

Implementing a technology roadmap

Providers need systems that are geared for collecting the data they are required to report on, writes MARK SHELDON-STEMM.



As the Department of Health continues to roll out the recommendations of the Royal Commission into Aged Care Quality and Safety, many providers are struggling with the additional data collection and reporting.

There are often two main reasons for this.

Firstly, they often don't collect the data required. Secondly, many of the systems in use are not geared to easily extract the data when it is collected.

For many years the sector has talked about a technology roadmap to improve the collection and reporting of data. But less has been said about how to develop and implement it.



Mark Sheldon-Stemm

Every aged care provider will have some unique requirements. Many will have some long-term contracts with current software providers while others will have the basics and need to build on that.

The search for software is not always easy. But today there is a wide range of options on the market. And most are available on a pay-per-user model instead of having to pay large sums of money upfront.

The focus should be on finding software that suits the functions you have defined. For example, a feedback system that is easy to use.

Essential steps

There are four key steps to defining what is needed to develop a technology roadmap:

- clearly define the domains where data is collected and for what purpose
- decide on the systems for each domain based on the function required
- review the data flow, known as data mapping, between the different systems and define how they need to fit with each other and who will input and use the data
- assess the costs of the systems and how this relates to the overall operating cost of the organisation.

Defining the domains

When aiming to clearly define the data domains, it is usually best to think in terms of:

- care and clinical
- feedback and communication
- general operations.

Once the template has been developed then it is a matter of slotting in the systems currently in use or required. One system will be designated the main one for storage of information but not collecting all the data.

One of the common fallacies today is: We don't want several systems but rather one that does everything.

This approach is flawed as there is no one system – and there has never been – that does everything. Waiting for one is likely to see an organisation slowly disappear. This adage applies: The more one system does the less it does well.

The right software mix

As with everything there is no one-size-fits-all approach.

Mapping the data

Once the software has been selected, analyse the available data and map it to see where information needs to pass from one system to another.

Most modern software programs are able to pass data between each other using an application programming interface – commonly called an API – rendering the idea of needing to integrate systems an outdated one.

Assessing costs

Most systems these days cost \$10 to \$350 per user, or client, per year. A clinical care system is at the more expensive end of this range because it holds the vital data required to deliver care.

Overall, operating a combination of software should cost around 1.5 per cent of revenue each year and overall IT should cost about 2.1 per cent of revenue.

This is considered low compared to businesses in general where the benchmark is 4-6 per cent of revenue spent on IT systems including software, support and connections.

The reduced costs are a result of using a variety of functional systems.

Approach it like LEGO

Developing and choosing the technology to use in aged care is not an easy task.

However, breaking it down into the elements required and building the systems in stages – a bit like LEGO – provides a good solution for keeping pace with the reporting requirements now and into the future.

It also means there is less need for additional administration or effort on behalf of the organisation. ■

Mark Sheldon-Stemm is principal of aged care consultancy Research Analytics