



# Healthcare Identifiers Service Communications Plan

*The right information at the right place,  
at the right time.*

**The Healthcare Identifiers Service is an initiative of all Australian governments**

**National E-Health Transition Authority Ltd**  
[www.nehta.gov.au](http://www.nehta.gov.au)

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# Purpose of document

This document describes the development and implementation of an education and communication plan for healthcare providers, healthcare consumers and industry vendors for implementation prior to the Healthcare Identifiers Service (HI Service) commencing operations.

## Audience

The audience for this document is:

- The Australian public
- Chief Executives of Australian, State and Territory Government Departments of Health
- Australian, State and Territory Government central agencies
- Healthcare provider peak bodies and colleges
- Healthcare consumer representatives and representative organisations
- Professional bodies
- Chief Information Officers
- Healthcare ICT industry

## Scope

This high level document describes the communication approach for the introduction of the Healthcare Identifiers Service. Media schedules are also under development and will be finalised subject to the feedback received from consultation.

# Introduction

On 1 July 2010, the Healthcare Identifiers Service commenced operations. To support early adopter implementation of the HI Service, a communication strategy will raise awareness and educate members of the Australian public and the healthcare industry about:

- What an identifier is and what it means;
- How an identifier is different to an electronic health record;
- The HI Service including how it works, and the key project milestone and timelines;
- The impact/effect of the HI Service on the delivery of healthcare services to the public; and
- Where the HI Service fits in the national e-health agenda.

The HI Service will provide a nationally consistent approach to identifying individuals and healthcare providers – an important first step in building a secure e-health system in Australia.

The vision is: the right information at the right place, at the right time.

Importantly, although the public is not required to take any action with respect to this number, members of the community will have an interest in the introduction of the HI Service as it is a key foundation for our future e-health system.

This strategy therefore aims to ensure that consistent and accurate messages about the HI Service and the role of Healthcare Identifiers are available to both the healthcare sector and the wider Australian community.

The plan responds to issues that reflect the known concerns of the general public, consumer representatives, healthcare providers and organisations, and industry including software vendors, health insurers and standards bodies.

# Background

In February 2006, the Council of Australian Governments (COAG) agreed to a national approach to developing and implementing a system for healthcare identifiers for individuals and providers in order to accelerate work on a national e-health system to improve safety and quality for patients and increase efficiency for healthcare providers.

COAG affirmed this decision in 2008 and agreed to universally allocate individual healthcare identifiers and to conduct public consultation on national health privacy legislative proposals, including security and privacy arrangements for healthcare identifiers.

Public consultation on proposals for legislative and privacy arrangements to support the introduction of Healthcare Identifiers was conducted in July - August 2009. A second round of consultation occurred from 20 November 2009 - 7 January 2010 and included release of exposure draft legislation for Healthcare Identifiers.

The allocation of three types of Healthcare Identifiers is the first step towards the introduction of electronic health records. The three types of identifiers are:

- **Individual Healthcare Identifier (IHI)**
  - o Uniquely identifies an individual
- **Healthcare Provider Identifier – Individual (HPI-I)**
  - o Uniquely identifies an individual who provides healthcare services eg GP or specialist.
- **Healthcare Provider Identifier – Organisation (HPI-O)**
  - o Uniquely identifies organisations that deliver healthcare such as hospitals or medical practices.

# Aims of the communication plan

The aim of the communication plan is to ensure timely, accurate information leads to a clear understanding of the *HI Service through the following activities:*

- Promote the short and long term benefits of both the HI Service and the benefits that the introduction of healthcare identifiers will support in e-health.
- Develop a process for consulting with stakeholders, including the community, on the implementation of the HI Service.
- Achieve a common understanding among jurisdictions, NEHTA, healthcare providers and other organisations of the benefits of Healthcare Identifiers and the process for implementing them.
- Address risks that may arise if there is a lack of consistent and clear communication on the HI Service with various stakeholder groups

This plan will be supported by a tactical plan that sets out in detail the activities, communications tools, timing and who/what will be responsible. This plan leverages existing Medicare Australia communications channels.

# Public consultation to date

## Privacy Impact Assessments

Three Privacy Impact Assessments (PIAs) have been conducted by independent organisations to assess the impact the Healthcare Identifiers Service could have on privacy. In 2006, a preliminary PIA was conducted by Galexia to inform us and test the degree to which initial concepts under consideration might impact people's privacy.

In 2007 a second PIA was conducted by Clayton Utz to determine the impact of key policies on the consumer privacy. Then in May 2009, a third PIA was conducted by Mallesons Stephen Jacques. Responses to all of the recommendations were considered in the final design and development of the Healthcare Identifier Service.

The PIAs are available from the NEHTA website:

<http://www.nehta.gov.au/connecting-australia/privacy/pias>

## Healthcare Identifiers Bill 2010 public consultation series

Public consultation on the Regulations commenced on 12 March 2010 and finished on 9 April 2010. As part of this process draft exposure regulations and an accompanying consultation document were circulated to key stakeholders, e-health subscribers and made available for public comment on the Department of Health and Ageing's (DOHA) website. In total, 50 submissions were received.

Work is underway to revise the proposed regulations to take into account issues raised in the consultations including to ensure that:

- The definitions for healthcare provider organisations and individuals are appropriate, particularly for professionals that are not registered on a national basis;
- The kinds of identifiers that can be provided to healthcare provider organisations (eg a seed [primary organisation] or networked HPI-O) can be distinguished; and
- Security requirements for healthcare providers to access the HI Service provide an appropriate balance between privacy concerns and operational constraints.

Effective communication about the implementation and operation of the HI Service and the legislative requirements was also highlighted as essential to the success of the HI Service initiative.

Changes have required discussion with key stakeholders as well as NEHTA and jurisdictions.

Communication activity undertaken by DOHA has focused on the promotion of three key consultation processes. National non-campaign advertising in metropolitan newspapers was undertaken for each round of consultation. This was supplemented by national media releases coinciding with the commencement of each consultation round.

The first round of consultation on the legislative proposals for healthcare identifiers and privacy was conducted in July-August 2009. A discussion paper *Healthcare Identifiers and Privacy: Discussion Paper on Proposals for Legislative Support* was released by the Australian Health Ministers' Advisory Council (AHMAC). Ninety-three written submissions were received, over 45 stakeholders attended forums held in Melbourne and Sydney and eight consumer focus groups were conducted in metropolitan and regional areas in Queensland and South Australia.

The submissions received in response to the consultation showed support for the introduction of Healthcare Identifiers and enhancing health privacy proposals, particularly through efforts to put in place uniform arrangements across Australia. Most submissions acknowledged the desirability and potential benefits of implementing Healthcare Identifiers as a foundation of e-health systems.

The key messages identified through the public consultation included that:

- The legislative framework should limit the use of healthcare identifiers to health information management and communication activities undertaken as part of delivering healthcare and related purposes including health service management, health research and authorised or required by law exceptions;
- Use of Healthcare Identifiers by a public or private organisation should be underpinned by health information regulation and privacy arrangements;
- The HI Service should have an appropriate governance framework with transparent and accountable processes for its operation, including review, complaint and reporting requirements;
- More detailed information about the Healthcare Identifiers initiative must be made publicly available to support a better understanding of the purpose and benefits of Healthcare Identifiers, the operation of the HI Service and the relationship between the Healthcare Identifiers and the broader e-health agenda; and
- Stakeholder confidence in the HI Service and the supporting legislative framework will be increased through ongoing communication and consultation.

A second round of consultation was undertaken between November 2009 and January 2010 and focused on revised legislative proposals. This included the release of an exposure draft of the *Healthcare Identifiers Bill 2010* and the supporting document *Building the Foundation for an E-health Future: Update on the Legislative Proposals for Healthcare Identifiers*. Fifty-four written submissions were received. A stakeholder forum was also held in Canberra attended by approximately 130 people.

Overall, feedback from this consultation indicated a general support for the legislative proposals. There were also some particular suggestions for extending the use of identifiers for insurance and research purposes and in relation to how the identifiers might work in practice. These have been taken into account in finalising the legislation.

A third round of consultation was conducted based on the exposure draft regulations. They were released for comment on 12 March 2010 by the Minister for Health and Ageing, the Hon. Nicola Roxon, MP. In addition, a consultation paper: *Proposed Regulations for the Healthcare Identifiers Service* was released by the Australian Health Ministers' Advisory Council to support stakeholders in making a submission. Consultation on the exposure draft closed on 9 April 2010 and 52 submissions were received.

DOHA has continued to promote both HI Service and wider e-health information through its website. Along with general background information, Q&As and copies of key documents such as draft legislation and regulations, the Department has published the papers submitted as part of the consultation processes.

# Target Audiences

The HI Service has different benefits for the broad range of healthcare stakeholders. Tailored communications are therefore required. This section outlines the audience groups that will need to be targeted with specific messages and information about the HI Service. The communication tools and channels used to communicate with these different groups are also outlined. The audience segments are:

- Healthcare consumers including marginalised health services, for example, drug and alcohol services, mental health services and homelessness services;
- The wider public, and media;
- Healthcare providers, organisations, related research and better practice organisations;
- Australian State and Territory governments, including Ministers and regulatory agencies;
- Key stakeholders including consumer advocacy groups, privacy stakeholders and peak health professional bodies; and
- Health information technology industry and vendors.

## Key messages

One of the considerations in communicating with stakeholders about the HI Service is to demonstrate to the Australian public and the healthcare industry that the HI Service will meet privacy and security expectations.

Importantly, messaging also takes into consideration the staged approach to the adoption of the HI Service (refer *HI Services Implementation Plan*).

A separate Industry Communications Plan will be managed reflecting the specific information and timeframes relevant to Australia's software vendors, and to be delivered through the peak software industry organisations as well as directly to the software community.

## Sample messaging plan:

### Primary messages – public

- The HI Service is a necessary foundation for a safe and efficient quality e-health system and is the first step in the journey towards the introduction of personally controlled individual electronic health records.
- You don't need to know your IHI number.
- You don't need your IHI number to claim Medicare.
- You can still access anonymous healthcare.
- Your Medicare card is still used to claim.
- Your IHI will be allocated automatically if you are enrolled in Medicare or Department of Veterans' Affairs – you don't need to do anything.
- You don't need an IHI to obtain health services.
- Your IHI is not stored on your Medicare card.
- Your IHI is not an electronic health record.
- Your IHI is associated with a limited amount of identifying information such as, name, date of birth and sex. In some circumstances, further data may be required to ensure unique assignment or to assist with the use of IHIs such as: address, birth plurality and birth order, and aliases.

- Only authorised people will be able to access your IHI number. When your IHI is accessed by a healthcare provider, that access is recorded and available to you via an online audit log.
- If you want to, you can look your number up through Medicare's online services.
- The HI Service does not give healthcare providers or other entities the ability to access clinical information held by different healthcare providers without complying with their existing privacy obligations.
- There are privacy protections in place to prevent unauthorised and unintended collection, use and disclosure of healthcare identifiers.
- Legislation underpinning the HI Service provides for sanctions and complaints mechanisms where healthcare identifiers have been misused.

### **Secondary messages – public**

- Medicare Australia is the operator of the HI Service and will be allocating Healthcare Identifier numbers to the Australian public and health professionals not registered with AHPRA.
- Medicare Australia is now issuing IHI numbers. For more information go to [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

### **Primary messages – Healthcare Provider – Individual**

- Medicare Australia is the operator of the HI Service and will be allocating Healthcare Identifier numbers to the Australian public and to those healthcare providers who are not registered with AHPRA.
- Medicare Australia allocates HPI-I numbers to individual healthcare providers.
- This number is different to your provider number.
- Most healthcare providers will be automatically allocated an HPI-I through the Australian Health Practitioners Regulatory Authority (AHPRA).
- If you are not automatically allocated an HPI-I you may register for an HPI-I by completing a registration form and submitting the form to Medicare Australia (paper and online process from July onwards).
- Public Key Infrastructure (PKI) (individual or an organisation certificate) will make it easier to access HI Services. PKI is a computerised form of message encryption using two keys (small files); one is public and used by the sender to encrypt the message, the other is private and used by the recipient to decrypt the message
- You can register for a HPI-I from 1 July 2010.

### **Primary messages – Healthcare Provider – Organisation**

- Medicare Australia is the operator of the HI Service and will be allocating Healthcare Identifier numbers to the Australian public and health professionals.
- Medicare Australia allocates HPI-O numbers to organisations that provide healthcare services.
- This number is linked to all relevant HPI-I numbers in your organisation.
- You can register for an HPI-O by submitting a form to Medicare Australia (paper process from April-July 2010 and online process from July 2010 onwards).
- You need to have PKI (location certificate) to access HI Services.
- You can register for a HPI-O from 1 July 2010.

# Communication channels

The following channels will be leveraged to communicate with a diverse range of audience groups about the HI Service and the broader e-health message.

## Model Healthcare Community (MHC)

In December 2009 the MHC was developed to demonstrate to stakeholders, including Members of Parliament, how the HI Service works. The MHC demonstrates how the HI Service operates in various healthcare scenarios as well as how individuals, healthcare providers and the health sector use or interact with the service.

The MHC was first situated in the Medicare Australia offices in Canberra where it received more than 330 visitors.

Visitors have included The Hon. Nicola Roxon MP Minister for Health and Ageing, The Hon. Chris Bowen MP, Minister for Human Services, representatives from government departments, peak health and industry bodies, Australian General Practice Network (AGPN) E-Health Support Officers. In addition, special days were dedicated to consumer groups, vendors, jurisdictional communications representatives and media representatives.

The MHC is presently based at the Royal Australian College of General Practitioners' (RACGP) head office in Melbourne. A mobile version will also take the e-health message "on the road".



## Educational material and marketing support

Healthcare providers will be provided with relevant and tailored brochures, posters and education materials for their practice waiting rooms so patients can access correct information about the HI Service.

Information packs will be made available online for the individual healthcare professions. A general information pack will be available for other healthcare providers not registered with AHPRA.

Information packs will be available online for consumers to download. Printed brochures will be distributed from Medicare Australia offices, selected Centerlink offices, and at points of care such as GP surgeries, clinics and hospitals.

## Public relations

A media strategy will be launched nationally to disseminate important milestones, events, information and service changes and updates.

This will include local and regional radio networks, mainstream press and the journals of peak bodies.

Clinical and consumer champions of e-health will be sought to be part of a longer term e-health promotional strategy.

## Online initiatives

### Websites:

Information about the HI Service including downloadable information packs will be available on the following websites:

- Medicare Australia website.
- NEHTA – a key source of important documents on the HI Service, including the Concept of Operations and three Privacy Impact Assessments on healthcare identifiers.
- DOHA – a dedicated website to provide information on the Healthcare Identifiers Service at [www.health.gov.au/ehealth](http://www.health.gov.au/ehealth). The site contains key publications on the legislative development process, submissions received in response to publications and supporting documents such as FAQs. The site also provides a 'subscribe' service for anyone who wishes to receive updates on the HI Service.
- The new national e-health web site [www.ehealthinfo.gov.au](http://www.ehealthinfo.gov.au) – developed to provide timely and accurate information about healthcare identifiers to healthcare providers, healthcare managers, the healthcare industry and the Australian public.

Each of these websites contains promotional information about the HI Service with reciprocal links to maximise the reach of these online channels.

Further, banners and other links promotions will be placed on State and Territory health department websites.

### Social Media and Digital Technology:

A variety of social media and digital technology will be used to create, engage and implement integrated media, SEM and social media strategies.

Twitter from [www.ehealthinfo.gov.au](http://www.ehealthinfo.gov.au) updates on e-health and health news and tips to followers will be sent. This will allow us to listen and respond to community discussion about issues in real time.

Podcasts and online films a series of educational information podcasts and short online films will be available from a number of websites.

# Engagement activities

Stakeholders will continue to be involved in awareness raising and educational activities including:

- A state-by-state consumer healthcare seminar series on e-health and the HI Service specifically in consultation with consumer representative organisations from each state and territory.
- Cooperation with clinical peak bodies such as the Royal Australian College of General Practitioners (RACGP) to convey operational material direct to general practitioners' surgeries.
- Expos, conference and speaker programs across Australia.
- Visits to practices by Medicare Australia Business Development Officers (BDO).

# Monitoring and evaluation

Ongoing evaluation and assessment of the effectiveness of key messages and communications tools will be undertaken. Evaluation of communications activities will also help to inform future communications on the HI Service.

Evaluation tools may include:

- The results of market research.
- Monitoring and analysis of media coverage.
- Monitoring of orders for resource materials.
- Monitoring of website data.
- Stakeholder feedback.
- Attendance at public forums.

The effectiveness of the strategy will be reflected in the level of awareness and understanding for each of the target audiences.