



Aged Care Association
Australia

AGED CARE INDUSTRY IT COUNCIL



Aged & Community
Services • Australia

ACIITC

9 April 2010

Draft Regulations for the Healthcare Identifiers Service
eHealth Branch
Primary and Ambulatory Care Division (MDP1003)
Department of Health and Ageing
GPO Box 9848
Parliament House
Canberra ACT 2601

ehealth@health.gov.au

Re: Healthcare Identifiers Regulations 2010

The Aged Care Industry IT Council (ACIITC) which is auspiced by two industry bodies, Aged and Community Services Australia (ACSA) and Aged Care Association Australia (ACAA), welcomes the opportunity to submit comment on the Healthcare Identifiers Regulations 2010.

We are strongly of the view that these regulations are an important step towards an effective electronic health record for Australia and therefore support the passage of the Regulations.

Indeed, the ACIITC is developing a detailed Business Case for an early and practical implementation of ehealth; Electronic medication management in aged care that will use healthcare identifiers as the basic "building block" for communication across aged care, general practitioners, pharmacy and hospital services that will deliver better health outcomes, improve the quality of care and reduce the risk of adverse events to Australians who are aged care recipients.

The consultation paper for the proposed regulations (March 2010) sought feedback on specific points and this is provided as follows:

- Regulation 10 provides penalties for various offences and these have been set at a uniform 50 penalty units (approximately \$6,000) regardless of whether an individual or an organisation commits the offence. The ACIITC would suggest a lesser penalty should apply to offences by individuals. Further, penalties should distinguish between "one off" event offences (Regulation 10.2) as opposed to "systemic" failures (Regulation 10.7 and 10.8).
- Regulation 11 requires identity management systems and processes to comply with information requests from the service operator that are not generally present in aged care providers today, as acknowledged in the consultation paper. Not only would a two year transition period be required but

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resources to assist with the development of these systems and change management required in their implementation. A period of grace for associated penalties would also be appropriate especially where it can be demonstrated by the aged care provider that manual processes have been adopted while awaiting technology solutions.

A continuing dialog on the impacts of the Bill and Regulations will be necessary as will the capital investments required to build and operate the technology solutions required and the change management needed across the industry to implement e-health.

Yours sincerely

A handwritten signature in black ink that reads 'S. Si Ramanathan'. The signature is written in a cursive style and is underlined with a single horizontal stroke.

Suri Ramanathan
Chair, Aged Care Industry IT Council

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