

**Illawarra  
Division of  
General  
Practice**

**PO Box 1198  
Wollongong**



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## Newsletter of the IDGP Community Consultative Committee



### Community Consultative Committee

The Community Consultative Committee (CCC) is a group of community members who meet regularly with the IDGP and local GP representatives. The link opens the lines of communication between the community and GPs and allows items of concern and/or interest to be discussed. This is designed to foster understanding and goodwill between the consumers (users of medical services) and the medical fraternity (the providers of medical services).

If you have a concern with the provision of health services (eg. shortage of GPs) or require information that will help with your understanding of the provision of health services (eg. bilingual GPs in your area), or simply see a better way to provide specific services we are interested in hearing from you.

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### Editorial

- There is a second wave of H1N1 (Swine Flu) expected in 2010. Although mild in most people, the 2009 pandemic had a big impact on health services and our community. We can use the lessons learnt to help us manage the upcoming flu season.
- Dr Azam and the Fairy Meadow Medical Practice were the winners in the Family Doctor and Practice Award for 2009. Dr Jenny Smiley received an exceptional mention. Once again much effort by practices was put into entering their GP and/or practice for this award.
- Illawarra GPs are held in high regard. Comments by their patients highlight their kindness and skill in treating people not just as individuals but as members of families. Loyalty and satisfaction is often reflected by the length of time that they have been clients of the same doctor.
- Elizabeth Brandis has written about a new service to help carers of people with dementia deal with difficult behaviours, using practical strategies rather than medication.
- Helen Gapps has been a valued member of the CCC. She is retiring from her roles in the organisation and we wish her well in the future.

**Patricia Noferi  
Editor & Chairperson  
CCC**

## Pandemic H1N1 2009 ~ what can be expected in 2010?

Experts predict that a second wave of swine flu (H1N1) will hit Australia this winter. If it mirrors the Spanish Flu of 1918 it could be worse the second time around.

The H1N1 flu produced a mild illness in most of those who were affected during 2009, but a severe illness in some. Of those admitted to hospital, 20% were treated in Intensive Care units. 0 - 4 year olds were more likely to be hospitalised than any other group. Pregnant women were 3.2 times more likely to be admitted than the rest of the population and Aboriginal people were 7 times more likely to be admitted.

Those at high risk include children, pregnant women, Aboriginal people, people with chronic medical conditions and people with moderate to severe obesity (BMI >35).

Vaccination is also highly desirable for carers of children 0 - 6 months of age, community care workers, family carers providing direct care to vulnerable groups, and health care workers.



Infants 0 - 6 are unable to be vaccinated but a safe H1N1 vaccination is available free of charge from your GP (your GP may charge a consultation fee). The seasonal influenza vaccination includes protection from H1N1 and is now available. It is only free to those over 65 and vulnerable groups.

Although mild in most people, the 2009 pandemic had a big impact on health services and our community. We can use the lessons learnt to help us manage next season but we also now have the benefit of a free and safe vaccine.



Helen Gapps, long time Chairperson of the IDGP Community Consultative Committee and IDGP Board member retired from her positions at the end of 2009. Increased family commitments as well as her busy schedule of other interests have taken their toll on her available time.

For a retiree she crams a lot into her life including frequent trips to France to see her grandchildren. Helen has been an inspiring and dedicated member of the CCC which she joined seven years ago because of her difficulty in finding a new GP.



She has been most effective in supporting several ventures of the IDGP including headspace and the new GP super clinic, with her skilled letter writing and lobbying on behalf of consumers. She was also instrumental in doing research to develop the Family Doctor Awards. Helen's expertise and generosity will be missed. She has contributed significantly in representing the community on the IDGP board of directors and being involved in the planning of the Division's strategic direction.

Our best wishes and profound thanks go to Helen for her friendship and tireless hard work on behalf of the community.

## In praise of Illawarra GP's~ comments from patients...

The winner of the 2009 Family Doctor Awards was Dr Sajid Azam. He comes from a family of doctors – grandfather, father and four brothers were or are practising medicine. His dedication is such that he has not closed his books because he believes it is unethical to turn away a sick person. He says that he loves his work even though he works such long hours. Nina Azam, Sajid's wife, is his practice manager and great supporter of her husband as are the other members of the practice team.

Practice of the Year went to the Fairy Meadow Medical Centre with their patients praising their warm and friendly attitude and multicultural sensitivities.

As usual it was difficult for the judging panel to choose a winner from the nominations for the award. Popular solo practitioner Dr Jenny Smiley received an exceptional mention.

However in this competition it is the patients who were loudest in praise of their doctor.



Housecall is the newsletter of the Illawarra Division of General Practice Consumer Consultative Committee (CCC) in which current health issues are aired, and important health information, particularly as it relates to general practice is relayed to the public. Housecall is published three times per year.

Readers are invited to submit suitable articles for publication free of charge. If you have a service of benefit to the community, or that will support GPs in supporting our community; or just have some general information that will be of value, please feel free to submit for consideration.

To speak to a representative of the CCC please contact us on (02) 4220 7600 or email us at [ccc@idgp.org.au](mailto:ccc@idgp.org.au) and you will be put in touch with a representative who will be pleased to speak with you.

If you wish to be either added or removed from the mailing list please contact the Division on (02) 4220 7600 or email to [ccc@idgp.org.au](mailto:ccc@idgp.org.au). If you would like to receive this newsletter electronically, please email [ccc@idgp.org.au](mailto:ccc@idgp.org.au).

**General Practitioners provide the coordination of patient care and the entry point to the Australian health care system.**

They deal with the whole spectrum of health and illness. They have continuing interactions with patients, act as gate keepers to the health system and fulfil a role as 'physicians of the soul'.

It appears that this ideal is being well met in the Illawarra by the comments of people about their GPs, in the Family Doctor Awards nominations.

The following quotations are just a few that were expressed one way or another many times. They are the voice of the public.

- 'Kind, understanding and reassuring'
- 'Listens and relaxes me and puts my mind at ease'
- 'Most caring compassionate doctor'
- 'Doesn't matter if I am sad or in tears when I walk in; but he always makes me laugh and I always walk out of his room smiling'.
- 'Always interested in all aspects of our family'
- "Always friendly and does home visits. And then she likes to have a chat about general things, which makes me feel comfortable'.
- 'Feels like a friend without crossing the doctor/patient line'
- 'Home visits; remembers my family'
- 'Always willing to help, listens, has understanding, and is friendly and reliable'

## Dealing with dementia ~ How a telephone call can help

**D**ementia Behaviour Management Advisory Services are funded by the Australia Government and are targeted to people with severe and persistent Behavioural and Psychological Symptoms of Dementia (BPSD) in Residential Aged Care Facilities or in the community. In NSW, DBMAS are provided through a 24 hour/Telephone Assistance Line: 1800 699 799.

**T**he aim is to help improve the quality of life for people with dementia and their carers where the difficult behaviour impacts on the ability of the carer to provide appropriate care. There is emphasis on exploring the causes of the behaviour and non-pharmacological strategies in the first instance. BPSD are symptoms of disturbed thought, content, mood and behaviour frequently occurring in people with dementia (IPA 1996). This may have previously been termed 'Challenging Behaviour'. Severe and persistent BPSD impact on the care provided or cause distress or harm to the person with dementia or their carers. Some examples of BPSD are:

Severe physical agitation:

Pacing, anxious, worried, unsettled; carer unable to reassure patient.

Acting on misidentification:

Believing that the carer is someone else; not know that a key is to open a door; not knowing which utensil to use to eat

Physical /or verbal aggression:

Threatening harm, screaming, swearing, hitting, kicking, spitting, dangerous to be near

Wandering:

Moving around the house at night, pottering about the house during the day, moving things from place to place aimlessly

Resistance to care:

Refusing to allow help with the shower, or attending to personal hygiene or dressing or food refusal: medication refusal

Shadowing:

Following carer or other ceaselessly; not letting carer out of their sight

Verbal disruption:

Interrupting others' conversation, calling out

Sexual disinhibition:

Inappropriate social behaviour of a sexual nature involving self or towards others

Intrusion:

Intruding into other peoples' rooms or personal space.

Absconding:

Running away, escaping from care; deliberately or by chance

When there is a sudden change in behaviour, the GP will explore for possible causes of a delirium. Sometimes it is the carer's perception that the behaviour is 'challenging'. Their issues have to be explored so they can continue in their caring role. The DBMAS specialise in the assessment and management of BPSD and will help carers to better understand the underlying influences for the behaviour that is observed.

The local DBMAS clinicians can assist by:

- Assessment, short term case management and care planning for identified clients.
- Tailored information and education on BPSD
- Support, mentoring and modelling for carers to help them in their interactions and care for people with BPSD

For general information on dementia, contact the National Dementia Helpline on 1800 100 500. Where behaviour is causing distress and impacting on care, call the DBMAS on 1800 699 799.

