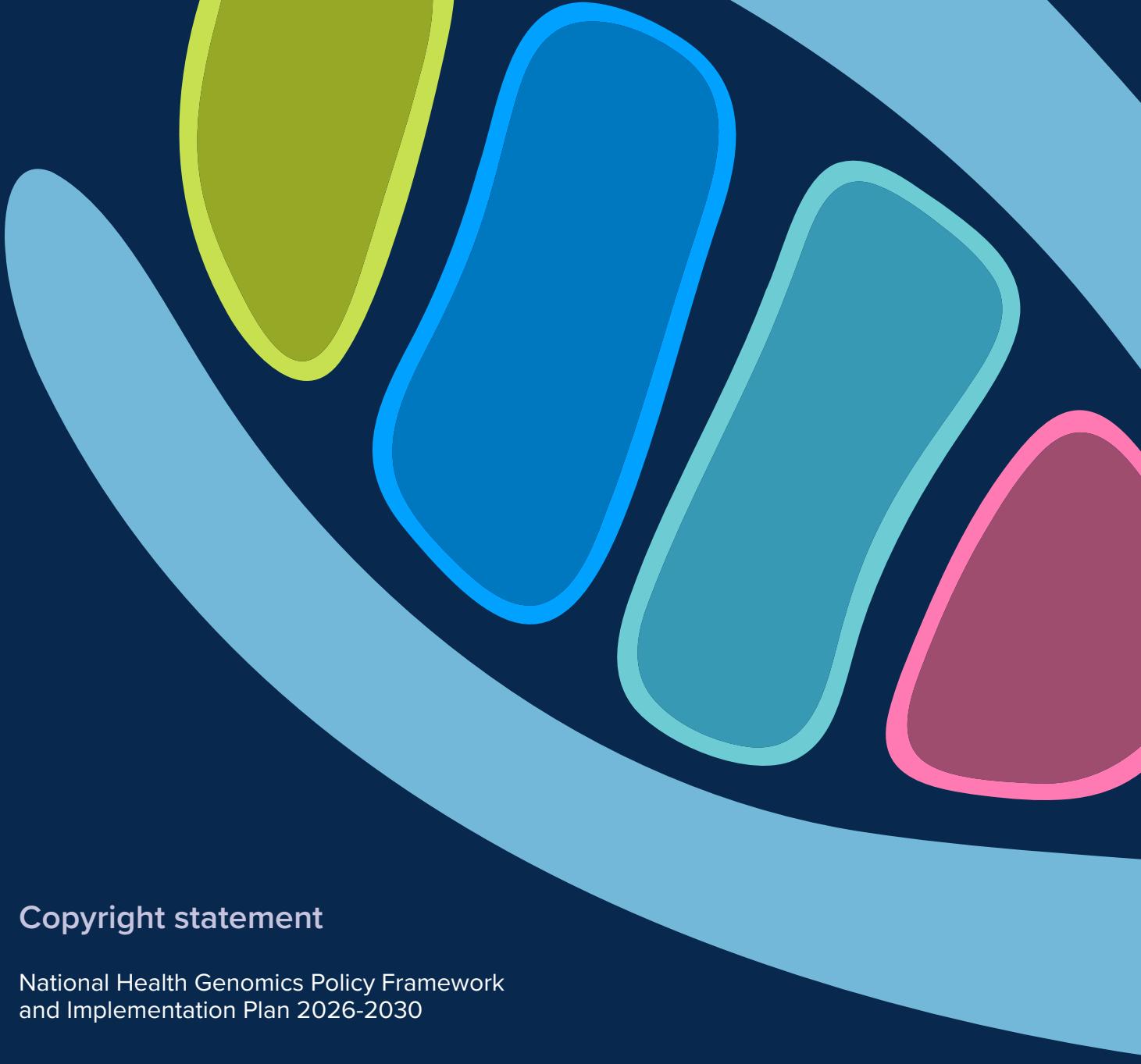
National Health Genomics Policy Framework and Implementation Plan

2026-2030

HEALTH MINISTERS' MEETING



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National Health Genomics Policy Framework and Implementation Plan 2026-2030

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Acknowledgement of Country

We acknowledge the Traditional Owners and Custodians of Country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.

Foreword

Genomics is changing health care in Australia, offering new opportunities to prevent, diagnose and treat disease, delivering more personalised and effective care for all Australians.

The *National Health Genomics Policy Framework and Implementation Plan 2026–2030* ('National Framework') – endorsed by Health Ministers – builds on the significant work already undertaken across Australian jurisdictions to integrate genomics into healthcare delivery and policy. It sets out the shared ambition to embed genomics as a trusted, accessible and routine part of health care.

Developed through extensive consultation, the National Framework recognises the diverse needs of Australians, particularly those of Aboriginal and Torres Strait Islander people. It prioritises equity, empowerment and collaboration to ensure culturally safe and responsive approaches to genomics across the health system.

Over the five-year term of this National Framework, governments will work together, guided by the strategic priorities and activities, to strengthen system capability and confidence in genomics. Building on the growing integration of genomics into health care will require effective partnerships. These partnerships will support community engagement in genomics. They will strengthen the skilled and genomics-ready workforce to support equitable and person-and-family centred genomic health care delivery across Australia. All Australian governments will work together on approaches that support the secure and appropriate use of genomics data. They will also foster research and innovation that has the potential to translate into tangible health benefits for all Australians.

Governments will collaborate to identify shared priorities for genomic testing and digital capability. This includes opportunities for nationally-coordinated approaches for specialist genomic services and the broader integration of personalised medicine across the health system.

We thank all those who contributed to the development of this National Framework. We look forward to continuing to work in partnership with consumers and carers, health care professionals, researchers, industry and the broader community to realise its vision. Together, we can ensure that the transformative potential of genomics is realised, for the health and wellbeing of all Australians.

Endorsed by Health Ministers

Notes on terminology

Genetics and genomics

In this document, the term genomics typically refers to both genetics and genomics, except where a distinction is needed. Genomics is considered an extension of genetics, rather than a separate field.

Aboriginal and Torres Strait Islander, First Nations and Indigenous

In this document, the term Aboriginal and Torres Strait Islander people is used to refer collectively to the diverse Aboriginal and Torres Strait Islander peoples of Australia. This term recognises the many distinct nations, cultures, languages, beliefs and practices of Aboriginal and Torres Strait Islander peoples across the country.

The terms First Nations and Indigenous are used only when reflecting the language of existing concepts, organisations or referenced publications.

Overview

VISION

All Australians access and benefit from genomics as a part of everyday health care, helping everyone live healthier lives.

MISSION

To sustainably embed high-value genomics into routine health care across Australia, while advancing vital research and innovation.

We will do this by enabling person- and family-centred, culturally safe, efficient, effective, ethical and equitable genomics that reflects the values and expectations of all Australians.

Guiding Principles

- Promote equity in access and outcomes
- Empower people, communities, and the workforce
- Ensure care is evidence-based, trusted, and culturally safe
- Focus on outcomes

Enablers of Success

- Cooperative governance and leadership
- Sustainable resourcing
- Building on what works – avoid duplication, amplify impact
- Ongoing engagement and collaboration

STRATEGIC PRIORITIES

Understanding and empowering people, families and communities	Building a sustainable, dynamic health system	Managing genomic information responsibly and securely	Aboriginal and Torres Strait Islander-led genomics

OUTCOMES

Empower informed decision-making and community engagement. Improve public genomics knowledge.	Strengthen specialised workforce capacity. Support the broader health workforce. Optimise system integration and investment. Foster inclusive research and innovation.	Enable safe, secure and trusted data collection, sharing, storage, use and management.	Build partnerships, engagement and trust. Improve access, outcomes and cultural safety.

Contents

Purpose

The *National Health Genomics Policy Framework and Implementation Plan 2026–2030* ('National Framework') sets out how Australian governments will work together to further embed genomics into the health system. It seeks to improve health outcomes while reducing fragmentation and duplication of effort across jurisdictions.

It provides a coordinated, national approach to the continued integration of genomics into health care for all Australians. It supersedes the ***National Health Genomics Policy Framework 2018–2021*** ('previous framework').

Background information on the development of this National Framework is provided in Appendix 2.

VISION

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AUDIENCE

This National Framework is primarily directed at decision-makers and policymakers at the national, state and territory, and health service levels.

It is also intended to be a useful resource for the general public, communities, advocacy organisations, health care industry, researchers and health care professionals.

It details the shared strategic priorities, desired outcomes and activities of Australian governments. This visibility may assist non-government organisations to develop policies and strategies. It can also support them in providing services, conducting research and carrying out other activities. All these efforts should consider, and where possible, align with this National Framework.

Scope

This National Framework focuses on health care and research that uses human genomic information to support the health of individuals and communities. This includes human genomic testing to prevent, diagnose and treat genomic conditions, including through precision medicine. It also supports a life-course approach, recognising the value of genomic information in promoting health and preventing disease from preconception through to older age.

It covers genomics in cancer care, including both inherited (germline) and acquired (somatic) variants. This application of genomics is given additional attention under the ***National Framework for Genomics in Cancer Control***.

This scope is designed to be flexible to keep pace with rapid advancements in genomics and related fields, as was the case with the previous framework.

Implementation of the National Framework will also consider emerging '-omics' technologies, such as proteomics, transcriptomics, metabolomics, lipidomics, and epigenomics.

However, other uses of genomic knowledge are beyond its scope. This includes:

- genomic testing of infectious microbes (covered by the ***National Microbial Genomics Framework for Public Health 2025–2027***)
- other non-human genomics, such as human microbiomics, the study of bacteria, viruses, and fungi that live in and on the human body.

Strategic context

Current and emerging applications of genomics

Genomics is already improving health outcomes for individuals, families and communities across Australia. Rapid advances in technology and evidence are shifting health care and research from genetics to genomics. Care models are also changing – from specialised clinical genetics services to integration into everyday clinical practice.

Current and emerging applications of genomics in health care include:

- Diagnosing and managing conditions across a broad range of specialties.
- Helping individuals and families understand their risk of certain conditions, guiding decisions about monitoring, lifestyle changes, early intervention and treatment.
- Supporting people planning or trying to conceive by providing information about their carrier status for inherited conditions.
- Enabling access to targeted treatments, such as immunotherapies, tumour agnostic therapies, and cell and gene therapies.
- Expanding genomics to diagnose and manage more common-place conditions, alongside rare and ultra-rare diseases, and cancers.
- Integrating pharmacogenomics, or how a person's genome affects their response to medications, into the clinical practice of prescribers and pharmacists.
- Applying genomics in population screening programs, to identify genetic risks in target groups, and to support prevention, early diagnosis and treatment.
- Adopting multi-omics approaches that combine genomics with emerging technologies.

Australia's health system and genomics

Australia's health system is a federated, multi-layer structure involving public and private sectors. It is funded through a combination of government contributions, private health insurance, and individual out-of-pocket payments. Responsibilities are shared between the Australian Government and state and territory governments. Each of these play a distinct, but interconnected role, in funding, policymaking, service delivery and regulation.

The system encompasses primary and community care, specialist services, hospital care, preventative and public health programs, and aged care. Although services are separately funded and operated, they aim to form a cohesive network to meet the health needs of Australians.

To improve the transition of genomics from research to clinical service delivery, Genomics Australia was established within the Australian Government Department of Health, Disability and Ageing on 1 July 2025. Genomics Australia also provides leadership, coordination and expertise in genomics. It is supported by the Australian Health Genomics Commissioner who advises the Australian Government based on broad engagement with the genomics sector and community. Genomic healthcare services in Australia are primarily delivered within the public health system, especially through hospitals that offer specialist care. These services include genetic testing, genetic counselling, clinical interpretation, and increasingly, genomic-guided therapies, including cell and gene therapies. In addition, state- and territory-based public pathology and genomic laboratories conduct a large proportion of genomic testing, particularly for complex or rare diseases.

While the most complex and high-cost interventions remain largely within the public health system, an increasing volume of genomic testing is also provided through primary care, private pathology laboratories, and private hospitals and clinics.

Implementation, governance and accountability

Implementation

This National Framework outlines four strategic priorities that guide national action to continue to embed genomics into routine clinical care. These priorities address opportunities and challenges, and support long-term, sustainable change.

Each strategic priority includes outcomes and high-level national activities focused on collaboration between government and sectors to support the continued integration of genomics into health care and research.

Some activities are foundational. These reflect critical areas for early action to support continued integration of genomics into the health system. Foundational activities have been identified based on stakeholder feedback and their role in enabling other activities under the National Framework.

Activities are identified as either time-limited projects or ongoing. Time-limited projects are designed to be completed within the term of the National Framework. Ongoing activities are those that will be implemented over its term and potentially continue long term.

Implementation of all activities will require collaboration across jurisdictions and consultation with stakeholders. In many cases, implementation will need to be adapted to reflect the unique design of local health systems, legislation, priorities and population needs. This approach ensures implementation is:

- relevant to local contexts
- community-led where appropriate
- responsive to the needs and priorities of different populations.

Governance and accountability

Clear governance and accountability arrangements are essential to effectively delivering this National Framework and making sure it can adapt over time.

The Health Chief Executives Forum (HCEF) is overseeing its delivery and is accountable for its success. An interjurisdictional committee will support this work, reporting to the HCEF.

Governance arrangements will be established through the following foundational activity.

Establishing governance arrangements

Foundational activity

Why this matters

Strong governance is essential to coordinate efforts across Australian governments and ensure consistent implementation of the National Framework. Clear roles, responsibilities and relationships will support collaboration, accountability and continuous improvement. Governance arrangements must be in place before beginning the implementation of any activities.

What we will do

We will establish governance arrangements to support coordination and cooperation between jurisdictions that will guide the effective delivery of the National Framework.

These governance arrangements will:

Inform implementation

Define roles, responsibilities, and relationships for the term of the National Framework, including identifying lead jurisdictions to coordinate the implementation of each activity.

Oversee monitoring of progress

Establish processes that track and report the implementation progress of activities, promote accountability and transparency, and enable flexible responses to emerging issues.

Oversee evaluation of activities and outcomes

Establish processes to evaluate the effectiveness and impact of the National Framework at a jurisdictional and national level.

Work with Aboriginal and Torres Strait Islander communities

Design approaches that are tailored to the needs of Aboriginal and Torres Strait Islander communities, enable Aboriginal and Torres Strait Islander leadership and local decision-making processes, and ensure the principles of Indigenous Data Sovereignty are upheld.

Priority populations

In Australia, some groups face greater challenges accessing health care, participating in research and achieving good health outcomes. This includes access to and outcomes of genomics-informed health care and research.

While Strategic Priority 4 is focused on Aboriginal and Torres Strait Islander people and communities, the consideration of priority populations, including Aboriginal and Torres Strait Islander people, is applied across this National Framework.

All activities progressed under this National Framework will apply an equity lens. While it addresses many non-medical factors that strongly influence health – known as the social determinants of health, such as income, education, employment and the environment – these factors mainly fall outside its scope. However, many activities do focus on addressing more immediate non-medical factors – like access to services as close to home as possible, health knowledge, health system design and underrepresentation in genomic datasets.

Planning and implementation of all activities will promote equity by considering the diverse needs and locations of priority populations. One-size-fits-all approaches are unlikely to work. Different groups may need different approaches to ensure their voices are heard and their needs are met – and people may belong to more than one priority group. The overlapping aspects of identity and experience can create complex challenges. Strong engagement and respectful partnerships will be essential to ensure inclusive and effective implementation.

Guiding Principles

Our Values in Action

Four guiding principles steer the planning and implementation of all the strategic priorities, outcomes and activities of this National Framework. These values underpin the integration of genomics into the Australian health system.

1. Promote equity in access and outcomes

Equitable access to and outcomes from genomics-informed health care and research will be promoted, enabled, monitored and evaluated. This includes identifying priority populations and addressing the inequities they face in ways that are meaningful to them.

2. Empower people, communities and the workforce

People, families and communities will be supported to understand, engage with and benefit from genomics-informed health care and research. This includes being empowered to make informed choices, influence decisions and shape their own health outcomes. The health and research workforce will also be supported, empowered, and held to their responsibilities to deliver high-quality care and ethically sound research.

3. Ensure care is evidence-based, trusted and culturally safe

All clinical applications of genomics and genomics-informed health care will be:

- ethically, legally and socially responsible
- culturally safe, as defined by patients and research participants
- supported by community trust and acceptance
- informed by research, evidence and lived experience
- prioritised based on their value to consumers, services and the health system
- designed to advance individual and population health.

4. Focus on outcomes

Embedding genomics into health care will ensure continuous support and treatment for people with existing conditions. It will also enable prevention, early intervention, and effective and efficient precision medicine.

Enablers of Success

Keys to Implementation

Four enablers support the successful planning and implementation of all the strategic priorities, outcomes and activities of this National Framework. They help governments and partners in progressing the National Framework and realising its vision and mission.

1. Cooperative governance and leadership

Effective governance arrangements will guide the successful implementation of this National Framework and ensure that it achieves its ultimate objective of helping all Australians access and benefit from genomics to live healthier lives.

Australian governments will achieve this by working together and in partnership with Aboriginal and Torres Strait Islander people and other key stakeholders. This includes sharing knowledge, coordinating efforts, and recognising how different parts of the Australian health system can connect and work together to support health outcomes for all Australians.

2. Sustainable resourcing

Strategic, flexible and locally-responsive resourcing is essential given the constraints on health resources across Australia. High-value services that meet local health system needs, deliver measurable benefits and support sustainable service delivery should be prioritised. Coordinated resource use – while respecting jurisdictional autonomy – can reduce duplication, promote interoperability and improve efficiency. Sustainable integration also requires workforce capability, infrastructure and transparent governance to guide ethical and equitable resource allocation.

3. Building on what works – avoid duplication, amplify impact

Australia has already made valuable progress in embedding genomics. To build on success and avoid duplication, all activities under this National Framework will consider and, wherever possible, leverage existing work.

4. Ongoing engagement and collaboration

Implementation of this National Framework will be guided by sustained engagement and collaboration with individuals, families and diverse communities, as well as public, private and community-controlled health sectors. This includes health care professionals, support staff, advocacy groups, healthcare industry, researchers, universities and regulators.

Engagement and collaboration with international entities and genomics initiatives may also support successful implementation.

Making genomics work for everyone: Closing the Gap

All Australian governments have committed to working in genuine partnership with Aboriginal and Torres Strait Islander people to reduce health inequities. Efforts to embed genomics into the health system will align with the four Priority Reforms of the ***National Agreement on Closing the Gap***. These reforms are foundational principles that guide all decisions and complement this National Framework's Guiding Principles and Enablers of Success.

Specific activities demonstrate how these principles are put into practice:

Priority Reform 1: Formal Partnerships and Shared Decision-Making

- **Activity 4A:** We will build formal partnerships and work side-by-side with Aboriginal and Torres Strait Islander people to put this plan into action.

Priority Reform 2: Building the Community-Controlled Sector

- **Activity 4F:** We will support Aboriginal and Torres Strait Islander people to participate in and lead genomic research projects.
- **Activity 4G:** We will support Aboriginal and Torres Strait Islander people to join the genomics workforce, support the community-controlled sector to use genomics, and support inclusive education-to-employment pathways.

Priority Reform 3: Transforming Government Organisations

- **Activity 2D:** We will improve health professionals' understanding of providing culturally safe genomics-informed health services.
- **Activity 4B:** We will implement guidelines to make sure health systems and research using genomics are respectful and culturally safe.

Priority Reform 4: Shared Access to Data and Information at a Regional Level

- **Activity 4A:** We will build formal partnerships to support better data collection and sharing to monitor and evaluate this National Framework.
- **Activity 4D:** We will make sure there is appropriate Aboriginal and Torres Strait Islander-led governance of their genomic data collected by health services and research, in alignment with Indigenous Data Sovereignty principles.

Making genomics culturally safe: upholding rights and equity

Aboriginal and Torres Strait Islander people have the right to feel confident and safe when accessing health care in Australia. This includes genomics-informed health care delivered through health services and research. To support this, the Aboriginal and Torres Strait Islander Advisory Group on Health Genomics developed the ***Guiding Principles: Ensuring Culturally Safe Health Genomics with Aboriginal and Torres Strait Islander Peoples*** *('Guiding Principles').* These Guiding Principles aim to improve the quality of care and health outcomes for Aboriginal and Torres Strait Islander people.

Like the Priority Reforms, these Guiding Principles have shaped the development of this National Framework. All efforts to further embed genomics into the health system will align with them. Strategic Priority 4 includes specific actions to support ongoing engagement and ethical co-design, helping guide health system transformation.

Guiding Principles: Ensuring Culturally Safe Health Genomics with Aboriginal and Torres Strait Islander Peoples (summarised):

1. Aboriginal and Torres Strait Islander Peoples' Rights

   The rights of Aboriginal and Torres Strait Islander people are applied to decision-making about health services. Self-determination, decision-making and co-design must be enabled and implemented in genomic health services.

2. Culturally Safe Genomics

   Culture and kinship are considerations in all genomic applications. Genomic health services do not compromise culture, rights, protocols and expectations of Aboriginal and Torres Strait Islander people. Research and health services should be co-designed to reflect cultural practices and priorities.

3. Health Equity

   Ensuring access, equity of outcomes and empowering Aboriginal and Torres Strait Islander leadership are critical to improve health journeys. It is recognised that health extends beyond just physical health.

4. Data Sovereignty

   Genomic data must be governed in partnership with Aboriginal and Torres Strait Islander people, using culturally appropriate structures and principles.

5. Informed Consent

   Consent must be free, prior and informed, and protect existing cultural protocols.

6. Genomics Health Workforce

   Aboriginal and Torres Strait Islander people should have the opportunity to participate in and lead the genomics workforce across settings.

Upholding the Principles of Indigenous Data Sovereignty

The Maiam nayri Wingara ***Principles of Indigenous Data Sovereignty*** affirm that Aboriginal and Torres Strait Islander people have the right to:

- Exercise control of the data ecosystem including creation, development, stewardship, analysis, dissemination and infrastructure.
- Data that are contextual and disaggregated (available and accessible at individual, community, and First Nations levels).
- Data that are relevant and empower sustainable self-determination and effective self-governance.
- Data structures that are accountable to Indigenous peoples and First Nations.
- Data that are protective and respect their individual and collective interests.

Maiam nayri Wingara define Indigenous data as 'information or knowledge, in any format or medium, which is about and may affect Indigenous peoples both collectively and individually.'

In alignment with the ***Framework for Governance of Indigenous Data*** and the ***National Aboriginal and Torres Strait Islander Health Plan 2021–2031***, this National Framework commits all Australian governments to continuously improving the governance of Indigenous data, and providing Aboriginal and Torres Strait Islander people with greater agency over how their data are governed. This includes data generated through activities under the National Framework and its monitoring and evaluation processes (see Activity 4D).

It also seeks to ensure that Indigenous Data Sovereignty principles are applied to clinical data (within current legislative requirements) and research genomic data (see Activities 3A and 4F).

Strategic Priority 1

Understanding and empowering people, families and communities

Ensuring individuals, their families and communities are central to their own health care is critical to improving outcomes. Building trust in health services, systems and research empowers people to take part in shared decision-making and strengthens care.

Key elements of building trust and empowering people include:

- ensuring sustained engagement over time
- improving public understanding of genomics
- ensuring people have the tools and information they need to make informed decisions
- addressing cultural, ethical, legal and social implications
- responding to the priorities and needs of individuals, families and communities
- understanding and addressing barriers faced by different populations through strong partnerships, targeted effort, appropriate resourcing and cultural safety.

This strategic priority focuses on supporting people, families and communities to be heard and have their needs met. Strategic Priority 2 complements this by focusing on clinicians and broader system-level transformation.

Outcomes

1.1 Empower informed decision-making and community engagement

Individuals, families and communities are:

- supported to provide voluntary and informed consent
- empowered to inform policy, service and health system co-design
- able to access their genomics-related health information and understand their rights over their data
- aware of the benefits of genomics-informed health care and research
- able to access genomics-informed health care as close to home as possible
- supported through equitable access to genomics-informed health care – especially for priority population groups.

1.2 Improve public genomics knowledge

People have equitable access to evidence-based, culturally and linguistically appropriate resources that build understanding and support informed decisions about accessing and benefitting from genomics in health care.

Activity 1A Engaging Australians to shape genomics integration

Duration Ongoing

Foundational activity

Why this matters

Genomics is changing how we understand health, disease, prevention and treatment. To make sure these changes benefit everyone fairly, we need to understand what matters most to people across Australia – especially those who face barriers in accessing and benefitting from genomics.

What we will do

Establish clear and inclusive processes – for example, citizen juries – and engage with the general public and groups that represent their views to:

- understand peoples' values, priorities, needs, expectations and concerns regarding genomics
- discuss national policy considerations, including cultural, ethical, legal, social, data, feasibility and sustainability implications
- define what equity and cultural safety looks like in the context of genomics, and provide advice on how it can be better reflected in policies, service design, clinical practice and research.

We will engage with people across Australia, reflecting the diversity of our population. This will include:

- people with genomic conditions or experience using genomic health services, and their families and carers
- communities with little or no prior exposure to genomics
- communities where distance to services limits the ability to engage in genomic health services
- groups that face challenges accessing or benefiting from genomics.

Our engagement processes will be tailored to suit different needs and preferences. We will use approaches that are culturally appropriate, accessible and relevant to people with varying levels of familiarity with genomics.

This activity will inform the integration of genomics into health care and research, and guide the prioritisation and implementation of other activities under this National Framework – including efforts to achieve equity and cultural safety.

Activity 1B Improving public education in genomics

Duration Ongoing

Why this matters

Genomics is becoming part of everyday health care, so individuals, families and communities need access to clear, trustworthy and relevant information. Public education empowers people to understand what genomics is, how it may affect the health and wellbeing of themselves and their families, and where to find support. To be effective, education must be inclusive, culturally informed and tailored to the specific needs of different communities and contexts.

Improving public understanding of genomics is essential for informed decision-making, equitable access to care, and building trust in emerging technologies.

What we will do

We will support continuous improvement of public education about genomics. This includes promoting and sharing resources in accessible formats and channels that reflect the preferences and needs of the general public and different population groups.

It will also identify, evaluate, adapt and develop resources that are:

- either national in scope or tailored to local contexts
- culturally informed and language appropriate
- designed to improve understanding of genomics and access to genomics-informed health care in clinical settings
- designed to connect people with advocacy groups and other services
- designed and developed in partnership with communities, educators, health professionals and researchers to ensure they are trusted, relevant and impactful.

Activity 1C Strengthening consent for genomic testing

Duration Time-limited

Why this matters

Informed consent is a cornerstone of ethical, person- and family-centred care. Australia currently has a nationally consistent model of consent which supports health systems and services to seek informed consent that is well considered, meaningful, inclusive and fit-for-purpose across diverse settings.

What we will do

We will review the ***National Model of Consent for Clinical Genomic Testing*** to ensure it is still relevant to the changing environment of genomic medicine. This includes reviewing the model to ensure it still:

- reflects community values, priorities, needs and expectations, including those of diverse populations
- supports culturally safe, responsive, free, prior and informed consent
- enables patients and clinicians to navigate choosing not to consent and to remove prior consent
- meets the needs of clinicians and health services.

Case study

Supporting inclusive consent for genomic testing

Many individuals and communities face unique barriers to accessing genomics-informed health care and research. Providing respectful and accessible care is essential to improving equity and supporting informed decision-making.

The ***Communicating with People who have Intellectual Disability: The GeneEQUAL Educational Toolkit*** initiative was funded by NSW Health and developed in partnership with the University of New South Wales ***GeneEQUAL*** inclusive research team. This publicly-available toolkit supports clinicians to provide inclusive genomic health care for people with intellectual disability. Co-designed with people with intellectual disability and health care providers, the toolkit includes educational resources including videos and Easy Read booklets to make conversations around accessing and consenting to genomic services more inclusive and empowering.

It is essential to build trust by listening to communities and providing information in ways that reflect their needs, values and preferences. This approach ensures agency for individuals and families, and improves access and outcomes.

This National Framework commits to leveraging existing resources, like the GeneEQUAL Toolkit, and developing new resources to support patients across Australia. We will build on existing work and respectfully amplify community-led efforts to ensure all Australians can benefit from genomics-informed health care and research.

Activity 1D Supporting consistent genomic test result reporting

Duration Time-limited

Why this matters	Consistent reporting of genomic test results is essential for high-quality care, data integrity and system-wide coordination. Variations in how laboratories and health services report tests can lead to different patient experiences and outcomes from their genomic testing.
What we will do	We will consult with key stakeholders to identify any potential issues relating to consistency in genomic test reporting. This includes engaging with: • public and private pathology laboratories • health services • patients, carers, community and patient advocacy groups • peak bodies. If required, we will develop solutions such as exploring national testing infrastructure and consumer-friendly reports.

Strategic Priority 2

Building a sustainable, dynamic health system

Continuing to make genomics part of everyday health care requires strong, sustainable foundations. This includes a skilled and supported workforce, reliable infrastructure, and health and research systems that are innovative, inclusive, culturally safe and adaptable to change. As the use of genomics continues to increase across Australia, health systems must focus on ensuring services are clinically effective and safe, fiscally responsible, and sustainable over the long term.

A learning health system approach is essential, where data, experience and evidence are continuously used to improve practice, inform policy, and respond to emerging technologies and evolving community needs.

Key areas of focus include:

- Building a clearer understanding of how genomics is already used across health systems, and identifying where collaboration across governments and sectors is most needed to support its future.
- Exploring opportunities to shift models of care to more appropriate settings to improve accessibility, efficiency and equity.
- Supporting a skilled, diverse, and capable multidisciplinary workforce across health and research sectors, including both the specialised health genomics workforce and the broader health workforce.
- Ensuring reliable, robust and efficiently-utilised infrastructure to support the delivery of genomics into care in a way that enables systems to scale, adapt and deliver value across settings.
- Continuing to embed cultural safety, and promote equity, inclusion and responsiveness.

We will support the research sector to generate new knowledge in a way that supports its translation into clinical practice. Health systems will be supported to adopt genomics solutions based on evidence, underpinned by consistent and robust decision-making processes, clear regulations and national standards.

Infrastructure and service access will be improved so that people across Australia can benefit from genomics-informed care regardless of where they live.

Outcomes

2.1 Strengthen specialised workforce capacity

Australia has an adequately-sized, capable, sustainable and culturally-competent, specialised genomics workforce, including clinicians, laboratory professionals and other technical experts.

2.2 Support the broader health workforce

The broader health workforce is knowledgeable, skilled and confident in using genomics within their scope of practice while ensuring ethical, safe and culturally appropriate care.

2.3 Optimise system integration and investment to maximise value and sustainability

Australia's genomics ecosystem is supported by:

- Cohesive and robust decision-making frameworks that enable consistent, transparent and sustainable investment in safe and quality genomics health care.
- Fit-for-purpose funding models and pathways that support sustainable service delivery including diagnostic care, prevention and early intervention.
- Targeted, coordinated and sustainable implementation of high-value, genomics-informed health care, research and innovation.
- Strong collaboration with domestic and international stakeholders.

2.4 Foster inclusive research and innovation to support a resilient and sustainable health system

Genomics research and innovation efforts contribute to a more inclusive, responsive and sustainable health system, with opportunities for learning and improvement.

Activity 2A Building a national picture of genomics in health care

Duration Time-limited

Foundational activity

Why this matters

To optimally use genomics in Australian healthcare systems, we need a clear picture of how health services are currently functioning across Australia in regard to clinical genomics. This includes understanding where testing is available and how genomics is being used in diagnosis, treatment, prevention and public health. It means knowing whether we have the right workforce and infrastructure to support service delivery.

While much of this information already exists, a national stocktake has not been undertaken recently. Establishing a process to take stock of the current state of how services are delivered across the country would help identify gaps in services and investment – especially for populations who may be missing out – and support more informed, equitable decisions about how genomics is planned and delivered.

What we will do

We will implement a national process, leveraging existing data sources, to undertake a stocktake of:

- the availability and delivery of genomic testing and services
- workforce and infrastructure capacity, capability and optimisation.

This process will:

- bring together information from across Australia and diverse sources
- identify gaps in services, systems and support
- highlight opportunities for system enhancements – for example, opportunities for coordinated testing across jurisdictions and associated data infrastructure
- support nationally consistent models and approaches that can be adapted across jurisdictions to promote equity and embed cultural safety
- guide strategic collaboration across sectors and levels of government
- inform future activities under this National Framework, including workforce development (see Activities 2E and 4G).

This activity may be repeated as part of ongoing monitoring and evaluation.

Activity 2B Understanding patient journeys in genomics-informed health care

Duration Time-limited

Foundational activity

Why this matters

People access genomics-informed health care in different ways, depending on their individual needs and the health services they engage with. Understanding these patient journeys helps us identify opportunities to improve how genomics is planned and delivered across the healthcare industry.

What we will do

We will develop a process to map how people access and experience genomics-informed health care across Australia. This includes:

- recognising that patient journeys vary depending on the reason for accessing care and the health service or system involved
- integrating experiences from community-controlled health services and other diverse care settings
- considering the needs of people with complex, rare and ultra-rare diseases.

This process may:

- identify opportunities to enhance integration of genomics into health care
- inform opportunities to enhance how health systems connect patients with the right care and support services at the right time
- inform future planning and activities under this National Framework.

Activity 2C Strengthening data collection and metrics for genomics evaluation

Duration Time-limited

Foundational activity

Why this matters

To understand the impact of genomics on health care, we need consistent, high-quality data and metrics. Data collection supports decision-making, and ensures policies and programs are responsive to community needs.

Importantly, consistent data indicators provide a structured way to assess the effectiveness, efficiency and equity of genomics initiatives. They enable transparency, accountability and continuous improvement by identifying what works, where gaps exist, and how resources can be better allocated.

What we will do

We will map current data collection activities across Australian governments. We will also work across Australian governments to enhance (if required) existing national data sets to incorporate genomic indicators. This will include:

- identifying whether there may be indicators to measure the impact of genomics on health outcomes, equity, access, workforce and system performance
- considering common definitions and data sources to ensure effective comparisons across jurisdictions
- assessing whether this data could be used to inform the development of an outcomes evaluation approach, and guide future policy and investment decisions
- ensuring the principles of Indigenous Data Sovereignty are embedded in line with Activity 4D.

This activity will help build a strong evidence base for genomics integration and ensure that introduced initiatives are measured in meaningful and transparent ways.

Activity 2D Strengthening genomics education for the broader health workforce

Duration Ongoing

Why this matters

To use genomics effectively across health care provision, health professionals need the right knowledge, skills, tools and approaches. Education must be practical, timely, culturally safe, and tailored to different roles across the health system. This helps ensure that genomics is used appropriately across health systems and fits within health professionals' scope of practice. It allows them to deliver person- and family-centred care at the optimal times of a patient's health journey in order to improve health care and health outcomes.

What we will do

We will support education and training for the broader health workforce by partnering with professional bodies and the higher education sector to:

- review current and future genomics knowledge needs across professions
- explore how genomics is taught and how it can be better integrated into:
  - university and other tertiary education courses
  - clinical guidelines
  - continuing professional development (CPD) programs
  - capability frameworks and professional standards.
- identify, adapt and/or develop practical educational materials and point-of-care guidance to meet immediate clinical needs
- share resources widely in ways that suit different professional groups
- develop a comprehensive strategy, working closely with the tertiary education sector, medical colleges, and relevant peak bodies, to support the existing and future broader health workforce to confidently and appropriately use genomics.

This includes equipping health professionals with the understanding needed to provide respectful, responsive and culturally safe care. It complements Activity 4G, which focuses on building capacity within the Aboriginal and Torres Strait Islander health workforce.

Case study

Building capability in the broader health workforce

Mainstreaming genomics in health care means supporting all health professionals to feel confident and capable in using genomics to care for patients and families. This National Framework recognises the need to build skills across a wide range of disciplines – not just within genetics services.

The Genomics Immersion Program, delivered in partnership between Genetic Health Queensland and Queensland Health's Office of Research and Innovation, offers funded placements for trainee clinicians from the broader health workforce. Participants work and learn within the statewide genetics service, gaining cross-disciplinary experience to take back to their home specialties. This helps build genomic capability across the wider health system.

The Centre for Genetics Education (CGE), a division of the NSW Health Education and Training Institute, empowers health care professionals to deliver improved outcomes in health care and wellbeing for individuals, families and the community, by providing credible genetics and genomics resources and information, in collaboration with their clinical and research partner organisations. The CGE maintains an extensive directory of tools and learning materials. This includes fact sheets, videos, webinars and e-learning modules that support clinicians in developing knowledge and skills required for the delivery of genomic health care, such as obtaining consent for genomic testing, navigating the testing process, and effectively communicating genomic concepts with patients. The CGE also hosts the Genomics in Focus webinar series, which provides practical guidance and insights for clinicians incorporating genomics into practice across specialty clinical areas.

These state and territory initiatives offer strong models for national adaptation. They show how targeted training and inclusive education can build a more informed, multidisciplinary workforce and improve access to genomics for all Australians.

Activity 2E Building capacity and capability in the specialised genomic workforce

Duration Ongoing

Why this matters

Australia's specialised genomic workforce – including clinical geneticists, genetic pathologists, genetic counsellors, bioinformaticians and medical laboratory scientists – is essential to delivering safe, effective and equitable genomics-informed care. As demand grows, we will support growing this workforce through targeted education, training, career development and workforce retention initiatives to ensure they meet clinical, research and community needs.

What we will do

We will partner with professional bodies to explore options to strengthen capacity and capability across the specialised genomic workforce. This may include:

- reviewing current and future workforce needs, including emerging roles, scope of practice and skillsets
- reviewing career and training pathways and workforce models
- developing and sharing targeted, practical resources and tools to support clinical, laboratory and research practice
- promoting culturally safe care and ethical practice, including through partnerships with Aboriginal and Torres Strait Islander health organisations (see also Activity 4G).

This activity will help ensure the specialised genomic workforce is sufficiently sized and is equipped to lead innovation, support clinical integration, and deliver person- and family-centred care across Australia.

Activity 2F Supporting system integration and collaboration in genomics

Duration Ongoing

Why this matters

Integrating genomics into routine health care requires robust evidence and effective assessment mechanisms. Health technology assessment (HTA), real-world evidence and horizon scanning are key tools for ensuring genomics is adopted in ways that are ethical, safe, effective and aligned with community needs. This work will leverage existing processes to assess ongoing efforts and new technologies, including genomics, to further enhance technology assessment in Australia.

What we will do

We will foster cohesive and robust decision-making by:

- supporting collaboration between governments, researchers, industry, community and health services, including community-controlled organisations
- helping to ensure regulatory, HTA, and health system requirements are considered early in research and product development, and integrated into planning and data collection
- leveraging work currently underway in establishing national horizon scanning capabilities
- building on existing efforts by governments and non-government organisations to ensure genomic and phenotypic databases reflect Australia's genetic diversity to support inclusive research and improve clinical relevance
- promoting the consideration of genomics in the current national HTA reform.

We will continue to support integrated and coordinated care systems by:

- supporting processes to share real-world evidence and other evidence for new models of genomics-informed health care to enable their potential adoption in other state and territory health systems
- facilitating knowledge exchange between health systems and community-controlled organisations to support integrated care and culturally relevant models of care.

This activity will continue to support the integration of genomics into the health system in ways that are transparent, evidence-informed, equitable and responsive to both system and community priorities.

Case study

Partnering with communities to broaden the impact of genomic medicine

Genomic research and resources have historically focused on people of European ancestry. This means many Australian communities are under-represented in genomics research and may miss out on the benefits of genomics-informed health care.

The ***OurDNA*** project, led by the Centre for Population Genomics (CPG) and funded through the Medical Research Future Fund (MRFF), is working to change this. OurDNA aims to build better, more representative genomic databases and resources, helping to reduce inequities in care and to better serve Australia's multicultural communities.

So far, more than 2,500 people have taken part. OurDNA is partnering with communities in Victoria and New South Wales whose ancestral backgrounds include the Pacific, South-East Asia, the Middle East and East Africa. By increasing representation in genomic data, the project supports more accurate research and better health outcomes for all Australians.

This National Framework commits us to build on this work, to ensure genomic health care and research reflect the full diversity of our population.

Activity 2G Building ethical partnerships with non-government stakeholders

Duration Ongoing

Why this matters

Partnerships with industry, academia and other non-government stakeholders are essential to advancing genomics. These partnerships must be ethical, transparent and focused on public benefit – especially for priority and underserved populations.

What we will do

We will develop ethical models and establish partnerships that:

- support engagement and co-investment with non-government stakeholders, including industry and academia
- prioritise transparency, public benefit and alignment with community needs
- ensure that partnership approaches reflect the priorities and values of priority populations
- promote inclusive and culturally safe collaboration, including with community-controlled health organisations (see also Activity 4E)
- draw on lessons from international examples of effective, ethical public-private partnerships.

This activity will help ensure that genomics partnerships contribute to equitable outcomes and strengthen Australia's genomics ecosystem across jurisdictions.

Activity 2H Prioritising genomic and related research for public benefit

Duration Ongoing

Why this matters

Targeted support for genomic research helps deliver better health outcomes, especially when research is inclusive, ethical and aligned with health system priorities. Prioritising research areas with high potential for clinical impact supports translation into real-world benefits for all Australians.

What we will do

We will support the prioritisation of genomic and related research by:

- providing advice to and working with research-funding bodies to target areas with strong potential for clinical impact and public benefit
- identifying opportunities to invest in research infrastructure
- facilitating collaboration across sectors to accelerate translation into clinical care and support a learning healthcare system.

This prioritisation will reflect the diverse needs and priorities of different communities and population groups (see also Activity 4F).

Activity 2I Strengthening national genomics guidelines

Duration Ongoing

Why this matters

Clear, up-to-date guidelines help deliver safe, high-quality and culturally safe genomics-informed care. As genomics evolves, guidelines must be regularly reviewed and improved to reflect new evidence, community expectations and clinical needs.

What we will do

We will partner with relevant organisations to support the continuous improvement of national best practice guidelines that include or focus on genomics. This includes:

- ensuring guidelines are current, evidence-based and support culturally safe care across Australia
- identifying areas where new or clearer national guidance is needed – for example, managing secondary or unexpected findings from genomic tests
- ensuring national guidance is responsive to changes in relevant legislation
- supporting consistent and informed use of genomics across the health system.

This activity will help ensure genomics is used safely and effectively, and that national guidance reflects the needs of diverse communities and clinical settings.

Strategic Priority 3

Managing genomic information responsibly and securely

Responsible management of genomic information and biological specimens is essential to improve health outcomes and support precision medicine. This includes secure and well-governed collection, storage, use and sharing.

Genomic information is sensitive and complex. Misuse can have lasting impacts across generations. While sharing and further integrating genomic information into health systems may improve care and accelerate research, all efforts must reflect public values and consider cultural, ethical, legal and social implications. Continued investment in and development of infrastructure, cybersecurity, workforce capability and governance arrangements are required to balance benefit and risk.

For Aboriginal and Torres Strait Islander people, genomic information must be managed in ways that respect cultural protocols and support self-determination. All efforts must consider and appropriately align with:

- *National Agreement on Closing the Gap Priority Reforms*
- *Maiam nayri Wingara Principles of Indigenous Data Sovereignty*
- *NHMRC Ethical guidelines for research with Aboriginal and Torres Strait Islander peoples*
- *AIATSIS Code of Ethics for Aboriginal and Torres Strait Islander Research*
- *United Nations Declaration on the Rights of Indigenous Peoples.*

Outcomes

3.1 Enable safe, secure and trusted data collection, sharing, storage, use and management

Individuals, families and communities are:

- confident that genomic and related health information is protected and is stored securely in line with their rights and preferences, and in culturally safe ways
- confident that genomic information is used effectively, ethically and has appropriate governance mechanisms in place
- engaged in co-designing national and culturally appropriate stewardship models.

To increase genomics knowledge and application in Australia, genomic information sharing – both domestically and internationally – is facilitated in line with relevant legislation, policies and evolving community preferences.

Activity 3A Strengthening genomic information management in Australia

Duration Time-limited

Foundational activity

Why this matters

Managing genomic information responsibly is essential for safe, ethical and effective health care and research. We need a clear picture of how genomic data and biological specimens are currently handled across Australia. Appropriate management of genomic information and specimens supports precision medicine. It enables clinicians and researchers to use data for individual care and to identify trends across populations.

What we will do

We will leverage and expand work underway to understand current genomic information management practices and infrastructure across clinical and research settings. This will assess the capability and capacity of laboratories, clinical services and linked health systems to:

- support appropriate recording and management of patient consent (including withdrawal of consent) for clinical testing and use for research
- collect, store and use biological specimens and genomic data in ways that align with FAIR, CARE, and Indigenous Data Sovereignty principles (see also Activity 4D)
- meet legal, regulatory and accreditation requirements that underpin ethical and high-quality practice in health care and research.

This activity will inform policy development and system improvements to ensure that genomic information is managed securely, ethically and in line with community expectations. Findings from the analysis will support the development of a coordinated approach to genomic information and specimen management. This approach is expected to:

- support national consistency while respecting local control
- apply principles- and standards-based methods to ensure interoperability, privacy and security
- align with ethical, legal, social, cultural and policy expectations
- integrate with broader digital health reforms and infrastructure
- build on existing efforts, including the progress made under the previous framework, and initiatives led by governments and non-government stakeholders to strengthen data governance and management.

This activity may be repeated as part of ongoing monitoring and evaluation.

Activity 3B Embedding genomics in broader digital and AI governance

Duration Ongoing

Why this matters

As genomics becomes more integrated into digital health systems, it is essential that genomic data is considered in broader national discussions about cyber security, digital infrastructure and artificial intelligence (AI). Aligning genomics with best practices and safeguards in these areas will help protect sensitive data, build public trust, and ensure the ethical and secure use of emerging technologies.

What we will do

We will work with relevant agencies from all Australian governments and sector partners to:

- ensure genomic data is considered in the development and review of national cyber security frameworks, digital health strategies and AI governance
- promote alignment with best practice standards for data protection, ethical AI use and digital system resilience
- support the inclusion of genomics in cross-sector discussions on risk, regulation and innovation.

This activity will help ensure genomic information is managed in ways that are secure, future-focused and consistent with broader digital transformation efforts.

Activity 3C Evaluating tools for variant interpretation and genomic analysis

Duration Time-limited

Why this matters

Accurate interpretation of genomic variants is essential for safe and effective clinical care. Digital platforms and tools – such as virtual gene panels and reference genomes – play a key role in this process. Evaluating these tools helps ensure consistency, reliability and alignment with best practice across Australia.

What we will do

We will assess existing approaches and digital platforms used in Australia and internationally to support the:

- identification and resolution of discrepancies in variant interpretation
- use of virtual gene panels and reference genomes in research and clinical settings.

This evaluation will inform future application of approaches and tools that support improved clinical decision-making, data sharing, and national consistency for variant interpretation and genomic analysis. It will also support the integration of genomics into routine care and align with community priorities (see also Activity 4E).

Strategic Priority 4

Aboriginal and Torres Strait Islander-led genomics

Governments, researchers and clinicians must work in partnership with Aboriginal and Torres Strait Islander people to build trust, ensure cultural safety and to improve equity of access and outcomes.

In alignment with the National Agreement on Closing the Gap Priority Reform One, efforts to integrate genomics into Aboriginal and Torres Strait Islander health care must be led by or progressed in genuine partnership with Aboriginal and Torres Strait Islander people. This is important so that efforts reflect community priorities, protocols and pace, and deliver meaningful benefits.

Appropriate governance, and the respectful and responsible use of genomic data that is about and may affect Aboriginal and Torres Strait Islander people, is critical to support alignment with Indigenous Data Sovereignty principles and the National Agreement on Closing the Gap Priority Reform Four. This applies across the data lifecycle.

Implementation of all activities under this priority will be *undertaken in partnership* with Aboriginal and Torres Strait Islander stakeholders, networks and established entities. Outcomes and activities may evolve to reflect community-led directions.

Outcomes

4.1 Build partnerships, engagement and trust

Aboriginal and Torres Strait Islander people:

- Have improved access to genomics-informed services and can engage in research when they choose to do so.
- Experience improved health outcomes through genomics-informed care and research.
- Have greater trust in genomics and stronger agency in decision-making.
- Inform the use of Aboriginal and Torres Strait Islander genomic knowledge in health care and research, to ensure that it benefits them and reflects their priorities.
- Lead and shape genomics-related health services, research and public health initiatives for Aboriginal and Torres Strait Islander people.

4.2 Improve access, outcomes and cultural safety

Health systems and research:

- Provide accurate, culturally appropriate information to support equity.
- Eliminate systemic discrimination through structural change.
- Embed cultural safety standards and training.
- Co-design research that reflects community priorities and empowers participants.
- Support the growth of an Aboriginal and Torres Strait Islander workforce in genomics-related health care and research.
- Support access to genomic services and research as close to home as possible.

Activity 4A Establishing culturally appropriate governance and engagement

Duration Ongoing

Foundational activity

Why this matters

Culturally appropriate governance and ongoing engagement are essential to ensure that implementation is led by, and delivers meaningful benefits for, Aboriginal and Torres Strait Islander communities. Co-designed approaches support leadership, guide decision-making, build trust and ensure activities reflect community priorities and values.

What we will do

We will establish governance and engagement arrangements in partnership with Aboriginal and Torres Strait Islander people. These arrangements will:

- give effect to our commitment to work in partnership with key Aboriginal and Torres Strait Islander organisations
- support Aboriginal and Torres Strait Islander leadership and decision-making
- ensure that the broader perspectives of Aboriginal and Torres Strait Islander people guide the design and delivery of activities throughout this National Framework, and inform broader policy, health system planning, service delivery and evaluation
- support mutual understanding of values, priorities, needs and expectations related to genomics
- enable information sharing, build networks and strengthen trust
- provide space to discuss national issues including cultural, ethical, legal, social and funding concerns.

This work will be grounded in the principles of self-determination, cultural safety, and Indigenous Data Sovereignty, and will be progressed in partnership with established entities, networks and community leaders.

Activity 4B Embedding equity and cultural safety in health systems and research

Duration Time-limited

Foundational activity

Why this matters

The ***Guiding Principles: Ensuring Culturally Safe Health Genomics with Aboriginal and Torres Strait Islander Peoples Guiding Principles*** ('Guiding Principles') provide a foundation for culturally safe, respectful and community-led genomics. Embedding these Guiding Principles into health systems, service delivery and research will help ensure that Aboriginal and Torres Strait Islander people benefit from genomics in ways that reflect their values, priorities and leadership.

What we will do

We will embed culturally safe and equitable genomics in health care and research through activities under this National Framework. Aboriginal and Torres Strait Islander people will be supported to identify priorities, lead and partner in decision-making, and define outcomes and benefits that matter to their communities.

Many activities under this National Framework are intended to support the implementation of the Guiding Principles. This includes strengthening governance, supporting Aboriginal and Torres Strait Islander leadership, and promoting culturally safe practice across the genomics landscape.

In addition, we will develop a dedicated implementation plan to embed the Guiding Principles across health and research settings. This will ensure any additional steps required to fully integrate the Guiding Principles are considered and progressed in a deliberate and inclusive way. This includes:

- identifying practical steps to apply the Guiding Principles in clinical, research and policy contexts
- supporting integration into existing and new policy documents, standards and frameworks
- ensuring all implementation approaches are co-designed with Aboriginal and Torres Strait Islander people and reflect their leadership, values and priorities.

This work will support consistent, culturally safe practice across the genomics landscape and strengthen accountability to Aboriginal and Torres Strait Islander communities.

Activity 4C Strengthening genomics education for Aboriginal and Torres Strait Islander communities

Duration Ongoing

Foundational activity

Why this matters

Clear, culturally informed and language-appropriate education supports Aboriginal and Torres Strait Islander people to understand and engage with genomics-informed health care and research. Tailored resources help individuals and communities make informed decisions and access relevant services.

What we will do

We will establish a national process to support continuous improvement in genomics education for Aboriginal and Torres Strait Islander communities.

This includes identifying, evaluating, adapting and developing resources that are:

- culturally informed and language appropriate
- tailored to community priorities and health contexts
- designed to improve the understanding of genomics, support access to genomics-informed health care, and connect people with relevant services and supports
- promoted and shared widely and accessibly through trusted channels and partnerships.

Educational materials and how they are shared will be guided by community input and informed by findings from Activity 1A, Activity 4A, and other stakeholder engagement.

Case Study

Building on existing resources to support genomics education

The work that communities and organisations have already led to develop culturally informed and language-appropriate educational resources on genomics for Aboriginal and Torres Strait Islander people will not be overlooked in progressing this National Framework. We will build on proven community-led and co-designed approaches, not duplicate them.

One example is ***Talking About Our Genes and Our Health***, a series of patient resources developed by the National Centre for Indigenous Genomics (NCIG) at the Australian National University. These resources were co-designed with community organisations to meet a critical gap in culturally and linguistically appropriate information.

The resources use animations, interactive maps and visual storytelling to reflect community voices, values and knowledge.

These empower Aboriginal and Torres Strait Islander people to make informed decisions about accessing genomics-informed health care.

Listening to people and providing information in ways that reflect their needs, values and preferences – not just what governments, clinicians or researchers think is best – is essential to building trust, ensuring cultural safety, and meaningfully improving access and outcomes.

This National Framework commits governments to working in partnership with Aboriginal and Torres Strait Islander people to develop and share resources like these. We will build on existing work and respectfully amplify community-led initiatives to improve equity in genomics-informed health care and research.

Activity 4D Embedding principles of Indigenous Data Sovereignty in genomics

Duration Ongoing

Foundational activity

Why this matters

Embedding appropriate governance of Indigenous data across health care and research is essential to support Aboriginal and Torres Strait Islander people's right to self-determination and to build trust.

What we will do

We will partner with Aboriginal and Torres Strait Islander people to further embed Indigenous Data Sovereignty principles across all genomic activities. This includes:

- establishing culturally appropriate governance arrangements such as routine practice in health services and research
- co-developing processes to guide the management of biological specimens and genomic information
- supporting individuals and communities to regain and maintain sovereignty over their data by implementing Aboriginal and Torres Strait Islander-led stewardship models for Indigenous Data Sovereignty and Indigenous Data Governance, and by supporting work already underway to develop relevant processes and procedures
- progressing efforts at paces determined by Aboriginal and Torres Strait Islander communities.

In alignment with the ***National Aboriginal and Torres Strait Islander Health Plan 2021–2031***, these arrangements will be collaboratively designed and embedded across research and policy settings, and, as reasonably practical within legislative obligations, across clinical settings. This approach will ensure that Aboriginal and Torres Strait Islander genomic data is managed in ways that reflect community values, priorities and protocols.

Activity 4E Identifying and sharing best practice models

Duration Ongoing

Why this matters

Best practice models that reflect Aboriginal and Torres Strait Islander health, research and community priorities can increase leadership, participation and engagement in genomics. Identifying and sharing these models helps reduce barriers and supports culturally safe, community-led approaches to genomics-informed care and research.

What we will do

We will review and identify best practice models that could be piloted and adapted to:

- increase Aboriginal and Torres Strait Islander leadership and participation in genomics
- reduce barriers to access and engagement
- reflect community priorities and support culturally safe care and research.

We will also:

- explore how real-world evidence from these models can inform broader health system improvements, including in other cultural and service contexts
- support knowledge sharing between health systems and Aboriginal and Torres Strait Islander Community-Controlled Health Organisations (ATSICCHOs) (see Activity 2F)
- use insights from this work to inform the integration of pilot activities into clinical practice.

Activity 4F Supporting community-led and culturally safe genomics research

Duration Ongoing

Why this matters

Research that reflects the values, priorities and lived experiences of Aboriginal and Torres Strait Islander people is essential to ensure genomics-informed care is evidence-based, culturally safe and meaningful. Supporting communities to shape the research agenda helps to address current gaps in knowledge, and strengthens trust and engagement.

What we will do

We will develop culturally safe strategies to support Aboriginal and Torres Strait Islander people and communities to lead and participate in research that informs Australian governments of their genomics research priorities. This includes:

- enabling leadership, priority-setting, partnership and co-design of study methodologies
- ensuring respect for, preservation and protection of, Aboriginal and Torres Strait Islander cultural and intellectual property
- supporting communities to:
  - » define outcomes and benefits that matter to them
  - » identify gaps and inform research directions
  - » advise as to how research can best reflect community-defined health priorities and deliver meaningful benefit
  - » shape broader research prioritisation efforts (see Activity 2H).

This activity aligns with the ***National Aboriginal and Torres Strait Islander Health Plan 2021–2031*** and will be progressed through co-design and partnership. It will help ensure research is responsive, inclusive, culturally safe and aligned with community expectations. It will inform broader research planning, data collection and analysis efforts outlined in Activity 2F.

Case Study

Genomics our way – supporting a culturally responsive workforce

Building a culturally safe and inclusive genomics research environment starts with listening to Aboriginal and Torres Strait Islander communities and supporting their leadership. The ***Genomics Our Way*** online course is one example of how this can be achieved.

Developed by the Australian Alliance for Indigenous Genomics (ALIGN), with support from the OCHRe network, the University of Adelaide, the Kids Research Institute Australia, and the Theo Murphy Initiative at the Australian Academy of Science, Genomics Our Way is a free, educational resource designed to grow a culturally responsive workforce. It supports researchers and professionals working in precision medicine, public health, environmental studies and archaeology to better understand and meet the needs of Aboriginal and Torres Strait Islander communities.

The course emphasises Indigenous Data Sovereignty, Indigenous governance, and two-way learning between researchers and communities. It aims to address underrepresentation in genomic research and promote equitable outcomes in health and environmental studies.

This initiative reflects the goals of Activity 4F by supporting community-led research, strengthening cultural safety, and ensuring Aboriginal and Torres Strait Islander people can shape the future of genomics in Australia.

Activity 4G Strengthening the Aboriginal and Torres Strait Islander health workforce

Why this matters

A strong and representative workforce is essential to delivering genomics-informed health care and research that meets the needs of Aboriginal and Torres Strait Islander communities. Supporting workforce development within Aboriginal and Torres Strait Islander Community-Controlled Health Organisations (ATSICCHOs) and increasing representation across the broader health system will help build capability, improve access, and ensure genomics is integrated in culturally relevant ways.

What we will do

We will develop and support strategies to strengthen the ATSICCHO workforce and increase Aboriginal and Torres Strait Islander representation across both specialised genomics roles and the broader health workforce. This includes:

- defining current and future workforce needs
- building capacity to deliver genomics-informed care and research within communities
- developing culturally relevant resources, such as case studies, that highlight the practical value and impact of genomics.

This activity aligns with the ***National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031***, and complements:

- Activity 2A which identifies gaps in the health genomics landscape
- Activity 2D which addresses education and training needs across the broader health workforce.

Activity 4H Supporting representation in genomic and phenotypic databases

Duration Ongoing

Why this matters

Genomic and phenotypic databases must reflect the diversity of the Australian population to ensure equitable, evidence-based care and research. For Aboriginal and Torres Strait Islander people this means developing culturally informed strategies that build on existing research and efforts and are guided by community priorities and leadership.

What we will do

We will support the development of strategies to ensure that genomic and phenotypic databases reflect the diversity of Aboriginal and Torres Strait Islander populations. This includes:

- building on existing research and initiatives
- working in partnership with communities to guide approaches that are culturally informed and respectful
- informing broader efforts to improve representation in national databases (see Activity 2F).

This activity will help ensure that genomics-informed health care and research are inclusive, accurate and responsive to the needs of all Australians.

Appendix 1: Glossary

Abbreviations and acronyms

Abbreviations and acronyms	
ACSQHC	Australian Commission on Safety and Quality in Health Care
ADHA	Australian Digital Health Agency
AHMAC	Australian Health Ministers' Advisory Council
AI	Artificial Intelligence
AIATSIS	Australian Institute of Aboriginal and Torres Strait Islander Studies
ALIGN	Australian Alliance for Indigenous Genomics
APS	Australian Public Service
ATSICCHO	Aboriginal and Torres Strait Islander Community-Controlled Health Organisation
Australian CDC	Australian Centre for Disease Control
Cancer Control Framework	National Framework for Genomics in Cancer Control
CAPS Committee	Cancer and Population Screening Committee
CARE	Principles that guide the collection, management and use of data relating to First Nations people. These principles emphasise: • Collective benefit – data should enable First Nations people to derive benefit. • Authority to control – First Nations people should be empowered to assert their rights to their data. • Responsibility – those working with the data must be transparent about how it supports self-determination and collective benefit. • Ethics – data must prioritise the rights, interests and wellbeing of First Nations people.
CEIH	Commission on Excellence and Innovation in Health (SA)
COVID-19	Coronavirus disease 2019
CPD	Continuing professional development
CPG	Centre for Population Genomics
DNA	Deoxyribonucleic acid
FAIR	Principles that guide the collection, management and use of data. These principles emphasise: • Findability – data should be easy to locate for both people and computers. • Accessible – once found, data should be available through clear and standardised access protocols. • Interoperability – data should be compatible with other datasets and systems. • Reusable – data should be well-described and structured to support future use.
GHFM	Genomic Health Futures Mission

Abbreviations and acronyms

GMO	Genetically modified organism
HCEF	Health Chief Executives Forum
HMM	Health Ministers' Meeting
HMRO	Health and Medical Research Office
HST	High cost, highly specialised therapy
HTA	Health Technology Assessment
HTGC	Health Technology and Genomics Collaboration
IHACPA	Independent Health and Aged Care Pricing Authority
Microbial Framework	National Microbial Genomics Framework for Public Health 2025–2027
MRFF	Medical Research Future Fund
MSAC	Medical Services Advisory Committee
NACCHO	National Aboriginal Community Controlled Health Organisation
National Framework	National Health Genomics Policy Framework and Implementation Plan 2026–2030 (this document)
NBS	Newborn bloodspot screening
NCIG	National Centre for Indigenous Genomics
NEC	National efficient cost
NEP	National efficient price
NGO	Non-government organisation
NHMRC	National Health and Medical Research Council
NHRA	National Health Reform Agreement
PBAC	Pharmaceutical Benefits Advisory Committee
PBS	Pharmaceutical Benefits Scheme
PHN	Primary Health Networks
Previous framework	National Health Genomics Policy Framework 2018–2021
PRG	National Health Genomics Policy Framework Project Reference Group
SACCaN	South Australian Comprehensive Cancer Network
TGA	Therapeutic Goods Administration
WHO	World Health Organization

Key technical and defined terms

Technical term	Definition
Biological specimen	A sample collected from a living or once living thing to be analysed as a part of health care or research. In human genomics, common specimens include blood, saliva, cheek swabs (buccal swab) and tissue (for example, a biopsy of a tumour).
Broader health workforce	Health care professionals and support staff (for example, medical doctors, specialists, nurses, midwives, allied health professionals, Aboriginal and Torres Strait Islander Health Workers, pharmacists) who are not formally qualified in human genetics, genomics or related disciplines (that is, the 'specialised health genomics workforce').
Carrier	A person who has a recessive inheritable genetic variant associated with a health condition, but who is usually not affected by that condition. They can pass the genetic variant to their children.
Cell and gene therapies	Advanced treatments that work at the cellular or genetic level. They may add, remove or modify cells or genetic material to treat or prevent a condition.
Clinical genetics	A field of speciality practice in medicine focused on the assessment, management and treatment of genetic conditions. Clinical geneticists typically interact directly with patients, request genomic testing, and interpret results.
Co-design	A way of people with different expertise, especially those with lived experience, working collaboratively as equal partners to design and develop products, services and policies. In health policy, it means sharing power and decision-making to create better outcomes.
Cultural Safety	In health care and research, cultural safety refers to practices, environments and systems in which patients and participants feel safe, respected and free from discrimination and racism. It requires all professionals, support staff, and those designing policy, health systems and research to recognise and respond to power imbalances, and to reflect on their knowledge, skills, behaviours, cultural identities, attitudes and biases – including how these may be embedded in processes, systems and structures. Only the patient or participant can determine whether a service, research project or health system is culturally safe based on the care they receive, their ability to access services, and whether they feel safe to raise concerns.
Epigenomics	The study of how external factors (such as diet, stress, lifestyle and environmental factors) can affect how our genes work. These effects do not change gene sequences, but rather the levels at which genes are expressed and how they are expressed, thereby influencing health and disease.
Gene	The basic physical and functional unit of heredity, a segment of DNA that serves as instructions for the body to function, most commonly by making proteins. Genes are passed from parents to offspring and provide the information for physical traits like eye colour, but they can also control other genes or serve other functions within a cell.

Technical term	Definition
Genetics	The study of genes and how they and the traits they produce are inherited from parents to children.
Genome	The complete set of DNA (genetic material) in an organism. This includes all the genes, as well as other functional sequences that provide the instructions for an organism to develop, function and maintain itself throughout its life.
Genomic data	Data generated from genomic testing. This can be from either part or all of an organism's genome.
Genomic information	Genomic data that has been analysed, interpreted and provides meaningful insights.
Genomic information management	Processes and/or systems that support the storage, use, management and sharing of genomic data and information and related health information.
Genomic medicine	The use of genomic information as part of assessment, management, prevention and treatment of patients who are at risk, suspected of, or known to have a genetic or genomic condition. This National Framework primarily uses the largely synonymous but broader term 'genomics-informed health care' to recognise the growing importance of genomics as a routine part of many areas of clinical practice as well as public health initiatives.
Genomic testing	A laboratory process used to analyse part or all of a person's genome to support diagnosis, prognosis or treatment of a condition. Involves the collection of a biological specimen and the extraction of DNA, sequencing, analysis, interpretation and reporting.
Genomics	The comprehensive study of an organism's set of genetic information and how the genes work together and interact with the environment.
Genomics-informed health care	The use of genomic information to inform individual clinical care or public health initiatives.
Germline variants	A permanent variation in a gene that can be passed from parents to children and may affect health or increase the risk of disease.
Health	The World Health Organization (WHO) defines health as 'a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.' For Aboriginal and Torres Strait Islander people, health is understood in a broader, more holistic way. It includes the social, emotional and cultural wellbeing of individuals, families and whole communities, across the entire life course. Many other Australians also value broader definitions of health that reflect more holistic views of wellbeing – recognising that health is shaped by a range of social, emotional and cultural factors, and can extend beyond the individual.

Technical term	Definition
Health care professional	A person who studies, advises on or provides preventive, curative, rehabilitative and promotional health services using their extensive theoretical and factual knowledge in the diagnosis and treatment of disease and other health problems.
Health technology assessment (HTA)	The multidisciplinary process used to evaluate the safety, effectiveness, cost-effectiveness, cost and impact of health technologies. This evaluation informs the use of technologies in health systems and/or potential subsidy under government programs.
High-value health care	High-value health care means that consumers receive safe and high-quality services and effective care based on clinical evidence, whilst also addressing system waste by directing resources to where they are most needed.
Horizon scanning	A systematic process to identify emerging trends, technologies and other developments that could impact an organisation, industry, or specific area of interest. It can be used to prepare for future challenges, take advantage of new opportunities and reduce risks.
Immunotherapies	Treatments that help a person's immune system fight disease, especially cancer. They work by boosting the immune system to more effectively target and attack harmful cells.
Indigenous Data Governance[1]	The right of Aboriginal and Torres Strait Islander people to autonomously decide what, how and why Indigenous Data are collected, accessed and used. It ensures that data on or about Aboriginal and Torres Strait Islander people reflects their priorities, values, cultures, worldviews and diversity.
Indigenous Data Sovereignty	The right of Aboriginal and Torres Strait Islander people to exercise ownership over their own data which can be expressed through the creation, collection, access, analysis, interpretation, management, dissemination and reuse of Indigenous Data.
Lipidomics	The comprehensive study of lipids, the fatty substances that are essential components of cellular structures and functions.
Mainstreaming	Integrating genomics-informed health care across healthcare specialties and services. This enables the 'broader health workforce', either independently or as part of a multidisciplinary team, to request genomic tests, interpret results and manage patients directly when appropriate, rather than referring them to the 'specialised health genomics workforce'.
Metabolomics	The comprehensive study of substances involved in metabolism, aiming to identify, quantify and understand their roles in biological processes, and how they change under different conditions.
Microbes	Microorganisms, such as bacteria, viruses, or fungi that can be seen only through a microscope.
Microbiomics	Study of microbes that naturally live in a given environment (for example, on or in the human body), their structure, function and dynamics.

1 Definitions for Indigenous Data Governance and Indigenous Data Sovereignty from ***Maiam nayri Wingara***

Technical term	Definition
Multi-omics	The use of information from multiple '-omics' disciplines (like genomics, transcriptomics, proteomics and metabolomics) at the same time.
My Health Record	Australia's national digital health record system, managed by the Australian Digital Health Agency (ADHA).
One Health	An approach to designing and implementing programs, policies, legislation and research in which animal, human and environmental sectors communicate and work together to achieve better public health outcomes.
Person- and family-centred	An approach to health care that prioritises the preferences, needs and values of patients, and where appropriate their families, and actively involves them in decisions about their care.
Pharmaceutical Benefits Scheme (PBS)	A listing of medicines subsidised by the Australian Government. In the context of genomics-informed health care, this includes common medicines used to symptomatically treat genomic conditions and those that address the underlying causes, including 'immunotherapies' and 'cell and gene therapies'.
Pharmacogenomics	The study of how a person's genes affect their responses to medicines. It can be used to tailor treatment to maximise effectiveness and reduce side effects.
Phenotypic database	A structured collection of data describing the observable characteristics (phenotypes) of living organisms, including traits, behaviours, and disease manifestations or symptoms, influenced by both genetic and environmental factors.
Population screening	The systematic offering of testing to everyone in a target group to support early detection of risk factors or signs of specified conditions, with the goal of reducing the impact of those conditions on individuals and the target group as a whole.
Precision medicine	Using a person's genomic, environmental and lifestyle information to guide prevention, diagnosis and treatment (typically by separating patients into subgroups, but may conceptually involve tailoring approaches to individual patients) in a more targeted way than can be achieved by conventional medicine.
Primary Health Networks (PHN)	Independent not-for-profit organisations funded by the Australian Government to coordinate primary health care in their respective regions.
Proteomics	The comprehensive study of proteins present in a cell, tissue, organ or organism, known as the proteome.
Rare diseases	Health conditions that affect less than one in 2,000 people in Australia, and which are often serious and progressive. Most rare diseases are genetic.
Social determinants of health	Non-medical factors like income, education and housing that influence an individual's health outcomes.
Somatic variant	A permanent change in a gene that occurs after conception and is not inherited. Somatic variants are the common cause of most cancers. Somatic variants cannot be passed to a person's children.

Technical term	Definition
Specialised health genomics workforce	Health professionals and support staff who are formally qualified in human genetics, genomics or related disciplines, for example, clinical geneticists, genetic pathologists and other pathologists with relevant expertise (such as anatomical pathologists), genetic counsellors, medical laboratory scientists and bioinformaticians.
Transcriptomics	The study of the structure and function of the transcriptome, the complete set of RNA transcripts produced by a genome.
Translational research	Research that turns scientific ideas and discoveries into practical, feasible and scalable applications in health practice.
Tumour agnostic therapies	Cancer treatments that target specific changes in cancer cells, no matter where the cancer started in the body. Instead of focusing on the cancer's location (like lung or breast), these therapies work by identifying and treating the genetic markers that drive cancer growth.
Ultra-rare diseases	Health conditions that affect less than one in 50,000 people in Australia, and which are often serious and progressive. Most ultra-rare diseases are genetic.

Appendix 2: Background

In 2016, the Health Chief Executives Forum (HCEF) – then known as the Australian Health Ministers' Advisory Council (AHMAC) – agreed on the need to better integrate genomics into the Australian health system.

This led to the publication of the previous framework. The previous framework presented a shared commitment and coordinated intergovernmental approach to embedding genomics in the Australian health system. It identified activities to support collaboration and information sharing and avoid duplication of effort across federal, state and territory governments, to improve health outcomes for all Australians.

In 2020, coordinated efforts under the previous framework concluded as governments focused on the coronavirus disease 2019 (COVID-19) pandemic response. Work to integrate genomics into the Australian health system continued across governments and non-government stakeholders. These efforts improved outcomes for individuals, families and communities, and have reshaped clinical practice. However, the extent of formal coordination and collaboration across governments varied.

In 2023, the Health Technology and Genomics Collaboration (HTGC), which reports to HCEF, committed to review and update the previous framework. This led to the development of this National Framework.

This work has been led by the Australian Government Department of Health, Disability and Ageing in close collaboration with the National Health Genomics Policy Framework Project Reference Group (PRG), which reports to the HTGC. The PRG is composed of representatives nominated by the federal, state and territory health departments and the Aboriginal and Torres Strait Islander Advisory Group on Health Genomics.

In July 2025, the Australian Government Department of Health, Disability and Ageing staff leading this work transitioned to Genomics Australia, which is part of the department.

A broad range of stakeholders contributed to the development of this National Framework, including those captured through an open public consultation process held from 23 June to 25 July 2025.

In the final months of developing this National Framework, Genomics Australia worked closely with the Australian Alliance for Indigenous Genomics (ALIGN) and the National Aboriginal Community Controlled Health Organisation (NACCHO) on behalf of the PRG to ensure their views were reflected. Engagement with these stakeholders is ongoing and will continue throughout the life of the National Framework.

Appendix 3: Policies, strategies and plans relevant to the National Framework

The National Framework sits within a broader national, state and territory policy context. It was developed with consideration of related policies, strategies and plans, as well as the responsibilities of existing government entities and committees. This approach ensures alignment with the broader objectives and activities of Australian governments.

Policy documents at the state and territory level

State and territory strategies and policy documents

ACT

ACT Child and Adolescent Clinical Services Plan 2023–2030

The *Child and Adolescent Clinical Services Plan 2023–2030* [PDF 7.2MB] sets out a holistic roadmap for children's health services funded by the ACT Government. This plan builds on work across the ACT's health and early childhood systems to improve and strengthen existing services and programs for children, adolescents and their families.

ACT Health Services Plan 2022–2030

The *ACT Health Services Plan 2022–2030* [PDF 25MB] provides a roadmap for redesign, investment and redevelopment of health services funded by the ACT Government. It also sets out ACT Government priorities for working with Australian Government-funded health services, private providers, primary care and allied health services. The strategies outlined in this plan include a focus on equity and ensuring that services are flexible and inclusive.

Better together: A strategic plan for research in the ACT health system 2022-2030

Better together [PDF 7.2MB] outlines the eight-year vision for the ACT Government and its partners to drive research which strengthens the health of their communities through a strategic approach to investment and collaboration.

The plan has three strategic objectives:

1. The ACT health system becomes a learning health system.
2. ACT people have capacity to undertake high value research in the health system.
3. ACT research infrastructure supports high value research.

Digital Health Strategy 2019–2029

The *Digital Health Strategy* [PDF 1.8MB] presents a vision and direction to guide future activities and investments in technology across the ACT. It outlines the direction for the ACT public health system in building the digital capabilities needed to support a sustainable, innovative and world-class health system for the ACT.

State and territory strategies and policy documents

NSW

Future Health: Guiding the next decade of health care in NSW 2022–2032

Future Health provides the strategic framework and priorities for the whole NSW Health system over the next decade. The strategic framework outlines six strategic outcomes, each with key objectives including enabling targeted evidence-based health care through precision medicine.

The strategic outcomes are:

Patients and carers have positive experiences and outcomes that matter.

- Safe care is delivered across all settings.
- People are healthy and well.
- Staff are engaged and well supported.
- Research and innovation, and digital advances inform service delivery.
- The health system is managed sustainably.

NSW Health Genomics Strategy (2017) and Implementation Plans

The *NSW Health Genomics Strategy* [PDF 1.9MB] articulates a shared vision for clinical genomics in NSW – that NSW is a recognised leader in the development and use of appropriate technologies in health care and public health, to realise the promise of personalised medicine for the benefit of the NSW population. It describes pathways to implementation and makes recommendations as to how NSW can remain responsive to this transformation in health care, and positions itself as a recognised leader in this field. The Genomics Strategy seeks to bring together the key genomics policy issues and proposes a way forward to address the choices and challenges that may be faced in this fast-evolving area of health care.

The *NSW Health Genomics Strategy Implementation Plan 2021–2025* was co-designed with consumers, clinicians, researchers and health managers – building on the significant achievements in delivering foundational initiatives described in the *NSW Health Genomics Strategy Implementation Plan 2018–20* [PDF 694KB].

The current strategic focus to 'Enhance disease management and prevention' is delivering enhanced health care using genomics for the benefit of the NSW population and preparing NSW for the delivery of precision medicine.

NSW Health Strategic priorities include:

- Advances in health genomics are incorporated into new and existing clinical pathways to provide safe, cost effective, equitable, and beneficial disease prevention and management across NSW.
- Enabling systems and infrastructure to support access and integration of workflows for clinical genomics that meet consumer needs and expectations.
- A health workforce with improved knowledge, skills and capabilities to develop, use and apply clinical genomics to optimise patient care.

State and territory strategies and policy documents

NT

Strengthening our Health System Strategy (2020–2025)

Northern Territory Health, Aboriginal Medical Services Alliance NT and Northern Territory Primary Health Network have formed a collaborative partnership to drive and coordinate the opportunities emerging through digital health technologies and new ways of working across the health system. The ***Strengthening our Health System Strategy (2020–2025)*** [PDF 969KB] sets out the intent and commitment to strengthening the NT health system by pursuing opportunities to better connect communities, workforce, systems and approaches enabled by digital health capabilities and technologies.

QLD

Genomics and Precision Health: A Strategic 5-Year Roadmap 2021–2026

Genomics and Precision Health: A Strategic 5-Year Roadmap sets out Queensland Health's vision for embedding genomics into the health system through coordinated leadership, equitable access and system-wide integration. It prioritises ethical, legal and social considerations, supports the mainstreaming of genomic services in healthcare delivery, and fosters a collaborative ecosystem that enables commercial partnerships with research and industry.

The roadmap is structured around seven key priority areas:

1. Person- and family-centred care
2. Services
3. Resources
4. Workforce
5. Data and biobanking
6. Research
7. Governance

Digital Health 2031: A digital vision for Queensland's health system

Digital Health 2031 [PDF 9.1MB] outlines the vision for a digitally-enabled, world-class healthcare system in Queensland. Its primary goal is to improve health outcomes for all Queenslanders by positioning digital as a key enabler of safe, quality and sustainable care. It defines the future state of digital health care, provides a strategic framework for implementation, and sets out the roadmap and success factors for delivering and sustaining digitally-enabled services.

State and territory strategies and policy documents

SA

Precision Medicine Blueprint

The Commission on Excellence and Innovation in Health's ***Precision Medicine Blueprint*** [PDF 1.7KB] outlines the first steps in establishing an agency agenda to guide the co-development of a system-wide framework for precision medicine in South Australia.

The system priorities of the blueprint are:

- Supporting infrastructure and service models.
- Workforce, education and training.
- Integrated big data and analytics.
- Research, innovation and translation.
- Community education and health literacy.

The South Australian Health and Wellbeing Strategy 2020–2025

The ***Health and Wellbeing Strategy 2020–2025*** informs the work, priorities and direction for the public health system in South Australia from 2020 to 2025. This direction emphasises the importance of keeping people healthy and refocuses on prevention, promotion and early intervention initiatives, as well as expanding service capacity in community settings to support people to avoid unnecessary interactions with the hospital sector.

Clinical Genomics in SA Plan 2026–2030

The ***Clinical Genomics Statewide Clinical Network*** at the Commission on Excellence and Innovation in Health (CEIH) was established in 2020 to support statewide collaboration in health genomics across clinical, scientific and research fields, and with industry and consumers. The network is working on a new ***Clinical Genomics in SA Plan 2026–2030*** following the expiry of the previous ***SA Clinical Genomics Plan 2022*** [PDF 589KB]. The key purpose of the new plan is to strategically maximise the benefits of genomics for South Australians through better disease prevention, earlier diagnosis and better-targeted treatment, while managing the associated risks and social, legal and ethical issues.

The Clinical Genomics in SA Plan 2026–2030 will also align with the priorities of the recently established South Australian Comprehensive Cancer Network (SACCaN) alongside the CEIH Precision Medicine Blueprint, and the South Australian Health and Wellbeing Strategy 2020–2025.

State and territory strategies and policy documents

TAS

Digital Health Transformation – Improving Patient Outcomes (2022–2032)

The vision for the *Tasmanian Digital Health Transformation Strategy* is to empower consumers and health care workers to deliver better patient outcomes through system-wide, digitally-enabled technologies. The four focus areas of the strategy are to improve community care, engage patients in their care, optimise clinical and operational workflows, and foster statewide collaboration.

Tasmanian Genomics Framework 2024–2029

The *Tasmanian Genomics Framework 2024–2029* offers guidance to administrators, system planners and health professionals to recognise the system-transformative changes genomics can bring. Its principles and priorities also provide guidance for the broader health sector in Tasmania.

VIC

Victorian Department of Health: Strategic Plan 2023–2027 (2025 update)

The vision for the *Victorian Department of Health Strategic Plan 2023–27 (2025 update)* is that Victorians are the healthiest people in the world. Victoria will partner with the community to support every individual to lead a healthy life.

To achieve this vision, the Strategic Plan identifies seven strategic directions:

1. Keeping people healthy and safe in the community.
2. Providing care closer to home.
3. Keep innovating and improving care.
4. Improving Aboriginal health and wellbeing.
5. Moving from competition to collaboration.
6. A stronger and more sustainable workforce.
7. A safe and sustainable health, wellbeing and care system.

Genetic and genomic healthcare for Victoria 2021

Genetic and genomic healthcare for Victoria 2021 provides a framework outlining what needs to be done to further embed the appropriate use of genomics to benefit the health and wellbeing of Victorians.

It outlines four areas in which additional work is needed to include genomic information into routine health care:

- strengthening the healthcare system
- building trust
- raising awareness
- growing knowledge.

State and territory strategies and policy documents

WA

Genetic Health WA (GHWA) Service Plan 2025–2030

The *Genetic Health WA (GHWA) Service Plan 2025–2030* [PDF 2.3MB] outlines the strategic direction for the delivery of clinical genomic specialty services by GHWA until 2030. The plan was co-designed with people with lived experience of GHWA and was informed by a range of stakeholder engagement activities. It acknowledges that to meet the rising demand for genomic health care, GHWA will need to engage in collaborative and coordinated approaches to help grow genomic capacity across the system and implement innovative service models which adapt to the diverse needs of its stakeholders.

WA Aboriginal Health and Wellbeing Framework 2015–2030

The *WA Aboriginal Health and Wellbeing Framework 2015–2030* [PDF 11MB] was developed to ensure Aboriginal people in Western Australia have access to high-quality health care and services, while assisting community to make good health a priority through a focus on prevention. It is a high-level conceptual framework that outlines key guiding principles, strategic directions and priority areas to enhance the Aboriginal health and wellbeing outcomes over a 15-year period.

The framework acknowledges the importance of:

- culture as a determinant of health and wellbeing of Aboriginal people
- Aboriginal people's definition of health and the strength of community
- partnerships between services and community to encourage new ways of working.

The framework was developed for Aboriginal people by Aboriginal people.

WA Aboriginal Data Policy

The purpose of the *Aboriginal Data Governance Policy* is to ensure that the WA health system recognises the rights of Aboriginal people in Western Australia to govern the collection, ownership and use of data about their people and communities.

More specifically, the policy recognises Aboriginal people's trust, expectations and understanding of data ownership, including the ownership of Aboriginal personal and community information in accordance with the Australian Government's Aboriginal data sovereignty commitments in the *United Nations Declaration on the Rights of Indigenous Peoples* [PDF 154KB] and the *National Agreement on Closing the Gap.*

This policy establishes the Aboriginal Data Governance Model which outlines the requirements for collecting, accessing, using or disclosing Aboriginal data within the WA health system.

WA Genomics Strategy 2022–2032: Towards precision medicine and precision public health

The *WA Genomics Strategy* [PDF 5.8MB] outlines an ambitious vision to benefit all Western Australians through timely and appropriate translation of genomics.

To achieve this vision, the WA Genomics Strategy identifies five strategic priority areas:

- Person- and family-centredness
- Genomic healthcare services
- Workforce, education and training
- Digital health and data
- Research and innovation

State and territory strategies and policy documents

WA

WA Health and Medical Research Strategy 2023–2033

The ***WA Health and Medical Research Strategy 2023–2033*** outlines the priorities and direction of health and medical research for the state. The strategy sets an ambitious vision for a collaborative, consumer-driven research ecosystem, conducting world-leading impactful research that is translated into practice for health communities.

The strategy is designed to leverage the distinct advantages and opportunities that the current ecosystem presents, inclusive of WA's unique geography and population.

As such, six strategic focus areas are identified:

1. Aboriginal health
2. Consumer engagement
3. Precision health
4. Regional and remote
5. Digital health
6. Prevention

WA Health Digital Strategy 2020–2030

The ***WA Health Digital Strategy*** aims to take advantage of the innovations transforming healthcare to drive better health outcomes for all Western Australians.

Initiatives, investment priorities and resources for the WA Health Digital Strategy will be focused on six strategic themes:

1. Empowered consumers
2. Informed clinicians
3. Optimised performance
4. Supported workforce
5. Enhanced public health
6. Embedded innovation and research

WA Health Workforce Strategy 2034

The ***WA Heath Workforce Strategy 2034*** [PDF 7.1MB] outlines a structured approach over a 10-year period to optimise the capability and capacity of the health workforce to ensure the continued delivery of safe, reliable and person-centred health care, addressing workforce challenges unique to WA.

Incorporating the whole employee life cycle, the strategy focuses on six priority areas:

1. Modelling
2. Attraction
3. Retention
4. Leadership
5. Digitalisation
6. Partnerships

Related national policy documents

National strategies, policy documents and reviews

Aboriginal and Torres Strait Islander Cancer Plan

The ***Aboriginal and Torres Strait Islander Cancer Plan*** was developed by the National Aboriginal Community Controlled Health Organisation (NACCHO) following extensive consultation with stakeholders across the country. The Cancer Plan was also informed by NACCHO's evidence review, 'Navigating the Evidence' which brought together the most recent data and evidence on cancer relevant to Aboriginal and Torres Strait Islander people. It has been written to change cancer experiences and create a new foundation for partnership in Australia's national approach to cancer control. Synergies exist between this Aboriginal and Torres Strait Islander Cancer Plan and the broader Australian Cancer Plan developed by Cancer Australia.

Australian Cancer Plan

Developed by Cancer Australia, the ten-year ***Australian Cancer Plan*** ('Plan') is a future-focused plan designed to improve cancer outcomes for all Australians, particularly for those groups whose health outcomes are poorer. Achieving equity in cancer outcomes will be a fundamental measure of success for the Plan and will align Australia with global calls to improve cancer outcomes for all people.

Underpinning the Plan are six strategic objectives which identify where national focus and effort are best directed to deliver better outcomes for the next decade and beyond. These strategic objectives are:

1. Maximising cancer prevention and early detection.
2. Enhanced consumer experience.
3. World class health systems for optimal care.
4. Strong and dynamic foundations.
5. Workforce to transform the delivery of cancer care.
6. Achieving equity in cancer outcomes for Aboriginal and Torres Strait Islander people.

Digital Health Blueprint and Action Plan 2023–2033

The ***Digital Health Blueprint and Action Plan 2023–2033*** ('Action Plan') is a ten-year roadmap that lays out the Australian Government's vision for the role digital health capabilities will continue to play in delivering a more tailored, integrated, efficient and contemporary health system. The Action Plan highlights the initiatives the Australian Government is investing in to meet the identified target outcomes and outlines key delivery partners and progress. The Action Plan will be refreshed regularly to outline progress and to include new digital and data investments over time.

This National Framework aligns with the key outcomes of the Digital Health Blueprint. It focuses on giving Australians choices in how they manage their health. This includes patient digital health records that follow them through the system, and data and information that is securely shared and reused.

Guiding Principles: Ensuring Culturally Safe Health Genomics with Aboriginal and Torres Strait Islander Peoples

The ***Guiding Principles: Ensuring Cultural Safe Health Genomics with Aboriginal and Torres Strait Islander Peoples*** ('Guiding Principles') were developed by the Aboriginal and Torres Strait Islander Advisory Group on Health Genomics to guide the delivery of culturally safe and equitable access to genomic health care and research. It provides information for policymakers, researchers, clinicians, ethics committees and Aboriginal and Torres Strait Islander communities on integrating genomics into the health system and research through partnerships with Aboriginal and Torres Strait Islander people who determine the pace.

This National Framework provides an opportunity to partner with Aboriginal and Torres Strait Islander people to implement the Guiding Principles.

The Guiding Principles will also be considered in the implementation of all activities under this National Framework.

Framework for Governance of Indigenous Data

The *Framework for Governance of Indigenous Data* provides practical guidance for the Australian Public Service (APS) on how to practically support the principles of Indigenous Data Sovereignty for data governed by the Australian Government.

Embedding Indigenous Data Sovereignty principles is a critical element of this National Framework. Strategic Priority 4 includes specific activities that commit all Australian governments to embedding these principles as genomics continues to be integrated into the Australian health system.

Health Technology Assessment (HTA) Policy and Methods Review

A review of Australia's health technology assessment (HTA) policies and methods (HTA Review) was conducted in 2023 and 2024. The Australian Government has established an Implementation Advisory Group to provide advice on developing a roadmap for sequencing the Australian Government's response to the recommendations of the *HTA Review final report.*

Under this National Framework, Activity 2F commits all Australian governments to promoting the inclusion of genomics in HTA improvement and reform, including the Australian Government's response to the HTA Review. This activity also supports meaningful engagement between government representatives and researchers to ensure HTA processes are considered and integrated into project design, data collection and analysis.

Together, these activities aim to strengthen the role of genomics in health technology assessment and ensure that future reforms are informed by evidence, collaboration and community needs.

Medical Research Future Fund (MRFF) Genomics Health Futures Mission (GHFM) Roadmap and Implementation Plan

The *MRFF Genomics Health Futures Mission Roadmap and Implementation Plan* provide information on the mission's scope, goal, funding principles, priorities for investment, supporting activities and evaluation approaches.

The following aims have been identified as areas for investment from February 2025:

- Faster and more effective disease diagnosis, prevention and earlier intervention.
- New targeted interventions that transform individual and population health.
- Increased community awareness and engagement, and better understanding of the societal and economic value of genomics in health care and practice.

These will target activities to achieve the objectives of the GHFM within the 10-year plan.

National Aboriginal and Torres Strait Islander Health Plan 2021–2031

The vision for the *National Aboriginal and Torres Strait Islander Health Plan 2021–2031* ('Health Plan') is that Aboriginal and Torres Strait Islander people enjoy long, healthy lives that are centred in culture, with access to services that are prevention-focused, culturally safe and responsive, equitable and free of racism.

Consistent with this vision, this Health Plan acknowledges Aboriginal and Torres Strait Islander people's right to self-determination by ensuring that they are leading the decisions that impact their health. The Health Plan sets out a holistic approach that considers cultural and social determinants across the whole life course. It also highlights the need for mainstream health services to provide culturally safe and responsive care, in partnership with Aboriginal and Torres Strait Islander people and communities.

This National Framework has been developed with consideration of the Health Plan. It includes specific outcomes and activities that support the health and wellbeing of Aboriginal and Torres Strait Islander people, with a strong focus on equity, culturally safe and responsive care, and genuine partnerships with Aboriginal and Torres Strait Islander stakeholders to ensure implementation reflects the values and priorities of the Health Plan.

National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031

The *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031* ('Workforce Plan') aims to increase Aboriginal and Torres Strait Islander representation in all health roles and locations across the Australian health system, to improve health, mental health, and social and emotional wellbeing of Aboriginal and Torres Strait Islander peoples. The Workforce Plan also aims to strengthen the health system to create and sustain its cultural and professional capabilities, increase access to services and improve the attraction, retention and career development of Aboriginal and Torres Strait Islander staff.

This National Framework has been developed with consideration of the Workforce Plan. Activity 4G specifically aims to develop and implement strategies to increase Aboriginal and Torres Strait Islander representation across both the specialised health genomics workforce and the broader health workforce, including the ATSICCHO workforce.

National Agreement on Closing the Gap

The objective of the *National Agreement on Closing the Gap* ('National Agreement') is to enable Aboriginal and Torres Strait Islander people and governments to work together to overcome the inequality experienced by Aboriginal and Torres Strait Islander people, and achieve life outcomes equal to all Australians.

At the centre of the National Agreement are four Priority Reforms that focus on changing the way governments work with Aboriginal and Torres Strait Islander people.

The Priority Reforms are:

1. Formal partnerships and shared decision-making
2. Building the community-controlled sector
3. Transforming government organisations
4. Shared access to data and information at a regional level

This National Framework has been developed in alignment with the National Agreement as outlined in Making Genomics Work for Everyone: Closing the Gap.

National Health Reform Agreement (NHRA)

The *National Health Reform Agreement (NHRA)* is an agreement between the Australian Government and all state and territory governments.

Through this agreement, the Australian Government contributes funds to the states and territories for public hospital and health services. This includes services delivered through emergency departments, hospitals and community health settings.

The latest addendum, the *2026–2031 NHRA Addendum*, was signed by the Australian Government and state and territory governments on 27 February 2026. It came into effect on 1 July 2026.

National Strategic Action Plan for Rare Diseases

The *National Strategic Action Plan for Rare Diseases* ('Action Plan') is the first nationally-coordinated effort to address rare diseases in Australia. The Action Plan outlines the priorities and actions required to improve the health of those impacted by a rare disease.

Genomics has great potential for rare diseases. Approximately 80 per cent of rare diseases are of genetic origin and while each is statistically rare, it is estimated that eight per cent of Australians live with a rare disease – this equates to around two million people. It is therefore important to consider the impacts this National Framework will have on people living with rare diseases.

National Digital Health Strategy (2023–2028)

The *National Digital Health Strategy (2023–2028)*, developed by the ADHA on behalf of all Australian Governments, identifies opportunities for digital health to support planned national health system reforms and address emerging contemporary health system challenges to deliver a sustainable, interoperable and inclusive health system now and into the future.

The National Digital Health Strategy and this National Framework both strive to develop safe and secure genomic data and information sharing capabilities across the Australian health system.

National Framework for Genomics in Cancer Control

The *National Framework for Genomics in Cancer Control* ('Cancer Control Framework') focuses on genomics across the cancer care continuum. It is intended to guide policy to enable equitable access to genomic medicine for all Australians affected by cancer.

This National Framework addresses the activities and priorities detailed in the Cancer Control Framework, including equity, workforce and access, which are relevant not only to cancer care, but also to the wider health landscape.

Genomics Australia will work with Cancer Australia to ensure the implementation of both frameworks is aligned, and to avoid duplication of effort across the genomics landscape.

National Microbial Genomics Framework for Public Health 2025–2027

The *National Microbial Genomics Framework for Public Health 2025–2027* ('Microbial Framework') provides a nationally consistent approach to integrate microbial genomics into the Australian public health system.

The Microbial Framework and this National Framework are complementary. It is acknowledged that there are close links and interdependencies between human, animal, plant and wider environmental health. There may be opportunities for cooperation across sectors to embed genomics to advance health under a more integrated approach in the future, such as One Health.

National Science Statement, and National Science and Research Priorities

The 2024 *National Science Statement* is the Australian Government's vision for science over the coming decade. A key imperative is to incentivise and support the translation of science and research into new industries and sustainable products, including medical science innovation.

The 2024 *National Science and Research Priorities* give clarity on the science and research areas that Australia needs to focus on over the next decade with a focus on five key priority areas, including supporting healthy and thriving communities, and elevating Aboriginal and Torres Strait Islander knowledge systems.

Key critical research pathways to support healthy and thriving communities include:

- therapies that use precision medicine to treat diseases
- Aboriginal and Torres Strait Islander-led, place-based and culturally appropriate approaches to build community capacity and achieve equity for Aboriginal and Torres Strait Islander peoples in health, wellbeing and life expectancy.

A critical research pathway to support elevating Aboriginal and Torres Strait Islander Knowledge Systems includes approaches for protecting and managing Aboriginal and Torres Strait Islander cultural and intellectual property.

Newborn Bloodspot Screening – National Policy Framework

The *Newborn Bloodspot Screening – National Policy Framework* describes what is needed to support the ongoing success of newborn bloodspot screening (NBS) in Australia. It provides background information on the NBS programs and presents five policy areas which outline guiding principles and a high-level description of the programs. This includes:

- How the programs are implemented.
- What is needed to support high-quality and safe NBS.
- How the programs should be monitored, reviewed and evaluated to ensure they are achieving their aim and objectives.
- A decision-making process to enable conditions to be assessed for inclusion in or removal from the programs.

The decision-making pathway and the condition nomination forms outlined in the NBS policy framework are no longer in use. Instead, a new

decision-making pathway has been agreed by all Australian health ministers including a new process to invite the public to identify conditions for consideration.

NBS programs screen for a range of rare genetic conditions, including multiple metabolic disorders. NBS programs allow babies with these rare conditions to receive care and support earlier than they would without them. Earlier intervention leads to better health outcomes for the baby and the family.

Population-based Screening Framework

The ***Population-based Screening Framework*** ('Framework') provides guidance for decision-makers when considering potential population-based screening programs in Australia. The Framework includes details about the criteria that should be used to assess whether screening should be offered, or a screening program should be introduced for diseases or conditions, and the key principles for the implementation and management of screening programs. The ***Genomic tests in population-based screening programs – position statement*** sets out further criteria to be considered for proposals for genomic specific tests in population screening.

Related Australian Government and interjurisdictional entities and committees

Australian Centre for Disease Control

The Australian Centre for Disease Control (Australian CDC) aims to protect Australia from public health threats and improve the health of all Australians. The Australian CDC plays a key role in bringing together critical information and experts to deliver trusted health advice to improve health outcomes for all Australians, ensuring pandemic preparedness through early detection and analysis of health threats, modernising Australia's national disease surveillance and data systems as a frontline defence against communicable infections, and strengthening Australia's preparedness levels to respond to future health challenges.

The current functions of the Australian CDC relate to communicable disease surveillance, analysis and public health advice, human biosecurity and health protection, environmental health, One Health and health security. In the context of genomics, the Australian CDC is currently focused on integrating microbial genomics into the Australian public health system. However, its functions will expand over time to include working in partnership with states and territories to prevent non-communicable diseases. Prevention and early intervention are core values underpinning this National Framework.

Australian Commission on Safety and Quality in Health Care

The Australian Commission on Safety and Quality in Health Care (ACSQHC) commenced as an independent statutory authority on 1 July 2011, funded jointly by the Australian Government and by state and territory governments. ACSQHC's purpose is to contribute to better health outcomes and experiences for all patients and consumers, and improved value and sustainability in the health system by leading and coordinating national improvements in the safety and quality of health care.

Australian Digital Health Agency

The Australian Digital Health Agency (ADHA) is a statutory agency of the Australian Government that aims to improve health outcomes through the delivery of national digital health services and systems. ADHA focuses on putting data and technology safely to work for patients, consumers and the health care professionals who look after them. ADHA is responsible for My Health Record and other e-health programs under the National Digital Health Strategy (2023–2028).

Cancer Australia

Cancer Australia is a statutory agency of the Australian Government that aims to reduce the impact of cancer, address disparities and improve outcomes for people affected by cancer by leading and coordinating national, evidence-based interventions across the continuum of care. Cancer Australia works collaboratively and liaises with a wide range of groups. This includes those affected by cancer, key stakeholders and service providers with an interest in cancer control. It also focuses on populations who experience poorer health outcomes, including Aboriginal and Torres Strait Islander peoples, and people living in rural and remote Australia.

Gene Technology Regulator

The Gene Technology Regulator assesses and approves activities with genetically modified organisms (GMOs) to protect the health and safety of people and to protect the environment from any risks posed by gene technology. This oversight includes research involving GMOs, clinical trials with therapeutics that are or contain GMOs, and the commercial release of these therapeutics.

Health Chief Executives Forum

The Health Chief Executives Forum (HCEF) is an intergovernmental forum for joint decision-making and strategic policy discussions that helps to efficiently deliver health services in Australia. It is made up of the health department chief executive officer from each state and territory, and the Australian Government. The HCEF supports the Health Ministers' Meeting (HMM) to deliver national work priorities, and that its governance and processes align with the HMM and National Cabinet.

The Health Technology and Genomics Collaboration (HTGC) and the Cancer and Population Screening (CAPS) Committee are two sub-committees of the HCEF.

The **Cancer and Population Screening (CAPS) Committee** provides strategic policy advice on population screening and cancer control. The CAPS Committee is established under and reports to HCEF. The role of the CAPS Committee includes reviewing and progressing recommendations from relevant program management committees and groups to HCEF.

The **Health Technology and Genomics Collaboration (HTGC)**, established in 2023, is a time-limited interjurisdictional forum responsible for developing and implementing a nationally cohesive approach to the coordination of the assessment, implementation, monitoring and evaluation of new health technology. This includes the oversight of national activities for genomics, highly specialised services, and high cost, highly specialised therapies (HST).

The HTGC reports to the HCEF and was responsible for overseeing the review of the lapsed previous framework and the development of this National Framework.

Independent Health and Aged Care Pricing Authority

The Independent Health and Aged Care Pricing Authority (IHACPA) is an independent government agency that promotes efficiency and increases transparency in the delivery and funding of public health and aged care services across Australia. It assists the Australian Government by providing evidence-based price determinations and pricing advice.

The IHACPA's responsibilities include developing national classifications for health care and other services delivered by public hospitals. IHACPA also undertakes several major areas of work designed to inform the annual determination of the national efficient price (NEP) and national efficient cost (NEC). This includes ongoing consultation with all Australian health departments, expert

advisory committees and key stakeholders. It also provides residential aged care, respite care pricing and costing advice, refundable accommodation deposit approvals, and extra service fee approvals. Additionally, IHACPA resolves cost-shifting and cross-border disputes upon request by a health minister.

Medical Research Future Fund

The Medical Research Future Fund (MRFF), established under the ***Medical Research Future Fund Act 2015***, is a long-term investment supporting Australian health and medical research. The MRFF aims to transform health and medical research and innovation to improve lives, build the economy and contribute to health system sustainability. The Health and Medical Research Office (HMRO) advises the Minister for Health, Disability and Ageing on MRFF policy matters and is responsible for the overall administration of the MRFF.

The Genomics Health Futures Mission (GHFM) is a MRFF initiative investing in genomic medicine research. It builds on existing research to demonstrate the benefits of genomics and related technologies for patients and the health system. The GHFM supports research to improve testing and diagnosis for many diseases, help personalise treatment options to better target and improve health outcomes, and reduce unnecessary interventions and health costs.

Medical Services Advisory Committee

The Medical Services Advisory Committee (MSAC) is an independent non-statutory committee appointed by the Australian Government Minister for Health, Disability and Ageing. It advises the Australian Government on applications for public funding of health services and technologies.

National Health and Medical Research Council

The National Health and Medical Research Council (NHMRC) funds high-quality health and medical research to build research capability, support researchers, encourage the translation of research into better health outcomes, and promote the highest ethical standards for health and medical research.

Pharmaceutical Benefits Advisory Committee

The Pharmaceutical Benefits Advisory Committee (PBAC) is an independent statutory body appointed by the Australian Government. The PBAC is established under the National Health Act 1953. Its primary role is to recommend new medicines for listing on the Pharmaceutical Benefits Scheme (PBS).

Therapeutic Goods Administration

The Therapeutic Goods Administration (TGA) is responsible for evaluating, assessing and monitoring products that are defined as therapeutic goods. The TGA regulates medicines, medical devices and biologicals.

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All information in this publication is current as of August 2026.