

P.S.

QUARTERLY NEWSLETTER FOR PRACTICE STAFF | JUNE 2009 ISSUE 3

IDGP Highlights

H1N1 Influenza and Infection Control Updates—

The Practice Support Team has run five H1N1 Influenza and Infection Control Updates in June. These sessions have been open to the entire general practice team. The updates have been well attended. Further updates will be held.

Workforce Audit 2009 —

The Division recently completed a General Practice Workforce Audit. The audit collected data on GP numbers, GP average working hours and the average age of GPs in the Illawarra. The final report will be released in early July.

LMP— Lifestyle Modification Program.

After 3 months, participants enrolled in the first LMP program are enjoying positive results in their efforts to minimise the risk of Type 2 Diabetes: a reduction in waist circumference (upto 8cm) and weight (up to 5.7kg) as well as healthy eating and physical activity practices.

A second LMP Program has started in Wollongong, while a session in Kiama will commence in August. Please forward any referrals for future LMP's now. Contact Lauren Hickson at IDGP on 4220 7624 for further information.

The Clinical Psychology Service —

has appointments available immediately for the new Perinatal Depression service. Please see article on page 7 and enclosed brochure for practices.

IDGP Board —

IDGP board members are Professor John Hogg, Helen Gapps, Kath McCormack, Mark Grimson, Chairperson Dr John McAlpine, Deputy Chair Dr Russell Pearson, Dr Steve Lyon, Dr Rod McMahon and Dr Andrew Dalley.

WELCOME

The warm weather has well and truly left us and we are again faced with the added challenges of the winter months. With the threat from H1N1 and seasonal influenza and the ongoing concern with pertussis it is essential that good infection control practices are adhered to.

The Division has received funding under a national initiative to provide PPE Support Services with the aim of mobilising and preparing General Practice to respond to the current H1N1 influenza risks.

The project includes education and training, resource dissemination, identification of local pandemic planning issues and the provision of support to practices to develop individual plans to respond to H1N1 presentations. Significant work has already been done by the team in these areas however the project will focus our efforts further in the coming weeks. Meanwhile if this is an issue your practice needs some help with please do not hesitate to contact us.

The Practice Support Team would like to thank all practices for their participation in the IDGP workforce audit. The audit highlighted the pressure and the challenges that general practice teams face. The data will be used in planning IDGP services and programs and in lobbying support for Illawarra GPs and general practices.

The new IDGP website has gone live. The general practice section has been developed to provide up to date, relevant resources to assist the entire general practice team. If you have any recommendations or suggestions for improvement for the website please contact the Practice Support team.

Please look out for the following inserts in this issue:

- » [IDGP Website User guide.](#)
- » [Calendar of Division Education Events](#)
- » [CPS Perinatal Depression service](#)

Evaluations from the practice managers focus group were extremely positive. Thank you all who attended. From this focus group we are in the process of developing a format for regular catch up meetings and more frequent practice staff training.

The Practice Support Team would like to welcome Kathy Lymbery to our team. Kathy has experience working as a practice manager in the Illawarra Area and will lend her experience as a practice manager to both the Practice Support Team and to headspace Illawarra.

We hope you find the information in this publication to be useful and any feedback would be greatly appreciated. If you have any comments or suggestions please email them to practicesupport@idgp.org.au or phone 4220 7600.

Chris, Margaret, Kristie-Lee, Jessica Lee, Linda
Your Practice Support Team



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Snippets

How to Protect Yourself from Influenza

- » Cover your mouth when you cough, and wash your hands after.
- » Cover nose and mouth with a tissue when you cough or sneeze. Throw tissue in the garbage bin after use.
- » Wash your hands often with soap and water or use alcohol-based hands cleaners.
- » Surgical masks are recommended if infected and keep 1 metre distance from others.
- » Don't share personal items such as pens.
- » Clean surfaces and items that may be shared such as fridge door, phones, keyboard.
- » Avoid touching your eyes, nose or mouth. Germs spread that way via those areas.
- » If you get sick, stay home from work or school and limit contact with others to avoid infecting them.
- » Practice good health habits – get a good nights sleep, eat well and remain active.

Seasonal Influenza and Infection Control

Every year the flu strains may change and the best way to avoid getting sick from seasonal flu is to visit your general practice and get immunized.

The vaccine is free for everyone aged 65 years and over and for all Aboriginal and Torres Strait Islander people aged 50 years or over or those (ATSI) between 15 – 49 who are at deemed at risk.

www.fightflu.gov.au



- 1 Influenza is a highly contagious and potentially deadly disease that can be spread through coughing or sneezing.
- 2 Influenza is caused by a virus and is not the same as a cold. It can cause serious and debilitating complications such as pneumonia, especially in the elderly and others in the 'at risk' group.
- 3 Influenza causes 2,500 deaths, 80,000 GP visits and 15,000 hospitalisations in Australia each year amongst at risk groups.
- 4 People with a chronic disease have a 40 times increased risk of death from influenza. A combination of heart and lung disease increases this risk 800 times.
- 5 Only 42 per cent of the 'at risk' group under 65 years of age are being vaccinated annually.
- 6 Only 20-50 per cent of health care workers, who are at a greater risk of contracting and spreading influenza, are being vaccinated annually.
- 7 10 per cent of all workplace absenteeism associated with illness is due to influenza.
- 8 Annual vaccination is the single most effective measure to prevent influenza.

When considering flu vaccination health care workers need to consider protecting themselves as well as reducing the risk of transmission to vulnerable people such as neonates and the immunocompromised.

It is essential for health care workers to practice good infection control at all times.

Managing Children with Autism

Sickness can present a challenge for autistic children and their parents.

Much needed routines are disrupted leading to upset. Sensory dysfunction is more likely so that children become hypersensitive or hyposensitive to pain. They may also become non-verbal. These factors make a consultation with an autistic child a potentially challenging experience. Here are some tips to help the practice manage:

- » Encourage patients to ring ahead to find out about likely waiting times
- » Suggest that patients wait in their cars. The car is a familiar non-threatening environment. Phone the parent on their mobile once the GP is ready to see the child.
- » Extra staff eg a practice nurse may be needed in the consultation

- » Identify autistic patients on the practice's daily patient list so staff can be prepared.
- » Encourage parents to book a longer appointment.
- » Follow parents' cues about communicating with the child in a way that is less likely to threaten them.
- » Parents also appreciate being listened to and being given credit for their knowledge about their child's health issues.
- » Don't assume parents need a script for anti-depressants!
- » Suggest the local autism parents support group. Ph 42852393.

For further information on autism go to the Autism Spectrum Australia Website available at— <http://www.autismspectrum.org.au>

Changes to Medicare Australia online Access

From April 2009, health professionals can access Medicare Australia's online services through a single entry point. The new Health Professionals Online Services (HPOS) website will make it easier for you to work with Medicare Australia.

HPOS offers two new services for health professionals:

1. Adding a new Medicare practice location number in real time
2. Receiving bulk bill statements online.
3. Access to HPOS requires a Public Key Infrastructure (PKI) individual certificate which many of you will have requested as part of the E-health PIP requirement recently.

To log on to HPOS, visit www.medicareaustralia.gov.au/providers and click on the Health Professional Online Services (HPOS) link.

Integrated Medicare Easyclaim

For those practices using Pracsoft, the practice support team has a detailed email that can be sent to you, outlining the advantages and costs associated with setting up the new Integrated Medicare Easyclaim.

Medicare 2009 public and provider satisfaction research: Have your say

Medicare Australia will conduct its annual satisfaction research in May/June 2009 to find out what is working and where it needs to improve. The research is conducted by an independent consultant using phone interviews and mail surveys.

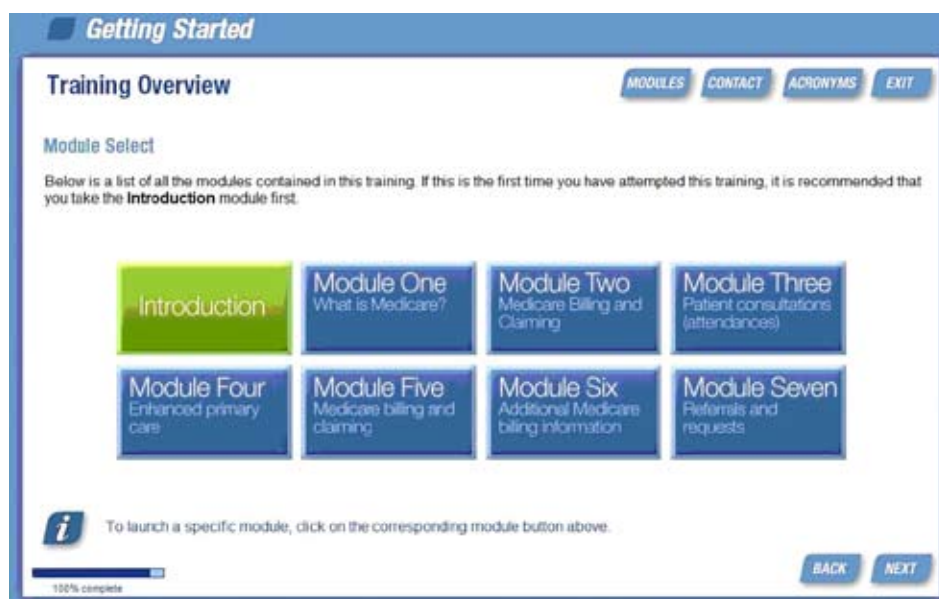
A sample of the general public, pharmacists, aged care professionals, medical and allied health practitioners and practice managers will be included.

The research program is an opportunity to provide feedback about satisfaction with Medicare's various service delivery channels. Practices are encouraged to participate in the research process if approached to do so. Practice questionnaires are estimated to take just 15 minutes to complete. For more information please contact Mike Armstrong on email: mike.armstrong@medicareaustralia.gov.au or on phone: 02 6124 6900.

Medicare Updates

Medicare e-Learning

Medicare e-Learning now available at www.medicareaustralia.com.au/education



Medicare and You – Training for New Health Professionals

This is a FREE self-paced e-Learning program for all new health care professionals that aims to:

- » make it easier for health professionals to access Medicare education
- » improve confidence in using the Medicare Benefits Schedule, and
- » increase awareness of associated rules and regulations.

The program is easy to use, interactive and case based. There are seven modules—each with multiple topics that will take between five and 20 minutes to complete. To get

the most out of this training you will need to actively participate in the e-Learning activities.

| | | |
|---------|---|---|
| MODULES | 1 | What is Medicare |
| | 2 | How to use the MBS |
| | 3 | Patient consultations (attendances) |
| | 4 | Enhanced Primary Care |
| | 5 | Medicare billing and claiming |
| | 6 | Additional Medicare billing information |
| | 7 | Referrals and requests |

Administrative Position Statement

Medicare Australia have introduced Administrative Position Statements, which enable the articulation of a single and consistent Medicare position on matters requiring administrative interpretation.

An Administrative Position Statement (APS) is an authorised and documented position held by Medicare Australia in relation to the interpretation of a specific Medicare Benefit Schedule (MBS) item or in relation to the administration of the MBS, Pharmaceutical Benefits Scheme (PBS) or associated government program, in particular, where there is ambiguity.

Further information about Administrative Statements and their aims is available at <http://www.medicare.gov.au/provider/business/aps/index.jsp#N10009>

Medical Director Price Increase

Medical Director will increase in price from the next renewal date.

The increases are to compensate for the removal of drug company advertising from software due to take effect in the August release.

In addition to the price increase, part-time GPs will be charged at the same rate as full time GPs.

Practices concerned about the new pricing, particularly relating to GPs who do only one or two sessions per week at a practice, should contact HCN to discuss.

Snippets

Gardasil®

Gardasil® is now registered for older age groups.

GARDASIL product information has been updated to include approval for use in women up to the age of 45 years.

HPV Catch up reminder

Young women wishing to access the free cervical cancer vaccine need to have received their first shot by the 30th June 2009 and completed the course by December 2009.

Rotarix®

Rotarix® (Rotavirus vaccine, live attenuated) vaccine pre-mixed presentation now available in Australia.

The rotavirus vaccine, Rotarix, manufactured by GlaxoSmithKline is now available in a premixed presentation that does not require reconstitution.

As with the previous presentation, Rotarix only requires two doses, allowing for early protection against rotavirus.

The first dose of Rotarix can be given between 6-14 weeks of age and the second dose after a minimum interval of four weeks.

Prior to the introduction of rotavirus vaccines in Australia on the National Immunisation Program, rotavirus induced disease accounted for up to half of all hospitalisations of children under five years of age.

Before prescribing, please review Product Information.

Ehealth PIP and ARGUS update

Many of our accredited practices recently applied for the new EHealth PIP incentive which is replacing the existing IM/IT PIP Incentive from August 2009.

Please note that there may be up to 3 months delay processing the Individual PKI certificates due to the large number of applications.

Following representation from local Divisions the Area Health Service has decided to transfer clinical information direct to GPs for downloading into clinical software packages. This marks a significant improvement in relations between Divisions and the Area Health Service which initially had decided on decades old technology called faxing, though this will still be an option.

The messaging system proposed for this is known as Argus.

To support practices implement Argus the IDGP, through OTiS is offering to install Argus at practices for free. Argus will help practices meet e-health PIP requirements and receive Area Health Service communications in the future. OTiS will start to install Argus in July firstly at practices that require Argus to meet their e-health PIP, then at other interested practices.

The next exciting step with the Argus roll-out will be to work with Consultants (Specialists) so their reports can be sent directly into GPs' clinical software, much like pathology results currently are.

Practices that require Argus installed before the end of July to meet the EHealth PIP requirement should contact the PS Team on 4220 7600. Argus will be offered to all General Practices in the near future.

The Doctors Control Panel

The Doctors Control Panel(DCP) alerts a GP using Medical Director to aspects of the patient's medical record that require attention based on recognised guidelines including the RACGP Redbook.

The software was developed independently of HCN and is available free for download from <http://www.pracsoftutilities.com>

The DCP uses a set of configurable rules to determine whether prompts are shown and uses information in the database to determine status. The DCP allows printing of 'data collection sheets', 'Action lists' for the day's appointments and creates reports on basic statistics.

The benefits of implementing the DCP include:

- » Improved adherence with the Red Book Guidelines particularly BP, height, weight and waist measurement.
- » Encouraging the practice to utilize electronic recording of measurements.
- » Reassurance for the GP when the DCP is "green across the board".
- » Increased utilization by the practice of MBS items for prevention and CDM.

The DCP is undergoing continual development and is proving popular with GPs.

It's time to clean up your act!

Keeping your data "clean" is part of good clinical record keeping.

'Clean' data gives you accurate information on your patients and is the foundation of a reliable recall system.

For example: If you searched your database for your diabetes patients would the resulting register show all your diabetes patients? And would all their test results be there?

Data cleansing covers things like:

- » Recording reason for visit using a picklist, not free-texting
- » Changing uncoded diagnoses
- » Deceasing or inactivating patients as appropriate
- » Processing investigation results properly
- » Cleaning up recalls

Remember rubbish in, rubbish out!

The Australian Primary Care Collaboratives program has produced a checklist for chronic disease management which includes steps for cleaning up your disease registers.

If you would like a copy please email practicesupport@idgp.org.au or phone 4220 7600.

Snippets

Family Planning NSW

Family Planning NSW will be holding their third annual Conference and Open Day 2009. The conference will take place at Family Planning NSW, Ashfield on Saturday 15 August 2009. Topics include:

- » Aboriginal Health
- » Erectile Dysfunction
- » Infertility Management
- » Contraceptive and sexual health updates

Register now for an early bird discount! Further information and registration forms can be found at <http://www.fpnsw.org.au/education/calendar/confopen.html>

APCC Collaboratives update

Since July 2008 our 5 Australian Primary Care Collaboratives practices have achieved:

- » A 112% improvement in the no. of CHD patients within the BP target of 130/80 and 47% improvement in the no. of diabetes patients within the BP target of 130/80.
- » A 16% improvement in CHD patients taking aspirin and a 11% improvement in CHD patients taking a statin.
- » A 57% reduction in unmet demand.

Web based Immunisation handbook

The HTML version of the Australian Immunisation Handbook 9th Edition is now live via the web.

NB: this is different to the PDF versions previously available, this is a FULLY online and searchable version of the Handbook.

You can view it at:

<http://www.immunise.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook-home>

This site is maintained by the Department of Health and Ageing.

Accreditation online learning

Online Learning Modules from GPA and AGPAL.

Online learning modules on a wide range of topics are available from both GPA and QIP/AGPAL (June 2009).

For more information please go to www.gpa.net.au or www.qip.com.au

Accreditation

Storage and documentation of S8 Drugs for Accreditation

There has been much discussion regarding S8 medicine storage and disposal and it appears some practices have received some conflicting advice.

The RACGP 3rd Edition Standards for Accreditation (Criterion 5.3.1) states that a practice must ensure that "Schedule 8 medications are stored securely and are only accessed by authorised personnel".

While the criterion is clear, the interpretation can be confusing, as practices also need to comply with NSW legislation.

Storage and documentation

S8 medicines need to be stored securely in a locked cabinet or safe that is fixed to an immoveable structure.

All acquisitions, use, transfers and disposal of the medications must be documented in a bound book with consecutively numbered pages (available from RACGP).

Entries must be written in ink on the day of the transaction, and need to include the date, the name and address of the patient or supplier, the quantity of drug, the progressive balance remaining in stock, and the name and signature of the authorised person who administered the drug or made a transaction entry into the book.

While not legislated, it is considered best practice for a second authorised person to witness any transaction wherever possible.

Each strength of drug needs to be recorded on a separate page and a stock inventory needs to be completed in March and September.

The record book must be kept for two years after the last entry and no transaction can be erased or altered, although corrections can be noted in the margin or as a footnote, as long as it is initialled and dated.

Who can hold the key?

The Pharmaceutical Services branch of NSW Health has advised that it is "the principal GP's responsibility to hold the key to the S8 cupboard within the practice."

However, GPs who wish to delegate this responsibility may do so to other GPs and/

or a registered nurse, but a practice based policy would be required to reflect this delegation.

Where S8s are stored within the doctor's bag then it is the individual GP bag owner's responsibility to hold the key.

It is advised that the key to S8s, whether to the doctor's bag or a locked drug cupboard, be maintained separately to other keys.

The difficulty of holding the key arises where there is no continuity of authorised staff, for example where practices are staffed by part time or casual staff.

In this instance, the Pharmaceutical Services adviser recommends using a key safe to store the S8 drug key, with only authorised GPs and RNs knowing the safe combination.

The practice manager and receptionists should not know the combination of the key safe.

Disposal of S8 Drugs

S8 drugs can be destroyed under the supervision of a police officer, inspector or pharmacist. The pharmacist is not obligated to carry out the destruction but may do so through an agreement with the practice.

Further information about the storage of S8 drugs can be found at NSW Health Guide to Poisons and Therapeutic Goods Legislation for Medical Practitioners and Dentists — (http://www.health.nsw.gov.au/public-health/psb/publications/pdf/poisons_medprac_dentists.pdf).

If you have any questions regarding the NSW legislation, you can contact the NSW Health duty pharmaceutical adviser direct on (02) 9879 3214.

Contact practice support or your relevant accreditation agency for more information.

Snippets

CHOICE Vaccine Purpose Built Fridge Report — AVAILABLE NOW!

The AGPN Vaccine Purpose Built Fridge testing report is available for download from the AGPN website.

Commonly referred to as the "CHOICE Fridge Report" it explains the results from the series of tests which were undertaken on various models of vaccine purpose built fridges.

<http://www.agpn.com.au/site/index.cfm?module=NEWS&leca=63>

Please ensure that you read the cover letter before reading the report.

Immunisation and the GPII scheme

The Illawarra Division of General Practice immunisation coverage rate is 91.6% according to the Feb 2009 quarter recalculation. This ranks us 49th out of 113 Divisions nationally.

Congratulations to all practices who are achieving coverage rates over 90% and therefore qualifying for their Outcomes payment.

If you would like any assistance with GPII, coverage rates, accessing reports or reporting to ACIR please contact practice support.

Reporting to ACIR

Are you still using the purple forms to send your immunisation data to ACIR?

Find out how you can do this electronically using your practice software or online via the ACIR secure site. Contact practice support.

Four year old immunisation and the Healthy Kids Check

Practice support have some bright surgery posters available. Please contact PS team if you would like a copy. We also have extra copies of "Get set 4 Life" to be given out at the Healthy Kids Check.

Practice Nursing

e-learning training package to support item 10997

The e-learning package to support Medicare Item 10997 is due to be completed for release by mid May 2009.

The package will be made available free of charge to all interested practice nurses and Aboriginal health workers until the end of August 2009.

Beyond this point a minimal cost recovery fee will be imposed.

This fee is yet to be determined but it is important to note the project is a not-for-profit venture therefore costs will be determined upon a minimum recovery basis only.

The e-learning training package, which will be available online at RCNA's 3LP website and at Batchelor Institute's dedicated web-learning centre, consists of a pre-requisite foundation module and six disease-specific modules covering the topic areas of arthritis, asthma, cancer, coronary heart disease, dementia and diabetes.

A kidney health module is currently being developed and will be available by the end of May 2009.

Project partners include AGPN, Royal College of Nursing, Australia and Batchelor Institute of Indigenous Tertiary Education. 'AGPN acknowledges the financial support of the Commonwealth Department of Health and Ageing'.

Practice Incentive Program changes— PN PIP

The budget announced changes to a number of PIP incentives, including the PN incentive, whereby payments will now be paid retrospectively instead of in advance.

This will lower the cost of recovering overpayments for these services.

Through the PN PIP, the Department will continue to provide financial support to practices in urban areas with workforce shortages, and practices in rural and remote areas, to employ a practice nurse.

Immunisation

Cold chain process: Daily monitoring of vaccines

The following information is adapted from GPNSW Kiss Guide to vaccine Management Flipchart.

For copies of the Flipchart please contact practice support.

- 1. RECORD** the minimum and maximum temperatures preferably twice per day. Twice daily temperature checks will give you a better indication of problems.
- 2. CHECK** minimum/maximum temperatures twice daily and
 - » on receipt of vaccines, and
 - » last thing Friday afternoon and first thing Monday, if the centre closes over the weekend, and
 - » hourly during outreach clinics, and
 - » every time you open the refrigerator.
- 3. RECORD** comments and any action taken in the temperature chart/log every time the minimum and maximum temperature exceeds the recommended range of +2°C and +8°C, e.g. if restocking or defrosting the refrigerator.
- 4. RESET** to clear the temperature memory after recording the temperature. Never reset unless the temperature has been recorded.
- 5. AND**, if vaccine storage temperatures have been outside the recommended +2°C and +8°C (except for burst of no more than 15 minutes when restocking or stocktaking) quarantine the vaccines and label "Do Not Use" until advice has been sought.

NOTIFY your local public health unit (PHU) as soon as possible during business hours to inform them of the breach and seek advice. PHU Phone 42216700.

Where is your thermometer probe?

If using an external thermometer:

- » the probe needs to be located inside an empty vaccine package with retained product information,
- » label the vaccine package "EMPTY" and place in the centre of the vaccine stock.

Snippets

Wound Management Competencies

The Wound Management Competency Standards for General Practice Nurses are now available on the APNA website.

The competencies were developed as part of the Nursing in General Practice Program at GPNSW and funded by the Department of Health and Ageing.

The standards may be accessed on the APNA website:

<http://www.apna.asn.au/displaycommon.cfm?an=1&subarticlenbr=294>.

Get Set 4 Life Translations now available

The Get Set 4 Life – Habits for Healthy Kids guide provided at the time of the Healthy Kids Check (MBS Items 709 and 711), has now been translated into six community languages: Arabic; Traditional Chinese; Greek; Italian; Spanish; and Vietnamese.

General Practitioners and practice nurses can now access copies of the translated versions of the Get Set 4 Life guide by downloading from <http://www.health.gov.au/epc> or by ordering from National Mailing and Marketing by phone: 02 6269 1000 or email nmm@nationalmailing.com.au

PS... Evaluation

PS has been developed with the aim of becoming a relevant publication that will provide information to assist the entire practice team.

If you have any recommendation for future PS... publications or wish to provide comments about the current PS... issue please contact the practice support team.

CPS Clinical Psychology Program

Bulk-billed appointments are available immediately for a wide range of disorders that are likely to respond to short-term, focused therapy.

The most common diagnoses treated at the CPS include mood, anxiety, somatoform, sleep, and adjustment disorders.

Difficulties related to chronic pain, bereavement and relationship issues are also frequently referred.

We are pleased to advise we are developing a specific program to support psychological treatment for women with peri-natal mental health difficulties. For further information please call the Clinical Psychology Service on 4220 7600.

Please refer to the brochure enclosed with this newsletter.

To refer a patient to our service, please complete the IDGP Referral and Mental Health Care plan (available electronically) and fax to the CPS on 4229 6489.

If you require any further information, contact the CPS on 4220 7600.

Group Treatment Program

As well as offering individual treatment, the Clinical Psychology Service now provides group treatment for depression and anxiety.

This will enable patients to access treatment sooner as well as provide a supportive experience that normalises their problems.

Patients who participate in this group will learn:

- » what causes depression and anxiety
- » behavioural activation techniques shown to reduce depressed moods
- » the role of unhelpful thinking styles
- » how to use mindfulness to reduce anxiety and panic
- » how to realign their direction with what they fundamentally value

Patients will be assessed individually prior to entering the group and continue to be offered further individual therapy after the group if warranted.

The groups are held at IDGP on Mondays 3:00 – 4:30 and are four weeks long, with the Depression and Anxiety modules running continuously one after the other.

Referrals can be made through faxing the Clinical Psychology Service at 4226 9485.



Asthma Assist Asthma Foundation NSW

Asthma Assist is a free information service for people with asthma or who have an interest in asthma.

The information service includes subscription to a bi-monthly e-newsletter 'onAIR', a free Asthma Control Pack and first aid magnet, and access to advice and support from the health professionals on our Asthma Information Line.

You can register for Asthma Assist at the Asthma NSW website at asthmannsw.org.au or over the phone at 1800 645 130.

<http://www.asthmannsw.org.au>



National Diabetes Week 2009

National Diabetes Week will run between 12th to 18th of July.

Each year Diabetes Australia celebrates National Diabetes Week to raise awareness about diabetes in Australia.

The campaign is focused upon educating the Australian population about the risk factors associated with type 2 diabetes and how this disorder can be prevented.

<http://www.diabetesaustralia.com.au/en/News-Events1/Events-Calendar/Events-Calendar1/National-Events/National-Diabetes-Week/>

Education Events

Chronic Disease Management Workshop

The Division will hold a workshop for practice teams that will help them build their capacity to deliver effective chronic disease care. GPs, practice managers, practice nurses and administration staff are invited.

The workshop will be held on June 25, from 6-9pm at the Wollongong Radio Doctor conference rooms 2/26 Ralph Black Dr, North Wollongong. Dinner will be provided.

The program will include tools for teamwork, IM/IT use, business models and links with service providers.

There will be opportunity for practice teams to work on their individual priorities. Keep an eye out for the invitation.

RSVP is essential.

Security Workshop

The IDGP will host a workshop on security later in July (date tba). The practice security session will be presented by Senior Constable Mary Paterson and an IT security session will be presented by the RACGP.

Places are limited to two participants per practice.

If practices have specific issues they would like to see covered in the session please contact the Practice Support Team.

CPR and Other Training in the Wollongong Area

The New South Wales Surf Life Saving run monthly CPR full courses and Updates out of the Wollongong Master Builders Club. The full course costs \$60 and \$35 for a CPR update. Upcoming CPR dates include —

Wed 15 July 2009 | Sat 15 Aug 2009
Wed 16 Sept 2009 | Sat 17 Oct 2009

All courses will run from 9:30am-12.00pm.

For Further information please contact Kevin Rhodes from NSW Surf Life Saving at 02 9984 7188 or enrol online at <http://www.surflifesaving.com.au/>

The Division will also be holding a CPR update in late August specifically for GPs and staff.

Medical Director Training

After the success of the Division's Medical Director Training Sessions in March, a further Medical Director Session is planned for July/August.

The training session will cost \$30 and will focus upon Data Entry, Disease Registers, Recalls, Searches and Cleaning up Data.

The MD Training has been sponsored by GPNWSW. This session won't be suitable for inexperienced MD users.

Important GP event coming up

The Division's Annual Update Seminar will be held on 8th August at the Wollongong Radio Doctor conference rooms, from 12 noon – 5pm.

Invitations with details of the program will be sent to GPs..

AAPM and Medicare are running a FREE E-Seminar

Date: 20th August

- » The Seminar is Free
- » Non-members are welcome to attend.
- » There are no limits on places.

Mental Health, Chronic Disease Management and General Attendances

Please contact practice support or AAPM for a registration form.

AAPM (NSW) Phone: 1800 196679 or visit aapm.org.au

Mental Health Training for GPs

Recent changes to Medicare mean that GPs will need to undertake training in mental health in order to claim full payment for mental health careplans.

GPLearning (RACGP) and the Black Dog Institute are 2 accredited training providers.

The Division is seeking clarification of the training requirements for GPs but we can confirm that we will be holding accredited training later this year.

Education Report

Lifestyle Risk Factor Management 'Bootcamp'



Practice support team members Anne Harding, Kristie-Lee Dubowec, Chris Pitt and Margaret Liackman in bootcamp mode.

In response to the 2008 Practice Staff survey and 2008 Nurse Utilisation Survey the Practice Support Team presented a Lifestyle Risk Factor Management 'Bootcamp' on 25th March 2009. 21 Practice Nurses from 14 practices within the Illawarra attended.

It was an interactive session that aimed to increase the awareness of the real threat posed to patients by Smoking, poor Nutrition, Alcohol, inadequate Physical activity and Obesity.

A Medicare overview was also provided on which items are available to help address lifestyle risk factors. The Lifescripts resource was demonstrated. Strategies and tips that general practice can use to implement LRFM were suggested to help give participants ideas about how and where to begin.

The evaluations and feedback from the Bootcamp were very positive but the hard work begins when theory is put into practice and there needs to be a balance between what should be done and what is actually feasible in your surgery.

Any approach will be more successful if it is backed up by the whole general practice team. A resource booklet was developed for the training session titled "Lifestyle Risk factor Management Resources for Practice Nurses" and is available to all practices on request.

Advising us of changes in your details

An up-to-date database helps us to provide a better service to members.

Please notify the practice support team if you have any changes to:

- » staff
- » practice details eg email addresses.