



Primary Sense

Lunch & Learn Series: Part 13 – Data Quality in Primary Sense

Presented by

Nisha Sathyan – Digital Health Officer

Acknowledgement of Country

**I would like to acknowledge the
traditional owners of the land on which
we all meet today and to pay my respects to
Aboriginal elders past, present and emerging.**

**I would also like to extend my respect
to all Aboriginal people present today.**



Housekeeping

- Attendees muted for duration of webinar
- 30 min duration
- Webinar being recorded and will be available soon
- Q & A

Learning Outcomes for Data Cleansing:

The 3 Learning Outcomes:

- **Understanding the principles of Data Quality in Primary Care**

Participants will be able to define key dimensions of data quality and explain the relevance to clinical – decision making and population health management

- **Identify and address common data quality issues**

Participants will be able to recognise common data quality challenges in general practice records and apply strategies to improve data entry and maintenance

- **Apply data quality practices to enhance Primary Sense Reporting**

Participants will be able to use Primary Sense reports effectively, ensuring that data extracted from clinical systems is reliable for use in quality improvement, patient care planning and reporting to stakeholders.

Data Quality in Primary Care and why it matters?

Data Quality supports safe, effective and appropriate care for individual patients and practice populations.

The RACGP suggests quality health records have 6 attributes:

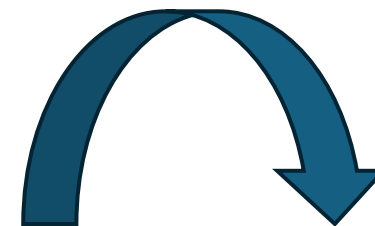
- ✓ Accurate collected from other sources.
- ✓ Complete
- ✓ Consistent – uses a recognised medical vocabulary, standardised terms and abbreviations.
- ✓ Easily read and understood
- ✓ Accessible
- ✓ Up to date

Data Quality in Primary Care and why it matters to Primary Sense?

Garbage in



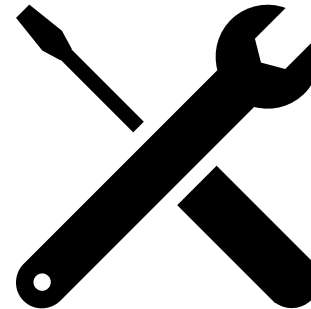
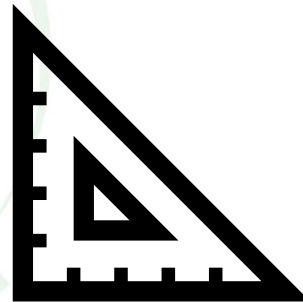
Garbage out



Common Data Quality issues and how to maintain data

- Missing data
- Duplicate records
- Inconsistent clinical coding
- patients that should be marked as inactive or deceased

Use Primary Sense reports and the tools in your clinical software to maintain data!



How to maintain data using your clinical software tools

Best Practice

Cleaning up uncoded and free text data

Merge Data

- **Merge patient records**
- **Merge user records**

Mark patients as inactive or deceased

Database Queries

Medical Director

Cleaning up uncoded and free text data

Merging Duplicate patients

Mark patients as inactive

The above are some examples and not an exhaustive list of tools.

Primary Sense™ Reports























GPs - Important clinical information about your patients are in most of these reports.

Select a report

Clinical Audit Queries

Keyword filter:

Clear

- | | |
|--|---|
|  Patients with Moderate Complexity (level 3)
Eligible or due care planning items |  Benzodiazepine in substance misuse
High risk patients |
|  Chronic Lung Disease and Asthma
Associated modifiable risk factors |  Haemochromatosis
Associated risk indicators |
|  Patients with High Complexity (5 and 4)
Eligible or due care planning items |  Cardiovascular Disease Risk Factors
Modifiable risk factors |
|  Diabetes Mellitus
Diagnosed and undiagnosed |  Frailty Care Management
Patients with Frailty risk factors |
|  Winter Wellness
High risk patients at risk of seasonal respiratory infect... |  Bowel and Breast Cancer Screening
Patients eligible |
|  Hypertension Management
Hypertension, no active ACR reading in last 12 months |  Child Immunisations
Report of immunisations that can be given for childre... |
|  Cardiovascular Disease Management
CVD, missing interventions and risk factors |  Voluntary Patient Registration
Report of patients who are likely to meet the criteria f... |
| <hr/> | |
| Practice/PHN Reports | |
|  Characteristics of the Practice Patient Population
For comparison to the PHN version |  Summary Report of Practice Improvements
Monitors changes |
|  Accreditation
% compliance |  Your Practice Data Quality
Compared to PHN average |
|  Characteristics of the PHN patient population
As an average for comparison | |
| <hr/> | |
| PIP QI | |
|  Patients missing PIP QI or accreditation Measures
All patients missing measures |  PIP QI report - 10 measures
% compliance |
|  Patients booked in with missing PIP QI measures
With appointments in the next 2 weeks | |

How to maintain data using Primary Sense reports

Primary Sense™ Performance

Refreshed every minute. Right-click to refresh now.

Is the extractor working?

Last data extract 29/08/2024 3:18:35 I

Is the desktop working?

Last medication checked for an alert Not available

Last report viewed 28/08/2024 3:28:35 I

Your practices statistics

Total patients marked as active 23

RACGP active patients 0

Total ACG patients 0

ACG band 1 patients 0

ACG band 2 patients 0

ACG band 3 patients 0

ACG band 4 patients 0

ACG band 5 patients 0



In the last...

Three Months

Who is viewing reports

Nurses / managers viewing reports 0

GPs viewing reports 0

Who is getting medication safety alerts

Medications checked for an alert 0

GPs who may get an alert 0

Last monitored request Not available

Last response Not available

Triggered alerts 0

GPs responding to alerts 0

Practice tips for improving health record quality

✓ **Practice culture**

- Educate the practice team about the importance of high-quality health records
- 'expect to share' mindset

✓ **Increasing skills and knowledge**

- Educate, train and support on how to use clinical software

✓ **Supporting the practice team**

- Adopt tools to help staff with data quality

✓ **Improving systems**

- Implement feedback processes
- Keep track of near misses and mistakes

Source: [RACGP](#)



Using the CQI Template in Primary Sense

Why do Continuous Quality Improvement (CQI)?

Regarding quality improvement, the RACGP Standards include a Quality Improvement (QI) module with QI Standard 1, which outlines the following Criterion QI1.1 for QI activities:

- **QI1.1 A:** Our practice has at least one team member primarily responsible for leading our quality improvement systems and processes.
- **QI1.1 B:** Our practice team shares information internally about quality improvement and patient safety.
- **QI1.1 C:** Our practice seeks feedback from the team regarding our quality improvement systems and their performance.
- **QI1.1 D:** Our practice team can identify areas of improvement within our practice over the past three years.

Locating the CQI Template

The image shows a software interface for 'Primary Sense™ Templates'. On the left is a vertical sidebar with icons and labels: 'DEMO' (top), 'Reports', 'Prompts', 'Alerts', 'Patients', 'CQI' (highlighted with a purple arrow), and 'Settings'. The main window is titled 'Primary Sense™ Templates' and contains the text 'Select a template. Double-click to download.' Below this are tabs for 'Templates', 'Examples', and 'Guides'. The 'Templates' tab is active, showing a list of templates: 'CQI Generic Template' (General template to complete a CQI topic), 'CQI Influenza Immunisation' (This template is for CQI Influenza Immunisation), and 'PIP QI Meeting template' (Template to record PIP QI practice meetings). On the right side of the main window is a 'Keyword filter:' section with a 'Clear' button and a list of radio buttons: 'CQI', 'Flu', 'Generic', 'Meeting', and 'Template'. A purple arrow points from the 'CQI' option in the sidebar to the 'CQI Generic Template' in the list.

DEMO

Reports

Prompts

Alerts

Patients

CQI

Settings

Primary Sense™ Templates

Select a template. Double-click to download.

Templates Examples Guides

- CQI Generic Template
General template to complete a CQI topic
- CQI Influenza Immunisation
This template is for CQI Influenza Immunisation
- PIP QI Meeting template
Template to record PIP QI practice meetings

Keyword filter:

- ☐ CQI
- ☐ Flu
- ☐ Generic
- ☐ Meeting
- ☐ Template

Continuous Quality Improvement (CQI)
Project Template



CQI Template

CQI steps		Ask-Do-Describe	
Data report 1 - baseline	First CQI meeting	Why do we want to change?	
		Gap	
		Benefits	
		Evidence	
		What do we want to change?	
		Topic	
		Scope	
		How much do we want to change?	
		Baseline	
		Sample	
		Target	
		Preparedness	
		Who are involved in the change?	
		Leads	
		Contributors	
		External	
		When are we making the change?	
		Deadlines	
		How are we going to change?	
	Potential solutions		
Select			
Implementation	Implement		
	Record, share		
Data Report 2 Comparison	Final CQI meeting	How much did we change?	
		Performance	
		Worthwhile	
		Learn	
		What next?	
		Sustain	
		Monitor	

Sections	Ask-Do-Describe
Why do we want to change?	
• <i>Gap:</i> What is the gap in care or CQI opportunity?	Identify a gap in our care or an important CQI opportunity
• <i>Benefits:</i> What are the benefits of changing?	Describe the value of CQI for clinicians, the practice and patients
• <i>Evidence:</i> What evidence or opinions support changing?	Gather evidence or reach consensus for undertaking the CQI activity

Ask-Do-Describe

Why do we want to change?

Gap	Ethnicity is missing from some patient records
Benefits	Correct Ethnicity data in patients details
Evidence	Primary Sense reports: PIP QI Report, Patients booked in with missing PIP QI Measures

What do we want to change?

- *Topic:* What is the topic?

List the potential CQI topics or areas and agree the top priority

- *Scope:* What is the scope of the change (CQI)?

Specify the scope of the CQI project

What do we want to change?

Topic	Data quality – increase the percentage of patients with their Ethnicity recorded
Scope	All active patients are potentially included.

How much do we want to change?	
• <i>Baseline</i> : What is the current performance	Quantify or understand our baseline performance
• <i>Sample</i> : How many patients will be involved?	Specify the sample and sample size
• <i>Target</i> : What is the target?	Set a realistic target
• <i>Preparedness</i> : How prepared is the team to undertake CQI?	Clarify whether our team is ready, willing and able to undertake CQI

How much do we want to change?

Baseline

60/ 100 (60%) patients have missing Ethnicity

Sample

All active patients with no Ethnicity recorded

Target

Increase recorded Ethnicity by 10 % by October long weekend

Preparedness

Discuss in practice meeting, the aim goal and information GP's will need but GP has taken long service leave, PM has been off overseas, Nurse about to have a baby and new GP has started

Who are involved in the change?

- *Leads, contributors:* Who are the practice Leads, contributors, stakeholders

List the GP and non-GP CQI Leads and everyone else involved

- *External:* What external stakeholders are involved?

List the PST team members and roles and responsibilities, if applicable

Who are involved in the change?

Leads	Reception, PM, PN & GP's
Contributors	
External	N/A

When are we making the change?	
<ul style="list-style-type: none"> • <i>Deadlines:</i> When is what happening, and who will be doing it? 	Set preliminary project time lines
How are we going to change?	
<ul style="list-style-type: none"> • <i>Potential Solutions:</i> What are the potential solutions and actions? 	Identify potential solutions and choose the most acceptable and feasible action
<ul style="list-style-type: none"> • <i>Select:</i> Select a solution or action 	Select a solution or action that is feasible for all implementers
<ul style="list-style-type: none"> • <i>Implement:</i> How were the changes implemented, and what happened? 	Implement the action and describe what happens
<ul style="list-style-type: none"> • <i>Record, share:</i> How is the CQI documented and how are the results shared? 	Record meetings, actions and important events

When are we making the change?

Deadlines

By October long weekend

How are we going to change?

Potential solutions

Look at Primary Sense report and identify patients with missing Ethnicity

Select

Flag identified patients with receptionist ,Review new patient questionnaire, display poster in waiting room

Implement

flag identified patients with receptionist, Clinicians to enter missing data

Record, share

Record in clinical meetings how its going

How much did we change?	
• <i>Performance</i> : What is the performance after the change?	Measure post CQI performance and compare it with the baseline results
• <i>Worthwhile</i> : Was the CQI project and the associated effort worthwhile?	Evaluate the impact of the project (positive, negative) and whether it was worthwhile
• <i>Learn</i> : What are the learning points and needs?	Identify the learning points and needs
What next?	
• <i>Sustain</i> : How will the change be sustained?	Describe how worthwhile changes will be sustained
• <i>Monitor</i> : How will performance be monitored?	Describe how (if) performance will be monitored in future

How much did we change?

Performance

Target was met 10% increase

Worthwhile

Patients details were being updated

Learn

That it is easy to start with small changes

What next?

Sustain

Will continue to slowly populate missing Ethnicity and work on other missing fields

Monitor

Continue to review through Primary Sense report





Q & A

Your feedback matters!



- Please scan the QR code to let us know how we went and what topics you would like to see next.

Thankyou

