

Board & Executive Readiness Packages

Executive Readiness Program

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Who we are

The Digital Health Standards Council of Australasia (DHSCA) is an independent digital health and AI assurance and assessment organisation. We work alongside health service providers to assure the safe and effective implementation of digital health and AI-enabled technologies in health and care settings. That assurance gives providers, clinicians and the consumers in their care confidence that health technologies meet a recognised standard before they reach the point of care.

What's included: Executive Readiness Program

A two-day on-site program for healthcare executives and senior clinical leadership on governing digital health and AI in practice. We ask for your AI and digital health inventory beforehand and build the applied sessions around it, so the scenarios are unique to your service delivery context.

The program covers execution, not just obligations: the frameworks, procurement standards, evaluation methods and the clinical safety controls that turn board intent into a tangible set of accountabilities.

Day one covers governance frameworks, AI fundamentals, technology evaluation and procurement standards, and clinical safety for virtual care and AI-enabled tools.

Day two is applied. Participants work through evaluation scenarios against tools in their own environment and complete a structured self-assessment against DHSCA's governance readiness indicators.

Participants receive a workbook and a completed self-assessment showing where the organisation sits across relevant governance domains.

The workbook covers:

- Governance framework design
- AI procurement and evaluation standards
- GUARDS™ Clinical and Technical AI Assessment evaluation domains and how to apply them
- Clinical safety controls for virtual care and AI-enabled tools
- Human oversight and escalation pathways design
- Post-deployment monitoring and longitudinal evaluation of digital health AI-enabled tools.

The structured self-assessment runs against DHSCA's governance readiness indicators across board and executive accountability, digital health risk governance, AI and technology procurement governance, clinical safety oversight, data governance and privacy, and regulatory awareness and compliance.

The gap it covers

The gap between a board resolution and a governed deployment is where things may go wrong. Someone in a health service must write the procurement standard, sit on the evaluation panel, define the human oversight requirements, set the monitoring frequency and decide the escalation threshold. This too often sits with the executive function and needs a strong methodology and systems underpinning it.

Second, when a digital health tool underperforms after deployment, the organisations that manage it well are the ones where the executive team recognised the failure in advance and built the controls in before go-live.

The self-assessment gives a defensible internal view of readiness before anyone external looks at it, and DHSCA's indicators map to the same governance requirements set by Australasian safety and quality regulators and standards setting bodies.

Who delivers it

The Executive Readiness Program is delivered by DHSCA's clinical and technical leadership, alongside medico-legal and governance experts. Each bring substantial experience across healthcare standards, regulation, the law, digital health safety and quality, and applied to your own service's context.

Overview & Investment

Format	Two days on site, plus discovery and preparation time.
Output	Participant workbook and guided clinical and technical governance self-assessment
Audience	Executive teams, senior clinical leadership, quality and accreditation managers, digital health and transformation leads, CIOs, CNIOs and CMIOs.
Investment	\$28,000 - \$36,500 (ex GST) *Estimate pricing only. Reflects a standard engagement scope. Multi-site, high complexity or additional-cohort variations are scoped and quoted separately.

Work with us

If you'd like to engage DHSCA for the **Executive Readiness Program** or if you have any questions about how we can support your organisation, email: contact@dhsca.com.au

Engagement terms, assumptions and dependencies

Notes on assumptions and dependencies

Any engagement and its timeline assume timely access to the people and materials the work depends on. This includes access to relevant staff, either for interviews or evidence gathering across clinical, operational, risk and technical roles, and to any existing governance, policy and consent documentation.

Our approach also assumes access to system and platform documentation where appropriate. This may include information regarding data-hosting, data-processing and integration details, and the terms governing your organisation's use of these systems.

DHSCA assumes the organisation will nominate a single point of contact to coordinate scheduling and access, and that documents, interviewees and feedback will be available within agreed turnaround times. Where decisions or approvals from your organisation are needed for the work to progress, we assume these will be provided within a reasonably agreed timeframe.

If access or information is delayed, or material new requirements emerge during the work, the timeline and scope may be adjusted by agreement through a simple variation of the contract for services.

Basis of advice and limitations

DHSCA provides independent advisory services and assessment of digital health and AI tools entering clinical and operational workflow, and the arrangements that govern them. Our findings and recommendations are based on the information, documents and access your organisation provides, and on the regulatory and standards position current at the time of delivery. The purpose of this work is to support your organisation's own decision-making and governance settings maturity.

Responsibility for whether and how to adopt, deploy or operate any technology, and accountability for those decisions and their clinical, technical, operational, security, privacy, and regulatory outcomes, rests with your organisation.

To the extent permitted by law, DHSCA accepts no responsibility or liability for any loss, damage, or harm arising from the deployment or use of those technologies, from decisions taken by your organisation, from reliance on this advice where the information provided was incomplete or inaccurate, or where recommendations were not implemented as advised. Nothing in this engagement transfers clinical, legal or regulatory responsibility to DHSCA.