COMMUNITY ADVISORY COUNCIL
MEETING OUTCOMES

24 July 2026

CoI: NIL

Early Conversations

GCPHN Strategic Plan

Members discussed GCPHN's new strategic direction, which focuses on improving health outcomes for people on the Gold Coast through a clearer role, stronger partnerships and a community-led approach. The discussion highlighted the importance of putting primary care first, using local health needs data to guide decision-making, commissioning services that respond to community needs, and making the best use of limited government funding. The update included the need to strengthen digital, data and evidence capability, measuring meaningful impact rather than activity, and ensure future work supports health equity, sustainability, improved consumer and provider experience, and stronger local services.

Members were asked to consider what should feel different for Gold Coast residents in 2035 and how collective efforts can demonstrate real, lasting change.

CAC members told us:

Standing on a Gold Coast beach in 2035, members imagined success through the voices of local people whose lives feel different because the strategy has delivered real change.

- A young person says: "I can see a future for myself here. I can study, work and build a life on the Gold Coast without feeling I need to leave to get the right opportunities, health care or support. I feel like I belong, my mental and physical health needs are understood, and I can contribute my skills to my local community."
- A carer says: "I feel supported, respected and equipped in my caring role. Services are easier to access, information is clear, and I do not have to fight the system or wait too long for help. The person I care for can live with dignity, and when the time comes, they can receive compassionate care in the place that feels right for them."
- An older resident says: "These feel like some of the best years of my life. I have safe and stable housing, timely health care close to home, and support to stay independent, connected and well. I feel listened to, valued and confident that care will be there when I need it."

We will know our collective efforts are creating community impact when Gold Coast residents experience a more connected, accessible and supportive local health system. Impact will be seen when people facing the greatest barriers can access care earlier, feel supported close to home, and are not left to navigate services alone.

By 2035, success would mean healthier neighbourhoods, stronger community trust, reduced gaps for people at higher risk, and fewer people falling through the cracks. This shift from activity to measurable community outcomes would show that collective effort is creating lasting impact.

Clinical Council Update

At the July Clinical Council meeting, members discussed the review of the draft Dementia Clinical Guidelines and Principles of Care, with clinicians providing detailed feedback on how practical, accessible and useful the recommendations would be in real-world care. Members noted that some suggested services or referral pathways may not be readily available, particularly in primary care, and emphasised the importance of early intervention, proactive support and clear guidance that is meaningful for both carers and clinicians. The discussion reinforced the value of clinical input in testing research and evidence against frontline experience, helping ensure the guidelines are fit for purpose, easy to navigate and not overly complex or jargon-heavy. Feedback was submitted on behalf of the Clinical Council through the official consultation process and directly to the consultation leads.

Feedback Loop

Use of Digital Mental Health Services

Members received an update on the Use of Digital Mental Health Services, a PhD project exploring the factors that support or prevent men aged 45 and over, and men living in remote areas, from using digital mental health services. The project is continuing, with 35 formal interviews completed to date. Members were advised that previous CAC feedback had helped strengthen recruitment approaches and support access to the target audience, including by encouraging outreach to remote communities. Once the project is complete, an invitation will be extended to present the completed PhD findings to the CAC.

Preventing Heart Attacks and Stroke Events through Surveillence (PHASES)

Members received an update on the Queensland PHNs' PHASES project, which aims to prevent heart attacks and stroke events through surveillance including early identification, risk assessment and follow-up in general practice. Recruitment of general practices for quality improvement activities has progressed well, with strong uptake across the Gold Coast. A public-facing communications campaign is also being planned to encourage eligible community members to proactively seek heart health checks. Members were advised that work is continuing to safely link de-identified primary care and hospital data to support research, evaluation and long-term tracking of project outcomes, with legal and privacy expertise engaged to ensure data security, integrity and community expectations are met as recommended by the CAC.

Medicare Mental Health Centre and mental health services

Members discussed follow-up questions about the Medicare Mental Health Centre, including the Pimpama location, temporary access arrangements, available resources and referral pathways for young people. The discussion clarified that the centre supports adults aged 18 and over, while Headspace supports young people aged 12 to 25 and Head to Health Kids supports children aged 0 to 12. Members emphasised the importance of clear, accessible information for schools, families and community organisations, a no-wrong-door approach with warm handovers to appropriate services, and youth mental health pathways that are welcoming and culturally safe for diverse community groups. Links to GCPHN commissioned services were shared with members following the meeting.

Person-Centred Emergency Preparedness

Members received an update on Person-Centred Emergency Preparedness, which supports medically vulnerable people to prepare for disasters through a practical, health-focused planning process. Feedback previously provided by the Community Advisory Council has helped refine the workshop approach, with delivery now underway through community events, neighbourhood centres and local sessions, including an upcoming session in Palm Beach. Members were encouraged to share workshop opportunities with relevant community groups and networks, particularly where people may rely on medical equipment, temperature-sensitive medication or additional support during emergencies. The discussion also clarified that GCPHN is coordinating with other funded organisations to avoid duplication, with GCPHN delivering the health-specific component as part of broader disaster preparedness activities.

Introduction of new CAC Chair

GCPHN acknowledged the commitment and contribution of the current Chair and Deputy Chair in their leadership roles with the Community Advisory Council over the past two years. The GCPHN CEO announced the incoming Chair, and members were encouraged to consider expressing interest in the Deputy Chair role, with reassurance that support would be available for anyone new to this type of leadership opportunity.

Topic 1 Shaping the Community Advisory Council

Details

The Community Advisory Council Terms of Reference are reviewed annually to ensure the Community Advisory Council continues to operate effectively and provide meaningful opportunities for members to contribute to GCPHN's planning, decision-making and community engagement. As part of the 2026 review, members were invited to reflect on their experience of participating in the CAC, including what motivates them to attend meetings, what aspects of the current format work well, what could be improved, and how meetings could better support inclusive, practical and valuable participation for all members.

Discussion

Strong value and purpose:
Members described the CAC as informative, meaningful and valuable, with strong confidence that their input helps influence community services and outcomes.

Effective structure and facilitation:
Members valued the organisation, facilitation, focused agenda and breakout discussions, while noting that the four-hour meeting length can be too long.

Inclusive engagement:
Members recognised the importance of broad community representation and deeper engagement with vulnerable and underrepresented groups, including First Nations peoples and people experiencing significant disadvantage.

Written and anonymous feedback:
Reflection forms and anonymous feedback were seen as important ways to support considered input, particularly for quieter members or those who prefer to communicate in writing.

Greater member input into topics:
Members supported opportunities to suggest future discussion topics and identify emerging community issues, while maintaining trust in GCPHN's topic selection.

Accessibility and practical supports:
Parking, travel distance and venue options were highlighted as important practical considerations for inclusive participation.

Visibility of outcomes and impact:
Members wanted clearer feedback on how their input influenced decisions, including "You said, we did" updates and stories that show the CAC's impact.

Review of digital tools:
Members noted the portal was difficult to access and underused and supported reviewing its purpose and discontinuing the Facebook group due to limited value.

Next Steps

- Feedback will be adopted into the Terms of Reference, where appropriate.
- Close the Community Advisory Council Facebook group
- Implement a process for members to suggest topics
- Explore venue options for future meetings
- Terms of Reference will be provided to the GCPHN Board
- Final Terms of Reference will be provided to all CAC members

Topic 2 ‘What happens when you call Triple Zero’ Queensland Ambulance Service

Details

Queensland Ambulance Service presented the draft ‘What Happens When You Call Triple Zero’ brochure, which is being developed to help community members better understand what happens during a medical emergency response. The resource aims to provide clear, practical information about when to call Triple Zero, what information callers may be asked to provide, how QAS responds, and what people may experience before paramedics arrive. Members were invited to provide feedback on whether the brochure is easy to understand, accessible for different community groups, and useful for people who may need to make decisions quickly in an emergency.

Discussion

Person-centred communication:

Members recommended framing the resource around the person using it, with clearer language about what Queensland Ambulance Service can do for them in an emergency.

Clear emergency guidance:

Members supported placing information about when to call an ambulance and what happens when calling Triple Zero at the front of the resource, while keeping emergency instructions separate from broader service information.

Plain language and accessibility:

Feedback highlighted the need to avoid or clearly explain acronyms, use simple practical wording, and ensure the resource is easy for young people, families, carers and multilingual households to use.

Inclusive emergency information:

Members suggested including mental health emergencies alongside physical health examples so the brochure reflects a broader range of emergency situations.

Interpreter and multilingual support:

Members recommended adding clearer information about interpreter support, including a QR code or simple multilingual prompt to help people access translated information.

Practical emergency tools:

There was interest in a separate quick-reference tool, such as a fridge magnet, with Triple Zero, key contacts, hospital bag prompts, access instructions and space for personal emergency contacts.

Improved use of digital tools:

Members noted the Emergency Plus app section should better explain its practical value, particularly how it helps emergency services identify a person’s exact location.

Next Steps

- Queensland Ambulance Service will review and consider the feedback and recommendations provided by CAC members.
- Approval will be sought from the Queensland Ambulance Service state team and Queensland Health.
- Once approval is received, the brochure will be printed and distributed through community channels.

Topic 3

Southport's new Medical Imaging Service
Gold Coast Health

Details

Gold Coast Health is planning a new public Medical Imaging service in Southport and sought early feedback from Community Advisory Council members on how the space could be designed to feel welcoming, calming and accessible for patients, families and carers. Members were invited to share ideas on artwork, colours, layout, signage and other design elements that could help reduce anxiety, improve comfort and support people before, during and after medical imaging appointments.

Discussion

Calm and reassuring environment:

Members recommended creating a warm, calming space through soft lighting, gentle music, warm colours, natural materials, nature murals and comfortable seating that is easy to clean and maintain.

Clear communication and reassurance:

Feedback highlighted that people can feel nervous or insecure when they do not know what to expect, so staff should clearly explain delays, wait times and the scan process, and provide reassurance throughout the visit.

Person-centred and anxiety-aware care:

Members emphasised that staff who understand anxiety and provide calm, respectful support are central to creating a successful service experience, particularly for people who have previously found scans distressing.

Inclusive access and comfort:

Feedback supported accessible and comfortable design for people living with disability, neurodivergent people, children, older adults, carers and people who may feel anxious about medical imaging.

Clear wayfinding and simple choices:

Members suggested using clear signage, room labels, symbols, landmarks and colour-blind-friendly design to help people move through the service confidently, with optional sensory supports available where needed.

Gold Coast identity and nature-based design:

Members supported design elements that reflect the Gold Coast's beaches, waterways, birdlife, flora, hinterland, mountains and local landmarks such as Springbrook, HOTA and Mount Tamborine, alongside continued engagement with First Nations communities, people with lived experience, clinicians, families, carers and local artists.

Next Steps

- Feedback will be considered alongside outcomes from the Traditional Custodian consultation and community workshop on Wednesday 29 July.
- Combined findings will be shared with the project and design teams to inform the artist brief, creative elements, wayfinding and patient experience.
- Gold Coast Health will continue engaging with consumers and key stakeholders as planning and design progress.

Topic 4

Local Digital Priority Projects

Details

The Queensland Government grant opportunity of up to $5million per grant for infrastructure and $1million for non-infrastructure projects. Of the multiple streams, GCPHN are investigating Stream 2 – Targeted programs/initiatives to support vulnerable Queenslanders to get online and learn new digital skills. The grant objective is to support the growth of high skilled industries and jobs; improve connectivity and productivity and build digital capability and inclusion.
This grant would support the identified needs in the Gold Coast Joint Regional Needs Assessment: identified high levels of isolation and loneliness among older people and limited effective support in navigating complex community, aged care system and the National Disability Insurance Scheme (NDIS).

Discussion

Strong community need and digital excusion:
Members agreed many people, including older people, young people, multicultural communities and people living with disability, need support to use digital health tools confidently, with one in five Australians reported as digitally excluded.

Health focused digital skills:
Support should focus on practical skills such as computer basics, connecting to Wi-Fi, charging devices, opening apps, setting up My Health Record or telehealth, and identifying safe online health information.

Partnered delivery through trusted local settings:
Members recommended avoiding duplication and working through established centres and programs such as libraries, senior citizens venues, Gold Coast Seniors on the Net, Tech Savvy Connect, Be Connected and Good Things.

Face-to-face, one-on-one and ongoing support:
Members supported face-to-face, one-on-one support where possible, including delivery in small group settings, with over-the-phone support and follow-up options for people who need extra help after sessions.

Trusted relationships, privacy and safety:
Feedback highlighted the need for trusted neighbourhood staff, responsible and trustworthy delivery partners, safe physical environments for people with mobility concerns, and clear safeguards to reduce privacy, password and scam-related risks.

Cultural and language access:
Language barriers and difficulty understanding health information were identified as major issues, with support needed through trusted community members, multicultural workers and translated or plain-language resources.

Targeting funds where they add value:
Members noted the importance of understanding existing support networks and ensuring any funding addresses clear gaps, with some suggesting greater focus on family and youth mental health supports where unmet need remains high.

Community willingness to support:
Members expressed strong support for helping with project development and delivery.

Next Steps

- Feedback is being considered to inform a potential grant submission.