

Pegasus Health is a proud supporter of the University of Otago Summer Studentship Programme. As part of our work to encourage more medical students into careers in General Practice each year, a number of students are engaged to undertake research for Pegasus Health.

This report provides a brief summary of each of the four projects that were completed over the 2015/ 2016 summer.

- Telephone based brief intervention for smoking cessation
- Predictors for non-attendance at Pulmonary Rehabilitation
- Treatment guidelines for Cellulitis
- Knowledge and attitudes towards Green Prescriptions

More detailed information can be obtained on request from the contact person for each project.

If you would like any further information on the Summer Studentship Programme please contact:

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### Evaluation of a Telephone Based Brief Intervention Model for Smoking Cessation

**Student:** Anna Hulme

**Supervisors:** Leigh Aston (Pegasus Health) and Dr Ruth Savage (University of Otago)

**Aim:** To evaluate the quality and effectiveness of Pegasus Health's recently established telephone brief advice service

**Summary:** In May 2015, Pegasus Health began a telephone-based brief intervention service where enrolled patients, known to be smokers, are called and offered cessation advice.

Summer student Anna Hulme measured how satisfied general practice teams involved with the programme were, and whether it was helping more people attempt to stop smoking. She found the majority of general practice teams were either satisfied or extremely satisfied, with 91% of survey respondents saying they would recommend the service to their colleagues.

More than 13,000 people were contacted by the service and offered brief advice, with 1,800 referred on to a cessation support service. General practices who engaged with the service were more likely to have increased in-house smoking cessation support to patients compared to those not involved with the telephone service. General practice staff surveyed was generally supportive of extending the service to include routine re-calls such as cervical screening.

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### Can non-attendance at Pulmonary Rehab be prospectively predicted using a question based scoring system?

**Student:** Dean Ramage

**Supervisors:** Louise Weatherall (Pegasus Health) and Dr Mike Epton (University of Otago)

**Aim:** To analyse the available data on the reasons of non-attendance and create a questionnaire to facilitate the clinician to offer the appropriate level of support for the PR patients.

**Summary:** Medical student Dean Ramage worked with the Canterbury Clinical Network Respiratory Services Team to research the predictors of non- attendance to pulmonary rehabilitation.

All patients who were referred to a pulmonary rehabilitation programme who failed to attend between July 1st 2014 and June 31<sup>st</sup> 2015 were recruited. A telephone questionnaire was developed and telephone interviews recorded and transcribed for 75 participants. Two important issues identified were younger patients who worked could not access a pulmonary rehabilitation programme and there was not enough information given out to participants at the time of referral.

Deans' recommendations will inform the on-going quality improvement of the pulmonary rehabilitation programme to encourage uptake of this beneficial activity for people with breathing difficulties.

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## About the Summer Studentship Programme

Each year the University of Otago, Christchurch hosts a Summer Studentship that is made up of a number of research projects.

The studentships are of 10 weeks duration, from early November until the end of January.

Participating students are paid an educational grant.

Projects are sponsored by charitable or business organisations.

4<sup>th</sup> year medical students at the University of Otago, Christchurch are eligible to apply for these studentships.

If you would like any further information on the University Summer Studentship Programme please see the University website:  
[www.otago.ac.nz/christchurch/research/generalpractice/studentships](http://www.otago.ac.nz/christchurch/research/generalpractice/studentships)

## Retrospective study of 50 patients with cellulitis treated under Acute Demand Management Service looking at duration of intravenous and oral antibiotics (prior to and/or subsequent to intravenous treatment) and time of switch between oral and intravenous.

**Student:** Tara Miller

**Supervisors:** Dr Belinda van Gruting (Pegasus Health) and Professor Les Toop (University of Otago)

**Aim:** To determine the duration of intravenous and oral antibiotic treatment for all patients with cellulitis treated under ADMS.

**Summary:** This retrospective descriptive study involved selecting 50 consecutive patients who were referred to the ADMS by their general practitioner (GP) or by the Bealey 24 hour surgery. Data was extracted from the patient notes and analysed with the antibiotic regimen the patient received and clinical features on referral noted. These were then compared to current guidelines in the literature.

Out of the 50 patients, 20 were put straight onto IV antibiotics without being trialled on oral antibiotics first. Of those put on oral antibiotics the median amount of time before being referred for IV antibiotics was two days. The median duration on IV antibiotics was three days, which is within the recommended time period. Most patients should show significant improvement after 2-3 days of IV antibiotics at which point they may be switched back to oral antibiotics. The median time on oral antibiotics post IV antibiotics was seven days.

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## Knowledge and attitudes of general practitioners and practice nurses to the Green Prescription Programme

**Student:** Sam Kennedy

**Supervisors:** Dr Lynley Cook (Pegasus Health) and Dr Ben Hudson (University of Otago)

**Aim:** To understand the knowledge and attitudes of general practitioners (GPs) and practice nurses (PNs) to the Green Prescription Programme

**Summary:** Pegasus Health part funds the delivery of the Canterbury Green Prescription Programme (GRx). With referrals into the service running under capacity, Sam Kennedy completed focus groups with 3 high and 5 low referring general practice teams to determine their understanding and use of the service.

Through coding and thematic analysis of the interviews, it was found that willingness to refer to GRx was influenced by: practice philosophy towards/against exercise; knowledge of GRx; practitioner's personal exercise behaviours; feedback from patients; motivational interviewing skills; time prioritisation in consultations and; physical access in rural areas.

Providing health professionals with education about GRx and motivational interviewing, creating connections with GRx staff and creating a participant information brochure were amongst the recommendations to improve service provision. Offering face-to-face services in rural areas was also suggested to help improve access to GRx for Cantabrians.

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