



PCEHR Conformance Profile for Specialist Letter Clinical Documents

Version 1.3 - 17 May 2012

Approved for Release

National E-Health Transition Authority Ltd

Level 25

56 Pitt Street

Sydney, NSW, 2000

Australia.

www.nehta.gov.au

Disclaimer

NEHTA makes the information and other material ("Information") in this document available in good faith but without any representation or warranty as to its accuracy or completeness. NEHTA cannot accept any responsibility for the consequences of any use of the Information. As the Information is of a general nature only, it is up to any person using or relying on the Information to ensure that it is accurate, complete and suitable for the circumstances of its use.

Security

The content of this document is confidential. The information contained herein must only be used for the purpose for which it is supplied and must not be disclosed other than explicitly agreed in writing with NEHTA.

Table of contents

Table of contents iii

Document information iv

1 Introduction 1

1.1 Purpose 1

1.2 Scope..... 1

1.3 Intended audience 1

1.4 Contact details 1

2 Abbreviations and Terminology 2

3 Specialist Letter..... 3

3.1.1 Introduction 3

3.1.2 Relevant Specifications 3

3.1.3 Conformance Requirements for Producers 3

3.1.4 Conformance Requirements for Consumers 4

Appendix A: References 5

Appendix B: Change Log 6

Document information

Version	Date	Comments
0.5	24 Nov 2011	First draft (as separate document)
1.0	28 Nov 2011	Published version
1.01	21 Dec 2011	Clarification on extensibility was added
1.1	7 Mar 2012	See Change Log in Appendix B
1.2	19 Mar 2012	See Change Log in Appendix B
1.3	17 May 2012	See Change Log in Appendix B

1 Introduction

1.1 Purpose

This document summarises the requirements for producers and consumers of the Specialist Letter Clinical Document that connect to the National PCEHR System.

This document lists the specific conformance requirements for the Specialist Letter Clinical Document that are in addition to the Common Conformance Profile for Clinical Documents [NEHTA2012b]. Both documents represent the complete conformance requirements for the Specialist Letter Clinical Document.

1.2 Scope

The scope of this Conformance Profile is the use of Specialist Letter Clinical Documents in the context of the National PCEHR System, that is, in a “point-to-share” environment.

1.3 Intended audience

The intended audience includes the following organisations:

- Healthcare Providers;
- Vendors and developers of connecting systems; and
- Software test laboratories.

1.4 Contact details

Any comments or feedback should be sent to NEHTA at: nehtasupport@nehta.gov.au.

2 Abbreviations and Terminology

CDA	Clinical Document Architecture; an XML-based markup standard intended to specify the encoding, structure and semantics of clinical documents exchanged between health software systems.
Clinical Information System	An information system used in a clinical context to manage a wide range of clinical information functions that connects to the National PCEHR System
Conformance	Conformance is a measurement (by testing) of the adherence of an implementation to a specification or standard.
HL7	Healthcare Level 7
PCEHR	Personally controlled electronic health record.
Registered Consumer Portal	A third-party ¹ portal used by healthcare recipients to access information on the PCEHR System.
Registered Provider Portal	A third-party ¹ portal used by healthcare providers to access information on the PCEHR System.
Registered Repository	A third-party ¹ repository used to store Clinical Documents and other clinical data that connects to the PCEHR System.
May	This verb may when appearing in a conformance requirement indicates an optional requirement.
Shall	This verb shall when appearing in a conformance requirement indicates a mandatory requirement. Its negative form shall not indicates a prohibition.
Should	The verb should when appearing in a conformance requirement indicates a recommendation. Its negative form should not indicates an option that should not be supported.

¹ Third-party refers to a software system developed independently of the national PCEHR System and intended to connect to the national PCEHR System.

3 Specialist Letter

3.1.1 Introduction

This section describes the conformance requirements specific to the Specialist Letter Clinical Document type.

Although Specialist Letter is designed for point-to-point communications, it is also possible to send a Specialist Letter to the National PCEHR System. These conformance requirements only apply when it is used in a point-to-share communication with the National PCEHR System.

3.1.2 Relevant Specifications

The detailed conformance requirements are listed in Table 3.1.

Specification	Notes
Specialist Letter structured content specification [NEHTA2011]	Specifies the data elements and constrained values for a clinical document at a logical level.
Specialist Letter CDA implementation guide [NEHTA2012a]	Specifies the mapping from the structured content specification into a clinical document using an HL7 CDA structure.

Table 3.1: Specifications for Specialist Letter

3.1.3 Conformance Requirements for Producers

3.1.3.1 Objects of Conformance

The Objects of Conformance requirements include:

1. Specialist Letter clinical documents **may** be produced by:
 - Clinical Information Systems; and
 - Registered Repositories.
2. Specialist Letter clinical documents **shall not** be produced by:
 - Registered Consumer Portals; and
 - Registered Provider Portals.

3.1.3.2 Conformance Levels

The minimum level of CDA Conformance for the Specialist Letter clinical document **shall** be CDA Level 1A [NEHTA2012b].

3.1.3.3 Digital Signature

Specialist Letter clinical documents **shall** be digitally signed by the supplying healthcare provider organisation using the healthcare provider organisation's digital credential.

3.1.4 Conformance Requirements for Consumers

3.1.4.1 Objects of Conformance

The Objects of Conformance requirements include:

1. Specialist Letter clinical documents **shall** be consumed by:
 - Clinical Information Systems;
 - Registered Consumer Portals; and
 - Registered Provider Portals.
2. Specialist Letter clinical documents **shall** not be consumed by:
 - Registered Repositories.

Appendix A: References

This appendix lists documents that provide information for or about this document. At the time of publication, the document versions listed below were valid. However, as all documents are subject to revision, readers are encouraged to use the most recent versions of these documents.

- | | |
|--------------|---|
| [NEHTA2011] | Specialist Letter Structured Content Specification, Version 1.1, NEHTA, 2 December 2011 |
| [NEHTA2012a] | Specialist Letter CDA Implementation Guide, NEHTA, Version 1.3, 7 Mar 2012 |
| [NEHTA2012b] | Common Conformance Profile for Clinical Documents, Version 1.3, NEHTA, 17 May 2012 |

Appendix B: Change Log

This appendix lists the major changes and fixes applied to this Document.

ID	Section	Change Detail	Rationale
1	3.1.2	Added Objects of Conformance specific to the PCEHR context	Support requirements to constrain Clinical Documents to specific PCEHR connecting systems
2	3.1.4.1	Added new section to constrain clinical document to certain PCEHR conformance contexts	See ID#1
3	3.1.4.2	Added new section to include reference to mandatory Clinical Document use cases	Required to support end-system behaviour conformance
4	3.1.4.4	Added new section to includes reference to approves attachment types and file size limit	To support PCEHR requirements
5	3.1.5.1	Added new section to constrain clinical document to certain PCEHR conformance contexts	See ID#1
6	3.1.5.2	Added new section to include reference to mandatory Clinical Document use cases	Required to support end-system behaviour conformance

Changes from Version 1.01 (21 Dec 2011) to Version 1.1 (7 Mar 2012)

ID	Section	Change Detail	Rationale
1	All	An error in converting the file format MS Word to Adobe PDF affected the appearance of some items in version 1.1. The format conversion error has been fixed.	No material changes were made to the document.

Changes from Version 1.1 (7 Mar 2012) to Version 1.2 (19 Mar 2012)

ID	Section	Change Detail	Rationale
1	2	The types of systems able to connect to the PCEHR System were added.	This allowed requirements to be included for each type of connecting system.
2	3.1.2	This section was removed	The information was moved to section 2.
3	3.1.3.3	This section was added.	This reflects the PCEHR requirements for signing documents.
4	3.1.4.2, 3.1.4.4, 3.1.5.2	These sections were removed	The information is now in the Common Conformance Profile for Clinical Documents

Changes from Version 1.2 (19 Mar 2012) to Version 1.3 (17 May 2012)