

Welcome to Project ECHO Population Health Network: Reproductive Health Series

Series 1: Session 8

“Primary care models for Early Medical Abortion”



Supporting general practice, commissioning health services into gaps and driving service integration.

phn
WESTERN VICTORIA
An Australian Government Initiative

Acknowledgement of Countries



I'd like to begin by acknowledging the Traditional Owners and custodians of the unceded lands and waterways

- the Wadda Wurrung, Gulidjan, Gadubanud, Keeray Wurrung, Peek Wurrung, Gunditjmara, Djab Wurrung, Wotjobaluk, Dja Dja Wurrung, Jadawadjarli, Wergaia, Jupagalk and Jaadwa peoples.

We recognise their diversity, resilience, and the ongoing place that First Peoples hold in our communities. We pay our respects to the Elders, both past and present and commit to working together in the spirit of mutual understanding, respect and reconciliation. We support selfdetermination for First Nations Peoples and organisations.



Ask the question. Do you identify as Aboriginal or Torres Strait Islander?

What problem are we trying to solve?

Women and people with uteruses who experience unintended and unwanted pregnancies may want to exercise their rights to access early medical abortion, but they face challenges and barriers:

- What barriers do they face
- What barriers do we face as providers and across the system
- What can be done to support consumers along the care continuum

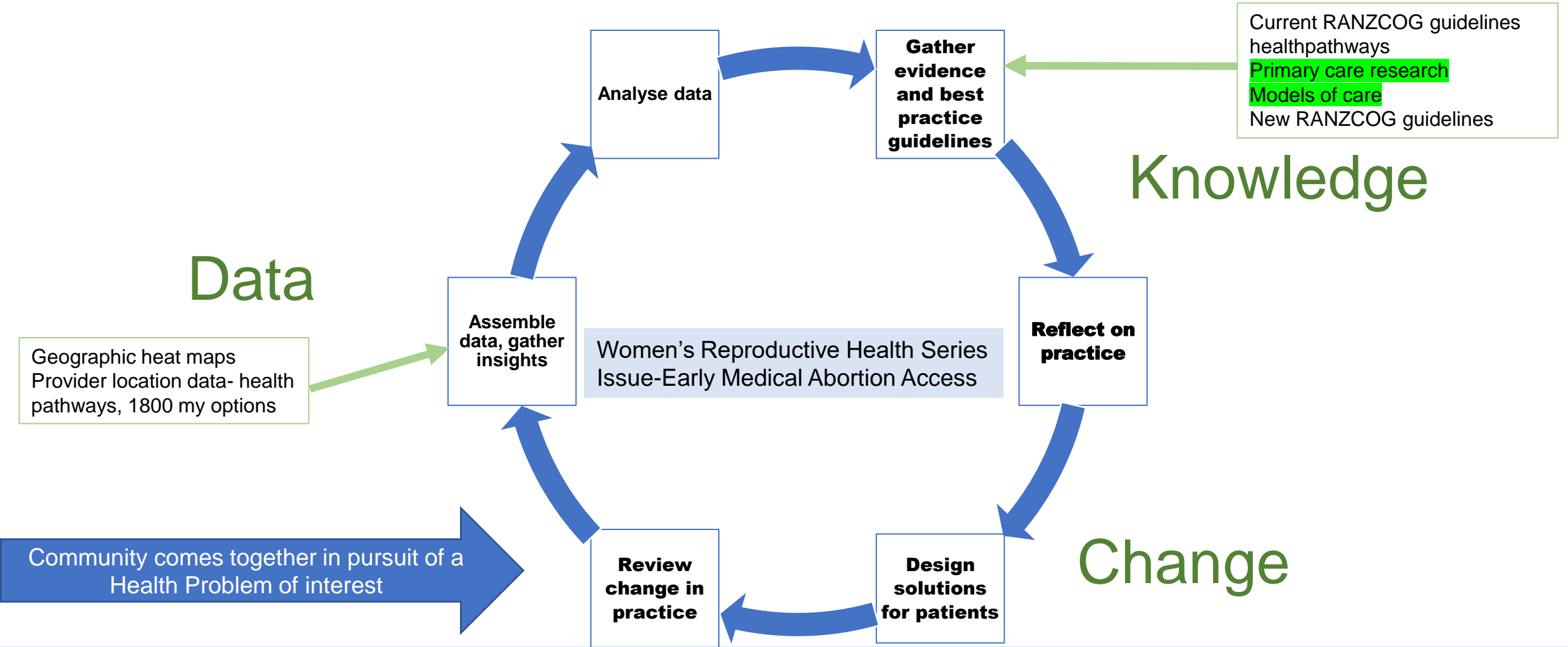
Session 8 Learning outcomes

- Discuss early medical abortion in regional Victoria from a Primary care perspective
- Describe the current care pathways and the challenges that consumers and clinicians face in accessing/providing best practice care
- Locate the issues that providers may face in developing new models of care in the mainstream primary care setting and describe potential solutions that may overcome these challenges
- Participate in a community of practice to discuss health systems challenges

Don't forget to fill out our session evaluation at the end of the session.



Understanding Early Medical Abortion Access using a Learning Health Systems approach



Community of Learning and Practice – Ground Rules

1. We ensure that all conversations about service access are framed up in relation to the consumer journey or the patient pathway
2. That our conversations maintain a focus on the patients needs and rights to access this intervention
3. That we commit to maintain the privacy of members of our community of practice by attributing this discussion to the group and not to individual members of the group (and as such we won't be answering questions in the didactic as this part of the recording will be shared broadly)
4. That we will work together to seek that tricky balance between the subjective (socio-cultural) and objective (scientific and technical) nature of the work



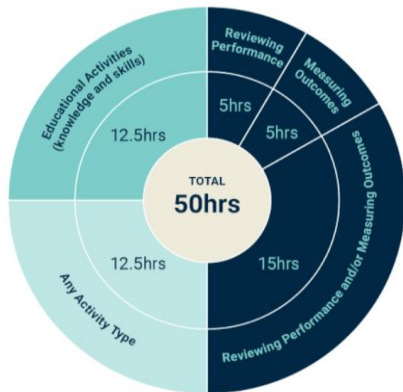
Etiquette/Zoom use

- Clearly name yourself with first name and surname.
- Introduce yourself / Role / Region / Organisation in "chat"
- Use chat to ask questions
- Please remain on 'mute' except when speaking
- **Please turn video on**
- In-session Evaluation at the end



- These sessions will be recorded for ongoing training and quality improvement purposes.
- The didactic presentations ONLY will be disseminated on our learning channel.
- Discussions will be de-identified where used for QI or research purposes.
- Please let us know if you would not like your comments recorded.

Minimum requirements



WVPHN Your CPD Centre

ECHO is a Peer Group Learning Activity
 EA- Passive activity
 RP- Interactive activity
 MO- QI activity supported by ECHO



An Australian Government initiative

Agenda– Reproductive Health Series 1: Session 8

“Primary care models for Early Medical Abortion”

Facilitator: Dr Bianca Forrester, Clinical Lead of Innovation and Learning, Western Victoria Primary Health Network

Naomi White, Senior Manager Regional Partnerships and Public Health – Grampians, Western Victoria Primary Health Network

- Health Alerts and New announcements

Professor Danielle Mazza AM

MD, MBBS, FRACGP, DRANZCOG, Grad Dip Women's Health, GAICD, CF

Director, SPHERE NHMRC Centre of Research Excellence in Women's Sexual and Reproductive Health in Primary Care <https://www.spherecre.org/>

- *Early Medical Abortion: in Primary care*

Panelists and SMEs for this series: Juliana Betts (Public Health Reg GPHU) , Shannon Hill (Womens Health Promotion), Alex Bonner (Gynaecology, Barwon Health), Kate Graham (GP Clinical Advisor WVPHN)

Case presentation: Dr Hannah Walker, UFS Medical Centre

Network Co-ordinator: Jemma Missbach, Western Victoria Primary Health Network



New Announcements

Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease (RHD) are newly notifiable conditions in Victoria

Join us for an Education Webinar on Wednesday 6 September

The Department of Health, the Western Public Health Unit (WPHU) and South East Public Health Unit (SEPHU) invite you to an educational webinar and Q&A session focusing on acute rheumatic fever (ARF) and rheumatic heart disease (RHD) covering

- clinical aspects;
- care pathways and resources available to clinicians; and
- an overview of the Victorian public health response.

The webinar is intended for primary care providers (including GPs, nurse practitioners and Aboriginal health workers), cardiologists, paediatricians, urgent and emergency care providers, community workers and any others who may provide care or services to people affected by ARF or RHD.

ARF and RHD have been made notifiable conditions in Victoria as of 31 July 2023 in an effort to improve outcomes of these preventable conditions which disproportionately affect certain populations in Victoria, particularly Aboriginal and Torres Strait Islander and Pacific Islander people.



Department
of Health



Date

Wednesday 6
September 2023

Time

6pm – 7.15pm (AEST)

Webinar link

<https://westernhealth.zoom.us/j/91081547332?pwd=VUFaaytwK0hjQXRQU0NlYWhGZ3FFQT09>

Passcode

868627



COVID Vaccinations

Public Health Emergency Order #8 ended August 21st.

- Registered nurses, pharmacists, Aboriginal and Torres Strait Islander health workers are required to complete immunizer training to continue to deliver COVID vaccine without a medical order
- This is in line with the Drug, Poisons and Controlled Substances Act 1981
- These groups can find further information on training to become immunizers through [Immunisers in Victoria | health.vic.gov.au](https://www.health.vic.gov.au/immunisers-in-victoria)
- Those with immunizer training can continue to provide vaccines in accordance with usual policy

Prof Mazza



Case Presentation: 16 YO Requesting MTOP

Situation: Mother contacted Dr requesting MTOP for her 16 year old daughter

Background: USS confirmed a live pregnancy of 6 weeks 6 days gestation.

No bloods had been done.

16 year old had been on the cocp, but had had vomiting so likely pill failure

Assessment: Time sensitive issue. Presents on 29th December

No other options available - hospital clinic closed for 2 weeks over the Christmas period, No other service had capacity

Did not want a surgical TOP

Pressure to act quickly by the GP to do the 'right thing' but based on a background of a service still being under development.

Appointment given between morning and afternoon clinics to discuss further.

Emotions high.

Recommendation: After some initial technical issues Ms 2 Step prescribed. Lots of education provided. Pharmacist dispensed

Plan to repeat serum HCG in 2 weeks with appointment the following day.

DNA x2 all follow up arranged. Patient had repeat HCG eventually on the 24/01.

Questions to the group

We know things get easier the more often we do it, but I don't think GPs want to become side-tracked or be taken away from their regular patients all the time

- *How can we practically offer a service that inevitably takes time, yet time is not our friend?*

Despite appropriate education about the process the patient DNA'd several times

- *Follow up for these patients can be poor, GP gratitude is weak, where does the responsibility lie?*

A lot of time outside the consult was put into establishing the appropriate pathways for patients and was tested with this initial patient. There was also non-clinical time spent that might be repeated each time. Only billed a bulk bill level D

- *How could we appropriately bill for our time as a practice?*



Federal government urged to make telehealth services for abortions permanent

triple j Hack / By Shalailah Medhora

Posted Fri 18 Aug 2023 at 2:37pm

Key points:

- Changes providing easier access to telehealth reproductive care are due to expire in December
- The health minister has commissioned a wideranging review of telehealth services
- An expert says 30pc to 50pc of women have no local access to medical abortion services



HealthPathways Reproductive Health

CLINICAL

[Termination of Pregnancy \(TOP\)](#)

[Follow-up for Termination of Pregnancy \(TOP\)](#)

[Contraception and Sterilisation](#)

[Contraceptive Implant](#)

[Intrauterine System or Device \(IUD\)](#)

[Contraceptive Injection](#)

[Persistent Pelvic Pain](#)

[Endometriosis](#)

[Cervical Screening](#)

[Cervical Cancer](#)

[Cervical Polyps](#)

REFERRAL

[colposcopy](#)

[non-acute gynaecology assessment](#)

[gynaecology advice](#)

[acute gynaecology assessment](#)

[Referral for termination of Pregnancy](#)

CONTACT

•New to HealthPathways?

Visit <https://westvic.communityhealthpathways.org/> and select 'register now'

•Use the "send feedback" button on the website or email: healthpathways@westvicphn.com.au

•The HealthPathways team can arrange for passwords to be bypassed if you provide your practice IP address.

WHO CAN USE HEALTHPATHWAYS?

•GPs and Health Professionals within the Western Victoria region can access HealthPathways. The portal is not designed to be used by the general public and can only be accessed by using a secure login and password. There is no cost to access.

Session Evaluation

- Please take the time to evaluate this **session**
- [Link](#) pasted into the chat

Upcoming Sessions

- **Thursdays @ 7.30am**
- Weekly til 7 September



Clinical training, support and resources are available now:

[The Royal Women's Hospital Sexual & Reproductive Health Clinical Champion Network](#) training, resources, clinical guidelines

[Victorian Clinical Network for Abortion and Contraception](#) quarterly online meetings

[AusCAPPS Community of Practice](#) open to Nurses, Pharmacists, GPs – practice support, training, peer networking

[Microcredential: Abortion, Contraception and Sexual Health: Supporting Client Access](#) free short course for anyone needing a good base knowledge

[CERSH: Centre of Research Excellence in Rural Sexual Health](#) events, resources, training

Rural women often have...

LONG DISTANCES TO TRAVEL FOR SERVICES

HEALTH SERVICES WITH LIMITED RESOURCES OR TRAINING IN SEXUAL + REPRODUCTIVE HEALTH

LIMITED AVAILABILITY AND CHOICE OF SERVICES

CONCERNS ABOUT PRIVACY AND STIGMA IN SMALL TOWNS

my options

Please send us your cases



If you have a case, you would like to discuss with the group:

- **Case template** [here](#)
- Email projectechocovid19@westvicphn.com.au
- Use the comment box in the evaluation form