

C&C DHB Partner Update

9 April 2010

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:

- ***Care Coordination Centre electronic referral for Packages of Care (POC)*** – New Medtech 32 Outbox referral form; Example of completed form attached
- ***Seasonal Flu Immunisation Programme*** – Influenza vaccination of high-risk C&C DHB inpatients during April to May 2010
- ***Ophthalmology Department Update*** – Moving to new premises and new Team Support Administrator for scheduling and clinic letter queries
- ***Anaemia Management in Chronic Kidney Disease*** – New approval process for EPO and guidelines for GP management of anaemia
- ***Clinical Pathways Collaborative Update*** – Request for feedback and Primary Care input
- ***Updates on HealthPoint.co.nz*** – First Specialist Assessment waiting times now being updated monthly
- ***Strategic Planning Evening for Primary Health Care Nursing*** – Invitation to attend
- ***Ministry of Health designing new e-learning tool*** – Feedback sought

See below for further details on each of these issues. Documents attached to the newsletter are identified in **bold and underlined**.

Care Coordination Centre electronic referral for Packages of Care (POC)

New Medtech 32 Outbox referral form;

Please also see Word example of completed referral form attached – CCC Referral Form.

A new electronic referral template for referrals to the Care Coordination Centre is now available. This Medtech 32 outbox document self-populates the form with demographic and clinical information. The referral form is available as an Outbox document from the Compass website or from your local PHO manager.

Using this template should make it much easier for you to provide the key details needed for referrals for community services.

Just to note that using the standard referral template is preferable, as it ensures that the correct key details are easily identified during the screening process. Any additional clinical details or letters can be attached if required.

CCC 'single point of entry' for Community Referrals

Please can we request that you send **one** referral only for a service, which is sent through to the CCC – i.e. if there is a need for a Psychogeriatric assessment, the referral should be sent to the CCC for screening and forwarding to Psychogeriatrics, rather than sending the same referral to both CCC and Psychogeriatrics services, as this causes duplication of screening, and can confuse the process for patients' access to the service.

Reassessments

If you feel there is an issue with a reassessment outcome, you can talk to your GP-allocated Care Manager (see attached **CCC Care Manager Allocation**) to provide additional information regarding a client's circumstances that may have been overlooked. You should re-refer to the CCC if there is a clinical change.

Please can you avoid contacting the Package of Care providers directly to arrange for changes in levels of a patient's services, and instead re-refer to the CCC if there are any changes in a patient's condition that may require a change in the level of service.

Managing patient expectations

A reminder that C&C DHB Packages of Care (home based support services) are allocated based on assessed needs, within CCC operational guidelines. In order that patients' expectations of receiving certain levels of service are managed, it is often best if you can advise that a referral is being made for an assessment, which will also determine eligibility for services.

Seasonal Flu Immunisation Programme

The 2010 immunisation programme for seasonal influenza commenced in March and this year's seasonal influenza trivalent vaccine protects against three strains of influenza, including the pandemic H1N1 influenza strain.

Influenza vaccination of high-risk C&C DHB inpatients during April to May 2010

Influenza vaccination is a priority for people with underlying conditions placing them at higher risk of complications from influenza illness (see update from Regional Public Health attached – **Regional Swine Flu Update 19 March 2010**).

In addition to those with existing indications for vaccination – such as those with chronic heart and lung diseases and those over 65 years of age – free immunisation has been extended to pregnant women, morbidly obese adults and children, and young children (6m – 5y). The large majority of influenza vaccination is provided through GP practices.

During the winter of 2009, there were 145 people admitted to C&C DHB with laboratory confirmed H1N1 influenza infection. Most affected were children younger than 5 years and adults aged 20 to 59 years (39%). A total of 48 (34%) had chronic

respiratory diseases, most commonly asthma and COPD. Other co-morbidities were cardiac disease, 13 (9%), cancers 10 (7%), and diabetes 8 (6%). Some 6.5% were pregnant. Pneumonia was diagnosed in 57 (39%) patients. Three patients died; all had underlying conditions with pneumonia.

During April to May, when influenza vaccination is being provided in primary care, some people who have much to gain from vaccination are hospitalised. Some of these find it difficult to attend their GP, or may not have otherwise seek to be vaccinated.

Where it is practical, clinical services at Wellington & Kenepuru hospitals will offer influenza vaccination to interested at-risk patients prior to hospital discharge. This is planned to include general medical inpatients with chronic heart and lung disease, and children with cancer.

Documentation of influenza vaccination will be communicated to the patient's GP in the hospital discharge summary or by facsimile.

General Influenza Information

The Ministry of Health has announced it is extending free flu vaccinations to more children aged between 6 months and 5 years. General practices can use their discretion to offer free immunisation to children from high deprivation backgrounds in this age range.

For more information on the Seasonal Influenza Immunisation Programme refer to the National Influenza Strategy Group's Influenza Kit and/or website www.influenza.org.nz.

The Ministry of Health have released an information pack for clinicians containing full details of the two-stage influenza vaccination programme. The pack includes information on the Early Protection Programme and details of the immunisation benefit and payments.

You can view this pack online at:

<http://www.moh.govt.nz/moh.nsf/indexmh/early-protection-immunisation-programme-info-pack-jan10>

For more information about how the programme will be run in our area, contact Helen Hartley, C&C DHB Immunisation Facilitator, on (04) 978 2919.

Ophthalmology Department Update

The Ophthalmology Department will shortly be moving to newly fitted premises in the Grace Neill Block at Wellington Hospital.

We expect this will make a huge difference to the comfort of patients coming to clinics and for staff working in the facility.

We have a Team Support Administrator who has been employed to answer queries relating to scheduling of appointments from patients and Medical Centres and Optometrists.

We have put measures in place to improve the output of letters from clinics, firstly with the acute clinic, however if letters from clinics have not been received, the Team Support Administrator can be contacted to follow these queries up.

If you do not receive a letter from the acute clinic as expected, please let us know.

The Team Support Administrator is available between 8:30am and 4pm, Monday to Friday, on (04) 918 5471.

Anaemia Management in Chronic Kidney Disease patients

A new approval process and guidelines have been developed for GP management of anaemia in Chronic Kidney Disease patients treated with Erythropoietin (EPO).

Please see the attached **Primary Care anaemia management and iron deficiency in CKD(1)** guidelines and the **Application For Subsidy (EPO)**.

This document provides the PHARMAC criteria for funding and the process for approval for EPO. It gives the guidelines for the treatment of renal anaemia and iron deficiency in chronic kidney disease.

This can be found on www.healthpoint.co.nz CCDHB Renal, protocols and guidelines and is attached to this document.

PHARMAC CRITERIA FOR FUNDING ERYTHROPOIETIN:

Patient must have:

Hb \leq 100g/L AND eGFR \leq 30ml/min (non diabetic)

OR eGFR \leq 45ml/min (diabetic)

AND NO OTHER OBVIOUS CAUSE OF ANAEMIA

Other causes of anaemia such as iron, B12, folate deficiency and blood loss should be excluded prior to commencing EPO

PROCESS OF APPROVAL:

1. Fax relevant patient details to CCDHB Renal Service: 8060518
2. Nephrologist to apply for Special Authority
3. Anaemia Nurse will liaise with GP practice

For further support contact the Renal Anaemia Specialty Nurse on (04) 8060536 or Nephrologist on call (04) 3855999.

Clinical Pathways Collaborative Update

The new Clinical Pathway Collaborative (CPC) has been in place since February and now has all four groups within the scheme up and running – with the Cancer group just recently added.

The groups are working well but would be enhanced by additional support from more interested GPs in any of the areas, but especially the Cancer group and Paediatric to Adult Service Transition group.

The first 3 groups are now focusing down on several priority areas as listed below:

Group 1: Palliative Care

- Advanced Care Planning
- Out of hours provision for palliative care
- Palliative Care drugs access in the community especially out of hours
- Exploring possible accreditation for places with palliative care beds
- Exploring location of palliative care beds across specific homes to pool expertise and quality of care.

Group 2: Paediatric to Adult Service Transition

- Standardised template for referral from paediatric teams to adult teams
- Exploring a new role for a Transition Co-ordinator
- Explore a Health Passport for children
- Look at virtual clinics / expertise access within CAMHS team for GPs to access
- Population Health Activity review
- E-referrals

Group 4: GI

- Consistent Referral criteria for GPs for CT Colonoscopy
- Data system capture and triggers for Recall / Surveillance patients
- Quick access rectal bleeding clinic

- Primary care management plan (fructose free diet) for patients with Functional gut problems
- E-referrals

The detailed progress of the groups can be viewed on 'Clinical Pathways Collaborative' on our Healthpoint site at:

<http://www.healthpoint.co.nz/default,170842.sm?medpro=show>

There is also opportunity to feedback to any of these groups.

Should any GP be interested in joining these groups please contact:

bridget.smith@cccdhb.org.nz or

adrian.gilliland@ccdhb.org.nz

Background on the CPC

The new Clinical Pathway Collaborative (CPC) is an initiative that forms a structured programme to engage clinicians from across the health spectrum and professional groups to:

- explore issues and challenges
- identify priorities for improvement
- deliver clinical / service/ patient pathways for implementation aiming to improve outcomes and quality of care.

A main focus will be on improving Integrated Care across the Primary, Secondary and Tertiary Interface. This will mean evidence-based planning in order to reduce unacceptable variation in the quality of care and timely access to integrated health services, which are conveniently situated.

The CPC commences early February with the first group meeting for the first wave of membership, which are:

- Palliative Care
- Paediatric to Adult Service Transition
- Cancer
- GI-Endoscopy

All four groups have a good representation, including Hospital Consultants , Primary Care and Mary Potter hospice.

The first wave will be completed by early May, when implementation plans will be produced and affected.

Updates from the group's progress will be communicated at the Primary, Secondary Clinical Governance group.

Updated HealthPoint website

[Healthpoint.co.nz](http://www.healthpoint.co.nz) is a new website which has the latest DHB referral and clinical guidelines, protocols and contacts.

The First Specialist Assessment waiting times on all services are now being **updated monthly** on the HealthPoint website.

There are an increasing number of health professionals using the Healthpoint site, with 44,904 visitors to the site, viewing over 340,000 Healthpoint pages – with over 10% of visitors being medical professionals.

We encourage all healthcare professionals to access this site to get the latest information from C&C DHB on:

- Referral criteria and priority
- Management protocols for common conditions
- New patient waiting times – updated quarterly
- Monthly newsletters and DHB updates

You must register and sign in on www.healthpoint.co.nz to access the referral and clinical information about C&C DHB services.

For GPs and medical professionals, please register by clicking on the register at the top of the home page.
For all other health professionals we would encourage your practice or PHO to obtain a login from info@healthpoint.co.nz.

Strategic Planning Evening for Primary Health Care Nursing

C&C DHB's Primary Health Care Team are looking at planning for the coming year and wish to discuss meaningful and achievable goals for this team with you. We need to know your thoughts and views about what you think the priorities are for primary health care nursing within the Capital & Coast DHB district.

We have arranged for a special planning evening where we can look at the pressing issues for the 2010 – 2011 year.

Please see the attached flyer – **Strategic Planning Evening Invitation** for more details.

Please come along with your ideas, or let us know ahead of time by emailing Vicky.noble@ccdhb.org.nz

Please also remember that nominations are now open for International Nurses Day to be held on 12 May, where there will be Awards for Professional and Clinical Excellence in Primary Health Care & Aged and Residential Care Nursing – **the International Nurses Day Application Form 2010 is attached**. These awards are presented to Primary Health Care & Aged and Residential Care Nurses in recognition and appreciation of their valuable work in the Capital & Coast DHB district.

10 awards of \$1000 (5 awards for primary and 5 awards for aged care) are available to assist Registered Nurses to enhance their professional development (funds are used for conference attendance, course costs or other professional development activities).

Any primary health care or aged and residential care RN in C&C DHB district can apply.

The awards are presented at a celebration for International Nurses Day on 12 May 2010.

Ministry of Health designing new e-learning tool for Hepatitis C

The Ministry of Health is seeking feedback on the design of an e-learning tool for all primary health care nurses and doctors/GPs.

How many people in New Zealand are living with Hepatitis C?

- a) 90-100,000
- b) 45-50,000
- c) 5-10,000
- d) 4-6,000

If you don't know the answer, you are not alone – and the answer may surprise you (read on!).

What are we doing with Hepatitis C?

The Ministry is responsible for improving the access to and uptake of Hepatitis C (HCV) treatment services and has identified four action areas that contribute to the achievement of this responsibility:

1. Improving HCV treatment services
2. Improving knowledge of HCV among primary health care providers

3. Increasing the percentage of all people with HCV who have had the disease diagnosed
4. Improving the knowledge of HCV prevalence in the New Zealand population and within subgroups.

As part of the second point above, the Ministry is currently embarking on the design of an on-line e-learning tool to teach learners everything they need to be able to identify, diagnose, test and treat patients with Hepatitis C. We are working in partnership with the Flexible Learning Network, a proven provider of eLearning tools within the Health Sector.

Who is the e-learning tool being designed for?

The eLearning tool is for all Primary Health Care Nurses and Doctors / GPs.

What do we need from you? 5 minutes!

To make sure we get the solution right, we need input from you. As part of the group who will have access to this programme, we need to hear from you about:

- What your specific needs are
- What you think should be included in this e-learning programme
- What will help ensure it is a success

To do this, we've set up a short survey. **It should only take about 5 minutes.** Just click the link below to access the survey (or copy the link into your browser).
<http://www.surveymonkey.com/s/7X7VT5Y>

And ... the last page of the survey contains the answer to the question above!

What next?

This survey will supplement a series of focus groups we are running. Look out for more information about this. If you wish to discuss your responses further, please fill out the details at the end of the survey.

Please forward this note to anyone you think would like to share their views and contribute to the design of this programme.

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

Raylene Bateman
External Communications Advisor
Capital & Coast District Health Board
Phone: 04 385 5480
Email: raylene.bateman@ccdhb.org.nz

Or

Adrian Gilliland
Clinical Advisor Primary and Integrated Care
Capital & Coast District Health Board
Email adrian.gilliland@ccdhb.org.nz

Or

Vicky Noble
Director Primary Nursing and Integrated Care
Capital & Coast District Health Board

Email: vicky.noble@ccdhb.org.nz

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

**Capital & Coast District Health Board, Riddiford St, Newtown, Wellington.
Private Bag 7902, Wellington South 6039, New Zealand.**