QUESTnet 2013

AARNet and Australian Health Sector
The Presentation
The Presentation

• A reminder  The objectives of the engagement with the health sector
• The changing landscape in health
• The current AARNet health subscribers
• The NSW CIO Forum
• The deployment of eduRoam in the health sector in NSW and Victoria
Why is AARNet engaged with Health?
Objectives of AARNet’s engagement with Health

- Improve outcomes for members
- Create a richer research and education environment
- Build relationships to support long term collaboration around infrastructure
How AARNet has approached the engagement

My original commission:

“Begin to start to commence to think about starting to address issues of connectivity between health and research and education.”

“it will take you 5 years!”
How AARNet has approached the engagement

A recent discussion

“it has been 5 year - How are things progressing.”

You were right! – we are just starting to get some traction

“Being right is my 2nd most endearing feature!”
NO LONGER ALONE

Others in AARNet

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A Changing Health Landscape
What has changed over 5 years?

Firstly a change in the way I think!

Once it was about:

• Trying to solve the process to obtain connectivity between campuses on a campus by campus basis.

• Trying to solve problems at the network Manager level.

The realisation is that:

• Inter-sectoral collaboration will be best achieved if their networks are joined at the hip.

• R&E traffic in health sector must be seen as being on the CIO’s agenda.

• Health entities need to become part of the R&E network for their R&E traffic.
What has changed over 5 years?

- Secondly the Health CIO’s are younger and more progressive
What has changed over 5 years?

Thirdly - HWA projects.

Failures have focused health trainers and their IT people on network issues

- Grampians (string-line internet gateways)
- Sydney Simulation Centre (3G for remote control of Man.)
- St John of God (ADSL video)
What has changed over 5 years?

Fourthly a change in the bandwidth driver

- PACs systems are about to be replaced as the high bandwidth health application.

- Clinical Extension is emerging as the bandwidth driver.
What has changed over 5 years?

Why Clinical Extension?

• Annual medical conferences are no longer suitable for the extension of clinical research.

• The cream of the specialist community are more interested in weekly meetings

• They don’t believe they have the time to travel for these meetings

• They certainly don’t have time to fly to China

• Their normal equipment is expensive – they expect it to just work

• They therefore expect that their video services will of extreme quality and reliability.
What has changed over 5 years?

Why Clinical Extension?

• They don’t just want video – They want real time data that is in sync with the video

• The Nepean request
  • simultaneous 100MBps symmetrical conferences between 3 sites
  • Point to point at 100Mbps in China
  • Let’s do what Fox Sports do!
What has changed over 5 years?

Fifthly National Interactions and the Cloud

• Don’t ask me to be self funding and then restrict me to operating within my own state!

• Don’t ask me to be more efficient but restrict my access to the cloud!

• Alfred Health (Cerner Clinical system is located in Brisbane)

• Centre for Health Innovation (training courses into Sydney)
What has changed over 5 years?

Lastly

- AARNet now has a model that can handle the eligible traffic issue
A Subscription Model for Clinical Organisations

The Model

- A Deemed eligible traffic percentage (Usually 50% - records show 40% of all downloads come from other AARNet subscribers)
- A percentage of the total operating budget of the entity (ensures health entities are charged the same as other subscribers)
- Requires that the health service maintain a commercial internet feed
- In discussion with NextGen around traffic exemptions
- Proposals currently before NSW Health, SA Health and Peninsular Health
Health Sector AARNet Subscribers

Clinical

- Monash Health (800,000 people)
- Alfred Health (700,000 people)
- Eastern Health (700,000 people) – heading towards half of Victoria
- NSW Statewide Complex Epilepsy Network (3 different LHD's could not talk to one another)
Health Sector AARNet Subscribers

Training

- Beyond Medical Education (campuses in Bendigo and Bathurst – strategic relationships with Monash and CSU)
- Centre for Health Innovation (Alfred Hospital in Melbourne)
- Queensland Health Skills Development Centre
- Townsville Medicare Local (a long time AARNet subscriber)
- Australian General Practice Education and Training
Research

- SURE (Secure Unified Research Environment - national)
- Chris O’Brien Lifehouse Centre (houses a number of research organisations)
- SA Health and Medical Research Institute
NSW Health-Universities CIO Forum
NSW Health-University CIO Forum

Members

- NAUDIT CIO’s (Kerry Hollings from WWS is the current lead)
- Director, Infrastructure, NSW Health (Andrew Pedrazinni)
- CIO’s of the 8 NSW Local Health Districts
- The CIO’s of Ambulance and Justice
- AARNet

Chair

- Alternates between the sectors

Meeting Frequency

- Every three months
NSW Health-University CIO Forum

Outcomes

Agreements to:

- Meet regularly (every three months).
- Exchange of information and professional experiences. (AAF, Google@Macq, Telehealth, Lynx@SCH, Paperless Councils, iPad programs)
- Identify the key issues affecting inter-sector connectivity.
- Establish cross sector Working Parties to address these issues (eduroam and video interoperability)
Outcomes

• Information exchanges at each meeting
• Establishment of Working Parties

– Eduroam (encouraging progress - talk about shortly)
– Video interoperability (cooperation is good – any progress is awaiting work within the HWAN core)
eduRoam on Health Campuses

NSW

- Standardized deployment across all of NSW Health
- Cross sector working party
- Roll out dependent on the implementation of the NSW Health Network (HWAN)
- Core infrastructure to support eduroam now established within the HWAN core
- A dedicated link between AARNet and the HWAN has been established
- The costs of the dedicated eduroam specific link is shared between NAUDIT members
- Leveraged the work of the QRNO in policy and practices – very smooth
- Pilots underway in Western Sydney LHD and in Sydney Children’s Hospital Network.
- LHD CIO’s are lining up to enable eduroam
eduRoam on Health Campuses

Victoria

- Monash, Latrobe and Deakin all active


- Epworth Health has independently deployed eduroam at its Richmond campus

- Deakin is in the process of deploying eduRoam across the Grampians Rural Health Alliance network
Questions