



Australian Government

Australian Digital Health Agency

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# Utilising My Health Record to enhance medicines safety in chronic disease patients

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Kate Ellis and Laila Tabassum

28<sup>th</sup> August 2019



# Acknowledgement



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We would like to acknowledge the traditional owners of country throughout Australia, and their continuing connection to land, sea and community. We pay our respects to them and their cultures, and to Elders both past and present.

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**Australian Government**

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**Australian Digital Health Agency**



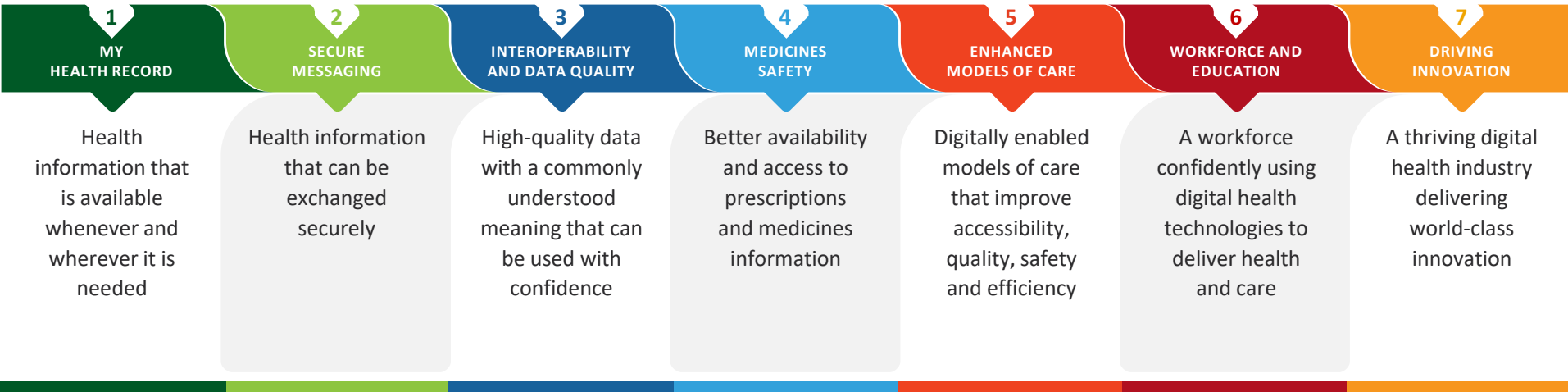
My Health Record



Australian Government  
Australian Digital Health Agency

# National Digital Health Strategy – roadmap for delivery

Co-designed with all states and territories and agreed by COAG Health Council





## **Poll question 1**

**What is your primary place of work?**

|   |  |
|---|--|
| A | General Practice   |
| B | Specialist Practice  |
| C | Allied Healthcare Provider                                 |
| D | Community Pharmacy   |
| E | Hospital   |
| F | Aged Care Provider   |
| G | Digital Health Support staff (e.g. Primary Health Network) |
| H | Other  |





## Poll question 2

Do you utilise My Health Record in your healthcare practice/workplace?

- A Yes, already embedded into our practice/workplace
- B Yes, just starting with it
- C No, but plan on registering in the future
- D No, do not plan on registering for My Health Record
- E Not applicable (e.g. do not work for a healthcare provider organisation)



# My Health Record – latest national statistics



**90.1%**

Australians have a  
record (as at 28 July  
2019)



**16,400**

healthcare provider  
organisations registered



**28 million**

clinical documents uploaded



**64 million**

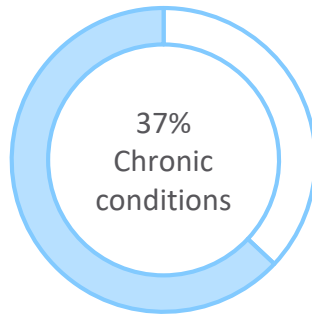
medication prescription and  
dispense records uploaded



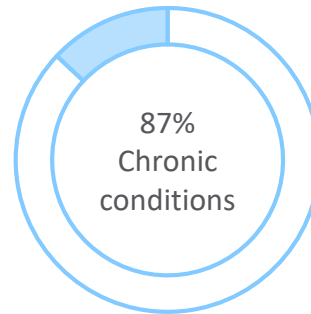
# Chronic disease burden and medication misadventures

Medicine-related problems are most likely to occur during periods of change, such as moving between care settings (e.g. hospital and the home), when a new health diagnosis is made (e.g. diabetes) or during a major health event (e.g. stroke, heart attack).<sup>1</sup>

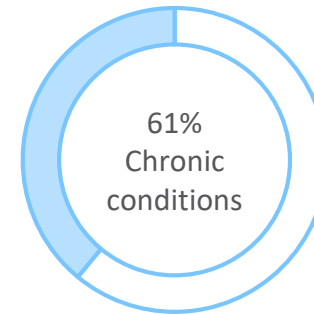
Hospitalisations 2015-16



Deaths 2016



Burden of Disease 2011





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# Medicines Information in My Health Record

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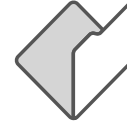
# Medicines Information in My Health Record



Dispense Records (Pharmacies)



Prescribing Records  
(General Practices, Specialists)



Medicare/PBS Information  
(Dept Human Services)



Shared Health Summaries  
(General Practices)



Discharge Summaries  
(Hospitals)



Event Summaries  
(All Healthcare Providers)



Personal Health Summary  
(entered by the patient)



Specialist Letters and eReferrals



Pharmacist Shared Medicines List  
(PSML) (Pharmacies)



# Medicines Information in My Health Record

- Dispense Records (Pharmacies)
- Prescribing Records (General Practices, Specialists)
- Medicare/PBS Information (Dept Human Services)
- Shared Health Summaries (General Practices)
- Discharge Summaries (Hospitals)
- Event Summaries (All Healthcare Providers)
- Personal Health Summary (entered by the patient)
- Specialist Letters and eReferrals
- Pharmacist Shared Medicines List (PSML) (Pharmacies)

## Medicines View – Medicines Preview tab

**Available medicines in this My Health Record - sorted by Date**  
4 Jun 2018

VDIA ENGINEER    DoB 25 Sep 1958 (59y)    SEX Male    IHI 8003 6088 3334 9780

**Allergies and Adverse Reactions**  
Animals, New Allergy, Pollen, Bee Sting, Penicillin, Morphine, Tramadol

**Medicines Preview**  
15-Jul-2016 to 30-May-2018 (5 days ago)

**Shared Health Summary**  
10-Jun-2017 (12 months ago)  
Author: Own  
Own organisation

**Discharge Summary**  
05-May-2018 (4 weeks ago)  
Author: Own  
Own organisation  
tel: (07) 9999 8888  
fax: 0499 999 999  
\* More recent than the Shared Health Summary

[\[Back to top\]](#)    [\[<\] First](#)    [\[<<\] Previous](#)    [\[Help\]](#)

**Medicines Preview - Latest Documents, Discharges, Prescriptions - sorted by descending event date.**  
15-Jul-2016 to 30-May-2018 (5 days ago)

| Source/Author   | Date                        | Medicine - Active Ingredient(s) | Medicine - Brand  | Directions                      |
|---|-----------------------------|---------------------------------|---|---------------------------------|
| Patient-entered information   | 30-May-2018 (5 days ago)    |                                 | Ventolin  | 100 metered doses for Asthma    |
| <a href="#">Discharge Summary</a><br>by <a href="#">Own organisation</a>                | 05-May-2018 (4 weeks ago)   |                                 | Amlodipine (Norvasc (Amlodipine) 10mg)  | One tablet daily                |
|   | active                      |                                 | Atenolol (Tenormin 50mg)  | One tablet daily                |
|   | active                      |                                 | Clopidogrel and Aspirin (CloPlavix 75 mg/100 mg)  | One tablet daily                |
|   | active                      |                                 | Insulin Aspart Protamine Suspension (Novomix 30 Penfill, 3ml 1000U/ml injection)  | Twice daily with meals for T1DM |
|   | active                      |                                 | Irbesartan (Karvea 300mg)   | One tablet daily for Angina     |
|   | active                      |                                 | Metformin Hydrochloride (Metformin 1g tablet)   | One tablet twice daily          |
|   | active                      |                                 | Metoprolol Tartrate (Betaloc 50mg)  | One tablet twice daily          |
|   | cancelled                   |                                 | <b>CEASED: Nurofen 400mg (Reason: Reason for Change not stated.)</b>  | One or two tablets prn          |
|   | active                      |                                 | Tadalafil (Cialis 10 mg tablet, 4)  | As directed                     |
|   | active                      |                                 | Varenicline (Champix Tablet 1mg)  | One tablet twice daily          |
| <a href="#">Pharmacist Shared Medicines List</a><br>by <a href="#">Own organisation</a> | 1018 (3 months ago)         |                                 | Return to your software's My Health Record document list to open other earlier specialist letters not listed here.<br>This document does not allow for a preview of medicines information.<br>Click <a href="#">here</a> to view the source document. |                                 |
| <a href="#">e-Referral</a><br>by <a href="#">Own organisation</a>                       | 15-Jun-2017 (12 months ago) |                                 | Return to your software's My Health Record document list to open other earlier e-Referrals not listed here.<br>This document does not allow for a preview of medicines information.<br>Click <a href="#">here</a> to view the source document.        |                                 |



# Pharmacist Shared Medicines List (PSML)

The PSML may be an important outcome from a medicines reconciliation as well as providing a useful reference source for future medicines reconciliation.

Access to the PSML via My Health Record is important as:

- It may include prescription and non-prescription medicines *as well as* over-the-counter (OTC) medicines and complementary medicines (such as vitamins, herbal medicines)
- Better medicines information via a PSML can reduce medication errors



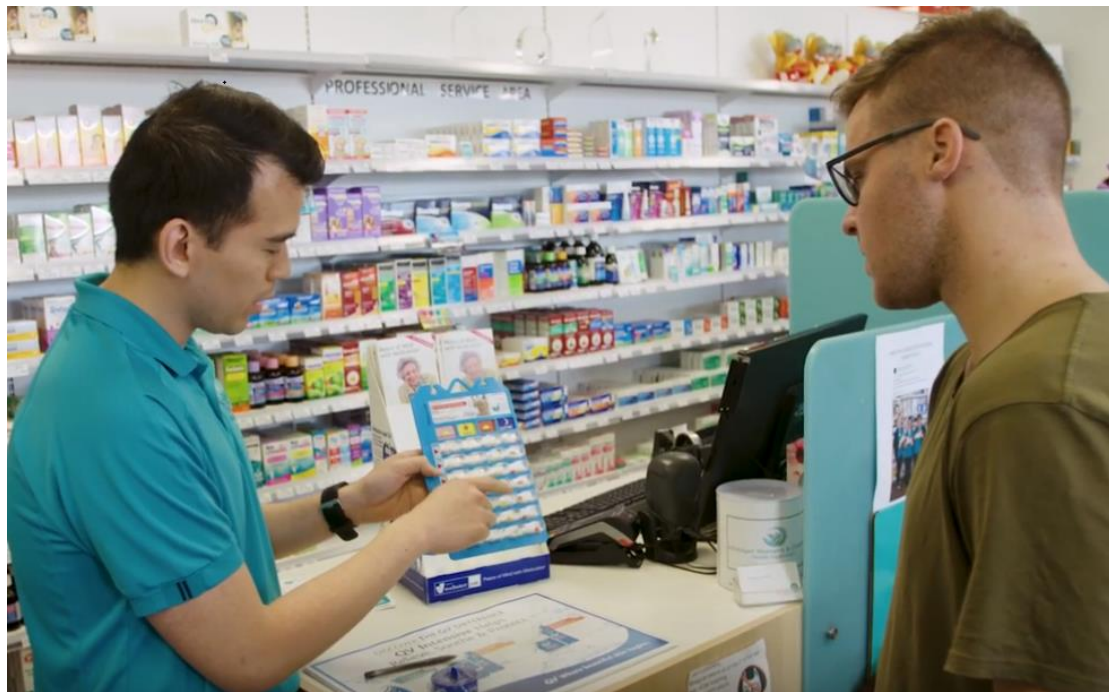
<https://www.myhealthrecord.gov.au/for-healthcare-professionals/howtos/pharmacist-shared-medicines-list>



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# Where does the information come from when creating a Pharmacist Shared Medicines List (PSML)?

- PSMLs might be created based on:
  - a hospital discharge medicines list
  - a medicines history provided by the consumer
  - a dose administration aid medicines list
  - a pharmacist professional service e.g. a Home Medicines Review (HMR)
- Only a pharmacist can authorise the upload of a PSML to a consumer's My Health Record



<https://www.myhealthrecord.gov.au/for-healthcare-professionals/howtos/pharmacist-shared-medicines-list>

# What does a Pharmacist Shared Medicines List look like currently?



## Post-Discharge Medication Reconciliation

MedView Global Site  
20 Trenery Street, Melbourne, NSW, 3067 Phone: 0394181800

|   |                                       |                                |  |
|---|---------------------------------------|--------------------------------|--|
| <b>Laurel Hale</b>                                    |                                       | <b>Hospital/UR Number</b> N/A  |  |
| <b>Date of Birth</b> 4 Aug 1998 (20 years, 11 months) | <b>Medicare Number</b> 2952 9711 81 1 | <b>DVA Number</b> N/A          |  |
| <b>Address</b> 123 Test, Test Vic 3000                | <b>Preferred First Name</b> N/A       | <b>Preferred Last Name</b> N/A |  |

|                             |   |   |                                   |
|-----------------------------|---|---|-----------------------------------|
| <b>Reconciliation Notes</b> | <b>Author</b> Individual User, Medical Practitioner | <b>Source</b> Pharmacist, Patient, Medical Practitioner, Patient List | <b>Date:</b> 25 Jul 2019 11:44 AM |
|-----------------------------|---|---|-----------------------------------|

| Medication   | Directions  | Medication Notes   | DAA                                 |
|--|---|--|-------------------------------------|
| <b>Lipitor Tablets</b><br>Atorvastatin Tablets 20 mg (blisters) 30   | Take ONE tablet daily "Avoid eating grapefruit or drinking grapefruit juice while being treated with this medicine" |  | <input checked="" type="checkbox"/> |
| <b>Vita-D Gel Caps</b><br>Colecalciferol Capsules 25 mcg (8equiv vit D<sub>3</sub></sub> 1000 IU) 60                                 | Take ONE capsule daily at night   | Suggest re-testing blood concentration and reviewing dosage after 3 months | <input type="checkbox"/>            |
| <b>Astrix Tablets</b><br>Aspirin Tablets 100 mg 112  | Take ONE to TWO tablets in the morning  |  | <input type="checkbox"/>            |
| <b>Nexazole Tablets</b><br>Esomeprazole Tablets 20 mg 30   | Take ONE tablet daily when required   |  | <input checked="" type="checkbox"/> |
| <b>Caltrate Bone &amp; Muscle Health Tablets</b><br>Calcium carbonate, Colecalciferol, Magnesium, Zinc, Copper, Manganese Tablets 60 | Take ONE tablet daily   |  | <input type="checkbox"/>            |


Pharmacist Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Page 1 of 1

Stage 1 – Fred MedView sample PSML

## Medication Profile



Ashford Pdt Hospital, 55 Anzac Hwy  
ASHFORD 5035

Printed by crawford at 21/06/2019 12:00:23 PM

You have been prescribed the following medication. This information will help you use it safely and effectively.

|                  |                                 |  |  |  |  |  |  |
|------------------|---------------------------------|--|--|--|--|--|--|
| <b>Patient</b>   | Patient, Demo                   |  |  |  |  |  |  |
| <b>Gender</b>    | Male                            |  |  |  |  |  |  |
| <b>Address</b>   | 123 Fake St Sampletown, SA 5432 |  |  |  |  |  |  |
| <b>UR</b>        | 123456                          |  |  |  |  |  |  |
| <b>DOB</b>       | 10/04/1973                      |  |  |  |  |  |  |
| <b>Allergies</b> |                                 |  |  |  |  |  |  |

Prepared By: crawford at 21/06/2019 12:00:23 PM Doctor

| Medication Name                        | Other Names  | Number to Take / Directions |        |           |         | Purpose   | Medication Change | Special Instructions   |
|--|--|-----------------------------|--------|-----------|---------|---|-------------------|--|
| OXYCODONE & NALOXONE (TAB MR) 10MG 5MG | Targin   | Morning 1                   | Midday | Evening 1 | Bedtime | A combination tablet with two medications one to treat chronic moderate to severe pain and one which can help reduce side effects e.g. constipation | NEW medication    | Modified release tablets must be swallowed whole with an adequate amount of fluid, do not crush, chew or dissolve them. Take strictly as directed. Discuss with your doctor or pharmacist how to stop this medication, gradual reduction may be required. May cause drowsiness. It is recommended that you don't drive, use machinery or undertake any activities where alertness is required until you know how this medication affects you. Avoid alcohol while on this medication. Constipation is a common problem with this medication, drink plenty of water and laxatives may be needed. Nausea and vomiting may occur initially with this medication should lessen after a few days. This medication may cause a dry mouth and with long term use can increase the risk of dental problems, ensure you see a dentist regularly. Do not drink grapefruit juice while on this medication or take St. John's Wort |
| PANTOPRAZOLE (TAB EC) 20MG             | Somac, Sozol, Salpaz, Pantlo, Ozpan, Gaslenz, Pantoflast, Apio- Pantoprazole | Morning                     | Midday | Evening 1 | Bedtime | To reduce acid secretion in the stomach for treatment and prevention of ulcers or reflux oesophagitis   | NEW medication    | Swallow tablets whole, do not crush or chew. Take regularly. If you are taking this medication for an ulcer, you should go to your doctor regularly for checkups to make sure that your ulcer has healed.  |

This Medication Profile is NOT intended for prescribing purposes, it represents a curated medicines list that has been compiled with information available at the time of discharge. Please read all the directions carefully. Do not change treatment unless directed by your regular doctor. The information provided above is general in nature and is designed as an educational aid only. It should only be read in conjunction with the manufacturer's approved information. If you have any questions relating to this medication profile, please contact and discuss with your regular doctor and/or pharmacist.

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Stage 1 - HPS sample PSML

## Consumer query: which medicines get uploaded to My Health Record?

I am taking a medicine that I would prefer does not get uploaded to My Health Record.



# Consumer query: which medicines get uploaded to My Health Record?

I am taking a medicine that I would prefer does not get uploaded to My Health Record.

- ✓ People who have a My Health Record – consented for their healthcare providers to view and/or upload dispense records
- ✓ You can withdraw consent and ask your pharmacist to not upload
- ✓ Once the record is uploaded – this information can also be removed by the patient



- ❖ For instructions on how to withdraw uploading to MHR contact your software vendor or view software summary sheets available here: <https://www.myhealthrecord.gov.au/for-healthcare-professionals/clinical-software-summary-sheets>
- ❖ More information on how consumers can control access to documents is here: <https://www.myhealthrecord.gov.au/for-you-your-family/howtos/control-document-access>





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Any questions so far?

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# Xavier Wiseman Patient Case Study



# Meet Xavier Wiseman

- 70 years old
- Kirwan, QLD (Townsville)
- Married with 3 daughters
- Type 2 Diabetes, Hypertension, Hyperlipidaemia, GORD, Prostate Cancer, Glaucoma
- Daughter in UK recently had a baby - Xavier went over for the birth of the baby
- On his return flight he started experiencing aching calf pain with swelling of the lower limb and was rushed to a hospital in Brisbane



# Xavier in Brisbane Hospital

- Diagnosed with DVT of the left lower limb and was started on anti-coagulants (blood thinners)
  - Xarelto 15mg bd for 3 weeks, then Xarelto 20mg daily thereafter
- Cardiologist review whilst an inpatient
  - Changed Xavier's medicines to better control his hypertension
- Discharge Summary automatically uploaded to My Health Record

Did you know, >90% patients have at least one medicine related problem post-discharge from hospital?<sup>1</sup>



# Townsville GP Review

- Xavier's regular GP away on leave, sees other GP in practice
- New GP reviews Discharge Summary uploaded by hospital in Brisbane
- Due to a number of medication changes (including new blood thinners), GP recommends for patient to see pharmacist for a Dose Administration Aid




| Shared Health Summary  |   |   |
|--|---|---|
| 21 Aug 2019  |   |   |
| Mr Xavier WISEMAN  | DOB 3 May 1949 (70y)  | SEX Male IMR 8003 6086 6671 1130            |
| START OF DOCUMENT  |   |   |
| Eagle Street Medical Practice                                    |   |   |
| Author: Dr Terrence Walker (General Medical Practitioner)        |   |   |
| Phone: 0455555555  |   |   |
| Adverse Reactions  |   |   |
| Adverse Reactions  |   |   |
| Substance/Agent  | Manifestations  |   |
| Mefenamic  | • Nausea  |   |
| ACE Inhibitors   | • Cough   |   |
| Cephalexin   | • Rash  |   |
| Medications  |   |   |
| Medications  |   |   |
| Medication   | Directions  | Clinical Indication                         |
| Glizalide 60mg Tablet, modified release                          | 1 Tablet in the morning with meals                            | Diabetes Mellitus, Type 2                   |
| Karvedilol 300/25 300mg/25mg Tablet                              | 1 Tablet in the morning                                       | Moderate, Chronic Hypertension              |
| Lantus Solostar 100U/ml Pre-filled pen                           | 1 Dose in the evening 12 units                                | Diabetes Mellitus, Type 2                   |
| Latanoprost 75000/0.005% 0.5% Eye Drops                          | 1 drop Before bed both sides                                  | Glaucoma                                    |
| Omeprazole 20mg Tablet   | 1 Tablet in the morning                                       | Moderate, Chronic Gastro-oesophageal Reflux |
| Simvastatin 40mg Tablet  | 1 Tablet in the evening                                       | Chronic Hyperlipidaemia                     |
| Xarelto 20mg Tablet  | 1 Tablet in the morning with meals                            | Left Deep venous thrombosis                 |
| Medical History  |   |   |
| • No Procedures are supplied                                     |   |   |
| Medical History  |   |   |
| Item   | Date  |   |
| Left Tinea pedis   | 30 Jun 2019 ->  |   |
| Left Deep venous thrombosis                                      | 25 May 2019 ->  |   |
| Bilateral Glaucoma   | 5 Jul 2015 ->   |   |
| Prostate cancer  | 10 Oct 2012 ->  |   |
| Diabetes Mellitus, Type 2  | 3 May 2012 ->   |   |
| Hyperlipidaemia  | 25 Feb 2010 ->  |   |
| Hypertension   | 12 Mar 2009 ->  |   |
| Gastro-oesophageal Reflux  | 10 Jan 2008 ->  |   |
| Immunisations  |   |   |
| Immunisations - Administered Immunisations                       |   |   |
| Vaccine  | Sequence Number   | Date  |
| Boostrix   | 1   | 10 Apr 2019                                 |
| Fluvax   | 2   | 2 Apr 2019                                  |
| Pneumovax 23   | 1   | 15 Nov 2018                                 |
| Fluvax   | 1   | 18 Apr 2018                                 |
| ADMINISTRATIVE DETAILS   |   |   |
| Patient  | Author  |   |
| Name: Mr Xavier WISEMAN  | Name: Dr Terrence Walker (General Medical Practitioner)       |   |
| Sex: Male  | Organisation: Eagle Street Medical Practice                   |   |
| Indigenous Status: neither Aboriginal nor Torres Strait Islander | Work Place: 400 George Street, Brisbane, QLD, 4000, Australia |   |
| Date of Birth: 3 May 1949 (70y)                                  | Phone: 0455555555 (Workplace)                                 |   |
| IMR: 8003 6086 6671 1130   |   |   |
| Entitlements: 6950432501 (Medicare Benefits)                     |   |   |
| Clinical Document Details  |   |   |
| Document Type: Shared Health Summary                             |   |   |
| Creation Date/Time: 21 Aug 2019 11:27+1000                       |   |   |
| Order/Time Attended: 2.25.499425095236/455244855295574425831     |   |   |
| Document ID: 6751  |   |   |
| Document Set ID: 32F748C5-88A4-4848-93A2-3ca8d1af2375            |   |   |
| Document Version: 1  |   |   |
| Completion Code: Final   |   |   |

# Community Pharmacy

- Xavier visits regular community pharmacy and mentions GP wants him to begin on a Dose Administration Aid (DAA)
- Pharmacist looks up Xavier's latest Discharge Summary and Shared Health Summary on My Health Record
- Packs a DAA for Xavier
  - Uploads a new Pharmacist Shared Medicines List (PSML) →
- Xavier mentions about his itchy feet, for which pharmacist diagnoses tinea pedis
  - Refers Xavier to a Podiatrist (referral point for type 2 diabetes)






# Pharmacist Shared Medicines List

**WISEMAN, Xavier**

DOB: 04-May-1990  
Gender: Male  
JH: 800308865711130  
Dr. John SMITH (Ph: 02 9563 4900)  
Pharmacy (Ph: 02 9563 4917)  
Pharmacist Name

**ALLERGIES AND ADVERSE REACTIONS**  
Ramilpril (cough)  
Cephalexin (rash, swelling)  
Mefenbrofen (nausea, ~~diarrhoea~~)



Date Prepared: 04/03/2019

## Current Medicines

| Drug   | Directions                                     | Start Date | End Date | Status    |
|--|--|------------|----------|-----------|
| Rivaroxaban 20mg tablet<br>(Xarelto 20mg tablet)                 | 1 morning with food<br>(For: Anticoagulant)    | 04/03/2019 |          | New       |
| Gliclazide 60mg MR tablet<br>(Glucoside 60mg MR tablet)          | 1 morning with food<br>(For: diabetes)         | 04/03/2019 |          | Edited    |
| Irbatasartan/Hydrochlorothiazide<br>(Apidolap 150mg/25mg tablet) | 1 morning<br>(For: blood pressure)             | 04/03/2019 |          | Edited    |
| Omeprazole 20mg tablet<br>(Losec 20mg tablet)                    | 1 night<br>(For: GORD)                         | 22/11/2018 |          | Unchanged |
| Simvastatin 40mg tablet<br>(Zocor 40mg tablet)                   | 1 night<br>(For: cholesterol)                  | 22/11/2018 |          | Unchanged |
| Insulin Glargine<br>(Lantus biosimilar <del>Glargine</del> )     | Inject 12 units night<br>(For: diabetes)       | 22/11/2018 |          | Unchanged |
| Latanoprost 0.005% eye drops<br>(Xalatan 0.005% eye drops)       | 1 drop into both eyes night<br>(For: glaucoma) | 22/11/2018 |          | Unchanged |

## PRN Medicines

| Drug | Directions | Start Date | End Date | Status |
|------|------------|------------|----------|--------|
|      |            |            |          |        |

## Ceased Medicines

| Drug                                       | Cease Date | Reason  |
|--|------------|---|
| Verapamil 240mg SR tablet<br>(Calan 240mg) | 04/03/2019 | Cardioselective drug, drug interaction, increased <del>dosage</del> dose for better BP control. |

webstercare

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04 March 2019 page 1 of 2

### Stage 1 - Webstercare sample PSML

# Podiatrist

- Xavier's regular podiatrist hires room from local health hub centre
- Following pharmacists advice Xavier sees the podiatrist
- Podiatrist able to access information about recent admission and medicine changes from My Health Record
- Diagnosis of Tinea Pedis on left side is confirmed and treatment is put in place
- Podiatrist uploads an event summary

**Event Summary**  
30 Jul 2019

Mr Xavier **WISEMAN**    DoB 3 May 1949 (70y\*)    SEX Male    IHI 8003 6086 6671 1130

Podiatry review:

**History:**  
Recently diagnosed with DVT of left lower limb  
**Skin:**  
Itchy skin on left foot and between 4th and 5th toe  
No neuropathic pain, rest pain, intermittent claudication or foot ulcer

**Examination:**  
**Skin:**  
Rash: on Feet, Toe(s)  
No infection, ulceration, skin breaks, calluses or corns.  
Nails are fine as well.

**Foot Pulse:** all present in both feet  
No signs of neuropathy

**Footwear assessment:**  
Style, condition and fit of foot wear are good.

**Education need assessment:**  
Patient understands effects of diabetes on foot health as well as can identify appropriate foot care.  
Feet are adequately cared for. There is no vision impairment or other factors influencing his ability to safely care of his feet.

**Diagnosis:**  
Left Tinea pedis

**Reason for visit:**  
Left Tinea pedis

**Actions:**  
Prescription marked as printed: Terbinafine 1% Cream 1 Daily As directed

**Management:**  
Next review in 2 weeks

**Medications**

| Medication           | Directions                      | Clinical Indication | Change Status  |
|----------------------|---------------------------------|---------------------|----------------|
| Terbinafine 1% Cream | 1 Application Daily As directed |                     | Changed (done) |

**Diagnoses/Interventions**

**Medical History**

| Item             | Date        |
|------------------|-------------|
| Left Tinea pedis | 30 Jul 2019 |

**ADMINISTRATIVE DETAILS**

# Case Study: how My Health Record helped



Medicines information and allergy data allowed better choice of medicine and better management - by hospital & specialist



GP able to review the discharge summary (from another city)



Pharmacy able to see above information and create a more accurate Pharmacist Shared Medicines List (PSML)



Podiatrist contributing to continuity of care





# Digital Health has been associated with:

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More coordinated and more efficient health care, predominantly from reducing delays in care and inappropriate care caused by communication gaps.

Improvements in safety and quality of care from better system design, which can include decision support tools.

Analysis of data in real time to provide more effective care

Improved access to the skills and knowledge of health professionals through telehealth consultations and other time-efficient communication tools.

Greater patient engagement through patient and carer access to their own health information (transparency), personalised care, and self-management tools that are curated and responsive to patient needs.

System improvement and learning that are not possible with existing systems (e.g. data and analysis to support an evidence-based learning culture, data-driven system design).

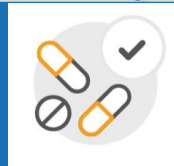


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What's next?

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## Medicines safety program – 2020 outcomes



### PSML

Upload of Pharmacist Shared Medicines List (PSML) into My Health Record.

A new clinical document to the My Health Record.

### ePrescribing

Solution Architecture and Conformance Framework co-designed with industry, clinicians, pharmacists, consumers, government (Commonwealth and jurisdictions).

### Digital Medicines Safety Blueprint

Launch of the Digital Medicines Safety Blueprint sets out 3 year action plan

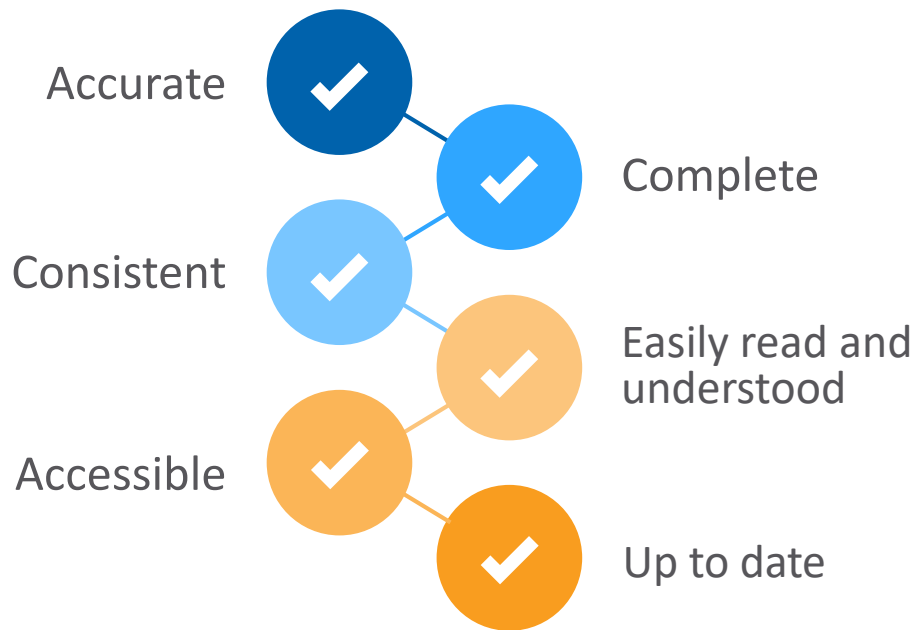
### Conformance

13 out of 14 dispensing software products are now MHR conformant





# Importance of Data Quality



# Support for formalising My Health Record Security & Access Policy

## General Practice (RACGP) template:

<https://www.racgp.org.au/running-a-practice/technology/workplace-technologies/electronic-records/my-health-record-in-general-practice/my-health-record-resources>

## Community Pharmacy (PSA) template:

<https://www.psa.org.au/practice-support-industry/resources/>

## Hospitals:

Contact your local Health Information Manager for more information

## My Health Record website:

<https://www.myhealthrecord.gov.au/for-healthcare-professionals/howtos/register-your-organisation>

<https://www.myhealthrecord.gov.au/for-healthcare-professionals/howtos/my-health-record-system-participation-obligations>



| My Health Record security and access policy   |  |
|---|--|
| [insert organisation name]  | [insert version]   |
| <b>Governance</b>   |  |
| Responsible Officer (RO)  | [insert name]  |
| Organisation Maintenance Officer/s (OMO)  | 1. [insert name]<br>2. [insert name]<br>3. [insert name]<br>4. [insert name] |
| <b>Access</b>   |  |
| Authorised staff will access the My Health Record system via:   |  |
| An up-to-date list of individual healthcare providers authorised to access the P provided to the System Operator (SO) by:   |  |
| Authorised staff will be provided with a unique user account to access the My system via conformant software by:  |  |
| The level of access granted to individual staff will be determined and docume   |  |
| Access flags will be assigned by:   |  |
| Access records will be maintained by:   |  |
| <b>Security</b>   |  |
| User account information and access will be managed by:   |  |
| Account passwords will be changed by users every:   |  |
| Staff will report any suspected security breach to:   |  |
| Confirmed security breaches will be reported to the relevant authority by:  |  |
| A log of security breaches including date and time of the breach, user account information accessed (if known), and mitigation strategies employed will be                  |  |
| A risk assessment of information and communications technology (ICT) system mitigate potential privacy and security risks associated with My Health Record conducted every: |  |
| <b>Training</b>   |  |
| My Health Record system training will be organised for all authorised staff by the system by:   |  |
| A register of staff training including the names of those who have completed training was completed will be maintain by:  |  |
| Training will be reviewed to ensure currency and updated as required (i.e. if ne introduced into the system) every:   |  |
| <b>Clinical incidents</b>   |  |
| Clinical incidents will be reported to the relevant party by:   |  |



[insert practice name] My Health Record policy

Current as of: [insert date of last revision]

Version no: [insert version number]

This policy provides guidance for staff and independent providers about access to and use of the My Health Record within our practice. It also provides guidance in the use of information technology in our practice as it relates to the My Health Record.

This practice's My Health Record policy is:

- drafted so that our practice can be audited against it to determine that the practice is in compliance with the policy
- kept up to date and reviewed at least annually and also when any new or changed risks are identified
- version-controlled so that each iteration contains a unique version number and the date when it came into effect
- inclusive of definitions of the roles of responsible officer and organisation maintenance officer.

### Responsible officer (RO) and organisation maintenance officer (OMO)

The following roles are responsible for implementation and compliance monitoring of the My Health Record policy in our practice:

- Our RO, [insert name of person assigned to the role of RO, and their position], oversees our practice's legal compliance and sets up procedures to facilitate compliance with the My Health Record legislation.
- Our OMO, [insert name of person assigned to the role of OMO, and their position], is responsible for implementation and compliance monitoring of the My Health Record policy, and for maintenance of the policy within our practice.

### How the My Health Record is accessed in this practice

[Describe how individuals in your practice are authorised to access the My Health Record, including how access is suspended or deactivated when they leave the healthcare provider organisation, when their security has been compromised, or when their duties no longer require them to access My Health Record.]

At our practice we access the My Health Record via the [insert which software you use to access the system (eg your practice clinical information system) and/or the provider portal. If you allow access via the provider portal, your practice must establish and maintain with the System Operator an accurate and up-to-date list of all identified healthcare providers who are authorised to access the My Health Record system via or on behalf of the organisation using the provider portal under Section 27 of the My Health Record Rules].

Registration for individuals authorised access to the My Health Record is [describe how individuals at the practice become authorised to access the My Health Record (ie they must have had to complete



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# Questions

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# Further information and support



My Health Record

My Health Record

Web: [www.myhealthrecord.gov.au](http://www.myhealthrecord.gov.au)

My Health Record Help line: 1800 723 471



**Australian Government**

**Australian Digital Health Agency**

Australian Digital Health Agency (ADHA)

Web: [www.digitalhealth.gov.au](http://www.digitalhealth.gov.au)

Email: [help@digitalhealth.gov.au](mailto:help@digitalhealth.gov.au)

Phone: 1300 901 001

