

## **Release Notification**

# Final Recommendations - Electronic Signatures Final

## Introduction

NEHTA is pleased to announce its Final Recommendations for Electronic Signatures on an initial set of clinical document types.

Following research and consultation with stakeholders in 2011, NEHTA's Electronic Signatures initiative reached national consensus on well-defined mechanisms for clinicians to apply personal electronic signatures to attest to the content of clinical documentation within an eHealth context.

#### Role

The purpose of this document is to present the agreed recommendations for the signing of clinical documents. The recommendations are intended to be used as a basis for the development of technical specifications, software systems, legislative instruments, and local policies.

## Scope

The recommendations apply to clinical documents where the sender and the receiver are in separate and independent healthcare organisations. Different risk profiles (e.g. associated senders and receivers) imply different approaches, which are discussed in detail.

The document contains specific recommendations for the following clinical document types:

- Prescriptions
- Dispense records
- Referrals
- Specialist letters
- · Diagnostic imaging requests and reports
- Discharge summaries.

## **Next Steps**

NEHTA has already built support for the recommendations into current technical specifications and will be moving to produce implementation guidance. NEHTA has also commenced work with Commonwealth, state and territory governments to facilitate regulatory approvals in support of the recommendations where appropriate.

NEHTA expects to expand the recommendations to cover other clinical document types as the eHealth programme evolves.

## **Feedback**

NEHTA welcomes feedback on the document, which can be emailed to <a href="Mieron.McGuire@nehta.gov.au">Kieron.McGuire@nehta.gov.au</a> as can any related questions. Priority areas for feedback include errors of omission or commission, and potential issues affecting patient outcomes or choice.