Integrated Care – ‘the future of good medical practice’

More than 200 medical specialists, GPs and their practice staff, allied health and nursing professionals have gathered with Gold Coast Health to hear a presentation on the proposed new model of integrated care designed to deliver more proactive and shared care to Gold Coast residents with multiple and complex co-morbidities. Outlining the case for change from Gold Coast Hospital and Health Service was CEO Ron Calvert and Executive Director for Health Innovation, Professor Martin Connor, and from Gold Coast Medicare Local, Board Chair Dr David Rowlands and CEO Matt Carrodus.

Dr Andrew Weissenberger (GP Hope Island) and Dr Mark Forbes (physician, Medical Assessment Unit) both made compelling arguments for a new system that would better meet the needs of busy clinicians and their patients. Overwhelmingly, participants endorsed the model which will now move to implementation phase.

“I think this model is absolutely spot on for the future of good medical practice and health care everywhere,” said Dr Norman Hohl, local GP.

Patient and general practice selection is now the top priority with phase 1 requiring the involvement of 8-10 practices. The preliminary work of analysis of GP and hospital data systems to ascertain mutual patients most likely to benefit from this new model is underway. It is planned that GPs will help build the model and design the system from the outset.

GPs involved in the program will be better supported to manage their complex and chronic disease patients with access to care coordinators, system navigators, specialist medical teams and one stop access to hospital and health service assessment and advice.

TO FIND OUT MORE OR GET INVOLVED

Contact
Dr Kate Johnston
General Practice Liaison Officer
Email: katej@gcml.com.au
Phone: 0403 733 341

Inside this issue

GP Communiqué 2
General Practice Liaison Officers 3
Gold Coast Health Update 3
ATAPS for non-English speakers 4
Nuclear Medicine at GCUH 4
Persistent pain project 5
Diabetes rebates 5
Immunisation Report 6
Lets Get Cooking program 6
In brief 7
Jobs 7
Events calendar 8

For practice resources, information and the online service directory

www.healthygc.com.au
As you will be aware, the Federal Government has announced in its budget that it plans to replace Medicare Locals with new Primary Health Networks (PHN) that will commence operations on 1 July 2015. Gold Coast Medicare Local (GCML) will remain operational until this time and will continue to provide support to general practices and other organisations and practitioners.

GCML is understandably disappointed with this decision from the Federal Government. The decision was taken after a review of the Medicare Local Network was released just prior to the Budget. The review conducted by Professor John Horvath AO, Principle Medical Consultant to the Department of Health, recommended replacing Medicare Locals with fewer organisations that essentially have exactly the same mandate and role. Given that Medicare Locals evolved from Divisions of General Practice less than three years ago, this seems an unfortunate part of the political cycle and a retrograde step. Reinventing the wheel (again) is wasteful and risks disrupting the continuity of programs and support provided to a wide range of service providers and patients.

The PHNs will undertake the same functions as MLs but will be significantly fewer in number. Details of new boundaries will emerge in the next few months followed shortly thereafter by a request for tender. Any organisation, public or private can tender to become a PHN.

GCML, GPGC and Gold Coast Health will be arguing strongly for a Gold Coast PHN to reflect the size of our community and patient flows within our region, and to preserve the very good relationships and collaboration that exists between Gold Coast Health, GCML, City of Gold Coast and our many other local partners. We are similarly concerned that if Gold Coast were to be a cluster within a larger PHN (probably located in Brisbane), input by local clinicians into decision making will be less effective, as local Boards are reduced to advisory Councils making recommendations to the PHN where decisions will be made. This will reduce, rather than increase clinical engagement as the review recommends.

During the next 12 months GCML will ensure services are maintained and new projects are commenced as planned. This is particularly important for the new Integrated Care project with Gold Coast Health. Continuity of this work is critical. If required, transitional planning will occur to seamlessly transition this work to another organisation by 1 July 2015. Obviously GCML intends to be competitive in the tendering process, and ensure it remains a significant part of organised primary care on the Gold Coast into the future.

- Dr David Rowlands

Membership of General Practice Gold Coast
General Practice Gold Coast (GPGC) is a membership based organisation established in 1994 and the Board would like to take this opportunity to invite you to renew or become a member of this organisation.

- Primary (Voting) Membership: Registered Medical Practitioners who identify as a GP predominantly in private practice providing total patient care and providing at least two sessions per week over a period of one year. Full voting rights and can be elected to the Board. $88.00 per Annum (including GST)
- Associate Membership: Non specialist Medical Practitioners who are working at least two sessions per week in a non-hospital setting but do not qualify for Primary Membership; Practice Nurses; one Practice Manager (or equivalent) per General Practice. No voting rights. $44.00 per annum (including GST)

The goals of GPGC are to work with General Practice to manage the flow of information from the national, state and local governments; the local hospitals (public and private) and Gold Coast Medicare Local to improve the health of the Gold Coast community. It is important that General Practice on the Gold Coast has a strong voice in these ever changing times; Budget 2014 has proposed several changes that will greatly affect GPs and their patients. GPGC is coordinated by a Board of Directors, who are General Practitioners elected annually. The continued operation and success of GPGC relies on the involvement of General Practice.

As a member of GPGC you are entitled to:
- Continuing Professional Development (CPD) – which is provided for members only
- Opportunities for social networking and mutual support and collegiality.

I encourage all GPs and eligible practice staff to become members of GPGC. Membership can be paid via the new GPGC website which will go live in early June. An email notification will be forwarded to all General Practices and individual GPs (who have provided an individual/particular email address), with the full details of how to apply for/renew membership. Please ensure that you supply an individual email address (eg. drjohn@yourdomain.com.au) to receive communications from GPGC/GCML. Go to www.healthygc.com.au/614gs1 for details or to download the Preferred Communication Authorisation Form.

- Dr Roger Halliwell
Strategies to manage an increase in outpatient referrals

Over the last 12 months, there has been a significant increase in outpatient referrals on the Gold Coast. The Gold Coast Health Outpatient Department receives more referrals than available appointments. This trend is not sustainable over the long term.

That is why Gold Coast Health is looking at new strategies to ensure that all outpatient referrals are appropriate to be seen by a hospital specialist. These will include updated management and pre-referral guidelines. Referrals with insufficient detail may be returned to the GP requesting further information.

It is important that referrals include the pre-requisite tests outlined on the referral template or in the Outpatient Referral Directory (at www.healthygc.com.au/gch). Referrals should include as much clinical information as possible including treatment the patient has received to date.

Before referring patients to Gold Coast Health, please discuss treatment options with your patient to ensure that they are willing to attend a hospital specialist appointment. This is particularly important when referring to surgical departments to ensure the patient is willing to undertake surgery, if required.

Gold Coast Health would like to thank GPs for their assistance in ensuring optimal use is made of the resources in outpatients.

Seeking GPs with an interest in opioid replacement therapy

Gold Coast Health is interested to work with GPs who may have an interest in the area of opioid replacement therapy.

An opioid prescribers course has traditionally been conducted in Brisbane however GPs will be able to undertake this course on the Gold Coast later this year. In recent years there has generally been a shift away from methadone as the main replacement opioid to the much safer and easier to prescribe buprenorphine preparations.

Local prescribers will also have the backing and support of the Gold Coast Health Alcohol and Other Drugs Service for clinically complex clients. If you already have the necessary qualifications in this area or are interested to be involved please contact Dr Kevin McNamara, Medical Director Mental Health Specialty Services and AODS, Gold Coast Health at: kevin.mcnamara@health.qld.gov.au.
ATAPS services for non-English speaking patients

General practitioners are reminded that they can refer people of non-English speaking backgrounds to the ATAPS (Access to Allied Psychological Services) Program.

In the provision of ATAPS services, Gold Coast Medicare Local engages non-English speaking clients utilising TIS National (Translating and Interpreting Service).

The cost of the interpreting service and the mental health professionals’ fee are covered by GCML, therefore the ATAPS psychological services are available to the client at no cost.

The ATAPS Program has capacity to accept more referrals for this target population and recently assisted a client from a non-English speaking background, with the assistance of a telephone interpreter.

Further information about eligibility and how to refer can be obtained by contacting the ATAPS team on 07 5612 5454 or email: gcmlreferrals@gcml.com.au.

TIS National
(Translating and Interpreting Service)

TIS National provides free interpreting services for non-English speaking Australian citizens and permanent residents communicating with private medical practitioners.


Nuclear medicine and PET/CT at Gold Coast University Hospital

The new Nuclear Medicine and PET/CT service is available Monday to Friday 7:30am to 5:00pm and will accept referrals from GPs. The service is staffed by four dual trained radiology/nuclear medicine specialists and six nuclear medicine technologists.

Equipment is state of the art and includes 2 Siemens Symbia T16 Gamma Cameras and one Siemens Biograph mCT PET/CT.

Nuclear Medicine studies available include:
- Myocardial perfusion imaging
- Bone scans
- Thyroid and parathyroid imaging
- Ventilation and perfusion lung scans
- Liver/spleen imaging
- Renal scans including Mag3 studies
- Brain perfusion imaging
- Gastrointestinal imaging including colonic transits and gastric emptying studies
- White cell labelling

All patient imaging is available immediately on disk and results will be faxed directly to the referrer.

The service can be contacted directly on 07 5687 4478 or 07 5687 4336.

Referrals can be faxed to 07 5687 4199 and require patient details, provider contact details, provider number and reason for referral.
Persistent Pain Project making a difference to patient lives

Many patients involved in Gold Coast’s Medicare Local’s Persistent Pain Project, have noticed a significant reduction in their pain.

General practices can refer patients or become involved into the project, which is making a real difference to the quality of life for pain sufferers on the Gold Coast.

Each month, participants receive advice, information and education on managing their pain. This team based program provides patients with access to primary healthcare providers who have a special interest in chronic pain, ranging from pharmacists, physiotherapists, psychologists and others.

Group member, Anita Buckley, has been involved with the program since it was established last year, and said it has made a huge difference to her life.

“It’s an imperative service to help you get up and move forward. Every month we are educated on different aspects of persistent pain. It could be a pharmacist, a GP, or someone talking about alternate therapies, or the mindfulness program which is how to take your mind off your pain,” Anita said.

If GPs, allied health professionals or pain sufferers would like to find out more about how they can be involved in the program, they can contact program manager Joyce McSwan at: joycem@gcml.com.au or mobile 0412 327 795.

Group services for patients with Type 2 Diabetes

GPs are reminded that patients with Type 2 Diabetes can receive Medicare rebates for up to eight group sessions provided by a dietitian, exercise physiologist and/or diabetes educator. These group sessions are in addition to the five individual allied health services available to eligible patients with a chronic or terminal condition. Patients who demonstrate readiness to change, are able to contribute effectively to a group and have a potential for self-management are most likely to benefit from these group services.

Patient Eligibility
To be eligible for group services patients must have:
• Type 2 diabetes
• a current GP Management Plan
If the patient is a resident of a residential aged care facility, the GP must have contributed to, or reviewed, a care plan prepared by the residential aged care facility.

Assessment for Group Services
Prior to partaking in group services:
• the patient must undergo an assessment with an eligible dietitian, exercise physiologist or diabetes educator
• the assessment must be provided to an individual patient in person
• the assessment must be at least 45 minutes in duration.

Group Services
• Groups must consist of between 2-12 people
• Each session must be at least 60 minutes in duration
• Group sessions may be delivered by one type of allied health provider or by a combination of providers
• Following the individual assessment, the allied health provider must provide or contribute to a written report back to the referring GP for each patient
• On completion of the group services program, the allied health provider should supply the GP with a written report describing the group services provided to the patient and outcomes achieved.

For more information visit www.healthygc.com.au/614gs2 or call Gold Coast Medicare Local Practice Support on 07 5612 5407 (Fiona) or 07 5612 5408 (Maureen).
Immunisation Report

<table>
<thead>
<tr>
<th>Notifiable diseases</th>
<th>April 2014</th>
<th>April (5 Yr Mean)</th>
<th>YTD 2014</th>
<th>Total for 2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vaccine Preventable</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>-</td>
<td>&lt;3</td>
<td>&lt;3</td>
<td>3</td>
</tr>
<tr>
<td>Pertussis</td>
<td>22</td>
<td>36</td>
<td>77</td>
<td>299</td>
</tr>
<tr>
<td>Rubella</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Influenza (Lab confirmed)</td>
<td>31</td>
<td>10</td>
<td>208</td>
<td>584</td>
</tr>
<tr>
<td>Mumps</td>
<td>-</td>
<td>&lt;3</td>
<td>&lt;3</td>
<td>8</td>
</tr>
<tr>
<td>Varicella</td>
<td>55</td>
<td>28</td>
<td>248</td>
<td>530</td>
</tr>
<tr>
<td><strong>Bacterial</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campylobacter</td>
<td>47</td>
<td>32</td>
<td>224</td>
<td>227</td>
</tr>
<tr>
<td>Cryptosporidiosis</td>
<td>23</td>
<td>13</td>
<td>66</td>
<td>60</td>
</tr>
<tr>
<td>Hepatitis A (All)</td>
<td>-</td>
<td>&lt;3</td>
<td>&lt;3</td>
<td>4</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>6</td>
<td>5</td>
<td>32</td>
<td>118</td>
</tr>
<tr>
<td>Salmonellosis (All)</td>
<td>55</td>
<td>24</td>
<td>212</td>
<td>312</td>
</tr>
<tr>
<td><strong>Sexually transmitted</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chlamydia (All Forms)</td>
<td>175</td>
<td>166</td>
<td>948</td>
<td>2251</td>
</tr>
<tr>
<td>Gonorrhoea (All Forms)</td>
<td>31</td>
<td>20</td>
<td>139</td>
<td>310</td>
</tr>
<tr>
<td>Syphilis (Infectious &lt;2yr dur)</td>
<td>5</td>
<td>&lt;3</td>
<td>12</td>
<td>39</td>
</tr>
<tr>
<td><strong>Arboviral disease</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ross River Virus</td>
<td>16</td>
<td>17</td>
<td>42</td>
<td>115</td>
</tr>
<tr>
<td>Barmah Forest Virus</td>
<td>3</td>
<td>9</td>
<td>23</td>
<td>139*</td>
</tr>
<tr>
<td><strong>Other diseases</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q Fever</td>
<td>-</td>
<td>&lt;3</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Legionella</td>
<td>-</td>
<td>&lt;3</td>
<td>-</td>
<td>14</td>
</tr>
<tr>
<td>Meningococcal (Invasive)</td>
<td>-</td>
<td>&lt;3</td>
<td>&lt;3</td>
<td>&lt;3</td>
</tr>
<tr>
<td>Pneumococcal (Invasive)</td>
<td>&lt;3</td>
<td>&lt;3</td>
<td>5</td>
<td>17</td>
</tr>
</tbody>
</table>

*Caution should be used when making historical comparisons of BRV cases due to the high number of false positive notifications related to a commercial serology kit.

Data Extracted 9/05/2014 Queensland Health NOCS database

Tips for managing vaccination data

- How does an overseas immunisation history get entered onto the Australian Childhood Immunisation Register (ACIR)?
- Is a child without a Medicare number eligible for government-funded vaccine?
- How can a Medical Centre obtain a patient's school-based vaccination history?
- Can Medical Centres arrange on-line access to the ACIR?

These and other commonly asked questions are answered in the Gold Coast Public Health Unit’s Management of vaccination data: Tips for Medical Centre Staff Fact Sheet which is available for download at: www.healthygc.com.au/614gs3.

Improving patient’s healthy food cooking skills

Patients who would benefit from learning how to cook and prepare healthy meals can be assisted through the Let's Get Cooking Program. The target group is low-socio economic.

This program being held at the Soul Centre Community Pantry in Upper Coomera, is being supported through Benn-efit Nutrition, City of Gold Coast, Gold Coast Medicare Local and the Soul Centre.

The four week program is run by a dietitian-nutritionist, and will cost participants $5 to be involved.

For more details contact Kathy Benn at the Soul Centre Community Pantry on: 07 5502 7324 or email: info@soulcentre.com.au.

Is your practice featured in the Gold Coast Health and Community Online Service Directory?

This comprehensive online directory provides detailed information about health and community services across the Gold Coast. Established by Gold Coast Medicare Local, it will help you and the public find health professionals who can provide specific health services such as GPs or allied health professionals. You can create your own listing or update your current listing. Don’t forget to include information including:

- Languages spoken at your practice
- Specialities
- Areas of special interest eg ENT etc
- Opening hours and contact details

If you require assistance, contact us at: communications@gcml.com.au or phone 07 5635 2455.

www.healthygc.com.au
In brief....

Graduate Nurse Training Program
Gold Coast Medicare Local is seeking expressions of interest from General Practices to join a Graduate Nurse Training Program for transition to General Practice, commencing in July 2014. The program will provide education and support for newly employed nurses (for a 12 month period). Eligible General Practices will have employed a newly Graduated Registered Nurse or employed a a Registered Nurse who is new to working in General Practice (within the last 6 months).
For more details visit: www.healthygc.com.au/614gs4

Co-payment information
The RACGP has developed some advice for general practitioners on how the 2014 Federal Budget announcement about a $7 co-payment for general practice services will be administered. It will also be seeking further clarification from the government.

Interactive training for primary care nurses
Find out the latest information on identifying, diagnosing and managing patients with COPD, including the development of care plans. The updated training includes new videos and information on new medicines for COPD. This builds on the many interactive features, including case studies and videos, downloadable assessment tools and patient handouts and quizzes. Professional development points available.
For more information call: 1800 654 301, email: enquiries@lungfoundation.com.au or visit: www.lungfoundation.com.au/health-professionals/training-and-education

Clinical audit for depression
The Mental Health and Community Pharmacy Project team at Griffith University invite general practitioners in Queensland and northern New South Wales to participate in a QI&CPD activity: a clinical audit to review two important areas of mental health practice:
• how you currently identify and manage people at risk of non-adherence to antidepressants
• how you utilise services offered by other providers such as psychologists/psychiatrists (i.e. via the mental health treatment plan), pharmacists (i.e. medication support services) and consumer resources (e.g. Beyond Blue and National Institute for Health and Clinical Excellence).

This clinical audit has been approved for 40 category 1 points as part of a Quality Improvement activity. For further information contact the Mental Health Project Team: 1800 600 687 or email: mentalhealth@griffith.edu.au.

Locum needed at Burleigh
The Burleigh West Medical Centre is looking for a locum (preferably female) on Mondays and Thursdays from 8am - 1pm, from Friday June 13 until Monday July 14.
For further information, contact Bruce Watson on: 07 5535 0681 or email burleighwestmc@yahoo.com.au

Physiotherapist based at medical centre
Opportunity for a physiotherapist to join a busy modern up market multi-doctor medical centre and other allied health in the main street of Coolangatta.
Contact: office@coolmedical.com.au

June is...
Bowel Cancer Awareness Month
Bowel Cancer Awareness Month raises awareness about a disease that directly affects over 14,000 Australians each year, and takes the lives of around 80 Australians every week.

General practitioners and practice staff can play an important role in a patient’s decision on whether to screen for bowel cancer. Although bowel cancer is one of the most common cancers found in both men and women, the disease is also highly treatable and beatable if detected early.

The National Bowel Cancer Screening Program (NBCSP) is ongoing and continuing to expand in its eligibility. Currently Australians turning 50, 55, 60 or 65 will automatically receive a Faecal Occult Blood Test (FOBT) in the mail, directed to their Medicare-registered address, around the time of their eligible birthday. From 2015, 70 year olds will also become eligible.

For more information about the NBCSP, go to: www.cancerscreening.gov.au or contact 1800 118 868.

For those who do not yet qualify under the national program, immunochemical FOBT kits can be purchased from Bowel Cancer Australia or some pharmacies.
For more information: www.bowelcanceraustralia.org.au.

Co-payment information

Physiotherapist based at medical centre

Locum needed at Burleigh

June is...

Bowel Cancer Awareness Month
Generally sPeKing
Information resource for Gold Coast General Practices

Upcoming Events 2014

June
12
Ophthalmology Update - Macular Degeneration, Update from GCUH Director of Ophthalmology (RACGP Category 2 points applied for)
For general practitioners

19
Immunisation Back to Basics Workshop
Staff and nurses new to general practice within the last six months with immunisation responsibilities

Nursing in General Practice Training Workshop - Healthy Ageing
For practice nurses and all community based nurses

25
Adolescent Health Update - Education Forum (CPD event)
For general practitioners, primary healthcare nurses including those in general practice, allied health professionals

Visit www.healthygc.com.au/gped for details and a comprehensive list of events for health professionals

Are you signed up for your online GP Bulletin?
This has been developed by Gold Coast Medicare Local to provide you with:
• Important information from Gold Coast Health and clinical services
• Doctor shopper notices
• Education and quality activities
• Alerts


Editorial deadline: June 13 2014
Send stories to: communications@gcml.com.au
Editor: Christine Bain
(All content published will be at the discretion of the editor)

Medicare Locals gratefully acknowledge the financial and other support from the Australian Government Department of Health