PCEHR Conformance Profile for Discharge Summary Clinical Documents

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Approved for external use

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Key information

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Version history

Version	Date	Comments
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 A
1.2	19 Mar 2012	See Change Log in Appendix A
1.3	17 May 2012	See Change Log in Appendix A
1.4	30 Jul 2012	See Change Log in Appendix A
1.5	9 Oct 2013	See Change Log in Appendix A

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1 Introduction

1.1 Purpose

This document summarises the requirements for Producers and Consumers of the Discharge Summary clinical document that connect to the national PCEHR system.

This document lists the specific conformance requirements for the Discharge Summary clinical document that are in addition to the *Common Conformance Profile for Clinical Documents* [NEHTA2013]. These documents represent the complete set of conformance requirements for the Discharge Summary clinical document.

1.2 Scope

The scope of this conformance profile is the use of Discharge Summary clinical documents in the context of the national PCEHR system.

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: help@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 document	A digital file containing personal health information about an individual, containing unstructured (narrative) information and optionally structured (atomic) information.
clinical information system	A system that deals with the collection, storage, retrieval, communication, and use of health related data, information and knowledge pertaining to subjects of care [AS5021]. The system may comprise one or more applications or components.
conformance	A measurement (by testing) of the adherence of an implementation to a specification or standard.
Consumer	In this document 'Consumer' refers to a software system that has the role of being a consumer of discharge summaries.
contracted service provider (CSP)	An entity that may offer health software as a service and support access to the PCEHR system on behalf of healthcare organisations. A CSP provides under a contract with the healthcare provider organisation: a) information technology services relating to the PCEHR system; or b) health information management services relating to the PCEHR system. (Section 5 *PCEHR Act 2012.*)
CSP system	A software system operated by a CSP that deals information and knowledge pertaining to subjects of care [AS5021]. The system may comprise one or more applications or components. A CSP system may perform some or all of the functions of a CIS.
healthcare consumer	A person who is the subject of care. (For the software system, see 'Consumer'.)
HL7	Health Level 7
MAY	When appearing in a conformance requirement, the verb **MAY** indicates an optional requirement.
PCEHR	personally controlled electronic health record.
producer	In this document 'Producer' refers to a software system that creates discharge summaries.
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 portal used by healthcare providers to access information on the PCEHR system.
registered repository	A third-party repository used to store clinical documents and other clinical data that connects to the PCEHR system. A repository may store clinical documents in a proprietary format or a CDA format.
SHALL	When appearing in a conformance requirement, the verb **SHALL** indicates a mandatory requirement. Its negative form **SHALL NOT** indicates a prohibition.
SHOULD	When appearing in a conformance requirement, the verb **SHOULD** indicates a recommendation. Its negative form **SHOULD NOT** indicates an option that is not recommended.

[1] Third-party refers to a software system developed independently of the national PCEHR system and intended to connect to the national PCEHR system. The portals provided the national PCEHR system are not registered consumer or registered provider portals.

3 Conformance requirements for Discharge Summary

3.1 Introduction

This section describes the conformance requirements specific to the Discharge Summary clinical document type.

Although Discharge Summary is designed for point-to-point communications, it is also possible to send a Discharge Summary to the national PCEHR system. These conformance requirements only apply when it is used in communication with the national PCEHR system.

3.2 Relevant specifications

The detailed conformance requirements are listed in Table 1.

Specification	Notes
Discharge Summary Structured Document Template [NEHTA2011]	Specifies the data elements and constrained values for a clinical document at a logical level.
Discharge Summary CDA Implementation Guide [NEHTA2012]	Specifies the mapping from the structured content specification into a clinical document using an HL7 CDA structure.

Table 1 Specifications for discharge summary

3.3 Conformance requirements for Producers

3.3.1 Objects of conformance

The objects of conformance requirements are subject to the following requirements:

1. Discharge Summary clinical documents **MAY** be produced by:
   - Clinical information systems; and
   - CSP systems.
2. Discharge Summary clinical documents **SHALL NOT** be produced by:
   - Registered repositories;
   - Registered consumer portals; or
   - Registered provider portals.

3.3.2 Conformance Levels

A Discharge Summary sent to the PCEHR system **SHALL** conform to the requirements for one, and only one, of the following conformance levels: 1A, 1B, 2, 3A or 3B, as defined in the *Common Conformance Profile for Clinical Documents* [NEHTA2013].

3.3.3 Temporary relaxation of inclusion of HPI-I

The *Discharge Summary Structured Document Template* [NEHTA2011] and the *Discharge Summary CDA Implementation Guide* [NEHTA2012] include mandatory conformance requirements for the inclusion of HPI-Is when producing a discharge summary. These specifications state the conformance requirement:

> *"The value of one Entity Identifier SHALL be an Australian HPI-I"*

This applies to the following data elements:

- Document Author > Participant > Entity Identifier;
- Event > Encounter > Responsible Health Professional at Time of Discharge > Participant > Entity Identifier;
- Health Profile > Healthcare Providers > Nominated Primary Healthcare Provider > Participant > Entity Identifier;
- Plan > Arranged Services > Protocol > Service Provider > Participant > Entity Identifier; and
- Plan > Record Of Recommendations And Information Provided > Recommendations Provided > Recommendation Recipient > Participant > Entity Identifier.

The *Discharge Summary CDA Implementation Guide* [NEHTA2012] states the following conformance requirement:

> *"If the Other Participant has an Australian HPI-I, then Entity Identifier is ESSENTIAL, otherwise it is OPTIONAL. If the Other Participant has an Australian HPI-I, then one value of Entity Identifier SHALL be an Australian HPI-I."*

This applies to the following data element:

- Other Participant > Participant > Entity Identifier.

However, the mandatory requirements for an HPI-I for these data elements are temporarily modified:

1. The value of one Document Author > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the document author and the value **SHALL NOT** be a NullFlavor.
2. The value of one Event > Encounter > Responsible Health Professional at Time of Discharge > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the responsible health professional at time of discharge, and the value **SHALL NOT** be a NullFlavor.
3. The value of one Health Profile > Healthcare Providers > Nominated Primary Healthcare Provider > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the nominated primary healthcare provider (person) and the value **SHALL NOT** be a NullFlavor.

4. The value of one Plan > Arranged Services > Protocol > Service Provider > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the service provider (person) and the value **SHALL NOT** be a NullFlavor.
5. The value of one Plan > Record Of Recommendations And Information Provided > Recommendations Provided > Recommendation Recipient > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the recommendation recipient (person) and the value **SHALL NOT** be a NullFlavor.
6. The value of one Other Participant > Participant > Entity Identifier **SHALL** be an HPI-I if one is present in the Discharge Summary Producer, otherwise it **SHALL** have a value that identifies the other participant and the value **SHALL NOT** be a NullFlavor.

Notes: a) The Common Conformance Profile for Clinical Documents *[NEHTA2013] provides requirements for the inclusion of a local identifier for a document author.*

b) The relaxation is only available to specific healthcare provider organisations, at the discretion of the PCEHR System Operator. The relaxation is provided to allow time for large healthcare provider organisations to incorporate HPI-Is for their personnel in their systems.

3.3.4 Separation Mode

Separation Mode is a concept descriptor with codeSystemName *AIHW Mode of Separation* and codeSystem 2.16.840.1.113883.13.65 [NEHTA2012].

The *Discharge Summary Structured Document Template* [NEHTA2011] lists separation mode values and descriptions. The description has been used as the display name for the corresponding value. A new set of display names is now provided that replaces the use of the displayName values in the Discharge Summary structured document template.

A Separation Mode code and displayName **SHALL** have one of the values in Table 2.

Code	displayName
1	Other Hospital
2	Aged Care Service
3	Psychiatric Care
4	Health Service
5	Administrative Discharge
6	Self-discharged
7	Administrative from Leave
8	Deceased
9	Other/Home

Table 2 Codes and displayNames for separation mode

3.4 Conformance requirements for Consumers

3.4.1 Objects of conformance

The objects of conformance requirements include:

1. Discharge Summary clinical documents **MAY** be consumed by:
    - Clinical information systems;
    - CSP systems;
    - Registered consumer portals;
    - Registered provider portals; and
    - Registered repositories.

Appendix A: Change log

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

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

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 1.1 (7 Mar 2012) to Version 1.2 (19 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 1.2 (19 Mar 2012) to Version 1.3 (17 May 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 1.3 (17 May 2012) to Version 1.4 (30 July 2012)

ID	Section	Change Detail	Rationale
1	3.1.3.4	Section added in this version.	The mandatory requirement to include HPI-Is for the discharge summary sender have been relaxed.

Changes from Version 1.4 (30 July 2012) to Version 1.5 (8 Oct 2013)

ID	Section	Change Detail	Rationale
1	3.3.4	Section added in this version.	New displayNames for Separation Mode are provided.
2		The digital signature requirement was removed	Digital signature requirements are now in the Common Conformance Profile for Clinical Documents
3	References	References were updated	

References

[AS5021] *AS 5021:2005 - The language of health concept representation*, Standards Australia, 2005.

[NEHTA2011] *Discharge Summary Structured Document Template*, Version 3.3, NEHTA, 2 Dec 2011, http://www.nehta.gov.au/implementation-resources/clinical-documents/EP-1152-2012/NEHTA-0965-2011

[NEHTA2012] *Discharge Summary CDA Implementation Guide*, NEHTA, Version 3.4, 7 Mar 2012, http://www.nehta.gov.au/implementation-resources/clinical-documents/EP-1152-2012/NEHTA-0960-2012

[NEHTA2013] *Common Conformance Profile for Clinical Documents*, Version 1.4, NEHTA, 2013, http://www.nehta.gov.au/implementation-resources/clinical-documents/EP-1094-2011/NEHTA-1446-2013