Primary Care Programs Update

Issue 5
May 2003

Please send your contributions for the next Update to d.capovilla@gpdv.com.au.

What's New on GPDV's Website?

CDM Network & PCP Workshop

Registrations for this workshop close on Wednesday 28th May at 5pm. The aim of this workshop is to bring together the program workers in divisions and PCPs to explore the opportunities to develop linkages around the Chronic Disease Management Initiatives. There will be three concurrent sessions in the afternoon focusing on Aboriginal Health, Physical Activity & chronic disease self management in primary care.

When?

Wednesday 4th June 2003
9:30am – 4:00pm
Registrations commence at 9:00am

Where?

Melbourne Events & Banquet Centre
Lower Ground Floor
488 Swanston Street
Carlton 3053

The objectives of the workshop are:

- Demonstrate key success factors for general practice & other service providers working together in chronic disease management.
- Explore current and future opportunities for Divisions & PCPs to collaborate in supporting better chronic disease management within existing resources

Asthma

Rosemary Fenech: R.Fenech@gpdv.com.au

Satellite Broadcast - 3+ Visit Plan

The National Asthma Council's next program, Asthma 3+ Visit Plan, will screen live on the Rural Health Education Foundation satellite network on the evening of Tuesday 24 June 2003.

The Asthma 3+ Visit Plan, a best practice model of managing asthma, was originally developed by the National Asthma Council's General Practitioners' Asthma Group to assist GPs with planned asthma education and management within the normal consultation setting.

The Asthma 3+ Visit Plan involves at least three visits to the GP over a short period of four months for the sole purpose of improving the management of asthma. At least two of these visits to the GP should be planned in advance.

The visits incorporate - diagnosis and assessment (including appropriate spirometry tests) development of a written asthma management plan, and patient education and review of asthma management plan. The Asthma 3+ Visit Plan encourages partnerships in proactive asthma care between the patient and their health professionals.

For information on your nearest viewing venue in the Rural Health Satellite Network, contact the RHEF on Ph: 1800 646 015 or Fax: 1800 555 501.

Diabetes

Belinda Caldwell: B.Caldwell@gpdv.com.au

Clarification of minimum threshold from DOHA

The objective of the **outcomes payment** is not just to reward practices for providing an annual cycle of care but also detecting patients with diabetes as well. The expected prevalence in the Australian population is in the order of 7% of all patients aged 25 years or over. For the purposes of the PIP diabetes outcomes payment, the 2% threshold is to ensure that practices are at least screening or identifying a minimum number of patients with diabetes.

This will be calculated by dividing the total number of patients with diagnosed diabetes (as measured by the number of HbA1c MBS items) with the total Practice population. If this ratio is equal to or greater than 2% then the Practice meets the threshold requirements.

For example, if there are 25 diagnosed patients with diabetes and 1000 patients in the practice, then 25 divided by 1000 equals 0.025. This equates to 2.5% therefore the practice exceeds the minimum threshold of 2%. If they have provided care to at least 20% of these patients, they would be eligible for the outcomes payment.

The HbA1c test (otherwise known as glycosylated haemoglobin) is the best available indicator of diagnosed diabetes.

USEFUL READING

ABC of diabetes: Retinopathy

Peter J Watkins
BMJ 2003;326 924-926
http://bmj.com/cgi/content/full/326/7395/924?etoc

ABC of diabetes: The diabetic foot

Peter J Watkins
BMJ 2003;326 977-979
http://bmj.com/cgi/content/full/326/7396/977?etoc

Enhanced Primary Care

Lenora Lippmann: L.Lippmann@gpdv.com.au

UPTAKE OF EPC DISCHARGE ITEMS

- From 2001/2002 to 2002/2003 there has been an increase in claims for discharge care-plans and cases conferences items in Victoria, while Australia wide there has been a decrease in these claims.
- In Victoria there has been a consistently higher rate of claims per capita of population for the discharge items than Australia as a whole.
- Relative to Australia as a whole Victoria is strongest in GPs contributing to a discharge care-plan, and GPs organising a discharge case conference (private patient only).
- The number of claims in Victoria for GPs contributing to a discharge care-plan, and GPs preparing a discharge care-plan (private patient only) is increasing. This is contrary to national trends.
- The number of claims by GPs for involvement in discharge planning is low relative to community care planning and case conferences.

Table 1: No. of discharge careplanning and case conference MBS items claimed per month in Victoria and Australia, July 2001-February 2003

Time period	722 Prepare Discharge Careplan (Private)	728 Contribute or review Discharge Careplan	746, 749, 757 Organise Discharge Case Conference (Private)	768, 771, 773 Participate in Discharge Case Conference
Australia July01- June 02	110	83	43	24
Victoria July01- June 02	27	38	21	6
% of items claimed in Vic. 01-02	24%	46%	48%	24%
Australia July 02- Feb 03	83	81	38	22
Victoria July 02- Feb 03	40	42	20	5
% of items claimed in Vic. 02-Feb 03	32%	51%	52%	23%

Source: http://www.hic.gov.au/providers/health_statistics/statistical_reporting/medicare.htm

Table 2: No. of claims per month for all care planning and case conference items, Victoria and Australia, 2001/2002 compared to 2002-Feb 2003.

Time period	No. of claims per month for all discharge care-planning & case conference items	No. claims per month for all community care-planning & case conference items
Australia 01 – 02	260	22,541
Australia 02 - Feb 03	224	19,131
Variance	**-15%**	**-14%**
Victoria 01 –02	91.5	5,010
Victoria 02 -Feb 03	107	3,634
Variance	**+17%**	**-27%**

Better Capacity, Better Care kit

Rosemary Fenech: R.Fenech@gpdv.com.au

Where is it up to?

Formally known as the Enhancing Practice Systems Kit, Better Capacity, Better Care is - a resource kit for assisting general practice to achieve quality outcomes for chronic disease management. We are working hard with graphic designers to get the kit ready for printing. Thank you to divisions who provided photographs of real life general practice. We have chosen the photos that best fit and Diana will be contacting divisions so that consent can be gained.

Home Medicines Review

Peter Larter: P.Larter@gpdv.com.au

Reminder: Correct GP-Pharmacist Referral

When visiting GPs, please remember to clearly explain that the HMR referral from the GP must be to the patients' preferred community pharmacy. This is different to most other referral processes in general practice, where it is the GP who identifies an appropriate health professional to refer to.

I've heard of reports (from other states) of GPs directing referrals to particular pharmacies without asking the patient to nominate their preferred pharmacy in the first place.

Templates Update

The new Medical Director template seems to be widely appreciated by GPs as a "time saver", and by pharmacists who receive all necessary clinical information in one hit without having to chase up for more later. The latest version is 2003-02, which is from March. Let me know if you need another copy or if you'd like training on how to use Medical Director or how to load these templates on GP desktops. (This shouldn't be a problem for divisions with dedicated IM/IT officers on premises).

There will probably be another version in July or so that will build in the GP prescriber number for pharmacists, if possible. If anyone has other ideas on how to improve the referral template, please let me know.

Of course, not all practices use Medical Director. Around 20% of practices in Victoria use another program called Medical Spectrum (Head Office in Brisbane), and a further 10% use other programs such as MedTech32, Genie, Locum, and Intrahealth Profile.

A couple of weeks ago, GPDV met with Victoria's Medical Spectrum consultant with the goal of developing new HMR templates for their program – hopefully to be disseminated in June. It's tricky because there are both old and new versions of their program which are almost entirely different! We've also met with Intrahealth to brief them on what good templates should look like, and about how to build in a search for patients that would be eligible for an HMR.

Immunisation

Belinda Caldwell: B.Caldwell@gpdv.com.au

Belinda is away on family leave this week.

Mental Health

Anne Diamond: A.Diamond@gpdv.com.au

ADGP NEWS

Allied Health

Following discussion by DLOs regarding feedback to divisions about the Second Round of Allied Health submissions, ADGP has emphasised to the Department that the process of shortlisting divisions be as clear as possible. A request has also been made that divisions "held over" until 2004-05 should not be required to complete additional paperwork. It has further been suggested that a set of brief guidelines and a model submission be provided to DLOs to assist divisions in preparing their Allied Health submissions.

Next Submission round for Allied Health projects

DOHA hope to announce a final decision by the end of the first week in June.

Familiarisation Training Resources

The development of the new Familiarisation Training resources proceeds apace. The new GP manuals and training CDs are anticipated to be released in early July. The E-learning CD will be replaced by a Power Point presentation and associated work book, available from the ADGP website.

PMHC Symposium

The Primary Mental Health Care Symposium was held on 7 May in Canberra, and featured guest presentations from Sir Professor David Goldberg and Professor Andre Tylee, Institute of Psychiatry, London, on recent research surveying Western and developing countries' management of primary mental health issues. A national picture of the implementation and uptake of the Better Outcomes and NPMHC initiatives were presented by DLOs. Plenary discussion focussed on the priority areas for continuing work under Better Outcomes. Feedback on the day has been excellent and a Summary of Proceedings will be published on the ADGP and PARC websites soon.

DoHA NEWS

Emergency Psychiatry Support

The tender panel met on 8 May to consider proposals. Drs David Monash (Gippsland) and Grant Blashki (NSW), one psychiatrist, consumer representative, and Departmental staff are on the selection panel. Further details should follow in due course.

Mental Health Stats

The first round of Mental Health SIP figures for GP uptake, by division, were included in the February Chronic Disease Management uptake rates. This period covers November 2002-February 2003. You will notice that the percentage of eligible providers receiving SIPS

(17%) of the number of eligible providers (771) is relatively strong, and that these GPs will be generating a number of SIPS per practice. Some divisions have noted errors in the number of GPs eligible for SIP payments, usually a lower number of GPs than the division would have records for, and delays in processing will help explain these discrepancies.

OTHER NEWS

POSTNATAL DEPRESSION GUIDELINES

Guidelines entitled "Antenatal and Postnatal Depression. A Guide to Management" have been published by the PostNatal Depression Project. A comprehensive guide to interested GPs or those participating in the PND program, the guidelines are laminated, A4 and doublesided and have been endorsed by the GPDV Board. They are available from Anne Diamond at GPDV or from Justin Bilszta, National Project Officer, National Postnatal Depression Program, on 03 9496 4223 and email: Justin.Bilszta@armc.org.au

MENTAL HEALTH WEEK, 5-11 OCTOBER, 2003

Mental Health Week is a national week of major mental health promotion. This week is coordinated in Victoria by the Mental Health Foundation of Australia (Victoria) - MHFA(V), a non-government organisation. The aim of Mental Health Week is to promote mental health throughout the entire community, to prevent mental ill health and to remove the stigma associated with mental illness. World Mental Health Day is 10 October.

The MHFA(V) would like to invite the involvement of GPs in the promotion of mental health through purchasing a display and information package consisting of Mental Health Week posters and brochures for $15. The brochures are planned to include: What is Mental Health?, What is Mental Illness?: Dealing with Negative Emotions; Depression: Causes and Treatment'; The Anxiety Disorders: Causes and Treatment; and Dealing with Borderline Personality Disorder. Other free brochures will include the program for the Mood Disorders Support Group, a program of the Mental Health Foundation, and information about the Foundation itself.

Further information about the poster package may be obtained from: Lyn Chaplin, Executive Officer, Mental Health Foundation of Australia (Victoria) Ph. 03 9427 0406 and email: mhfvic@pacific.net.au and website: www.mentalhealthvic.org.au

UPLIFT STUDY – LINKING THE HEALTH AND LEISURE SECTORS: USING PHYSICAL ACTIVITY IN THE MANAGEMENT OF DEPRESSED OLDER PEOPLE

Depression is a common and disabling problem for many older people and research study is trying to improve the treatment of depression using exercise. The study has been funded by the Victorian Centre of Excellence in Depression and Related Disorders.

- This study will test how helpful strength training, that is, exercising with weights, is in helping patients' depression to improve.
- Strength training programs that are suitable for older people are available across Victoria. They have been approved by the Council on the Ageing as part of their 'Living Longer, Living Stronger' initiative.
- To participate, depressed older people (65 years and above) will be asked to:

a) Fill in a confidential survey, mainly to help us understand their depression and whether it will be safe for them to exercise,
b) Be visited at home at a convenient time by a trained researcher. The researcher will help the older person to complete a survey to tell us about current health status. The researcher will then advise the older person about exercising.
c) For those participating in the strength training program, the researcher will help them to make the necessary arrangements to attend a local program for ten weeks. The older person would receive vouchers towards the cost of the strength training program.
d) Provide information by post on two further occasions. The research team will use the information to assess the older persons' health over time. That will help the researchers to see whether the exercise program has been helpful or not.

The information obtained from this study will be treated as confidential and only seen by the research team, as per the requirements of the University's ethics committee.

This research is being conducted by Dr Jane Sims, Senior Lecturer in Primary Care at the Department of General Practice, University of Melbourne and her co-investigators Dr Jane Gunn and Dr Nancy Huang (GPs), Dr Keith Hill (Physiotherapist) and Ms Sandra Davidson (Counselling Psychologist).

If you would like to learn more about the study or how you could take part, please do not hesitate to contact Dr Sims on 03 8344 4547.

PRIMARY CARE MENTAL HEALTH TRAINING PROJECT (MAP PROJECT) & PRACTICE NURSES

The Department of Psychiatry at the University of Melbourne has received funding from 'beyondblue: the national depression initiative' to develop and deliver a training program in mental health to the non-medical primary care workforce throughout Victoria. The project is to be implemented over 3 years from 2003 to 2005 and is being managed by the Bell Street Academic Centre for Community Mental Health. The training will be delivered through Primary Care Partnerships (PCPs) in close collaboration with Primary Mental Health and Early Intervention Teams.

Training will be offered to non-medical primary care staff across PCPs whose work brings them into regular and frequent contact with people experiencing, or at risk of, depression and other related mental health problems. The training will enhance awareness of depression and related disorders; improve attitudes towards the importance of effective treatment, early intervention, prevention and mental health promotion programs; and develop skills in the identification and engagement of individuals and groups who could benefit from intervention.

Practice nurses have been identified as a target group for this training. GPDV will have input into how practice nurses could best be upskilled to help improve mental health outcomes. GPDV would really appreciate input/views from divisions – please contact GPDV's Project Officer Peter Larter at p.larter@gpdv.com.au

Primary Care Partnerships

Sonya Tremellen: S.Tremellen@gpdv.com.au

CDM Network & PCP Workshop

Registrations for this workshop close on Wednesday 28th May at 5pm. The aim of this workshop is to bring together the program workers in divisions and PCPs to explore the opportunities to develop linkages around the Chronic Disease Management Initiatives. There will be three concurrent sessions in the afternoon focusing on Aboriginal Health, Physical Activity & chronic disease self management in primary care.

When?

Wednesday 4th June 2003
9:30am – 4:00pm
Registrations commence at 9:00am

Where?

Melbourne Events & Banquet Centre
Lower Ground Floor
488 Swanston Street
Carlton 3053

The objectives of the workshop are:

- Demonstrate key success factors for general practice & other service providers working together in chronic disease management.
- Explore current and future opportunities for Divisions & PCPs to collaborate in supporting better chronic disease management within existing resources

Nurses in General Practice

Peter Larter: P.Larter@gpdv.com.au

Congratulations to those in divisions who are working to help enhance the practice nurse role. The profession is developing at a break-neck pace, as can be seen (for example) by the amount of educational opportunities now being promoted to practice nurses. It's encouraging that everyone's got their eyes on the 'big picture' - the ability of practice nurses to complement the GP role (particularly around best practice CDM) and foster system changes in the practice setting.

RACGP/RCNA Nursing In GP Project – Research Workshops in Wangaratta and Melbourne

As previously reported here, the RACGP in collaboration with the RCNA have initiated a project exploring the current and future roles of nursing in Australian general practice, funded by the Commonwealth Department of Health and Ageing. The project will involve a number of activities including a national survey of education providers, a national telephone survey of nurses and joint GP/Nurse workshops.

The colleges are seeking the opinions of both GPs and nurses working in general practice to participate in the surveys and workshops. Toward this aim, two workshops will be held:

1. **Melbourne - Thursday 12th June - 7pm to 9:30pm**
2. **Wangaratta - Friday 13th June - 7pm to 9:30pm.**

Participants will be provided with supper and will be offered a payment for their contribution.

This is a great opportunity for GPs and practice nurses in your division to have their say about nursing in general practice and contribute to future policy development in the area. For further information please contact Ronelle Hutchinson on 03 8699 0559 or ronelle.hutchinson@racgp.org.au or check out the website: www.racgp.org.au/nursing

REMINDER: NEXT GPEA/RCNA TRAINING EVENT FOR PRACTICE NURSES

Topic: "The seriously ill patient in general practice".
Date: Saturday 14th June
Venue: Webb Room, Charsfield Hotel, 478 St Kilda Road, Melbourne
Cost: $160 or the discounted rate for members of RCNA, RACGP or APNA is $138

The workshop facilitator will be Derek Brannigan MRCNA, Trauma Management Expert, and Emergency First Aid Trainer.

OTHER TRAINING OPPORTUNITIES FOR PRACTICE NURSES – LATE MAY & ALL JUNE

1. **BreastHealth – A Training Program for Health and Community Workers – 30 May, 9.15am to 4.45pm - $130 (repeated August and November)**
   Cancer Council Victoria – Cancer Council offices, 1 Rathdowne Street, Carlton, Melbourne.
   Contact: Cancer Council on (03) 9635 5000 or BreastHealth@cancervic.org.au.

2. **Two Day Intensive Diabetes Program for Health Professionals – 16-17 June 2003, 9.00am to 5.00pm - $370 (repeated October)**
   International Diabetes Institute – IDI, 250 Kooyong Rd, Caulfield, Melbourne.
   Contact: International Diabetes Institute – education@diabetes.com.au or phone (03) 9258 5050

3. **Skin Prick Testing in General Practice for GPs and PNs – Wednesday 18 June 2003, 7.15pm to 9.30pm - $49.50**
   Lung Health Promotion Centre - Ashley Ricketson Centre, Caulfield General Medical Practice, 260 Kooyong Rd, Melbourne.
   Contact: Lung Health Promotion Centre at the Alfred Hospital (03) 9276 2382

4. **Hepatitis C Course for health and community sector workers – 19 June 2003, 9.30am to 4.00pm - $100**
   Royal District Nursing Service – RDNS, 31 Alma Rd, St Kilda, Melbourne.
   Contact: RDNS on (03) 9536 5241

More information is available in GPDV's "Nurses In General Practice: Education and Training Diary", including options for rural divisions to access similar training opportunities. In many cases, local training in rural areas can be negotiated directly with the service provider, providing you can guarantee a minimum number of participants and are prepared to cover the costs of travel if the educator is coming from Melbourne.

C.H.A.T. Study

☎ The **C**hronic **H**eart-failure **A**ssistance by **T**elephone **(CHAT)** study ☎

Invitation to PNs: Monash university researchers are seeking PNs to collaborate in this exciting (NHMRC supported) research initiative to test an innovative and relatively inexpensive system of care- TeleWatch telemedicine designed to support GPs and their CHF patients to access optimum CHF care based on the recently published NHF, CHF Guidelines. To find out more about the project & 'added benefits' developed for participating GPs.

Please contact Julie Yallop (julie.yallop@med.monash.edu.au) (03) 9903 0046, or Bianca Chan (03) 9903 0589. Alternatively, visit the ACRRM website to find out more.

Primary Care Mental Health Training Project

The Department of Psychiatry at the University of Melbourne has received funding from 'beyondblue: the national depression initiative' to develop and deliver a training program in mental health to the non-medical primary care workforce throughout Victoria. The project is to be implemented over 3 years from 2003 to 2005 and is being managed by the Bell Street Academic Centre for Community Mental Health. The training will be delivered through Primary Care Partnerships (PCPs) in close collaboration with Primary Mental Health and Early Intervention Teams.

Training will be offered to non-medical primary care staff across PCPs whose work brings them into regular and frequent contact with people experiencing, or at risk of, depression and other related mental health problems. The training will enhance awareness of depression and related disorders; improve attitudes towards the importance of effective treatment, early intervention, prevention and mental health promotion programs; and develop skills in the identification and engagement of individuals and groups who could benefit from intervention.

Practice nurses have been identified as a target group for this training. GPDV will have input into how practice nurses could best be upskilled to help improve mental health outcomes. I would really appreciate input/views from divisions "on the ground" – please refer to my e-mail of Monday 26 May entitled "MAP Project – Request for Input" to contribute your views.

Nursing Careers, Education and Employment Expo

Date: Saturday 29 June 2003, 10am – 3pm
Venue: Royal Exhibition Building, Carlton, Melbourne
Further Info: Royal College of Nursing, Freecall: 1800 061 660

The practice nursing profession will be represented by Julie Porritt and practice nurses.

REMINDER: INAUGURAL NATIONAL PRACTICE NURSE CONFERENCE

Date: Evening of the 6th November to 8th November, 2003
Venue: Bunbury Entertainment Centre, Bunbury, Western Australia
Further Info: Royal College of Nursing, Freecall: 1800 061 660
Program: Not yet available

For those considering attending, GPDV and the Bunbury Division of General Practice have been working on obtaining corporate accommodation rates to minimise costs. Presently, I believe the best offer we've got (in terms of value for money) is:

Quest Apartments – Bunbury – 4.5 *
(All Rates Inclusive of GST)

Studio apartment (2 people)	$107.00
1 Bedroom apartment (2 people)	$133.00
2 Bedroom apartment (4 people)	$153.00
3 Bedroom apartment (6 people)	$183.00
Extra person	$17.00
Cot/Highchair	$5.00

We're looking at accommodation options between $50 and $100 – more info to follow.

We've also been offered (by "Peppermint Solutions" in WA) a special pre-conference 3 day tour of South Western WA that would pick you up from the airport on 4th November and have you at the opening function for the conference on the evening of the 6th November. It will include two nights' 4-5* accommodation, all meals, tours to wineries, coach tours to towns etc. Cost is $637 pp or $492 twin share. More info to follow. There will also be a day tour of the Margaret River area at a vastly lower cost (probably around $65).

I don't think that corporate airfare rates are worth investigating, because you can get cheaper fares off the net. Let me know if you have an idea though. Currently, Virgin is $418 return, Qantas $438 return. Fingers crossed for more "special" rates closer to the date.

Heart Foundation launches new guidelines - Reducing Risk in Heart Disease

Reducing Risk in Heart Disease - Guideline for the prevention of cardiovascular events in those with coronary heart disease is a guideline document aimed at all health professionals working to improve health outcomes and prevent further cardiovascular events in patients with coronary heart disease.

It is a joint initiative of the National Heart Foundation of Australia and the Cardiac Society of Australia and New Zealand, bringing together best-practice protocols for the management of coronary heart disease from diagnosis to ongoing care. The guidelines provide a general framework for appropriate practice, to be followed subject to the practitioner's judgement in each individual patient case.

Reducing Risk in Heart Disease has been endorsed by the Royal Australian College of General Practitioners, the Internal Medicine Society of Australia and New Zealand, the Australian Cardiac Rehabilitation Association and the Royal Australian College of Nursing.

In summary the key areas of focus are as follows:

- lifestyle and behavioural risk factor management;
- biomedical risk factors, medical management;
- pharmacological intervention;
- non-pharmacological intervention;
- psychological and social issues management.

Reducing Risk in Heart Disease is presented in a handy 8-page A4 brochure-like format. For your copy, please go to www.heartfoundation.com.au or call Heartline, the Heart Foundation's national telephone information service, on 1300 36 27 87 (local call cost). The full list of contributors is also available on the Heart Foundation website.

General Practice Divisions – Victoria Ltd

ABN 80 081 371 968 ACN 081 371 968

1st Floor, 458 Swanston Street

Carlton Victoria 3053

Tel: (03) 9341 5200 Fax: (03) 9348 1375

Email: d.capovilla@gpdv.com.au Website: www.gpdv.com.au