Australian Government
Department of Health, Disability and Ageing

Roadmap Implementation Governance Group (RIGG)

Meeting Summary – 8 April 2026

Introduction

Mark Roddam, First Assistant Secretary, Primary Care Division, was the meeting Chair. The Chair welcomed members to the fifteenth meeting of the Roadmap Implementation Governance Group (RIGG), provided an Acknowledgement of Country, and an acknowledgement of lived experience. The Chair formally welcomed Nicola Lewis as the new representative from the NSW Ministry of Health and Nat Hanlon as the new representative from the National Disability Insurance Agency.

The Chair gave a verbal declaration about confidentiality and asked members to declare any conflicts of interest. Dr Cathy Franklin noted that the Queensland Centre of Excellence in Autism and Intellectual Disability Health is involved with the PCEP evaluation. No other conflicts of interest were declared by members.

Members were advised that due to an internal restructure with the Department of Health Disability and Ageing (the Department), responsibility for the National Roadmap for Improving the Health of People with Intellectual Disability (ID Roadmap) and RIGG transferred to the Disability and Carers Group, within Australia's Disability Strategy Branch from 30 March 2026. Genevieve Quilty, First Assistant Secretary, Disability Strategy, Supports & Inclusion Division, will assume the role of Chair following the transition. Minor administrative updates to the RIGG Terms of Reference will be circulated out of session.

Previous meeting and follow-up on action items

The previous meeting summary was endorsed by members with no changes. The Chair noted that the outstanding action item from the previous meeting has been completed.

Continuing Professional Development Discussion

Jim Simpson AO from the National Centre of Excellence in Intellectual Disability Health (National Centre) led a discussion on Continuing Professional Development (CPD), highlighting the low uptake of intellectual disability health training despite the availability of resources. Members discussed how health system levers such as registration standards, accreditation, and compulsory training could be used to embed intellectual disability-specific training into practice. It was noted that mandated training would be very hard to achieve. Discussions emphasised the value of practical, concise training tailored to different health professions and settings, and the need to improve visibility and awareness of existing training and resources. Incentives or payments for health professionals to undertake training could increase uptake.

Update on Primary Care Enhancement Program

Associate Professor Fran Boyle from the University of Queensland provided an update on the second phase of evaluation of the Primary Care Enhancement Program (PCEP). An interim evaluation report was submitted to the Department in February 2026. The findings were preliminary due to the need for additional data in several key areas of evaluation. Associate Professor Fran Boyle provided a high-level overview of the interim evaluation findings, noting that the University of Queensland will continue to work with PHNs to collect and understand relevant data to inform the final evaluation. The final evaluation report is expected in mid-2026.

Kat Davies from the Department advised members that the PCEP has been extended to 30 June 2028. The next two years of the PCEP will focus on ongoing monitoring and reporting, and building on strengths identified in the final evaluation.

Update on Procedural Sedation

Jim Simpson AO (National Centre) provided an update about a procedural sedation roundtable held in February 2026.

Discussions focused on the significant unmet need for supported sedation pathways for people with intellectual disability. Examples of effective local service models were shared, including tiered sedation pathways and coordinated models that enable multiple procedures to be undertaken safely under a single general anaesthetic.

Members discussed the importance of clear guidance for clinicians on when sedation may be appropriate. Members agreed that state and territory leadership will be important to develop sustainable procedural sedation pathways and support broader communication of the roundtable's findings to drive system-level change. There may also be alignment with broader policy reform work addressing seclusion and restraint, and this will be explored offline. The National Centre will work with the Department to produce a final report with recommendations for a clear way forward.

Annual Progress Report Activity List

Tegan Rosenberg from the Department presented information about ID Roadmap actions and their current progress rating. Members discussed limitations of the current rating approach and identified opportunities to refine these ratings to better reflect progress variation across different actions.

A small working group will be established to support the assessment and decision-making on ratings for the 2025 Annual Progress Report. The group will also assist in identifying priority actions for the Department and RIGG to progress. The working group will consider how to meaningfully involve people with intellectual disability in this process.

Other business

The Chair thanked members for their nominations in response to an Expression of Interest to participate in a Medical Research Future Fund (MRFF) research project on a multitiered procedural sedation model. Nominations have been forwarded to Flinders University.

The next RIGG meeting is expected to be held in August 2026. The Secretariat will circulate a calendar placeholder in due course.