



Prescriber Newsletter 5¹

November 2012

Welcome prescribers to this rather large November edition of the SWEP prescriber newsletter. In this edition you'll find a link to a survey on trialing of equipment, advice to orthotics prescribers, updates on the reissue equipment, and much more.

What's New?

Equipment news and warnings

We have not received any warnings since our last newsletter – please let us know if you hear of any and we will send notification to all prescribers.

SWEP training day

SWEP will be closed on Wednesday the **14th of November 2012** to allow all staff to complete 1 day training.

We apologise for any inconvenience this may cause but ask for your tolerance during this closure.

As per the SWEP 'after hours', a message and phone number can be left and your call will be returned the next day. Any emergency repair callers on this day will be able to access support by calling the SWEP number and waiting to be redirected to an emergency repairs phone number.

Reports and Education

Amber to Red

SWEP is gauging interest from prescribers on education sessions targeted to advancing prescribers wishing to move from Amber to Red. We have received feedback that many education sessions offered are relatively low level and that there is a need for higher level session.

We will consider developing higher level education sessions through our Clinical Advisory team should we receive enough interest from the field. Please let me know if you are interested, and in which categories.

¹ If you would like to contribute to the newsletter, please Email me at wendyh@bhs.org.au

SWEP Processes and funding streams

Client Eligibility Forms

Some prescribers are signing these forms on behalf of their clients. Unless the prescriber has power of attorney, this isn't allowed and delays are being experienced because we have to send them back to be signed properly. Please make sure your client or their authorized agent signs the form before you send it in to SWEP.

Application management for waitlisted equipment

SWEP have adopted the following process to confirm that items requested in older waitlisted applications are still required prior to supply.

1. Waitlisted Applications <4 months old. Client and prescriber will not be contacted to confirm currency of application.
2. Waitlisted Applications between 4 and 6 months old - SWEP will contact client to check item is still required.
3. Waitlisted Applications >6 months, clients will be contacted to confirm item still required and prescribers will also be contacted to ensure clients' needs are unchanged

Average wait time communique

DHS and SWEP are now able to report average wait times for all programs for applications that are assessed as complete and are waitlisted. The intention is to keep clients, their families and carers, and prescribers informed of expected average wait times and this will be closely monitored and updated monthly on the website.

Please follow this link for the latest communique regarding average waiting times.

<http://swep.bhs.org.au/node/495> . Remember these are AVERAGE wait times, and there will always be those who wait longer and those who receive equipment straight away based on priority of need.

Top up Fund for Children (TFC)

This new fund is now fully operational – the following link takes you to the SWEP website TFC page which should give you all the information you need to assist you in your application <http://swep.bhs.org.au/node/468>. Currently all prescriptions for items over a specified amount are being reviewed by our Clinical Advisors to monitor pricing trends and ensure all considerations are being taken into account. This is not to question our Red prescribers, but keep SWEP informed of trends and expand our evidence base. All Red prescriber scripts have received approval to date.

Orthotics

There have been questions from the field about the processes and time-lines for subsidies for orthotics. Here are a few tips to make sure your script is appropriately managed at SWEP.

1. Always attach a quote to the script. There must be a separation between you the prescriber and you the supplier.
2. Orthotics are subsidised to support people with long term disabilities to enhance independence, facilitate community participation and support families and carers in their role. Any orthosis which provides these outcomes, including postural support and facilitation of ADL's falls into these categories.
3. SWEP are providing subsidies in line with the A&EP guidelines (i.e. items are not funded if they are associated with medical treatment or surgical interventions or are for short term use).
4. To enhance appropriate prioritisation of need we need both the implications of non-provision (the consequence) and the likelihood of the consequence clearly articulated. In that way SWEP Administration Officers can accurately triage – some examples of information required for children might include:
 - *“xxx's current AFO no longer fits and he/she is unable to ambulate safely without falling if he doesn't have a replacement AFO”* rather than *“risk of falls”* in the safety section
 - *“xxx is currently unable to participate in toilet training / participate in outdoor kinder activities requiring standing / walking / climbing etc and this this affecting daily personal ADL's, access to play activities/socialisation etc”*. – in the independence section
 - *“xxx's mother and kinder teacher have noticed that xxx is becoming withdrawn/upset/angry by his inability to participate in daily activities”* &/or *“high risk of deterioration in physical function”* in the health maintenance section

These examples can be extrapolated for adults in addition to the examples already in the Priority of Access Guidelines:

5. We recognise that sometimes clients arrive at clinic having outgrown or worn out their orthotics / shoes or present with changed needs. The need for urgent replacement should be captured in the information in the implications of non-provision section of scripts and these replacements should typically be funded immediately. As we are not able to retrospectively fund items or repairs, prescribers still need to submit these urgent replacement applications to ensure the application can be assessed, budget availability confirmed and confirmation of order made.

6. In situations where an urgent or timely repair is required and the client has arrived at the clinic and a repair is needed on the spot, prescribers may make a phone request for approval and a SWEP Purchase Order number will be given over the phone. Do NOT proceed without this order number.
7. Prescribers are reporting that they have clients who indicate that they are entitled to footwear each 12 months. While clients can access the footwear subsidy again after a 12 month period, the intention is that this subsidy should only be accessed when replacement is needed / clinically indicated. In this way we are fairly and equitably using the budget available for those most in need.

Equipment trial survey

SWEP is interested in your current processes related to trialing of equipment – if you work in an area where equipment should be trialed prior to prescription please take the time to complete our survey which can be accessed on <http://www.surveymonkey.com/s/ZXPH563>

Updates

Reissue Database

Further to our communique about the database and delays in delivery of items Chemtronics have made further changes to facilitate reissue. In future equipment will be checked and refurbished prior to loading onto database with status of 'ready to go' rather than 'collected pending assessment'. This will be more clearly articulated on Chemtronics reissue home page soon. Further actions are:

- additional resources have been allocated to the task including a dedicated van for re-issue & collections and more staff have joined the Chemtronics team
- further viability checks being undertaken to ensure equipment on the database is ready for reissue.
- access to Chemtronics on-site trial and collection
- SWEP reissue blitzes are happening every week to facilitate reissue
- Equipment provided for reissue should be "as new"
- Obsolete equipment / models which cannot be maintained and for which parts are no longer available are routinely being removed from the database.

As with ALL secure access databases, please DO NOT give your prescriber login to anyone else. All transactions undertaken using your SWEP prescriber number are linked back to you.

To assist clients in receiving equipment in a timely way, please remember:

- To check the status of item to ensure it is 'available' rather than 'pending re assessment' before reservation.
- Before adding an item to your cart, check the specifications tab to ensure the item has the features, sizing etc that you need for your client
- To include all the relevant details for any minor adjustments or additions required to the item you have selected so these can be identified and made in a timely way by Chemtronics

That reservation only lasts 21 days, otherwise the reserved item will be released for other prescribers to reserve for their clients

- You can only reserve one item per client (within an equipment category)

We continue to welcome your feedback about options to improve uptake of reissue, as well as letting us know of any good or bad news stories in this area.

Low Cost Items:

Although these items were cleared from the waiting list at the end of the financial year due to the one-off HACC funding, the volume of applications for these items continues to grow, and SWEP has had to return to prioritising and wait listing some low cost items.

Prescribers are reminded quotes are not required if the nominated supplier has lodged a catalogue and price list with SWEP. For these items the following information is still required in order to process your scripts:

1. Pick list item
2. Product name/description
3. Product code
4. Supplier
5. Size/dimensions
..... and if you have this information at hand
6. Cost, including delivery costs

What client information do we need??

Some prescribers have returned to the habit of providing SWEP with a great deal of patient information in the "Clinical Justification" section of scripts. Please note that only basic information is required in that section, and that further elaboration is only needed if a Clinical Advisor is being sought. Clinical Governance related to your client's assessment resides with you, and client details are neither necessary nor appropriate to share with SWEP.

Conversely, the area which SWEP uses most to clarify priority of access to funding or equipment is usually the most scant. This is the "Implications of non-provision" section, and it needs to have contained in it the consequence of non-provision and the relative likelihood (ie an approximate time-frame). If a horrific outcome (such as pressure areas, hospitalization, or attempts of suicide) is likely to occur in a short time-frame if the equipment is not supplied, we will treat that application as urgent. Please review the Priority of Access Guidelines (<http://swep.bhs.org.au/node/429>) to assist you in populating this important element of your script.

Lodged an application and haven't heard within 10 days??

SWEP must respond to you within 10 business days of receiving your prescription, so if you haven't heard - please make contact so we can ensure it has been received.

General News

SWEP welcomes back Simone Rosewall after her maternity leave, and we are pleased to have her take over procurement for SWEP. Simone's first task is to review the high volume low cost items to ensure clients are getting the best value for money for these items.

Wendy Hubbard
Chief Allied Health Officer – SWEP