



Practice Connect



Practice Assist
Strengthening general practice in WA

21 November 2017

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Key dates:

- 1 December 2017: National Cervical Screening Program renewal.
- 1 February 2018: Codeine becomes prescription medication.

Latest news and updates

Update in the Medicare Benefits Schedule for GPs claiming aftercare

In the most recent Medicare Benefits Schedule (MBS) update, general practitioners (GPs) providing post-operative treatment to a patient during the aftercare period will be eligible for Medicare benefits where the operation was performed by another practitioner. To view the November 2017 Medicare Benefits Schedule update, please visit the following website:

<http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/Downloads-201711>.

GPs are now able to charge an appropriate MBS consultation item, such as an item 3 or 23.

Please note, this rule applies only in the circumstance whereby the GP did not perform the initial procedure requiring post-operative treatment. Normal aftercare rules still apply when the GP who rendered the initial procedure requiring post-operative treatment provides the aftercare service.

Previously, Medicare would not normally pay for any consultations during an aftercare period, as the Schedule fee for most operations, procedures, fractures and dislocations listed in the MBS includes a component for providing aftercare.

For more information on this, please visit the following webpages. GP attendances and Aftercare:

<http://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=AN.0.71&qt=noteID&criteria=AN%2E0%2E71>

Post-operative Treatment:

<http://www9.health.gov.au/mbs/fullDisplay.cfm?type=note&q=TN.8.4&qt=noteID&criteria=TN%2E8%2E4>.

1800 2 ASSIST (1800 2 277 478) | support@practiceassist.com.au | www.practiceassist.com.au

General Practice accreditation resources

The Practice Assist Policy and Procedure Practice Manual is a full set of template policies and procedures designed to assist in achieving best practice standards in your Western Australian general practice.

The Policy and Procedure Manual has been created based on the model of the Royal Australian College of General Practitioners (RACGP) Standards for General Practices: 4th edition (the Standards). Each chapter of the manual correlates with a section of the Standards and addresses each 'criterion' of the Standards within the related chapter/s.

It is the intent of the manual that, by working their way through it and completing a comprehensive set of policies and procedures and of course implementing them in their practice - a general practice will meet each of the Standards.

The complete resource and instructions for use can be found here:

<http://www.practiceassist.com.au/The-Tool-Kit/General-Practice-Accreditation>.

Watch this space as we revise this set of policies and procedures to meet the new RACGP Standards for General Practices (5th edition). To view these standards, please visit the following website:

[https://www.racgp.org.au/your-practice/standards/standards-for-general-practices-\(5th-edition\)/](https://www.racgp.org.au/your-practice/standards/standards-for-general-practices-(5th-edition)/).

Accreditation tips

In a recent report provided by Australian General Practice Accreditation Limited (AGPAL), the number one non-compliance by Western Australian general practices being surveyed against the RACGP Standards for General Practices (4th edition) was Criterion **5.3.2B Vaccine Potency**: *The person with primary responsibility for cold chain management has this responsibility defined in their position description and can describe how the process used for cold chain management complies with the current edition of the National Vaccine Storage Guidelines.*

The reasons for non-compliance were:

- Inspection of the practice's vaccine refrigerator and discussion with the cold chain coordinator showed that vaccines are not managed in accordance with the *National Vaccine Storage Guideline: Strive for 5*.
- Review of practice policies highlighted a lack of documented policy in relation to cold chain management.
- Review of personnel records and policy documents highlighted a lack of documentation on roles and functions of the cold chain coordinator.

This Criterion is now addressed in the recently released 5th edition Standards, under **GP Standard 6 Vaccine potency**. Both editions of the Standards adhere to the same principles, however, in the 5th edition, the word 'must' is now utilised to demonstrate that the indicators are mandatory, including:

You must:

- have a team member who has primary responsibility for cold chain management;
- educate the team members with primary responsibility for cold chain management about their role;
- inform the practice team members so they know who is responsible for cold chain management;
- have a process to transfer cold chain management when the team member with primary responsibility is unavailable;
- maintain a cold management policy and procedure;
- have a team member who is responsible for the practice complying with the current edition of the *National Vaccine Storage Guidelines: Strive for 5*;
- maintain a cold chain management policy and procedure;

- have procedures that require a written record of all monitoring of refrigerators in which vaccines are stored, including the temperature; and
- maintain a cold chain management policy and procedure.

Practice Assist provides the following which may assist your practice in achieving these targets.

- Template policies and procedures for cold chain management: <http://www.practiceassist.com.au/The-Tool-Kit/General-Practice-Accreditation>.
- Vaccine fridge temperature record template: http://www.practiceassist.com.au/PracticeAssist/media/ResourceLibrary/Vaccine-Cold-Chain_Strive-for-5_A3-Daily-temperature-monitor-V2.pdf.

HealthPathways update

HealthPathways WA have now reached **335** live pathways, with one of the most recently published pathway being **Acute Rheumatic Fever (ARF)**. Currently three to five per cent of untreated or incorrectly treated group A streptococcus (GAS) sore throats will develop into Rheumatic Fever. Early and accurate diagnosis, together with the correct acute management of ARF is critical in preventing long term health problems.

To access the ARF pathway, please visit the following webpage:

<https://wa.healthpathways.org.au/71987.htm>

Regional WA have previously identified the necessity of localising the ARF pathway due to the high turnover of GPs, who may not be familiar with or have clinical experience in rural and remote settings. This pathway was developed with extensive collaboration from the Kimberley region and there are links within the pathway that refer to the Kimberley protocols.

The pathway details current best practice in terms of assessment of children presenting with suspected ARF and diagnostic criteria for high risk patients. The management section includes details on both clinical management and reporting requirements in metro and country areas. Patients who present with ARF will require follow up and secondary prophylaxis which are detailed in the pathway.

Digital Health update: CAT4 and Topbar

The following updates are now available for CAT4 and Topbar.

CAT4 Version 4.8.0

New Features/Improvements:

- Additional pathology codes for HbA1c, eGFR and ACR,
- Additional metformin medications for MD,
- Mediflex Billing integration support utility, and
- Health Care Home licence coded functionality for pilot sites.

Topbar Version 2.2.9

New Features/Improvements:

- MBS App has been redesigned and reviewed based on user feedback. Please refer to the User Guides for more information.
- Topbar PAT Programs functionality has been added. This is a new feature that allows the enrolment of patients into specific Programs for Quality Improvement Programs, where the practice has agreed to part of the Program.

- Health Care Homes App for practices enrolled in the trial is available. This is the first implementation of Topbar PAT Programs to facilitate the patient enrolment process and trial analysis.

Further Integration:

Zedmed - Topbar integration improvements (Topbar is now available for Zedmed version 26 or higher).

Bug Fixes:

- Add to CIS fixed for Zedmed 27.5.
- CAT Prompts: Ethnicity filter fixed.

Updates:

- Pathology codes updated for HBA1C, eGFR, ACR, URINARY CREATININE.

To install these updates, click Yes/OK when prompted when logging in to CAT4 and/or Topbar, or contact PenCS on 1800 762 993.

CATPlus Issue Found

CV Event Risk Calculation error in CAT 4.5.2 (extracts affected between May and August).

- The CAT4 version 4.5.2 release last year included an incorrect update to the Familial Hypercholesterolemia (FH) diagnosis mapping. The effect of this was to overstate the number of patients with FH. This has now been reverted in CAT 4.7.
- The flow on effect of this was to shift some patients in the CV Event Risk graph into the increased risk category (16-19% risk marked in yellow). The total number of patients in the graph was not affected.

Patches to fix this error

The number of patients with FH is very small and this is also a relatively new data item added in CAT 4.4 (16 November) so has not previously been included in the calculation. A patch will be released to ignore FH patients in any CAT data received from CAT 4.5.2 (data version 1_20).

CAT4: Please note, current CAT extracts are correct. The adjustment to ignore FH patients will be applied to extracts from CAT4 version 4.5.2 only. This will be available in CAT4 release version 4.8.1 (mid-November 2017).

**Please note that not all practices will be affected with this error depending on the version of CAT4 in your practice. If you are unsure or wish to clarify if it affects your extracts please contact Emma Costello, Digital Health Project Officer at WAPHA on 6272 4960.*

NPS MedicineWise update

NPS MedicineWise are now taking bookings for their next topic: **Neuropathic pain: touchpoints for effective diagnosis and management**. The topic will be delivered from March 2018.

The program provides a simple approach to diagnosing and treating neuropathic pain with confidence. You'll be presented with the latest evidence-based guidance on selecting medicines, including non-pharmacological strategies to consider when developing individualised management plans for the treatment of neuropathic pain.

Educational visits are available as:

- **One-on-one:** a 30-minute in-practice discussion for GPs, tailored to individual learning needs. We also offer virtual visits via Skype so that GPs who find it difficult to schedule an in-practice visit can still benefit from our visiting program.
- **Small-group:** a 1-hour in-practice discussion for up to 10 health professionals (GPs, pharmacists and nurses).

To book an NPS educational visit, contact Nicole Humphry, NPS MedicineWise Coordinator at WAPHA on 08 6272 4921 or by email Nicole.Humphry@wapha.org.au



Whilst all care has been taken in preparing this document, this information is a guide only and subject to change without notice.

Choose Well campaign

Can you share our social media campaign?

In the lead up to Christmas and summer holidays, Western Australians are being urged to plan ahead and build a relationship with a GP, rather than heading to emergency departments to address non-urgent, minor ailments.

“Choose Well, When You’re Worried Sick” is a three-month awareness campaign being run by WA Primary Health Alliance to inform the public on the medical services available at general practices, emergency departments, and elsewhere. This will help them to make the best choice in the event of illness, injury or emergency.

We are reaching out to general practices in the Perth Metropolitan area that run a Facebook page, or other types of social media accounts, hoping you can share some of our campaign content, once a week for three months, starting from late November.

The content will inform individuals of the important role a GP plays in their health care, encouraging them to visit their GP who knows their medical history, rather than making unnecessary visits to emergency departments.

It will focus on Perth metropolitan and major regional centres, using media screens, brochures, posters, social media and a website, which you can visit here: www.myhealthcareoptions.com.au.

If you wish to find out more about the campaign and how you can be involved, please contact Fiona Clark, Corporate Affairs Advisor at WAPHA at communications@wapha.org.au or on 0437 563 735.

Rescheduling of codeine products

From 1 February 2018, medicines that contain codeine will no longer be available without prescription. This decision was made by the Therapeutic Goods Administration (TGA), based on evidence that codeine is commonly misused.

Low-dose codeine (less than 30 mg) is currently available in pharmacies over the counter, for consumers to self-administer. Formulations include cough and cold preparations, and analgesic preparations combined with other pain relief medicines such as aspirin, paracetamol or ibuprofen. Codeine is an opioid drug closely related to morphine and regular or long-term use, for example for chronic pain, has led to some consumers becoming dependant on codeine without realising it.

Codeine dependence can lead to severe adverse health outcomes, including liver damage and death. In addition, some individuals, particularly children, can experience serious adverse reactions when given codeine, including breathing difficulty and death. In 2015, an Australian study found codeine-related mortality more than doubled over the ten-year period from 2000 to 2009. Given these issues, the TGA has decided the risks associated with codeine use are too high without oversight from a doctor.

The change has been introduced through amendments to The Standard for the Uniform Scheduling of Medicines and Poisons (the Poisons Standard), deleting codeine entries from Schedule 2 (Pharmacy Medicines) and Schedule 3 (Pharmacist Only Medicines), leaving only the codeine entries in Schedule 4 (Prescription Only Medicine) and Schedule 8 (Controlled Drug). The changes are enacted into law through local state and territory scheduling legislation which will come into effect early next year.

A range of resources are available to support health professionals and consumers with the change. For further information please view the attached Codeine Fact Sheet: http://www.wapha.org.au/wp-content/uploads/2017/11/Codeine-Fact-Sheet_Health-Professionals.pdf or visit www.nps.org.au or www.tga.gov.au/codeine-info-hub.

National Indigenous Bowel Screening Project update

National Pilot and Recruitment

In 2018, a National Pilot will begin, to test an alternative way for Aboriginal and Torres Strait Islander people to access the National Bowel Cancer Screening Program (NBCSP). Consultations conducted in 2016 showed that many of the barriers to screening through the NBCSP may be reduced if screening kits were distributed through local primary health care centres, rather than mailed directly to individuals, and supported this being explored further. The National Pilot of an Alternative Pathway for the NBCSP for Aboriginal and Torres Strait Islander people will allow 50 primary health care centres to distribute kits to their eligible patients over a 12-month period.

Recruitment of health centres for the National Pilot will begin in early 2018, and be by Expression of Interest. Recruitment was planned to begin in November but has been deferred to early 2018 following feedback from key stakeholders. Further information about the National Pilot will be released over coming months via email and through the following communication channels:

- The website: <https://www.indigenousbowelscreen.com.au/>,
- Facebook: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4704976/> and,
- Twitter: https://twitter.com/NICaN_Australia?lang=en.

Information Security Guide for small healthcare businesses

The Australian Digital Health Agency and the Australian Government's Stay Smart Online service have produced a guide *Information Security Guide for small healthcare business*. The guide is written in simple terms and is intended for non-technical health professionals regarding issues such as privacy, passwords, software updates, back-ups, network and device security and staff security awareness.

Every healthcare business deals with consumers, suppliers and employees, and it is important that the information and systems your business uses to access and store this information is protected from misuse or fraudulent purposes. The guide will assist in identifying areas of concern and providing methods to prevent such events.

The *Information Security Guide for small healthcare businesses* can be downloaded from:

<https://www.digitalhealth.gov.au/about-the-agency/digital-health-cyber-security-centre/information-security-guide-for-small-healthcare-businesses>.

Education and Training

What is new in Meningococcal Disease Vaccination? – 22 November 2017

This webinar will update participants with the latest facts about Meningococcal disease and the vaccination. Topics covered include possible progression pathway of disease, the Meningococcal disease in Australia, risk factors, vaccination recommendations and the different vaccines, vaccine effectiveness and safety and the management of Meningococcal disease.

Date: Wednesday, 22 November 2017
Venue: Online – join via your computer.
Cost: Free
Time: 4:00pm
Registration: For more information and to register, please visit the following webpage:
<https://login.redbackconferencing.com.au/landers/page/e3a277>.

National Indigenous Bowel Screening Project Update webinar – 22 November 2017

This webinar aims to give health professionals the skills, knowledge and confidence to encourage Aboriginal and Torres Strait Islander patients to participate in the National Bowel Cancer Screening Program. Topics covered include bowel cancer and bowel cancer screening, including barriers to screening, new resources available and details surrounding the National Pilot to trial an Alternative Pathway to bowel screening for Aboriginal and Torres Strait Islander people.

Date: Wednesday, 22 November 2017
Venue: Online – join via your computer.
Cost: Free
Time: 3:30pm
Registration: For more information and to register, please visit the following webpage:
<https://www.indigenousbowelscreen.com.au/resource/webinar-encourage-patients-bowel-screening-test/>.

GP Palliative Approach Webinar – 27 November 2017

The Program of Experience in the Palliative Approach (PEPA) provides opportunities for the primary health care workforce to improve confidence and develop knowledge and skills in working with people with palliative care needs.

Date: Monday, 27 November 2017
Venue: Online – join via your computer.
Cost: Free
Time: 7:00 – 8:30pm
Registration: <http://www.ruralhealthwest.com.au/general-practice/professional-development/conferences-events/2017/11/27/default-calendar/webinar---palliative-care-approach>

Therapeutic Goods Administration workshop on changes to Codeine access- 30 November 2017

The Department of Health Therapeutic Goods Administration (TGA) is working in collaboration with Primary Health Networks and pain specialists to ensure health professionals dealing with chronic and acute pain management have alternative strategies to use in preparation for 1 February and beyond. The TGA invites you to attend an evening workshop on the **up-scheduling of codeine**, and the opportunity to engage with senior TGA representatives as well as leading specialists in acute and chronic pain management and addiction.codeine dependence

Date: Thursday, 30 November 2017
Venue: Fraser's Restaurant, 60 Frasers Ave, Kings Park WA
Time: 6.00pm - 9.30pm

Registration: If you are interested in attending, please email RSVPHPRGExecutive@health.gov.au

For more information please contact support@practiceassist.com.au

Hierarchic Dementia Scale – Revised (HDS-R) Train the trainer workshop- 6 December 2017

This workshop is for qualified health professionals working in acute, residential or community settings, particularly those responsible for assessing and creating care plans for people living with dementia. This workshop will explore the theory underpinning HDS-R, how to assess people with dementia using the HDS-R and combine the results of this assessment to provide person-centred interventions.

Date: Wednesday, 6 December 2017
Venue: Seminar Room 2, Technology Park Function Centre, 2 Brodie Hall Drive, Corner Hayman Road, Bentley, WA
Cost: Free
Time: 8:30am – 4:00pm
Registration: For more information and to register, please visit the following webpage: <https://register.eventarc.com/39155/hierarchic-dementia-scale-revised-hds-r-train-the-trainer-workshop-perth>.

GP Palliative Approach Workshop

The Program of Experience in the Palliative Approach (PEPA) provides opportunities for the primary health care workforce to improve confidence and develop knowledge and skills in working with people with palliative care needs.

Date: Thursday, 14 December or Tuesday, 19 December
Venue: Cockburn Integrated Health or Bendat Parent & Community Centre
Cost: Free
Time: 6:00 – 8:00pm
Registration: For more information and to register, please see the following attachment: http://www.wapha.org.au/wp-content/uploads/2017/11/171214_Flyer_Invitation_WAPHA.pdf

GP Urology Masterclass – 17 February 2018

Hosted by the Perth Urology Clinic, this interactive and educative day will discuss female urology and OAB, urological stone disease, surgical andrology, male LUTS and BPH, urological oncology and, non-surgical cancer therapy. This event attracts Full Category 1 40 Point GP accreditation points.

Date: Saturday, 17 February 2018
Venue: UWA Club Crawley, WA
Time: 9:00am – 4:30pm
Registration: For more information and to register, please contact Angela Whittington on angela@perthurolgyclinic.com.au or call 1800 487 656.

National Indigenous Bowel Screening Project Online Module

The National Indigenous Bowel Screening Project Online Module for Aboriginal and Torres Strait Islander Health Workers and other primary care providers for the is now available on the website: <https://www.indigenousbowelscreen.com.au/>.

You can complete the online module here: <https://www.indigenousbowelscreen.com.au/resource/new-online-module/>.

The website is the main point for information on Indigenous bowel screening and associated activities and will continue to be updated with information and resources.

Palliative Care Online Training

This free online training is designed to support you to apply the Guidelines for a Palliative Approach to Aged Care in the Community (COMPAC) to your practice. It includes the knowledge, skills and values that are required to communicate and contribute to the care of clients in the community who have a life limiting illness and or are approaching the final stages of the normal ageing process.

For more information and to register, please view the following attachment: <http://www.wapha.org.au/wp-content/uploads/2017/11/Palliative-Care-Online-Training.pdf> or visit the Palliative Care Training website: <https://www.pallcaretraining.com.au/>.

Health Promotion Events in December

Is your practice looking for a health promotion activity for your practice? Each month we provide a list of upcoming health promotion activities for the next month along with resources and contact details.

World AIDS Day Australia – 1 December 2017

World AIDS Day is held every year to continue to raise awareness across the world and in communities about the issues surrounding HIV and AIDS. It is also a day for people to show their support for people living with HIV and to commemorate people who have lost their life to AIDS. This website contains resources, a register of World AIDS Day events, and information on HIV and AIDS.

Website: <http://www.worldaidsday.org.au>