

Divisions...

Congratulations to the Victorian winners of the ADGP Divisions Achievement Awards

Every year, ADGP (Australian Divisions of General Practice) accepts nominations, either self-nominated or nominated by an external organisation, for the Divisions Achievement Awards which are presented at the Divisions of General Practice Network Forum. The aim of the awards is to “recognise divisions for their achievements in everyday divisional activities. They are an opportunity to celebrate excellence and innovation and encourage on-going improvements in divisions in their delivery of primary care services.” The nominations are judged by the Forum Steering Committee against selection criteria which requires various evidence and testimonials depending upon the category. For 2005, the categories for the Divisions Achievements Awards awarded for recent activity (undertaken within the past two years) were:

- Improving division Performance
- Supporting Quality in General Practice
- Improving Access to Primary Health Care
- Promoting Prevention and Early Intervention
- Aboriginal and Torres Strait Islander Health

Special Award Categories: Best Division Website; Best Division Newsletter

This year, Victorian divisions won two of the five categories and earned an honourable mention in one category. GPDV would like to extend its congratulations to them and thank them for showcasing Victoria as a leader within the Divisions Network. The awards were presented by The Hon. Julia Gillard MP and outgoing ADGP Chair, Dr Rob Walters, during the opening plenary session of the Divisions of General Practice Network Forum in Perth on Friday 4 November.

Category 1: Improving Access to Primary Health Care	Category 4: Improving Division Performance
Winner: Westgate Division of General Practice	Winner: Eastern Region Divisions Network (Melbourne),
Honourable Mention: Melbourne Division of General Practice	<i>comprising of: Eastern Ranges GP Association, Inner Eastern Melbourne Division, Knox Division and Whitehorse Division.</i>

For full details of the winners, please go to the ADGP website:

www.adgp.com.au/site/index.cfm?PageMode=indiv&module=NEWS&page_id=5792&filter=i

Melbourne Division COACH Program

COACH is a telephone based training program for patients with coronary heart disease or diabetes.

The aim of the program is to enable patients to drive the process of achieving and maintaining the National Heart Foundation of Australia (NHFA) coronary risk factor targets whilst working in partnership with their GP. Since patient recruitment began in January 2004 over 330 patients have been enrolled.

To ensure The COACH Program is providing optimal service to both patients and GPs involved in the program three key areas of the program have been evaluated:

- Number of patients achieving the NHFA coronary risk factor targets after six months of coaching.
- Patient's satisfaction with The COACH Program.
- GP satisfaction with The COACH Program.

CONTACT: Lyndsay Burton at Melbourne Division: lyndsay.burton@mdgp.com.au

Westgate Division Adolescent Health Program

Children and young people have specific health issues. Young people in particular establish patterns of behaviour and make significant life decisions during their adolescence that can have immediate health affects (e.g. illicit drug use, or 'unsafe' sex practice) or long term affects (eg tobacco use). They also face psychosocial challenges. The Westgate Division attempts to redress these issues and others through the many aspects of its adolescent health program:

- Youth Health Info Passport
- Website
- Posters
- Priority Youth Group
- Docs In Schools Project And Health Access Workshops
- “Managing the Mix” schools component
- School Health Days
- Drug & Alcohol Project
- Health for Kids Network

CONTACT: Corinne Siebel at Westgate Division: corinne.siebel@westgategp.com

Eastern Region *Managing the Mix—Alcohol and Mental Health Co-morbidity Project*

The project, a GP education and support initiative, aims to assist GPs to deal with patients presenting with co-existing mental health problems and unsafe use of alcohol. It is a collaboration of four Eastern Region Divisions — Inner Eastern Melbourne, Knox, Whitehorse and Eastern Ranges.

The project is led by four GP mentors, one from each division, and rolls out a series of GP education activities across the region, delivered by the GP mentors. Over 80 GPs have participated in CPD events and by the conclusion of the project in April 2006, it is expected that as much as ten percent of the Easter Region GP workforce will have had access to upskilling in the area of alcohol and mental health through this project.

The next step for the project is to launch a co-ordinated and revised resource list for alcohol, drug and mental health services available for GPs across the Eastern Region.

CONTACT: Lisa Paulin at Eastern Ranges Association: lisa.paulin@ergpa.com.au

GPDV Privacy Statement

GPDV is committed to a Privacy Policy which outlines existing legal and ethical obligations consistent with current State and Federal Privacy legislation and addresses the National Privacy Principles determined by the Privacy Commissioner.

The policy sets out how GPDV collects, uses, keeps secure and discloses information. It also acknowledges that individuals have the right to know what information is held about them, and to correct that information should that be necessary.

Further details are available on the GPDV website: www.gpdv.com.au

If you do not wish to continue receiving this newsletter please contact Linda McKenzie on 9341 5200 or l.mckenzie@gpdv.com.au



NEWS

Summer 2005



GPDV is a QIC
accredited organisation

Mission Statement

As the peak body for divisions of general practice in Victoria, GPDV supports divisions in their endeavours to ensure a skilled, viable and effective general practice workforce, to improve the health and well-being of the people of Victoria.

Merry Christmas and Happy New Year

On behalf of the board and staff of GPDV I wish all Victorian divisions, their members and staff, and all readers of this newsletter a very Merry Christmas.

2005 has been a year that has seemed busier than any so far for GPDV and Victorian divisions as we have coped with the implementation of the Review Implementation Committee (RIC) changes while maintaining our usual programs at the level our members expect. I would like to thank all Victorian divisions for their support during the year and for the co-operative spirit in which the network continues to operate in Victoria. The strong linkages at the state level that characterize the Divisions Program in Victoria have continued to strengthen, and we look forward to building on this in the future.

For the present I hope that we can all enjoy a summer break and return refreshed and ready for another successful year in 2006.

With best wishes, John Meaney, GPDV Chair



From The CEO

As the year ends GPDV, like most of us, is turning its mind to the issues that are likely to have priority in 2006.

A major priority will be to follow up the Australian Divisions of General Practice (ADGP) *Primary Health Care Position Statement*. This paper, launched in November, sets out the proposed role of general practice and divisions in the primary health care system. GPDV will invite comment on the paper and will consult widely to promote the development of a health system that recognises the key role of primary health care.

The paper, with the Australian Primary Health Care Research Institute (APHCRI) paper *Scoping the evidence* that provides a base for discussion and debate and the development of further evidence, may be found on ADGP's website at <http://www.adgp.com.au/>

At the program level we will be working hard in January and February on our plans for the Practice Nursing Program, whose recent extension until June 2008 was very good news with which to end the year. The continuation of this program over three financial years will enable GPDV and divisions to build on the work of the last six months, but without the hectic bustle.

The threat of avian flu and the lack of clarity about the GP role in other emergencies have led DHS to involve GPDV and divisions in the development of strategies for divisions to respond effectively to emergency situations and public health alerts. This work will lead to the full involvement of divisions and other primary care agencies in the plans already established for other components of the health sector.

The provision by the Commonwealth of a small amount of funding to support the further development of information management (IM) in general practice has again focussed attention on the need to ensure that the current major developments in IM at the State and Commonwealth level are compatible and continue to enable general practice to participate in state systems.

- Bill Newton

GPDV Board Members

Dr John Meaney, Chair

Dr Rob Grenfell, Deputy Chair

Dr David Tillett, Treasurer

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Access to State-wide GP Database

To consolidate the number of databases being maintained in Victoria the Department of Human Services (DHS) is no longer funding GPDV to maintain the GP database known as the General Practitioner Register (GPR). Instead the source of up-to-date GP information for health services and the public will be the Human Services Directory (HSD).

To ensure the GP data on the HSD is as comprehensive and accurate as possible GPDV contacted all 4,630 GPs on the GPR to ask if they wanted their details transferred to the HSD. GPs could choose which contact details they wanted available to the public (**Public Access**) and which only to approved subscribers such as hospitals (**Approved Subscribers**). The GP approved data was transferred to the contractors for the HSD on 12 October and is now incorporated into the HSD.

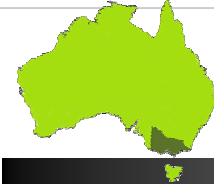
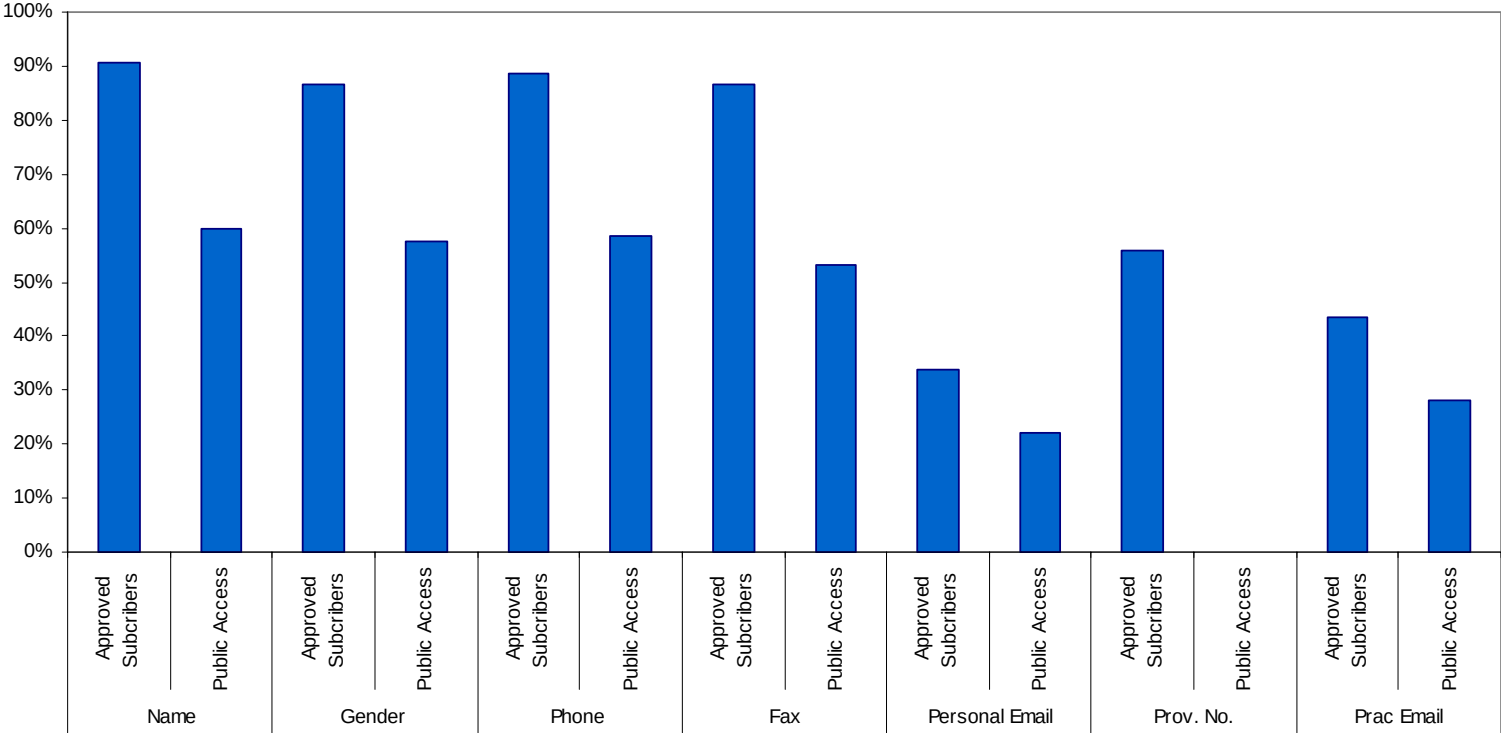
53% of GPs agreed that most of their data be transferred to the HSD for public access
A further 7% of GPs agreed that some of their data be transferred to the HSD for public access.
74% of GPs agreed that their full data be transferred to the HSD for approved subscriber access.
A further 16% of GPs agreed that some of their data be transferred to the HSD for approved subscriber access
10% of GPs asked that there be no transfer of their data to the HSD

Approved subscriber status has been given to all health services that were previously approved by GPDV board for access to the GPR. These health services have been sent a letter by the HSD contractors (DCA) and can now be issued with a login code to enable them to access data that has been marked by GPs as for approved subscribers only. Mostly this higher level data contains provider numbers and some personal email addresses, and some GPs who do not want any public access to their data. The approved subscriber status also allows the downloading of GP and/or practice data in the same file formats as the GPR. If other agencies wish to become approved subscribers they will need to get GPDV approval. Contact Lenora Lippmann: l.lippmann@gpdv.com.au or phone 9341 5200.

The HSD now has a total of about 6,000 GP entries on the database because of duplications arising from the process of combining existing HSD data with GPR data. These duplications are being progressively cleaned up. It would be very helpful if anyone using the HSD could use the feedback form if they come across duplications or errors in the GP data. Go to <http://humanservicesdirectory.vic.gov.au/Search.aspx> and then go to the **feedback** tab on the menu to the left.

To keep the HSD up to date the contractors (DCA) will contact all providers on the directory every six months - first by email, then by mail, then by phone. As this will only update data for GPs who are already on the HSD it will be essential for divisions, health services, and individuals to notify the HSD of new GPs who are not currently listed if the database is to remain as comprehensive and up-to-date as the GPR.

Graph: Percentage of Records Listed on the HSD



Nursing in General Practice

GPDV’s Nursing in General Practice Program supports divisions to develop the role of practice nurses at the local level. GPDV has continued to advocate strongly for the need for division support of practice nurses as critical for both addressing areas of workforce shortage and contributing to better quality of care. In 2005-06 the Department of Health and Ageing (DoHA) has provided substantial funding for the training and support of practice nurses and practice capacity building projects in divisions.

1. Training and support of practice nurses

Some examples of the 2005-06 Victorian Practice Nurse Education and Training include:

Diabetes management for practice nurses

The majority of care for people with diabetes occurs in general practice. Good diabetes management requires good systems at all levels of the general practice and are essential to ensure good care is given to all patients with diabetes.

How practice nurses can add value to and complement your practice

Evidence shows that nurses play a key role in the practice team and that over 40% of practices now employ practice nurses. This workshop is designed to inform GPs and practice managers of how practice nurses add value to their practice.

Team capability in general practice

This one-day workshop is designed specifically for medical practice staff to find practical ways to use the skills demonstrated by high-functioning teams. Specifically, learning when and how to use two essential communication tools: *The “Present to Desired State” model of creating team outcomes; Giving performance feedback to colleagues and negotiating inevitable differences of opinion in a way that keeps people ‘on side’.*

2. Practice capacity building projects in divisions

At the annual Divisions of General Practice Network Forum held in Perth on 3-6 November 2005, the GPDV stand promoted the role and value of practice nurses through an information brochure and an updated version of the Better Capacity, Better Care poster. Our poster can be downloaded from this web address: http://www.gpdv.com.au/gpdv/documents/CDMitemSupport_BCBC_poster.pdf

Victorian divisions of general practice are well in the midst of partaking in access to a number of training and educational activities around the state with completion set for mid-March 2006. Early indications appear to be quite exciting as current feedback on the activities has been positive.

Victorian Uptake of the Practice Nurse Subsidy

PIP Quarter	PN Subsidy			
	Total No. of PIP practices	No. of PIP practices eligible for practice nurses	No. of PIP practices participating in practice nurses incentive	% of eligible practices participating in practice nurses incentive
Feb 05	1,136	690	390	57%
May 05	1,218	693	332	48%
Aug 05	1,222	698	399	57%

Continuation of funding announced

The Department of Health and Ageing has recently written to the state-based organisations (SBOs) to inform them of the continuation of the Divisions of General Practice Nursing in General Practice Project to June 2008. The project will continue in a similar manner with the execution of this plan being subject to the Department obtaining satisfactory plans from SBOs and ADGP due on 20 January 2006.