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My Health Record

Patient Journeys










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Practice Workflow

(25 March, 2019)

| Practice Manager Roles  | Receptionist Roles  | GP Roles  | Practice Nurse Roles  |
|--|--|--|--|
| MHR staff training | IHI validation | Viewing clinical information in MHR | Viewing clinical information in MHR |
| Development and adherence to MHR policies and procedures | Patient demographic details check | Uploading Shared Health Summaries, Event Summaries and Prescribing records to MHR | Uploading Shared Health Summaries* and Event Summaries to MHR |
| Risk assessment | Assisted registration (where required) | Downloading information from MHR into CIS | Ensuring a high quality of data in CIS |
| Ensuring CIS version is current | MHR information resource | Ensuring a high quality of data in CIS | Ensuring patient privacy and security is maintained e.g. CIS password is regularly changed and sufficiently complex, screensaver is used and deactivated by entering their username and password |
| Ensuring security updates are current | RO (Responsible Officer)  Existing definition | Obtaining patient consent to upload to MHR [#] | * RNs only |
| Meeting ePIP requirements (accredited practices) | OMO (Organisational Maintenance Officer)  Existing definition | Secure messaging | Aboriginal Health Worker  Same as Practice Nurse |
| Monitoring certificate expiry dates | | Ensuring patient privacy and security is maintained e.g. CIS password is regularly changed and sufficiently complex, screensaver is used and deactivated by entering their username and password | |
| Registering the practice for MHR | | [#] obtaining patient consent is considered best practice | |
| Maintaining healthcare provider HPI-Is in CIS and retiring users from the CIS upon leaving the practice | | | |
| Ensuring privacy and security is maintained in the practice e.g. CIS passwords are regularly changed and sufficiently complex, screensavers are used and deactivated using a username and password | | | |



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Practice Workflow Scenario

Adult, Primary Care

Scenario: Patient “Trish” existing client, female 49yo, overweight

Today:

Trish to have a 49yo health check on 2nd March 2019



Background:

Previously ill two weeks ago, got Antibiotics from an Afterhours Dr



Plans:

Moving to a warmer climate



Receptionist Roles



Greets patient

Informs patient this is a MHR clinic

Checks IHI and personal details

Provides MHR resources to patient (eg setting privacy controls)

Practice Nurse Roles



Prolonged health assessment (707 – approx \$268.80)

Established initial assessment

Looks up MBS data to determine if existing care plan

Identified seen by another healthcare provider for infection. Previous practice didn't upload an Event Summary (ES)

Patient unable to recall medication

Checks medicine view in MHR Dispense record – found Oxacillin

GP Roles



Reviews practice nurse information

Recommends exercise and diet plan

Reviews pathology in MHR

Update medications

Updates clinical history

Uploads SHS as requested by patient



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Sample chronic disease scenarios

Disclaimer: These workflows are indicative only and may vary across practices and patients



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Chronic Disease - Diabetes:

Adult, Primary Care

Scenario: New diagnosis, existing patient

| Stage | Presentation | Referral | Review and diagnosis | Referral | Allied Health | Follow up | Dispense | Patient |
|----------------------|--------------------------|----------------------------------|--|-----------------------------------|---|--|--------------------------------|--|
| Action | Assessment Blood Test | E-request sent to pathology | Pathology results reviewed, Confirm diagnosis of Type 2 diabetes History updated | Care plan | Review care plan referral and history | Review of patient Prescribe anti diabetic | Dispense medication | Keep track of progress Food Diary Exercise Diary BGL monitoring |
| Roles | GP | GP | GP | GP | AHP | GP | Pharmacist | Patient |
| Digital Tool Support | | Secure messaging | SHS uploaded to MHR | Secure messaging to allied health | MHR view through NPP eg: SHS and Pathology E-referral received 1 st report sent back to GP by Secure messaging | Prescription, Upload a new SHS | Upload dispense record to MHR | Personal Health Notes in MHR |
| Benefits | | Faster, time saving, cost saving | High likelihood of patient representing | Same as above | AHP doesn't need to ring GP or rely on patient | Same as above | Complete medicines information | Helps patient keep track, share with providers |



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Chronic Disease - Diabetes:

Scenario: long standing diagnosis, existing patient

Adult, Primary Care

| Stage | Presentation | Presentation To specialist | Presentation to Specialist | Allied Health | Dispense | Patient |
|-----------------------------|---|--|--|---|---|---|
| Action | <ul style="list-style-type: none"> Review of patient's current condition, record vitals and measurements New GPMP and TCA Referral to Endocrinologist, podiatry, Ophthalmologist | Review of patient, and patient kept record of BGL and other Medication Changed Specialist letter back to GP | Review patient, eye check Specialist Letter back to GP | Review care plan referral and history, Foot assessment | Dispense medication | Keep track of progress Food Diary Exercise Diary BGL monitoring |
| Roles | GP and Practice nurse | Endocrinologist | Ophthalmologist | Podiatrist | Pharmacist | Patient |
| Digital Tool Support | E-referral via Secure Messaging, Upload current SHS | View MHR eg: SHS, pathology, medicines information view, Event summaries from other providers, Patient kept personal health notes (shared by patient through their NCP) Specialist letter via Secure messaging, (Upload to MHR if conformant software) | View MHR eg: SHS, Pathology, Medicines view and Event Summary Specialist letter via Secure messaging, (Upload to MHR if conformant software) | MHR view through NPP eg: SHS and Pathology E-referral received 1 st report sent back to GP by Secure Messaging | Upload dispense record to MHR Review Specialist Letter in MHR | Personal Health Notes in MHR |
| Benefits | Most up to date information on patient's record for all Providers to view if required | Faster, time saving, cost saving | Faster, time saving, cost saving | AHP doesn't need to ring GP or rely on patient | Complete medicines information | Helps patient keep track, share with providers |



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Chronic Disease - Asthma:

Adult, Primary Care

Scenario: New presentation. Diagnosis is not yet confirmed or recorded

| Stage | Presentation | Presentation To specialist | Presentation to Specialist | Allied Health | Dispense | Patient |
|-----------------------------|--|--|---|---|--|--|
| Action | Review of patient's current condition, record vitals and measurements New GPMP and TCA Referral to Respiratory Physician, Immunologist and Physiotherapist | Review of patient, and patient kept record of medication use and other Medication Changed Specialist letter back to GP | Review patient, review pathology, allergy testing Specialist Letter back to GP | Review care plan referral and history | Dispense medication | Keep track of progress Food Diary Asthma diary |
| Roles | GP and Practice nurse | Respiratory | Immunologist | Physiotherapy | Pharmacist | Patient |
| Digital Tool Support | E-referral via Secure Messaging, Upload current SHS | View MHR eg: SHS, pathology, medicines information view, Event summaries from other providers, Patient kept personal health notes (shared by patient through their NCP) Specialist letter via Secure messaging, (Upload to MHR if conformant software) | View MHR eg: SHS, Pathology, Medicines view and Event summary Specialist letter via Secure Messaging, (Upload to MHR if conformant software) | MHR view through NPP eg: SHS and Pathology E-referral received 1 st report sent back to GP by Secure messaging | Upload dispense record to MHR Review Specialist Letter in MHR | Personal Health Notes in MHR |
| Benefits | Most up to date information on patient's record for all Providers to view if required | Faster, time saving, cost saving | Faster, time saving, cost saving | AHP doesn't need to ring GP or rely on patient | Complete medicines information | Helps patient keep track, share with providers |



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Chronic Disease - Asthma:

Adult, Primary Care

Scenario: New presentation. Diagnosis is not yet confirmed or recorded

| Stage | First presentation | Testing | Referral | Prescribe | Dispense | Check Record |
|---------|---|--|--|---|--|--|
| Action | Assessment Spirometry Has patient had flu vaccine Asthma management plan | Spirometry | Refer to respiratory physician Refer to physiotherapy | Write prescription | Fill prescription Asthma management/ education | Update emergency contact details Add personal summary Check SHS is correct |
| Roles | Practice Nurse GP | Path Lab | GP | GP | Pharmacist | Patient |
| Digital | MHR viewing Review PBS data & medicines summary Discharge summary Check immunisations | Upload | Upload referral to MHR via Secure Messaging (In Medical Director Software only) | Upload prescription & Event Shared Health Summary | Tell patient to add info in their personal health summary Upload dispense (automatic) Check allergies in MHR | Login to MRH via MyGov Curate the record |
| Benefit | Reduction of time in making assessment Supplementary information Helpful in reducing burden on patient re-telling story | Immediate accessibility to Path Lab results for healthcare providers | Patient can't lose paper referral Seamless & safe delivery & less delay | If patient has severe attack & hospitalisation information is available | Medicine safety | Hospitalisation Info available Shared decision making |



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Chronic Disease - Bowel cancer:

Scenario: New diagnosis, existing patient 60 year old with family history of bowel cancer previous abnormal colonoscopy

| Adult, Primary Care Stage | Care Presentation | Lab | Presentation to specialists | Lab | Presentation to Public hospital for surgery | Oncologist | Ambulatory Care | Patient |
|-----------------------------|---|--|--|--|--|---|---|--|
| Action | Assessment of patient, request pathology, Refer to Gastro for colonoscopy | Upload pathology results | Review of patient, Colonoscopy, Histopathology | Histopathology result Diagnosis confirmed as Bowel cancer | Pre admission: consult with patient and view MHR to supplement history | Post-Surgery: Patient referred to oncologist for further management | Oncology: Initiation of Treatment | Keeps journal of side effects of medications on personal health summary and Personal Health notes on MHR |
| Roles | GP | Path lab | Gastroenterologist | Path Lab | Pre admissions | Surgeon | Oncologist | Patient |
| Digital Tool Support | E-referral via Secure messaging, Upload current SHS | Secure messaging to requesting doctor. Upload to MHR | View MHR eg: SHS, pathology, medicines information view, Event summaries from other providers, | Secure messaging to requesting doctor. Upload to MHR | View MHR eg: SHS, Pathology Medicines view and Event summary | Discharge summary uploaded to MHR and sent to GP via Secure messaging | Dispensed medication uploaded to MHR, Treatment plan sent to GP via Secure messaging, Event summary uploaded to MHR | National Consumer Portal (NCP) |
| Benefits | Most up-to-date information on patient's record for all providers to view if required | | Specialist does not need to contact lab/GP for results | GP can view and save the pathology ordered by the specialist on patient's record | Multiple sources of information. Medication Reconciliation | | Everyone involved in patient care can have view of patient's condition | Patient centred care, increased health literacy of patient, not having to repeat their story |



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