Who should give lifestyle advice in general practice and what factors influence attendance at health promotion clinics? Survey of patients’ views

SOUTH TYNESIDE PATIENT SATISFACTION WORKSHOP

SUMMARY

Background. Health promotion activity in general practice has increased greatly since 1990. A large proportion of this work is undertaken by practice nurses. Little is known about patients’ views about the providers of health promotion or their views about general practice health promotion clinics.

Aim. A study was carried out in 1992 to determine patients’ views about the provision of health promotion advice by general practitioners and practice nurses and their views about attending health promotion clinics.

Method. A postal questionnaire was sent to a random sample of 1750 patients aged 16 years and over from five general practices in south Tyneside. The questionnaire explored patients’ preferences regarding health promotion advice from the general practitioner or practice nurse in relation to four areas of lifestyle advice and factors that might encourage patients to attend a health promotion clinic.

Results. A response rate of 75% was obtained from 1369 eligible patients. Receiving health promotion advice from either the general practitioner or the practice nurse was the most commonly preferred option expressed by patients overall. The ability of health promotion clinic staff to deal with patients’ concerns about their illness and short waiting times were more likely to influence patients’ attendance at health promotion clinics than the presence of a general practitioner or practice nurse.

Conclusion. In the present study, many patients found health advice received from practice nurses and general practitioners equally acceptable. However, it was the ability of health professionals to respond to patients’ health concerns in the health promotion clinic rather than the type of health professional running the clinic that was important for patients.

Keywords: health promotion; health education; health professionals’ role; patients’ attitudes.

Introduction

The advent of the 1990 contract for general practitioners, together with the introduction of health promotion clinic payments, led to an unprecedented growth in health promotion clinics in general practice. Much of the increased workload was delegated to practice nurses, whose numbers have trebled in England and Wales since 1987 to over 15 000 in 1993. More importantly, there has been a change in the role of practice nurses where much of their work is now centred around health promotion.

There is concern about the nature, organization and adequacy of training of practice nurses to equip them for their changing role in general practice. Doubt has also been cast on the value of health advice given by nurses in changing patients’ cardiovascular risk factors and in helping smokers to stop smoking.

Further changes to general practice health promotion occurred in 1993. A new health promotion contract shifted the emphasis away from clinics and their payments to a return to opportunistic health promotion.

Despite these far-reaching changes, the views of patients have received little attention. A study was therefore carried out to determine patients’ views about two providers of health promotion — the general practitioner and the practice nurse — and to determine patients’ views about attending health promotion clinics in general practice.

Method

The study population consisted of a random sample of 350 patients aged 16 years and over from each of five general practices in the south Tyneside district of the Northern Region in England. The five practices represented 24 general practitioners, 10 practice nurses and 43 600 patients. The sample was drawn from family health services authority computer records.

A postal questionnaire was developed through a series of interview stages, the results of which have been reported elsewhere. The questionnaire explored patients’ preferences regarding health promotion advice from the general practitioner or practice nurse in relation to four main areas of lifestyle — weight, exercise, smoking and drinking alcohol — and factors that might encourage patients to attend a practice health promotion clinic. Patients’ attitudes were assessed on the questionnaire using scales based on the nature and range of patients’ responses obtained during development of the questionnaire.

The main survey was conducted in November and December 1992. A copy of the questionnaire was mailed to each patient in the study accompanied by a covering letter signed by the patient’s general practitioner and a reply-paid envelope. A reminder letter was sent after three weeks, and then six weeks later a further reminder letter was sent together with a second copy of the questionnaire.

Data were analysed using EPI INFO and SPSSPC. Results were analysed using cross tabulations.

Results

Of the 1750 questionnaires sent to patients in the sample, 111 (6.3%) were returned stating that the patient was not at that address or had died. A total of 1237 of the 1639 patients (75.5%) completed questionnaires. The response rate in the five different practices ranged from 72.7% to 78.6%. Of 1233 respondents, 718 (58.2%) were women (data on sex missing for four respondents).

J Eggleston, MRCP, general practitioner; J Gallagher, MBBS, computer facilitator; M Gallagher, FRCP, general practitioner and workshop coordinator; T Hares, BA, MSc, social science researcher; E Murray, medical audit advisory group coordinator; N Naroz, MB and T Owen, MRCP, general practitioners; P Price and L Fyn, practice managers; L Reed, MRCP, general practitioners; and K Robinson, SLO, practice manager and practice nurse, south Tyneside patient satisfaction workshop, South Shields. Submitted: 23 June 1994; accepted: 28 April 1995.

Receiving health promotion advice from either the general practitioner or the practice nurse was the most commonly preferred option expressed by patients overall (Table 1). Fewer patients wanted to talk to a practice nurse only compared with a general practitioner only. Approximately half of patients did not wish for advice about smoking or drinking.

Table 2 shows that the ability of health promotion clinic staff to deal with patients’ concerns about their illnesses and short waiting times were more likely to influence patients’ attendance at health promotion clinics than the presence of a general practitioner or practice nurse.

### Discussion

The overall response rate of 75% to the questionnaire compares favourably with two previous major surveys of patients’ views about health promotion.18,19

Patients’ attitudes to practice nurses are important, given the increasing role that practice nurses now have in health promotion in general practice. It has been suggested that patients find it easier to talk to a practice nurse rather than to a general practitioner;20 this finding was not confirmed in the present study. In fact, fewer patients wanted to talk to a practice nurse only compared with a general practitioner only. During the preliminary interviews, a number of themes were identified.15 The most important was a belief among patients that opportunistic health promotion is part of the role of practice nurses. Patients showed discrimination about which problems they would take to the practice nurse and which they would take to the general practitioner. In particular, some problems were considered by patients to be too trivial for the general practitioner but appropriate for the practice nurse to manage.15

Overall, patients in the present survey were willing to receive advice from either the general practitioner or the practice nurse, but the general practitioner only rather than the practice nurse only was the next most commonly preferred source of advice. A preference for the general practitioner only rather than the practice nurse only may reflect the fact that patients prefer to seek and receive health promotion advice when consulting with other problems.14 Patients may also be responding to the traditional role of the general practitioner in providing health advice, a role to which the practice nurse has only recently acceded. Work by Peter showed that half of practice nurses had no theoretical knowledge of health promotion despite the fact that all were engaged in health promotion activities.6

The factor most commonly reported to influence attendance at a practice health promotion clinic was whether the patient’s personal concerns would be met, rather than the presence of a general practitioner or practice nurse. Previous research has shown that the nature and presentation of lifestyle advice is crucial.21,22 Patients find lifestyle advice acceptable only if the issue is directly related to their concerns (in the present study, approximately half of patients did not wish to receive advice about smoking or drinking) or if the general practitioner has reasons to be concerned about the patient’s health.21,22

In the present study, receiving health promotion advice from either the general practitioner or the practice nurse was the most commonly preferred option expressed by patients. However, it was the ability of health professionals to respond to patients’ health concerns in the health promotion clinic rather than the type of health professional running the clinic that was important to patients.

### Table 1. Patients’ expressed preferences for source of lifestyle advice regarding weight, exercise, smoking and drinking.

<table>
<thead>
<tr>
<th>Source of lifestyle advice</th>
<th>Weight (n= 1215)</th>
<th>Exercise (n= 1205)</th>
<th>Smoking (n= 1125)</th>
<th>Drinking (n= 1132)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP only</td>
<td>26.5</td>
<td>24.3</td>
<td>20.3</td>
<td>17.8</td>
</tr>
<tr>
<td>Practice nurse only</td>
<td>3.0</td>
<td>3.2</td>
<td>0.7</td>
<td>0.9</td>
</tr>
<tr>
<td>GP or practice nurse</td>
<td>48.6</td>
<td>48.8</td>
<td>30.5</td>
<td>27.8</td>
</tr>
<tr>
<td>GP and practice nurse</td>
<td>5.1</td>
<td>4.4</td>
<td>2.9</td>
<td>2.0</td>
</tr>
<tr>
<td>Do not wish advice</td>
<td>16.8</td>
<td>19.3</td>
<td>45.6</td>
<td>51.4</td>
</tr>
</tbody>
</table>

n = number of respondents to aspect of lifestyle advice.

### Table 2. Factors considered by patients to influence their attendance at a practice health promotion clinic.

<table>
<thead>
<tr>
<th>Factor</th>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>If I knew someone could explain my illness</td>
<td>92.9</td>
<td>2.6</td>
<td>4.4</td>
</tr>
<tr>
<td>(n = 1174)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worries about my health (n = 1204)</td>
<td>91.9</td>
<td>4.1</td>
<td>4.0</td>
</tr>
<tr>
<td>Short waiting time to be seen (n = 1167)</td>
<td>91.3</td>
<td>5.1</td>
<td>3.7</td>
</tr>
<tr>
<td>Convenient times (n = 1168)</td>
<td>81.3</td>
<td>12.1</td>
<td>6.6</td>
</tr>
<tr>
<td>If regular follow up suggested (n = 1151)</td>
<td>79.3</td>
<td>8.5</td>
<td>12.2</td>
</tr>
<tr>
<td>If GP and practice nurse were present (n = 1127)</td>
<td>67.3</td>
<td>20.5</td>
<td>12.2</td>
</tr>
<tr>
<td>If recommended by family/friends (n = 1150)</td>
<td>54.3</td>
<td>30.8</td>
<td>14.9</td>
</tr>
<tr>
<td>If GP only present (n = 1133)</td>
<td>43.4</td>
<td>41.9</td>
<td>14.7</td>
</tr>
<tr>
<td>As a result of something on TV (n = 1150)</td>
<td>27.5</td>
<td>54.1</td>
<td>18.4</td>
</tr>
<tr>
<td>If practice nurse only present (n = 1092)</td>
<td>27.7</td>
<td>55.4</td>
<td>16.9</td>
</tr>
<tr>
<td>Newspaper or magazine article (n = 1144)</td>
<td>23.6</td>
<td>58.3</td>
<td>18.1</td>
</tr>
</tbody>
</table>

n = number of respondents to factor.

### References


Acknowledgements
This study was funded by the Department of Health. South Tyneside Medical Audit Advisory Group and South Tyneside Family Health Services Authority gave practical support; Theresa Huddart typed the manuscript.

Address for correspondence
Dr M Gallagher, Central Surgery, Stanhope Parade Health Centre, Gordon Street, South Shields, Tyne and Wear NE33 4HX.

RCGP SALES OFFICE

Will your forthcoming 1996 Journals be left lying around the surgery?

Why not keep them all together in the RCGP specially designed Journal Binders. In the corporate colour of royal blue with gold lettering they are an ideal solution to filing all back and forthcoming issues of the British Journal of General Practice.

Available from:
RCGP Sales at £6.50 per binder including postage.

Ring 0171-823-9698 between 9.30 and 4.30 to place your order.

Ultra sound & Radiography Courses at the University of Portsmouth

To complement its range of undergraduate and postgraduate courses in medical imaging and therapeutic radiography, the University offers a range of short courses including:-

- **Introductory ultrasound for GP's**, a one week course of both theory and guided practice. General abdominal ultrasound and the role of ultrasound in obstetrics are the main themes.
  
  Course Date: 13-17 May 1996.

- **Ultrasound for Midwives**, whilst the course described is open to midwives they are also eligible to join the PgD/MSc (Ultrasound) medical imaging programme.

- **Dental Radiography**, a sandwich course style of delivery for registered dental nurses.

For further information please contact:
Dr Alan Castle
University of Portsmouth
Centre for Radiography Education
St Mary's Hospital
Portsmouth PO3 6AD

Telephone 01705 866190

a centre of excellence for university teaching and research