Pharmacists role in eHealth collaboration

Speaker: Paul Naismith
CEO
Fred IT Group Pty Ltd
Agenda

1. eHealth
   • Where are we heading and why?
   • Medication Management

2. eScripts
   • Why bother?
   • How do they work?
   • Progress to date

3. Next Steps
   • MedView Medications Repository
   • PCEHR
What is eHealth

eHealth is the electronic collection, management, use, storage and sharing of healthcare information.
“E-Health will enable a safer, higher quality, more equitable and sustainable health system for all Australians by transforming the way information is used to plan, manage and deliver healthcare Services”

- Australian Health Ministers’ Conference (AHMC) vision for eHealth
eHealth – What is it?
Opportunity for Patients

- Ability to have greater control over ones own health information
- Improved health incomes and quality of care including reduced errors and associated negative outcomes
Opportunity for Pharmacists

- Potential efficiency gains and time savings
- Enhanced communication and sharing of information between a patient’s care
- Reduced injuries and deaths through errors or lack of information
e-Communications in Practice

NEHTA focus:

• e-Pathology
• e-Discharge Summaries
• e-Referrals
• e-Medication Management
Deloitte National eHealth Strategy (2008) said difficult to accurately quantify benefits

EXCEPT:

- 10% hospital admissions due to adverse drug events
- Preventable medication prescribing errors cost $380m pa
- 25% of a clinician’s time is wasted seeking information about patients

PCEHR Business Case relies on Medication Management
Medication Management Cycle
Effective Medication Management

Two key factors

1. Include data from all sources
   - Prescription events
   - Dispense events
   - Discharge events

2. Efficient and effective workflow is critical
   - Must work from within existing clinical systems
     eg: MD, BP, Zedmed, FRED, iCare,...
eScripts is the link

Vision:

• Transfer digitally-signed legal prescription from prescriber to dispensers

• Seamless across all settings - primary care, outpatient, discharge.

• Patient choice of community pharmacy
Industry wants eScripts

“The RACGP supports e-prescribing, which delivers considerable benefits to GPs and other medical practitioners”

Dr Chris Mitchell, Past President RACGP

“The AMA supports the development of an ePrescribing system as a fundamental building block for a national electronic health system in Australia”

Australian Medical Association Position Statement

“A platform for e-scripts is a vital piece of health infrastructure, creating immediate safety benefits for patients, as well as a better standard of shared care between GPs and pharmacists”

Kos Sclavos, Pharmacy Guild
eScripts in Australia

- 3 years old
- Two Commonwealth approved operators
- Available for all GPs and Pharmacists
- On path to paperless
Why use eScripts?

✓ Improved patient safety
✓ Faster, more accurate dispensing
✓ Dispense history available to doctors
✓ Part of your existing software
✓ No change to doctor’s workflow

“eRx is NOT a ‘nice to have’: it’s a productivity / Quality Care / commercial ‘must have’. It’s as big a technological change as computerised dispensing. Get with it.”

Peter Crothers
Bourke, NSW
How eRx works

**Step 1**
Doctor prints a Script with an eRx barcode, and sends an eScript to the secure Exchange.

**Step 2**
Patient takes the Script to the pharmacy of their choice.

**Step 3**
Pharmacist scans the barcode to download the eScript safely and securely.

**Step 4**
Patient receives their medication.

**Step 5** (optional)
Doctor’s clinical record is automatically updated with the dispense record.

**Repeat Scripts**
Redo Steps 2 – 5
Dispense history in MD3

**Step 2**
Select the “Old Scripts” tab

**Step 3**
Scroll to the right until you can see columns: Dispense Date, Dispense Trade Name, Supply No., Pharmacy

**Step 4**
If the script has been dispensed in an eRx-enabled pharmacy, these columns will be populated.

**Step 5**
To move the columns to appear on the screen without having to scroll right, click on the column heading and drag to the left.
Dispense history in BP

**Ventolin CFC-Free 100mcg/dose Inhaler**

<table>
<thead>
<tr>
<th>Last script</th>
<th>08/09/2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days since last script</td>
<td>6</td>
</tr>
<tr>
<td>Doses supplied</td>
<td>2400</td>
</tr>
<tr>
<td>Doses used per day</td>
<td>12</td>
</tr>
<tr>
<td>Date when all used</td>
<td>16/09/2012</td>
</tr>
<tr>
<td>Number remaining</td>
<td>2328</td>
</tr>
</tbody>
</table>

**Dispensed eScripts for this item:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Dispensed item</th>
<th>Quantity</th>
<th>Pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/01/2011</td>
<td>ASMOL</td>
<td>2x200 dose</td>
<td>MIDWAY PHARMACY</td>
</tr>
<tr>
<td>02/02/2011</td>
<td>ASMOL</td>
<td>2x200 dose</td>
<td>MIDWAY PHARMACY</td>
</tr>
<tr>
<td>15/03/2011</td>
<td>VENTOLIN</td>
<td>2x200 dose</td>
<td>CENTRAL PHARMACY</td>
</tr>
</tbody>
</table>

Last script: 29/02/2012
Quantity given: 2
Repeats given: 5
Check compliance
Doses per day: 12

Save  | Cancel
eRx National Uptake

National coverage in 3 years:

- 13,500 doctors
- 3,200 pharmacies (of 5,000)
- 20 clinical software vendors
- 500,000 scripts uploaded by doctors weekly
- 3.5m dispense records per week
MedView

Community Doctors
Community Pharmacies
Hospital
Aged Care
- Part of PCEHR

- Federally funded PCEHR site
  - Purpose to develop, deploy and test eHealth infrastructure in community pharmacy, GP practices and the Geelong Hospital (Barwon Health)
- Led by the Fred IT Group
- Powered by eRx
- Partnership with 8 health software vendors
In Hospital
Medications are prescribed
BOSSNET

Web Portal
Prescribed
Dispensed
Medications
Prescribed/Dispensed Scripts

Community
General Practitioner generates script

Aged Care
Consented access to information
## Medication Activity Record

**ROWNTREE, Lexie (Miss)**

**Address:** Lot 4 Smith St...

**Phone:** 0003 6012-0002 2744

### Medication Activity Record

<table>
<thead>
<tr>
<th>Date Created</th>
<th>Drug Details</th>
<th>Supply</th>
<th>Type</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>29 Feb 2012</td>
<td>[Cancelled] salbutamol cfc free -- 200 Dose - MET-AERO - 2 DOSE shake well and inhale two puffs by mouth every four hours for exacerbations of asthma</td>
<td>O</td>
<td>DC</td>
<td>C</td>
</tr>
<tr>
<td>10 Feb 2012</td>
<td>clarithromycin - HLAID - 256mg - Tablet - 14 DOSE 1 twice a day as directed</td>
<td>O</td>
<td>P</td>
<td>C</td>
</tr>
<tr>
<td>64 Jan 2012</td>
<td>doxycycline - DOXICL - 100mg - Tablet - 7 DOSE 1 daily with meals</td>
<td>O</td>
<td>P</td>
<td>C</td>
</tr>
<tr>
<td>22 Dec 2011</td>
<td>salbutamol cfc free - VENTOLIN CFC FREE - 200 Dose - MET-AERO - 2 DOSE shake well and inhale two puffs by mouth every four hours when required for exacerbations of asthma</td>
<td>R-1</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>22 Dec 2011</td>
<td>fluticasone propionate cfc free - SERETIDE 125/250 CFC FREE - 125mcg/250mcg 126d - MET-AERO - 1 DOSE shake well and inhale once puffed by mouth in the evening &amp; rinse mouth out with water after use</td>
<td>R-3</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>15 Nov 2011</td>
<td>fluticasone propionate, salmeterol xinafoate - SERETIDE - 125mcg/250mcg - Inhaler - 1 DOSE 1 puff in the evening rinse mouth out after use</td>
<td>O</td>
<td>P</td>
<td>C</td>
</tr>
<tr>
<td>15 Nov 2011</td>
<td>salbutamol sulfate - VENTOLIN - 160mcg puffs - Inhaler - 2 DOSE 2 puff 4 hours pm for exacerbations of asthma</td>
<td>O</td>
<td>P</td>
<td>C</td>
</tr>
<tr>
<td>12 Nov 2011</td>
<td>fluticasone propionate, salmeterol xinafoate - SERETIDE 125/250 CFC FREE - 125mcg/250mcg 126d - MET-AERO - 1 DOSE shake well and inhale once puffed by mouth in the evening &amp; rinse mouth out with water after use</td>
<td>R-2</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>28 Oct 2011</td>
<td>[Cancelled] doxycycline - DOXICL - 100mg - Tablet - 7 DOSE 1 daily with meals</td>
<td>O</td>
<td>FC</td>
<td>C</td>
</tr>
<tr>
<td>27 Oct 2011</td>
<td>doxycycline - DOXICL - 100mg - Tablet - 7 DOSE 2 stat then 1 dc</td>
<td>O</td>
<td>P</td>
<td>C</td>
</tr>
<tr>
<td>15 Oct 2011</td>
<td>fluticasone propionate cfc free - SERETIDE 125/250 CFC FREE - 125mcg/250mcg 126d - MET-AERO - 1 DOSE shake well and inhale once puffed by mouth in the evening &amp; rinse mouth out with water after use</td>
<td>R-1</td>
<td>B</td>
<td>C</td>
</tr>
</tbody>
</table>
Medication Activity Record

ROWNTREE, Lexie (Miss)
Address: Lot 4 Smith St...
Phone and email: 13007/0092...

Date Created | Drug Details | Supply | Type | Source
--- | --- | --- | --- | ---
31 Mar 2012 | clarithromycin - KLACID - 250mg - Tablet - 14 | 0 | P | c
31 Mar 2012 | DOSE 1 x 1 a day as directed

Uploaded By: Adonis Larver
Address: 1 Best Avenue, Pradencey, QLD 4001
Phone: 0772555777
Fax: 0772309977

22 Dec 2011 | salbutamol cfc free - VENTOLIN CFC FREE - 200 Dose - MET-AERO - 2 | 0-1 | B | C
22 Dec 2011 | DOSE 1 x 1 a day as directed

Uploaded By: MOODY PHARMACY
Address: 20 TRENNERY CRESCENT, ELKHOTSFORD, VIC 3867
Phone: 8394181888

## Medication Profile

**Patient Details**

<table>
<thead>
<tr>
<th>Name</th>
<th>Sex</th>
<th>Date of Birth</th>
<th>Address</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROWNTREE, Lexie (Miss)</td>
<td></td>
<td>14/07/1982</td>
<td>Lot 4 Smith St.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Medication Activity Record**

<table>
<thead>
<tr>
<th>Drug Details</th>
<th>Last Entry</th>
<th>First Entry</th>
<th>Times Dispensed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Salbutamol cfc free</strong> - <strong>VENTOLIN CFC FREE</strong></td>
<td>22/12/2011</td>
<td>09/01/2011</td>
<td>2</td>
</tr>
<tr>
<td><strong>Budesonide cfc free</strong> - <strong>BEROTIDE 125/96 CFC FREE</strong></td>
<td>22/12/2011</td>
<td>09/01/2011</td>
<td>4</td>
</tr>
<tr>
<td><strong>Fluticasone propionate cfc free</strong> - <strong>FLUTICASONEP RES Receive 125mcg/25mcg 120p</strong></td>
<td>22/12/2011</td>
<td>09/01/2011</td>
<td>4</td>
</tr>
</tbody>
</table>

**Feedback**

Was this information useful? 🎉 😞 

The patient medication details shown on this and corresponding pages may not show a complete view of the patient's medication history.
Progress

- Project went live on Monday 7th March in Geelong (ahead of target)
- Over 13,000 patients with validated IHI’s with data in MedView
- 320 HPI-O’s being obtained and deployed to participating sites
- Over 195,000 records added to MedView
- More than 1,500 views of medications records by registered practitioners
The Personally Controlled Electronic Health Record

- Launched July 1st 2012
- Consumer View only at this Time
- No software ready for doctors or pharmacists
- Opt In Only
- 8000 consumers signed up so far
- Consumers can restrict information
- Doctors must do health summary
0 new documents sent to the PCEHR since the Shared Health Summary

31-Oct-2010 Shared Health Summary

Author: Dr Chris Javad, General Medical Practitioner, MediHome Croydon, Contact Details

Current & Past Medical History
- 07-Nov-2008: NIDDM
  Comment: Well controlled
- 12-Oct-2011: Depression
  Comment: Intolerant of Prozac

Allergies & Adverse Reactions
- Prozac allergy: Vomiting, Rash (moderate)
- Penicillin allergy: Urticaria

Medicines
- Citalopram (Celica) 20mg tablet:
  One tablet daily
  Reason: Depressive disorder
- Metformin hydrochloride 500mg tablet:
  One tablet twice daily
  Reason: NIDDM - Non-insulin dependent diabetes mellitus

Immunisations
- Administered
  31-Oct-2010: Conva (Haemophilus influenza type b capsular polysaccharide vaccine 7.5 microgram + hepatitis B virus surface antigen vaccine 5 microgram) injection: suspension, 0.5 mL vial (trade product unit of use)

Consumer Entered Information

This view allows you to see Medicines and Allergies & Adverse Reactor recorded by the consumer or their authorised representatives.

Medicare
- Pharmaceutical Benefits Report
- Medicare/DVA Benefits Report
- Australian Organ Donor Register
- Australian Childhood Immunisation Register
Patient Details

Name: Mr Frank Harding
Sex: Male
Date of Birth: 21 May 1946 (64 yrs)
IHI: 8003 6081 6667 5512
Home Address:
17 Rosemary Avenue, Croydon, VIC, 3136, Australia
Postal Address:
17 Rosemary Avenue, Croydon, VIC 3136, Australia
Phone: 0499 801 101 (Workplace)
0499 801 101 (Home)
Email: email@domain.com (Workplace)

Document Details

Type: Shared Health Summary
Creation Date/Time: 31 Oct 2010 12:00+1000
Attested Document ID: 71420707
Document Set ID: da27b680-6a5a-4fc8-b072-b003a160a15b
Document Version: 1
Completion Code: Final

Author

Dr. Chris Javad (General Medical Practitioner)
[HP1: 8003 6141 6666 8846]

Author Contact

Phone: 03 9013 9796 (Workplace)
Email: authen@globalauthens.com (Workplace)

Author Address

Temporary Address:
Sandgate 5555, Albion, QLD, 4010, Australia

Author Organisation

MediHome Croydon
[HP1: 8003 6275 0000 1433]

Author Department

MediHome Croydon

Administrative Observations

No observations

Adverse Reactions

No adverse reactions
Next step: National Medications Repository

- A combined list of prescribed and dispensed medications, regardless of how many different doctors and pharmacies the patient has attended
- Include data from community, hospital and aged care settings
- Accessed from existing clinical software
- Standards compliant & part of PCEHR
Transition to PCEHR

• MedView in the process of being integrated with the PCEHR national infrastructure to become the National Medications Repository (NMR)
• Pharmacy, hospital, aged care and GP desktop vendors integrated to the PCEHR will provide medications to PCEHR NMR via eRx or directly and view medications records within desktop systems
• Consent is provided by the patient electing to participate in the PCEHR and at an individual prescription item level if required
• PCEHR NMR due for deployment in 1st quarter 2013
Future – Automation
Future – Automation
Future – Automation
Future – Automation
Future – Automation
Safer medication begins with a barcode

Print it. Scan it.

Paul Naismith
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paul.naismith@fred.com.au