

# NORTHSIDE NAVIGATOR

Issue #1

**Welcome to the first issue of the GP Network Northside Navigator. The aim of this quarterly release is to update GPs and practices on the progress of the division and the future direction expected over the next few months.**

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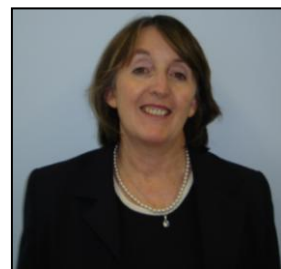
## QUICK LINKS:

**[GP Network Northside Website](#)**  
**[CPD Information and Calendar](#)**

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### CEO REPORT – Tricia Rowilson

We are pleased to bring to you the first edition of the GP Network Northside Navigator.



Although there is significant media coverage around the Prime Minister's agenda of health reform that includes primary care we are still to be advised of the details and the impact it may have on General Practice and GP Network Northside (GPNN).

A particular role for divisions of general practice may be they become major players in the proposed Primary Health Care Organisations (PHCO's) but again details are scant at this stage. The federal budget is to be handed down on Tuesday May 11th and that might provide us with further details.

The Annual Board Planning day is being held Saturday May 1<sup>st</sup> and the Board will be considering how GPNN will position itself for the future, particularly in light of recent

announcements and the PM's reform agenda. Once further information and details are available the Board will be holding GP forums to further discuss the reform agenda.

In the meantime it is business as usual with GPNN being committed to providing support to general practice and the health of our communities through the various contracts we hold.

### **BOARD BYTES – Our New Board Member Speaks Up**

GP Network Northside would like to welcome Mrs Elizabeth Gavey who joined the board as a non-GP director in July 2009.



Elizabeth has degrees in commerce and law and is a graduate member of the Australian Institute of Company Directors. Her professional career includes considerable experience in commercial and finance law obtained at Clayton Utz, Solicitors and Macquarie Bank. Most recently, Elizabeth has been appointed as legal counsel to the National Prescribing Service.

Elizabeth's key areas of expertise are risk management and corporate governance.

Elizabeth sees her role of non-GP director as one of bringing skills and experience that complements the composition of the board and enhances the board's decision making ability. Elizabeth sees great benefits in having non-GP directors on the board of GPNN – by appointing directors from different professional backgrounds; the Board of GPNN can achieve a mix of experience, skills, attributes and capabilities. This encourages divergent views, robust discussion and ultimately better decision making for the benefit of GPNN and its members.

## **GP NETWORK NORTHSIDE PROJECT UPDATES**

### **PROJECT UPDATE – Northside GP Collaboration Unit (GPCU)**

The Northside GPCU was established in 2006 to facilitate improved communications between general practice and the local, state funded, area health services and hospitals in order to optimise continuity of care for local patients and make the transition from hospital to home smoother. Initial priorities have so far included working on projects within the established "shared care" programs, such as antenatal care, mental health and drug and alcohol but have since extended to newer services such as Acute/Post Acute Care (APAC) GP Shared Care.

The GPCU also ensures general practice is represented on various area health committees so as to be in the best position to influence decisions that impact on the services accessed by GPs for their patients and on how the services can be accessed. It also ensures that the General Practice point of view is continually considered in strategic planning. For the most up-to-date list of committee representatives, visit [www.gpnn.org.au/?page\\_id=116](http://www.gpnn.org.au/?page_id=116)

If you have a particular concern, question or feedback about an area health service, contact Cynthia Stanton at GPNN [cynthia@gpnn.org.au](mailto:cynthia@gpnn.org.au) and we will endeavour to address it.

In light of the Rudd Government's announcement about the divisions network evolving into Primary Health Care Organisations (PHCO's), the relationships developed through the GPCU has put GPNN in a good position to continue to support General Practice to meet the increasingly complex needs of their patients.

### **PROJECT UPDATE - Australian Better Health Initiative (ABHI)**

In February 2006, the Council of Australian Governments (COAG) announced a four-year, national program called the Australian Better Health Initiative (ABHI) to strengthen the health system's ability to promote good health and reduce the burden of chronic disease. GP Network Northside (GPNN), Northern Sydney GP Network (NSGPN) and Central Coast Division of General Practice (CCDGP) have been working together as a consortium to improve the management of patients with chronic illness, reduce avoidable hospital admissions and, where patients are admitted to hospital, ensure that the treatment provided is consistent with that patient's existing primary health care plan.

By collaboration between Primary and Community Care Services GPNN is working with Hornsby Ku-ring-gai, Royal North Shore and Ryde hospitals to improve the management of chronic disease patients by working on systems that facilitate better communication between these hospitals and the patient's nominated GP.

The intended outcome is for GPs to be more efficiently informed about their patient's journey through hospital and that patients will be better managed with improved communication between Hospitals and General Practice.

### ***Hornsby & Ryde Hospital GP Notification of Admission Fax***

The impetus for this project was the result of two large GP surveys demonstrating that GPs were not being informed when patients were admitted to, or had died within, a NSCCAHS hospital, that avoidable adverse reactions were occurring due to lack of consultation with GPs about medication changes and that inefficient and delayed treatment was occurring due to duplication of recently performed tests.

A "GP Notification of Admission" fax was trialled through the Hornsby Hospital Aged Care Ward 1B, with the aim that:

- GPs would be informed that their patient had been admitted to Ward 1B at Hornsby with a reason for admission and contact details for the JMO via fax
- GPs would fax relevant patient medical and social history and details such as their working hours and availability for Case Conferences back to the hospital

The intention was to see if this faxed back information would result in better communication between the GP and the JMO and better management of chronic disease patients e.g. fewer adverse reactions, a reduction in duplication of tests and improved discharge planning.

Data about the number, completeness and timeliness of faxes sent to GPs by the ward and the number, content and timeliness of faxes being provided to the hospital by the GP was collated. Overall, the response to the notifications by GPs was positive. The results of this trial have led to and informed full implementation through the Emergency Department of Ryde Hospital. Implementation and data collection at Ryde is ongoing and full evaluation results will be available by June 2010.

### **PROJECT UPDATE - GP and Practice Team CPD Education**

As the new Triennium is fast approaching, GP Network Northside has recently implemented a Monthly Education Bulletin. The purpose of this bulletin is to put forward CPD opportunities for GPs and Practice Teams to ensure they attain their QA&CPD and RCNA points. This bulletin is available online on the 'Publications' page and is sent in a PDF format via email and by fax.

#### **Feedback on the new Education Bulletin...**

"Dear GP Network Northside,

Can I just say how very pleased I am with this new format of informing us re the education that is on offer. It helps to have it centralized/coordinated and of course the timely prompting. This is a great initiative and just wanted to say - WELL DONE!! Thanks again"

Dr Magdalen Campbell – Pennant Hills

### **PRACTICE NURSING – Clinical Placements**

#### **Clinical Placements for Student Nurses in local General Practices**

We are currently working with the Australian Catholic University (ACU) and Avondale College to assist 3rd year student nurses to undertake clinical placements in general practice. This provides a great opportunity for students to gain clinical skills and benefit from working side by side with experienced practice nurses. It is also a wonderful chance for our valuable practice nurses to enhance their role by preceptoring the students.

#### **Student Placement Features**

- Available to practices who employ a Registered Nurse
- Placement hours are negotiable. (They are often worked as a 2 or 3 day week but hours can be negotiated between the student and the practice.)
- The university provides insurance cover
- GPNN will provide a student nurse orientation session
- The university provides telephone support and facilitator visits to support both students and RN Preceptors

The following is a list of benefits for each party:

#### **Benefits for the Practice**

- Opportunity to raise the profile of the practice within the community
- Opportunity to promote practice nursing as a career option
- Demonstrate commitment to valuing nursing in general practice

- And, as the placement progresses, an extra nursing team member capable of assisting in a variety of activities

### **Benefits for the Practice Nurse Preceptor**

- Opportunity for professional development in the advanced nursing role of preceptor
- Demonstrate commitment to the nursing profession
- Opportunity to promote practice nursing as a career option
- Opportunity to promote the role of the practice nurse to the community

At this early stage 7 placements have been organised, with 2 completed. The feedback from all parties has been very positive. The Network looks forward to building on the relationships with the universities and continuing to promote practice nursing as a very viable career option for new graduates. Practices interested in hosting a student should contact the GPNN Practice Support Team on 9477 8700.

### **PRACTICE TEAMS - Quality Practice Management**

An essential skill for any medical practice is patient communication. Patients who are “kept in the loop” tend to be happier with the service they are provided. A practice newsletter detailing new developments in the practice, practice procedures, complaints processes and what is expected of the patient and the doctor can be of great benefit to the practice.

#### **Practice Team Communication**

Do you have an effective way to communicate between team members in your practice?

Do all your staff members have a job description outlining their duties and responsibilities?

Do you have team meetings to discuss how well your team is working and what they are aiming to achieve?

We would love to share your ideas on how you successfully achieve this in your practice.

Please send your ideas to the Practice Support Team.

### **RESEARCH INVOLVING GP NETWORK NORTHSIDE PRACTICES**

#### **Moving On**

GP Network Northside is currently working with Arthritis NSW and the University of New South Wales Centre for Primary Health Care and Equity, on a new chronic disease self-management program called Moving On. This is a great opportunity for patients to attend a self-management program for free. To date 56 GPs in GP Network Northside have been briefed about the study, 247 referrals have been received and 7 programs are currently running in Blacktown, Pennant Hills, St Ives and Turramurra.

#### **NPS Prescribing Data in General Practice Demonstration project**

We currently have 9 practices participating in this project with 3 practices working on the hypertension topic, 3 practices working on the chronic heart failure topic and 4 “wait control” practices. All practices participate in two topics over 18 months. We are receiving great feedback on the program’s capacity to identify patients who are outside the

recommended treatment guidelines and review their management. The wait control practices are eager to start their first topic.

## STAFF CONTACT DETAILS

NAME	TITLE	CONTACT	AVAILABLE
<b>ANDREW</b>	Practice Support Officer	<b>9477 8719</b>	Full Time
<b>BOBBY</b>	IT Officer	<b>9477 8721</b>	T-W-F
<b>BROOKE</b>	Executive Liaison Coordinator	<b>9477 8701</b>	M-T-F
<b>CYNTHIA</b>	Primary Care Services Coordinator	<b>9477 8703</b>	M-T-W or T
<b>DEBRA</b>	Practice Support Officer	<b>9477 8723</b>	Full Time
<b>ERICA</b>	Practice Support Manager	<b>9477 8716</b>	Full Time
<b>FENG</b>	Practice Support Officer	<b>9477 8714</b>	Full Time
<b>JANET</b>	Practice Support Officer	<b>9477 8707</b>	M-T-W-T-alt F
<b>KAREN</b>	Practice Support Officer	<b>9477 8713</b>	M-alt T-W-T-F
<b>KERRIN</b>	Executive Manager	<b>9477 8751</b>	Full Time
<b>KIM</b>	NPS Facilitator	<b>9477 8715</b>	T-W-T
<b>KIMBERLEY</b>	Project Officer - Aboriginal Health, ATAPS & ACAI	<b>9477 8722</b>	T-T-F
<b>LARA</b>	HMR Facilitator	<b>9477 8710</b>	T-W-T
<b>MICHAEL</b>	eHealth Manager	<b>9477 8777</b>	M-W-T
<b>ROBI</b>	Project Officer - Education & Marketing	<b>9477 8717</b>	Full Time
<b>SANDRA</b>	NPS Facilitator	<b>9477 8711</b>	M-T-F
<b>SIMONE</b>	Business Coordinator	<b>9477 8700</b>	Full Time
<b>SOPHIE</b>	Administration Assistant	<b>9477 8700</b>	Full Time
<b>TRICIA</b>	Chief Executive Officer	<b>9477 8700</b>	Full Time