



e-Referrals

Executive Summary

Release 1.1

Introduction

As a strategic part of the emerging e-health infrastructure currently taking shape across Australia, this package release was based upon several key design requirements.

Shaped by stakeholder consultation, this release gathers up-to-date intelligence and expertise from participating clinical, administrative and analytical communities, and offers leadership towards a truly national referrals solution.

This suite of documents, together with the e-Referrals Structured Document Template and the e-Referrals Clinical Document Architecture (CDA) Mapping and Implementation Guide (both scheduled for release in 2011) are intended to provide infrastructure partners with design specifications and methods, offering clinical advantages for patients and healthcare professionals, while providing a basis for improved coverage and sophistication into the future.

This release recognises the need for detailed consultation with the wider national healthcare community to develop solutions delivering immediate and long-term benefits to health care providers and their patients. Privacy and security requirements are also discussed in the Business Requirements Specification and Solution Design Documents, respectively, as is the need to ensure that the technical coding and exchange of patient information is conducted appropriately.

The e-Referrals package is the foundation for a national referrals framework, validated through stakeholder participation, and balancing specific interests with the need for a national consensus, towards a sustainable healthcare future.

Purpose

This package is intended to initiate and foster the ongoing development of a series of national specifications and methods to support the structured exchange of patient referral information between clinicians.

Approach & Consultation

As several jurisdictions and health care providers are currently working toward state-based referral systems, a repeatable implementation strategy has been adopted to allow for the iterative uptake of NEHTA specifications over time, and the development of national, interoperable referral solutions.

Accordingly, the approach adopted in this release is both consultative and incremental; in this way, participating stakeholders are able to shape the development of the national e-referral standard and its implementation within their specific clinical context. Consequently, participants will be better able to ensure that referral-related change is enabling and meaningful.

The first stage of the development process focused on defining the clinical content of the referral message, using NEHTA's 'GP and Specialist Care Referral – Data Content Specification' (2007) as its reference point. During this stage the following stakeholders were invited to provide input into the drafting of the e-

Referrals Core Information Components document: ACT Division of General Practice, Australian Capital Territory Department of Health, Australian College of Rural and Remote Medicine, Australian Commission on Safety and Quality in Health Care, Australian General Practice Network, Australian Healthcare & Hospitals Association, Department of Defence (Australian Government), Department of Health and Families (Northern Territory Government), Department of Health and Human Services (Tasmania), Department of Health (Government of Western Australia), Department of Human Services (State Government of Victoria), Department of Veterans' Affairs, General Practice Network NT, General Practice NSW, General Practice Queensland, General Practice SA, General Practice Tasmania, General Practice Victoria, GP Workforce Tasmania, Health Workforce Queensland, Mater Health Services, NSW Department of Health (New South Wales Government), NSW Rural Doctors Network, Royal Australasian College of Surgeons, Rural Doctors Workforce Agency, Rural Health West, Rural Workforce Agency (Victoria), SA Health, The Australian Indigenous Doctors' Association Ltd, The Royal Australasian College of Physicians, The Royal Australian College of General Practitioners and the Western Australian General Practice Network.

The second stage focused on the technical requirements (i.e. the e-Referrals Structured Document Template and the CDA Mapping and Implementation Guide) needed to enable the sending of an electronic referral message from general practitioners to specialists. Major inputs included a workshop conducted with a representative group of clinicians to define the business processes associated with the transmission of referral messages, and a review of an initial draft of the Business Requirements Specification and Solution Design document by a nationally-representative group including the vendor community. The following stakeholders were then invited to contribute to and review these two documents: the Department of Health and Ageing, the Department of Human Services (Victoria), the Department of Veterans' Affairs (DVA), Medicare Australia, and the Royal Australian College of General Practitioners (RACGP).

Benefits

The referral package is designed to provide safety and quality benefits, each intended to scale with adoption rates. These are achieved through improved:

- Accuracy of demographic information via healthcare identifiers, promoting the rapid identification of patients, providers and services, minimising duplicate records and accelerating decisive information exchanges
- Accuracy of clinical information via secure and structured communications between referrers (general practitioners) and referees (specialists), promoting safety, error reduction and reduced duplication of clinical and administrative effort
- Cost-efficiencies via increasing interoperability of practices and systems, with a corresponding decrease in miscommunication and associated risks
- Coordination of services and treatments, from diagnosis to interventions, leading to increasingly-integrated care potentials, nationwide.

Structure

The e-Referrals Release 1.1 package is built upon a series of interlocking national infrastructure services, developed by NEHTA's e-Health Foundations program, specifically designed to support the appropriate exchange of clinical and administrative information between participating healthcare providers.

The relevant e-Health Foundations include the Individual Healthcare Identifier (IHI), the Healthcare Provider Identifier (HPI), the National Authentication Service for Health (NASH) and Secure Messaging (SM). These foundation services

are at varying stages of readiness, and it is therefore acknowledged that local or interim infrastructure services will need to be commissioned to support the initial transfer of information. NEHTA's e-Referrals are part of 'e-Communications in Practice', also including e-Discharge Summaries, e-Medication Management and e-Pathology.

Content

The release is composed of two introductory and six key documents (two scheduled for release in 2011):

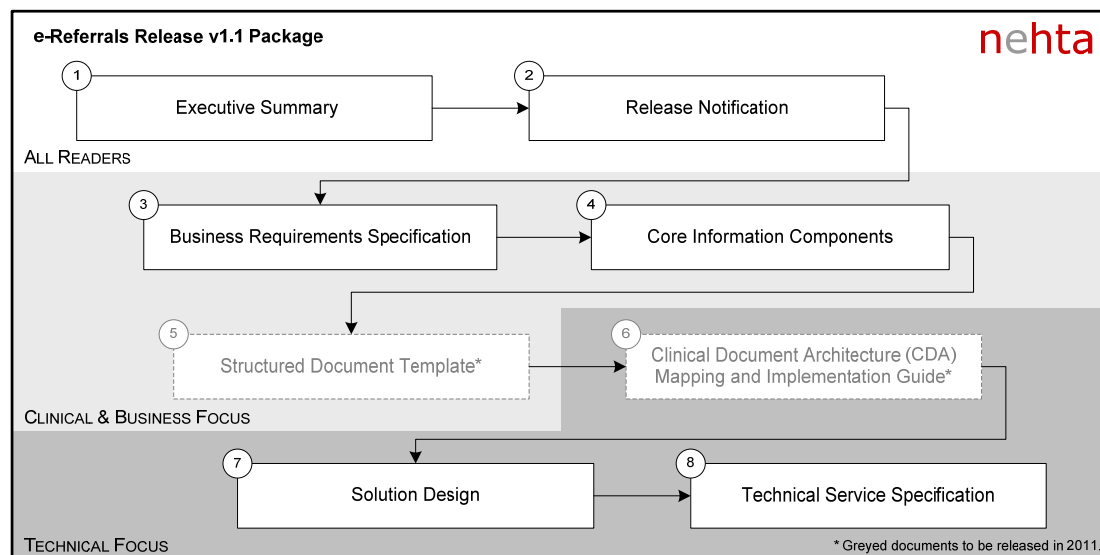


Figure 1 e-Referrals Package Document Map

The Business Requirements Specification describes the high level requirements for the creation, delivery and receipt of referrals for patients, typically between general practitioners and specialists.

The Core Information Components document defines the information components being recommended for use when exchanging referrals within Australia.

The Solution Design defines national guidelines and specifications that implementers should adopt when developing referral solutions in order to allow future interoperability.

The Technical Service Specification defines the logical interfaces required for implementing the e-Referrals release.

The e-Referrals Structured Document Template (SDT) provides a detailed content specification for the Core Information Components.

Finally, the CDA Implementation Guide describes how a SDT is implemented, specifying how the data described in the SDT is properly represented in a XML HL7 CDA document.

Feedback

The NEHTA e-Referrals Team is seeking feedback from national stakeholders on the content of the package documents. Feedback can be emailed to referrals@nehta.gov.au as can any questions relating to this package.