

# Corporate Plan

2020 > 2021

# **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, 2020–21 to 2023–24, 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.

It should be noted that the description of Agency key activities and performance information is focused on 2020-22, reflecting an intergovernmental agreement between the Commonwealth of Australia and the States and Territories to continue and improve the operation of digital health until 30 June 2022.

# **Australian Digital Health Agency**

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# **Acknowledgements**

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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.<sup>1</sup>

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.

# 1.2 Our role

The Australian Digital Health Agency (the Agency) has responsibility for the strategic management and governance of the National Digital Health Strategy and the design, delivery and operations of the national digital healthcare system, including the My Health Record system.

The Agency provides the leadership, coordination and delivery of a collaborative and innovative approach to utilising technology to support and enhance a clinically safe and connected

national health system. This will give individuals more control of their health and their health information, and support healthcare professionals to provide informed health care through access to current clinical and treatment information.<sup>2</sup>

# 1.3 Our functions

To fulfil its purpose and role, the Agency's enabling legislation<sup>3</sup> describes a number of activities<sup>4</sup> to be undertaken, namely, 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;
- 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;

- 1 Health Portfolio Budget Statements 2019–20 p. 182
- 2 Health Portfolio Budget Statements 2019–20 p. 174
- 3 Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016
- This is a non-exhaustive list of the Agency's activities. Section 9 of the Agency's establishing legislation clarifies that the Agency's work can extend to "anything incidental or conducive to the performance of any of the above functions."

- 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.

All major Agency initiatives are codesigned with representatives across the user spectrum — clinicians, consumers, developers and jurisdictions — so that all voices are heard in the design process.

In June 2020, the Agency consolidated its purpose, role and functions into a simple strategic statement, as shown in Figure 1.

# Strategic Statement

# Vision

A healthier future for Australians through connected healthcare.



# Mission

To create a collaborative environment to accelerate adoption and use of innovative digital services and technologies.

# Strategic Objectives



- Provide intuitive, seamless, secure and accessible national digital health services that add value and benefit.
- Empower people to be active participants in the digital health environment.
- Advance governance, drive collaboration and promote conformance with standards to increase trust in digital health services.
- Build capability, engagement and innovation in the health system.
- Enable our people to operate as a high performing team and to the highest standards.

Figure 1: Australian Digital Health Agency Strategic Statement

A priority for 2020-21 will be to align the Agency's activities to this strategic vision, and this is likely to prompt refinements to, and a revision of, the plan published in August 2020. A new CEO, to be appointed in the coming months, will lead this important work.

# 1.4 Our activities

# From strategy to implementation

In 2020–21, the Agency will prioritise the implementation of the third year of *Australia's National Digital Health Strategy – Safe, Seamless and Secure: evolving health and care to meet the needs of modern Australia*<sup>5</sup> – approved by Australia's Health Ministers on 4 August 2017.

The strategy articulates the need for a coordinated approach to the delivery of digital health within Australia, and identifies seven strategic priority outcomes to be delivered by 2022:

- 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.<sup>6</sup>

The vision described in the National Digital Health Strategy is complemented by the Framework for Action, which describes the implementation of digital health activities across Australia by state and federal government, private industry, and other stakeholders from the present day through to 2022.

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 ecosystem 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.

# **Key activities**

Priority activities described in the Framework for Action and in the Agency's work plan for 2020-22 attached in the Appendix include:

- Designing and calling tenders for the next generation of Australia's national health infrastructure managed or operated by the Agency;
- Advancing the interoperability of clinical systems across multiple fronts;
- Supporting the widespread implementation of electronic prescribing across general practices and community pharmacies;
- Establishing multiple Communities of Excellence that showcase practical implementations of community-wide integrated digital health solutions;
- Developing and implementing the National Digital Health Workforce and Education Roadmap;
- Enhancing support for registration and meaningful use of My Health Record in the specialist sector and residential aged care facilities;

<sup>5 &</sup>lt;u>Australia's National Digital Health Strategy</u>

<sup>6</sup> Health Portfolio Budget Statements 2019–20

- Expanding use of the Service Registration Assistant to streamline practice administration; and
- Helping ensure that more complete patient health information is available at the point of care.

# 1.5 Our capability

# **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.

# **People**

The Agency's people are the primary enablers of organisational performance. Staff have backgrounds and skills in healthcare, health informatics, management and information technology, and 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 change across the health sector.

# **Workforce planning**

The Agency's work requires access to a range of specialist technical skills in addition to a range of core enabling skills. The focus is on ensuring that capability and resources are coordinated and balanced, both now and in the future.

Workforce planning assists the Agency to proactively manage its workforce requirements - its workforce size, structure and capabilities and average staffing level (ASL) - within the constraints of the Agency's employment framework, while ensuring the Agency remains responsive to Government and community expectations and technologically driven disruptions in healthcare delivery. The Agency's ASL includes both a traditional public sector workforce and common law employees. The Agency tests and revises the workforce plan annually through a series of scenarios to identify any gaps between current and future workforce needs, and to mitigate the risk of loss of technical expertise. To further this important work, the Agency is implementing a strategic workforce plan, which identifies constraints and challenges facing the Agency and what we need to do to ensure the workforce has capability to address them.

# 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.



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



These values have been embedded in a behaviours framework to support the values in action, in both policies and practice. Strategies to address workforce risks and challenges, and deliver benefits for our stakeholders, are addressed further in Section 4

### **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 offer a range of expertise and insights, as well as ambition for the future of digital healthcare. The addition of new members throughout 2019 and 2020 presented an opportunity for a fresh perspective and brings new experience and enthusiasm to the Board.

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 four advisory committees established under the Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016.

# **Continuous improvement**

In November 2019, the Australian National Audit Office (ANAO) released its findings on the effectiveness of the Agency's implementation of the national expansion of the My Health Record system, including an examination of whether the system promotes the achievement of its purposes, system risks are appropriately assessed, managed and monitored, and whether monitoring and evaluation arrangements are effective. The ANAO concluded that the implementation was largely effective, and that planning, governance and communication was appropriate. It suggested that the Agency take the lead on supporting the health sector to continue to improve in digital health matters. As such, the Agency is working with commonwealth entities, state and territory governments, healthcare providers, the technology industry and consumer groups to implement the recommendations of the report through improvements in management of shared privacy risks, enacting maturity of security controls in a phased way and a focus on compliance.

# 2 Operating environment

# 2.1 Australia's health landscape

On the whole, Australia's health compares well with other OECD countries. Overall life expectancy is the sixth highest among OECD countries, the entire population has health insurance, and tobacco consumption is well below the OECD average.

Despite these laudable results, the Australian health system faces significant challenges. Cancer incidence is the second highest among OECD countries, 63% of Australians are overweight or obese, and a number of populations experience notable health disadvantages. Australia's ageing population represents another challenge (one shared with many countries globally), which has implications for both workforce availability and rates of chronic disease in coming years.

In this environment, the digital health reforms that the Agency initiated and continues to oversee are being evaluated to ensure a significant role in helping to meet the present-day and emerging needs of Australian health and care. In particular, the COVID-19 pandemic has highlighted the critical role of digital health technologies in connecting people to healthcare providers and services.

# **Contribution of digital health**

Australia's existing investment in digital health is yielding dividends as it supports the rapid introduction of revised clinical workflows and the development of further innovation across the sector.

# My Health Record

My Health Record is proving itself to be increasingly valuable to practising clinicians as health data accumulates from multiple sources and user interface innovations such as the Medicines View<sup>7</sup> simplify the task of summarising patient information. As of the end of June 2020, there are 22.78 million My Health Records, of which 85% include data.<sup>8</sup> More than two billion documents have been uploaded to the My Health Record system, 220 million of which have been uploaded by consumers or healthcare providers.

As clinical workflows were disrupted by the imposition of social distancing measures, the convenience and efficiency of My Health Record has proven to be increasingly attractive to practising clinicians. In April 2020 alone, healthcare providers viewed nearly 65,000 documents that were uploaded by someone else – an increase of 280% compared with the same period in 2019.

The strategic priorities planned for My Health Record will build on these successes by increasing uptake in aged care and among specialist communities, while further enhancing content and driving clinical use (see the work plan in the Appendix for details).

<sup>7</sup> https://www.mvhealthrecord.gov.au/for-healthcare-professionals/howtos/medicines-information-view

<sup>8</sup> The information in this section was sourced from <a href="https://www.myhealthrecord.gov.au/statistics">https://www.myhealthrecord.gov.au/statistics</a>, a regularly updated resource.

"We rely on My Health Record to keep us updated on patient pathology, imaging, medication, dispensing and history records. We can see what other doctors have requested and performed, overcoming the delays waiting for records requested from other practices. We can also see what scripts were dispensed. This helped us a lot with the recent COVID-19 test results, where it was quicker to see the result on the patient's My Health Record than to join the phone queue to get the result."

Dr Yolande Knight, Senior Medical Officer,
 Wirraka Maya Health Service Aboriginal Corporation

# Electronic prescriptions

Electronic prescriptions, a joint initiative of the Department of Health<sup>9</sup> and the Agency<sup>10</sup>, was accelerated in response to the COVID-19 pandemic, with the first electronic prescription dispensed in May 2020.<sup>11</sup> This important reform was made possible by focused collaboration between jurisdictions, the pharmaceutical sector, and clinical software developers, which will enhance medicines safety and enable greater compliance with social distancing than otherwise possible.<sup>12</sup>

# Telehealth

The remote delivery of healthcare is an important capability of the healthcare system, especially during a pandemic. With enhanced federal government support<sup>13</sup>, telehealth consultations have expanded dramatically, enabling adherence to social distancing provisions without sacrificing healthcare delivery.<sup>14</sup>

# SNOMED CT-AU

Clinical terminologies are important enablers of safety and interoperability by providing precise common languages that disparate clinical systems can use to identify health concepts. The emergence of the novel coronavirus required a new set of clinical concepts to enable formal identification of COVID-19 in Australian clinical systems.

Australia's National Clinical Terminology Service and its international partner organisations were especially proactive in developing, testing and releasing new COVID-19 clinical concepts in February 2020<sup>15</sup>, well before a global pandemic was declared internationally and domestically.

- 9 https://www.health.nsw.gov.au/pharmaceutical/Pages/electronic-prescribing.aspx
- $10 \qquad \underline{\text{https://www.digitalhealth.gov.au/get-started-with-digital-health/electronic-prescriptions}}$
- 11 https://www.australianpharmacist.com.au/first-e-prescription-dispensed/
- 12 <a href="https://www.digitalhealth.gov.au/news-and-events/news/media-release-technology-delivers-social-distancing-for-health-care-in-fight-against-covid-19">https://www.digitalhealth.gov.au/news-and-events/news/media-release-technology-delivers-social-distancing-for-health-care-in-fight-against-covid-19</a>
- 13 https://www.health.gov.au/ministers/the-hon-greg-hunt-mp/media/australians-embrace-telehealth-to-save-lives-during-covid-19
- 14 Centre for Online Health, The University of Queensland. Telehealth and coronavirus: Medicare Benefits Schedule (MBS) activity in Australia. https://coh.centre.uq.edu.au/telehealth-and-coronavirus-medicare-benefits-schedule-mbs-activity-australia. Published May 19, 2020.
- 15 https://www.digitalhealth.gov.au/news-and-events/news/media-release-snomed-ct-au-release-new-coronavirus-concepts-now-available

### Innovation

To further support the national COVID-19 response, the Agency ran an Innovation Challenge to champion digital health innovation across Australia – at a time when the use of technology in health and social care has never been more important. The winners of the Innovation Challenge were determined through a competitive process along three themes: digital clinical care; digital social care and digital health population management; and future preparedness. The Agency will collaborate closely with the successful applicants to assist them in co-designing their solution and plan for national scaling, and provide a healthier future for Australians through connected healthcare.

# Service Registration Assistant

This tool, currently being trialled in northern NSW, streamlines the maintenance of healthcare service and practitioner information by automatically distributing updates to authorised users. Initial results are showing significant improvements in communications between providers<sup>16</sup>, saving valuable time and reducing the risk of losing vital patient information.

# 2.2 Challenges and opportunities

Despite the attention (rightly) given to Australia's pandemic response, it bears repeating that COVID-19 is not expected to figure in the top 20 causes of death in Australia, based on current trends. The overall health of Australians compares very well to other OECD countries, as shown in selected health indicators presented below.<sup>17</sup>

Table 1: Positive health indicators

	Australia	OECD average
Life expectancy (years)	82.6	80.7
Deaths due to air pollution (per 100,000 people)	16.8	39.6
Diabetes prevalence (% of adults)	5.1	6.4
Daily smokers (% of adults)	12.4	18.0
Alcohol consumption (litres per capita)	9.4	8.9
Overweight (% of population with 25+BMI)	65.2	55.6

 $<sup>16 \</sup>qquad https://www.healthcareit.com.au/article/adha%E2%80\%99s-service-registration-assistant-helps-keep-patient-information-date (and the context of the con$ 

<sup>17</sup> Content from the following tables is drawn from the *OECD Health at a Glance 2019* report: <a href="https://www.oecd-ilibrary.org/sites/4dd50c09-en/1/3/1/">https://www.oecd-ilibrary.org/sites/4dd50c09-en/1/3/1/</a> index.html?itemId=/content/publication/4dd50c09-en&\_csp\_=82587932df7c06a6a3f9dab95304095d&itemIGO=oecd&itemContentType=book

Other systemic challenges include the health disadvantages experienced by specific cohorts such as indigenous populations, the socioeconomically disadvantaged, rural and remote populations, people with disabilities, and prisoners. <sup>18</sup> Australia's ageing population represents another challenge (one shared with many countries globally), which has implications for both workforce availability and rates of chronic disease in coming years. <sup>19,20</sup>

In this environment, reforms are focused on the use of technology in evolving health and care to meet the needs of modern Australia. The economic benefits of these reforms also bear mentioning, both in respect to maintaining Australia's low rate of DALYs<sup>21</sup> and in the opportunity to foster a vibrant local industry to develop and deliver innovative digital health services.<sup>22</sup>

# **Embracing the digital future**

The previous corporate plan<sup>23</sup> acknowledged the increasing awareness of digital health technologies, and recognition of their relevance, among clinicians and consumers. It noted that loss of faith in digital health services remained an ongoing consideration.

The change in delivery of healthcare in response to COVID-19 has resulted in a positive attitudinal change towards the value of technology, from both consumers and providers. Research conducted by the Agency in April 2020<sup>24</sup> showed:

- Both providers and consumers are now more open to using digital technology in healthcare, and can see the importance of technology to improve health outcomes.
- 90% of specialists are now open to using more technology when caring for their patients, including using apps and online selfservice.
- Healthcare practitioners want to receive training in digital health services.
- Consumers are now more aware of telehealth and remote healthcare, with the majority of people surveyed saying that they can get access to healthcare services when they need them.
- There are still some gaps in people's knowledge about the availability of personal health information digitally, and some concerns that their healthcare providers may not use technology in the best possible way.

The research also showed that the technology available may not be ideal for everyone and not all healthcare providers want to use it. The Agency will continue to work with the health tech sector to improve the experience for healthcare professionals and the connection of their systems across the health sector. This includes improving specialists' adoption of technology – including the My Health Record – by working with the software companies in this market, developing education and training material and working with peak associations to develop professional development programs.

<sup>18</sup> AIHW, All is not equal

<sup>19</sup> AIHW, Older Australia at a glance

<sup>20</sup> AIHW, Burden of disease

<sup>21</sup> DALY = disability-adjusted life year. Australia recorded the fourth lowest rate of DALYs among OECD countries in a 2016 study.

See, for example, the Agency's Innovation Challenge, announced in May 2020: <a href="https://www.digitalhealth.gov.au/news-and-events/news/future-proofing-australia-s-healthcare-government-launches-a-nation-wide-innovation-challenge">https://www.digitalhealth.gov.au/news-and-events/news/future-proofing-australia-s-healthcare-government-launches-a-nation-wide-innovation-challenge</a>

<sup>23</sup> See section 2.3.2, https://www.digitalhealth.gov.au/about-the-agency/corporate-plan/ADHA\_Corporate\_Plan\_2019-2020.pdf

<sup>24</sup> https://www.digitalhealth.gov.au/news-and-events/news/media-release-medical-profession-and-the-community-embracing-technology-and-digital-health.

The clinical and consumer usage of My Health Record is continuously tracked, and components published in an attractive, user-friendly format on the My Health Record statistics page. These figures show a steady growth in meaningful use by clinicians and consumers in a growing range of contexts.

It is important to note that this growth in awareness and meaningful use of the My Health Record has taken time to cultivate, and we could reasonably expect that similar efforts will be required for other digital health initiatives such as electronic prescriptions; however, latent consumer demand suggests that this may not be the case given the utility derived from the initiative.

### 2.3 Cooperation

# **Consultation and collaboration are** embedded throughout the design process

The Agency places all customers at the heart of service and product design through a co-design process that ensures engagement through all stages of the design and development process. Ongoing feedback and insights sourced from consumers and clinicians inform pain-points and opportunities for improvements to existing products. Co-design occurs through customer collaboration to explore future design solutions, engagement to validate direction, and rigorous

user-testing to assure development in the release process.

Furthermore, we maintain close working relationships with key stakeholder bodies encompassing government, industry, clinicians, consumer representatives and research institutions. All of the Agency's major initiatives have widespread consultation to ensure that the solutions that emerge align with the needs and values of the people we serve.

Figure 2 provides a high-level summary of our major relationships.

# **International relationships**

The Agency's drive to consult and collaborate is not limited by our national borders. To take advantage of the potential benefits of international collaboration in digital health, the Agency established the Global Digital Health Partnership<sup>25</sup>; an international forum that 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 organisation has steadily grown since its inaugural meeting held in Australia in February 2018, with delegations from the World Health Organization and over 30 countries and territories now participating.

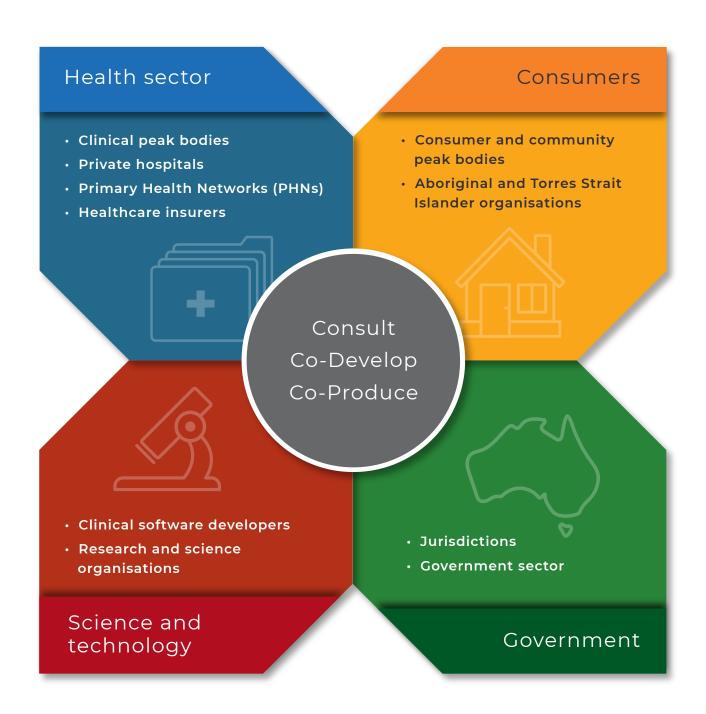


Figure 2: Strategic relationships infographic

# 3 Performance

# 3.1 Overview

The Agency's performance will be driven by and assessed against the seven strategic priorities outlined in the National Digital Health Strategy, the associated Framework for Action, and the yearly work program that underpin its implementation.

The Agency Board approved the 2020-22 work plan for the Agency with a number of programs and projects that support those strategic priorities (see Figure 3 on page 20). It will be submitted to the Australian Health Ministers' Council for endorsement

Performance information has been crafted for each of the seven strategic priorities to allow Parliament and the public to judge our success, year by year, over the life of the corporate plan.

Targets in the following sections are provided up to 30 June 2022, consistent with the approach taken in the Agency's chapter in the 2020-21 Health Portfolio Budget Statements. This reflects

the fact that the Australian and state/territory governments have agreed to continue and improve the operation of digital health until 30 June 2022.

In furtherance of new legislative requirements introduced in February 2020<sup>26</sup> aimed at lifting the quality of performance information, the Agency has documented how each annual target ties to the Agency's purpose, its classification (quantitative or qualitative), the rationale for that classification and the method, source and frequency of measurement. Consistent with the legislature's intent, the broader measures underpinning each annual target are framed in terms of outputs (what's produced) or outcomes (what's achieved) and identify the beneficiaries of each measure. Over the course of 2020-21, the Agency will give consideration to extending the mix of measures by identifying key activities that lend themselves to efficiency measurement.

# 3.2 Strategic priority 1 target - My Health Record

Health information that is available whenever and wherever it is needed

My Health Record system operability, availability and usage is maintained or improved for the benefit of Australians and the Australian healthcare system.

2020-21 target	2021-22 target
Maintain My Health Record software, hardware and storage currency.	Maintain My Health Record software, hardware and storage currency.
Maintain My Health Record system availability of at least 99%, excluding planned outages.	Maintain My Health Record system availability of at least 99%, excluding planned outages.
Maintain or increase the percentage of healthcare provider organisation registrations and usage of the My Health Record across clinical settings.	Maintain or increase the percentage of healthcare provider organisation registrations and usage of the My Health Record across clinical settings.

# 3.3 Strategic priority 2 target - Secure messaging

Health information that can be exchanged securely

All supported patient data is exchanged securely between healthcare providers.

2020-21 target	2021-22 target
Enhance secure messaging software capability across the health landscape.  Develop the business case for the Service Registration Assistant, a national capability that will streamline the process for healthcare providers to register and maintain details about their healthcare service and practitioners with any external service providers and government programs with whom they have a relationship.	80% of secure messaging software vendors are conformant with secure messaging standards and are releasing enhanced software.  Scale implementation of the Service Registration Assistant.

# 3.4 Strategic priority 3 target – Interoperability and data quality

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

Progress towards delivering high-quality healthcare data, with a commonly understood meaning, that can be used with confidence to exchange clinical information between healthcare providers, and the systems they use, to improve the quality of patient care.

2020-21 target	2021-22 target
Develop a National Health Interoperability Implementation Plan for consultation and approval by all jurisdictions.	Commence roll-out of an approved National Health Interoperability Implementation Plan.

# 3.5 Strategic priority 4 target – Medicines safety

Better availability and access to prescriptions and medicines information

Better availability and access to prescriptions and medicines information for Australians.

2020-21 target	2021-22 target
500,000 PBS prescriptions are prescribed as electronic prescriptions.	3,000,000 PBS prescriptions are prescribed as electronic prescriptions.
30 healthcare software systems are conformant for electronic prescribing and exchanging e-scripts.	45 healthcare software systems are conformant for electronic prescribing and exchanging e-scripts.

# 3.6 Strategic priority 5 target – Enhanced models of care

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

Models of care are enhanced through digital health, improving accessibility, quality, safety and efficiency for the benefit of consumers and the health system.

2020-21 target	2021-22 target
Increase the usage of electronic prescriptions and telehealth within the Communities of Excellence as demonstrated by case studies.	Increase the usage of electronic prescriptions and telehealth within the Communities of Excellence as demonstrated by case studies.
Increase the usage of Advance Care Planning documents in the My Health Record system by 50% compared with 2019-20.	Increase the usage of Advance Care Planning documents in the My Health Record system by 90% compared with 2020-21.

# 3.7 Strategic priority 6 target - Workforce and education

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

Healthcare professionals are using digital health technologies more confidently to improve the quality and safety of patient care.

2020-21 target	2021-22 target
Increase the confidence of nurses, midwives, cardiologists and surgeons in using digital health technologies as demonstrated by a case study.	Increase the confidence of nurses, midwives, cardiologists and surgeons in using digital health technologies as demonstrated by a case study.

# 3.8 Strategic priority 7 target – Driving innovation

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.

2020-21 target	2021-22 target
Progress three innovation initiatives as demonstrated by case studies.	Progress three innovation initiatives as demonstrated by case studies.

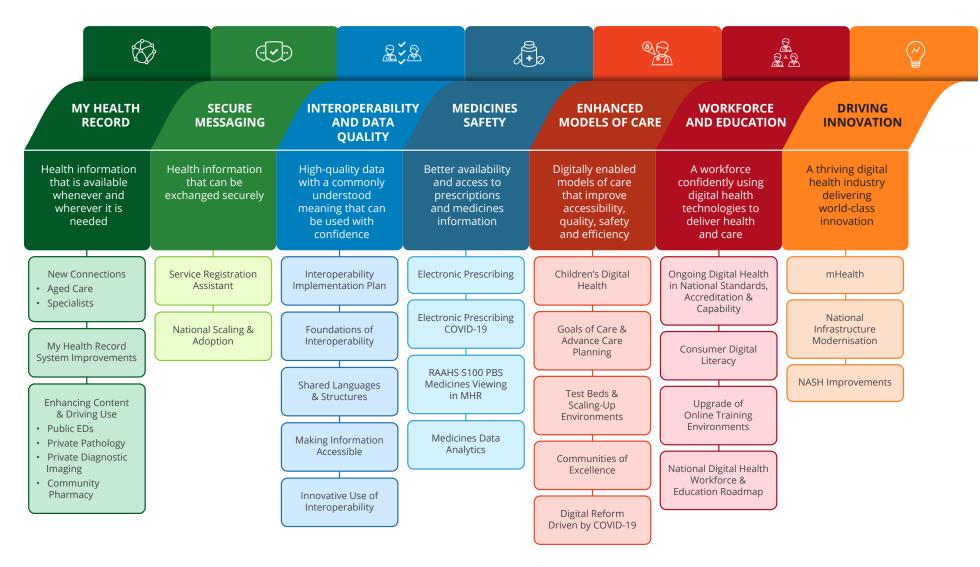


Figure 3: Australian Digital Health Agency 2020–22 work plan

# 4 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 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 Risk Management Strategy, Framework and Policy complies with the Commonwealth Risk Management Policy and supports the requirements of Section 16 of the PGPA Act 2013.

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

# Failure to deliver strategic objectives and appropriately manage Commonwealth resources impacting stakeholder confidence and further funding of the Agency.

Absence of stakeholder viewpoints in Agency solutions (product, training, information, support, engagement).

Failure to maintain confidentiality, integrity and availability of national infrastructure within forecast commercial arrangements.

# Measures to control risk

Perform continuous improvement reviews, reporting and oversight of significant policies, frameworks and processes. This includes Accountable Authority Instructions and delegations, the budgetary control framework, business operation rules for system controls with service providers and independent internal and external audit validation processes.

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.

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.

Strategic risk	Measures to control risk
Failure to establish and maintain an Agency culture that supports employees and the achievement of Agency strategic objectives.	Continue policy review and updates, as per the legislative compliance program, as well as workforce planning development and implementation. Continue Agency Engagement Census benchmarking activities, analysis and response.
Inability to manage the expectations of stakeholders.	Ongoing monitoring and improvement 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 work plan priorities and Framework for Action for implementation of the four-year National Digital Health Strategy.
National Digital Health Strategy poorly coordinated.	Deliver a superior stakeholder engagement program to ensure stakeholders understand how the Agency is supporting their priorities. This will be generated through National Digital Health Strategy work plan implementation updates, benefits reporting and due diligence on project planning.
Failure to develop, implement and operate comprehensive and effective clinical governance.	Maintain and oversee consistent review and alignment to enhance clinical safety and assurance. This is through regular review of specific frameworks, committee work, awareness campaigns and programs.
Agency unable to deliver key strategic objectives or business-as-usual activities.	A range of controls across governance, human resource, workplace health and safety, facilities, security, finance, communications and information technology facilitating operating environment transitions over the course of the pandemic response.
Ineffective Agency contribution to COVID-19 national response.	Measures designed to ensure support for national responses to the COVID-19 pandemic, including accelerating key existing and new digital health initiatives and support for shared risk owners in the health sector.

Note: The last two shaded items on the above table are new additions to the Agency's log of strategic risks, developed in response to the COVID-19 pandemic.

During 2020-21, the Agency will continue to refine and enhance its overarching risk structures, and continue to improve staff capabilities to assess and manage risks.

# Appendix: Agency work plan





Australian Digital Health Agency

# AUSTRALIAN DIGITAL HEALTH AGENCY WORK PLAN

2020-2022

Version 2.0 1 July 2020

# **SECTION 1: Introduction & Overview**



# **Background**

In August 2017, the COAG Health Council approved the *National Digital Health Strategy 2018-2022* (the Strategy) and high-level 4-year Work Plan. The FY18-19 was the first year of the approved plan.

The planning process supported the development of the Agency's Commonwealth funding submission and the approved IGA with Jurisdictions.

The Australian Digital Health Agency Work Plan is funded by:



### **Australian Government**









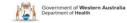






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# **Planning Framework**

The Agency has developed a planning framework to provide context to the various strategy and planning documents that support the delivery of the National Digital Health Strategy and its anticipated benefits.

The planning framework recognises the role of the Agency in the context of the overall 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.



Stakeholder Engagement Framework Benefits Realisation Framework Service Design, Prioritisation & Delivery Framework

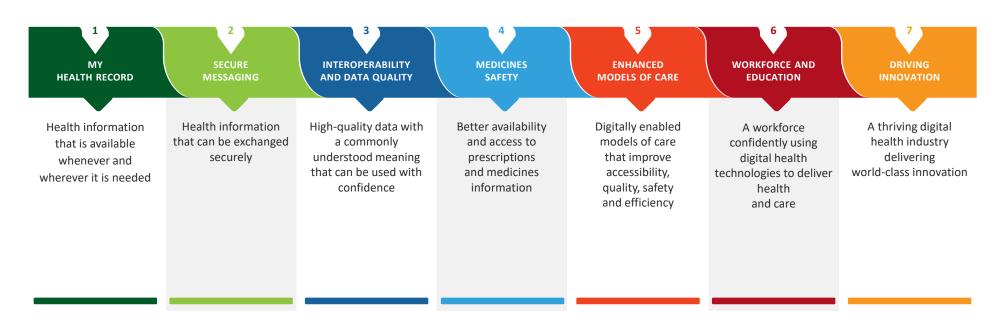
Framework for Action

Integrated Business Planning & Budgeting Strategy

Australia's National Digital Health Strategy



# **National Digital Health Strategy – Key Priorities**



Co-designed with all states and territories and agreed by COAG Health Council



# **Strategy into Action**



# Strategy

Future State Vision - the What & Why

5

# **Priority Actions**

Implementation –
Prioritising the actions
across the health landscape

# Work Plan

Effectively the Agency's
Operational Plan – incorporating
COAG strategic priorities and
divisional plans

# Implementation



# **Guiding Principles**

The following principles have guided the development of the Agency Work Plan. They have assisted with informing prioritisation and alignment of activities.



Increasing use of digital technology in clinical practice



**Realising benefits** 



**Strengthening our customer focus** 



Ensuring every jurisdiction has a priority project



Delivering on the vision set out in the National Digital Health Strategy



Maintaining safe, quality and seamless national digital health services



Support Australia's response to COVID-19 through creating capacity and driving innovation



# **Development Schematic**

# **Guiding Artefacts**

- Australia's National Digital Health Strategy & Four Year Work Plan
- Digital Health Framework for Action
- ADHA Benefits Framework
- AHMAC National Health Priority Areas
- Leading Causes of Death (AIHW)
- National Health Reform Agreement
- Australia's Health 2018 (AIHW)
- National Strategic Framework for Chronic Conditions (Cwlth DoH)

# Consultation / Engagement NORTHERN FERTIORY Pharmaceutical Society of Australia Queensland Government France Royal Australias Royal Australias Royal Australias AMA Tasmania France Royal Australias Royal Austral

# PLAN PLAN

- Kick-off with key Agency stakeholders
- Collect baseline information from available documents and data sources
- Conduct review to confirm initiatives / workstreams continuing into 2020-22

# DEVELOP

- Engage relevant external stakeholders to identify priorities
- Workshop with jurisdictions & peaks
- Identify clinical use cases for priority
- Reconciliation of priority deliverables against the NDHS and FFA

# **REFINE**

- Consolidate, evaluate and shortlist initiatives for Board consideration
- High-level costing of Work Plan

Consumers

Clinicians

### ELT / JAC / Board / AHMAC / COAG approval

**FINALISE** 

- Work Plan refreshed following federal budget
- Delivery work packages & commissioning contracts executed



Work Plan finalised and published



ACTIVITIES

Validate continuing work streams for 2020-22

Document priorities for delivery partnership / PoC for consideration

Work Plan drafted and costed



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# **Benefits Realisation**

Benefits measurement and management is used to inform investment decisions and operational plans, designed to ensure the desired benefits are realised. It is the Agency's intent to ensure strong alignment between the benefits framework, strategic priorities, associated strategic programs and performance monitoring, reporting and accountability.

Individual strategic programs will develop specific benefits realisation plans that seek to focus activity and maintain relevance to the Australian health system, healthcare providers, patients and their carers.

This approach builds upon previous benefits modelling associated with the My Health Record system and provides a more holistic and relevant approach for the breadth of ADHA strategic priorities.

Ten benefits have been identified, which may be grouped under four broad categories:



 Better health outcomes through safer prescribing of medicines



 Better health outcomes through continuity of care



Better health outcomes through coordination of care



Better health outcomes from patient self-management



5. Improved data quality, access and utility



6. Improved efficiency of health care service delivery



7. Reduction in administration and processing costs



costs

8. Reduction 9. in IT systems' operating



Improved patient patient experience 10. Improved patient outcomes

SAFETY

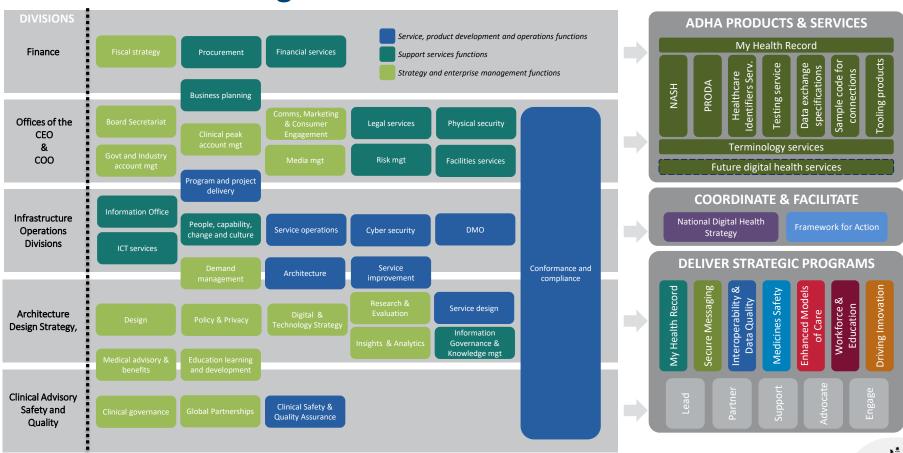
QUALITY

**EFFICIENCY** 

PATIENT



# **ADHA Functional Alignment**





# **Strategic Priorities 2020-22**

### SECURE INTEROPERABILITY MY HEALTH **MEDICINES ENHANCED WORKFORCE &** DRIVING **RECORD MESSAGING** & DATA QUALITY **SAFETY MODELS OF CARE EDUCATION INNOVATION** Ongoing Digital Health in Interoperability **New Connections** Service Registration Assistant Electronic Prescribing Children's Digital Health National Standards, mHealth Implementation Plan Aged Care Accreditation & Capability Specialists **Electronic Prescribing** Goals of Care & National Infrastructure National Scaling & Adoption Foundations of Interoperability Consumer Digital Literacy COVID-19 Advance Care Planning Modernisation My Health Record System Improvements RAAHS S100 PBS Test Beds & Upgrade of Online Training Shared Languages & Structures **NASH Improvements** Medicines Viewing in MHR Scaling-Up Environments Environments **Enhancing Content** & Driving Use National Digital Health Medicines Data Making Information Accessible Communities of Excellence Workforce & Education Analytics Private Pathology Roadmap Private Diagnostic Imaging Community Pharmacy Innovative Use of Digital Reform Interoperability Driven by COVID-19

### **BUSINESS PRIORITIES**

ANAO MHR Performance Audit

— Implementation of
Recommendations

Financial Management Maturity Uplift Benefits Framework & Measurement (All Pillars)

Strategic Aspirations & Workforce Strategy & Culture

Information Governance & Knowledge Management

National Digital Health Strategy Monitoring & Development

### **NATIONAL HEALTH INFRASTRUCTURE SUPPORT**

Foundation Systems & Support (Incl. National Infrastructure Roadmap)

Data Management, Informatics, Benefits & Research Service Quality & Safety (Incl. Clinical Engagement, Education, Communication & Awareness)

Corporate Services & Business Enabling



# **SECTION 2: Strategic Priorities**

Overview and Key Activities



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# **My Health Record**



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# My Health Record

# Health information that is available whenever and wherever it is needed

With My Health Record now established as a foundational component of Australia's national digital health services – connecting key parts of the health system such as general practices, pharmacies, private and public hospitals, specialists and allied health professionals – the opportunity exists to further enhance healthcare provider participation and clinical utility, to deliver additional benefits to the healthcare system.

Along with ongoing enhancements and releases to the My Health Record system, the establishment of the Connecting Care Program will focus on driving increased connection and usage across the health landscape, to deliver tangible benefits to patients and providers.









# My Health Record

# **Benefits & Customer Value**

2020 - 2022

### Activities

- > Accelerating use of MHR in
- Enable Residential Aged Care Facilities to connect, upload and view MHR
- MHR registration and connection support for specialists in private practice
- Enhance content and drive use
- MHR Releases to support new connection and use projects
- Embed use of MHR Mental Health Toolkit, National MHR Advance Care Planning Guidelines and ED Clinician's Guide to MHR

### Outputs

- > 90% of public EDs viewing MHR across Australia
- > Register and connect 60% of RACFs across Australia to
- RACFs uploading Advance Care Planning documents on behalf of residents
- > 80% of Community pharmacies, private and public pathology labs, private and public diagnostic imaging sites uploading core content to MHR
- > 50% increase in viewing by healthcare practitioners
- > 50% increase in viewing by healthcare consumers
- > Ongoing improvements to enhance system functionality and performance

### **Impact Goals**

Increase the comprehensiveness, quality and accessibility of consumer health information available across the care continuum

### **Benefits Categories**









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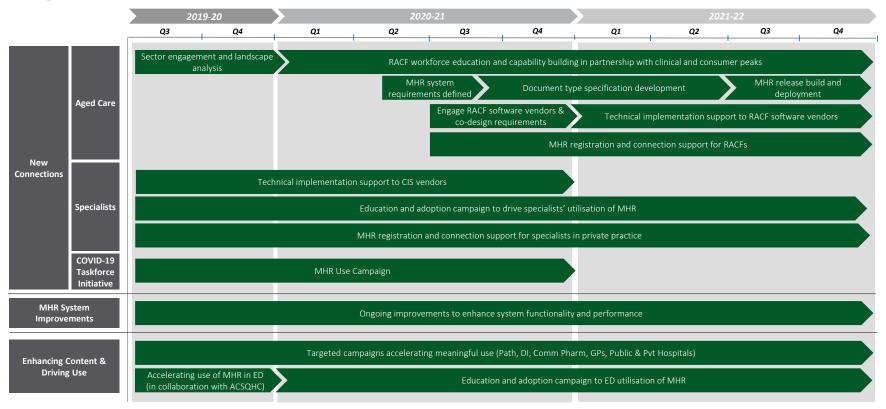
### By 2022:

The benefits for Australians and the Australian healthcare system are:

- ✓ Lives and money will be saved, with safer medicines management, coordinated care and informed treatment decisions.
- ✓ There will be a more efficient health system (e.g. less time searching for patient data, reduced avoidable hospitalisations and tests).
- ✓ Patients will be put at the centre of their healthcare, so they can take greater responsibility for their own health.
- ✓ Data analytics will enable innovation and health service planning that will lead to more sustainable resourcing and new evidence-based clinical approaches.
- ✓ Fewer adverse drug events will occur in Residential Aged Care Facilities.



## My Health Record





**Secure Messaging** 



## **Secure Messaging**

### Health information that can be exchanged securely

The ability of healthcare providers to easily, reliably and securely exchange health information – both directly with one another and with their patients – is a key enabler of integrated models of care.

Activity in this space will predominately be delivered via the Secure Messaging Program; which is focused on enabling 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 core program objectives are to enable:

- Healthcare providers to search for other healthcare providers from their chosen software solution and from a range of different provider directories.
- Healthcare providers to communicate with other professionals and their patients via secure digital channels.
- An end to the dependence on paper based correspondence.







## **Secure Messaging**

#### **Benefits & Customer Value**

2020 - 2022

- > Enhance secure messaging software capability across the health landscape
- Design and mobilise a secure messaging governance model to promote consistent approaches to seamless adoption and use.
- SRA Business Case developed and agreed by Board

- > >80% of secure messaging software vendors conformant with secure messaging standards & specifications
- Secure messaging governance model operational through a policy and regulatory framework
- Fnd-user focussed education, awareness and change management material published (providers and consumers)
- Scale implementation of the Service Registration Assistant

#### **Impact Goals**

- From within their chosen system, healthcare providers will be able to search for other healthcare providers via a single (federated) directory.
- > Every healthcare provider will have the ability to communicate seamlessly with other professionals and their patients via secure digital channels.
- Simplified provider addressing registration processes that reduce inconsistency between address books, improves practice management administrative efficiency and improves the utility of secure messaging to exchange clinical information.

#### **Benefits Categories**









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#### By 2022:

The benefits for Australians and the Australian healthcare system are:

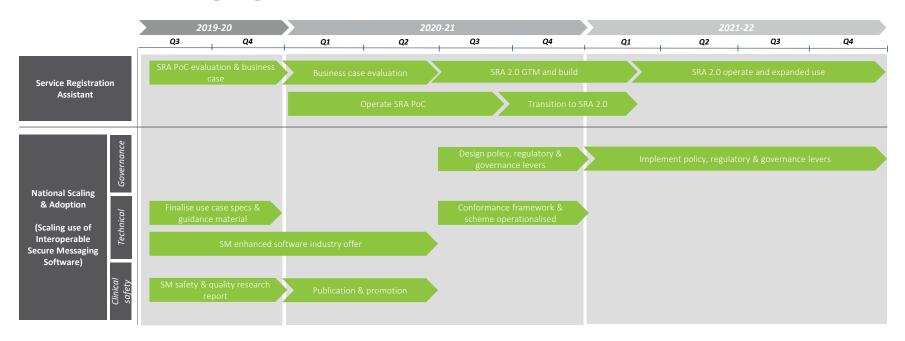
- ✓ Providers will have access to more complete patient

- ✓ Patient privacy & security will be safeguarded through
- information exchange and acknowledgement of receipt



## **Secure Messaging**

19





# **Interoperability & Data Quality**



## **Interoperability & Data Quality**

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

This Interoperability pillar prioritises actions that will enable the meaningful exchange of clinical information between health and care providers, the systems they use, and the people they care for.

Australian governments are working to confirm how existing digital health foundation infrastructure services and different streams of government technology relating to health integrate and align, as well as promoting improvements in data quality.

In partnership with industry, governments and peak bodies this priority focuses on implementing AHMAC approved Interoperability Principles, through a national Interoperability Implementation Plan.













## **Interoperability & Data Quality**

### **Benefits & Customer Value**

2020 - 2022

#### Activities

- Establish governance arrangements
- Develop Interoperability Implementation Plan, codesigned with jurisdictions and stakeholders
- Business Case developed to support implementation of agreed actions
- Identification of potential use cases to include in Implementation Plan

#### **Outputs**

- Governance arrangements for plan development and ongoing implementation of the approved plan
- > Implementation plan approved by HSPC in early
- Business Cases for approval to support implementation of agreed actions in the Interoperability Implementation Plan

#### **Impact Goals**

- > A connected health system that seamlessly shares highquality data with the right people at the right time.
- Base-level requirements for using digital technology when providing care in Australia agreed with governments, peak clinical bodies and other key stakeholders.
- > Health services will be able to assess their level of digital maturity and be supported in improving their level of digital maturity
- Improvements in data quality and interoperability through the adoption of clinical terminologies, unique identifiers and data standards.
- Regions and use cases will showcase comprehensive interoperability across health service provision, community and hospital sectors, public and private.

Benefits Categories









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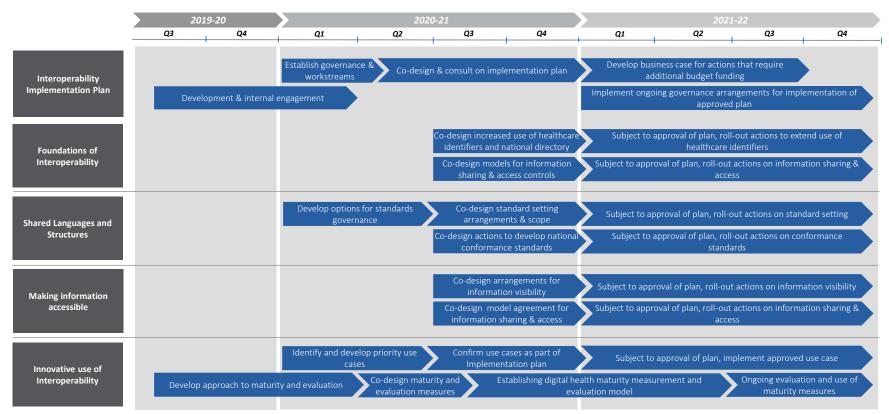
#### By 2022:

The benefits for Australians and the Australian healthcare system are:

- ✓ There will be improved coordination of care, leading to reduced medical errors and avoided hospitalisations.
- ✓ There will be reduced demand for services through improved self-care.
- ✓ Duplication and system operating costs will be reduced through alignment of government health gateways infrastructure.
- ✓ Patient and healthcare provider experiences will improve through a better connected health system.
- ✓ Improved data access and quality.
- √ Improved management and efficiency of data and supply chains.



## **Interoperability & Data Quality**





# **Medicines Safety**



## **Medicines Safety**

### Better availability and access to prescriptions and medicines information

The Medicines Safety priority focuses on improving access to information about medicines, allergies and adverse reactions, to support safe and efficient medicines use and reduce adverse medication events.

Medicines safety is a key priority in Australia, with an estimated 250,000 medication-related hospital admissions occurring each year. In addition to the human cost of these events, the financial impost of these events to the Australian healthcare system has been estimated at \$1.4 billion annually.

Building on deliverables to date, the Medicines Safety Program will focus on delivering three following priority workstreams, plus additional accelerated electronic prescribing activity, in response to the COVID-19 pandemic.











## **Medicines Safety**

### **Benefits & Customer Value**

2020 - 2022

#### **Activities**

- Support peak bodies, industry and software vendors to implement electronic prescribing
- Register and connect healthcare providers dispensing medicines under S100 PBS medicines in Remote Area Aboriginal Health Services
- Undertake an analytical scoping and feasibility study to assess opportunities for future use of medicines data analytics.

#### Outputs

- Electronic Prescribing Conformance Scheme Operational
- Peak body adoption guidelines released and prescribers & dispensers progressively sending & receiving e-scripts
- > 200,000+ dispense records uploaded to MHR from RAAHS'
- Medicines data analytics scoping and feasibility analysis completed and report presented to data quality governance group by January 2021

#### **Impact Goals**

- Greater convenience for consumers accessing prescribed medicines
- Dispensers and prescribers capable and confident to prescribe and dispense electronically
- Safer prescribing practices across Australia through real time monitoring of prescribed medicines
- Comprehensive list of dispensed medicines visible through My Health Record for consumers living in rural and remote Australia
- > Ability to underpin the delivery of prescriptions to patients using virtual models of care (i.e. telehealth)

#### **Benefits Categories**









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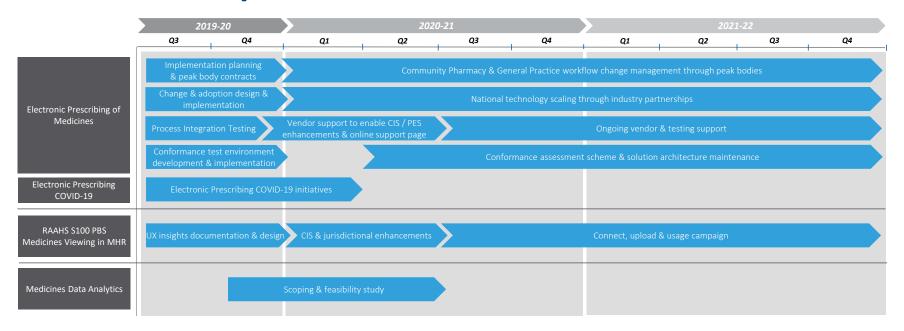
#### By 2022:

The benefits for Australians and the Australian healthcare system are:

- ✓ Risk and harm to health consumers will be minimised through reduced adverse drug events.
- ✓ Prescription misuse will be reduced through realtime monitoring.
- ✓ The cost of hospital admissions for adverse drug events will be reduced (reduced drug-drug interactions, allergic reactions and inadequate dosing, either due to inadequate prescription or dispensing errors).
- ✓ Health system capacity will be increased due to more efficient and accountable administration of medication, improved consumer self-management and reduced hospital admissions.
- ✓ Complications and disease progression will be reduced for patients due to higher medication adherence.



## **Medicines Safety**





## **Enhanced Models of Care**



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### **Enhanced Models of Care**

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

During the national consultation on the Digital Health Strategy, governments identified priority health reform areas which highlighted the need for digitally enabled models of care that improved coordination and continuity of care and improved access for disadvantaged groups through leveraging more innovative ways of delivering care.

The Enhanced Models of Care priority area focuses on improving healthcare accessibility, quality, safety and efficiency through the better use of information and technology, including the My Health Record, secure messaging, telehealth and electronic prescribing. A further focus for 2020-22 will be on leveraging opportunities arising through digital reform driven from COVID-19.

Building on deliverables to date, the Communities of Excellence program will be the key vehicle to deliver on the priorities of the Enhanced Models of Care pillar, complimented by focused activity across other strategic programs.













### **Enhanced Models of Care**

### **Benefits & Customer Value**

2020 - 2022

#### **Activities**

- Manage approval process and support funding submission for Children's Digital Health Business Case
- Develop My Health Record Advance Care Planning Guidelines
- Support CIS vendors to implement technical changes to improve use of Advance Care Planning in My Health Record (MHR)
- > Implement national education campaign on Advance Care Planning in MHR
- Connect all providers in Communities of Excellence (COE) to the MHR system, secure messaging & virtual models of care technologies (i.e. telehealth)
- > Implement digital literacy program for local COE residents & health professional groups

#### Outputs

- > My Health Record Advance Care Planning National Guidelines endorsed by national steering group and published
- Digitally connected 'Communities of Excellence' enabled to showcase the benefits of digital health technologies including MHR.
- > 75% of local COE healthcare providers access the MHR as part of routine clinical practice, by June 2022

#### **Impact Goals**

- > Consumers are engaged in their own health and care
- Reduced avoidable and unnecessary hospitalisations and high cost care due to improved use of Advance Care Planning in MHR.
- Reduced incidences of harm and death caused by adverse drug events
- Improved continuity of care between primary, community, acute & aged care sectors by increasing access to their patient's comprehensive health information
- Improved consumer experience through consumer directed care pathways

#### **Benefits Categories**









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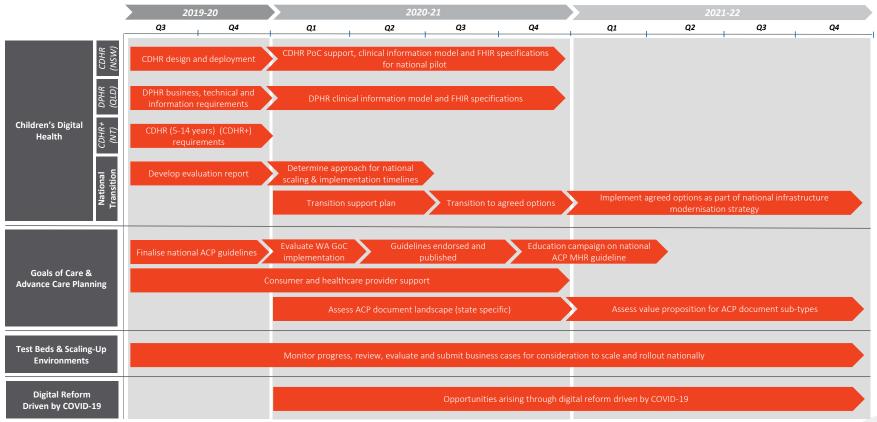
#### By 2022:

The benefits for Australians and the Australian healthcare system are:

- hospitalisations, reduced patient transport costs, and shorter waiting lists.
- ✓ Virtual models of care and ePrescribing will enhance our ability to respond to a pandemic.
- ✓ Digitally enabled end of life models of care will lead to reduced avoidable hospitalisations and shorter stays in
- ✓ Child health records will lead to improved vaccination rates.
- ✓ Emergency care will provide improved quality and handover.
- ✓ Patient and healthcare provider experiences will improve through a better connected and digitised health system.

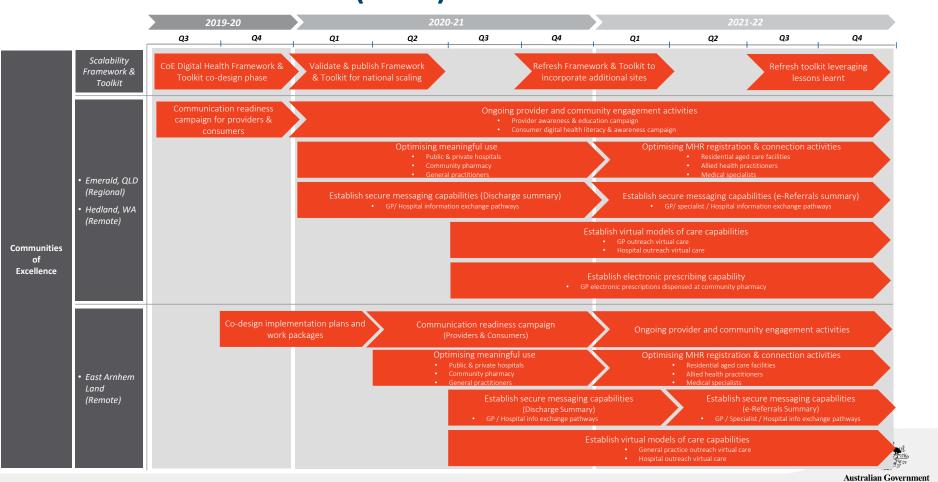


### **Enhanced Models of Care**





## **Enhanced Models of Care (Cont.)**



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Australian Digital Health Agency

## **Workforce & Education**



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### **Workforce & Education**

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

Healthcare consumers want their clinicians to know how to use digital technology reliably and effectively so that they can be used in a way to improve their experiences with health services and improve their health outcomes.

The National Digital Health Strategy recognises that successful implementation of new technology requires the initial and sustained engagement of front-line users to deliver awareness, education and adoption, and that universities and education providers need to build digital health education into their curricula.

While digital technology adoption in the rest of our lives has become common, implementing digital technology changes across the health sector is one of the most complex adaptive changes in the history of healthcare, and perhaps of any industry. It is therefore imperative that there is a nationally coordinated approach to workforce and other health and care stakeholders' education to support this change.

Building on deliverables to date, the Workforce and Education priority encompass the following workstreams across 2020-22:











### **Workforce & Education**

### **Benefits & Customer Value**

2020 - 2022

#### Activities

- ➤ Digital Health Workforce & Education Roadmap for the future developed
- > Develop a National Digital Health Capabilities Framework with the Medical workforce.
- Implement the National Nursing & Midwifery Digital Health Capabilities Framework in one jurisdiction as proof of concept.
- Upgrade online training environments
- Co-design Consumer Digital Health Literacy campaign

#### Outputs

- Roadmap Implementation & Business Case endorsed by HSPC & AHMAC, and published
- Framework published in partnership with applicable peak bodies
- PoC operational and evaluation commenced
- Release upgrades for online workforce training
- > Co-design Digital Health literacy handbook for consumers

#### **Impact Goals**

- > The workforce in health has a sound understanding of core digital health concepts and foundations and thus is more confidently using digital health tools and technologies.
- > The workforce in health will have access to digital health components within their academic curricula.
- Consumers feel that the workforce in health is better equipped to use digital health tools and technologies.
- Consumers are actively engaged in their health and care, independently navigating care and service information through various digital health tools and technology

#### **Benefits Categories**









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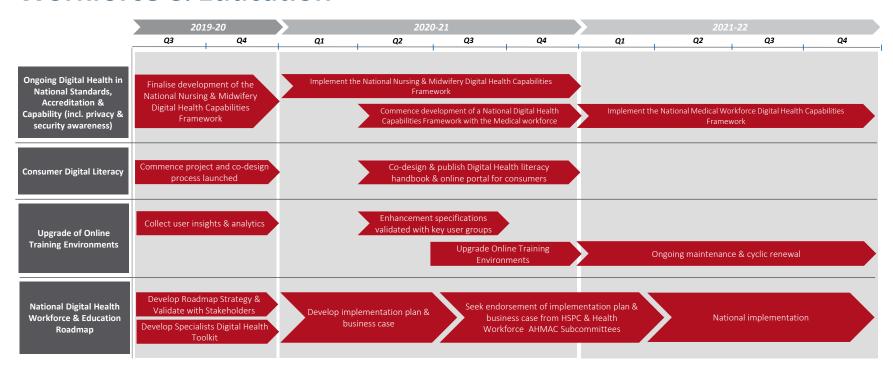
#### By 2022:

The benefits for Australians and the Australian healthcare system are:

- ✓ All healthcare practitioners will be able to confidently and efficiently use digital technologies and services to interact with patients, use and contribute to their health record and exchange clinical information with the rest of the health system.
- ✓ The next generation of health and care workforce will be exposed to and trained in new clinical pathways, digital technologies and the importance of highquality data.
- ✓ The workforce will be positively engaged on the effect of digital technologies and services on their working lives.



### **Workforce & Education**





# **Driving Innovation**



## **Driving Innovation**

### A thriving digital health industry delivering world-class innovation

The National Digital Health Strategy outlines the vision for fostering an environment that supports innovation to improve the experiences of consumers and clinicians and enhance our ability to improve health outcomes of Australians through safer, more efficient and effective healthcare delivery.

Accelerating innovation in the healthcare system means facilitating meaningful partnerships, working together to remove barriers, and learning from successful products and projects, both locally and internationally.

Building on deliverables to date, the Driving Innovation priority encompass the following workstreams across 2020-22:









## **Driving Innovation**

#### **Benefits & Customer Value**

- Transition to SHA-2
- NASH transition to HI Service
- Implement NASH auto renewal for healthcare organisations
- Digital identity private beta
- Digital identity public beta
- Re-open Mobile (FHIR) Gateway
- Offer mobile/ API connectivity to co-pilot vendors
- Connect-a-thon
- API management layer
- Pre initiation for read/write
- MHR application (internal)
- Mobile health framework for applications

- SHA-2 enabled
- Consolidated authentication
- Certificates auto renewal capability enabled
- MHR part of WoG digital identity ecosystem
- > Fully functional mobile gateway
- Provision of MHR access to co-pilots. Key learnings
- Fostering innovation with industry. Read/write testing
- Ease of integration with vendors. Streamlining of internal process

#### **Impact Goals**

- Enhanced security
- > Single credential for multiple services
- Continuous connectivity to
- Part of WoG digital identity
- Single credential for WoG
- Increase the accessibility of MHR data for consumers
- Create the ability to update MHR record via mobile.
- > Streamline integration with MHR via gateway technology
- > Create a national standard of assessment for digital health products

#### **Benefits Categories**









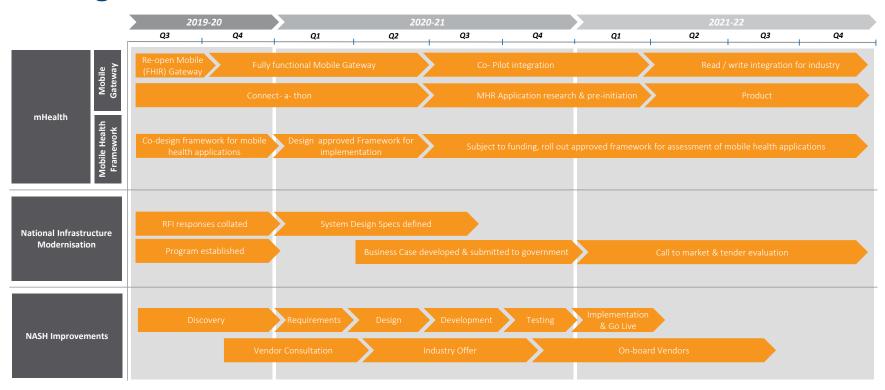
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#### By 2022:

The benefits for Australians and the Australian healthcare system are:



## **Driving Innovation**





# **Business Priorities**



### **Business Priorities**

The Business Priorities focus area details a range of internal initiatives focused on building an effective organisation that delivers high-quality output in a value-for-money and productive manner.

This focus area also ensures that resources are deployed to implement recommendations made by the Australian National Audit Office (ANAO) in their performance audit of the My Health Record system implementation, as well as addressing several areas relating to the Agency's financial statements and practices and broader Agency financial management maturity uplift.

In addition, the Business Priorities focus area draws particular emphasis to the ongoing development of the Benefits Management and the Information Governance & Knowledgement Management functions – both with strong links through the management of the Agency's information assets and enhancement of the its data analytics capability.

Importantly, the Agency's workforce and culture is explicitly called out as an ongoing priority; ensuring an enduring commitment and focus to investing in its people.

ANAO MHR
Performance Audit –
Implementation of
Recommendations



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Financial Management Maturity Uplift









PRIORITY ACTIVITIES



### **Business Priorities**

### **Benefits & Customer Value**

Activities

#### Co-design a suite of privacy and security standards and tools in response to ANAO MHR performance Audit recommendations

- Develop and deliver financial literacy training.
- Strengthening financial practices (incl.QA, invoice, accruals and formal confirmation processes).
- Optimise data access & management to support benefit realisation analytics
- > Establishment of data analytics program for ongoing insights
- Monitor progress in implementing National Digital Health Strategy
- ➤ Role out EDRMS and training on information management
- Consult on and finalise development of an ADHA Strategic Workforce Plan
- Invest in staff through cultural enhancement initiatives

Outputs

Framework for managing shared risks across the Health IT sector

2020 - 2022

- > Supervisory Assurance Framework
- Standards, specifications and conformance requirements defined for Health IT systems
- Financial literacy eLearning modules, procure-to-pay hub and enhanced financial project management and reporting
- ➤ Benefits Management Plan next 10 years (aligned to ANAO requirements)
- Use case(s) and evidence definition base for Secondary Use
- Centralised 'insights-as-a-service' function established
- Advice on progress in meeting deliverables in National Digital Health Strategy
- Agency Records Authority and EDRMS established
- > ADHA Strategic Workforce Plan
- > Targeted cultural improvement activities

Impact Goals

- Maintaining trust through shared management of risk and digital reform
- ➤ Improved Financial Literacy across the Agency.
- Audit findings closed or downgraded as part of 2019-20 audit clearance, indicating improved Agency financial management practices.
- Benefits-led and evidence-based view informing Agency priorities and decisionmaking.
- Achievement of deliverables in the National Digital Health Strategy
- Achieving compliance against NAA and whole-of-government information and records management requirements
- ➤ Evidence-based resourcing decisions that align with Agency objectives
- Improved Agency results in the APS Employee Census

Outcomes

Improved privacy and security standards and practices in priority parts of the health sector

Medium to Long-term

- ➤ Improvement in quality and timeliness of Agency financial reporting generally
- Agency's strategic programs are realising tangible benefits for Australians and the Australian healthcare system
- Better health for all Australians enabled by seamless, safe, secure digital health services and technologies
- Insights from information use improving digital health reform
- Optimised resourcing decisions that lead to improved efficiency and productivity
- Increased staff engagement and satisfaction leading to improved productivity and impact



### **Business Priorities**

