# **FRIDAY FACTS**



The weekly newsletter of Auckland PHO provides details of events, meetings, clinical information and PHO Programmes to our Practices

# COVID-19 ALERT LEVEL 1 – ESSENTIAL UPDATES FOR PRIMARY CARE

To transition Primary Care through to national Alert Level 1 the following changes will apply:

- 1. A new COVID-19 assessment and swabbing algorithm with details on reimbursement through POAC is attached.
- CBACs will continue until further advice is available following the release of the Ministry of Health testing strategy. Designated practices are being phased out to make way for a return to routine general practice.
- For PPE and infection control please continue to use the HealthPathways advice (https://aucklandregion.healthpathways.org.nz/loginfiles/Landing.as px?from=dfae7e5f8e694a829b884ebf568e9f70&page=722376.htm). Note that the Ministry of Health is planning to release new national guidance.
- 4. For management of non COVID-19 activity please refer again to the Primary Care Alert Response Framework (http://aucklandregion.healthpathways.org.nz/LoginFiles/Landing.as px?from=dfae7e5f8e694a829b884ebf568e9f70&page=748770.htm).

NRHCC COVID Assessment and Management 09 06 20.pdf

Please send feedback to stuart.jenkins@waitematadhb.govt.nz.

#### **IMMUNISATION UPDATE**

Effective 1 July 2020 the Ministry of Health have announced the following changes to the National Immunisation Schedule.

## **Synflorix**

PCV10 is currently given at ages 6 weeks, 3 months, 5 months, and 15 months.

From 1<sup>st</sup> July 2020 PCV10 will change to a 2+1 schedule. This means it will now be given at 6 weeks, 5 months, and 15 months.

There is international evidence that a 2+1 schedule offers as much protection as a 3+1 schedule.

## High Risk PVC10

There is no change to the high risk PCV13 programme. They will continue to receive PVC13 at 6 weeks, 3 months, 5 months, and 15 months.

## ADT

ADT will be delisted from 1<sup>st</sup> October 2020 and will be replaced with Tdap – Tetanus, Diphtheria, Acellular Pertussis (Boostrix) for a funded course for eligible adults and children. This will include ACC wound claims for up to four doses in a lifetime.

45-year-old Tdap is required if a patient has not had four doses of Td in their lifetime.

Boostrix remains unchanged for pregnancy and is still encouraged to be given in all pregnancies to protect baby from whooping cough.

## PRIVATELY FUNDED TESTING COVID-19 OF ASYMPTOMATIC INDIVIDUALS

This refers to patients who are seeking a COVID test who;

- do not meet the MoH case definition and
- are not requested to be tested by the Medical Officer of Health or the Ministry of Health, e.g. part of contact testing or planned surveillance.

The Ministry of Health urge businesses not to seek their own COVID-19 testing of workers. See MoH information

There are very few instances, where, due to circumstances beyond their control, individuals require testing in order to travel overseas.

If a patient is seeking asymptomatic testing.

- Check that the patient understands their employment rights, including the right to decline to be tested.
- Explain to the patient about how the Covid-19 test result will be interpreted and provide information - see HealthPathways COVID-19 Testing: Information for People Who Do Not Have COVID-19 Symptoms.
- Contact Labtests (<u>info.commercial@healthscope.co.nz</u>) to discuss process and payment. Consider the payment the patient makes for consultation and swabbing in the practice, and the cost of the laboratory test. A COVID-19 POAC payment does not apply to private testing.
- Write "PRIVATE TESTING" on the laboratory order form and complete a Labtest COVID Testing consent form as attached.
- Complete e-notification for all COVID-19 testing, including private testing.

Labtests Covid Testing Consent Form.pdf

Please send feedback to stuart.jenkins@waitematadhb.govt.nz.

### **UPDATE FROM DR ASHLEY BLOOMFIELD**

Ashley's monthly update is attached with this Friday Facts.

### MSD: MEDICAL CERTIFICATES REQUIRED AGAIN FROM 15 JUNE

In April, the Ministry of Social Development suspended the requirement to provide medical certificates when applying for benefits, along with other temporary changes as part of the COVID-19 response. From 15 June 2020, the Ministry will resume asking people to provide a medical certificate (when needed) to support their applications for benefits and other assistance. This includes Disability Allowance medical certificates for new applications and new costs. Other temporary changes the Ministry has made around medical certificates are still in place. These are:

- No medical certificate renewals for existing clients.
- No proof of costs for Disability Allowance (e.g. receipts).

No annual reviews (for example for Disability Allowance or Child Disability Allowance) or social housing reviews

### **SENDING AMBULANCE CARE SUMMARIES TO GPS**

A reminder that St John has begun sending ambulance care summaries to general practices as a pilot in the Wairarapa, Southern and Bay of Plenty DHB areas for two weeks, prior to going live across the rest of New Zealand from 19 June 2020. This means that you may start to see ambulance care summaries appear in your inbox via HealthLink for your registered patients who have been treated by ambulance personnel and did not require transport to a medical facility.

### LABTESTS LABORATORY UPDATE

Please <u>follow link</u> to view Labtests latest laboratory update.

This update covers:

- Ordering Blood tests when consulting virtually
- Collection Centre Update
- Skin Prick Testing resumes
- COVID Testing for asymptomatic patients
- Requesting a home visit

# SECONDARY PREVENTION AUDIT SUMMARY AND IMPLICATIONS FOR THE PHO

Dr Lisa Eskildsen from Calder Centre and Auckland PHO board member has been involved in a really interesting study that came out of some collaboration work with BPAC from the Safety in Practice work on High Risk Prescribing Indicators, which has just been published in "Pharmacoepidemiology and Drug Safety" May 2020.

She notes that as the team worked with an increasing focus on equity they found a lack of good evidence and through some collaboration with Andy Tomlin and Dave Woods at BPAC started looking at national data sets to see what information could be analysed that would shed light on some of these issues. Through the technical and statistical expertise of Andy and Dave, they looked at some of the disparities of harm relating to NSAID in NZ. The results are concerning, but not surprising, given the limited information already known about disparity of harm. The study has been published attached is the full study.

Because of the large data sets and the ability to account for many confounding factors, the study results have good statistical power. The methodology that was developed could go on to be used to look at a whole lot of different aspects of care and equity here in NZ.

It is hoped that the study is seen by those who write the guidelines for gastroprotection for people using NSAID for example, as Maori and Pacific peoples experience the same levels of harm at 45 years as NZ Europeans do at the age of 65, which is currently the suggested approximate age where gastroprotection should be used. Therefore, we should be being more cautious for Maori and pacific peoples with NSAID use at a younger age.

Thanks, Lisa, for sharing this important piece of work with the Auckland PHO network.

### **MEL BEATTIE RESIGNATION**

It is with mixed feelings that we announce the departure of Mel Beattie who leaves the PHO on 18th June 2020. It is always sad to lose a dedicated, hardworking, and a regular top performer from our dedicated PHO team.

Mel has been with Auckland PHO for 8 months and in that short time has worked closely with the practices in her portfolio, contributing to System Level Measure achievement and providing high levels of communication and support. During COVID-19 lockdown, Mel successfully managed the Northcote COVID-19 testing site and without her expertise and skill it would not have been established as quickly and accomplished as much as it did. We will be always grateful for her efforts.

Mel has missed the hands-on clinical aspects of Primary Care which has led to her resignation and her new position as a Practice Nurse at the Papakura Marae clinic.

We acknowledge her efforts and thank her for the unconditional commitment and dedication throughout the time she has been with us. On behalf of everyone at Auckland PHO and the practice network, I would like to wish Mel the best of success in future challenges and endeavours.

In the meantime, Carol (whose retirement is stretching out!) will be looking after Mel's portfolio of practices and we will let you know in a few weeks how practices will be supported.

#### **RED WHALE GP UPDATE**

Red Whale is a comprehensive update for primary health care professionals: GPs, Primary Care Nurses, Nurse Practitioners, Pharmacists. Our GP's do all the legwork to bring you up to speed on the latest evidence and guidance.

This year is different from any other, and we want to make it easy and safe for you to stay fully up to date, so Red Whale 2020 is being presented as a webinar series over 4 nights in September.

Webinar series 7.30pm weekly: 2, 9, 16 and 23 September 2020

This webinar series is for GPs, primary care nurses, nurse practitioners, nurse prescribers, pharmacists: anyone who wants to keep up to date across the whole field of primary care.

Further information and registration: Click here



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