

AHSPPO Journal

JULY 2026

The Association of Healthcare Supply
and Procurement Officers



AI IN HEALTHCARE
AND PROCUREMENT

The Great Australian Digital Health Paradox

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**AI supports
supply chains.**

**People support
healthcare.**



Technology helps.

Trusted partnerships make the difference.

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July 2026

//AHSP0

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Snapshots



Navigating the new procurement standards for aged care

Australian tendering for aged care contracts has shifted from a compliance-based framework to a rights-based and outcomes-focused model. This new approach is both practical and comprehensive, as it must provide tender responses that align with the specific outcomes defined in the seven standards. This will serve as a catalyst for better care for older Australians in aged care environments.

Snapshots

Australia product recalls dip despite late-year surge

In 2025, recalls decreased from 1288 to 1247. While overall recall activity eased in 2025, Australian regulators remain sharply focused on product safety and enforcement,” said Mark Buckingham, global director of recall solutions with Sedgwick. Business must remain agile as Australian regulators seem focused on aligning Australian standards with those from other countries



Qld's hospitals tackle the health of patients and the planet in emission reduction efforts

Did you know Queensland's public health system accounts for 50 per cent of the state's government's emissions? Taking action, public health services across Queensland are now adopting new sustainability measures and programs to reduce their contribution to climate change. All 16 of the state's public health services are implementing sustainability initiatives, which include improvements in procurement, design, recycling, and energy reduction.

Snapshots

MTPConnect announces 2026 Pathway to Market Medtech program cohort

MTPConnect has announced the seven Victorian medtech companies selected to participate in the 2026 Pathway to Market – Medtech Capability Uplift Program, an initiative designed to strengthen the readiness of Australian medical technology innovators to engage with local health procurement systems.



Record electric truck sales in March as historic 'price parity' with diesel achieved

Electric trucks had their strongest ever month of sales in March 2026, with 44 total sales. While this is a small portion, it represents that change is in the air.

Electric models are also available at the same up-front cost as their diesel equivalents and can help businesses save on ongoing costs through fuel savings. Diesel still continues to dominate our supply chain for now, but recent sales signal a market change and shifting priorities.

President's Report



Welcome to our second Journal of the year.

It's hard to believe how much has happened in 2026: New TGA medical device regulations have been introduced, the Digital Health Procurement Guidelines have been released, and the ongoing conflict between Iran and America has stretched supply chains worldwide.

In March 2026, new laws mandate that hospitals report any adverse events related to medical devices to the Therapeutic Goods Administration (TGA) within 45 days. Additionally, in March, the Digital Health Procurement Guidelines were released, which reclassify IT infrastructure as national infrastructure. This designation makes interoperability a requirement to ensure that clinical data can flow seamlessly between different healthcare systems. Australia is also addressing its vulnerability to international shocks by discussing the establishment of permanent supply chain coordination mechanisms that connect government, industry, and regulators.

And in more lighthearted news, I am pleased to share that I was honoured to represent AHSPO, and I was recently featured on the Space Between Podcast hosted by Karen Conway, who is a podcast host and well-known leader in the healthcare and supply chain industry.

The 2026 conference is just a few weeks away. This year's theme is "AI in Healthcare and Procurement," and throughout the event, we'll explore thought-provoking discussions on how we can leverage this technology to gain a competitive advantage and stay ahead.

I look forward to seeing you at this conference. Until then, as always, look after each other.



ALDO SANTO
President

AI – It's time to prepare.



AI hit me hard enough that I left a good role at a good organisation to work out what it actually changes in real businesses.

The ride so far has been a bit like learning to surf in a washing machine.



WORDS BY JP REBOLA

The central message from the AHSPPO community is that AI has moved from curiosity to daily practice faster than most organisations have moved from permission to control.

The opportunity is real, but it is not waiting politely for every policy, data model and workflow to be ready. This article is not a call to buy every AI tool in sight. It is a call to move deliberately. Understand where AI is already being used, put sensible boundaries around it, and prepare the data and process foundations for technology that is, in many ways, already here.

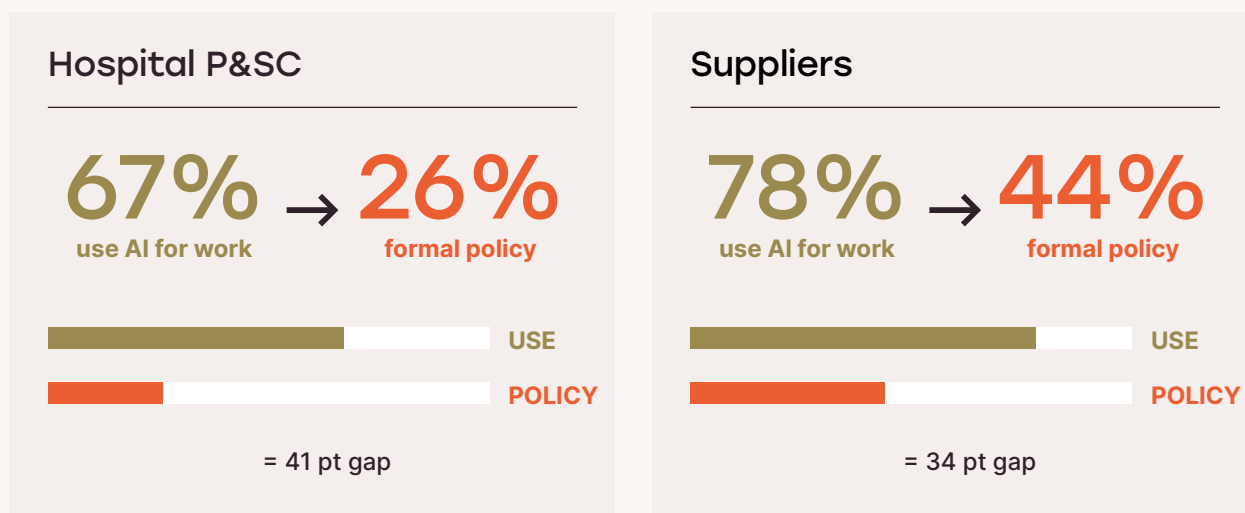
1. AI is already in the workflow

AHSPO member AI use is mostly happening at the individual level. It was reported 67% of hospital procurement and supply chain respondents and 78% of supplier respondents say they use AI for work. Formal policy is much further behind, at 26% for hospital teams and 44% for suppliers.

The use cases are practical rather than futuristic. They include drafting, summarising, tender support, catalogue search, invoice matching, contract review, spend reporting and supplier follow-up. In other words, AI is already sitting inside everyday procurement work. The operating model has not transformed yet, but the behaviour has started.

AI use has moved faster than policy

Work use is already mainstream. Formal policy coverage is still catching up.



Source: AHSPO Member Survey Response Date 2026.

Figure 1. AI use has outpaced formal policy coverage across surveyed AHSPo cohorts.

2. Close the interim control gap

The immediate risk is uncontrolled use. Staff may be entering live business information into personal accounts, relying on unverified answers or building workarounds that sit outside the organisation's systems.

That matters in hospital supply because procurement data is rarely just procurement data. It can touch pricing, contracts, supplier performance, substitution decisions, product information, clinical preference, inventory availability and patient-care workflows. Leaders do not need to panic, but they do need to make the invisible use visible.

The minimum control layer should now include the following:

- An approved enterprise AI environment for staff use, without reliance on personal accounts.

- Clear rules on what information can and cannot be entered into AI tools and no-training and data-retention settings so prompts and files are not used to train vendor models.
- Human review points for contracts, pricing, supplier decisions, substitutions and clinical product information.
- Secure API access and role-based permissions.
- Redaction or masking of sensitive information.
- Audit trails for higher-risk use cases.
- Named ownership across procurement, IT, cyber, legal, finance and clinical governance.
- Practical training on safe and unsafe use.
- A regular review cycle so early use cases can be tightened as the organisation learns.

3. Readiness before clever use cases

AI is only as useful as the data, context and instructions it can rely on. Without those, it produces activity rather than value. The readiness work is not glamorous, but it is the part that decides whether organisations get utility or noise. Plenty of organisations have learned this the hard way with IT Brief Australia reporting 74% of large Australian firms surveyed had switched off an AI

agent after governance and performance failures caused by unprepared data, the highest rate in the developed world.

When preparing, four foundations matter most. They are data architecture, governance architecture, process standardisation and change management. The real shift is not from people to chatbots, it is from isolated tasks to governed workflows. The skill is knowing what data the use case depends on, who reviews the output, where the decision is logged, and what happens if the answer is wrong.

Data architecture

means knowing the flow of item, supplier, contract, inventory, usage and spend data that AI will read. If the data is not clean, connected and trusted, the answers will be weak no matter how impressive the tool looks. This will usually be harder for hospitals than suppliers because frontline stock release, theatre usage and imprest activity can be patchy, complex and inconsistently captured.

Governance architecture

means deciding what AI is allowed to do, what data it can use, who is accountable, what gets logged and where human review is mandatory. This is not an IT-only conversation. Procurement, supply chain, cyber, finance, legal and clinical governance all need to be in the room.

Process standardisation

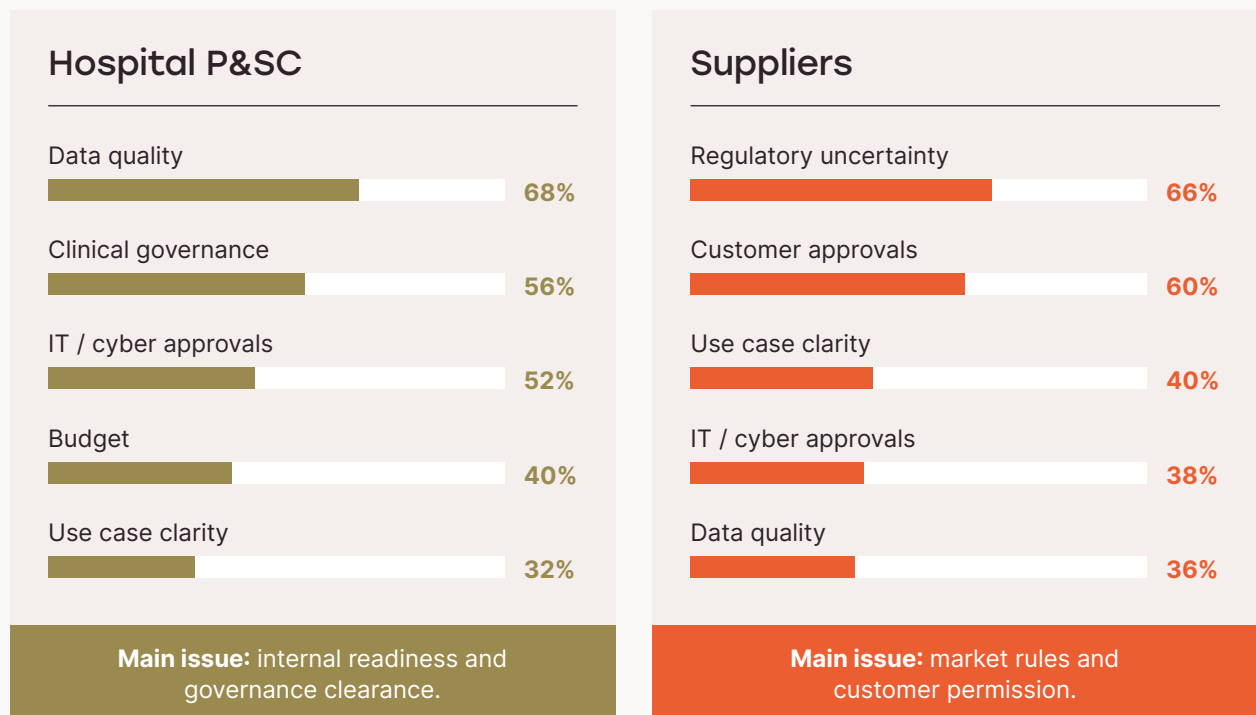
matters because AI cannot reliably support ten different versions of the same process across teams, sites and systems. Where one-way, same-way is appropriate, this is the moment to push for it. Shadow procurement and informal buying paths will become harder to defend if the organisation wants the benefits on offer. AI needs good plumbing to work, and supply leaders now have a very good business case to insist on it.

Change management

then has to move in three directions. Managing up means giving executives and boards a clear view of where AI is already being used, what value it can create, what it costs and what controls are needed. Managing across means aligning the relevant functions and suppliers around the same rules of engagement. Managing down means giving teams practical training, both on the AI itself and on new role responsibilities as roles change, approved tools and permission to use AI where it genuinely helps.

The blockers differ by cohort

Hospital teams point to readiness and governance clearance. Suppliers point to market rules and customer permission.



Source: AHSPO Member Survey Response Date 2026.

Figure 2. Surveyed blockers differ across hospital procurement and supply chain teams and suppliers.

4. Start where the benefit is visible and reviewable

The first benefits are not grand. They are cleaner invoices, fewer pricing errors, faster product search, better contract review, quicker tender work, clearer supplier follow-up, better spend reporting and earlier warnings when something starts to drift. That is the work teams spend too much time wrestling with now.

Healthcare examples point in the same direction. GHX reports that McLeod Health used Marketplace Bill Only to automate bill-only implant and consignment orders and achieved a 96% contract compliance rate and a 98.8% perfect order rate for under-contract orders.

GHX also positions implant order automation around digitised documentation, order and invoice processing, inventory visibility and analytics. System inventory capture is key so the health systems that have digitised preference cards and theatre inventory processes can be excited about what's coming.

For hospital procurement and supply teams, the order of attack should be practical. Start with work that is visible, bounded and reviewable. Prove value in the day-to-day admin that slows teams down now, then widen into forecasting, supplier risk scoring and utilisation control once data quality and process consistency are strong enough to support them.

5. Watch what the leaders are already doing

The benefits are already showing up in the procurement technology market. Hospitals should not copy Silicon Valley blindly, but it is worth watching what is happening there because enterprise software often shows where ways of working are heading next. What matters is not the product names. It is the pattern. Zip is pushing governed AI agents across intake, procurement, contracts and accounts payable, with permissions, audit trails, human approvals and action controls. Oro Labs is positioning procurement orchestration around workflows, supplier onboarding, risk and compliance agents. SAP is building AI-enhanced spend management into source-to-pay workflows through Joule and SAP Ariba. Levelpath is pushing AI into sourcing, contracts, supplier risk and invoice automation.

A Levelpath customer story from GATX is a useful comparison point outside healthcare. GATX reports 10x RFP capacity, \$3.5 million in contract savings surfaced through AI contract analysis, and bid analysis completed in 15 to 20 seconds. The lesson there is that AI value appears when contracts, suppliers, requests, approvals and decisions are brought into a governed workflow rather than left as disconnected files and emails. This is the shift procurement leaders should watch closely. The move is from copilots that help a user draft or summarise to agents that coordinate work inside a controlled process. Copilots assist. Agents route, check, chase, flag and sometimes act. That distinction matters because the second model depends much more heavily on data, permissions, process design and auditability.

My experience working with systems is that most serious platforms are pretty good at something. The hard part is knowing which one is right for your operating model, getting a sensible deal, understanding how it connects with the systems you already have, and making sure you do not become so married to it that leaving later becomes harder than staying. Do not let the demo do all the work. The commercial terms, data rights, implementation model, integration cost, support model and exit rights will matter long after the impressive screen recording has been forgotten.

6. Learn from high tech without copying it

The technology supply chain is a useful comparison because those organisations are usually early adopters and because the AI buildout has forced them to move. AI demand has placed pressure on chips, memory, servers, data centres, logistics and supplier capacity. In turn, high-tech supply chains are using AI-enabled forecasting, scenario planning, inventory optimisation, network design and supplier-capacity visibility to make decisions earlier.

Blue Yonder's supply chain material is a good example of the direction of travel. Real-time signals across partner networks, demand and supply planning, inventory optimisation, production planning, command centres, multi-tier orchestration and machine-speed decisioning are operational, not ideas for the future. Healthcare cannot copy the tech sector's tolerance for experimentation, but it can copy the discipline. Know the data, know the decision points, know the controls, and keep improving the operating model so the organisation is ready to go when leadership decides it is time.

Procurement leaders are about to be flooded with AI-enabled platforms, modules, agents and systems. Some will be useful. Some will be old workflow automation with better marketing. The job is to keep perspective, understand where each tool fits in the operating model, and remember that vendors are vendors. Their job is to sell the future. The leader's job is to decide what is actually needed, what integrates and what can be governed over time.



GATX reports 10x RFP capacity, \$3.5 million in contract savings surfaced through AI contract analysis, and bid analysis completed in 15 to 20 seconds.

7. Put AI into the management rhythm

AI should now be a standing management topic, not a once-a-year innovation update. Keep a live list of use cases. Mark what is allowed, what is being tested, what needs approval and what is out of bounds. Track the data each use case depends on. Review where people are using personal tools. Ask vendors what AI is already inside their products or processes.

Know your own readiness as well. If a clunky system, manual handoff, messy approval step or broken data field is going to stop AI from working safely, find that out now. Start the conversation while there is still time. Data lineage and enterprise architecture are not beneath senior leaders, they are part of prudent stewardship. The prize is a procurement function that can see more, move earlier and spend less time dragging information out of broken processes. That is enough to be worth taking seriously.

A big wave is coming. Paddle now and you have a chance to catch it.





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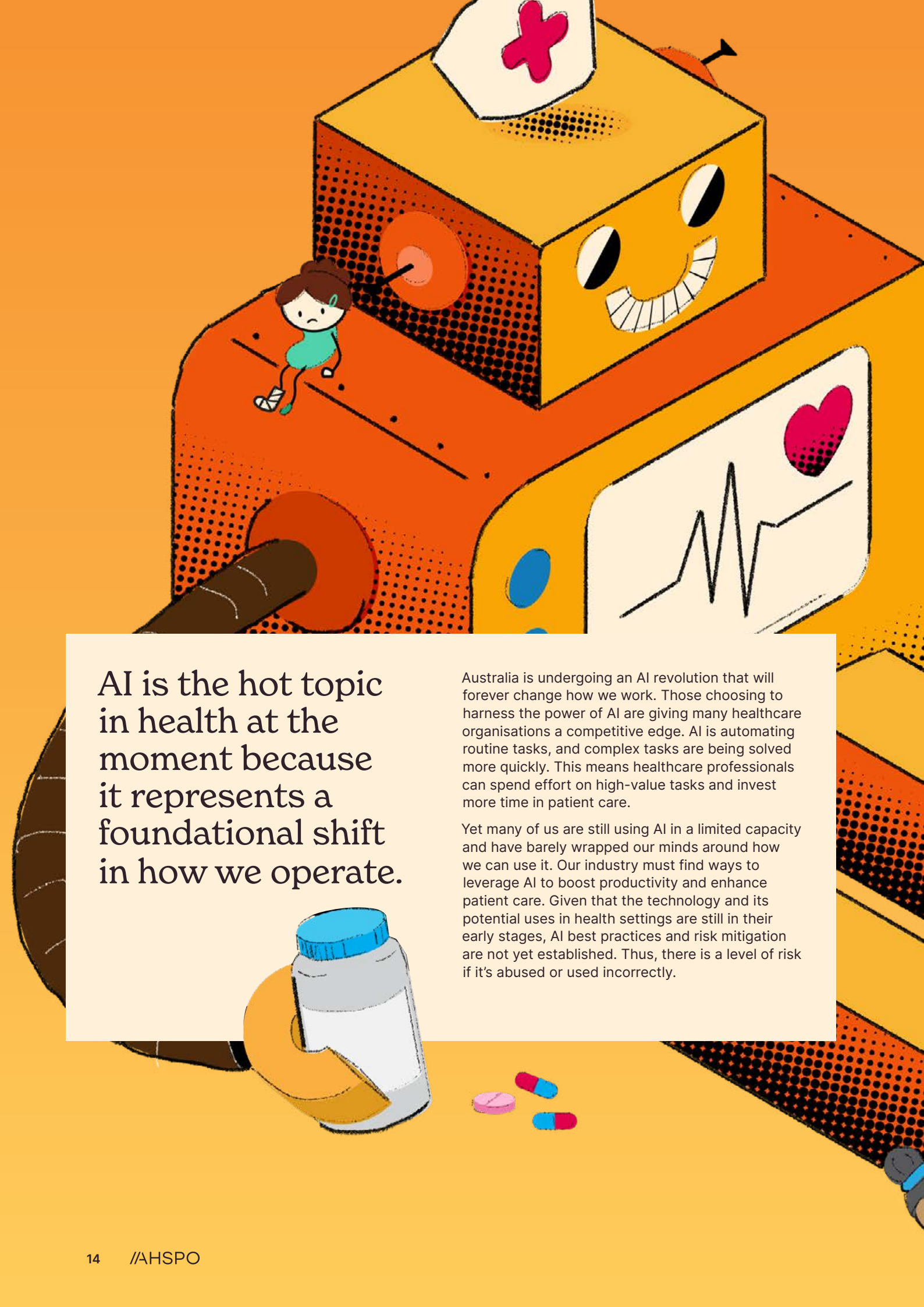
FEATURE ARTICLE

The Great Australian

Digital Health Paradox



Written by Staff Writer
Jaime Watts



AI is the hot topic in health at the moment because it represents a foundational shift in how we operate.

Australia is undergoing an AI revolution that will forever change how we work. Those choosing to harness the power of AI are giving many healthcare organisations a competitive edge. AI is automating routine tasks, and complex tasks are being solved more quickly. This means healthcare professionals can spend effort on high-value tasks and invest more time in patient care.

Yet many of us are still using AI in a limited capacity and have barely wrapped our minds around how we can use it. Our industry must find ways to leverage AI to boost productivity and enhance patient care. Given that the technology and its potential uses in health settings are still in their early stages, AI best practices and risk mitigation are not yet established. Thus, there is a level of risk if it's abused or used incorrectly.





While the rest of the world accelerates towards an AI-led future, Australia is in the infancy stages of AI development and implementation in healthcare settings. Countries like America and Asia are leading the way with experimental AI use and widespread adoption in healthcare and aged care settings. It's critical that we take the time to investigate which bottlenecks are preventing widespread adoption, or if it's even worthwhile.

This article will explore some of the headline ways AI is being trialled and some cases adopted in different health settings. Now, let's take a look at AI being used in the aged care sector.

AI in Aged Care

Australia's well-documented ageing population, a trend seen worldwide, means the aged care sector is booming. It means we need to continue building both physical and digital infrastructure to meet service demand.

Care is not always limited to physical care or capacity, but also to the wellbeing of our elderly. Loneliness has been a major problem experienced by aged care residents. Overseas robots and AI chatbots are being introduced to meet the social needs of aged care residents. Inspired by this uptake, Australian providers are introducing Abi and Daisy, in-home robots developed by the startup Andromeda. Abi and Daisy were designed to provide more frequent companionship while in their rooms. The robots are fluent in over 90 languages, recognise faces, remember past conversations, and participate in activities such as singing, dancing, and prayer.

Going beyond companionship, the Federal Government is actively exploring safe and effective ways to use AI to enhance elder care. The Department of Health Disability and Aging is evaluating the role of AI in its five-year plan, focusing on research into its application in aged care settings. The Department is currently reviewing research, safety protocols and ethical guidelines, with plans for limited pilot programs involving up to 20 health professionals to test systems in controlled environments before any broader rollout.

AI healthcare settings

In Australian healthcare settings, AI is being used to improve communication and note-taking, with some doctors opting for digital scribes, multilingual support tech, and assessment tools to aid clinical diagnosis.

These AI tools support the healthcare workforce by reducing the burden of administrative tasks, such as manually entering clinical notes, initial scanning and sorting of medical images, scheduling appointments, coding insurance claims, and responding to patient FAQs. When lower-value tasks get automated by AI, healthcare workers will have more time to spend with residents and patients.

Why are AI pilots being stalled in healthcare?

With so many benefits AI can offer in healthcare and aged care, let's look at why the Australian healthcare industry remains hesitant to adopt this technology. While there are many benefits to unlock in the health sector, given its infancy, there are also many blockers to rapid change, for better or worse.

We are seeing many healthcare companies, providers, manufacturers and government providers are keen to adopt AI, but many get stuck in the pilot stage. A recent study conducted by Appian surveyed 500 healthcare professionals: 60% of organisations were running small AI pilots, yet only 12% reported full deployment across multiple care or admin functions. The study highlights how fragmented data and disconnected systems made it difficult for AI to take hold.

As a consequence, we are seeing a slow uptake of AI, and infrastructure is harder to establish and scale across the whole organisation. Appian also reports that 72% of healthcare workers regularly work with incomplete or inaccessible data, while 74% spend at least 1 day per week on manual administrative tasks.

Healthcare data often gets trapped in silos, leaving healthcare workers stuck navigating fragmented systems. This creates a disconnect between the seamless experience patients have come to expect in the digital age, and the reality of the disjointed systems staff encounter daily. Every hour spent on admin takes time away from patient care.

Overall, companies are willing to purchase AI tools but lack the time to integrate them. Addressing backend issues with AI could be key to alleviating the industry's capacity strain and removing low-value work, both of which pose a high operational risk to health services.

Beyond fragmented systems, gaps in regulation and a lack of formal policy are slowing its uptake.





The AI regulation gap

AI has diverse applications, but the technology is still relatively new. Legal and regulatory frameworks are not robust enough to always protect users. Experts in this area, such as Alex Ruani, a doctoral researcher in health misinformation at University College London, are concerned about the dangers of this emerging tech.

This year alone, we have seen the launch of ChatGPT Health in Australia, which is worrying many experts. Dr Ruani believes that ChatGPT Health is a transformative interface that can help people make sense of health information and test results, or receive dietary advice. But not a replacement for clinical advice. His primary concern is the risk of users being exposed to misinformation, as well as the potential for the AI to omit critical details such as side effects, contraindications, allergy warnings, and risks associated with specific supplements, foods, or diets.

“There had been too many horrifying examples of ChatGPT leaving out key safety details like side effects, contraindications, allergy warnings, or risks around supplements, foods, diets, or certain practices”.

ChatGPT is not a regulated model or regulated to give appropriate medical advice. There are no mandatory safety controls, no risk reporting requirements, no post-market surveillance, and no obligation to publish testing data.

As a result, users may be misled into data sources containing misinformation or improper practices unrelated to their health conditions. Misinformation can directly put users at risk of further harm by causing stress and endangering them. At the same time, a clinician has the appropriate tools and knowledge to help patients.

A tale of two conditions and applications

As an industry, we are aware that the ways AI can mislead people about their health have fostered a certain wariness towards the technology. However, it has not halted curiosity about its potential applications.

A 2025 study, “Unravelling Public Preferences for the Use of Artificial Intelligence Mobile Health Applications in Australia”, examined public perceptions of AI diagnostics and virtual health assistants in relation to heart disease and depression. Over 1,100 Australians participated in a multiple-choice survey that evaluated five key characteristics: anonymised data sharing, human-AI interaction, AI accuracy, explanations of results, and funding sources.

The survey results revealed that AI accuracy was most important to participants, followed by collaboration between human doctors and AI, rather than AI working alone. People preferred not to share anonymised data for depression, whilst no such preference emerged for heart disease. Explanations of AI results and funding sources were generally less influential in decision-making.

Important differences emerged across groups: those who reported fearing AI were less likely to choose AI diagnostics or virtual health assistants for heart disease. Older adults (60+) showed lower acceptance of AI for both conditions, whilst younger adults (18-29) were more inclined to use virtual health assistants for heart disease.

This research is very timely, with the federal government recently publishing the ‘Safe and Responsible Artificial Intelligence in Health Care Guideline’. Additionally, the Therapeutic Goods Administration has issued regulations for medical device software, including AI applications. Understanding user preferences for AI is crucial to ensuring that future AI technologies are implemented safely and fit for purpose.

Digital health systems are changing whether we like it or not.

Our government and related bodies are incrementally rolling out AI into our health systems.

CSIRO’s Australian e-Health Research Centre (AEHRC), with its scientists and engineers, has been working for over 20 years to make healthcare smarter and faster.

AI and digitisation are already present in your doctor’s office. Digital technology, such as ambient scribes, is now commonplace at GP offices and in health system platforms like My Health Record. Furthermore, the AEHRC has developed a new cardiovascular risk calculator that integrates directly with doctors’ software to pull relevant data and record the results. The AEHRC is also trialling a digital care model with Queensland Health hospitals, replacing paper diaries with digital tools.

These advancements are already happening and show we can optimise our healthcare system with technology if we take the time to work on it.



The AI Future

AI has immense potential to extend beyond clinical settings, making healthcare more efficient and improving the wellbeing of patients and workers across the system. However, to make it work, we need to ensure careful consultation across the industry and robust regulations to keep patients and workers safe.

One of the biggest dangers of AI isn't even misinformation; it's the human element of care being diminished. Human care will always be at the centre of healthcare, and one thing... machines cannot automate, replicate, or generate tender loving care.



AI is the topic of this year's conference, and it's something we need to discuss as an industry.

The AHSPO Conference provides us all with a great opportunity to discuss this. We look forward to having these discussions together.

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6 THINGS NOT TO MISS AT CONFERENCE 2026

WORDS BY JAIME WATTS



THE 36TH ANNUAL AHSPO CONFERENCE IS FAST APPROACHING. WHETHER YOU'RE AN EXPERIENCED DELEGATE OR IT'S YOUR FIRST TIME ATTENDING, HERE ARE THE TOP SIX HIGHLIGHTS TO LOOK FORWARD TO.

1. A very timely theme

AI is at the centre of many discussions about its potential dangers and the opportunities it offers across industries and professions. This year's conference theme will explore how companies are leveraging AI, how supply and procurement are changing, and why the human touch is still critical. Look out for AHSPO favourite, Tracy Duffey, returning to speak on the Artificial Intelligence Regulatory Roadmap. Tracy's presentation last year was very well received, and we look forward to learning more of her insights. Don't miss Tracy's presentation on Day Two, Session 3, from 11:00 am to 11:45 am.

2. Transforming with Mark Cameron

This year, one of our featured keynote speakers is Mark Cameron. A prominent AI strategy and technology transformation expert, Mark brings us 25 years of experience in strategic planning, theoretical development, and hands-on product innovation. Mark will guide us into the new world of AI and how we can incorporate it into our own lives and work. You can attend Mark's presentation on Day 2, Session Two, from 9:00 AM to 10:00 AM.

3. CPA members join our pre-conference catch-up

The CPA group continues to go from strength to strength and plays a crucial role in shaping and collaborating with AHSPO. If you're in a CPA role, then make sure you join this session on day one, before the conference officially opens. This session will include dedicated time with suppliers prior to the trade show opening.

4. Its time to put on your superman cape

Get ready to enter a top-secret alternate universe with all your favourite fictional characters. Welcome to this

year's gala theme, "Heroes vs Villains." An epic clash is taking place at this year's gala. Are you the dashing hero who saves the day, or do you prefer a bit of chaos? Pick a side or fight alone. Join us for a night of adventure and celebration. Come dressed up as a hero or villain from your favourite TV show, movie, comic, book or game character. Even if you're the villain, it's truly a heroic act to attend this year's gala because you're supporting Lazarus Community Centre, Geelong.

5. New and improved exhibition space

Our exhibition space is back and better than ever. After a successful debut of our expanded space last year, we've taken your feedback and enhanced the experience with an even more immersive layout in the marquee. This will enable even better connections and networking for both exhibitors and delegates

6. Celebrating our 70th anniversary

In 2026, AHSPO will celebrate its 70th anniversary. In May, we held a milestone dinner to mark this occasion, and we look forward to sharing this moment with all our members during the conference.

SEE YOU AT THE 2026 CONFERENCE →

This is just a taste of what we're looking forward to at this year's conference. We're looking forward to coming together as an AHSPO family, as once again we have the opportunity to reconnect and learn from each other. We hope you gain lots of value and enjoy the event. See you in Lorne.



//AHSPO

36th Annual Conference
19 – 21 August 2026 **Mantra Lorne**

AI IN HEALTHCARE + PROCUREMENT

**CONFERENCE
PROGRAMME**

WELCOME TO CONFERENCE 2026

It's always a great pleasure to gather again for the latest instalment of the AHSPO Conference.

This year's event is more timely than ever before. We now stand on the precipice of the foundational shift in how we work and operate. Australia is undergoing an AI revolution that will forever change the professional landscape. Those choosing to harness the power of AI are already gaining a competitive edge. Many healthcare professionals using AI are spending less time on lower-value tasks and more time on patient care.

While this technology is exciting, it's still in its infancy and poses potential risks, especially since best practices and risk mitigation strategies are not yet fully developed. There is no denying that AI will unleash massive change and influence how we do our jobs. But we must remember that AI can never replace the human element of care in healthcare.

This year's conference will deep dive into how companies use AI and explore trends shaping our profession. You will learn how to prepare yourself to take advantage of everything AI technology brings, and have some fun while you are at it.

I hope you enjoy this year's event.

ALDO



DAY 1

WEDNESDAY 19TH AUGUST

CLINICAL PRODUCTS ADVISORS (CPA) SESSION

10:00am – 12:00pm	Clinical Product Advisors (CPA) meeting in the Heritage Room
12:00pm – 2:00pm	Lunch CPA Session with invited guests (suppliers)
2:00pm – 4:00pm	CPA in the Trade Area (with afternoon tea)

SESSION ONE

01

2:00pm – 5:30pm **Delegate and Corporate Registration**
With Gala Dinner Tickets available with donation

5:45pm – 6:15pm **Welcome Reception**
President of AHSPO, Aldo Santo and
Neville Daffy, Procurement Coordinator
Great Ocean Road Coast and Parks Authority

6:15pm – 9:00pm **Reception & Sponsor Trade Area Opens**
Proudly supported by our Diamond Sponsor Aidacare

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9:00pm **Close of Exhibition and Day 1 program**

We acknowledge the support provided by our
Gold Sponsor Kimberly-Clark Professional



WELCOME TO MANTRA LORNE

Lorne is a lovely coastal town along the Great Ocean Road, known for its friendly community, delicious local dishes, and warm culture. Here, you'll find some of Victoria's freshest seafood and the best local produce. Between conference sessions, explore the area, from cozy beachside cafes to charming boutique shops. Lorne embodies community spirit and good local hospitality.

With the stunning natural beauty of the Great Otway National Park and the breathtaking coastline of the Great Ocean Road, you can soak in the fresh ocean air.

Lorne is the perfect spot to relax and connect with your peers at this year's AHSP0 Conference.

We can't wait to see you there!



02

KEYNOTE SPEAKER

Fairmont
MEDICAL

Mark Cameron stands at the forefront of AI strategy, helping organisations harness AI's transformative power while maintaining human-centred innovation.

Mark is dedicated to helping businesses learn to leverage AI to reach their full potential. He has spent over 27 years of experience in strategic planning, theoretical development, and hands-on product innovation. As the CEO and Director of Ayve, he has guided the technology strategy of an adversary firm for over two decades.

Over the years, Mark has become widely recognised for his work in AI strategy and technology transformation. He frequently writes for publications like Forbes and teaches a course on Digital and AI Transformation in the Deakin Executive MBA program.

Mark's presentation is proudly supported by Fairmont Medical Products Pty Ltd.

MARK CAMERON



DAY 2

THURSDAY 20TH AUGUST

SESSION ONE

6:00am – 8:30am **Breakfast in the dining room for all in-house guests**

8:30am – 8:50am **Opening Address**

President of AHSPO, Aldo Santo
Introducing MC Emily Rice.

Proudly Supported by Convatec



8:50am – 9:00am **Platinum Sponsor Address**

Short address by our
Platinum Sponsor, Coregas



03

SESSION TWO

9:00am – 10:00am **Keynote Speaker
Mark Cameron**

Mark Cameron, a prominent figure in AI strategy and technology transformation, brings over 27 years of experience in strategic planning, theoretical development, and hands-on product innovation.



Proudly supported by Fairmont Medical Products Pty Ltd

Followed by Suppliers Magic Minutes

10:10am – 10:55am **Break out – Morning Tea**
Proudly Supported by Evaris Pharma



We acknowledge the support provided by our
Silver Sponsor GAMA Healthcare



AI in Healthcare + Procurement

SESSION THREE

11:00am – 11:45am

Artificial Intelligence – Regulatory Roadmap

**Tracey Duffy – First Assistant Secretary
Department of Health and Aged Care**

An update on the TGA's work relating to AI including digital mental health tools, clinical decision support systems, consumer, health professional and developer research and emerging trends.

11:45am – 12:30pm

**Dean Whiting
CEO at Pathology Technology Australia**

Global management professional with deep knowledge of and experience in the B2B Healthcare Sector. 21 years of proven Marketing, Sales and Technical leadership, growing business at above market rates. Visionary leader, developing people, solving problems and managing change to grow business.

Followed by Suppliers' Magic Minutes

12:30pm – 1:40pm

Lunch Break

Proudly Supported by Ultra Health Medical



04

MEET OUR MC



Emily Rice is a renowned broadcast journalist, presenter, and communications specialist.

She has over 27 years of experience in news, corporate events, media, and communications and has worked worldwide.

Emily has always been such a warm and friendly presence, and the perfect person to host the AHSPO Conference. We're honoured to have Emily M.C. at her sixth AHSPO conference.

Emily's appearance is proudly supported by Convatec.

EMILY RICE



SESSION FOUR

1:40pm – 2:10pm	AI in Procurement: Tools, Threats or Turning Point? James Piplios Transformational Leadership Strategic Design Procurement Marketing Sales Commercial Excellence Supply Chain	
2:10pm – 3:00pm	The NHS Supply Chain Landscape and Global Collaboration Thomas Crouch – Senior Procurement Manager NHS London Commercial Hub Followed by NHS Supply Chain Success Dave Lightening – Director of Warehouse & Logistics UHB Acute NHS Trusts	
3:00pm – 3:40pm	Break out – Afternoon Tea Proudly Supported by ECOLAB	
3:40pm – 4:15pm	Keynote Speaker Greg Champion Part humourist, part folkie, half hippy, half bogan, part Victorian and completely South Australian. A prominent radio personality and corporate and community entertainer.	
4:15pm – 4:30pm	Annual General Meeting - Heritage Room. All welcome to attend	
6:30pm – 7:00pm	Pre Gala Drinks – In the front of the Gala Hall Proudly supported by BOC	 A Linde company
7:30pm – Late	Thursday Night Gala – Conference Dinner in the Gala Hall “Heroes and Villains” Featuring The Baker Boys Band. Proudly supported by our Platinum Sponsor, Coregas.	

05

Proudly supported by



GALA DINNER

HEROES AND VILLAINS

06

Welcome to this year's gala theme, "Heroes and Villains"

Get ready to enter a top-secret alternate universe with all your favourite fictional characters. Welcome to this year's gala theme, "Heroes and Villains." An epic clash is taking place at this year's gala. Are you the dashing hero who saves the day, are you the villain who prefers a bit of chaos? Pick a side or fight alone.

Join us for a night of adventure and celebration. Come dressed up as a hero or villain from your favourite TV show, movie, comic, book or game character. Even if you're the villain, it's truly a heroic act to attend this year's gala because you're supporting the Lazarus Community Centre, Geelong.

**JOIN US FOR A NIGHT OF
OPULENCE AND CELEBRATION.**





DAY 3

FRIDAY 21ST AUGUST

SESSION ONE

6:00am – 8:50am

Breakfast in the dining room for all in-house guests

9:00am – 9:20am

Local Charity Speaker - Lazarus Community Centre Geelong

Lazarus Community Centre Geelong offers sanctuary and support to those facing homelessness and social isolation in the heart of Geelong.

9:20am – 9:50am

Jaun Paul Rebola (JP)
Commercial, Strategy and Execution, Procurement

With over 15 years of experience working at top tier firms and organisations across Australia and SE-Asia, JP has extensive strategic, operational and commercial experience underpinned by formal legal and financial credentials and is the author of the AHSP0 Insight Series.

9:50am – 10:30am

Michel Hulzebos
Director, Industry Development Healthcare

Margo Fraser
Senior Adviser, Healthcare, GS1 Australia

Followed by Suppliers Magic Minutes

10:40am – 11:00am

Break out – Morning Tea
Proudly Supported by O&M Halyard



THIS YEAR'S SUPPORTED CHARITY IS THE LAZARUS COMMUNITY CENTRE GEELONG

We are raising funds to help them deliver support and programs for the Geelong community. Donations will be accepted via EFTPOS at registration on Day One and during the gala evening.



SESSION TWO

11:00am – 12:00pm

Closing Keynote Speaker – Joel Selwood QA

Joel Selwood is one of Australian football's most respected leaders and a true embodiment of resilience and integrity. Over a 16-year AFL career with the Geelong Cats, he became renowned for his courage, professionalism, and selfless leadership.

Proudly supported by
A.R. Medicom (Australia) Pty Limited



12:00pm – 12:20pm

Closing Address

President of AHSPO, Aldo Santo

12:20pm – 1:00pm

Lunch "On the Go"

Proudly supported Winc Australia



If you need a packed lunch, please ensure you book it at the Conference Registration on Wednesday

09

KEYNOTE SPEAKER



Joel Selwood is one of Australian football's most respected leaders and a true embodiment of resilience and integrity.

Geelong skipper and fan favourite Joel Selwood is one of the most courageous players in the game. He is a six-time All-Australian and a three-time captain of the All-Australian team. He has steadily built one of the most impressive resumes in AFL history and is recognised as a key contributor to the remarkable culture of success at the Geelong Football Club. He is also one of the longest-serving captains in AFL history.

Off the field, Joel has built a reputation as a humble and inspiring role model for athletes, businesses and everyday Australians. Joel draws on his experiences from elite sport to share lessons on resilience, teamwork, and values-based leadership, offering audiences practical insights into what it takes to sustain success and inspire those around you.

Joel's presentation is proudly supported by
A.R. Medicom (Australia) Pty Limited

JOEL SELWOOD



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AHSPO Committee Interview

Committees come in all shapes and sizes, and levels of bureaucracy. To most of us, what they actually do is a complete mystery. From government bodies that have mastered the art of doing nothing to local groups with great intentions but struggling to gain traction, committees a mixed record of success.

However, there are always exceptions to the rule — the AHSPO Committee. A genuine committee dedicated to real impact and helping all of our members make the most of their membership.



We sat down with Committee Members, Victoria Curnow and Elizabeth Graco, for an inside look at making magic happen at AHSPO.



Meet Victoria and Elizabeth.

Victoria works at Bendigo Health as a Contract Manager. Day-to-day, she is kept busy interacting with clinical teams, purchasing medical equipment, including tendering, evaluation, contract negotiation, and final contract execution. The diversity of her job and supporting equitable access to high-quality equipment for both large and small health services are what motivate Victoria and inspire her to join AHSPO.

Elizabeth works alongside Victoria at Bendigo Health, serving as an experienced Clinical Product Adviser (CPA). Liz was a pioneer of the CPA role, helping to define it as you see it across many health services today. A clinically trained nurse Liz, describes the CPA role as a crucial link and interpreter between nonclinical and clinical staff, a perspective that is necessary for AHSPO.

Tell us about your AHSPo Experience – when and why you joined?

Victoria: I'm a newbie to the AHSPo Committee. I wanted to join after attending the 2022 conference. I love being part of a team and really wanted to make a difference in AHSPo's future.

Elizabeth: While I've only recently been part of the committee, I'm certainly no stranger to AHSPo, having attended the annual conference for the past 16 years. I became curious when I saw how hard everyone was working, and I wanted to pitch in.

What is your specific role on the committee, and what does it involve?

Victoria: My role on the committee is the Membership Officer. I welcome new members and help manage AHSPo memberships.

Elizabeth: I'm the CPA Officer. I represent my clinical peers and help voice their concerns to the committee and AHSPo.



"To keep AHSPo going, we really need people who are passionate about stepping up and keeping things running.

At the end of the day, the conference just wouldn't happen without them."

What do you most enjoy about being part of AHSPo and the committee?

Victoria: I really enjoy the social aspect and the opportunity to meet new people. Also, I like how I can have a direct input into how AHSPo and the conference are run. If you want to see change in AHSPo, bring your seat to the table and have your say. We always welcome new faces, and it's always cool to hear new perspectives and ideas.

Elizabeth: I really enjoy the connections we get to make. We actually get to spend some quality time with the suppliers, helping set up their booths before the conference. I really enjoy giving them advice and helping them navigate through the conference.

What are some benefits of joining the AHSPo committee?

Victoria: I love that I finally get to put faces to so many of the names I've only ever heard of while working in health. It's very easy to get siloed in your own corner in health, and AHSPo gives me the chance to build relationships across the field. It means that in scenarios where we do work together, it's less awkward and a far more positive experience.

Elizabeth: AHSPo has always been known as a super-friendly environment where everyone mingles and feels totally at home, no matter their role. That atmosphere definitely comes across in the committee, where it feels like a little family.

How has being on the committee helped you grow your professional network or friendships?

Victoria: Being part of the committee has helped me realise just how many different roles there are in our sector. I get to chat with so many people and learn so much about supply chain processes and what's happening out there. Keeping up with the industry helps me stay sharp, and I can bring that knowledge into my own role.

Elizabeth: My involvement with AHSPo has helped raise awareness of the CPA role and given the profession a presence and voice that were previously lacking. I am really thankful for how AHSPo has contributed to the profession's recognition. We don't have a formal union or organisation behind us, so this work with AHSPo is really special.

What are the opportunities for the future of the committee?

Victoria: To keep AHSPo going, we really need people who are passionate about stepping up and keeping things running. At the end of the day, the conference just wouldn't happen without them. Right now, we're working hard to keep the format fresh and exciting, while making sure it stays affordable for everyone to attend.

Elizabeth: I think we should definitely try to expand AHSPo Membership to cover a wider range of professions. It would be great to get more of a clinical perspective in there, with input from doctors and scientists.

Liz, what is the role of the CPA committee Member?

Elizabeth: My role is to help others understand the significance of a CPA's work and to give a voice to my peers. I meet with a group of CPAs monthly to discuss issues and catch up. Then, I raise our concerns at the AHSPo committee meetings. I view CPA as almost serving as a bridge between companies and healthcare institutions.

What advice would you give to a new AHSPo Member?

Victoria: Come into the conference with an open mind and just be prepared – it's different from any other conference you've attended. Honestly, it's a lot of fun! You get to meet so many amazing people, participate in this brilliant community, and build connections you may never have had before.

Elizabeth: Take the time and opportunity to meet new people and build your network. AHSPo serves as a major meeting and communication point for healthcare professionals and suppliers alike. Make the most of it: talk to your peers and use those conversations or connections in your own work.



Become a member of the AHSPo Committee

Joining the AHSPo committee is a rewarding way to give back to our community and grow your professional network and directly influence the future of your Association.

If you are interested in joining the committee or would like to learn more about how you can contribute, please contact us.



//AHSPO

36th Annual Conference

CONFERENCE 2026

AI IN HEALTHCARE + PROCUREMENT

19 – 21 August
Mantra Lorne

TICKETS SELLING FAST

Visit <https://tinyurl.com/4x7tb3mj>
Password: AHSPO2026

Social Pages

Conference Flashbacks



Here are some of our favourite shots from the history of the AHSPO Conferences. We can't wait to add more to our faves this year too!







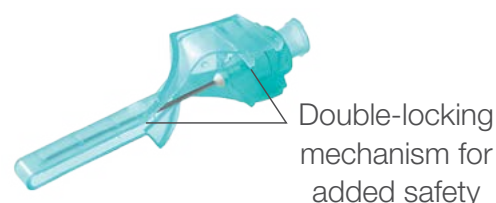
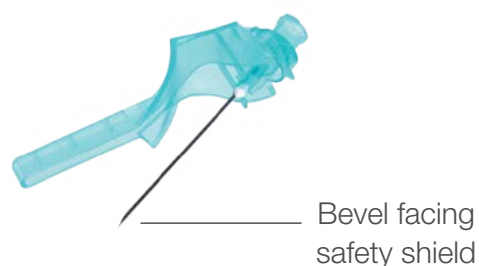


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SCAN TO CONTACT US

Secret Wine Business



Thomas and Peter get bowled over
by Ricky's Syrah.



WORDS BY THOMAS CROUCH AND PETER LACK

As you know, I always say, “the only thing better than drinking the wines, is to be able to talk to someone about them”, well it was wonderful to receive the following feedback from Thomas Crouch.

As part of the AHSPPO team, invited to attend the HCSA's Annual Conference in November 2025, we took a couple of bottles of the ‘127’ Ponting Syrah as a gift for Thomas and David Williams.

The following is Thomas's feedback.

Ricky Ponting Wines ‘127’ Syrah 2022

Against the backdrop of the friendly Pavlova rivalry between Australia and New Zealand, my own bias – having lived in Auckland for three years – tends to lean toward the bold, pepper-driven Syrahs of Waiheke Island – a short ferry ride east of the City of Sails, beneath the watchful presence of

Rangitoto Volcano. That context, coupled with the considerable air miles the bottle had collected after being generously flown to the UK by AHSPPO when they attended the HCSA Annual Conference 2025, made this wine an especially intriguing prospect.

The Ricky Ponting Wines 127 Syrah 2022 immediately captured my attention upon opening. Aromatically, it presents clean, vibrant berry fruit underpinned by a savoury edge. Once decanted, the wine reveals a striking ruby core that clings to the glass, hinting at both concentration and depth.

On the nose, the varietal signature is clear and expected: cracked black pepper, dark fruits, and a subtle flicker of spice. The first sip delivers complexity but with a sharper edge than anticipated, suggesting the wine benefits from time and air. As it breathes and opens, the structure relaxes, and the components knit together beautifully.



What stood out most – particularly when viewed through the lens of Tasman Syrah comparisons – was the tannin profile. The texture brings a noticeable bite, adding grip and dimension, though it sits slightly higher than what I'd consider ideal for achieving the classic smooth, silky, and clean Syrah mouthfeel. That said, the palate delivers generously, with bold redcurrant, blackberry, and a hint of cocoa providing depth and interest.

In the glass, this is a thoroughly engaging wine – one that comes tantalisingly close to exemplifying the ideal Syrah structure, in my mind. It competes confidently for attention alongside some of my current favourites from Man O' War, Casita Miro, and Te Motu.

As a Brit reviewing an Australian wine – and someone who admittedly knows nothing about cricket – there may be an added layer of irony here. Nonetheless, credit where it's due: well played, Ricky.

Tasting notes

Dive into a rich and expressive Shiraz, renowned for its deep crimson hues and captivating aromas of dark plum, blackberry, and spicy black pepper.

The Ponting Milestone '127' Barossa Shiraz 2022 boasts a complex and rich flavour profile. Expect bold notes of dark berries, plum, and black cherry,

complemented by hints of chocolate, vanilla, and spice. The palate is full-bodied with velvety tannins and a long, satisfying finish, making it a wonderful example of Barossa Valley Shiraz.

Accompany

Best food pairings for this robust Shiraz are a variety of hearty dishes. Enjoy it alongside grilled steaks, lamb chops, or a rich beef stew. It also complements mature cheeses and charcuterie, making it a versatile choice for both casual dinners and celebratory occasions.



AVAILABILITY

Purchase online via Ponting's Wines www.pontingwines.com.au, and it is also available from various good wine suppliers.

COST

Expect to pay around \$40 — \$45 per bottle.

Who Am I?

Can you guess the identity of this respected doctor,
or will you skip directly to the hidden answer?

I was born in Glasgow in 1953. My parents were both medical scientists, which inspired my passion for science as a young boy.

In university, I chose to pursue medicine over my earlier interest in physics because physics offered fewer research opportunities. I received my Bachelor of Science, Bachelor of Medicine, and Bachelor of Surgery from the University of Edinburgh in 1974, 1977, and 1977.

In 1980, I immigrated to Melbourne after being recruited by Dr Ian Mackay at the Walter and Eliza Hall Institute of Medical Research to conduct research in viral immunology. In the early 1980s, I focused on medical research on the Hepatitis B virus at the Walter and Eliza Hall Institute in Melbourne.

I transferred to the Princess Alexandra Hospital near downtown Brisbane in 1985 to study HPV. I was among the first scientists to study the link between HPV infections and cervical cancer, one of the most common cancers in women.

In 1991, I collaborated with Jian Zhou to create virus-like particles that stimulate an immune response against HPV. This work laid the foundation for the vaccine, which we developed as Gardasil. By October 2005, we had conducted clinical trials demonstrating that the vaccine was highly effective in protecting women against the two HPV strains.

Who Am I?

CHECK THE ANSWER HIDDEN ON THE CONTENTS PAGE.



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Our system allows you to order products and manage inventory through **custom made eStore portals**, tailor-made for your company using its **corporate branding**, showcasing products with all necessary information and prices.

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FSG operates a **full in-house graphic design studio**. Our experienced graphic design team understands the importance of brand recognition and consistency in communications. We work with you in finding **creative strategies** that allow you to stand out from your marketplace and effectively communicate your message.

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