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Eclipse is a quarterly newsletter that provides informative articles documenting the development and advancement of the e-health industry in Australia, specifically focusing on the impact upon clinical pharmacists.

ADE cost estimations continue to rise



Previous Australian studies have estimated that direct hospital costs of adverse events range between \$483 million and \$900 million per annum. A new study on Victorian hospitals in 2003-04, has indicated that the national cost is closer to \$2 billion and between 40-50% of all events are preventable.

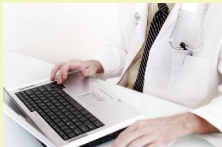
An article recently published in the The Medical Journal of Australia (MJA) also contends that these are underestimations as costs associated with adverse events are only identified during the episode of care and not after the patient has been discharged. Despite this, the study determined that the direct costs of adverse events represent 15.7% of total in-house hospital costs.

In Australia, 16% of all admissions result in adverse events. Internationally, these rates range from 3.7% and 45.8%, half of them preventable.

To view the full MJA publication, please click [here](#).



Help or hindrance?



There is an emerging debate as to whether decision support software should be rapidly introduced, or that more evidence is required to prove these systems in fact assist in better health outcomes. In a recent article by Karen Dearne in Australian IT, Dr. Enrico Coiera indicated that it takes 10 years for a new drug to go from laboratory to clinical trial and many more before it can actually go to market. He continues to say that anybody with programming skill can develop these systems and not be subjected to legal requirements.

These comments come in the wake of a recent US report which discovered that a hospital e-prescribing system actually increased the number of deaths during the time of research. However, this was a short-term study and findings were made immediately following the implementation of the system, when long-standing work processes had recently been interrupted.

The University of NSW Health Informatics Centre has recently produced guidelines for evaluating electronic support systems.

To view the Australian IT article, please click [here](#).

To view the University of NSW Health Informatics Centre's guidelines, please click [here](#).

The high price of information



A recent overseas slip up has provided an insight to the value of information and the importance of its security. A Veteran Affairs employee in the USA had their laptop computer stolen in May, containing sensitive information for 17.5 million people. The Bush administration immediately asked for \$160.5 million in emergency funds to protect veterans and military troops whose information had been stolen. However, according to a recent story in the Washington Post, it is estimated that the total cost, including credit protection and damages for each person, will reach as high as \$26.5 billion.

Incidents such as this reinforce the advantages of web-based software programs which ensure that no footprints remain on machines used to access information.

To view the full Washington Post article, please click [here](#).

Resources

[The Cancer Council](#)

[The Society of Hospital Pharmacists of Australia](#)

[NeHTA](#)

[Auspharm](#)

[MedAL - The Medical Algorithms Project](#)

[Information Sheets for Parents](#)

[Australian IT](#)

[Health Informatics Society of Australia](#)

Clinical Pharmacy survey results

A recently conducted Healthcare Software survey uncovered a number of interesting findings concerning clinical pharmacy in a broad range of Australian hospitals. According to the respondents, who were represented by clinical pharmacists, pharmacy managers and directors, it is most important for clinical pharmacy software to produce the following, (in declining order of importance):

1. Counselling summaries for patient
2. Pharmacy care plans pre-filled
3. Counselling summaries for GP
4. Counselling summaries for community pharmacist
5. Clinical intervention reports for patient notes
6. Variable dose schedules for patients
7. ADR reports for patient notes
8. Recommendations for Medication Review
9. Pharmacokinetics predictions
10. Management reports on staff clinical decisions
11. ADR reports sent to ADRAC
12. Management reports on use of medicines

Pharmacists also identified two areas that could simplify their activities - better access to information (26% of respondents) and electronic collation of relevant data (23%).

The vast majority of respondents (91.2%) felt that clinical pharmacy software is likely to improve their working processes and result in more efficient practice.

Congratulations to Rob James from the Hollywood Private Hospital in Perth who was the winner of the Grange Hermitage/iPod Nano competition.

If you are interested in the complete set of survey results, please [email us](#) and we will send you a copy.

PharmCare News

Healthcare Software 'connecting' with the LGH

Healthcare Software has been awarded a grant from HealthConnect Tasmania to implement a trial of its clinical pharmacy software package, PharmCare, in the Launceston General Hospital later this year. There were only three successful Australian companies in the HealthConnect Tasmania grant application process and CEO, John Elkerton, said "It really is fantastic for us to work with a local, well-renowned hospital. We will benefit enormously from the grant, but, more importantly, so will the pharmacists, patients and other care providers in the Launceston General Hospital and wider community."

The primary focus of the trial will be the provision of a discharge medication summary, which electronically details a patient's prescribed medicines upon leaving hospital. The summary will provide patients, GPs and other care providers with information that can be used over time and across healthcare facilities. The Launceston General Hospital will also have full use of the range of clinical pharmacy features that PharmCare delivers including the generation of patient medication histories, documentation of clinical interventions and a range of reporting functions, which allow care providers to monitor clinical and administrative information over time.

To view the full story, please click [here](#).

PharmCare
Clinical Pharmacy Database



Healthcare Software will be exhibiting at the [HISA Health Informatics Conference 2006](#), to be held in Sydney from August 20-22.

If you would not like to receive further editions of Eclipse, please do not hesitate to email us at will@healthcaresoftware.com.au. There are details on how to subscribe on our [website](#) for anyone who is interested.