



## Driving adoption in Australia including development of demonstrator application

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*Presenter: Philip Wilford, NEHTA*

### Audience

NRCs driving the adoption of SNOMED CT within their country, GP software vendors and those interested in seeing a live demonstration of using a terminology service within a clinical information system.

### Objectives

To share the approach used in Australia to encourage implementation within the primary care sector so other NRCs and vendors can adopt more effective strategies for adoption of SNOMED CT into software local to their country. To demonstrate the use of a terminology server to access SNOMED CT-AU and AMT.

### Abstract

There are numerous barriers limiting the adoption of SNOMED CT within existing software. The most prominent is that existing systems already have various code systems in place, and moving from these doesn't come without cost. However, the variety of code systems in use prohibits effective interoperability. Previous efforts including education and State/Federal Government 'endorsement' have had limited success.

A revised framework was required to ensure implementation from the perspective of a national shared health record (PCEHR). General Practice (GP) is recognised as the major stakeholder in a patient's routine care, so the revised implementation approach involved:

- Addressing the sector through direct and individual contact with GP vendors
- Collaboration with the individual vendors on structure and processes that would work for them; such as workshops and consultation.
- Technical support and tooling.
- Specific contractual arrangements including financial incentives.

As part of the Technical support and tooling, an electronic Medicines Management (eMM) Terminology Demonstrator was developed to showcase the uses and benefits of AMT & SNOMED CT-AU within various healthcare settings. It was designed as an exemplar implementation of a terminology browser which could demonstrate the browsing and navigation of terminology using a terminology server (CSIRO-Ontoserver), how to create a best possible medications history from multiple medication sources underpinned by terminology (AMT) and prototyping of new eMM capability. The GP focused strategy has involved vendors adopting SNOMED CT initially in a very specific context, identified by them; either due to recognised benefit, reasonable effort and/or cost. Examples of the specific solutions being implemented by the vendors includes:

- AMT as a prescribing code system
- Recording of Adverse Reactions – both medicinal and non-medicinal.
- Pilot mapping and information exchange exercises.

It is expected that as vendors become familiar with implementing SNOMED CT in these limited scenarios they will be more prepared to adopt SNOMED CT more broadly in their systems.