



# Annual CIAP Usage Report

# 2008

January 2008 – December 2008

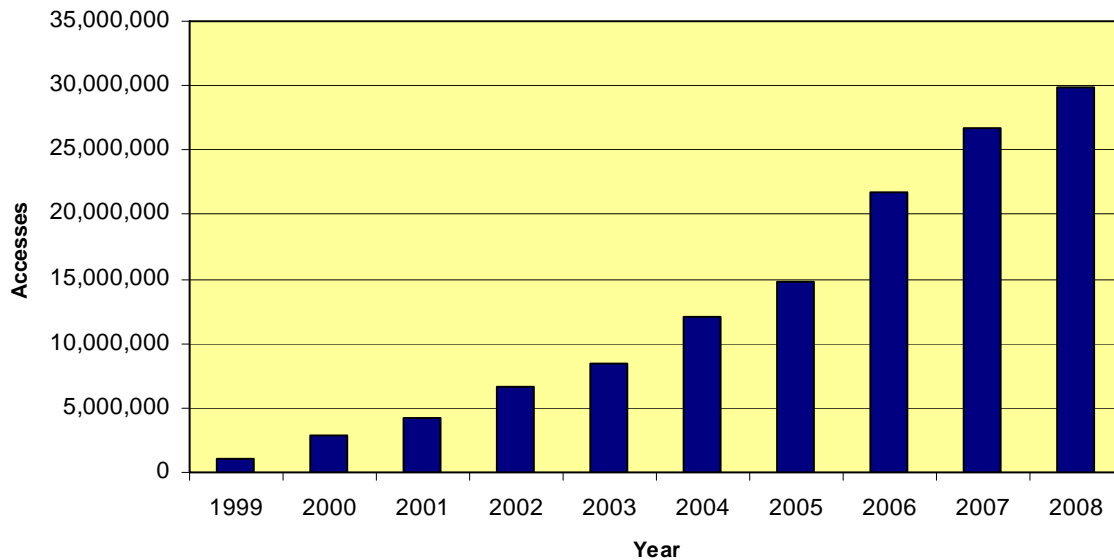
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## Annual CIAP Usage 2008

### Statistical Trends in CIAP

All CIAP Annual Database Resources Usage since 1999

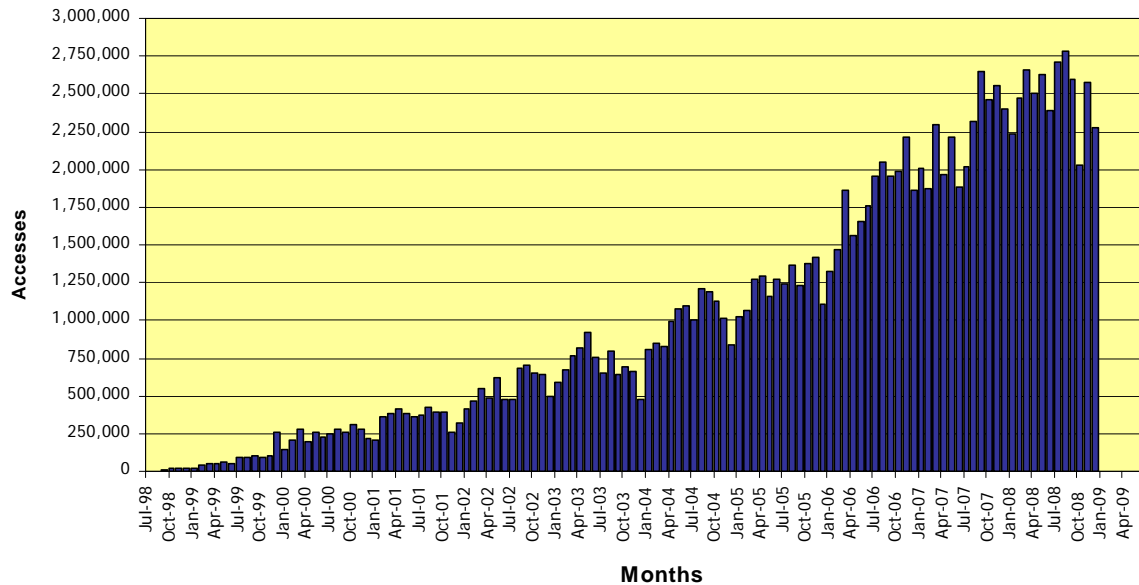


Usage for all CIAP database resources for the period January - December 2008 increased 12% on the same period for the previous year. This trend continues the growth in usage seen since 1998, when usage was only 3.5% of 2008 usage. This reflects a continued increase in awareness of and reliance on CIAP within the Area Health Services, and an increase in the number and selection of resources available on CIAP over the past 10 years.

The CIAP site usage also improved in 2008, with page hits increasing 33% compared with the same period for the previous year. CIAP has continued to provide education and support material, bi-monthly newsletters, specialty site links, and usage statistics to the Health System.

During 2008 CIAP underwent a site redesign and now complies with the Department of Commerce GCIO standards. Other new features added in 2008 include RSS news feeds, new protocols, an online form for suggested resources, and an information panel on each page for related content.

### All CIAP Resources - Usage since July 1998



The consistency and strength of the upward trend is pleasing however, the following factors should be taken into consideration in reviewing current and historic monthly usage:

- Seasonality influences usage, which is traditionally strongest from February – November.
- Major national, state, and local metropolitan events can have an impact on usage statistics.
- Factors such as technical infrastructure constraints related to hardware, software or connectivity, effectively limit the potential for growth. With the rollout of the state-wide clinical information solutions, increased computer numbers and bandwidth will become available to all AHSs and this impact will be improved.
- The degree of local marketing and promotion of CIAP to support evidence-based medicine is likely to impact usage by clinicians.
- The clinical focus of an AHS can affect usage levels for specific resources. This is clearly demonstrated in the statistics provided for selected resources by AHS.

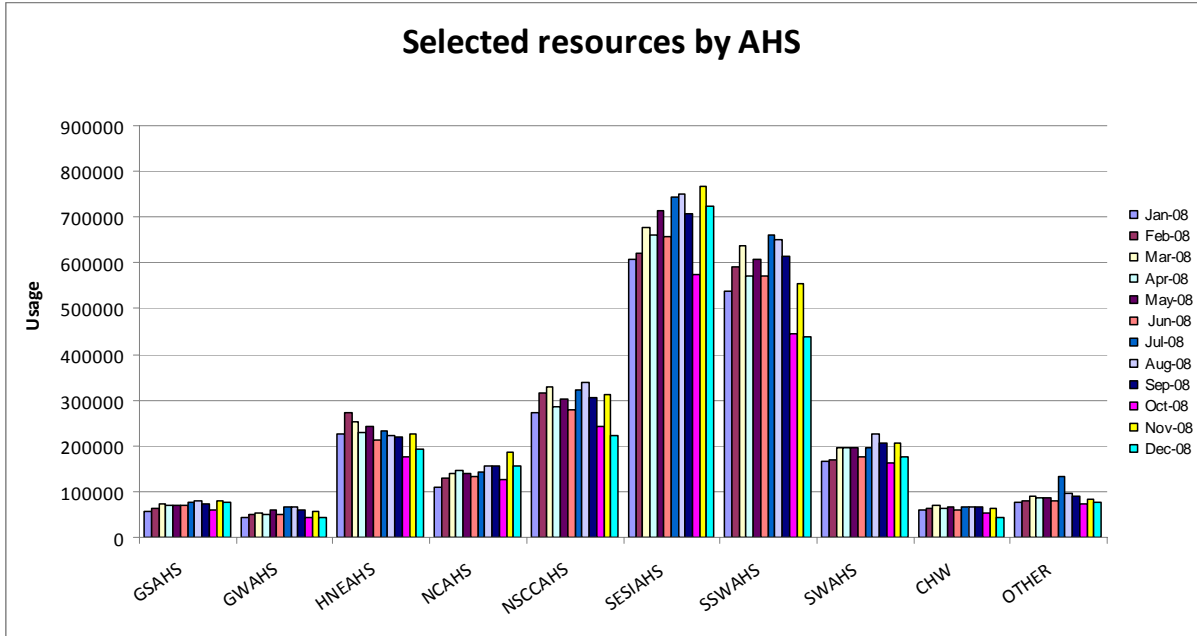
## **Usage by Area Health Service for selected resources: Overview**

The following graphs reflect total usage statistics by Area Health Service for subscribed resources in 2008. Of note is the inclusion of an AHS category entitled “Other” within the first chart “Selected resources by AHS”. This category, while not a formal AHS, includes usage by authorised CIAP users of affiliated NSW Health entities and organisations, such as the AIDS Council of NSW (ACON), Ambulance Service of NSW, Cancer Institute, Clinical Excellence Commission, College of Nursing, Health Care Complaints Commission, Justice Health, NSW Department of Health, NSW Institute of Psychiatry, and NSW Therapeutic Advisory Group.

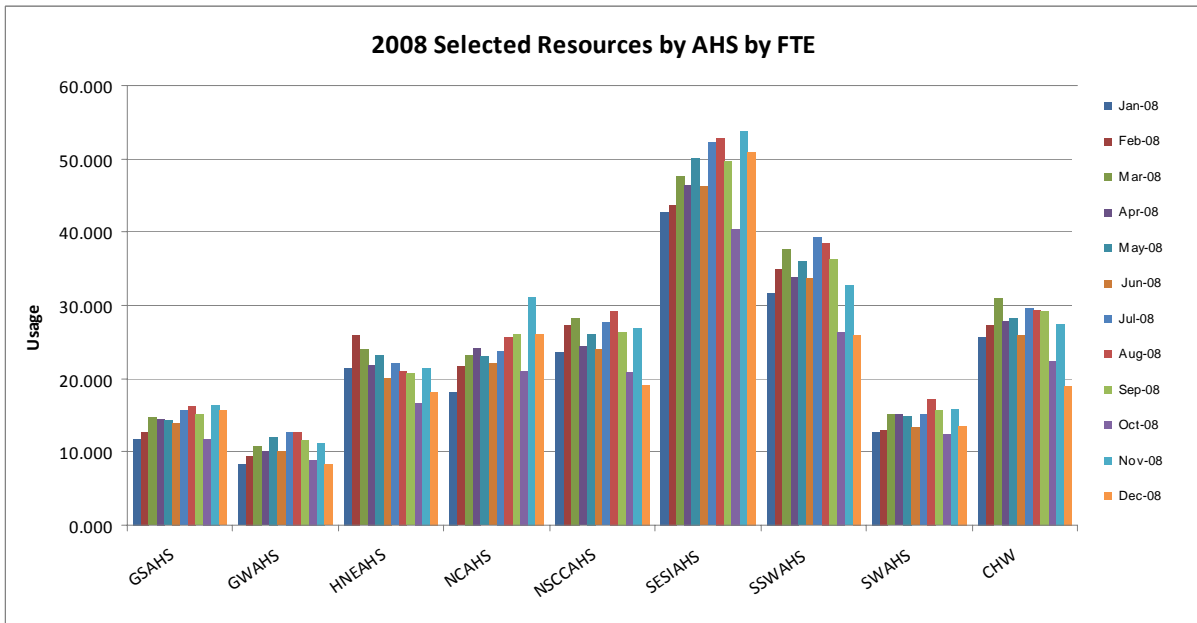
As reliable FTE numbers are not available for the “Other” category, the ‘Total usage by FTE by Area Health Service’ graph excludes the organisations grouped under the category “Other”.

The following information should be regarded as indicative and FTE numbers need to be considered when usage of resources between Area Health Services is compared. A number of resources have specific treatment applications or are specific to particular user groups, and as such any specificity of clinical focus on a site by site basis can skew usage toward or away from particular resources.

## Total usage by Area Health Service for selected resources

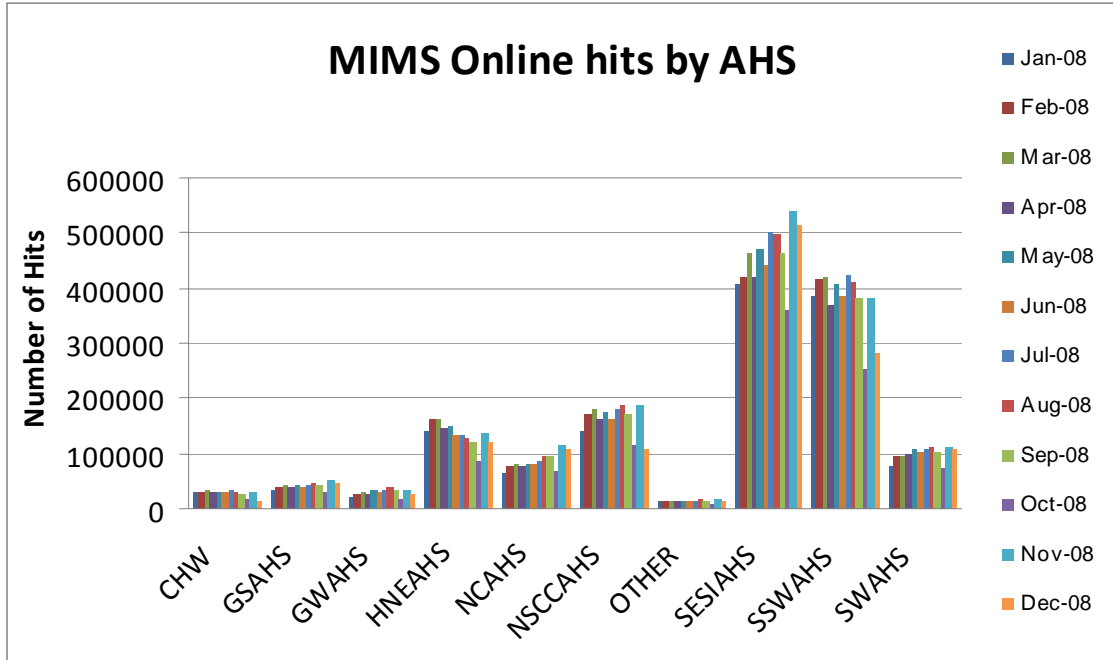


## Total usage by FTE by Area Health Service for selected resources

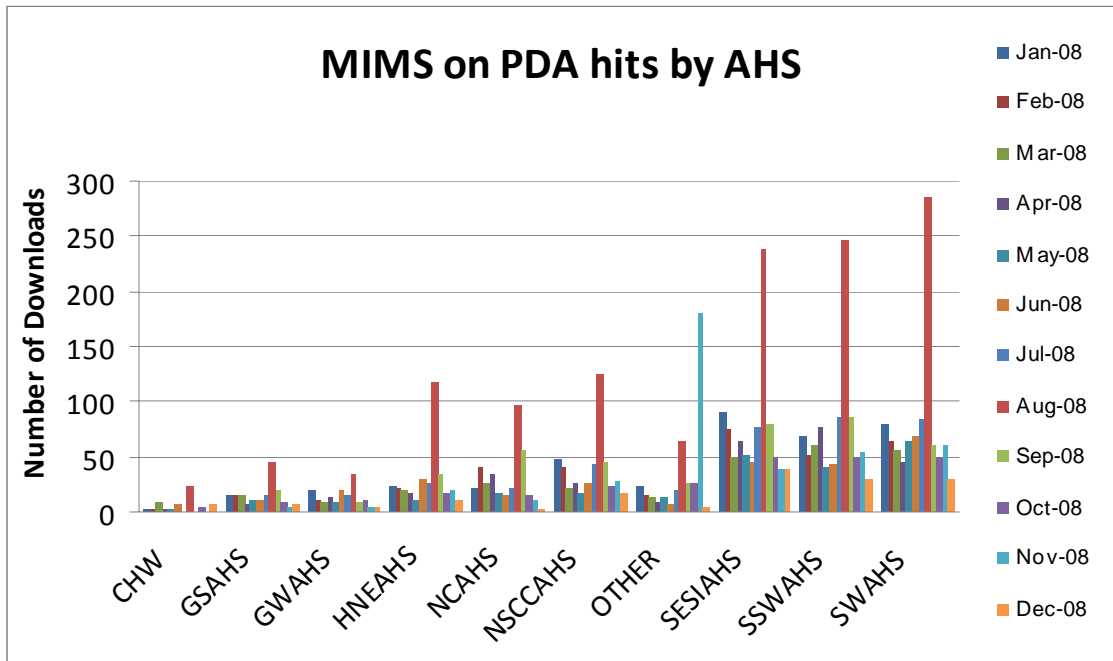


## Resource usage by AHS for selected resources (Jan-Dec 2008)

### MIMS

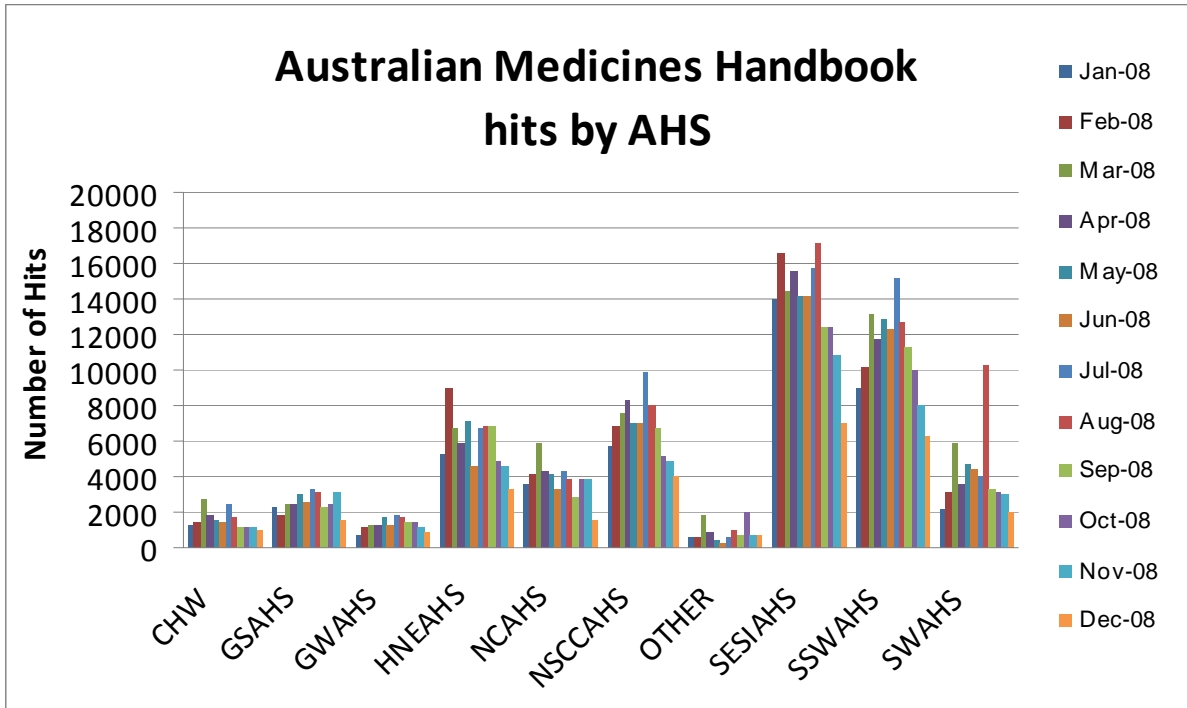


### MIMS on PDA

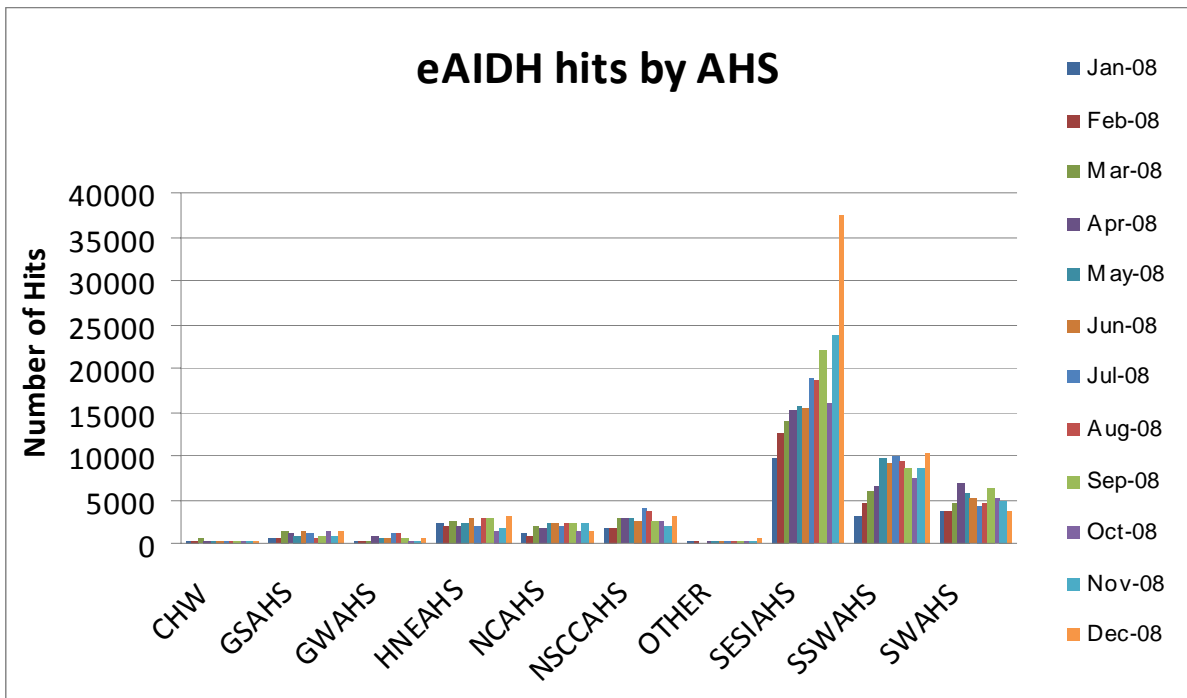


Note: August figures correlate with the annual subscription renewals.

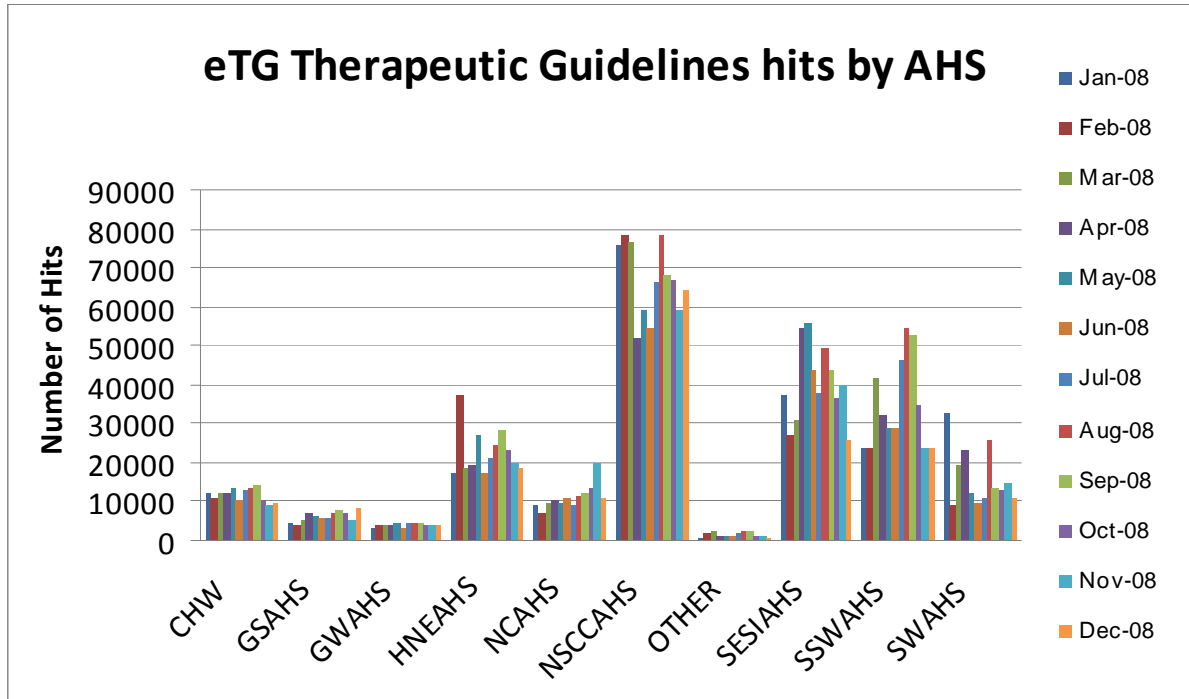
Australian Medicines Handbook



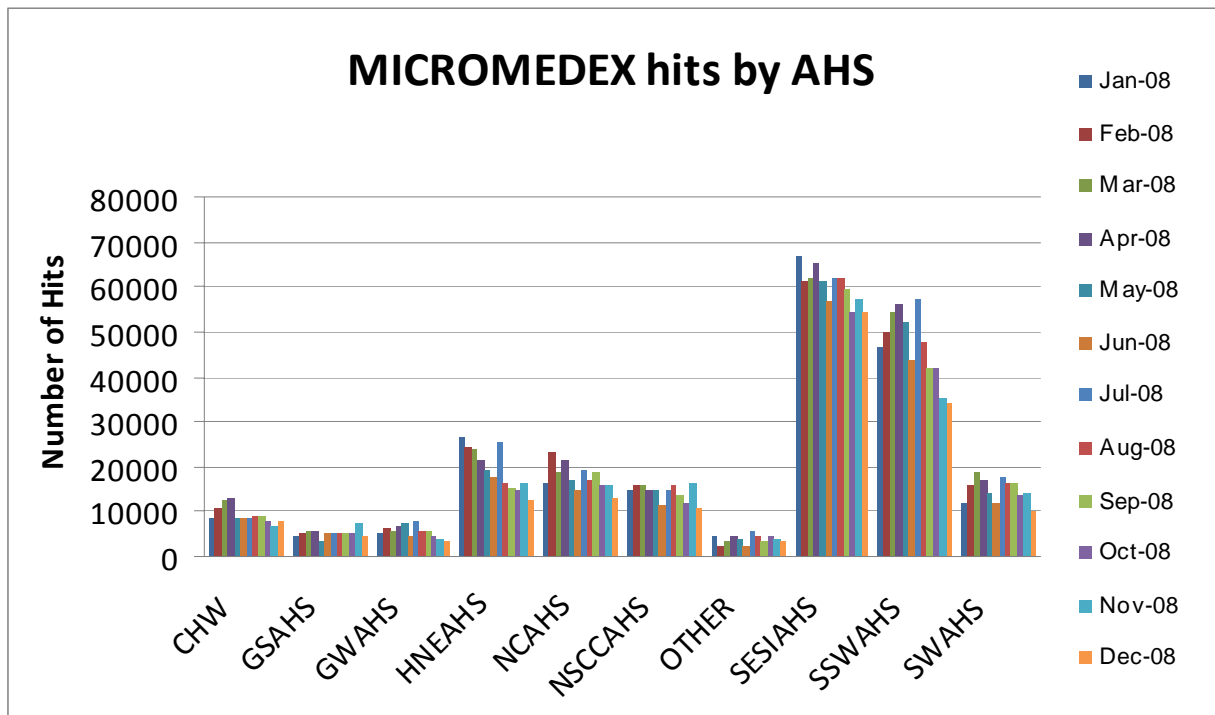
eAIDH



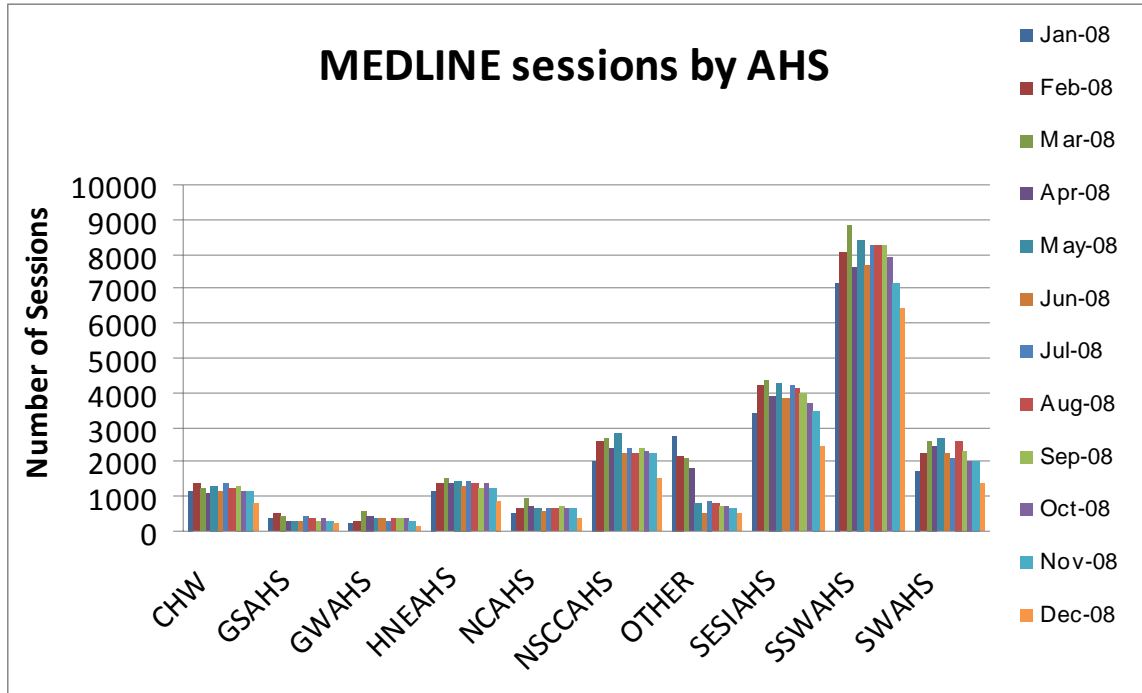
## eTG Therapeutic Guidelines



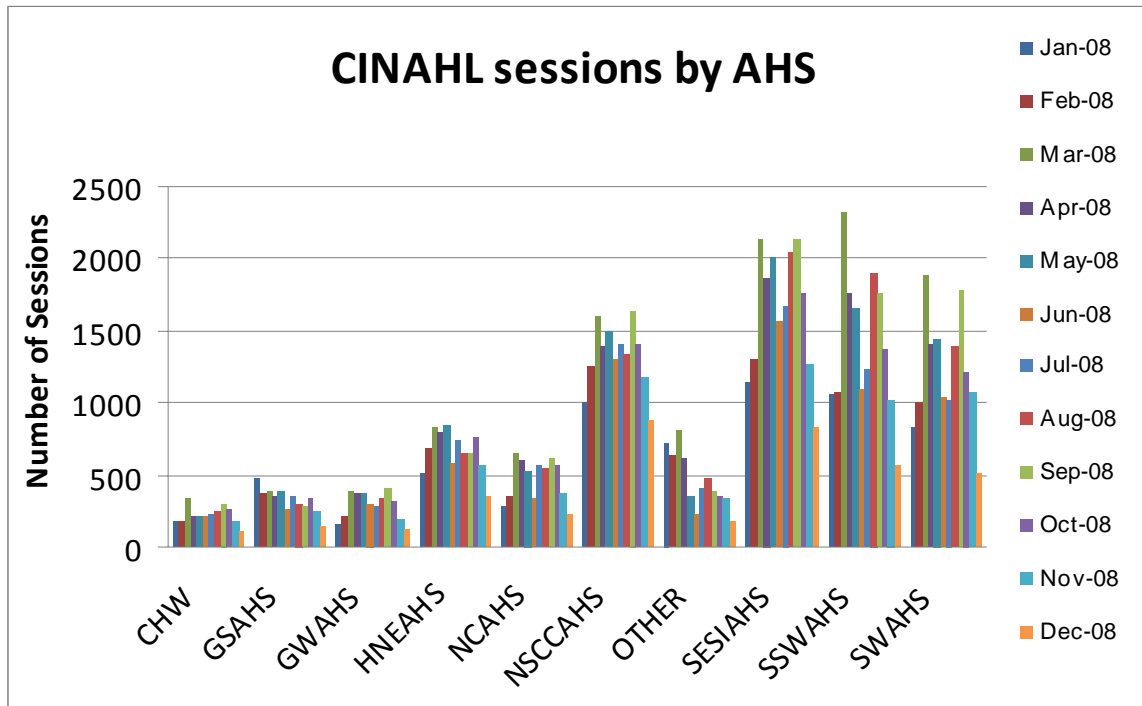
## MICROMEDEX



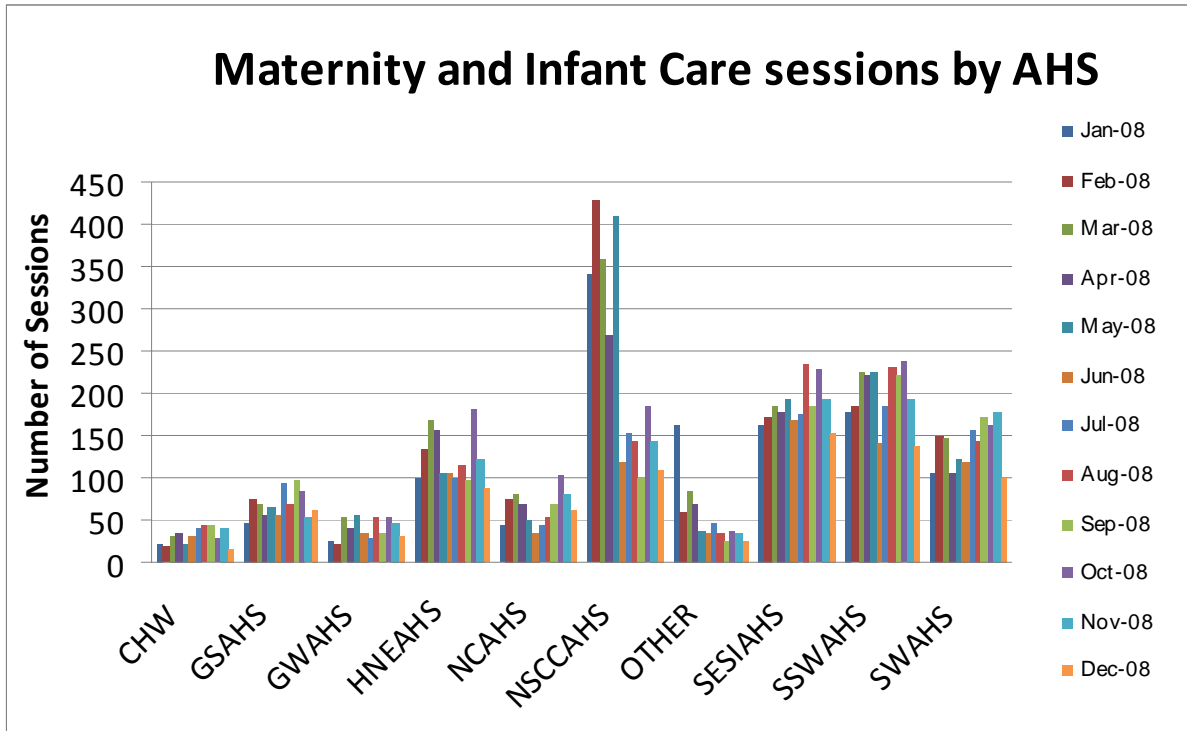
Ovid MEDLINE



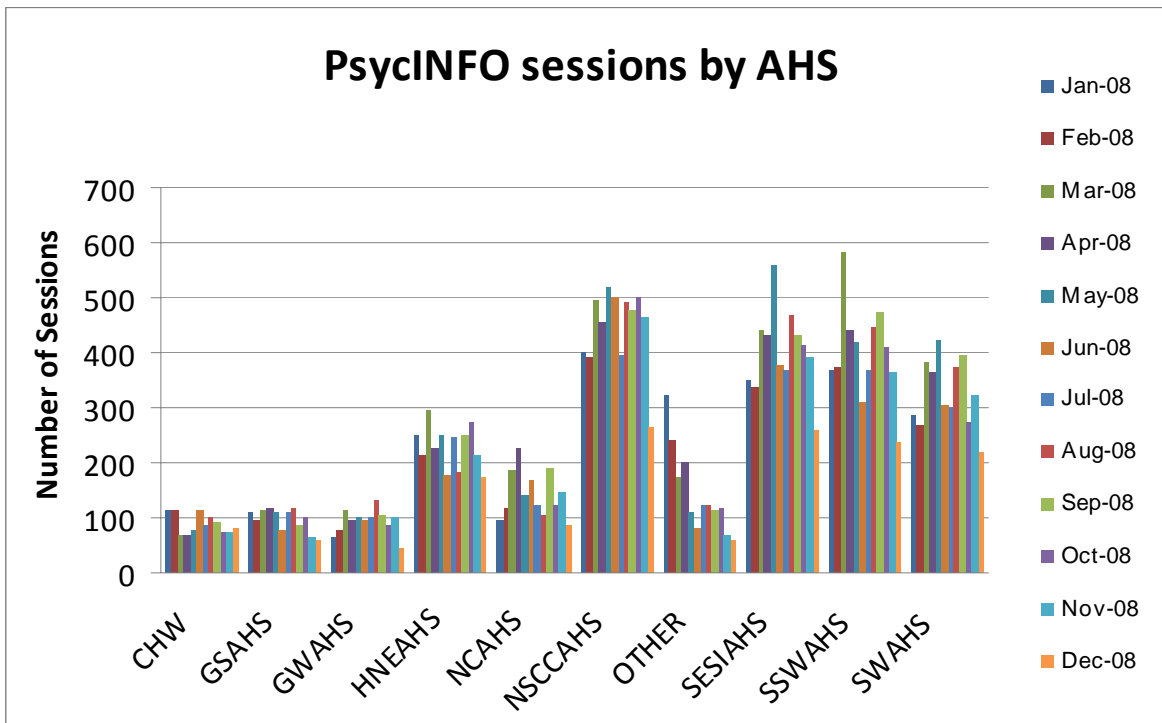
Ovid CINAHL



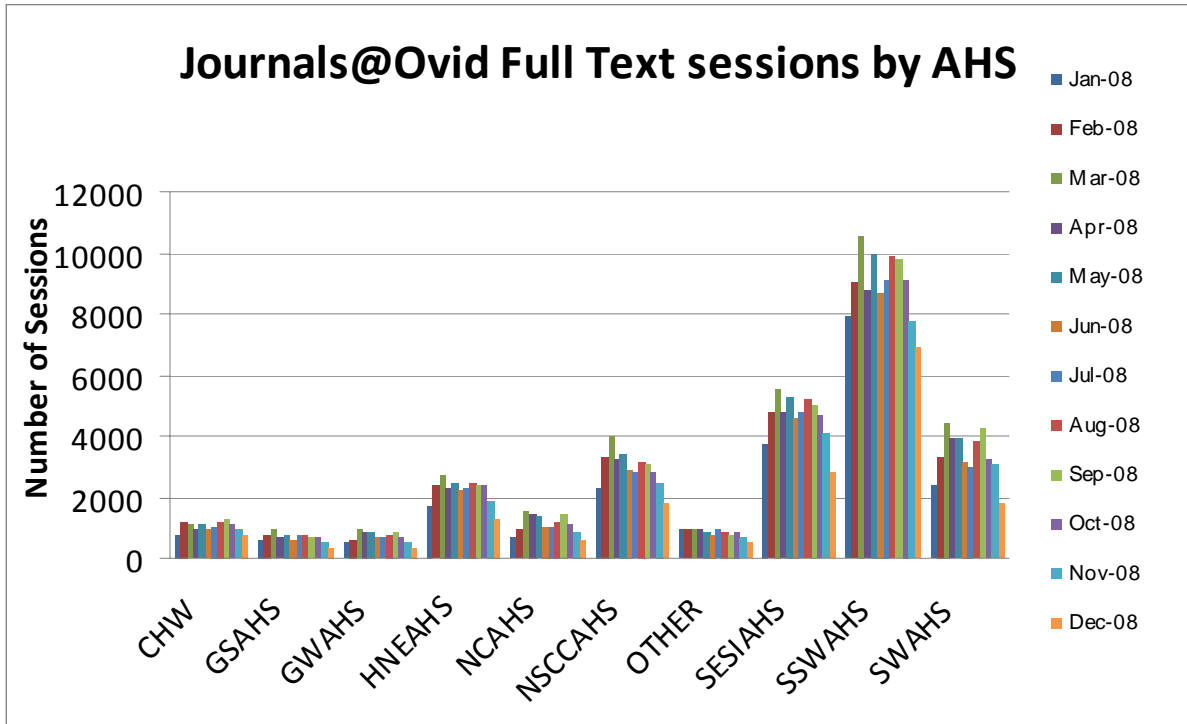
## Maternity and Infant Care



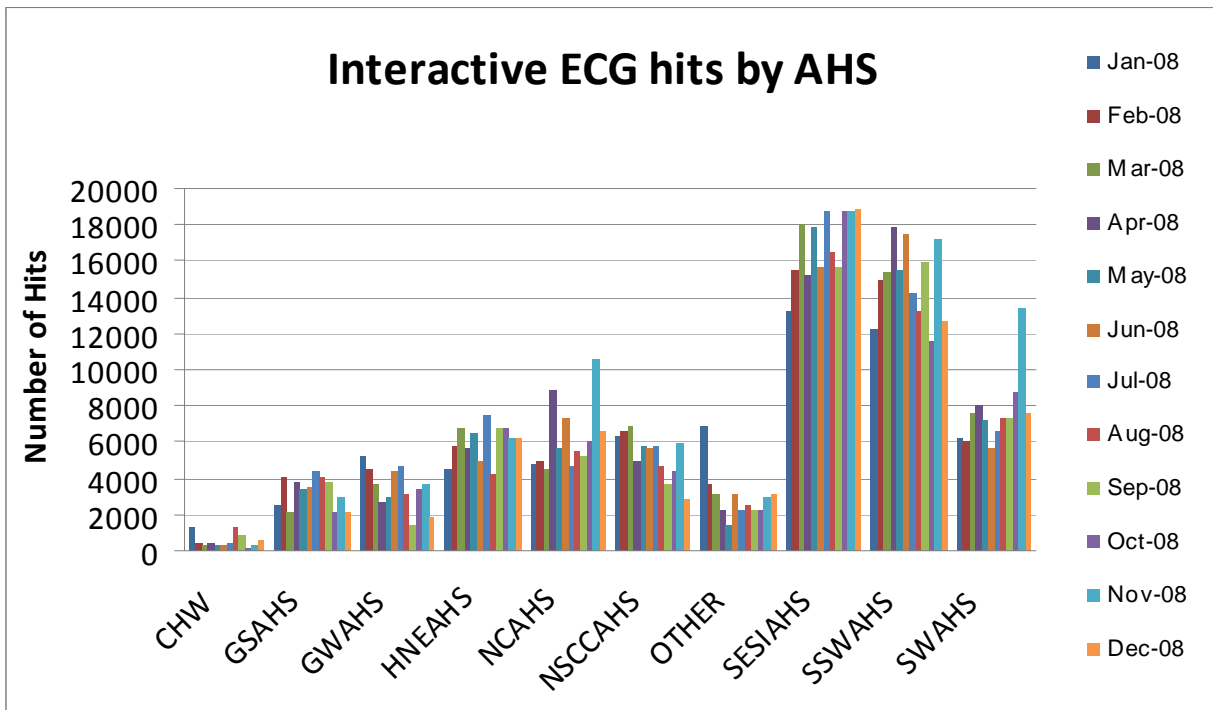
## PsycINFO



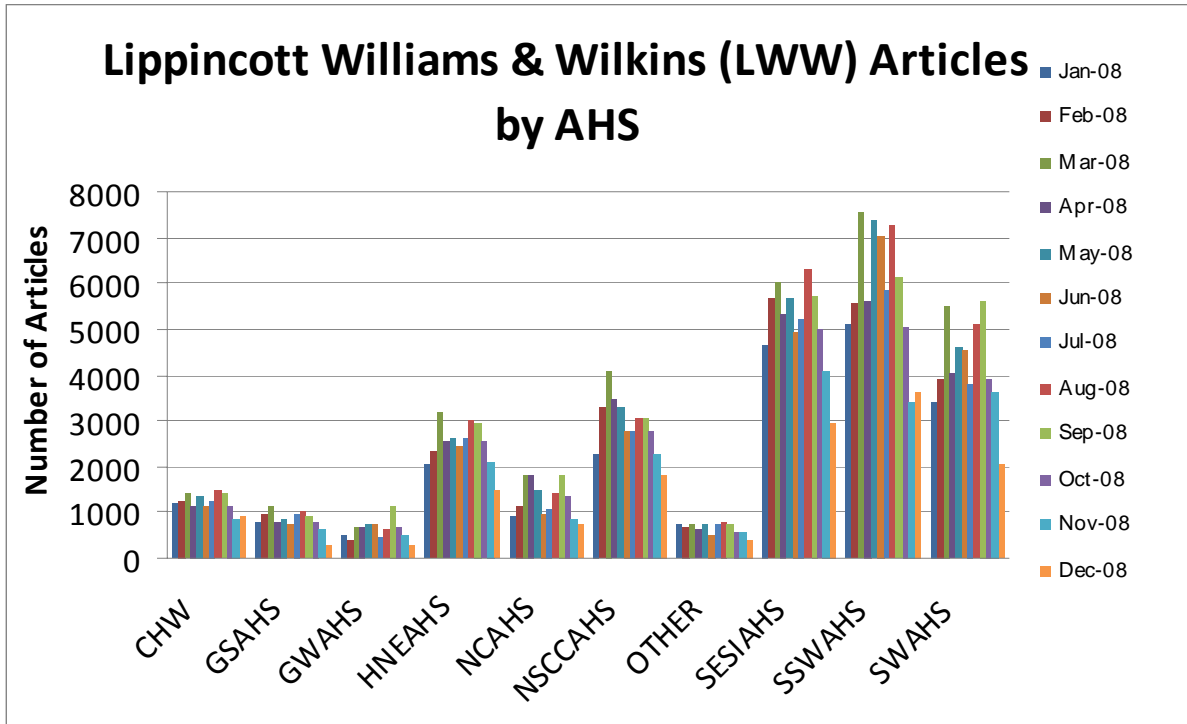
## Journals@Ovid Full Text



## Interactive ECG



**Lippincott Williams & Wilkins**



**Blackwell Publishing**

