

A member of the Gold Coast Primary Health Network (GCPHN) Digital Health Team led a discussion around **telehealth**, e-prescribing and COVID-19 with the Community Advisory Council (CAC). Members of the CAC shared their personal experiences and feedback regarding these topics in recent months.

*"Terrific experience.
Efficient use of my time."
- CAC member*

94% of CAC members said that they, or a member of their household, **HAD** used a telehealth service in the past 3-4 months.



60%

of CAC members who responded **YES** to using a telehealth service, said that the person's health needs **WERE** met by using the service.

*"Telehealth is great. I used it twice and it was very effective."
- CAC member*

100% of CAC members said the person who used the service **WOULD** use it again.



Recommendation to the GCPHN Board

>> Telehealth is a valuable addition to the health care services and CAC members would encourage GCPHN to advocate for the option for telehealth to be available to meet patients needs into the future.



Additional comments on telehealth service experiences from CAC members:

- Overall, the feedback from members who had used telehealth was positive. Some members shared that they were more likely to attend/not cancel appointments if they could join from home.
- It was an efficient use of time (e.g. no driving or traffic, no need to find a car park or time spent in waiting rooms).
- Having the choice or a combination of telehealth and face-to-face services going forward would be convenient and beneficial for community members.
- Those who lack the necessary technology or internet connection to utilise these services are at a disadvantage.
- Some appointments were done with audio only. Some CAC members who experienced this felt they couldn't portray everything they wanted without the video element of the appointment.

E-PRESCRIBING

CAC RESULTS, JULY 2020

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Interim electronic prescribing i.e. where your doctor sends your prescription to the pharmacy via email.

88% of CAC members said they **UNDERSTOOD THE DIFFERENCE** between interim electronic prescribing and fast track electronic prescribing.

50% of CAC members said they, or a member of their household, **HAVE** had a recent experience with **interim electronic prescribing**.

Electronic prescribing model i.e. using a token sent to your smart phone via SMS or email.

50%

of CAC members said they **WOULD** feel confident participating in electronic prescribing.



50%

of CAC members said they **WOULD NOT** feel confident participating in electronic prescribing.

Additional comments on participating in interim prescribing and fast track electronic prescribing:

- **Security** was flagged as a potential issue and a reason some people may not use either service e.g. cyber-attacks.
- **Privacy and confidentiality** were flagged as additional concerns e.g. data breaches. CAC members discussed the importance of prescriptions being sent via **secure and encrypted methods**, rather than SMS or email as these are not as secure.
- Some CAC members didn't think the **fast track electronic prescribing model** was necessary whereas others liked having the option.

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How CAC members, and people in their households, found maintaining their general health in this ‘new normal’:



81% of CAC members said they, or a member of their household **HAD physically attended a general practice** in the past 3-4 months.



13% of CAC members said they, or a member of their household, **HAD** attended one of the **COVID-19 testing clinics** on the Gold Coast.

Some experiences from CAC members over the past few months:

- Buying sanitising products was difficult for some people as a result of panic buying.
- Eating and exercise habits have deteriorated during isolation and lock down periods.
- Workloads have increased due to COVID-19, which has lead to a reduction in following up on medical appointments.
- Difficulty finding a women’s health doctor who bulk bills via telehealth.

Community Advisory Council (CAC) members were asked to discuss the major issues not being addressed in the current **Family and Domestic Violence (DV)** and Determinants of Health Snapshots. CAC members were also asked to identify issues with services or regions that lack services and what else should be included in the snapshots.

Major health issues not currently being addressed on the Gold Coast:

- DV situations with children abusing adults is often overlooked or forgotten about. Early intervention with children should be implemented when families visit their local doctor or service for help to:
 - avoid children adopting violent tendencies
 - avoid children self-harming and development of mental health issues
 - avoid emergency department admissions
- Lack of accommodation/safe spaces for women and children (could be included in all GP surgeries).

Clear pathways, communication and education needed to better equip GPs and other health professionals in dealing with DV appropriately.

Consider using **blunt language** when it comes to DV as softer language is easy to misinterpret.

It is vital that decisions are made in **partnership with local domestic and family violence organisations** who are intimately aware of the needs of the local community.

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Access issues to services, or regions on the Gold Coast that lack services:

- **Low income families** appear to be more at risk of DV, and behaviours have the potential to snowball due to **limited earnings, fatigue, frustration and being time-poor**.
- Some CAC members felt there was a **lack of support** due to the limitations of GP Mental Health Care Plans and similar programs, particularly for those with **limited financial capacity** to pay for out-of-pocket costs.
- CAC members noted that groups such as Aboriginal and Torres Strait Islander, culturally and linguistically diverse, LGBTIQAP+ and other **minority communities** may be less likely to contact police or have the ability to contact police.
- **Legal fees and court expenses** can become an issue with **accessing services**, as well as dealing with court proceedings and similar events that occur with victims of DV.

Additional content that CAC members believe should be included in the snapshot:

- Additional **Gold Coast data around the deaths and gender breakdown of DV**. The National Survey only captures a snippet of DV cases in Australia.
- Men's behaviour change groups and similar safe spaces should be more **readily available**.
- Elder abuse should be **further explored and reported on**.

Recommendation to the GCPHN Board

>> That CAC feedback be considered in the development of the new modules of the needs assessment.

"Both snapshots are excellent!"
- CAC member

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Major health issues not currently being addressed on the Gold Coast:

- **Poverty, unemployment and low-income families** who cannot afford essentials.
- **Dental health**, especially of those in the homeless community.
- Addressing **tobacco and vaping** habits.
- Social housing and drug rehabilitation are **lacking**.

Additional content that CAC members believe should be included in the snapshot:

- Statistics on unemployment and legal and illegal drug use.
- Additional information on children and adolescents to help get a better gauge on the needs of younger people.



Volunteering shows **social connection** and provides **purpose**. If was encouraged more in communities and considered for JobSeeker, numbers could increase and result in benefits for multiple communities.

Access issues to services, or regions on the Gold Coast that lack services:

- CAC members generally agreed that **language barriers** are a big problem for the culturally and linguistically diverse communities.
- Fitness equipment and water fountains are **lacking** in some areas (i.e. Oxenford-Ormeau have smaller numbers compared to higher socio-economic regions).
- The **homeless, aged and disability communities continue to experience access issues**. These can stem from loneliness, transport difficulties, affordability of parking and locations of services. Telehealth can help in some instances, but face-to-face appointments are still needed.
- Aboriginal and Torres Strait Islander peoples were also flagged as a group which may experience a higher rate of accessibility issues than other groups.