Northern Health

GP Newsletter

December 2020



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Northern Health Update

As the year draws to a close, I can't help but reflect on the amazing achievements across the sector over the past year. We started the year knowing very little of the new virus; and we knew even less about the role it would play in our lives over the months to come. It was a daunting prospect, but one that we were dedicated to tackling. We have always had close connections across the outer Northern catchment in Melbourne, however, as the year progressed, these connections became even more important.

Northern Health is thankful for the multiple roles that primary care played throughout the year. Whether that was through managing COVID-19, supporting the health of the broader population, or in offering your time to provide advice or collegial conversation.

We especially thank those General Practitioners who provide their time to connect with us through the Northern Health GP Advisory Group. Our partnership with you is very important to us and we appreciate your contribution.

Finally, I would like to congratulate you, on behalf of Northern Health, for your efforts in supporting the community in the North. We hope that you enjoy some rest and time with your families and loved ones over the following weeks. We look forward to connecting with you once again in 2021 and continuing to find new ways to improve health outcomes and quality of life for the community we serve together.



Ms Briana Baass FCHSM MAICD PARTNERSHIPS NORTHERN HEALTH

We wish you and your family a happy festive season and new year.

Patient Watch – Monitoring and Support Service

Northern Health's Patient Watch commenced at from participation. It is not a time-limited service. the end of October. It is a monitoring and support service for people who are identified to be at high risk multiple Emergency Department attendances and hospital admissions in the next twelve months. The Department of Health and Human Services has developed the algorithm to identify the patients, and our internal team is further refining the algorithm to allow us to better target people at high risk of multiple hospital admissions.

As patients become eligible for participation in Patient Watch, usually as a result of an index admission to hospital, they are offered the opportunity to participate in the program. Not everyone who is offered accepts, which is their right.

Patient's GPs are informed when a patient conditions consents to participate in the program with the patient's own GP remaining the conductor of the therapeutic orchestra.

The Patient Watch team includes 7 part time TeleCare Navigators and 4 fulltime Health Coaches. The TeleCare Navigators include a mixture of Enrolled Nurses and people with no healthcare background, and the Health Coaches are a mixture of experienced Allied Health Professionals and senior Nurses. The Navigators contact each patient 2 to five times per week to check on their health status and social needs, whereby if changes are detect in their health status, a Health Coaches becomes involved. The Health Coach role is to work with the patient, their family and also their GP, to provide better care, to assist the patient to live a more satisfying life and to attempt to reduce unnecessary hospital attendance.

As newly eligible patients are identified each month, the care team offers them participation in the program. They will stay on the program as long as they need to or until the team deems that they are stable and no longer in a position to benefit The service exists to both anticipate patient's needs and to respond in a reactive fashion where necessary. They offer of a friendly known voice on the end of the phone is an important part of the service, as is the ability to help people to manage and to navigate a complex health system.

Over 200 patients are currently being assessed and offered participation in the service, of whom over 40 are currently being actively managed in the program. We anticipate that when operational that over 300 patients per month will trigger eligibility and that over 50% of those who are offer it will take up participation in the service. Each GP is likely to have very few such patients under their direct care.

Our experience is that on top of a range of chronic Patient manv Watch experience pain, mild to moderate depression and anxiety, isolation and loss of purpose in their lives. Helping patients to deal with these issues is an important part of the therapeutic relationship provided by Patient Watch. In other settings a similar service has been shown to be cost effective in terms of reduced acute hospital usage in the 12 month period following enrolment, and whilst that is not the purpose of Patient Watch, it is one of the attractions as no one wants to come to hospital least of all in post-covid19 unnecessarily, pandemic 2020.

Don Campbell Medical Division Director Hospital Without Walls Clinical Service Director Staying Well Program



Northern Health Virtual ED Triage Update

Northern Health's Virtual ED Triage is now available for patients living in Northern Health's catchment area, as well as local general practitioners (GPs).

Simply by clicking on the link or using the QR code on our webpage, patients will be directed to the Virtual ED Triage registration page. Once registered, the patient is placed in a virtual waiting room until the triage nurse is available to have an online consultation with the patient and advise on the best course of action.



Dr Loren Sher

This service also benefits local GPs and acute care centres by assisting general practitioners to manage patients in the community, and keep patients closer to home.

Dr Les Pinto of Rochdale Medical Centre states: "I would like to offer some feedback on the excellent service that my patient's and I have experienced with using the Northern Hospital Virtual Triage service, which is very accessible via a QR code provided in the Northern Health ED website.

I have primarily used the service for advice on patients that I was hesitant to send into a busy ED in the afternoon or evening. I was able to speak to an Emergency physician within 5 -10 minutes and invariably received excellent advice and I would subsequently email the referral letter.

Most of the patients where either put on the "expect list" for the next morning, with very short wait times and at times, were admitted directly to SSU for the appropriate work-up, that had been pre-arranged!

I commend you and your colleagues and Northern Health for providing the excellent service and I would certainly recommend to other GPs." **Dr Les Pinto**

The program works with GPs and community health care providers to identify patients that traditionally would have been referred to ED, but may be suitable for ongoing management in the community, with ED consultation. We are hoping to establish a mutual relationship where GPs can have consultations with us regarding complicated patients, and we are hoping also to refer virtual triage patients to their practices for follow-up.

Dr Loren Sher Head of Paediatric Emergency Paediatric Emergency Physician

Virtual ED Triage GP and Patient Information Sheets

Available for download on the Northern Health website.

Go to the Emergency Department service page:

https://www.nh.org.au/service/emergency-department/#hp

GP How to Guide click here



Northern Health Persistent Pain Clinic

The Persistent Pain Clinic is an outpatient multidisciplinary service that provides assessment, diagnosis and management of persistent pain problems. Persistent pain is defined as pain that has been present for at least 3 of the past 6 months.

The clinic is staffed by Pain Medicine Physicians, physiotherapists, health psychologists, occupational therapists and exercise physiologists. Clinics are located at two Northern Health campuses, Bundoora Centre and Broadmeadows Hospital.

The clinic promotes a **self-management model**. Patients are provided with education to understand their pain and learn self-management strategies to improve daily functioning. Therapy can be provided in both group and individual settings. A limited interventional service is available to appropriate patients.

All patients referred to the clinic will be required to complete a pain questionnaire prior to engagement with the service. The information is used for triaging and to provide baseline information about the patient. If patients need assistance to complete the questionnaire this can be provided. Referrals for patients with active compensation claims (such as WorkCover or TAC) or those engaged with another pain service are not accepted.

Referrals must come from a GP or Specialist. Details on how to refer by eReferral are available on the Northern Health website. Referrals by email or fax are no longer accepted. Referrals **MUST** include the patient's demographic details, the reason for the referral, current and past medical history (including psychiatric history and cognitive function); pain

history including onset, location, nature of pain and duration; history of alcohol, recreational or injectable drugs, or any prescription medicine misuse; a list of **CURRENT** medications (including non-prescription, herbs and supplements); results of recent relevant pathology and radiology and any details of current behaviors that may impact on the person's ability to participate in a chronic pain management program.

Please be aware that while we understand that the use the opioids in the management of chronic non cancer pain can be of benefit in very limited circumstances, we do not generally advocate their use. We encourage patients to adopt a self-management approach for improved long term outcomes.

Inevitably Covid-19 has required us to re-examine how we deliver care to our patients. Some of the changes made will likely become routine practice. While our group programs have returned, numbers are likely to be limited.

We hope to be able to offer more programs in the future. Online educational resources are available and we are able to offer telehealth appointments either by phone or videoconferencing if patients have appropriate computer access.

Interpreters can be arranged for all interactions if required. Please feel free to contact us on 1300 128 539 if you require any further information.

GP Advisory Group

As part of Northern Health's 2020 strategic plan, we have a commitment to create healthier communities through active partnership with our community and other service providers for out of hospital supports.

General Practitioners play a key role in providing care for our community and we have strengthen our relationship with our local GPs, by establishing a GP Advisory Group for Northern Health.

Should you be interested in joining this group, or have an interest in becoming involved in a variety of projects that Northern Health is currently undertaking involving partnership with our community providers, then please **contact Karen Overall via email:** primarycareliaison@nh.org.au

Respiratory Reference Group: GP Expression of Interest

Despite the many difficulties and challenges 2020 has brought upon us, the Department of Respiratory Medicine at Northern Health has continued to strive to provide the highest quality patient-centred care. The Department strongly believes consumer involvement adds value to health and medical research as well as shaping our priorities to improve care for patients who have experienced various respiratory diseases.



Dr Katharine See

In 2020, Northern Health's Department of Respiratory Medicine formed its first Consumer Reference Group (CRG).

The aim of the Respiratory CRG is to provide a community perspective on various services (clinical, research and laboratory) provided by the Respiratory Department at Northern Health.

The Respiratory CRG's first meeting was held on the 30th of November 2020 virtually and was attended by consumers, clinical nurse consultant, Head Respiratory Scientist Research Lead and Director of the Department of Respiratory Medicine. The meeting included introductory talks on the Department, the respiratory laboratory and current research the department conducts. We also discussed the Northern Health My IPC (indwelling pleural catheter) app that has been developed in collaboration with Swinburne University. It was an excellent session and consumers were engaging. Significant insight was gained from the feedback from all in attendance.

Going forward, we invite general practitioners and consumers to volunteer their time to share their voice to shape both our clinic models of care and our research priorities. The Department of Respiratory Medicine is excited by the development of the CRG and the benefits this will bring to improving the lung health of the Northern Health community.

To express your interest, please contact the Respiratory Department on 8405 2444.

Dr Katharine See and Dr Sanjeevan Muruganandan Northern Health Department of Respiratory Medicine

Northern Health switches to electronic Healthlinks for GP Referrals to Specialist Clinics

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For more information about how you can send your patients to Northern Health Specialist Clinics using Healthlink's SmartForms, please contact Christopher Daniel, GP Support at Northern Health Specialist Clinics on 8405 2921 or email specialistclinics@nh.org.au

Go to Northern Health website for more referral information https://www.nh.org.au/referrals





HealthPathways Melbourne online resource provides GPs with localised best-practice information to help assess, manage and refer patient pathways.

The pathways are developed and maintained by local GPs, in consultation with specialists and other health practitioners, to best reflect local expertise and experience.

How to access HealthPathways Melbourne:

https://melbourne.healthpathways.org.au

Health professionals in Melbourne's north western or eastern region, can <u>request access here</u> or by contact the HealthPathways Melbourne team via <u>info@healthpathwaysmelbourne.org.au</u>

The Primary Care Liaison Team

Contact:

Briana Baass Chief Allied Health Officer & Partnerships

Sharryn Beard Partnerships Officer

Karen Overall Primary Care Liaison Officer

T: 9495 3140

E: primarycareliaison@nh.org.au

W: www.nh.org.au

