





# A Message from our Team



#### To our Colleagues, Partners, and the Broader Community,

It is with great respect and optimism that I present this foreword to Telecare's service report. In an ever-evolving healthcare landscape, Telecare continues to stand out for its commitment to clinical excellence, patient safety, and innovative service delivery.

Throughout my career in medical administration and governance across Victoria, whether in executive leadership roles within major health services, through my work with the Post Graduate Medical Council of Victoria, or in supporting the next generation of clinicians through education, I have come to deeply value the importance of strong clinical governance frameworks. These are the bedrock of sustainable, patient-centred care.

Telecare exemplifies this philosophy. Its approach to clinical governance is robust and dynamic, driven by a multidisciplinary committee of experienced professionals who continuously oversee quality, manage risk, and respond proactively to feedback. These structures are not simply formalities; they are the foundation of the organisation's commitment to delivering care that is safe, effective, and compassionate.

The achievements outlined in this report are a testament to the dedication and collaboration of the entire Telecare team. Behind every metric is a story of innovation, responsiveness, and an unwavering focus on the needs of patients and communities, including improving access to specialist services within their local community.

As Telecare continues to expand its reach and impact, I am confident that its steadfast approach to clinical quality and innovation will remain at the heart of its success. I commend the team for their ongoing efforts and look forward to what the future holds.

Warm regards

Dr John Ferguson
Chair of Clinical Governance Committee
Telecare Australia



# About Us & Our Journey

Telecare was founded on the combined experience of medical doctors and business and technology professionals, which has allowed us to provide quality virtual care throughout the country while offering software solutions to streamline the healthcare sector. To date, we have facilitated over 100,000 appointments, primarily to underserved rural and regional communities.

Telecare commenced operations in 2019, six months prior to the COVID-19 pandemic. We currently provide specialist medical services in all Australian states and territories, as well as Christmas and Norfolk Island, supporting hospitals, GPs, patients, and specialists alike. We foster a collaborative work environment and are passionate about improving patient outcomes.

### **Our Mission**

We are committed to providing accessible healthcare to all.

We will achieve this goal by enhancing the efficiency of healthcare providers and organisations through the provision of quality virtual care enabled by innovative technology.

#### Our Core Services

#### Virtual Hospital Services

In 2022, Telecare entered its first public partnership with Mackay Hospital and Health Service. Since then, we have continued to expand our partnerships with hospital networks, currently providing innovative virtual models of care to over 40 different hospitals and health services around Australia.

At Telecare, all our innovative models have been co-designed to meet the unique needs of every hospital and healthcare provider we work with. This collaborative development model allows for adaptive implementation, ultimately serving the needs of not just our public partners, but also the patients in the public health system.

#### **Our Software Solutions**

At Telecare, we don't just deliver clinical services, we also design and build innovative software solutions in-house to make healthcare more efficient and connected. From streamlining hospital workflows to reducing administrative burden, our products are purpose-built to meet the needs of modern healthcare teams.

With tools such as digital prescribing, automated transcription, and hospital management platforms, we enable clinicians and administrators to focus more on patient care and less on paperwork. Every solution is codesigned with frontline staff, ensuring our software is practical, intuitive, and able to deliver real improvements in healthcare delivery.



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### Our Clinical Governance

At Telecare, clinical governance is defined as "the way we do things and hold ourselves responsible at all levels, in supporting the delivery of safe, high-quality care that is constantly improving." This framework underpins all hospital and specialist services, balancing proactive risk management with retrospective learning to ensure safe, effective, and patient-centred care.

#### Governance Structure

Oversight is provided by the Clinical Governance Committee (CGC), which meets quarterly and reports directly to company directors. Membership includes senior medical practitioners, executives, and service representatives. The CGC:

- Reviews policies and procedures relevant to clinical governance
- Monitors credentialling outcomes and approves scopes of practice
- Reviews complaints, incidents, and risks, escalating serious issues
- Oversees patient safety and experience reporting

This structure is supported by Telecare's certifications in ISO 9001 (quality management) and ISO 27001 (technology and information security). The organisation is also actively working towards National Safety and Quality Digital Mental Health (NSQDMH) standards accreditation to further align with national standards.





### Credentialling and Workforce Assurance

All clinicians undergo a structured credentialling process before practice, aligned with Safer Care Victoria and hospital guidelines. Annual recredentialling maintains currency of qualifications. Any concerns are reviewed by the CGC, with urgent matters escalated immediately to the Chief Medical Officer.

#### Risk, Incidents, and Complaints

Telecare maintains a proactive risk register, rating risks by likelihood and consequence. High-level risks are escalated to the CGC. Incidents and complaints are logged and classified by severity, with investigations conducted within clear timelines. Formal complaints trigger structured reviews and documented follow-up actions.

#### Patient Safety and Escalation

Safety protocols set out triage steps, escalation pathways, and criteria where virtual care is unsuitable. Clinicians are responsible for urgent escalation, including emergency referrals. Non-clinical staff are trained to recognise red flags but never make clinical decisions.

#### Patient Experience and Continuous Improvement

Patient Reported Experience Measures (PREMs) are systematically collected after consultations and reviewed at every CGC meeting. PREMs from hospital partnerships are also included, supporting transparency, accountability, and continuous improvement.

#### Partner Integration

Telecare's governance extends to partner organisations. Incidents may be jointly logged and investigated, with quarterly joint governance meetings tracking performance, resolving issues, and co-designing improvements.

### **Our Social Impact**

In providing our services, we are able to effect positive change socially, economically, and environmentally.

#### Environmental and Cost reductions per Consultation

Telecare measures our impact performance by using economic modelling methodologies from the academic literature<sup>1,2,3</sup> to calculate the unit impact per consultation. Each virtual consultation saves approximately 300 kilometres in travel distance, reflecting median travel times for Australian outpatients visiting hospitals for specialist consultations, particularly for rural patients in Queensland and New South Wales.

This travel reduction saves Telecare patients an estimated \$437 per consultation, inclusive of travel savings, cheaper consultation fees, and health opportunity cost savings. For the public system, Telecare saves \$330 per consult, attributed to reduced burdens on the public healthcare system and productivity gains for the overall economy. Furthermore, reduced travel saves approximately 54.34 kilograms of CO2e emissions compared with locum or in-person consultations.

300 km Saved in travel \$330 Public Cost Savings

\$437
Patient Cost Savings

**54.3** kg CO2e emissions averted

#### Our results in FY2025

In FY2025, we are proud to have achieved significant progress towards our social, environmental, and economic impact goals.

	FY2024	FY2025	Net Uplift
Yearly Consultation Numbers	22,000	25,300	3,300
Total Distance Saved (km)	6,600,000	7,590,000	990,000
Total CO2e Emission Averted (kg)	1,195,480	1,374,802	179,322
Patient Cost Savings (\$AUD)	9,614,000	11,056,100	1,442,100
Public System Cost Savings (\$AUD)	7,260,000	8,349,000	1,089,000

<sup>1.</sup> Australian Journal of Rural Health, Travel-associated cost savings to patients and the health system through provision of specialist head and neck surgery outreach clinics in rural New South Wales, Australia

<sup>2.</sup> Future Healthcare Journal, Does telemedicine reduce the carbon footprint of healthcare? A systematic review

<sup>3.</sup> ISPOR - The Professional Society for Health Economics and Outcomes Research, Quantifying the Societal Benefits From Telehealth: Productivity and Reduced Travel

### Virtual Outpatient Services

Telecare's Virtual Outpatient Service supplements hospitals by forming a hybrid clinical workforce for effective and efficient outpatient management.

This model involves the provision of Telecare specialists and administrative staff to hospitals for the delivery of telehealth consultations, either at the hospital facilitated by a local doctor or nurse, or at the patient's home on their own device.

#### A New Workforce Model

This model is distinguished from a locum service or a conventional outsourcing model: we provide high-quality continuity of care, which is scalable and supported by robust clinical governance.

#### Virtual Administration

In providing Virtual Outpatient Services, Telecare manages the administration of patients virtually. This means that hospitals are able to increase their capacity to service patients without needing to increase on-site staff.

Our administrative processes remain transparent for hospitals by using our proprietary digital hospital outpatient management workflow system, OPAU. This allows our hospital partners oversight in relation to booking flows, waiting times, and key performance indicators.

#### **Key Benefits**

#### **Increased Capacity**

This model effectively increases the capacity of hospitals to treat patients across a broader range of specialties, leading to shorter wait times and an increase in both patient access and hospital activity.

#### **Streamlined Care**

Broad specialty offerings mean fewer patients are sent to other hospitals, driving efficiencies by keeping care within the same system.

#### **Greater Flexibility**

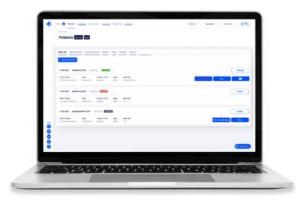
This model offers more flexible appointment options, reducing the need to travel and saving time for patients. This has further resulted in a reduction in hospital no-show rates.

#### **Cost Efficiencies**

Our services are provided below the average activity-based funding allocation, meaning Hospitals and Health Services can access surplus funding using Telecare.

#### Powered by OPAU

OPAU is Telecare's proprietary digital hospital outpatient management system. It streamlines clinical documentation, appointment scheduling, patient communications, and automated reminders. OPAU also coordinates tasks among nurses, doctors, and staff, improving workflow and enabling data-driven decisions.



#### Our Outpatient Service Partners

Telecare currently partners with Mackay Hospital and Health Service (MHHS), Wide Bay Hospital and Health Service, South West Hospital and Health Service, and Central Queensland Hospital and Health Service to provide Virtual Outpatient Services. Below are details on how our collaboration with Mackay has enhanced healthcare delivery.

#### Performance with Mackay

Year	Number of Telecare Consultations
2022	1881
2023	3774
2024	6381
2025	7457

Since partnering with Mackay, Telecare has continuously increased the number of virtual outpatient consultations provided, with an annual growth rate of 58.3% since June 2022.

12

Specialties Provided

Metric	Vacancy Rate*	
New	1.8%	
Review	0.9%	

<sup>\*</sup>The vacancy rate is the percentage of clinic time doctors are not seeing patients.

### Mackay Virtual Dermatology

Metric	May 2024	Jun 2025	% Change
Long Waits	168	19	-89%
New Referrals	202	47	-77%
Reviews	99	124	+25%



Since Telecare commenced the Virtual Dermatology Clinic with Mackay HHS, long waits have fallen by almost 90%, new referrals reduced by 77%, and reviews increased by 25%. This demonstrates the clinic's strong impact on access, timeliness, and continuity of care.

### Virtual Inpatient Service

Telecare's Virtual Inpatient Model empowers hospitals to continue operating their inpatient wards at high capacity in the face of workforce shortages.

As part of this model, Telecare provides virtual, FRACP-qualified physicians who work in collaboration with on-site hospital staff to conduct ward rounds and complete all necessary functions, including managing admissions and discharges, coordinating orders for tests and medication, and writing progress notes.

#### Key Features of this Model

- Provision of a panel of FRACP-qualified physicians experienced in virtual admissions and inpatient acute care.
- Access to a wider panel of specialists for secondary inpatient consultations.
- A fee-for-service model co-designed with our hospital partners featuring no lock-in contracts or ongoing costs.
- Transfer of patient data via securitycompliant online platforms.
- Rapid implementation, with the ability to be functional within one week.
- Safety, efficiency and effectiveness of the model were verified by an independent study conducted by the University of Melbourne.

#### **Key Benefits**

#### **Reducing GP Burnout**

Virtual physicians are able to support local GPs who are burdened with on-call duties during weekends and after hours, reducing the risk of burnout.

#### **Optimising Transfers**

Facilitates timely inter-hospital transfers, reducing bed block in larger centres, while avoiding unnecessary transfers to larger regional hospitals.

#### **Community Support**

Keeps local inpatient facilities running at capacity, enhancing healthcare options closer to home and supporting the community's healthcare needs.

#### **Access to Specialists**

Provides hospitals with streamlined access to specialist expertise and a wider panel of specialists for secondary inpatient consultations.

#### Powered by IPAU

IPAU is Telecare's custom-built clinical workflow software for streamlining inpatient administrative processes and clinical documentation. It securely stores patient data, tracks encounters, and manages task delegation among doctors, nurses, and staff. With customisable medical templates, IPAU reduces administrative burdens, enhances communication, and ensures compliance with clinical governance standards.



### Our Inpatient Hospital Partners

Telecare currently provides Virtual Inpatient Services to NCN Health, Dhelkaya Health, Kyabram District Health, Alexandra District Health, Corryong Health, Robinvale District Health, Beechworth Health and Rochester & Elmore District Health Service. Here's how our collaboration with NCN Health has enhanced healthcare delivery.

#### Performance with NCN

Telecare has been partnering with NCN Health since 2022 to deliver Virtual Inpatient Services, providing an alternative model of care that helps address regional workforce shortages. In the 2024-25 financial year, we supported 831 on-call shifts, an increase of 312 shifts compared with the previous year, and facilitated 2,951 inpatient consultations, more than doubling the activity of the prior year.

Over the same period, Telecare directly admitted 109 patients at NCN Health, while only six patients required transfer to major hospital networks. This demonstrates the model's effectiveness in enabling care closer to home and reducing unnecessary pressure on larger hospitals.

#### Key Statistics from our NCN Partnership

Year	On-Call Shifts Covered	
2022-23	200	
2023-24	518.5	
2024-25	831	

2951

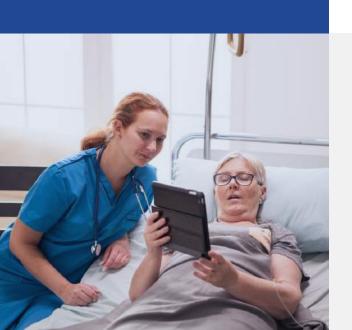
Inpatient Consults

Consultation Type	<b>Consultations Provided</b>
Ward Rounds	2221
Admissions	109
Discharges*	33
Other	588

<sup>\*</sup>Of the 33 discharges we processed, only 6 of them were external transfers.

1:18

Transfer/Admission Ratio



#### NCN Low-Risk Drug and Alcohol Admissions

In 2023, we began further supporting NCN by providing them with weekday services, managing their low-risk drug and alcohol admissions virtually. Our physicians are available to admit patients for drug and alcohol detoxification. This service provides much-needed support to those in the community who are at risk by greatly diminishing the risk of serious withdrawal syndromes.

### Multi-Disciplinary Team Case Conferencing

Telecare's Virtual MDTCC Model enhances collaborative care by integrating specialists with local practitioners, ensuring comprehensive patient management and improved outcomes.

### Enhancing Care through Collaboration

Collaborative models of care enhance the treatment of complex patients by integrating the expertise of doctors and other clinicians across various disciplines.

Telecare's Multi-disciplinary Team Case Conferencing (MDTCC) model addresses the need for specialist support in health networks facing specialist shortages. Our virtual physicians assist in the diagnostic and treatment pathways for complex patients while simultaneously upskilling the local workforce through knowledge sharing and collaboration.

#### **Collaborative Consultations**

Telecare physicians work with Hospital networks to provide virtual outpatient consultations in collaboration with local or onsite practitioners.

#### **Case Consultations**

For complex cases, Telecare specialists are then available for case conferences with the patient's GP and other involved healthcare professionals.



### The MDTCC Model Delivers the Following Benefits

#### **Upskilling the Local Workforce**

Capability building and knowledge sharing for all clinicians.

#### **Collaborative Care**

Efficient clinical collaboration leads to broader expertise among healthcare professionals for better patient care.

#### **Supplementary Service**

Complements existing services and improves utilisation of existing resources for enhanced clinical outcomes.

#### **Outsources Virtual Administration**

Telecare handles administrative aspects of the patient journey, including appointment booking, reminders, referral management, and managing diagnostic results, allowing practitioners to focus on providing care.

#### **Continuity of Care**

Ensures seamless patient care by maintaining consistent communication and follow-up between all healthcare providers involved in the patient's treatment.

## Our Collaboration with South West

In August 2023, Telecare was commissioned to implement a Virtual Multi-Disciplinary Team Case Conferencing (MDTCC) service at South West Hospital and Health Service in Queensland, addressing the challenges of fragmented healthcare services and unmet healthcare needs. Building upon their existing case conference model, this expansion caters to the healthcare needs of a vast region encompassing 3 hospitals and 9 GP services.

### Telecare Provides the Following Four Specialities to SWHHS



General Physician



Respiratory & Sleep



Endocrinology



**Paediatrics** 

Telecare initially rostered two credentialed physicians covering Endocrinology and General Medicine. In 2024, we expanded our service provision to include Behavioural Paediatrics and Respiratory & Sleep. Since adding paediatrics, our referral volume has increased sixfold, highlighting the value of the MDTCC model in responding to local specialist demand.



### The Referral Pathway

### 01 Referral and Triage

Telecare receives referrals from SWHHS or SWHHS GPs for cases that are clinically appropriate for telehealth.

#### 02 Contact

Telecare contacts the patient and the GP practice to coordinate MDTCC scheduling.

### 03 **Appointment**

The patient is seen at a SWHHS facility with multiple clinicians present for the MDTCC. Telecare specialists provide prescriptions and investigation requests directly.

#### 04 **GP Letter**

The Telecare specialist dictates the patient's letter and a copy is sent to the referring GP and SWHHS. Results management is handled by Telecare specialists.

### Community Hybrid GP

#### The Problem

In Australia, rural and remote communities are heavily impacted by a shortage of healthcare providers, driven by persistent workforce challenges such as the difficulty of recruiting and retaining GPs in smaller towns.

This results in long journeys to see a doctor, limited appointment availability, and difficulty maintaining consistent care. These barriers make it harder to find care, increasing pressure on the public health system. Without accessible GP services, more patients turn to emergency departments or go without timely treatment, leading to delayed diagnoses and poorer health outcomes.

#### **Our Solution**

Telecare's Community Hybrid GP Model is designed to restore and sustain primary care access in rural and remote communities. The model blends in-person consultations with telehealth services to:

- Provide consistent GP availability;
- Leverage a larger, distributed workforce;
- Reduce travel burdens for patients; and
- Ensure continuity of care



#### How it works

#### **Clinical Operation**

Owned and managed by Telecare, with local facility and administrative support provided in partnership with host communities or health services.

#### **Governance Oversight**

Delivered through local health service committees and clinical governance structures.

#### **Supplementary Service**

Complements existing services and improves utilisation of existing resources for enhanced clinical outcomes.

#### Service Delivery

- Initial on-site GP presence to assess needs and establish patient relationships.
- Ongoing hybrid care with periodic face-to-face visits supported by regular telehealth clinics.
- Practice nurse facilitation for procedures, patient coordination, and telehealth support.

### Our Work in the Stanhope Community

Our partnership with Stanhope began in August 2024 in response to the community's urgent need for a sustainable GP service following the closure of its longstanding outreach clinic. The Stanhope Telecare Medical Centre, the first of its kind in Victoria, has restored consistent primary care access, and demand for services has grown steadily since launch.

#### Key Features of the Stanhope Model

- Telecare provides two days of service each week. These consultations are primarily delivered via telehealth; however, once per month, our GPs will commute to Stanhope to deliver in-person consultations.
- Services are facilitated at the Stanhope Health facility, with reception, telehealth assistance, and practice nurse support provided locally.
- Practice nurses assist with procedures and coordinate patient flow, enabling GPs to focus on complex cases.

### This Model has Delivered the Following Benefits to Stanhope

#### **Improved Access**

Consistent GP availability in a community that previously had significant service gaps.

#### **Community Satisfaction**

Feedback surveys highlighted that patients were overwhelmingly satisfied with the quality of care provided by this model.

#### **Attracted Ancillary Health Services**

An in-town GP service has attracted other ancillary health services such as pathology collections (Austin Pathology)



#### **Key Statistics**

During our initial 5 months of operating the clinic in Stanhope, we recorded 408 occasions of service to 156 unique patients, and recorded no critical incidents.

408

Consultations Provided

#### **Care Provided**

22 skin checks, 10 cryotherapy, 1 SCC requiring grafting, 1 nodular BCC, 1 invasive melanoma (including definitive wide local excision).

63 immunisations, majority with remote consultation by GP, on-site immunisation via nurse immuniser.

15 Chronic disease management plans (with some reviews), 4 health assessments, and 1 Coordinated Veterans Care program enrolment.

#### **Patient Feedback**

Out of the patients who responded to our feedback survey, 91% reported being "very happy" with our service, and 9% reported being "happy" - we received no negative responses.

Additionally, 86% of respondents stated they would be "very likely" to recommend our service, and 94% stated they found our service "very useful"

### On-Call and Scheduled Mental Health Services

A centralised model delivering consistent access to virtual mental health practitioners.

Telecare's On-call and Scheduled Mental Health Services provide our organisational and institutional partners with consistent, timely access to qualified mental health professionals. Telecare works alongside local care teams to deliver both urgent support and regular, scheduled clinics, ensuring that patients have reliable pathways to assessment, treatment, and review consultations. By centralising access to mental health expertise, the model helps organisations streamline referrals, reduce service gaps, and provide equitable care across multiple sites or regions.

#### Key Benefits of this Model

#### **Reliable Access**

Recurring clinic times are scheduled for each organisation, with on-call support available as needed.

#### **Seamless Booking**

Local care teams can directly book clients into available slots, reducing coordination delays.

#### **Continuity of Care**

We provide consistent care by matching clients with the same clinician each session.

#### **Secure & Private**

All consultations are delivered through encrypted telehealth systems, ensuring privacy and accessibility.

#### **Highly Adaptable**

Service can be tailored to match each organisation's size, location, and requirements.

#### **Integrated Communication**

Centralised scheduling and shared care planning ensure timely updates and coordination across providers.

#### Suitable Use Cases

#### **Community Health Services**

Expands reach by integrating with existing local care facilities virtually.

#### Correctional Centres

Provides scheduled access to mental health services for detainees.

#### Schools and Universities

Provides flexible mental health access to younger population groups.

#### **Aged Care Homes**

Supports residents through regular mental health clinics and continuity.

#### **Workplaces and Corporates**

Supports employees with flexible telehealth appointments.

## Our Partnership With Amplar Health

Telecare and Amplar have worked together to create a comprehensive virtual psychology service that caters to both direct-to-consumer needs and broader, community-funded mental health programs. This partnership streamlines access to mental health professionals, making it easier for individuals to receive timely, consistent, and high-quality care regardless of their location. Together, we deliver two complementary program streams, one tailored for individuals seeking direct support, and another designed to serve communities through funded initiatives, ensuring mental health care is accessible across different needs and circumstances.

#### **Operational Integration**

- All appointments are delivered via secure telehealth platforms, ensuring privacy and convenience.
- Sessions are available across multiple timeslots, allowing for flexibility to suit different schedules and time zones.
- Telecare's clinicians maintain continuity by seeing the same client where possible, fostering strong therapeutic relationships.
- Communication with referring services is streamlined, ensuring clinical updates and treatment plans are shared promptly.





#### Direct-to-Customer Virtual Psychology Services

Through Telecare's partnership with Amplar Health, individuals can book psychology appointments directly online without needing a referral or Mental Health Care Plan (MHCP). This removes common barriers and makes access simple and immediate.

First sessions are bulk-billed or offered at a reduced rate for eligible members, keeping care affordable. Clients can then continue using private health extras or switch to Medicare funded sessions if they obtain a MHCP.

- Direct Online Booking with no referral.
- Bulk-billed or reduced-rate first sessions.

#### PHN-Funded Medicare Mental Health Centre Program

In partnership with one of the largest Primary Health Networks (PHNs) in New South Wales, Telecare provides clients with up to 10 fully funded sessions with a registered psychologist. Referrals are coordinated through the PHN's central intake system, eliminating the need for a GP referral and ensuring timely access.

This program is designed for people with moderate to high mental health needs, ensuring they receive appropriate support without financial barriers.

Up to ten fully funded sessions (via PHN funding)

### Geriatric In Reach Program

Bringing specialist geriatric expertise into rural communities through an integrated, collaborative model of care

#### The Problem

Across Australia, older people living in rural and remote areas face significant challenges in accessing specialist geriatric care. There are only 1,074 geriatricians nationally, just 4 per 100,000 people, and only 11.5% practise outside major cities. This shortage means many patients miss out on timely specialist assessment, which can delay important interventions, increase hospitalisations, and worsen health outcomes.

#### **Our Solution**

Telecare partnered with the Hume Health Service Partnership to deliver an expanded Virtual Geriatrics Program, combining on-site assessments by a nurse practitioner or local GP with secure telehealth consultations from Telecare geriatricians and aged psychiatrists. This blended approach ensures timely specialist input without requiring travel, while supporting local clinicians and involving residents and families in every stage of care.

#### Our Work With Hume

Since launching in September 2024, the program has delivered around 110 consultations across multiple facilities in the Hume region. Clinicians estimate that the service has prevented deterioration or avoided hospital admission for at least 10 patients.

In some facilities, the program has achieved 100% annual geriatric review, something previously unattainable due to workforce shortages.

### How the Model Works

Our collaborative approach promotes proactive management of frailty, cognitive changes, and behavioural health concerns, reducing avoidable hospital transfers and improving residents' quality of life.

#### **On-site Assessment**

Nurse practitioners or local GPs will conduct an initial inperson evaluation of the resident.

#### **Specialist Review**

A Telecare geriatrician or aged psychiatrist joins via secure video, having already reviewed the patient's history and test results.

#### Collaborative Care

The session involves the resident, their family, local staff, and the specialist, ensuring care plans reflect both clinical needs and personal preferences.

#### **Instant Care Plans**

Recommendations are documented and shared immediately with the in-reach team via the Telecare platform, supporting smooth follow-up care.

# Hospital in the Home (HITH)

Hospital in the Home (HITH) allows patients to receive acute care in their own homes, supported by local healthcare teams and Telecare's remote specialists. Patients remain formally admitted under the hospital's care, with virtual bedside consultations conducted by Telecare specialists and in-person support from nurses or allied health staff.

#### HITH provides the following benefits:

- Frees up hospital beds for patients needing on-site treatment.
- Reduces hospital-acquired complications through safe recovery at home.
- Expands access to specialist care in regional areas.
- Builds workforce capability through collaboration and training.

#### How It Works

#### **Admitted at Home**

Patients remain formally admitted under the hospital's care, with all clinical governance and documentation managed just as if they were in a ward.

#### **Team-Based Support**

Local nurses or allied health staff provide in-person care at home, while Telecare doctors join virtually for bedside consultations and specialist input.

#### **Ongoing Monitoring**

Patients are reviewed through a mix of home visits and virtual check-ins, with care plans updated directly into hospital systems until discharge.

#### HITH Delivery to Mackay

With no local geriatricians and rising bed pressure, Telecare partnered with Mackay to deliver geriatric care at home.

#### The Model in Mackay

#### **Remote Specialist Integration**

A Telecare geriatrician joins the care team virtually, enabling the hospital to run a geriatric HITH program that would otherwise be unfeasible.

#### **Seamless Home Admissions**

Patients remain admitted under the Senior Medical Officer (SMO) bed card, with home visits conducted by local nurses or allied health staff.

#### **Pre-Visit Diagnostics**

Imaging and cognitive assessments are organised before consultations, ensuring efficient specialist reviews.

#### **Training & Upskilling**

Registrars present cases for teaching and active feedback; nursing and allied health staff benefit from observation and collaboration.

#### **Key Statistics**

#### **Patient Feedback**

215 home visits and 41 virtual geriatric consults delivered

20+ multidisciplinary case conferences, supporting training and shared learning (83% staff benefited)

644 hospital bed days freed; average stay 11.5–30.7 days

86% of staff agreed patients would not have accessed home treatment otherwise

### Virtual Subspecialist Inpatient Support

### Rapid access to expert opinions without patient transfer

Hospitals across Australia, particularly in regional and rural areas, often operate without on-site subspecialists in disciplines such as dermatology, neurology, gastroenterology, and geriatrics. When a patient requires specialist input, the options are typically limited: either transfer the patient to a larger metropolitan hospital or delay care until a visiting medical officer is available. Both approaches create bottlenecks that prolong patient stays, increase pressure on scarce hospital beds, and compromise continuity of care.

Telecare's Virtual Subspecialist Support provides a sustainable alternative. The service connects inpatient doctors directly to Telecare's panel of specialists across more than 30 disciplines. Consultations are rostered within 24 hours, giving medical teams rapid access to expert secondary opinions without the delays, risks, and costs associated with transfers. The model integrates into existing hospital workflows, ensuring subspecialty support is delivered when and where it is needed.



#### How it Works

Through the Virtual Subspecialist Inpatient Support service, inpatient teams can request subspecialist input quickly and securely whenever complex cases arise. Once a request is submitted, Telecare allocates an appropriate subspecialist, often within the same day, who then connects with the treating team via secure video conferencing. These consultations typically involve registrars, junior doctors, and nursing staff, with the subspecialist guiding the review of investigations, treatment decisions, and care planning. Importantly, the same subspecialist remains available for follow-up during the admission, ensuring continuity of advice and rapid clarification as new issues emerge. By embedding this process seamlessly into hospital workflows, the model provides timely access to expertise that would otherwise require patient transfer, while also building confidence and capability within the local workforce.

#### **Key Benefits**

#### **Faster Access to Expertise**

Most consults delivered within 24 hours, expediting diagnosis and treatment.

#### Reduced Length of Stay

Timely decisions enable earlier discharges and improved hospital bed flow.

#### **Care Close to Home**

Patients remain in their local hospital, avoiding disruptive and costly transfers.

#### **Upskilling Local Teams**

Registrars and junior doctors gain real-time exposure to specialist decision-making, strengthening workforce capability.

#### **System Efficiency**

Hospitals avoid the expense of fly-in specialists or transfer logistics, while still delivering high-quality care.

### Virtual Subspecialist Inpatient Support in Mackay

#### Addressing Local Challenges

Mackay Base Hospital, like many regional centres, faces significant shortages of subspecialists across multiple disciplines. Without timely access to secondary opinions, patients often experience prolonged admissions, unnecessary transfers to metropolitan hospitals, and avoidable delays in treatment and discharge.

The introduction of Telecare's Virtual Subspecialist Inpatient Support has enabled Mackay to bridge these gaps, embedding virtual expertise directly into inpatient care.

#### **Demonstrated Outcomes and Benefits**

Early results highlight meaningful improvements in patient care, hospital flow, and workforce capability.

>120

Inpatient Support Consultations

#### **Faster Access to Care for Patients**

The service has achieved an average turnaround time of under 24 hours for most subspecialty requests. This has resulted in significant bed-day savings, with earlier decision-making supporting reduced length of stay and faster discharges.

#### **Reduced External Patient Transfers**

There have been fewer patient transfers out of Mackay to metropolitan centres, allowing patients to remain closer to home while still receiving high-quality care.

#### **Local Workforce Upskilling**

The program has also delivered positive workforce development outcomes, with registrars and junior doctors reporting increased confidence in managing complex cases.

### Operational Approach in Mackay

01

#### Integration with workflows

Requests for subspecialist support are logged through existing hospital pathways and allocated by Telecare to an appropriate specialist.

02

#### **Timely Response**

Most consultations are confirmed and completed within 24 hours, providing rapid access to subspecialty input.

03

#### **Collaborative Case Review**

Registrars and junior doctors present cases to the remote specialist in real time, enabling joint decision-making and continuity of care.

04

#### **Training Benefit**

Local teams gain practical experience and confidence through direct interaction with subspecialists.

05

#### **Ongoing Follow-up**

The same subspecialist remains available throughout the patient's admission, providing continuous quality care.

# Remote Pill Cam Reporting

Telecare's Pill Cam service brings capsule endoscopy into hospitals and health services that otherwise lack local gastroenterology support. The model combines on-site nursing or clinical staff with remote gastroenterologists, creating a seamless diagnostic pathway that avoids patient transfers and long delays.

The process is simple: patients swallow or have the capsule endoscopically placed, images are captured on a wearable recorder throughout the day, and footage is securely uploaded. Telecare specialists then review the study, prepare a detailed report, and provide findings directly back to the hospital team. This approach means patients receive timely, specialist-led care in their own community, while hospitals extend their diagnostic capacity without needing to recruit new staff.

#### How It Works

#### **Patient Preparation & Counselling**

Local clinicians educate the patient, confirm readiness, and arrange any required investigations prior to the consult.

#### **Capsule Administration & Recording**

The capsule is swallowed or placed endoscopically, with images continuously captured throughout the day on a wearable recorder.

#### Secure Upload & Specialist Review

Footage is transferred via a protected portal and interpreted by a Telecare gastroenterologist, who prepares a detailed report.

#### **Care Coordination & Follow-Up**

Findings are shared with the local hospital team, enabling rapid treatment decisions and same-day or short-interval follow-up care.

### Pill Cam Reporting with Mackay

After two years without capsule endoscopy access, Mackay Hospital and Health Service partnered with Telecare in 2024 to restore this service. Together we co-designed a sustainable model: procuring equipment, developing protocols, training staff, and supporting patient education.

#### Positive Impacts of this Service

Since launching this service with Mackay in October 2024, we have facilitated 32 pill cam procedures, resulting in:

#### **Faster Access to Care for Patients**

Wait times reduced from 1,085 days to as little as 2 days

Turnaround times for pill cam procedures have been as little as 12 hours for inpatients (average 4–5 days)

#### **Improved Detection**

Resulted in the discovery of 3 active bleeds, 1 previously undetected caecal carcinoma, Crohn's disease, vascular lesions, gastritis/duodenitis.

Enabled targeted interventions including surgery, push enteroscopy, and gastroscopy.

#### The Proven Benefits

- Patients are diagnosed faster, have to travel less and receive earlier treatment.
- Hospitals increase their specialist coverage and reduce the number of external transfers.
- Specialists are able to service multiple hospitals remotely, while maintaining diagnostic quality.

### Armajun Paediatric Care

A co-designed, culturally safe virtual paediatric model delivering care directly to rural Aboriginal families

#### The Problem

Aboriginal children in rural New South Wales continue to face significant challenges in accessing specialist paediatric care. Of the 167 accredited paediatricians in the state, only 20 work outside metropolitan Sydney. For families in the Armajun region, this has meant waits of up to two years for appointments or travelling five to seven hours to major centres. These barriers contribute to delays in diagnosis, fragmented care, and poorer long-term outcomes, particularly for behavioural and developmental conditions. Mainstream services have also lacked cultural safety, creating further barriers for Aboriginal families to seek timely care.

#### Our Solution

In response, Telecare partnered with Armajun Aboriginal Health Service (AHS) to co-design a culturally safe, community-led model of paediatric care. Over 12 months, Aboriginal health workers, local clinicians, and community leaders shaped a service that places trust, family needs, and cultural safety at its core. Weekly virtual clinics led by Telecare paediatricians were established, supported by local Aboriginal health workers and coordinated by a dedicated Senior Medical Officer and practice administrator.



### How the Model Works

#### **Weekly Virtual Clinics**

Telecare paediatricians deliver regular virtual consultations, ensuring reliable and timely access to specialist care.

#### **Local Support**

Armajun Aboriginal health workers assist during sessions, providing cultural guidance, family support, and continuity of care.

#### **Digital Portal**

A secure platform enables direct bookings, safe file transfers, and smooth communication between local teams and specialists.

#### **Coordinated Care**

A Senior Medical Officer oversees the program across three sites, with case conferences available for complex patients.

#### **Integrated Pathways**

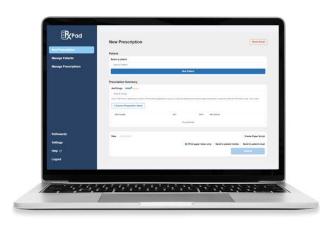
The service is embedded into Armajun's existing primary care systems, avoiding duplication and supporting seamless patient journeys.

### Our Productivity Software

Our productivity solutions support virtual healthcare delivery and enhance the efficiency of the healthcare workforce. RxPad and AutoTranscribe help clinicians save time, reduce paper waste, and minimise administrative overhead, enabling practitioners to focus more on patient care rather than non-patient-facing tasks.

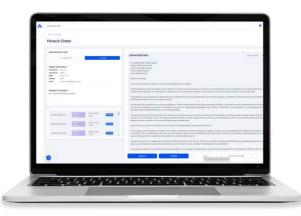


Telecare officially launched RxPad in August 2023. RxPad is Australia's first standalone electronic prescribing tool and is fully compliant with ADHA and eRx. It is currently being used by clinicians in both public and private systems, and many users have reported a substantial reduction in prescribing time.



#### **▲** AutoTranscribe

Autotranscribe turns clinicians' raw clinical notes or dictations into specialist letters or referrals automatically. Utilising a multi-agent AI architecture and workflow, it prioritises the accuracy and privacy of clinical letters. Clinicians simply copy their raw clinical notes or upload a dictation and Telecare Autotranscribe takes care of the rest. Clinicians have a chance to review and make changes before sending to other parties.



### Our Hospital Management Software

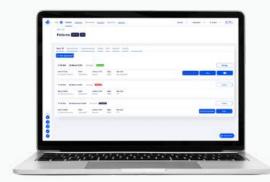
Telecare's Hospital Management Software is designed to modernise hospital operations by digitalising clinical and administrative workflows. By replacing manual processes with streamlined, integrated systems, we reduce administrative burden, enhance communication between care teams, and improve patient outcomes.

Our software solutions are co-designed with clinicians, administrators, and other key stakeholders, ensuring that the tools align with real-world hospital needs. With secure data storage and governance at the core, these solutions consolidate patient records, optimise task delegation, and provide customisable templates to adapt to each organisation's unique requirements.



#### Inpatient Process Automation Unit (IPAU)

IPAU is Telecare's proprietary system for inpatient workflow and documentation management. It digitalises patient records so that all encounters are consolidated into a single, accessible medical file, while also streamlining task management across doctors, nurses, and allied health staff. By securely storing records and supporting consistent documentation practices, IPAU strengthens compliance and governance, reduces inefficiencies, and enhances multidisciplinary collaboration. The result is less administrative overhead, more time for patient care, and greater continuity across teams.



#### Outpatient Process Automation Unit (OPAU)

OPAU is Telecare's outpatient management system, built to optimise the unique challenges of outpatient services. It replaces paper processes with secure digital records, manages appointments and automates reminders, and facilitates efficient communication between patients and providers. By enabling seamless task delegation and real-time tracking across clinical teams, OPAU has delivered measurable improvements in waiting times, reduced missed appointments, and strengthened overall administrative efficiency.

### Conferences & Research

At Telecare, we are dedicated to improving virtual healthcare through research collaborations and active participation in key conferences. Below is our consolidated list of 2025 conference presentations and research projects.

#### AIDH HIC 2025

RxPad-HDA Integration – Pioneering interoperable e-prescribing in telehealth

Metro to Rural – Co-Designing a Hybrid GP Model to Sustain Rural Primary Care Services

Expanding Virtual Geriatric Care – A Collaborative Telehealth Model Across Regional Aged Care

Expanding Access to Diagnostic Services through Remote Reporting: A Telehealth-Enabled Model for Pill Cam Testing

Enhancing Geriatric Care through a Virtual Hospital in the Home Model – Implementing GEM-R HITH

Bridging The Dermatology Care Gap – A Virtual Specialist Model for MHHS

Automated Psychiatry Matching – Implementation of an AI-powered nurse assistant for clinical referral processing (Poster)

Delivering Accessible and Culturally Sensitive Paediatric Care to Aboriginal Communities through a Virtual Specialist Model

Enhancing Inpatient Care and Optimising Bed Flow through Virtual Subspecialist Support: The Mackay Telecare Inpatient Support Service

IPAU – Built from the ground up based on health service requirements

#### Clinical Excellence Queensland Showcase 2025

Mackay HHS – The Mackay Telecare Inpatient Support Service

Central Qld HHS – Let's Bounce: Virtual Behavioural Paediatric Clinic

#### **RWAV 2025**

Metro to Rural – Co-Designing a Hybrid GP Service to Support a Rural Health Service

#### **RACMA 2025**

Delivering Accessible and Culturally Sensitive Paediatric Care to Aboriginal Communities

#### **ACHSM 2025**

Delivering Accessible and Culturally Sensitive Paediatric Care to Aboriginal Communities through a Virtual Specialist Model

### Research Grant (CQUniversity Partnership)

Co-Designing Telehealth: Empowering Consumers, Carers, and Communities through Public-Private Partnerships

#### **Previous Years Conferences**

We have also presented our innovative models of care extensively at conferences in previous years, for a full scope of our historical presentations, please scan the QR below.



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# Putting Care in Telehealth

Learn how we expand access and strengthen care through virtual health innovation.



