

Shared maternity care

NEWSLETTER FROM THE GP LIAISON UNIT



the women's
the royal women's hospital

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VOLUME 01

Quality of Care Report: Your Care, Our Community

The Women's 2008 Quality of Care Report *Your Care, Our Community* has been published. The aim of the report is to provide the community with relevant information so that they are more fully informed about our clinical performance, processes and systems that we have in place to constantly improve the quality and safety of care. The 2008 report summarises key clinical and other activities including the move of the hospital and reflects both clinical and consumer issues. There are over 70 contributors to the report.

As well as managing the move of the hospital to Parkville and increased maternity demand, several substantial areas of improvement were made at the Women's particularly relating to improved multidisciplinary care including:

- Changes to the neonatal model of care including multidisciplinary teams, improved continuity and consistency of care and family centred care
- Changes to maternity Team Care including multidisciplinary teams and new team structures which provide a better structure for continuity of care
- Incorporation of mental health professionals, Women's Social Support Services, physiotherapy, dietetics into multidisciplinary teams with better identification of women's psychological needs
- Improved physical design of many areas of the new hospital

If you would like a copy of the report for your practice please email dorina.heng@thewomens.org.au. We will be happy to send you a copy and would be particularly pleased if you made it available to women in your waiting room. You can also get the report from our website at www.thewomens.org.au. We welcome feedback about the report. Please send feedback to Mary Draper on (03) 8345 2039 mary.draper@thewomens.org.au or Les Reti on 903) 8345 2204 les.reti@thewomens.org.au.

Female Genital Mutilation (FGM)

In April 2009 the Women's is sponsoring Comfort Momoh, an international expert in the female genital mutilation to deliver a series of lectures in Melbourne on care for women affected by this practice.

FGM is practiced in some communities in Africa, the Middle East and Asia. As the number of migrant and refugee women from these countries increases it is important that General Practitioners are aware of the practice and understand its affects on women's health and human rights.

The World Health Organisation defines FGM as:

all procedures involving partial or total removal of the female external genitalia or other injury to the female genital organs whether for cultural or other non-therapeutic reasons

The different forms of FGM have been classified into four types:

1. Excision of the pupice, with or without excision of part of the clitoris
2. Excision of the clirois with partial or total excision of the labia minora
3. Excision of part or all of the external genitalia and stitching/narrowing of the vaginal opening
4. Unclassified: includes any other procedure that falls under the WHO definition given above

The most common type of FGM is type 2 excision of the clitoris and labia minora. The most extreme forms is type 3 which is more prevalent in the Horn of Africa.

The majority of women and girls who have experienced FGM lived in one of 28 countries in Africa and Western Asia. It is usually practiced on girls aged between 0 and 15.

There are no known health benefits associated with FGM. General practitioners are most likely to see women who experienced FGM as a child and are affected by its long term health consequences. The list includes pain, infections, reproductive tract and sexually transmitted infections including HIV, keloid, painful sex

and quality of sec life, birth complications, risks to the baby, psychological consequences, urinary and menstrual problems and infertility.

In Victoria, efforts to eliminate FGM focus on legislation and community development. Amendments to the Crimes Act 1958 made the practice of FGM a criminal offence and a child protection matter. A person who performs FGM is guilty of an offence irrespective of whether the victim or a parent or guardian of the victim consents to the practice. A person who takes a child from the state or arranges for a child to be taken from the state with the intention of having the child subjected to FGM will be guilty of an offence.

The Family and Reproductive Rights Education Program (FARREP) has specialist workers in women's health services across Victoria. The program aims to strengthen knowledge and support changes to community attitudes about the practice, enable timely and accessible sexual and reproductive health services and build capacity in mainstream and specialist sexual and reproductive health services.

appropriate arrange an appointment for her and she will present to the appointment with her GP referral.

For privacy reasons we do not confirm appointments via third parties or contact women or make appointments on the basis of faxed referrals. Please only mail or fax referral letters after prior consultation with PAS or after confirmation that an appointment has been made or you may give your referral letter to the woman to bring with her when she attends for her appointment.

Limited 'drop in' service

It is not possible to see all women who present without an appointment. Dropping in will not expedite medical appointments for assessment or procedures although emergency care will of course be provided. Therefore we ask you to encourage women to call PAS for an appointment rather than presenting without an appointment especially if they have a considerable distance to travel.

You are welcome to call PAS to discuss any queries or your referral.

Health Professional's line: (03) 8345 3061

PAS Manager: (03) 8345 3059

Public Line: (03) 8345 3063

Fax: (03) 8345 3099

Pregnancy Advisory Service

The Women's Pregnancy Advisory Service (PAS) supports women dealing with unplanned and/or unwanted pregnancy and offers access to all pregnancy options including termination of pregnancy.

Please note the following regarding referrals to PAS:

Appointments cannot be made for women on the basis of faxed referrals only.

As the Women's must prioritise access for all women with medical complications, access difficulties or other barriers to this service, we ask GPS to please first consider if a woman is able to access non-hospital services close to home or in the private sector and, if so, encourage her to do so.

We welcome your assessment, opinion and recommendation with respect to patients. However, as with all medical procedures, women seeking pregnancy termination must also undergo medical assessment and have informed consent obtained by our staff if a pregnancy termination is to be performed.

Referral process:

Ideally a woman will make direct contact with PAS by telephone and we will make an assessment and if

Hospital Services Database (HSD)

The HSD is the DHS database of GPS that many hospitals (including the Women's) use in order to autofax and post discharge summaries. If your details are not on HSD or are incorrect it is likely you are missing out on discharge summaries. To check or update your practice details on HSD email hsd.admin@data.com.au or phone (03) 9320 9070

The Women's Clinical Practice Guidelines

The Women's has a number of great clinical practice guidelines on its website that may be of use to GPs. These guidelines cover a broad range of women's health, maternity and neonatal topics. A few of the many included are CGPs on implanon, vulval disorders, management of Chlamydia, management of ectopic pregnancy, nausea and vomiting in pregnancy, gestational diabetes and Group B Strep colonisation in pregnancy. They can be found on the Women's website at www.thewomens.org.au under Health Professionals.

GPs wanted: Women's Emergency Care

The Women's is looking for suitably experienced general practitioners interested in Women's Health to work regular sessions in our Emergency Department. Salary is determined by level of experience and complies with the career medical officer award. Anyone interested can contact Dr Michelle van den Driesen or Dr Viv Ainsworth on (03) 8345 3647 or email viv.ainsworth@thewomens.org.au