**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](https://www.digitalhealth.gov.au/sites/default/files/documents/australian-digital-health-agency-national-healthcare-interoperability-plan-and-national-healthcare-identifiers-roadmap-q2-october-december-2024-progress-report.pdf) 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

*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.