ICPC-2 in Australia 2016

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 18 years. ICPC-2 is used in conjunction with a local interface/clinical terminology in ten brands of GP electronic health records in Australia. The current user base is approximately 3,000 full-time equivalent GPs across more than 550 practices. ICPC-2 is widely used by researchers to classify morbidity data in general practice research and by educators. 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.

On 30 September 2015, the IHTSDO and Wonca jointly announced the release of the international general/family practice SNOMED CT subset and ICPC-2 map. The FMRC began mapping the Australian PLUS terminology to SNOMED CT (via the general/family practice subset), however this work has now been suspended.

The BEACH program ceased on 7th April 2016 following withdrawal of Australian government funding for the program. The University of Sydney subsequently closed the Family Medicine Research Centre on 30 June 2016. Ongoing research using the BEACH database will be managed by the Menzies Centre for Health Policy and the Discipline of General Practice at the University of Sydney. The Classification and terminology work of the FMRC have been transferred to the National Centre for Classification in Health (NCCH) directed by Professor Richard Madden. Prof Helena Britt and Associate Professor Graeme Miller will advise the Menzies Centre and the NCCH in an honorary capacity. Dr Julie Gordon will join the staff of NCCH on a part time basis on her return from maternity leave in May 2017.

The future promotion of ICPC in Australia and associated terminology development is uncertain. Australian Government policy in relation to the use of terminology in electronic health records is to progressively mandate the 'native' use of SNOMED CT. There appears little government interest neither in mapping existing GP terminologies to SNOMED CT nor in mapping SNOMED CT to ICPC-2 or ICD10AM.

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