From the Professor’s Desk

We welcome a new clinical GP Registrar (Dr Dayna Griffin) for the next 6 months.

We farewell Dr Wayne Ling, who has completed his training term with us. He is continuing his vocational training at a Campbelltown general practice.

We also farewell Dr Thi Nguyen, who has completed her Academic GP Registrar term. She has completed her research project on mental health of Vietnamese patients, presented her findings at the PHC Conference in Sydney and is finalising a paper for submission to a journal.

We have been re-funded by the Cancer Institute of NSW to continue our work on “joined-up cancer services” in SW Sydney.

The Health Contribution Fund (HCF) predictive modelling work on the pathways of diabetes patients to admission and re-admission to Fairfield Hospital is progressing well. We have 10 general practices in Fairfield working with us to examine this research question.

We have completed the pilot study of the interdisciplinary undergraduate student team placement program in various units in Fairfield Hospital. This has been presented to the Integrated Clinical Training Network and Health Education & Training Institute of NSW Health. An online resource has been developed to support clinical supervisors of health professional students.

We are now in the phase where some of the service delivery models we have been researching and developing are sufficiently tested to enable the dissemination and translation to other health neighbourhoods in SW Sydney. The SW Sydney Local Health District is encouraging us to do this in partnership with the SW Sydney Medicare Local. A developing model is a partnership of the Fairfield Ambulatory Care, Community Health and General Practice & Primary Care services and the Connecting Care coordinators to optimise the care for the patients enrolled in the SWSLHD Connecting Care Program, focused on the shared care of patients with chronic disease. Most of you should be familiar with the Connecting Care Program and Care Coordinators who would have contributed in some way to the optimisation of care for your patients with chronic disease.

NSW Health will also be launching a program on General Practice-Hospital clinical handover in the next few months. This is an exciting development as players along the continuum of care are starting to recognise that we must act to promote the continuity and integration of care across the primary and secondary care sectors.

Last but not least, I would like to invite you to join us at our seminars on the last Friday of every month. In addition to sharing a sandwich or two and sharing experiences around the latest in clinical topics of interest, you will get to meet our new members – and catch up with us older ones – as well as relevant clinicians from your local hospital.

See you soon.

Professor Siaw-Teng Liaw
Director General Practice Unit
Welcome Dr Dayna Griffin, Clinical Registrar

I grew up in Adelaide and completed a BSc at the University of Adelaide in 2004 before moving to Canberra to study an MBBS at the Australian National University (completed in 2008). I completed my intern and resident medical officer years at St George Hospital in 2009 and 2010 then spent 2011 and 2012 at various hospitals around the country as a locum medical officer, mostly in ED.

I really enjoyed my cardiothoracic, ICU and anaesthetics terms and at one stage planned on ICU. Doing locums in ED I realised that I really enjoyed the GP presentations in ED and GP would fit in much better with other things I value in life. I completed my Diploma of Child Health last year and I am currently in the process of applying for jobs for next year so I can complete the Diploma of O and G.

I started GP training this year, spending the first half of the year at a family practice in Menai. I am looking forward to gaining more experience in General Practice while at the Fairfield Hospital GP unit and learning about the health care needs of this population group. I haven’t worked in a GP unit before. I am also interested in learning more about the department.

GP Unit & SW Sydney Cancer Services win more funding to improve communication

The GP Unit, Cancer Services, the Ingham Institute and the SW Sydney Medicare Local have won a second $50 000 grant from the Cancer Institute of NSW to improve integration.

In our first project we interviewed 22 GPs from across the five local government areas in our local health district to find out your views on cancer services and your role in cancer care. While you were generally positive about cancer services you told us that it was sometimes hard to know where to send patients or get them in quickly. GPs believe they have an important role in caring for cancer patients and look for clear guidance from cancer services on what follow up is required. You told us that while the letters from cancer services were of good quality they often came too late.

Based on what we learnt we applied this year for a second grant to improve communication. We have just heard that we have been successful. This project will work with cancer services to improve the timeliness of the communication you receive about your patients with cancer. You may receive a questionnaire in the next month about communication from cancer services accompanying some of the letters and we hope you will complete it and fax it back.

GPU Seminar
Friday 18th October, 2013
1-2:30pm
Improving the role of General Practice in Cancer Care
Meet Tony Hecimovic, Nurse Practitioner in Acute Care

At your request Tony Hecimovic will visit your patients in their homes, assess them and provide a range of interventions that can help them avoid a visit to hospital. For instance he can assess, cannulate and prescribe IV antibiotics for people with acute urinary or respiratory infections, insert urinary catheters, replace PEG tubes and carry out trial of voids for people recovering from urinary retention.

Tony is a Nurse Practitioner having completed his Masters of Nursing in Acute Care and has been providing services like this in the Fairfield community for the last 10 years. He is keen to work with you sharing care cooperatively in the interests of your patients. The ambulatory care department of Fairfield Hospital provides clinical governance enabling rapid entry to the hospital should your patient deteriorate.

Fairfield Hospital has one of the best records in the state in avoiding unnecessary admissions thanks in part to local GPs and Tony’s work. This means hospital capacity is preserved for people who need it and our patients are protected from unnecessary admissions. If you would like Tony Hecimovic to help you care for your patients in their home call the SW Sydney triple hub” on 1800 455 511.

Helping you keep your patients well and out of hospital

Mercy will visit your respiratory patients at home at your request. She can help with assessing their COPD, training in puffer use and other devices, monitoring for exacerbations, implementing action plans, palliative situations and end of life planning. Other services include training patients in self care, family conferences and coordinating other services like home care, meal services and social worker contact. As well as helping with COPD she sees patients with bronchiectasis, pulmonary fibrosis, post lobectomy, motor neurone disease, muscular dystrophy, sleep apnoea and those needing tracheostomy care.

A special interest for Mercy is smoking cessation and she is an accredited tobacco treatment professional. Mercy can support you in helping your patients stop smoking by assessing them in their home or at a clinic session on Mondays afternoon to provide motivational interviewing and advice on medications.

Mercy has worked in the region for eight years and specialised in respiratory case management after completing a post-graduate diploma in community wellbeing. Respiratory, cardiac and trauma nursing were the major subjects. She is based at the Fairfield Hospital Ambulatory Care unit and follows patients from the hospital, visiting them in their homes. She works closely and flexibly with our patients recognising the central and supervisory role of the family doctor.

You can get Mercy to visit your respiratory patients by calling the SW Sydney “triple hub” on 1800455511. You can help by taking her call next time Mercy calls to work with you on keeping a patient well and out of hospital.

GPU Seminar
Friday 27th September 2013  1-2:30pm

Acute Abdominal pain in a young woman: Using evidence to make a diagnosis. Presented by Dr Dayna Griffin, GP Registrar
What do Doctors Mock and Lai think of the ePBRN?

Drs Mock and Lai were among the first to sign up for the ePBRN.

“We were initially a bit worried about the impact on our computer system but actually we haven’t noticed any change at all. The data is extracted without any problems. We really appreciate the reports we get. They have highlighted some areas that we need to improve in and we have made quite a few changes. They have particularly been helpful at accreditation time showing us how we are going with our records on allergies, smoking and alcohol and achieving RACGP standards.”

A Letter to the GPs from Dr Lucille Ban, Deputy Director, Emergency Department, Fairfield Hospital

Fairfield Hospital has had a great working relationship with local GPs throughout the years and we would like to thank you for all the referrals we received. As there will be changes to the services provided by the hospital, I would like to take this opportunity to highlight the services the facility currently provides.

Fairfield Hospital is a 120 bed facility. The emergency consists of 12 acute beds in addition to 2 by 2 resuscitation beds and 5 fast track recliners used for minor emergencies. We cater for a variety of presentations including:

- Major fractures requiring surgical intervention (eg. Hip fractures, tib/fib fractures, compound fractures)
- Trauma
- Gastroenterology cases such as GIT bleeds
- Ophthalmology
- ENT eg. Quinsy, foreign bodies lodged in the ear
- Vascular surgery
- Dialysis patients (both haemodialysis and peritoneal dialysis)
- Urology
- Neurosurgery
- Paediatric surgery eg. Appendicitis in children less than 6 years old
- Psychiatry

Young patients with AMIs should preferably be sent to Liverpool as they can go straight to the Cath Lab without delay. Similarly, CVA patients with onset of symptoms less than 4 hours should preferably be sent to Liverpool as they may qualify for thromboembolectomy. Fairfield does not have the facility to perform these procedures.

You can join Drs Mock and Lai in gaining a greater understanding of your practice and contributing to research in general practice by joining the electronic practice based research network.

We also have an Ambulatory Care Unit (ACU) which caters for outpatient services such as administration of intravenous antibiotics for cellulitis and young patients with pneumonia, blood transfusions, IDC insertions, wound care/dressings and trial of voids. Patients requiring the latter four services do not need to be referred directly to the emergency department, they can be referred directly to the ACU after notifying the staff.

I hope this helps to highlight what patients can be appropriately sent to us as inappropriate referrals often result in patients sitting in the emergency for lengthy periods of time waiting for a bed in another facility.

If in doubt please don’t hesitate to contact us and we will always be happy to assist.

Again many thanks for your cooperation and we look forward to working with you for many years to come.

Dr Lucille Ban