Digital Transformation
Tech Talk

Webinar series

Digital Transformation and Delivery Division

Corporate Group | Department of Health and Aged Care

Australian Government
Department of Health and Aged Care

Welcomes

– and housekeeping

Digital Transformation for the Aged Care sector

Agenda
Tech Talk #4

- **Welcome** (Fay Flevaras & Janine Bennett)

- **Digital Transformation Update** (Fay Flevaras)

- Immediate focus:
    - **AN-ACC release** (Mark Richardson, Amanda Inglis, Jacqui Houghton)
    - **Co-Design Update** (Fay Flevaras)

- Future focus:
    - **Aged Care Legislative Amendments** (Mel Metz)
    - **Approach to the Aged Care Digital Strategy** (Jason Fraser)
    - **Connecting Australian Health Care – National Healthcare Interoperability Plan** (Herbert Down)

- **Q & A Panel** (Fay Flevaras, Mel Metz, Jason Fraser, Herbert Down)

- **Close** (Fay Flevaras & Janine Bennett)

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Digital Transformation Update

Fay Flevaras

First Assistant Secretary | Digital Transformation and Delivery Division | Corporate Group

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Digital Transformation
Portfolio View
High-level Releases & Projects

DRAFT

High importance for us

- Mature portfolio planning & release management
- Continuing to understand impacts, communicate with, and drive readiness with the sector
- Identify, track and manage dependencies within a complex change program
- Being open to questions & input in a shifting environment

Aged Care IT Portfolio – High level release and project view

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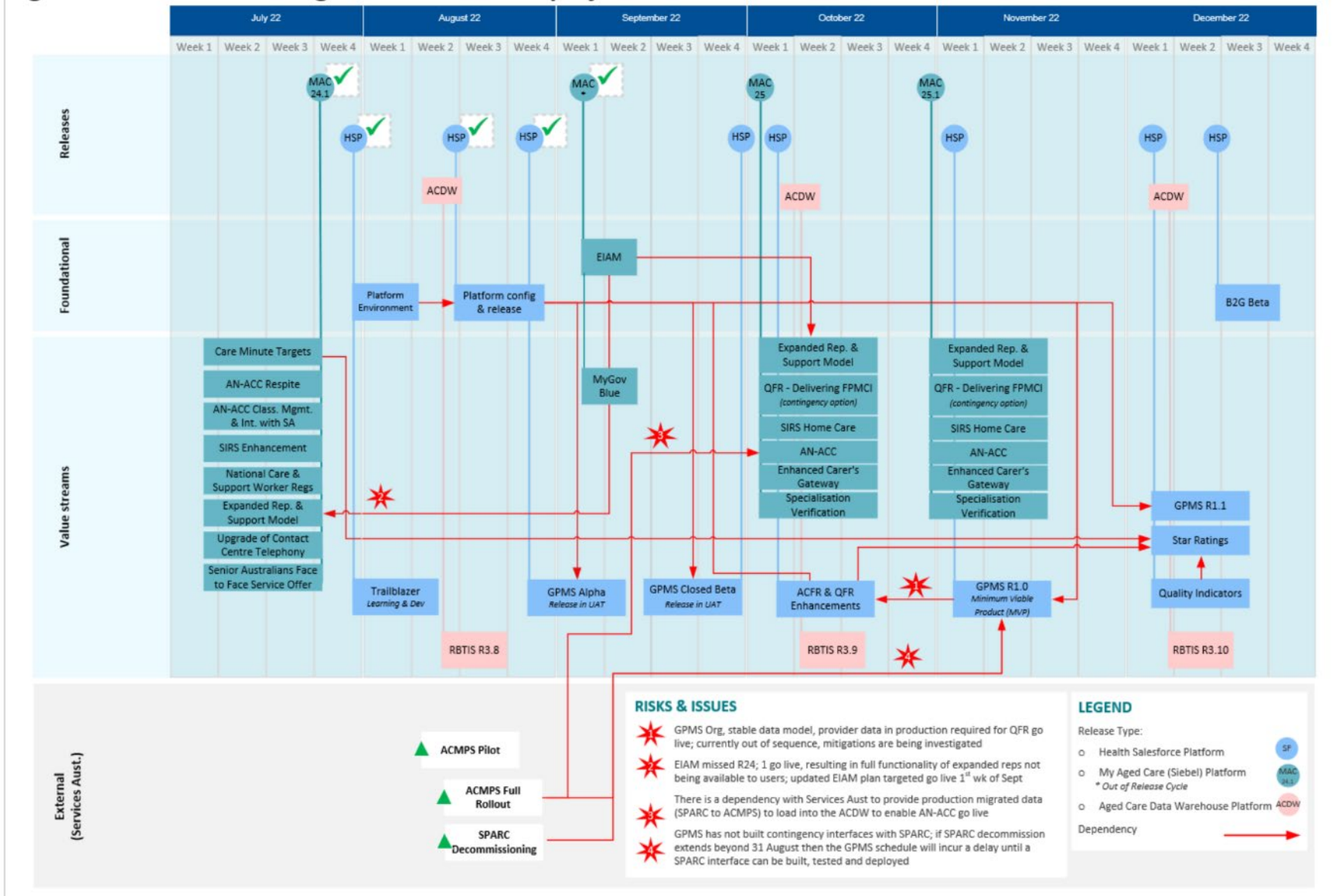
Immediate focus:
AN-ACC

Mark Richardson & Amanda Inglis
Ageing and Aged Care Group | Department of Health and Aged Care

Jacqui Houghton
Services Australia

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AN-ACC overview

AN-ACC funding elements

- ACFI basic subsidy
- Viability and homeless supplements
- 2021 Basic Daily Fee supplement
- Care minutes funding (from 1 October 2022)

Independent assessments

- 6 Assessment Management Organisations, over 300 assessors
- AN-ACC assessment tool
- 94% of active residents assigned an AN-ACC class

AN-ACC funding components

- Fixed (Base Care Tariff)
- Variable (AN-ACC classifications)
- One-off entry payment

Independent Pricing

- Annual independent costing studies to inform changes in funding
- Recommendations to Government on pricing

Care minutes

- $5.4b funding over 4 years from 1 October 2022
- Funding to increase direct clinical care to residents

Implementation activities

September

Base Care Tariff verifications

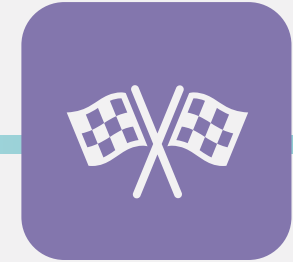**Mid-September**

Provider Preparation Checklist

Online tutorials

Mid-September to October

Publish Residential Care Funding User Guide

Providers continue to submit ACFI appraisals for residents in care

1 October 2022

AN-ACC go live

Respite classifications available

Reconsideration available

Connect

Watch:
https://www.health.gov.au/resources/webinars

Subscribe:
http://www.health.gov.au/aged-care-newsletter-subscribe

Engage:
http://www.agedcareengagement.health.gov.au

Read:
http://www.health.gov.au/aged-care-funding-reforms

agedcareengagement.health.gov.au

Phone **1800 200 422**
(My Aged Care's free call phone line)

Overview of changes coming 3 October 2022

- **AMOs Assessor Portal and App:**
  - Referral management functionality for clients receiving residential respite care
  - Enhancements to the AN-ACC app and portal functionality including improved support for managing residential respite assessments

- **Comprehensive Assessor Portal and App:**
  - Recommend 'Residential Respite Care' instead of 'Residential Respite Care High/Low

- **Service Provider Portal::**
  - Ability to request AN-ACC reassessments and/or reconsiderations for client's in residential care, both permanent and residential;
  - Visibility of AN-ACC information for all clients within their facility

AN-ACC Assessment Application Iteration

Assessment validation

First iteration – changing the paper based form into a dynamic application

Question Display

Second iteration – text heavy form with a heavy cognitive load expected of users

Final Shadow Assessment app – improved information display and UI enhancements driven by user feedback

Question display

Services Australia

Preparing the Sector for AN-ACC

Jacqui Houghton

- New *Residential Aged Care Payment System*

- Runway to AN-ACC – 1 October 2022

- Support for the Sector

- Status update on

  Sector Readiness

How do software vendors contact us?

OTS Software Vendor Technical Support

1300 550 115 | agedcareonline@servicesaustralia.gov.au

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Digital Transformation Sector Partners
Co-Design Update

Fay Flevaras

First Assistant Secretary | Digital Transformation and Delivery Division | Corporate Group

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Overview of Co-design Streams

Parallel co-design streams

Two Immediate Co-design Streams:

EXPLORE the problem

DISCOVERY

Build the **RIGHT** thing

BUILD **LEAN**

Build the thing **RIGHT**

BUILD **AGILE**

AUTOMATED focus (API)

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

DIGITISED focus (UX)

Co-design in this space will work with end users of a system to create a great experience for users; sessions will observe how users interact with the system and will include **UX and UI** review activities

Problem Solving Phase — Execution & Solution Phase

Abstract — Concrete

Ideate · Define · Empathize

Learn · Try experiments · Pivot/persevere? · Measure

Build

Sprint planning · Sprint execution · Product backlog · Sprint review · Shippable increment

Customer Problem — Customer Solution

Design Thinking · Lean Start up · Agile

Digital Transformation for the Aged Care sector

Digital Maturity Roadmap

End state vision:

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Digital Transformation for the Aged Care sector

GPMS UX Co-design
Progress against our roadmap

Build the **RIGHT** thing

BUILD **LEAN**

UX Co-Design

Mobilised in January	June	July	August	September	October	November	December

COMPLETED ✔ **IN PROGRESS** **COMING**

GPMS UX Co-design Findings Summary

CO-DESIGN FINDINGS INCORPORATED
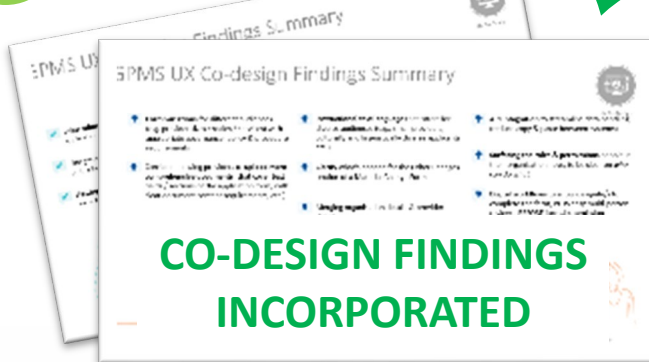
GPMS Co-design Sprints 1, 2 & 3

1. Synthesise & Prioritise
2. Update Designs
3. Exploration

GPMS Alpha Drop 31/08 UAT

GPMS Closed BETA 30/9 UAT

Release 1.0

Release 1.1

What's next for GPMS Co-design

1. Synthesise findings & prioritise proposed changes
2. Update designs with immediately actionable items
3. Consider how larger items might be explored and potentially implemented
4. Re-engage co-design partners for further feedback on updated designs and/or functional demos

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GPMS: UX Co-design Recap

Co-design Sprints Completed

CO-DESIGN ROUNDS
Sprint 1 · Sprint 2 · Sprint 3

SPRINT 3
5 sessions
Completed 26th July

SPRINT 1
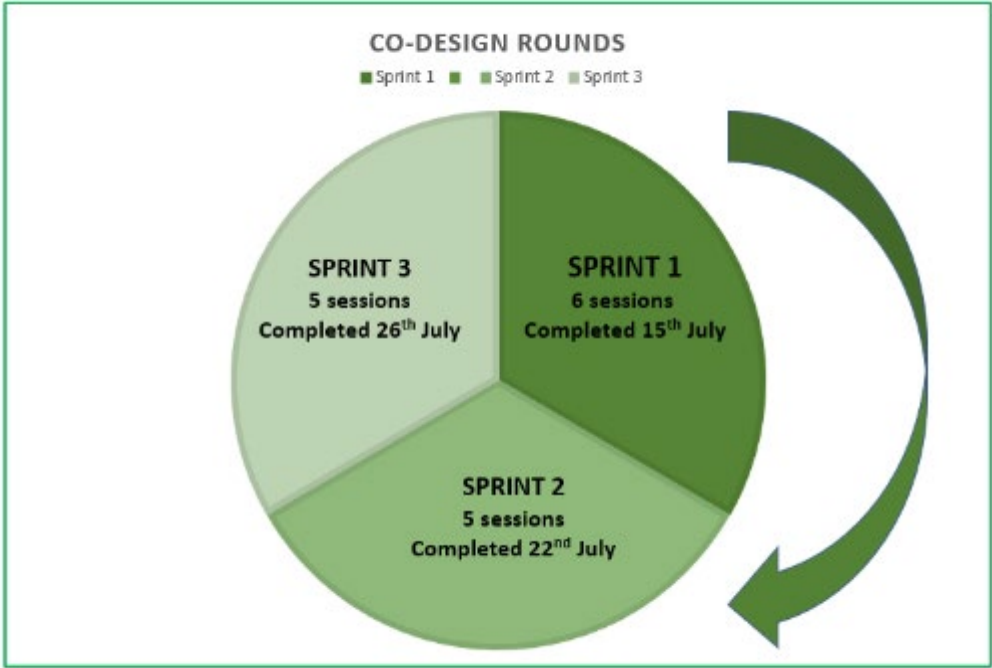6 sessions
Completed 15th July

SPRINT 2
5 sessions
Completed 22nd July

Sprint 1, 2 & 3
Range of Co-design Partners
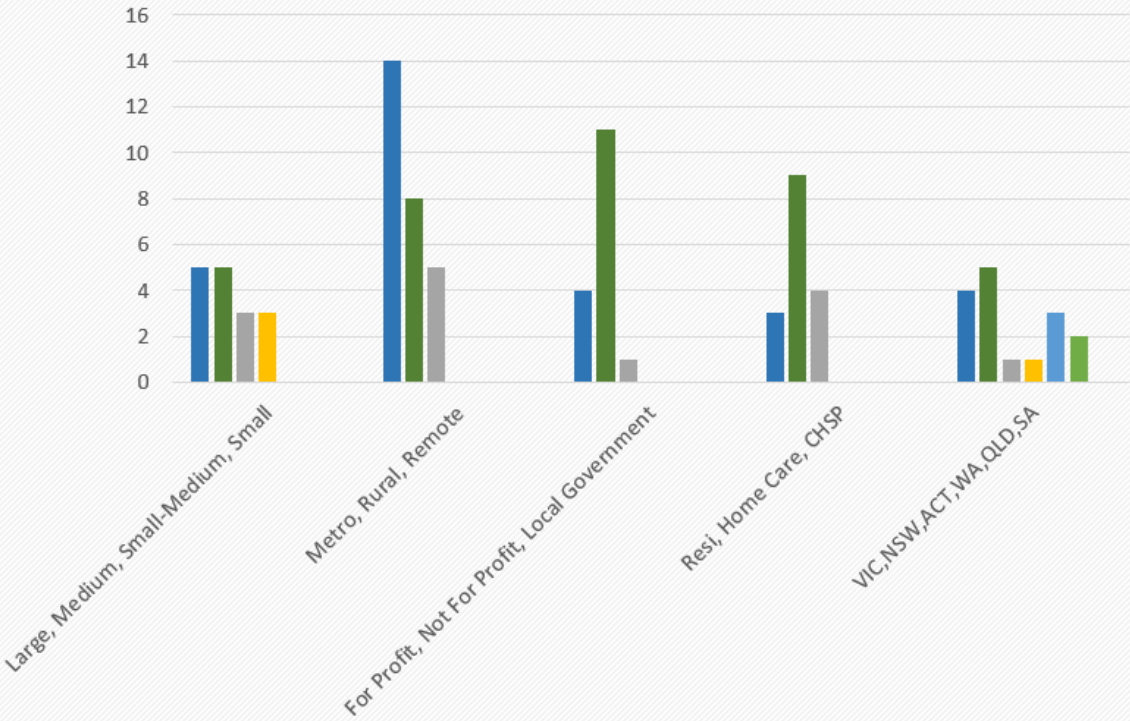
UX Co-design: GPMS Findings

Workshop Feedback

UX Co-Design

✔ **Robust, integrated quality assurance** application process

✔ Fine-grained **task-based navigation** options on the home page

✔ **Viewing their details** to ensure they're correct & up-to-date

✔ **Simple & easy online editing** of organisation details & key personnel details

✔ **Editing & submitting separate sections** as needed to change details (as opposed to a combined form flow)

✔ **Form requirements up-front**, including a clear outline of documents & information needed at the start, allowing users to collect what they need &/or collaborate with others, before tackling the form

✔ **Integrated guidance** in plain & simple language embedded in the digital forms

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Co-designers liked...

UX Co-design: GPMS Findings

Workshop Feedback

UX Co-Design

- Offer **form variations for different audiences** (e.g. provider sizes / scales / services) with appropriate governance, policy & procedure requirements

- Allow providers to **upload more comprehensive documents** (that cover text fields / sections of the application form, with clear document content requirements, etc.)

- Support **instructional text language** that caters for diverse audiences (e.g., small providers, culturally and linguistically diverse applicants, etc.)

- Clarify what's needed for the **Other Changes section** of a Material Change Form

- Merge **organisation details & provider details**

- Deliver **API integration** to streamline data handling (reduce copy & paste between systems)

- Surface the **roles & permissions** people in their organisation have, to be clear on *who can do what*

- Offer **digital workflows** to allow delegate/s to complete the form, PLUS **easy multi-person reviews**, BEFORE formal submission

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Co-designers suggested...
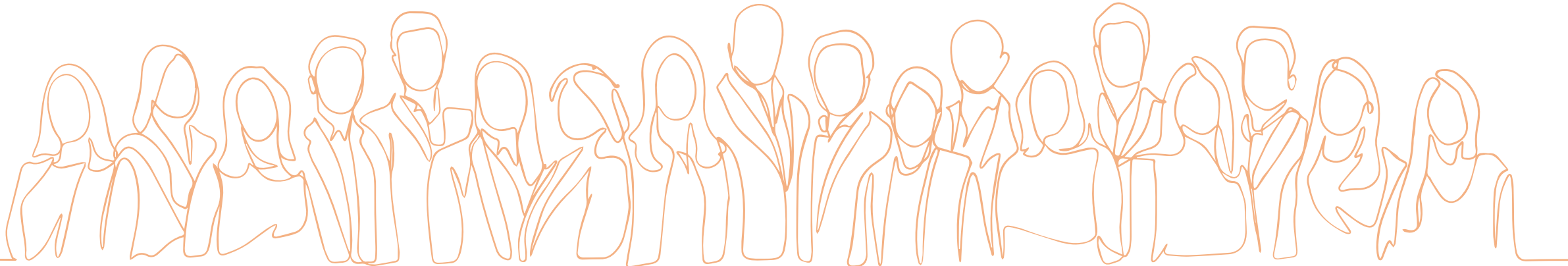
GPMS PROVIDER CO-DESIGN

Highlights July 2022

Aged Care Legislative Amendments

Mel Metz

Assistant Secretary | Quality and Assurance Division
Ageing and Aged Care Group | Department of Health and Aged Care

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Department of Health and Aged Care

Overview of Implementing Care Reform Bill

Schedule 1	Schedule 2	Schedule 3
Registered Nurses	**Capping home care charges**	**Transparency of information**
Rec. 86 Fulfills an election commitment	Fulfills an election commitment	Rec. 88 Fulfills an election commitment
The Schedule will require approved providers of residential care and kinds of flexible care specified in the *Quality of Care Principles 2014* to ensure that a registered nurse (within the meaning of the *Health Insurance Act 1973*) is on site and on duty at all times (that is, 24 hours each day, 7 days each week) at each residential facility they operate.	The Schedule introduces a power to cap charges that approved providers of home care can charge care recipients and removes the ability to charge exit amounts.	The Schedule will require the Secretary to publish certain information about aged care providers and their services that will be specified in subordinate legislation. It will including information about how much providers spend on care, nursing, food, maintenance, cleaning, administration and profits.

Overview of Royal Commission Response Act Measures

Schedule 1 Amendments relating to residential aged care funding (AN-ACC)	Schedule 2 Star Ratings	Schedule 3 Code of Conduct and banning orders	Schedule 4 Extension of incident management and reporting	Schedule 5 Governance of approved providers	Schedule 6 Enhanced information sharing and regulatory alignment of social care and support	Schedule 7 Increased financial and prudential oversight	Schedule 8 Changes to the functions of the Independent Hospital Pricing Authority to advise on aged care pricing	Schedule 9 Restrictive practices consent arrangements
Rec. 120	Rec. 24	Recs. 77 and 103	Rec. 100	Recs. 88, 89, 90	Noted importance of improved information sharing	Rec. 134	Recs. 6, 11, 115 & 139	Rec. 17
The Schedule amends the *Aged Care Act 1997* and the *Aged Care (Transitional Provisions) Act 1997* to link the calculation of each residents' subsidy to the Australian National Aged Care Classification (AN-ACC) level and turn off the Aged Care Funding Instrument (ACFI).	The Schedule provides a clear duty of the Secretary to publish Star Ratings for all residential aged care service providers. The Schedule also provides that no cause of action lies against the Commonwealth as a result of the publication of the information.	The measure provides the authority for a Code of Conduct (Code) to be established in legislation that will apply to all staff of approved providers of aged care. The measure also supports the development of an agreed and enforceable code of conduct for the care and support sector.	The measure extends the Serious Incident Reporting Scheme (SIRS) to in-home aged care services, including flexible care delivered in a home and community setting. The Bill also introduces new responsibilities for in-home care providers to manage and prevent incidents, and includes protections for whistle-blowers in this setting.	The Act introduces new governance responsibilities for approved providers regarding membership of their governing bodies, the establishment of new advisory bodies and measures to improve leadership & culture. It includes new reporting requirements to assist the public to understand the operations of providers.	Aligns regulation across the care and support sector – aged care, disability support (including the National Disability Insurance Scheme), and veterans' care – to improve quality and safety for consumers and participants while reducing the regulatory burden on cross-sector providers and workers.	This measure implements a component of phase 2 of the financial and prudential monitoring, compliance and intervention framework (framework) for the aged care sector. Phase 1 was implemented on 1 July 2021.	The measure amends the *National Health Reform Act 2011* and the *Aged Care Act 1997* to expand the functions of a renamed Independent Health and Aged Care Pricing Authority (Pricing Authority). It also includes new governance arrangements to reflect the expanded role.	The schedule amends the *Aged Care Act 1997* to allow for the giving of informed consent to the use of restrictive practices where a care recipient does not have capacity. This includes the authorisation of a person to consent on a care recipient's behalf.

Approach to the
Aged Care Digital Strategy

Jason Fraser

Assistant Secretary |Reform Implementation Division
Ageing and Aged Care Group | Department of Health and Aged Care

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DIGITAL
AGE

WHAT ARE THE KEY DRIVERS OF A DIGITAL AGE?

1 Act on Recommendation 109 of the Royal Commission into Aged Care Quality & Safety

2 Set a clear vision to 2030, not a list of activities but a broad narrative of a future state

3 Create a shared environment to start the complex work of guiding partners in aged care towards the future state
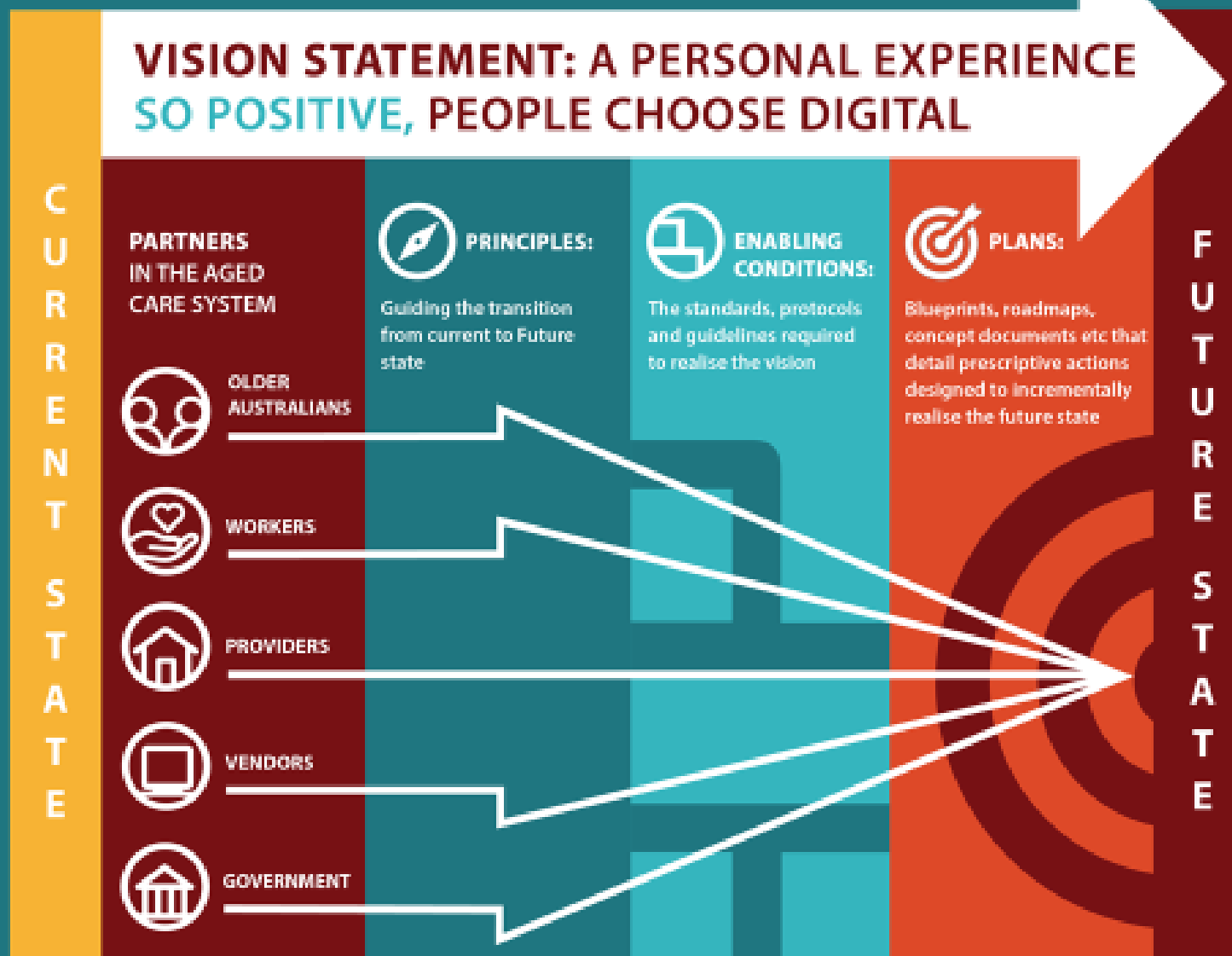
PURPOSE - WHY NOW?

TO SPARK TRANSFORMATION

The strategy sets a narrative to demonstrate to all partners in aged care that digital is a tool for improving service quality and therefore, the quality of life for older Australians.

In terms of digitalisation, every partner in aged care will start from a different point; and their journeys will each have different opportunities and challenges.

Everyone involved in aged care needs a unifying vision.

A vision clear enough to give direction and broad enough to turn individuals into partners, and effectively harnessing all efforts – large or small – to improve aged care services.

CURRENT STATE

VISION STATEMENT: A PERSONAL EXPERIENCE SO POSITIVE, PEOPLE CHOOSE DIGITAL

PARTNERS IN THE AGED CARE SYSTEM

PRINCIPLES:
Guiding the transition from current to Future state

ENABLING CONDITIONS:
The standards, protocols and guidelines required to realise the vision

PLANS:
Blueprints, roadmaps, concept documents etc that detail prescriptive actions designed to incrementally realise the future state

OLDER AUSTRALIANS

WORKERS

PROVIDERS

VENDORS

GOVERNMENT

FUTURE STATE

WHAT IS THE STRATEGY AIMING FOR?

TO TURN ACTORS INTO PARTNERS AND HARMONISE EFFORTS ACROSS THE SECTOR

PRINCIPLES

BENEFITS

Digital is knitted into the fabric of aged care, improving service reliability and trust

➤ Government services are more people-centred

Older Australians have well-supported, consistent and equitable access to the information and services they need

➤ Older people have their rights recognised, protected and upheld

New technology improves operations, meaning more time and effort is spent delivering quality services

➤ Providers are more efficient and effective

Digital transformation supports quality care and individual wellbeing above all else

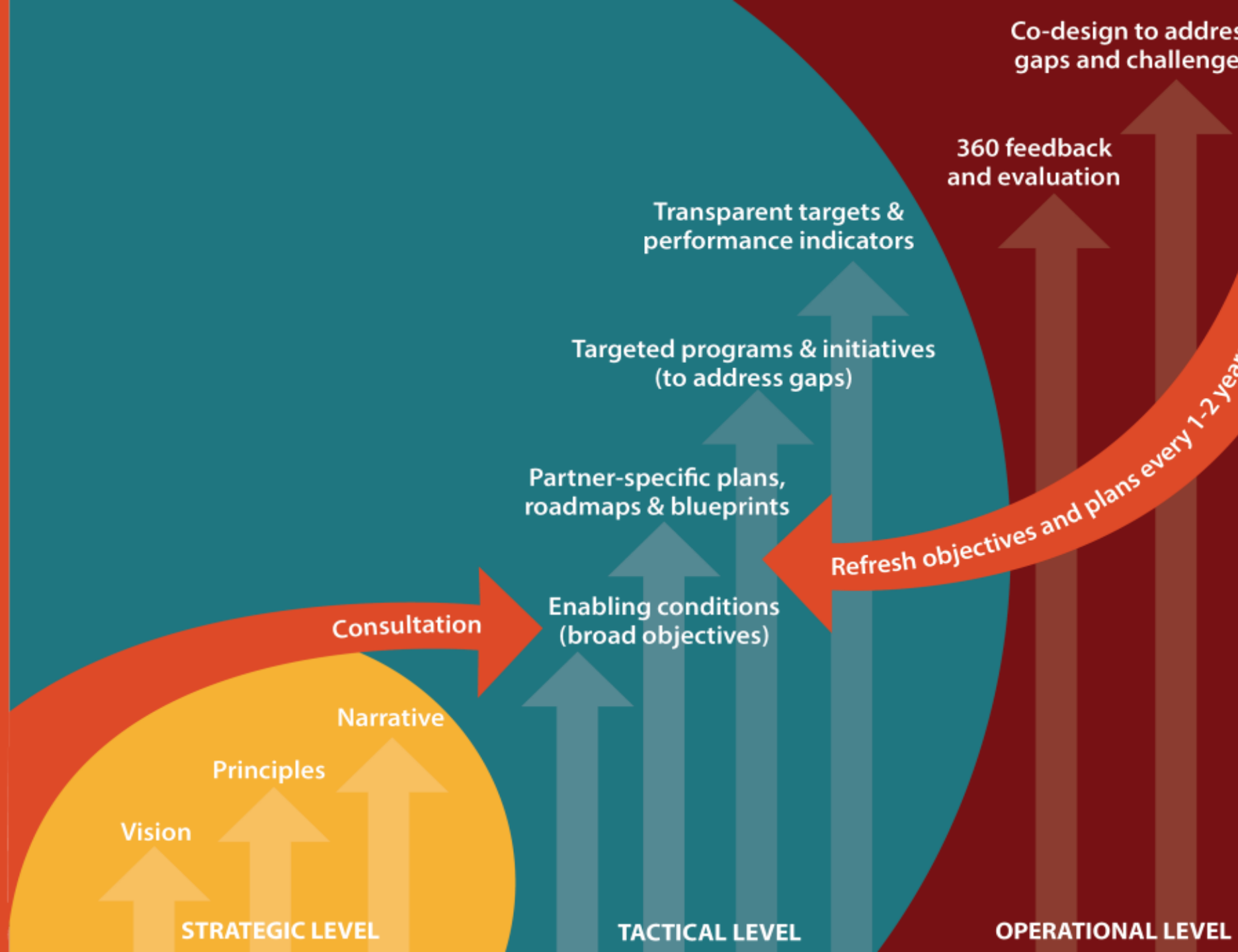➤ Workforce is empowered to deliver quality services

A thriving, open, competitive marketplace, designed in partnership to support digital solutions that meet the needs of all partners in aged care

➤ Vendors work to common protocols and standards, actively supporting interoperability and integration

HOW DO WE GET FROM VISION TO ACTION?

THE STRATEGY IS DESIGNED TO INFORM AND ALIGN EFFORTS OVER TIME

Co-design to address gaps and challenges

360 feedback and evaluation

Transparent targets & performance indicators

Targeted programs & initiatives (to address gaps)

Partner-specific plans, roadmaps & blueprints

Refresh objectives and plans every 1-2 years

Enabling conditions (broad objectives)

Consultation

Narrative

Principles

Vision

STRATEGIC LEVEL

TACTICAL LEVEL

OPERATIONAL LEVEL
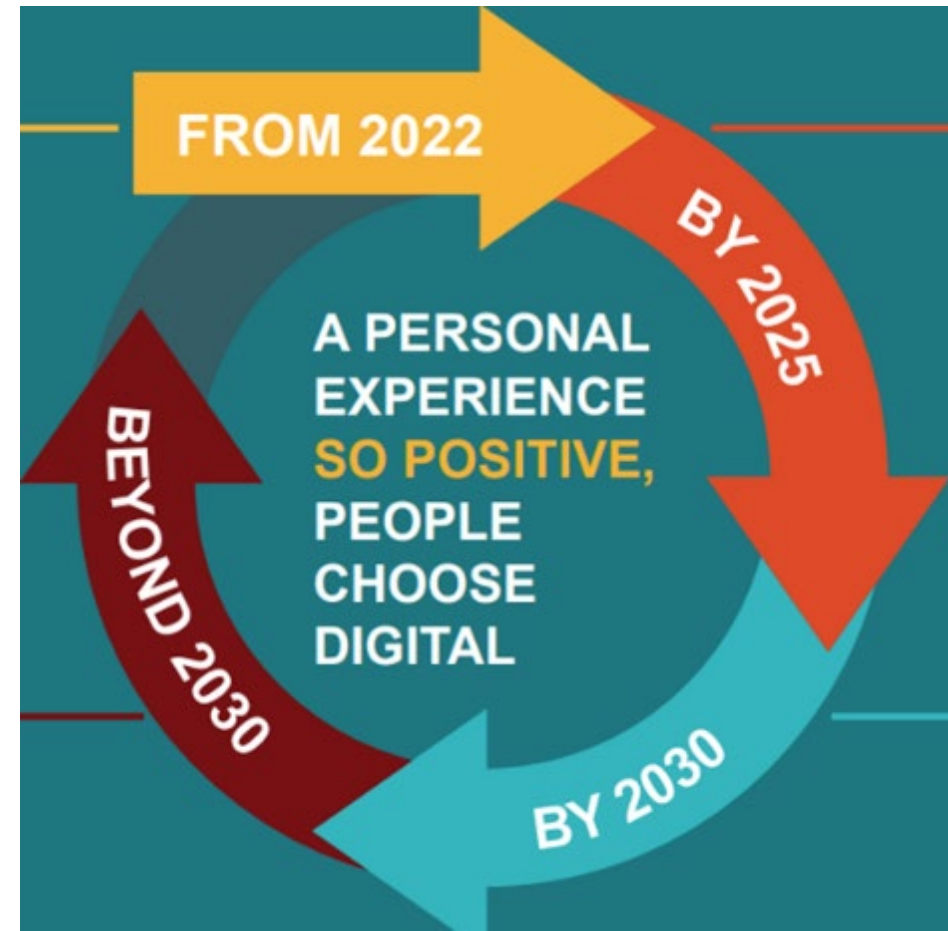
Our Questions for you

1. What do you consider would be the most significant barriers and success factors for the digital strategy?

2. What outcomes do you think are most important to a digital strategy?

Contact our Team via our Group Mailbox

Digital Reform Strategy & Engagement Team

DigitalReformStrat@Health.gov.au

Thank You

Connecting Australian Health Care:
National Healthcare Interoperability Plan

Herbert Down

Branch Manager
Clinical and Digital Health Standards Governance | Australian Digital Health Agency

Australian Government
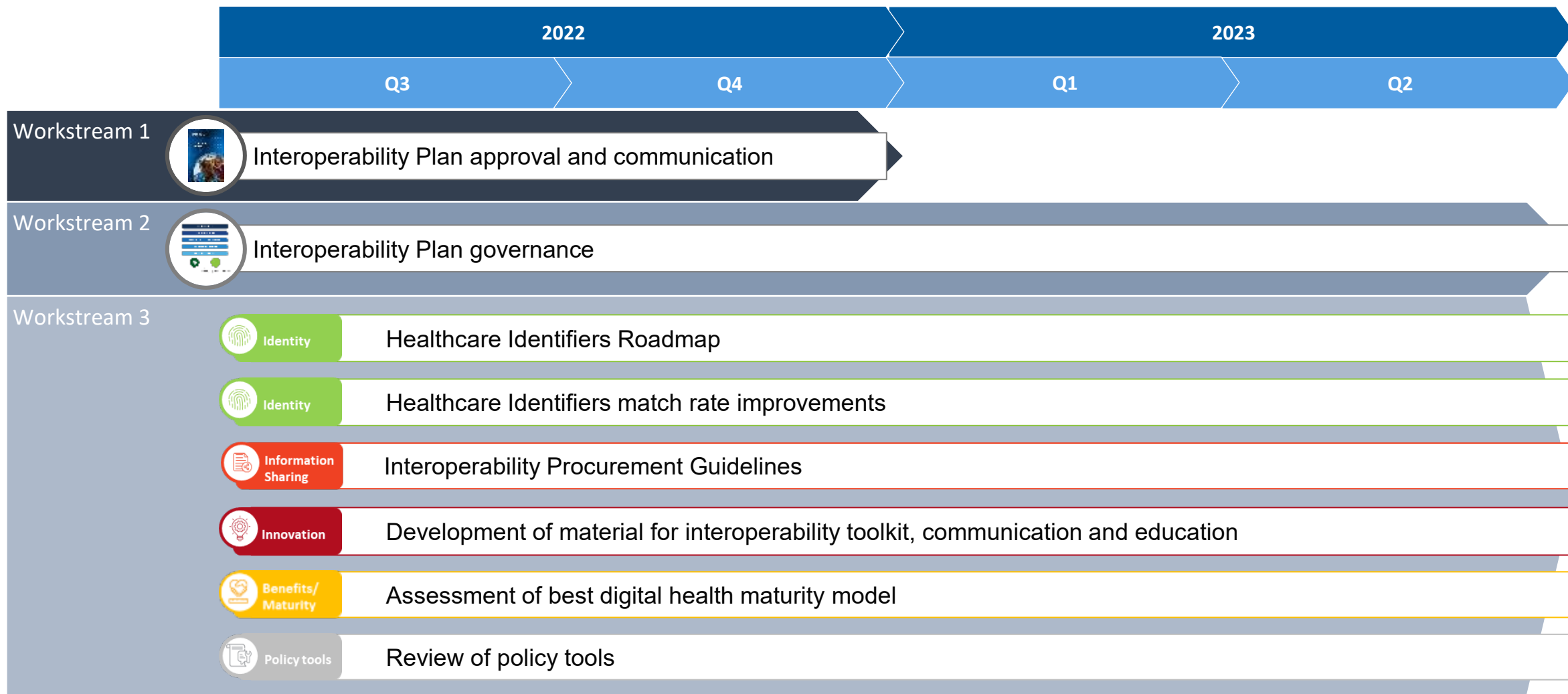**Department of Health and Aged Care**

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Connecting Australian Health Care

National Healthcare Interoperability Plan

Building a Connected Healthcare System
Interoperability Implementation Work Plan FY 22-23

	2022		2023	
	Q3	Q4	Q1	Q2

Workstream 1 — Interoperability Plan approval and communication

Workstream 2 — Interoperability Plan governance

Workstream 3

Identity	Healthcare Identifiers Roadmap
Identity	Healthcare Identifiers match rate improvements
Information Sharing	Interoperability Procurement Guidelines
Innovation	Development of material for interoperability toolkit, communication and education
Benefits/Maturity	Assessment of best digital health maturity model
Policy tools	Review of policy tools

Digital Health & Aged Care Standards

- Agency role to enable and engage
- Vibrant standards development ecosystem
- Critical enabler for interoperability

Key Activities 2021/22

Stakeholder Engagement · Collaboration · Guiding Principles · Standards Catalogue

Question
Time

In Closing

Visit the **Digital Transformation** page
on the Health website

Email us at **DTDOffice@health.gov.au**

Take the **Event Survey**