

HEALTHSMART

Victoria's Whole of Health ICT Strategy
A partnership between Government and Agencies

HealthSMART e-Referrals 11 March 2008 Messaging and Application Requirements

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Agenda

- e-Referrals Architecture - HealthSMART
- Overview of Requirements
 - Patient Management systems, Client Management Systems (P&CMS) and Clinical Systems (CS)
- Roadmap for P&CMS and CS applications
- Messaging Standards and Provider details

e-Referral definition

This is defined as: electronic application to application (A to A) interoperability using data transmission to support the consented and secure exchange of information between organisation in the health and human services sector, for the referral process:

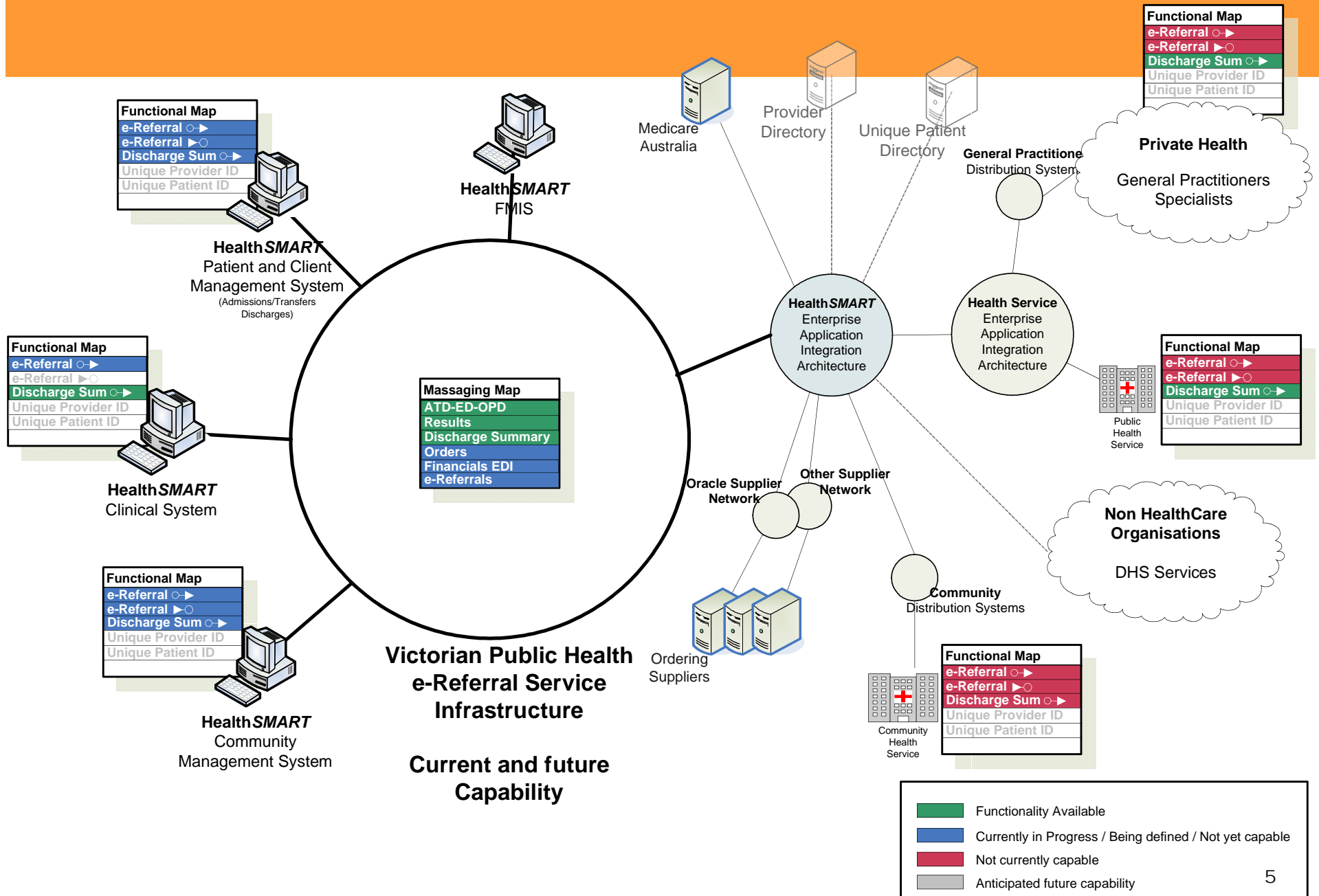
Examples are;

- Referring a patient/client from a community health agency to a service provided by a service provider at another agency; community or acute
- Referring a patient/client from a general practitioner to a service provided by a service provider at an outpatient department, or
- Referring a patient/client from a general practitioner to a service provided by a service provider at a community health agency

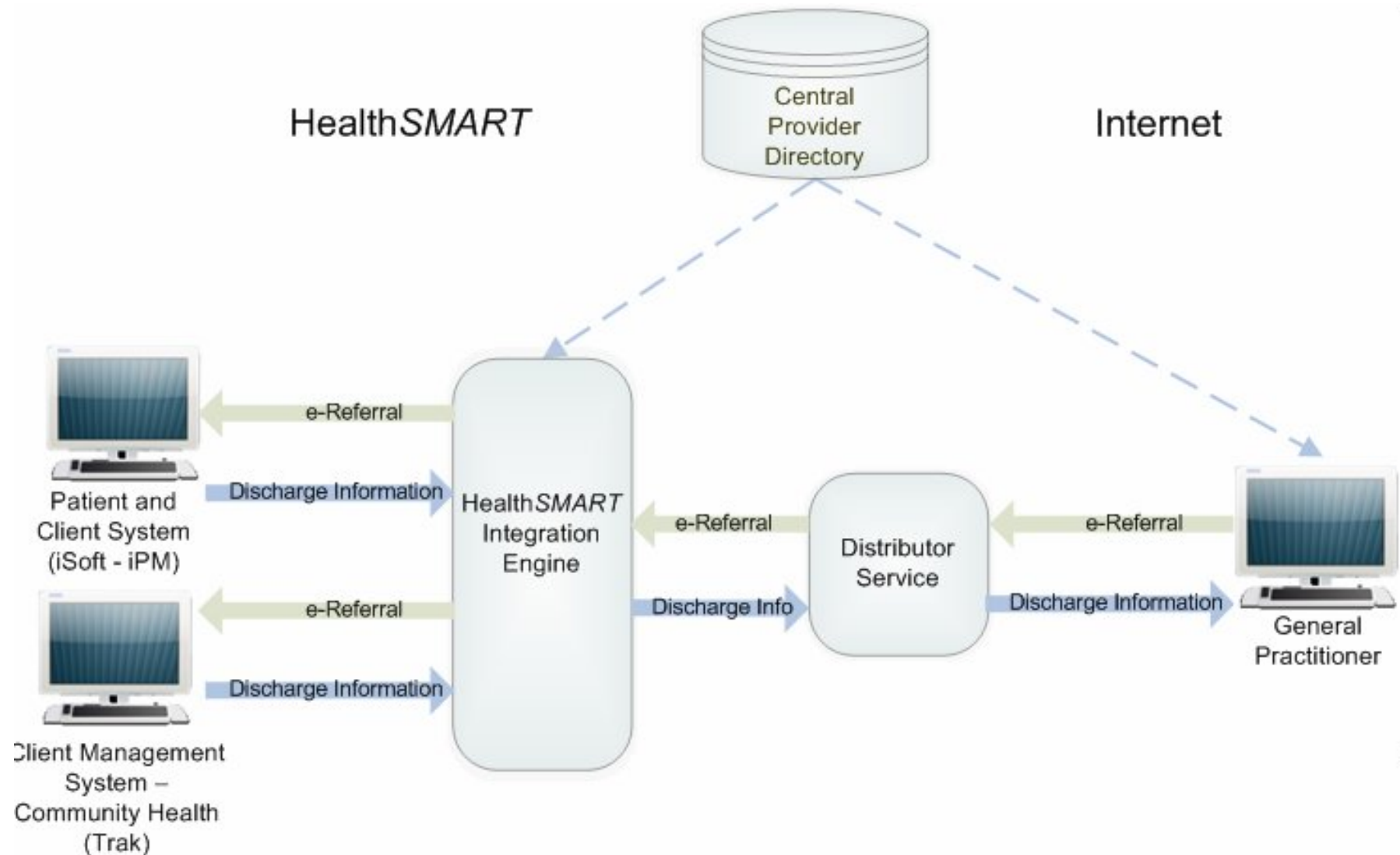
e-Referral definition

- Non-electronic data exchange:
(Post of Phone)
- Machine transportable data limited to non-electronic manipulation:
(Fax or Scanned Documents)
- Machine organised data that requires manual translation
(Email, eg: Via Argus, InfoExchange, etc)
- Machine interpretable data transmission utilising structured messages from standardised and coded vocabularies.
(HL7 or other messaging standards, EDI)

HealthSMART e-Referral Architecture



HealthSMART Integration Architecture



e-Referral Application Requirements

General Functions

- Provider Directory
(Centralised Provider Directory)
- Service Directory
(Attribute of the Provider Directory)
- Client Matching and Linking
Auto Matching based on Attributes
Manual Matching
Store URN and patient details from referring systems
Link URN and patient details to P&CMS Patient/Client

e-Referral P&CMS Requirements

Receive and Process an e-Referral

- Receive and Process HL7 message
 - I12 Patient Referral (New Referral)
 - I13 Update Patient Referral (Update existing Referral)
 - I14 Cancel Patient Referral (Cancel Referral)
- Send HL7 Response or Status update
 - I13 Update Patient Referral (Accept or Reject a Referral)
 - I12 Patient Referral (This is for sending a summary letter)
- Process e-Referral information
 - Match Patient Details
 - Add new Episode & (Accept or Reject an Episode)
 - Update and Cancel an e-Referral
 - (Forms or Discrete data, integrity of the original request)
 - Send Discharge Information

e-Referral P&CMS Requirements

Send an e-Referral request

- Generate and e-Referral Request
 - Capture SCTT and other e-Referral Data items
 - Capture Service and Provider Information
 - Update or Cancel an e-Referral
 - Update SCTT information or other detail
 - Cancel e-Referral
 - Alert on e-Referral Status
 - Alert user of e-Referrals that have not been acted on
- Send HL7 e-Referral information
(I12, I13, I14)
- Receive a HL7 e-Referral response or status update
(I12, I13)

e-Referral P&CMS Roadmap

Requirements Phases

- Feb 2008 : OHIS – Provide High level Requirements
- April-May : DHS to provide draft HL7 2.4 HealthSMART specifications
- May-Jun : Agreed functionality with Vendors,
Review with Standards bodies: NeHTA, UHI considerations
- Jun-Aug? : Vendors to provide feedback via vendor specification to
address requirements, OHIS to review

2009 P&CMS Code e-Referral Release:

Aiming toward a 2009 release for functionality

SCTT and VSRF:

New version will be available at year end 2008 for
Implementation in June 2009

Care Direct Pilot 08-09

Enable General Practitioner system functionality with a GP Vendor
Work with Distribution System
Enable OHIS Integration Engine Messaging
P&CMS e-Referrals enhancements

Central Provider Directory

HSD extracts
Standard import routines for batch data
Currently defining enhancements
2008 - Rollout with CS implementations, P&CMS and CMS in the near future (SWFP)

Messaging Standards and Provider Details

Messaging Standards

- HL7 2.4, e-Referrals Messages
- HL7 2.4, HealthSMART Standard, aligned with current messaging P&CMS, CS
- SCTT details will be aligned to HL7 HealthSMART standard
- Standard will allow documents to be sent in the envelope (SCTT/VSRF or other)
- Discharge Summary: Document or discrete will be allowed in the HealthSMART
- NeHTA Standards, Australian HL7 Standard

Provider Directory

Central Repository – HSD (enhancements required)

Service information, email addresses, etc

Initially regular batch load to P&CMS from HSD

Process to be defined for regular updates

Future

Web Services to HSD, search from P&CMS to HSD

Master Files updates from HSD

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QUESTIONS?

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