Digital transformation

Sector Partners

Co-design meeting (20)

Digital Transformation and Delivery Division

Corporate Group | Department of Health and Aged Care

www.health.gov.au

Meeting #20

19/05/2023

Australian Government

Department of Health and Aged Care

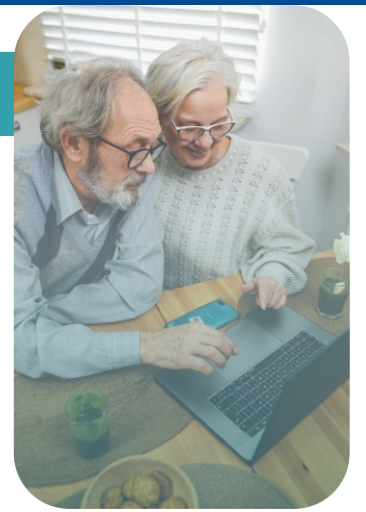
WELCOME

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

Digital transformation for the aged care sector

Agenda

Sector Partners #20



Welcome & agenda	State of Play update	24/7 Registered Nursing Playback	Provider Operations Playback	B2G Update	Sector Partner Update	Close
Fay Flevaras	Fay Flevaras	Phil Fleischer Lavanya Madasu	Phil Fleischer Rohit Sood	John Sidey Shaeyen Mackay	Jessica Holmick	Fay Flevaras

State of Play update

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

Important considerations

Principles underpinning health's public engagement

Message alignment

- Aged Care *business and IT deliver consistent narratives*, aligning messages and, where appropriate, *events*

Probity

- *Probity principles and protections* underpin public engagements with a focus on *fairness and equity*
- Probity Adviser *approvals in place*

Govt. driven

- *Govt. drives the transformation*, while having cross-sector conversations that encourage best-of-breed, no-regrets decisions
- *Govt. commitments* and transformation objectives *stay front-of-focus*

Shifting sands

- *Clarity* is provided *about the known versus the somewhat known versus the unknown*, understanding that dynamic multi-stream delivery agendas have many moving parts and are subject to change
- Caveat information accordingly; *'as we know it now'*

Important considerations

Principles underpinning the work of this group

- We will **publish the names of participants** in this group to the Health website – along with their role and organisation (if relevant)
- A **meeting summary** and **the presentation deck** will be published on the Health website each time we gather
- Be aware that this is considered a *public space* forum and **participant IP does not apply**
- Anything that is said in this room is to **inform Health's digital transformation direction** and **our explicit intent is to use your input to do just that**
- We will be **sharing the outcomes of this work** across our public channels and with the broader Tech Talk group

This group was formed through an open, equal opportunity, public invite – given that, we don't expect confidentiality or conflicts of interest to be a concern BUT **if you have any questions or issues, please contact us ASAP**

Business outcomes by persona group

Deliver outcomes for different stakeholder group through a human centered approach

OLDER AUSTRALIAN

- ✓ **Access to up-to-date information** to make **better informed and safer choice** about their care and other service needs
- ✓ **Up-to-date information about providers and their services** in their areas to get access to services they need at the time they need them
- ✓ **Feel better supported** to stay in their own home

PROVIDERS

- ✓ **Assessors, physios and other providers can use e-referrals** with patient notes without transcription errors
- ✓ **Administrative burden is reduced** due to automation e.g. single sign-on, which means, carers can spend more time with their clients
- ✓ Staff at residential care facilities have a **better view of care requirements for each resident** to provide better quality of care

GOVERNMENT

- ✓ With better data, **can take fast action to keep consumers safe** and manage serious incidents
- ✓ **Identify issues early and look to support aged care facilities early** before it goes out of business, keeping its residents in the community
- ✓ Emergency services and community organisations **have an up-to-date profile of each facility**

All stakeholders will benefit from streamlined data sharing

Reform outcomes for users:

Seamless user experience
Users and authorised entities can obtain info easily, particularly clinical info

Simplified, one-touch capability
Access information simply, without needing to access multiple platforms, utilising existing whole of government authentication

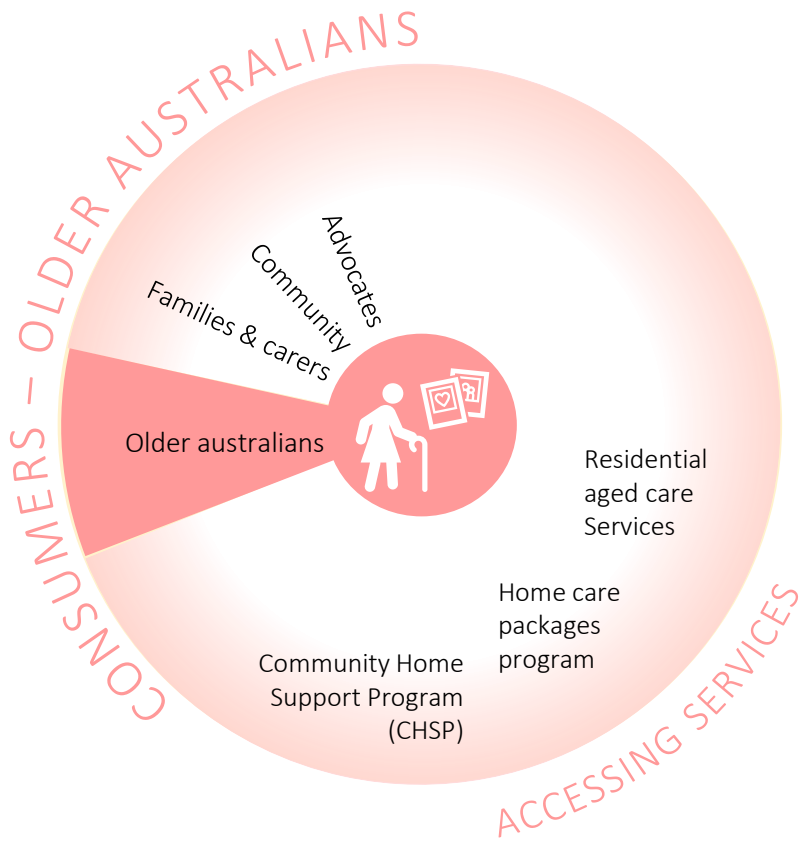
Improved data for consumers
Improved visibility and transparency of the quality of aged care services; systems provide real time quality & safety info

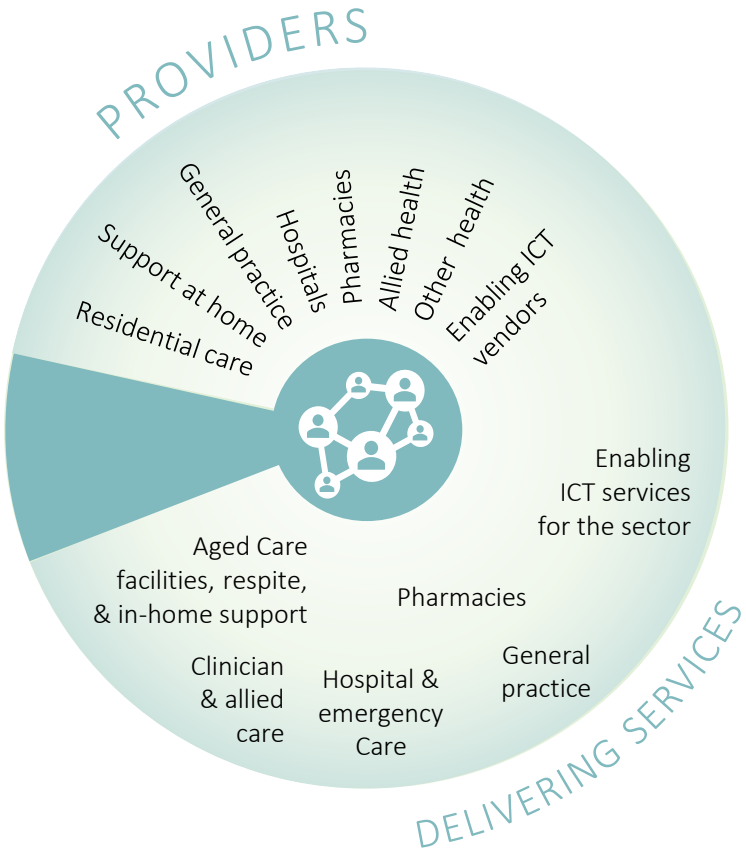
Improved safety with current data & info
Dynamically change the info govt. holds, especially during times of crisis

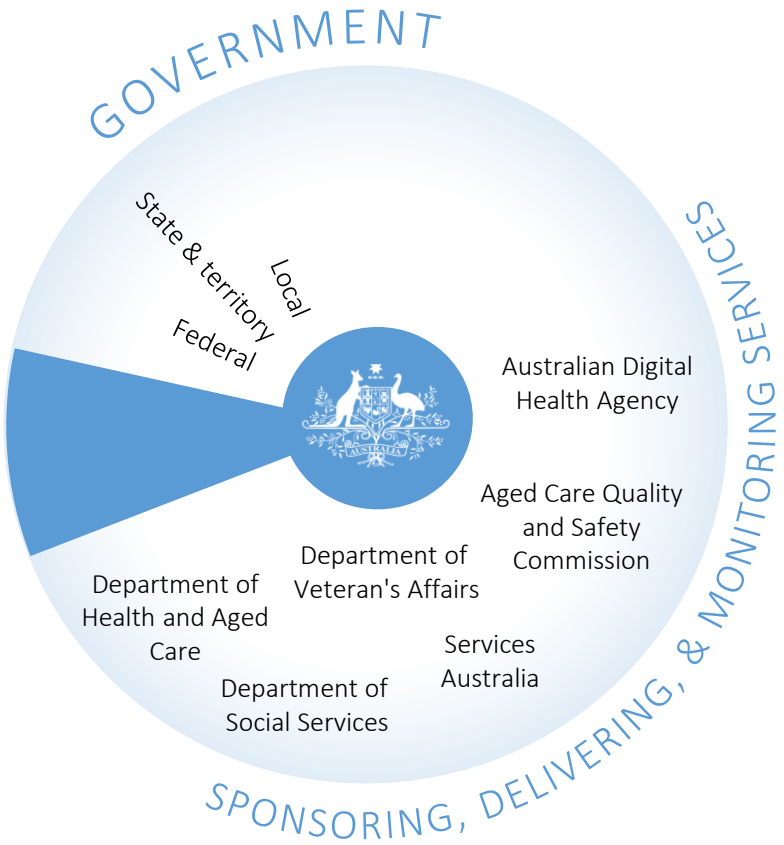
Streamlined, interoperable experience
Enable providers to self-serve the services they provide to consumers via a simplified, integrated platform without needing to access multiple platforms across government

Persona groups to be used and the roles within each group

Initial thinking around personas







Workforce

Assessors

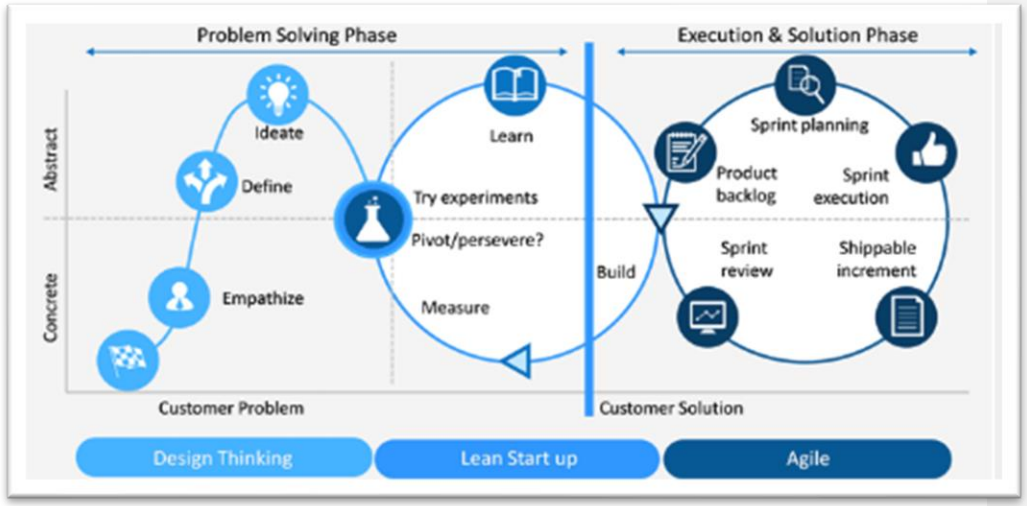
Overview of co-design streams

Parallel co-design streams

EXPLORE the problem → DISCOVERY

Build the RIGHT thing → BUILD LEAN

Build the thing RIGHT → BUILD AGILE



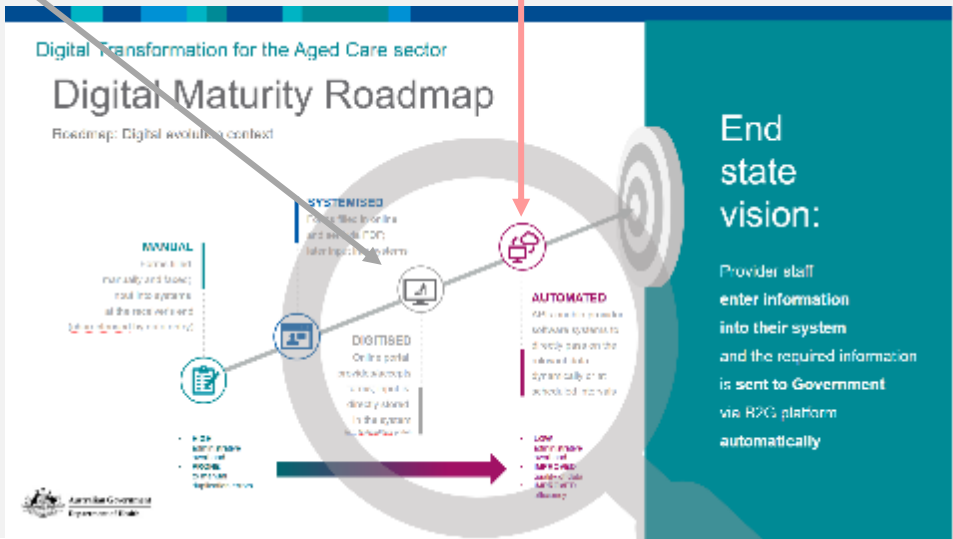
Two immediate co-design streams:

DIGITISED focus (UX)

Co-design in this space will work with end users of a system to create a great experience for users; sessions will observe how users interact with the system.

AUTOMATED focus (API)

Co-design in this space will focus on bringing developers into conversations about data models and approaches; session will involve discussion and collaboration on API design & development.



Open co-design activities by phase

Open

DIGITISED focus (UX)

AUTOMATED focus (API)

- Journey Mapping
- Portfolio Timeline
- SP Collaboration Site
- Support at Home
- Health Care Identifiers
- Provider Operations
- Dollars Going into Care
- Worker Screening
- Quarterly Financial Reporting: Trial
- 24/7 Registered Nursing
- Aged Care Transfer Summary (ACTS)
- B2G: Authentication Discovery

On today's agenda

PLAYBACK
Agile – UX digitised focus

24/7 Registered Nursing

Project update

Lavanya Madasu & Phil Fleischer
Design Lead & Director| Transformation & Quality Branch

Australian Government
Department of Health and Aged Care

The Solution Overview

The Department of Health and Aged Care is developing a form to be made available to Residential Service Providers to capture information relating to the provision of Registered Nurses within their facilities, including the amount of time that they have been available to provide care

This information will be collated and sent to Services Australia, who will make payments to providers who meet the eligibility criteria – at a high level, that criteria includes number of occupied bed days and the number of nurses provided

Project Status & Milestones

- 24/7 RN project is tracking green and on schedule to be delivered as part of Aged Care Release 5 for 3 Jul - Go-Live
  - Build on-track and completed in April.
  - Testing underway and on-track for completion 29 June.
  - User Acceptance Testing by ICT Strategy Business Assurance branch scheduled to commence 01 June.
  - Integration with Services Australia for payments processing has been successfully established and test in progress.
- System is planned to be fully operational from 3rd July for Residential service providers to;
  - Record RN(Registered Nurse) availability commencing 3rd July.
  - Submit first RN report for the month of July from 1st August.
- Assessment outcome will be notified to providers on submission for Supplement payments to be processed by Services Australia

PLAYBACK
Lean start-up

Provider Operations playback

Project update

Phil Fleischer & Rohit Sood

Director & Scrum Master | Transformation & Quality Branch

Australian Government
Department of Health and Aged Care

Accountability and transparency in aged care

Royal Commission Recommendation 88(e)

Government commitment to publishing more financial information on *residential* aged care

Reform outcomes

- Improved data for older Australians
- Streamlined, reporting capability for approved providers
- Building accountability and transparency in aged care
- Improved quality care

New data collected July-Oct ‘23 → **New & existing data collated Nov-Dec ‘23** → **Provider Preview Dec ‘23** → **My Aged Care Jan ‘24**

Increasing Provider Transparency

Providers' Operations
(Approved providers)

- Governing body statement & membership
- Food preparation
- Diversity & inclusion
- Feedback, complaints improvements
- Key personnel
- Home care financials
- Service provision and use

Dollars going to care
(Residential care)

How much money is spent on….

- Care
- Cleaning
- Nursing
- Administration
- Maintenance
- Profits

Data published on My Aged Care from January 2024

Project Delivery

Shared Project Team Resource Model

Shared Business Process & Joint Solution Design Approach

Two Phase Development

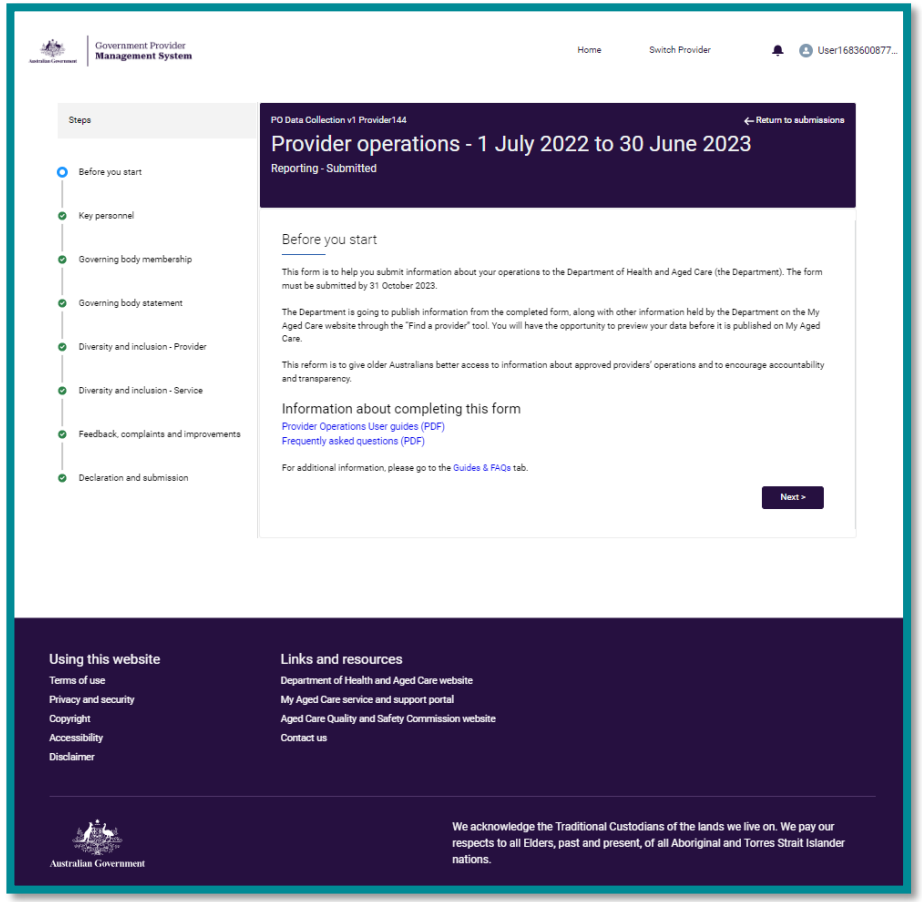
Phase One (July 2023)

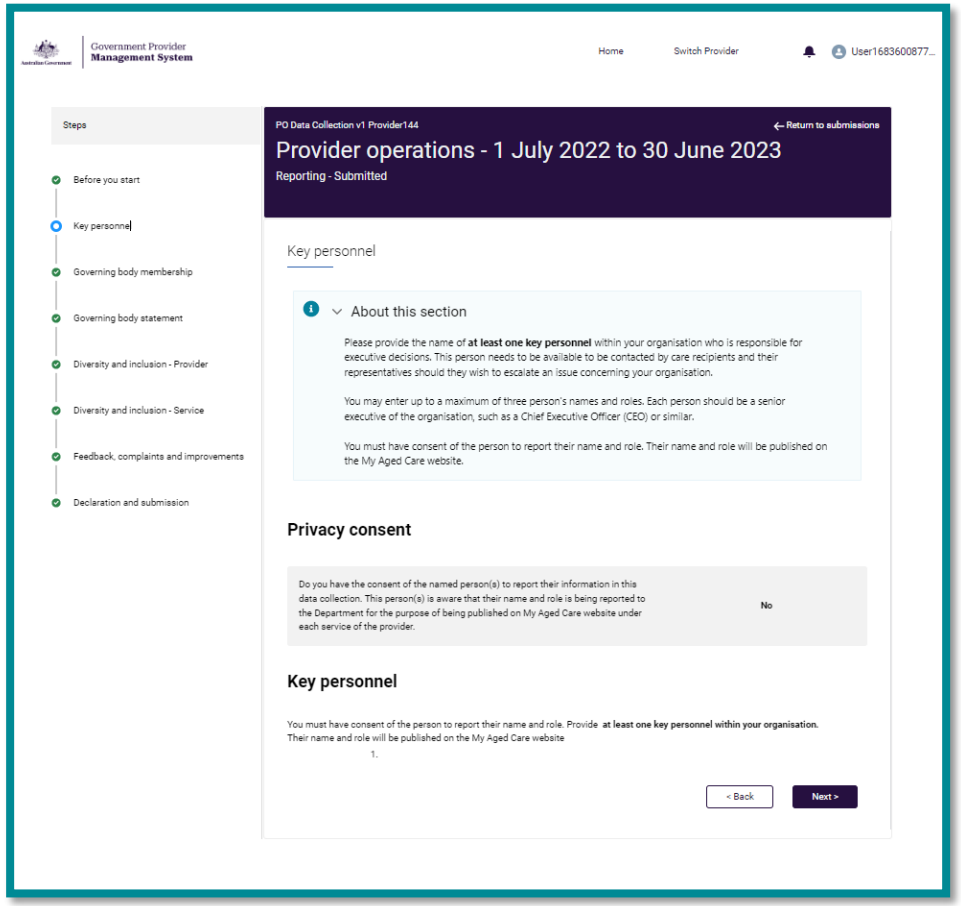
New Provider Operations Collection Form

Phase Two (October 2023)

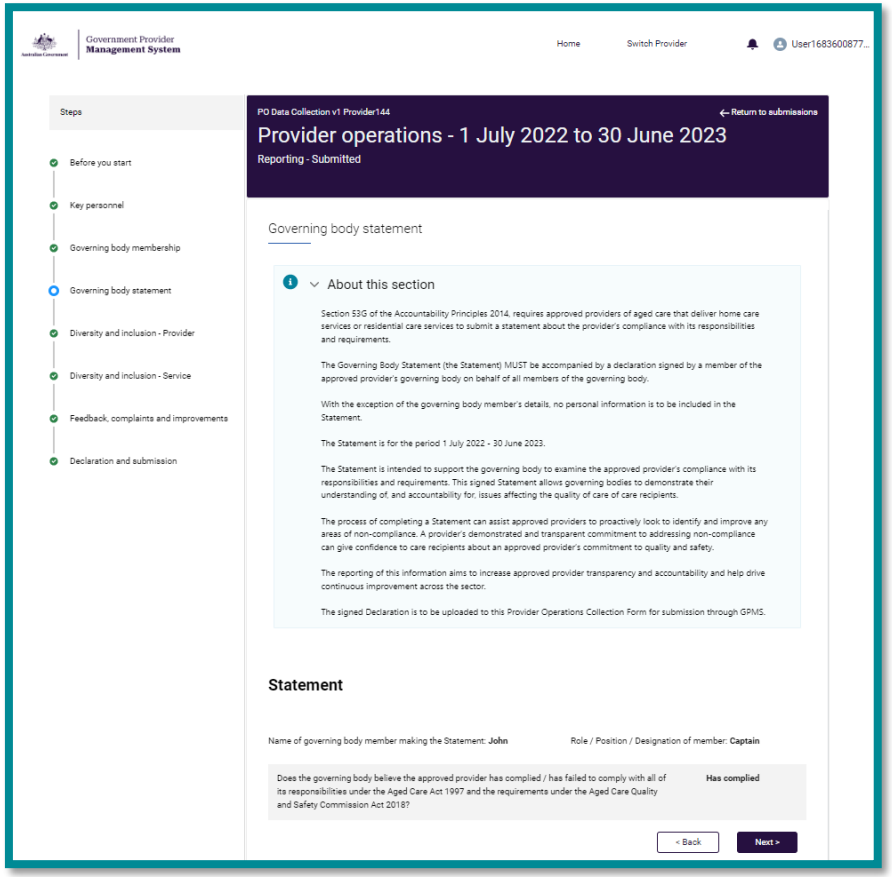
Collate, review and publish Provider Operations and DGTC data

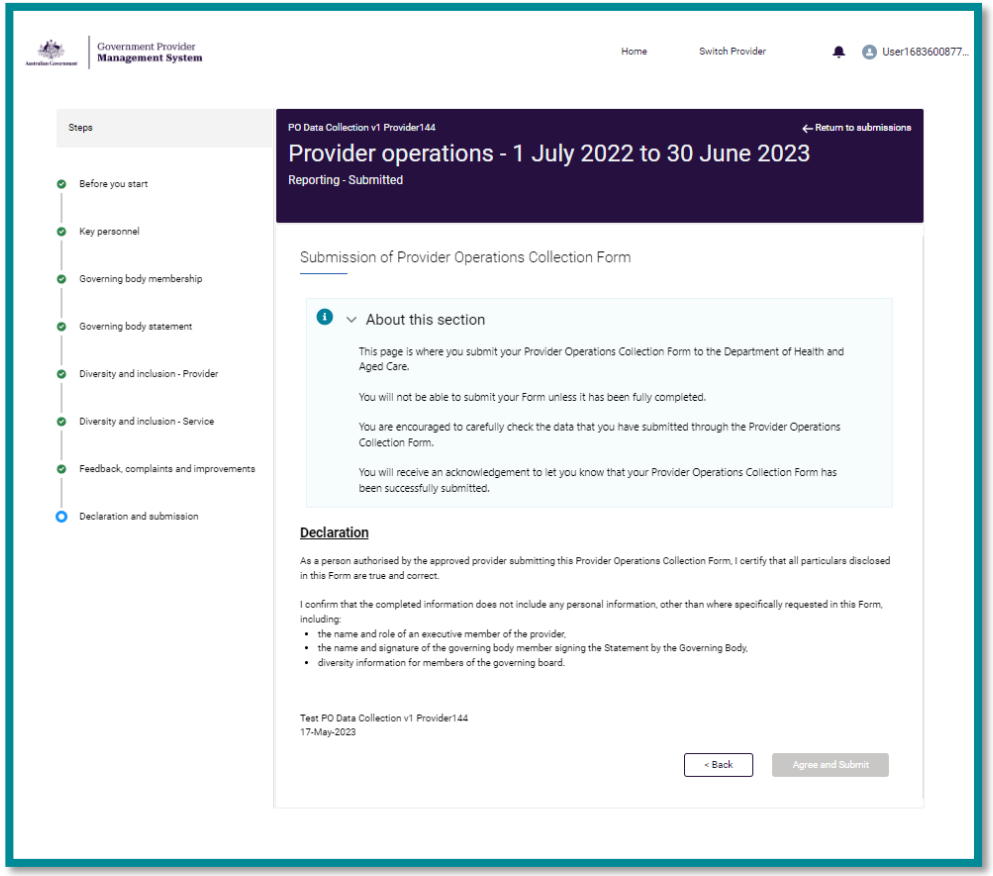
Screen shots





Screen shots





UPDATE
Agile

B2G Onboarding and Conformance

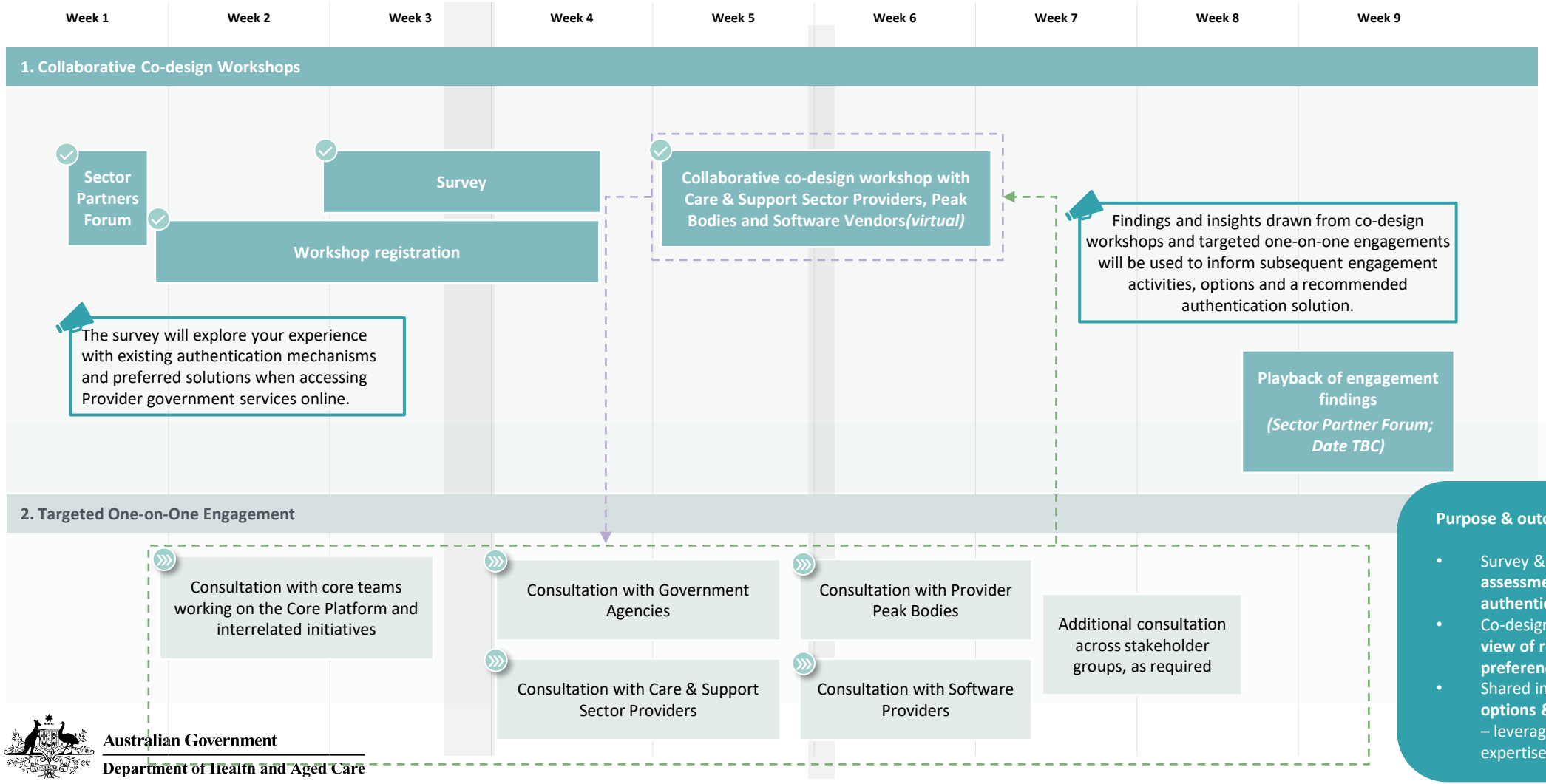
Status overview

John Sidey & Shaeyen Mackay
Conformance Lead | Concept 6

Australian Government
Department of Health and Aged Care

B2G Onboarding & Conformance Engagement Update

Comprehensive stakeholder engagement is being conducted across the Department of Health and Aged Care, other Government Agencies and Sector Partners to explore authentication preferences, requirements and considerations and inform solutions options.



Purpose & outcomes

- Survey & discussions have **informed assessment of existing provider authentication** solutions
- Co-design has offered a **comprehensive view of requirements, use cases, & preferences**
- Shared insights will identify **suitable options & viable authentication solutions** – leveraging experience & subject matter expertise

Day in The Life Of (DILO) | Provider Organisation

As a senior business staff member in an Aged Care Provider Organisation, I support individuals to become registered Providers and undertake their role as a carer. In addition to my own workload, such as completing ongoing reporting to Government, I support our Providers navigate the onboarding and offboarding process when they join and/or leave our organisation.

We have a new starter joining our **Aged Care Provider Organisation** and **I am supporting them through the onboarding process.**[1]

Note: Providers download the myGovID app, create their digital identity and use it on an going basis via their personal device.

I support Providers **with any issues they may encounter in this process.**

It isn't easy to register for a myGovID. Many **Providers** have basic IT skills and need a lot of help, so **I am usually very hands-on** which takes up a lot of my time.

Note: Only a Director of the organisation is permitted to allocate authorisation through RAM. Directors are often board members that work outside of the organisation and have limited availability.

I then ask our Director to log into RAM and authorise me to act on behalf of the organisation. Depending on their availability, this might take weeks.

As they are time poor, it is incredibly challenging to get them to come in and complete this process. If I could do this step myself, it would save our Directors, Providers and me a lot of time.

Note: Providers must set up and use myGovID via their personal device, posing risk to ISM compliance due to limited control over a device that providers use to access Government services. [2]

As I am now a delegate in RAM, I log in using myGovID and **link the Provider's myGovID to the organisation in RAM.**

myGovID is linked to the individual Provider's identity and personal device, which means that **we don't have control of the device's security**.

I then **support the Provider in setting up a PRODA account.**

There is limited support available to help me use PRODA. So if the Provider has any trouble in registering, **they come to me for help.** This can consume a lot of my time.

Using their new **PRODA** account, I then **link it back to their myGovID.**

By this point, I've gone **back and forth between multiple systems**. It would save a lot of time and effort if this was streamlined.

I then enable user access in each system that they will need to use in their role as a Provider which adds additional administrative burden on my role.

Note: Some of my reporting responsibilities include, but are not limited to:
- *DEX reporting*
- *ACQSC reporting*
- *DSS grant acquittal reporting*
- *Centrelink claiming.*

I also **have ongoing reporting responsibilities.** It can be difficult to meet reporting timeframes while I'm supporting staff in onboarding and access activities.

I need to **complete the authentication process** for reporting, which can be quite cumbersome. It would be easier if I only needed to authenticate once into Government systems to complete reporting.

Note: As I am already an administrator in RAM, I log in using myGovID and unlink the Provider's myGovID from the organisation in RAM.

When a Provider leaves our organisation, I need to log into RAM to **revoke their access**, otherwise they may still be able to access confidential information after they've left the organisation.

I need to revoke access to other systems and government portals too. To do this, I have to know all the responsibilities and access rights the individual had in their role.

This can be a very manual process if they had access to multiple portals and systems.

I wish that we had a **streamlined and easier way of authenticating into Government systems.** This would allow me to focus on delivering my role, as opposed to completing manual activities.

Key Themes arising from the Provider Experience

ISM Compliance Risk

MyGovID is tied to the Provider's individual identity and their personal device. They are expected to use their own device to authenticate to our systems, however they are completing an organisational role.

Provider organisations are required to ensure they have security measures in place. **However there is no way for to ensure staff personal devices are secure,** which presents **ISM compliance issues.**

Role-based Delegation

During the Provider onboarding and offboarding process, Business staff require Directors (usually senior executive) to delegate authority for staff to act on behalf of the organisation as an *administrator*.

Directors are often senior executives, or voluntary board members. Depending on the size of the organisation, it can **be incredibly difficult to ask them to find the time in their already busy schedule to complete the delegation process.**

Manual Process Completion

Existing authentication mechanisms are highly manual and time-consuming. Providers see value in automatic provisioning to save time and enable Business executive, staff and Providers to focus on their core role.

It is especially hard if to bring on new staff (such as a casual worker) or have staff go on leave as administrators need to go into multiples portals and manually provide access repeatedly.

Limited Support

There are limited Government resources that Business staff and Providers can refer to and rely on for help.

This means that **it takes a lot of time out of day-to-day operations to provide support to Providers** resulting in additional backlog of workload and delays in completion.

Australian Government
Department of Health and Aged Care

Time Intensity: **Low:** Less than 1 hour to complete | **Moderate:** Up to 1 day to complete | **High:** More than 1 day – 1 week to complete

[1] *DILO activities, pain points and timeframes are based on findings from consultation with Aged Care Provider Organisations.*
[2] *Australian Signals Directorate, Australian Cyber Security Centre (ACSC): Information Security Manual, 02 March 2023.*

Identity and Access Management Lifecycle (IAM) Lifecycle

Across the Aged Care Provider value chain, Providers will go through four main stages of the Identity and Access Management Lifecycle

Aged Care Provider Value Chain

1. Provider Application
2. Provider Enrolment
3. Provider Service Registration
4. Provider Maintenance
5. Delivery of Services
6. Provider Claim
7. Provider Payment
8. Monitoring, Reporting, Compliance and Performance

Provision

Registering organisations, onboarding users and assigning responsibilities and authorities when interacting with services

Use

Confirming that users are who they say they are and that they are authorised to interact with services

Manage

Managing organisation and user accounts and authorisations including monitoring, auditing, updating, adding and removing access

Deprovision

Offboarding and removing the accounts and accesses of organisations and users

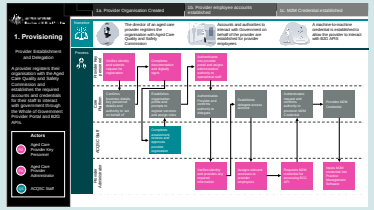
Detailed Use Case Examples

Key use cases are being developed across the IAM lifecycle to support engagement with sector stakeholders and ensure the provider experience is captured in future state requirements

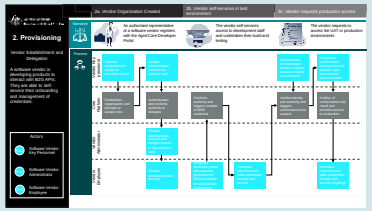
Provision

Provisioning access and accounts to vendor and provider representatives, for example:

1. Provider Onboarding and Delegation



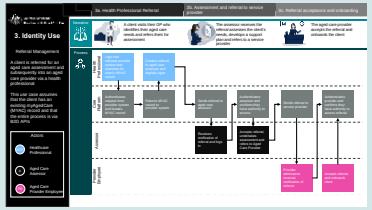
2. Software Vendor Onboarding and Delegation



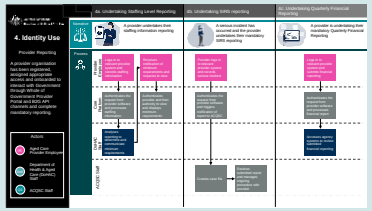
Use

The use of identities and accounts to act on behalf of providers when interacting with Government, for example:

3. Referral Management



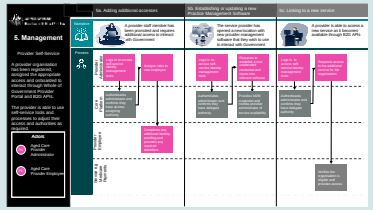
4. Provider Reporting



Manage

The ongoing management of accesses and authorisations of provider and vendor representatives, for example:

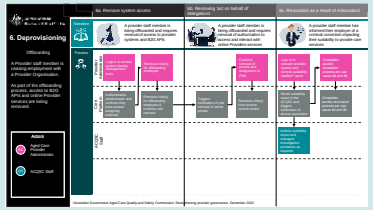
5. Provider Self-Service



Deprovision

The deprovisioning of accounts and removal of 'on behalf of' authorisations, for example:

6. Offboarding

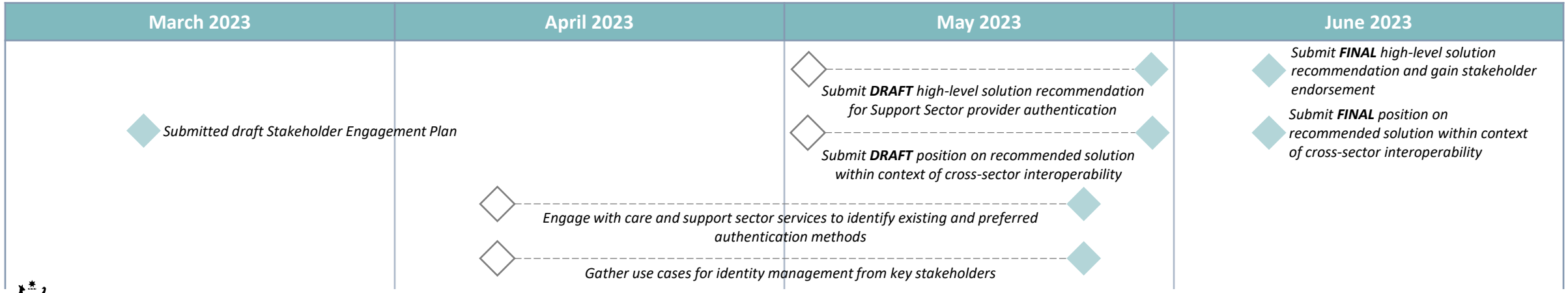


Next Steps

Continued collaborative engagement and co-design activities will provide evidence-base authentication solution options and recommendation based on provider authentication preferences, and target state requirements for B2G authentication and identity access management.

1. Continue to engage across Government, Care and Support Sector Providers, Peak Bodies, and Software Vendors
2. Develop options & recommendation(s) for target state
3. Test and validate options & recommendation(s)
4. Progress to high-level architecture.

Indicative Timelines



Portfolio Timeline and Collaboration Space

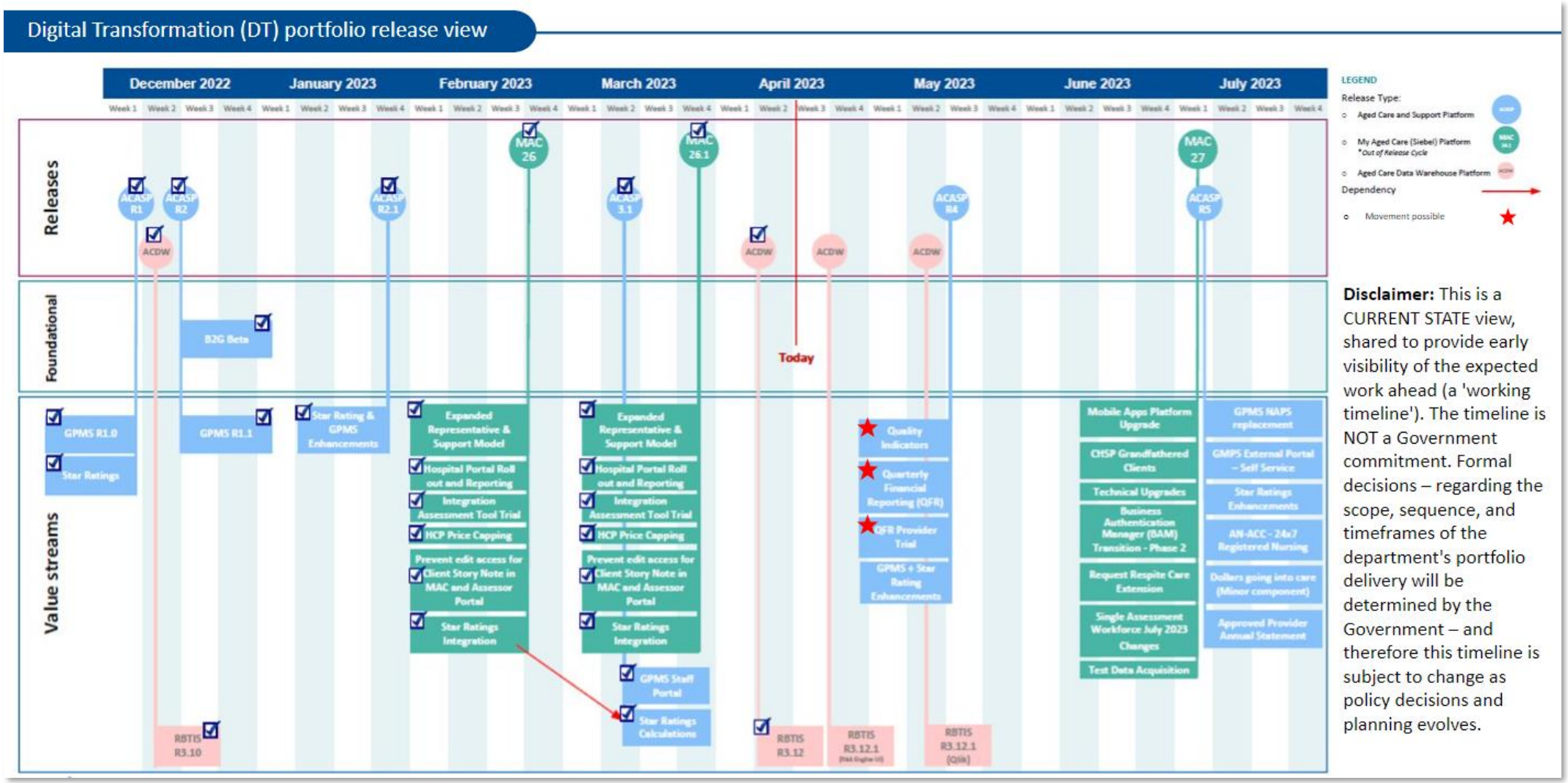
Uplifting our resources

Jessica Holmick
Sector Engagement | Digital Business and Sector Engagement Branch

Australian Government
Department of Health and Aged Care

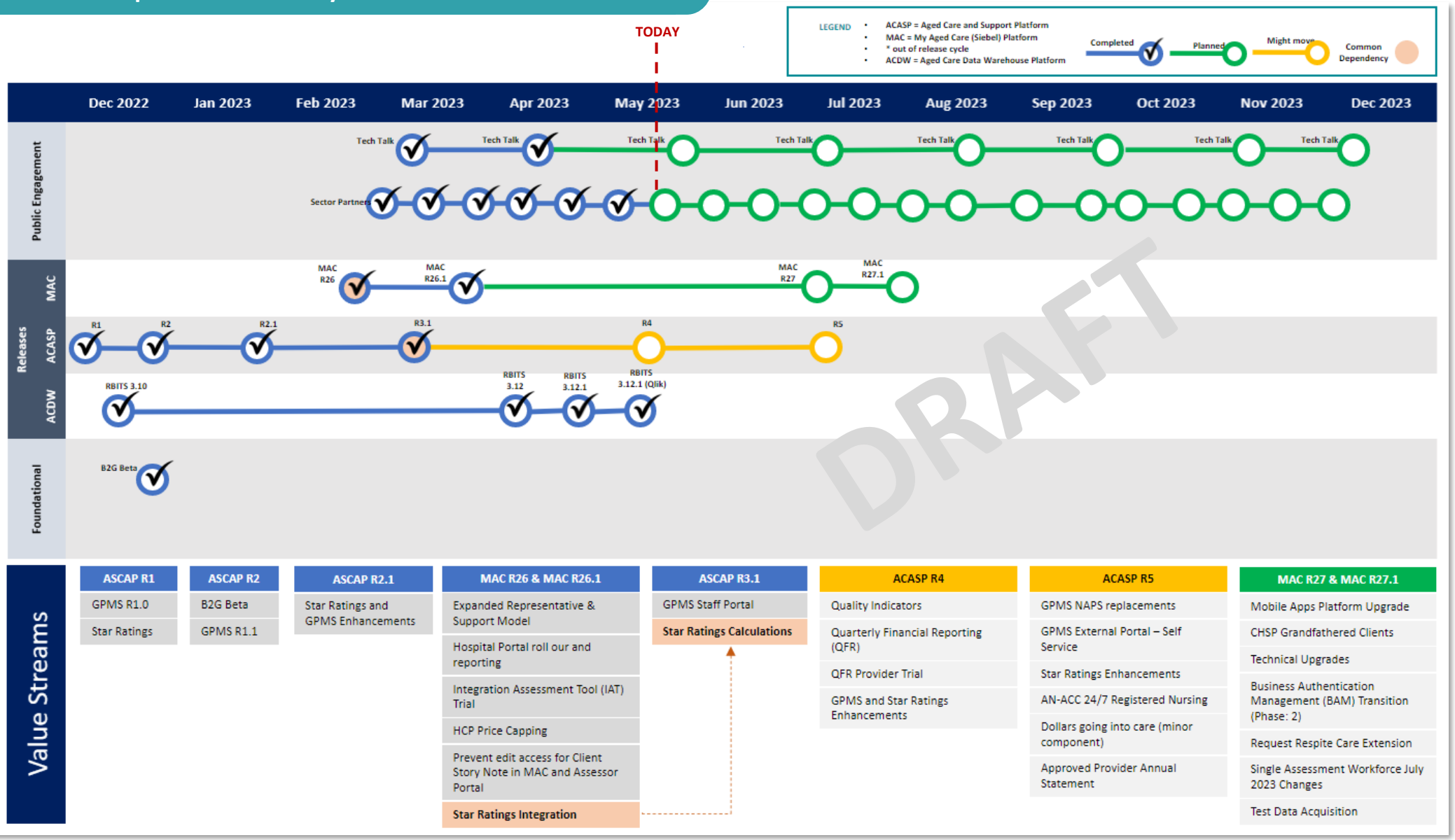
Current Portfolio Release View

Digital Transformation (DT) portfolio release view



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.

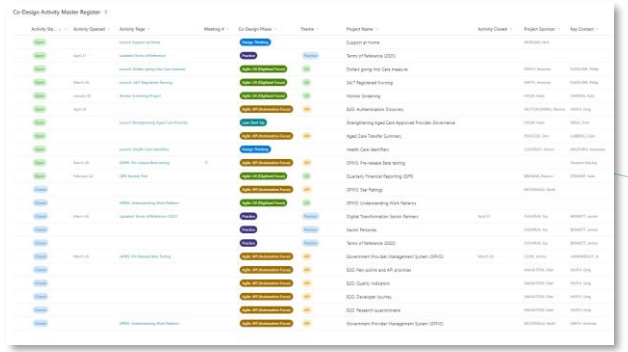
Portfolio Timeline improvement activity

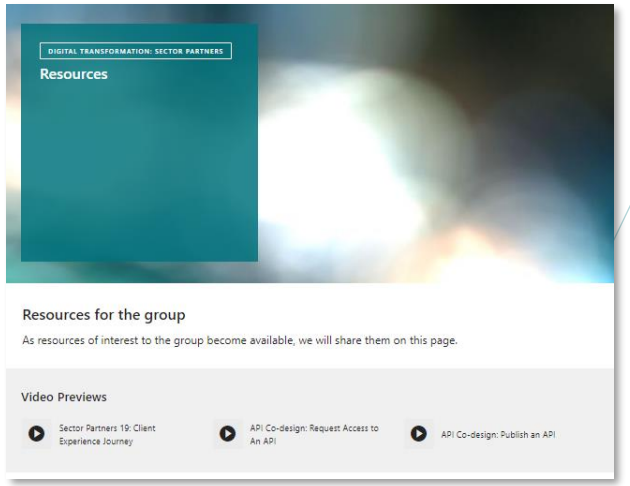


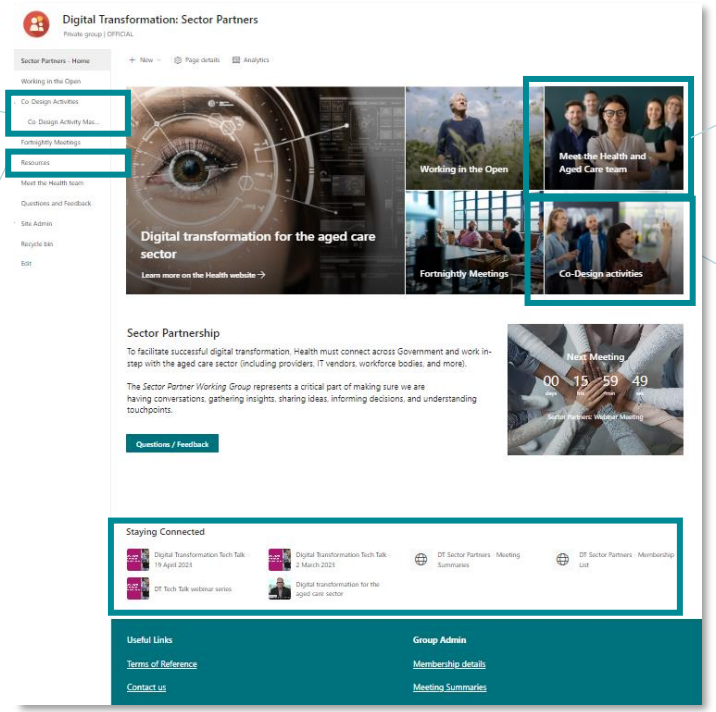
Value Streams

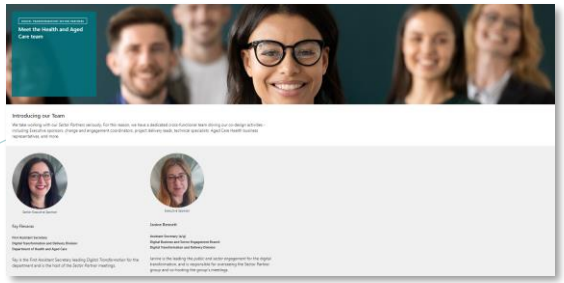
ASCAP R1	ASCAP R2	ASCAP R2.1	MAC R26 & MAC R26.1	ASCAP R3.1	ACASP R4	ACASP R5	MAC R27 & MAC R27.1
GPMS R1.0	B2G Beta	Star Ratings and GPMS Enhancements	Expanded Representative & Support Model	GPMS Staff Portal	Quality Indicators	GPMS NAPS replacements	Mobile Apps Platform Upgrade
Star Ratings	GPMS R1.1		Hospital Portal roll our and reporting	**Star Ratings Calculations**	Quarterly Financial Reporting (QFR)	GPMS External Portal – Self Service	CHSP Grandfathered Clients
			Integration Assessment Tool (IAT) Trial		QFR Provider Trial	Star Ratings Enhancements	Technical Upgrades
			HCP Price Capping		GPMS and Star Ratings Enhancements	AN-ACC 24/7 Registered Nursing	Business Authentication Management (BAM) Transition (Phase: 2)
			Prevent edit access for Client Story Note in MAC and Assessor Portal			Dollars going into care (minor component)	Request Respite Care Extension
			Star Ratings Integration			Approved Provider Annual Statement	Single Assessment Workforce July 2023 Changes
							Test Data Acquisition

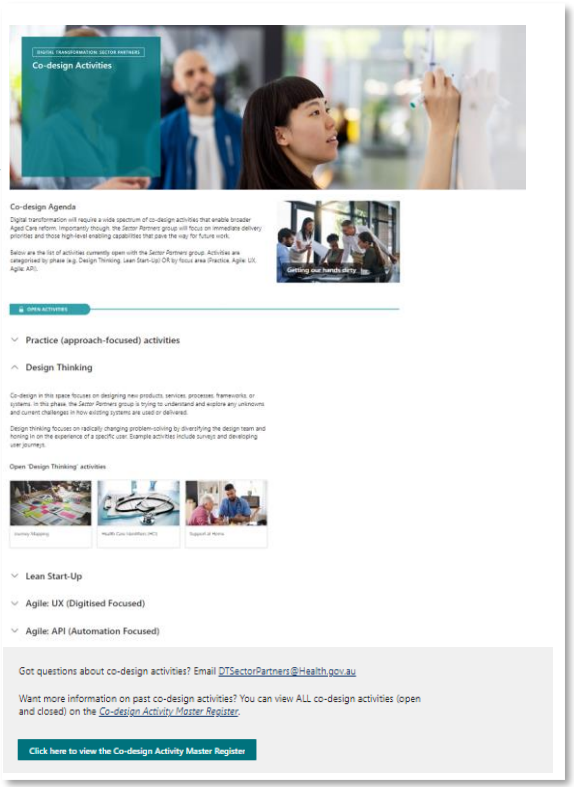
SP Collaboration Site improvement activity











THANK YOU

NEXT MEETING:
11am, Friday 2 June