

MIMS MATTERS

Autumn Edition 2013

In this issue

- p1. Reducing Medication Errors in Acute Care
- p2. PBS Changes
- p3. From MIMS Asia
- p3. Food Interactions in MIMS
- p4. ALIA Online 2013
- p4. AACP Day at APP
- p4. MIMS PSA NSW Intern of the Year 2012
- p5. MIMS Integrated launched in new prescribing software
- p5. Stat Health Systems identified as Digital Champion for Brisbane
- p6. Award Winning Antibiotic Stewardship System Available
- p7. New look for Medical Observer
- p7. Find our latest news in MIMS Online
- p8. Staff Profile
- p8. Conference Dates - June to July 2013

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Reducing Medication Errors in Acute Care



The majority of the readers of MIMS Matters are familiar with the access of MIMS medicines information through our medications reference resources such as MIMS Online, eMIMS or our print publications. These MIMS reference sources provide full product information, abbreviated product information, drug/drug interactions and other indispensable resources that assist in the prescribing, dispensing or administering of medications. Perhaps many are not so familiar with MIMS Integrated knowledge, which is the enabling "medication management engine" for the majority of Australia's clinical software applications deployed in both acute and primary care.

Through its Integrated Data Solutions team, MIMS Australia makes its data available to software developers for integration into medical software products such as GP and Specialist clinical desktop programs as well as hospital electronic medical records, electronic medication management systems and pharmacy dispensing systems.

In recent years, electronic prescribing and administration initiatives in hospitals have helped reduce the frequency of medication errors. Medical record and medication chart legibility errors are typically the first problems to be addressed by introducing clinical software solutions. Significant progress has also been made in reducing medication administration and pharmacy dispensing errors by the use of software tools. However, the full realisation of achieving a true closed-loop medication management system by seamlessly integrating every aspect of prescribing and receiving a medication safely across the care continuum is still rare to see in practice. A stumbling block has been a lack of standardisation; this is needed so that branded and generically equivalent medicines and their components are accurately described with standard naming conventions and terminology.

At the moment, a clinician in a hospital may ePrescribe a medication in a clinical software application that uses a medications list and reference that is different to the medicines reference and formulary used by the hospital Pharmacy to dispense the medication. Then, typically, the administration of the medication is recorded in a non-interoperable medical record system. Each step usually requires some degree of "human mapping" of the medication process and this lack of standardisation increases the risk of a medication error occurring. To streamline the process and further reduce the opportunity for medication error, an unambiguous way of identifying commonly used medicines in Australia is needed for clinicians and computer systems. *cont overpage*

MIMS

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Reducing Medication Errors in Acute Care cont...

The "Australian Medicines Terminology" (AMT) is a NeHTA-developed set of specifications that standardise the identification, naming, and describing of medicine information. The introduction of AMT will reduce, and perhaps in time totally eliminate, the "human mapping" requirement that is today's standard practice. It is expected that AMT will also help to reduce errors by standardising terminology structure, the safer exchange of medicines information using common computer readable codes, and improved decision support.

AMT can be implemented in clinical information systems that:

- Prescribe
- Record
- Review

- Issue – including dispense
- Administer
- Transfer information

The MIMS Integrated Information that is used by the developers of clinical information systems includes AMT mapping. In the near future, clinical applications will begin to take advantage of this standardisation of identification, naming, and describing of medicine information. This will lead to greater interoperability between clinical software applications and drive significant improvements in the safety and efficiency of the use of medications in Australian acute care facilities.

To learn more about Australian Medicines Terminology in MIMS please contact info@mims.com.au

PBS Changes

Each month, MIMS incorporates PBS information into its various products, including MIMS Online and eMIMS, as well as into the data we provide to both prescribing and dispensing vendors. This is a very important part of MIMS' medicines update - ensuring this information is up-to-date and easily useable makes this a vital part of the information that MIMS provides.

A number of changes have been made to the PBS over the past months. These changes started with the introduction of the revised funding arrangements for chemotherapy drugs in December 2011 and have included the introduction of AMT (Australian Medicines Terminology) concepts, as well as changes to streamlined authority codes, amongst other things.

Significant changes to the prescribing and dispensing of chemotherapy drugs came into effect in December of 2011 for private hospitals and community pharmacies, and in April of 2012 for public hospitals. These changes, known as the 'Revised Arrangements for the Efficient Funding of Chemotherapy Drugs', or more simply, as the 'Revised Arrangements', aimed to increase the efficiency of the prescribing of injectible and infusible chemotherapy drugs, and apply to all relevant forms and strengths of chemotherapy drugs. The Revised Arrangements aim to reduce the expense and wastage that can be associated with prescribing chemotherapy agents by the vial. Under these arrangements, the prescriber writes a prescription for the specific dose of the chemotherapy agent required by the patient, without specifying the product form or strength. Once received by the pharmacist, the dispensing software calculates the most cost-effective combination of vials of medication required to fill this prescription. It was very important for MIMS to ensure that these revisions to the funding of chemotherapy drugs were reflected in our system, as many users rely on our integrated data in their prescribing

and dispensing software. Accordingly, since these arrangements have taken effect, we have made the necessary changes to our data, including alterations to item codes (now one item code per medicine), the maximum amount able to be prescribed, and repeats allowed for each medication, to ensure that we are providing the correct information to vendors and users.

A second change, and the most recent of the changes made to the PBS - the incorporation of AMT into the existing PBS data - is a big step towards the implementation and utilisation of various electronic health programs in the Australian healthcare environment. This data aims to increase the accuracy by which electronic medicines information is recorded and exchanged, and also increases the usefulness of software decision support systems.

As of December 2012, AMT product identifiers and preferred term descriptions have been linked to the relevant information in the PBS, meaning that products, strengths, dosage forms and pack sizes are now presented in a more consistent and uniform manner. It also makes the identification of an individual product by healthcare professionals and software systems much more specific and accurate. MIMS has reflected these changes in our PBS information by incorporating this terminology into our dataset. This means that our integrated prescribing and dispensing data remains current and useful, and that future e-health initiatives based around this data can be more easily achieved.

By ensuring that we remain up-to-date with PBS changes as they occur, MIMS continues to be a valuable and reliable resource, both for vendors who integrate our data into their systems, and for healthcare professionals who rely our products on a day-to-day basis.

MIMS win in Malaysia



In late 2012, MIMS Asia responded to a request for tender from the Pharmaceutical Services Division of the Ministry of Health Malaysia. The request was to provide medicines information for the healthcare system across Malaysia. MIMS has been partnering with many Government and private entities across Asia for the supply of medicines information; what was unusual about this scenario was the scale and breadth of the project.

The main benefit identified by the Ministry of Health Malaysia in undertaking this project, is meeting the growing demand to have a consistent, nationwide Medicines Knowledge Database. In Malaysian hospitals and health facilities, not dissimilarly to Australia, medicines information is used in both reference and integrated scenarios. Use of reference information is more widespread and includes the need to have online and offline access. In the integrated setting, 21 sites are currently using integrated medicines data in their pharmacy information systems and this has been identified as a rapidly growing area.

The solution that MIMS tendered was MIMS Gateway Knowledge Solutions, which included both reference and integrated components. The solution contains a Malaysian specific database as well as evidence-based decision support modules such as drug interactions and drug allergy. Rolled out earlier this year, MIMS is now

available in 253 reference sites and a further 21 sites as an integrated solution.

One of the benefits that the Ministry of Health Malaysia hopes to gain from using a consistent medicines databases in both reference and integrated products, is assisting clinicians move efficiently and safely between platforms. This is also an important benefit when implementing further changes, such as introducing integrated systems into the clinical workflow. Ensuring consistent standards and quality of the medicines information also minimises the potential for medication error and helps improve patient safety.

Within Asia, MIMS has a team of over 50 editorial pharmacists, doctors and medical scientists producing country specific medicines information. This is backed by a specialized editorial team that produces evidence-based, clinically reviewed decision support modules drawn from international research literature. In the Malaysian implementation, MIMS is fully integrated with the Malaysia Drug Codes (MDC) as well as the Malaysia National Drug Formulary (Blue Book).

Working with the Ministry of Health Malaysia has been a very positive experience for MIMS. To date, the project has been a success with all milestones reached and it is hoped that it will become a reference case study for other Governments looking to replicate the project within the region.

NEW Drug - Food Interactions in MIMS

The interaction of natural products and drugs is a common hidden problem encountered in clinical practice.¹

MIMS recently added a NEW evidence based Drug Herb Interactions module to eMIMS.

Included in this NEW Drug Herb Interactions database from IMgateway, is a comprehensive Drug Food module.

Food-drug interactions can produce negative effects in safety and efficacy of drug therapy, as well in the nutritional status of the patient.²

Here are some examples:

- Licorice & Corticosteroid medications
- Kelp & Thyroid Medications
- Turmeric & CYP450 drug substrates

At MIMS we recognize that some foods and drugs, when taken simultaneously, can cause an undesired outcome - alter the effectiveness of the drug, or the benefits of the food. This is another motivator why MIMS is committed to its partnership with IMgateway in providing an Australian first, evidence based and referenced Drug - Herb Interactions Module, which includes Drug - Food interactions.

Developed by the University of Sydney's School of Pharmacy Academic staff, our new module is available as an additional subscription when you purchase eMIMS. If you already have an eMIMS subscription, simply go to the Drug Interactions section and select 'IMGateway only mode' to view the entire list.

1,2 Rabia Bushra, Nousheen Aslam, Arshad Yar Khan; Food-Drug interactions, Oman Med J. 2011 March; 26(2): 77-83.

Conferences

Australian Library Information Association Conference

MIMS has recently participated at "ALIA Information Online 2013", a conference focused on exploring the methods and experiences of creating, providing and delivering online information and knowledge in the Asia Pacific region.

ALIA Information Online attracts over 1,400 professionals from almost all sectors of the library and information industry. With the conference program featuring a number of streams, and a multi-sector focus, MIMS participation allows us to take part in several discussions. These help us optimise our service to current users of our information, as well as providing valuable insight that helps us in designing future products.

Topics of particular interest to us here at MIMS included the rapid expansion of cloud based delivery

of information and the latest advances in mobile technologies. We also discussed the importance of relevant and focused high quality content, delivered at optimal depth at the right time and in the right place – often directly into the user's professional workflow.

With fellow delegates from all major health providers and higher education institutions in Australia, it was also the perfect opportunity for us to meet face-to-face with our subscribers, and friends old and new. Over the four days of ALIA Online, we met many users of our digital reference and integrated electronic medicines information. They shared plenty of valuable feedback and suggestions that will definitely guide us in our aim of delivering innovative and flexible online medicines knowledge and clinical decision support.

AACP Day at APP

Always providing a wonderful opening to APP the Clinical Pharmacists came up trumps again in 2013. Almost 200 Delegates spent a day with their peers discussing everything from drug interactions that manifest in the mouth to concern about ongoing funding for the program. Once again the speakers were drawn from a broad sector of health and provided the delegate's with much food for thought throughout the day.

Happily it was announced later that week, by Health Minister Tanya Plibersek, that HMR funding would not be reduced which is great news for this group of pharmacists.

It was a very busy day for MIMS with interest in our new IMgateway, evidence based, drug/herb interactions from Sydney University capturing everyone's imagination and interest. As one pharmacist said to MIMS " When conducting an HMR in the home it becomes more and more evident that are our patients are using herbal products alongside their prescribed medicines. So, we clearly need to understand how these (and foods) can impact on the patients response to medicines".



MIMS PSA NSW Intern of the Year 2012

Congratulations to Olivia Cocks The MIMS, PSA NSW Year for 2013.

Olivia from Gunnedah received her award from MIMS at the PSA NSW, March weekend in Terrigal. All of the finalists showed passion and commitment to pharmacy and the judges assured us it was a very difficult decision again this year.

Congratulation to all three finalists Olivia, Angela Catternack and Daniel Flavel from all the team at MIMS!

MIMS Integrated launched in new prescribing software

MIMS has a long history of supplying data for integration into software developed by people with a goal to create the very best clinical and dispensing software on the market. Every year we work with many vendors to support them in successfully bringing their software to market.

In recent months Medilink, a company with a long heritage of practice management software that is used across general practice and by specialists and other healthcare professionals, launched a new, state of the art clinical module. To learn more about Medilink's new clinical software, visit Medilink Clinical – www.medilink.com.au.

Claydata's eScripts™ launched in early October



and rounds out their suite of ehealth products - <http://www.claydata.com/>. It is described as "a simple interface holding powerful data management under the hood, eScripts™ is a speedy solution to prescribing, tracking, and re-prescribing that always respects the safety of your patient and the integrity of your practice".

All of the team at MIMS wish these new partners well and look forward to working them

into the future.

If you are looking under the hood at new clinical or dispensing software you can see all of our current MIMS partners by visiting

<http://www.mims.com.au/index.php/content-partnering.html>

Stat Health Systems identified as Digital Champion for Brisbane

Stat Health Systems (SHS), vendor of the medical software Stat, has been selected as a Digital Champion for Brisbane following a recent survey of over 500 small-medium enterprises (SMEs).

SHS will act as a digital advocate for the Software Development sector, promoting the adoption of digital technology to provide superior customer support, embrace paperless environments and respond quickly to new eHealth customer and legislative requirements.

The Digital Brisbane Audit, conducted in late 2012 by Ernst & Young in partnership with the University of Queensland, identified 25 Digital Champions who will help to create a digital capability analysis for all Brisbane businesses.

According to Brisbane Marketing, SHS was identified as a Digital Champion in part for successfully embedding digital in every process, "building a lean, digital culture, which allows them to remain nimble and agile".

Chief Executive Officer, Carla Doolan, considers SHS' role as a Digital Champion to be, "a huge honour".

"Our commitment to providing a quality product and services with digital technology at the core of our robust processes has led to this recognition" Ms Doolan said.

"We have embraced a digital approach to business – from recording and tracking support calls from our clients to identifying and developing new features for Stat".

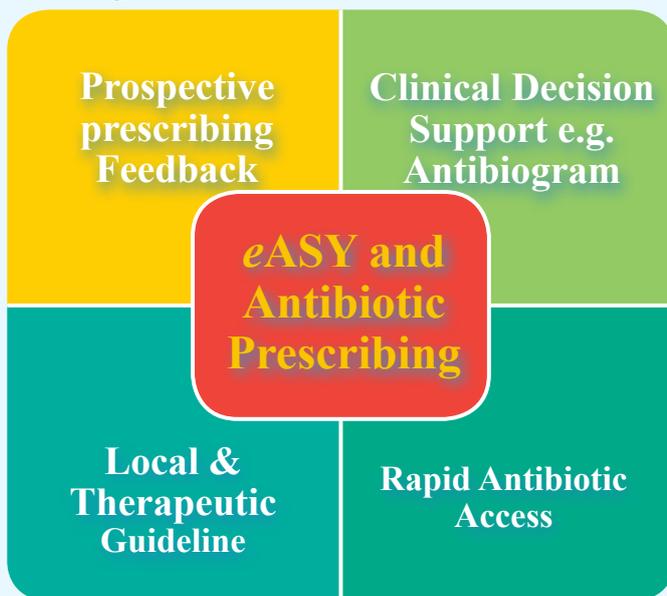
SHS has attained ISO 9001 certification for all aspects of its operations, including software sales, implementation, development and design, and uses this strong focus on quality to deliver current and stable software to its customers.

In its role as a Digital Champion, SHS will be advocating digital methods of customer communication and marketing, and using the latest technology for software design, development and release.

The results of the Brisbane Digital Audit can be reviewed on the Brisbane Marketing website, <http://www.brisbanemarketing.com.au/Business/Digital-Brisbane-Hub.aspx>

Award Winning Antibiotic Stewardship System Available

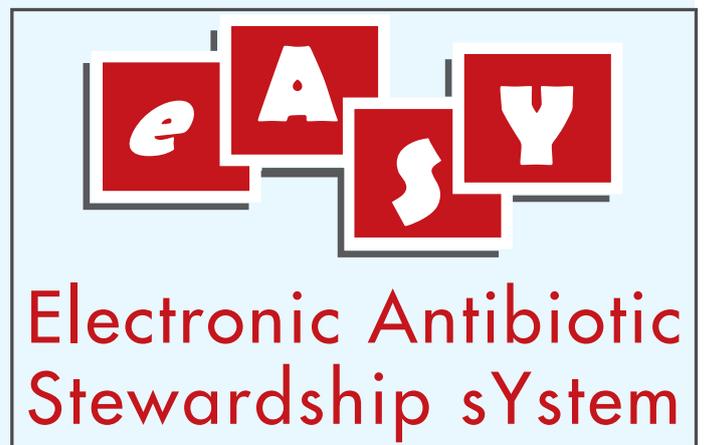
A collaboration between the North Sydney Local health District and Healthcare Software has resulted in the launch of the Electronic Antibiotic Stewardship System (eASY). The system is a significant step forward in assisting hospitals to efficiently ensure that the most appropriate antibiotics are being used to achieve optimal clinical outcomes, whilst reducing cost and addressing the issue of antimicrobial resistance.



Antimicrobial stewardship refers to coordinated interventions designed to improve and measure the appropriate use of antimicrobials. It promotes the selection of the optimal antimicrobial drug therapy regimen, dose, duration and route of administration. Antimicrobial stewards seek to achieve the best possible clinical outcomes related to antimicrobial use, minimise toxicity and other adverse events, reduce health care costs for infections and limit the selection for antimicrobial resistant strains. Currently there is significant national and state interest in initiatives designed to optimise use of antimicrobial therapy through antimicrobial stewardship.

eASY is a web based system that streamlines the process for selecting the most appropriate antibiotic; its innovative approach has seen it win 2 recent awards. In 2012 it was the winner of the ACHS Quality Improvement Awards for Clinical excellence and Patient Safety. Also in 2012, it was a winner in the NSW Health Awards, winning the Harry Collins Award for Achievement in Reducing Healthcare Associated Infections.

Designed on a web platform, the eASY system is readily accessible both by persons in the hospital and those working on call or remotely. The system facilitates the flow of information by improving accessibility to infectious diseases specialists regardless of their location. The system also streamlines the process for accessing selective antibiotics for hospitalised patients whilst simultaneously involving subject matter experts such as pharmacists and infectious disease physicians, both directly and indirectly. It also makes available local resistance patterns of key pathogens and allows monitoring of any resistance changes.



The major benefit of eASY is that it facilitates communication and timely information access by including it all in one system. This reduces the inefficiencies and frustration associated with many current practices and also ensures that important information is not lost when making prescribing decisions. Given the complexities with antibiotic prescribing, the eASY system is a significant advance in current practice.

Further information on eASY can be found at www.healthcaresoftware.com.au

Recent endorsement for eASY

2012 Winner - ACHS Quality Improvement Awards - Clinical Excellence and Patient Safety Award

"Particularly when there is evidence to suggest that up to 50% of prescribing of antibiotics is inappropriate and can potentially increase the risk of development of resistance, the eASY tool provides a basic framework for management of high risk medications in an institutional setting by combining the elements of safety and efficacy."

ACHS Director of Development, Ms Linda O'Connor

2012 Winner - NSW Health Awards - Harry Collins Award for Achievement in Reducing Healthcare Associated Infections

New look for Medical Observer

Medical Observer has begun the new year with a fresh look, offering more clinical content, new features and new ways of engaging with the best in medical news.

Medical Observer has pored over reader responses to editorial surveys and listened to the feedback; readers are busy and need quality independent editorial that keeps them up to date with the latest clinical news.

With that in mind, Medical Observer has beefed up clinical news with expert comment on the latest research, treatments and patient advice.

New regular clinical columns from the experts have also been launched – men's health and travel medicine, among others – to broaden Medical Observer's offering and reflect the diversity of the patients and conditions that present to you.

In addition, former MJA editor and experienced GP Dr Annette Katelaris has joined the team to present the new Observations feature, available in Medical Observer's iPad editions, available from the App Store, or online at medobs.com.au/audio

This regular audio podcast features Dr Katelaris and many of Australia's best-known medical leaders and

most interesting experts exploring complex medical issues and answering tough questions.

Already, Dr Katelaris has explored issues such as the legalisation of marijuana and the spectre of GP revalidation, going in-depth to offer new perspectives.

Medical Observer has also launched a new short video feature. On the Pulse offers readers timely interviews with news-makers and experts on the issues of the day. To view the videos, simply read MO's iPad edition or visit medobs.com.au/video

To coincide with the launch its new content, Medical Observer has also revamped its look to better reflect the independent news and the authoritative content by

its experienced team of medical journalists, specialist columnists and expert commentators.

You'll find the new look across all Medical Observer offerings – the free weekly iPad issue, the daily e-newsletters, the website with its content-rich archive, and Mobile Dr, a free iPhone app with more than 100 clinical calculators.



Find our latest news in MIMS Online

In response to the popularity of our various newsletters we have added them to the Home Page of MIMS Online. You will find the latest edition of:

- MIMS Matters (quarterly industry news)
- MIMS Monthly Update (most important changes to product information)
- MIMS Navigator (training newsletter)

You can also sign up to receive these newsletters direct to your inbox.

Put in a screen shot of the Home Page with the News circled and one with the window pane opened.



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Staff Profile

Jonathan and Lani Au



What are your roles at MIMS?

Jonathan: I am a member of the IT team and I work on development, data production and infrastructure projects. I look after the MIMS websites and prepare data for the upcoming projects like the new eMIMS and MIMS CMS. I also play the network and system admin role, looking after the company's IT systems.

Lani: I work as an editor for MIMS. As part of the editorial team, I help update the product information databases and oversee the editors in the Philippines.

Tell us about your history in MIMS.

Jonathan: We both have been around MIMS for over 15 years. We started in the Philippine office in 1997, transferred to Singapore in 2005 and moved here to Sydney in 2012.

I joined the company in October 1997, starting out as a typesetter then moved towards applications and web development. In September 2005, I took on the role of Regional Infrastructure Lead in the Singapore office.

Lani: I first joined MIMS in May 1996 as a temporary staff member. After Pharmacy registration, I joined the company full time in February 1997 and worked as an editor and Editorial Manager for various publications including MIMS and MIMS Annual, MIMS Specialty Editions, Health Guide and Pharmacy Guide.

In 2005, I joined the newly established IDS team in Singapore as a Clinical Database Research Editor working on evidence-based decision support modules.

What do you enjoy doing outside the office?

We spend much of our free time with our cuddly 4 year old boy – going to playgrounds, parks, swimming pools, or just lazing around at home. We are also expecting our second – a girl – in June, so we're looking forward to more fun.

As officers of the Iglesia Ni Cristo (Church of Christ), we spend a great deal of time in the church, performing in worship services, bible studies, visitations, sports, and a host of other activities.

Conferences

ConPharm

Friday 7 June – Sunday 9 June, 2013

Hilton Hotel Adelaide

www.conpharm13.com.au

The AACCP strives to develop programs for ConPharm to equip consultant pharmacists with the up-to-date and evidence-based knowledge and skills necessary to practice at the highest level. The program has been carefully designed to appeal to both newly accredited and experienced pharmacists with a mixture of topics which the AACCP hopes will have broad appeal.

NSW Pharmacy National Convention & Exhibition

Friday 21 June – Sunday 23 June, 2013

Sydney Convention & Exhibition Centre

www.nswpharmacy-nce.com.au

NSW Pharmacy look forward to delivering you another great event at the Sydney Convention and Exhibition Centre, Darling Harbour.

HIC

Monday 15 July – Thursday 18 July, 2013

Adelaide Convention Centre

www.hisa.org.au/page/hic2013

The Health Informatics Society of Australia (HISA) is pleased to invite you to participate in HIC 2013, Australia's Health Informatics Conference, to be held from 15 July - 18 July 2013 in Adelaide at the Adelaide Convention Centre, with the primary theme of Digital Health Service Delivery - The Future Is Now!

Nursing Informatics Conference

Monday 15 July, 2013

Adelaide Convention Centre

www.hisa.org.au/page/hic2013nursing

The primary theme of NIA 2013 is New Age Workforce: Blending Professional and Digital Behaviours.

Aged Care Informatics Conference

Wednesday 17 July, 2013

Adelaide Convention Centre

www.hisa.org.au/page/hic2013agedcare

Aged Care Informatics (ACI), a special interest group of HISA, is pleased to invite you to participate in ACI 2013, Australia's Aged Care Informatics Conference.

