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CONTENTS

| | |
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| THE PHC RESEARCHER AND PHC RIS – AN ENDURING BENEFICIAL RELATIONSHIP | 1 |
| Associate Professor Ellen McIntyre, Manager, Primary Health Care Research and Information Service | |
| DIAGNOSING DEMENTIA IN GENERAL PRACTICE | 2 |
| Emily Hansen ¹ , Andrew Robinson ² , Georgina Routley ³ and Clarissa Hughes ³ | |
| THE SOCIAL NORMS ANALYSIS PROJECT – REDUCING ALCOHOL-RELATED HARM IN RURAL TASMANIA | 3 |
| Gillian Long and Clarissa Hughes | |
| YOUNG PARENTS AND POST NATAL DEPRESSION – A CALL FOR RESEARCH | 4 |
| Pru Peschar and Emily Hansen | |
| THE MOTIVATIONAL EFFECT OF SPIROMETRY ON SMOKING CESSATION | 5 - 6 |
| Julia A. Walters ¹ , David P Johns ¹ , Emily C Hansen ¹² , Janette G. Gartlan ² and E. Haydn Walters ¹ | |
| DOES YOGA HELP DEPRESSION | 7 |
| Katie McMahon, Mark Nelson | |
| CANNABIS USE IN ADOLESCENCE: LITERATURE REVIEW: PILOT STUDY: A QUALITATIVE INVESTIGATION INTO THE LIFE CONTEXTS UNDERLYING FIRST-TIME CANNABIS USE IN YOUNG ADULTS | 8 - 9 |
| - Michelle Westerink | |
| ‘TO COMMUNICATE OR NOT TO COMMUNICATE?’ RESEARCHING PRACTICE NURSES COMMUNICATION NEEDS IN TASMANIA | 10 - 11 |
| Lin Bowers-Ingram, Mark Nelson, Emily Hansen | |
| SECONDARY PREVENTION IN ACUTE CORONARY SYNDROMES: UNDERSTANDING PATIENTS WHO CONTINUE TO SMOKE AFTER AN ACUTE CORONARY EVENT | 12 |
| Petya Fitzpatrick, Emily Hansen, Mark Nelson | |
| FAMILY THERAPY FOR CHILDHOOD OBESITY: DO WE REALLY KNOW WHAT WORKS: | 13 |
| Suzie Waddingham ¹ , Kelly Shaw ² , Emily Hansen ³ , Roger Hughes ⁴ | |
| EPIDEMIOLOGY OF JOCKEY FALLS IN AUSTRALIAN THOROUGHBRED RACING | 14 |
| Peta Hitchens | |
| WORK RELATED NECK AND SHOULDER PAIN | 15 |
| Susie Riddoch, Jeff Summers | |
| MEASURES OF CHILDHOOD FITNESS ARE ASSOCIATED WITH CALCANEAL QUANTITATIVE ULTRASOUND IN ADULTHOOD: A 20 YEAR PROSPECTIVE STUDY | 16 |
| Stella Foley ¹ , Stephen Quinn ¹ , Terry Dwyer ² , Alison Venn ¹ , Graeme Jones ¹ | |
| INCREASING AWARENESS AND UTILISATION OF E-MENTAL HEALTH SERVICES FOR YOUTH: THE YSHAREIT PROJECT | 17 |
| Spiranovic ¹² , C., Kirkby ² , KC., Daniels ³ , B., Heading ² K., Hope ² , D., & Mobsby ² , C. | |
| GENERAL PRACTICE EMERGENCY PREPAREDNESS AND PLANNING | 18 |
| Kelly Shaw ¹ , Tania Winzenberg ² | |
| PALLIATIVE CARE AND THE NEW AFRICAN COMMUNITIES | 19 |
| Malcolm Tyler, Sheila Campbell, Jenny Lowms | |
| AN AUDIT OF WOUND CARE DOCUMENTATION OF INPATIENTS IN A TASMANIAN HOSPITAL | 20 |
| Jan Gartlan ¹ , Andrew Robinson ² , Petya Fitzpatrick ¹ , Jacinta Stewart ² , Anne Smith ³ , Sue Clennett ³ , Denise Walshe ³ , Ann Tomlinson-Smith ³ , Lory Boas ³ | |

The PHC researcher and PHC RIS – an enduring beneficial relationship

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Since 1995, the Primary Health Care Research & Information Service (PHC RIS, formerly the National Information Service) has been developing and promoting resources, products and opportunities to support primary health care researchers to build their capacity, share information pertinent to their research, and disseminate their research findings. In addition, PHC RIS also conducts applied research relating to improving the managing and sharing of information and research among stakeholder groups.

This presentation will present what PHC RIS currently offers the primary health care researcher ranging from the early-career researcher to the research leader. It will also provide tips on how researchers can best utilise these resources, products and opportunities. These include: the annual national GP & PHC research conference; regular newsletters and eBulletins; a searchable database of research, researchers and funding sources; how to...research fact sheets; upcoming conferences; links to relevant websites, and much more. Findings from recent and current PHC RIS applied research as this impacts on how PHC RIS continually strives to enhance its enduring relationships with primary health care researchers, will also be presented.

Diagnosing Dementia in General Practice

Objectives

This presentation reports findings from a pilot study using qualitative research methods to explore Australian general practitioner's understandings of dementia, their experiences diagnosing dementia and how these might impact on the process of diagnosis and delays in diagnosing dementia in general practice.

Background

General practitioners (GPs) play a central role in the provision of primary health care to elderly people and are credited with being the health professionals most often consulted by carers of people with dementia. However, GPs are famously slow to diagnose dementia {Wilkinson, 2004 #885}. Policy makers, carers of PWD and health care providers view these patterns of diagnosis with concern. Early or as it sometimes described timely diagnosis of dementia, is currently viewed as the "precondition for improving dementia care" p 377 in {Vernooij-Dassen, 2005 #903}This

Methods

Semi-structured interviews with 13 Tasmanian GPs asking them about their experiences of diagnosing dementia, their views on aged care issues including dementia and their perceptions of the relative importance of early diagnosis. A focus group with 6 GPs. A range of GPs (age, location of practice, gender)

Results

Five major themes were identified that relate to GPs being less likely to diagnose early stage dementia. These are, 'Holistic viewpoint', 'Keeping them at home', 'Family members/carers', 'Medication', 'Diagnosis unnecessary'.

Discussion

GPs are concerned about a number of issues related to early diagnosis. Most importantly they see few benefits for their patients (or their families) if they are diagnosed with early stage dementia. Our results were overwhelmingly similar to studies of GPs in other countries. There are also parallels with other chronic degenerative conditions such as COPD where GPs feel limited in their ability to solve the problems.

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The Social Norms Analysis Project – Reducing Alcohol-Related Harm in Rural Tasmania

Objectives

The Social Norms Analysis Project aims to reduce alcohol-related harm amongst young people, who tend to base their own drinking behaviour on overestimates of drinking by their peers. When given accurate information, young people are likely to modify their behaviour to that of the ‘true norm’, rather than the overestimated ‘false norm’. The potential for alcohol-related harm is reduced accordingly.

Methods

Students at five Tasmanian rural high schools completed an anonymous 50-item questionnaire on perceived and actual use of alcohol and related harms. Based on the questionnaire data, positive ‘key messages’ will be developed and incorporated in media campaigns to disseminate ‘true norm’ information.

Results

Preliminary results indicate 80% of students mostly drink non-alcoholic drinks on weekends. Sixty percent of students did not get drunk the last time they consumed alcohol. Parents were the main source of alcohol (30%) however 90% of parents set limitations on their children’s drinking with 20% not allowing the drinking of alcohol. Although some 50% of students had experienced alcohol related harm in the form of vomiting, actual harms were consistently lower than perceived harms. Recency and frequency of drinking did not differ significantly for males and females however females reported significantly more unwanted sexual contact than males as a result of alcohol. There were no significant sex differences in other harms experienced.

Discussion

Preliminary analysis supports the notion that perception of alcohol-related harm amongst high school students is greater than actual levels of harm. Although most students have drunk alcohol at some time, students mostly drink non-alcoholic drinks and when they do drink alcohol, most do not get drunk. Key messages based on the results are currently being developed and their effectiveness will be evaluated in 2007.

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Young Parents and Post Natal Depression- A Call for Research

Objectives

The understanding, treatment and support of women experiencing Post Natal Depression (PND) has grown and developed over many years. There has been an increase in research into both the treatment and the nature of the condition. A review of the literature shows that the age of the mother is a significant risk factor for developing the condition, with first time parenthood at either end of the age scale being over-represented amongst women with the condition. This paper seeks presents a literature review and argues that research investigation for PND in young women is required, because there is little specific information about the lived experience of young women suffering PND.

Methods

A literature search of relevant journals and books was conducted to locate information specifically on young women who have PND. Data from another research project conducted by the first author on young parents and their support needs were included in the review in order to gain a greater understanding of the issue.

Results

Whilst most of the literature cites age as a risk factor in the development of PND, there is very little direct research on the specific needs of young women with PND. Research by this author and other demonstrates that young parents often experience multiple risk factors for PND, including age and psycho-social stressors.

Discussion

Attention to the special needs of young women with PND and the tailoring of services to meet these needs is required. We intend to start a new project exploring their needs, and how primary health care providers can better meet those needs.

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The motivational effect of spirometry on smoking cessation

Objectives

For many years clinicians have believed that demonstrating smoking was damaging their lungs would help people to quit, but worried that smokers with normal lung function might be dissuaded. We investigated the effect of spirometry on motivation to quit and short term smoking cessation.

Methods

Smokers were recruited from patients >35 years old attending eight GP practices over one year who had opportunistic spirometry by a trained nurse, classified as obstructive (OLF) or normal (NLF). All smokers were given brief quit advice + specific feedback on spirometry: OLF group- “Evidence of lung damage due to smoking” and NLF group- “No evidence of lung damage”. The effect of spirometry feedback on stage shift in the Transtheoretical Model¹ and sustained smoking cessation was assessed after 3 months by self-report.

Results

328 participants were recruited (193 NLF/ 135 OLF). Baseline nicotine dependence, cigarette consumption, stage of change distribution, quit confidence and self-rating of health, lung damage and quit benefits were similar. Follow-up was successful for 297 (91%). The difference in positive stage shift between OLF and NLF groups was not significant, 39 (31.2%) and 42 (24.4%) respectively (p=0.399). Negative stage shift was similar (12%) in both OLF and NLF groups. Higher perception of health was a significant predictor for positive stage shift compared to negative shift (OR 1.03, p=0.002). Seventeen participants quit, but 7-day point prevalence cessation rates in OLF and NLF groups were not significantly different, 6.7% and 4.1% respectively (p=0.311). Successful quitting was associated with shorter smoking history, lower nicotine dependence, higher self-efficacy, higher perception of health and later stages of change. Association with category of feedback (OLF vs. NLF) was not significant (OR 1.65, p=0.315) but after adjusting for smoking history it was stronger (OR 2.436, p=0.087).

Discussion

In unselected smokers in primary care, receiving feedback that spirometry showed damage due to smoking was not associated with a significant increase in short-term smoking cessation or positive shift of motivational stage. Feedback that there was no damage was not associated with any decrease in motivation.

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Does Yoga Help Depression?

Objectives

This study aims to analyse the available evidence about yoga and meditation in the treatment of depression, in the form of a Cochrane review. It aims to present this information in an accessible way and to elucidate the need, if any, for further research.

Methods

The Cochrane process is a standardised, peer-reviewed, systematic method of conducting a literature review, which aims to take into account the methodological quality of studies.

Results

Some reasonably good quality trials into yoga for depression exist. Poor quality trials also exist. The review process is not yet complete.

Discussion

The use of complementary therapies is increasing. Studies suggest up to around 50% of people with major depression have used complementary medicine including more than 20% who have used yoga or relaxation (Kessler 2001). There is established evidence for the use of cognitive behavioural therapy, and some evidence for the use of exercise in this setting. Yoga/meditation utilizes elements of these techniques, making it a plausible modality for the management of depression.

There is some evidence for the use of yoga/meditation in the management of depression, but its quality is variable. Interpretation of literature about yoga is hampered by the fact that differences between types of yoga are often poorly understood by doctors and trial methodology is sometimes poor or not described clearly.

This presentation will give an overview of the progress that has been made in completing a Cochrane review regarding yoga/meditation in depression. It will discuss the evidence that exists and any limitations of these trials. The presentation will also touch on the process of doing a Cochrane review.

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Cannabis Use in Adolescence: Literature Review

Pilot Study: A Qualitative Investigation into the Life Contexts underlying First-Time Cannabis Use in Young Adults

Objectives/ Background

The purpose of this study is to increase the understanding of cannabis use in adolescence, focusing on first-time cannabis use at a young age. Cannabis is reported to be the most widely used illicit drug in Australia and is most prevalent among the young adult (20-29 years) and adolescent (14-19 years) age groups (Copeland et al. 2004). Documented trends show the age for first-time cannabis use to be steadily decreasing (Degenhardt et al. 2000). Regular use of cannabis may have adverse effects on physical and psychological development.

Methods

The methods involve face-to-face interviews with ex-cannabis users. The interviews have been designed to gather information about the circumstances that were present in the respondent's life when he or she used cannabis for the first time. Unique to this study is the use of drawings which will be used to support the verbal data for analysis and cross comparison.

The literature review is across a wide range of disciplines, including adolescent health, public health, youth studies, medicine, psychiatry, health research & education, drug education, drug & alcohol studies and substance abuse. To appreciate the complexity and diversity in young people's experiences, qualitative studies are included that relate to the social context of cannabis use.

Rationale

It is evident from the literature that cannabis use is not well understood. Many papers have investigated the association between cannabis use and psychosis where this association remains complex. Despite this complexity there is consistent evidence that regular use of cannabis may increase the risk of mental disorder and potentially escalate symptoms particularly in people who have a family history of schizophrenia (UNODC 2006; Hides et al. 2006; Hall 2006; van Os et al. 2002; Zammit et al. 2002; Andreasson et al 1987) Cannabis use is also attributed to other harmful risks such as cannabis dependence, the use of other illicit drugs, depression and nicotine dependence.

Cannabis use is embedded in a range of social processes. The social context of cannabis use can attribute to problematic outcomes such as reduced educational attainment and loss of motivation. However, despite known risks, cannabis use is often connected to a community culture and sense of belonging or identity. Social & personal factors may compete with decrease in use and requires further investigation.

Discussion/ Future Directions

The information obtained from the pilot study will be used in preparation for a future more representative study on first-time cannabis use and factors related to successive use over time. Data analysis may assist those in counselling and drug education fields to design programs/interventions that make use of developmental and contextual information.

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‘To communicate or not to communicate?’ Researching Practice Nurses Communication Needs in Tasmania.

Objectives:

The primary aim of this exploratory study is to determine what the preferred methods of communication are, with and between, Practice Nurses (PNs) in Tasmania. The secondary aim is to collect up-to-date data on PN practice to compare with the 2005 ADGP survey (ADGP2006). It is believed that determining and meeting communication needs can help reduce feelings of professional isolation, which has been identified as a key opportunity/top priority in any support for practice nurses in the future (DOHA, 2005).

Methods:

This is a non-randomized, cross-sectional, quantitative study using a semi-structured questionnaire instrument. Ethics approval was sought at each stage of development of this minimal risk survey. To give a comprehensive picture of the issue and owing to the relatively small number of PNs in the state (under 250), all PNs were surveyed. A list of PNs was compiled through multiple sources and each practice was telephoned to determine numbers and names of the PNs. The self-administered questionnaire was designed, pilot-tested and posted out at the beginning of October, 2006.

Results:

The initial research findings have identified 219 PNs working within the three regional Divisions of General Practice. This figure will be revised when respondent overlaps come to light. Some interesting data has already been collected on numbers and location of PNs in the state and initial comments about the research by PNs.

Discussion:

It has been hypothesized that determining and meeting the unique communication needs of this evolving nursing profession, will help reduce feelings of professional isolation, improve job satisfaction and professional recognition, and ultimately improve patient health outcomes. Little international research was found concerning communication needs and community nurses and none which focused on PNs. It has been recognized, however, that more research needs to be conducted into this evolving profession (DOHA 2005).

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Secondary prevention in acute coronary syndromes: Understanding patients who continue to smoke after an acute coronary event

Objectives:

This project explores the beliefs of patients who continue to smoke after an acute coronary event, and how continued smoking is incorporated into their daily lives and illness biography.

Methods:

Participants were recruited through the Royal Hobart Hospital database. Data collection is currently occurring through semi-structured interviews and a 'Stages of Change' questionnaire. Thematic analysis is being performed concurrently, guided by grounded theory.

Results & Discussion

Preliminary data analysis has revealed a number of themes and this presentation will focus on several of these. Themes on preliminary analysis include: 'Smoking as a normal activity in a smoker's day', 'Conflicting messages during the acute event', 'Stress as an explanation for their illness and their continued smoking'; 'Life after an ACE: anxiety, restriction, stigma, uncertainty and injustice', and 'Cost-benefit calculations'. This research will provide health professionals with a better insight into the reasoning processes of patients who continue to smoke after a smoking related illness and assist them to better understand the context in which their smoking cessation advice is received. This will assist health professionals to implement more successful and patient-centred interventions.

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Family Therapy for Childhood Obesity:

Do we really know what works?

Obesity is preventable and relates to a wide range of family and community environments, not just the individual. There is evidence that the prevalence of overweight and obesity in children and adolescents in Australia has increased in the last 15 years to an estimated 19-23% (1). The *NH&MRC Clinical Guidelines (2) provide a national evidence-based framework for managing childhood obesity in clinical practice. To trial this, the Community Nutrition Unit (CNU) piloted an urban, community-based family therapy weight management intervention called Home Grown. On completion of this program the evaluation did show trends in the right direction. There was an indication, however, at the 6-month follow up that the program did not work.

Objectives

The aim of this project is to investigate the reasons why Home Grown was not able to sustain positive lifestyle changes in a cohort of 10 families residing in Southern Tasmania 12 months post intervention.

Methods

The project used retrospective qualitative evaluation using semi-structured interviews. Interviews were transcribed verbatim, coded and a thematic analysis was completed by two researchers.

Results

The five themes that emerged from the interviews included:

1. Motivation for entering program
2. Health messages
3. Attitude towards a healthy lifestyle
4. What constitutes success
5. Environmental constraints

Discussion

1. Evidence Based Medicine (EBM) at a clinical level is not always an appropriate hierarchy of evidence for directing or informing public health initiatives. It was shown that theory is not always translated into practice.
2. Home Grown would suit families where there is full commitment from the whole family unit
3. Focus of action in childhood obesity should be on the determinants of obesity and not the weight itself

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Epidemiology of Jockey Falls in Australian Thoroughbred Racing

Objectives

This analytical study aims to investigate falls, resulting in injury or fatality, of professional jockeys in Australian thoroughbred racing. The study will include monitoring trends of falls between the 2000/01 and 2005/06 racing seasons; investigating the incidence and distribution of falls; and identification of fall characteristics.

Methods

A jockey falls database has been developed in Access and includes details about races held in Australia between 1 August 2000 and 31 July 2006. Fields include State, date of meeting, racecourse, track condition, weather, rail position, race distance, race grade, field size, jockey (gender, experience), horse and fall incident information. STATA 9.0 will be used for analysis of means and proportions using standard methods.

Results

It is envisaged that this research will provide the racing industry with critical data on the incidence and distribution of falls of jockeys; identify risk factors for falls that require further consideration and mitigation; and will provide the evidence base to increase the awareness of the general public, industry participants and potential employees of the industry into the risks involved.

Discussion

There has been increasing interest into jockey welfare and occupational health and safety in recent years within the thoroughbred racing industry. Consequently, the industry has had difficulties in obtaining jockey insurance, implementing workers compensation schemes, recruiting apprentices, and assisting injured jockeys in rehabilitation.

To date there have been few epidemiological studies on jockey injuries published, and none on research undertaken in Australia. Commonly, the overseas studies undertaken have identified falls as the most frequent cause of injury. Injuries caused by falls also tend to be quite severe, which has been demonstrated by the high incidence of fractures and multiple injuries.^{1, 2, 3}

Further research into this area is critical to ensure that the safety and welfare of jockeys is optimised.

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Work- Related Neck & Shoulder Pain:

Clinical evidence of persistent over-activity in the deep neck/shoulder muscle Levator Scapulae (LS) in workers with Occupational Overuse Syndrome was noted. A research MSc was undertaken to see whether this muscle had a role other than that described in the anatomy text books. The first clinical study using needle EMG showed that LS is indeed active in initial arm raising. (LS is greater during early arm raising than before or after $p = 0.00$.) The study was repeated with different participants using both needle and surface EMG (sEMG) to discover whether sEMG is capable of measuring this deep muscle. Good correlation between needle and sEMG results ($r = .81$) enabled a field study comparing the LS muscle activity in fish processors with child-carers. This study showed a strong trend between repetitive work (fish processors) and higher LS activity ($p = 0.06$). A second field study compared muscle activity in call centre workers with (cases) and without (controls) work-related neck and shoulder pain. Results indicated a similar main effect to the first field study that LS is greater during early arm raising than before or after ($p = 0.001$). Furthermore, a typing test by the two groups showed that, on instruction, the cases were able to achieve a significantly greater reduction in muscle activity than the controls ($p = 0.001$). The LS muscle does appear to have a role other than that described in the anatomy book and the muscle appears to be more highly activated in repetitive workers. The ability to reduce the LS activation voluntarily could have a cost effective, useful role in preventing work-related neck and shoulder pain and its sequelae.

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Measures of Childhood Fitness are associated with Calcaneal Quantitative Ultrasound in Adulthood: A 20 Year Prospective Study

Objectives

The long-term effects of childhood exercise on bone mass remains equivocal. Therefore, the aim of this longitudinal study was to describe the associations between childhood fitness, BMI and adult skeletal status, as measured by QUS, in a prospective sample of adult male and female subjects.

Methods

A representative sample of 1,434 children, aged 7 to 15 years, were measured as part of the Australian Schools Health and Fitness Survey in 1985 and approximately 20 years later (mean age 32). Fitness measures included 1.6 km run, 50 meter sprint, leg strength, standing long jump and physical work capacity at 170 beats/min (PWC_{170}) (9, 12 and 15 yr olds). The Sahara bone ultrasound densitometer was used at follow-up to determine broadband ultrasound attenuation (BUA), speed of sound (SOS) and quantitative ultrasound index (QUI).

Results

In females, there was a beneficial association between 1.6 km run time and all QUS parameters ($r = -0.08-0.09$), with a similar association between 50 m sprint and QUI and SOS (both $r = -0.08$). PWC_{170} in females was also predictive of BUA and SOS, independent of adult fitness ($r = 0.16-0.21$). Likewise, standing long jump was associated with SOS in females ($r = 0.09$). PWC_{170} at age nine had a greater influence on adult bone mass ($r = 0.21-0.27$, all $p < 0.05$) than it did at ages 12 and 15 ($r = -0.02-0.01$, all $p > 0.05$). In males, BMI as a child was predictive of all adult QUS parameters ($r = 0.11-0.12$).

Discussion

Childhood fitness levels, particularly in females and in the prepubertal years, are predictive of adult skeletal status as measured by QUS. These results suggest that increased skeletal loading in early childhood leads to an increase in peak bone mass.

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Increasing awareness and utilisation of e-mental health services for youth: The yshareit project

Objectives

The yshareit project aims to increase awareness of and access to reputable e-mental health services in youth aged 15 to 25 years.

Method

We developed a yshareit website www.yshareit.com, which triages users to five reputable Australian mental health sites - Reach Out, MoodGYM, BluePages, Kids Help Line, and Ybblue. To build a peer support and referral network we recruited 135 Tasmanian youth ambassadors. Ambassadors attended a half day e-mental health workshop at various locations across Tasmania, where they explored the yshareit web site and role played how this could be used in everyday situations where mental health issues arise in their social network. The primary outcome measure comprised a questionnaire assessing use and awareness of e-mental health resources, which was administered before the workshop and again at six months follow-up.

Results

Preliminary pre to post changes in use and awareness of e-mental health services were analysed for an initial 26 youth ambassadors. Fifty-eight percent at baseline and 69 percent upon six month follow-up reported using the internet to obtain information relating to personal mental health issues; this information was typically accessed on less than a monthly basis. There was a significant increase in promotion and awareness of e-mental health information by youth ambassadors. The percentage who reported having recommended a mental health website to a person seeking assistance increased from 54 to 85 percent. Youth ambassadors also reported an increased awareness of the least recognised website, MoodGym, from 12 to 92 percent. Over the 12 months to September 2006, the website received 2,717 visitors, around half from Tasmania, and generated 1,523 referrals to the triaged sites.

Discussion

The preliminary results suggest that the yshareit project is achieving its aims of increasing awareness and sharing of e-mental health resources, through the combination of the website and youth ambassadors program.

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General Practice Emergency Preparedness and Planning

Objectives:

To explore the potential roles of general practitioners (GPs), general practices and of Divisions of General Practice in enhancing emergency response in Tasmania.

Methods:

Six focus groups involving 30 participants were convened. Ten participants from each of the three regions of Tasmania were recruited. The discussions were tape-recorded then content transcribed by the principal researcher. Open and axial coding were used to identify themes.

Results:

The major themes that emerged from the discussions were:

1. The role of the GP in emergency planning, provision of emergency services and leadership in an emergency
2. The role of general practices in enhancing emergency response by utilizing their personnel and infrastructure
3. The role of the Divisions of General Practice in planning, communication and co-ordination of the general practice response
4. Emergency management education, training, resource and equipment requirements of GPs, practice staff and Divisions staff

Discussion:

GPs have a willingness and capacity to assist in emergency planning, preparedness and response. GPs could assist in a variety of settings and fulfill a broad range of emergency response roles. General practice staff, equipment and infrastructure are also valuable resources that are currently not utilized in emergency management. A system to co-ordinate and mobilise GPs and general practice resources is required to facilitate general practice involvement in emergencies. Divisions of General Practice were felt to be the most appropriate organisation to develop this system. Divisions also have a role in provision of emergency services, predominantly in the areas of emergency planning, communication and practice support, providing emergency management education and training opportunities, and in compiling and maintaining a register of general practice volunteers able to be contacted in the event of an emergency.

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Palliative Care and the New African Communities

Objectives

To establish the palliative care needs of the New African Communities (NAC) through cultural dialogue and to develop appropriate guidelines for working with NAC members who require palliative care.

Methods

Individual interviews and group discussions based on a list of questions developed by Palliative Care workers.

A total of seven interviews were conducted on a qualitative basis. A community meeting with thirty people within one community was also held.

Results

Interviews were conducted with individuals and groups from three different African refugee groups. Country of origin information was also obtained by research and the results combined into a preliminary set of guidelines.

New African Community members will have a variable understanding of palliative care. It is often not available in their home countries as a government service. Staff working with NAC members may have to use interpreters. Some of the terms and concepts seen by staff as self-evident, are not so to NAC members.

All the experiences of NAC members life pre-refugee stage or pre-migrant stage, the impact of flight/ war/ migration and the re-settlement process will all impact on the bereavement process.

Religion plays a large part in African culture, and includes gender provision of services, burial and mourning practices. Tribal and linguistic differences are more important as cultural markers than State boundaries. This is almost the opposite of Western experience.

Discussion

There is a great need for further research in this area. Older NAC members come from cultures with significantly shorter life expectancy. Also many NAC members, especially refugees, have suffered chronic and acute health problems due to poor living conditions and the dislocation from their home countries - thus they will most likely present earlier than the general age cohorts to health services, including palliative care.

There are no current plans for further research, and more thorough processes will require a partnership with organisations such as the Migrant Resource Centre, Centacare or Colony 47 and the State and Federal departments working with refugee and migrant groups.

The research process and the findings are the points of discussion. Little other similar research has been discovered by internet and library searching, in what seems to be a new field of enquiry.

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An audit of acute wound care documentation of inpatients in a Tasmanian hospital

Objectives

Accurate wound assessment and wound documentation by ward staff is a central part of effective wound management and best practice. Overseas research suggests that wound documentation in inpatient notes is generally poor but little is known about the documentation of wounds in patient progress notes in Australian hospitals. This study takes up this issue and aims to investigate ward staff wound care documentation and determine how closely these compare to recognised standards.

Methods

The inpatient progress notes of 49 randomly selected inpatients requiring acute wound care were retrospectively audited for wound care documentation by hospital nursing and medical staff. An audit tool was developed using the Australian Management Association (AMWA) standards for wound care as a guideline. The notes were audited for wound care documentation at admission and at dressing changes.

Results

The audit results are for 49 inpatients. Fifty nine percent are males (n=29). Mean age is 54.5 years (SD +/- 21.3). The audit included 24 admissions and 122 dressing changes. The wound management plan is recorded at most admissions and dressing changes by medical and nursing staff. At admission the areas of wound assessment that are documented in less than 50% of admissions by medical and nursing staff are exudate, wound bed and dressing type. Wound margins and skin sensation are documented in less than 20% of admissions. At dressing changes the wound assessment areas that are documented by medical and nursing staff in less than 50% of progress notes are exudate, margins, wound bed, state of surrounding skin and dressing type. The areas that are documented in less than 5% of dressing changes by medical and nursing staff are wound dimensions and skin sensation.

Discussion

There is clearly an inadequacy of wound characteristic documentation when comparing it to the AMWA standards for wound documentation. Our study raises doubts about the validity of the wound management plan without a wound assessment to justify it. The use of a standardised wound assessment chart to be used during dressing changes may improve wound documentation and better inform the wound management plan.

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