

Gold Coast Primary Health Network

# 2017 2018

**ANNUAL REPORT**


*Building one world class  
health system  
for the Gold Coast*



**phn**  
GOLD COAST

An Australian Government Initiative





*We acknowledge the  
traditional custodians of the  
Gold Coast and surrounding areas,  
the Yugambeh, Yuggera and  
Bundjalung peoples.*

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Australian Government

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GOLD COAST

An Australian Government Initiative

**Gold Coast Primary Health Network**

Level 1, 14 Edgewater Court, Robina 4226  
PO Box 3576 Robina Town Centre Qld 4230  
t 07 5635 2455 | f 07 5635 2466

[www.healthygc.com.au](http://www.healthygc.com.au)

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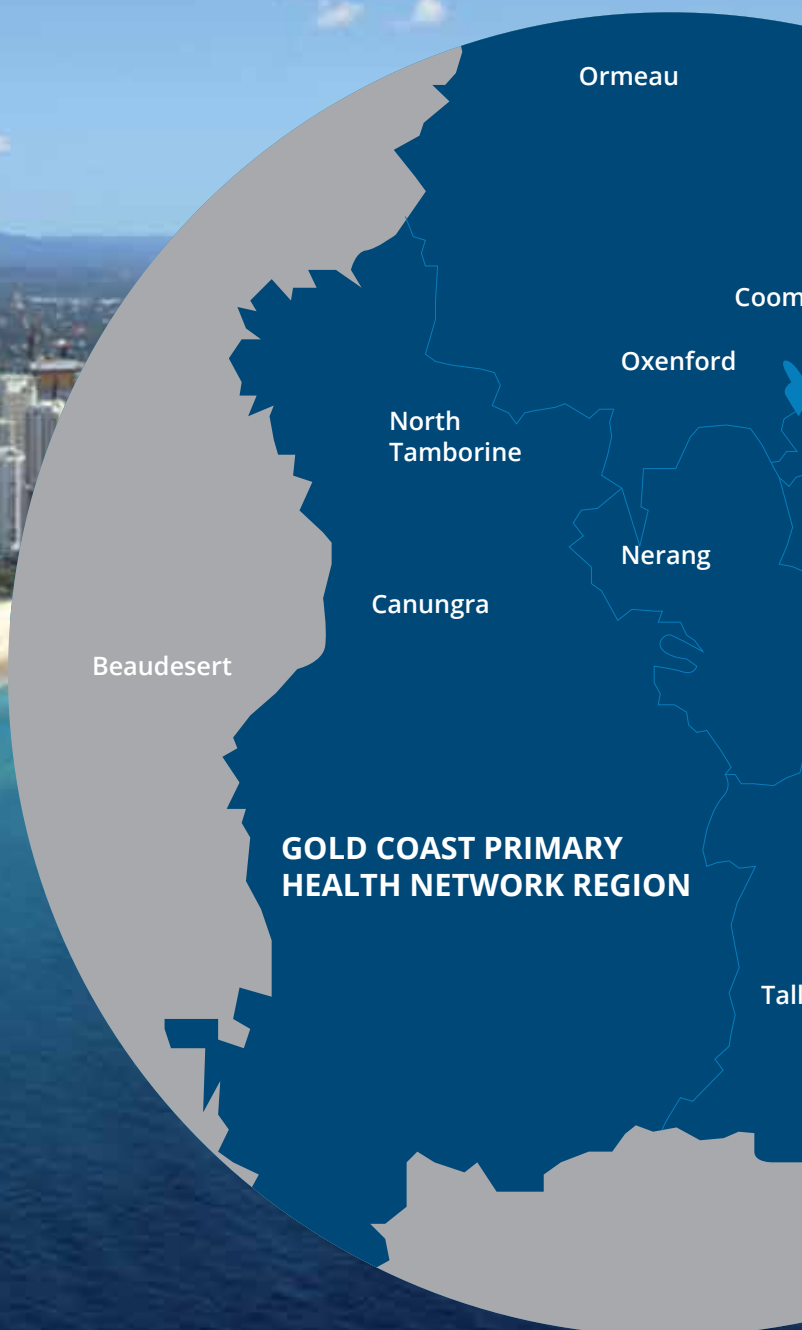


# ABOUT GOLD COAST PRIMARY HEALTH NETWORK

Gold Coast Primary Health Network (GCPHN) is one of 31 Primary Health Networks established by the Federal Government. Now in its third year, GCPHN's key objectives are increasing the efficiency and effectiveness of medical services to 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 by the right person.

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

2017-2018 Financial Statements (1 July 2017 - 30 June 2017) available on [www.healthygc.com.au](http://www.healthygc.com.au)



# OUR VALUES



## SUSTAINABLE

*Efficient, Effective, Viable*



## INNOVATIVE

*Flexible, Pioneering, Evolutionary*



## EVIDENCE-BASED

*Research, Documenting, Transparent*



## COLLABORATIVE

*Partnerships, Integrated, Engaged*



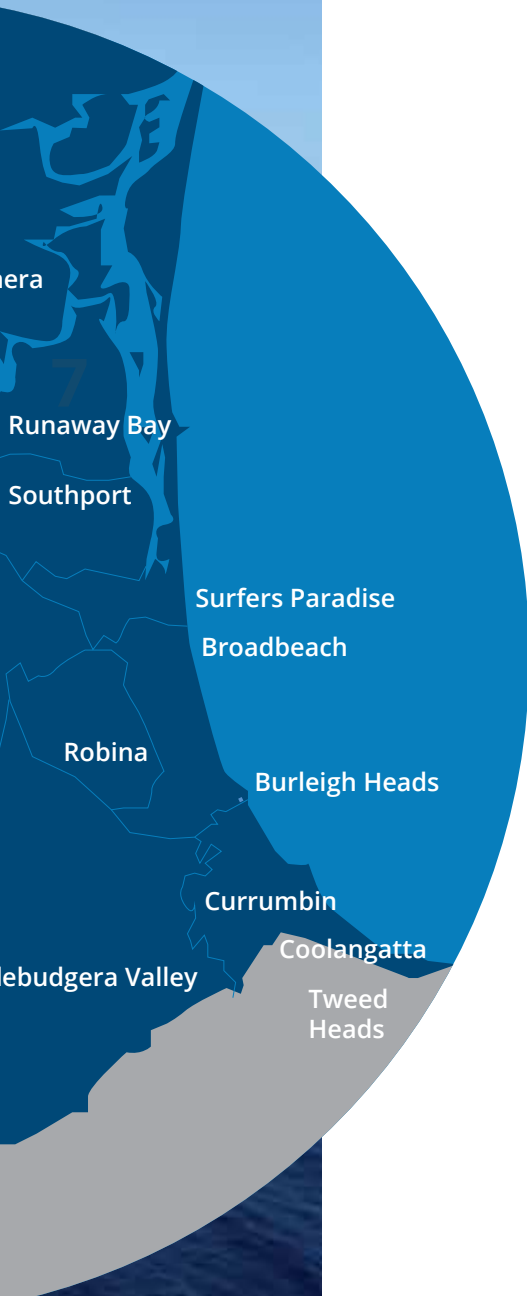
## INFLUENTIAL

*Visible, Valued, Courageous*



## ACCOUNTABLE

*Respect, Responsible, Outcomes*



# OUR VISION





# OUR STRATEGIC GOALS

*Improve coordination of care to ensure patients receive the right care at the right place at the right time by the right person.*

*Increase efficiency and effectiveness of health services for patients particularly those at risk of poor outcomes.*

*Engage and support General Practice and other stakeholders to facilitate improvements in our local health system.*

*Be a high-performing, efficient and accountable organisation.*



# BUILDING ONE WORLD-CLASS HEALTH SYSTEM FOR THE GOLD COAST

## We strive to:

Develop a comprehensive, high-performing primary care sector.

Integrate and coordinate care by developing innovative models of care with Gold Coast Health and other partners.

Foster participatory healthcare.

Develop the primary care workforce.

## We do this by:

Providing leadership and influence (healthcare and broader social determinants of health).

Establishing efficient, accountable and effective governance and commissioning systems.

Developing digital health and information and communications technology (ICT) infrastructure.

Providing analytics.

## Measured by:

Reduction in potentially preventable hospitalisations.

Self-reported accessibility to timely care.

Self-reported patient health, wellbeing and satisfaction.

Enhanced skills and knowledge through evidence-based education and training.

Self-reported workforce job satisfaction.

Health cost per capita.

Data accuracy and integrity.

Adherence to Royal Australian College of General Practitioners (RACGP) indicators.

## SUCCESS IS ACHIEVED WHEN:

- ⊕ People are healthier and take responsibility for their own health.
- ⊕ People stay well in their own homes and communities.
- ⊕ People with complex illness have improved health outcomes.
- ⊕ There is an integrated health system across the Gold Coast.
- ⊕ There is strong clinical leadership, capacity and innovation in the Gold Coast primary care sector.
- ⊕ We have strong partnerships which facilitate service improvement.





# THE GOLD COAST'S PRIMARY HEALTH PROFILE

**606,291**  
residents

79,284 youth 15-24

111,149 children 0-14

317,691 adults 25-64

98,177 65+



**197**  
general practices



**810** general practitioners (GPs)



**38.3**  
average age of  
Gold Coast  
residents

**9,501**  
residents identify  
as Aboriginal and  
Torres Strait  
Islander people

**90%**  
of GP visits are bulk-billed

**67,858**  
residents were born in non-  
English speaking countries –  
primarily China, Japan, India,  
Philippines and South Korea

**77.6%**  
of adults saw a GP in  
the last 12 months

**85%**  
of people over  
45 assessed their  
health as excellent,  
very good or good.

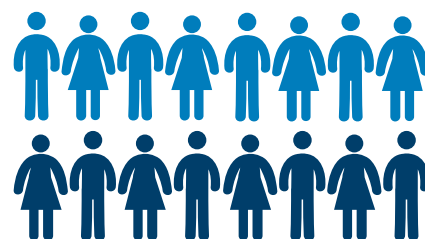


**28.9%**  
of adults saw a specialist  
in the last 12 months

**83**  
average life  
expectancy



**6.5**  
GP visits per person  
per year  
National average is  
**5.9**



**50.1%**  
of adults  
reported they were covered by  
primary health insurance

## Sources:

ABS 3218.0, Regional Population Growth, Australia. ABS 3235.0, Population by Age and Sex, Regions of Australia  
ABS, Census of population and Housing, 2016, Aboriginal and Torres Strait Islander Peoples Profile-102  
ABS, Census of Population and Housing, 2016, General Community Profile- G01 and G09

# CHAIRMAN'S REPORT

## Dr David Rowlands

**As we come to the completion of the third year of our organisation 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”.**

Please take the time to peruse this annual report, and I am sure that you will be amazed at the breadth of activity that GCPHN undertakes, and the many organisations that we partner with. Our staff are truly exceptional, and I would like to thank every one of them for their contribution.

We have continued to work closely with the Gold Coast Hospital and Health Service (GCHHS) and with General Practice Gold Coast (GPGC), through the Integrated Care Alliance (ICA). The ICA has engaged with many general practitioners (GPs) and allied health providers in the development of 17 models of care which deal with common medical presentations in the Gold Coast region (for example severe back pain, iron deficiency, and ante-natal care to mention a few). These models of care have been developed with extensive consumer input into all stages of their design. One consistent feature of all models of care was the need for adequate clinical handover. This is required both when the patient leaves primary care and enters hospital care, and when they leave hospital care and return to primary care. The right people need to be informed of the patient's needs, at the right time. We will know that we have gotten it right when the patient's experience is of “one system”. When they do not realise that they have moved from a Commonwealth-funded primary care sector, to a State health-run hospital sector, and back to the primary care sector. When their journey through the health system is seamless, we will have achieved our goal!

This year we have also begun to engage with the private sector on the topic of adequate clinical handover. We have done this again with our relevant partners, GPGC and the Gold Coast Medical Association (GCMA). We have had several constructive meetings with the senior executives and clinical leads of the major private hospitals

on the Gold Coast. Common ground was easily found, and there is a consistent desire for quality care to benefit our patients, particularly through adequate clinical handover into, and out of, hospital care. The group have committed to ongoing engagement and improvement in this area.

The extension of our funding deed for a further three years has ensured that GCPHN is seen as a long-term partner in ensuring the quality of health care delivered to Gold Coast residents. It assures our partners that the organisation is here for the long-term, and it assists in

staff retention and morale.

It has been an honour and a privilege to Chair the Board of GCPHN. Every one of my fellow directors is outstanding. This year Dr Sue Gardiner retired from our Board. Sue was a foundation director of the company and her counsel has been invaluable to the Board over the many years of her service. Whilst Sue's retirement will be a great loss to the organisation, it has given us the opportunity to welcome Dr Lisa Beecham. Lisa is the immediate past president of GPGC and also brings a wealth of experience to our Board.



*“I am sure that you will be amazed at the breadth of activity that GCPHN undertakes, and the many organisations that we partner with.”*



# CEO'S REPORT

## Matt Carodus

**Three years ago Primary Care Gold Coast commenced its transition to a Primary Health Network, and a commissioning organisation. These three years have seen enormous organisational change, capability development of our staff, and implementation of multiple new systems to enable us to perform these functions more efficiently.**

In this update I am very pleased to report on the success of this transition, the hard work of our staff, new services delivered to the people of the Gold Coast and the support, and involvement of the community to enable us to achieve these.

With the recent commissioning of the Severe and Complex mental health services, Gold Coast Primary Health Network (GCPHN) has now commissioned mental health services along a stepped care continuum, from low intensity, to more complex care, to ensure that people get the right care at the right time.

This involved considerable needs assessment, co-design and procurement supported by members of our community, both health and community services staff from a broad range of organisations, and as importantly, people within the community with an interest and passion for improving the health of the Gold Coast. Over 500 people were involved in the designing of the severe and complex mental health services alone.

Throughout this period we have continued to support general practices. High numbers of new general practitioners (GPs) and the opening of many new practices over this period has challenged us to work more efficiently to meet changing needs.

The tiered approach to practice support has been successful and mirrored in most primary health networks nationally.

In April, GCPHN was particularly pleased to receive a further three year funding Deed from the Commonwealth, which will enable us to deliver existing and new services to the community. Over the next three years our capability development will focus on the development of better systems, and capability for the monitoring, evaluation and improvement



*“These three years have seen enormous organisational change, capability development of our staff, and implementation of multiple new systems to enable us to perform these functions more efficiently.”*

of commissioned services, to ensure they continue to meet community expectations.

I would again like to recognise and thank our staff and the many people in the community who have contributed to the development of our programs. Without their advice and experiences we would not be able to tailor services to meet the needs of our community.

# GOVERNANCE

## GCPHN Board

Gold Coast Primary Health Network (GCPHN) is governed by a diverse board with extensive experience across primary healthcare and community. They have a broad ranging skill base that fuels the forward-thinking, people-centred culture at GCPHN.

**1. CHAIR: DR DAVID ROWLANDS**

MB, BS (Qld), GAICD, General Practitioner

**2. DEPUTY-CHAIR: DR ROGER HALLIWELL** MBChB, BHB, MBA, FRACGP, Dip A&E Med and GAICD, General Practitioner.

**DIRECTORS:**

**3. PROFESSOR JULIE-ANNE TARR**

PhD(UQ), LLM(Monash), JD(Cornell), BA(Wisc), GAICD

**4. KIERAN CHILCOTT**, B. Edu, D. Management, Cert IV Training, Business, Project Management and Mental Health

**5. VICTORIA BEEDLE**, BA (Hons), Dip M, MAICD

**6. LINDA TAYLOR**, Dip App Sc (Nursing), BN, MN, Dip Lead and Man, Cert IV Training, MAICD

**7. DR SUE GARDINER**, MBBS, DFFP, MRCGP, FRACGP



## ADVISORY GROUPS

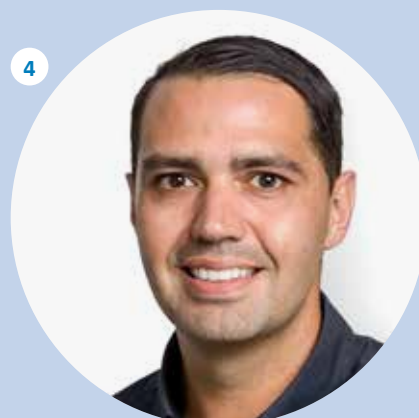
Gold Coast Primary Health Network (GCPHN) utilises advisory groups to assist the Board with its decision making, ensure local services are targeted, appropriate, relevant and meet the needs of both health providers and health consumers. GCPHN coordinates two advisory boards, a Clinical Council and a Community Advisory Council to provide consumer and clinical advice and expertise.

### Clinical Council

The Gold Coast Primary Health Network (GCPHN) Clinical Council meets quarterly and its membership includes general practitioners (GPs), allied health professionals, non-government organisations and hospital, and Indigenous representatives. This year the council expanded its membership to include pharmacy, psychology and psychiatry.







## Community Advisory Council

The Gold Coast Primary Health Network (GCPHN) Community Advisory Council is an influential body that ensures decisions, investments and innovations of GCPHN are appropriately person-centred, cost effective, locally relevant and aligned to local care experiences and expectations. Its membership reflects the broader Gold Coast community and includes people from different backgrounds, education levels, experiences and areas of the Gold Coast.



# MENTAL HEALTH – introducing a stepped care continuum for more accessible and coordinated mental health

The mental health needs of the people of the Gold Coast are diverse, so Gold Coast Primary Health Network (GCPHN) commissioned flexible and responsive stepped-care services to ensure people get the right level of care at the right time.

During the year, this culminated in the launch and delivery of a number of new programs and continuation of existing programs for:

- Severe and complex mental health services – Plus Social Program and Partners in Recovery
- Alcohol and other Drugs (AOD) services – AOD Community Based Treatment Services, Complex Needs Assessment Panels (CNAP) Drug and Alcohol 35+
- Low-intensity mental health services – New Access coaching, Health and Wellbeing groups
- Moderate-intensity mental health services – Psychological Services Program
- Suicide prevention – Lotus Program
- Aboriginal & Torres Strait Islander Mental Health Services – Kalwun Aboriginal Medical Service Social Health Team, Krurungal Partners in Recovery and Alcohol and other Drugs (AOD) Community Support Service
- Youth mental health services – headspace Primary, headspace Youth Early Psychosis Program (HYEPP) and Expanded Horizons.

GCPHN commissioned these services across the stepped care continuum to increase access and coordination of mental health support. It provides people with a single point of entry and helps to ensure they are connected to a service most appropriate for them and are in turn linked to other services as required.

The achievements of our key mental health programs are outlined on the following pages.



*GCPHN was ranked highest nationally for value for money across all psychological services commissioned by PHNs.*





# Plus Social

A new service, Plus Social, was launched in July for people with severe and enduring mental health concerns. It operates on a patient-centred medical home and healthcare neighbourhood model, to support integrated care with enhanced community access. Plus Social replaces the now-decommissioned Mental Health Nurse Incentive Program (MHNIP).

Since November 2015, Gold Coast Primary Health Network's (GCPHN) mental health commissioning team have undertaken a process of continuous consultation with multiple stakeholders including community members, service users, general practitioners (GPs), government organisations and other healthcare and service providers to collaboratively develop the services that are required to meet the needs of the community.

The consultation included broad scale community briefings, consumer journey mapping, one-to-one interviews, industry presentations, working groups and co-design processes and showed clear and consistent themes and findings across all stakeholder groups.

The consultation highlighted the need for the mental health system to improve levels of integration and responsiveness to consumer need and to improve the accessibility of services, particularly for people requiring a level of need for support and care towards the upper end of complexity for the primary care setting.

Over the past two years, GCPHN has commissioned, on behalf of the Commonwealth, services to support

the mental health needs of people with emerging or "mild" challenges with their mental health and wellbeing and people who have more impacting or "moderate" level needs.

With the launch of the Plus Social program this year, Gold Coast community members who are experiencing challenges with severe mental illness, and the complexities that illness can bring, are able to access supports, programs and expert clinical coordination of their care needs. They are also able to access extended hours support in the open drop in space in Mermaid Beach, known as the Hub.

*Gold Coast community members who are experiencing challenges with severe mental illness, and the complexities that that illness can bring, are able to access supports, programs and expert clinical coordination of their care needs.*



# Alcohol and Other Drug Services

Gold Coast Primary Health Network (GCPHN) commissioned Lives Lived Well (LLW) and Queensland Injectors Health Network (QulHN) and Krurungal Aboriginal and Torres Strait Islander service to provide drug and alcohol treatment and support in the Gold Coast region.

After a GCPHN Needs Assessment identified the northern part of the Gold Coast as an underserved area, a new outreach model with a service hub in Nerang was developed to improve access to treatment for this part of the community.

LLW and QulHN provide treatment and support via outreach in the community, Nerang hub, at other service providers and in-home visits. The specialist drug and alcohol teams support clients to reduce the harm from their substance use and connect with other services that are needed for that person's care through brief intervention, case management, counselling and relapse prevention. Krurungal Aboriginal and Torres Strait

Islander Corporation for Welfare, Resource and Housing delivered community alcohol and other drug (AOD) treatment support services to the Aboriginal and Torres Strait Islander community across the Gold Coast. Krurungal worked closely with AOD professionals at Kalwun Health Service who provided clinical support for the individuals.

The flexibility of the service model for Aboriginal and Torres Strait Islander Services enables workers to support clients across a range of needs and complexity to overcome barriers such as transport to appointments and emergency relief vouchers for food.

## ACHIEVEMENTS

- 1,050 clients commenced treatment.
- Providers operate at capacity with a high demand for services.
- 60 per cent of clients sought treatment for ice, with 30 per cent relating to alcohol access.
- The Lives Lived Well Youth Outreach Program worked from headspace at Southport each week, providing specific drug and alcohol treatment to young people.

- There was strong coordination across all programs to ensure continuity of care and complex case reviews.
- 95 per cent of clients rated their satisfaction with both QulHN and LLW services as 'satisfied' or 'highly satisfied'

## PARTNERS:

- Lives Lived Well
- QulHN
- Krurungal Aboriginal and Torres Strait Islander Corporation
- Gold Coast Health
- Kalwun Development Corporation
- Gold Coast Drug and Alcohol treatment services
- Queensland Network of Alcohol and Other Drug Agencies (QNADA)
- Community members and service users
- Insight / Dovetail
- Regional Integrated Mental Health and Alcohol and Other Drugs Advisory Group
- GCPHN Multidisciplinary Clinical Advisory Group for Mental Health and AOD



Photo courtesy of Kalwun Development Corporation

# New Access

The pressure of modern-day living has led to an increase of mild-mental illness in the community. Problems such as stress, anxiety and/or depression are addressed by Gold Coast Primary Health Network (GCPHN) through a variety of programmes including one-on-one coaching and group-based therapy.

The NewAccess Program, developed by beyondblue, was launched in June 2018. The program offers participants (aged 16 and above) up to six coaching sessions (via phone, skype or in person) to help participants achieve recovery and become equipped with self-management skills to maintain ongoing wellbeing. If participants are identified as requiring a higher intensity level of support, there is a framework in place to 'step up' to the most appropriate level of intervention.



*“New Access is another useful tool to assist us in addressing our patient’s mental health needs and fills a gap in current service provision.”*

Dr Sue Gardiner, General Practitioner, Runaway Bay

## ACHIEVEMENTS

- 50+ active participants since June
- 200+ service contacts with clients
- beyondblue is supporting the implementation of the program.
- Awareness in the region is increasing and there is positive engagement with other providers delivering services across the stepped-care continuum.

# Health and Wellbeing Groups

Gold Coast Primary Health Network (GCPHN) has commissioned a variety of health and wellbeing groups, to support balanced, social, emotional and mental wellbeing. These free, small groups explore techniques for stress management, mindfulness, motivation and positive relationships over a six-week program. 2017/2018 courses included:

- Positive Psychology and Wellbeing Group- advanced stress management techniques, embracing personal relationships, exercise, yoga and peace of mind activities, nutritional medicine coaching, motivation and personal power strategies.
- Complete Health and Community Assistance Program – supports people from other countries who are experiencing stress, anxiety and depression.
- Be.Well – a health and wellbeing group to support cultural diversity and social and emotional wellness, offering

practical ideas for managing stress and mindfulness and positive relationships.

- Complete Health Program- for people experiencing drug/alcohol use, stress, anxiety and/or depression.

## ACHIEVEMENTS

- 97 clients
- 13 low-intensity group programs.
- 80 per cent attendance rate surpassing target of 75 per cent.
- Majority of attendees reported they were not experiencing any significant feelings of distress at the end of the six-eight week program.

## FACILITATOR OBSERVATIONS

- Participants reported using mindfulness strategies to reduce stress and improve functioning.
- Participants reported less stress, less anxiety, felt reassured that others had or were experiencing similar situations, fewer feelings of isolation and aloneness.



- Participants felt more social, felt more in control, felt informed and more productive in their personal lives as well as in the workplace, experienced a greater sense of value for themselves and their roles in life.
- Each week the participants were observed to not only understanding the information but also were applying it to their lives.

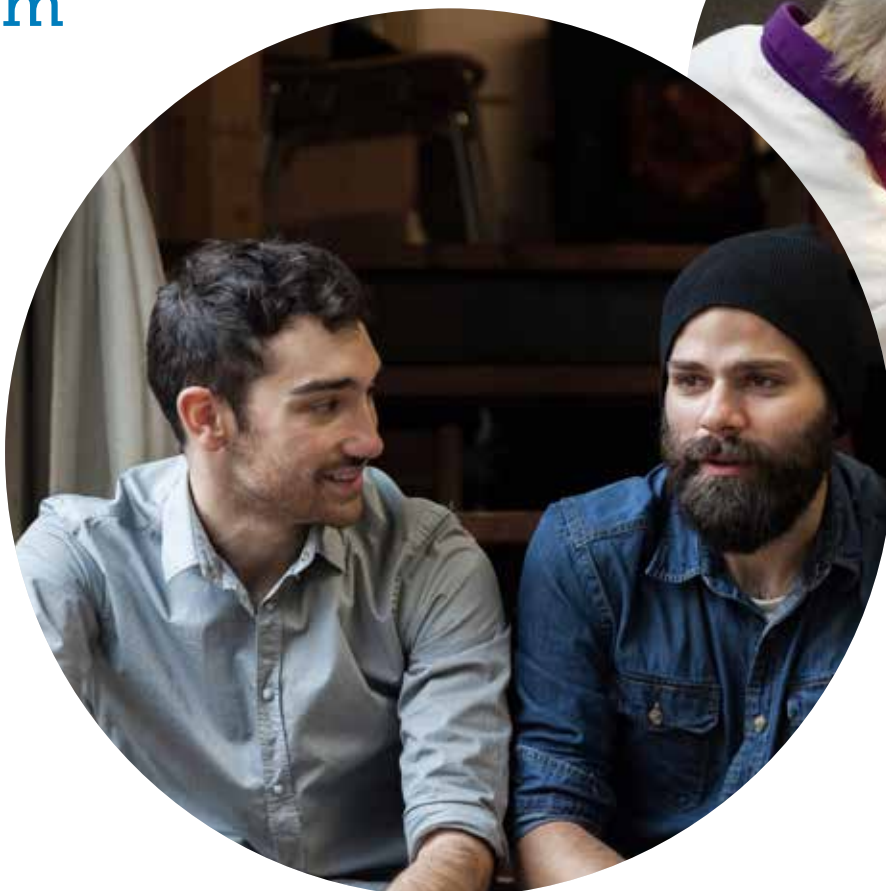


# Psychological Services Program

The Gold Coast Primary Health Network (GCPHN) Psychological Services Program (PSP) provides short-term psychological interventions for financially disadvantaged people with non-crisis, non-chronic, moderate mental health conditions, or for people who have attempted, or are at risk of suicide or self-harm.

## KEY RESULTS

- 5,004 sessions provided to 913 people.
- The proportion of referrals were:
  - 42.1 per cent (384) Children
  - 38.9 per cent (355) Suicide Prevention
  - 2.2 per cent (20) Homeless
  - 7.2 per cent (66) Perinatal
  - 3.8 per cent (35) Aboriginal and Torres Strait Islander
  - 2.0 per cent (18) Culturally and Linguistically Diverse (CALD)
  - 3.8 per cent (35) Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex, Asexual, Pansexual + Community (LGBTIQAP+)



## Suicide Prevention – Lotus Program

The Lotus Suicide Prevention program is a non-clinical support and transition service for people who may have recently attempted suicide or are at risk of suicide. These people will have presented at either Robina or Gold Coast University Hospitals or may be an inpatient being discharged from one of these facilities. The Lotus team is located within both hospitals and has strong relationships with the hospital acute care team for timely patient care.

## KEY RESULTS:

- 240 referrals.
- 65 per cent program acceptance rate (the remainder were connected to more relevant services).
- 92 per cent of participants exited the program with all of their needs met.



## Youth Mental Health Services

Gold Coast Primary Health Network (GCPHN) has two commissioned Youth Mental Health Services: headspace Primary provides early intervention mental health services while the headspace Youth Early Psychosis Program (hYEPP) supports young people at risk of or experiencing a first episode of psychosis.

## ACHIEVEMENTS

- 404 young people referred to hYEPP.
- 150 of those referrals commenced hYEPP.
- Remainder of referrals were connected to appropriate services including headspace, primary health providers and hospital and health services.
- Wait times averages have reduced with most clients being attended to within two weeks of referral.



## Health Services for the Homeless

Gold Coast Primary Health Network (GCPHN) commissioned podiatry and social work services for homeless residents at St John's Crisis Centre, Surfers Paradise.

The work is delivered by supervised students from Griffith University and Southern Cross University to people who attend St John's for meals. The services provided opportunities for students how to work in a non-clinical environment and how to deal with patients with different needs, socio-economic backgrounds and mental health issues.



## Partners in Recovery

In 2018, the focus of the Partners in Recovery (PIR) program shifted towards transitioning eligible participants to the National Disability Insurance Scheme (NDIS), whilst still supporting people with complex needs to achieve their recovery goals.

The program aims to better support people with severe and persistent mental illness with complex needs, and their carers and families. It achieves this by having services and supports from multiple sectors they may come into contact with, and could benefit from, work in a more collaborative, coordinated and integrated way.

During the year Gold Coast Primary Health Network (GCPHN) worked collaboratively with the PIR consortia and Gold Coast Health to ensure that all PIR participants were supported to apply for the NDIS with many Access Request applications submitted to the National Disability Insurance Agency (NDIA) before the official 'live' date of changeover.

As of 30 June 2018 there were:

- 208 active participants
- 81 applications were submitted to NDIS to test eligibility
- 57 of which eligibility decision was still pending
- Seven were found as eligible for the NDIS
- Seven were found not eligible

### ACHIEVEMENTS

- 30 occupational therapy (OT) assessments were completed to identify areas of psychosocial disability.
- 31 people identified for Health of the Nation Outcome Scales (HoNOS) function impact assessments.
- Launched new PIR website with improved usability and functionality, incorporating a NDIS tab that services both potential consumer/participants and service providers.
- Three PIR participant NDIS readiness workshops were held. Feedback from attendees was positive and verified the PIR approach, facilitation and workshop design having desired impact.
- Increases in number of clients identified as Aboriginal and Torres Strait islander attributable to the employment of an Aboriginal male and female facilitators.
- Results in the culturally and linguistically diverse (CALD) sector are similarly attributable to introduction of CALD facilitator.

### PARTNERS

- Multicultural Communities Council Gold Coast (CURA Community Services)
- Mental Illness Fellowship Queensland (MIFQ)
- Gold Coast Primary Health Network (GCPHN – lead organisation)
- Krurungal

# TURNING PAIN INTO GAIN –

## avoiding hospital admissions and reducing emergency department presentations

The highly successful Turning Pain into Gain program has been heralded as “life-changing” by Gold Coast participants who have learnt different strategies to manage persistent pain with reduced reliance on medication for pain management, reduced requirements for emergency care and the reduction of avoidable hospitalisations.

A Griffith University evaluation of the program for 2016-2017 demonstrated this success:

- The number of patients on >1 opiates reduced by 23 per cent during the 12-month program
- Codeine usage decreased by 100 per cent
- Usage of adjunct antidepressants increased by 32 per cent (in line with recommendations for the treatment of long term pain conditions).

### ACHIEVEMENTS:

- 287 patients were referred, assessed and commenced the program. Completion rate was 73 percent (209 people).
- 238 participants were referred to the Turning Pain into Gain program by general practitioners.
- 20 participants joined the program due to referrals from private specialists.
- 14 participants joined the program via the HealthyGC website.
- Four participants joined the program due to referrals from other hospital health departments.
- Six pain programs were completed.
- Three refresher programs were completed.
- Wait time to access the program are small with all patients given access within four to six weeks of the referral.

### PARTNERS:

- Gold Coast Health
- General practitioners
- Allied Health
- Pain Management Research Institute
- Supporting Kids in Pain

### JADE'S STORY:

*“As a young person living with chronic pain and illness for so long, it has been a constant fight to even get basic care or to have my symptoms taken seriously. Turning Pain into Gain was the first place to actually acknowledge my pain, inflammation and hypermobility and connected me with people who could help. The facilitators of the pain program believed my pain and proactively helped me manage it preventatively, not just reactively. I’m now living independently and pursuing my PhD in Medicine, which is something I’ve wanted to do for many years. I’ve also started to referee roller derby and I’ve even been back on skates myself a few times this year. I never thought I’d be able to do anything like that ever again, after more than 20 years of pain.”*

*“Turning Pain into Gain was the first place to actually acknowledge my pain, inflammation and hypermobility and connected me with people who could help.”*





# INTEGRATED TEAM CARE – improving health care coordination for people with long-term chronic health conditions

The Integrated Team Care (ITC) program has been improving healthcare coordination for people in the Gold Coast's Aboriginal and Torres Strait Islander community with long-term chronic health conditions.

ITC is provided by a team of Indigenous Health project officers, Aboriginal and Torres Strait outreach workers and care coordinators who aim to close the gap in life expectancy by improved access to culturally appropriate mainstream primary healthcare services for Aboriginal and Torres Strait Islander people.

Services are commissioned through Kalwun Health Services to engage and train general practices to be culturally competent as Indigenous service providers. The number of registered practices is at an all-time high with 83 per cent of accredited general practices (128) registered for the Practice Incentive Program (PIP) – which is significantly higher than the national average of 45 per cent.

The program also employs care coordinators who provide support to clients as well as transportation for them to attend their medical appointments. In the last 12 months, 549 transport services were provided to patients.

## ACHIEVEMENTS:

- 205 patients
- 9,872 care coordination services provided
- 7,975 supplementary services provided
- 3,959 clinical services provided
- Establishment of a Yarning Circle to seek participant feedback

David\* a 77-year-old male with diabetes was first referred to Indigenous Outreach Workers (IOW) in 2015 by staff at Gold Coast University Hospital (GCUH), who had concerns about David attending future follow-up medical appointments. Upon a follow-up home visit IOW noticed that both of David's legs were red and swollen. IOW helped David visit a general practitioner (GP) before he was referred to GCUH Vascular Clinic. Upon discharge, IOW organised referral to a Care Coordination Supplementary Services program which helped coordinate home nursing services

and follow-up wound care treatments. David's Vascular Clinic reviews have now reduced from fortnightly to six-monthly due to continual good management. IOW raised concerns around David's driving capacity and was referred to optometry and occupation therapist assessments, which unfortunately revealed he was unable to maintain his licence. As a result of this outcome, a mobility scooter was purchased and registered in David's name and he now has independence and attends his medical appointments by himself. He now does his own shopping, attends social activities and only calls IOW occasionally. Since being put on the ITC program David has only been admitted to hospital once in the last three years.

(\*Name changed)

## PARTNERS:

- Kalwun Health Services
- Karungal 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



# GREATER CHOICE FOR AT HOME PALLIATIVE CARE – identifying the Gold Coast's palliative care needs

Building on the success of the residential aged care facilities (RACF) project, Gold Coast Primary Health Network (GCPHN) brought together a broad range of people to develop the Greater Choice for At Home Palliative Care (Greater Choice) program.

Greater Choice is a new initiative to identify the palliative care needs of the local community. The Greater Choice program supports people with a life-limiting condition by improving choice and quality of care and by refining coordination and integration of palliative care across primary, secondary, tertiary and community health services.

GCPHN has been meeting with stakeholders in the provision of palliative care; our Older People and Palliative Care Senior Leadership Groups, community service providers and the general community and facilitated design workshops to identify the gaps and service directions for palliative care and older people living in residential aged care facilities.

## THE WORKSHOPS IDENTIFIED:

- RACFs have high numbers of palliative care patients.
- Current systems are not always established for the provision of clinical coordination of End of Life (EOL) care between providers.
- Care coordination and support to General Practice to be the centre of care where possible.
- Carers require support to ensure they don't burn out.
- There is the opportunity to increase the uptake of advanced care plans.
- All providers should be skilled and competent in delivering high quality palliative and EOL care.

GCPHN will be working closely with aged care service providers, general practitioners, the Gold Coast Hospital and Health Service and other stakeholders to support continuous quality improvement based on best practice guidelines, which in turn supports the development of an environment where these skills and attitudes can be maximised.

## PARTNERS:

- Integrated Care Alliance (established in partnership between Gold Coast Health and GCPHN).

*The Greater Choice program supports people with a life-limiting condition by improving choice and quality of care and by refining coordination and integration of palliative care across primary, secondary, tertiary and community health services*



# AGED CARE – coordinating and improving advance care planning

Advance care planning is a process that allows adults to make decisions about their future healthcare in the event that they are not able to make and/or communicate their healthcare choices. As advance care planning has been shown to reduce stress and anxiety for people and their families as well as navigate improved end-of-life care. Gold Coast Primary Health Network (GCPHN) worked with seven residential aged care facilities (RACFs) to improve the uptake of advance care plans by residents from 13 per cent to 77 per cent.

The program was a tremendous success with three of the participating RACFs

recording 100 per cent participation by residents.

## ACHIEVEMENTS:


- 547 advance care plans
- 704 residents engaged
- 32 general practitioners (GPs) engaged
- Six service navigators

GCPHN's approach to advance care planning education was based on messages of empowerment.

## PARTNERS:

- Bolton Clarke Galleon Gardens
- Opal Leamington Aged Care
- BlueCare (Labrador Gardens and Woodlands)
- Hillview House Aged Care Facility
- Villa Serena

- DePaul 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



*The program was a tremendous success with three of the participating RACFs recording 100 per cent participation by residents.*



# WORKFORCE – access to the latest information for best patient care

The development of the primary healthcare workforce with training, education and communication is a priority of Gold Coast Primary Health Network (GCPHN) to ensure health professionals have access to the latest information for the highest level of patient care.

During the year 88 educational events were held for nurses, general practitioners (GPs), administration staff, allied health professionals, practice managers and pharmacists from 536 organisations.

Key topics covered included chronic wound management for practice nurses, Partners in Recovery (PIR) workshops on the National Disability Insurance Scheme (NDIS), mental health, primary care nursing, cancer screening, palliative care and My Health Record expansion.

- 1,152 people attended education and training events hosted by GCPHN.

Attendance breakdown at GCPHN education events:

- 311 nurses
- 218 general practitioners
- 139 allied health professionals
- 149 administration staff
- 68 practice managers
- 46 pharmacists
- 63 consumers
- 158 other professions not listed

*The development of the primary healthcare workforce with training, education and communication is a priority of the Gold Coast Primary Health Network (GCPHN)*



# GENERAL PRACTICE LIAISON UNIT – bridging hospital and General Practice

The main aim of the General Practice Liaison Unit (GPLU) is to help improve the care of patients in the Gold Coast region through effective clinical handover and communication and greater integration and innovation.

During the year, the unit welcomed additional team members, expanded its programs of work and served on more than 30 committees and working groups. GPLU have seen improved communication and collaboration between Gold Coast Health (GCH), Gold Coast Primary Health Network (GCPHN) and General Practice and improvements in e-referrals and the completion rates of Electronic Discharge Summaries (eDS).

## ACHIEVEMENTS:

- Resolving all (more than 300) clinical queries from clinicians within the agreed time frames.
- Raising awareness of the importance of clinical handover through educational events, by participating in related committees and working groups and by successfully proposing that 'same day' discharge documentation should be a GCH policy.
- Providing advice and practical support to the teams implementing a new referral continuation process in order to comply with Queensland's Specialist Outpatient Services Implementation Standards (SOSIS).
- Hosting the 7th Annual Women and Children's Health Symposium, an interdisciplinary educational event with 17 speakers and more than 100 primary care clinicians.
- Re-designing all referral templates to GCH specialist services in response to feedback from General Practice and hospital clinicians to improve their clarity, relevance and to align them with Queensland Clinical Prioritisation Criteria.
- Expanding the GP with Special Interest (GPwSI) model of care to seven clinical specialties.
- Providing opportunities for more than 400 patients to improve their wellness and reduce potential risks prior to

elective surgical procedures through the Get Set for Surgery initiative.

- Designing and implementing a 'Direct Access to Colonoscopy' model of care, which significantly reduced wait lists for this service.
- Supporting the successful implementation of 'Early and Quick', a Healthcare Improvement Unit funded initiative that improves the care of children with suspected developmental disorders.
- Contributing to the different work streams of the Gold Coast Integrated Care Alliance to reduce avoidable hospital admissions and improve the safety and quality of care provided to complex and frail patients.

## PARTNERS:

- Gold Coast Primary Health Network (joint funder)
- Gold Coast Health (joint funder)
- General Practice Gold Coast (GPGC)
- The Healthcare Improvement Unit, Clinical Excellence Division, Queensland Health (non-recurrent funding of several projects)

*The patients have been great. They are really excited with the new access to the Hepatology Clinic by the GP with Special Interest (GPwSI) initiative and the resulting access to direct acting antivirals. They are very appreciative to be offered this therapy.*

*Working in Specialist Outpatients has given me direct access to consultants to ask questions and double check management, which is much harder to access in General Practice. Having GPwSI in hospitals also gives hospital clinicians insight into the way GPs work. GPs are skilled clinicians who assess and manage patients competently, efficiently and safely, referring the patient for specialist advice when and where necessary.*

*Dr Ingrid Francis, Hepatology GPwSI*



# PRACTICE SUPPORT

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

**Tier 4** – Moving from disease-focused topics to analysis of data from a population health perspective to inform practice-based service provision.

**Tier 3** – Moving from better data recording to facilitated Quality Improvement activities. Generally a disease-specific focus to implement process and system changes to support improving patient outcomes.

**Tier 2** – Data extraction and bi-monthly data reports aimed at improving data quality.

**Tier 1** – Engagement with practices through communication, access to resource 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

- Four quarterly generic data feedback reports were distributed with focus areas of:
  - Diabetes (distributed to 129 general practices)
  - Accreditation (distributed to 141 general practices)
  - Annual benchmark report – now automated to improve the accuracy of the data and the efficiency of distribution (distributed to 141 general practices)
  - Digital Health (distributed to 141 general practices)
- Increased the number of practices participating in the tiered approach of practice support from 132 to 141, whilst assisting with the development of a practice support model that supports population health management.
- Introduction of a help desk model that supports triaging of practice support calls through a single point of contact,

distribution of resources and coordination of the quarterly Chilli database update.

- GCPHN provided direct peer-to-peer support for GPs within General Practice on the Gold Coast.
- Increased number of practices, from 118 to 141, accessing a Clinical Audit Tool and submitting data to GCPHN for population health planning purposes.
- Increased number of practices participating at a tier 3 level from 34 to 41.

- Across the chronic disease focus areas, the greatest improvement was seen in Chronic Kidney Disease (CKD) metrics for the Indigenous population. The importance of monitoring data and implementing evidenced-based care has been a stronger focus across tier 3 practices and is a focus of data demonstrated at general practitioner (GP) engagement meetings.





# CLINICAL PLACEMENTS

Gold Coast Primary Health Network (GCPHN) is instrumental in helping shape the future of the medical workforce, through partnering with Griffith and Bond Universities to help train the next generation of general practitioners (GPs) and practice nurses and placing medical and nursing students in general practices around the Gold Coast.

According to student evaluations the majority of students considered their GP clinical placements to be one of the most enjoyable, useful and influential experiences of their course. The program is so successful, that the Gold Coast graduates moving into General Practice is higher than the national average.

## KEY RESULTS

### MEDICAL PLACEMENTS

- 189 final year medical student placements.
- 286 introductory medical student placements.
- 3,658 placement days in General Practice for medical students. An increase of 15 percent from last year.
- Medical students were placed with approximately 126 practices and over 218 different GPs.

- 74 optional specialist placements.
- 92 per cent rated their supervisor helpful and instructive.
- 88 per cent reported that they felt confident to work in General Practice.
- 74 GPs attended GP Trainer Workshops – the highest attendance figures in GCPHN history.
- 93 per cent of the GPs rated the sessions “entirely relevant” to their practice.

### NURSE PLACEMENTS

- 130 second and third year nurses from Griffith University were placed with registered nurses in General Practice, a 4.8 percent increase on last year.
- Nursing students were placed across 18 general practices.
- 13 attendees at nurse preceptor workshop including five who were new to the program.

*“I believe teaching is not a one-way process – we learn a lot from the students and it updates my knowledge frequently. When I have to review things, this is also an update for me and part of my continuous professional development.”*

*Dr Praveen Veeramachineni, Ormeau Medical Centre*

*“I enjoy seeing people and then I get to see them again next week to see how they are going. I love talking to people, talking about their lives. I have been really lucky – always felt involved and part of the team. I feel included and the whole practice is involved. They will come to see me and say I’ve got a BCC to look at, here’s an ulcer that needs dressing. You learn how to do it.”*

*Kate Schmidt, Medical Student*



*“I believe teaching is not a one-way process – we learn a lot from the students and it updates my knowledge frequently.”*



# DIGITAL HEALTH

Gold Coast Primary Health Network (GCPHN) continued its commitment to digital health so that health information can be shared securely online to support General Practice to deliver high quality, safe, evidence-based care to their communities.

- 141 general practices (85 per cent) formally signed a data exchange agreement and provided data via PenCS Clinical audit tool.
- Enabling secure electronic communication between healthcare providers, including electronic referrals.
- Providing access to online portals such as the Queensland Health Viewer to access patient's clinical information.

*Gold Coast Primary Health Network (GCPHN) continued its commitment to Digital Health so that health information can be shared securely online.*

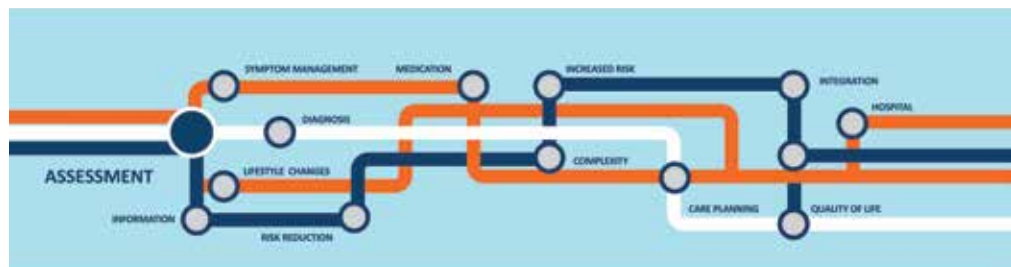


## PRACTICE-BASED POPULATION HEALTH MANAGEMENT – PRIMARY SENSE™

While General Practice may know the health needs of patients who attend frequently, they may not know the status of those patients who are more infrequent attenders.

This is especially important for those with increasing complexity or those who see more than one general practitioner (GP). Primary Sense™, a Gold Coast Primary Health Network (GCPHN)-developed clinical audit tool, incorporates the John Hopkins ACG® System Risk Stratification tool to identify those patients most at risk of poor outcomes so GPs can better manage their health.

Primary Sense analyses key data notifying the treating GP on issues such as:



- An abnormal test result that could cause harm.
- Mixing medications that could cause harm.
- A diagnosis that may have implications for current treatment.

During 2018-2019 Primary Sense™ will be utilised in practices to support a proactive approach to support high risk patients.

**For example:** Marie has recently moved to a new practice where the GP suggests she take a medication to help prevent a heart attack. Marie forgets to tell the GP that she had a stomach ulcer in the past. Primary Sense™ has found her history from her previous practice, and while prescribing the heart medication, the GP is alerted of the stomach ulcer and may need to prescribe a second medication to protect her.

# AFTER HOURS – ensuring Gold Coasters receive the right care, in the right place, at the right time.

## EMERGENCY DEPARTMENT ALTERNATIVES

Gold Coast Primary Health Network (GCPHN) in partnership with Gold Coast Health developed an Emergency Department Alternatives educational campaign to inform people of their options for medical care and reduce preventable hospitalisations by leaving hospital emergency departments free for critically ill or injured people.

### The campaign included:

- Dedicated website
- Targeted online advertising
- Digital promotion in Gold Coast pharmacies and medical centre waiting rooms
- Promotional collateral including flyers, posters and fridge magnets
- Media relations campaign
- Social media campaign
- Radio advertising and sponsorship

### ACHIEVEMENTS:

- Estimated reach through online advertising was 338,220.
- Estimated reach via digital screens in general practices and pharmacies was 137,060.
- Estimated reach via printed collateral in general practices and Robina and Gold Coast University Hospitals emergency departments was 25,000.
- Estimated reach by promoted social media was 18,792.
- Estimated reach by radio sponsorship across a number of age demographics was approximately 142,000.
- Estimated reach via press releases and free media was over 300,000.

*Estimated reach via printed collateral in general practices and Robina and Gold Coast University Hospitals emergency departments was 25,000*





# InterACT – After hours support for residential aged care facilities

Gold Coast Primary Health Network (GCPHN) launched its After Hours Hospital Avoidance Interact Program in March 2018, as a single point of contact for residential aged care facility (RACF) staff to communicate with Gold Coast Hospital and Health Service (GCHHS) and reduce the number of hospital presentations and admissions.

Early indicators of success have seen after-hours clinicians attending RACFs on the weekend to provide care for clients in palliative care and support for families as their loved one reaches the end of their life. This innovation, in collaboration with general practitioners (GPs) with a Special Interest in Palliative Care has been welcomed by patients and their families.

The program has also been successful in aiding early discharge from hospital with clinical handover to InterACT Nurse Practitioners in the RACFs.

## ACHIEVEMENTS:

- 370 patients supported by the service
- Hospital avoidance for 21 patients who were seen in the RACF

*This innovation, in collaboration with GPs with a Special Interest in Palliative Care has been welcomed by patients and their families.*



# Wound Management – engaging and supporting the Gold Coast’s general practices

Gold Coast Primary Health Network (GCPHN) commissions services to upskill the General Practice workforce to provide improvements in patient care and keep people out of hospital.

The Chronic Disease Wound Management Project aims to assist with the education and training requirements of general practitioners (GPs) and nurses responsible for the care and management of patients with chronic or complex wounds in the General Practice or residential aged care setting.

Nurse participants attended evening education sessions with a focus on wound assessment and management of patients with a chronic or complex wound modelled on the Australian Wound Management Association (AWMA) wound management module framework. Two practical based workshops on compression therapy and wound dressings and products were also offered to compliment the education sessions.

GPs participated in another Chronic Disease Wound Management Active Learning Module (ALM) which covered the impact of wounds, the wound healing process, patient and wound assessment, aetiology of wounds, wound bed preparation, management of the Diabetic foot and managing common acute wounds. This program is endorsed by the Royal Australian College of General Practitioners (RACGP) as a category one ALM.

## **PARTICIPATION BY:**

- 26 nurses
- 17 general practitioners
- 20 general practices
- Six residential aged care facilities

## **PARTNERS:**

- Wound-busters Pty Ltd
- General practices
- Residential aged care facilities



*This program is endorsed by the Royal Australian College of General Practitioners (RACGP) as a category one Active Learning Module.*

# IMMUNISATION – transitioning from a state register to the national Australian Immunisation Register

Immunisation, as the safest and most effective way to protect against many diseases, is a strategic priority for Gold Coast Primary Health Network (GCPHN). In collaboration with the Gold Coast Public Health Unit, GCPHN's immunisation program has focussed on supporting general practices to transition from a state register to the National Australian Immunisation Register (AIR) and implement reminder/recall systems, as well as promoting and supporting immunisation programs within general practices and the broader community.

## IMMUNISATION RESULTS (UP TO DATE 2018)

### All children

12-15 months – 93.1 per cent  
24-27 months – 90.4 per cent  
60-63 months – 92.4 per cent

### Indigenous children

12-15 months – 94 per cent  
24-27 months – 92.8 per cent  
60-63 months – 94.1 per cent

We supported delivery of many education sessions focussed on immunisation and through our website and usual communication channels provided access to resources and information. GCPHN also distributed timely public health messaging regarding potential outbreaks to General Practice.



*Immunisation, as the safest and most effective way to protect against many diseases, is a strategic priority for Gold Coast Primary Health Network (GCPHN).*





# HealthyGC – reliable and up-to-date local health information

Gold Coast Primary Health Network (GCPHN) provides the most relevant and up-to-date information, resources, news and education for health professionals through their website HealthyGC ([www.healthygc.com.au](http://www.healthygc.com.au)). HealthyGC also has an online health services directory, which is one of the most comprehensive online health service directories for the Gold Coast region. The directory was built to enable health professionals and consumers access reliable and consistent information about local health services.

## KEY RESULTS

- For the period of June 2017 to July 2018 the HealthyGC website received 382,721 visits, an increase of 57,010 for the same period of time last year.
- Referral templates have been updated and the new templates communicated to general practitioners (GPs) via publications/ news stories and practice support.
- Website feedback has been overwhelmingly positive and the process for capturing and monitoring this feedback was seen very favourably during the recent Quality Assurance audit.
- Increased the self-authorship of listings within the directory from external organisations and maintained regular contact with website members through direct email and contacting every organisation that haven't updated their listing in over 12 months.

## PARTNERS

- General Practice Gold Coast
- Gold Coast Health
- Local health and community services

## FEEDBACK

*"Thank you, found the website easy and helpful. Great to see you on Facebook."*

Feedback received in February 2018

*"Clear and concise - a pleasure to navigate in this busy and often complicated world."*

Feedback received in August 2018

*"Always find the courses offered relevant and full of current and most necessary information."*

Feedback received in May 2018



# MY HEALTH RECORD

## My Health Record – Community

### ACHIEVEMENTS:

Gold Coast Primary Health Network (GCPHN) has played an integral role in the engagement and education of the Queensland community, informing residents that all Australians will have a My Health Record set up for them, unless they choose not to have one.

GCPHN was selected by the Australian Digital Health Agency (ADHA) as a key delivery partner for community activities across Queensland, with a state-wide Communications Manager and Social Media Manager leading Queensland wide activities. These roles have delivered a state-wide media and communications strategy and a social media strategy and also provided support to all seven Queensland Primary Health Networks (PHNs), to deliver community engagement activities and develop localised promotional strategies.

At a local level, GCPHN staff developed a regional community engagement plan and held local events and activities. These have included major public events through

to presentations with community groups. Particular efforts have been made to engage with vulnerable targeted groups including people with disabilities, chronic conditions, multicultural groups, Aboriginal and Torres Strait Islander peoples and seniors.

A number of local champions have also assisted in promoting key messages to the Gold Coast community.



GCPHN educating  
My Health Record  
Champions.

*“Where is my health,  
before My Health Record?  
The specialist has got some piece  
of it, the hospital has got another  
piece of it, my GP’s got some of  
it, if I see another GP they have  
another piece. It needs to all be  
put into one place, and it is.”*

Melissa, My Health Record  
Consumer Champion





## KEY RESULTS

### Statewide

- A detailed engagement strategy, including events, media, publications and advertising, has had an anticipated reach of more than three million Queenslanders.
- Direct engagement, marketing and communication activities have reached more than 800,000 Queenslanders.
- Queensland social media, via Primary Health Network social channels, has reached nearly 75,000 people through promoted social posts.
- There has been direct engagement with 50 peak health and community organisations across Queensland, to inform their stakeholders about My Health Record.
- GCPHN has initiated media interviews across a number of television, print and radio stations state-wide and developed articles for almost 70 regional newspapers and stakeholder publications.
- GCPHN has presented at more than 50 briefings, conferences and webinars, and helped organise a booth at a number of state-wide events, including the EKKA, which directly engaged more than 3,000 people.
- GCPHN has played an important strategic role at a national level including:
  - influencing national advertising strategies for the Aboriginal and Torres Strait Islander community
  - trialling a sentiment tracking tool, adopted nationally across Australia
  - the organisation of disability forums held across three states, leading to ongoing engagement and education, and supplying 10,000 easy-to-read brochures to people with an intellectual disability.
- Queensland PHN's have been supplied with and have actively promoted My Health Record via their social channels with posts that include consumer stories, more information about the My Health Record system, the features of My Health Record and upcoming events.



At the Pan Pacific Masters Games, directly engaging with more than 1,500 people.



*"I find My Health Record beneficial as I see a wide variety of health professionals including six specialists. Now I have a My Health Record, when I got to the GP I don't have to worry about remembering medications and test results as I know it's available."*

Sandra



## ON A LOCAL LEVEL

- GCPHN has reached 16,779 people through direct engagement and a potential reach of almost 270 000 people from Jan-November 15, 2018, through participation in more than 200 activities and events, including targeted briefings for 'hard to reach' populations.
- The largest event was the Gold Coast Show with direct engagement with more than 800 people, and a potential reach of 130,000 people.
- GCPHN attended disability expos potentially reaching 3,300 people and also had significant engagement with multicultural communities including presentations at Cura, Multicultural Communities Gold Coast, the Filipino festival, Japan and Friends Day, Gold Coast Multicultural Festival, Nepalese Festival and an Islamic event.
- GCPHN engaged with many seniors' groups across the Gold Coast, attending 11 seniors expos and numerous Probus, Lions and Rotary Groups, reaching large audiences.
- GCPHN engaged with local, state and elected officials to distribute information and attend divisional events.
- Ten Gold Coast My Health Record ambassadors were recruited and five of these filmed for national case studies. These champions assisted in the promotion of My Health Record at consumer and provider events. Additional ambassadors for Tasmania were also identified.
- GCPHN has reached over 40,000 people through social media promoted posts via Facebook and Instagram channels.
- Consumer videos and My Health Record stories have had a huge reach via social channels including 1,900 twitter followers.
- Over 25 event posts for My Health Record were included on the GCPHN Facebook page- each post reached between 50-250 people and promoted event posts (such as a Community Briefing) reached 1,700 people.

*GCPHN staff at the Gold Coast Filipino Festival.*



*"When I had prostate cancer, I had to have an operation. Without ringing my GP and the specialist, I wouldn't be able to tell you when I had that operation. My Health Record keeps track of that information."*

Bill

*Presentation to a local Probus group at Robina.*



## PARTNERS/PEAK BODIES ENGAGED

- Queensland peak community and health bodies (almost 50 in all)
- Multicultural, ethnic, migrant services and groups
- Consumer and carer groups
- Aboriginal and Torres Strait Islander networks
- Childcare centres and schools
- Homeless networks
- Youth services
- Local councils
- Mental health/drug and alcohol networks
- Rural and remote communities
- Disability services
- Community health services
- Advocacy services
- Community service organisations
- Sporting clubs
- Libraries
- Seniors groups

# My Health Record – Providers

The Gold Coast Primary Health Network (GCPHN) My Health Record Provider Engagement Team, although small, has achieved significant results with healthcare providers regarding awareness, registration and participation of the My Health Record to accelerate clinical use.

The engagement across our Gold Coast region has included general practices, community pharmacies, allied health, private specialists and aged care facilities. The strategy to deliver education, training and support has involved large events, meetings, face-to-face visits and distribution of information through the GCPHN website, publications and practice email groups.

Our provider and community engagement teams have worked closely, often assisting at My Health Record activities together.

## KEY RESULTS

- 705 face-to-face visits provided by GCPHN for My Health Record awareness and education.
- 30 large events and meetings facilitated by GCPHN for My Health Record awareness and education.
- 793 healthcare providers have attended the My Health Record events and meetings.
- 92 per cent of all general practices registered for My Health Record participation.
- 75 per cent of all community pharmacies registered for My Health Record participation.
- 100 per cent of Gold Coast general practices received awareness of My Health Record by June 30.
- 100 per cent of Gold Coast community pharmacies received awareness of My Health Record by June 30.
- Important key performance indicators, quantitative targets and deliverables set by the Australian Digital Health Agency, were met six months ahead of schedule.
- Visit by Tim Kelsey, CEO and Dr Meredith Makeham, Chief Medical Advisor of the Australian Digital Health Agency, to meet with and discuss GCPHN's My Health Record achievements.



*Pharmacy Education event and General Practice My Health Record event*



*My Health Record Team and ADHA Education support leaders*



# Gold Coast Integrated Care → Integrated Care Alliance – Helping Gold Coasters with chronic conditions

Gold Coast Integrated Care (GCIC) is an innovative program developed by hospital clinicians and general practitioners (GPs) to better coordinate care for people with chronic conditions. This program was designed to provide holistic and targeted care across a wide range of health and community support services to assess and treat patients to improve their care and reduce hospital presentations and admissions.

The program concluded in June 2018 and key learnings are being used to inform the ongoing evolution into the new Integrated Care Alliance.

The Integrated Care Alliance work is focused on providing seamless care for patients as they move from primary care, into the hospital sector and return to primary care. This year, the Alliance developed new integrated models of care for 17 diseases/conditions including back pain, inflammatory arthritis, chronic obstructive pulmonary diseases and palliative care.

During the year, 44 workshops were conducted to agree on best practice standardised care pathways. These were complemented by 20 consumer workshops to validate the models of care based on their lived experience.



*The Integrated Care Alliance work is focused on providing seamless care for patients as they move from primary care, into the hospital sector and return to primary care.*





**NARELLE URQUHART  
WIRADJURI WOMAN**

*Artwork depicts a strong  
community, with good support  
for each other, day or night.  
One Mob.*



An Australian Government Initiative

**Gold Coast Primary Health Network**

Level 1, 14 Edgewater Court, Robina 4226  
PO Box 3576 Robina Town Centre Qld 4230  
t 07 5635 2455 | f 07 5635 2466

**[www.healthyc.com.au](http://www.healthyc.com.au)**

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