



**WESTERN SYDNEY**  
UNIVERSITY



# GP at Western Sydney University: The Story So Far

**2010 – 2017**



# TABLE OF CONTENTS

<b>MESSAGE FROM OUR DEAN</b>	<b>4</b>
<b>INTRODUCTION</b>	<b>5</b>
<b>OUR MISSION, VALUES AND GOALS</b>	<b>6</b>
Mission	6
Values	6
Goals	6
<b>GOAL 1 - BUILD AND DEVELOP THE DEPARTMENT OF GENERAL PRACTICE</b>	<b>7</b>
The Growing Department	7
Academic GP Registrars	9
Staff Awards/Grants	10
Nick Collins Award	12
Student Awards page	13
<b>GOAL 2 - BEST PRACTICE LEARNING AND TEACHING</b>	<b>14</b>
General Practice Campus Based Teaching	14
General Practice Placements	14
Our Supervisors	16
Teaching in Rural Areas	17
Our Graduates	18
<b>GOAL 3-BUILDING GENERAL PRACTICE RESEARCH CAPACITY</b>	<b>19</b>
Our Research Strategy	19
Research Areas	20
Student Research	24
Research Funding	25
<b>GOAL 4 - ENGAGING WITH LOCAL COMMUNITIES</b>	<b>26</b>
Community Service	26
Community Engaged Research	27
International Communities	28
<b>KEY RESEARCH PUBLICATIONS</b>	<b>30</b>
Clinical Research	30
Community/Public Health Research	31
Health Services Research	32
Education Research	34
<b>CONTACTS</b>	<b>35</b>

# MESSAGE FROM OUR DEAN

The graduation of the first cohort of students from the School of Medicine, almost five years ago, served as the initial reflection point for a School that was borne of the commitment of university, political, and community leaders to support the rapidly growing health needs of Western Sydney.

Now, the School has established a very strong educational reputation. Our graduates are well received into the medical workforce. The School's academics are recognised contributors to medical education scholarship in Australia. Our clinicians actively contribute to the planning and management of hospital and primary care services throughout the region. The number of research endeavours supported by competitive grants, industry partnerships, and through philanthropy continues to grow.

In 2009, students undertook their first placements outside of hospitals with community organisations and General Practice as part of the innovative Medicine-in-Context course component. In 2010 students began undertaking 12 month long placements at our Rural Clinical Schools in Bathurst and Lismore, as well as metropolitan Sydney where students undertake their General Practice attachment.

During this phase too, research activity was growing. Progressively, teams from across the biomedical sciences, clinical medicine, primary and population health have been recognised by funding and ranking bodies. The school has also been supported by a wide range of bodies from the NSW Cancer Institute to Narellan Rotary. The achievements of the General Practice team that are demonstrated in this publication are especially noteworthy.

We continue to be well supported by the communities we serve, and we likewise value the commitment of the University, Local Health Districts and Primary Health Networks to the endeavour of this medical school.

On behalf of the School as a whole, I commend to you the story so far of General Practice at Western Sydney University's School of Medicine.

**Professor Annemarie Hennessy AM**

Dean  
School of Medicine  
Western Sydney University



# INTRODUCTION

In February 2010 we started work as the Department of General Practice at Western Sydney University (or the University of Western Sydney as then). Teaching in general practice had already commenced for Year 3 of the first cohort under the guidance of a committed group of local GPs and a wider group of GPs who were supervising those first students in their practices. Tim Usherwood, Professor of General Practice at the Westmead Clinical School of Sydney University, generously agreed to engage with Western Sydney University in a shared student placement process enabling our students' access to experienced GP Supervisors in the north west.

This book celebrates those pioneers and documents the many achievements of the Department and our GP colleagues since 2010.

Inspired by a shared mission and common core values, many people have contributed to the successes described in this document. We particularly acknowledge all the Western Sydney University GP conjoints, GP supervisors, colleagues from other disciplines and health professions, other universities and importantly our students and community members who have contributed to our work. We also value our strong relationships with GP primary health care organisations, Local Health Districts, GP training organisations and the many community based, government and professional organisations with which we have worked so productively since 2010.

We also gratefully acknowledge Dr Peter Brennan, a generous philanthropist, who provided funding for the Chair of the Department of General Practice and who continues to support my work as Chair and that of the Department more widely.

As a team we developed a strategic plan that guided our endeavours and continues to frame our work. In this report we have captured some of the key achievements of the department across the four key goals we set ourselves. Many readers will find their contributions acknowledged in this publication. For those who are not named in this report, please be assured that we are truly grateful for all those who have assisted in our work to date.

Whilst this report documents a vast array of activities and many laudable outcomes, the impact of this work will be seen in the contribution our graduates make in their chosen fields of work and particularly with the communities of Western Sydney. We regularly hear reports of Western Sydney graduates who are 'work ready', who engage with GPs when they are looking after our patients in hospitals, who deal appropriately and respectfully with Aboriginal and culturally and linguistically diverse patients and, most exciting of all, who are contributing to high quality primary health care as GPs! We are proud of all our achievements but it is our students who will provide testimony to our success. In our next publication we hope to bring you more reports of our graduates and their achievements.

Please enjoy reading about this collaborative, inspiring work and thank you again to all who have contributed!

Warmest Regards

**Jenny Reath**  
Foundation Peter Brennan  
Chair of General Practice  
Western Sydney University



# OUR MISSION

## VALUES AND GOALS

### MISSION

The Department of General Practice works collaboratively to deliver best practice teaching and learning experiences so that Western Sydney graduates understand and value the many roles of General Practitioners in Primary Health Care and are inspired to consider a career in General Practice, particularly in areas of need.

### VALUES

In alignment with the mission of the School of Medicine, the work of the Department of General Practice is informed by the following core values:

#### SOCIAL JUSTICE

We promote equity, prioritising areas of need in health, education and the healthcare workforce.

#### COLLABORATION

We work collaboratively within the School of Medicine, and more widely across Western Sydney University and beyond. We build and sustain respectful and effective partnerships with General Practitioners and other primary health care providers, their related organisations, teaching and healthcare institutions and with the communities in which we work.

#### EXCELLENCE THROUGH INNOVATION

We use innovative, evidence based teaching and research strategies that are informed by and will inform other programs, locally, nationally and internationally.

#### PEOPLE FOCUSED

In all our work we value people and respond to the needs and hopes of the patients, students, colleagues and community members with whom we work.

### GOALS

#### GOAL 1

Build and Develop the Department of General Practice within the School of Medicine and beyond.

#### GOAL 2

Implement and continually improve a best practice learning and teaching program in general practice.

#### GOAL 3

Build general practice research capacity and output.

#### GOAL 4

Engage with local communities to inform our work and build mutually beneficial relationships.

# GOAL 1

## BUILD AND DEVELOP THE DEPARTMENT OF GENERAL PRACTICE

### THE GROWING DEPARTMENT

#### BEFORE 2010

Local GPs including Drs Matthew Gray, Nick Collins, Michael Fasher, Anett Wegerhoff, Andrew Knight, Magdy Girgis, Simon Young and Chee Khoo were led by Dr Jay Ramanathan in guiding development of GP teaching in the Medicine in Context (MiC) program.

#### 2010

Foundation members of the department, Prof Jenny Reath, A/Prof Wendy Hu and Ms Suzie Horne (Mazotta), were soon joined by Drs Penny Abbott and Sara Rosenkranz who commenced building our research portfolio. In the rural clinical schools Drs Ian Thong and Jane Barker supported GP teaching.

#### 2011

Dr Charlene Thornton assisted in student research teaching with Drs Nick Collins and Lawrence Tan recruited to lead our GP teaching. Dr Hassan Hosseinzadeh joined the research team.

#### 2012

Ms Heidi Forbes and Ms Meegan Matteazzi joined our admin team and Drs Erin Mathieu and Ron Brooker assisted with research. Dr Graham Chaffey was our GP Research Fellow and Dr Darshana Dave, our first academic registrar.

#### 2013

With our first NHMRC grant and other funded projects, the research team now included Drs Trent Reardon, Ruth Morgan, Louise McDonnell, Ms Nicole King, Mr Brogan Renshaw and our second registrar Dr Kelly Watt. Meanwhile Melinda Wolfenden took on our admin lead with assistance from Georgia Millen. We also welcomed Dr Penny Burns to our teaching team and in Bathurst, Dr Kumara Mendis

#### 2014

Ms Robyn Walsh and Dr Steve Trankle were recruited to lead research projects and another academic registrar, Dr Jaspreet Saini, joined our team. Dr Miriam Brooks joined our teaching team and Mr Chris Martin was a keen new admin support. In Bathurst Dr Kam Wong took up the GP lead role.



**GP Team 2011** Front Left: Wendy Hu, Lawrence Tan, Jenny Reath, Nick Collins, Suzie Horne, Penny Abbott, Charlene Thornton, Sara Rosenkranz



**GP Team 2013** From Left: Lawrence Tan, Mel Wolfenden, Jenny Reath, Chris Martin; Row 2: Kelly Watt, Penny Burns, Ron Brooker, Penny Abbott, Brogan Renshaw; Row 3: Nick Collins, Trent Reardon

## 2015

Mr Duncan McCulloch and Dr Carl Bazergy assisted with admin and teaching, respectively. Drs Marlee King and Suzanne Brownhill were recruited for new research projects and Ms Danielle Guyder provided maternity leave for Nicole. Our new academic registrar was Dr Dena Attalla. Dr Jane Burges joined “the other Jane” at Lismore.

## 2016

2016 was a bumper GP registrar year with Drs Yasin Shahab, Alison Lyon and Thomas Fung bringing youthful invigoration to the Department. Ms Vicki Bradley ably assisted Chris Martin, now leading our admin team, and further supported by Ms Julianne Abood. Drs Fiona Mackintosh and Stephen Helme assisted with our teaching program.

## 2017

Alison Lyon was joined in 2017 by our first home-grown academic registrar Dr David Cosgriff. Dr Christine Metusela joined our research team, Dr Jessica Armstrong - Kearns was recruited to our new NHMRC project, and Sam Wager, an Aboriginal research administration cadet is working with us on our clinical trials. Dr Winston Lo joined us as an experienced GP teacher.



**GP Team 2015** Front Left: Lawrence Tan, Marlee King, Jenny Reath; Row 2: Ron Brooker, Penny Burns, Suzanne Brownhill, Penny Abbott, Dena Attalla; Row 3: Steve Trankle, Miriam Brooks, Robyn Walsh; Row 4: Carl Bazergy, Chris Martin, Mel Wolfenden, Duncan McCulloch



**GP Team 2017** Front Left Row 1: Jenny Reath, Alison Lyon, Chris Martin; Row 2: Sam Wager, Julianne Abood, Nicole King, Fiona Mackintosh; Row 3: Vicki Bradley, Christine Metusela, Miriam Brooks, Penny Abbott, Jessica Armstrong-Kearns; Row 4: David Cosgriff, Lawrence Tan, Steve Trankle



**GP Team 2016** Front Left: Penny Abbott, Jenny Reath, Miriam Brooks, Julianne Abood; Back Left: Lawrence Tan, Yasin Shahab, Alison Lyon, Chris Martin, Penny Burns, Ron Brooker, Vicki Bradley

## ACADEMIC GP REGISTRARS

Our small close-knit department offers a friendly and supportive environment for GP Registrars, who are usually in the final stages of their GP training. Registrars enthusiastically engage across all our research and teaching activities. They also present their research at national GP training and research conferences.

## TESTIMONIALS

*During my time with the Department of GP, I have been able to develop my skills as a researcher within a supportive and friendly environment that also encourages independent thinking. Through my research project in cross cultural learning environments I have developed many new skills which I will be able to apply throughout the rest of my career. One of my most memorable moments was taking students to a homeless community event to provide health checks. Seeing the positive response of the students and community members reinforced the value of learning in the community for me.*

Alison Lyon, Academic GP Registrar (2016)

*The team at University of Western Sydney provides a wonderfully supportive and enthusiastic environment and an opportunity to work with excellent and experienced role models. My supervisor supported me throughout development of my research proposal and ethics application and directed me towards valuable training opportunities. Members of the university team also supported me with preparation of medical student teaching activities. My confidence and skills in small group tutorials and lectures increased rapidly throughout the term. The flexibility of my supervisor meant I could be as independent or as supported as I needed. Working in a busy university department meant that there was always a variety of activities to get involved with. It's a tremendous opportunity to gain research and teaching in a very well supported environment.*

Kelly Watt, Academic GP Registrar (2013)

## GP REGISTRAR PUBLICATIONS

Abbott P, Reath J, Gordon E, **Dave D**, Harnden C, Hu W, Kozianski E, and Carriage C. *General practitioner supervisor assessment and teaching of registrars consulting with Aboriginal patients - is cultural competence adequately considered?* BMC Medical Education, 2014. 14(1): 167.

Abbott P, **Dave D**, Gordon E, & Reath J. *What do GPs need to work more effectively with Aboriginal patients? Views of Aboriginal cultural mentors and health workers.* Australian Family Physician, 2014. 43(1): 58-63.

**Watt K**, Abbott P, and Reath J. *Cross-cultural training of general practitioner registrars: How does it happen?* Australian Journal of Primary Health, 2015. doi:<http://dx.doi.org/10.1071/PY1465>

**Watt K**, Abbott P, and Reath J. *Cultural competency training of GP Registrars-exploring the views of GP Supervisors.* International Journal for Equity in Health, 2015. 14(1): 89.

**Watt K**, Abbott P, Reath J. *Developing cultural competence in general practitioners: an integrative review of the literature.* BMC Family Practice, 2016. 17:158.

## STAFF AWARDS/GRANT

Name of Award	Recipient of Award	Year	Award Provider/Name
Citation for Outstanding Contribution to Student Learning to the Department of General Practice	Department of General Practice	2011	Western Sydney University College of Health and Science
Aboriginal health workers' understanding of cardiovascular risk and its assessment	Tejas Deshmukh (Western Sydney University student)	2011	RACGP/Australian Primary Health Care Research Institute Indigenous Health Award
The health needs, pre-release planning and experiences of women on release from custody and their engagement with general practice in the community	Penny Abbott	2013	RACGP Family Medical Care Education and Research Grants
Patient perceptions of shared care following surgery for colorectal cancer	Lawrence Tan	2014	RACGP Primary Care Collaborative Cancer Clinical Trials Group (PC4) Research Grant
Huesped Ilustre (illustrious guest) of the city of Sucre, Bolivia	Lawrence Tan	2014	Municipality of Sucre, Bolivia
Roles for general practitioners in supporting comprehensive continuity of health care for their patients and local communities through disasters	Penny Burns	2015	RACGP Family Medical Care Education and Research Grant
This recognition is a result of your tireless efforts during the response to a siege at the Lindt Café, Martin Place, Sydney on 15 and 16 December 2014	Penny Burns	2015	NSW Ambulance for outstanding dedication to duty and service
Young Women's Clinic Evaluation at Blue Mountains Women's Health and Resource Centre	Miriam Brooks	2016	RACGP Family Medical Care Education and Research Grant
Associate Member of the Year award for work in Aboriginal and Torres Strait Islander health	Jenny Reath	2016	Australian Indigenous Doctors Association (AIDA)
Academic Development Program for 2018	Jenny Reath	2017	Western Sydney University
AAAPC Most Distinguished Paper titled 'Medical homelessness and women in contact with the criminal justice system'	Penny Abbott	2017	AAAPC 2017 Primary Health Care Research Conference





## NICK COLLINS AWARD

Dr Nick Collins was a Senior Lecturer with the Department of General Practice until his tragic and unexpected death in August 2014. Nick joined us as a senior lecturer in February 2011. He was responsible for GP Supervisor recruitment and support and developed a GP student mentoring program. He also taught students and supervised several student research projects, a number culminating in student presentations at the Royal Australian College of General Practitioner's annual conference.

Nick was always primarily a GP and his teaching was solidly grounded in stories of his patients - always anonymised and respectfully described. His concern for his patients was evident in every aspect of his teaching and his management. Nick role modelled for students the best kind of GP; members of the GP Student Network described Nick as having

**“encouraged and inspired us all to make the most of every opportunity and endeavour.”**

Vale Nick Collins - your work will continue through those of us who have respected and loved you.

The Department of General Practice has established an award in memory of Nick, to enable a Western Sydney University medical student to attend the annual RACGP Conference. Your tax deductible donations to this fund are greatly appreciated! [https://www.westernsydney.edu.au/give/home/memorial\\_giving/dr\\_nick\\_collins\\_memorial\\_fund](https://www.westernsydney.edu.au/give/home/memorial_giving/dr_nick_collins_memorial_fund)



**Nick Collin's Award 2016** *Nick Collins family presenting award to Aimee Tran*



**GP16 Awards** *Jenny Reath, Amy Hort (Nick Collins Award Runner up), Aimee Tran (Nick Collins Award Winner) and Penny Abbott*



**Winner of the 2017 Nick Collins Award** *Lismore Rural Student Vanessa Tent. Front Left: Dr Miriam Brooks, Vanessa Tent, Dr David Cosgriff, Dr Jane Burges and Dr Jane Barker'*

## STUDENT AWARDS

### BACHELOR OF MEDICINE, BACHELOR OF SURGERY GENERAL PRACTICE STUDENT PRIZE WINNERS FROM 2011 - 2016

<b>Name</b>	<b>Year</b>	<b>Title of Award</b>
<b>Elise Karin Maehler</b>	2011	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Jessica Sandy</b>	2011	Primary Health Care Prize for Academic Excellence in General Practice
<b>Cassandra Elise Bartley Brown</b>	2012	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Sri Shankar Kumarasiri</b>	2012	Primary Health Care Prize for Academic Excellence in General Practice
<b>Madeleine Emily Gibbs</b>	2013	Skin and Cancer Foundation Australia Prize for Academic Excellence in Dermatology
<b>Anthony Huynh</b>	2013	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Betsy Dang</b>	2013	Primary Health Care Prize for Academic Excellence in General Practice
<b>Paul Lai</b>	2014	Skin and Cancer Foundation Australia Prize for Academic Excellence in Dermatology
<b>Viet Duc Dang Ho</b>	2014	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Natasha Alexandra Brown</b>	2014	Primary Health Care Prize for Academic Excellence in General Practice
<b>Louise Stephenson Goodall</b>	2015	Skin and Cancer Foundation Australia Prize for Academic Excellence in Dermatology
<b>Cristina Tedesco Murphy</b>	2015	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Artiene Tatian</b>	2015	Primary Health Care Prize for Academic Excellence in General Practice
<b>Kenneth Cho</b>	2016	Skin and Cancer Foundation Australia Prize for Academic Excellence in Dermatology
<b>Karina Hall</b>	2016	Skin and Cancer Foundation Australia Prize for Academic Excellence in Dermatology
<b>Amy Hort</b>	2016	Dr Anna Pham & Wollondilly Shire Council Prize for Academic Excellence in General Practice
<b>Karina Hall</b>	2016	Primary Health Care Prize for Academic Excellence in General Practice

# GOAL 2

## BEST PRACTICE LEARNING AND TEACHING

### GENERAL PRACTICE CAMPUS BASED TEACHING

Medical students at Western Sydney University are first exposed to GP teaching in Years 1 and 2, when we provide case based interactive lectures and small group teaching on the GP consultation, illness behaviour, interactions between mental and physical health, health systems and motivational interviewing. In the clinical years, Years 3 to 5, students undertake clinical placements in a variety of settings including for 25% of the cohort, 12 months in Bathurst or the Northern Rivers. We convene a number of GP campus-based learning sessions engaging students in learning skills such as triaging in a disaster situation, health promotion, and management of many common GP conditions. Students practice under the supervision of experienced GPs and often with colleagues from physiotherapy, nursing, podiatry and pharmacy. We are also grateful for valuable input from ENT surgeons, ophthalmologists and dermatologists who also share their expertise with our students.

### GENERAL PRACTICE PLACEMENTS

On GP placements, students take part in consultations while supervised by an experienced GP and learning from the GP team. Students greatly value this opportunity to practice clinical skills such as history-taking, performing examinations and simple procedures. Students are often inspired by “their” GPs.

*“I really enjoyed my GP placement. I learnt a lot about the role of a GP, not just knowledge of a broad range of medical conditions but getting to know your patients and building a relationship. I could see how important this is to really good healthcare”.*

Students report enthusiastically when asked about the best aspects of their GP placement.

*“Friendly registrars who are willing to teach and are good role models; the supervisor was extremely experienced and able to give effective insightful feedback, good advice on exam preparation, and useful skills for internship. The overall experience was very positive, with all staff members (including the receptionists) positive and encouraging. It pushed my knowledge and clinical skills to a new degree as I saw patients on my own, and that is an invaluable skill for coming internship. I love the patient-doctor relationship and continuity of care and this rotation has motivated me to pursue GP as one of my top priorities”.*



They describe a wide range of clinical and professional skills gained.

*“My GP helped me gain insight into the ‘art of medicine’. In a high-pressure environment where time is precious, it is important for us to decide what kind of doctor we want to be, how we want to practice and to maintain our own standards when it comes to dealing with patients. This will benefit me in the future and I will remember the experience. The humanity in medicine is often forgotten and this placement has shown me just how important it is that we hold on to it and appreciate the positive impact we are having”.*

Students particularly valued new perspectives in combined Justice Health/ General Practice placements.

*“It was good to get an insight into the various aspects of health care e.g. dental, mental health, GP, public health, hepatitis, drug and alcohol, etc. Being able to attend sessions in all these different areas helped me to develop a holistic view of health and helped me to understand the way in which this unique population accesses health care and their specific health needs”.*



## OUR SUPERVISORS

GP supervisors are the backbone of our teaching programme, as students learn from them and their patients in a one-on-one setting. Three of our valued supervisors talk about their experiences teaching medical students.

### Supervisors gain as much from the placement as students:

*Being a teacher is actually one of the best ways of learning ... having a medical student makes even seeing someone with a sore throat interesting. It keeps you on your toes, it keeps you current, it keeps you in touch with how young people are learning and what their learning needs are. It also keeps the interest and reminds you how interesting both medicine and general practice can be. Dr Wally Jamal, Bellavista*

### It can be handy having a student around:

*During a busy day at the surgery my student and I were called to an unconscious elderly lady in a car outside the surgery by her husband who had rushed in, breathless himself. She was found not breathing and without a pulse. Fortunately, two of us were able to carry her not inconsiderable frame into our treatment room and she was revived. Without the student this lady would have probably died in the carpark. Dr Greg Hunter, Tweed Heads*

### Students can sometimes relate better to patients than the GP:

*I was having trouble getting through to a teenager – there were some behaviour patterns and disruption to the family life etc., and the student got through with no trouble at all and seemed to know the right moves to get the teenager onside and then rally some behavioural change from there, and in fact they used IT, they used technology to help break that communication barrier with the teenager. Dr Joe Nicholas, Fairfield*

### It can be deeply satisfying helping someone learn:

*Reflecting on remediating a student who had failed their GP attachment was a deep and meaningful experience for me, as this student's future depended on how well I could help them through this particular phase. Fortunately, we seemed to get him there. I think it was a lot to do with building up their self-esteem and their ... confidence that seemed to work, and he progressed very nicely onto the next year ... The uni trusted me to remediate the student and I was very honoured to do so, and it was also a very successful outcome. Dr Joe Nicholas, Fairfield*

### Teaching students can be good for you:

*You use another part of your brain and you improve your cognitive reasoning skills ... it makes you analyse all those cognitive functions that you use. Dr Wally Jammal, Bellavista*

### Teaching students to be good GPs will be good for all of us:

*General Practice offers doctors an expansive view of people's lives with an ability to contribute to their patients' health and well-being over many years, a relationship which is beneficial to both parties. In this regard I would encourage GPs to open up their practices to incorporate students frequently so learnt knowledge can be imparted well to the next generation of care-givers. Dr Greg Hunter, Tweed Heads*



Prof Jenny Reath presents award to Dr Sayeed Khan

2016 GP Supervisor Awards Event

## TEACHING IN RURAL AREAS

### BATHURST

Each year students are warmly welcomed to the Bathurst region and are quickly immersed in the country lifestyle. First and foremost, students need a car to travel to most of the rural general practices and to visit the allied health service providers. The urban kids may not be familiar with country roads so we provide them with access to the Western Sydney University car and training on 'driving on country roads'.

Clinical teaching is provided by GP supervisors who have special interests such as anaesthetics, dermatology, and hospital practice as GP VMOs. Students also visit allied health practitioners including physiotherapists, pharmacists, optometrists and diabetes educators. Through this clinical immersion the students improve their clinical skills. We also conduct weekly tutorial groups and hospital grand rounds including student presentations.

It is never 'all work and no play' during the rural placement. The students have 'Fun at Five' where they can take part in sports, learn to play golf and cooking lessons, all 'appetisers' for the medical students to encourage them to practise medicine in rural regional areas."

**Dr Kam Wong, Senior Lecturer in General Practice, Bathurst Rural Clinical School**



Bathurst students visiting Carcoar

### NORTHERN RIVERS

We are completing 7 years of hosting these lovely young and enthusiastic students, the end of 28 GP terms!

Most students come from Western Sydney bringing with them ethnic and religious diversity, which makes for rich discussion based on very different life experiences. Our students live together in accommodation near the hospital. This creates a lively supportive atmosphere for students often living away from home for the first time. Western Sydney University students have the reputation of being full of enthusiasm for medical experience and life itself-this is seen when we hold an annual soccer match against the Wollongong students out amongst the cow pats on our property. They immerse themselves not only in their studies but in the local community through churches, sports teams, volunteering and sometimes in part time jobs. What has been delightful has been to see some return as junior doctors.

Our GP and Indigenous health rotations are held concurrently with students attached to services from Tweed to Grafton, and inland to Casino giving them a broad rural perspective. Some GP practices have faithfully hosted students throughout the 7 years. Many students have delivered babies with Dr Beek, the solo GP obstetrician who has delivered most of Casino locals under 30 or rounded up cattle on Dr Amey's cattle farm. They have travelled with our Indigenous health workers to more distant Aboriginal health clinics weighing and immunising babies and learning about Aboriginal culture. All these varied experiences of regional and rural practice they bring to our Friday discussions.

It is not uncommon for students to comment that they had never considered a career in General Practice, but it is now high on their list.

**Jane Barker, General Practice Academic, University Centre for Rural Health, Northern Rivers**



Northern Rivers students attending WSU Community Conference Week

## OUR GRADUATES

A number of our graduates have chosen careers in general practice. We are planning to establish a network to keep in contact with these new colleagues. Three have provided a brief overview of their GP journey.

### GRADUATE 2011

I am now in the unique position of having been involved with the Department of General Practice as a student, researcher and teacher. I have gained a great deal from the 'two-way' continuous learning we undertake with our students. Our current students clearly gain a lot from this too. They often mention in tutorials and assignments, clinical pearls they've learnt from 'their' GP.

Since graduation I have worked on the Central Coast, Central NSW and in Western Sydney. I have felt well prepared for the challenges I faced as a clinician. As a student, my supervisors demonstrated a focus on holistic care and the patient-doctor relationship and I've found myself reflecting back on wise words from them when faced with difficult clinical problems. My year in Lismore, in particular, highlighted to me how important primary care was to the local community and influenced my decision to pursue general practice as a career. The holistic, patient centred approach I learnt has been very valuable throughout my career. My time as a general practice student also fostered specific interests for me; Bullinah Aboriginal Health Service inspired me to become involved in Indigenous health as a registrar.

**Dr David Cosgriff, Western Sydney University Academic GP Registrar 2017**

### GRADUATE 2011

The time I spent in general practice during my medical degree at Western Sydney University was invaluable. I loved the opportunity to get a taste of primary care medicine in Year 3 with a chance to build on this during the final year of training. I was lucky enough to be taught and mentored by some great GPs in Western Sydney with the ongoing support of the GP teaching staff back at the university.

As a result of these experiences, the decision to choose general practice as my specialty of choice was easy. After completing my junior doctor training at Liverpool Hospital, I completed the Diploma in Child Health and then completed my general practice training with the opportunity to train in various practices all over Sydney. I completed my Fellowship in General Practice in 2016 and since then have been working in clinical general practice in Sydney's inner west.

Still having links with the medical school at Western Sydney University, I have so far also been fortunate enough to pursue my interests in medical education with the opportunity to come on board as a conjoint lecturer with the Department of General Practice and also recently commencing part-time as a medical educator for GP Synergy to support general practice registrars with their specialty training.

**Dr Zenith Lal**

### GRADUATE 2012

Each day at work is different to the last. I enjoy working as a GP as every day brings a new set of challenges, provides the opportunity to develop therapeutic relationships with patients and their families, and presents a wide spectrum of clinical presentations.

Reflecting back on my time at Western Sydney University, I am grateful for the opportunity we had to be immersed in clinical practice in Western Sydney from the start of the program. Western Sydney University provided exposure to general practice through clinical placements in Years 3 and 5. In Year 4 we also had the opportunity to undertake research in general practice and present our research paper at the Annual GP Conference in Hobart.

Following my graduation in 2012, I completed my Internship and Residency at Blacktown Hospital. I then commenced GP training in Richmond and have subsequently been working in a Family Practice in Glendenning. During this time I also pursued my interest in Paediatrics through completion of the Diploma in Child Health. I have recently been awarded Fellowship with the RACGP. Serving the community as a GP has been rewarding.

**Dr Joanna Chanmugam**



Dr Joanna Chanmugam

# GOAL 3

## BUILDING GENERAL PRACTICE RESEARCH CAPACITY

### OUR RESEARCH STRATEGY

We are strongly committed to research with local communities and our research is informed by the needs and hopes of the communities with which we work. Our overarching research aims are to promote equity, work collaboratively valuing the people with whom we work, to build capacity and improve health and educational outcomes. We have growing national and international recognition of our expertise, particularly in Aboriginal and Torres Strait Islander health, health care of those in correctional services and evaluation of health service innovations.



## RESEARCH AREAS

### CLINICAL RESEARCH

#### Selected Research Projects

1. Randomised controlled trial of antimicrobial treatment versus watchful waiting for acute otitis media in low risk Aboriginal and Torres Strait Islander children (WATCH Trial)
2. Patient perceptions of shared care following colorectal cancer surgery
3. Oral health in general practice: reported presentations, practitioner confidence, knowledge, current practice and training needs
4. Multi-centre randomised controlled trial to compare nasal balloon autoinflation versus no nasal balloon autoinflation for otitis media with effusion in Aboriginal and Torres Strait Islander children (INFLATE Trial)



**WATCH Team attends the OMOZ Conference in Newcastle in 2016** Front Left: Amanda Leach, Kira Schubert, Nicole King, Sandra Williams Sissy Tyson, Jenny Reath, Penny Abbott, Emily Jennings. Back left to right: Robyn Walsh, Peter Morris, Natasha Peter, Hasantha Gunasekera, Jean Tsembis, Hilary Miller, Reeion Murray

#### The WATCH Trial

Rural and remote Aboriginal and Torres Strait Islander communities suffer with massively increased rates of ear disease and hearing loss. Guidelines have been developed to inform clinical practice in these areas. In urban Aboriginal and Torres Strait Islander communities little is known about the prevalence of ear disease or best practice management, though ear disease in these communities is worse than for non-Indigenous children and is associated with educational and employment disadvantage.

In 2013 we received National Health and Medical Research Council funding (\$1.6 million) to conduct a randomised controlled trial of treatment of Acute Otitis Media with urban Aboriginal Health Services, comparing immediate antibiotics (as recommended in rural and remote communities) with a 'watchful waiting' approach (currently recommended for urban Aboriginal and Torres Strait Islander children at low risk of complications). Qualitative research findings indicate that services, research officers and GPs at our partner services are using more

evidenced based approaches to diagnosis of middle ear disease – specifically pneumatic otoscopy and tympanometry. Parents and carers also appear willing to consider a 'no up-front antibiotic' approach with some reporting that they valued the close observation and care of the 'watchful waiting' approach.

In 2016 in response to requests from our Aboriginal Health Service partners, we applied successfully for an additional \$2.5 million to conduct a similar trial comparing use of a nasal balloon auto-inflation device with usual treatment of Otitis Media with Effusion (see p 27). From 2017 we will be running both WATCH and INFLATE trials with our urban Aboriginal Health Service partners. This research will inform future guidelines and is widely recognised as upholding the highest standards for effective and appropriate research with Aboriginal and Torres Strait Islander communities.



## COMMUNITY/PUBLIC HEALTH RESEARCH

### Selected Research Projects

1. Access to Mental Health Services in Airlds
2. Vaccine conscientious objectors: attitudes and approaches taken by general practitioners in Sydney
3. Identifying culturally appropriate approaches in primary care for prevention and management of diabetes with people from Samoan backgrounds
4. Nepean Blue Mountains Primary Health Network (NBMPHN) Cancer Screening Evaluation
5. Knowledge and attitudes towards cervical cancer screening in female Assyrian refugees in Western Sydney

### Identifying culturally appropriate approaches to prevention and management of diabetes for people from Samoan backgrounds in primary care

The Samoan community has one of the highest rates of diabetes and its complications in Australia. Together with other Western Sydney University researchers, we have been working in partnership with cultural leaders and representatives of the Samoan community in south-western and western Sydney to decrease the burden of diabetes through the Le Taeao Afua Samoan Action Research Project.

Encouraged and supported by Dr Olataga Alofivae-Doorbinnia, we used qualitative research approaches to explore the experiences and views of Samoan Australians living with diabetes or caring for someone with diabetes. Working in partnership with

Dr David Simmons and his team, we have received funding from Western Sydney University, the SWS Local Health District and Primary Health Networks in our region to support a church-based pilot study aiming to promote healthy lifestyles and prevent diabetes in the Samoan community.

This project will include GP education aimed to increase GP cultural awareness and assist GPs to provide effective patient-centred care in this population.

We are fortunate to be guided in this important work by the Le Taeao Afua Samoan Action Group, who meet regularly and direct this work to ensure the research remains action-focused, community-led and effective in achieving its aims.



Samoan Action Research Community Reference Group

## HEALTH SERVICES RESEARCH

### Selected Research Projects

1. Aboriginal people leaving custody
2. General practitioners and health care for women released from custody
3. General practitioners and health care for culturally and linguistically diverse women in custody
4. The Western Sydney Integrated Care Program: Qualitative Evaluation
5. Understanding patient centred medical home transitions in Western Sydney
6. GPs at the Deep End - supporting primary health care providers in Western Sydney areas of socioeconomic disadvantage
7. Nepean Blue Mountains Partners in Recovery Evaluation
8. Young Women's Clinic Evaluation, Blue Mountains Women's Health and Resource Centre

### GPs at the Deep End - Supporting Primary Health Care Providers in Western Sydney areas of socioeconomic disadvantage

Working in areas of socioeconomic disadvantage is challenging for GPs. We often find we are working with patients who have chronic and complex health issues and may be severely limited in their capacity to manage these for reasons of cost, transport, health literacy and education. Research in Scotland by the 'GPs at the Deep End' group regarding needs of such GPs and their communities has influenced health policy and funding.

With research funding from the Australian Primary Health Care Research Institute we explored the experience of GPs, other health care providers and their patients in outer urban areas of Western Sydney.

Our report published in 2016 describes the commitment of health care professionals to high quality care and their long term, trusting relationships with patients. Interviewees spoke about vibrant multicultural communities, but also socioeconomic disadvantage intertwined with complex physical and mental health problems. GPs described the challenges dealing with these, often with limited support from specialist colleagues, whose services were too costly. The GPs believed primary health care was not sufficiently valued or supported and recommended strengthening our sector through approaches such as patient centred medical homes, patient enrolment, blended payment models and improved integration of health services. They also recognised that enhanced funding would require demonstration of benefit and highlighted the role of Primary Health Networks in providing support and driving change.

Our research was publicised by national media outlets at the time of its release. We will continue to promote this research and use all opportunities to advocate for primary health care providers working in socioeconomically disadvantaged areas.

(2016 Report: [westernsydney.edu.au/\\_data/assets/pdf\\_file/0019/1221076/Supporting\\_PHC\\_Providers\\_in\\_western\\_Sydney\\_areas\\_of\\_socio-economic\\_disadvantage.pdf](https://westernsydney.edu.au/_data/assets/pdf_file/0019/1221076/Supporting_PHC_Providers_in_western_Sydney_areas_of_socio-economic_disadvantage.pdf))



## EDUCATION RESEARCH

### Selected Research Projects

1. Medical students undertaking primary care placements within justice health – what are their experiences?
2. Developing a model for a sustainable teaching program for medical students undertaking clinical placements in Justice Health
3. Evaluation of a general practice mentorship program for Western Sydney University medical students
4. Evaluation of Evidence Based Journal Clubs in Western Sydney
5. Factors influencing the motivation of medical students to work in urban areas of disadvantage after graduation
6. Exploring the challenges and opportunities for medical student learning in general practices situated in linguistically diverse communities
7. Building Aboriginal and Torres Strait Islander cultural education and cultural mentoring capacity
8. Cross-cultural training of GP registrars – who is responsible? Assessing the perceptions and training needs of GP supervisors in Western Sydney

### General Practice Training and Cultural Competence

Given the health inequity faced by Aboriginal and Torres Strait Islander people, it is important that interactions with GPs are effective and that GPs are aware of issues affecting culturally competent practice. Respectful attitudes and good communication and consultation skills need to be combined with knowledge of the historical, cultural, social, medical and system factors that impact on healthcare delivery for Aboriginal and Torres Strait Islander patients. Access to cultural mentorship or support is also vital in Aboriginal and Torres Strait Islander GP training.

Our research in this area has resulted in development and evaluation of a cultural awareness training video. We have also completed research commissioned by Australian General Practice Training that aimed to provide evidence for best approaches to training doctors working with Aboriginal and Torres Strait Islander patients.

In this research we interviewed and surveyed key stakeholders including cultural educators and mentors, GP registrars and supervisors, medical educators, GP training and other relevant organisations. The findings of this research are documented in a report and are soon to be published.

Looking more widely at how GP training promotes cultural competence for those working with culturally and linguistically diverse patients, we sought views of GP registrars and GP supervisors who reported that, outside Aboriginal and Torres Strait Islander cultural awareness workshops, cross-cultural learning occurred informally and often as a part of generic patient-centred skills. We found that in-practice exposure could be supported by specific learning in this area and that GP Supervisors have an important role.

Overall, our research in this area has informed approaches to preparing and supporting GPs and GP registrars in their lifelong journey to become culturally competent clinicians.



## STUDENT RESEARCH

Enhancing student research capacity beyond the opportunities afforded within the curriculum is an important goal for the Department. Students researching with us consider the experience rewarding and important both in developing their research skills and their capacity for critical thinking. They also benefit by broadening their research and clinical networks within and beyond Western Sydney University. Student research is sometimes published in highly ranked peer-reviewed journals.

### GP Synergy Scholarships

Effectiveness of an Aboriginal Cultural Training Video-Feedback Workshop – Evaluation. (Emma Kozianski, 2013)

Medical student education in substance misuse – qualitative research and development of a video trigger educational resource. (Kate Sandy, 2014)

Two-way learning: Aboriginal and Torres Strait Islander educators partnering with medical educators – qualitative analysis. (Aimee Tran, 2015)

Process evaluation of a clinical trial investigating best management for childhood ear disease in urban Aboriginal and Torres Strait Islander children - the WATCH trial. (Vanessa Tent, 2016)

Understanding GP attitudes and confidence in managing suicidal patients in Western Sydney – survey based research. (Cris Kocx, 2016)

Factors affecting culturally and linguistically diverse patients' satisfaction with GP referral to a secondary healthcare provider – survey based research. (Vinay Murthy, 2017)

Understanding how Advance Care Planning is taken up in CALD populations – a systematic literature review. (Anusha Kannekanti, 2017)

### MBBS Honours

Mixed methods research, within a parent project, to examine the reliability and concurrent validity of the Acute Otitis Media Faces Scale (AOM-FS) in Urban Aboriginal Communities, and evaluating the experiences of users. (Caitlin Frede, 2016-17)

A literature review and thematic analysis of interviews from our qualitative evaluation of the Western Sydney Integrated Care Program, to examine patient and carer, and clinician understandings of integrated health care. (Xi Yu, 2016-17)

### Collaborations

Collaboration between our department and the Simpson Centre for Health Research at UNSW has resulted in joint projects focussed on end-of-life care.

### Student Publications

Abbott P, Reath J, Gordon E, Dave D, Harnden C, Hu W, **Kozianski E**, and Carriage C. General practitioner supervisor assessment and teaching of registrars consulting with Aboriginal patients - is cultural competence adequately considered? *BMC Medical Education*, 2014. 14(1): 167.

**Deshmukh T**, Abbott P, Reath J. "It's got to be another approach": an Aboriginal Health Worker perspective on cardiovascular risk screening and education. *Australian Family Physician*, 2014. 43(7): 310-313.

Lewis E, Cardona-Morrell M, **Ong KY**, Trankle SA, & Hillman, KA. Evidence still insufficient that advance care documentation leads to engagement of healthcare professionals in end-of-life discussions: A systematic review. *Palliative Medicine*, 2016. 30(9): 807-824. DOI: 10.1177/0269216316637239. Awarded 'Paper of the Year 2016'.



## RESEARCH FUNDING

Title of Funding Grant	Grant recipient	Year awarded	Grant Source/Name	Amount
Acceptability and impact of pneumatic otoscopy and tympanometry in the GP diagnosis and management of otitis media in children	Penny Abbott, Sara Rosenkranz, Jenny Reath, Hasantha Gunasekera	2010	Western Sydney University School of Medicine Seeding Grant	\$20,000
GP project: process and impact evaluation	Ann Dadich, Jenny Reath, Wendy Hu, Penny Abbott, Sara Rosenkranz	2010	NSW Health STI Programs Unit	\$120,000
Otitis media research and GP supervisor research training	Jenny Reath	2010	Western Sydney University School of Medicine Research Funding	\$69,000
To enhance general practice research	Jenny Reath	2010	Western Sydney University Knowledge Infrastructure Enhancement Grant	\$49,606
Development of an evaluation for a school based health intervention	Jenny Reath	2010	Macarthur Division of General Practice	\$10,000
To prepare a model for delivery of comprehensive integrated primary health care in a growth area of Sydney	Jenny Reath	2011	Landcom, NSW	\$84,000
Building Aboriginal and Torres Strait Islander cultural education and cultural mentoring capacity	Jenny Reath, Penny Abbott, Linda Kurti, Berice Anning, Ron Brooker	2012	Western Sydney University Department of General Practice, Education and Training Grant	\$327,500
Evaluation of the Western Sydney Medicare Local and Western Sydney Local Health District partnership memorandum	Jenny Reath, Penny Burns, Ron Brooker, Penny Abbott	2013	Western Sydney Local Health District	\$122,177
Randomised controlled trial of antimicrobial treatment versus watchful waiting for acute otitis media without perforation in low risk Aboriginal and Torres Strait Islander children	Jenny Reath, Hasantha Gunasekera, Amanda Leach, Penny Abbott, Deborah Askew, Federico Giroi, Kelvin Kong, Chelsea Bond, Wendy Hu	2013	NHMRC Project Grant	\$1,640,326
Evaluation activities including of Blue Mountains Cancer Help and Partners in Recovery Program	Jenny Reath	2013	Nepean Blue Mountains Medicare Local	\$265,000
Develop an evaluation plan for an Integrated Primary Health Care Centre at Oran Park	Jenny Reath	2014	SWS Medicare Local	\$30,000
Develop a model for support of GPs working in areas of disadvantage in the west of Sydney	Jenny Reath	2014	Australian Primary Health Care Research Institute	\$80,000
A multi-centred randomised controlled trial to compare nasal balloon autoinflation versus no nasal balloon auto inflation for otitis media with effusion in Aboriginal and Torres Strait Islander children (INFLATE Trial)	Penny Abbott	2016	NHMRC Project Grant	\$2,584,580
Western Sydney Integrated Care Program (WSICP): Qualitative Evaluation	Jenny Reath	2016	Western Sydney Local Health District (WSLHD)	\$250,000
Nepean Blue Mountains Primary Health Network Cancer Screening Evaluation	Steven Trankle, Jenny Reath	2017	Nepean Blue Mountains Primary Health Network (NBMPHN)	\$83,620

# GOAL 4

## ENGAGING WITH LOCAL COMMUNITIES

### COMMUNITY SERVICE

Department of General Practice academics regularly attend events where health care is offered to community members who may experience social disadvantage, such as young people, the elderly and those who are homeless. We are joined at every event by medical students, whose warmth, energy and dedication is much appreciated. At times we collaborate with the School of Nursing so that students of each discipline work alongside each other, learning about the strengths of working in an interdisciplinary team to provide comprehensive care to people who often have complex health needs.

In 2016 we provided free health checks at Fairfield 'Bring it On!' Youth festival, Bankstown Homeless Hub, Parramatta Homeless Connect, Bankstown Wellness Festival, Rail Safety Week, and Warragamba and Tahmoor Seniors' weeks. At Parramatta Homeless Connect 260 people had health checks, an ambulance was called for one patient and many people with undiagnosed diabetes and hypertension received care that they otherwise may not have accessed.

Students' feedback reflected the unique learning opportunities provided by community engagement events:

*...having the physical checks first made it easier for us to build rapport with each person we saw before asking more personal questions and enquiring about their mental or sexual health. (Third year student)*

*I particularly enjoyed speaking to the patients about avenues of support and the importance of effective communication with all clinicians in their care team. I also thoroughly enjoyed discussing ways patients could incorporate more physical activity in interesting, sustainable ways within their lives, particularly as many had injuries and joint replacements. (Third year student)*

*I found it to be a very enriching and memorable experience. I enjoyed being able to apply the knowledge and skills that I have learnt to help others, give back and reach out to the community because this is a major part of why I did medicine. (Third year student)*

We will continue to support these exciting and enriching opportunities for our students to be of service in the community, together with the School of Nursing. In the future we hope to offer this opportunity to Allied Health students.



Parramatta Homeless Connect



Tahmoor Seniors' Week



Bankstown Wellness Festival

## COMMUNITY ENGAGED RESEARCH

### INFLATE

We are pleased to announce our success in receiving funding for the INFLATE Trial through the NHMRC Project Grant scheme. Led by Dr Penny Abbott, researchers from the Department will work with seven urban Aboriginal and Torres Strait Islander Health Services and other university partners to investigate an innovative alternative to treating glue ear (otitis media with effusion). The INFLATE Trial is a multi-centre randomised controlled trial that will examine nasal balloon auto-inflation treatment of glue ear in Aboriginal and Torres Strait Islander children.

Glue ear is one of the most common childhood diseases, causes of hearing loss and reasons for surgery in children. Aboriginal and Torres Strait Islander children have the highest rates of persistent, severe and complicated otitis media, and this could have a significant impact on their health, development and educational attainment. Despite the impact of OME, there is limited evidence for effective non-surgical options. We will see if the use of a simple device in which a child blows up a balloon with their nostrils, helps resolve glue ear, improves hearing and is acceptable for the management of this important problem.

An important aspect of the INFLATE trial is that it allows us to continue our strong research partnerships with those Aboriginal and Torres Strait Islander Health Services already participating in the WATCH Trial. These services and their staff have been committed to promoting high quality research which matters to their communities and which improves the health of Aboriginal and Torres Strait Islander children.



Child using autoinflation device

### CALD Bowel Cancer Research

One of our recent research projects studied Culturally and Linguistically Diverse (CALD) survivors of colorectal cancer surgery. We focussed on participants who spoke Spanish and Vietnamese, which are the third and fourth most commonly spoken languages other than English in South West Sydney. The Spanish Cancer support group was very helpful in publicising our research and Dr Lawrence Tan had the opportunity to speak at one of their meetings. He also presented at a Vietnamese and Cambodian women's health group and was interviewed on Spanish SBS radio several times about this research. Vietnamese-speaking GPs Drs Vinh Lieu and Thi Nguyen were also extremely helpful in facilitating an interview on a Vietnamese health programme on SBS radio. Vietnamese speaking students Lana Nguyen and Danny Lam also assisted with interviews and translation of the research material.

## INTERNATIONAL COMMUNITIES

### Nepal Partnership

Professor Jenny Reath is a member of the International Advisory Board of a new medical school in Kathmandu Nepal - Patan Academy of Health Sciences (PAHS). This institution, like Western Sydney University, seeks to recruit and train medical practitioners to work in areas of medical workforce need, in their case in isolated rural communities. Like Western Sydney they use an evidence based, innovative learner centred, community embedded approach in their teaching. Through the generosity of donor Dr George Kostalas, we have offered exchange visits for Western Sydney University and PAHS students for each of the past three years.

A past student's comment:

*This experience will form an invaluable part of the foundation of my career, and I am deeply grateful for the opportunity.*

If you would like to support our student exchanges with PAHS please contact Professor Reath. We have also established a website to raise money in Australian for PAHS student scholarships – see <http://www.nepalhealthscholarships.org.au>

### Primary Health Care in Vanuatu

In October 2016 Dr Miriam Brooks travelled to Vanuatu where she volunteered with Medical Santo, a primary healthcare service in Luganville, Espiritu Santo Island. Luganville, the second largest town in Vanuatu, did not have a GP staffed primary healthcare service until three years ago when Medical Santo opened its doors. Of her volunteer experience, Miriam said:

*It was wonderful, I met and worked with many lovely people, and it reminded me of the importance of primary care in meeting people's health needs, something we can take for granted in countries like Australia that have established primary health care systems.*

Medical Santo is looking for GPs and nurses to volunteer at the service, accommodation is provided. For more information about volunteer opportunities contact:

**Libby.Scheinflug@medicalsanto.com**



From Left: Anish Dhakal, Oliver Charlton, Aastha Ghimire, David Rai



Medical Santo doctor and medical student playing with children at local beach

### GP Training in Bolivia and China

Prior to joining the Department of General Practice, Dr Lawrence Tan had worked for a number of years in Bolivia where he was involved in setting up a postgraduate Family Medicine training programme. Lawrence was thrilled to be invited by some of his former registrars to present as keynote speaker at the National Bolivian Family Medicine Congress in 2013, and again in 2014 to present on Evidence-Based Medicine and Primary Care Research.

In 2015 Lawrence led a team to Bolivia that included doctors, dentists, a physiotherapist and a medical student from Western Sydney University. Working with local churches and pastors, they provided free medical care including pap smears to indigenous peoples in the Amazon region as well as in remote areas in the Andes Mountains.

Dr Lawrence Tan also joined a team of other GPs from Australia who travelled to Hainan, China in 2014 to assist in training GPs there. China has set a target of training 400,000 additional GPs by 2020 in order to meet their population needs. GPs in the Hainan GP training program appear to value the expertise and insights from Australian GPs. Lawrence presented on multi-morbidity to a large audience at Haikou General Hospital and facilitated workshops for GP trainers on polypharmacy and depression in older people. In 2017 he assisted in teaching World Organization of Family Doctors (WONCA) distinctive characteristics of GPs, Evidence-Based Medicine (EBM), using an otoscope and peak flow meter, and behavioural issues in children.



Avril Friend (student) taking blood sugar levels in Bolivia



Huespedes Distinguidos Sucre 2014

# KEY RESEARCH PUBLICATIONS

## CLINICAL RESEARCH

1. George A, Ajwani S, Bhole S, Dahlen H, Reath J, Korda A, et al. *Knowledge, attitude and practices of dentists towards oral health care during pregnancy: a cross-sectional survey in New South Wales, Australia*. Australian Dental Journal, 2017. 0: 1-10.
2. Abbott P, Reath J, Gunasekera H, Leach A, Askew D, Walsh R, et al. *A multi-centre open-label randomised non-inferiority trial comparing watchful waiting to antibiotic treatment for acute otitis media without perforation in low-risk urban Aboriginal and Torres Strait Islander children (the WATCH trial): study protocol for a randomised controlled trial*. Trials, 2016. 17(1): 119.
3. Vaccher S, et al (including Reath J). *Barriers to care in gout: from prescriber to patient*. Journal of Rheumatology, 2016. 43(1): 144-9.
4. Wong KC. *How to apply clinical cases and medical literature in the framework of a modified "failure mode and effects analysis" as a clinical reasoning tool-an illustration using the human biliary system*. J Med Case Rep, 2016. 10: 85.
5. Jammal W, Gown G. *Opioid prescribing pitfalls: medico legal and regulatory issues*. Australian Prescriber, 2015. 38: 198-203.
6. Wong KC, Brown AM, Luscombe GM, Wong SJ, Mendis K. *Antibiotic use for vibrio infections: important insights from surveillance data*. BMC infectious diseases, 2015. 15(1): 1.
7. Abbott P, Rosenkranz S, Hu W, Gunasekera H, Reath J. *The effect and acceptability of tympanometry and pneumatic otoscopy in general practitioner diagnosis and management of childhood ear disease*. BMC Family Practice, 2014. 15(1): 181.
8. Tan L, Hu W, Brooker R. *Patient-initiated camera phone images in general practice: a qualitative study of illustrated narratives*. The British Journal of General Practice, 2014. 64(622): e290-4.
9. Falster K, et al (including Reath J). *Inequalities in ventilation tube insertion procedures between Aboriginal and non-Aboriginal children in New South Wales, Australia: a data linkage study*. BMJ Open, 2013. 3(11): e003807.
10. George A, et al (including Reath J). *Oral health care during pregnancy*. Australian Nursing & Midwifery Journal, 2013. 21(3): 42.
11. McMahon CM, et al (including Reath J). *The need for improved detection and management of adult-onset hearing loss in Australia*. International Journal of Otolaryngol, 2013. 2013: 308509.
12. Rosenkranz S, Abbott P, Reath J, Gunasekera H, Hu W. *Promoting diagnostic accuracy in general practitioner management of otitis media in children: findings from a multimodal, interactive workshop on tympanometry and pneumatic otoscopy*. Quality in Primary Care, 2012. 20(4): 275-85.
13. Reath J, Brown N. *Managing cardiovascular disease in Aboriginal and Torres Strait Islander people*. Australian Prescriber, 2010. 33(3): 70-3.

## COMMUNITY/PUBLIC HEALTH RESEARCH

1. Abbott P, Brooker R, Reath J. *Supporting the mental health and wellbeing of the residents of Airds – during and beyond housing renewal*. Western Sydney University, 2017.
2. Burns P, et al. In: Gerry FitzGerald MT, Aitken P, Fredriksen M, (editors). *Disaster health management: a primer for students and practitioners*. Routledge, 2016.
3. Green A, et al (including Abbott P). *Navigating the journey of Aboriginal childhood disability: a qualitative study of carers' interface with services*. BMC Health Services Research, 2016. 16(680).
4. Ahn J, Park J, Anthony C, Burke M. *Understanding, benefits and difficulties of home medicines review – patients' perspectives*. Australian Family Physician, 2015. 44: 249-53.
5. Burns PL, et al. *Where are general practitioners when disaster strikes?* Medical Journal of Australia, 2015. 202(7): 356-9.
6. Hu J, Wong KC, Wang Z. *Recruiting migrants for health research through social network sites: an online survey among Chinese migrants in Australia*. JMIR Research Protocols, 2015. 4(2).
7. Issaka A, et al (including Burns P). *Comparisons of complementary feeding indicators among children aged 6-23 months in Anglophone and francophone West African countries*. Maternal and Child Nutrition, 2015. 11(S1): 1-13.
8. Raphael B, Burns P. *The Sydney siege: courage, compassion and connectedness*. The Medical Journal of Australia, 2015. 202(2): 70-1.
13. Taylor M, et al (including Burns P). *The preparedness and evacuation behaviour of pet owners in emergencies and natural disasters*. Australian Journal of Emergency Management, 2015. 30(2): 18-23.
14. Taylor M, et al (including Burns P). *The challenges of managing animals and their owners in disasters: perspectives of Australian response organisations and stakeholders*. Australian Journal of Emergency Management, 2015. 30(2): 31-7.
15. Issaka AI, et al (including Burns P). *Determinants of inadequate complementary feeding practices among children aged 6-23 months in Ghana*. Public Health Nutrition, 2014. 1-10
16. Raphael B, Burns P. *Children in disasters: The way forward*. National Emergency Response, 2014. 27(2): 4-6.
17. Burns P, et al. *Human behaviour during an evacuation scenario in the Sydney Harbour Tunnel*. Australian Journal of Emergency Management, 2013. 28(1).
18. DiGiacomo M, et al (including Abbott P). *Childhood disability in Aboriginal and Torres Strait Islander peoples: a literature review*. International Journal for Equity in Health, 2013. 12: 7.
19. Reath J, Tan L, Whitehall J, Burns P, Hu W. *Working in developing countries*. Medical Observer, 2013.
20. Rosenkranz R, Duncan M, Rosenkranz S, Kolt G. *Active lifestyles related to excellent self-rated health and quality of life: cross sectional findings from 194,545 participants in The 45 and Up Study*. BMC Public Health, 2013. 13: 1071.
21. Abbott P, et al. *Effective nutrition education for Aboriginal Australians: lessons from a diabetes cooking course*. Journal of Nutrition Education and Behaviour, 2012. 44(1): 55-9.
22. DiGiacomo M, et al (including Abbott P). *Smoking cessation in indigenous populations of Australia, New Zealand, Canada, and the United States: elements of effective interventions*. International Journal of Environmental Research and Public Health, 2011. 8(2): 388-410.
23. Abbott P, et al. *Barriers and enhancers to dietary behaviour change for Aboriginal people attending a diabetes cooking course*. Health Promotion Journal of Australia, 2010. 21(1): 33-8.

## HEALTH SERVICES RESEARCH

1. Abbott P, Davison J, Magin P., Hu W. *'If they're your doctor, they should care about you': women on release from prison and general practitioners*. Australian Family Physician, 2017.45 (10): 728.
2. Abbott P, Magin P, Davison J, Hu W. *Medical homelessness and candidacy: women transiting between prison and community health care*. International Journal for Equity in Health, 2017. 16(130).
3. Abbott P. *Patient-centred health care for people with chronic skin conditions*. British Journal of Dermatology. 2017. 177: 329-30.
4. Trankle S, Abbott P, Usherwood T, Girgis C, Roberts M, Chang Y, et al. *The Western Sydney Integrated Care Program (WSICP): Qualitative Evaluation*. International Journal of Integrated Care, 2017. 17(3): A18, pp. 1-8.
5. Barton C, Tam C, Abbott P, Hall S, Liaw ST. *Can research that is not intended or unlikely to be published be considered ethical?* Australian Family Physician, 2017. 46(6): 442.
6. Blignault I, McDonnell L, Aspinall D, Yates R, Reath J. *Beyond diagnosis and survivorship: findings from a mixed-methods study of a community-based cancer support service*. Australian Journal of Primary Health, 2017.
7. Lloyd J, McEntyre E, Abbott P, Reath J, et al. *Aboriginal and non-Aboriginal Australian former prisoners' patterns of morbidity and risk of hospitalisation*. International Journal for Equity in Health, 2017. 16(1): 3.
8. Abbott P, Hu W, Magin P, Lujic S. *Supporting continuity of care between prison and the community for women in prison: a medical record review*. Australian Health Review, 2016. 41(13): 268-76.
9. Abbott P, Magin P, Hu W. *Healthcare delivery for women in prison - a medical record review*. Australian Journal of Primary Health, 2016. 22(6): 523-9.
10. Barton C, Tam C, Abbott P, Liaw S-T. *Ethical considerations in recruiting primary care patients to research studies 2016*. Available from: <http://vitalis.com/wp-content/uploads/2016/03/201603Barton.pdf>.
11. Reath J, George A, Dahlen H, Ajwani S, et al. *What do antenatal care providers understand about oral health care during pregnancy: A cross-sectional survey in NSW, Australia*. BMC Pregnancy and Childbirth, 2016. 16: 382.
12. Green A, Abbott P, Delaney J, Davidson PM, Delaney P, Digiacomio M, et al. *Navigating the journey of Aboriginal childhood disability: a qualitative study of carers' interface with services*. BMC Health Services Research, 2016. 16(680).
13. King M, Usherwood T, Brooker R, Reath J. *Supporting primary health care providers in Western Sydney areas of socio-economic Canberra*: Australian Primary Health Care Institute, 2016.
14. Lewis E, Cardona-Morrell M, Ong K, Trankle SA, Hillman K. *Evidence still insufficient that advance care documentation leads to timely engagement of healthcare professionals in end-of-life discussions: A systematic review*. Palliative Medicine, 2016. 1-18.
15. Costa D, Van C, Abbott P, Krass I. *Investigating general practitioner engagement with pharmacists in home medicines review*. Journal of Inter-professional Care, 2015. 29(5): 469-75.
16. Dadich A, Abbott P, Hosseinzadeh H. *Strategies to promote practice nurse capacity to deliver evidence-based care: an example from sexual healthcare*. Journal of Health Organization and Management, 2015.29(7): 988 – 1010.
17. Lloyd JE, Delaney-Thiele D, Abbott P, Baldry E, McEntyre E, Reath J, et al. *The role of primary health care services to better meet the needs of Aboriginal Australians transitioning from prison to the community*. BMC Family Practice, 2015. 16(1): 86.
18. Reath J, Brownhill S. *Oran Park integrated primary health care service evaluation framework*. Sydney: Campbelltown: Western Sydney University, 2015.
19. Trankle SA, Reath J. *The Nepean Blue Mountains partners in recovery evaluation*. Sydney: Western Sydney University, 2015.
20. Deshmukh T, Abbott P, Reath J. *'It's got to be another approach': an Aboriginal health worker perspective on cardiovascular risk screening and education*. Australian Family Physician, 2014. 43: 475-8.

21. Friesen EL, et al (including Reath J). *Building research capacity in south-west Sydney through a primary and community health research unit*. Australian Journal of Primary Health, 2014. 20(1): 4-8.
22. Jammal W, Stewart C, Parker M. "CAM-creep": *medical practitioners, professional discipline and integrative medicine*. Journal of Law and Medicine, 2014.22(1): 221-32.
23. Murphy B, Reath JS. *The imperative for investment in Aboriginal and Torres Strait Islander health*. The Medical Journal of Australia, 2014.200(11): 615-6.
24. Reath J, Burns P, Brooker R, Abbott P, Renshaw B, Usherwood T. *Partnership evaluation of Western Sydney Medicare Local and Western Sydney Local Health District*. Sydney: University of Western Sydney, 2014.
25. Trankle S. *Decisions that hasten death: double effect and the experiences of physicians in Australia*. BMC Medical Ethics, 2014. 15(1): 26.
26. Trankle SA. *Is a good death possible in Australian critical and acute settings?: physician experiences with end-of-life care*. BMC Palliative Care, 2014. 13: 41.
27. Abbott P, including Reath J, et al. *Practice nurses and sexual health care -- enhancing team care within general practice*. Australian Family Physician, 2013. 42(10): 729-33.
28. Abbott P, et al. *Improving immunisation timeliness in Aboriginal children through personalised calendars*. BMC Public Health, 2013. 13: 598.
29. Deek H, et al (including Abbott P). *Pneumococcus in Aboriginal and Torres Strait Islander peoples: the role of Aboriginal health workers and implications for nursing practice*. Contemporary Nurse, 2013. 46(1): 54-8.
30. DiGiacomo M, et al (including Abbott P). *'Doing the hard yards': carer and provider focus group perspectives of accessing Aboriginal childhood disability services*. BMC Health Services Research, 2013.13: 326.
31. Van C, et al (including Abbott P). *Development and validation of a measure and a model of general practitioner attitudes toward collaboration with pharmacists*. Research in Social & Administrative Pharmacy (RSAP), 2013. 9(6): 688-99.
32. Van C, et al (including Abbott P). *Community pharmacist attitudes towards collaboration with general practitioners: development and validation of a measure and a model*. BMC Health Services Research, 2012. 12(1): 320.
33. Van C, et al (including Abbott P). *Development and initial validation of the Pharmacist Frequency of Inter-professional Collaboration Instrument (FICI-P) in primary care*. Research in Social & Administrative Pharmacy (RSAP), 2012. 8(5): 397-407.
34. Van C, et al (including Abbott P). *Development and validation of the GP frequency of interprofessional collaboration instrument (FICI-GP) in primary care*. Journal of Inter-professional Care, 2012. 26(4): 297-304.
35. Van C, et al (including Abbott P). *Factors predicting GP-Pharmacist inter-professional collaboration in primary care from the pharmacist's perspective: a structural equation modelling approach*. Research in Social and Administrative Pharmacy, 2012. 8(6): e37.
36. Davidson PM, et al (including Abbott P). *Improving medication uptake in Aboriginal and Torres Strait islander peoples*. Heart, Lung & Circulation, 2010. 19(5-6): 372-7.
37. DiGiacomo M, et al (including Abbott P). *Facilitating uptake of Aboriginal adult health checks through community engagement and health promotion*. Quality in Primary Care, 2010. 18(1): 57-64.

## EDUCATION RESEARCH

1. Reath J, Abbott P, Dadich A, Hosseinzadeh H, Hu W, Kang M, et al. *Evaluation of a sexually transmissible infections education program: Lessons for general practice learning*. Australian Family Physician, 2016. 45(3): 123-8.
2. Tan L. *Paula's run out of puffers*. Check Independent Learning Program for GPs, 2016. 528: 10-7.
3. Watt K, Abbott P, Reath J. *Developing cultural competence in general practitioners: an integrative review of the literature*. BMC Family Practice, 2016. 17: 158.
4. Watt K, Abbott P, Reath J. *Cultural competency training of GP registrars-exploring the views of GP supervisors*. International Journal for Equity in Health, 2015. 14(1): 89.
5. Watt K, Abbott P, Reath J. *Cross-cultural training of general practitioner registrars: How does it happen?* Australian Journal of Primary Health, 2015.
6. Abbott P, Dave D, Gordon E, Reath J. *What do GPs need to work more effectively with Aboriginal patients? Views of Aboriginal cultural mentors and health workers*. Australian Family Physician, 2014. 43(1): 58-63.
7. Abbott P, Reath J, Gordon E, Dave D, Harnden C, Hu W, et al. *General Practitioner Supervisor assessment and teaching of Registrars consulting with Aboriginal patients - is cultural competence adequately considered?* BMC Medical Education, 2014. 14(1): 167.
8. Abbott P, Reath J, Rosenkranz S, Usherwood T, Hu W. *Increasing GP supervisor research skills - enhancing clinical practice and teaching*. Australian Family Physician, 2014. 43(5): 327-30.
9. Reath J. *Building cultural education and cultural mentoring capacity*. Snapshot of Australian Primary Health Care Research, June 2014. 28-9.
10. Reath J, Senior T, Martin M, Parry A, Abbott P. *Working with Aboriginal and Torres Strait Islander patients*. Australian Doctor, 7 November 2014.
11. Watt K, Burns P, Brooks M, Reath J, Cashman H, Dyason A, et al. *GPs in Schools Project 2014: Report on a joint project between the Western Sydney University Department of General Practice and St Patrick's College Campbelltown*. Sydney: Western Sydney University, 2014.
12. Reath J, Abbott P, Kurti L, Morgan R, Martin M, Parry A, et al. *Building Aboriginal and Torres Strait Islander cultural education and cultural mentoring capacity*. Sydney: University of Western Sydney, 2013.
13. Dadich A, Hosseinzadeh H, Abbott P, Reath J. *GP project: process and impact evaluation*. Sydney: Western Sydney University, 2012.
14. Martin ME, Reath JS. *General practice training in Aboriginal and Torres Strait Islander health*. The Medical Journal of Australia, 2011. 194(11): S67-70.

# Contacts

## Department of General Practice Academic & Research Staff

### Prof Jenny Reath

Peter Brennan Chair of General Practice  
(02) 4620 3725  
j.reath@westernsydney.edu.au

### Dr Penny Abbott

Senior Lecturer  
(02) 4620 3560  
p.abbott@westernsydney.edu.au

### Dr Miriam Brooks

Senior Lecturer  
(02) 4620 3896  
miriam.brooks@westernsydney.edu.au

### Dr Winston Lo

Senior Lecturer  
(02) 4620 3561  
w.lo@westernsydney.edu.au

### Dr Lawrence Tan

Senior Lecturer  
(02) 4620 3896  
lawrence.tan@westernsydney.edu.au

### Dr Steven Trankle

Research Fellow  
(02) 4620 3930  
s.trankle@westernsydney.edu.au

### Dr David Cosgriff

Academic Registrar  
(02) 4620 3896  
david.cosgriff@westernsydney.edu.au

### Dr Alison Lyon

Academic Registrar  
(02) 4620 3896  
a.lyon@westernsydney.edu.au

### Dr Jessica Armstrong-Kearns

Research Officer  
(02) 4620 3937  
j.armstrong@westernsydney.edu.au

### Ms Robyn Walsh

Research Officer  
(02) 4620 3486  
r.walsh@westernsydney.edu.au

### Ms Julianne Abood

Research Assistant  
(02) 4620 3682  
j.abood@westernsydney.edu.au

### Ms Sam Wager

Aboriginal Research Admin Cadet  
(02) 4620 3540  
s.wagner@westernsydney.edu.au

## Professional Staff

### Mr Chris Martin

Senior Administrative Officer  
(02) 4620 3933  
chris.martin@westernsydney.edu.au

### Ms Vicki Bradley

Administration Assistant  
(02) 4620 3896  
v.bradley@westernsydney.edu.au

### Ms Nicole King

Administrative Officer WATCH Trial  
(02) 4620 3562  
n.king@westernsydney.edu.au



[WESTERNSYDNEY.EDU.AU](http://WESTERNSYDNEY.EDU.AU)