



Australian Government
Australian Digital Health Agency

Australian Digital Health Agency

Corporate Plan **2018-19**

About this plan

The Australian Digital Health Agency commenced operations on 1 July 2016.

The *Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016* sets out the functions and governance of the Agency.

This corporate plan covers a four-year reporting period, 2018–19 to 2021–22, as required under paragraph 35(1)(b) of the *Public Governance, Performance and Accountability (PGPA) Act 2013* and in accordance with section 16E of the PGPA Rule 2014.

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Council of Australian Governments

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1. About the Australian Digital Health Agency

1.1 Our purpose

The purpose of the Australian Digital Health Agency is:

Better health for all Australians enabled by seamless, safe, secure digital health services and technologies that provide a range of innovative, easy to use tools for both patients and providers.¹

Used effectively, digital information can help save lives, improve health and wellbeing and support a sustainable health system that delivers safe, high-quality health services for all Australians.

- » Develop, implement, manage, operate, and continuously innovate and improve specifications, standards, systems and services in relation to digital health, consistently with the national digital health work program;
- » Develop, implement and operate comprehensive and effective clinical governance, using a whole of system approach, to ensure clinical safety in the delivery of the national digital health work program;
- » Develop, monitor and manage specifications and standards to maximise effective interoperability of public and private sector digital health systems;
- » Develop and implement compliance approaches in relation to the adoption of agreed specifications and standards relating to digital health; and
- » Liaise and cooperate with overseas and international bodies on matters relating to digital health.²

1.2 Our role

The role of the Agency is to:

- » Coordinate, and provide input into, the ongoing development of the National Digital Health Strategy;
- » Implement those aspects of the National Digital Health Strategy that are directed by the Ministerial Council;

¹ [Health Portfolio Budget 2018-19](#)

² [Public Governance, Performance and Accountability \(Establishing the Digital Health Agency\) Rule 2016](#)

2. Environment

2.1 Australia's health system

Australia's health system is highly respected internationally for its effectiveness and efficiency.³ However, despite strong foundations, a number of demographic and health trends are stretching the financial, physical and human resources of our healthcare system. These factors include an ageing population and increasing rates of chronic disease, compounded by systemic issues such as challenges in maintaining a skilled workforce in light of new technologies, and inequalities in health outcomes across different communities.

Consequently, there is increasing need for healthcare reform to prepare Australia to respond to the emerging health needs of its communities and to maintain existing high standards. This reform includes, among other things, the funding and large-scale adoption of digital health technologies to support new and improved models of care that drive greater safety, quality and efficiency for Australian patients and their carers.

2.2 Digital health in Australia

Australia has made steady inroads in implementing digital health solutions.

In May 2017, the Australian Government announced that the My Health Record system would transition to an “opt out” system. This follows an independent review commissioned by Government in 2013 which recommended the system move to opt out to accelerate the benefits of the system to Australians.⁴ By the end of 2018, a My Health Record will be created for every Australian, except those who choose not to have one.

Also in 2017, Australian Health Ministers endorsed Australia's National Digital Health Strategy which defines seven priority areas for digital health from 2018–22.⁵ The Agency prepared an implementation plan for the strategy which was launched on 3 July 2018 by the Minister for Health, the Hon. Greg Hunt MP. The implementation plan includes roles and activities for government, healthcare providers, the technology industry, consumers, and researchers to contribute to achieving the digital health goals by 2022. These are set out in more detail in Section 3 below.

³ [Mirror, Mirror 2017: International Comparison Reflects Flaws and Opportunities for Better U.S. Health Care, 2017](#)

⁴ [Personally Controlled Electronic Health Record Review \(archived\)](#)

⁵ <https://conversation.digitalhealth.gov.au/australias-national-digital-health-strategy>

One priority area which was progressed in 2017 ahead of the term of the strategy was preparing for the expansion of the My Health Record. Expanding participation will help embed the use of My Health Record as a routine element in clinical workflows nationwide. This in turn will ensure that the great majority of Australian patients will accrue a comprehensive, accessible medical history, which can become a vital resource for clinical interventions and ongoing health management.

Healthcare providers can use the My Health Record system and associated digital health infrastructure to share health information with their patients, transfer prescriptions to pharmacies, and provide interactive decision-making support. Consumers can take a proactive and participatory approach to their healthcare by adding personal notes and controlling the information displayed in their personal record.

2.3 General environmental factors

2.3.1 International

Australia's drive to implement a national digital health system aligns with, and in some respects leads, comparable efforts internationally. There is a widespread recognition around the world that digital health technologies hold great promise to both improve health outcomes and reduce the cost of healthcare delivery.

To take advantage of the potential benefits of international collaboration in digital health, the Agency has established the Global Digital Health Partnership (GDHP)⁶; an international forum which provides the opportunity for participating governments and digital health agencies to share knowledge and experiences, leading to the improved delivery of digital health services in each participating country. The inaugural meeting was held in Australia in February 2018, with delegations from 13 countries, Hong Kong SAR and the World Health Organization attending.

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<https://www.digitalhealth.gov.au/news-and-events/news/media-release-new-global-digital-health-partnership>

2.3.2 Clinician and consumer response

Generally speaking, the My Health Record system and other digital health technologies are only of value if they are used by clinicians and consumers. This means that the main risks to the Agency's program are factors that could discourage the use of these digital health services in Australia's healthcare system. Such factors include a lack of awareness of the My Health Record system and other digital health services, or a loss of faith among clinicians and consumers in these services, perhaps due to privacy or security concerns, or a perception of general irrelevance to grassroots healthcare delivery.

The Agency is actively working to mitigate these risks. Any lack of awareness among clinicians and consumers is being addressed through a broad-based communications strategy. Factors that might lead to a loss of faith are being addressed through initiatives such as the implementation of robust privacy controls, the formation of the Digital Health Cyber Security Centre⁷, and an ongoing commitment to consultation, collaboration and co-production with stakeholders across Australia.

The key risks that impact the achievement of our purpose, and our approach to managing those risks, are described in more detail in Section 5.

⁷ <https://www.digitalhealth.gov.au/about-the-agency/digital-health-cyber-security-centre/about>

3. A new digital health strategy for Australia

3.1 Looking forward to the digital transformation of Australia's health and care

Australia's National Digital Health Strategy — Safe Seamless and Secure⁸ was developed through a nationwide consultation process, and approved by Australia's Health Ministers on 4 August 2017. The strategy is focused on an evidence base of benefits prioritising national-level digital health activity, and articulates the need for a coordinated approach to the delivery of digital health within Australia.

It outlines a vision, key themes that were identified during the national consultation, and seven strategic priorities that will guide the approach to the delivery of digital health within Australia from 2018 to 2022. These guiding principles are summarised in the figure on the following page.

⁸ [*Australia's National Digital Health Strategy Safe, Seamless and Secure, 2017*](#)

Vision

Better health for all Australians enabled by seamless, safe, secure digital health services and technologies that provide a range of innovative, easy to use tools for both patients and providers.

Key Themes



1

Support me in making the right healthcare choices, and provide me with options



2

Help all the people who care for me to understand me, and together, provide safe and personalised care



3

Create an environment where my healthcare providers and I can use and benefit from innovative technologies



4

Preserve my trust in the healthcare system and protect my rights

Strategic Priorities

- 1.** Health information that is available whenever and wherever it is needed
- 2.** Health information that can be exchanged securely
- 3.** High-quality data with a commonly understood meaning that can be used with confidence
- 4.** Better availability and access to prescriptions and medicines information
- 5.** Digitally-enabled models of care that improve accessibility, quality, safety and efficiency
- 6.** A workforce confidently using digital health technologies to deliver health and care
- 7.** A thriving digital health industry delivering world class innovation

Figure 1: Strategic vision, themes and priorities

3.2 Key milestones 2018 to 2022

By the end of June 2019:

- » Every Australian will have a My Health Record, unless they choose not to.
- » A public consultation on draft interoperability standards will confirm an agreed vision and roadmap for implementation of interoperability between all public and private health and care services in Australia.
- » All patients and their providers will have access to comprehensive views of their prescribed and dispensed medications through the My Health Record system.

By the end of 2022:

- » Every healthcare provider will have the ability to communicate with other professionals and their patients via secure digital channels.
- » The first regions in Australia will showcase comprehensive interoperability across health service provision.
- » There will be digitally enabled paper-free options for all medication management in Australia.
- » All healthcare professionals will have access to resources that will support them in the confident and efficient use of digital services.

3.3 Strategy implementation plan

Achievement of the outcomes in the strategy will depend on continued co-production with patients, consumers and carers — and the governments, healthcare professionals, organisations and industry innovators who serve them. As custodians of the strategy, the Australian Digital Health Agency co-designed the strategy's implementation plan — the *Framework for Action*⁹ — with its many partners in the community, building on the findings of the strategy's national consultation. The framework will be a living document that is regularly updated to reflect the continuing progress on the strategy's outcomes.

The purpose of the *Framework for Action* is to:

- » Articulate the activities required to deliver on the strategy's outcomes, and the roles participants in the digital health eco-system will play in order to deliver them;
- » Promote collaboration and information sharing, and provide a holistic view of the various projects, innovations and investments, as well as new ways of working that progress the seven strategic priority areas in the strategy; and
- » Act as a guide for organisations that are recalibrating their strategies or forward work programs to align to national strategic priorities.

⁹ <https://conversation.digitalhealth.gov.au/framework-for-action>

Priority activities described in the framework include:

- » Improving the quantity, consistency and usability of information captured in the My Health Record system;
- » Establishing a standardised approach to secure clinical messaging in Australia, enabling seamless interoperability between vendor networks and clinical information systems;
- » Testing, adopting and implementing new, digitally enabled models of care, in collaboration with stakeholders;
- » Supporting the growth of a workforce with the skills to confidently use digital health technologies in Australia; and
- » Fostering and accelerating innovation in Australian health and care.

4. Capability

4.1 Foundations of success

As a young and rapidly maturing Commonwealth agency, continuing to build capability is critical to ongoing delivery of the Agency's work program. Success depends on forging external partnerships, a commitment to good governance, promoting strong values and culture within the Agency, and developing our people.

4.2 People

The Agency's people are the primary enablers of organisational performance. Staff have a range of backgrounds and skills in healthcare, health informatics, management and information technology, and are experienced in many different contexts and disciplines. The diversity of backgrounds is a significant strength for the Agency.

Over the next four years, the Agency will continue to build an agile, engaged and empowered workforce with a sustained focus on:

- » Recruiting talented staff, retaining them through career mentoring, and rewarding commitment and success;
- » Being responsive and adaptive to changing demands, by establishing a learning culture and aligning individual performance plans to our strategic goals and values;
- » Strong leadership that clearly conveys the Agency's strategic vision; and
- » Supporting staff to perform at their best, through corporate and procedural policies and practices that grant autonomy, encourage accountability and give leadership opportunities.

Developing a capable, flexible and motivated workforce will give the Agency the necessary resilience to deliver major national programs and meet both the inherent and the unforeseen challenges that will be encountered in supporting the implementation of digital health-driven change across the health sector.

4.3 Workforce planning

Much of the Agency's work requires specialist skills. In order to ensure that these skills are maintained and further developed, workforce planning continues to ensure that capability and resources are coordinated and balanced, both now and in the future.

This planning includes both an environmental analysis and risk assessment to identify any gaps between current and future workforce needs, and to mitigate the risk of loss of technical expertise. Ongoing workforce planning and forecasting will ensure that the Agency remains responsive to the needs of government, in a climate of fiscal constraint and technologically driven disruptions in both healthcare delivery and in the community's expectations of best practice public service delivery.

4.4 Values and culture

The Agency's values and culture, reflected in everyday conduct, are fundamental to successful delivery of the Agency's work program. As a Commonwealth public sector organisation, the Australian Digital Health Agency embraces the Australian Public Service ICARE values.

- I** Impartial
- C** Committed to service
- A** Accountable
- R** Respectful
- E** Ethical

To further strengthen its values-based culture, the Agency has developed and refreshed its own set of complementary values that support and enhance its strategic direction and culture:

- » Working together collaboratively
- » Respect and trust
- » Transparency
- » Accountable
- » Innovative

These refreshed values¹⁰ will be embedded in a behaviours framework to support the values in action, in both policies and practice.

¹⁰ Prior to the refresh, the Agency values were "working together", "respect and trust", "transparency", "leading through learning" and "customer focus".

4.5 Governance

The Agency's Board sets the strategic direction, organisational priorities, and immediate focus of the organisation. It is the key decision-making body for the Agency with its functions and skills base set out in the *Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016*. Its members come from all over the country, draw on a mix of gender, ages and backgrounds and bring a range of expertise and perspectives, as well as ambition for the future of digital healthcare.

The Board delegates responsibility for operational management to the Chief Executive Officer, who, with the support of an executive team, leads and coordinates the delivery of the priorities determined by the Board. The Board and executives are committed to good corporate governance and have established policies, processes and steering committees to help the Agency achieve its purpose and ensure the careful stewardship of Commonwealth, state and territory resources.

The Board takes advice from six advisory committees established under the *Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016*.

Whole-of-organisation planning is underway to nurture workforce capability and culture, and strengthen the Agency's governance framework. Strategies to address workforce risks and challenges are addressed further in Section 5.

5. Risk management

The Agency is committed to an embedded risk management environment where risk consideration forms an intrinsic part of business-as-usual culture, promoting risk-informed decision making. The Agency's Risk Management Strategy, Framework and Policy (RMSFP) provides comprehensive guidance and information on Agency risk management processes and structures to help staff recognise and engage with risks on a daily basis. The RMSFP complies with the Commonwealth Risk Management Policy, supports the requirements of Section 16 of the PGPA Act, and includes the 11 principles set out in AS/NZS ISO 31000 to effectively manage risk.

Our strategic risks recognise the effect of uncertainty on our ability to achieve our purpose, high-level activities and intended results. The risks are identified in the table below. The strategic risks are identified and managed by the Agency's Executive Leadership Team and endorsed by the Board. The Executive Leadership Team monitors the risks and associated treatments on a monthly basis, with the Audit and Risk Committee and Board receiving quarterly updates.

Strategic risk	Measures to control risk
Failure to establish and maintain an Agency culture that supports employees and the achievement of Agency strategic objectives.	Undertake compliance assessment and gap analysis with a view to introducing or updating existing policies and frameworks managing governance, IT, finance, and staff. Continue with cultural improvement initiatives to maintain workforce productivity and wellbeing.
Inability to manage the expectations of stakeholders.	Implementation of the Stakeholder Management Framework by engaging early and meaningfully with key stakeholders, working together and exchanging knowledge, expertise and views, being transparent and demonstrating consideration of stakeholder contributions for effective co-design and co-production in product and service development.
Inability to maintain focus on Agency mission and strategic goals.	Consistent communication of 2018–19 work plan priorities and framework for action for implementation of the four-year National Digital Health Strategy.

Strategic risk	Measures to control risk
Failure to achieve high shareholder confidence and engagement with the Agency, and its ability to manage funds and deliver outcomes.	Perform continuous improvement reviews, reporting and oversight of significant policies, frameworks and processes. This includes Accountable Authority instructions and delegations, budgetary control framework, business operation rules for system controls with service providers and independent internal and external audit validation processes.
Absence of stakeholder viewpoints in Agency solutions (product, training, information, support, engagement).	Conduct continual engagement with key stakeholders and consumers on the adherence to Digital Transformation Agency Digital Service Standards, the Service Design Framework and user-centred design methodologies in all product development.
Failure to maintain confidentiality, integrity and availability of national infrastructure within forecast commercial arrangements.	Active management and monitoring undertaken on all cyber security operations and engineering key deliverables. This includes maintaining critical frameworks, assessments, resources and tools to protect and safeguard privacy compliance and security.
National Digital Health Strategy poorly, or badly, implemented.	Deliver a superior stakeholder engagement program to ensure shareholders understand how the Agency is supporting their priorities. This will be generated through NDHS workplan implementation updates, benefits reporting and due diligence on project planning.
Failure to provide a clinically safe national infrastructure.	Maintain and oversee a consistent review and alignment to enhancing clinical safety and assurance. This is through regular review of specific frameworks, committees, awareness campaigns and programs.
Failure to plan for and deliver the My Health Record Expansion program.	Adoption of a strong governance model including the delivery of the Agency Risk Management Framework, an effective program management function responsible for established communication and engagement strategies with regular reporting to the Commonwealth department.

During 2018–19, the Agency will continue to refine and enhance its overarching risk structures, and continue to improve staff capabilities to assess and manage risks.

6. Performance

6.1 Overview

Following the recent launch of the National Digital Health Strategy, the Agency's performance will be driven by and assessed against the seven strategic priorities outlined in the strategy and associated work program.

The Agency Board endorsed the 2018-19 work plan for the Agency with a number of programs and projects that support those strategic priorities (see Figure 2 on following page). It was endorsed by the Australian Health Ministers' Council in July and will be considered by Australian Health Ministers at the COAG Health Council. Performance information has been crafted for each priority to allow parliament and the public to judge our success, year by year, over the life of the corporate plan.

6.2 Strategic priority 1 targets

Health information that is available whenever and wherever it is needed

Deliver a national opt-out model for the My Health Record system and enhance the system to improve participation, usage, content and engagement with the service.

2018-19 target

2019-20 (& beyond) target

Deliver a national opt-out model for the My Health Record system by 31 December 2018, and release a minimum of two upgrades to the system to increase content, improve the end-user experience, mobile access, management of family records, allergies, medicines view, and access controls.

Continue to deliver a reliable and secure My Health Record system and to continuously improve the end-user experience.

Increase My Health Record system adoption by public and private hospitals.

2018-19 target

2019-20 (& beyond) target

Connect an additional 30 public hospitals and 15 private hospitals to the My Health Record system.

Connect additional public and private hospitals to the My Health Record system at a comparable rate each year.

AGENCY PORTFOLIO OF PROGRAMMES			
PROJECTS AND INITIATIVES		CORPORATE PROJECTS	
Medications Safety	My Health Record	Secure Messaging	Digital Enabled New Models of Care
Pharmacist curated medicine list	Complete expansion of My Health Record	National Health Interoperability Strategy and roadmap	Federated provider directory scaled nationally*
Curated medicines list (structured)	My Health Record Roadmap and Re-platform Plan	Interoperability consultation and agreed set of required standards	Electronic exchange Proof of Concept (2 x Referral projects nation wide)
ePrescribing work package*	Sustainable operating model post expansion	Master Drug Catalogue Business Case	Industry Alliance operational*
National Medicine Safety Blueprint	Two Releases of MHR	Private DI and Pathology connections	Standardised test names / Atomic Data (Pathology)
		Community pharmacy connections	NHS Directory transition (subject to approval)
			Improving use in EDs through ACSQH project
			Organisational culture and performance improvements
			Sustainable Operating Model
			Return to Government Business case
			Business system automation

Figure 2: FY 2018-19 COAG Programs

Establish foundation sources of pathology and diagnostic imaging reports in the My Health Record system with key implementation partners from public hospital networks and the private sector.

2018–19 target	2019–20 target	2020–21 target	2021–22 target
Six states and territories, and more than 60% of private pathology labs and 10% of private diagnostic imaging practices connected and sharing reports with the My Health Record system.	All states and territories, and more than 80% of private pathology labs and 20% of private diagnostic imaging practices connected and sharing reports with the My Health Record system.	All states and territories, and more than 83% of private pathology labs and 30% of private diagnostic imaging practices connected and sharing reports with the My Health Record system.	All states and territories, and more than 85% of private pathology labs and 35% of private diagnostic imaging practices connected and sharing reports with the My Health Record system.

Maintain availability of the My Health Record system.

2018–19 target	2019–20 target	2020–21 target	2021–22 target
99% of the time.			

6.3 Strategic priority 2 targets

Health information that can be exchanged securely

Establish a trustworthy, seamless process for a message to flow securely from one provider to another and over time to consumers.

2018–19 target	2019–20 target	2020–21 target	2021–22 target
Establish a federated provider directory and information exchange trust framework to support information exchange and implement specifications and guidelines and extend use of interoperable messaging from initial sites.	Co-produce a conformance, compliance and accreditation framework and process, building on existing schemes.	Establish sustainable operational models for national infrastructure to support information exchange, including provider identification and addressing services.	Continue establishing sustainable operational models for national infrastructure to support information exchange, including provider identification and addressing services.

6.4 Strategic priority 3 targets

High-quality data with a commonly understood meaning that can be used with confidence

Strengthen and improve the tools for digital interoperability in the Australian health sector.

2018–19 target	2019–20 target	2020–21 target	2021–22 target
Broaden consultation on interoperability roadmap and agree timeframes and targets for implementation.	Base-level requirements for using interoperable digital technology in the provision of care in Australia agreed with governments, peak clinical bodies and other key stakeholders.	Establish a digital health maturity support service to support jurisdictions and health services to increase their digital health maturity.	Continue establishing a digital health maturity support service to support jurisdictions and health services to increase their digital health maturity.

6.5 Strategic priority 4 targets

Better availability and access to prescriptions and medicines information

Improve the accuracy, timeliness, visibility and accessibility of medicines information in the My Health Record system.			
2018-19 target	2019-20 target	2020-21 target	2021-22 target
80% of community pharmacies connected and sharing dispensed prescription records to the My Health Record system. Support Department of Health on digital signatures policy development.	90% of community pharmacies connect and upload dispensed prescription records to the My Health Record system.	More than 95% of community pharmacies connect and upload dispensed prescription records to the My Health Record system.	More than 97% of community pharmacies connect and upload dispensed prescription records to the My Health Record system.

6.6 Strategic priority 5 targets

Digitally enabled models of care that improve accessibility, quality, safety and efficiency

Trial new models of health care to test their effectiveness in real-world environments to accelerate national uptake of initiatives with greatest benefit.	
2018-19 target	2019-20 (& beyond) target
Proceed with at least two pioneering initiatives to test evidence-based digital empowerment of key health priorities.	Support projects as approved by Agency Board.

6.7 Strategic priority 6 targets

A workforce confidently using digital health technologies to deliver health and care

Support healthcare professionals to trust in, and capitalise on, the benefits of digital technologies.

2018-19
target

2019-20 (& beyond)
target

Support governments and educational institutions to develop curricula to build digital workforce capability.

Continue supporting governments and educational institutions to develop curricula to build digital workforce capability.

6.8 Strategic priority 7 targets

A thriving digital health industry delivering world-class innovation

Drive innovation by working with industry, healthcare consumers and the research sector to expand existing digital tools and create new ones that meet the changing needs of patients and providers.

2018-19
target

2019-20
target

2020-21
target

2021-22
target

Support the Mobile Gateway Program and commence implementation of a secondary use framework for the My Health Record system.

Continue implementation of a secondary use framework for the My Health Record system and improve the Developer Partner Program to reduce barriers to innovation and aid integration with the My Health Record system and other digital services.

Provide best practice design principles and guidelines to enrich the user experience to accelerate adoption.

Continue providing best practice design principles and guidelines to enrich the user experience to accelerate adoption.



Australian Government

Australian Digital Health Agency

Appendix A: Agency Work Plan FY 2018–19

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Australian Government

Australian Digital Health Agency



Overview

SECTION 1

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Development Approach

BACKGROUND

In August 2017, the COAG Health Council approved the National Digital Health Strategy 2018-2022 (the Strategy) and high level Four Year Workplan. The FY18-19 represents the first year of the approved plan.

The overall planning process will support the development of the Agency's Commonwealth funding submission and the recently agreed IGA discussions, which are now going through jurisdictional approvals.

PLANNING FRAMEWORK

The Agency has developed a planning framework to provide context to the various strategy and planning documents that support the realisation of the National Digital Health Strategy and its benefits. The planning framework recognises the role of the Agency in the context of the overall National health landscape not limited to the Department of Health, jurisdictions and industry. As such its overall intent is to link planning with delivery responsibility and subsequent benefits realisation. These key documents considered include:

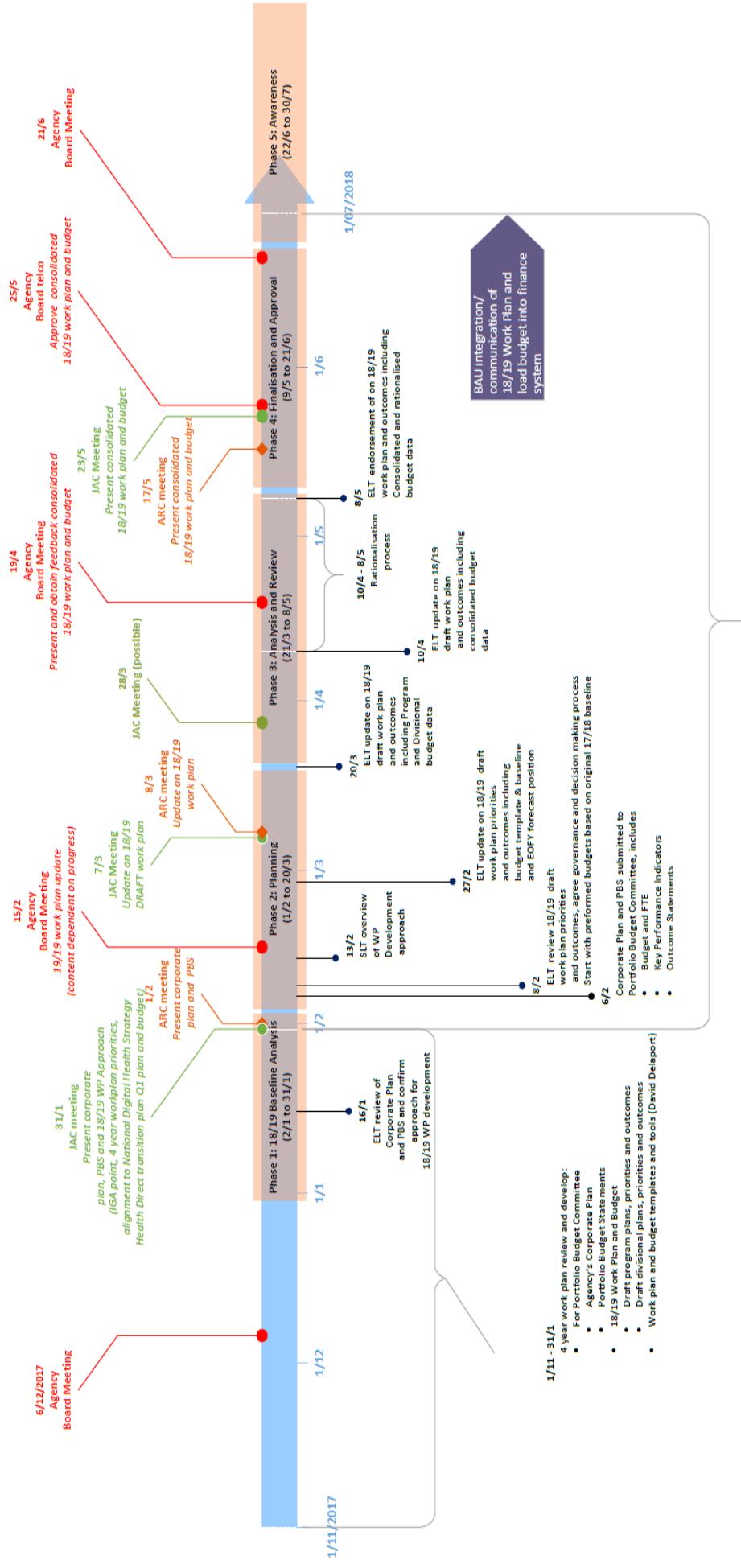
- National Digital Health Strategy
- National Digital Health Strategy: Framework For Action
 - National Digital Health Strategy: Benefit Realisation Plan



APPROACH

The annual planning process for the Agency, was split into 5 key phases commencing in early 2018 including: Baseline Analysis, Planning, Analysis & Review, Finalisation & Approval and Awareness. A summary of the activities across these Phases has been captured on the following slide. This approach was endorsed at the April 2018 Board meeting.

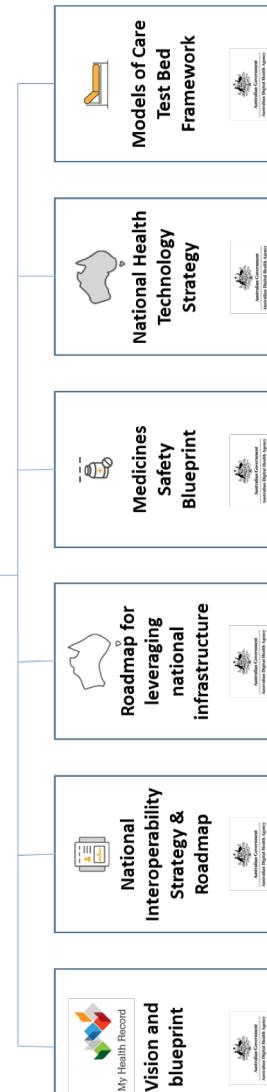
Development Approach



National Digital Health Strategy implementation products

Delivering the outcomes and benefits of the National Digital Health Strategy will require continuous co-production across the Agency's digital health partners in the health sector and the broader community.

To fulfil its leadership and coordination role, in 2018-19 the Agency will co-produce six strategic implementation products with stakeholders.



These products will assist the Agency, governments, and industry to prioritise, cost and sequence work to implement the activities identified in the Framework for Action over the life of the Strategy to achieve the desired outcomes and benefits.



Framework for Action

My Health Record	Secure Messaging	Interoperability & data quality	Medications Safety	Enhanced Models of Care	Workforce and Education	Driving Innovation
1.1 Realising the benefits of the My Health Record	2.1 Enable secure exchange of clinical information	3.1 Clinical information exchange through interoperability	4.1 Nationally coordinated digital medicines program	5.1 Test bed and scaling up environments	6.1 Develop capabilities to deliver better health and care outcomes	7.1 Promote inclusiveness and equality of experience
1.1.1 My Health Record Expansion Program	2.1.1 National Provider Addressing Service	3.1.1 National Interoperability Strategy	4.1.1 Digital Medicines Program Blueprint	5.1.1 Digital health test bed framework	6.1.1 Supporting adoption by the health workforce	7.1.1 Build insights into barriers to digital inclusion
1.1.2 Future use of the My Health Record	2.1.2 Standards based secure messaging capability	3.1.2 Co-design standards and specifications	4.1.2 Electronic Prescriptions	5.1.2 Embedding Telehealth	6.1.2 Digital health embedded in training	7.1.2 Advocacy for innovation and digital inclusion
1.2 Enable safe and secure use of My Health Record system data	2.1.3 Nationally coordinated programs	3.1.3 Conformance, compliance and accreditation framework	4.1.3 Best Possible Medicines List	5.1.3 End of Life Care	6.1.3 Digital health in national standards and accreditation	7.2 Fuel and accelerate healthcare innovation
1.2.1 Secure use of My Health Record data	2.1.4 Roadmap for leveraging national infrastructure	3.1.4 Increasing digital maturity	4.1.4 National Medicines Data Service	5.1.4 Chronic disease management	7.2.1 Innovation Showcase	7.2.2 Developer Partner Program
	2.2 Make it easy for providers to participate	3.2 National Health Technology Strategy	4.1.5 Consumer Medicines Information	5.1.5 Residential Aged Care	7.2.3 Digital health services endorsement framework	7.2.4 Health Innovation Exchange
	2.2.1 National Authentication and Identification Services	3.2.1 National Health Technology Strategy	4.1.6 Medicines Decision Support Tools	5.1.6 Children's Health Record	7.2.5 Partnerships with accelerators and incubators	7.2.6 Development of design principles
	2.2.2 Strategic Sourcing Review	3.3 Promote data quality	4.1.7 Enhance incident reporting capabilities	4.1.8 National Allergy Strategy	7.2.7 Support for mobile enablement	7.2.8 Other actions
		3.3.1 Enhance national data services	4.1.9 Real-time prescription monitoring	5.1.7 Emergency Care		





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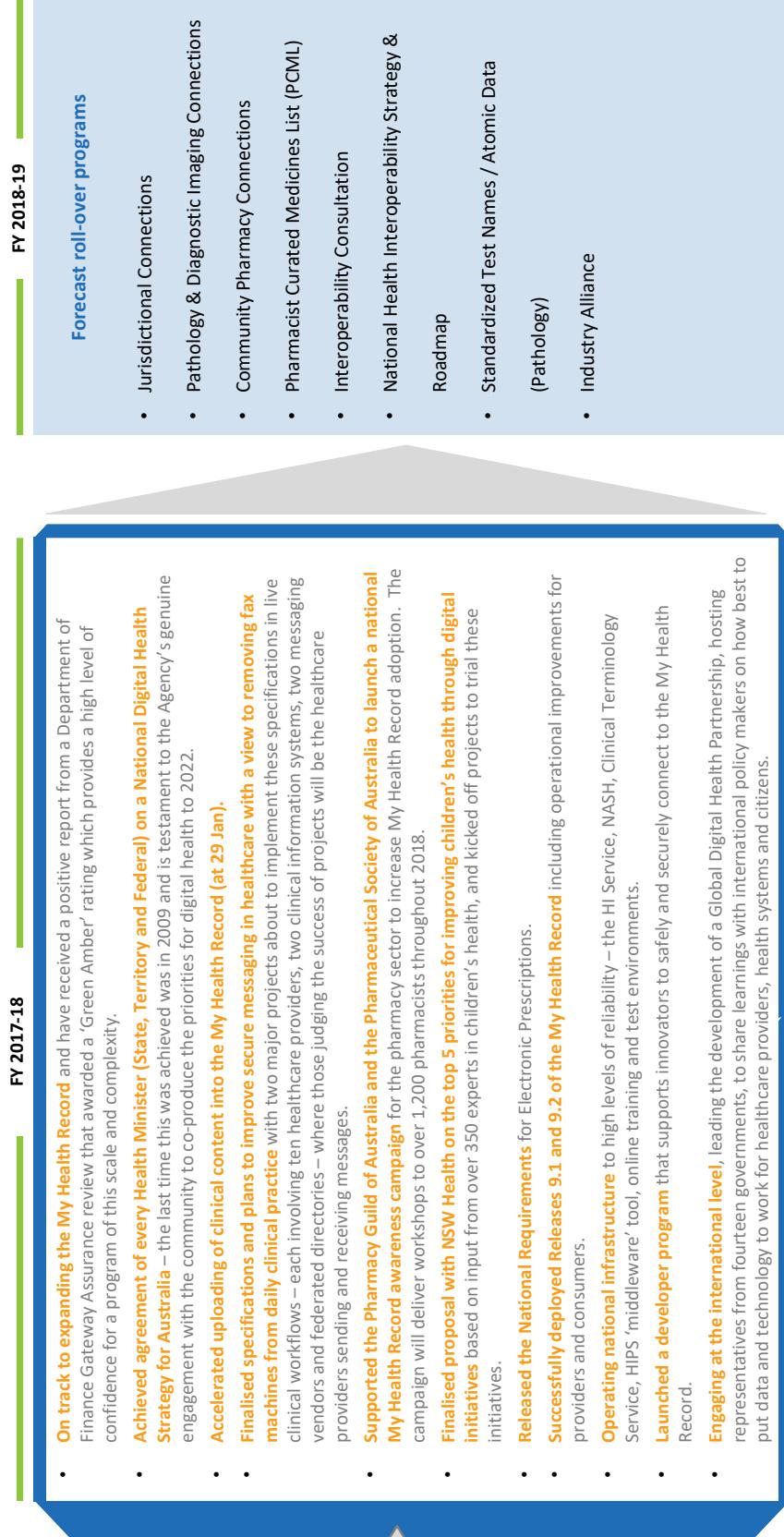
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FY2017-18 Scorecard

SECTION 2

Achievements in FY17-18





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Australian Digital Health Agency



Workplan Overview

SECTION 3

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Key themes

KEY GUIDING PRINCIPLES AGREED WITH THE BOARD

The following Board endorsed key principles have guided the development approach for the Agency Annual Workplan for FY18-19:

- Ensure that the opt out process for My Health Record is successful and supported.
- Focus on COAG activities that are key dependencies for the opt out process.
- Identify opportunities for digital health to support new models of care (priority identified by JAC on 31 January 2018).
- Ensure that the priorities that have been commenced continue with momentum.

*Increase meaningful use
of digital health*



Deliver expansion

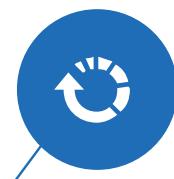


**Implementing the
National Digital
Health Strategy**

*Sustainable operating
model*



Organisational excellence



*Increase content in
My Health Record*



Position for the future



*National Infrastructure
forward planning
including replatforming*



FY18-19 COAG Programmes

Focus: Increasing the value of My Health Record

AGENCY PORTFOLIO OF PROGRAMMES			
Medications Safety	My Health Record	My Health Record Connections	Corporate Projects
PROJECTS AND INITIATIVES			
Pharmacist curated medicine list	Complete expansion of My Health Record	Jurisdictional hospital connections	National Health Interoperability Strategy and roadmap
NOTE: This work stream is funded through Commonwealth Funding			
Curated medicines list (structured)	My Health Record Roadmap and Re-platform Plan	Jurisdictional DI and Pathology connections	Interoperability consultation and agreed set of required standards
ePrescribing work package *	Sustainable operating model post expansion	Private hospital connections	Master Drug Catalogue Business Case
National Medicine Safety Blueprint	Two Releases of MHR	Private DI and Pathology connections	Standardised test names / Atomic Data (Pathology)
NOTE: This work stream is funded through Commonwealth Funding			
		Community pharmacy connections	NHS Directory transition (subject to approval)
			Improving use in EDs through ACQH project
* Multi-year initiative that will continue beyond June 2019			
ONGOING OPERATIONAL FUNCTIONS			
			Strategy, Benefits, Evidence based research and Horizon scanning
			Clinical, Consumer, Government and Industry Collaboration, Education and Adoption
			Core Service Systems, Operations and Improvement
			Cyber security
			Co-design
			Clinical Governance, Quality and Safety
			Corporate services and Organisational change management

* Multi-year initiative that will continue beyond June 2019

Organisational culture and performance improvements

Sustainable Operating Model

Return to Government Business case

Business system automation

NOTE: This work stream is co-funded through Commonwealth and COAG funding



Flagship deliverables in the 2018-19FY workplan

- Deliver expansion to provide a MHR for all Australians except those who choose not to have one
- Secure long term Cth funding for digital health foundations including the MHR
 - Support use of the MHR to deliver benefits to consumers, providers and the health system by increasing content with:
 - Additional 30 public and 15 private hospitals connected to MHR
 - 80% public and private pathology being uploaded to MHR
 - 57% of public and 10% of private diagnostic imaging being uploaded to My Health Record
 - 80% of community pharmacies uploading to My Health Record
 - And improve usability of MHR data for healthcare providers
 - Develop a My Health Record Roadmap and design to capitalise on investment in the platform to:
 - Enable changing business models and improved outcomes in the aged care sector
 - Increase utilisation by specialists
 - Underpin genomics and precision medicine research
 - Position the My Health Record as a centre point for registries, potentially building a mesh registry into the platform in 2018/19
 - Consider an imaging repository for public and private diagnostic images
 - Co-produce a MHR Blueprint and Roadmap for Leveraging National Infrastructure and commence engagement with the market to replatform the MHR
 - Support safer medicines use by building a curated medicines list into MHR, supporting the Dept and jurisdictions to achieve policy change for ePrescribing and agreeing a Medicines Safety Blueprint
 - Complete proof of concepts in NSW and Vic for Child Digital Health Record and QLD and SA for digital pregnancy health record; commence national roll out
 - Allowing healthcare providers find secure endpoints for any provider by nationally scaling a directory of endpoint locations and scaling interoperable messaging from the initial proof of concepts
 - Transition the National Health Service Directory from Health Direct Australia (pending approval)
 - Deliver an Interoperability Strategy, roadmap and set of interoperability standards
 - Co-design a National Technology Strategy that puts Australia at the cutting edge of national digital innovation
 - Support test beds to develop new models of care underpinned by the My Health Record and other digital foundations
 - Co-ordinate national work and investment in the National Digital Health Strategy through the Framework for Action
 - Continuing to promote Australian digital innovation through the Global Digital Health Partnership
 - Developing an efficient, high performing team





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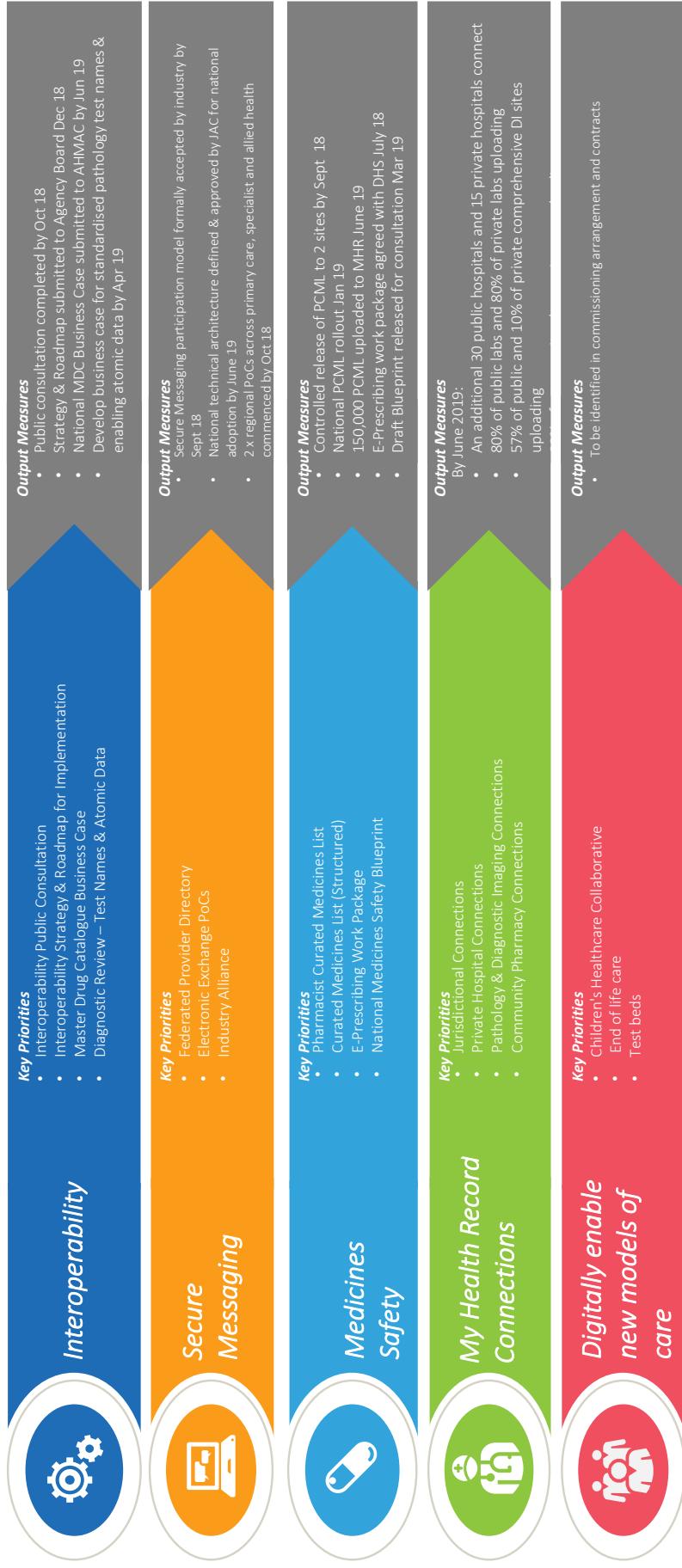


Agency Programs

SECTION 4

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2018-19FY Programs Overview





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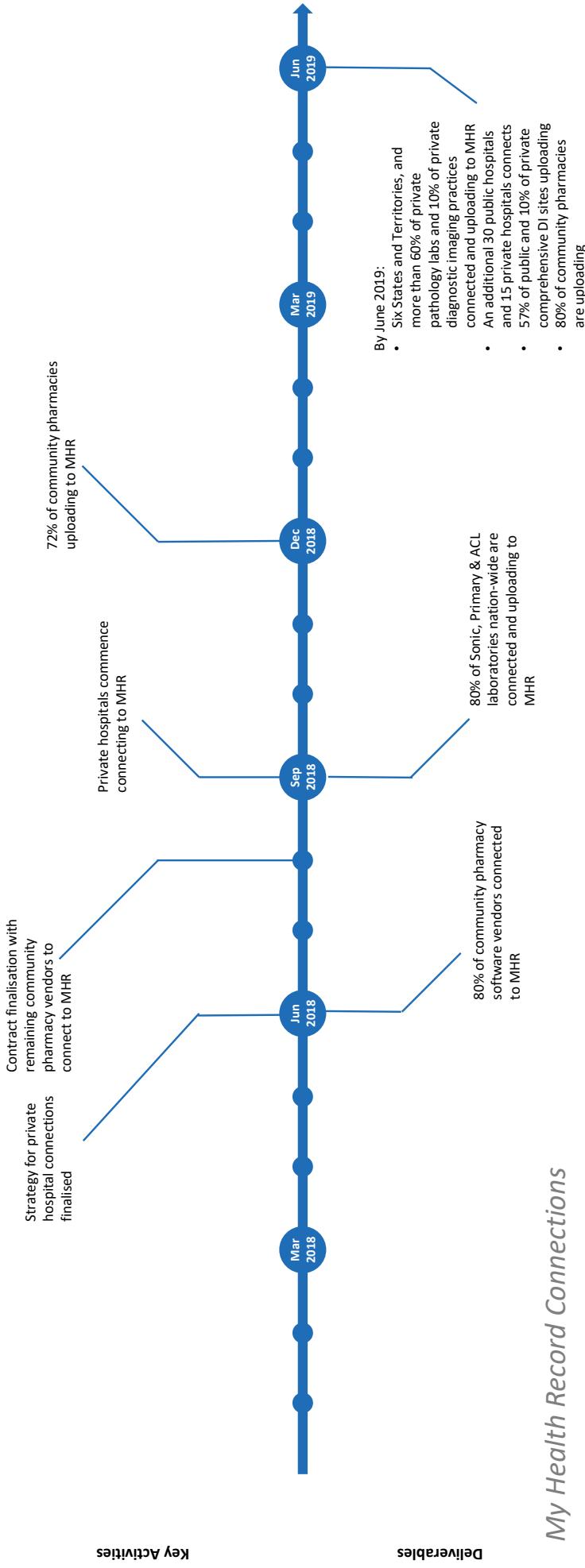
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My Health Record Connections

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Overview



Key Activities



Outcome Measures

By June 2019:

- An additional 30 public hospitals and 15 private hospitals connect
- 80% of public labs and 80% of private labs uploading
- 57% of public and 10% of private comprehensive DI sites uploading
- 80% of community pharmacies are uploading

Framework For Action Alignment

- 1.1.2 Future Use of the My Health Record

Risks & Assumptions

- Dependency on all three major pathology providers (Sonic, Primary and ACL) rolling out on time and to scale.
- Dependency on remaining jurisdictions rolling out on time and to scale.
- Peak Diagnostic Imaging body (ADIA) has expressed a number of concerns about encouraging members to participate in MHR which has resulted in delays in private Diagnostic Imaging sector participation.
- Lag time for GPs, Private Pathology and Diagnostic Imaging providers upgrading software to enable requesting, uploading and viewing reports to MHR.
- Dependency on all four banner groups (Sigma, Terry White Chemmart, API and Chemist Warehouse) rolling out on time and to scale.
- Dependency on FREDIT (representing 45% of the community pharmacy) to activate community pharmacy software on time and to scale.





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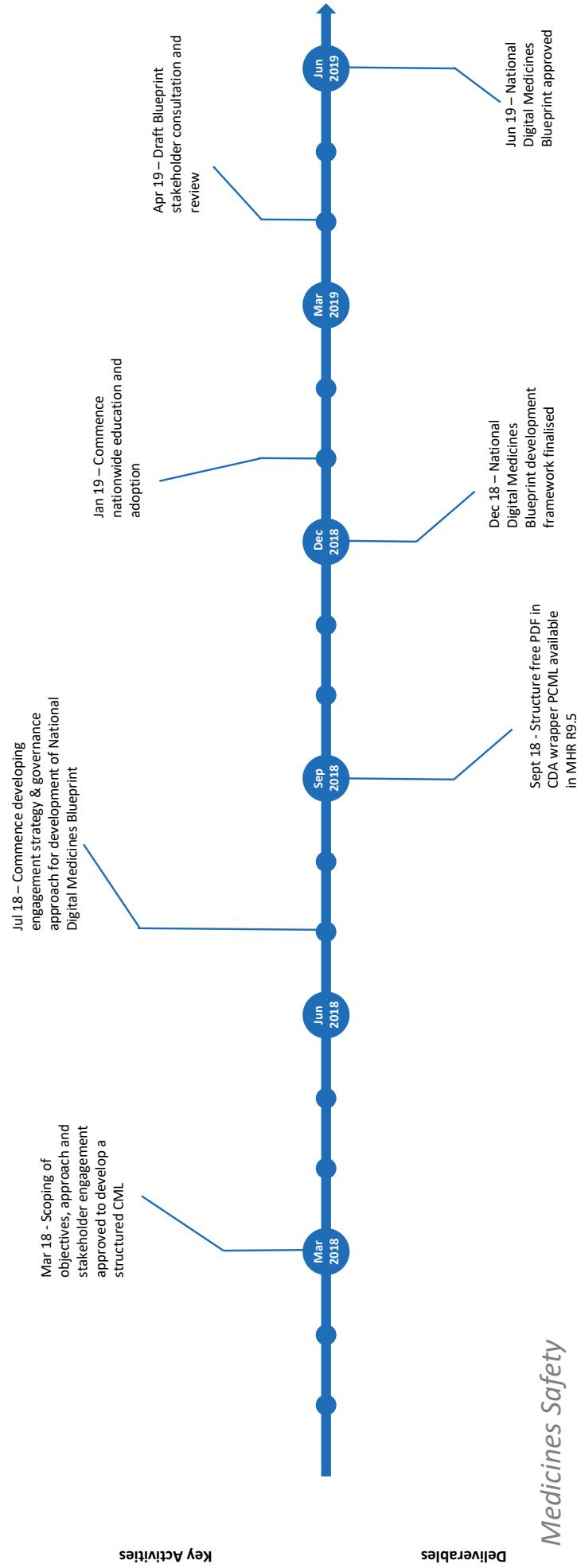


Medicines Safety

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Overview

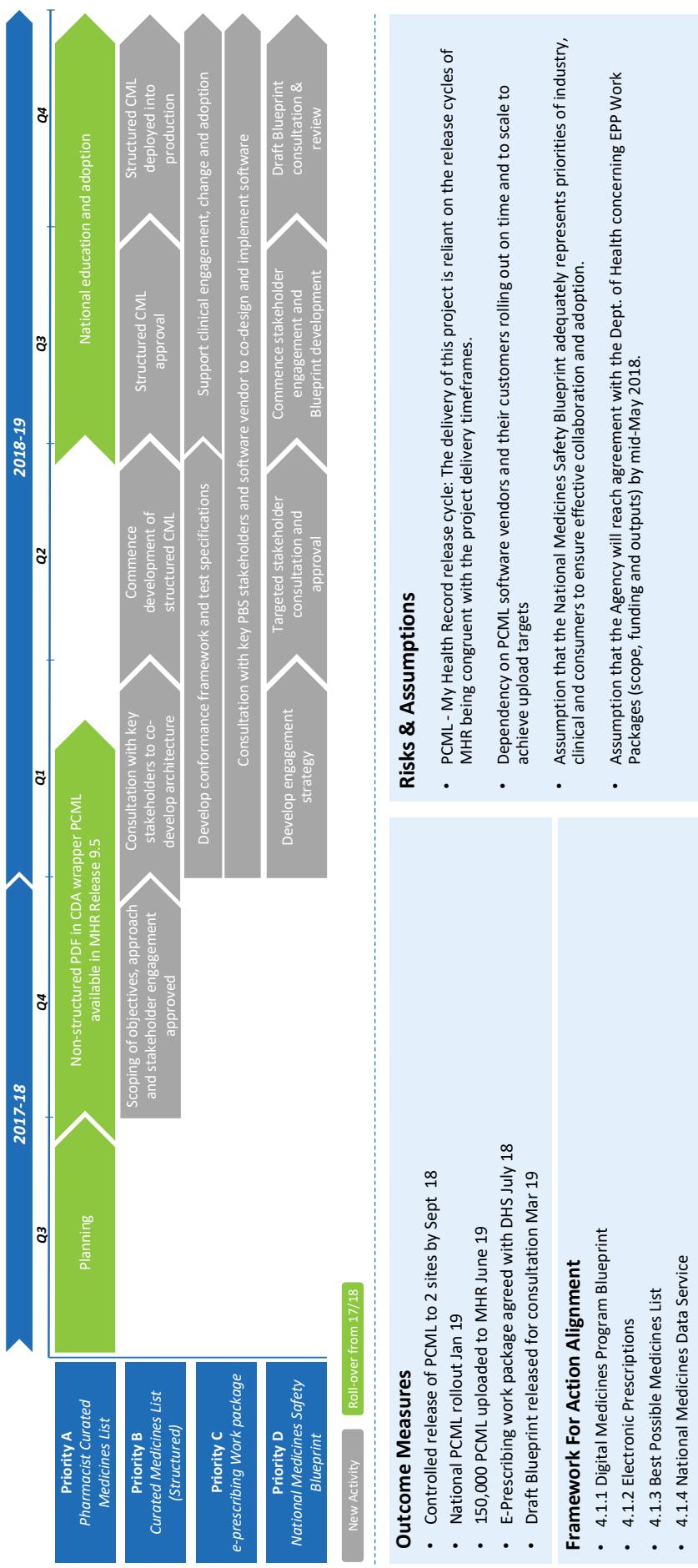
The Medicines Safety Program aims to deliver better health outcomes through partnerships for the provision of readily accessible, relevant, useful and usable and up-to-date medicines information to help customers and their providers make decisions about medicines and to support organisations change at all levels.



Medicines Safety



Key Activities



Outcome Measures

- Controlled release of PCML to 2 sites by Sept 18
- National PCML rollout Jan 19
- 150,000 PCML uploaded to MHR June 19
- EPrescribing work package agreed with DHS July 18
- Draft Blueprint released for consultation Mar 19

Framework For Action Alignment

- 4.1.1 Digital Medicines Program Blueprint
- 4.1.2 Electronic Prescriptions
- 4.1.3 Best Possible Medicines List
- 4.1.4 National Medicines Data Service

Risks & Assumptions

- PCML - My Health Record release cycle: The delivery of this project is reliant on the release cycles of MHR being congruent with the project delivery timeframes.
- Dependency on PCML software vendors and their customers rolling out on time and to scale to achieve upload targets
- Assumption that the National Medicines Safety Blueprint adequately represents priorities of industry, clinical and consumers to ensure effective collaboration and adoption.
- Assumption that the Agency will reach agreement with the Dept. of Health concerning EPP Work Packages (scope, funding and outputs) by mid-May 2018.





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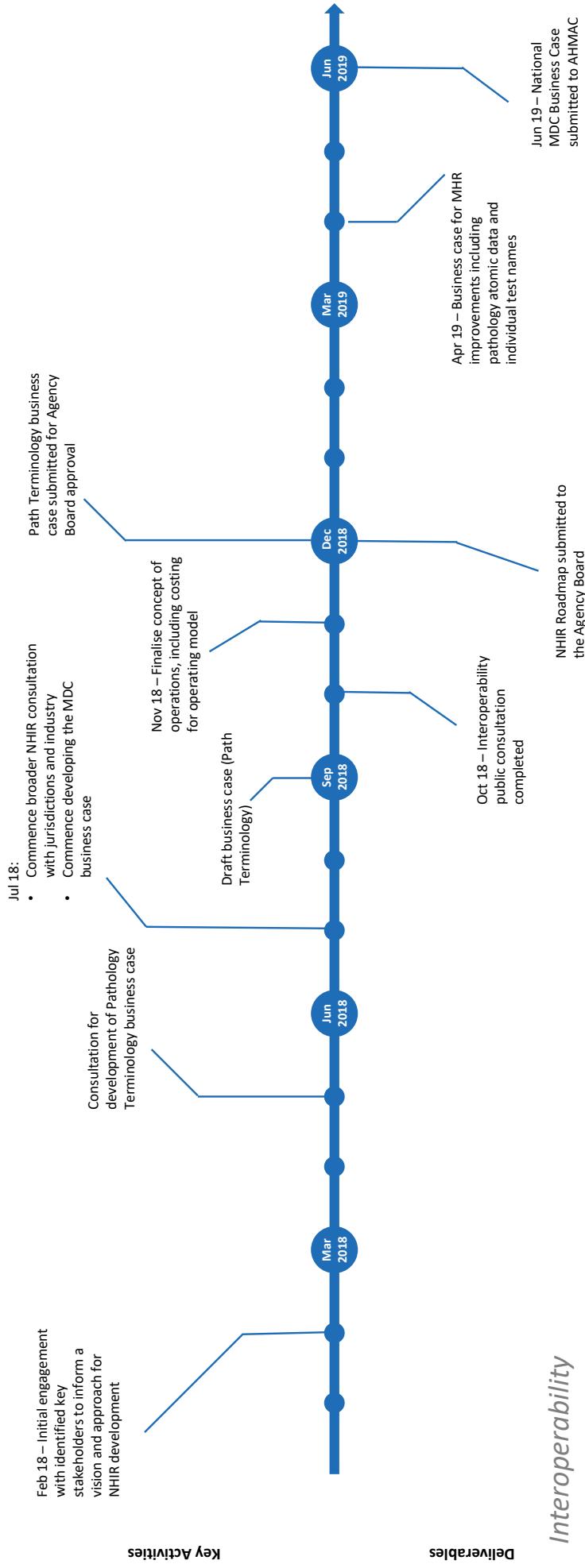


Interoperability

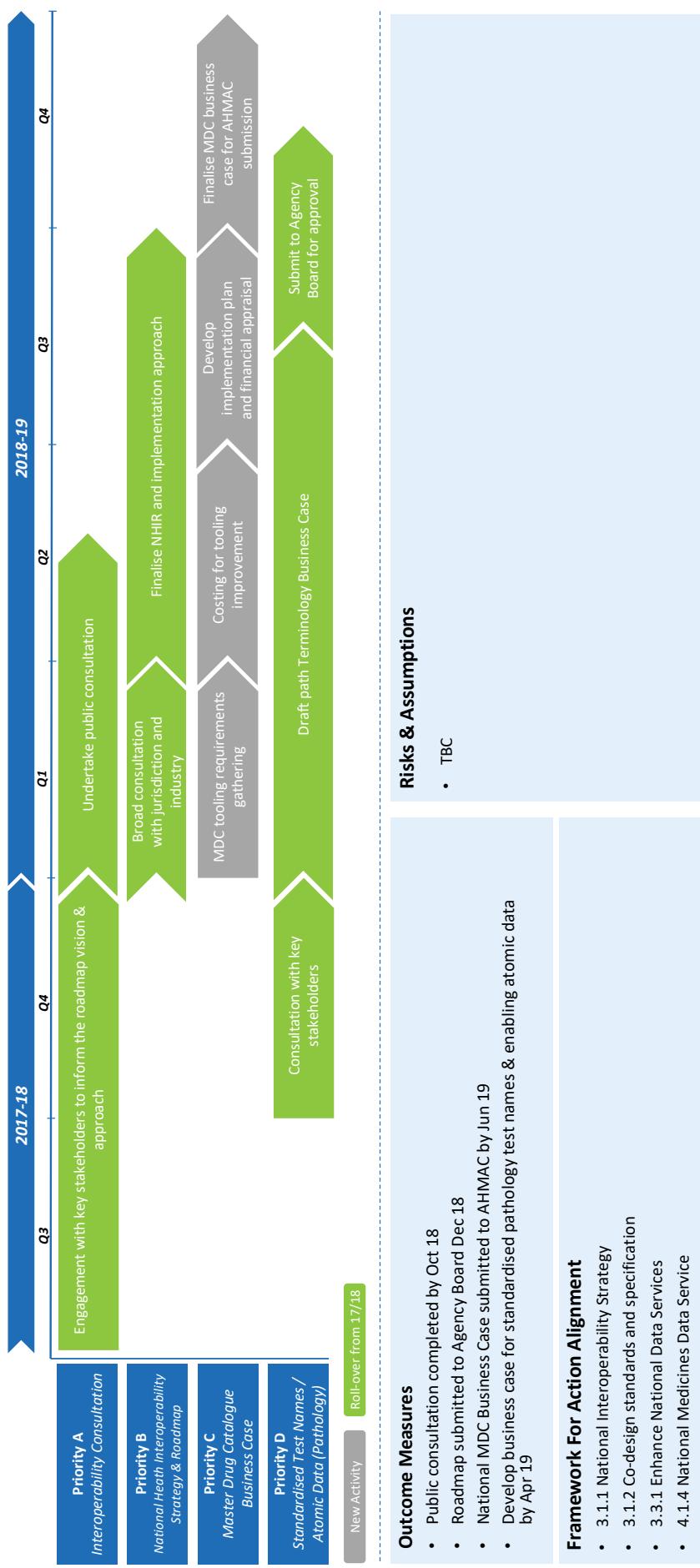
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Overview

The Interoperability Program aims to improve the sharing of high-quality health information, with a consistent meaning, between consumers and providers with a focus on improving safety, workflows and consumer experience and outcomes across Australia's health system.



Key Activities





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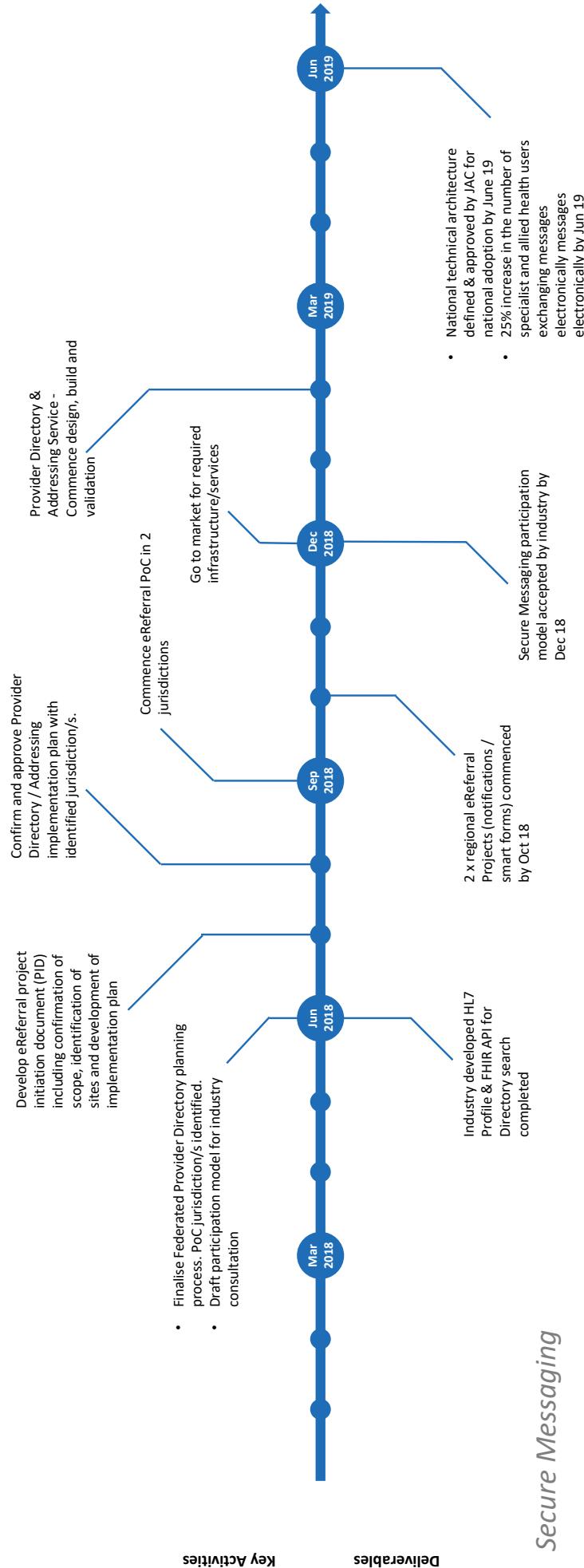


Secure Messaging

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Overview

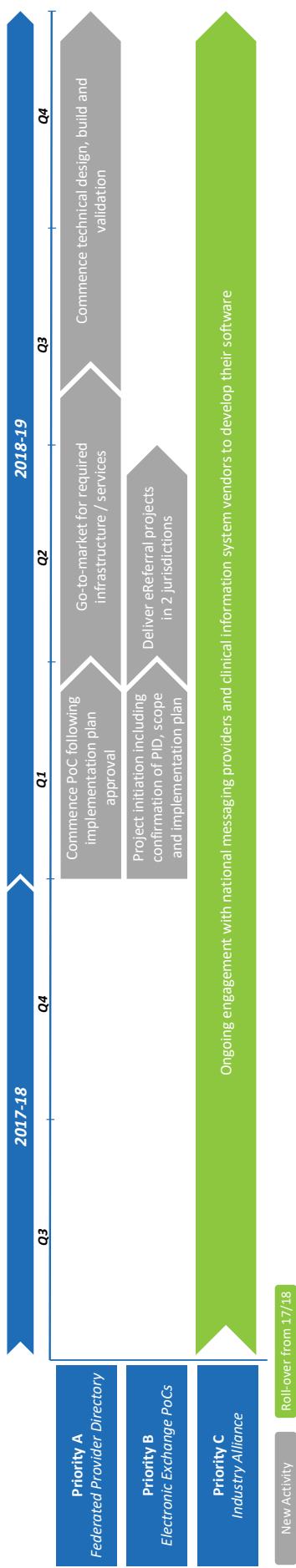
The Secure Messaging Program will deliver a trustworthy, seamless process for a message to flow securely from one provider to another; irrespective of the technology platform they are using, the organisation they work for, or the provider they are communicating with. It will enable health and care providers across primary, community, secondary care, aged care, and ancillary services to easily find each other and securely exchange clinical information. The outcome will see increased use of electronic messages and a reduction in the use of fax machines and postal services.



Secure Messaging



Key Activities



Outcome Measures

- Secure Messaging participation model formally accepted by industry by Dec 18
- National technical architecture defined & approved by JAC for national adoption by June 19
- 2 x regional projects commenced by Oct 18
- 25% increase in the number of specialist and allied health users exchanging messages electronically messages electronically by Jun 19

Framework For Action Alignment

- 2.1.1. National Provider Addressing Service
- 2.1.2. Standards based secure messaging capability
- 2.1.3. Nationally coordinated programs
- 2.1.4. Roadmap for leveraging national infrastructure

Risks & Dependencies

- Loss of industry confidence: Erosion of industry and stakeholder confidence if momentum to deliver is not achieved early in the program and maintained.
- Lack of vendor buy in and agreement: Secure Messaging, CIS / EMR Vendors may not buy into the direction proposed for SM capabilities as a collective. Changes will be required across vendor software and competing priorities and commercial drivers may influence vendors willingness to adopt recommended approaches.
- Provider Directory Addressing Services – clarity of scope, agreement of understanding etc. There are differing views across stakeholders and industry about the scope of the directory service and the capabilities it should deliver. This raises the risk of not meeting stakeholder and industry expectations for the service.
- Targeted NASH improvements not completed on time, or change in scope: The management of certificates is a key issue for SM and industry is looking for advice on whether to use NASH or if the use of commercial certs will be supported. Agency has plans to fix the current problems with NASH, there is a risk not all identified problem will be fixed and completed on time May 18.
- Availability of skilled / dedicated resources: Availability of appropriately skilled technical and product resources, who are dedicated to developing and delivering SM work products. The MyHR program may potentially distract and redirect resources from SM.





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Digitally Enabled New Models of Care

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Summary

The National Digital Health Strategy identifies seven key priority outcomes by 2022. Digitally enable models of care that drive improved accessibility, quality, safety and efficiency will be a by-product of a new digital health ecosystem that enables collaboration, information exchange and informed decision making at point of care. Previously known as Research and Development under the 2017–18 FY workplan, the following initiatives are continued into 2018–19 FY. In the future, new models of care will form real life test beds and will be continuously funded to demonstrate how digital enablement is contributing to and benefiting people. The Agency is currently in the market to identify the next opportunities to deliver tangible benefits using My Health records and the benefit identified within the National Digital Health Strategy.

FY18/19 Program Priorities	Budget Requested
Model of Care 1: Children's Health Collaborative Design and Proof of Concepts (NSW Lead) <i>National scaling of Child Development Record and Pregnancy record</i>	\$5.0m \$3.7m Cth funding provided
Model of Care 2: End of Life Care (Vic & WA)	\$0.5m
Model of Care 3: Test beds	TBD
Total	\$6.0m +

Note: Detailed project plans and budgets to be provided to trigger release of funding





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