

Northern Health HealthLinks

Elisa Tumino
HealthLinks Manager

Northern Health
outstanding Health care



Northern Health
www.nh.org.au

Northern HealthLinks:

- Yearly patients enrolment: 1638 patient
- Average patients 936
- WIES Conversion 2057

Pre enrolment (March- June 2016)

Ambulatory & Community Service mapping and baseline

Replicated the algorithm

Analysed NH data

Set monitoring system (HL dashboard)

Set up Governance structure




Enrolment commenced July 1st 2016

- Flagging & monitoring patients
- (Re)directing care to HL patients
- Setting up interventions

Activity to date

- 1347 patients enrolled
- 1400 WIES utilised (650 remaining)

 HealthLinks Dashboard - Summary (AMB101)



Confirmed HealthLinks Patients

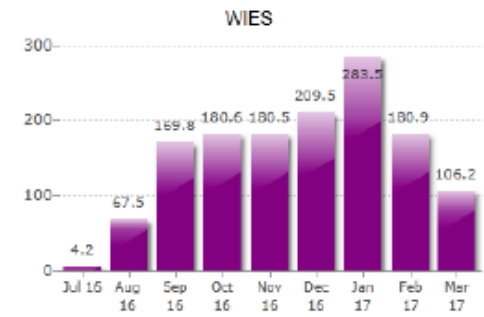
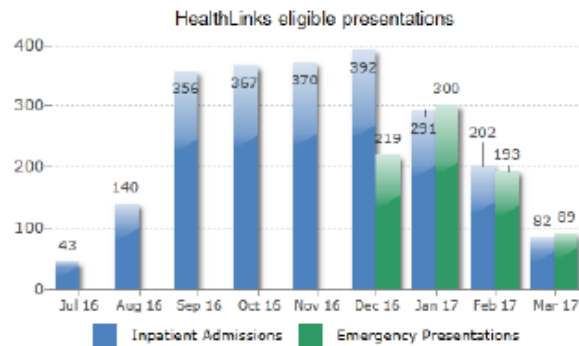
[Details](#)

Total Patients: **1,249**

No of patients with unplanned admissions since July 1st: **864**

Total HealthLinks WIES : **1,382.7**
(Annual Target 2,057)

Patients Removed: **94**

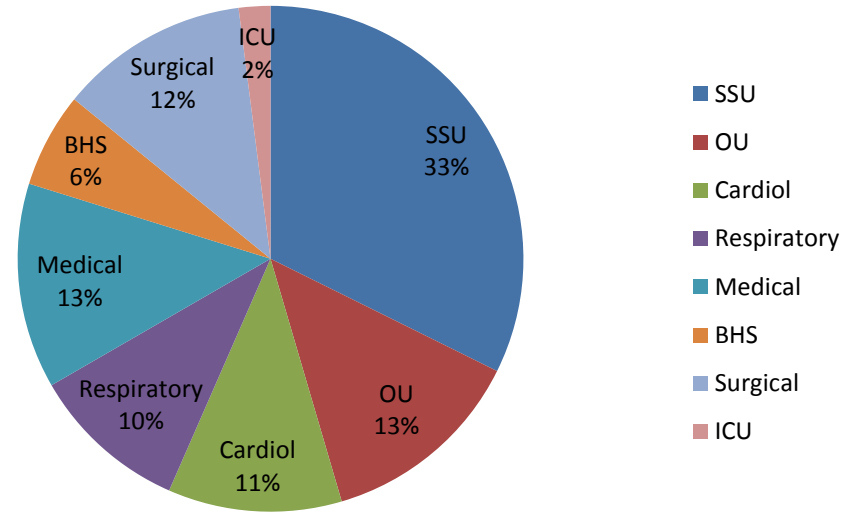


Our Cohort

1. Very unwell and medically complex. Have long and expensive medical admissions. Older well people who become acutely unwell or older people who are pre-palliative. High WIES users, low admissions
2. Older with chronic disease or younger with multiple co-morbidities. Require support and integrated care to be in the community. Can easily utilise 2.2 WIES, low admissions
3. Younger +/- chronic disease with psychosocial factors and unhealthy lifestyles as reasons for admissions. High admission rates (SSU) and low WIES utilisation
4. Young with mental health, D & A, complex psychosocial factors. Known to many services, utilise ED and SSU. May have FP plan. High admission rates (SSU) and low WIES utilisation

Activity in acute wards

- 45%- SSU /Unit G
- 11% cardiology ward
- 10% respiratory ward
- 13% medical wards
- 6% BHS medical ward
- 12% surgical wards

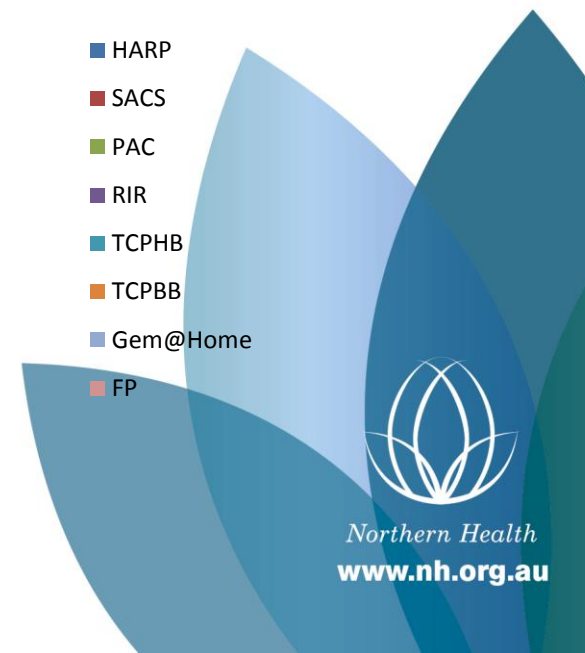
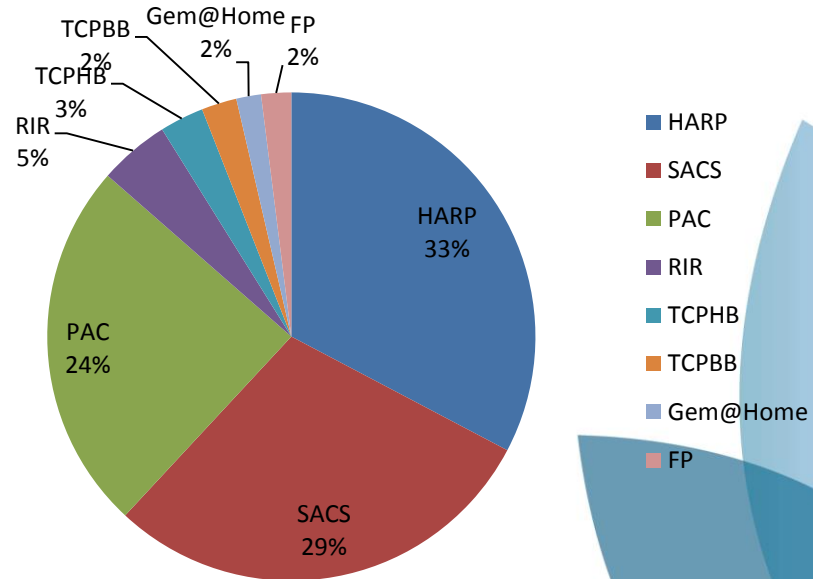


Interventions

- 53% HL patients have A & C intervention
- 1.6% - ACP/ 3.6% - MPOA
- 1.7%- Frequent Presenter Plan

Activity in Ambulatory & Community

- HARP- 28%
 - SAC- 25%
 - PAC- 21%
 - RIR- 4 %
 - TCP- 4.4%
 - Gem@Home 1.4%
- HIP 78%



Interventions:

1. Alert and Reporting Systems
2. Re-allocation of Discharge Support Services
3. Aligning HIP and HealthLinks
4. Brains trust
5. Emergency Department Frequent Presenters
6. Medibank Partnership-CarePoint Program- 50 patients

In the Pipeline:

EMPHN partnership

HL Medical support 0.4 EFT

GP project- shared IT platform



What's being changed...

- Our patients journeys are telling us the story
- Seeing some large gaps in our service delivery
- Having discussions and conversations from a different perspective
- Re-aligning our workforce to high needs areas/patients
- Talking with our partners

