



Indigenous Medication Review Service (IMeRSe) Feasibility Study

Welcome to the Indigenous Medication Review Service (IMeRSe) newsletter: Issue 4

This is our first update on study progress for 2019 and as we come to the end of February it is exciting to see that we have over 200 participants enrolled. This means we are well over half-way to reaching our target of 300 plus participants in the next couple of months. So, our primary focus in the coming weeks will be supporting the recruitment process at all nine study sites.

This work is only possible because of the dedication of the IMeRSe Coordinators, Aboriginal Health Workers, Community Pharmacies, and other Champions.

So a big thank you to everyone.



Professor Amanda Wheeler
IMeRSe Academic Project Lead

**OUR HEALTH
OUR VOICE
OUR CHOICE**

CLOSE THE GAP

**NATIONAL CLOSE THE GAP DAY
21 MARCH 2019**

National Close the Gap Day (NCTGD) is an annual awareness event that aims to close the health and life expectancy gap between the Indigenous and the non-Indigenous communities in Australia.

Have you considered holding a Close the Gap day event
To find out more and access resources see: [click here](#)



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IMeRSe at a glance



Upcoming Events

Coordinators Teleconference and IMeRSe Community Pharmacists Webinars in 2019!

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Study Dashboard

Keep up-to-date with IMeRSe Study

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Coordinators Teleconference

Highlights and tips from the IMeRSe Coordinators

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Spotlight on....

Highlighting our most active health services and community pharmacies

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Pharmacist Update

Ruth Renshaw from Alive Pharmacy, Cooktown, Qld

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News and Information

Latest News and Information: IMeRSe Study and submit your IMeRSe stories.

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Save the Date!

The next IMeRSe Coordinators Teleconference dates:

- 27 March 2019, 8 May 2019, 10 July 2019, 9 September 2019

Calendar invites will be sent closer to the dates. All Coordinators are encouraged to attend. Please register

your attendance for the March teleconference via: imerse@griffith.edu.au by Friday 22nd March 2019.

IMeRSe Pharmacists Webinar - Save the Date!

The next Pharmacy Webinar dates:

- 7 March 2019, 30 April 2019, 11 June 2019, 30 July 2019 and 10 September in 2019

All participating pharmacists are encouraged to attend. Please register your attendance for the March webinar via: imerse@griffith.edu.au by 4 March, 2019.

Study Dashboard

Sites Recruited	Community Pharmacies Trained	Participants Enrolled	Medicine Reports Completed	Medicines Plans Completed	Follow-ups Conducted
9	22	206	100	22	3

Spotlight on...

Once again our site Coordinators have been applying several ways to recruit new participants and the community pharmacists have been hard at work conducting almost 100 *Medicines Talks* in the last two months. We would like to highlight the following participating AHS:

- Brewarrina Aboriginal Medical Services;
- Cooktown Multipurpose Health Centre;
- Healthwise New England North West Gunnedah;
- Girudala Herbert St Family Medical Centre, Bowen.

Community pharmacies who have completed a high number of *Medicines Reports* include:

- Alive Pharmacy Cooktown;
- Cincotta Chemist, Inala;
- Karen Carter Chemist, Gunnedah;
- Livelife Pharmacy (Bowen Healthcare).

A huge thanks and congratulations to all of our participating AHS Sites and health services in your great work in supporting IMeRSe!

Meet our Coordinator

The IMeRSe Coordinators play a pivotal role in the study and we are grateful for their support.



Image (R-L): Dee-Anna with Katrina Ward the manager and

This time, we would like to introduce you to our wonderful Brewarrina Coordinator, Dee-Anna is an Aboriginal health worker and an endorsed enrolled nurse. She enjoys time with her family and friends fishing and being at the river.

'IMeRSe is a wonderful program and is needed in the community' Dee-Anna

Nicole Bennet, Brewarrina Aboriginal Medical Service.

IMeRSe Coordinators Teleconferences

In late January and early February, we held the first of a series of teleconferences for AHS staff and IMeRSe Coordinators. The meetings were well attended and they provided a good opportunity for Coordinators to get to know each other and to swap ideas about recruitment and strategies to resolve other issues encountered during the study. Overall, the Coordinators and AHS staff report their involvement in IMeRSe as a very positive experience.

'increasing awareness in the community and doctors visiting the patients with chronic illness every two weeks and the use of webster-packs has contributed to the participants gaining a better understanding of their medication. In their recruitment of participants and talks with the pharmacists, they find the participants very interested to follow the IMeRSe' Anna (Cooktown)

'[it's] rewarding to be involved in the IMeRSe program building relationships with pharmacists for output of good and applicable medication reports' Warren (GP Inala)

Tips for recruitment shared at the Coordinators Teleconference:

- continue to spread the word about IMeRSe throughout the community
- target family members for recruitment
- mail out of flyers to specialist clinics, access clinic lists
- contact pharmacies about identifying participants and supplying a list
- community events, BBQs, jointly hosted by pharmacy and health service
- community education events hosted by health service with pharmacy support
- flyers and posters on display in clinics and pharmacies

If you have any other tips or suggestions that you would like to share, please send them through and we will circulate to all sites.

Pharmacist Update



Ruth Nona Renshaw

Ruth is the Pharmacist Manager at Alive Pharmacy in Cooktown. She visited Wujal Wujal earlier this month and we'd like to share her experience with you..

Going out to communities is completely different. I've been a pharmacist for 20 years and I wish I'd known about Remote Pharmacy sooner. There is so much opportunity for a pharmacist to do good and make a real difference. Having said that, the IMeRSe study has really allowed me to develop my relationship within 2 of my 5 remote communities. I have so far seen 32 patients and nearly every person I saw had some kind of an issue, that by adjusting medications, could reduce their current symptoms, keep them out of hospital longer and in some cases, potentially add years to their lives.

How many sets of traffic lights do you drive through to get to work. For me its how many creeks and rivers, especially now in the middle of the wet season. Its a 50 minute drive from Cooktown to Wujal, through the beautiful green rain forest. I think to myself, how lucky I am to be here, to experience this, to get away from my white coat and nurofen. I love going to Wujal Wujal, everyone there is so welcoming and friendly, they treated me like a part of their community, not just the person behind the counter in a white coat. The coordinators, Florence and Anna, were lovely, they had set up a little clinic for me and had organised appointments and consent before I arrived. They assisted with introductions, translating when it was needed and encouraged people to share their concerns with me.

So each weekday in remote communities, the clinics are set up with various healthcare professionals, different ones on different days. On the days I was there I was lucky enough to be next to the Chronic Disease doctor, a GP, Womens health nurse and also diabetes educator. Being at the community with other allied health professionals was really positive, I was able to immediately refer people to, and discuss issues with Baz the Chronic Disease doctor, Scott the GP and Maureen the Diabetes educator. In turn, all of these people actually referred to me too.

It really is about relationships, starting a conversation, being friendly and kind and building rapport. I found that by taking the time to review people's history and developing relationships, I was able to get a deeper understanding of their concerns and make medication change recommendations that in many cases could help reduce some of the long term effects of chronic disease and prolong their life. I was also able to uncover a couple of conditions that people have been keeping to themselves, and whom I was able to refer to specialists the next day. In the next two weeks I hope to see another 12-15 people at least.

Before moving to Cooktown, I worked in suburbia, independent pharmacies and shopping centres. When I moved here I was amazed how accepted I was as a health care professional. It wasn't just from one or 2 people, it was across the board; doctors, specialists, nurses, all other allied health care professionals. This acceptance was from the medical centre, in the hospital, the remote communities and RFDS. Being a remote area Pharmacist is such a positive experience, and it has shown me that, as pharmacists, we can make such a difference.



Left to right: Ruth, Maureen (diabetes educator), Tommy Nandy & Florence Walker (AHW & IMerSe co-ordinator) *permission provided

Latest News and Information

We encourage you to submit stories for the IMerSe newsletter, and details of your team and their experience with implementing IMerSe in your health service or community pharmacy. Email submissions to: imerse@griffith.edu.au

Moree Amcal IMerSe BBQ



Moree Amcal recently held a community BBQ to meet the locals and raise awareness about the IMerSe Feasibility Study and how it can benefit the people of their community. It was a great success and as a result a number of people are interested in joining the study.

Meet our new Griffith team members



Dr Jie Hu is originally from China and has lived and worked in New Zealand, Singapore, and Australia. Jie is experienced in data management and analysis in public health and health services research projects. In the past two years, she has been working closely with health professionals from Aboriginal health services and patients from Indigenous communities to evaluate a chronic disease self-management program.



Dr Liz Kiata-Holland is a social scientist working in primary health care research. Specialising in qualitative research. Liz is experienced in inter-cultural mixed methods research. Living in an inter-cultural relationship for many years, Liz moved from New Zealand to Queensland in 2012 to stay near her close-knit family.

This feasibility study is funded by the Australian Government Department of Health as part of the Sixth Community Pharmacy Agreement.

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