



ShireGPs

Sutherland Division of General Practice

ANNUAL REPORT 2011

MISSION

The Sutherland Division of General Practice aims to support general practice in the pursuit of quality primary health care for the community through training and education, information and resources, partnerships with key stakeholders and advocacy for its members.

OUR BOARD

- ◆ Dr Sharyn Wilkins (Chair)
- ◆ Dr Sheena Wilmot (Vice Chair)
- ◆ Dr Rowan Vickers (Secretary)
- ◆ Dr Philip Dwyer (Treasurer)
- ◆ Dr Owen Brookes
- ◆ Dr Lucy France
- ◆ Dr William McConnell
- ◆ Dr Philip Moore
- ◆ Dr Craig Nelson
- ◆ Dr Richard Wong

GENERAL PRACTICE IN THE SUTHERLAND SHIRE

Over the last 12 months there has been a slight decrease in the number of General Practitioners in the Sutherland Shire, from 237 in 2009-10 to 231 in 2010-11. Thirty-eight per cent of GPs work part time, which indicates a slight increase on GPs electing part time work over the previous year.

The number of practices in the Sutherland Shire has decreased (by one) to 71. The number of solo GPs continues to decrease and there are now 19 solo practices in the area. The majority of practices comprise 2 to 5 GPs and there are 13 large (6+ GPs) practices.

Currently eight GP Registrars work across the area and we can expect this to increase in the future, particularly in the western part of the Sutherland Shire which is designated an 'outer metropolitan area'.

Almost 90% of GPs are members of the Division. As at 1 September 2011, there are 176 Full Members and 30 Associate Members, including one practice nurse.

Over the last 12 months there has been an increase in the number of practice nurses in the Sutherland Shire with 67 practice nurses working in 30 practices. In addition, a number of practices contract the services of practice nurses. The Practice Nurse Incentive Program which is due to commence on 1 January 2012 may significantly increase the practice nurse workforce.

TREASURER'S REPORT

The following is a brief overview of the Financial Report for the period 1 July 2010 to 30 June 2011. The full financial report is available on the Division's website (www.shiregps.org.au) or in hard copy on request. Copies have been included with this report for all attendees at the AGM.

The financial accounts for 2010-11 have been audited by BDH Audit and Assurance and show total revenue of \$1,947,093, which represents a decrease of 2.3% from the previous year. Grant income comprises almost 67% of total income. The Australian Government Department of Health and Ageing is the major funder to the Division. Other grants received include funds from the National Prescribing Service, Improvement Foundation Australia, South Eastern Sydney and Illawarra Area Health Service (now South Eastern Sydney Local Health District) and St George Youth Service.

Total revenue for Kareena After Hours General Practice is \$493,149, representing a decrease of \$61,312 (12.4%). The decrease in revenue is related to a fall of 12.7% in the number of patients attending Kareena After Hours General Practice over the last 12 months. Other sources of revenue for the Division comprise Sponsorships, Interest and Member Services.

Total expenditure during the same period amounted to \$1,995,971, representing a 0.8% increase compared to the previous year. This results in a deficit of \$48,878. Taking into account Retained Earnings from the previous year, total equity is \$71,754. Grants in advance and unspent grants at the end of the financial year amount to \$452,163.

Provisions for short and long term employee benefits, such as unused holiday leave and long service leave, amounted to \$162,721.

As funding to Divisions from the Australian Government will cease on 30 June 2012, the 2010-11 accounts disclose that there is significant uncertainty in regard to the Division's ability to continue as a going concern from 30 June 2012. An application to form the South Eastern Sydney Medicare Local has been lodged with the Department of Health and Ageing and we are currently awaiting the outcome. If successful, the Sutherland and St George Divisions will form a new entity and, where appropriate, transfer employees, assets and liabilities to the new entity.

Philip Dwyer

ABOUT THIS REPORT

This report provides an overview of our performance for the last financial year. It is designed to support the 2010-11 Financial Report which is available on our website (www.shiregps.org.au) or hard copy by request. The shorter format and inclusion of this report in the monthly newsletter minimised postage and production costs.

CHAIRPERSON'S REPORT

Divisions of General Practice will lose their Federal Government funding on the 30th of June 2012. We chose to apply to become a Medicare Local with St George Division rather than winding up the current organisation. This date is approaching very quickly and while it is expected that we will get funding to continue current and expanded activities as the "South Eastern Sydney Medicare Local", we have yet to hear if our application has been successful. This leaves us with a great deal of uncertainty at present but we are planning to continue as many services to General Practice as possible while we have funding. We hope to hear before the end of the year and are putting plans in place to start the new organisation as soon as funding becomes available.

In becoming a Medicare Local, we risk losing much that has been built up by the Division for General Practice over the last 19 years. In this light, I felt it was appropriate to reflect on the history of the Division:

On 18 August 1992, an inaugural meeting of local GPs met and elected a steering committee to establish a 'Department of General Practice' at Sutherland Hospital. On 9th February 1993 the then Southern Sydney Area Health Service provided a grant of \$20,000 to set up the Department. On the 1st of April 1993, 50 local GPs voted to amend the Constitution to set up the Division and open membership to non-hospital affiliated GPs and an application for funding was submitted to the Department of Health. The Commonwealth allocated funding of \$146,000 to establish Sutherland Division of General Practice and the Division was incorporated as an Association on 11 November 1993. The inaugural AGM elected a Management Committee comprising Dr Rod Tyrrell (Chairman), Dr Philip Lye (Deputy Chairman), Dr Jillian Tatham (Secretary), Dr Craig Nelson (Treasurer), Dr Owen Brookes, Dr Damien Bray, Dr David Jenkins and Dr Suri Nair.

The original goals were to:

- ◆ Improve communication between GPs and other local health providers
- ◆ Elevate the role and status of General Practice
- ◆ Contribute to GP post graduate educational opportunities
- ◆ Improve patient care in the community and in the hospital
- ◆ Through such initiatives, contribute to more efficient and cost-effective allocation of community health resources.

These goals have been achieved to various degrees with probably the most popular and successful being the monthly GP education sessions. Discharge summaries are more consistently delivered to GPs (although the content needs working on) and many now arrive to our practices electronically onto our computers. The Division has also raised the profile of General Practice by working within the community in a variety of roles. Many of our programs have been extremely successful including our immunisation program which has helped us achieve some of the highest immunisation rates in Australia.

Many of our staff have been working for the division for several years and all are to be congratulated on the excellent work they do. The staff are led by our outstanding CEO Yvonne Rowling who is not only very professional and knowledgeable but also keeps the division running smoothly and efficiently.

The Division considers General Practice to be the keystone of primary care and in writing the constitution for the new organisation we hope to ingrain the Medicare Local with that principle to ensure a General Practice focus into the future.

Sharyn Wilkins

CHIEF EXECUTIVE OFFICER'S REPORT

The Division experienced another challenging year in 2010-2011, with continuing changes occurring within the health environment and this will continue in 2012. Of major significance to general practice in the Sutherland Shire is the Commonwealth's decision to cease funding to Divisions of General Practice from 1 July 2012. The work of supporting general practice, providing direct patient services and hospital integration activities will be transitioned to new entities known as Medicare Locals.

The establishment of Medicare Locals is a fundamental component of the Australian Government's National Health Reforms and represents a shift in emphasis from hospitals to primary care, including general practice, allied health and community care. In this area, the South Eastern Sydney Medicare Local will be responsible for a catchment that incorporates the local government areas of Sutherland, Kogarah, Rockdale and Hurstville.

Once the boundaries became clear, the Division initiated discussions with St George Division of General Practice and a significant amount of time was spent working on the proposal to establish South Eastern Sydney Medicare Local. Discussions continue with the St George Division of General Practice to develop governance and operational frameworks that will continue and expand on the Division programs and services we currently provide. We are still awaiting the outcome of our application which should be known in the latter months of this year.

There will be a number of changes for Divisions as we transition to become a Medicare Local. The Transitional Board will comprise a total of nine positions, including four GPs. The broadening of the mix of providers and expertise on the Medicare Local board will have some positive effects. It will bring different perspectives to the organisation that should assist us to improve the working relationships between the various providers.

Prior to commencement of the Medicare Local, we will undertake consultations with allied health professionals to outline the range of services we provide to general practice and the community and to obtain feedback. Similar consultations have already been conducted with community organisations and there was a definite recognition from those present of the importance of

maintaining the coordinating role of the GP.

One of the key requirements in transitioning to a Medicare Local is that we maintain services and support to general practice. At this stage it is proposed to continue all current services and support as well as those services provided direct to your patients through Kareena After Hours, the Access to Allied Psychological Services (ATAPS) Program, Aged Care Access Initiative, Kiara Park Youth Health Clinic and, since early 2011, the Connecting Care Program.

It is the end of an era and should be acknowledged as such. Over the past eleven years I have been fortunate to work for a group of general practitioners who are passionate about improving primary care in the Sutherland Shire. I wish to acknowledge the work of the management committee, especially the Chairman Sharyn Wilkins, and the GPs who commit their expertise and knowledge to support the Division's committees. Most of this work is unseen by the majority of GPs however has positively impacted on areas like communication with local specialists and hospitals, referral pathways for direct patient services such as ATAPS, support for general practice to employ nurses, for accreditation, information management and information technology. The Performance Report overleaf highlights a number of achievements in this last 12 months.

I also wish to thank the Shire GPs team: Belinda Michie, Barbara Crittenden, Gillian Minto, Jan Sadler, Lynne Durie, Liesl McCoy, Shona Dutton, Amanda Rattray, Thien Vo, Amy Young and Nick Rosser. The majority have been with the Division over ten years and have worked hard to support members and their staff to navigate the myriad of programs, incentives and activities developed and funded by a succession of Commonwealth Governments and other organisations for general practice.

This next year will bring a different set of challenges, not the least of which is the formation of South Eastern Sydney Medicare Local.

Yvonne Rowling

PERFORMANCE REPORT

- ◆ The provision of high quality education to GPs, practice nurses and practice managers is core business for the Division. In the last 12 months, 25 individual events have been conducted, including the monthly program at Hazelhurst, small group modules, hands-on training in clinical software applications and multidisciplinary workshops. This represents over 700 individual attendances. CPD was rated first in programs that GPs want to continue under a Medicare Local.
- ◆ Improving communication between general practice and local hospitals, particularly on discharge of patients has been a key priority since inception of the Division. In 2010, the then South Eastern Sydney and Illawarra Area Health Service introduced an electronic health record which has the capacity to transmit discharge summaries via secure electronic messaging (ARGUS) or fax. To date, a little over one third of GPs have registered with ARGUS and GP feedback indicates an increase in satisfaction with the 'timeliness' of electronic discharge summaries. In July 2011, the Sutherland Hospital introduced Doc-Mail which sends a notification to GPs of a patient's admission, discharge or death. Initial GP feedback on Doc-Mail is positive and this notification system will shortly be available for patients using St George Hospital.
- ◆ The Immunisation Program commenced in 1994 with the aim to ensure optimal immunisation coverage for children. The latest statistics show that 91.2% of children in the Division's catchment are fully immunised which places Sutherland Division fourth in New South Wales and 18th (out of 113 divisions) nationwide.
- ◆ E-health is a key plank in the Government's reform agenda and 98% of GPs in the area are computerised. In 2010 the Division commenced an information technology support service which has specialised expertise in General Practice Information Management and Technology systems. The Help Desk function operates Monday to Friday during business hours with emergency support available via a mobile contact number. In the last 12 months, 17 practices have used the IT/IM service for their practice IT needs.
- ◆ Connecting Care is a new program funded by the South Eastern Sydney Local Health District as part of the response to the NSW Government's Caring Together program. The program provides a division based care coordinator to assist GPs with patients who have severe chronic disease and with three unplanned hospital admissions in the last 12 months. Since inception, Nick Rosser has assisted 128 GPs and 225 patients.
- ◆ The Division's Kiora Park Youth Health Clinic opened in 2008. The clinic is open for two hours on Thursday evenings at ShireWide Youth Service's premises at Miranda and provides services for young people in the Shire. The clinic sees an average of one patient per session and the majority of presentations are complex. We recently received a grant from the local community of \$9,400 to continue for another 12 months. Thank you to the two GPs who have worked at the clinic over the last 12 months: Drs Vicki Phipps and Loan Tran and to our newest recruit, Dr Philip Loxley.
- ◆ In the past 12 months, GPs have referred 272 patients for 1,653 psychological services contracted from Sutherland Mental Health Service or Child Youth and Family Counselling (for perinatal services). From October 2011 psychology services for Tier 1 will be provided by community based psychologists across the Sutherland Shire. Perinatal psychology services continue to be provided by the Child Youth and Family Counselling team at Caringbah Community Health.
- ◆ Sixty residents of low care facilities in the Sutherland Shire have received a total of 180 psychology sessions and nine groups of eight residents in each group participated in a gentle exercise program which provided two sessions each week for 12 weeks under the Aged Care Access Initiative.
- ◆ In the financial year, Kareena After Hours provided care to 6,541 patients. Whilst this represents a decrease of patients attending the practice compared to the previous year, Kareena remains a key provider of primary after hours care.
- ◆ The Closing the Gap program commenced in 2010 when funding was received from the Commonwealth. Achievements to date include a comprehensive needs assessment of the local Indigenous community and joint programs with local Indigenous organisations including Kurranulla Aboriginal Corporation, Narangy Boori Aboriginal Early Childhood Unit, and Kirinari Aboriginal Youth Hostel. In May 2011 an Indigenous Health Expo was held in conjunction with South Eastern Sydney Division of General Practice at La Perouse. Cultural awareness training, developed by the Division in consultation with Kurranulla Aboriginal Corporation and accredited by the RACGP, will be offered to all GPs, practice nurses, practice staff and allied health providers in the Sutherland Shire in October 2011. This event will be repeated annually.

