



# Australian Health Contact Centres



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## Preface

This Standard was prepared by the Standards Australia Committee HE-034, Health Contact Centres.

The objective of this Standard is to provide health contact centres with requirements that ensure the quality of health and health-related services provided through any communications medium.

The term “informative” is used in Standards to define the application of the appendices to which it applies. An “informative” appendix is only for information and guidance.

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## Introduction

In order to develop an effective Standard that achieves its proposed objectives, several questions around the definition and scope of health contact centres needed to be addressed.

There has been some confusion in recent years about the definition of telehealth, digital health, telemedicine, teletriage, call centres, contact centres and how they interconnect.

Telehealth has been defined by the World Health Organization as:

The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation, and for the continuing education of health care providers, all in the interests of advancing the health of individuals and their communities.

[SOURCE: WHO. *TELEMEDICINE Opportunities and developments in Member States. Report on the second global survey on eHealth. Global Observatory for eHealth series. Volume 2, 2010, p 9*]

As the definition suggests, there are many different media available and used, to deliver telehealth services. These include telephones, video, websites, television, facsimile, social media, web chat, SMS and email. Telehealth is an all-encompassing term that includes many other health services, e.g. teletriage, telemedicine, telemonitoring, tele information, telesupport and telecare. These tend to be defined according to who is delivering the health service and the objective of the service, i.e. triage, diagnosis, advice or education. Some of these services are clinician led while others are non-clinician led.

Call centres, more recently known as contact centres, have developed over the past 20 years as an effective and efficient way to provide many telehealth services.

Contact centres may be any of the following:

- (a) Location based or virtual.
- (b) Comprise one to two call takers or possibly hundreds of call takers.
- (c) Staffed by a clinician, e.g. a doctor, a nurse, dietician, physiotherapist, or by a non-clinical call taker.

Calls may be client–caller initiated, or initiated by the contact centre staff. Therefore, calls may be inbound to the centre or outbound from the centre.

Although the service may not be a health service, but “health-related”, e.g. registering for an aged care assessment, all calls have the potential to carry a clinical risk. If a contact centre is providing any health or health-related service or information, there are clinical risks that need to be managed.

Also covered by this Standard are a growing number of contact centre services that help to deliver well-being outcomes that link with public and preventive health agenda. The focus is therefore, on people’s well-being, albeit that there will also be clinical benefits. These services have a vital role to play in assisting people to manage their own lifestyles. Contact centre services are therefore supporting, in different ways, the needs of people of all ages. Such services can at the same time, help to build greater health literacy among users, i.e. the knowledge by which people are better able to understand and manage their own health and navigate health systems.

# Australian Standard<sup>®</sup>

## Australian Health Contact Centres

### 1 Scope and general

#### 1.1 Scope

This Standard specifies requirements for the governance, management and performance of “health contact centres” that provide health and health-related services through the use of any communications medium.

This Standard is applicable to contact centres delivering health services that include, but are not limited to the following:

- (a) Assessment and registration for health services.
- (b) Care co-ordination.
- (c) Case management.
- (d) Counselling.
- (e) Diagnostic services.
- (f) Health coaching.
- (g) Health system navigation.
- (h) Management of health records.
- (i) Mental health triage, support and treatment.
- (j) Prioritization and classification (assessment).
- (k) Provision of advice, treatment or other health service information.
- (l) Support services, e.g. smoking cessation.
- (m) Symptom triage.

This Standard defines the requirements for —

- (i) governance;
- (ii) management of the contact;
- (iii) workforce;
- (iv) information management; and
- (v) technology.

This Standard does not apply to face-to-face (physically present) interactions for health care. It also excludes static, non-interactive information provided in publications and on websites.

This Standard does not apply to emergency contact centre services (e.g. ambulance) nor does it apply to telephonic conversations and consultations between allied health professionals, general practitioners and/or medical specialists, whether such conversations involve a patient or not.

This Standard does not apply to conversations other than those conducted when the clinician is acting as a staff member of a health contact centre or in a role for which they have been credentialed by a health contact centre.