

Connectivity

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A key priority for Government in terms of its overall e-health agenda must be connectivity. Connectivity is an essential building block in e-health and represents the foundation upon which other applications can be implemented. “Without the connectivity to populate and to access health data health care will remain a world of disconnected silos of information.”¹

Promoting connectivity, particularly through uptake of public key infrastructure (PKI)² standards and secure messaging³ represent measures that can drive secure electronic communication within the health sector, between GP, other specialists, hospitals and pharmacists.

It is unnecessary for the health sector to wait for a national standardised shared electronic health record, referral or discharge summary to realise widespread, secure, electronic communication. Much can be achieved by focussing on connectivity now while the complex and indeed time consuming development of e-health standards and complex applications are underway.

A concerted effort is needed to increase uptake of secure messaging and PKI standards that will encourage and allow secure transmission of quality health information such as discharge summaries and referrals as well as the transfer of other health information.

In terms of promoting connectivity, at this point in time there needs to be less concern about what doctors, hospitals and pharmacists are communicating, and more focus on enabling them to communicate in a secure environment.

Change management remains a challenge in implementing e-health solutions. Creating a situation where electronic communication is the norm reduces risks associated with change management issues when complex applications are implemented in the future.

Further establishing widespread connectivity will lay down the essential building blocks for the ready uptake and implementation of significant initiatives directly reliant on connectivity such as e-prescribing, e-consultations, e-referrals. “Once information is flowing electronically, other applications and services can build on this information at relatively low incremental cost; without it, the cost becomes prohibitive, blocking any movement forward.”⁴

It is possible to get connectivity happening rather than waiting for, and depending on, complex applications to drive basic communication.

¹ Georgeff, Professor Michael, “E-Health and the Transformation of HealthCare, Australian Centre for Health Research, April 2007, pp 10

² Standards that authenticate the user.

³ Which can incorporate authentication standards.

⁴ Georgeff, Professor Michael, “E-Health and the Transformation of HealthCare, Australian Centre for Health Research, April 2007 pp11

A key barrier to broad based connectivity is the current lack of interoperability between competing messaging systems. The AMA is of the view that action at the national level is required to bring messaging providers together to gain a commitment that they work together to ensure secure messaging in Australia is interoperable.

The AMA calls on the Federal Government to recognise that strategies to encourage and promote connectivity within the health sector using standards based clinical messaging and authentication systems must be the highest priority on the e-health agenda and further that it must facilitate negotiations with industry providers to ensure the development of interoperable messaging systems.