Australian Government
Australian Digital Health Agency

Australian Immunisation Register
My Health Record Conformance Profile

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Product or document version history

Product or document version	Date	Release comments
1.0	21 Dec 2017	Initial release.
1.1	18 Nov 2020	Includes a reference to the CDA Implementation Guide Amendment
1.2	5 Mar 2021	Removed reference to the CDA Implementation Guide Amendment. Added support for CDA conformance level 2. Reinstated requirements from v1.0 of this specification. Added conformance point on Immunisation register entry.

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1 Introduction

1.1 Purpose

This document summarises the requirements for producing systems and consuming systems of Australian Immunisation Register clinical documents that connect to the My Health Record system.

This document lists the specific conformance requirements for the Australian Immunisation Register clinical documents that are in addition to the *Clinical Documents – Common Conformance Profile v1.6* [NEHTA2015]. These documents represent the complete conformance requirements for the Australian Immunisation Register clinical document.

1.2 Intended audience

This document is intended for:

- healthcare providers
- vendors and developers of connecting systems.

1.3 Scope

The scope of this conformance profile is the use of Australian Immunisation Register clinical documents in the context of the My Health Record system.

In this document:

- *producing system* refers to a software system that creates Australian Immunisation Register clinical documents
- *consuming system* refers to a software system that has the role of being a consumer of Australian Immunisation Register clinical documents.

Please refer to the glossary for the meanings of additional terms used in this document.

2 Relevant specifications

The detailed conformance requirements are listed in the specifications below.

Specification	Notes
Australian Immunisation Register Structured Content Specification [DH2017a]	Specifies the data elements and constrained values for an Australian Immunisation Register document at a logical level.
Australian Immunisation Register CDA Implementation Guide [DH2017b]	Specifies the mapping from the structured content specification into a document using a HL7 CDA structure.
Clinical Documents – Common Conformance Profile v1.6 [NEHTA2015]	Specifies common conformance requirements that must be adhered to unless specifically contradicted in this document.

3 Conformance requirements for producing systems

3.1 Objects of conformance

The objects of conformance requirements include:

1 Australian Immunisation Register clinical documents SHALL be produced, superseded or removed only by the registered repository operated by Services Australia.

2 AIR clinical documents SHALL NOT be produced, superseded or removed by:

- clinical information systems (CIS)
- contracted service provider (CSP) systems
- registered consumer portals
- registered provider portals
- registered repositories other than the AIR registered repository.

3.2 Conformance levels

The level of CDA conformance for Australian Immunisation Register clinical documents SHALL be CDA levels 2 or 3A, which are defined in the *Clinical Documents – Common Conformance Profile v1.6* [NEHTA2015].

3.3 CDA extensibility

The following variation to the *Clinical Documents – Common Conformance Profile v1.6* [NEHTA2015] applies to the production of Australian Immunisation Register clinical documents by the registered repository:

3.3.1 Level 2

1 Additional data elements MAY be included in the clinical document's structured data or narrative to the extent that those additional data elements partially or completely replace the data elements defined in the CDA Implementation Guide.

3.3.2 Level 3A

1 Additional data elements MAY be included in the clinical document's structured data or narrative.

3.4 Immunisation register entries

When constructing an Australian Immunisation Record CDA document:

1 The following line in the CDA Mapping table for 7.1.1 IMMUNISATION REGISTER ENTRIES:

`component[ire]/section/@code="101.17039"`

SHALL now be read as:

`component[ire]/section/@code="101.16658"`

(This requirement overrides the CDA Implementation Guide).

2 The following line in the CDA Mapping table for 7.1.1.1 Vaccine Administration (MEDICATION ACTION:

`entry[med_act]/@typeCode="DRIV"`

SHALL now be read as:

`entry[med_act]/@typeCode="COMP"`

(This requirement overrides the CDA Implementation Guide).

3 The document MAY NOT have the custodian organisation's name or entity identifier.

(This is a relaxation of requirement 023734 in the Clinical documents – common conformance profile, v1.6).

4 The value of the following data elements MAY have a nullFlavor:

a Vaccine Administration Instance Identifier

b Vaccine Cancellation Instance Identifier

c Vaccine Cancellation Reason Instance Identifier

4 Conformance requirements for consuming systems

4.1 Objects of conformance

The objects of conformance requirements include:

1 Australian Immunisation Register clinical documents MAY be consumed by:

- clinical information systems
- CSP systems
- registered consumer portals
- registered provider portals.

2 Australian Immunisation Register clinical documents SHALL NOT be consumed by:

- registered repositories.

Acronyms

Acronym	Description
CDA	Clinical Document Architecture
CIS	clinical information system
CSP	contracted service provider

Glossary

Term	Meaning
clinical document	A clinical document is a document that provides personal health information about an individual. Examples include shared health summary, event summary, discharge summary, referrals and pathology result report.
Clinical Document Architecture (CDA)	An HL7 standard intended to specify the encoding, structure and semantics of clinical documents for exchange.
clinical information system (CIS)	A system that deals with the collection, storage, retrieval, communication and optimal use of health related data, information, and knowledge. A clinical information system may provide access to information contained in an electronic health record, but it may also provide other functions such as workflow, order entry, and results reporting.
conformance	A measurement (by testing) of the adherence of an implementation to a specification or standard.
consuming system	A software system that has the role of being a consumer of clinical documents.
contracted service provider (CSP)	A third-party organisation that supplies health software as a service to healthcare organisations.
MAY	This word, or the term OPTIONAL, means that an item is truly optional. One implementer may choose to include the item because a particular implementation requires it, or because the implementer determines that it enhances the implementation while another implementer may omit the same item. An implementation which does not include a particular option must be prepared to interoperate with another implementation which does include the option, perhaps with reduced functionality. In the same vein, an implementation which does include a particular option must be prepared to interoperate with another implementation which does not include the option (except of course, for the feature the option provides). Source: *Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels*
producing system	A software system that has the role of generating and issuing conformant clinical documents suitable for use by other digital health participants.
registered consumer portal	A third-party portal used by consumers to access information on the My Health Record system that is registered with the My Health Record system as a registered portal operator.
registered provider portal	A third-party portal used by healthcare providers to access information on the My Health Record system that is registered with the My Health Record system as a registered portal operator.

Term	Meaning
registered repository	A third-party repository used to store clinical documents and other clinical data that connects to the My Health Record system. A repository may store clinical documents in either a proprietary format or a CDA format.
SHALL	This word, or the term REQUIRED, means that the statement is an absolute requirement of the specification. Source: Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels.

References

[DH2017a]	*Australian Immunisation Register Structured Content Specification v1.0,* Australian Digital Health Agency, 21 Dec 2017
[DH2017b]	*Australian Immunisation Register CDA Implementation Guide v1.0*, Australian Digital Health Agency, 21 Dec 2017
[NEHTA2015]	*Clinical Documents – Common Conformance Profile v1.6*, Australian Digital Health Agency, 10 Apr 2015