Member	Annabelle Cleeland	Electorate	Euroa
Period	1 October 2025 to 31 December 2025		

Regulation 6 - Expense allowance and electorate allowance

Total amount paid to member for electorate allowance	$15,336.58
Total amount paid to member for expense allowance	$0.00

Regulation 7 - Motor vehicle allowance

Total amount paid to member for motor vehicle allowance	$9,708.51
Member did not receive the motor vehicle allowance in the previous quarter and member has elected to receive the motor vehicle allowance for this quarter	No

Regulation 9 - Parliamentary accommodation sitting allowance

Total amount paid to member for parliamentary accommodation sitting allowance	$7,566.58
Suburb in which the member's parliamentary accommodation is located	Melbourne

Regulation 10 - Travel allowance claims

Date from	Date until	Reason for travel	Total amount paid	Town or city in which accommodation was located	Value of the accommodation
06-Nov-25	07-Nov-25	Travel for electorate business to attend inaugural MKI APL scholar program focused on future ready government	$447.22	Sydney	$428.46
07-Nov-25	08-Nov-25	Travel for electorate business to attend inaugural MKI APL scholar program focused on future ready government	$428.46	Sydney	$428.46

Total number of nights for travel allowance claims	2
Total amount paid to member for travel allowance	$875.68

Regulation 11 - Commercial transport allowance claims

Date from	Date until	Reason for travel	Total amount paid	Mode of transport	Value of transport
06-Nov-25	06-Nov-25	Travel for Electorate business to attend inaugural MKIAPL scholar program focused on future ready government	$446.83	Flights	$446.83
07-Nov-25	07-Nov-25	Travel for Electorate business to attend inaugural MKIAPL scholar program focused on future ready government	$31.50	Taxi	$31.50
08-Nov-25	08-Nov-25	Travel for Electorate business to attend inaugural MKIAPL scholar program focused on future ready government	$47.34	Rideshare	$47.34

Total number of nights for commercial transport allowance claims	4
Total amount paid to member for commercial transport allowance	$525.67

Regulation 12 - International travel allowance claims			
Date from	Date until	Reason for travel	Total amount paid
26/09/2025	6/10/2025	Attendance at the Future of Health Summit and AI in Health Care Summit for health care and AI development research as part of electorate business in my capacity as Shadow Assistant Minister for Health	$4,912.93

Total number of nights for international travel allowance claims — **10**

Total amount paid to member for international travel allowance — **$4,912.93**

International Travel Report

London, United Kingdom – 29th September to 3rd October 2025

Annabelle Cleeland MP
Member for Euroa | Shadow Assistant Minister for Health

Reason for Travel

The trip to London was undertaken as part of Electorate business in my capacity as Shadow Assistant Minister. The purpose of the visit was to participate in the Future Health Summit and the AI in Health Summit. Additionally, I conducted a series of meetings with leading UK health organisations, universities, and technology experts. The primary aim was to gather valuable insights on system integration, digital innovation, and workforce reform to inform and enhance the improvement of Victoria's health system, with a particular focus on regional areas.

Objectives

- Understand how leading health systems integrate technology, data, and patient care.
- Explore workforce strategies to reduce pressure on emergency and hospital services.
- Examine models of digital health infrastructure and AI governance.
- Strengthen international collaboration and bring back practical insights to support Victorian healthcare.

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Executive Summary

This study tour provided valuable insight into the modernisation of healthcare through integration, technology, and data-driven policy. Meetings with major UK health institutions and technology partners highlighted the importance of interoperability, patient-centred design, and investment in workforce capability. The visit reinforced that system reform must be anchored in clinical outcomes, supported by digital innovation, and built on community trust.

Regional hospitals, ambulance services, and frontline clinicians all stand to benefit from lessons learned abroad, particularly the UK's progress in connected care, virtual hospitals, and multidisciplinary coordination. The shared message across all meetings was clear: health systems succeed when they put people first and use data to empower, not replace, clinicians.

Future Health Summit

The Future Health Summit gathered global leaders to discuss healthcare transformation, digital integration, and system resilience. The sessions explored innovations in data analytics, virtual hospitals, and population health management. Presentations emphasised the shift from reactive to proactive care through AI-driven prediction models and connected data.

Speakers highlighted the importance of digital literacy across the workforce, the growing role of patient data ownership, and ethical frameworks to govern emerging technologies. The summit provided valuable context on how nations are balancing innovation with patient trust, particularly in emergency care and chronic disease management.

AI in Health Summit

This event brought together researchers, clinicians, and policymakers to discuss how AI can improve patient care and system performance. Key themes included responsible AI governance, reducing bias in data models, and the role of automation in clinical workflows.

The discussion emphasised that AI adoption must complement, not replace, clinicians, ensuring safe and accountable decision-making. Examples from the NHS demonstrated measurable improvements in diagnostic accuracy, resource allocation, and hospital efficiency. The summit reinforced the need for clear national frameworks, transparent data sharing, and training for clinicians to safely use AI tools in everyday practice.

London Ambulance Service

The meeting with the London Ambulance Service focused on how data-driven systems, virtual wards, and workforce empowerment can reduce emergency department pressure. London's ambulance model integrates AI-supported triage, allowing paramedics to make informed decisions before hospital arrival. The service's leadership stressed the importance of clinical oversight in emergency call-taking and the use of technology to improve response times.

Lessons included the need for flexible workforce models, advanced training for paramedics, and stronger data integration between ambulance and hospital systems. The session provided critical insight into building a more agile, responsive ambulance network for Victoria.

OneLondon Integrated Health Record

Discussions with OneLondon demonstrated how integrating patient records across hospitals, GPs, and community services creates safer and more efficient care. The project, based on the UK's Caldicott Principles, focuses on public trust, transparency, and secure data sharing.

Key takeaways included the need for strong governance, clear communication about data use, and public consultation in system design. OneLondon's success has relied on leadership collaboration, consistent data standards, and a patient-first approach. The model showed how connected health data enables proactive care and real-time system monitoring while protecting individual privacy.

UCL Partners

The meeting with UCL Partners focused on health system integration and how data-driven collaboration can improve patient outcomes. Discussions highlighted the importance of aligning primary, community, and hospital services through shared information systems. UCL Partners outlined their approach to evaluating service transformation and strengthening relationships between academic research and clinical delivery.

They emphasised the need for strong leadership and sustained investment to embed innovation, particularly in preventative health and digital care coordination. Key lessons included the value of real-time data for decision-making, community engagement to guide reform, and establishing clear accountability between health providers and government.

Imperial College – Institute of Global Health Innovation (IGHI)

The meeting with Imperial College IGHI explored strategies for modernising healthcare systems through evidence-based design and innovation. The conversation focused on digital connectivity,

patient flow management, and workforce sustainability. IGHI researchers shared their findings on how integrated data platforms improve patient safety and reduce administrative inefficiency.

They also discussed the role of transparent performance reporting and real-time data in improving hospital operations. Lessons from the NHS highlighted that technology alone cannot fix system strain without corresponding reform process and cultural change. The importance of empowering clinicians and embedding evaluation into every health innovation was also reinforced.

Faculty AI

The discussion with Faculty AI centered on how artificial intelligence can safely and effectively support healthcare delivery. Faculty demonstrated how AI models are already improving triage, hospital operations, and predictive analytics across UK health services.

They emphasised ethical AI governance, transparency, and the need for human oversight in clinical applications. Examples included early detection models for patient deterioration and hospital flow optimisation. The team underscored that AI adoption succeeds where training, trust, and consistent regulation are in place. The meeting provided insight into how health systems can use AI responsibly to enhance efficiency while maintaining public confidence.

Optum UK

The meeting with Optum UK explored the integration of AI and data to improve health system efficiency and patient care. Key discussions covered the use of linked data sets, neighborhood health hubs, and public-private partnerships.

The session examined how virtual wards and analytics tools are helping reduce pressure on emergency departments and improve care coordination across regions. Optum's success in primary care technology and data management offered valuable lessons for workforce optimisation and system reform.

The conversation emphasised collaboration, robust information governance, and evaluation of healthcare initiatives to ensure measurable improvement in patient outcomes.

Conclusion and Transferable Learnings

This study tour highlighted several key lessons directly relevant to Victoria's health context, especially for strengthening regional health capacity and ensuring that care is timely, coordinated, and person-centred.

Integration of Technology and Care Delivery

The UK's approach to interoperable health records, particularly the OneLondon model, demonstrated the value of connected data systems that span hospitals, general practices, and community services. A unified approach to digital infrastructure supports safer care by reducing duplication, improving communication between clinicians, and allowing earlier interventions. Real-time data sharing also enhances efficiency and patient experience by ensuring continuity of care across the health journey.

Workforce Empowerment and Reform

Flexible workforce models and advanced clinical training, such as those developed within the London Ambulance Service, show how empowering frontline professionals can significantly reduce system pressure. Expanded training for paramedics and multidisciplinary collaboration across virtual wards have improved response times and patient satisfaction. These examples highlight the benefits of giving regional health staff the skills and autonomy to deliver care closer to home, supported by digital connectivity and clinical oversight.

Ethical and Responsible AI Adoption

The summits and site visits underscored the importance of clear governance frameworks for artificial intelligence in health. Ethical use of data, algorithmic transparency, and clinical oversight were seen as essential to maintaining public confidence. The UK experience reinforced that technology should assist, not replace, clinicians, and that digital literacy programs must be built into workforce planning to ensure safe and responsible implementation.

Community-Centred Design and Public Trust

Public engagement is central to successful reform. Programs such as OneLondon and the collaborative models developed by UCL Partners showed that open communication about how data is used helps build trust and participation. Involving patients, carers, and clinicians in the design and rollout of digital health initiatives ensures systems meet real-world needs and reflect community expectations for privacy and fairness.

Data-Driven Decision Making and Performance Transparency

Institutions like Imperial College IGHI and Faculty AI have demonstrated that real-time analytics can transform system management. Access to timely, accurate data enables healthcare providers and policymakers to identify bottlenecks, track outcomes, and make evidence-based decisions. Embedding performance dashboards and shared data platforms within a health system supports more efficient use of resources and better accountability to patients and communities.

Travel Report

Travel Arrangements

Commercial Flights:Airline: Qantas

Depart: Melbourne – 26 September 2025

Return: Melbourne – 6 October 2025

Total Amount: $5,542.81

Additional travel costs in London = $72.58

Accommodation:

Royal College of Physicians – William Harvey House

Address: 9–10 St Andrew's Place, Regent Park, London, NW1 4LE, United Kingdom

Check-in: Saturday, 27 September 2025

Check-out: Sunday, 5 October 2025

Total amount: $4,407.25

Additional costs for meals in London total =$433.10

Travel to London from Melbourne ,Saturday 27 – 28 September 2025

Monday, 29 September – London

10:00 am – 11:30 am – Meeting with London Ambulance Service – 999/111 Integration and CAD Innovation

Location: 220 Waterloo Road, London SE1 8SD

1:30 pm – 2:30 pm – Meeting with Health & Social Care Committee

Location: Chair's Office, near Parliament

Tuesday, 30 September – London

All Day: Health Summit UK / 2nd Annual Future of Health Europe Summit

Location: Royal College of Physicians, London

Sessions:

9:05 am – 9:15 am: Presentation – Europe's Health Strategy in a Changing World

9:15 am – 9:55 am: Panel – Developing a Resilient, Sustainable Health Workforce

9:55 am – 10:35 am: Panel – Health Workforce Recruitment and Retention

11:50 am – 12:00 pm: Presentation – Delivering on the Ambition

12:00 pm – 12:30 pm: Panel – The Climate Crisis as a Health Crisis

12:40 pm – 12:50 pm: Fireside Chat – From Policy to Practice

12:50 pm – 2:20 pm: Lunch and Roundtable Discussion – Transforming Health Systems

Wednesday, 1 October – London

09:00 am – 6:00 pm – Attendance at AI Health Summit UK

Location: Royal College of Physicians, London, 11 St Andrews Pl, NW1 4LE

Thursday, 2 October – London

8:00 am – 9:00 am – Breakfast Briefing

9:00 am – 10:00 am – UCL Partners – AI-Driven Demand Prediction and Proactive Care

Location: Hale House, 76–78 Portland Place, W1B 1NT

11:00 am – 12:00 pm – Imperial College IGHI – Health Systems Session

Location: St Mary's Hospital, Praed Street, London W2 1NY

2:00 pm – 3:00 pm – Faculty AI Meeting

Location: 5th Floor, 160 Old Street, EC1V 9BW

Friday, 3 October – London

9:00 am – 10:00 am – Nuffield Trust Meeting

Location: 59 New Cavendish Street, London W1G 7LP

11:00 am – 12:00 pm – Alan Turing Institute Meeting

Location: King's Cross, London

12:30 pm – 1:30 pm – Lunch and Travel

1:30 pm – 2:30 pm – Optum UK – EMIS GP Integration with ED & Hospital Systems

3:00 pm – 4:00 pm – One London – Phil Koczan

4:00 pm – 5:00 pm – Leap Advisory & Intelligence – Konrad Dobschuetz

Sunday, 5 October – Travel Day back to Melbourne