

C&C DHB Partner Update

13 July 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:

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- ***New Electronic Discharge Summary***

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

GPs Encouraged to Contact Specialists For Telephone Advice.

The C&C DHB Chief Medical Officer, Dr Geoffrey Robinson, is encouraging GPs to contact on-call consultants directly by telephone when brief advice may save a potentially unnecessary admission, emergency department attendance or outpatient referral. This is particularly true for less clear-cut cases when a specialist opinion may help to resolve the issue.

A number of departments including General Medicine and Paediatrics have had this in place for some time and have often been able to advise GPs on alternatives to an acute hospital admission or outpatient referral.

Where an **admission is thought likely** to be required, the **on-call Registrar should still be contacted**.

This service is available through the **hospital switchboard** which can be accessed by GPs as a priority for **urgent calls** on **DDI (04)806 0699**.

New Breast Screening Site at Kenepuru

As of 1 July 2010, there is a new breast screening site at Kenepuru Hospital as part of the Breast Screen Aotearoa programme. For more information **see the attached flier**. There will be an official opening at the site in mid August.

C&C DHB Integrated Model for Anticoagulation Management

The C&C DHB Integrated Model for Anticoagulation Management is progressing well and is moving into an implementation phase.

The IT system that is under development will enable both primary and secondary care to be using the same warfarin monitoring template and enable the electronic transfer of warfarin information across primary and secondary care. The electronic transfer will ensure that referrals can be done easily and with accuracy when patients move across the interface, or when further clinical support is required.

The Working Group will provide more detailed information about the programme through a series of presentations and resources. The Working Group will aim to carry out presentations for each primary care area (Wellington, Kapiti, Porirua) as well as for each PHO Clinical Governance Group. Concurrent sessions will also be held at the hospital to ensure the promotion of the model across the sector.

The implementation plan for the programme is underway – so we look forward to coming and meeting with you about the programme soon.

If you have any questions regarding this please contact Astuti Balram, Service Development Manager ph: 04 806 2422 or email astuti.balram@ccdhb.org.nz.

C&C DHB Cellulitis Management in Primary Care Pilot

Cellulitis is one of the leading causes for avoidable hospitalisations in C&C DHB and NZ. The Cellulitis Management in Primary Care Pilot was established in 2009 to evaluate whether the use of intravenous antibiotic for cellulitis in the community would reduce cellulitis related hospital admissions.

The pilot was carried out in targeted practices in the Porirua area and to support implementation, practices were provided with treatment guidelines, IV antibiotic treatment packs, training and funding for treatments.

Following the first 12 months, the impact of the pilot on hospital admissions was not significant and so a review of the project is required to determine its future. A Clinical Pathway Collaborative (CPC), including clinicians from across primary and secondary care, has been established to guide the review.

Members of the current Cellulitis CPC group include:

Andrew Bos	Ann Boland	Brent Krivan
Brijul Morar	Bryan Betty	Chris Kerr
Chris Sharma	Jean Kelly	Larry Jordan
Nigel Raymond	Richard Tyler	Robyn Toomath
Vicky Noble	Astuti Balram	

The first CPC meeting was held on June 15, where the current project, the impact on admissions and possible options for the future were discussed.

It was recognised that the impact on admissions has not been significant, that there are other positive impacts of the project (eg. provision of service closer to the patient) and there is likely to be variation in clinical practice.

To support the progress of the review further work is being done to compile information about other DHB cellulitis programmes/projects, analyse ED data and explore the potential for further clinical research on patients who present to hospital.

As the above activities progress, the working group will discuss options for the project and primary care will be kept updated.

If you have require any further information or would like to discuss anything related to the project please contact Astuti Balram, Service Development Manager ph: 04 806 2422 or email astuti.balram@ccdhb.org.nz.

Clinical Pathway Collaborative – Update July 2010

The four work streams continue to work on the priorities with good input from both Primary and Secondary Care.

Group 1 - Palliative care

1. Policy for availability of Out of Hours medications for Palliative Care patients, across the whole DHB. This is a joint piece of work with the Pharmacy Network and WFA.

2. Proposal for an Advanced Care Planning / Advanced Directives Facilitator to work across the DHB, based in primary Care and providing education into both and a resource manual for services and process' within Palliative care.

This group will continue to meet and will be looking at the next key focus areas. GPs are sought to join the group and increase the Primary Care presence.

Group 2 - Paediatric to Adult Transition

1. Clinical pathway for referral from GP's patients with ADHD over 16 to be able to get reviews from Clinicians for Authorised medication e.g. methylphenidate
2. Information and data collection regarding numbers of patients at practice level with Intellectual Disability and issues faced by professionals.
3. Influencing MOH to develop a Clinical Network across interested DHBs regarding Intellectual Disabilities.

Intellectual Disability Survey

This CPC group have identified an area of need which is a gap in service provision; clients over 16 with intellectual disability, where there is no identified clinical input other than GP.

Please take 5 minutes to go into the following link (survey) and give feedback .

[C&C DHB Intellectual Disability Survey](#)

Group 3 – Cancer

1. Improvements to the referral process for primary care to cancer specialists
2. Exploration of shared care models
3. Education requirements to up skill GPs in care of patients with cancer.
4. Improved communication links between primary and secondary care whilst patients under going treatments/ hospital care.

Group 4 –GI

1. Inclusion of information on Endoscopy reports to GP's to advise regarding recall and surveillance of patients requiring further procedures..
2. Guidelines for referral for GP's for patients requiring CT Colonoscopy .
3. Introduction and Education of 'FODMAP diet for patients with Functional Gut problems.

There will be an invite going to primary care for an education evening on August 25th regarding this subject and presented by a Consultant Gastroenterologist and Expert Dietician.

The groups will continue to work on the plans with a view to finalising some key outputs, by end July. After this, the required improvements/ changes will take place and the impact monitored by the individual services.

An evaluation study from Victoria University will be commencing in the next few weeks. It is to ensure that the deliverables of both this Clinical Engagement change process and service development impacts are successful.

College of Nurses, Aotearoa and Primary Health Care Nurses' Reference Group combined meeting

July 28th 2010, 5pm – 7.30pm.

Massey University, Executive Suite, Wallace Street, entrance A

5pm – 5.45 Tony Ryall, Minister of Health

The Minister will give a presentation on the changes in health since the National Government's election, his thoughts for the future and response to questions from the floor.

5.45 – 6pm Light Refreshments

6pm – 7.30pm Practice Nurse Cost Benefit Analysis

Hear from the researchers and discuss the implications of this project carried out by LECG and Health Services Research Centre. The aim of this project was to explore the service delivery and business models for primary care practices of deploying practice nurses to optimise the efficiency, effectiveness and value for money of general practice.

Speakers: Martin Hefford, Director, LECG and Dr Tom Love, Economist, LECG

Pacific new graduate nurses opportunities, 2011

C&C DHB is funding three new graduate Pacific nurses in a PHC employing practice service in 2011. Each practice / service will have Pacific peoples enrolled and will support and encourage the new graduate Pacific nurse employed by them to learn and develop her/his nursing practice.

The funding is for the first year of practice while the nurses participate in the Nurse Entry to Practice programme. This will enable and facilitate Pacific graduate nurses' entry to the primary health care setting. After this first year, the practice supports the nurse to find ongoing employment.

Application Process:

A practice / service will put in a joint expression of interest with a Pacific third year student nurse to C&C DHB. If a practice is looking for a suitable nursing student, they can contact Wendy Scott, BN Pacific, 2373100 x 3745, 0212106335 wendy.scott@whitireia.ac.nz Pacific student nurses from any nursing school can participate in this offer.

Expressions of interest are to include details of the practice / service; the nurse's CV and a description of the benefits to the practice and to the graduate nurse of them being employed there and should be received **by August 16th 2010**. Send to: Linda.polaschek@ccdhb.org.nz or Capital & Coast District Health Board, Private Bag 7902, Wellington

For more information contact:

Vicky Noble, Director of Nursing, PHC & Integrated Care,
ph 04 8062447, 0272433982

Linda Polaschek, Nurse Leader, PHC & Integrated Care,
ph 04 8062448, 0272862957.

Enrolled Nurse new scope of practice

The scope of practice for enrolled nurses has recently been revised and the qualification has been raised one educational level. It now “requires them (ENs) to have broader skills to work in more health settings and to have greater skills particularly in assessment and delegation of care to health care assistants, hence the decision to raise the qualifications” (Carolyn Reed, Chief Executive, Nursing Council NZ.).

For more information see the Nursing Council web site.

<http://www.nursingcouncil.org.nz/index.cfm/1,120,html/Enrolled-nurse-scope-of-practice-and-transition-arrangements>

“The Nursing Council is requiring most existing enrolled nurses (except those educated in New Zealand after 2000) who wish to transition into the new scope of practice to do so over the next 12 months. ENs will be required to complete a competence assessment against the competencies for enrolled nurses on a Nursing Council approved professional development and recognition programme (PDRP) or by a Council approved assessor by **1 July 2011.**” (NCNZ)

Capital and Coast DHB is working on a plan which will support all ENs in the district to be able to transition to the new scope of EN practice. Please let Vicky or Linda know if you are interested in receiving more information about this, once the plan is finalised.

Vicky.noble@ccdhb.org.nz

Linda.polaschek@ccdhb.org.nz

Research nurses

C&C DHB is looking to strengthen the role of research nurses in the district.

We are planning to:

- ensure research nurses have visible and formal professional support.
- develop a professional pathway for research nurses
- work in partnership with tertiary education providers to further develop the current networks for nurses working in research to increase the opportunities to expand their research skills and capacity at C&C DHB.

We would like to make contact with any nurses working in research in the community. Please contact Vicky Noble or Linda Polaschek:

Vicky.noble@ccdhb.org.nz

Linda.polaschek@ccdhb.org.nz

New electronic discharge summary

On 6 July, C&C DHB rolled out a new electronic discharge summary that replaces the Webdocs program. The discharge summary is more user-friendly for the doctors filling it out, more reliable, and supports better capture of information.

It includes a number of new sections:

- admission medications, changes in medications and discharge medications are now all included enabling Primary Care to see what medications have been started, stopped and change during the in-hospital admission. A section on warfarin is specifically included.
- all discharge scripts including prn and short course medications will now be included
- the diagnoses section is now compulsory
- procedures, smoking status and ACC number where applicable are now included.
- the discharge will be signed by the clinician who finalises the discharge summary and include the name of the responsible consultant.

The new discharge summary will be easy to read and is similar in appearance to the discharge summaries currently sent by Hutt Hospital.

A key difference between the C&CDHB discharge summary and the Hutt's is that the order in which the sections appear in Medtech has been designed in consultation with GPs (e.g. smoking and ACC information at the bottom)

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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