

General Practice Update

Newsletter of the Western Health General Practice Liaison Unit

January 2015

Support via phone for General Practice: Diabetes and Orthopedics

Western Health have introduced clinical support for general practice for two of our busiest units. The clinical support programs provide GPs and practice nurses with direct access to the Diabetes and Orthopaedic units via dedicated mobile numbers. Units are able to provide advice and guidance on a range of clinical queries related to the speciality.

Orthopaedic hotline - 0402 968 483.
Monday to Friday 9am-5pm.

Clinical Diabetes Support - 0481 014 496
Monday to Thursday 8am -5pm
Friday 8am -7pm
Saturday 8.30am -12.30pm

Please note this service is for clinical queries only. If you have a question regarding an outpatient appointment please contact outpatients directly, as the medical staff on the hotline will not be able to assist with these queries.

Adult Outpatients 8345 6490,
Women's Clinic 8345 1727
Paediatric Outpatients 8345 1691

In this edition

New Victorian Access Policy for Specialist Clinics	2
Updates on services and referrals	4
Moving House	5
Stress MIBI—direct referrals to Cardiology for abnormal results	6
Clinical Updates—Diabetes	7
Pharmacy Medication summary — sent automatically	7

Receive General Practice Updates by email - sign up now!

To have the General Practice Update conveniently sent directly to your inbox please complete the details below and fax to 8345 1180, or email gp@wh.org.au.

Please note your privacy is assured. Your details will not be shared and will only be used by the General Practice Liaison Program.

Name: _____ Email: _____
Practice: _____ Phone number: _____

- Yes, please sign me up to receive the newsletter via email as an individual
- Yes, please sign me up to receive the newsletter for my practice (the practice will no longer receive printed copies)

New Victorian Access Policy for Specialist Clinics

GPs will start to see some differences in the communication received from Western Health specialist clinics. The changes in communication processes, as outlined below, are a result of the implementation of the Department of Health's *Specialist Clinics in Victorian Public Hospitals: Access Policy, released 2013*.

Key points for GPs

Referrals to specialist clinics should contain all the relevant demographic and clinical information as well as results from preliminary investigations. Such referrals can be efficiently triaged for urgency and added to a wait list, and can reduce patient waiting times.

Specialist clinics should communicate with referrers about referrals and the outcomes of specialist reviews within set time frames, which will help with ongoing care management in the community.

The Policy has three main areas of focus:

- **Timeframes** for the completion of key processes relating to specialist clinics
- **Increased data transparency** - implementing a centralised monitoring of access to specialist clinics and other aspects of service performance, hopefully leading to the government releasing information about specialist clinic waiting lists
- To **improve communication between referrers and clinics** in a way that manages expectations and is beneficial to both parties

Timeframes for implementation

The Policy has a two year implementation phase with full compliance expected by all health services by **1 July 2015**. As outlined in the table below Western Health has begun implementing the changes. Western Health is committed to keeping you informed of the changes as we move towards full implementation of the Policy.

What does the Policy mean for you and your patients?

- Clear minimum standard for all referrals
- Clear expectations regarding timelines for processing referrals
- Clear expectations regarding when to expect communication regarding outcome of referral
- Improved access to pre-referral information including pre-referral guidelines
- Improved communication from specialist clinics following appointments

Major changes at Western Health in line with the Policy

Referrals for specialist clinics **must** contain all the information outlined below.

Patient demographic information	Name, contact details, date of birth, Medicare number, Indigenous status and interpreter needs
Clinical information	Reason for referral Presenting problems Preliminary diagnosis Physical examination results Management to date and response to treatment Relevant investigation results Relevant medical and social history
Referrer details	Name, contact information, referrer provider number and signature
Referral details	Date of referral, name of specialist clinic, if known and name of specialist to whom the patient is being referred. A named specialist is required for all referrals to MBS clinics

As per the Policy, referrals that don't include all the information as outlined above will be returned to the referring doctor with a request for more information. Referrals that are awaiting further information will remain 'open' for 30 days. If a new referral with the requested information is not received by the Specialist Clinics within 30 days the referral will be not accepted.

Access Policy for Specialist Clinics cont.

What you can expect from Western Health

Key specialist clinic activity	Details	Timeline for implementation
Each specialist clinic should have designated staff available to respond to information requests from referrers	Contact details for Outpatients Adult Outpatients Ph 8345 6490 Women's Clinic Ph 8345 1727 (press 7 for GP priority) Paediatric Clinic Ph 8345 1616	Implemented
Specialist clinics should have user-friendly and up-to-date information on their websites about referral requirements and services offered	GP Integration page on Western Health website www.westernhealth.org.au/HealthProfessionals/ForGPs/ Development of referral guidelines	In progress In progress
Clinical prioritisation should occur within five days of receiving a complete referral, with referrals categorised as either 'urgent' or 'routine'	Referrers will be sent notification of receipt of referral Referrers will be sent notification of the patient's appointment or that they have been placed on waiting list as either 'urgent' or 'routine' see below	Implemented Implemented
Specialist clinics should contact the referrer and acknowledge a referral within 8 days, and request any additional diagnostic tests or information at this time	Referrers will be sent a request for more information to be able to accurately triage a referral within 8 days If further information is not received within 30 days the referral will be not accepted	Implemented Implemented
Urgent cases are to be seen within 30 days	Cases that are triaged as urgent (Category 1) will be seen within 30 days of receiving referral. Referrers will be notified of appointment	Commenced – completion June 2015 Implemented
Routine cases are to be seen on a first on, first off basis	'Routine' is classified as any category that is not urgent (Category 2 and 3)	June 2015
Specialist clinics should send a summary within 5 days of the initial assessment appointment and within 5 days of the discharge appointment	An assessment in Specialist Clinics may occur over several appointments.	June 2015

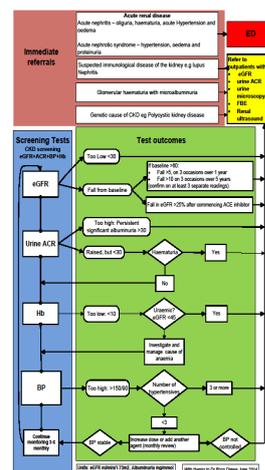
For more information

Please contact the General Practice Integration Unit on 8345 1735 or email gp@wh.org.au or visit the Department of Health to view the access policy <http://docs.health.vic.gov.au/docs/doc/Specialist-clinics-in-Victorian-public-hospitals:-Access-policy>.

Updates on services and referrals

Chronic Kidney Disease pre-referral guidelines

The Nephrology team at Western Health, with the assistance of local GP Dr Ross Drewe, have developed some pre-referral guidelines for GPs to assist with referring Chronic Kidney Disease patients to Western Health. The guidelines outline the work up and investigations required before referral to Specialist Clinics. The document also highlights symptoms that require immediate referral to ED. Western Health asks GPs to please review the guidelines before referring a patient for Chronic Kidney Disease. The guidelines can be accessed via the website [http://www.westernhealth.org.au/HealthProfessionals/Referrals/Pages/Adult Womens referrals M P.aspx](http://www.westernhealth.org.au/HealthProfessionals/Referrals/Pages/Adult_Womens_referrals_M_P.aspx)



Rapid Access to Gastrointestinal Endoscopy (R.A.G.E) Pathway

Western Health has developed a pathway to assist GPs to refer patients who meet the criteria for an urgent (within one month) Gastrointestinal Endoscopy. Two pathways have been developed:

- R.A.G.E pathway for patients **with** overt gastrointestinal bleeding
- R.A.G.E pathway for patients **without** overt gastrointestinal bleeding

These pathways assist GPs to identify those patients who require rapid access to gastrointestinal endoscopy. For these patients a R.A.G.E referral form needs to be submitted. This form assists us to best determine the nature of the procedure required; the peri-procedural issues to be addressed including comorbidities and medications that may increase bleeding risk; the most appropriate site among our campuses to perform the procedure and to determine the most suitable bowel preparation.

The R.A.G.E referral form is available in Medical Director and Best Practice compatible templates as well as a word version and can be downloaded from the website <http://www.westernhealth.org.au/HealthProfessionals/ForGPs/Pages/Endoscopy.aspx> along with the pathways.

Patients who do not meet the R.A.G.E criteria should be referred to Gastroenterology Specialist Clinics for review.

Early Pregnancy Assessment Service ceased

Western Health have made changes to the way we respond to women with issues in early pregnancy. The **Early Pregnancy Assessment Service has ceased**, instead patients should present to Sunshine Emergency Department with any relevant scans etc. for assessment by the Obstetric and Gynaecology Registrar.

Psychiatric Referrals

Western Health does not offer any outpatient psychiatric services. However, some GPs are still referring patients to Adult Specialist Clinics. Outpatient Psychiatric services are provided by the Area Mental Health Services. Referrals from GPs can be made to these services via their central triage line 24 hours per day, 7 days per week:

- Midwest Area Mental Health Service 1300 874 243
- South West Area Mental Health Service 1300 657 259

New check in system for Specialist Clinics at Sunshine Hospital

A new queue management system (QMS) has been installed at Sunshine Specialist Clinics to improved patient flow. By checking in through the kiosks patients no longer have to queue to notify the staff they have arrived for their appointment and once checked in, the kiosk directs the patients to the correct Pod. Patients check in for their appointments by swiping their Medicare cards or scanning a barcoded letter via kiosks located in the foyer. Patients can choose from 12 languages. By checking in using a Medicare card Western Health can ensure that the correct patient is being seen and that Medicare card details currently recorded for the patient are correct. GPs can help streamline this process for patients by providing correct Medicare card details including the date of expiry **DD/MM/YYYY (with DD being last day of the expiry month)** in referrals to provide a smooth check in process for patients.



Updates on services and referrals cont.

Referrals now accepted from GPs for EMG

Western Health has commenced three EMG testing clinics per week at the Footscray campus and referrals are welcome from GPs. It is hoped to extend the service to Sunshine later this year. EMG and EEG referrals are at no cost to the patient.

Referrals should be made using the Neurophysiology referral available from the website <http://www.westernhealth.org.au/HealthProfessionals/ForGPs/Pages/Investigations-and-results.aspx>. To request a referral pad please contact the Neurophysiology Department on 8345 6570.

Introducing Bridging the Gap

Bridging the Gap is an innovative program aimed at improving health care and health outcomes for families of refugee background. The program is being undertaken in Melbourne's west and south-east by a partnership of 11 organisations including Murdoch Childrens Research Institute, Victorian Foundation for the Survivors of Torture (Foundation House), Western Health Maternity Services and City of Wyndham. The program is focusing on maternal and child health and maternity services co-designing new models for more integrated services for refugee families.

BRIDGING THE GAP
PARTNERSHIPS FOR CHANGE IN REFUGEE CHILD & FAMILY HEALTH

Two Bridging the Gap projects in the west are underway:

Healthy Happy Beginnings - brings together midwives, maternal and child health nurses, an interpreter and a Refugee Family Mentor to provide community-based pregnancy care and information in a group setting for Karen women from Burma, located in Wyndham.

Appropriate antenatal pathways at Sunshine Hospital – this initiative is designed to triage refugee women into caseload midwifery care at Sunshine Hospital to ensure greater continuity and community-based care for these women and their families.

How you can help

Better identification of women of refugee background is fundamental to this project. The information that enables easy identification of these women is the inclusion of the following data items in referrals:

language spoken — interpreter required — country of birth — year of arrival

Western Health strongly encourages GPs to include the above points in their referral to maternity services to enable these women to be easily identified.

For more information on the Bridging the Gap project visit the website <http://www.mcri.edu.au/11405.aspx>

Changing Times at Western Health

2015 will be a year of significant change for Western Health with the opening of new critical care services at Sunshine Hospital enabling a realignment of services across both Footscray and Sunshine Hospitals.

Many wards and clinics will be moving to new sites or new locations within the same hospital. These changes allow us to maximize the Acute Services Building at Sunshine Hospital and support the new critical care services with supporting services.

We will be providing a comprehensive list of locations and contact details for all of our services across Footscray and Sunshine Hospitals to GP clinics in the near future and will be updating contact details on our website regularly.

Outpatient clinics will be mostly remaining in the same locations.

For any enquiries please contact the General Practice Integration Unit on 8345 1735 or email gp@wh.org.

Stress MIBI at Western Health

Direct referral to Cardiology for abnormal results

What is a stress MIBI?

Myocardial perfusion (MIBI) scan is a Nuclear Medicine test which assesses the presence and extent of cardiac disease e.g reversible ischaemia, previous infarct, left ventricular systolic function. Western Health employs state-of-the-art Nuclear Medicine equipment to perform MIBI scans. The scanner allows for faster, more thorough imaging with improved patient comfort and reduced radiation dose. At Western Health we have the added diagnostic benefit of being able to perform CT calcium scoring in conjunction with the MIBI scan.

When should you order a stress MIBI?

There are a number of clinical scenarios where a stress MIBI may be helpful. For patients with:

- cardiac sounding chest pain, shortness of breath or ECG abnormalities
- monitoring patients with prior coronary artery disease

A stress MIBI may also be ordered as part of workup for surgery. Patients who present to ED with a cardiac presentation may have follow up with an outpatient Stress MIBI recommended by the ED physician. Western Health has recently changed their process to ensure that for these patients a GP referral is not requested.

What is the cost for the patient?

Stress MIBIs performed at Western Health are bulk billed so there are no out of pocket expenses for your patient.

Where are the stress MIBIs performed?

Stress MIBIs are conducted at both the Sunshine and Western Hospital campuses. As with all nuclear medicine exams undertaken at Western Health Stress MIBIs are performed under the supervision of a Nuclear Medicine Physician and in the safest possible environment. Medical emergency response teams are available on site in the event they should be required.

How are abnormal results followed up?

Western Health Nuclear Medicine has recently introduced a new pathway for MIBI scans to improve patient outcomes with a direct referral pathway into Cardiology Outpatient services for follow-up of abnormal results. Patients who have an abnormal stress MIBI result will be referred directly to Cardiology for follow up in Specialist Clinics.

As the referring doctor you will be notified of the result and whether a referral has been made. If you would prefer the patient to be followed up elsewhere or by a private cardiologist you can contact the Specialist Clinics to cancel this appointment.

How do I refer?

Via fax: Fax referrals are preferred using the Western Health Medical Imaging referral form. These forms are compatible with printing direct from Medical Director. To order copies of the referral form please phone 8345 6234 or you can download from here http://www.westernhealth.org.au/Services/Radiology/Health_Professionals/Pages/Referrals.aspx.

Referrals should be faxed to **8345 1165**.

Via phone: call **8345 6234** and press 3 to access the Health Professional priority line. Please indicate if the request for a MIBI is urgent as we will prioritise the tests to be performed within 2 weeks.

Questions?

You can contact the Nuclear Medicine team if you have any questions
Dr Peter Santos 0412084733 or Melanie Tempest 83450553

Clinical updates

Type 2 Diabetes update by Dr Rosemary Wong



Approximately 50% of patients with type 2 diabetes (T2DM) will require insulin 6 years after the diagnosis, due to beta-cell failure. Once patients are on maximal oral hypoglycaemic drugs, and:

- **HbA1c persistently 8-9%**, despite efforts at making healthy lifestyle choices, they should be commenced on insulin. Single daily Lantus insulin is a good way to start, eg 6 units at bedtime. At one weekly intervals increase this dose by 2 units until fasting glucose is between 5-7. Encourage home blood glucose checks randomly during the day including 2-hour post-prandially. If post-prandial hyperglycaemia remains a problem, critically reassess their diets, and consider pre-mixed insulins BD, eg Novomix 30 or HumalogMix30.
- **HbA1c persistently >9%**, despite efforts at making healthy lifestyle choices, they should be commenced on pre-mixed insulins BD, eg Novomix 30 or Humalog-Mix30, as post-prandial hyperglycaemia is often present.

For further advice, please call the Endocrine Registrar via Switchboard, 8345 6666, or the Diabetes Clinical Support Line 0481 014 496

Revised Diagnostic Criteria for Gestational Diabetes for Women Attending Western Health by A/Prof Glyn Teale

Following a recommendation from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists, revised diagnostic thresholds for gestational diabetes will be used from January 1st 2015 for all women attending for antenatal care at Western Health.

A diagnosis of GDM will be made if one or more of the following glucose levels are elevated:

- fasting glucose ≥ 5.1 mmol/L
- 1-hr glucose ≥ 10.0 mmol/L
- 2-hr glucose ≥ 8.5 mmol/L

The indications for, and timing of a glucose tolerance test remain unchanged. i.e. routinely at 26-28 weeks gestation.

An early GTT is indicated if a woman has

- previous gestational diabetes
- previous big baby >4kg
- Polycystic Ovarian Syndrome
- glycosuria
- a strong family history of diabetes
- Aboriginal or Torres Strait Islander background

Dorevitch Pathology is aware of this change and communication is occurring with other pathology providers.

As this change is implemented Western Health asks that GPs please be vigilant in interpreting the results of a GTT.

Pharmacy medication summary—sending automatically

As part of the eHealth Gateway development Western Health commenced sending pharmacy medication summaries automatically to GPs on Monday 19 January. The new process allows Western Health to send the summary to the GP as soon as it is loaded into the Digital Medical Record. This will increase the timeliness of the delivery.

GPs who are part of the electronic messaging pilot with Western Health will receive these notifications direct to their practice system via Healthlink. Other GPs will receive the summaries via fax. Western Health hopes to commence sending discharge summaries automatically in the near future and to expand the eHealth pilot to other practices.