

Annual Report
Business Highlights
2016 - 2017





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Who we are

Healthdirect Australia is a national, government-owned, not-for-profit organisation established by the Council of Australian Governments (COAG) in 2006.

We believe all Australians should have access, 24 hours a day / 7 days a week, to the information and advice they need to manage their own health and wellbeing. It's this vision that underpins everything we have achieved in more than 10 years of operation.

To meet the needs of our shareholders and Australian health consumers, we deliver health and related information and services through websites, contact centres, video call solutions, health service finders, mobile applications and social media.

Our expertise

We design, build, deliver and operate clinically safe services on behalf of our shareholders, with proven experience managing intricate, collaborative relationships across government and industry.

We understand complex health and social challenges and our expertise allows us to provide scalable multichannel solutions across the health, aged care, disability and social sectors.

To achieve this, we spend time understanding how Australians access health and related information and services to ensure our solutions meet the needs of individuals, and are accessible through channels that people want and expect to use.

We follow the Digital Service Standard published by the Digital Transformation Agency (DTA) to apply a user-centred design process to the development and improvement of our services.

We are committed to improving the health literacy of Australians through the ways we deliver our information and advice, ultimately empowering people to take greater control of their own health.

We use our extensive experience in strategic sourcing when establishing or improving services by contracting with globally competitive service providers, encouraging service providers to develop innovative ways to provide access to services, building capability, and managing ongoing operations.

By ensuring tender processes are robust and transparent, we can be confident that the services we manage optimise return on investment for our shareholders, while managing their risk.

Connecting with other parts of the health system

We relieve pressure on the broader health system by saving resources, time and lives. Every month, our healthdirect helpline handles almost 4,500 non-urgent calls transferred from triple zero through our Ambulance Secondary Triage service, and directs callers to the most appropriate care for their needs. We are also working with ambulance services across the country to provide information to better manage their responses to triple zero transfers from our services.

Our services don't operate in isolation - they are integrated with the wider health system, and support other services. Our service finders are embedded on state and territory health department websites, and the after hours GP helpline can now upload an encounter summary to a caller's My Health Record and securely send their usual GP practice an encounter summary to support continuity of care. We are working with the Australian Digital Health Agency (ADHA) to deliver a new contact centre for My Health Record. Primary Health Networks (PHNs) use our national infrastructure to support the health of their communities and better connect the primary and tertiary health sectors, and we partner with them to promote our services to their communities.

Clinical safety of services and information security

Our services are high quality, clinically safe and effective. Our clinical governance and risk management frameworks are applied to everything we do. We employ clinical experts to advise on all aspects of our service operations, seeking expert advice from partner organisations and external health professionals, and regularly evaluating and improving our services.

Our robust clinical governance and risk management frameworks have been accredited this year by the Australian Council on Healthcare Standards (ACHS). This demonstrates our strong commitment to clinical safety and is an assurance to our shareholders and customers of the high quality of our services.

As an organisation, we comply with the Australian Government Information Security Manual standard for information and communications technologies. We were the first organisation to have a public cloud hosted platform environment certified to this standard, and our compliance with these stringent information security guidelines enables us to confidently manage sensitive information on behalf of our shareholders.

Scalable technology solutions deliver value to health system

Our technology is part of national health infrastructure, generating significant value to the wider health system. Shared investment in the healthdirect service creates economies of scale for jurisdictions that would otherwise manage their own nurse triage helplines. Access to this national health infrastructure allows additional, bespoke state-based helplines to operate efficiently.

We have the technology and infrastructure in place to quickly scale up services where they are needed. Dedicated helplines to manage public health emergencies can be established within two hours using our existing infrastructure, and our purposebuilt web platform allows new websites to be set up without duplication of shared technology requirements.

Our shareholders

Healthdirect Australia is a public company limited by shares, and was established and is jointly funded by the Australian Government and the governments of the Australian Capital Territory, New South Wales, Northern Territory, South Australia, Tasmania and Western Australia.

We work across jurisdictional boundaries to provide accessible and quality healthcare for all Australians.















Our year at a glance

Connecting people

We work to connect all Australians with the information and advice they need to manage their own health



23.6 million visits

to our websites this year

Every **18 seconds**

one of our telephone operators manages a call





Over 100 million

information requests were made to the National Health Services Directory this year

Supporting people's needs

We provide services that support people with different needs through all life stages

3 in 10 new parents

contacted our services this year





1.65 million visits

to our medicines information this year

Over **340** service types

are listed in the National Health Services Directory



Providing multichannel access

We deliver our services through a range of channels so people can access them whenever and wherever they need them



180 service providers

used healthdirect Video Call for consultations this year



parents accessed Pregnancy, Birth and Baby via Facebook than the helpline this year





60% of people

triaged by healthdirect used the online healthdirect Symptom Checker this year

Chair's statement CEO's introduction



Continuous innovation has been a hallmark of Healthdirect Australia since its inception 10 years ago to provide a range of scalable and cost-effective information and advice services on behalf of our government shareholders.

We support people to manage their own health needs and care for their loved ones wherever they are in Australia, from pregnancy and early parenthood through to aged care.

This year, we have continued to refine and enhance our services and explore new ways to deliver information and advice.

In February 2017, Healthdirect Australia achieved accreditation from the Australian Council on Healthcare Standards (ACHS). ACHS accreditation is internationally recognised and acknowledges the reliability, safety and quality of Healthdirect Australia's health and related services.

The company has also been recognised for leadership in delivering telehealth and digital services by Standards Australia who are working with us to develop guidelines for the operation of high quality contact centres in Australia.

We are rightly proud of these achievements as we are setting the standard for excellence and will be helping to create a national benchmark for best practice.

We have achieved many goals sooner than we expected, and with a rapidly changing health environment and growing expectations around accessibility and service delivery in all aspects of people's lives, we have adjusted our strategic priorities and developed a new Strategic Plan for 2017-2020. This has involved extensive consultation and engagement with our shareholders, key industry stakeholders and partners.

We look forward to continuing to work in partnership with federal, state and territory governments to support our shareholders' goals to achieve a health system that better supports the needs of all Australians. We will do this by supporting the implementation of the national digital health strategy through the continued delivery and enhancement of innovative multichannel services which empower consumers to manage their own health.

This year, the company recorded an operating surplus due primarily to a timing difference in the receipt and expenditure of grant funding. When funds are received but not fully expended before the financial year end, this tends to show as a surplus 'profit', however the funds will be used in the subsequent year to develop and roll out services.

I would like to thank the CEO, Colin Seery, and his team for their ongoing commitment to deliver on the shareholder vision for the company and acknowledge the work of the Board and Board committees in supporting and guiding the organisation.

Patricia McKenzie, Chair



Healthdirect Australia continues to lead the way in developing accessible, actionable health and related information and services for all Australians, reducing the impact of distance as a barrier for people managing their own health issues.

This year, we celebrated a decade of operation. In this report we reflect on how far we have come: from delivering a single nurse triage helpline in 2007 to becoming an integral player delivering multichannel services across health, aged care, social services, disability and mental health sectors.

Our focus for the future is to continue delivering services in a cost-effective way, through tools like our online service finders, healthdirect Symptom Checker, Video Call, the healthdirect mobile app and our contact centres and websites.

Exploring new channels for service and information delivery increases the efficiency of our services by increasing our reach and reducing the cost of each consumer interaction with our services.

We are harnessing the power of social media to build online communities, share knowledge and help people find trusted information, tools and content in the places they are already engaged. We are prototyping and testing new delivery methods as new technologies emerge.

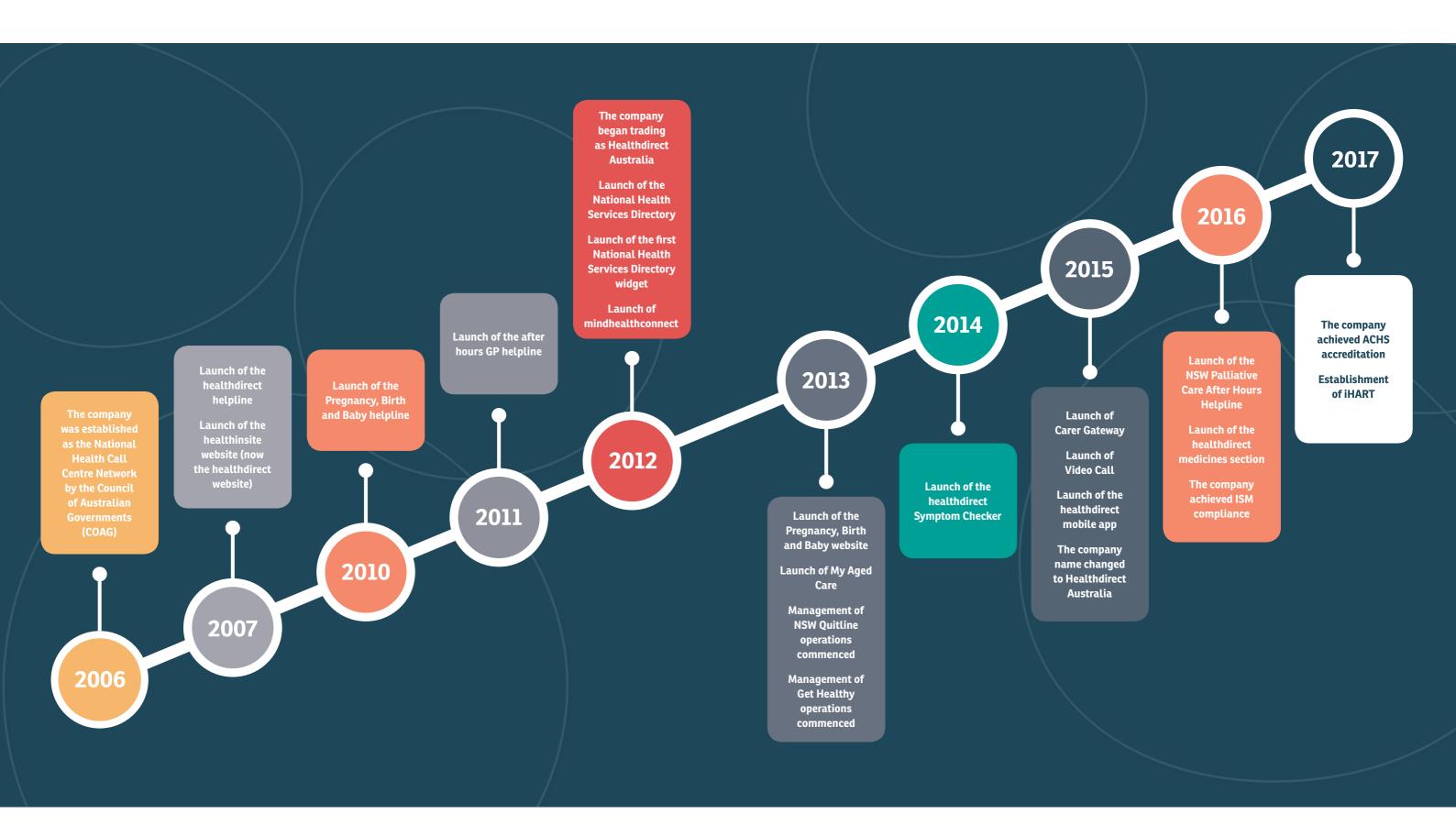
We are excited to be working with the Australian Digital Health Agency and the Digital Transformation Agency to deliver consumer-centric services, and we will continue partnering with the Department of Health, Department of Social Services and state and territory health departments to deliver on our shared goals for accessible, scalable health and social supports for all Australians.

This has been a year of consolidation and planning for the organisation and we look forward to continuing to support our government shareholders and stakeholders by providing quality, remotely-delivered health and related services.

I would like to thank all the staff at Healthdirect Australia for their passion and work towards delivering the vision set out for the company 10 years ago. I also thank our Board of Directors, under the leadership of our Chair, Patricia McKenzie, for their guidance and counsel, and thank our Standing Committee and Joint Customer Advisory Committee for their continued support.

Colin Seery, CEO

Our history Key milestones





Our history

Since establishment in 2006, Healthdirect Australia has evolved from procuring and managing a single helpline to being an industry leader in delivering multichannel services across the health, aged care, disability and social sectors.

Our national services

We were established by the COAG to deliver a national nurse triage helpline, healthdirect, which commenced operation across all Australian states and territories, except Victoria and Queensland, in July 2007.

Previously, several states and territories ran their own nurse triage helplines, and others had plans to establish similar services. The adoption of a national approach through the establishment of the healthdirect helpline enabled clinical consistency across government jurisdictions, leveraged economies of scale and avoided unnecessary duplication of effort



Turn to page 18 to read more about the healthdirect service

In July 2010, we established our second national helpline, Pregnancy, Birth and Baby, to improve access to pregnancy and early parenting information and support informed decision making for parents and carers.



Turn to page 26 to read about this year's Pregnancy, Birth and Baby activities

In July 2012, we launched the National Health Services Directory. This was a national first. Previously, multiple independently-managed directories existed across Australian states and territories to provide access to health services information. Initially, the directory was accessed directly by health professionals and health organisations via application programming interfaces (APIs) and management user interfaces.

In October 2012, we expanded the reach of the directory through the development of our first embeddable widget – an application that can be freely added to websites throughout the health system, providing access to directory information. Now, more than 100 million requests for information are made each year to the directory, through APIs, widgets, and service finders.



Turn to page 30 to read about this year's directory activities

In July 2013, we launched our first national gateway service, My Aged Care, which is the entry point for people accessing Australian government-funded aged care services. The Carer Gateway service, designed to help carers access information and support, launched in December 2015. These gateway services help people navigate complex systems by providing them with entry points that are simple to access and information that is relevant to their needs.

Up in the cloud

In 2013, we worked with Amazon Web Services (AWS) to become the first government-funded health service provider to move its infrastructure into the public cloud. This allowed us to reduce our reliance on costly physical servers, and draw on infrastructure resources as required. One major benefit is our increased responsiveness to consumer and shareholder needs.

Our first website to launch in the cloud was the Pregnancy, Birth and Baby website in 2013. We now host all the websites we manage in the cloud.

Shared technology increases efficiencies

By 2014, Healthdirect Australia was managing 12 helplines and four websites, providing further opportunities to increase efficiencies where data and technology could be shared across services.

We leveraged the power of the National Health Services Directory by making it directly accessible to staff operating our helplines, and integrated directory service finders across all our national services websites. We purpose built our Health Portal Platform (HPP), a foundation for our websites that leverages shared core components, including content and image management; an enterprise search engine; our health terminology thesaurus, which drives search results; and our automated content harvester, which collects information from partner organisation websites and republishes it on our websites.

The development of the HPP was a breakthrough in how we deliver our digital services. Many of the processes involved in content management have been automated, and everything has been built so it can be found through search. It allows us to reduce the resources required to operate our websites, and we can rapidly and efficiently set up new websites. Changes that are made to the core infrastructure require fewer resources to implement, and are simultaneously rolled out across all our services

In 2015 we became the first organisation to have a public cloud hosted platform environment, our HPP, certified to the Australian Government Information Security Manual standard for information and communications technologies, demonstrating the strength of our commitment to information security.

The development of the HPP enables a consistent experience across our services on different devices. This infrastructure development was critical to our next area of focus — enabling multichannel access to our services.

Multichannel access to triage, information and services

Our ongoing focus on multichannel access puts the consumer and their needs at the centre of service provision. We work continuously to enable access to our services across all the channels people want and expect to use, on the devices they choose

In July 2014, we launched the healthdirect Symptom Checker, an online self-guided triage tool that allows users to check their symptoms and receive personalised advice on what healthcare action to take next. Developed with input from a panel of clinicians, the tool is easy to navigate, evidence-based, and helps people who are already online searching for symptoms.

To provide even more ways to access our services, we launched the healthdirect mobile app in October 2015. Health concerns can arise anywhere, and people can now call the healthdirect helpline, access website content, use the healthdirect Symptom Checker, and find local services from anywhere they take their mobile phone.

We are continuing to explore new ways to deliver information, advice, triage and service provider details to people through the social media channels they use. With the planned release of a healthdirect Symptom Checker chatbot in Facebook towards the end of 2017, people will be able to access health information and triage through more channels than ever before.



Turn to page 29 to read about more of this year's multichannel activities

Face-to-face interactions between people and health professionals cannot be replaced by digital methods of communicating, but they can be supported by them.

In October 2015, we launched Video Call, a purpose-built suite of secure services and web-based software, to support Australians in accessing care from home, work, or wherever is most convenient. Video Call enables people to have secure, private clinical consultations via their computer or smart phone. The benefits of this technology for individuals and the wider health system are significant, including reduced travel, less separation for families and less disruption to people's lives - without sacrificing quality of care.



Turn to page 31 to read more about the unique ways Video Call is being used

Building for the future

Our story has relied on our ability to harness the power of innovation and technology to develop high quality services that deliver value for money to our shareholders. We've built our services with the future in mind, and look forward to what we can create next.

Our history



Interview with Jim Birch Chair, Australian Digital Health Agency



Jim Birch was instrumental to Healthdirect Australia's growth.

"We were set up as a vehicle to be national and we achieved something that is quite difficult to do — we supported the state and territory governments to come together to achieve a common goal for the benefit of consumers. The call centre was set up to divert people away from emergency departments, and it did achieve a very high level of acceptance from the Australian public," Jim said.

"In those early days, we were able to transform the company from a procurement service engaged with call centres to an organisation focussed on digital health. Healthdirect Australia's value was that it could rapidly produce and commission extremely high quality services that the shareholders were seeking and ensure that these services had a high level of clinical governance and efficacy," Jim said.



"I always thought from the beginning that this was an organisation that could be a leader in digital telehealth services, and it has definitely delivered on its charter and what it set out to do. I have always felt that digital services could be a game changer in healthcare and prior to a decade ago, it was gimmicky. Healthdirect Australia made me confident that there was a mechanism that worked with government."

Moving forward, Jim feels that the health industry holds many challenges where Healthdirect Australia can be an effective player.

"I think it needs to be working hand-in-glove with agencies such as the Australian Digital Health Agency. We each have a role to play. The Australian Digital Health Agency has a key goal of supporting an ecosystem for digital health in Australia and Healthdirect Australia procures and delivers services — so there needs to be a close relationship."

"The notion of establishing national projects, systems and processes in digital health will continue to be difficult in a federation," said Jim, "and that's where Healthdirect Australia's experience is so valuable, as they have already successfully bridged that gap and created national infrastructure projects."

Our range of services

We deliver a range of telehealth and digital health services. These include large scale national services and bespoke local solutions.

NATIONAL SERVICES healthdirect after hours GP helpline National Health SERVICES DIRECTORY Australian Government Australian Government







STATE SPECIFIC SERVICES



Get Healthy - NSW, Qld, SA



NSW Palliative Care After Hours Helpline - NSW



NSW Quitline - NSW



Medicines Line - WA, NT, SA, NSW, ACT, Tas

Non-occupational post exposure prophylaxis helpline - WA, SA

Residential aged care line - WA

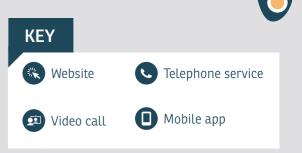
Ambulance Secondary Triage - WA, NSW

Outpatients Direct - WA

SA Parenting Helpline - SA

The Parent Line - Tas





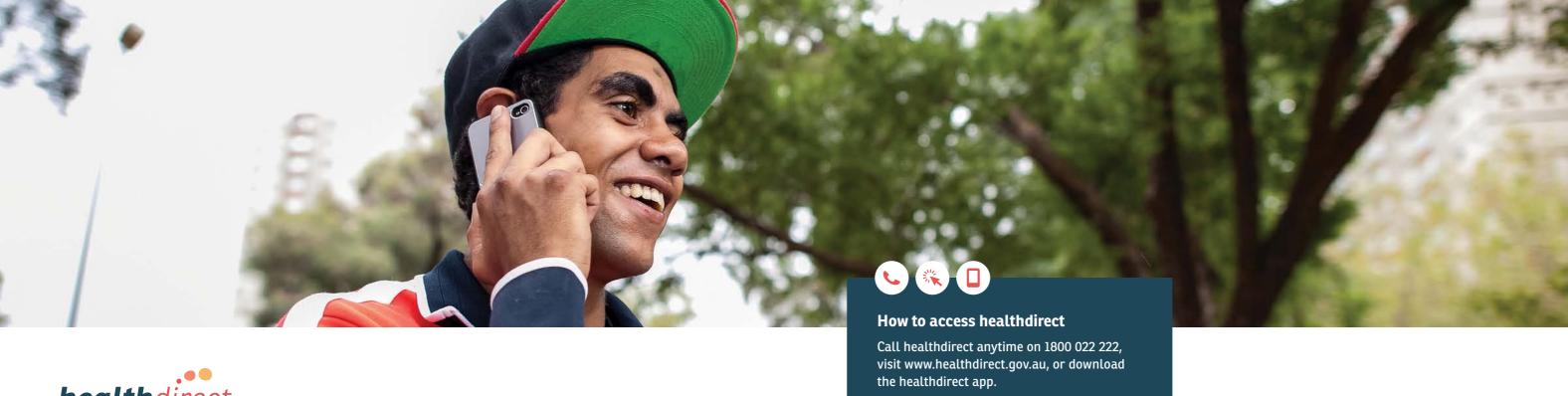




Enhancing our services

Our vision, to be a key part of a quality Australian health system, relies on our ability to better connect people and different parts of the system. We do this by enabling access to appropriate primary and tertiary care services through our helplines, websites and online tools; enabling service providers to connect with clients through our gateway services and the National Health Services Directory; and reaching more Australians by using multiple channels to communicate health information and advice.

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healthdirect provides people with 24 hours a day / 7 days a week access to health advice and health information via a nurse triage helpline, a website and a mobile app.

Callers speak with a registered nurse for triage and advice on managing their symptoms, what to do next, and when to seek further assistance from a local health service provider, such as a general practitioner or pharmacist. People using the website or mobile app can access a range of health information, check their symptoms using the healthdirect Symptom Checker tool, and locate their nearest health services using the service finder tool which is powered by the National Health Services Directory.

healthdirect has been supporting millions of Australians to manage their own health since its establishment in 2007, and had 745,288 callers and 9,722,423 online visitors this year alone. Each year we find new ways to add value to the service through enhancements to the online tools, and improvements to the way the helpline connects callers with information, advice and

A faster and more secure online experience

Almost 60 per cent of visitors access the healthdirect website using mobile devices, and the quality of mobile connections to the internet varies greatly. In January 2017, we released an upgrade to the healthdirect website which more than halved the time it takes for a web page to load. This greatly improves the user experience for people with slower mobile connections since they can now access the health information they need much faster.

Another online enhancement we have made this year has been security-based. We wanted to protect the privacy of people visiting the healthdirect website by ensuring personal information they provide to us through online forms cannot be read by third parties, such as internet service providers. To do this, we have changed the way information is transferred between web browsers and the healthdirect website so every bit of data comes via a secure hyper-text transfer protocol (HTTPS).

Every improvement we make to our services is designed to put people's needs at the centre of the experience, and aligns with the Digital Transformation Agency's Digital Service Standard the benchmark for digital service delivery in Australia.

Growing our medicines section

To support Australians who look online for medicines information, last year we launched a new medicines section on the healthdirect website which provides information about more than 7,000 medicines available in Australia. The information is sourced from a range of expert Australian organisations, including the Therapeutic Goods Administration and the Australian Digital Health Agency. More than 100,000 visitors to our medicines section each month are now accessing safe, upto-date medicines information.

This year we have continued to build the capability of the healthdirect medicines section to support people's different information needs. We have integrated the American Geriatrics Society Beers Criteria (guidelines for healthcare professionals prescribing medicines for older people) into the medicines section. When a medicine listed in the Beers Criteria is looked up online, a text box notifies the user that there are additional considerations for older people when using this medication. We have also added a link to the Australian Sports Anti-Doping Authority (ASADA) database so people can check whether a medication is prohibited in professional sport. Next financial year, we intend to provide easily understood information about the safety of medicines during pregnancy.

To make accessing our medicines section even easier, this year we developed a new widget that can be embedded into any website and allows people to directly search the healthdirect medicines pages. We have made this widget available to all our information partner organisations, encouraging their networks to access this valuable resource.



Turn to page 29 to learn more about how we are connecting with online audiences

healthdirect Symptom Checker enhancements

The healthdirect Symptom Checker is an easy-to-use, selfguided triage tool that supports people to check their symptoms and find out what to do next. Our focus this year has been on evaluating and improving the user experience. Enhancements to the initial search and symptom flows have made it easier for people to navigate the tool, increasing the number of healthdirect Symptom Checker users completing self-triage and being directed to an appropriate point of care.

Triple Zero Response Project

We are proud to partner with ambulance services across the country through secondary triage of non-urgent calls to triple zero. This year, our healthdirect helpline took more than 50,000 callers from triple zero, re-triaged them or the person they called about, and directed them to the most appropriate entry point into the health system.

"healthdirect secondary triage saves us two ambulances a day on the road in Western Australia" - Austin Whiteside, Operations Manager, St John Ambulance WA

This year, to improve the way in which the healthdirect helpline supports other parts of the health system, we collaborated with NSW Ambulance and St John Ambulance WA on a Triple Zero Response Project. Not all people who need an ambulance need an emergency 'lights and sirens' response, so we have put in place processes that allow us to provide additional clinical information to these ambulance services. The information is used to inform the ambulance service how quickly an ambulance is needed. This valuable service enhancement helps to relieve pressure on these life-saving services and will be implemented as part of the ambulance secondary triage service in August 2017.

Improving health literacy through visual content

As part of our ongoing commitment to improving people's health literacy, this year we have worked to connect with a wider range of audience types and age groups by presenting more of our information in a visual format on the healthdirect website.

Infographics have been created about key topics, such as our popular Australian insects: bites and stings guide which shows insects that commonly bite or sting humans, symptoms, and treatments in a colourful visual style that can also be printed and attached to a wall as a learning aid. We have added labelled diagrams for topics that include tracheotomy and swimmer's ear to more clearly demonstrate a procedure or condition, and we have undertaken a review of more than 850 photographs on the healthdirect website to ensure they add information and value to the content as well as visual interest.

By supporting improvements in health literacy, we better equip people to manage their own health and related issues.



Advice given

healthdirect helpline

| See a doctor (ranges from immediately to within 72 hours) | 50.9% |
|---|-------|
| Emergency department immediately | 17.9% |
| Self-care | 13.9% |
| Activate triple zero (000) | 5.5% |
| Other | 11.8% |



Top 5 caller concerns

healthdirect helpline

- Ongoing health issue with recent advice provided by a healthcare provider
- Medication question
- Abdominal pain (adult)
- Limb pain



Top 5 symptoms

healthdirect Symptom Checker

- Abdominal pain (all ages)
- Sexual health and lower body
- Diarrhoea and vomiting
- Anxiety and depression



Top 5 pages visited

healthdirect website

- healthdirect Symptom Checker
- Bleeding between periods
- Rectal bleeding
- Gastroenteritis
- Penis irritation



healthdirect

Jacqui and Eleanor



O Darwin, NT

Northern Territory mother Jacqui Sheehan has always kept the healthdirect magnet on her fridge.

Jacqui has called the helpline several times about minor ailments and for general advice for herself, her husband Troy and their children, twoyear old Ollie, and one-year old Eleanor.

Jacqui credits one call with saving baby Eleanor's life when the operator recognised her symptoms as life-threatening and called an ambulance. Eleanor was subsequently diagnosed with salmonella meningitis and had a lengthy stay in hospital, with weeks of home care afterwards.

"We'd had a gastro-bug in the house a couple of weeks prior to Eleanor getting sick. When she wasn't drinking her milk or being very interactive with us, my husband and I assumed she was still getting over the bug," Jacqui recalled.

"She was just a bit off, not really herself, and I had this niggling feeling in the back of my mind that something wasn't right."

"That evening, after a bath, I left her swaddled in her towel, laying down in the lounge room while I tended to her brother. When I walked back into the room she looked green in colour and her skin was blotchy. She was really still. I grabbed the healthdirect number from the fridge and called. The operator asked me some pointed questions like 'is she responding?', 'is she drinking her milk?' and 'is she sitting up on her own?' When I said she wasn't, the operator told me she was going to call an ambulance straight away. By now Eleanor had a really high temperature and a swollen fontanelle."

Within the next 90 minutes, Eleanor was rushed to hospital where she underwent several tests and was diagnosed with the rare form of meningitis. The family spent 16 days in hospital with Eleanor who had an intravenous line inserted in her chest.

"If it wasn't for that operator reacting so quickly and noticing the symptoms of her being limp and non-responsive as serious, then we probably would have left her until the morning and by then she might not have made it," Jacqui said.

"That operator saved my baby's life."

Eleanor is once again a happy and bouncy baby, and after their traumatic time Jacqui and her family are enjoying being back at their home in Darwin.

"I am so glad there was someone who knew better than I did and was able to help me and point me in the right direction because I wouldn't have known what to do," Jacqui said.

"I am forever grateful to that phone operator. She was professional, courteous and most of all, knowledgeable. Once she made the decision to call the ambulance, she saved my baby's life."





The after hours GP helpline is an extension of the healthdirect helpline, providing people with access to health advice and support from a telephone-based general practitioner (GP) at night, and on weekends and public holidays.

The helpline operates nationally and is designed to support people living in areas where services are limited who would benefit from speaking with a GP. Callers to the service are first assessed by a registered nurse and may be offered a call back from a GP within 15 minutes or one hour, depending on the urgency of their health issue.

Supporting continuity of care

This year, we rolled out three enhancements to the after hours GP helpline designed to support continuity of care. Callers to the helpline can now choose to:

- receive an SMS or email summarising the care advice they received
- · have an encounter summary sent securely to their usual GP practice
- · have an encounter summary uploaded to their My Health Record.

These enhancements allow people to revisit the information they received from the after hours GP helpline in their own time and with their regular GP. This is important since people who are unwell and call the service during unsociable hours may not clearly remember everything they were advised.

The connection with My Health Record also supports continuity of care by making this information centrally available for future interactions with health professionals.

Immediately following the enhancements, we found many callers to the after hours GP helpline were not aware of My Health Record or whether they had one. To help people easily learn more, we added a link in the care advice summary to online information about My Health Record. This also enhances service efficiency by removing the need for the telephone-based GP to explain the details of My Health Record to callers.



Access the after hours GP helpline via healthdirect on 1800 022 222. Outside major cities, the helpline is available weekdays between 6pm and 7:30am, on Saturdays from midday, and all day Sundays and public holidays. Within major cities, the helpline is available weekdays between 11pm and 7:30am, on Saturdays from 6pm, and all day Sundays and public holidays.

Secure transfer of information to GPs

Historically, the secure exchange of health-related information between healthcare organisations and health professionals has been via fax.

We have developed a secure messaging delivery system which uses the capability of the National Health Services Directory to send and address information electronically within the health system. In June 2017, we integrated this system with the after hours GP helpline and began to send caller encounter summaries from the service to caller's nominated GPs. Looking ahead, we will be further developing this capability while investigating additional ways secure messaging can be utilised across our services and the wider health system.



Advice given

after hours GP helpline

| Self-care advice and see a doctor/health provider within normal operating hours | 56.3 |
|---|------|
| Self-care at home | 21.6 |
| See a GP immediately | 9.0% |
| See a GP immediately (no GP available - go to emergency department) | 6.1% |
| Emergency department immediately | 6.4% |
| Other | 0.6% |



Top 5 caller concerns

after hours GP helpline

- Abdominal pain (adult)
- Vomiting
- Ongoing health issue with recent advice provided by a healthcare provider
- Cold and flu



after hours GP helpline

Gary



Gary lives in Bunbury with his partner Shanae and their one year-old son, Ruben. Late one Sunday night, Gary was struck down with a bad case of food poisoning. By speaking to the after hours GP helpline, Gary was saved a trip to the emergency department and reassured his issue was manageable at home.

"We went to a bakery in the afternoon, and I had a chicken pie," he said. "Later we had dinner, and unfortunately I brought my dinner back up again. It was about midnight, and because it was so late there were no GPs open so I rang healthdirect. I didn't want to be one of those people who goes to the hospital and takes up time at the emergency department – they've got more important things to deal with than me eating a dodgy chicken pie."

Gary was immediately put at ease by the professionalism of the nurse, and didn't feel embarrassed when explaining his symptoms.

"The nurse was fantastic. I could be open and honest with her about what was happening, and she was very professional and very calm. It was really nice to have somebody like that on the end of the phone. The nurse thought I should also speak with a GP, and they called back in less than 15 minutes – I was impressed it was so quick," he said.

"The worst thing I normally find with a call back from any service is the lack of information transfer, but the GP knew what information I'd given the nurse, and he asked me a few more questions to check exactly what was happening. I didn't

have to go through the ordeal of telling the whole story again. He explained to me what I needed to do to stay hydrated, and advised me to stay off work for 24 hours. That was useful because it was a Sunday night, and to be able to call my boss and say 'I've rung healthdirect, and they recommend I don't come in today' gives me the reassurance that I'm doing the right thing by not going to work, and reassures my boss too."

One thing Gary really appreciated was the willingness of the nurse and the GP to spend time on the phone to assess and understand his situation.

"When you go to emergency, you wonder if you're wasting everyone's time by being there, and if you should go home and take a few Panadol. With this service, it was great to speak with someone who knew what they were talking about and was happy to spend the time talking to me, and I wasn't stopping someone with more important problems being seen," he said.

Gary has taken to social media to spread the word about healthdirect and the after hours GP helpline.

"Now that I've personally used it, not only will I tell friends and family, but with our one-year-old it's great knowing that if something happens to him in the middle of the night, we have that support," he said. "I even did a Facebook status update saying how wonderful it is. It's a brilliant service."

Leveraging our data

Data from health and related services across Australia has the potential to provide insight into how we can operate and plan healthcare more efficiently for the future.

We have undertaken major research projects using our data to understand how our services add value to the wider health system now, and how we can continue to add value in the future. Research conducted uses de-identifed data to protect the privacy of individuals.

Our data demonstrates that our services and tools save resources, time and lives.

Data linkage study shows telehealth value

In June 2017, research we commissioned examining rates of compliance with healthdirect helpline advice was published online by the Health Research & Educational Trust's (HRET's) flagship publication *Health Services Research*.

Entitled 'Emergency Department (ED) attendance after telephone triage: a population-based data linkage study', the research is the largest project of its kind worldwide - one of only a few that links call data to other health services for a whole population. The research aimed to understand the subsequent service use and outcomes for callers to healthdirect.

Conducted by UNSW Sydney's Centre for Big Data Research in Health, the research linked the data of 1.2 million calls to healthdirect with records of ED presentations, hospital admissions and death registrations. The research found that only 6.9 per cent of NSW patients presented to an ED when advised to get care elsewhere, while 66.5 per cent of callers attended an ED immediately when advised to do so.

Those patients who attended an ED as advised by the healthdirect helpline had a higher level of clinical urgency than the general population of ED patients, which demonstrates the appropriateness of healthdirect's advice.

Compliance with advice from healthdirect shows the level of consumer trust in the health system and is an indicator that the system is working.

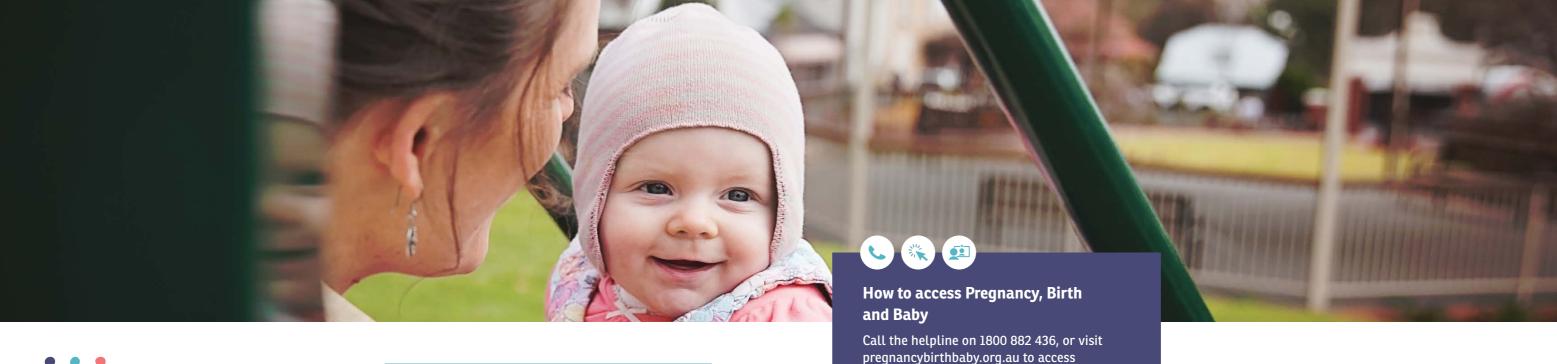
Using data to predict outbreaks of illness

When outbreaks of illness occur, a health system that is prepared in advance can ensure the right resources are in place and health professionals can be alert to watch for specific symptoms.

This year we have undertaken a project comparing demographic information and characteristics of symptoms captured by the healthdirect helpline and healthdirect Symptom Checker with data from emergency departments, pathology laboratories, general practices and an online Australian FluTracking project. Preliminary results show that our data acts as a reliable indicator of influenza-like illness, with an increase in calls to the helpline or visits to the healthdirect Symptom Checker coinciding with increased visits to EDs and GPs. Critically – for the purposes of forewarning – this increase in calls and healthdirect Symptom Checker usage occurs approximately one week in advance of an increase in positive laboratory results for influenza-like illness.

Now we have determined that our data provides accurate forewarning of influenza-like illness in the community, we are developing an online health surveillance system that can forewarn of outbreaks of influenza-like illness.

By supporting the health system to target outbreaks when and where they are occurring, we hope our health surveillance system will save resources and, potentially, save people's lives.





Pregnancy, Birth and Baby is a national telephone, video call and website service that supports parents, families and carers from pregnancy through to preschool. The service offers free information, advice and emotional support on a wide range of pregnancy and parenting topics.

In December 2015, we made improvements to Pregnancy, Birth and Baby that included having maternal child health nurses and midwives answer calls to the helpline rather than customer service operators, and catering to parents and carers of children aged up to five years (previously the age limit was 12 months). These changes were in response to extensive user research and service evaluation.

This year, we have used a range of measures to determine how these improvements have increased service quality and customer satisfaction to ensure we are delivering the best value service for our shareholders and Australian families.

With callers now speaking with qualified nurses and midwives who can help with medical issues as well as providing general information and advice, call transfers to healthdirect have dropped from 70 per cent to less than 15 per cent, which demonstrates that the new service model is far better aligned with the needs of callers. Caller surveys reveal that customer satisfaction with the service has increased from 83 per cent to more than 96 per cent.



Working with the University of Sydney, we conducted a formal service evaluation and discovered that:

- **98 per cent** of callers had, or intended to, follow the advice provided to them.
- 96 per cent of callers felt their situation had improved since following the advice they were given.
- **52 per cent** of callers would have sought advice from a hospital, GP or other doctor for help with their issue if Pregnancy, Birth and Baby was not available.

The evaluation also determined that overall, visitors to the Pregnancy, Birth and Baby website find the information useful, and confirmed that our approach to improving health literacy and supporting culturally and linguistically diverse audiences is appropriate – 21 per cent of website visitors have low levels of health literacy, and 36 per cent speak a language other than English at home.

We are extremely proud of the improvements to the Pregnancy, Birth and Baby service, and will continue to explore new ways to add value to the service.

Expanding our online content

This year, we have added a total of 65 new pieces of content to the website, with topics detailing maternity services in rural and remote Australia for each state and territory, and child behaviour topics such as bullying, sibling rivalry and discipline.

To support culturally and linguistically diverse audiences, a series of articles was published which includes support for non-English speaking families, families raising bilingual children and cultural differences within families when raising children.



Top 5 caller concernsPregnancy, Birth and Baby helpline

information, resources and video call.

Minor illness in a baby, toddler or preschooler

2 Crying/unsettled baby

3 Breastfeeding

4 Bleeding during pregnancy

5 Health and nutrition for mother and/or baby/child



Top 5 pages visited

Pregnancy, Birth and Baby website

Due date calculator

2 hCG (human chorionic gonadotrophin) levels

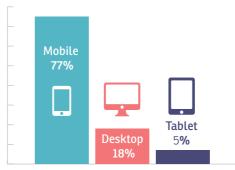
3 Foods to avoid when pregnant

4 Braxton Hicks contractions

5 Pregnancy 37 - 40 weeks



Website visits by device Pregnancy, Birth and Baby website



Going social

This year, Pregnancy, Birth and Baby has focused on increasing engagement through our multichannel initiative.

Mobile phone users represent 77 per cent of all visitors to the Pregnancy, Birth and Baby website. To connect further with this group, we are taking popular content directly to Australian parents on social media.

A series of Facebook forums was launched in June 2016, with nine forums held so far covering a range of different parenting situations such as breastfeeding, managing relationships with family over Christmas, and handling children's chocolate intake during Easter.

Our midwives and maternal child health nurses are online during the forums to give advice, answer questions and discuss some of the concerns that parents and carers may have on the featured topic.

User data shows people are extremely engaged with the forum content during and after it has concluded. We reach up to 3,500 people during a live Pregnancy, Birth and Baby forum with numbers increasing each month. Comments and questions remain on our Facebook feed so they can be shared and referred to later, with the reach of the forums peaking at up to 9,000 people in the following 48 hours.

The number of people directed to the Pregnancy, Birth and Baby website from social media platforms has grown by more than 900 per cent this year alone, demonstrating the value of the multichannel initiative.



Pregnancy, Birth and Baby

Michelle and Izabela



Michelle has used the Pregnancy, Birth and Baby helpline multiple times since the birth of her first child, daughter Izabela.

When the hospital where she gave birth provided the number for the service, alongside some other resources to take home, it wasn't long before Michelle found herself calling to ask questions of the maternal child health nurses.

"The first time I called was about a breastfeeding issue. I had a cracked nipple and I wasn't sure how to deal with it," Michelle

"The nurse told me to firstly stop feeding from that side and then continue pumping milk on that side, to allow the wound to heal. Then she told me what cream to get so it would heal faster and explained very clearly what to do. It was such a supportive call. She told me I was doing a great job and not to worry because I wasn't the first person this had happened to. It was really encouraging."

Michelle has found that calling the helpline often saves her a trip to the GP.

"Normally I ask the doctor all those little guestions that come up because there's no one else to ask. But this way I can save myself that journey and I get all the information I need over the phone at home. I trust the nurses' advice and you can tell they are up to date on the most recent child medical information by the way they deliver that advice," she said.

"When Izabela had a cold and bronchiolitis, the service told me what to do and what not to do. I found out that something I was doing wasn't recommended anymore – using vapor rub in hot water to clear her cough. It irritates the baby's sinuses but until that point I wasn't aware of that and I learned that I should take other measures to treat her instead."

Izabela is now a thriving seven month-old and Michelle happily tells friends and family about Pregnancy, Birth and Baby.

"I posted about it on my Facebook page and I tell all my friends about it. It's a fantastic service!"

Connecting with our online audience

Being present across multiple platforms is more important than ever before, as Australians go online for their information needs and expect to easily find what they are looking for.

This year, our multichannel initiative has focused on understanding and following the preferences of today's consumers, ensuring we can direct people to the most appropriate, cost-effective services and information to meet their needs on the platforms with which they interact.

Specifically, the initiative looks at how consumers are interacting with social media and explores ways in which we can integrate better with this environment. Findings from the work so far have allowed us to increase our use of social media platforms to extend the reach of our own content and resources and those of our information partner organisations.

Reaching Facebook users

With 65 per cent of Australian adults active on Facebook, it was a logical step for us to better support people to access our services via this platform.

This year, we have begun dual-publishing all new healthdirect articles via the mobile-friendly Facebook Instant Articles format, allowing people to read our content within the Facebook environment they are active in. Page load times have also decreased thanks to this new feature within Facebook, giving users a faster and more streamlined experience.

Following the success of the Pregnancy, Birth and Baby Facebook forums, we have begun investigating ways we can expand the use of this platform and the forum method to further engage with Australians on a wider variety of topics outside pregnancy and parenting.



Read about our Pregnancy, Birth and Baby forums on page 27

Developing our chatbot prototype

A chatbot prototype, to sit within Facebook Instant Messenger and replicate the functionality of the healthdirect Symptom Checker, has been developed and will be launched as part of the healthdirect service in late 2017.

A chatbot is a way for people to interact with the internet and computer systems using natural conversation. Through either text or speech, the chatbot can interpret questions and respond with appropriate content or service information based on the keywords provided. It allows services like healthdirect to serve people in additional ways, while still offering clinically safe and appropriate information.

The healthdirect Symptom Checker chatbot will respond to users in the same way that the healthdirect Symptom Checker provides a disposition based on the symptoms entered through the website or mobile app.

In addition, a pilot Facebook webchat forum is currently in development and will give healthdirect registered nurses the ability to talk to people, following the same clinical protocols as the voice contact centre, in a webchat session.

These new capabilities allow us to reach more Australians by enabling Facebook users to access our trusted health information and advice in a place where they are already actively

Increasing our reach through embeddable widgets

A widget is a self-contained web application that can be embedded into a website. Widgets increase our online reach by serving high-quality resources to more Australians in the places where they are looking for them.

In total, we have developed more than 65 widgets that deliver our content and functionality directly to the networks of other organisations. For example, a health service with a widget that accesses the National Health Services Directory can leverage our information and avoid the unnecessary duplication of building their own services directory. Our widgets can be found on the websites of our shareholders, stakeholders and information partners across Australian states and territories.

This year, we developed a new widget that provides external access to the healthdirect medicines section. People can use the widget to search for the brand name or active ingredient, if known, of more than 7,000 medicines and browse through an A-Z index of all listed medicines. People can also see if the medicine is listed under the Pharmaceutical Benefits Scheme (PBS).

Our widgets provide access from external websites to the National Health Services Directory, the healthdirect Symptom Checker, and health information content on our websites. Find out more about embeddable widgets at about.healthdirect.gov.au.





The National Health Services Directory is a key component of national health infrastructure. It is used more than 8.3 million times each month by people looking for service provider information.

The directory is a central, comprehensive, reliable and accurate online directory of Australian health and related services. It supports health professionals and the public to locate and connect with appropriate service providers, and is integrated with a range of services managed by Healthdirect Australia. The directory can also be accessed via online service finder applications from state and territory health department websites and a range of health organisation websites, including the Royal Australian College of General Practitioners (RACGP), the Pharmaceutical Society of Australia (PSA), Cancer Council Australia, Alzheimer's Australia and the Consumer Health Forum (CHF) of Australia.

Our staff invest considerable time ensuring that the coverage of service provider information in the directory is appropriate to each jurisdiction's needs. Strong stakeholder engagement with relevant health ministries, local health districts (LHDs), and Primary Health Networks (PHNs) helps us to understand the data requirements of our shareholders and customers as we continue to strive for a high level of data quality. One clear benefit of the directory to stakeholders lies in eliminating the need for duplication — a centralised National Health Services Directory means other organisations do not need to build and manage their own individual directories.

Feedback and continuous improvement

This year, the National Health Services Directory has been reviewed to determine how well it supports the data needs of the Australian health system. Overall, the directory's value is well recognised. A key recommendation was to continue to improve the quality and currency of the data; our response was to develop and implement a new framework for how directory data is managed. We are working closely with our government shareholders and the Australian Digital Health Agency (ADHA) to implement this framework, which will improve data accuracy through greater control of record management, and support more effective collaboration around data management across the sector.

Service finder applications that are powered by the National Health Services Directory are available on consumer-facing websites that we operate: healthdirect, Pregnancy, Birth and Baby, My Aged Care and Carer Gateway. In September 2016, we conducted user testing on the directory service finder application to gain insights into how people experience accessing and using the directory to find health service information. The findings were overwhelmingly positive: the directory is a valuable resource that is simple to access and use, and will increase in value over time as more service provider records are included and data accuracy is increased. We also identified some opportunities for improvement, and will be commencing an enhancement program in July 2017.

Ultimately, by combining feedback from our shareholders, the sector and individuals, we can make informed improvements to meet the needs of all directory users.

Partnerships across the health system

This year, we have explored new ways to use the information in the directory to benefit the wider health system. In June 2017, GuildLink incorporated the directory into myPharmacyLink, an app they developed to support pharmacies and their customers. Through the app, pharmacists will now be able to use the directory to connect general practice information with scripts, supporting continuity of care by quickly providing accurate details when a pharmacist needs to contact a general practitioner about a medication.

This year, we worked with Ambulance Victoria's secondary triage service to enable their clinical staff direct access to the data contained in the directory. Previously, staff used a complex spreadsheet with information about local services to direct people calling triple zero (000) to other points of care if an ambulance was not required for their situation.

Our directory team assisted Ambulance Victoria to develop their own user interface which integrates information contained in the directory with their existing clinical workflows. The interface displays appropriate service information based on the caller's situation and postcode, and benefits from the currency, accuracy and richness of the data contained in the directory – staff can see which services in a caller's area are open now and closing soon to direct people most appropriately, and can draw on location data to direct callers to their nearest services.

The new interface was piloted in April 2017, and became fully operational across the service in June 2017. We are continuing to work with Ambulance Victoria to add more data to the directory for specific use cases including mental health crises, urgent care and outreach services to further support people and direct them to timely, appropriate care.



8.3 million transactions are made using the directory every month



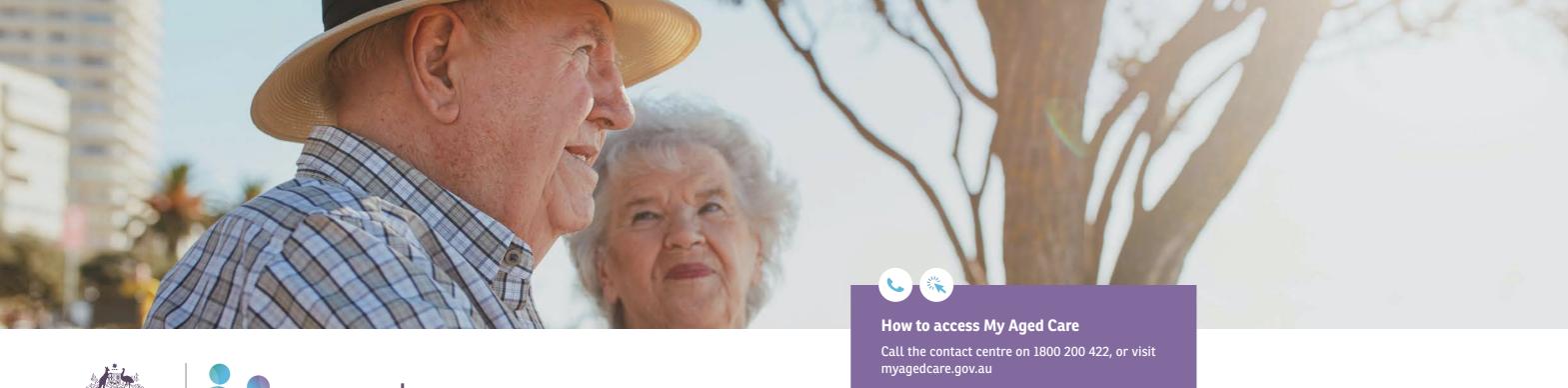
More than **170,000 service providers** are listed in the directory



More than **340 service types** are available in the directory



75 external organisations have a National Health Services Directory widget embedded in their websites







My Aged Care is the gateway to the Australian aged care system. Its purpose is to make it easier for older people, their families and carers to access information on ageing and aged care, have their needs assessed and be supported to find and access aged care services.

Established in July 2013, My Aged Care forms a key component of the federal government's ongoing aged care reform program. We work in close partnership with the Australian Government's Department of Health to deliver My Aged Care, and manage the operation of the website and contact centres which connect people with information, assessment and service providers.

Spotlight on quality

Our main focus this year has been on improving the quality of the experience people have when they contact My Aged Care. In collaboration with the Department of Health, we developed a framework which outlines several criteria that must be met for each call to the contact centre. The objectives are to provide better customer service; increase the likelihood that information collected during calls is accurate; and direct referrals to the most appropriate service provider. We want to ensure that every caller feels supported in their journey through the aged care system and confident their individual needs have been understood.

Operating more efficiently

In July 2015, My Aged Care significantly expanded when the contact centres began registering and screening clients to determine their eligibility to be assessed for aged care services. This drove unexpectedly high demand from individuals looking to access aged care services and service providers looking to connect with clients. This year, we have worked hard to deliver a better return on investment for the Department of Health through better management of high service demand. Working with the contact centre service provider, forecasting accuracy has increased and is consistently within five per cent of actual correspondence volumes, enabling resourcing to be optimised.

This year, the registration process has been streamlined to reduce the length of individual calls by 19 per cent, and referrals are being directed more appropriately – the number of referrals initially rejected by service providers has been reduced by 53 per cent. These improvements enable the contact centres to operate more efficiently, reduce the workload for aged care service providers, and support people to be directed where they need to go quickly and easily.

Supporting Increasing Choices reforms

On 27 February 2017, the Increasing Choices in Home Care reforms commenced. These reforms are designed to improve how home care services are provided to older Australians. To support the reforms, since November 2016 we have worked with the Department of Health to contact people approved for home care services to explain how the changes impact them. Operationally, we worked with the contact centre service provider to train contact centre staff in new processes for providing information and advice about the changes.

Our more accurate forecasting means our contact centres have been well prepared to manage the additional correspondence which the reforms generated.

Improving online access to the service

This year we have worked hard to improve the online experience for everyone accessing My Aged Care.

We have collaborated with the Department of Health to make it easier for health professionals, such as general practitioners and hospital staff, to directly refer their patients for services through a new online referral form that went live in August 2016. Enabling health professionals to make direct referrals to appropriate service providers gives them greater control over their patients' care. The form has also improved service efficiency by allowing 20 per cent of referrals to bypass the contact centre.

Navigation on the My Aged Care website home page has been enhanced, with new drop-down menus and additional information aimed at helping people who are getting started with accessing the aged care system.

A new, advanced search function allows people to choose additional requirements when searching for a home care package service provider — people can select if they are in a special needs group, have cultural or religious requirements, or need access to specialised services.

Every year we strive to deliver a higher quality service without additional operating expense.

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Top 5 pages visited

My Aged Care website

- 1 Find a service
- 2 Make a referral
- 3 Help at home
- 4 Aged care homes (nursing homes)
- 5 Fee estimator residential care



Top 5 caller concerns

My Aged Care helpline

- Request for aged care services
- 2 Request for client information
- 3 Inbound referral
- 4 IT enquiry
- 5 Request for public information



Top 5 enquirers

My Aged Care contact centre

- 1 Existing client
- 2 Family/friend/carer of existing client
- 3 Service provider
- 4 Assessor
 - General public



My Aged Care Martin and Maria



Sydney, NSW

Martin Cominotto's mother Maria is 90 years old, and has lived in the same house since 1958 in the Sydney suburb of Penrith. Martin lives in the house next door.

In June this year, the family GP referred Maria to My Aged Care to access some extra help at home. Within a week of referral, an assessor organised a time to meet with Maria.

"Nicole from the aged care assessment team was really nice, and spent about an hour with mum at home," said Martin.

English is Maria's second language and her hearing is deteriorating, which can make communicating difficult.

"Mum's got a hearing aid in one ear so she finds it really hard speaking with people over the phone. She doesn't know how a computer works either, so to have someone spend the time with her, and really understand what she needs was great. Nicole was able to tell her all the information she needed and it went really well," Martin said.

"Mum is a very private person, and very independent. She's still at home, cooks for herself, cleans for herself – everything's always spotless. She has said she doesn't need most of the things that Nicole suggested, but she's since asked me about getting help with a few more things she used to do independently, so it's encouraged her to think about asking for help a bit more," he said.

"It's also been great for me - while I did know that there were some aged care services, I didn't realise that there was so much help available. It's taken a lot of worry away," he said.

"With my work, I can be away for periods of time, and I know she's got another avenue if she needs help."

Before the assessment, Maria was anxious about the future.

"The assessment got Mum to realise that there are services available to help her stay in her home. Before, she felt that she really had to hang in there on her own, or get to a point where something happened and she ended up in a nursing home. She didn't want to talk about the future, but now she's openly talking about getting someone in to help with other things when they get too hard."

Martin thinks that the system works much better now than before My Aged Care was in place. "A few years ago Mum was unwell, and I tried to access some services for her then, but that didn't go anywhere and Mum was better before I even heard back from anyone. So for me, My Aged Care has worked really well, and it's much better than the old system."







Carer Gateway provides information about the services and support available for people who care for someone with a disability, chronic illness, dementia, mental illness or frailty due to age.

We manage the national service, consisting of a website and telephone contact centre, on behalf of the Department of Social Services. This was the first full year of operation for Carer Gateway, following its launch in December 2015.

Expanding our reach through online enhancements

To reach a broader range of carers in Australia, Carer Gateway continues to add content using different media forms. The creation of more video content allows people to hear directly from other carers and benefit from shared experiences – this year we have sought to profile a diverse range of carers across Australia.

Improvements to the website's search function, service finder and guided search tool help carers reach the information and resources they need quickly and easily.

Leveraging our capabilities in search engine optimisation has improved the visibility of Carer Gateway in Google search results. This year, traffic to the website has increased by 185 per cent.

Ongoing development work has led to a steady growth in organic traffic, with an approximate 20 per cent month-onmonth increase in visits to the website, while overall the service has experienced an approximate nine per cent month-on-month increase in use.

In March 2017, Carer Gateway launched on Facebook. With 12 per cent of traffic already arriving on the site through the social platform, this was a natural step in reaching more carers and taking the service's content directly to those audiences.



Turn to page 29 to read more about how we are connecting with online audiences

Focus on continuous improvement

Since launch, Carer Gateway has focused on continuous improvement, driven by user feedback. In August 2016, online surveys were introduced to the website – people are invited to recount their experience with the service and provide feedback for improvements to the website. In November 2016 surveys were also added to the telephone contact centre – people are asked to provide their feedback after they have called the service.

A 90 per cent satisfaction rating has been recorded from those surveys completed, and people have been very complimentary towards the contact centre staff.

Carer Gateway has also used user feedback to inform enhancements to the website's content and capabilities, specifically in helping carers identify with their role. It has been estimated that of the more than 2.7 million carers in Australia¹, 79 percent do not identify with being in a caring role².

Top 5 pages visited

Carer Gateway website

- 1 Payments for carers
- 2 Carers payments explained
- 3 Support for young carers
- 4 Find a service
- 5 What is respite care?



Top 3 caller concerns

Carer Gateway helpline

- 1 Request for public information
- 2 Request for carer services
- 3 Request for publication



Top 4 enquirersCarer Gateway helpline

- 1 Carer
- 2 Service provider
- 3 General public
- Family/friend of carer
- 1. ABS Statistics, Survey of Disability, Ageing and Carers, 2015, released October 2016.
- 2. Carer Service Development Research, conducted by AMR for Healthdirect Australia in 2015.



Carer Gateway

Sadie



Parramatta, NSW

Twenty-two year-old Sadie has been caring for her sister Marie for over a decade.

Marie, who is 19 and has a genetic disorder called Sanfilippo Syndrome, requires around the clock care from Sadie, her younger sister Rafgaa, mother Ramona and father George.

Carers NSW awarded Sadie the NSW Carer of the Year title in 2016. She came across Carer Gateway through her advocacy work with Carers NSW.

"It's a really good resource. I have been getting more and more familiar with the site as a service and it is so helpful and useful for carers like me," Sadie said.

Having information and services listed in one place is something Sadie feels would have been valuable several years ago – prior to Carer Gateway's launch. This was a time when she and her family were struggling to arrange respite and in-home services for Marie.

"It would have been so useful back then to go to one place and see what services are available. At that time, I made lots of calls and received little help or information," she said.

"I have come across so many other carers who don't realise they are in a carer role, so easily accessing resources like this is so important."

Sadie feels strongly that healthcare organisations and professionals must remember to consider carers when advocating for people who need care.

"Initial intervention for those people who do not realise they are caring needs to come from the organisations working in the area," said Sadie.

"If you are providing services to kids with disabilities for example, you are advocating on behalf of them. But your job is also to advocate on behalf of their family. I believe it comes down to mandatory reporting. We have an obligation to report on such things as child welfare. Why don't we put it on the record when someone is acting in a caring role."

While caring has become second nature to Sadie, she says finding time for herself is what is often most challenging for her. Over time, she has learned how to balance her role as a carer, her job in community services, her social life and now her study as she has undertaken a Master of Social Work degree.

"It's like going into a new job or starting a new career," she said.
"You don't learn everything on the first day; some things come
with familiarisation and practice. When I get time to myself now
I make sure to spend it with friends or sleep! Rest and relaxation
are key."

Sadie hopes to finish her degree in the next two years and will continue her voluntary advocacy work with Carers NSW as well as the National Youth Mental Health Foundation, headspace, where she is involved in forming a young carers support committee. Sadie plans to recommend Carer Gateway from now on to the carer community.

"I would direct anyone in a carer role to use Carer Gateway as a tool to assist in finding the services you and the person you are caring for might need," she said.



Video Call is a purpose-built, web-based platform designed to support Australians in accessing care from their home, work or wherever is most convenient. Video Call workflows reflect the way people access healthcare in person, and can be used in a range of different healthcare settings.

Video Call enables consumers to turn their smartphone, tablet or webcam into a video consulting studio. With one click, consumers can access their specialist appointment, outpatient clinic, or other health service, with the confidence that their interaction is as secure and private as a face-to-face interaction.

Video Call was first integrated with our Pregnancy, Birth and Baby service in October 2014 and operates extremely successfully to enable people access to face-to-face support from midwives and maternal child health nurses.

Increasing usage of Video Call

This year the platform has evolved, supporting health organisations in NSW, Victoria and Western Australia to integrate the use of Video Call into their everyday delivery of services. The number of clinics that are actively using Video Call each month has more than doubled, and the number of clinicians who have adopted and are successfully using Video Call has increased by more than 50 per cent.

With the capability and flexibility to integrate with a variety of health services, the software has also seen its general usage more than double, from approximately 300 consults a month to more than 700 a month.

Continued agreements with NSW Health have allowed Video Call to reach more areas of the health system and uptake across local health districts has steadily increased this year.

Work conducted with the Victorian Department of Health and Human Services has also seen Victorians benefit from the service for the first time. A total of 14 Victorian health organisations are now using the Video Call platform, including Monash Health, Eastern Health and Peter MacCallum Cancer Centre

In Western Australia, two hospitals — Princess Margaret Hospital for Children, Perth and the Royal Perth Hospital — have been benefitting from Video Call's ability to connect rural and remote Australia with their services. As a result of the hospitals' usage of Video Call, the WA Health Information and Communications Technology (ICT) Executive Board has recently approved statewide implementation of Video Call. The Board's primary function is to provide strategic direction for ICT investment in WA.

Improving support for users

This year, an enhanced Video Call Resource Centre has been established to provide users with information about the platform, including how to prepare and implement it within a healthcare organisation. There is opportunity for feedback and to raise any issues via our service support system, which is used to continuously improve the platform and manage user requests, queries and issues.



Video Call

Southern NSW Local Health District



Southern NSW

Video Call is being used in paediatrics throughout Southern New South Wales Local Health District (SNSWLHD), as part of a telehealth model being rolled out.

In a partnership between SNSWLHD, the NSW Agency for Clinical Innovation (ACI) and Healthdirect Australia, Video Call trials began between regional paediatricians and some of the district's smaller, more remote hospitals in March this year.

The success of these trials has led SNSWLHD to expand the use of Video Call across SNSWLHD's hospitals that have a paediatric unit, with the aim of supporting smaller hospitals across the district.

"The video call trials form part of the Paediatric Inpatient Telehealth model in SNSWLHD," says Kristi Payten, Paediatric Program Coordinator at SNSWLHD.

"The intention is to use a simple, existing, low technology platform to improve communication and ensure access to timely and appropriate paediatric care that will assist in standardisation of paediatric care across our smaller sites. It will also assist with decisions regarding admissions, discharge and transfers."

Feedback from families using the service has been extremely positive, with parents citing increased confidence in services, involvement in consultation and decision-making for their children as key benefits.

"Paediatricians have reported benefits relating to a more comprehensive assessment via visual observations and direct communication with the families. Medical officers in our smaller hospitals have also expressed their appreciation for the clinical support provided by paediatricians. Nursing staff have also found the tool very simple to use," Kristi said.

Video Call has allowed SNSWLHD families to benefit by keeping their children at home when unwell, avoiding transfers if the appropriate treatment can be commenced locally resulting in accelerated clinical improvement.

"Clinicians can also build relationships with regional paediatricians and can be confident in their management knowing they have the support provided by the platform," added Danielle Bos, Paediatric Clinical Nurse Consultant.

"In our first video call, a baby with bronchiolitis with associated apnoea had presented to an emergency department two hours away from a major facility. The use of video call meant the paediatrician could make an informed decision on the management of the illness," Danielle said.

"Seeing the infant and gaining a history directly from the parents led to a decision to transfer the infant to the paediatric unit in Goulburn due to her high risk age and stage of illness. This early involvement of the paediatricians supported the attending medical officer with an immediate and clear plan of care. The most appropriate mode of referral transport was decided on with confidence and the infant was transferred within a reasonable timeframe." Danielle said.

"The baby's parents appreciated being involved in the decision making and were happy with the plan of care," Danielle added.





Our network

Over the last 10 years, we have built a network of like-minded organisations that share our vision to support Australians to manage their own health.

We collaborate with our government shareholders, peak health organisations, universities, researchers, consumer groups, and a range of other industry experts to continuously explore new ways to reach more people, improve health literacy, and support better health outcomes for all Australians.

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Information partnership



In Australia, millions of people search for health information online every day. A majority of these searches send people to unverified sources from other countries, where there is no guarantee the information is either safe or relevant to the Australian health system.

Healthdirect Australia has established information partnerships with a select group of more than 180 leading Australian health organisations such as peak bodies, government agencies, research institutes, educational institutes and not-for-profit organisations. These partners provide trusted content, appropriate to the Australian health environment, that can be accessed through our range of online services.

Through our information partnerships, we are able to share specialist content with a wider audience to provide more people with the trusted information and advice they are looking for. This year, the number of links we have to information partner content reached 26,400.

Improving health literacy

Our 2016 Partner Forum brought representatives from our shareholder and partner organisations together to collaborate on innovative solutions to shared problems. This year's forum theme was 'Health literacy in action', with internationally-renowned health literacy expert Professor Don Nutbeam from the University of Sydney the keynote speaker at the event.

Professor Nutbeam spoke passionately about the need to create a genuinely accessible and usable health system, and the importance of health literacy improvements in reaching those members of the population who often get left behind.

eLearning tool

Health information is often communicated using complex language and medical terminology that can be difficult for people to understand. Forum participants took part in an interactive workshop, testing our eLearning Tool. The first of its kind in Australia, the eLearning tool is designed to support health literacy by helping people working in the Australian health system write health information in clear, simple language. It comprises four modules incorporating the latest techniques in health literacy promotion, offers practical activities to facilitate learning, and connects with a resource library so people can access and read the latest health literacy research.

Currently, the eLearning module is being piloted by 30 of our information partners to allow feedback and improvement prior to a wider launch scheduled for late 2017.

Working collaboratively across jurisdictions

This year, we have been busy with a range of collaborative projects focused on improving people's health outcomes, both here in Australia and internationally.

Developing an Australian standard for health contact centres

The delivery of health services via telephony and digital methods is an increasingly significant component of modern health systems, but without an overarching national standard, the quality of these services is inconsistent and difficult to assess.

This year, we approached Standards Australia and began collaborating to develop an Australian standard for health contact centres to support the management and governance of these contact centres in Australia. The objectives are to establish quality indicators and guide the achievement of best practice so as to provide people with an assurance of the quality they can expect from an Australian health contact centre.

The development of an Australian standard for health contact centres is widely supported by all Australian governments, and by industry, consumer organisations and contact centre service providers. We are progressing the development of the standard with Standards Australia and a range of stakeholders, with the intention of finalising the standard in 2018.

International Health Advice Round Table

A key goal of our organisation is to be internationally recognised as 'best in class' with regard to the quality and performance of our services. To achieve this, we need to compare our services with similar services operating in other parts of the world. It was this need, and a desire to do more to improve people's health, that catalysed the establishment of the International Health Advice Round Table (iHART), a telehealth benchmarking consortium, hosted by Healthdirect Australia. The first meeting of the consortium was held in London on 25 April 2017.

iHART is the first consortium of its kind, and aims to establish international best practice in the operation of telehealth services to improve health outcomes for people globally. The first meeting was attended by representatives from telehealth services operating in Australia, New Zealand, England, Wales, and two Canadian provinces – Alberta and New Brunswick. Subsequently, iHART representatives will meet annually to compare approaches to service delivery, share ideas for solving common problems, and share costs of research to develop joint solutions that ultimately provide higher standards of health care. Meetings will alternate between face-to-face sessions and via video conferencing technology.

Ouestion Builder tool

The best healthcare decisions are often made when patients and clinicians make them together. This year, in partnership with the Australian Commission on Safety and Quality in Health Care, we have developed the Question Builder, an online resource that helps people prepare for a visit to a general practitioner or specialist.

The tool is designed to enhance communication, participation and shared decision making between people and their clinicians. It works by assisting people to build a list of questions they would like to ask, and includes a list of questions their clinician might ask them. The tool supports a range of clinical interactions — whether it is a general health check, managing a chronic health condition or discussing an upcoming test or procedure, the Question Builder tool assists people to get the most out of their appointment time.

Launched in May 2017, the Question Builder is available via the healthdirect website.

Our research

To lead the way in digital health in Australia, we need to understand whether our services are meeting the needs of the people who use them. To do this, we partner with universities, leading academics and research organisations to undertake a range of research and evaluation activities. We translate research recommendations into improvements to our services and tools to maximise the value of our research and ensure we are delivering high-quality, evidence-backed solutions to current challenges in health and related industries.

Understanding the needs of under-represented groups

To support equity of access to health information and services across geographic locations and different population groups, it is critical we understand their specific needs.

We engaged the Cultural and Indigenous Research Centre Australia (CIRCA) to conduct research into how Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse groups, and people from socially and economically disadvantaged communities access and utilise our services.

The research findings were delivered in December 2016, providing valuable insights into how these groups perceive our services, the barriers they face in accessing our services (and other parts of the health system), and recommendations for culturally appropriate improvements to our services.



Key recommendations of the research included:

- further engagement with health professionals, local medical services and community groups who interact with under-represented groups, to increase awareness of and trust in our services
- enhancements to our services so they are more culturally relevant for members of underrepresented groups who engage with them
- continued focus on meeting the health literacy needs of the people who interact with our services.

We are currently translating the research findings into our service roadmaps for the next financial year, with a range of enhancements planned in areas that include user research, online content, service development, service delivery, and stakeholder engagement. For example, the Get Healthy service will have coaches available via the helpline who speak English, Cantonese and Mandarin, and a successful stakeholder engagement strategy employed by NSW Quitline to reach Aboriginal and Torres Strait Islander audiences will be expanded to other services. We are also inviting people from under-represented groups to participate in service design and development, to ensure a wider range of perspectives are included which reflect the diversity of the Australian population.

Putting people at the centre of solution design

This year, in partnership with Macquarie University and Sydney North Primary Health Network, we have been funded to commence a study into the useability of health pathways (ways which people access and use health services) in NSW. The study aims to understand the current challenges experienced by people as they navigate health pathways.

Findings from the study will inform a digital solution intended to address the challenges faced by people accessing health pathways – this will be co-designed with input from consumer groups, clinicians and health service practitioners. Before release, the solution will be evaluated for useability, feasibility and acceptance by the people it intends to assist, with an opportunity to make improvements prior to a wider release.

Through collaborative projects like this, we can better understand the end users of health pathways and services, and place people at the centre of solution design.







Our people and organisation

Our engaged staff, commitment to our company values, and strong corporate governance structure enable us to achieve our goals together. We are united by a common passion – to transform access to health information and services now and into the future, and better support all Australians to manage their own health.

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Our people

We employ a dynamic range of people with a wide variety of capabilities and experience, from clinicians with years of hands-on patient care, through to IT development, security and infrastructure teams.

By building strategic relationships – with governments, commercial vendors, industry groups, peak bodies, and the digital health community, we operate as collaborative experts, working to deliver the best solutions possible for the task at hand.

Based in Sydney, our team is a vibrant mix of permanent and contract staff, with short term workers brought in to deliver specialist skills. Working in a predominantly agile environment, we assemble flexible, skilled teams to deliver to our customers in the most efficient timeframes, with ongoing quality review and evaluation.

This year, we restructured our divisions to streamline workflows and resource utilisation across our services. This has allowed teams to deliver improved service outcomes – solving problems more effectively while quickly turning around releases and developments.

To support a culture of peer learning and continuous improvement, we have recently established Communities of Practice for several disciplines, where teams collaborate to solve real-time problems through sharing information and skills.

Our commitment to reconciliation

Healthdirect Australia is well placed to contribute to reconciliation and the Council of Australian Governments' Closing the Gap initiatives by improving health outcomes for Aboriginal and Torres Strait Islander peoples across a range of measures, including life expectancy and infant mortality.

Our commitment to reconciliation aligns with one of our organisation's primary objectives: to improve national access to quality health information, triage and advice regardless of population group or geographic location.

We worked closely with Reconciliation Australia to develop our first 'Reflect' Reconciliation Action Plan (RAP) which was officially endorsed and launched in March 2016 and completed in February 2017. Currently we are in the process of developing our second 'Innovate' RAP – deliverables are being informed by insights from our 'Reflect' RAP, and recommendations from research we commissioned into how our services are accessed and used by Aboriginal and Torres Strait Islander peoples.



Turn to page 46 to learn more about how we translate research into service improvements

Through our RAP we aim to make culturally appropriate improvements to our services, foster an inclusive environment within our workplace based on cultural awareness and respect, and build relationships that promote reconciliation within the Australian health system.

Healthdirect Australia Annual Report 16-17

Our values & culture



Our values

Developed by staff, our corporate values infuse our work and are the foundation of our culture:

- We are proud to work here
- We care about health consumers
- We share knowledge
- We provide real value
- We like a challenge.

Each quarter we recognise a staff member for their work in the spirit of one of our values. Winners of the quarterly Values Award are peer-nominated and selected by the Values Group – a committee of staff representatives from across the organisation.

Our CEO presents the winner with their award at our Staff Quarterly Update event, when we communicate progress against our strategic plans and services, and encourage teams to share information about their work and celebrate their successes.

We also recognise staff who demonstrate the spirit of our values in their work throughout the year with V-factor Awards. These are presented at our annual staff Christmas function. Some of our 2016 V-factor Award winners were Elaine McFadden, Karan Sabherwal, Tim Stokes, Adam McDowell, Janice Biggs, Robyn Linkhorn, Gabriela Hernandez, Michael Grieve and Kuru Thiru (shown in image from left to right).





Achieving international accreditation

In December 2016, Healthdirect Australia was fully accredited for four years by the Australian Council on Healthcare Standards (ACHS) for our reliable, safe and quality health and related services.

Accreditation is a formal process that is publicly recognised. It is achieved through an independent peer review process undertaken against a set of predetermined standards.

Internationally recognised, the accreditation process examined our systems, policies and procedures and measured our capacity for quality and performance improvement against the Equip5 Corporate Health Services Standards.

Equip5 Corporate Health Services Standards are specifically designed for and tailored to health services that do not provide direct patient care, but facilitate and support the delivery of safe, high quality health services.



"The Healthdirect Australia continuous quality improvement system is very well developed and demonstrates evidence of the organisation's commitment to providing safe and quality services and improving outcomes of care and service delivery."

Report of the Organisation-Wide Survey for the ACHS Evaluation and Quality Improvement Program – Corporate Health Services, Healthdirect Australia

The road to accreditation

To achieve accreditation, we participated in an organisation-wide survey during which we provided evidence against nine standards and 29 criteria.

Independent ACHS surveyors reviewed the evidence provided to support our performance against the standards. Surveyors also spoke with staff across the organisation about the work we do. We demonstrated that we have robust policies, procedures, systems and frameworks in place and that we are continually reviewing these for quality improvement.

Each criterion was rated by the organisation in a self-assessment report and then by the surveyors.

The achievement levels for each criterion are Little Achievement (LA), Some Achievement (SA), Marked Achievement (MA), Extensive Achievement (EA) and Outstanding Achievement (OA).

Of the 29 criteria, Healthdirect Australia was awarded 28 Marked Achievement (MA) and one Extensive Achievement (EA).

The Extensive Achievement (EA) was awarded to criterion 2.1.1 – 'the organisation's continuous quality improvement system demonstrates its commitment to improving the outcomes of care and service delivery', which was led by Clinical Governance.

The surveyors made no recommendations for improvement in their final report, and praised our continuous commitment to quality and safety.



"All digital design has the consumer in mind and involves engaging consumers from all geographic locations, and people with various ethnic backgrounds and abilities."

Report of the Organisation-Wide Survey for the ACHS
Evaluation and Quality Improvement Program Corporate Health Services, Healthdirect Australia

"ACHS Accreditation is not a simple 'tick the box' exercise. It's about continually improving as an organisation, ensuring health consumers are at front of mind when developing new digital and multichannel services."

Colin Seery, CEO, December 2016



Corporate Governance

In 2006, the Council of Australian Governments (COAG) established Healthdirect Australia to improve access to consistent health information for the Australian people.

We have a responsibility, and are directly accountable, to federal, state and territory governments as our shareholders and customers.

Our external and internal governance processes and committees ensure we meet legal, compliance and financial obligations while developing and delivering high quality, clinically safe services.

External Governance

Our external governance committees include the Standing Committee and the Joint Customer Advisory Committee.

Standing Committee

The Standing Committee represents the interests of our government shareholders.

The Standing Committee was established under the Australian Health Ministers' Advisory Council (AHMAC) to enable participating jurisdictions to fulfil their role as shareholders of the company and ensure appropriate communication to AHMAC. AHMAC is the advisory and support body to the COAG Health Council. The Standing Committee reports to the COAG Health Council and AHMAC via the Community Care and Population Health Principal Committee, a principal committee of AHMAC.

The Standing Committee is responsible for:

- approving the company's Strategic Plan
- appointing directors to the Board
- liaising with the Board and the CEO to advance policy and priority issues
- fulfilling shareholder functions as required by the Constitution and Shareholders' Agreement including attending the Annual General Meeting and reviewing the annual performance of the company.

Joint Customer Advisory Committee

The Joint Customer Advisory Committee (JCAC) represents the interests of the federal, state and territory governments as customers.

The role of the JCAC is to review and monitor the service and performance level of operations and to provide advice to the company on the identification and resolution of relevant customer and consumer issues, including health policy issues.

The JCAC meets with Healthdirect Australia representatives quarterly, and reports to the Standing Committee.

Internal Governance

Our internal governance structures include Healthdirect Australia's Board and three Board sub-committees: the Clinical Governance Advisory Committee; the Finance, Risk Management and Audit Committee; and the Project Review and Workplace Health and Safety Advisory Committee.

Healthdirect Australia Board

We are governed by a Board of independent, non-executive Directors. The Board is skills-based and appointed by our shareholders. The Board is accountable to our shareholders for overall strategic direction, management and corporate governance of the company.



Turn to page 58 to learn more about our Board Directors

The Board has established three internal governance committees to assist it in carrying out its responsibilities.

The Clinical Governance Advisory Committee (CGAG) supports the Board in ensuring our telephone and online services are nationally consistent, high quality, safe and sustainable.

The CGAG advises the Board on clinical governance and clinical risk management. The CGAG manages our clinical governance framework to ensure clinical safety, quality control and to facilitate continuous quality improvement.

The CGAG includes the following Board members: Professor Anthony Lawler, Dr Michael Beckoff and Dr Julie Thompson. The CGAG also includes three external members:

 Dr Jenny Bartlett, an experienced clinician and medical administrator now consulting in clinical governance and healthcare improvement.

- Dr Scott Clarke, a psychiatrist who has worked in clinical and administrative roles for more than two decades in both the United States and Australia.
- Professor Mary Chiarella, a Professor of Nursing at the University of Sydney Nursing School and an internationally renowned nurse leader with a distinguished career in nursing services.

The Finance, Risk Management and Audit Committee (FRMAC) supports the Board in ensuring the integrity and robustness of our financial reporting, risk management processes and internal controls. It oversees and monitors the effectiveness of our risk and compliance frameworks and coordinates the company's internal and external audit functions.

The FRMAC consists of the following Healthdirect Australia Board members: Wayne Cahill, Patricia McKenzie, Peter Dowling and Jane Muirsmith.

The Project Review and Workplace Health and Safety Advisory Committee (PROWAC) meets on an ad hoc basis, as determined by the Board, and with such members as the Board determines at that time. The PROWAC oversees and monitors the progress of key projects within the company's project portfolio and advises the Board on project governance and portfolio risk.

Other committees

We have additional committees that have been established to represent customer and consumer interests for a range of services we provide.



Turn to page 60 to learn about one of these: the healthdirect Service Improvement and Development Committee

Our Board



Our Board guides the strategic direction of Healthdirect Australia, with the current Board of Directors appointed in January 2016.

Ms Patricia McKenzie, Chair LLB, FAICD

Patricia is an experienced chair and director in the energy, government, health and not-for-profit sectors. Patricia is Chair of Essential Energy, owning and operating Australia's largest electricity network and a non-executive director of the APA Group, the largest natural gas infrastructure company in Australia.

Patricia was formerly a Director of Transgrid, Australian Energy Market Operator Limited and Macquarie Generation; CEO of Gas Market Company Limited; Chair of Sunnyfield Limited; and Chair of Diabetes Australia.

At Healthdirect Australia, Patricia is Chair of the Board, a member of the Finance, Risk Management and Audit Committee (FRMAC) and a member of the Project Review and Workplace Health and Safety Advisory Committee (PROWAC).

Dr Michael Beckoff, Director MBBS, FACRRM, FAICD

Michael is a procedural rural generalist with 40 years experience, currently working as a locum in regional, rural and remote areas of Australia.

Michael holds several corporate roles in health. He is a Director and Vice President of the Australian College of Rural and Remote Medicine (ACRRM); Director of Rural Doctors Workforce (RDWA) in South Australia; Clinical Adviser for Country Health South Australia Local Hospital Network (CHSALHN); Chair of the Board of the Murray Mallee GP Network (MMGPN); and Chair of the SA Statewide Committee for Shared Care with General Practice.

After graduating from the University of Adelaide and completing post-graduate training positions, Michael joined Bridge Clinic at Murray Bridge SA in 1977, where he was an equity partner for 33 years. Other previous roles include Inaugural Member of the SA Health Performance Council and Chair of General Practice SA.

At Healthdirect Australia, Michael is a member of the Clinical Governance Advisory Group (CGAG).

Mr Wayne Cahill, Director BHA, LLB, MCom, FCHSM, FAICD

Wayne has been a partner of a major law firm for more than 25 years, specialising in commercial health and aged care work, and has previously held chief executive positions of health organisations.

Wayne is a Director of Navy Health and a member of their Audit and Compliance Committee and Remuneration and Nomination Committee.

Wayne has been a Director and Chairman/President of the Australasian College of Health Services Management and a Director of HealthQuest, Blake Dawson Partners Superannuation Fund, the Health Services Association of NSW, Institute of Magnetic Resonance Research, Macquarie Area Health Service and the Skin and Cancer Foundation Australia.

At Healthdirect Australia. Wavne is Chair of the Finance, Risk Management and Audit Committee (FRMAC) and a member of the Project Review and Workplace Health and Safety Advisory Committee (PROWAC).

Mr Peter G. Dowling AM, Director Mrs Jane Muirsmith, Director BA (Acc.), FCPA, FAICD

Peter is an accountant and former Ernst & Young Partner. An experienced company director and independent audit and risk committee member, Peter's current board appointments include Metro South Hospital and Health Service, TAFE Queensland and WorkCover Queensland among others.

Peter's independent audit and risk committee roles include Queensland local governments and state agencies. In 2007 Peter was made a Member of the Order of Australia for services to accountancy and the community.

At Healthdirect Australia, Peter is a member of the Finance, Risk Management and Audit Committee (FRMAC).

Professor Anthony Lawler, Director BMedSci, MBBS, FACEM, GAICD, MBA (Health Mgmt)

Anthony is the President of the Australasian College for Emergency Medicine, and a practising emergency physician in Tasmania.

Anthony is Professor of Health Services at the University of Tasmania.

Anthony is also a member of the Australian Medical Council's Specialist Education Accreditation Committee, sits on the National Health and Medical Research Council (NHMRC), and is a member of the Council of Presidents of Medical Colleges.

Anthony is a Director of the International Federation for Emergency Medicine, and of the Postgraduate Medical Education Council of Tasmania.

Anthony has a broad range of experience in medical representative roles, including as a member of the Federal Council and Federal Executive of the Australian Medical Association, and as President of the Tasmanian Branch of the Australian Medical Association.

At Healthdirect Australia, Anthony is Chair of the Clinical Governance Advisory Group (CGAG).

BCom (Hons), FCA, MAICD

Jane is an experienced digital and marketing strategist, having held several executive positions in Sydney, Melbourne, Singapore and New York.

Currently Jane is Managing Director of Lenox Hill, an organisation which specialises in helping companies and government develop their digital capabilities. Jane is the former Head of Digital at Bankwest, part of Commonwealth Bank. Before that, she was Head of Online and Lead Global Advisor for Merrill Lynch based in New York, and is also the former worldwide Head of Marketing, e-Business for Deloitte.

Jane is a non-executive director of Australian Finance Group (AFG), Chair of the Western Australian (WA) Business Advisory Group of the Institute of Chartered Accountants, a member of the University of Western Australia Ambassadorial Council and is a former President of the Women's Advisory Council to the WA Government.

At Healthdirect Australia, Jane is a member of the Finance, Risk Management and Audit Committee (FRMAC) and a member of the Project Review and Workplace Health and Safety Advisory Committee (PROWAC).

Dr Julie Thompson, Director MBBS, GradDipEd, FAICD

Julie is a procedural general practitioner in rural Victoria and an experienced Director on a range of health-related Boards.

Julie is currently a Director of South Eastern Melbourne Primary Health Network (SEMPHN) and Chair of the National Quality Management Committee of BreastScreen Australia.

Julie has been a Director of the Rural Workforce Agency Victoria (RWAV), Chair of the Australian Divisions of General Practice (ADGP), Chair of General Practice Divisions Victoria (GPDV), and President of the West Gippsland Healthcare Group (WGHG).

Julie has broad experience in health service development having served on a range of advisory groups including the Victorian Ministerial Advisory Committee on Mental Health (MACMH), the Victorian Ministerial Advisory Committee on Surgical Services (MACSS), the Australian Health Ministers' Advisory Council (AHMAC) National Mental Health Working Group, the AHMAC Joint Action Group on Population Health, Cancer Australia's Advisory Council and Australian Pharmaceutical Advisory Council (APAC).

At Healthdirect Australia, Julie is a member of the Clinical Governance Advisory Group (CGAG).



Melissa Cadzow healthdirect Service Improvement and Development Committee



Melissa Cadzow is the consumer representative on the healthdirect Service Improvement and Development Committee (SIDC). Melissa is a representative on several boards and committees, including the Women's and Children's Health Network Governing Council, the Australian Digital Health Agency Consumer Advisory Committee, the Australian Health Practitioner Regulation Agency Community Reference Group and the Australian Digital Health Agency Pathology Steering Committee. Melissa is passionate about health consumer voices being included in decision making.

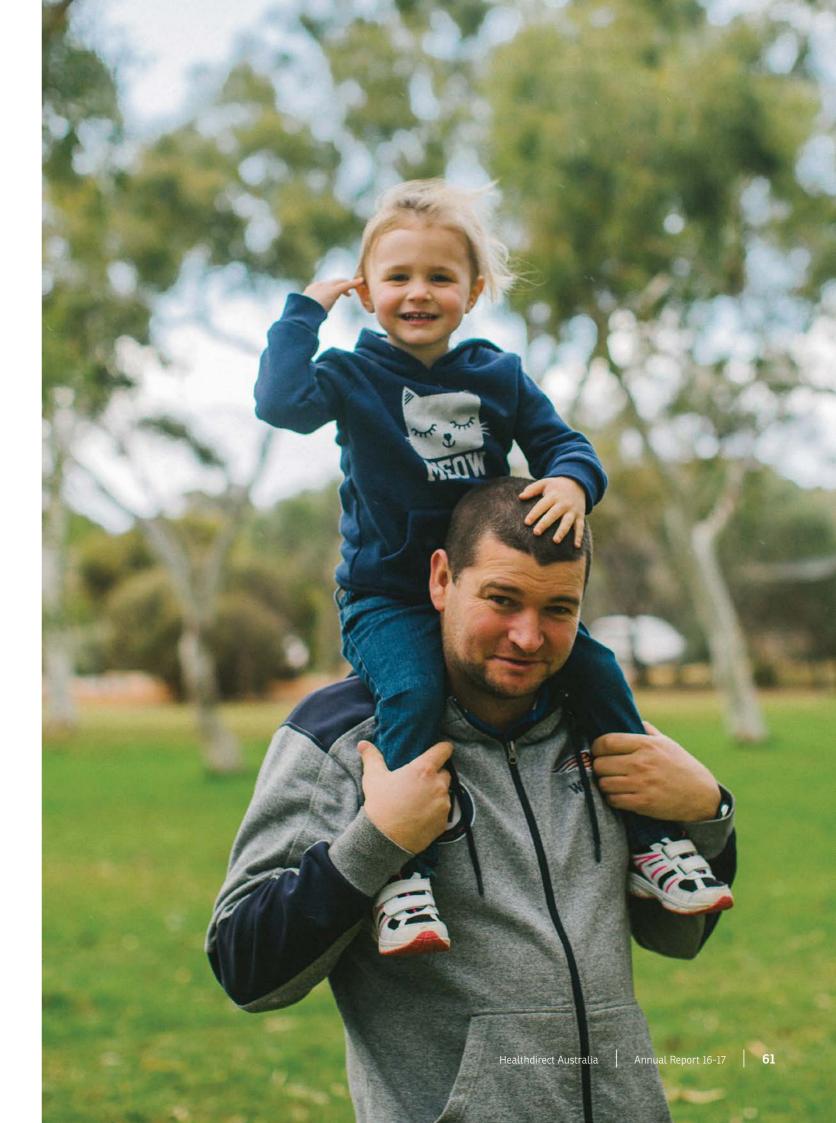
Before joining the healthdirect SIDC, Melissa was a regular user of the healthdirect service and was even a consumer tester for the healthdirect mobile app.

"The healthdirect SIDC's objective is to review the processes, operations and performance of the healthdirect website, healthdirect mobile app, healthdirect service finder, and healthdirect Symptom Checker to ensure the delivery of safe, effective, appropriate, consumer-acceptable, accessible and efficient services and tools. It is also tasked with identifying and implementing opportunities for improvement. I bring a consumer perspective to these discussions," Melissa said.

"As a health consumer, I've served on several boards and committees over the past 14 years. I have broad interests in the areas of consumer-centred care and meaningfully partnering with consumers, as well as special interests in digital health and children's health. I feel it is essential that the consumer voice contributes at a strategic level," Melissa said.

"I appreciate the services Healthdirect Australia provides – they make a real difference to consumers and their families with evidence-based quality health information, so I was eager to be part of the ongoing improvement process of the online services via this committee," Melissa said.

"Nowadays, I turn to the healthdirect Symptom Checker or the healthdirect website first, and read the articles. I only call if I need to discuss the issue further. Over the years, healthdirect has helped me identify when to take my family immediately to hospital, the GP or to self-care at home."



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