

Providing individual interventions supported by Primary Healthcare funding.

#### Acknowledgement

I would like to acknowledge that we meet on the land of the Arrernte people. I pay my respects to Elders past, present and future and thank the Arrernte people for having me on their country today.

#### Who I am.

Who is my mob?

Where am I now?

My background

How long have I been in this role?

What my hopes are for the future.



# About Pangula Mannamurna Aboriginal Corporation

- Located in Mount Gambier in the Limestone Coast South Australia
- Consists of 38 staff
- Currently has 1057 current patients
- > Pangula Mannamurna provides access to our:
  - medical clinic which consists of Doctors, Nurses, a midwife and Aboriginal Health Worker practitioners. –
     includes outreach services to Naracoorte, Kingston, Bordertown and Millicent
  - Social emotional wellbeing team consisting of a Mental health clinician, Alcohol and other drugs worker, counsellor and a case manager
  - Integrated care team
  - Strong fathers, strong families program
  - Nunga playgroup
  - Access to visiting specialists
  - Tobacco Treatment Specialist and NRT program
  - Tackling Indigenous Smoking team



### Our Healing Circles



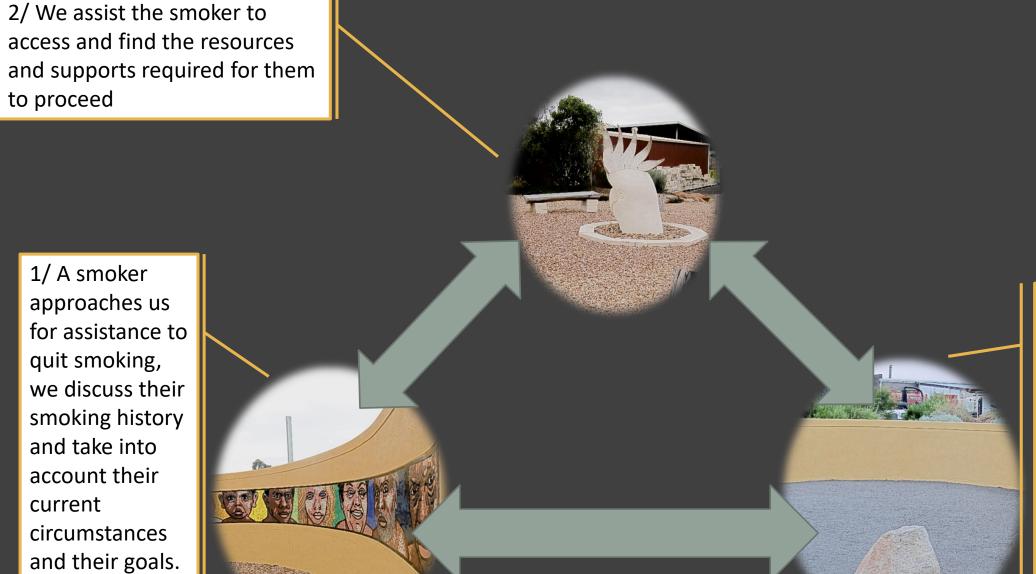
Ceremony and Talk



Hunt and Gather



Song and Dance



3/ Small successes happen along the way and we encourage these people to celebrate these increasing motivation for the person

#### Our community

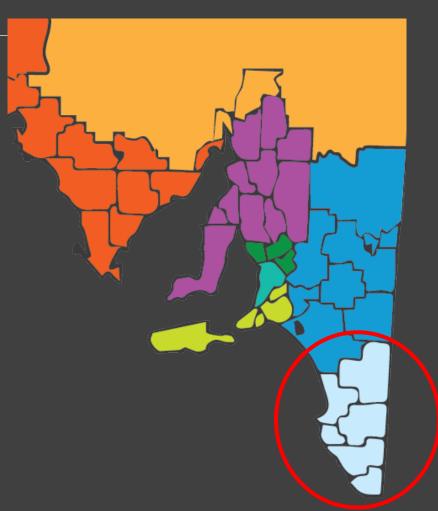
The Limestone Coast is home to the second largest city in SA and has a total population of 66,698

Aboriginal/Torres Strait Islander population in the Limestone Coast

Estimated >1219

#### Of the population:

- > 53% are males
- 65% of the total Indigenous population (793 /1219) are between 0 and 35 years
- However of this 70% (559) are between the ages of 0 and 19 years of age.



#### How we deliver individual interventions.

- ➤ Tobacco Treatment Specialist
- ➤ Position funded by Primary healthcare funding
- ➤ NRT program funded by reimbursement for a study
- ➤ Supported by



# Why we use individual interventions in our community.

- Health provider reasons
- Community preference
- Confidentiality among community

- Culturally appropriate service
- > Time and space
- Supports

Refer to GP

At Referred to the Quitline

appointment

Referral is received / client presents

Appointment booked

## Nicotine Replacement Therapy Program Began in 2017

Some barriers for clients that complicated their access to assistance were noted as:

- > A lack of education
- ➤ Cost of NRT
- Feeling of shame
- Clients wanting to speak to a person they know.
- ➤ Not being taken seriously
- Clients losing their motivation
- ► limited opportunities for clients to be provided assistance
- >GPs and other health providers unable to provide correct or up to date information



#### Nicotine Replacement Therapy Program

#### Aimed to:

► Increase quit attempts

- Reduce exposure to second and third hand smoke
- Lead to longer duration quit attempts
- Reduce the amounts smoked where complete cessation has not occurred
- Increase individuals seeking assistance
- Accessible to all Aboriginal and Torres Strait Islander people in the Limestone Coast
- Increase reach and community engagement

► Increase access to quit support

Improve quality to services for our community

Referral received

Pre- Consult

Discussion about suitable NRT and decision made

Collection and Use of NRT

Follow up occurs

Successfully quit smoking

Maintenance

- Appointment
- Nicotine dependence assessment
- Client sees GP
- Client referred to GP for prescriptions OR
- Client provides receipt for first lot OR
- Purchase order provided for client partial or full support

- Client can collect directly from the chemist
- Clients are taught correct way for use of NRT and encouraged to advise immediately if there is any issues
- at 3-4 days post beginning NRT
- 1 x week for 6 weeks
- 1 x fortnight 6 weeks
- Optional 1 x month for up to 6 months

 If client does not succeed in quitting or relapses after being quit they may be eligible to access the program again providing there is no evidence of NRT misuse

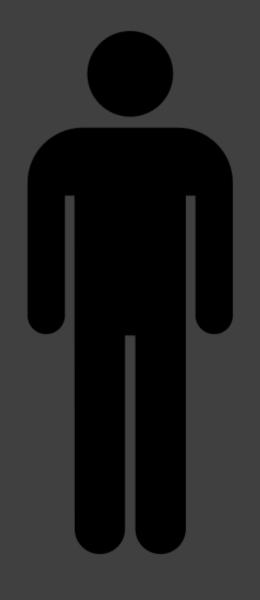
## Debbie's Success Story

## Data and Results

2016 vs 2019

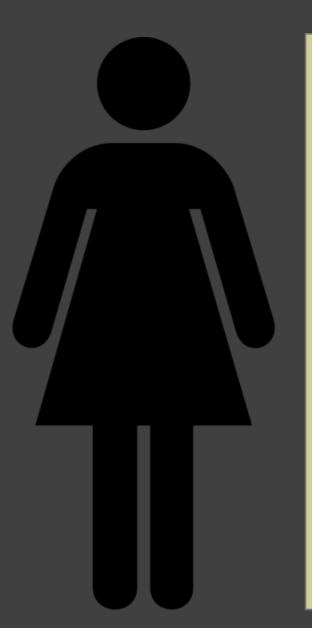
Current smokers 148 vs 196

> Ex smokers 29 vs 36



## Males represent 49% of Pangula Mannamurna's clients

Females represent 51% Of Pangula Mannamurna's clients



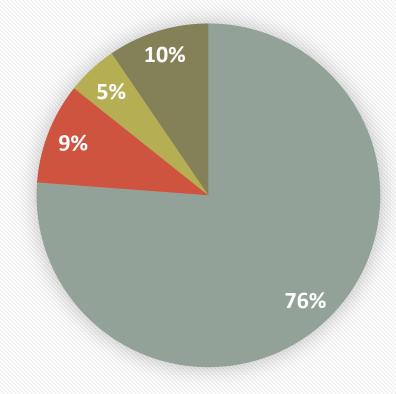
2016 vs 2019

Current smokers
195 vs 233

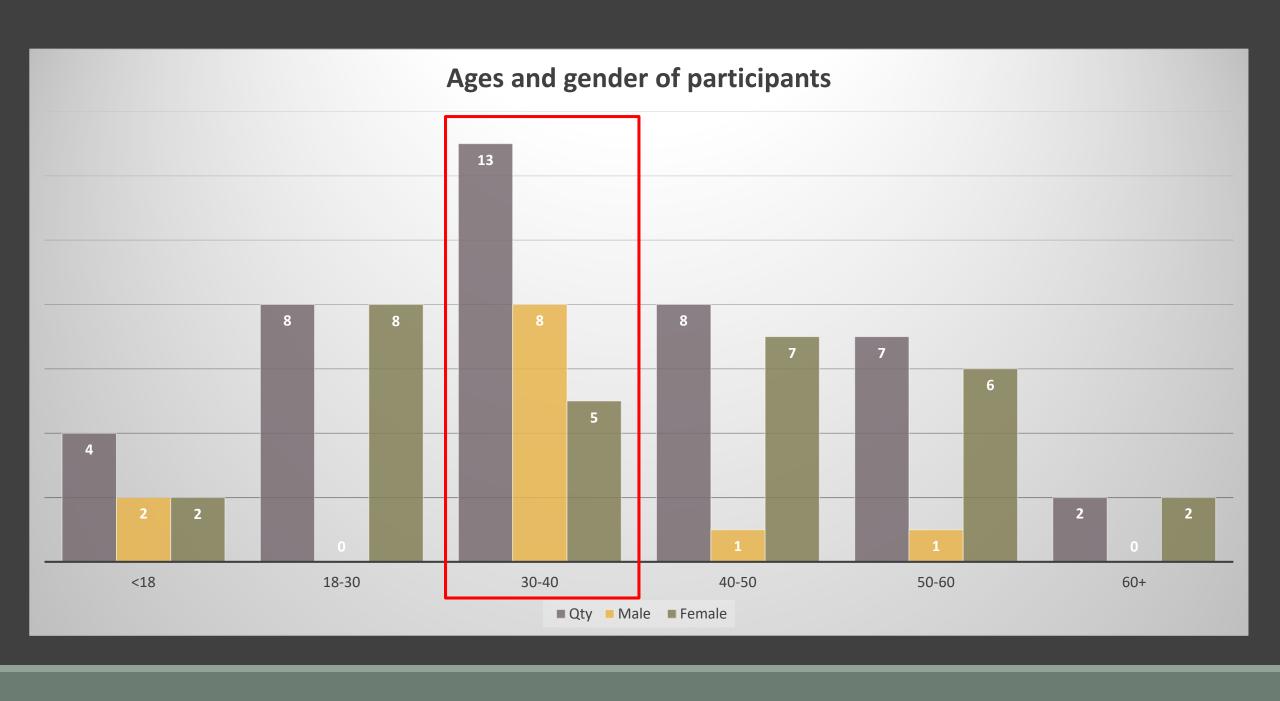
Ex smokers 44 vs 45

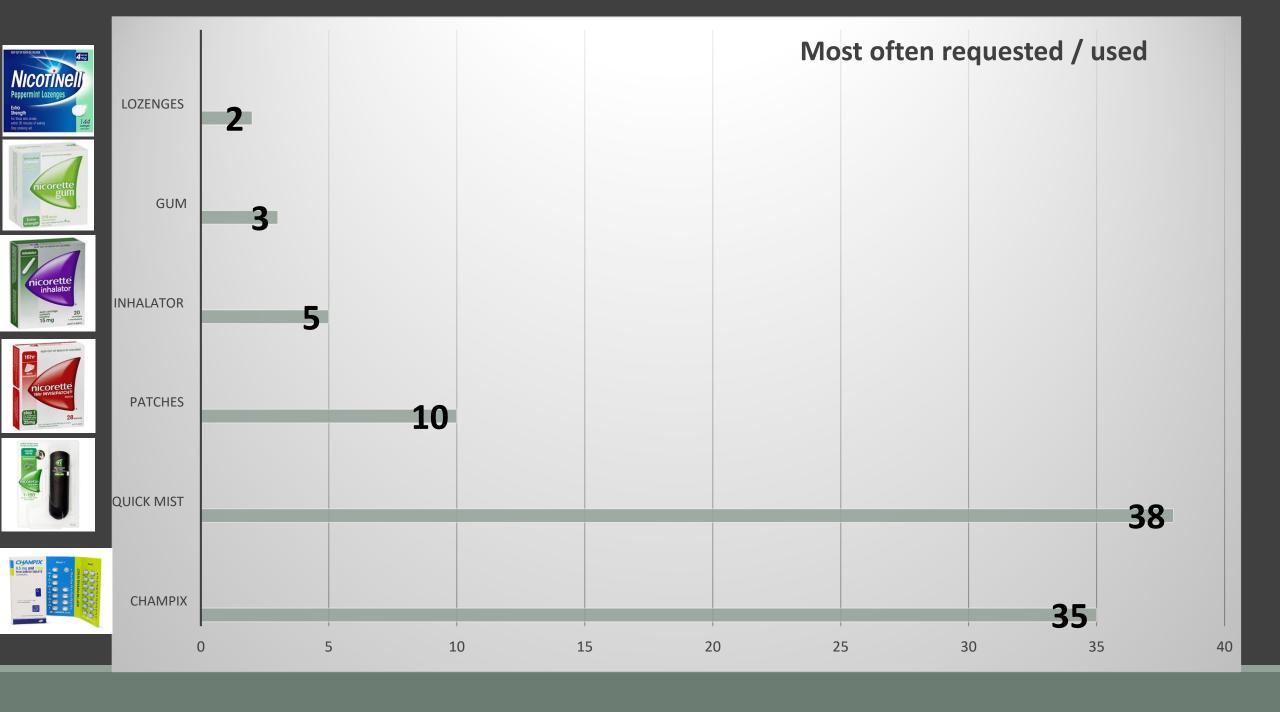
# Since beginning Individual interventions

#### Referral source



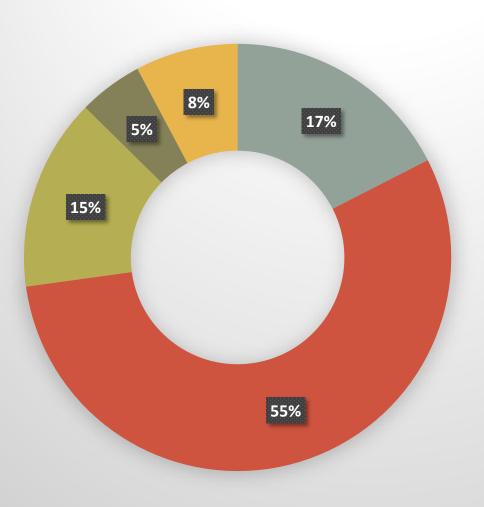






#### Attendance

June 2018 - March 2019



- booked and attended
- attended extra
- cancelled by patient
- booked did not attend
- rescheduled / cancelled by service

#### **CURRENT STATUS OF THOSE ON MY CLIENT LIST**

