



**Requesting Individual Healthcare Identifiers
for Newborns**

**A Guide for Healthcare Provider Organisations
v1.0**

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1 Introduction

1.1 Purpose

This guide is for healthcare provider organisations who need to request the assignment of individual healthcare identifiers from the Healthcare Identifiers (HI) Service for newborns born under their care, using the *Create Verified IHI for Newborns* web service.

It covers principles relevant to individual healthcare identifiers for newborns, provides guidance for developing related organisational policies and processes, and provides details of associated workflows and business processes to ensure the service is used as intended.

This guide is intended to help organisations make effective use of the HI Service according to the National Safety and Quality Health Service Standards (see link in Section 1.5.2).

1.2 Audience

This guide is intended primarily for healthcare provider organisations, such as hospital maternity wards and birthing units, and for Aboriginal medical services that offer maternity services and are either currently registered for a Healthcare Provider Identifier – Organisation (HPI-O) or plan to register before invoking this service.

This guide is relevant for administrators of technical and personnel processes within such healthcare provider organisations, and for authorised employees using the HI Service for requests for verified IHIs for newborns.

1.3 Scope

This document provides guidance for a healthcare provider organisation implementing the *Create Verified IHI for Newborns* web service to request a verified IHI from the HI Service for newborns. It does not provide advice about technical implementation of the web service within the HI Service.

The guidance explains what should be included in an organisation's policies, but does not provide sample wording.

1.4 Terms used in this guide

This document uses the phrase *requesting an IHI* to mean requesting the creation (sometimes referred to as assignment) of an IHI using the *Create Verified IHI for Newborns*.

The words *newborn*, *baby* and *child* are all used, depending on the context. There is no deliberate distinction with these terms.

For an explanation of other terms, please refer to the Glossary on page 23.

1.5 Related documents

1.5.1 Technical documents

This document may be read in conjunction with the relevant design specifications, conformance, compliance and accreditation requirements, and vendor implementation advice.

The following documents are published by the Department of Human Services¹:

- Create Verified IHI for Newborns- Tech.SIS.HI.26
- Create Verified IHI for Newborns- Vendor Guide

The following documents are published by NEHTA²:

- *Use of Healthcare Identifiers in Health Software Systems - Conformance Requirements*
- *Use of Healthcare Identifiers in Health Software Systems - Business Use Cases*
- *Requesting Individual Healthcare Identifiers for Newborns: A Guide for Healthcare Provider Organisations* (this guide)

1.5.2 Standards and legislation

A number of standards relate to data quality and the accurate identification of patients in healthcare settings. These should be taken into account in the design and use of electronic health records in all healthcare settings.

Key Commonwealth legislation is also referenced below.

Australian Commission on Quality and Safety in Healthcare

The National Safety and Quality Health Service Standards

<http://www.safetyandquality.gov.au/wp-content/uploads/2011/09/NSQHS-Standards-Sept-2012.pdf>

Standards Australia

AS 5017-2006 Health Care Client Identification

<http://infostore.saiglobal.com/store/Details.aspx?DocN=AS675618737075>

Royal Australasian College of General Practitioners

Standards for general practices 4th edition

<http://www.racgp.org.au/your-practice/standards/standards4thedition/>

Relevant Commonwealth legislation

Healthcare Identifiers Act 2010

<http://www.comlaw.gov.au/Details/C2014C00096>

¹ Healthcare Identifiers Licenced Material is available from:

<http://www.medicareaustralia.gov.au/provider/vendors/healthcare-identifiers-developers/licensed-material/index.jsp>

² Available from: <http://www.nehta.gov.au/implementation-resources/national-infrastructure/EP-1826-2014>

Personally Controlled Electronic Health Records Act 2012

<http://www.comlaw.gov.au/Details/C2012A00063>

Privacy Act 1988 (Commonwealth)

<http://www.comlaw.gov.au/Details/C2014C00076>

See also advice on the Australian Privacy Principles from the Office of the Australian Information Commissioner

<http://www.oaic.gov.au/privacy/privacy-act/australian-privacy-principles>

1.6 Further details

The following table lists references for further details.

Topic	Refer to
For more information on your clinical information system	Your product vendor
Healthcare Identifiers Service	http://www.medicareaustralia.gov.au/provider/health-identifier/
Assisted registration	www.ehealth.gov.au

2 Background to the Healthcare Identifiers (HI) Service

2.1 Healthcare identifiers

The HI Service helps give individuals and healthcare providers confidence that the right health information is associated with the right individual at the point of care.

This is achieved through allocation of unique numbers (healthcare identifiers) to individuals and healthcare providers. These numbers can be added to paper and electronic medical information to clearly identify everyone involved in a patient's care, including the organisation that delivers the healthcare.

Every individual in Australia is eligible to be assigned an individual healthcare identifier (IHI), which is a unique 16-digit number. The HI Service Operator (Department of Human Services) is the custodian of healthcare identifiers and associated information, and manages their assignment under law.³ Healthcare identifiers have been created for use in healthcare settings to contribute to the safe, efficient and secure management of personal health information.

The HI Service allocates three types of healthcare identifiers:

- Individual Healthcare Identifier (IHI): allocated to all individuals enrolled with Medicare or those issued a Department of Veterans' Affairs (DVA) treatment card, and others seeking healthcare in Australia who request an IHI;
- Healthcare Provider Identifier – Individual (HPI-I): allocated to individual healthcare providers involved in providing patient care; and
- Healthcare Provider Identifier – Organisation (HPI-O): allocated to organisations that deliver healthcare (such as hospitals and medical practices).

2.2 The benefits of an IHI

Healthcare identifiers have been created to help make the management of an individual's health information more efficient and to give individuals and healthcare providers confidence in the health information associated with the individual receiving the care.

Using an IHI:

- Helps to ensure that the right health information is associated with the right individual at the point of care;
- Supports the reduction of adverse events and medical errors, and the potential costs associated with mis-identification of a consumer;
- Supports the communication and management of accurate health information; and
- Enables the creation of a personally controlled electronic health (eHealth) record for a consumer, as a verified IHI is a mandatory requirement of an eHealth record.

³ *Healthcare Identifiers Act 2010*

It is important to note that the HI Service does not allow random browsing of records, and a request to obtain an IHI by an authorised healthcare provider will only be successful when there is an exact match between the individual's information held by the HI Service and the individual's information provided by the healthcare provider. Every time an IHI is accessed via the HI Service, the details of who requested the IHI are recorded in the individual's IHI history, which is accessible via Medicare Online Services or at a Human Services Service Centre.

2.3 Understanding IHIs

The HI Service Operator is responsible for the management and assignment of healthcare identifiers under law. An eligible healthcare organisation can request the HI Service to assign a verified IHI for a newborn.

There are three types of IHIs managed by the HI Service and five different statuses. The three types are:

- **Verified IHI:** when an IHI has a verified status it means the Commonwealth Department of Human Services (DHS) has confirmed an individual's identity, including sighting documents such as a passport, birth certificate or receiving assertion of identity provided by a healthcare organisation. The allocation of a verified IHI is typically linked to enrolment in the Medicare program, but it is not necessary to be enrolled with Medicare to be assigned a verified IHI.
- **Unverified IHI:** when an IHI has an unverified status, it means a healthcare identifier was created for an individual at a healthcare facility, but the HI Service has not been provided with evidence or an assertion of identity from the healthcare facility.
- **Provisional IHI:** when an IHI has a provisional status, it means the identifier was created at a healthcare facility when an individual was unable to be identified. Provisional IHIs are temporary and expire after 90 days of no activity. A provisional IHI can be updated to an unverified IHI or merged with a verified IHI within existing clinical information systems.

It is important to note that while the HI Service has the capability to support assignment and searching of unverified and provisional IHIs, this functionality is not available for use by healthcare organisations until they have implemented business processes and policies to support the application of IHIs.

An IHI will have one of the following statuses:

- Active
- Deceased
- Retired
- Expired
- Resolved

The above types and statuses are explained in the Glossary on page 23.

2.4 Creating verified IHIs for newborns

Currently, an IHI is assigned to a child once they are enrolled in the Medicare program, based on the proof of birth asserted by a healthcare organisation at the time of birth. Due to the time period between birth and enrolment in the Medicare program, there is a need to allow the allocation of a verified IHI to newborns during this period. The *Create Verified IHI for Newborns* web service functionality allows a verified IHI to be created for a healthcare individual who is less than or equal to 14 calendar days of age at the time of processing.

In addition to promoting the use of IHIs to improve accurate identification of patients, the key rationale for this functionality is to promote the creation of an eHealth record as soon as possible after a child's birth. Having an eHealth record from birth will enable the child's health information to be collated at the earliest possible time and will enable healthcare providers to have access to more complete and timely health information, supporting better health management, particularly for children with medical conditions. Even for healthy children, information about their birth, immunisations and other clinically relevant information may be valuable to general practitioners and other healthcare providers involved in the care of both mother and child.

Importantly, this functionality leverages the formal role many healthcare organisations play in establishing proof of birth for newborns. The proof of birth information is required by DHS if parents apply for paid parental leave, family assistance or register for Medicare via the FA101 form.⁴

2.5 Collection, use and disclosure of IHIs

Using an IHI provides a way for healthcare providers to more accurately match the right records to the person they are treating and improve accuracy in patient identification when communicating with other healthcare providers.

Use and disclosure of IHIs is managed within the framework set out by the *Healthcare Identifiers Act 2010*. The Australian Privacy Principles under the *Privacy Act 1998* also applies to the use of IHIs as government issued identifiers. Other privacy legislation in each jurisdiction also applies to the treatment of personal information.

The way in which IHIs will be managed within the health service should be covered in the organisation's local policies and training.

⁴The FA101 *Newborn Child Claim for Paid Parental Leave, Family Assistance and Medicare* form is included in the Australian Government's Parent Pack provided to parents by the healthcare organisation at the time of birth.

3 Organisational prerequisites

This section outlines the technical and non-technical prerequisites for your organisation before it can request verified IHIs for newborns.

3.1 Non-technical prerequisites

To request an IHI for a newborn, your organisation:

- Must already be authorised by DHS to attest the identity of a newborn – that is, your organisation currently provides proof of birth in the Medicare FA101 form or the birth records for non-Medicare-eligible newborns. Examples include: maternity ward or birthing unit, an Aboriginal medical service providing maternity services or a general practice in a rural or remote setting;
- Must be registered as a healthcare provider organisation and have an active HPI-O with the HI Service. This will enable transactions to occur between your organisation and the HI Service and other eligible healthcare providers. For more information on obtaining an HPI-O, refer to the Healthcare Identifiers Service web page at <http://www.humanservices.gov.au/hiservice>;
- Must have identified and authorised the roles within the organisation that will be requesting the verified IHIs for newborns;
- Must have developed, or updated, organisational policies to cover the request of verified IHIs for newborns;
- Must have developed and delivered mandatory training to appropriate personnel on requesting IHIs for newborns. This may include training personnel responsible for creating or entering the source data that will be used in the request process. See sections 4 and 5 of this document for guidance on developing this training material;
- Must follow the business rules in section 4 of this document;
- Must ensure adherence to Australian Privacy Principles. See Section 1.5.2 for more details; and
- Must have a mechanism for notifying parents of:
 - their newborn's IHI number when it is created
 - any associated identifying information that is recorded by the HI Service Operator when creating the IHI.

3.2 Technical prerequisites

To request an IHI for a newborn, your organisation must:

- Have HI Service-conformant software that has incorporated the *Create Verified IHI for Newborns* web service. A list of conformant software is available from <http://www.nehta.gov.au/our-work/ehealth-register-of-conformity>); and
- Have a HI Service Public Key Infrastructure (PKI) Certificate installed within the software. More information about these certificates is available from Human Services (see <http://www.humanservices.gov.au/hiservice>).

3.3 Prerequisites for eHealth record system assisted registration

An organisation may also choose to offer eHealth record registration for newborns ('assisted registration') so that the Birth Record and other clinical information from the organisation can be uploaded to the newborn's record soon after birth. This will ensure the child has a more complete eHealth record.

There are additional technical and policy requirements if an organisation chooses to offer assisted registration. For more information, please refer to: *Assisted Registration: A Guide for Healthcare Provider Organisations* available at www.ehealth.gov.au.

4 Business rules

This section summarises the business rules that your organisation should follow when requesting a verified IHI for a newborn from the HI Service. This will protect the integrity of the HI Service, ensure its use is consistent across all organisations and their authorised employees, and ensure that other healthcare providers will be able to successfully retrieve those IHIs.

In order to request a verified IHI for a newborn, these business rules must be followed:

- 1 Your organisation already performs certification of proof of birth and has existing processes and policy in place to attest the identity of a newborn.
- 2 Your organisation must inform the parent that it intends to send the newborn's information to DHS (as the HI Service Operator) in order to request an IHI for the newborn. This information may be part of the admission consent form. You must give the parent the opportunity to indicate that they do not wish this to occur. You should let the parent know that if an IHI is not created now, it will be created as part of their child's enrolment in Medicare.
- 3 The request for an IHI to be created for a newborn must be sent within 14 days from birth. This is the maximum timeframe although an organisation may choose to implement a shorter timeframe.
- 4 Verified IHIs cannot be requested or assigned before birth.
- 5 The verified IHI for a newborn must be requested by a specifically authorised employee.
- 6 The newborn must have a unique record in your organisation's local system. If the newborn's details are captured solely within the mother's record, it is not possible to request a verified IHI for that newborn.
- 7 Demographic details of the newborn must be unique. A verified IHI record will not be created by the HI Service if the details exactly match another verified or unverified IHI record. The HI Service will use the following fields before assigning a verified IHI to mitigate the risk of creating a duplicate IHI number and record:
 - Family Name (Preferred Name)
 - Given Name (Preferred Name)
 - Sex
 - Date of Birth
 - Address⁵
 - Birth plurality/order⁶ (if applicable)
- 8 The successful creation of a verified IHI by the HI Service Operator will result in the IHI number, IHI type and IHI status being returned to the requesting organisation's local system.
- 9 The organisation must record the IHI on the last page of the FA101 form (if the person is eligible for Medicare enrolment). **This is an important record to protect data quality and avoid creation of duplicates in the HI Service.**
- 10 The organisation must provide the parent with information about the verified IHI, including the demographic details used in the request.

⁵ Address can be a Postal Address File (PAF) or semi-structured address.

⁶ This information is collected but not used in the uniqueness check.

5 Organisational policies and training

Your organisation should develop and maintain written policies and procedures for requests to have verified IHIs assigned to newborns. This will ensure that all employees involved in the process adopt a consistent approach and are aware of and apply the correct procedures. This may be an extension of existing policies on data quality, authorisations and workflows. The policies should be reviewed annually and kept up to date.

The relevant policies should be accessible and used in your organisation's training.

The policy should address the following points as part of best practice. If a relevant policy already exists, these words should augment those in the original policy.

1 Under what circumstances your organisation will request a verified IHI for a newborn

If a newborn is transferred between facilities, the organisation usually responsible for attesting the proof of birth of the newborn will request the assignment of the verified IHI for the newborn. If the newborn has been transferred following the creation of the IHI, the IHI must be recorded in the transfer papers and on the patient identification.

In case of home births, existing procedures should be followed for the certification of the birth and attestation of proof of birth for the child. The organisation responsible for this may request the assignment of the verified IHI for the newborn.

2 How your organisation will authorise its employees to request an IHI for a newborn

An organisation registered with the HI Service may have employees who have been authorised to search for and retrieve IHIs from the HI Service (authorised employees). The policy will describe how and which staff members will be selected and authorised to request an IHI for a newborn and other access controls such as passwords. It will also state who is responsible for this selection and authorisation and how these authorisations will be recorded. The roles and responsibilities related to this function should reflect what is contained in your local policy.⁷

3 How your organisation will verify the identity of individuals and newborns when using the HI Service

The information used to create an IHI is based on the information captured in the local system. The quality of that information is paramount to the creation of a meaningful IHI. It is expected that your organisation will have robust and appropriate information quality protocols or work practices for collecting and recording information in the local system, according to the National Safety and Quality Health Services Standards.

The maximum time your organisation has to request an IHI is 14 days after birth; however, it is recommended that a newborn in your organisation's care

⁷ For more information about the roles and responsibilities of users of the HI Service see: <http://www.humanservices.gov.au/hiservice>

has their IHI assigned to them as soon as possible post-birth. The information required for newborns is the same as that required for other patients, namely:

- Family name
- Given name (if available) or variant (e.g. Twin 1 of)
- Date of birth
- Sex
- Address⁸ (to match with mother or primary carer)
- Birth plurality/order (if applicable).

The following additional information is recommended to be recorded in your organisation's local system for newborns:

- Full name of mother (or primary carer)
- Mother's medical record number
- Full name of father.

4 How to request a verified IHI for a newborn

Your organisation will need to have conformant software to access and use this web service. Authorised personnel must be fully trained in accessing and storing IHIs in the clinical information system before they can make any requests to the HI Service for the creation of a newborn's IHI.

When submitting a request to the HI Service for a verified IHI, an authorised employee will need to submit the data fields listed below:

- Family name (mandatory)
- Date of birth (mandatory)
- Sex (mandatory)
- Given name (mandatory if multiple birth, in which case a name or a value is required)
- Address⁸ (mandatory)
- Birth plurality/order for multiple births (mandatory)

The family name, date of birth, sex and address are mandatory when requesting an IHI. Specific values for the given name need to be used for unnamed and multiple birth scenarios, and should be in accordance with Australian Standard *AS 5017-2006 Health Care Client Identification*.

5 The naming nomenclature for single births

It is also recommended that the policy outlines the naming conventions for newborns who do not have a first name allocated at the time of birth, as is often the case. The HI Service uses AS-5017-2006 (Section 3.2.4) for this purpose. For example, an unnamed baby is registered using the mother's given name in conjunction with the prefix 'Baby of' (for example, 'Baby of Emma') in the (Registered) Given Name field for the baby. This name is recorded under the Newborn Name Usage. If a name is subsequently given, record the new name as the Registered Given Name and retain the newborn name.

When parents have different family names, it is recommended to use the mother's family name as the baby's family name, unless instructed otherwise

⁸ Address can be a Postal Address File (PAF) or semi-structured address.

by the mother. This is consistent with AS-5017-2006 (Section 3.2.3 Family Name).

6 The naming nomenclature for multiple births

When registering multiple births, each unnamed baby from a multiple birth should use their mother's name plus reference to the multiple births. For example, if the baby's mother's given name is 'Emma' and a set of twins is to be registered, then record 'Twin 1 of Emma' in the Given Name field for the first-born baby, and 'Twin 2 of Emma' in the Given Name field of the second-born baby. Where systems do not support numerical entries, it should be written in full (i.e. 'Twin one of Emma'). Roman numerals should not be used. In the case of triplets or other multiple births, the same logic applies. The following terms should be used for recording multiple births:

- Twin: Use Twin i.e. Twin 1 of Emma
- Triplet: Use Trip i.e. Trip 1 of Emma
- Quadruplet: Use Quad i.e. Quad 1 of Emma
- Quintuplet: Use Quin i.e. Quin 1 of Emma
- Sextuplet: Use Sext i.e. Sext 1 of Emma
- Septuplet: Use Sept i.e. Sept 1 of Emma.

These names should be recorded in your local system under the Newborn Name Usage. When the babies are named, the actual names should be recorded as the Registered Name.

7 How to request the assignment of an IHI in cases of multiple births

In the case of multiple births, the birth plurality must be indicated as well as the birth order for each individual request to create a verified IHI for a newborn. The birth plurality is an indicator of multiple births showing the total number of births resulting from a single pregnancy. The birth order is the sequential order of each baby of a multiple birth, regardless of whether the baby lives or is a still birth.

8 The naming nomenclature for Aboriginal/Torres Strait Islander peoples

For cultural reasons, an Aboriginal or Torres Strait Islander may advise an organisation that they are no longer using the given name that they had previously registered and are now using an alternative current name. Record their current name as the Registered Given Name and record their previous used given name as an Other Name.

9 How to update an incorrectly documented name

If the healthcare individual's given name has been misspelled in error in your local clinical information system, update the Given Name field with the correct spelling and record the misspelled given name according to local policies and procedures. Recording misspelled names is important for filing documents that may be issued with previous versions of the client's name. Discretion should be used regarding the degree of recording that is maintained.

If the healthcare individual's name is misspelled in error in the HI Service, then the parent will have to update it by visiting a Human Services Service Centre.

This may assist with the update and verification of the newborn's name at a later stage by an authorised individual and with the resolution of any duplicate IHIs.

10 How a newborn can be registered for an IHI if your organisation's request for an IHI was unsuccessful

If your request for an IHI is unsuccessful, the parent can register the newborn with the HI Service by visiting a Human Services Service Centre. A parent or carer who wishes to apply for an IHI for themselves can do this at the same time or they can submit the *Healthcare Identifiers Service – Application to create, verify or merge an Individual Healthcare Identifier form (2888)*, which is available at www.humanservices.gov.au/customer/forms/2888. If the parent is already registered for Medicare, they will already have an IHI. An IHI is necessary for the parent to register themselves or their child for an eHealth record.

11 How to request an IHI from the HI Service when the baby is stillborn

An IHI may be requested for a stillborn baby, with the inclusion of date of death and related information. Your organisation should use discretion when deciding whether to request an IHI for a stillbirth.

For requirements on registration and identification of stillborn babies, follow existing local identification policies for when a baby dies in utero or dies immediately following delivery (within 14 days).

12 How the creation of an IHI can facilitate the creation of an eHealth record through assisted registration

The policy should outline under what circumstances your organisation will offer to use assisted registration to register the baby (and possibly parent) for an eHealth record. In order to register their newborn for an eHealth record, the parent and newborn must both have a verified IHI and be identified by an authorised employee.

The creation of an IHI for a newborn may be coupled with the registration of an eHealth record (through assisted registration) if the newborn's identity is verified and their parent has a verified IHI and consent is given. Requesting the creation of a verified IHI for a newborn can allow an eHealth record to be created and populated for the newborn from the time of birth, including the Birth Record. Once the IHI has been created, it should be included in the proof of birth page at the back of the FA101 form for the family to submit to DHS (if eligible).

Having an eHealth record from birth will result in the most comprehensive clinical record in the eHealth record, and allow parents to use the Child Development component of the eHealth record to record health information as the child grows.

For more information, please refer to: *Assisted Registration: A Guide for Healthcare Provider Organisations* which is available on ehealth.gov.au.

13 What training should be provided to staff

It is recommended that your organisation has a policy in place to train staff on requesting an IHI for newborns, including who is responsible for delivering the training and how it will be provided. Training should cover the following as part of best practice:

- Verifying newborn proof of birth and identifying processes;
- The process of requesting an IHI for newborns using your organisation's local system;

- Providing information on the HI Service to individuals;
- Business rules to reduce the creation of replica⁹ or duplicate IHIs;
- Processes in place to address any error during the request to create an IHI, and how authorised employees obtain support from their software vendor or the HI Service.¹⁰ These may reflect existing processes and policies for error handling;
- How to use assisted registration to register a newborn for an eHealth record (if applicable);
- Obligations under legislation, including the Australian Privacy Principles.

14 Parents without Medicare registration

If a parent is not Medicare eligible, the child can still be allocated an IHI.

All healthcare recipients in Australia, including non-Medicare customers, may be allocated, or apply for, an IHI. All Medicare or DVA enrolled individuals have an IHI automatically allocated, but Medicare or DVA registration is not a prerequisite for an IHI.

In order to register a child for an eHealth record, the parent must also have an IHI. In order to use assisted registration to register a child, the organisation must use the demographic information of both parent and child that is consistent with records in the HI Service.

A parent may apply for an IHI for themselves or their child(ren) at a Human Services Service Centre by submitting the *Healthcare Identifiers Service – Application to create, verify or merge an Individual Healthcare Identifier form (2888)* which is available at www.humanservices.gov.au/customer/forms/2888. This will enable the parent to register themselves or their child (or both) for an eHealth record.

15 Communication with parents

It is recommended that your organisation provides information to the parents on the importance of the IHI, including the identifier itself, in hard copy or electronic form. This is particularly important for multiple births and when the parents may not be eligible for Medicare. It is particularly important that parents in these situations are aware that the IHI may be used as an additional identifier for their child. They should be aware of the demographic information that has been used to create the IHI (including no given name if the child does not yet have a first name) and, if possible, a record of the identifier itself, in case of presentation to another healthcare facility.

It is your organisation's responsibility, under the Australian Privacy Principles, to inform parents what the collected information is being used for and to obtain the parents' consent for the information to be used to request an IHI.

⁹ See glossary entry for more details.

¹⁰ Healthcare providers can call the HI Service on 1300 361 457 (call charges apply) during business hours.

6 Making the request

Appropriate members of staff should be identified to provide assistance, if needed, with any requests for IHIs, and to contact other organisations, including DHS, if necessary.

To request an IHI for a newborn:

- 1 Ensure that all details in the local record are correct and consistent with your organisation's naming conventions for newborns. This should align with *AS 5017-2006 Health Care Client Identification*.
- 2 Ensure that the details entered match those on the last page of the FA101 form.
- 3 Ensure that the following fields are all complete before sending the request (some or all of these may be prepopulated, depending on your software):
 - Family name (mandatory)
 - Given name (conditional but mandatory for multiple births and unnamed babies)
 - Date of birth (mandatory)
 - Sex (mandatory)
 - Address¹¹ (mandatory)
 - Birth plurality/order for multiple births (mandatory)

Organisations have a responsibility to ensure that the information is accurate so that the child's eHealth record (if created) can be shared with clinicians who may have to care for the child post-discharge.

It is recommended that the naming of all patients, including newborns, align with Australian Standard *AS 5017-2006 Health Care Client Identification*. After two years of the web service being in operation, this standard may become mandatory.

If the request is successful, the HI Service Operator will return the IHI number, IHI type (active, deactivated, retired) and IHI status (verified) to the requesting organisation.

Refer to the workflow in Appendix A for more details of this process.

¹¹ Address can be a Postal Address File (PAF) or semi-structured address.

Appendix A Organisational readiness checklist and workflow

A.1 Checklist

Read each item below to see if your organisation is ready for requesting IHIs for newborns.

Eligibility and assignment

Your organisation must be registered as a healthcare provider organisation with the HI Service. For more information on obtaining an HPI-O, refer to the Healthcare Identifiers Service <http://www.humanservices.gov.au/hiservice>

To be able to undertake assisted registration for an eHealth record, you must be registered to participate in the personally controlled electronic health (eHealth) record system, and have the Assisted Registration Tool or compliant software. For more information, refer to *Participating in the personally controlled electronic health record system: a registration guide for Healthcare Provider Organisations*, available at www.ehealth.gov.au or call the helpline on 1800 723 471.

Software and digital certificates

Your organisation must have compliant clinical desktop software and certificates that will support the request for verified IHIs for newborns.

Policies

Your organisation should have in place a written policy to support:

- the request for verified IHIs for newborns. It is recommended that your organisation has a policy in place outlining which staff are authorised to request an IHI, how verification of information will occur, and training that will be provided to authorised staff; and
- processes for transferring the IHI to the FA101 form and into the local clinical information system in a way that minimises transcription errors.

Forms and identification

Your organisation should have the following forms available:

- Birth Registration form;
- FA101 *Newborn Child Claim for Paid Parental Leave, Family Assistance and Medicare* form;
- *Assisted Registration: Application to Register for a Personally Controlled Electronic Health Record – Child* (if applicable).

Resources and training

Resources and training should include:

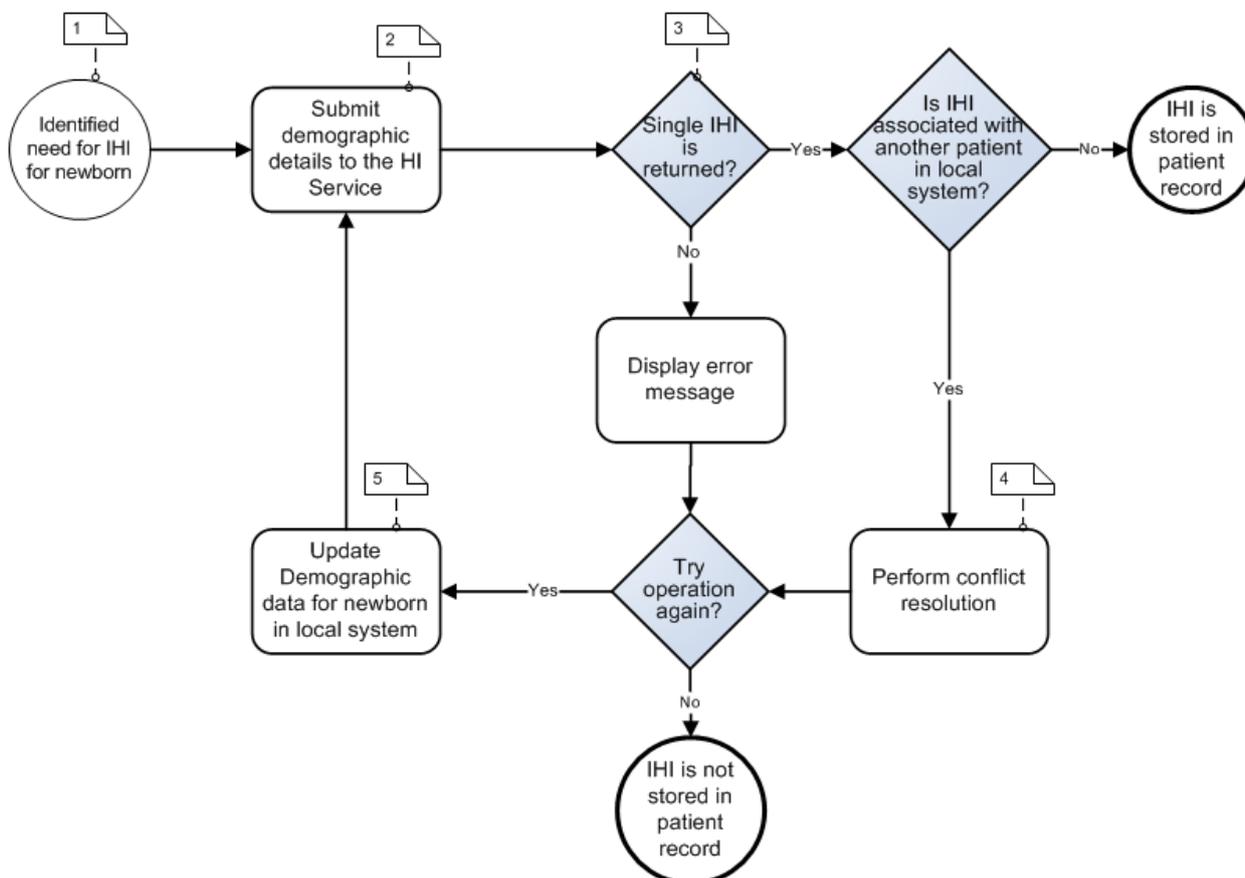
- Using the HI Service via your clinical information system;

- The process of requesting an IHI for newborns;
- Processes to ensure that reasonable care is taken when attesting identification;
- Business rules to reduce the creation of replica or duplicate IHIs;
- Providing information to individuals on the use of IHIs;
- Providing assisted registration to register a newborn for a personally controlled eHealth record.

If you have completed each of the items described above and you understand your organisation's role and obligations, you are ready to begin requesting IHIs for newborns.

A.2 Workflow

The diagram below shows the workflow between your organisation, your clinical information system and the HI Service.



Notes

- 1 This event may be triggered by the creation of a newborn patient record, the updating of an existing newborn patient record, or another event such as the generation of a discharge summary at the time of the baby's discharge.
- 2 The *Create verified IHI for newborn* web service will be invoked with mandatory and optional parameters as defined by *Create Verified IHI for Newborns-*

Tech.SIS.HI.26. Depending on the implementation, this may instead be invoked during a 'update' event or a 'create' event.

- 3 An IHI will not be returned if the baby is older than 14 days old or if the demographic data provided conflicts with existing demographic data in the HI Service.
- 4 Conflict resolution may include:
 - Contacting a Medicare Service Officer;
 - Making an entry in an exception queue; or
 - Performing other data matching or cleansing exercises.
- 5 Adding additional demographic detail to a patient record will increase the likelihood of creating an IHI with unique demographic details.

Glossary

Term	Definition and use
active IHI number status	An IHI has an active status when it does not have a date of death on the record and the number status is not expired, retired, resolved or deceased.
authorised employee	An employee of a healthcare organisation, authorised by that organisation to act on behalf of the healthcare provider. An authorised employee may be a contracted employee, or performing services to the organisation free of charge.
clinical information system	Clinical IT system, accessible via clinical desktop software, for recording and disseminating information on the treatment and care of patients.
deceased IHI number status	A deceased IHI status is an indication that the HI Service Operator has been advised that the individual is deceased. An IHI has a deceased status when there is a date of death present on the record and age is not greater than 130 years and has not yet been matched to the fact of death data from Births, Deaths and Marriages.
duplicate IHI	When a patient has been assigned multiple IHIs, the IHIs are referred to as duplicates.
expired IHI number status	The expired status indicates that a record is no longer active. An IHI has an expired status if it is provisional and there has been no activity on the record for 90 days or if it is unverified and has reached an age of 130 years.
family name	The part of a name a person usually has in common with some other members of his or her family, as distinguished from his or her given names. Surname and last name are synonyms of family name.
given name	A person's identifying name(s) within the family group or by which the person is uniquely socially identified. First name and forename are synonyms of given name.
healthcare identifier	An identifier assigned to a healthcare provider or a healthcare recipient as defined in the Healthcare Identifiers Act.
IHI number status	The IHI number status may be active, deceased, retired, expired or resolved. This attribute of the IHI is referred to as 'IHI status' in the system interface specifications published by the HI Service Operator, Department of Human Services.
IHI record status	The status of the record in the HI Service of an individual healthcare recipient. The IHI record status may be provisional, unverified or verified.
local system	Health Provider's IT system for recording and disseminating information on the treatment and care of patients.

parent	The term 'parent/s' includes caregivers for the child.
provisional IHI	When an IHI is provisional it means the identifier was created at a healthcare organisation when the healthcare recipient was not able to be identified.
replica IHI	<p>One IHI assigned to two or more patient records in the health software system. This represents an error condition requiring active management.</p> <p>This definition is 'replica IHI' is the same definition used by the HI Service.</p> <p>For the purpose of this document, a replica IHI is not a duplicate IHI.</p>
resolved IHI number status	An IHI is resolved when it has been linked with another record as part of resolving a provisional record or resolving a duplicate record, end dated as part of the duplicate or replica resolution process.
retired IHI number status	An IHI has a retired status when there is a date of death present on the record and either it has been matched with Fact of Death Data and has had no activity for 90 days or reached an age of 130 years.
unverified IHI	When an IHI record is unverified it means the identifier was created by a healthcare organisation and the healthcare individual has not contacted The Department of Human Services to verify the IHI by providing Evidence of Identity.
verified IHI	When an IHI record is verified it means the person is a known customer of Medicare Australia or the Department of Veterans' Affairs or has provided Evidence of Identity information that has been recorded in the HI Service to establish the identity of the healthcare individual. For newborns, an IHI record being verified means the healthcare organisation has asserted the proof of birth process.
