



digital health
cooperative research centre
briefing document
July 2018



digital health crc

DIGITAL HEALTH COOPERATIVE RESEARCH CENTRE

BRIEFING DOCUMENT

SYNOPSIS

1. The Digital Health Cooperative Research Centre (Digital Health CRC) is one of four CRCs to be funded by the Commonwealth Government's CRC Program (Round 19) – see copy of Media Release (Attachment 1).
2. The Centre has the support of both the Australian Digital Health Agency and the Medical Technologies and Pharmaceuticals industry growth centre (MTP Connect).
3. The Government has committed \$55million for the CRC's 7 year term. The funding will be combined with industry and university contributions of \$56m in cash and \$120m in kind. Funding commences with effect from 1 July 2018, subject to completion of the documentary formalities by the Digital Health CRC and its university and industry partners.
4. The Digital Health CRC will operate through collaborative R&D programs involving 40 commercial and government organisations operating across the health, aged care and disability sectors, 24 established and start-up technology, advisory and investment companies, and 16 Australian universities. A list of partners is provided as Attachment 2.
5. While some R&D projects will be specific to an industry partner, wherever possible, partners will be part of national, cross-cutting R&D projects.
6. The Digital Health CRC will focus on enhancing the deployment and use of existing and emerging technologies that capture and analyse all forms of data. It will use the knowledge gained to develop solutions to improve health across all settings of care through providing, where possible, real-time decision support to consumers, service providers, clinicians and those charged with planning, regulating, funding and managing the system. The R&D programs will form tight teams between partner organisations with common priorities to work on specific high value projects where impact and outcomes can be shared. These will include for instance medication management across primary and acute care, preventable readmissions to hospital and instances of low value care. These initiatives will enable R&D at a scale that assures national impact through four interlocking research programs – see brief description in Attachment 3.

ATTACHMENT 1 – MEDIA RELEASE**Government backs \$200 million Digital Health R&D initiative**

**A \$200+ million opportunity to transform health delivery:
improving health outcomes; reducing waste in the health system; building businesses and jobs.**

Embargo: 10 am, **Friday, 13 April 2018**

Launch with Senator Zed Seselja at 10 am, 'Fountain Courtyard', Sydney Hospital, Macquarie Street, Sydney.

The new Digital Health CRC (Cooperative Research Centre) will invest over \$200 million to develop and test digital health solutions that work for real patients in real hospitals and health services, while equipping Australians to better manage their own health and wellness.

Senator the Hon. Zed Seselja, Liberal Senator for the ACT, Assistant Minister for Science, Jobs and Innovation announced today that the Government will invest \$55 million through its CRC program to further develop Australia's growing Digital Health technology and services industry. The Centre was one of only four CRC's funded in this round.

The Digital Health CRC will have at least \$111 million in cash funding, and \$118 million in-kind funding to invest over its seven-year life. The Centre will operate through collaborative R&D programs involving 40 commercial and government organisations operating across the health, aged care and disability sectors, 24 established and start-up technology, advisory and investment companies, and 16 Australian universities. The Centre has the support of both the Australian Digital Health Agency and the Medical Technologies and Pharmaceuticals industry growth centre (MTP Connect).

Senator Seselja said the Digital Health CRC will improve the health and healthcare of all Australians. "The CRC brings together industry and research partners across Australia's health and wellness landscape in a collaborative approach to advancing health and medical technologies and pharmaceutical industries."

"CRCs have a proven track record in delivering tangible benefits for industry. By linking industry expertise with our world-class research capability, CRCs generate new knowledge, solve problems and offer opportunities to commercialise new ideas," Assistant Minister Seselja said.

The Digital Health market is expected to grow internationally at over 25.9% p.a. to reach \$379 billion by 2024 (Hendersen et al -2016). "Timing is everything" says CEO-designate, David Jonas. "Australia has pioneered many health advances. If we act now, the Australian health industry can be pioneers in digital health transformation and leaders in digital health technology. If we wait a few years, the term 'Digital Health' will be synonymous with health, and Australian industry will have missed the boat. Recognising the international nature of health and technology, we are particularly pleased to have US-based HMS Inc as a major industry partner."

"Our CRC's founding premise is that digital health solutions have the potential to improve people's health and wellbeing, reduce waste in the health system and build businesses and jobs in the rapidly growing digital health sector" says the consortium's chair, Professor Christine Bennett AO. "One of our exemplar project relates to improving medication safety. Adverse drug reactions result in 400,000 GP visits a year and are responsible for 30% of emergency hospital admissions in the elderly. This costs the system \$1.2 billion per annum, of which 50% is avoidable, according to our program lead, Professor Libby Roughead."

Jonas explains that the CRC's R&D program is industry driven and academically powered. "Industry is looking for digital solutions to be developed and validated through provision of access to 'test-beds' and for pathways to market. We will meet these objectives by working with our university and industry partners and by supporting and expanding the already nascent eco-system. We are confident that through our existing and planned international partnerships we will take Australian innovation into a global marketplace."

Professor Bennett notes that the Digital Health CRC will spawn new companies and products, foster a new digital health workforce and forge new national and international partnerships. "We forecast that at least 1,000 new jobs will be created by this CRC, and that the Government and our partners investments will be returned 5 times over", says Bennett, "and most importantly we will have actively contributed to improving the health and wellbeing of all Australians".

Australia's CRC program has had great success over the years generating billions of dollars in export earnings. These include the creation and/or development and commercialisation of the Cochlear hearing implants, key parts of the new Boeing 787 Dreamliner aeroplane wings, vision and oral health products, and the SMARTS financial surveillance software used across the world to detect illegal trading behaviours.

For more information contact Lee-Ann Breger, Director Partner Relations, on lee-ann.breger@digitalhealthcrc.com or 0406 243 985 or check our website <http://www.digitalhealthcrc.com>

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ATTACHMENT 2 - FULL LIST OF PARTICIPANTS

University Participants
University of Canberra
Curtin University
Federation University Australia
Flinders University
Macquarie University
Monash University
The University of Notre Dame Australia
The University of Queensland
Queensland University of Technology
Royal Melbourne Institute of Technology
Swinburne University of Technology
University of South Australia
University of Sydney
University of Technology Sydney
Western Sydney University
University of Wollongong
Industry Participants
Insurance
Australian Health Service Alliance
Insurance Australia Group Ltd
Transport Accident Commission
Public Health – Ministries and Agencies
ACT Health
Australian Commission on Safety and Quality in Health Care
Australian Digital Health Agency
Australian Sports Anti-doping Authority (ASADA)
Department of Health (Commonwealth)
NSW Health (including eHealth NSW)
Department of Health Northern Territory
Population Health Research Network
Queensland Health (including eHealth Queensland)

Victorian Department of Health & Human Services
Western Australia Department of Health
Public Health - Local Health Districts and Health & Hospital Services
Alfred Health (Victoria)
Eastern Health (Victoria)
Metro North Hospitals & Health Service (Queensland)
Metro South Hospitals & Health Service (Queensland)
Western Australia Country Health Service
Primary Health Networks
Capital Health Network
Eastern Melbourne Primary Health Network
Gippsland Primary Health Network
South Eastern Melbourne Primary Health Network
WA Primary Health Alliance
Health Services Providers
Adventist Health Care
Cabrini Care
Health Care Australia Pty Ltd
Peter MacCallum Cancer Centre
St John of God Health Care Inc
Yourtown
Medium-Large Technology & Solutions Companies
Alcidion Corporation Ltd
Chappell Dean
FRED IT Group
Genome.One Pty Ltd
GuildLink
HAMB Systems Ltd
HMS
Infoxchange
Lorica Health
Pen CS Pty Ltd

RITEQ Pty Ltd
Telstra Health
Smaller Technology & Solutions Companies & Start-ups
Boundlss P/L
Connected Enterprises P/L (trading as Care Circle)
eHealthier P/L
goAct P/L
Lone Alarm P/L
Mirus Australia
Outcomes Health
SiSU Wellness P/L
Springday P/L
Wave Digital P/L
Aged Care & Disability
The Aged Care Guild
Bupa Foundation (Australia) Ltd
National Disability Services
Retire Australia Care and Services Pty Ltd
Sapphire Holdings Group Australia Ltd
Regulators and Colleges
Australian Health Practitioner Regulation Agency
The Royal Australasian College of Physicians
Royal Australasian College of Surgeons
Other
Amgen Australia Pty Ltd (<i>pharmaceuticals</i>)
Australian Red Cross Society (<i>blood and related products</i>)
ANDHealth Ltd (<i>incubator</i>)
Deloitte Consulting Pty Ltd
Janchor Partners Management Ltd (<i>investment house</i>)

ATTACHMENT 3 – SYNOPSIS FROM STAGE 2 BID

SHORT PROJECT DESCRIPTION

The Digital Health CRC will improve the health and health care of Australians and advance the economy through collaborative R&D that combines multi-disciplinary skills, industry knowledge, technologies, networks & data to: empower consumers; understand and manage health risks of individuals and communities; support clinical practice; improve system efficiency and access to quality care; and build and enhance businesses to provide high value jobs and solutions in a growing global market.

FULL PROJECT DESCRIPTION

SYNOPSIS

Health is one of the largest and fastest growing global industries. The drivers are population growth, an ageing population, the increasing burden of chronic disease and the continuous adoption of new medical technologies. In Australia health costs exceeded \$160 billion in 2014–15 (10.0% of GDP). Its growth rate raises serious sustainability concerns; the National Commission of Audit forecasts that spending on hospitals alone will grow at a compound 10.4% p.a.

The challenge for all nations is to maximise the diffusion of improved health technologies while reigning in runaway costs. In Australia, this is exacerbated by diverse approaches to funding and delivery of health and related care services across jurisdictions and programs. This results in a highly fragmented information system that compromises healthcare planning, management and delivery at an individual and systemic level.

Turning these challenges into opportunities lies at the heart of the Digital Health CRC's R&D programs. The Digital Health CRC will deliver increased effectiveness and efficiency of healthcare while growing and spawning health & medical services & technology businesses to take advantage of a digital health market that will grow internationally at over 25.9% compound annual growth rate to reach \$379bn by 2024 (Hendersen et al -2016).

THE HEALTHCARE CHALLENGE AND OPPORTUNITY

During the term of the Digital Health CRC, circa \$1.5 trillion will be expended on healthcare in Australia. When the projected costs of the NDIS and government-funded aged care are added to this, the value approaches \$2 trillion. Over the fifteen years for which Digital Health CRC impacts are modelled, these costs are forecast to reach \$5 trillion. It is common knowledge, underpinned by extensive studies (e.g. McKeon et al) and the 2017 Productivity Commission study that waste, including low value care and adverse events, is as high as 20-30% of total health cost.

At the same time there is wide adoption of digital technologies by all actors in the health supply chain from governments, through to service providers and consumers. However, the under-utilisation of these technologies mean that the digital, consumer driven transformations, that have occurred in most sectors have not occurred in health.

The Digital Health CRC will address shortcomings and inefficiencies in the healthcare system that stem from the lack of effectively 'surfaced' and joined-up information, evidence and knowledge. We are flying blind. Clinicians practice without fully knowing the full context of their patients or their outcomes. Care is generic rather than personalised. Funders pay for interventions of unproven value. Consumers lack access to solutions and information that are commonplace in other aspects of their lives.

These challenges and opportunities can only be effectively addressed through the formation of extensive new partnerships as described in this proposal; these cut across the fragmented landscape that is health in Australia. The Digital Health CRC is a collaboration of 4 groups of key enabling stakeholders: 38 funding, insurance and public & private sector service delivery organisations covering the healthcare, aged care and disability sectors; 10 medium & large providers of technology solutions & services to these sectors (including Nasdaq listed HMS that has access to 90% of public health insurance data in the US) and 8 early-stage medical & health technology companies; 3 life sciences companies; and 16 universities. Three clinical peak and regulatory organisations have also committed to be involved in our programs, as well as two investor/incubator organizations. We have established relationships with several key international organisations who are keen to participate in knowledge exchange programs and develop collaborations. These include Stanford University, Harvard University and Partners Healthcare incorporating Massachusetts General and Brigham & Women's Hospitals.

The research, development and commercialisation programs of the Digital Health CRC are supported by the Australian Digital Health Agency, who are a bid partner, and will contribute to the achievement of its 'National Digital Health Strategy', particularly its goals to give consumers more control of their healthcare decisions and promote Australia's global leadership in digital health and innovation. The Chair of the ADHA Consumer Committee will lead our consumer engagement. The Digital Health CRC will also contribute towards the achievement of a range of growth priorities of the Medical Technologies & Pharmacy Growth Centre's (MTP Connect) 'Sector Competitiveness Plan' and has its formal support. This bid is also supported by the Australian Health Practitioner Regulation Agency and the Royal Australasian College of Surgeons & the Royal Australasian College of Physicians. Productive discussions have been held with CSIRO regarding collaborating with Data 61 and Australian e-Health Research Centre should the bid be successful.

The Digital Health CRC's industry partner base covers public and private health organisations across all Australian jurisdictions. This coverage is indicative of the recognition of the transformational potential of digital health and partner commitment to substantively contribute to unlocking this potential. Through this coverage, the Digital Health CRC has the capacity to positively impact every Australian.

It is clearly recognised that managing an initiative of this scale will require robust governance and management structures. The seniority and experience of the proposed Board, Management and Advisory Panels provide the base for this. The proposed mixture of PhDs, postdoctoral researchers and other senior resources from the universities and industry partners, managed through formal program and project management processes, and supported by the Digital Health CRC's core team provide an approach to maximising the probability of impacts being achieved. From the outset we will work with government, colleges, regulators, training and consumer organisations to assure reach and replication. This vital capacity building is intrinsic to preparing the soil into which the digital health seeds will be planted. Our incubation and commercialisation will be driven by partners who specialise in growing and supporting start-ups and seeking venture capital.

THE R&D PROGRAM

The Digital Health CRC will focus on enhancing the deployment and use of existing and emerging technologies that capture and analyse all forms of data. We will use the knowledge gained to develop solutions to improve health across all settings of care through providing, where possible, real-time decision support to consumers, service providers, clinicians and those charged with planning, regulating, funding and managing the system.

The R&D programs will form tight teams between partner organisations with common priorities to work on specific high value projects where impact and outcomes can be shared. These will include for instance medication management across primary and acute care, preventable readmissions to hospital and instances of low value care. These initiatives will enable R&D at a scale that assures national impact through four interlocking research programs:

- Enabling Information Discovery and Application
- Identifying and Managing Health Risk
- Better Value, Quality, Access & Safety
- Consumer Empowerment and Positive Behaviour

A key aspect in the preparation of Stage 2 of this application was the conducting of partner-based and cross-industry workshops both in Australia and US. These enabled Partners to lead the development of common priority areas and also form industry clusters that will work collectively on selected programs of work. All partners have also completed a comprehensive survey that identified their priorities both in terms of service and economic outputs.

The workshops and surveys have allowed for the scoping of large-scale and aspirational cross-jurisdictional, national and international programs such as shared data commons or co-development of shared real-time clinical analytics. This includes considerations of taking an approach to a particular key issue, such as managing cardiovascular disease, and working with an entire population across all four research domains.

OUTCOMES

The core outcomes of the Digital Health CRC will be:

- Improve healthcare efficiency and value through customized solutions that create and facilitate the implementation of actionable information.
- Improved health and wellbeing through harnessing personalised data and creating integrated applications to support positive behaviour and new models of care.
- Create a lasting environment in which fruitful models of collaboration can be established across jurisdictions and industries.
- Capacity building and improved digital literacy driven by the proposed education, training and technology development programs.
- Increased global participation of Australian health and medical technology solutions and services organisations.

IMPACTS

The key monetary impacts of the Digital Health CRC include:

- A reduction in the rate of increase in health costs and/or an increase in value of every health (and social services) dollar expended. This will arise from personalised and targeted preventive care & value-based (being safe, effective, cost-effective) healthcare.
- Improved efficiency and effectiveness in health and medical research through reducing or eliminating the huge time and cost overheads borne by the sector in relation to data collection, linkage and management, and the associated ethics obligations.
- Improved efficiency of the health, aged care and disability sectors through digital linkages within & between the sectors.
- Increased domestic and international sales revenues for existing and emerging health & medical technology and life sciences companies with the knock-on effect of increased employment opportunities.
- Increased economic activity from a generally healthier population. This will also support the Government's targeted increase in citizens' working lives.

Digital Health CRC – Management Team

Mr David Jonas - CEO

David Jonas is the CEO of the Digital Health CRC. He was the founding Head of the Health Market Quality R&D program of the Capital Markets CRC, and founding CEO of Lorica Health on whose Board he continues to serve. David is a non-executive director of Infoxchange, a social enterprise that delivers technology solutions and services to the NGO sector and large government departments. David's background includes founding and building Australia's first e-commerce and e-government consulting company. He spent 7 years as the CTO of a large multi-national group of companies. He has served on the European Union's Global Business Dialogue on the Information Economy, the Australia-Singapore Joint IT Council, the Australian Government's National Authentication Expert Group and IT Security Expert Advisory Group, and the National Electronic Health Transition Authority's Privacy Roundtable.

A-Professor Federico Girosi – Chief Scientist & Director of Research

The Chief Scientist and Director of Research for the Digital Health CRC, Federico Girosi holds a PhD in Health Policy from Harvard University and a PhD in Physics from the University of Genoa, Italy. He is currently the Head of Research of the Health Market Quality program at Capital Markets CRC and an Associate Professor at the Translational Health Research Institute, Western Sydney University. Prior to joining Western Sydney University in 2011 he worked at the RAND Corporation, where, among other projects, he led the team that developed the COMPARE micro-simulation model for the analysis of the 'Obama Care' health insurance reform. He has extensive experience in modelling health benefits and costs, as well as an established background in data science, which he gained by conducting research for 10 years at the Artificial Intelligence Laboratory at the Massachusetts Institute of Technology (MIT).

Professor Tim Shaw – Health Services Research Lead & Director of Workforce Capacity

Professor Tim Shaw is the inaugural Professor of eHealth and Director of the Research in Implementation Science and eHealth Team (RISe) in the Faculty of Health Sciences at the University of Sydney. He is Health Systems Lead and Director of Workforce Capacity in the Digital Health CRC. He has an active research development group at The University of Sydney with 8 Phds, 2 Postdoctoral Fellows and 5 Research and administrative staff. He works within the multidisciplinary Charles Perkins Centre, (<https://sydney.edu.au/charles-perkins-centre/>). He combines his experience as an implementation scientist with a deep understanding of the role of technology in health system transformation. He has over 70 Publications and has been CI on over 20 grants and consultancies totalling over \$124M in the last 5 years. His focus is on working at the coal-face of service delivery to implement innovations in health and healthcare.

Ms Lee-Ann Breger – Director Partner Relations & Program Office

Lee-Ann Breger heads Partner Relations and the Program Office for the Digital Health CRC. Lee-Ann is a specialist in transformational management focussed on delivering value and insights into the Australian health system, most recently supporting over 20 projects as the Head of Partner Relations within the CMCRC. Lee-Ann draws upon her experience in deploying transformational technologies at some of the largest Australasian public and private institutions including Medibank, Australia Post, the Auckland District Health Board and the Auckland Regional Public Health Service. Lee-Ann's experience with the latter two included implementing such projects as a new model of care for paediatric diabetes and the overhaul of the delivery of health services within the Auckland Regional Public Health Service.

Dr Uma Srinivasan – Research Scientist & Mentor

Dr Uma Srinivasan works as a research scientist and mentor for the Digital Health, a role she initiated for the Capital Markets CRC's (CMCRC) Health Market Quality R&D program. Uma has been the leader and an author of the CMCRC's highly regarded *Flying Blind* publications. Uma also provides advice to research and product development in the area of health information business intelligence services. Formerly she worked as health informatics adviser to Lorica Health and Principal Research Scientist at CSIRO, Australia leading a team of IT professionals, scientists and engineers in two specialist areas: Health Data Integration and Multimedia Delivery Technologies. Her previous position also includes working as a Project Director at Prince of Wales Hospital Group, South Eastern Sydney Area Health Service, where she was responsible for designing managing implementations of large inter-hospital systems. She has several international publications in the areas of health information systems, multi-database and multimedia systems. She holds a PhD in Computer Science from the University of New South Wales. Dr Srinivasan is an Adjunct Professor at Western Sydney University, Australia. Her research interests include network analytics and predictive modelling for the healthcare sector.

Digital Health CRC – Board of Directors

Emeritus Professor Mary O’Kane AC - Chair

Emeritus Professor Mary O’Kane AC is the Chair of the Digital Health CRC. She is also chair of the boards of the Space Environment Management CRC and the Institute of Marine and Antarctic Studies at the University of Tasmania, and a board member of the Cross River Rail Delivery Authority, the Capital Markets CRC and the Innovative Manufacturing CRC.

Professor O’Kane is a company director, Chair of the NSW Independent Planning Commission, and Executive Chairman of O’Kane Associates, a Sydney-based consulting practice specialising in government reviews and research and innovation matters. She was NSW Chief Scientist Engineer from 2008-2018. Professor O’Kane was Vice-Chancellor of the University of Adelaide from 1996-2001. She is a former Chair of the board of the Australian Centre for Renewable Energy, a former member of the Commonwealth’s Review of the National Innovation System, the Australian Research Council and the Cooperative Research Centres Committee, the board of FH Faulding Co Ltd and the board of CSIRO. She is a Fellow of the Australian Academy of Technology and Engineering and an Honorary Fellow of Engineers Australia.

Professor Christine Bennett AO

Professor Christine Bennett AO is a director of the Digital Health CRC and acted as Interim-Chair during the bidding process. She was appointed to the role of Professor and Dean, School of Medicine, Sydney, The University of Notre Dame Australia in May 2011. Professor Bennett is a specialist paediatrician and has over 30 years of health industry experience in clinical care, strategic planning, business operations and senior management in the public, private and not-for-profit sectors. Professor Bennett chaired the National Health and Hospitals Reform Commission that provided advice to the Australian Government on a long term blue print for the future of the Australian health system.

Professor Bennett’s professional experience has included being Group Executive and Chief Medical Officer for MBF and then Bupa Health and Care services, CEO of Research Australia, Managing Director of Total Health Enterprise Ltd, Partner in Health and Life Sciences for KPMG Australia, CEO of Westmead Hospital and Community Health Services, General Manager for the Royal Hospital for Women and Head of Planning in NSW Health. Professor Bennett is currently the Chair of Sydney Children’s Hospitals Network and sits on the boards of Regis Healthcare, Capital Markets CRC and Lorica Health.

Dr Steve Hambleton

Dr Steve Hambleton MBBS FAMA FRACGP(hon) FAICD is a director of the Digital Health CRC. Dr Hambleton practices as a GP in Kedron in Brisbane and is a former State and Federal President of the Australian Medical Association (AMA), and an Adjunct Professor at the University of Queensland. He was the Chairman of National eHealth Transition Authority (NEHTA) and is currently a co-chair of the Clinical Programs, the Clinical Reference Group and the My Health Record Expansion Program Steering Group in the Australian Digital Health Agency. He also holds board positions with Avant Mutual Group Limited, the AMA Queensland Foundation and the Qld Aboriginal and Islander Health Council.

Professor Michael Aitken AM

Professor Michael Aitken AM is a director of the Digital Health CRC. Professor Aitken is an academic turned entrepreneur. He was a founder of SIRCA (www.sirca.org.au) that developed TRTH (<http://tickhistory.themsonreuters.com>), and the Capital Markets CRC (www.cmrc.com). He was a founder of the SMARTS Group that was sold to NASDAQ in 2010. Mike led the establishment of Capital Market Technologies, a subsidiary of CMCRC. As well as investing in spin-off companies such as Capital Markets Surveillance Services and Lorica Health, CMT has acted as a venture fund and invested in start-ups that enhance market transparency and increase the fairness and efficiency of different marketplaces, such as markets for mortgages (www.dealmax.com.au), supply chains (www.ordermentum.com),

building management (www.cimenviro.com) and digital currency and commodities trading (www.digi.cash, www.infinigold.com).

In 2010, Professor Aitken was named Ernst & Young Entrepreneur of the Year (Technology & Emerging Industries) and received the Prime Minister's ICT Exporter of the Year award for his work with SMARTS. In recognition of his service to the Australian education, business and finance sectors, he was inducted as a member of the Order of Australia in 2014. In 2016 Mike Aitken was awarded the Prime Minister's Prize for Innovation. Professor Aitken is currently the Managing Director and interim CEO of Lorica Health.

Dr Bronwyn Evans

Dr Bronwyn Evans, BE (Elec), PhD, FTSE, HonFIEAust is a director of the Digital Health CRC. Dr Evans is the CEO of Standards Australia, and Chair of MTPConnect (the Industry Growth Centre for Medical Technologies and Pharmaceuticals). She is the Vice President (Finance) of the International Standards Organisation (ISO) and a Director of the Australia-Japan Foundation. Dr Evans has 35 years' experience in various engineering roles and in 2014 and 2015 was recognised as one of Australia's 100 most influential engineers, and in 2016 was recognised as an AFR/ Westpac 100 Women of Influence.

Mr Graeme Samuel AC

Mr Graeme Samuel AC is a director of the Digital Health CRC. Mr Samuel is a Professorial Fellow in Monash University's Business School and School of Public Health and Preventative Medicine. He is also a Councillor of the Australian National University and Chairman of its Finance Committee, President of Dementia Australia, Chair of the National Health and Medical Research Council National Institute for Dementia Research, Chair of Lorica Health, Chair of the South East Melbourne Primary Health Network and Chair of Airlines for Australia and New Zealand, and a member of CEDA's Council of Economic Policy.

Mr Samuel has held a number of roles in public life including former Chairman of the Australian Competition and Consumer Commission, Associate Member of the Australian Communications and Media Authority and President of the National Competition Council. In 2010 he was made a Companion of the Order of Australia for eminent service to public administration through contributions in economic reform and competition law, and to the community through leadership roles with sporting and cultural organisations. Recently, Mr Samuel was a member of the APRA Panel to conduct a Prudential Inquiry into the culture, governance and accountability of Commonwealth Bank of Australia.

Prof Bruce Robinson AM

Professor Bruce Robinson AM is a director of the Digital Health CRC. Professor Robinson is an endocrinologist. He is Chair of the Australian Government's Taskforce of expert clinicians charged with reviewing the Medicare Benefits Schedule and in 2015 was appointed as Chair of Australia's peak advisory and funding body for medical research, National Health and Medical Research Council.

Professor Robinson was the Dean of Sydney Medical School from 2007 until 2016. Since 2001, he has been Chairman of Hoc Mai Foundation, a major program in medical and health education and exchange with Vietnam. Professor Robinson is on the boards of publicly listed companies Mayne Pharma and Cochlear. Professor Robinson's research has focused on identifying genetic changes which either predispose or directly cause endocrine tumours. Other highlights include the formation of an international consortium of families from around the world to study medullary thyroid carcinoma and pheochromocytoma. He established the Cancer Genetics Unit at the Kolling Institute of Medical Research, Royal North Shore Hospital, since 1989. When he took on the Deanship in 2007 he transitioned to Co-Head, Cancer Genetics with Dr Rory Clifton-Bligh. He continues to practice at Sydney's Royal North Shore Hospital. Professor Robinson has supervised 37 PhD students and has more than 300 research publications.