



Local Integrated  
Primary Health Care



CHECKUP

# Queensland Primary Health Care Network

Improving the Health and Wellbeing of  
Queenslanders

# Social Prescribing: Lifestyle Modification in Darling Downs West Moreton PHN region



**Kimberley Lloyd-Jones**

Health Strategy Consultant

Darling Downs & West Moreton PHN



**Fran Keeble-Buckle**

Statewide Clinical Governance Lead

CheckUP



**Mario Gupta**

Primary Health Consultant

Larter Consulting

## Background to the project

**First year** funded by CheckUP (DoH), HP surveys undertaken in DDWMPHN, indicated lack of - knowledge of services, confidence



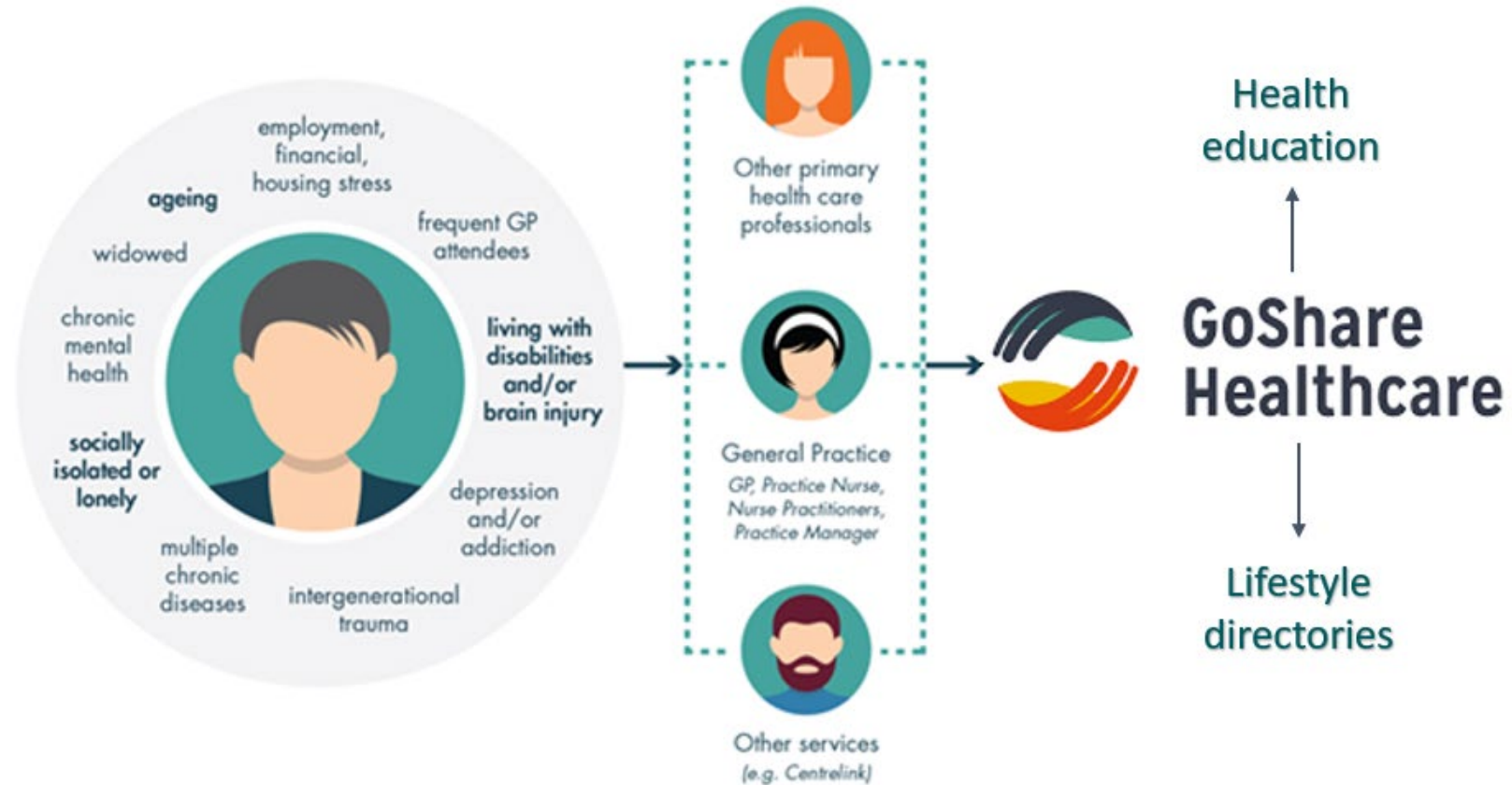
**Second year** funded by CheckUP (DoH). COVID shifted focus +additional challenges, literature reviews, developed tools , online (GoShare) and webinar education



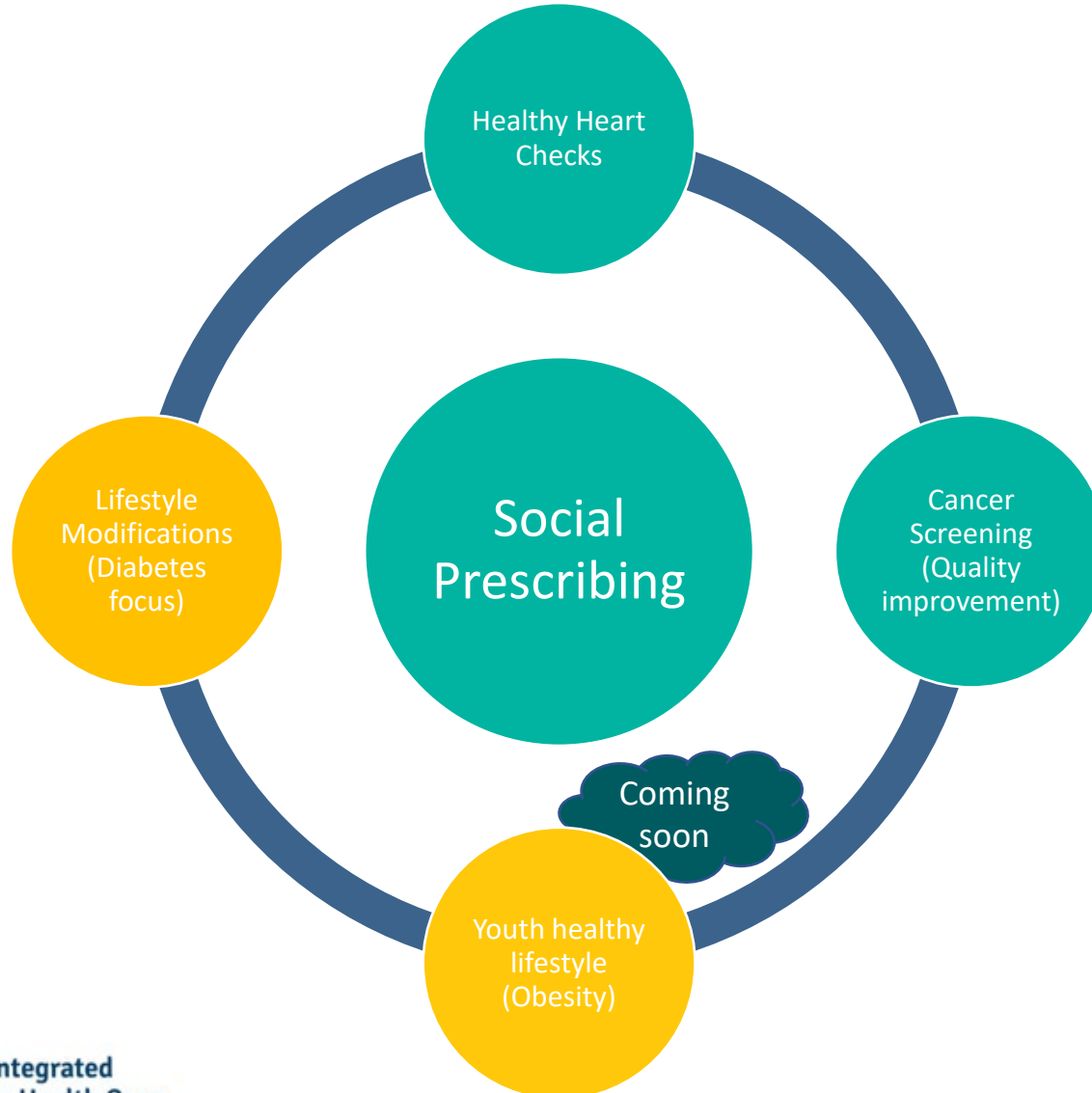
**Third year** funded by CheckUP and PHN. Aim to test and evaluate tools in practices.



## Larter's experience in social prescribing work...



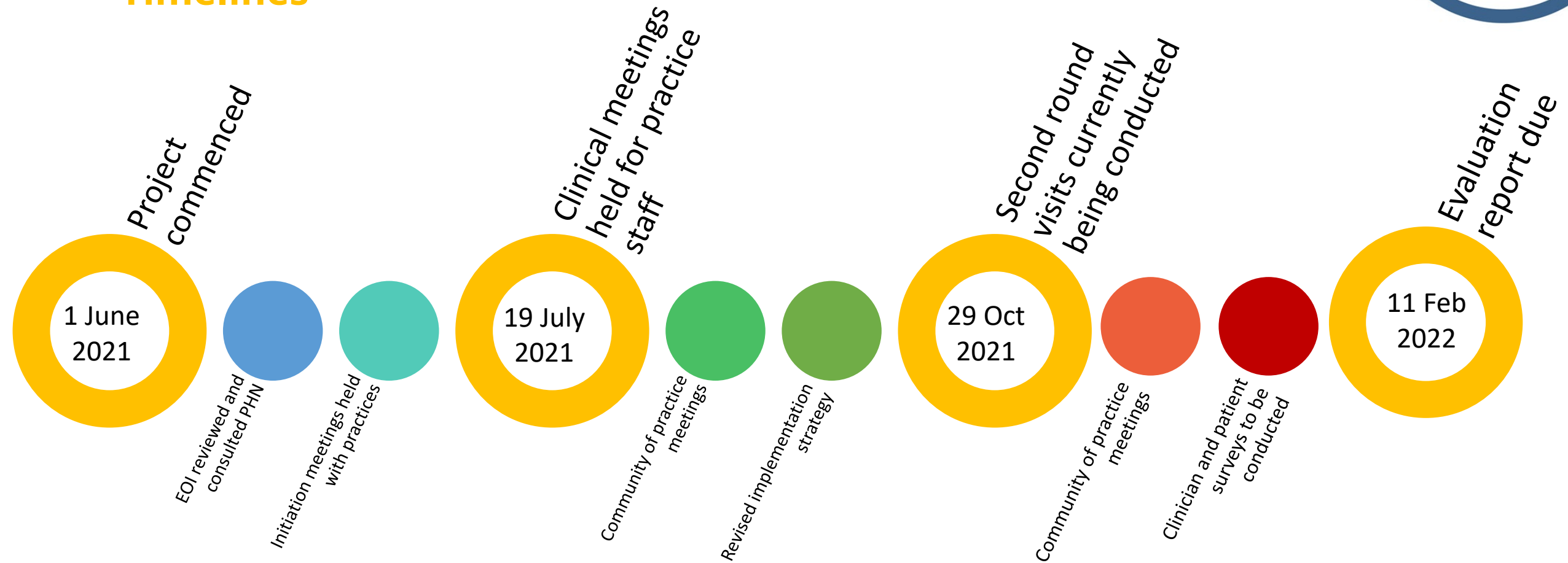
## Darling Downs & West Moreton PHN focus on social prescribing



## Project Deliverables

- Engage a minimum of 15 practices across the Darling Downs and West Moreton PHN
- Social Prescribing Education – model an individual program for the practice, including how they will recruit patients
- Diabetes and chronic disease focus (each practice different)
- Assisting with patient identification – PenCS or in practice with tools:
  - Utilisation of GoShare Tiles and Bundles –lifestyle directories ‘tiles’ for Goondiwindi, Ipswich, Lockyer Valley, Scenic Rim, Somerset, South Burnett, Southern Downs, Toowoomba and Western Downs.
  - Green Prescriptions – green script pad

## Timelines



## Practice Engagement

- Social Prescribing Education – model an individual program for the practice, including how they will recruit patients
- Diabetes and chronic disease focus (nuanced to practice setting)
- Assisting with patient identification – PenCS or in practice
- The tools used:
  - Utilisation of GoShare Tiles and Bundles –lifestyle directories ‘tiles’ for Goondiwindi, Ipswich, Lockyer Valley, Scenic Rim, Somerset, South Burnett, Southern Downs, Toowoomba and Western Downs.
  - Green Prescriptions – green script pad

## Continued practice engagement

- Ascertain feedback of what is working, what isn't working, and additional support required to increase engagement for the project
- Education provided on the use of GoShare and how it can be used to send recalls and reminders
  - 45 – 49 year old health checks
- Medicare billing schedule education on item numbers and the use of social prescribing in CDM
  - 699
  - 701, 703, 705, 731 and 732
- Assisting with patient identification – PenCS or in practice

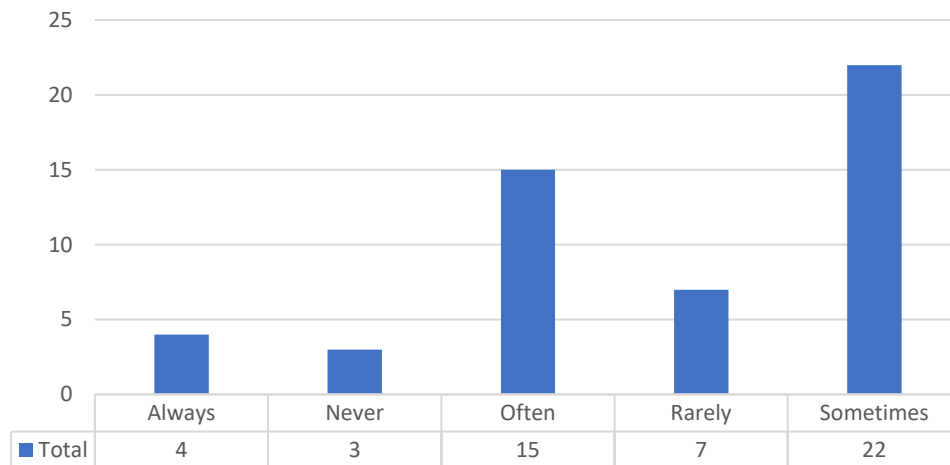
## Practice barriers

- Six practices were unable to participate in the Model due to issues such as workforce shortages, concerns for staff welfare (fears of burnout, low staff morale, increased workload with the COVID-19 vaccine rollouts leading to their inability to take on additional work).
- GPs from some practices were not comfortable with relying solely on GoShare but recognised the value of referring patients to health resources found on the platform.
- Lack of integration of GoShare with clinical/practice management software was identified as a major barrier to participation by practices in the initial stages of the implementation.

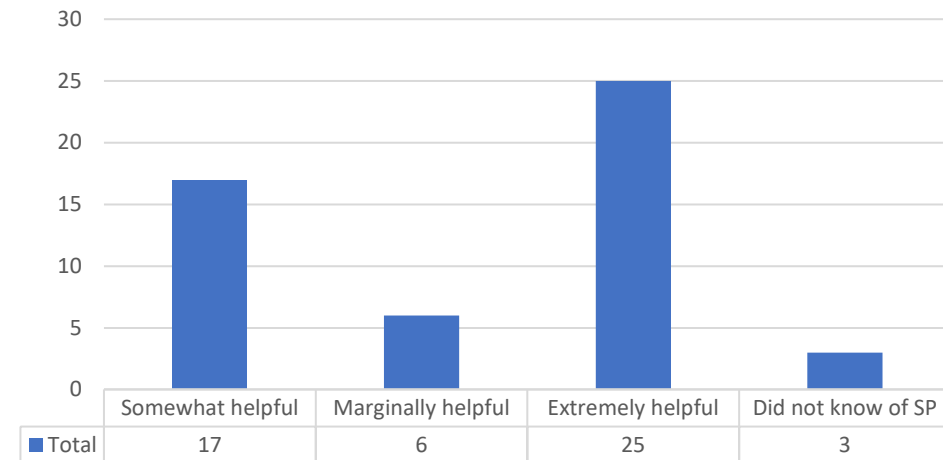
## Early findings from GP pre-survey

- 51 responses have been received so far from practicing general practices
- Respondents were unanimous in their opinion that the education provided to them about SP-LMP in clinical meetings was “just right”
- More than half of all respondents rated their confidence in providing a social prescription and knowledge of LMP in their communities as above average (more than 6 on a 10-point scale)

Frequency of referrals to non-healthcare service interventions (before engaging with the program)



Extent to which respondents believed SP-LMP is helpful in improving health outcomes for patients



## Practice Feedback

### General Practitioners

- **First Visit:**
  - Limited knowledge of social prescribing
  - Reluctant to use a new program such as GoShare
  - Wanted to have access to GoShare to familiarise themselves with content in bundles
  - GoShare resources in other languages
- **Second Visit:**
  - Effective use of GoShare bundles  
Example: Dr Mahmood from Gatton
  - Minimal capacity

### Nurses

- **First Visit:**
  - GoShare adds value to conversations held with patients in CDM
  - Do not have to keep using outdated resources which were photocopied
- **Second Visit:**
  - PenCS to determine patients with outstanding health assessments
  - Recalls and reminders for 45-49 year old health assessments

### Practice Managers

- **First Visit:**
  - RTF of ERx for clinical software
  - Online appointment booking embedded into GoShare messages
  - Training provided to admin staff on how to use GoShare
  - Exercise prescriptions scanned into patient file
- **Second Visit:**
  - Staff morale is at an all time low
  - Doctors and nurses are heavily focussed on catching up with overdue health assessments and CDM

## Questions and feedback