

PCEHR Dispense Record v1.1

Release Note

9 October 2013

Approved for external information

Summary

EP-1435:2013 PCEHR Dispense Record v1.1

Release rationale

This release of the PCEHR Dispense Record end product introduces updates to the conformance profile for PCEHR Dispense Record documents, as mandated by the following approved change requests.

More detailed information about the referenced change requests is provided in the [Capabilities](#) section of this document and can be accessed by following the provided hyperlinks.

Change Request ID	Change request title	Impact on this release
CCB-0116	Relaxation of the mandatory use of HPI-Is in uploaded documents	New conformance requirement added for inclusion of local identifier in case of HPI-I omission
CCB-0219	Prescription and Dispense Consent Requirements	New conformance requirements added to require consumer consent before upload of a PCEHR Dispense Record document.
CCB-0222	Support for CSP Certificates in CDA Documents	Removed conformance requirements for digital signatures. This requirement has been replaced with an expanded conformance requirement in the <i>Clinical Documents - Common Conformance Profile v1.4</i> .

This end product has a dependency on: NEHTA-1446:2013 *Clinical Documents - Common Conformance Profile v1.4* (part of EP-1457:2013 Common – Clinical Document v1.1)

Package inclusions

New

None

Updated (supersedes previous version)

Identifier	Name	Version
NEHTA-1444:2013	<i>PCEHR Dispense Record – Release Note</i>	1.1
NEHTA-1454:2013	<i>PCEHR Dispense Record – Conformance Profile</i>	1.2

No change

Identifier	Name	Version
NEHTA-0928:2013	<i>PCEHR Dispense Record - Logical Information Specification (SCS)</i>	1.0
NEHTA-0931:2012	<i>PCEHR Dispense Record - CDA Implementation Guide</i>	1.0

Removed

None

Scope

The scope of the PCEHR Dispense Record end product has not been changed as part of this release.

Stakeholders

The following stakeholders have been involved in the development of this release:

- DOHA
- Accenture
- CCA Governance Group

Audience

- Implementers of clinical systems producing or consuming PCEHR Dispense Record clinical documents
- Senior managers and policy makers, clinical experts, health information managers, IT operations and support teams, and system integrators
- Technical and non-technical readers

Capabilities

The following sections provide additional details for each of the change requests addressed in this release.

CCB-0116

The change request introduces the temporary and limited relaxation of the mandatory requirement to include HPI-Is for a number of clinical document types, including PCEHR Dispense Record documents. It also introduces additional conformance requirements for local identifiers that need to be included in a PCEHR Dispense Record document wherever an HPI-I has been omitted.

CCB-0219

The change request introduces conformance points requesting the uploader of a PCEHR Dispense Record document to ensure that the PCEHR participant has provided consent to the upload of the document to their PCEHR.

CCB-0222

The change request introduces support for digital signatures created with CSP digital certificates for all types of clinical documents. New conformance requirements have been added in the *Clinical Documents - Common Conformance Profile v1.4*.

These new conformance requirements expand on and replace the conformance requirement for digital signatures in the *PCEHR Dispense Record – Conformance Profile v1.1*. With version 1.2 of the *PCEHR Dispense Record – Conformance Profile* this conformance requirement has been removed.

Known issues

None known

Support

This release will be supported for two years from the date of publication.

For further support or to provide feedback, please email help@nehta.gov.au.

Future releases

Increased uptake and implementation of the specifications provided as part of this end product are expected to result in the need to further update and improve these specifications. Any such updates will be managed through the joint change control process operated by DOHA.

Some of the changes introduced to the conformance profile with this release for the CCB-0116 change request are temporary and will need to be removed after the expiration of the HPI-I relaxation requirement. This will result in the need to update the conformance profile again. The current expiration date for the HPI-I relaxation is 30 June 2014, however this date is still under review by DoHA and likely to be extended.

In addition to changes managed through the joint change control process, NEHTA may provide supplementary implementation guidance for the specifications of this end product. Such information will be added to the end product as additional and/or updated product components and published as an incremental release of the end product (version identifier 1.1.x).

Previous releases

EP-1323:2013 PCEHR Dispense Record v1.0

Release note: NEHTA-1324:2013, May 2013

Inclusions

- PCEHR Dispense Record Structured Content Specification v1.0
- PCEHR Dispense Record CDA Implementation Guide v1.0
- PCEHR Prescription Record and PCEHR Dispense Record Conformance Profile 1.1

Summary

The PCEHR Dispense Record will be provided as a Clinical Document Architecture (CDA) document by the Personally Controlled Electronic Health Record (PCEHR) system.

The individual, and healthcare providers with access to the individual's PCEHR, will be able to retrieve PCEHR Dispense Record CDA documents through the individual's PCEHR and through local clinical systems using the PCEHR System business-to-business gateway. Additionally, data items in the PCEHR Dispense Record CDA documents will be stored in the PCEHR system to be used as a source of data for the individual's Prescription and Dispense View.

The PCEHR Dispense Record CDA specifications form part of the foundational set of specifications to support the development of an individual's PCEHR.

Background to this release

The data items for the PCEHR Dispense Record are based on the Electronic Transfer of Prescription (ETP) version 1.1 specifications, and informed by experience gained by the MedView Implementation Site in implementing a regional medications repository, and consideration of the scope of the Standards Australia ATS technical specifications.

A draft version of the PCEHR Dispense Record Structured Content Specification and CDA Implementation Guide were released for limited use in January 2013 to participating eHealth implementation site vendors and the National Infrastructure Operator to test and inform the development of the final release of these specifications.

Release rationale

The release will assist clinical information system vendors with design and development of their systems, specifically to parse, extract, and process information contained within the PCEHR Dispense Record CDA documents that have been retrieved from the PCEHR system using the business-to-business gateway.

Scope

Where an individual with a PCEHR has not withdrawn consent, dispense records that are sent as part of the usual business-to-business transactions to the Prescription Exchange Service (PES), or via jurisdictional clinical information systems, will be transformed to CDA documents, uploaded to and registered with the PCEHR. The PCEHR Prescription and Dispense View is constructed from the data elements coming from the PCEHR prescription CDA documents and PCEHR dispense CDA documents stored in the PCEHR system.

The local clinical information systems (e.g. GP desktop software, community pharmacy dispensing software, and hospital systems that include prescribing or dispensing components)

will be able to retrieve, render and process the PCEHR Dispense Record from the individual's PCEHR as a CDA document.

Stakeholders

The following stakeholders have been involved in the development of these documents:

- NEHTA
- eHealth implementation site partners and vendors
- PCEHR National Infrastructure Operator
- Department of Health and Ageing.

Audience

The intended audience of this document includes:

- Hospital networks, eHealth implementation sites and jurisdictional health departments involved in planning and implementing the PCEHR system.
- Software vendors developing PCEHR-enabled products.
- Senior managers and policy makers, clinical experts, health information managers, IT operations and support teams, and system integrators.
- Technical and non-technical readers.

Known issues

Issues with the specifications that will be addressed as part of any future revision are listed in the Known Issues section of the PCEHR Dispense Record Structured Content Specification.

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Contact for enquiries

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