National Allied Health Digital Uplift Plan

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About the APS

The APS is the leading professional association for psychologists in Australia. We are committed to advancing the science, ethical practice and application of psychology to promote health and wellbeing, empowering individuals, organisations and communities to reach their full potential. Our work is informed by United Nations human rights treaties and conventions[1] and the United Nations Sustainable Development Goals (SDGs)[2]. We advocate for a fair, inclusive and environmentally sustainable world, recognising the evidence that national and global prosperity, now and in the future, hinges on prioritising the wellbeing of people and planet[3]. Psychologists are highly trained, regulated health professionals known for their evidence-based, person-centred approach. They work across diverse health and community settings, including primary care, community mental health, hospitals, justice settings, workplaces, and schools. The diversity of workplaces and settings in which psychologists work necessitates flexible digital solutions to support evidence-based practice and research.

Consultation Survey

1. *What do you think would make the most impact in increasing digital maturity and capability of AHPs?*

There are a number of ways that the positive impact of technology can be maximised while also realising the vision of the National Digital Health Strategy. In particular, we have identified:

- **Funding the Allied Health Sector** to upskill and develop profession-specific resources, communities of practice, and innovative uses of digital technology. Ideally, this would involve both providing funding to peak bodies and paid learning/practice improvement grants to allied health providers. Ultimately, this would mirror some of the initiatives provided to GPs to do similar practice improvement work.
- **Undertaking research** to understand the provider experience and the unique needs of each profession before regulating or mandating digital tools or standards. The APS has previously called for funding for profession-led research, education and innovation initiatives in relation to AI and digital health (see the APS Pre-Budget Submission 2024-25[4]) and reiterates the need for this systemic investment.
- **Reducing regulatory burden and uncertainty** through proactive and provider-facing information. In addition to streamlining registration, the uncertainty about the regulatory direction of digital health should be removed in the first place (e.g. what will Share by Default mean for psychologists and their clinical records?). This will require consultation and consideration of the differential information needs of allied health professionals and others who work with them (e.g. medical practitioners) to ultimately improve health and mental health outcomes.

2. *Do you believe that actions and initiatives described in the consultation paper offer real and practical assistance with increasing digital capability? (Yes/No/**Not sure** + Please share any advice or context that explains your answer.)*

a) The actions in the consultation paper appear to be practical and achievable, but their successful implementation cannot be considered at a generic allied health level. Actions and initiatives need to be tailored to each profession, given the variance in (a) the current state of digital health, including My Health Record (MHR) usage and (b) differences in what increased digital capability will mean for future practice and service provision. How psychologists would use and interact with MHR and conformant Clinical Information Systems (CISs), for example, would be very different to other professions given the complexities of capturing subjective and psychological experience and processes in records, and the tailored and evolving nature of psychological interventions (and patient goals) over the course of treatment. It is neither ethical, practical, nor appropriate for psychologists' clinical notes to be shared with other health providers in their entirety. Digital systems, therefore, need to be flexible.

b) Some of the actions and initiatives lack the input of peak/professional bodies. Input from peak bodies, such as the APS, is essential to the development of proposed actions to provide insights into the unique needs of individual professions, in addition to assisting with implementation/delivery.

c) While we have actively supported recent allied health input into the development of SNOMED-CT-AU and AUDCI through AHPA and the Sparked project, we have also expressed reservations about supporting standards or requirements which curtailing or imposing a framework for data which does not align with the unique needs of psychologists.

d) Psychology is an inherently data-driven profession, but we need a broader understanding and conceptualisation of outcome data beyond quantitative outcome or experience-based measures (e.g., PROM/PREMs).

3. *Is the action plan described in the consultation plan clear and concise? (Yes/No/**Not sure** + Please share any advice or context that explains your answer.)*

a) The high-level detail currently included the *Public Consultation paper* precludes a definitive decision regarding the clarity and conciseness of the plan. It will be important to see more detail regarding the initiatives listed to make this determination.

b) As it stands, the action plan omits the role and contribution of peak bodies on several occasions, as previously discussed, particularly in regard to the development of initiatives and solutions. In addition, the benefits of the initiatives to allied health professions, including psychology, could generally be better articulated in the plan.

4. *Are there any initiatives or related activities that should be included in the plan? These could be government, industry or sector driven initiatives. (**Yes**/No/Not sure + Please share any advice or context that explains your answer.)*

Please see our response to Question 1.

5. *Do you know where to find existing support and resources to support adoption of digital health tools in the allied health sector? (**Yes**/No/Not sure + Please share any advice or context that explains your answer.)*

We are aware that both the Australian Digital Health Agency (ADHA) and Allied Health Professions Australia (AHPA) have relevant resources, but these are currently not sufficiently tailored to the unique needs of specific professions. APS members (both clinicians and researchers) also have published research and developed informal guidance and interest groups regarding the adoption of digital tools. The APS, and various APS member groups, have offered Continuing Professional Development (CPD) on digital mental health and AI. For example, in 2023, the APS hosted an AI & Psychology Members' Symposium. Internationally recognised speakers from multiple disciplines explored the intersection between AI and psychology, including topics such as the ethical considerations of AI for psychologists, the role of AI in therapeutic interventions, research and psychological practice, and skill requirements for the psychology workforce.

6. *What would help you more easily find or access the support and resources you need?*

   a) Regular communication and updates for peak/professional bodies (in addition to provider resources) with relevant information that can be shared with members and supplement information going to providers.
   b) A community of practice with peak/professional bodies which is distinct from provider-facing resources and groups.
   c) Support for the APS to develop profession-specific resources for psychologists, accessible in a central and familiar location.

7. *What types of support, resources, or infrastructure are most critical to enable successful adoption of digital health tools in the allied health sector?*

   a) Initiatives and funding that support the development of CISs which are fit for purpose for the diversity of allied health professions and, in particular, psychologists. Most current CISs are geared to biomedical contexts in how they capture patient/progress data and how they facilitate clinical interactions with other providers, and are limited in the flexibility needed for allied health professions.
   b) As previously mentioned, funding and support for digital uplift including grants or incentives for providers to improve their digital capability, knowledge, and infrastructure and for knowledge sharing.
   c) As we have previously advocated[5], a strong regulatory system for technology use, in particular AI, which must also include public education and industry guidelines, standards and frameworks directly informed by the relevant peak bodies and professionals. Such a framework would help to guide the safe use of available AI systems in a way that minimises the potential for negative psychological and social impacts.

8. *How can we ensure the plan clearly demonstrates how digital health tools and services will deliver ongoing value to allied health professionals?*

   a) **Support peak bodies to work with their members** – we are the trusted conduit to our members and can help signpost resources and contextualise information in ways that are meaningful to psychologists, given their current knowledge and clinical demands.
   b) **Make the benefit-cost ratio positive for providers** – invest directly in providers (and professions) by valuing their time, knowledge and expertise. By working with

peak bodies, the Department and ADHA can help bring allied health professionals on the journey to foster engagement and 'buy-in' to the process, rather than feeling that new requirements are simply being imposed.

c) **Emphasise tangible benefits** - *the plan* should provide specific examples of how digital tools improve outcomes for patients and streamline workflows for specific allied health professions ideally demonstrating easier multidisciplinary collaboration, and reduced administrative burden. This could involve opportunities to showcase and encourage the innovative use of digital tools by providers, supported by peak bodies and with scaffolded opportunities for education and further development.

d) **Sustain workforce engagement -** we advocate for continuous digital upskilling through funded CPD opportunities and supervision incentives. Ideally, the plan should commit to long-term support (e.g. refresher training, updates on new tools, and access to mentoring for digital tool adoption).

9. *What additional information, examples, or framing would help clarify the value of digital health for allied health professionals?*

To clarify the potential value for the allied health workforce and ensure adoption, we suggest:

a) **Case studies and clinical scenarios -** showcasing real-world examples where digital tools enhance psychological care particularly for schools, regional/rural, and multidisciplinary settings.

b) **Address privacy and liability concerns -** psychologists are highly attuned to ethical issues around confidentiality. *The plan* should explicitly address data privacy, consent, and the governance of shared clinical notes, especially in cases involving family law, youth, and/or trauma.

c) **Recognise the needs of sole and small practices -** many psychologists work in sole and small practice settings and do not have additional resources to implement expensive software and technological solutions. The plan should recognise these constraints and clearly articulate how it will support low-barrier, cost-effective digital adoption for small-scale providers.

d) **Rural and remote considerations** – The plan should articulate how it will support rural and remote practices (and ultimately their clients) given the challenges associated with infrastructure and other challenges to avoid reinforcing digital inequities.

References

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3. De Neve, J.-E., & Sachs, J. D. (2020). Sustainable development and human well-being. *World Happiness Report*, 112–127.
4. Australian Psychological Society. (2024). *APS Pre-Budget Submission 2024-25 – Looking to the future: Leveraging psychology to strengthen Australia's resilience.* https://psychology.org.au/psychology/advocacy/submissions/professional-practice/2024/aps-pre-budget-submission-2024-25
5. Australian Psychological Society. (2023). *APS Response to the Safe and Responsible AI in Australia Discussion Paper.* https://psychology.org.au/psychology/advocacy/submissions/professional-practice/2023/aps-response-to-the-safe-and-responsible-ai-in-aus