

## Issue 6 Tuesday, 31 July 2007

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. Eclipse is a production of Healthcare Software, developers of PharmCare Clinical Pharmacy Database. For more information on PharmCare, please visit our [website](#). Feel free to email us at [eclipse@healthcaresoftware.com.au](mailto:eclipse@healthcaresoftware.com.au) if you have any comments or feedback that may assist in developing a comprehensive clinical pharmacy newsletter.

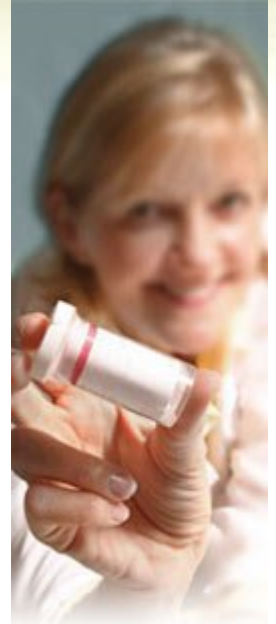
### Cash Injections for State Health



Several State health departments are ramping up their spending on IT with \$1 billion to be spent over the next few years on replacing and linking core patient and clinical information systems. According to an article from The Australian Financial Review (Renai Lemay; 03 July 2007), a number of states are signalling their intentions:

- Western Australia's Department of Health has recently requested funding to replace its state-wide clinical information systems which will come from the \$335 million allocated in 2004 to enhance health IT.
- Queensland Health was allocated \$150.3 million in the June budget for information and communications technology. Before leaving her post, Sabrina Walsh said about \$650 million will be spent in total over the next four years on a comprehensive e-health strategy.
- South Australia's Department of Health also benefited from the budget last month, being allocated \$375 million for a 10-year overhaul of its ICT infrastructure. The money will be used to link state hospitals with state-wide health clinics and specialist health units to provide a more comprehensive view of patient health information.
- NSW and Victoria have a slightly higher spend on health IT than other states. NSW Health has already budgeted about \$300 million towards the area until 2009, while the Victorian Department of Human Services is implementing HealthSMART, a \$323 million technology replacement program slated to run from 2003 through to 2009.

Therefore, it appears there will be significant changes in health all over Australia during the coming years. However, these funds appear to be a drop in the ocean when compared to the total Government funding on health. According to a recent report by the eight state and territory health ministers, the Australian government spends nearly \$42 billion a year on health care.



### Never Just a Harmless Mistake

Independent safety experts claim the 130 avoidable errors uncovered by Australia's first national report into public hospitals is just the tip of the iceberg. Doctors and public hospital managers have been forced to defend their records as it is revealed patients are regularly put in significant danger.

The report determined that inadequate briefings during staff changeover, or staff acting when they didn't know the full facts contributed to many incidents. Other factors involved staff not following rules; not seeking or recording vital information; or through miscommunication with colleagues.



Associate Professor of Patient Safety at Victoria's Geelong Hospital, Stephen Bolsin, said there was no evidence of an improvement in hospital safety since 1995, when it was discovered 8 per cent of hospital patients experienced avoidable error, of which 10 per cent resulted in permanent disability or death.

According to Associate Professor Bolsin, "Safety breaches in Australian healthcare are killing more people than breast cancer or road accidents."

Australian Medical Association President, Dr Rosanna Capolingua, believes that top down approaches to reducing medical errors do not work and that doctors should start taking responsibility.

"Health care is primarily about an interaction between a care provider and a patient and this relationship should be the main focus of strategies to improve safety in healthcare."

The report covers 759 public hospitals in Australia, 4.3 million admitted patients and 42.6 million treated as out-patients during 2004-2005.

To view the story from The Australian, please click [here](#).

To view a related story from news.com.au, please click [here](#).

## Resources

[The Cancer Council](#)

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

[NeHTA](#)

[Auspharm](#)

[HealthConnect Tasmania](#)

[Australian IT](#)

[The Pharmacy Guild of Australia](#)

[National Institute of Clinical Studies](#)

[E-Health Insider](#)

[Department of Health and Ageing](#)

[CHIK Services](#)

[MIMS Australia](#)

[HL7 Australia](#)

[Health Informatics Society of Australia \(HISA\)](#)

## Last-Minute Funding for ADR Hotline



Consumers will continue to have the ability to report reactions to and problems with medications, as the Australian Government has announced it will support the Adverse Medicine Events Line, after current funding runs out this month.

The Brisbane-based hotline, which takes more calls from patients about potential harmful effects of medication than any other body, has found evidence of safety problems with several drugs. However, the future of the organisation was in serious jeopardy as funding was only secured until July 31 until the recent, last-minute announcement.

In an article featured by The Australian (15/7/2007), Geraldine Moses, the manager of the hotline, admitted that she is relieved the funding has been approved, but still has some concerns as only 12 months of funding was confirmed.

"It's a short-term solution," Dr. Moses said, "We are going to be entering negotiations with the National Prescribing Service and the Therapeutic Goods Administration to see if we can come up with some sort of long-term solution. This gives us some breathing-space."

Dr Moses said consumers are able to report problems directly to the regulating body, the Therapeutic Goods Administration (TGA), but most people don't know the process. It is therefore very important for consumers to have an indirect means to do this as doctors pass less than one per cent of complaints on to authorities, she said.

The hotline was largely responsible for reporting serious events linked to the use of sleeping aid, 'Stilnox', to the Federal Government's Adverse Drug Reactions Advisory Committee (ADRAC) who warned doctors in February about the drug's potentially dangerous side effects. More than 500 complaints were fielded, with reports of users sleepwalking, crashing cars, falling off balconies, smoking, painting and having sex after using the medication. The overwhelming response forced the manufacturer to upgrade warnings about mixing the drug with alcohol.

The Pharmacy Guild of Australia has funded the line for the past year but was never in a position to support it long-term.

To view the story from 'The Australian', please click [here](#).  
To visit the 'Adverse Medicine Events Line' webpage, please click [here](#).

## US e-Prescribing Push

An organisation in the USA is making a push for the nation-wide take-up of e-prescribing, estimating that it would save the federal government \$26 billion in health care outlays in the next 10 years.



The Pharmaceutical Care Management Association contends that it is widely agreed e-prescribing would reduce the number of drug-induced injuries and deaths. They refer to a 2006 Institute of Medicine report, which discovered there are at least 1.5 million preventable adverse drug effects in the United States each year, costing billions.

However, an additional survey conducted by the Association found that only one in 10 physicians use e-prescribing regularly. This contrasts the fact that 83 percent said they would benefit from having access to information about their patients' medication history, allergies and other considerations for certain drugs.

According to 'Government Health IT' ([www.govhealthit.com](http://www.govhealthit.com)), Association President Mark Merritt called it an unusual proposal in American health care because everyone involved – doctors, patients, pharmacies and his association's members – would benefit.

The Association is proposing a mandate and incentive system which, they estimate, will result in nearly 80 percent of all US prescriptions being generated with e-prescribing systems by 2017, avoiding 1.9 million adverse drug effects. Otherwise, less than one-third of all prescriptions would be electronic, maintaining the high numbers of adverse reactions and resultant multi-billion dollar costs.

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

## PharmCare News

### Busy Times Ahead



It has been a particularly busy three months for Healthcare Software during which time the company has been occupied with:

- the successful completion of the Patient Discharge Medication Record (PDMR) project at the Launceston General Hospital (LGH); and
- meeting with interested parties from all over Australia and New Zealand.

The PDMR project has now been completed, however all capabilities of PharmCare used throughout the project will continue at the LGH. There were some very encouraging outcomes:

- 500 discharge summaries were sent electronically to a range of medical professionals;
- 60% of these contained communication from the hospital pharmacist - 15% of which were assessed as being of high clinical significance;
- 100% of hospital medical officers thought it improved the quality of information sent, and most found it easier to use than paper discharge summaries;
- 96% of GPs receiving PDMR summaries considered that it contained relevant and useful information for ongoing care of their patients;
- 72% of GPs reported that it had reduced their need to make follow up enquiries;
- NeHTA concluded that “the PDMR is one of the early adopters of the discharge summary specification and is at least 85% compliant”

The Market Access and Partnership Program (MAPP) is an initiative administered by the Tasmanian Department of Economic Development, funded by the Australian Government. The second round of MAPP grants was recently announced and Healthcare Software was one of three successful companies. This will allow the company to significantly increase the marketing being employed across Australia and New Zealand, effective immediately.

To view the official Healthcare Software press release, please click [here](#).

To view the official HealthConnect Tasmania press release, please click [here](#).

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**In 2007, Healthcare Software will be exhibiting at [MedInfo 2007](#) in Brisbane on August 19-20 and at the [SHPA 28th Federal Conference](#) in Sydney on November 8-11. We look forward to seeing you there.**

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