This is a seven per cent increase in satisfaction level on the previous year.

The level of guidance and advice provided via the telephone continued to be reported as the main reason for caller's satisfaction with the service, with 26,000 calls handled in total this year.

More than half of callers continued to nominate the telephone service as their likely first point of contact for a similar query in the future, and about a third nominated the website.

The telephone, video call and website all complement one another, with staff at the contact centres referring people to the website for additional information, and the website offering visitors the option to use the telephone or video call service if they require it.

Recent enhancements

In December 2015 maternal child health nurses began answering the telephone and video calls, replacing customer service operators. This change was a result of extensive consumer research and evaluation involving service users and health professionals.

This enhancement to the service now means that parents and family members caring for a child receive advice from health professionals qualified in child and maternal health when they call the helpline.

When first launched in 2010, Pregnancy, Birth and Baby catered to pregnancy and parenting of children up to 12 months only. This year, the service was expanded to cater to the needs of parents, carers and families with children aged up to five years.

Website content in the last year has also increased significantly to cover a wide range of new topics from pregnancy through to preschool years. One example is a new section which provides information on healthy, nutritious and balanced eating for children and outlines ways to encourage good eating habits.

In May 2016 the video call service was enhanced, meaning that people can now make video calls from iOS 9 and above devices (iPhone and iPad), which was not previously possible.

Parents on the go

Our data from the last year has shown that more than 82 per cent of visits to the Pregnancy, Birth and Baby website come via mobile or tablet devices. Mobile visits totalled 75 per cent and tablet visits seven per cent, while just 18 per cent of visitors arrived to the site via a desktop computer.

As Australian parents become more connected and mobile, it is clear that the preference for accessing services on the move will continue to rise.



Australian parents reveal insights about their child's behaviour and development*

Who do they turn to for parenting advice?

- 1 friends
- 2 family
- 3 health professionals

Top concerns for parents



Sleep



Behaviour
(biting, hitting, tantrums)



Reaching milestones
(crawling, walking, talking)

Barriers to seeking advice



1 in 3: fear of feeling judged or seen as a failure



More than 50% of parents compared themselves or their child's progress unfavourably with others

* Pure Profile, March 2016. Online survey of 1,016 Australian parents. Commissioned by Healthdirect Australia, conducted by Pure Profile.



Top 5 caller concerns

Pregnancy, Birth and Baby helpline

- 1 Crying / unsettled baby
- 2 Breastfeeding
- 3 Baby development - birth to four months
- 4 Illness (Minor) in a baby/toddler or pre-schooler
- 5 Constipation



Top 5 topic pages visited

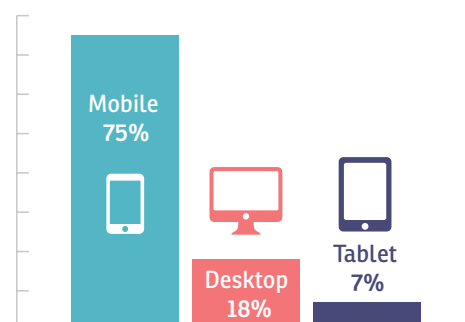
Pregnancy, Birth and Baby website

- 1 Due date calculator
- 2 Foods to avoid when pregnant
- 3 hCG (human chorionic gonadotrophin) levels
- 4 Braxton Hicks contractions
- 5 Labour – the signs and stages



Website visits by device

Pregnancy, Birth and Baby website





Pregnancy, Birth and Baby

Annaleise and Evander

When new Melbourne mother Annaleise first fell pregnant she immersed herself in whatever online resources and information were available for expecting mothers and parents. She also attended lots of exhibitions and shows on parenting and children.

Pregnancy, Birth and Baby came up time and time again in her research and from picking up a few of the service's promotional magnets at events, the brand and its number embedded in her mind. Annaleise became used to looking to her fridge for the number when she had questions to ask about her pregnancy.

"The helpline gave me the reassurance I needed at that time and I got used to using my phone to google the number when I was out and about also."

After a traumatic birth that left Annaleise in intensive care for a week, she turned to the service within a few hours of bringing Evander home and has continued, along with her husband, to call on its maternal child health nurses ever since.

"I had just spent a week in hospital, where I couldn't spend time with my baby and I got home and thought 'what do I do here'.

"The service really calmed me down in those early days and hours. They helped me through, not only trying to deal with the birth trauma that I had, but also the classic case of post-natal depression I suffered."

Annaleise found that the video call option Pregnancy, Birth and Baby offered was of most benefit to her as specific occasions called for her to be able to show a health professional a problem.

"I think the first time I used [video call] it was to do with breastfeeding. Since the nurses could see Evander and observe his latch from the other side of the screen, they could give me some pointers and that really helped to boost my confidence.

"Another time, they were able to see Evander's distress cry was more than just him being fussy and their advice to seek medical assistance was life-saving."

Annaleise credits the service with helping her figure out that Evander's lack of weight gain could be more than just the type of feeder he was.

"The midwives encouraged me to really investigate why Evander wasn't gaining weight properly. He had dropped below the second percentile and was sickly looking.

"When he was eight weeks old we found out that he had a tongue tie and so had been practically starving. The service helped me get connected to the help and support I needed and Evander is now a 9.5kg baby, having jumped to the 75th percentile. He's wonderfully healthy, happy and super alert."

Annaleise and her husband find the accessibility of the service and gentle nature of the nurses the most inviting aspects of Pregnancy, Birth and Baby.

"We call in the middle of the night or the middle of the day and have never had a bad experience in using the phone or video service. They make it easy to understand and follow their advice and I feel confident in mothering Evander because of that advice."



National Health
SERVICES DIRECTORY

The National Health Services Directory is the foremost source of comprehensive, reliable and accurate information about Australian health and related services. The directory supports national digital health services by providing a foundation for finding and sharing health information simply and securely.

Enabling electronic communication

A core focus of our work this year has been enhancing the ehealth capabilities of the directory to enable patient referrals, discharge summaries, event summaries and other health information to be sent electronically.

We have developed the National Endpoint Proxy Service (NEPS) which acts as the national address book for digital health, and is a core component in sending health information electronically to the correct location securely. This year we have worked closely with the National E-Health Transition Authority (NEHTA) and our government shareholders to enable the use of this functionality across the Australian health system.

Enhancing directory content

This year, we added almost 25,000 new service provider listings to the directory. Half of these were for the launch of Carer Gateway – more than 12,500 Commonwealth-funded service providers were added to provide carers with an accurate list of local services they are eligible to access. Information about carer services already contained in the directory was expanded and extensive work on the website service finder tool, which draws information from the directory, was completed prior to launch to ensure all new content fields displayed correctly.

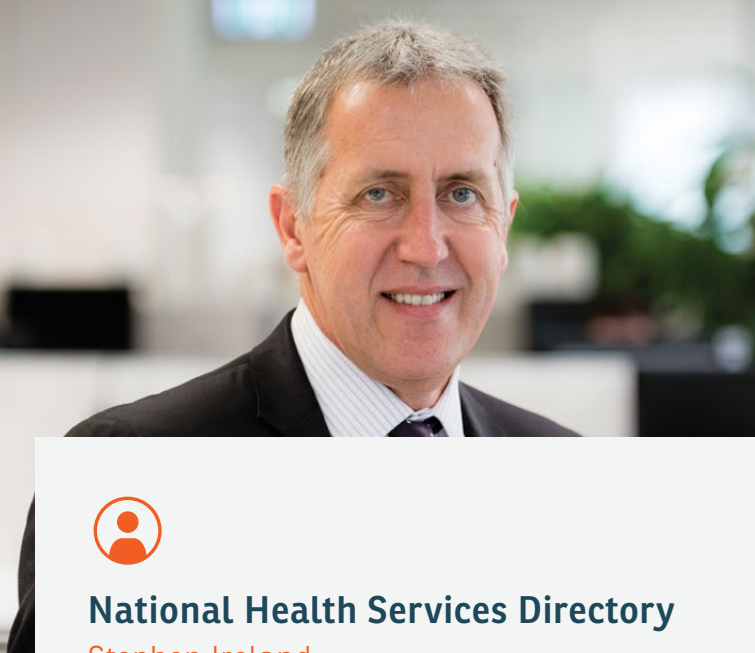
Our Pregnancy, Birth and Baby service was enhanced this year, and 1800 more service providers were added to the directory to support this. With the launch of the NSW Palliative Care After Hours Helpline, specific service providers were added to the directory so that call handlers can make referrals to them.

We are constantly working to expand the directory content to support our services, government policy focus areas, and to align with the needs of peak health bodies and health professionals.

Improving access

This year we launched a redesigned directory content management system to provide a better experience for people managing their own service provider records and to give the user interface a cleaner look and feel, with improved navigation. More than 9500 service providers across the country manage their own listings through the content management system.

We enhanced how directory content is accessed in the delivery of some of our services, including the healthdirect helpline. Call handlers can now provide greater levels of detail to support people in making decisions about where to go for assistance to manage their health concern.



National Health Services Directory

Stephen Ireland

– ehealth Project Manager

This year, together with Queensland Health and NEHTA, we have been testing the use of the directory for electronic communication of health information between hospitals and general practices (GPs) in Queensland.

"Queensland Health is moving towards electronic healthcare management. We've been working to support this transition, using secure messaging delivery to transfer patient information.

"Different organisations contribute different parts of the secure messaging delivery system. The directory is an important part because it stores the information about the GP's electronic address. We've also developed NEPS which makes this information accessible to other systems. If you can't find the address you can't contact the GP, so our part is integral to everything."

While the concept is simple, the execution has been complex. Work has focused on securely sending a patient discharge summary from a hospital to a patient's GP. This requires more than ten different software systems to communicate with each other to create, address, send and acknowledge a message containing this information.

"We've been working with Queensland Health and NEHTA to set up test versions of all of the other software systems involved in communicating the message between the hospital and the GP. In April 2016 we successfully sent a test message through the whole system for the first time, and received the acknowledgement back from the GP that the message was received securely.

"This has been a significant piece of work, and it's an important part of the national digital health infrastructure."

The advantages to the health system of the secure messaging delivery system will be significant.

"There will be a huge range of benefits once this system is implemented, including more immediacy of health information at the point of care and less duplication which will ultimately provide better care for patients."

“

"This has been a significant piece of work, and it's an important part of the national digital health infrastructure."



5.5 million transactions are made using the directory every month



More than **145,000 service providers** are listed in the directory



80,000 individual practitioners are listed in the directory



65 external organisations host a directory service finder application on their websites



Get Healthy Information and Coaching Service is a free, confidential and motivational coaching service offered via telephone. Healthdirect Australia manages the service for New South Wales, Queensland and South Australia.

With an accompanying website, the service supports people to make lifestyle changes around healthy eating, physical activity and maintaining a healthy weight. The aim is to assist people as they make sustainable lifestyle choices and reduce their risk of developing chronic diseases, such as diabetes and heart disease.

Since we started managing the service in 2014, more than 14,000 people have participated in the program. The service has recently lowered the age for participation to cater to people 16 years and over so a greater number of Australians can benefit from the service.

Significant investment goes into the ongoing evaluation and quality improvement of the service and systematic reviews have confirmed that telephone-based interventions are effective in increasing physical activity, improving nutrition and reducing body weight.

In New South Wales in particular, the addition of several new aspects to the service over the last year has meant more and more people are making lifestyle changes that benefit their overall health.

Get Healthy, Stay Healthy SMS

Introduced in June 2016, Get Healthy Stay Healthy SMS is a text message service that provides program graduates – those who have completed six months of telephone coaching calls – with an opportunity to receive an additional six months of tailored messages to their phone, to further support them to achieve their healthy lifestyle goals.

This service option is based on research that shows how effective ongoing SMS support is in reducing the likelihood of relapses in eating healthily, taking part in physical activity and maintaining a healthy weight.

Alcohol Reduction Program

Designed for participants who want to reduce their alcohol consumption to reach or maintain a healthier weight and achieve a healthier lifestyle, the Get Healthy Alcohol Reduction Program assesses a participant's level of drinking risk and provides support and motivation in reaching a reduction goal.

Coaches use the Alcohol Use Disorders Identification Test (AUDIT) – an internationally validated screening tool – to screen for alcohol risk. Participants receive 10 health coaching sessions and an information book about appropriate alcohol intake, an alcohol facts booklet and an alcohol journey book to keep a record of their progress.



Get Healthy in Pregnancy Program

Supporting women to achieve and maintain a healthy weight during pregnancy, the Get Healthy in Pregnancy Program provides information and telephone coaching with advice on healthy eating and ideas on staying active. The program can help foster healthy changes that benefit an expectant mother with information and coaching complementing the antenatal care received from their GP, midwife or obstetrician.

Program members get 10 health coaching sessions, a journey book to record progress as well as related factsheets about pregnancy.

Other programs

In addition to the Alcohol Reduction and Pregnancy Programs, Get Healthy also offers two other tailored programs, one for those at risk of developing type 2 diabetes and another that supports the needs of Aboriginal and Torres Strait Islander peoples.

For the second year running, the Get Healthy Service formed an integral part of the NSW Healthy Towns Challenge, in which five rural towns from across the state competed to win the Challenge. The winning town is the one that collectively achieves the highest total weight loss and participation (calculated on the number of people registering for the Get Healthy Service proportional to the size of the town) and implements the most innovative and sustainable place and policy based initiatives in their town.

Get Healthy is also a key program within the NSW Knockout Challenge, to promote healthy lifestyle. The NSW Knockout Health Challenge is a fun and exciting program that encourages and motivates Aboriginal communities throughout NSW to reduce their risk factors for chronic disease. In the first challenge of 2016, there were 32 teams and approximately 800 entrants in the George Rose Challenge.



Get Healthy

Parminder

Parminder was struggling with his weight and after hearing a Get Healthy Service advertisement on the radio he immediately signed up.

"I'm a family man with a two-year-old and a partner and we love to eat out. At no stage did I want my health issues to affect my family."

With the help of the program and his health coach, Parminder lost 17 ½ kilograms by setting realistic goals every week. He admits he still indulges with Indian food but now understands the importance of a balanced diet and a healthy lifestyle. Rather than miss out, Parminder now cuts back on portion sizes and when he feels like he has indulged too much he often increases his fruit intake to flush out his system; a piece of advice from his health coach.

Since losing the weight, Parminder is amazed at how much energy he has.

"For the first time in my life I realised how active and energetic I was."

Eating healthily, exercising regularly and enjoying life with newfound energy have now become part of Parminder's everyday life. He exercises four to five times a week without the aid of a trainer and has even motivated his wife to start running. Together they both understand the importance of setting a positive example for their two-year-old daughter and they spend more time outdoors in the park.

Parminder has happily had to change his whole wardrobe now that his clothes are so baggy.

Case study courtesy of NSW Office of Preventive Health, NSW Health





INTRODUCING NEW SERVICES

Healthdirect Australia has been working with our government shareholders to develop and deliver health and related services for a decade.

Our approach to service development is based on agile methods. This allows us to improve our services frequently, respond quickly to changes in technology or government policy and, most importantly, adapt and scale our services to the needs of the people who use them.

This year, we have used our expertise and experience to implement a number of new services.

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Carer Gateway provides information about the services and support available for people who care for someone with a disability, chronic illness, dementia, mental illness or frailty due to age.

The national service consists of a website and telephone contact centre, and is managed by Healthdirect Australia on behalf of the Department of Social Services.

The service launched in December 2015 and is the first step in the Government's wider reform program to recognise, support and sustain the vital work of unpaid carers.

Service design

The design of the service was based on extensive consumer research and user testing. More than 1000 people including carers and carer organisations informed the development of the service, with the expert guidance of the Carer Gateway Advisory Group.

This research, carried out by Australian Market Research (AMR) was one of the largest analyses of carers carried out in Australia in recent times.

Prior to the launch of Carer Gateway, carers were accessing information via different pathways across disability, mental health and aged care sectors which were not designed to specifically support carers.

Now, carers have a designated information service which supports them to navigate through the resources available. Carer Gateway provides information about services and support for carers and can assist them in every stage of the carer journey.

Service development

Research showed most carers rely on mobile-based online access so we designed the website with a mobile-first approach whereby it adapts to all device sizes.

A powerful search function means getting information on the website is efficient and simple. Content hub pages group information about aspects of caring together. These features guide carers to the information and support they need without onerous browsing.

Carers can also search for local services with the 'Find a service' feature. More than 16,000 services are searchable from the Gateway, for a variety of needs from respite to support groups and counselling.

In addition to the website, carers can call Carer Gateway Monday to Friday between 8am and 6pm and speak to a professional Australia-based team who can help with information and provide links to services.



Carer Gateway

Greg and Lyn

NSW Central Coast resident Greg began caring for his mum, Lyn, in 1999 and has been her full-time carer for the past six years.

Initially, Greg says he did not realise he was a carer and did not identify with the title in relation to the support and assistance he was giving his mum.

"I was providing support such as taking mum to her GP and specialist appointments along with social outings and activities, plus cooking, cleaning and other household duties. I began to become more aware that the support I was providing was in line with that of a carer."

As a result, Greg became more proactive in his responsibilities and he began advocating for carers, particularly other men, who typically don't acknowledge or realise that they are a carer.

"Men can sometimes feel it's a sign of weakness to ask for help or admit that they are a carer. They don't always realise that they are in the role."

In accessing information and support about being a full-time carer, Greg found the experience overwhelming to begin with – particularly with the volume of information and paperwork to sort through and complete.

Greg has used Carer Gateway and believes it is a useful service to help carers navigate through the information and services they can access.

"To have a service that's one place for carers to go to get information they need that's specific to them, and get pointed in the right direction from there, is something carers have needed for a long time."

In particular Greg has found the videos featured on the website a great help, since they are easy to understand and act as a resource for people who are better suited to visual learning aids. The content the website offers on carers caring for themselves is something Greg also uses.

"I think it's really important that carers are more proactive with their own health and wellbeing. I have definitely taken that information on board."



AMR research findings:



30% of carers are aged
40 – 54 years



Carers are significantly time poor, spending
on average **4.4 hours per day** caring



53% of carers are female,
47% are male



54% of carers are the
only person providing care



Most carers are in paid employment.
Only 10% receive a carer's payment



Nearly **80%** of carers do not
see themselves as a carer

“

“More than 70 per cent of Australians say they want to be cared for and die at home yet only about 16 per cent do, which is why the NSW Government is committed to helping people stay at home for as long as they can.”

NSW Health Minister the Hon. Jillian Skinner



NSW PALLIATIVE CARE AFTER HOURS HELPLINE

The NSW Palliative Care After Hours Helpline provides advice and support for palliative care patients, their carers, families and health professionals.

Healthdirect Australia began operating the helpline in March 2016. It supports the NSW Government's plan to ensure everyone has access to quality palliative care and was officially launched by the NSW Minister for Health, the Hon. Jillian Skinner, during National Palliative Care week on 27 May 2016.

Key features

Providing after hours access to information and assistance is vital in supporting patients who choose to remain at home as their end of life approaches.

Callers speak with a registered nurse with training in palliative care. The registered nurse provides a first line of care while a specialist palliative care nurse with expert knowledge, skills and recent experience in palliative care provides advice and support to callers with more complex issues.

The helpline supports palliative care patients by providing information, psychological support, symptom management, referrals to service providers and appropriate crisis intervention during the after hours period. After each call a summary is sent to the patient's specified palliative care provider to keep them informed of their patient's situation. The summary includes the reason for the call and the advice provided.

Ensuring consistently high quality of care

A person who is at the end of their life deserves to be treated with dignity and respect, so it is important that the quality of our service is always of an extremely high standard.

During establishment of the helpline we consulted with palliative care representatives from Local Health Districts (LHDs) for input and advice.

Clinical governance of the helpline is informed by a Service Improvement and Development Committee (SIDC). This committee includes clinicians from rural and metropolitan areas who help to ensure the service is providing appropriate advice and support to complement existing palliative care services available during the day.

We have implemented workflows which support NSW Ambulance Palliative Care Plans, by encouraging palliative care providers to give their patients the information they should provide to the helpline about their care plans. Callers who have care plans can then be provided with advice, support and referrals to services which are directly aligned with the wishes expressed within them.



NSW QUITLINE

NSW Quitline is a free, confidential and individually tailored telephone service which helps minimise the harm tobacco causes to people and communities within NSW. The 2014 NSW Adult Population Health Survey estimates that 15% of adults in NSW smoke tobacco regularly, and the NSW Quitline aims to assist those in this group who want to quit smoking.

This year, Healthdirect Australia began managing the NSW Quitline on behalf of the NSW Government and the Cancer Institute NSW.

NSW Quitline is staffed by professional counsellors, known as Quitline Advisors, who help people stop smoking by developing personalised quitting plans with them. Quitline Advisors also discuss strategies for managing withdrawals and cravings, offer information about medications and products to assist with quitting, and recommend local support services.

To ensure the service meets the needs of multicultural communities, callers can access Quitline Advisors who speak English, Arabic, Chinese and Vietnamese. Telephone interpreter services can be arranged for most other languages. Aboriginal and Torres Strait Islander people have the option to speak to an Aboriginal Quitline Advisor, who provides culturally appropriate strategies and links people with their local support services.



Delivering a better service

NSW Quitline had been in operation for more than 20 years when the NSW Government and the Cancer Institute NSW engaged us to manage a tender process and oversee ongoing delivery of the service. Our aim was to ensure NSW Quitline continued to be delivered to the community in the most efficient and effective way.

Initially we evaluated the existing service model, researched best practice quit smoking methodology and designed a new set of measurable service requirements which embedded processes considered best practice. These steps informed the tender process and determined how potential vendors were evaluated.

Our expertise in strategic sourcing and contract management ensured the tender process was robust and transparent. It was overseen by a tender evaluation panel which included Cancer Institute NSW representatives, industry experts, researchers, and internal specialists in procurement and clinical governance.

The tender process was completed in September 2015. We launched the revised service model in February 2016, with a seamless transition ensuring the customer experience was uninterrupted. Detailed and measurable service requirements give us guidelines for continuous service evaluation and improvement.

Since we launched the revised service model, more than 6000 people have called the service.

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"The benefits of telehealth are clear: improved communication between clinicians and patients, with less travel time and associated cost to families."



Accessing healthcare is a challenge for many people. Living in rural areas can mean a health professional is hours away, people may have restricted ability to travel, or they can simply be time poor.

We developed healthdirect Video Call, a purpose built suite of secure services and web-based software, to support Australians to access care from their home, work, or wherever is most convenient.

This year we have undertaken a number of projects to support healthcare providers to offer video call access to their services as a normal part of their day-to-day operations.

NSW Ministry of Health

The Ministry is funding the implementation of Video Call in Local Health Districts and Specialty Health Networks, in conjunction with Primary Health Networks and primary care practitioners, with a view to embed telehealth as 'business as usual' throughout NSW health services.

We provide support to these organisations to understand their requirements for video access to services, and work with them to ensure they have the correct staff, training and systems in place to implement Video Call.

By working in partnership with us to bring the many benefits of telehealth to people across the state, NSW Health is improving access to services and putting the consumer at the heart of service delivery.



Looking ahead

Over the next 12 months we aim to expand the use of Video Call across other jurisdictions, including Western Australia, where a pilot is underway to enable video call access for outpatients of the Princess Margaret and Royal Perth Hospitals.



Between October 2015 and June 2015, there were more than **4000 calls**:



More than **200 service providers** using Video Call



Combined total of **1861 hours**, or **77 days** of calls



Average length of call is **26 minutes**



Western NSW Local Health District

Scott McLachlan – Chief Executive

Scott McLachlan is the Chief Executive of Western NSW Local Health District. He explains how Video Call is being used in Western NSW to improve access to specialist services.

"Our Telehealth Strategy is delivered through Healthdirect Australia's Video Call platform, allowing clinicians to link easily into general practice and our patient's own devices. This fits in really well with our Integrated Care Strategy and new models of care being introduced to contribute to improving the health outcomes for vulnerable communities, especially Aboriginal communities."

Video Call is being used by a range of services in the District, including the Orange Pain Service which recently won the Integrated Care section of the Western NSW Health awards.

"Orange Pain Service was one of our early models of care, commenced in partnership with the Agency for Clinical Innovation (ACI). It was formally evaluated as part of the introduction of pain services across the state and received

overwhelmingly positive feedback from its patients.

"Another example is Psychology. Mental Health is using Video Call to link into patients' own devices. This is allowing patients to be supported back into the community after they have been discharged from Bloomfield Hospital."

Scott says feedback from both patients and clinicians has been extremely positive.

"The benefits of telehealth are clear: improved communication between clinicians and patients, with less travel time and associated cost to families. Another unexpected benefit is the ability for clinicians to integrate into a range of services, creating partnerships to deliver care that would have been impossible without telehealth.

"Everyone is beginning to see the possibilities that the technology brings as we explore new and innovative ways to use telehealth to deliver clinical care."



Better Health Care Connections (BHCC) - Resident GP Video Connect

Western NSW Primary Health Network

Rekha Pillai – Aged Care Coordinator

Rekha Pillai is the Aged Care Coordinator for the BHCC project, which uses Video Call to support older Australians with complex health needs in three residential aged care facilities in Broken Hill. This project is delivered by the Western NSW Primary Health Network and funded by the Australian Government.

"The aim of our partnership with Healthdirect Australia is to use Video Call to provide a secure and technically stable platform for general practitioners (GPs) to provide video consultations directly to residents in the nursing homes.

"The facilities have been provided with Sony Xperia Z4 Android tablets (compatible with Wi-Fi and 4G) along with bluetooth keyboards. The residents connect to their own GP in an online clinic and are placed in a waiting area until the GP joins the video call and the consultation begins."

Rekha says the project has brought benefits to residents, their families and staff at the facilities.

"Residents are able to see their GP with minimum disruption to their routines and reduced need for transport. It is also easier for families and carers to be part of the consultations.

"Staff at residential aged care facilities are time-poor and video consultations, being quicker and easy to set up, make their jobs easier and support them in ongoing care for the residents.

"In its next phase, the project will allow increased access to allied health and specialist support services as part of residents' multidisciplinary care provisions. We are also keen to work with Healthdirect Australia to further explore opportunities to develop Video Call to cater to business needs and ensure better outcomes for all involved, particularly our residents."

Photo Credit: Michael Hughes



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“This year we have expanded our capacity in this area, working with a second service provider to establish their capability to provide health emergency and information lines.”

RESPONDING TO PUBLIC HEALTH EMERGENCIES

We use our national infrastructure, clinical expertise and experience to support governments in their responses to health emergency situations.

From dedicated helplines that can be made available in a matter of hours, to utilising our digital services, we can develop responses within short timeframes, and have the ability to offer a registered nurse provided service where clinical assessment of symptoms is required, or a contact centre service to manage general health information.

Dental service

We worked with the NSW Ministry of Health in July 2015 to establish a health alert line to provide information to the public after issues with the infection control processes were identified in two dental practices.

We provided a specific telephone number that patients of these practices could call to find out if they were at risk of contracting a blood borne infection. Callers were also able to ask questions about the issue or be directed to specific contacts if they had additional queries. More than 1000 calls were handled on the first day the information line was available.

The helpline was reactivated on two other occasions when additional at-risk patients, and a third dental practice with infection control issues, were identified.

Cannabis trials helpline

The NSW Government has developed a clinical trials program to explore the use of medicinal cannabis in providing relief for patients suffering from severe paediatric epilepsy, chemotherapy-induced nausea and vomiting, and for people with terminal illnesses.

We established an information helpline to support a series of announcements the NSW Government is making for this program. This included providing a single number people could call to get further information, and input into the training for the customer service advisors who answer the calls.

Websites

Our websites can be used to provide timely and reliable health information and can link people to appropriate sources to access more information and advice.

One example is the Zika Virus outbreak in early 2016. As the issue became more prominent in the media, we monitored the information provided by the World Health Organization, Australian Department of Health and other international agencies, and created new, consumer-friendly information on the healthdirect and Pregnancy, Birth and Baby websites. This was kept up to date as understanding improved about how the virus was transmitted and travel information was updated by Australian authorities.

PARTNERSHIPS

Building partnerships is integral to our work at Healthdirect Australia. This year, we have partnered with a broad range of organisations across health, ageing and social service sectors to achieve our vision of helping people manage their own health and wellbeing.

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CONSUMER ENGAGEMENT



We work with a diverse range of stakeholders to develop and continuously improve our services. The most important group of all is consumers – the people who use our services. We use a range of consumer engagement mechanisms to ensure our services are meeting the needs of the communities they are intended to serve.

Research

We undertake consumer research activities to gain insights into the needs of the people using our services. The findings help us determine what we can do to best meet community needs, increase customer satisfaction, and improve the quality of our services.

One example is My Aged Care. Along with the Department of Health, this year we commissioned research to measure the current levels of awareness of the My Aged Care brand, and to investigate current experiences and perceptions of the aged care system with care recipients, carers and professionals working within the new gateway system.

Input into service development

We engage with consumers to inform both the initial development of our services, and iterative improvements after launch.

During product development, our digital services are tested through both formal usability testing, and with more rapid 'pop-up' testing. This consistent focus on the end user is aligned with best-practice digital development, as well as the goals of the Australian Government's new Digital Service Standard. The testing helps us improve aspects such as ease of navigation, comprehension, and whether we are conveying key messages.

In 2015–16, usability testing provided vital insights for several projects, including the launch of Carer Gateway and redesign of the healthdirect website.

All of our digital services are tested for Web Content Accessibility Guidelines (WCAG) compliance to make sure they are accessible for people with disabilities.

Feedback

This year, our clinical governance team responded to more than 1000 requests for health information and the provision of feedback received through our website 'contact us' pages, online surveys, telephone contact and social media.

Consumer enquiries about health issues are clinically reviewed and referred to appropriate primary health options and relevant information on our websites or our information partner websites.

Consumers who offer a complaint, compliment, enquiry or suggestion are contacted directly to review their feedback and discuss how we will address identified issues. Comprehensive feedback is also provided outlining the outcome of the issue.

Engaging with consumers at an individual level leads to positive outcomes, such as addressing health literacy deficits, accessibility issues for minority groups, and any duty of care issues for our clinical governance clinicians.

Representation and quality improvement

Data received through our feedback mechanisms are analysed and themes are further explored in our Service Development Improvement Committees, which provide a forum to discuss the continuous quality improvement of all our services.

Importantly, these committees include consumer and professional representatives to provide their expertise and help improve our services.

INFORMATION PARTNERSHIP

We work with a select group of information partners who provide trusted content that can be accessed through our range of online services.

Partner organisations are selected according to the quality of their content and their ability to enhance content on our digital properties. They include peak bodies, government agencies, research institutes, educational institutes and not-for-profit organisations.

Through our partnerships we have built a national community of more than 160 organisations who come together to network and collaborate around a shared vision to provide relevant and reliable health and related information to Australian consumers.

This year we have undertaken a number of collaborative projects and initiatives with our partner organisations.

CT Scan Gateway

We were proud to partner with the Australian Commission on Safety and Quality in Health Care (ACSQHC) to develop a one-stop-shop for information and resources which inform different groups involved in CT scanning of children and young people.

The Commission's Reduction in Radiation Exposure to Children and Young People from CT Scans project aims to reduce unnecessary exposure to radiation from CT scans. We created a dedicated section on the healthdirect website to centralise resources developed by the Commission and relevant partners to educate patients, their parents and carers, referring doctors and dentists, and imaging professionals about the benefits and risks involved.

The collaboration demonstrated how bringing together resources from different partner organisations increases the reach and value of the resources. In future, this model could be used to showcase different suites of resources across a range of health and related areas.





Information Partner Forum

We held our second Information Partner Forum in November 2015. The Forum provides an opportunity for our partner organisations to come together to learn more about Healthdirect Australia, collaborate with each other, and hear from industry experts.

With the theme of Collaborative Partnerships: Innovation Solutions, the Forum touched on subjects such as how to make the most of social media, research on social networks, the importance of choosing partnerships carefully and tools and tips for getting the best out of search engine optimisation and search engine marketing.

Choosing Wisely Initiative

In March 2016, we joined forces with NPS MedicineWise to promote the second wave of the Choosing Wisely Australia initiative. The initiative provides people with the information they need to confidently ask their healthcare providers questions regarding medical procedures, tests or treatments.

By working in collaboration, hundreds of links to the Choosing Wisely recommendations have been added to the healthdirect website on a range of topics such as allergies, children's medicines, palliative care and diabetes.

Making these recommendations available ensures that people have access to high-quality, evidence-based advice, and can make more informed decisions about their health.

“

"In undertaking this project to promote a reduction in radiation exposure for children and young people from CT scans, the Commission has been able to partner with Healthdirect Australia to bring together a range of trusted information that will support increased awareness of this public health issue. This has been a very positive collaboration between our organisations that will support more informed health care decisions."

Kathy Meleady Director, Commonwealth Programs, ACSQHC

SECTOR PARTNERSHIPS

Our national infrastructure and service network is leveraged by others to improve efficiencies, service delivery and access to information and services.

We engage with a diverse range of organisations across the health, ageing, disability and social service sector, to support the adoption of our infrastructure and expand the reach of our services into local communities.

This year, we have supported Primary Health Networks (PHNs) in their coordination of primary care and mental health services.

National Infrastructure

The adoption of our infrastructure enables PHNs to operate more efficiently and effectively and direct more funding to frontline services.

One example is the utilisation of the National Health Services Directory. We provide access to the directory, training on how to manage information and ongoing service desk support. The directory provides data on all health and related services in each region, including after hours services so that practices can claim the after hours Practice Incentives Program (PIP) payments.

After hours services

We partnered with PHNs in rural and remote areas to educate their communities about the availability of after hours services. This consisted of targeted marketing activities which included the distribution of collateral to GPs, direct mail to households, advertising and local media activity. The direct mail campaign reached nearly half a million households in regional areas.

Service planning

Our healthdirect Health Map collates vast amounts of health data and statistical information via an online platform which is used to generate health insights. We made Health Map available to the PHNs to improve awareness of available services in their communities, identify where there are gaps and to use this information to strategically plan and coordinate targeted health interventions.



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Health Services

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Y NORTH
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Sydney North Health Network

Abby Edwards – Communications,
Engagement and Health Literacy
Manager

Abby Edwards is the Communications, Engagement and Health Literacy Manager at Sydney North Health Network which operates the Northern Sydney PHN. The Network uses a number of Healthdirect Australia services and tools to help improve health literacy and access to primary healthcare pathways for both health professionals and the community in Northern Sydney.

"We direct people to the National Health Services Directory widget via our after hours awareness campaigns. It is the most utilised and accessed page on our website other than the home page and education section."

"We also promote My Aged Care and Carer Gateway to our health professionals and members of the Northern Sydney community via our web news, eNewsletters, social media channels and marketing materials at community and education events."

Abby says that the partnership with Healthdirect Australia allows the PHN to increase the efficiency and effectiveness of health, care and medical services for the community.

"Sydney North Health Network aims to simplify the healthcare system by providing better information, education and networking opportunities for health professionals, connections across the health system, a better experience for health providers and better health for the community which working with Healthdirect Australia helps us to deliver."

The two organisations share common goals to improve health and wellbeing through the use of innovative technologies.

"The Sydney North Health Network also has a focus on innovative and sustainable solutions that shift the focus of care out of the hospitals and into the hands of primary healthcare. We believe that Healthdirect Australia shares this aligned priority."

"Technology is only part of the picture in primary healthcare, but if accessed and utilised correctly can play an important part in educating, informing and directing people down the correct care pathways."

PEAK BODIES



This year we have engaged with a range of peak bodies to contribute to the planning, implementation and evaluation of our services and to collaborate and partner around mutual initiatives.

The Royal Australian College of General Practitioners

We were invited by the College to participate in a full day seminar with members of their staff and Expert Committee – eHealth and Practice Systems. We presented an overview of the services provided by Healthdirect Australia and the outcomes of the Data Linkages research project we commissioned to examine the extent to which callers follow the advice given to them via the healthdirect helpline.

We continue to work with the College to enhance the model for our after hours GP helpline and to gain accreditation for this service. As the peak body for GPs in Australia, the College is well placed to provide advice on after hours services and how the after hours GP helpline can be best used to complement existing primary care services and fill any service gaps.

Australian Commission on Safety and Quality in Health Care

We were approached by the Commission to work with them on a joint project around health literacy, which is a priority area for both organisations.

We are developing a “Question Builder” – an online tool to help people be better prepared for consultations with their doctors by knowing what questions to ask, how to get the most out of their consultation, and be prepared with the information for which they may be asked by their GP or specialist.



Insights from the world's largest telehealth data linkages project

The University of NSW Centre for Big Data Research in Health undertook a study that linked data sets from healthdirect calls with routinely collected data from the hospital system. It found:

Callers trust healthdirect advice

- 67.4% of NSW patients attended ED immediately when advised by the healthdirect triage nurse
- 70.2% of NSW patients attended ED immediately when advised by the after hours gp helpline
- Only 6.9% of patients attended ED when advised to get care elsewhere.

Appropriateness of healthdirect advice

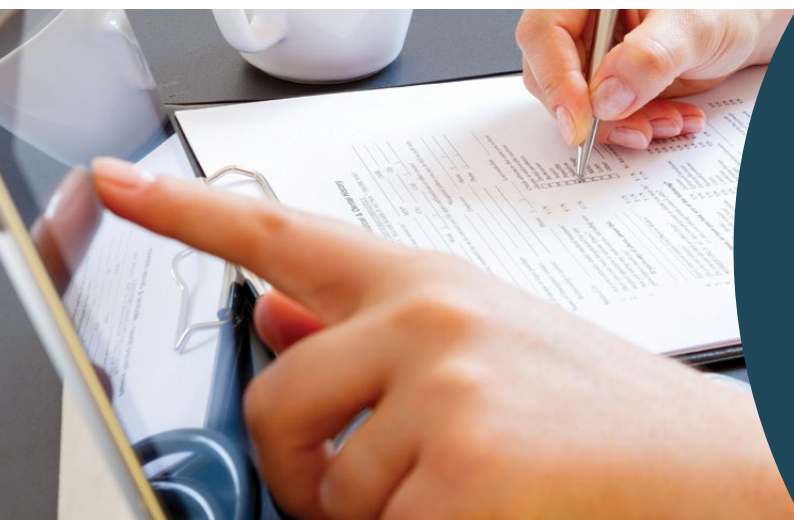
A comparison of people who followed healthdirect advice to attend ED with the general population who referred themselves to ED shows:

- Fewer non-urgent patients are sent from healthdirect than attend from the general population
- More clinically urgent patients are sent from healthdirect than attend from the general population.

We established a Steering Committee, chaired by our GM Clinical Governance, reviewed a question builder tool that already exists in the United States, and developed questions appropriate for the Australian healthcare system and community. A clinical panel was then convened to review the questions and look at how to improve their quality and relevance.

During the next financial year, we plan to pilot the question builder tool on the healthdirect website and will undertake an evaluation to determine its effectiveness.

RESEARCH AND EVALUATION



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“It is estimated that 60 per cent of people have less than adequate levels of health literacy, which is a significant challenge in delivering health services.”

Australian Bureau of Statistics (2006) Adult Literacy and Life Skills Survey, Summary Results, Australia

We partner with a number of leading universities, academics and research organisations to undertake a range of research and evaluation activities. The results of these allow us to better understand the needs of the people using our services, how we can improve the quality, safety and efficiency of the services we offer and to inform the development of any new services.

Under-represented groups

Many people find it difficult to access health services. This is particularly true for groups with specific needs, such as those with complex and chronic health conditions, those in regional and rural areas, and Aboriginal and Torres Strait Islander peoples.

This year we engaged the Cultural and Indigenous Research Centre Australia (CIRCA) to conduct research across Aboriginal and Torres Strait Islander, culturally and linguistically diverse, and socially and economically disadvantaged communities to assess whether our services are adequately meeting the needs of vulnerable community members.

The research findings will be used to inform how we can improve our services to better reach these communities, and provide recommendations about marketing and communication messages and methods.

Teachback trial

Health literacy is about how people understand health information, use it to make informed decisions, and how they act upon these decisions to manage their health and wellbeing.

Starting in January 2016, we partnered with the University of Sydney, School of Public Health to undertake a Randomised Control Trial to assess the effectiveness of teachback methods on our Pregnancy, Birth and Baby helpline.

Clear communication and effective patient education can significantly improve health outcomes, yet it is not always practiced. “Teachback” is a method for checking and ensuring understanding by asking clients to restate information in their own words.

Findings from the trial show participants in the teachback group reported higher confidence after speaking with the nurse. People with low health literacy levels and those from culturally and linguistically diverse backgrounds tended to show greater gains from teachback. These findings will be used to scale up the use of teachback across other services as part of our quality improvement processes.

Service evaluations

The quality and safety of the services we deliver is of utmost importance. We design and complete high quality evaluations to ensure our services meet the needs of people who use them and to implement quality improvement initiatives.



OUR ORGANISATION

Our engaged staff, strong governance and commitment to our company values drives us to achieve our vision and unites us with a common passion – caring about health consumers, and wanting to transform the ways Australians access health services and information now and into the future.

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"Winning the values award for sharing knowledge made me feel appreciated and valued in my role. It gave me a sense of achievement."

*Gabriela Hernandez,
NHSD Service Desk Lead*

OUR PEOPLE AND ENVIRONMENT

Healthdirect Australia employs a dynamic range of people from various professional and cultural backgrounds who together make up a talented workforce.

Coupled with a broad range of health and digital industry thought-leadership on staff, Healthdirect Australia has been able to foster a culture of open collaboration that encourages continued learning and development of skills and knowledge.

Our collective expertise allows for us to continually improve our services. Working together with our shareholders we enhance features, improve functionality and seek to increase awareness and usage of our services.

Through this collaborative culture our staff are driven by a common passion – to deliver better services and improve the health and wellbeing of all Australians.

Staff Quarterly Updates

This year we have continued to host Staff Quarterly Update meetings, where staff get to hear from our CEO and other executives on initiatives and projects happening across the organisation, as well as learn from their peers on various areas of operation. This meeting ensures staff are aware of the organisation's goals, both immediate and long term, and therefore work towards a common purpose.



Security and compliance

Healthdirect Australia's Platform environment is a secure environment for running our bespoke Gateways, websites and other technology services. It is built on a variety of open source and commercial products and runs on public cloud infrastructure in Amazon Web Services.

This year, the platform was accredited to the Australian Government Information Security Manual (ISM) standard for unclassified information.

Security is part of the culture at Healthdirect Australia and is considered in everything we do. We have also commenced work to have achieve ISM certification and accreditation for mindhealthconnect, Pregnancy, Birth and Baby, the National Health Services Directory, our corporate network and physical security.

Our commitment to security and compliance allows us to provide trusted services on behalf of our shareholders.



“Healthdirect Australia is in a unique position to improve health outcomes for Aboriginal and Torres Strait Islander peoples, by ensuring that health services and employment opportunities are provided in a safe and culturally sensitive environment. One of the key ways organisations like Healthdirect Australia can lead the way is through RAPs. RAPs are a catalyst for action and a driver for equality.”

Justin Mohamed – CEO Reconciliation Australia

Values Awards

At each Update one member of staff is awarded the Quarterly Values Award recognising their work in the spirit of one of our organisation's core values. The winners are nominated by their colleagues who attest to their effort in working with the values in mind, which we have set to underpin our work. The Values Award allows for staff to complement each other's work and recognise the efforts of others in working towards the organisation's vision to become a key part of a quality health system.

Creating a health literate organisation

This year we commenced work towards becoming a health literate organisation to reflect the efforts we make in ensuring every Australian has access to understandable health information through our services.

Highlights included conducting a survey to measure health literacy levels among staff. We are looking to develop and implement strategies that help our staff improve their own levels of health literacy. A DirectTalks event with health literacy leaders was held and resources and information have been made available across the organisation, provided by our clinical governance team. By ensuring our workforce is striving to improve its own health literacy levels we can make informed decisions about how we present our health information to the people who use our services.

Improving work systems

As we continue to evolve and deliver on our vision it is important to provide the most appropriate work environment and platforms for our staff to engage and collaborate effectively together. This year we improved our internal IT infrastructure to allow for staff to work flexibly, on-the-go and from cloud-based platforms. Crucially, these improvements have ensured the organisation is ISM compliant.

Our commitment to reconciliation

This year we have developed our 'Reflect' Reconciliation Action Plan (RAP) which was officially endorsed by Reconciliation Australia in March 2016.

A 'Reflect' RAP is a 12 month plan of practical actions designed for organisations starting out on their formal journey of reconciliation with Aboriginal and Torres Strait Islander peoples. Our RAP aims to foster respect, build relationships, and identify opportunities for organisational improvements. We plan to explore ways our services can better support the health and wellbeing of Aboriginal and Torres Strait Islander peoples, and to build an inclusive workplace environment.

We have established a working group to progress the RAP actions and plan activities to promote reconciliation across the organisation.

A research project has commenced to investigate how Aboriginal and Torres Strait Islander peoples use our services, and will inform culturally appropriate improvements to our service design and delivery.

We have begun work to build a community committed to reconciliation, by identifying other organisations we can connect with who are working towards reconciliation and improved health outcomes for Aboriginal and Torres Strait Islander peoples.

OUR BOARD



Image from left to right:

Wayne Cahill, Anthony Lawler, Jane Muirsmith, Patricia McKenzie, Julie Thompson, Michael Beckoff, Peter Dowling

We welcomed our new Board of Directors in January 2016.

We were delighted to welcome back returning board members Ms Patricia McKenzie, Professor Anthony Lawler and Dr Julie Thompson alongside Dr Michael Beckoff, Mrs Jane Muirsmith, Mr Peter Dowling and Mr Wayne Cahill.

Ms Patricia McKenzie, Chair LLB, FAICD

Patricia is an experienced chair and director in the energy, government, health and not-for-profit sectors. She is Chair of Essential Energy, owning and operating Australia's largest electricity network and a non-executive director of the APA Group, the largest natural gas infrastructure company in Australia.

Patricia was formerly a Director of Transgrid, Australian Energy Market Operator Limited and Macquarie Generation; CEO of Gas Market Company Limited; Chair of Sunnyfield Limited; and Chair of Diabetes Australia.

At Healthdirect Australia, Patricia is Chair of the Board, a member of the Finance, Risk Management and Audit Committee (FRMAC) and a member of the Project Review and Workplace Health and Safety Advisory Committee (PROWAC), until December 2015.

Dr Michael Beckoff, Director MBBS, FACRRM, FAICD

Michael is a procedural rural generalist, working as a locum in rural and remote areas of Australia since 2011.

Michael is currently a Clinical Adviser (mental health) for Country Health South Australia Local Health Network (CHSALHN); Member of the SA Health Clinical Senate; Vice President of the Australian College of Rural and Remote Medicine (ACRRM); Director on the ACRRM College Council and represents ACRRM on the Australian Commission of Safety and Quality in Health Care (ACSQHC) Clinical Standards Committee and National GP Roundtable.

After graduating from the University of Adelaide, Michael joined Bridge Clinic at Murray Bridge SA in 1977, where he was an equity partner for some 33 years. Other previous roles include; Inaugural Member of the SA Health Performance Council; Chair of the Murray Mallee GP Network; and Chair of General Practice SA.

At Healthdirect Australia, Michael is a member of the Clinical Governance Advisory Group (CGAG).

Mr Wayne Cahill, Director BHA, LLB, MCom, FCHSM, FAICD

Wayne has been a partner of a major law firm for more than 25 years, specialising in commercial health and aged care work, and has previously held chief executive positions of health organisations.

He is a Director of Navy Health and a member of their Audit and Compliance Committee and Remuneration and Nomination Committee.

Wayne has been a Director and Chairman/President of the Australasian College of Health Services Management and a Director of HealthQuest, Blake Dawson Partners Superannuation Fund, the Health Services Association of NSW, Institute of Magnetic Resonance Research, Macquarie Area Health Service and the Skin and Cancer Foundation Australia.

At Healthdirect Australia, Wayne is Chair of the Finance, Risk Management and Audit Committee (FRMAC).

Mr Peter G. Dowling AM, Director BA (Acc.), FCPA, FAICD

Peter is an accountant and former Ernst & Young Partner. An experienced company director and independent audit and risk committee member, Peter's current boards appointments include Metro South Hospital and Health Service, TAFE Queensland, WorkCover Queensland and CPA Australia among others.

His independent audit and risk committee roles include Queensland local governments and state agencies. In 2007 Peter was made a Member of the Order of Australia for services to accountancy and the community.

At Healthdirect Australia, Peter is a member of the Finance, Risk Management and Audit Committee (FRMAC).

Professor Anthony Lawler, Director BMedSci, MBBS, FACEM, GAICD, MBA (Health Mgmt)

Anthony is the President of the Australasian College for Emergency Medicine, and a practising emergency physician in Tasmania.

He is Professor of Health Services at the University of Tasmania.

He is also a member of the Australian Medical Council's Specialist Education Accreditation Committee, sits on the National Health and Medical Research Council (NHMRC), and is a member of the Committee of Presidents of Medical Colleges.

He is a Director of the International Federation for Emergency Medicine, and of the Postgraduate Medical Education Council of Tasmania.

Anthony has also had a broad range of experience in medical representative roles, including as a member of the Federal Council and Federal Executive of the Australian Medical Association, and as President of the Tasmanian Branch of the Australian Medical Association.

At Healthdirect Australia, Anthony is Chair of the Clinical Governance Advisory Group (CGAG).

Mrs Jane Muirsmith, Director BCom (Hons), FCA, MAICD

Jane is an experienced digital and marketing strategist, having held several executive positions in Sydney, Melbourne, Singapore and New York.

Currently Jane is Managing Director of Lenox Hill, an organisation which specialises in helping companies and government develop their digital and channel capabilities. Jane is the former Head of Digital at Bankwest, part of Commonwealth Bank. Before that, she was Head of Online and Lead Global Advisor for Merrill Lynch based in New York, and is also the former worldwide Head of Marketing, e-Business for Deloitte.

Jane is a non-executive director of Australian Finance Group (AFG), Vice Chair of the Western Australian (WA) Business Advisory Group of the Institute of Chartered Accountants, a member of the University of Western Australia Ambassadorial Council and is a former President of the Women's Advisory Council to the WA Government.

At Healthdirect Australia, Jane is a member of the Finance, Risk Management and Audit Committee (FRMAC).

Dr Julie Thompson, Director MBBS, GradDipEd, FAICD

Julie is a general practitioner and Director of the Rural Workforce Agency Victoria, Director of South East Melbourne Primary Health Network, and Chair of the National Quality Management Committee of BreastScreen Australia.

Julie has 25 years' experience as a director on a range of health-related boards at a local, regional, state and national level, including community health, hospital, aged care and GP divisions. She has broad experience in health service reform, including mental health, chronic disease management and primary care.

At Healthdirect Australia, Julie is a member of the Clinical Governance Advisory Group (CGAG) and a member of the Project Review and Workplace Health and Safety Committee (PROWAC), until December 2015.

We would like to acknowledge our outgoing board members Ms Karen Dado and Ms Susan Forrester who resigned in December 2015.

Ms Karen Dado, Director BSc, MBA, GIA, MAICD

Karen is a corporate adviser and consultant to the healthcare and technology sectors. She recently finished a 12 month contract to AusIndustry as a Business Development Adviser with the Entrepreneurs' Programme, focused on facilitating global commercialisation deals on behalf of novel health and life sciences technology companies within the Accelerating Commercialisation portfolio.

Karen previously spent six years with AFG Venture Group, a corporate advisory and consulting firm based in Asia and Australia as well as 15 years with PricewaterhouseCoopers in their Management Consulting, Risk Management and Transactions Services practices in London and Sydney.

At Healthdirect Australia, Karen was Chair of the Project Review and Workplace Health and Safety Advisory Committee (PROWAC).

Ms Susan Forrester, Director BA, LLB (Hons), EMBA, FAICD

Susan is an accomplished, professional company chair and director. She is a qualified lawyer and nationally recognised corporate governance specialist with 20 years' executive management experience in corporate treasury and professional services firms.

In 2015, Susan served on three boards which undertook successful Initial Public Offerings to list on the ASX (NVL, OTW and XIP). Her current portfolio encompasses four listed entities (one in the ASX200), UnitingCare Qld and South Bank Corporation.

She has valuable experience chairing audit and risk and remuneration and nomination committees both in the listed, government and private sectors.

At Healthdirect Australia, Susan was Chair of the Finance, Risk Management and Audit Committee (FRMAC).

GOVERNANCE AND BOARD COMMITTEES

We have a responsibility, and are directly accountable to federal, state and territory governments as our shareholders and customers.

Our external and internal governance processes and committees ensure we meet legal, compliance and financial obligations while developing and delivering high quality, clinically safe services.

External Governance

The **Standing Committee** represents the interests of the federal, state and territory governments as shareholders. The committee is responsible for:

- appointing directors to the Board
- liaising with the Board and CEO to advance policy and priority issues
- approving the company's Strategic Plan
- providing advice on the annual Corporate Plan
- assessing business cases to improve existing services and develop new jointly funded services
- reviewing the company's performance.

The **Joint Customer Advisory Committee (JCAC)** represents the interests of the federal, state and territory governments as customers, with meetings bringing together their representatives and our management.

JCAC is responsible for reviewing and monitoring the service and performance level of operations, particularly in regards to:

- increasing awareness and utilisation of Healthdirect Australia's services among defined under-represented groups in Australia
- reporting on service quality
- ensuring that the health information we offer is of high quality.

We also have additional committees representing customer interests for a range of services including My Aged Care, Carer Gateway and the National Health Services Directory.

Internal Governance

The **Finance, Risk Management and Audit Committee (FRMAC)** supports the Board in ensuring the integrity and robustness of the company's financial reporting, risk management processes and internal controls. It oversees and monitors the effectiveness of our risk and compliance frameworks and coordinates the company's internal and external audit functions.

The Committee is made up of the Board members of Healthdirect Australia.

The **Clinical Governance Advisory Committee (CGAG)** supports the Board in ensuring our telephone and online services are nationally consistent, high quality, equitable and sustainable.

The CGAG advises the Board on clinical governance and clinical risk management and manages the clinical governance framework to ensure quality control. The Group features an acute sector clinician, general practitioners, a senior psychiatrist and a senior nurse.

In addition to Board members of Healthdirect Australia, CGAG includes three external members:

- Dr Jenny Bartlett, an experienced clinician now consulting in clinical governance, healthcare improvement and medical management
- Dr Scott Clarke, a psychiatrist who has worked in clinical and administrative roles for more than two decades in both the United States and Australia
- Professor Mary Chiarella, a Professor of Nursing at University of Sydney Nursing School and an internationally renowned nurse leader with a distinguished career in nursing services.

The **Project Review and Workplace Health and Safety Advisory Committee (PROWAC)** meets on an ad hoc basis, as determined by the Board of Directors and with such members as the Board determines at that time. This year, the Board of Directors considered at Board level those matters which could be submitted to PROWAC.

PROWAC has two key objectives:

- Oversee and monitor the progress of key projects within the company's project portfolio, and advise the Board on project governance and portfolio risk.
- Provide leadership on work health and safety (WHS) matters, and monitor the policies and practices of the company in respect to WHS compliance.



Standing Committee

Julie Crowe, Chair

Julie Crowe is the Chair of the Healthdirect Australia Standing Committee.

"In the last 12 months, Healthdirect Australia has invested in finding innovative ways for consumers to access health information and ways to support those with complex and chronic health conditions, who are frequent users of health services, as well as those in regional/rural areas and Indigenous Australians.

"Improved clinical governance models, establishing My Aged Care and helping to support new initiatives have all helped towards achieving Healthdirect Australia's intended outcomes of more integrated and coordinated care, improving the reach and equity of accessing services for all Australians including vulnerable and remote population groups.

"Looking ahead, Healthdirect Australia has a vital role to play in delivering national systems and infrastructure to support My Health Record and in reducing future costs of delivering quality care through using technology effectively.

"Supporting highly-skilled professionals in providing care where it is most needed and enabling better eHealth solutions to support prevention and early intervention initiatives and chronic disease management services is also a key goal."

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"Healthdirect Australia has a vital role to play in delivering simpler national systems and infrastructure services."

Standing Committee initiatives in 2015-16:

- Appointment of the new Board of Directors who commenced their roles on 1 January 2016
- Continued work with the National Health Chief Information Officer (CIO) Forum and Healthdirect Australia on the National Health Services Directory (NHSD), including involvement in the NHSD Fund Provider Committee and providing input into the independent review of the NHSD and National Endpoint Proxy Services (NEPS)
- Development of a policy statement and processes, with support from the organisation and Joint Customer Advisory Committee, regarding arrangements for Healthdirect Australia to engage with non-shareholders.

The Standing Committee will lead the following projects of work in 2016-17:

- A preliminary review of Healthdirect Australia in accordance with the Umbrella Funding Agreements
- Continue to advise on Healthdirect Australia activities – in particular the NHSD and the work with non-shareholders
- Fulfil shareholder functions as required by the Constitution and Shareholders' Agreement – including attending the AGM and reviewing annual performance.



“

“Research enables us to better tailor our services to address particular challenge areas in compliance.”



Clinical Governance Advisory Group

Anthony Lawler, Chair

Anthony Lawler is a member of the Healthdirect Australia Board and Chair of the Clinical Governance Advisory Group (CGAG).

The CGAG meets regularly throughout the year with the primary function of providing its expertise across a broad range of clinical disciplines, and advice to the Board and Healthdirect Australia on issues pertaining to clinical governance and clinical risk.

“With its sufficiently broad representative clinical structure, CGAG can speak quite effectively on issues related to the kinds of work and services Healthdirect Australia provides. We’re very pleased that we’ve been able to play such a strong role in providing advice on clinical risk in the last financial year and that includes in re-tendering for the Nurse Triage service.

“Another highlight in that time has been the culmination of a significant piece of research we carried out which has enabled us to assess the compliance rates of callers with the advice they are given from our services. Through the analysis of call data and data relating to caller behaviour, we have also been able to identify callers in whom compliance with advice is less likely to be the case.

“This is important for us because, firstly, it allows us as an organisation to add to the body of knowledge in the provision of telephone triage services. Secondly, it enables us to better tailor our services to address particular challenge areas in compliance.

Finally, it helps us to understand and improve our services on an ongoing basis.”

In analysing the data, CGAG found that patients who had been referred to the emergency department by the healthdirect service, were consistently triaged in the higher category than patients who self-presented.

“This was a welcome confirmation that we are selecting the patients most in need of emergency care and referring them appropriately.”

The key priorities for CGAG going forward include continuing to provide appropriate expert clinical advice so that Healthdirect Australia can most effectively address issues of clinical risk, as well as fashion our services to provide the most appropriate response to public health needs.



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