

Queensland Health

Digital

Information

Strategy

2022–2027

*A plan for Queensland's state-funded
mental health, alcohol and other drug services to 2027*



Queensland
Government

Acknowledgement of Country

Queensland Health acknowledges the Traditional and Cultural custodians of the lands, waters and seas across Queensland, pay our respects to Elders past and present, and recognise the role of current and emerging leaders in shaping a better health system. We recognise the First Nations peoples in Queensland are both Aboriginal peoples and Torres Strait Islander peoples, and support the cultural knowledge, determination and commitment of Aboriginal and Torres Strait Islander communities in caring for the health and wellbeing of our peoples for millennia.

Recognition of lived experience

We recognise the lived experience of those impacted by substance use, mental illness and suicide and the contributions made by families, friends, carers and staff towards their recovery.

*Mental Health Alcohol and Other Drugs Healthcare
Digital Information Strategy 2022–2027*

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Foreword

The Mental Health Alcohol and Other Drugs (MHAOD) Healthcare Digital Information Strategy (the strategy) guides continued focus and action towards advancing healthcare and outcomes for Queenslanders with mental health and substance use issues, through digital health innovations and integrated information.

In developing this strategy, understanding the needs and expectations of our partners has been fundamental in designing how we seek to leverage information into the future.

The strategy:

- **Defines the capabilities to deliver fundamental benefits** for consumers by enabling opportunities for greater collaborative care through information access and digital innovation
- **Provides a strategic framework for digital and information initiatives** for Queensland Health funded mental health and alcohol and other drugs services which recognises information as a strategic asset in the delivery of an information-enabled mental health alcohol and other drugs healthcare system
- **Identifies critical strategic initiatives to ultimately deliver information** that service providers, planners and funders need to improve care and outcomes for Queenslanders with mental health and substance use issues
- **Defines programs** that align to relevant state and national policy, planning and information strategy documentation
- **Outlines targeted technology** recommendations to continue the transition to an information-enabled future state.

Vision

Advancing healthcare and outcomes for Queenslanders with mental health and substance use issues, through digital health innovations and integrated information.

Introduction

The strategy provides a framework which answers the strategic question – How can we improve the experience and outcomes for consumers of Queensland Health funded mental health, alcohol and other drugs services, through digital health innovations and better integrated information over the next five years?

The intended outcomes of the strategy will inform the planning, funding and delivery of mental health alcohol and other drugs healthcare by Queensland Health and service providers. It provides a framework of digital and information initiatives to uplift our current capabilities and deliver benefits to our consumers, service providers and workforce.

Service context

Queensland Health supports the statewide development, delivery and enhancement of safe, quality, evidence-based clinical and non-clinical services in the specialist areas of mental health and alcohol and other drugs treatment.

The importance of information to the reform of the sector is a continuing focus for national and state policy and planning. Integrated planning and information sharing initiatives across service providers and care settings is an enabler in the delivery of optimised healthcare outcomes for consumers. Queensland Health's mental health program has an established information capability, which has supported service delivery and reforms. This includes a statewide MHAOD clinical electronic record capability, known as the Consumer Integrated Mental Health and Addiction (CIMHA) application; and the Mental Health and Addiction Portal (MHAP), which provides Business Intelligence capability to the sector.

Furthermore, the enhancement of digital and information capability is a wider MHAOD strategic priority in the delivery of safe, quality and efficient healthcare.

Strategic drivers

This document seeks to address strategic drivers that call for an uplift in the information capability. These include ongoing growth in service demand, opportunities to improve consumer engagement and efficiency, and state and national priorities for MHAOD services delivery. Examples of these are the need to support priority reforms outlined in the *Mental Health: Productivity Commission Inquiry Report (2020)*, and alignment to the *Queensland Health Systems Outlook to 2026 (2020)* objectives of Transform, Optimise and Grow.

The strategy considers different information and digital priorities for:

Consumers – *How can digital innovation improve my outcomes and recovery?*

Clinical and non-clinical service providers – *How can information and technology deliver efficiencies and improve safety and quality in care?*

The broader workforce – *How can insights be used to support the MHAOD service strategy, improve system delivery, and inform service planning?*

Wider government – *How can we optimise digital investment to meet wider strategic directions?*

Targeted outcomes

This strategy builds on the established capability to align with evolving consumer and service requirements. The goal is an information-enabled and efficient mental health alcohol and other drugs healthcare system providing the following outcomes:

- **Shifting to digitally enabled healthcare** supporting improved continuity of care and clinical outcomes
- **A seamless care experience** for consumers via integrated digital services and technologies
- **Unlocking the potential of our information** to inform governance, planning and improvement
- **Strengthening the alignment of information and digital priorities** with the broader Queensland Health and national health ecosystem.

Strategy development

The strategy has considered State and national strategy and policy...

Queensland MHAOD context

- *Connecting Care to Recovery 2016–2021* (2016)
- *Better Care Together: A plan for Queensland's State-funded mental health, alcohol and other drug services to 2027* (2022)
- *Shifting minds: Queensland's Mental Health, Alcohol and Other Drugs Strategic Plan 2018–2023* (2018)

Queensland Health and digital context

- *Health Consumers Queensland – Digital Health Consumer Charter* (2020)
- *My health, Queensland's future: Advancing health 2026* (2016)
- *Queensland Digital Clinical Charter* (2019)
- *Queensland Health Information Management Strategy* (2018)
- *Queensland Health System Outlook to 2026* (2019)
- *Digital Health 2031: A digital vision for Queensland's health system* (2022)

National MHAOD and digital context

- *Mental Health: Productivity Commission Inquiry Report* (2020)
- *National Digital Health Strategy and Framework for Action* (2018)
- *National Digital Health Workforce and Education Roadmap* (2020)
- *National Drug Strategy 2017–2026* (2017)
- *National Mental Health and Suicide Prevention Information Priorities 3rd Edition* (2020)
- *National Mental Health Safety Priorities* (publication pending)
- *National Safety and Quality Digital Mental Health Standards* (2020)
- *Royal Commission into Victoria's Mental Health System – Final Report* (2021)
- *The Fifth National Mental Health and Suicide Prevention Plan* (2017)

It has consulted partners across the MHAOD system

200+ stakeholders engaged

75+ meetings and workshops completed

60+ consultation hours with consumers, carers and families

To support strategic directions and partner needs, this strategy must:

1. Recognise consumers as partners in care
2. Support system-wide clinical and operational safety and efficiency
3. Address the information needs of service providers and stakeholders
4. Be agile
5. Provide a sustainable platform for innovation

The system and information landscape

MHAOD care is a critical service for Queenslanders

Approx.
\$1.35 billion



spent on state-funded
mental health services

2.4%
of Queenslanders



access Queensland Health
MHAOD services



More than
115,000
persons access public
mental health services

Approx.
32,000 persons
access alcohol
and other drug services

Source: Queensland Health, MHAOD Branch statistics (reference year 2020–21)

Information is generated from diverse MHAOD services



Community
bed-based
services



Community
treatment
services

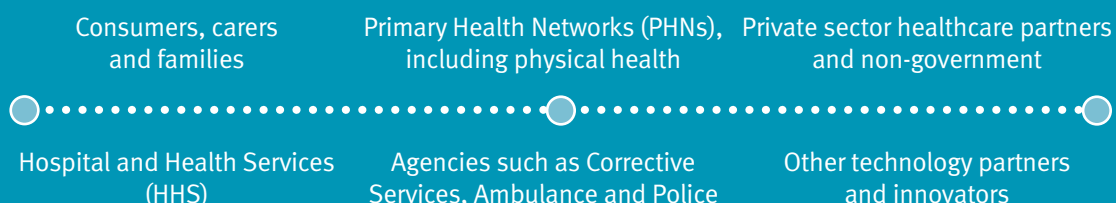


Community
support
services



Hospital
bed-based
services

Information exchange occurs across multiple partners...



Internally, there are two capabilities for information management...

CIMHA

Over
12,500 Clinical and non-clinical users of
the clinical information system (CIMHA)

Approx.
1,900 Concurrent users during standard
business hours

Up to
5,300 Unique user logs daily



MHAP

More than
700 Users with access to the reporting
and analytics system (MHAP)

More than
500 Reports and dashboards
are available

More than
140 Reports run each weekday

These capabilities operate in a broader ecosystem that includes multiple hospital and community based clinical and information systems accessed by partners that support service delivery.

Source: Queensland Health, MHAOD Branch statistics (reference year 2021–22)

Information and digital priorities in MHAOD care

Information and digital innovation are key enablers for delivering safe, efficient and quality MHAOD healthcare.

Consumer priorities

The *Health Consumers Queensland – Digital Health Consumer Charter* (2020), endorsed by Queensland Health, identifies key principles for digital engagement. These are consistent with the views of consumers engaged in developing this strategy, and include:

- Choice and control
- Privacy and transparency
- Designing together
- Equity of access

The *National Safety and Quality Digital Mental Health Standards* (2020) also identify consumers being ‘involved in the development and design of quality digital mental health care’.

State priorities

Better Care Together: A plan for Queensland’s State-funded mental health, alcohol and other drug services to 2027 identifies digital capabilities as a key foundation of safe, quality and efficient MHAOD care. Aligned to the broader *Queensland Health Systems Outlook to 2026* (2020) framework of Transform, Optimise, Grow, investment in the ‘Digital Capability’ strategic priority will:

- Optimise clinical efficiency and reduce risk
- Optimise care decisions through better insights
- Transform models of care to empower consumers and carers to access and participate in own care
- Transform care delivery through collaboration and sharing insights and intelligence
- Grow services using evidence-based priorities for new infrastructure and improved access to existing services.

Further, the *Queensland Digital Clinical Charter* (2019) demands ‘Systems are integrated across the continuum of care’. Consultation with partners in developing this strategy validated this need for information and digital capability to facilitate seamless engagement across care settings.

National priorities

MHAOD services have benefited from agreed national strategies and priorities that have delivered reform across the sector over the past two decades. Strategically, priority eight of the *Fifth National Mental Health and Suicide Prevention Plan* (2017) has a focus on ensuring enablers, including digital and information technologies, are in place to support effective system performance and improvement. The *National Drug Strategy 2017–2026* (2017) identifies the development and promotion of culturally appropriate information and support resources to deliver preventative care and aid vulnerable people. The *National Mental Health and Suicide Prevention Information Priorities, 3rd Edition* (2020), highlights that for information to contribute to improved mental health outcomes and suicide prevention, it must be personalised, comprehensive and connected.

These strategic priorities are confirmed within the reform direction outlined in the *Mental Health: Productivity Commission Inquiry Report* (2020). The Productivity Commission promotes a vision for a person-centred mental health system which provides information to support self-management of care, and recommends the creation of a ‘national digital mental health platform’ to help consumers access effective and affordable support and information. The report also highlights an opportunity to leverage digital capabilities for increased operational productivity that allows service providers to enhance their capacity to deliver consumer related activities.

Finally, the *Royal Commission into Victoria’s Mental Health System – Final Report* (2021), which has both state and national implications, identifies recommendation 60 as ‘Building a contemporary system through digital technology’, further demonstrating wider directions for technology-enabled care in the sector.

System drivers for information and digital growth

The MHAOD system is continuously evolving and growing, driving the need for smarter use of information and adoption of digital innovation.

Provide quality care outcomes

As outlined in the *Digital Health 2031: A digital vision for Queensland's health system*, information driven decision making can support improvements in safe and quality care. In addition, enhanced data integration can eliminate manual data exchange processes and strengthen information accuracy, completeness, and timeliness to reduce consumer safety risk.

Facilitate continuity of care

Consumers need trust in their care and to feel supported as they transition across different services. Integrated information can assist to deliver a more seamless care experience when consumers engage different services, eliminating the need to retell their story and building confidence when accessing care.

Enhance equity of access

Digital innovations can unlock additional engagement opportunities and choice through web and mobile applications. When combined with traditional face-to-face channels and aligned to consumer-specific digital access and literacy needs, technology can be an enabler to equity of access.

Support collaboration

The MHAOD system is a complex, integrated landscape with multiple service providers. Greater information exchange can uplift data completeness and accuracy for improved collaboration and decision making across care delivery.

Increase productivity

Increasing productivity in care delivery is referenced in both the *Mental Health: Productivity Commission Inquiry Report* (2020) and *Royal Commission into Victoria's Mental Health System – Final Report* (2021). Leveraging technology to support information exchange and task automation can help free up capacity and enable greater focus on consumer engagement, treatment, and care.

Support research and planning

Accurate and complete information is a fundamental component for delivering a quality evidence-base for service research, evaluation, and planning. Furthermore, digital innovation can also support better decision making through predictive insights and service modelling capabilities.

Optimise MHAOD services costs

More than 123,000 (or 2.4%) of Queenslanders access Queensland Health delivered mental health alcohol and other drug services. The total cost of providing these services has grown to approximately \$1.4 billion in FY20/21 representing a significant Queensland Health investment. In addition, the need for MHAOD services is growing. For example, average monthly calls to the mental health support line, 1300 MH CALL, increased by more than 9% in FY20/21, while calls to the alcohol and drug support service, Adis, increased by 12%. Information and digital capabilities can be key enablers to efficient and scalable service delivery. By targeting the right investments, they can offer opportunities to optimise ways of working and support economical service growth.

Source: Queensland Health, MHAOD Branch statistics (reference years 2020–2021)

Leverage digital innovations

Digital Health 2031: A digital vision for Queensland's health system describes how innovation is constantly evolving and disrupting care delivery. Such innovations include:

- 1. Alternative models of care** – Technology enabled models of care such as telehealth and digital therapies help reduce geographical barriers and improve consumer care choice and access.
- 2. Participatory health and self-service platforms** – Smartphones, portals and personal health records enable affordable consumer access, consumer engagement and self-care channels.
- 3. Clinical artificial intelligence and machine learning** – Using intelligence to generate insights and augment decision making to reduce time spent on administrative tasks and shift focus to consumer care and service delivery activities.

Why information is important to partners in care

As outlined in the *Digital Health 2031: A digital vision for Queensland's health system* and *Health Consumers Queensland – Digital Health Consumer Charter* (2020), information and digital innovations have transformed healthcare delivery and can unlock clear benefits to our partners in care.

For consumers and carers

- Enhanced consumer outcomes as care is based on a comprehensive and integrated information landscape
- Improved transparency and engagement
- Consumer choice and ownership through greater access and control over information
- Reduced consumer safety risk

For service providers

- Improved decision making at the point of care
- Integrated information to better personalise care
- Systems that support safety
- Improved clinical and operational efficiency

For the health system

- Better information integration across the health system
- Informed service planning
- Enhanced information for research and policy decisions
- Value for money, cost effectiveness and efficiency

Principles for the digital information strategy

Collaborative, consumer-centric healthcare

Consumers, clinical and non-clinical service providers and other stakeholders are partners in the design of MHAOD digital services to improve care delivery and outcomes.

Information and insights driven

The right tools enable service providers and consumers to make decisions, at 'point of care', and for care and service planning.

Integrated

The right information and technology facilitate effective data exchange which enables strong and meaningful partnerships to be formed.

Aligns to the wider health environment

Leverages strategic clinical and technology directions from Queensland Health, State and Australian Government digital agendas and ecosystem.

Agile and innovative

Builds the foundations for change in an agile manner, capitalising on opportunities to continue innovation in healthcare delivery.

Sustainable and compliant

Sustainable in terms of cost, risk and impacts on the workforce and compliance to legislation and policy.

Current information capabilities

Queensland Health has continued to invest in MHAOD digital information capabilities to deliver a platform for growth and innovation.

	Current state	Opportunities
Consumer channels/ apps <ul style="list-style-type: none"> Digital portals Self-service 	<ul style="list-style-type: none"> Shared online services with Queensland Health No dedicated consumer portal specific to MHAOD healthcare 	<ul style="list-style-type: none"> Build an MHAOD specific digital portal for access to consumer information, education and support resources Provide self-service and digital collaboration tools
Information sharing and storage <ul style="list-style-type: none"> Data exchange Data collections Data hosting 	<ul style="list-style-type: none"> Existing data sharing, but some manual processes involved Limited automated integration with hospital systems and external partners Data hosted on legacy on-premises infrastructure Collections in activity, establishment, experience and outcomes data 	<ul style="list-style-type: none"> Build private, secure integrations with clinical systems and external partners to enable synchronous data exchange Migrate to a modern, cloud-hosted shared data repository Leverage automation and augment data to improve care, evaluation and planning (e.g. uplift non-government organisations (NGO) service data)
Clinical information management <ul style="list-style-type: none"> Consumer-centric clinical records Continuum of care support 	<ul style="list-style-type: none"> CIMHA is a custom statewide clinical information system for MHAOD care, available to diverse service providers Supports the <i>Mental Health Act 2016 (Qld)</i> Enables collection and reporting for multiple National Minimum Data Sets (NMDS) Continuously enhanced and upgraded in 2020 to support AOD care Shares MHAOD data to other areas of health in The Viewer app 	<ul style="list-style-type: none"> Agreed strategic investments for uplifting the Clinical Information System (CIS) capability Migrate to a cloud hosted platform Continue enhancements to existing automation and workflow tools Augment decision support and intelligence capabilities Enable features to eliminate dual entry Incorporate new clinical features (e.g. medications management)

Analytics and reporting

- Reports
- Insights
- Business intelligence

Current state

- MHAP is a custom statewide system for MHAOD reporting/analytics
- Integrates clinical and business information from multiple sources
- Accessible to various partners to support service delivery, planning, monitoring and evaluation
- Analytics enhanced by additional reporting and intelligence systems

Opportunities

- Migrate to a cloud hosted platform
- Augment with native cloud analytics and data services
- Leverage an enterprise level platform to access a more comprehensive and integrated set of real time data
- Leverage new information for outcomes and experiences of consumers
- Identify and integrate data collected via other additional systems

Intelligence and other innovations

- Artificial intelligence (AI)
- Machine learning (ML)

- No established framework for AI but there is an aspirational vision for use in MHAOD care
- Emerging use of ML for research on suicide prevention

- Develop ethical and governance framework for AI adoption
- Provide AI and machine learning platforms for data modelling
- Develop voice, text and visual recognition technologies

Current state for partners in care

Each partner journey differs, however there are common ambitions...

Consumers



Objective: To recover and stay healthy

Observations

- Have the ability to exercise self-care and access their own health data for greater information transparency
- Eliminate the need to retell the same story via better information sharing across care settings
- Access education and support resources to help build health literacy and reduce anxiety when accessing care
- Seek opportunities to better engage and collaborate with service providers on their care

Service Providers

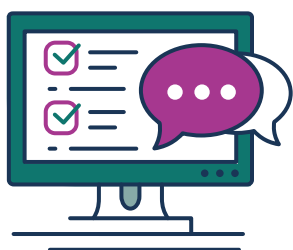


Objective: To provide clinical and non-clinical care to support recovery

Observations

- Seek better insights on pathology and interventions required for optimal outcomes
- Have a full longitudinal view of consumer information to support more informed decisions at the point of care and improve quality and safety
- Have better information exchange and task automation to reduce the need to access and document in multiple systems

Broader Health Workforce



Objective: To manage and administer an effective healthcare system

Observations

- Seek readily available, complete and accurate information to support operational decision making
- Have better integration to support timely collation of data sets for service evaluation, planning and research
- Explore innovations that would improve efficiency and insights, such as advanced analytics tools and modern data repositories for structured and unstructured data

Future digital information landscape

Our vision is to deliver improved healthcare and outcomes for those who access our care.

To achieve the vision, we need to realise a set of targeted strategic priorities which see information as an asset in delivering improved care and outcomes across the system.

Our strategic priorities

Strategic priorities*

Strategic drivers

1

Transform

how we deliver healthcare and collaborate with consumers to realise better care outcomes

- Improve consumer information access, transparency and experience
- Enable consumer self-care and collaboration
- Support MHAOD service priorities to – ‘transform models of care to empower consumers and carers to access and participate in own care’
- Deliver on consumer access and engagement priorities in the Health Consumers Queensland – *Digital Health Consumer Charter* (2020), and *National Safety and Quality Digital Mental Health Standards* (2020)

2

Optimise

how we use and share information to deliver a more safe and efficient care system

- Provide complete, readily available, and meaningful information to support safe and quality care provision and reduce clinical risk
- Enhance productivity to enable focus on clinical and service delivery
- Support MHAOD service priorities for – ‘comprehensive MH and AOD care that is safe and responsive’, in addition to regional planning objectives
- Support *National Mental Health and Suicide Prevention Information Priorities Third edition* (2020) for connected and comprehensive information

3

Grow

the system with a sustainable information foundation

- Support equity of access objectives via digital and non-digital channels
- Assist service growth through a comprehensive evidence base, with intelligence insights for predictive decision making
- Support *Queensland Health System Outlook to 2026* (2019) directions to deliver a sustainable health service, and support system growth and access
- Apply directions in the *Digital Health 2031: A digital vision for Queensland's health system* to leverage digital innovation to enhance and evolve healthcare services

* based on the *Queensland Health System Outlook to 2026* (2019) reform priorities

Transform *how we deliver healthcare and collaborate with consumers to realise better care outcomes*

By empowering consumers to access and own their information, we aim to promote collaborative engagement and awareness, build confidence, and support those that access care to be an active participant in sharing information for care delivery and recovery.

Providing self-service access for consumers

Consultation highlighted that consumers want to be able to access their health information. Providing visibility of care information will help build understanding and confidence in the system, while supporting consumers to develop their health literacy and make more informed choices. It is important to recognise that healthcare information is sensitive and consumers need confidence that information remains private and secure.

Supporting consumers in their self-care

Self-management and the ability to collaborate and provide feedback are important factors in building consumer trust and supporting recovery. Providing capabilities for consumers to self-care and report on experience and outcome measures is a key driver to partnering with consumers in care.

Better coordination across the care continuum

For our service partners, the ability to make informed decisions in a timely manner is key in delivering effective outcomes. By providing decision support at the point of care or point of service, the system can move to proactive, evidenced-based care delivery informed by integrated, meaningful data.

Enablers

Digital enablers

- A digital portal for consumers to access their healthcare information and collaborate with service providers on their care delivery
- Decision support capabilities which provide insights both at the point of care and in care planning
- Sharing data with consumers' consent to optimise their service encounters

Non-digital enablers

- Updated models of care and governance for increased consumer ownership
- Updated ways of working to encourage shared ownership of care continuity

Outcomes

- Consumers have ownership of care where they are informed, actively co-contributing and have greater choice
- Enhanced consumer care experience with service providers across MHAOD services, physical health and other government services, having relevant insights on consumers at the point of care or point of service
- Better consumer care outcomes with reduced rates of harm and preventable admissions

Strategic priority 2.

Optimise *how we use and share information to deliver a more safe and efficient care system*

By optimising how we share and use information we can reduce administration, free up capacity, and enable service providers to deliver care more safely and efficiently. This in turn will enable a more effective and resource-optimised MHAOD healthcare system.

Enhancing information exchange for safety and efficiency

Enhancing the exchange of information can reduce administrative effort and potential error for care providers in viewing or updating information and aligns to the Communicating for Safety Standard (NSQHS Standards, 2017):

Leaders of a health service organisation set up and maintain systems and processes to support effective communication with patients, carers and families; between multidisciplinary teams and clinicians; and across health service organisations. The workforce uses these systems to effectively communicate to ensure safety.

Providing streamlined information access and task automation

Consumer information and care plans will be integrated and available in a timely manner to streamline access across healthcare services. This reduces service provider time and effort in acquiring an accurate, more complete view of consumer information, to support decision making, and enhance safety. In addition, automation can eliminate repetition and reduce human error to improve efficiency and quality.

Providing advanced decision support capabilities

Health intelligence uses advanced analytics and AI to extract insights from historical and real time data. By leveraging health intelligence, service providers can detect or predict deterioration, and access prompts on individualised clinical responses, interventions or care plans. This can also be made available for consumer self-monitoring and care via digital portals.

Enablers

Digital enablers

- A modern clinical system to enable early intervention and automation in MHAOD service delivery
- Platforms for secure and private information exchange and hosting
- Augmented intelligence and decision support capabilities, enabled by modernised data repositories

Non-digital enablers

- Optimised ways of working and models of care to leverage new capabilities
- Change management and governance mechanisms to control use of new decision support and automation capabilities in service delivery
- Training and education to enhance technology literacy across consumers and service providers

Outcomes

- Enhanced information exchange, coordinated care delivery and augmented decision making leads to better consumer safety and quality
- Efficiencies with fewer administrative tasks, faster access to integrated and timely information and evidence-based decision support
- Enhanced monitoring and evaluation of care delivery and investment
- Ability to use advanced intelligence capabilities to enhance decision making and support improved MHAOD care outcomes

Strategic priority 3.

GROW the system with a sustainable information foundation

By unlocking digital engagement channels, which are underpinned by a sustainable and intelligent platform for growth, we can better evaluate and plan MHAOD services to meet evolving consumer and sector needs into the future.

Enhancing information exchange and equity of access

Digital innovation can unlock multiple access channels, such as telehealth, digital portals and mobile applications, to provide greater choice in how consumers access care, while supporting equity of access objectives. Integration can strengthen information exchange and support service provider collaboration across care settings to improve care outcomes. When combined with traditional non-digital channels, improving information exchange and insights across services providers will deliver benefits, even where digital access and/or literacy are lower.

Setting evidence-based priorities for service growth needs

Authorised healthcare administrators and researchers use advanced business intelligence tools, to improve strategic decision making. These tools support research, planning, evaluation and monitoring to inform the systems of governance and service development. This is enabled by an integrated evidence-base that facilitates greater accuracy in modelling and predicting health service demand. This evidence-base can be enhanced through increased data holdings and collections as integrations with wider service partners are established.

Managing sustainability and alignment with strategic directions

Services are evolving with continuing research and policy development in the sector. New models of care and changes to ways of working and collaboration with external partners require flexibility in digital systems. By delivering flexible information capabilities, growth can be supported by adaptable technologies, scaled to meet evolving healthcare needs and expectations.

Enablers

Digital enablers

- Access for consumers to their healthcare information through choice in digital and non-digital channels
- An agile platform for AI modelling and predictive analytics
- Integrated systems for information exchange
- Health system insights and intelligence on models of care

Non-digital enablers

- A wider state framework and investment to support broader health system equity of access objectives
- Ways of working that complement the use of innovation and AI in existing service delivery and planning processes
- Appropriate governance and control mechanisms
- A model of funding and evaluation to support digital investment in line with service growth

Outcomes

- Equity of access to MHAOD services for consumers and communities through improved digital foundations and information sharing
- Growth in services by having the evidence base and clinical and business intelligence to support informed service delivery, evaluation and planning and in turn better consumer outcomes

Future state for partners in care

While each future state will be unique, we seek to provide digital innovation to deliver common benefits...

Consumers



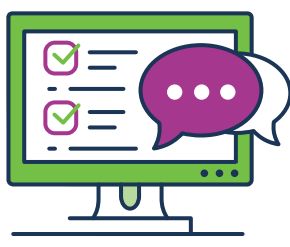
- Access to a dedicated portal for profile information, care plans, appointments, education tools and other support resources
- Ability to self-care and report on care experience and outcome measures
- Automatic notification for upcoming appointments and information updates
- Greater choice and ownership of care through technologies to update and collaborate with service providers
- Improved experience and seamless access to services without having to repeat information

Service providers



- Access to a relevant longitudinal view of consumer information, which provides meaningful information commensurate to the specific needs of their role
- Ability to update and document clinical information in only one system, leading to more efficient and safer care delivery. In addition, common tasks are intuitive and automated
- Ability to make point of care decisions based on accurate, timely and insightful consumer information. Decisions are supported by clinical intelligence and contemporary decision support capabilities

Broader health workforce



- Can better engage and collaborate with partner agencies through improved two-way information exchange
- Ability to develop reports in a timelier manner through streamlined and integrated information collation
- Shifts from strategic planning and research based on lag measures to more predictive analytical outcomes
- Can leverage insights to monitor performance and drive best practice improvements
- Operates in a more efficient and cost-effective system environment as information flows and operational tasks are automated

Consumer experience

How a person's experience of MHAOD services may look into the future...



Awareness and access to services

Members of the public can now access a dedicated 'digital front door' (i.e. website) for access to MHAOD specific service information and resources



Understanding their story

If the person has had a prior interaction with MHAOD services, they do not need to retell their prior story as the service provider is able to access a clinical information system which holds a more comprehensive set of historical information



Diagnosis and care planning

Person-centred care planning is supported by the service provider having readily available care information and intelligent suggestions to support diagnosis and identification of early interventions and/or treatment options



Information access and self-care

When at home, the person can log into the consumer portal to access their care information and support resources for greater ownership of their care journey. They can also self-report on care experience and outcome measures



Ongoing care and support

The person can use feedback tools for ongoing collaboration with their service provider. They can also use the consumer portal to schedule bookings and access education resources to build their health literacy and confidence

Service providers and the workforce will be provided with advanced digital capabilities and better information integration to enhance the delivery of safe and quality care



Single system documentation



Automated and timely information collation



Consolidated information repositories



Intelligent decision making and reporting



Efficient operations and task automation

Digital focus areas

To deliver on the strategic priorities, six digital focus areas have been defined. These describe the digital initiatives required to augment current capabilities and establish a foundation for the future state.

1.

Self-service consumer access via their channel of choice

- Provides a modern website and consumer portal for MHAOD services
- Allows consumers to access healthcare information and support resources
- Empowers consumers to self-care and collaborate with service providers

2.

Clinical system that supports evidence-based practice

- Enhances current clinical capability via a modern and agile cloud platform
- Enhances features in task automation and workflow management
- Augments and delivers clinical intelligence and decision support capabilities
- Delivers new clinical functionality (e.g. medications) to extend service provision across the continuum of care

3.

Synchronised integrations with wider clinical and partner systems

- Augments the current capability via a shared framework for MHAOD information sharing
- Establishes synchronous data exchange with clinical systems and external partners for strengthened information sharing
- Enabled by secure integration services with robust privacy controls

4.

Modernised information repositories

- Provides a modern, integrated repository for MHAOD data
- Enhances the evidence-base and unlocks opportunities for wider collections through the ability to store unstructured data (e.g. text, images and voice data)
- Delivers cost-efficiencies through migrating to the shared government data repository (Clinical Business Intelligence (CBI) service) hosted on a modern cloud platform

5.

Insight driven management

- Builds on the current capability by transitioning to a shared, integrated cloud platform
- Unlocks ability to leverage cloud-native analytics and intelligence capabilities
- Provides intuitive dashboards and reports for faster analysis

6.

AI-augmented MHAOD care

- Delivers a robust governance framework for adopting AI in MHAOD healthcare
- Unlocks AI platforms to test and model data to support predictive insights for care delivery and service planning
- Sets a foundation for advanced innovations such as text and voice recognition

Self service consumer access via their channel of choice

Empowering consumers and carers to access and own care

Digital Front Door

(accessible to the public)



Contact information



Location based search

MHAOD
service advice



Consumers and carers are supported by a multi-channel, self-service platform with capabilities to access information and collaborate with service providers.

Consumer Portal

(for consumers/carers)

Care and personal information

Education/support resources

Booking and scheduling

Self-reporting and feedback

Collaboration tools



Consumers have a choice whether to use these new digital technologies or use alternative channels such as phone and face-to-face engagement.



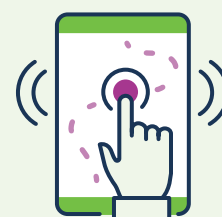
User friendly



Desktop/mobile
access



Private/secure



Integrated

What it does

- Provides a digital front door (website) for the public to find and access services, in addition to a dedicated consumer portal when undertaking MHAOD care
- Provides credible, accessible, and up-to-date information to support health, wellness, and self-management through the web-based portal
- Allows consumers to manage bookings and access virtual services
- Provides a platform for consumers to collaborate with service providers
- Enables consumers to complete experience and outcomes measures online

What it does *not* do

- Self-service capability does not involve service providers being available on demand
- Duplicate services provided by federal government or by the NGO sector

Key outcomes

- Enables consumer ownership of care via information access and control
- Improves care outcomes through consumer empowerment and collaboration
- Provides additional channels for equity of access

Aligned strategic priorities

Primarily aligned to the Transform strategic priority through enabling greater access and control of information for consumers.

Where we are today and next steps

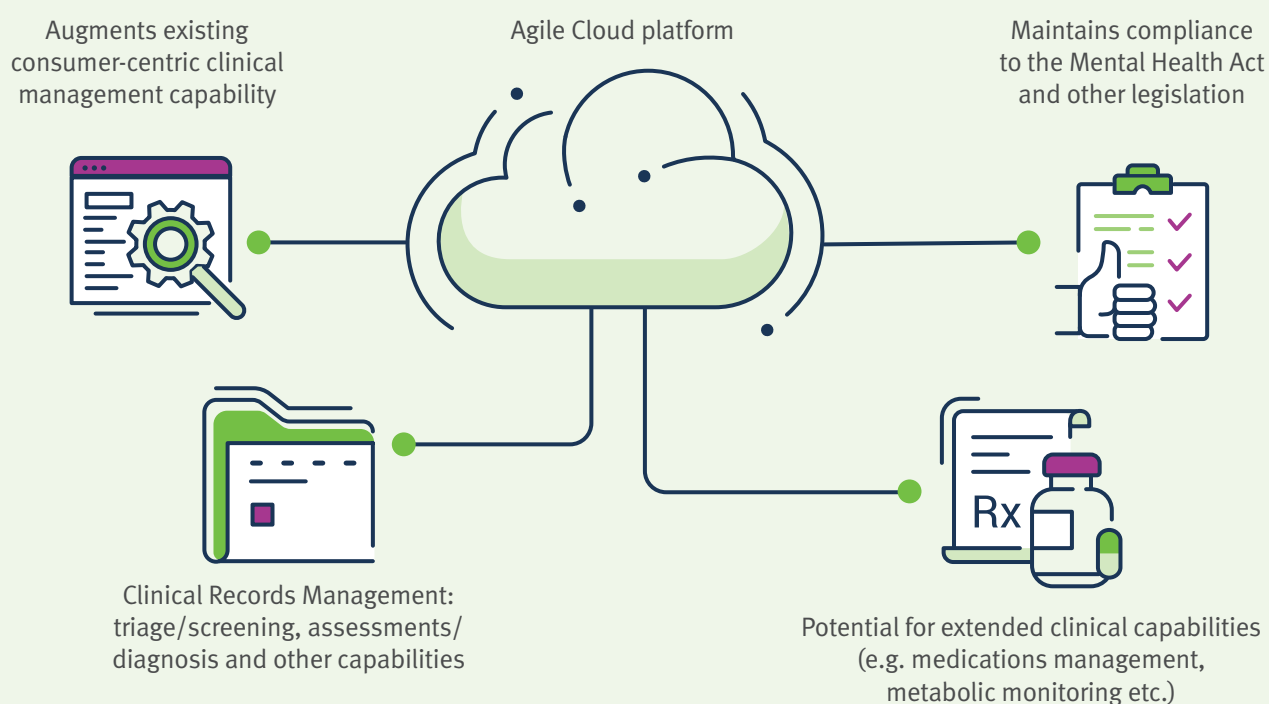
While there are broader digital services delivered by state and national government, a dedicated portal for MHAOD care is a new capability.

Steps to realise this capability:

1. Confirm objectives and readiness to deliver a shared, statewide portal that provides a platform for MHAOD consumer information
2. Develop portal tools for information access and educate consumers on use
3. Extend capabilities with self-care and collaboration features
4. Empower consumers through training and awareness

Clinical system that supports evidence-based practice

Enhancing clinical efficiency and reducing risk through augmented CIS features



Agile, cloud platform

MHAOD service providers are supported by an integrated, statewide clinical information system (CIS) hosted on a modern cloud platform, that is easily customisable to sector changes and clinical needs. It includes advanced clinical decision support and task automation.



Task automation



Clinical decision support



Intuitive/user friendly



Information exchange

What it does

- Enhances the current clinical capability via a modern cloud platform
- Provides customisable functionality and delivers new clinical features to cater for changes in models of care
- Delivers efficiencies through task automation and workflow notification
- Allows synchronisation of consumer information to accommodate use of different electronic medical record (EMR) systems (to the extent possible)
- Decreases manual processes, such as double documentation, to reduce clinical risk
- Supports more efficient data access and a consolidated view of information to reduce clinical risk and administrative burden
- Enables decision support at the point of care, driven by AI augmentation
- Provides a broader view of relevant, meaningful consumer information tailored to the specific clinical or service need

What it does *not* do

This does not include primary care and private service providers who are not funded by Queensland Health.

Key outcomes

- Enhances clinical efficiencies by reducing manual processes and automating common tasks
- Improves safety and quality of care through augmented information exchange and advanced decision support capabilities

Aligned strategic priorities

Primarily aligned to the Optimise strategic priority via an enhanced CIS with intuitive, integrated features for more efficient and quality care.

Where we are today and next steps

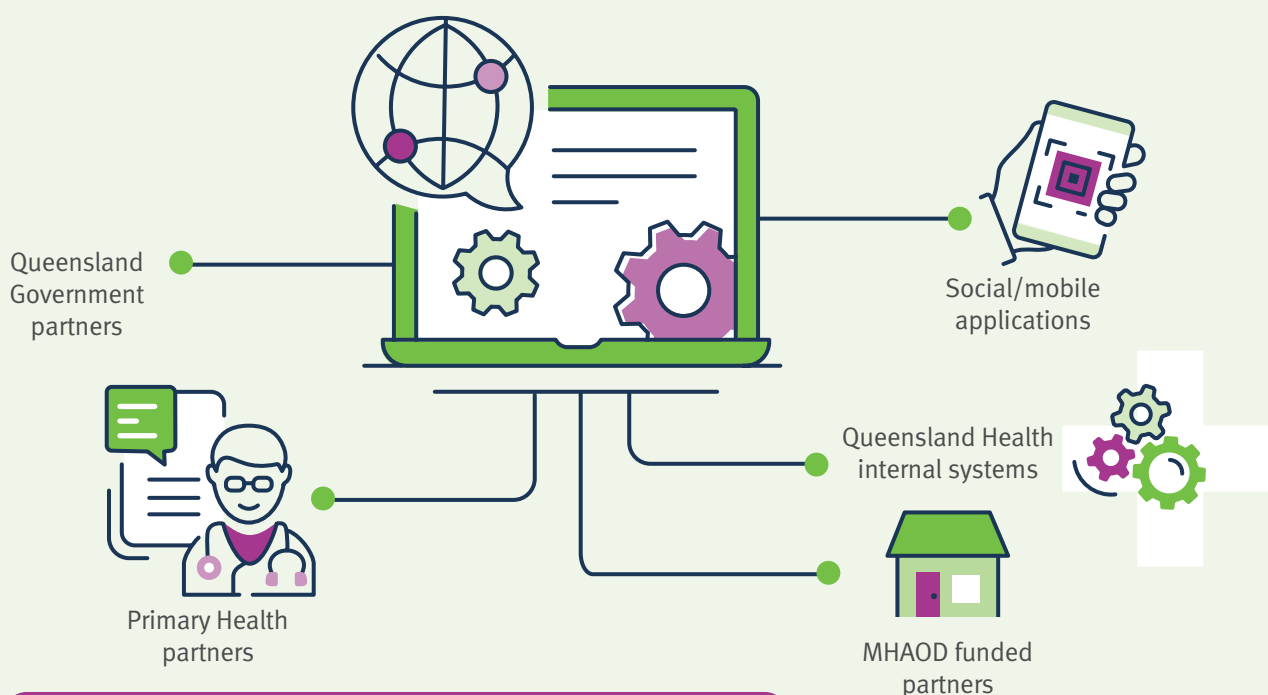
There is a well-established clinical system that supports MHAOD care provision (CIMHA), however there are opportunities to augment current information and automation capabilities.

Steps to realise this capability:

1. Undertake options review and migrate the CIS capability to a modern, scalable cloud platform
2. Enhance with automation tools and augmented clinical capabilities
3. Deploy advanced intelligence and decision support features
4. Extend to agreed service partners and adapt ways of working to leverage new features

Synchronised integrations with wider clinical and external systems

Supporting privacy and trust through secure and well-governed information exchange



Governance and controls for security and privacy

Standardised interoperability approaches and solutions enable the secure sharing of information, respecting privacy and legislation across the MHAOD and broader health ecosystem. This will be delivered in two major phases; firstly, with additional Queensland Health systems (e.g. ieMR), and secondly, with external partners and NGOs.



Network security



Integration services



Management of information sharing

Secure functionality

What it does

- Delivers private, secure and automated data exchange for synchronous transfer
- Supports standardised network security capabilities and policies in line with legislation
- Provides governance and controls for information access and transfer
- Enables sharing of critical data sets with existing and extended partners beyond the immediate health ecosystem, such as MHAOD funded partners and other government agencies (e.g. Queensland Ambulance Service (QAS); Queensland Police Service (QPS))
- Seeks to ultimately improve information sharing with external partners (e.g. NGOs)

What it does *not* do

This does not cover the capabilities required on the external partners' side for information sharing (this may limit information exchange).

Key outcomes

Improves safety and quality of care and efficiencies through standardising and extending information exchange with partners.

Aligned strategic priorities

Aligned to all three strategic priorities as an enabler for information exchange.

Where we are today and next steps

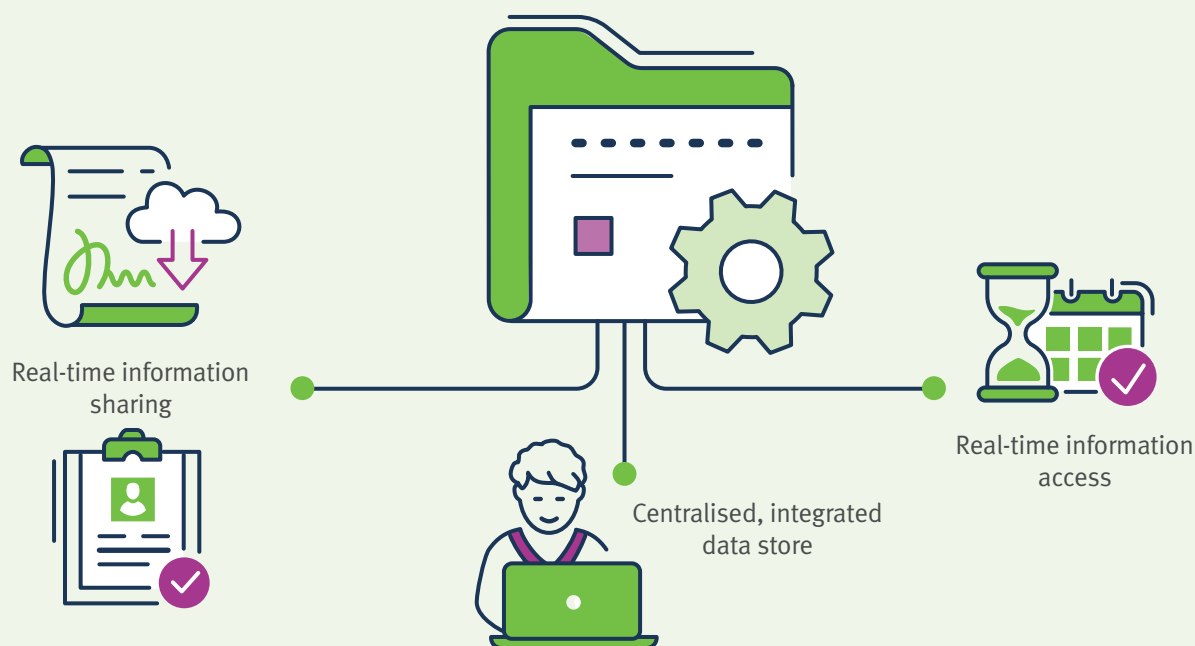
Information exchange is an established capability across the system, however there is opportunity to mature and automate technology sharing capabilities and drive standardisation and adoption.

Steps to realise this capability:

1. Review aligned programs of work and agree on broader strategic directions and investments for information management and sharing
2. Establish governance capability and define standard patterns for information exchange
3. Design and deliver integration capabilities with immediate partners, with a view to extend to other agencies and NGOs over time

Modernised information repositories

Leveraging contemporary, integrated data storage technologies



Modernised data infrastructure

To support easier access to a consolidated repository of integrated data.
Provides the ability to access and share data in real time
to support system-wide insights and intelligence.



Data automation tools

Used to reduce the manual effort in the cleansing of data



Shared information repository

Raw structured, semi-structured and unstructured data



Data warehouse

Structured, integrated data that has been processed

What it does

- Enables integration across multiple data sources
- Provides modern repositories for data such as:
 - text, pictures, and voice data
 - semi structured data such as clinical notes
 - experience surveys
 - activity data
 - outcomes data
 - establishment data
 - additional collections
- Provides data automation tools (e.g. Robotic Process Automation) to reduce the manual effort in the collection and cleansing of data
- Supports the optimisation of data sets for targeted reporting and analytics
- Supports archival and retrieval of historical data

What it does *not* do

- Contain all MHAOD data – depending on the business requirements for analytics, data may need to be acquired on an ad-hoc basis if it is not a standard collection
- Guarantee data quality – while it can automate validations, data quality may need to be addressed in source systems

Key outcomes

Enhances efficiencies and reduces data quality risk by enabling a shared, contemporary repository for integrated data.

Aligned strategic priorities

Aligned to all three strategic priorities as a shared repository for information access.

Where we are today and next steps

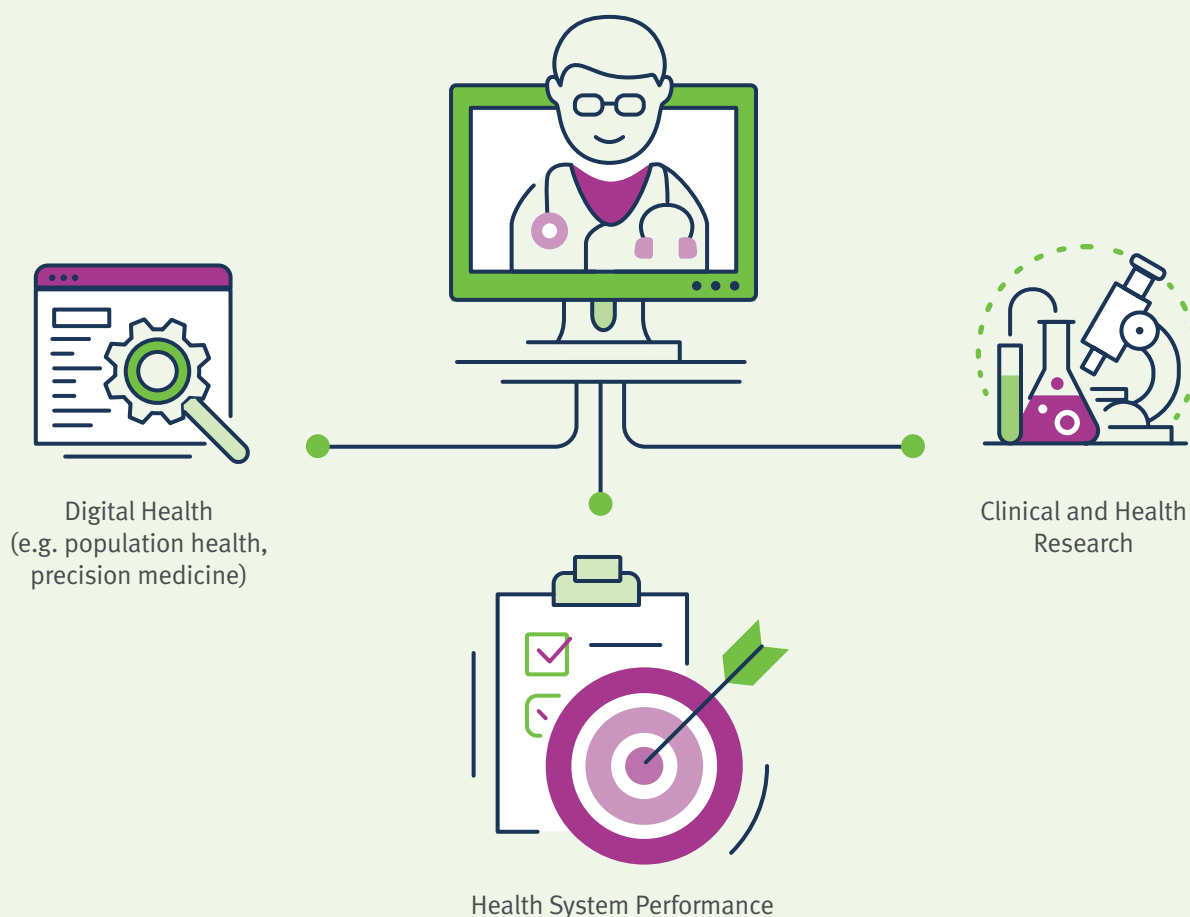
Information storage is an established capability across the system, however there is an opportunity to transition to a shared platform.

Steps to realise this capability:

1. Confirm feasibility and synergies to leverage information capabilities on the shared Queensland Health CBI service
2. Undertake migration to the platform and deploy the data repository and supporting integrations
3. Develop and embed appropriate governance mechanisms for information hosting and access
4. Seek opportunities to augment existing collections unlocked by new integrations and data hosting capabilities

Insight driven management

Driving improved decisions and outcomes through better insights



Domains

MHAOD administrators, service providers, and workforce are supported to make improved decisions, such as insights for care delivery, evaluating the effectiveness of models of care, and intelligence to support service planning and monitoring. This is underpinned by contemporary analytics tools, which draw integrated data from modern, integrated information sources.

Reports	Dashboards	Data Discovery	Ad-hoc Reports/ Querying	Mobile Business Intelligence	Machine Learning	Business Analytics	Online Analytics Processing
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Reporting and Business Intelligence

What it does

- Provides intuitive dashboards and reports for faster analysis to support outputs such as:
 - Consumer journey mapping
 - Consumer progress reporting
 - Consumer transfer of care (transition boards)
 - Quality assurance, auditing and scoring of clinical documentation
 - Benchmarking and KPI reporting of clinical and service indicators (e.g. length of stay)
- Delivers reporting insights via different channels, including from within the CIS
- Enables data discovery (e.g. visual exploration) and business analytics (e.g. statistics), which can help with diagnostic analysis (why did it happen)
- Supports data-driven clinical decisions to improve outcomes
- Supports data-driven decisions to improve service delivery, service efficiency, manage costs and compliance, and reduce risk

What it does *not* do

This does not include operational insights delivered by other functional systems (e.g. financial reporting) unless integrated.

Key outcomes

- Improves safety and quality of care through better insights to support effective decision making
- Ultimately supports better consumer outcomes through more informed and personalised care

Aligned strategic priorities

Aligned to all three strategic priorities as a shared capability for intelligence and decision support.

Where we are today and next steps

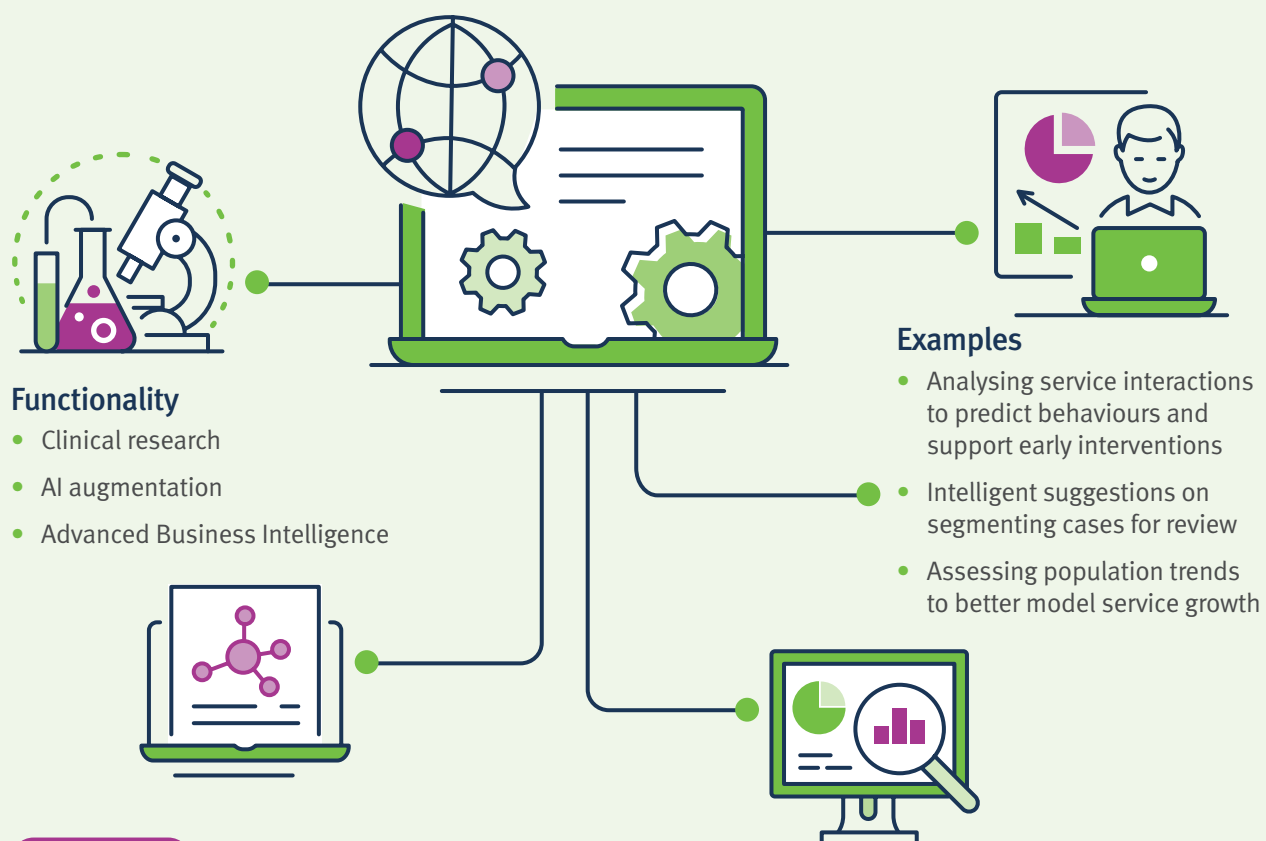
There is an established reporting and analytics capability (MHAP), however there is an opportunity to leverage contemporary data analytics tools on the shared CBI service.

Steps to realise this capability:

1. Similar to the modernised information repository capability, review feasibility and migrate to the Queensland Health CBI service
2. Integrate and embed cloud-native analytical and reporting capability from the CBI service
3. Update governance and workforce capability through change management and training on augmented analytical and decision support features

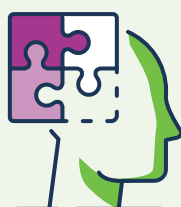
AI-augmented MHAOD care

Leveraging advanced AI capabilities to better predict care and service needs



Domains

MHAOD consumers, service providers and workforce are supported in their care and service decision making by advanced analytics solutions. This is supported by data modelling to deliver intelligence that predicts and provides suggestions on both clinical and service-related outcomes.



AI and ML algorithms and computational platform provides faster and smarter digitally enabled intelligence and insights to our partners

What it does

- Supports AI modelling of structured and unstructured data (e.g., clinical notes). Note: prediction accuracy is dependent on training the data sets and data quality
- Provides a platform that integrates and shares intelligence with other systems (e.g. CIS)
- Augments AI human decision making
- Supports new and existing use cases, including:
 - Predicting demand growth for services based on location and demographic data
 - Recommendations for follow-up consultations based on measures captured via telephone and digital engagement channels, service attendance metrics, visual and physical monitoring analytics
 - Suggestions on case and workload prioritisation based on criticality and risk measures
 - Recommendations on personalised treatment and medicine (note: any advanced AI features recommending specific care pathways or interventions will require robust clinical governance)

What it does *not* do

Provide the underlying reasoning for all predictions or recommendations.

Key outcomes

- Improves safety and quality of care by providing intelligent clinical suggestions on early identification and interventions
- Supports evidence-based service growth through enhanced modelling and predictions on demand

Aligned strategic priorities

Acts as an enabler to all, but explicitly aligns to the Grow strategic priority as a capability to support evidence-based growth decisions.

Where we are today and next steps

While there is an aspiration and emerging use of AI in targeted research settings (e.g. suicide prevention), there is opportunity to set a robust foundation for AI-enabled service delivery.

Steps to realise this capability:

1. Conduct review of legislative and ethical considerations and incorporate into future design and AI governance guidelines
2. Conduct proof of concept and stage deployment of basic, lower-risk AI capabilities, followed by more advanced clinical AI models
3. Drive advocacy and use of innovation and AI models to enable proactive and predictive ongoing service delivery

To deliver this capability we need to optimise our existing digital footprint, while deploying advanced features in a managed way.

How do we get there?

Our future state represents a significant transformation in the way we currently operate, with greater consumer participation enabled by contemporary digital innovations.

To deliver this capability we need to optimise our existing digital footprint, while deploying advanced features in a managed way.

Our strategy on a page

Our *Strategy on a Page* (over page) provides an integrated view of the vision, principles, strategic priorities, digital focus areas and targeted outcomes. It represents what we seek to achieve and sets a target for the question on ‘*how do we get there?*’

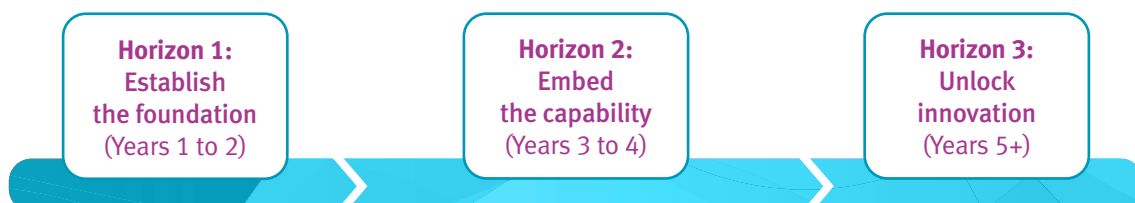
A horizon-based approach

We have adopted a horizon-based approach which delivers incremental capability and outcomes over time. The horizons require planning, sustained effort, regular review and strong partnership across the system to deliver on our wider strategic priorities.

We seek to deliver the strategy via the following:

- **Horizon 1: Establish the foundation (Years 1 to 2)**
Designing and building foundational capability to deliver the strategy
- **Horizon 2: Embed the capability (Years 3 to 4)**
Optimising information capabilities to support improved care and outcomes across the system
- **Horizon 3: Unlock innovation (Years 5+)**
Pursuing innovation and scaling use of advanced technologies to enhance outcomes

There are several dependencies critical to delivery of the outcomes identified. These include pre-requisite activities to align initiatives to existing priorities and investments within the wider Queensland Health system. By leveraging such investments, we can optimise cost and effort, while realising synergies within the health ecosystem.



Digital Information Strategy on a page

Principles

Collaborative,
consumer-centric
healthcare

Information and
insights driven

Integrated

Aligns to the wider
health environment

Agile and
innovative

Sustainable
and compliant

Strategic priorities

1 **Transform** how we deliver healthcare and collaborate with consumers to realise better care outcomes through...

- Providing self-service access for consumers to health data and relevant self-care information as and when they need it
- Empowering consumers to be partners in their self-care by providing opportunities to collaborate while encouraging active participation on their health outcomes
- Better coordination across the care continuum by enabling access to relevant clinical insights at the point of care, and during service encounters with other government and non government services

2 **Optimise** how we use and share information to deliver a more safe and efficient care system through...

- Enhancing information exchange for safety and efficiency by reducing the administrative burden and potential for human error
- Providing streamlined information access and task automation to deliver information that is available in a timely manner, relevant to specific needs and leverages technology-enabled efficiencies
- Providing advanced decision support capabilities to service providers, consumers and workforce for improved care-related decisions

3 **Grow** the system with a sustainable information foundation through...

- Enhancing information exchange and equity of access with broader service partners to address individuals or communities with unique needs and challenges (e.g. rural and remote areas)
- Setting evidence-based priorities for service growth needs by having advanced business intelligence tools and augmented data holdings to support decisions on MHAOD models of care
- Managing sustainability and alignment with strategic directions of the information capability via flexible, modern information technologies and infrastructure, which can deliver functionality in an agile manner and can scale to meet evolving system needs and expectations

Vision

Advancing healthcare and outcomes for Queenslanders with mental health and substance use issues, through digital health innovations and integrated information.

Digital focus areas	Enablers	Outcomes
Self-service consumer experience through their channel of choice	Models of care and governance	Consumer/Carer ownership of care
Clinical system that supports evidence-based practice	Legislation, policy, risk and compliance	Consumer/Carer experience
Synchronised integrations with wider clinical and partner systems	Workforce and ways of working	MHAOD care outcomes
Modernised information repositories	Culture, communication and change	Consumer safety and quality
Insight driven management	Technology	Clinical efficiency
AI-augmented MHAOD care	Information management	Equity of access
	Funding	
	Partnerships and integrations	Evidence-based service growth

Horizon 1

Establish the foundation

Years 1–2

Designing and building foundational capability to deliver the strategy

The focus of the first horizon is to develop the capability to drive the strategy and establish the core underlying digital foundations. This includes a focus on project delivery capabilities and undertaking critical feasibility and design initiatives with stakeholders, both process and technology focused.

Digital capabilities enabled

- The initial design of the consumer portal is ready
- Activities to evaluate and migrate the CIS to a cloud hosted platform have been delivered
- The information repository and overarching analytics and reporting capability are now available on the shared Queensland Health CBI service

Outcomes

Transform

Consumers are proactively engaged to design basic self-service capabilities and to help prove consumer ownership and experience objectives.

Service providers are engaged to provide guidance on information exchange requirements and priority use cases to enable better care outcomes across the continuum of care.

Optimise

Service providers are consulted to prioritise consumer safety and quality opportunities that inform design of technology foundations.

Service providers have provided guidance to support clinical and operational efficiency objectives through prioritising use cases and supporting technology design activities for the clinical information system.

Grow

Shared equity of access objectives and pre-requisite technology investments have been defined across the wider Queensland Health ecosystem.

Advocacy and ethical frameworks for the use of AI-enabled insights have been established to support evidence-based growth in services.

Embed the capability

Years 3–4

Optimising information capabilities to support improved care and outcomes across the system

The focus of the second horizon is to embed use of priority information capabilities to enhance the consumer experience and service delivery. This includes uplifting the use of the digital portal as a consumer engagement tool and driving adoption of the enhanced clinical information system.

Digital capabilities enabled

- A basic consumer portal has been built which enables access to key healthcare information for consumers
- A cloud-enabled clinical information system for MHAOD care is ready with new features for task automation and decision support
- Integration with extended Queensland Health clinical systems is complete to enable automated data transfer with the CIS
- The analytics and reporting capability and modern data repository is embedded across the MHAOD system
- Basic AI models have been deployed to support operational decision making

Outcomes

Transform

Consumers have ownership of care and greater visibility of priority care information through a consumer portal and digital front door.

Consumers have an improved care experience by undertaking priority self-care activities and providing feedback via a modern consumer portal/app.

Service providers are able to deliver an improved care experience and better care outcomes through access to key consumer information for decision support at the point of care.

Optimise

Service providers and workforce adopt new ways of working enabled by clinical systems that:

- provide streamlined access to integrated information and optimised user workflows
- provide decision support tools using integrated information across Queensland Health

The workforce is able to extend and embrace technology changes to provide better and safer MHAOD healthcare services.

Grow

Technology infrastructure investment and models of service for better engagement to support equity of access objectives have been deployed.

Healthcare administrators can now use basic suggestions to improve strategic decision making on models of care, leveraging integrated information.

Unlock innovation

Years 5+

Pursuing innovation and scaling use of advanced technologies to enhance outcomes

The focus of the third horizon is to mature information use as a foundation for service delivery while augmenting with new innovations. This includes greater use of AI models in clinical support and services planning to enhance both clinical and strategic decision making.

- Digital capabilities enabled
- The consumer portal is enhanced with self-care and collaboration capabilities
- The CIS has been enhanced with additional automation and reporting capabilities, in addition to new clinical features
- Integration with wider partner systems (including information exchange with non-government) is complete
- The data and analytics capability is augmented with advanced decision support tools
- Advanced AI-models for predictive, clinical decisions and service planning are operationalised

Outcomes

Transform

Consumers have greater confidence and ownership of care, and are better aware of service options to make informed care choices.

Consumers are a partner in their own healthcare and have an enhanced care experience through embedded self-care and collaboration capabilities across the care continuum.

Optimise

Service providers and workforce embed new ways of working enabled by clinical systems that:

- provide streamlined access to better integrated information and advanced automation of tasks
- provide advanced decision support tools using integrated information from wider partners
- innovative technology is changing the way service providers work, delivering continuous improvement in quality and efficiency of care services to consumers

Grow

Equity of access has grown through mature digital foundations and tailored models of care enabled by digital and non-digital channels.

Evidence-based growth in services is enabled by a contemporary, AI-enabled information capability with the evidence base to prioritise new ways of care delivery.

Information and innovation is transforming the way we plan and deliver MHAOD healthcare – from reactive, to proactive, to predictive healthcare to deliver improved evidence-based service growth.

Pathways to digitisation

This strategy outlines the vision for an information-led future state. Due to the integrated nature of the health system, this strategy cannot be delivered in isolation and requires wider support and investment from Queensland Health, our partners and other participants.

To enable our strategy, there are a number of key activities which focus on understanding needs and designing ways of working to support adoption of the future state.

With consumers and carers

- Continue engagement to understand access needs and validate the objectives of the consumer portal
- Establish consultations to support the design of the portal and prioritise key features
- Support adoption through sustained alignment of technologies to the principles defined in the *Health Consumers Queensland – Digital Health Consumer Charter* (2020)

With service providers

- Establish a forum to help with requirements and evaluation when assessing investment required to uplift CIS capabilities
- Consult on priority features to enhance the clinical information capability
- Work with partners to design and uplift the ways of working to adopt new technology capabilities

With the health system

- Work closely with Queensland Health teams to explore and validate options for shared consumer portal and information capabilities
- Maintain alignment to the future *Mental Health Alcohol and Other Drugs Plan to 2027* to ensure this strategy continues to act as enabler for targeted digital capabilities
- Establish a governance capability to review wider health reform and digital directions, and apply recommendations into the design of technology capabilities and ways of working

Appendices

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Abbreviations

Adis	Alcohol and Drug Information Service
AI	Artificial Intelligence
AOD	Alcohol and Other Drugs
BI	Business Intelligence
CBI	Clinical and Business Intelligence
CEQ	Clinical Excellence Queensland
CIMHA	Consumer Integrated Mental Health and Addiction
CIS	Clinical Information System
HHS	Hospital and Health Service
(i)eMR	(Integrated) electronic Medical Records (system)
MHAP	Mental Health and Addiction Portal
MHAOD(H)	Mental Health and Alcohol and Other Drugs (Healthcare)
ML	Machine Learning
NMDS	National Minimum Data Set (NMDS)
NGO	Non-Government Organisation

Glossary

1300 MH CALL

(1300 64 2255) is a confidential mental health telephone triage service that provides the first point of contact to public mental health services to Queenslanders.

Adis

24/7 support service for people in Queensland with alcohol and other drug concerns.

AI

The ability of a digital computer or computer-controlled robot to perform tasks commonly associated with intelligent beings.

CBI Service

A shared Queensland Health **Clinical Business Intelligence** service hosted on a cloud-native platform. It provides modern infrastructure and capabilities for information storage and analytics.

CIMHA

Health and Addiction application – custom-built, statewide system for MHAOD clinical information and care provision.

CIS

Clinical Information System – system used to manage and provision care, contains consumer clinical records management capability.

Cloud

Refers to highly scalable and agile software, infrastructure, and platform services available online without the need for local physical hardware.

Consumers

The term consumer includes individuals who access mental health alcohol and other drugs services, carers', families and the broader community.

Glossary

ieMR

Integrated electronic Medical Records (system) – Replacing paper-based clinical charts, the integrated electronic Medical Record (ieMR) solution allows healthcare professionals to simultaneously access and update patient information. Vital signs are automatically uploaded to these records, triggering early warning alerts if a patient's condition deteriorates. The (i)eMR delivers an integrated suite of digital health care services that improve safety, efficiency and quality in clinical workflow processes.

Interoperability

The ability of computer systems or software to exchange and make use of information.

MHAP

Mental Health and Addiction Portal – Custom-built data-warehouse for MHAOD analytics and reporting.

ML

Machine Learning is the concept that a computer program can learn and adapt to new data without human intervention. Machine learning is a field of Artificial Intelligence (AI).

NMDS

A **National Minimum Data Set (NMDS)** is a set of data elements agreed for mandatory collection and reporting at a national level. It may include data elements that are also included in other NMDSs. An NMDS is contingent upon a national agreement to collect uniform data and to supply it as part of the national collection, but does not preclude agencies and service providers from collecting additional data to meet their own specific needs.

(Service) partners

Acts as a collective name for all involved in the MHAOD health system, including consumers, service providers and workforce.

Service providers

Refers to those who deliver clinical and non-clinical services within the MHAOD system (e.g. clinicians and other care).

(the) Viewer

A web-based application available on desktop computers and mobile devices. The Viewer collates data from multiple Queensland Health systems, ensuring healthcare professionals can access patients' information quickly, without having to log in to different systems.

Workforce

Primarily refers to those who coordinate and administer the MHAOD system in Queensland.

