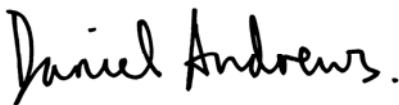


MINISTER'S FOREWORD

I am very pleased to report on NURSE-ON-CALL's two years of outstanding achievement in Victoria. Since its launch to the public on 4 June 2006, NURSE-ON-CALL has received over 790,227 calls from Victorians. This is an average of approximately 1,078 calls per day or 1 call every 80 seconds.

In the last two years, over one in five callers who had planned to ring an ambulance or go to the hospital emergency department were advised they could manage their condition at home. However, one in ten callers did not realise the severity of their illness and while they had intended to care for themselves, they actually required emergency treatment.

I commend McKesson Asia-Pacific Pty Ltd and their dedicated nurses who provide NURSE-ON-CALL, as well as the many stakeholders for their support. I am proud to announce the achievements of NURSE-ON-CALL, some of which are featured in this newsletter.

A handwritten signature in black ink that reads "Daniel Andrews".

Hon Daniel Andrews, MP
Minister for Health

DEBBIE AND SON TRAVIS EXPERIENCE WITH NURSE-ON-CALL



Figure 1: Debbie and her son Travis

It was 3 am on a cold winter's night in July. Five year old Travis' temperature was high and he couldn't stop coughing.

His mother, Debbie was worried - Travis had been sick for two and a half days and was now having some trouble breathing.

"I was in two minds whether to keep him at home and see how he goes or take him to the hospital in the freezing cold," Debbie said.

The registered nurse from NURSE-ON-CALL asked Debbie a series of questions about Travis' symptoms and other issues relating to his health, to determine how ill he was. The nurse then provided immediate, expert health advice.

"I felt reassured that what I was doing was right and I knew that if had any worries I could ring back," Debbie said.

"After the wonderful advice and support of the nurse who answered the phone, I'm glad that I didn't rush him off in the freezing cold to the hospital and instead took her advice on what I could do to help him through the night to sleep, ease his coughing and to take him to the doctor in the morning," explained Debbie, "My son and I felt and slept a lot better after the phone call."

Debbie took Travis to their local doctor the next morning and he was diagnosed with bronchitis and prescribed antibiotics. Travis improved rapidly and was able to sleep through that night – the first time in a few nights.

NURSE-ON-CALL CELEBRATES ITS 2nd BIRTHDAY!

Premier John Brumby visited the NURSE-ON-CALL Service with Health Minister Daniel Andrews to mark its second birthday on Monday, 2 June 2008.

“The Brumby Government is taking action to ensure all Victorians have access to quality health services, no matter where they live,” the Premier said.

“NURSE-ON-CALL provides 24-hour advice and information and is a trusted resource for Victorian families, helping Victorians decide if they need to attend hospital or a doctor straight away, whether their illness or condition could be treated by a GP the next day, or if they can manage it themselves.”



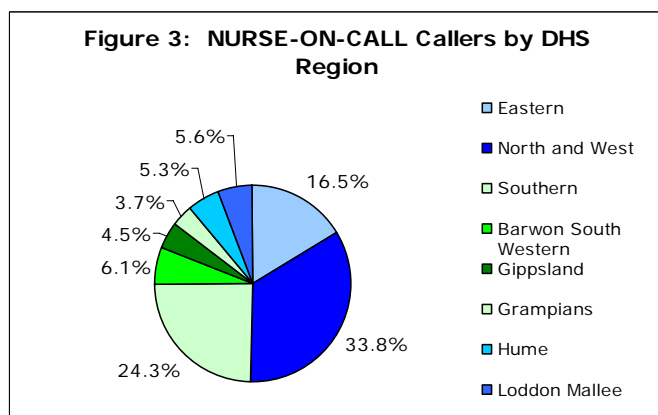
Figure 2: (L-R) Richard Brimble (McKesson), Daniel Andrews (Minister for Health), John Brumby (Premier), Jane Davidson and Katherine Wilson (NURSE-ON-CALL Nurses).

The Minister for Health, Mr Andrews, said NURSE-ON-CALL had also helped save precious hospital resources, with hospitals diverting more than 88,000 calls to the service over the first 2 years.

“That represents more than 11,800 hours of time – 492 days – that hospital nurses would otherwise have spent speaking to these patients,” he said.

How have Victorians responded to NURSE-ON-CALL?

- Between 1 July 2007 and 30 June 2008 NURSE-ON-CALL answered over 372,169 calls
- Over three-quarters (77%) of calls were received directly from the public; 13% transferred from hospitals and 1% from mobile phones
- Weekends remain the busiest times, with highest call volumes on Sunday evenings.



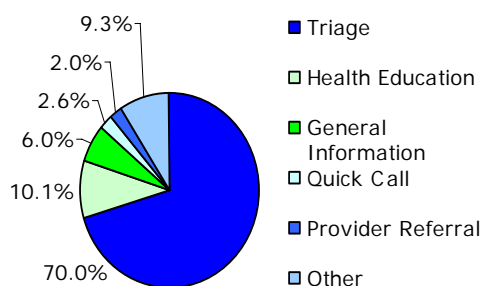
- Women made up 76% of callers, but only 60% of patients
- Women in the 30-34 age group comprised the biggest group of callers (19%)
- The biggest proportion of calls were for patients aged 1-4 years old (24%)
- Reflecting the Victorian population, three quarters of callers (75%) were from metropolitan Victoria and a quarter (25%) were from regional Victoria
- The biggest users were from the North and Western Region (34%) (see Figure 3).

What services did people require when calling NURSE-ON-CALL?

Table 1: Summary by Outcome – Number and % of calls

Outcome	Number	%
Triage	253,374	70.0
General Information	36,437	10.1
Health Education	21,798	6.0
Provider Referral	9,502	2.6
Quick calls (include wrong number, prank, hoax calls)	9,502	2.0
Other (not recorded, admin file, transferred internally, etc)	33,537	9.3

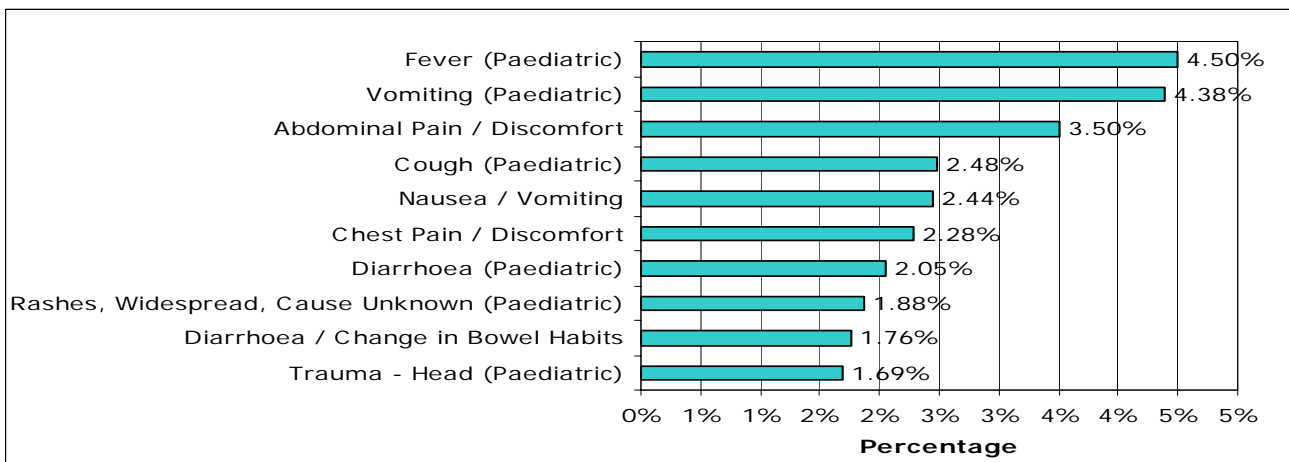
Figure 4: Percentage of calls by Outcome



What advice did callers seek?

The most frequently requested health education topics were: chickenpox (7.13%), fever-children (6.79%) and shingles (3.81%). A summary of the top 10 triage guidelines used is shown in Figure 5.

Figure 5: Top 10 Triage Guidelines Used (July 07 – June 08)

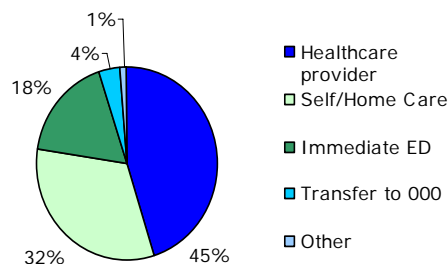


What were the final disposition* of calls to NURSE-ON-CALL?

Table 2: Summary of Final Disposition – Number and % of calls

Final Disposition	Number	%
Healthcare provider	118,233	45.1
Self/home care	84,339	32.1
Attend emergency department immediately	46,811	17.8
Transfer to 000	9,846	3.8
Other (includes Poison Information Centre, provide information or advice only, HACC Hospital and Community Care Transport, etc)	3,167	1.2

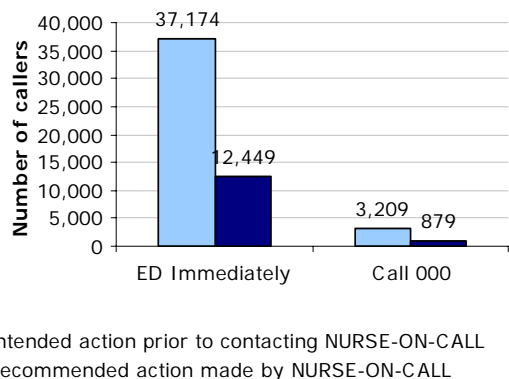
Figure 6: Percentage of calls by Final Disposition



*Disposition refers to the recommendation made by the NURSE-ON-CALL

What did the Callers intend to do and what were they advised by NURSE-ON-CALL?

Figure 7: Callers intended action vs Nurse's recommendation



Approximately 70% of callers were asked what they would have done if they had not rung NURSE-ON-CALL. About 44% of these did not know what to do. In some cases the action that callers intended to take was different to NURSE-ON-CALL's advice. For example, Figure 7 shows that of the 37,174 callers who intended to attend emergency department (ED), only a third (12,448) were advised to attend ED and of the 3,209 who intended to call the ambulance (000), only a quarter (879) were transferred to 000.

However, one in ten callers did not realise the severity of their illness and while they had intended to care for themselves, they were told they needed emergency treatment.

NURSE-ON-CALL quality improvement

NURSE-ON-CALL continuously reviews the service to identify areas for improvement. In 2007/08 such reviews have included a six monthly Customer Satisfaction Survey, a six monthly Mystery Shopping Review and a one-off Compliance Survey. The Compliance Survey looks to identify the level of compliance with advice provided by NURES-ON-CALL, factors influencing callers decisions and the resultant outcomes. Final results from the Compliance Survey are expected in October 2008.

Throughout the second year of operation, there continues to be strong evidence that NURSE-ON-CALL is highly valued by Victorians

- 98.5% of respondents felt their contact with NURSE-ON-CALL was a valuable first step in accessing health assistance and advice
- 99.6% respondents felt that the nurse who managed their call had listened carefully
- 98.4% respondents cited that they were likely to use the NURSE-ON-CALL service again.

NURSE-ON-CALL STAFF PROFILE – Margaret

When Margaret decided she felt like a change in her nursing career, she joined the NURSE-ON-CALL team with McKesson Asia-Pacific. A year on, Margaret is happy she made the change.



“Both my parents were nurses; they met in the Emergency Department at the Royal Melbourne Hospital in 1947 so I grew up hearing great stories about nursing”. Margaret’s career has spanned over 30 years with roles in Emergency Nursing, Nursing Education and Women’s Health, as well as roles in nursing management. She feels her experiences have certainly helped prepare her for her role as a telephone Triage Nurse.

“This role is unique. What I enjoy most is being able to offer reassurance and sensible, clinically sound advice. It’s a rewarding role and challenging in many ways. Performing a triage over the phone is quite difficult, requiring proficient communication skills. Your voice needs to express empathy and professionalism. Your questioning techniques need to be adjusted to gain as clear a picture of the situation, as you would if you were face to face. The guidelines that we use on NURSE-ON-CALL cover almost every conceivable situation. We can then advise the caller of the most appropriate recommendation for the symptoms described at the time of their call.”

Margaret combines her role working on NURSE-ON-CALL with casual shifts in a metropolitan Emergency Department. Margaret is a highly valued member of the Nurse Triage team and recently enjoyed working as a Team Leader, in an acting capacity.

If you would like to find out more about nursing opportunities with NURSE-ON-CALL, please visit www.mckesson.com.au or phone the recruitment hotline on 1300 365 156.

Concluding message

Evidence supports Victorians continue to value highly the NURSE-ON-CALL service as it provides easy access to high quality, reliable and immediate professional advice.

For more information about NURSE-ON-CALL see our website www.health.vic.gov.au/nurseoncall