Clinical Application Systems – Alerts, Health Conditions, Allergies or Adverse Drug Reactions

Policy Number 4.014

Policy Function Leadership and Management

Issue Date 6 October 2017

Summary The information contained within the Justice Health & Forensic Mental Health Network (JH&FMHN) Clinical Application Systems is considered an integral part of the patient’s Health Record and is used for the provision of direct care, research, quality improvement, education, analysis of data, health service evaluation, planning, workplace health/safety and legal purposes.

This policy has been developed to provide a standard framework for recording and documenting Alerts, Health Conditions and Allergies or Adverse Drug Reactions concerning a patient within the Clinical Application Systems and paper-based Health Record.

Responsible Officer Executive Director Corporate Services

Applicable Sites ☑ Administration Centres (JHAC, D&A Central Discharge Planning Office)
☑ Community Sites (e.g. Court Liaison Service, Community Integration Team, etc.)
☑ Health Centres (Adult Correctional Centres or Police Cells)
☑ Health Centres (Juvenile Justice Centres)
☑ Long Bay Hospital
☑ Forensic Hospital

Previous Issue(s) Policy 4.014 (Dec 2014; Nov 2013)

Change Summary Addition of the Alerts Definition Document
Inclusion of CHIME
General update including hyperlinks, legislations

TRIM Reference POLJH/4014

Authorised by Chief Executive, Justice Health & Forensic Mental Health Network
1. Preface

The policy applies to all Justice Health & Forensic Mental Health Network (JH&FMHN) staff, including agency staff, contractors, vendors, privately operated correctional facilities and other persons who have access to electronic personal health information of a patient’s Health Record stored in JH&FMHN Clinical Application Systems iPM Patient Administration System (PAS), the Justice Health electronic Health System (JHeHS) and Community Health Information Management Enterprise (CHIME). This policy applies to those users who are authorised to access the system remotely and also relates to the paper-based Health Record.

Compliance is mandatory under the Health Records and Information Privacy Act 2002 (HRIPA) and the Privacy and Personal Information Protection Act 1998 (PPIPA), for management, personnel and all persons handling electronic information, whether directly or indirectly, involved in client service delivery.

This policy has been developed to provide a standard framework for documenting Alerts (Clinical and Non-Clinical), Health Conditions and Allergies or Adverse Drug Reactions concerning a patient within the Clinical Application Systems. As JHeHS is the source of truth for recording Health Conditions and Allergies or Adverse Drug Reactions, and PAS is for Alerts, the flow of information across systems between JH&FMHN, Corrective Services NSW (CSNSW) and Juvenile Justice NSW (JJNSW) including the operational requirement for risk management of patients occurs.

The information contained within the Clinical Application Systems is considered an integral part of the patient’s Health Record and are used for the provision of direct care, research, quality improvement, education, analysis of data, health service evaluation, planning, workplace health/safety and legal purposes. For more information relating to JH&FMHN clinical documentation, refer to JH&FMHN policy 4.020 Health Records.

All Alerts, Health Conditions and Allergies or Adverse Drug Reactions are used to ensure that clinicians record and review important information about a patient’s status pertaining to their care. The Alerts, Health Conditions and Allergies or Adverse Drug Reactions must be reviewed within the Clinical Application Systems and paper-based Health Records on each occasion of patient contact. The patient’s Health Record aims to have consistent standards and content that is based on best practices while allowing flexibility to tailor systems to suit local business needs and processes. The protocols outlined within this policy is aimed at assisting JH&FMHN clinicians in the management of Alerts, Health Conditions and Allergies or Adverse Drug Reactions towards patient care to support the efficient and effective treatment of patients.

This policy aims to:

- improve patient safety and continuity of care;
- assist with patient movement and transfer;
- provide guidelines to assist standardised documentation; and,
- assist with auditing and reporting needs.

2. Policy Content

2.1 Mandatory Requirements

All JH&FMHN clinical staff must comply with recording and managing Alerts, Health Conditions and Allergies or Adverse Drug Reactions within the patient’s Health Record. Specific responsibilities are outlined in this
policy. The NSW public health sector, as with all public sector agencies in NSW, is required to comply with the HRIPA and PPIPA. Both specify a series of rules designed to protect the privacy of personal information, including personal health information, in NSW.

It is the responsibility of all NSW Health personnel and their contractors to be aware of and comply with the requirements outlined in the NSW Health Privacy Manual for Health Information and PD2015_036 Privacy Management Plan – NSW Health.

2.2 Implementation – Roles & Responsibilities

All JH&FMHN Clinical Application System users must ensure they follow required procedures relating to Alerts, Health Conditions and Allergies or Adverse Drug Reactions and ensure they understand their responsibilities under policy and legislation.

Managers are responsible for:

- Monitoring Alerts, Health Conditions and Allergies or Adverse Drug Reactions to ensure that all staff are compliant with the process; and,
- Ensuring that staff directly reporting to them attend mandatory Clinical Application Systems training as required (includes existing staff who may require training as a result of change of position) by contacting the Clinical Application Systems training team: clinappstraining@justicehealth.nsw.gov.au.
  - All new staff to receive training during orientation week; however, management is to notify the team of any agency staff who do not attend orientation.

Clinicians are responsible for:

- Managing Alerts, Health Conditions and Allergies or Adverse Drug Reactions relating to their patients;
- Assessing the impact of any Alerts, Health Conditions and Allergies or Adverse Drug Reactions by taking the appropriate action to ensure compliance with any risk reduction and management plans detailed within the patient’s Health Record;
- Creating, recording, reviewing and updating Alerts, Health Conditions and Allergies or Adverse Drug Reactions in JHeHS on each occasion of patient contact;
- End-dating Alerts, Health Conditions and Allergies or Adverse Drug Reactions that are no longer applicable to the patient;
- Discussing clinically significant patient Alerts, Health Conditions and Allergies or Adverse Drug Reactions during clinical handover; and,
- Ensuring that the paper-based Health Record and Clinical Application Systems accurately reflect Alerts, Health Conditions and Allergies or Adverse Drug Reactions at all times.

Clerical Staff are responsible for:

- End-dating of certain Non-Clinical Alerts as per the local facility PAS Business Processes; and,
- Ensuring all Downtime packages are available at the Health Centre for use when required.
Clinical Applications Team are responsible for:

- Providing education and assisting line managers with the determination of necessary competencies / training requirements for personnel performing work that requires them to use the Clinical Application Systems; and,
- Ongoing back end system maintenance of Alerts, Health Conditions and Allergies or Adverse Drug Reactions.

Information Management (IM) is responsible for:

- Reviewing and maintaining Alerts, Health Conditions, Allergies or Adverse Drug Reactions Reference Sets and Definition documents inclusive of requests for changes and additions;
- Auditing compliance and data integrity through reports / searches of Alerts, Health Conditions and Allergies or Adverse Drug Reactions;
- Monitoring the Australian Medicines Terminology (AMT) updates; and,
- Requesting updates to Clinical Application Systems as required.
- Quality checking Downtime forms within Clinical Application Systems.

3. Procedure Content

The level of access a staff member has to manage Alerts, Health Conditions and Allergies or Adverse Drug Reactions in the Clinical Application System depends on their roles and the user groups to which they are assigned. For step-by-step Clinical Application System procedures refer to the relevant Clinical Application Systems tip sheets.

3.1 Alert Definition Document

The Alert Definition Document, only available within the guidelines dropdown in PAS, categorises Clinical and Non-Clinical Alerts into further sub categories. Staff must refer to the Alerts Definitions Document to understand the Alerts definition / rationale for use, rules, the source of the Alert, its review cycle that includes end dating and also whether the Alert is shared with CSNSW and/or JJNSW.

Staff must be aware that the source of truth for Health Conditions and Allergies or Adverse Drug Reactions is JHeHS. Where the Alerts source is identified as JHeHS, the health condition, allergy or adverse drug reactions core information automatically flows back into PAS to prepopulate as a read only Alert, noting the recorded health condition and allergy within the comments field.

Where the Alerts source is identified as PAS, the Alert flows into JHeHS and is displayed in the patient’s Single Patient View and Conditions/Alerts tab as a read only Alert.

3.2 Patient Alerts, Health Conditions and Allergies or Adverse Drug Reactions

3.1.1 Viewing and Verifying

Clinicians must view the patient’s Alerts, Health Conditions and Allergies or Adverse Drug Reactions status prior to treating the patient.
3.1.2 Recording

Recording Alerts, Health Conditions and Allergies or Adverse Drug Reactions is part of the assessment process for all patients. If required, an Alert, Health Condition and Allergy or Adverse Drug Reaction be recorded within the appropriate Clinical Application System on each occasion of patient contact.

<table>
<thead>
<tr>
<th>Type</th>
<th>Clinical Application System</th>
<th>Paper-based Health Record</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alerts</td>
<td>PAS</td>
<td>Documented</td>
</tr>
<tr>
<td>Health Conditions</td>
<td>JHeHS</td>
<td>Documented</td>
</tr>
<tr>
<td>Allergies or Adverse Drug Reactions</td>
<td>JHeHS</td>
<td>Documented</td>
</tr>
</tbody>
</table>

All Mental Health recorded Health Conditions in JHeHS will automatically display in CHIME for assignment at data collection review and/or discharge. The ability to add any Health Conditions in CHIME is not available.

All existing patient Alerts, Health Conditions and Allergies or Adverse Drug Reactions should be reviewed as it may be appropriate to update or end-date a previous Alert, Health Condition and Allergy or Adverse Drug Reaction before creating a new one within the appropriate Clinical Application System.

Staff should not attempt to select an Alert, Health Condition and Allergies or Adverse Drug Reactions for a purpose other than what it is intended to be selected for. Refer to s3.1.5 if an Alert, Health Condition and Allergy or Adverse Drug Reaction cannot be identified within the Clinical Application System.

Under the NSW Health Privacy Manual for Health Information it is essential that no sensitive clinical information, such as a patient’s HIV status, should be entered in the free text fields of any Alerts, Health Conditions and Allergies or Adverse Drug Reactions.

3.1.3 Editing and Deleting

The need to edit a patient’s Alerts, Health Conditions and Allergies or Adverse Drug Reactions will only occur if the user wants to change any details within the comments or date fields.

If any of the patient’s Alerts, Health Conditions and Allergies or Adverse Drug Reactions are incorrect, it must be end dated and the correct Alert, Health Condition and Allergy or Adverse Drug Reaction must be recorded in the appropriate Clinical Application System and documented within the patient’s paper-based Health Record.

A Health Condition and Allergy or Adverse Drug Reaction cannot be deleted by any JH&FMHN staff. If any are applied to a patient in error, they must be end dated and noted as ‘added in error’.

3.1.4 End-dating

All patient Alerts, Health Conditions and Allergies or Adverse Drug Reactions must be end-dated / inactivated if they are no longer applicable to the patient within the Clinical Application System. This should also be documented within the patient’s Health Record.

Any inbound Alerts from CSNSW Offender Integrated Management System (OIMS) or JJ Client Information System (CIMS) must not be end-dated by JH&FMHN staff.

3.1.5 Cannot Locate: Request to Add, Change or Remove

When a, Health Condition and Allergy or Adverse Drug Reaction cannot be identified, staff must complete an online JHeHS change request form that is available on the intranet. Information Management (IM) are
responsible for the service request to locate the Alerts, Health Conditions and Allergies or Adverse Drug Reactions within the Clinical Application Systems Reference Sets.

When a new Alert is required, staff must complete the [Request for a new Alert form](#) and submit it to IM.

When an existing Alert requires changing, staff must complete the [Request to update an existing Alert form](#) and submit it to IM.

### 3.3 Medications

JHeHS is not a medication management application, but it does allow the user to record and view patient’s medications within JHeHS electronic forms (eforms). All the medications loaded within JHeHS are from the Australian Digital Health Agency Australian Medicines Terminology and are managed by IM on a regular basis pending any AMT version release. The level of access a staff member has to record medications for a patient depends on their roles and the user groups to which they are assigned.

When a medication cannot be identified, staff must complete an online [change request form](#) that is available on the intranet. IM is responsible for the service request to locate the medication within the Clinical Application System Reference Sets.

### 3.4 Downtime

Downtime forms must be made available within all clinical areas. All downtime forms can be accessed and printed via the [intranet](#). There are paper Downtime forms available to document patient Alerts, Health Conditions, Allergies or Adverse Drug Reactions. It is the responsibility of all clerical staff to ensure that there are numerous forms available in the event of a Clinical Application System being unavailable. These forms must be made available for clinical and clerical staff to capture information before the individual that completes it then retrospectively updates the patient’s Health Record within the correct Clinical Application System when Downtime has ended. If required, this should also be communicated via Clinical Handovers.

Following downtime, all Downtime forms must be sent to the Health Information and Record Service for quality checking and appropriate destruction.

### 3.5 Reporting, Quality Control and Auditing

There is an increased importance to ensure data integrity is maintained and as a result:

- A prescriptive audit schedule will assist IM to ensure that any changes to Alerts, Health Conditions and Allergies or Adverse Drug Reactions are monitored for accuracy and compliance.
- Paper-based health records are audited as per the JH&FMHN policy [4.020 Health Records](#).
- Findings from audits should be tabled at the Audit and Risk Management Committees for review and follow-up.

The following information can be extracted to allow continuous data monitoring:

- For Alerts:
  - Statistics by Alert type, patient name and location (PAS Report - JH_PMI001 - Statistics by Alert Type, Patient Name and Location); and,
  - Alerts due for review (PAS Report - JH_PMI002 – Patient Alerts with Review Date).

- For Health Conditions and Allergies or Adverse Drug Reactions:
Clinical Applications – Alerts, Health Conditions and Allergies or Adverse Drug Reactions

- Conditions/Alerts Search via JHeHS.

3.6 Documentation

Any information contained within a patient’s Health Record is subject to disclosure on receipt of a request under the Health Records and Information Privacy Act 2002 (HRIPA) or the Government Information (Public Access) Act 2009 (GIPA). All information recorded must be accurate and maintain patient confidentiality as per the NSW Health Privacy Manual for Health Information.


Alerts, Health Conditions and Allergies or Adverse Drug Reactions in the Clinical Application Systems and paper Health Record should correspond, are current and accurate at all times.

3.7 Permissible and Appropriate Use of Clinical Application Systems

All Clinical Application Systems must be used in a manner that complies with the principles and standards outlined in JH&FMHN policy 4.020 Health Records. Users must ensure only valid information is entered.

3.8 Official Records

A patient’s Health Records nature and content within the Clinical Application Systems and its use constitutes a JH&FMHN record, which may be subject, inter alia, to the State Records Act (1988), the Government Information Public Access Act 2009 (GIPA) and the HRIPA.

4. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

5. Legislation and Related Documents

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<tbody>
<tr>
<td>Commonwealth Privacy Act (1988) (Cth)</td>
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<tr>
<td>Government Information (Public Access) Act 2009</td>
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<tr>
<td>Health Services Act 1997</td>
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<td>Health Records Information and Privacy Act 2002</td>
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<tr>
<td>Privacy and Personal Information Protection Act 1998</td>
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<td>State Records Act 1998</td>
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Clinical Applications – Alerts, Health Conditions and Allergies or Adverse Drug Reactions

NSW MoH Policy Directives

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<th>Directive</th>
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<tbody>
<tr>
<td>PD2009_057</td>
<td>Records Management Protocol</td>
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<tr>
<td>PD2012_069</td>
<td>Health Care Records – Documentation and Management</td>
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<tr>
<td>PD2013_033</td>
<td>Electronic Information Security Policy – NSW Health</td>
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<tr>
<td>PD2015_049</td>
<td>NSW Health Code of Conduct</td>
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<tr>
<td>NSW Health Privacy Manual for Health Information</td>
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JH&FMHN Policies

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<thead>
<tr>
<th>Policy</th>
<th>Description</th>
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<tbody>
<tr>
<td>4.020</td>
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JH&FMHN forms

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<td>Tip Sheets</td>
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<td>Change Request Form</td>
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<tr>
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<td>Alert Definitions Document (PAS - Guidelines)</td>
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