



WA GP ADVISORY PANEL

MEETING COMMUNIQUE

TUESDAY 29 AUGUST 2023



RACGP
Royal Australian College
of General Practitioners



**WA Primary
Health Alliance**
Better health, together

phn
PERTH NORTH, PERTH SOUTH,
COUNTRY WA
An Australian Government Initiative

TOPIC ONE

External Communications Review

RACGP WA, Rural Health West and WA Primary Health Alliance are keen to ensure we are communicating effectively and efficiently with our GPs and are looking to review external communications to:

- Assess the effectiveness of our existing channels
- Identify any gaps/opportunities
- Devise an optimal mix of channels and processes.

Members were asked to provide feedback on the usefulness of existing communication channels, how they maintain awareness of information from the lead agencies, the key information they need/where would they go to find it and any other suggestions to improve communication with GPs and general practice staff.

Key discussion points from Panel members included:

General consensus from conversations with colleagues seems to be that email is the preferred and most useful method for communication while webinars are appropriate for big issues which may require more complex discussion or in-depth information



Short, succinct emails containing relevant, need-to-know information on guideline changes etc. with links (that don't require a login to access) to more information are preferred.

The central question and focus for all communications should be “How does this communication help me as a GP do my job?”



The WhatsApp discussion group facilitated by RACGP WA was noted as being useful, particularly for timely peer-to-peer communication or problem solving.



“ In some practices the practice manager is the gatekeeper/key conduit of information and is critical to ensuring communications are circulated to the GPs within the practice.

COMMENTS FROM CHAT

Key publications

- Practice Assist is useful for the general practice team while the RACGP email newsletter is useful for GPs.
- I tend to read the WA RACGP one as it comes out less frequently and is a good local summary
- RACGP news emails and WAPHA [publications are useful]. The "papers" (Med Rep, Ausdoc, etc.) are sometimes useful with their weekly emails
- RHW sends a monthly email update and engages on multiple levels on multiple fronts with the health practitioners it serves. They are our first port of call for locums, outreach services, difficult colleagues, WACHS disputes, major disasters affecting our towns as well as rurally relevant educational activities.

Suggestions for improvement

- If WAPHA - Rural Health West - RACGP can share important information with each other and then via their newsletters [that will] ensure a greater reach to GPs
- [A weekly] email containing essential reading is something I will look out for
- A variety of means of communication is vital, as evidenced by just this panel alone. Perhaps we should consider ways of making less frequent but relevant summaries of information condensed via differing modalities?

OTHER COMMENTS

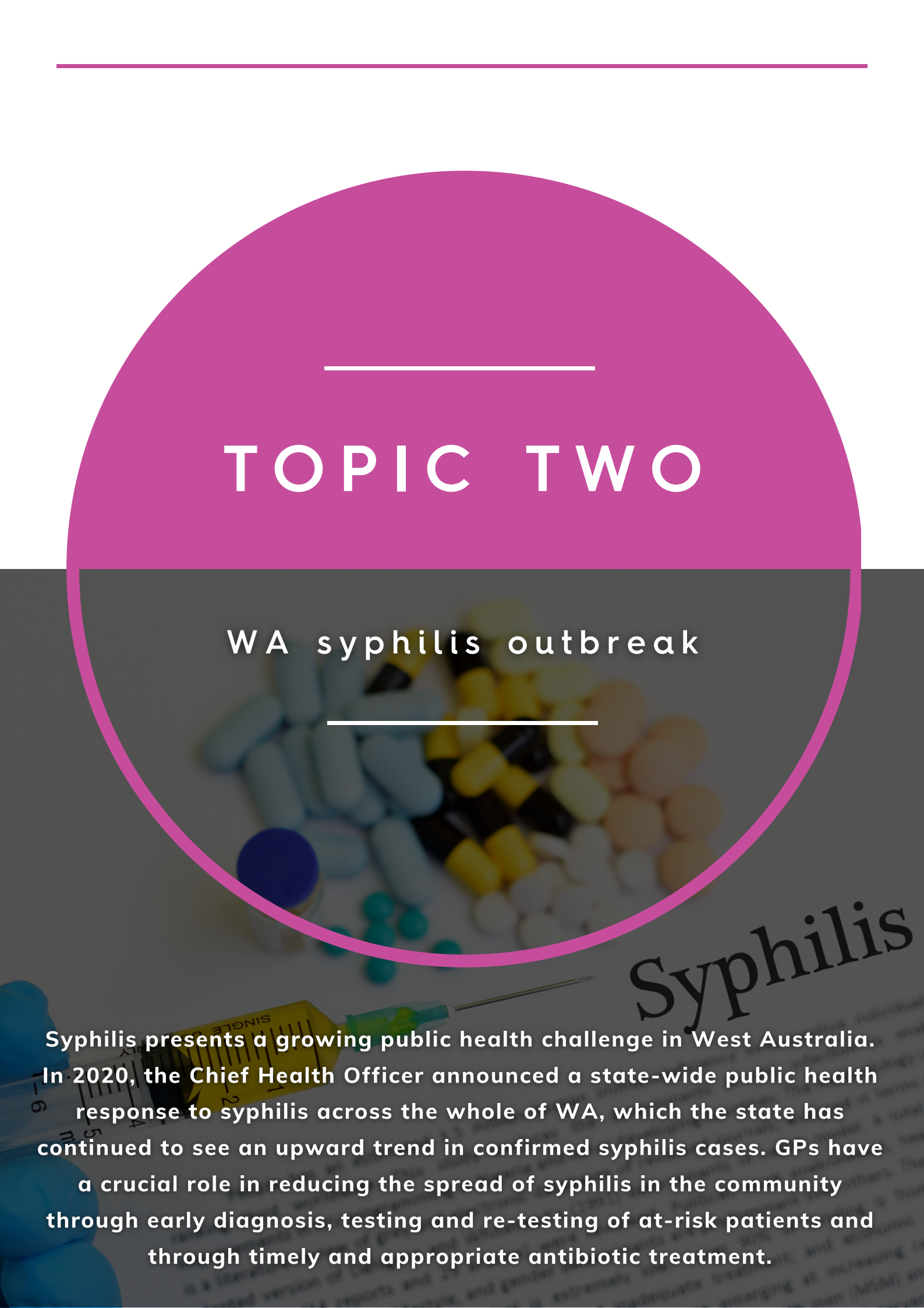
"Podcasts (such as the The Good GP) are good for non-time sensitive info as I certainly tend to listen on longer drives/when exercising and don't necessarily listen to them in order or straight after they are released."

"Well informed GPs speaking on issues is valuable. I have listened to interviews with Minister Butler but didn't really find it very useful."

"There has been a lot of discussion/commentary about the lack of diversity/representation on panel discussions re: GP issues. For example, it's still not common to have a balance of gender represented."

TOPIC TWO

WA syphilis outbreak



Syphilis presents a growing public health challenge in West Australia. In 2020, the Chief Health Officer announced a state-wide public health response to syphilis across the whole of WA, which the state has continued to see an upward trend in confirmed syphilis cases. GPs have a crucial role in reducing the spread of syphilis in the community through early diagnosis, testing and re-testing of at-risk patients and through timely and appropriate antibiotic treatment.

To support component one of WA's Syphilis Action Plan (Prevention, education, and community engagement), the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) has created a free to use [decision making tool](#).


WAPHA is working with the WA Department of Health to further raise awareness of it as part of its campaign encouraging GPs to test for syphilis, discuss it with patients and revisit syphilis treatment protocols.

To inform this campaign, members were asked to provide feedback on **whether the need to test for and treat syphilis was on their radar; resources they would find valuable; their experience of the decision making tool and how the lead agencies could help promote the importance of syphilis testing discussions for GPs to have with their patients.**

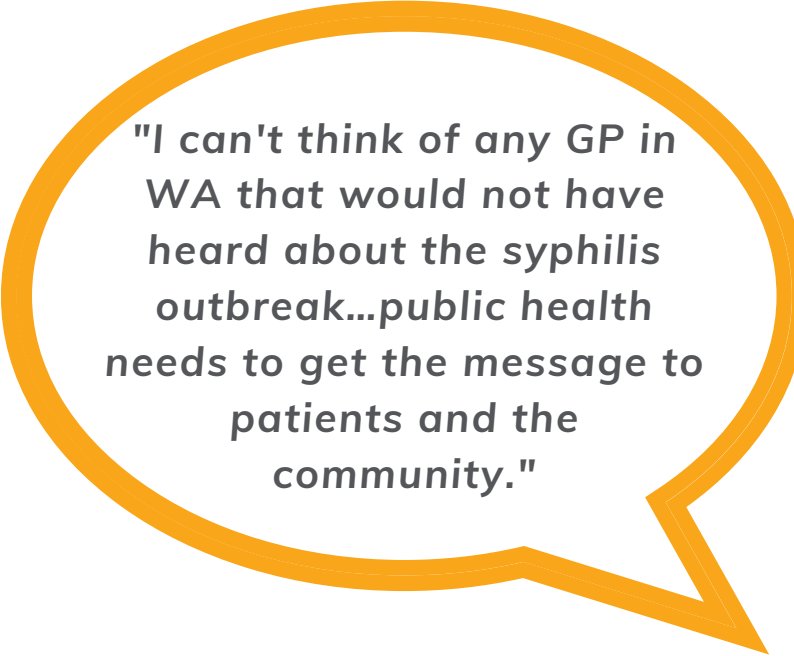
Comments from members included:

- Syphilis testing and follow-up treatment is definitely on the radar across the board, particularly in regions such as Meekatharra and the Goldfields with syphilis being part of standard STI screening (now including option to blood test) and on the spot treatment available via ZAP packs.
- The importance of syphilis testing in antenatal consults was noted as a knowledge gap among registrars which needs to be addressed and warrants further promotion.
- It would be useful if information on whether an infection was new or if the patient had previously been treated for infection was included on the lab result with a positive test across WA. It was noted that there is an informal register in the Kimberley managed by public health nurses which notes who has been treated.
- Regarding experiences of the decision-making tool, it was noted as being slow and not very useable by GPs or with patients however the 2-page PDF is a great summary, particular for registrars.
- Specific organisations and people to refer to would be a useful update for RACGP guidelines.
- A potential suggestion to improve knowledge of screening and increase testing more broadly was via targeted outreach via Medical Defence Organisations or by looking at auditing data on screening and advising and communicating to practices who may be under the benchmark figure.

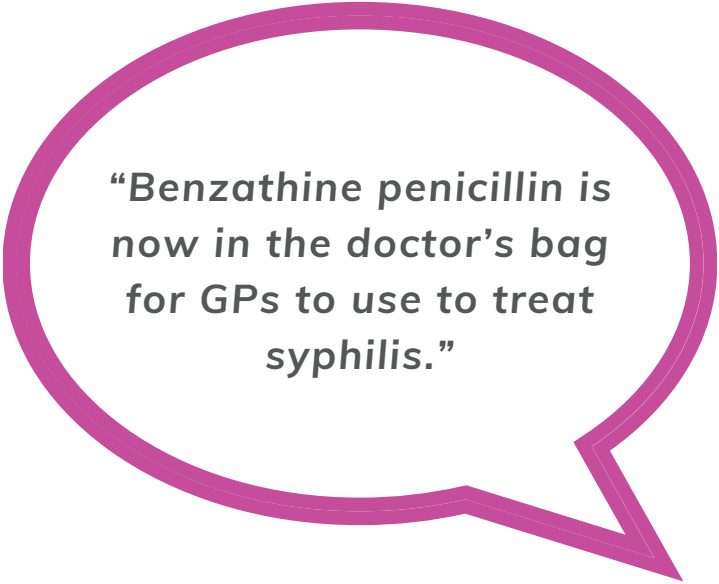
QUOTES FROM CHAT



"Australian Atlas of Healthcare variation is an interesting read for scripts and various referrals- its regional only, not individual, but can certainly see variation and ask the question if the variation is reasonable within a region."



"I can't think of any GP in WA that would not have heard about the syphilis outbreak...public health needs to get the message to patients and the community."



"Benzathine penicillin is now in the doctor's bag for GPs to use to treat syphilis."

Earlier this year members received a summary of the 12 Month Review of the WA GP Advisory Panel survey conducted late last year. Key actions arising from member feedback that WAPHA, Rural Health West and RACGP will be prioritising this year include:

- providing members opportunity to opt out of ongoing membership (complete)
- reviewing and recirculating the panel terms of reference to members for input and advice
- developing and implementing a communications plan to increase the visibility of the panel and its influence to external stakeholders
- inviting members to submit suggestions for future agenda items
- summarising resources and links shared in the chat where applicable
- continuing to give priority RSVP to members who have not engaged in previous panel sessions
- encouraging written comments out of session
- adding a written update on actions or progress from previous topics as a standing item ([summary of previous actions](#))
- adding a section in communiques with information on how the discussion will be shared and, when possible, any immediate impact it has had on actions or decisions made by the lead agencies ([next steps](#))

Targeted Suicide Prevention Initiatives Special Interest Panels Update

WAPHA has adopted a systems-based approach that identifies how early intervention of mild to moderate depression may prevent suicidal behaviour. This approach is primarily a GP-centric depression management program.

Members joined two optional special interest Panels in July (one for GPs practicing in the metropolitan region and one for GPs practicing in regional, rural or remote areas of WA) to further inform the WAPHA Targeted Regional Initiatives for Suicide Prevention Activities

Members provided feedback to inform activities WAPHA will commission to enhance the care GPs provide to people with mild to moderate depression and provided advice on how these activities could be delivered to GPs.

MyMedicare voluntary patient registration Special Interest Panel

To support the roll-out of MyMedicare, WAPHA recently held several engagements with GPs and their practice teams to provide contemporary information and context on MyMedicare and to seek input on the barriers and challenges in implementing MyMedicare in WA general practices.

Members attended two special interest Panel sessions, with context on MyMedicare provided by Dr Walid Jammal, a GP from NSW who has been closely working with general practitioners and practice managers, the Minister for Health and his advisors on the establishment of the MyMedicare policy.

These sessions highlighted that there are mixed views, and different interpretations of MyMedicare and voluntary patient registration, amongst WA GPs, with a number of concerns and requests for further support from WAPHA raised. GPs noted that they are committed to developing multidisciplinary models of care within their practices with appropriate funding models and integration with existing practice clinical and business processes.

The lead agencies will ensure that the views of WA GPs are communicated to the Australian Government as the MyMedicare roll out continues and that our support for GPs and their practice teams responds to their identified needs and priorities.

Next steps

This communique will be shared with key staff across the three lead agencies, in particular the lead agencies Communications teams to inform future communications and WAPHA's Digital Health Services Team Leader, Simon Benge, to inform resource development and activities around promoting the syphilis decision making tool and encouraging patient testing. Feedback on the syphilis topic will also be passed on to the WA Syphilis Outbreak Response group convened by WA Health.

The policy brief written by a participating member on decreasing syphilis in Australia will also be circulated to the broader Panel for reference.

Please send any suggestions for future agenda topics to nicola.blacker@wapha.org.au