

Practice Connect

Latest news and updates

In this edition:

- PIP QI updates and reminders
- GP Urgent Care: Third round of applications now open
- New RACGP resource: Measles fact sheet and checklist
- The Advance Project
- PBAC recommendations meningococcal group B vaccine
- My Health Record: Streamlining your Assessment webinar
- PRODA education for health professionals
- Accreditation tip – updates for the new year
- Practice resources: back to school
- HealthPathways: recently localised pathways
- NPS MedicineWise: update
- Cancer Council WA: Short courses and workshops
- Changes to bulk billing incentives
- Health promotion events
- Education and training

PIP QI updates and reminders

End of data submission period

The data submission period for the November 2019 – January 2020 quarter ends on 15 January. Eligibility requirements for practices participating in the Practice Incentives Program Quality Improvement (PIP QI) incentive include the successful submission, to WA Primary Health Alliance (WAPHA), of the PIP Eligible Data Set at least once in the quarter.

If your practice has a Data Sharing Agreement with WAPHA and is extracting data for the purpose of the PIP QI, you should by now have submitted at least one eligible data set between 1 November and 15 January. If your practice has not successfully submitted data under the Agreement, you should have received a notification to advise you of this, and alert you that action was required in order to maintain eligibility. Practices that have an approved exemption do not need to meet the data sharing requirements at the present time.

Reminder about PIP accreditation requirements

Practices that are participating in the PIP QI are reminded that accreditation (or active registration) must be maintained without interruption for the entire quarter if the practice is to remain eligible for a payment. If the practice fails to maintain continuous accreditation during a quarter, eligibility for all Practice Incentives Program payments may be affected. If this break in accreditation occurs over the change in PIP quarter, eligibility for both quarters is likely to be impacted.

(continued page two)

PIP QI updates and reminders (cont.)

Reminder about PIP accreditation requirements

Accreditation agencies encourage practices to schedule their survey visits sufficiently in advance of the accreditation / registration expiry dates to ensure the practice has adequate time to address any non-compliances found during the survey visit. Practices that do not comply with the survey visit time recommended by their accreditation agency run the risk of having insufficient time to rectify non-compliances prior to their expiry date, and therefore incurring a gap in which they are not accredited. Equally, practices that fail to achieve their initial accreditation within twelve months of registering for PIP may have PIP payments withheld.

Any practice that has payments withheld for three consecutive quarters will have payments ceased and will be withdrawn from the Program. Withheld payments will be forfeited.

Practices must remember that extensions cannot be granted for practices that have not allowed sufficient time for accreditation processes and decisions to be finalised. Equally, accrediting agencies are prohibited from backdating accreditation “start dates”: certification can only be granted from the date full compliance was achieved. More information on extension processes can be found in [this Advisory](#) from the Australian Commission on Safety and Quality in Health Care.

If your practice has a payment withheld, you need to complete an [IP027 Review of decision form](#) to have the Department of Human Services review the reason for the withheld payment. WAPHA is unable to act on behalf of practices that have had payments withheld.

New consumer fact sheet for PIP QI

The Department of Health has released a [new fact sheet](#) aimed at assisting consumers to understand the purpose of sharing data for PIP QI. This fact sheet describes the benefits of data sharing, as well as what it means for the individual patient, how and with whom the data is shared, and concerns about privacy.

Your practice may wish to print out copies of the fact sheet to provide to patients who would like to know more about data sharing or have a link to the fact sheet on your website alongside your policy on management of patient information.

PEN CS General Practice resources

Pen CS have published a range of resources on their [General Practice Resources portal](#), including a privacy of patient health information poster ‘Together We’re Shaping Our Future Health’ poster designed for use in General Practices or Aboriginal Medical Service.

Please click [here](#) to view and download a copy of the ‘Together We’re Shaping Our Future Health’ poster.

GP Urgent Care Network Pilot: Third round of applications now open

Applications have now opened for practices wishing to join the GP Urgent Care Network Pilot. The application form can be accessed by [clicking here](#).

Essential criteria to become a GP Urgent Care practice include:

- Evidence of accreditation
- Capacity to provide appointments
- Provision of clinical handover back to the patients 'regular' GP
- Completion of evaluation documentation
- Use of Health Engine and/or HotDoc for online bookings
- Relationship with a local pathology and radiology provider

More information about the pilot can be found at <https://www.wapha.org.au/health-professionals/gp-urgent-care/>

Any questions about the application or the pilot can be emailed to urgentcare@wapha.org.au

To find a GP Urgent Care practice and to view online appointments please visit: www.gpurgentcare.com.au

Applications close 31 January 2020.

New RACGP resource: Measles fact sheet and checklist

The RACGP Expert Committee – Practice Technology and Management has published a new [Measles fact sheet and checklist](#) to support GPs and practice teams in response to an increased number of measles cases presenting at Australian general practices after international outbreaks.

Measles is one of the world's most contagious viral diseases and early intervention is critical to prevent disease transmission. While measles was officially eliminated from Australia in 2014, a global outbreak has resulted in increased cases locally.

This resource includes key information and considerations for GPs and practice staff, alongside a preparation, response and recovery checklist for measles presentations.

The factsheet is available via the [RACGP website](#) alongside an extensive suite of general practice emergency planning and response resources.

The Advance Project

Advance care planning is important in ensuring a person's values and preferences relating to health and personal care are known at the end of their life. GPs and practice nurses are well placed to support patients with putting their advance care plans into place because trust has already been established.

To support general practices to implement a team-based approach to initiating advance care planning into everyday clinical practice, WA Primary Health Alliance is partnering with HammondCare are to implement their Advance Care Project model in WA.

This will involve providing general practices with face-to-face training, mentoring and resources to support them to embed the Advance Project model into clinical practice.

WA Primary Health Alliance General Manager Bernadette Kenny says the Advance Project provides a unique opportunity to work with general practice to build the capacity of everyone in the team to initiate informed discussions with patients.

"Sparking conversations about end of life planning can be difficult, and this training package will support GPs and practice staff to be proactive about advance care planning with their patients and ensure they receive the right care when and where they need it," Ms Kenny said.

As palliative care specialist, HammondCare Director, Centre for Learning & Research in Palliative Care, Professor Josephine Clayton developed the training package with her colleagues after working with families left in crisis trying to make decisions for their loved ones who can no longer communicate.

'There's a really big need for this. Often people think about this when a loved one is in the emergency room or about to go into an aged care facility, but by then they've often lost the capacity to take part in decision making. By then it's often too late. People might not be ready straight away, but planting that seed is crucial early on,' Professor Clayton said.

WA Primary Health Alliance has been selected as one of four primary health networks to champion the initiative in Western Australia.

After delivering a suite of educational workshops in Rivervale and Mandurah, Greenwood and Albany, WA Primary Health Alliance is now offering participating practices the opportunity to receive bespoke, onsite training in a condensed format that takes under an hour to complete.

General practices interested in completing the training can contact project lead Rose Adamson on 6278 7962 email roseanne.adamson@wapha.org.au

Please click [here](#) to view [The Advance Project flyer](#) on these information sessions.

The Advance Project™ is funded by the Australian Government Department of Health, with training endorsed by the Australian Primary Health Care Nurses Association (APNA), accredited by the Royal Australian College of General Practitioners (RACGP) and Australian College of Rural and Remote Medicine (ACRRM), and delivered by a national consortium led by HammondCare.

PBAC recommendation for the listing of multicomponent meningococcal group B vaccine (4CMenB, Bexsero®)

The recommendations from the November 2019 Pharmaceutical Benefits Advisory Committee (PBAC) meeting are now available which includes the PBAC recommendation for the listing of multicomponent meningococcal group B vaccine (4CMenB, Bexsero®)

The PBAC recommended the listing of multicomponent meningococcal group B vaccine (4CMenB, Bexsero®), on the National Immunisation Program, for the prevention of invasive meningococcal disease (IMD) in Aboriginal and Torres Strait Islander children and the implementation of a catch-up program for Aboriginal and Torres Strait Islander children up to 2 years of age.

The PBAC also considered 4CMenB was likely to be cost-effective in children and adults with medical conditions associated with increased risk of IMD (specifically, people with asplenia and hyposplenia, complement deficiency and those undergoing treatment with eculizumab) and recommended listing on the NIP for routine vaccination of this population.

The PBAC did not recommend listing for a broader population of infants or for adolescents due to the remaining uncertainties regarding the magnitude of clinical effectiveness of 4CMenB, and the lack of any herd protective effects, which inform the cost effectiveness.

The PBAC recommendations are available [here](#) (detailed under positive recommendations).

My Health Record: Streamlining your Assessment Webinar

My Health Record have released the '[Navigating My Health Record: Streamline your assessment with Medicines and Results overviews](#)' webinar.

This webinar will focus on recent enhancements to My Health Record enabling more efficient viewing of medicines, pathology results and diagnostic imaging reports.

For more information on the My Health Record or further training resources please visit: <https://www.myhealthrecord.gov.au/for-healthcare-professionals>

PRODA education for health professionals

A variety of education resources are available to assist health professionals set up PRODA accounts. Resources include infographics and simulations. The resources are available on the [Department of Human Services](#) website.

<https://www.humanservices.gov.au/organisations/health-professionals/subjects/proda-education-health-professionals>



Accreditation tip: Updates for the new year

This edition's accreditation tip brings you general information pertinent to the start of a new year and a new triennium, as well as practical information for bushfire-affected practices.

5th edition assessments

A significant number of practices have now undertaken assessment against the 5th edition of the [Standards for general practices](#), which were released in October 2017. We are beginning to see more comprehensive compliance data, allowing us to better understand where common non-compliances are being found, and therefore provide you with quality support in preparation for your survey visit.

All general practices seeking accreditation are assessed against the 5th edition of the *Standards for general practices*, and our [Practice Support team](#) can provide you with accreditation support.

Evidence of training and professional development for the clinical team

The change in triennium always brings with it some concern about the provision of evidence of training and CPD for the clinical team, as activity statements for the new triennium are not yet available.

Usually, accreditation providers will accept statements from the previous triennium for the first year of the new triennium (that is, until December 2020, you may be able to submit an RACGP QI&CPD, or ACCRRM PDP, statement from the 2017 – 2019 triennium). Please check with your accreditation provider to confirm that this will meet compliance requirements.

Bushfire-affected practices and accreditation

If your practice has been affected by a natural disaster of any type, and this will impact on your ability to meet your accreditation timelines, you can apply for an extension to your expiry date by contacting your accreditation provider. However, due to the requirements of the [National GP Accreditation Scheme](#), accreditation providers are only able to issue extensions under certain circumstances, and for a maximum of three months. More information about the extension process is available via this [Advisory](#) from the [Australian Commission on Safety and Quality in Health Care](#) (ACSQHC).

Given the severity of Australia's bushfire crisis, it is recommended that, if your practice has been affected by bushfires, you contact your accreditation provider to discuss what extension (or other support) processes might be available to you. We have been informed that accreditation providers are working directly with the ACSQHC to provide the necessary support to bushfire-affected practices and are therefore best placed to determine how your practice can continue to meet its obligations while coping with a severe natural disaster.

Managing emergencies in general practice

General practice is often placed at the frontline when natural disasters occur, and your practice needs to be prepared to respond to emergencies of all types.

The [RACGP](#) and [ACCRM](#) each have resources available to support practices to prepare for, and manage, emergencies, including natural disasters and pandemics. Remember that "planning to make a plan is not a plan" (NSW Rural Fire Service), and practices need to not only develop, but test, their emergency response, and business continuity, plans.

Practice resources: back to school

As we look towards school recommencing in early February 2020 there are many children who will need to see their primary care provider.

Immunisations

Children beginning or changing schools in 2020 will need to provide up to date immunisation records as part of their enrolment.

- Children who are not up to date with their immunisations will need to catch up before they are able to attend school, kindergarten or day care. The Department of Health provides information on their [Immunisation requirements for child care services, kindergarten and schools page](#)
- There are also ramifications for parents entitlements from Centrelink for [Family Tax Benefits or Child Care Fee Assistance](#).

The Department of Health poster '[Starting or moving schools – immunisation records](#)' is available on the Practice Assist Website or from your PHL.

Asthma, Diabetes, Allergy and Anaphylaxis Action Plans

Parents of children diagnosed with Asthma, Diabetes or Allergy/Anaphylaxis conditions may be required to provide the school, kindergarten or day care centre with an action plan to outline the required immediate treatment required in an emergency. These plans should be developed with the input of the child's primary care team. Guidelines are provided on the Department of Health's [Healthy WA Website](#)

NPS MedicineWise also has education visits available for GP education on Asthma management of pre-school and school aged children. To request a visit, go to: <https://www.nps.org.au/cpd/request-a-visit> or call (02) 8217 8700.

Templates for action plans can be found at:

- Australasian society of clinical immunology and allergy – [ASCIA Action plan for anaphylaxis](#).
- National Asthma Council Australia – [Asthma action plan library](#).
- Diabetes WA – [Diabetes management and action plans](#).

Children with Medical Conditions or Special Needs

Children with medical conditions or special needs may be required to provide details to the school or day care facility in the day to day management, including medications, of the child's condition. Some parents may need assistance with the *Student health Care Summary form*, and *Health Care Management plan* if required. Generally schools will provide these forms to parents as part of the child's enrolment, the Department of Education also provides them on their [Student Health Care page](#).

HealthPathways: recently localised pathways

The HealthPathways team have now localised 546 pathways. The most recently localised pathway is:

- Recent Sexual Assault
- Previously Undisclosed Sexual Assault
- Sexual Assault Counselling
- Social Anxiety Disorder in Adults
- Clozapine
- Irritable Bowel Syndrome
- Acute Coronary Syndromes

To access HealthPathways please contact your WAPHA Primary Health Liaison or email the HealthPathways team at healthpathways@wapha.org.au

NPS MedicineWise: Update

NPS MedicineWise are now taking bookings for their new topic:

- Paediatric Asthma (in delivery from March 2020)

NPS MedicineWise educational visits are:

- independent, evidence based clinical updates for GPs about medicines and best practice prescribing
- free (funded by the Federal Govt.)
- accredited by RACGP & ACRRM
- able to be delivered 1:1 or to a small group
- delivered in 30mins with 1 GP, or please allow up to an hour for a group of up to 10
- available to be delivered in a practice visit or by video conference (virtual visit).

To book, [please click here to view the flyer](#) or visit the NPS MedicineWise website: www.nps.org.au

Cancer Council WA: Short courses and workshops – PaSCE semester 1 2020

Cancer Council WA has recently published the Palliative and Supportive Care Education (PaSCE) booklet for Semester 1 2020 with details of workshops and video conference events for the next 6 months.

They are excited to share these educational events with community partners and to be able to offer opportunities for the WA palliative care workforce to invest in their professional development.

A digital copy of the [PaSCE booklet is available here](#) featuring upcoming workshops for your reference.

An up to date calendar of events is available by [clicking here](#).

Changes to bulk billing incentives

From 1 January 2020, the rural classification system used to determine eligibility for Bulk Billing Incentives will change. Bulk Billing Incentives encourage medical practitioners to provide bulk billed services to vulnerable patient groups, such as people with concession cards and children under 16 years of age in rural and remote areas.

Classification of rural and remote areas is now being determined using the Modified Monash Model (MMM). Areas that are rural but were not classified under the old Rural Remote and Metropolitan Areas (RRMA) model will now have access to higher incentive items. Areas that were once classified as rural but are now metropolitan will no longer have access to the higher incentives but can still access the bulk billing incentives that attract a lower fee.

Bulk Billing Incentives – MM1		
MBS Item Number	Fee	Rebate (85%)
10990	\$7.50	\$6.40
64990	\$7.05	\$6.00
74990	\$7.05	\$6.00

Rural Bulk Billing Incentives – MM2-7*		
MBS Item Number	Fee	Rebate (85%)
10991	\$11.35	\$9.65
64991	\$10.65	\$9.10
74991	\$10.65	\$9.10

*Rebate amounts are the same across all MM2-7 locations.

To check your practices area classification go to [DoctorConnect Health Workforce Locator](#)

For more information on classifications contact rural.distribution@health.gov.au

For more information on Bulk Billing incentives go to [MBS Online](#)

Health promotion events

Year of the Nurse and the Midwife is 2020

The 72nd World Health Assembly designated 2020 as the International Year of the Nurse and the Midwife. The year will mark the 200th anniversary of the birth of Florence Nightingale.

Nurses and midwives play a vital role in providing health services. These are the people who devote their lives to caring for mothers and children; giving lifesaving immunisations and health advice; looking after older people and generally meeting everyday essential health needs. They are often, the first and only point of care in their communities. The world needs 9 million more nurses and midwives if it is to achieve universal health coverage by 2030.

That's why the World Health Assembly has designated 2020 the International Year of the Nurse and the Midwife.

Join WHO and partners including, the International Confederation of Midwives (ICM), International Council of Nurses (ICN), Nursing Now and the United Nations Population Fund (UNFPA) in a year-long effort to celebrate the work of nurses and midwives, highlight the challenging conditions they often face, and advocate for increased investments in the nursing and midwifery workforce.

Facts and figures

- Nurses and midwives provide a broad range of essential health services close to the community and in all levels of health facility.
- The world needs 18 million more health workers to achieve and sustain universal health coverage by 2030. Approximately half of that shortfall – 9 million health workers – are nurses and midwives.
- Globally, 70% of the health and social workforce are women. Nurses and midwives represent a large portion of this.
- Midwifery, where care includes proven interventions for maternal and newborn health as well as for family planning could avert over 80% of all maternal deaths, stillbirths and neonatal deaths.

For information on how to be involved, and resources about Year of the Nurse and the Midwife please visit: <https://www.who.int/campaigns/year-of-the-nurse-and-the-midwife-2020/get-involved>

Coming up soon...	
Heart Research Month	February
Ovarian Cancer Awareness Month	February
World Cancer Day	February 4
World Leprosy Day	February 26

Education and training

Visit our Webinars & Workshops page at www.practiceassist.com.au for the events calendar.

Diabetes in Practice for Nurses
Presented by Diabetes Qualified
Online learning

Rural Health West Paediatric Emergencies and Clinical Healthcare Scenarios (PEaCHS) Geraldton
Presented by Rural Health West
Friday 7 February

Rural Health West Advanced Life Support (ALS)
Presented by Rural Health West
Friday 21 February

Rural Health West Emergency Airway Skills Management (EAM) Carnarvon
Presented by Rural Health West
Friday 28 February

Rural Health West Neonatal Emergency Care (NEC) Northam
Presented by Rural Health West
Thursday 12 & Friday 13 March

Rural Health West Emergency Assessment Clinical Training (REACT)
Presented by Rural Health West
Thursday 19 & Friday 20 March

Rural Health West Toxicological Emergencies (TOX)
Presented by Rural Health West
Friday 20 March

WA Rural Health Conference 2020: Beyond 2020 Health Innovations
Presented by Rural Health West
Saturday 21 & Sunday 22 March

RACGP Practice Owners National Conference
Presented by RACGP
Saturday 16 & Sunday 17 May

APNA National Conference Webinar presented by Pen CS
Thursday 21 to Saturday 23 May

The Cutting Edge: Practice Nurse Skills Training Workshop
Presented by Clinical Training & Evaluation Centre (CTEC)
Saturday 6 June