

CLINICAL COUNCIL

MEETING



8 May 2025

Topic #1 - Medicare Mental Health Services

SUMMARY	Members discussed access, referrals, and continuity of care.	
CLINICAL COUNCIL KEY POINTS	 Patients that present to GP, while not meeting the threshold for hospitalisation, the condition could escalate rapidly; and which phone service to contact (Medicare Mental Health Care Phone Line or 1300MH Call). GPs are generally unaware that the Medicare Mental Health Care Phone Line will assist to triage patients to appropriate mental health services. A discreet resource on service access to guide patients that may present to allied health or other providers instead of their GP. A lack of patient summaries provided to GPs detracts from recommending the Medicare Mental Health Care Phone Line. Risk concerns arise when patients can't be reached. 	
NEXT STEPS	 Create a discreet service access guide. Integrate triage tools into GP software. Ask services to send follow-up messages, share summaries with GPs/My Health Record (with patient consent), provide warm handovers and monitor referral follow-through. 	"I would expect a warm handover back to GP, information on the pathway of care and services provided." Anon, CC Member

Topic #2 - Primary Care Disaster Management

SUMMARY	Members reviewed the Ex-Cyclone Alfred response and GCPHN communications.	
CLINICAL COUNCIL KEY POINTS	 GCPHN emails and social media were timely and helpful. Evacuation centres lacked support for people needing carers or medical devices. Paramedics were stationed at major centres. Hospitals saw increased presentations of people not needing hospital care. GCPHN offered business continuity planning tools and grants. GPs want to help in community settings during disasters. 	
NEXT STEPS	 Explore GP accreditation for emergency roles with Gold Coast Health and RACGP. Support practices with business continuity planning. Investigate a GP emergency response register. 	

TOPIC #3 - Medicare Urgent Care Clinics

Gold Coast Urgent Care Clinics (UCC) have delivered 20,000+ services, avoiding 8,000+ ED visits. CC members were asked for their professional SUMMARY experience with the UCCs. GPs recommend UCCs for urgent, after-hours care. **CLINICAL** Awareness is growing, but southern residents are less informed. COUNCIL **KEY POINTS** Members want clearer info on services and imaging availability. Live wait times and extended imaging hours (especially Sundays) would help. Promote UCCs in tourist areas during peak seasons. UCCs are providing timely care summaries, and this is valued by GPs. Advocate for extended imaging hours. **NEXT STEPS** UCC promotion for locals and tourists

"Knowing the waiting times to see a Dr, and the availability of out of hours services like radiology would be helpful when recommending UCCs to patients"

Anon. members response to 'What would motivate you to recommend the UCCs?'



TOPIC #4 - Health Literacy Resource

CONSULTATION SUMMARY

Recent discussions at the CC suggested that a SUMMARY post consultation resource would assist patients with their understanding of their health conditions and navigating care options. Support for a 'takeaway' resource covering CLINICAL medications, care plans, and referrals. COUNCIL · Mixed preferences on size; suggest both print **KEY POINTS** and fillable digital versions. Include GP/provider contacts and support Pilot with practices and gather consumer feedback. Update the resource with feedback. **NEXT STEPS** Consult the Community Advisory Council on content and format.

We want to make sure you understand everything we discussed about your health today. This form summarises the key points from today's appointment.

Date:

What is the matter with me?

What should I do?

What else should I think about?

What are my next steps?

