

GP Connect

Keeping GPs informed in the changing primary health landscape



**WA Primary
Health Alliance**
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COUNTRY WA
An Australian Government Initiative

15 February 2024

Helping your patients access mental health support that's right for them

The [Initial Assessment and Referral \(IAR\) and Decision Support Tool \(DST\)](#) is an initiative of the Australian Government Department of Health and Aged Care to help GPs and mental health clinicians to determine the most appropriate level of care for individuals seeking mental health support in a primary care setting.

Working within a stepped care model, IAR-DST is a standardised, evidence-based tool that forms part of the wider Head to Health service network improving access to, and coordination of, mental health services delivered digitally, via telephone and face to face.

Head to Health services are designed to make it easier to support patients with their mental health and direct them to the most appropriate service, based on their needs.

It does not replace the central role GPs play in looking after their patients' mental wellbeing, but it does provide a streamlined entry point for those seeking mental health support and connects them with the right care as early as possible in their journey.

Support is offered at no cost, and can be accessed through the [Head to Health Assessment and Referral Phone Service](#), [Head to Health digital platform](#) or through a [Head to Health centre](#). WA Primary Health Alliance (WAPHA) has currently established centres in Armadale, Gosnells, Midland and Mirrabooka. More information on the suite of services is available in the [Head to Health GP Brochure](#).



GPs can phone the Head to Health Assessment and Referral Phone Service during a patient consultation on 1800 595 212 to discuss confidential assessment and referral options. An intake clinician will then follow up with the patient within an agreed timeframe to complete the assessment over the phone.

Where appropriate, you can also advise patients to call the service directly on 1800 595 212 to speak to a qualified mental health clinician, Monday to Friday, 8:30am to 5pm.

Following an initial assessment, patients can then be referred to and connected with the service that best suits their needs. The Head to Health team will inform the patient's GP of the service or support the patient is referred to.

All Head to Health mental health clinicians are trained in and use the IAR-DST to assist with determining the most appropriate level of care. The IAR guidance identifies the following eight domains that should be considered when determining the next steps in the referral and treatment process for a person seeking mental health support.

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Helping your patients access mental health support that's right for them (cont)

There are four primary assessment domains and four contextual domains.:

- Symptom severity and distress
- Risk of harm
- Functioning
- Impact of coexisting conditions
- Treatment and recovery history
- Social and environmental stressors
- Family and other supports
- Engagement and motivation

More information on the eight initial assessment domains is available [here](#)

The information gathered through the initial assessment domains is used to recommend one of five levels of care within a stepped care model (based on service type and intensity) and inform a referral decision. This process is based on a clinically informed algorithm and is calculated automatically using the digital Decision Support Tool (DST). The levels of care are differentiated by the amount and scope of resources that are likely to be required:

- Level 1: Self-management
- Level 2: Low intensity
- Level 3: Moderate intensity
- Level 4: High intensity
- Level 5: Acute and specialist

More information on the levels of care are available [here](#)

GPs are not required to use IAR-DST but may find it helpful. It can be used to confirm clinical judgement and can be useful in determining the type and intensity of care needed as it takes into account a wide range of factors relating to the patient's presentation, and wider context.

Visit the '[Mental Health Stepped Care and the IAR-DST](#)' HealthPathway to access the IAR-DST and for more information and guidance.



It is essential that all GP's feel confident in providing mental health referrals that suit the consumers need and preferences

WA GP completing IAR-DST training in 2023

WA Primary Health Alliance is also providing interested GPs with paid* IAR-DST training covering two workshops in one online session. Find out more and book a training session or visit the [WA Primary Health Alliance website](#). See GP Education and Events on [pg.9](#) for links to February training dates.

More information on how WAPHA is leading the establishment of a network of Head to Health services in WA as part of the Australian Government's National Mental Health and Suicide Prevention Plan is available [here](#)

*With the exception of GPs who are already being paid for their time by a Commonwealth funded service (e.g. Adult Mental Health Centre or Aboriginal Medical Centre) or they attend Workshop Two out of hours. Only GPs who attend the full training session are eligible for the remuneration payment, no pro rata payments can be made.

Hospital Liaison GP Updates

Perth Childrens Hospital

Pre-referral guidelines for Perth Children's Hospital

Perth Children's Hospital (PCH) provides over 100 pre-referral guidelines, developed specifically by the relevant PCH specialty, to outline the suggested assessment and management measures that should be followed prior to referral to PCH outpatient departments.

The guidelines can be used in conjunction with [HealthPathways WA](#), which provides further relevant assessment, management, and referral information.

Perth Children's Hospital (cont)

Many conditions, such as failure to thrive, require specific referral information to allow accurate triage – unfortunately this is not always included on referrals. The [Pre-Referral Guideline for Failure to Thrive](#) outlines very useful advice as to what information is required.

Other pre-referral guidelines include:

- bladder dysfunction
- iron deficiency and anaemia
- microcephaly and macrocephaly
- eating disorders.

To access the guidelines, see Perth Children's Hospital [Pre-referral Guidelines](#)

Other useful resources include:

- Perth Children's Hospital [Emergency Department Guidelines](#)
- [HealthPathways WA](#)

Dr Maree Creighton

Hospital Liaison GP, Perth Children's Hospital
maree.creighton@health.wa.gov.au

Available: Tuesday 9am-12pm and Wednesday 12pm-5pm

Royal Perth Hospital

Oncology inpatients return to Royal Perth Hospital

Patients with breast, colorectal, lung and metastatic prostate cancer who require specialist inpatient care can now be admitted at Royal Perth Hospital (RPH) under the governance of a medical oncologist.

The WA Department of Health has approved a restricted, Level 5 medical oncology service in the next phase of the East Metropolitan Health Service (EMHS) Cancer Services Plan. An inpatient oncology unit at RPH will provide continuity of care and support EMHS catchment patients in accessing urgent chemotherapy, tumour specific multidisciplinary case conferences, palliative care and pain management service

In addition, 24-hour access to dedicated medical oncology consultants will facilitate the management of emergency presentations and oncological emergencies.

The RPH Medical Oncology Inpatient Service will build upon a well-established Outpatient Service supported by a multidisciplinary team (MDT). Members of the MDT include: nursing, physiotherapy, social work, Aboriginal health liaison, clinical psychology, GP survivorship physician, pharmacy, dietetics, speech pathology and occupational therapy.

Referrals to the RPH Medical Oncology Service can be made via the Central Referral Service provided patients have tissue diagnosis to confirm primary site of malignant disease.

Immediate outpatient referrals (requiring review within seven days) must be discussed with a RPH medical oncologist on 9224 2244 followed by a referral sent to the RPH Referral Office via rph.outpatientreferrals@health.wa.gov.au

Dr Jacquie Garton-Smith

Hospital Liaison GP, Royal Perth Hospital
jacquie.garton-smith@health.wa.gov.au

Generally available: Monday and Thursday

Clinical Updates

WA residents now able to access interstate stimulant prescriptions

The WA Schedule 8 Prescribing Code has recently been updated to allow certain types of specialists to apply to be authorised as stimulant prescribers when providing telehealth services to residents of WA.

For more information on the change, see Medicines and Poisons Regulation Branch – [Dispensing Interstate Prescriptions](#). For information on stimulant prescribing in WA, see Medicines and Poisons Regulation Branch – [Stimulant medicines](#).

Australian and New Zealand Academy for Eating Disorders Eating Disorder Credential to include GPs

The Australian and New Zealand Academy for Eating Disorders (ANZAED) has expanded its [Eating Disorder Credential](#) to include GPs.

With the support of the Australian Government Department of Health and Aged Care, GPs will soon be able to apply for the ANZAED Eating Disorder Credential and be recognised for their qualifications, training and knowledge to deliver safe and effective eating disorder care.

People experiencing eating disorders and their loved ones will also be able to easily identify credentialed GPs, mental health professionals and dietitians through the [connect-ed](#) online directory to access timely and appropriate diagnosis and intervention within primary care.

On 27 March, [ANZAED is hosting a webinar](#) for GPs to learn more about the new credential, its criteria, and the application process. Register for the webinar [here](#).

GP Psychiatry Support Line

The GP Psychiatry Support Line is a free phone service connecting GPs directly with psychiatrists who can offer their expert advice regarding the mental health needs of your patients.

GPs may call to discuss:

- medication advice
- diagnostic clarification
- risk and safety
- management planning
- general professional counsel.

Find out more and register online www.gpsupport.org.au or call 1800 16 17 18. For emergencies please call 000.

Rabies post-exposure prophylaxis advice

Rabies is caused by exposure to saliva or neural tissue from an animal infected with rabies virus or other lyssaviruses. It is invariably fatal.

Post-exposure prophylaxis (PEP) includes prompt wound management, administration of rabies vaccine and, in some cases, human rabies immunoglobulin. Both provided at no cost from the WA Department of Health.

Humans can be exposed through animal scratches or bites, or by direct contact of mucosal surfaces with infected saliva. Common exposures are from mammals (such as dogs or monkeys) [in countries where rabies affects animals](#) (often Asia and including Bali). However, exposure can also occur from bats in any country in the world.

Evidence of Australian bat lyssavirus infection has been identified in all four species of Australian fruit bats (flying foxes) and in several species of Australian insectivorous bats.

If patients have had possible exposure to rabies or other lyssaviruses (including Australian bat lyssavirus) overseas or within Australia, health providers should contact Public Health for advice to access rabies PEP, which can be provided urgently. Providers do not need to write a script or use private stock.

PEP depends on the type of exposure, the animal source (terrestrial mammal or bat), and the patient's immune status and vaccination history. The [Australian Immunisation Handbook](#) describes detailed protocols.

You will be asked to provide details on the incident (including date, animal, country, wound), any prophylaxis already given (including overseas), vaccinations, and the patient's medical conditions (including weight, allergies and immunocompromise).

In metropolitan Perth, phone 9222 8588 (8.30am to 5.00pm, Monday to Friday, excluding public holidays).

In regional areas, contact your [local public health unit](#).

After hours, phone the on-call public health physician on 9328 0553. More information is available from [WA Health](#).

Update from the Statewide Discharge Summaries Working Group

Communication from emergency departments (ED) to primary health clinicians is known to be an area of risk to continuity of quality patient care in the community.

The WA Statewide ED Discharge Summaries Working Group has been looking at solutions to address recognised issues with the aim of streamlining, standardising and improving the quality of discharge summaries from every ED in the state.

The Working Group comprises multidisciplinary representation across Perth metropolitan Health Service Providers (HSPs) and the WA Country Health Service.

In line with current inpatient discharge summaries, the Notifications and Clinical Summaries (NACS) application developed by WA Department of Health has been identified as the ideal platform for the transmission of discharge information from ED, with the benefit of secure messaging via email. Discharge summaries are also visible on My Health Record and will be compatible with the electronic medical record as the State moves towards a fully digitised health system.

A trial of NaCS-lite discharge summaries commences in the Fiona Stanley Hospital ED at the end of this month, with a staged roll out planned across all metro HSPs over the next 12-18 months. In preparation for this trial, general practices within the South Metro Health Service catchment may be contacted to update their requisite IT systems to support secure messaging of discharge summaries for their patients.

From April 2024, the WA Statewide ED Discharge Summaries Working Group will be seeking feedback from general practice on improvements in the timeliness and quality of the NACS-lite discharge information received for your patients and will be making direct contact with general practices to facilitate this.

This serves as an important quality improvement initiative which will support the continuity of quality patient care in the community and provide a more positive experience for patients and care providers across the state

Your local HSP champion will be in touch to update requisite IT systems, monitor progress and review your feedback as this quality improvement process is implemented.



New youth mental health support from North Metro Health Service

The North Metro Health Service Youth Community Assessment and Treatment Team (YCATT) can provide short term support (for up to three months), for 16 to 24 year olds in the North Metropolitan area.

The team comprises a consultant psychiatrist, medical officer, mental health nurses, a social worker, occupational therapist, Aboriginal mental health officer and a pharmacist.

Support is patient centred and the YCATT Team can work with clients and their family/carer/significant other to provide ongoing support and links with longer term services in the community.

Access to appointments is offered flexibly, at no charge including:

- clinic based
- in the community (e.g. local cafe)
- in the patient's home environment
- telehealth.

For more information or to discuss a potential referral, please contact the triage officer on 6382 3700.

Inform updated National Guidelines for On-screen Presentation of Discharge Summaries

The Australian Commission on Safety and Quality in Health Care is seeking input from GPs and other primary health care professionals on the updated Sample Discharge Summary contained in the National Guidelines for On-screen Presentation of Discharge Summaries.

The National Guidelines provide recommendations to ensure that necessary information regarding a patient's hospital encounter, immediate next steps, and follow-up instructions are provided in a clear and unambiguous manner.

Results from the survey will inform the updated National Guidelines for On-screen Presentation of Discharge Summaries, due for release in 2024.

For more information on the project, [download the fact sheet](#) email Program Manager, Digital and Integrated Systems, Dr Racha Dabliz, at Racha.dabliz@safetyandquality.gov.au

[Take the short survey here by 20 February 2024.](#)

Feed Safe app now reflects updated guidelines

[Australian research](#) suggests 67 per cent of those who breastfeed feel they do not fully understand the risks of alcohol use while breastfeeding.

The relaunched the Feed Safe app now reflects updated National Health and Medical Research Council's Australian Guidelines to Reduce Health Risks from Drinking Alcohol.

The Guidelines advise when breastfeeding, not drinking alcohol is safest for the health of the baby, but in the event of consumption of alcohol, the app provides a tool that can be used to calculate when breastmilk is alcohol-free.

The app is free, easy to use and available in both apple and android app stores. Direct your patients to the [Every Moment Matters website](#) to find out more and download the app.

Shingles online module update

Since 1 November 2023, Shingrix® vaccine replaced Zostavax® vaccine on the National Immunisation Program (NIP) for the prevention of shingles and post-herpetic neuralgia.

Shingrix® is the only funded zoster vaccine that is available for free for individuals aged 65 years and over, Aboriginal people aged 50 years and over and immunocompromised people aged 18 years and over.

The WA Health Shingles online update module has been updated to reflect the latest Shingrix information. This free online module serves as a refresher for immunisation providers. To access the module, users will need to complete a registration form located at [Immunisation education](#).

Immunisation providers are reminded to refer to the Australian Immunisation Handbook [Zoster \(herpes zoster\) chapter](#) for more information or refer to the 'Adult Immunisation' HealthPathway.

Shield yourself from shingles campaign for Aboriginal patients

The Australian Government Department of Health and Aged Care has released a targeted campaign for Aboriginal people aged 50 years and over informing them of the free shingles vaccination.

The campaign discusses shingles, side effects of having shingles and the benefits of vaccination.

Information and resources are available to download and share through your practice channels at the [Shield yourself from shingles web page](#)



New video launched to encourage HIV testing among people from migrant backgrounds



The Western Australian Sexual Health and Blood-borne Virus Applied Research and Evaluation Network (SiREN) has launched a short-video for clinicians working with clients from migrant backgrounds. The video summarises key findings from the recent [Migrant Blood-borne Virus and Sexual Health Survey](#) led by Curtin University and encourages clinicians to normalise offers of HIV testing to people born in high prevalence countries.

Under the [National HIV Testing Policy](#), HIV testing indications include people from high prevalence countries, and people who have travelled to countries of high prevalence and engaged in behaviours including unprotected sex with people not known to be HIV-negative.

Epidemiological data published by the [Kirby Institute](#) shows that Australian HIV notification rates in 2019 were higher for people born in Northeast Asia (4.3 per 100,000), Southeast Asia (13.4 per 100,000) and Sub-Saharan Africa (9.1 per 100,000) compared to Australian-born people (2.6 per 100,000).

There is also [evidence](#) that migrants with HIV have lower rates of diagnosis, antiretroviral therapy uptake, and viral suppression compared to Australian-born people living with HIV.

The video and a range of resources to support clinicians can accessed [here](#)

For more information, contact siren@curtin.edu.au

Clear the Air campaign unmask the rotten truth behind vaping

To help protect young people aged 14-24 years from the many harms of vaping, Cancer Council WA has created a vaping prevention campaign, Clear the Air. Clear the Air's first campaign, Rotten Fruit, unveils the rotten truth about vapes that are hidden behind deceptively innocent flavours.

You can direct your patients to [CleartheAir.org.au](https://cleartheair.org.au) to reveal the truth about vapes or the Quitline for support to quit.

Contact the Quitline online, call 13 78 48 or text 'Call back' to 0482 090 634.

For campaign resources, please contact cleartheair@cancerwa.asn.au



Throughout WA Sexual Health Week, the WA AIDS Council will be celebrating the right to sexual health for all people. Each year this week provides an opportunity to think creatively about how GPs and other primary health care professionals can promote positive and respectful approaches to sexuality and sexual relationships while also creating supportive, inclusive, and safe spaces for everyone to achieve positive and enjoyable sexual health.

More information and access to patient resources to help talk about and promote sexual health are available [here](#)

GP Education and Events

Syphilis and infectious diseases of public health significance

GPs play a pivotal role in public health management and the current syphilis outbreak in WA has resulted in changes to recommendations for clinical practice. The resumption of international travel coupled with post-pandemic reductions in vaccination rates also makes the community more vulnerable to outbreaks of other diseases such as measles, mumps and pertussis.

At this WA Primary Health Alliance webinar, Public Health Physician, Metropolitan Communicable Disease Control, Dr Suzanne McEvoy and GP, Syphilis Response Team, Metropolitan Communicable Disease Control, Dr Grace Phua, will address these diseases, covering clinical presentation, up to date testing protocols, management and contact tracing.

Date: Monday 19 February 2024

Time: 6pm - 7pm

Find out more and register [here](#)

General Practice Emergency Response Team webinar

WAPHA is pleased to invite primary health care professionals to would like to be informed and involved in disaster and emergency management in WA to an informative webinar with the WAPHA General Practice Emergency Response Team.

Guest speakers include:

- Dr Tudor Codreanu – Director Disaster Preparedness and Management Directorate
Department of Health, MD MSc (Med)
MSc(Disaster Medicine) PhD (Disaster Medicine)

Date: Monday 18 March 2024

Time: 5pm - 6pm

Find out more and register [here](#)

Enhancing the primary care response to family, domestic and sexual violence



WAPHA invites GPs working in the Armadale, Gosnells and Canning area to explore opportunities to integrate a social worker into the family, domestic and sexual violence (FDSV) response at your practice.

GPs are also welcome to attend with interested members of the practice team.

Presenters include:

- Dr Anna Chaney, GP, View Street Medical, RPH Sexual Health Clinic, Homeless Healthcare
- Carolyn Donovan, Manager, South East Metro Healing Service
- Rosie Logie, WAPHA FDSV Project Activity Lead

The purpose of this session is to:

- Provide information about the [FDSV Local Link service](#) commissioned by WAPHA to support practices in your region
- Highlight the experiences of general practices already participating across Australia
- Find out how your practice can express interest in this opportunity.

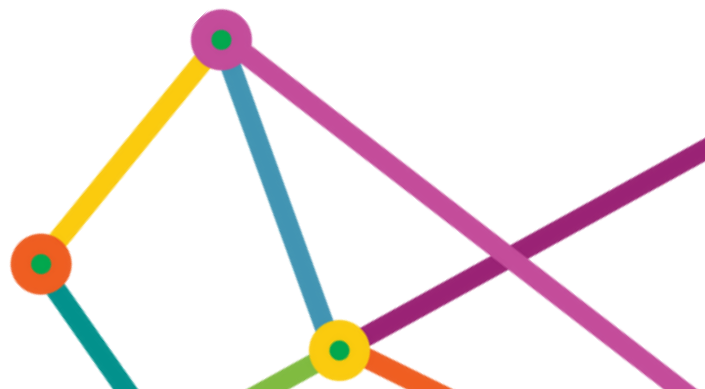
Date: Thursday 21 March 2024

Time: 7.30am to 9.00am (Breakfast provided)

Venue: Gosnells Golf Club, 95 Sandringham Promenade, Canning Vale 6155

[Register here by 10 March](#)

Email fdsv@wapha.org.au for more information.



GP Education and Events

Online IAR-DST training session for GPs –Complete two workshops in one online session



The online Initial Assessment and Referral Decision Support Tool (IAR-DST) is designed to be used alongside a comprehensive, holistic mental health assessment to gather information and guide referrals.

WAPHA is providing GPs in Western Australia with paid IAR-DST training covering Decision Support Tool Workshop One and Two in a single, two hour session.

GPs and GP registrars who attend the two workshops in the one online session will be remunerated \$300* and CPD hours are available. CPD hours and payment apply only upon successful completion of both workshops and the follow-up training outcome surveys. Find out more and register via the links below

- [Monday 19 February 2024 – 3.00pm](#)
- [Wednesday 21 February 2024 – 6.00pm](#)
- [Tuesday 27 February 27- 6.00pm](#)
- [Thursday February 29 2024 – 9.00am](#)

*With the exception of GPs who are already being paid for their time by a Commonwealth funded service (for example, Adult Mental Health Centre or Aboriginal Medical Centre) or they attend Workshop Two out of hours.

Scope of Practice Roadshow - Unleashing the Potential of our Health Workforce Roundtable

Wednesday 21 February 2024 | 9-11am OR 12pm-2pm | Perth

Following the release of the [Scope of Practice Review's of Issues Paper 1](#), the Australian Government Department of Health and Aged Care is inviting GPs to an intensive month of consultation roundtables across Australia.

Each roundtable is an opportunity for GPs and other key stakeholders to come together to comment on Issues Paper 1 and advise and shape the next steps of the [Scope of Practice Review](#), a key action stemming from the [Strengthening Medicare Taskforce Report](#).

Places are still available for the Perth sessions. Find out more and register via the waitlist function [here](#)

Wound management: What GPs need to know

Thursday 22 February | 6.15pm – 8.30pm | Bentley Tech Park | 1.5-hour RACGP CPD EA*

Silverchain is hosting a series of interactive sessions to share knowledge and support integrated care across hospital, home and community. Learn essential strategies to best manage simple to complex wounds, what community services are available, and the best referral pathways. Includes buffet dinner, and refreshments. Find out more and register [here](#)

*RACGP educational activity

WA Rural Health West Conference 2024

Saturday 16- Sunday 17 March 2024 | Hyatt Regency Perth

The WA Rural Health Conference 2024 brings together all rural health professionals under one roof to promote connection between these different perspectives and share insights and innovations to strengthen and enhance health care in rural WA. Find out more and register [here](#)

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