



Roadmap Implementation Governance Group (RIGG) Meeting Summary – 4 December 2025

Introduction

The Chair welcomed members to the fourteenth meeting of the Roadmap Implementation Governance Group (RIGG), gave an Acknowledgement of Country, and an acknowledgement of lived experience. The Chair formally welcomed Jen Duncan as the new representative from the Tasmanian Department of Health. The Chair welcomed Laura Naing, a RIGG member with lived experience who has recently rejoined the RIGG. Laura briefly introduced herself.

The Chair gave a verbal declaration about confidentiality and asked members to declare any conflicts of interest. No new conflicts of interest were declared by members.

The Chair shared housekeeping reminders and acknowledged that 3 December 2025 was International Day of People with Disability, with a theme of *Fostering disability inclusive societies for advancing social progress*.

Previous meeting and follow-up on action items

The previous meeting summary was endorsed by members with no changes. There were three action items from the last meeting. Work is complete for all items.

Professor Julian Trollor from the National Centre of Excellence in Intellectual Disability Health (the National Centre) has requested a meeting with the Director of the Black Dog Institute to discuss archived Easy Read resources. The National Centre will continue to explore opportunities to host the resources on the Knowledge Exchange Hub.

Interface between NDIS and Health

Sam Shipley and Alec Sewell from the Department of Health, Disability and Ageing provided an overview of the Disability and Carers Group and work led by the NDIS Health Interface Team (the team) within the Department. The team looks at connections between the NDIS and health systems and works closely with other areas of the Department and the National Disability Insurance Agency to influence work. The team has six main focus areas:

- Palliative care
- Psychosocial supports
- Concurrent supports
- Complex care coordination
- Safe and timely discharge from hospital
- NDIS Supports rules (where they are related to health and mental health)

Members highlighted the importance of linking this work with primary care, improving NDIS support roles, and improving data linkages particularly around palliative and end-of-life care for people with intellectual disability (ID). Members also discussed opportunities and solutions to better recognise people with ID in emergency departments to improve hospital discharge timeframes. Sam Shipley welcomed the feedback and the lived experience perspectives shared by members and offered to work with the RIGG Secretariat to arrange offline meetings with individual members to discuss topics in more detail.

Primary Care and Workforce Reform

Lindsey Bailie from the Department of Health, Disability and Ageing provided an update on work underway following four recent Commonwealth reviews:

- Review of General Practice Incentives
- Review of After-hours Primary Care Programs and Policy
- Working Better for Medicare Review
- Scope of Practice Review

In January 2025, the Department established an internal taskforce to consider and consolidate ideas from these reviews. The taskforce has been presenting ideas to an expert panel for testing and further development prior to providing advice to Government. The Department provided an update for RIGG members about the taskforce's work and considerations to date.

Lived experience members emphasised the importance of direct communication between healthcare workers and people with ID rather than their carer or support person; improving health workers understanding of ID; allowing more time to discuss needs with general practitioners (GPs); and making MyHealthRecord more accessible.

Members emphasised the need for engagement with ID stakeholders to ensure reforms meet the needs of people with ID and do not further marginalise this group. Members discussed extending consultation beyond practitioners; improving accessibility and health navigation for people with ID; addressing attitudes of healthcare professionals toward people with ID (with the Primary Care enhancement Program cited as a good example); consideration of the GP workforce and its impact on access to primary healthcare; and exploring opportunities for nurses to deliver more services.

Oral Health Update

Bec Sykes from the Department of Health, Disability and Ageing provided an update on the development of the next National Oral Health Plan (the Plan). Consideration has been given to how the Plan can improve oral health for people with ID. Suggestions include: making information easier to find and more accessible (e.g., through Easy Read documents, videos, and translations); improving skills of the oral health workforce to provide care for people with disability; embedding oral health care in disability settings; increasing the availability of healthy foods and drinks in these settings; better access to sedation; and improving data collection and linkage to better understand oral health in Australia.

Members discussed the need for high-quality resources and materials, the importance of a specific strategy to address the oral health outcomes for people with ID, and opportunities to combine procedures requiring sedation for children and young people. In addition, the

Department advised it is exploring ways to address the data limitations caused by most dental services being delivered in the private sector. The Department is planning to seek endorsement of the Plan in early 2026.

Jim Simpson AO (Council for Intellectual Disability) and Dr Zanab Malik (Australian and New Zealand Academy of Special Needs Dentistry) discussed their presentation to the National Dental Directors (NDD) group on 29 September 2025. The NDD presentation focused on lived experience perspectives, clinical expertise, and specialist dental services. Opportunities discussed included: partnerships between the private and public sectors; combining other procedures with oral health services under sedation; mini residencies, particularly for oral health professionals working in rural and remote areas; greater inclusion of dental and sedation needs in the NDIS; and the use of dental health passports and screening tools for sedation. The National Centre is also establishing a national dental clinicians' group. While the NDD presentation was well-received, no specific actions were agreed upon.

Continuing Professional Development Discussion

Jim Simpson AO (Council for Intellectual Disability) provided a brief update on the Continuing Professional Development (CPD) work linked to the medium-term actions in the ID Roadmap. RIGG members were invited to consider ideas for improving uptake of the CPD and bring these suggestions to the next RIGG meeting for discussion.

Lived experience members noted the importance of embedding CPD within university curricula and offering incentives to encourage health professionals to complete the training. Making adjustments for people with ID is straightforward but health professionals need to be aware of this. Healthcare experiences can be poor for people with ID as health professionals often speak to the carer or support person rather than the patient, rush appointments, and use complex language, acronyms, and jargon instead of simple, clear communication.

Other business

Recent publications

The Department of Health, Disability and Ageing published the 2024 Annual Progress Report for Roadmap actions on the Department's website on 2 September 2025.

The RIGG will be provided with some additional detail on individual action implementation to support ongoing monitoring and help to identify areas where there is more work to be done.

The Chair highlighted the need to start thinking about the 2025 Annual Progress Report (the Report). In the new year, the Department will begin contacting organisations and RIGG members to request input for the Report.

Meeting close

The Chair advised that this was the last RIGG meeting for 2025. The next meeting will be scheduled in the new year and the RIGG Secretariat will issue a placeholder following the December/January break.