Australian Government
Australian Digital Health Agency

Agenda

Council for Connected Care: Meeting 8 – People experiencing health disadvantage

Location: PARKROYAL Melbourne Airport, Victoria Ballroom, level 5, Arrival Drive, Tullamarine VIC 3045.

Meeting: 10:00am – 4:00pm (Australian Eastern Daylight Time) on Tuesday, 25 February 2025

OFFICIAL

Item	Timing		Topic	Presenter
1	5 mins	10:00 am	Meeting opens	Anne Duggan, Chair
2	15 mins	10:05 am	Welcome to Country	Uncle Tony Garvey
3	5 mins	10:20 am	Apologies and housekeeping	Anne Duggan, Chair
4	5 mins	10:25 am	Conflicts of interest	Anne Duggan, Chair
5	5 mins	10:30 am	Minutes of previous meeting, action items and papers for noting	Anne Duggan, Chair
6	15 mins	10:35 am	Short video – people experiencing health disadvantage	Anne Duggan, Chair
	20 mins	10:50 am	Morning tea	
7a	10 mins	11:10 am	Navigating health challenges – culturally and linguistically diverse communities and the role of the new governing body	Mary Ann Baquero Geronimo - FECCA
7b	50 mins	11:20 am	Health needs of people experiencing health disadvantage - current initiatives in transitions of care and medication safety	
			• South Western Sydney Primary Health Network (SWSPHN)	Keith McDonald
			• National Disability Services	Debbie Jaggers

Australian Digital Health Agency
Agenda for Council for Connected Care: Meeting 8 – People experiencing health disadvantage, Tuesday, 25 February 2025

Item	Timing		Topic	Presenter
			• Digital Navigation Project	Rachel Green, SANE Australia CEO
	60 mins	12:10 pm	Lunch	
8	60 mins	1:10 pm	Breakout session - priorities for people experiencing health disadvantage	
	20 mins	2:10 pm	Afternoon tea	
9	60 mins	2:30 pm	Panel discussion - actions to address health disparities and key barriers to accessing connected care services for people experiencing health disadvantage • Mental Health • Consumers' perspective • Federation of Ethnic Communities' Councils of Australia • Domestic Violence	Facilitator: Bettina McMahon – Healthdirect Speakers: Rachel Green - SANE Australia Elizabeth Deveny - CHF Mary Ann Baquero Geronimo - FECCA Monica Trujillo - Telstra Health
10	20 mins	3:30 pm	Roundtable updates from members - current projects or initiatives that focus on people experiencing health disadvantage	Debbie Jaggers Emma Hossack Keith McDonald
11	10 mins	3:50 pm	Summary and other business	Anne Duggan, Chair & Peter Sprivulis, Deputy Chair
			Meeting close – 4:00 pm	

Australian Government
Australian Digital Health Agency

Council for Connected Care
Agenda Item 4: Conflicts of interest

Meeting: 25 February 2025

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Recommendations

That Members:

1   **Declare** any conflicts of interest
2   **Note** that a conflict of interest declaration is required annually.

Purpose

The purpose of this item is for members to declare any new conflicts of interest.

Background

This is a standing agenda item.

Summary of issues

Conflicts of interest

It is important that the Council and its members are free from perceived or real conflicts of interest with the business before them. The Chair will invite members to state any real or perceived conflicts of interest.

If you have been contacted by Secretariat Services, please provide your annual conflict of interest declaration as soon as possible.

Confidentiality

Members and proxies are asked to note that the meeting minutes, action list, and presentation slides are committee-in-confidence and are not to be shared or disclosed externally. Agenda papers and communiqués will be publicly available on the Agency [website](#) and can be shared externally.

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National Healthcare Interoperability Plan 2023-2028
Introduction

The *Connecting Australian Healthcare – National Healthcare Interoperability Plan 2023-2028* (Interoperability Plan) is Australia's first national plan to deliver a connected healthcare system for more personalised holistic care and better health and wellbeing outcomes for all Australians.

The Interoperability Plan sets out a national vision to share consumer health information in a safe, secure and seamless manner and identifies 44 actions across five priority areas – identity, standards, information sharing (sending, receiving and finding the right information), innovation (initiatives that drive interoperability) and measuring benefits – and policy tools to support interoperability.

The Australian Digital Health Agency (the Agency) established the Council for Connected Care (the Council) as the key governance body to provide strategic advice, oversee implementation of the Interoperability Plan, and report on progress.

The Interoperability Plan was published on the Agency's website on 11 July 2023. This is the fifth progress report against the 44 actions in the Interoperability Plan. The timeframes to initiate the 44 actions are categorised as:

- Immediate – within one year (2023-24)

- Ongoing – currently underway (2023-24 to 2027-28)

- Short term – one to three years (2024-25 to 2026-27)

- Medium term – three to five years (2025-26 to 2027-28).

Identity
Health information associated with the right people

Standards
Common meaning of health information

Convenient, safe and secure

Information sharing
Sending, receiving and finding health information

Innovation
Initiatives that drive interoperability

Benefits
Measuring benefits and progress made

National Healthcare Interoperability Plan 2023-2028
Status of actions – quarterly progress report (October – December 2024)

14 actions completed
- ✓ Actions 1.3, 2.4, 2.5, 2.6, 2.7, 2.8, 2.9, 2.13, 2.14, 3.3, 3.5, 5.2, 5.3, 6.1*
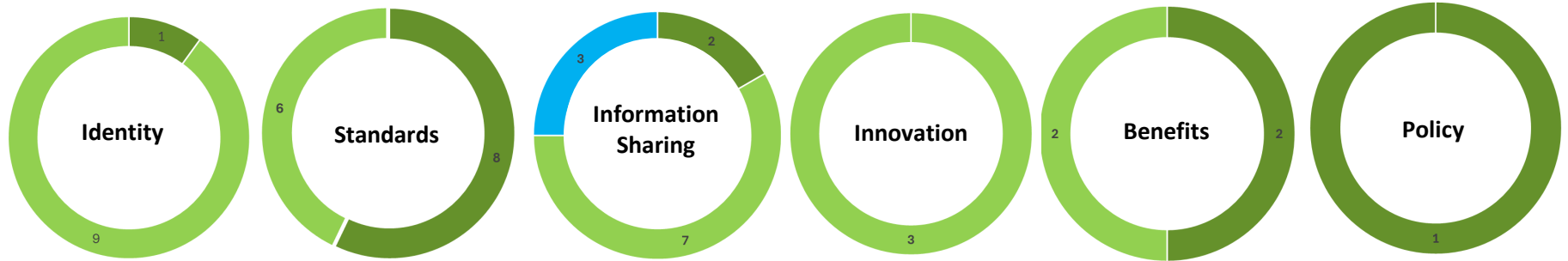
27 actions on track
- ✓ 16 immediate/ ongoing actions
- ✓ 11 short/ medium-term actions

3 short or medium-term actions will commence later in 2024-25 or 2025-26 as per schedule

Progress since last quarter
- ✓ **5 actions** completed
  - Actions 2.4, 2.6, 2.8, 2.14, 5.2
- ✓ **1 action** commenced
  - Action 2.11

Identity — 1, 9

Standards — 6, 8

Information Sharing — 2, 3, 7

Innovation — 3

Benefits — 2, 2

Policy — 1

Legend: ■ Completed ■ On track ■ Not commenced (future work) ■ Behind schedule

Completed actions: Action 1.3 Healthcare Identifiers Roadmap; Action 2.4 International standards participation; Action 2.5 Standards catalogue; Action 2.6 National Digital Health Standards Program (NDHSP); Action 2.7 Standards guiding principles; Action 2.8 Standards gap analysis; Action 2.9 Engage standards stakeholders; Action 2.13 Develop a conformance framework; Action 2.14 Standards development cooperative; Action 3.3 Procurement guidance; Action 3.5 GP and aged care facility interoperability; Action 5.2 Publish annual report; Action 5.3 Assess digital health maturity models; Action 6.1 Policy review

Identity

Healthcare identifiers support information sharing by accurately identifying individuals, healthcare providers and healthcare provider organisations. This ensures information shared is for the right individual and improves the safety of care provided. It also gives individuals greater control over the level of access they provide to healthcare providers.

This priority area includes 10 actions to leverage the national Healthcare Identifiers Service and the National Health Services Directory:

- 2 actions are immediate (2023-24)

- 4 actions are ongoing (2023-24 to 2027-28)

- 4 actions are short (2024-25 to 2026-27).

Progress highlights

Since the publication of the National Healthcare Identifiers Roadmap 2023-2028 in June 2024, the Agency, Department of Health and Aged Care and Services Australia have continued to progress the 12 activities which commenced in FY 2024-25.

Progress is being made with Healthcare Provider Identifier - Individual (HPI-I) compliance when uploading clinical documents to the My Health Record (MHR) system. There are 2 organisations who are compliant, and several additional jurisdictions will achieve compliance by July 2025.

More than 5,900 healthcare services have now registered with Provider Connect Australia™ (PCA™) and the service has been enhanced to enable practitioner self service. Additional improvements to streamline the registration process are planned for release in Q4 2024/5.

The Agency commenced the Directory project on 1 July 2024. A draft Architecture Roadmap was released to provide details on the Directory solution and seek comment from key stakeholders by the end of December 2024.

Identity

Identity progress update

Action	Lead(s)	Timeframe*	Status	Update Q2 2024-25
1.1 **Using healthcare identifiers** Jurisdiction health departments, the Agency and Services Australia will adopt and use national healthcare identifiers in future digital health initiatives involving health information sharing.	The Agency Services Australia All Health Departments	Ongoing	On track	The Agency is working closely with several Jurisdictions and private health organisations to support the use of Healthcare Identifiers (HIs) in clinical documents uploaded to the My Health Record (MHR). The Department of Health and Aged Care continues work with stakeholders to raise the importance of healthcare identifiers to enable connected care and is progressing work to support use of healthcare identifiers in aged and disability care. Services Australia (SA) is on track to complete two technical projects within FY2024/25 funded under the Strengthening Medicare Budget measure: • HI Service New Entity Types • HI Service Allied Health HPI-I Registration Improvements Both projects are enabled by the planned legislation changes and support adoption and use of healthcare identifiers in digital health initiatives. SA has successfully supported the upload of My Aged Care 'care and support plans' to MHR with a notable high success in data match rates. They are also collaborating with one jurisdiction on their implementation and use of HIs as a primary identifier.

Identity progress update

Action	Lead(s)	Timeframe*	Status	Update Q2 2024-25
1.2 **Promoting healthcare identifiers** Promote the use of individual healthcare identifiers (IHIs), including creating IHIs for newborns as soon as possible after birth.	The Agency Services Australia	Ongoing	On track	The Agency is progressing a number of activities and deliverables within the Healthcare Identifiers Roadmap (HI Roadmap) to support the further promotion of healthcare identifiers, including looking to promote healthcare identifiers through education resources. Services Australia continues to engage with the Birth of a Child Program and work collaboratively with The Agency to assess viability of assigning IHIs to newborns as close as possible after birth.
1.3 **Healthcare Identifiers Roadmap** Develop a Healthcare Identifiers Roadmap that includes: • coordinating the response to recommendations from the 2018 Healthcare Identifiers Act and Service Review and the 2020 review of the My Health Records Act that relate to or affect healthcare identifiers • reviewing legislative impediments to the wider uptake of healthcare identifiers in the Healthcare Identifiers Act 2010 • reporting on healthcare identifier adoption.	The Agency Department of Health and Aged Care	Immediate	Complete	The Agency in collaboration with the Department of Health and Aged Care and Services Australia, published the National Healthcare Identifiers Roadmap 2023-2028 in June 2024. Updates against the 20 activities in the Healthcare Identifiers Roadmap can be found at the end of this report.
1.4 **Healthcare identifier matching** Develop and implement a program of improvements in healthcare identifier matching (especially IHIs), focusing on data quality, user interfaces, service improvements, enhancements and proactive efforts on IHI retrieval.	The Agency Services Australia	Short	On track	Services Australia are working with the Agency to progress IHI match rates and data quality in the Healthcare Identifier Service. This includes data accuracy and completeness through data quality management, reduced matching errors and building a better customer experience. Planning is underway for stakeholder consultation on opportunities for further improvement of IHI match rates and data quality in the HI Service building on those delivered in June 2024.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Identity progress update

Action	Lead(s)	Timeframe*	Status	Update Q2 2024-25
1.5 **Review Healthcare Provider Identifier – Individual (HPI-I) conformance** Review conformance requirements for using HPI-Is when uploading documents to the My Health Record system, recognising that providers are at different stages of use of HPI-Is.	The Agency	Short	On track	The Agency continues to work closely with states, territories and private health organisations to progress their transition timeline plans and support the implementation of HPI-Is in clinical document uploads to the My Health Record (MHR). Conformance requirements continue to be reviewed, and work to streamline conformance is being progressed. Several Jurisdictions and private health organisations will join Western Australia (WA) Health and St John of God from July 2025, as they no longer require an exemption for uploading HPI-Is to the MHR.
1.6 **Develop deeper network structures** Develop deeper Healthcare Provider Identifier – Organisation (HPI-O) network structures, including revising published guidance, to support enhancing online HPI-O network registration, and work with vendors to address software limitations.	The Agency Services Australia	Short	On track	The Agency has completed consultation on uses of Healthcare Provider Identifier – Organisations (HPI-Os) and national location identifiers, and recommendations will be finalised next quarter to inform future guidance. As part of Healthcare Identifier (HI) service legislation readiness, Services Australia is looking at expanded use of Healthcare Identifiers across health administration (including claims and payments), disability and aged care. This includes discovery into appropriate organisation structures within the HI service.
1.7 **Using the National Health Services Directory (NHSD)** Use the NHSD as the service directory for digital health programs. The NHSD should be a core data source for the Directory in the national Health Information Exchange (HIE), which will present a consolidated view of service information from NHSD alongside provider information sourced from other core data sources. Where this is not possible (such as for a specialised directory), jurisdictions will work with Healthdirect Australia and the Agency to support the required flow of information.	All Health Departments	Ongoing	On track	The Department of Health and Aged Care is progressing work on the legislative settings for directory services, including the NHSD, to support digital health programs and the secure and seamless flow of information.

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* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Identity progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
1.8	**Implementing the 2019 National Health Services Directory (NHSD) review** Healthdirect, in partnership with the Australian Government Department of Health and Aged Care and state and territory health departments, will implement the work packages developed in response to the 2019 AHMAC NHSD review, which include positioning the NHSD as core national infrastructure.	Healthdirect	Ongoing	On track	Healthdirect continues to support state and territory initiatives and has progressed the following activities in the second quarter of the 2024-25 financial year: • Continued support for New South Wales (NSW) Health's rollout of their Engage Outpatient project, which uses the NHSD FHIR API to enable electronic referrals from General Practitioners (GPs) into NSW Health outpatient clinics. • Completed check-point report to assess the progress of identified initiatives in the NHSD Data Strategy, and to reaffirm initiatives that are yet to be commenced. • In collaboration with the Provider Connect Australia (PCA) team, Healthdirect is designing a broader FHIR Data Model framework to enable more refined searching to distinguish across similar health services. • Healthdirect has identified 25 high priority service types based on analysis of consumer search behaviour and Healthdirect Helpline data. Continuous quality improvement of directory data is an ongoing activity, linked to the PCA adoption program and through data sharing partnerships.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Identity progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
1.9	**Provider Connect Australia™** Roll out and support the implementation of Provider Connect Australia™.	The Agency	Immediate	On track	As of 05 December 2024, 2,899 healthcare clinics comprised of 5,934 healthcare services have registered to Provider Connect Australia™ (PCA™) and 37 business partners been onboarded. The project continues to engage with Allied Health peak bodies, private health insurers and healthcare providing organisations to connect to PCA™. The PCA™ service has been upgraded to support practitioner self-service functionality allowing them to publish their own information such as qualifications to business partners. Additional product enhancements are scheduled for Q4 2025 to streamline the registration process and improve control over information received.
1.10	**Integrating the NHSD and the Health Provider Directory (HPD)** Assess the feasibility of integrating the NHSD and the HPD to reduce duplication and rationalise the national directory infrastructure.	The Agency	Short	On track	In October 2024, The Agency released the draft HIE Architecture and Roadmap document which provided details on the proposed Directory capability for key stakeholder feedback. In late December 2024 ministerial approval was provided to delegate the function to deliver the Healthcare Provider Directory (HPD) from Services Australia to the Agency. Delegation of the HPD will support current work by the Agency to develop a consolidated directory of healthcare providers, which is a key component of the modernised My Health Record and proposed national Health Information Exchange (HIE) architecture. Services Australia and The Agency are collaborating on design, data exchange and permissions to provision the data for the Directory. High level requirements have also been developed and shared with the Jurisdictional Advisory Group for review and feedback.

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* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards

Standards

To seamlessly exchange or access health information and ensure consistent understanding, it is essential to have agreed digital health standards, specifications and terminology.

This priority area includes 14 actions to drive effective leadership and a sustainable approach to standards governance:

- 5 actions are immediate (2023-24)

- 4 actions are ongoing (2023-24 to 2027-28)

- 5 actions are short (2024-25 to 2026-27).

Progress highlights

The Sparked FHIR Accelerator program, a cooperative between the Agency, CSIRO, HL7 Australia and the Department of Health and Aged Care, continues to drive terminology adoption and implementation.

The Agency consulted with the Australian Digital Health Standards Advisory Group to develop a criteria and understand mapping attributes, and this work will support the identification of relevant terminology maps to be included in the National Library.

The Digital Health Standards Catalogue was published in June 2024, and 908 standards have been added to the catalogue.

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.1	**Terminology in digital health systems** Engage with the health technology sector and health departments to enhance digital health systems to integrate national terminologies and classifications natively.	The Agency	Ongoing	On track	The release of AMTv4 has successfully been implemented. The CSIRO Project team have continued to provide support as the transition occurred. The Agency and CSIRO team held a Jurisdictional workshop in October 2024. The workshop brought representatives from each jurisdiction together to understand each State's implementation, future terminology needs and requirements to drive adoption and implementation of terminology standards nationally. The information collected will be used to develop a terminology maturity model for Australia. Further engagement across the sector with aged care organisations, diagnostic industry, Clinical Information System vendors, clinical colleges and healthcare organisations around the adoption of the NCTS, Ontoserver and SNOMED CT remains ongoing as part of the adoption program.
2.2	**Develop specifications and standards** Engage with the health sector on the development, selection, use and maintenance of specifications and standards that support the Agency's approved priorities. When required, Agency-developed specifications will be progressed to become standards through the appropriate standards development organisation and their balloting/development processes.	The Agency	Ongoing	On track	The Agency published its Clinical Digital Architecture (CDA) schema as FHIR logical models Implementation Guide (IG) on the Developer Portal on 29 August 2024. This IG will play a central role in FHIR-facade type use cases for the modernised My Health Record. The Agency continues its active participation in the Sparked Clinical and Technical Design Groups. A key focus area, currently, is to support the development of a Patient Summary specification.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.3	**HL7 FHIR® AU usage** Develop and expand on HL7 FHIR® AU Base 2 for all Agency and Healthdirect digital health systems and services, including modifications and new systems.	The Agency Healthdirect	Ongoing	On track	The Agency has continued to update its existing FHIR IGs to change their dependency from the HL7 AU Base FHIR IG to the HL7 AU Core FHIR IG, where viable, as part of monthly improvement sprints of work. An internal proof of concept was recently conducted to generate a conformant International Patient Summary (IPS) out of the My Health Record (MHR) using computational methods. The MHR IPS leveraged both AU Base and AU Core FHIR profiles. Healthdirect has made further progress to implement and align to the FHIR standard as follows: • Completed the build and test activities to implement CSIRO's Ontoserver to enable the syndication of SNOMED terminology from the National Clinical Terminology Service and broader use within Healthdirect. • Completed development to integrate with the Healthcare Identifier Service to enable the consumption of IHIs and the future upload of records to the My Health Record. This is underdoing HI Notice of connection testing and conformance testing expected to be completed by the end of December. • Continued to onboard booking providers to the FHIR ingestion integration pipeline to support automated sharing of booking details. • Completed the transition of Healthdirect's Service Finder and Symptom Checker products from the NHSD proprietary interface to the FHIR API, enabling the longer-term objective to decommission non-standards-based interfaces.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.3	**HL7 FHIR® AU usage (continued)**	The Agency Healthdirect	Ongoing	On track	• Commenced engagement with The Agency's MyHealth app team to support the transition of the MyHealth App from the NHSD proprietary interface to the standards based FHIR API.
2.4	**International standards participation** Support Australian participation in international standards development.	The Agency AIHW	Ongoing	Complete	The Agency continues to actively engage with HL7, IHE, GS1 and SNOMED-CT internationally through multiple channels and standards development work. Our ongoing participation in Standards Australia committees also enables us to continue our participation within the ISO work program. Expansion of these activities to encompass other standards organisations and standards development continues where it will support the Australian digital health agenda. Standards participation is an embedded part of the Digital Health Standards Program and engagement will be ongoing. Engagement with the Global Digital Health Partnership also provides a valuable opportunity to drive aligned global standards activities across multiple countries and the wider global standards community. The Australian Institute of Health and Welfare attended the WHO Family of International Classifications October Annual Meetings where improvements to the ICD-11 update process were endorsed and changes to the classification were approved. Work on the International Classification of Health Interventions is also moving toward global endorsement. Both WHO and SNOMED International have announced their intention to explore collaboration on aligning their standards for greater interoperability in the future.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.5	**Standards catalogue** Develop and implement a national digital health standards catalogue as a user-friendly access point for digital health standards.	The Agency	Immediate	Complete	Following the publication of the initial version of the Digital Health Standards Catalogue in June 2024 further content has continued to be added to enhance the initial functionality and foundational elements. Work is commencing in November 2024 to define initial use cases for the planned curated content. To date, 908 standards have been published. Additional standards will continue to be published on an ongoing basis to enrich the content available to users.
2.6	**National Digital Health Standards Program (NDHSP)** Implement the NDHSP to develop a dynamic, comprehensive and collaborative digital health standards environment. This program will inform the need for and scope of national governance arrangements for standards.	The Agency	Ongoing	Complete	The Agency is responsible for national stewardship, leadership and coordination of a dynamic, comprehensive and collaborative Digital Health Standards ecosystem. Core to this work is engaging with standards development organisations and industry experts to shape how the digital health standards community delivers the tools needed to support healthcare in a connected digital future. All workstreams of the NDHSP have been established and continue to evolve in consultation with the sector to meet the needs and increasing levels of maturity. Program areas include Standards Governance, Standards Products, Standards Development, Standards Adoption and Implementation and capacity uplift streams. The Agency continues to lead and coordinate collaboration and engagement within the standards community to enable Australian healthcare interoperability.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.7	**Digital health standards guiding principles** Develop and publish a set of national guiding principles for those developing or implementing digital health standards in Australia, in partnership with standards development organisations and the health technology sector.	The Agency	Immediate	Complete	The Agency published national digital health standards guiding principles on its Digital Health Developer Portal in June 2023. The seven principles were developed in consultation with our partners in standards and interoperability.
2.8	**Standards gap analysis** Complete a gap analysis to prioritise the digital health standards that are required most urgently to accelerate the interoperability agenda.	The Agency	Immediate	Complete	An initial gap analysis to identify digital health standard improvement work has been completed, and programs to prioritise the Standards Roadmap, the Standards Catalogue and Procurement Guidelines have been initiated. While the initial work has been completed, the Agency will continue to assess sector priorities and identify gaps to accelerate the interoperability agenda. Tooling proposed to support the Gap Analysis process continues to be refined in line with the changing needs of the sector. Critical work on local standards development continues within the 'Sparked' program where further requirements are also being identified and addressed, alongside other international standards development activities.
2.9	**Engage standards stakeholders** Develop and maintain strong partnership ties with the health technology sector, standards development organisations and other key standards bodies.	The Agency	Immediate	Complete	Strengthening of partnerships with key Standards Development Organisations continues as The Agency works to ensure partnership agreements and joint work plans are in place to support wider program outcomes. The Agency has continued to encourage collaboration among standards stakeholders through the Australian Digital Health Standards Advisory Group. The Agency also holds regular meetings with a wide range of stakeholder groups to ensure that Agency work in the National Digital Health Standards Program is well informed and relevant to the wider sector.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.10	**Including terminology in datasets** Coordinate discussions on expanding minimum datasets to incorporate the use of SNOMED CT-AU, AMT and LOINC for data not currently collected in areas such as medications, adverse reactions, pathology and radiology.	The Agency	Short	On track	The Agency and CSIRO continue to drive terminology adoption and implementation through the Sparked Accelerator Program. An initial release of the Radiology Reference Set (RRS) is expected to be published later this year on the National Clinical Terminology Service (NCTS). In addition, The Agency and the Department of Health and Aged Care are working together on the Aged Care Clinical Information System Standards to drive the adoption and implementation of SNOMED CT into national aged care data sets. This project is in the scoping stage and will progress in the 2025/26 financial year. Terminology breakouts are a regular feature of the HL7 AU Connectathons to support industry in adoption SNOMED CT as part of AU Core and eRequest IGs.
2.11	**National library of terminology mapping** Develop a national "library" of resources that provide translation mapping from national terminologies to other popular terminologies.	The Agency	Short	On track	The Agency has consulted with the Australian Digital Health Standards Advisory Group (SAG) to develop a criteria and understand mapping attributes, to support the identification of relevant terminology maps to be included in the National Library. The criteria includes considerations on national relevance, maturity and maintenance and clinical safety. The Agency will continue its consultation work and plans to publish a summary, use-case example and link to the relevant map on the Digital Health Standards Catalogue by June 2025.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.12	**API information exchange** Engage with the health technology sector to enhance digital health systems to use HL7 FHIR®, OAuth and OpenID Connect for API information exchanges.	The Agency	Short	On track	The Department of Health and Aged Care is developing an Authentication and Digital Identity Strategy together with the Australian Digital Health Agency and Services Australia. Options for authentication are being developed for stakeholder consultation in the coming quarter. The Agency is collaborating with the digital health community to develop a standardised API framework model supporting discovery and access to information within the digital health ecosystem.
2.13	**Develop a conformance framework** Engage with stakeholders to develop a conformance framework and associated conformance rules for national digital health systems and services.	The Agency	Short	Complete	The Agency published its Conformance Framework in July 2024. The Conformance Framework provides a strategic overview of the purpose and function of conformance and how the Agency develops, operationalises, assesses, and maintains conformance schemes, profiles and artefacts.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Standards progress update

Action		Lead	Timeframe*	Status	Update Q2 2024-25
2.14	**Standards development cooperative** Establish a cooperative of developers working to expedite the development of new digital health standards, with a suitable operating model.	The Agency	Short	Complete	The Sparked Program is in its second year of operation, after being established in 2023 to develop national digital health data standards. Following the first release of the Australian Core Data for Interoperability (AUCDI R1) in June 2024, Sparked has continued work to develop release 2 with public comment in release 2 open from December until January 2024. Draft AU eRequesting FHIR Implementation Guide (0.1.0) has now been published with work continuing within both Clinical and Technical groups. Initial workshops have been undertaken through the Sparked Program to support development of a localised/Australian version of the International Patient Summary (Australian Patient Summary). The initial focus will be identifying priority use cases and understanding data requirements related to Reason for Encounter and Chronic Disease Management.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Information sharing

Information sharing

The sharing of information between healthcare providers and consumers requires information to be discoverable and accessible within a framework of trust, safety, consent, privacy and data quality.

This priority area includes 12 actions to increase the safe, secure and seamless sharing of information with the right people at the right time:

- 3 actions are immediate (2023-24)

- 2 actions are ongoing (2023-24 to 2027-28)

- 4 actions are short (2024-25 to 2026-27)

- 3 actions are medium (2025-26 to 2027-28).

Progress highlights

Stage 1 of the Producer Portal was delivered in November 2024, delivering API Gateway technology stack integration, along with foundational identity and orchestration capabilities.

Additional functionality, including a pipeline for build promotion and integration with National Clinical Terminology Service to support standards adoption, is already underway and planned for future release.

The Agency is preparing a new my health app feature for release in March 2025. The feature enables consumers who are 14 years old and over to register their preferred GP practice and practitioner.

The Agency has drafted a report reviewing international literature on standards, policy, regulations, and guidelines. The report is currently being reviewed and refined.

Information sharing progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
3.1	**Interoperability in procurement** The Agency, health departments and Services Australia will specify interoperability requirements in procurement requests where they meet business objectives. This will leverage existing national infrastructure, terminology and standards.	The Agency All Health Departments Services Australia	Ongoing	On track	The Agency has embedded the consideration of standards and interoperability requirements within their procurement processes. The implementation of Digital Health Procurement Guidelines will assist health provider organisations to embed interoperability principles into their procurement processes.
3.2	**API Gateway information exchange** Promote the use of the API Gateway to support interoperable information exchange, including development of a service catalogue.	The Agency	Ongoing	On track	The Australian Digital Health Agency's (ADHA) Health API Gateway is envisioned to become the central hub for accessing digital health systems and services across the digital health ecosystem. Clinical Information Systems (CIS) and other systems will access these services through application programming interfaces (APIs). Foundational capability that supports this goal is a Producer Portal that allows for building and deploying of FHIR APIs, SMART on FHIR forms and other applications. Phase 1 of the Producer Portal was delivered in November 2024, delivering API Gateway technology stack integration, along with foundational identity and orchestration capabilities. In addition it,also laid the initial foundations for conformance automation and leveraged a test of the Comprehensive Health Assessment Program (CHAP - a best practice tool for improving the uptake of annual health assessments for people with intellectual disabilities) SMART on FHIR use case, to demonstrate the value and capability of the Producer Portal. Phase 2 planning has commenced and is expected to include the build of a non-prod to production pipeline and integration with National Clinical Terminology Service to support standards adoption.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Information sharing progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
3.3	**Procurement guidance** Establish an intergovernmental working group to harmonise procurement and use of standards, based on best-practice approaches to interoperability requirements for information and communications technology system procurement.	The Agency	Immediate	Complete	The initial version of the Digital Health Procurement Guidelines was published in June 2024 with the support of the Australian Digital Health Standards Advisory Group and Procurement Reference Group. Input from health departments and government agencies at state and federal levels and software developers has been integral to the development of the guidelines. Work under this action is expected to continue, expanding guideline content to cover as many technology platforms and procurement processes as possible.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Information sharing progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
3.4	**Online interoperability toolkit** Develop and maintain an online interoperability toolkit that provides practical guidance, lessons learned, case studies, data dictionaries, terminologies, common specifications, frameworks and a library of exemplars and reusable components, including implementation guides.	The Agency	Immediate	On track	The Agency is considering a range of options to support an online community forum, as part of a project to expand the scope of the online interoperability toolkit to improve online engagement with the digital health community. The online platform will provide information and enable discussion topics for specific communities across software developers, healthcare providers and industry to enhance collaboration.
3.5	**GP and aged care facility interoperability** Assess the current interoperability between GP and residential aged care facility systems, identifying issues, requirements and potential solutions to resolve issues.	The Agency	Immediate	Complete	The Agency has assessed the interoperability between GP and residential aged care facility systems and made recommendations that will inform future work on clinical information systems (CIS) information exchange standards pertinent to both aged care and GP systems. In August 2024, the Agency published the Aged Care Clinical Information System (ACCIS) Standards – a list of recommended minimum software requirements for CIS including electronic Medication Management (EMM) used in residential aged care homes.
3.6	**Consent Management** Engage with consumers to investigate options for enabling individuals to grant consent to access all their health information, including in My Health Record. Options will include making it easier to choose which healthcare providers are authorised, and the types of information they can access.	The Agency	Short	On track	Discussions on consent management are ongoing within the Agency to align the various work streams related to consent, including an internal Working Group being established. A consent management study is underway, with completion expected in Q3 2025. In early 2025, consent for research and public health collaboration activities are expected to re-convene and include the Agency, the Department of Health and Aged Care, the Data Governance Board Chair and the Australian Institute of Health and Welfare.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Information sharing progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
3.7	**Research international practice** Assess the UK national minimum standards for digital health technologies and similar international policies to inform consultation on Australian approaches.	The Agency	Short	On track	The Agency has drafted a report reviewing international literature on standards, policy, regulations, and guidelines. The report is currently being reviewed and refined.
3.8	**Care management network** Investigate opportunities to build capability to identify and manage individuals within a consumer's formal and informal care management network.	The Agency	Short	On track	The Agency is preparing a new my health app feature for release in March 2025. The feature enables consumers who are 14 years old and over to register their preferred GP practice and practitioner. In Q1 FY25-26, a feature that enables the authorised representative of consumers under 14 years of age to register their preferred GP practice and practitioner is planned for release. Additional my health app capabilities are being planned to enable a consumer to create and manage a personalised care team, as part of the MyMedicare Care Team Registration. Initially, this feature will assist persons with specific chronic conditions and allow them to add registered healthcare providers to support treatment. For those consumers who do not access My Health Record, assisted registration functionality is being explored. The work is in the early stages of discovery and development work is targeted in FY25-26.
3.9	**Information-sharing model agreement** Collaborate with stakeholders on the development of a model agreement to be used by organisations holding personal health information. This will specify the terms and conditions for sharing, discovering and acquiring information from other organisations. It will cover privacy, security, access controls, patient data rights, technical specifications and intellectual property rights.	Department of Health and Aged Care	Short	On track	The Department of Health and Aged Care is progressing policy development work for various foundational elements of the HIE legislative and policy framework including an authorisation framework, regulating FHIR standards and legislation underpinning the HIE provider directory capability.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Information sharing progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
3.10	**Publish-subscribe service** Develop a business case for a national publish-subscribe service to support actions such as alerts, changes to an individual's health information and notifications of acute episodes. This would be available to individuals, healthcare providers and healthcare provider organisations.	The Agency	Medium	Not commenced	This medium-term action will be progressed in the 2025-26 financial year.
3.11	**Consistent legislative health definitions** Collaborate with jurisdictions and key stakeholders to develop consistent definitions to support health information sharing.	The Agency	Medium	Not commenced	This medium-term action will be progressed in the 2025-26 financial year.
3.12	**Harmonising legislation** Undertake collaborative intergovernmental work on harmonising relevant jurisdiction legislation, drawing on outcomes from Action 3.11.	All Health Departments	Medium	Not commenced	This medium-term action will be progressed in the 2025-26 financial year.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Innovation

Developing innovative digital products and services and building a workforce that can confidently use digital technologies will encourage and make it easier to connect to and derive value from new digitally enabled models of care that place individuals at the centre of their healthcare experience.

This priority area includes 3 actions to drive innovation and digital health capability:

- 1 action is immediate (2023-24)
- 2 actions are ongoing (2023-24 to 2027-28).

Progress highlights

The Capability Action Plan (CAP) 2024-2025 work program is progressing with activities to build health sector workforce capability and enhance interoperability awareness and understanding in the higher education and vocational training sectors.

The Agency continues to review and maintain the Connected Care Education Resources, expanding existing education content to inform and build knowledge on key interoperability themes of privacy, controls and safety when using healthcare identifiers.

As part of continued engagement with consumer and clinical peak bodies, The Agency held a webinar on 28 November 2024 with the Consumer Health Forum to build awareness of interoperability themes among health consumers.

Innovation progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
4.1	**Interoperability innovation challenges** Run interoperability innovation challenges and "connectathons" to encourage interoperability.	The Agency	Ongoing	On track	Multiple events, workshops and Connectathons were held in 2024. The Sparked program and Standards Development organisations are working to schedule in activities to continue to ensure continued innovation and accelerated adoption of standards.
4.2	**Interoperability workforce** Implement the National Digital Health Workforce and Education Roadmap to support the workforce required to progress interoperability.	The Agency Australasian Institute of Digital Health	Ongoing	On track	The Capability Action Plan (CAP) 2024-2025 work program has been divided into four program areas with eight projects to be undertaken by external stakeholders to support the Agency to meet the delivery of the key actions of the CAP by 2028. Several health sector workforce capability projects have commenced in the tertiary and vocational education sector, along with work on an Intermediate Clinical Safety course and an upgrade of our On Demand Training environment. In 2025, several projects are planned including a course designed specifically for Aboriginal and Torres Strait Islander people, and the delivery of the Digital Health Workforce (Hub). The Agency will continue to advocate for interoperability in tertiary and vocational education courses.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Innovation progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
4.3	**Develop education content** Develop education content in partnership with users to increase awareness of interoperability.	The Agency	Immediate	On track	The Agency continues to review and maintain the Connected Care education resources library, expanding existing education content to inform and build knowledge on key interoperability themes of privacy, controls and safety when using healthcare identifiers. As part of continued engagement with consumer and clinical peak bodies, The Agency held a webinar on 28 November 2024 with the Consumer Health Forum to build awareness of interoperability themes among health consumers.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Benefits

Benefits

Measuring digital health maturity – including the interoperability of the healthcare system – will help identify areas for investment and track progress for continuous improvement.

This priority area includes 4 actions to continuously measure digital health maturity:

- 1 action is immediate (2023-24)
- 2 actions are ongoing (2023-24 to 2027-28)
- 1 action is short (2024-25 to 2026-27).

Progress highlights

The Council for Connected Care, the national group established to govern the Interoperability Plan, met for the seventh time on 14 November 2024 and discussed a range of important factors to support the health of older Australians, including transitions in and out of aged care and medication safety.

The next Council for Connected Care meeting will be held on 25 February 2025. This meeting will discuss interoperability in the context of vulnerable communities.

The fifth report on progress against the 44 actions in the Interoperability Plan was published on 31 October 2024.

Benefits progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
5.1	**Administer interoperability survey** Undertake an interoperability survey of hospital, pharmacy, GP, allied health, specialist and aged care organisations periodically to measure overall progress on interoperability, starting with a baseline survey in 2022.	The Agency	Ongoing	On track	The survey results from the 2022 Interoperability Benchmark Survey can be found on the Agency's website. Planning continues for the next survey to be conducted in late January/ early February 2025. In the interim, a sub-set of Interoperability Benchmark Survey questions are administered on a quarterly basis to monitor change.
5.2	**Publish annual report** Publish an annual report on progress of the National Healthcare Interoperability Plan.	The Agency	Ongoing	Complete	The first annual report (2023-24) was published on 1 August 2024. This is the sixth report on progress against the 44 actions in the Interoperability Plan. The Agency has established the Council for Connected Care as the key governance body to provide strategic advice, oversee implementation of the Interoperability Plan and report on progress. The Council met for the seventh time on 14 November 2024. A range of important factors were discussed to support the health of older Australians, including transitions in and out of aged care and medication safety. The meeting outcomes can be found on the Council's webpage.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Benefits progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
5.3	**Assess digital health maturity models** Collaborate with jurisdictions to assess digital health maturity models.	The Agency	Immediate	Complete	The Agency has undertaken a review of national digital maturity assessments in healthcare, with a focus on models relevant to interoperability. The review is being used to inform Action 5.4.
5.4	**GDHP interoperability maturity model** Work with the Global Digital Health Partnership to develop and apply the Global Interoperability Maturity Model.	The Agency	Short	On track	Through the Evidence & Evaluation workstream of the Global Digital Health Partnership (GDHP), and in collaboration with the Interoperability workstream, a GDHP Digital Health Maturity Model is being considered. Categories within the model may include interoperability, cybersecurity, policy environments, and clinical and human engagement. Member countries are currently being surveyed and a paper will be presented to the GDHP summit in late January 2025. The build and implementation of the Digital Health Maturity Model is expected to commence in early 2025.

* Actions are categorised as Immediate (2023-24); Ongoing (2023-24 to 2027-28); Short (2024-25 to 2026-27); or Medium (2025-26 to 2027-28).

Policy tools

Policy Tools

Governments have many policy tools that could be used to support and accelerate interoperable solutions and standards. This priority area includes 1 immediate (2023-24) action to review policy tools.

Progress highlights

This action is completed as reported in the first quarterly progress report.

Policy tools progress update

Action		Lead(s)	Timeframe*	Status	Update Q2 2024-25
6.1	**Review policy tools** Engage collaboratively with health departments and key stakeholders to review the effectiveness of current policy tools and assess the additional mechanisms required to support and accelerate interoperability.	The Agency	Immediate	Completed	In 2022 the Agency undertook an evidence review of policy tools to promote digital health system interoperability. The findings were shared with the Australian Government who committed to explore options to legislate information sharing in the 2023-24 Budget.

Australian Government
Australian Digital Health Agency

National Healthcare Identifiers Roadmap

Quarterly progress report (October 2024 to December 2024)

Delivered as part of the *National Healthcare Interoperability Plan 2023-2028*

Issued 31 January 2025

1

National Healthcare Identifiers Roadmap 2023-2028
Introduction

The Australian Digital Health Agency (the Agency), in collaboration with the Department of Health and Aged Care (the Department) and Services Australia, has developed a National Healthcare Identifiers Roadmap 2023-2028 that includes 20 activities to drive uptake of the Healthcare Identifiers Service.

Healthcare identifiers are fundamental to a connected healthcare system as they support information sharing by accurately identifying the healthcare recipient, provider and organisation, ensuring information is shared for the right individual to the right provider. This will improve the quality, safety and efficiency of care provided and puts Australians even more firmly at the centre of their own healthcare experience.

The Healthcare Identifiers Roadmap is an action in the Connecting Australian Healthcare – National Interoperability Plan 2023-2028 that is governed by the Council for Connected Care and is critical for progressing national digital health programs including sharing by default for pathology and diagnostic imaging reports, electronic prescribing, electronic requesting, MyMedicare and the national Health Information Exchange.

This is the second quarterly progress report against the 20 activities in the Healthcare Identifiers Roadmap.

Identity
Health information associated with the right people
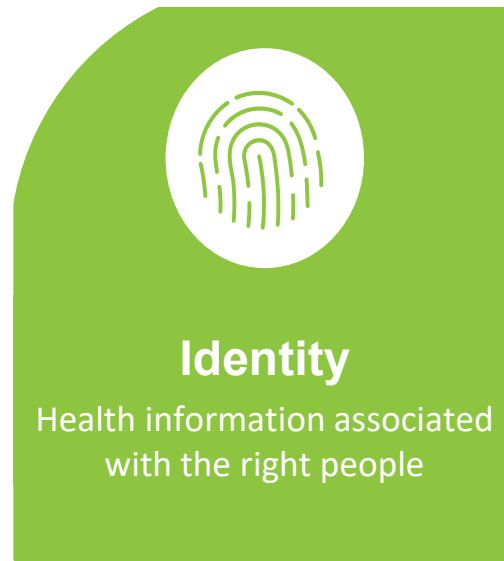
National Healthcare Identifiers Roadmap 2023-2028
Status of actions – quarterly progress report (October – December 2024)

12 activities on track:

HIA-1, HIA-2, HIA-6, HIA-7, HIA-8, HIA-12, HIA-13, HIA-14, HIA-17, HIA-18, HIA-19, HIA-20

8 activities will commence in 2025-26 or 2026-27 as per schedule

HIA-3, HIA-4, HIA-5, HIA-9, HIA-10, HIA-11, HIA-15, HIA-16

Legislation & Policy — 2, 3

HI Service Improvement — 3, 3

Architecture and Data Standards — 2, 3

Operational Improvement — 4
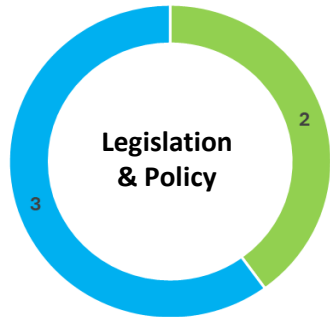
■ Completed   ■ On track   ■ Not commenced (future work)   ■ Behind schedule

Category 1
Legislation and Policy

Key outcomes include:

- Legislative reform to support all parties to manage the health sector effectively and efficiently, and research and evaluation to support continued improvements to outcomes for patients.

- Use of national healthcare identifiers to identify a consumer, healthcare provider individual or healthcare provider organization.

Category 2
HI Service Improvement

Key outcomes include:

- HI Service integrated to clinical and patient administration systems display IHIs to administrative and clinical users

- Meaningful error messages for failed transactions are returned in real time to the individual registering the patient at a health service or providing the clinical service

Category 3
Architecture and Data Standards

Key outcomes include:

- IHIs, HPI-Is and HPI-Os are integrated into all systems supporting clinical workflows.

- IHIs, HPI-Is and HPI-Os are available for any form of clinical communication or handover

Category 4
Operational Improvement

Key outcomes include:

- Identifier matching errors are minimised

- Effective and streamlined management of healthcare identifiers

Legislation and Policy progress update

Activity		Lead(s)	Start date	Status	Update Q2 2024-25
1	HI legislative reform program	Department	2023-24	On track	Work to progress priority amendments is continuing with proposed legislative reforms to progress, subject to decisions of Government, in 2025.
2	Australian Government policy position for HI Service adoption	Department	2023-24	On track	Work is continuing on building in the use of healthcare identifiers to key programs and in support of digital health initiatives, such as ePrescribing.
3	Development of a simplified guide to the HI act	Department	2025-26	Not commenced	This activity will be progressed in the 2025-26 financial year.
4	Template policies and guidelines on HI use	Department Agency	2025-26	Not commenced	This activity will be progressed in the 2025-26 financial year.
5	HI use in consumer applications	Agency	2026-27	Not commenced	This activity will be progressed in the 2026-27 financial year.

HI Service Improvement progress update

Activity		Lead(s)	Start date	Status	Update Q2 2024-25
6	Data matching and data quality improvements	Agency Services Australia	2024-25	On track	The Agency has commenced planning for stakeholder consultation on opportunities for further improvement of IHI match rates and data quality in the HI Service building on those delivered in June 2024. Services Australia is progressing the development of a program of improvements to increase Healthcare Identifier data quality and matching improvements.
7	Review existing messages and responses	Agency Services Australia	2024-25	On track	The updates in the HI Service June 24 release enabled improvements with Retired IHI status response, and this was deployed in a 'switched off" state pending industry engagement. Services Australia has commenced engagement with industry to support software developers moving forward with the improvement of Retired IHI status responses. Services Australia continues discovery into the adoption of and transition to FHIR as a data standard and as a web service protocol with implementation planned for 2025-26.
8	Improvements to data matching for Aboriginal and Torres Strait Islander peoples	Department Agency Services Australia	2024-25	On track	The Agency is continuing to develop and finalise a Stakeholder Engagement and Communications Plan (the Engagement Plan) which ensures alignment to the Australian Health Ministers Advisory Council "Cultural Respect Framework 2016-2026 for Aboriginal and Torres Strait Islander Health- A National Approach to Building a Culturally Respectful Health System". Once finalised, the Engagement Plan will be used to guide interoperability initiatives and inform the development of culturally appropriate engagement tools to assist in Data Matching and Data Quality Improvement programs. Services Australia have completed a project to support improved data matching for Aboriginal and Torres Strait Islander peoples, providing flexibility for healthcare providers to input alternative date of birth and name to improve data matching of IHIs. Services Australia continues to review data matching rates to assess the benefits of these improvements.

HI Service Improvement progress update

Activity		Lead(s)	Start date	Status	Update Q2 2024-25
9	Enhanced search considerations	Agency Services Australia	2025-26	Not commenced	This activity will be progressed in the 2025-26 financial year.
10	Individual Healthcare Identifiers for newborns	Agency Services Australia	2025-26	Not commenced	This activity will be progressed in the 2025-26 financial year.
11	Consumer empowered matching	Department Agency Services Australia	2026-27	Not commenced	This activity will be progressed in the 2026-27 financial year.

Architecture and Data Standards progress update

Activity		Lead(s)	Start date	Status	Update Q2 2024-25
12	Healthcare Provider Identifier – Organisations: Guidance on appropriate structures	Agency Services Australia	2024-25	On track	The Agency has completed consultation on uses of HPI-Os and national location identifiers and recommendations will be finalised next quarter to inform future guidance.
13	HI Service conformance review and update	Agency	2024-25	On track	The Agency is continuing to review opportunities to streamline conformance, with a focus on vendor experience.\n\nIn collaboration with Services Australia, The Agency issued a draft update to the HI Service conformance requirements for industry consultation and conducted an industry information session on the draft changes. The draft conformance Profile was open for external consultation until 24 Dec 2024.
14	Update technical standards	Agency Services Australia	2024-25	On track	Services Australia continues discovery and analysis into the adoption of and transition to FHIR as a data standard and as a web service protocol with implementation planned for 2025-26. This will ensure technical specifications are in place that meet new interfaces based on FHIR standards.
15	HI Service architecture and future extensibility	Agency Services Australia	2025-26	Not commenced	This activity will be progressed in the 2025-26 financial year.
16	Clinical systems architecture and design	Agency	2026-27	Not commenced	This activity will be progressed in the 2026-27 financial year.

Operational Improvement progress update

Activity		Lead(s)	Start date	Status	Update Q2 2024-25
17	Develop and implement HI stakeholder engagement and communication plan	Agency	2023-24	On track	The Agency, in consultation with the Department of Health and Aged Care and Services Australia have developed an initial draft of the Stakeholder Engagement and Communications Plan for consultation with key stakeholders.
18	Development of education materials for HI Service	Agency	2023-24	On track	The Agency is continuing to update and publish new resources in the Connected Care education resources library. Additional educational resources are being developed to build awareness and address key themes of safety and security when using healthcare identifiers.
19	HI support model and future operational requirements	Agency Services Australia	2023-24	On track	The Agency has established a new position under its wider SIAM Organisational Structure to overlook and lead the operations work aligned to HIA-19. The Agency and Services Australia have commenced a review of the existing support and operation model to identify gaps and potential improvements.
20	Enhanced governance	Department Agency Services Australia	2024-25	On track	The Digital Health Oversight Committee has assumed responsibility for the governance of the next phases of healthcare identifier reform and has agreed to establish a sub-committee to drive healthcare identifiers reform work. The Healthcare Identifiers Sub-committee (HISC) will provide support for legislative amendments and ensure that the healthcare identifiers framework is a strong foundation for healthcare ecosystem interoperability. The Healthcare Identifiers Working Group continues to meet monthly to facilitate intergovernmental collaboration between the Department of Health and Aged Care, the Australian Digital Health Agency, and Services Australia.

Thank you to the Council for Connected Care and to all governments and organisations who provided input to this report.

Communiqué

Australian Digital Health Standards Advisory Group

Communiqué – 17 February 2025

The sixth meeting of the Australian Digital Health Standards Advisory Group took place on 17 February 2025. Professor Wendy Chapman opened the meeting with a warm welcome to members, noting the addition of Dr Heather Leslie, OpenEHR International, Mr David Rowlands, HL7 Australia, and Ms Monique Warren, Services Australia to the membership.

The Agency provided an overview of the [October to December 2024 Quarterly Progress Report](#) published 31 January 2025. It was reported that the actions of the National Healthcare Interoperability Plan 2023-2028 were progressing well, with most actions on-track for completion as expected. Members reviewed the outcomes of the November 2024 Council for Connected Care meeting, which emphasised the importance of increasing the adoption and use of national healthcare identifiers and the value of My Health Record to streamline information sharing. The Council also explored challenges for consumers and clinicians in navigating the aged care sector, advising of the need for improved digital literacy and systems in aged care to improve medication safety and transitions in and out of aged care services.

The February meeting of the Australian Digital Health Standards Advisory Group focussed on work underway by the Agency to develop a national health information exchange *HealthConnect*, Common Framework for Interoperability, and International Patient Summary (IPS). Representatives of the Sparked Programme also provided an update on progress to develop an Australian Patient Summary FHIR Implementation Guide for national use and work underway to identify baseline data elements for inclusion.

HealthConnect

The vision for HealthConnect is to seamlessly connect all care providers, consumers and stakeholders across Australia and will serve as a secure, interoperable and patient-centric information sharing network. Members discussed HealthConnect, the Agency's proposed Common Framework for Interoperability and its approach to FHIR API development, which can be used as a consistent base to achieve interoperability and alignment across initiatives within the Australian health ecosystem

Australian Government

Australian Digital Health Agency

International Patient Summary and Australian Patient Summary

Members noted the proof-of-concept work for the My Health Record (MHR) International Patient Summary following initiation of the high priority project in October 2024. The proof of concept consists of the following elements:

- A FHIR implementation guide for a MHR IPS Document with an example document conformant with the IPS, and a stylesheet providing guidance on how to render the content.

- Six sections containing clinical information: Medications History, Allergies and Adverse Reactions, Problems and Diagnoses, Procedures History, Immunisations, and Diagnostic Results.

- The identification of existing MHR views (e.g., Clinical Document Architecture views) to construct the atomic data of these sections and mapping their output to available AU Core and AU Base profiles from original content provided by the views.

- Use case/workflow addresses by the MHR IPS, Conformance, Operation Definition of generating the document, Actors and Capability Statements.

The Department of Health and Aged Care (the Department) also reported progress on development of the *Australian Patient Summary FHIR Implementation Guide* and work underway by a Sparked Programme clinical focus group to identify the core data groups and elements required to produce a basic patient summary. In addition, the clinical focus group will identify clinical scenarios and workflow processes, including consumer journeys, and is assisting the project team to develop technical use cases. The Department noted the identified data elements will be included in the Australian Core Data for Interoperability (AUCDI).

Members also endorsed a proposal to reduce the frequency of meetings to twice per year to allow for the formation of special interest groups and project-specific workshops related to digital health standards. The new format will provide the structure for supporting detailed discussions on standards projects and enable time-limited groups to be convened on priority topics.

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 6: Short video – People experiencing health disadvantage

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1. **Note** the short video about people experiencing health disadvantage and the challenges they experience navigating the Australian healthcare system.

Purpose

The purpose of this agenda item is to highlight some of the challenges faced by people experiencing health disadvantage in Australia and their patient journey. A short video will provide insight into the lived experiences of consumers impacted by these barriers and challenges, and identify the needs of people experiencing health disadvantage. The video will set the scene for the Council session and provide some points of reflection, which will help inform the breakout sessions and panel discussions later in the day.

Background

At the 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions focusing on different population needs in the community to identify opportunities for digital health interoperability.

Summary of issues

The video features a range of consumers sharing their personal experiences and highlighting the challenges and pain points they encounter throughout their health and care journeys. These accounts reflect the lived realities of individuals, particularly those experiencing health disadvantage, and provide valuable insights into the barriers they face when navigating health and care systems.

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 7a: Navigating health challenges – culturally and linguistically diverse communities and the role of the new governing body

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1. **Note** the presentation by Mary Ann Baquero Geronimo, Chief Executive Officer of Federation of Ethnic Communities' Councils of Australia (FECCA) and participate in any discussion.

Purpose

The purpose of this agenda item is to present information about the Australian Multicultural Health Collaborative and current challenges and barriers that impact culturally and linguistically diverse (CALD) communities.

Background

As part of the Council for Connected Care's focus on the pain points experienced across a person's health and care journey, FECCA has been invited to present an overview of the Australian Multicultural Health Collaborative and some of the challenges and barriers experienced by CALD communities within the Australian healthcare system.

This agenda item will be used to inform the breakout sessions and panel discussions to support any shared learnings and cross-pollination that may support how the Australian healthcare system and interoperability can address the unique challenges and barriers faced by CALD communities.

Summary of issues

CALD communities often face unique challenges and barriers when accessing and navigating the Australian healthcare system. These challenges and barriers can result in disparities in health outcomes and a lack of coordinated care. Some issues that CALD communities may experience include:

- language and health literacy barriers

- discrimination and stigma, which lead to mistrust and reluctance to seek healthcare

- socioeconomic factors such as low income, unemployment and isolation

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Council for Connected Care
Agenda Item 7a: Navigating health challenges – culturally and linguistically diverse communities and the role of the new governing body

- access to support services, such as disability or carer support services.

Mary Ann Baquero Geronimo will provide an overview of the Australian Multicultural Health Collaborative, which operates at the national level to advocate for the diverse health and well-being needs of Australia's multicultural communities. This includes research and policy development, and the pivotal role of the National Multicultural Consumer and Carer Network (its consumer-focused Community of Practice), in embedding community and lived experience perspectives in health policy and practice.

The Australian Multicultural Health Collaborative represents a broad range of voices through a formal membership structure that includes multicultural consumers, health and wellbeing services, practitioners, researchers, and organisations focused on multicultural health.

The presentation will also highlight challenges experienced by migrants, refugees, and linguistically diverse people in accessing digital health technologies, leveraging insights from FECCA-led projects and showcase initiatives that have been instrumental in building capacity and awareness of digital health technologies such as My Health Record.

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 7b: Health needs of people experiencing health disadvantage – current initiatives in transitions of care and medication safety

Meeting: 25 February 2025

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Recommendations

That Members:

1. **Note** the challenges and opportunities a more interoperable health system presents for people experiencing health disadvantage

2. **Note** the initiatives presented by Council members and guest speakers and participate in any discussion.

Purpose

The purpose of this agenda item is to present information about the health needs of people experiencing health disadvantage, including any barriers people may face in the healthcare system and an exploration of initiatives currently being implemented to address these.

Background

At the 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions as part of the forward workplan, focusing on the pain points in a person's health and care journey, along with people experiencing health disadvantage in the community.

This agenda item will set the scene for Council members to consider the challenges and barriers faced by people experiencing health disadvantage and how we can achieve better outcomes for these consumer groups.

Summary of issues

Keith McDonald, Chief Executive Officer, SWSPHN

Keith McDonald's presentation will address the challenges that widespread socioeconomic disadvantage in South Western Sydney (SWS) poses for residents' access to quality primary health care.

> *Profile Digital Health Applications*: Present a comprehensive overview of the digital health applications currently being utilised to mitigate these challenges. This includes detailing the specific technologies, their implementation, and the impact they have had on improving access to primary health care for disadvantaged populations in SWS.

OFFICIAL

Council for Connected Care
Agenda Item 7b: Health needs of people experiencing health disadvantage – current initiatives in transitions of care and medication safety

Highlight Additional Systematic Supports: An outline of other necessary systematic supports that need to be integrated alongside digital health solutions. This will cover areas such as policy changes, funding requirements, community engagement strategies, and intersectoral collaborations that are essential to enhance the overall effectiveness of health care delivery in socioeconomically disadvantaged regions.

Debbie Jaggers, State Manager NSW, National Disability Services

During this presentation, Debbie Jaggers will leverage her extensive operational experience in health and disability, along with her advocacy expertise within the disability sector to provide valuable insights into the key complexities of the health system for individuals with disabilities. Debbie will highlight effective solutions that are currently making a positive impact, with a particular focus on transitions of care, medication management, and broader systemic aspects.

Rachel Green, Chief Executive Officer, SANE

Rachel Green will highlight the new Digital Navigation Project (Digital Navigation Project) led by SANE. This project is funded by the Australian Government and aims to enhance the accessibility of mental health services in Australia through digital solutions. This initiative involves 16 partner organisations, including the Butterfly Foundation, Kids Helpline, and the University of Melbourne.

By employing a participatory design process, the project engages individuals with lived experience and sector organisations to ensure diverse perspectives are considered. The project aims to identify digital solutions that help seekers navigate the mental health system more effectively, reducing barriers and delays.

Attachments

Attachment A: Digital Navigation Project – Draft Recommendations

Digital Navigation Project: Draft recommendations

January 2025

sane.org

Key insights

Existing tools are typically built for limited use cases, in particular first time help seeker to GP to specialist or Emergency Department. They don't work for what to do next or alongside clinical care.

Existing directories that underpin available tools are typically not connected to each other, and have limitations on their listings (geographically limited, limited by funder type or service type etc).

Some entire parts of the system are excluded from directories and therefore available tools (e.g. social and emotional wellbeing programs).

Government attempts to address the issue have created elements of a potential solution but these struggle to compete with the reach of known, trusted and specialist brands in mental health.

Sector attempts to address the issue solves part of the problem, but often only for the organisation that developed it.

Critical data for help seekers such as availability, wait times, exclusion criteria, service suitability and services that can be used as an adjunct to clinical care is not captured by current tools (which were not designed to capture this type of information).

Government is rapidly progressing digital health and interoperability, however, there has been limited engagement from the mental health system with these initiatives.

WHAT ARE WE PROPOSING TO ENABLE THIS FUTURE?

A new decentralised search, match and recommendation tool
Co-design and develop an intuitive digital search, matching and recommendation tool, available for help seekers and professionals and accessible through the websites and platforms of all mental health and adjacent sector organisations.

powered by...

A national mental health service directory and information solution
Leverage and extend the National Health Service Directory (NHSD) to develop a comprehensive mental health services directory and information solution encompassing all mental health services, including local community services, with mechanisms for keeping data quality high.

enabled by...

Mental Health Connected Care Governance
A mental health connected care governance structure, connecting the mental health system to the council for connected care and digital health interoperability plan, to deliver.

moving toward...

Connection and Movement of Help Seeker Information
Advance the integration of mental health data sharing in alignment with the National Healthcare Interoperability Plan.

The proposed recommendations will support key capabilities and initiatives being developed by states and territories.

States and territories are aligned in their goals and strategies to enhance digital navigation. Despite differences in governance, service delivery and enabling infrastructure, all will benefit from the recommended initiatives.

SYSTEM SUSTAINABILITY & AVOIDED COSTS

- Less funding required due to system unification
- More coordinated approach to mental health projects and programs
- Medicare savings via reduced reliance on the Better Access pathway / GPs

SERVICE PLANNING & DEMAND MANAGEMENT

- Fit-for-purpose solution that manages demand and appropriate access to services
- Reduced overheads and administrative burden; services can focus on service delivery rather than navigation
- Better data on services and usage to inform service / workforce planning and policy / investment

IMPROVED HELP SEEKER EXPERIENCES & OUTCOMES

- Quicker access to services due to reduced bottlenecks and more interim supports
- Increased awareness and trust with help seekers by meeting them where they are
- Better matching, with a clearer view of services and more granular criteria to filter by
- Better connections between services to build stronger continuity of care
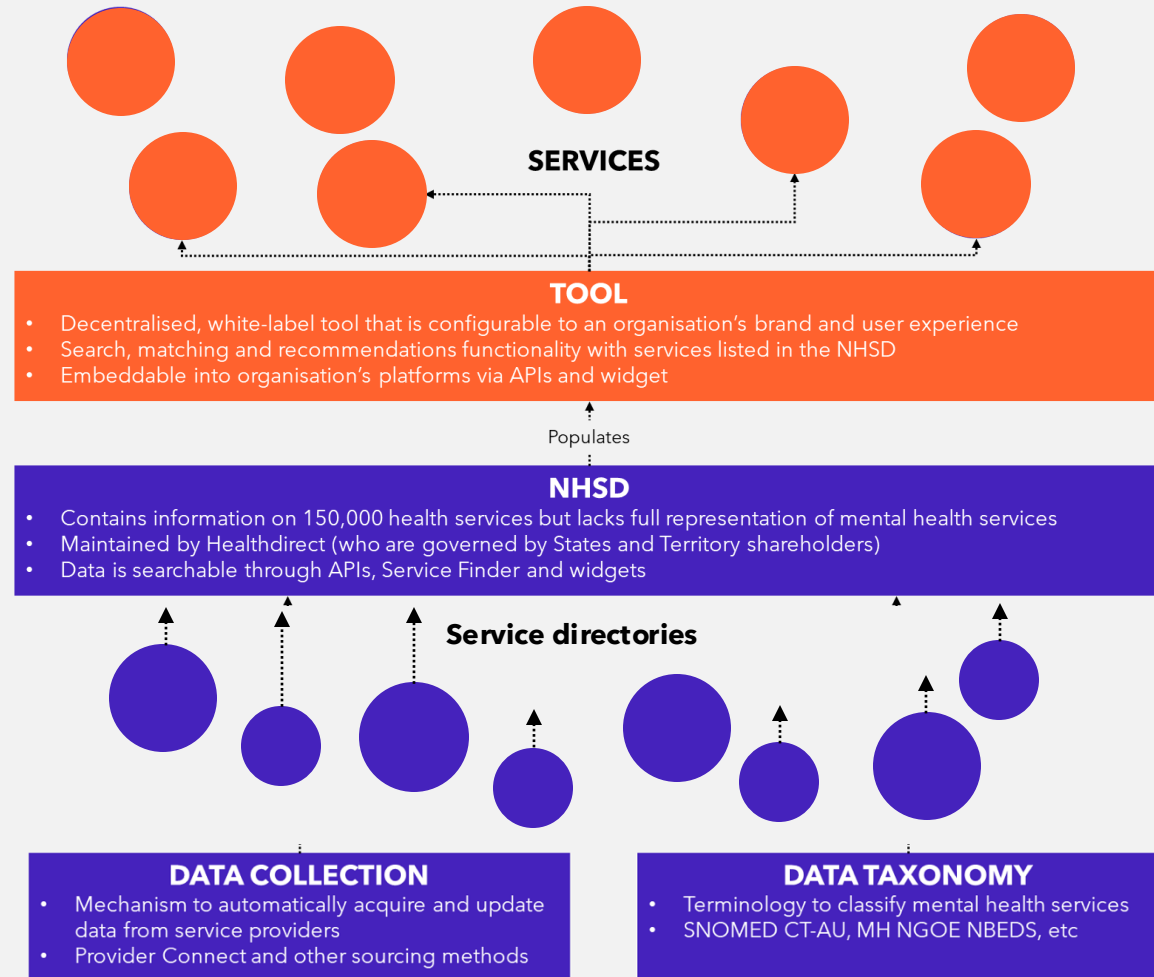
SUPPORT OF ONGOING INITIATIVES

- Enhanced effectiveness of electronic medical records
- Uplift of service directory breadth and quality through mapping and maintenance activities
- Complement to navigation services like single front doors
- Re-distributed demand from acute care and emergency departments
- Integrated data sharing mechanisms for clinicians and care providers

A national federated service directory solution will be required to underpin a tool, including the development of standards and identifiers and broadening the scope of services within the NHSD

KEY GAPS IN THE NHSD

- Lack of mental health-specific **taxonomies** and information sources

- A gap in national mental health services, including **omission of community and digital supports**

- **Limited service attributes**, such as availability, eligibility and costs

SERVICES

TOOL
- Decentralised, white-label tool that is configurable to an organisation's brand and user experience
- Search, matching and recommendations functionality with services listed in the NHSD
- Embeddable into organisation's platforms via APIs and widget

Populates

NHSD
- Contains information on 150,000 health services but lacks full representation of mental health services
- Maintained by Healthdirect (who are governed by States and Territory shareholders)
- Data is searchable through APIs, Service Finder and widgets

Service directories

DATA COLLECTION
- Mechanism to automatically acquire and update data from service providers
- Provider Connect and other sourcing methods

DATA TAXONOMY
- Terminology to classify mental health services
- SNOMED CT-AU, MH NGOE NBEDS, etc

LIBRARIAN FUNCTION

Librarians will be:

- Key to **building understanding of the national design**, and building sector capability to participate

- **Connection points to 'domain leads'** in the sector who aggregate and consolidate the perspectives of different professions, service types, community groups etc.

- Key to helping surface **design considerations for taxonomy** and other ongoing structural elements, as a conduit from 'front line' up to centralised information

The NHSD is a national service directory solution operated by Healthdirect, drawing from multiple information sources

It has well-defined processes to both influence and adopt national data standards, and can accommodate a diverse range of source inputs for 'service data' (including other directories).

FRONT END

Public access
- Healthdirect Service Finder (find a service / practitioner / organisation)
- Helplines

Provider access
- Referrals
- Discharge summaries
- Secure messaging endpoints and identifiers

Presents

NHSD
- Contains information on 150,000 health services
- Maintained by Healthdirect (who are governed by States and Territory shareholders)
- Data is searchable through APIs, Service Finder and widgets.

BACK END

Updates

Structures

Data acquisition
- Draws from multiple service directories including Booking providers and provider Connect

Data taxonomy
- SNOMED CT-AU; managed by CSIRO
- Updated via formal request mechanism

- **Already has mental health in scope, but needs better service source data**
- **Can accommodate many sourcing methods**, e.g.
  - Direct input via Provider Connect
  - Periodic ingestion of exported directory data
  - API connections to other directories
- **Already supports 'white label' integration of service directory tools**
- **Already operates with joint State/Territory & Commonwealth governance**
- **Already supports some bookings, where feasible**

Year 1 +2 (July 2025-2027)

Note: Timing is dependent on government agreement to proceed and an estimated 6 month establishment period for the governance and commissioning of Healthdirect with the guidance of the governance group
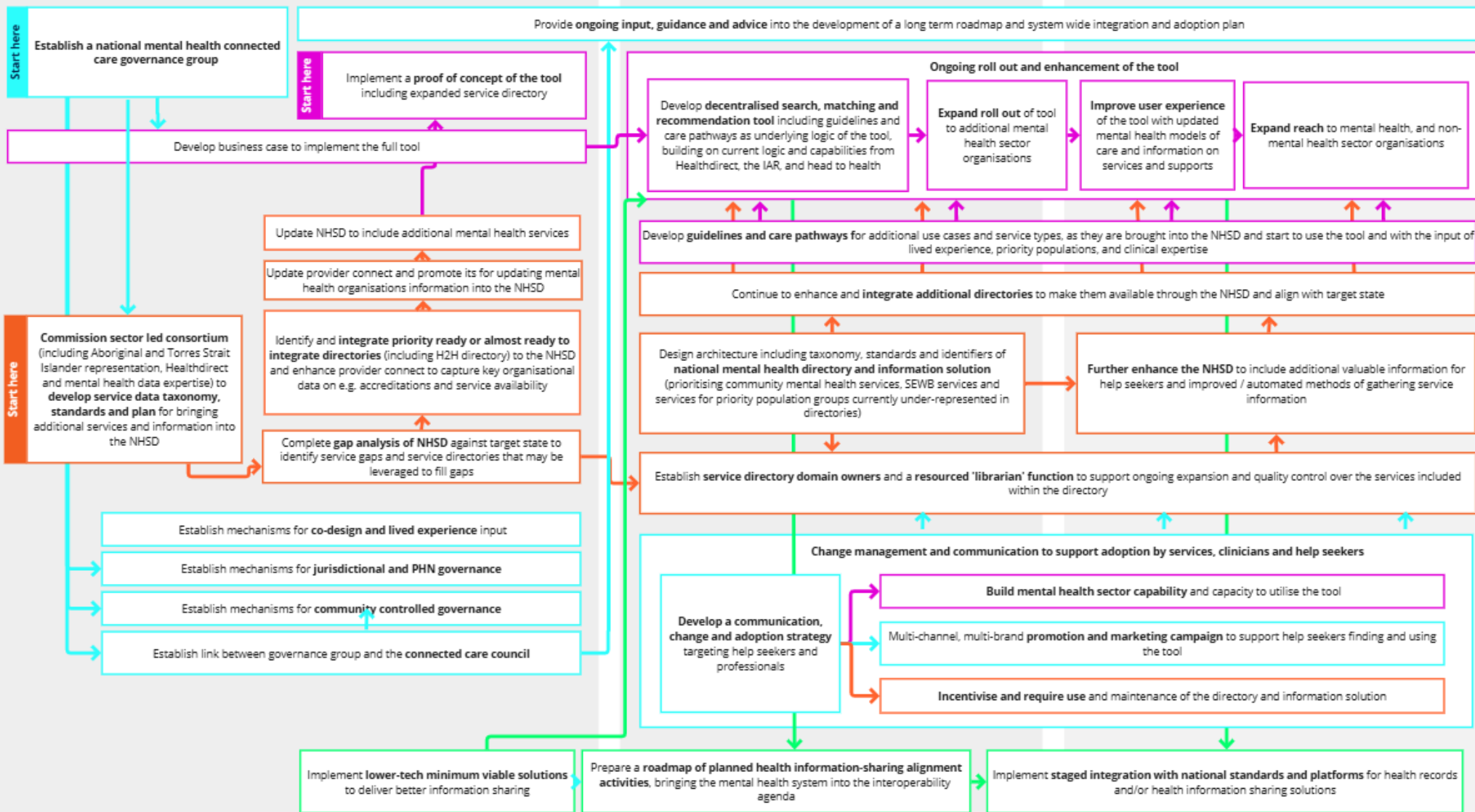
- Set foundations for system-wide collaboration to improve mental health service navigation
- Develop, and implement a proof of concept for the new navigation tool

Year 3+4 (2027-2029)

- Launch pilot of the tool (first 6 months)
- Roll out to 4-6 priority organisations (second 6 months)
- Establish service model to support ongoing improvements and maintenance to NHSD

Year 4+6 (July 2029-2030)

- Expand roll out and continue to enhance the tool and service directory solution
- Transition from initial product development to ongoing product development and maintenance

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Start here — Establish a national mental health connected care governance group

Start here — Implement a **proof of concept of the tool** including expanded service directory

Provide **ongoing input, guidance and advice** into the development of a long term roadmap and system wide integration and adoption plan

Develop business case to implement the full tool

Ongoing roll out and enhancement of the tool

Develop **decentralised search, matching and recommendation tool** including guidelines and care pathways as underlying logic of the tool, building on current logic and capabilities from Healthdirect, the IAR, and head to health

Expand roll out of tool to additional mental health sector organisations

Improve user experience of the tool with updated mental health models of care and information on services and supports

Expand reach to mental health, and non-mental health sector organisations

Update NHSD to include additional mental health services

Update provider connect and promote its for updating mental health organisations information into the NHSD

Start here — Commission sector led consortium (including Aboriginal and Torres Strait Islander representation, Healthdirect and mental health data expertise) to **develop service data taxonomy, standards and plan** for bringing additional services and information into the NHSD

Identify and **integrate priority ready or almost ready to integrate directories** (including H2H directory) to the NHSD and enhance provider connect to capture key organisational data on e.g. accreditations and service availability

Complete **gap analysis of NHSD** against target state to identify service gaps and service directories that may be leveraged to fill gaps

Develop **guidelines and care pathways** for additional use cases and service types, as they are brought into the NHSD and start to use the tool and with the input of lived experience, priority populations, and clinical expertise

Continue to enhance and **integrate additional directories** to make them available through the NHSD and align with target state

Design architecture including taxonomy, standards and identifiers of **national mental health directory and information solution** (prioritising community mental health services, SEWB services and services for priority population groups currently under-represented in directories)

Further enhance the NHSD to include additional valuable information for help seekers and improved / automated methods of gathering service information

Establish **service directory domain owners** and a **resourced 'librarian' function** to support ongoing expansion and quality control over the services included within the directory

Establish mechanisms for **co-design and lived experience** input

Establish mechanisms for **jurisdictional and PHN governance**

Establish mechanisms for **community controlled governance**

Establish link between governance group and the **connected care council**

Change management and communication to support adoption by services, clinicians and help seekers

Develop a **communication, change and adoption strategy** targeting help seekers and professionals

Build mental health sector capability and capacity to utilise the tool

Multi-channel, multi-brand **promotion and marketing campaign** to support help seekers finding and using the tool

Incentivise and require use and maintenance of the directory and information solution

Implement **lower-tech minimum viable solutions** to deliver better information sharing

Prepare a **roadmap of planned health information-sharing alignment activities**, bringing the mental health system into the interoperability agenda

Implement **staged integration with national standards and platforms** for health records and/or health information sharing solutions

01

Current state and territory initiatives

Target experience

Information *reaches people where they already are...*

Showing services and supports that *match well to people's needs*

It is *easy for people to access and share* what they receive

THE NEEDS OF HELP SEEKERS AND CARERS

1. Find me **where I am**
2. **Make it easy** to get more help
3. **Help me choose** based on what's important to me
4. Value, build and maintain my **trust**
5. Help **others help me**
6. Make it easy to **move between services**
7. Provide **support and resources** while I'm waiting
8. Don't make me **share more than I need to**

... through a **multi-channel, brand, and platform strategy** to engage people where they are...

SUPPORT FORUM
GOOGLE SEARCH RESULT
WORKPLACE INTRANET
SOCIAL VIDEO OR PAGE
AI CHAT
ADJACENT SYSTEMS
ADWORDS
NGO WEBSITE
GOVERNMENT WEBSITE

Are you looking to find or access mental health care that's right for you?

...Through a white label tool, embedded in providers websites, able to **be customised to the brand, context, and use**...

Looking for mental health support? **Start here.**

EVERYTHING YOU PROVIDE IS ENCRYPTED AND ONLY YOU GET TO DECIDE WHO SEES IT

What do you think you might need help with?

SHARE BY VOICE
LET ME FILTER
I DON'T KNOW (QUICK QUIZ)

I NEED HELP RIGHT NOW

Get more help

....Providing you with **all of the things** that might help, and **support to take the next step**...

Based on what you've shared, here's some personalised information that might help

ABOUT YOU

SUPPORTS

Refine these options

....with helpful tools to **connect your onward journey**...

OPTIONS FOR SHARING INFORMATION

EXPORT A PDF
Save and take with you

SHARE A COPY
To yourself or someone you trust

SEND DIRECT TO SERVICE
Send to a service you've chosen, so they can get in touch

BOOK DIRECTLY
For service that support it

THE NEEDS OF PROFESSIONALS

1. **Integrate** with my systems and processes
2. Support my expertise with **accessible information**
3. Develop **a common language** across the sector
4. Help build and maintain my **trust** in services I refer to

Care navigators

REFERRAL TOOLS AND SYSTEMS
CLINICAL SOFTWARE
KNOWLEDGE MANAGEMENT TOOLS
PATIENT MANAGEMENT SYSTEMS
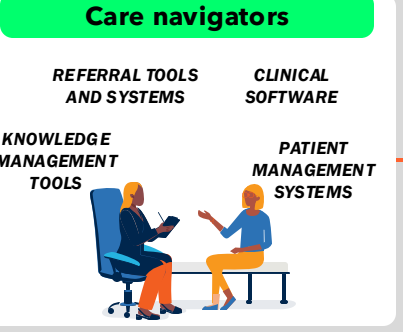
Adaptable to the needs of clinicians in their context, systems and processes, creating a connected experience between care navigators and help seekers

HELPS YOU TO KNOW WHAT IS OUT THERE, HOW IT WORKS, WHO IT IS FOR, AND HOW TO TAKE THE NEXT STEP

Summary of needs

Care providers

Supported by
- A national, federated service directory solution including high-quality, nationally-consistent information on mental health, the mental health system, and its services
- Digital health enablers including interoperability standards and the healthcare information exchange
- Mental health sector governance and collaboration toward resolving access and collaboration barriers

		Year 1	Year 2	Year 3
1	**A tool to provide navigation support where help seekers are.**	• Initial co-design and delivery of a proof of concept of the tool, integrated with the NHSD, and enabled for 1-3 usage settings	• Development of a scalable version of the tool for wider adoption and decommission Head to Health website • Change management to support wider adoption	• Expansion of the scope and features of the tool • Ongoing change management to support wider adoption
2	**A high-quality national directory and information solution.**	• Establish consortium to develop mental health community services standards and identifiers • Integrate key ready, or close to ready service directories into the NHSD	• Replace Head to Health website service directory with NHSD • Incentivise and require services to provide up to date service information • Integrate additional directories	• Transition from project-based development of service directory solution to BAU processes • Integrate additional directories
3	**National mental health connected care governance.**	• Establish sector and jurisdictional governance mechanisms • Establish connections with connected care governance • Agree and prioritise implementation roadmap	• Govern the implementation of change management, communication, and roll out of the tool and service directory solutions	• Continue to govern the implementation of the tool and service directory solution • Complete a review to establish long term governance mechanism
4	**Connection and easy movement of help seeker information between services.**	• Complete interoperability maturity assessment of key organisations • Establish roadmap for improving referral pathways	• Leverage and expand existing referral tools and mechanisms to support referral • Begin to expand the scope of FHIR standards to include mental health services	• Develop and integrate referral pathways between mental health services as a part of the interoperability roadmap

The digital navigation project aims to develop sector owned, operated and governed digital solutions that make it easier for all help seekers to find and access the care that is right for them.

The project has been commissioned by the Australian Government Department of Health and Aged Care and is being led by SANE in collaboration in partnership with Nous Group and a consortium of 14 sector organisations.

This project will deliver digital solution options to the Australian Government by November 2024 that:

- are sector owned, governed and managed

- include integrated service directories and warm referral mechanisms

- cater to the needs of all help seekers

- are culturally safe and

- reduce system fragmentation across the several systems that deliver mental health services

Project overview

SANE We're people like you.

Our recommendations and insights are building on an extensive body of knowledge drawing from a range of different perspectives

2 Sector town halls with ~200 leaders and stakeholders from across the sector

Consultations with representatives from each **state and territory**

29 Consultations with a range of sector organisations

16 Consultations with key digital platforms to understand initiatives underway

Extensive review (200+ documents) of existing **literature, strategies, and data**

Help seeker and front-line worker surveys (1400 responses so far)

15 Consultations with **Aboriginal and Torres Strait islander organisations**

Ongoing engagement with the project **consortium organisations**

Focus groups with help seekers and carers

Help seekers are faced with navigating multiple systems delivering mental health care, with poor connections and pathways between them

PRIVATE/COMMUNITY SECTOR FUNDED

STATE/TERRITORY FUNDED

VARIOUS FUNDING SOURCES

COMMONWEALTH FUNDED
including Medicare Benefits Schedule, Pharmaceutical Benefits Scheme

PHN COMMISSIONED

MENTAL HEALTH SUPPORTS THAT EXIST BUT ARE HARDER TO FIND AND ACCESS

Psychosocial supports

Community services

Online mental health forums

Government funded community mental health care services

Mental health service navigators

Headspace centres/ mental health clinics

Social support workers

Psychiatrists

Psychologists

NGO websites

Residential mental health services

Government websites (e.g. Healthdirect)

INITIAL SUPPORTS MOST VISIBLE TO HELP SEEKERS

General practitioners

Google search

Social media

EAP

Emergency departments

Family and friends

ACCHOs/ AMS

Private clinics

Crisis assessment and treatment teams (CATT)

Workplace HR, teachers, managers

Helplines

DEVELOP AWARENESS   NAVIGATE SUPPORT OPTIONS   MAINTAIN CARE   ACCESS SUPPORT

Navigation quizzes and tools

Digital directories

Private booking platforms (e.g. HotDoc)

Head to Health

Healthdirect

State and territory digital front doors

DIGITAL INTERFACES

The journey to find and access care is not always easy and for many has frustrating loops and dead ends

THE HELP SEEKER'S JOURNEY

DEVELOP AWARENESS | NAVIGATE SUPPORT OPTIONS | ACCESS SUPPORT | MAINTAIN CARE

Three key pain points across the journey have been prioritised and refined through sector consultation, engagement and research:

1 It's confusing to know what is out there that might help, how it will help and its quality.

2 There are multiple mental health 'systems' lacking well-established pathways and co-ordination.

3 Choice and control over where you can get help, what matters most to you, privacy and anonymity are often missing in the journey.

NSW – policies, commitments, progress

POLICIES AND STRATEGIES

- Strategic Framework for Suicide Prevention in NSW 2022-2027
- NSW Strategic Framework and Workforce Plan for Mental Health 2018–2022
- eHealth Strategy for NSW Health 2016–2026
- NSW Aboriginal Mental Health and Wellbeing Strategy 2020-2025

FUNDING AND COMMITMENTS

FY2024-25: **$2.9b** towards mental health services

Key commitments:
- New Mental Health Single Front Door, delivered through healthdirect (FY24-25 budget)
- Expansion of youth mental health services provided by headspace (FY24-25 budget)
- Development of Single Digital Patient Record (SDPR) across NSW (FY21-22 budget)

10-year program of eHealth Strategy implemented across three horizons:
1. **Consistent foundations** (mature core digital systems, services development, infrastructure and network standards)
2. **Integration** (increasingly consistent eHealth foundations to deliver seamless continuum of care, involving coordination with NSW Government sector, other jurisdictions and the Commonwealth)
3. **Personalisation** (shift the healthcare focus toward preventative health and tailored patient engagement)

PROGRESS

- ✓ New Mental Health Single Front Door: planned
- ✓ Software vendor Epic Systems selected to develop the SDPR in 2023
- ✓ Recruitment program in early 2024 to support implementation of SDPR
- ✓ Hunter New England LHD to pilot SDPR from 2025

Key digital elements
Relevant to this project

1 **Electronic Medical Record**

Replaces patient paper charts and forms used across hospitals, outpatient clinics and community health facilities. To be integrated into the forthcoming SDPR.

2 **HealtheNet Clinical Portal**

A central clinical portal which provides clinicians with an aggregated view of patient and clinical information from NSW Health clinical systems and My Health Record.

3 **WayAhead Directory**

Directory for mental health services in NSW funded by NSW Health and NSW Mental Health Commission.
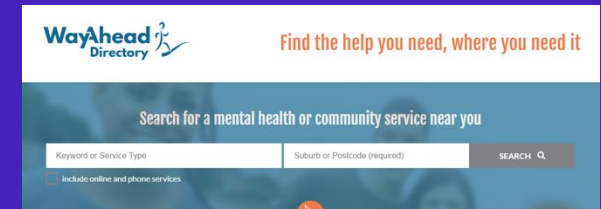
NSW Government helplines:

NSW Mental Health Line
NSW Health's 24/7 statewide phone service linking people with mental health services

Parentline NSW
Free telephone counselling and support service for parents and carers

VIC – policies, commitments, progress

POLICIES AND STRATEGIES

- Victoria's 10-year Mental Health Plan 2016-2026
- Victoria's Digital Health Roadmap and Maturity Model
- Royal Commission into Victoria's Mental Health System
- Mental Health and Wellbeing Act 2022

FUNDING AND COMMITMENTS

FY2024-25: **$109m**, more than **$6b** invested in mental health reform since 2018

Key commitments:
- Royal Commission recommendation 39: By the end of 2022, trial two new service delivery initiatives in rural and regional areas
- Royal Commission Recommendation 60: Build a contemporary mental health system through digital technology

PROGRESS (based on roadmap)

- ✓ A new statewide mental health and wellbeing record: planned
- ✓ User-friendly online consumer portal for Victorians living with mental illness: planned
- ✓ Integrated care navigation: planned
- ✓ Patient portals: in progress
- ✓ CareSync Exchange (secure health information sharing system complementing My Health Record, allows clinicians to access critical patient health information): scheduled for roll out in late 2024

Key digital elements
Relevant to this project

1 | **Better Health Channel (BHC)**

Provides health consumers with health and medical information, quality assured by the Department of Health, Victoria.

2 | **Mental Health Services Directory**

Victorian Agency for Health Information's directory, filtered by age and location.

Victorian Government helplines:

SuicideLine Victoria
24/7 statwide telehealth service with free pro-fessional phone and online counselling

Parentline VIC
Free telephone counselling and support service for parents and carers

Nurse-on-call VIC
24/7 health advice from a registered nurse

QLD – policies, commitments, progress

POLICIES AND STRATEGIES

- Better Care Together: A plan for Queensland's state-funded mental health, alcohol and other drug services to 2027
- Mental Health Alcohol and Other Drugs Healthcare Digital Information Strategy 2022-2027
- Digital Health 2031: A digital vision for Queensland's health system

FUNDING AND COMMITMENTS

FY2024-25: **$457m** into mental health and AOD, including **$13.1m** to deliver digital solutions to mental health, AOD care and support

Key commitments:
- Deliver a public facing website and continue design of a consumer portal in collaboration with people with a lived experience of receiving care from mental health, alcohol and other drug services (Better Care Together 2023 annual progress update, p 15)
- Enhance internal systems to improve clinical workflows and streamline service delivery, facilitating improved information sharing across systems and organisations

10-year program of digital health strategy implemented across three horizons:
1. **Enhancing the foundations** (implement core secure digital platforms)
2. **Delivering sustainably** (scale digital capabilities to improve consumer experiences and engagement, optimising clinical and non-clinical service delivery)
3. **Embedding digital** (embed digital models of care and ways of working)

PROGRESS

- ✓ Completed in FY22-23: scoping of a modern website and portal that enables a self-service experience for people to access mental health information and support resources
- ✓ Completed in FY22-23: establishment of dedicated roles to optimise use of digital healthcare innovations to enhance the experience of people accessing mental health services
- ✓ ieMR roll out: in progress

Key digital elements
Relevant to this project

1 ieMR

Integrated electronic medical records system (ieMR) is a secure health information sharing system complementing My Health Record, allowing clinicians to access critical patient health information.

2 The Viewer

A portal for internal clinicians and external care partners that summarises relevant consumer information from multiple health systems.

3 yourQH

A patient portal for referrals and appointments.

QLD Government helplines and websites:

1300 MH CALL
24/7 statewide mental health triage service – first point of contact to public mental health services in Queensland

13 HEALTH
24/7 assessment, referral, advice, health centre contact details

Birdie's Tree (Children's Health QLD): resources to help families experiencing natural disasters

Dear Mind: mental wellbeing activities and a personalised mental wellbeing plans

SA – policies, commitments, progress

POLICIES AND STRATEGIES

- Health and Wellbeing Strategy 2020-2025

- Mental Health Services Plan 2020-2025

- South Australian Suicide Prevention Plan 2023-2026

- Digital Health Governance and Investment Framework Policy Directive

FUNDING AND COMMITMENTS

$219m committed to mental health since 2021

$588.5m allocated for a new digital platform for people with less intense mental health support needs (FY24-25)

Key commitments:
- ➢ Revamped telephone crisis and support line (Mental Health Services Plan)
- ➢ Introduction of digital technologies to improve the health system interaction with the community (Health and Wellbeing Strategy, p 15)
- ➢ Development of a Digital and Information Strategy to maximise SA Health's capacity to use and share clinical information (Health and Wellbeing Strategy, p 30)
- ➢ Enable the community to interact with their own health care online by deploying easy-to-use digital and associated technologies (Health and Wellbeing Strategy, p 30)

PROGRESS

- ✓ Established 24/7 Mental Health Triage Line

- ✓ About 70% of SAVCS patients avoid admission to the ED and patient and clinician feedback has been positive since the service began in 2021

Key digital elements
Relevant to this project

1 Mental Health Service Directory

The statewide directory provided by Eduka and the Mental Health Coalition of South Australia.
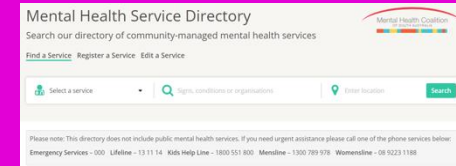
2 Country SA Services Directory

The Digital Telehealth Network consists of more than 400 video-conferencing units located in more than 90 health service sites across South Australia.

3 SA Virtual Car Service (SAVCS)

The statewide service provides an individualised assessment service via video link for urgent patients on-scene

SA Government helplines:

Mental Health Triage Line
SA Health's 24/7 statewide phone service providing advice and information linking people with mental health services

Parentline SA
Free telephone counselling and support service for parents and carers

WA – policies, commitments, progress

POLICIES AND STRATEGIES

- Western Australian Health Digital Strategy 2020-2030
- Western Australian Suicide Prevention Framework 2021-2025

FUNDING AND COMMITMENTS

FY2024-25: **$1.45b** committed to mental health, alcohol and other drug services

Key commitments:
- ➢ $19.5m to continue the expanded Child and Adolescent Mental Health Service (CAMHS) Crisis Connect service (FY24-25)
- ➢ Implementation of a statewide Digital Medical Record
- ➢ Real-time Demand Data Platform to improve capacity and patient flow across WA Health

10-year program of digital health strategy implemented across four horizons:
1. **Setting up for success** (introduction of Digital Medical Record, MHR interoperability continues)
2. **Early priorities, results and building momentum** (patient portal expansion, telehealth and virtual care expansion)
3. **Driving deeper change and seeing results** (introduction of a Shared Care Platform and Specialist Systems)
4. **Embedding change and realising the full benefits** (mHealth fully operational, Digital Medical Record implementation complete)

PROGRESS

- ✓ Digital Medical Record deployed to more than 20 sites and hospitals across Western Australia in 2023
- ✓ Real-time Demand Data Platform foundations established
- ✓ Psychiatric Services Online Information System (PSOLIS) is the primary source of clinical information for public mental health services. Improvements were made to the web-based application webPSOLIC, which is now integrated with Digital Medical Records

Key digital elements
Relevant to this project

1 CAMHS Crisis Connect

Phone and online videocall support for children and young people who are experiencing a mental health crisis, as well as support and advice to families, carers and professionals in the community.

2 Centre for Clinical Interventions

WA Health's specialised clinical psychology service providing training for health professionals and free online resources for mental health.

3 *My Services* online directory
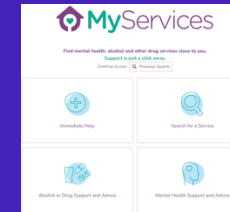
Developed by the Mental Health Commission to make it easier for Western Australian consumers, carers and families to navigate the mental health system.

WA Government helplines and websites:

Mental Health Emergency Response Line
24/7 telephone service for anyone involved in a mental health emergency in WA

Crisis Care

CarersWA

Here For You

Think Mental Health: provides mental health information and support

TAS – policies, commitments, progress

POLICIES AND STRATEGIES

- Digital Health Transformation - Improving Patient Outcomes 2022-2032
- Rethink 2020 - Tasmania's Strategic Plan for Mental Health

FUNDING AND COMMITMENTS

FY23-24: **$120 m** committed to mental health (FY24-25 budget to be released in September 2024)

Key commitments:
- ➢ $150m over four years to modernise the state's public health IT infrastructure, including through a single electronic medical record (FY22-23)
- ➢ An integrated Tasmanian mental health system (Rethink 2020 Reform Direction 4)
- ➢ Build community awareness of digital interventions (such as online mental health resources and telepsychiatry) in Tasmania (Rethink 2020 Implementation Plan)

10-year program of digital health strategy implemented across three horizons:
1. **Right infrastructure, processes and executive and clinical leadership to support digital engagement** (visibility to clinical information, systems investment, data remediation and quality improvement)
2. **Right systems, to create strong systems of record** (modern electronic medical record capability, improved patient flow, consumer portals, well-integrated clinical systems)
3. **Targeted continuous improvement** (achieve a true integrated care management platform across the state, multi-channel delivery model)

PROGRESS

- ✓ Scoped and established information systems to support the capabilities of the Central Intake and Referral Service (CIRS)
- ✓ Developed models for each planned stage of CIRS that consider service pathways, information flow, reporting requirements and supporting processes
- ✓ Established a single statewide public mental health system
- ✓ Developing stepped models of mental health support in the community

Key digital elements
Relevant to this project

1 | **Tasmanian Health Directory**

Provided by primary health Tasmania and PHN Tasmania (Australian Government funded) and includes a list of mental health professionals.

2 | **Break O'Day Support Services Directory**

Mental health directory funded through the Tasmanian Department of Premier and Cabinet.

Tasmanian Government helplines:

Access Mental Health
24/7 telehealth service with free professional phone and online counselling, information and referrals

ParentLine

Mental Health Families and Friends Tasmania
Phone support for families and friends supporting someone with ill mental health

NT – policies, commitments, progress

POLICIES AND STRATEGIES

- Mental Health Strategic Plan 2019-2025
- Strengthening our Health System Strategy 2020 to 2025
- NT Health Strategic Plan 2023-2028
- Digital Territory Plan

FUNDING AND COMMITMENTS

FY2024-25: **$108m** for mental health

Key commitments:
- ➢ Implement a secure healthcare provider electronic messaging service across the Territory (Digital Territory Action Plan 2023-24, p 9)
- ➢ Implement Acacia digital health system (Digital Territory Action Plan 2023-24, p 10)
- ➢ Connecting the NT health system to ensure effective digital connections between systems, people and processes (Strengthening our Health System Strategy p 5) by:
  1. Conducting a current state digital maturity and capability assessment
  2. Leveraging existing investment to build a Territory-wide digital health environment
  3. Making purposeful connections between systems, processes and people to establish integrated models of care to enable information sharing in a timely manner

PROGRESS

- ✓ National Critical Care and Trauma Response Centre shifted to an entirely digital inventory system in FY22-23
- ✓ Delivered the Virtual Care Program to increase accessibility of healthcare across the Territory in FY22-23
- ✓ Acacia digital health system deployed to over 5,000 clinical users and rollout will continue throughout 2023 and 2024
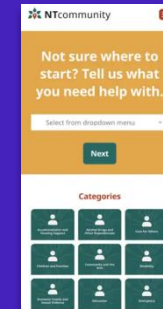
Key digital elements
Relevant to this project

1   Acacia Digital Health System

Provides essential clinical information to clinicians at the point of care.

2   NTcommunity

Website and app delivered by NTCOSS and funded by the NT Government providing a service directory for people seeking help in their local community.

3   Mental Health NT

Website service directory that matches to Territorians' needs.

4   Shelterme

The NT's directory for essential services for those at risk or experiencing homelessness.

NT Government helplines:

Northern Territory Mental Health Line
24/7 statewide phone service providing advice and information linking people with mental health services

TeamHealth
Largest phone service provider for mental health in the NT

Parentline NT
Free telephone counselling and support service for parents/carers

ACT – policies, commitments, progress

POLICIES AND STRATEGIES

- Digital Health Strategy 2019-2029
- Australian Capital Territory Mental Health And Suicide Prevention Plan 2019-2024

FUNDING AND COMMITMENTS

FY2024-25: **$920m** over four years for health for public health care, mental health and community wellbeing and health infrastructure

Key commitments:
➢ Expansion of Mental Health Services (FY24-25)
➢ Continue iterative implementation of 24/7 online youth navigation portal that connects young people, their families and carer to mental health support and information
➢ Use of technology and e-health solutions for improving coordination, information sharing, and communication (Mental Health and Suicide Prevention Plan, p 13)

PROGRESS

To be further updated based on state/territory consultations.

✓ MOST (digital mental health care platform) extended to young people in the ACT in 2021
✓ MindMap portal implementation complete
✓ 825 clients received free psychological support through Next Step in FY22-23

Key digital elements
Relevant to this project

1 **My Digital Health Record (DHR)**

Stores details of any treatment received in the ACT public health system. Summary information is also updated in MHR.

2 **ACT Health mobile app**

Offers real-time information on wait times, treatment times, locations and directions for nearest Walk-In Centres or ED, information on before, during and after a hospital stay
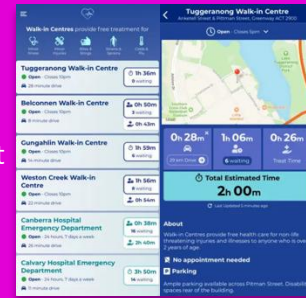
3 **MindMap**

A mental health portal for children and young people providing a phoneline, services and resources.

4 **Next Step**

Fully integrated, stepped care model of mental health support for young people (online or in-person).

ACT Government helplines:

Access Mental Health
24/7 telehealth service with free professional phone and online counselling, information and referrals

Parentline ACT
Free telephone counselling and support service for parents/ carers

02

Further detail

A new tool to provide better navigation support where help seekers are looking

Develop an enhanced matching, recommendation and directory search tool design to easily integrate with any provider platforms nationally (customisable to brand, configurable, quality experience with minimum overhead).

Outcomes:

Help seekers, care navigators and care providers are able to access navigation tools and resources in ways that are accessible, intuitive and useful.

Service providers have access to resources guidance to effectively integrate navigation tools and resources into their processes and guidelines.

1.1 Healthdirect Navigation support tool development, including:
• 1.1.1 Define guidelines and care pathways as underlying logic of the tool
• 1.1.2 Implement a proof of concept of the tool
• 1.1.3 Deliver further enhancements of the tool for full roll out
• 1.1.4 Integrate data from new / enhanced community directories or otherwise
• 1.1.5 Co-design shareable outputs from matching and recommendation tool
• 1.1.6 Evolve the logic of user journeys in the tool to utilise national infrastructure e.g. the NEIS and H2H phone line (may be further down the roadmap)

1.2 Develop digitally enabled 'low tech' solutions to support warmer referral and information sharing between care navigators, care providers and help seekers

1.3.1 Develop and implement a sector facing change / implementation and workforce capability strategy to build awareness and trust in the new navigation tools

1.3.2 Develop and deliver a help seeker facing communication / marketing strategy and content, leveraging trusted brands, to provide people with knowledge and tools when they are searching and enable tool 'hosts' and other relevant organisations/bodies to promote use of the tool and communicate its purpose and function in a consistent but audience-segmented manner.

1.4 Develop, update and integrate information, guidance and evidence-based care guidelines to support effective, evidence-based pathways through the mental health system aligned to agreed models of care and available through digital tools and resources

Recommendation 2

A high-quality national directory and information solution

Enabled by better, more consistent, standardised information on services, including community mental health services, linking in with the multiple directories that exist across the mental health system, accessible in one place

Outcomes:

There is nationally consistent, high-quality, help seeker relevant information about mental health services available through a trusted, sector agreed and maintained mental health services taxonomy and directory solution

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2.1 Commission a small consortia of organisations (including Aboriginal and Torres Strait Islander representation) and data/taxonomy representatives

2.2.1 Complete a gap analysis against current community, NGO-built and state or national service directories against standards, evidence based guidelines, minimum data sets and identifiers with a view toward interoperability across service directories and care pathways

2.2.2 Healthdirect NHSD uplift, including:
Define and develop standards and identifiers for community mental health services (including taxonomy, data model, quality control strategy) to develop a more comprehensive NHSD aligned to priority use cases.

2.2.3 Plan an enhancement roadmap to community service and Aboriginal directories, including regional and sector engagement to grow and validate data and maintenance activities

2.3.1 Decommission Head to Health website

2.3.2 Decommission Head to Health service directory and migrate data into the National Health Service Directory

2.4 Encourage sector participation and representation in Sparked (FHIR) Accelerator initiative

2.5.1 Provide incentives and requirements for key mental health organisations and private providers to provide up to date and accurate information on services that are accrediated and meet established standards

2.5.2 Design and implement enhancements for Provider Connect to increase data on service type, intended cohort, availability and wait times; promote purpose and use of the tool

2.6 Deliver enhancement roadmap to:
   2.6.1 Include social prescribing in stepped care model
   2.6.2 Support the development, maintenance, and audit of services
   2.6.3 Designate 'domain owners' (in partnership with sector, PHN and community-controlled organisations) to maintain data and quality of information on services.

2.7 Establish ongoing governance mechanism to continue the integration and CQI of mental health services into the national service directory solution(s).

National mental health connected care governance.

A 'functionally-sized mental health connected care governance group overseeing progress across the range of recommendations and activities and engaging the wider sector.

Reporting to the Connected Care Council and with a representative on the council, chaired by an appropriately independent Chair with strong understanding of digital and interoperability and related structures to engage jurisdictions,

Outcome:
There is sustained mental health system-wide collaboration and governance over projects that better connect people with appropriate and safe mental health service supporting collaboration on mental health system navigation initiatives

3.1 Establish a governance group (with requisite size, skills mix, representation, terms, ways of working, accountabilities and workplan) for an initial 3 year term and option to extend.

3.2 Implement proposed governance group to prioritise and oversee the implementation of digital and data initiatives outlined in the workplan (activities and strategies).

3.3 Integrate and align governance body as a subcommittee under the Council for Connected Care and with broader National Healthcare and Interoperability plan activities

3.4 Create a transition and handover plan for mental health to be represented in interoperability roadmap beyond the life of the newly established governance group

3.5 Establish mechanism for jurisdictions to contribute on an ongoing basis into sector-wide initiatives i.e. phone lines and governance (e.g. through existing mechanisms through the Bi-lateral agreements, as well as new mechanisms)

Connection and easy movement of help seeker information between services.

Prioritise the progress of mental health in all Connected Care use cases (which address the help seeker needs and department information sharing principles) via the National Healthcare Interoperability Plan to enable better integration and warm referral.
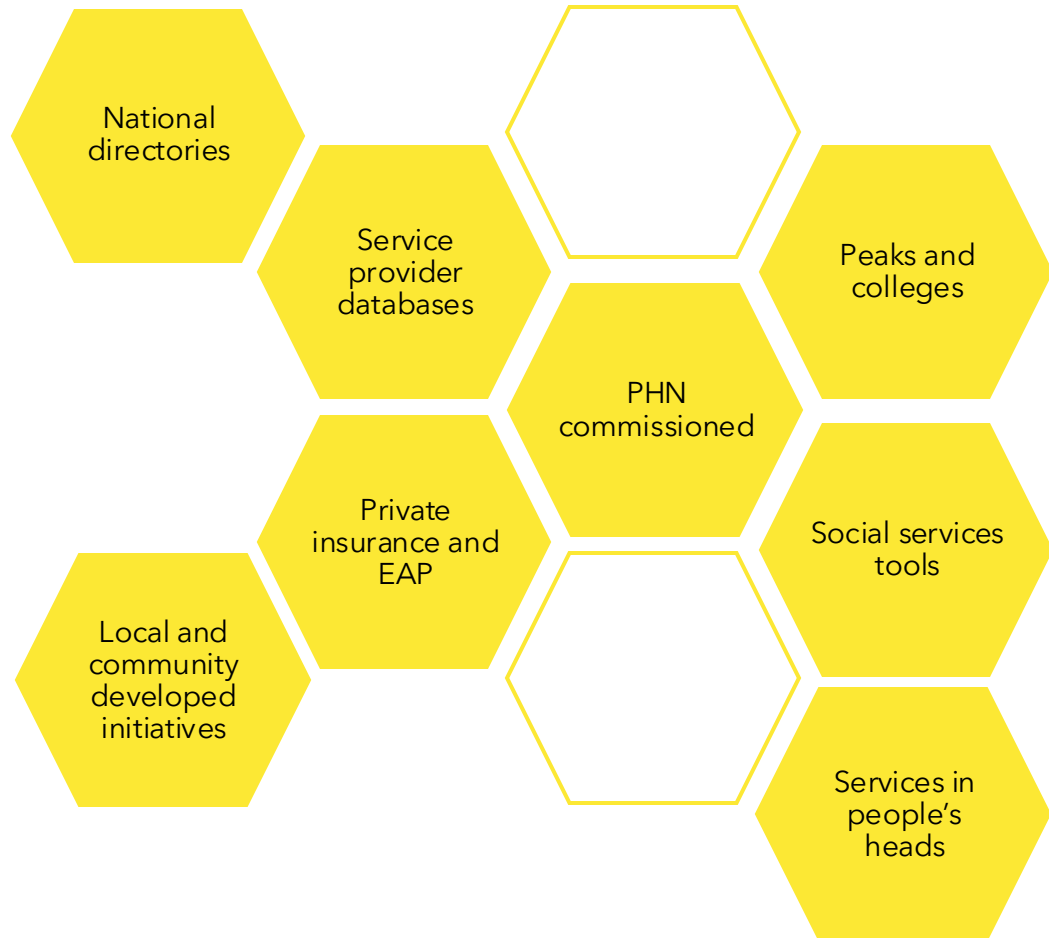
4.1 Identify requirements - via a gap analysis - for future capability uplift within community and specialist mental health services, including readiness to incorporate secure messaging, referral and booking services, FHIR standards, etc.

4.2 Healthdirect connection and integration between services, including: Improve mechanisms for referral, leveraging the work being done through the HIE to enable transfer of information to support warmer referral.

4.3 Expand the scope of the Sparked AU FHIR standards to include the mental health system standards to ensure uses cases (such as referral and patient discharge) are enabled through the national digital health infrastructure outlined in the HIE and National Healthcare Interoperability Plan

There are lots of service directory solutions that exist, each solving a part of the problem and lacking interoperability

- Existing directories that underpin available tools are typically not connected to each other, and have limitations on their listings (geographically limited, limited by funder type or service type etc).

- Some entire parts of the system are excluded from directories and therefore available tools (e.g. social and emotional wellbeing programs).

- Government attempts to address the issue have created elements of a potential solution but these struggle to compete with the reach of known, trusted and specialist brands in mental health.

National directories

Service provider databases

Peaks and colleges

PHN commissioned

Private insurance and EAP

Social services tools

Local and community developed initiatives

Services in people's heads

National collaboration initiatives aim to unify healthcare platforms and create a more continuous experience for consumers

Large scale digital investments, at the state and federal level, have occurred at pace but previously without a consistent vision for interoperability and secure data exchange. Recent legislative and policy responses – the **National Healthcare Interoperability Plan** and the **Health Information Exchange** (both led by the Australian Digital Health Agency) – promote national frameworks and standards for effective health information sharing:

National Digital Health Strategy 2023 – 2028

National Healthcare Interoperability Plan

- Released July 2023 and reports quarterly progress
- Roadmap to a more interoperable health system, identifying priority actions
- Progress includes:
  - ✓ Establishing governance i.e. Council for Connected Care
  - ✓ Sharing resources in central locations
  - ✓ Publishing roadmaps and resources
  - ✓ Drafting Health Information Exchange
  - ✓ Measuring digital maturity

Health Information Exchange

- Released 8 October 2024
- Model architecture and proposed roadmap to enable consistent sharing of healthcare data nationally
- Supports overarching objectives of National Healthcare Interoperability Plan

Existing enablers

- Council for Connected Care
- Sparked FHIR Accelerator
- AUCDI
- My Health Record
- Provider Connect
- NHSD

Technical and policy barriers are preventing the widespread adoption of interoperability standards in the mental health sector

The mental health system does not have a consistent, dedicated voice in governance. The sector falls under healthcare interoperability plans and collaboration mechanisms but does not have direct representation.

National taxonomy, standards and service directory solutions do not comprehensively capture mental health services. There are efforts to standardise terminology, but they are typically further down the roadmap of national initiatives.
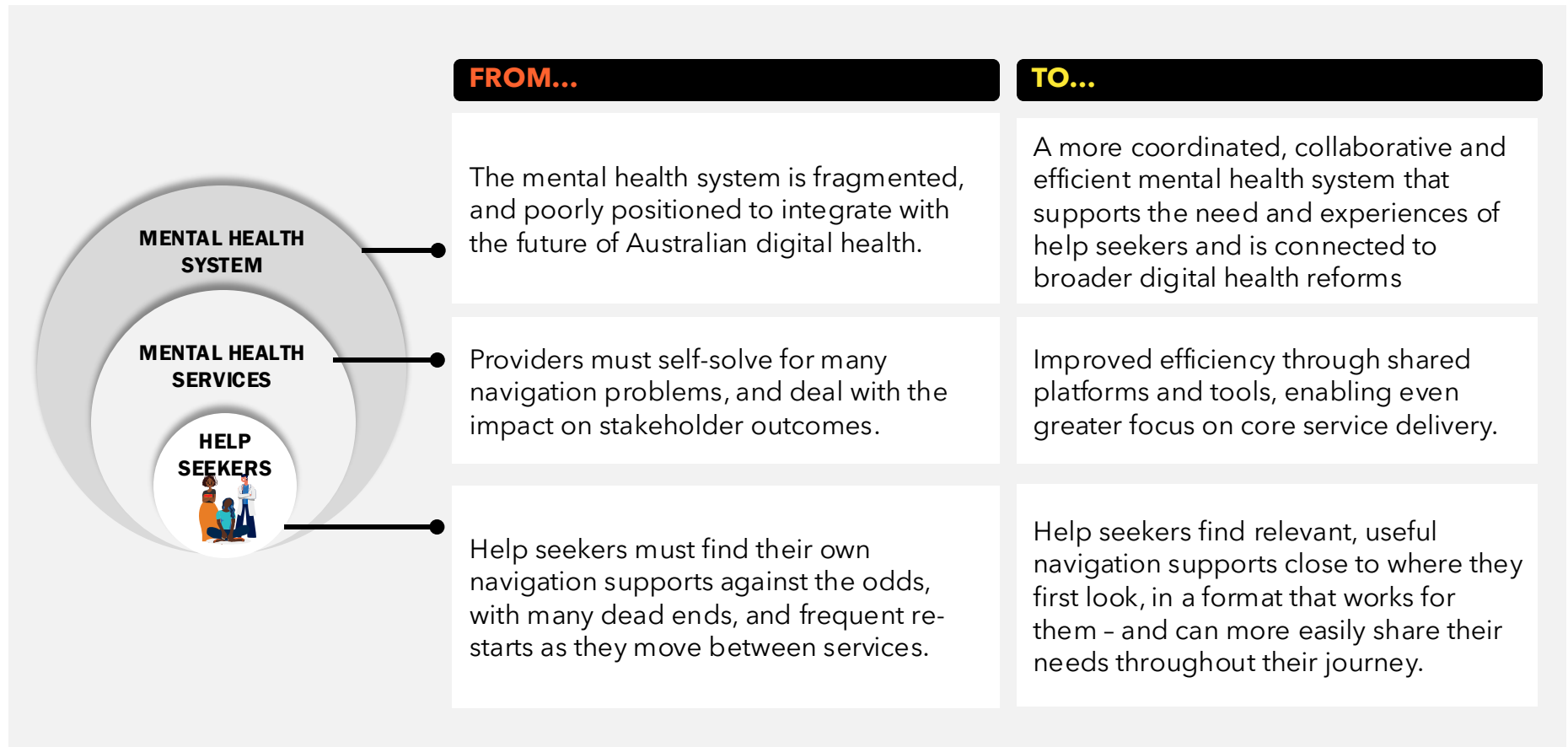
There are many mental health NGO/community-produced service directories, but they are not aligned nor easily shared. There are few truly dynamic national directories that link to established taxonomies.

Improving the interoperability of the mental health sector and the navigation experience of help seekers will require a combination of governance and technology solutions, bringing the sector more in line with national progress.

This project addresses fundamental system challenges that go far beyond helping people to access services at the right time by bridging gaps within, and outside of the mental health system

MENTAL HEALTH SYSTEM

MENTAL HEALTH SERVICES

HELP SEEKERS

FROM...

The mental health system is fragmented, and poorly positioned to integrate with the future of Australian digital health.

Providers must self-solve for many navigation problems, and deal with the impact on stakeholder outcomes.

Help seekers must find their own navigation supports against the odds, with many dead ends, and frequent re-starts as they move between services.

TO...

A more coordinated, collaborative and efficient mental health system that supports the need and experiences of help seekers and is connected to broader digital health reforms

Improved efficiency through shared platforms and tools, enabling even greater focus on core service delivery.

Help seekers find relevant, useful navigation supports close to where they first look, in a format that works for them – and can more easily share their needs throughout their journey.

SANE
We're people like you.

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 8: Breakout Session - priorities for people experiencing health disadvantage

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1. **Participate** in a breakout session to identify priorities for people experiencing health disadvantage

2. **Share** insight or feedback with the Council during the breakout session summary.

Purpose

The purpose of this item is to participate in group breakout sessions to identify priorities for people experiencing health disadvantage and share this back to Council members for further discussion.

Background

On 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions focusing on the needs of different populations in the community to identify opportunities for digital health interoperability, and to understand the pain points experienced by these cohorts in navigating the healthcare system.

Summary of issues

Breakout session (20 minutes)

The small group breakout sessions will be used to identify and discuss some of the priorities for people experiencing health disadvantage. Using insights from the short video and presentations, Council members will be asked to provide their experience and expertise to dive deeper into some of the priorities for people experiencing health disadvantage, and to explore how interoperability can play a pivotal role in addressing any barriers. A facilitator will be allocated to help groups identify these priorities.

Share back session (35 minutes)

A member from each breakout session will be asked to share back their findings from their breakout session and discuss any matters that have been raised.

![Australian Government - Australian Digital Health Agency]

Council for Connected Care

Agenda Item 9: Panel discussion - actions to address health disparities and key barriers to accessing connected care services for people experiencing health disadvantage

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1   **Participate** in the interactive panel discussion to explore current initiatives addressing health disparities and key barriers for people experiencing health disadvantage in accessing connected care health services.

Purpose

The purpose of this item is to participate in a discussion to identify how members, along with the organisations and stakeholders they represent, can collaborate to effect real and meaningful change in addressing consumer pain points experienced when accessing care services throughout their health and care journeys.

Background

At the 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions focusing on different population needs in the community to identify opportunities for digital health interoperability.

This agenda item will consider the pain points and challenges experienced by members of people experiencing health disadvantage in the community.

Summary of issues

The panel of experts have a wide range of expertise across mental health, consumers perspectives, domestic violence and CALD communities.

Expert panel:

The expert panel discussion will seek to identify the opportunities for improving a consumer's health and care journey and explore issues and barriers to accessing healthcare and connected care services for people in the community experiencing health disadvantage. The panel will be facilitated by Bettina McMahon, CEO of Healthdirect, and will include four experts:

Council for Connected Care
Agenda Item 9: Panel discussion - actions to address health disparities and key barriers to accessing connected care services for people experiencing health disadvantage

- **Rachel Green**, Chief Executive Officer, SANE

  Rachel Green is CEO of SANE, Australia's leading provider of digital mental health support services for adults living with complex mental health needs. Rachel is driven by her passion for pursuing big impact, community-focused interventions designed with the lived experiences of individuals and families at the forefront. With a wealth of experience across the mental health, suicide prevention and disability sectors, Rachel has previously held senior roles within the National Mental Health Commission, Black Dog Institute, Independent Community Living Australia and Commonwealth Department of Health and non-executive director roles with Being, the Institute of Analytics Professionals Australia, Sands Australia, Red Nose and the NSW Cycling Women's Commission.

- **Dr Elizabeth Deveny**, Chief Executive Officer, Consumers Health Forum Australia

  Dr Elizabeth Deveny is a dedicated senior executive committed to enhancing health outcomes for all Australians. As the CEO of the South Eastern Melbourne Primary Health Network and former Chair of the Australian Digital Health Agency Board, she implemented major reforms and built productive partnerships across media, government, and health sectors. Elizabeth holds a Master's in Health Education and a PhD in Medicine (Digital Health & Primary Care) from Melbourne University. Beyond her professional pursuits, she aims to find reasons to dance everyday (usually with no one watching), reflecting her holistic approach to well-being.

- **Mary Ann Baquero Geronimo**, Chief Executive Officer, Federation of Ethnic Communities' Councils of Australia (FECCA)

  Mary Ann Baquero Geronimo is the CEO of the Federation of Ethnic Communities' Councils of Australia (FECCA). In her previous role as Director of Policy for Health and Ageing at FECCA, she led a strong representation on access and equity for culturally and linguistically diverse communities in the pandemic response, primary healthcare, and reforms in the aged care sector. Prior to joining FECCA, she led initiatives that informed policies on community-based care, chronic disease management, and women's financial security in six countries in the East and Southeast Asian region for a decade. Mary Ann has led research and co-authored academic publications on ethnography, bio-psychosocial approaches to health and ageing, and public health communication in multicultural settings, among others. She received her master in public policy and public administration as a Lee Kuan Yew Scholar at the Lee Kuan Yew School of Public Policy-National University of Singapore.

- **Dr Monica Trujillo**, Chief Health Officer, Telstra Health.

  Dr Monica Trujillo is Telstra Health's new Chief Health Officer, a role which focusses on bringing digital capabilities together to support customers solving complex problems in health and aged care sectors across Australia and the wider international markets. Monica has global expertise and most recently served as Senior Director, Chief Medical Officer and Chief Clinical Information Officer at Cerner Australia and Asia Pacific. As a digital health advocate and enthusiast focused on improving quality outcomes through the adoption of technology, she brings a unique range of skills built on more than 20 years of experience across different areas in the health industry and wider eco-system. With a background in medicine, executive roles and clinical informatics, Monica has been at the forefront of delivering outcomes that break barriers to promote technology, better care and active community collaboration.

OFFICIAL

Council for Connected Care
Agenda Item 9: Panel discussion - actions to address health disparities and key barriers to accessing connected care services for people experiencing health disadvantage

Monica is currently a Board Member at the Australian Institute of Digital Health, Australia's peak body for digital health. She obtained her degree in Medicine and Surgery in 1998, holds a Master of Public Health, and is a Fellow of the Royal Australasian College of Medical Administrators, a Fellow of the Australian Institute of Digital Health, and a Fellow of the Australasian College of Health Service Management. She is a well-known advocate on fully and effectively engaging clinicians and consumers in the design, implementation, and sustainability of digital health solutions, in order to bring about high quality and safety outcomes.

- **Bettina McMahon**, Chief Executive Officer of Healthdirect Australia (Facilitator)

Bettina McMahon is the Chief Executive Officer of Healthdirect Australia. She is on the Board of SNOMED International, and former Board Chair of the Australasian Institute of Digital Health. Bettina has considerable experience in digital transformation in the health sector over the past 15 years, and across the public sector and has postgraduate qualifications in public policy, applied finance, and business and technology. Prior to joining Healthdirect, Bettina was the Interim Chief Executive Officer at the Australian Digital Health Agency, where she had also held executive roles since 2009.

Australian Government

Australian Digital Health Agency

Council for Connected Care
Agenda Item 10: Roundtable updates

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1. **Note** the updates on current and upcoming initiatives focusing on people experiencing health disadvantage provided by Council members

2. **Note** the challenges and opportunities a more interoperable health system presents for people experiencing health disadvantage.

Purpose

The purpose of this item is to understand current and upcoming initiatives undertaken by Council member organisations that focus on people experiencing health disadvantage.

Background

On 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions focusing on the needs of different populations in the community to identify opportunities for digital health interoperability.

This 'Roundtable updates' agenda item will enable Council member organisations to share information on current and upcoming initiatives and highlight some of the challenges and opportunities for delivering a more connected care experience and how we can achieve better outcomes for people experiencing health disadvantage.

Summary of issues

Council members were invited to contribute to the roundtable update by providing examples of current or upcoming initiatives from their organisations.

Hospital Inclusion Project - Debbie Jaggers, National Disability Services

The Hospital Inclusion Project is specifically designed for family members and close friends of people with intellectual disabilities. It outlines a framework for ensuring quality hospital care, emphasising four key elements:
- Knowing about hospitals and their processes: understanding the hospital system and what to expect

- Informing and sharing information: communicating relevant information about the patient to hospital staff
- Collaborating with hospital staff and disability support workers: working together to provide the best care
- Supporting the person through the hospital journey: offering emotional and practical support throughout their hospital stay.

This resource aims to help families and friends navigate the hospital experience more effectively and ensure that their loved ones receive the best possible care.

Video 1 (2.54 minutes): https://youtu.be/Vepr6smPKuU

This video shows patient Jeff, with Amelia, his disability support worker, and Lynne, his sister managing one type of transition that can occur at points along the hospital journey.

Video 2 (48 seconds): https://youtu.be/mPk2sTvrIWE

Aged Care Specialist Officer Service - Kirsty Faichney, Services Australia

The Aged Care Specialist Officer (ACSO) Service is part of My Aged Care face-to-face services. ACSOs are available to help individuals with their aged care matters. They provide in-depth information on different types of aged care services, check eligibility for government-funded services, and make referrals for aged care assessments. Additionally, they assist with appointing a representative for My Aged Care, provide financial information about aged care services, and connect individuals to local support services

Free face-to-face appointments with ACSOs are available through video chat for persons with a myGov account, or in person at some service centres.

Services Australia has ensured that ACSOs are available in 80 service centres nationwide, providing support to older people when making important decisions about aged care.

Video 3 (3.16 minutes): https://youtu.be/CAxFy5052Uc?si=LijqhoZID4FJihZw

Infoxchange– Emma Hossack, MSIA

Infoxchange is a not-for-profit social enterprise dedicated to leveraging technology for social justice, serving over 35,000 government and community services across Australia and New Zealand. Infoxchange significantly impacts people experiencing health disadvantage by leveraging technology to address critical social issues. They collaborate with community, government, and corporate partners to tackle challenges such as homelessness, family violence, mental health, and disability. Their Annual Report[1] provides multiple examples of how technology is helping to overcome health and social issues.

Their initiatives, like Ask Izzy, provide essential services to those in need including housing, meals, and healthcare. This platform is particularly beneficial for homeless individuals discharged from hospitals, helping them find immediate shelter and reducing the likelihood of returning to emergency departments.

The work of Infoxchange highlights the transformative power of technology in addressing critical social issues and improving lives. By improving digital inclusion and offering support through various programs, Infoxchange empowers disadvantaged individuals, drives social inclusion and

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[1] Infoxchange Annual Report 2024

Council for Connected Care
Agenda Item 10: Roundtable updates

creates stronger communities. Their work ensures that no one is left behind in today's digital world.[2]

Edify - Emma Hossack, MSIA

Edify is a company dedicated to enhancing the aged care workforce by providing training and translation services for culturally and linguistically diverse (CALD) communities.[3] By offering translations in languages such as Mandarin and Thai, Edify ensures that CALD individuals can effectively participate in aged care services. This initiative not only creates equity within the workforce but also connects individuals to multiple job opportunities, supporting them with essential translation tools in the workplace. Edify's approach is both simple and elegant, providing an invaluable service that promotes inclusivity and accessibility in the aged care sector.

South West Sydney PHN – Keith McDonald

This presentation will provide an update on current and upcoming initiatives by Primary Health Networks (PHNs) that utilise digital health solutions to support people experiencing health disadvantage. Key initiatives include:

- Florence App (South East Melbourne PHN): This app facilitates GP enrolment, disseminates information and resources, collects data on key health measures, and notifies clinicians for reviews

- Digital Health Literacy Mentorship (Western Queensland PHN): This initiative aims to upskill health workers in remote communities through case-based learning on digital health applications

- Healthy Outback Communities (Western Queensland PHN): A virtual health and wellbeing hub delivered by the Royal Flying Doctor Service, offering appointments by phone or video, clinical advice, wellbeing planning, and referrals

- Digital Health After Hours Triage Service (Northern Territory PHN): This service diverts after-hours calls to on-call remote access nurses who can access community health information systems, perform phone triage, and arrange medical retrievals or referrals

- Indigenous Wellness Connect (Darling Downs Moreton Bay PHN & Hunter New England Central Coast PHN): A cross-border partnership involving multiple PHNs and health services, enhancing remote multidisciplinary care through telehealth carts equipped with diagnostic tools and improved satellite connectivity

Attachments

Attachment A: Roundtable update PHN initiatives

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[2] Technology for social justice - Infoxchange

[3] EdifyMed - Multi-Lingual Medical Education & Training App | edifymed.com

Council for Connected Care Roundtable Update

25ᵗʰ February 2025

Current and upcoming PHN initiatives applying digital health solutions focusing on vulnerable communities

Key: Primary objectives for initiatives

Access to care	Care navigation	Cultural Safety	Health Literacy

Vulnerable Community	PHN locations	Initiative	Objectives
People with chronic conditions	South East Melbourne PHN	***Florence App*** o GP enrolment o Sends info & resources o Collects data on key measures (BP; BSL; Wt) o Clinical review notifications	
Remote communities	Western Queensland PHN	***Digital health literacy mentorship*** o Case-based learning to upskill x20 health workers on digital health applications for pts	

Vulnerable Community	PHN locations	Initiative	Objectives
Remote communities	Western Queensland PHN	***Healthy Outback Communities*** o Virtual health & wellbeing hub o Delivered by RFDS o Appt by phone/video o Clinical advice o Wellbeing planning o Referrals	
Remote Aboriginal & Torres Strait Islander communities	Northern Territory PHN	***Digital Health After Hours Triage Service*** o a/h call diversion to on-call remote access nurse (RAN) o RAN access to ACCHS CIS o Phone triage (GP on-call telehealth/ arrange medical retrieval) o Referral to next day services	
Rural & remote Aboriginal & Torres Strait Islander communities	Darling Downs Moreton Bay PHN & Hunter New England Central Coast PHN	***Indigenous Wellness Connect*** o *MacIntyre Health Alliance* (cross-border partnership b/w x2 PHNs, x2 LHDs & x 2 ACCHS') o Telehealth carts with diagnostic peripheral tools o Enhanced satellite connectivity o Remote MDT care	

Australian Government
Australian Digital Health Agency

Council for Connected Care
Agenda Item 11: Other business

Meeting: 25 February 2025

OFFICIAL

Recommendations

That Members:

1 **Raise** any other business items for consideration or discussion by the Council

2 **Note** the next meeting will be held in Alice Springs on 12 June 2025.

Purpose

The purpose of this item is for members to raise any business items for consideration or discussion by the Council.

Background

This is a standing agenda item.

Summary of issues

The next meeting will take place in Alice Springs on 12 June 2025 and will focus on Indigenous peoples and Indigenous communities.