Digital transformation

Sector Partners

Co-design meeting (16)

Digital Transformation and Delivery Division

Corporate Group | Department of Health and Aged Care

www.health.gov.au

Meeting #16

10/03/2023

Australian Government

Department of Health and Aged Care

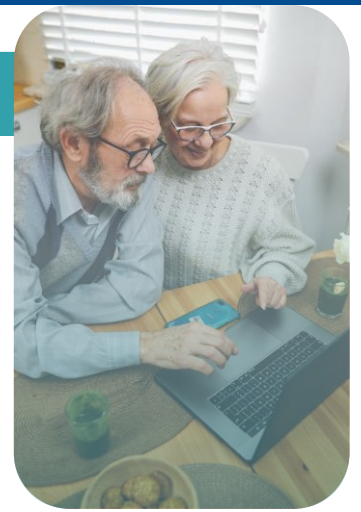
WELCOME

Janine Bennett | Assistant Secretary (a/g) & Engagement Lead
Digital Transformation and Delivery Division
Corporate Group | Department of Health and Aged Care

Digital transformation for the aged care sector

Agenda

Sector Partners #16



Welcome & agenda	State of play	Release schedule update	Health Care Identifiers	24/7 Nursing	Close
Janine Bennett	Janine Bennett	Brian Schumacher	Anastasia Mastoris	Phil Fleischer	Janine Bennett

State of play

Digital transformation Sector Partners

Fay Flevaras

Digital Transformation and Delivery Division
Corporate Group | Department of Health and Aged Care

Australian Government
Department of Health and Aged Care

Updates

State of play - news

Design

Sector Partner Intake

In February, we welcomed 30 new sector partners to our group

Deliver

Release 26

Late February, we deployed our latest major release (#26)

Engage

Tech Talk webinar

In early March, we ran the first Digital Transformation Tech Talk for 2023

...since we last met

Open co-design activities by phase

Open

DIGITISED focus (UX)

AUTOMATED focus (API)

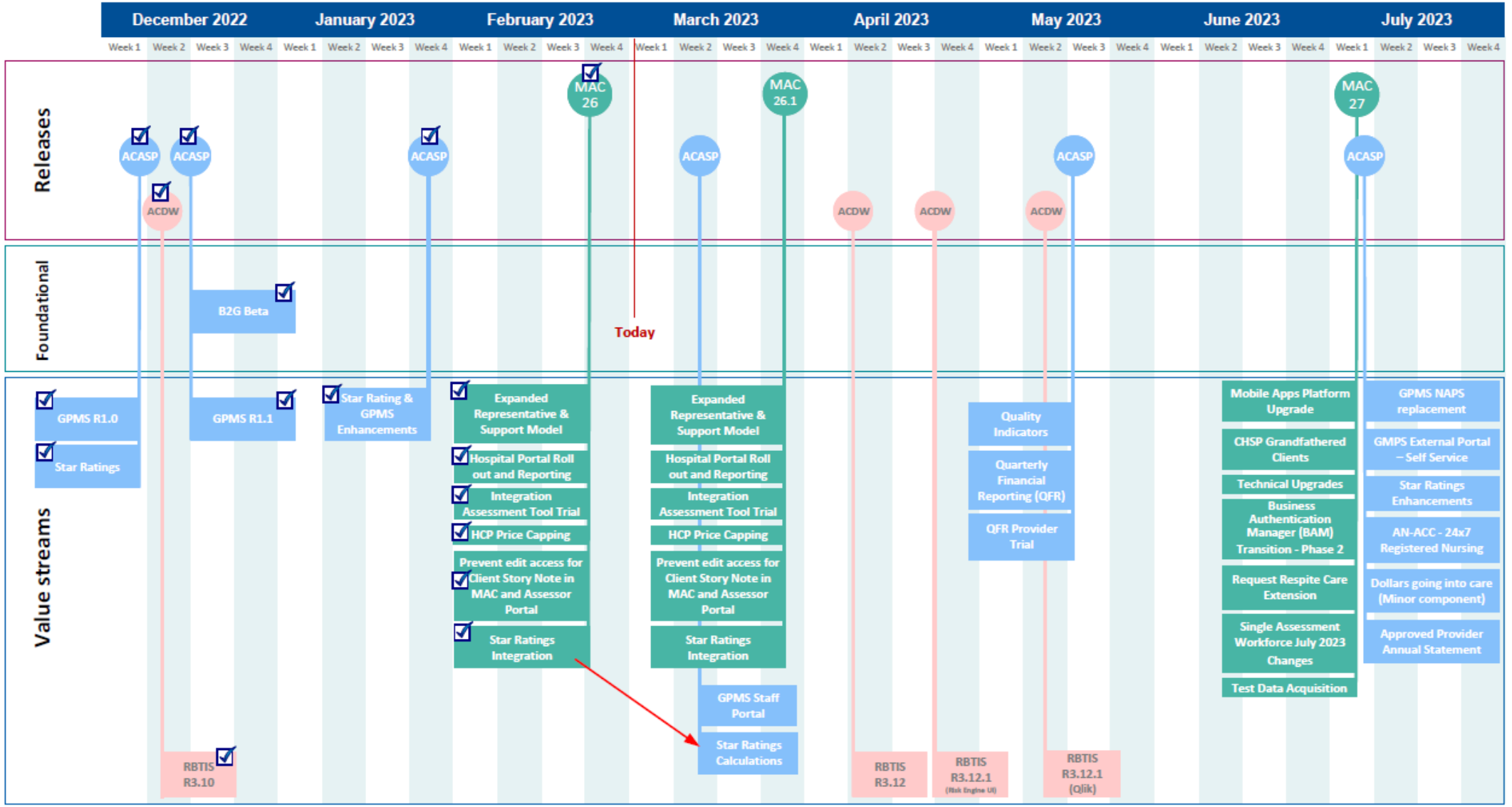
- Support at Home
- Health Care Identifiers
- Provider Operations
- Worker Screening
- Quarterly Financial Reporting: trial
- 24/7 Nursing
- Aged Care Transfer Summary (ACTS)
- GPMS: Provider Portal – go live

Release schedule update

Brian Schumacher
Assistant secretary | Digital Design & Release Branch

Australian Government
Department of Health and Aged Care

Digital Transformation (DT) portfolio release view



LEGEND

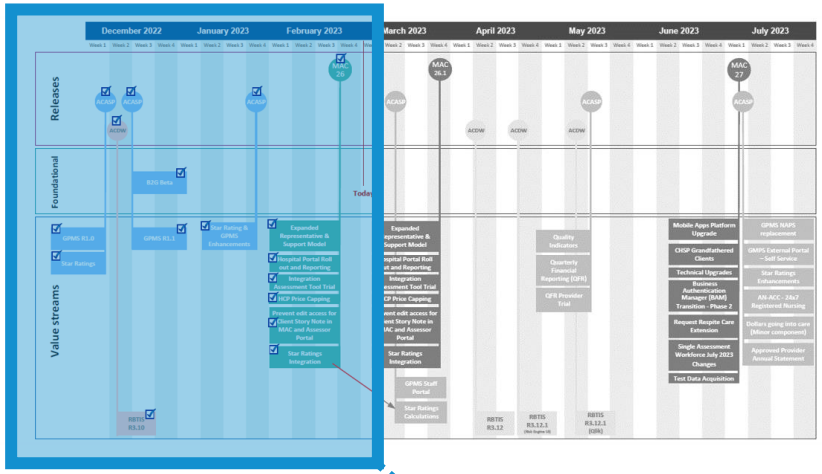
Release Type:

- Aged Care and Support Platform
- My Aged Care (Siebel) Platform *Out of Release Cycle
- Aged Care Data Warehouse Platform

Dependency

Disclaimer: This is a CURRENT STATE view, shared to provide early visibility of the expected work ahead (a 'working timeline'). The timeline is NOT a Government commitment. Formal decisions – regarding the scope, sequence, and timeframes of the department's portfolio delivery will be determined by the Government – and therefore this timeline is subject to change as policy decisions and planning evolves.

Digital Transformation (DT) portfolio release view



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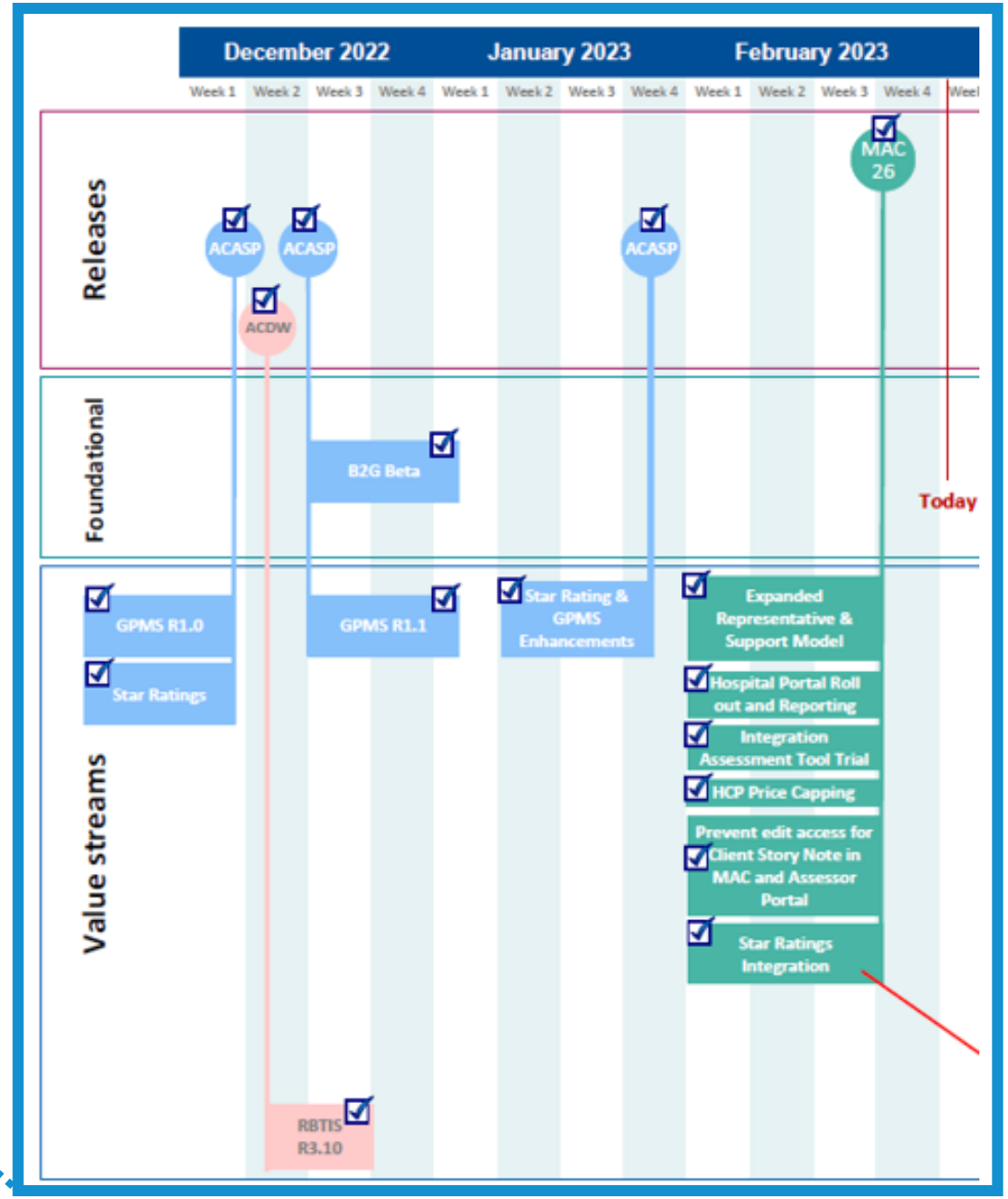

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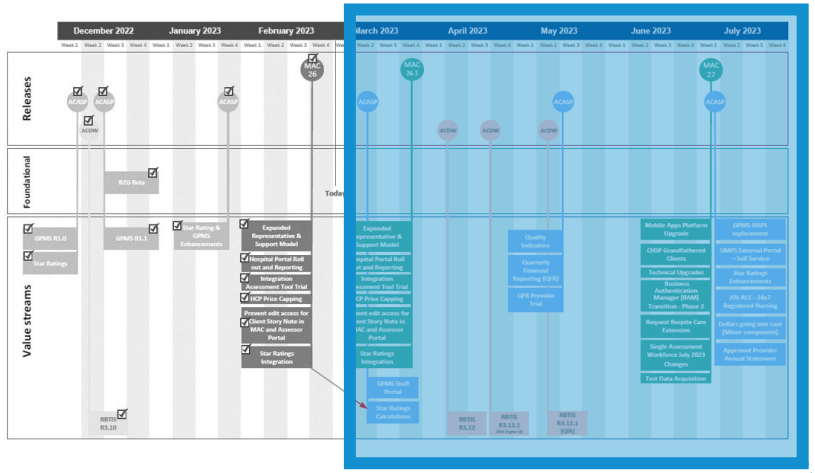

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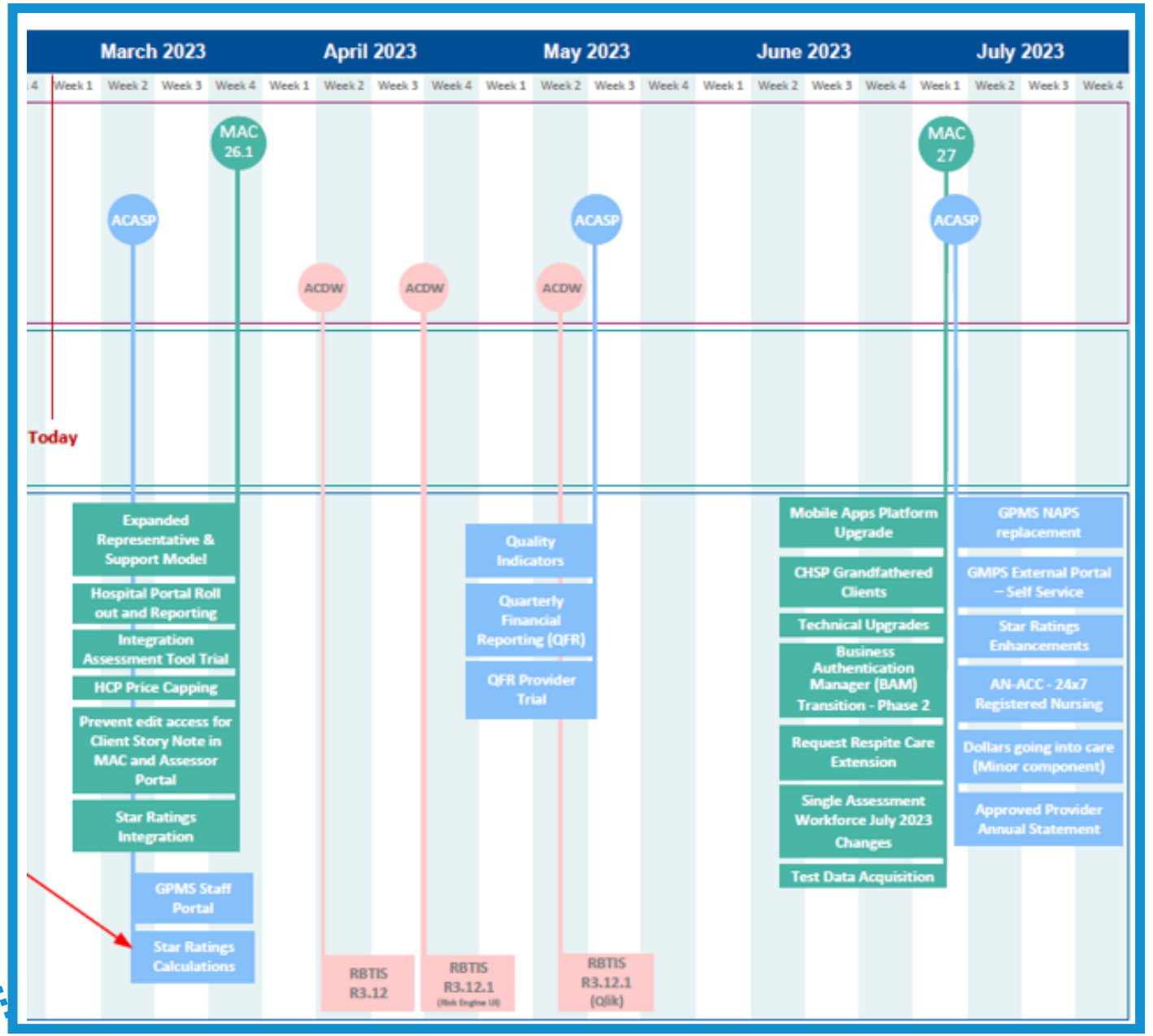

Design Thinking

Healthcare Identifiers Framework project

Overview of engagement opportunity

Anastasia Mastoris

Director | Digital Health Foundations Policy

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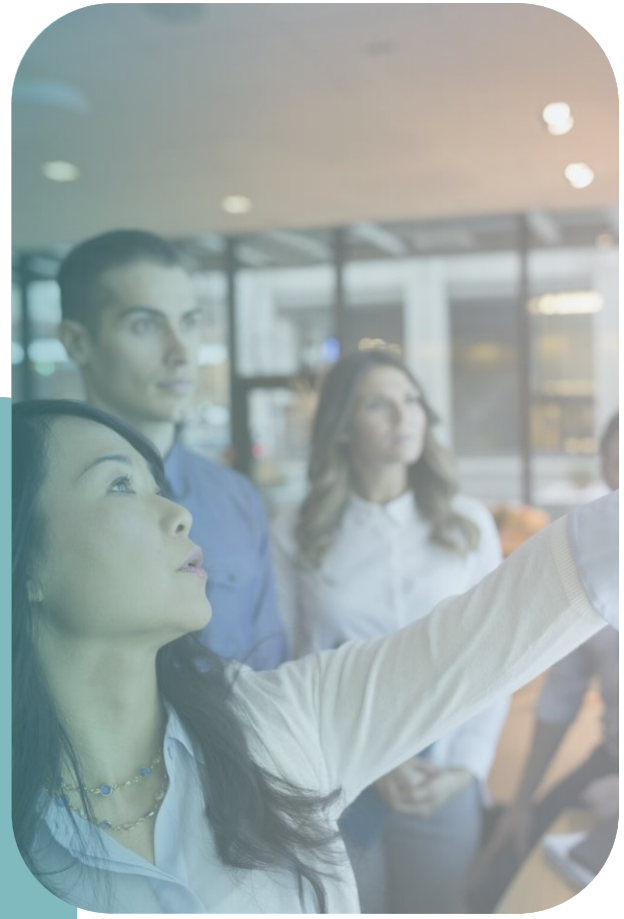
Australian Government

Department of Health and Aged Care

Background, context and objectives



"Like most practices we've got a fragmented system that we've cobbled together as technology developed, particularly over the last five or six years…the learning curve for newcomers…can be pretty steep.

You know, we've got practice management software, we've got a third-party booking system, emails, scanning, faxing, ePrescribing, referrals, etc." (Practice Manager).

Transitions of care. Australian Digital Health Agency Commissioned Research with FiftyFive5, 2022

What are Healthcare Identifiers (HIs)

1 Individual Healthcare Identifier (IHI)

- Used to identify an individual health care recipient for health care purposes.
- Automatically assigned to individuals eligible for Medicare, but available on request to all other healthcare consumers

2 Healthcare Provider Identifier – Individual (HPI-I)

- Used to identify an individual healthcare provider (e.g. GP).
- Automatically assigned to an individual provider at the point of AHPRA registration, and available on application to members of a professional association with certain characteristics.

3 Healthcare Provider Identifier – Organisation (HPI-O)

- Used to identify a healthcare provider organisation.
- Organisations must register to use the HI Service.
- A single practice requires a 'seed' HPI-O and a larger organisation may require 'seed' and 'network' HPI-Os for subordinate organisations.

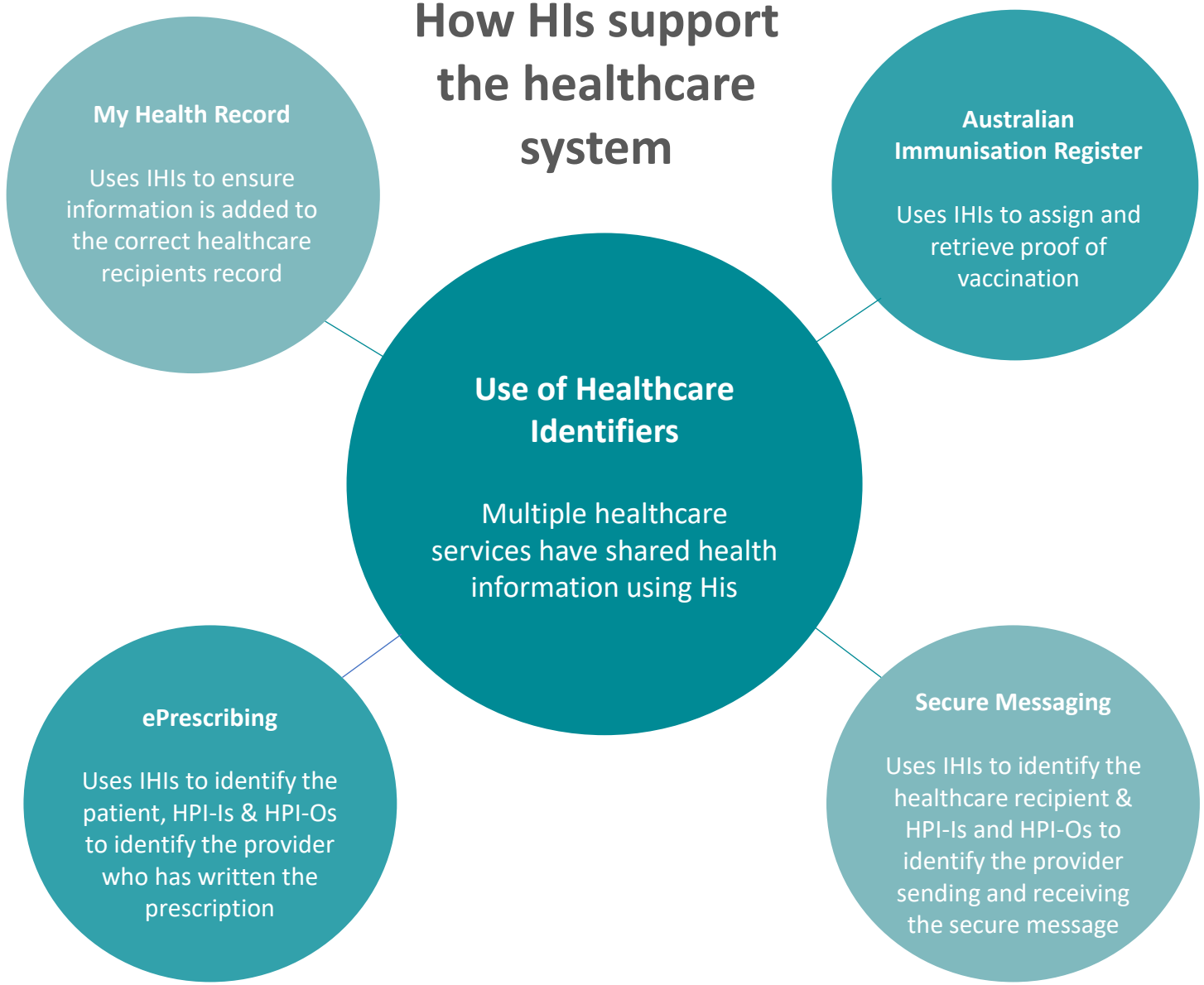
- Healthcare Identifiers (HIs) are unique numbers allocated to healthcare recipients, healthcare providers and healthcare organisations in Australia by the Healthcare Identifiers Service (HI Service)
- There are three types of Healthcare Identifiers
- It is important to note that a HI does not contain any health information

- Services Australia are the 'HI Service Operator'.
- The Australian Digital Health Agency act as the 'Product Manager', and represent the interests of HI Service users.
- The Department of Health and Aged Care manage the legislation on behalf of the Minister.

Objectives of Healthcare Identifiers

- Consistently associate health information with the correct healthcare recipients
- Identify the relationship between an individual provider and a healthcare provider organisation
- Support the operation of security and access frameworks, including authentication to access national digital healthcare services
- Since 2010, more than thirty-one million individual healthcare recipients, more than one million healthcare providers, and over 24,000 healthcare organisations have been assigned an HI

How HIs support the healthcare system



Key findings on HIs

2013 and 2018 HI Service Review

- The HI Service was achieving its core objectives and operating effectively, however,
- It was not meeting its full ability or delivering intended benefits
- There are some legislative limitations in using HIs
- There is a lack of awareness leading to creation of alternative identifiers

Not achieving full potential

2020 My Health Record Act Review

- Issues with how HPI-O seed and network structures have been implemented
- The need to identify health supporting organisations and professions
- Consideration to be provided to revoking HPI-I exemptions to ensure maximum use of the MHR system

Need to increase HPI-O and HPI-I Use

Drivers and mandates for change

National Health Reform Agreement (2020 – 2025)

Australia's Primary Health Care 10 Year Plan (2022)

***Draft* Connecting Australian Health Care: National Healthcare Interoperability Plan**

Achieving digital health and connected care objectives, as well as overcoming the many challenges the health and care systems are currently facing, is entirely reliant on meaningful interoperability and the accurate identification of individuals, healthcare providers and organisations.

Objectives of the HI Framework Project

What we want to do

- We want to ensure that Healthcare Identifiers can and will be used as the common identifiers across healthcare services
- Widespread use of HIs will underpin health system interoperability and data quality, enabling the provision of high-quality and sustainable healthcare

Why now

- The current HI Framework reflects public attitudes and expectations on information sharing and digital services at the time it was established in 2010
- Australia still has a siloed health system which is at odds with how people want to use the system
- Although there is more digital record management, most records are created and stored in standalone systems
- The pandemic highlighted the need for governments to provide more accessible and connected digital healthcare services

Increasing the *use and usability* of Healthcare Identifiers

To continue to have affordable, high-quality healthcare we need to connect all elements of the healthcare system using digital technology

Outcomes and benefits of the HI Framework Project

Improved Clinical Safety and Outcomes

Improved transfers of care across care settings, improved patient identification, enhanced provider accountability, enhanced government preparedness

Improved Consumer Experience and Protections

Reduced requirement to divulge personal information as identifiers, enhanced consumer choice in use of identifiers

Improved Service Efficiency

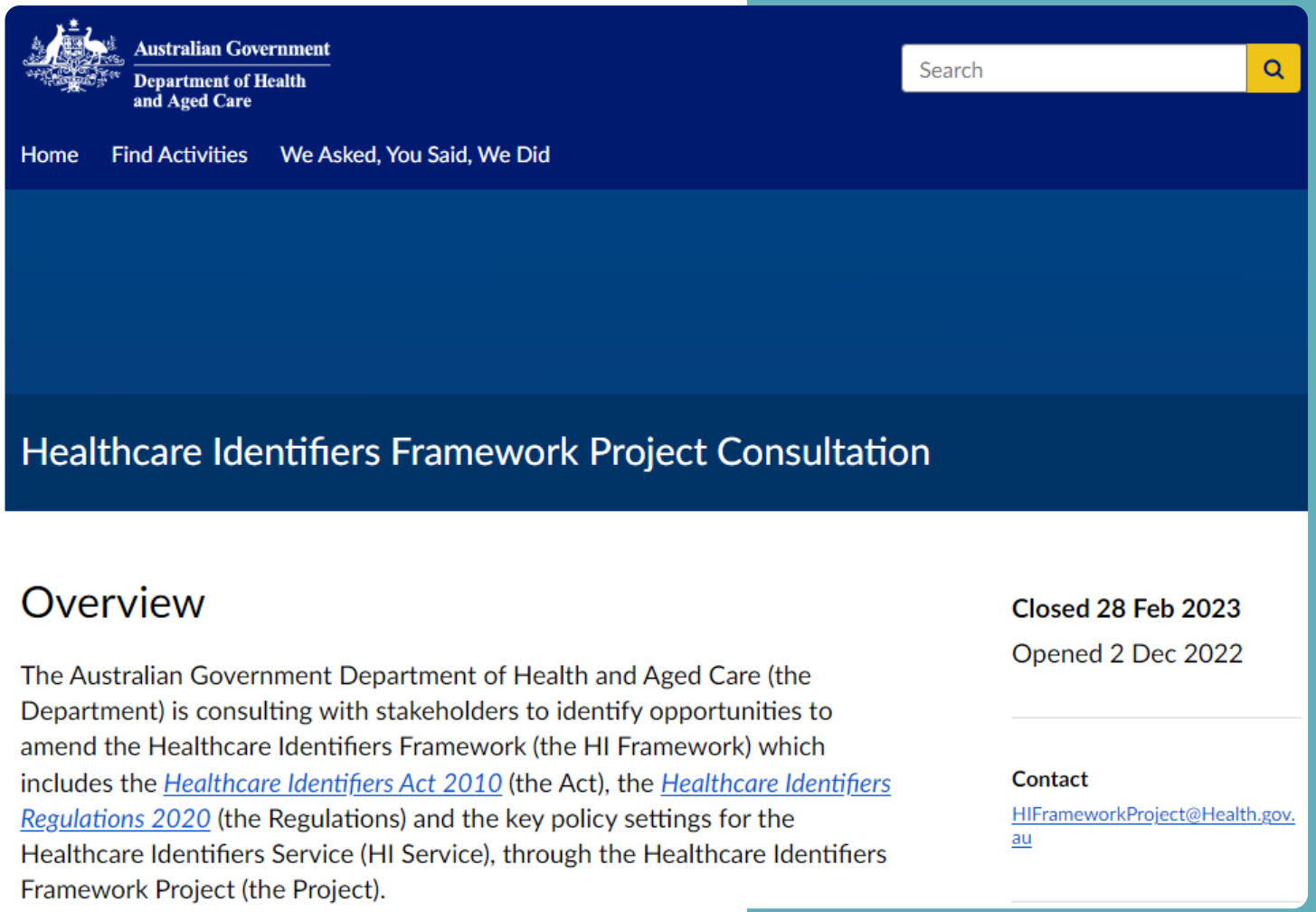
Simplified registration, reduced data errors, improved data governance, enhanced validation capabilities, lower overhead of managing multiple identifiers

Improved Healthcare Policy

Improved ability to use data for planning, monitoring, evaluation and research

The public consultation

We sought to engage with a broad range of stakeholders to help us understand how we can improve the Act and the HI Service to address the key problem statements.



Problem statements and objectives

01	HI use in programs, services and systems	Increasing the number of programs, services and providers that use HIs by default is fundamental to increasing interoperability and achieving connected care.
02	Scope of healthcare and provider eligibility	Achieving connected care relies on the use of HIs across a broad range of healthcare programs and services. Healthcare recipients may benefit from broader provider and service eligibility for HIs.
03	Clarity around HI use by healthcare administration entities and uses	HIs were always intended to be used in all aspects of healthcare, including administration. But many organisations currently cannot use them to their full potential due to real and perceived legislative limitations.
04	Applications and structures of HPI-Os and HPI-Is	Identifying, communicating, and working with individual healthcare providers and provider organisations should be logical and simple. HIs should be able to be useable in a range of healthcare programs.
05	Healthcare consumer and provider choice	Individuals should be able to be active participants in their healthcare. The Act and the HI Service should empower individuals to disclose their own IHI for more purposes to enable better healthcare outcomes.
06	Support for healthcare technology services	To support a modern healthcare environment, the Act and the HI Service must allow for flexibility in how platforms and applications connect an individual to their healthcare data, and providers to one another.
07	Clarity around permitted uses and penalties	We need clear policy and legislation to provide confidence about what is and isn't permitted and how privacy and security are protected.
08	Flexibility and agility to support evolving use cases	The Act and the HI Service must allow for current use cases. They must also be adaptable to new models of healthcare, as they evolve.

We want to hear from you!

www.health.gov.au

https://consultations.health.gov.au/digital-health/healthcare-identifiers-framework-project/

HIframeworkproject@health.gov.au

DIGITISED Focus UX

24/7 Nursing

Overview of upcoming engagement opportunity

Phil Fleischer
Director | Transformation & Quality Branch

Jim Lewis
Nurses 24/7 Project Manager | Transformation & Quality Branch

Australian Government
Department of Health and Aged Care

The Problem

Nurses 24/7 Supplement

The Government is seeking to ensure that Registered Nurses are available on a 24/7 basis within residential aged care services to enable a higher standard of care to be delivered in these settings.

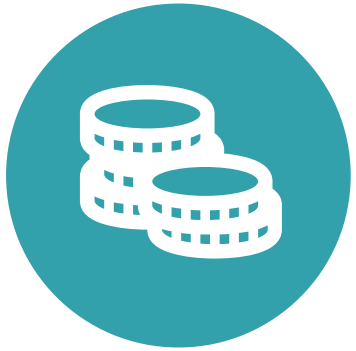
TO enable services to establish a 24/7 registered nursing presence it is proposed to introduce a new 24/7 Registered Nursing supplement which will be calculated on a daily basis and paid as part of the residential aged care monthly claiming cycle by Services Australia.

24/7 registered nurse requirement details

Requirement

From 1 July 2023 – approved residential aged care services must have a **registered nurse on-site and on duty 24-hours a day, 7 days a week**

Supplement



Residential aged care services with on average up to 60 residents per day over the month – based on **occupied places** – are eligible for a funding supplement to employ extra RNs to deliver 24/7 RN care

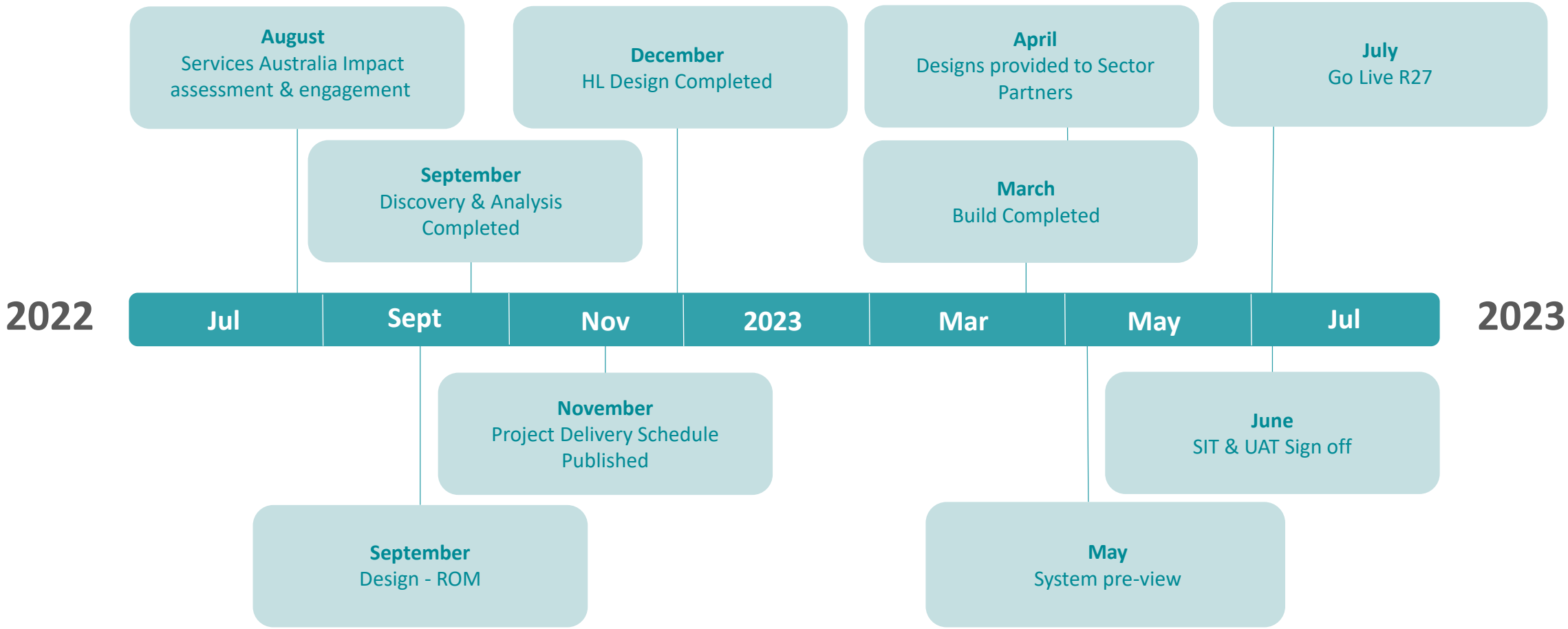
Challenges and Risks

1. As payments will be made through the Services Australia systems, inter-agency coordination and integration is required.

2. Project will be conducted using internal resources without the use of a major system integrator.

3. Developed using our new salesforce platform.

Timelines & Impact



THANK YOU

Janine Bennett
Digital Transformation and Delivery Division
Corporate Group | Department of Health and Aged Care