Presidents Welcome

As the inaugural President of the Australasian Telehealth Society I would like to welcome all members to this new and exciting initiative aimed at providing equitable healthcare for all. As health care providers are struggling to provide high quality care due to increasing healthcare costs, increasing aging population, increasing chronic disease and infrastructure struggling to service demand, we need new and innovative care delivery methods. Telemedicine and eHealth, the application of Information and Communication Technologies in medicine, is expected to play a major role in providing more efficient healthcare.

We established ATHS in March 2008 as a not-for-profit organisation to bring together individuals, companies, government and other organisations with an interest in promoting the advancement of telemedicine in Australia and New Zealand. The ATHS will work with the members to promote its objectives by:

1. Exchanging and sharing telemedicine information and services
2. Fostering networking and collaboration amongst members
4. Investigate and influence policy and legislative opportunities to integrate telemedicine into mainstream health care including promotion of Medicare Item Numbers and cross border registration of health professionals for telemedicine practice.
5. Promoting research and education by way of sponsorship of scientific meetings, courses and monthly newsletters.

We are in the process of setting up a Blog which could enable our members to exchange ideas and project outcomes with each other.

ATHS has been accepted by the International Society for Telemedicine and eHealth (ISfTeH) as the Australian and New Zealand representative. This will bring many additional benefits to our members.

I would like to thank the committee members for their tireless support to setup this Society. All have contributed enormous time and effort to put together the constitution and the registration of the society (not-for-profit organisation). We cannot forget Karen Monticelli’s effort to setup the website and importantly this newsletter.

We have exciting times ahead in this new field which amalgamate medicine and technology. I take this opportunity to request all members to actively contribute to the Society in order to promote the common goal, i.e. the advancement of telemedicine.

Dr. K Yogesan,
President,
Australasian Telehealth Society

Industry/Corporate Member Highlights

The Royal Flying Doctor Service of Australia (Queensland Section) is a professional and technologically advanced organisation and is a major provider of emergency aero-medical and primary health care services in Queensland.

The RFDS (Queensland Section) employs over 330 staff, including medical officers, women’s health doctors, flight nurses, allied health professionals, pilots and support staff.

Contact Details:
Royal Flying Doctors Service (Queensland Section)
12 Casuarina Street
Brisbane Airport QLD 4007
Ph: (07) 3860 1100
Web: www.flyingdoctor.org.au

Assoc Prof. Colin Carati,
Treasurer,
Australasian Telehealth Society

Ms Anne Galloway,
Committee Member
Australasian Telehealth Society

Dr Anthony Smith,
Committee Member
Australasian Telehealth Society

Join the Society
Become a member of the Australasian Telehealth Society Today. Apply online at www.aths.org.au
Using RPM to Connect Clients 2 Care

Overseas research indicates that telemedicine and remote monitoring are increasingly recognized as valuable tools for enhancing care quality in chronic disease management. They have the potential to deliver new savings for both patients and providers.

In Australia, early adopters are starting to use remote patient monitoring (RPM) technology. Loddon Mallee Rural Health Alliance, in partnership with 5 regional health care agencies, has implemented a large RPM project to support chronically ill clients in North West Victoria. Loddon Mallee Rural Health Alliance is a joint venture between 25 public health agencies, to increase the use of Information and Communications Technology (ICT) in the health sector.

The incidence of chronic disease such as chronic obstructive pulmonary disease (COPD) and congestive heart failure (CHF) is unusually high in the region. The Department of Human Services had funded 2 Hospital Admissions Reduction Programs (HARP) to meet these patient needs and several smaller hospitals are funding their own chronic disease programs for their communities, targeting the same diseases.

The prevalence of COPD and CHF across the region prompted Phil Coppin, Innovation Manager for Loddon Mallee Rural Health Alliance to look for technologies to help manage these conditions. “I had read a lot in overseas publications about RPM as a technology that was helping to improve patient outcomes with this patient cohort,” Coppin said. “When I started looking around I thought I would have to buy a product from overseas but to my surprise a web search turned up an Australian company, TeleMedCare.” This was the start of the project.

With funding provided by Multimedia Victoria, the project has installed 75 RPM units to manage chronically ill clients in their own homes and is in the process of researching the clinical efficiencies and systemic changes required to introduce this technology.

A patient in Kyabram, Victoria uses the TeleMedCare system

The Project Manager, Dr Helen Alkman, (RN) said “The monitors are installed into client’s homes and the clients and carers are taught to measure one or more physiological parameters using peripheral devices that are attached to the monitor.” The system can provide blood pressure, weight, forced spirometry, temperature, a single lead ECG, blood sugar level and blood oximetry. Clients can also complete questionnaires related to their condition provided via the system by their nurse or doctor. Measurement data is transmitted over the internet to a secure site where the client, HARP nurse, and the patient’s general practitioner can access the data. The clinicians then have accurate longitudinal data on which to make decisions regarding the client’s ongoing management. Already clients are finding that their confidence with self management is increasing. This is reflected in improved exercise and dietary behaviour, improved use of home oxygen and increased compliance with medical treatments such as anti-hypertensive medication and insulin. Carers are reporting feeling more reassured and becoming more familiar with the meaning of the clients various symptoms.

The technology also provides the health system with a benefit. By using the system nurses have been able manage a larger case load without extra resources. Hospital admissions have been saved and nurses have reported less time spent travelling to manage their client’s conditions.

The project is being evaluated with a suite of tools, qualitative comment, and process evaluation. A cost benefit analysis will also be developed. The preliminary research will be presented at the eHT 2008 Workshop held in Perth on November this year.

If you are interested to learn more contact:
Phil Coppin
Loddon Mallee Health Alliance
0408 600560
Phillip.coppin@lmha.com.au

The TeleMedCare system used by Loddon Mallee Rural Health Alliance
Coming Events

**eHT WORKSHOP 2008**
The Centre for e-Health is holding the 3rd International e-Health and Telemedicine workshop.
This year we have put together a new and exciting format as suggested by previous participants. Experts from around the globe will be ready to discuss successfully implemented telemedicine and e-Health projects. Be prepared to take home a new knowledge and understanding of how to implement and successfully run telemedicine projects.

**Topics of discussion include:**
- Digital Homecare
- Tele-Emergency Medicine
- Electronic Health Records
- e-Health Systems

- **Round Table Discussions on e-Health and Telehealth** - Discussion on Implementation, success, failures and issues.
- **Hands-On Courses** on Teleotology, Telepaediatrics, and Telemedicine Project Management (for Vendors and Industry)

Visit [www.centreforhealth.org.au](http://www.centreforhealth.org.au) for more information

**TELEMEDICON**
ATHS members are invited to participate in Telemedicon ([www.telemedicon2008.com](http://www.telemedicon2008.com)), the 4th Annual Conference of the Telemedicine Society of India (TSI). The conference is scheduled from the 14th to 16th of November 2008 in Chandigarh.

Calls for scientific papers are open until the 15th of September 2008.

The Secretary and organising committee of the TSI are pleased to provide 3 ATHS members with boarding and lodging and conference complimentary registration to the Telemedicon.

For further details on the benefits for ATHS members please contact Professor yogesan at yogi@lei.org.au

**ASIA-PACIFIC WORKSHOP ON TELE-EPIDEMIOLOGY**
Asia-Pacific workshop on Tele-epidemiology, October 23rd to 26th 2008

This workshop is being held at the School of Telemedicine & Biomedical Informatics, SGPGIMS, Lucknow India. This workshop is sponsored by UNOOSA-ISRO and SGPGI Telemedicine Program. More information on this event will be posted at [www.sgpgitelemedicine.org](http://www.sgpgitelemedicine.org) in the coming weeks.

For all events supported by the Australasian Telehealth Society visit the website [www.aths.org.au](http://www.aths.org.au) and click on ‘Events’.

Have an event that you would like advertised on the ATHS website or in the ATHS newsletter? Contact one of the Committee Members at [www.aths.org.au](http://www.aths.org.au)