

Section One: Primary Options information

Primary Options Programme Northland (POPN) is a service allowing doctors to access investigations, care, or treatment for their patient as an alternative to an acute hospital referral where the patient can be safely managed in the community. It is a solution offered by Primary Care to manage the acute demand for beds in the Northland District Health Board region. A range of community diagnostic, therapeutic and logistical services are provided at no cost to the patient (the initial consult is paid for by the patient).

Five of the most common conditions are included in the manual with guidelines for treatment. These are: cellulitis, suspected DVT, pneumonia, early discharge and dehydration. IV Zoledronate administration is also covered. Patients with these conditions, who take up the option of being cared for in primary care, will be expected to be managed according to the best practice guideline provided in this manual, as far as practicable.

Many other conditions can be managed under the POPN criteria, these include e.g. renal colic and abdominal pain.

Additionally, other patients who meet the POPN criteria and who could benefit from accessing the available services will also be accepted onto the programme.

These vary by locality but can include:

- Diagnostic procedures, for example x-ray and ultrasound
- GP and practice nurse home visiting
- Follow up and return visits to general practice
- Intravenous therapy
- Home help and equipment hire
- Transport to and from primary care locations
- Rest home care (dinner, bed and breakfast).

Primary Options is flexible and easy to use. A completed referral form is required to be sent electronically or by fax to the coordinator for services, and a phone call is required to request external services(e.g. organising radiology or rest home).

Primary Options coordination is currently available between the hours of 0830 – 1700, Monday to Friday (excluding public holidays).

Rationale for Primary Options Programme Northland

The Primary Options Programme (POPN) recognises that people may often be admitted to hospital because of financial and/or barriers to gaining access to services in the community. Moreover, POPN recognises the unequal burden of diseases faced by Maori.

Therefore POPN's purpose is to:

- Ensure that the programme is offered equitably to Maori and non Maori
- Enable primary care teams to access community based services offering alternatives to hospital admission
- Build knowledge about service options, including optimum skill mixes, client/whanau focus and cost effectiveness
- Identify, and where appropriate, address communication and service gaps that contribute to hospital admissions
- Encourage general practice support for reducing hospital admissions
- Support culture and practice changes required to achieve the goals of reducing the level of acute admission and achieving integrated service
- Support evidence based practice

Internationally health services are struggling with increasing Emergency Department presentations and hospitalisations and this trend includes Whangarei Hospital.

The increases are driven by the aging population and the increase in chronic disease.

The impact of these increases are that the system becomes 'backlogged', especially the Emergency Department, and there is evidence that the longer older people stay in Emergency Department the more at risk of complications they are, just as a hospital admission also increases these risks.

Research also shows that many, but not all, people prefer to be able to stay in their own home if they can safely do so.

To cope with these increases programmes are being developed across the health system to reduce unnecessary hospitalisations.

Section 1: The service

The criteria for a patient to be eligible for primary options are:

- That the patient would otherwise be referred to the hospital for management
- That the patient consents to be managed through Primary Options
- That the patient can be safely managed in the community
- That the expected duration of the event is 3-5 days (approval from the coordinator should be obtained for treatment requiring more than 3 days)
- That the patient can be managed within a budget of \$400.00 (ultrasound additional)

To be eligible for POPN funding, where patients have the key conditions (cellulitis, pneumonia, asthma, suspected DVT and dehydration) they are expected to be managed according to the best practice pathway included in this manual, acknowledging that these are guidelines and clinical judgment remains paramount.

If in doubt please check with the coordinator.

The POPN services that are funded are:

- **GP or nurse consultations**
- **Nurse observation**
- **IV therapy – either antibiotics or fluid replacement**
- **Private x-ray or scan**
- **Rest home stay**
- **Home support**
- **Equipment Hire services**
- **Transport support**

Services can be provided by either the practice team or by external services. External services are arranged by the POPN coordinator, by phoning 0800 PRIMARYOPS (0800 774 627).

Additionally there will be an opportunity for other flexible solutions such as short term cell phone provision to be provided in consultation with the coordinator.

POPN has a clinical governance group and a clinical director who can provide additional advice about the use of this programme.

The patient can be referred to Primary Options electronically or by fax.

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Referral process algorithm

