

Data Cleansing:

Data cleansing refers to the method of continuously maintaining up to date patient records by ensuring that they are free from errors or inconsistencies. High-quality and complete data enables health professionals to provide optimal and holistic care, ultimately benefitting patient health outcomes.

POLAR is a data analysis and extraction tool that supports general practices in visualising and analysing patient data obtained from their clinical software systems. Accurate data can help practices make data-driven decisions toward quality improvement, business development and optimal patient care.

To access data quality reports in POLAR, refer to walkthrough - [POLAR Walkthrough | Data Quality Report](#)

To accurately update patient files when data cleansing, refer to walkthroughs:

1. [Medical Director | Data Cleansing](#)
2. [Best Practice | Data Cleansing](#)

Quality Improvement Ideas for recording and updating your patient records by health topic according to a Benchmark focus area:

Benchmark Focus Area	Why improve it?	Steps/Solutions	Resources
<p>Smoking (>10 years)</p> <p><i>POLAR records smoking status as 'recorded' within a 7-year period</i></p>	<ul style="list-style-type: none"> Prevention, early intervention and promote proactive patient care; education especially to younger patients as it can prevent long-term effects of smoking (smoking is the leading cause to preventable illnesses) Reduce risk of premature death secondary to chronic illnesses – 1 in 5 of all cancers are due to tobacco smoking Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. review annually or sooner if new information is available Contributes to a patient's CVD risk score – guides preventative management/lifestyle changes 	<ul style="list-style-type: none"> QI activity - focus on a cohort with a chronic disease where smoking is a high risk to progression of disease e.g. cardiovascular disease Update new patient forms to include current/past smoking history Install and utilise Walrus Utilise POLAR to extract a patient list and identify patients without a smoking history recorded Increase patient/staff awareness by placing resources in waiting rooms/treating rooms for Quitline or disadvantages of smoking Provide education to patients who currently smoke Document data appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Ensure smoking status is current and up to date during patient visits 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> SWS Community HealthPathways Smoking Cessation Advice Cancer Institute NSW Reducing smoking in NSW iCanQuit NSW Quitline Health Professional Referral Form <p>Patient Resources:</p> <ol style="list-style-type: none"> Cancer Institute NSW NSW Quitline iCanQuit Start your journey – also has a Koori Quitline for Aboriginal and Torres Strait Islanders iCanQuit Quit Kits – Brochures/Information NSW Health Quit for New Life – closing the gap in pregnancy smoking rates

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<p>Alcohol (>15 years)</p> <p><i>POLAR records alcohol status as 'recorded' within a 7-year period</i></p>	<ul style="list-style-type: none"> Prevention and early intervention, promote proactive patient care and education Identify risk factors that increase alcohol consumption and address the associated factor (s) i.e. mental health, social history Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. review annually or sooner if new information is available Medications can interact with alcohol – knowing a complete history can help guide holistic patient care 	<ul style="list-style-type: none"> QI activity – focus on a cohort where alcohol consumption is a high risk to progression of disease e.g. cardiovascular disease Update new patient forms to include alcohol consumption history Utilise POLAR to extract a patient list and identify patients without an alcohol history recorded Install and utilise Walrus Set SMART goals to improve the percentage of alcohol consumption recordings Document data appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Increase patient/staff awareness by placing resources in waiting rooms/treating rooms for the dangers of alcohol consumption or resources to help quit drinking Ensure alcohol consumption is current and up to date during patient visits 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> Alcohol and Drug Foundation Prevention and Early Intervention SWS Community HealthPathways Alcohol Use Disorder NSW Health Alcohol and Other Drugs Information Service Contact RACGP - Alcohol <p>Patient Resources:</p> <ol style="list-style-type: none"> Your Room Effects of Alcohol, Binge Drinking & Withdrawal Symptoms Alcoholics Anonymous Supporting Sobriety SWSPHN Health Resource Directory Alcohol Odyssey House Counselling

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Allergies	<ul style="list-style-type: none"> • Avoid dangerous allergic reactions that can be life-threatening i.e. Anaphylaxis • Meet RACGP 6th edition standards – 100% recording and maintain up to date patient records, e.g. review annually or sooner if clinically indicated/new information is available • Prevention and early intervention, promote proactive patient care and education • Provide quality and holistic care by knowing patient allergies to help guide management or treatment e.g. immunotherapy • Meet RACGP standards of maintaining up to date training in Anaphylaxis Management for staff 	<ul style="list-style-type: none"> • QI activity – focus on a cohort where allergy recording is below benchmark expectations • Update new patient forms to include a patient’s allergies • Utilise POLAR to extract a patient list and identify patients without an allergy recorded • Install and utilise Walrus • Set SMART goals to improve percentage of documentation of allergies in patient files • Document data appropriately in clinical software system – ensure details of allergy are recorded e.g. reaction and severity • Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve • Internal staff education regarding anaphylaxis management in an emergency • Ensure patient anaphylaxis management plans are up to date – review every 12-18 months 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> 18. ASCIA Anaphylaxis Action Plan 19. ASCIA Health Professional Training 20. ASCIA Resources for Health Professionals 21. Allergy & Anaphylaxis Australia Health Professional Hub – Brochures/Information posters to hand out according to patient needs <p>Patient Resources:</p> <ol style="list-style-type: none"> 22. ASCIA Allergy and Anaphylaxis 23. ASCIA Facts for Parents

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<p>BMI and Waist Circumference</p> <p><i>POLAR records BMI and Waist Circumference as 'recorded' within a 7-year period</i></p>	<ul style="list-style-type: none"> Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. attend annually or sooner if clinically indicated Prevention and early intervention, promote proactive patient care and education <p>Patients with a high BMI and/or waist circumference have a significantly increased risk of developing chronic disease (s) e.g. cardiovascular disease, type 2 diabetes, cancer, musculoskeletal disorders, metabolic diseases and sleep apnoea</p>	<ul style="list-style-type: none"> QI activity – focus on a cohort where BMI +/- Waist circumference recording is below benchmark expectations QI activity - focus on a cohort where BMI +/- waist circumference is a high risk to progression of disease e.g. Metabolic diseases, Hypercholesterolaemia, Hyperglycaemia Utilise POLAR to extract a patient list and identify patients without a recent BMI/waist circumference recorded Install and utilise Walrus Set SMART goals to improve percentage of documentation of BMI/Waist circumference in patient files Document measurements/data appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Increase patient/staff awareness with visual reminders or posters to ask their practitioner for a BMI/waist circumference check Ensure patients on weight management plans have regular reviews to help guide treatment with accurate data 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> SWS Community HealthPathways Weight Management SWS Community Health Pathways Weight Management in Children Australian Government Department of Health, Disability and Ageing Overweight and Obesity Australian Dietary Health Guidelines Australian Institute of Health and Welfare Diabetes: Australian Facts <p>Patient Resources:</p> <ol style="list-style-type: none"> NSW Health Get Healthy NSW Health Go4Fun NSW Health Nutrition and Dietetics

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<p>Physical Activity</p> <p><i>POLAR records physical activity as 'recorded' within a 7-year period</i></p>	<ul style="list-style-type: none"> Prevention and early intervention, promote proactive patient care – optimal levels of physical activity can significantly reduce the risk of developing chronic disease (s) Meet RACGP standards – 75% recording and maintain up to date patient records – attend annually or sooner if clinically indicated Coordinate care effectively knowing the patients' limitations and physical capabilities – prevent prescribing inappropriate regimes that don't meet patient needs 	<ul style="list-style-type: none"> QI activity – focus on a cohort where physical activity recording is below benchmark expectations or where physical activity levels contribute to disease progression e.g. cardiovascular disease Utilise POLAR to extract a patient list and identify patients without a physical activity recording Install and utilise Walrus Set SMART goals to improve percentage of documentation of physical activity in patient files Document physical activity data appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Increase patient/staff awareness with posters to open a discussion topic of physical activity and its benefits Ensure patients on weight management plans have regular reviews to help guide treatment with accurate data 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> WHO Physical Activity Physical activity - Australian Institute of Health and Welfare RACGP Encouraging Physical Activity Australian Government Department of Health, Disability and Ageing Physical activity and exercise guidelines SWS Community HealthPathways Physical Activity - Adults SWS Community HealthPathways Physical Activity - Children <p>Patient Resources:</p> <ol style="list-style-type: none"> Agency for Clinical Innovation Benefits of Physical Activity Heart Foundation Physical Activity and your heart health Get Healthy NSW Free online and phone health coaching Go4fun Ages 7-13 Healthy Lifestyle Program Australian Government Department of Health, Disability and Ageing Exercise in Pregnancy

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<p>Blood Pressure</p> <p><i>POLAR records blood pressure as 'recorded' within a 7-year period</i></p>	<ul style="list-style-type: none"> Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. attend annually or sooner if clinically indicated Prevention and early intervention, promote proactive patient care and education Patients with uncontrolled blood pressure have a significantly increased risk of developing chronic disease(s), e.g. cardiovascular disease/events, brain damage Determine baseline blood pressure or risk level of pre-disposed conditions Recordings can help guide treatment plans for patients 	<ul style="list-style-type: none"> QI activity – focus on a cohort where blood pressure recording is below benchmark expectations QI activity - focus on a cohort with active conditions where there is no blood pressure recording e.g. cardiovascular disease, diabetes. Utilise POLAR to extract a patient list and identify patients without a blood pressure recording Install and utilise Walrus Set SMART goals to improve percentage of documentation of blood pressure in patient files Document blood pressure recordings appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Increase patient/staff awareness with posters to open discussion topics of blood pressure control/treatment 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> Hypertension Australia Health Professional Resources Heart Foundation Blood Pressure Action Plan Template SWS Community HealthPathways - Hypertension Heart Foundation Diagnosis and management of hypertension in adults Australian Institute of Health and Welfare Hypertension during pregnancy <p>Patient Resources:</p> <ol style="list-style-type: none"> Hypertension Australia Blood Pressure & You NPS MedicineWise Understanding Blood Pressure Heart Foundation Heart Healthy Eating

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Indigenous Status / Ethnicity	<ul style="list-style-type: none"> Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. attend at initial consultation or if new information becomes available Improve quality care for high-risk/minority groups by improving health equity and collaborative relationships through holistic care Promote/improve culturally responsive and linguistically appropriate care – improving patient engagement and access to health services 	<ul style="list-style-type: none"> QI activity – focus on a cohort where Ethnicity and/or Indigenous status recording is below benchmark expectations Utilise POLAR to extract a patient list and identify patients without Ethnicity/Indigenous status recorded Install and utilise Walrus Set SMART goals to improve percentage of documentation of Indigenous status/ethnicity recording in patient files Document Indigenous status/ethnicity appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Increase patient engagement with multi-lingual posters/resources in practice - can be specific to the cohort surrounding the practice Update new patient forms to include ethnicity/Indigenous status Update patient file as new information becomes available to maintain accuracy 	<p>Health Professional Resources:</p> <ol style="list-style-type: none"> RACGP Where can I find an interpreter? RACGP Providing effective, culturally safe primary healthcare RACGP Aboriginal and Torres Strait Islander communities RACGP Working with migrant and refugee communities Australian Institute of Health and Welfare Cultural competency in the delivery of health services for Indigenous people SWSPHN Culturally appropriate care toolkit RACGP Content of patient health records <p>Patient Resources:</p> <ol style="list-style-type: none"> WA PHN Cultural Background Poster NSW Health Diversity Inclusion Poster

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Social History/ Family History	<ul style="list-style-type: none"> Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. attend at initial consultation or if new information becomes available Improve quality care for high-risk/minority groups by improving health equity, appropriate preventative screening, effective communication and collaborative relationships through holistic care Social/Family History can contribute to chronic conditions and increased risk factors e.g. mental health, cancer, illness’ specific to a region/travel area 	<ul style="list-style-type: none"> QI activity – Focus on a cohort where social history or family history status recording is below benchmark expectations Utilise POLAR to extract a patient list and identify patients without Social/Family History or Gender status recorded Install and utilise Walrus Set SMART goals to improve percentage of documentation of social history/family history in patient files Document social history/family history appropriately in the clinical software system Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve Update new patient forms to include Social History/Gender/Family History Update patient file as new information becomes available with regular reviews to maintain accuracy 	<p>Health Professional Resources:</p> <p>60. RACGP Family history</p> <p>61. RACGP Family health history – a role in prevention</p> <p>62. RACGP Content of patient health records</p> <p>Patient Resources:</p> <p>63. NSW Health Diversity Inclusion Poster</p> <p>64. AIATSIS Family history worksheets and checklists</p>

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Next of Kin / Emergency Contact	<ul style="list-style-type: none"> • Meet RACGP standards – 75% recording and maintain up to date patient records, e.g. attend at initial consultation and review at regular intervals to maintain accuracy • Improve patient safety in the event of an emergency where a family member must be contacted • Prevent delayed or missed medical care 	<ul style="list-style-type: none"> • QI activity – focus on a cohort where Emergency Contact/NOK recording is below benchmark expectations • Utilise POLAR to extract patient list and identify patients without Emergency contact/NOK status recorded • Install and utilise Walrus • Set SMART goals to improve percentage of documentation of emergency contact/NOK in patient files • Document emergency contact and NOK appropriately in the clinical software system • Hold a team meeting to update staff on current QI focus area (s) and proposed steps/solutions to improve • Update new patient forms to include Emergency Contact/NOK information • Create posters in the waiting room – reminding patients to update contact information regularly • Update patient file as new information becomes available with regular reviews to maintain accuracy 	<p>Health Professional Resources:</p> <p>65. Emergency Care Institute Capacity, substitute decision makers and consent clinical tool</p> <p>66. RACGP Follow-up systems</p> <p>67. RACGP Content of patient health records</p> <p>Patient Resources:</p> <p>68. Digital Health Emergency contacts</p>