

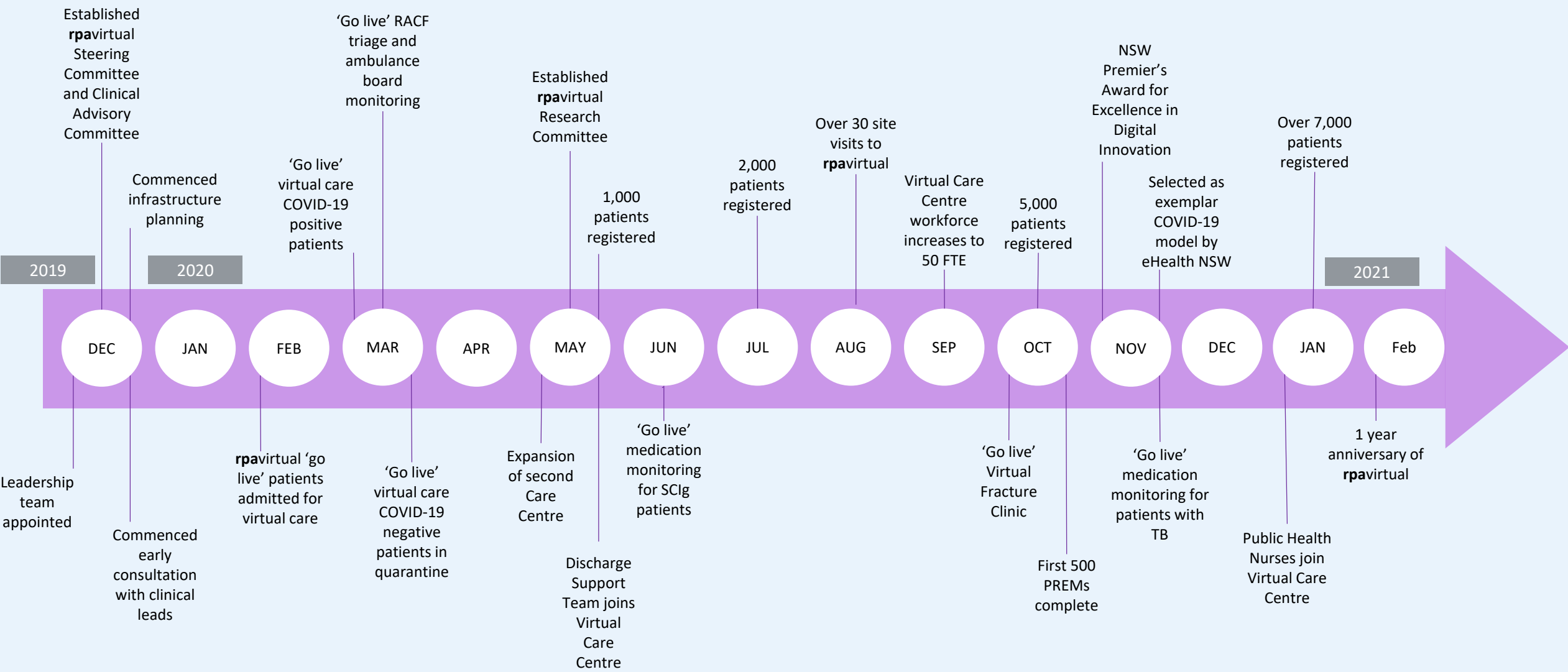
RPA Virtual Hospital

A perspective from Sydney, Australia

Dr Owen Hutchings, Clinical Director, RPA Virtual Hospital

The journey so far...

RPA Virtual Hospital Key Milestones



Features of rpavirtual

- District-wide service (> 670,000 residents in 126km²)
- Executive structure similar to traditional hospital – General Manager, Clinical Director, DON
- 24/7 Virtual Care Centre to respond to deteriorating patients with 1800# and on-call medical roster
- Multidisciplinary Care Centre team complemented by ‘on the ground’ Sydney District Nursing team
- Local relationships with ‘bricks and mortar’ hospital specialists support safe and effective virtual models of care with agreed and documented in-person assessment, referral and escalation pathways
- Menzies Centre for Health Policy commissioned to conduct the evaluation – final report due April 2021
- RPA Virtual Hospital Research Steering Committee contributes to the evidence for innovative, effective, and sustainable models of virtual care through high quality research and evaluation
- Collaboration and communication with general practice
- **rpavirtual** Consumer Network ensures collaborative partnerships with consumers at all levels

Successes and challenges

Successes

- First virtual hospital in NSW – informed state-wide virtual care strategy
- Robust governance model with comprehensive documented clinical models of care and protocols with decision making algorithms to support patient management
- Provision of care to 11,584 unique patients – 1,890 COVID-19 positive and 4,774 COVID-19 negative patients in health hotel quarantine*
- Patient experience data – 85% of patients rate care as excellent or good
- 2020 NSW Premier's Award for Excellence in Digital Innovation

Challenges

- Realising the potential of a virtual hospital outside the pandemic – >90% of patients pandemic related
- Funding classifications – current non-admitted outpatient classification has limitations
- Integration and expansion of new technologies within existing IT systems

What does the future look like?

- Planning/scoping of new models of care/programs underway:
 - Feasibility trial of remote monitoring uncomplicated acute diverticulitis patients
 - Virtual minor trauma follow-up clinic
 - Expand virtual fracture clinic to include all SLHD hospital EDs and direct GP referral
 - Virtual rehab model
 - Virtual low back pain care post-discharge from hospital
 - Virtual care for patients with chronic headache
 - AI to assess wounds and recommend treatment
 - Coordination and oversight of District's Potentially Preventable Hospitalisations program
 - Expand palliative symptom monitoring and health maintenance programs
 - Virtual ICU ('eICU') care for patients in smaller rural hospitals

