

Practice Connect Latest news and updates

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GP Pfizer Rollout Advice and EOI Update

On 5 July, Health Minister Greg Hunt referenced that GPs would begin administering the Pfizer vaccine. This followed an EOI process last month.

- In WA, 137 general practices selected by the Commonwealth will begin administering Pfizer (Comirnaty) throughout July.
- The Pfizer Information Pack has been created as an addition to the updated Onboarding Pack for those practices administering both Pfizer (Comirnaty) and the COVID-19 AstraZeneca vaccine.
- Participating COVID vaccination general practices who have not yet expressed an interest to administer Pfizer (Comirnaty) are invited to do so via this link.
- The Pfizer (Comirnaty) rollout is expected to ramp up in the coming months.





Primary Care Vaccine Rollout Provider Bulletin: 5 July

The latest vaccine provider update contains the following information from the Australian Government Department of Health.

Key messages:

- Mandatory COVID-19 vaccination for residential aged care staff.
- Consumables update: Syringes used for AstraZeneca vaccine.

Corrections from the previous bulletin:

- Stock management reporting:
 - The Bulletin dated 28 June 2021 contained incorrect information on what sites should be reporting in the stock management report.
 - Please report the total number of unused doses you have on hand at the time of reporting.
- Online proof of COVID-19 vaccinations:
 - The links on how patients can get their vaccination information have been included: AIR and Services Australia.

AusVaxSafety hits 1 million mark in COVID-19 vaccine safety survey analysis

More than 1 million, day-3, post-vaccination safety surveillance surveys have now been completed by COVID-19 vaccine recipients across Australia as part of the AusVaxSafety COVID-19 safety surveillance program.

This milestone has been made possible by funding from the Australian Government Department of Health, collaboration with state and territory health departments, AusVaxSafety surveillance tools Smartvax and Vaxtracker, and COVID-19 vaccine recipients who completed the survey.

Led by the National Centre for Immunisation Research and Surveillance (NCIRS), AusVaxSafety is conducting comprehensive active safety monitoring of all COVID-19 vaccines used in Australia to ensure that they are safe and to provide transparent data to healthcare providers and the public.

The surveys are designed by vaccine experts and give participants the opportunity to report any adverse events they may have after receiving the COVID-19 vaccine, via SMS or email. Once a survey is completed, de-identified data is provided to AusVaxSafety to be analysed and monitored for safety signals in near-real time. The data is analysed by brand, time since vaccination, dose and other key demographics, which provides a complete picture of how the vaccines are performing in real-world conditions.

AusVaxSafety releases updated COVID-19 vaccine safety data, including data specific to Aboriginal and Torres Strait Islander people, to the public every week. To date, the data reported is consistent with those seen in clinical trials and surveillance in other countries, reaffirming the safety of the vaccines currently in use in Australia.

View the latest AusVaxSafety COVID-19 safety data.



COVID-19 Temporary MBS items have been extended, plus changes effective 1 July

Temporary COVID-19 MBS telehealth items that commenced on 13 March 2020 have now been extended to 31 December 2021. From 1 July 2021, the previous broad range of temporary telephone services have been replaced with a smaller number of MBS items. Video items are unchanged.

New GP services include:

- 91890 short telephone consultation item (< 6 minutes) for straightforward care, e.g. repeat prescriptions and diagnostic referrals.
- 91891 longer telephone consultation item (> 6 minutes+) for more complex attendances.

Plus, four new time-based items for blood-borne viruses, sexual or reproductive health consultations (video and phone).

New OMP services include:

91892 – short telephone consultation item (< 6 minutes).

Plus, eight new time-based items for blood-borne viruses, sexual or reproductive health consultations (video and phone).

Existing relationship – when it applies and when it doesn't

In most instances, the temporary MBS telehealth items are available to telehealth providers for a range of consultations provided to a patient where there is an *existing or established relationship*.

An existing relationship is defined as the patient having seen the same practitioner for a face-to-face service in the 12 months preceding the telehealth service, or having seen a doctor or other health practitioner (such as a practice nurse or Aboriginal and Torres Strait Islander health worker) at the same medical practice for a face-to-face service during the same period.

The existing relationship requirement **does not apply** for:

- children under the age of 12 months
- people who are homeless
- patients living in a COVID-19 impacted area
- patients receiving an urgent after-hours (unsociable hours) service
- patients of medical practitioners at an Aboriginal Medical Service or an Aboriginal Community Controlled Health Service.

Plus, from 1 July 2021, additional exemptions to the existing relationship requirement have been introduced for patients accessing MBS items for:

- blood-borne viruses, sexual or reproductive health consultations (new items)
- pregnancy counselling services (under MBS Group A40).

For more information and the full range of fact sheets, visit MBS online.



Allocation of surgical masks from the National Medical Stockpile

WA Primary Health Alliance has been advised by the Australian Department of Health that the National Medical Stockpile is a strategic reserve and not a general supplier of personal protective equipment (PPE). The Stockpile is only intended to provide PPE where commercial supply is unavailable and there is a demonstrated need or clinical advice for its use.

We appreciate that some providers have been accessing the Stockpile regularly until now.

Due to the widespread commercial availability of PPE supply, as per Government advice, WA Primary Health Alliance will request a declaration from your organisation as proof it has been unable to source a commercial supply.

WA Primary Health Alliance can only provide PPE where commercial supply is unavailable and requests meet the following criteria:

- There is no local supply available commercially.
- The people coming to your practice are more likely to have been exposed to COVID-19.
- Your practice has an unusual number of patients who have respiratory symptoms.

WA Primary Health Alliance will provide surgical masks to community pharmacies if they meet both of the criteria below:

- There is no local supply available commercially.
- Staff have significant contact with people who have fever and respiratory symptoms.

If you are experiencing difficulties obtaining PPE from a commercial supplier, please email WA Primary Health Alliance via practiceassist@wapha.org.au addressing the above points.

Checking your patient's immunisation history

Immunisation providers are reminded to check the Australian Immunisation Register (AIR) for each booked patient to ensure they are booked for:

- the correct vaccine (brand and second doses)
- the correct timing.

From 1 July 2021, under the Australian Immunisation Register (AIR) Act, it is now mandatory to report all National Immunisation Program (NIP), COVID-19 and influenza vaccines administered to the AIR.'

If your practice software does not automatically report vaccinations to the AIR, you will need to report these vaccinations directly using the AIR website. Information on how to set up access to AIR can be found here.

Detailed information on how to check and upload to the AIR is found on the HealthPathways COVID-19 Vaccination Procedure pathway webpage.



Easy access to immunisation details in your practice software is now available through My Health Record

The My Health Record consolidated immunisation view is now accessible through most clinical information systems without the need for any software updates.

This can provide clinicians with quick and easy access to a patient's immunisation details, including their COVID-19 vaccination status or their children's National Immunisation Program status, without having to go through time-consuming logins for separate systems.

It is also easier to view vaccine details, recorded medical contraindications and other important information from the Australian Immunisation Register (AIR).

Step-by-step instructions on accessing the consolidated immunisation view of your patient's My Health Record Document List is available from the My Health Record clinical software summary sheets page.

More information including how to access a consolidated immunisation information through the National Provider Portal, is available on the My Health Record website.

You can also direct patients interested in checking their immunisation information through My Health Record to the My health Record website for more information. The Australian Digital Health Agency reports 64,000 views have already been recorded.

If you have any questions about the new immunisation view, or for any other queries relating to My Health Record, please email the WAPHA Digital Health Team.

Aboriginal and Torres Strait Islander health NAIDOC

The National Aboriginal Indigenous Week of Celebration (NAIDOC Week) is taking place from **4 to 11 July 2021**. NAIDOC Week is a great opportunity for practices to participate in a range of activities and build relationships with their local Aboriginal community.

For more information about the week of celebration, including the printable poster and local events in your area, visit the NAIDOC website.

Use NAIDOC week as a focus on supporting Aboriginal patients

- Indigenous Health Project Officers are available locally to assist in improving cultural competency. See HealthPathways for contact details.
- WAPHA Practice Support staff can assist in identifying relevant opportunities for quality improvement activities.





Aboriginal and Torres Strait Islander health NAIDOC (cont.)

Promote the availability of COVID-19 vaccines for Aboriginal people

Aboriginal and Torres Strait Islander adults have been identified as a priority group for the COVID-19 vaccination rollout program. This is because of the higher risk of getting very sick and developing serious illness from COVID-19 due to a number of factors. This may include a higher rate of chronic health conditions and in some cases crowded-living conditions, which increases the risk of spreading the infection. Key COVID-19 vaccination health updates for Aboriginal people are available here.

All Aboriginal and Torres Strait Islander people aged 16 and over are able to access a COVID-19 vaccine.

Department of Health WA Aboriginal Sector Communication Update 15 June 2021

- 153 cases (0.52%) of all Australian positive cases notified in the National Notifiable Diseases Surveillance System (NNDSS) were Aboriginal people.
- 10% (16 cases) of Aboriginal cases required hospital admission, while 90% (134 cases) required quarantine/isolation. No deaths were recorded among Aboriginal positive cases.
- The median age of Aboriginal positive cases is 31.5 years; compared to 36 years for non-Aboriginal people.

Maximise key initiatives

Due to the life expectancy gap for Aboriginal people there are a number of key initiatives available. HealthPathways is a great resource for practices seeking to provide optimal care for their Aboriginal patients. To find out more, view the Aboriginal Health Initiatives pathway.

Practice Incentive Payment – Indigenous Health Incentive (PIP IHI)

Registration for both PIP-IHI and the PBS Co-Payment occur on the same form but are two distinct initiatives. Aboriginal patients with a chronic condition within general practice benefit from being registered for the PIP IHI and Close the Gap (CTG) PBS Co-Payment. A PIP IHI registered Practice will receive payments up to \$500 per calendar year based on registration of an Aboriginal patient aged 15 or older for PIP IHI, and the chronic disease management and total patient care provided in a calendar year.

'The patient registration payment is paid once per patient, per calendar year for patients registered between 1 January and 31 October. If a patient is registered for the first time in November or December of a year, they'll be registered from 1 January to 31 December of that year, as well as for the following year. Practices will receive one patient registration payment of \$250 in the February payment quarter of the following year.' (PIP IHI Guidelines, Feb 2014).

Consider recalling currently registered PIP IHI patients who have a chronic condition for renewal of PIP IHI registration from **November** and running a report on practice software on Aboriginal patients with a chronic disease who are eligible for the additional support provided via PIP IHI.

HealthPathways includes a detailed breakdown of the associated financial support and target level of care (tiered payments) required to achieve the maximum payment.





Aboriginal and Torres Strait Islander health NAIDOC (cont.)

The PBS Co-Payment Program and changes from 1 July 2021

The PBS Co-Payment Measure helps reduce the cost of PBS medicines for Aboriginal patients of any age. Patients most likely to benefit include those who will experience setbacks in the prevention or ongoing management of chronic disease if they do not take the prescribed medicine; and those who are unlikely to follow their medicines routine without this help.

All prescriptions for PBS medicines are covered, whether used to treat chronic or acute medical conditions. **Note**: patients registered for the PBS Co-Payment alone only need to be registered once, and not annually.

Key changes to the PBS Co-Payment Program being implemented from 1 July 2021

- Any PBS prescriber can register eligible Aboriginal and Torres Strait Islander people for the Program if they are not already registered.
- PBS prescribers will no longer be legally required to write or electronically print 'CTG' on eligible PBS prescriptions for registered Aboriginal and Torres Strait Islander people. However, annotation of a PBS script will help Community Pharmacies and Section 94 Approved Private Hospital pharmacists know that the patient is registered for the program, when dispensing the medicines.
- General Schedule PBS prescriptions issued by PBS prescribers within public hospitals will now be eligible for the Program, provided they are dispensed by a community pharmacy or Section 94 Approved Private Hospital pharmacy.

Find out more in the Department of Health fact sheets for health professionals or Aboriginal patients.

Integrated Team Care (ITC) Program

The ITC Program is a national funded service providing a clinically qualified care coordination team to support general practice in the care of Aboriginal patients with a chronic condition who require complex or multidisciplinary care.

The ITC Program is also able to provide financial assistance where a person would not otherwise be able to access essential services and medical aids in a clinically appropriate timeframe. For example, by assisting with the cost of medical appointments, or helping with the cost of specific medical aids and equipment.

The service is provided in partnership with an individual's GP, and in alignment with their GP Management Plan.

Health Assessment for Aboriginal people (MBS715)

- An early detection and prevention tool available to all Aboriginal patients.
- Entitles patients to access additional funded services, in addition to those linked to a GP Management Plan and Team Care Arrangements:
 - up to five allied health follow-up appointments (items 81300 81360)
 - up to 10 practice nurse or Aboriginal Health Practitioner follow-up (item 10987)



Aboriginal and Torres Strait Islander health NAIDOC (cont.)

PBS List for Aboriginal patients

This list details all available PBS items that are limited to Aboriginal people, as Authority PBS prescriptions. The list is brand specific, e.g. Spren100, Chlorsig, Ferro-f-tab.

For further information, please visit the Aboriginal Health Initiatives pathway.

Digital records support preservation of bush medicine information

To mark NAIDOC Week 2021, the Australian Digital Health Agency has released a new video showing the importance of bush medicine in Indigenous culture and health and how My Health Record can be used to manage that information for the holistic care of patients.

Director of Clinical Services and Senior Medical Officer at Gurriny Yealamucka Health Service in Yarrabah Queensland, Yued Noongar man from Dandaragan WA, Dr Jason King, said "I ask my patients what bush medicines they are using and include that information in the medical records in our clinic and this feeds into My Health Record."

Visit the Australian Digital Health Agency website to read the full story and view the new video.



Indigenous health checks and follow-ups

Aboriginal and Torres Strait Islander people can receive an annual health check, designed specifically for Indigenous Australians and funded through Medicare.

This Indigenous-specific health check was introduced in recognition that Indigenous Australians, as a group, experience some particular health risks.

The aim of the Indigenous-specific health check is to encourage early detection and treatment of common conditions that cause ill health and early death, for example, diabetes and heart disease.

For more information, visit the Australian Institute of Health and Welfare website.



Good News Story: A moment in the life of an ITC Outreach Worker

Roslyn (known as Ros) is an Integrated Team Care (ITC) Outreach Worker with Esperance Hope Community Services.

Hailing from Mukinbudin in the Wheatbelt, Ros is one of eight children. Her dad was from the stolen generation, and her mum attended Sister Kate Mission until she was 13.

Growing up, Ros was always busy collecting and crushing quartz to sell for garden beds and ceramic toilets, in addition to helping her stepfather run the piggery after school.

In her Outreach Worker role, Ros helps Aboriginal people make better use of available health care services including care coordination, multidisciplinary care and self-management support. To ensure clients attend all appointments she liaises with GPs, Renal Physicians, Nephology Nurses, Mental Health Services and other health professionals, which demonstrates the diversity and complexity of the Outreach Worker role.



Ros said, "I enjoy working with other health service providers to ensure my clients get the best care. Managing long-term illness can be difficult and stressful. Being able to support clients with chronic health conditions, who need additional care from a range of health and specialist services is very rewarding. Listening to my clients has given me confidence because they look to me for help, even when I am not at work. This makes me feel good because I know that I'm doing something right."

Celebrating the achievements of the Health Care Homes (HCHs) Trial

As the WA Primary Health Alliance (WAPHA) Health Care Homes (HCHs) Trial drew to a close, we were delighted to welcome our participating practices to celebrate their achievements over dinner at The Royal Perth Yacht Club on 24 June.

Over 30 GPs, practice staff and other key people involved in the Trial joined us for an informal dinner discussion on the valuable learnings that will inform the Government's current ongoing primary care reform.

This included the Trial's innovative bundled payment model for patients with chronic or complex conditions and the team-based, patient-centred approach, which will continue to be at the forefront of the Government's primary health care system.





Health Care Homes (HCHs) was established as part of the Australian Government Healthier Medicare 2016-17 Budget measure to improve patient outcomes for patients with chronic and complex conditions.

This measure aimed to establish HCHs in 10 Primary Health Network (PHN) regions in a staged rollout. HCHs commenced service delivery from 1 December 2017 to 30 November 2019 (which was extended to June 2020 for patient enrollments).

During this time over 10,000 patients were enrolled across 189 general practices and Aboriginal Community Controlled Health Services throughout Australia.

In WAPHA's Perth North PHN, more than 500 patients were enrolled across 11 general practices who utilised the Trial's INCA shared care training platform to:

- develop 343 Shared Care Plans
- review 396 Shared Care Plans
- enable patients to access 248 pharmacist referrals, 710 allied health referrals and 157 specialist referrals.



The team from Brookside Medical Centre with Practice Principal Dr Ashish Khanna.



Hay Street Medical Practice Principal, Dr Jennifer Yeoman, with WAPHA Health Care Homes Project Manager, Adele Hyslop.

WAPHA would like to thank participating practices for their tireless work and enthusiasm in joining us on the HCHs journey. The Australian Government will continue to draw on the lessons learnt to inform and guide their implementation of the Primary Health Care 10 Year Plan.

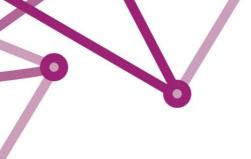
Voluntary Assisted Dying has come into effect in WA

Voluntary Assisted Dying (VAD) came into effect in Western Australian on 1 July 2021, enabling eligible people to request access to assisted dying through a medical practitioner. Every eligible Western Australian who wants access to VAD can be assisted by the Statewide Care Navigator Service which is staffed by experienced health professionals.

Key points in the Voluntary Assisted Dying (VAD) process include:

- a person can only request access to VAD themselves
- two medical eligible practitioners must independently assess the request
- a person must make three separate requests to access VAD to confirm their intent
- a person can change their mind at any time.

During the 18-month implementation period, services such as the Statewide Care Navigator Service, mandatory training for participating doctors and nurse practitioners, the Statewide Pharmacy Service and the Voluntary Assisted Dying Board were established.





Strong safeguards are in place to ensure a person's request for access is voluntary and they are not being pressured. Patients must be informed of treatment and palliative care options, as well as the voluntary assisted dying process that includes 10 stringent steps.

Special attention has also been paid to ensuring equitable access for all Western Australians, regardless of where they live through the WA Voluntary Assisted Dying Regional Access Support Scheme which provides funds to support access to VAD services for regional and remote residents. Funds can support patients to travel to see a doctor or have a doctor travel to them.

The Managing Voluntary Assisted Dying Policy has now come in to effect for Health Service Providers.

To access more detailed information and newly updated resources for health practitioners and consumers, visit the WA Department of Health website.

Manage My Care app - supporting patients to manage their WA health outpatient appointments

Manage My Care is an app and web portal that supports patients and carers to manage their WA Health outpatient appointments and referrals. The free, easy-to-use mobile app allows users to:

- view upcoming outpatient appointments and current referrals 24/7
- update personal details such as address, phone number and next of kin
- receive notifications about their outpatient appointments.

Manage My Care can be downloaded from the App Store, Google Play, or accessed by visiting the Healthy WA website. It is currently available for outpatient appointments at the following sites, and preliminary work is underway to roll-out across further sites.

- Albany Health Campus
- Bentley Health Service
- Fiona Stanley Hospital
- Fremantle Hospital
- King Edward Memorial Hospital
- Osborne Park Hospital
- Perth Children's Hospital
- Rockingham General Hospital
- Royal Perth Hospital
- Sir Charles Gairdner Hospital

By using the Manage My Care app, patients will have timely updates about their outpatient care, be less reliant on receiving posted appointment letters, be able to access routine information and update their personal details at a time convenient to them.



For more information, visit the HealthyWA website or email managemycare@health.wa.gov.au



GP Care Coordination Payment expanded

From 1 July 2021, GPs providing care coordination for White Card Holders with accepted mental health conditions will now be able to claim the Coordinated Veterans Care (CVC) payments. The expansion of the CVC program aims to ensure long term health improvements for this cohort.

The CVC Program has already proven effective for Gold Card holders in reducing unplanned hospitalisations and improving the quality of life for participants.

For more information, visit the Department of Veterans' Affairs (DVA) website.



Treating veterans and their families during the Coronavirus pandemic

With a number of states and territories under new COVID-19 restrictions and lockdown measures, healthcare providers are encouraged to visit the Department of Veterans' Affairs (DVA) website for information on treating veterans during the Coronavirus pandemic including:

- support services available to veterans during the pandemic, such as:
 - mental health
 - access to prescriptions and pharmaceuticals
 - shopping assistance
- how to claim for telehealth consultations.



Visit the Department of Veterans' Affairs (DVA) website for more information on treating veterans during COVID-19.

COVID-19 Vaccination Training Modules Updated

Updates have occurred in the COVID-19 vaccination training program on Friday 2nd July. Module progress and completion have not been affected.

You are expected to login and view the new information. A summary of the updates can be found in the announcement forum. All changes within the modules are identified by 'NEW' in red.

You can log in to the training modules here.



COVID-19 HealthPathways Updates

The following content updates have now been published on the HealthPathways site:

COVID-19 Vaccination Procedure

- Updated cold chain storage and handling for Pfizer (Comirnaty) vaccine under preparing for the vaccination section.
- Addition of eligibility priority group drop box under eligibility and screening with a link to a list
 of specified underlying medical condition and information on proof of eligibility requirements.
- Updated Australian Department of Health COVID-19 vaccination Weighing up the potential benefits against risk of harm from COVID-19 Vaccine AstraZeneca fact sheet (30 June).

COVID-19 MBS Items and COVID-19 Telehealth

 Updated Clinical Editor's note with information on the extension of the temporary MBS telehealth services to 31 December 2021 with link to the updated MBS online fact sheets.

Newly Localised Pathways:

- Voluntary Assisted Dying (VAD) pathway has been published onto the HealthPathways WA site in line with the legislation's commencement in Western Australia on 1 July 2021.
- Eating Disorders Treatment Plan (EDP)



To access HealthPathways, email the HealthPathways team at healthpathways@wapha.org.au

National Cervical Screening Program (NCSP) communication and impact on testing

The National Cervical Screening Program (NCSP) has advised that activity within the Program may result in a small increase in appointments booked for cervical screening and increased requests for self-collected HPV tests, from July to October 2021.

What you need to know:

- A pilot of new correspondence is being undertaken which aims to improve participation by under screened cohorts and promote self-collection.
- This correspondence will be distributed to around 400,000 cervical screening participants throughout May – July 2021.
- There will be an increased demand on cervical screening tests during this period (July to October 2021), including self-collect vaginal swabs.

For more information, email queries regarding the pilot to NCSPCommittees@health.gov.au





Updated guidelines for the management of anaphylaxis

The Australian Society of Clinical Immunology and Allergy (ASCIA) has updated its guidelines for the acute management of anaphylaxis. The updated guidelines include information on the signs and symptoms of allergic reactions, immediate actions for anaphylaxis, anaphylaxis triggers, adrenaline administration and more. The new guidelines can be viewed here.

Ending Rheumatic Heart Disease

Rheumatic Heart Disease (RHD) is the leading cause of cardiovascular inequality in Australia, and continues to contribute to the gap in life expectancy and quality of life between Aboriginal and Torres Strait Islander and non-Indigenous Australians. RHD is a preventable disease but unfortunately the burden of Acute Rheumatic Fever (ARF) and RHD continues to grow among Aboriginal and Torres Strait Islander people in Australia. We need to take urgent action.

The RHD Endgame Strategy aims to eliminate RHD in Australia by 2031. This can be achieved through the implementation of recommended prevention strategies, including reducing household crowding, improving hygiene infrastructure, strengthening primary healthcare, and increasing uptake of secondary prophylaxis.²

General practices across WA have a critical role in helping to eliminate RHD. To help eliminate RHD by 2031, your practice could:

- display posters and information available from RHD Australia at your practice. Available
 resources include posters for preventing ARF, as well as information for people living with
 ARF and RHD who might be concerned about COVID-19
- ensure the GPs at your practice are aware of the updated ARF pathway on HealthPathwaysWA
- encourage practice staff to complete the free e-learning available from RHD Australia. This e-learning is suitable for GPs, nurses, Aboriginal and Torres Strait Islander Health Workers and Practitioners, and other health professionals
- support your Aboriginal and Torres Strait Islander patients to have an annual health check utilising the Aboriginal and Torres Strait Islander Peoples Health Assessment available through the Medicare Benefits Schedule (MBS). More information about supporting your Aboriginal and Torres Strait Islander patients can be found on Practice Assist.

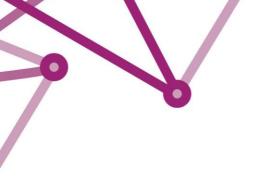
Over the last two editions of Practice Connect, we have provided information about Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease (RHD).

This is the final article in a series of three articles focusing on ARF and RHD. You can read the previous articles on prevalence, diagnosis and treatment here and mandatory reporting here.

You can also read a GP's perspective in the June edition of our GP Connect newsletter.

¹ END RHD, https://endrhd.org.au/about-rhd/

² RHD Endgame Strategy





Provider Connect Australia - helping healthcare providers stay connected

Healthcare provider organisations around the country can now update information about their healthcare services and practitioners in just one place using Provider Connect Australia, eliminating the need to keep multiple directories up-to-date manually.

Provider Connect Australia is new technology that maintains the accuracy of healthcare service and practitioner contact details and will be rolled out nationally. It is expected to achieve economic benefits of more than \$30 million per year by 2025.

Find out more information about Provider Connect Australia here.

Practice Assist Resource Library

As part of our support for general practices, Practice Assist maintains a library of useful resources in our Practice Assist Resource Library. These resources range across different topics from GP Accreditation, Practice Incentives Program, to the latest in resources around COVID-19.

Here are some of our new and updated resources:

COVID-19 Resources

- COVID-19 Bulk Billed Temporary MBS Telehealth Services Nurse Practitioners (updated)
- COVID-19 Checklist Preparing Patients for vaccination at a different location (new)
- COVID19 Vaccination for Nonparticipating practices (new)
- COVID-19 Vaccination Planning Implementing a vaccination clinic checklist (new)
- MBS COVID-19 Vaccine Suitability Assessment Items (new)
- COVID-19 Vaccination Checklist (new)
- COVID-19 Vaccine Eligibility Checker (new)

Digital Health

 How to access AIR through My Health Record and find a patient's immunisation history (new)

Medicare

- MBS items Frequently used in General Practice (updated)
- MBS Items for Medical Practitioners in 3GA Programs and MDRAP (new)
- Advance Care Planning (ACP) and supporting MBS items (new)

If you have an idea for a new resource or feedback on our current resources, please email practiceassist@wapha.org.au with ideas and comments.

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Health Promotion Events



RACGP COVID-19 Variants Webinar: Delta Strain and Variant Responses

Thursday 8 July 2021, 6.30–7.45pm (AWST)

Join Professor Paul Effler for an update on COVID-19 variants, including the Delta strain and their responses to different vaccines. Prof Effler is the Senior Medical Coordinator, Communicable Disease Control Directorate, WA Department of Health. This webinar will be facilitated by GP Dr Ramya Raman.

Registration/join link for RACGP members. Non-RACGP members, please email wa.events@racgp.org.au to register.

Webinar: Lipids in the limelight - clinical update on screening and management

Thursday 29 July 2021, 8pm (AEST)

In partnership with the World Heart Federation, the Heart Foundation will be hosting an interactive clinical webinar on Thursday 29 July to explore the latest evidence around screening and management of high cholesterol for cardiovascular disease (CVD) risk reduction.

High cholesterol contributes to over a third of coronary heart disease burden. Despite well-established evidence supporting the benefits of cholesterol lowering for the prevention of CVD, many patients fail to meet their lipid targets.

During the webinar, the global expert panel will explore the practical implementation of emerging evidence as well as tools and resources that can help improve the delivery of preventative CVD assessments in primary care. To register for the webinar, click here and complete the online form.

Coming up soon	
Dry July	July 1-31
National Diabetes Week	July 14-20
National Wound Awareness Week	July 15-21
National Pain Week	July 22-28
Crazy Hair Day	July 26
DonateLife Week	July 28 - August 4
World Hepatitis Day	July 28





Diabesity Masterclass 2021, via zoom over 12 weeks

Mondays, 7pm-8.30pm, from August 2 to October 25 2021

The Diabesity Masterclass 2021 is for general practitioners, practice and community nurses, pharmacists, dietitians, exercise physiologists, psychologists, podiatrists and diabetes educators.

The series is facilitated by Western Sydney Diabetes, Blacktown Metabolic and Weightloss Clinic, Western Sydney LHD/PHN, Hunter New England LHD/PHN, Nepean Blue Mountains LHD/PHN and South West Sydney LHD/PHN.

Register for this free event here and be kept informed with program updates. For enquiries, email wslhd-wsdiabetes@health.nsw.gov.au

Wellbeing webinars for WA general practice teams

GPs and practice staff are dealing with unprecedented levels of stress compounded by the COVID-19 pandemic and associated challenges.

To support GPs and practice staff, WA Primary Health Alliance (WAPHA) has partnered with Access EAP to provide two on-demand webinars to assist with stress and burnout. Both webinars can be accessed on-demand for a one-month period from 21 June to 22 July.



- View the Self-Care to Prevent Burnout webinar (30 minutes).
- View the Managing Stress & Building Resilience webinar (25 minutes).

For further support, visit the HealthPathways WA General Practitioners' Health pathway which provides information about services GPs can access for support, crisis, wellbeing and personal health issues (email healthpathways@wapha.org.au for log in details).

Webinar recording: Supporting COVID-19 vaccine access in the Indo-Pacific

This webinar was held on 24 June 2021 as part of the 2021 National Centre for Immunisation Research and Surveillance (NCIRS) COVID-19 vaccine webinar series.

View the webinar here to:

- hear an update from local leaders working in the Indo-Pacific region about their efforts, challenges and next steps in COVID-19 vaccination
- learn about the Australian Government's commitment to help support safe and effective COVID-19 vaccine roll out for our neighbours in the region
- hear about how Australian partners are also helping to support this approach.



Edition 122

8 July 2021

Education and training

Visit our Webinars & Workshops page on the Practice Assist website for the events calendar.

Webinars & Workshops

COVID19 Update - Delta Strain and Variant responses to different vaccines Presented by RACGP Thursday 8 July

Rural and remote GP research Presented by RACGP Tuesday 13 July

Income Protection Insurance: Who pays the bills when you're unable to work Presented by AAPM Thursday 15 July

MWGHPN Carnarvon Launch Presented by Midwest – Gascoyne HPN Wednesday 21 July

WA GP Practice Managers Networking Meeting Presented by AAPM Wednesday 21 July

General Practice Conference & Exhibition (GPCE) Perth 2021
Presented by Reed Exhibitions
Saturday 24 & Sunday 25 July

Lipids in the limelight: Clinical update on screening & management Presented by Heart Foundation Thursday 29 July

Optimizing Care Series
Presented by ASHM
Saturday 31 July, 14 August & 28 August

Woman Ageing Well - GP's role in supporting healthy ageing in women Presented by RACGP Tuesday 3 August

PATHFINDER: Early career GP conference 2021 Presented by RACGP Saturday 7 August Talking about suicide in General Practice Presented by Black Dog Institute Wednesday 11 August

Making better use of your medical records for decisions, care and quality improvement Presented by RACGP Thursday 12 August

Paediatric eczema, allergy and asthma update for Primary Care Nurses WA Presented by Perth Children's Hospital Saturday 21 August

Cervical Screening for nurses
Presented by Sexual Head Quarters (SHQ)
24 & 25 August

Become a rural GP: In conversation with Rural Generalists
Presented By RACGP
Tuesday 31 August

2021 Wound Management Workshops: Rural Presented by Clinical Design Solutions Multiple dates (rural WA)

Rural Health Webinar Series - The assessment and management of toxicological emergencies Presented by RACGP Thursday 2 September

Joint Australasian Sexual Health and HIV&AIDS Conferences: VIRTUAL Presented by ASHM Monday 6 to Thursday 9 September

Online Training

Foundations of Spirometry in Primary Health Care Presented by APNA

GP Framework for Child Mental Health Assessment Presented by Emerging Minds



Education and training

Online Training (cont.)

Diabetes in Practice for Nurses Presented by Diabetes Qualified

Electronic Prescribing online training Presented by ADHA

RACGP webinar - Phone and Video consultations
Presented by RACGP

Safety Through Reporting
Presented by Department of Health & TGA

Keeping your practice COVID-safe Presented by RACGP

High-quality health records to support patient care

Presented by RACGP

Medico-legal concerns and My Health Record Presented by RACGP

Chronic Disease Management and Healthy Ageing online program Presented by APNA