



IDGP Highlights

- » The IDGP's Cervical Screening Project aims to improve access to cervical screening services for underscreened and unscreened women in the Illawarra and Shellharbour LGAs.
- » As of 30 September 2009, the project has screened more than 1000 women. Of these:
 - » 81% were classified as underscreened and 6% classified as unscreened
 - » 94% were from the target group of women aged 20-69 years
 - » 12% were from a CALD background
 - » 9% identified as Aboriginal or Torres Strait Islander

If you would like more information about the Cervical Screening Project, please contact Katherine van Putten: Cervical Screening Project Officer, 4220 7644 or kvanputten@idgp.org.au

Education statistics

As well as providing direct assistance to individual practices the Practice Support Service provided 22 educational events, comprised of:

- » 3 practice manager-specific workshops
- » 3 practice nurse-specific workshops
- » 7 workshops open to all members of the practice team
- » 9 practice-based education sessions

IDGP Christmas closure

The IDGP office will be closed from Friday 25th December 2009, until Monday 4th January 2010.

WELCOME

A few busy months have passed and suddenly we are entering the Christmas season. 2009 has been a challenging year within general practice. It has been a year that has involved the development of the e-health PIP, the H1N1 Influenza pandemic and finally the impending industrial relations changes.

At a Division level it has been an exciting time. Plans for the Superclinic are well underway. The first wave of Illawarra practices have gone through the Australian Primary Care Collaboratives program and have achieved some great results. The Practice Support Team is looking to utilise lessons learned from the Collaboratives in working with Illawarra practices in 2010.

2009 has also seen the growth of IDGP services with headspace moving to a new site and seeing its 1000th client. The IDGP Clinical Psychology service, Cervical Screening Program and "reset your life" program have expanded their scope.

The government funded HPV vaccination catch up program for 18-26 year olds is ending. Those eligible females who had their first dose before 30 June will need to be recalled to have their last dose before 31 December. After that the vaccine will be available on the private market.

The New Year will bring a number of changes, including:

- » NSW employers currently covered by the NSW industrial relations system (mainly sole traders and partnerships) will move into the national scheme from January 1. See pg 6
- » Changes to mental health item numbers will come into effect from January 1. See pg 5
- » Practices will receive information on 2 changes to come into effect on May 1: MBS changes that simplify the schedule, and new PIP Indigenous Health Incentive payments

Within this edition of PS... we have opened up our pages to local services to allow them to highlight how they can assist and work with general practice. We have received contributions from a wide number of local services that include the Antenatal Shared Care program, the Illawarra Public Health Unit and the Respiratory Clinic.

Please look out for the following inserts in this issue:

- » Education Needs Survey for practice managers, practice nurses and practice staff. The results of this survey will be utilised in developing the Practice Support Service's 2010 education calendar
- » "Reset your life program" program resources
- » Home Medicine Review (HMR) brochure

The Practice Support Team would like to thank you all for your support and feedback throughout the year. May you all enjoy a wonderful Christmas and New Year. We look forward to working with you in 2010. Wishing you a safe and joyous holiday.

Chris, Margaret, Kristie-Lee, Kathy, Alison, Katherine and Linda
Your Practice Support Team



- Page 2
South Eastern Sydney Illawarra Public Health Unit
HPV Deadline Reminder
- Page 3
Putting PEN into Practice
Respiratory Clinic
Care Coordination
Antenatal Shared Care Program
- Page 4
NPS Update - Stroke prevention - can we do it?
Future of SESIAHS E-mails
- Page 5
Local hmr discoveries
- Page 6
Industrial Relation changes
Panvax expanded to children
Family Doctor Awards 2009
- Page 7
Life after Collaboratives
"reset your life" - A Winner Lifestyle Modification Program
Patient Data Extraction Software
- Page 8
2010 Education Program
Education Events
Education Report

Snippets

National Nurse Award 2010

The new nurse award will commence on the 1st of January 2010.

From that date all nurses apart from primary and secondary school will be covered under a single national award.

The new award will see nurses in general practice and nurses working in the hospital system under the same award for the first time.

Possible implications for practice nurses include provisions for leave as well as weekend and holiday loadings.

The full Nurses Award 2010 can be viewed and downloaded at <http://www.airc.gov.au/awardmod/awards/nurses.pdf>

South Eastern Sydney Illawarra Public Health Unit

The Public Health Unit has a team that focus on health protection, disease prevention and early intervention. We work with a range of services, health care providers and organisations in the Illawarra using different approaches to monitor health and implement services that will improve life expectancy and quality of life.

The Public Health Unit consists of the Director and four work teams: Infectious Diseases, Immunisation, Environmental Health and Epidemiology.

Part of the responsibilities of the Public Health Unit are defined by the NSW Public Health Act. The Act contains a series of legislative requirements governing a wide range of public health related issues.

Immunisation Team

The Immunisation team is made up of clinical nurse consultant, medical officer, registered nurse, administration officer and nurse immunisers. Immunisation has proven to be one of the safest and most cost effective procedures in modern medicine.

However, to be effective, immunisation rates should generally be in excess of 95%. The over-arching goal of the NSW Immunisation Strategy 2008-2011 is to increase immunisation coverage and to provide the community with protection against vaccine preventable diseases.

The immunisation team at the Public Health Unit works towards this goal by implementing initiatives targeting infants, adolescents, health care workers and older people by undertaking duties listed below:

- » Co-ordinating the implementation of National Vaccination Schedule in the Illawarra and Shoalhaven
- » Providing advice, support, information and education to health providers
- » Follow up cold chain breaches
- » Management and co-ordination of school vaccination program
- » Responding to requests for school-based vaccination records

- » Being responsible for yearly immunisation update for nurse immunisers and other interested health care staff
- » Pursuing various educational sessions in child care centres, aged care facilities, to midwifery students and medical centres as per the need and request
- » Following up adverse events following immunisation
- » Providing assistance with catch up immunisation schedule
- » Being involved in recent research and delivering up to date evidence-based information to community and health care providers
- » Being responsible for vaccine orders in relation to Rabies vaccine and immunoglobulin, school based vaccines and refugee vaccines
- » Collecting and reporting data on neonatal hep B vaccination

We are located at the University of Wollongong and are happy to answer any of your questions.

Caroline Williams and Natasa Veselinovic
Public Health Unit
Phone: 4221 6700
Fax: 4221 6759

HPV Deadline Reminder

The Government funded HPV vaccination catch up program for 18-26 year old women finishes December 31.

There will be no further distribution of HPV vaccine for the catch-up program after 31 December.

However, any remaining stock in clinic fridges after 31 December can and should be used to ensure all eligible females (who had their first dose on or before June 30th 2009) complete their vaccination course.

The Practice Support Team recommends that you audit your clinic's patient database to identify how many eligible women are yet to complete their course, and order appropriately before COB Friday 18 December to ensure delivery before Christmas.

Putting PEN into Practice

Bernadette Condon, Practice Nurse at Tongarra Medical Services in Albion Park, discusses why PenCAT has become a crucial tool within her practice.

"Pencat is a really useful, flexible tool to analyze your patient population. This program looks at your whole practice as a group, and can look at any characteristic you choose".

"It can look at several characteristics at once and it has a lot more usefulness than MD search. It will cross tabulate clinical criteria for example":

"How many patients do you have between 45-55 years, on an antihypertensive medication who are obese and smoke?"

"How many patients are on multiple medications for Home Medicine Reviews?"

"For your diabetes register-how many patients with diabetes have had a SIP cycle of care, with a breakdown of clinical markers attended to. We can enhance best practice and improve financial return".

"For your COPD register-you can clean data and target these patients .How many patients do you have on Tiotropium Bromide without a diagnosis of COPD?"

"PenCat's scope is extensive".

The Practice Support Team is rolling out PenCAT to Illawarra practices. There is no cost to have PenCAT installed in your practice. The Practice needs to have Medical Director, Best Practice, Zedmed or Genie. CAT will hopefully be adapted for Profile.

For more information please email or phone the Practice Support Team on 4220 7600 or practicesupport@idgp.org.au



Respiratory Clinic

The COPD/Respiratory clinic is a joint collaboration between the IDGP and SESIAHS and operates monthly from Kiama and Shellharbour hospitals.

The clinic provides one-off spirometry, respiratory assessment, diagnosis and care coordination. Reports and findings are fed back to the patient's GP with recommendations for ongoing treatment or services.

Patients with established COPD can access pulmonary rehab, smoking cessation education and health information resources. Patients with complex disorders are encouraged to continue a relationship with the care coordinator to enable a smooth transition between services.

Those who are at risk of COPD (eg. current and previous smokers) are also encouraged to be referred and can take advantage of smoking cessation guidance provided by a trained community nurse in their home.

To refer to the clinic phone 1300 792 755 or fax the generalist area health/community nursing form to 4223 8455 together with the patient's GP Management Plan (if applicable).

For further details, phone Lauren Hickson at IDGP on 4220 7600 or email lhickson@idgp.org.au.

Care Coordination

SESIAS and IDGP have been working together to deliver a model of care coordination in the southern Illawarra region to link general practice with community health and primary care providers.

A community nurse care coordinator provides support and guidance to patients with complex diabetes or respiratory disorders who frequent various health services.

The care coordinator liaises with the GP and health providers in order to best meet the needs of patients, whilst conducting home visits.

In addition to monitoring the client's health status, the care coordinator strives to

motivate the patient on lifestyle change, provide health information resources and deliver smoking cessation coaching over a 12 month period.

Care Coordination enhances patient and provider communication where evidence based outcomes are gained through collaborative reinforcement of health messages and treatment strategies.

Care coordination can be accessed through the Kiama or Shellharbour respiratory clinic for patients with COPD (phone 1300 792 755) or through Robert Beaumont at Warilla Community Health for patients with type 2 diabetes or pre-diabetes (phone (02) 42 964 200 or email Robert.Beaumont@sesiahs.health.nsw.gov.au).

Antenatal Shared Care Program

There are currently 300 women in the Illawarra who choose to see their GP for their antenatal care (that's over 1 in 4 pregnant women).

The Antenatal Shared Care (ANSC) Program is based at Wollongong Hospital and aims to provide an option of care that:

- » is flexible
- » provides continuity of care, &
- » caters for the preferences and needs of women from a diverse range of cultural and religious backgrounds.

The ANSC program also exists to enhance the skills of GPs through regular Updates and communication with the hospital. A Clinical Pathway (last updated March 09) outlines all tests and visit schedule for patients, and is available at Updates or via email from the ANSC Coordinator.

ANSC Updates for 2010 are scheduled for:

- » Wed 12th May - 6-9pm
 - » Sat 14th Aug - 1 -4pm
- on Level 8, Wollongong Hospital.

These will be 2 different seminars. CPD points are allocated, and GPs are welcome to attend one or both seminars.

For more information about joining the shared care program, booking into an Update, or to get a copy of your updated clinical pathway, please ring Leanne on 4253 4271 or email Leanne.Cummins@sesiahs.health.nsw.gov.au

Snippets

ACIR – Online Immunisation History Statements

The Australian Childhood Immunisation Register (ACIR) records the details of vaccinations given to children under 7 years of age and provides information to parents and guardians about their child's recorded immunisation history.

Previously, parents and guardians could get a copy of their child's immunisation history statement over the counter in Medicare offices and through Medicare Australia's Online Services if their child was under 7 years of age.

From 14 September 2009, the age restriction for obtaining immunisation history statements from Medicare offices or via Online Services will increase to include children under 14 years of age.

Statements requested by parents or guardians for children aged 7 to under 14 will not display the child's immunisation status, 'next due' immunisations or the school entry caveat, as the ACIR no longer assesses whether a child is due or overdue for immunisation after they turn seven.

The increase in the age restriction for getting immunisation history statements does not apply to any other aspect of ACIR reporting, such as information supplied to providers, practices or Divisions of General Practice.

Wollongong Children's Medical Centre

Problems with wet undies, HELP IS AVAILABLE!

- » Bedwetting and Soiling control programs
- » Toilet training - Fussy eaters
- » Available for talks to parent groups

Bulk Billing - No referral needed

For an appointment: Dr Margaret Perrott
Phone: 4272 8004
wcgp@pacific.net.au
155 Princes Hwy, Figtree



National Prescribing Service Limited

Stroke prevention- can we do it?

There are many risk factors that your patients may have that increase their chances of having an ischaemic stroke.

Although much is made of which medications to use to reduce this risk, lifestyle interventions are the most important strategies that can be promoted; for instance, smoking cessation, weight reduction and increased exercise to bring down blood pressure and cholesterol and the risk of diabetes.

For a person who has a high "cardiovascular disease risk", there is now an Australian risk calculator that can be downloaded or used as a paper-based copy as a tool for education for the patients as well as for assisting in making decisions about using medications.

When the patient has atrial fibrillation (AF) in addition to paying attention to those risk factors, warfarin is still the medication of choice to reduce the stroke risk, if the patient does not have any contra-indications to its use. But, as most of us who work in the health sector know, it is a difficult medication to manage.

The current NPS therapeutic subject that I am visiting the surgeries about is "Antiplatelet and anticoagulant therapy in stroke prevention". As well as visiting the GPs, I can also see the practice nurses who may be involved in "point-of-care" testing or just reinforcing safe use of warfarin messages.

I also can provide patient resources for nurses of other practice staff to use with their patients on knowing what their stroke risk is, and how to lower this. If your practice would like a visit as a group, or prefer visits to individuals, please contact me at the IDGP on 4220 7627 or Ali Martin on 4220 7600 to make an appointment.

Also- just to confirm a recurring question- initiation with (or confusion about) warfarin is one criterion for a Home Medicines Review (HMR) from an accredited pharmacist. See "Local hmr discoveries" in this edition of PS!

Margaret Jordan
mjordan@idgp.org.au

SEZIAHS E-mails going

The technology which enables the Wide Area Network (WAN) to link to the SESIAHS that is currently used to download SESIAHS e-mails, including Docmail, is being made redundant by Telstra.

Unfortunately, the alternative technology for the link is four times more expensive than the current technology with additional substantial setup costs.

For years, IDGP has maintained the WAN link. IDGP is not in a position to continue to maintain the link beyond December 31.

Recently, SESIAHS implemented Argus, a secure messaging solution to distribute the new Electronic Discharge Referrals to GPs; they are also sending Docmail messages via Argus. (As part of this change OTiIS will install Argus at interested GP surgeries at no cost).

These two changes mean that SESIAHS email addresses will become redundant for GPs.

We anticipate most GPs will establish email addresses with their internet providers.

This should be done by 31st December 2009.

The OTiIS team is able to assist with setting up alternative e-mail addresses and with the installation of Argus.

OTiIS can be contacted on 4220 7699 or otiiis@idgp.org.au.



Snippets

Cancer Council – Relaxation for patients and carers

The Cancer Council has developed a relaxation CD for patients and carers. It is an excellent CD for patients, carers or to listen to yourself.

Used regularly it may help with relaxation obtaining a better sleep and improving energy levels.

It is the work of local psychologist Dr Lisbeth Lane, Illawarra Cancer Care Centre and the CD is available free of charge via the Cancer Council helpline at 131120 or can be downloaded in MP3 format at <http://www.cancercouncil.com.au/editorial.asp?pageid=2591#>

Mental Health Item Number Changes – January 1

From the 1st of January 2010 there will be a new Item number for Mental Health Care Plans.

As of January 1 GPs will have to have completed Mental Health Skills training to continue using the existing item number 2710.

GPs who have not completed Mental Health Skills Training will use a new Item number which will attract a lower rebate of \$126. (the current rebate is \$156).

Until the 1st of January GPs can continue using the current item 2710 however changes that must be implemented immediately include:

- » Changing the name of the plan from the 'GP Mental Care Plan' to the 'GP Mental Health Treatment Plan'
- » GP's must now include a diagnosis in the treatment plan.

Training can be completed both face to face and online.

If you would like information about training options please don't hesitate to contact the practice support team at practicesupport@idgp.org.au



Local hmr discoveries

It is often assumed that when patients take their nicely bagged script items home, that they will also take these correctly. Sometimes "twice daily" means breakfast and morning tea rather morning and evening. Sometimes anything with a pharmacy label is kept indefinitely "just in case". I recently picked up some gentian violet which the patient would not part with, "just in case". HMR sometimes discovers very interesting scenarios regarding what patients actually do with their medications!

79 year old lady who kept all her medications in emptied Coumadin (warfarin) bottles as well as keeping her actual warfarin tablets in one of these bottles. This patient also had an unstable INR, was on 11 medications and would have greatly benefited from a Webster pack.

66 year old lady who took her antiplatelet tablet (clopidogrel) twice weekly because she was "bruising too much".

52 year old lady who was taking the pill as well as HRT, who was also visiting multiple doctors.

72 year old gent who was increasing the dose of his antidepressant himself. At the interview his dose was at maximum recommended daily dose and he was experiencing many adverse effects because of this.

79 year old gent who was taking two different brands of digoxin 250mcg (Lanoxin

and Sigmagin) after hospital discharge and was therefore feeling extremely ill and nauseous due to digoxin toxicity.

72 year old gent who had been using the same ball of cotton wool to wipe blood after his at-home blood sugar reading for the last 12 months.

64 year old lady who had been grey nomading in Queensland over winter and ended up on two diabetes medications from the same class (Daonil and Diamicon) as well as two calcium channel blockers for blood pressure (Norvasc and Adalat). She was also taking her half a Solprin "sometimes".

70 year old lady who was not taking her medicines at all: she kept all her medications from the Webster pack in a glass jar and returned the emptied websters to the pharmacy. It was her husband who alerted me to this when she left the room during the interview, as he was questioning paying for the drugs when she was not taking any!

The IDGP Quality Use of Medicines officer Karina Bronska is available to visit your practice.

Please see enclosed the HMR brochure and to obtain copies of the HMR patient leaflets please contact Karina Bronska at the IDGP.

Karina can be contacted on Tuesday or Wednesday at IDGP, at 4220 7600 or through email at kbronska@idgp.org.au



Industrial Relation Changes

The NSW Government has agreed that all NSW private sector employers currently covered by the NSW industrial relations system (mainly sole traders and partnerships) will move into the national scheme from 1 January 2010.

This means greater certainty, efficiency and fairness for businesses, with one clear set of rules covering conditions of employment, enterprise agreements and unfair dismissal. The significant changes that started to occur from 1 July 2009 will apply to all private sector employees in NSW from 1 January 2010. From January 1 2010 all employers in the national system will need to ensure compliance with the 10 National Employment Standards (NES) and, significantly, will most likely be covered by a new Modern Award.

Employers who are constitutional corporations (corporations that engage in significant trading or financial activities) automatically fall within the national industrial relations system and more information is available at www.workplace.gov.au or by calling Fair Work Australia on 131 394.

Employers who are currently under a state award will find that there will be a transition period to move to the Modern Award pay rates.

Other important changes that employers need to understand are the new unfair dismissal provisions that came into effect for all employers, covered under the Fair Dismissal Code for Small Employers.

Employers will need to be prepared for these changes. They face specific requirements regarding employment records, the provision of pay slips and other obligations relating to the various leave entitlements under the NES.

Should you be interested in obtaining further information, NSW Department of Industrial Relations will be running a series of workshops for employers in 2010. Our 'IR in NSW' and 'Modern Awards and Agreements' workshops are two sessions that will better explain your rights and responsibilities.

For further information visit www.industrialrelations.nsw.gov.au or call NSW Industrial Relations on 131 628.

Panvax expanded to Children

Panvax[®] and Panvax[®] Junior can now be administered to anyone over the age of 6 months. It is especially important to encourage vaccination for people who;

- » Are at increased risk of severe illness from influenza
- » Have an infant under 6 months of age
- » Are travelling to an area of high levels of pandemic influenza activity

The standard Panvax[®] is considered safe in children aged 6 months and over, however Panvax[®] Junior is a Thiomeral free vaccine that is available for children aged 6 months to less than 3 years. Below is a table based on dosages by age.

	Dosage	Number of doses	Presentation
Children aged 6 months to less than 3 years	7.5 mcg (0.25mL)	2 doses at least 28 days apart	Panvax [®] Junior (pre-filled syringe) OR Panvax [®] (multi-dose vial)
Children aged 3 to less than 10 years	15 mcg (0.5mL)	2 doses at least 28 days apart	Panvax [®] (multi-dose vial)
People aged 10 years and over	15 mcg (0.5mL)	1	Panvax [®] (multi-dose vial)

Detailed information about the Panvax[®] Vaccines can be found at <http://www.emergency.health.nsw.gov.au/swineflu/vaccination/index.asp>. The IDGP website will be frequently updated as further information is released.

Family Doctor Awards 2009

The Illawarra Family Doctor Awards have been held for 2009 with patients in the Illawarra again having the opportunity to praise the dedication and professionalism of their GPs and Practices.

A record number of nominations were received this year for both categories - Illawarra GP of the Year and Illawarra Practice of the Year.

The winners were announced at the IDGP's Annual General Meeting on October 22.

Dr Sajid Azam from Bellambi is the 2009 Illawarra GP of the Year with Fairy Meadow Medical Practice receiving the nod for the 2009 Illawarra Practice of the Year.

Dr Jenny Smiley received an exceptional mention in the Illawarra GP of the Year category.

The Family Doctor Awards are an initiative of the IDGP's Community Consultative Committee.

"The judging process this year was again very difficult with so many nominations and wonderful comments from patients about the exceptional quality of care and commitment that their GPs and Practices provide to them," said Helen Gapps, Chairperson of the IDGP's Community Committee and one of the judges of the awards.

"We were impressed with the number of outstanding nominations we received this year from the Illawarra community", said Helen. "This response is a testament to the high regard and appreciation that people in the Illawarra have for their GPs and recognition of the commitment and quality of care that our GPs provide to their patients."

LIFE AFTER COLLABORATIVES

Local participation in the Australian Primary Care Collaboratives State Wave will end on December 31.

For the past 18 months 5 practices - Wollongong AMS, Dapto AMS, Woonona Medical Practice, Tongarra Medical Services and Keiraville Surgery - have been involved in continuous quality improvement targeting 3 topics: Diabetes, CHD and Access and Care Redesign.

Practices have tested and implemented a multitude of changes in the way they manage diabetes and CHD. They have cleaned up their patient registers and introduced improvements in the way patient data is recorded, they've identified those patients with very poor results and recalled them, they've held "blitzes" on particular clinical indicators such as hypertension, and they've expanded the role that practice nurses play in chronic disease management, to name just a few things.

In improving Access and Care Redesign practices have measured their available appointments, compared them to patient demand and introduced changes to reduce delays and improve patient, staff and GP satisfaction.

The Collaboratives program has provided a framework for change. Guiding principles helped practices to identify where change was needed and Plan-Do-Study-Act cycles (PDSAs) were used to break down complex goals into small, manageable steps. Monthly data collection enabled practices to monitor progress towards goals.

Although this is the official end of the program, practices are being encouraged to continue their efforts in diabetes and CHD management, to maintain good data management habits, to monitor patient access and to submit data regularly so that they can measure change.

Well done Collaboratives Practices!

The Practice Support Team will continue to support Collaboratives practices with continuous quality improvement through initiatives such as the PEN CAT tool. This initiative will be made available to Illawarra practices, see page 3.

"reset your life" – A Winner Lifestyle Modification Program!

In August and November this year, two groups of local residents completed the IDGP's "reset your life" lifestyle modification program (or LMP) in a bid to reduce their risk of Type 2 Diabetes.

Collectively, the groups achieved excellent results - reducing key risk factors for diabetes (weight loss, waist circumference reduction), increasing their understanding of the relationship between lifestyle and disease, identifying mechanisms to overcome personal barriers to change, reaching greater motivation levels and realising an ability to set realistic goals to achieve sustained, long-term healthy eating and activity practices.

The "reset your life" program is one of its kind in the Illawarra and is delivered by an accredited exercise physiologist, Lauren Hickson and accredited practicing dietitian, Anita Needham.

The program runs for 6 months through a series of 7 to 8 informative, interactive and motivational 1-2 hour sessions.

"What sets "reset your life" apart from many other programs is that it not only educates participants on how to practically improve their diet and exercise levels, but it addresses those behaviours that present as barriers to long-term change," Anita Needham said.

"We discuss strategies to better manage stress, anxiety and depression and encourage realistic goal-setting to achieve daily changes to diet and activity."

Participant feedback about the "reset your life" program has been very positive. The friendly, fun, motivating and supportive nature of the groups has enabled participants to keep attending sessions and working towards their personal goals.

"A big thank you to Anita and Lauren and the program they ran. It has made a difference to me, and I did not have to make big or drastic changes, so well done all I say!" Dale Catto, a participant in the pilot group stated after completing the program.

"I saw my GP and the results of my follow-up blood tests were excellent!

My blood sugar levels were normal, total cholesterol normal, HDL & LDL levels where they should be, blood pressure great. So in short I received the tick of approval and was told to keep doing what I've been doing."

Refer your patients to the "reset your life" program

A series of "reset your life" groups have been scheduled for 2010 so refer your patients soon to secure their enrolment.

The groups are held at the Illawarra Division of General Practice in Wollongong and also at Kiama Hospital.

The program is free to eligible patients – 40-49 years of age and at high risk of developing Type 2 Diabetes. High risk is determined using the AUDRISK tool (scores of ≥ 15).

Patients with established diabetes may also attend this program, referred under the 8 Medicare Diabetes Group sessions.

Program content will be modified for diabetic patients. Non-eligible patients may also attend the groups at a cost of \$25 per session.

To refer a patients simply complete the LMP Referral Form and fax it to IDGP on 4226 9485.

If you would like further information about the "reset your life" LMP please do not hesitate to contact Lauren Hickson on: 4220 7600 or email lhickson@idgp.org.au

Patient Data Extraction Software

The Division currently recommends and supports the PEN CAT (Clinical Audit Tool) which extracts patient data and provides practices with useful, easy-to-read graphs and reports on a comprehensive range of conditions and test results, as well as providing information on key MBS items claimed, items for accreditation, demographic information and more.

This is the only data extraction software currently endorsed by the Division. We do not endorse or recommend any software that we do not directly support.

2010 Education Program

The Practice Support Team is in the progress of planning our education schedule for 2010 covering practice managers, practice nurses and practice staff.

In this edition of PS... is an insert seeking comments on the education requirements of your practice team. Please fill this form out if you have educational needs and we will utilise this information in planning our 2010 education calendar.

Alternatively you are welcome to provide information on your education needs by emailing practicesupport@idgp.org.au accreditation and infection control are two topics to be included in next year's program.

First Practice Manager Forum of 2010

Please keep this date free!!

The First Practice Managers forum for 2010 has been announced. The session will be held on the 10th of March from 4:00pm to 5:30pm and will be held at the Illawarra Division of General Practice.

A representative from Work Cover Australia will present on the employer's obligation to employees regarding occupational health and safety.

The Practice Managers' Forum will have a social aspect with each meeting followed by dinner together at a Wollongong restaurant.

APNA online learning

APNA has developed online learning modules that have been designed specifically for Practice Nurses.

The aim of the modules is to provide up to date knowledge and skill development in a broad range of topic areas.

Modules are available for free or at a discounted rate for APNA members. The courses can be found at <http://www.learningseat.com/servlet/ShopFrontPage?companyId=APNA>

Education Events

Upcoming CPR Training

The NSW Surf Life Saving runs monthly CPR courses out of the Wollongong Master Builders Club.

The cost of attending CPR training is \$50. All courses run from 9:30am to 12:00pm. Upcoming dates include;

» Wednesday 20 January 2010

» Saturday 20 February 2010

NSW Surf Life Saving will run a CPR training session at your practice for a minimum of 5 participants.

Graduate Certificate in Nursing (General Practice)

The Graduate Certificate in Nursing (General Practice) is a collaborative venture developed by the AGPN and the University of the Sunshine Coast.

The program has been developed specifically for practice nurses to develop their skill base. Enrolments are open until the 15th of January. The entire course can be delivered via distance education, through online learning.

Details about the course structure and fees can be found at <http://generalpracticenursing.com.au/graduate-certificate-in-nursing-general-practice>

IDGP AGM 2009

The IDGP held its Annual General Meeting on October 22. It was a very successful night, with record attendance levels. Dr Andrew Dalley, retiring CEO of the Division reflected on "General Practice Change: Demise, Iteration or Evolution?"

The bi-annual peer nomination awards were also held. These give GPs a chance to recognise the outstanding work of their colleagues – two winners were announced this year, Drs David Grant and Ananth Rao.

There were also a couple of major changes to the Board. Dr John McAlpine has stepped down after 3 years in the top job as Chair.

Dr McAlpine has been on the Board since 2002, commencing the position of Chair in 2006. He has provided excellent corporate governance and leadership to the Board during a period of significant growth and change for the organisation.

Taking on the role of Chair is Dr Russell Pearson, with Dr Stephen Lyon being appointed as Deputy Chair. A new appointment to the Board is Dr Natalia Bakhilova from Kiama.

Education Report

Practice Nurse Orientation Session

The IDGP Practice Nurse Orientation session was held on the 2nd of December.

The aim of the training session was to provide participants with a greater understanding of the role of the practice nurse within general practice.

10 new practice nurses attended and one enthusiastic practice manager.

The training session covered an introduction of the role of general practice and an overview of the mysterious world of Medicare.

After a quick break participants were given an update about best practice cold chain management and the role of IT in general practice.

The session ended with two concurrent training sessions. The first option was an in-depth look of the role of sterilisation in general practice. While the second option was a Medical Director workshop.

The evaluation of the training session was extremely positive and this is a session that we will look to repeat within the next 12 months.

We thank Nutricia for their sponsorship of the session.