## ICPC-2 in Australia 2013

Australia has been involved with the development of ICPC and its precursors since the formation of the Wonca Classification Committee in Melbourne in 1972. ICPC-2 has been distributed in Australia by the Family Medicine Research Centre (FMRC) on behalf of Wonca since 1996. ICPC-2 has been used for classifying general practice activity data in the Bettering the Evaluation and Care of Health (BEACH) national GP activity data collection and analysis program for the last 15 years. ICPC-2 is used in conjunction with a local interface/clinical terminology in ten types of GP electronic health records in Australia. The current user base is approximately 4000 GPs in 520 practices. ICPC-2 is widely used by researchers to classify morbidity data in general practice research and by educators, including the Royal Australian College of General Practitioners, to classify the content of educational programs for GPs. ICPC-2 is included in the Australian Family of International Classifications as the standard for primary care morbidity data and for self-reported patient morbidity data. While ICPC-2 has been accepted as a standard it has not been mandated for use in GP EHRs.

The FMRC is currently contracted by the International Health Terminology Standards Development Organisation (IHTSDO) to develop an International General/Family Practice RefSet of SNOMED CT with a map to ICPC-2. This is being undertaken in collaboration with the International General/Family Practice RefSet and ICPC Mapping Project Group under a harmonization agreement between the IHTSDO and Wonca. It is expected that the GP/FP RefSet and Map to ICPC will be Field Tested in Australia (along with other countries) in 2013. It is predicted that the use of ICPC-2 in conjunction with SNOMED CT will become widespread in Australian general practice over the next few years.

The introduction of the centralised person controlled electronic health record (PCEHR) into Australia this year has led the Australian Government to require morbidity coding of data sent to the PCEHR from GP desktop EHRs. The Government has funded GP EHR vendors to modify their software to make this possible. The GPs have a choice of coding systems including ICPC-2 plus. It is expected that eventually SNOMED CT will become the standard terminology used in the PCEHR and that this will be mapped to ICPC and ICD.