

The use of the **Practice Health Atlas** in Australian General Practice



Delivering local health solutions through general practice

General Practice

- **95%*** of GPs work in a computerised practice
- **89%*** of GPs regularly use medical software for prescribing or clinical recording
- **Medical data widely under utilised for business and quality improvement**

* e-health from a GP perspective, Dr John Kastrissios, 2008



Practice Health Atlas

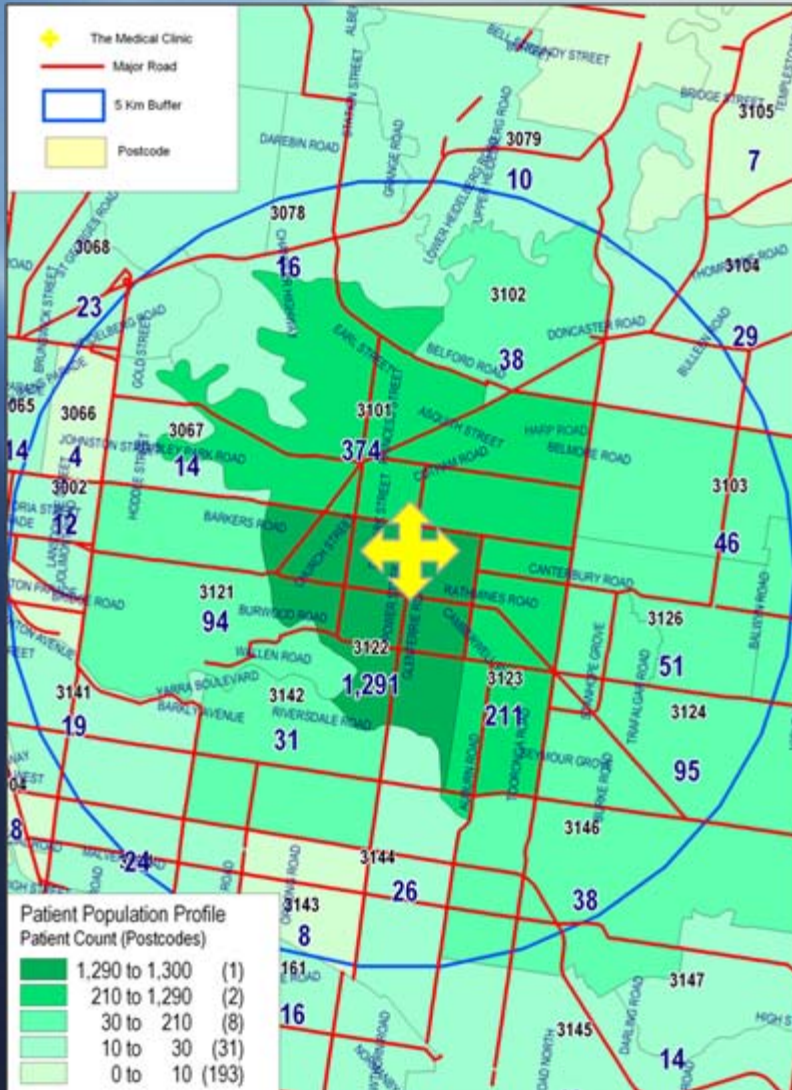
Developed by Adelaide Western General Practice Network

- **Extracts and synthesises practice clinical and business data**
- **Uses Geographical Information Systems**
- **Generates a comprehensive report detailing the business and clinical practice profile**
- **Delivers innovative and sustainable e-health solutions**

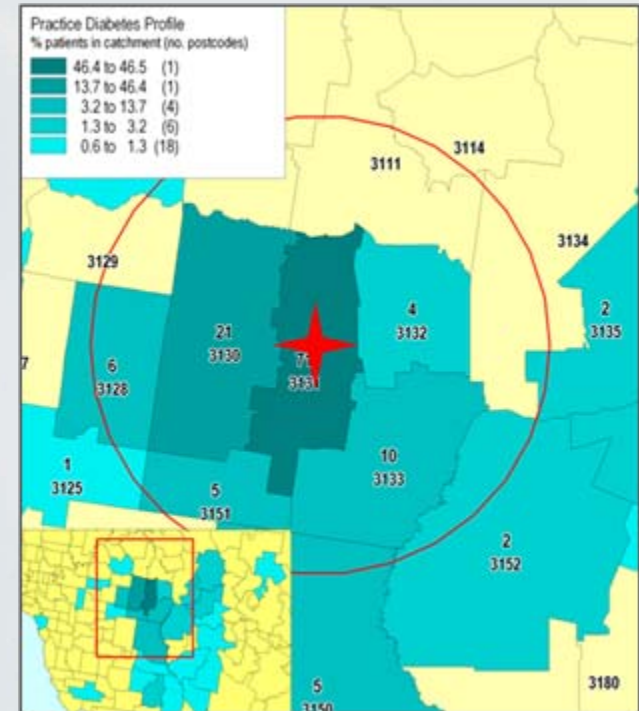


Population Health Profiling

Epidemiological Mapping



Map 1 Practice Population Profile

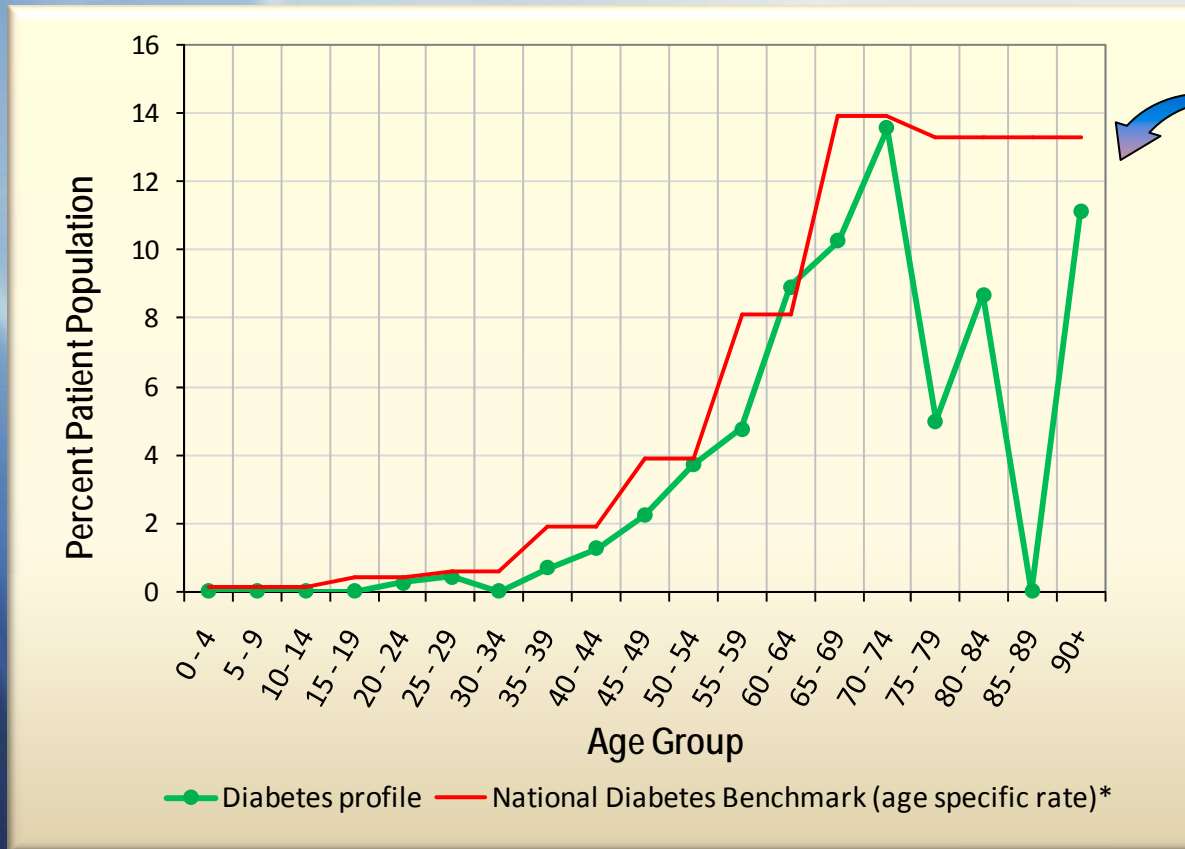


Map 2 Practice Diabetes Profile



Population Health Profiling

Prevalence of Chronic Disease




The practice data is synthesized with available national benchmarks from which comparative graphs produced

Chart 1 Prevalence of Diabetes by age group



Business Analysis



Description	Actual	Estimated	Potential
Chronic Disease Item Numbers			
Diabetes	\$ 1,745	\$ 14,147	\$ 12,403
Asthma	\$ 8,823	\$ 47,875	\$ 39,052
Mental Health	\$ 10,000	\$ 29,994	\$ 19,994
Cardiovascular	\$ 421	\$ 2,371	\$ 1,950
Bone Disease	\$ 1,885	\$ 10,244	\$ 8,359
Total	\$ 22,874	\$ 104,631	\$ 81,757

The detailed business potential is derived from the practice billing data over a 15-month period, based on the number of patients diagnosed with a Chronic condition.

Actual
income
earned

Additional
estimated
income



Quality Improvement Approach

- Implementing Change Management strategies using the *Plan Do Study Act* cycle
- Engaging GPs and Practice staff



Case Study

Urban practice with 4 GPs & Practice Manager

Chart 2 Diabetes management measures by percentage of clinical criteria met

The Practice Health Atlas report indicated:

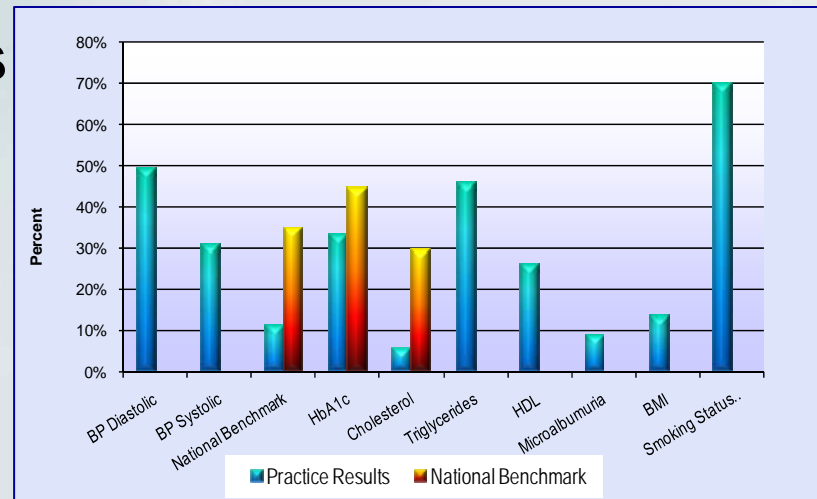
- **poor data quality**

(under-coding of Diabetes, lack of adequate pathology formatting)

- **Under utilisation of Medicare Items**

- **Low adherence to regular pathology screening**

- **Gaps in clinical management**



Case Study

Enablers

- **The report presented the practice data in a unique format**
- **Network staff interpreted the results and provided high quality feedback and follow-up support**
- **The Practice Manager was the driver for change**



Case Study

Barriers

- **GPs lacked time and expertise for change management**
- **GPs focused on patient health outcomes above business and financial decision making**
- **Practice staff lacked necessary vision to initiate systems change**



Case Study

Outcomes

- **Data Cleaning**
- **Improved diagnostic coding**
- **Hired a Practice Nurse to better utilise Medicare Chronic Disease Items**
- **Hired a Diabetes Nurse educator to provide specialised patient advice**
- **Now using Clinical Audit tools to identify at risk groups of patients**



Summary

The PHA develops a professional culture around quality health data whilst encouraging a pro-active population health care approach

E-health strategies using the PHA...

A driver of innovation in health care service delivery

