

DEPARTMENT OF HEALTH,
P.O. BOX 5013,
WELLINGTON.

18 June 1973.

CLINICAL SERVICES LETTER No. 126

TO MEDICAL PRACTITIONERS

Dear Doctor,

VISITING MEDICAL PRACTITIONERS

There are now three visiting medical practitioners.

The visiting practitioner is part of the Head Office staff of the Division of Clinical Services, being directly responsible to the director. Dr H. D. Law is attached to the District Health Office, Auckland, while Dr A. C. D. Parsons and Dr J. S. Phillips are attached to the District Health Office, Wellington.

Doctors and their staff may be interested to know a little more about the functions of the visiting practitioner.

He calls by appointment on doctors in private practice, mainly general practitioners, but also specialists. He invites comments, suggestions, and criticism about the functioning of the Division of Clinical Services, the object being to find out where we are falling short, and to foster good relations between the Department of Health and doctors in practice. He is anxious to know what problems are being encountered, and if there is any way in which we can help. Discussion often ranges freely over matters affecting specialist, general medical, and maternity services, including fees, special incentives for rural practitioners, group practice loans, hospital board health centres, the distribution of doctors, and many other topics. The Drug Tariff also figures prominently in discussions, and as all three visiting practitioners attend the meetings of the Pharmacology and Therapeutics Advisory Committee they have access to the latest information on new drugs, and know the reasons why certain drugs have been rejected, or accepted with restrictions, and so forth.

Every month the visiting practitioner sends the Director of Clinical Services a detailed report incorporating the main points which have emerged during the course of these discussions. These reports are highly confidential, being seen only by the medical staff of the Division of Clinical Services; they do not pass through the records system, but extracts (suitably edited) are passed on to other officers at Head Office who may be immediately concerned with any specific matters raised by doctors. Information derived from these reports is also placed before the Advisory Committees, if appropriate. Urgent matters are taken up at once with the Director of Clinical Services, who is in regular contact with all three visiting practitioners.

It will be seen, therefore, that the annual visit of such a departmental liaison officer, who has himself had long experience in general practice, presents the individual doctor with a golden opportunity to make his voice heard. It is emphasised that what the Division of Clinical Services wants to know is where it is regarded as failing in its purpose. Through these visits and the voluminous and detailed monthly reports put in by these officers, the Director of Clinical Services and his colleagues obtain a unique picture of the state of general practice throughout the country, the climate of thought amongst doctors, and the difficulties and frustrations which are being encountered.

So far as is known, except for a province in Austria which has employed visiting medical practitioners in a similar role for over 20 years, New Zealand is the only country to have the benefit of a system of this nature. (The regional medical officers in the United Kingdom are not comparable, nor are the visiting pharmacists in Australia.)

The visiting practitioner is not involved in disciplinary matters, and because of his own past experience of general practice, a prerequisite for the position, and his access to Head Office, his advice on a great variety of problems is not infrequently sought, and is available at any time.

Yours faithfully,



(A. W. S. Thompson)

Director,



(A. H. Paul)

Deputy Director,

Division of Clinical Services

RING BINDERS FOR PRESCRIBERS' NOTES

Doctors requiring an additional ring binder for these notes should send their requests to the Director, Division of Clinical Services.

NARCOTICS REGULATIONS 1966

The following hospitals have been gazetted under regulation 25A (6) (b) of the Narcotics Regulations 1966 as hospitals at which narcotics may be prescribed, administered, or supplied for the purpose of treating narcotic dependent patients:

Ashburn Hall, Dunedin.

Lake Alice Hospital, Marton.

Whangarei Base Hospital, Whangarei.

HEXACHLOROPHANE

In view of evidence of excessive absorption of hexachlorophane in some patients, particularly infants, and the known toxicity of this chemical, there has been considerable discussion on the need for controls on availability of hexachlorophane.

A recent amendment to the Poisons Regulations 1964, makes all products containing 0.75 percent and over of hexachlorophane available only on a practitioner's prescription. A later amendment will restrict sale of products below this strength but above 0.1 percent, to retail pharmacies. All products containing hexachlorophane intended for use in infants are to carry an appropriate warning label stating that repeated use is only to be on the advice of a medical practitioner.