



Australian Government
Australian Digital Health Agency



Australian Digital Health Agency

CORPORATE PLAN

2023–2024

Our work means so much to so many

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 4-year reporting period, 2023–24 to 2026–27, 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 reflects the Australian Government's ongoing investment in the Agency from 2023–24 and multi-year planning to continue and improve digital health.

Australian Digital Health Agency

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Message from the Agency Chair



Across all governments there is recognition that reforms to strengthen Medicare must be underpinned by digital systems and technologies that drive better care and provide better connections between different parts of our health system.

This is reflected in the 2023–24 Federal Budget which includes funding for a major upgrade of the My Health Record system and financial certainty for the Australian Government to embark with confidence on the agenda set out in this Corporate Plan.

The Agency's overarching goal is bringing consumers and healthcare providers under the umbrella of a modern, connected healthcare system, and over the coming years, the government's confidence in digital health and the Agency's expertise in driving the digital transformation of healthcare delivery will be repaid with interest.

It begins with the Agency's rollout of the next National Digital Health Strategy that in consultation with consumers, healthcare providers, industry and governments will continue to nurture trusted national health products and services meeting the needs of consumers demanding modern, connected healthcare.

It continues with an agenda that includes:

- supporting the Australian Government and sector leaders in implementing the agreed direction and outcomes of the Strengthening Medicare Taskforce Report, designed to modernise and digitally enable the primary care system, reducing the administrative burden on health professionals and improving health outcomes for all Australians
- implementing the Connecting Australian Healthcare – National Healthcare Interoperability Plan
- supporting effective telehealth and virtual care with real-time information exchange (e.g. electronic prescriptions)
- enabling consumers to take control of their health journeys with convenient, coordinated and connected access to health information
- supporting connected care by working with healthcare providers across the continuum of care to increase the sharing and use of core clinical content in My Health Record
- modernising the My Health Record system to support greater connectivity and drive near real-time information sharing across care settings
- developing and driving the adoption of national conformance and data standards across clinical domains, with an initial focus on pathology and diagnostic imaging
- supporting rural, remote and First Nations communities to connect to their health information and make it available to their healthcare providers
- respecting and caring for older Australians – ensuring aged care residents and their carers have access to their health information, including to support their transfer to hospital care settings.

We are at a historic moment in the Australian digital health story with strong commitments from governments to the expansion of digital health services to meet growing, contemporary demand.

Reflected in this Corporate Plan is the Board's confidence in the Agency and its multi-talented staff to meet that challenge.

Dr Elizabeth Deveny
Chair

Message from the CEO



The 2023–24 Federal Budget digital health investment of more than \$1 billion over 4 years across government confirms the transition of digitally connected healthcare from the aspirational to the deliverable as an integral part of the nation's healthcare future.

This game-changing investment includes ongoing funding for the Australian Digital Health Agency, securing its role as the steward of digital enablement with the resources to both modernise and maintain the nation's digital health infrastructure.

Importantly, it confirms Agency responsibility for the My Health Record system, with a focus on transforming it from a clinical document system to a data-rich, interoperable platform able to interact with the array of digital systems used by health and care sector stakeholders.

A new 4-year Intergovernmental Agreement also ensures continued funding for existing national health infrastructure and services, as well as new strategic priority projects to progress national health information sharing for a more connected health system.

This is a historic moment for digital health, elevating its contribution to national health policy reform and signalling a key role for the Agency in delivering the Australian Government's commitment to strengthen Medicare and lower healthcare costs for consumers through digital enablement.

It is a responsibility that we do not take lightly and an opportunity that we grasp with both hands.

It changes the way that we stage our work – maximising our capacity to support, influence and intersect with the continuing policy reform agenda. It improves our ability to forecast program delivery and engagement activity with our partners and stakeholders.

The soon to be released 5-year National Digital Health Strategy is the compass guiding the Agency. It reminds us that Australians want and deserve a joined-up, consumer-centred, modern health system that also gives healthcare providers the digital and data tools they need for improved and better coordinated care.

There is much work to be done across multiple care scenarios, but our appetite has been sharpened knowing that digital health is no longer confined to the 'nice to have' column on the healthcare ledger.

Digital health technologies have proven as critical enablers, enhancing health system accessibility, improving care options and outcomes, increasing sustainability – and most importantly – winning the trust of millions of Australians, especially since the pandemic.

Maintaining that trust ranks among our greatest responsibilities and will be aided by the Agency's long-term operational funding budget allocation. It radically improves our ability to plan strategically, retain and attract talented people, build staff capacity and further strengthen the Agency's purpose.

The activities outlined in this Corporate Plan and our continuing focus on engaging with and empowering Agency staff to work even more closely with the health communities we serve will bring us ever closer to delivering patient-centred, connected care.

Amanda Cattermole PSM
CEO

1 About the Australian Digital Health Agency

1.1 Vision

A healthier future for Australians through connected healthcare.

1.2 Purpose

Better health for all Australians enabled by connected, safe, secure and easy to use digital health services.

1.3 Values and behaviours

The Australian Public Service (APS) Values (also known as the ICARE principles) set out the standard of behaviour expected of APS employees and are the foundation of everything we do. They are brought to life for staff through the Agency's Workforce Strategy 2021–2026, which provides guidance and support to staff about expected behaviours and working together to create a positive, respectful, inclusive place to work.

1.4 Role

As the population ages and the number of people experiencing chronic health conditions or mental health issues rises, the need for person-centric, connected healthcare has never been greater. Modernising and expanding digital health tools and services to effectively use data and share health information will empower consumers, improve individual health outcomes, ease pressure on the healthcare workforce, provide insights that inform individual and population health responses and support planning and future investment.

As the steward for digital enablement of Australia's health system, the Agency has a lead role in coordinating national engagement, delivery and adoption of digital health to enable person-centered, connected healthcare. In 2023–24 the Agency will deliver a new National Digital Health Strategy to drive information sharing, increase connectivity and advance real-time information sharing and it will modernise national infrastructure to transform healthcare delivery over the next 5 years and beyond.

The Agency partners with healthcare providers, the Australian Government, state and territory governments and industry to connect, promote and deliver digital technologies across the health ecosystem. It works to make it easier for healthcare providers and consumers to access, manage and share health information, for the benefit of all Australians.

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

1.5 Functions

The Agency operates under the Intergovernmental Agreement on Digital Health signed by all governments. The Agency coordinates and delivers national and cross-jurisdictional priorities, as set out in the Intergovernmental Agreement and reflected in the National Digital Health Strategy.

The Agency also has a key role in supporting Australian Government priorities in health reform, including strengthening Medicare, supporting primary care and supporting allied health and other vital parts of the health system to be better connected so that Australian healthcare consumers and the healthcare providers who support them have access to information when and where they need it.

The Agency is also a strong contributor to digital health innovation – partnering with governments and industry to incubate and test new ideas to enable health information sharing and digital transformation across the health sector. Consistent with extending the reach of technology into new geographies and health settings, we also engage across the globe to learn about other world-leading health innovations and to tell Australia's story in an international context.

A complete list of the Agency's functions is available in our enabling legislation.¹

1.6 Areas of focus

The Agency's work and role support health policy reform including key activities as outlined in the Health Portfolio Budget Statements.² This includes:

- Driving information sharing – drive use and uptake of national digital health products and services, including My Health Record, to improve sharing of information at the point of care and health outcomes for the patient.
- Improving connectivity and advancing real-time data exchange – facilitate high-quality communication between healthcare providers through the interoperability of the systems they use to improve the visibility and availability of health information, reduce the burden on providers and support better health outcomes for consumers.
- Modernising national infrastructure – continue to transform national infrastructure and move to a contemporary, structured data-rich ecosystem capable of connecting systems across settings and supporting real-time access to information for the patient and the broader care team anywhere, anytime.
- Building a high-performing culture – continue to build an Agency culture and leadership strength that supports clear accountability, staff engagement, capability growth and staff satisfaction.

¹ Section 9, Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016

² <https://www.health.gov.au/sites/default/files/2023-05/health-portfolio-budget-statements-budget-2023-24.pdf>

2 Operating context

2.1 Environment

Australia is progressing digital transformation of healthcare and embracing new opportunities and ways of managing our health and wellbeing.

Digital health is helping to meet challenges such as health inequity, increasing levels of chronic disease, rising healthcare costs, rising complex care needs and global health threats. It is enabling a person-centred healthcare model that improves access to and information sharing across multidisciplinary care teams.

Digital technologies are easing the pressure on hospitals and, through the sharing of quality data, helping to inform evidence-based decision-making and supporting the transition of care between healthcare settings. Australians are now more equipped with the information and tools they need to better understand their health status and risks and to help them manage their health and wellbeing.

There is growing demand for digital health tools and technologies that support the healthcare journeys of Australians. General practitioners (GPs) and pharmacists increasingly value My Health Record as a key source of clinical information to support their patients. Consumers recognise the convenience and benefit of having access to information such as their medications and test results at their fingertips. This access gives people control of their own health information, so they don't have to retell their health story or, worse, repeat tests when they engage with different members of their care team. It also empowers Australians, building their understanding, health literacy and control of their health journey, which can help us move from a reactive health system to a more preventive health setting.

This next phase of digital transformation is driving better information sharing and advancing real-time data exchange to make the right information available at the right time to inform coordinated and multidisciplinary healthcare. The resulting reduced duplication and waste can also reduce workforce and budget pressures and increase safety, quality and productivity.

However, there is currently no mechanism to compel healthcare providers to share key information or data. While almost all GPs, pharmacies and public hospitals are registered with My Health Record, only 1 in 10 specialists use it and just 1 in 5 diagnostic reports in radiology are uploaded.

The Australian Government's commitment to progressively require healthcare providers to share key health information for the benefit of the patient and broader care team will help realise the full potential of My Health Record. The Agency will play a key role in this, providing technical support to allied health professionals and aged care providers to connect with the system, supporting the registration process and supporting access and use – acknowledging that some organisations will be well advanced and already routinely sharing diagnostic reports, while others are yet to be registered.

A thriving, connected digital health ecosystem relies on settings that support innovation, build confidence and trust and are founded on a common understanding of priorities and direction.

To do this, digital health technologies should be developed through partnerships between industry, technology vendors, healthcare providers, researchers, governments and consumers. Strong governance and leadership are essential to creating the right policy and regulatory settings for partners and collaborators to share cross-industry digital expertise and for a nationally coordinated approach to the collection and sharing of critical health information.

Modernisation of Australia's national digital health infrastructure is required to support a contemporary, data-rich digital health ecosystem that sets the groundwork for personalised treatment and tailored care using emerging medical science and technologies, such as artificial intelligence and sensor technologies. This data-rich environment will also enable improved analytics to inform self-care, clinical decision-making, public health policy and health research.

Putting patients first is a priority not only within care settings but as patients move across the care continuum. High-risk populations, such as those with complex and chronic conditions, are particularly vulnerable as they transfer between care sites. The Australian Government has recognised the scale of the challenge and tasked the First Secretaries Group³ to lead health reform, including in this important area of care transitions. Digital health interventions that support continuity of care can help to build a bridge between acute, primary and aged care, so that patients get the support and care they need as they transition from hospital to home.

Australia is not on its own in this digital reform journey. Nations globally are using digital health technologies to improve health systems and accelerate the use of health information consumers.⁴

Driven by recent reforms, Australia is now seeking modernisation of digital systems and significant improvements in the way patients' information is accessed and shared across the health system. International cooperation and engagement are key to informing our approach to ensure we learn from and keep at the forefront of international best practice.

In 2023–24 the Agency will continue to foster relationships with international partners, further the Australian Government's priorities on digital health, and demonstrate Australia's global digital health leadership. Our involvement in the G20 digital health agenda, international standards development and our partnership with the Global Digital Health Partnership will be key to supporting this.

Compared with other nations, Australia has some digital health strengths, particularly in relation to electronic health records and recent developments in electronic prescribing and telehealth.

Despite this, Australia has a way to go in fully realising the role digital health can play to improve health systems outcomes, by scaling up development, adoption, connection and use and enabling further innovation. Overcoming the digital divide also remains a critical issue.

Our priority over the life of this corporate plan, and beyond, is to work with our jurisdictional, health sector and technology partners to respond to these challenges.

3 A group comprising the most senior public officials from the federal Department of the Prime Minister and Cabinet (PM&C) and the states and territories premier departments. It is chaired by Professor Glyn Davis, Secretary of PM&C.

4 World Health Organization (2021) [Global strategy on digital health 2020–2025](#), World Health Organization, Geneva.

Our first step is the release of the new National Digital Health Strategy, which aims to place people at the centre of a modern, connected and digitally enabled healthcare system. It is a strategy for all Australians, from First Nations Australians to our newest citizens, inclusive of all who live and receive healthcare in Australia.

The 2023–2028 strategy will set an ambitious agenda building on the achievements of the previous strategy released in 2017. The Strategy will acknowledge the efforts, planning and investment to date towards digital enablement and the uplift in digital health maturity and show how on this foundation the potential of a more connected digital health system and the benefits it offers the community, governments, industry and healthcare providers can be realised.

Success will come through working together. The strategy provides a way forward to realise the connected care vision we share with states and territories and all partners in Australia's health system.

2.2 Capabilities

As a young but rapidly maturing Agency, growing our capability is critical to delivering on the ambitious agenda of building a healthier Australia through digitally connected care. Our success relies on our commitment to good governance and cyber resilience, knowing and living our values, developing our people and forging strong relationships with all partners. The Agency has a Learning and Development Strategy in place to focus on building Agency strength in those skills that will enable a digitally enabled workforce, which can use data effectively to inform decision-making. Our priority skill areas include digital, data, leadership, project management, and health and care.

Workforce culture

The Agency continues to build the capability critical to the ongoing delivery of its work program. This capability includes collaborative, successful external partnerships, a commitment to good governance – including clinical and data governance, effective project management and innovation – and to the promotion of strong values and culture within the Agency.

The Agency's values and culture are fundamental to successful delivery of our work program. They reflect our reputation – who we are, what drives us, what we stand for, how we work together and with others and our ethics. 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

These values are embedded in the Workforce Strategy 2021–2026, the Agency’s Leadership Strategy 2022–2023 and all other people-related policies to bring them to life and to help define our organisational DNA (Figure 2).

The Workforce Strategy 2021–2026 describes our approach to attracting, retaining and developing our people. The Agency tests and revises the Workforce Strategy annually, to identify and overcome any gaps between current and future workforce needs and to mitigate the risk of loss of technical expertise and those in mission-critical positions.

The Workforce Strategy is supported by a Leadership Strategy 2022–2023, where we commit to building good leaders and empowering them to lead through our shared sense of purpose; being visible, trusted and respected; cultivating purposeful connections with our colleagues; and demonstrating accountability for the work we do.

The Agency Learning and Development Strategy is core to Agency culture and is a key tool in future-proofing Agency capability and attracting and retaining a forward-thinking, flexible and motivated workforce. The strategy focuses on embedding 5 core capabilities and crafting skills essential to Agency success and are the foundation of our work program over the next few years. Core capabilities include leadership, project management, data, digital and health and care. These skills position our workforce for success in realising the Agency vision of a healthier future for Australians through connected healthcare.

Core capabilities are developed over 4 levels (Figure 1). All staff need to demonstrate or be working towards achieving proficiency at the awareness and foundation levels across all core capabilities. Executive-level staff need to demonstrate or be working towards achieving proficiency at an accomplished level across all core capabilities, while those at a senior executive level will need to demonstrate an advanced level of proficiency.

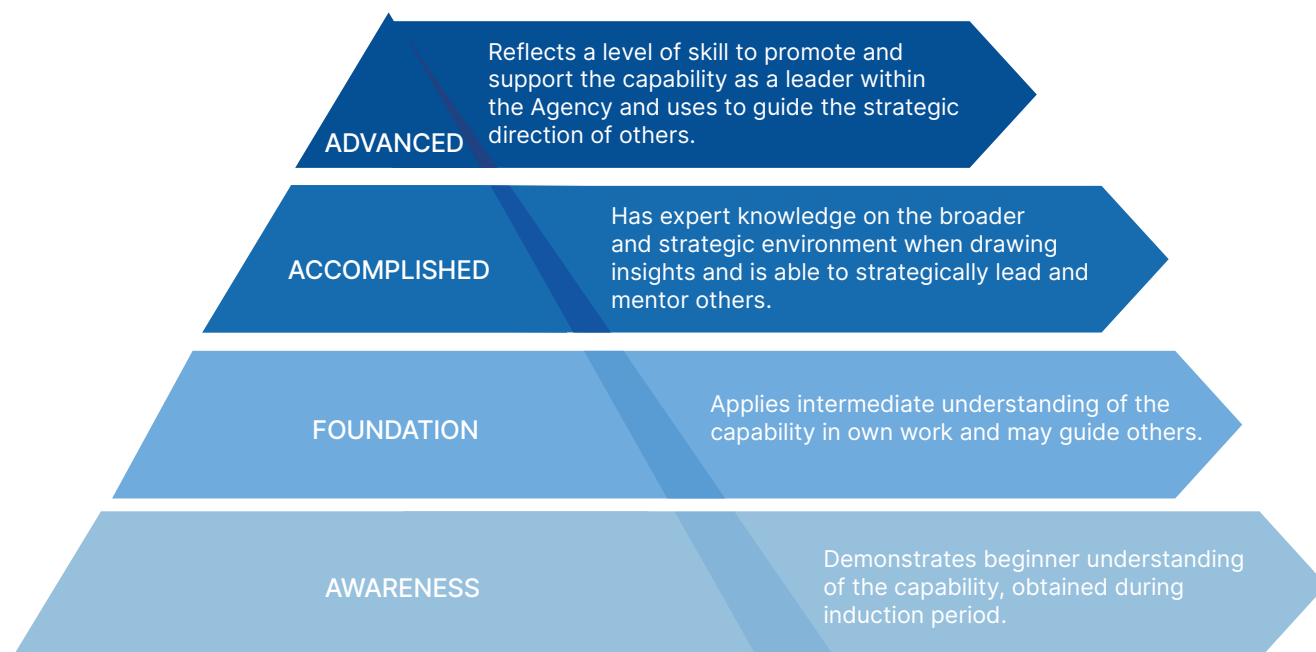


Figure 1: Core capabilities

The Agency focus on learning means a shift from a reactive model to a proactive one. The transition is outlined below.

From reactive	To proactive
Reactive learning and development activities	Organised and connected learning and development opportunities linked to strategic and operational plans, the Job Family Skills Framework, and Agency core capabilities
Reliance on training requests for skill and knowledge acquisition	Managers and divisions partnering with the learning and development team to develop learning pathways that build skills strategically and transparently across the Agency
Managers unclear about what training their team completes, and their compliance with mandatory training requirements	Reports for each division and branch outlining the money and time spent on training, and training completion rates within a capability measurement model that enables assessment of progress towards our desired capability levels
One-size-fits-all delivery approach for training delivery	Multimodal delivery of training materials, including on-demand delivery and a focus on mobile-ready delivery, with content made available at a time that suits the individual learner

Inconsistent evaluation of learning and development	Evaluation of learning is planned and linked to organisational outcomes (tangible measures)
Defined leadership pathways	Tailored leadership and management development linked to specific Agency levels and the person's learning needs

Together, these initiatives are designed to create a vision and a workplace that is positive, dynamic and responsive and that can deliver with passion and purpose on the strategic priorities of the Agency.



Figure 2: Agency DNA

Diversity and inclusion

The Agency continues to invest in attracting, developing and retaining a diverse workforce and we value the range of views and approaches diversity brings to our workplace. We are committed to being inclusive, culturally aware and responsive to the needs of individuals in our policies and practices. Program initiatives have been developed and continue to be implemented to broaden diversity and inclusion in our workplace, supporting a wider range of diversity dimensions including gender, age, disability, LGBTQIA+, First Nations peoples and cultural diversity.

The Agency welcomed its first group of graduates in 2023. Graduates came from the Australian Government Graduate Program; Digital, Data and HR Streams and Indigenous Graduate Pathway program. We will continue our commitment to this program into 2024.

Following on from our first Reflect Reconciliation Action Plan (RAP), development of our Innovate RAP 2023–2025 is underway. This RAP focuses on empowerment, self-determination and harnessing the valuable perspectives and knowledge of First Nations peoples, including staff and stakeholders, under the 3 core pillars of respect, relationships and opportunities.

Flexible working and learning

The Agency is a modern workplace, with a flexible culture and work practices, strong leadership and a continuous improvement approach, including to better technology, to support our people to do their best work, whether remotely or in the office, together or independently.

Learning and development is not only a personal responsibility but also a collective effort. Our goal is to provide a comprehensive and flexible range of development opportunities that enable our people to build their skills, expand their knowledge and achieve their career aspirations. This is achieved by providing learning through LinkedIn Learning, core capability workshops, subject matter presentations, online learning and access to core leadership skills online.

The Agency's learning and development approach aims to build capability and attract and retain staff by providing quality opportunities that align individual's planning and development within the Agency's strategic priorities.

Data governance

The Agency has robust data governance arrangements in place to ensure the security of the health information that it holds. In addition, we are driving continuous improvements in our data management, governance and analytics capabilities to ensure secure and authorised access, ethical and effective use and appropriate and safe sharing of health and other data. Through these efforts, the Agency can derive valuable insights to inform and contribute to better health and care outcomes, as well as more efficient and effective digital health and healthcare systems.

By prioritising seamless and secure data access, the Agency is an enabler of more efficient information sharing across the ecosystem. More accessible data informs healthcare services and supports outcomes for the benefit of individuals and healthcare providers alike.

In the near term, and in line with the whole-of-government focus to improve availability, access and use of government-managed data, the Agency is focusing on the following key priorities:

- Implementing the Agency Data Strategy and Data Maturity Implementation Roadmap
- Uplifting the Agency's data analytics technical capability by establishing secure and modern cloud-based data analytics infrastructure
- Implementing an effective data governance framework for health and other data management by the Agency
- Enhancing data-sharing systems and processes to further strengthen the secure, Privacy Act-compliant and efficient data sharing with all Agency stakeholders to support ethical data use
- Progressing health data de-identification, preparation and presentation capabilities to support research and public health use of data, in collaboration with other government organisations.

Clinical governance

We recognise the criticality of driving a culture of safety, quality and continuous improvement in healthcare. The Agency's products and services can directly impact the delivery of care by health and care providers. We are committed to using a person-centred, systems approach to develop clinically safe, usable and continually improving health technologies. This commitment to clinical governance leadership and management is embodied in the Clinical Governance Framework that guides all Agency work.

The framework is underpinned by 5 equally important principles (Figure 3) which enable us to support healthcare and care delivery in Australia through our products and services.



Figure 3: Clinical governance principles

Establishing the clinical governance principles is the first part of more detailed ongoing work by the Agency. We are developing intent statements, criteria, actions and examples that will sit under each of the principles to ensure the Clinical Governance Framework connects with our Agency workforce and is relevant, actionable and measurable.

Cyber security

The Agency has set itself the goal of becoming a national leader in cyber capability that can build and support cyber resilience for the future of digital health innovation across the Australian healthcare sector.

The Agency is not only the custodian of the My Health Record – a role at the very centre of the Agency’s purpose – but also a champion of digital health in Australia. Leading this work is a strong expert cyber security team within the Agency supporting the effective protection of Australia’s health information assets and our strategic business objectives and providing intelligence about the cyber threat environment within a broader national cyber security intelligence system. The team’s work includes cyber security measures that reflect Australia’s expanded digital health landscape, including the multi-product, multi-partner, omnichannel environment we are increasingly operating in.

2.3 Key risks

At the Agency, managing risk is an intrinsic part of our culture and decision-making.

The Agency's Risk Management Framework complies with the Commonwealth Risk Management Policy. It supports the requirements of Section 16 of the PGPA Act and provides comprehensive guidance and information on Agency risk management processes and structures to help staff recognise and engage with risk every day.

The Agency complies with the Protective Security Policy Framework through appropriate policies, frameworks and plans across governance, information, personnel and physical security outcomes.

Our strategic risks are identified in the table below.

Strategic risk	Measures to control risk
Design – products and services released are not fit for purpose or clinically appropriate.	Maintain and continuously improve user-centred design methodologies in product development. Conduct continual engagement with key stakeholders, maintain a strong communications posture and invest in community research tools. Maintain strong governance and program management structures, including clinical governance through our clinician-led Clinical Governance Committee; implement effective resource acquisition arrangements; develop strong business cases; and manage critical infrastructure development and replacement.
Data – data and information holdings are not appropriately managed or secure.	Maintain, continuously improve and assure a range of critical controls to minimise cyber, privacy, protective security and other data-related risks. Embed effective data governance that clearly defines roles and responsibilities, data quality processes and ethical data-sharing practices.

Delivery – Agency products and services are not managed or updated in line with user expectations.	Ensure stakeholder feedback is actively sought and embedded into Agency products and services. Maintain effective program governance, including key roles in the development of the National Digital Health Strategy and the Intergovernmental Agreement on Digital Health. Uplift data analytics capability.
Agency – change and progress is not managed effectively across all staff and stakeholders.	Develop and implement the Agency’s Strategic Workforce Strategy, with a focus on leadership, diversity and staff wellbeing to promote a high-performance culture. Maintain effective fiscal budgeting and management arrangements with strong systems of internal control.

Our strategic risks are identified in the table below.

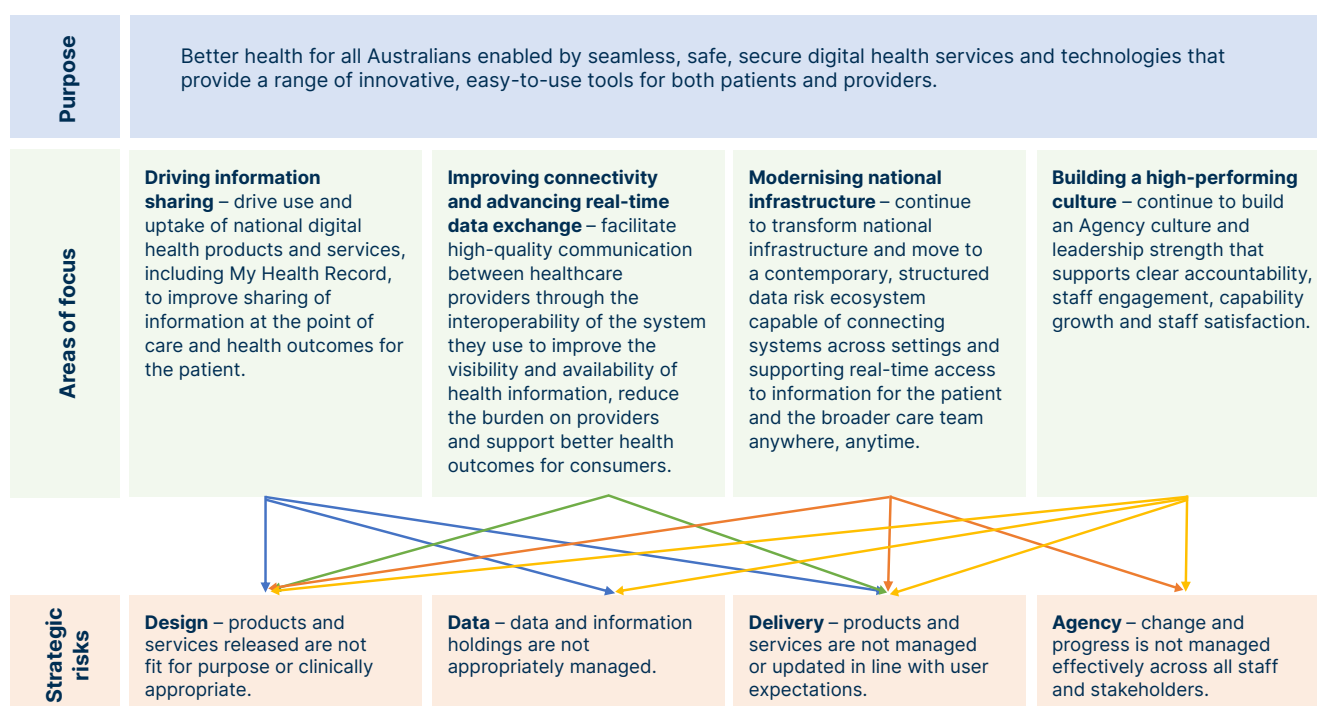


Figure 4: Areas of focus and strategic risks

2.4 Partners

Australia has an exciting opportunity to drive investment in our digital health sector nationally and internationally. The global digital health market is growing rapidly and there is significant scope for further investment to ensure Australia becomes a global leader.

A thriving digital health industry will underpin the transformation of Australia’s health system over the coming years. Our industry comprises diverse organisations – from large global and multinational corporations to small-to-medium enterprises and startups.

Australia's progress in digital health information and records, clinical systems and consumer tools relies on industry development and partnerships between governments, clinical communities, health providers, researchers and consumer groups. Continually improving the policy and investment settings in which the industry operates is also critical to supporting a dynamic digital health sector.

Advances in electronic prescribing, access to electronic immunisation records, the rapid rise of key information held in My Health Record, and now convenient, secure access through the **my health** app were all possible through industry partners coming together and responding to the challenge of transforming health and care in the digital age. It is vital that we maintain this momentum and partnership approach going forward, coupled with a continued commitment to challenging old positions, testing new ideas and co-designing solutions for rapid, responsive change. These are key learnings from the pandemic environment that we cannot lose if we want to continue to transform healthcare for the future.

At the Agency, customers are at the heart of everything we do. We draw on feedback and insights from consumers and clinicians throughout the development and release processes for our products and services to understand their pain points, identify opportunities for improvements to existing products and consider future design solutions. The Agency implements this co-design approach through our Experience Centre, connecting with users virtually and/or via the Sydney office testing spaces. We are privileged to be able to draw on a talented, engaged and experienced group of advisers (called Digital Health Advisers) from a range of individual and peak consumer groups to provide rich feedback of lived experiences.

The consumer digital health literacy program continues to improve accessibility to digital health in vulnerable communities. This includes the translation of resources into community languages and education programs for marginalised groups, delivered through partnerships with organisations like the Aboriginal Community Controlled Health Organisations, Good Things Foundation and the Australian Library and Information Association, which connect deeply with consumers and communities in different parts of Australia.

The Agency's updated stakeholder engagement framework sets out a consistent approach to stakeholder engagement to engender the confidence of our partners and ensure that the Agency's engagement is coordinated, cohesive and respectful of their other priorities.

The Agency has also partnered with the Australasian Institute of Digital Health to deliver on the Capability Action Plan (CAP).

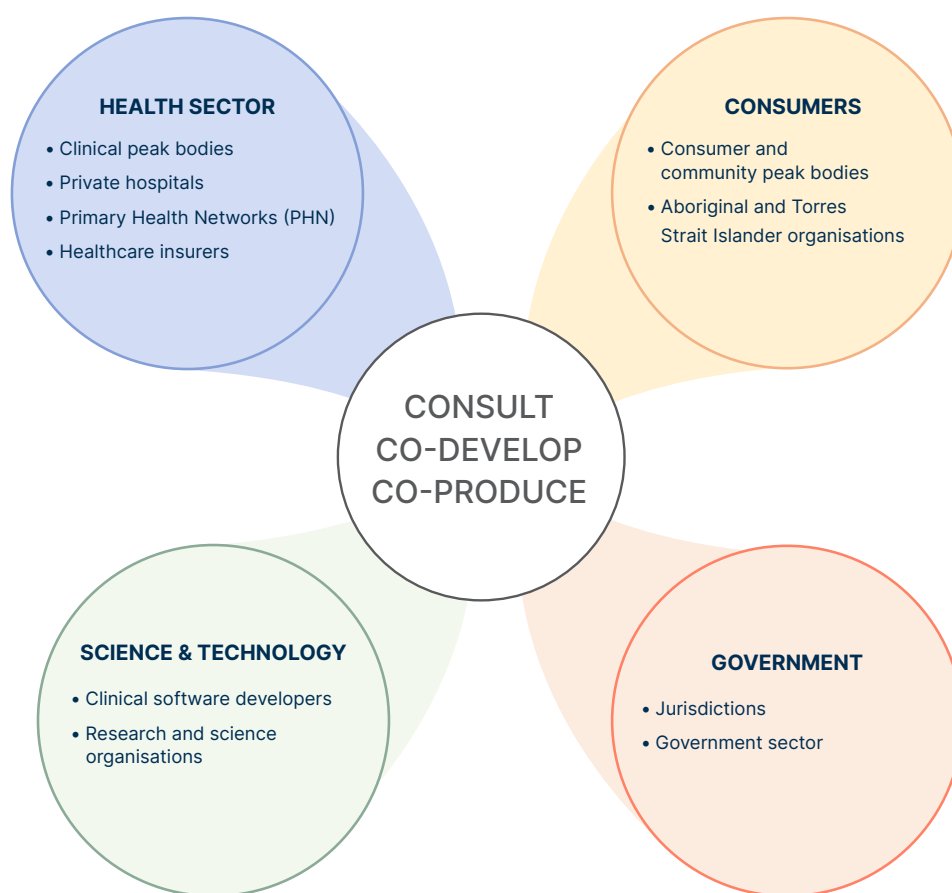


Figure 5: Strategic relationships

The Agency also supports the Department of Health and Aged Care in leading engagement with key international bodies on matters relating to digital health, including the World Health Organization, Organisation for Economic Co-operation and Development and the G20. The Agency is Australia's representative to SNOMED International and a member of Standards Australia's Health Informatics Committee (IT-014), which reviews standards produced by the International Organization for Standardization (ISO).

2.5 Key activities

Building on initiatives begun in recent years, in 2023–24, the Agency will focus on 3 key areas.

Driving information sharing

Key activities are designed to modernise and grow My Health Record content to support patients; improve health outcomes and efficiency of the workforce; reduce duplication, wastage and hospital admissions; and improve health and digital literacy, including in vulnerable populations and remote communities, empowering consumers to take greater control of their health journey.

The **my health** app was made available on Apple and Google Play stores on 28 February 2023. The Agency will develop a roadmap to realise opportunities to further enhance the app in support of the government's priorities including MyMedicare, Aged Care and Strengthening Medicare agenda.

To support the government's commitment to Strengthening Medicare, the Agency will work with the allied health sector to enable and drive practitioner participation with My Health Record. This will be achieved through targeted support for software vendors to integrate their products and through education, awareness-building and registration support activities with practitioners themselves.

The Agency's Aged Care Program to enable older Australians to receive better connected aged care and healthcare enabled by My Health Record will also continue to support residential aged care providers to register for My Health Record, to improve the sharing of information and implementation of a digital solution. The aged care transfer summary via My Health Record will capture and enable the transfer of key clinical information for residential aged care residents as they move from an aged care facility to a hospital. We will also work together with software developers to encourage and support aged care clinical information system conformance with the broader digital health system to drive interoperability across the whole sector.

The Agency will also pursue opportunities to enable key aged care information from other systems and gateways to be uploaded and accessed via clients' My Health Record, to streamline access to this information for consumers, carers and health professionals and support a 'no wrong door' approach.

The Agency will support implementation of the government's policy to move to a 'share by default' setting for all important health information, commencing with pathology and diagnostic imaging reports. We will work with healthcare organisations and software developers to establish connectivity to My Health Record where it does not already exist, and to remove unnecessary bottlenecks in existing upload channels, so patients and care teams have access to a more comprehensive set of clinical information.

Building on the success that came with giving consumers immediate access to their test results for COVID-19 and respiratory pathogens in My Health Record, the Agency will work with clinical and consumer peak bodies to review and refine the rule that prevents consumers from viewing other diagnostic reports in My Health Record until 7 days after they are uploaded.

My Health Record will be enabled to receive structured, machine-readable pathology reports, and we will pilot the upload of such reports from early-adopter jurisdictions. Structured data of this sort is a stepping stone towards minimising duplicate tests, as well as new clinical decision-support capabilities and the improved management of chronic diseases through longitudinal data comparisons.

In collaboration with Health and Aged Care, we will explore opportunities to embed new digital tools in the clinical information systems used in general practice, to assist in the assessment and treatment of those with intellectual disabilities as well as those seeking mental health support.

The roll-out of Provider Connect Australia™ (PCA) will continue. PCA is a key piece of national digital infrastructure built by the Agency to assist healthcare organisations to streamline their relationships with their business partners and take the administrative grind out of maintaining business and personnel information. It reduces the administrative burden on healthcare providers that comes with regular updates to the practice details and supports healthcare providers with near-to-real time publishing of this information to the National Health Services Directory.

The Agency will continue to leverage digital technologies and initiatives to drive medicines safety activities that also align with the objectives of the National Medicines Policy, aimed at improvements in timely access to medicines, medicines information and quality use of medicines.

Electronic prescribing and real-time prescription monitoring (RTPM), national digital health initiatives introduced to support the National Medicines Policy, are already making significant contributions to medicines safety through reducing the risk of dispensing errors and fraudulent alteration of prescriptions, supporting the policy approach to harm minimisation set out in the National Drug Strategy 2017–2026. These will remain a key priority.

The conformance and assurance process for electronic prescribing products and services will continue and opportunities sought to drive improvement through the continued rollout and uptake of electronic prescribing within the community, aged care and public hospital settings. This will also involve the coordination of incident management arrangements and responses for electronic prescribing and education and support activities with peak bodies.

The software industry will be supported to implement enhancements to the Active Script List (ASL), enabling consumer self-registration on mobile devices through mobile applications. The ASL will improve access to medicines by empowering consumers to be in greater control of self-medicines management. This will be achieved by reducing SMS or emails that a consumer will need to manage, decreasing the risk of lost or deleted scripts.

The transition of the national RTPM system's enduring governance and management from the Department of Health and Aged Care to the Agency will be completed. Moving forward, under the auspices of the Intergovernmental Agreement on Digital Health, the focus will be on quality improvements including system enhancements to ensure data quality, system integration and secure information sharing. Adoption and use activities will contribute to providing clinicians with adequate support to effectively use RTPM to inform clinical decision-making and supporting optimal clinical outcomes.

The Agency will continue to contribute to the development of national policies and legislation that enable digital health to support national health reforms and health service delivery. This includes ongoing engagement in policy discussions, governance committees and whole-of-government forums with colleagues from the Department of Health and Aged Care, Services Australia, the Digital Transformation Agency, the Productivity Commission and the Australian Institute of Health and Welfare to continue transformation of Australia's national health infrastructure as well as digital enablement and inter-connectivity of the broader health ecosystem.

The Agency will also continue to support the Department of Health and Aged Care to further the government's priorities on digital health and demonstrate Australia's role as a global digital health leader. Priority activities have a focus on interoperability and standards. Opportunities through fora such as the SNOMED Business Meetings and the Global Digital Health Partnership enable the Agency to learn from the digital health expertise of other countries to support the effective implementation of initiatives in Australia, share best practice approaches, and advance mutually beneficial projects.

Improving connectivity and advancing real-time data exchange

A connected healthcare system is a cornerstone of the National Digital Health Strategy, the Australian Government Digital Health Blueprint and of state and territory digital health strategies. At a national level the Agency is charged with implementing the Connecting Australian Healthcare – National Healthcare Interoperability Plan approved by Health Chief Executives in March 2023.

The plan focuses on 5 priority areas across 44 actions to support safe, high-quality care in a connected healthcare system that conveniently and seamlessly shares high-quality data with the right people at the right time. Building on a series of successes, the nationally agreed plan is a reference for all participants in Australian digital health.

The plan bridges the policy, technical and clinical discussions that influence the interoperability topic and shapes the way consumer health information will be shared across the health system to improve health outcomes and deliver personalised medicine and services in places and at times that best suit consumers. Digital transformation is accelerating across many industries, though healthcare lags somewhat behind. The plan will support health service organisations through a period of intense and accelerated transformation while building and maintaining trust among consumers and clinicians.

Key activities, including the development and application of digital health standards, are designed to improve integration and utility of digital health tools by all healthcare professionals and across care settings and increase the information available in real time to the care team. Standards are a key foundation for interoperability. Without standards, interoperability is not possible. Standards allow information to flow

seamlessly between people, organisations and systems. Standards can be categorised into 3 groups: technical standards, clinical standards and data standards. Different categories of standards need to be used together to manage health data complexity. The development, maintenance and implementation of the different categories of standards require a coordinated approach in order to achieve connected care for Australians.

The Agency will publish a National Digital Health Standards Catalogue, a resource that will provide access to the full range of existing and new digital health standards. The utility of the catalogue will be the presentation of standards in use case or health priorities. The use cases and health priorities section of the catalogue aims to bring together the range of standards into a package of information for local implementation.

Standards are community driven and are a result of consensus with various parts of the digital health community. The process is to ensure the standards are fit for purpose and representative of needs for a variety of stakeholders.

The Council for Connected Care (the Council) will play a critical role in supporting the interoperability plan to achieve the connected healthcare system that Australians desire and ensuring that the foundational infrastructure, including priorities and the standards agenda, builds confidence and trust in the integrity and provenance of health information.

The Council has been established to provide strategic advice on matters related to interoperability and to support national implementation of the Interoperability Plan, including advice to drive and monitor progress against the Interoperability Plan's actions and contributing to the annual reporting requirements. The Council will achieve its purpose through targeted consultation with health technology stakeholders, discussing foundational issues that are perceived as barriers to sharing consumer health information – including identity, standards and consent – and formulating strategic advice for the Agency on best ways to address these barriers.

This work will support the broader care team with more seamless access to information and save time, administrative burden and improve health outcomes.

The Agency will work with peak bodies and health professionals across all sectors in support of the government's commitment to Strengthen Medicare and the move to a 'share by default' setting for all important health information, commencing with pathology and diagnostic imaging reports.

We will work with healthcare providers, including aged care and allied health, to establish connectivity to My Health Record where it does not already exist and to remove unnecessary bottlenecks on reporting to support patients and the whole care team.

The Agency will continue to work with the Australasian Institute of Digital Health (AIDH) to support the health workforce in Australia and deliver the priorities identified in the workforce Capability Action Plan (CAP).

The CAP presents the priority actions that are required to effectively build digital health capability across the health workforce to respond to the needs of consumers now and in

the future. It has been built in partnership with key stakeholders from across the health ecosystem and reflects a shared position about actions that are both high impact in driving capability uplift and achievable in the current health environment.

The CAP sets out key initiatives including working towards standard capability frameworks, guidelines, resources and tools identified through previous work, planning, and ongoing sector consultation to equip Australia's health workforce for a connected, digitally enabled future. The Agency is supporting AIDH to progress and consult on a range of key deliverables, including:

- validate and pilot the Digital Health Capability Framework (including tools and resources)
- develop Digital Health Guidelines
- design and develop a Digital Health Hub
- map digital health career pathways.

This builds on work previously done by the Agency in partnership with the AIDH, when it worked with the peak body and multiple nursing and midwifery organisations to develop the first National Nursing and Midwifery Digital Health Capability Framework (2020).

We will work with the Department and the GP vendor sector to commence work to integrate the Comprehensive Health Assessment Plan (CHAP) into GP clinical systems. The CHAP is a 2 -part questionnaire requiring collaboration between a person with an intellectual disability, their supporter and their GP.

We will continue to work with peak bodies in the aged care sector to develop and deliver a support to help transition the sector to a digital future – including a digital maturity assessment framework, tools to enhance a digitally enabled and proficient aged and healthcare sector – and will pilot a digital self-assessment tool for the aged care sector.

Modernising national infrastructure

Key activities will continue to transform the national infrastructure – building on the Application Programming Interfaces (API) Gateway and the transition to a secure, public, government-certified cloud platform – to move to a contemporary, structured, data-rich health information ecosystem capable of supporting real-time access to information anywhere, anytime. This will lead to improved health outcomes, workforce efficiency and sustainability of the system overall.

The next stage of modernising the My Health Record is to transition from a clinical document repository (PDF style system) to a data-rich platform built on the international

data standard known as Fast Healthcare Interoperability Resources (FHIR), to better ensure health data can be seamlessly connected across all parts of the health system.

This transformation journey will build on existing national infrastructure, including vital foundational elements like the Healthcare Identifier Service, as well as the success of the connections activity that has connected nearly all GPs, pharmacies and public hospitals to the My Health Record system. The next stage of modernisation will further improve interoperability between public and private clinical systems and help overcome the challenges faced by different parts of the health system in connecting and sharing key health information to support more person-centred care for all Australians, including those who are expecting to be able to access and manage all their health information through their My Health Record.

The evolution of Australian digital health infrastructure, along with jurisdiction and industry adoption of new digital processes and systems, will take time and involve many steps, but we have a good foundation. Digital maturity across the healthcare sector varies significantly and not all providers will be able to adopt new processes and systems right away, requiring ongoing support for existing sector capabilities currently supporting patient care as different elements of the sector evolve at different speeds.

More broadly, these changes will help to support and progress work with all states and territories towards the evolution of a national health information exchange capability to support patients as they transition through all care settings, in all locations. The Agency will be working closely with all states and territories under the next Intergovernmental Agreement on Digital Health and through the next National Digital Health Strategy to determine the architecture and a roadmap, in consultation with key sector stakeholders, and to inform future decisions of government.

Modernising Australia's digital health system will improve the coordination of care, improve health outcomes through better decision-making support, ease pressure on the health workforce and contribute to the sustainability of Australia's healthcare system. The Agency is working closely with all states and territories to better understand jurisdictional differences and their requirements so we can support each individually and progress national health information sharing for a more connected health system. This will include setting national health data standards, using the expertise of the Agency, the CSIRO and FHIR.

Building on the Agency's success with the establishment of a new API Gateway, and transition of premise to storage in the cloud, the Agency will work to implement a new FHIR-based repository, which will store health and health-related information using the FHIR internationally accepted standard. The FHIR repository will perform the function of the National Repositories Service as required under the My Health Records Act 2012. FHIR will allow storage of key records that form part of a registered healthcare recipient's My Health Record.

The new FHIR-based repository is aligned to future state ecosystem API standards and can support the registered repositories or standalone repositories that do not

interact with My Health Record, reducing both the cost and time for new systems. This continues the required stepwise approach to transformation, as we need to continue to support all parts of the broader health ecosystem. Access to vital health information by the workforce to support the patient when they need it remains paramount as the broader system is evolving at different speeds.

This will include a new set of FHIR-based APIs that align to contemporary technology approaches for granular atomic data access as well as providing flexibility and scalability in the channels they support. In addition to the new repository, these FHIR APIs will provide a channel-agnostic path to access My Health Record data.

Discovery is the system component that allows appropriately credentialed users to quickly find the information they need among all potential sources using indexes that point to the location of data and metadata for identified search parameters and more detailed multi-tier searches across multiple repositories. Discovery services will offer both indexing, whereby the system indexes the location of data (including metadata) that will allow searching for information against basic search parameters, and multi-tier search, which allows for detailed searches across information held across multiple repositories that are more detailed than what indexing alone can facilitate.

Orchestration will help to integrate and coordinate the functions of multiple underlying software applications into a single unified offering. In the context of a modernised My Health Record system, the orchestration layer functions to support coupled contemporary components such as access management, discovery and the national FHIR repositories to ensure compliance with system protocols and create focused and reliable support for business processes.

3 Performance

The Agency's performance will be assessed against our purpose and progress in realising strategic objectives and meeting our performance measure targets.

Performance information has been developed to enable the Australian Parliament and the public to measure our success over the life of the Corporate Plan and year by year. The performance measures were first published in the Health Portfolio Budget Statements 2022–23 and are repeated below.

The Agency is also accountable to the Board and the Jurisdictional Advisory Committee for delivery against the 2023–24 Work Plan, which comprises Commonwealth-funded Agency key activities and those funded by all jurisdictions under the Intergovernmental Agreement on Digital Health. The Jurisdictional Advisory Committee endorsed the plan on 20 June 2023 and the Board approved it on 28 June 2023. A copy of the Work Plan is at **Appendix A**.

A copy of the annual targets in support of the Work Plan deliverables; clarification of when those targets are met, partially met, or not met and the rationale for their selection – how they align with each performance measure, key activities and the Agency's purpose – is at **Appendix B**.

There are 3 performance measures and 11 targets for the 2023–24 reporting year.

3.1 Driving information sharing

A healthier future for Australians through connected healthcare.

Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.⁵

2023–24 targets	2024–27 targets
<p>Increased use of strategically significant Agency products:⁶</p> <ul style="list-style-type: none"> · 10% increase in consumer use of MHR · 15% increase in provider use of MHR · 70,000 downloads of my health app · 3,000 health delivery services and 20 business partners onboarded to Provider Connect Australia 	<p>As per 2023–24, with this exception:</p> <ul style="list-style-type: none"> · 3,000 health delivery services and 40 business partners onboarded to Provider Connect Australia
<p>Agency products meeting or exceeding the planned availability target of 99.9%:⁷</p> <ul style="list-style-type: none"> · National Consumer Portal · National Provider Portal · API Gateway · Virtual Assistant (99.5%) · My health app · Provider Connect Australia 	<p>As per 2023–24.</p>
<p>User satisfaction of the my health app increases by 10% from 2022–23.</p>	<p>User satisfaction of the my health app increases by 10% compared to prior year.</p>
<p>20,000 participants in digital health literacy and awareness related education events and training courses.</p>	<p>As per 2023–24.</p>
<p>20% increase in Electronic Prescribing from 2022–23.</p>	<p>As per 2023–24.</p>
<p>A case study into My Health Record capability to support care transfers to hospital for aged care recipients.⁸</p>	<p>80% of residential aged care facilities registered to My Health Record.</p>

⁵ Health Portfolio Budget Statements 2023–24 p. 180

⁶ New products baselined as launched.

⁷ Measuring user experience via the 'User Experience Questionnaire' (UEQ) is designed to test the quality of the user's experience when using the **my health** app (against a suite of measures such as ease of use, navigation and relevance of content displayed), to determine the app's perceived usability and fitness for purpose.

⁸ The case study will articulate specific experience by an aged care facility following implementation.

3.2 Improving connectivity and advancing real-time data exchange

Digital health interoperability available to healthcare providers and consumers that improves how people use digital healthcare information.⁹

2023–24 targets	2024–27 targets
10% increase in meaningful use of MHR from 2022–23. ¹⁰	10% increase in meaningful use of MHR compared to prior year.
20% increase in the number of HCP cross views ¹¹ in MHR compared to the previous financial year.	20% increase in the number of HCP cross views in MHR compared to the previous financial year.
Implement the Agency's responsibilities under the National Healthcare Interoperability Plan, demonstrated by a case study into application of the National Interoperability Procurement guidance.	Implement the Agency's responsibilities under the National Healthcare Interoperability Plan, demonstrated by a case study into the health consumer and health sector benefits delivered when interoperability standards are implemented.

⁹ Health Portfolio Budget Statements 2023–24 p. 181

¹⁰ Measuring meaningful use through a 'meaningful use index' for My Health Record aims to demonstrate how the Agency facilitates digital health interoperability between healthcare providers and consumers to improve how people use healthcare information at point of care.

¹¹ Cross views are the viewing by HCPs of digital health documents uploaded by other HCPs.

3.3 Modernising infrastructure

Ensure digital health services, systems and products are sustainable and cost effective.¹²

2023–24 targets	2024–27 targets
Maintain 2022–23 partnership value index. ¹³	Improvement in partnership value index compared with previous year.
Conduct a 20% increase in train the trainer sessions and capacity building workshops compared to prior year, with a 90% approval rating.	Conduct a 10% increase in train the trainer sessions and capacity building workshops compared to prior year, with a 90% approval rating.

12 Health Portfolio Budget Statements 2023–24 p. 181

13 A partnership value index is a measurement of partner performance and value.

Appendix A: Agency Work Plan

1. DRIVE INFORMATION SHARING



Delivered in 2023-24 – Consumer activation

Modernise and grow My Health Record content to support the patient, improve health outcomes and efficiency of the workforce, reduce duplication, wastage and hospital admissions and improve health and digital literacy, including in vulnerable populations and remote communities, empowering consumers to take greater control of their health journey.



FY2023-24 Work Plan Programs & Projects that align to Focus 1

Intergovernmental Agreement (IGA) Directed

Program / Project Name

- Capability Action Plan
- Clinical Documents Adoption
- Clinical Documents Specifications Maintenance
- Health Identifier Service
- Health Information Exchange
- Health Information Provider Service
- Interoperability Plan
- National Clinical Terminology Service
- National Authentication Service for Health
- MHR Expansion and Use Program – including Pathology & Diagnostic Imaging & Structured Pathology
- MHR / MHA Releases and Enhancements
- Uptake of remote monitoring and exam in aged care (interoperability plan)
- Real-Time Prescription Monitoring

Budget Measures / Additional Revenue

Program / Project Name

- Aged Care Program
- Aged Care B2G Gateway Conformance Service
- Support at Home – Aged Care assessments into MHR
- Pathology and DI mandate implementation
- Allied Health
- Electronic Prescribing
- Integrating the Comprehensive Health Assessment Program (CHAP) tool into GP clinical information systems
- MHR Integration with myGov Digital Inbox
- My Medicare
- MHR Data Repository
- National Digital Health Modernisation Program

Agency Internal projects

Program / Project Name

- MHR Data Analytics
- My Health App enhancements

2. IMPROVE CONNECTIVITY AND ADVANCE REAL TIME DATA EXCHANGE



Delivered between 2023-24 and 2025-26 - Integrate systems to support the broader care team and workforce

Steward the Connecting Healthcare Plan to improve integration and utility of digital health tools by all healthcare professionals and across care settings and increase the information available in real time to the care team, including the implementation of national legislation to require all healthcare professionals to share their patient's health information safely and securely and by default under an agreed 'Trusted Exchange Framework'. This will support the broader care team with more seamless access to information and save time, administrative burden and improve health outcomes.



FY23-24 Work Plan Programs & Projects that align to Focus 2

Intergovernmental Agreement (IGA) Directed

Program / Project Name

- Digital Health Standards Catalogue
- Health Information Provider Service
- Integrated Developer Platform
- Interoperability Program
- MHR / MHA Releases and Enhancements
- National Authentication Service for Health
- National Clinical Terminology Service
- National Secure Messaging Network
- MHR Expansion and Use Program – including Pathology & Diagnostic Imaging & Structured Pathology
- Provider Connect Australia

Budget Measures / Additional Revenue

Program / Project Name

- Aged Care Program
- Allied Health
- Comprehensive Health Assessment Program (CHAP) Integration Project

Agency projects

Program / Project Name

- -

3. MODERNISE NATIONAL INFRASTRUCTURE



Delivered in 2023-24 and beyond - Near real time exchange of health information across the system to deliver value-based care

Continue to transform the national infrastructure, building on the new API Gateway and transition to the cloud, to move to a contemporary, structured, data rich health information ecosystem capable of supporting real-time access to information anywhere, anytime. This will lead to improved health outcomes, workforce efficiency and sustainability of the system overall.



FY2023-24 Work Plan Programs & Projects that align to Focus 3

Intergovernmental Agreement (IGA) / Commonwealth Directed

Program / Project Name

- API Gateway Enhancements
- Health Information Exchange
- MHR / MHA Releases and Enhancements
- MHR Data Analytics

Budget Measures / Additional Revenue

Program / Project Name

- FHIR Data Repository
- National Digital Health Modernisation Program

Agency projects

Program / Project Name

- FHIR Program
- My Health App enhancements

Agency Work Plan Program/ Project Description

The Australian Digital Health Agency's 2023–24 Work Plan includes new initiatives, in-flight, and programs and projects that will be delivered over multiple years beyond 2023–24.

The following table details all the programs and projects in the 2023–24 Work Plan.

Program / Project	Indicative 2023–24 Scope
Health Information Provider (HIPS)	<ul style="list-style-type: none"> Further enhanced features for clinician mobile access to patient data wherever and whenever they are located onsite and offsite. HIPS Mobile pilots have commenced at three facilities in the Departments of Health in Victoria. Support of the Partnerships team planning the Department of Health Western Australia HIPS Mobile pilot and engagement with jurisdictions on its execution. Support of the Department of Health Western Australia and Department of Health South Australia HIPS structured pathology report uploads to MHR, for testing and production roll out. Developing, implementing and releasing the replacement of the on-site HIPS user interface for viewing patient reports, which is called the Health Viewer. This provides a new enhanced and modernised viewing facility and enables configuration by sites, specific to the needs of the clinician cohorts of various disciplines. Co-design with the Agency Service Design team will ensure an aligned user experience. Development and integration of the foundational architecture for SaaS cloud enablement of HIPS. Support for all HIPS sites across jurisdictions hospitals, private hospitals, pathology and diagnostic imaging vendors.
National Secure Messaging Network (NSMN)	<ul style="list-style-type: none"> The Agency is continuing to work with the National Secure Messaging Network (NSMN) Governance Committee to finalise the Managed Operating Deed (MOD) and supporting documents. In parallel the Secure Messaging Technical Working Group are working on baselining the Interoperability specifications and NSMN Blueprint. In 2023–24, an uplift of the integration toolkit has been planned.
Provider Connect Australia (PCA)	<ul style="list-style-type: none"> Undertake a minimum of two major releases (enhancements) for the PCA Service and conduct a range of change and adoption activities to support the onboarding of both Business Partners and Publishers to the PCA Service. PCA releases in 2023-24 will focus on integration with business partners, enhancements to support the registration of key healthcare provider groups, such as allied health or pharmacy and support for specific jurisdiction projects. Change and adoption activities in 2023-24 are still being planned, but may focus on onboarding and supporting secure messaging providers, referral management services, booking engines, private health insurers, pathology and imaging services and healthcare providers in the allied health, pharmacy and GP sectors.
Real Time Prescription Monitoring (RTPM)	<ul style="list-style-type: none"> Changes to terms and conditions within the Header Agreement that have been identified as high priority for the Agency (Cyber Security, Privacy, Governance) to be negotiated with the Supplier (for novation before 13 September 2023) All tripartite agreements to be novated to the agency with minimal changes (by 13 September 2023) A new Memorandum of Understanding (MoU) between the Commonwealth and the Agency, procuring management services from the Agency, and to identify roles and responsibilities for both parties in respect to the national RTPM program Amalgamate requirements to develop a new Contract for Services (to take effect 1 July 2024), including fit-for-purpose arrangements to support the system (Support Services, Change Order process, Service Level Agreement) Establish Agency's role in distributing IGA funds for RTPM operational costs Post-transition review to evaluate the transition process and identify lessons-learned A new Memorandum of Understanding (MoU) between the States/Territories and the Agency to identify roles and responsibilities for all parties in respect to the national RTPM program Establish a robust RTPM governance structure Develop a Business Case for Conformance Profile implementation for the RTPM system

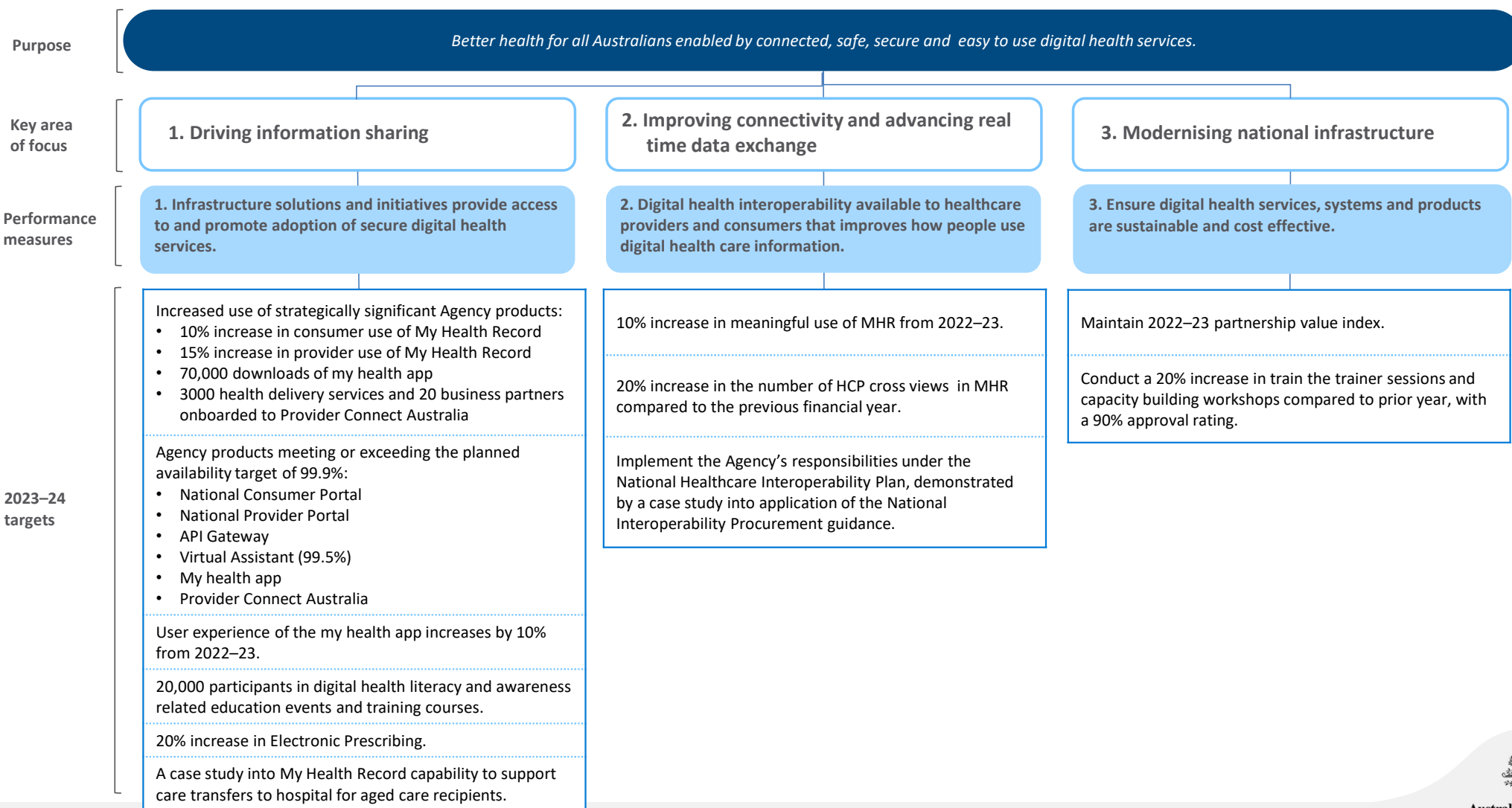
Program / Project	Indicative 2023–24 Scope
Health Identifier Service (HI)	<p>Review and update to the HI service conformance profile (Project 7 under the HI Matching Work Program).</p> <p>Continuous improvements to HI Service and improve user experience when registering to participate in digital health.</p> <p>Review conformance updates, address opportunities to refine requirements that support match rates</p>
National Authentication Service (NASH)	<p>Inform software developers and coordinate the adoption of the NASH improvements.</p> <p>Technical and business changes to Services Australia's PKI systems to support NASH Improvements.</p> <p>Conformance, implementation and education resources for new enhancement.</p> <p>Inform healthcare providers of the new improvements.</p>
National Clinical Terminology Service (NCTS) AMTV4	<ul style="list-style-type: none"> Integrate AMT with SNOMED substances and qualifiers and to update the existing AMT V3 Model to address the challenges and issues raised by Stakeholders.
National Clinical Terminology Service (NCTS) – Tooling Uplift	<p>Move from LINGO (the existing authoring tool) to the SNOMED International Managed Service. Complete migration and decommissioning of Lingo are dependent on other deliverables and projects which are contained in the Project Plan.</p> <ul style="list-style-type: none"> Deliver medicines specific authoring modules to support the creation and release of AMT.
National Health Interoperability Plan	<p>Communication and stakeholder engagement relating to the Interoperability Plan</p> <p>Governance arrangements for the Interoperability Plan</p> <ul style="list-style-type: none"> Progress interoperability projects that align to actions in the Interoperability Plan - Healthcare Identifiers Roadmap, Procurement guidelines, Digital health maturity models, Policy tools review.
Integrated Developer Platform (IDP)	<ul style="list-style-type: none"> Integrated Developer Platform will be delivered in 3 phases: <ul style="list-style-type: none"> Phase I: Feasibility study API Management Tool Phase II: Requirements & Design (Integrated Developer Portal (API Catalogue) and Development Centre) Phase III: Development & Implementation (Integrated Developer Portal and Development Centre)
Digital Health Standards Catalogue	<ul style="list-style-type: none"> The Digital Health Standards Catalogue is a technical resource library developed by ADHA to support interoperability. The catalogue will be published within the Developer Portal and offers free and streamlined access to published standards, specifications and supporting materials. The catalogue supports standards-related discussion threads allowing industry professionals to grow connections, collaboration and consensus across the sector. 2023–24 requires ongoing development and maintenance to further populate and refine content as technical resources, priorities and functionality evolve.
Clinical Documents - Specifications Maintenance	<ul style="list-style-type: none"> The Specifications for Clinical Documents are updated multiple times a year, due to internal and external requests (e.g. terminology changes, clinical safety issues, technical issues, vendor-identified issues). The scope of the work for 2023–24 is to update and publish the Specifications from these requests.
Clinical Documents Adoption	<ul style="list-style-type: none"> The scope of the work for 2023–24 is to provide financial and other incentives for software developers and implementers to adopt updates of clinical document specification and associated sample code (like CDA stylesheet). The work for 2023–24 will account for 50% of the total expected costs to vendors.
Electronic Prescribing (EP)	<p>IGA Strategic Priorities</p> <ul style="list-style-type: none"> Environmental analysis and strategic roadmap to fast-track EP implementation in public hospitals developed in consultation and with involvement from jurisdictions Change and adoption plan for public hospitals Western Australia Health EP implementation Phase 3 Work with hospital software providers' and Prescription Delivery Service operator(s) to fast track development EP implementation in public hospitals (including Industry Offer)

Program / Project	Indicative 2023–24 Scope
	<p>Budget Measures Strategic Priorities</p> <ul style="list-style-type: none"> • To support the continued use of ePrescribing including new measures to expand the use of electronic medication charts and mandate the use of electronic prescribing for high risk and high value medicines. • Revision of the regulatory framework and standards for the electronic prescribing infrastructure to be revised by informed consultation to mandate the electronic prescribing for high cost and dangerous medicines that are at greater risk of misuse: <ul style="list-style-type: none"> - Expected scope for high risk medicines - medicines listed in Schedule 8 of the Poisons Standard. - Expected scope for High-cost medicines – medicines identified under Tier 3 of the Administration, Handling and Infrastructure (AHI) fee. • Requirement for increased use of electronic prescribing and digital medicine charts across the health sector, including in hospitals and palliative care. • To further strengthen the safe provision of medicines, both the regulatory framework and standards for the electronic prescribing infrastructure will be revised to mandate electronic prescribing for high cost and high-risk medicines. • The use of electronic medication charts will be expanded to palliative, chemo-therapy services, and Remote Area Aboriginal Health Services to ensure the efficiency and safety benefits of these systems are realised more broadly. • Financial support will be provided for industry to adopt software changes for medication chart expansion. • To strengthen Electronic Prescribing ecosystem, a new conformance framework will be developed to accommodate the transition to a single PDS ecosystem and expansion of the use of electronic prescribing into other settings of care. The software industry will be supported in fast tracking implementation of a complete suite of electronic prescribing functionalities. • Change and adoption activities via engagement with Clinical Peaks will ensure targeted professional development information and educational content is communicated to their membership. This will include advocacy for ASL.
Health Information Exchange (HIE)	<ul style="list-style-type: none"> • The Agency will bring together key sector and jurisdictional stakeholders to establish a National Health Information Exchange Architecture and Roadmap that will establish national technical requirements to enable consistent sharing of health information across care settings. Within the first year of funding the Agency aims to deliver 1) the scope and current state analysis and 2) Architecture options, trade-off analysis and final goal state architecture.
Structured Pathology	<ul style="list-style-type: none"> • Complete the development of the HIPS structured pathology adapter. Enhance MHR such that it can receive structured pathology and DI reports. Complete the work that is in-train to enable WA and SA to upload structured reports to MHR. Continue existing promotional and communications activities conducted by peak bodies regarding the removal of the 7-day delay on enabling consumers to view INR and HbA1c test results. Facilitate a structured consultation with peak bodies on potential further changes to the 7-day rule. Facilitate the connection to MHR of 2 Jurisdictional Breast Screen organisations.
Capability Action Plan	<p>Phase 3: 2023–24 CAP Industry engagement including:</p> <ul style="list-style-type: none"> • Further engagement and working with key stakeholders and groups to build on the implementing the foundational parts of the CAP, notably the capability framework and assessment tools. There will be KPI's to aim for adoption and uptake to measure success. • Keep existing stakeholders engaged on next steps including participation and potential involvement in the CAP. • Reach out to new stakeholders particularly educators, universities, and professional bodies on adoption and use of broader capability framework, alignment and influence into digital health course accreditation. This would include a high-level plan and approach by the end of 2023. • Presentation and promotion of work more broadly including influence with international collaborations and partnership opportunities where there is a drive for consistency and standardisation. • Enhance self-assessment tools and capability framework as published to make them more accessible. Collate and regularly share data insights. Compliment this data with other data

Program / Project	Indicative 2023–24 Scope
	<p>sources to build credible bank of knowledge and data which can be used in partnership with the Agency and inform on strategy.</p> <ul style="list-style-type: none"> • Digital Health specialist career pathways – Build upon and advance digital health career pathways matrix and career mapping. Increase involvement from IT industry collaboration including AIIA, ACS, MSIA and other groups towards a version 2.0. This work should start to link up with education and professional development pathways for individuals in building careers, identify traineeships and internships offered by industry and employers, and build a reference case for entering a digital health profession where there are many amazing opportunities to build a career and work towards a better society. • Digital Health Guidelines x 2 - Development of a further two digital health guidelines as key resources to support the health workforce. These can be informed by results of consultation as well as feedback from self-assessment tools - what supporting guidance and resources / training are required. Additionally, further work can be commissioned by the Agency to professional groups but aligned to CAP program under a series of guidelines all working to the same templated approach. • Digital Health Hub – Ongoing development and enhancement of the digital health hub, moving away from the prototype delivered in June 2023 to a broader release. The functionality and features of the prototype will be identified during the design and development process between March and June, depending on solution definition and what can be delivered for the budget available in the current financial year.
MHR Allied Health	<ul style="list-style-type: none"> • Drive increased uptake of MHR in the allied health sector to enable better sharing of health information amongst extended care teams • Contract with vendors of clinical information systems used in the allied health sector to enhance their software to integrate to MHR • Provide do-design and implementation support to software vendors to assist in their integration work • Confirm the best mechanism(s) / document type(s) through which allied health practitioners can contribute information about their patients to MHR • Conduct MHR-related awareness-building and education with allied health professionals, in conjunction with relevant peak bodies • Conduct registration support activities with allied health practices, to assist them through the process of registering for MHR
MHR Pathology Diagnostic and Imaging Upload	<ul style="list-style-type: none"> • Support the Department in their development of policy levers to drive the “upload by default” to MHR of pathology and diagnostic imaging reports • Engage with Jurisdictions, software providers, pathology service providers, and diagnostic imaging service providers on the staged implementation of this mandate over a 2-year period (2023–25) • Provide technical guidance and assistance to prospective uploaders that don’t yet have technical connectivity to MHR to enhance their systems with that connectivity, and meet the necessary conformance requirements • Establish a benefits framework that could be used to support the extension of an “upload by default” mandate beyond path/DI and into other sectors • Deliver change and adoption initiatives, targeted at both healthcare providers and consumers, in support of the mandate.
National Digital Health Modernisation Program	<ul style="list-style-type: none"> • Detailed scoping of the Health Information Exchange through collaboration with states and territories on the policy intent and architecture roadmap • Modernisation Program implementation plan including workforce strategy considerations • Stakeholder Engagement and Communication Plan • Costing for the preferred option and cost-benefit analysis, including costs for ongoing operation of new and existing MHR infrastructure to transition to future state. • Benefits management plan • Procurement plan • Cyber security plan. • Work will take account of the development of the Health Information Exchange architecture and a roadmap (and its interaction with MHR and the broader health ecosystem), which is expected to be completed in 2023-24 but remains subject to funding and agreement under the next Intergovernmental Agreement on National Digital Health.

Program / Project	Indicative 2023–24 Scope
MHR FHIR National Repository	<ul style="list-style-type: none"> • The establishment of a new National Repository Service to improve the capabilities of the My Health Record (MHR) system by replacing the existing MHR repository with a modernised, scalable service that is aligned with contemporary, international health industry data standards, in particular Health Level 7 (HL7) Fast Healthcare Interoperability Resources (FHIR). This initiative will: • drive interoperability between different information technology systems to help overcome the inability of different parts of the healthcare system to better share information to support improved health outcomes. • accelerate the digital and data reforms outlined in the Strengthening Medicare Taskforce report which recommends addressing the outdated and inflexible functionality and utility of the existing MHR system. • This implementation will accelerate the delivery of a national FHIR repository, enabling capabilities, to enable early support for key digital health initiatives including the potential for mandating uploads of Pathology and Diagnostic Imaging results using FHIR which is an initial element of a broader digital health modernisation agenda.
Aged Care ICT Platform	<ul style="list-style-type: none"> • Scope to be provided to be included in JAC paper • Vendors that provide software solutions to residential aged care facilities and multi-purpose services • GP CIS vendors that may support creation (in defined scenarios) and/or viewing of an ACTS • Support for the specified vendors to enhance their products to: • connect to the My Health Record system • integrate with My Health Record system functionality • enable the creation, upload and viewing of the ACTS.
Aged Care Support at Home	<ul style="list-style-type: none"> • Recognising the importance of streamlined access to information for older Australians and their carers and healthcare professionals, the Australian Government has announced additional funding in the 2023–24 Commonwealth Budget for the Agency to develop and implement a capability to enable key aged care information such as the aged care assessment summary to be uploaded to a client's MHR to streamline access to this information for consumers/carers and health professionals. • During 2023–24 the Agency will be working in partnership with the Department of Health and Aged Care to develop and implement capability to allow key aged care information such as support plan and assessment summary to be uploaded to a client's My Health Record to streamline access for consumers/carers and health professionals.
Comprehensive Health Assessment Program (CHAP) Integration	<ul style="list-style-type: none"> • The Department of Health and Aged Care (the Department) is seeking support from the Agency to integrate the Comprehensive Health Assessment Program (CHAP) questionnaires into GP clinical information systems (CIS). • Improving the uptake of annual health assessments (AHAs) for people with intellectual disability is a key government priority identified in the National Roadmap for People with Intellectual Disability (August 2021). • The government wishes to promote the conduct of AHAs, in part by making the tools required to do them more accessible and easier to use for GPs, people with intellectual disabilities, and their carers. • In Australia, the best practice tool (and only evidence-based tool) for undertaking AHAs is the CHAP. The CHAP is a two-part questionnaire requiring collaboration between the person with the intellectual disability, their carer, and their general practitioner. • The responsibilities of the Agency under this contract are set out below: • Provide advice to DOHAC regarding technical design options for the integration of the CHAP tool into GP CISs. • Develop business requirements and implementation guidelines that specify how GP CISs would enhance their products with the CHAP functionality. • Conduct a procurement exercise to select and contract with appropriate GP CIS vendors. • Support those contracted vendors through the implementation of the CHAP functionality and the delivery of required software enhancement milestones. • The Agency's brief is limited to getting the functionality implemented in GP CIS systems and does not extend to other priorities such as promoting awareness, use, and uptake of the CHAP tool by GPs.

Appendix B: 2023–24 performance targets – alignment with Agency purpose



Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 1 of 11	<p>Increased use of strategically significant Agency products:</p> <ul style="list-style-type: none"> • 10% increase in consumer use of My Health Record • 15% increase in provider use of My Health Record • 70,000 downloads of my health app • 3000 health delivery services and 20 business partners onboarded to Provider Connect Australia
Key focus area	Driving information sharing
Alignment to purpose	Measuring the increased usage of strategically significant Agency products aims to demonstrate how the Agency designs, delivers and manages infrastructure, solutions and initiatives that provide access and promote adoption to secure digital health services. Measuring usage also demonstrates the Agency's ability to facilitate access to digital health solutions across the healthcare system through new channels and services. This result is a direct measure of Agency products and health services also indirectly measures the adoption of new channels and services which leads to increased usage of Agency products and services.
Target base	Quantitative – providing a good indication of overall use of the MHR system and of PBS-listed electronic prescribing.
Target classification	Effectiveness – the result is beyond the direct control of the Agency as it relies on customers making decisions on how to access and use digital health products and is therefore a measure of the Agency's impact.
Target rationale	The result is about the increase in use of strategically significant Agency products. Use metrics are defined relevant to each product and it's intended role in achieving health system outcomes. The target percentages are based on estimated uptake models reflecting continued delivery of additional MHR functionality for both consumers and providers, including interoperability investments, and efforts by the Agency to connect more healthcare providers to My Health Record. Agency strategically significant products are those which are either considered part of national infrastructure or play a visible role in the delivery of digital health services to consumers, and which contribute to the improvement in healthcare outcomes as defined by the Benefits Framework.
Target calculation	$\% \text{ increased use} = \frac{\# \text{ of times MHR used: current FY} - \# \text{ of times MHR used: previous FY}}{\# \text{ of times MHR used: previous FY}}$
Target achievement	<p>Target met = all targets achieved</p> <p>Partially met = at least one target achieved</p> <p>Not met = no targets achieved</p>



Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 2 of 11	<p>Agency products meeting or exceeding the planned availability target of 99.9%:</p> <ul style="list-style-type: none"> • National Consumer Portal • National Provider Portal • My Health Mobile • API Gateway • Virtual Assistant (99.5%) • new products baselined as launched.
Key focus area	Driving information sharing.
Alignment to purpose	Measuring Agency products meeting or exceeding their planned availability targets aims to demonstrate the Agency's ability in maintaining a secure and stable national digital health infrastructure. The Agency directly contributes to this result because it is responsible for maintaining infrastructure security and enhancing infrastructure stability.
Target base	Quantitative – shedding light on whether the Agency is meeting or exceeding planned availability targets for significant Agency products.
Target classification	Effectiveness – this result is beyond the direct control of the Agency as it relies on infrastructure operators and is therefore a measure of the agency's impact.
Target rationale	<p>It is appropriate to measure the percentage of significant Agency products meeting or exceeding their planned availability targets.</p> <p><u>MHR, consumer and provider portals, and My Health Mobile, Provider Connect Australia:</u> The baseline planned target for significant Agency products that surround MHR data is 99.9% availability excluding planned maintenance. Products that surround MHR include the National Consumer Portal, National Provider Portal and My Health Mobile. This target was set during contract negotiations between the Agency and its delivery partner. The target is based on industry standards at the time of negotiation for availability of a system of this nature.</p> <p><u>API Gateway:</u> The API Gateway system availability Service-level Agreement (SLA) of 99.9% was agreed after assessment of current SLAs for existing products/systems and included the implementation of enhanced set of measures and service level frameworks when compared with what was in place for other technology partners.</p>
Target calculation	$\text{Number of hours available per year (planned)} = \frac{\text{Total uptime (significant Agency products)}}{\text{Total planned available hours in the year}}$
Target achievement	<p>Target met = all targets achieved</p> <p>Partially met = at least one target achieved</p> <p>Not met = no targets achieved</p>



Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 3 of 11	User experience of the my health app increases by 10% from 2022–23.
Key focus area	Driving information sharing.
Alignment to purpose	Measuring the user experience of MHR aims to demonstrate the usability, fit-for-purpose nature of digital health infrastructure developed, operated and designed by the Agency.
Target base	Quantitative – the first year (2022-23) was qualitative as it reported on the establishment of an approach and baseline for the appropriate measures for user experience of the MHR. Outer years (2023–24 onwards) will yield quantitative results.
Target classification	Effectiveness – measure of output in the first year (2022–23), but will measure effectiveness from 2023–24 onwards.
Target rationale	This result aims to demonstrate how effective the Agency has been in delivering and improving the usability of digital health infrastructure.
Target calculation	Product targeted. ‘Meets expectations’ to ‘does not meet expectations’ question, on a 4 -point scale to be determined at design, collected from users via feedback loop: <ol style="list-style-type: none"> 1. Agree 2. Somewhat agree 3. Somewhat disagree 4. Disagree
Target achievement	Target met = all components achieved Partially met = at least one component achieved Not met = no components achieved



Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 4 of 11	20,000 participants in digital health literacy and awareness related education events and training courses.
Key focus area	Driving information sharing.
Alignment to purpose	Conducting educational events allows the Agency to improve digital health literacy and awareness, enabling improved access and adoption of Agency products.
Target base	Quantitative results (the number of participants), though as reporting matures, there may be opportunity to yield qualitative results through analysing the impact of educational events.
Target classification	Measure of output, of the Agency's work in coordinating education activities.
Target rationale	<p>Measuring the number of participants in education events and training aims to demonstrate the Agency's contribution to improving digital health literacy and awareness for Agency products. This result measures the Agency's output which contributes to the intermediate impact of driving information sharing by designing, delivering and managing infrastructure, solutions and initiatives. The Agency is responsible for coordinating change management and education activities, while the states and territories are responsible for delivering training and education to the sector. Together this contributes to delivering improved digital health literacy and awareness.</p> <p>The target number of 20,000 participants allows the Agency to ensure it delivers high quality education events that are tailored to key focus areas across a core range of cohorts including:</p> <ul style="list-style-type: none"> • aged care • consumer digital health literacy • Specialist engagement
Target calculation	All Education and Adoption events in the Consumer Relationship Management database, excluding Train the Trainer sessions, are included in this reporting. Events co-delivered with clinical peaks, industry and other organisations are also included in the reporting.
Target achievement	<p>Target met = 100% of target achieved</p> <p>Partially met = at least 50% of target achieved</p> <p>Not met = less than 50% of target achieved</p>



Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 5 of 11	20% increase in Electronic Prescribing.
Key focus area	Driving information sharing.
Alignment to purpose	Measuring the increased use of strategically significant Agency services aims to demonstrate how the Agency designs, delivers and manages infrastructure, solutions and initiatives that provide access and promote adoption to secure digital health services. Measuring usage also demonstrates the Agency's ability to facilitate access to digital health solutions across the healthcare system through new channels and services. This result is a direct measure of Agency health services also indirectly measures the adoption of new channels and services.
Target base	Quantitative – providing a good indication of overall use of electronic prescribing.
Target classification	Effectiveness – the result is beyond the direct control of the Agency as it relies on customers making decisions on how to access and use digital health services and is therefore a measure of the Agency's impact.
Target rationale	The result is about the increase in use of strategically significant Agency services. Electronic prescriptions form part of the broader digital health and medication safety framework and will enable the prescribing, dispensing and claiming (where applicable) of medicines directly from an electronic prescription. Prescribers and their Subjects of Care will have the option to use a fully electronic prescription as an alternative to a paper prescription. Electronic prescribing is part of the critical national services. Electronic prescribing is important because it provides greater choice for patients, makes prescribing and dispensing medicines more efficient, may reduce prescribing and dispensing errors, supports electronic medication charts in hospitals and residential aged care facilities removes the need for handling and storing a physical paper prescription, supports digital health services such as telehealth services to ensure continuity of patient care, provides an opportunity to protect community members and health care providers from exposure to infectious diseases and maintains patient privacy and integrity of personal information. Electronic prescribing plays a critical and visible role in giving patients convenience and choice, and in supporting drug safety.
Target calculation	$\% \text{ increased use} = \frac{\# \text{ of PBS-listed EP dispenses: current FY} - \text{previous FY}}{\# \text{ of total PBS-listed dispenses: previous FY}}$
Target achievement	Target met = 20% target achieved or exceeded.

Performance Measure 1	Infrastructure solutions and initiatives provide access to and promote adoption of secure digital health services.
2022-23 target 6 of 11	A case study into My Health Record capability to support care transfers to hospital for aged care recipients.
Key focus area	Driving information sharing.
Alignment to purpose	Measuring improved access to digital health services and information as demonstrated by a case study into transitional care (care transfers to hospitals for aged care recipients) aims to demonstrate the usability, fit-for-purpose nature of digital health infrastructure developed, operated and designed by the Agency.
Target base	Qualitative.
Target classification	Measure of effectiveness – this result aims to demonstrate the effectiveness of the Agency’s work enhancing and improving digital health infrastructure usability to support the coordination and continuity of health care as aged care recipients transition to a hospital setting. The result is beyond the direct control of the Agency as it relies on other stakeholders’ contribution and is therefore a measure of the Agency’s impact.
Target rationale	The digital health solutions for aged care represent a significant proportion of the current digital health services provided to Australians. The program commenced in 2021 and knowledge of its performance is progressively being collected. Rather than setting a target for a specific aspect of the program, performance will be measured using a case study. This approach provides opportunities for deeper insights which could further inform existing policy interventions and/or the direction for future developments.
Target calculation	The case study may draw upon a range of evaluation methods including data analysis as well as reflections from relevant stakeholders. Rather than be limited to a single component, the evaluation will focus on understanding the broader context in order to explain if any interventions worked or failed, and whether they could be transferred to other settings and populations.
Target achievement	Target met = case study demonstrates improved access to digital health services and information Target partially met = case study demonstrates improved access to either digital health services or information Not met = case study shows no change or a reduction in access to digital health services and information



Performance Measure 2	Digital health interoperability available to healthcare providers and consumers that improves how people use digital health care information.
2022-23 target 7 of 11	10% increase in meaningful use of MHR from 2022–23.
Key focus area	Improving connectivity and advancing real time data exchange.
Alignment to purpose	Measuring meaningful use through a ‘meaningful use index’ for My Health Record aims to demonstrate how the Agency facilitates digital health interoperability between healthcare providers and consumers to improve how people use healthcare information.
Target base	Quantitative – the first year (2022-23) was qualitative as it reported on the establishment of an approach and baseline for the appropriate measures for meaningful use of the MHR. Outer years (2023–24 onwards) will yield quantitative results.
Target classification	Effectiveness - this result aims to demonstrate how effective the Agency has been in designing strategies that increase the meaningful use of digitally enabled health care information. The result is within the direct control of the Agency as it shows the Agency’s ability to effectively increase the meaningful use of products it develops.
Target rationale	This result aligns with the key focus area of interoperability supporting connected care. The Agency directly contributes to this result because it is responsible for designing strategies that increase the meaningful use of digitally enabled healthcare information.
Target calculation	<p>Meaningful use index formula:</p> $\text{Meaningful use} = \text{Usage from administrative data associated with direct human use} \times \text{Meaningful use multiplier - Proportion of that use that is meaningful within the appropriate context}$ <p>Measuring change in meaningful use over time:</p> $\text{Change in meaningful use index} = \frac{\text{Meaningful use index current FY}}{\text{Meaningful use index previous FY}} \times 100$ <p>This will vary by:</p> <ul style="list-style-type: none"> Aspect of meaningful use Cohort
Target achievement	<p>Target met = all components achieved</p> <p>Partially met = at least one component achieved</p> <p>Not met = no components achieved</p>



Performance Measure 2	Digital health interoperability available to healthcare providers and consumers that improves how people use digital health care information.
2022-23 target 8 of 11	20% increase in the number of healthcare professional (HCP) cross views in MHR compared to the previous financial year.
Key focus area	Improving connectivity and advancing real time data exchange.
Alignment to purpose	Measuring the cross views of documents in the MHR by Healthcare Providers (HCP) aims to demonstrate how HCP's use digital health documents, uploaded by other organisations, to ensure connected and coordinated health care services.
Target base	Quantitative results – it is appropriate in measuring the increase in cross views of digital health documents in the My Health Record by healthcare providers.
Target classification	Measure of effectiveness – this result aims to demonstrate how effective the Agency has been in developing and maintain infrastructure, systems, and protocols for sharing health information. The result is beyond the direct control of the Agency as it relies on HCPs connecting and using MHR and is therefore a measure of the agency's impact.
Target rationale	Health care professionals use digital health documents, uploaded by other organisations, for continuity of care. This result aligns to the intermediate impact of key activity which is facilitating digital health interoperability between health providers and consumers. The Agency directly contributes to this result because it is responsible for developing and maintain infrastructure, systems, and protocols for sharing health information.
Target calculation	$\% \text{ Change} = \frac{\text{\#docs views uploaded by others: current FY} - \text{\#docs views uploaded by others: previous FY}}{\text{\#docs views uploaded by others: previous FY}}$
Target achievement	Target met = 20% target achieved or exceeded Partially met = at least 50% of target achieved Not met = less than 50% of target achieved



Performance Measure 2	Digital health interoperability available to healthcare providers and consumers that improves how people use digital health care information.
2022-23 target 9 of 11	Implement the Agency's responsibilities under the National Healthcare Interoperability Plan, demonstrated by a case study into application of the National Interoperability Procurement guidance.
Key focus area	Improving connectivity and advancing real time data exchange.
Alignment to purpose	Measuring implementation of the Agency's responsibilities under the National Healthcare Interoperability Plan aims to demonstrate how the Agency uses high-quality data in the exchange of clinical information between healthcare providers, and the systems they use. It further demonstrates how the Agency contributes to a connected national digital health infrastructure.
Target base	Mixed results (both quantitative and qualitative). Baseline measurements can be made to understand the impact of interventions designed to address the interoperability plan action in question.
Target classification	Measure of output. This result aims to demonstrate the Agency's output in developing and maintain infrastructure, systems, and protocols for sharing health information.
Target rationale	This result aligns to the intermediate impact of key focus area of facilitate digital health connectivity between health providers and consumers. The Agency contributes to this result because it is responsible for developing and maintain infrastructure, systems, and protocols for sharing health information. While other agencies contribute to this outcome of an interoperable healthcare system.
Target calculation	The case study will measure the contribution of the National Healthcare Interoperability Plan actions on achieving interoperability. The case study may draw upon mixed methods approach including usage data where appropriate, surveys, interviews or and workshops.
Target achievement	Target met = case study demonstrates the Agency has progressed actions under the National Interoperability Plan regarding the application of National Interoperability Procurement guidance Not met = case study demonstrates no progressed actions



Performance Measure 3	Ensure digital health services, systems and products are sustainable and cost effective.
2022-23 target 10 of 11	Maintain 2022–23 partnership value index.
Key focus area	Modernising national infrastructure.
Alignment to purpose	Measuring the establishment and baseline of a partnership value index aims to demonstrate the Agency's ability to maintain cost-effective digital health infrastructure.
Target base	Mixed results (both quantitative and qualitative) - the partnership value index will yield mixed results in a way that allows the Agency to monitor partner performance improvements against a set of objective quantitative and qualitative criteria. The set of criteria will be designed to provide a comprehensive view of the Agency's partners performance and their value to the agency. At a minimum, the partnership value index will be designed to measure key elements of a partner balanced scorecard, including customer satisfaction and relationship, operational performance, costs and value for money and performance and process improvements and innovation.
Target classification	Efficiency – beyond the first year (2022–23) when a baseline for the index was established, the target is intended to identify efficiency gains.
Target rationale	This result aligns to the key focus of the Agency in designing strategies for innovative, sustainable, and cost-effective digital health solutions. Other agencies also contribute to this outcome through maintenance of digital health infrastructure in cost-effective ways.
Target calculation	The Partner Value Index will combine measures of varying variability (e.g. SLA performance) captured monthly, and customer satisfaction, (measured less frequently). The target was established in year 1 (2022–23) and maintenance of that index was the target set for 2023–24.
Target achievement	Target met = all components achieved Partially met = at least one component achieved Not met = no components achieved



Performance Measure 3	Ensure digital health services, systems and products are sustainable and cost effective.
2022-23 target 11 of 11	Conduct a 20% increase in train the trainer sessions and capacity building workshops compared to prior year, with a 90% approval rating.
Key focus area	Modernising national infrastructure.
Alignment to purpose	Measuring the number of Train-the-Trainer sessions and capacity building workshops aims to demonstrate the Agency's contribution toward a sustainable approach to national digital health literacy and awareness.
Target base	Quantitative results.
Target classification	Measure of output. The result is under direct control of the Agency as it is a measure of the Agency's work.
Target rationale	This result measures the Agency's output which contributes to the intermediate impact of delivering digital health services, systems and products that are sustainable and cost effective. The Agency is responsible for undertaking digital health capacity building with delivery partners, while delivery partners are responsible for providing training and education to aspects of the sector. Together this contributes to developing a sustainable and scalable approach to improving digital health literacy and awareness.
Target calculation	The Agency's Customer Relationship Management (CRM) database is the source of all data. All Education and Adoption events in the Customer Relationship Management (CRM) database that are flagged as Train-the-Trainer events are included in the reporting
Target achievement	Target met = 100% of target achieved with all meeting the target approval rating Partially met = at least 50% of target achieved with at least half meeting the target approval rating Not met = less than 50% of target achieved with less than half meeting the target approval rating





Australian Government

Australian Digital Health Agency