

Council for Connected Care

A better-connected healthcare system for all Australians

Communiqué

The fourth meeting of the Council for Connected Care (Council) was held in Sydney on 22 February 2024.

Members discussed the actions in the second quarterly progress report. All immediate and ongoing 2023/2024 actions are on track, 8 short or medium-term actions are ahead of schedule, while 1 ongoing action is behind schedule but is expected to be back on track in the next quarter.

The second quarterly progress report was published on 7 February 2024 and is available on the Agency's website.

The topic for this Council meeting was information sharing – the third of five key priority areas in the Interoperability Plan. The Department of Health and Aged Care provided an update on the legislation and policy work being undertaken in relation to the move to a share-by-default information-sharing system as a key plank of the government's Strengthening Medicare reform agenda.

An example patient journey and thought-provoking discussion was presented which highlighted the complexities of sharing healthcare information, the current and future state of sharing information in Australia, and the need for collaborative and coordinated development of solutions. A truly interoperable healthcare system starts with ensuring Individual Healthcare Identifiers (IHIs) & Healthcare Provider Identifier – Individuals (HPI-Is) are included in all administrative and clinical documentation at the point of care and at any transitions of care.

A powerful centrepiece for the meeting was the panel of healthcare consumers, who gave their time and insights to the CCC based on their lived experiences of the healthcare system in Australia. They spoke about the significance of person-centred approaches, the need for deep co-design on digital health innovation, the centrality of health equity, and the criticality of having clear and accessible information from right across their healthcare journeys available to them where and when they need it. The importance of accessing health information in one place such as the **my health** app is essential.

The panel also discussed the considerations that should inform consent processes and what successful near real-time information sharing would look like for them. The panel highlighted the extent to which digital literacy remains a barrier for many Australians and that more education on the My Health Record (MHR) will help improve uptake and access. One panel member eloquently described connected care as like a "nurturing village", highlighting its pivotal role as a supportive framework in an individual's healthcare journey.

As a final call to action, the panel advised that we will know when we have succeeded with connected healthcare when consumers trust the system, are able to access their information (including cross border information) at all times, when they don't need to repeat their medical history every time they see a clinician and when medical tests are reduced and results are rapidly available.



Figure 1: Consumer Panel: (Left to Right) Mehmet Kavlakoglu, Ricki Spencer, Pip Brennan, Deidre Ellem, Giacomo Romaagnoli & Shu Chen.



Figure 2: Consumer Panel: (Left to Right) Mehmet Kavlakoglu, Deidre Ellem, Shu Chen, Ricki Spencer & Pip Brennan.

The first of two workshops during the day enabled in-depth exploration and collaboration on information-sharing priority areas, fostering innovative ideas and shared responsibility for driving progress in information sharing. The varied perspectives exchanged during this session underscored the importance of collaboration and shared responsibility to ensure the seamless integration and dissemination of information throughout the healthcare system.

In the final session of the day, members discussed current education resources, future development, need and priorities for implementation of education content. This included what existing information-sharing education resources and content are available now, where additional efforts are needed to support the Interoperability Plan and its key stakeholders and future considerations to uplift the use of information-sharing content overall. This discussion will be used to inform the next Council meeting.

The Council will next meet in May 2024. The primary focus of discussion for the next meeting will be Innovation and Benefits.



MAKE HY HEALTH RECORD LIKE ALLOW for some FLEXIBILITY



TERMINOLOGY IS MY BIGGEST BARRIER

HELPS ... BUT IT'S MY TH STILL NOT WIDELY USED



WITH THIS CONTROL (EQUITY

HOUSING

KEES IN HIND SOME PEOPLE .-A. MOVE AROUND IS SOMETIMES MORE IMBRIGAT LOT!



HOW BO YOU NAMA KNOM HY BLOOD TEST RESOLTS ?! WHY ARE YOU

TALKING ABOUT IT NOW ?!



TKNOW WHERE OUR

INTO IS ACCESSED

COUID MADE EVERYONE ISOLATION

I HAVE BAD EXPERIENCES IN PUBLIC ... ACCESS TO TELEHEALTH

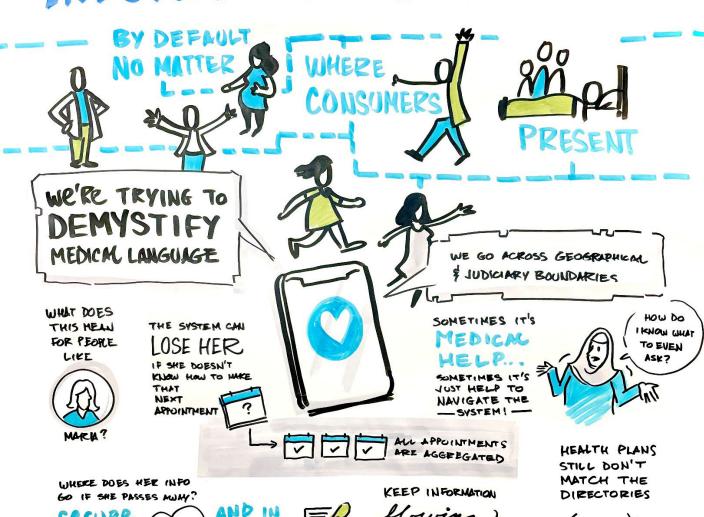
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RECOVER!

HOW DO WE ENABLE ---T-INFORMATION SHARING?







LEGISL-











LEGISLATION AND POLICY UPDATE

CONSUMERS DON'T HAVE TO START FROM the BEGINNING DIGITAL HEALTH BLUEPRINT ACTION PLAN



4 AREAS



HEMTHCARE
IDENTIFIER
FRAMEWORK

NOT EVERYONE KNOWS MUR EVEN EXISTS LEGISLATION AND MANDATES

CREATE

CHANGE

BYCHANGE STANDARDS



SHARING

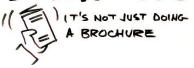
BY DEFAULT

ALL THIS NEEDS A

COMMS + ENGAGEMENT STOJEGY_



AWARENESS+ EDUCATION



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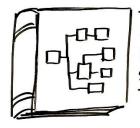


DIGITAL HEALTH STANDARDS \$ HEALTHCARE IDENTIFIERS

STANDARDS



NATIONAL DIGITAL HEALTH STANDARDS
PROGRAM

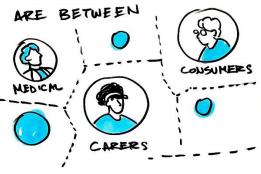


THE CATALOG HELPS YOU KNOW WHAT STAUDARDS TO FOLLOW



WE LOOK AT WHERE THE

BOUNDARIES



CONSULTATION CONSUMERS

WITH HELPS US

SAUITY CHECK

THESE BOUNDARIES

A 72 UL TON S'T)





THEIR FAMILY



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NATIONAL HEALTH INFORMATION EXCHANGE



PROVIDERS

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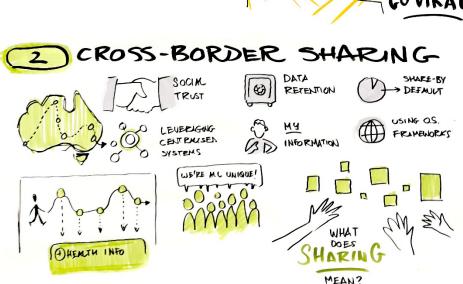
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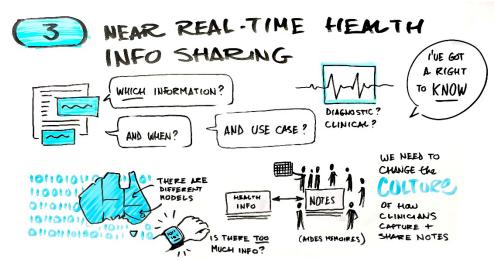
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SOLVES PROBLEMS

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SOME DON'T REFLECT

