

## LAKES LIAISON NEWSLETTER

### AUGUST 2023

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#### NEW HOSPITAL INITIATIVES

- Enhancing the Discharge planning process – To ensure each patient has clear criteria in place with estimated discharge dates that is clearly communicated with patients and families/whānau. This enables visibility of patient flow through the hospital for planning and ensuring sufficient beds are available for planned care and acute admissions. Available at Rotorua and Taupo hospitals.
  - Ongoing Early Supported Discharge – using the Allied Health workforce at Lakes as well as in partnership with QE Health to enable a group of patients who require further rehabilitation once medically stable, to receive rehabilitation in their own homes. Patients who may have previously remained in hospital for additional therapeutic input e.g. via Physiotherapy or Occupational Therapy, are now able to return home sooner for therapy sessions at home. Since this initiative has gone live in April 2023, 20 patients have been referred to QE Allied Health with a range of 3-13 bed days saved. Available at Rotorua hospitals.
  - Acute Medical Clinic has gone live since middle of June 2023 – very unwell patients in the community are able to be referred by their GP to an urgent outpatient clinic where they will be seen by the within a few days of referral. These patients may have previously required an inpatient admission or been reviewed in the Emergency Department.
- Available at Rotorua and Taupo hospitals if patient is suitable.
- Discharge Lounge – a pilot discharge lounge has been live since June 2023. This lounge has capacity for up to six patients at a time – patients who will be discharged that day but are awaiting transport home or discharge paperwork where these patients can wait comfortably in a chair instead of waiting in a hospital bed needed by another patient. Available at Rotorua hospitals.
  - Developed clear pathways for patients who require Residential care placement but need legal documents completed prior to this happening. Unfortunately, there are still limitations on physical bed availability in Aged Residential Care and this continues to impact the ability of patients to be transferred to these facilities. Available at Rotorua and Taupo hospitals.
  - We have increased Allied Health support to the Rotorua Hospital Emergency Department (Physiotherapy, Social Work, NASC) to be better able to provide additional supports at home and prevent potentially avoidable hospital admissions.
  - Opening of four additional Surgical beds and three additional bed in Older Persons and Rehabilitation Services for the winter period. Taupo has all 15 beds fully staffed.
- In addition to these initiatives, staff at Te Whatu Ora Lakes are being engaged in a variety of other internal process changes to support around Acute Flow.

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## HEALTHPATHWAYS

### New search function

A new search function has gone live, hopefully making it easier to find the correct pathways that you are looking for advice about. If you have any feedback or suggestions for the Streamliners Platform team, please use the feedback button on your Health Pathways site.

### Recently published HealthPathways:

The new live pathways over the last month are:

- Polio
- Mental Health Act
- Chronic Hepatitis C
- Urinary incontinence in men
- Chlamydia
- Gonorrhoea
- Epididymo-orchitis
- PID
- Contract tracing
- Vaginal discharge
- Trichomoniasis
- Urethritis
- Candidiasis
- Genital warts
- Genital herpes
- Bacterial vaginosis
- Syphilis
- Sexual health checks

The national **Pelvic Mesh Complications in Women** pathway and the **New Zealand Female Pelvic Mesh Service Requests** page are now available to access on the Te Manawa Taki Community HealthPathways site. This national service is delivered via multidisciplinary centres of expertise in Waitemata and Ōtautahi.

Women with pelvic mesh complications all over the motu will be relying on their GPs to know about this service and how to complete the referral process.

The HealthPathways page has information about travel assistance as well.

### Recently updated HealthPathways

- Heart failure – to align with new international guidelines
- Diabetes – to align with new updated NZSSD guidelines
- Pertussis and measles – new swab guidelines
- Covid 19 – reduced to 4 pathways: COVID-19 Case management in Adults, COVID-19 Case management in Children, COVID-19 Testing and COVID-19 Resources.
- Restless legs - Minor clinical changes to assessment and management sections (in particular aggravating factors, and medications).

## BPAC E-REFERRAL

I wish to draw your attention to several new Bpac e-referrals which are now Live in the Lakes picker list for your use.

1. Pulmonary rehab classes and education services – referral to respiratory nurses contracted via Korowai Aroha is now available via Bpac e-referral. Full details of each service is available on the e-referral information page.
  - Pulmonary rehab classes
  - Asthma education and treatment review
  - COPD respiratory review
  - Spirometry
2. Miscarriage service – Early Pregnancy Assessment unit (EPAU) Rotorua – is accepting referrals for intra- uterine demise or retained products with a gestation of up to 12 weeks on scan. Women can be offered expectant, medical or surgical treatment options.
3. Cancer Support Services – Referral to the Cancer Society for emotional and practical support to people with cancer and their

whanau. Read the information page at the beginning of the e-referral for full details.

4. Dementia Lakes – form has been modified to include problem lists and current medications.

### **Pelvic mesh complications in women**

The Pelvic Mesh Complications is a national service for females (born with biologically female pelvic organs) who may have been harmed by mesh implanted for the treatment of urinary stress incontinence or pelvic organ prolapse.

### **What does this mean for me as a Referrer?**

Pelvic Mesh service is now available on eReferrals. This service went LIVE on 26th of April 2023.

### **Pelvic Mesh eReferral eligibility criteria**

The Service Detail displays information on links to resources and is a guide for information to be included in the referral.

**Pelvic Mesh Complications**

The Female Pelvic Mesh Service (FPMS) is a national service for females (born with biologically female pelvic organs) who may have been harmed by mesh implanted for the treatment of urinary stress incontinence or pelvic organ prolapse.

[New Zealand Female Pelvic Mesh Service Patient Information](#) (PDF link coming soon)

There are two hubs. It is the female's choice which hub they would like to be directed to, if they have no preference, please refer to them as follows:

- Northern Hub – Auckland (covers Taupo and north or by patient preference)
  - 021-906-245, available Monday to Thursday 9 am to 3.45 pm
- Southern Hub – Christchurch (covers all areas south of Taupo or by patient preference)
  - to be advised

Please discuss and choose the form for the hub the female has chosen. All access and care will be identical regardless of the hub chosen.

**Resources and Links**

[HealthPathways - Pelvic Mesh Complications](#)

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## **QUEEN ELIZABETH CONCUSSION SERVICE**

This is a Fully funded **ACC concussion service** on GP or NP referral.

Staffed by

- Neuropsychologist
- Occupational Medicine Doctor
- Physiotherapist and Occupational Therapy, with clients getting access to our rehab gym.

GPs and NPs can refer directly to the concussion service – no approvals required.

[referrals@qehealth.co.nz](mailto:referrals@qehealth.co.nz)

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## **MEDICAL PROTECTION SOCIETY COUNSELLING**

**Medical Protection Society** Wellness service for doctors is provided by NZ College of Clinical psychologist members.

5 psychologists at QE Health are able to offer up to 6 sessions with a clinical psychologist to support doctors wellbeing

Doctors just need to phone medical protection society to get a purchase order number and email that along with your registrations number.

[psychology@qehealth.co.nz](mailto:psychology@qehealth.co.nz)

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## **RADIOLOGY REPORTING DELAYS**

Currently we have reporting delays for all non-urgent X-rays. These non-urgent exams are currently taking up to 2 weeks to report. This is due to the shortage of radiologists and the necessity of radiologist leave. Apologies for these delays and we are working hard to reduce this reporting time.

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## **CONTINENCE SERVICE**

Continence referral numbers are very high and there is currently a wait time of at least 6-8 weeks before patients can be seen for their initial assessment.

When referring please

- please inform patients that they will be required to complete a bladder diary as part of the initial assessment. Patients can express frustration and it is helpful if they have been warned of this requirement.

- Please check with the patients that their demographic data is up to date and correct prior to sending a referral.
- Some referrals do not meet the criteria and these patients are very disappointed when contacted. The inclusion and exclusion criteria are available on the front page of each Bpac e –referral on opening, read before you proceed to refer.

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## LAB NEWS

### Change of Urine Tubes

Published by Pathlab on Jul 17, 2023 2:06:47 PM.

### Change of Urine Tubes

Pathlab are changing from the 6mL Greiner VACUETTE yellow top urine Z tubes (no additives) to BD tan top urine tubes (no additives) for biochemistry urine tests (e.g. Microalbumin; Protein/Creatinine Ratio, etc.) The BD tan top urine tubes are the current tube required for Microbiology testing

### BIOCHEMISTRY TESTS

**(e.g. Microalbumin; Protein / Creatinine Ratio)**

<b>CURRENT PRACTICE</b>	Greiner VACUETTE yellow top urine Z tube
<b>NEW PRACTICE</b>	BD tan top Urine tubes

### MICROBIOLOGY TESTS

**(e.g. Microscopy / Culture / Sensitivity)**

BD tan top Urine tubes

Please exhaust your existing stock of VACUTETTE yellow top urine Z tube, before switching to the BD tan top urine tubes for Biochemistry urine tests. You can order the BD tan top urine tubes as per your normal ordering procedure; or refer to [www.pathlab.co.nz/supplies](http://www.pathlab.co.nz/supplies)

Please note if you request both biochemistry test(s) and Microbiology test(s), please ensure to use 2x BD tan top urine tubes.

Thank you for your assistance in the change of urine tubes. If you have any questions, please do not hesitate to contact us.

**John Woodford**  
Yau

**Laura**

Published by Pathlab on Aug 9, 2023 12:41:03 PM.

### Staff shortages in microbiology department

This communication is on behalf of Pathlab Microbiology to inform you that like many other places, we are currently experiencing some staffing challenges. Despite our team’s best effort to maintain optimal service levels, we anticipate that there may be occasional delays with testing and reporting microbiology results over the forthcoming months.

To optimise the processing of critical samples and improve overall efficiency, we would like to remind all requestors to consider the "choosing wisely" principles before ordering microbiology tests. By adhering to these principles, we can collectively ensure the most appropriate and efficient use of our resources.

Please consider the following (and refer to our [testing guides](#) for full details):

- **Urines:** Please strictly reserve laboratory urine testing to cases of complicated UTI including pregnancy. Uncomplicated cystitis does not require laboratory testing.
- **Superficial skin or wound swabs:** Please restrict to where systemic symptoms are present, or where there is empiric therapy failure. In particular, superficial wound swabs from the peri-anal area and from chronic ulcers are often colonised with enteric flora

and these results rarely change patient management.

- **Faeces:** Wherever possible, please restrict testing to those patients with systemic symptoms, risk factors for *Clostridium difficile*, or as part of a public health outbreak investigation.
- **Sputum samples:** Sputum samples from the community setting should only be sent in exceptional circumstances.
- **Ear swabs:** Wherever possible, please send ear swabs only where systemic infection is present, bone involvement is suspected, or ENT specialists have been involved.
- **Throat swabs:** Please restrict to where there are clear risk factors for rheumatic fever or where the patient is systemically unwell.

Please ensure brief and pertinent clinical details are included with all microbiology requests.

By adhering to these diagnostic stewardship principles, we can collectively enhance the quality and efficiency of our services, especially during this challenging staffing period, which we anticipate will last several months. If you have any questions or require further clarification, please do not hesitate to reach out to our team.

Your cooperation and understanding are greatly appreciated as we navigate through this period.

**Drs Vivian Black, Vani Sathyendran, Michael Addidle, Clinical Microbiologists Murray Robinson, Lead of Specialty Microbiology & Molecular**

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## **PREGNANCY CARE RESEARCH NEEDING GP AND NURSES**

The Lakes district (Rotorua and Taupō) has been chosen for a research project about pregnancy care being run by a consumer-university collaboration in Auckland.

There are 2 arms of the study: one is talking with women/whanau, and the other is talking with health care professionals.

The ultimate goal will be to help people access care and reduce the impact of preterm birth in our community. (This is the most common cause of neonatal death in New Zealand.)

It has approval through the regional ethics approval, and it has locality sign off with the Lakes institutional ethics team.

Please share your experience and insights regarding

- The enablers and barriers to preterm birth care
- The enablers and barriers to the future use of a national best practice guide for preterm birth
- Identify tools and resources that will support a national best practice guide

To participate you must be a GP or a nurse. The research involves attending a small focus groups (1 -2 hours) or interview (30 to 60 minutes)

To be involved please contact [waimarama.mulqueen@aut.ac.nz](mailto:waimarama.mulqueen@aut.ac.nz)

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## **PLEASE DO SWABS WITH TOP REFERRALS**

Please remember that patients requesting a TOP should have STI swabs taken when they are referred. Self-swabs are fine.

The staff there are finding that a lot of women coming through haven't had them, so they get done on the same day as the TOP, but it's not ideal to be doing surgery without knowing if an infection is present.