Minister for Health

1 0 DEC 2007

Mr P Costa MP
Chair
Standing Committee on Broadband in Rural and Regional Communities
Parliament House
Macquarie Street
SYDNEY NSW 2000

Dear Mr Costa

I refer to your letter concerning the Standing Committee on Broadband in Rural and Regional Communities.

Please find enclosed the submission from the NSW Department of Health. The contact officer in the Department is Mr Craig Smith, Acting Chief Information Officer, who can be contacted on (02) 9391 9929 or by email to csmit@doh.health.nsw.gov.au.

Thank you for the opportunity to make a submission on this important matter.

Yours sincerely

Reba Meagher MP
Minister for Health

Standing Committee on Broadband in Rural and Regional Communities
Submission by NSW Department of Health

BACKGROUND

Broadband services provide essential communications and information access for NSW Health staff.

NSW Health requires broadband services that are available in all parts of the state that are reliable, reasonably priced and of adequate capacity.

KEY ISSUES

(a) The availability of telecommunications (including broadband) and other technology services in rural and regional communities

The current availability of broadband services to Health facilities in rural and remote parts of the state is:

o   All major hospitals in rural Area Health Services are connected to broadband.

o   However, connection speeds particularly to the smaller hospitals tend to be insufficient to meet business requirements.

o   Many remote facilities such as community health centres are either not connected at all or do not have enough capacity.

Acquisition of broadband by rural Area Health Services is hampered by high prices. These are significantly higher than in metropolitan areas. Available connection speeds are generally lower than those offered in Sydney and major regional centres.

(b) The benefits and opportunities for rural and regional communities of having access to telecommunications (including broadband) and other technology services

Broadband services offer considerable benefits for the delivery of healthcare in rural and remote communities because they enable access for health professionals to key clinical information systems such as:

o   medical imaging applications that enable electronic transmission and storage of X-Ray images.

o   electronic medical record applications deployed at the point of care (eg discharge referrals, results reporting, emergency department, operating theatre and scheduling systems).

o   electronic health records for use by GPs and other primary healthcare providers.

o   patient administration systems.

o   incident information systems.

o   Telehealth and Telemedicine videoconferencing services.

Broadband services also provide streamlined and efficient access for NSW Health staff to key business information and corporate services systems.

(c) Disincentives and barriers to the provision of telecommunications (including broadband) and other technology services to rural and regional communities

The barriers to the provision of broadband services to rural communities are:

o   Insufficient demand: Low demand means little incentive for carriers to invest in networks. As a result, prices remain high and available connection speeds remain low.

o   Lack of competition: Opportunities to reduce prices through competitive procurement are limited in these areas because there is often only one carrier (Telstra) that offers broadband services.

(d) The consequences for rural and regional communities of not having, or not having adequate, access to telecommunications (including broadband) and other technology services, having regard to likely future industry and technological developments

Inadequate access to broadband services will result in the following adverse consequences for patient care:

o   Recruitment and retention of specialists in rural areas will be impeded because of the lack of access to key medical information systems that are already provided to metropolitan hospitals and can only be delivered over high-speed broadband connections.

o   Increasing demand for electronically delivered medical imaging services at rural hospitals will not be met because sufficient broadband capacity is not available. This will adversely impact the remote provision of specialist advice and diagnosis and result in increased waiting times.

o   The ability of rural clinicians to access key patient databases and other electronically delivered healthcare information systems will be inhibited because they will be faced with slow computer response and download times arising from insufficient broadband connection speeds.

(e) Options for encouraging providers of telecommunications (including broadband) and other technology services to extend services to rural and regional communities

The main option to address these barriers is through programs of state or commonwealth incentive grants to encourage carriers to establish Fibre To The Node (FTTN) in rural communities and Fibre To The Premises (FTTP) at major hospitals in rural and remote areas:

o   Fibre To The Node (FTTN) in rural areas will enable the establishment of broadband network infrastructure in many places where it is insufficient or does not exist and decrease the distance over which "last mile" connections are delivered with consequent reductions in prices and increased demand for the services. This will benefit rural Area Health Services by making the acquisition of broadband more affordable.

o   Fibre To The Premises (FTTP) to major rural hospitals will provide vastly increased connection speeds and greatly enhance current and future access for clinicians to electronically delivered healthcare information systems.