

# Generally Speaking

Information for Gold Coast general practices

ISSUE: June 2017

[www.healthycg.com.au](http://www.healthycg.com.au)

## Health planning for the Commonwealth Games

Significant planning is underway with Gold Coast Health, emergency services and other health providers to manage public health services during the lead up and throughout the Commonwealth Games period.

Gold Coast Primary Health Network (GCPHN) will be a key source of information for GPs in the coming months, with regular updates, and also throughout the games.

Local GPs should ensure they are subscribed to the GCPHN GP Bulletin, which will provide them with regular alerts and information. They can subscribe at: [www.healthycg.com.au/gpsignup](http://www.healthycg.com.au/gpsignup)

Gold Coast Health Chief Operations Officer, Ms Kimberley Pierce, said that patient care is a priority in the planning process. Each clinical and service area of Gold Coast Health is finalising plans to adapt existing resource allocation to accommodate Commonwealth Games needs, with minimal impact on operations. Once those plans are finalised, any impacts will be communicated with key partners and the community.

Weekly planning meetings are currently underway to assess impacts on hospital and health service operations. Queensland Ambulance Service, Transport and Main Roads and Goldoc (Commonwealth Games) representatives participate in these meetings to provide updates and consulting on potential impacts to Gold Coast Health services.

Gold Coast Health recently completed a desktop exercise using a real-life mass casualty disaster scenario as part of ongoing preparations. Queensland Ambulance Service and Goldoc (Commonwealth Games) were observers at the scenario.

It provided valuable insights into process improvements as well as assurance that the organisation is advanced in its preparedness for a potential disaster during a major event.

Additional scenarios are planned to test processes in the event of an emergency.



Dr Carl de Wet and his 'Get set for surgery' project team accept the Category 1 Improvers 2017 award at Gold Coast University Hospital.

## GPLU wins health improvers award to benefit patient care

Patients waiting for elective surgery will benefit from the General Practice Liaison Unit's (GPLU) winning entry at the Gold Coast Health Improvers event on Friday.

The idea presented by Dr Carl de Wet in collaboration with the Gold Coast Public Health Unit during a one-minute staff skit, will help empower patients waiting for elective surgery to use their waiting time in a pro-active way through the 'Get set for surgery program'.

The GPLU won up to \$100,000 to implement the program. Thirteen finalists creatively presented their ideas to a judging panel which included Queensland Health and Ambulance Services Minister Cameron Dick and Queensland Health Director-General Michael Walsh.

More details available at: [www.goldcoast.health.qld.gov.au/about-us/news/simple-ideas-inspire-change-gold-coast-health](http://www.goldcoast.health.qld.gov.au/about-us/news/simple-ideas-inspire-change-gold-coast-health)

**Read Gold Coast Primary Health Network's first ever Report to Community available at:**  
[www.healthycg.com.au/About/About-GCPHN.aspx#10111](http://www.healthycg.com.au/About/About-GCPHN.aspx#10111)

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An Australian Government Initiative



**Dr David Rowlands**  
Gold Coast Primary Health Network (GCPHN) Board Chair

I would like to congratulate the General Practice Liaison Unit for its successful Gold Coast Health Improvers award. This unit is one of our most critical strategies for improving patient care on the Gold Coast, which we jointly established with Queensland Health to strengthen integration between hospitals and primary care providers. A major focus has been on the development of strategies to reduce the number of patients waiting for specialist appointments with significant results.

Details of the unit's achievements are highlighted in our very first Report to the Community, outlining our activities in the last few months. Some of our achievements include record HPV and childhood immunisation rates, establishing new alcohol and other drug services that have been credited with saving lives, reducing hospitalisations by Gold Coast pain sufferers by 20 percent through our persistent pain program and developing a commissioning and maturity plan to help shape future priorities, as we strive to build one world class health system for the Gold Coast. View at: [www.healthyc.com.au/About/About-GCPHN.aspx#10111](http://www.healthyc.com.au/About/About-GCPHN.aspx#10111)

GPs can learn more about better pain management at our upcoming event (see details below). We have also held a number of very successful events including wound management, a trainer workshop for clinical placements and a quality improvement collaborative meeting to help practices develop continuous quality improvement initiatives to improve patient care and assist practices to be more sustainable in the future.

## Better pain management event

This event organised by Gold Coast Primary Health Network on Wednesday June 14, 6pm-8.45pm at Robina, aims to provide GPs and allied health professionals with resources on available paediatric persistent pain services, an update on paediatric persistent pain management and current research by the Pain Management Research Institute and its study of the impact of psychosocial detection and intervention to improve return to work outcomes.

There will be an opportunity to learn about paediatric persistent pain management and how it differs to adults and explain the SKiP organisation. There will be an update on the topic of medicinal cannabis with details on the current application process, guidelines and the pharmacology and selection of medicinal cannabis currently indicated for use in Australia. To register visit: [www.healthyc.com.au/persistentpainevent](http://www.healthyc.com.au/persistentpainevent)



**Dr Lisa Beecham**  
General Practice Gold Coast (GPGC) Board Chair

The recent Federal Budget sadly did not bring real relief to general practice's financial pressures from the Medicare freeze. GPGC has organised a Business Masterclass on June 8 at Thai Mudjee, Mudgeraba with Paul Copeland from William and Buck Chartered Accountants to consider strategic approaches to improving your profitability (GP owners and contractors). RSVP to: [admin@gpgc.com.au](mailto:admin@gpgc.com.au) and help design solutions!

Gold Coast Primary Health Network (GCPHN) has held an evening featuring information on the RACGP PLAN. PenCat (Cat 4) can pull the data needed for initiating your RACGP plan. This will be outlined for GPs in the coming editions of the GP Bulletin.

Quality improvement initiatives were discussed with a focus on how to use your practice data to drive improvements. If your practice doesn't have the Cat 4- Pencat tool see your GCPHN practice support officer. (You can view the presentation - see details below.)

An update was also held on the cervical screening changes and an excellent summary is on the National Cervical Screening website with a flow chart to print. Visit: [www.cancerscreening.gov.au/internet/screening/publishing.nsf/content/renewal-ncsp-pres](http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/content/renewal-ncsp-pres)

Meningococcal ACWY vaccine is being rolled out through the school programs for grade 10 only. General Practice will be getting vaccine supply sometime in June for the 15-19 year old age group. Last year there were 13 reported cases of Meningococcal W in Queensland, 109 in Australia. The Men-W ST-11 strain is associated with a higher death rate.

One quick tip for Medical Objects: if you are searching for eg. Dr Peter Brown type Brown P (space not comma to search).

Any ideas for GPGC activities please email [admin@gpgc.com.au](mailto:admin@gpgc.com.au)

## Cat Plus training presentation

Gold Coast general practices can now access a Powerpoint presentation, from the recent Gold Coast Primary Health Network (GCPHN) Cat Plus training event for new practices utilising the extraction tool. Five breakout sessions were offered about:

- new users
- diabetes
- Chronic Kidney Disease
- COPD
- business modelling

This presentation has been uploaded to the GCPHN Healthyc Data Management web page (*Under CatPlus Resources*) at: [www.healthyc.com.au/Resources/Data-Management-\(Clinical-Audit-Tools-CAT\).aspx](http://www.healthyc.com.au/Resources/Data-Management-(Clinical-Audit-Tools-CAT).aspx) Links to the Top Bar video demonstration and Pat Cat are included.

For more information, contact your GCPHN practice support officer at: [www.healthyc.com.au/practice-support](http://www.healthyc.com.au/practice-support) or email: [practicesupport@gcphn.com.au](mailto:practicesupport@gcphn.com.au)

## Palliative program helping GPs

Medical and health professionals have gained valuable insights through participation in the national Program of Experience in the Palliative Approach (PEPA) at Robina and Gold Coast hospitals.

While accompanying members of the Palliative Care Team for four days, they observed inpatient and outpatient care, community visits and consultations.

Since last July, four GPs, a visiting medical officer, two junior doctors, paramedics and seven registered nurses have participated in PEPA.

Broadbeach participant Dr Mathew Thornley said: "In addition to symptom management strategies, the placement was extremely helpful for understanding the flow of patients through the Palliative Care Service, the resources and services available when a patient is discharged to the community.

"Palliative care is an important part of general practice, and better understanding of the palliative care service leads to superior patient care."

Dr Sonu Haikerwal said: "I found the experience extremely valuable and recommend it to most GPs because palliative care is an integral part of any general practice."

"I observed ward rounds, home visits, teaching and multidisciplinary meetings. I got to appreciate the type of patients accessing the service and how their needs are met with a multidisciplinary approach.

"I can use this experience to better manage palliative patients at home and in the community with focus on quality of life," Dr Haikerwal said.

Gold Coast Health Director of Palliative Care Dr Andrew Broadbent said there had been excellent feedback from participants.

"The participants say that after attending they are more confident to provide generalist palliative care and know where to seek advice," he said.

Clinicians wanting to participate can apply for placement at: <https://www.health.qld.gov.au/cpcrc/pepa>

*Dr Sonu Haikerwal with Dr Mathew Thornley, found the program valuable*



## General Practice Liaison Unit

The General Practice Liaison Unit is based at the Gold Coast University Hospital and supported by Gold Coast Health and Gold Coast Primary Health Network.

The unit is tasked with improving patient care by facilitating and strengthening healthcare integration between Gold Coast hospitals and primary care providers. To contact: [GCGPLU@health.qld.gov.au](mailto:GCGPLU@health.qld.gov.au)

## Current referral templates and guidelines for Gold Coast GPs

GPs are reminded that the Gold Coast Primary Health Network [www.healthyc.com.au](http://www.healthyc.com.au) website has referral templates and guidelines for Gold Coast Health, Gold Coast Primary Health Network and some Queensland Health services.

This includes Gold Coast Health Specialist Outpatient Services incorporating recently updated referral templates to include Clinical Prioritisation Criteria. These are available at: [www.healthyc.com.au/referrals](http://www.healthyc.com.au/referrals)

Children's Health Queensland (including Lady Cilento Children's Hospital) has recently updated its GP specialist referral templates as some of the 'Heads of Clinic' options have changed.

Please note that the old Royal Children's Hospital fax number (07 3636 7811) has become inactive from May 31 2017.

## Next of Kin details needed for paediatric referrals

Gold Coast Health (GCH) is reminding GPs that next of kin details are required for all paediatric referrals. Currently the referral templates do not have a field that auto populates 'next of kin' details.

When referring paediatric patients, GPs can manually enter next of kin details in the 'carer' field in 'Section 8 Relevant Social Information' of the referral template. GCH is scheduling the next review of referral templates which will include a "next of kin" field and will notify GPs as soon as this change occurs.

## Lower limb orthotic devices - referral

The General Practice Liaison Unit advises that patients requiring a lower limb orthotic device will need a referral to a private orthotist.

GP Liaison Officer Dr Carl de Wet said as Gold Coast University Hospital (GCUH) did not have an orthotics service, Gold Coast Health covered the costs for a private orthotist if the patient held a Pension Concession Card, Health Care Card or a Seniors Card from Centrelink

To obtain a referral to a private orthotist the patient will need to first be referred to orthopaedic or neurosurgical specialist outpatient services at GCUH, which may then ask for physiotherapy input as needed. If an orthotic device is clinically indicated a referral for private orthotist review will be arranged by the treating team.

### Breastscreen update

In December 2016, BreastScreen Queensland launched online bookings to provide women with a more convenient appointment system and by April 2017, 1748 Gold Coast clients have made their appointments utilising the new system.

The next phase has now commenced to progress the delivery of electronic BreastScreen results to GPs. Where possible electronic results will replace hardcopy letters providing improved timelines of BreastScreen results for patients.

The mobile service is available at Robina Library until July 2 with appointments from 8.15am until 4pm weekdays and some Saturdays. Bookings: [www.breastscreen.qld.gov.au](http://www.breastscreen.qld.gov.au) or 13 20 50.

BreastScreen Queensland has also launched a statewide campaign for June and July, 'One More Thing', encouraging women to prioritise their breast screen every two years.

### Cervical screening cytology test

A reminder that from 1 May 2017, the Liquid Based Cytology (LBC) test has been added to the MBS. For each patient, a Medicare rebate will only be payable for one cervical screening test for cytology, either the LBC test or the conventional cytology test. Until November 30 2017, GPs should continue to encourage all eligible women aged 18-69 to have their two yearly Pap test, and attend their follow up appointment when due.

### Bowel screening resources

June is bowel cancer awareness month and Bowel Cancer Australia (BCA) is encouraging health professionals to start the screening conversation with patients aged 50 and over, and encourage those of average risk to complete a bowel cancer screening test. BCA says that GPs could even send out a proactive letter, email or phone call to their database and can download free promotional resources for their patients. For details visit: [www.bowelcancerawarenessmonth.org](http://www.bowelcancerawarenessmonth.org)

There are also some useful online professional resources.

- RACGP's Guidelines for Preventive Activities in General Practice (Red Book)  
[www.racgp.org.au/your-practice/guidelines/redbook/9-early-detection-of-cancers/92-colorectal-cancer](http://www.racgp.org.au/your-practice/guidelines/redbook/9-early-detection-of-cancers/92-colorectal-cancer)
- PenCat Recipes – Identifying patients never screened for Bowel and Breast Cancer  
<http://help.pencs.com.au/display/CR/Identify+eligible+patients+never+screened+for+breast+and+bowel+cancer>

## Digital Health

### PROGRESS TO DATE

Gold Coast consumer registrations have now reached 103,806 with 152 of general practices now registered for digital health.

### PRACTICE ADVICE ABOUT CYBER SECURITY

The Australian Cyber Security Centre is advising companies to talk to their IT provider to check their security precautions are in place, after the Ransomware virus seriously affected the National Health Service in the UK. The centre is working closely with the Australian Digital Health Agency. While the virus has not reached Australia, practices should ensure their security software patches are up-to-date, their system has proper anti-virus software and data is backed up daily.

The Australian Cyber Security Centre can provide support and advice. Contact 1300 292 371 or visit: [www.acsc.gov.au](http://www.acsc.gov.au).

### Mental Health Training for GPs

GPs can access a one day Mental Health Skills Training program organised through Checkup.

This focuses on assessment, planning and review of the General Practice Mental Health Treatment Plan and topics that will complement a GP's knowledge of managing patients who experience mental health issues including evidence based psychological interventions, psychopharmacology and physical health and mental illness.

The workshop also includes a brief overview of Chronic Disease Management. GPs who complete this training will be able to claim MBS Item numbers 2715 and 2717 for the preparation of General Practice Mental Health Treatment Plans (GPMHTPs). To view visit:

[www.checkup.org.au/page/Training/Mental\\_Health/Takeaway\\_Mental\\_Health\\_activate\\_mind\\_body\\_Mental\\_Health\\_Skills\\_Training](http://www.checkup.org.au/page/Training/Mental_Health/Takeaway_Mental_Health_activate_mind_body_Mental_Health_Skills_Training)

### RANZCP Clinical Guidelines

The Royal Australian New Zealand College of Psychiatrists has produced clinical guidelines for health professionals, covering:

- mood disorders
- schizophrenia
- deliberate self-harm
- eating disorders

These are available at: [www.ranzcp.org/Publications/Guidelines-and-resources-for-practice.aspx](http://www.ranzcp.org/Publications/Guidelines-and-resources-for-practice.aspx)

For your patients, the new RANZCP website 'Your Health in Mind' developed for the public, provides community guides on mental illnesses and disorders, treatments, psychiatry and getting help. This site also includes a 'find a psychiatrist' directory, which can be used by both health professionals and the public. Visit: [www.yourhealthinmind.org](http://www.yourhealthinmind.org)

Gold Coast Primary Health Network's health and wellbeing service directory at [www.healthygc.com.au](http://www.healthygc.com.au) also has listings of 2320 services across the Gold Coast, including mental health.

## Practice News



Trish Jones who accepted her award at the APNA National Conference

### APNA award for GC practice nurse

Gold Coast practice nurse Trish Jones has won the best poster presentation at the recent national APNA conference for her research toolkit for nurses new to general practice. Trish, who developed the project as component of her masters degree, was thrilled with the award. "I think the reason that people are interested in this, is because this is what nurses want and need right now, as a way of resourcing their new staff so they can feel comfortable and confident when they do work in a practice when they haven't worked there before."

Gold Coast Primary Health Network also presented it's tiered approach to practice engagement, which has attracted interest from other Primary Health Networks nationally.

# Chris Del Mar talks about the antibiotic resistance problem in General Practice

## Clinician Opinion

### What's the problem?

Antibiotic resistance - long ago predicted - has arrived, directly causing about 1,600 deaths every year. It's going to get worse, with an estimated 50m deaths worldwide in the next 30-35 years, which then overtakes cancer as a cause of death. Direct deaths are only the tip of the iceberg: soon, the threat of resistance will be enough to make routine 'high-tech' medical investigations and treatments too risky. These include chemotherapy, cardiac catheter imaging and stents; major surgery, including joint replacements. Medicine will return to the dark ages of before the 1930s.

For us in general practice, this seems remote and impalpable. Yet it is a real problem in hospital care, and alarm bells are raised by our infectious disease specialist colleagues, who are very worried. Yet there is every likelihood that general practice prescribing is a major contributor to the problem. Antibiotic resistance is caused by antibiotic use. Every time we use antibiotics, resistance is generated in our microbiome, and this takes about a year to dissipate. Since we prescribe about three quarters of all antibiotics used by humans in general practice, we are very likely to be a major contributor to resistance - and certainly, resistance, which used to be a hospital generated issue, is now routinely seen among patients being admitted with no prior hospital management.

### What can we do?

There are huge investments into creating new antibiotics. However so far there is nothing very encouraging on the horizon. No new classes of antibiotics have been discovered for decades. Every antibiotic we have has developed resistance in among at least some of our pathogens, and there are some very nasty multi-resistant ones there now.

The other approach is antibiotic conservation, what hospital folk call 'antibiotic stewardship'. The more we desist from using antibiotics when not necessary, the more effective they'll be when it's really necessary. The scope for us to make gains is enormous, especially for acute respiratory infections. These are the sore throats, coughs and colds, and middle ear infections that make up so much of our practice. Collectively, these make up about 50 per cent of all our antibiotic prescribing (and 3/8ths of all human antibiotic prescribing in Australia). There is now good evidence, from Cochrane reviews of all the randomised trials (and there are plenty done), that most of this provides no, or minimal, benefit to our patients.

Of course, this is easier to say than do. We worry about safety: "Is this just a common cough or cold, or could it be the early stages of something far more serious like meningitis, community acquired pneumonia or..."; "could this sore throat turn into quinsy...". New evidence has shown that being a high prescriber doesn't provide any important protection for these nasty complications. Exceptions still including acute rheumatic fever for Indigenous patients in remote Australia.

We also worry about threatening the relationship we have with our patients that, what could be perceived as 'rationing', might cause. This is a real challenge. Here are two tips that might help address these two worries in situations in which we judge antibiotics will contribute little use, but patients seem to expect them.

### Delayed prescribing

This is when we write a prescription for antibiotics, but tell the patient (or parent) that these aren't necessary at the moment, although they can be dispensed and used if either things get worse in the next few days, or symptoms aren't better in some (defined) days. Cynics might think these always get filled immediately, but actually, trial evidence shows only a minority do, and that this

intervention greatly reduces the antibiotics used. This seems to work by educating the patient - as it has been shown that re-consultation for ARIs later is reduced. They learn to manage these self-limiting illness themselves.

### Shared decision making

This is a mixture of good communication skills and evidence based practice, and the acknowledgement that patients should be involved more in the decision-making. The first step is to understand what patients expect, are concerned about, and fearful of. A study done by a Gold Coast GP showed that this is often very different to what the GPs assume (they 'want' antibiotics much less than we expect). The next step is to explain that not using antibiotics is an option. And what the difference in outcomes are (not much, from the evidence!) Then we get the patients to reflect on this difference, and incorporate their preferences, so that the treatment plan is truly collaborative. A Cochrane review shows that this approach doesn't take longer, but significantly reduced the use of antibiotics for ARIs.

Currently we are trialling some 'patient decision aids' here on the Gold Coast to try and help make the 'explaining the evidence' part easier. If you are interested in taking part in the trial, let me know.

*Professor Chris Del Mar, Academic GP  
Research Faculty of Health Sciences and Medicine  
Bond University*

## Practice Tips

### How can Top Bar can support quality improvement?

# 1

Top Bar is part of the suite of tools available with Cat Plus (Pen Cat data extraction tool). For an overview, please view this video:

[www.pencs.com.au/products/topbar/](http://www.pencs.com.au/products/topbar/)

If you don't have access to Cat Plus, and would like to know more, please contact your practice support officer or email: [practicesupport@gcphn.com.au](mailto:practicesupport@gcphn.com.au)

### Accreditation support

# 2

Did you know that your practice support officer can provide reports for your accreditation documentation, detailing your practice involvement in education and quality improvement activities with GCPHN? If you would like this information, please contact your practice support officer or email:

[practicesupport@gcphn.com.au](mailto:practicesupport@gcphn.com.au)

### Bi-monthly reports for practices

# 3

In April, GCPHN circulated bi-monthly data reports to participating practices submitting data using Cat Plus software. The report focus was 'Data Quality and Digital Health' available at:

[www.healthyc.com.au/Resources/Data-Management-\(Clinical-Audit-Tools-CAT\).aspx#10309](http://www.healthyc.com.au/Resources/Data-Management-(Clinical-Audit-Tools-CAT).aspx#10309)

If your practice does not currently receive these reports, and is interested in receiving them in the future, contact your practice support officer at: [www.healthyc.com.au/practice-support](http://www.healthyc.com.au/practice-support) or email: [practicesupport@gcphn.com.au](mailto:practicesupport@gcphn.com.au)



## Rotavirus vaccine schedule change

Public Health Staff Specialist Dr Paul Van Buynder is distributing information to practices, about the NIP switching in Queensland from Rotateq to Rotarix in July. He has provided important advice about vaccine availability and different dose schedules, to avoid confusion in the first few months. Information is available that sets out the possible scenarios and the required action which can be printed to refer to during the changeover period. <http://bit.ly/2rN4EaK>

## Hepatitis B vaccine

Hepatitis Queensland has released information for health professionals, about the current global shortage of Hepatitis B vaccine, which may affect the supply of adult formulation hepatitis B vaccine in the private market. There are however, no anticipated shortages of hepatitis B vaccine supply for government funded programs.

Gold Coast Primary Health Network Area				
Notifiable diseases	April 2017	April (5 Yr Mean)	YTD 2017	Total for 2016
<b>Vaccine Preventable</b>				
Measles	-	<3	3	-
Pertussis#	14	26	59	269
Rubella	-	-	-	-
Influenza (Lab confirmed)	62	38	405	2350
Mumps	<3	<3	<3	7
Varicella	62	42	324	976
<b>Bloodborne</b>				
Hepatitis B (Newly Acquired)	-	<3	<3	4
Hepatitis B (Unspecified)	4	5	37	121
Hepatitis C (Newly Acquired) *				
Hepatitis C (Unspecified) *				
<b>Gastrointestinal</b>				
Campylobacter	65	37	306	710
Cryptosporidiosis	15	15	82	228
Hepatitis A (All)	-	<3	<3	9
Rotavirus	10	8	34	98
Salmonellosis (All)	52	42	244	506
<b>Sexually transmitted</b>				
Chlamydia (All Forms)	225	219	1257	3007
Gonorrhoea (All Forms)	63	33	266	608
Syphilis (Infectious <2yr dur)	10	4	29	47
<b>Arboviral disease</b>				
Ross River Virus	20	27	53	108
Barmah Forest Virus*	<3	8	11	12
<b>Other diseases</b>				
Q Fever	-	<3	<3	10
Legionella	-	<3	<3	3
Meningococcal (Invasive)	<3	<3	<3	4
Pneumococcal (Invasive)	<3	<3	6	22

\* Caution should be used when making historical comparisons of BFV cases due to the high number of false positive notifications related to a commercial serology kit. # Caution should be used when interpreting Pertussis notifications due to changes in notification criteria in 2013. Data Extracted May 15 2017 Qld Health NCOS database

**For immunisation advice contact:**  
The Gold Coast Public Health Unit.  
P: 07 5687 9000 F: 07 5687 9113  
Email: [gcpहुdc@health.qld.gov.au](mailto:gcpहुdc@health.qld.gov.au)

## In Brief

### Receptionist forum June 22

Practice reception staff are invited to attend this Gold Coast Primary Health Network forum, *Your Success Depends on You*, from 6pm-8.30pm on June 22 at the Gold Coast Arts Centre. Topics covered will include the importance of learning and enhancing your skills, privacy and confidentiality and cancer screening.

To register or for more information visit: [www.healthyc.com.au/ReceptionStaffForum](http://www.healthyc.com.au/ReceptionStaffForum)

### Chronic condition framework

The COAG Health Council have approved the National Strategic Framework for Chronic Conditions. The Australian Government Department of Health says the framework provides national direction for a broad range of chronic conditions, by recognising that there are often similar underlying principles for the prevention and management of many chronic conditions. It will better cater for shared health determinants, risk factors and multimorbidities across a broad range of chronic conditions. To read visit: [www.health.gov.au/internet/main/publishing.nsf/Content/nsfcc](http://www.health.gov.au/internet/main/publishing.nsf/Content/nsfcc)

# Aged Care

## Aged care resources

Australia is a world leader in providing evidence-based support for palliative care in aged care and to ensure that guidance is current, readily available and easily accessible, a new resource, PalliAGED has been developed by CareSearch, funded by the Australian Government Department of Health.

Built by clinical experts, academics, peak bodies and those providing direct care, palliAGED houses an Evidence Centre with a number of evidence resources (including Evidence Summaries and pathways to existing clinical evidence through Clinical Links).

Evidence Summaries collate the latest high-level evidence on a range of care and service topics.

Each of these pages has a companion page in the Practice Centre that highlights how the workforce can use this evidence in their practice with links to tools and resources. It makes the evidence active.

The Practice Centre also houses the palliAGEDgp app and the palliAGEDnurse app, ensuring that these resources continue to be available to the aged care industry and the primary care sector.

palliAGED can be found at [www.palliaged.com.au](http://www.palliaged.com.au).

Links to palliAGED and other useful aged and palliative care resources are also available on the Gold Coast Primary Health Network website: [www.healthyc.com.au/Resources/Aged-Palliative-Care.aspx](http://www.healthyc.com.au/Resources/Aged-Palliative-Care.aspx)



## GP wanted at Varsity Lakes

### Take the stress out of your consulting days - work life balance

Are you a GP that is looking for a lifestyle change? Do you want that happy work/life balance? Are you wanting more time with your patients with no time restraints? Then we want you.

- family owned practice – patient base increasing daily
- nursing support – patient's triaged prior to GP consults
- administration support
- attractive remuneration suitable to your needs
- allied health support
- parking on site
- close to Bond University and Gold Coast Surgical Hospital
- 10 mins to the beach
- close to Varsity College, Queensland's biggest public school
- patient base preferred, but not essential
- GP needed 3-4 days a week (weekends available)

**Contact:** Email: Marian (PM) – [admin@varsityfamilypractice.com.au](mailto:admin@varsityfamilypractice.com.au)  
Phone: 07 55 758 155. Website: [www.varsityfamilypractice.com.au](http://www.varsityfamilypractice.com.au)

## Registered/practice nurse required

The Gold Coast Medical Centre, is a small, GP-owned medical centre with three GPs, awarded the AGPAL Solo General Practice of the Year for 2013-2014/15 and prides itself on personalising every patient's experience. We are seeking an experienced, proactive and committed registered/practice nurse to join our team for an immediate start.

- minimum 30 hours per week (possibility of more depending on experience)
- excellent opportunity to utilise and develop your clinical and management skills
- be part of a dynamic and caring team

### Duties and responsibilities will include:

- chronic disease management – care plans and health assessments
- assisting doctor with minor procedures
- immunisations
- experience using Pencil and Best Practice software is an advantage
- applicants need to be a team player

**Contact:** Email your expression of interest together with a cover letter and CV to [info@goldcoastmedicalcentre.com.au](mailto:info@goldcoastmedicalcentre.com.au) and [zabihi@yahoo.com](mailto:zabihi@yahoo.com)

## VR position at Coomera Village Medical Centre

- 15 minute appointments
- RN support
- AGPAL Accredited
- pathology onsite
- mental health nurse, dietitian and physio onsite
- excellent remuneration
- close to excellent private and public schools

**Contact:** Jagoda [coomeramedical@bigpond.com](mailto:coomeramedical@bigpond.com) or 07 5580 3877/0420 375 767

## Practice nurse needed at 19th Avenue Family Practice

19th Avenue Family Practice is looking to add an experienced practice nurse to our very tight knit team.

- long-established family practice in Elanora
- pride ourselves on offering services that cover all areas of general practice
- private billing practice
- long standing and ever-expanding patient base

If you are seeking a part-time role in a diverse busy practice please send through your application.

**Contact:** Practice Manager Nicole Holland at [famprac19@gmail.com](mailto:famprac19@gmail.com) or phone 07 5535 7611.

## Locum GP required Robina Family Medical Centre

Locum needed for busy general practice in Robina, July 31 - August 4. Fantastic location. Excellent facilities and support staff.

**Contact:** Lee Ward [GM@robinafamilymedical.com.au](mailto:GM@robinafamilymedical.com.au) or phone 07 5689 1212

## RN wanted in Robina

We are seeking an enthusiastic, proactive RN with minimum two years general practice experience.

- three days per week (will look to increase with business growth)
- chronic disease management
- care plans health assessments
- childhood immunisations
- wound care
- cold chain management
- assist minor procedures
- monitor/ordering stock
- two GP family-owned practice, 12 months old and well equipped.

**Contact:** Practice manager on 0414 433 895 or email:

[practicemanager@rvmc.net.au](mailto:practicemanager@rvmc.net.au)

## RN required in Burleigh Heads

We are looking for an RN who would be happy to work three days per week for five weeks from mid-June and then one day per week, plus relieving afterwards. We are a fully accredited general practice with a great team of RNs (who all need holidays!)

**Contact:** Jo Fowler 07 5576 5832 or [jo.fowler@bfmed.com.au](mailto:jo.fowler@bfmed.com.au)

## Full-time VR GP position available in Burleigh

We are a well-established, busy Burleigh medical centre looking for a VR GP to replace a longstanding female GP. We require an enthusiastic, caring and professional GP to join our team of five doctors and take over the care of a large number of patients.

- doctors have full autonomy over (appointment book, hours worked etc.)
- 70 per cent of billings - generous guaranteed minimum will be available to the right candidate.
- close to Robina Town Centre, Bond University and beaches.

More information available: [classicwayfamilypractice.com.au](http://classicwayfamilypractice.com.au).

**Contact:** 07 5568 0600 or email [classicway@bigpond.com](mailto:classicway@bigpond.com)

## RN wanted at Robina Bulk Billing Medical Centre

We are seeking an experienced and motivated registered nurse (RN) who will possess the following attributes:

- RN 5+ years clinical experience/General Practice
- enjoys working with GPs
- able to demonstrate leadership and work with a high calibre collegiate healthcare team
- experience with Best Practice software/desirable
- Care Plans and Health Assessments

This position reports to the practice manager.

**Contact:** [lizz.csanyi@robinamedicalcentre.com.au](mailto:lizz.csanyi@robinamedicalcentre.com.au) or 0404 283 371.

## VR/non VR GP required in Nerang

A practice in Nerang is seeking a VR/non VR part-time GP.

- fully accredited
- flexible hours to suit you
- surgery just one year old
- excellent, friendly work environment
- onsite pharmacy and pathology

**Contact:** Rhonda Hegarty. Email your CV to [nffpdoctors@gmail.com](mailto:nffpdoctors@gmail.com) or call 07 5596 1333.

## Nurse wanted at Paradise City Medical Centre

Paradise City Medical Centre is seeking a nurse with experience in a GP clinic environment and management plans.

- casual role, 24 hours per week
- must be available to start ASAP
- excellent location
- no stress environment
- working alongside one doctor only
- good pay rate

**Contact:** Paradise City Medical Centre 07 5539 8200 or

[reception@paradisecitymedical.com.au](mailto:reception@paradisecitymedical.com.au)

## GP required in Ashmore

A full-time/part-time GP is required for a busy GP/Skin Clinic in Ashmore. We are seeing someone with a strong interest in diagnosis, detection and treatment of skin cancers.

- mixed billing accredited practice
- RN support
- great working environment
- friendly experienced reception staff
- excellent remuneration

**Contact:** The practice manager on 07 5539 4185/0401 031 785 or [acmed@bigpond.net.au](mailto:acmed@bigpond.net.au)

## Place a free job notification

To place your listing on the HealthyGC website. Go to [www.healthygc.com.au/professionaljobs](http://www.healthygc.com.au/professionaljobs) (Listing also included in *Generally Speaking*.)

Alternatively email [communications@gcphn.com.au](mailto:communications@gcphn.com.au)

**Word Count:** 75 words **Layout:** Dot points

# What's On

Gold Coast Primary Health Network does not endorse any events listed below that are provided by external agencies. Details are provided for information to practices and patients. Full details available at [www.healthycg.com.au/events](http://www.healthycg.com.au/events)



## PLEASE NOTE

Events organised/supported by Gold Coast Primary Health Network (GCPHN) for practices are highlighted in the blue boxes. Details are available at:

[www.healthycg.com.au/professionalevents](http://www.healthycg.com.au/professionalevents)

**June 8**  
**GCPHN Professional Event**  
**Foot Health Assessment Program**  
8.45am - 4.30pm, GCPHN Robina. Organised by the Benchmark Group, this program is for health professionals and others working within Indigenous Health.

**June 8 2017**  
GPGC Business Masterclass

Musculoskeletal Workshop

safeTALK ( Suicide Alertness for Everyone) Workshop

Circle of Security Parenting Programs

Australian Breastfeeding Association Support Group

Turning Pain into Gain - Northern Patient Social Group

123 Magic and Emotion Coaching

**June 10 2017**  
Beyond All Limits - ADHD Conference

GP Education Wonderland Conference

**June 12 2017**  
Free Carer Support Workshop

Sunshine PlayCommunity

**June 13 2017**  
Early Parent Group

Harrison's Little Wings

**June 13 2017**  
Dementia Essentials: Provide support to people living with dementia (day 1 of 3)

**June 14**  
**GCPHN Professional Event**  
**Better Pain Management**  
6pm-8.45pm, GCPHN Robina.  
For GPs and allied health professionals. Covering paediatric persistent pain services, medicinal cannabis, improving return to work outcomes.

**June 14 2017**  
Diabetes: What you need to know in 2017 (Day 1 of 3)

**June 15 2017**

Sensory Approaches for AOD Practice

Circle of Security

Turning Pain into Gain - Southern Patient Social Group

123 Magic and Emotion Coaching

**June 16 2017**  
"Bump" for young mums

**June 19 2017**  
Sunshine PlayCommunity

**June 20 2017**  
Harrison's Little Wings Parenting Programs

Early Parent Group

**June 21 2017**  
Galumph Play Community Parenting Programs

**June 22 2017**  
**GCPHN Professional Event**  
**Receptionist Forum - Your Success Depends On You**  
Gold Coast Arts Centre, 6.30pm - 8.30pm  
For General Practice reception staff. Topics will include confidentiality and privacy.

**June 22 2017**  
Australian Breastfeeding Assoc. Support Group  
Antenatal Shared Care Forum

**June 24 2017**  
2017 Sydney Robotics Summit

**June 26 2017**  
Communicable Diseases Control Conference 2017

**June 29 2017**  
**GCPHN Professional Events**  
**Benchmark Nutrition Support Program**  
8.45 - 4.30pm, GCPHN Robina  
Provide skills for health professionals in relation to nutrition and dietary management.

**July 5 2017**  
Titans NAIDOC Event

**July 9 2017**  
PHN Conference: Transforming healthcare together

**July 12 2017**  
**GCPHN Professional Event**  
**Benchmark Aural Health Course**  
8.45am - 4.30pm, GCPHN Robina  
A short course designed to develop the knowledge and skills required for clinicians to safely assess the aural health of individuals.

**July 12 2017**  
Better Living With Your Lung Disease Patient Seminar

**July 13 and 14 2017**  
**GCPHN Professional Event**  
**Benchmark Wound Closure/Suturing Course**  
8.45am - 4.30pm GCPHN Robina  
This course is designed to develop the knowledge and skills required for practice nurses to safely assess the need for and perform wound closure in a variety of settings.

**July 18**  
**GCPHN Professional Event**  
Immunisation Back to Basics  
8.30am-4.30pm, Robina  
For nurses new to general practice (within the last six months) with immunisation responsibilities

**GCPHN Professional Event**  
**DATE CLAIMER: GP TRAINERS**  
**Managing workload when taking students and the art of influence**  
July 26, 6:30pm-9pm  
Bond Institute of Health and Sport  
Details available soon.

[www.healthycg.com.au/events](http://www.healthycg.com.au/events)



Australian Government

**phn**  
GOLD COAST

An Australian Government Initiative

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Supporting GPs and General Practice  
**GPGC**  
Healthy General Practice Healthy Gold Coast

**Editorial deadline:**  
June 15, 2017

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