



HIPS Release Note

7 November 2016 v6.1 Approved for external information Document ID: DH-2445:2016

Related end product identifier: EP-2448:2016

Release rationale

Version 6.1 of HIPS merges the functionalities of the previously released eHealth Integration Sample Code (eHISC) and HIPS products. HIPS v6.1 supersedes and combines the functionality of HIPS v5.0 and eHISC v6.0.

This version and all future releases of the merged product will be published as HIPS releases only.

HIPS v6.1 introduces support for the following views of the My Health Record system:

- Pathology Report View;
- Diagnostic Imaging Report View;
- Health Record Overview.

The following functionality from HIPS v5.0 that was not part of eHISC v6.0 has been included in this release:

- Support for Secure Message Delivery (SMD);
- Integration with national directory services (NHSD, NEPS).

The following issues have been resolved in this release:

Issue ID	Resolution	
5	HIPS now manages scenarios in which multiple active episodes exists for the same patient (with the same admission date and time) in a predictable manner.	
	The upload of discharge summaries no longer triggers an error if multiple episodes exist for a patient with admission times differing by no more than 1 minute.	
18	Where there are multiple reporting pathologists or radiologists who have uploaded pathology reports or diagnostic imaging reports, all of their names are now listed in the narrative of the CDA documents generated by HIPS.	
22	A memory leak triggered by document uploads and ADT messages has been removed. Regular IIS restarts previously required as a workaround for this issue are no longer necessary.	
24	Improved error message for incorrectly configured document signing certificates. NASH certificates configured for document signing are now validated by HIPS before attempting to use it as part of a document upload.	

Issue ID	Resolution
31	Mapping of test results from OBR-4 corrected for pathology reports and diagnostic
	imaging reports.

Package inclusions

Updated (supersedes previous version)

Identifier	Name
DH-2444:2016	HIPS – Source Code Software Package v6.1
DH-2445:2016	HIPS – Release Note v6.1 (this document)
DH-2446:2016	HIPS – Product Data Sheet v6.1
DH-2447:2016	HIPS – Binary Software Package v6.1

Audience

- Diagnostic service provider organisations
- Healthcare provider organisations
- System integrators
- Software vendors

Assurance

HIPS v6.1 has undergone the following conformance assessments:

- Healthcare Identifiers (HI) service:
 - Notice of Connection (NOC);
 - CCA assessment by NATA-accredited external test laboratory;
- My Health Record system:
 - Notice of Connection (NOC);
 - Execution of all conformance test cases applicable to the functionality of HIPS.

Due to the sample code nature of HIPS v6.1, implementers will have to undergo their own set of conformance assessments. This particularly applies to those conformance requirements for the My Health Record system that relate to functionality and processes outside the scope of HIPS v6.1.

Documentation of conformance assessments performed for HIPS v6.1 is available from the Agency Help Centre at <u>help@digitalhealth.gov.au</u> or by phoning 1300 901 001.

Licence

The software licence terms and conditions for HIPS and incorporated third-party components are included in the Source Code Software Package and Binary Software Package product components.

Support

The HIPS product represents sample code that implementers are free to modify, customise and integrate with their own software implementations. For this reason, the ability of the Australian Digital Health Agency to provide technical support is limited. Third-party technical support is

available from commercial partner organisations. Implementers are encouraged to take out support contracts with suitable support providers to ensure the successful implementation and operation of HIPS.

For further information about the product or to provide feedback, please email the Agency Help Centre at <u>help@digitalhealth.gov.au</u> or phone 1300 901 001. Your views on the scope and usability of HIPS will inform future releases.

Future releases

HIPS will be released on an ad-hoc basis, based on providing new functionality or other changes as required.

Previous releases

Date	Version		
12-04-2016	EP-2258:2016 eHealt Release note Release rationale:	h Integration Sample Code (eHISC) v6.0	
	Version 6.0 of the eHealth Integration Sample Code (eHISC) lets you upload pathology and diagnostic imaging reports to the My Health Record system without needing to generate CDA documents.		
	imaging reports to the automatically convert	troduces the ability to upload HL7 v2 pathology and diagnostic e My Health Record system as CDA documents. eHISC s HL7 v2 ORU messages into eHealth Pathology Report and haging Report CDA documents for upload to the My Health Record	
	diagnostic report. The information but instea	ility supports ORU messages containing a PDF version of the resulting CDA documents do not contain any structured report ad refer to the PDF report, which is extracted from the ORU d to the CDA document.	
	level MLLP interface.	nessages via both its SOAP web service interface and its new low- MLLP offers an easy-to-use integration path, as it is already widely laboratory and radiology information system implementations.	
02-02-2016	Release note	h Integration Sample Code (eHISC) v2.0.3 The enhancements made to eHISC v2.0.3 are listed below.	
	Change description	Notes	
	PCEHR NOC compliance	eHISC 2.0.3 includes changes made to the system for PCEHR NO compliance.	
	PCEHR CCA compliance	Changes made to the system for PCEHR CCA compliance: Removed of DVA number from Level 1A Discharge Summary, change to Mode of Separation display names.	
	HI CCA compliance	Changes made to the system for Healthcare Identifier CCA compliance: Duplicate IHI alerting. Non-active HPI-I warning.	
	PCEHR View	Handle the error if a patient has more than 1000 documents of their PCEHR.	
	PCEHR Advertised improvements	Add a new method IsPcehrAdvertisedLocal to lookup a patient's PCEHR status in the local data without connecting to the PCEHR. This was requested due to the UI making a large number of calls to the PCEHR.	
	NEHTA CDA® Generator Library	Updated the NEHTA CDA Generator Library to only generate a single section in the CDA document when creating a Discharge Summary 1A document.	
	Patient Summary	Added a date range selector to allow the user to reduce the number of documents retrieved from the PCEHR. This is to work around the 1000 document limitation on the PCEHR.	
	NEHTA Stylesheets	Update the NEHTA Stylesheets to version 1.2.9	
	Assisted Registration	Improved error information displayed to the user so they have a greater opportunity to resolve the issue and register the patient.	

Date	Version	
	Logout	A new configuration setting has been added allowing the Logout button to be removed for implementations that do not want users to be able to logout.
	eHISC UI user security improvements	As part of the test deployment of eHISC 2.0.3, issues were found with the integration with some Active Directory installations involving multiple domains with one-way trusts. The Active Directory integration has been updated to make it more flexible.
	Demographic mismatch status	An issue was found that prevented the demographic mismatch alert status from being saved into the IHI record after a Medicare or DVA number change.
	Prescription and Dispense View	Fixed a bug the prevented users from seeing a patient's Prescription and Dispense View if the patient had no other documents loaded to the PCEHR.
	Gain Access	Fixed a bug where Gain Access would fail for patients without a current episode.
	Withdraw Consent	Fixed a bug that prevented withdraw of consent to all of a patient' episodes if any of them had a document already uploaded.
27-02-2015	EP-2036:2015 eHea	Ith Integration Sample Code (eHISC) v2.0
	Release note	
	Release rationale:	
	eHISC v2.0 had mu	ltiple enhancements, as listed below.
	Change description	Notes
	Patients Without IHI in Web UI	New web service operations and Web UI enhancements to allow viewing and printing a list of admitted patients whose IHI was not found.
	Withdrawal of Consent in Web UI	New web service operations and Web UI enhancements to allow listing and searching for patients and recording their withdrawal of consent to upload documents to the PCEHR system on an episode-by episode basis.
	Disclosure of Hidden PCEHR in Web UI	New web service operations and Web UI enhancements to allow listing and searching for patients and recording their disclosure of the existence of a hidden PCEHR record.
	Removing Documents from PCEHR in Web UI	New web service operations and Web UI enhancements to allow listing and searching for patients, viewing uploaded documents and removing uploaded documents from the PCEHR system.
	Patient Landing Page in Web UI	Web UI enhancements to support embedding the eHISC PCEHR Web Viewer into existing clinical applications.
	Upload Level 1A Discharge Summary in Web Services	New web service operation to allow clinical systems to supply a discharge summary in PDF format along with minimal required metadata, to create a Level 1A CDA document with the PDF as the non-CDA body item, and upload this package to the PCEHR system.
	Registered Date of Birth	Enhancement to the IHI processing where, when enabled, eHISC will store the date of birth used in a successful IHI search along with the other patient demographics.

_

Date	Version	
	Enterprise ID	Enhancement to the patient identifiers to allow a new type of identifier called Registered Enterprise Patient. This identifier holds the same information as the current State Patient Identifier but will create a Hospital Patient record if one does not currently exist for the patient.
	Upload Pathology Report and Diagnostic Imaging Report	This release includes support for uploading Pathology Report and Diagnostic Imaging Report documents to the PCEHR system.
	CSP and Multitenant	The Multi-Tenant and CSP project has extended the eHISC-Core product to support the use of eHISC in an environment where a Contracted Service Provider (CSP) operates HIPS on behalf of several Healthcare Provider Organisations (HPO) that may not be permitted to share Healthcare Identifiers.
		• Multi-Tenant for IHI ensures that each HPO must obtain a patient's IHI from the HI Service separately, and cannot use the cached value that is stored by another HPO.
		 CSP for HI Service allows a CSP that operates HIPS to connect to the HI Service for IHI and HPI-I lookups using a Medicare certificate issued to the CSP, instead of connecting with the Medicare certificate issued to each HPO.
		• CSP for PCEHR allows a CSP that operates HIPS to connect to the PCEHR system using a "NASH PKI Certificate for Supporting Organisations" issued to the CSP, instead of connecting with the "NASH PKI Certificate for Health Provider Organisations" issued to each HPO.
		Note: a CSP that does not have access to the NASH certificate for each HPO will not be able to upload documents to the PCEHR, because the HPO certificate is required for CDA packaging. Viewing the PCEHR is still possible in this scenario.
	SQL Server 2012 Compatibility and High Availability Disaster Recovery through SQL Always On	Modifications of all databases in the solution to upgrade all SQL scripts to ensure compatibility with Microsoft SQL Server 2012, whilst ensuring that all SQL scripts are still backward compatible with SQL Server 2008 R2. Ensuring that the eHISC server database solution is able to be implemented and supported in a Microsoft SQL Server 2012 Always On Cluster.
	Document Upload HPIO Validation	eHISC 1.0 added extra validation of a CDA document before uploading it. One of these steps was in error as the custodian does not need to have the same HPI-O as the uploading organisation, but the validation required it to be the same HPI-O.
		In lieu of validating the HPI-O directly with the HI Service, the resolution applied in this release is to allow the custodian HPI-O to be any of the HPI-O numbers registered within the same eHISC instance, as the validity of these numbers is checked by the eHISC system administrator during configuration.
	HealthProviderOrg anisationPatient Advertised Status Update Fix	A fix was applied for updates to the HealthProviderOrganisationPatient table to only update the PCEHR advertised or PCEHR disclosure status for a specific HPI-O against a specific Patient Master. In the previous version of eHISC all records for a singular, specific Patient Master in the HealthProviderOrganisationPatient table were updated regardless of the HPI-O being specified. This was restricted to records that were

Date	Version
	already existing in the HealthProviderOrganisationPatient table, which can be added via a positive check for a PCEHR status or a PCEHR disclosure, where the patient had flipped their PCEHR status to hidden in a hospital after previously having the PCEHR visible and then declaring the PCEHR at a subsequent visit.
15-04-2014	EP-1685:2014 eHealth Integration Sample Code (eHISC) v1.0
	Release note
	Release rationale:
	The eHealth Integration Sample Code comprises the source code and associated documentation for the Healthcare Identifier and PCEHR System (HIPS) software, developed by a third party vendor on behalf of a number of states and territories.

Publication date: 7 November 2016

Contact for enquiries

Telephone: 1300 901 001 or email: <u>help@digitalhealth.gov.au</u>

Disclaimer

The Australian Digital Health Agency ("the Agency") 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. The Agency 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.

Document control

This document is maintained in electronic form and is uncontrolled in printed form. It is the responsibility of the user to verify that this copy is the latest revision.

Copyright © 2016 Australian Digital Health Agency

This document contains information which is protected by copyright. All Rights Reserved. No part of this work may be reproduced or used in any form or by any means – graphic, electronic, or mechanical, including photocopying, recording, taping, or information storage and retrieval systems – without the permission of the Australian Digital Health Agency. All copies of this document must include the copyright and other information contained on this page.

Acknowledgements

Council of Australian Governments

The Australian Digital Health Agency is jointly funded by the Australian Government and all state and territory governments.