Re-imagining Quality Improvement

A scalable feedback platform for clinical learning and improvement





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Clinical Insights is EMPHN's bold step from small-scale PHN quality improvement to scalable, embedded clinical feedback—building core infrastructure for system-wide learning and better health outcomes.

What is audit and feedback (A&F)?

A&F is a proven quality improvement strategy that gives clinicians summaries of their performance, often benchmarked against peers or standards, to prompt reflection and behaviour change.

A Cochrane review shows A&F leads to modest but meaningful improvement (mean 6.2%). It's most effective when baseline performance is low, individual performance is measured, and advice for improvement is included. 1-2

Why EMPHN and why now?

- 84% of EMPHN practices share data via POLAR.
- General practitioners (GPs) want more engagement from EMPHN in clinical care and education.
- EMPHN seeks to better engage GPs, enhance its commissioned programs, and link clinical data to CPD-approved audit activities.

Research and Evaluation

EMPHN has partnered with researchers at Monash University to pilot a new A&F Program with 21 practices and ~100 GPs, Practice Managers and Practice Nurses. Use surveys, interviews, and retrospectives to evaluate feasibility, acceptability, and user experience to inform scale-up decisions

CPD

Promote CPD value through RACGP
Measuring Outcomes hours and auditaligned activities. Automate documentation
where possible and support CPD reporting to
reduce administrative burden on busy GPs.

Discovery

Identify priority topics with clear evidence-practice gaps, strong supporting evidence, reliable POLAR data, and relevance to GPs' interests and PHN health priorities. Focus on behaviours within GPs' control, such as prescribing or test ordering.



Design

Co-design feedback reports with GPs, focusing on usability and clarity. Use clear language and visuals, and embedded links for added context. Conduct user testing to ensure reports are relevant and fit-for-purpose.

Build

Define indicator logic, codes, and clinical definitions with oversight. Align early on technical capabilities (e.g., POLAR limitations, CPD automation) and conduct user acceptance testing to ensure reports meet agreed specs.

Data Governance

Secure appropriate consent and ethics approvals (e.g. POLAR agreements, Human Research Ethics Committees). Align data use with partner agreements and follow ISO27001-aligned privacy and security practices to protect GP-identifiable data.

Marketing & Engagement

Deliver clear, consistent messaging across EMPHN channels. Actively involve GPs through co-design, comms, and tailored feedback. Leverage internal networks and expert endorsements to build trust and credibility.

What did we learn (the hard way)?

Planning and delivery:

- Allow more time—complex work takes longer than expected.
- Align data, build and evaluation early to maximise efficiency and avoid confusion.

People and engagement:

- Engage comms, partners, and end users early.
- Leverage internal teams' networks; support by providing clear guidance for consistency.

Participation and value:

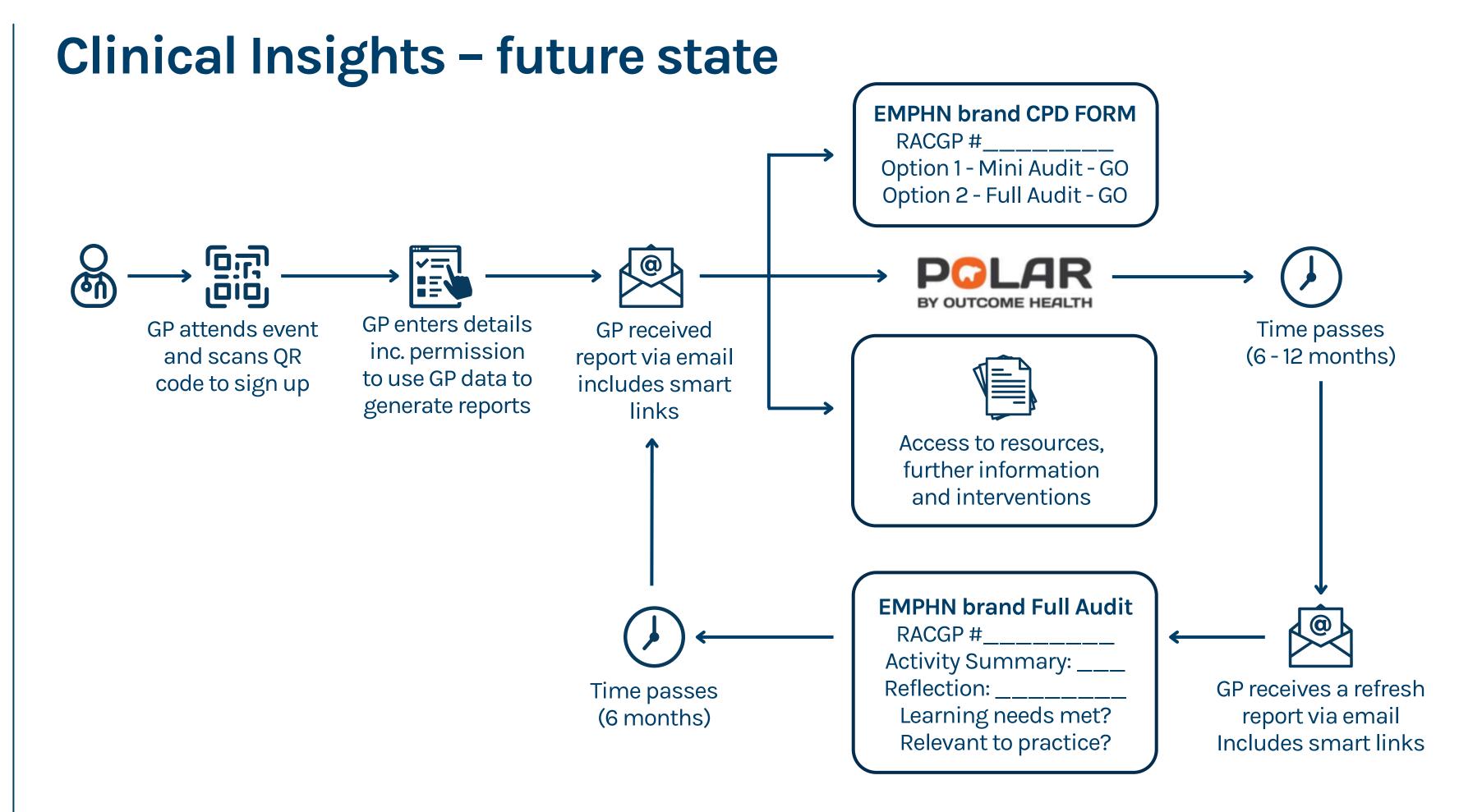
• Support GPs by addressing real needs (e.g. using own data to optimise patient care, support CPD recording, reduce admin load).

Data and digital:

- Define indicator logic and data limits early.
- Validate assumptions using real-world data.

What's in it for other PHNs?

EMPHN's new A&F Program moves QI from isolated, processfocused efforts to a scalable, data-driven system. It offers a blueprint for PHNs to align strategy with clinical improvement, foster learning, and place GP engagement at the heart of their work.



1. Ivers N et al. Audit and feedback: effects on professional practice. Cochrane Database Syst Rev. 2025.

2. Brehaut JC et al. Practice feedback interventions: 15 suggestions for optimizing effectiveness. Ann Intern Med. 2016;164:435–41.

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