

The submission and Terms of Reference:

The submission below addresses the terms of reference on:

How can we optimise translation of health and medical research into better health and wellbeing?

(Terms of Reference 4, 8, 9, 10 and 11)

I am an academic and researcher in the Medical/Health Informatics domain. For the last 5 years of my research, I have vigorously evaluated that Australia is far behind other nations when integrating Information and Communication Technologies (ICT) into healthcare decision making processes (e.g., Clinical Decision Support Systems, CDSS) and improving healthcare delivery processes (e.g., eHealth & Healthcare Information Technology - HIT). According to the research evidence, the principal research problems in CDSS, eHealth and HIT are information integration and information accountability. While information integration is technologically driven and almost complete, information accountability issues are yet to be resolved technically, organisationally, academically, and politically. When resolving information accountability, it is critical to integrate patients (e.g., the public and consumer) as partners in the research project from day one. This has not been observed in Australian health and medical research in particular eHealth and/or HIT. Furthermore, clinician involvement in most eHealth and CDSS projects are significantly low. When addressing these issues through Australian e-health reforms, improvement of research and translation opportunities between the public and professionals, a solid partnership between all parties including positive political leadership is a must. Any funding for health and medical research must balance these partnerships to achieve a sustainable healthcare system in Australia.

Disclosure and Conflict of Interest:

I am more than happy to share my research findings when opportunities are given in discussion forums. There is no conflict of interest and/or financial benefits on this submission.