

My Health Record

NSW Medico-Legal Society

Tuesday, 30 October 2018

Introduction

- What is it?
- What is the basis for it?
- Why the fuss?
- What is next?



Future of Health





Australian Government

Australian Digital Health Agency

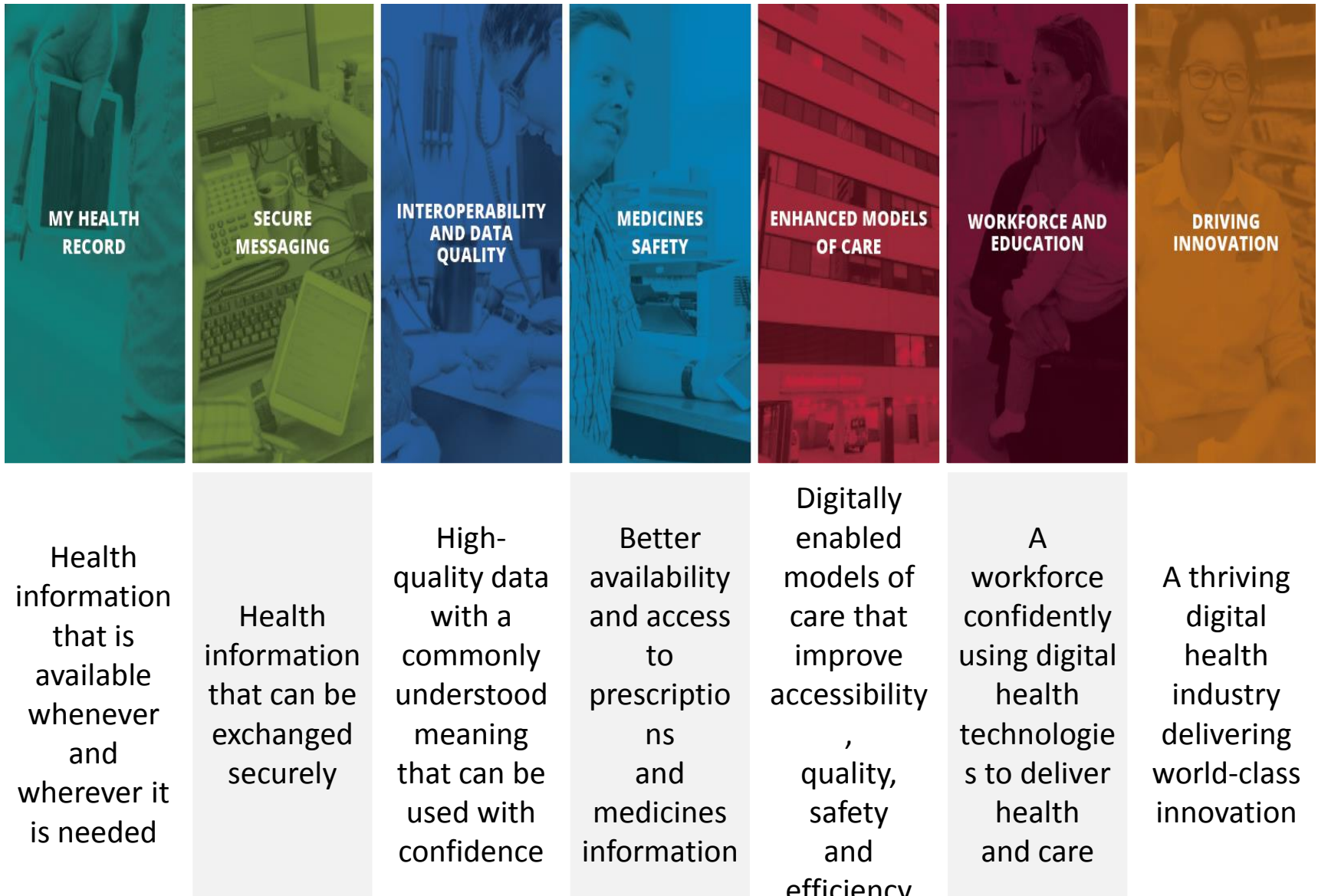
My health Record-Why & What



My Health Record

National Digital Health Strategy

Priority Activities 2018 - 2022



The current state

- 2-3% (230K) admissions from medication errors costing \$1.3 billion annually
- 17% pathology and radiology tests are duplicated
- 20% of medical errors are due to incomplete patient administration / admission information
- 50% of nurses' working hours are spent on administration and paper work



My Health Record

A secure, legislated, patient-controlled, electronic summary of an individual's key health information, able to be accessed by authorised individuals and registered healthcare providers involved in a person's care anywhere in Australia at any time.

Document Types

Clinical Documents:

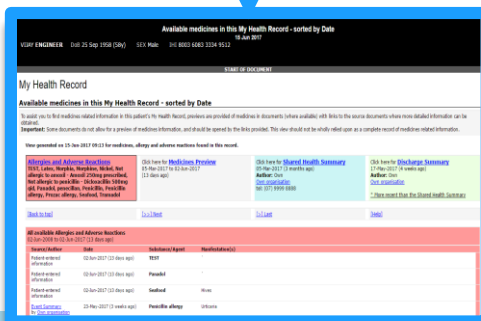
- Shared Health Summaries
- Event Summaries
- Discharge Summaries
- Pathology & Diagnostic Imaging Reports
- Prescription Records
- Dispense Records
- Specialist Letters
- eReferrals

Medicare Information:

- MBS & PBS Information
- Organ Donor Decisions
- Immunisation Register (AIR)

Individual (or Representative)

- Advance Care Planning Documents & Custodian Details
- Personal Health Summary
- Personal Health Notes
- Emergency Contacts
- Childhood Development



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My Health Record

Benefits of My Health Record



Health sector

- ✓ Improved continuity of care
- ✓ Reduced duplication and wasted resources



Healthcare provider organisation

- ✓ More time to provide health care
- ✓ Improved decision support

Individuals

- ✓ Enhanced patient self-management



Improvements
in patient
outcomes

My Health Record Statistics

as at 21 October 2018



Australian Government
Australian Digital Health Agency



My Health Record

Consumer Statistics



6,235,717 Consumers registered

Demographic
Breakdown



54% are female



46% are male

Age Range	Aged 19 or less	Aged 20–39	Aged 40–64	Aged 65 or higher
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% of total registrations	36%	25%	25%	15%
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State	ACT	TAS	SA	NT	NSW	VIC	QLD	WA
% of population	28%	25%	23%	25%	26%	20%	32%	22%

Approximately 25% of Australia's population
is registered for a My Health Record

Provider Organisation Statistics



14,226 Healthcare provider organisations registered

Organisation Type*	Count
General Practice Organisations	6,715
Public Hospitals and Health Services	829
Private Hospitals and Clinics	184
Pharmacies	3,897
Aged Care Residential Services	189
Pathology and Diagnostic Imaging Services	76
Other categories of healthcare providers including Allied Health	1,934
Organisations with a cancelled registration	402

*Organisation type based on Healthcare Provider Organisation (HPI-O) data, except for Hospital provider data which is based on jurisdictional reported facilities that are connected to the My Health Record system.

My Health Record Usage



Clinical Document Uploads

8,323,581

Shared Health Summary	2,156,120
Discharge Summary	2,317,674
Event Summary	704,735
Specialist Letter	98,835
eReferral Note	96
Pathology Reports	2,686,093
Diagnostic Imaging Report	360,028



Prescription and Dispense Uploads

25,848,937

Prescription Documents	19,059,537
Dispense Documents	6,789,400



Consumer Documents

204,788

Consumer Entered Health Summary	132,420
Consumer Entered Notes	49,102
Advance Care Directive Custodian Report	20,042
Advance Care Planning Document	3,224



Medicare Documents

791,688,576

Australian Immunisation Register	2,754,686
Australian Organ Donor Register	693,370
Medicare/DVA Benefits Report	466,211,936
Pharmaceutical Benefits Report	322,028,584

Who's connected?

www.myhealthrecord.gov.au

[u](#) > About > My
Health Record
statistics



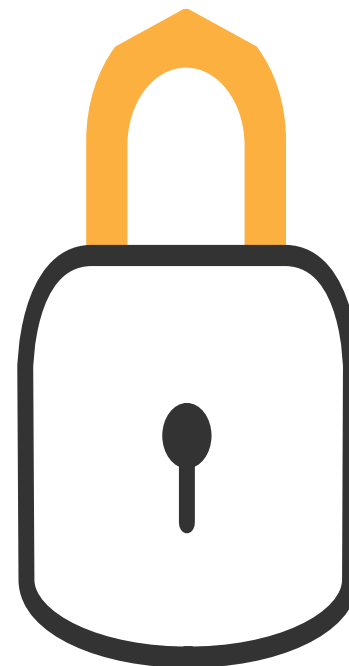
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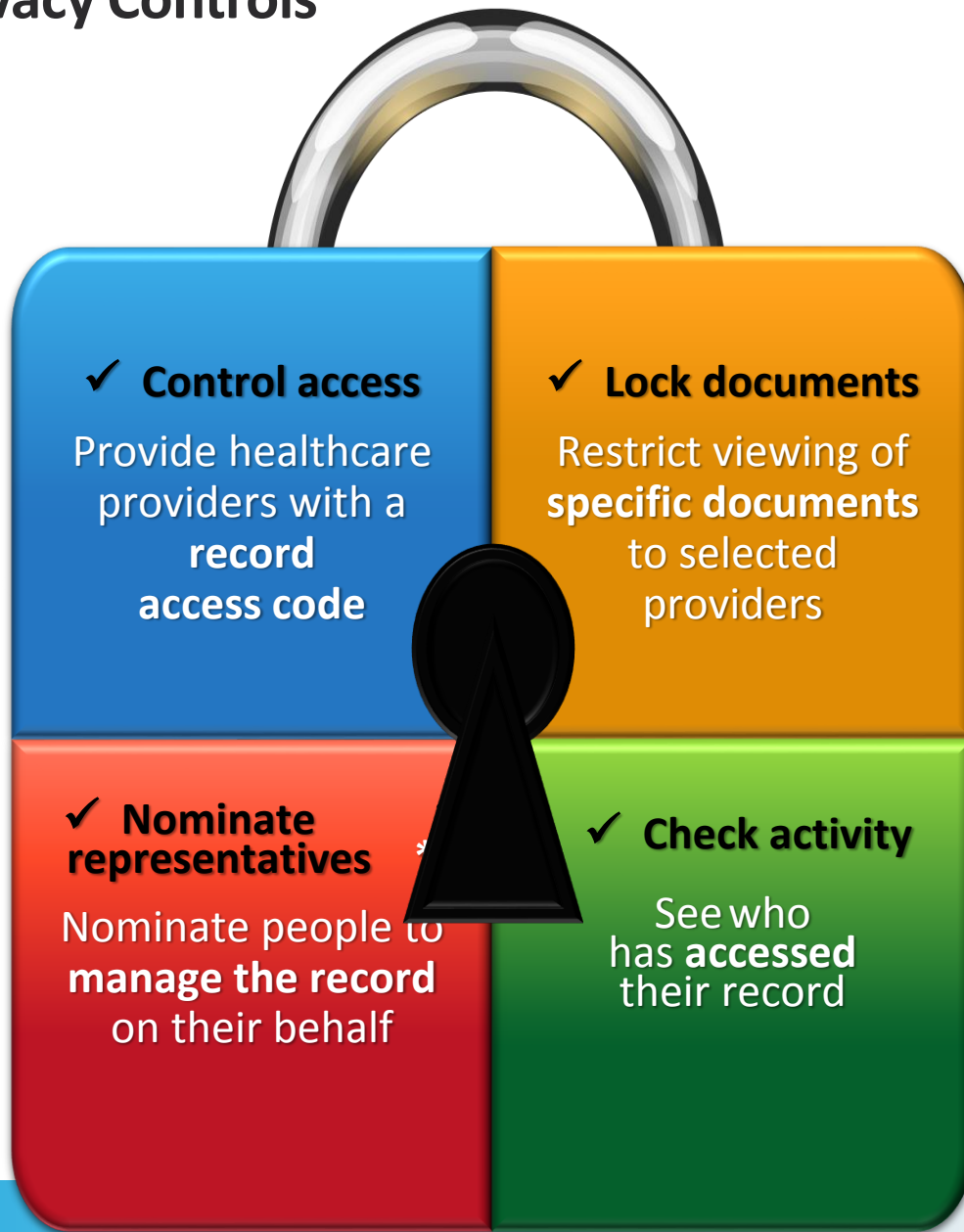
My Health Record

Security

- Encryption, firewalls, secure login / authentication mechanisms, audit logs
- All data within the My Health Record system is stored securely in Australia
- Legislation
- Penalties



My Health Record Privacy Controls



Person-centred security and privacy model for the My Health Record system. People can control their own My Health Record access and privacy settings.

They can also:

- Remove and reinstate documents
- View access history and set notification alerts
- Hide record from automatic software look-up
- Consent for Medicare data and de-identified secondary use of My Health Record data



Australian Government

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My Health Record

The Legislation

- Healthcare Identifiers Act 2010
- My Health Records Act 2012
- My Health Records Regulation 2012
- My Health Records Rule 2016
- My Health Records (Information Commissioner Enforcement Powers) Guidelines 2016
- My Health Records Amendment (Strengthening Privacy) Bill 2018

| Why all the fuss?

Privacy

- A contravention of the MHR Act is an interference with privacy
 - *Privacy Act 1988 (Cth)*
- A patient can Opt out, set Remote Access Code (RAC) or Limited Document Access Code (LDAC)
- A healthcare provider must report a MHR data breach to the OAIC and the ADHA

Privacy



Privacy

Privacy

Ongoing Issues

- When is it authorised access?
 - Healthcare Providers
 - Authorised Representatives
 - Courts & Tribunals
 - Law Enforcement

- What about secondary use?
 - Health insurers
 - Commercial organisations

Consent

- Opt In – Standing Consent
- Opt Out – No need for Consent
 - Should it be in writing?
 - Should there be a sign?
- Withdrawal of Consent
 - Removal of records
 - Block access to records

Negligence

Is there an increased risk of a claim

- Relied on an incorrect document on MHR
- Failed to rely on a (correct) document on MHR
- Uploaded an incorrect document
- Uploaded a document when consent was withdrawn
- Was unaware of an important document as a patient had removed a document
- Patient misunderstood test results available on MHR

Electronic Records

Lau Inquest - NSW

- Issue
 - Did the introduction of the TrakCare electronic medical record system to Macquarie University Hospital cause or contribute to the death of Mr Lau?
- Finding
 - Whilst TrakCare did not cause ... death, the initial prescription error was made easier due to a function of TrakCare of great utility – the ability to open and close different patient records from a single terminal. Prior to the introduction of electronic medical records, it was much more difficult to chart medication on the wrong patient file
- Yet...
 - The main reason for the failure ... the persistent failure to critical thinking by those involved in the care and treatment of Mr Lau

Inquest

Halwala Inquest - Vic

- Died from complications of chemotherapy
- Results of PET scan faxed to the wrong number
- Coroner Carlin
 - ‘It is difficult to understand why such an antiquated and unreliable means of communication persists at all in the medical profession’

Disciplinary

Unauthorised Access to medical records

- HCCC prosecuted a nurse before NCAT
- Alleged unsatisfactory professional conduct and professional misconduct in relation to inappropriate access to electronic medical records
- Tribunal found complaint proven on 16 August 2018
 - Formally reprimanded
 - Registration suspended for 6 months

Where to now

- Senate Committee Recommendations
 - Record Access Codes applied as default
 - Children 14 to 17 years expressly request a parent be a nominated representative
 - Extend the period of suspension of access in case of serious risk
 - Explicit consent required for secondary use of data
 - Strengthen prohibition on secondary use of data for commercial purposes
 - Amend the MHR Act and HIA so the MHR cannot be accessed for employment or insurance
 - Extend the opt-out period for further 12 months

Team Contacts



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