

# General Practice Newsletter

## Counties Manukau Primary Care

General Practice Newsletter from Counties Manukau DHB and Middlemore Hospital.

### Announcement of Resignation

It is with regret that CMDHB announces the resignation of Stephen McKernan from his position as Chief Executive Officer with Counties Manukau District Health Board.

Stephen has been appointed to the position of Director General of Health and will be taking up his new role on 31st of July.

Stephen has been in CEO roles for the past eight years with four of these at Counties, during this time he has made a major contribution to our organisation's success.

Over the years Stephen has continually supported the development of innovative care solutions and has been a key driver in many programmes including Let's Beat Diabetes, Chronic Care Management and the Healthy Housing programme.

Stephen has led his team to improve the health and wellbeing of our community, increasing access to both primary and secondary care services, working toward clarity around long term plans for development, and developing or upgrading many CMDHB buildings and facilities. Of particular note have been the Cardiac Catheter Lab, the Neonatal Unit and the newly opened National Burn Centre.

He goes with best wishes from the Board.

Pat Snedden, *Chairman, Counties Manukau District Health Board*

### News from the GP Liaison Desk

#### Electronic Discharge Summaries (EDS)

I am anxious to improve the process of getting the patients Discharge Summary to the right GP. I am aware that many GPs get EDS for patients that are not known at the surgery. In order to get an idea of just how prevalent this is I would be grateful if GPs could send all such EDSs back to me at: Dr T Bracken, GP Liaison, Staff Centre, Middlemore Hospital, Private Bag 93311, Otahuhu. If you have other EDS problems I would like to know about them also.

**The Sleep and Oxygen Service** at CMDHB is now up and running. Please refer through usual channels and if possible send completed questionnaire which is enclosed with this newsletter.

#### Important Notice

From 1st September 2006 REFERRAL ACKNOWLEDGEMENTS for outpatient appointments will be sent out with a new heading of "Modify Referral" rather than Discharge Summary as at present.

This is a change requested by many GPs but to be able to accept these messages with the new heading, you may need to update your PMS.

If you are not on the latest version please check with your PMS vendor which versions can accept the new message heading otherwise these messages will be rejected and will not appear in your inbox.

#### Referring Patients

When referring patients to EC please notify patient details to GP Admitting on 276 0226. A reminder - please ensure all referrals include current address, telephone no. and NHI.

**Tom Bracken, GP Liaison, Acute Care, Medicine & Clinical Support**

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**Elective Services  
GP Help Desk:  
Ph 270 4723  
Fax 277 1600**

## Home Services

### **Announcement – Important Information:**

Personal Health Home Services Co-ordinators and Meals on Wheels will be transferring from Home Health Care to the Needs Assessment & Service Co-ordination team from the 1st July 2006:

Needs Assessment Service Co-ordination  
Middlemore Hospital  
Private Bag 93311  
Otahuhu  
Phone: 09 276 0040 Internal Ext. 2293  
Fax: 09 276 0041 Internal Ext. 8041

Home Services Co-ordinators:  
Julia Unka Ext 2331  
Wilma Fitzpatrick Ext 2605

Meals on Wheels Admin: Avril Butler Ext 2293

Kindly commence faxing all referrals to 09 276 0041 from the 1st July 06.

We look forward to hearing from you at the new address.

## Improved Access for Hip and Knee Arthroplasty for CMDHB Patients

Over the last 12 months the CMDHB Orthopaedic Department has faced significant challenges in complying with the Ministry of Health Elective Services strategy to improve access to elective surgery. We are now delighted to be able to offer improved and timely access to patients requiring hip and knee joint replacement surgery.

As part of the management of the large volumes of patients requiring surgery in 2005 a number of patients of lower priority were removed from the treatment list and returned to Primary Care. Improved processes have allowed many of these patients to be reviewed and, if still requiring surgery, have this surgery completed.

Surgery is now being offered to those patients prioritised as requiring treatment within a 6 month period following the first specialist assessment appointment.

As a consequence of this service increase the Orthopaedic Department is pleased to announce that the thresholds for patients who have clinical indications for possible hip or knee joint arthroplasty have been lowered. Referrals of patients with a lower level of clinical need are now able to be accepted for specialist assessment regarding hip or knee arthroplasty.

Michelle McCallum-Jones Phone: 021 784 191

*Orthopaedic Service Manager, CMDHB.*

## Thanks

Dear General Practice and A & M Teams

On behalf of the Middlemore Hospital and other DHB staff, I would like to thank all the general practice and A&M teams for the extra work undertaken to help cope with the recent RMO strike.

The Hospital and DHB appreciate the willingness displayed to take on that extra responsibility and defer or prevent referrals and admissions where ever possible.

With your assistance we were able to cope with the strike and minimise disruption of services to patients. The numbers of patients presenting to EC was reduced by 20% and this was a tremendous help at the hospital end.

The hospital is well on the way to redressing the outpatient back log and rescheduling postponed surgery and if patients ask they can be reassured they will be contacted in the near future. As usual, if a case has become more urgent, please contact the consultant concerned.

Once again many thanks for the help and support.

Kind regards



Stephen McKernan, *Chief Executive*

## GP Alert

Do you have practice nurses new to diabetes management?

Do they need an update on diabetes knowledge & skills?

E-mail me with the following information;

Names of nurses  
Preferred day/time  
Practice address  
Required topics.

Judith Dee, DNS Phone: 021 224 0576  
JDEE@MIDDLEMORE.CO.NZ

## New on Healthpoint!!!!

**You now have direct access to the medical professional (CMDHB referral) information on Healthpoint without having to put in your password each time.**

Log in and tick the "remember me" button, and you will no longer have to log in again on that computer. You can use remember your password on more than one computer, so also provide your practice nurse with direct access by logging onto their computer.

If you have forgotten your password either click on "forgotten password" in the medical professional area of the home page, [www.healthpoint.co.nz](http://www.healthpoint.co.nz) or phone 630 0828 to get your password.

## Self-Management Network

If you have an interest in self management and want to know more or share your ideas then the self management network maybe for you. It is an informal group of people interested in self management principles to prevent disease development and improve the health of people with long-term health conditions. The group includes doctors, nurses, consumers, managers, psychologists and allied health professionals from many different parts of the country.

The purpose of the network is:

- To raise awareness of self-management
- Provide a forum for meeting like-minded people
- To identify opportunities to work together collaboratively
- To learn from each other
- To promote system changes that recognise & support the central role of individuals and their families
- To promote healthy public policies for prevention and reduction of long term conditions
- To support training and research in this area

*"Self management is about people with chronic conditions having greater control in looking after themselves with the support of their families/whanau (where desired), and in partnership with health care providers."* (National Health Committee 2005)

**Increased self management support has now been recognized internationally as one of the essential components for improving chronic care outcomes and the health of our communities.**

For further information, or to receive newsletters, & information about forth coming events:

Contact: Dr Janine Bycroft  
(jby@ihug.co.nz Ph 021 43 97 42) or  
Andy Mclachlan CVD nurse  
AZMcLachlan@middlemore.co.nz

## Call for Volunteers for Trial of Biological Agent vs Methotrexate in Rheumatoid Arthritis (RA)

The modern management of RA with Disease Modifying Anti Rheumatic Drugs (DMARDs) has led to much better outcomes for patients, with reduction in pain and improvement in function. NSAIDs are no longer considered adequate, and the best treatments include salzopyrin, methotrexate and the new biological agents, known as TNF alpha blockers. The latter not only improves the inflammation, but significantly reduce the damage which occurs from RA. However, because of the expense PHARMAC has limited their use to those patients who have failed three DMARDs, including methotrexate, leflunomide and combination therapy

An opportunity exists to treat patients with early RA who have not yet been started on methotrexate, with randomisation to a new TNF alpha blocker, given by subcutaneous injections, with the control arm being the next most effective drug, weekly methotrexate.

If you have such patients, we would be happy to have them assessed for suitability for the trial, which runs for 12 months in the first instance, with the opportunity to continue for a further 4 years for those achieving a response

### Arrow Study

Arrow Study is an exciting new Oral Biological Agent which is looking into how effectively it treats the symptoms of Rheumatoid Arthritis (RA) for patients whom Methotrexate is no longer working.

This study lasts for 12 weeks.

For further information on either of these studies please call Peter Gow 021545453, or the Rheumatology Research Nurse Frances Kasmi, or Karen Lindsay Phone 09 2760044 XT 8966

## CADS Pregnancy and Parental Service

The Pregnancy and Parental Service is now taking referrals from South Auckland GPs for their new Pregnancy and Alcohol and Drug assessment Clinic. The venue for the clinic will be at Manukau Super Clinic Module 6. The start date is Wednesday 9th of August 2006.

The purpose of the clinic is to provide :

- Assessment of alcohol and drug use in pregnancy
- Information on facts and effects of alcohol and drug use in pregnancy and breastfeeding
- Referral as appropriate to other CADS services

### Criteria for referral:

Pregnant women who:

- Use alcohol and/or other drugs

### How to refer:

- Phone Elly Richards (RM, RGON) on 4868920 Ex 5118/ 021983109
- Fax client details and brief reason for referral to 8155851 or
- Post to 50 Carrington Rd, Point Chevalier, Auckland.

Clinic Details:

**Day:** Every Wednesday 9.30 am to 1pm

**Where:** Manukau Super Clinic, Module 6  
901 Great South Rd, Manurewa

**Start Date:** 9th August 2006

# National Burn Centre formally opened on June 16

CMDHB was proud to formally open Middlemore's state-of-the-art National Burn Centre on June 16th. The facility, once fully operational, will provide treatment and rehabilitation for some of New Zealand's most severe burn patients.

"The formal opening of the facility was about celebrating the hard work of all those who have tirelessly lobbied over the years and supported the establishment of a National Burn Centre at Middlemore. It is a wonderful achievement," says Chris Fleming, General Manager Surgical and Ambulatory Care.

The opening was well attended by more than 200 guests, who were guided through the afternoon's proceedings by MC Mark Sainsbury.

CMDHB Chairman Pat Snedden and the new clinical director of burns Dr Richard Wong She, both addressed the crowd, as well as burn patient Serena Rudd. NZ Idol runner-up Nik Carlson who was seriously scalded as a baby, performed for the crowd.

Prime Minister Helen Clark spoke of the value of the National Burn Centre to New Zealanders, before cutting the ribbon to officially open the new facility, with burn patient Serena Rudd.

On Monday the 19th of June, patients from Ward 14 (Middlemore's old burn unit) were transferred to the new National Burn Centre.

Located on the first floor of the Acute Hub at Middlemore Hospital, the National Burn Centre is directly above the Emergency Department and flanked by the Kidz First Children's Hospital, acute theatres and the planned Intensive Care Unit (ICU).

Although the new Centre is now being utilised, it will not be fully operational until 2008, when the Intensive Care Unit is co-located.

"There is still a lot of work that needs to be done for us to establish and deliver a sustainable national burn service," says Chris Fleming. "We currently have only two members of the Department of Plastic Surgery with a sub-specialty interest in burns, however from December this year the surgeons will be joined by Dr Joel Fish, an eminent Burn Surgeon from Canada, for an 8 month sabbatical. Active recruitment for Burn Surgeons is ongoing, to ensure the service will be sustainable in the long term," says Mr Fleming.

The National Burns Centre is part of a larger burn care network with existing regional burn treatment facilities in Christchurch, Hutt Valley and Waikato. Staff will be working closely with these units to manage referrals, while Middlemore continues to provide a Regional Burn Service to the Northern Region.

Thank you to all who have contributed to making the National Burn Centre a reality, in particular to the Ministry of Health for financial support received for the capital build and also the South Auckland Health Foundation who have been instrumental in obtaining \$2.5 million for the facility and specialist equipment.

## CMDHB Supports Quality General Practice

CMDHB has secured one-off funding to support practices wishing to enrol in the RNZCGP's CORNERSTONE™ programme. There is sufficient funding initially for 26 practices to participate. These practices have previously indicated their desire to Russell Smart (RSmart@middlemore.co.nz). If you are considering participating in Cornerstone please contact Russell to see if you can access this funding or need to join a queue. This practice accreditation programme is both a quality improvement activity and an assessment tool that allows "health care organisations to accurately assess their level of performance in relation to established standards, and to implement ways to continuously improve the health care system".

Allan Moffitt, *Director Primary Care Development*

### Newsletter contacts:

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