

Outcome statement of the Stakeholder Reference Forum

April 2010

Meeting 9

The meeting was opened by the Head of Strategy and Architecture Andrew Howard who provided an update on the progress of the Healthcare Identifiers Bill through the legislative process.

Reference Group updates were provided to members:

Identification Authentication and Access Reference Group: presented by Marina Fulcher

The group toured the Model Health Community (MHC) and general consensus from the group was the MHC provided an excellent view of how the HI service will operate when the legislation is passed.

Architecture and Technology Reference Group: presented by Andrew Howard

- A Connectathon is being held next week organised by IHE Australia to test interoperability standards. The Connectathon will consist of 14 vendors testing secure messaging specifications.
- CCA – Vendors have provided feedback on the Compliance and Conformance criteria and are comfortable with the approach but are concerned with the cost of certification.

Clinical Terminology and Information Reference Group: presented by Michael Legg

- CTI plans were reviewed and supported by the CTIRG. There was an undertaking by CTIRG members to promote the plans in appropriate forums
- CTIRG assisted with the establishment of Support Groups for Clinical Information and General Practice
- Terminology linkages to the National Product Catalogue and its implications were explored.
- A review of the terminology release process and the methods for version control was undertaken and assistance from CTIRG members offered in developing a user-guide.
- The role of CTI in Collaboration Projects was explored.

- The promotion of the work undertaken by CTI and its significance to NEHTA stakeholders was strongly supported.

Continuity of Care Reference Group – presented by Peter Williams

- Discharge Summary Release 1.1 revision scheduled to be published by 30 June 2010. Minimal changes included in this release
- Standards Australia Sub Committee 14-6-6 is currently reviewing the Discharge Summary Release 1 CDA Implementation Specification and Structured Document Template Specification. It is anticipated both specifications will be approved by June 2010. A number of minor issues raised by Standards Australia are currently being addressed.
- A successful workshop was held on 17 March with Junior Medical Officers to review the content of the NEHTA Discharge Summary Core Information Component document and to discuss the barriers to implementation from a clinical work practice perspective.
- Implementation Planning Studies and recommendations have been delivered to Queensland Health, ACT Health and NSW Health. A workshop has been held with Vic DHS to discuss preliminary results of analysis.
- Currently scheduled to publicly release the final version of Referrals Release 1 Package by 30 June 2010.
- Meetings held with Queensland Health and GP Association Geelong to discuss approaches to build and deployment of Referral Templates nationally. Discussion and planning will progress in relation to an approach to national deployment and management of referral templates.
- Meeting held with the Tasmanian Rural Medical School, General Practice North West and Cradle Coast Health Authority to discuss collaboration with NEHTA in the development of a Referrals solution.

Medications Management Reference Group presented by Stephen Moo

The group has a broad representation and has made some progress in the work program.

- Electronic Transfer of Prescriptions draft specification: first round consultations have been completed with 15 groups involved in consultations. Good feedback has been received with a revised specification to be published in June 2010.
- ETP version 1.1 which provides the most significant opportunity to get ETP up and
- working includes: Electronic signature; Scripts and PBS scripts.

Health Informatics Workshop presented by Michael Legg

Members heard a presentation on developing plans for a national health informatics workforce and for up-skilling health workers for eHealth.

Issues noted:

- There are too few health informaticians for the current workload;
- Too little known about the health informatics workforce;
- There is a breakdown for employers demand and a failure to attract students to university courses;
- There is no wide recognition of what health informatics is;
- There is no career structure;
- There will be delays to produce new health informaticians because of the multidisciplinary nature.

The proposed plan framework will include a consideration of stakeholders; vision, mission and guiding principles; projects; and resources.

Next meeting 10 June 2010

Outcome Statements will be provided after each meeting, so that participating organisations can distribute them widely to their constituents.