Tool 2

Using My Health Record in clinical communication

Tool 2 of the Clinical Communication and Patient Identification Clinical Guideline Toolkit

Version 2.0

Government of South Australia
SA Health

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This Tool must be read in conjunction with the SA Health Clinical Communication and Patient Identification Clinical Guideline

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Digital clinical information systems and technologies play an increasingly important role in documentation in the healthcare system.

Purpose of Tool 2

This tool provides additional information to support health services to ensure excellence in the governance, practices and systems of use of My Health Record (MHR) as part of clinical communication between SA Health services and other health providers and consumers so that;

- patient confidentiality and privacy requirements are respected
- SA Health meets its obligations under
    - *My Health Records Act 2012*
    - *My Health Records Rule 2016*
    - *My Health Record Regulations 2012*
- SA Health services meet the requirements of National Safety and Quality Health Service Standards (NSQHSS) second edition
- health practitioners meet the requirements of their professional codes of practice, conduct and legislative requirements around clinical handover and transfer of care.

In providing care to one patient, clinicians may need to integrate information from more than one system to make a diagnosis and plan care. The NSQHS Standard 1 Clinical Governance Standard requires organisations to integrate multiple information systems if they are used (Action 1.16).

Health services must evaluate potential risks such as patient mis-identification and record-matching, out of date information, inaccuracies, errors, gaps and duplications in data, and other data discrepancies.

Patient safety will be improved by:

- use of available electronic systems to provide consistent, comprehensive, timely and effective communication when handing over or receiving responsibility for the ongoing care of a patient

  - that ensures the continuity, safety and quality of the patient's care is maintained throughout all health care and transfers of care
  - to communicate critical information, risks and alerts such as allergies.
- health services developing, implementing and evaluating procedures that describe responsibilities, skills and knowledge required by staff for:
  - accessing and integrating health information from multiple systems
  - matching and verifying patient identification and currency of patient information
  - detecting, reporting and resolution of data discrepancies, such as inaccuracies, omissions or errors, and delays or failures in the systems of exchange and documentation of clinical information.

My Health Record (MHR) in SA Health

The NSQHS Standard 1 Clinical governance requires that health services work towards implementing systems that can provide clinical information into the MHR system.

MHR is a national secure online summary of an individual's health information that is patient controlled and accessible by authorised healthcare providers across Australia. Access may be limited by patient controls such as who can view the MHR and documents contained within the MHR.

MHR brings together health information from the patient, healthcare providers and Medicare.

Medicare data is available through MHR, including:

- Medicare and Pharmaceutical Benefits Scheme (PBS) information held by the Department of Human Services
- Medicare and Repatriation Schedule of Pharmaceutical Benefits (RPBS) information stored by the Department of Veterans' Affairs (DVA)
- organ donation decisions
- immunisations that are included in the Australian Immunisation Register, including childhood immunisations and other immunisations received.

Patients, or someone authorised to represent the patient, can share additional information including:

- contact numbers and emergency contact details
- current medications
- allergy information and any previous allergic reactions
- Indigenous status
- Veterans' or Australian Defence Force status
- Advance Care Directive or plan or contact details of a Substitute Decision Maker.

SA Health is a registered healthcare provider with the MHR system that enables Individual Healthcare Providers and other relevant employees to access the MHR system on the organisation's behalf when there is a clinical need to do so. SA Health, as a registered provider, must comply with a range of obligations set out under the following legislation;

- *My Health Records Act 2012*
- *My Health Records Rule 2016*
- *My Health Record Regulations 2012*

These obligations specify that health services have:

- applicable and accessible policies and procedures regarding training and appropriate employee access to patient records.
- audit controls in place and that these are able to be audited for compliance.
- access controls provided by SA Health to the MHR system are in place that meet these obligations.

SA Health provides training for users who require access to the MHR. This includes an instruction guide as to how to access the MHR, document types contained within it and how these may be utilised in clinical practice. These training materials are located on the SA Health intranet, including guides, frequently asked questions and short videos providing an overview of MHR access and use. These training guides and videos are also tailored to metropolitan and country users of the MHR.

On discharge or transfer of care, uploading patient information to the MHR system, such as a Discharge Summary, does not relieve SA Health employees of any obligations to communicate information to a patient and to healthcare professionals responsible for the patient's next episode of care, for example a GP or aged care facility.

Refer to the MHRE Project information on the SA Health intranet.

Access to the MHR system for authorised users

SA Health provides access for authorised users to the MHR via SA Health ICT infrastructure only. SA Health will not provide access to MHR via other facilities or departments. Access to the MHR is provided throughout LHNs either using the PAS or via a separate MHR viewer, by authorised users within SA Health.

For authorised users, read only access to MHR is managed via Health Active Directory account (HAD) login details, regardless of whether MHR is viewed via Sunrise EMR (EPAS), or the separate MHR viewer. Access to the MHR via a generic HAD account is not authorised.

All access to MHR must be by an authorised user only, and in the context of providing an episode of care. Non clinicians (for example; patient information officers) can access MHR to determine if the record contains information/alerts that are immediately relevant to care and to note this in the medical record. Accessing an individual's MHR outside of the context of providing an episode of care constitutes misuse of the MHR, and under the *My Health Records Act* (2012) severe penalties, including imprisonment can be applied for unauthorised use of the MHR.

Authorised users can only include:

Profession Type	Profession Occupation
Medicine	> Intern > RMO > Registrar > Consultant

Profession Type	Profession Occupation
Allied Health	> Allied Health Professionals (as listed in the AHP Schedule of the SA Modern Public Sector Enterprise Agreement: Salaried 2017 or subsequent Enterprise Agreements) > Allied Health Assistants (as described in the AHA Schedule of the SA Modern Public Sector Enterprise Agreement: Salaried 2017 or subsequent Enterprise Agreements)
Nursing and Midwifery	> Enrolled Nurses > Midwives > Nurse Practitioners > Registered Nurses
Other	> SA Ambulance Clinical Operations > Aboriginal and Community Health Workers > Medical Scientists (as specified by SA Pathology only) > Patient Information Officers (or equivalent)

SA Health manages employee access to the MHR. It is a manager's responsibility to authorise an individual's access to view the MHR, and only if the individual performs an appropriate role in the professions listed above to warrant access to MHR.

Approved users will be included in the HAD user group for MHR access. This grants access to all available documents which have been uploaded to the MHR. A manager may deem it appropriate to not provide access to the MHR for some Health Care Professionals as their workflows do not require access.

Upon completion of employment or if deemed that access is no longer required within SA Health, it is a manager's responsibility to notify eHealth Systems that access to the MHR needs to be revoked for that user.

Use of MHR in clinical care

The MHR is not an authoritative medical record, and it is safest to assume information contained within a patient's MHR is not a complete record of a patient's clinical history and should be verified through other sources. The MHR does not replace the clinical systems used by healthcare providers or make those clinical systems redundant.

All data that has been uploaded to a patient's MHR is available to SA Health users, subject to any access restrictions applied by the patient. This includes documents from both private and public sector healthcare providers.

The MHR system includes an emergency access function that can be used to override any access restrictions applied to the record by the patient in certain circumstances.

Emergency access is only authorised under the *My Health Records Act* if:

> there is a serious threat to the individual's life, health or safety and their consent cannot be obtained (for example, due to being unconscious); or

> there are reasonable grounds to believe that access to the MHR of that patient is necessary to lessen or prevent a serious threat to public health or safety

Every instance of use of the MHR's emergency access function is individually audited by the MHR System Operator, the Australian Digital Health Agency. As part of the audit process SA Health is required to provide written confirmation that each use of this function was necessary to lessen or prevent a serious threat to the consumer or another individual's life. This function should not be utilised except in such circumstances, and the reason for its use should be noted in the medical record.

Documents should only be printed for clinical care and should not to be distributed to a patient or their carer. Patients are advised to print these documents by logging into their MHR, or by speaking to their GP.

SA Health does not currently provide the capability for users to add content directly to a patient's MHR. SA Health will only upload data to the MHR from its conformant systems, which are Sunrise EMR and OACIS.

SA Health sends the following clinical documents to the MHR for patients who have one:

- OACIS Medical & Maternity Discharge Summaries (enabled 2013)
- PAS Discharge Summaries (enabled 2017)
- Pathology Results (enabled May 2019)
- Medical Imaging Reports (enabled April 2019).

Information is sent to the MHR from these systems in a format that is compliant with the Australian government MHR System Operator's specifications.

Consent and MHR

If a patient has a MHR, the My Health Records Act 2012 authorises a health care professional to contribute information to that record without requiring the patient's consent. This is commonly referred to as implied consent". While in most cases an individual will consent to their personal information being shared, there may be times when the individual does not wish details of treatment to be uploaded to their MHR.

The *My Health Records Act 2012* requires that a patient notifies their health care professional if they do not wish to have a particular record sent to their MHR. If a patient notifies a health care professional that they do not want a record to be uploaded to their MHR, the health care professional is legally obliged under the *My Health Records Act 2012* to take reasonable steps to comply with this request, which is commonly referred to as 'withdrawal of consent'. For information on SA Health's procedures for withdrawal of consent, please refer to the MHR Project page.

SA Health has implemented features within its systems that enable the following records to be withheld from the MHR if a patient withdraws consent:

- Discharge Summaries from OACIS/Sunrise EMR (EPAS)
- Pathology Reports from EPLIS
- Medical/Diagnostic Imaging Reports from ESMI.
- There is no obligation under the *My Health Records Act 2012* for a health care professional to upload a record to MHR. SA Health recognises and supports that at times a health care

professional may consult with the patient and come to a decision that a record should not be uploaded to MHR, or that a health care professional may arrive at this decision themselves.

SA Health provides training for health care professionals about how to comply with a patient's withdrawal of consent, and an instruction guide detailing steps to be taken within OACIS, Sunrise EMR (EPAS), EPLIS, ESMI and via paper orders. These training materials are located on SA Health intranet services, including guides, frequently asked questions and short videos providing an overview of MHR access and use. These training guides and videos are also tailored to metropolitan and country users of the MHR.

This Clinical Directive may be used to support Local Health Networks develop procedures and resources to assist in providing patients with their rights and responsibilities in relation to MHR use and access.

Discharge summaries

At the completion of any patient episode of care, comprehensive information must be provided within 48 hours to the General Practitioner nominated by the patient, other treating doctor(s) and health professionals who will be providing care to enable continuity of care.

The guide 10 Minimum Standards for Communication between Health Services and General Practitioners and Other Treating Doctors (Australian Medical Association 2017) is recommended for SA Health services and medical practitioners.

In the event of the death of a patient, a discharge summary must be provided to the referring hospital and to the nominated general practitioner.

Uploading patient information, such as a Discharge Summary, to the MHR system on discharge does not relieve SA Health employees of any obligations to communicate information to a patient and to healthcare professionals responsible for the patient's next episode of care, for example a GP or aged care facility.

There are National guidelines for on-screen presentation of discharge summaries.

Review and audit of the use of MHR

SA Health may be required by the Australian Government MHR System Operator to audit access to a patient's MHR by SA Health staff. Where this is required, such audit will be undertaken in accordance with current eHealth Systems policies and procedures regarding system access. SA Health has access to a data log indicating individual SA Health staff that have accessed a patient's record, inclusive of the date/time of access as well as document types reviewed.

It is important to note that unlawful use of the emergency access function is subject to civil and/or criminal penalties under the *My Health Records Act*. Every instance of use of the MHR's emergency access function is individually audited by the MHR System Operator. The penalty framework supporting the MHR system and the Healthcare Identifiers Service is set out in the *My Health Records Act 2012* and *Healthcare Identifiers Act 2010.*

Sharing and security of patient information

All SA Health staff are required by this clinical directive and their Codes of Conduct to abide by privacy legislation and professional guidelines to protect the privacy and confidentiality of patients receiving care.

Health Services must collect, keep secure, use or disclose personal information within the legislative, statutory and policy requirements applicable to SA Health, such as the Information Privacy Principles Instruction and the Freedom of Information (FOI) Policy Directive.

For more information

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Confidentiality (caveat if required)-I#-A#

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