



CANNING  
DIVISION  
OF GENERAL PRACTICE LTD

## Canning Division Nursing in General Practice News

### Forthcoming workshops:

**General Practice/School Nurses Clinical Update on Friday 6th March**– if you are interested please phone Department of Paediatric Nursing Education at 9340 8926

**29 April** - 4year old health check, immunisation points to remember, and maternity allowance and new overdue rules.

**27 May** - Health checks

**August (TBA)** - Accreditation

**October (TBA)** –Chronic kidney disease and Diabetes

We plan to have the workshops at the Association for the Blind and flyers with the details will be circulated 3 weeks before each event.

### Some comments on use of the PN item number 10993

In the notes in Medicare Benefits Schedule - Note M2.1 it indicates the following: 'Item 10993 can only be claimed by a medical practitioner (not including a specialist or consultant physician) where an immunisation is provided to a patient by a practice nurse on behalf of the medical practitioner'.

**This includes compliance with any state or territory requirements. For example, in some states and territories, some nurses can only administer a vaccine following an order or direction from a medical practitioner.** The medical practitioner under whose supervision the immunisation is provided retains responsibility for the health, safety and clinical outcomes of the patient.

**Please see the Nurses Board of WA Medication Management Guidelines for Nurses and Midwives** which states that 'the Administration of S8 and S4 medications must comply with prescription orders written by a medical practitioner, nurse practitioner or dentist (Poisons Amendment Regulations (2005) Section4)'

Website of Guidelines is at  
<http://www.ogpn.com.au/projects/Nurse/files/Medication%20Mgmt%20NBWA%20Dec%2006.pdf>

Medicare descriptor also states-

**Where the medical practitioner also provides a service to the patient in addition to the immunisation being administered by the practice nurse, the medical practitioner is able to claim for the professional service they provide to the patient.**

Item 10990 can also be claimed in conjunction with item 10993 provided the conditions of 10990 or 10991, are satisfied (see explanatory note M.1).

Medicare comments on use of level A (item3) or B (item 23)

#### LEVEL A

These items are for the obvious and straightforward cases and the practitioner's records would reflect this. In this context 'limited examination' means examination of the affected part if required, and 'management' the action taken.

#### **Example: Triple Antigen or Tetanus Immunisation**

LEVEL B (a professional attendance of less than 20 minutes duration)

The descriptions of these items introduce the words 'selective history' and 'implementation of a management plan in relation to one or more problems'. The essential difference between Levels A and B relate not to time but to complexity.

**Example: Otitis media presenting as earache**



## WA General Practice Network State News



### Reminder! Mental Health Education opportunity

Perth Primary Care Network in collaboration with The Ministerial Council for Suicide prevention WA presents a Training Program for Nurses:

**People at Risk of Self Harm and Suicide:** Engagement, Assessment and Management of patients.

A FREE 2 day workshop:

- Central Metropolitan region Tues 24th—Wed 25th March 2009
- North Metropolitan region Tues 31st March—Wed 1st April 2009 (n.b. date change)
- South Metropolitan region Tues 28th—Wed 29th April 2009
- Busselton/Bunbury Tues 12th—Wed 13th May 2009

For further info or to register contact Alan Huggins Fax: 9279 8221 Email: [allan.huggins@ppcn.com.au](mailto:allan.huggins@ppcn.com.au)  
Please include your contact details and the session you wish to attend.

## Immunisation

saves lives

### New Vaccine Schedule

#### Commencement of the Single Childhood Immunisation Schedule in WA

Effective from the 1<sup>st</sup> February 2009

The Communicable Disease Control Directorate has advised all General Practices of the changed schedule and recommended vaccine usage.

If you would like further information please contact your Division / Network Immunisation Program Officer or go to [www.public.health.wa.gov.au](http://www.public.health.wa.gov.au)

### **HURRY. SOON THE CERVICAL CANCER VACCINE WON'T BE FREE.**

Women aged 18 to 26, get vaccinated today.

© 2009, Department of Health, Western Australia

guard against cervical cancer™

### **Free HPV vaccine extension means more women will be protected.**

Young women can now access the cervical cancer vaccine for free until the end of the year and are being encouraged to do so.

More than two-thirds of young women aged up to 26 years old have already accessed the vaccination, but the opportunity now exists for even more to take it up.

The Department of Health and Ageing has extended access to the free vaccine if the first shot is administered before June 30 2009. Young women can then complete the course of three shots for free until December 31 2009.

This is a safe and efficient way to protect against HPV (human papillomavirus), which is a leading cause of cervical cancer. This vaccine and continuing with regular pap smears offers women the best protection against contracting HPV.

The vaccination will cost \$450 for a course of three shots from 2010.

**More information about the HPV vaccine can be found at: [www.immunise.health.gov.au](http://www.immunise.health.gov.au)**

WA General Practice Network: [www.wagpnetwork.com.au](http://www.wagpnetwork.com.au)



## Australian General Practice Network National News

### **Do you know an “agent of connectivity”? ... that’s a practice nurse to you**

*Courtesy of Inside the Network - November 2008*

New research into the role of practice nurses has found that they demonstrate six key operating roles in the workplace. These roles can be oriented towards patients, towards the practice in which they are working, and towards the community, and they extend beyond the clinical and administrative roles which are generally understood to be part of nurses' work.

AGPN has partnered with the Australian National University (ANU) to undertake a three year research study funded by the Australian Primary Health Care Research Institute. The research team, led by Dr Christine Phillips, has involved observing nurses at work as well as structured interviews with nurses, GPs and practice managers.

Some of the key study findings were presented by Julie Porritt, Principal Adviser Nursing in General Practice at AGPN as part of a keynote speaker's paper at the Australian Rural Nurses and Midwives 14<sup>th</sup> National Conference at Adelaide in November; [www.arnm.asn.au](http://www.arnm.asn.au)

The six operating roles that have been identified are:

Patient carer	Organiser	Quality controller
Agent of connectivity	Educator	Problem solver

Julie said that the study had shown that, 'while most of these roles would perhaps be seen as obvious ones, the agent of connectivity is something that has not been described before in general practice and is particularly important for establishing and maintaining collaborative practice.'

The research results are indicating that internally, nurses within a practice are acting as an intermediary - or an agent of connectivity - between the different disciplines.

'They do this through the unwritten responsibility of being responsive to others and the cultural rule which enables nurses to enter all spaces in the practice, including doctor's rooms.'

General practice nurses are highly responsive to others, and this responsiveness is supported by the multi-tasking they commonly undertake, engaging in multiple tasks simultaneously. They also play an important role in connecting the practice to its community by building relationships with external health care providers, community service providers and other community agencies.

'As more doctors work part-time, continuity of patient care is increasingly vested in the nurse, who ensures that care is continued by other doctors in the practice, across the spectrum of healthcare providers outside general practice, and by the patient at home. In this respect, the nurse works to ensure connectivity within internal and external aspects of care provision, but also to link the two.'

This role of connectivity is particularly important for those who work in other sectors of the health system. The practice nurse is the main contact in general practice; practice nurses can help you to maintain continuity for patients and act as a key agent in supporting quality care services.

'The role for the practice nurses is dynamic,' says Julie, and nurses in this setting are increasingly becoming recognised for the skills and expertise that they bring as an integral member of the general practice team.'

'Our study is also showing us that practice nurses and GPs are working together as an inter-professional community,' says Julie. 'Models of leading are shared between GPs, practice nurses and other members of the practice team.'

The research is scheduled for completion this month and the completed results will be available early in the new year. This research should provide valuable information to contribute to the planning that is currently underway to develop a stronger primary health care focus in the Australian health sector.



## Hot Tips and Tricks for Nurses in General Practice

### Everything you wanted to know about TB .....

#### World Tuberculosis (TB) Day

24 March 2009

Perth Chest Clinic invite expressions of interest for an educational seminar on

“Everything you wanted to know about TB and how to do it!”

Including information on: New developments and Contentious issues

Venue: Lecture Hall, Department of Health 189 Royal Street, Perth (video conferencing available on request)

Cost: Free

Time: Afternoon session 1pm – 5pm Practical case based advice on TB management for public health workers/nurses/students

Evening session 7pm – 9pm New developments and contentious issues for doctors.

All delegates are welcome at either or both sessions.

For more information and registration form go to [www.wagpnetwork.com.au](http://www.wagpnetwork.com.au) and click on Friday Update 30th January 2009 (n.b. closing date has been extended).

### Can I claim.....?

If a patient has a GP Management plan in place (item 721) for a chronic condition can a practice nurse bill a **10997** if the GP does not see the patient or is not present at the time?

#### Answer:

**Yes**

“The GP is not required to be present while the chronic disease monitoring and support is undertaken. It is up to the GP to decide whether they need to see the patient.”

Item 10997 can be claimed 5 times per year if the patient has a current GPMP (item 721) - but CANNOT be claimed at the same time as an initial GPMP/TCA (721,723), or with a 725, 727, 729 or 731.

Can also claim a 10990/10991 bulk billing item if the patient is eligible.

Item 10997 may be used to provide: checks on clinical progress; monitoring medication compliance; self management advice, and; collection of information to support GP reviews of Care Plans.

*Medicare Benefits Schedule*

## Warfarin—Patient information

Royal Perth Hospital website has a Warfarin Information sheet compiled by the Royal Perth Hospital Pharmacy Department and Haematology Collaboration, May 2006. Go to [www.rph.wa.gov.au](http://www.rph.wa.gov.au) click on the Patients & Visitors tab then ‘warfarin information’ tab on the left of this page.

Information includes the types of tablets & doses, administration times, blood tests, signs of bleeding and other useful information.

The Department of Veterans Affairs (DVA) website also has relevant information sheets for patients and health care providers. Go to [www.dva.gov.au/health](http://www.dva.gov.au/health) then click on veterans MATES.

Module 17 includes: Veteran Brochure: 8 steps to taking warfarin, INR Record Sheet and Therapeutic Brief: The S.A.F.E approach to warfarin therapy.

#### Useful Websites:

Medicare Australia [www.medicareaustralia.gov.au](http://www.medicareaustralia.gov.au)

Medicare Online—Search the MBS [www9.health.gov.au/mbs/search.cfm](http://www9.health.gov.au/mbs/search.cfm)

Department of Health & Ageing (EPC and Health Assessments etc.) [www.health.gov.au/epc](http://www.health.gov.au/epc)