the voice of public healthcare®

australian healthcare & hospitals association

2 November 2020

Chris Picton MP
Shadow Minister for Health and Wellbeing
Email: ShadowHealth@parliament.sa.gov.au

Dear Mr Picton,

Re: Health Practitioner Regulation National Law (South Australia) (Telepharmacy) Amendment Bill 2020

The Australian Healthcare and Hospitals Association (AHHA) welcomes the opportunity to provide feedback on the *Health Practitioner Regulation National Law (South Australia) (Telepharmacy) Amendment Bill 2020*, introduced to Parliament by Minister Stephen Wade MLC.

AHHA is Australia's national peak body for public hospitals and healthcare providers. Our membership includes state health departments, Local Hospital Networks (LHNs) and public hospitals, community health services, Primary Health Networks (PHNs) and primary healthcare providers, aged care providers, universities, individual health professionals and academics. As such, we are uniquely placed to be an independent, national voice for universal high-quality healthcare to benefit the whole community.

The COVID-19 healthcare emergency has exposed critical bottlenecks and vulnerabilities within the Australian health system, and health services have had to adopt new ways to deliver care. Our experiences addressing these challenges can provide a catalyst for reimagining health care. As we move toward a post-COVID world, identifying the changes that are needed to form the foundation of a modern, sustainable and resilient healthcare system, focused on health outcomes and capable of absorbing shock will be as important as identifying the changes that are not.

As we identify in a recent paper published, *Australian healthcare after COVID-19 – an opportunity to think differently* (attached), the rapid expansion of virtual healthcare has meant that long awaited efficiencies, workplace flexibility and improvements in access to care are beginning to be realised. This is seen with the legal provisions for the authorising of telepharmacy in South Australia. Ensuring 'that pharmacy services are available to people who would not have direct and timely access to these services', as specified in the *Second Reading Report* by making such opportunities permanent, is to be commended and is strongly supported.

However, we read with concern in the *Second Reading Report* that 'PRASA recognise that best practice is for a pharmacist to provide professional pharmacy services in-person to a patient', and suggestions that such approvals may only be used in the event a pharmacy is unable to open. We are concerned that such unsubstantiated claims will limit the potential gains from telehealth models of care beyond simple substitution of face-to-face services, and then only in very limited circumstances.

Telehealth is often understood as referring to teleconsultations. However, there is a diversity of technologies and models of care that are being integrated in healthcare to support health system reform that is patient-centred, outcomes-focused and sustainable. To reflect this, there is a growing adoption of the term 'virtual healthcare', and we encourage system-wide attention to how virtual healthcare can be used for healthcare reform and a better health system in the longer term.

PO Box 78 Deakin West ACT 2600 Unit 8, 2 Phipps Close Deakin ACT 2600
T. +61 02 6162 0780 F. +61 02 6162 0779 E. admin@ahha.asn.au W. www.ahha.asn.au
ABN 49 008 528 470

ECAAS ISO 9001 CERTIFIED QUALITY MANAGEMENT
JAS-ANZ
REGISTERED CHARITY acnc.gov.au/charityregister

An example of a new virtual model of care launched this year is RPA Virtual Hospital, which combined Sydney Local Health District's integrated hospital and community care with the latest digital solutions, as an alternative, sustainable solution to increasing demand for healthcare, and acting as a bridge between hospital specialist services and patient care in the community. A paper published by the Deeble Institute for Health Policy Research describes this model (attached), which identifies that virtual models are an essential component of future health infrastructure.

AHHA explores this in more detail in another paper recently published, The effective and sustainable adoption of virtual health care (attached). This paper describes the system-wide approach to effectively and sustainably adopting virtual healthcare, with focus on:

- **Patient-centredness**, including co-design with patients, and measuring what matters to patients;
- **Equity**, including proactive efforts to ensure affordability, equitable access to technology and digital literacy;
- **Cross-sector leadership and governance**, across jurisdictions and the primary and acute care sectors, and in partnership with industry and researchers;
- **Digitally-capable health workforce development**, prioritising team-based care and new roles needed to optimise integration of technology into health care;
- **Interoperability, standards and quality assured technology**; and
- **Funding for reforms**, including better use of data and evaluation.

Virtual healthcare—that is, care at a distance—is more than using telephone and video calls as a substitute for traditional face-to-face care. To limit virtual healthcare in this way is to squander the opportunity for healthcare reform and a better health system in the longer term.

There is optimism across the health sector, with willingness to embrace these technologies in care to achieve a more long-term health reform. Such care has demonstrated it can be more responsive to the needs of patients, improve clinical effectiveness and increase service efficiency. There is also strong evidence for patient and caregiver satisfaction. While not all care can be managed virtually, the co-design of models of care with patients and clinicians, and using patient-reported measures to drive improvement and integration, will guide approaches such that virtual and face-to-face services operate synergistically.

We encourage you to ensure this Bill is not introduced in such a way as to limit the adoption of virtual care models into the future.

I would be pleased to discuss these views with you in more detail.

Yours sincerely,

Alison Verhoeven
Chief Executive
Australian Healthcare and Hospitals Association