

# THE FRED HOLLOWES FOUNDATION INDIGENOUS AUSTRALIA PROGRAM

## Telehealth Information Sheet 1: Setting the scene – What is Telehealth?

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## WELCOME!

Welcome to the first in a series of information sheets on telehealth and its potential to improve outcomes for Aboriginal and Torres Strait Islander eye health patients. These information sheets intend to provide a starting point for discussion within The Foundation on the theme of telehealth.

## What is telehealth?

In short, telehealth is the delivery of health care at a distance, using information and communications technology.

**Four key elements of telehealth** noted by WHO<sup>1</sup>:

1. Its purpose is to provide clinical support
2. It is intended to overcome geographical barriers, connecting users who are not in the same physical location
3. It involves the use of various types of Information and Communication Technologies (ICTs)
4. Its goal is to improve health outcomes



## What is the difference between telehealth and telemedicine?

The International Organisation for Standardisation<sup>2</sup> defines:

**Telehealth** as the 'use of telecommunication techniques for the purpose of providing telemedicine, medical education, and health education over a distance'

**Telemedicine** as 'use of advanced telecommunication technologies to exchange health information and provide health care services across geographic, time, social and cultural barriers'

The World Health Organization (WHO) acknowledges that telehealth and telemedicine are difficult to define as:

- there is no one definition
- the terms telemedicine and telehealth are often used interchangeably
- telehealth is constantly evolving to incorporate new technology and adapt to the changing needs of patients and societies

WHO adopts a broad description as follows:

*"The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation, and for the continuing education of health care providers, all in the interests of advancing the health of individuals and their communities"*<sup>1</sup>

For the purposes of this series of information sheets, the term telehealth will be used and adopt this broad definition.

## Why consider telehealth?

ICTs have great potential to address some of the challenges faced by both developed and developing countries in providing accessible, cost effective, high-quality health care services<sup>3</sup>.

Telehealth has potential to:

- use ICTs to overcome geographical barriers and increase access to health care services
- benefit groups that traditionally suffer from lack of access to health care, including remote Aboriginal and Torres Strait Islander communities in Australia
- contribute to achieving universal health coverage<sup>4</sup> and Closing the Gap in health status between Indigenous and non-Indigenous Australians.

Critical success factors and the benefits of telehealth will be explored further in subsequent information sheets in this series.

## Helpful telehealth terms (described by Wade, 2013<sup>5</sup>)

### Two main modes:

1. **Synchronous, or Real-Time:** where participants interact with each other simultaneously, for example by video consultations, telephone, live text transmissions or chat rooms. Scheduling is very important.

2. **Asynchronous, or Store-and-Forward:** where participants send and receive the information at different times. As the data is stored, the service can be operated with more flexibility of timing. Examples include sending photographs, emails, or patient data such as blood pressure or blood sugar readings. Perhaps the most common and widespread use is Picture Archiving and Communications Systems in radiology.

### Telehealth classified by types of participants:

- a) **Provider to patient** a health care provider is at one site, e.g. a regional hospital, and the patient is at a distant site, e.g. at home or a remote health centre
- b) **Provider to provider** communication between 2 or more health care providers, without the patient being present, e.g. a primary care provider seeking advice from a specialist or a group of clinicians meeting for a case conference.
- c) **Remote and proximal provider** to patient where one health care provider is consulting with a patient at a distance and a second health care provider is physically present with the patient.
- d) **Health care students** medical, nursing and allied health care students can both assist the

patient with a teleconsultation and received education and clinical content via telehealth.

### Types of sites:

Where there are two health care providers involved plus the patient, we have the

- **initiating site** usually in closest proximity to patient and providing the primary care and
- **providing site** providing specialists expertise to the initiating site and is at a distance to the patient.

## Furthering the discussion on telehealth

The telehealth series includes planned information sheets on the following topics:

- Telehealth in Australia – more pilots than Qantas?
- What is the Foundation's involvement/interest in telehealth to date?
- Who's who in telehealth?
- What factors influence the uptake of telehealth (i.e. enablers and barriers)
- What technologies are required to enable telehealth?
- What are the critical success factors for successful telehealth-enabled models of care?
- Where and how have the benefits of telehealth been maximised to delivery high quality, safe, patient-centred care (particularly in Australia). Examples of good practice, in Australia and internationally.
- At what points in the patient journey could telehealth support/improve patient experiences and eye health outcomes? (Start with cataract journey first).
- Where is telehealth headed in Australia?

*Are these the topics you would like to see covered?*

*This is a live document and any corrections, additions or other feedback is most appreciated.*

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## References and footnotes

<sup>1,3</sup> World Health Organization (2009) Telemedicine: opportunities and developments in Member States: report on the second global survey on eHealth. (Global Observatory for eHealth Series, 2) [http://www.who.int/goe/publications/goe\\_telemedicine\\_2010.pdf](http://www.who.int/goe/publications/goe_telemedicine_2010.pdf)

<sup>2</sup>Australian Government Department of Health (7 April 2015) Telehealth. Retrieved from URL. <http://www.health.gov.au/internet/main/publishing.nsf/content/e-health-tele>

<sup>4</sup>Universal health coverage (UHC) means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship.

World Health Organization (6 April 2018) What is universal coverage? Retrieved from URL. [http://www.who.int/health\\_financing/universal\\_coverage\\_definition/en/](http://www.who.int/health_financing/universal_coverage_definition/en/)

<sup>5</sup>Victoria Wade (2013) How to Make Telehealth Work: Defining Telehealth Processes and Procedures. Unicare e-health. Retrieved from URL. [https://www.petermac.org/sites/default/files/media-uploads/How\\_to\\_Make\\_telehealth\\_Work\\_%28Victoria%20Wade%29.pdf](https://www.petermac.org/sites/default/files/media-uploads/How_to_Make_telehealth_Work_%28Victoria%20Wade%29.pdf)

