Queensland Digital Clinical Charter

Queensland is in the middle of one of the largest digital health programs we will see in healthcare and probably one of the largest in Australia.

As the rollout continues and the impact on patient care is realised, it has become increasingly evident that clinicians must influence the digital health agenda and be central to decision-making. The Queensland Digital Clinical Charter has been created to guide this process.

As a reference point for all digital health programs, the Charter aims to ensure that clinician and consumer needs are met and that digital healthcare investment truly improves the delivery of care.

In partnership with clinicians, consumers and managers, The Queensland Clinical Senate developed the Charter to:

· Clearly outline the digital health needs of clinicians to ensure the best outcomes for patients

· Inform and calibrate digital health projects

· Support decision making from a clinical perspective at each stage of the digital program.

The Charter was developed at the Senate's November 2018 Digital Health meeting and distributed widely for consultation. It has been endorsed by the Senate Executive and the Queensland Health System Leadership Team in February 2019.

Foundational principles for clinical digital transformation

- Our consumers and clinicians are at the centre of the digital ecosystem

- Systems are integrated across the continuum of care (e.g. hospitals, primary care, aged care)

- Information collected spans the different domains of clinical data acquisition (e.g. clinical notes, investigation results, medical devices, patient notes)

- Devices are appropriate, functional and fit for purpose

- Training is multimodal, inclusive and contextually specific

- Infrastructure including bandwidth is adequate across the spectrum of care e.g. devices, medical grade Wi-Fi

- Security is strong

- Constant improvement of the system occurs and the prioritization of this improvement is clinically driven

- There is a clear single source of truth for data, source of truth is clinically driven

- There is strong clinical governance

- Ergonomics and user experience are integral to solution design

- User experience informs design

Horizon One: digital basics

- Software systems will be intuitive (e.g. minimal logins and voice recognition)
- Mobility is enabled as appropriate (e.g. Follow Me desktop, BYOD)
- Clinical results reporting is governed and transparent
- There is a standardised approach to data entry with consistent data definitions and workflows across all sites

- All clinical and administrative information is coded using national standards
- Closed loop medication management is enabled
- Clinical decision support is
  – Evidence based and regulated for consistency
  – Customisable for maximum impact and to minimise alert fatigue

Horizon Two: leveraging digital data for the clinical teams caring for the patients

- There is development of a clinical informatics workforce skilled in all stages of the data cycle
- Appropriate data is collected as part of routine clinical care without additional effort required
- Systems and solutions can be integrated real-time to facilitate data analytics and business intelligence supporting intelligence-driven decision-making
- Development and monitoring of quality metrics including patient reported outcomes and experiences (PROMS and PREMS respectively)

- All systems have inbuilt end user query tools for reporting
- Analytics is an integral part of software rollout
- A streamlined appropriate consent for data to be used in clinical research is developed
- Information is appropriately managed and governed
- There is a greater level of access to, and transparency of personal health records supporting enhanced individual health literacy and greater patient involvement

Horizon Three: new models of care

- Our workforce is ready and skilled for new models of care
- Virtual interaction between clinicians and patients is enabled, facilitating equivalent clinical experience for both clinician and patient regardless of modality
- There is a focus on large data sets informing the care of individuals
- Analytics moves from descriptive to predictive to prescriptive and the model of care moves from break/fix towards predict/prevent

- Artificial intelligence is an iterative, transparent tool to support patient care and improve outcomes
- New hardware such as wearables, smart devices, drones and robotics are harnessed to achieve our clinical aims
- True clinical outcomes improvement is more important than innovation