

Australian Medical Association Limited

ABN 37 008 426 793

42 Macquarie Street, Barton ACT 2600: PO Box 6090, Kingston ACT 2604
 Telephone: (02) 6270 5400 Facsimile (02) 6270 5499
 Website : <http://www.ama.com.au/>



Transcript: AMA President, Dr Tony Bartone, SKY News, *with Ashleigh Gillon*,
 Wednesday 1 August 2018

Subject: My Health Record

ASHLEIGH GILLON: Let's bring you some more on the fall out of the changes announced overnight by the Health Minister, Greg Hunt, to the My Health Digital Record. Joining us live from Melbourne is the AMA President, Dr Tony Bartone. Appreciate your time, Tony. The Minister does say that he's leaning towards extending this opt-out period, which is set to end in mid-October, by a month. Just how important is that in your view, because Labor's arguing today that still won't be enough time for the Government to run any sort of comprehensive public information campaign to actually allow people to make an informed choice.

TONY BARTONE: Good morning, Ashleigh. Look, the extension to the opt-out period that we've sought from the Minister of an additional month, when combined with the undertakings in terms of the strengthening of the legislation, the amendments that we've seen announced overnight, allows some clear air, allows for the opportunity to have as part of that information campaign to the Australian public, the clear air and the clear time to make an informed and balanced decision. So, the undertaking we have is that the legislation will be strengthened as a matter of a priority and that should be done fairly expeditiously. And then, on the back of that, a ramping up of the information and communication with the Australian public, to address their concerns, to address the utility of what is My Health Record, the issues around privacy, the issues around how their records will be handled, and the benefits to them. So then, they can weigh it up and they can make an informed decision and that extension of a month should give us all the comfort, and in the current climate of making that decision with fulsome knowledge.

ASHLEIGH GILLON: One concession was in relation to not allowing police access to this My Digital Record without going through the proper processes to get that first. But have you cleared up concerns we've seen about how the Digital Health Agency will handle any rival claims of parents who might want to create or delete children's My Health Records? We know that there have been real concerns that, for example, an abusive partner who can often have shared parental responsibility, could really risk the security of the other parent, that this could be used as some sort of battleground in disputes over their children's records. There are concerns about how this could impact domestic violence victims. Was that something that you canvassed with the Health Minister?

TONY BARTONE: So, in the meeting with the Minister, we canvassed a whole area of concerns around privacy and the issues around the trust that people have in the medical records. The area that you're referring to is a very complex, legal area as it stands now, currently. What we've sought with the recommendations is that the My Health Record legislation mirror what's happening in current practice now; nothing less, nothing more. It's so we give the same level of assurance and protection to the trust and to the confidence that patients have when they share their medical record- when they share their medical information with their treating doctor.

ASHLEIGH GILLON: Labor is still saying that the rollout of this scheme needs to be suspended. They're pointing to concerns that I just alluded to there about how this could affect

domestic violence victims, but also the broader concern about the Government's ability to manage the security of the system; concerns of a hacking, for example. Did you seek any extra reassurances from the Government on that front?

TONY BARTONE: So, in terms of the rollout, the request was that we extend the opt-out period by an additional month with that information, in that process, the system will - and the opportunity to look at the implementation program, to look at the communication, and to look at all the other issues that have come to light, and ensure that we end up with the most utility out of the product that we can possibly manage, given that it isn't perfect. But given that it is a lot better than anything currently available in the market, in the medical workspace; to ensure that we can, for once, collate and coordinate and facilitate the communication about various disjointed parts of medical information, about your medical record in different parts of the system, and bring it to one place so that doctors have access to timely and relevant summary of your details to change decisions about your care, make decisions about your interventions, or any procedures that might be required, any medications. But furthermore empower you to be in that journey and see your medical record, once and for all in a summarised format in your hand, and have that ability to follow the progress of your care through the system.

ASHLEIGH GILLON: Well, you have been a big advocate of the system broadly, Dr Bartone, but do the majority of your members even support this My Health Record? I see, I think it was an Australian Doctor poll found that 75 out of 471 doctors have signed up. So, around 79 per cent of doctors had said that they intended to opt-out. If even doctors don't want to be a part of this, why should the average Australian?

TONY BARTONE: So, it's about understanding that the product and the health record, up to now has been lacking utility, has been lacking capability and lacking buy-in and the usability from the users in the system. As that information becomes reliably present, as the number of records increased, as the details in the files become of more usefulness to a patient's management, you will see the exponential growth of both the people using the system and the utility of the information out of the system. It's a classic innovation- it's our first step. And, as we get over and communicate the issues that the privacy is now paramountly important, and the issues around that have been addressed in strengthening the legislation, as we increase the information exchange with the public, so that they're aware of what My Health Record is. What they need to be concerned about and then they can make a balanced decision based on utility, versus any concerns they have about their ongoing use of that record. Then we'll see the system grow both in maturity and capability, and people coming towards it.

ASHLEIGH GILLON: And, just finally, to clarify, Dr Bartone. Everything you know about this system has left you personally in a position to be happy to have your health information recorded as part of this digital record?

TONY BARTONE: Absolutely.

ASHLEIGH GILLON: Dr Tony Bartone, joining us live from Melbourne. Appreciate your time, thank you.

1 August 2018

CONTACT: John Flannery 02 6270 5477 / 0419 494 761
 Maria Hawthorne 02 6270 5478 / 0427 209 753