

CONDUIT: Collaborative Network and Data using Information Technology, to build research capacity

Teng Liaw, Justin Tse, Nabil Sulaiman, Department of General Practice, The University of Melbourne, Phillip Bain, Carolyn Searle, Pat Maugeri, Karen Hoffmann, Mohan Pillai, Daniel Silver Rob Hosking, Chris Hogan, Peter Eizenberg, Paul Day

CONDUIT was set up in 2000 to increase research capacity in the primary care setting and to utilize the full potential of information technology for continuous quality improvement & continuing professional development (CQI&PD) in PHC, to gain useful information on patient care and to use the information for population-based health planning.

Objectives:

The aim of CONDUIT is to promote professional development and reflective practice and enhance the scientific basis of General Practice and Primary Care by assisting committed general practices to:

- provide the information and basis for CQI&CPD;
- provide and encourage research & educational opportunities for GPs and staff within the participating general practices;
- assist GPs to identify important local health priorities for research

Methods:

The University of Melbourne has provided funds from PCRED budget to manage the project. We have identified and invited three divisions and five fully computerised practices to join the network. The three divisions of GP (NDGP, NWMDGP and CHDGP) and the five general practices have approved the MOU. They formed the steering committee, agreed on information sheets, invitation letters and output format (Bar charts) and work plan. The committee has developed a specific work plan for the skill development of participating GPs in the quality of data, practice organization, QI and data management at the practice level. This will include onsite training and group sessions.

Findings:

In setting up CONDUIT a number of barriers were faced by the partners including:

1. GPs are interested in research only if it is relevant, practical and useful to patient care.
2. Confidentiality issues, especially how to gain informed consent in a time efficient and paper free manner. This was resolved by setting up customised fields in computer programs for recording verbal consent
3. Training issues especially in regards to GPs not familiar with total aspects of medical software. Data entry, use of terminology sets, methodology and protocols needed for useful dissemination.
4. Setting up a vertical integration skeleton with GPs having speedy and appropriate help from Divisions of GP. More so the role of IT Officers of Divisions have and will play an important role with this project. The IT departments with the right personnel play an increasing role in the information management issues related to a primary care practice.
5. Funding to Division IT Officers. With cut backs and dwindling project funds, information management support to practices will be reduced dramatically and result in reduced efficiencies in GP practices
6. Important fulfilling of aims of the General Practice Strategy Review with close links with GPs, Divisions and Academic Department of General Practices. This in turn increases the research capacity in all 3 levels

Implications for Policy, Delivery and Practice

The success of CONDUIT has massive implications regionally and nationally. The building of strong foundations between GPs, Divisions and Academic Departments are important cornerstones for setting up a research network. With appropriate training of GPs and prompt IT and Division support, useful data analysis can be done. The results from research will provide the practice and the local Division of GP with regional data, which is more relevant to population-based local planning, than national data, and the potential to address local health issues more effectively.