

GP Connect

Keeping GPs informed in the changing primary health landscape



25 July 2019 - In Brief

Managing child sexual abuse

**Dr Alice Johnson,
Consultant Paediatrician
and Head of Department,
Child Protection Unit, Perth
Children's Hospital**

Child sexual abuse (CSA) is common. Approximately one in three girls and one in seven boys will experience sexual abuse in their childhood¹.

GPs see these children in their daily practice and play a key role in the detection and reporting of CSA. GPs will also see adult survivors of CSA suffering the devastating and lifelong psychological sequelae of their childhood abuse. This issue was highlighted in the recent Royal Commission into Institutional Responses to Child Sexual Abuse².

"As a victim, I can tell you the memories, sense of guilt, shame and anger live with you every day. It destroys your faith in people, your will to achieve, to love, and one's ability to cope with normal everyday living." - Royal Commission private session

Western Australia's mandatory reporting laws require doctors (and certain other professional groups), to make a mandatory report if they form a reasonable belief that a child or adolescent aged under 18 years has been sexually abused³.

Six key facts about CSA:

1. Perpetrators of CSA are almost always known to the child, and are often family members (including siblings) or family friends.



2. Types of CSA range from genito-anal touching or penetration, to child pornography or child prostitution. All cases involve lack of consent from the child and power differential between the offender and the victim.
3. The most common presentation of CSA is a child's disclosure (i.e. the child will tell someone, in their own words, what has happened to them [e.g. "he put his finger in my wee wee"]). If a child makes a disclosure, believe them and refer on (the child will be interviewed by experts to determine what, if anything, has happened).
4. Genito-anal examination is normal in 85-95 percent of cases. This is either because no injury has occurred or because injuries have healed by the time of examination. Therefore, a normal examination result does not exclude CSA.
5. Acute sexual assault refers to an incident occurring within the previous 72 hours and is a medical emergency. These children should be seen as soon as possible for post-coital contraception, post-exposure antibiotics (and HIV prophylaxis) and the collection of forensic evidence.

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6. Long term psychological sequelae are common and include depression, anxiety and post-traumatic stress disorder. All children and adolescents with a history of CSA should be referred for therapy.

Managing CSA in your practice may leave you with questions

- Should I talk to this child?
- Should I examine this child?
- Where should I refer this child for a medical assessment?
- Have I formed a reasonable belief of CSA?
- Should I make a Mandatory Report?

The updated [Child Sexual Abuse](#) HealthPathways are now available and include readily accessible information on management and referral processes for CSA. If you require further advice on any child protection matter, you can contact the Child Protection Unit at Perth Children's Hospital where specialised doctors and social workers can help with any queries. Phone 6456 4300 or email PCHcpuduty@health.wa.gov.au.

References:
The prevalence of child abuse and neglect. CFCA resource sheet April 2017
Royal Commission into Institutional Responses to Child Sexual Abuse. (2017).
Final Report: Volume Commonwealth of Australia.
About mandatory reporting legislation

Hospital Liaison GP Updates

Fiona Stanley and Fremantle Hospitals

Referring for cataract surgery – who does it best?

A recent audit of GP referrals for cataract surgery at Fremantle Hospital revealed that only 38 percent contained important ocular information such as visual acuity, cataract severity, intraocular pressure, glare/contrast symptoms and other ocular diagnoses. Referrals without such information will generally be assigned as Category 3 and subject to long waiting times. If GPs are unable to provide this degree of ophthalmic detail, the inclusion of an optometrist's assessment with the referral can assist with more accurate triage. Inclusion of information about vision limited activities including any impact on occupation, driving and leisure/hobbies will also be taken into consideration, if included.

Urgent eye referrals

The Fremantle Hospital Ophthalmology clinic runs 8am to 4pm, Monday to Thursday and 8am to 12pm on Fridays.

The on-call Registrar is available between 8am and 5pm Monday to Friday via the switchboard on 9431 3333 to discuss current eye clinic patients and to provide urgent, new patient assessment or advice. If you are advised by the on-call Registrar to send a patient directly to the clinic, an urgent referral should be faxed to 9431 2726. Out of hours urgent advice from the on-call Registrar is available via the RPH switchboard on 9224 2244. The referrer will be advised where to direct the patient emergency assessment, if required.

Dr Monica Lacey

Hospital Liaison GP, FS & FHG

monica.lacey@health.wa.gov.au

Available: Monday and Thursday

Armadale Hospital

Specialist ENT surgeon now operating at Armadale Hospital

Patients accessing ear nose and throat services in the Armadale region may now have the opportunity to be treated closer to home and with a shorter wait time, by a specialist ENT surgeon operating at Armadale Hospital. If you are interested in referring to this specialist, his details are available on the [Armadale Hospital website](#). The patient referral requires a direct named referral to be sent to the specialist's rooms. The initial consultation may result in a cost to the patient, required surgery can be carried out at Armadale Hospital as a public patient at no cost to them unless they request otherwise. The relevant specialist's rooms can be contacted to provide co-payment details. You can also find information in the [Visiting Specialist](#) HealthPathway.

Early Pregnancy Assessment Clinic now open at Armadale Hospital

The Department of Obstetrics and Gynaecology at Armadale Hospital has developed a rapid access clinic for problems affecting early pregnancy such as PV bleeding, miscarriages, molar pregnancies and ectopic pregnancy. Initially there will be two clinics per week, catering for pregnancies from 13 weeks and six days. Referrals can be emailed to ArmadaleANC@health.wa.gov.au or faxed to 9391 2558.

For further information, contact GP Liaison Dr Stuart Burton on the number below.

Dr Stuart Burton

GP Liaison Armadale Kelmscott Hospital

0417 832 590

Sir Charles Gairdner Hospital

New tool supporting patient centred care for at home dementia patients

Are any of your patients living at home with dementia, supported by family or friends? When these patients require hospitalisation and find it difficult to explain their needs and preferences, this new communication tool may be helpful.

The Focus on the Person form has been developed to gather important information for the hospital staff from people with dementia and/or their support partners. Completion of the form has been trialled and hospital staff members helped to design its format. Cognitive impairment project officers working in Sir Charles Gairdner Hospital, Fiona Stanley, Hospital, Royal Perth Hospital and the WA Country Health Service have promoted an awareness of how the information provided using this form can provide appropriately tailored care.

At Sir Charles Gairdner Hospital, work funded by the WA Health Nursing and Midwifery Office is now ensuring an agreed process at the hospital for accessing and using completed Focus on the Person forms.

Patients and their families can access the form and further information on the [Alzheimer's WA](#) website.

Dr Lucy Gilkes
Hospital Liaison GP
Sir Charles Gairdner Hospital
Lucy.Gilkes@health.wa.gov.au

Clinical Updates

South Metro Health Service outpatient audit

South Metropolitan Health Service (SMHS) is soon commencing an outpatient reform project. Prior to this, it is essential to 'clean' the SMHS outpatient waitlist data to deliver an accurate picture of the number of referrals waiting for a first appointment.

As a result, from mid-July, patients may be contacted to determine if an appointment is still required.

In some cases, patients may require a reassessment by their GP to determine if a specialist referral is still needed. If a patient is unable to be contacted during this process, the referring GP will be contacted instead. The following hotlines have been set up to answer GP and patient queries regarding this process:

- Fiona Stanley and Fremantle Hospitals - (08) 6152 4510
- Rockingham Peel Group – (08) 9599 4310

Education Events



Sir Charles Gardiner Hospital GP education event: Chronic disease and shared Care

Presented by North Metropolitan Health Service and Sir Charles Gairdner and Osborne Park Health Care Group in partnership with WA Primary Health Alliance; HealthPathways WA. This event will focus on some areas of healthcare where a collaborative, shared approach between hospital clinicians and GPs will improve patient outcomes.

Date: Saturday 17 August
Time: 08:00 AM - 03:30 PM
Venue: Sir Charles Gairdner Hospital, East & West Joske Rooms, Hospital Ave, Nedlands

Accreditation:
40 Category 1 RACGP QI&CPD and 30 ACRRM PRDP points.

Registration:
Register online by Friday 9 August at:
<https://waproject.healthpathways.org.au/Events/SharedCareCPDSCGHAug2019.aspx>

Education Events



General Practice Conference & Exhibition Perth 2019

Reed Exhibitions Australia
(WA Primary Health Alliance Stand #13)
Friday 27 July - Saturday 28 July

NPS Medicinewise: Anxiety, rethinking the options

WA Primary Health Alliance
Tuesday 6 August 2019

Bariatric patient team care workshop

CTEC Training
Saturday 10 August 2019

WA Palliative Care Summit 2019

WA Cancer And Palliative Care Network
Saturday 24 August 2019

Spirometry training course - Northam

National Asthma Council Australia
Saturday 24 August 2019

Tackling ageing and life-limiting illnesses: Helping our patients make the most of life

East Metropolitan Health Service
Saturday 31 August 2019

GP Hubs - Supporting your patient in a complex system: An aged care study

East Metro Health Service and WA Primary Health Alliance; HealthPathways WA
Tuesday 17 September

Visit wapha.org.au/events
to find out more or to register.