

GP Liaison Newsletter

Keeping you informed

September 2004

Greetings

Hope the winter illnesses are starting to settle down now after a tough few weeks. This month's newsletter is focused on the elective services provided by the DHB.

Increase in Service Availability

The DHB regularly reviews the adequacy of the services it provides. The most recent reviews have resulted in increases the number of outpatient clinics and surgery sessions in Urology and Ophthalmology.

Urology

Mr Greg Russell has been engaged by the DHB to provide urology services alongside Mr Quentin King. Grant and Quentin will be visiting Masterton hospital on alternate weeks. This means that from October the number of clinics and surgery sessions will double to 8 clinics and 4 theatre sessions a month.

Ophthalmology

Mr Kolin Foo is joining Andrew Logan and Nigel Warden in providing the ophthalmology service. Kolin will be providing an additional two outpatient clinics a month at Masterton Medical and an additional theatre session at Masterton hospital. He will be visiting on the fourth Friday and Saturday of each month.

General Surgery

From 20 September we will have the services of Mr Marytac on a seven-week Locum.

Anaesthetics

The DHB continues to recruit for a full compliment of four anaesthetists. A locum has been employed over the December/January period and two other candidates are being considered.

Clarification

In the last newsletter I said that Dr Nel specializes in radiology. This was incorrect and should have been radiation oncology. My apologies for any confusion caused by this error.

Mental Health

Thank you to those of you that responded to the mental health questionnaire sent with the newsletter last month. I have collated responses and passed these on to Joy Cooper, the GM Planning and Funding. I will be sending you all a copy of the collated responses

Orthopaedic Initiative

You will be aware that the Ministry has allocated funding to increase the number of major joint replacements carried out in public hospitals. The aim is that the national intervention rate will be 2 per thousand population. The Wairarapa DHB is already providing a service well above this level. This means that the Wairarapa will not be given extra funding to increase volume but funding has been made available for postgraduate nursing study within the broad scope of perioperative nursing with a focus on orthopaedics.

Waiting Times for Elective Services

In the October Newsletter I will be providing you with information on the expected waiting times from referral to first specialist appointment [FSA] and from FSA to treatment.

It is my intention to provide this information to you monthly so you have the most recent information on which to base your patients' plans of care.

Treatment Threshold for Elective Surgery

As you will be aware the DHB sets a treatment threshold for determining the level at which treatment can or cannot be given within the public system at any point in time.

The treatment threshold scores effective 1 September are attached. These will change from time to time and I will update you as these changes occur. I am pleased to be able to let you know that the DHB has lowered the score required before a cataract operation can be performed in the public system. The score was lowered from 30 to 25.

Lab Tests and X-rays for Outpatient referrals

It has been brought to my attention that laboratory tests and X-rays are not being received in outpatients prior to patient appointments. This means that outpatient staff can spend a considerable amount of time trying to locate results. Can I remind you to annotate your request form "*cc outpatients Masterton Hospital*" when ordering these tests. This does not apply when using the hospital service.

Radiology Service

Sonographer availability

Until the radiology department is able to recruit a sonographer the service is being provided by linking in with Pacific Radiology.

Urgent cases, and patients requiring scans prior to clinic appointments, are asked to travel to Pacific Radiology in the Hutt. When referred by the hospital the service is free to the patient and some patients are also eligible for assistance with travel costs.

Patients are given information on their entitlements in their referral letter but if you are unsure of when patients are eligible for travel assistance let me know and I can provide you with the DHB criteria.

Pacific Radiology sonographers are visiting Masterton hospital as able to cover the other work.

New patient information system

Masterton Radiology department has installed a computerized patient information system. Patient information, including referral forms, is now stored electronically. This will reduce the risk of lost forms and allow the staff to answer queries about a particular patient more rapidly.

The system has many other applications that will be useful to general practice which will be developed in the future.

Electives Project – From Referral to First Specialist Assessment

As part of the elective services project we have been looking at the procedures currently used by the DHB for making outpatient appointments, comparing these with Ministry requirements and good ideas in other DHBs, and making improvements.

As this is a key area of interface between primary and secondary care your understanding of the current process and input into change is critical.

There are three key principals that underpin the process. These are:

1. Appointments should be allocated according to urgency and severity of the condition as assessed according to nationally consistent criteria.
2. Waiting times should be no longer than six months from referral to a First Specialist Assessment [FSA]. This gives referrers and patients a clear idea of the likelihood of the DHB being able to provide the service requested. Where the service cannot be offered within six months it allows other options to be explored promptly.
3. There should be clear communication from the DHB to patients and GPs at all times.

With these principles in mind you will appreciate the importance of the information contained in your referral letters to the appropriate prioritisation and timeliness of your patient's assessment.

In order to provide useful feedback on referral letter quality I will be meeting with the hospital specialists to

survey their thoughts on what makes an excellent referral letter. I realise a great deal of work has already been done in this area, including the development of standard referral forms for general surgery and orthopaedics. This is an opportunity to review this work, make improvements where appropriate and look at the other areas of elective treatment.

I will provide you will constructive feedback on these meetings in the next newsletter.

Elective Services Performance Indicators [ESPI]

The DHB reports monthly to the Ministry on how it is performing in the delivery of elective services against eight indicators.

This information is publicly available for Wairarapa and all other DHBs on www.electiveservices.govt.nz. The indicators are explained fully on the website and include:

Appropriate assistance and advice to the patient and primary care practitioner

ESPI 1. The patient and their primary care provider are to be advised within 10 days of a referral whether a FSA will be provided within six months. If an FSA is not available advice on alternative options must be provided.

Access to Assessment

ESPI 2. All patients accepted for an FSA are seen within six months of the date of referral.

Clarity, Certainty of Plan of Care

ESPI 4. All patients and their GPs are provided with a written plan of care within 10 working days of their first specialist assessment

Access to Treatment

ESPI 5. All patients are given certainty of treatment receive treatment within six months of offer.

This website is also where you will find the national referral guidelines and the clinical priority assessment criteria – its well worth a look.

Clinical Society meetings – upcoming topics

Date	Topic	Speaker
21 September	Referral Forms and Guidelines	Lynette Cherry – GP Liaison

Lynette