# Virtual Care

System Performance Support

2 June 2025





#### **Acknowledgment of Country**

I'd like to begin by acknowledging the traditional owners of the land on which we meet today. I would also like to pay my respects to elders past and present. And to extend that respect to other Aboriginal people and colleagues present today.

# The Walking Together: Pathways to Healing.

This artwork represents the evolving journey of healthcare, deeply rooted in the values of connection, Country, community, and health.

The artwork and icons used on this page are created by **Bindi Bindi Art**, with permission from the artists.



### ALTERNATIVE CARE PATHWAYS NSW SINGLE FRONT DOOR

## WHY

- Healthcare is complex for consumers to navigate
- Primary care access challenges
- Increased ED presentations for lower acuity issues

#### **WHAT**

- One contact for urgent, unplanned health needs
  - Information, advice, assessment and triage by RNs
  - Connection to clinically appropriate care
  - Unify and scale care options primary, urgent, virtual models - does not replace existing services
- Access is quick, easy and free
  - Phone/web/app, language and hearing support, all ages, no cost, 24/7/365
  - 1800 022 222
  - healthdirect.gov.au: self-triage, service finder, health information

#### **WHO**

- Led by NSW Health, delivered by Healthdirect Australia and NSW Health
- Healthdirect
  - Non-profit, national virtual public health info service; co-owned by state, territory and Cwlth governments; robust clinical governance

#### **EXPECTED OUTPUTS**

- Reduce avoidable ED demand
- Improve the experience of care for patients
- Improve equity of access with virtual options.

#### STRATEGIC ALIGNMENT

Regional health strategic plan:
Priorities 2, 5
Future Health:
Strategic objectives 1,2,5,6
Virtual Care Strategy 2021 – 2026:
All focus areas

Elevating the Human Experience 2020: Focus areas 1, 3, 4, 5, 6 NSW Health Strategic Framework

for Integrating Care

NSW Aboriginal Health Plan 2013-2023:

Strategic directions 3, 5
National Digital Health Strategy

NSW Digital Government Strategy

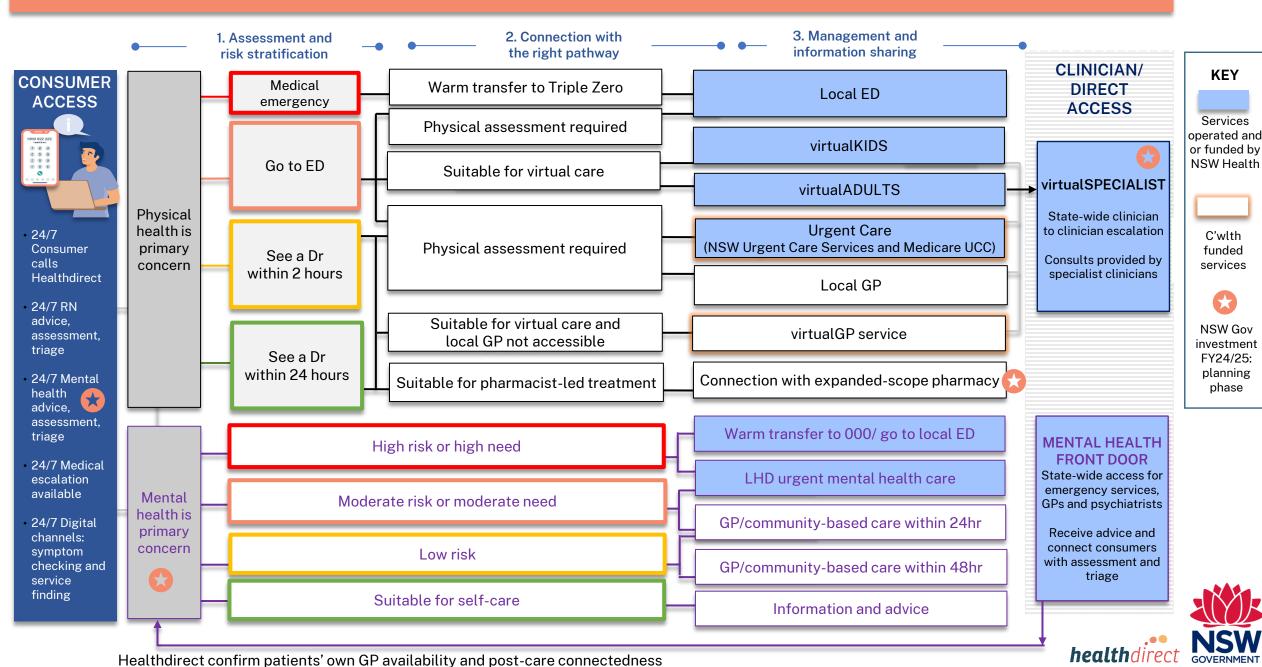








# SERVICE LOGIC AND REFERRAL PATHWAYS NSW SINGLE FRONT DOOR



# **ED Relief Alternative Care Pathways – virtualADULTS**

### **Service Model**





Initial call to Healthdirect





 Healthdirect nurse carries out telephone consultation



Clinical telephone consultation by Healthdirect





- Healthdirect consultation results in disposition of 'attend ED'
- Healthdirect nurse checks exclusion criteria



Referral to virtual ADULTS





- Healthdirect referral to virtualADULTS facilitated by Patient Flow Portal (PFP)
- Referral occurs via PFP



Virtual consultation





virtualADULTS
clinician
complete
assessment
which may be
facilitated by a
clinical decision
tool



Urgent care service provision





Pending clinical condition patient will be referred to:

- Medical consultation
- Attend ED
- GP
- Community Service
- Specialist Pathway

**NSW Health** 

# ED Relief Alternative Care Pathways – virtualKIDS

#### Service Model





Initial call to Healthdirect





 Healthdirect nurse carries out telephone consultation



Clinical telephone consultation by Healthdirect





- Healthdirect consultation results in disposition of 'attend ED'
- Healthdirect nurse checks exclusion criteria



Referral to virtual KIDS





- Healthdirect referral to virtualKIDS facilitated by Patient Flow Portal (PFP)
- Referral occurs via PFP



Virtual consultation





virtualKIDS
clinician
complete
assessment
which may be
facilitated by a
clinical decision
tool



Urgent care service provision





Pending clinical condition patient will be referred to:

- Medical consultation
- Attend ED
- GP
- Community Service
- Specialist Pathway

**NSW Health** 

## virtualGP service NSW SINGLE FRONT DOOR



- Primary care safety net program
- 24/7 access to urgent GP appointments virtually via Healthdirect helpline
- E-script and e-medcert capability
- Criteria: callers who are triaged to see GP <24hr and who can't access a GP locally</li>
- Depending on acuity, callers receive GP callback within 30-120 minutes
- Funded under Cwlth Primary Care Pilot
- Evaluation due July 2025: early data
  - More than 44.000 callers were referred to vGP in NSW CY2024
  - o Of these, more than 15,000 callers were headed to ED before they were assessed and diverted to vGP
  - o Of vGP pts, nearly 80% were referred to non-ED outcomes post-consultation (self-care or GP follow-up)
  - High levels of consumer satisfaction



# Hospital in the Home (HITH)

# ED Relief Creating Inpatient Capacity – Hospital in The Home (HITH)



9

Enhance and build on existing services, extending the existing HITH services to increase the number of patients receiving appropriate care in their home



#### Goals

- Reduce preventable ED presentations, hospital admissions and decrease length of hospital stay
- Provide 7-day per week, district-wide clinical service availability with robust medical oversight
- Access to multi-disciplinary Clinical team of Medical, Nursing, and Allied Health
- Support patients via adaptive and integrated care models
- Provision of services utilising virtual capability



### Key focus

- <u>Development of HITH policy and framework</u>
   Development of a new statewide HiTH policy and framework to support the reform program, recently released February 2025.
- Allocation of funding to LHDs/SHNs
   Funding allocation will enhance and build on existing services, establish new services and enable virtual care
- Alignment with Commonwealth's Strengthening Medicare Package
   HiTH expansion aligns closely with the aged care services in the package including Aged
   Care Outreach and Virtual Specialist Geriatric Care Services

NSW Health

# ED Relief Creating Inpatient Capacity – Hospital in The Home (HITH)

#### **HITH Policy Fundamentals**





# Governance and reporting structures

- Integration with inpatient operational governance, including demand and patient flow strategies
- Dedicated AMOs with pathways for shared care
- District/ network wide access
- Operate 7 days a week



#### **Referral Pathways**

- Clear pathways for direct referrals to the HITH service
- Centralised triage and referral point
- Timely access to specialist reviews as required



#### Virtually enabled

- RPM, video and digital diagnostic enabled
- Hybrid model: Virtual- First when safe to do so



#### MDT approach

- MDT approach to care, inclusive of:
  - Medical
- Allied health
- Nursing
- Aboriginal health
- Pharmacy



#### **Admitted model**

- Admitted service with 7-day medical coverage
- Acceptance of a wider range of care types: acute, sub-acute, non-acute and mental health