

HepLOGIC intervention: the challenges of implementation of viral hepatitis clinical decision support tools in General Practice

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Background: The HepLOGIC pilot and feasibility study aimed to improve viral hepatitis diagnosis and management with a scalable intervention in general practice using the POPulation Level Reporting and Analysis data tools (POLAR). This novel intervention included a point of care tool (POCT), a liver cancer risk audit tool and educational material including short videos to support management of viral hepatitis and improve recording of country of birth/ethnicity. Practices were recruited to the study across 3 Primary Health Networks (PHNs) with the intervention spanning 13 months (2023-2024).

Methods: We evaluated the HepLOGIC intervention using the RE-AIM framework (assessing Reach, Effectiveness, Adoption, Implementation and Maintenance). A mixed methods evaluation included surveys and interviews with clinicians and practice managers, feedback on the audit tool, and quantitative POCT metrics. Effectiveness was also assessed by comparison with testing activity in non-intervention practices.

Results: Nineteen Victorian practices were recruited. The intervention was implemented in all practices but three withdrew. The remaining 16 practices in total averaged 48,672 patient visits per month. User metrics showed that uptake of the POCT was low, and that of patients recommended for hepatitis B and C testing, 20.9% and 22.3% respectively were notified to the clinician through the tool being in use at the time of the clinical encounter. Barriers to uptake and maintenance included login requirements, clinician engagement and time pressures. Analysis of overall intervention effect showed only a modest increase in screening compared to the non-intervention cohort (n=574 with 1.8 million active patients).

Conclusion: HepLOGIC tested an assumption that 'pop-up' or notifications within general practice workflows can bridge gaps in hepatitis screening and management. Implementation of hepatitis specific notification tools is feasible, but numerous factors limit their uptake and therefore their effectiveness.

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