

*“Building one world class
health system for the Gold Coast.”*



2018

Gold Coast Primary Health Network
Needs Assessment

phn
GOLD COAST

An Australian Government Initiative

2018 Needs Assessment

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Narrative

Gold Coast Primary Health Network (GCPHN) submitted the 2017 health needs assessment to the Department of Health (DOH) in November 2017. Following the submission, the health needs and service issues along with the key priority areas identified by the health needs assessment directly fed into the GCPHN Activity Work Plans for 2018.

Following development of the 2017 needs assessment we conducted an internal review of the process to identify areas for improvement. Findings included:

- As part of the 2017 Needs assessment process, a series of themed topic summary documents were developed that included data, service mapping and details of consultation undertaken to date. These summaries were used to inform engagement with key stakeholders and are now published on Healthygc website as resources and information to support our ongoing implementation work. On review the resulting engagement from presenting the information in this manner was much more meaningful and detailed than in the past when we appeared to receive more general top of mind responses from our previous generic surveys and discussions.
- The need for a simple internal systems to effectively document feedback from stakeholders and emerging trends throughout the year was identified. This led to an enhancement in our monthly reporting system as a particular area to capture this information.
- Exploration of use of online engagement tools for broader community consultation. The engagement to include an online engagement campaign with the broader community and service sector, which will enable a lighter level of resourcing than a more intensive events based consultation.
- Inclusion of a general demographics overview.

Early in 2018, GCPHN commenced scoping for the 2018 Needs Assessment. The Clinical Council, Community Advisory Council, and Primary Care Partnership Council were all consulted in relation to existing and potential additional areas to focus. Recommendations included:

- General support for intended approach of building from the existing summaries in a “modular” approach
- Significant review and more in-depth detail and analysis of the Older Adults summary splitting the information into the following:
 - Older Adults with a focus on Residential Aged Care Facility (RACF) residents
 - Palliative care / End of Life
- While some additional areas including social disadvantage and early childhood were flagged as areas to consider for in depth review, due to limited capacity and relatively good outcomes, it was determined not to progress these areas this year.

In addition as part of the new deed from the Commonwealth, PHNs are required to develop a specific “general practice” needs assessment was required and subsequently a National Psychosocial needs assessment was also required.

PROCESS FOR AGED CARE (WITH A FOCUS ON RACFS) AND PALLIATIVE CARE

This work has actively built on existing work and in particular the Greater Choices for At Home Palliative Care program of work and the Integrated Care Alliance program of work between GCPHN and Gold Coast Health. While there are separate Needs Assessments, given the overlap the work has been progressed in alignment.

Data – A comprehensive review of relevant data has been undertaken with support from external consultants. Data considered includes:

- Demographics
- Gold Coast Health data including projections
- PCOC data
- Gen Aged Care data
- ED presentations

Service mapping - was undertaken in a systematic way, commencing with the existing knowledge base that Gold Coast PHN has previously collected relating to aged care services and providers then assessed against deeper level analysis via desktop research. The service mapping focused on a breakdown of service type, provider, geographic location, target population (e.g. mainstream or specific priority populations) and provider type (e.g. for-profit, not-for-profit, government).

Consultation - Recognising the importance of the project and need for a collaborative approach a multifaceted consultation methodology was taken to inform this needs assessment.

Patient journey mapping was utilised as an engagement tool to understand service issues and enablers from the perspective of health consumers. Patient journey mapping was developed in partnership with Palliative Care Queensland (PCQ) and COTA Queensland for their knowledge and expertise to effectively undertake consumer engagement Patient journey mapping. Several distinct patient journeys reflecting common care pathways for both palliative care and aged care in the Gold Coast PHN region were developed to identify components of the local service system that are working well and highlight potential areas for improvement.

Key advisory mechanisms were consulted to provide direct feedback on initial drafts of the needs assessments including:

- Gold Coast PHN Community Advisory Council
- Gold Coast PHN Clinical Advisory Council
- Gold Coast PHN Primary Care Partnership Council

In July 2018, Gold Coast PHN established the Palliative Care Leadership Group and the Aged Care Leadership Group to provide detailed advice and guidance for the development of a needs assessment and will subsequently on a regional plan and guiding implementation of subsequent activities.

Consultation with the wider sector and community occurred through sector specific co-design workshops attended by sector representatives including Gold Coast Health, a wide range of NGO and private providers and consumers and carers.

As a result of the meaningful engagement undertaken there are real and sustainable connections with health and community providers, recognising and valuing their skills and experience in service delivery, as well as their connections with each other. These relationships between GCPHN, Gold Coast Health and the broader sector will assist in supporting implementation of activities in due course.

PROCESS FOR NATIONAL PSYCHOSOCIAL SERVICES

Data – National frameworks as well as data from local Partners In Recovery Data was explored to identify potential service user cohort.

Service Mapping – Analysis of Gold Coast service providers was undertaken and was in particularly informed by those working with PIR clients.

Consultation – A particular consultation was undertaken with key stakeholders, focussing on prioritisation of a range of rehabilitation and support services.

Triangulation of the above led to identification of needs for consideration and also identified local provider market was likely to be capable of delivery of needed services.

Process for General Practice

PROCESS FOR GENERAL PRACTICE

Data – Drawing heavily on the data from the Gold Coast General Practice Profile including My Healthy Communities data and GCPHN Client Relationship Management tool (CRM), key information particularly in relation to “practice support” activities funded under the GCPHN deed were explored.

Service Mapping – Again drawing on the Gold Coast General Practice Profile, key aspects of General practice distribution, access and quality were considered.

Consultation – In previous years a survey of primary care providers including general practice was conducted, however the lower than desirable response rate and limited detailed information available led GCPHN to use external consultants to conduct focus groups with staff from 13 randomly selected general practices, with a focus on GCPHNs practice support work. The results of this were considered internally and by the primary health Care Improvement Committee with further advice being provided.

Triangulation of the above led to identification of needs for consideration.

PROCESS FOR REMAINING TOPIC AREAS

Apart from these specific areas noted above, 2017 summaries were to be refreshed by:

- Identification and inclusion of updated data and any new emerging data
- Review of service system by GCPHN staff and key stakeholders
- Inclusion of feedback from stakeholders during the year and online consultation, using the 2017 summaries as the basis for engagement.

Data - GCPHN reviewed existing Needs assessment summaries and looked at original data source to identify if any updates had been made. Staff also scanned to identify previously untapped new and emerging data sources at a state, national and regional level and where available SA3 level. Having access to these levels of data allows for simple and powerful comparisons on key statistics affecting the Gold Coast population. This level of analysis allows GCPHN to identify not only national and state health trends, but also to view the different SA3s within the Gold Coast as distinct regions, each with their own unique issues and challenges. Scoping the revision activity took account of time frames, knowledge of new data releases and resource availability. Quantitative sources to be reviewed were determined based on the ability to add value and complement existing knowledge of health on the Gold Coast. In addition to checking for information updated since previous analyses, focus was placed on epidemiological data and new material made available through the national PHN portal.

Supplementary information included in the revision was sourced from a range of sources including:

- National Health Performance Agency
- Gold Coast Hospital and Health Service
- Australian Childhood Immunisation Register
- National PHN Secure Data Site which included Medicare Benefits Schedule Data, Pharmaceutical Benefits Scheme Data and Digital Health Data
- Australian Institute of Health and Welfare
- Australian Bureau of Statistics
- PHIDU Social Health Atlas of Australia: Primary Health Networks

Service Mapping Revision - As each existing summary already had detailed industry profiling, a lighter re-scan approach was taken to service mapping. Searches were conducted using GCPHN's CRM and public database HealthyGC to determine changes in providers and number of providers. Similar activity was also used to update workforce information. A broad scan of the market was conducted to complement other commissioning activity and ascertain key service gaps and issues.

Consultation - After exploring a range of commercial online engagement software products, it was determined that these were too expensive and as an alternative "EngageGC" was developed by GCPHN staff with similar, if a little more limited, functionality using the 2017 summaries as the basis for engagement. Links to the site were distributed to internal stakeholders, key external stakeholders such as Gold Coast Health Strategic Planning team and Mental Health staff. In addition the site was promoted through usual publications such as GCPHN's "Your Local News" (emailed to around 4,000 stakeholders) and through a social media campaign. In addition, direct consultation was undertaken with the Community Advisory Council to identify any significant changes and/or to validate existing identified needs.

Triangulation of the above, specifically considering impact of any changes in data, service system and issues emerging through consultation, led to review and finalisation of needs for consideration.

PRIORITISATION AND OPPORTUNITIES FOR PLANNING

The identified needs across all areas were reviewed and where there was existing activity that is relatively new or demonstrating appropriate outcomes, no significant changes were proposed and instead as part of ongoing monitoring, review and evaluation, opportunities will be identified for continuous quality improvement and alignment with state government and other emerging initiatives.

GCPHN has agreed criteria which is used to guide consideration resource allocation decisions:

- Population health approach
- Equitable
- Evidence based
- Engaged population and engaged clinical leadership
- Stakeholder acceptability
- Cost effective

After reviewing the findings of the Needs Assessments, potential priorities for emerging needs were proposed and considered in light of the above organisational criteria.

NEXT STEPS

GCPHN will continue to undertake comprehensive analysis in relation to priority areas, building on the improved skills and processes developed during the production of updating the 2018 needs assessment.

ADDITIONAL DATA NEEDS AND GAPS

GCPHN acknowledge the significant and welcome improvement in the release of Commonwealth data to assist PHNs. Feedback below is for consideration in relation to the PHN data portal.

Improve data structure and comprehensiveness

- Inclusion of National and state averages for all data on the Commonwealth portal
- Provision of information regarding funding agreements and deliverables would be beneficial to support knowledge of what type of data may be attainable through collaboration with funding receipts.
- Increased granularity of workforce data to assist with determining service access and broader mapping.
- Inclusion of data from ambulance and police services as they relate to health.
- Support to encourage key NGOs (cancer council, heart foundation) and PHNs to collaborate data collection and reporting using SA4, SA3 or SA2 to enable comparison of regions.
- Social Health Atlas to include SA3 regions with the data sets to enable comparison of regions and be in conjunction with PHN data using SA3.
- Where available on Australian Institute of Health and Welfare, to include PHN and SA3 region figures breakdowns in conjunction with state and national figures. This would enable comparison of regions.

Gold Coast Primary Health Network

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

Level 1, 14 Edgewater Court, Robina 4226 | PO Box 3576 Robina Town Centre QLD 4230

P: 07 5635 2455 | F: 07 5635 2466 | E: info@gcphn.com.au | www.healthygc.com.au

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