

eReferral Initiatives in Victoria



The Way Forward
Max Walker 5 December 2008

Initiative 1

- HealthConnect Initiative called Care Direct
 - Scope is some Health *SMART* Agencies and some selected GP's
 - Discharge "Summaries"
 - Perhaps some GP Referrals to Community Health Centres
 - Scope to be defined by end of FY

Initiative 2

- Human Services eReferral
 - Scope - All Health & Community Services
 - To be completed by 12 Dec
 - Plan/Business Case to establish lead sites by end FY
 - High Level Architecture
 - Identification of possible Services Providers, Vendors and Profiles
 - Will include Gateway and Services Directory

Why 2 Initiatives?

- Health *SMART* is very specific
 - A narrow view is crucial for the program to deliver
 - Very disciplined and regimented approach
 - Implementation will achieve a very specific goal

2 Initiatives

- Human Services eReferral
 - Very general
 - No specific goals (at this stage) other than to prove concept and promote interoperability
 - Hopefully will have a profile to include a non Health Provider

2 Initiatives

- The initiatives will
 - Complement one another
 - Feed one another
 - Get bigger and
 - Converge into one over time

Underlying Principles

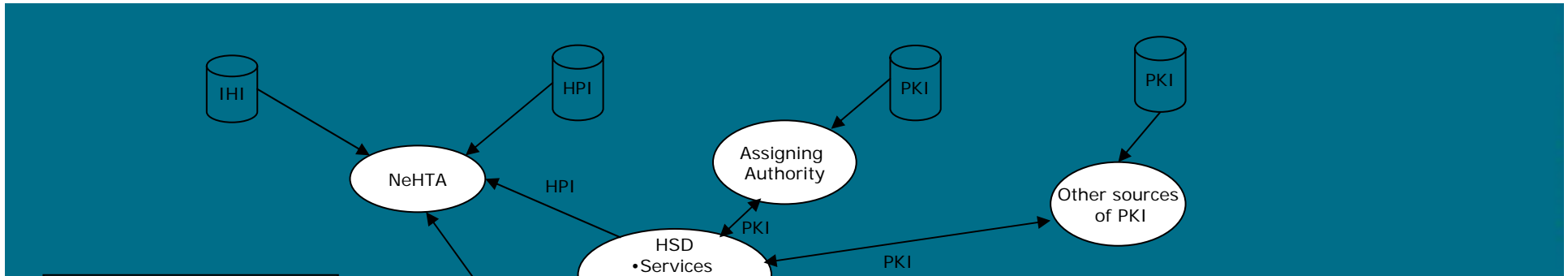
- Use open Standards
- NEHTA Initiatives such as UHI will be utilised
- Initially partnerships & where possible include NEHTA
- Messaging to support workflow and business rules
 - HL7 V2.4

What are we really saying?

- Interoperability
- Shared Care
- Collaboration
- A whole System (& not just Health)
- A joined up System
- An effective & efficient System
- A System that effectively Serves its Community

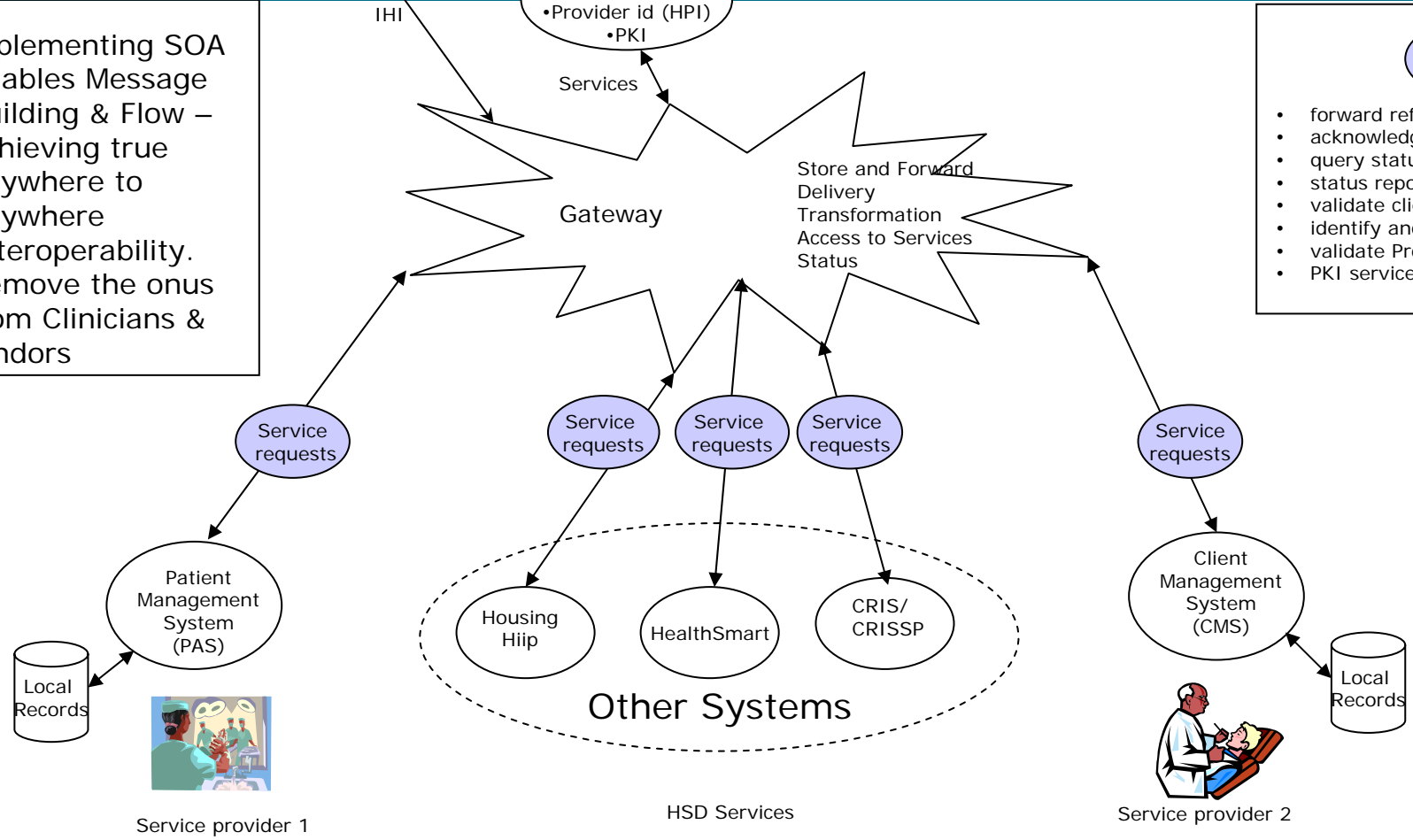
How?

- Get the right data to the right place at the right time
- Messaging that supports and enables sensible workflow and decision support
- It is all about reliable data (Information Management)



Implementing SOA Enables Message Building & Flow – achieving true anywhere to anywhere Interoperability. Remove the onus from Clinicians & Vendors

- Service requests
- forward referrals and replies
 - acknowledge receipt
 - query status
 - status reports
 - validate client
 - identify and choose provider
 - validate Provider referring
 - PKI service



e-Referral Overview

Other Developments

- HL7 V2.6 Collaborative Care Message
 - Improves Clinical reliability and clarity by linking segments into groups
 - More Trigger Events – Better Workflow (Includes Repositories)
 - Expanded Patient Groups
 - New Appointment History Group
 - Avoids backward compatibility issues

Further Developments

- Address Health*SMART* issues
 - Establish a process with Standards, HL7 Aus & if required HL7 Int & NEHTA to resolve issues around non-conformance, use of Z Segments etc.
- Further improve Clinical Content of HL7 V2 Messages by
 - Implementing CDA as part of V2 Payload
 - Introducing Archetypes into V2

Further Developments (cont)

- Develop the “Collaborative Care Responsibility Query – Response” Message
 - Support Business Rules & workflow
 - No Clinician Acceptance or Rejection of the Referral

Further Developments (cont)

- The development of new fit for purpose Segments to assist in the introduction of such things as Archetypes, Digital Signatures & SCTT (or ONI)
 - Improve Interoperability – we are talking true Interoperability
 - Improve Reliability
 - Remove Backward Compatibility Issues
 - Remove Shortcuts & Compromises
 - Stop using OBR & OBX as the new Z Segments

Further Developments (cont)

- Human Services Directory
 - Since 2004
 - 11,500 Service Providers, 6,500 GP's 6,500 Other Practitioners
 - Many uses, many stakeholders
 - SOA to truly support eReferral, Messaging, Security etc.
 - As much as possible take onus away for Practitioner & Individual Vendors

Further Developments (cont)

- Health Services Specification Project (HSSP)
 - Joint OMG HL7 Project
 - HL7 Develops Specification (Ballots) to Draft Standard for Trial Use (DSTU)
 - Hands over to OMG for build
- HSD Sub-project
 - Going 2 Years
 - Aus, US & Canadian participants
 - Get Standards for Directories!



home Protected page discussion (1) history notify me

Healthcare Provider and Services Directory Service (HCPDS).
HCPDS is required to provide an online facility that will enable Practitioners, via a set of parameters, to locate other practitioners, to assist in the continuum of care.

Group Lead: Max Walker (Department of Human Services, Victoria, Australia) -
Max.Walker@dhs.vic.gov.au

Overview PPT:

[_HSSP Sub-project - Provider & Services Directory - Jul07.ppt](#)

[_Referral Diag.ppt](#)

[_Services Directory Diag.ppt](#)

[Victorian HSD Service Categories & Types.xls](#)

[_Aus Service Group Reference.doc](#)

[_US Service Categories.txt](#)

Click here for latest: [SFM draft \(WIP\)](#)

Click here for: [Meeting Schedule and Minutes:](#)

Click here for: [Identification of key milestones](#)

- Join this Wiki
- Recent Changes
- Manage Wiki
- Search
- Navigation
 - SP Home
 - Provider and Service
 - Directory Home
 - Settings
 - Live Work
 - Milestones

Ads by Google

[Aust College of Comp Med.](#)

At the forefront of Kinesiology Government Recognised Training
www.acom.edu.au

[VIC Removalists](#)

Get Quotes from Moving Companies Australia wide. Interstate & Local
www.AustraliaAllOverRemovals.com

[Invest in Defence Housing](#)

Zero Vacancy Risk and Guaranteed Income for Term of Lease. Ask Now!
Invest.DHA.gov.au

[Glamour Photography](#)

Free Glamour makeover & photoshoot be pampered and have fun! VIC only
www.blush.com.au

[Be Resource Smart](#)

Easy ways for Victorians to reduce their Carbon

Summary - Concepts

- Messages to support workflow & decision making
- The goal is “true interoperability” without human intervention
- SOA to remove burden from Clinicians & individual vendors in implementation
- Get the right data to the right place at the right time

eReferral Initiatives in Victoria



The Way Forward
Max Walker