

Tacking preventable morbidity and mortality requires integrated working between General Practice and Public Health: An evaluation of a pilot scheme in Dorset

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Introduction

Health promotion and disease prevention are the pillars of general practice and public health, yet these two organisations usually work in isolation with different strategic plans, funding streams, staff and buildings. Previous work has acknowledged the need for closer collaboration but identified barriers such as 'mutual suspicion', lack of knowledge, different approaches and working patterns. GPs also report a lack of skills to deliver health promotion effectively within their consultations (1). We outline a 1 year pilot of a GP Public Health Fellowship scheme designed to integrate primary care more fully into the work of the Public Health Dorset. Over the course of the year, the GP fellows were involved in a range of projects, and promoting the importance of physical activity for health and wellbeing was a priority area for both. One GP developed a programme of education to upskill primary care clinicians in the importance of physical activity, and one promoted 'The Daily Mile' whole school exercise approach across primary schools in Dorset (2).

Why is physical activity important?

In the UK, low levels of physical inactivity are responsible for 1 in 6 deaths and a significant risk factor for long term conditions such as heart disease, stroke, diabetes, breast and colon cancer. Physical activity can improve mental health, quality of life and wellbeing. Worldwide, the population is becoming more inactive, and promoting the importance of physical activity in the *prevention* and *treatment* of disease is now a priority area for WHO (3).

Why is it important for GPs to promote physical activity?

1 in 4 patients would be more active if advised by a GP or a nurse.

With an estimated 340 million consultations every year in England, the potential for improving the health of the nation through lifestyle change is enormous. However, recent research, which was headline news in a national newspaper, has shown that many GPs in England lacked awareness of national guidelines and did not feel confident discussing physical activity with patients (4,5,6).



In response to this, we developed a programme of education to upskill local doctors in the importance of asking about and promoting physical activity within their consultations, utilising Public Health England Physical Activity Clinical Champions training programme. Over 100 doctors attended workshops on physical activity, brief motivational interviewing and the local LiveWellDorset (LWD) service. Feedback has been consistently excellent and, as a result, education on primary prevention through lifestyle change has now been incorporated into the Dorset GP Vocational Training Scheme, and we have another 140 clinicians booked on workshops in 2018/19. In terms of impact, we have seen an increase in GP referrals to LWD of about 20% over the past 6 months.

"Extremely useful .. Made me think about diet and exercise in a different way"

"Excellent talk and an area that I have not had teaching on before ... important in order to be able to advise and motivate our patients more"



How did we promote exercise to school aged children?

The GP Fellow promoted 'The Daily Mile' to local schools which resulted in new schools joining the movement and subsequent health gains for more than 600 children in Dorset who are now more active. The Daily Mile Movement is a free, national initiative for primary schools, to encourage all children to jog or run for 15 minutes during the school day, in addition to playground activity during break and lunch. It has been recognised by the UK Governments 2018 Childhood Obesity Plan.

Nearly a third of children (aged 2-15years) in England are overweight or obese, and only 10% 2-4 year old children meet national guidelines for physical activity. Feedback from local schools has been excellent:

"We have noticed a significant improvement in children's focus and concentration first thing in the morning especially with our key stage 2 children who settle much more quickly to tasks" (teacher feedback).

Evaluation of Dorset GP Public Health Fellowship scheme

Written reflections and semi-structured interviews were conducted to evaluate the impact of the fellowship scheme. The predominant theme from both parties was that GP Public Health fellows had helped forge collaborative links between general practice and public health. The GPs were able to share their knowledge of the practical realities, and constraints, of working in primary care to help shape public health thinking and the practical implementation of projects.

The challenges were largely logistical with the fellows only working one day/week. The GPs felt it took them time to understand the political world in which public health operates and to adjust from the pace of working in a GP surgery, making decisions and management plans in 10 minute slots with successive patients, to working in a public health office which required collaboration with multiple people across organisational and geographical boundaries. They developed an understanding of the different levers required to effect change at a population level, which included an ability to influence strategically, with timelines being months rather than minutes.

Conclusions

In 2015, approximately 25% UK deaths were considered avoidable. There is an urgent need for sustained, collaborative partnerships between general practice and public health. Clinicians need good quality training on the importance of lifestyle change and the skills to discuss the importance of diet and physical activity during their consultations. Without this, we will struggle to meet the physical and mental health needs of our aging communities and reduce the current multi-morbidity and mortality that is largely related to preventable disease. For further information, please email Sam Crowe at S.Crowe@dorsetcc.gov.uk.

Selected References

(1) Peckham, S., Hann, A. & Boyce, T. (2011). Health promotion and ill-health prevention: The role of general practice. *Quality in Primary Care*, 19(5), 317-323.

(2) <https://thedailymile.co.uk>

(3) More active people for healthier world: The Global Action Plan on Physical Activity 2018-2030. WHO <http://www.who.int/ncds/prevention/physical-activity>

(4) Chatterjee, R., Chapman, T., Brannan, M & Varney, J (2017). GPs knowledge, use and confidence in national physical activity guidelines and tools. *BJGP*, 67(663), e668-e675

(5) <https://www.theguardian.com/society/2017/aug/15/gps-in-england-unconfident-discussing-physical-activity-with-patients-report>

(6) <https://www.gov.uk/government/publications/start-active-stay-active-infographics-on-physical-activity>

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