2016/2017 Annual Report

Gold Coast Primary Health Network

"Building one world class health system for the Gold Coast."

phn GOLD COAST

An Australian Government Initiative

2016 2017 ANNUAL REPORT

"Building one world class health system for the Gold Coast."

Editorial and Design

GCPHN Communications Team
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Gold Coast Primary Health Network would like to acknowledge the traditional custodians of the Gold Coast and surrounding areas, the Yugambeh, Yuggera and Bundjalung peoples.

Gold Coast Primary Health Network gratefully acknowledges the financial and other support from the Australian Government Department of Health.

PROJECTS AND PROGRAMS

Who we are

Gold Coast Primary Health Network

Gold Coast Primary Health Network turned two on July 1 2017, one of 31 Primary Health Networks established by the Federal Government, with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time.

Our values

SUSTAINABLE
Efficient, Effective, Viable

EVIDENCE-BASED
Research, Documenting, Transparent

INFLUENTIAL
Visible, Valued, Courageous

INNOVATIVE
Flexible, Pioneering, Evolutionary

COLLABORATIVE
Partnerships, Integrated, Engaged

ACCOUNTABLE
Respect, Responsible, Outcomes

Measures

‘BUILDING 1 WORLD CLASS HEALTH SYSTEM FOR THE GOLD COAST’

HEALTH SERVICE STRATEGIES

- Developing a comprehensive, high performing primary care sector
- Integrating and coordinating care by developing innovative models of care with Gold Coast Health and other partners
- Fostering participatory healthcare
- Developing the primary care workforce

ENABLING STRATEGIES

- Providing leadership and influence (healthcare and broader social determinants of health)
- Establishing efficient, accountable and effective governance and commissioning systems
- Developing digital health and ICT infrastructure
- Providing analytics and health

STRATEGIC FRAMEWORK HEADLINE INDICATORS

- Reduction in potentially preventable hospitalisations
- Self-reported accessibility to timely care
- Self reported patient health, wellbeing and satisfaction
- Enhanced skills and knowledge through evidenced based education and training
- Self-reported workforce job satisfaction
- Health cost per capita
- Data accuracy and integrity
- Adherence to RACGP indicators

Characteristics

Board Chair Report

Dr David Rowlands

As we come to the completion of the second year as trading as Gold Coast Primary Health Network (GCPHN), it is appropriate to reflect on our progress towards achieving our ambitious mission statement of "Building one world class health system for the Gold Coast".

We are certainly still "building", and this will be an ongoing process, which will likely never end, as we continue to refine our efforts. Progress towards the "one" has largely focused on the public sector at this stage, as we forge an even closer working relationship with Gold Coast Health.

We have formed an Integrated Care Alliance (ICA) which is focused on providing seamless care for patients as they move from primary care, into the hospital sector, and return back to the primary care sector. The methodology for this process will be the development of Models of Care (MoC) for common conditions which GPs require specialist input to manage, be that advice or a procedure.

There seems to be an overabundance of guidelines available, which while being useful, are cumbersome to use in the time available during a GP consultation. Where our models of care will differ from consolidated guidelines, is that they will concisely (hopefully) define what is appropriate management in primary care, when it is appropriate for specialist referral and what information is required, what will happen during their specialist care, what the transition back into primary care will look like, who should be informed of this transfer, and again what information will be required for their safe return. We will know we have achieved our goal when the patient feels their treatment occurred in one coordinated "system" of care.

The MoC will be based on "world class best practice" and will assist primary care providers to provide their patients with the best possible care. GPs and other primary care providers will be well supported by GCPHN during the implementation of the MoC.

Of course, roughly 40 per cent of our patients are privately insured, and our next challenge will be to take the learnings from our MoC and assess their suitability for improving the patient journey in the private sector.

We are currently engaged in discussions with the Department of Health in relation to contract extension. This is important for us as an organisation, as it enables longer term planning for strategies to address complex problems, helps our partners feel secure that we are an organisation which is here for the long term in the health sector on the Gold Coast, and enables the retention of highly skilled staff.

Our organisation has tremendous staff, and I would like to thank every one of them for coming on this journey with us. Matt Carrodus as CEO has been exceptional during this challenging period of change.

It is an honour and a privilege to Chair the Board of GCPHN. Every one of my fellow directors is exceptional. The last twelve months have seen Stephen Barry retire from our Board, and Alyson Ross leave the Board to join management as our Director of Commissioning Systems. Whilst it has been sad to say goodbye to such exceptional contributors, it has given us the opportunity to welcome Dr Roger Halliwell and Prof Julie-Anne Tarr to our Board.

CEO Report

Matt Carrodus

Following the establishment of the Gold Coast Primary Health Network in 2015, our second year of operation was characterised by a large scale organisational change and development program guided by our Commissioning Maturity Plan.

The Commissioning Maturity Plan outlines a staged approach to the commissioning model which will enable Gold Coast Primary Health Network (GCPHN) to become a world class commissioning organisation over a five year period. The outcomes achieved by the organisation as a whole during this period of intense change is great credit to all the GCPHN staff.

This developmental work included:

- New systems for contract and risk management, performance reporting and business systems intelligence, quality and knowledge management and population health management. Some of these were purchased, whilst others including the practice-based Population Health Management Program, were innovations developed internally to fill a gap in the market for population health data.
- Considerable competency development for staff, using a range of externally sourced experts complemented by on the job learning, and joint learning with other PHNs.

This work was validated through the very successful commissioning of early and post treatment support programs for a range of alcohol and drug addictions, including ice, for the growing northern Gold Coast corridor, services for the Aboriginal and Torres Strait Islander community, and new psychological and suicide prevention services. This resulted from considerable community engagement and service co-design which involved over 500 individuals from over 200 organisations.

Our focus has very strongly remained on supporting general practice to facilitate improvements in our local health system. Some of our successes included:

- Over 80 per cent of practices were engaged in the tiered approach to General Practice support and improvement.
- New work has commenced through a practice based population health project which is undertaking exploratory work in safety and quality initiatives in General Practice, as well as building much greater capability in understanding the practice patient profiles to inform planning.
- Successfully increasing engagement with GPs specifically. A GP clinical lead was identified for all 34 Tier 3 practices (participating in quarterly facilitated improvement meetings). There were over 150 direct GP to GP interactions by our practice support GP. Additionally, 600 GPs now subscribe to the GP Bulletin.

In accordance with our vision to “Build One World Class Health System”, we continue to engage with a broad range of services, both public and private to improve the coordination of care for our community, particularly for those most at risk of poor health outcomes. Examples of this work is contained within this Annual Report.

We are very grateful to community members, service users and their families and carers, and service providers, for their generous input into our organisation’s planning and program development. This contribution is essential to ensure we understand the needs of our community and can comprehensively plan services to meet these.

Snapshot of our success

(July 2016 – June 2017)

- **GCPHN launched early and post treatment support services for the growing northern Gold Coast corridor and services for the Aboriginal and Torres Strait Islander community,** providing treatment programs for a range of alcohol and drug addictions including ice.

- With Bond and Griffith universities, **GCPHN facilitated 240 final year medical student placements and 248 introductory medical student placements.** This is equivalent to more than 3000 placement days in General Practice for medical students providing a unique opportunity for one-on-one learning not available in other placements.

- **154 Gold Coast general practices are registered for My Health Record, which exceeds the GCPHN annual target.** 112, 400 Gold Coast consumers now have a My Health Record.

- **Appointment of four GPs with a special interest to treat patients waiting for specialist appointments, has resulted in reduced waiting times**. From September 2016 to June 2017, 1938 patients have seen a clinician in the areas of hematology, ear, nose and throat, paediatrics and gynaecology.

- **Childhood immunisation rates continue to meet targets** with rates in October – December 2016 for the 24 month and 60 month age groups being the highest recorded to date within the Gold Coast region.

- **The number of practices registered as Closing the Gap providers continues to increase**, and is at an all-time high at 117.

- A review of patients enrolled in the GCPHN Persistent Pain Program showed improvement for participants in performing every day activities and better self-management and a **78 per cent reduction in hospitalisations.**

- This is the first year that GCPHN has been assessed against the new ISO 9001:2015 Quality Management Systems Standard, with the auditor finding that **accreditation was achieved**, GCPHN had an obvious commitment to providing a quality service to the community, no corrections were identified and complementary feedback was provided on developmental work that had been completed or was underway.

- **GCPHN facilitated 71 education and training events** covering a range of topics including immunisation, cancer screening awareness, women's health, My Health Record, practice data extraction tool and wound management.

- There has been an i**ncrease of almost 1000 people having a breast screen in the last 12 months**, and a 20 per cent increase in the number of Chinese (Cantonese or Mandarin) speaking clients, following a targeted awareness campaign of which GCPHN has been involved.

- By the end of June 2017, a total of **988 clients have been supported in their recovery from mental illness**, through the Gold Coast Partners in Recovery Program.

- As a result of the GCPHN advanced planning project in residential aged care facilities, there was a **significant increase in the completion of Advance Care Planning documentation.** Fifty new Advance Care Plans were completed which is about 30 per cent of the total resident population, instead of the usual six per cent.

- A total of **133 general practices**, the largest number ever, are now participating in the tiered approach to practice support.

- **100 per cent of the recommendations made by the GCPHN Community Advisory Council to the GCPHN Board have been accepted.**

Governance

GCPHN Advisory Groups

To assist the Board in its decision making, to ensure local services are targeted, appropriate, relevant and meet the needs of both health providers and health consumers, GCPHN coordinates a Clinical Council and Community Advisory Council which provide consumer and clinical advice and expertise.

Clinical Council

The GCPHN Clinical Council meets quarterly and is comprised of members including GPs, allied health professionals, non-government organisations, hospital, Indigenous and consumer representatives.

Terms of Reference were updated during the year and the Clinical Council will expand membership to include pharmacy, psychology and psychiatry from October 2017.

The key advice sought from the Council during the year has included review of the GCPHN needs assessment and strategic plan, mental health planning and procurement strategies, advice on introducing Queensland Government clinical prioritisation criteria to improve GP referrals and considering best service delivery in health across the Gold Coast.

"The Clinical Council acts as a think tank of experienced clinical leaders and community representatives to drive Gold Coast Primary Health Network's strategy and implementation to achieve practical improved outcomes in health care across the Gold Coast. By having the diverse range of health care professionals around the table, the Clinical Council can help ensure strategies that are rolled out by GCPHN are relevant to the Gold Coast region."

Dr Lisa Beecham. Chair, GCPHN Clinical Council

Community Advisory Council

Established in 2014, the Gold Coast Primary Health Network (GCPHN) Community Advisory Council (CAC) continues to grow in maturity and momentum, providing vital input from a community perspective. Advice provided to the Board by the CAC is viewed as influential and ensures decisions, investments and innovations are appropriately person-centred, cost effective, locally relevant and aligned to local care experiences and expectations.

Membership of the CAC is carefully balanced to include people with various demographic characteristics from a geographic range and diverse experience of primary health services to ensure the CAC adequately reflects the broader Gold Coast community.

"The group is now providing really clear, concise recommendations to the Board. An example of that was regarding strategies to transition Partners in Recovery to NDIS. So the way that the information is coming back is actually that it's really robust. I think it's a lot more robust than it was 18 months ago and the diversity of the feedback is also there. I think there's been 100 per cent acceptance rate of recommendations." Kieran Chilcott, GCPHN Board Member

In 2016 -2017 the CAC were proud of their contribution to GCPHN and have shared the consumer point of view on a range of issues. These included; Advanced Care Planning, My Health Record, the transition of Partners in Recovery to the National Disability Insurance Scheme, promotion of the Australian Charter of Healthcare Rights, ongoing input to the needs assessment, patient experience and the strategic plan. The CAC have also worked collaboratively with consumers from the Gold Coast Health consumer group to collectively provide insights into improvements between acute and primary care services, to better patient outcomes.

Members have reported the CAC are operating as a strong and cohesive group and feel their voice is heard. The GCPHN model has been shared at numerous conferences and through an article published in the Australian Journal of Primary Health. There is increasing interest in this model from other Primary Health Networks and state health and hospital services.

"There's a passion for improving the health system for the Gold Coast, as we are grandparents and parents, and want our families to be able to access a world class health system." GCPHN Community Council Member

"You can be a voice for others."

GCPHN Community Council Member

Governance

Gold Coast Primary Health Network (GCPHN) is governed by a diverse board with significant experience in primary healthcare and community sectors, with broad ranging skills

GCPHN Board

BOARD CHAIR: Dr David Rowlands

MB, BS (Qld), GAICD

General Practitioner

Career Highlights

- General Practitioner on the Gold Coast since 1989
- Senior House Officer in Accident and Emergency (UK)
- Medical Officer Royal Australian Army Medical Corps

Significant Achievements

- Current Chairman, Primary Care Gold Coast
- Past President, General Practice Gold Coast
- Previous Treasurer, General Practice Gold Coast
- Previous Secretary, General Practice Gold Coast

*DIRECTOR: Dr Stephen Barry

MB, BS (Qld), FRACGP, Dip RANZCOG

General Practitioner

Career Highlights

- GP at Eastbrooke Family Practice (Burleigh Waters)
- Palm Beach Family Practice 1987 – 2015

Significant Achievements

- Founding Board Member and former Chair, General Practice Gold Coast
- Assist. Professor Bond University
- Senior Lecturer Griffith University
- Member Queensland Clinical Senate
- Member Statewide Cardiac Clinical Network

DIRECTOR: Dr Sue Gardiner

MBBS, DFFP, MRCGP, FRACGP

General Practitioner

Career Highlights

- GP, Runaway Bay Doctors Surgery since 1999
- Roles at Bond and Griffith universities
- GP at Ashmore Family Practice
- Medical registrar in charge of the Coronary Care Unit for two years in the UK

Significant Achievements

- Treasurer/Board member, General Practice Gold Coast 2003 - 2011
- Ministerial appointment to Gold Coast HCC
- Chair, GP Council
- Member, Primary Care Partnership Council

DIRECTOR: Deb Blow

RN, BN, Grad Dip Crit Care, Grad Dip FET, Cert IV TAE MACN

Director of Faculty Community Services, Health and Nursing Executive Leader Health and Nursing

Career Highlights

- Director of Faculty, TAFE Queensland Gold Coast
- Australian Nursing and Midwifery Accreditation Council Academic Assessor
- Registered Nurse, Critical Care
- Nursing experience in rural and remote, operating theatre, intensive care, emergency and aged care

Significant Achievements

Public Sector Award recipient for the following:

- Educational Leader Queensland
- Outstanding Contribution to Innovation
- Outstanding Contribution for Networking and Industry Linkage
- Outstanding Achievement in Partnering
- Australia Day Achievement Award
- Special Commendation for Innovation and Technology
- Outstanding Achievement in Partnering
- Australia Day Achievement Award

*DIRECTOR: Dr Alyson Ross

B.A, Dip Bus (HARM) Doc Ed

Business Improvement and Executive Manager (Safety Education and Promotion), Civil Aviation Authority

Career Highlights

- Director/Executive Manager, Standards and Quality, Health Quality and Complaints Commission
- Senior Program Manager, Gold Coast City Council
- Director Gt Yarmouth and Waveney PCT

Significant Achievements

- Led the full review of the Civil Aviation Safety Authority's Aviation medicine capability.
- Led the full review of Health Quality and Complaints Commission's regulated standards and Organisational Realignment Program.
- Led a multi-award winning complex strategic Program to develop 30 year social, economic and environmental vision for the Gold Coast which looked at all aspects of planning the strategic direction and development of the city.
- Established the General Practice Commissioning Partnership for Waveney Primary Care Trust.
- Led the development of clinical governance and care pathways including CVD, COPD and cancers.

DIRECTOR: Rick Dennis

B. Comm – UQ, LLB, ACA, Harvard Business School

Non-Executive Director

Career Highlights

- Ernst and Young: Former Qld Managing Partner and Asia-Pacific CFO
- Advisory Board Member: Australian Super, EWM Group
- Non-executive director of Springfield Land Corporation Pty Ltd, Vesta Living Communities Ltd, Apiam Animal Health Ltd, Motorcycle Holdings Ltd, Omni Market Tide Ltd

Significant Achievements

- Chaired the Queensland Advisory Board of the Juvenile Diabetes Research Foundation
- Current chair of the SQUAD Foundation (est 2016 to raise awareness of youth suicide)
- 35 years with Ernst and Young
- Queensland Managing Partner – Asia Pacific CFO
- Established Ernst and Young Australia's China Business Group

DIRECTOR: Kieran Chilcott

B. Edu, D. Management, Cert IV Training, Business, Project Management and Mental Health

Executive Officer

Career Highlights

- Inaugural Chairperson of the Institute for Urban Indigenous Health
- Experienced Board member of multiple Gold Coast organisations
- Current Executive Officer of Kalwun Health Service

Significant Achievements

- Member, Primary Care Partnership Council
- 2015 ATSI Student of the Year winner, Queensland Training Awards

*DIRECTOR: Dr Roger Halliwell

MBChB, BHB, MBA, FRACGP, Dip A&E Med and GAICD

General Practitioner

Career Highlights

- General Practitioner on the Gold Coast since 1996
- Senior Educator at General Practice Training Queensland

Significant Achievements

- Immediate Past President/Chair, General Practice Gold Coast
- Director, CheckUP Australia
  Dr Roger Halliwell

*DIRECTOR: Professor Julie-Anne Tarr

PhD (UQ), LLM (Monash), JD (Cornell), BA (Wis) and GAICD

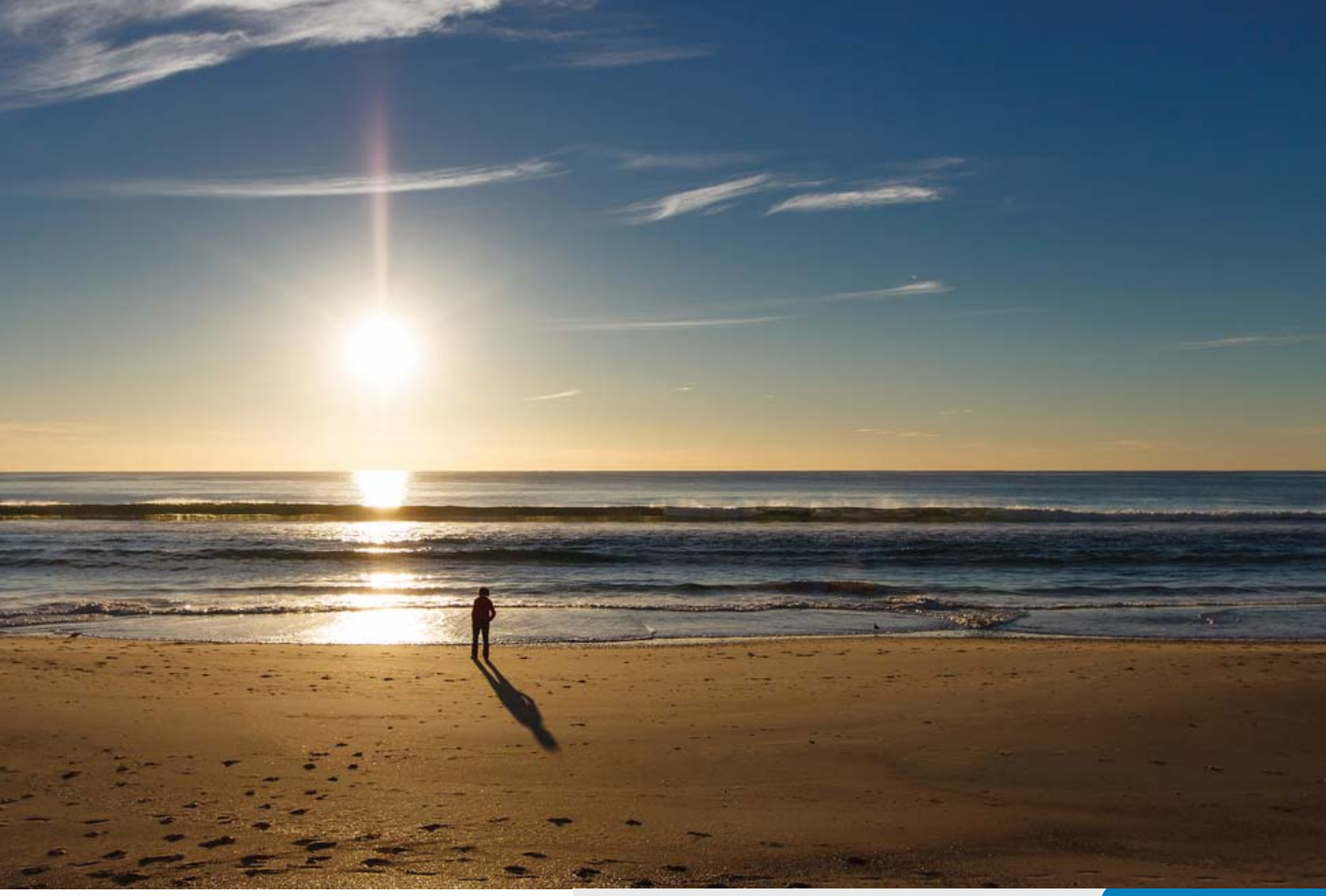
Career Highlights

- QUT Business School Professor (Contracts, insurance and risk, complex projects and governance)
- Queensland Institute of Medical Research - GM / COO
- Indiana University, Head, International Programs Office; Professor, Law and Business.

Significant Achievements

- Board Memberships: HHS (Sunshine Coast), QPharm, QGen, HREC and Red Cross
- Author: 5 books and treaties, 50+ Articles, law reform reports
- Project oversight: University of the South Pacific (Tech Park); QIMR ($187m extension)
- Numerous awards for excellence in teaching, research and contribution to higher education.
- Foundation staff - Bond University (Director, Asia Pacific Law Institute)

*Dr Stephen Barry retired from the Board in November 2016. *Dr Roger Halliwell joined the Board in November 2016
*Professor Julie-Anne Tarr joined the Board in May 2017 * Alyson Ross resigned from the Board in November 2016

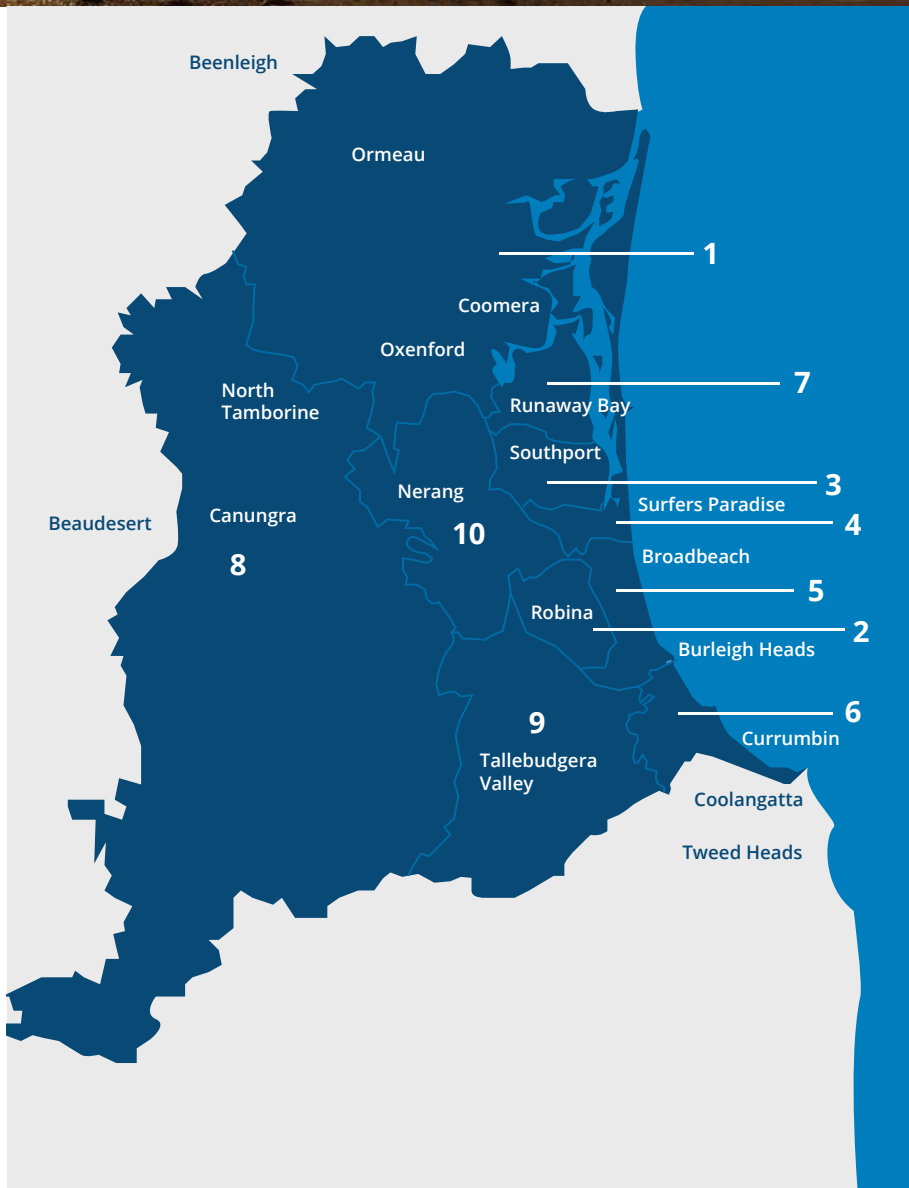


Our Community

The Gold Coast Primary Health Network (GCPHN) is aligned to Gold Coast Health boundaries and is composed of the whole Gold Coast City Council local government area and a small part of the neighbouring Scenic Rim Regional Council (Tamborine - Canungra).

Gold Coast Primary Health Network Region

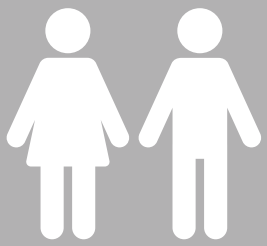
1	Ormeau/ Oxenford	6	Coolangatta
2	Robina	7	Gold Coast North
3	Southport	8	Gold Coast Hinterland
4	Surfers Paradise	9	Mudgeeraba/ Tallebudgera
5	Broadbeach/ Burleigh	10	Nerang



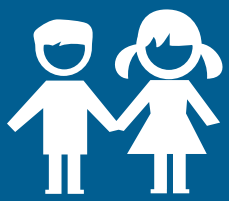
591,570 People

Estimated resident population June 30 2016

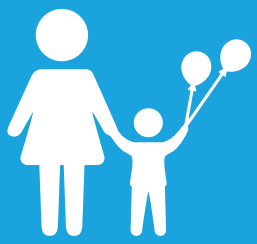
882,584 Estimated population by 2036



310,763
Adults 25-64
Largest populations in
Ormeau-Oxenford and Nerang



77,709
Youth 15-24
Largest populations in
Ormeau-Oxenford and Southport



108,567
Children 0-14
Largest populations in
Ormeau-Oxenford and Nerang

94,531
65+
Largest populations in
Gold Coast North and
Ormeau-Oxenford

9,501
Aboriginal and Torres Strait Islander people
Largest populations in
Ormeau-Oxenford and Nerang

67,858
People were born in countries with a non-English speaking background
Most common non-English languages spoken at home
were Chinese, Japanese, Indo Aryan, Southeast Asian Austronesian and Korean

- **Median age 38.3 years.**
  Gold Coast Hinterland highest median age 44.8, Southport lowest median age 37.1
- Births 6,936 (2015)
- Deaths 3,558 (2015)
- SEIFA 11.5per cent in the most disadvantaged and 13.7 per cent in the least disadvantaged. Southport had 28.4per cent in the most disadvantaged quintile, Mudgeeraba - Tallebudgera had 30 per cent in the least disadvantaged quintile (2011)*
- 4 out of 5 adults have at least one modifiable risk factor for chronic disease (2014-15)
- **60.1per cent are physically inactive.**
  65.8 per cent in Gold Coast Hinterland, 53.3 per cent in Surfers Paradise (2014-15)
- **28.4per cent of adults are obese.**
  34per cent in Gold Coast Hinterland, 24.6 per cent in Surfers Paradise (2014-15)
- **17.8per cent are smokers.**
  19.4 per cent in Coolangatta, 14.8 per cent in Gold Coast Hinterland (2014-15)
- **18.2per cent have harmful alcohol intake.**
  22.2 per cent Gold Coast Hinterland, 15.7 per cent Gold Coast North (2014-15)

Note: All sub regions referenced relate to a Statistical Area Level 3.
Source: Queensland Government Statistician's Office, Queensland Treasury, Queensland Regional Profiles: Resident Profile for Gold Coast Statistical Area Level 4

Socio-Economic Indexes for Areas (SEIFA) is a summary measure of the social and economic conditions of geographic areas across Australia. The index focuses on low-income earners, relatively lower education attainment, high unemployment and dwellings without motor vehicles.

Aged Care

Advance Care Planning in Coordinated Care

Gold Coast Primary Health Network (GCPHN) commissioned the services of nurses within two residential aged care facilities (RACFs), as part of a pilot project to promote advance care planning and help aged care residents have more involvement in their future care.

Previous research initially raised concerns that only six per cent of residents in aged care facilities had a recognised Advanced Health Directive. These directives enable residents to outline their medical treatment if they can no longer make decisions, enables the appointment of an attorney for health and personal matters and includes information that health professionals should know, including health conditions, allergies, and religious, spiritual or cultural beliefs that could affect their care and their place of death.

KEY RESULTS

- There was a significant increase in the completion of Advance Care Planning documentation and 50 new Advance Care Plans were completed (about 30 per cent of the total resident population).
- Residents who completed an Advance Care Plan had their wishes followed at End of Life, and were able to stay at the residential aged care facility rather than being transferred to the palliative care at the hospital.
- Some residents engaged their children and grandchildren to have the advanced care planning conversation and implement their own plan for future needs.
- Building the capacity and skills of the advanced care planning facilitator and transferring best practice to the RACF team for ongoing discussions and work practices with advance care planning.
- Influencing the sector to adapt and embed an innovative method of delivery for advance care planning for the resident and family.
- Working collaboratively with Gold Coast Health to develop and plan future services in advance care planning.
- Education plan for documents implementation into two RACFs and GP practices for advanced care planning.

A RESIDENT STORY AT THE END OF LIFE

Through the advanced care planning project, an elderly aged care resident completed an Advanced Care Plan, Statement of Choices, with her family. Discussions about end of life care gave the family an opportunity to discuss death, dying and burial, as they knew very little about this. When the resident's health worsened, it gave the family peace of mind that everything was in place to have the appropriate care in her final stages of life. Her end of life plan was supported by the aged care staff who could ensure her wishes were carried out. The resident was pain free and comfortable as she deteriorated, and passed away peacefully, her family by her side.

Aged Care

Better Health Care Connections

Aged Care Multidisciplinary Care Coordination and Advisory Services Program

KEY RESULTS

- Telehealth services were expanded into RACFs utilising digital technology with many benefits.
- The GPs telehealth and face-to-face consultations enabled the RACF staff to care for the resident in the home instead of transferring them to hospital.
- GPs could choose to use telehealth whilst RACFs are in lockdown due to an outbreak of a contagious disease.
- Telehealth is time efficient and allowed for visualisation of wounds and abrasions.
- Better follow up with GPs for residents post-acute medical conditions.
- Better linkages between the resident and individual service pathways.
- Assisted with consumer engagement and understanding of a person's individual health care needs.
- Reduced duplication of effort by health and aged care providers through enhanced co-ordination.

Other benefits included:

- Relationships strengthened with a diverse range of stakeholders within the Gold Coast region regarding access to a multidisciplinary team for residents in the RACF setting.
- Standardised communication tools and resources to be progressed.
- Developed flexible training methodologies to maximise the desired outcome of transition to practice with key stakeholders including Queensland Ambulance Service, Gold Coast Health, RACFs and Medical Deputising Service.

What we have achieved

GCPHN continues to enhance and coordinate multi-disciplinary care for residents in Residential Aged Care Facilities (RACFs), ensuring their complex needs are meet, improving their health and wellbeing and reducing the need to be transferred to hospital. Part of this Program includes consultations to aged care recipients by video consultation.

Partners

- Bolton Clarke Galleon Gardens
- Opal Leamington Aged Care
- BlueCare (Labrador Gardens and Woodlands)
- Hillview House Aged Care Facility
- Villa Serena
- DePaul Villa Aged Care
- Gold Coast Health
- Office of Advance Care Planning, Metro South
- Gold Coast Justice of the Peace services
- Alzheimer's Australia
- Palliative Care Qld
- Carers Qld
- Public Guardian
- Public Trustee
- The Qld Tissue Bank
- Organ Donation Unit
- GPs
- Queensland Ambulance Service (QAS)

Alcohol and Other Drug Services

Commission treatment services to address unmet demand on the Gold Coast, and unmet demand in the Indigenous community.

What we have achieved

- Gold Coast Primary Health Network (GCPHN) launched early and post treatment support services for the growing northern Gold Coast corridor and services for the Aboriginal and Torres Strat Islander community in January 2017. These services provide treatment programs for a range of alcohol and drug addictions including ice and were developed in response to local demand.
- This was part of the Commonwealth Government's investment under the National Ice Strategy, for $3.56 million over three years, to commission treatment services informed by local needs and priorities.
- The development of these services was underpinned by one of the most comprehensive needs analysis ever completed on the Gold Coast in relation to mental health and alcohol and other drug services. GCPHN consulted with a large range of stakeholders including community members, GPs, allied health professionals, service providers, psychologists, psychiatrists, service users, their families and carers.
- GCPHN worked closely with two Indigenous organisations to develop an integrated mental health, suicide prevention and alcohol and other drugs model appropriate for the local Indigenous community, and sought advice regarding current needs and possible service responses from Karulbo, an advisory group who works with the community and local service providers to improve health equality and outcomes.

Partners

- Lives Lived Well
- QuIHN
- Krurungal Aboriginal and Torres Strait Islander Corporation
- Kalwun Development Corporation
- Heads Up Consortia
- Regional Integrated Mental Health and Alcohol and Other Drugs Advisory Group
- GCPHN Multidisciplinary Clinical Advisory Group for Mental Health and AOD
- Gold Coast Health
- AOD community service providers
- Community members and service users

KEY RESULTS

- In the six months the services have been operating there has been high demand, with 241 people accessing treatment or support programs.
- To ensure input was received from all stakeholders, more than 500 individuals and 200 organisations were consulted as part of a collaborative approach for the needs analysis and co-design process.
- An AOD working group provided guidance and expert advice during this process with representation including AOD community service providers, Gold Coast Health, QNADA (Qld Network of Alcohol and other Drug Agencies), consumers, Queensland Police, Queensland Pharmacy Guild, private AOD treatment providers and an Aboriginal and Torres Strait Islander community organisation.
- GCPHN also established collaborations through formal meetings with the Heads Up Consortia, Regional Integrated Mental Health and Alcohol and Other Drugs Advisory Group, and the GCPHN Multidisciplinary Clinical Advisory Group for Mental Health and AOD.
- GCPHN worked closely with two Indigenous organisations to develop an integrated mental health, suicide prevention and alcohol and other drugs model appropriate for the local Indigenous community, and sought advice and needs and service responses from Karulbo, an advisory group who works with the community and local services providers to improve health equality and outcomes.
- To raise awareness about drug and alcohol treatment options on the Gold Coast, GCPHN hosted a workshop for 50 GPs and practice nurses, to discuss how best to work with individuals who present with substance misuse including early identification techniques, treatment, and the latest methamphetamine research. Every attendee rated that their learning needs were partly or fully met.

"I had an alcohol problem, I just lost my kids, drinking and smoking weed so I came here and asked for help. So far now I have done many courses and going to court next week so hopefully I will get my children on the weekends."

Indigenous service user

Cancer Screening

What we have achieved

Gold Coast Primary Health Network's(GCPHN) Cancer Screening Project aims to meet and exceed the national screening rate targets for breast, bowel and cervical cancer within the Gold Coast Region.

This is being achieved through a range of initiatives including General Practice engagement, public awareness campaigns, providing evidence based management solutions for patients post screening and advocating for delivery of electronic reporting by Breastscreen and National Bowel Screening.

To meet these goals, GCPHN has been:

- Developing a work plan to include a review of General Practice data recording/process and identify future screening options.
- Identifying, promoting and aligning screening with Gold Coast Health and national priorities and campaigns.
- Identifying general practices with an interest in screening to develop strategies to better embed a screening infrastructure in the practice setting.
- Collaborating with the Gold Coast Public Health Unit, private health insurers, national screening providers and General Practice to obtain data and information for the purpose of increasing screening rates.
- Developing and implementing an education strategy that creates a greater awareness of bowel, breast and cervical cancer and promotes screening.
- Updating and reviewing resources on the relevant Gold Coast Primary Health Network HealthyGC web pages, linking to national sources and advocating in collaboration with partners, to improve data compatibility with General Practice.

"Better understanding of the process of NBCSP and referral. Key information regarding breast cancer screening that we can impart to patients and other women."

Practice nurse, attending the nurse forum about breast and bowel screening

Partners

- Bowel Cancer Screening Queensland
- BreastScreen Queensland
- General practices
- Gold Coast Health

There has been an increase of almost 1000 people having a breast screen in the last 12 months, and a 20 per cent increase in the number of Chinese (Cantonese or Mandarin) speaking clients, following a targeted awareness campaign.

KEY RESULTS

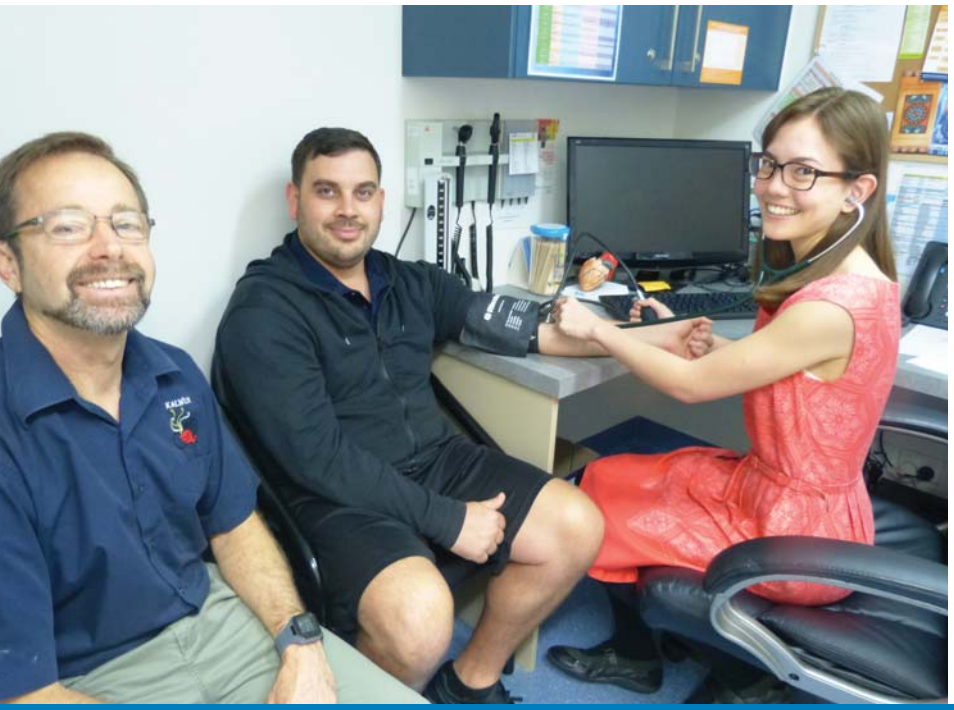
- Distribution of cancer screening information and resources to healthcare professionals, general practices and community via GCPHN monthly and weekly publications, emails to practice managers and practice nurses and GCPHN social media with a potential audience reach of 5000.
- This has helped contribute to an increase in breast screening with BreastScreen Gold Coast advising that in 2016-17 there were 32,425 women screened, an increase of 966 from 2015-16. Additionally there was a 20 per cent increase in the number of Chinese (Cantonese or Mandarin) speaking clients attending, following a promotional campaign of which GCPHN participated. This resulted in an additional 81 women screened during 2016-17.
- Ongoing consultation with BreastScreen Queensland, Bowel Screen Queensland and Queensland Health to further progress cancer screening awareness in General Practice.
- A successful bowel and breast screening forum for practice nurses to raise awareness about the importance of cancer screening and the role of General Practice which could assist their patients. Evaluations established that 92.9 per cent of the 42 nurses who attended, said their learning needs were fully met.
- General practice receptionists attended a GCPHN cancer screening forum to raise awareness about the importance of cancer screening and the role of General Practice. Of the 56 receptionists who attended, 93.5 per cent said they had an increased understanding of cancer screening programs.
- Documentation and resources distributed to General Practice to encourage the utilisation of their practice data extraction tool to identify eligible patients never screened or for those at risk. At the end of June, 133 general practices had a data level agreement with GCPHN, for the submission of monthly data.
- To improve the timeliness of communication, GCPHN liaised with Queensland Health and collaborated with four general practices to advance the testing of the electronic transfer of screening results from BreastScreen Queensland to GPs which will be implemented from September 2017.
- Ongoing information and advice to General Practice, health professionals and the public about the delay, changes and new date of the commencement of the new national cervical screening program (1 December 2017), conveyed through publications, direct engagement and the GPCHN HealthyGC website.

Clinical Placements

What we have achieved

Gold Coast Primary Health Network is instrumental in helping to shape the future of the medical workforce, through partnering with Griffith and Bond universities to place medical and nursing students in general practices in the local region, to help train the next generation of GPs and practice nurses.

The program is so successful, that both the Gold Coast universities have above the national average for graduates moving into General Practice.



"I love having students. I had a positive experience way back when I was studying and I reached an important part of my learning, and if you make that personal connection, it can last for life."

Dr Jeremy Inglis, Kalwun
GP Trainer

"I really loved my time here - great to spend time with GPs and to get their perspective. I hadn't any experience in Indigenous health so this has been a real eye opener for me. I would like to be a GP because they have a connection with their patients, and hospitals can be impersonal, and don't get the continuity of care, or see patients improving in time."

Yasuchiyo Hamilton,
Griffith University Final Year Medical Student

KEY RESULTS

MEDICAL PLACEMENTS

- With Bond and Griffith universities, GCPHN facilitated 240 final year medical student placements and 248 introductory medical student placements.
- This is equivalent to over 3000 placement days in General Practice for medical students which gives students a unique opportunity for one-on-one learning not available in other placements. Also, over a three-year period, when comparing to a previous three-year period, placement days in General Practice has increased from around 8000 to more than 12000.
- Medical students were placed with approximately 90 practices and over 160 different GPs.
- 121 optional specialist placements were organised for medical students across three specialties (dermatology, ophthalmology, musculoskeletal).
- Bond and Griffith universities have reported that they have above the national average for graduates moving into General Practice, both over 30 per cent. This demonstrates the quality of the program and suggests a student's experience on placement has a major influence on career direction.
- Medical student feedback received from students for 2016 was overwhelmingly positive with 94 per cent feeling their clinical supervisors were helpful and instructive. This is reflection on the GPs and practices who clinically supervise these students.
- In collaboration with Bond and Griffith universities, three GP Trainer Workshops were organised to support and educate GP trainers, with two of these also supported by General Practice Training Queensland who provided its expertise. Forty-four GP trainers attended.

NURSE PLACEMENTS

- Placed 124, Year 2 and Year 3 student nurses from Griffith University with registered nurses in General Practice, which is an increase of 22 per cent on last year.
- Nursing students were placed across 31 practices and 53 nursing preceptors.
- Organised two nurse preceptor workshops to support and educate nurse trainers, in partnership with Griffith University, with 22 attendees for the two events.
- Over 75 per cent of nursing students surveyed after their two-week placement, would consider a career in General Practice upon graduating.

Digital Health

My Health Record

Gold Coast Primary Health Network (GCPHN) has played a key role in promoting digital health initiatives to general practices and the Gold Coast community. This has included:

- Encouraging practices to utilise My Health Record to improve access to information across the care continuum.
- Supporting General Practice to increase the number of Shared Health Summary uploads to meet their Practice Incentive Program eHealth quarterly targets.
- Supporting General Practice to provide consumer registrations for the My Health Record.
- Providing My Health Record education for practice and consumer facing staff.

Health Provider Portal – (The Viewer)

In collaboration with Queensland Health and aligning with their initiative of Better connecting Queensland's GPs and public hospitals initiative, GCPHN commenced the implementation of GP registration for the Health Provider Portal in December 2016. The purpose of this was to provide GPs with read-only online access allowing them to view public hospital information including appointment records, radiology and laboratory results, treatment and discharge summaries, and demographic and medication details. The aim of providing this access is to bridge the information gap between Queensland's GPs and public hospitals and help ensure patients receive consistent, timely and better coordinated care.

Partners

- Gold Coast Health
- Queensland Health

KEY RESULTS

MY HEALTH RECORD

- 154 Gold Coast general practices registered for digital health which exceeds the GCPHN annual target.
- 112, 400 Gold Coast consumers now have a My Health Record.
- Collaboration with the Digital Health Agency to successfully deliver a Digital Health Forum, attracting one of the largest audiences of this nature, by a Primary Health Network.
- Provide practice support staff with ongoing information and resources (Train-the-Trainer), to enable them to support General Practice.
- Provided face-to-face My Health Record education for GPs, practice nurses and practice staff.
- Collaboration with other GCPHN Programs (Aged Care/Mental Health) to embed Digital Health across all GCPHN Programs. The benefits of the My Health Record was supported within the GCPHN Aged Care Program, with consumers encouraged to upload their Advance Care Plan to their My Health Record.
- Extensive promotion of new information and resources distributed to primary health professionals and staff through our GCPHN publications and our dedicated practice manager and nurse email list serve, reaching a potential audience of more than 5000.
- Collaboration with Gold Coast Health services to internally promote the viewing of Shared Health Summaries and to increase uploads of discharge summaries to the My Health Record.
- Collaboration with Queensland Health for the implementation of the Health Provider Portal, allowing Queensland GPs access to read-only their public hospital patient records.
- The development of an informative Digital Health web page with links to resources and training for GPs nurses, practice staff, allied health, pharmacy and consumers.
- Promotion of My Health Record to other stakeholders and consumers at key Gold Coast Events including Naidoc Week, Homeless Connect, mental health and immunisation forums.
- Participated in National PHN monthly teleconferences.

THE VIEWER

Following the commencement of implementation, GCPHN undertook an intense promotional campaign to ensure as many GPs as possible registered for the HPP (Viewer) by the 'go live' date of June 28. This involved distributing information packs, brochures and posters to General Practice, along with information and news stories in our weekly and monthly publications. GCPHN has also a dedicated information section for GPs on the Healthygc website.

General Practice Liaison Unit

What we have achieved

The General Practice Liaison Unit (GPLU) has grown to a team of six, with additional investment from Queensland Health to specifically support initiatives to reduce specialist outpatient wait lists.

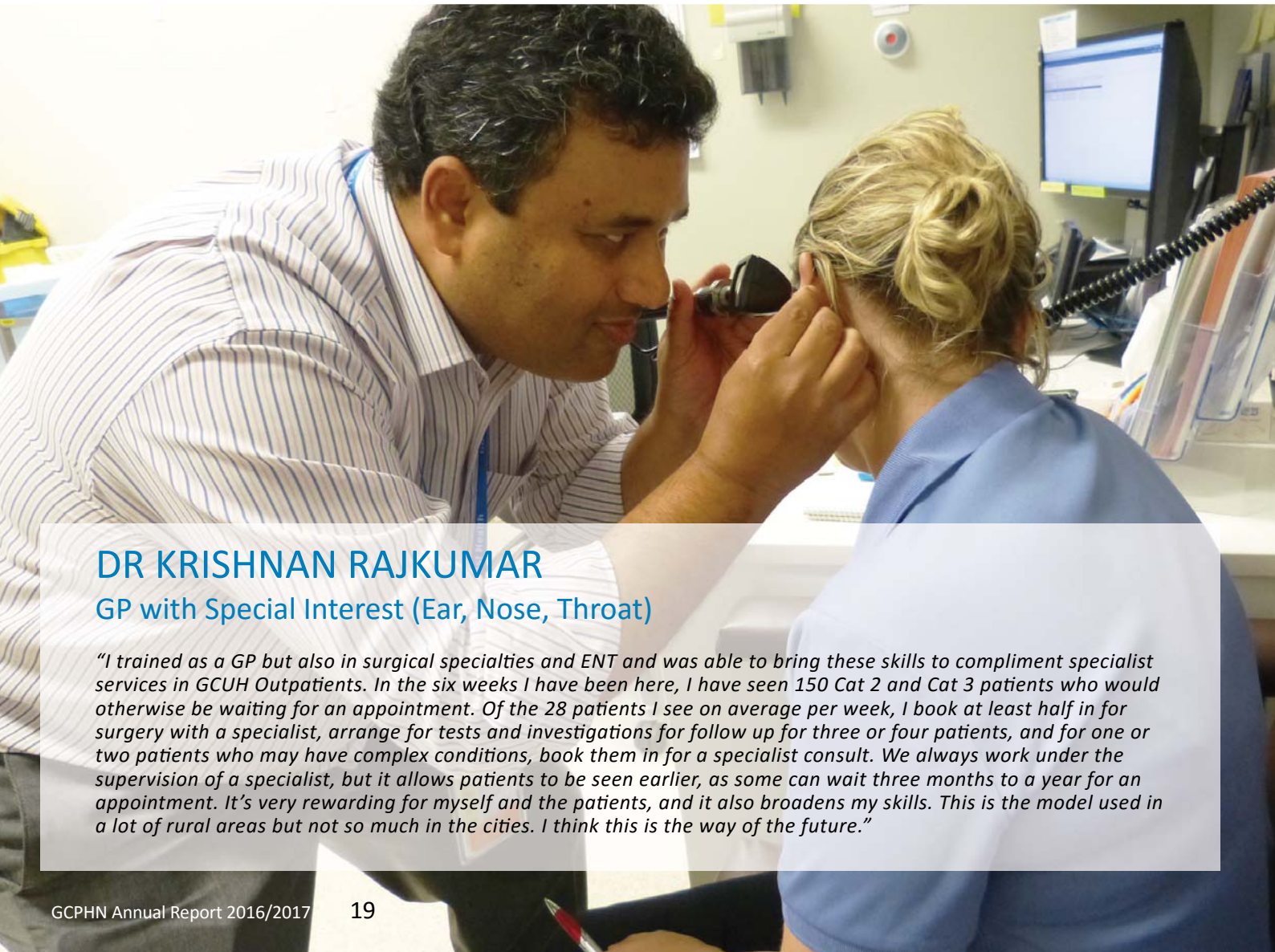
This has enabled the achievement of significant milestones in the last year, through strengthening communication and collaboration between Gold Coast Health (GCH), Gold Coast Primary Health Network (GCPHN) and General Practice to improve patient care through innovation and healthcare integration between primary and acute services. This has been achieved through a range of innovative approaches including implementing outpatient strategies to reduce patient wait times, improving the quality of referrals through new templates, improving discharge summaries, GP communication and education. Underpinning the unit's success is strategic planning initiatives, including the development and endorsement of the GPLU Operational Plan 2017/18 to guide activities for the next 12 months.

"By linking better with our clinical partners in primary care we hope to improve outpatient access in Gold Coast Health so that we can see the patients that need specialist review within the appropriate time frames."

Dr Jeremy Wellwood, Clinical Director
Cancer, Access and Support Services.

Partners

- Gold Coast Primary Health Network (joint funder)
- Gold Coast Health (joint funder)
- Bond and Griffith universities
- General practices



DR KRISHNAN RAJKUMAR

GP with Special Interest (Ear, Nose, Throat)

"I trained as a GP but also in surgical specialties and ENT and was able to bring these skills to compliment specialist services in GCUH Outpatients. In the six weeks I have been here, I have seen 150 Cat 2 and Cat 3 patients who would otherwise be waiting for an appointment. Of the 28 patients I see on average per week, I book at least half in for surgery with a specialist, arrange for tests and investigations for follow up for three or four patients, and for one or two patients who may have complex conditions, book them in for a specialist consult. We always work under the supervision of a specialist, but it allows patients to be seen earlier, as some can wait three months to a year for an appointment. It's very rewarding for myself and the patients, and it also broadens my skills. This is the model used in a lot of rural areas but not so much in the cities. I think this is the way of the future."

General Practice Liaison Unit

KEY RESULTS

To enhance patient journeys by coordinating and improving the communication between primary and secondary care clinicians and settings.

- Joint GCPHN/GCH communication plan implemented to ensure effective and timely communication between General Practice and Gold Coast Health, ongoing GPLU representation, consultation and support at 25 ongoing committees, attendance at 360 planned or informal meetings and 75 presentations.

To increase the efficiency and effectiveness of health services.

- Appointment of four GPs with a special interest, to treat patients waiting for specialist appointments, which has resulted in reduced waiting times. From September 2016 to June 2017, 1938 patients have seen a clinician. These specialty areas include hepatology, ear, nose and throat, paediatrics and gynaecology.

To engage and support clinicians and staff to implement improvement initiatives or adapt existing models of care.

- Facilitated development of standardised letter templates to return incomplete referrals to GPs to ensure the right information is provided to specialists in order to triage patients appropriately and have patients seen within clinically recommended time-frames.
- Development and implementation of internal referral redirect process for GCH that incorporates the flexibility to direct internal referrals to the most appropriate service and clinicians, including GPs, in relation to patients' care urgency and requirements.
- Implementation and completion of strategies to help reduce 'long waits' and to enhance the efficacy of future outpatient specialist services including consultation and support regarding 28 models of care.

GPLU conducted preliminary research into barriers specialists face in accessing medical imaging during clinic consultations and the potential negative impacts this has to clinic efficiency, review appointments and use of clinical resources. This included the Quality Improvement Pilot finalised with one clinic in Orthopaedics, with feedback provided to GCH Medical Imaging Informatics Solution Project.

To improve the quality of referrals to the Specialist Outpatient Services and embed the Queensland Clinical Prioritisation Criteria (CPC).

- Launch and implementation of 165 new electronic referral templates for use by Gold Coast GPs. Ninety-nine of these incorporate state-wide CPC criteria across 12 CPC and 12 non CPC specialties. Adoption of these templates by GPs has been significant, with templates viewed almost 1000 times in the first two weeks it was uploaded. Refinement of these referral templates to make further improvements has now commenced, following feedback from General Practice and GCH specialists.

To support clinical handover from secondary to primary care by improving the timeliness and quality of patient discharge and specialist outpatient clinic correspondence.

- Ongoing GPLU representation, consultation and support at the monthly GCH Enterprise Discharge Summary (EDS) Working Group and GCH Clinical Handover Committee meetings to improve quality and timeliness of clinic correspondence and discharge summaries. Gold Coast Health continues to maintain an EDS completion rate at or above 70 per cent. This level has been sustained for the past 22 months.
- To improve discharge summaries work has focused on:
  - The development of standardised SOPD clinic letter template and procedure and consultation to increase visibility around SOPD letter completion performance.
  - Development and pilot launch of TrakDS system which provides real time access to discharge summary completion performance.
  - Development of discharge summary templates.
  - Review of state-wide General Practice Liaison Officer network initiatives to improve discharge summary rates.
  - Participation and provision of supporting education materials at annual GCH intern orientation relating to discharge summaries.
  - The planning of GCH 'Pass the Baton' campaign which is focused on improving and raising awareness of the importance of clinical handover both within GCH services and between GCH and GPs.

Support primary care clinicians with specific queries relating to their patients or GCH systems and procedures.

- Commencement of consultation, facilitation and information gathering activities to support the development of standardised service information, referral pathways, access and resources for 20 specialties.
- Provision of clinical communications phone and email service for primary care clinicians with 159 queries received as of June 31 2017, and 95 per cent of those queries managed within 21 days of receipt.

Provide advice and support to a wide range of healthcare providers and services in relation to the quality of their care, redesign projects and engagement of clinicians.

- Supported the launch and roll-out of the Health Provider Portal, which enables GPs to access clinical information from Gold Coast Health patients and will improve coordination of care.
- Attendance and presentations at the quarterly state-wide General Practice Liaison Officer Network with ongoing collaborative learnings between colleagues in relation to improving patient journeys.

Design, deliver and contribute to educational events for clinicians.

- Delivery of the annual Women's Health in Partnership event attended by 120 GPs and practice nurses, with 16 presentations by medical specialists, GPs, allied health midwifery and nursing staff addressing issues including breast and cervical screening, endometriosis, contraception, miscarriage, maternity services, pelvic health and amenorrhea.
- Delivery of electronic discharge summary related education resources and training to junior doctors and final year medical students at Bond and Griffith universities.
- Delivery of four GP peer learning events and delivery of GP trainer workshops.
- Development of an education model for Maternity Shared Care.

HealthyGC

What we have achieved

The Gold Coast Primary Health Network's (GCPHN) website, HealthyGC (www.healthygc.com.au), is a critical platform to provide information and education for health professionals and the public through online clinical resources including referral templates, and the most comprehensive local health service directory in our region.

Extensive work has been undertaken to develop a more systematic structure and framework within the menu structure and site navigation to better enable viewing of resources, ensure consistency, increase ease of navigation and support access to resources and referral pathway related information for primary care providers, with the primary target audience being General Practice.

The communications team continues to engage with the practice support, immunisation, digital health, aged care and mental health teams internally and general practice staff, Gold Coast Health, members of the GCPHN Clinical and Community Councils, GP Liaison Unit, the GCPHN Board and other stakeholder groups to keep content up-to-date and target and refine resources to ensure the website remains an important and relevant source of information for healthcare professionals in the region.

"Always a pleasure to use your website"
Feeback received via website feedback form

"Was very easy to use and understand."
Feeback received via website feedback form

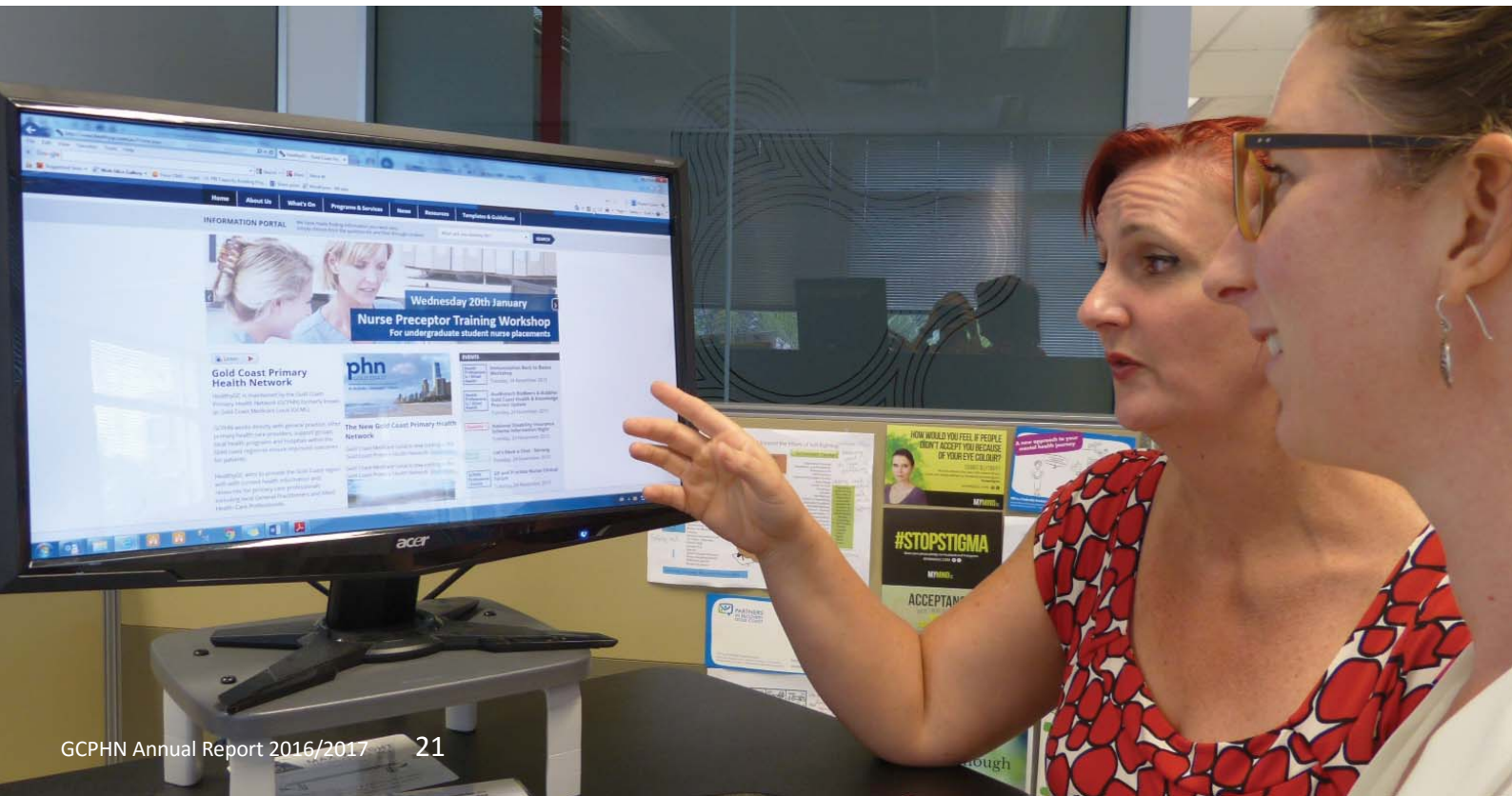
"I find Gold Coast PHN (website) is amazing, I look forward to participate in education activities , therefore I keep looking in the web site"
Feeback received via website feedback form

KEY RESULTS

- Online sessions have increased to their highest ever, from almost 100 000, to more than 120, 000, This number of sessions has exceeded all targets.
- There were 77,901 website users within this time.
- Pages were viewed 291,471 times within this time.
- A new GCPHN online events system was developed to allow events to be more easily managed, promoted and registered for. New development has enabled end users easier management of their registration and also allowed complete internal management of GCPHN events by our events team.
- Directory listings have increased to 2480 and the rate of self-authorship is also increasing.
- In collaboration with Gold Coast Health, GCPHN has uploaded more than 500 referral templates with the new Clinical Prioritisation Criteria for GPs to use, resulting in more than 1000 views in the first two weeks.
- The resources section within HealthyGC, has grown in importance for healthcare professionals, to access valuable information and this is reflected through increase in this sections page views.
- Processes have been put in place to ensure HealthyGC content is regularly reviewed and updated. This ensures the latest information is provided to stakeholders.

Partners

- General practices/general practitioners
- Gold Coast Health
- Local health and community services



Health Services for the Homeless

What we have achieved

Gold Coast Primary Health Network (GCPHN) commissions podiatry and social work services for homeless residents at St John's Crisis Centre, Surfers Paradise – a program which is changing lives.

This is a partnership between people who attend St John's for meals, and Griffith and Southern Cross universities, who provide podiatry and social work students to assist clients, under supervision.

Partners

- St John's Crisis Centre
- Griffith University
- Southern Cross University

"This has taught me to work in a very different environment and has increased my confidence in dealing with people from a variety of backgrounds. I developed a greater sense of awareness and insight with respect to my personal behaviour, the behaviour of others, and the ability to navigate and manage high conflict personalities."

Podiatry student

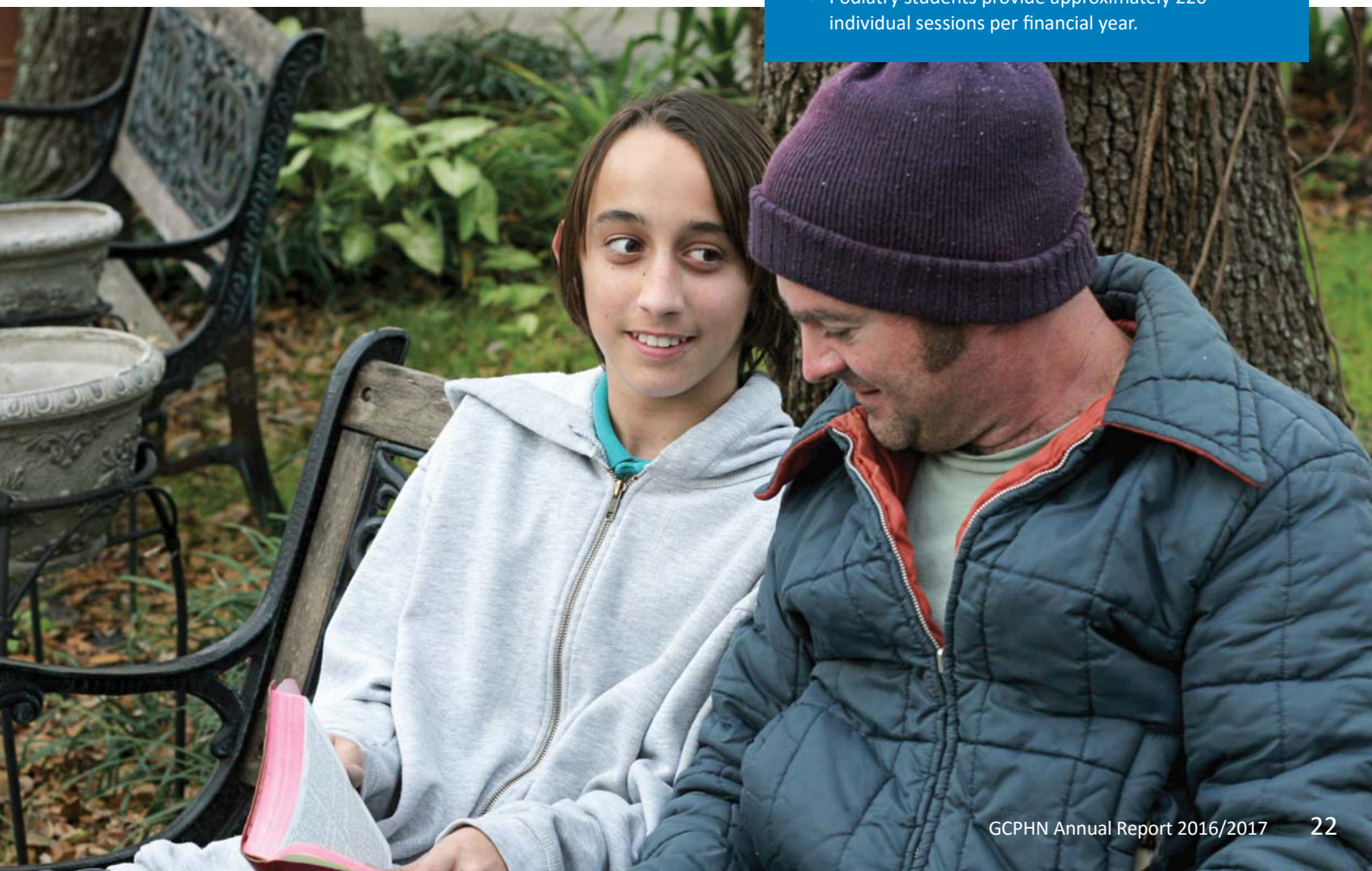
KEY RESULTS

SOCIAL WORK HUB

- The Social Work Hub continues to house homeless people, including women escaping domestic violence. All accommodation found has the potential for long term secure housing and was found by the student hub without referring to other specialist homeless services.
- Social work students provide approximately 900 individual sessions per financial year with strong integration with other services where referral is required for the client.

PODIATRY HUB

- Podiatry students reported this program has provided valuable exposure to both foot problems and mental health issues, and provided insight into dealing with patients with different needs, socio-economic backgrounds and mental health problems. It has also taught the students how to work in a non-clinical environment and required development of skills including adaptability and focus.
- Students report the clinic provides an opportunity for patients who are unable or unaware of podiatry services. The provision of services has aided and prevented complications for many of their patients.
- Podiatry students provide approximately 220 individual sessions per financial year.



Immunisation

What we have achieved

Immunisation is a significant strategic priority for Gold Coast Primary Health Network (GCPHN), given the importance of vaccination to prevent diseases to keep the community healthy and well.

This program is underpinned by a collaboration plan with the Gold Coast Public Health Unit (GCPHU), targeting infants and young children, adolescents, pregnant women and the elderly and has achieved some of the highest immunisation levels ever seen on the Gold Coast.

Immunisation results (by June 30 2017)

All children

12-15 months – 92.9 per cent
24-27 months – 91.8 per cent
60-63 months – 91.5 per cent

Indigenous children

12-15 months – 92.3 per cent
24-27 months – 95.1 per cent
60-63 months – 95.5 per cent

Adolescents – HPV

In 2012 the HPV immunisation rate for girls turning 15 was 60 per cent compared with the national average of 70 per cent. This statistic has now increased to 72.5 per cent and is continuing to increase, a significant jump in a short period of time. The preliminary school immunisation rates for 2017 have also increased remarkedly with dose 1 (HPV) at 79 per cent and Boostrix at 80 per cent. The return rate for consents has increased to 91 per cent for 2017.

Partners

- Bolton Clarke Galleon Gardens
- Gold Coast Public Health Unit
- General Practice
- City of Gold Coast
- Child care centres
- Residential aged care facilities
- Immunisation Coalition
- Seqirus (A CSL Company)
- GSK (GlaxoSmithKline)
- Sanofi Pasteur

Immunisation

KEY RESULTS

Childhood immunisation rates continue to meet targets with rates in October – December 2016 for the 24 month and 60 month age groups being the highest recorded to date within the Gold Coast region.

Targeted HPV campaign

- A HPV awareness campaign has been conducted including radio advertising, targeted follow-ups of students and raising awareness in the community and in General Practice.
- A strategy to contact general practices with patients overdue for HPV (Gardasil) dose 2 and/or 3 was very successful with 157 of 196 patients (80 per cent) being recalled and vaccinated. HPV rates are now at their highest ever levels for girls and boys on the Gold Coast, and rates are continuing to increase, as parents understand the importance of these vaccinations.

Community events

In conjunction with Gold Coast Public Health Unit (GCPHU) GCPHN attended a number of community events to promote immunisations and health and wellness. This included:

- **NAIDOC Titans Event -** Engaged with the Indigenous community and provided influenza immunisations and vaccination advice.
- **Homeless Connect –** supported some of the city's homeless through free vaccinations and health information. It was the first time that immunisations have ever been offered to eligible patients. Thirty-seven people, ranging in age from 6 months to 76 years, were vaccinated including two infants who received their six month immunisations (both overdue). The vaccinations covered flu, pertussis, pneumonia, diphtheria, tetanus and pneumococcal. All patients immunised stated they did not have a regular GP. A media interview with Professor Paul Van Buynder on ABC Radio from the event, discussed the importance of providing protection to some of the city's most vulnerable.
- **Gold Coast Kids Expo -** This event provided an opportunity to promote childhood and pregnancy vaccinations. The GCPHU vaccinated 260 individuals over the three days.

The Gold Coast Immunisation Steering Committee

This committee commenced in May 2016 and has been successful in providing leadership and guidance on initiatives and decision making within a collaborative environment toward improving rates on the Gold Coast. Committee representation includes GCPHN, GCPHU, General Practice and representatives from the Northern Rivers Vaccinators Supporters Group.

Education

To reinforce best practice principles, GCPHN supported by the GCPHU, ran education and training events for GPs, practice nurses and residential aged care staff. This has included:

- **Zostavax.** A GP only education event was delivered in October 2016 where 23 GPs attended and were also provided with a free online training module Shingles: The Sleeping Giant. In addition, 38 staff members from residential aged care facilities attended a Zostavax event held in November 2016 due to an identified need. A Zostavax marketing strategy for primary healthcare staff was implemented and resources such as a flowchart on 'advice regarding administration of Zostavax in immunocompromised patients' and recall and reminder tools were provided. Information was also disseminated through the GCPHN publications with a potential audience of up to 5000 people.
- **Monthly immunisation workshops.** These continue to be in high demand with a total of 89 primary healthcare staff attending, the majority being practice nurses. Post workshop visits continue at the practice six - eight weeks afterward for support and education.
- **State (Queensland) Immunisation Symposium.** This significant state-wide event was held on May 19 2017 in collaboration with GCPHU and the Immunisation Coalition. There were 54 attendees with representation from seven Primary Health Networks, 10 Public Health Units, Queensland Health and other state government bodies.

Immunise GC

The ImmuniseGC webpage was developed and implemented with links to reliable and factual information on immunisation for the community. ImmuniseGC is the branding used for all community events and on some marketing materials.

Gold Coast Integrated Care

What we have achieved

Gold Coast Integrated Care (GCIC) is an innovative program designed to better coordinate care for people with chronic conditions, to keep them well and out of hospital. This program has been designed by hospital clinicians and GPs, and is supported by Gold Coast Health and Gold Coast Primary Health Network.

The program provides holistic and targeted care, bringing together a wide range of health and community support services to assess and treat patients, to improve their care, quality of life, reduce emergency department presentations and reduce any unnecessary hospital admissions.

"I have found the program to be absolutely brilliant in that it provides 24 hour support and care. This allows for peace of mind when dealing with chronic illness. A great team of health professionals".

"I've had a good experience. The program has helped me out a lot. I didn't understand what was going on with my care, but GCIC has helped me to understand. They called me immediately after being discharged from hospital and have been contacting me once a week".

"It's nice to know if I need something it's only a phone call away - someone is there. I can ring GCIC to give me advice and make arrangements for me".

Patient testimonials

KEY RESULTS

Holistic Assessment

- 1787 holistic assessments completed
- 1475 cohort patients
- 312 assessed patients deceased, move away from network practice or moved to residetial aged care facilities.

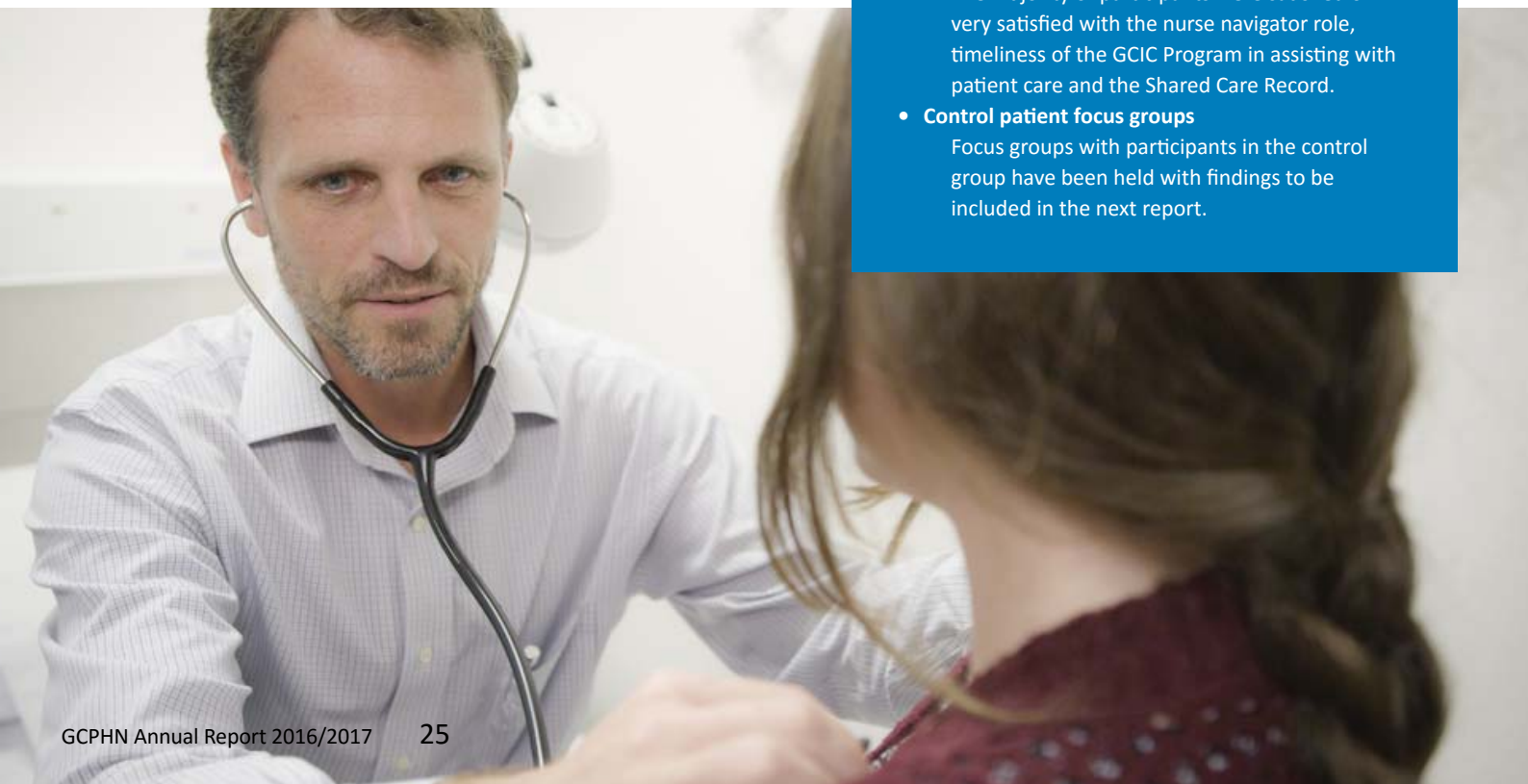
Implementation of dynamic risk management and weekly multi-disciplinary team meetings.

Commencement of Chronic Disease Support Program

- creation of consolidated patient lists
- creation of consolidated register
- clarification of active patients
- Review of patients with missing disease metrics and patients not treated to target

Focus Groups and survey feedback

- **Enrolled patient focus groups**
  Patients valued the communication between GCIC and their GPs, especially the shared health information, the follow-up phone calls from GCIC staff, the pharmacist review, and home visits.
- **GCIC Nurse Navigator staff focus group**
  Overwhelmingly satisfied with the role, support and communication with the multidisciplinary team and ability to draw on their previous clinical experiences.
- **Staff specialist survey**
  Communication and the support network for general practices were seen to have improved the communication between specialists and general practitioners.
- **Practice staff survey**
  The majority of participants were satisfied or very satisfied with the nurse navigator role, timeliness of the GCIC Program in assisting with patient care and the Shared Care Record.
- **Control patient focus groups**
  Focus groups with participants in the control group have been held with findings to be included in the next report.



Integrated Team Care

What we have achieved

The Gold Coast Integrated Team Care (ITC) team is involved with many aspects of care coordination for the Aboriginal and Torres Strait Islander community on the Gold Coast.

The main aim of the program is to improve health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions through better access to coordinated and culturally appropriate multidisciplinary care and contribute to closing the gap in life expectancy.

Gold Coast Primary Health Network commissions services through Kalwun Health Services, to engage and train general practices to become culturally competent as an Indigenous service providers. The number of practices registered as Closing the Gap providers, continues to increase, and is at an all-time high at 117.

The program also employs care coordinators who provide support to clients to better access multidisciplinary teams and an Indigenous Outreach Worker, with the main focus to assist clients access mainstream primary health services, the focus on providing transport for patients to attend their medical appointments. In the last 12 months, 1,644 transport services were provided to patients.

The ITC Project Officer is also increasingly being used as another point of contact for primary healthcare services to discuss care coordination referral eligibility, which has resulted in working relationships being strengthened and new relationships created to ultimately improver patient care.

"As I have had an accident and have multiple specialist appointments, I can't drive. Without Tracy, I'd have a problem attending all my medical appointments."

Trevor, ITC client

Partners

- Kalwun Health Services
- Krurungal Aboriginal and Torres Strait Islander Corporation
- Karulbo Partnership Advisory Council
- Gold Coast Health
- General practices
- Institute for Urban Indigenous Health
- Gold Coast Aboriginal and Torres Strait Islander community

KEY RESULTS

- 2017 Closing the Gap in SEQ Integrated Team Care Forum.
- Care coordinator, project workers and outreach workers are all working as part of an integrated team.
- As a cost saving measure, medical aids being bought in bulk for much cheaper prices and supplementary service funds being sparingly to sustain funding.
- Staff creating successful relationships with mainstream primary care providers to facilitate care coordination referrals, which can also open the door to other ITC services i.e. cultural awareness training.
- Creating appropriate marketing material has assisted with dissemination of program information.
- Integration of the ITC Program into the many other Institute for Urban Indigenous Health and AMS Programs and systems have led to increased patient interactions for outreach workers and care coordinators as well as better connections with service providers. This is particularly useful for new mainstream practices, as they often need assistance with the referral and intake procedures of the program. This is an opportunity to engage and build relationships and ITC staff are able to maintain a strong presence and deliver a continuity of care.
- The outcome of integrating the referral, intake and discharge throughout the regions has been positive. The team approach of actioning a referral is working well, and patients are able to benefit from the communication across services.

Care Coordinator and Outreach Worker interactions

- increased access to specialist appointments
- increased advocacy for health care appointments
- increased engagement with hospital Aboriginal and Torres Strait Islander staff
- utilising community organisations with integrated care models

Project Officer Interactions

- ITC visibility at regional health meetings and forums
- increased opportunities to promote the ITC Program to new audiences in the health sector
- expanding health and cultural networks

Success Story

The ITC outreach worker up-skilled a GP, providing advice for his patient on the PBS co-payment measure (within Closing the Gap Program), and annotating scripts for PBS medication to make it more affordable. The patient also received an Aboriginal Health Assessment and was extremely grateful for the service. For ongoing education into best practice care for Aboriginal and Torres Strait Islander patients, in house training in cultural safety was also provided to the General Practice.

Mental Health

What we have achieved

- Undertook an extensive consultation and co-design process with key stakeholders and the community as part of a collaborative approach for the needs assessment and design of new services to be commissioned.
- To ensure input was received from all stakeholders, more than 500 individuals and 200 organisations were consulted.
- A Mental Health Working Group provided guidance and expert advice during this process with representation including mental health community service providers, Gold Coast Health, consumers, Queensland Police, Queensland Pharmacy Guild and an Aboriginal and Torres Strait Islander community organisation.
- Launched the new Psychological Services Program which replaced the previous ATAPS Program.
- Launched four new services targeting people with mild mental illness.
- Commissioned the following services:
    - headspace primary service
    - headspace Early Psychosis Program
    - mental health nursing services
    - psychological services for hard to reach groups
    - low intensity services
    - Indigenous mental health service
    - Suicide prevention support service for people discharged from Gold Coast Health inpatient or community mental health service

KEY RESULTS

- GCPHN also established collaborations through formal meetings with the Heads Up Consortia, Regional Integrated Mental Health and Alcohol and Other Drugs Advisory Group, and GCPHN Multidisciplinary Clinical Advisory Group for Mental Health and AOD.
- headspace delivered 5,283 occasions of service for 1,578 young people, with 994 new young people receiving a service. This is 1.56 per cent of the regional population of 100,782 (youth 12-25 in Gold Coast, ABS, 2016 Census).
- The number of sessions provided by mental health nurses was 3,681 delivered to an average of 3 people per session.
- To 30 June 2017, the ATAPS Program delivered 11,559 sessions.
- 73 Aboriginal and Torres Strait Islander people received culturally specific clinical nursing and care coordination services.

Partners

- Gold Coast Health
- GCPHN MH and AOD Multidisciplinary Clinical Advisory Group
- Karulbo Partnership Network
- Headsup Consortia
- Mental Health Working Group
- PIR Consortia Group

Partnering and Stakeholder Engagement

What we have achieved

Gold Coast Primary Health Network (GCPHN) has strengthened and streamlined its partnering and stakeholder engagement process in the last 12 months, with a range of advisory groups to inform our needs assessment, service mapping, program design and performance feedback.

Relationships with our key stakeholders have provided an opportunity for us to collectively work towards creating one world class health system for the Gold Coast. These stakeholders have included local and state government agencies, the City of Gold Coast, Gold Coast Health, general practitioners, practice nurses, practice managers, allied health professionals, the aged care sector, non-government health and community service providers, clients receiving health services and the broader community.

Partners

- General Practice Gold Coast
- Gold Coast Health
- Federal, state and local agencies
- Griffith, Bond and Southern Cross universities
- Private providers across General Practice and allied health
- GCPHN Lead Clinician Group
- GCPHN Community Advisory Council
- GCPHN Clinical Council
- Primary Health Care Improvement Committee
- Gold Coast Primary Care Partnership Council
- Integrated Care Alliance
- Heads up (mental health and alcohol and other drugs)
- Gr8 START (early childhood)
- Residential aged care facilities
- Supportive and Specialist Community Palliative Care Committee
- CNAP 65+ (Seniors with complex mental health needs)
- End of Life Care Strategy Committee
- Community Aged Care Network
- Karulbo (Aboriginal and Torres Strait Islander Partnership)
- Gold Coast Multicultural Network
- The Homelessness Network
- Mental Health NGO Network
- Mental Health and Alcohol and AoD Muldisciplinary Advisory Group
- Seniors Roundtable
- Health Consumers Queensland
- Queensland Primary Health Networks

"83 per cent of survey respondents believe the GCPHN adds significant or some value to the Primary Health Sector."

Respondents to the Primary Care Opinion Survey

"It's nice to hear that when we give feedback then it is being heard and action is being taken."

GCPHN Community Advisory Council member

"I've been impressed with the life skills and experience of the participants and I've learnt so much for my co-members."

GCPHN Community Advisory Council member

KEY RESULTS

- GCPHN has a formal partnership agreement with Gold Coast Health with several agreed priorities and areas of work. The agreement is overseen and progressed through a joint Executive Steering Committee.
- The GCPHN Community Advisory Council continues to provide valued advice representing the diversity of the Gold Coast community on a range of issues including digital health, chronic disease, mental health and advanced care planning. It's feedback, direction and advice to the Board impacted the strategic plan, needs assessment, planning and service development processes.
- Extensive stakeholder consultation has occurred throughout two significant co-design processes for mental health and end of life. These included specific engagement with consumers, clinicians, funders and service providers.
- There has been continued regular engagement with the local primary care industry and broader groups through involvement at various committees, networks and working groups.
- Communication to GPs through GCPHN communication channels with the GP Bulletin now at the highest subscription rate ever with almost 70 per cent of all local GPs subscribed, and 38 per cent open rates, well above not-for-profit averages.
- Communication to key stakeholders and the public has been improved through the online Your Local News newsletter with subscription rates at an all-time high at almost 3000.
- There has been a strengthening of key relationships with Health Consumers Queensland and the Gold Coast Health Consumer Advisory Group including combined training to further upskill current consumers and build integration between the primary care and acute sectors.
- GCPHN showcased positive outcomes and processes for the Community Advisory Council and broader engagement at two state forums - Health Consumers Queensland and Check-Up.
- GCPHN is involved in benchmarking, sharing learnings and avoiding duplication through collaboration with Primary Health Networks from across Queensland. Program areas that are involved include Commissioning, Communications, Finance, the PENCAT Strategic Group and Practice Data Collaborative.

GCPHN Persistent Pain Program

Turning Pain Into Gain

What we have achieved

The Turning Pain into Gain program commissioned by Gold Coast Primary Health Network, helps persistent pain sufferers to become better managers of their pain.

This Program does this through group education, support, goal setting and improved use of community healthcare services. Pain sufferers are supported by a large network of healthcare professionals who are specialised in pain management. Participants attend fully subsidised six-monthly expert education forums, providing up-to-date information on how to live with persistent pain, based on current research.

In the last 12 months, 395 people, the highest number yet, have participated in this program. This is an estimated seven per cent of people living with persistent pain in the Gold Coast region. This program has provided an importantly needed service and has helped patients who have been waiting to access Gold Coast Health's pain services. Many participants have found the program life changing and through better pain management, avoidable hospitalisations have been reduced.

Partners

- Gold Coast Health
- GPs
- Allied health
- Pain Management Research Institute
- Supporting Kids in Pain (SKIP)

KEY RESULTS

- 307 GPs have referred into the Persistent Pain Program, including 60 new GPs in the last 12 months.
- Walking groups for pain sufferers have been established with numbers tripling in the last 12 months.
- Wait times to access the program are small and there remains no wait list beyond one month.
- The age group of clients are younger with an increase (approximately five per cent) in patients in the 20-35 age group as compared to last year in the same period.
- Patients have been assisted to access community transport options to help their independence.
- In consultation with the General Practice Liaison Unit, data was collected to review patients enrolled in the program and their presentation to hospital for pain related issues before and after attending the Persistant Pain Program. Evaluation shows positive outcomes in the ability to perform everyday activities and self-management, a 78 per cent reduction in hospitalisations.
- Almost 50 GPs and allied health professionals (existing and new referrers) attended an annual event to learn more about pain management to assist their patients. This event was held in collaboration with Supporting Kids in Pain (SKIP) and the Pain Management Research Institute.

JOHNNY'S STORY

"I had a stroke in 2014 and was left paralysed down my right side. As a professional driver, I couldn't work and I was in incredible pain and could barely do anything until I joined the Persistent Pain Program. We instantly began trial and error around the right pain medication until we got things stabilised in the pain area and then I was put onto an exercise physiologist. This really helped to keep everything moving, so I didn't suffer so much pain. This has turned my life around dramatically - from no hope - to setting and gaining my own goals. Because everyone around me was positive, it motivated me to get my license back, which I would never have done."

Partners in Recovery

What we have achieved

Partners in Recovery (PIR) Gold Coast has been life changing for many participants, who have persistent, severe and complex mental health issues and need support through multiple agencies.

Through this program, many of these clients have been able to start their recovery journey and improve their health and wellbeing. PIR provides participants with a facilitator who understands the needs of each individual, and can connect them to the right services including health and housing needs. By the end of June 2017, 988 clients have been supported through this program since it commenced four years ago. The PIR Program will be transitioned into the National Disability Insurance Scheme (NDIS) from July 2018 and a focus in the last 12 months has been the development of comprehensive planning, in preparation.

Partners

- Kalwun Health Services
- Multicultural Communities Council Gold Coast (CURA Community Services)
- FSG Australia
- Mental Illness Fellowship Queensland (MIFQ)
- Aftercare
- Krurungal

A PIR participant's story

"My PIR facilitator has been one of the greatest supports of my life through really hard times. Someone to talk to, and who put me in touch with so many services, courses and resources that I would have never known about. I had never even considered art until my facilitator offered it. It's like I've discovered something in myself I didn't know that was there. Art class teaches us a way of expressing ourselves, working through our problems and feelings and coming to a peaceful resolution. I am just expressing how I am feeling. It is cleansing."

KEY RESULTS

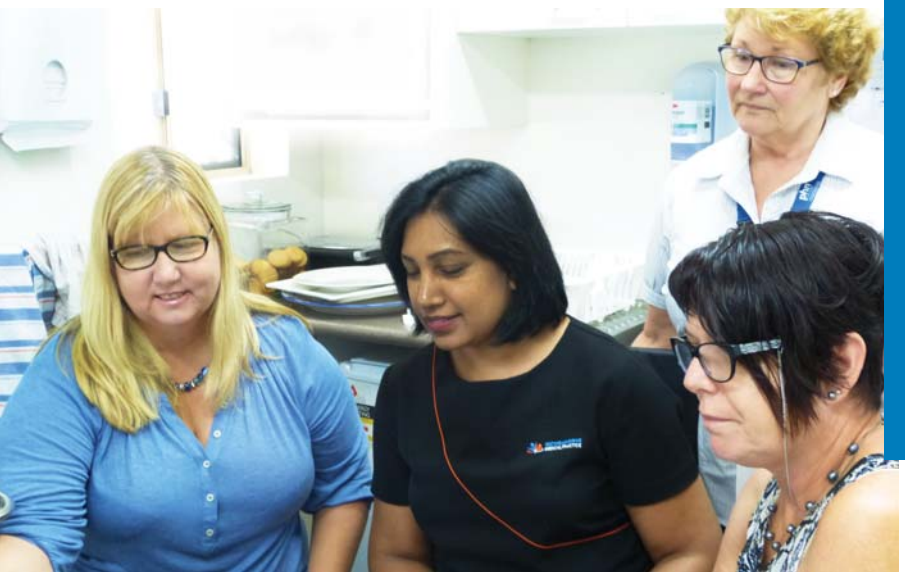
- As at June 30 2017, there were 14 facilitators across the consortia, and three coordinators, directly assisting 246 participants. Eighty-eight per cent of patients had a PIR satisfaction rating of more than eighty per cent and eighty three per cent of participants believed they had increased confidence to self-manage their condition.
- Thirteen individual capacity building workshops were delivered to 50 participants with a range of topics including computer skills, pre-employment skills, trauma therapy, dialectical behaviour therapy, starting your own business, clutter and hoarding, cooking and nutrition.
- The PIR consortia is now more representative of the community, including organisations representing the Indigenous and culturally and linguistically diverse (CALD) sectors.
- PIR participates in 18 local networks and has implemented key strategies to strengthen partnerships with regional organisations and build on relationships with local services. This includes attendance at the Queensland Integrated Court Referral Case Assessment Group meeting and collaboration with Red Cross, Parliamentary members, Queensland Police Services and Department of Housing and Public Works, as an advisory committee member on the Pride in Place initiative for housing complexes with a high level of disturbance.
- Linkages with Centrelink and the local Neighbourhood Centre Financial Counselor has resulted in positive long term outcomes for PIR participants. One participant experienced severe anxiety over a large debt and abuse from debt collection agencies and will now complete 300 hours of community service in lieu of debts which the participant did not realise was an option. Other debts were consolidated into one manageable payment.
- PIR also provided feedback to the Multicultural Liaison Unit regarding the Safer in the Home Audit Program for CALD victims of domestic violence and ties have been strengthened as a result between the Queensland Police Service, Thai Temple and Thai Legal Support (Griffith University).
- PIR continues to promote a community oriented recovery model. One client was transitioned to independent living, after working with their facilitator on a goal to live independently in the community, shifting a culture of 'blaming the individual', to instead focus on the opportunities to learn and identify new, innovative solutions.
- Aboriginal and Torres Strait Islander clients now have improved access to primary healthcare, through improved linkages with Indigenous healthcare organisations.
- To promote key messages to participants and service providers, the monthly PIR newsletter has increased to more than 900 subscribers. Website hits are continuing to increase to the PIR website, with an average of 1500 users per month and 500 likes on Facebook. Articles are also promoted to GPs through the Generally Speaking newsletter and the Gold Coast Primary Health Network online newsletter, Your Local News, to 3000 subscribers.
- The consumer led group, Human Voice Connections, continues to meet independently of PIR funding and support working on further advocacy and stigma reduction projects. This is a success in sustainable social connection and advocacy skill building.

Practice Support

Gold Coast Primary Health Network provides support to all Gold Coast general practices through a tiered approach.

Tier 3 - Moving from better data recording to facilitated Quality Improvement activity targeted to implement process and system improvements from a patient outcomes perspective.
Tier 2 – Data extraction and bi – monthly data reports aimed at improving data quality
Tier 1 - Engagement with practices through communication, access to resources supporting accreditation/ digital health/ immunisation
The tiered approach is built on an established quality improvement program to improve:

- Data quality including clinical coding.
- the management of patients with chronic disease, promote screening and assessment activities within best practice guidelines and MBS eligibility criteria.
- Moving to Population Health Management.



KEY RESULTS

- 34 general practices participating in facilitated Quality Improvement (QI) activity with a General Practitioner clinical lead identified in each practice
- Increased QI engagement with general practice staff:
  - 137 General Practitioner encounters
  - 72 Practice Nurse encounters
  - 70 Practice Manager encounters
- Six bi-monthly data reports promoting improvements in data quality provided to general practices. Topics included:
  - Diabetes
  - Chronic Kidney Disease
  - Risk Factors for developing Chronic Disease
  - Data Quality Benchmarked report
  - Disease coding
  - Mental Health
- Evaluation of GCPHN's role with General Practice has shown that 91 per cent of practices have increased insight into their practices' data quality and an increased understanding of the GP's role within the quality improvement framework.
- Best practice targets against screening rates for Diabetes, Coronary Heart Disease, Chronic Obstructive Pulmonary Disease and Chronic Kidney Disease have increased at many practices, such as a 12 per cent increase in spirometry recorded.
- Introduced quarterly Clinical Audit Tool training for General Practice staff using the tool resulting in a more efficient way of providing training. This option allows an opportunity for practice staff to use the tool within a supported test environment.

What we have achieved

A number of initiatives and activities have been implemented in the last 12 months to promote quality improvement activities, and strengthen relationships between GCPHN and practices. This has included:

- The GCPHN practice support team completed 3898 interactions with 183 of 190 (or 96 per cent) of general practices on the Gold Coast through practice visits, phone and email.
- GCPHN practice support staff and GP Dr Lisa Beecham have held presentations with GPs and senior staff, to analyse their specific data around clinical measures including Diabetes, Coronary Heart Disease Chronic Obstructive Pulmonary Disease and Chronic Kidney Disease with set outcomes and actions for improvement. Each practice is also provided with a Quality Improvement Report to support GPs in improving patient outcomes and business systems.
- A total of 277 healthcare professionals and staff representing 204 primary care organisations have attended education sessions and forums organised by Gold Coast Primary Health Network, to support the adoption of best practice methods. Topics have included aural health, change readiness for nurses/clinicians/receptionists, digital health, audiometry, cast application and management, fair work compliance in general practice.
- 281 practice managers and nurses are involved in a GCPHN online forum to share information, and discuss business discussions and operations.
- 133 or 82 per cent of eligible general practices with an agreement in place to submit de-identified aggregated population health data to GCPHN.

Partners

- General practices
- Griffith University

90 per cent of general practices on the Gold Coast had interactions with Gold Coast Primary Health Network. Support provided included digital health, immunisation, data analysis as well as facilitated quality improvement activity helping practices improve patient care and their business systems.

Quality, Risk and Performance

What we have achieved

During 2016/17, Gold Coast Primary Health Network (GCPHN) undertook a considerable organisational development program which was supported by external experts to develop a comprehensive Five Year Organisational Commissioning Capability Maturity Plan to direct capability and capacity development activities over the coming years.

A number of initiatives were also undertaken to improve business planning, business continuity, risk management, continuous improvement of organisational and commissioning processes and systems, to enable GCPHN to be a high performing, efficient and accountable organisation.

Partners

- Griffith University
- Bond University
- John Hopkins School of Public Health, USA
- Sydney University
- RACGP
- GCPHN Clinical Council
- Pricewaterhouse Coopers (PWC)

KEY RESULTS

- This year Gold Coast Primary Health Network (GCPHN) successfully achieved accreditation against the new ISO 9001:2015 Quality Management Systems (QMS) Standard. Highlights from the key findings reported by the auditor included:
  - GCPHN's obvious commitment to providing a quality service to the community
  - positive recognition of the developmental work completed and underway
- Commenced review of the Quality Management System to streamline standard documentation and online processes, maximising the value from the introduction of new ICT systems.
- Introduction of a risk management policy, system and training to ensure best practice identification, management and monitoring of risk across the organisation, including enhanced conflict of interest management processes and training.
- Implementation of the Folio system, a specialist contract management and compliance software system to support organisational contracting, procurement, risk management and action tracking.
- Revised strategic plan 2017-2022, providing clearer strategic level direction, identification of characteristics of world class healthcare and GCPHN key performance indicators that align to Primary Health Network (PHN) performance measures.
- The program planning and performance monitoring and measuring processes have also been reviewed to achieve greater standardisation across programs and aligned performance reporting against the PHN's strategic goals and vision.
- Performance monitoring and reporting capability has also been significantly enhanced through the investment in the business intelligence platform QlikSense to support improved analytics and streamlined performance review and reporting.
- Working towards implementing the Institute of Healthcare Improvement's Triple Aim, an internationally recognised systems performance framework, as a whole-of-system approach to driving quality improvement efforts across the Gold Coast health system.

Workforce

What we have achieved

Coast Primary Health Network (GCPHN) plays a key role in supporting workforce development in primary healthcare, to ensure health professionals are kept up-to-date with the latest education activities and health information to maintain and improve high standards of patient care.

To guide workforce activities and lead quality improvement, an internal Workforce Education Steering Committee was established in November 2016. Membership is diverse across Gold Coast organisations, including GCPHN staff, GPs, Gold Coast Health, General Practice Gold Coast and other key stakeholder groups. The steering committee meets bi-monthly.

Partners

- General Practice Gold Coast
- Gold Coast Health
- General Practice Liaison Unit
- General practices

"Thank you so much for sharing this information, a good night."
Reception forum participant

"My Health Record easily explained and the Importance of everyone taking part. Speaker was fantastic, knowledgeable."
Whole of practice forum participants

Thanks again for your work in making the evening happen! Excellent work. Better understanding and knowledge of chronic disease support Programs."
Nurse forum participants

KEY RESULTS

- A dedicated events team was established within GCPHN to better coordinate, execute and evaluate all events including online registration, widespread promotion through publications, social media and emails, and feedback mechanisms for continuous improvement.
- GCPHN has facilitated activities provided by other clinical training agencies including: spirometry, ear health/irrigation, chronic disease support, nutrition, foot health assessments (diabetes), dementia and pain management.
- GCPHN provided seven successful forums and two breakfast sessions, specifically for practice nurses/GPs, practice managers and reception staff. Some of the topics presented were: Digital Health/My Health Record, Managing difficult patients; Triage in practice; Breast and Bowel Screening awareness; Understanding business success; Practice Data extraction Tool; award rates and privacy in practice.
- Significant research has been ongoing to determine the most effective methods for the delivery of training and education with a focus on webinar/video based learning for healthcare professionals and staff. Links for online training are shared with GPs, nurses and practice staff.
- To better assist with planning, avoid duplication and identify gaps in the delivery of training Programs for health professionals across the Gold Coast, an internal 12 month calendar has been developed which is shared across a range of health organisations.
- Overall during the 2016-17 year, GCPHN facilitated a total of 71 education and or training events.

Chronic and Complex Wound Management

KEY RESULTS

100 per cent of nursing participants who attended the workshops found that it increased their knowledge and confidence to:

- implement a wound care management plan
- understand wound management product guidelines and regulations

92.3 per cent of participants who attended the workshop found that it increased their knowledge and confidence to:

- conduct a comprehensive assessment
- prevent/manage infection
- understand treatment options available
- minimise the impact of pain
- recognise oedema
- apply compression
- use investigations for diagnosis
- evaluate a management plan
- understood the roles of other disciplines
- understood psychosocial factors
- evaluate a management plan
- 13 nursing participants shared the knowledge they gained with other health care providers within their practice including nine General Practitioners, thirteen nurses and one Aboriginal Health Worker (advanced).

What we have achieved

As part of continuous improvement and best practice, Gold Coast Primary Health Network commissions services to up-skill the General Practice workforce, to provide improvements in patient care, and ultimately keep people well and out of hospital.

This is the major driver behind the Chronic and Complex Wound Management Project which in the last 12 months, has provided an education opportunity to 18 nurses responsible for the care and management of patients with a chronic or complex wound in a general practice or residential aged care setting. 85.7 per cent of nurse participants indicated their learning needs were fully met and 14.3 per cent of participants indicated their learning needs were partially met. Eighteen GPs completed the Wound Management Active Learning Module with 83.3 per cent of participants indicating their learning needs were fully met and 16.7 per cent of participants indicating their learning needs were partially met.

"One hundred per cent of nursing participants said when managing a wound, they were confident about implementing a management plan and the need for compression."

Workshop evaluation

Partners

- Wound-busters Pty Ltd
- General practices
- Residential Aged Care Facilities

Gold Coast Primary Health Network

Primary Care Gold Coast (ABN 47152953092), trading as the Gold Coast Primary Health Network.

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2016-2017 Annual Report (July 1 2016 - June 30 2017)

2016-2017 Financial Statements (July 1 2016 - June 30 2017)
available on www.healthygc.com.au

"Building one world class health system for the Gold Coast."

Gold Coast Primary Health Network gratefully acknowledges the financial and other support from the Australian Government Department of Health.

Australian Government

phn GOLD COAST

An Australian Government Initiative