

MEETING 02.07.21

COVID-19 Roll-out

How many people in the CAC group have had their COVID-19 Vaccine?



57%
had their COVID-19
vaccination already

43%
had not as yet

86%
of those who have not
Intend to get the COVID-19
vaccination



Reasons for hesitancy in the community

- ✗ Lack of historical experience
- ✗ Lack of sense of crisis
- ✗ Lack of trust due to mixed messaging
- ✗ People are frustrated with the booking system
- ✗ Misinformation online and in the community
- ✗ Potential side effects
- ✗ Lack of information around side effects
- ✗ People feel its 'too soon'
- ✗ People not seeing COVID-19 as a problem/ crisis



How to help alleviate stress of local GPs:

Accessibility and availability need to be addressed e.g. more weekend and afterhours options for patients to get vaccinated, more transport options and permission to leave work for the vaccine, could make a difference to uptake.

Potential solutions

- ✓ Targeted messaging for different age groups, including previous successes, testimonials from healthcare workers and those who have received their vaccinations.
- ✓ Incentives/rewards
- ✓ Pharmacists to offer the vaccine to ease the pressure on GPs and hospitals.
- ✓ Focus on how to mitigate side effects by providing factsheets e.g. How to deal with them and what to do.
- ✓ After-hours doctors to visit homes to vaccinate people, which to assist those who have anxiety, mental illness and/or don't want to leave the house.



Needs Assessment: Unplanned Hospital Care



Feedback on Data

Many CAC members were surprised at the rate of UTIs in the data and suggested early intervention, better education and more awareness could assist in lowering these statistics.

CAC members felt that the hospital system and primary health care don't talk to each other.

Financial circumstances, personal preferences with wait times and experience with services will impact on whether people go to the emergency department or visit/call an alternate service.

Major issues not currently being addressed on the Gold Coast:

The need for additional afterhours services. People are becoming discouraged with afterhours /at home services as it takes so long,

Some members fed back that 13 HEALTH was not always effective. Many CAC members felt the current afterhours system is fragmented and a better structure including a proper triage system, telehealth, and an urgent care model is needed.

Preventative healthcare and early intervention initiatives.

Consumers needing more encouragement and information on how to actively take part in their own health management.

Fees involved in healthcare e.g. seeing a GP, new patient fees, afterhours services, private healthcare and gap payments. Consumers in lower socio-economic groups are often unable to access these services.

Consultation time constraints of patients with co-morbidities. Ideally, GPs would have more time to spend with patients and suggest ways to better manage their health.

Not having a Medicare card may be a barrier that's preventing some people, particularly those who are homeless, from accessing treatment outside of hospital settings.

"After-hours services take too long to access"



Other issues for consideration:

Information on:

- Oral health services
- Sexual health services
- Diet and nutrition
- Rehabilitation

Advocacy - especially in doctor's surgeries with complex patients.

A breakdown of preventable mental health data, as well as more personal data to help in understanding what causes individuals to take unconventional pathways.

Information on how many people are forced to seek hospital treatment for mental health care after primary care has failed to address their health needs.

Needs Assessment: Chronic Disease

Major issues not currently being addressed on the Gold Coast:

Mental health issues exacerbated by social isolation due to COVID-19 restrictions.

GPs and health professionals not having enough time to spend with patients.

Early intervention to help people avoid chronic diseases. This includes more services offered for people who are at risk of developing chronic disease, rather than more programs for people who already have it.

The need for education that stresses the importance of nutrition and exercise in managing any chronic disease.

Homelessness in its many forms can be a significant factor in the lack of choice available to people trying to cope with chronic disease.

The care and management of the health of people with complex co-morbidities, particularly where some issues sit outside the expertise of the GP.

Other issues for consideration:

Recommendations on how and where to prevent chronic disease.

A focus on a holistic team approach to managing chronic illness.

A focus on or research into the circumstances/ lifestyle choices/ opportunities and accessible support, that might prove beneficial to the patient.

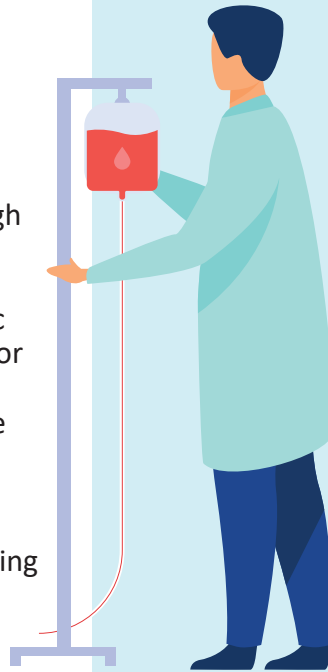
An investigation of the value of peer mentors or advocates to walk alongside chronically ill people.

'The Choosing Wisely program is a positive service, as it helps participants feel comfortable in asking questions and helps them to feel empowered.'

From CAC group discussion

'NPS Medicinewise is a resource that should be promoted widely in the community.'

From CAC group discussion



Feedback on Data

CAC members generally agreed that care coordination and navigating the health system is difficult for patients, and there is a disconnect between the hospital and primary healthcare services.

Waitlists for specialists could be leading to early emergency department admissions and people self-medicating.

The transition from hospital to primary care can be messy and sometimes inaccurate, leaving the consumer lost in the system.

Are there any access issues to services or regions on the Gold Coast, that lack services?

All areas of the Gold Coast have been affected in some way by COVID-19.

CAC members suggested that all telehealth appointments continue to be bulk billed to assist those who cannot afford and/or physically access services.

Northern regions appear to need more access to services.

Coolangatta local data suggests that lower urgency emergency department presentations may be due to the limited availability of afterhours services in this region.

Homelessness, mental health and social isolation can make navigating and accessing the most appropriate and beneficial health services extremely difficult.

