

POLAR transition: Frequently asked questions

Q. What is POLAR?

Population Level Analysis and Reporting (POLAR) is a cloud-based data extraction tool for general practice. It is provided by Outcome Health. POLAR securely extracts data from practice software. This data is used by practices and NWMPHN to support quality improvement and business development, providing better patient-centred care.

Q. What is Outcome Health?

Outcome Health is a not-for-profit organisation that provides a range of dedicated data intelligence and clinical services. It is the owner and developer of POLAR. NWMPHN has partnered with Outcome Health to provide POLAR for general practices in our region.

Q. Who is eligible for POLAR?

General practices who provide de-identified practice data to NWMPHN for the PIP QI Incentive program are eligible for a POLAR licence funded by NWMPHN.

Q: Who can use POLAR?

POLAR is suitable for general practice staff who work clinically, have business oversight or use data for accreditation purposes. Access can be determined by the practice's assigned POLAR administrator and can include principals, GPs, nurses, practice managers, business managers and receptionists.

Q: Do I need to pay for POLAR?

There is no direct cost to the practice. POLAR is fully subsided by NWMPHN and there will be no ongoing costs. An agreement to provide de-identified practice data to NWMPHN is required for the use of the tool.

Q: How does POLAR manage my data?

POLAR automatically extracts patient data from the general practice clinical information and management software.

The data is encrypted using industry endorsed algorithms similar to those used in the banking sector. It is stored locally. At no point does any identified patient data leave your practice.

The encrypted de-identified data is then uploaded directly to the POLAR data warehouse located in Australia. NWMPHN can access aggregated practice data through a secure web portal. Please refer to <u>Data Privacy and Security</u> for more details of Outcome Health data management.

Q: How does NWMPHN manage my data?

De-identified aggregated practice data is stored securely in the POLAR platform and is not for distribution. NWMPHN has oversight and uses this information to improve population health planning and provide better patient outcomes across the catchment.

This includes:

- population health planning
- quality improvement activities with practices
- health service planning
- identification of service gaps
- improvement of community health promotion and prevention activities
- authorised research with appropriate Human Research Ethics Committee approval and
- supporting the commissioning of local services.

NWMPHN complies with all applicable laws in relation to data privacy and security during collection, storage, access, use, disclosure or transmission of the de-identified data (including, where applicable, privacy laws).

NWMPHN will not attempt to identify or re-identify any de-identified data received from the practice. It will not release practice level data to any other party without written consent.

For more information about how NWMPHN uses data and how this data is managed, consult your data sharing agreement, or speak with our team by emailing <u>primarycaredata@nwmphn.org.au</u>

Q: Why has NWMPHN decided to make the change?

NWMPHN is moving to Outcome Health's POLAR data extraction tool to better support practices in understanding their patient cohort. It will provide meaningful analysis to identify gaps in patient care, track patient outcomes, build on areas of quality improvement and identify opportunities to improve practice revenue.

Q: When will the transition start?

NWMPHN and Outcome Health are working with practices to transition to POLAR before 30 June 2025. Please contact our Quality Improvement team if you have not received the transition instructions or need more information.

Q: What are the steps of POLAR installation?

Step 1: Your practice will need to sign a new data sharing agreement with NWMPHN.

Step 2: Once the agreement is signed, the NWMPHN QI Team will create a practice profile for you in POLAR and will contact you to arrange a time for remote installation.

- Your practice needs to nominate a POLAR authoriser and administrator. These could be the same person, likely your practice manager or owner. The administrator will be the only person with access to the practice financial information in MBS reports.
- The POLAR administrator can set up and manage your POLAR user accounts for any staff member and allow or restrict access to revenue information in individual reports.

Step 3: Once you have booked an installation time Outcome Health will be in contact to confirm and provide instructions.

POLAR is only installed onto one server or computer within the general practice or cloud environment. It takes about 15 minutes to install including the first full data extraction.

Q: My practice has a lot of workstations, will the POLAR installation process be time- consuming?

A single installation allows you to use POLAR on any PC within the same network regardless of the size of your practice.

Q: Can I keep both PenCS and POLAR clinical audit tools at the same time?

Yes, both clinical audit tools can be kept at the same time. However, NWMPHN will only subsidise POLAR, and your PenCS license will be deactivated from 30 June 2025.

If you would prefer to keep PenCS, you will need to pay for the PenCS license yourself.

Q: When will the last data submission be for PenCS and what will happen with my PIP QI data during the transition process?

The last data submission with PenCS to NWMPHN will be in June 2025. NWMPHN is working to have all practices onboarded with POLAR prior to this and data will be submitted to both platforms ensuring there is no disruption to PIP QI data upload during the transition.

NWMPHN will work with all practices to ensure we receive your PIP QI data and you remain compliant for the quarter.

Q: Will it impact PIP QI payment if I do not have POLAR installed?

From 1 July 2025, POLAR will be the data extraction tool provided by NWMPHN to submit your deidentified dataset to meet the requirement of getting a PIP QI payment. If you do not have POLAR installed by 30 June 2025, you will need to discuss an alternative method with NWMPHN.

Q: What is the difference between Hummingbird and Walrus?

Hummingbird and Walrus are the names of POLAR's primary tools. Hummingbird is the data extraction tool, and Walrus is like Topbar from the CAT4 tool. It is another way of accessing the data that we have prepared and it is mainly used by nurses and practitioners. It is highly customisable, so reception staff use it for QI opportunities, without seeing patient private data.

Q: Will NWMPHN subsidise Walrus?

Yes, Walrus will come with your POLAR license.

Q: How frequently will data extraction occur?

Data is extracted every 20 minutes. Because this involves only very small amounts, it does not impact normal IT system operations. Data for reports – involving cumulative amounts – is only extracted after hours. It is important to have Hummingbird stay active and online 24 hours a day.

Q: Given PenCAT tool isn't available from 30 June, will POLAR provide historical data (such as the previous quarter) for reporting purposes?

The first extraction that Hummingbird does include historical data from the practice management software (PMS) system, so practices will be able to produce reports based on data before June 30. Following that, extractions will only include new data.

Q: How do I access my account?



The practice administrator should have received a no-reply email once we've set you up in Hummingbird. The administrator will be able to log into POLAR via polarexplorer.org.au and create accounts as needed.

Q: My Hummingbird installation is done but I don't have any login details or desktop icons. What's going on?

POLAR is web-based so there is no icon or desktop shortcut. You will need to navigate to polarexplorer.org.au to access the reports.

Q: Is our current PenCS license usable after July 2025, just for historical data access?

NWMPHN funding for licences will cease from July 1. However, you can discuss with PEN continuation of you licence at your own expense. All of the data that the PenCS tools provide access to belongs to the practice, so practices will be able to access that historic data through POLAR once the tool is installed and the first extraction (which extracts the historic data) is completed.

Q: In this new data sharing platform will patient details still be de-identified?

Yes – only de-identified aggregated practice data is stored securely in the POLAR platform.

Q: How do I notify our patients about their data being collected?

You must ensure your patients are reasonably informed that the information the practice has collected about them will be de-identified and shared with NWMPHN for the purposes outlined in the question above. You must also ensure that patients are reasonably informed that they can withdraw their consent at any time.

You can inform your patients about their de-identified data being shared through new patient intake forms, practice brochures and waiting room posters. NWMPHN will provide you with a poster.

Q: How and when can my practice staff learn to use the tool?

A series of webinars will be provided for staff training. Practices will also have access to Outcome Health's extensive resource hub for ongoing learning. We recommend viewing these webinars as a first step. The QI team will be able to visit practices to train staff in using the tool from July.

Q: Where can I go for support?



For technical issues, please contact the POLAR Support Team. Submit a ticket through your POLAR Account Portal via 'Support' > 'Contact Us' or send them an email on servicedesk@outcomehealth.org.au

For guidance materials, troubleshooting support and Quality Improvement activities, please contact your QI Team by emailing primarycaredata@nwmphn.org.au



We acknowledge the peoples of the Kulin nation as the Traditional Custodians of the land on which our work in the community takes place. We pay our respects to their Elders past and

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