Conference Abstract

Primary Health Care Quality Improvement Initiative using Pen Clinical Audit Tool in South Eastern Sydney

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Abstract

Background: The Clinical Audit Tool (CAT) analyses clinical information from GP Clinical Desktop Systems. It translates data into real statistical and graphical information that is easy to understand and action. This allows practitioners to assess and improve the quality and completeness of patient information. The benefit to the practice is to assist with its ongoing accreditation and provide opportunities to grow practice income. The emphasis of the tool is to help practice staff to take specific action to improve patient coverage in chronic disease management and prevention.

South Eastern Sydney Medicare Local (SESML) have been involved with assisting General Practice to clean up their patient database following on the success of Sutherland Division of General Practice. Each practice receives bi monthly reports plotting performance across the four key indicators. Focussing on clinical coding and developing registers of chronic disease. PenCAT is being used with clinical software training to assist practices to clean up the practice database and then identify groups of patients with chronic diseases. SESML will then build on this initial project to support general practices to organise nurse led clinics and provide patient education.

Method/Design: Pen Computer Systems’ Clinical Audit Tool (PenCAT), is a productivity software application for all general practice staff enabling a practice to conduct basic data analysis of their patient database to assist with patient healthcare, clinical review and practice management. PenCAT collects and collates patient and billing data, presenting statistical information in graphs and tables, combined with the ability to produce patient lists for further review and follow up contact or actions. PenCAT is compatible with the commonly used GP practice software including Medical Director 3 and Best Practice.

This program is available to practices in the South Eastern Sydney region with the goal to improve performance across the following 4 indicators;

- Diabetic Patients
- Coronary heart Disease Patients
- Number of coded diagnoses in the past medical history

• Number of medications in the current medication list printed in the past 6 months.

Practices need to demonstrate improvement across these four indicators in the initial 6 months of the program.

**Discussion**: In the first 3 months early uptake with the general practices in the SESML area is strongly positive with 72 practices enrolling out of a potential of 196. This positive start allows time for practices to clean up their database in preparation for more robust clinical focus.

**Keywords**

quality improvement; primary health care; clinical audit

**PowerPoint presentation**