

# PracSavvy

Clinical Systems Support and Training

[www.pracsavvy.com.au](http://www.pracsavvy.com.au)

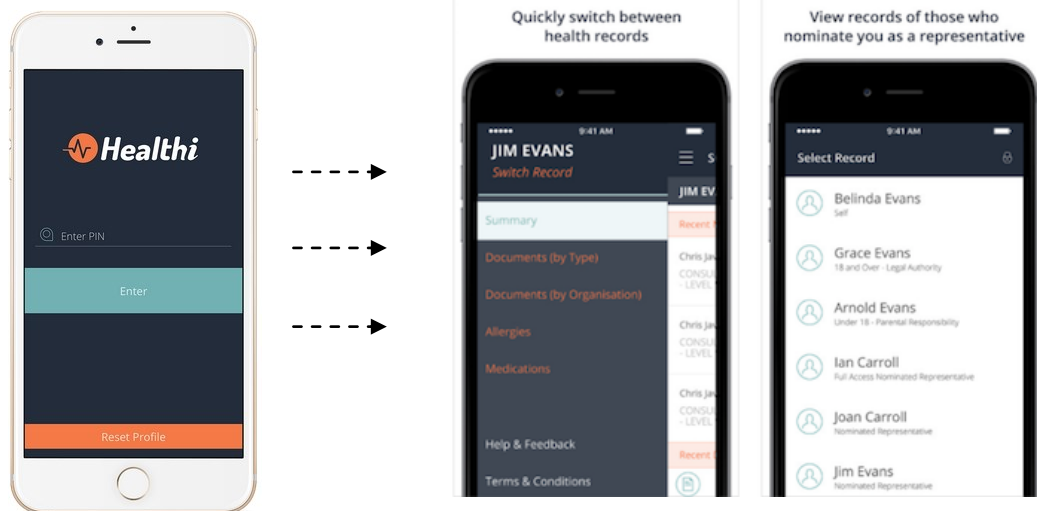
March 2017 — Newsbrief

## MyHR

This last month saw another leap forward in the functionality of the MyHR with the low-key launch of the new *healthi* mobile application (app) from [Chamonix systems](#).

Available for both iPhone and Android (pretty much any other phone) systems, this free application gives the patient an ultra simple interface for viewing their clinical documents and allergy and medication information onscreen. It also initially gives the user the option to select their own health record, or a family member, e.g. dependant child.

After the app is installed, the patient must log in once using their MyGov login. They are then prompted to select a PIN number. Once this is done their PIN number is all that is required to access their key health information onscreen.



The obvious benefit of this app is that the patient can carry it with them, and elect to display the information for any clinician they interact with, *whether the clinician has a compliant MyHR system or not*. The advantages of key health information being essentially “a pin number away”, for medical facilities dealing with older patients or those with non-fluent English seems to be obvious. More so for emergency rooms and after-hours facilities. The mere ability to display a full list of immunisations via the Shared Health Summary or via information direct from the AIR (Australian Immunisation Register) could be immensely helpful to the patient’s non-regular clinician.

**Locally what this gives us is more confidence that GP entered information can be made available at point of consult in our local public hospitals, prior to the hospital systems being fully MyHR compliant.**

There is a link to the brochure [here](#). The evolution of the MyHR continues with the release of this app. The speed in which the MyHR becomes an integral part of providing healthcare efficiently continues to depend upon general practice support and endorsement.

## Templates

The following templates were created this month, and are available in MD or BP format [here](#):

- ◆ ForensicClinic Referral form
- ◆ Hepatitis C Remote Consultation Request for Initiation of Treatment

# PracSavvy

Clinical Systems Support and Training

[www.pracsavvy.com.au](http://www.pracsavvy.com.au)

## PenCat

The February update of PenCat contains some useful updates:

- ◆ **Shingles** - Under the Immunisations..Adult graphs, information on Shingles vaccine status for 70 to 79 year olds.
- ◆ **Ethnicity** -
  - ◇ Filters now have the ability to isolate patients by any recorded ethnicity
  - ◇ Graphs, now have the ability to show the full ethnic profile of your practice.

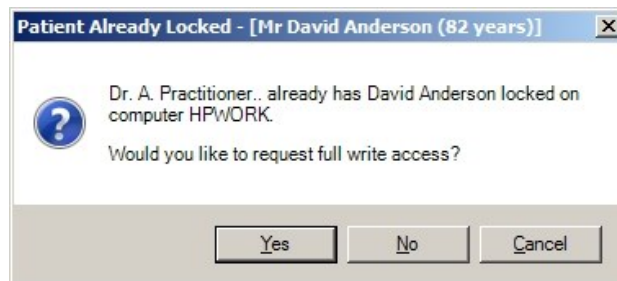
Obviously this information is only available if you have been recording ethnicity details, but yet again this excellent tool gives you the opportunity to know more and more about your practice. If you would like some refresher training using PenCat, please let me know.

## MD

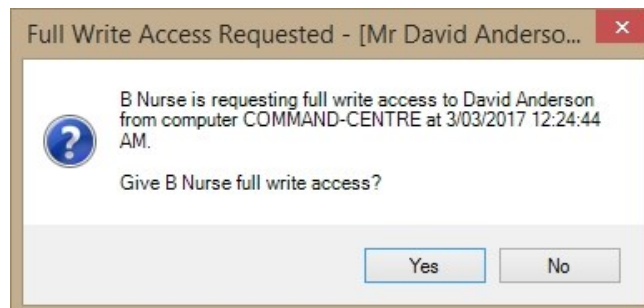
The 3.17 release of MD brings with it the long awaited ability to have 2 users able to enter information in the patient record at the same time. Here's how it works..

In the following example Dr Practitioner has the patient record for Mr David Anderson open. The GP has finished seeing Mt Anderson, and sends him through to the nurse for an immunisation whilst he completes his encounter notes.

The practice nurse attempts to open Mr Anderson's record and see's the following message:



If the nurse replies in the affirmative, the GP will be prompted by the following,



If the nurse answers *No* to the first message, or if the GP refuses the request the record is still made available to the nurse and they will still have the ability to record progress notes and also record an immunisation. The GP will continue to have full access to the record

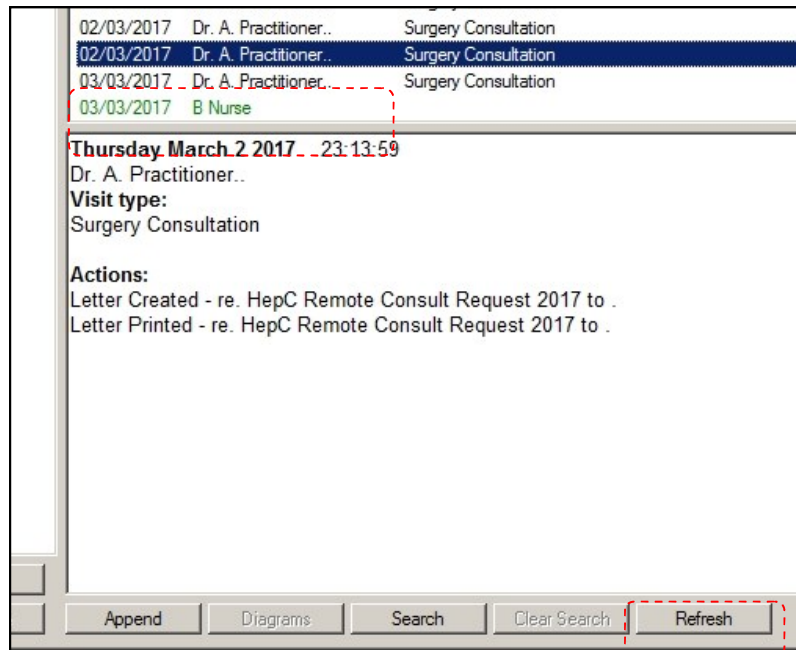
# PracSavvy

Clinical Systems Support and Training

[www.pracsavvy.com.au](http://www.pracsavvy.com.au)

MD

Note the subtle differences in the MD screen when two staff members are sharing the record.



The in-progress visit notes for the user are now shown in green font, (this is the case even if only one person has the record open) Note the *Refresh* button at bottom of illustration that allows the user to update their display to reflect what progress notes the other user has completed during the concurrent access to the file. This refresh button is also available at far right on the *Immunisations* screen.

In our example if the GP had answered in the affirmative to the nurse request, then the nurse would have been given full access and the GP would have only been able to add progress notes or record an immunisation. Note that this lesser access is denoted by the top of the patient record displaying "Read Only", which is actually a little misleading as has been explained above, some actions are still available.

You can also request Full access to a record whilst in "Read Only" mode by utilising the suitably named item under the *Patient* menu in the clinical record.

If the nurse had been granted full access, when he or she exits the record, if the GP still has it open, they will be notified that they have been given full control back.



Your IT support may have to access the *Communication Services utility* to enable this functionality. See next month's issue for more MD 3.17 enhancements.

# PracSavvy

Clinical Systems Support and Training

[www.pracsavvy.com.au](http://www.pracsavvy.com.au)

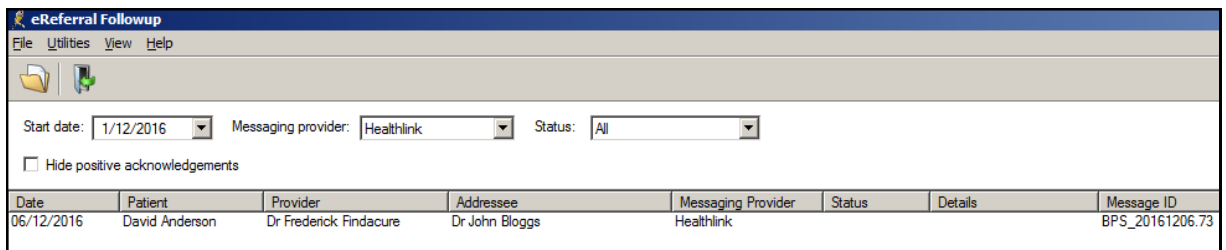
## BP

With more and more practices installing the BP LAVA update, it's probably a good time to check a couple of the highlights of the new release.

**Multiple Location Support** - Comfortably the biggest gain from this release is for the group practices that share their BP database across multiple locations and have GPs who work at more than one of these locations. Where previously you needed to show a GP working at 3 practices as 3 distinct users, BP now allows for multiple provider numbers for a single user. This obviously reduces the user list significantly, and when implemented well, will give improved efficiency across the system.

If you are a multi-location practice especially, and haven't installed the update yet, a planned approach is absolutely necessary as there are things to consider and "ducks to line up". Ensure you liaise fully with your IT technicians and the BP Support people if necessary.

**Ereferral** - There is now a e referral status screen where you can view the confirmation information for documents that you send electronically. It can be found under the *View* menu from the front screen. You can filter the view by Date, Messaging Provider or Status. A message successfully received by the recipient will eventually show the word *Acknowledged* in the *Status* column.



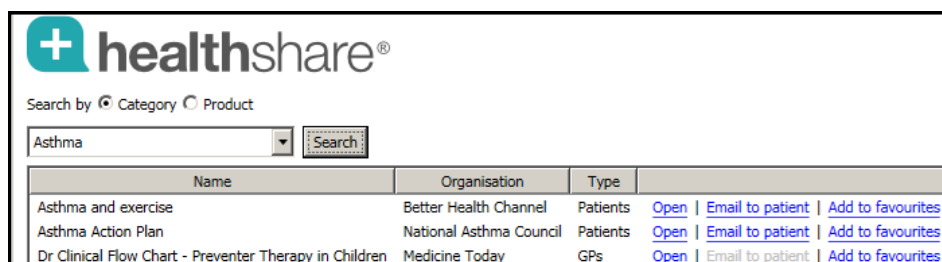
The screenshot shows the 'eReferral Followup' application window. It has a menu bar with 'File', 'Utilities', 'View', and 'Help'. Below the menu bar are icons for a folder and a printer. There are three dropdown menus: 'Start date:' with '1/12/2016', 'Messaging provider:' with 'Healthlink', and 'Status:' with 'All'. There is a checkbox labeled 'Hide positive acknowledgements' which is currently unchecked. Below these controls is a table with the following data:

Date	Patient	Provider	Addressee	Messaging Provider	Status	Details	Message ID
06/12/2016	David Anderson	Dr Frederick Findacure	Dr John Bloggs	Healthlink			BPS_20161206.73

The message status column is generally populated as a result of system level acknowledgement messages, that are returned transparently by the receiving system. There are a variety of clinical system and they do not all function identically in this respect. Similarly there can often be nuances in how these programs are configured as far as acknowledgement goes. So you may see some messages that were successful but not shown as acknowledged.

**Run all checks** - From the *Current RX* section, you can now run allergy, pregnancy etc interaction checks on the current medication list at the click of a button.

**Healthshare Fact Sheets** - Just above the notifications pane in the patient record, the *Fact Sheets* button links to online fact sheets and information for patients or GPs using the healthShare engine.



The screenshot shows the 'healthshare' search interface. It has a search bar with 'Asthma' entered and a 'Search' button. Below the search bar are radio buttons for 'Category' (selected) and 'Product'. Below these are search results in a table:

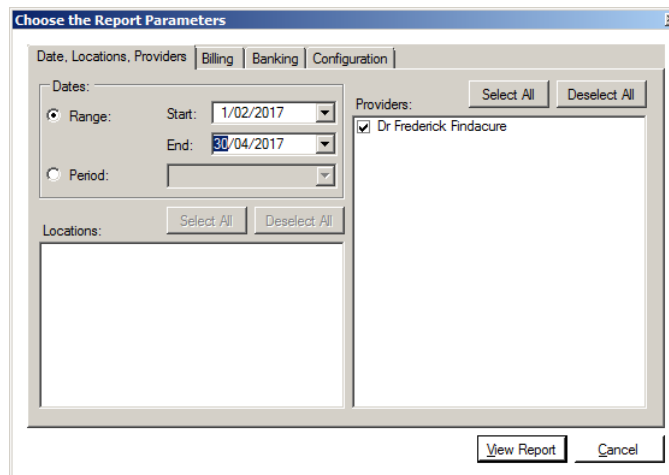
Name	Organisation	Type	Open	Email to patient	Add to favourites
Asthma and exercise	Better Health Channel	Patients	<a href="#">Open</a>	<a href="#">Email to patient</a>	<a href="#">Add to favourites</a>
Asthma Action Plan	National Asthma Council	Patients	<a href="#">Open</a>	<a href="#">Email to patient</a>	<a href="#">Add to favourites</a>
Dr Clinical Flow Chart - Preventer Therapy in Children	Medicine Today	GPs	<a href="#">Open</a>	<a href="#">Email to patient</a>	<a href="#">Add to favourites</a>

Documents can be printed or emailed to the patient, and saved as favourites.

**National Inpatient Medication Chart** - Is now available to be printed via the *File..Print Drug Sheet* menu item in the patient record.

LAVA enhancements continued.

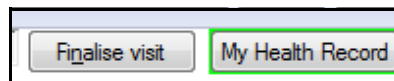
**MyHR - Quarterly Health Summaries Report** - Found under the new *Management..Reports* from the front screen, details how many shared health summaries have been uploaded in the required timeframe.



Note that the report shows number of unique patients as well as number of uploaded health summaries. Also note that it can only report **from the day the LAVA update was installed**. Practices can also utilise PenCat to show Shared Health Summary uploads.

**MyHR - Event Summary** - You can now generate an Event Summary from the *My Health Record* menu in the patient record. This document is designed to detail an encounter by the patient's non-regular practitioner, and is constructed in a very similar way to the Shared Health Summary.

**MyHR - Overnight Lookup** - BP now has a service that checks the next days appointments for any patient that has a MyHR, ensuring that the MyHR button is then highlighted accordingly when the patient record is opened.



Note that the patient must have their Health Identifier (HI) number recorded in BP for this to work, and that the graphic effect depicted above will not display if Windows on your computer does not have the Aero feature enabled. Use this feature in conjunction with the *Bulk Health Identifier Lookup* function available from the *Appointment Book* screen.

Some of the other clinical enhancements in the LAVA update include:

- ◆ Fields for ADF service history and associated preventative health prompt
- ◆ Field for documenting if Advance Care Directive or Power of Attorney exists.
- ◆ Inclusion of Healthlink Smartforms in *Correspondence Out*.
- ◆ Refined filtering choices in the *Follow-up Inbox* screen

As always, please contact me if you would like further assistance using Best Practice Clinical.