

**AUSTRALIAN COMMISSION  
ON SAFETY AND QUALITY IN HEALTH CARE**



**Key changes: Requirements for information  
communication and reporting**

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Table 1 contains a mapping of significant changes between the fourth edition and fifth edition of the Requirements for information communication and reporting. Noting, this does not include minor spelling and/or grammatical changes or changes to references.

**Table 1: Key changes between the fourth edition and fifth edition of the Requirements for information communication and reporting**

| Fourth Edition, 2020  | Fifth Edition, 2022   |
|---|---|
| <b>Security of electronic communications</b>  |   |
| C2.1(iv) No footnote.   | C2.1(iv) Footnote that refers to the Commission’s PA for SMS structured report format to draw attention to the advisory note. S22 added   |
| <b>Definitions</b>  |   |
| Confidentiality: means limiting access to information to persons authorised to access, and/ or use documents or information that is considered private. | Confidentiality: means the state of keeping or being kept secret or private.  |
| Interoperability: means the ability of two parties, either human or machine, to exchange data or information in a manner that preserves shared meaning. | Interoperability: means the ability of computerised systems to connect and communicate with one another readily to exchange and make use of data and information. In the health system, interoperability of digital systems means seamless and secure connections are made between clinical information systems that previously were disconnected and siloed, and that patient information can be shared and clinical decisions made in light of all the relevant data available, delivering better care as a result. |
| <b>Abbreviations</b>  |   |
| This is a new addition.   | NSPR: National Structured Reporting of Cancer Project in Australasia  |
| This is a new addition.   | SNOMED: Systematized Nomenclature of Medicine<br>SNOMED CT AU: Systematized Nomenclature of Medicine-Clinical Terms - Australia   |