

STRATEGIES



Katie Porter has implemented changes at IVF Australia which echo those elsewhere, both here and overseas.

Photo: MICHEL O'SULLIVAN

IT starts to deliver for patients

Smaller health-care providers are going it alone in implementing customer-friendly IT systems, writes Ben Woodhead.

When you visit a branch of your bank anywhere in Australia, you expect the staff to be able to pull up all your records in a matter of seconds. You certainly don't need to give them your name, address, birthdate and credit history every time you make a transaction.

If you did, it wouldn't be long before you demanded improvements, or switched to a bank that didn't make you jump through hoops to get at your cash.

Yet in the health sector, patients have been diligently reciting their personal details, medications and key medical events over and over again, every time they visit a different carer, accepting that this is just the way the health system works.

Or doesn't, as some doctors joke. Now the situation is slowly changing, and while there's been plenty of focus on nationwide electronic health records and multimillion-dollar clinical information systems, many health-care providers are taking into their own hands the challenge of using information technology to improve patient care.

Fertility treatment provider IVF Australia is a microcosm of the broader health-care system. The challenges it faces are similar, albeit on a smaller scale, to those faced by health-care providers in Australia and around the world.

The organisation, offering fertility treatment to Australians since the early days of IVF in the 1980s, is an amalgamation of five clinics across Sydney and the NSW Central Coast.

developed systems independently and tailored them to our own needs," says its information technology manager, Katie Porter.

"So we had something like five independent systems and we decided that wasn't quite right. Basically we wanted to bring everyone together on a single report."

According to Porter, the different systems used by IVF Australia meant it could take several hours to pull together a client's complete record. And that's within one organisation.

Multiply this across Australia's states and territories, and you begin to get a picture of just how large a challenge health-care providers face in improving not only the quality of patient information, but how that information is shared.

This is the reason for the proposed electronic health records that are being pursued around the country, most prominently by the federal government under its HealthConnect program and NSW Health under EHR*Net.

IVF Australia's work to bring patient records together in electronic format on a unified system also reflects the goals of large clinical information systems deployed at hospitals across the country.

But while the complexity of the solutions sought by large public and private health-care providers is many times greater, organisations such as IVF Australia provide a tangible example of the benefits that can be achieved.

According to Porter, IVF Australia's decision to bring the group's patient information together

demand from health-care providers. Health technology consultants say this is because a lot of consumers view medicine as a dark art and are reluctant to question its practices. But this will change as consumers grow more assertive and ask why they must give health-care providers the same information over and over again.

Porter explains that one of the gains for IVF Australia patients is that they can now turn up to any of the group's clinics for treatment and know their most up-to-date information is available to the staff.

"That's one of the big benefits. For a client [who] lives on one side of Sydney but works on the other, they can come into a clinic for their injections without having to make special arrangements outside work hours.

"A single system has translated to real improvements."

"It's the same with patients who live on the Central Coast and work in Sydney, but it used to be a lot more difficult. The system really helps with the continuity of care," Porter says.

Such demonstrable benefits are important because, as the co-director of intensive-care services at Sydney's Royal Prince Alfred Hospital, Robert Herkes, says, there is still no absolute proof that often costly clinical information systems save money or improve clinical care.

RPA operates one of Australia's most advanced intensive-care units.

sort of an impact they are having on patient care.

IVF Australia's experience shows health-care providers, particularly smaller ones, don't have to rely on expensive offerings from the big multinational clinical-software companies.

IVF Australia instead opted for a FileMaker Pro-based system, allowing it to save money and feel more secure in its ability to adapt the software to its needs.

But the decision by some health-care providers to use packages like FileMaker, while others opt for full-blown systems from companies like Cerber, can compound the problem of sharing information, as many records are sitting on incompatible systems.

One of the key objectives of the federal government's HealthConnect is to put in place standards that alleviate this issue.

Porter also says the work done at her organisation reflects broader efforts within the health sector to bring information technology and patient care closer together.

In the case of IVF Australia and its 100 clinicians, this has created an environment in which medical staff, management, administration and IT staff all come together to make technology decisions.

The partnership is essential, says Porter, because stand-alone information systems are increasingly converging with clinical equipment and processes.

At IVF Australia, this has meant developing systems that integrate patient, financial and laboratory

Like any large public or private health-care provider, IVF Australia has clinics scattered across a wide geographic area. Previously, they all ran different technology platforms and struggled to share information with other members in the group.

Like its larger counterparts, IVF Australia realised this was affecting its treatment of patients and that something had to change.

"Because of the way the organisation grew up, we all

on a single system has translated to real improvements for patients.

"We've gotten a lot of feedback from clients on how much easier it is to get information on their treatment. I think any improvements we can make are important to our clients," she says.

Among the benefits are the efficiencies that consumers now expect from most organisations they deal with, from banks to motor registries, but which they don't

which is now entirely paperless.

"Not only is there the large up-front cost, once you put in one of these systems you need an IT department, which the hospital might not have had before. You also have to train doctors and nurses to use the systems," Herkes says.

In addition, clinicians respond differently to the systems. Some find them beneficial while others see them as an impediment. This makes it difficult to determine exactly what

records, among others.

As Porter points out, such an effort requires the basic information systems knowledge of IT staff and the in-depth knowledge of medical technology clinicians have.

"It's very important to bring the clinicians in. They know what they need and all of them are enthusiastic about what IT can do for patient care."

"As with any software, work with the users to meet their needs," she says.