



A representative from *My health for life* provided a presentation to the Community Advisory Council (CAC) about the *My health for life* program. CAC members were asked to provide feedback on how uptake could be increased, how to increase awareness and what aspects in particular would encourage them participate in the program.

“The online risk assessment is fantastic just the way it is!”
- CAC Member

WAYS TO INCREASE AWARENESS OF PROGRAM:

Promote via:

- GPs, mental health and other healthcare providers
- Brochures and TV advertisements in general practice reception areas.
- Mental health clinics or other clinics with longer-stay patients.
- Disability services
- Community broadcasting and advertising (including libraries, community radio and community newsletters).
- Community services including the Gold Coast City Council, schools, senior citizen centres, public transport and shopping centres.

Suggested target markets:

- People on parole who may have health issues/addictions
- Homeless community
- Parenting groups
- Employers and Employee Assistance Program



REASONS TO COMPLETE INITIAL ASSESSMENT:

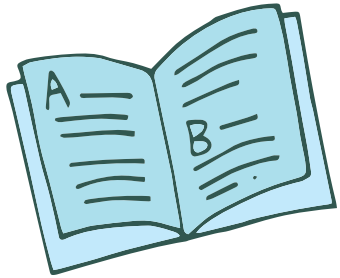
- Wanting to improve self-health and avoid chronic illness, especially if it's a part of family history.
- Encouragement from GP, healthcare provider, family and friends.
- The program seems like a fun way to meet likeminded people.
- The ease of the online checklist or having someone walk through the initial assessment.

THINGS THAT WOULD ENCOURAGE CAC MEMBERS TO PURSUE THE PROGRAM:

- Ease of access, participation and minimal commitment.
- If it was recommended by a GP, healthcare provider, family or friends.
- Multi-model delivery, including the in-person group aspect, online and live-chat options. Everyone has their preferred ways of communication and having multiple options available would be helpful.
- Personal desire to improve wholistic health and wellbeing.

A member from the Aged and Palliative Care team at Gold Coast Primary Health Network presented to the Community Advisory Council (CAC) around a booklet designed to be given to consumers to “start the conversation” around Advance Care Planning. CAC members provided feedback on the design, messaging and purpose of the booklet.

80% of CAC members either **AGREED** or **STRONGLY AGREED** that the purpose and message in the booklet were clearly stated and easily understood.



75% of CAC members **AGREED** that the language in the booklet was appropriate for the community (target group 18+ years old).

69% of CAC members either **AGREED** or **STRONGLY AGREED** that the size and style of font made it easy to read.

88%



of CAC members either **AGREED** or **STRONGLY AGREED** that the language was easy to understand (e.g. simple English).

38% of CAC members **AGREED** the booklet length was appropriate.



73%

of CAC members **AGREED** that the resource provides an easy to understand summary.

79%

of CAC members said they **WOULD** share this booklet with a family member or friend to start the advance care planning conversation.



56%

of CAC members either **AGREED** or **STRONGLY AGREED** that the direction provided were easy to understand and follow.

*“A great
“breaking the ice”
conversation starter.
This has been an excellent
initiative.”
- CAC member*

A member from the Aged and Palliative Care team at Gold Coast Primary Health Network presented to the Community Advisory Council (CAC) around a booklet designed to be given to consumers to “start the conversation” around Advance Care Planning. CAC members provided feedback on the design, messaging and purpose of the booklet.

INCLUDE:

- A list of all Advance Care Planning documents available and where to find them (include a flowchart and terminology explanation).
- Clarification that this booklet is a “conversation starter” only and NOT a legal document.
- The option for how to be cared for at home.
- Include a reference on how to find the information that applies in New South Wales.

EXCLUDE:

- Consider spelling out Advance Care Planning each time, rather than using the acronym ‘ACP’. Some CAC members felt it was over-used and could lead readers to believe it is an official advance care planning document.

REVISE:

A-Z Text and language – some of the wording could be simplified and cut down.

Imagery – photos should be a mix of people of different ages and ailments. Alternatively, cartoon or vector images could be used so as to be more inclusive.

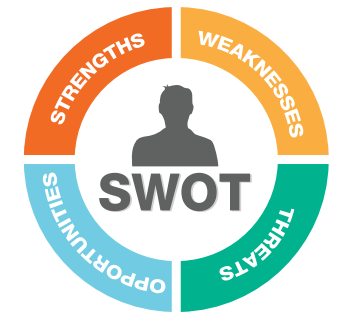


Format – size and practicality of booklet may not be the most suitable. CAC members suggested that the development of an app/online version should be considered so it is easily accessible and cannot be lost/damaged.

Messaging – ensure wording encompasses that the booklet is about the person’s values, care wishes and choices.



Explore how this can become a “**two-way document**” by including opportunities for health care professionals and family members to contribute.



Gold Coast Primary Health Network (GCPHN) and Gold Coast Health gave a joint presentation to members of the Community Advisory Council (CAC) around strategic planning for the Gold Coast community. CAC members were then asked to do a Strengths Weaknesses Opportunities Threats (SWOT) analysis on the Gold Coast health system to assist with future planning.

STRENGTHS

Services

- A “great hospital service”
- Reasonable community health and mental health services.
- Sufficient number of specialists and GPs available (which reduces need to travel to Brisbane or across the border).
- Healthy competition of bulk billing services.
- Good access to primary health care.

Location and environment

- The beautiful environment of the Gold Coast encourages residents to enjoy a healthier lifestyle and can be more connected as a community thanks to the resources available.

Relationships

- GCPHN and Gold Coast Health are committed to their roles and appear to be collaborating with consumers to improve health outcomes.

WEAKNESSES

Mental health

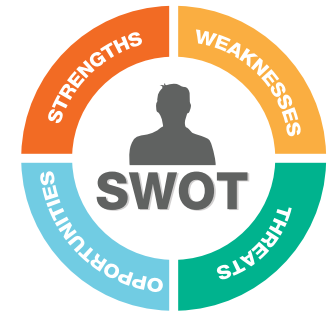
- More focus is needed in some areas of mental health, particularly those of dual diagnosis, personality disorder treatment and for those on limited incomes.

Communication

- Lack of effective communication means that some of the community don’t know what services are available.
- Specialists and GPs need to improve their communication with each other to allow for better outcomes for patients.
- There is some fragmentation within services due to lack of communication.
- Room for improvement in receiving test results and follow-up.

Social

- Poverty, homelessness and social alienation.



OPPORTUNITIES

Consumer involvement and feedback

- Opportunities are available to encourage ongoing consumer involvement such as public forums, more feedback channels, collaborative events and support groups.

Environment

- There is an ability to link the Gold Coast lifestyle with health initiatives e.g. parks, beaches, relaxation and retirement.

Development

- Opportunity for development of local services and infrastructure to cater for more of the Gold Coast region including: disability services and housing, mental health services and dental health.

Collaboration

- University and TAFE training to fill disability, aged care and health work force.
- Using pharmacy and allied health in preventative and primary care.

Technology

- My Health Record and other digital opportunities to improve health outcomes and delivery.

THREATS

Population growth

- Most CAC members noted the rapidly growing population of the Gold Coast, expressing concerns that the speed of the growth could stretch resources. This included concerns around:
 - » increased infection of communicable diseases and disease outbreaks
 - » vaccination rates

Political changes

- Political changes can mean the Gold Coast is subject to economic depressions, funding changes and losses.

Additional threats

- Natural disasters, including bushfires and flooding.
- Corporatisation of GP practices.