



Quality Improvement Scenario 2: Patients Indicated Chronic Kidney Disease (CKD) with No Coded Diagnosis

A Practice's Data Dashboard provided by HNECCPHN (based on PenCS CAT4 data) indicates that 369 patients are indicated to have Chronic Kidney Disease, but do not have a coded diagnosis. This is risky as Patients who have Chronic Kidney Disease may not appear in lists, be searchable, nor be communicated in health summaries. Opportunities for patient care and practice sustainability may be missed.

Requirement:

eHealth PIP Requirement 3 is:

"Practices must ensure that where clinically relevant, they are working towards recording the majority of diagnoses for active patients electronically, using a **medical vocabulary that can be mapped against a nationally recognised disease classification or terminology system.**" [Practice Incentives Program - eHealth Incentive - Services Australia](#)

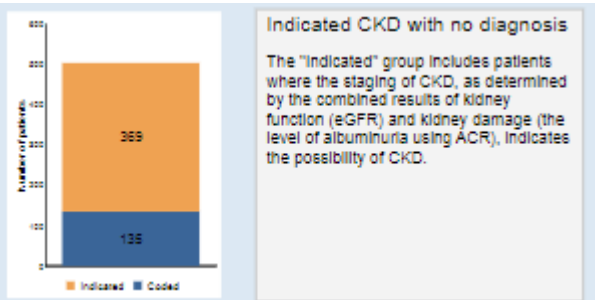
Requirement:

Also, **eHealth PIP Requirement 3** is that "Practices must provide a **written policy** to this effect to all GPs within the practice." [Practice Incentives Program - eHealth Incentive - Services Australia](#)

Requirement:

RACGP 5th Standards for General Practice Indicator QI1.3A requires that "Our practice team uses a **nationally recognised medical vocabulary for coding.**" [Standards-for-general-practice-5th-edition.pdf \(racgp.org.au\)](#)

Practice's CAT4 Dashboard CKD Indicator



TIP: How to Code Diagnoses

MD: Pick diagnosis from drop-down coded vocabulary List in Summary, Past History or Reason for Contact (can save as past medical history) [MD Online Help \(medicaldirector.com\)](#)

BP: Search for condition from coded vocabulary in Diagnosis Tab in Today's Notes when adding new clinical history to Past History Tab [Recording Today's Notes \(bpsoftware.net\)](#)

TIP: Chronic Renal Failure is the CAT4 condition category title. Many names of CKD coded diagnoses, of both active and inactive status, are mapped from history in patient record, as per [PenCS CAT4 Clinical Data](#)

The Practice's Quality Improvement Team pick this topic for improvement and create a **Plan-Did-Study-Act Cycle** for this QI PIP Quarter.

Data Baseline: 369 patients indicated to have Chronic Kidney Disease diagnosis at beginning of quarter.

SMART goal is "0" patients will be on the indicated Chronic Kidney Disease Diagnosis list by end of quarter.

Review Date: end of QI PIP Quarter.



PLAN:

Idea 1: Use PenCS CAT4 Cleansing CAT Module to identify patients who are indicated by combined eGFR and ACR pathology results to have Chronic Kidney Disease without a Coded Diagnosis. Patients coded for Dialysis are listed as Stage 5. Data Cleansing - CAT GUIDES - PenCS Help

Demographics Ethnicity Data Quality Data Cleansing Allergies Smoking Alcohol Measures Pathology Disease Screening Comorbidities Medications Diabetes SIP Items CKD Musculoskeletal CV Event Risk CHA2DS2VASc Score Immunisations Standard Reports MBS Items MBS Eligibility Sexual H

Missing Demographics Missing Clinical/Accreditation Items Indicated CKD with No Diagnosis Indicated Diabetes with No Diagnosis Indicated Mental Health with No Diagnosis Indicated COPD with No Diagnosis Indicated Osteoporosis with No Diagnosis Medication Review

Indicated Reviewed

Patient List page 1 of 29 [Count = 578]

Double-click a patient to open it in your clinical system (MD, BP, Zedmed). Save & Remove Export Page No. 1 Go

Click on Column Heading to sort

Clinical Action Plan 1-3mths 3-6mths 12mths Note: CKD Stage is calculated using the most recent eGFR and ACR.

Surname	First Name	DOB	Indication Date	Sex	eGFR	ACR	CKD	BSL	FBG	Smoking	Diabetes (Dx or HbA1c >= 6.5, BSL > 11.1 or FBG > 7)	Hypertension (Dx or BP > 140/90)	Obesity (BMI > 30)	CVD Dx	Indigenous and Age > 30	Assigned Provider	Confirm Condition Does Not Exist
Surname	Firstname_1...	10/05/2001	05/05/2020	M	48.0		Stage ...	4.1		Never smo...						Surname_0	<input type="checkbox"/>
Surname	Firstname_1...	10/05/1944	23/06/2017	M	48.0	53	Stage 1	4.6	6.2	Ex smoker	Y	Y				Surname_0	<input type="checkbox"/>
Surname	Firstname_1...	10/05/1950	13/11/2019	F	89.0	3.8	Stage 2	5.9	6.9	Never smo...	Y		Y			Surname_5	<input type="checkbox"/>
Surname	Firstname_1...	10/05/1954	08/02/2021	F	53.0	0.6	Stage ...	4.9		Never smo...		Y				Surname_5	<input type="checkbox"/>
Surname	Firstname_1...	10/05/1946	15/05/2020	F	59.0		Stage ...	5.1		Never smo...		Y				Surname_25	<input type="checkbox"/>

TIP: GPs must clinically assess the patient record. GP can double-click patient name to access and update CKD diagnosis in Patient Record within a logged-on CIS immediately. Alternatively, tick "Confirm condition does not exist" box and click "Save and Remove" button which removes patient from Cleansing CAT list (patient will appear again when new pathology results are added) and adds patient to Reviewed Patient Report. Ensure preferences in CAT4 are linked to practice's TopBar server.

TIP: Patient names with an eGFR = 0 or <60 and no ACR are displayed with the word 'Stage' but without a coloured action plan level to indicate that results require review. CAT4 reads only the most recent eGFR and ACR. 3 results over a 3-month period are required to inform diagnosis.

Idea 2: Use PenCS TopBar Data Cleansing App opportunistically while patient is in a consultation to aid coding a CKD diagnosis. Data Cleansing App - USER GUIDES TOPBAR - PenCS Help

Idea 3: Alternatively, the Diagnosis Coding Clean-up Tool in Clinical Information Systems can convert free-typed entries to a coded Diagnosis automatically. MD Online Help (medicaldirector.com) Cleaning up uncoded and free text data (bpsoftware.net)

TIP: BP-Utilities App: User will need permissions set to allow Past History Add/Edit/Delete. MD Maintenance App: Enter username and password when prompted.

Idea 4: Run PenCS CAT4 Data Quality Report to identify any duplicate patient records by name or number and merge to lessen clinical risk. Data Quality (CDSA) - CAT GUIDES - PenCS Help MD: MD Online Help (medicaldirector.com) BP: Merge patient records (bpsoftware.net)

At end of quarter, the Quality Improvement Team complete the Improvement Cycle:

DID: What Idea(s) did Practice do?

STUDY: What improvement is there of Data Results of the same measure on the Review Date?

ACT: What can be added, continued, and/or removed from the Improvement Activities?