

Working with Us:

A Guide for Healthcare Professionals



V 2V 0S 2





vvsc@nh.org.au



Victorian Virtual Specialist Consults acknowledges the Traditional Owners of the lands on which we live and work across Victoria. We recognise their continuing connection to land, waters and community, and pay our respects to Aboriginal and Torres Strait Islander peoples, and to Elders past and present.





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Purpose

<u>Victorian Virtual Specialist Consults (VVSC)</u> holds the core values of defragmenting care, building partnerships and centring patient care in the community. Our clinics are designed to support community healthcare practitioners accessing hospital specialist advice in a timely manner. The structure of the clinic was co-designed with GPs in the community and further feedback is always welcome.

Benefit to the Patient

- Faster access to specialist advice co-consults are usually available within 1-4 weeks
- Access from anywhere patient can join from the clinic, bush nursing centre, residential facility or from home
- Less need for outpatient referrals 68% of in-person outpatient referrals are able to be cancelled following a co-consult
- Less delays in care early investigations and management decisions can be made synchronously and collaboratively
- Positive patient experience 99% of patients agree or strongly agree that VVSC was a positive experience



Benefit to the Clinician



and collaborative decisions on diagnosis, investigations and management
Partnership and skill building - health professionals

patients and hospital specialists can make synchronous

Joint decision making - primary care providers,

- Partnership and skill building health professionals can meet and create working relationships which can lead to shared care and patient advocacy
- CPD recognition VVSC consults can be claimed as Reviewing Performance CPD





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Access Models

Case Conference

- Three care providers are present for the consult (the primary care provider may invite the additional care provider, or VVSC can recommend and organise one if required)
- The patient does not have to attend
- Case conferences are typically 20-30 minutes long
- Item numbers 735/739 can be claimed based on time (visit MBS Online for specific criteria)





Co-consult

- Primary care provider, VVSC specialist and patient are present for the consult
- The primary care provider can have the patient in their rooms or have them join virtually via telehealth video call by forwarding them the link
- Billing is dependent on location or mode of communication (visit MBS Online for specific criteria)





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Available Specialties

Adult Specialties

- Advance Care Planning
- Cardiology
- Continence
- Dermatology
- Endocrinology
 - Diabetes
 - General
- Gastroenterology
- General Medicine
- Geriatrics
- Haematology
 - General
 - Thrombosis
- Infectious Diseases
- Nephrology
- Neurology
 - Epilepsy
 - General

- Ophthalmology
- Physiotherapy (Musculoskeletal)
- Palliative Care
- Psychiatry
 - Adult (18-65)
 - Older Adult (50+)
- Respiratory
- Rheumatology
- Sexual Health
- Women's Health
 - Contraception Counselling
 - Medical Termination of Pregnancy (MTOP)
 - Menopause
 - Sexually Transmitted Infections (STIs)
- Wound









Peadiatric Specialties

- Allergy
- Asthma
- Complex Adolescents
- Continence
- Endocrinology
- General Paediatrics
- Respiratory and Sleep







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Additional Information

Dedicated Clinics

If your practice regularly sees high demand for a particular specialty, you may be interested in a dedicated VVSC clinic. These are pre-arranged, recurring sessions where all patients are seen virtually by the specialist while attending your medical centre in person. The entire clinic is reserved for your practice, enabling more streamlined care for your patient cohort.







Continuing Professional Development (CPD)

RACGP and **ACRRM** members can claim CPD points for case conferences and co-consults under the **Reviewing Performance** category, provided a reflection and learning summary are included.

Feedback and Engagement

We are committed to continuously improving access to virtual collaborative care and welcome feedback on what is working well and where there may be opportunities for refinement. Your insights help us ensure the service remains responsive, effective, and aligned with the needs of both clinicians and patients.

If you are interested in contributing further through an interview or focus group (participant compensation provided), please contact **Morgan Rayner** at **morgan.rayner@nh.org.au** for more information.