

# CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) IMPROVEMENT IN GENERAL PRACTICE

CAC RESULTS, OCTOBER 2018

The Practice Support team at Gold Coast Primary Health Network (GCPHN) are reviewing how to support general practices conducting quality improvement activity, with a 12-week intensive quality improvement activity in development. In response to higher rates of Potentially Preventable Hospitalisations (PPH) for COPD on the Gold Coast, this 12-week intensive project will aim to improve the continuity and coordination of care for patients with a diagnosis of COPD.

Community Advisory Council (CAC) members were asked for their feedback around patient self-management, which will be an important component of the quality improvement activity, and what messages they feel would help patients become more receptive and involved in their own healthcare.



## HOW DO CAC MEMBERS THINK PATIENT SELF-MANAGEMENT BE INCREASED?

### LANGUAGE/TERMINOLOGY

The term **“SELF-MANAGEMENT”** can be confused with **“SELF-DIAGNOSIS”** and can be perceived by some people as avoidance of responsibilities by general practitioners.

CAC members suggested reviewing the use of wording to be along the lines of **“JOINT-MANAGEMENT”** or **“SELF-CARE”**.

### SUPPORT AND ENGAGEMENT



CAC members felt that having **CLEAR** and **POSITIVE EXAMPLES** from peers to show what **DOES** work, would help increase patient self-management. These examples should be made available in general practices, specialist rooms, pharmacies and other health provider organisations.

CAC members also suggested that providers could send **FOLLOW-UP TEXT MESSAGES** to patients which would show an active level of support. Providers could also employ trainee staff to take on this role and provide additional support to patients.



### INFORMATION

Some CAC members felt there can be **TOO MUCH** information available, which can be hard for patients to filter.

The information available needs to **MOTIVATE** patients to take control and not just provide clinical advice.



### EDUCATION

Health literacy needs to be considered by health providers. Patients need to have the **CAPACITY** to **OBTAIN, PROCESS** and **UNDERSTAND** basic health information so they can make **APPROPRIATE** decisions for their own health.

CAC members agreed that patients need to take responsibility and educate themselves about their own health.



### WHAT ELSE DID CAC MEMBERS HAVE TO SAY?

» CAC members discussed that there are gaps on the Gold Coast for support groups relating to COPD and self-management.

» CAC members discussed how poor self-management can lead to ill health and hospitalisation.

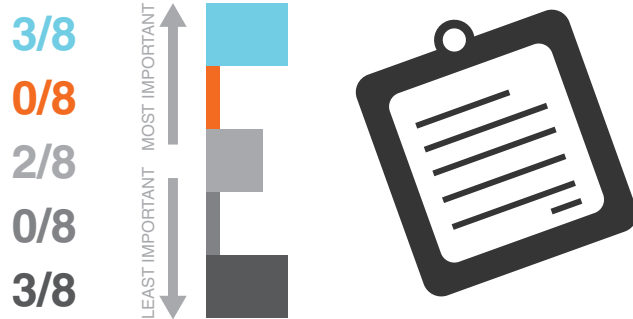
## Gold Coast Primary Health Network

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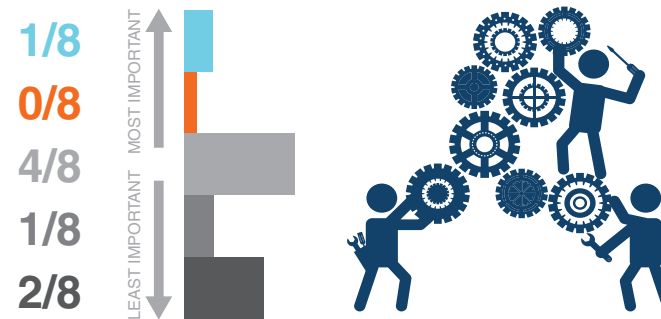
**CAC rated the following key themes in order of importance (rated 1 - 5 with 1 being the most important).**

### WORKFORCE CAPACITY BUILDING



- Permitting staff with a Certificate III in aged care will **ADD SUPPORT** to the current system.
- There needs to be greater advocacy for **HIGHER QUALIFICATIONS** for staff.
- CAC members agreed that there should be **REGULAR ASSESSMENTS** of aged care facilities conducted by an independent body to ensure safety and healthcare needs are being met.
- CAC members stressed the need for aged care to be more **"ATTRACTIVE"** and **"EXCITING"** and suggested that more exposure for students in this career field might incite more interest.

### SERVICE INTEGRATION



- CAC members stressed the need for aged care to be more **"ATTRACTIVE", "EXCITING" and "IMPORTANT"** and suggested that more exposure for students in this career field might incite more interest.
- To increase service integration, CAC members suggested more **ENGAGEMENT** with community groups and more **ENCOURAGEMENT** of volunteers.

### COMMUNITY EDUCATION & AWARENESS

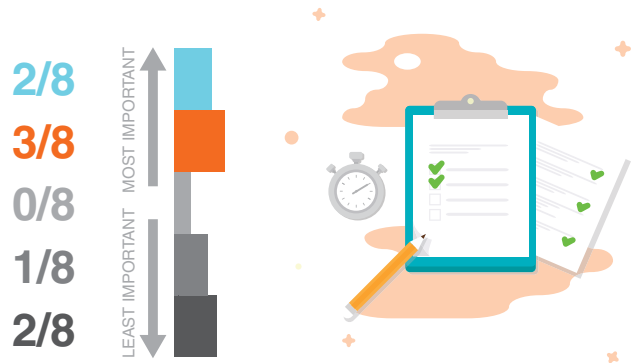


- To keep people out of residential aged care facilities (RACFs) **FURTHER EDUCATION** is needed and could be shared via RSL clubs, radio, text messages.
- **SOCIAL MEDIA** was not recommended by CAC members for older people specifically, however it was noted that it could be **HELPFUL** for family members who are active on social media.
- **ADVANCE CARE PLANS** could be distributed by financial planners or insurers.
- Respite could be promoted as a **PREVENTATIVE** step.

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### ADVANCE CARE PLANNING



- The majority of CAC members felt that Advance Care Planning was an **IMPORTANT PRIORITY** and an underlying topic throughout all of the key themes.

#### Recommendation from CAC members:

CAC members requested that the feedback provided by the group on Aged Care work be taken into consideration as the work at GCPHN and Beacon Strategies progresses.

### SERVICE NAVIGATION & COORDINATION



- The types of roles that can assist in better coordination are those of **SOCIAL WORKERS** and **NAVIGATORS**.
- Some CAC members suggested that **COORDINATORS** would be a more suitable word, than Navigators.
- Having services available that can **"TOP-UP"** residential care would be extremely valuable. E.g. having **MOBILE** IV antibiotics or radiology so residents do not have to be transported to hospital.

### WHAT ELSE DID CAC MEMBERS HAVE TO SAY?

- There needs to be more **awareness** of **after-hours services** and **costs** for people at home.
- Some CAC members felt that there is room for **improvement** and **expansion** of current after-hours services to include radiology and pathology.
- Classes relating to **balance and wellbeing** (similar to those offered by Gold Coast City Council) could be offered in residential aged care facilities in several areas and formats.
- Some **planned hospitalisation visits** for mental health grief and similar issues can be of **huge benefit** to patients, if they are not having a prolonged stay in hospital.



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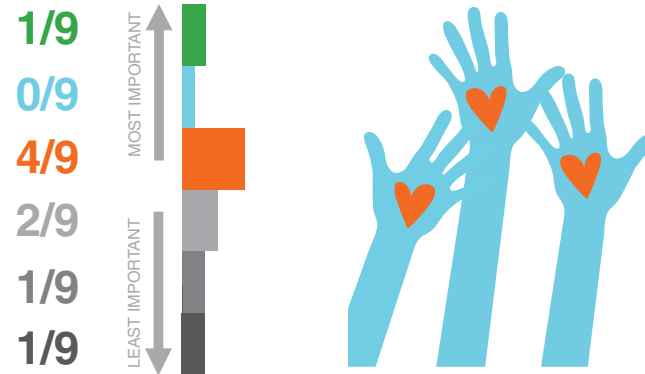
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### WORKFORCE CAPACITY BUILDING



- CAC members discussed how people working in the palliative care space need to **COMMUNICATE** and **LISTEN** more **EFFICIENTLY** and **EFFECTIVELY**.
- Most CAC members agreed that a **BETTER UNDERSTANDING** of palliative care and end of life care is needed. If there are **CLEARER DEFINITIONS** of the terms, there is more chance of the fear and stigma lessening.

### VOLUNTEER PROGRAMS



- In order to reach a wider audience, CAC members felt that **ADVERTISING** for volunteers should be included across a **VARIETY** of media formats such as social media, radio, printed collateral and through support groups.
- For the safety of volunteers and patients, volunteers should have regular **POLICE CHECKS** and receive **TRAINING, MENTORING** and **ONGOING SUPPORT** to assist them in their role.
- CAC members felt that a **CLEARER DEFINITION** of the role of a volunteer was needed.

### SECTOR COLLABORATION



- CAC members agreed that there is a need to **SUPPORT** the **MENTAL HEALTH** of carers, particularly once their role as a carer finishes.
- Some CAC members felt that **PHARMACIES** were an underrated importance to palliative care.

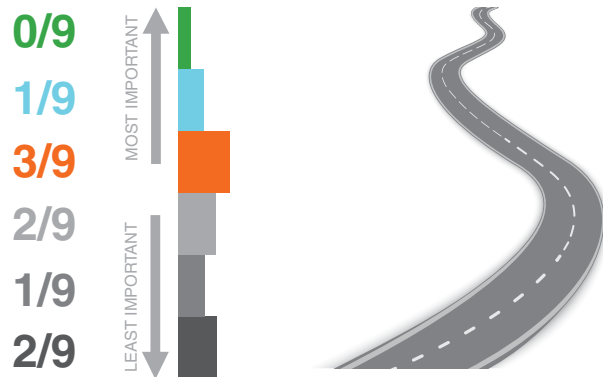
#### Recommendation from CAC members:

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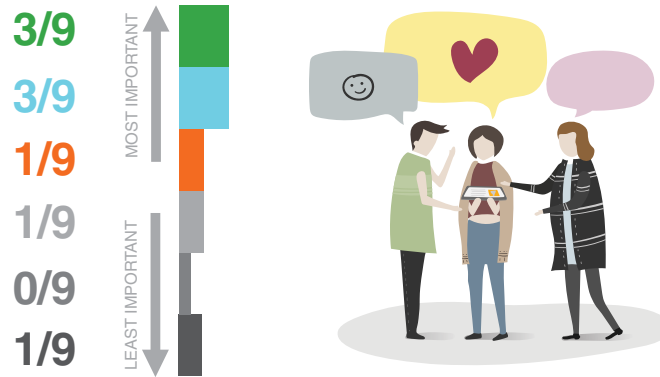
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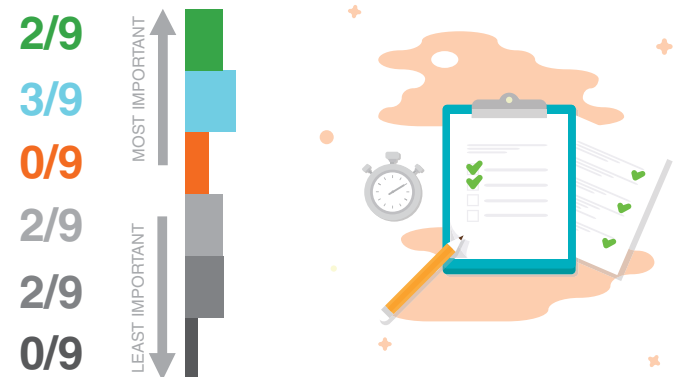
- Similar to the feedback from the Older Persons Workshop, CAC members discussed that the types of roles that can assist in better coordination are those of **SOCIAL WORKERS** and **NAVIGATORS**.
- CAC members discussed how people's wishes regarding the use of **ALTERNATIVE TREATMENTS** need to be respected. Patients need to know that they will not be judged for their personal decisions if they go into care.

### COMMUNITY EDUCATION & AWARENESS



- Some CAC members felt that there is a need for a **COMMUNITY AWARENESS CAMPAIGN** that aims to normalise End of Life across the lifespan.
- **PALLIATIVE CARE INFORMATION** needs to be made available in all residential aged care facilities (RACFs).
- Some CAC members believed that **DEATH CAFES** could be useful, especially to meet and talk about **"TABOO"** topics with other people who are willing to talk about death.

### ADVANCE CARE PLANNING



- Five out of nine CAC members felt that Advance Care Planning was an **IMPORTANT PRIORITY** and an underlying topic throughout all of the key themes.

### WHAT ELSE DID CAC MEMBERS HAVE TO SAY?

- CAC members discussed the need for a **clearer definition** of what palliative care is.
- Some CAC members suggested **changing the word "palliative"** as it can appear to only cover the aged.