



4 December 2009

The Hon Kevin Rudd MP  
Prime Minister  
Parliament House  
CANBERRA ACT 2600

Dear Prime Minister

### **Fast-tracking health reform through e-health**

The Coalition for eHealth Australia comprises more than 50 organisations which came together to improve the strength and coherence of the health system's voice on e-health issues.

At a meeting of the Coalition this week, attended by leaders from global consultancies involved in e-health developments here and internationally, there was strong consensus that we should write to you prior to the coming COAG meeting to indicate our support for the aggressive implementation of the National E-Health Strategy endorsed by the Australian Health Ministers' Conference in December 2008.

As recognised by your government, substantive reform is essential to ensure the sustainability of Australia's healthcare system. You have already identified that e-health is a key enabler of health reform that can improve the quality of care (save lives), increase productivity (save money) and open new opportunities for economic development in the e-health market. We wish to impress on you that **e-health can also deliver reform in its own right.**

The National Health and Hospitals Reform Commission's report drew attention to four themes which will enable Australia to achieve a sustainable, high quality, responsive health system for all Australians. **Substantial progress can be achieved in each of these four themes through investment in e-health; if necessary, in advance of any change in national governance arrangements for the health sector:**

1. **Taking Responsibility** – individuals and communities can be greatly assisted in taking responsibility through e-health solutions that provide better consumer information and education, assist patients and their families to navigate the health system more easily, and support individual use of personal health records.
2. **Connecting Care** – e-health solutions will provide the platform for secure sharing of clinical histories and delivery of care giver referrals, more effective management of prescriptions and medications and support for lower cost preventive models of care in the community. E-health can assist in making health care delivery more collaborative, scalable, flexible and widely available.
3. **Facing Inequalities** – Inequalities can be recognised more quickly by harvesting data from real-time systems and bringing it together to inform decision makers at various levels in the health system and facilitate the reallocation of resources and services. Under-served areas will benefit from the wider availability of services delivered by e-health technology.
4. **Driving Quality Performance** – e-health solutions will provide both an aggregated, systemic view of health system performance in terms of quality, access and cost and opportunities for providers to improve the quality, effectiveness and efficiency of care at the point of delivery.

In addition to providing direct benefits to care delivery, e-health solutions will provide the necessary insight and system-wide visibility to inform mid-term structural reform options, providing an empirical basis for key decisions around funding, workforce and capital allocation.

**In general, we see no meaningful health reform taking place without a prominent and coordinated role for e-health.**

We note that the NHHRC reform recommendations are predicated on continuing progress against the National E-Health Strategy but until there is a clear, well-resourced plan to realise the National E-Health Strategy, your Government's reform options are limited.

The Strategy has the potential to be partly realised via a set of key innovations developed and deployed with the National Broadband Network. While e-health activities are not dependent upon the NBN, the roll out of this important national network will provide the opportunity for a series of early gains, especially in areas associated with care-at-a-distance and in clinical support to rural, regional and remote areas. Furthermore the NBN has the potential to enable much improved integration between primary and secondary health services, a key Commission position.

We believe that the National E-Health Transition Authority (NEHTA) has shaped a coherent vision and roadmap and has defined several "Foundation Projects" that must be funded and implemented to provide a shared basis for success. The States and Territories are also progressively aligning with the NEHTA roadmap and its foundation projects. We also note growing support of the private sector; the Business Council of Australia has strongly supported action on e-health in their letter to you dated 21 October 2009, the content of which we endorse. Finally, there is widespread consumer acceptance of and desire for a health system transformed by e-health – an independent public opinion poll commissioned by NEHTA found that 82% of consumers say they would use an e-health record.

**We believe the time to act is now.** If we delay, we will lose momentum, lose the opportunity for key jurisdictions and stakeholders and lose valuable resources to other countries that are proceeding aggressively down the e-health path.

**We ask you as Prime Minister to lead the way.** This is a nation-building exercise that requires clear vision and strong leadership. To date, your Government, while supportive, has not articulated a clear position and commitment. Without this, all jurisdictions will struggle to move ahead with any significant reform. We also believe this is a great opportunity to chart a new course; to give the broader health community something to aspire to and work toward, and that this is an essential step towards providing a health system fit for the 21st century.

The National E-Health Strategy has wide support, including ours. We ask that you fast-track health reform by resourcing and implementing the National E-Health Strategy as a matter of urgency.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Michael Legg', with a stylized flourish at the end.

Michael Legg  
for the Coalition for E-Health

## The Coalition for E-Health

### Consumers, Patients & Carers

- Cancer Voices Australia
- Choice - Australian Consumers Association
- Consumers' Health Forum of Australia
- Leukaemia Foundation of Australia
- Cancer Council Australia

### Health and Aged Care Colleges, Societies & Associations

- AAPP - Australian Association of Pathology Practices
- AACB - Australian Association of Clinical Biochemists
- ABCR - Australian Blood Cancer Registry
- ACAA - Aged Care Association Australia
- ACHI - Australian College of Health Informatics
- ACHSE - Australian College of Health Service Executives
- ACRRM - Australian College of Rural and Remote Medicine
- ADIA - Australian Diagnostic Imaging Association
- AGPN - Australian General Practice Network
- Australian General Practice Accreditation Limited
- AHHA - Australian Healthcare and Hospital Association
- AHRMDA - Australasian Health and Data Managers Association
- AMA - Australian Medical Association
- ASM - Australian Society of Microbiology
- ATHS - Australasian Tele-Health Society
- APS - Australian Psychology Society
- Australian Association of Practice Managers
- Fitness Australia
- HIMAA - Health Information Managers Association Australia
- HGSA - Human Genetics Society of Australasia
- NCOPP - National Coalition of Public Pathology
- OT Australia
- Pharmacy Guild of Australia
- RACGP - Royal Australian College of General Practitioners
- RACMA - Royal Australian College of Medical Administrators

- RANZCR - Royal Australian and New Zealand College of Radiologists
- RCNA - Royal College of Nursing Australia
- RCPA - Royal College of Pathologists of Australasia
- RDAA - Rural Doctors Association of Australia
- Society of Hospital Pharmacists of Australia
- Speech Pathology Australia

### Informatics Societies, Associations & Research Units

- ACS - Australian Computer Society
- AEEMA - The Australian Electrical and Electronic Manufacturers' Association
- AIIA - Australian Information Industry Association
- ANCC EH - Australian National Consultative Committee on eHealth
- Australian Centre for Health Innovation
- CSIRO through The Australian e-Health Research Centre
- Engineers Australia
- HISA - Health Informatics Society of Australia
- HIPS - Health Information Privacy & Security
- MSIA - Medical Software Industry Association
- Melbourne University
- Monash University
- NIA - Nursing Informatics Australia
- Sydney University
- University of NSW
- University of Western Sydney

### Standards Development & Testing Organisations

- AHML - Australian Healthcare Messaging Laboratory
- ACHS - Australian Council on Healthcare Standards
- HL7 Australia
- IHE Australia - Integrating the Healthcare Enterprise
- OpenEHR
- Standards Australia
- NCCH - National Centre for Classification in Health

### Consulting Firms

- Accenture
- Booz & Co (Australia)
- CSC
- Deloitte Touche Tohmatsu
- Ernst & Young