

22 September 2016

Committee Secretary
Senate Standing Committee on Community Affairs
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Parliament House
Canberra ACT 2600
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Dear Secretary

Inquiry into the National Cancer Screening Register Bill 2016 and National Cancer Screening Register (Consequential and Transitional Provisions) Bill 2016

Please find following Telstra's submission to the above Bills. If you have any questions, please contact Jamie Snashall

Yours sincerely 

James Shaw
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Introduction

Telstra welcomes the opportunity to provide a submission to the Senate Standing Committee's inquiry regarding the National Cancer Screening Register Bill 2016 and National Cancer Screening Register (Consequential and Transitional Provisions) Bill 2016 (the **Bills**).

Telstra is honoured to have been appointed as the inaugural service provider of the National Cancer Screening Register (**Register**), following a competitive Request for Tender process that commenced in August 2015.

As noted by the Department of Health, the Register is important because:

- The national register will create a single view for Australians participating in cervical and bowel cancer screening, meaning for the first time that there will be one record for each participant.
- It will replace the current fragmented, inefficient, outdated and costly multiple registers that support our bowel and cervical screening programs. Australia currently has eight separate state and territory cervical screening registers and a paper-based bowel screening register.
- The national register will be cost-effective, robust, and secure, providing access to information that supports better health outcomes.

A delay to the implementation of the program arising from a delay in passing the enabling legislation will risk deferring the benefits of the program in helping early detection of bowel and cervical cancer and increasing costs.

Telstra is well placed to provide the Register and that is why we were selected as the preferred provider following an open tender process. Our solution will deliver improved efficiency and better cancer screening outcomes and will apply the Australian Government's privacy and security requirements to the information contained in the existing registers. At the core of our Register solution is a proven IT solution that has been delivering health solutions in public and private health organisations since 1999 and was one of the first to integrate with the My Health Record (then the Personally Controlled Electronic Health Record or PCEHR) in 2012. This is supported by a dedicated team of health professionals within Telstra with extensive clinical and health IT experience.

In this submission we address the following matters for the consideration of the Senate Standing Committee on Community Affairs:

- The importance of the timely passage of the Bills for Australia;
- Telstra's experience and the benefits of its Register solution;
- Privacy;
- Security;
- The role played by private industry; and
- The competitive procurement process.

The establishment of the Register represents a significant opportunity to improve preventative treatment of bowel and cervical cancer. Based on material sourced from the Australian Institute of Health and Welfare, it is estimated that 4,094 Australians will die from bowel cancer in 2016 and 17,520 new cases of bowel cancer will be diagnosed in the same period¹. 93% of those diagnosed are aged over 50² and if found early 9 out of 10 cases of bowel cancer can be successfully treated³.

¹ <https://bowel-cancer.canceraustralia.gov.au/statistics>

² Australian Government Department of Health citing AIHW 2014. Cancer in Australia: an overview, 2014. Cancer series no. 78. Cat. no. CAN 75. Canberra: AIHW at <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/nbcsp-fact-sheet#five>

³ Australian Government Department of Health citing South Australian Cancer Registry. Incidence and mortality, 1996. Epidemiology of cancer in South Australia. Incidence, mortality and survival 1977 to 1996. Adelaide: Openbook Publishers, 1997, at <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/nbcsp-fact-sheet#five>

The Register will implement the expansion of the existing National Bowel Cancer Screening Program so that by 2020 all Australians aged between 50 and 74 years will be offered free screening every two years, consistent with the recommendations of the National Health and Medical Research Council. For cervical cancer, it is estimated that 250 women will die from cervical cancer in 2016 and 903 new cases of cervical cancer will be diagnosed in the same period.⁴ The Register will implement evidence based changes to the National Cervical Screening Program based on recommendations of the Medical Services Advisory Committee (MSAC) that a primary human papillomavirus (HPV) test should replace the current Pap test used by existing Registers for cervical screening. The Department of Health notes that *"from 1 May 2017, evidence based changes to the National Cervical Screening Program, together with HPV vaccination, will reduce the number of cervical cancers by at least an additional 15 per cent and will ensure Australian women will have access to a cervical screening program that is safe, effective, efficient and based on current evidence"*⁵.

Importance of passing the Bills

The establishment of a national Register has enjoyed consistent bipartisan political support.

The Department of Health notes the Register offers the following benefits:

- It will replace the current fragmented, inefficient, outdated and costly multiple registers that support our bowel and cervical screening registers. Australia currently has eight separate state and territory cervical screening registers and a paper-based bowel screening register;
- The national register will be cost-effective, robust, and secure, providing access to information that supports better health outcomes.⁶

The establishment of the Register is a complex project with tight timeframes. The contracted delivery date is 1 May 2017, to support the commencement of the renewed National Cervical Screening Program (including replacing the current Pap test with the new HPV screening test on the Medicare Benefits Schedule in accordance with MSAC's recommendations) and involves:

- The migration and integration of nine separate cancer register databases to create, for the first time, a single electronic record with a single view for each Australian participating in cervical and bowel cancer screening, with the ability to maintain accurate screening histories for female cervical participants as they move between states and territories;
- A Register to support advanced cancer screening service delivery compared to the national bowel and cervical cancer screening programs administered by the existing registers;
- A Register to support a new cervical screening test covering approximately 1.4 million women aged 25 to 74 years (both HPV vaccinated and unvaccinated) who will be invited to participate in cervical screening;
- A Register to support the expansion of the bowel screening program to almost 10 million eligible Australians aged 50 to 74 years, who will be invited to participate in biennial bowel screening;
- Delivery of streamlined invitations and accessibility for participants, health care providers and the broader community;
- Improved access to screening history to support clinical decision-making; and
- Reduced costs associated with streamlined back-of-house systems, integration with GP desktop systems and a reduction in paper based systems

⁴ <https://cervical-cancer.canceraustralia.gov.au/statistics>

⁵ <http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/cervical-screening-1>

⁶ <http://health.gov.au/internet/main/publishing.nsf/Content/National-Cancer-Screening-Register>

Given the array of activities that are needed to introduce the Register, a delay in the enactment of the enabling legislation beyond 30 October 2016 would introduce considerable risk of delaying the implementation of the Register, and thus the necessary support arrangements that are integral to commencing the renewed National Cervical Screening Program on 1 May 2017.

Telstra's experience and the benefits of its Register solution

As the Committee would be aware, Telstra is Australia's largest telecommunication and technology business and brings world class experience in global networks, data security and dealing with complex environments. For example, Telstra manages extremely sensitive data for hospitals, financial institutions and government, including the Department of Defence, Department of Foreign Affairs and Trade, Australian Taxation Office and Department of Human Services every day.

In 2013, in recognition of the growing demand for digital solutions in the health sector and that health services requires a specialist skill set, Telstra established Telstra Health as a standalone business unit. Since its launch Telstra Health has:

- Built a team of dedicated health expertise and employed more than 800 people with world class clinical, strategy, policy, technology and health industry experience who want to work collaboratively to deliver a safer and more efficient, affordable and accessible health care system; and
- Become one of Australia's largest digital health companies, investing \$235m and assembling a comprehensive suite of digital health capabilities and solutions through acquisitions, investments and partnerships across the health system, including for GPs, aged and residential care, hospitals, radiology, pharmacy, Indigenous care, health analytics and telemedicine.

Our digital health solutions have introduced efficiencies and supported the secure exchange and management of health information across the health sector with significant health system adoption within Australia including:

- Solutions in almost 500 residential aged and community care providers;
- Solutions in approximately 100 hospitals in Australia;
- 5 million secure health message transactions annually across 5,000 locations and 40,000 health workers;
- Solutions used to manage medical records of more than 400,000 Indigenous Australians across 200 locations – the most used system by Aboriginal medical services;
- Electronic transaction of more than 240 million scripts annually between 20,000 GPs and almost 5,000 pharmacies, leading to the collection of more than 1 billion medical dispensing records; and
- Delivery and receipt of more than 3 million diagnostic results annually by more than 35,000 doctors.

Telstra Health is uniquely placed to provide the Register as we have the necessary size, scale and mixture of clinical and technical expertise to successfully build, migrate and operate the Register and provide better access to healthcare information.

Our solution:

- Will operate in accordance with the evidence-based program policies and protocols developed and provided by the Australian Government;
- Complies with the same security standards that would apply to the Australian Government if it were building and operating the Register;
- Utilises our proven Emerging Systems infrastructure platform, which is robust, scalable and will support the collection, storage, analysis and reporting requirements of both the Register;

- Includes a suite of configurable products that include options for report notifications, a clinical web portal for results and a consumer portal for updating personal information;
- Enables the collection and reporting of screening data in a nationally consistent manner;
- Provides improved access to information to assist timely clinical decisions;
- Includes configurable interfaces for mobile devices and are delivered in browser agnostic format;
- Utilises our Electronic Master Patient Index (EMPI) automated patient identification matching technology to reduce the costs of existing manual matching processes and the potential for errors given the large scale of data to be migrated from the nine existing registers);
- Introduces efficiencies through increased use of automated data collection and connectivity, including interfaces with My Health Record, Medicare and GP and pathologist mainstream software that enables increased use of electronic forms to capture and process data;
- Combines strong clinical and health IT knowledge with proven experience in operating key health service provider applications and a demonstrated track record of integrating with other health service provider applications; and
- Is assisted by our extensive experience in working with stakeholders in the health system which is already being demonstrated through the consultation process that is underway with the existing bowel and cervical registers, medical industry representative bodies, pathology laboratories and the various Cancer Councils to ensure our solution meets their needs.

Privacy

We agree that privacy and data security are matters of utmost concern in relation to the Register and that is why we have committed to a range of obligations and measures that will deliver high standards of privacy and security.

Under Telstra's solution for delivering the Register, all information contained in it will be hosted in Australia and the Australian Government will have control over the information in the Register, including permitted uses and disclosures.

In addition to the provisions of the Bills, Telstra's use and access is also subject to the provisions of the My Health Records Act 2012, the HealthCare Identifiers Act 2010 and the Privacy Act 1988, including associated penalties for breach.

Significantly, once the Register is established it will mean that access and use of information contained in the Register, including information migrated from existing bowel and cervical cancer registers, will be subject to the same strict Australian Government requirements governing privacy and security when compared to the regulation of the existing registers.

Security

Telstra will build and operate the Register in accordance with strict data security requirements determined by the Australian Government, including compliance with the Australian Government's Protective Security Policy Framework (PSPF). These are the same requirements that would apply to any Australian Government or not-for-profit agency that were to operate the Register. Telstra is highly experienced in implementing and managing to these requirements and brings extensive expertise in securely managing and hosting various sensitive national data sets at scale.

The Register will follow the same three layered accreditation process that is used for all Australian Government solutions, including My Health Record. The process includes an audit of the solution architecture and controls, and certification that the controls have been implemented and are operating effectively, by an independent Australian Government certified auditor through the Australian Signals Directorate assessment program.

This accreditation and assessment process will provide independent assurance that appropriate and effective security controls have been implemented and operating to effectively process, store and transmit sensitive health information. It also provides assurance that a continuous review and assessment program has been implemented to ensure the ongoing protection of information.

All Telstra personnel who are involved in managing or operating the Register are bound by strict confidentiality undertakings. In addition, Telstra personnel who have access to or are likely to have access to the Register's data must possess appropriate security clearances.

Importance of private industry

Seeking to limit the build and operation of the Register to government agencies or not-for-profit organisations would be at odds with long established practices that allow the Australian Government to use competitive tendering processes and private service providers to generate efficiencies and innovation in providing services to Australians.

As detailed previously in this submission, any concern that it is inappropriate for private industry to deliver the Register because of the sensitivity of the health information overlooks the fact the security standards are the same regardless of who builds and operates the Register and Telstra has an excellent track record of providing secure solutions to Government departments with sensitive data, including the Department of Defence and Department of Human Services.

Moreover, private sector partners play a significant existing role in the healthcare system, managing and hosting health information for health service providers and government. Importantly, the Australian Government has previously appointed private industry to a number of significant health projects involving similarly sensitive health information. These included:

- the appointment in 2011 of a private consortium led by Accenture to develop and implement the national infrastructure for the Personally Controlled Electronic Health Record (PCEHR – now My Health Record) program. Under a contract with Accenture, Telstra currently hosts this information consistent with the same stringent privacy and security framework that will apply to the Register; and
- the appointment in 2013 of the Fred IT Group (a related entity of Telstra) to develop and host the National Prescription and Dispense Repository (NPDR), a medications repository that facilitates access to prescribing and dispensing information for consumers and their authorised health care providers via PCEHR portals and compatible software.

Utilising private providers is consistent with the Review of the Personally Controlled Electronic Health Record, which found:

“Open, collaborative approaches between the government and private sector, where innovation is encouraged, invested in and rewarded, has progressively driven advances in many industries and economies.”⁷

As noted in the same report:

The creation of a successful eHealth ecosystem, refers to developing appropriate approaches to introduce solutions to the industry that acknowledge the fragmentation of the industry, specialisation of private organisations, and the industry policy settings and strategies needed to be deployed by governments to encourage continuing investment and evolution of the industry.⁸

Given the above, we do not believe there is a case for limiting the delivery of the Register to government or not-for-profit agencies only.

⁷ Review of the PCEHR December 2013

⁸ Review of the PCEHR December 2013

Competitive procurement processes

The commitment to establish a National Cancer Screening Register (NCSR) was first announced in the 2015-16 Budget and the contract to deliver the Register was awarded following a comprehensive tender process based on Commonwealth Procurement Rules 2014 (CPRs).

A detailed Request for Tender (RFT) process commenced in August 2015 and all respondents to the RFT were required to demonstrate their capability to develop and operate the Register and comply with the requirements contained in the RFT, including the Australian Government's privacy and security requirements. At the conclusion of the competitive RFT process, Telstra was selected to build and operate the Register and entered into a contract with Health on 4 May 2016. It is our understanding all jurisdictions provided in principle support for the establishment of the national Register and at no stage requested limiting participation to only government or not for profit providers.

Any limits imposed on a competitive procurement process by excluding certain participants on the basis that they are private companies and regardless of the merits of their bid would contradict well established Australian Government procurement practices. By excluding for-profit entities, Government would be undermining competitive procurement processes and putting at risk cost efficiencies and innovation that utilising the private sector can provide.

As such, an amendment to exclude private providers would be inconsistent with Rule 5.3 of the CPRs which states:

*"The Australian Government's procurement framework is non-discriminatory. All potential suppliers to government must, subject to these CPRs, be treated equitably based on their commercial, legal, technical and financial abilities and not be discriminated against due to their size, degree of foreign affiliation or ownership, location, or the origin of their goods and services."*⁹

Telstra and our subcontractors put in considerable effort to participate in the RFT process in good faith and following a lengthy assessment and negotiation period we were selected as the preferred tenderer on the merits of our bid.

Since execution of the five year contract with the Department of Health, Telstra commenced the investments necessary to successfully implement a project of this scale and complexity. This includes recruitment of specialist staff, acquisition of required infrastructure, leasing of property and implementing the required physical security controls, negotiating agreements with its suppliers, and travel and accommodation to attend meetings and workshops with Health and the various stakeholders.

Conclusion

The potential for a delay in obtaining access to the required health information negatively impacts the implementation of the Register and creates additional costs. It also risks delaying the commencement of the renewed National Cervical Screening Program on 1 May 2017 (including replacing the current Pap test with the new HPV screening test on the Medicare Benefits Schedule in accordance with MSAC's recommendations) and the broader benefits that the Register will deliver for patients and healthcare providers. Additionally, Telstra believes any amendment which seeks to change the competitive and open process which has been run by the Australian Government would bring significant risks to future tender processes run by the Australian Government.

⁹ Rule 5.3, Commonwealth Procurement Rules: Achieving value for money (2014)