ACT Government

ACT Virtual Care Strategy

2025 - 2030



Acknowledgement of Country

The Health and Community Directorate acknowledges the Ngunnawal people as traditional custodians of the ACT and recognise any other people or families with connection to the lands of the ACT and region. The Directorate acknowledges and respects their continuing culture and the contribution they make to the life of this city and this region. It also acknowledges and welcomes Aboriginal and Torres Strait Islander peoples who are part of the community we serve.

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Overview of the ACT Virtual Care Strategy

The ACT Virtual Care Strategy (2025–2030) outlines a vision, mission, guiding principles, strategic framework, and target outcomes to advance virtual care in the ACT and surrounding regions.

The Strategy has been informed by:

- A comprehensive review of national and international virtual care models
- Analysis of local health service needs and digital capabilities
- The experiences of cross-jurisdictional stakeholders in implementing virtual care
- The specialist expertise of the Virtual Care Project Control Group
- Insights elicited through focus groups and targeted consultations with a broad range of stakeholders including health managers, clinicians, consumer representatives, workforce and industry agencies, peak and community sector organisations, and intergovernmental teams.

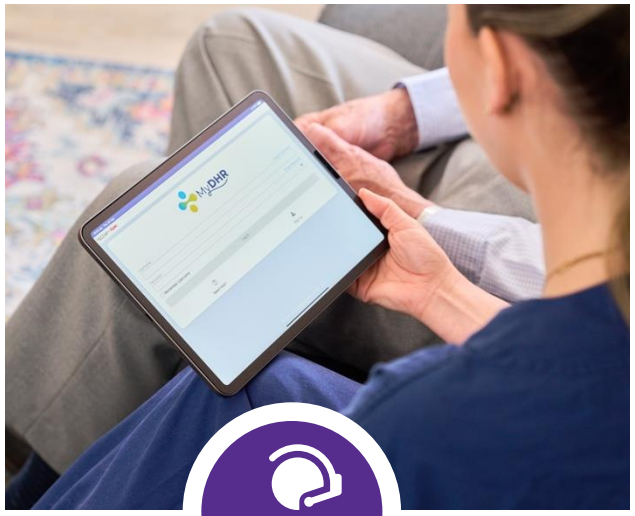
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What is Virtual Care?

Virtual care in the ACT is understood as: *The use of technology to enable health care, education, and information sharing between consumers, carers, and clinicians, or between clinicians from different locations.*

Virtual care can be delivered using one of these modalities:

Telehealth



Health services delivered using information and communication technologies, such as telephone or videoconferencing.

Remote Patient Monitoring (RPM)



Using technology such as an apps, device or service, to collect and monitor clinical data.

Store and Forward



Involves collecting, storing, and sharing clinical information between health professionals for later review.

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How Virtual Care can complement and enhance current models of care

Descriptions of traditional care settings and the potential benefits of virtual care if fully realised in these settings.

Hospital-based

	Outpatient care	Inpatient care	Emergency care	Primary care
Current Model	Scheduled care delivered to patients that are not required to be monitored overnight e.g. specialist appointments, tests and scans, minor surgeries.	Care delivered in a hospital ward for conditions that require more frequent monitoring and investigation, intensive nursing or medical management.	Care delivered to patients that present to a hospital emergency department (ED).	Care delivered in the community by General Practitioners, nurses, allied health professionals and pharmacists.
Benefits of virtual care	✓ **Reducing unnecessary travel and waiting lists** by conducting visits efficiently via telehealth, collecting observations via Remote Patient Monitoring (RPM), or using store and forward and patient information platforms.	✓ **Reducing length of stay and releasing beds** by transitioning patients out of inpatient care more quickly using RPM, virtual check-ins, and virtually supported hospital in the home (HITH). ✓ **Managing inpatients closer to home** by providing specialist clinical expertise to smaller, regional hospitals through telehealth and remote monitoring.	✓ **Preventing unnecessary ED presentations** using virtual EDs to assess patients remotely via telehealth and provide appropriate management and support. ✓ **Managing emergencies closer to home** by providing specialist emergency expertise to smaller, regional EDs through telehealth and RPM.	✓ **Integrating with the health system** using E-referrals, clinician-to-clinician advice services, and store and forward information sharing. ✓ **Reducing unnecessary travel and appointments** using telehealth, RPM, and online patient check-in and information platforms.
Example models	• *Virtual chronic disease management* • *Care navigation*	• *Virtually-enabled HITH* • *Virtual in-patient care*	• *Virtual ED* • *Specialist emergency care*	• *Telehealth consultation* • *Clinician to clinician consultation*

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Potential benefits of Virtual Care

Improves access to healthcare by connecting patients with clinicians regardless of location

Reduces travel and time costs for patients and providers through remote consultations

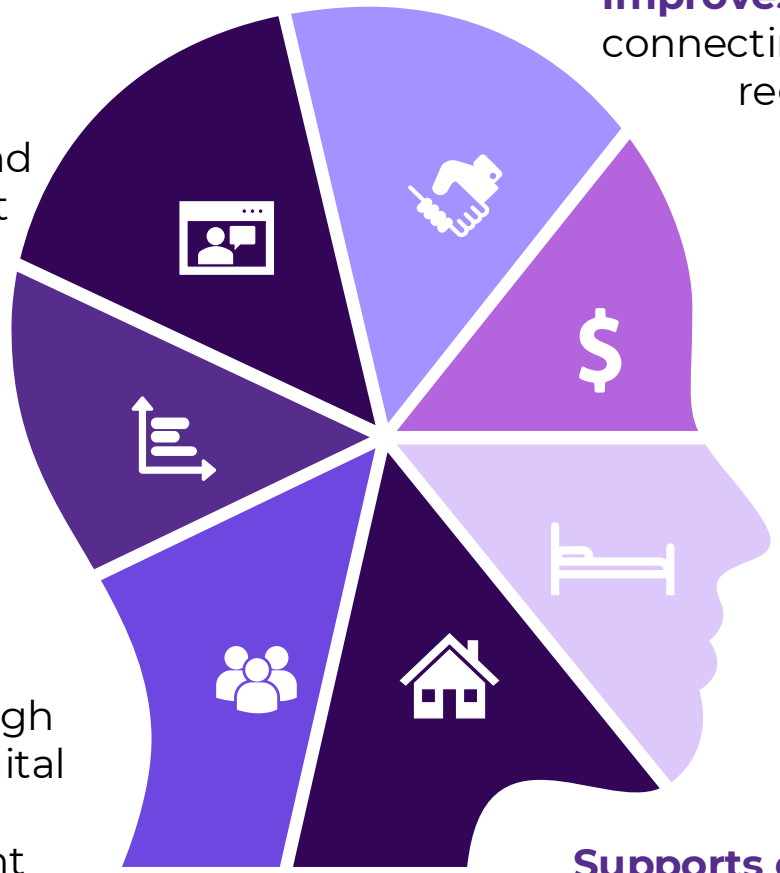
Shortens hospital stays and frees up beds by enabling earlier discharge with virtual support

Supports care closer to home by extending specialist expertise to regional and rural settings

Empowers patients through remote monitoring and digital engagement tools that support self-management

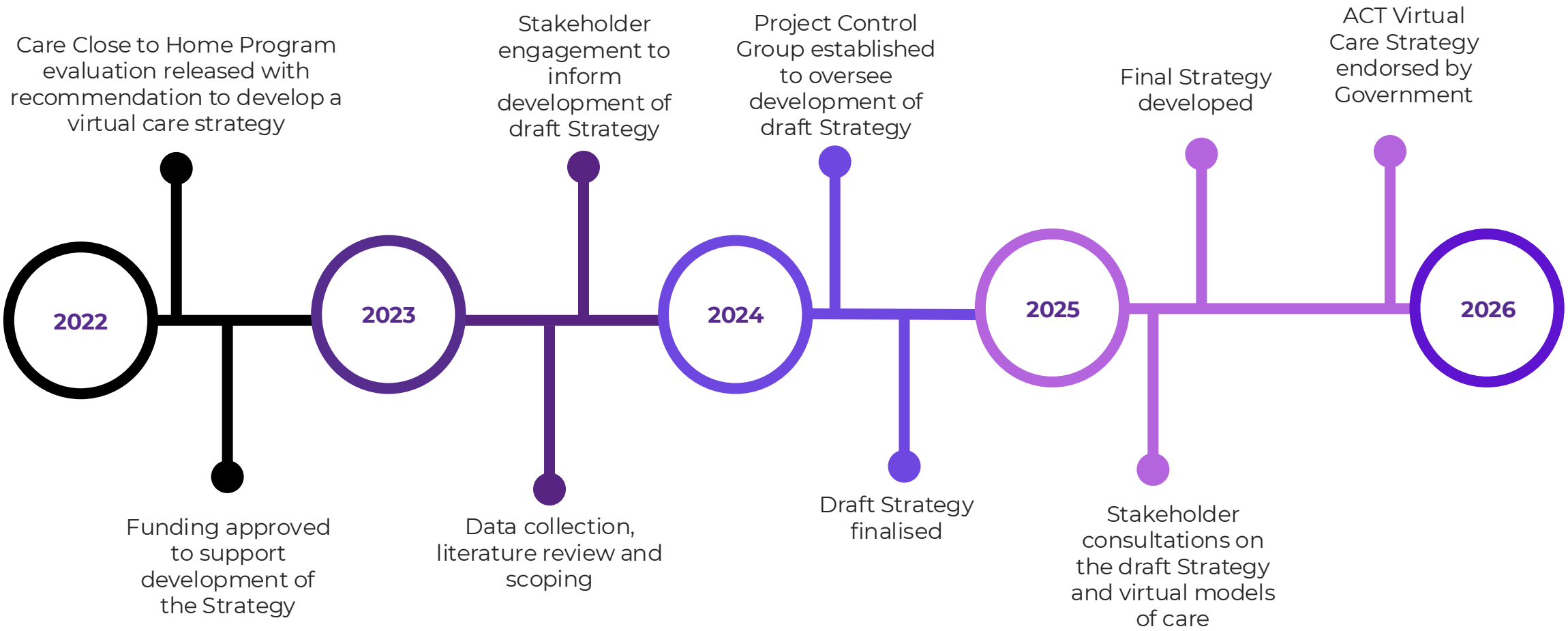
Enhances continuity of care with integrated digital platforms and clinician-to-clinician communication

Reduces unnecessary emergency department visits through virtual triage and remote patient management



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Timeline of development

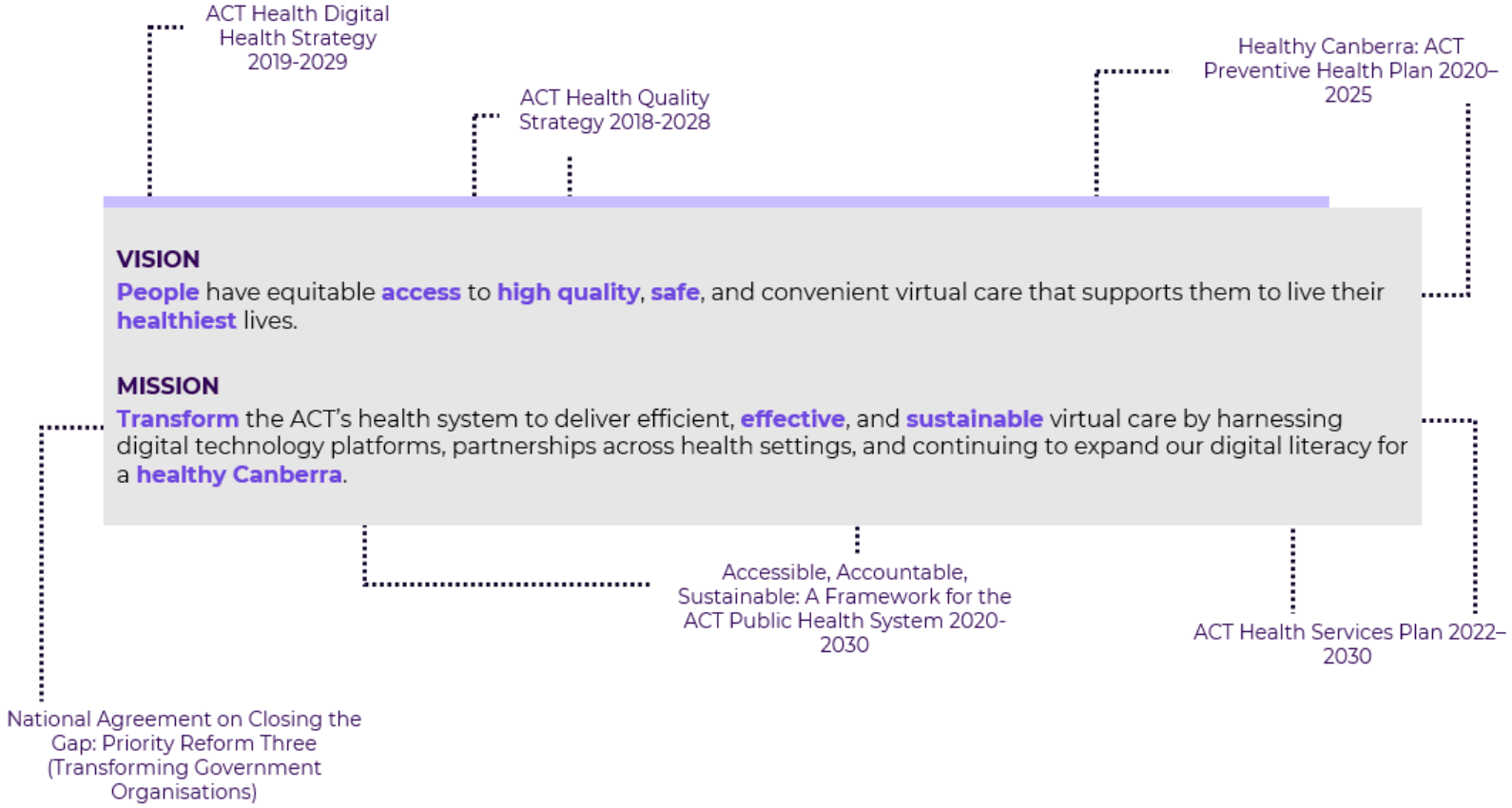


Objectives and alignment

The ACT Virtual Care Strategy provides an evidence-based framework to integrate virtual care as a safe, effective, and accessible option for health service delivery in the ACT.

It reflects the current state of virtual care across jurisdictions and aligns with emerging national policy directions.

The vision and mission are purposefully aligned with key ACT policies to support integration across the broader health system.



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Strategic framework

GUIDING PRINCIPLES

- EMPOWERING
- INCLUSIVE
- EVIDENCE-LED
- NEEDS-DRIVEN
- ACCOUNTABLE
- INTEGRATED
- CONVENIENT

VISION AND MISSION

VISION | People have equitable access to high quality, safe, and convenient virtual care that supports them to live their healthiest lives.

MISSION | Transform the ACT's health system to deliver efficient, effective, and sustainable virtual care by harnessing digital technology platforms, partnerships across health settings, and continuing to expand our digital literacy for a healthy Canberra.

TARGET OUTCOMES

1. Improve **efficiency** to reduce pressure on the health system in the ACT.
2. Deliver **high-quality person-centred** care, enabled by good clinical governance.
3. Strengthen **confidence** among consumers, carers, and clinicians to trust, adopt, and navigate virtual care.
4. Increase **access** to virtual care by consumers, carers, and clinicians.
5. Increase the **reliability** and integrity of virtual care through data security, sovereignty, and privacy measures.
6. Invest in **innovation** that is evidence-based and fit-for-purpose to ACT needs.
7. Improve **continuity** of multi-disciplinary care and streamline care pathways by integration across health settings.

KEY ENABLERS

Governance & Risk

Deliver strategic alignment, innovation and oversight.

Foster carer, consumer, and clinician co-design and innovation.

Implement strong clinical quality and safety oversight.

Service Delivery

Develop models of virtual care that actively respond to the needs of the ACT community.

Test and adopt the full spectrum of virtual care modalities where appropriate.

Establish a comprehensive and user-centred service directory.

Streamline pathways through the health system.

Tech & Digital Platforms

Fully realise the potential of established technologies.

Assess and implement new and innovative technologies.

Make virtual care more accessible for priority populations.

Provide support to all users to empower them to use virtual care effectively.

Data & Analytics

Leverage real-time data to deliver higher quality, person-centred care.

Leverage data to monitor, plan, evaluate and improve the virtual healthcare system.

Define and measure success.

Protect data security, sovereignty, and privacy.

Capability & Capacity

Support high quality training to build capability and capacity of the health workforce to deliver virtual care.

Champion new ways of working.

Empower clinicians to work at their full scope.

Actively integrate cultural responsiveness and knowledge into practice.

Culture & Engagement

Generate and leverage momentum among clinicians to adopt virtual care.

Build the trust of consumers and carers.

External Partnerships

Integrate systems with primary care.

Strengthen ties between NSW and ACT health services.

Strengthen ties with external enabling health services.

Pursue collaborations with academia and industry.

Funding

Leverage existing funding mechanisms for virtual care.

Invest in the right virtual care enablers.

Secure funding sources that support innovation.

Supporting Process & Systems

Streamline processes to reduce administrative burden.

Invest in health infrastructure that enables virtual care.

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Guiding principles

EMPOWERING	Virtual care is not the sole mode of delivery and should respect the preferences and needs of consumers, carers, and clinicians. Virtual care offerings should facilitate flexible, convenient, accessible, and appropriate care options that allow users to self-select services. Virtual care should leverage structures that empower communities in the ACT, including Aboriginal and Torres Strait Islander communities and other priority populations, to share decision-making authority with ACT Government.
INCLUSIVE	Virtual care should not exacerbate existing health disparities and must ensure that priority populations are not left behind. It should address the digital divide by being accessible to individuals with varying levels of computer literacy, language fluency, and access to up-to-date devices.
EVIDENCE-LED	Data should be used in an accessible and timely way, to empower communities in the ACT, prioritising Aboriginal and Torres Strait Islander communities, to access, use and interpret data for local decision-making. This will lead to improved clinical outcomes and patient-reported measures (PRMs). It should also refine and improve virtual care services through monitoring and evaluation to ensure they are effective, efficient and sustainable.
NEEDS-DRIVEN	Virtual care should be driven by innovative and fit-for-purpose approaches that prioritise the models of care consumers need, rather than the available technology. It should aim to enhance consumer outcomes and experiences through tailored, needs-driven solutions.
ACCOUNTABLE	Virtual care requires strong clinical governance and robust cybersecurity to ensure the delivery of high-quality services, in line with legislation and industry standards and guidelines. Adopting a risk-proportionate approach which balances innovation with safety and reliability will facilitate trust and engagement with virtual services amongst consumers, carers and clinicians - without compromising wellbeing, privacy or clinical effectiveness.
INTEGRATED	Virtual care should enhance, not replace, existing models of care by being interoperable with current health services and technology platforms. Embedding virtual care by partnering with the broader health system, including primary care, Aboriginal Community-Controlled Organisations (ACCO), Aboriginal Community Controlled Health Organisations (ACCHO), Non-Government Organisations (NGOs), allied health, cross-border partners, residential aged care homes and other members of the multidisciplinary teams ensures seamless coordination, data sharing, and support processes.
CONVENIENT	Virtual care should be designed to be user-friendly for consumers, carers, and clinicians, with relevant training and education provided to ensure smooth delivery. Potential users should be motivated to adopt virtual care by demonstrating its advantages and efficiencies, especially as compared to alternatives.

Target outcomes

Target outcomes are the specific goals that the Strategy aims to achieve, representing a collective set of measurable priorities. These outcomes are not intended to be achieved in a fixed or chronological order. Instead, they work together to guide strategic decisions, monitor progress and inform evaluation activities.

1



Target Outcome 1

Improve **efficiency** to reduce pressure on the health system in the ACT.

2



Target Outcome 2

Deliver **high-quality, person-centred** care, enabled by good clinical governance.

3



Target Outcome 3

Strengthen **confidence** among consumers, carers and clinicians to trust, adopt, and navigate virtual care.

4



Target Outcome 4

Increase **access** to virtual care by consumers, carers, and clinicians.

5



Target Outcome 5

Increase the **reliability** and integrity of virtual care through data security, sovereignty, and privacy measures.

6



Target Outcome 6

Invest in **innovation** that is evidence-based and fit-for-purpose to ACT needs.

7



Target Outcome 7

Improve **continuity** of multi-disciplinary care and streamline care pathways by integration across health settings.

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Implementing Virtual Care in the ACT

Priority - Virtual Hospital in the Home (HITH) service

The vision:

- Implement a virtually enabled HITH service which provides hospital-level care in the setting that best supports patient needs, often at home.

What we will do:

- Leverage funding committed through the 2025/26 ACT Budget to implement the virtually enabled HITH service.
- Collaborate across Government to implement the virtual HITH as part of the ACT Health System Transformation Program.
- Evaluate the service and use outcome data to support future health system planning and service sustainability.

Why is this a priority:

- A virtually enabled HITH service will:
  - Enable patients to receive care at home, reducing the risk of hospital-related complications or avoiding a hospital stay altogether.
  - Reduce the need for a hospital bed and enable more efficient use of resources, especially during periods of high demand.

Enablers for implementation:

- Remote health monitoring with real time data sharing and virtual ward dashboards.
- Expanded HITH workforce trained in virtual care



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Opportunities for future growth and innovation in Virtual Care

ACT Government will partner with stakeholders to scope the following areas of focus for future implementation to assess their potential to enhance person-centred care, complement and augment existing service delivery, and address key health system pressures. While these represent some initial opportunities, there is also potential to explore other emerging virtual care models of service delivery into the future.



Implementation of a **virtual urgent care service** would provide timely telehealth support for non-life-threatening conditions, connecting patients with emergency-trained clinicians via video or phone, often without a referral.



Expanding existing **virtual outpatient services** will enable standardisation of service offerings and will optimise flexibility and convenience of care delivery, while preserving connection and integration within and across the service system.



Design and delivery of **virtual models of mental health care** can remotely deliver components of therapy, assessment and support through digital platforms. Often used as a transition from acute care to maintain continuity and reduce potential for mental health decline in the community.



Innovative **virtual chronic disease management** approaches which incorporate remote patient monitoring, self-management devices and tools, and the design and delivery of specialised virtual programs will support the ongoing monitoring of chronic conditions, increase consumer engagement in care, and prevent exacerbation or deterioration.



Implementation of **cross-border virtual care opportunities** will enable patients to access health services from providers in other regions via digital platforms, often increasing access to specialist services.

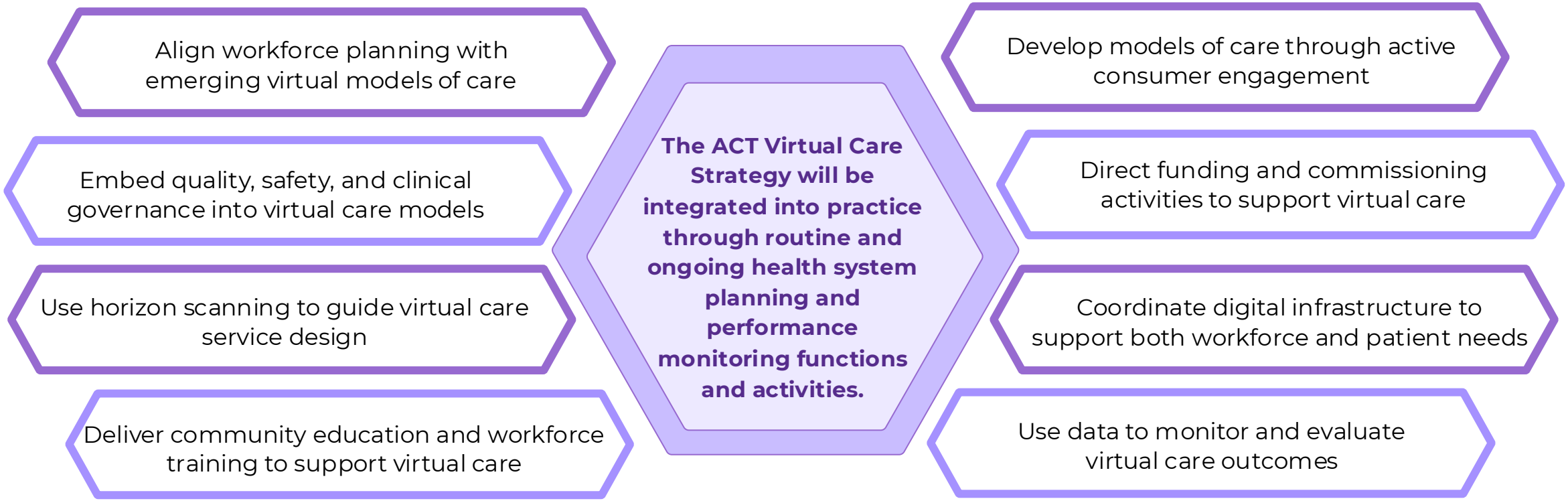


Key considerations

To fully realise the benefits of virtual care, future service delivery will need to expand beyond the public health system through partnerships with the private and community sectors, supported by innovation and strategic commissioning.

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Strengthening foundations for Virtual Care integration



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Next steps



Implement the Strategy through a phased rollout plan, with a focus on the priority areas for implementation, and integration with existing technology and service profiles.



Establish governance structures to oversee implementation, including a steering committee and clinical champions.



Develop virtual models of care in partnership with consumers, clinicians, and community organisations to ensure relevance, equity, and usability.



Develop evaluation frameworks and metrics to monitor progress, measure outcomes, and ensure accountability across service delivery.

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