

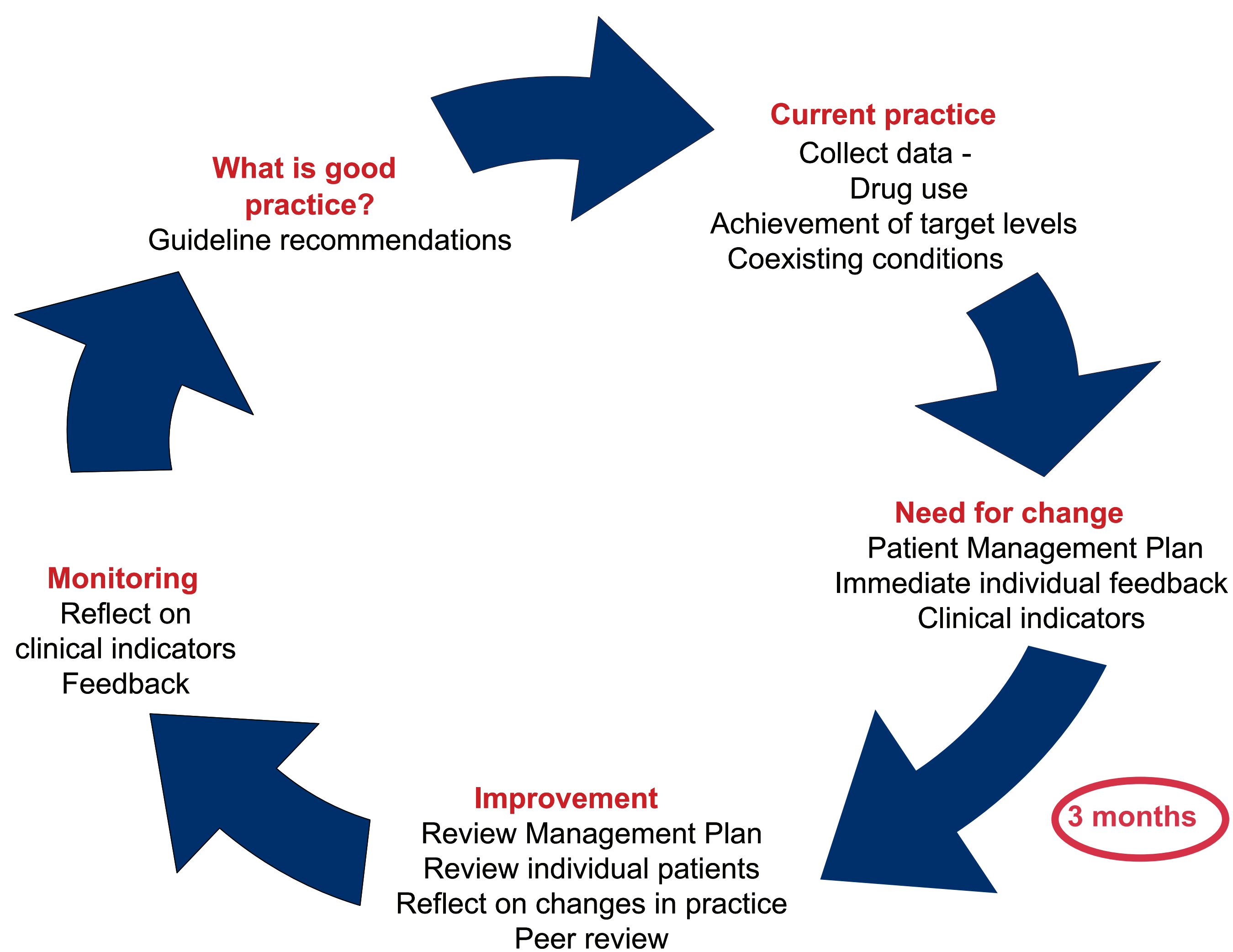
## Aims

- To improve treatment of patients with ischaemic heart disease (IHD).
- To investigate the effectiveness and acceptability of Clinical e-Audit to implement changes to practice.

## Approaches

- All Australian GPs invited to participate in March 2007.
- Participating GPs reviewed 20 patients older than 16 years of age with IHD (excluding acute coronary syndromes), for selected best practice clinical indicators and responded to feedback by implementing changes to clinical practice – see *Figure 1*.
- Participating GPs provided feedback on usability and satisfaction after the initial phase and on overall results after the review phase.

Figure 1. Clinical e-Audit process (3–6 months)



## Findings

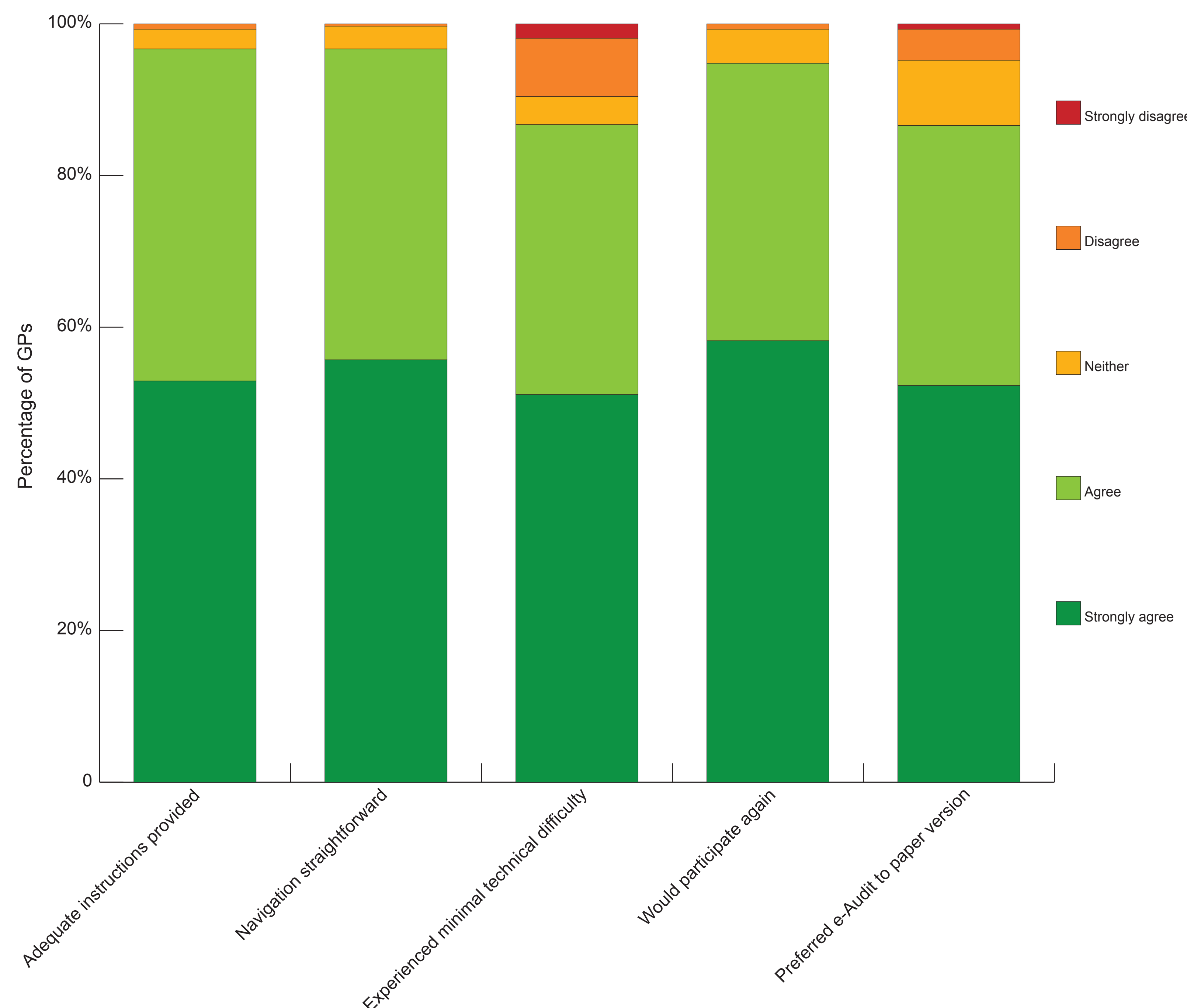
Table 1. Improvements in clinical indicators

Indicator	Initial phase	Review phase	Improvement
Use of an antiplatelet agent*	95% (n= 4873)	98%	↑
Use of a beta blocker#	71% (n=4291)	77%	↑↑
Use of a statin#	89% (n=5199)	93%	↑
Achievement of recommended target cholesterol < 4 mmol/L	60% (n=5203)	73%	↑↑
Use of a nitrate patch with nitrate-free period > 10 hrs	62% (n=358)	88%	↑↑↑
Use of an ACE inhibitor or ATRA post MI with LVD or heart failure#	94% (n=747)	96%	↑
Achieved recommended target BP	76% (n=5400)	89%	↑↑

\*excludes contraindication, adverse effect, using warfarin

#excludes contraindication, adverse effect

Figure 2. Satisfaction and usability of Clinical e-Audit



## Participation

- 270 GPs completed initial phase — 5400 patients reviewed.
- 221 GPs completed review phase — 2922 patients eligible for review — 1498 patients managed as recommended.

## What is Clinical e-Audit?

- Stand alone application developed in-house at NPS – independent of prescribing software.
- Installed via CD to GP desktop.
- Secure data transmission by Public Key Infrastructure encryption – patient identifiers not transmitted.

All GP participants*	Your initial results	Your results at review
95% (4646 / 4873)	19 / 19	19 / 19
71% (3043 / 4291)	11 / 11	11 / 11
89% (4622 / 5199)	18 / 20	19 / 20
60% (2131 / 5203)	12 / 20	16 / 20
42% (221 / 358)	3 / 3	3 / 3
94% (704 / 747)	4 / 4	4 / 4
76% (4092 / 5400)	12 / 20	18 / 20

## Feedback on results

- 98% of GPs were satisfied with their results.
- 95% agreed that Clinical e-Audit assisted review of clinical management of IHD.
- 64% of GPs were able to identify suboptimal adherence.

## Benefits to the community

- Clinical e-Audit is an effective and well accepted electronic tool to deliver clinical audit as a quality improvement activity.
- Gaps in practice can be easily identified and addressed to improve the quality of treatment for patients with IHD.