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via email: info@sepsis.org.nz

Tēnā koutou, rangatria mā

Aotearoa New Zealand National Sepsis Action Plan - GP input into the Plan

Thank you for the opportunity to comment on the Draft Aotearoa New Zealand National Sepsis Action Plan – Stakeholder Consultation and Feedback.

The Royal New Zealand College of General Practitioners (RNZCGP) is the largest medical college in New Zealand. Our membership of 5,500 general practitioners comprises almost 40 percent of New Zealand's specialist medical workforce. Our kaupapa is to set and maintain education and quality standards for general practice, and to support our members to provide competent and equitable patient care.

While the RNZCGP was not able to find a GP representative in the early development of the National Sepsis Action Plan as per your letter in March 2021, we are keen to be involved and will seek representation again for the implementation phase.

The RNZCGP supports the identification and management of sepsis to improve outcomes for patients. We consider that the National Sepsis Action Plan is pitched at the reactive end of sepsis identification and management for patients who present requiring urgent hospital level care. In addition, the Sepsis Plan refers patients back into the community which may not be appropriate for people who have experienced serious life-threatening illness or loss of ability as a result of sepsis and still need continuing care from their GP.

We recommend that implementation of the National Sepsis Implementation Plan:

- 1. Highlights the role of general practices as a key point of access for identification and prevention of sepsis.
- 2. Includes referral of people who have experienced urgent and complex episodes of sepsis requiring hospital care back to their GP for continuing care.
- 3. Recognises the role that general practice teams play in working with patients and whānau to increase awareness of the signs of sepsis in communities who are more at risk.

GPs have a key role in:

- Identification, prevention, treatment and management of sepsis, and provide early and post education to patients, their whānau and carers.
- Ensuring general practice clinical teams are trained to consider potential for sepsis so that it is addressed in a timely and appropriate manner.
- Providing guidance to general practice teams to identify at risk populations that may be at higher risk for sepsis engaging with at risk populations to provide comprehensive preventative care, enables them to.
- Patients with suspected sepsis are assessed to determine the level of risk for severe outcomes, however, not everyone presents to primary care with infections and some present at a late stage to urgent care or emergency care services.

Context

General practice is a key point of access and GPs have a significant role in identifying suspected sepsis at an early stage or where rapidly escalating care is more appropriate. We consider that the addition of general practice teams and services would add value to the Sepsis Plan on the basis that it is likely that those most at risk of sepsis are already receiving care from general practice teams. In the UK, 70 to 80% (123,000 per year) sepsis patients come from primary care with chest (40%) and urinary tract (25%) infections as the source, and this accounts for 37,000 deaths annually. When best practice preventive care is implemented, it is estimated that an annual 10,000 deaths from sepsis may be preventable.

- There has been a change in thinking from accepting that sepsis is hard to detect, to one where it is actively considered whenever infection is a possible cause for significant illness or deterioration. It is also important to recognise the key role of GPs in creating a system of care that is sepsis aware and includes patients, their whānau, carers, reception team and the range of health professionals in the practice.1
- We also consider advice regarding referral from hospital to community care would be strengthened by
 ensuring people recovering from sepsis are informed about the need to access their GP to support
 continuity of their health journey.
- We support the development and use of meaningful information as a safety net for patients with infection and their whānau, about early warning signs of deterioration and how to access appropriate back up and support if their condition deteriorates.

In summary, we thank you for the opportunity to provide comment on the National Sepsis Plan, and tautoko initiatives that make a difference for Māori and Pacific people, and whose pakeke and tamariki experience sepsis at more than twice the rate of other populations.

We will seek expressions of interest from GPs when representation is required for the implementation phase and look forward to being involved in continuing mahi to implement the Sepsis Action Plan.

If you require further information, please contact our policy team or email us at policy@rnzcqp.org.nz

Nāku noa, nā

Dr Bryan Betty MBChB, FRNZCGP, FACRRM Medical Director | Mātanga Hauora

¹ The Royal College of General Practitioners. Sepsis: Guidance for GPs. RCGP Clinical Innovation and Research Centre and the NHS National Health Education England. 2018.