


GP e a s t e r n GP

Eastern Ranges GP Association Newsletter Winter 2010



E-health
on its way to a
practice near you!

meet the mental
health nurses

who's **top of
the doc's?**

five minutes
with who?

Nurses are Patient People

ERGPA's Mental Health Nursing Team is growing – over 26% of our General Practices use one or more of our Mental Health Nurses to work with their patients. **Do you know our team?**

Craig Maloney; Mental Health Services Manager

I began my career in Mental Health Nursing in 1986, I then did my university program and specialized in Child & Adolescent Mental Health Nursing as a Milieu therapist and Psychodrama, then as the program manager. I moved into Nursing Education and practice development for 6 years and then returned to clinical nursing working in a day program, and private practice as a DBT and ACT therapist and Consultant.

I specialize in working with people who engage in high risk taking and self mutilating behaviours and cover all of the ERGPA regions as the program manager. Some days I think I will need a helicopter!

Debra Marks

I am the sole remaining mental health nurse from a mental health nursing family dynasty. I have 35 years experience in this area, mostly in community jobs. I've worked across all aspects of mental health; I am a family therapist, a trained group therapist and have completed the developmental psychiatry course at the Austin Hospital.

I'm keen on working with PTSD sufferers, mums and bubs, and really anyone who wants to make changes and work on issues. I currently work at Monbulk Family Clinic, I see a group of fire survivors in Lilydale, I work at Woori Yallock and Swansea Rd Clinic in Montrose.

Philippa Joyce

I entered the field of MH Nursing in about 1975 when I first worked in Delmont Private Hospital in the days when it was primarily a drug and alcohol facility.

I also worked in both public and private settings in medical and surgical nursing in Vic., NSW, and the UK. Since then, I have worked in both public and private settings, in acute psychiatric units, across adult, adolescent and mother and baby specialties.

I commenced a Graduate Diploma of Mental Health Nursing at Deakin University (off-campus), completing this qualification in 2008. I have been working as a MH Nurse/Bushfire Counsellor with ERGPA since May 2009.

I am interested in psychological interventions for MH disorders, particularly related to trauma. I am covering clients based in the Upper Yarra region, but I have clients in the Dandenong Ranges and clients at Steels Creek.

Rachel Pritchard

I attended Uni in Wagga NSW, then worked 2 yrs in Forensic Psych before spending 3 yrs in London where I worked in a private Eating Disorders Unit. I then spend 3 yrs working in Adolescent Mental Health, and 2 yrs in mother baby before having a break from psych and working as a secondary school nurse. I then had my children, and have since worked in psych triage part time for the past 3 yrs, in addition to joining the ERGPA MHN Team 6 months ago.

I have a range of experience, but have always really enjoyed working within the fields of mother-baby mental health and Eating Disorders. I work out of HICCI in Healesville seeing patients from a range of GP clinics in the Healesville area. I am really enjoying working in primary health care, and taking a step away from the crisis work I have been doing for so long. It's refreshing to work with people who actually turn up to their appointments!!

Things I've learnt this month...

ERGPA's first Tertiary Health Scholarship award went to a wannabe GP!

See page 04

It is impossible to tickle ourselves

See page 11

Number of GPs claiming Mental Health Plan 2712 has increased by 30 over 12 months

See page 03

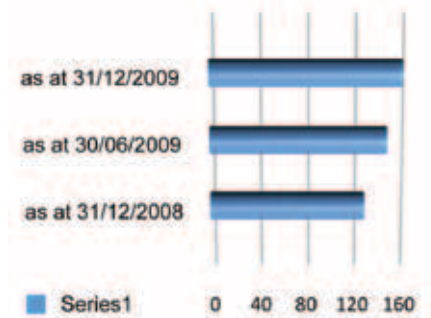
E-health is a rapidly changing environment, but one to watch closely!

See page 06



Left to right - Paula Armstrong, Sharon Lang, Philippa Joyce, Katriona Knothe, Rachel Pritchard, Jo Snibson, Debbie Mole, Jenni Armstrong, Debra Marks, Craig Maloney, Lorraine Ellis, Karen West

No of GP claiming
Mental Health Plan
2712



Gerry Katz

I have about 50 years worth of mental health experience which has been between clinical practice and academic teaching.

I've developed a few specialties over my many years of professional practice. These include arts therapies, children's mental health, women's mental

health, professional mentoring & supervision, mental health research, and most recently, post-trauma counseling. The region I am covering is Yea in the Northeastern Region, (Mondays) and a day at Healesville.

Jenni Armstrong

I have worked in various public mental health acute units and private psychiatry acute units. I have an interest in High prevalence disorders such as depression and anxiety, Drug and Alcohol withdrawal, medication reviews and management and personality disorders.

I enjoy seeing improved patient outcomes through my focus on wellness and recovery. I am currently covering Chirnside Park, Lilydale and Emerald.

We also welcome our newest mental health nurses, Jo Snibson our maternal and child mental health nurse, and Lorraine Ellis our general counselling mental health nurse.

* Practice Nurse Network Support Group

Practice nursing can be very isolating. This group offers support from practice nurses for practice nurses. It is a way to collaborate, share information and resources.

- Meets at Eastern Ranges GP Association 3-4 times a year on a Wednesday evening or lunchtime.
- Has an education component, offering Continuing Professional Development (CPD) for Practice nurses.

Contact Tanya Jardine on 9871 1000 to find out the date/topic for the next meeting or if you would like to receive network invitations.

* Practice Managers Network Support Group

Practice Management can be very demanding. This group offers support from Practice Managers for Practice Managers. It is a way to collaborate, share information and resources.

- Meets at Eastern Ranges GP Association 3-4 times a year on a Wednesday evening or lunchtime.
- Has an education component, offering Continuing Professional Development (CPD) for Practice nurses.

Contact Tanya Jardine on 9871 1000 to find out the date/topic for the next meeting.

* Practice Nurses Available

We have a number of nurses who are actively looking for roles within the general practice arena.

If you are interested in employing a nurse, or need advice in recruiting a nurse,

please contact Tanya Jardine or Kathy Tepper on 9871 1000.

* Receptionists Available

We have medical receptionists who are currently available and are looking to secure placement within our division.

If you are seeking front of house staff or require advice on recruitment please **contact Tanya Jardine or Kathy Tepper on 9871 1000.**



Left to right - Dr Broomhall, Gerald Overton

top of the docs

To read more about Lilydale Medical Centre visit:
<http://www.ergpa.com.au/find-a-gp/lilydale-medical-centre/>

Gerald Overton (ERGPA's intrepid GP Liaison Officer) has been a patient of Dr Geoff Broomhall's since the late 1990's when he and his wife moved to Monbulk. It worked out well that when Dr Broomhall moved practices to Lilydale Medical Centre, the Overtons moved to Mt Evelyn, making it easier to follow their family GP.

Of course Dr Broomhall is not only a GP, but is also a qualified instructor for the Royal Australian College of Surgeons Trauma Course. He's also a Serving Officer in the Royal Australian Navy Reserve, a job that has taken him all over the world.

Gerald joined the team at ERGPA in August 2008, where he took over the role of GP Liaison Officer. This role sees him working closely with Dr Broomhall every Friday morning at the Croydon Office. What was previously a doctor-patient relationship has turned into a friendship!

Lilydale Medical Centre is a large practice located on the corner of Anderson and Main St, Lilydale. Services offered through the practice include enhanced primary care, acupuncture, audiology, pathology and much, much more. *Geoff always does the flu jabs for ERGPA staff and is an all-round office fav!*

Tertiary Health Scholarships Awards

ERGPA, together with Ranges Community Health and the Yarra Ranges Council awarded its first Tertiary Health Scholarship in February 2010. We speak with Gerard Harrop, inaugural winner of the Eastern Ranges GP Association Award and prospective Yarra Ranges GP!

1. What initially made you want to apply for the scholarship?

The opportunity to further enhance my chances of gaining entry into medicine and also to study it well and achieve a strong knowledge in the field to ultimately assist me in my goal of becoming an outstanding GP in the Yarra Ranges.

2. What course are you currently enrolled in?

Bachelor of Biomedical Science (advanced with honors) at Monash University

3. How do you intend to utilise the \$3000 scholarship?

I've utilised the scholarship primarily to buy my books. There's certain text books that you just have to have to complete the course, however there are supplementary ones that I've now been able to purchase which have helped me immensely in gaining a richer understanding of my course. Also, having the extra money has meant that a significant financial burden that would have occurred without the scholarship has been avoided and allowed to more fully engage in university life and to maintain playing sports and other extra-curricular activities. It's also helped my travel costs of driving, meaning now I'm able to afford to come to university every day and attend all my lectures and extra study sessions (this probably would not have been affordable before the scholarship as 2hrs driving a day is tough on a university student budget!)

4. What do you intend on doing once you have completed your degree?



Once I've finished my undergraduate degree I hope to study the Doctorate of Medicine at Melbourne University and once finished that do an internship at The Alfred and then specialise for 3 years in general practice and finally come back to work in the Yarra Valley.

5. When you are required to undertake a work placement, would you be interested in doing it with a GP in the Yarra Ranges?

Certainly! Dr. Wong from the Lilydale Medical Centre would be great!



ERGPA's TOP 5

Time Savers

1 **PRIORITISE!** Remember the rule of 80:20. 80 % of your results come from 20% of your effort. Do the most important things first.

2 Organise your daily to-do-list according to your priorities. A to-do-list helps you focus on the right things to do, and it always feels great when you can cross items off!

3 Eliminate procrastination! Its easier to do the small things first, but getting the larger jobs done will feel like more of an accomplishment.

4 Don't double handle paperwork! The moment you pick up a document decide what you're going to do with it, AND DO IT! This even includes throwing it in the bin!

5 Organise your desk! There's nothing worse than coming in of a morning to a cluttered desk. Organise your piles, do your filing, and keep things clear to maximize your time!



Mooroolbark Medical Centre it's life Doc, but not as we know it....

The afternoon of Friday the 18th December 2009 saw Brice Avenue Medical Clinic, a practice spanning 26 years within the medical landscape of Mooroolbark close its doors to open the following Monday 500 meters down the road as Mooroolbark Medical Centre.

Back in February 2008, Dr Peter Janovic and Practice Manager, Ms Robyn Collins began the long consultation process which saw them travel from Mooroolbark to Mt Martha, Mulgrave, Chadstone, Wantirna, Croydon and Lilydale, visiting newly built, renovated and extended medical practices. Ms Collins said all the practices were very generous and willing to share their ideas, experiences and make recommendations which were

instrumental in their final design layout, furnishing and overall practice structure.

With on site pathology, state of the art equipment and systems, and an abundance of room, there are 7 GPs, some of whom specialise in minor surgeries including mole & skin cancer removals, cosmetic surgery and shared maternity care. Supporting the GPs are 4 Practice Nurses and

8 Practice Staff. Also available are Allied Health Professionals; including a Psychologist, Dietician, Diabetes Educator, Podiatrist, Audiologist and Physiotherapist. The Mooroolbark Medical Centre's intention is to provide a safe, happy and comfortable working environment for their staff and deliver an efficient and convenient service, offering comprehensive and collaborative medical care to all families within the area.

Mooroolbark Medical Centre

- Mooroolbark Medical Centre has gone to great lengths to create a professional but comfortable and positive environment for both staff and patients,
- Mooroolbark Medical Centre has staff and patients that have been working/coming to the practice for 25 years.
- Dr Janovic has been working in the area for 25 years.
- Ms Collins said that since the opening of the new practice they are seeing an average of 11 – 15 new patients a day,
- Mooroolbark Medical Centre is hoping to extend allied services to provide dentistry and/or radiology, pharmacy/ dispensary and massage therapist.
- Much money has been invested in this business, e.g. exterior of building treated with anti graffiti coating, alfresco area designed for meetings to be held outside (weather permitting) Flat Screen Plasmas, Lift, Mechanical Treatment Beds etc
- Ms Collins described her role during this entire process as the “project manager” with all the tradesmen on her speed dial!
- Several of the GPs have special interests therefore providing specialized services such as cosmetic procedures (anti wrinkle, lip & skin augmentation) Sclerotherapy, Acupuncture & Minor Surgical Procedures.

Talking point



@health rollout on its way...

Healthcare Journalist Melissa Sweet investigates

If all goes according to plan, new healthcare identifiers for individuals, healthcare providers and healthcare organisations will start to be rolled out from July 1.

The identifiers, which were recommended by the National Health and Hospitals Reform Commission, are widely seen as laying the foundation for a national e-health system, including the development of electronic patient records.

Pending legislative approval from the Senate, the identifiers aim to overcome the situation whereby patients receive different identifying numbers from different health services, while health care professionals are also identified by a variety of different methods.

The Health Minister, Ms Nicola Roxon, has told Parliament the identifiers will help improve the safety, quality and convenience of care. She said the identifiers, which have been subject to three independent privacy impact assessments, would also help GPs more easily locate specialists through the establishment of a Provider Directory Service.

Medicare Australia will be the initial operator of the Healthcare Identifiers Service, which will assign, issue and maintain the



three sets of unique healthcare identifiers. The AMA supports the move as “an important e-health building block”, but says the Government needs to help medical practices and hospitals prepare.

Amongst the questions that need answering is whether medical practice software packages will be upgraded to accommodate the identifiers, and at what cost to medical practices, the AMA says.

Professor Mukesh Haikerwal, a GP and Clinical Lead at the National e-Health Transition Authority (NEHTA), told this Newsletter that the move would help alleviate the problems

A NEW PERSPECTIVE

Dr Michael Banning moved to Australia five years ago because he was ready for a change after 15 years of working in the English town of Chesterfield.

Now at Selby Family Clinic, he has found many differences between the Australian and English health systems. On the positive side, he thinks patients here have much better access to investigations such as CT scans and endoscopies.

On the other hand, he has been surprised by the “very poor linkages” between health care and social services, and between primary care and mental health services.

He has also found Australia “backward” when it comes to e-health, largely reflecting inadequacies in the available clinical software. He says the UK Government helped drive software improvements by providing

incentives for manufacturers and for users, through quality payments.

“If you could show that 70 per cent of your eligible patients were on a statin and reaching a target cholesterol level, then you could get certain money, and that absolutely relied on having the appropriate software,” he says.

Dr Banning says Medical Director needs more development to become a truly useful tool. He recommends the Pen Clinical Audit Tool (Pen CAT), and Doctors Control Panel (DCP), which lets GPs know which of the RACGP preventative activities are due for the patient being seen.

“What the DCP does is it allows you to be much more proactive,” he says.

caused by there now being more than 80 million health identifiers in use.

Professor Haikerwal said the main challenge for the medical profession in the broad rollout of the e-health agenda would be for specialists and hospitals to change work practices and embrace modern technologies in their practices.

“The GPs are the least of our problems,” he said. “They are at 98 per cent computerisation for clinical purposes. Our Colleges are very adept at providing data electronically to improve care and support practice.

“GPs have been playing in this space for sometime and are crying out for more interconnectivity. GPs are going to drive this agenda, supporting their colleagues in the out of hospital health sector.”

However, Dr Andrew McIntosh, of the Lilydale Medical Centre, said that GPs need to be rewarded for their contribution to the rollout of health care identifiers and other e-health measures.

While e-health may bring benefits for software providers, patients and government, there are questions about what it will mean for general practices, he said. GPs are facing extra costs and demands on their time and staff as a result of the e-health rollout, he said

“We already have to have an IT man in our 12-person practice a few days a week to keep the whole practice running effectively because of the difficulties of maintaining software,” he said.

Dr McIntosh suggested that incentives and grants were necessary to assist the implementation of the e-health agenda in general practice.



FURTHER READING

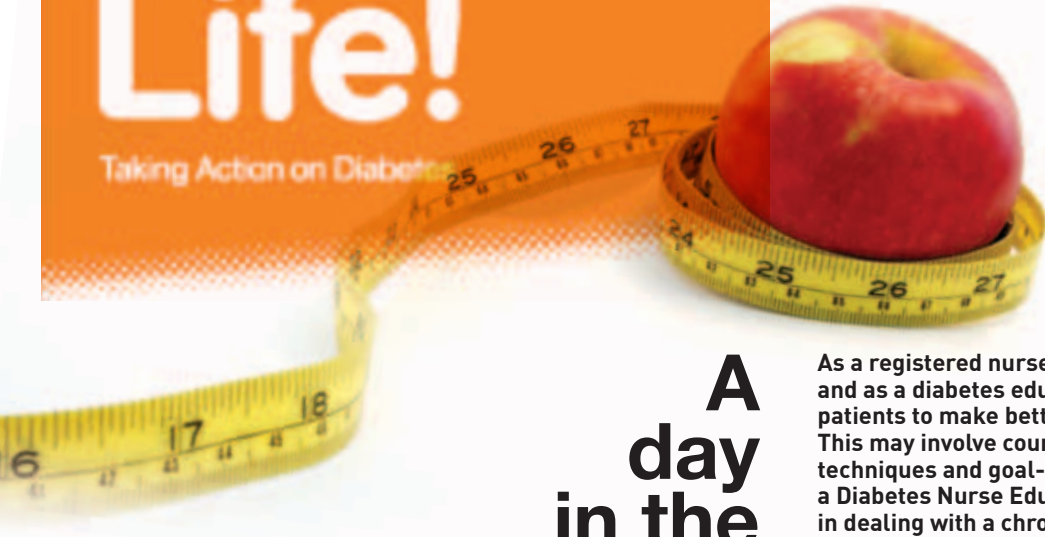
A new e-health website to help consumers, healthcare providers, healthcare managers and vendors stay in touch with the latest e-health innovations. The website is owned by Federal and State health jurisdictions and NEHTA. <http://www.ehealthinfo.gov.au/>

For more info on the healthcare identifiers bill: <http://www.health.gov.au/internet/main/publishing.nsf/Content/pacd-ehealth-consultation>

An article in Eureka Street on e-health in rural and Indigenous communities: <http://www.eurekastreet.com.au/article.aspx?aeid=20408>

Life!

Taking Action on Diabetes



A day in the life of a ERGPA Diabetes Educator

ERGPA provides a one on one diabetes education service by Credentialed Diabetes Nurse Educator, Christine van Boxtel for patients at Lilydale and Pakenham. In addition, ERGPA is able to provide general practices with an onsite diabetes education service for their patients. Emerald Medical Centre and Selby Family Clinic are now utilising this service which is improving patient access to a diabetes education service locally.

“We were already providing a very successful diabetes program at Emerald Medical Centre but to be able to offer the services of a diabetes nurse educator through the ERGPA onsite diabetes education service is the ‘icing on the cake’. Emerald is fairly isolated as far as public transport is concerned so it is often difficult for our older patients in particular to access allied health services out of the area”

Carol Johansson

Practice Manager, Emerald Medical Centre

As a registered nurse my prime responsibility is to my patients; and as a diabetes educator nurse, my goal is to empower my patients to make better choices for their health and lifestyle. This may involve counseling, motivational interviewing techniques and goal-setting challenges which all fit into the role a Diabetes Nurse Educator takes on as she assists her patients in dealing with a chronic condition.

Just educating the client about their condition is often not enough; people with diabetes often have many issues impeding them from taking optimal care of themselves. In this role; we have up to an hour with each person referred to individually discuss with them issues raised in the management of their condition. With the assistance of medical history and pathology requested; we are able to get a medical picture of issues facing these people and assist them in their self-management. On a usual day I will see a couple of the following types of patients:

Scenario 1

Mrs X, recently diagnosed with Type 2 diabetes; pre-diabetes diagnosed several years ago but few actual changes implemented so she progressed onto Type 2. I reviewed Mrs X about 2 months ago and discussed possible changes to her lifestyle; smoking being one of them. She left empowered and prepared “to give it a go”. Mrs X returned last week, somewhat agitated and a bit down. Discussing and measuring her progress, some changes had been made but certainly nothing significant although she had appeared to be trying very hard. As she prepared to leave; she paused and hesitatingly stated that her husband was alcoholic, would drink all night keep her awake till 5.30 am. At 6.30 am, her son would pick her up to take her to his home to look after his children while he went to work. Her husband would think this funny but Mrs X was too physically and emotionally exhausted to take optimal care of herself. Talking to a Diabetes Educator was one way of revealing those things which made life unbearably difficult for her.

Scenario 2

Mr Y has a stressful job in the city; he will only come to see a Diabetes Educator but it must be as early as possible in the morning in order for him to transit into the city. He too has recently been diagnosed with Type 2 diabetes but issues in the workplace took precedence to his self-care. Discussion about this and goals set to progress to three balanced meals a day emphasizing breakfast; he set about making some changes and with the ‘support’ of his wife who was also a nurse he implemented some changes into his busy schedule. Last report, he was taking 6 weeks off work; something he had never done before and was looking at making some wider lifestyle choices that would benefit his health outcomes.

To complete the day; I’m off to a Community Diabetes Support Group meeting where I will talk about the Enhanced Primary Care items to a predominantly elderly audience; advising them of information they can discuss with their GP. Fortunately, they serve a particularly ‘scrumptious’ diabetes-friendly afternoon tea!!!

So ends another day, but there are still letters to be written and phone calls to make to keep a Diabetes Service moving along and of course; the need to update my own education as Diabetes research is always evolving.

Christine van Boxtel: R.N. 1, Diabetes
Nurse Educator- Credentialed

Medical students in GP land – is a win/win for students and the practice possible?

We think so, and we would like to work with you to prove it.

Eastern Health Clinical School places students from Monash University and Deakin University in an integrated medical student program. A number of practices in the region already have an involvement with the Monash program, and we are looking for a small number of additional GP partners for 5 week final year placements for our Deakin students in 2011. Each week consists of the equivalent of 2 practice sessions with a GP supervisor, up to four other sessions working in the broad general practice environment, a day of formal teaching and a day of private study. In addition to placements we would like to integrate greater GP involvement into hospital based rotations and tutorials of students in the 3rd and 4th years of our program, and to involve GPs in planning some innovative rotations in areas such as men's and women's health, indigenous health and addiction medicine.

I look forward to meeting more GPs in the wider Eastern region and building mutually beneficial relationships. The Eastern Health Clinical School is actively engaged in a new clinical education partnership in our region with the Melbourne East General Practice Network (MEGPN) and we look forward to developing relationships with other GP divisions.

If you have an interest in teaching, either based within your practice, or in other ways, and/or you would like to know more about our program, please contact me directly through the office of Medical Student Programs (telephone 9091 18890 or email msp.ehcs@med.monash.edu.au) or through Kathleen Corless the EH GP Liaison Coordinator (email Kathleen.Corless@easternhealth.org.au).

Associate Professor Jenepher Martin
Director of Medical Student Programs

Our Top 10 Doctor Songs

Doctor, Doctor – The Who
Doctor my Eyes – Jackson Brown
Dr Yang – Ben Folds
Witch Doctor - Alvin and the Chipmunks
The Doctor - The Doobie Brothers
Dr Feelgood – Motley Crue
Doctor's Orders – Aretha Franklin
Dr Wu – Steely Dan
Dr Tarr & Professor Feather – Alan Parsons Project
Country Doctor – Bruce Hornsby

Make your own Top 10 and email it to us at ergpa@ergpa.com.au to win an ipod shuffle if it's published!

Are you a people person?

During my second year of nursing school our professor gave us a quiz. I breezed through the questions until I read the last one: "What is the first name of the woman who cleans the school?" Surely this was a joke. I had seen the cleaning woman several times, but how would I know her name? I handed in my paper, leaving the last question blank. Before the class ended, one student asked if the last question would count toward our grade. "Absolutely," the professor said. "In your careers, you will meet many people. All are significant. They deserve your attention and care, even if all you do is smile and say hello." I've never forgotten that lesson. I also learned her name was Dorothy. ~Joann C. Jones

Did you know that ERGPA is on twitter? Follow us at <http://twitter.com/ergpa>

The very best and most complete list of medical doctors on Twitter (famous and otherwise!)
<http://listorious.com/hrana/twitter-doctors>



ERGPA's Melbourne City Rompers!

ERGPA's Melbourne City Romp Team (Kristin, Renee, Tania and Beth) put on their comfy shoes (no heels for these girls!) and raced around Melbourne in March raising money for the Burnet Institute. The team came 42nd out of a total 83 teams in the Corporate Sectionals.

Well done girls!



**Alzheimer's
Australia Vic**
Living with dementia

Living With Memory Loss

Information and Support for people living with early stage dementia and their family members and friends

Would you like to have a better understanding of what is happening?

Would you like to talk with others who are going through a similar experience?

If "yes", this SIX week course may help

Every Monday afternoon commencing 21 June till 26 July at Healesville Living and Learning Centre.

Topics will include:

- Understanding dementia and memory loss
- Latest developments in treatment
- Developing strategies to deal with memory loss
- Improving communication
- Coping positively with changes & preparing for the future
- Stress management

For further information and enquiries please contact:

Penelope Poulter **Ph: 9815 7800**

Or call the **National Dementia Helpline - 1800 100 500**

5 minutes with Alison Dajlan

Alison Dajlan has been working with Yarra Junction Medical Centre for the past 21 years and is currently employed as the practice manager.



My happiest memories are...

holiday-ing in Turkey with my Husband and Mother-in-law.

It makes me laugh when...

Watching football on TV and the cat runs up and down trying to catch the ball.

The worst movie I have ever seen is...

too many to name, I managed a video store as well and some of the preview discs are absolute shockers.

The most valuable thing I have learned is...

Chocolate goes to the hips and everywhere else.

I wish I'd never...

Eating my first piece of Chocolate.

It makes me grind my teeth when...

when people say 'ummmm'.

I'm a master at...

eating chocolate

I am currently reading...

Dan Browns The Lost Symbol

The best thing for a headache is... Chocolate

If I wasn't working as a Practice Manager I would be...

picking capsicums on my husband's farm. Capsicums don't yell at you if you cant fit them in the box!

When I'm not working I...

Watch movies and read anything i can get my hands on.

I wish I had more time to...

clear my desk, i'm sure people put more on their when my back is turned.

I wish I could...

say no to Chocolate

My favourite holiday destination is...

Istanbul – Turkey, a really amazing place.

The person I would take on this holiday is...

my husband.

My favourite day of the week is...

Sunday – my full day off.



What's hot... What's not...

- ERGPA has a high capacity to accept new referrals for our popular services – BOiMHC and RPMS
- Adverse affects cause by the Seasonal Flu Vaccine in children under 5
- Current discussions about the Health Reform – where is our future heading?
- Possible loss of bushfire funding
- ERGPAs new Training Facility!
- New ERGPA Allied Health sites opening in Healesville and Pakenham in the second half of 2010

Highlights from our May Immunisation Update

Sarah Fagan from the Nurses' Board of Victoria introduced the upcoming changes to national nursing registration, credentialing, endorsement of nurse immunisers, and continuing professional development. Key changes include:

- Professional Indemnity Insurance – it will be the responsibility of nurses to understand the level of cover appropriate for the level of risk associated with their current scope of practice;
- Mandatory reporting of colleagues for professional conduct that puts the public at risk;
- Mandatory continuing professional development (CPD) greater than 20 hours per year;
- Complaints access for health consumers;
- Transition to national registration will require Victorian nurses to register in December 2010 and again in May 2011;
- Fees are unknown at this stage but are likely to increase; and
- Midwives and Nurses will be registered on two registers. These are issues relevant to all nurses, not just nurse immunisers.

For further information nurses can contact the Nurses' Board of Victoria on 03 8635 1200, 1300 362 309, www.nbv.org.au or the new Nursing & Midwifery Board of Australia: 1300 088 590, www.health.vic.gov.au/pracreg/natdev

Pota Froutzis is the Australian Childhood Immunisation Register (ACIR) Field Officer. She described how general practices participating in the GPII program can use the reports provided to increase the childhood immunisation rates. It was a very practical demonstration using screen shots from the ACIR website.

Key messages included:

- To improve coverage rates work on the current quarter's 20A report. Disregard previous reports as they become out of date quickly;
- If you don't receive your 20A report contact ACIR;
- Use the payment statement to identify claims that are rejected so as to rectify the problem and increase the likelihood of receiving payment the following month;
- Send notifications to ACIR as soon as possible, don't batch encounters (eg. Don't wait until the end of the month).

Any practice wanting more information about the GPII program can contact **Tanya Jardine** at ERGPA or Medicare Australia at www.medicareaustralia.gov.au, acir@medicareaustralia.gov.au

Judy Evans has over 15 years experience working as a practice nurse and was employed by the RACGP to co-ordinate the development of the RACGP Pandemic Flu Kit.

She asked us to reflect on our current practice:

- Have we become complaisant in our efforts to prepare for seasonal influenza or pandemic?
- Are our infection control policies being developed consistent with the RACGP Standards?
- Are we implementing infection control policies within the practice or are they only used for accreditation purposes?
- Are we triaging and effectively managing patients walking through the door with an infection?
- Are we reporting relevant infectious diseases?

The RACGP Standards are currently being reviewed. The College is seeking consultation on the draft of the 4th Edition of the Standards due for release in October 2010. It is these standards that practices will be accredited against.

Resources
RACGP Standards for General Practices 3rd Ed. - www.racgp.org.au/standards



Improve your Patient's Quality of Life

Achieve safe, effective and appropriate use of medications

Item 900 Home Medicines Review \$143.40

Most HMRs show at least one, but usually more, variations from the Referral medication list and what the patient is actually taking. Patients see more than one GP, also specialists, add in a visit to a naturopath and the medication list is ever expanding. If you think that one or more of your patients might benefit from a home visit by a pharmacist accredited to interview for HMRs, send a Referral for them to their community pharmacist who will organise the rest.

Did you know?

Amazing Medical Facts!

- We exercise at least 30 muscles when we smile.
 - One square inch of human skin contains 625 sweat glands.
 - If you could save all the times your eyes blink in one life time and use them all at once you would see blackness for 1.2 years!
 - When you sneeze, all your bodily functions stop - even your heart.
 - Children grow faster in the springtime.
 - When we go to sleep and enter REM (Rapid Eye Movement), our bodies become completely paralysed as areas of the brain that control movement are de-activated. It is this that stops us falling out of bed.
 - A drop of blood contains 250 million cells.
 - Tongue is the strongest muscle in the human body.
 - Sneezing too hard can cause rib fracture and suppressing the sneeze can cause damage to the blood vessels of head or neck.
 - Cold weather improves human memory and concentration.
 - The human bladder can stretch to hold about 400ml of urine
 - It is impossible to tickle our selves.
 - Men listen with the left side of the brain and women use both sides of the brain
- (Amazing Medical Facts of the Body <http://www.medindia.net/facts/index.asp>)

calendar

All of the Events listed can be viewed on the ERGPA website – for more information & registrations please visit www.ergpa.com.au/events

The last few months have seen a variety of events held at the division, utilising our fantastic new training facility.

Feedback on the venue from those who have attended events has been unanimously positive, and the catering, sourced from local restaurants, has also received a big tick of approval. Attendees have said sessions held this year have been 'Extremely informative', 'Excellent presentation in a relaxed manner, Excellent Venue & meal', 'Really enjoyed and appreciate speaker; and being served yummy food and lovely heart biscuits' and 'Very Relaxed, Excellent Presentation, Thank you'. We aim to please!

Several events have been held around aged and palliative care, and also our 3 session series on **Young Minds – Treating Depression and Anxiety in Young People**. Attendance at these sessions provided participants with the training required to qualify for the new Mental Health item number. There has been some delay by RACGP in the processing of this information, but we have been advised this should be rectified in May, and all items claimed after the date of the final session (March 25) will be accepted.

Infection control continues to be a topic of interest to general practice, and we hope to run another one of these sessions later in the year. Violence in the Workplace, presented in conjunction with Victoria Police, was also well received, with staff receiving tips on how to

make their workplace as safe as possible.

We have also run successful Practice Nurse and Practice Manager Network meetings, and these will also continue throughout the year.

Coming up: we are still trying to finalise dates for a number of sessions, including education sessions on autism, bipolar and personality disorders, physical and mental health co-morbidities and childhood epilepsy, however the following sessions are confirmed:

Thurs 27 May @ Croydon

Special General Meeting and Member's Briefing: **Health and Hospitals Reform An update on the health reform process, the May Federal Budget and the future of Divisions of General Practice.**

Wed 2 June @ Mitcham Hospital

An information session for Practice Managers and Nurses explaining the **admission process, exclusion criteria and breadth of mental health services** available at Mitcham Private Hospital, and a tour of the new 14 bed adult mental health unit.

Tues 15 June @ Croydon

Preventative Cardiovascular Health with Dr Siobhan Lockwood
An update on preventative cardiovascular health and introducing developments such as percutaneous valve replacements, left atrial appendage occlusion, coronary CT and bioabsorbable stents.

Tues 22 June @ Croydon

Non-Displaced Fractures

A follow up education event for non-displaced fractures, focussing on paediatric fractures

Thurs 15 July @ venue tbc

An Elephant in the Consulting Room

The GPs role in treating erectile

dysfunction with Steve Carroll, a sex therapist and clinical psychotherapist, who has educated and supported medical colleagues in the area of male sexuality and medical communication for many years.

Watch your Friday Division Desktop and check on line for all updated information relating to these and other upcoming events.

ERGPA now have online registration Register online by visiting www.ergpa.com.au You will receive a conformation email and ERGPA staff will be notified that you are attending the event.

If you have any questions about registering online please call ERGPA and ask for either Lisa or Felicity, who will walk you through. It really is very user friendly, simple and guaranteed to save you time!

Want to be kept up-to-date with all ERGPA Events via email?

Simply email events@ergpa.com.au with your preferred email address, and we will send you our new monthly events e-newsletter.

Contact

Email ergpa@ergpa.com.au

CEO email ceo@ergpa.com.au

Board email board@ergpa.com.au

Newsletter email newsletter@ergpa.com.au

Web www.ergpa.com.au

Phone 03 9871 1000

Fax 03 9879 5407

Address 21-23 Maroondah Hwy
Croydon, 3136

Twitter twitter.com/ergpa

Facebook facebook.com/ergpa

© Copyright 2010 Eastern Ranges GP Association. All Rights Reserved.

Staff, Board & GP Leaders

CEO

Kristin Michaels

Managers

Mark Caldwell (Patient Services), Diana Fayle (Education and liaison), Tanya Jardine (Practice Development) Erin Callow (Health Services Development) David Overton (Operations), Craig Maloney (Mental Health Services Manager), Peter Sheers (Finance Manager)

GP Services Officers

Gerald Overton, Renee Gunstone, Catriona Knothe, Tania Middleton, Ian Bell, Lisa Houston, Susan Rice, Sally Ingram, Kathryn Tepper, Lauren Castillo, Sally Wilson

Finance and Admin

Beth Pitman, Felicity Talha, Radha Kumarasamy, Tracey Dingey

Client Relations

Belinda Franken

Board of Directors

Dr Barbara Inness (Chair), Dr Heather Allen, Dr Anthony Palmer, Dr Elroy Schroeder (Treasurer), Dr Andrew McIntosh (Deputy Chair), Cengiz Balci (Independent Director), Leanne Raven (Independent Director)

Mental Health Nurses

Debbie Mole, Debra Marks, Faith Ember Jenni Armstrong, Jo Snibson, Lorraine Ellis, Rachel Pritchard, Sharon Lang

Bushfire Councillors

Geraldine Katz, Karen West, Philippa Joyce

Diabetes Educator

Christine Van Boxtel

Chronic Disease Nurses

Clare Blee, Agnes Whittle

GP Leaders

Dr Geoffrey Broomhall (Hospital Liaison/ Quality Use of Medicines), Dr Robin Rowe (Aged Care), Dr Louise Alexander (Mental Health), Dr Tony Palmer (Workforce), Dr Lesley Sutcliffe (CPD)

Practice Nurse Leader

Dianna Ferguson

Practice Manager Leader

Lyn Foden

Practice Nurses - Eastern Ranges After Hours Medical Service

Fernand Van-Velp, Helen Oettinger, Lynette Bell, Nichola Rumpff, Paul Rumpff

WorkHealth Nurses

Diane Barber, Karin Brown, Karyn Hollenback, Kay Martin, Lynette Peacock, Robyn Agis, Ruth Tinney