

PracSavvy

Clinical Systems Support and Training

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May 2017 — Newsbrief

MyHR

For some practices this month there was an unwelcome letter in the mail, telling them that they hadn't met their Shared Health Summary upload targets and would have to repay some of their ePiP incentive. In the case of a single stand-alone practice this is a pretty disappointing outcome for the practice as the upload requirement is a relatively small number.

There is more to the story though, if the practice concerned has multiple locations sharing a single database. In this instance all uploaded health summaries will be tagged against a single HPI-O number, and therefore a single practice pip number. Many practices anticipated this and just ensured that their uploaded figure was equal to the combined requirement of their 2/3/4 practice sites. To the Department of Health however, it may look like one of your practices far exceeded the requirement, and the others uploaded no health summaries.

The letter that arrived at the practice contained an email address to which the practice could dispute the apparent shortfall. Any practice that feels they met their overall requirement, should send the email that outlines their case. The multi-practice, one database scenario is a very common one and I imagine there will be dozens of practices around Australia making precisely this argument.

A good email would contain acknowledgement of the combined target per separate practice over the 3 quarters ending 31/1/17, along with the assertion that the total requirement for the other practices was met by a single practice in the group.

You have a number of tools to assist you in establishing how much you uploaded.



Using PenCat, load a recent extract and go to the *Date Range(Results)* filter, specifying which date range you want to check. Click *Recalculate* and then examine the information under the *Digital Health -SHS Uploads* graph.



If you are running Medical Director 3.16c or later you should have the latest ePIP widget installed on your sidebar. Simply input your swpe figure into the relevant quarter, and the widget will tell you your target and how much was uploaded.



If you are running the Best Practice Lava edition, there is a report available under *Management*, called *Shared Health Summaries Uploaded*. If you haven't upgraded yet, there is a search query that I can make available to you.

eReferral

Some additions and changes to the published list of [electronically referable specialists](#).

New

Dr Andrew Jevtic		<i>drjevtic</i>
Dr Josie Larby	Tasmanian Lung Service (N)	<i>ltonlung</i>
Lung Function Testing	Tasmanian Lung Service (N and S)	<i>ltonlung</i>

Changes

Dr Ben McCulloch	gastrohh	(from <i>drgastro</i>)
Dr Kwang Yee	gastrohh	(from <i>drgastro</i>)

Please let me know if there are any specialists that have become enabled and are not shown on my listing.

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PenCat

The April update of PenCat contains some useful additions:

One of the CPD activities for the 2017 triennium is a PLAN reflective learning activity around quality improvement. [https://www.racgp.org.au/education/qicpd-program/gps/planning-learning-and-need-\(plan\)/](https://www.racgp.org.au/education/qicpd-program/gps/planning-learning-and-need-(plan)/)

PenCat gives tailored screens to assist with this, and they can be accessed from the Programs icon, that is displayed in the initial dashboard when you first start the program. Information around using this can be found here: <http://help.pencs.com.au/pages/viewpage.action?pageId=11371108>

The April update also contains the “soft launch” of SMS functionality within the PenCat tool. You will need to purchase an SMS bundle from PenCat to enable this, but it will provide the ability to identify a group in the tool and then send that group an SMS message. As it has often been lamented that you cant import a PenCat search into MD or BP for mail merge purposes, this functionality does present some other possibilities for identifying and contacting.

Note that SMS from recall lists in MD has been available for over a year now, but as we know, PenCat is able to perform more comprehensive searches.

Templates

The following templates were created this month, and are available in MD or BP format [here](#):

- ◆ Nephrologist Referral Form (Generic)
- ◆ Hepatitis C Virus GPMP and Team Care form

Please let me know if you need any others created, or need assistance importing the template.

MD

I’ve become aware that certain 3rd part companies are starting to offer to provide SMS recalls for General Practices. Whilst they may be some advantage to out-sourcing this activity, I would encourage practice managers and owners to ensure they are fully aware of the SMS functionality that they already have at their disposal.

To Recap:

- ◆ Since MD Release 3.16, a little over a year ago, SMS messaging is fully integrated with both *Recall* and *Actioned Items* screens.
- ◆ The practice has full control over the message text.
- ◆ All bulk SMS messages are logged and viewable as follow-up activities against the recall or pathology item that they are relevant to.
- ◆ If you are already doing SMS through Pracsoft, you don’t need to sign up for another plan.
- ◆ From MD 3.17, the patient record has an SMS icon where you can view any messages sent to the patient.
- ◆ Patient opt-out is controlled through the demographic record accessible in both Pracsoft and MD.

Vaccination - Afluria Quad

At least one practice reported that this vaccination wasn’t available as a drop-down choice in the MD Immunisations module. This issue is rectified by installation of the May MDREF update. So if it is still unavailable, talk to your IT support about getting your MDREF update.

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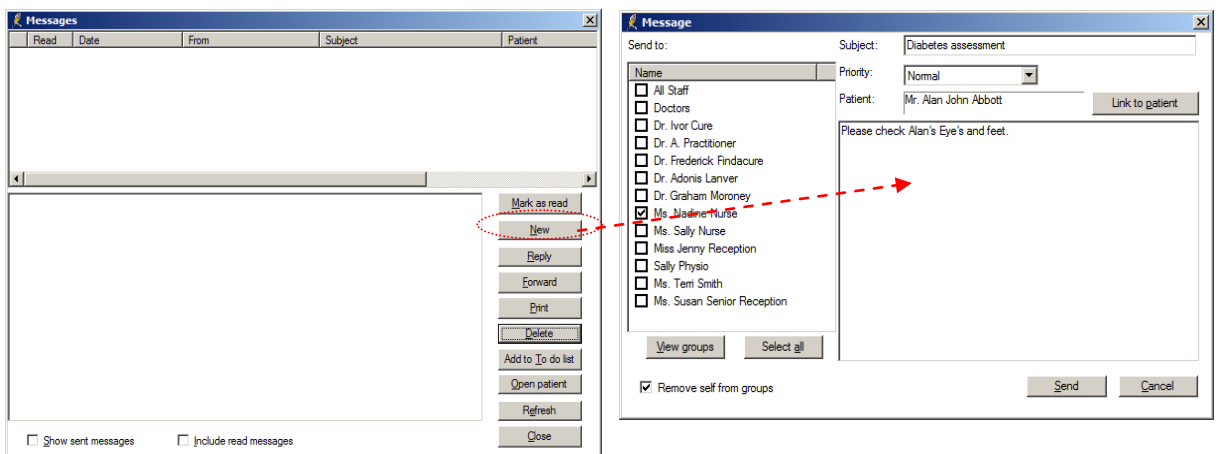
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BP

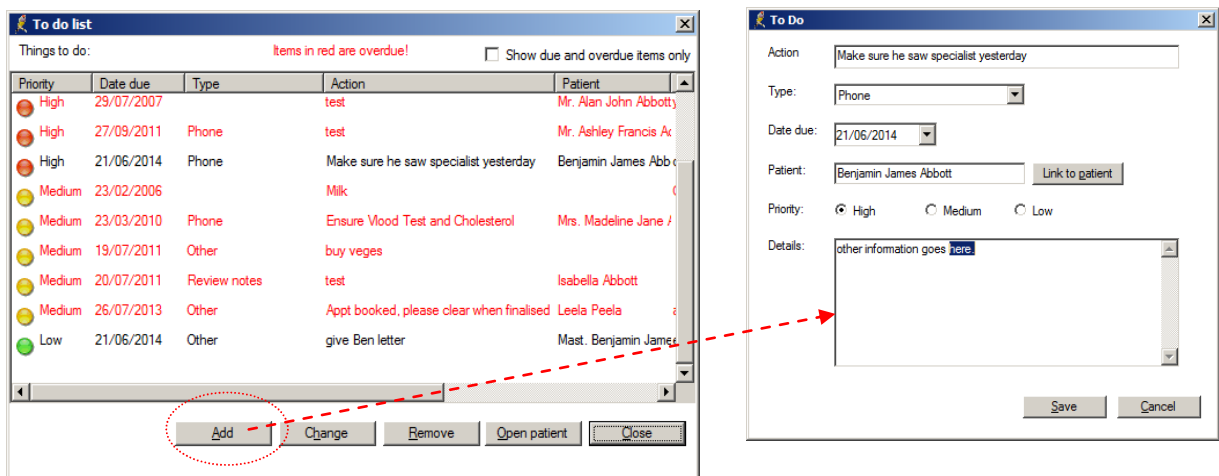
Many practices run an instant messaging program like *Pink Notes*, but it's worth remembering that Best Practice has its own messaging and reminder utilities.

They are as follows:

1) **Messages** Best Practice has a built in Messaging system that is accessible from the Utilities menu in the main screen and the patient record, also using the F8 key. You can send messages to individuals or groups of people that have been set up under Setup... Configuration... Messages. You can also associate a message with a patient, and if this is the case the message will be saved in Today's notes as a Non Visit.



2) **To Do List** - This is accessed from the Utilities menu in both the main screen and the patient record, also using the F6 key. It can be used for personal non-clinical reminders, or it can be linked to a patient. Entries on this list can be categorised by degree of urgency. Items on this list are only visible to the user that created them, and are not immediately visible within the patient record.



You can adjust where and when these messages and *To Do* notifications are checked on an individual basis under *Setup... Preferences*

3) **Daily Message** - This is configured from the Utilities... Daily Message menu, and is a simple line of text that is displayed at the top of the Appointment Book screen on the appropriate day. You can create messages in advance of the actual display date.