



Volume 1, Issue 3

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Install the Desktop Icon

The HealthPathways Desktop Icon installs a direct link to HealthPathways South Western Sydney.

To install the desktop icon, click on the [link](#) and follow the instructions.

HealthPathways is Live

As of July 1, HealthPathways has localised pathways for diabetes, chest pain and heart failure as well as a number of non-clinical pathways.

Pathways for sexual health, immunisation and wound care will be available by the end of July.

The program team is continuing to work on localising pathways and new workgroups are being organised.

Over the next few months, expect to see new pathway groups localised, new workgroups being organised, and more information on how HealthPathways can assist in changing the way we practise healthcare in South Western Sydney

Access to the site requires a login. To receive the login details, please email the [HealthPathways team](#) or contact your practice support officer.

The reason for the region

South Western Sydney covers a wide geographical area with significant variation in housing density, population, and service access. For more details, read the [About South Western Sydney](#) page.

When logging in for the first time, the site will request that you use the region in which you practice as the username. The region options available are:

- Bankstown
- Fairfield
- Highlands
- Liverpool
- Macarthur (includes Wollondilly)

There is no difference in information based on the region entered, as all regions log into the same site.

Having each region be the username assists the HealthPathways team track usage and uptake across the district as well as assess any variations in pathways most used.

This will allow HealthPathways to focus our community and engagement strategies where they are needed and ensure future pathway development meets the needs of all regions.

NOTE: Health staff logging in through the intranet are logged in automatically and not by region.

Localised vs non-localised pathways

As the HealthPathways project is still in its early days, the majority of pathways on the site have yet to be localised and are based off Canterbury, New Zealand.

A non-localised pathway is easily identifiable as it will have a pale orange background and is identified at the top of the page as not yet localised.

Non-localised pathways still provide relevant clinical information; however the referral and contact points are for Christchurch.

To see the list of localised pathways, select '[Localised Pathways](#)' from the navigation menu.

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A collaborative project between



and

**SOUTH WESTERN SYDNEY
PRIMARY HEALTH
NETWORK LTD**

Glossary of Symbols



Red Flag

Signs or symptoms that require urgent assessment or management



About

Information of interest but not relevant for managing condition



Practice Point

Handy tips that may make all the difference in managing a condition



Patient Information

Printable information for patients



Clinical Information

Resources and guidelines for clinicians



References

Relevant research



Service Information

Details regarding specific services for patients



Fee Payable

Patient may be required to pay for service



Medication

Information regarding medication



Education

Link to educational resource

Pathway Scalability

HealthPathways is designed to be used within a standard patient consultation without excessively increasing consultation time.

The pathways use a scalable format that initially provides the minimum detail an experienced clinician will require.

If more detail is needed, further information is available by clicking on one of the drop down boxes throughout the pathway. This provides more detailed, yet still concise, information. The drop down boxes will commonly provide further links to highly detailed information, such as treatment guidelines, for further reading.

In this example from the Diabetic Foot Screening pathway.

1: The information is very basic.

2: Details regarding the specifics of good foot care are provided

3: The clinician is directed to an online source with more detail and images of poor/good foot care.

This pathway scalability ensures clinicians have the information they need, when they need it, without being distracted by large bodies of information when they do not.

1: Educate about  [good foot care.](#)

2: Educate about  [good foot care.](#)

Good foot care

- Daily foot checks for erythema, cracking, blisters, maceration. Seek medical advice if these develop.
- Encourage good footwear to reduce plantar pressure.

Patient information: North East Valley Division of General Practice - [Diabetic Foot Disease](#)

3:

Foot Care

Foot care for those at high risk of developing a foot ulcer

Every person with diabetes needs to be careful about the feet. However, if the risk is high because of neuropathy or peripheral vascular disease or other factors (see the section on [Foot Examination](#)), then particular attention is needed. This section is specifically for this group of individuals.

Daily foot care should include:

Look at your feet - every day. Look at the top and bottom of your foot. Look and feel in between your toes and around the heel area.

What to look for:

- Blisters
- Cracks/breaks in skin
- Soggy skin
- Dry skin
- Swelling/redness in only one foot or leg
- Corn and calluses
- Ingrown toenails
- Blisters
- Sharp toe nails
- Hot/cold spots
- Discolouration
- Anything that is not normal or that was not there yesterday



If you are unable to see your feet use a mirror or ask someone to help you if you cannot manage to examine your own feet.

The National Health Services Directory Widget

Find a Health Service

General Practice
 ☐

Pharmacy
 ☐

Emergency Department
 ☐

Hospital
 ☐

More Services
 ☐

Keyword Search

[Advanced Search](#)

HealthPathways South Western Sydney has partnered with the National Health Services Directory (NHSD) to assist clinicians in finding private specialists, nursing and allied health within South Western Sydney, NSW, or anywhere in the country if needed.

This ensures that the users of HealthPathways South Western Sydney always have access to the most up-to-date lists of service providers for our region.

The NHSD widget, or search tool, is located on the main HealthPathways page. Searches for specific specialties by geographical region are also found within relevant pathway request areas, with these links opening up the NHSD search form in a new window.

Clinical Pathway Spotlight: Diabetes

In 2014, a working group comprised of staff from the LHD, Medicare Local, and general practitioners was formed to develop care pathways regarding diabetes management within the community.

When HealthPathways launched in February 2015, it was only logical to build upon this body of work.

The diabetes pathway group covers all aspects of Type 2 diabetes.

It is comprised of 35 clinical pathways, 4 request pages, and additional pages regarding absolute cardiovascular disease risk and smoking cessation.

Following the launch of the live site, it is expected that work will continue to complete the remaining diabetes pathways, including:

- Type 1 diabetes
- Gestational diabetes
- Diabetes and pregnancy

Diabetes Pathways

- [Diabetes](#)
 - [Screening and detection of diabetes and pre-diabetes](#)
 - [Pre-diabetes](#)
 - [Diabetes—continuing care](#)
 - [Diabetes medication management](#)
 - [Diabetes dietary information](#)
 - [Diabetes eye disease screening](#)
 - [Diabetic foot screening](#)
 - [Surgery, contrast, and bowel preparation in diabetes](#)
 - [Diabetes and driving](#)
 - [Insulin](#)
 - [Newly diagnosed Type 2 diabetes](#)
 - [Diabetes renal screening](#)
 - [Diabetes requests](#)

Insulin in Type 2 Diabetes: Management

- If uncertain about starting insulin and/or requiring guidance, consider [diabetes specialist assessment](#).
- Ensure patient receives adequate education prior to commencing insulin – refer to a [credentialed diabetes educator](#).

Management

- [Combining insulin with other anti-diabetic medications](#)
- [Starting and adjusting basal insulin schedule](#)

1. Select basal insulin e.g., glargine or isophane, and injecting device.
2. Start basal insulin 10 units once daily (usually morning or bedtime) and continue glucose-lowering agents.
3. Titrate the insulin dose once or twice a week to pre-breakfast glucose reading:
 - Increase insulin dose until pre-breakfast reading is within 6 to 8 mmol/L.
 - Obtain some post prandial readings 2 hours after meals. If readings are consistently above 10mmol/L post prandially, consider adding a rapid acting insulin e.g., Novorapid, Humalog Rapid, or Apidra if the next HbA1c is above target.

Information Pathway Spotlight: Issuing a Medical Certificate of Cause of Death

On 8 December 2014, a new Medical Certificate of Cause of Death was introduced in NSW Registry of Births, Deaths and Marriages.

The certificate has been expanded from A4 to A3 sized (which is folded into A4 size with pre-punched holes for ease of filing) and includes new sections and completion requirements.

Information regarding how to order the new certificate is in the [Issuing a Medical Certificate of Cause of Death](#) pathway.

| | | | |
|--|-------------|-----------------|---|
|  | FAMILY NAME | | MR |
| | GIVEN NAME | | <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE |
| Facility: | D.O.B. / / | | M.O. |
| ADDRESS | | | |
| MEDICAL CERTIFICATE OF CAUSE OF DEATH | | LOCATION / WARD | |
| COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE | | | |
| <p>New South Wales Births, Deaths and Marriages Registration Act, 1995 Medical Certificate of Cause of Death</p> <p>General Information: This form is required under Section 39 of the Births, Deaths and Marriages Registration Act 1995 and forms the basis for the registration of a death and the issue of a Medical Certificate of Cause of Death (MCCD). A penalty may apply if a death is not reported within 48 hours of death.</p> <p>The purpose of this form is to notify the Registrar, Registry of Births, Deaths & Marriages ('the Registry') of a death and the cause of that death. This form must be:</p> <ul style="list-style-type: none"> • completed by a registered medical practitioner • submitted to the Registry within 48 hours of the death • used in relation to a death of a person • used in relation to a death that is not reviewable or reportable to a coroner, as specified in Sections 6 and 38 of the Coroners Act 2009. Statutory requirements can be found on page 4 of this form. <p>If you need assistance or are unsure whether you are required to report this death to the Coroner contact the NSW State Coroner's Court during business hours on 8584 7777. Otherwise contact the Sydney Department of Forensic Medicine on 8584 7800, or the Newcastle Department of Forensic Medicine 4922 3700 to speak with a Duty Pathologist. You can also refer to the Coroners website at http://www.coroners.nsw.gov.au/coroners/ for 'health_professionals.html'</p> <p>If under section 39 (1)(b) of the BDM Act, the issue of a MCCD must be deferred, a notice of intention to sign such a certificate must be advised to the Registry by emailing BDM-DeathCertificate@sgd.nsw.gov.au. The email must contain the name of the deceased in the subject line. The body of the email must contain the date of death, place of death,</p> | | | |

This pathway also provides guidance regarding:

- When to report the death to the Coroner
- When to complete a Declaration of Life Extinct
- When to complete a Cremation Certificate
- Important changes to the Coroner's Act 2009

A range of printable resources for patients is also available in the patient information section.

Resource Pathway Spotlight: Multicultural Services and Translated Resources

South Western Sydney has one of the most linguistically diverse populations in NSW. In 2013, it was estimated that 48% of the population of South Western Sydney spoke a language other than English at home.

The [Multicultural Services and Translated Resources](#) pathway provides information regarding organisations who provide either support or intervention services in a relevant community language in areas such as:

- Mental Health
- Women's Health
- Gambling
- Migrant Resource Centre
- Aged Care

The pathway also includes links to resource in a number of languages for topics such as:

- Anaphylaxis
- Asthma
- Diabetes
- Mental Health
- Palliative Care
- Safe use of Medicines
- Men's Health
- Women's Health
- Child Health

Service Request Spotlight: State Cardiac Reperfusion Strategy

As part of the [Acute Chest Pain](#) pathway, the following pathway was developed.

The [State Cardiac Reperfusion Strategy](#) (SCRS) is a system of care for patients with a suspected Acute Coronary Syndrome (ACS), a group of conditions due to reduced blood flow to the heart.

The aim of SCRS is to provide a more efficient response to suspected ACS and access to a cardiac catheterisation laboratory.

The SCRS is comprised of two models: PAPA and PHT

Pre-hospital Assessment for Primary Angioplasty (PAPA) is an ambulance model facilitating pre-hospital triage for suspected STEMI patients.

Triage occurs via transmission of a 12 lead ECG reading to a cardiologist at Liverpool Hospital. If the preliminary interpretation is that the patient will require PPCI and the patient is within a 45-minute safe travel radius of a hospital that can provide 24-hour PPCI (Liverpool Hospital), the paramedics will bypass smaller hospitals and take the patient directly to this hospital.

Pre-hospital Thrombolysis (PHT) uses the same acquisition and transmission of a 12 lead ECG reading to a cardiologist at Liverpool Hospital as PAPA.

However, if patient will require PPCI and is more than 45-minutes safe travel from a hospital that can provide 24-hour PPCI (Liverpool Hospital), the patient is assessed against specific criteria for thrombolysis and if met, the paramedics will administer protocol directed thrombolysis prior to transportation directly to this hospital.

Project Team Spotlight: Dr. Alisa Kane (SWSLHD Clinical Lead)

Dr. Kane commenced with the HealthPathways team in February 2015.

Her tasks include:

- Health staff engagement
- Subject Matter Expert coordination

Dr. Kane is a physician and pathologist specialising in immunology. In addition to her work with HealthPathways, Dr. Kane works as a staff specialist in the Liverpool Hospital Immunology Department.

Her qualifications include:

- MBBS (Hons), BSc (Med)(Hons) - University of NSW
- Fellow of the Royal Australasian College of Physicians (FRACP)
- Fellow of the Royal College of Pathologists Australasia (FRCPA)
- State representative for NSW and council member for the Australian Society for Clinical Immunology and Allergy (ASCI)

Dr. Kane is also completing her PhD at the Garvan Institute of Medical Research.



The continuing role for the project website

The HealthPathways Project website has played an important role for clinicians across the region in gaining information regarding the HealthPathways program in South Western Sydney.

The project site will continue to be used to provide updates on pathway development and progress as well as

being a repository of workgroup documents. It also continues to house the [Pathway Suggestion Form](#)

The project website will also continue to operate a [CPD calendar](#) which is linked to from the main site. This calendar will continue to be updated with events for both GPs and other health professionals.

It is encouraged that people still check in at the project website for [progress updates](#) regarding the program. The address for the project website remains the same.

The project website can be accessed at swsproject.healthpathways.org.au

How can I get involved?

HealthPathways South Western Sydney may be live, but there are still a large number of pathways to localise.

Be a Workgroup participant

Workgroup participants attend 1-3 meetings to review communication pathways, clarity of service information, entry point criteria for services, and any other issues which impact upon treating that condition both in the primary and acute care settings.

Be a Subject Matter Expert or Pathway Consultant

During the drafting process, the pathway content and service information needs to be reviewed. This involves both reviews by clinical experts in the field as well as general practitioners to ensure readability.

Suggest a Pathway

To suggest a pathway, head to the '[Get Involved](#)' page of the SWS HealthPathways Project Website.

HealthPathways success is determined by the willingness of local health professionals getting involved