

GP Connect

Keeping GPs informed in the changing primary health landscape



11 March 2021

Electronic prescribing a new era for general practice

By Mayli Foong BPharm, MPS, AACPA, MBA
GP Pharmacist

Electronic Prescribing, or ePrescribing is the electronic transfer of a prescription for dispensing. This process replaces the use of the paper prescription giving flexibility to the patient and prescriber. Just like a paper prescription, electronic scripts are a legal form of prescription.

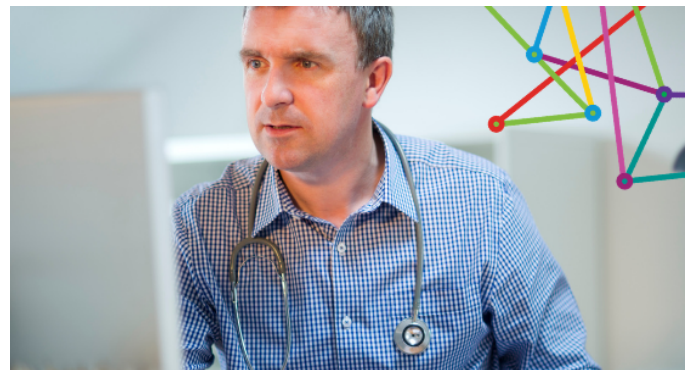
The introduction of electronic prescribing is great news for medicine, you and your patients. It improves patient safety and provides a better experience for you and your patients. As with any change to a large system it takes time to implement, however if our COVID-19 response has taught us anything we are able to change the way we work more quickly than we had previously imagined. We are confident that all systems are in place. Here's what you need to know;

What is a TokenScript?

Your patient receives their prescription as a token (QR code) via SMS, rather than a paper script. Your patient presents their token at their preferred pharmacy where the script is scanned and dispensed as normal. Repeats are returned to the patient via SMS.

How does TokenScript work?

A script link is sent electronically to the patient or carer. Your patient can choose to receive this link on their smartphone via SMS or email. Opening the link will reveal the QR code held in the 'cloud' by prescription exchange (PE) until it is dispensed by the pharmacy. QR codes are able to be viewed in compatible apps such as MedAdvisor®.



The pharmacy scans the QR code to download the script information for dispensing. Repeats are returned to the patient via SMS. Once the prescription has been dispensed, the QR code is inactivated. Token scripts are not able to be converted to paper based prescriptions and repeats.

Can I use this for all my patients?

Your patient must have an IHI number registered in your practice software. Phones need to be able to receive an SMS, have internet access and a web browser. Each script will have a separate token, so this may not be suitable for patients on multiple medicines or blister packs. Paper tokens can be printed by the practice or pharmacy if this is your patient's preferred method of handling their QR codes. Some pharmacies are not yet equipped to dispense electronic prescriptions, so it may depend on your patient's preferred pharmacy.

What if my patient deletes the SMS?

For original prescriptions, patients need to contact their practice to resend the prescription via SMS. For repeat prescriptions, patients need to contact their dispensing pharmacy to resend the repeat via SMS.

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Electronic prescribing (cont'd)

Can I cancel a prescription?

TokenScripts can be cancelled by the prescriber on their practice software. This will remove the script/repeats from the prescription exchange (PE) in real time. Patients will receive a message when they open the link that their script has been cancelled.

Are pharmacies in my area accepting TokenScripts?

Most pharmacies have now updated their software to dispense token prescriptions. Check with your local pharmacies if their software is compliant. If your practice has a GP Pharmacist, they will be able to liaise with pharmacies in your local area and give you a list of pharmacies ready for token script dispensing.

Is my software compatible?

WA Health has a [list of compatible software](#) products available.

Things to remember:

- Patients must have a smart phone with internet access for this service
- GP and Pharmacies must both be using compliant software
- Always confirm your patient's mobile number prior to sending the SMS
- Always confirm the SMS is received before completing the consult.

For more information, see the recently published 'Electronic Prescribing' HealthPathway.

Active Script List (ASL) Coming soon

Active Script List, next generation of electronic prescriptions, is expected to be rolled out in 2021. Patients will 'opt in' to the ASL model at a pharmacy before a doctor can send a script via ASL. It is proposed that patients will be able to access e-prescriptions without a token. This will be useful for patients on multiple medicines or blister packs. It is expected that the patient will be able to control access to who can view the list.

GP Hospital Liaison Updates

Royal Perth Hospital - Are you receiving your GP Notifications of patient admission, discharge or death?

If not, please re-register for GP Notify by advising, or asking your practice manager to phone or fax the RPH GP Notify Coordinator on the new contact numbers.

Phone 9224 3673 or fax 9224 2348 or email RPH.GPN.Coordinator@health.wa.gov.au, including:

1. GP name(s) and provider numbers.
2. Practice name and address, phone, fax and the generic email for your practice - The Patient Administration System used across WA Health can only register one email address for GP Notify per practice. The email address for your practice is therefore preferred over individual email addresses.
3. Whether you'd prefer to receive GP Notify by fax or email (secure electronic messaging is not available for GP Notify, although it is used to send inpatient discharge summaries - the GP Notify Coordinator can arrange this if you include your practice's EDI code).

What is GP Notify?

GP Notify is an automated notification system that informs the patient's nominated GP (where registered) about patient admission, discharge and death at RPH by email or fax.

I used to get GP Notify from RPH-why did they stop?

GP Notify needed to be reset in 2018 due to technical issues, and GP registrations were lost. A number of GPs and practices responded to notices that they needed to re-register, but it appears a large number missed the communication.

I asked to get GP Notify by email, but they are being faxed. Why and can I change this?

A technical issue led to all new GP Notify registrations over an extended period being defaulted to fax instead of email. If you would like GP Notifications to be sent to your practice by email, please advise the GP Notify Coordinator as above (noting that only one email address per practice can be used).

Dr Jacquie Garton-Smith
Hospital Liaison GP, Royal Perth Hospital
jacquie.garton-smith@health.wa.gov.au
Generally available: Monday and Thursday

Let's not forget the Metro Syphilis Outbreak

Rockingham and Peel are considered metropolitan syphilis hotspots and as you may be aware, a syphilis outbreak has been declared in metropolitan Perth. More information is available [here](#).

Please also be aware of the risk of congenital syphilis and the guidelines for antenatal screening (see the [Silver Book](#) and the [KEMH Guidelines](#)).

The Metropolitan Communicable Disease Control (MCDC) can provide support and advice, including contact tracing. Phone 08 9222 8588.

MCDC can also provide education for your practice. Email ContactMCDCC@health.wa.gov.au if you are interested in having a public health physician or nurse visit your practice.

The South Terrace Sexual Health Clinic can also provide clinical advice on case management on 9431 2149.

All cases of syphilis should be notified to the Department of Health.

See also the "[Syphilis](#)" HealthPathway

Did you know?

There is a [contact list](#) of the Rockingham Peel Group clinics and specialists available on the website to enable GPs to easily find a direct clinical contact.

Dr Simone Stubbs
Hospital Liaison GP, Rockingham Peel Group SMHS
simone.stubbs@health.wa.gov.au

Low-risk penicillin allergy delabelling within a GP setting

A pilot project with Fiona Stanley Hospital Immunology

Did you know?

- More than 90 percent of patients with a penicillin allergy label do not have a true penicillin allergy.
- Unnecessary avoidance of penicillins leads to poorer clinical outcomes.
- Patients with a low-risk (e.g. benign, distant rash) reaction to penicillin are best assessed with an oral amoxicillin challenge, without skin testing.
- Oral challenge in low-risk patients has been shown to be safe. The risks are comparable to iron transfusion, immunotherapy, and vaccinations.
- The oral challenge process takes two - three hours.

The Immunology Department at Fiona Stanley Hospital (FSH) is looking to work with a small number of practices within the Perth metropolitan area who will be interested in performing direct oral amoxicillin challenges within their practices from February 2021. The FSH Immunology Department will provide the necessary training and support for participation in the pilot project.

To register your interest or to find out more, please email Xiang on zhi.leang@health.wa.gov.au

FSH GP contact list

Some departments have recently made changes to their preferred contact details for GPs seeking clinical advice and/or arranging early outpatient review as well as routine departmental enquiries. Download the [contact list](#) on the Fiona Stanley Hospital Website

A reminder that NaCS discharge summaries, most Outpatient letters, pathology and radiology results may now be accessed via My Health Record for most patients and there may not be the need to formally request such information from the hospital.

Dr Monica Lacey
Hospital Liaison GP, FS & FHG
monica.lacey@health.wa.gov.au
Available: Monday and Thursday

South Metropolitan Health Service - Outpatient Referral Audit

The South Metropolitan Health Service will soon launch an audit for referrals of patients who were last seen in a specialist outpatient clinic more than two years ago and have not required further appointments.

It is likely that their care was completed and that the referral remained open due to an administrative error.

The purpose of the audit is to allow safe discharge of referrals where a patient does not require follow up. As part of this process GPs may receive a letter notifying the referral is to be discharged.

Dr Monica Lacey
Hospital Liaison GP, FS & FHG
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Available: Monday and Thursday

Clinical Updates

Change to Cervical Screening Guidelines on HealthPathways

From 1 February 2021, the National Cervical Screening Program's (NCSP) Clinical Guidelines for the Management of Oncogenic HPV (not 16/18) from clinician-collected samples have changed.

There are no changes to the management of results from self-collected samples. See the "[Cervical Screening](#)" HealthPathway.

My Asthma guide update

The National Asthma Council of Australia has released an update to the [My Asthma Guide](#). Health professionals will know of this resource as the National Asthma Council of Australia's popular patient handbook designed to help people understand and manage their asthma. It includes information and advice based on the best evidence and provides practical strategies to help people with asthma and their families.

COVID-19 Vaccination Information Pathway

HealthPathways WA has published the new "[COVID-19 Vaccination Information](#)" Pathway. This pathway compiles all of the relevant clinical information from both the State and Federal Governments that is currently available for GPs regarding the vaccination rollout, including:

- Links to education and training
- Vaccine specific information
- Guidance on vaccination in specific populations
- Consent forms
- Accessing AIR, practice and patient preparation information
- Comprehensive list of patient resources
- Links to Practice Assist rollout information and FAQs

GPs are strongly encouraged to familiarise themselves with the content of this HealthPathway and to refer to it in the first instance for any queries they have about COVID-19 vaccination. There is also a comprehensive list of resources that GPs can provide for patients who may have questions about COVID-19 vaccination.

This pathway is subject to continuing review by WAPHA's GP Clinical Editors, and GPs should be assured that the information contained is as comprehensive, accurate and up-to-date as possible.

Stay up to date with COVID-19 Updates

To support WA GPs, general practice staff and other primary health care providers to respond to the COVID-19 pandemic, the [Practice Assist COVID-19 information page](#) provides access to the latest information and resources, including updates relating to the national vaccine rollout strategy.

WA GPs can also stay informed by [subscribing](#) to WA Primary Health Alliance COVID-19 GP Update and COVID-19 Immunisation Updates.

Launch of new WA State-wide Maternity Shared Care Guidelines

The State-wide Obstetric Support Unit in partnership with WA Primary Health Alliance (WAPHA) and the King Edward Memorial Hospital Liaison GP have developed new WA [State-wide Maternity Shared Care Guidelines](#). This project followed requests from clinicians across the state and workshops held in 2018.

We are now pleased to announce that following a two year gestation, the Guidelines have arrived. The Guidelines will provide direction for GPs, midwives and other maternity health care providers working within the Western Australian public health system when caring for women who make the informed choice to have their antenatal care provided within a shared care arrangement.

Shared care represents an opportunity to practice collaborative holistic maternity care by combining the varied skills of Midwife, General Practitioner and Obstetrician and Health Service Providers to the benefit of the community and promotes mutual understanding between colleagues.

The Guidelines were developed using evidence-based, contemporary professional practice standards and outline the minimum clinical care required by maternity shared care providers. These Guidelines are underpinned by the [National Clinical Practice Guidelines for Pregnancy Care \(2018\)](#) and should be used in conjunction with existing Health Service Provider Guidelines. They are the default guideline in the absence of existing current guidelines.

Shared maternity care providers can access up to date information and resources using the embedded links within the Guidelines. The layout of the Guidelines provides a systematic process for shared maternity care providers to deliver quality care through assessment, screening, education and referral. Included are specific information regarding Family and Domestic Violence, Syphilis and First Trimester Screening.

A Quick Reference Guide provides a summary of care for each trimester and the postnatal period. A standardised referral form is also included and where practicable shared maternity care providers are encouraged to use this.

Any queries regarding the Guidelines should be directed to SOSUMidwiferyDirector@health.wa.gov.au

Statewide Telehealth Service Desk arrangements and contact details have changed.

In response to growth in telehealth services and to ensure continued quality of support, the Statewide Telehealth Service Desk has merged with WA Country Health Service ICT Help Desk. The new number to call is 1800 794 748.

Urgent incidents and requests will also have the option of being transferred to a 'PRIORITY' line. Calls that are not urgent will be returned to the main queue and serviced by the next available operator.

Telehealth Service Desk email address remains the same at Telehealth.Servicedesk@health.wa.gov.au

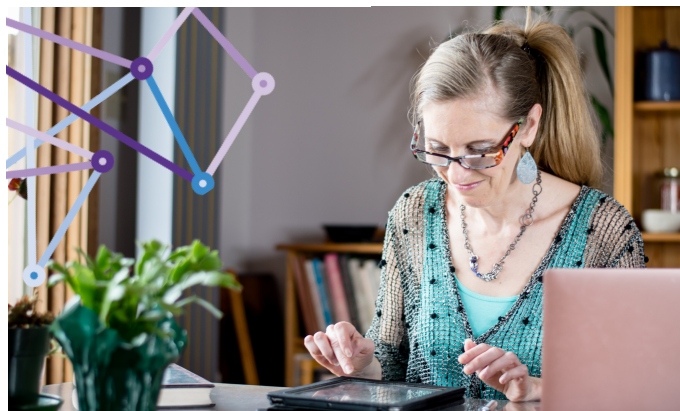
You can also access the [HealthPoint Self-service Portal](#)

National Cancer Screening Register (NCSR)

The National Cancer Screening Register (NCSR) supports Australia's National Bowel Cancer Screening Program and National Cervical Screening Program by inviting, reminding and following up participants for screening. It also helps healthcare providers make decisions about their patients' health care.

The NCSR has introduced an online [Healthcare Provider Portal](#) providing a new way to interact with the National Register. It will also soon be releasing an Integration with Clinical Software. The new functionality will support better patient care by allowing healthcare providers and pathologists to access and submit patient's bowel and cervical screening program-related data at any time of the day.

For more information visit <https://ncsr.gov.au/content/ncsr/en/healthcare-providers.html> or call the Contact Centre on 1800 627 701



Mobile-Friendly HealthPathways Login Update

From Wednesday 24 February, some users of mobile-friendly HealthPathways will be prompted to log in more often. This change is part of a project to improve the accuracy of the metrics we use to help monitor the effectiveness of HealthPathways. This should only affect a small number of HealthPathways users overall and won't affect you at all if you've previously saved your password at the login point. The username and password have not changed.

To avoid being regularly prompted to log in again, you can save the username and password by:

- Accepting the "Remember me" selection within the login screen
- Saving your password when prompted by your internet browser.

Note: If you regularly clear your browsing history, you'll then be prompted each time to log in again with your username and password.

To request logon details for HealthPathways visit: <https://waproject.healthpathways.org.au/Home.aspx> and complete the 'Request a login' form. To provide feedback on the criteria, email healthpathways@wapha.org.au or press the send feedback button within the site.

Guidelines for treating patients with a work-related mental health condition

Work-related mental health conditions are the second most common cause of workers' compensation. However, these conditions are typically challenging to diagnose and treat. 5-10 percent of people will suffer from posttraumatic stress disorder (PTSD) at some point in their lives.

Most injured workers will seek care from their GP and there are two resources that can help GPs diagnose, manage and treat a patient who is suffering from a work-related mental health condition:

[Clinical guideline for the diagnosis and management of work-related mental health conditions in general practice](#) - Provides GPs with the best available evidence to guide their diagnosis and management of patients with work-related mental health conditions.

The guideline was approved by the National Health and Medical Research Council (NHMRC) in late 2018. It is endorsed by the Royal Australian College of General Practitioners (RACGP) and the Australian College of Rural and Remote Medicine (ACRRM).

[Australian Guidelines for the Treatment of Acute Stress Disorder, Posttraumatic Stress Disorder and Complex PTSD](#) - The Guidelines aim to support high quality treatment of people with PTSD by providing a framework of best practice around which to structure treatment. Approved by the National Health and Medical Research Council (NHMRC), the Guidelines were developed by Phoenix Australia (formerly Australian Centre for Posttraumatic Mental Health) and a team of Australia's leading trauma experts, in collaboration with psychiatrists, psychologists, general practitioners and other health professionals.

Referral criteria for Adult Community Mental Health Services

Referral criteria for public Adult Community Mental Health Services in the Perth metropolitan region have recently been published on HealthPathways WA.

The criteria detail referral and exclusion criteria for both acute and non-acute referrals to these services. The criteria detail the scope and limitations of public Adult Community Mental Health Services in the Perth Metropolitan region and it is hoped that this will assist General Practitioners in understanding which referrals are appropriate for these services.

The criteria were developed by a HealthPathways workgroup in consultation with GPs as well as representatives from Adult Community Mental Health Services, North Metropolitan Health Service, East Metropolitan Health Service, South Metropolitan Health Service and the Mental Health Commission.

The working group brought together relevant stakeholders to seek feedback and allow for discussion and finalisation of the proposed criteria. Consensus was reached by the 26 attendees at the working group and the criteria were then signed off by the relevant area health services.

Many thanks to all who provided feedback on the criteria and to those who attended the working group in September last year.

To access the criteria see the "[Acute Mental Health Assessment](#)" and "[Non-Acute Mental Health Assessment](#)" HealthPathways and select one of the Perth Metro regions.

Emerging Minds - GP Framework for Child Mental Health Assessment

Emerging Minds have launched A GP Framework for Child Mental Health Assessment (5-12 years). This new accredited course has been developed to support GPs in undertaking child mental health assessments and the management of ongoing care.

[Download the framework](#)

Phoenix Australia Disaster Mental Health Hub

Disasters can be very stressful for those directly impacted, as well as health professionals and those involved in disaster management efforts.

Phoenix Australia in collaboration with Primary Health Networks and other key partners, has launched the [Disaster Mental Health Hub](#) to help GPs and other health practitioners to support individuals, families and communities during the disaster response.

It includes access to free disaster mental health information, sheets and videos, online training programs and health professional support resources such as [Tips for Supporting Medical Centre Staff](#).

The Royal Children's Hospital launches Paediatric Handbook

As part of the hospital's 150th Anniversary, the Royal Children's Hospital (RCH) is proud to launch the 10th edition of the RCH Paediatric Handbook.

The Handbook presents collective expertise of the hospital's world leading clinical staff, including practical advice on the assessment and management of common and serious child health conditions.

An essential practical management guide to the health problems of newborn infants, children and adolescents, the Paediatric Handbook is a valuable reference for all medical students, hospital residents and community practitioners.

The Paediatric Handbook 10th edition can be purchased from December 1, 2020 via www.shop.rch.org.au and www.wiley.com

Increases to allied health services for DVA clients in RACFs

The provision of allied health services, including mental health services to DVA clients residing in aged care facilities, has been increased until 30 June-2022, in response to the Royal Commission into Aged Care's recommendations on COVID-19. 23 December 2020.

Aged care residents, including DVA clients, can now access up to 20 mental health services per year from GPs or allied mental health providers. Residents will also be able to access up to 10 allied health services per calendar year under a chronic disease management plan.

For high care residents, services in excess of these limits will be considered under [DVA's prior approval arrangements](#), as is currently the case. Low care residents may continue to access allied health services as they currently do, under DVA card arrangements.

When claiming the new items for DVA clients, the invoice to Services Australia must be submitted through the DVA Medical Online channel using practice management software. Or, if you use [DVA Webclaim](#), by selecting 'General Medical Service' from the Service Type menu on the 'Fill In Claims Details' screen.

These items cannot be claimed through DVA Allied Health Online, nor using the 'Allied Health Service' type through DVA Webclaim.

You can familiarise yourself with the new arrangements by downloading the [DVA Fee Schedules](#) and [Notes for allied health providers](#) that have been updated to include the claiming requirements.

For more information visit the [MBS Online website](#) or email askMBS@health.gov.au



Guidelines for provision of psychological support to people affected by disasters

Many people have been affected by disasters across parts of the country, ranging from those directly affected, to those with contact only through what they have seen in the media. The Australian Psychological Society has published this information sheet providing summary guidelines on the three levels of psychological support that can be offered to people affected by disasters. Access the summary guidelines [here](#).

New Heart Foundation resources for Aboriginal and Torres Strait Islander people

The Heart Foundation has recently developed some new resources for Aboriginal and Torres Strait Islander people in the Pilbara:

- A new 90 second, animated [heart check video](#)
- A refreshed [heart attack action plan](#)

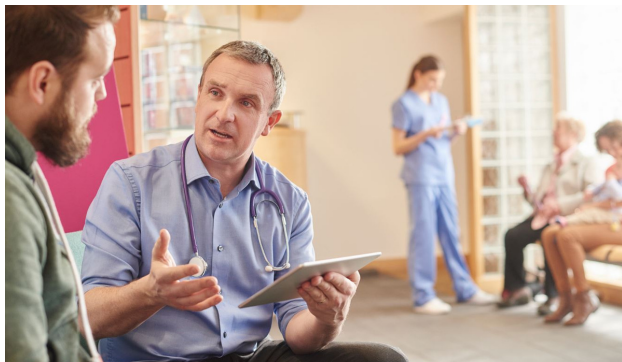
The video is also available in a video brochure for use by WA health professionals with Aboriginal and Torres Strait Islander clients in primary care settings (such as remote clinics where internet access is an issue). To order a FREE video brochure email wa@heartfoundation.org.au

Active Ingredient Prescribing Iminent

From 1 February 2021 most prescriptions for supply under the PBS and the RPBS must describe the medicine by active ingredient name to be eligible for subsidy.

While current processes largely won't change, GPs should continue talking with patients about their medicine's active ingredient names where possible.

Visit the [Australian Commission on Safety and Quality in Health Care website](#)



Take Home Naloxone Pilot Extended to 30 June 2021

The Australian Government has advised that the Take Home Naloxone Pilot will run for an additional four months to 30 June 2021.

Naloxone will continue to be available for free and without a prescription to people who may experience, or witness an opioid overdose in NSW, SA and WA.

Providers currently participating in the pilot program include community pharmacies, medical practitioners, alcohol and other drug treatment services, and homelessness/outreach services. A list of participating WA providers is available from the [WA Mental Health Commission](#).

Resources and materials can be found at: [Department of Health take-home-naloxone-pilot](#).

Information regarding registering and participating as a provider in the pilot can be found at: [naloxone-pilot registration and participation](#).

The WA Mental Health Commission provides training on recognising and responding to opioid overdose. Contact naloxone@mhc.wa.gov.au or phone (08) 6553 0560 during business hours.

For upcoming GP education events, visit wapha.org.au/event

Free Hepatitis B vaccination for non-immune Aboriginal adults

Aboriginal people have a higher risk of acquiring new hepatitis B virus infection than non-Aboriginal people. Although hepatitis B vaccination is recommended for all non-immune Aboriginal adults, it is not funded through the National Immunisation Program (NIP).

WA Health has commenced a program to provide this vaccine for free in WA for people aged ≥ 20 years of age. Hepatitis B vaccines are already provided free through the NIP for people aged < 20 years of age. All non-immune Aboriginal adults should receive a three-dose schedule of hepatitis B vaccine. Prior to administering the hepatitis B vaccine, providers should order a blood test to determine the hepatitis B status of an individual (the request on the pathology form should be for "chronic hepatitis B").

Ordering the vaccine:

- Place an order through the 'ADOLESCENT AND ADULT' tab on the WA Health vaccine ordering system and select vaccine product 'Engerix B – 1.0mL – Hep B (Aboriginal) – State'.
- Initial approval is for Dose 1, then providers should place orders for subsequent doses.
- Refer to the Australian Immunisation Handbook - [Hepatitis B section for adult Engerix-B dosing guidance](#).

The WA Immunisation Schedule (effective 01/12/2020) has been updated to reflect this change and clarifications regarding the pneumococcal vaccinations. It is available to download.

See also the "[Immunisation – Adult](#)" HealthPathway

