

Australian Core Data for Interoperability (AUCDI) Release 1

Community Feedback Response

March 2024

This submission has been developed in consultation with AHPA's allied health association members.

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About AHPA and the allied health sector

About Allied

Health Professions Australia (AHPA)

Allied Health Professions Australia (AHPA) is the recognised national peak association representing Australia's allied health professions across all disciplines and settings. AHPA's membership collectively represents some 180,000 allied health professionals and AHPA works on behalf of all Australian allied health practitioners.

With over 200,000 allied health professionals, including 14,000 working in rural and remote areas, allied health is Australia's second largest health workforce. Allied health professionals work across a diverse range of settings and sectors, including providing diagnostic and first-contact services, and preventive and maintenance-focused interventions for people with chronic and complex physical and mental illnesses.

Allied health practitioners also support pre- and post-surgical rehabilitation and enable participation and independence for people experiencing temporary or long-term functional limitations. Allied health therefore provides an essential bridge between the medical sector and social support systems such as disability and aged care, where it can represent the key formal health support in a person's life.

Working with a wide range of working groups and experts across the individual allied health professions, AHPA advocates to and supports Australian governments in the development of policies and programs relevant to allied health. Digital health initiatives are an AHPA priority area given the need to enhance digital maturity across the sector. AHPA currently works closely with its Digital Health Working Group, the Australian Digital Health Agency (ADHA) and the Department on digital health initiatives. AHPA is developing relationships with software vendors, the CSIRO, the Australasian Institute of Digital Health (AIDH), the Medical Software Industry Association (MSIA) and others to ensure inclusion of the allied health sector into the digital health ecosystem of the future.

AHPA response to Australian Core Data for Interoperability Release 1

Current document feedback

- AHPA congratulate the Sparked Group for their collaborative working method which has produced such a high-quality product
- AHPA have liaised with our member associations regarding the document and this
 response and have no suggestions for improvement in the data groups or elements.
 However, we do note that we have not reviewed the content to the extent of checking
 each code system and/or value set for each clinical word which may be required. This level
 of review has not occurred for two key reasons; time and limited availability of people with
 both the clinical and technical skills required to do this task.
- We look forward to the addition of data elements included in the backlog and have not identified any missing aspects at this level of detail.

Roadmap data group feedback

- AHPA is in strong agreeance with the data groups currently being considered for AUCDI Release 2
- AHPA would welcome a meeting with you to gain a deeper understanding of how we can
 best provide you with use cases which will assist in demonstrating why such data groups
 should be prioritised and to apply this knowledge to three areas we strongly recommend
 are also considered for prioritisation:
 - Functional status
 - o Plan of care
 - Medical devices and equipment
- Many different allied health professions generate clinical information of importance in these data groups as we understand them. The sharing of this information is critical for consumers and other health professionals as it can lead to:
 - More readily identifying long standing vs new conditions to help understand a level of deterioration and/or urgency related to a new care scenario
 - Ensuring intended outcomes are achieved where consumers need assistance from their support network to implement a care plan
 - Ensuring other health professionals assess an individual's capacity and capability
 with any relevant devices and equipment in place, e.g., if an individual presents
 without their usual mobility devices, their independence may be assessed
 differently as compared to arriving with this in place; or if they present without
 their hearing aid, their ability to communicate may be misinterpreted.
- During the 2021/22 financial year, AHPA worked with practicing professionals from the 12 different allied health professions most prevalent among Aged Care service delivery to

determine the most critical pieces of clinical information generated which should be shared. Whilst this document requires expansion beyond an Aged Care focus, we don't envisage the content requirements at the data group level would change substantially from what we found during this work if expanded. Therefore, we consider this document, which highlights the need for the 3 data groups noted, the basis for our reasoning.

This piece of work was funded by the Australian Digital Health Agency (ADHA), therefore we have sought permission from the ADHA to share this document with you. We believe sharing this document and utilising our learnings from this work will provide a starting point for liaising with you regarding development of case studies relevant to future priority data groups. We await the ADHA to approve sharing of the document and will then provide you with the document to supplement this response as soon as possible.