

C&C DHB Partner Update

January 2011

Capital & Coast DHB will regularly be providing information packs to stay in touch with our colleagues in primary health and to keep everyone up to date with what's going on.

Please help us by distributing this to other Primary Health Care Providers who you think might find this information useful.

This edition and previous editions are available to view on healthpoint.co.nz under the Medical Professional section – News.

Headlines in this edition:

- ***Te Haika (single entry point for referrals to General Adult Mental Health Services, including Transcultural Mental Health Services, Community Alcohol & Drug Services, and Child & Adolescent Mental Health Services) operating 24hrs, 7days a week from 1st February 2011 including all Crisis Calls.***
- ***Attention Deficit Hyperactivity Disorder in Adults (ADHD) referral process and renewal of special authorities***
- ***Proposed Amendments to Regulations under the Medicines Act - Standing Orders (November 2010)***
- ***interRAI access pilot for GP Practices***
- ***Hauora Maori Funding***
- ***Dermatology / Minor Skin Surgery Clinical Pathways Collaborative underway***
- ***C&C DHB Diabetes Health Targets***
- ***Quality and Safety in Healthcare Remote Conference at Capital & Coast DHB on March 3, 2011.***

Attachments to this newsletter are marked as **bold and underlined**

Te Haika (single entry point for referrals to General Adult Mental Health Services, including Transcultural Mental Health Services, Community Alcohol & Drug Services, and Child & Adolescent Mental Health Services) operating 24hrs, 7days a week from 1st February 2011 including all Crisis Calls.

Te Haika is the central point for referrals to Capital & Coast DHB Mental Health Services and is open 24 hrs, 7 days a week from the 1st February 2010.

The following teams:

- The Crisis Assessment and Treatment Team
- The General Adult Community Mental Health Teams
- Maori Mental Health Team
- Health Pasifika
- Community Alcohol and Drug
- Child & Adolescent Mental Health Teams

are now all integrated through a single phone and fax number, and can be contacted at any time from 1st February to discuss both urgent and non urgent cases.

Te Haika dispatches crisis teams when required and can be contacted by telephone (landline or mobile), fax, and email.

Phone (04) 918 2267

Crisis Line 0800 745477

Mobile 027 500 1569

Fax (04) 918 2284

Email TeHaika@ccdhb.org.nz

Attention Deficit Hyperactivity Disorder in Adults (ADHD)

Te Haika is the central point for all referrals to Capital & Coast DHB Adult Mental Health Services. This is a new referral pathway developed as a part of the Clinical Pathways Collaborative (CPC).

Criteria

Patients who may be referred to the Adult Mental Health Team via Te Haika include:

- Patients who have a diagnosis of ADHD over 16 years of age and who need their Special Authority renewed.
- Patients who have a diagnosis of ADHD and need reassessment by a specialist, please specify areas of concern
- Patients who are suspected of having ADHD but need a specialist assessment to make a diagnosis and advise on management.

This referral criteria is in addition to the existing referral criteria (available on <http://www.healthpoint.co.nz/default,134457.sm>).

Process

Referrals can be made to Te Haika via:

Fax (04) 918 2284

Email TeHaika@ccdhb.org.nz
Telephone (04) 918 2267
Mail PO Box 50-215, Porirua

To successfully navigate this pathway the referral will be via the attached **checklist referral forms** (Compass are developing Medtech outbox documents) and accompanied by any psychological assessments and other documentation if available.

Once the Checklist referral form has been completed and sent to us: For Special Authority renewal a reply will be emailed or faxed to you to allow you to proceed with the application. For those requiring assessment Te Haika will be booked as soon as possible. The time to appointment will depend on acuity and preference (likely to be 10-20 days).

See the attached checklist referral form and special authority renewal form.

Also available on Healthpoint

<http://www.healthpoint.co.nz/default,170842.sm?medpro=show&solo=mpScopeOfServiceList&index=2>

Proposed Amendments to Regulations under the Medicines Act - Standing Orders (November 2010)

For those of you who are not already aware, we would like to alert you to some proposed changes regarding the requirements for countersigning records of supply or administration of a medicine under a standing order. Currently the issuer of a standing order (the authorised prescriber) is required to countersign *all* records of supply or administration of a medicine (under a standing order) within a specified timeframe.

The intention of the proposed amendments is to provide the authorised prescriber with some flexibility. Arrangements for countersigning, including specifying, will still be required however the authorised prescriber can decide:

- when countersigning is and is not required,
- who may supply and/or administer treatments under the order without countersigning being required on each occasion; and
- the interval at which the issuer of the order will review the practices of those working under the order.

In order to address concerns about a possible lack of oversight if countersigning is not mandatory, it is intended to add a requirement that, as a minimum, there is a documented monthly audit of a sample of the records of administration or supply under a standing order.

Full text of the Proposed Amendments to Regulations under the Medicines Act 1981 and the Report of the Analysis of Submission and Final Decisions is available on <http://www.moh.govt.nz/moh.nsf/pagesmh/10433?Open> - See Change proposal 1.9. Page 15. "Amend the requirements for countersigning records of supply of a medicine under a standing order".

Any further information or advice can be provided by Vicky Noble

interRAI access pilot for GP Practices

C&C DHB would like to offer 10 GP Practices (GPs and/or Practice Nurses) the opportunity to pilot read only access to the interRAI software – the clinical assessment tools used by Care Coordination Centre Care Managers and some C&C DHB staff to assess the health and social support needs of older adults and those with chronic conditions. **For more information see the attached flier.**

Hauora Maori Funding

We would like to remind all PHOs and primary care providers about Hauora Maori funding. The full eligibility criteria and the specification can be found at <http://www.healthworkforce.govt.nz/our-work/investment-relationships-and-purchasing/specifications#Maori>. C&C DHB has recently been reminded of the criteria, notably - "trainees do not have to be Maori to access the Hauora Maori funding, if they are employed in an organisation that is funded through Vote Health to improve health outcomes for Maori then they are eligible for Hauora Maori funding". This funding is currently being utilised by some PHOs and primary care providers for the training, support and development of community health/support workers.

If you would like further information please contact Jackie Davis Maori Health Development group ph 0272920211 or 385999 ext 82370/7308

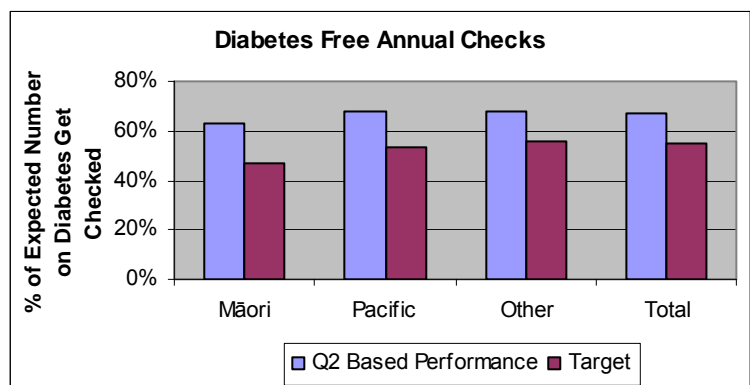
Dermatology / Minor Skin Surgery Clinical Pathways Collaborative underway

The first Dermatology / Minor Skin Surgery Clinical Pathways Collaborative meeting was held on 18 December 2010. Discussion focussed on access to specialist dermatology services, the varying and non-centralised minor skin surgery referral pathways, audit potential and primary care capacity. The group is currently collecting further information on dermatology and minor skin surgery initiatives in other DHBs, as well as laboratory information to help ascertain current activity in primary care. The next meeting is scheduled for 3 February 2011.

For further information contact Denise Mundy at denise.mundy@ccdhb.org.nz or telephone 806 2420

C&C DHB Diabetes Health Targets

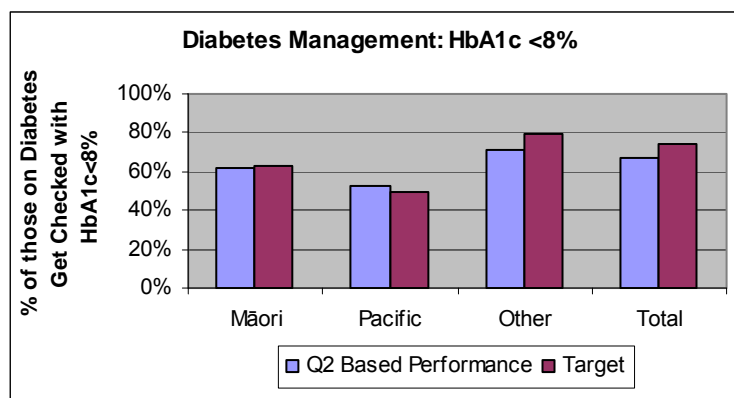
Diabetes is a key focus for C&C DHB and continues to increase over the years. Ensuring that those with diabetes receive regular care and that they are able to achieve their diabetes management goals is vital. The national Diabetes



Health Targets aim to monitor this through measuring the number of patients that have had a Diabetes Get Checked completed and who have achieved HbA1c \leq 8%.

The performance for C&C DHB in Quarter 2 of 2010-11 is quite positive. All targets for the uptake of Diabetes Annual Checks have been met. However

improvements are still required in improving the number of people with an HbA1c \leq 8% for the total population.



The progress achieved for these Health Targets are through a combination of efforts across primary and secondary care. The DHB would like to encourage the use of the various resources and innovative activities that are in place in the achievement of the Health Targets.

Quality and Safety in Healthcare Remote Conference at Capital and Coast DHB on March 3, 2011.

You are invited to attend the Quality and Safety in Healthcare conference at Capital and Coast DHB on March 3, 2011.

The one day conference will feature three videoed seminars delivered at the 2010 international Q&S forum in Nice and takes a serious look at how we can strive for excellence in quality and safety while facing the challenge of reducing costs. **For more information see the attached flier.**

If you are interested in attending please RSVP to qualityandsafety@ccdhb.org.nz by 18 February.

If you have any feedback, suggestions or questions regarding these communications please do not hesitate to contact us.

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For C&C DHB information for the general public about Primary Care, visit:
http://www.ccdhb.org.nz/planning/Primary_Care/Primary_Care.htm

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