# Gold Coast Primary Health Network Needs Assessment 2022



Immunisation, communicable diseases, and COVID-19



## Immunisation, communicable diseases, and COVID-19

#### Local health needs and service issues

- Gold Coast Primary Health Network region's rate of children fully immunised for one, two, and five-year old's is below the national rate.
- High number of children (aged 1, 2, and 5) not fully immunised in Ormeau-Oxenford SA3 region.
- Lower rates of HPV vaccination in the Gold Coast region compared to the national figure.
- Vaccine potentially preventable hospitalisations in the Gold Coast region have increased 322% between 2012-13 to 2017-18 (1,960 hospitalisations in 2017-18).
- Ensuring accurate and timely information to general practices in relation to COVID-19.
- Slow uptake COVID-19 vaccination for Resident Aged Care Facilities residents and staff.

#### **Key findings**

- The immunisation rates of children (aged 1, 2, and 5) in the GCPHN region remained stable in recent years, although are still below (but comparable) to national and Queensland rates as of May 2021.
- Immunisation rates for Aboriginal and Torres Strait Islander children are below the national rates in the GCPHN region for 1 year old's, while above the national rate for 2 and 5 year old's as of May 2021.
- Areas that have low immunisation rates include Surfers Paradise and Gold Coast Hinterland.
  However, these GCPHN regions have some of the lowest absolute numbers of children who are not
  fully immunised. The region with a highest absolute number of children not immunised is OrmeauOxenford.
- In the GCPHN region, rates of HPV vaccination are increasing but remain lower than national rates.

#### **Immunisation coverage**

Table 1 shows the percentage of children immunised against a range of infectious diseases by antigen and those considered fully immunised according to Australian Immunisation Register at age one year, two years and five years as of December 2021. These immunisations are based on the National Immunisation Program Schedule, which include:

- diphtheria, tetanus, and pertussis (DTP)
- polio
- haemophilus influenza type b (HIB)
- hepatitis B

- measles, mumps, and rubella (MMR)
- pneumococcal
- meningococcal
- varicella

Table 1. Percentage of children immunised based on National Immunisation Program Schedule, June 2022

	1 year old		2 year olds		5 year olds	
	Gold Coast	National	Gold Coast	National	Gold Coast	National
% DTP	91.0%	94.6%	90.9%	93.5%	90.8%	94.7%
% Polio	91.0%	94.6%	93.8%	96.6%	91.9%	94.7%
% HIB	90.9%	94.6%	91.4%	94.3%	N/A	N/A
% HEP	90.9%	94.6%	93.8%	96.6%	N/A	N/A
% MMR	N/A	N/A	90.8%	93.7%	N/A	N/A
% Pneumo	92.6%	95.9%	92.8%	95.5%	N/A	N/A
% MenC	N/A	N/A	92.9%	95.7%	N/A	N/A
% Varicella	N/A	N/A	91.0%	93.8%	N/A	N/A
% Fully Immunised	91.0%	94.2%	90.1%	92.6%	91.6%	94.5%

Source: https://www.health.gov.au/resources/collections/childhood-immunisation-coverage-data-phn-and-sa3

Data analysis at a more granular level provides further insight into geographic regions where increased effort may be required to improve immunisation coverage. The data displayed in Table 2 highlights SA3 regions with a low immunisation rate at either ages 1, 2, or 5 years old in 2022.

Table 2. Percentage of 1, 2 and 5-year olds fully immunised, by SA3 region, June 2022

Region	1 years	2 years	5 years
National	94.2%	92.6%	94.5%
Gold Coast (SA4)	91.0%	90.1%	91.6%
Broadbeach - Burleigh	88.7%	88.3%	90.9%
Coolangatta	87.1%	88.2%	87.4%
Gold Coast - North	92.3%	90.2%	91.6%
Gold Coast Hinterland	85.6%	85.7%	84.1%
Mudgeeraba - Tallebudgera	90.1%	87.3%	93.5%
Nerang	92.7%	90.8%	92.5%
Ormeau - Oxenford	91.6%	91.0%	93.0%
Robina	91.2%	90.9%	91.5%
Southport	92.4%	91.6%	91.3%
Surfers Paradise	87.2%	89.9%	92.0%

Source: Australian Government, Department of Health, QLD childhood immunisation coverage data by SA3

Gold Coast Hinterland has low immunisation rates across all age groups. However, this region has some of the lowest total number of children who are not fully immunised. Ormeau-Oxenford has the highest number of unvaccinated children in all age groups, but the highest population of children.

GCPHN region had returned slightly lower immunisation rates for children aged 1, 2 and 5 years for the five-year period when compared to the national rate in 2022. Immunisation rates for Aboriginal and Torres Strait Islander children in the GCPHN region are below the national rates for 1 year olds and above the national rate for 2 year old and 5 year old rate as of December 2021. The large changes of rates for Aboriginal and Torres Strait Islander child population in the region.

Local trends in immunisation rates largely mirror national trends which may reflect the significance of Australia-wide immunisation policy and universal immunisation initiatives.

Tables 3 and 4 below illustrates the childhood immunisation rates for all children, as well as those who identified as Aboriginal and Torres Strait Islander, within the GCPHN region.

Table 3. Immunisation trends over time, all children, 2016-21

All children		2016	2017	2018	2019	2020	2021
1 year old	Gold Coast	93.9%	92.8%	92.9%	94.4%	92.4%	91.5%
1 year old	National	93.4%	94.0%	94.0%	94.3%	94.7%	94.6%
2	Gold Coast	91.1%	90.7%	89.8%	90.4%	91.0%	89.6%
2 year old	National	91.4%	90.8%	90.8%	91.6%	92.6%	92.6%
E was ald	Gold Coast	91.9%	92.2%	92.7%	92.5%	93.5%	91.7%
5 year old	National	93.2%	94.0%	94.7%	94.8%	95.1%	95.0%

Source: AIHW analysis of Department of Human Services, Australian Immunisation Register statistics

Table 4. Immunisation trends over time, Aboriginal and Torres Strait Islander children, 2016-21

Aboriginal and Torres Strait Islander children		2016	2017	2018	2019	2020	2021
1 year old	Gold Coast	95.1%	91.0%	96.9%	92.5%	92.3%	94.2%
	National	91.2%	92.2%	92.6%	92.6%	93.8%	92.0%
2 year old	Gold Coast	91.1%	94.4%	89.2%	92.8%	93.3%	91.1%
	National	89.1%	88.2%	88.2%	90.0%	91.4%	91.0%
5 year old	Gold Coast	97.9%	97.1%	93.6%	96.4%	99.1%	95.7%
	National	95.2%	96.2%	97.0%	97.0%	97.3%	96.8%

Source: AIHW analysis of Department of Human Services, Australian Immunisation Register statistics

#### Human papillomavirus vaccine

The human papillomavirus vaccine (HPV) is provided free to girls and boys aged 12–13 years as part of the National HPV Vaccination Program. Table 5 shows the percentage of females and males aged 15 years who had received the third dose in 2017. It shows lower levels of vaccination in both males and females in the GCPHN region compared to national levels.

Table 5. Percentage of children aged 15 years on 30th June 2017 who had received Dose 3 of HPV vaccine

	Gold Coast	National
Females	74.4%	80.5%
Males	67.1%	76.1%

Source: Public Health Information Development Unit (PHIDU), Torrens University using data from the National HPV Vaccination Program Register

#### Health service utilisation

Potentially preventable hospitalisations (PPHs) are an indicator of both adverse health outcomes and financial costs to the health system. Table 6 shows the rate of PPH per 100,000 people for vaccine-preventable conditions between 2015-2016 and 2017-2018.

Table 6. Age-standardised rate of potentially preventable hospitalisations per 100,000 people for vaccine-preventable conditions, 2015-16 to 2017-18

Region	2015-2016	2016-2017	2017-2018
Gold Coast SA4	236	186	287
National	199	213	313

Source: Potentially preventable hospitalisations in Australia by small geographic regions 2020, Australian Institute of Health and Welfare. This data set is a component of the minimum data set.

Table 7 shows the GCPHN region had a higher rate of PPHs for pneumonia and influenza conditions compared to the national figure in 2017-2018. These conditions accounted for approximately 1,500 hospitalisations in the GCPHN region in 2017-2018 and accrued a total of 9,646 hospital bed days. The rate of vaccine

preventable PPHs have increased in line with national trends, pneumonia and influenza are the largest components of vaccine-preventable PPH.

Table 7. Regional breakdown of age-standardised rate of potentially preventable hospitalisations (PPHs) per 100,000 people for pneumonia/ influenza and other vaccine preventable conditions, 2017-18

	Pneumonia and influenza	Other vaccine preventable conditions
National	207	108
Gold Coast SA4	219	70
Broadbeach-Burleigh	169	65
Coolangatta	230	40
Gold Coast- North	238	88
Gold Coast Hinterland	240	n.p
Mudgeeraba-Tallebudgera	218	51
Nerang	224	47
Ormeau-Oxenford	225	78
Robina	254	96
Southport	243	101
Surfers Paradise	153	60

Source: Australian Institute of Health and Welfare. Potentially preventable hospitalisations in Australia by small geographic regions 2020, n.p. not publishable because of small numbers, confidentiality, or other concerns about the quality of the data

In 2017-2018, the rate of PPHs for pneumonia and influenza were higher across all local areas of the GCPHN region compared with the national rate except for Broadbeach-Burleigh and Surfers Paradise. Robina had the highest rate per 100,000 people for pneumonia and influenza while Surfers Paradise had the lowest rate for other vaccine preventable conditions. Avoidable admissions data provided from Gold Coast Health indicates that young children aged 0 to 5 and older people aged 65-75 have the highest percentage of people being admitted to hospital for influenza and pneumonia.

#### Influenza

In 2014-2018, influenza and pneumonia were the 14<sup>th</sup> leading cause of death in the GCPHN region with 278 deaths<sup>1</sup>. Due to COVID-19, the closure of Australian borders to international travellers, physical distancing and improving hand hygiene there has been a large decrease in the number of confirmed cases of influenza nationally and in the GCPHN region. The annual total for lab confirmed influenza cases in 2018 was 2,095 which jumped to 7,301 cases in 2019. The GCPHN region saw a significant decline to 30 cases in 2020<sup>2</sup>. These trends are also being seen nationally. Figure 1 highlights the low number of laboratory confirmed influenza cases in Australia in 2020 compared to past years.

<sup>&</sup>lt;sup>1</sup> Mortality over regions and time (MORT) books, Australian Institute of Health and Welfare, 2020

<sup>&</sup>lt;sup>2</sup> Notifiable conditions annual reporting, Queensland health, https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/surveillance/reports/notifiable/annual

120,000

100,000

80,000

60,000

40,000

2018

2019

2020

Figure 1. Annual Australian laboratory confirmed influenza numbers

Source: Australian Government Department of Health, National Notifiable Diseases Surveillance System

#### Influenza vaccine

Each year, the World Health Organization recommends the strains to be included in influenza vaccines based on the global influenza epidemiology<sup>3</sup>. The Australian Influenza Vaccine Committee uses this recommendation to determine the influenza virus composition of vaccines for use in Australia<sup>4</sup>.

GCPHN's PATCAT system captures de-identified patient data submitted by registered general practices throughout the GCPHN region and can be extracted for analysis<sup>5</sup>. Based on this data from March 2022, of the 587,244 active patients (who have had three visits in the past two years), 31.4% (n=184,338) received the influenza vaccination.

The rate of people who received the influenza vaccination varied with different age cohorts; people aged 80 to 89 had the highest rate (72.8%) while people aged 20 to 29 had the lowest rate (15.3%). Table 8 outlines 2022 influenza vaccination rates in the GCPHN region, based on vaccinations that were given in general practices in the GCPHN region and excludes all pharmacies who were also administering the influenza vaccine.

<sup>3</sup> World Health Organization (WHO). WHO recommendations on the composition of influenza virus vaccines. (Accessed May 2018).

<sup>4</sup> Therapeutic Goods Administration. Australian Influenza Vaccine Committee (AIVC). 2016. (Accessed Apr 2018).

<sup>5</sup> Disclaimer: While there are limitations to general practice data in PATCAT (PenCS – data aggregation tool), the data is still able to provide valuable insights into population cohorts that access primary care in the Gold Coast PHN region. Adjusted figures are used for total patient population to reduce the duplication of patient data as patients can visit multiple practices.

Table 8. Influenza vaccination on the Gold Coast PHN, 2022

Age	Number	Active population	Percent
0-9	15,521	58,477	26.5%
10-19	12,375	54,270	22.8%
20-29	11,960	78,145	15.3%
30-39	15,639	84,092	18.6%
40-49	16,293	78,726	20.7%
50-59	20,743	77,565	26.7%
60-69	31,703	69,641	45.5%
70-79	38,676	56,736	68.2%
80-89	23,928	17,421	72.8%
90+	5,632	4,005	71.1%
All ages	184,338	587,244	31.4%

Source: GCPHN PATCAT

#### **Outbreaks for communicable diseases**

The notification system in Australia enables Public Health authorities to track communicable diseases and detect outbreaks and increases in disease. Numerous outbreaks occur each year. Outbreaks can include an outbreak of influenza in a specific community or outbreaks of gastroenteritis transmitted through consumption of contaminated food.

Queensland Health provide data on weekly and annual notifications of communicable diseases online, allowing tracking of the incidence of disease over time. Table 9 shows the numbers of notifications of selected diseases from 2015 to 2019 for the GCPHN region.

There has been a rise in the number of chlamydia and gonorrhoea notifications over the period shown, although the number of notifications of chlamydia decreased in 2019. Notifications for chlamydia and gonorrhoea are down in 2020 compared to previous years, likely due to either decreased social interactions or fewer people getting tested.

Table 9. Notifiable conditions annual reporting number of cases, 2016-2022

Disease	2016	2017	2018	2019	2020	2021	2022
Blood borne disease							
Hepatitis B (newly acquired)	7	5	1	6	1	0	3
Hepatitis B (unspecified)	118	97	91	96	82	56	67
Hepatitis C (newly acquired)	11	11	10	14	14	5	8
Hepatitis C (unspecified)	276	209	165	185	185	98	78
HIV	31	33	24	24	18	10	13
	Gastroint	estinal dis	eases				
Campylobacter	711	840	901	1083	826	720	646
Cryptosporidiosis	228	122	106	51	58	48	23
Salmonellosis	501	487	433	422	472	268	232
Shigellosis	18	12	51	88	32	4	7
Yersiniosis	102	104	96	76	66	38	52
Hepatitis A	9	3	4	8	2	0	10
	Invas	ive disease	es				
Group A Streptococcal	23	37	43	25	16	8	22
Meningococcal	4	7	5	2	2	0	1
Pneumococcal	22	33	48	25	13	13	20
Othe	er vaccine	preventab	le disease	es			
Measles	0	3	0	11	1	0	0
Mumps	7	13	12	7	11	1	3
Pertussis	269	146	259	225	59	0	5
Rotavirus	98	292	134	240	41	19	43
Rubella	0	0	1	1	0	0	0
Varicella	975	981	1183	1197	1362	830	777
Sex	kually tran	smissible i	nfections				
Chlamydia (STI)	2942	3310	3309	3144	2796	1829	1972
Gonorrhea (STI)	596	638	672	801	770	452	593
Syphilis (infectious)	47	126	124	117	96	90	89
Syphilis (late)	23	27	27	31	31	26	10
	Mosquito	borne dis	eases				
Dengue	47	44	23	53	10	0	4
Ross River virus	108	123	98	118	259	36	24
Barmah Forest Virus	12	24	9	8	38	17	6
Zoonotic diseases							
Potential ABLV exposure	16	27	37	53	34	26	21
Potential rabies exposure	47	67	66	61	10	0	3
Other diseases							
Adverse event following immunisation	44	39	61	35	58	25	10
Source: OLD Health. Notifiable conditions	weekly to	tals. https:/	/www.hoalth	ald any au/clinia	cal-practice/a	uidelines-proced	duras/disaasa

Source: QLD Health, Notifiable conditions weekly totals, https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/surveillance/reports/notifiable/annual. The elevated rate of shigella in 2018 and 2019 may be due to a change in in case definition introduced mid-2018. This data set is a component of the minimum data set.

#### COVID-19

COVID-19 is a coronavirus and is spread person to person via respiratory secretions. Symptoms include fever, coughing, sore throat, and shortness of breath. On 19 January 2020 the first case of COVID-19 was detected in Australia and on 21 January 2020 the first case was detected in the GCPHN region and Queensland.

Table 10 indicates the total number of confirmed COVID-19 cases and deaths reported in Australia, Queensland, and Gold Coast as of the 16 August 2022.

Table 10. Confirmed cases of COVID-19 and deaths from COVID-19 as of 16th August 2022

	Total confirmed cases	Total deaths
National	9,810,517	12,886
Queensland	1,579,334	1,774
Gold Coast SA4	93,970	260

Source: Queensland health, https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19/current-status/statistic

#### COVID-19 vaccination

The Australian COVID-19 vaccination program commenced on 23 February 2020 in Queensland at the Gold Coast University Hospital. Phase 1a priority populations included:

- aged care and disability care residents,
- residential aged care workers and disability care workers,
- priority frontline healthcare workers,
- priority quarantine and border workers.

Phase 1b of Australia's COVID-19 vaccination rollout commenced on 22 March 2021. Nationally more than 4,500 accredited general practices participated in Phase 1b which was supported by more than 130 respiratory clinics and over 300 Aboriginal Community Controlled Health Services.

Locally in the GCPHN region, 121 accredited general practices participated in Phase 1b, supported by four respiratory clinics and one Aboriginal Community Controlled Health Service.

People who are eligible for vaccination under Phase 1b are:

- elderly people aged 70 and over,
- healthcare workers currently employed and not included in Phase 1a,
- household contacts of quarantine and border workers,
- critical and high-risk workers who are currently employed,
- Aboriginal and Torres Strait Islander people aged 55 years and over,
- adults with an underlying medical condition or significant disability.

#### **Sexually Transmissible Infections (STI)**

The number of sexually transmitted chlamydia cases increased by 3% in the GCPHN region from 2,797 in 2020 to 2,900 in 2021 (Figure 3), while the number in Queensland increase by 0.5% in the same period. However, both GCPHN region and Queensland numbers have dropped significantly from 2019, which may be due the fear of infection by COVID-19 which may have reduced sexual encounters and led to a genuine decline in STIs. However, patients may have also been postponing testing because of worries about attending the clinic during the pandemic, as has also described for other medical specialities.

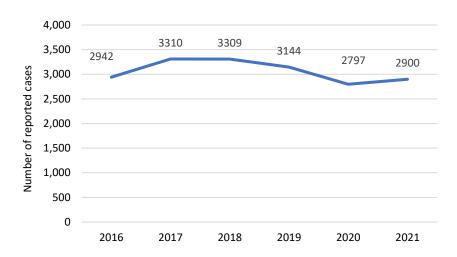


Figure 3. Number of sexually transmitted chlamydia reported cases on the Gold Coast, 2016-2021

Source: QLD Health, Notifiable conditions annual reporting, https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/surveillance/reports/notifiable/annual.

The number of sexually transmitted gonorrhoea reported cases slightly decreased in the GCPHN region from 771 in 2020 to 745 in 2021 (Figure 4), which is comparable to the trends for total Queensland.

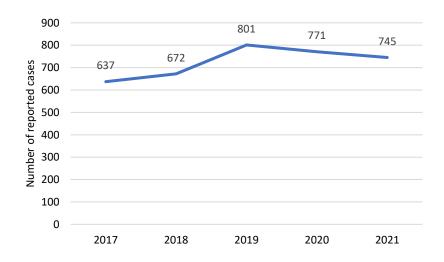


Figure 4. Number of sexually transmitted gonorrhoea reported cases on the Gold Coast, 2017 to 2021

Source: QLD Health, Notifiable conditions annual reporting, https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/surveillance/reports/notifiable/annual.

Examining chlamydia and gonorrhoea notification rates by a local level (SA3) in the GCPHN region from 2019 indicated the rates shown below per 100,000 people.

Table 11. Rates of chlamydia and gonorrhoea per 100,000 people, Gold Coast SA3 regions, 2019

	Chlamydia	Gonorrhea
Gold Coast	672.0	157.1
Broadbeach-Burleigh	880.4	200.1
Coolangatta	624.9	121.8
Gold Coast- North	470.6	168.9
Gold Coast Hinterland	321.2	129.5
Mudgeeraba-Tallebudgera	474.8	85.3
Nerang	584.3	125.4
Ormeau-Oxenford	722	157.5
Robina	679.7	126.0
Southport	793.0	183.4
Surfers Paradise	861.7	238.1

Source: Gold Coast Public Health Unit, QLD Health, Notifiable conditions

In 2018-2019, due to the increasing rate of reported cases for STIs in Queensland and the poor awareness about sexual health and unsafe behaviours, particularly among young people aged 15-29 years old, Queensland Government launched the "Stop the rise of STIs" campaign.

The campaign focusses on improving knowledge and awareness around sexual health and encourages young Queenslanders (aged 15-29) who are sexually active to get tested regularly, positioning STI testing as a normal part of their health routine.

13 HEALTH Webtest is a free urine test for chlamydia and gonorrhoea that can be ordered online, and Queenslanders can order the test online and receive the result through 13 HEALTH. This service is confidential and can be ordered without a Medicare Card.

### **Service system**

Services	Number in the GCPHN region	Distribution	Capacity discussion
General practices	212	General practices are well spread across the GCPHN region, including in the northern growth corridor where many children live.  81% of general practices have a general practice nurse many of whom assist in immunisation	<ul> <li>Childhood immunisations are free due to funding by the Government, but the consultation fee may differ between general practices.</li> <li>Many new general practice nurses require training in immunisation—40% increase in number of general practice nurses between 2015-2016.</li> <li>Immunisation education events are always well attended and often have a wait list.</li> <li>General practices require support from GCPHN regarding data recording on Australian Immunisation Register.</li> </ul>
General Practices enrolled in COVID-19 vaccination	121	General practices are well spread across the GCPHN region.	Some general practices can provide COVID-19 vaccines or recommend other options
Aboriginal Controlled Health Organisations COVID-19 vaccination	3	Bilinga, Coomera, and Miami	<ul> <li>All Kalwun health clinics are currently offering the AstraZeneca COVID-19 vaccination for:         <ul> <li>Aboriginal and Torres Strait Islander clients aged 50+</li> <li>Elderly people aged 70+</li> <li>People aged 50+ who are eligible for the Queensland 1B rollout</li> </ul> </li> </ul>
Gold Coast Health COVID- 19 vaccination clinic	2	Broadbeach Waters and Southport	Members of the community aged 16 years and over can register to receive the COVID-19 vaccine at the Gold Coast University Hospital COVID-19 Vaccination Centre or at the temporary Albert Waterways COVID-19 Vaccination Centre in Broadbeach Waters
Gold Coast Respiratory Clinics	3	Burleigh Waters, Upper Coomera, and Hope Island	Providing COVID-19 vaccinations for anyone aged 50+ and for people without a Medicare card, do not have a regular general practitioner (GP) and do not have their regular GP participating in the vaccine rollout

			Bookings are essential
Kalwun/Nerang respiratory clinics	1	Nerang	<ul> <li>Providing vaccinations to anyone aged 50+ including the Aboriginal and Torres Strait Islander community.</li> <li>Due to current medical advice, Kalwun is not vaccinating anyone aged under 50 until further notice.</li> </ul>
Dedicated GP immunisation clinics	3	Labrador, Mermaid and Canungra	These clinics provide a separate waiting area and no appointment is required.
Community immunisation clinics, Gold Coast Health	7	Burleigh Heads, Carrara, Coomera, Helensvale, Robina, Southport, Upper Coomera	<ul> <li>Drop-in—no appointments required</li> <li>Free for people with a Medicare card to attend the clinic.</li> <li>Vaccines on the National Immunisation Program Schedule Queensland are provided free.</li> <li>Other vaccines incur a cost.</li> </ul>
Online chlamydia and gonorrhoea test request	Online	Online	<ul> <li>13 HEALTH Webtest is a free urine test for chlamydia and gonorrhoea that can be ordered online. The test is available to Queenslanders 16 years and older.</li> <li>Queenslanders can order the test online and receive the results through 13 HEALTH. It is confidential and can be ordered without a Medicare Card.</li> </ul>
Schools	111	Public and private schools across the GCPHN region	<ul> <li>Free vaccinations including HPV through the school immunisation program coordinated by GCPHU.</li> <li>Queensland has legislated to require schools to provide student details to immunisation providers to assist with communication and consent processes.</li> </ul>
Gold Coast Hospital Maternity and Antenatal Clinic	1	Southport	<ul> <li>Pregnant women can access immunisations including whooping cough and influenza.</li> </ul>
Private obstetricians and midwives	12	9 obstetricians, 3 midwives Spread across GCPHN region	As above
Pharmacy	143	Various locations	Pharmacist must undertake additional training to administer

			vaccines and pharmacies must implement additional processes (e.g. cold chain).  • Pharmacists cannot vaccinate children or pregnant women.
Mobile services for vaccines	2	Various locations	<ul> <li>Onsite service for efficient administration of flu shots at aged care facilities, workplaces and schools.</li> <li>Specialist immunisation nurses with vast experience in the industry.</li> <li>Up to date Quadrivalent flu vaccines</li> </ul>
			recommended by the World Health Organization.
Gold Coast University Hospital	1	Southport	<ul><li>Pharmacy</li><li>Children's Critical Care</li><li>Birth Suite</li></ul>
Gold Coast Sexual Health Service	2	Southport and Palm Beach	<ul> <li>The Gold Coast Sexual Health Service provides testing and treatment for STIs and HIV management including PEP (Post Exposure Prophylaxis).</li> </ul>
			<ul> <li>Sexual health counselling, information, education, and advice.</li> <li>Vaccinations for Hepatitis B.</li> </ul>
			<ul> <li>Free confidential walk-in and appointment-based service.</li> </ul>
Griffith University health and	1	Southport	<ul> <li>Vaccinations for Griffith University students attending clinical placement.</li> </ul>
Medical Service			<ul> <li>Travel vaccinations and flu vaccinations are offered.</li> </ul>
Bond Medical Clinic	1	Varsity Lakes	The medical clinic is a facility for currently enrolled students and staff members of Bond University.
Community based testing sites	1	Burleigh Heads	<ul> <li>Operating 3-6pm every Thursday, HIV and Syphilis testing</li> </ul>
Information	Multiple	Web, brochures etc.	While there are credible sources, there is a lot of incorrect information on the internet.

#### **Consultation**

#### GCPHN Community Advisory Council (September 2019)

- CAC members agreed there is not as much "fear" with the newer generations when it comes to sexual health.
- There appears to be a lack of understanding and education when it comes to:
  - o contracting diseases orally
  - o engaging in sexual activity with people from different age demographics.
  - the risk of cancer/HPV diseases
- Sexual education could be revisited so teenagers are better informed.
- More advertisements around sexual health, with a focus on social media to target youth and programs for incoming tourists were also suggested.
- Homeless people's access to vaccinations may be more difficult

#### GCPHN Clinical Council (August 2019)

- Lower immunisation numbers on the Gold Coast compared to national rate is a health issue.
- There is a chance to upskill general practice nurses and GP registrars on immunisation.
- Access generally not an issue for immunisation on the Gold Coast.
- Immunisation gets a lot of media coverage.
- Northern Gold Coast is a region that can be targeted for immunisation programs for children, as its
  overall rates are high but number of children that are not immunised is also high, this may be due to
  the large population of the region.

#### General practices and the GCPHN Primary Health Care Improvement Committee

- Consistent and reliable supply of some vaccines to general practice remains an issue. Most but not all general practice clinics have a reminder system in place to follow up overdue immunisations and the inconsistent supply impacts on ability to efficiently manage use of recall and reminder systems, resulting in many immunisations being done opportunistically.
- Travel vaccinations also noted as challenging with a desire for improved access to up-to-date information to support GPs.
- Larger uptake of flu vax for children observed over recent season, noted this is likely due to media coverage.
- Some general practices advertise to the general population that flu vax is free 'for everyone' creating confusion for some patients if they are not in an eligible group and the general practice they visit does not bulk bill.
- Ongoing education for staff in a highly mobile workforce is very important. In addition, there are some concerns there may be health professionals on the Gold Coast who do not actively support or recommend vaccination, further reinforcing the need for ongoing education.
- Complicated changes to schedules and variation between states cause issues, particularly for cross border patients.

#### GCPHN Community Advisory Council (October 2017)

- As flu vaccines only covers some strains there is scepticism about effectiveness of flu vaccine and having / hearing about reactions to vaccines make many reluctant to have one.
- Growing awareness in community of potential harm of vaccine preventable diseases but still some who are adamant against childhood vaccines in particular. Some concerns that forcing people to vaccinate their children through monetary and other mechanisms is not ethical.
- Where there is a cost for a vaccine it is a significant barrier for many.





"Building one world class health system for the Gold Coast."

Gold Coast Primary Health Network

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