

NEHTA Strategic Plan Refresh 2011/2012

Table of Contents

- Introduction
- Guiding Principles
- Vision, Purpose and Mission
- Strategic Plan Review
- Dependency Map
- Appendix



e_{Health}

Introduction

- The National E-Health Transition Authority (NEHTA) was established in July 2005 as a collaborative enterprise by the Australian Commonwealth, State and Territory governments to identify and develop the necessary foundations for eHealth.
- This strategic plan articulates how NEHTA will continue to develop and progress the national infrastructure and adoption support required for eHealth in Australia, as mandated and funded by the Council of Australian Governments (COAG)
- In addition, in 2010 the Commonwealth Government approved the development of the Personally Controlled Electronic Health Record (PCEHR), and allocated funding to deliver a PCEHR by July 2012. NEHTA has been contracted as a managing agent on behalf of DoHA. This is in relation to contracts and agreements for: National Infrastructure Partner/s; National Change and Adoption Partner; Benefits Evaluation Partner; and eHealth Sites.
- NEHTA's Strategic Plan describes the COAG funded milestones achieved to date, the work planned to progress the key eHealth foundations and initiatives for the remaining period of NEHTA's current COAG funding, the targets and activities required to deliver components of the PCEHR, and NEHTA's role in accelerating the adoption and further progression of eHealth in Australia into the future.

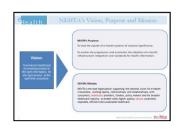


NEHTA Strategic Plan Refresh - DRAFT Strategy NEHTA Ref Group Summit- 4th November 2010

Strategic Plan Structure









Introduction:

- Building on the previous strategy
- · Catalyst for refresh
- Reflect the progression of the organisation
- NFHTA's new mandate

Guiding Principles

- New addition to the strategy document
- A set of principles called out "up front" in the strategy to articulate how NEHTA will go about its business
- Guiding principles are inherent in ALL activities NEHTA undertakes

Vision, Purpose and Mission

- Vision: the end goal of the organisation
- Purpose: what NEHTA has set out to do
- Mission: how NEHTA will go about it.

Strategy Map and Initiatives

- High level strategy map communicating the 5 priorities and underlying initiatives
- Supported by detailed initiative cards and dependency map



Table of Contents

- Introduction
- Guiding Principles
- Vision, Purpose and Mission
- Strategic Plan Review
- Dependency Map
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Guiding Principles

- **1. Expedite delivery** of benefits by leveraging existing initiatives within the health system.
- 2. Ensure a **collaborative and consultative approach** to programme delivery with all stakeholders including, but not limited to consumers, clinicians and industry.
- 3. Support 'lead site' adoption but **maintain a national eHealth focus**. NEHTA will collaborate with early adopter sites in order to formulate direction for the national adoption of eHealth.
- 4. Realise delivery through a **benefits driven approach, evaluating** against target benefits. The intent is to successfully promote clinician, consumer and vendor adoption, with confidence that solutions are fit for purpose and promote high quality care.
- **5. Deliver Governments' remit** which requires NEHTA to consult with and support other departments or organisations, in areas which may not fall under NEHTA's mandate.
- **6. Remain at the forefront of legislation, policy, and standards development** related to eHealth. This will require NEHTA to contribute to and observe lessons from the national and international eHealth community, and to drive the development of national and international standards across eHealth initiatives.
- 7. Foster **architectural assurance and strive for innovative solutions,** supporting the marketplace to deliver innovation in health IT.
- 8. Work with industry to establish **products that are standards based** and support the delivery of an industry based **conformance, compliance and accreditation** function for health standards, in line with the CCA consensus statement.
- 9. Manage the contracted deliverables between NEHTA (on behalf of all Australian Governments) and other entities.
- 10. Bring together managerial, clinical and technical expertise in order to deliver on the remit, maintaining privacy, patient safety and quality of healthcare at the forefront of delivery.



Table of Contents

- Introduction
- **Guiding Principles**
- Vision, Purpose and Mission
- Strategic Plan Review
- **Dependency Map**
- **Appendix**





NEHTA's Vision, Purpose and Mission

To lead the uptake of eHealth solutions of national significance.

To enable the progression and accelerate the adoption of eHealth through infrastructure integration and standards for health information.

Vision:

To enhance healthcare by enabling access to the right information, for the right person, at the right time and place.

NEHTA's Mission:

NEHTA's Purpose:

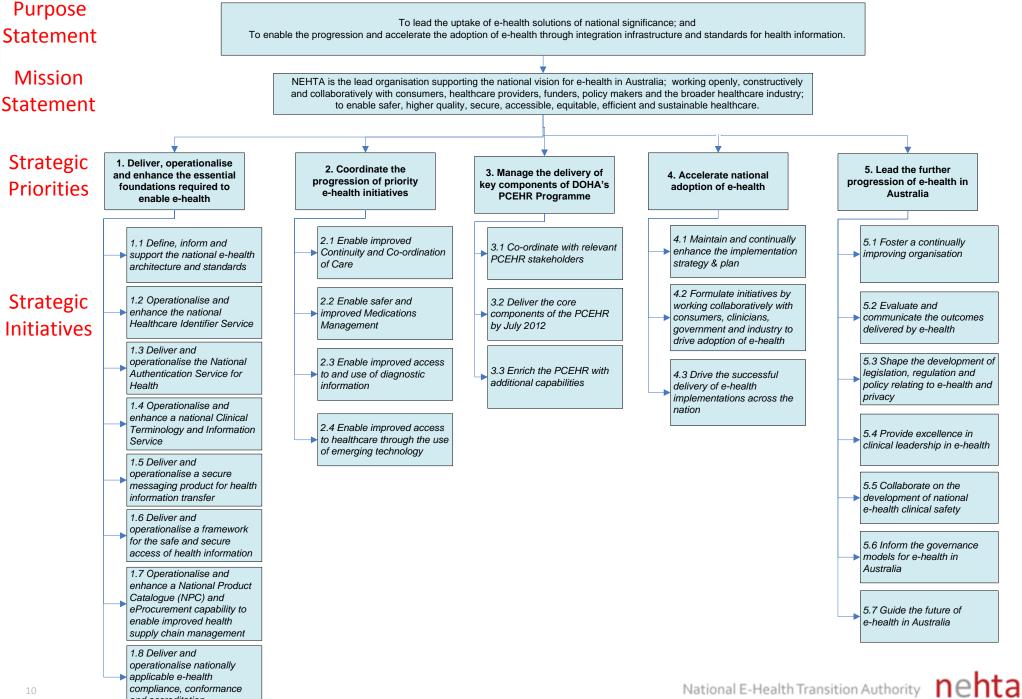
NEHTA is the lead organisation supporting the national vision for eHealth in Australia; working openly, constructively and collaboratively with consumers, healthcare providers, funders, policy makers and the broader healthcare industry; to enable safer, higher quality, secure, accessible, equitable, efficient and sustainable healthcare.



Table of Contents

- Introduction
- **Guiding Principles**
- Vision, Purpose and Mission
- Strategic Plan Review
- **Dependency Map**
- **Appendix**





and accreditation

e_{Health}

Strategic Priority 1

Deliver, operationalise and enhance the essential foundations required to enable e-health

- 1.1 Define, inform and support the national e-health architecture and standards
- 1.2 Operationalise and enhance the national Healthcare Identifier Service
- 1.3 Deliver and operationalise the National Authentication Service for Health
- 1.4 Operationalise and enhance a national Clinical Terminology and Information Service
- 1.5 Deliver and operationalise a secure messaging product for health information transfer
- 1.6 Deliver and operationalise a framework for the safe and secure access of health information
- 1.7 Operationalise and enhance a National Product Catalogue (NPC) and eProcurement capability to enable improved health supply chain management
- 1.8 Deliver and operationalise nationally applicable e-health compliance, conformance and accreditation

Strategic priority 1 – Deliver, operationalise and enhance the essential foundations required to enable eHealth

Description

- This strategic priority is of similar structure to NEHTA's previous strategic plan.
- It articulates the need to continue development and implementation of the NEHTA foundation services which will form the backbone of Australia's eHealth system.

Rationale

- The National eHealth Strategy outlined a number of recommended work streams to streamline the development of eHealth in Australia. This strategic priority is closely linked to the "Foundations" work stream outlined in the Strategy, and demonstrates how NEHTA will support its development.
- The focus of this priority has shifted slightly from the previous strategic plan – over the course of time certain NEHTA foundations have been developed, such as key Healthcare Identifiers. Where relevant, the focus of these strategic initiatives is to enhance and ensure the efficient operations of the service (rather than design and build).





Strategic Priority 1 – Milestones to date

Strategic Initiative	Milestones to date	
1.1	September 2009	Improved adoption of NEHTA specifications through contribution to the development of standards with Standards Australia for Electronic Transfer of Prescriptions (ETP), e-Discharge and e-Referrals.
1.1	October 2010	Initiation of Architecture for PCEHR
1.2	July 2010	Healthcare Identifiers Legislation passed, all individuals assigned with a HI number and initial service live.
1.2	December 2010	Full Healthcare Identifiers Service goes live
1.3	September 2010	Issue of competitive tender to industry or delivery partner of NASH
1.4	November 2009	First national release of SNOMED CT-AU
1.4	June 2010	International first - release of IHTSDO - SNOMED Release Format 2 standard compliant product (SNOMED CT-AU)
1.4	July 2010	First release of nationally endorsed Emergency Department reference sets
1.4	August 2010	First state based implementation of Australian Medicines Terminology (AMT) Product
1.4	November 2010	Third SNOMED CT-AU release
1.5	March 2010	Secure messaging technical specifications published by Standards Australia





Strategic Priority 1 – Milestones to date

Strategic Initiative	Milestones to date	
1.6	March 2010	SAF Project initiated
1.7	June 2009	Private Sector such as Ramsay Health Care, Symbion Pharmacy Services and Clifford Hallam Healthcare (CH2) sign up for the NPC
1.7	March 2010	Launch of GS1 Locatenet, a central Location repository incorporating GLNs and standardised location information, to support the NPC
1.7	September 2010	Release of the first Message Implementation Guidelines (MIG) in collaboration with WA Health, Health Corporate Network (HCN)
1.7	October 2010	Master Catalogue Information Solution (MCIS) piloted with ACT Health
1.8	January 2010	Certification options paper released publicly for comment.
1.8	October 2010	Interim vendor conformance checklist to support early development in HI services.
1.8	December 2010	Test labs accredited to test software vendors conformance for Healthcare Identifiers service and Secure Messaging.





1.1 Define, inform and support the national eHealth architecture and standards

Description

Summary:

As the lead organisation supporting the national vision for eHealth it is essential that NEHTA articulate the end-to-end application of eHealth solutions in the health system, incorporating a layered approach to interoperability with technology-specific integration. This is required in order to communicate the broader activity around eHealth nationally, demonstrate how seemingly isolated technology projects integrate, and explain how these eHealth applications will form a foundation for improved access to trusted health information and a PCEHR. Seamless flow of information across the health sector is essential to healthcare delivery and reform in the future. Nationally defined standards, and their adoption within products developed by industry, will help instil confidence that products are fit for purpose, and are interoperable across healthcare providers.

Actions:

- 1. Highlight how eHealth foundations and solution projects will contribute to an eventual PCEHR for Australia through high-level eHealth architectures and blueprints;
- 2. Determine the "baseline architecture" (business and technical) for the implementation and development of eHealth solutions and a PCEHR;
- 3. Define the information model which underpins the information exchange across the health sector;
- 4. Consolidate and communicate national requirements for standards; identify, agree and recommend which standards are appropriate for adoption in Australia;
- 5. Influence the strategic direction and governance of Standards Development Organisations (SDO) through membership in Standards Australia and other relevant SDOs, including the International Health Terminology Standards Development Organisation (IHTSDO) and Health Level 7 (HL7); and
- 6. Ensure that NEHTA-developed specifications are progressed through Standards Australia to become national standards where appropriate, with support provided for their adoption and utilisation in industry.

Rationale:

Defining the landscape and overall end-to-end application of eHealth is essential to ensure that solutions across industry, healthcare sectors and geographical boundaries all work collaboratively and toward a common goal. The current Australian eHealth landscape is characterised by very strong support and enthusiasm for national action. By advocating for a national consistency, through robust architecture and standards, NEHTA will be able to reduce the risk of continuing complexity and the inefficiencies that flow from the large number of discrete eHealth initiatives simultaneously occurring across the health sector.

Owner:

Head of Architecture



1.1 Define, inform and support the national eHealth architecture and standards

Critical Success Factors

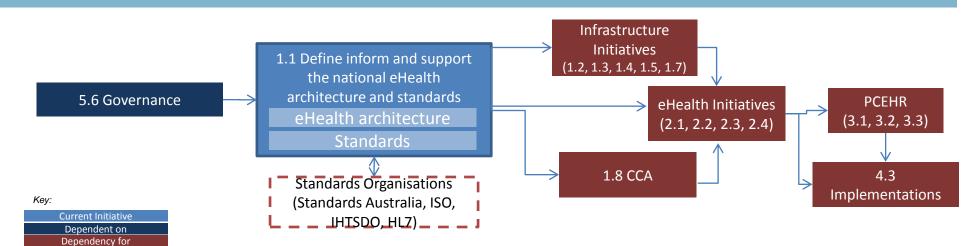
Summary:

- Suitable engagement support to address critical stakeholders on the issues present in this work activity and suitably skilled resources to conduct the work effort;
- Improved adoption of NEHTA specifications through contribution to the development of Australian Standards and Australian
 Technical Specifications with Standards Australia for message content and message format within NEHTA products;
- Contribution to the delivery of an international standards development working group meeting (HL7) in January 2011 in Sydney;
- Reduce variability in standards implementation by specifying and profiling key standards and developing guidelines for implementation. Standards adopted should be consistent with international standards and Australian variations are developed only when required;
- Increased awareness and training for NEHTA staff of international standards (HL7) and IHE to support product development alignment; and
- Periodic review of the NEHTA Standards Catalogue to ensure that it remains current and relevant to stakeholders.

Dependencies Map

External dependency

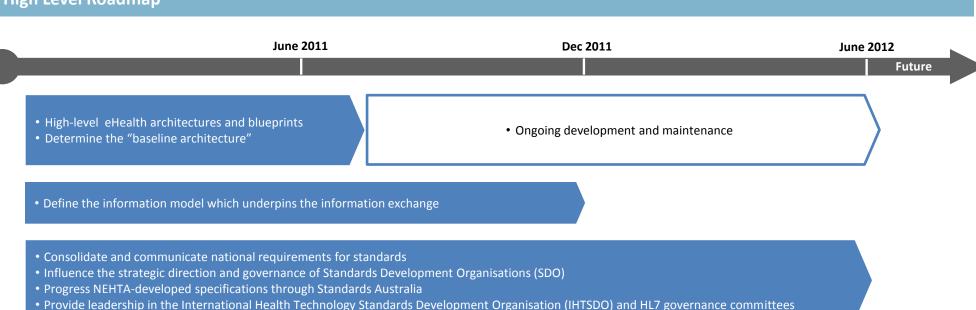
Direction of dependency





1.1 Define, inform and support the national eHealth architecture and standards





Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.2 Operationalise and enhance the national Healthcare Identifiers service

Description			
Summary:	The Health Identifier (HI) Service is a national system for supporting unique identification of healthcare providers (individuals and organisations) and consumers. Unique identification by the HI service will be a cornerstone of appropriate clinical communication between clinicians. The HI Service operates in conjunction with authentication infrastructure and complies with international 'best practice' for information security.		
Actions:	 Implement the HI service for limited distribution channels in the public and private sector, validating that the service is fit for purpose; Support the subsequent widespread adoption of the HI service through the development of HI implementation collateral to support future collaborations and implementation of the HI service; Increase distribution channels for the HI service once operational to enable full on-line support through delivery of the HI Service Channel Enhancement Project; Enhance the HI service based on learning from early implementations of the HI service and new legislative requirements; and Collaborate with the operator of the HI service to help optimise and improve HI operations. 		
Rationale:	Healthcare Identifiers are a key enabler for delivering eHealth solutions in Australia. Although, the HI service has been built there is an ongoing need for NEHTA and its partners to operationalise and enhance these services, which will require significant focus across the next 12-18 months.		
Owner:	Head of Product and Solutions Development (Build) Head of Policy and Information Services (Run) Note: handover of responsibility for this Strategic Initiative will be agreed between these two Executives, and a handover time formalised		





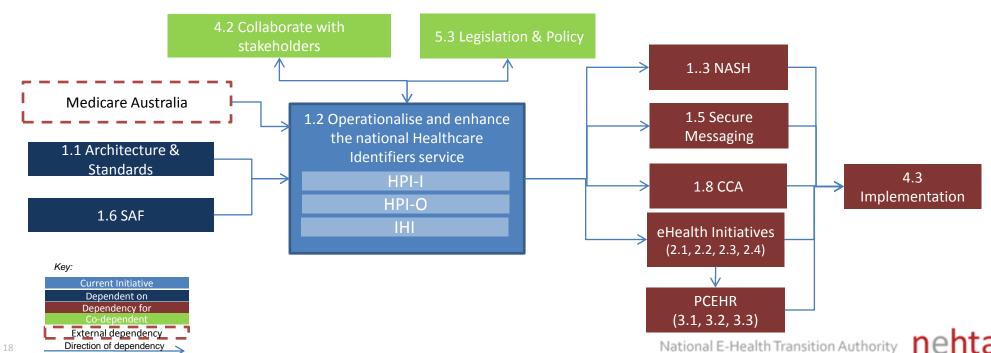
1.2 Operationalise and enhance the national Healthcare Identifiers service

Critical Success Factors

Summary:

- Public sector implementation project sponsorship, resources and funding;
- Private sector adoption programmes such as Practice Incentive programme (PIP) to drive uptake;
- Trust in the HI service and identifiers with stakeholders;
- Legislation and Regulatory Framework to support HI service enacted;
- In some cases, appropriate 'bundling' of HI service with other foundations and eHealth solutions in order to help optimise rates of adoption;
- HI service operator appropriately funded and staffed in support of demand.

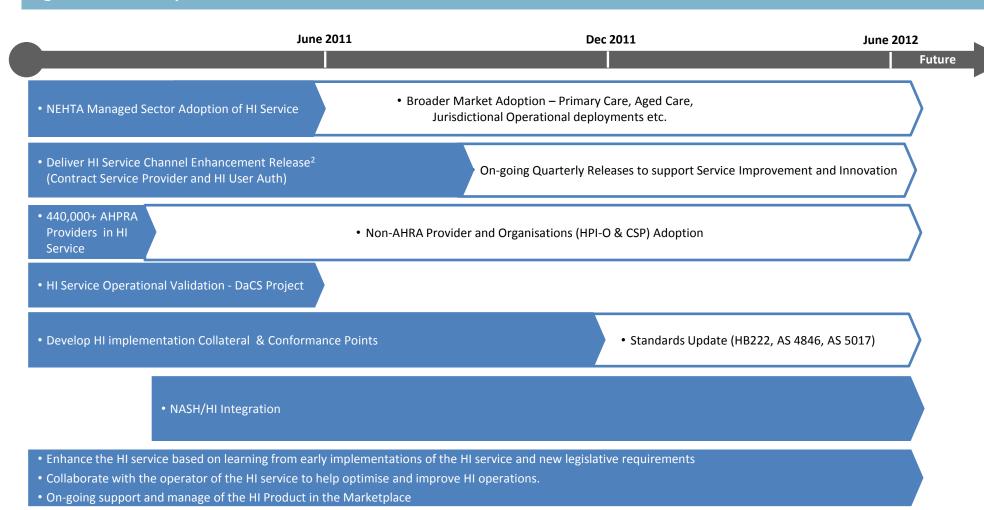
Dependencies Map





1.2 Operationalise and enhance the national Healthcare Identifiers service

High Level Roadmap¹



Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.3 Deliver and operationalise the National Authentication Service for Health (NASH)

Description

Summary:

The National Authentication Service for Health (NASH) will deliver a nationwide authentication service for healthcare organisations and providers. NEHTA, through NASH, will support the introduction of a new range of eHealth identifiers, driven by a common approach to the registration of healthcare professionals through the National Registration and Accreditation Scheme (NRAS). NASH will also support the broader adoption of authentication services in local health communities. NASH will ensure delivery of the required digital certificate formats and policies, PKI services, a set of national standards for authentication certificates and authentication media such as smartcards, mobile phone or USB device, an upgraded authentication platform, a management system for centrally issued devices, and a vendor support programme.

Actions:

- 1. Define NASH governance framework and decision making model;
- 2. Develop token management standards to enable eHealth software vendors, jurisdictions, organisations and communities-of-interest to source NASH compatible tokens;
- 3. Develop service catalogue as a central point of communication for all authentication services available to HI, software vendors, jurisdictions, organisations and communities-of-interest;
- 4. Define limited availability credential management service;
- 5. Define NASH governance authority and framework;
- 6. Develop high-level design of token management services;
- 7. Establish Service Catalogue for business services where available;
- 8. Define production service capability for credential management services to support digital certificates for eHealth, certificates for healthcare identifiers (HPI-O and HPI-I) to implement onto existing tokens;
- 9. Define service desk capability for credential management services; and
- 10. Define token or smartcard for co-existence between eHealth and e-business environments.

Rationale:

As significant amounts of sensitive and personal information are being sent electronically around the globe, there is a need to guarantee the authenticity and validity of the information that is being exchanged. In the case of personal health information, there is an even greater imperative to ensure that information is collected and securely exchanged. The National Authentication Service for Health (NASH) will provide the necessary strong authentication for the healthcare sector.

Owner:

Head of Product and Solutions Development (Build)



1.3 Deliver and operationalise the National Authentication Service for Health (NASH)

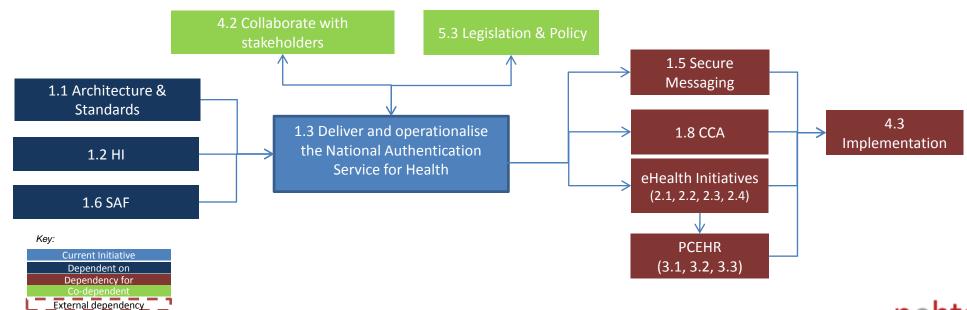
Critical Success Factors

Summary:

- Effective governance;
- Communications and implementation plans with participation and buy-in from the sector;
- Clear direction on progressing NASH design and build from the NEHTA Board;
- Successful management of NASH delivery partners; and
- Public and private sector implementation project sponsorship, resources and funding.

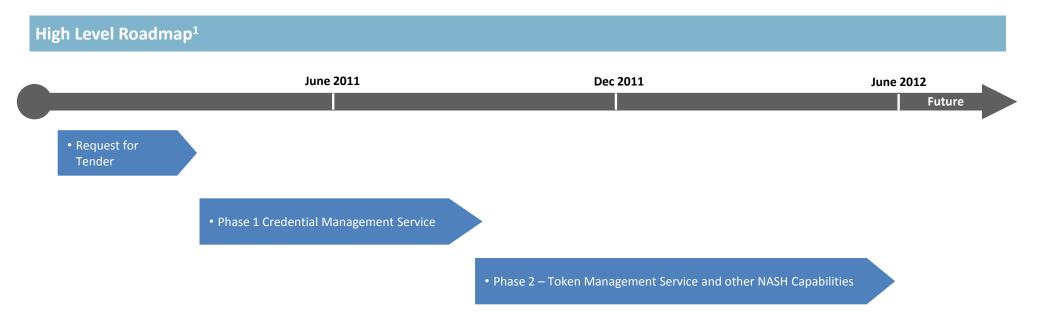
Dependencies Map

Direction of dependency





1.3 Deliver and operationalise the National Authentication Service for Health (NASH)



Notes:

1. Roadmap / timeline is indicative only. Contractual discussions / decisions will re-shape this roadmap. Further business and implementation planning is required to refine scope and timing of Actions. National E-Health Transition Authority



1.4 Operationalise and enhance a National Clinical Terminology and Information Service (NCTIS)

Description			
Summary:	The National Clinical Terminology and Information Service (NCTIS) delivers products and services to meet the eHealth requirements of the Australian healthcare community, and support the interoperability of Clinical Information between Clinical systems. This primarily encompasses providing products that define the representation of Clinical Concepts via the definition of the Clinical Information structures within Clinical systems and the Clinical language (Terminology) that populate those Clinical Information structures. NCTIS will support NEHTA in the adoption and implementation of clinical terminology and information products across the health sector.		
Actions:	 Continued development, integration and delivery of clinical terminology and information products and services to fulfil the priority eHealth requirements & solutions including, Continuity and Co-ordination of Care, Medications Management and Diagnostic information along with the PCEHR; Delivery of applications and systems to support the development and production of the Information and Terminology products and enable the eHealth community to contribute; Provision of Implementation support to the healthcare community for the full range of Clinical Terminology and Information products; Collaboration with the broad healthcare community to enable them to guide and contribute to the development of terminology and information content; Engagement with the healthcare community to drive adoption by increasing awareness and understanding of the benefits of terminology and information products. 		
Rationale:	The delivery of a standard clinical representation for such clinical concepts along with an appropriate clinical language for use across health information systems can be a significant step towards improving the quality and safety of healthcare, by enabling unambiguous communication and interpretation across different healthcare settings.		
Owner:	Head of Policy and Information Services		





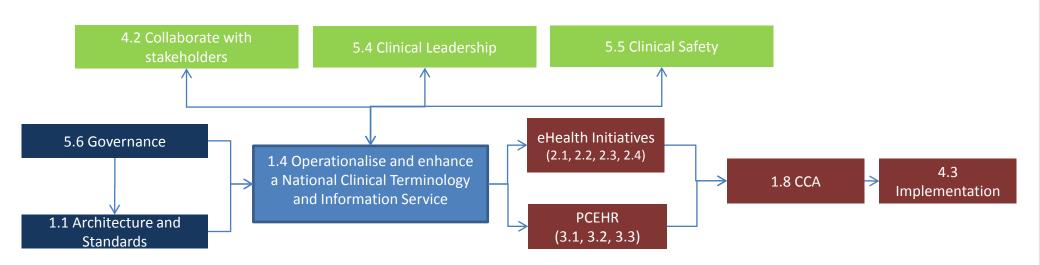
1.4 Operationalise and enhance a National Clinical Terminology and Information Service (NCTIS)

Critical Success Factors

Summary:

- NCTIS is able to and does deliver products to customers on time and to quality;
- Customers are confident and satisfied with the products delivered by NCTIS;
- NCTIS Products meet the requirements of priority eHealth solutions,
- Measurable increase in the use of NCTIS products and services;
- Increased understanding of NCTIS's products by healthcare community, including jurisdictions, peak bodies and vendors.

Dependencies Map

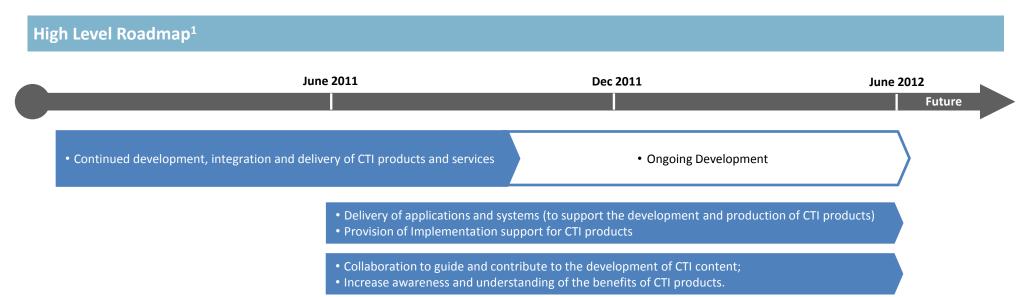








1.4 Operationalise and enhance a National Clinical Terminology and Information Service (NCTIS)



Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.5 Operationalise and enhance a secure messaging product for health information transfer

Description

Summary:

eHealth combines the basic technologies of unique identification, authorisation and message security to provide the safest and optimally secure method of exchanging healthcare information. These technologies, known collectively as secure messaging, ensure that the health information exchanged by healthcare providers is protected against malicious interference.

NEHTA is working with the medical software industry to develop specifications and standards for secure messaging for healthcare providers.

Actions:

- 1. Implementation support to software providers and jurisdictions of secure message delivery (SMD) specifications (delivered in the 2009/10 work programme) allowing exchange of messages between healthcare organisations irrespective of which secure messaging products they use;
- 2. Deliver and release an improved design of the End-point Locator Service (ELS) to better align with industry standards and the proposed Provider Directory Service enabling higher levels of adoption by the healthcare community; and
- 3. Delivery of secure message specification components for the following NEHTA products:
 - Continuity of care;
 - Medications management; and
 - Diagnostics.
 - 4. Support to the NEHTA and PC-EHR implementation capabilities with a secure messaging test harness and associated business collateral.

Rationale:

Currently, applications used by healthcare providers are not able to communicate consistently and effectively across organisational boundaries with other applications in a way that supports the specific clinical processes involved.

Owner:

Head of Product and Solutions Development (Build)





1.5 Operationalise and enhance a secure messaging product for health information transfer

Critical Success Factors

Summary:

- National identifiers for software service providers and access to national identifiers for Healthcare Provider Organisations operated by Medicare;
- Operation of the NASH and deployment of associated public key infrastructure (PKI) certificates;
- Incentives for adoption of SMD in 2011 Practice Incentives programme (PIP) provided by DOHA;
- Collaborative engagement with NEHTA by the medical software industry and standards community;
- Collaborative engagement with NEHTA by jurisdictions, pathology labs and other stakeholders;
- Development of test harness and conformance testing of SMD implementations provided by independent National Association of Testing Authorities (NATA) accredited test laboratories; and
- Availability of appropriately skilled resources among external implementers.

Dependencies Map

Dependency for Co-dependent External dependency

Direction of dependency





1.5 Operationalise and enhance a secure messaging product for health information transfer

High Level Roadmap¹ June 2011 **Dec 2011** June 2012 **Future** • Implementation support to software providers and jurisdictions of secure Ongoing Support message delivery (SMD) specifications • Deliver and release an improved design of the **Endpoint Location Service (ELS)** • Deliver endpoint specifications for Continuity of Care • Deliver endpoint specifications for PCEHR • Deliver endpoint specification for Medications Management • Deliver endpoint specifications for Diagnostics Programmes • Support implementation capabilities with test harnesses and associated business collateral

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.6 Deliver and operationalise a framework for the safe and secure access of health information

Description

Summary:

The Security and Access Framework (SAF) is a project that will provide a framework to enable a Network of Trust between all participants in a patient's healthcare journey. The SAF provides a standardised and repeatable approach, supported by tools, enabling the making of access decisions and describing the approach to security and access to be taken when designing and implementing eHealth solutions. SAF provides a series of principles to guide, ask and answer questions about the controls required to establish a trusted healthcare information network. SAF informs guideline rules to build eHealth solutions in Australia. SAF is not the "security solution" to any eHealth solution, but is a tool that can be used by any organisation wishing to build or deploy an eHealth capability.

Actions:

- 1. Delivery of SAF, including public consultation and 'proof of concept' projects to test and further evolve the SAF;
- 2. Provide guidance for legislative reform supporting privacy and security policies that enable eHealth infrastructure, solutions, and work practices;
- 3. Evaluate the need and potentially build national security services infrastructure to support eHealth solutions;
- 4. Refinement of the NEHTA work programme to embed SAF conformance requirements (once developed) into NEHTA products and services;
- 5. Establish governance structures and processes for ongoing management of and compliance to the SAF;
- 6. Provide implementation and operational support for the adoption and use of the SAF (including guidance on different implementation scenarios and governance of SAF in operations).

Rationale:

NEHTA is leading the development of a nationally endorsed security and access framework (SAF) for eHealth in Australia. The SAF is critical for eHealth: organisations will be able to adopt a security architecture that meets their local needs provided it complies with SAF.

This network of trust stems from people having confidence in the system's content, in their ability to appropriately access data held by these systems and solutions, and knowledge that the data is held privately, in line with patient wishes and clinical needs.

The initial version of the SAF has been prepared to support 'proof of concept' projects that will seek to adhere the SAF. Significant work is required over the next 12+ months to allow SAF to be road tested during 'proof of concept' projects to see whether the right controls have been set. NEHTA will then need to ensure appropriate governance processes are in place for the SAF to be used by eHealth projects (e.g. PCEHR) to ensure appropriate SAF profile are in place

Owner:

Head of Architecture





1.6 Deliver and operationalise a framework for the safe and secure access of health information

Critical Success Factors

Summary:

- Timely stakeholder engagement to ensure that an appropriate SAF is developed. This includes consumer and clinician input;
- Process of public consultation to further refine the SAF;
- Recognition that there are various starting points the SAF must enable migration to the adoption of SAF rules over time;
- Appropriate positioning of the SAF with key groups. The SAF must leverage appropriate international and national standards, concepts, policies, legislation, etc. It must also sit along side appropriate clinical guidelines (e.g. RACGP guidelines) to inform development of SAF compliant eHealth solutions;
- Timely establishment of appropriate governance structures and processes for ongoing management of and compliance to the SAF.

Dependencies Map







1.6 Deliver and operationalise a framework for the safe and secure access of health information

High Level Roadmap¹

June 2011 Dec 2011 June 2012
Future

- Deliver SAF, including public consultation and 'proof of concept' projects to test and further evolve the SAF;
- Provide guidance for legislative reform supporting privacy and security policies
- Refine NEHTA work programme to embed SAF conformance requirements
- Evaluate the need and potentially build national security services infrastructure to support eHealth solutions
- Establish governance structures and processes for ongoing management of and compliance to the SAF
- Provide implementation and operational support for the adoption and use of the SAF

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.7 Operationalise and enhance the National Product Catalogue (NPC) and NEHTA eProcurement solution

Description

Summary:

Improving the supply chain process in Australia's healthcare sector will enhance patient outcomes by ensuring that the right product is available at the right time in the right place. A major component of this programme is the establishment and population of the NPC, a central electronic repository of all medical products that is shaped and maintained by suppliers. This catalogue will be the primary foundation of current, standardised and synchronised, clinically relevant product and price data that will form the basis for further components of the supply chain programme including eProcurement and business intelligence.

Actions:

- Continue to provide a single NPC for the procurement of medicines, medical devices and healthcare products, to ensure 1. consistency of information across all organisations, utilising the same source of information;
- Deliver a standardised method for eProcurement utilising data loaded onto the NPC. This will further reduce the chance of 2. introducing erroneous data into procurement transactions and the costs these cause across the eHealth sector. This involves:
 - Development of a 'sand box' environment for suppliers/solution providers to self-assess their messaging readiness; a.
 - b. Message Implementation Guidelines (MIG) to provide upfront specifications for suppliers to meet jurisdictional specific business requirements when it comes to message exchange; and
 - Implementation support for certification processes to ensure compliance with the NEHTA eProcurement specifications by jurisdictions and solution providers.
- Implement a standardised tender process for tender submission utilising data loaded onto the NPC across organisations. This will 3. reduce the duplicated effort required from suppliers when responding to tenders and significantly increase the quality of data for tender evaluation:
- Increase the population of the NPC and enhancements to product information to improve information flow, interoperability and 4. to reduce manual intervention in healthcare supply chains;
- Pilot the Master Catalogue Information Solution (MCIS); establishing core capability across jurisdictions in accessing NPC data; and 5.
- Improve clinical information management leading to reductions in product identification errors through the delivery of supply 6. chain solutions for bar-coding, RFID, product recall, product track and trace and regulations for identification and data standards in supply chain with the Therapeutic Goods Administration (TGA).

Rationale:

The National Product Catalogue (NPC) will help ensure information required for procurement of medicines, medical devices and healthcare products will come from one electronic source, thereby ensuring consistency of information across all organisations utilising the same source of information. This will significantly reduce the likelihood of introducing erroneous data into procurement transactions and the errors and costs these cause.

Owner:

Head of Policy and Information Services





1.7 Operationalise and enhance the National Product Catalogue (NPC) and NEHTA eProcurement solution

Critical Success Factors

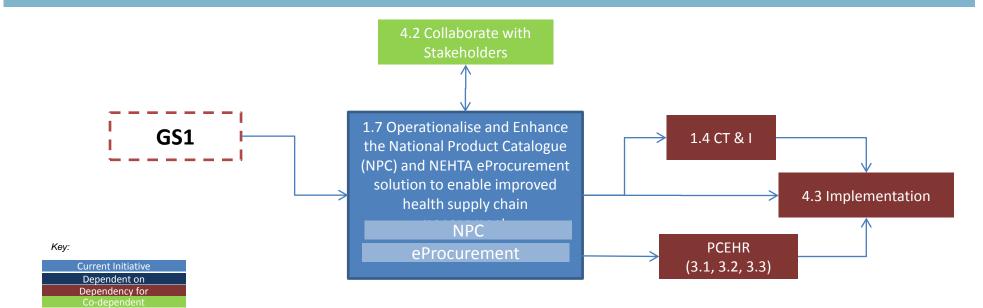
Summary:

- Continued population and utilisation of the NPC and NEHTA eProcurement solution;
- Identification and development of processes and solutions to enable the better utilisation of NPC data by jurisdictions and private sector organisations; and
- Increased jurisdictional capability to fully utilise both the NPC and the NEHTA eProcurement solution.

Dependencies Map

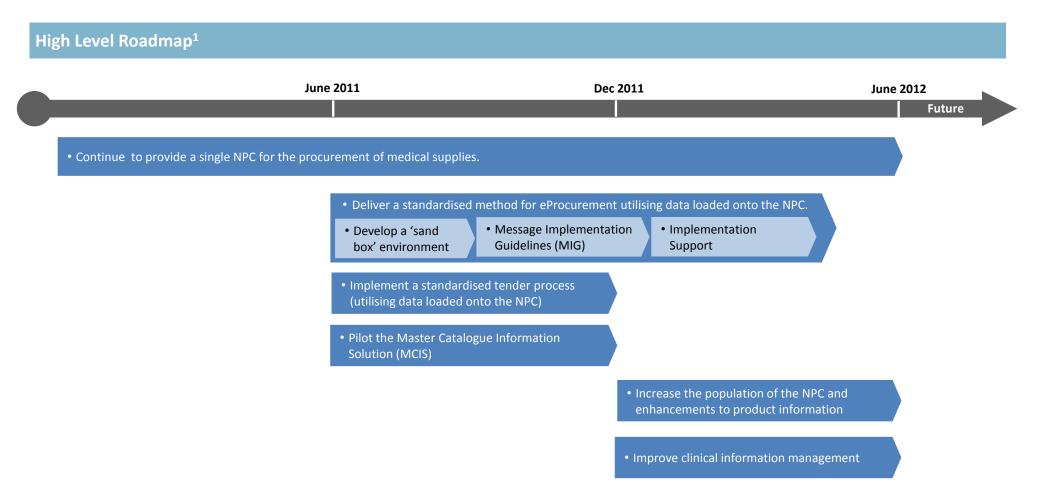
External dependency

Direction of dependency





1.7 Operationalise and enhance the National Product Catalogue (NPC) and NEHTA eProcurement solution



Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





1.8 Deliver and operationalise nationally applicable eHealth compliance, conformance and accreditation

Description

Summary:

A national conformance and compliance function is required to test and certify that eHealth solutions comply with national eHealth standards and processes. The certification function will inform users that eHealth solutions adhere to the appropriate Australian standards, and that products are "fit for purpose".

Actions:

- 1. Provide certification function requirements consultation and solution design;
- 2. Provide an ongoing compliance and certification assessment capability;
- 3. Deliver conformity assessment schemes and test specifications in support of NEHTA-compliant product and service development and the development of testing services through accredited industry test labs;
 - a. SMD secure messaging assessment scheme and industry test capability;
 - b. HI compliance scheme and industry test capability;
- 4. In partnership with NATA, maintain and update the NATA accreditation scheme for industry test labs (referencing NEHTA CCA products) to encourage industry test capability;
- 5. Provide implementation support for the healthcare community to adopt NEHTA compliance testing; and
- 6. Establish and maintain a Register of Conformity capability.

Rationale:

There is currently a fragmented and uncoordinated approach to certification and testing of eHealth systems, making it difficult for users, purchasers and vendors of eHealth systems to have confidence in the ability of their systems to share information. This includes a significant gap in the current mechanisms, or a lack of mechanisms, for certifying products and vendors are "fit for purpose" and comply with national eHealth standards and processes.

Owner:

Head of Strategy





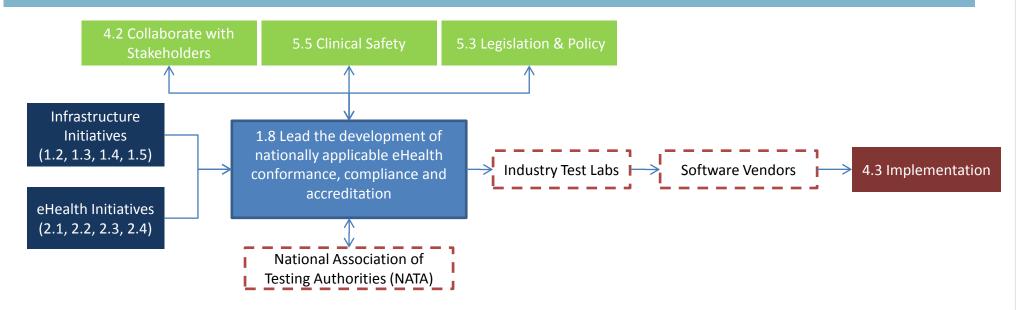
1.8 Lead the development of nationally applicable eHealth conformance, compliance and accreditation

Critical Success Factors

Summary:

- Contribution by key stakeholders through CCA working groups to ensure that broad industry participation in NEHTA's risk-based methods for developing conformity assessment schemes is supported;
- NEHTA test specifications are included in the Standards Australia programme; and
- Vendors software meeting conformance specifications by accredited test labs and registered on NEHTA's registry of conformance.

Dependencies Map

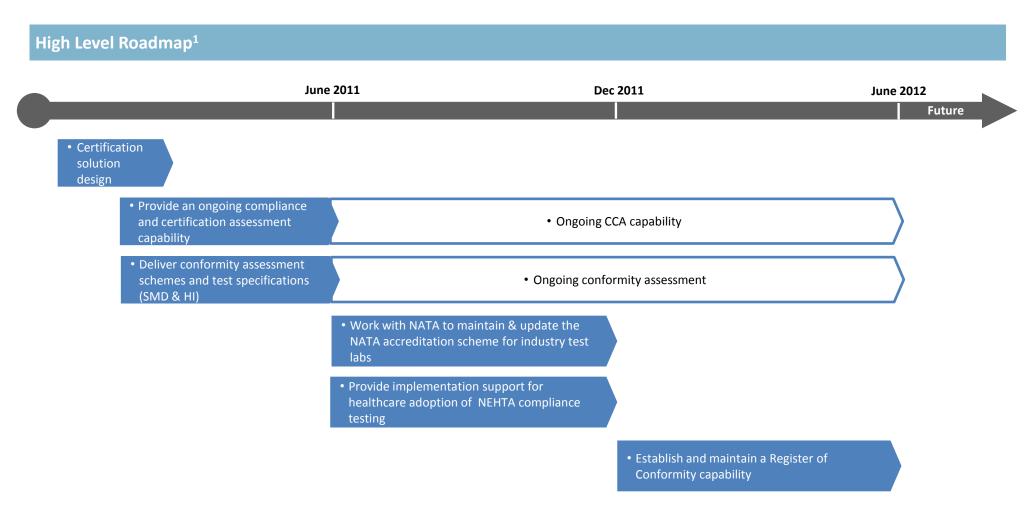








1.8 Lead the development of nationally applicable eHealth conformance, compliance and accreditation



Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





Strategic Priority 1 - Benefits

- Facilitate reduction in errors and increase efficiency in handling health information;
- Increase the accuracy with which information will be linked to the intended patient, provider and organisation;
- Use of an IHI reduces the chance of duplicate patient records;
- Use of an IHI in the health sector improves decision making based on more accurate and more complete patient information being available to providers;

Healthcare • Identifiers

- Enable administrative efficiencies by reducing the need to capture the same information numerous times across the health sector;
- HPI-I streamlines health service Provider business processes with respect to appointing and administrative credentialing of clinicians;
- HPI-O allows for identification of health provider organisations;
- Enables the electronic use of information for statistical and reporting purposes;
- Provide the foundation building blocks to enable a national individual electronic health records system.

Secure

 Increased confidence of uptake, improving the security of clinical information exchange between healthcare providers (standardised/ simplified);

Messaging

- A more streamlined communications environment within healthcare organisations;
- Providers will be able to connect to a wider range of other providers electronically;
- Vendors will have increased confidence in software development because of national standards;
- Reduced potential for data interception.

NASH

- Enables higher assurance and authenticity of information through digital signatures such as digital certificates;
- Simplifies process of provider authentication;
- Enables accountability and audit ability of service provision;
- Cost savings through standardisation;
- Interoperable access to vendor software;
- Facilitates clinician mobility around the country and between healthcare organisations.





Strategic Priority 1 - Benefits

Clinical Terminology and Information

- Better ability to monitor patient care and clinical outcomes through the care continuum with the use of standardised terminology;
- Better monitoring of patients on clinical pathways; adherence to clinical guidelines and ability to escalate;
- Better clinical support systems through consistent, standardised language;
- More efficient updates of clinical information, facilitating improved workflow;
- Improved visibility and ease of reporting clinical activity;
- Use of nationally accepted clinical terminology simplifies software production for vendors enabling advanced functionality whilst possibly reducing production costs;
- More accurate measures of billing activity for businesses;
- Support management of bio-equivalent or bio-similar medicines utilisation;
- Better aggregation of information available for population health/epidemiology, policy & Strategy, research and education purposes;
- Better, more consumer friendly information available to patients.

Supply Chain

- Right product, right place, right time ensuring safety of patients requiring vital product supply;
- Reduced inefficiencies in jurisdictions due to improved consistency of right product in the right place for the right patient;
- Reduced returns through improved unique product identification resulting from NPC usage;
- Reduced office supply wastage, elimination of redundant tasks as a result of greater automation and associated error reduction;
- Reduced cost of holding of inventory by providing 'just-in-time' stock and optimised order quantities and greater automation;
- Increased contract compliance and compliance with standard supply chain processes;
- Better quality purchasing decisions through the improved provision of management information;
- Better quality purchasing decisions as a result of more detailed and accurate product information;
- Reduced impact of differential arrangements across jurisdictions.





Strategic Priority 1 - Benefits

Security and Access Framework

- A standardised and repeatable approach, to assist in the decision making process to security and access in eHealth decisions.
- Provides a series of principles and guidelines to promote consistency in a healthcare information network.

Compliance, Conformance and Accreditation

- Assurance that a patient's healthcare providers are utilising certified systems which will enable access to and transfer of the best available health information
- Confidence in vendors systems. Different vendors systems' are able connect and share information, maintaining data integrity
- Reduced costs and time delays and risks of procurement, integration and deployment of eHealth systems. Confidence that vendors that have met a rigorous certification regime to ensure safety and quality is delivered
- Improved governance over eHealth by assuring the systems delivered match the intended outcomes
- Systems meet agreed specifications and are able to interoperate with the national infrastructure and other compatible systems



e_{Health}

Strategic Priority 2

Strategic priority 2 – Coordinate the progression of the priority eHealth initiatives

2. Coordinate the progression of priority e-health initiatives

- 2.1 Enable improved Continuity and Co-ordination of Care
- 2.2 Enable safer and improved Medications Management
 - 2.3 Enable improved access to and use of diagnostic information
- 2.4 Enable improved access to healthcare through the use of emerging technology

Description

- This priority articulates the need to continue to develop eHealth solutions in priority areas. Example product specifications include e-Referral, e-Discharge Summary, and ETP.
- eHealth solutions are where significant impact can be made to improve clinical practice and deliver clinical benefit, in particular patient safety and quality of care.

Rationale

- This strategic priority is closely linked to the "eHealth Solutions" work stream outlined in the National eHealth Strategy.
- The priority solutions have been selected as they relate to areas of high impact and can be made available early. These solutions have been identified to maximise clinical and social benefits through improvements in healthcare delivery.
- NEHTA will continue to develop eHealth solutions building enhancements and new functionality upon the "core" initiatives, and enhancements based upon development in the infrastructure programmes.





Strategic Priority 2 – Milestones to date

Strategic Initiative	Milestones to date		
2.1	August 2009	e-Discharge Summary Release 1 – core discharge summary package	
2.1	October 2010	e-Discharge Summary Release 1.1 – updating information in line with National Infrastructure Services Updates	
2.1	October 2010	Referral Release 1 – Core e-Referral package	
2.2	October 2009	Delivery of the draft Electronic Transfer of Prescription (ETP) product version 1.0 and early adopter implementations providing prescribers and dispensers with the ability to send and receive standardised prescribing and dispensing information. Development towards delivery of a product to enable healthcare providers to send and receive accurate and timely lists of current medications .	
2.2	July 2010	Delivery of the second draft Electronic Transfer of Prescription (ETP) product version 1.0.	
2.2	September 2010	Delivery of the draft Electronic Transfer of Prescription (ETP) product version 1.1, incorporating a fully electronic process, electronic prescriber signatures, electronic claiming and auditing.	
2.2	December 2010	Final delivery of the ETP product version 1.1	
2.3	September 2009	Initial Pathology release 1	
2.3	August 2010	Development and release of the Pathology Concept of Operations for public consultation	





2.1 Enable improved Continuity and Co-ordination of Care

Description

Summary:

This strategic initiative is for the development of specifications and supporting material to improve the electronic exchange of Discharge Summary, Referral and Specialist Letter information. These will provide capability within the sector for a nationally consistent approach to electronic exchange of information between care providers during the hand over of care. NEHTA will enable the enhanced co-ordination of care by bringing together various programmes delivering solutions in this area, through shared care plans.

Actions:

- 1. Complete the e-Discharge package development incorporating current NEHTA specifications. Including endorsement of e-Discharge specifications for message content and message format (Structured Document Template (SDT) and Clinical Document Architecture (CDA) Implementation Guide respectively) endorsed as national standards in partnership with Standards Australia;
- 2. Finalise the e-Referrals Core Release 1 product as the core information requirements for a referral from a GP to Specialist, validated through extensive public consultation and a comprehensive clinical safety assessment process;
- 3. Deliver a Specialist Letter product, to finalise the electronic exchange of referrals information;
- 4. Provide implementation support for early adopters of the NEHTA's continuity of care products;
- 5. Develop functional requirements and initiate consultation process for the development of further products such as: care management components, ambulatory care messaging and shared health summaries.

Rationale:

Incomplete information, or inconsistent formats, are common examples of deficiencies in clinical information transfer. The electronic exchange of discharge and referral information will improve communication, thus providing the best available clinical information in a consistent and timely manner.

The increasing burden of chronic and complex care is well documented and the need to address this to enhance patient self-management, support clinical decision making and improve health outcomes. Patients requiring ongoing care from a range of providers will benefit as their health information can be better shared, enabling improved planning, treatment and communication by care providers.

Owner:

Head of Product and Solutions Development



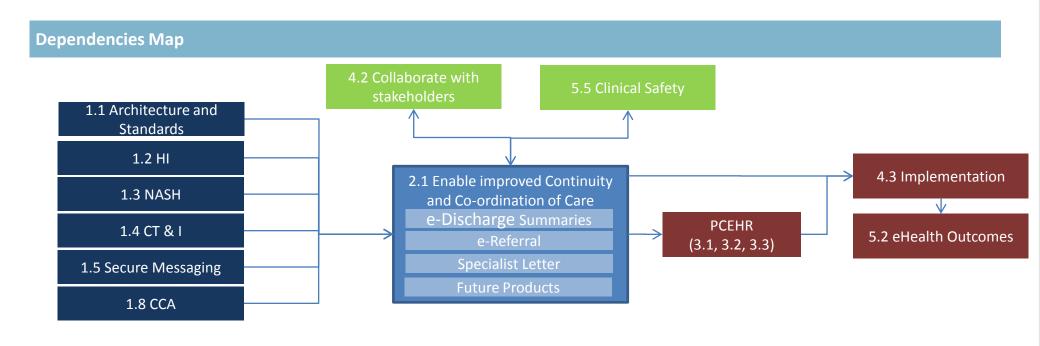


2.1 Enable improved Continuity and Co-ordination of Care

Critical Success Factors

Summary:

- Collaboration between key stakeholders including the Continuity of Care Reference Group, jurisdiction, vendor and healthcare industry representatives;
- The strategic and tactical support of Standards Australia;
- Understanding of market forces and careful selection of appropriate implementation strategies in order to achieve Jurisdictional, vendor and healthcare industry adoption of NEHTA's products.









2.1 Enable improved Continuity and Co-ordination of Care

High Level Roadmap¹

• Complete the e-Discharge package
• Seek endorsement as national standards

- Finalise the e-Referrals core Release 1 product (GP to Specialist)
- Deliver a Specialist Letter product

development (including SDT and CDA)

- Provide implementation support for early adopters
- Develop functional requirements for the development of further products (e.g. care management components, ambulatory care messaging, shared health summaries, etc).
- Health Summary
 Use Case and information Model

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





2.2 Enable safer and improved Medications Management

Description

Summary:

E-Medication Management will provide providers with the capability to send and receive standardised prescribing and medication information in a timely and consistent manner to support improvements in the safety and quality of healthcare in community, residential care, and acute settings, both public and private.

Actions:

- 1. Deliver ETP (version 1.1) specification product to prescribers and dispensers with the ability to implement capabilities to send and receive standardised prescribing and dispensing information in a timely and consistent manner. This will reduce the opportunity for adverse drug events. Efficiency gains particularly in community pharmacies are expected through automation of currently manual processes;
- 2. Provide implementation support for early adopters of the ETP (version 1.1) specification product to enable these benefits;
- 3. Deliver the first version of the Electronic Medication Profile (EMP) as part of the Shared Health Summary for the PCEHR;
- 4. Further develop the EMP to broader uses. When delivered in the 2011/12 work programme it will provide healthcare providers with the ability to implement capabilities to send and receive accurate and timely lists of current medications. This will reduce errors of transcription and omission and provide standardised information;
- 5. Provide support to the development of electronic controlled drug notifications for jurisdictions*;
- 6. Provide support to the development of prescribing from medication charts in Residential Aged Care*;
- 7. Develop a Concept of Operations for the Shared Medication Record. This record provides clinicians timely access to prescribed/ordered and administered medications across organisational boundaries and care settings; and
- 8. Consult with clinical groups and industry on next phases of Medications Management programme and the integration of ETP, EMP and other Medications Management initiatives to the PCEHR.

Rationale:

Adverse drug events place a substantial burden on the healthcare system and the broader community though the increased cost of treating those affected by these events. The increase in chronic disease, coupled with the increasing use of pharmaceuticals to treat and support chronic disease, requires better ways to manage medications to reduce the cost of healthcare and increase health outcomes, specifically safety and quality.

Benefits range from efficacy gains for prescriber and dispensers by removing the need to hand sign prescriptions and re-key prescription information; and reductions in errors of transcription of prescriptions in the early phases. The ability to prevent consumers from having cancelled prescriptions dispensed is another important benefit from ETP. Further benefits will be through the provision of standard medication lists to PCEHRs and the incorporation of standard data into prescribing and dispensing systems which will assist in future decision support and medication monitoring improvements.

*under the Fifth Community Pharmacy Agreement

Owner:

Head of Product and Solutions Development





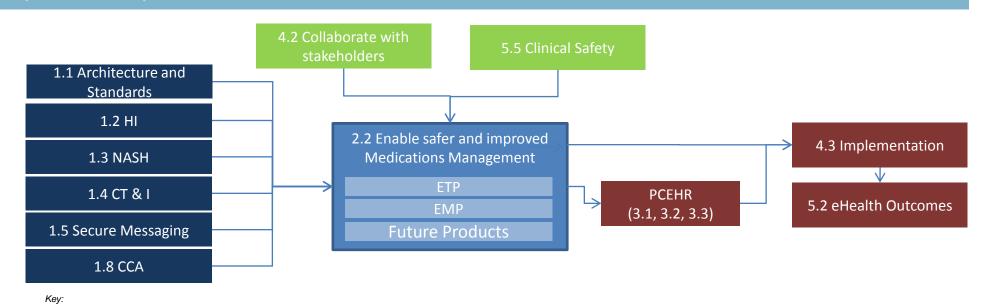
2.2 Enable safer and improved Medications Management

Critical Success Factors

Summary:

- Medicare Australia and DOHA develop and implement policy and operational requirements to enable paperless prescription processes including electronic signatures by December 2011;
- Standards Australia is able to translate NEHTA specifications into Australian Technical Specifications for ETP V1.1 by June 2011;
- Acceptance of the specifications by the Medication Management Reference Group and the software industry;
- Availability of the HI Service, NASH, SNOMED CT-AU and AMT prior to delivery of final implementation guides for ETP V1.1 & EMP;
- Use of 'good practice' change management strategies to help maximise adoption.

Dependencies Map







2.2 Enable safer and improved Medications Management

High Level Roadmap¹ June 2011 Dec 2011 June 2012 **Future** • Deliver ETP (version 1.1) specification product to • Provide implementation support for early adopters of the ETP (version 1.1) specification prescribers and dispensers Deliver the first version of the Electronic Medication • Further develop the EMP Release 2 to broader uses. Profile (EMP) • Consult with clinical groups and industry on next phases of • Adverse Drug Event Reporting Medications Management programme • Provide support to the development of electronic controlled drug notifications for jurisdictions • Provide support to the development of prescribing from medication charts in Residential Aged Care • Gain national approval for the use of electronic signatures for clinical documents

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.

• Seek endorsement of national ETP standards for ETP





2.3 Enable improved access to and use of diagnostic information.

Description

Summary:

Development of specifications and supporting material to improve the electronic exchange of Pathology and Diagnostic Imaging information. These will provide capability within the sector for a nationally consistent approach to electronic ordering, transmission, receipt and presentation of diagnostics related clinical information across the health sector.

To support the Pathology, BreastScreen Australia and Diagnostic Imaging sectors by reviewing and updating national standards and specifications that promote the adoption of a common interoperable health information exchange solution, including support for the PCEHR.

Actions:

- 1. Collaborate with Standards Australia and the pathology sector to review Australian standards and establish a single standard endorsed by all concerned which integrates with associated developing national infrastructure services including healthcare identifiers, terminology and conformance; and to revise and update the implementation manual for the standard;
- 2. Deliver a complete and endorsed specification set for an improved pathology messaging solution for pathology service providers and health care providers with early piloting within a live environment aligning with standards to the greater NEHTA work program;
- 3. Support the Royal Australian College of Pathologists priorities around cancer reporting through development of cancer protocols, histology reports and an industry pilot;
- 4. Develop a messaging supplement to the Standard AS4700.2 related to hospital acquired infection (HAI) based on the core components for requesting and reporting HAI's;
- 5. Develop General Radiology Environmental Scan and Concept of Operations to inform the scoping of the initial Diagnostic Imaging Work Plan;
- 6. Support BreastScreen Australia by delivering a complete and endorsed specification set to support the transfer, archiving and presentation of images in a nationally standardised way;
- 7. Support of implementations of NEHTA pathology and diagnostic imaging products and standards; and
- 8. Develop an industry endorsed pathology request repository solution design.

Rationale:

Driving the adoption of standards for diagnostic messaging, information structure and terminology within the Diagnostics work programme which can be implemented consistently to achieve semantic interoperability. Issues such as re-ordering diagnostic tests due to a lack of information regarding previous testing history are costly and time consuming for patients, health care funders and providers alike. Improved access to electronic diagnostic information will minimise these costs and standards for message structure and connectivity for transmission of results will reduce variability of results and interpretation. This will also support the development of the Diagnostics components of the PCEHR.

Owner:

Head of Product and Solutions Development





2.3 Enable improved access to and use of diagnostic information.

Critical Success Factors

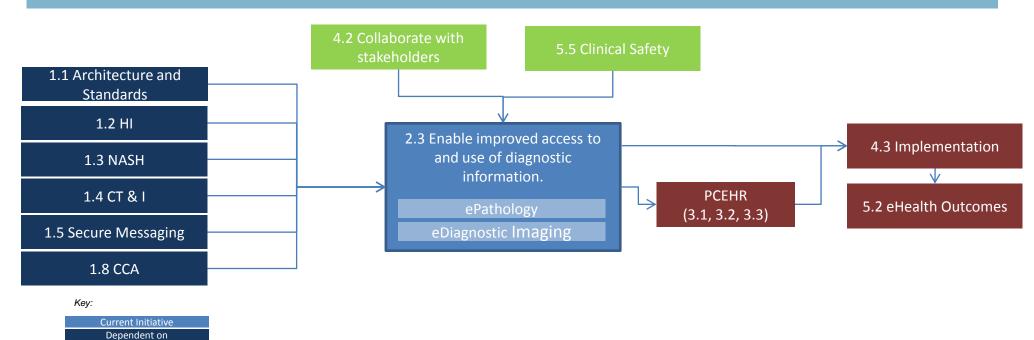
Summary:

- Broad stakeholder buy-in to the Foundation Core Components and product identification;
- Timely identification and collaboration with implementation partners;
- Identification and industry endorsement of "fit for purpose" product quality requirements;
- Sufficient nationally scalable pathology products identified and endorsed for production with stakeholders;
- Stakeholder and NEHTA Board endorsement of the proposed Diagnostic Imaging programme; and
- Sufficient industry buy-in to the developed draft roadmap and implementation path.

Dependencies Map

Dependency for Co-dependent External dependency

Direction of dependency





2.3 Enable improved access to and use of diagnostic information.

High Level Roadmap¹

June 2011 Dec 2011 June 2012 **Future** • Review of national diagnostic service standard in collaboration with Standards Australia · Support priorities around cancer reporting (e.g. • Early piloting within a live environment development of cancer protocols, histology reports and an (aligning with standards to NEHTA work programme) Support priorities around cancer reporting (e.g. development of cancer protocols, histology reports and an industry pilot) Develop a messaging supplement to the Standard AS4700.2 related to hospital acquired infection (HAI) • Develop an industry endorsed pathology request repository solution design • Develop General Radiology Environmental • Scoping of the initial Diagnostic Imaging Work Plan Scan and Concept of Operations. • Support Breast Screen Australia by delivering a complete and endorsed • Develop Breast Screen Australia Concept of specification set (transfer, archiving and presentation of images) Operations • Ongoing support of pathology and diagnostic imaging product implementations

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.



2.4 Enable improved access to healthcare through the use of emerging technology

Description		
Summary:	This strategic initiative will focus on the development and delivery of solutions and services, for telehealth technologies to help ease issues associated in accessing and delivering healthcare services – particularly to consumers in rural and regional Australia. Telehealth is the transmission of images, voice and data between two or more health care locations via digital telecommunications to enable clinicians to provide clinical advice, consultation, education, and training services. Australia has a foundation of telehealth usage, but recent announcements have significantly increased funding for such initiatives, which is a catalyst for the development and wider adoption of telehealth technology in Australia.	
Actions:	 Work with DOHA, and other stakeholders to understand the implications of recent telehealth announcements to the NEHTA work program; Consult with industry stakeholders and review international experiences to identify leading practice architectures, infrastructure, specifications and standards required to enable the efficient delivery of telehealth services; Review telehealth initiatives undertaken in Australia to understand care models, technologies, leading practices, etc; and Investigate further applications of emerging technologies in healthcare, and determine the role of NEHTA in the potential development and adoption of these technologies in Australia. 	
Rationale:	There is increasing pressure on governments and healthcare providers to provide equitable and sustainable healthcare. The telehealth programme is an example of government policy and funding to help improve equity of access to healthcare across the country. As the lead organisation for driving eHealth in Australia, NEHTA will have a role in the delivery and adoption of telehealth, since these technologies will leverage NEHTA products such as identifiers, NASH, etc.	
Owner:	Head of Strategy Head of Architecture	





2.4 Enable improved access to healthcare through the use of emerging technology

Critical Success Factors

Summary:

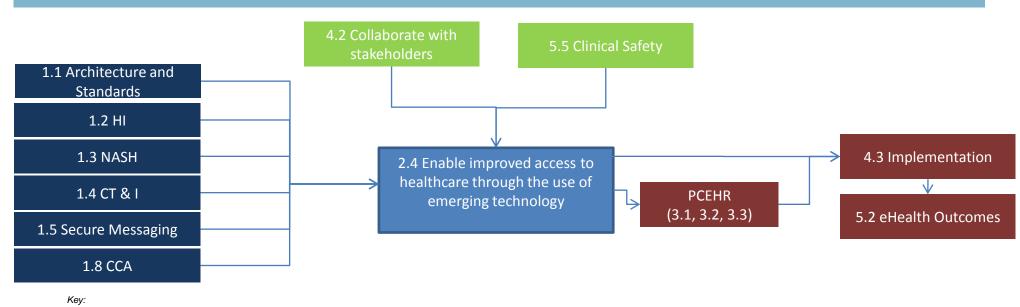
- Clear definition of NEHTA's scope in support of the telehealth agenda in Australia;
- Well articulated strategic directions for clinical telehealth use within health services;
- Ongoing government incentives and adoption drivers for clinicians to leverage new technologies;
- Regular involvement and input from relevant stakeholders.

Dependencies Map

Current Initiative
Dependent on
Dependency for
Co-dependent

External dependency

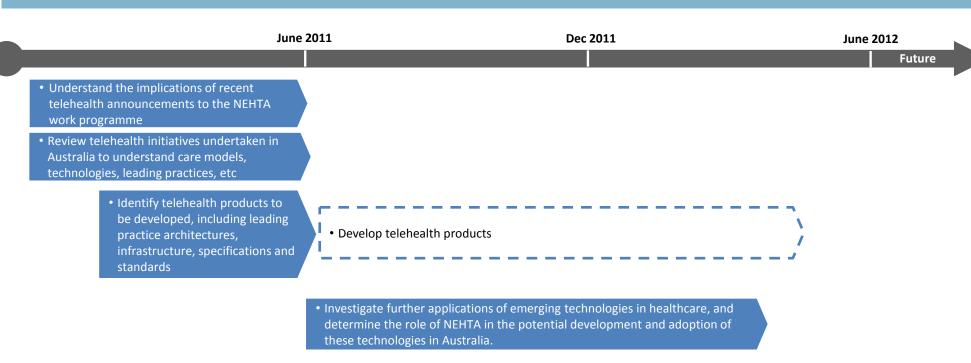
Direction of dependency





2.4 Enable improved access to healthcare through the use of emerging technology

High Level Roadmap¹



Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





Strategic Priority 2 - Benefits

e-Discharge Summaries

- Standardised e-Discharge Summaries provide more useful information to General Practice;
- The ability to incorporate e-Discharge Summary information into General Practice patient records automatically;
- Improved accuracy of the correct patient discharge summary being sent to the intended clinician at the intended place with the integration of HI Service;
- Enable the storage of atomic data to support its use for secondary purposes for purposes of quality improvement to the health system;
- E-Discharge Summaries allow transportation of information without the need to re-key resulting in a reduction of transcription errors.

e-Referral

- Improved communication between General Practice and medical specialists;
- Increased assurance of receipt of referral;
- The use of structured content which allows the transportation of e-Referral information without the need to rekey, scan or cut and paste information, resulting in a reduction of transcription or omission errors and a more complete record;
- Improved accuracy of the correct patient e-Referral being sent to the intended specialist at the intended place with the integration of HI Service;
- More secure e-Referral data transfer;
- Decrease in lost referrals;
- Enable the storage of atomic data to support its use for secondary purposes.

e-Medications

Management

- Fewer transcription errors will improve patient safety;
- Removing the re-keying of prescriptions will streamline pharmacy work processes;
- Improved management of prescription medication and wise use medicines through formal prescription cancellation process;
 - Saving prescriber time by removing the need to print and sign prescriptions (future state benefit);
- Possibility of increasing the number of audits of PBS prescriptions compliance management;
- Fewer unnecessary requests for replacement of lost prescriptions when PCEHR is fully operational (future state benefit);
- More efficient process for owing prescriptions;
- Enable the storage of standardised data to support quality use of medicines and other purposes;
- Prescribers can monitor dispensing activity (future state benefit).





Strategic Priority 2 - Benefits

- Accurate and efficient pathology report messaging;
- Accurate health consumer identification and cross sector communication;
- Timely, accurate pathology result acknowledgement;

ePathology

- Improved community pathology results management;
- Decreased waste through redundant or repeat pathology tests;
- Reduced inappropriate pathology ordering;
- Safer pathology result interpretation.

Telehealth

- Telehealth improves access to clinical services, especially for consumers in rural and remote areas, and immobile patients;
- Increases access to: clients; professional development and education opportunities; specialist services;
- Telehealth increases the information exchange between inter-professional teams and enhances client care.;
- It reduces the need for clinicians to travel, and provides savings in associated costs for travel and accommodation.

[Source: DOHA]



e_{Health}

Strategic Priority 3

Strategic priority 3 – Manage the delivery of key components of DOHA's PCEHR Programme

3. Manage the delivery of key components of DOHA's PCEHR Programme

- 3.1 Co-ordinate with relevant PCEHR stakeholders
- 3.2 Deliver the core

 components of the PCEHR
 by July 2012
 - 3.3 Enrich the PCEHR with additional capabilities

Description

- Strategic priority 3 Manage the delivery of key components of DOHA's PCEHR Programme. This priority brings to the forefront NEHTA's role in supporting the Federal Government in developing a PCEHR.
- A Personally Controlled Electronic Health Record will provide secure access for patients and healthcare providers to their eHealth records via a range of access channels regardless of their physical location.

Rationale

- NEHTA acts as a managing agent on behalf of DoHA for the National Infrastructure Partner/s; National Change and Adoption Partner; Benefits Evaluation Partner; and eHealth Sites contracts and agreements.
- The Commonwealth is to be accountable for the build, subject to NEHTA's contractual obligations. NEHTA must ensure an outcome for release 1 that aligns with the Government's commitment.
- By incorporating this into the NEHTA Strategic Plan, the impacts of the PCEHR on NEHTA is demonstrated and the very strong links to NEHTA's current work-programme are highlighted.



Strategic Priority 3 – Milestones to date

Strategic Initiative	Milestones to date	
3.1	July 2010	Discussion between NEHTA and DOHA on NEHTA's role under way.
3.1	November 2010	Contract between DOHA and NEHTA agreed.
3.2	July 2010	Initial consultation with NEHTA reference group tiger teams on a DRAFT Concept of Operations.
3.2	November 2010	DRAFT Concept of Operations available.





3.1 – Co-ordinate with relevant PCEHR stakeholders

Description			
Summary:	The national Personally Controlled Electronic Health Record (PCEHR) programme is managed by the Department of Health and Ageing. NEHTA will collaboratively work with DOHA and the sector to design, develop and coordinate the delivery of the PCEHR programme. It includes supporting DOHA's programme management streams around governance, programme management, change and adoption, benefits realisation, standards, foundations, architecture and lead implementations.		
Actions:	 Work with DOHA and the sector to help shape the overarching PCEHR programme of work; Collaboratively develop with DOHA and the sector a governance framework, to support the design, build, implementation and eventual operation of the PCEHR System; Work with DOHA to execute the agreed PCEHR Program Plan. NEHTA is responsible for the design of the solution, and management of the providers delivering the solution components; Support the Change and Adoption programme, by aiding in the delivery of public communications, engagement activities and working towards a national approach to change management; Drive implementation and Change and Adoption initiatives for the PCEHR, consistent with NEHTA's implementation approach. NEHTA is the managing agent for DOHA responsible for the Change and Adoption strategy and implementation activities – and will leverage expertise from third parties as appropriate; and Leverage NEHTA capabilities in benefits realisation to support the realisation of PCEHR system benefits, utilising an independent organisation to assess benefits. 		
Rationale:	The Federal, State and Territory governments have made a significant investment in NEHTA as an entity to advance the Australian eHealth agenda. The capability developed within NEHTA over the last 5 years provides a strong foundation for supporting a nationally significant programme like the PCEHR.		
Owner:	Head of PCEHR Head of Implementation		







Critical Success Factors

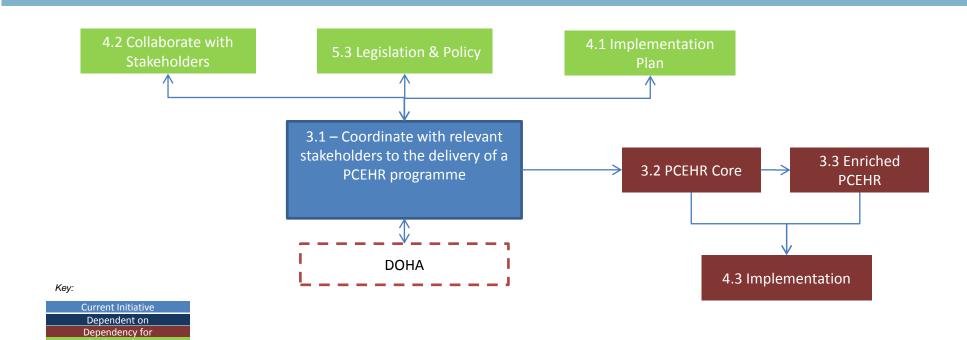
Summary:

- Strong relationships with NEHTA and other key supporting stakeholders;
- Key marketing and communications;
- Strong governance arrangements; and
- Ability to leverage third parties where appropriate to assist in the delivery of certain aspects of the PCEHR program.

Dependencies Map

External dependency

Direction of dependency



Health

3.1 – Co-ordinate with relevant PCEHR stakeholders

High Level Roadmap¹

 June 2011
 Dec 2011
 June 2012

Future

- Work with DOHA and the sector to help lead and shape the overarching PCEHR programme of work
- Collaboratively develop with DOHA and the sector a governance framework, to support the PCEHR Program
- Work with DOHA to execute the agreed PCEHR Program Plan (Ongoing leadership, governance and program management)
 - Develop a national approach to change management
 - Support the Change and Adoption programme, by aiding in the delivery of public communications, engagement activities, etc
 - Drive implementation and Change and Adoption initiatives for the PCEHR, consistent with NEHTA's implementation approach.
 - Leverage NEHTA capabilities in benefits realisation to support the realisation of PCEHR system benefits

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





3.2 – Deliver the core components of the PCEHR by July 2012

Description

Summary:

The purpose of this initiative is to put in place the core capabilities for a PCEHR System which can be built on in the future, so that by July 1, 2012: Australians will have the option of signing up for a PCEHR, participating individuals will be able to have a health summary, a national index that will allow streamlined access to eHealth records, contained in a range of PCEHR-conformant repositories, such as:

- a health summary including current medical conditions, medications, allergies/adverse reactions, alerts, and vaccinations;
- clinical documents such as discharge summaries, GP event summaries and other reports over time (e.g. pathology and diagnostic reports, specialist letters, care plans, etc); and
- future support for consumer health diaries/personal health records

Coverage includes consideration of access channels (portals, call centre, B2B gateways), core services (participation and authorisation, audit, views, reports), national repository and scheme for other conformant repositories. NEHTA will work to ensure the design incorporates the implications on the primary and acute sector.

Actions:

- 1. Develop (with consultation) a *Concept of Operations* for the PCEHR system;
- Develop (with consultation) a set of High level requirements for the core PCEHR capabilities;
- 3. Develop (with consultation) a High level architecture for the core PCEHR capabilities;
- 4. Facilitate the development of standards to support the core PCEHR capabilities;
- 5. Facilitate the development of conformance tests to support the core PCEHR capabilities; and
- 6. Work with DOHA to source a solution for the core PCEHR infrastructure.

Rationale:

Core capabilities around the PCEHR System need to be in place to allow it to be built upon in the future.

Owner:

Head of PCFHR

3.2 – Deliver the core components of the PCEHR by July 2012

Critical Success Factors

Summary:

- PCEHR Standards and architecture agreed by the community
- Timely and efficient engagement of industry partners
- Supporting conformance tests developed and underway
- Infrastructure procured and passes acceptance

Dependencies Map 4.2 Collaborate with 3.1 PCEHR programme 5.3 Legislation & Policy Plan 1.1 Architecture and Standards Infrastructure 3.2 – Deliver the core 3.3 Enriched Initiatives components of the PCEHR by **PCEHR** (1.2, 1.3, 1.4, 1.5) July 2012 1.6 SAF Portal 4.3 Implementation 5.2 eHealth Outcomes 2.1 Cont. & Co-ord of Care Key: **Current Initiative** Dependent on Dependency for **DOHA** External dependency

Direction of dependency



3.2 – Deliver the core components of the PCEHR by July 2012

High Level Roadmap¹

June 2011 Dec 2011 June 2012 Future

- Develop (with consultation) a *Concept of Operations* for the PCEHR system
- Develop (with consultation) a set of High level requirements for the core PCEHR capabilities
- Develop (with consultation) a High level architecture for the core PCEHR capabilities
- Facilitate the development of standards to support the core PCEHR capabilities
- Facilitate the development of conformance tests to support the core PCEHR capabilities
- Work with DOHA to source a solution for the core PCEHR infrastructure.

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





3.3 – Enrich the PCEHR with additional capabilities

Description			
Summary:	This initiative builds upon the core capabilities for the PCEHR and work with the sector and the other areas of the NEHTA work programme to expand upon it.		
Actions:	 Define an approach to supporting GP Event Summaries within PCEHR; Define an approach to supporting Discharge Summaries within PCEHR; Define an approach to supporting Referrals and Specialist Letters within PCEHR; Define an approach to supporting Pathology Reports within PCEHR; Define an approach to supporting Diagnostic Imaging Reports and Images within PCEHR; Define the relationship between ETP and PCEHR; Define an approach to supporting Medicare Information (ACIR, Organ Donor, PBS, etc) within PCEHR; Define an approach to supporting Registry integration and PCEHR; Define an approach to supporting Personal Health Records within PCEHR; Define support for the Provider Service Directory within PCEHR; and Define support for the template service within PCEHR. 		
Rationale:	There are a wide range of expectations around PCEHR. This initiative seeks to put in place a series of "stretch" targets in place to meet the breadth of expectation around PCEHR.		
Owner:	Head of PCEHR		





3.3 – Enrich the PCEHR with additional capabilities

Critical Success Factors

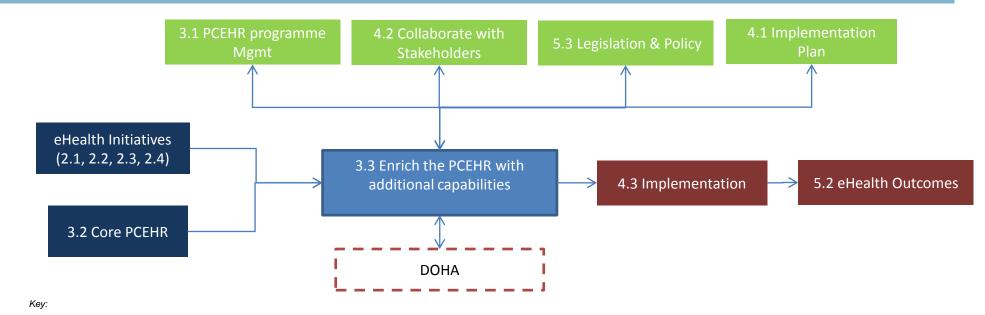
Summary:

- Solutions delivered around the priority eHealth initiatives enabling enriched PCEHR capabilities and functions
- Continued engagement with DOHA
- Additional funding to enrich the PCEHR with additional capabilities

Dependencies Map

Dependent on
Dependency for
Co-dependent
External dependency

Direction of dependency





e_{Health}

3.3 – Enrich the PCEHR with additional capabilities

High Level Roadmap¹

 June 2011
 Dec 2011
 June 2012

 Future
 Future

- Define an approach to enrich the PCEHR with additional capabilities
- supporting GP Event Summaries within PCEHR;
- Define an approach to supporting Discharge Summaries within PCEHR;
- Define an approach to supporting Referrals and Specialist Letters within PCEHR;
- Define an approach to supporting Pathology Reports within PCEHR;
- Define an approach to supporting Diagnostic Imaging Reports and Images within PCEHR;
- Define the relationship between ETP and PCEHR;
- Define an approach to supporting Medicare Information (ACIR, Organ Donor, PBS, etc) within PCEHR:
- Define an approach to supporting Registry integration and PCEHR;
- Define an approach to supporting Personal Health Records within PCEHR;
- Define support for the Provider Service Directory within PCEHR; and
- Define support for the template service within PCEHR.

- Update Program Plans
- Document requirements
- When appropriate, facilitate the development of standards and conformance testing to support the core PCEHR capabilities.
- When appropriate, work with DoHA to source a solution for additional capabilities

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.





Strategic Priority 3 - Benefits

PCEHR

- Greatly enhance both the quality and the timeliness of available healthcare information
- Assisting the self-management of stable chronic diseases (for example, high blood pressure, diabetes and asthma)
- Increasing communication between clinicians and individuals by using e-consultations and online services to support self-care management using broadband services and online records to share relevant health information
- Reducing hospital re-admissions by making accessible timely and accurate health information essential to the better coordination of post-hospital care
- Improving use of scarce resources through better quality health information, faster clinical assessments, more accurate diagnoses and referrals, and more effective treatment and prescribing of medication
- Better decision making by healthcare providers and individuals through the availability of more complete, more accurate and more up-to-date health information
- Better policy development as a result of the high quality data potentially available for use in research and planning.



e_{Health}

Strategic Priority 4

4. Accelerate national adoption of e-health

4.1 Maintain and continually enhance the implementation strategy & plan

4.2 Formulate initiatives by working collaboratively with consumers, clinicians, government and industry to drive adoption of e-health

4.3 Drive the successful delivery of e-health implementations across the nation

Strategic priority 4 – Accelerate national adoption of eHealth

Description

- Previously Strategic Priority 3, Strategic Priority 4— Accelerate national adoption of eHealth. As, NEHTA moves from the "Year of Delivery" to the "Year of Implementation", this strategic priority gains momentum.
- This priority includes the initiatives focussed on implementation planning, engagement and collaboration, and implementation of eHealth initiatives nationally. The implementation of Healthcare identifiers and the activity Lead Implementation sites are captured in this priority.

Rationale

- This strategic priority is closely linked to the "Change and Adoption" work stream outlined in the National eHealth Strategy.
- As NEHTA products are increasingly becoming available for implementation, this priority becomes essential in planning and consulting with stakeholders to ensure adoption of eHealth solutions.





Strategic Priority 4 – Milestones to date

Strategic Initiative	Milestones to date	
4.1	March 2010	Jurisdictional profiling complete. Analysis of state health system readiness for eHealth products High level 'go to market' strategy defined
4.1	November 2010	Lead site implementation planning for Wave 1
4.1	September 2010	Healthcare Identifier implementation approach developed
4.1	November 2010	Plan for HI adoption developed for Primary and Ambulatory care, Private hospital Sector
4.2	November 2010	eHealth Summit successfully completed, bringing together all NEHTA reference groups, co-chairs and stakeholder reference group to discuss implications of PCEHR
4.3	September 2009	Early adoption of Secure Messaging specification in Northern Territory
4.3	November 2009	Collaborations Process developed to support implementation partners in adopting NEHTA specifications
4.3	March 2010	Planning commenced for jurisdictional IHI Projects
4.3	June 2010	"Early Adopter" Jurisdictional Projects Underway for integration of the Healthcare Identifiers Service, and eHealth solutions





4.1 Maintain and continually enhance the implementation strategy & plan

Description

Summary:

NEHTA is committed to working with the healthcare industry to promote implementation and adoption of it's products. In order to do, NEHTA and the industry require an implementation strategy and plan that will articulate how NEHTA approaches the market, drives uptake of NEHTA products to various stakeholders, and provide a high level timeframe to achieve staged results. For example, some of the key objectives include (a) defining the early stages of the implementation programme and how the programme will evolve over time, (b) the NEHTA products that Early Adopters, Fast Followers and other users will implement, and how these products will mature over time, (c) the clinicians, vendors and other stakeholders that will be targeted and engaged, etc. Importantly, this planning is not a 'one off' activity – it needs to be continuously monitored and updated over time to ensure it is relevant, implementable, and informed by the realities of implementation 'lessons learnt'.

Actions:

- Establish and/or continuously evolve an implementation roadmap and plan in collaboration with stakeholders and industry: 1.
 - Identify and engage with state jurisdictions and private organisations to drive implementation of eHealth products;
 - Analyse and update a profile of the current state and needs of public and private sectors;
 - Conduct implementation planning for 'Lead sites';
 - Maintain account plans for including define targets and benchmarks for adoption by priority sectors.
- 2. Establish financial planning processes to promote efficient delivery of the NEHTA work programme by all relevant stakeholder groups;
- Maintain and enhance an implementation portfolio plan; 3.
- 4. Collaborate with relevant stakeholders to define, publish and maintain product roadmaps;
- 5. Maintain and improve the implementation strategy and plan as products are enhanced or new products are provided to the marketplace; and
- 6. Ensure feedback from implementation experiences feed into the NEHTA product development lifecycle (PDLC) processes, and where relevant, help to update the implementation strategy and plan.

Rationale:

The eHealth market consists of many stakeholders ranging from governments, public and private providers, funders, software vendors, consumers and clinicians. It is critical that clear implementation plans be developed to provide clear guidance to all stakeholder groups regarding how NEHTA products will be implemented. A robust strategy and plan is required in order to ensure the market is sufficiently prepared for implementation of NEHTA's eHealth products, and how each group fits in the overall picture.

Owner:

Head of Implementation





4.1 Maintain and continually enhance the implementation strategy & plan

Critical Success Factors

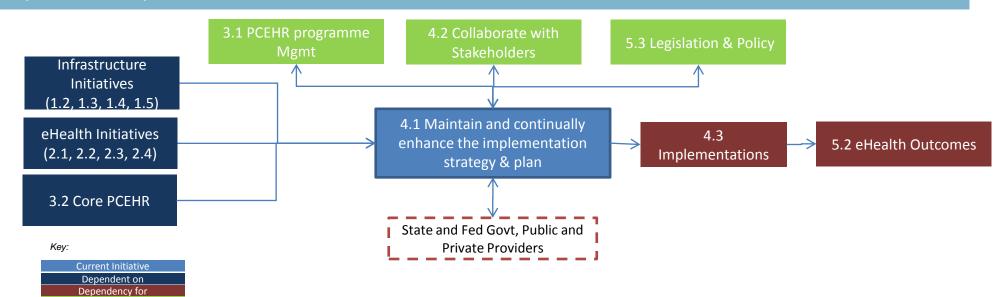
Summary:

- Stakeholders need to be involved in the planning process, and be appropriately informed of the roadmaps moving forward.
- Strong focus on shaping plans based on requirements for adoption (e.g. clinician, consumer, vendor) of NEHTA products. In some cases, this may include 'bundling' of various NEHTA products, gradual rollout to different clinical groups over time, etc
- Identifying the consumer and clinical groups to be targeted in each release in line with vendor's product development plans
- Appropriate funding and business models for implementation developed (commercial models)
- Different starting points regarding stakeholder readiness and willingness to adopt NEHTA products (including vendor readiness and take-up, jurisdictions eHealth system refresh cycles, variations in clinician automation, etc)
- Understanding the capacity and capability limitations of all groups in implementing eHealth products
- Appropriate understanding and recognition of market / business drivers, barriers, risks, etc.

Dependencies Map

External dependency

Direction of dependency





4.1 Maintain and continually enhance the implementation strategy & plan

High Level Roadmap¹

June 2011 **Dec 2011** June 2012 **Future** • Establish an implementation roadmap / plan · Continuously evolve an implementation roadmap and plan in collaboration with stakeholders in collaboration with stakeholders Engage with organisations to drive implementation of eHealth products; • Maintain and enhance an implementation portfolio plan • Analyse and update a profile of the current state and needs of public and private sectors; · Conduct implementation planning for Lead · Maintain and improve the implementation strategy and plan as products are enhanced or new Implementation and eHealth Sites; products are provided to the marketplace Maintain account plans for including defined targets and benchmarks for adoption by priority sectors. • Establish financial planning processes to • Feedback implementation experiences into the NEHTA PDLC. Update the implementation strategy promote efficient delivery of the NEHTA and plan. work programme Collaborate with relevant stakeholders to • Maintain the product roadmaps define and publish a product roadmaps

Notes:





4.2 Formulate initiatives, by working collaboratively with consumers, clinicians, governments and industry, to drive adoption of eHealth

Description

Summary:

Engagement across the key stakeholder groups is a key focus for NEHTA. Programme teams work with relevant reference groups consisting of representatives from consumers, clinicians, governments and industry to help define, test, refine and drive priority solutions. NEHTA will lead the uptake of eHealth, by working collaboratively to identify and drive initiatives that will foster adoption across clinician and consumer groups.

NEHTA will work with healthcare provider, industry and consumer stakeholders to ensure NEHTA products reflect clinical priorities, clinical practice, management and administration, and are delivered to enable positive clinical health management and health administration outcomes. It is NEHTA's vision that vendors will be well integrated in the NEHTA programme, and will work collaboratively with other critical partners, such as state and federal governments and private providers, to successful develop and implement compliant products.

Actions:

- 1. Engage with clinical stakeholders, including the peak bodies, divisions of GPs and jurisdictions, to ensure awareness of NEHTA work programme and to develop strategies in partnership with the specialist colleges, allied health professions and aged care to drive adoption of initiatives;
- 2. Effectively engage with consumer peak bodies to ensure concerns and adoption requirements are consistently understood and considered regarding NEHTA eHealth products and implementations;
- 3. Further develop and implement ICT Industry engagement processes, focusing on advice and innovation in formulating solutions, and incorporate their advice and recommendations where appropriate; and
- 4. Strengthening involvement across all stakeholder groups through the continuation of the Stakeholder Reference Forum, NEHTA reference groups and the Co-Chairs meetings.

Rationale:

With more eHealth solutions becoming widely available, GPs, specialists, pathology service providers, radiology service providers, pharmacists and professionals working in community settings have the potential to change the way they operate. Working collaboratively with key stakeholders to drive adoption based on high priority drivers, will deliver a sound understanding of eHealth software and solutions will enable healthcare professionals to optimise care processes and help capture a range of benefits for consumers.

Owner:

Head of Clinical Leadership and Engagement

nehta



4.2 Formulate initiatives, by working collaboratively with consumers, clinicians, governments and industry, to drive adoption of eHealth

Critical Success Factors

Summary:

- Collaboration with relevant groups, (consumers, all relevant clinical groups, jurisdictions, private sector, representative bodies, etc) to ensure NEHTA products are designed in accordance with clinical priorities and are delivered to improve clinical outcomes.
- NEHTA needs to work with select stakeholder groups to define how programme and Change Management (including clinical governance) will be delivered. Appropriate integration of NEHTA and the vendor community in governance structures.
- NEHTA and implementation partners must not underestimate the extent of change to clinical and administrative practices. The change management strategy must be tailored to the requirements of each implementation project.
- Consumer and clinician adoption should occur expeditiously, but must be balanced by minimising risk for NEHTA, consumers, and the healthcare sector.
- Understanding and appreciation of the business drivers and barriers faced by vendors.
- Clear vendor engagement strategy, including the communication processes and content that would inform and educate vendors.
- Regular updating of the vendor strategy framework, so strategic initiatives are relevant, and actions for implementation are clear.

Dependencies Map Consumers 5.5 Clinical Safety **Providers** <u>Infrastructure</u> 4.2 Formulate initiatives, by **Initiatives** Governments working collaboratively with 4.3 (1.2. 1.3. 1.4. 1.5) consumers, clinicians, **Implementations** governments and industry, to eHealth Initiatives Industry drive adoption of eHealth (2.1, 2.2, 2.3, 2.4)**Current Initiative** Dependent on Dependency for



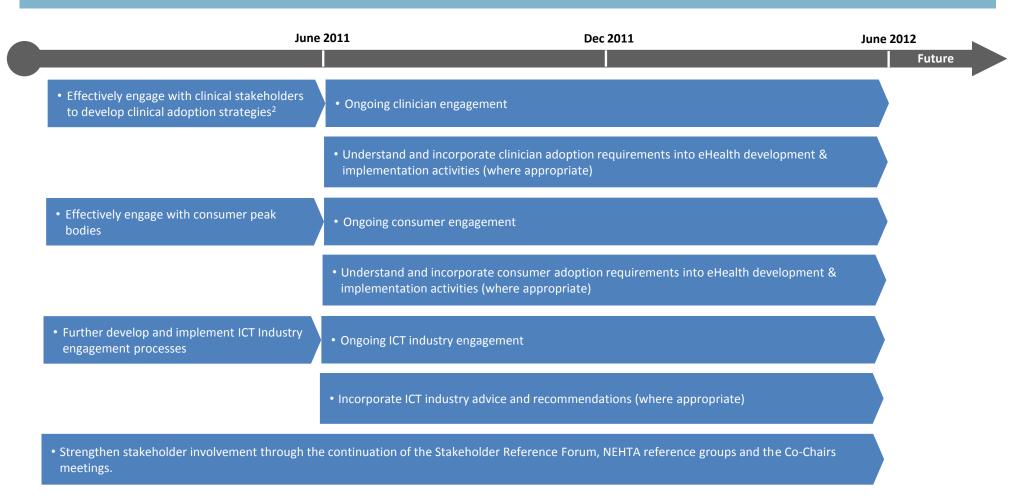
External dependency

Direction of dependency



4.2 Formulate initiatives, by working collaboratively with consumers, clinicians, governments and industry, to drive adoption of eHealth

High Level Roadmap¹



Notes:

- 1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.
- 2. Develop strategies in partnership with clinical stakeholders including the specialist colleges, allied health professions and aged care to drive adoption of initiatives





4.3 Drive the successful delivery of eHealth implementations across the nation

Description

Summary:

NEHTA has a key role in supporting the implementation of priority solutions across the public and private sectors. This strategic initiative is focused on the process of delivering all NEHTA products to end users, including foundational infrastructure and eHealth solutions, and, where relevant, supporting the components of DoHA's PCEHR. It includes delivering the early projects to gather momentum for the programme, and ensuring that 'early adopter' implementations are aligned with what is required to achieve national objectives. There will be different starting points, but over time, NEHTA will assist the entire health sector to adopt its solutions.

Actions:

- 1. Deliver the initial selection of priority HI service implementation projects;
- 2. Support 'Lead Implementation' projects, including appropriate linkage between first and second wave projects. Also ensure integration with other eHealth programmes and initiatives (e.g. with jurisdictions);
- 3. Support coordination of local and regional change management across Lead Implementations;
- 4. Establish an effective knowledge transfer process to capture and share lessons learnt from early adopter sites;
- 5. Facilitate broad / scaled rollout across the Nation in order to achieve the appropriate vision for a PCEHR;
- 6. Support National coordination between DoHA's PCEHR programme and other eHealth initiatives; and
- 7. Drive implementation capability uplift within NEHTA and eHealth sites, to ensure projects are set up for success and meet their goals. Provide vendors with a range of implementation support, such as Implementation Toolkits to assist vendors with product development.

Rationale:

Substantial progress is made along the roadmap to the National Adoption of eHealth, in that there are tangible and meaningful examples of NEHTA's work with implementation partners across the Healthcare sector. There are an increasing number of eHealth initiatives occurring in the public and private sectors, and these must be appropriately coordinated. NEHTA will take a lead role in the coordination of eHealth projects, to ensure national eHealth solution are scalable and interoperable across all sectors.

Owner:

Head of Implementations





4.3 Drive the successful delivery of eHealth implementations across the nation

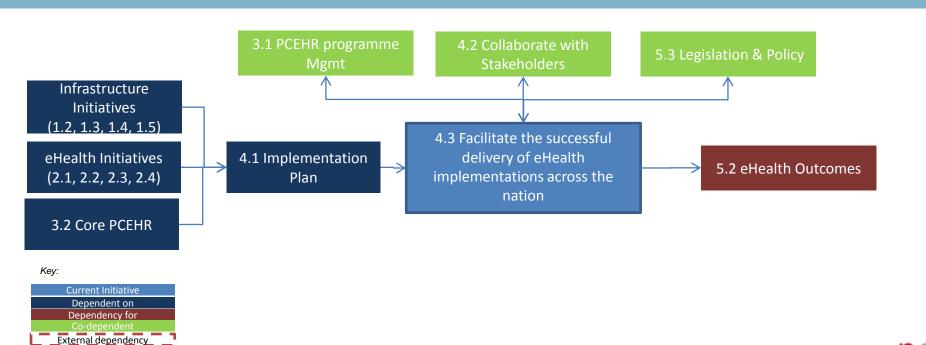
Critical Success Factors

Summary:

- Ensure an appropriate and 'up to date' framework and capability for driving implementation of NEHTA solutions across collaboration partners to further the rapid adoption of eHealth across the sector more generally, encompassing funding, implementation planning, execution, and evaluation.
- Maintain an effective implementation support team. Ensure they support collaboration partners and leverage "lessons learnt" across other implementations; and
- Priority implementations with public and private health organisations are supported in accordance with National eHealth strategy and Roadmap.

Dependencies Map

Direction of dependency







4.3 Drive the successful delivery of eHealth implementations across the nation

High Level Roadmap¹

June 2011 Dec 2011 June 2012 Future

- Deliver the initial selection of priority HI service implementation projects
- Establish an effective knowledge transfer process to capture and share lessons learnt from Lead Implementation and eHealth Sites
- Drive implementation capability uplift within NEHTA and eHealth Sites
 - Provide identified vendors with a range of implementation support, such as Implementation Toolkits to assist vendors with product development
- Support and Lead Implementation and eHealth Site projects
- Support coordination of local and regional change management across Lead Implementation and eHealth Sites
- Support National coordination between DoHA's PCEHR programme and other eHealth initiatives

 Facilitate broad / scaled rollout across the Nation in order to achieve the appropriate vision for DoHA's PCEHR

Notes:





Strategic Priority 4 - Benefits

	• The views and needs of consumers are represented in reference forums, so that these are addressed by the priority eHealth solutions.
Consumers	 Knowledge and understanding of eHealth consumer benefits, addressing key concerns. Awareness of eHealth activity and knowledge in safety and quality benefits as well as management of security and privacy.
	 Confidence that practitioners have received the required training to utilise and maximise the benefits from eHealth advancements.
	 Better understanding and improved self management as a result of additional information access by consumers.
	 Confidence that health information will be available to all providers regardless of geographic boundaries.
	 eHealth solution development, introduction and evaluation is driven by the needs of the health professionals who use the system to improve the patient's care.
	 Increased acceptance, awareness and adoption of eHealth solutions.
Dunidon	 Improved safety and quality through improved access to information and reduction in administration and "red-tape" burden
Providers	resulting in increased available consultation time. Uptake of other modalities of care delivery – e.g. telemedicine, email.
	 Data entered with one health provider is available elsewhere, thereby reducing duplication and data errors. Improved safety
	and quality throughout the healthcare system. Improved access for rural communities. Jurisdictions can leverage solutions
	implemented elsewhere.
	 Confidence that investments made in eHealth are soundly based on the needs of consumers and providers.
e disc	 Greater understanding of how eHealth investment will derive benefits and improve allocation of resources.
Funders	 More efficient and effective healthcare workforce, resulting in improved resource management.
	 Coordinated delivery resulting in economies of scale and efficiencies, benefits of which flow through to funders.
	 Assurance that eHealth solutions have been developed with input from the stakeholder groups, so that health policy
	addresses their needs.
Policy Makers	 Benefits provided by eHealth, such as improved data and information inform policy decisions.
,	 Access to better information regarding health practice changes, thus improving resource allocation across priority areas.
	Population/evidence-based data, indicators and benchmarks support informed decisions.
	• The views and needs of vendors are supported through representation in product development forums and consultation.
	 Production of software releases, packages, updates is driven in accordance with the national agenda. Vendors understand the
	implications eHealth has on the current landscape and how this will affect their business models.
Industry	 Opportunities to re-develop software and other support packages in order to best harness the benefits delivered. Market
	opportunity to focus on additional areas of improvement.
	 Reduction of modifications for packages across boundaries, due to national standards and widespread adoption.

Strategic Priority 5

5. Lead the further progression of e-health in Australia

- 5.1 Foster a continually improving organisation
- 5.2 Evaluate and communicate the outcomes delivered by e-health
- 5.3 Shape the development of legislation, regulation and policy relating to e-health and privacy
- 5.4 Provide excellence in clinical leadership in e-health
- 5.5 Collaborate on the development of national e-health clinical safety
- 5.6 Inform the governance models for e-health in Australia
- 5.7 Guide the future of e-health in Australia

Strategic priority 5 – Lead the further progression of eHealth in Australia

Description

 Previously strategic Priority 4. Strategic priority 5— Lead the progression of eHealth in Australia. This priority reflects NEHTA's leadership position in the eHealth landscape in Australia.

Rationale

- This strategic priority is closely linked to the "Governance" work stream outlined in the National eHealth Strategy.
- Initiatives in this priority reflect NEHTA's role in assurance of health in Australia – both clinical, policy and quality, how the organisation performs, measurement of outcomes and remaining at the forefront of national and international developments in eHealth.





Strategic Priority 5 – Milestones to date

Strategic Initiatives	Milestones to date			
5.1	December 2009	PMO rollout of Prince2 Project Management methodology, raising the level of project management maturity and providing a standardised set of processes.		
5.1	August 2009	The creation of the Organisational Readiness programme in order to ensure appropriate fit-for-purpose frameworks and strategies are in-place to support change within the organisation.		
5.1	December 2009	HR delivery of a suite of initiatives establishing and enhancing a performance driven culture, e.g. On-boarding, Induction and Orientation process; Talent and Succession Frameworks.		
5.1	June 2010	HR Delivery of an annualised performance review program, linking performance measures directly to the strategic plan .		
5.2	July 2010	Completion of Benefits profiles for each product in the current NEHTA work programme		
5.2	August 2010	Consolidated view of NEHTA and outputs and link to the National Health Performance Framework		
5.3	September 2009	Public consultation on healthcare identifiers, finalisation of third PIA on the HI Service design.		
5.3	November 2009	Provision of business requirements to DOHA for drafting the Healthcare Identifiers legislation, public release of the Privacy Impact Assessment for the Healthcare Identifiers Service.		
5.3	March 2010	Supporting DOHA on the development of Healthcare Identifiers Regulations, and supporting the Senate Committee review of the Healthcare Identifiers Legislation and providing advice to DOHA on Healthcare Identifiers regulations.		
5.3	June 2010	Parliament passed the Healthcare Identifiers Act.		
5.4	May 2009	Appointment of Director of Clinical Unit		
5.4	July 2009	Establishment of programme Clinical Lead		
5.4	September 2010	Establishment of Clinical Governance and Safety Review Board		





5.1 Foster a Continually Improving Organisation

Description

Summary:

Like all organisations, NEHTA will need to adapt and achieve a higher level of performance. This initiative aims to support NEHTA in its evolution, to identify and embrace continuous improvement, and to facilitate change when and where necessary. There will be changes in business capabilities as a result of changes in NEHTA's remit. There will also be ongoing focus on identifying business challenges, in measuring and analysing the performance of NEHTA, and developing and implementing business improvement initiatives, to help deliver organisation change and optimise performance.

Actions:

- 1. Evolve NEHTA's operating model, processes, and capabilities. For example:
 - Enhance the capabilities of NEHTA's staff, focusing on Leadership and Development;
 - Improve the efficiency of NEHTA's operations by adopting central resource pooling for key capability sets;
 - Development of operational and business planning activities to better reflect the refreshed strategic plan;
- 2. Continuously improve the delivery of NEHTA's products and services in line with agreed organisational priority and strategic framework;
- 3. Further integrate NEHTA's Values and Behaviours within the organisation;
- 4. Support the implementation of priority corporate systems and tools; and
- 5. Improve the measurement of organisational performance and reporting (such as a whole-of-organisation Balance Scorecard).

Rationale:

Changes in the scope of NEHTA requires careful evolution of its operating model, including processes, capabilities, and skills. As part of this journey there is the opportunity to instil an improved culture of a continually improving organisation – particularly via enhanced measurement of organisational performance. This will not only achieve operational excellence for NEHTA but also improve service for NEHTA's customers, and help optimise outcomes for the eHealth industry.

Owner:

Head of People, Culture and Change





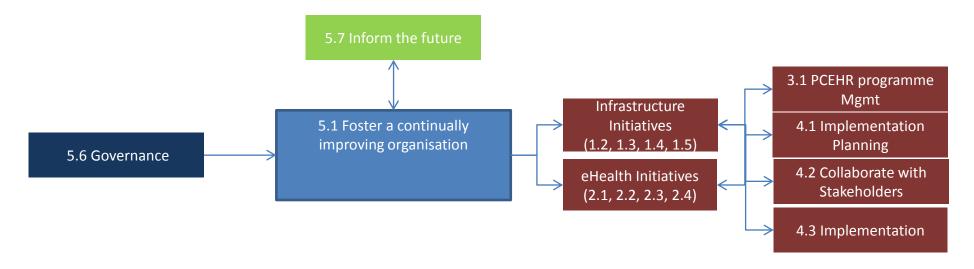
5.1 Foster a Continually Improving Organisation

Critical Success Factors

Summary:

- Pragmatic focus on organisational change
- Commitment by all NEHTA staff, particularly leadership by managers and executives.
- Use of good practice tools to measure performance (e.g. balanced scorecard)
- Deliver a 'Bootcamp' orientation programme to familiarise staff and stakeholders with NEHTA products and services.
- Adoption of a Capability Practice Model for core capability sets.

Dependencies Map



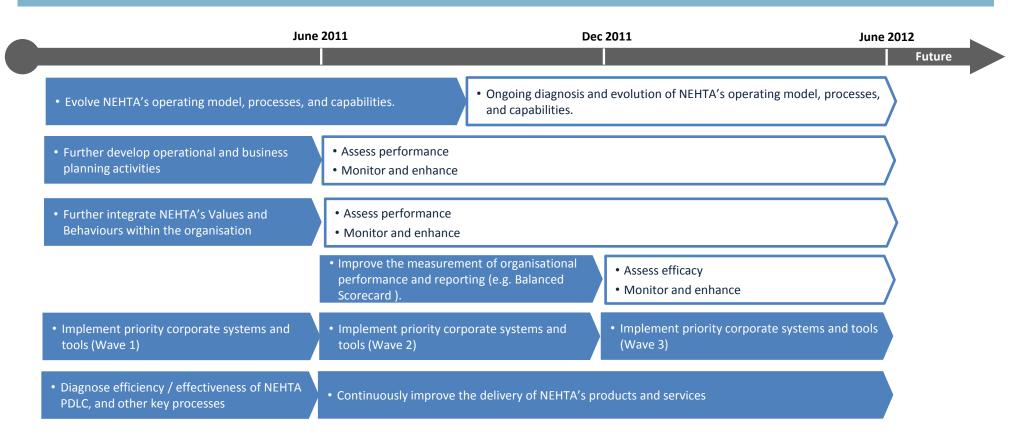






5.1 Foster a Continually Improving Organisation

High Level Roadmap¹



Notes:





5.2 Evaluate and communicate the outcomes delivered by eHealth

A framework is essential for capturing and reporting outcomes and benefits delivered through the implementation of eHealth initiatives. Data capture is extremely important due to the embryonic nature of some eHealth solutions. A comprehensive approach to evaluation, and development of key metrics, will need to be developed in order to comprehensively capture benefits such as better access to information, better health outcomes, process efficiency gains and quality and safety improvements. This will enable faster and better insights regarding programme progress, and a proactive mechanism to modify directions to improve outcomes. This initiative will also ensure that it forms the NEHTA work programme through lessons learnt and benefits achieved. 1. Develop a shared agreement of the clinical benefits that can be expected for "product related" strategic initiatives and a method for collecting data to monitor the impact of these initiatives;

- 2. Gather a consolidated view of all NEHTA outputs and the impact on the National Health Performance Framework;
 - 3. In its role as managing agent for DOHA work with the Benefits Evaluation Partner and continue to deliver consultation and research for the definition of benefits relating to a PCEHR;
 - 4. Continue to develop and refine the NEHTA methodology for benefits evaluation, and a process for ensuring NEHTA benefits requirements are captured and reported in implementations; and
 - 5. Develop an improved operating model to structure the governance and process of gathering benefits data.

Rationale: A clear articulation of the immediate, short term and long term outcomes that will be delivered through eHealth is essential to ensure ongoing support and funding for NEHTA's essential work programmes. Clinical outcomes are primary, although cost improvements and efficiency gains should also be captured, evaluated and communicated.

Owner: Head of Strategy



5.2 Evaluate and communicate the outcomes delivered by eHealth

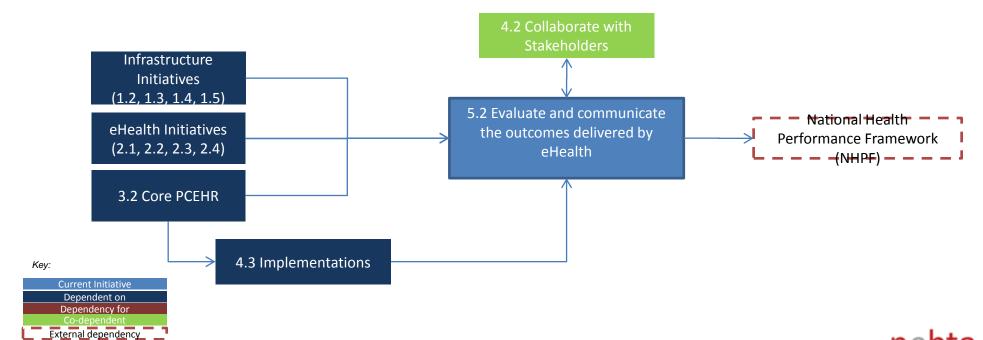
Critical Success Factors

Summary:

- Availability of national data for the metrics proposed to measure strategic initiative benefits;
- Internal Stakeholder satisfaction: programme Teams, Clinical Unit, Reference Group;
- External Satisfaction: Collaborations Partners;
- The development of a benefits operating model to ensure ongoing refinement of the benefits model and continued standardised collection and collation of data; and
- eHealth implementations are capturing appropriate data, inline with the NEHTA benefits framework.

Dependencies Map

Direction of dependency





5.2 Evaluate and communicate the outcomes delivered by eHealth

High Level Roadmap¹

 June 2011
 Dec 2011
 June 2012

 Future
 Future

- Develop a shared agreement of the clinical benefits for "product related" initiatives
- Develop a method for collecting data
- Gather a consolidated view of all NEHTA outputs and the impact on the National Health Performance Framework
- Develop an improved operating model to structure the governance and process of gathering benefits data
- Continue to consult and research the benefits relating to a PCEHR
- Continue to develop and refine the NEHTA methodology for benefits evaluation
- Develop a process for ensuring NEHTA benefits requirements are captured and reported in implementations
- Establish baseline and track benefits associated with implementation of NEHTA products and services

Notes:





5.3 Shape the development of regulation and policy relating to eHealth and privacy

Description

Summary:

NEHTA is in a unique position to influence key eHealth policy and regulation. The potential benefits for individuals and healthcare providers can only be realised through a consistent national approach to confidentiality, privacy, access, security and consent to enable information to be captured and shared with confidence.

Actions:

- 1. Develop and communicate policy advice that supports effective eHealth implementation, including advice to encourage broad adoption of healthcare identifiers and achievement of other NEHTA strategic initiatives;
- 2. Develop and communicate privacy advice across NEHTA to increase privacy protections afforded by NEHTA products that handle personal information;
- 3. Provide policy advice within NEHTA to enable achievement of other NEHTA strategic initiatives;
- 4. Actively contribute to the development of a consistent framework for eHealth e.g. NASH, SAF;
- 5. Provide privacy and policy services and advice relating to a PCEHR;
- 6. Provide analysis of medico-legal issues relating to eHealth and advice to manage any impacts on eHealth uptake;
- 7. Represent NEHTA's policy and privacy interests on the NHIRF and other forums;
- 8. Monitor and advise on developments in privacy law and community expectations in relation to the NEHTA work programme to ensure that NEHTA remains current in its privacy approach;
- 9. Monitor and advise on developments in the law, policy and governance as they relate to eHealth to ensure NEHTA provides current policy advice; and
- 10. Increase privacy awareness across NEHTA to assist staff to proactively identify opportunities to enhance privacy protections in both product development and the way in which NEHTA handles personal information.

Rationale:

Given the sensitive nature of our health information, it is not surprising that successful widespread implementation and adoption of any eHealth system will require public confidence that information can be relied upon, privacy protections are in place, and governance arrangements are adequate. This confidence will be supported by the implementation of a consistent national health information legislative framework, appropriate privacy controls built into the design of NEHTA products, and suitable governance arrangements..

Owner:

Head of Policy and Information Services





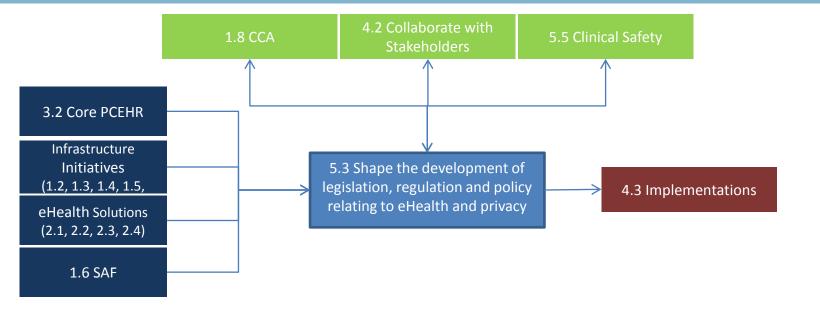
5.3 Shape the development of legislation, regulation and policy relating to eHealth and privacy

Critical Success Factors

Summary:

- The support and engagement of policy and privacy stakeholders, industry, the community and governments;
- Privacy requirements incorporated into NEHTA products are subsequently supported and adopted by policy makers; and
- Privacy and policy requirements associated with the PCEHR solution have been implemented within the 2011/12 financial year.

Dependencies Map







5.3 Shape the development of legislation, regulation and policy relating to eHealth and privacy

High Level Roadmap¹

June 2011 **Dec 2011** June 2012 **Future** • Develop and communicate policy advice that supports effective eHealth implementation • Develop and communicate privacy advice across NEHTA to increase privacy protections afforded by NEHTA products that handle personal information Provide policy advice within NEHTA to enable achievement of other NEHTA strategic initiatives Actively contribute to the development of a consistent framework for eHealth e.g. NASH, SAF • Provide privacy and policy services and advice relating to a PCEHR · Provide analysis of medico-legal issues relating to eHealth and advice to manage any impacts on eHealth uptake • Represent NEHTA's policy and privacy interests on the NHIRF and other forums • Monitor and advise on developments in privacy law and community expectations • Monitor and advise on developments in the law, policy and governance as they relate to eHealth Increase privacy awareness across NEHTA to assist staff to proactively identify opportunities to enhance privacy protections

Notes:





5.4 Provide excellence in clinical leadership in eHealth

Description

Summary:

Clinicians overwhelmingly represent the users of eHealth solutions and implementation of eHealth will by necessity occur in the places within which they work to deliver healthcare; medical practices, pharmacies, hospitals, aged care facilities and allied health practices. eHealth will also be used by those supporting the delivery of health care: practice managers, pharmacy assistants, aged care workers and administration staff. In this context it is essential that eHealth solutions are not only compatible with but reflect current clinical practices. Clinician contribution to NEHTA's work is not only critical to the success of eHealth adoption and implementation in Australia but in achieving the objectives of a safer, higher quality, more efficient and effective health system.

Actions:

- 1. Develop and implement a Clinical governance framework in NEHTA;
- 2. Establish a clinical design assurance process and embed in NEHTA;
- 3. Expand advocacy roles of the Clinical Leads in the community, including consumers, ACHS, ACSQHS, clinicians at grass roots level, and with vendors to improve engagement and drive innovation; and
- 4. Develop Clinical Lead capabilities.

Rationale:

International evidence strongly indicates that where eHealth system development has not been clinically led this has led to the failure of such systems and in some cases, significant loss of investment. The development of eHealth represents a substantial investment by the Australian Governments and lessons from overseas provide clear evidence that clinical leadership in eHealth development is critical to success. As users of eHealth systems clinician's participation in development ensures that these systems are not only compatible with, but support clinical and administrative practice in the delivery of healthcare. Importantly clinicians focus on the design of eHealth systems in terms of their capacity to delivery higher quality, safer, more efficient and effective health care that will lead to improved patient health outcomes.

Owner:

Head of Clinical Leadership and Engagement





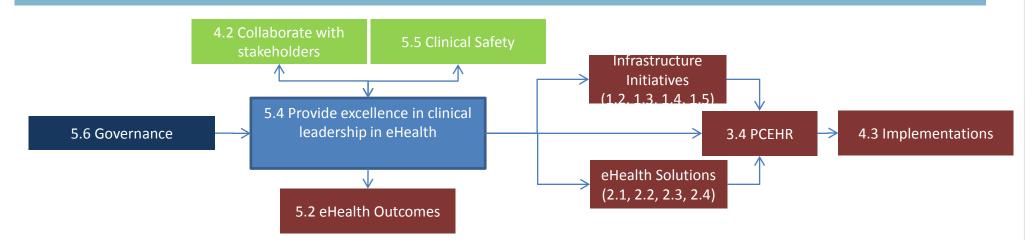
5.4 Provide excellence in clinical leadership in eHealth

Critical Success Factors

Summary:

- Clinical leadership must be reflected in NEHTA organisational culture;
- NEHTA wide Integrated Design Framework to ensure clinical input is achieved systematically with repeatability and traceability, sustained by agreed NEHTA Product Development Lifecycle;
- Sufficient staffing / resourcing of Clinical Unit to deliver breadth of deliverables;
- Development of clinical design assurance processes and capabilities of Clinical Leads in design assurance;
- Review and consolidation of clinical engagement strategies.

Dependencies Map

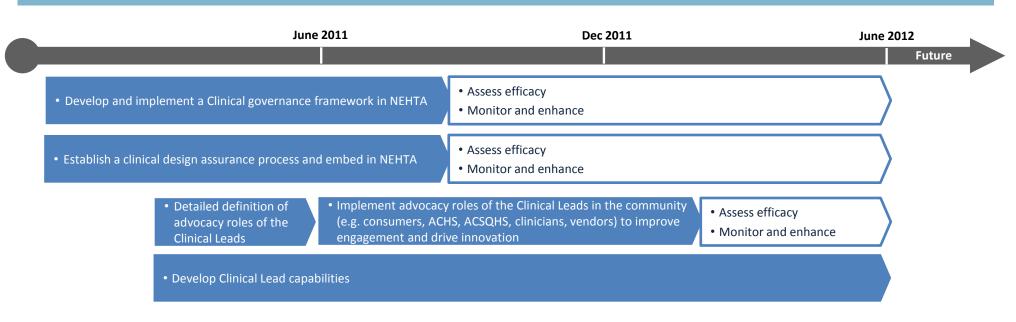






5.4 Provide excellence in clinical leadership in eHealth

High Level Roadmap¹



Notes:





5.5 Collaborate on the development of national eHealth clinical safety

Description

Summary:

NEHTA has devised a programme to help ensure the discovery and effective control of safety related risks, hazards and issues surrounding the creation and use of health technologies. The role of clinical safety is to optimise safety and quality of health care within the rollouts of clinical systems. NEHTA will play a lead role in eHealth clinical safety, but will do so by working collaboratively with the Australian Commission on Safety and Quality in Health Care, Industry Clinical Council and other relevant entities.

Actions:

- 1. Deliver baseline clinical safety assurance for priority NEHTA products;
- 2. Integrate clinical safety activities into NEHTA programmes and projects, PMO, OCP, PDLC;
- 3. Deliver Communication plan products and information on clinical safety internal/external;
- 4. Work with jurisdictions / HI to undertake clinical safety regularly;
- 5. Provide leadership and clinical safety management in eHealth in Australia peak bodies etc professional groups.

Rationale:

NEHTA product's need to be clinically safe. Moreover, due to its national role, NEHTA is also playing a lead role (with other entities) to promote eHealth clinical safety across the nation.

Owner:

Head of Clinical Leadership and Engagement





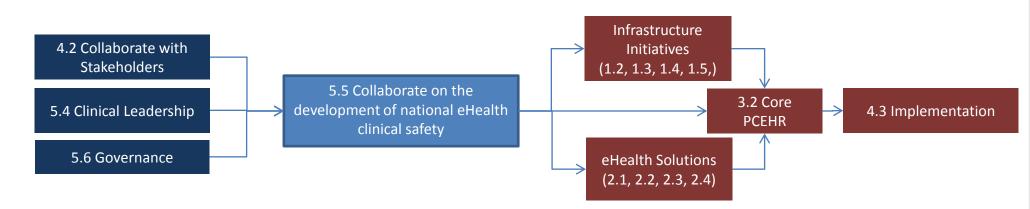
5.5 Collaborate on the development of national eHealth clinical safety

Critical Success Factors

Summary:

- Clear roles and responsibilities of clinical staff in NEHTA's product development lifecycle;
- Clear roles and responsibly between NEHTA and other entities promoting clinical safety (such as Australian Commission on Safety and Quality in Health Care);
- Communication plan integrated with broader PDLC and programme activities, incorporating all key stakeholder groups.

Dependencies Map









5.5 Collaborate on the development of national eHealth clinical safety

High Level Roadmap¹

June 2011 **Dec 2011** June 2012 **Future** • Deliver baseline clinical safety assurance for priority NEHTA products Assess efficacy • Integrate clinical safety activities into NEHTA programmes and projects, PMO, OCP, PDLC Monitor and enhance • Define • Deliver Communication plan – products and information on clinical safety internal/external communications plan Define jurisdiction clinical safety strategy • Work collaboratively with jurisdictions and other parties to undertake clinical safety for eHealth and plan Define clinical safety • Provide leadership and clinical safety management in eHealth in Australia (e.g. peak bodies, management program professional groups)

> Assess efficacy of clinical safety programs & plans

Notes:





5.6 Inform the governance models for eHealth in Australia

Description		
Summary:	As the lead organisation supporting the national vision for eHealth, NEHTA has a role to play in the governance required to manage and support the eHealth eco-system. NEHTA will need to work alongside many governments and non-government organisations such as the Department of Health and Ageing, and state health jurisdictions, Divisions of General Practice and various committees such as AHMAC.	
Actions:	 Investigate and depict the current health landscape and governance structures and compare this to international models; Engagement and participation in key Australian health governance committees – in order to influence and inform leading practice change; Conduct a series of scenario planning workshops to identify and mitigate "external" forces that may pose a risk for NEHTA in delivering its current mandate for eHealth; and Deliver a report detailing proposed recommendations to the governance structure of eHealth at the local, regional and national level. 	
Rationale:	Alongside collaboration with jurisdictional bodies, industry representatives and private health, NEHTA has a role to play in governar forums spanning local, state-wide, national and international boundaries. This is essential in order to ensure best practices are appliable all levels, and informed decisions (lessons learnt) are scalable and leveraged.	
Owner:	Head of Strategy	





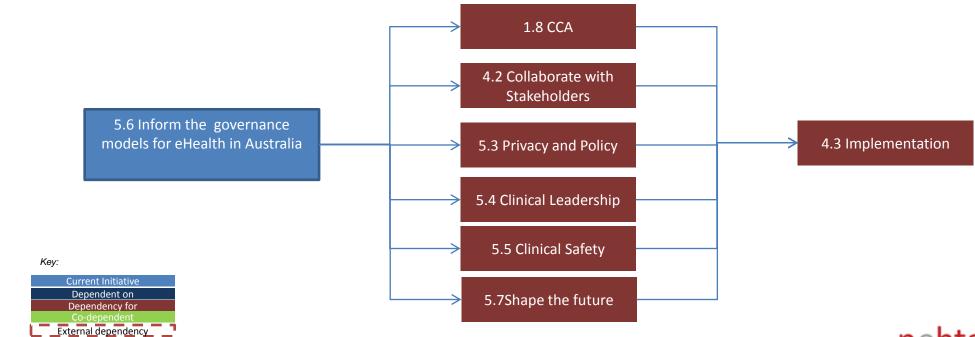
5.6 Inform the governance models for eHealth in Australia

Critical Success Factors

Summary:

- Access to and input to relevant forums;
- Empowerment to inform reform in eHealth governance.

Dependencies Map



Direction of dependency



5.6 Inform the governance models for eHealth in Australia

High Level Roadmap¹ June 2011 Dec 2011 June 2012 **Future** • Study the current health landscape and governance structures • Compare with international models • Participate in key Australian health governance committees • Influence and inform leading practice change • Conduct scenario planning • Implement risk mitigation strategies

Notes:

1. Roadmap / timeline is indicative only. Further business and implementation planning is required to refine scope and timing of Actions.

exercise to identify and mitigate

risks



5.7 Guide the future of eHealth in Australia

Description

Summary:

NEHTA will help shape the future of eHealth in Australia. This includes suggesting how eHealth can fit with and support the priority healthcare reform initiatives (e.g. Federal Government reform agenda). NEHTA will engage and collaborate across multiple forums in order to influence, learn, communicate and inform on matters relating to eHealth.

Furthermore, NEHTA will continue to plan for its future, by working with appropriate stakeholders to determine the potential remit of NEHTA into the future.

Actions:

- 1. Promote eHealth opportunities for Australia, including via communication of the NEHTA strategic plan, NEHTA blueprint and proactive contribution to the national eHealth agenda;
- Develop the NEHTA MegaPlan as a management, reporting and communication tool depicting national eHealth activity and how they
 are link dot NEHTA's strategic plan;
- 3. Develop a point of view for NEHTA's linkage to the broader health reform agenda;
- 4. Plan the future of NEHTA and the potential scope of its role in eHealth. For example, future solutions could include: co-ordination of care, care planning, e-Research, notifications, population health surveillance, Clinical decision support tools, registries, secondary use of data etc.;
- Foster initiatives that promotes and helps achieve a sustainable Australian eHealth industry;
- 6. Participate in international governance and collaboration forums, keeping up to date with the latest developments in eHealth internationally, and gaining insight on lessons learnt from other countries who have implemented eHealth systems;
- 7. Link relevant international stakeholders to NEHTA projects to ensure access to international learning; and
- 8. Connect with groups to ensure consistency in Australian adopted standards on interoperability and communication (developing local standards only when required).

Rationale:

A successful and sustainable eHealth system in Australia will require continued innovation in many areas including solution design, foundational infrastructure, policy and adoption techniques. NEHTA is to remain at the forefront of national and international developments in eHealth, as well as encourage future reform and continued improvement in order to achieve its ongoing mission.

Owner:

Head of Strategy





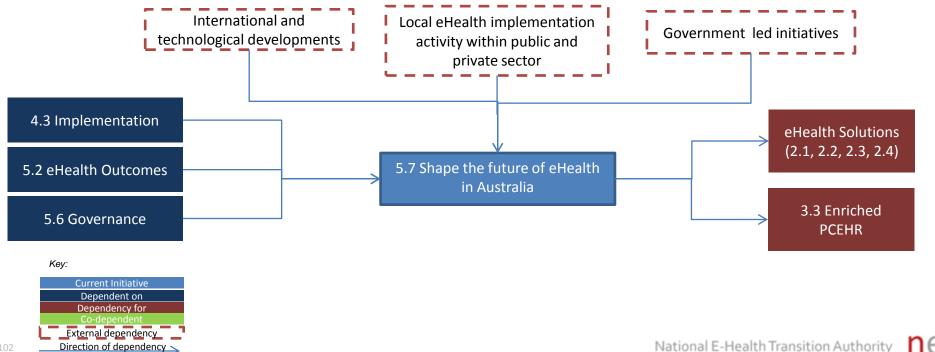


Critical Success Factors

Summary:

- Proactive planning, including collaboration with COAG, DOHA, Jurisdictions and other stakeholder groups;
- Resources with expert understanding of international agenda, including direction of eHealth, standards, etc.;
- Balance focus on enhancements to existing NEHTA products versus increasing scope to include new areas / solutions.

Dependencies Map



5.7 Guide the future of eHealth in Australia



High Level Roadmap¹

June 2011 **Dec 2011** June 2012 **Future** • Ongoing promotion / communication of eHealth for Australia (e.g. communication of the NEHTA strategic plan) Develop and implement the NEHTA Mega Plan (management, reporting and • Maintain and enhance the Mega Plan communication tool) Connect with groups to ensure consistency • Develop a point of view for NEHTA's linkage in Australian adopted standards on to the broader health reform agenda interoperability and communication • Plan the future of NEHTA and the potential • Prepare NEHTA and other entities for evolution in the scope of NEHTA scope of its role in eHealth • Deliver initiatives that promotes a sustainable • Define initiatives that would promote a sustainable Australian eHealth industry Australian eHealth industry Participate in international governance and collaboration forums. Gain insight on developments and lessons learnt from other countries Link relevant international stakeholders to NEHTA projects to ensure access to international learning

Notes:





Strategic Priority 5 - Benefits

Consumers	 Understand the broader eHealth changes planned and how they beneficially impact their future healthcare. Understand benefits achieved not just from the overall IEHR but also the individual packages. Have confidence that a framework informs the eHealth agenda, ensuring continuous improvement. The integrity, privacy and security of personal healthcare information is substantially improved. The benefits of the system become increasingly demonstrable as the system progressively moves to its full potential. Able to participate effectively in driving international healthcare.
Providers	 Greater understanding of how specific eHealth solutions are impacting practice across multiple care settings and an understanding of when changes are expected to occur. Communicated benefits increase adoption among providers, increasing the number of users and allowing even more efficiency gains. Consistent understanding and adoption of the confidentiality, privacy policy and medico-legal framework under which information is stored, managed, shared and used. Continued support for implementation of eHealth systems, based on appreciation of opportunities to benefit health outcomes for patients. Best available evidence, quality measures and benchmarks are widely used.
Funders	 Clear articulation of how funding is being distributed in the context of eHealth and how solutions are contributing to a broader IEHR. Information on benefits assists in future funding and allocation of funding. Funding is more responsive to improved and informed policy and regulatory guidelines around the eHealth packages. Overseas experience is used to understand lessons learnt and to inform the scale and rate of implementations.
Policy Makers	 Greater understanding of how different aspects of eHealth fit together, enabling better informed policy decisions. Improved understanding of decision making through captured data and a consistent focus on high impact/benefit areas. Consistent privacy and information protection regimes agreed and implemented across all States and Territories. Widespread understanding of policy and regulatory requirements and implications from international experience.
Industry	 Understanding of the broader eHealth vision and greater visibility of the eHealth landscape enables industry to plan for, and implement, new product and service offerings. Future initiatives continue to drive opportunities for products and services. International standards have been adopted in , allowing for ease of market entry, and minimal modification of products across geographic boundaries.

Table of Contents

- Introduction
- Guiding Principles
- Vision, Purpose and Mission
- Strategic Plan Review
- Dependency Map
- Appendix



NEHTA High Level Dependency Map

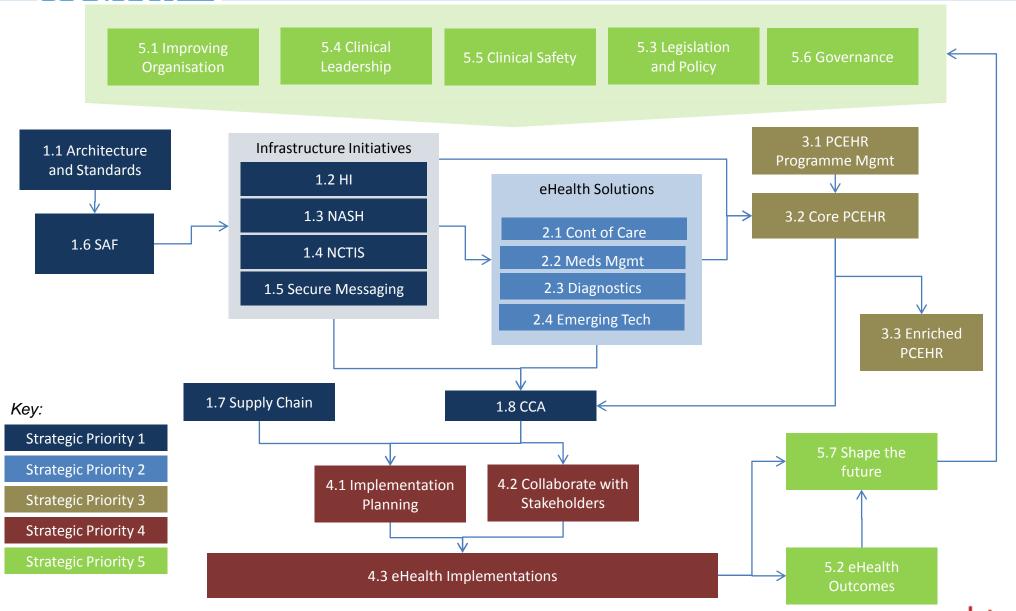


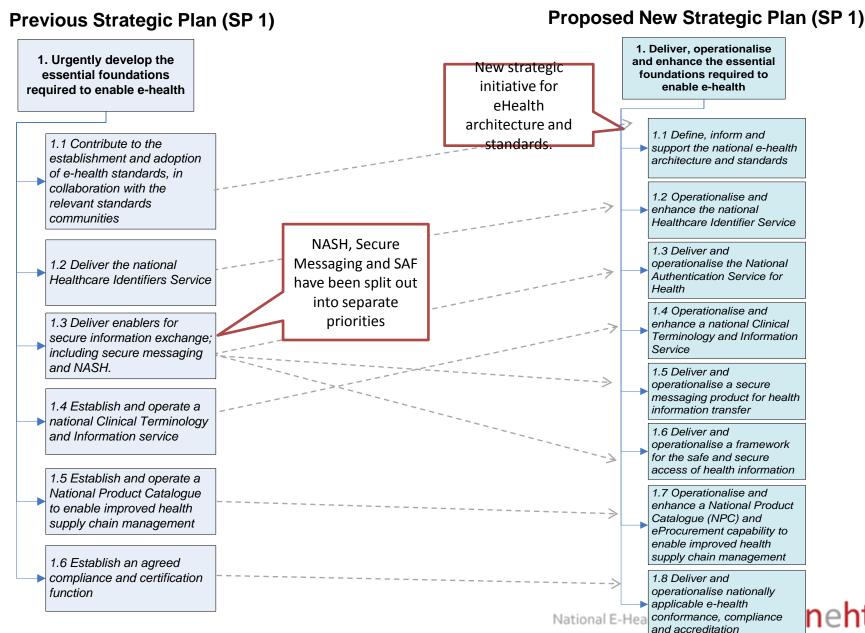
Table of Contents

- Introduction
- Guiding Principles
- Vision, Purpose and Mission
- Strategic Plan Review
- Dependency Map
- Appendix





Appendix 1 - Strategic Priority 1 - Updates





Appendix 1 - Strategic Priority 2 – No change

Previous Strategic Plan (SP 2)

2. Coordinate the progression of the priority e-health solutions and processes

- 2.1 Enable improved continuity and coordination of care through clinical information transfer
- 2.2 Enable safer and improved medication management
- 2.3 Enable improved accessto and use of diagnostic information

Proposed New Strategic Plan (SP 2)

2. Coordinate the progression of priority e-health initiatives

- 2.1 Enable improvedContinuity and Co-ordination of Care
- 2.2 Enable safer and improved Medications Management
- 2.3 Enable improved accessto and use of diagnostic information
- New Strategic initiative to capture focus on additional activities in emerging technologies,

such as TeleHealth



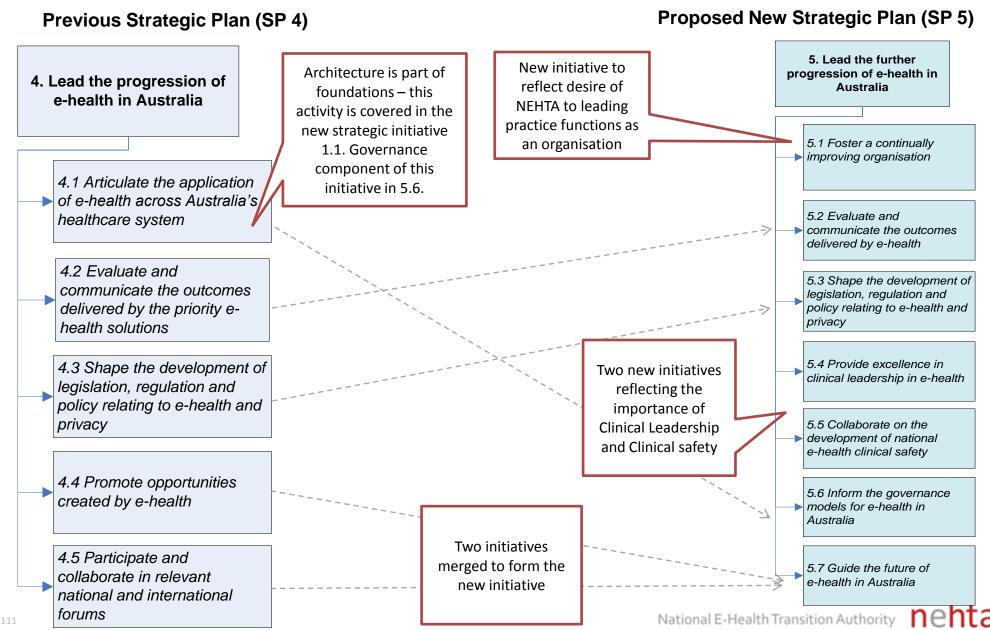


Appendix 1 - Strategic Priority 4 - Updates

Proposed New Strategic Plan (SP 4) Previous Strategic Plan (SP 3) 3. Accelerate the adoption of 4. Accelerate national e-health adoption of e-health 3.1 Enhance engagement 4.1 Maintain and continually and collaboration across key enhance the implementation stakeholder groups strategy & plan 3.2 Drive a shared understanding of e-health 4.2 Formulate initiatives by and its associated benefits Restructured working collaboratively with across the Australian consumers, clinicians, engagement, change community government and industry to and communication drive adoption of e-health initiatives 3.3 Foster workforce capacity and education to better utilise the priority e-health solutions 4.3 Drive the successful delivery of e-health implementations across the 3.4 Understand and articulate nation how health processes should change with the implementation of the priority e-health solutions 3.5 Facilitate a coordinated national approach to e-health adoption



Appendix 1 - Strategic Priority 5 - Updates





Appendix 2 - Engagement

The following forums were consulted in regards to the NEHTA Strategic Plan Refresh:

- NEHTA Executive Group (MRM and OMRM)
- NEHTA Strategy Think Tank
- NEHTA Strategy Refresh Taskforce
- NEHTA Reference group Summit (inc. SRF)
- NEHTA Clinical Leads
- NEHTA Programme Managers

Strategy Refresh Taskforce Members:

David Bunker	Toby Matheison	Bettina McMahon
Anthony Close	Andrew Goodchild	Bernadette Malmsten
Kate Ebrill	Heather McDonald	Julia Nesbitt
Sean Holmes	Sharon Dunn	Ken Nobbs
Niesje Hees	Tony Roberston	Peter Padd
Marie Howarth		

