

# **Community Health Needs and Resources**

Chronic Disease in the Burgeo Primary Health Care Area Focus Group Results

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# Chronic Disease in the Burgeo Area Focus Group

#### Introduction

### **Background**

The purpose of the Community Health Needs and Resources Assessment (CHNRA) focus groups is to provide further insight into the issues identified through the CHNRA surveys. Survey outcomes from the Burgeo/Ramea area indicated that there should be continued emphasis on health promotion and disease prevention. This was evident when the top three health problems identified were among examples of chronic disease (cancer, diabetes, and blood pressure). Based on these survey outcomes, chronic disease was identified as a topic for further exploration. This report provides a summary of the focus group related to chronic disease.

#### Methodology

A focus group was conducted in the Burgeo/Ramea Primary Health Care area, to further explore the topic of chronic disease with residents from the area. A discussion guide (Appendix A) was developed to identify the process and content for the focus group. The Regional Manager Chronic Disease Prevention and Management- Diabetes Service was identified as a key stakeholder and was also involved with the development of the discussion guide. Previous clients of the Improving Health: My Way Program were identified as potential focus group participants based on their involvement and knowledge of the focus group topic. Other participants were identified with the assistance of the Community Health Manager, local nurses and the Manager of Calder Health Care Center. The Community Health Manager organized the focus group and potential participants were contacted by telephone to request their participation in the focus group and to ensure that the times and locations proposed were convenient. The focus group was facilitated by the Community Health Manager, with support from the CDPM Manager (Diabetes Focus). The discussion guide was utilized. Following the focus group, the Community Health Manager summarized the discussion of each question. The summary of responses was sent to participants to ensure that the summary accurately reflected the discussion and that no issues were misinterpreted or missed. The following sections provide a summary of the discussion from these focus groups and a discussion of the themes that emerged.

#### Results

The Chronic Disease focus group was held on December 7, 2016, at Calder Health Center in Burgeo and there were seven participants. Each participant either had a chronic disease or was a relative of someone with a chronic disease.

Question 1: Why do you feel chronic disease was identified in the CHNRA that was done last February 2016?

#### Summary of Responses:

Respondents indicated that travelling the long distances on a highway that has been under numerous repairs and no cell phone coverage is often stressful. Travel expenses were also noted to be significant as depending on the time of appointments, time of year, and location of the appointment many

individuals must stay in a hotel to ensure they are able to get to their appointment. Respondents also feel the loss of services, such as the ability to receive your chemotherapy treatment at the local hospital, has heightened the community awareness of having to deal with chronic disease. There is often confusion due to lack of communication with referrals and follow up with specialists and procedures.

Question 2: What kinds of things need to happen in your community to help you and other community members cope with chronic diseases and stay healthy?

#### Summary of Responses:

Participants report that being able to discuss their concerns and feelings about their disease processes would be beneficial. Many stated that when they go to their family physician or a specialist they are advised to discuss or identify one problem only and to make another appointment to discuss others. Participants say that it would be helpful if someone could take the time to listen and try to understand what they are feeling and how to help.

Question 3: Do you feel age, financial situation, level of education or family support has an effect on your ability to cope with a chronic disease?

#### **Summary of Responses:**

All participants agreed that finances, family and education all plays a part in an individual's ability to cope with chronic disease. However, they also acknowledged that have to take some responsibility to learn to cope.

- a. What things have you found to be most effective in helping manage your health condition?
  - Overall, participants felt that it depends on the individual to utilize the information which is given to them.
- b. Do you think there are things that people could do themselves that would keep them healthier?
  - The individuals agreed that when give the information to make them healthier then they have to make the commitment to change.
- c. Do you think there are things that Western Health could do to help people with chronic disease
  - Participants identified that if waitlists are so long for specialists then Western Health should get more specialists.

Respondents indicated that communication with departments like mammograms, CT, and specialists are difficult, especially, if unable to attend an appointment due to weather or emergency. They reported that they often have to wait for clinics to be open before they can call, and that they have to get the cancellation faxed in from hospital. It was reported that often residents leave early to ensure they can make an appointment in Corner Brook or Stephenville when health providers call to cancel an appointment, and are unable to reach

them. As a result, individuals arrive at a scheduled appointment, after significant travel and expense, only to find out the appointment is cancelled.

Respondents were frustrated that physiotherapy is not available at Calder Health Center even though there is a designated room at the hospital for it. They suggested that if a physiotherapist is not available for the area then consideration should be given to having physiotherapy aids to help people with their exercises.

d. Are there any local groups or associations that help people living in Burgeo with chronic diseases?

Respondents indicated that the HELP committee has walks and luncheons for seniors sometimes but they don't organize any support groups. Other local groups included the 50+ club hosts card games. The ice rink is often used for walking but not ideal due to the concrete floor. Local people offer a walking video and aerobics at the fire hall and Zumba at the school gym.

Question 4: Of all the things we have discussed today, what is the most important to you?

#### Summary of Responses:

The ambulance service has been satisfactory for years but the fact that it no longer travels at night time and the fact that the changes were not communicated to the community as a whole was frustrating for respondents. The communities was advised there were physicians coming to the town in the near future, but are apprehensive, given what has happened with other services. Residents reported that they will not believe it until they are physically present in the community. Participants did express thanks that they have had 58 years with a physician and no interruption in service.

Question 5: Is there any area that we haven't discussed that you feel we should?

#### **Summary of Responses:**

Ultimately, the services provided and the services that have been reduced or discontinued have affected the whole community. It is not a new concern as such but it is an ongoing concern since the population is not getting younger.

#### **Discussion**

The Chronic Disease Focus group that was completed in Burgeo on December 7<sup>th</sup>, 2016 at the Calder Health Care Centre involved seven women from the local area. Following are the themes that emerged through the discussion.

<u>Theme #1: Communication</u>— Throughout the discussion with the participants, it was identified that respondents feel there is not effective communication between the patients and health care professionals. Different scenarios were discussed and the lack of communication between follow-up from procedures and referrals were often the source of confusion and frustration. Often the participants identified that they would receive a telephone call informing of appointment time and date for specialist /procedure. Then upon driving to the designated facility they were informed the appointment

did not exist or was cancelled that morning. Consequently, they have to return home or hope that they can be fit in that day. Either way participants feel their trust in the system has been impacted negatively.

Theme #2: Travel – The nearest tertiary center is Corner Brook and/or Stephenville depending on the nature of the health concern. This involves at least 1 ½ hours' drive to the Trans-Canada Highway (dependent on the time of year). The condition of the highway has been a concern for the community for the last several years with wash outs and lack of cell service on the entire highway. As well participants indicated that travel becomes quite expensive because they often have to spend overnight in Corner Brook or Stephenville in order to attend an appointment. Winter months are especially difficult.

<u>Theme #3 Access to Existing Services</u>— It was discussed that the access for such services as cancer treatment, dermatologist, procedures (i.e.: CT scan,), heart surgeries etc. is too long. The frustration of waiting to get to these appointments is often overwhelming. Another element that was identified was some physicians have advised clients to identify one problem per visit. As a result, if more than one health concern than they are advised to make subsequent appointments.

Theme #4: The Lack of Service—The participants are frustrated with lack of x-ray and physiotherapy not available at Calder Health Centre. It was further identified by the participants that physiotherapy is one of the services that would be of great benefit to the community. Another service that has been discontinued is chemotherapy. This was available to the community at one time but is no longer since the nurse who coordinated and administered same retired. Overall, the participants identified their frustration as to why the services they once had are no longer provided by the Western Health. As well, a major concern for the community is waiting for the new physicians to move to the area. Participants have been advised that the physicians have been confirmed but the participants felt they would be reassured once they are physically present in the community.

#### Conclusion

Living in a rural community does come with challenges with regards to our healthcare, lifestyle, finances and employment, each of which has an impact on health status. Living with a chronic disease can leave an individual and/or families struggling to cope with the circumstances. This was evident in discussion with residents of Burgeo in the focus group. Four main themes were identified in the focus group. Communication with professionals and the healthcare system is often a source of confusion and frustration to organize appointments and services. Secondly, the travel to services outside the area limits access to service because often due to the amount of time, seasons, and cost. Wait times to access service is overwhelming when everyone feels that their own condition is just as important as the next and the waiting causes much more stress to their lives. And finally, participants felt that they have the hospital but it is not being utilized to its full potential. For example, lack of physiotherapy when there is a physiotherapy room designated at the site. Blood collection is available but no X-ray services. Chemotherapy was once done on site but now it is no longer. As a result, the frustration has increased for the community. Participants realized that there is no easy solution and appreciate the fact that they have had physicians for fifty – eight years in their

community but often feel that they are being overlooked when it comes to some of the service could be provided on a part time basis.	s that

# Appendix B

Chronic Disease Discussion Guide

# Chronic Disease within the Burgeo/Ramea Area

## **Background**

Early this year, Western Health completed a needs assessment survey with people living in the Burgeo area. Twenty four people replied to the survey and expressed their opinions on a variety of questions about satisfaction with health and community services, identification of strengths and issues within the community. Western Health uses this information to help plan for service delivery, and to help improve the health of people in the Burgeo area. After we reviewed the information from the surveys, we identified areas that we want to know more about. That is why we are here today. We would like to learn more about Chronic Disease Prevention and Management in the Burgeo Area. This was one of the themes that emerged from the survey results.

#### **Survey Results:**

- Respondents were asked to report the top three health problems in their communities. Some of the top problems identified were (1) Cancer (70.8%), (2) Diabetes (33.3%), (3) High Blood Pressure (29.2%) and Unhealthy eating habits (25%).
- Respondents indicated there should be a continued emphasis on health promotion and disease prevention
- 60% of respondents who needed or required the service were not satisfied with services for people with chronic diseases.

## **Focus Group Questions**

- 1) Why do you feel chronic diseases (e.g., cancer, high blood pressure, diabetes) were identified as a concern for the community?
- 2) What kinds of things need to happen in your community to help you and other community members cope with chronic diseases and stay healthy?
- 3) Do you feel age, financial situation, level of education or family support has an effect on your ability to cope with a chronic disease?

Depending on the responses from these general questions than I would proceed with more specific questions. These may include the following:

e. What things have you found to be most effective in helping manage your health condition?

- f. Do you think there are things that people could do themselves that would keep them healthier?
- g. Do you think there are things that western health could do to help people with chronic disease
- h. Do you think there are things the community itself could do? Are there any local groups or associations that help people living in Burgeo with chronic diseases?
- 4) Of all the things we have discussed today, what is the most important to you?
- 5) Is there any area that we haven't discussed that you feel we should?

# **Focus Group Target Audience:**

Community members

#### Additional sources of information to be considered:

PHC Engagement group discussion for Improving Access to Chronic Disease Management