

NEHTA Blueprint FAQs

Q: What is the NEHTA Blueprint?

A: The NEHTA Blueprint is a reference document intended to familiarise readers with major e-health capabilities the NEHTA is promoting for national adoption.

It includes a range of capabilities including identifiers for individuals, providers and organisations, authentication, secure messaging, clinical terminologies, supply chain, pathology requests and reports, diagnostic imaging requests and reports, medication management, referrals and discharge summaries.

Q: What will readers find in the Blueprint?

A: The Blueprint brings together and summarises the key design documents from across the NEHTA work program into a single document. The Blueprint is a living document and will be periodically updated as the NEHTA work program evolves.

This document focuses mainly on e-health capabilities that are part of the current NEHTA work program. Where future potential capabilities have been identified they are discussed in brief as part of the longer-term e-health roadmap.

Q: Who should read the Blueprint?

A: This document is intended for an audience that is actively working in the e-health area within Australia. It is designed to be a reference document used to promote understanding of all elements making up the current NEHTA e-health work program, and provide guidance to more detailed documentation. Potential readers include executives, policy officers, clinicians, reference group members and technical staff.

Q: What should I read first?

A: The Blueprint is a large document and it is anticipated that few readers will read it in full. Instead it is expected that the majority of readers will treat this document as a reference document and refer to various sections of the document when needed.

If you are short on time, please read chapters 1 and 2.

If you have more time, one approach to reading this document could be to read Chapters 1 and 2 to help consolidate your understanding of the bigger picture. Then read selected sections out of the foundations, solutions and future capability chapters (Chapters 3, 4 and 5) based on specific areas of interest.

A more technical reader may be interested in Chapter 6 on Architecture. A reader interested in change adoption may choose to read Chapters 7 and 8.

Q: What is the relationship between the Blueprint and the National E-Health Strategy?

A: The Blueprint is aligned to the NEHTA strategy, which is in turn aligned to the National E-Health Strategy. At this stage of the NEHTA work program, it is focused on the “connect and communicate” planning horizon described in the national e-

health strategy. The capabilities described in the Blueprint support that planning horizon.

Q: Who has been consulted in the preparation of the Blueprint?

A: In developing the detail behind each of the items summarized in the Blueprint the, Australian governments, in conjunction with the NEHTA are collaborating with representative groups drawn from the healthcare sector, as well as health leaders, consumer groups, software vendors, information managers and standards experts. These range from including general practitioners to specialist medical and non-medical groups including the allied health, pharmaceutical and nursing sectors.

Prior to its release, the Blueprint as a whole has been reviewed by general practitioners, specialists, consumers, vendors, e-health experts and Jurisdictional representatives.

Q: What are the benefits of e-health to the Australian health sector?

A: The Australian governments have embraced an end-to-end integrated approach e-health. Whilst implementation will take time, it offers long-term benefits including:

- *Offers anywhere, anytime access:* your health information will be electronically available to the right person at the right place and time
- *Overcomes fragmentation and duplication:* interconnecting the Australian health sector will remove much of the reliance on paper records and unnecessary duplication of tests
- *More control over health outcomes:* you or your carer will have electronic access to the information you need to better manage and control your personal health outcomes
- *Best practice secure messaging:* you will have confidence that your personal health information is being managed within a secure, confidential and tightly controlled environment

Q: When will the e-health products in the Blueprint be rolled out?

A: NEHTA is currently collaborating with all States, Territories, the Federal government and the private sector to find opportunities for early adoption of e-health capabilities that align both the national strategy and with local priorities and programs of work.

In these collaborations, ownership and priorities for implementation always remains in control of the local project sponsor(s). NEHTA's role is to work with local project teams and facilitate access to specialist knowledge about NEHTA specifications and national infrastructure.

The majority of change and adoption activities will be undertaken and managed at local and regional levels across the Australian health system. There is a need, however, for national strategies to accelerate the adoption of e-health in Australia to a tipping point as quickly as possible. Once a tipping point level of participation has

been successfully achieved, other mechanisms will be considered to sustain continued growth in participation by healthcare providers.

Q: What about personally controlled electronic health records?

A: As part of the 2010/11 federal budget, in May 2010, the current government¹ announced a \$466.7 million investment over two years in to a Personally Controlled Electronic Health Record system to support the National Health and Hospitals Network. Personally Controlled Electronic Health Records (PCEHR) are discussed briefly in the Blueprint and the section will be updated once more information is available.

Q: How does the Blueprint explain the implications of e-health on people's privacy?

A: The development of e-health brings with it a range of new opportunities to utilise health information to improve outcomes for individuals, and to increase the efficiency and effectiveness of the health system. It also brings with it a range of privacy questions that must be answered and managed on a continuing basis.

NEHTA's approach to privacy is based on a firm belief that this issue is about much more than compliance with legislative requirements alone. Perceptions about privacy and notions of trust are critical to the successful adoption of e-health.

The Blueprint outlines how the combination of existing privacy laws, existing consent mechanisms and the provider's duty to protect patient confidentiality are supplemented by a security and access framework, new controls set out in healthcare identifiers legislation and proposed privacy reforms; a strong foundation for privacy protection will be delivered.

Q: How can I provide feedback about the Blueprint?

A: Please direct your questions or feedback to: architecture@nehta.gov.au.

¹ Post the August election some policies may change if there is a change of government.