

CALLING IN THE EXPERTS

General practice today relies on sophisticated computer systems, so do-it-yourself maintenance can be a risky approach.

BY HEATHER FERGUSON

WHEN computers first landed in general practice, GPs with a passion for IT revelled in managing their systems. But the days of a GP looking after patients and a server are fast disappearing, according to IT experts.

General practice computer systems are now too complex for GPs to manage effectively, the experts say.

"Our advice is use an outside IT company. You are GPs, work at being GPs," says Noel Stewart, *Australian Doctor* computer columnist and IT manager at the North East Valley Division of General Practice in Melbourne.

"A lot of practice managers can do day-to-day stuff, such as back-up ... but to set up [a computer system] we advise an outside IT company."

But is using an IT service company beyond the reach of solo and small practices?

Not according to Dr Peter Del Fante, an Adelaide GP and CEO of the Adelaide West Division of General Practice.

His practice is paperless and when his system went down for an entire morning session he called in an IT expert used by several practices in the area.

He estimates it would have taken a lot longer — and cost more — to solve the issue himself. "These days it makes good sense to use a specialist 'Our advice is use an outside IT company — you are GPs, work at being GPs.'

— Noel Stewart
North East Valley Division
of General Practice
Melbourne

IT expert."

Finding the right expert is the key, because they need to have experience in clinical and practice software.

Mr Stewart recommends an IT expert because, apart from the time it takes to service systems, doctors can create computer problems because of the "weird way" they configure systems.

This has created problems for his division such as being unable to install clinical audit tools onto a GP's system.

While general practice computer systems have increased in complexity almost by the day, Melbourne IT expert Arty Richetti says it's been in the past 18 months that maintaining them has gone beyond the scope of the average GP.

Mr Richetti is managing director of Cititec Systems, a company servicing the IT systems of about 40 general practices and three divisions in Victoria.

He says changes in the way general practices operate also means they are becoming increasingly dependent on technology. Some recent changes include the introduction of Medicare Online and a new practice incentives program requirement for practices to install secure messaging for online referrals to specialists or pharmacists.

Divisions are increasingly asking GPs to install data interrogation and auditing tools, while software for downloading pathology and radiology results is a growing requirement.

Mr Richetti says a common IT problem encountered in general practice is when a new pathology provider requires new software to be installed or updated to download results.

"One of my biggest gripes is each pathology provider has its own software. This makes management of such software difficult. Practices generally have numerous pathology providers, each with its own application that performs essentially the same task. This doubling up of software can also significantly reduce network speed and processing capacity".

Mr Richetti is a strong advocate for having one consolidated piece of software to manage all pathology referrals and reports.

All the rapid changes in technological requirements have introduced complexities with which many GPs without formal IT qualifications or experience may struggle. "Medical practices have reached the stage where they need to use IT people with expertise [in the medical IT area] otherwise they are really doing themselves a dis-service," Mr Richetti says.

While technical expertise is recommended for these types of changes and demands, GPs and practice managers should still have an active role in ensuring daily backups are performed and that anti-virus and medical software is up to date.

"They should not install or upgrade medical software unless they perform a backup before doing so," Mr Richetti says.

The amount of support needed varies from practice to practice, but Mr Richetti recommends 3-4 hours a month as a baseline, with larger practices needing up to eight hours of IT support each month, depending on whether they have specialised needs.

Support services include making sure systems work effectively, anti-virus software is installed, regular backups are performed correctly and proper procedures are in place for updating medical software.

IT experts advise GPs not to accept help from people with limited IT knowledge.

Mr Richetti was recently called to a practice where an 'expert' had installed a system that took 10-15 minutes to start up in the morning and another 10 minutes for Medical Director to open.

"One thing I find is people who get into problems are the ones where a patient or colleague has a cousin or relative in the computer industry. [That person] may be good in a specialist area, but not necessarily have a good understanding of what practices need [or] experience installing medical software."

GPs also have to be aware of the hidden agendas of some IT companies.

Mr Stewart recalls one company that tried to convince a practice to install new clinical software. It turned out the company had a fiscal interest in the software they were recommending.

Both Mr Stewart and Mr Richetti suggest GPs seek recommendations from other GPs before calling in an IT company.

Mr Richetti says he has noticed a growing number of practices asking his company to proactively monitor the health and status of their dedicated servers. Sophisticated software allows for the real-time viewing, monitoring and reporting of critical server events. This enables IT staff to be proactive in dealing with potential computer problems.

"The idea behind monitoring is that we can view real-time server metrics and address issues before they become problems for the practice. It has enabled us to avert downtime in many instances and we recommend it to all medical practices [investing] in a dedicated server.

"We install special software on their server, which reports to our server at intervals, so we can gauge the general health and obtain an instant report."

IT support should be seen as an integral part of running a successful medical practice, he says. Ongoing budgets need to be put in place to reflect this need and practices should see technology as an investment as opposed to an expense, Mr Richetti says.

"Practices are almost crippled if their server goes down," he says.

"Doctors just need to be more savvy about who they get to manage and support their IT, and how they spend their money."

Mr Stewart and Mr Richetti say GPs should not feel pressured into entering into a long-term contract with an IT support company. They can seek independent advice from another company if they are not satisfied or for auditing purposes.

"A contract can be beneficial for some practices ... knowing that there is a guaranteed support timeframe in the event of a critical system malfunction gives many practice managers peace of mind," says Mr Richetti, who has written agreements

with about 60% of the practices he supports. ●