



**Clinical Information Systems Connecting to  
the PCEHR System**

**Conformance Requirements  
Assisted Registration Amendment v1.1**

7 August 2015

Approved for external use

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# Document information

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## Product version history

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Amendment number	Date	Comments
1	7 March 2013	Amendment to <i>Clinical Information Systems Connecting to the PCEHR System Conformance Requirements</i> Version 1.5 for assisted registration of an adult and child.
2	7 August 2015	Updated amendment regarding assisted registration of an eHealth record for an adult, child or newborn.

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# 1 Introduction

## 1.1 Purpose

This document lists amendments to the *Clinical Information Systems Connecting to the PCEHR System Conformance Requirements* Version 1.5 (published 6 September 2012)<sup>1</sup>, to cover assisted registration of an eHealth Record for an adult, child and newborn.

This document is an update to the amendment published on 7 March 2013.

## 1.2 Related documents

The following related documents are available from [www.nehta.gov.au](http://www.nehta.gov.au)

- *Clinical Information Systems connecting the PCEHR System – Use Cases v1.1*, 6 September 2012.<sup>2</sup>
- *Clinical Information Systems Connecting to the PCEHR System – Use Cases Assisted Registration Amendment v1.1*, August 2015.

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<sup>1</sup> Available from [www.nehta.gov.au](http://www.nehta.gov.au) on this link: [PCEHR Connecting Systems - Conformance Requirements v1.5](#)

<sup>2</sup> Available from [www.nehta.gov.au](http://www.nehta.gov.au) on this link: [PCEHR Connecting Systems - Use Cases v1.1](#)

## 2 Amendments in section 2

*For ease of reference, the original section numbers have been repeated here, including sections that have no changes.*

### 2.1 Background

No changes.

### 2.2 Scope

Add the following before the paragraph starting with “The conformance requirements in this document” in Section 2.2:

The conformance requirements dealing with assisted registration are only relevant to assisted registration of an eHealth record for adults, children, and newborns and do not cover bulk registration for lead sites.

### 2.3 Glossary

Add a new column to the right-hand side of the table in Section 2.3 with the heading: Previously known term

Add the following entries to the table in Section 2.3:

Adult	In the context of this document an adult refers to a person 14 years or older.
Assisted Registration	Assisted registration means the process, in accordance with subrule 5(2), in which a registered healthcare provider organisation assists a consumer to apply to register for a PCEHR [HEALTH2015].
Assisted Registration Form	Refers to a paper form that has to be completed by the healthcare recipient or authorised representative before an authorised employee can assist with registering the person for a PCEHR record.
Australian Childhood Immunisation Register	The Australian Childhood Immunisation Register (ACIR) is a national register administered by the Department of Human Services that records details of vaccinations given to children under seven years of age who live in Australia.
Australian Organ Donor Register	The Australian Organ Donor Register (AODR) is the only national register for organ and/or tissue donation for transplantation. It is administered by the Department of Human Services. The AODR keeps a record of an individual’s stated decision with regard to organ and tissue donation.
Authorised Employee	An employee of a healthcare organisation who is authorised by that organisation for the purpose of assisting with eHealth record registration.

Child	In the context of this document, a child refers to a person that is younger than 14 years old and has had, or in the process of getting, a PCEHR established by an authorised representative.
Department of Health	The Commonwealth Department of Health has a diverse set of responsibilities and aims to deliver better healthcare services for all Australians including the eHealth record system.
Healthcare Identifiers Service	The Healthcare Identifiers (HI) Service enables unique identifiers to be created for individuals and healthcare providers across the Australian health system – see IHI, HPI-I and HPI-O.
Healthcare organisation	A healthcare organisation is an entity, or a part of an entity, that has conducted, conducts, or will conduct, an enterprise that provides healthcare (including healthcare provided free of charge). An example of a healthcare organisation is a public hospital or a corporation that runs a medical centre.
Healthcare professional	A healthcare professional is a person who is involved in or associated with healthcare delivery. For the purposes of the eHealth record system a healthcare professional is a person who has a HPI-I and is authorised by a registered healthcare organisation to access the eHealth record system on their behalf.
Healthcare Provider Identifier - individual	The Healthcare Provider Identifier for individuals (HPI-I) is a 16-digit unique number used to identify individual healthcare professionals who deliver healthcare in the Australian healthcare setting. HPI-I
Healthcare Provider Identifier - Organisations	The Healthcare Provider Identifier for Organisations (HPI-O) is a 16 digit unique number used to identify organisations who deliver healthcare in the Australian healthcare setting. HPI-O
HI Service	Healthcare Identifiers Service
Identity verification code	The identify verification code is a code generated during the consumer registration process. The IVC proves that their identity has been verified by the eHealth record system. The IVC is used to access the individual's eHealth record online for first time.
Medicare Benefits Schedule	The Medicare Benefits Schedule (MBS) is a listing of the healthcare services subsidised by the Australian government under the <i>Health Insurance Act 1973</i> . The MBS is part of the wider Medicare Benefits Scheme managed by the Department of Health and Ageing and administered by Department of Human Services.
Parental declaration	A declaration made by an adult having parental responsibility.

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Parental responsibility	<p>Parental responsibility means:</p> <ul style="list-style-type: none"> <li>• The adult is the child’s parent (including a person who is presumed to be the parent because of a presumption (other than in section 69Q) in Subdivision D of Division 12 of Part VII of the <i>Family Law Act 1975</i>) and the adult has not ceased having parental responsibility because of an order made under the <i>Family Law Act 1975</i> or a law of a state or territory; or</li> <li>• The adult is subject to a parenting order within the <i>Family Law Act 1975</i> which provides that the child is to live with the adult, the child is to spend time with the adult, or the adult is responsible for the child’s long-term or day-to-day care, welfare and development; or</li> <li>• The adult is entitled to guardianship or custody of or access to the child under a law of the Commonwealth, a state or a territory.</li> </ul>
Pharmaceutical Benefits Scheme	<p>The Pharmaceutical Benefits Scheme (PBS) is a program for providing pharmaceutical benefits to eligible Australians under the <i>National Health Act 1953</i>.</p>
System Operator	<p>The System Operator of the eHealth record system is the person with responsibility for establishing and operating the eHealth record system. The System Operator is the Secretary of the Department of Health and Ageing.</p>

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Replace existing terms in Section 2.3 with the following:

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Authorised representative	<p>An authorised representative is a person empowered under a law of the Commonwealth, a state or territory or otherwise deemed an appropriate person by the System Operator to act on behalf of an individual.</p>
Consumer	<p>A consumer is an individual who has received, receives or may receive healthcare in Australia. The preference is that all consumer-facing material relating to the eHealth record system uses the term ‘individual’ or ‘patient’ instead of ‘consumer’.</p>

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## 2.4 Acronyms and abbreviations

Add a new column to the right-hand side of the table in Section 2.4 with the heading: Previously known term

Add the following to the table in Section 2.4:

ACIR	Australian Childhood Immunisation Register
AODR	Australian Organ Donor Register
CIS	Clinical Information System
IVC	Identity verification code
MBS	Medicare Benefits Schedule
MIME	Multipurpose Internet Mail Extensions
PBS	Pharmaceutical Benefits Scheme

Replace existing acronyms/abbreviations with the following in Section 2.4:

eHealth record	<p>An eHealth record of an individual means the record of information that is created and maintained by the System Operator in relation to the individual, and information that can be obtained by means of that record, including the following:</p> <ul style="list-style-type: none"> <li>• information included in the entry in the Register that relates to the individual;</li> <li>• health information connected in the eHealth record system to the individual;</li> <li>• other information connected in the eHealth record system to the individual, such as information relating to auditing access to the record; and</li> <li>• back-up records of such information.</li> </ul>	PCEHR
eHealth Record System	<p>The eHealth record system is a system that:</p> <ul style="list-style-type: none"> <li>• is for the collection, use and disclosure of information from many sources using telecommunication services and by other means, and the holding of that information, in accordance with individuals' wishes or in circumstances specified in the PCEHR Act;</li> <li>• is for the assembly of that information using telecommunication services and by other means so far as it is relevant to a particular individual, so that it can be made available, in accordance with the individual's wishes or in circumstances specified in the PCEHR Act, to facilitate the provision of healthcare to the consumer or for purposes specified in the PCEHR Act; and</li> <li>• involves the performance of functions under the PCEHR Act by the System Operator.</li> </ul> <p>The eHealth record system was launched on 1 July 2012 and provides a way of managing health information online that will make it more accessible</p>	PCEHR System

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to Australians who choose to sign up with the system, and their chosen healthcare providers.

The eHealth record system is supported by a legislative framework consisting of the *Personally Controlled Electronic Health Records Act 2012*, *Healthcare Identifiers Act 2010*, *Personally Controlled Electronic Health Records Regulation 2012*, *Healthcare Identifiers Regulations 2010* and *PCEHR Rules*.

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## 2.5 Achievement of conformance

No changes.

## 2.6 Conformance to the PCEHR B2B Gateway Service

Add the following to Table 1 in Section 2.6:

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Registration Service	registerPCEHR	V2.0.0
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## 2.7 Contracted service providers

No changes.

## 3 Amendments in section 3

Add the following to the end of Table 2 in Section 3:

UC.CIS.501	Assisted PCEHR registration of an adult	020204, 020205, 020206, 020207, 020208, 020219, 020240, 020304, 020834	020209, 020218, 020327, 020328, 020835	None
UC.CIS.502	Assisted PCEHR registration of a child	020204, 020205, 020206, 020207, 020208, 020219, 020220, 020240, 020241, 020304, 020834, 26710	020209, 020218, 020327, 020328, 020835	None

### 3.1 Mandatory requirements

Add the following new requirements to Section 3.1:

Req No	020204	Priority	Mandatory
<b>Assisted registration audit trail</b>			
The clinical information system <b>shall</b> maintain an audit log of every successful registration. Each entry in the audit log <b>shall</b> contain at least the following information:			
<ul style="list-style-type: none"> <li>• Authorised employee’s unique local system identifier (including HPI-I and full name, if available);</li> <li>• Consumer’s IHI or Medicare number or DVA number or demographics that include the full name, date of birth and sex;</li> <li>• Authorised representative’s IHI or Medicare number or DVA number or demographics that include the full name, date of birth and sex (if applicable);</li> <li>• Date (and time if available) of the assisted registration request.</li> </ul>			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	<p>The intent of this requirement is to promote accountability and provide evidence in case of complaints or disputes over the registration of an eHealth record, or information supplied during registration, leading to the healthcare organisation being vulnerable due to the lack of evidence of the registration operation.</p> <p>Local auditing of significant transactions is considered good software practice, and is important from a legal perspective. The requirement does not mandate audit logs to capture unsuccessful registration attempts; this decision is up to organisation policy makers.</p>		

Req No	020205	Priority	Mandatory
<b>Preventing Identity Verification Codes (IVC) from being cached</b>			
The Clinical Information System <b>shall not</b> cache or store the IVC returned from the eHealth record system, except for auditing purposes. If IVC codes are stored for auditing purposes, they <b>shall</b> be encrypted or masked.			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	<p>As the IVC can be used to access the consumer's eHealth record, it is important that there are strict controls on the handling of IVCs, where a consumer or authorised representative opts to have their IVC sent to the user and where the user generates a paper copy of the IVC.</p> <p>This is intended to mitigate the privacy risk faced by consumers where an unauthorised individual gains access to a consumer's eHealth record by using an IVC previously supplied to the healthcare organisation.</p> <p>In addition, healthcare organisations should ensure they are taking steps to ensure there is a strong framework in place to prevent loss, misuse and unauthorised access to a consumer's eHealth record via the consumer's IVC.</p> <p>Where the consumer has elected to receive their IVC through the healthcare organisation, the authorised employee could print this out for the consumer along with instructions on how the consumer can access their eHealth record online (these instructions will be provided by the System Operator).</p> <p>This requirement is derived from the recommendation 4.25 in the PCEHR Privacy Impact Assessment Report [PIA2011], dealing with the risk of storing access codes.</p> <p>Applying the registerPCEHR service precedes this requirement.</p>		
Req No	020206	Priority	Mandatory
<b>Assisted Registration response handling</b>			
The clinical information system <b>shall</b> clearly indicate to the user the outcome of the registration attempt, based on the response received from the eHealth record system, so the consumer can be notified. When the outcome is that the registration attempt failed, information <b>shall</b> be provided to the user so they know the reason for the failure.			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	<p>The intent of this requirement is to reduce the risk of hindering the uptake of eHealth in the community. This is achieved by ensuring that any response from the eHealth record system is communicated to the CIS user so that appropriate action can be taken to allow the consumer to be registered for an eHealth record.</p> <p>The message presented to the user is to be comprehensible to both the user and consumer or authorised representative, allowing them to rectify the issue. It is important that the user communicates the outcome to the consumer.</p> <p>Refer to the PCEHR Registration Service Technical Service Specification [NEHTA2015a] for a list of possible responses.</p> <p>This requirement applies after invoking the registerPCEHR service.</p>		

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<b>Req No</b>	020207	<b>Priority</b>	Mandatory
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**Recording consent for assimilation of PBS information**

When the user of a clinical information system records the consumer's or authorised representative's consent to the upload of *future* PBS information into the eHealth record, the clinical information system **shall** require the user to record their response (i.e. 'consent given' or 'consent not given') for the upload of *past* PBS information into eHealth record, prior to submitting a registration request to the eHealth Record system. When the response for the upload of *future* PBS information is set to 'consent not given', the CIS **shall** also set the response for the upload of *past* PBS information to 'consent not given'. In all other cases, the CIS **shall not** default to 'consent given' for the upload of future and past PBS information to the eHealth record.

**Related use cases** UC.CIS.501, UC.CIS.502

**Additional Information**

The intent of this requirement is to reduce the risk of a privacy breach and the risk of supplying inconsistent or incorrect registration data to the eHealth record system.

If the consumer or authorised representative does not consent to the upload of future PBS information, there is no need to record a response (i.e. consent given or consent not given) to the upload of past PBS information. A response (i.e. consent given or consent not given) to the upload of future PBS information is required to be supplied in the registration request.

It is the responsibility of the user to ensure that the information entered into the CIS is consistent with the information supplied on the assisted registration form.

This requirement precedes the registerPCEHR service.

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<b>Req No</b>	020208	<b>Priority</b>	Mandatory
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**Capturing of assisted registration details**

The clinical information system **shall** support the ability to capture at least the following assisted registration details at the point of sending the registration request:

- All of the following identity details of the consumer:
    - IHI (if available); or
    - Demographic details (if IHI is not available):
      - Medicare Card (including IRN), Military or DVA number; and
      - Family name; and
      - Given Name(s) (if available); and
      - Date of Birth; and
      - Sex; and
    - Indigenous status.
  - All of the following identity details of the authorised representative:
    - IHI (if available); or
    - Demographic details (if IHI is not available):
      - Medicare Card (including IRN), Military or DVA number; and
      - Family name; and
-

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- Given Name(s) (if available); and
  - Date of Birth; and
  - Sex.
  - Consent information:
    - All of the following for capturing the consent to load Medicare information into the eHealth record:
      - Future MBS information (Values: "ConsentGiven", "ConsentNotGiven")
      - Past MBS information (Values: "ConsentGiven", "ConsentNotGiven")
      - Future PBS information (Values: "ConsentGiven", "ConsentNotGiven")
      - Past PBS information (Values: "ConsentGiven", "ConsentNotGiven")
      - AODR (Values: "ConsentGiven", "ConsentNotGiven")
      - ACIR (Values: "ConsentGiven", "ConsentNotGiven")
    - Consent to upload healthcare information by healthcare organisations.
  - Parental declaration.
  - The healthcare organisations support of assertion of parental responsibility (where support for assertion applies).
  - All of the following Identify verification code (IVC) delivery methods and details:
    - None; and
    - SMS and phone number; and
    - Email and email address; and
    - Response (Returned to the user).
  - One or more of the following Identity Verification Methods:
    - 'Attending third or more consultation and Medicare/DVA card' (IdentityVerificationMethod1); and/or
    - 'Attending hospital with their clinical referral and Medicare/DVA card' (IdentityVerificationMethod2); and/or
    - 'Attending emergency department with PHOTO ID with Medicare/DVA card' (IdentityVerificationMethod3); and/or
    - 'Having prescriptions filled on three or more occasions in the past year and Medicare/DVA card' (IdentityVerificationMethod4); and/or
    - 'Enrolled and attending Aboriginal Medical Service and Medicare/DVA card' (IdentityVerificationMethod5); and/or
    - 'Attending third or more consultation and has a My eHealth Record' (IdentityVerificationMethod6); and/or
    - 'Identity verified by referee consistent with My eHealth Record requirements' (IdentityVerificationMethod7); and/or
    - 'Resident of Aged Care facility and Medicare/DVA card' (IdentityVerificationMethod8); and/or
    - '100pts of documentary evidence consistent with PCEHR Consumer Identity Framework' (IdentityVerificationMethod9); and/or
    - 'Other criteria approved by the System Operator' (IdentityVerificationMethod10).
  - Signed Assisted Registration form - scanned copy (optional).
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**Related use cases** UC.CIS.501, UC.CIS.502

**Additional Information**

The intent of this requirement is to reduce the risk of supplying incomplete, inconsistent or incorrect registration data to the eHealth record system, by ensuring that the clinical information system is capable of capturing the mandatory information required for registering a consumer for an eHealth record, as required by law.

The consumer or authorised representative is not required to receive an IVC when registering for a eHealth record, and therefore it is not required to ensure the user selects a delivery method of either an 'Email', 'SMS' or 'Response'. If the consumer or authorised representative chooses not to receive an IVC, the delivery method should be set to 'None'. The CIS is required to support all IVC delivery methods.

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**Req No**

020219

**Priority**

Mandatory

**Recording consent for assimilation of MBS information**

When the user of a clinical information system records the consumer's or authorised representative's consent to the upload of *future* MBS information into the eHealth record, the clinical information system **shall** require the user to record their response (i.e. 'consent given' or 'consent not given') for the upload of *past* MBS information into the eHealth record, prior to submitting a registration request to the eHealth record system. When the response for the upload of *future* MBS information is set to 'consent not given', the CIS **shall** also set the response for the upload of *past* MBS information to 'consent not given'. In all other cases, the CIS **shall not** default to 'consent given' for the upload of future and past MBS information to the eHealth record.

**Related use cases** UC.CIS.501, UC.CIS.502

**Additional Information**

The intent of this requirement is to reduce the risk of a privacy breach and the risk of supplying inconsistent or incorrect registration data to the eHealth record system.

If the consumer or authorised representative does not consent to the upload of future MBS information, there is no need to record a response (i.e. consent given or consent not given) to the upload of past MBS information. A response (i.e. consent given or consent not given) to the upload of future MBS information is required to be supplied in the registration request.

It is the responsibility of the user to ensure that the information entered into the CIS is consistent with the information supplied on the assisted registration form.

This requirement precedes the registerPCEHR service.

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Req No	020220	Priority	Mandatory
<b>Supply of authorised representative Medicare card details when registering a child</b>			
During the task of registering a child for an eHealth record, when the authorised representative's demographic details are entered into the clinical information system, the clinical information system <b>shall</b> require the user to provide the authorised representative's Medicare card number, including IRN, before the registration request is submitted to the eHealth record system. DVA and Military Health Identifier details <b>shall not</b> be permitted.			
<b>Related use cases</b>	UC.CIS.502		
<b>Additional Information</b>	The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system, that may lead to legal and privacy concerns.  This requirement precedes the registerPCEHR service.		

Req No	020240	Priority	Mandatory
<b>Supply of a phone number or email address with the IVC delivery method</b>			
When the (IVC) delivery method is set to either SMS or email, the clinical information system <b>shall</b> require the user to provide a phone number or email address prior to submitting the registration request to the eHealth record system. The clinical information system <b>shall not</b> automatically include or update the email address or phone number in the local health record for the consumer or authorised representative.			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	This requirement mitigates the risk of violating privacy principles by using the consumer's personal information for purposes other than the original intent or without the consumer's knowledge and consent.  The communication details provided in delivering the IVC may be different from the usual communication details of the consumer or authorised representative, and therefore should not be used to update local system records without the consumer's consent, and without their understanding how the details will be used.  The requirement also mitigates the risk of corrupting local record data and to promote data integrity.  This requirement precedes the registerPCEHR service.		

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<b>Req No</b>	020241	<b>Priority</b>	Mandatory
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**Parental Declaration response**

When the user assists with the registration of a child’s eHealth record, the clinical information system **shall** require the user to include the authorised representative’s response to declaring parental responsibility for the child (i.e. parental declaration ), in the details to be sent in the registration request. The parental declaration field in the clinical information system **shall not** be set to a default value (i.e. true or false).

**Related use cases** UC.CIS.502

**Additional Information**

The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system, and to ensure that the CIS captures the parental declaration as indicated on the registration form.

If the assisted registration form does not clearly indicate a response to the parental declaration, then the user is required to ask the authorised representative to provide a response and update the assisted registration form, before submitting the registration request via the B2B gateway service.

It is the responsibility of the user to ensure that the information entered into the CIS is consistent with the information supplied on the assisted registration form.

This requirement precedes the registerPCEHR service.

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<b>Req No</b>	026710	<b>Priority</b>	Mandatory
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**Healthcare provider supporting assertion of parental responsibility**

When the healthcare provider supports assertion of parental responsibility, the clinical information system **shall** require the user to include an indication of support in the details sent in the registration request.

The field in the clinical information system that supports assertion of parental responsibility **shall** default to a value of false, null, or a null equivalent value, unless changed by the user.

**Related use cases** UC.CIS.502

**Additional Information**

If the child is not on the same Medicare card as the parent/authorised representative then the authorised representative must assert parental responsibility and this assertion must be supported by the healthcare provider organisation if the registration is to proceed.

The Assisted Registration web service call requires the “healthcareProviderParentalAssertion” value to be set to true.

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<b>Req No</b>	020304	<b>Priority</b>	Mandatory
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### Identity Verification Method

The clinical information system **shall** require the user to select one of the supported Identity Verification Methods used by the healthcare organisation to verify the consumer's or authorised representative's identity, at the time of the registration request. The clinical information system **shall** display the exact method description to the user as outlined below, and it **shall** include the selected method's corresponding value in the registration request.

User-Interface Method Description	registerPCEHR evidenceOfIdentity parameter value
Attending third or more consultation and Medicare/DVA card	IdentityVerificationMethod1
Attending hospital with their clinical referral and Medicare/DVA card	IdentityVerificationMethod2
Attending emergency department with PHOTO ID with Medicare/DVA card	IdentityVerificationMethod3
Having prescriptions filled on three or more occasions in the past year and Medicare/DVA card	IdentityVerificationMethod4
Enrolled and attending Aboriginal Medical Service and Medicare/DVA card	IdentityVerificationMethod5
Attending third or more consultation and has a My eHealth Record	IdentityVerificationMethod6
Identity verified by referee consistent with My eHealth Record requirements	IdentityVerificationMethod7
Resident of Aged Care facility and Medicare/DVA card	IdentityVerificationMethod8
100pts of documentary evidence consistent with PCEHR Consumer Identity Framework	IdentityVerificationMethod9
Other criteria approved by the System Operator	IdentityVerificationMethod10

**Related use cases** UC.CIS.501, UC.CIS.502

### Additional Information

The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system. The requirement also aims to avoid confusion as a result of inconsistent or conflicting descriptions displayed to the healthcare professional, and therefore increases the possibility of selecting and submitting the correct Identity Verification Method corresponding to the method deployed in establishing the identity of the consumer or authorised representative.

It is the responsibility of the user to ensure that the option selected is consistent with the Identity Verification Method used by the user in verifying the consumer's or authorised representative's identity. In addition, when checking the identity of the consumer, the user must ensure the evidence of identity details supplied by the consumer or authorised representative match the details recorded by the healthcare organisation and those on the assisted registration application form. These details include the surname, first name, sex, date of birth, Medicare / DVA number and indigenous status.

The number of methods supported by the CIS is dependent upon the healthcare organisation's policy on assisted registration.

This requirement precedes the registerPCEHR service.

Req No	020834	Priority	Mandatory
<b>Disallowing default responses to the upload of AODR and ACIR information</b>			
While the user enters registration details into the clinical information system, it <b>shall</b> require the user to indicate a response to the upload of AODR and ACIR information into the consumer's or authorised representative's eHealth record without the CIS defaulting to a response of 'consent given'.			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system, and to avoid the breach of a consumer's consent rights through disclosure of information in the eHealth record as a result of the user accidentally missing to indicate withdrawn consent where the clinical information system defaults to a response of 'consent given'.  It is the responsibility of the user to ensure that the information entered into the CIS is consistent with the information supplied on the assisted registration form.  This requirement precedes the registerPCEHR service.		

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## 3.2 Conditional requirements

Add the following new requirements to Section 3.2:

Req No	020209	Priority	Conditional
<b>Use of valid Individual Healthcare Identifiers</b>			
If an IHI is to be used in registering an eHealth record, the clinical information system <b>shall</b> validate the IHI against the HI Service at the time of registration. Unless the IHI is the valid one for that consumer and/or authorised representative and is both verified and active, the IHI <b>shall not</b> be used in the registration request. Validation of the IHI <b>shall</b> be achieved by the CIS being connected to the HI Service, or being connected to another software system (other than the eHealth record system) that performs the validation against the HI Service at the time of registration.			
<b>Related use cases</b>	UC.CIS.501, UC.CIS.502		
<b>Additional Information</b>	The intent of this requirement is to allow the user to be certain that the consumer and/or authorised representative has a verified and active IHI prior to registering for an eHealth record, reducing the risk of introducing legal, confidentiality and system integrity breaches.  It is the responsibility of the user to ensure the evidence of identity provided by the consumer or authorised representative match the details supplied to the HI Service. These details should also match the details recorded by the healthcare organisation and that on the assisted registration application form. These details include the surname, first name, sex, date of birth, Medicare / DVA number and indigenous status.  Either an IHI or demographic details of the consumer and/or authorised representative must be provided in the registerPCEHR B2B service call [NEHTA2015a].  If an IHI was included in the registration request without being validated prior to the request, there is a risk of an incorrect identifier being supplied to the eHealth record system. Although the eHealth record system depends on the HI Service for validation of healthcare identifiers, the validation of the IHI will only occur after submitting the		

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registration request.

This requirement therefore mitigates the risk of accidentally registering an eHealth record for the wrong consumer due to the wrong IHI being present in the local patient record. Due to this significant risk, this requirement does not allow the IHI to be used when it has been validated within a confirmable period. Validation is required each time a registration request is prepared.

Validation of the IHI must be achieved by the CIS being connected to the HI Service, or by obtaining the IHI from another software system that performs the validation against the HI Service (other than the eHealth record system). 'Validate' in this context means to send an IHI and demographic data to the HI Service for verification or to return an IHI for the provided demographic data for comparison with the CIS.

Details of IHI validation are available in the HI business use cases [NEHTA2012c] and conformance requirements [NEHTA2012d].

This requirement precedes the registerPCEHR service.

**Req No**                      020218                                      **Priority**                                      Conditional

**Supply of valid indigenous status values at the time of registration**

If the user-interface uses a code set other than the code set defined in the AIHW METeOR Standard [AIHW2012a], the clinical information system **shall** correctly map the details entered by the user to the indigenous status values defined in the AIHW Standard (i.e. METeOR id: 291036).

**Related use cases**                      UC.CIS.501, UC.CIS.502

**Additional Information**                      The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system.  
It is strongly recommended that the national best practice guidelines for collecting indigenous status in health data sets are followed [AIHW2010].  
Valid statuses and the corresponding codes are:

<b>User Interface Description</b>	<b>registerPCEHR indigenousStatus parameter value</b>
"Aboriginal but not Torres Strait Islander origin"	1
"Torres Strait Islander but not Aboriginal origin"	2
"Both Aboriginal and Torres Strait Islander origin"	3
"Neither Aboriginal nor Torres Strait Islander origin"	4
"Not stated/inadequately described"	9

This requirement precedes the registerPCEHR service.

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<b>Req No</b>	020327	<b>Priority</b>	Conditional
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**Prevent the usage of the “Response” option for IVC delivery when batch processing registration requests**

If the clinical information system deploys batch processing for assisted registration requests, it **shall not** allow the IVC delivery option of “Response” to be set as part of the registration request.

**Related use cases** UC.CIS.501, UC.CIS.502

**Additional Information** As the IVC can be used to access the consumer’s eHealth record, it is important that there are strict controls on the handling of IVCs. If a consumer opts to have their IVC sent to the healthcare organisation and the registration request is not submitted at the time when the consumer or authorised representative is present in person, there is a risk that the safe delivery of the IVC to the consumer will be compromised. For those systems or healthcare organisations deploying a batched registration operation, the “response” option for IVC delivery should not be used.

Completing the registration process may involve some time delays, because of environmental circumstances such as a CIS operating within a distributed system environment or slow network performance. In these environments, a latency may exist between the initial request and the final response, but software designers and developers should take the necessary steps in increasing the possibility for the registration process to be completed within a time period that will allow the healthcare professional, assisting with the registration, to receive a response from the eHealth record system and to communicate the outcome to the consumer or authorised representative in person.

This requirement precedes or follows from the registerPCEHR service call.

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<b>Req No</b>	020328	<b>Priority</b>	Conditional
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**Electronic copies of assisted registration forms**

If the clinical information system allows the user to submit an electronic copy of the signed assisted registration form with the registration request to the eHealth record system, it **shall** limit the size of the copy to less than or equal to 200kb, and with a MIME type of either one of the following:

- Application/PDF
- Image/JPG
- Image/JPEG
- Image/GIF
- Image/TIF
- Image/TIFF
- Image/PNG

**Related use cases** UC.CIS.501, UC.CIS.502

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**Additional Information**

The intent of this requirement is to prevent the user from submitting large or inappropriate attachment types to the eHealth record system that will prevent the System Operator from capturing evidence of the assisted registration, including evidence that the:

- Consumer or authorised representative acknowledged that the registration is voluntary; and
- Consumer or authorised representative authorised the healthcare organisation to supply personal information to the System Operator; and
- Consumer or authorised representative acknowledged that information collected will be used for the purpose of registering for an eHealth record; and
- Authorised representative declared parental responsibility for the child; and
- Consumer or authorised representative consented to the upload of health information; and
- Consumer or authorised representative has given a preference for the delivery of an IVC.

This requirement precedes the registerPCEHR service.

**Req No**

020835

**Priority**

Conditional

**Disallowing default Indigenous status values**

If the clinical information system does not use the indigenous status in the local health record to prepopulate the indigenous status while entering the registration details, it **shall** require the user to indicate the status without the CIS defaulting to a specific status value.

**Related use cases**

UC.CIS.501, UC.CIS.502

**Additional Information**

The intent of this requirement is to reduce the risk of supplying inconsistent or incorrect registration data to the eHealth record system. It is strongly recommended that the national best practice guidelines for collecting indigenous status in health data sets are followed [AIHW2010].

Valid statuses and the corresponding codes are:

<b>User Interface Description</b>	<b>registerPCEHR indigenousStatus parameter value</b>
"Aboriginal but not Torres Strait Islander origin"	1
"Torres Strait Islander but not Aboriginal origin"	2
"Both Aboriginal and Torres Strait Islander origin"	3
"Neither Aboriginal nor Torres Strait Islander origin"	4
"Not stated/inadequately described"	9

This requirement precedes the registerPCEHR service.

## 4 Changes to Appendix A

Add the following to the references list in Appendix A:

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[AIHW2010]	<i>AIHW 2010. National best practice guidelines for collecting Indigenous status in health data sets.</i> Cat. no. IHW 29. Canberra: AIHW. Available from <a href="http://www.aihw.gov.au/publication-detail/?id=6442468342">http://www.aihw.gov.au/publication-detail/?id=6442468342</a> Accessed 5 August 2015.
[AIHW2012a]	<i>Australian Institute of Health and Welfare</i> , November 2012, AIHW's Metadata Online Registry. Available from <a href="http://meteor.aihw.gov.au/">http://meteor.aihw.gov.au/</a> Accessed 5 August 2015.
[HEALTH2015]	<i>PCEHR (Assisted Registration) Rules 2012.</i> Available from <a href="https://www.comlaw.gov.au/Details/F2015C00558">https://www.comlaw.gov.au/Details/F2015C00558</a> . Accessed 5 August 2015.
[HEALTH2013]	<i>Assisted Registration: A guide for healthcare provider organisations</i> , Department Of Health, September 2014. Available from <a href="http://www.ehealth.gov.au/internet/ehealth/publishing.nsf/content/assistedregguide">http://www.ehealth.gov.au/internet/ehealth/publishing.nsf/content/assistedregguide</a> Accessed 5 August 2015.
[NEHTA2015a]	<i>PCEHR Registration Service – Technical Service Specification v1.2</i> , NEHTA, 2015. Available from: <a href="http://public-uat.nehta.net.au/implementation-resources/national-infrastructure/pcehr-b2b-gateway-services">http://public-uat.nehta.net.au/implementation-resources/national-infrastructure/pcehr-b2b-gateway-services</a>
[NEHTA2012c]	<i>Healthcare Identifiers Business Use Cases</i> , version 2.3, NEHTA, 2012
[NEHTA2012d]	<i>Use of Healthcare Identifiers in Health Software Systems – Conformance Requirements</i> , version 2.0, NEHTA, 2012
[NEHTA2015e]	<i>PCEHR Registration Service - Logical Service Specification</i> , version 1.2, NEHTA, 2015. Available from: <a href="http://public-uat.nehta.net.au/implementation-resources/national-infrastructure/pcehr-b2b-gateway-services">http://public-uat.nehta.net.au/implementation-resources/national-infrastructure/pcehr-b2b-gateway-services</a>

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# Appendix A Change log

The table below lists the major changes between Amendment 1<sup>3</sup> and this Amendment 1.1.

<b>ID</b>	<b>Section</b>	<b>Change Detail</b>	<b>Rationale</b>
1	2 and 3	Update to section numbers.	For ease of reference against the original document.
2	2.2	Adjusted the definition of "child"	Removed the requirement for the child to be on the same Medicare card as the authorised representative.
3	2.5	Added requirement 26710 to the table	Requirement 26710 is now included in use case UC.CIS.502.
4	Req. 20206	Adjusted the additional information	Removed references to parent and child being on the same Medicare card.
5	Req. 20208	Adjusted requirement to include capture of support of assertion of parental responsibility	To ensure support of assertion is captured in the local CIS.
6	Req. 20220	Adjusted the additional information	Removed references to parent and child being on the same Medicare card.
7	Req. 26710	Added requirement	To assist in the processing of registration requests where the child is not on the same Medicare card as the authorised representative.

<sup>3</sup> *Clinical Information Systems Connecting to the PCEHR System – Conformance Requirements v1.5 Amendment 1: Assisted Registration*, 7 March 2013, available from [www.nehta.gov.au](http://www.nehta.gov.au) at this link: [PCEHR Connecting Systems - Conformance Requirements Amendment 1 - Assisted Registration v1.5](#).