Australian Government

Australian Digital Health Agency

Agenda

Council for Connected Care: Meeting 12 – Data and Design

Location: Virtual

Meeting: 12pm – 3pm (AEDT) on Wednesday, 12 March 2026

OFFICIAL

Item	Timing		Topic	Presenter
1	5 mins	12:00 pm	Welcome, Acknowledgement of Country	Anne Duggan, Chair
2	3 mins	12:05 pm	Conflicts of interest, apologies and housekeeping	Anne Duggan, Chair
3	2 mins	12:08 pm	Minutes of previous meeting, action items and papers for noting	Anne Duggan, Chair
4	60 mins	12:10 pm	The future of Agency products and design - Experience Centre video - Multi-discipline Care Teams - Future design/product vision for MHA and MHR Portals	Darian Eckersley, ADHA
	10 mins	1:10 pm	Break	
5	55 mins	1:20 pm	Panel Discussion: How digital health data is transforming care delivery	Facilitator: Tracey Davenport - ADHA Michelle Nelson Peter del Fante Paul Cooper Angela Ryan
6	20 mins	2:15 pm	National Clinical Governance Committee for Digital Health (NCGC-DH) update	Alex Powell & Chris Boyd-Skinner, ADHA

Australian Digital Health Agency
Agenda for Council for Connected Care: Meeting 12 – Data and Design, Thursday, 12 March 2026

Item	Timing		Topic	Presenter
7	15 mins	2:35 pm	Roundtable updates from members - current projects or initiatives that focus on meeting theme	
	10 mins	2:35 pm	Australian Telehealth Standards Consortium update	Richard Skimin
	5 mins	2:45 pm	NSW Single Front Door and Medicare Mental Health Phone Service integration project.	Monika Wheeler (PHN Co-operative)
8	10 mins	2:50 pm	Summary and other business	Anne Duggan, Chair & Peter Sprivulis, Deputy Chair
			Meeting close – 3:00 pm	

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Council for Connected Care

Agenda Item 2: Conflict of Interest

Meeting: Thursday, 12 March 2026

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Purpose

The purpose of the agenda item is for members to declare any new conflicts of interest.

Recommendation/s

It is recommended the Council for Connected Care:

1   **declare** any conflicts of interest

2   **note** that a conflict of interest declaration is required annually.

Summary of issues

Conflicts of interest

It is important that the Council and its members are free from perceived or real conflicts of interest with the business before them. The Chair will invite members to state any real or perceived conflicts of interest.

If you have been contacted by Secretariat Services, please provide your annual conflict of interest declaration as soon as possible.

Confidentiality

Members and proxies are asked to note that the meeting minutes, action list, and presentation slides are committee-in-confidence and are not to be shared or disclosed externally. Agenda papers and communiqués will be publicly available on the Agency website and can be shared externally.

Background

This is a standing agenda item.

Attachments

Nil

Contact officer: Cass Timmermans, Assistant Director, Interoperability

Australian Government
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Council for Connected Care

Draft Agenda Item 3: Minutes of previous meeting, action items and papers for noting

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of this agenda item is to seek endorsement of the meeting minutes from 12 November 2025, and to provide an update on the status of action items. Additionally, members are asked to note the papers submitted for the Australian Digital Health Standards Advisory Group update and the Interoperability Plan update that will not be discussed during this session.

Recommendation/s

It is recommended the Council for Connected Care:

1   **endorse** the 12 November 2025 meeting minutes at Attachment A

2   **note** the status of action items at Attachment B

3   **note** the Interoperability Plan progress update report for Q2 October to December 2025 at Attachment C.

Summary of issues

Minutes of the 12 November 2025 meeting are provided at Attachment A.

A list of all action items is provided at Attachment B.

Interoperability Plan Q2 Progress Report

The October 2025 to December 2025 quarterly progress report is provided at Attachment C. Updates on status and progress have been received from Agency and non-Agency action leads, including state and territory health departments, the Department of Health, Disability and Ageing, Services Australia, the Australian Institute of Health and Welfare, Healthdirect, and the Australasian Institute of Digital Health.

Of the 44 actions in the Interoperability Plan:

- 31 are complete
- 13 are on track – 6 ongoing actions and 7 short or medium-term actions.

Progress highlights include:

- The legislative reform program reached its final milestone with amendments to the Healthcare Identifiers Act 2010 (HI Act) receiving Royal Assent in December 2025.

- Legislative changes update authorisations for health technology solutions, enhance the Healthcare Provider Directory, and establish a legal framework for health information and data standards - positioning the HI Act as the cornerstone of a truly interoperable national health system.
- Jurisdictional consultations also advanced policy settings for the authorisation framework, enabling consistent health information sharing across all states and territories.
- The adoption of HL7 FHIR® AU Core and AU Base continues to expand across new and existing systems, ensuring alignment with international standards.
- Ongoing development of FHIR Implementation Guides is driving consistent interoperability, while technical initiatives are improving user experience and enabling seamless data exchange.
- A National Clinical Governance Committee for Digital Health has been approved by the Minister for Health and Ageing, and it has been established to oversee Share by Default implementation and provide guidance on virtual care, telehealth, and the safe use of AI in healthcare.
- 20 activities in the HI Roadmap shows that 14 have commenced as scheduled, 3 are complete and 3 are due to commence in 2026-27.

Australian Digital Health Standards Advisory Group

Following the invitation to join the Agency's Digital Health Communities Platform, members were invited to a workshop held on 4 December 2025, to discuss opportunities to use the Platform. The discussion focused on identifying groups of stakeholders that could utilise the online platform as a tool to support adoption and implementation of digital health standards.

Members also continued to share feedback as part of the consultation on the Agency's Draft [National Framework for Digital Health Standards](). There is strong interest in the recommendations of the Framework which include identifying a governance model for digital health standards, leveraging existing structures and clarifying roles and responsibilities across jurisdictions. Additionally, there is a strong interest in strengthening key areas relating to:

- Clinical governance and clinical safety – ensuring stakeholders understand the relevant standards that support clinical safety and their impact on the interoperability of digital health solutions and the safe use and transfer of health information.

- Improving understanding of digital heath standards across different audiences from technical to general interest groups - to understand what they are and how they are used.

The consultation closed 31January with anticipated release of the framework mid-year.

Attachments

Attachment A: [Attachment A - Minutes and Actions - 12 Nov 2025]()

Attachment B: [Attachment B - Actions list March 2026]()

Attachment C: [Q2 Oct - Dec 2025 Interoperability Progress Update Report]()

Contact officer: Cass Timmermans, Assistant Director, Interoperability

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Introduction

The *Connecting Australian Healthcare – National Healthcare Interoperability Plan 2023–2028* ([Interoperability Plan](#)) is Australia's first national plan to deliver a connected healthcare system for more personalised holistic care and better health and wellbeing outcomes for all Australians.

The Interoperability Plan sets out a national vision to share consumer health information in a safe, secure and seamless manner and identifies 44 actions across five priority areas - identity, standards, information sharing (sending, receiving and finding the right information), innovation (initiatives that drive interoperability) and measuring benefits - and policy tools to support interoperability.

The Australian Digital Health Agency (the Agency) established the Council for Connected Care (the Council) as the key governance body to provide strategic advice, oversee implementation of the Interoperability Plan, and report on progress.

The Interoperability Plan was published on the Agency's website on 11 July 2023. This is the tenth progress report against the 44 actions in the Interoperability Plan.

National Healthcare Interoperability Plan 2023–2028

70% actions complete

Quarterly progress	Identity	Standards	Information Sharing	Innovation	Benefits
3 actions completed in **Q2 2025–26**	**PRIORITY AREA 1** Total actions: 10 Complete actions: 4	**PRIORITY AREA 2** Total actions: 14 Complete actions: 12	**PRIORITY AREA 3** Total actions: 12 Complete actions: 8	**PRIORITY AREA 4** Total actions: 3 Complete actions: 2	**PRIORITY AREA 5** Total actions: 4 Complete actions: 4
	40% complete	86% complete	66% complete	67% complete	100% complete

Actions completed in Q2 2025–26

- **1.5** Review Healthcare Provider Identifier Individual (HPI-I) conformance
- **2.10** Including terminology in datasets
- **3.10** Publish-subscribe service

Open actions 2026–27 delivery

Identity	Standards	Information Sharing	Innovation	Benefits
1.6 Develop deeper network structures **1.10** Integrating the NHSD and the Health Provider Directory (HPD)	**2.12** API information exchange	**3.9** Information-sharing model agreement		

Open actions 2027–28 delivery

Identity	Standards	Information Sharing	Innovation	Benefits
1.1 Using healthcare identifiers **1.2** Promoting healthcare identifiers **1.4** Healthcare identifier matching **1.7** Using the National Health Services Directory (NHSD)	**2.3** HL7 FHIR® AU usage	**3.2** API Gateway information exchange **3.11** Consistent legislative health definitions **3.12** Harmonising legislation	**4.2** Interoperability workforce	

Completed Actions

Identity	Standards	Information Sharing	Innovation	Benefits
1.3 Healthcare Identifiers Roadmap **1.5** Review Healthcare Provider Identifier Individual (HPI-I) conformance **1.8** Implementing the 2019 National Health Services Directory (NHSD) review **1.9** Provider Connect Australia™	**2.1** Terminology in digital health systems **2.2** Develop specifications and standards **2.4** International standards participation **2.5** Standards catalogue **2.6** National Digital Health Standards Program (NDHSP) **2.7** Standards guiding principles **2.8** Standards gap analysis **2.9** Engage standards stakeholders **2.10** Including terminology in datasets **2.11** National library of terminology mapping **2.13** Develop a conformance framework **2.14** Standards development cooperative	**3.1** Interoperability in procurement **3.3** Procurement guidance **3.4** Online interoperability toolkit **3.5** GP and aged care facility interoperability **3.6** Consent Management **3.7** Research international practice **3.8** Care Management Network **3.10** Publish-subscribe service	**4.1** Interoperability innovation challenges **4.3** Develop education content	**5.1** Administer interoperability survey **5.2** Publish annual report **5.3** Assess digital health maturity models **5.4** GDHP interoperability maturity model **6.1** Review policy tools*

*This action item is included under Section 8 of the Interoperability Plan, Policy tools to support Interoperability.

Identity

Progress highlights

This quarter marks a major step forward in strengthening Australia's digital health foundations. The legislative reform program reached its final milestone with amendments to the Healthcare Identifiers Act 2010 (HI Act) receiving Royal Assent in December 2025. These changes update authorisations for health technology solutions, enhance the Healthcare Provider Directory, and establish a legal framework for health information and data standards—positioning the HI Act as the cornerstone of a truly interoperable national health system.

Technical progress has also been strong. The Healthcare Identifiers (HI) Service introduced a new identity attribute and improved search functionality to boost clinical accuracy, increase match rates and reliability, and support safer health information exchange. In November, the successful release of Provider Connect Australia™ (PCA™) R25.2 further strengthened HI Service support, improving the management of organisations and individuals while delivering a refreshed user experience.

Integration of national directories is advancing well. Healthdirect and the Agency are developing a joint strategic roadmap for the National Health Services Directory (NHSD) and Health Connect Australia Provider Directory, with workshops completed and further consultation scheduled for January 2026.

Action status

4 actions have been marked as complete under the Identity priority area. As action 1.5 was completed in this reporting period, it has been included in this section. The Agency will no longer be reporting against completed action items.

Priority Area 1 – Identity: Q2 2025-26 update

Action 1.1 Using healthcare identifiers	Lead(s)	Timeframe	Status
Jurisdiction health departments, the Agency and Services Australia will adopt and use national healthcare identifiers in future digital health initiatives involving health information sharing.	• The Agency • Services Australia • All Health Departments	Ongoing	On track

The planned legislative reform for Healthcare Identifiers has progressed, with further amendments to the Healthcare Identifiers Act 2010 (HID Act) passed on 27 November 2025 via the Regulatory Reform Omnibus Bill 2025 and receiving Royal Assent on 4 December 2025. Key amendments include: • Updated authorisations for health technology solutions. • Enhanced Healthcare Provider Directory (HPD) for more efficient provider communication. • Legal authority to establish health information and data standards. This marks the final stage of the legislative reform program, positioning the HID Act as the foundation for an interoperable, digitally connected national health system. Regulatory changes are being developed to support legislative reform, enabling healthcare provider directories to use healthcare identifiers. This applies to directories such as: • National Health Services Directory (under the leadership of Healthdirect) • Provider Connect Australia (under the leadership of the Agency) • Other government-operated or funded directories	Services Australia continues to work in close partnership with the Department of Health, Disability and Ageing to advance options for consolidated identifiers. These efforts aim to enable connected care by establishing common identifiers for consumers, providers, and organisations across Services Australia's health, aged care, and disability programs. Services Australia is actively adopting and integrating national healthcare identifiers into future digital health initiatives to enable secure and efficient health information sharing. This will strengthen interoperability across health, aged care, and disability programs. Allied health associations can now use the enhanced HPI-I registration functionality to directly register and maintain Healthcare Provider Identifier–Individual (HPI-I) records on behalf of their members, ensuring streamlined access to the HI Service and My Health Record system.

Action 1.2 Promoting healthcare identifiers	Lead(s)	Timeframe	Status
Jurisdiction health departments, the Agency and Services Australia will adopt and use national healthcare identifiers in future digital health initiatives involving health information sharing.	• The Agency • Services Australia	Ongoing	On track

The Agency is advancing deliverables under the Healthcare Identifiers Roadmap (HI Roadmap) to promote the use of healthcare identifiers, supported by educational resources and guidance materials.	Services Australia continues to progress preliminary development activity in preparation for uplifting the current IHI for Newborn webservice to the FHIR Standard.

Action 1.4 Healthcare identifier matching	Lead(s)	Timeframe	Status
Develop and implement a program of improvements in healthcare identifier matching (especially IHIs), focusing on data quality, user interfaces, service improvements, enhancements and proactive efforts on IHI retrieval.	• The Agency • Services Australia	Short	On track

Services Australia has commenced development of a framework and process for ongoing identification of future enhancements and continuous improvement activity. This will support the development of a Data Matching and Data Quality improvement plan, scheduled to commence in FY2026/27.

Services Australia has implemented a new data element, Sex Assigned at Birth, into the Healthcare Identifiers (HI) Service to enhance identity management. This update aims to improve clinical accuracy and facilitates safer health information exchange across digital health systems. The inclusion of this data element represents a significant step toward reducing data ambiguity and supporting inclusive, standards-based identity attributes within national health infrastructure.

Services Australia has also reclassified Email as an Identifier Search to enhance the Healthcare Identifiers (HI) Service search functionality so that email-based searches for Individual Healthcare Identifiers (IHIs) apply the same soft-matching rules used for ID Number Search. By treating email as an identifier rather than an address, the change is expected to improve match rates and support more reliable identity resolution across health information systems.

The Agency is implementing changes to HI Service conformance requirements based on plan-of-action recommendations to promote best practices and improve IHI matching.

Action 1.5 Review Healthcare Provider Identifier – Individual (HPI-I) conformance	Lead(s)	Timeframe	Status
Review conformance requirements for using HPI-Is when uploading documents to the My Health Record system, recognising that providers are at different stages of use of HPI-Is.	• The Agency	Short	Complete

The Agency continues to work with states, territories, and private health organisations to progress transition timelines and implement Healthcare Provider Identifiers – Individual (HPI-Is) in clinical document uploads to My Health Record.

To help overcome potential barriers to implement HPI-Is, new clinical document template packages have been developed and published on the Developer Portal, providing additional support for jurisdictions and private health organisations as they implement their transition plans.

From June 2026, it is expected that most jurisdictions and private health organisations will no longer require exemptions and will include HPI-Is in uploads to My Health Record. This action is now complete, and we will continue to monitor progress as part of BAU and ongoing improvements.

Action 1.6 Develop deeper network structures

	Lead(s)	Timeframe	Status
Develop deeper Healthcare Provider Identifier – Organisation (HPI-O) network structures, including revising published guidance, to support enhancing online HPI-O network registration, and work with vendors to address software limitations.	• The Agency • Services Australia	Short	On track
Services Australia continues to work in partnership with the Department of Health, Disability and Ageing and the Australian Digital Health Agency to refine organisational structures that support recent and upcoming legislative amendments.	These efforts aim to strengthen HPI-O network structures, enhance online registration processes, and address software limitations in partnership with vendors. This work will expand the use and adoption of healthcare identifiers across health administration, aged care, and disability programs.		

Action 1.7 Using the National Health Services Directory (NHSD)

	Lead(s)	Timeframe	Status
Use the NHSD as the service directory for digital health programs. Where this is not possible (such as for a specialised directory), jurisdictions will work with Healthdirect Australia and the Agency to support the required flow of information.	• All Health Departments	Ongoing	On track
Building on the previous quarter's progress, Healthdirect and the Agency have advanced work on the joint strategic roadmap to ensure alignment between the NHSD and the Health Connect Australia Provider Directory. This roadmap will underpin integration efforts and support the seamless flow of information across the healthcare ecosystem.	Momentum continues, with recent Health Connect Australia workshops helping to shape a unified approach for directory alignment and interoperability. Further consultation with jurisdictions is scheduled for January 2026, reinforcing collaboration and ensuring NHSD remains a core data source within the national Health Information Exchange.		

Action 1.10 Integrating the NHSD and the Health Provider Directory (HPD)

	Lead(s)	Timeframe	Status
Assess the feasibility of integrating the NHSD and the HPD to reduce duplication and rationalise the national directory infrastructure.	• The Agency	Short	On track
Feasibility of integrating the NHSD and HPD has been assessed and confirmed, and this integration is reflected in the Health Connect Australia conceptual architecture. Work is underway to develop a joint strategic roadmap for the National Health Service Directory (NHSD), the Health Connect Australia Provider Directory, and Provider Connect Australia (PCA).	Implementation of the NHSD integration is planned for post-pilot phase of the Health Connect Australia Health Provider Directory which is due to commence in late 2026.		

Standards

Progress highlights

This quarter has seen strong progress in advancing interoperability and standards across Australia's digital health ecosystem, with significant developments in standards, terminology, and authentication.

The adoption of HL7 FHIR® AU Core and AU Base continues to expand across new and existing systems, ensuring alignment with international standards. Ongoing development of FHIR Implementation Guides is driving consistent interoperability, while technical initiatives are improving user experience and enabling seamless data exchange.

Terminology integration has also advanced considerably. Action 2.10 is now complete, reinforcing the foundations for implementing and adopting national clinical terminologies. Recognising that terminology evolves continuously, the National Clinical Terminology Service (NCTS) will maintain monthly releases to deliver updated content and support safer care.

To ensure secure and scalable access to national digital health services, a business case for future authentication solutions is in development, ensuring standards underpin information exchange.

In November, more than 100 healthcare leaders gathered for INSPIRE: Interoperability & Standards in Practice – Innovation, Readiness and Education. The event, hosted by the Agency, highlighted key enablers of success, addressed contemporary challenges, and fostered a shared understanding of the strategic steps required to enable connected care through the adoption and implementation of digital health standards.

Action status

12 actions have been marked as complete under the Standards priority area. As action 2.10 was completed in this reporting period, it has been included in this section. The Agency will no longer be reporting against completed action items.

Priority Area 2 – Standards: Q2 2025-26 update

Action 2.3 HL7 FHIR® AU usage		Lead(s)	Timeframe	Status
Develop and expand on HL7 FHIR® AU Core and AU Base for all Agency and Healthdirect digital health systems and services, including modifications and new systems.		• The Agency • Healthdirect	Ongoing	On track

The Agency has continued to develop its FHIR® Implementation Guides, to maximise the use of existing HL7 standards such as FHIR® AU Core and FHIR® AU Base. This approach promotes greater interoperability and consistency across the national digital health infrastructure.

Healthdirect continues to broaden its use of FHIR standards, with solution design for FHIR-based booking provider integration with Symptom Checker now finalised and the Virtual GP service data model also aligning with AU-CDI.

Minor improvements to National Health Services Directory (NHSD) FHIR Implementation Guide (IG) profiles, identified during the AU Core alignment assessment in Q1 of FY25/26, are being evaluated for effort and prioritisation as part of the FY25/26 NHSD work plan.

In addition, Healthdirect has become an active participant in the national Sparked initiative. In November 2025, it presented at the Sparked Clinical Design Group (CDG), showcasing ongoing efforts to enhance FHIR-based data exchange capabilities.

Priority Area 2 – Standards: Q2 2025-26 update

Action 2.10 Including terminology in datasets	**Lead(s)**	**Timeframe**	**Status**
Coordinate discussions on expanding minimum datasets to incorporate the use of SNOMED CT-AU, AMT and LOINC for data not currently collected in areas such as medications, adverse reactions, pathology and radiology.	• The Agency	Short	Complete
The National Clinical Terminology Service (NCTS) manages, develops, and distributes national clinical terminologies and related tools and services to support the Australian healthcare community. The NCTS provides state-of-the-art terminology services that promote implementation and adoption of national clinical terminologies in Australia. • SNOMED CT-AU supports safer care, enables tools like clinical decision support, and allows health data to be reused for research, reporting, and system improvement • The Australian Medical Terminology (AMT) is integrated with PBS listings and supports interoperability, decision support, and safe medication management across care settings • LOINC is used for standardising the reporting of pathology and diagnostic results.	The process to incorporate terminology standards through the NCTS is ongoing, and so this action is being reported complete. Each month, the NCTS releases include applicable content for SNOMED CT®-AU, AMT and LOINC. Any opportunities to incorporate terminology standards through national priorities will continue to be identified, scoped and included in the NCTS. This action is now complete, and we will continue to monitor progress as part of BAU.		

Action 2.12 API information exchange	**Lead(s)**	**Timeframe**	**Status**
Engage with the health technology sector to enhance digital health systems to use HL7 FHIR®, OAuth and OpenID Connect for API information exchanges.	• The Agency	Short	On track
The Agency is working closely with Services Australia and the Department of Health, Disability and Ageing to develop a business case for future authentication solutions that will strengthen security and improve user experience. The Agency's Foundation FHIR Framework is being refined following expert input and internal reviews. A governance submission is on track for early 2026, and an external stakeholder awareness forum is planned for mid-2026. Development of the Health Connect Authorisation Service is progressing, with the first release planned for mid-2026.	Work on the Identity, Authentication and Authorisation Framework is advancing to guide key programs such as My Health Record on FHIR and Health Connect Australia. This includes developing the Health Connect Authorisation Service and common service specifications to ensure secure access and interoperability. The Record Sharing Services Framework for consumers and providers is also progressing, ensuring consistency across systems and supporting seamless information sharing.		

Information Sharing

Progress highlights

This quarter saw significant progress in governance, legislative reform, and technical enablement to support a more connected and secure health information environment.

Amendments to the Healthcare Identifiers Act were passed in November 2025, strengthening the Healthcare Provider Directory and providing legal authority to establish national health information and data standards. These changes lay the groundwork for cross-jurisdictional sharing. Jurisdictional consultations also advanced policy settings for the authorisation framework, enabling consistent health information sharing across all states and territories.

A National Clinical Governance Committee for Digital Health has been approved by the Minister for Health and Ageing, and it has been established to oversee Share by Default implementation and provide guidance on virtual care, telehealth, and the safe use of AI in healthcare.

Through consultation and engagement, an efficient funding approach for the publish–subscribe service has been put forward, removing the need for a separate business case and allowing Action 3.10 to be marked complete.

Action status

8 actions have been marked as complete under the Information Sharing priority area. As action 3.10 was completed in this reporting period, it has been included in this section. The Agency will no longer be reporting against completed action items.

Priority Area 3 – Information Sharing: Q1 2025-26 update

Action 3.2 API Gateway information exchange	Lead(s)	Timeframe	Status
Promote the use of the API Gateway to support interoperable information exchange, including development of a service catalogue.	• The Agency	Ongoing	On track
Building on the production release of the Comprehensive Health Assessment Form (CHAP) reported in the last quarter, in this quarter an operational support model has been established for the National Smart Apps and Forms service and the CHAP Smart on FHIR® form. This foundation strengthens future deployments and accelerates interoperability across systems. Vendor integration activities for CHAP are progressing, including a dedicated Smart on FHIR track at the HL7 Australia FHIR Melbourne Connectathon held in December.	Additionally, service design and discovery for the Health Connect Australia Marketplace has commenced, with an initial focus on engaging software vendors and the developer community.		

Action 3.9 Information-sharing authorisation framework	Lead(s)	Timeframe	Status
Collaborate with jurisdictions and other stakeholders to develop a legislative and policy framework that sets out the authorisations and prohibitions for the collection, use and disclosure of health information through a national health information exchange. The framework will address healthcare provider roles and responsibilities, patient control and consent and a regulatory approach to standards, privacy, audit, compliance and security.	• The Department	Short	On track
A policy paper has been developed outlining a proposed authorisation framework to strengthen governance for health information sharing within the HealthConnect ecosystem, following extensive jurisdictional consultation last quarter. The Department has completed targeted consultation with key stakeholders on the Share by Default Rules for pathology and diagnostic imaging services, including: • Peak bodies (pathology and diagnostic imaging) • States and Territories • Medical software vendors • Consumer Health Forum • NACCHO The Department is preparing the pathology and imaging sectors to implement Share by Default, ensuring providers are ready to share required health information.	In addition, the Department is exploring options to broaden health information sharing for consumers and healthcare providers, including expanding the scope of Share by Default. Any new requirements will undergo stakeholder consultation and detailed rulemaking. Future possibilities may include sharing medication management and care planning information in My Health Record. A new National Clinical Governance Committee for Digital Health (NCGC-DH) has been established after being approved by the Minister for Health and Ageing. The NCGC-DH replaces the former Clinical Reference Group, and has an expanded remit beyond Share by Default and Faster Access to include Virtual care and telehealth, as well as safe and responsible use of AI in healthcare		

Action 3.10 Publish–subscribe service	Lead(s)	Timeframe	Status
Develop a business case for a national publish–subscribe service to support actions such as alerts, changes to an individual's health information and notifications of acute episodes. This would be available to individuals, healthcare providers and healthcare provider organisations.	• The Agency	Medium	Complete
Engagement with digital health advisors and the Health Connect Clinical Working Group has taken place, and all outputs have been documented. Clinical insights and project inputs have been integrated into the Agency's Digital Health Investment Plan, eliminating the need for a separate business case.	The Digital Health Investment Plan approach will underpin funding requests for the next stages of work in the 2026/27 financial year. As a stand-alone business case is no longer required, this action has been marked complete.		

Action 3.11 Consistent legislative health definitions	Lead(s)	Timeframe	Status
Collaborate with jurisdictions and key stakeholders to develop consistent definitions to support health information sharing.	• The Department	Medium	On track
Recent amendments to the Healthcare Identifiers Act (HID Act) were passed on 27 November 2025 via the Regulatory Reform Omnibus Bill 2025 and received Royal Assent on 4 December 2025. These changes lay the foundation for cross-jurisdictional health information sharing. Key changes include: • Enhancing the Healthcare Provider Directory (HPD) to ensure accurate provider identification and more efficient communication.	• Granting legal authority to establish national health information and data standards, enabling greater interoperability across systems. The HID Act changes are foundational pieces to support health information sharing but a review of the My Health Record Act to determine what changes will be needed to support information sharing will commence in early 2026.		

Action 3.12 Harmonising legislation	Lead(s)	Timeframe	Status
Undertake collaborative intergovernmental work on harmonising relevant jurisdiction legislation, drawing on outcomes from Action 3.11.	• All Health Departments	Medium	On track
The HealthConnect Legal and Policy Working Group met twice this quarter, focussing on policy settings for a proposed authorisation framework governing the collection, use, and disclosure of health information within HealthConnect.	Key work included foundational amendments to the Healthcare Identifiers Act 2010 (HID Act) to enable cross-jurisdictional health information sharing: • Enhancing the Healthcare Provider Directory (HPD) for accurate provider identification and efficient communication. • Establishing legal authority to create national health information and data standards to support interoperability.		

Innovation

Progress highlights

The Agency continues to deliver targeted initiatives to build a skilled digital health workforce, advancing innovation and workforce capability across the health sector under the Capability Action Plan, and in partnership with the Australasian Institute of Digital Health (AIDH). Two key outputs were delivered this quarter:

- Digital Health in Healthcare: Understanding My Health Record – a literacy course designed for vocational healthcare students.

- Supporting Quality Aged Care with My Health Record – a course tailored for the current aged care workforce

Looking ahead, two additional resources are scheduled for release in early 2026:

- A train-the-trainer toolkit for educators to embed digital health content in health-related degrees.

- A digital health foundations course for nursing and midwifery students.

To ensure these resources are effectively embedded and support long-term capability building, broader implementation planning is underway across education and workforce sectors.

Action status

2 actions are complete under the innovation priority. The Agency will no longer be reporting against completed action items.

Priority Area 4 – Innovation: Q2 2025-26 update

Action 4.2 Interoperability workforce	Lead(s)	Timeframe	Status
Implement the National Digital Health Workforce and Education Roadmap to support the workforce required to progress interoperability.	• The Agency • Australasian Institute of Digital Health	Ongoing	On track

Throughout 2025, the Agency partnered with multiple universities, research and educational institutions to create digital health education content to build the digital health capability of the current and future health and care workforce. This quarter saw delivery of 2 key outputs: • Digital Health in Healthcare: Understanding My Health Record – a digital health literacy course for vocational healthcare students. • Supporting quality aged care with My Health Record – a course for the current aged care workforce	There are 2 additional resources which will be released in early 2026: • Train the trainer toolkit for educators to embed digital health content in health-related degrees. • Digital health foundations course for nursing and midwifery students. Broader implementation is being planned across education and workforce sectors. These activities support the long-term goal of building capability across the health sector to deliver more connected and digitally enabled care.

Benefits

Progress highlights

As the peak governance body for the Interoperability Plan, the Council for Connected Care (Council) ensures that investments in interoperability deliver measurable benefits for Australians. The Council provides strategic advice on national priorities and supports implementation efforts that strengthen connected care across the health system.

On 12 November 2025, the Council met face-to-face to focus on improving transitions of care through greater interoperability. Discussions explored opportunities to enhance continuity, integration, and consumer-centred approaches across Australia's connected care ecosystem. This reinforced the Council's commitment to improving patient outcomes by addressing critical points of care transition and chronic condition management.

In November 2025, enhancements to My Health Record were introduced to support continuity of care for older Australians. These improvements streamline digital processes and strengthen coordination during transitions between aged care and hospital settings. They contribute to better outcomes in aged care environments and improved transition management across Australia's health network.

Action status

All actions are complete under the Benefits priority area.

Introduction

The Agency, in collaboration with the Department of Health, Disability and Ageing and Services Australia, has developed a National Healthcare Identifiers Roadmap 2023–2028 that includes 20 activities to drive uptake of the Healthcare Identifiers Service.

Healthcare identifiers are fundamental to a connected healthcare system. They support information sharing by accurately identifying the healthcare recipient, provider and organisation, ensuring information is shared for the right individual to the right provider. This improves the quality, safety and efficiency of care provided and puts Australians even more firmly at the centre of their own healthcare experience.
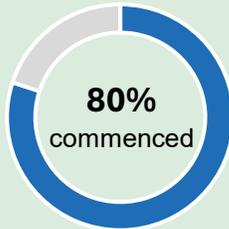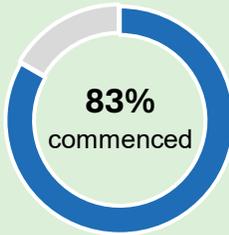
The Healthcare Identifiers Roadmap is an action in the Connecting Australian Healthcare – National Interoperability Plan 2023–2028 that is governed by the Council for Connected Care and is critical for progressing national digital health programs, including Share by Default for pathology and diagnostic imaging reports, electronic prescribing, electronic requesting, MyMedicare and Health Connect Australia.

Identity

Health information associated with the right people

National Healthcare Identifiers Roadmap 2023–2028

	Legislation and Policy	HI Service Improvement	Architecture and Data Standards	Operational Improvement
	Category 1 Total activities: 5 Commenced activities: 4 Completed activities: 0	**Category 2** Total activities: 6 Commenced activities: 5 Completed activities: 0	**Category 3** Total activities: 5 Commenced activities: 4 Completed activities: 1	**Category 4** Total activities: 4 Commenced activities: 4 Completed activities: 1
	Key outcomes include: • Legislative reform to support all parties to manage the health sector effectively and efficiently, and research and evaluation to support continued improvements to outcomes for patients. • Use of national healthcare identifiers to identify a consumer, healthcare provider individual or healthcare provider organisation.	**Key outcomes include:** • HI Service integrated to enable visibility of Individual Healthcare Identifiers (IHIs) to clinical and administrative users within patient administration and clinical systems • Improved data quality and error resolution rates • Increased data match rate returns	**Key outcomes include:** • IHIs, Healthcare Provider Identifiers – Individual (HPI-Is) and Healthcare Provider Identifiers – Organisation (HPI-Os) are integrated into all systems supporting clinical workflows • IHIs, HPI-Is and HPI-Os are available for any form of clinical communication or handover	**Key outcomes include:** • Identifier matching errors are minimised • Effective and streamlined management of healthcare identifiers • Processes in place for managing healthcare identifiers across the lifecycle from birth to death.
	80% commenced	**83%** commenced	**80%** commenced	**100%** commenced
Commenced Activities	**HIA-01** HI legislative reform program **HIA-02** Australian Government policy position for HI Service adoption **HIA-03** Development of a simplified guide to the HI Act **HIA-04** Template policies and guidelines on HI use	**HIA-06** Data matching and data quality improvements **HIA-07** Review existing messages and responses **HIA-08** Improvements to data matching for Aboriginal and Torres Strait Islander people **HIA-09** Enhanced search considerations **HIA-10** Individual Healthcare Identifiers for newborns	**HIA-12** Healthcare Provider Identifier – Organisations: Guidance on appropriate structures **HIA-14** Update technical standards **HIA-15** HI Service architecture and future extensibility	**HIA-18** Development of education materials for HI Service **HIA-19** HI support model and future operational requirements **HIA-20** Enhanced governance
Future Activities	**HIA-05** HI use in consumer applications	**HIA-11** Consumer empowered matching	**HIA-16** Clinical systems architecture and design	

HI Roadmap – Legislation and Policy: Q2 2025-26 update

HIA 1 HI legislative reform program	Lead(s)	Start date	Status
	• The Department	2023–2024	On track

Further amendments to the Healthcare Identifiers Act 2010 (HID Act) were passed on 27 November 2025 via the Regulatory Reform Omnibus Bill 2025 and received Royal Assent on 4 December 2025, concluding the planned legislative reform program for the HID Act. These reforms position the HID Act as the foundation for an interoperable, digitally connected national health system.

Key changes include:

- Updated authorisations for health technology solutions.
- Enhancements to the Healthcare Provider Directory (HPD) to ensure accurate provider identification and efficient communication.
- Legal authority to establish health information and data standards to support interoperability.

The next phase focuses on the regulatory framework, including draft Healthcare Identifiers Regulations that will authorise provider directories to use healthcare identifiers.

These regulations will apply to directories such as:

- National Health Services Directory (Healthdirect)
- Provider Connect Australia (Australian Digital Health Agency)
- Other government-operated or funded directories.

The draft is progressing through a comprehensive governance process, including review by the Digital Health Oversight Committee (DHOC) Healthcare Identifiers Sub-Committee (HISC). Completion of this review is expected in early 2026, marking the final step in implementing these reforms.

HIA 2 Australian Government policy position for HI Service adoption	Lead(s)	Start date	Status
	• The Department	2023–2024	On track

The Department of Health, Disability and Ageing focused on amendments to the Healthcare Identifiers Act 2010 (HID Act) to establish the policy position for HI Service adoption. This work supported the progress of legislative changes and consolidated previous reviews and assessments to ensure alignment with broader digital health objectives.

Consolidation activities included synthesising stakeholder feedback, analysing prior implementation challenges, and mapping dependencies across related health legislation and standards.

As a result, the amendments were informed by a strong evidence base, and the HID Act was ultimately positioned as a key enabler of interoperability within the national health system.

HIA 3 Development of a simplified guide to the HI act	Lead(s)	Start date	Status
	• The Department	2025–2026	On track
Work commenced on the development of a simplified guide to the Healthcare Identifiers Act 2010 (HID Act), with the aim of improving accessibility and understanding for stakeholders, including healthcare providers, technology vendors, and policy teams. The first round of content development is underway and is expected to be completed by mid 2026.	The guide is being designed as a dynamic resource that will be continuously reviewed and updated, supporting consistent interpretation and compliance across the sector. It will remain adaptable to future legislative changes, evolving digital health standards, and stakeholder needs.		

HIA 4 Template policies and guidelines on HI use	Lead(s)	Start date	Status
	• The Agency • The Department	2025–2026	On track
Jointly led by the Department of Health, Disability and Ageing and the Agency, the initial phase of this Healthcare Identifier activity is progressing. This phase focuses on establishing a baseline through a comprehensive review of the Healthcare Identifiers Act—including recent legislative amendments—alongside associated regulatory instruments and existing policy frameworks. The key deliverable for this phase is a baseline report that consolidates requirements and dependencies to inform the development of a standardised policy template and guidance materials for HI usage across the sector.	The initial phase commenced in November with a baseline review of the Act and an environmental scan of existing policies and template guidance related to HI use, including comparable resources from adjacent programs. Amendments introduced through the Aged Care and Other Legislation Amendment Act and the Regulatory Reform Omnibus Act have now come into effect, aligning with plans to accelerate this work in early 2026. The Agency is moving to modular conformance requiring HI Service to be a mandatory foundational component of any national service connection to ensure the HI Service adoption occurs.		

HIA 5 HI use in consumer applications	Lead(s)	Start date	Status
	• The Agency	2026–2027	Not commenced
The Omnibus Act legislative changes have added the use of health identifiers for wearables and consumer apps from 2027. This activity will be progressed in the 2026–27 financial year.			

HI Roadmap – HI Service Improvement: Q2 2025-26 update

HIA 6 Data matching and data quality improvements		Lead(s)	Start date	Status
		• The Agency • Services Australia	2024–2025	On track
The Agency is progressing changes to the HI Service conformance requirements as part of the plan of action recommendations to improve data matching. During this period, Services Australia commenced a detailed analysis of data matching trends to identify irregular use. This analysis aims to support improved system efficiency and business processes through targeted engagement activities.		The outcomes of this work will inform the development of the Data Matching and Data Quality Improvement Plan, scheduled for implementation in FY2026/27.		

HIA 7 Review existing messages and responses		Lead(s)	Start date	Status
		• The Agency • Services Australia	2024–2025	On track
Services Australia is undertaking a comprehensive review of error messages and response codes. A consolidated catalogue will be developed to support rationalisation, eliminate duplication, and introduce clearer, more consistent messaging.		These improvements are designed to streamline communication and prepare for the transition to Fast Healthcare Interoperability Resources (FHIR) as the national data standard.		

HIA 8 Improvements to data matching for Aboriginal and Torres Strait Islander peoples		Lead(s)	Start date	Status
		• The Agency • The Department • Services Australia	2024–2025	On track
The Agency continues to engage with the Aboriginal Community-Controlled Health sector to identify systemic and operational factors impacting Individual Healthcare Identifier (IHI) matching accuracy. Insights from this consultation will inform a targeted improvement plan, which is currently under development by Services Australia.		Services Australia has commenced internal engagement activities, including collaboration with Indigenous Services Teams, to establish communication channels and enable input and review into the broader plan for data matching and data quality improvements.		

HIA 9 Enhanced search considerations	Lead(s)	Start date	Status
	• The Agency • Services Australia	2025–2026	On track
Work is continuing under this Healthcare Identifier activity to enhance Individual Healthcare Identifier (IHI) record search results and improve match rate accuracy. Engagement with stakeholders remains a key focus to identify best practices, while subsequent phases will assess options to expand identifying information and refine matching criteria.	Services Australia continues to support the Agency's research efforts by reviewing outputs and providing feedback.		

HIA 10 Individual Healthcare Identifiers for newborns	Lead(s)	Start date	Status
	• The Agency • Services Australia	2025–2026	On track
Services Australia continues to progress preliminary development activities in preparation for uplifting the current IHI for Newborn web service to the FHIR® Standard.	The Agency is advancing updates to the FHIR implementation guide to support IHI for newborn functionality, building on draft work completed in FY24/25		

HIA 11 Consumer empowered matching	Lead(s)	Start date	Status
	• The Agency • The Department • Services Australia	2026–2027	Not commenced
This activity will be progressed in the 2026–2027 financial year.			

HI Roadmap – Architecture and Data Standards: Q2 2025-26 update

HIA 12 Healthcare Provider Identifier – Organisations: Guidance on appropriate structures	Lead(s)	Start date	Status
	• The Agency • Services Australia	2024–2025	On track
The Agency, the Department of Health, Disability and Ageing (DHDA), and Services Australia continue to collaborate on adjustments to healthcare provider organisation structures within the Healthcare Identifiers (HI) Service to ensure they support a broad range of digital health use cases and remain compatible with national systems.	Building on earlier work, Services Australia is progressing its internal analysis and engagement with the Agency and DHDA. This activity is focused on organisation structures that will support the establishment of a common healthcare identifier across organisations.		

HIA 14 Update technical standards	Lead(s)	Start date	Status
	• The Agency • Services Australia	2024–2025	On track
Planning for the HI Service transition to FHIR® standards continues, focussed on delivering enhanced accuracy, consistency, and interoperability of health data across Australia's digital health systems in a fiscally responsible manner.	To support the transition, four FHIR concept map resources have been published that support two-way mappings between the SNOMED provider and service type codes used by FHIR directories and the legacy codes used by the HI Service so that software products (including the HI Service itself) can transition to the new codes. To support preparation activities for FHIR® transition, Services Australia is leveraging training provided by the Agency and engaging with HL7 and Sparked stakeholders		

HIA 15 HI Service architecture and future extensibility	Lead(s)	Start date	Status
	• The Agency • Services Australia	2025–2026	On track
Services Australia has commenced an internal analysis of current and projected HI web service traffic. This analysis will support planned modelling that will be used to identify enhancement or changes that may be required to current infrastructure and architecture to maintain service levels and system functionality considering increases to the HI Service.			

HIA 16 Clinical systems architecture and design	Lead(s)	Start date	Status
	• The Agency	2026–2027	Not commenced
This activity will be progressed in the 2026–27 financial year.			

HI Roadmap – Operational Improvement: Q2 2025-26 update

HIA 18 Development of education materials for HI Service		Lead(s)	Start date	Status
		• The Agency	2023–2024	On track

The Agency continues to make significant progress in the development, creation, and refinement of our educational materials, with a focus on meeting the current needs of a diverse range of users, particularly healthcare professionals and technology partners who use the Healthcare Identifiers Service. The Digital Health Foundation webinars are being redeveloped and redesigned into an engaging four-video microlearning series, with a strong focus on the effective use of the Healthcare Identifiers Service.	The update of the My Health Record Organisation Registration Checklist, which outlines essential steps for healthcare organisations, including registration requirements, governance roles, security policies, and the use of healthcare identifiers (HPI-O, HPI-I, and IHI) to ensure accurate identification and secure access is in progress.

HIA 19 HI support model and future operational requirements		Lead(s)	Start date	Status
		• The Agency • Services Australia	2023–2024	On track

The Healthcare Identifier (HI) Service is progressively adopting FHIR standards to improve interoperability, data accuracy, and real-time information exchange across the digital health ecosystem, and the Agency continues to review the operational support model to ensure future requirements are understood and expectations can be met.	Services Australia continues to progress activities in line with the agreed Activity Plans. Some activities have been paused pending outcomes of legislation updates and changes that provide future direction of Healthcare Identifiers.

HIA 20 Enhanced governance		Lead(s)	Start date	Status
		• The Agency • The Department • Services Australia	2024–2025	Completed

This quarter, the Department achieved significant progress by supporting the passage of amendments to the Healthcare Identifiers Act 2010 (HID Act), positioning the legislation as a foundation for an interoperable, digitally connected national health system. The Healthcare Identifiers Sub-Committee (HISC) advanced its advisory role through the review of draft regulations authorising provider directories - such as the National Health Services Directory and Provider Connect Australia - to use healthcare identifiers. With the legislative reform program now complete, the Digital Health Oversight Committee (DHOC) will consider concluding the time-limited HISC at its meeting in February 2026.	Governance arrangements between agencies have been refreshed to support the ongoing management of the Healthcare Identifiers program of work. A current-state analysis of stakeholder engagement is underway to simplify and consolidate processes where needed, reducing duplication. The Agency continues to lead coordination of the Healthcare Identifiers Working Group (HIWG), strengthening collaboration between the Agency, the Department of Health, Disability and Ageing, and Services Australia. A recent review has refined meeting cadence and sharpened the focus on strategic agenda items, enabling greater participation and driving collective progress toward roadmap objectives.

Thank you to the Council for Connected Care
and to all governments and organisations who
provided input to this report.

Australian Government

Australian Digital Health Agency

Council for Connected Care

Agenda Item 4: The Future of Agency Products

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of the agenda item is to provide visibility into current product and design initiatives across the Australian Digital Health Agency (Agency) which are designed to establish the foundations for our future product vision through design, discovery and strategic development, aligned with our transformation priorities, customer needs, challenges, and emerging opportunities. The session is intended to be highly interactive, with Q&A to gather feedback from the Council to help shape future work in these areas and contribute to the evolving vision for connected care.

Recommendation/s

It is recommended the Council for Connected Care:

1   **note** the update on current product and design initiatives across the Agency

2   **participate** in the Q&A session to provide feedback.

Summary of issues

Experience design: definition and approach

Experience design in digital health is a multi-faceted approach that aims to create customer-centred solutions across multiple layers and aspects of healthcare. At the Agency, experience design supports a diverse range of initiatives set out in the annual workplan[1] and is guided by the National Digital Health Strategy (NDHS) and broader national health priorities.

At the Agency, we define experience design as:

> the process of informing, creating, and enhancing holistic, customer-centric solutions that seamlessly integrate technology, information, and services to improve health outcomes, enhance the quality of engagement, and optimise efficiency across the healthcare domains in which the Agency plays a role.

The Agency's experience design approach, coupled with research, discovery work and the insights gained while shaping our future product concepts, guide our strategic direction.

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[1] Public Governance, Performance and Accountability (Establishing the Australian Digital Health Agency) Rule 2016 s70.

Value of experience design

The value that experience design brings to our role, our work and our strategic focus includes:

Trust and credibility and user adoption and engagement	A professional, well-designed interface and experience encourage confidence in and consistent use of digital health tools, supporting improved outcomes
Improved usability	Intuitive interfaces reduce cognitive load for clinicians and patients, minimising errors and improving efficiency
Accessibility	Thoughtful design ensures digital health solutions are usable by people with diverse abilities and needs
Data visualisation	Clear presentation of complex health information supports better understanding for clinicians and consumers
Workflow integration	Seamless alignment with clinical workflows is crucial for acceptance and productivity
Patient empowerment	User-friendly experiences enable people to better understand and manage their health
Personalisation	Tailoring experiences to individual needs enhance relevance and satisfaction
Behavioural change	Design can support positive health behaviours through prompts, guidance, and feedback
Reduced costs	Improved efficiency and support for preventive care can contribute to cost reduction across the system

Experience design: presentation to the Council for Connected Care

The Agency's experience design team[2] will brief the Council on key themes emerging from recent work in product strategy and experience design, and how these insights are shaping the future vision for My Health Record and the Agency's broader product ecosystem.
The session will outline how evidence-based insights are informing future product and design directions, including the proposed evolution of Agency products and channels. It will introduce the application of product portfolio principles to better coordinate the ecosystem, maximise value, clarify product roles, and establish feedback loops to assess impact across priority cohorts. Viewing the portfolio as an interconnected system supports clearer prioritisation, continuous learning, and improved alignment to connected care outcomes.

The presentation will also provide an overview of the My Health Record Modernisation concept, including proposed directions to strengthen channel capability, interoperability, and user experience, and will invite Council input on emerging requirements.

Through a conceptual design lens, the team will outline key programs underway, such as transitioning My Health Record content to interoperable services, and how these initiatives

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[2] The Customer Experience and Products Branch is responsible for collaborating with participants across the national health system to enhance outcomes through safe, responsible, and standards aligned information exchange. The Branch provides leadership in product vision, development, and road mapping to deliver innovative, secure, conformant and interoperable digital health products that reflect the Agency's architectural and strategic direction at a national scale.

collectively enhance value and utility for consumers, healthcare professionals, and system partners across Australia's digital health ecosystem.

Contact officer: Darian Eckersley, Director Experience & Service Design

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 5: Panel Discussion: How digital health data is transforming care delivery

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of this agenda item is to provide an overview of how digital health data is transforming care delivery across Australia and to capture key insights from a panel discussion, with a focus on the opportunities it presents for patient empowerment, enhanced clinical decision making and system-wide innovation, while reflecting on the challenges in achieving these goals.

Recommendation/s

It is recommended the Council for Connected Care:

1   **discuss** the insights from the panel discussion to identify implications for national policy, governance and priority areas for improving connected care.

Summary of issues

This session will examine how digital health data is reshaping care delivery across Australia. A panel of consumers, healthcare providers and informaticians will explore the role of data in empowering patients, strengthening clinical decision making and driving system-level innovation. Using practical examples, including My Health Record, the discussion will outline both the opportunities and the challenges involved in leveraging health data to improve outcomes and support a more connected, efficient healthcare system.

Panel Speakers

Tracey Davenport, Facilitator

Tracey is the Director of Research, Evaluation and Statistics for the Australian Digital Health Agency and will be facilitating this panel discussion.

Michelle Nelson, Consumer

Michelle is an Agency Digital Health Adviser committed to improving health outcomes for all Australians. Drawing on extensive personal and professional experience across public and private health systems, she brings valuable consumer insight informed by managing her own conditions, supporting family members and contributing to multiple health consumer groups.

Michelle actively uses wearables, apps, and data-tracking tools to support her health management, highlighting the need for accessible, integrated and person-centred digital solutions. Advocating for a single, interactive medical record, she emphasises the importance of accuracy, efficiency, and usability, and applies principles from complex adaptive systems to ensure digital tools reflect real-world needs.

Dr Peter Del Fante, General Practitioner

Peter is a General Practitioner, Public Health Physician and Clinical Informatician based in Adelaide, with deep experience in preventative medicine, data analytics, and digital health. He has led initiatives to improve integrated care and population health through data-driven tools and has served as a Senior Digital Health Adviser with the Australian Digital Health Agency. Peter has contributed significantly to the National Digital Health Strategy, including the development and use of My Health Record.

Dr Paul Cooper, Informatician

Paul is an experienced health informatician, researcher and consultant with expertise in AI governance, organisational change and tertiary education. With a background in medical research, he has designed and delivered postgraduate courses in AI and digital health across Masters and MBA programs. His research focuses on digital inclusion and equity within the evolving AI landscape. Paul has previously served as a Senior Digital Health Adviser with the Australian Digital Health Agency.

Angela Ryan, Registered Nurse and Informatician

Angela is a registered nurse, health informatician and senior health executive with decades of experience leading policy reform and large-scale digital health and clinical care programs at state and federal levels. She is Lead Healthcare Executive with Oracle Health, a founding Fellow and non-executive Director of the Australasian Institute of Digital Health, and a non-executive Director of Therapeutic Guidelines. She is also a former President of the Australasian College of Health Informatics and former Chief Clinical Information Officer at the Australian Digital Health Agency. Angela was the recipient of the inaugural *Brilliant Women in Digital Health* award (2021) and a Churchill Fellowship (2017) for international research into digital health and patient safety governance.

Panel contributions

- **Michelle Nelson** will provide a consumer perspective, outlining what has enabled effective care, where barriers remain and how access to her own health data has supported improved self-management.
- **Dr Peter Del Fante** will offer clinical insights from general practice, discussing how data is used to deliver safe, personalised care, and where improvements in data quality and usability could better support frontline clinicians.
- **Dr Paul Cooper** will outline current gaps in health data and highlight the principles required to ensure data is structured, standardised, interoperable, and sustainable over time.
- **Angela Ryan** will address workforce capability, focusing on the importance of data and digital skills for nurses and midwives and outlining priorities for strengthening digital capability across the profession.

Background

At the 8 August 2024 Council meeting, members agreed to undertake a series of interactive, face-to-face sessions focusing on different population needs in the community to identify opportunities for digital health interoperability.

Attachments

None

Contact officer: Tracey Davenport, Director, Research Evaluation & Statistics

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 6: National Clinical Governance Committee for Digital Health update

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of this agenda item is to provide Council members with an update on the newly established National Clinical Governance Committee for Digital Health (NCGC-DH) and its associated Expert Advisory Groups.

Recommendation/s

It is recommended the Council for Connected Care:

1   **Note** the update on the NCGC-DH and formation of Expert Advisory Groups
2   **Note** a summary of outcomes and themes discussed at the first round of meetings at Attachment A.

Summary of issues

The NCGC-DH provides national clinical governance oversight for digital health, system safety and quality, lived experience perspectives and expert clinical advice. The NCGC-DH continues the success of the Clinical Reference Group (CRG), building on its momentum to bring together key national stakeholders including peak bodies, professional associations, consumer groups and representatives from jurisdictions. The NCGC-DH provides strategic advice to the Agency and the Department of Health, Disability and Ageing (the Department) on the implementation, monitoring and evaluation of the Share by Default reform agenda, as well as providing national leadership on emerging virtual models of care and Artificial Intelligence (AI).

The NCGC-DH serves to bring key stakeholders together as a single collaborative group, with the Agency acting as the convening body, supporting the Agency and the Department to provide advice to the Honourable Mark Butler MP (Minister Butler), Minister for Health and Ageing and Minister for Disability and the National Disability Insurance Scheme.

The NCGC-DH currently has 42 standing members, is chaired by Dr Amandeep Hansra and meets quarterly. The inaugural meeting was held on 19 November 2025 (summary at Attachment A).

Providing expert clinical, technical and lived experience perspectives to the NCGC-DH are 3 Expert Advisory Groups (EAGs), including representatives from jurisdictions, consumer advocacy groups, regulators, clinical peak organisations, service providers, industry and software providers and other government entities. These groups will explore key topics in greater depth, with quarterly meetings held prior to NCGC-DH meetings where practical. The EAGs are:

1. **Better and Faster Access Expert Advisory Group (BFA-EAG)**

   - Established to provide national clinical governance, system safety and quality, lived experience perspectives, and expert clinical advice on the implementation, monitoring and ongoing evaluation of the Better and Faster Access program and other priority topics requiring nationally led clinical governance.

   - Plays a pivotal role in guiding the strategic expansion of default health information sharing to My Health Record, ensuring alignment with the broader Share by Default agenda and its long-term objectives.

   - Currently includes 27 standing members, is chaired by Dr Steve Hambleton AM, and held its inaugural meeting on 4 February 2026 (summary at <u>Attachment A</u>)**.**

2. **Virtual Care and Telehealth EAG (VC-EAG)**

   - Established to support the safe and high-quality use of virtual care and telehealth in Australia. The VC-EAG will collaborate to provide advice on how best to address emerging safety and quality risks associated with virtual care and telehealth.

   - The VC-EAG includes 28 standing members, is chaired by Dr Louise Schaper and held its inaugural meeting on 11 February 2026 (summary at <u>Attachment A</u>)**.**

3. **Artificial Intelligence Enabled Care EAG (AI-EAG)**

   - The AI-EAG will provide advice on approaches for safe implementation of AI-enabled care in clinical settings. Its inaugural meeting is scheduled for April 2026, and its Chair, Terms of Reference, role, scope and membership are currently being finalised.

Background

In November 2023, the CRG was established by the Agency and the Department to provide strategic advice and clinical oversight to the Better and Faster access to diagnostic imaging and pathology reports in My Health Record program. The CRG was instrumental in the successful delivery of the Better and Faster Access program, including advice that informed the development of the *Modernising My Health Record (Sharing by Default) Act 2025.*

Following the CRG delivering on its Terms of Reference, members recommended establishing an enduring clinical governance stewardship model to continue focusing on safety and quality in digital health and inform the development and evolution of future Share by Default initiatives. This recommendation was supported by Minister Butler, who further supported expansion of the scope of the NCGC-DH to include other emerging digital models of care including virtual care and telehealth, and AI use in clinical settings.

Attachments

Attachment A – Meeting summaries for NCGC-DH, BFA-EAG, VC-EAG

Contact officer: Alex Powell, Branch Manager, Clinical Governance & Assurance

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Council for Connected Care

Attachment A – Meeting summaries for NCGC-DH, BFA-EAG and VC-EAG

Meeting: Thursday, 12 March 2026

OFFICIAL

This paper provides a summary of key themes discussed at the inaugural National Clinical Governance Committee for Digital Health (NCGC-DH), Better and Faster Access Expert Advisory Group (BFA-EAG) and Virtual Care and Telehealth Expert Advisory Group (VC-EAG) meetings.

NCGC-DH Meeting 1 – Wednesday, 19 November 2025

At the inaugural NCGC-DH meeting, members discussed the Terms of Reference and received an overview of the Clinical Reference Group, highlighting key learnings and noting the value of consumer perspectives in shaping its recommendations.

Members discussed the methodology and technical considerations for uploading diagnostic imaging reports to My Health Record with a reduced or no delay to consumer viewing. Key themes included:

- the work of the Agency's Diagnostic Imaging Committee ahead of the planned removal of the 7-day consumer viewing delay in March 2026

- current validation and assurance processes and proposed technical solutions for safe removal of the delay

- opportunities to strengthen safety and quality through adoption of national standardised terminologies.

Members also discussed the critical role of conformance, legislation and standards as key digital health levers to support sector-wide change and improve safety and quality practice. A further focus included ensuring system safety and strong clinical governance practice as new virtual models of care evolve. Members were advised that the Share by Default program is already driving increased information sharing ahead of future tranches of health information sharing by default.

The next meeting is scheduled for **17 March 2026.**

BFA-EAG Meeting 1 – Wednesday, 4 February 2026

At the inaugural BFA-EAG meeting, members discussed the Terms of Reference and received an update on the Better and Faster Access program.

Members considered a list of proposed second tranche pathology tests for consumer viewing without delay and discussed ways to ensure this approach considered consumer preferences, while balancing safety, quality and clinician workflows.

The Agency provided an overview of existing Better and Faster Access guidance materials focused on Share by Default requirements and consumer access timeframes. Additional tailored resources for consumer and provider cohorts currently in development were discussed, as well as guidance materials on the Share by Default requirements and extensions application process.

The Department of Health, Disability and Ageing provided an update on Faster Access changes for diagnostic imaging reports to commence in March 2026, and the extension request process for Share by Default. Members were advised that Sharing by Default Rules[1] will commence for pathology and diagnostic imaging providers in mid-2026, alongside compliance and monitoring activities. Planning is also underway to expand the Sharing by Default Rules to include other types of health information, including medicines.

The next meeting is scheduled for **28 April 2026.**

VC-EAG Meeting 1 – Wednesday, 11 February 2026

At the inaugural VC-EAG meeting, members discussed the Terms of Reference and highlighted the importance of embedding consumer agency and digital health literacy uplift as key components of ongoing policy discussions. Members discussed identified safety and quality issues in virtual care, noting the increased use of online prescribing services may present new safety and quality risks to consumers.

Members heard from a consumer representative, who shared her lived experience of managing multiple chronic conditions. She provided valuable insights into her experiences on the benefits and risks associated with virtual care and telehealth.

The Agency outlined key digital health levers that could be used to support improvements to information sharing, transparency and the overall safety and quality of virtual care and telehealth services in Australia. These included technical and safety and quality standards, enhancements to My Health Record document conformance profiles and the *Share by Default* legislation as an enabler for increased health information sharing.

The next meeting is scheduled for **13 May 2026.**

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[1] *Health Insurance (Share by Default) Rules 2025 ([Health Insurance (Share by Default) Rules 2025 - Federal Register of Legislation](#))*

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 7: Roundtable Updates from Council Members

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of this agenda item is to understand current and upcoming initiatives undertaken by Council member organisations that focus on digital health reforms, interoperability with an emphasis on how digital health data and thoughtful design can transform care delivery.

Recommendation/s

It is recommended the Council for Connected Care:

1   **note** the updates on current and upcoming initiatives focusing on data and design

2   **note** the challenges and opportunities a more thoughtfully designed interoperable health system presents for improved care delivery.

Summary of issues

Council members were invited to contribute to the roundtable update by providing examples of current or upcoming initiatives from their organisations.

Australian Telehealth Standards Consortium (ATSC)

In May 2025, the Australian Telehealth Standards Consortium (ATSC) was established, which is managed by Patients Australia, the peak body for patient advocacy in Australia. The ATSC is led by Richard Skimin as Chair and Deputy Chair Dr Darran Foo. Members include Medibank, Healthdirect, Eucalyptus, nib, Healthengine, HCF, MedAdvisor, Wesfarmers Health, Bupa, Medmate, Mosh, Updoc and 13SICK.

Purpose and Scope

The purpose of the ATSC is to establish a comprehensive, sector-led framework of self-regulatory standards for Virtual Care Providers in Australia. The ATSC defines Virtual Care Providers as practices that deliver healthcare services primarily through digital channels. Specifically, this includes the on-demand telehealth practices and condition-specific telehealth practices.

Objectives

The objectives of the ATSC are to:

1.   Establish minimum standards for patient safety and quality assurance

2. Increase confidence in the telehealth sector

3. Provide a practical implementation guide for telehealth players

4. Establish a basis for ongoing sector development.

Approach

The standards have been developed over a six-month period and include external input and review. These included:

- Voice of the Patient Survey (n=5000) conducted by Patients Australia to determine key issue

- Delphi Study conducted in concert with Macquarie University to determine and analyse issues of contention

- Roundtable discussions with key stakeholders that included input from key professional bodies and advocacy groups.

NSW Single Front Door and Medicare Mental Health Phone Service integration project.

Designing Interoperable and Integrated Mental Health Pathways – A Case Study from NSW Primary Health Networks.

Eight NSW-based Primary Health Networks (PHNs), on behalf of the Australian Government, are collaborating to commission and streamline the Medicare Mental Health Phone Service. This reform aims to improve access for help seekers by reducing the need to repeatedly tell their story and ensuring they are seamlessly connected to services that match their level of need. By centralising and integrating intake, assessment and referral functions - alongside their own mental health commissioning and the NSW Government's Single Front Door reforms – these 8 NSW PHNs are achieving the highest use of the phone line nationally. The PHNs are also negotiating the transition of telehealth triage functions to Healthdirect in 2026–2027.

The proposed model aligns with recommendations from the SANE Digital Navigation Project (2025) and the Productivity Commission's Mental Health and Suicide Prevention Agreement Review (2025), ensuring strong alignment with national mental health and digital health priorities.

Opportunities include: streamlined and accessible pathways for help seekers, a seamless triage model, eReferrals connecting virtual care with face-to-face services, improved visibility and capacity management across mental health services, integrated primary and acute mental health care, and uplift of Healthdirect's mental health capacity.

Challenges include: alignment of Australian Government and NSW Government policies; achieving the capability uplift of relevant systems for full interoperability; and navigating different funding models, decision-making processes, and organisational cultures across systems.

Background

This is a standing agenda item enabling Council members to share information on current and upcoming initiatives and highlight challenges and opportunities in delivering connected care.

Contact officer: Cass Timmermans, Assistant Director, Interoperability

Australian Government
Australian Digital Health Agency

Council for Connected Care

Agenda Item 8: Other Business

Meeting: Thursday, 12 March 2026

OFFICIAL

Purpose

The purpose of this agenda item is for members to raise any business items for consideration or discussion by the Council.

Recommendation/s

It is recommended the Council for Connected Care:

1 **raise** any other business items for consideration or discussion by the Council

2 **note** the next meeting will be held virtually on Thursday 23 July 2026.

Summary of issues

The next meeting is proposed to take place virtually via MS Teams on Thursday 23 July 2026.

Background

This is a standing agenda item.

Attachments

Nil

Contact officer: Cass Timmermans, Assistant Director, Interoperability