

A Success Story...

THE COMMUNITY PROJECT: The Success of a Local Partnership in Reaching the Community

CHD: Analyse the secondary care interface

Murgon Family Medical Practice - QLD

The incidence of chronic disease in the local community is noticeably high. Team meetings for individual patient care highlighted the issue that perhaps the practice was not doing enough to educate the population about healthy lifestyle choices.

Education pamphlets and posters were not having a noticeable effect and many patients continued to be poorly compliant with medication and dietary advice.

The practice asked, 'How could we motivate people to want to improve their own and their families' health?' and realised that anything they did would need to have an initial strong impact! Something to make the people stop, and really think about how they could influence in a positive way the health-course of their lives.

The practice eventually agreed to try a Diabetes education evening on one of the Diabetic Specialist's visits. Dr. Doug Birrell agreed to participate and so arrangements progressed. The evening resulted



Context

Murgon Family Medical Practice is situated in rural Southern Queensland at the Northern end of the South Burnett Region. The practice is a member of RHealth (formerly Southern Queensland Rural Division of General Practice).

The practice services several small towns covering a population of 9,000 (comprising ten percent Aboriginal or Torres Strait Islander) and there is a relatively high incidence of chronic disease in the community. Murgon is a diverse farming area that as well as a range of crops, boasts the largest vineyard in the state. It also has a strong beef and dairy industry with associated value-added industries.

There are 10,000 patients on the practice database, with a total of 325 on the Diabetes register and 339 on the Coronary Heart Disease (CHD) register. The practice has three FTE GPs and two Registrars, 2.4 FTE Practice Nurses and reception staff.

The Situation

At one of the Case Conferences practice staff were having with other health professionals in the district, they all agreed that there must be something that could be done about the number of unhealthy middle-aged and young people in the local community. The potential for long term serious health issues as identified by the local health professionals was frightening!

Community Health, Murgon Pharmacy, Murgon District Hospital, and Murgon Family Medical Practice had all been displaying 'Healthy Lifestyle Choices' posters and distributing pamphlets, as well as giving advice on an individual basis when these at risk people presented as patients.

The Situation *continued...*

From observation, smoking rates, especially in the young, were high, Obesity was also at epidemic proportions. The Doctors and Pharmacist reported what they believed to be some sub-optimal medication and dietary compliance, in both the CHD and Diabetic patients. Posters on walls were not having a noticeable effect.

The suggestion of a public meeting was considered and agreed upon. With the co-operation of the visiting Diabetes Physician a meeting with an educational focus was arranged.

The Change

Local health agencies worked together and arranged the evening which included a talk by the Diabetes Physician that regularly visits Murgon. Blood glucose and blood pressure measurement was to be available for anyone who wanted to participate.

Advertisements were placed at the pharmacy, the practice, and the hospital. Posters and flyers were distributed throughout the district. Health agencies continued to promote 'Healthy Lifestyle Choices' in their individual facilities, and told patients about the proposed public meeting. This generated a surprising amount of interest and local discussion.

The Outcome

Approximately 150 people attended this interactive evening where Dr Birrell gave a presentation. There was great interest in the blood glucose and blood pressure measurement in a free, non-threatening environment – and people were curious, especially following Dr Birrell's presentation.

A number of people were identified as having moderately elevated blood pressures which at that stage was not being treated. One person had a severely elevated (untreated) blood pressure, and there was an extremely high blood glucose reading in a person not previously known to have Diabetes. These discoveries and the subsequent referrals and treatment could well have saved lives or at least reduced some of the ongoing morbidities of chronic disease.

Public interest peaked. The verbal feedback was positive and encouraging. The number of people who attended the hospital or practice to follow up on what they had found out at the meeting was sufficient to prompt the consideration of a follow-up meeting, to concentrate on lifestyle from a specifically 'Heart Disease' angle and embracing diet, smoking cessation, and exercise, with discussion about the role of medications. A date is yet to be set for this follow-up event.

"These discoveries and subsequent referrals could well have saved lives."

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