SUBMISSION

DIGITAL HEALTH WORKFORCE CAPABILITY
TO ADDRESS AUSTRALIA'S FUTURE HEALTHCARE CHALLENGES

PRIORITIES FOR
THE 2022-23 FEDERAL BUDGET

The Australasian Institute of Digital Health (AIDH) is pleased to provide input to the Australian Government's Federal Pre-Budget Consultation process to outline the digital health sector's priorities for the 2022-23 federal budget.

The AIDH represents a community of over 30,000 people working across all aspects of the healthcare sector. The Institute has more than 250 distinguished Fellows who are experts or pioneers in the field of digital health and boasts a membership of more than 2,000 professionals comprised of clinicians, health informaticians, nurses, midwives, administrators, and health technology business leaders.

The AIDH provides objective, non-partisan, and independent advice on the use of health ICT and health informatics to not only improve the health outcomes of consumers, but to solve our healthcare system's most pressing challenges.

The AIDH's unique composition and reach brings together an extraordinary network of Australia's leading digital health experts across the private, public and community sectors to advance our transition to a digital health future.

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Investing in the future of health and aged care

With the emergence of new COVID-19 variants, the pandemic continues to place system-wide pressures on the Australian healthcare system.

Against the backdrop of a greater need for personalised care and an ageing population, barriers to access, increased costs and demand pressures, strategic investments to bring about greater efficiency and cost effectiveness are crucial.

As leaders in digital health, the AIDH stands ready to work with government to seize this unparalleled opportunity to ensure we leverage the learning of our current experiences to lead transformational change across the healthcare sector. It is imperative that we preserve the momentum gained as a result of the rapid scaling of digital health solutions in response to the pandemic.

The AIDH is strongly urging the Australian Government to invest in the digital enablement of healthcare, and in the capability required for our health system to be effectively responsive in an increasingly interdependent health and aged care landscape.

Priority 1: Addressing critical skills shortages and building the workforce of the future

An adequately skilled health workforce is the foundation of safe, effective healthcare.

Digital innovation in healthcare will continue apace, driven by consumer expectations, technology advancements and the need to improve the efficiency of our care provision. Investment in education, training and skill diversification is critical to ensure our current and future health workforce has the knowledge and competencies necessary to provide safe, effective, and innovative healthcare.

Currently, the health sector lacks a critical mass of personnel with technical expertise in computing and data harvesting, storage, and analysis.

Pre-pandemic research[1] indicated a large gap between the level of interest in digital health amongst health professionals (42%) and self-identified expertise (15%)[2]. The disparity between interest and self-identified expertise highlights the need for a stronger focus on skills development through education, professional development, and workforce diversification.

The discrepancy also indicates that curricula at a tertiary level have not yet evolved to incorporate developments in digital health and health technology.

Universities and education providers need to adopt a curriculum that incorporates current knowledge and developments in digital health, health technology and models of care to ensure clinical professionals are equipped with the right skillsets for the future.

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[1] *The Changing Face of Clinical Careers: Career pathways for health professionals beyond traditional clinical roles*, Wavelength International, Ccentric Group & Creative Careers in Medicine, 2020.

[2] It is worth noting that the survey was undertaken before the global COVID-19 pandemic. The pandemic has, by necessity, accelerated the uptake and implementation of a range of digital health innovations across the entire industry, resulting in a rapid increase in telehealth services and other technology

The low number of health professionals with self-identified digital health expertise (15%) highlights the dire shortage of core digital health competencies in the current health workforce. Addressing this shortage in short to medium term with incentivised workforce diversification should be a priority for government.

Recommendations:

1. To address current shortages, support inter-disciplinary fellowships in healthcare to incentivise young scientists, PhDs, and professionals with backgrounds in big data, cybersecurity, and other relevant backgrounds to collaborate with health professionals to develop new digital health technologies and advanced computational approaches to health

2. To build long term structural capability in digital health, support the AIDH to undertake a comprehensive consultation and engagement process to identify the barriers and opportunities for attracting necessary technical and data experts into the health sector

Priority 2: Nationally consistent standards for clinical data storage and linkage

The digital delivery of healthcare is gaining momentum. With an increased demand amongst consumers, digital health has an increasing role to play in enabling the provision of service delivery in healthcare, supporting the development of innovative models of care, promoting patient involvement in decision making, and strengthening consumer-centric healthcare.

Highlighted by the pandemic, however, was a clear lack of consistency in data storage, and capability in data linkage amongst and between pathology services, primary health providers, hospitals and public health professionals.

Efforts to investigate barriers **to real-time patient and clinical data exchange** during the COVID-19 pandemic uncovered challenges and systemic issues around governance and data sharing boundaries, notably:

- Cross jurisdictional standards adoption and sharing abilities
- Fragmentation of specialist health data
- Variability in open data standards use between states and health providers
- Lack of standardised systems and data exchange models
- Unidirectional data transfer, i.e., one-way from a clinical setting to a registry but cannot be shared back

The benefits of digital technology usage in healthcare are evident in our ability to share clinical information and data across services to support the continuum of care.

Recommendation:

1. In addition to utilising the wealth of knowledge and expertise amongst the AIDH's Fellowship and its members, support the Institute to undertake comprehensive engagement of relevant stakeholders to design a new, national model for standards in data collection, storage and sharing, that will allow real-time clinical data exchange.

Priority 3: Supporting more women leaders in digital health

The Women in Digital Health (WiDH) Leadership Program is a six -month program designed to enable women in digital health realise and develop their leadership potential. The program aims to advance the capability of leaders, organisations and the digital health ecosystem through the upskilling and empowerment of women from across the healthcare sector, in digital health.

The widely successful program can currently only accommodate one annual cohort of 25 participants, who will work with professional leadership coaches, mentors, and current leaders from across the digital health community by participating in:

- Six one-on-one coaching sessions with professional career coaches
- Three in person retreats
- Small group projects under the guidance of senior mentors, and
- Monthly webinars

Like most leadership programs, cost and time-away from home can act as barriers to participation for many women.

Recommendations:

1. Support the growth and maturation of the WiDH Leadership Program by providing funding and support to the AIDH for scaling and development that will allow multiple cohorts of participants annually.
2. To remove the financial barrier to participation, provide funding for 10 fully-subsidised scholarships annually, in the WiDH Leadership program.