Appendix A: Our Current Thinking

This Appendix provides background and contextual information related to this RFI. The information is provided with the intent that you can ascertain the scope of the required Services in sufficient detail to enable you to formulate your response to this RFI.

# Introduction and Context

## Services are currently delivered by a mix of commercial, university, and non-government organisations that together handle around two million calls by the public per year. The included services are: Healthline, Quitline, Poisonline, Immunisation Advisory Centre (0800 Immune), Hepatitis C helplines, Alcohol and drug helpline, Depression helplines and Gambling Helpline. (see Appendix B for an overview of the current services.

## The Ministry is looking to purchase an enhanced sustainable integrated national telehealth services to provide both unplanned care and counselling services through a multi-channel approach including telephone triage and phone advice; text; email; phone applications; social media and web-based services. This will allow a person to receive prompt triage, health advice, support, package of counselling care; information and sign posting to appropriate services and care.

## In the context of the national telehealth service, “telehealth”, is defined as the use of information and communications technologies along with appropriately trained health professionals and other health workers to deliver health services and transmit health information over distance. Refer to clause 5, Glossary..

## The use of video-conferencing for virtual consultations may be a future development for the telehealth service however telehealth for the purposes of this RFI is more broadly defined.

## These services are of significant value to our most vulnerable populations, and services must be culturally sensitive and appropriate to user and community needs.

The national telehealth services will continue to be free to the user and available 24-hours a day seven days per week either by telephone or on-line. A fully integrated service must be delivered including, but not limited to, the efficient use of IT, optimising an operational infrastructure, and the seamless transition to clients as the end-user from one service to another. Delivery of a fully integrated service may be by a single provider or multiple providers.

# Outcomes Sought

## The vision for the national telehealth service is that the right thing to do is the easiest thing to do for users and providers. The vision underpins the seven principles below:

* Public trust and confidence in the service.
* Assisting in delivering appropriate care in the right setting by the right person at the right time.
* Improving the quality of the service and user experience.
* Providing increased use of self-care or care at home or in the community with the same or better outcomes.
* Having access to and use of a shared patient record that will be viewed and updated by those providing care or advice, wherever practicable.
* Providing prompt assistance with public health issues and natural disasters.

## Figure 1: Vision, Principles, Objectives, Outputs and Outcomes for the new National Telehealth Service.

## The shape of the new service will be influenced by how provider(s) can best meet requirements to:

* Improve public access to a range of telehealth services. The preferred provider(s) will develop a service with a mix of options including: a nurse-triage telehealth service; counselling service; and health information provision, with callers provided with high quality advice and, if needed, referred on to other services.
* Rationalise call centre infrastructure, while using a mix of appropriately qualified frontline staff more efficiently and improving service sign posting.
* Provide services that comply with Ministry specifications eg. Tier 1 smoking cessation service specification; e-therapy framework for mental health and addiction services.
* Provide a standard approach to after-hours triage and advice so callers get consistent, high quality advice across the country.
* Deliver secondary triage services for low acuity callers referred to the service from 111 Ambulance Communications Centres.
* Provide rapid transfer of calls and referrals to and from ambulance services, primary care and other health service providers including non-government organisations.
* Deliver a single co-ordinated approach to service development, delivery and promotion that will ensure the ability for people to access high quality telehealth services to maximise health outcomes.
* Deliver a wide range of options available locally to callers, including smart phone applications, a symptom checker and interactive communication to the national telehealth service via text and email.
* Capitalise on and integrate with national health IT initiatives, including the shared patient care record initiative.
* Integrate with local primary care services’ urgent care arrangements, including ‘after hours’ services.

## **Integration**

## Whilst we are seeking service integration we are open minded about how this can best be delivered. Integration across the various services can be achieved through a single provider, or a lead provider, or a joint venture etc. Multiple providers would need to work within an integrated service framework.

# Strategic intent for each of the service areas

## Strategic Intent for each service area:

**Healthline**

Healthline is the Ministry’s national 24-hour telephone triage and health advice service. Healthline offers the public a confidential, reliable and consistent source of advice on healthcare, 24 hours a day, 7 days per week, so that callers can manage many of their problems at home or know who to contact or where to go to for appropriate care or further advice. The service aligns with key policy in regards to the reduction of after-hours primary care, ambulance services and emergency department waiting times as described in the Ministry’s Statement of Intent[[1]](#footnote-1) and Health Targets[[2]](#footnote-2).

**Quitline**

Quitline is the Ministry’s national smoking cessation service. Its aim is to reduce tobacco related mortality and morbidity and to decrease inequitable tobacco related health outcomes. The service encourages and supports people who use tobacco to quit through a range of services including telephone counselling and advice, text to quit, and/or on-line services and provision of subsidised nicotine replacement patches, gum and lozenges.

**Immunisation**

## The 0800 phone line service is one component of the wider service delivered by the Immunisation Advisory Centre. Callers can receive information and advice about immunisation.

## The role of the Immunisation Advisory Centre is to support the Ministry to achieve whole of government priorities including protecting vulnerable children, more specifically by supporting the Ministry and local service providers with clinical and technical advice that helps all immunisation programmes to be delivered. This includes supporting the health target2:

## **National Poisons Centre**

## The National Poisons Centre (NPC) is New Zealand's poison and hazardous chemicals information centre providing advice via a 24 hours a day, 7 days per week free emergency phone service.

## The service addresses the need for immediate, accurate and current information about poisoning and treatment. It helps callers to manage some instances of poisoning at home or will inform them who to contact or where to go to for appropriate care or further advice. The service aligns with key policy in regards to reduction of after-hours primary care, ambulance services and emergency department waiting times as described in the Ministry’s Statement of Intent1 (Ministry of Health 2010. Statement of Intent 2011-14) and Health Targets2 (<http://www.moh.govt.nz/healthtargets>).

## The service uses the 'TOXINZ' database to inform the telephone line service and is also accessible online to medical professionals.

# National Depression Initiative

# The National Depression Initiative (NDI) programme seeks to reduce the impact of Depression on the lives of New Zealanders. It is part of the Mental Health and Addiction Service Development Plan and the Suicide Prevention Strategy for New Zealand.

# The telehealth service component of the NDI provides 24 hours a day, 7 days per week primary care and referral for NDI users seeking additional support to that available through the online information and self help programmes. Support ranges from emergency services response through to primary mental health care and general assistance with sourcing online information and help. .

# Problem Gambling

# The Gambling Helpline provides telephone callers with access 24 hours a day, 7 days per week to support from trained problem gambling counsellors who can provide psychosocial intervention support and referrals to other health providers for callers requesting face-to-face counselling. The Gambling Helpline is available to callers who are concerned about their own gambling as well as family and affected others who are concerned about someone’s gambling.

# Alcohol and Drug

The nationwide AlcoholDrug Helpline seeks to reduce the harm caused by alcohol and other drugs by providing information on treatment options including self-management and referral to treatment services for people concerned about their own or someone else's alcohol and drug use.

**Hepatitis C**

The hepatitis C phone line promotes knowledge of hepatitis C virus infection and its implication for those affected by the disease. The aim being to reduce the incidence of hepatitis C and to reduce secondary transmission of hepatitis C in the community.

Refer to Appendix C for relevant strategic documents and Appendix D for further detail on the various components for the national telehealth service.

# Collaboration and Partnerships

The Ministry is collaborating with ACC and the Ministry of Business, Innovation and Employment (MBIE) (Worksafe NZ Dec 2013), who may become co-purchasers of some parts of the National Telehealth Service.

The strategic objectives for ACC and MBIE with regard to the national telehealth service are outlined below.

ACC’s objectives are:

* To work with the Ministry of Health through a telehealth service to future proof urgent and unplanned care services for ill and injured New Zealanders
* To provide better rehabilitation outcomes for injured New Zealanders through the provision of early, easily accessible, and appropriate clinical advice
* To improve the experience of ACC clients with a more seamless integration of services
* To increase awareness of, and provide early alerts for referral to injury prevention interventions.

MBIE has an increased focus on Occupational Health as per recommendation number seven of the Independent Taskforces Report.[[3]](#footnote-3) The Telehealth project fits into three of the six actions Worksafe NZ has committed to doing in response to the Taskforces report. These are to:

* Start by focusing on the occupational causes of chronic ill health, on preventative measures and monitoring and enforcing those measures.
* Address occupational health in national programmes and harm prevention programmes it undertakes with business and workers.
* Work with other agencies, including ACC, to identify emerging trends and issues relating to occupational health and compensation claims.

The Telehealth project also fits into two of the three objectives outlined in the Workplace Health and Safety Strategy for New Zealand to 2015 (WHSS) National Action Agenda 2010-2013; which outlined the need to:

* Raise awareness of occupational health issues, and
* Improve surveillance of occupational disease.

The (WHSS) Occupational Health Action Plan to 2013[[4]](#footnote-4) outlines the following objectives:

* For MBIE to work in partnership with Government agencies to improve occupational health (2.3, p.11), and
* For MBIE and MOH to specifically assess the feasibility of expanding the Healthline Service to include occupational health Issues (3.9, p.16).[[5]](#footnote-5)

# Glossary

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| **Term** | **Definitions** |
| Telehealth | Telehealth is the use of information and communications technologies to deliver health services and transmit health information over distance. It is about transmitting voice, data, images and information rather than moving care recipients, health professionals or educators. It can encompass advice, support, assessment of symptoms, triage treatment, preventive (educational) and curative aspects of healthcare services. |

1. Ministry of Health. 2013. Statement of Intent 2013-2016: Ministry of Health [↑](#footnote-ref-1)
2. http://www.moh.govt.nz/healthtargets [↑](#footnote-ref-2)
3. Working Safer: A blueprint for health & safety at work” http://www.mbie.govt.nz/pdf-library/what-we-do/workplace-health-and-safety-reform/Safety-First-blueprint.pdf [↑](#footnote-ref-3)
4. <http://www.business.govt.nz/healthandsafetygroup/about-health-and-safety/whss/action-agenda-action-plans/occupational-health-action-plan-to-2013> [↑](#footnote-ref-4)
5. For the avoidance of doubt, the RFI is for an integrated Telehealth Service, where Healthline is one component. [↑](#footnote-ref-5)