

2016-17 ANNUAL REPORT

Sunshine Coast Health Network Ltd



phn
CENTRAL QUEENSLAND,
WIDE BAY, SUNSHINE COAST

An Australian Government Initiative

ACKNOWLEDGMENT

Sunshine Coast Health Network Ltd. acknowledges the Traditional Custodians of the land on which we work and live, and recognises their continuing connection to land, waters and community. We pay our respects to them and their cultures; and to Elders past, present and emerging.

Australian Government disclaimer

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Partnerships

SCHN would like to thank our corporate partners for their continued support throughout the 2016/17 year.

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“ Our second year in business as a PHN has allowed us to firmly plant our roots throughout our expansive catchment - but there has been much to learn along the way. ”

Mrs Pattie Hudson, CEO

OUR REGION AT A GLANCE



161,108
square km



842,000+
residents



5.5%
need assistance with a severe or
profound disability



41.7 years
is the median age with an
ageing population



82.7
years is the average life
expectancy



70%
reside in areas classed as
regional and remote



OUR YEAR IN REVIEW

A snapshot of achievements from the PHN and our commissioned service providers for the 16/17 financial year



234

general practices now registered for My Health Record



260

education events hosted for clinical and practice management staff



746

clients supported through Partners in Recovery throughout its lifetime with 225 new referrals this year



36

pharmacies now registered for My Health Record



90

practitioners upskilled to deliver interventions to reduce chronic condition risk factors for young people in Bundaberg



5200+

GPs, nurses, practice staff and allied health clinicians attended PHN training



30,400

health summaries uploaded to My Health Record by residents in our region this year



500

outlets in Cooloola stocked the Aged Care Services Guide developed by the Gympie Aged Care Sub-Group



2,357

allied health telehealth sessions delivered to children in Bundaberg through Royal Far West



205

youth engaged in school holiday activities focusing on health and nutrition in Gympie



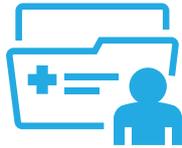
2653

practice support visits carried out



455

pathways created and available on HealthPathways



16,346

occasions of allied health service delivered through PHN's Rural Primary Health Service funding



321

kids across six schools involved with the Building Better Communities program in Gympie



62

Aboriginal and Torres Strait Islander people received consultations regarding cardiovascular disease with the Indigenous Wellbeing Centre

OUR ORGANISATION



91.3%

of people would consider getting medical attention somewhere other than the ED after seeing the Right Place Right Time campaign



11%

decrease in parents who would use an ambulance or hospital after the Right Place Right Time campaign was launched



6

Clinical and Community Advisory Councils advised the PHN meeting every two months



Stepped care

mental health tender process commenced to commission all PHN-funded mental health services in the PHN catchment



\$3m

in funding announced for trial suicide prevention activities in Gympie, North Burnett and Maryborough



Jan 2018

NDIS will be rolled out in Central QLD. Partners in Recovery Support Facilitators are helping clients apply and complete their access request forms

REPORT FROM THE BOARD CHAIR

Dr Peter Dobson

Board Chair

Sunshine Coast Health Network Ltd.

On behalf of the Board of Sunshine Coast Health Network Ltd., I'm pleased to present the 2016-17 Annual Company Report.

Over the last year, our organisation continued to demonstrate excellence across all facets of its operation.

Our people remain our most valued asset, and the PHN Executive's commitment to building capacity within our organisation has reaped rewards in an engaged and passionate workforce with a collective will to improve the health and happiness of their community. It's been a marvellous privilege for the Board to have observed and given guidance to staff throughout the past financial year.

As the PHN moves towards a fully-commissioned service model, it's been rewarding to see the entire health sector in our region develop and grow, as it adopts this evidence-based approach to primary health service delivery.

Equipped with the extensive data findings of the *2015-16 PHN Health Needs Assessment*, a range of targeted health programs were established over this past year, to optimise the health and wellbeing of the most vulnerable population groups across our region.

Health technology and integration remain at the forefront of high quality, effective health service delivery. Initiatives such as My Health Record and HealthPathways have provided platforms to streamline the patient journey, with improved referral pathways, clearer clinical guidelines, and better

communication between the primary and acute health care sectors.

Looking forward, the Board and management have together developed a strategic direction that will allow the organisation to identify and take advantage of opportunities to improve primary health care in our region, while also ensuring sustainability into the future. Health needs and service delivery are changing and will continue to change, and we look to drive that journey using technology and new ways of operating to benefit the patients and communities we care for.

Effective, quality patient care cannot exist without service integration and coordination between the many facets of the health sector. Our robust and collaborative partnerships with the Central Queensland, Wide Bay and Sunshine Coast Hospital and Health Services have ensured a more consistent approach to service design and delivery - creating a climate that reduces duplication and encourages cooperation across the sector.

This Annual Report offers an insight into the way we as a Primary Health Network are working toward more accessible, equitable care. I thank you for your support in the 2016-17 year.

Yours faithfully,



Peter Dobson



“ Our people remain our most valued asset, and the PHN Executive's commitment to building capacity within our organisation has reaped rewards in an engaged and passionate workforce with a collective will to improve the health and happiness of their community. ”

REPORT FROM THE CEO

Mrs Pattie Hudson

Chief Executive Officer

Central Queensland, Wide Bay, Sunshine Coast PHN

If one teaches, two learn.

Organisationally, it's the risk of not learning that is detrimental to success. Primary Health Networks need to be agile, attentive to changing needs and responsive to their communities. Our second year in business as a PHN has allowed us to firmly plant our roots throughout our expansive catchment - but there has been much to learn along the way.

We understand our primary health care landscape is imperfect, with wide ranging challenges. Our diverse catchment - with different abilities, access and needs - changes with the seasons. Yet, in the 2016-17 year, we worked with (and learnt from) our communities to sow the seeds for a brighter future. I am delighted to share these learnings with you in the 2016-17 PHN Annual Report.

We have established the basis of a primary health commissioning cycle in the region - population health planning and workforce mapping; service design and delivery; and monitoring and reviewing the outcomes. This groundwork will pay dividends in the coming years as we implement it across our program areas.

A common goal was clear - a variety of accessible and accredited professional development opportunities, more clinical support, and enhanced opportunity to access the health services our people need, regardless of who they are, and where

they live. Improved access to our priority health areas, such as chronic disease prevention and mental health support services, was the framework on which we would build. And at the heart of this project were our community members most in need - mothers and babies, young people, older people and Aboriginal and Torres Strait Islander populations.

One of the key lesson we have learned in the primary health space is that we can't do it alone. Our role is to build a population with high levels of health literacy, and access to the services they need. Then we have to support our communities to take action to maintain their own health - by eating well, exercising more and reducing alcohol intake and tobacco use. It is only by working together to address these factors that we can fight the battle against chronic disease.

We've watched as this garden - our people, their towns and communities - have responded in the past year. I'm extremely proud of our organisation's growth in the past financial year. Our commitment to improving the primary health care services across our region is stronger than ever.

Join us in celebrating and exploring some of these successes.

Yours faithfully,



Pattie Hudson



“ We understand our primary health care landscape is imperfect, with wide ranging challenges. Our diverse catchment - with different abilities, access and needs - changes with the seasons.

Yet, in the 2016-17 year, we worked with (and learnt from) our communities to sow the seeds for a brighter future. ”

MEET THE BOARD



Dr Peter Dobson MBBS, GAICD
Board Chair

Peter is a GP and general practice owner with over 20 years' experience. He has over 10 years' experience in key executive roles within the Sunshine Coast Division of General Practice, the Sunshine Coast Gympie Partnership Council and the District Division Alliance.

Peter is highly involved and networked within the PHN stakeholder groups and has enjoyed a long involvement with and made contributions to State and National initiatives. As an experienced Chair, Peter has strong governance skills with his areas of key competency and experience including stakeholder engagement, conflict resolution, performance evaluations and member engagement.



Ms Rebecca Bell B Occ Thy, Exec MBA, GAICD, Adj. Assoc. Prof. UNSW
Board Member

Rebecca is presently General Manager of Member Health with Medibank Private. Rebecca has worked in a range of health settings in both clinical and corporate functions.

Originally an occupational therapist, Rebecca understands the coalface of health service delivery and the importance of local nuances across geographies and demographics – critical success factors for the PHN.

Rebecca has completed an Executive MBA, is a Graduate of the Australian Institute of Company Directors, an Associate Fellow with the Australian Institute of Management and Adjunct Associate Professor at UNSW (School of Public Health and Community Medicine).



Mr David Conry A DipBus USQ, QAY, FAIM
Board Member

David is Managing Director of Damarcon and holds several non-executive roles including Chair of the Brisbane Powerhouse Arts, The Queensland Museum Network, Charlton Brown Pty Ltd, The Australian Institute of Health and Welfare and TCI Pty Ltd.

Among several awards and commendations, David has been recognised with the honour of Queensland's Australian of the Year 2007 and EY Social Entrepreneur of the Year for his work in founding the national disability organisation Youngcare. David is a Fellow of the Australian Institute of Management and graduate member of the AICD.



Mr Grant Dearlove LLB, LLM, MBA, FAIM, Grad. Dip ACIS, GAICD
Board Member

Grant is a company director and lawyer.

He holds a Bachelor of Laws, Master of Laws, an MBA, Graduate Diploma in Applied Corporate Governance and has studied leadership of professional service organisations at Harvard.

Grant has held executive roles and directorships in several State and National organisations spanning law, property, risk, franchising, finance, tourism, economic development and training.



Dr Fiona McGrath MBBS, DipRANZCOG
Board Member

Fiona has worked as a GP on the Sunshine Coast since 1997, and in Brisbane since 2015.

She is a passionate advocate for primary health care and has been closely involved in improving healthcare delivery through her involvement at local and State governance levels.

Fiona held the position of Chair of the Sunshine Coast Division of General Practice from 1998 to 2008, and was a Director of CheckUP from 2008 to 2015. She has had extensive governance training through a number of programs including the Australian Institute of Company Directors.



Dr John Menzies MBBS (1st Cls. Hons), MHP, FRACMA, AFACHSM
Board Member

Dr John Menzies is an experienced hospital and health service consultant who has over 30 years' experience in the health field, both in Australia and internationally. He graduated with first class honours in Medicine at UQ and obtained a Master of Health Planning from UNSW.

John is currently the General Manager of the Health Roundtable Ltd. Prior to taking on this role in early 2015, he was for thirteen years the senior medical and hospital consultant for Abt Associates. In this role he completed numerous consultancy tasks for Australian and international Governments as well as overseeing the clinical service governance of services provide by Abt Associates.



Mr John Woodward BPharm (Hons, Adv. Prac. Pharm., BCPS, BCGP, GAICD)
Board Member

John is an advanced practice pharmacist who has practiced in the Sunshine Coast and Gympie area since 2004. He provides pharmacy consultancy services within a number of general medical practices in the region and also works in community pharmacy. He has previous experience in hospital pharmacy.

John is Deputy Chairperson of Sundale Ltd, a provider of residential care, in-home care, retirement living, social housing and rehabilitation services in South-East and Central Queensland. He is a Graduate Member of the Australian Institute of Company Directors.



Amanda Boland
Company Secretary

Amanda is an independent governance professional with clients throughout Queensland. She is Company Secretary for a number of companies and charities in healthcare, creative industries, and communications. She is also President of the Sporting Wheelies and Disabled Association.

Amanda has significant senior executive experience, and demonstrates leadership, engagement and mentoring to ensure teams and individuals can deliver strong results in line with business strategy.

SUBCOMMITTEES AND WORKING GROUPS

The Board has established the following Subcommittees and Working Groups to facilitate effective governance.



FINANCE, AUDIT AND RISK SUBCOMMITTEE

DIRECTORS

Mr Grant Dearlove
Dr Peter Dobson
Mr John Woodward

MANAGEMENT

Mrs Pattie Hudson
Mr Terry Plant



MEMBERSHIP, STAKEHOLDER ENGAGEMENT AND COMMUNICATIONS SUBCOMMITTEE

DIRECTORS

Mr David Conry
Dr Peter Dobson

MANAGEMENT

Mrs Pattie Hudson
Ms Jess Barr
Mr Andrew Wills



INFORMATION MANAGEMENT AND PLANNING SUBCOMMITTEE

DIRECTORS

Ms Rebecca Bell
Dr Fiona McGrath

MANAGEMENT

Mrs Pattie Hudson
Ms Malathi Kanagasabapathy
Ms Emma Whitehead



CLINICAL ASSURANCE SUBCOMMITTEE

DIRECTORS

Dr John Menzies
Dr Fiona McGrath
Mr John Woodward

MANAGEMENT

Mrs Pattie Hudson
Ms Emma Whitehead



INDEPENDENT NOMINATIONS COMMITTEE

DIRECTORS

Dr Fiona McGrath

Independent representatives as required



REMUNERATION WORKING GROUP

DIRECTORS

Dr John Menzies
Ms Rebecca Bell
Mr Grant Dearlove

BOARD MEETING ATTENDANCE

| BOARD MEMBERS | ELIGIBLE TO ATTEND | NUMBER ATTENDED |
|-------------------|--------------------|-----------------|
| Dr Peter Dobson | 8 | 8 |
| Mr Grant Dearlove | 8 | 5 |
| Mr David Conry | 8 | 7 |
| Ms Rebecca Bell | 8 | 7 |
| Dr Fiona McGrath | 8 | 7 |
| Dr John Menzies | 8 | 7 |
| Mr John Woodward | 8 | 7 |



“ I am incredibly proud of what we have achieved as an organisation this year and excited by the new opportunities we have to work with partners across the region to improve the health and wellbeing of our residents. ”

**Dr Peter Dobson ,
Board Chair**



COLLABORATION AND ENGAGEMENT

Strong strategic alliances, effective partnerships with governing bodies and a relationship with community have been integral to the PHN's ongoing achievements.

The PHN relies heavily on obtaining up-to-date, readily accessible data. Our consortium partnership with Abt Associates (formerly Abt JTA) has allowed our organisation to be at the forefront of changing health efficiencies, improvements and trends. Abt Associates is a specialist international and Australian health and social sector consulting company that provides services to public and private sector clients.

The PHN was advised by six stakeholder Councils across the catchment, comprised of both clinical representatives and community members in each of the catchment's major areas. The Clinical and Community Advisory Councils met every two months in a face-to-face setting in the 2016-17 period, and informed PHN leadership on the priorities and effective solutions for their respective communities.

Council members give unique perspective to the PHN's strategic direction; with many members joining from diverse cultural communities, advocacy groups, health professional networks and specific or under-represented primary health care sectors.

The overall goal of the Councils is to provide an 'on the ground' viewpoint for the PHN Board's consideration to ensure decisions, investments, and innovations are patient-centred, cost-effective, locally relevant and aligned to local care experiences and expectations. We'd like to thank the PHN Community Advisory and Clinical Councils for their time and efforts in the 2016-17 year.

Collaborations with the Hospital and Health Services (HHS) in the Central Queensland, Wide Bay and Sunshine Coast areas, as well as hospitals in the private sector, allowed the organisation to better understand local needs and pathways between the primary and acute setting in the 2016-17 year period. We look forward to continuing these relationships as our organisation progresses, and would like to thank the HHS executives and staff for their commitment to improving the primary health care landscape in their communities.

We continued to be guided by the direction of Queensland Health in the 2016-17 year. General Practice Liaison Officers employed by the PHN connected with their counterparts in regional HHSs; large-scale media awareness campaigns (such as hospital avoidance campaign Right Place Right Time) supported the cause to reduce pressure on Queensland Health emergency departments; and the HealthPathways tool simplified and improved referral systems between the two sectors.

We value the voices of our community, health workforce, lived experience sector, partners and other stakeholders in supporting the activities and achievements of this organisation. The PHN acknowledges the ongoing contributions made by those working in general practice, Aboriginal and Torres Strait Islander primary health care, youth services, universities, community groups, reference groups and public and private health providers. We will also continue to foster strong relationships with each of the twelve local governments within our catchment.

COUNCILS

Clinical Councils five year goals

Central Queensland

Improve timely and quality clinical handover from hospital to primary care.

Focus area - aged care



Wide Bay

Improve integrated care, achieved by improving timely discharge summaries and integrated referral system.

Focus area - discharge summaries to aged care



Sunshine Coast

Improve integration in the health workforce, resulting in greater efficiencies in the system.

Focus area - reducing avoidable falls in the community



Community Advisory Councils five year goals

Central Queensland

Community agencies and groups are working together on evidenced-based priorities towards agreed targets, and progress can be measured.



Wide Bay

Measurably improved health and wellbeing of those identified as 'at risk' or 'hard to reach' through successfully targeted cross sector and community planning.



Sunshine Coast

A collective voice advocating for Sunshine Coast, Gympie, Cooloola communities to enable innovative practical solutions that address identified and emerging health and wellbeing priorities.



Central Queensland Clinical Council

Dr Gaston Boulanger – *Chair*
GP, BITS Medical Centre
Dr Ewen McPhee – *Deputy Chair*
Central Queensland Clinical Council;
GP, Emerald Medical Group
Thalep Ahmat – CEO,
Bidgerdii Community Health Service
Carly Cooke – General Manager,
Nhulundu Wooribah Indigenous Health Organisation Inc
Sandra Corfield – CEO,
Central Queensland Rural Health
Dr Michael Donohue – GP,
Yeppoon Family Practice
Professor Leone Hinton – Board Director, CQHHS &
Professor, Central Queensland University Rockhampton
Kieran Kinsella – Executive director, Rural and District
Wide Services, Central Queensland Hospital and Health
Service
Bradley Miers – Senior Operations Supervisor/Critical Care
Flight Paramedic, Queensland Ambulance Service
Professor Lynne Parkinson – Professor,
CQ University Australia
Jessica Burrey – Pharmacist, Emerald

Central Queensland Community Advisory Council

Sandy Paton – *Chair*
President, Capricorn Community Development
Association
Lynetter Anderson – CEO Helem Yumba
Annette Coleburn – Practice Manager, Gladstone
GP Super Clinic
Lisa Harrison – Senior Nursing Officer, True
Relationships and Reproductive Health
Kay Hills – President,
Theodore Community Link
Rodney Hutcheon – CEO,
Excelcare Australia
Carmel Marshall – Planning and Development,
CentaCareCQ
Natalie Polkinghorne – Team Leader,
Carers Queensland & Capricorn Community
Development Association Inc
Shane Wilkie – Mayor
Woorabinda Shire Council

Wide Bay Clinical Council

Associate Professor Brad Murphy – GP Ashfield
Country Practice
Dr Cynthia (Cindi) Jackson – General Practitioner,
Childers Family Medicine
Stephen Bell – Registered Psychologist & General
Manager, Family and Community Health, Wide Bay
Hospital and Health Service
Ruth Christie – RN and LASN Manager of Clinical
Education, Queensland Ambulance Service
Andrew Fallon – Multi Service Manager,
Blue Care
Alicia Gee – Indigenous Health Worker (Chronic
Disease), Galangoor Duwalami Primary Health
Service
David Holmes – Pharmacist
Coral Coast Pharmacies
Professor Anthony Schneiders PhD – Discipline
Leader, Physiotherapy: School of Human, Health &
Social Sciences, CQU
Trish Spreadborough – Facility Manager Nursing
Director, Queensland Health – Wide Bay Hospital
Health Service
Dr Paul Geeves – Dental Prosthetist and Dental
Technician, Dentures Clinic

Wide Bay Community Advisory Council

Cheryl Barrett – *Chair*
General Manager Queensland, Integrated Living
Australia
Steve Beer – General Manager Operations, IMPACT
Community Services
Melissa D'or – Director of Social Worker, Wide Bay
Hospital and Health Service
Anne McWhirter – Service Manager, Churches of
Christ Care
Consuela Morrice – Senior Aboriginal and Torres
Strait Islander Health Worker, Wide Bay Hospital
and Health Service
Ken Parker – Community Services Advocate
Katherine Potter – Practice Manager, Main Street
Medical Centre
Ben Ross-Edwards – Team Leader Community
Services, Wide Bay Hospital and Health Service
Sharon Sarah – CEO
Bridges Health & Community Care
Coral Walker – Advanced Indigenous Health
Worker, Wide Bay Hospital and Health Service
Ann Woolcock – Practice Manager Galangoor
Duwalami Primary Health Service
David Zoran – Coordinator Environmental Health,
Bundaberg Regional Council
Faye Whelan – Deputy Mayor
North Burnett Regional Council

Sunshine Coast Clinical Council

Dr Mason Stevenson – *Chair*
GP, Suncoast Medical Centre
Dr Geoffrey Byrne – *Deputy Chair*
GP, Golden Beach Surgery
Kaye Coates – Nurse Practitioner, Sundale Ltd
Dianne Cross – Senior Operations Supervisor,
Queensland Ambulance Service
Dr John Endacott – Geriatrician and Clinical
Service Director,
Community Integrated and Subacute Services,
Sunshine Coast Hospital and Health Services
Professor Kim Greaves – Cardiologist,
Sunshine Coast Hospital and Health Service
Dr Jon Harper – GP Liaison Officer, Central
Queensland, Wide Bay, Sunshine Coast PHN,
General Practitioner
Timothy Logan – Pharmacist,
Pharmacy Guild of Australia (Queensland Branch)
Jenny Medina – Registered Nurse,
Golden Beach Medical Centre
Dr Marlene Pearce – GP Ochre Health Medical
Centre Sippy Downs, The Sunshine Coast Private
Hospital (Surgical Assistant), The Sunshine Coast
Hospital and Health Service (GP VMO)
Dr Sandra Peters – GP (Ex-Officio Member), Clinical
Director Minor Illness and Injury Clinic,
Caloundra Hospital
Dr Florin Oprescu – Senior Lecturer in Public
Health, Health Promotion, USC (Academic
Member)
Dr Frank Le Bacq – Rural Generalist in O&G,
Emergency Medicine and General Surgery,
Sunshine Coast Hospital and Health Service
Kerrie Hayes – Executive Director Clinical Services,
Sunshine Coast Hospital and Health Service
(Ex-Officio member)
Rae Priaux – Director of Clinical Services,
The Sunshine Coast Private Hospital
Michelle Johnston – GP Liaison Officer,
Sunshine Coast Hospital and Health Service
Katy Fletcher – North Coast Aboriginal Corporation
for Community Health

Sunshine Coast Community Advisory Council

Tendai Dawkins – *Chair*
Manager of Health and Wellbeing Solutions at
Community Solutions/Endeavour Foundation
Kerry Staines – *Deputy Chair*
Director Community Services,
Lutheran Community Care
Sandy Bolton – Community Health Advocate
Jane Connolly – Consumer
Gillian Hall – Student, University of the Sunshine
Coast, Community Development (Honours), Health
Advocate
Kim Helmore – General Manager, North Coast
Aboriginal Corporation for Community Health
Felicity Hogan – Practice Manager,
Cooloola Coast Clinic
Christopher John – Chief Executive Officer, United
Synergies, inclusive of headspace Maroochydhore
and National StandBy – Suicide Bereavement
Service
Jenny Morcom – Community Engagement Officer,
Sunshine Coast Hospital and Health Service
Emma Rice – Teacher Community Services, East
Coast TAFE
Dr Jane Taylor – Public Health Academic, Program
Leader Health Promotion and Discipline Leader
Public Health
Anna Sterken-Leslie – Integrated Services
Manager, Blue Care

IMPROVED SYSTEM COORDINATION AND INTEGRATION

Consistent, quality primary health care cannot be achieved without improvement in coordination between primary and acute sectors and integration between services and collaboration within our diverse health workforce.

In March 2017, the Sunshine Coast Integrated Care Alliance (ICA) was created. Integrated care is a holistic approach to health care, focusing on improving health outcomes for those living with chronic and mental health conditions. Rather than simply treating symptoms, an integrated care approach encourages health providers to work together to tailor services to an individual's need.

The ICA has built meaningful partnerships between stakeholders, primary and tertiary care providers in the 2016-17 year. The group discusses reduced duplication in the primary health care setting, and service quality improvement. As the ICA develops, it offers a promising future for those managing complex conditions.

On the Sunshine Coast, the SPOT-ON initiative, which stands for Supporting Patient Outcomes Through Organised Networks, aims to reduce the number of non-life threatening emergency department presentations in the South-East Queensland area. This project was developed as a joint initiative in partnership with Sunshine Coast Hospital and Health Service (SCHHS), Queensland Department of Health's Health Improvement Unit (formerly Clinical Access and Redesign Unit), Queensland Ambulance Service, and the University of the Sunshine Coast.

Eligible patients requiring an ambulance with non-acute conditions were given the option to avoid emergency department waiting times and be treated in a suitably-equipped general practice setting. The project has seen considerable success, with members of the project team representing the project at the Integrated Care Conference held in Ireland in May.

Clinical decision making-tool HealthPathways was rolled out across the region. HealthPathways is a web-based information portal supporting primary care clinicians to more effectively plan patient care through primary, community and acute health care systems. A total of 455 localised pathways were created across the region throughout the year.

Despite the availability of after-hours health services on the Sunshine Coast, feedback and data from the SCHHS Emergency Departments (ED) showed large numbers of consumers in the region presenting to the ED with Category 4 and 5 symptoms. Often these symptoms are non-life-threatening and able to be treated in a general practice setting. The 'Right Place, Right Time' campaign aimed to target those with low levels of health literacy who may not be aware of more efficient options available for health care in non-life threatening scenarios. A large scale media and social media community awareness campaign was rolled out across the region.

The campaign demonstrated significant outcomes in terms of changed attitudes. Results showed an 11% decrease in parents who would use an ambulance or hospital in seeking non-urgent health care. The survey also found an increase of 25% of individuals who would instead contact free medical advice hotline 13HEALTH.

Practice Support Officer Teams continued to provide clinical support to general practitioners and their staff. A total of 2653 visits were carried out across the region, supporting practices with face-to-face digital health (MyHealthRecord, data quality, and eReferrals), chronic disease management, immunisation, Closing the Gap, mental health quality improvement, and accreditation.

Provision of resources, health alerts and topical updates continued to be delivered via the clinical *GP Matters* weekly eNewsletter.

MATERNAL AND CHILD HEALTH

Improved maternity care, health education and encouraging a healthy lifespan continuum formed the basis of the PHN's work in primary health care for mothers, infants and young children.

Regional partnerships with Hospital and Health Services were focused on antenatal and maternity care for young families and families in at-risk population groups. In Central Queensland, the PHN established a partnership with the Central Queensland Hospital and Health Service Maternal Health Unit to progress a GP Antenatal Shared Care Model, with a particular focus on referrals and access to maternal services. Similar models were replicated in Woorabinda and the North Burnett.

Across the Gympie and Wide Bay areas, the PHN established partnerships with Hospital and Health Services, local general practices, midwives and allied health practitioners to provide targeted antenatal health care and advice for vulnerable women, including Aboriginal and Torres Strait Islander women, and young women living in crisis accommodation. Evaluation showed a reduction in smoking rates and an increase in women intending to breastfeed at the conclusion of the program.

In Bundaberg, Royal Far West delivered allied health services via telehealth within Early Childhood Education and Care centres in the Wide Bay region. The program offered a range of cost-effective, evidence-based services such as speech therapy, psychology and occupational therapy for developmentally vulnerable children.

Across the region's most rural and remote areas, the PHN focused on increased access to evidence-based allied health services for developmentally vulnerable children. A total of 2,357 occasions of service were delivered under the Allied Health for Early Years program regionally.

The PHN continues to emphasise the importance of immunisation in early life. The Government's 'No Jab, No Pay' health reforms were supported directly by the PHN Immunisation Project Officer, who provided resources and guidance to general practice staff.

YOUNG PEOPLE

In 2016 -17, barriers to good health for young people were identified across the catchment.

In the Gympie-Cooloola region, a need for improved youth GP access, and in particular, sexual health services, was identified. The PHN commissioned a sexual health youth worker within Community Action Youth Service Gympie to provide confidential, non-judgemental sexual health check-ups for young people in the region.

Additionally, the Gympie Early Years Voice Partnership planned and facilitated a Growing Great Kids Forum for local service providers. The forum focused on building the capacity and connectedness of service providers in Gympie and supported the development of the Gympie Children and Young People Report 2017.

Across the Wide Bay, the PHN commissioned a range of programs aimed at early intervention for young people at risk of developing mental health issues. School-based programs provide assessment and therapy services for at-risk children, as well as 'Reboot' training, which upskills educators and enables them to play an active role in engaging young people and building life skills. Of the educators who participated in the 'Reboot' program, 86% reported increased confidence in their professional roles as a result of the training.

Aboriginal and Torres Strait Islander health services expanded their culturally appropriate programs to better incorporate positive lifestyle education.

Promotion of youth immunisation took place region-wide, facilitated by the PHN Immunisation Project Officer. Specifically, the PHN provided resources and support around promoting the Meningococcal ACWY Program for students in Year 10.

ABORIGINAL & TORRES STRAIT ISLANDER HEALTH

In 2017, the PHN continued the commissioning process of the Integrated Team Care (ITC) program.

Local service providers were selected based on their ability to address the needs of their communities, their location and their reputation as a leader in culturally appropriate care.

Chronic disease prevention, and workforce development were at the forefront of ITC activities throughout the 2016-17 year period. In Woorabinda, the PHN directly appointed and supported a community member to be enrolled in Certificate IV Aboriginal and Torres Strait Islander Primary Health Care. Education for GPs was rolled out regionally to help clinicians better understand how they can use the ITC program to improve patient outcomes.

The ITC program will continue to contribute to better health outcomes for Aboriginal and Torres Strait Islander people with chronic disease by increasing staffing and funding in the North Burnett to include an outreach worker in the 2017-18 period. In the Wide Bay, the program successfully transitioned their Aboriginal and Torres Strait Islander clients across to the newly-commissioned Galangoor Duwalami health service, based in Maryborough.

Multi-faceted, culturally appropriate allied health clinics continued to provide much-needed lifestyle education and group exercise classes, supported by a small but consistent group of attendees in Rockhampton. Sessions focused on providing patient-centred care – encouraging community members to take an active role in their health, and implement self-care health practices.

In the Sunshine Coast, the PHN built upon a strong relationship with North Coast Aboriginal Corporation for Community Health (NCACCH). The transition to NCACCH allowed clients broader scope to access services beyond the ITC model, and provide greater opportunities for improved health and wellness.

The PHN will continue to build authentic relationships with community representatives and those in the cultural health workforce to achieve this goal. The needs of our Aboriginal and Torres Strait Islander communities cannot be properly addressed without the strong ongoing relationships we fostered in the 2016-17 period.

MEET GORDON

Indigenous Project Officer

Central Queensland, Wide Bay,
Sunshine Coast PHN

I started working in health in 1999, at the Gympie Hospital as the Aboriginal and Torres Strait Islander Health Worker. In my time in the primary health sector, I've seen a lot of changes within health.

I started with the PHN in September 2016 as the ITC Care Coordinator in Bundaberg. For me, it was a new and rewarding experience to be able to support the Aboriginal and Torres Strait Islander community in the Wide Bay region. My role changed at the end of August 2017 and I now work as the Indigenous Project Officer which sees me work with the community more broadly.

Recently I attended the Aboriginal and Torres Strait Islander Suicide Crisis and Aftercare Workshop in Port Augusta on behalf of the PHN. I had the opportunity to network with other community members from all over Australia and talk about what's happening within our areas. I met with the CEO of Davenport Aboriginal and Torres Strait Islander Community who offered me to visit their community. Opportunities such as this have been an honour for me as a PHN staff member – to see first-hand some of the issues different population groups are facing and how other communities are supported by their Local Governments and PHNs.

My role within the Primary Health Network has allowed me to meet new people, gain new ideas and plan a healthier future for my community.





“ Our focus is
to commission
services that support
our communities to be
healthy throughout the
life span - not just when
they're unwell. ”

Mrs Pattie Hudson, CEO



OLDER PEOPLE

Older people (aged 65 years and over) have been identified by the 2015-16 PHN Health Needs Assessment as a priority population for our catchment.

In Central Queensland, the PHN introduced education and technology improvements in Residential Aged Care Facilities (RACFs). RACFs were equipped with telehealth functionality, and staff were trained to offer telehealth consultations, enabling better access to specialist services. The Australian College of Rural and Remote Medicine Telehealth online education module was also promoted within Central Queensland general practices to aid clinicians in rural and remote areas who work with ageing communities.

Access to primary health care services is a noted barrier to good health in the coastal areas to the east of Gympie. The PHN-facilitated Gympie Aged Care Sub-Group developed an aged care services guide, which was distributed to over 500 locations in the Tin Can Bay and Cooloola area.

Working groups from the Integrated Care Alliance (ICA) identified the issue of avoidable hospitalisations due to falls. The ICA hosted the first Falls Prevention Co-Design Forum in collaboration with the Sunshine Coast Hospital and Health Service in 2017. The forum provided a unique opportunity to bring together a wide range of stakeholders and consumer representatives to utilise the collective knowledge and experience of dealing with falls-related injuries.

Regionally, Practice Support Teams worked within general practice to implement the My Health Record system, with at-risk population groups in mind (including over 65s). A total of 234 general practices and 36 pharmacies were registered for the system within the 2016-17 period. A further 30,400 shared health summaries were uploaded. For elderly patients, or those managing complex conditions, My Health Record simplifies the referral process and strengthens the link between primary, pharmacy and allied health sectors.

MEET ANNA

Manager, Fresh Holistic Health Clinic

Supported by PHN Practice Support Officers

I am the manager of the Fresh Holistic Health Clinic on the Sunshine Coast - which includes an accredited medical clinic, an allied health clinic, a wellness living yoga studio and a community kitchen space. It's a beautiful place to work and we're really proud of what we do here. This centre is different in that we are a fully accredited health clinic by the Royal Australian College of General Practitioners, combined with a functional medicine holistic health centre - bringing together the best of both conventional and alternative medicine and wellbeing.

When I came on board here, I knew it was important for the clinic to become accredited so that we could offer patients the safety and security that comes with accreditation. Being a new clinic, the PHN made contact with us and we began a lovely, professional relationship. Lou from the PHN supported me greatly during this process - we had a lot of work to do, in a short time frame and we were starting from scratch. Amber, Lou and Juanita from the PHN team gave me so much structure and support in managing a large accreditation process in a really short time frame. Without the support of the staff at PHN, I'm not sure I could have achieved it alone.

PHN have now become our one-stop-shop for all relevant clinical enquiries. Juanita's support in implementing Closing the Gap strategies in our clinic has been another wonderful benefit of our work together. I felt very safe in the hands of the PHN staff - their experience and supportive nature allowed us to turn our weaknesses into strengths as a business.

I really feel it's a feather in our cap to have such a strong, ongoing relationship with our PHN.



CHRONIC DISEASE

Chronic disease management is a region-wide priority for the PHN, and as such, solutions to chronic conditions are based on local need.

The Central Queensland Chronic Disease Pilot Program commissioned chronic disease nurses in seven rural general practices to provide resources and tools to improve patient care. Outcomes of the program included the development of a structured Chronic Disease Management (CDM) program within practices for diabetes management, improved support for locum GPs via Domiciliary Medication Management Reviews, and better projected revenue for involved practices.

A multi-pronged approach to chronic conditions was taken in the Wide Bay. The Indigenous Wellbeing Centre directly targeted cardiovascular disease. People with existing cardiovascular conditions were provided consultations with a cardiologist and appropriate ongoing care.

In Gympie, the burden of chronic disease is evident within the township and surrounding areas. The PHN commissioned the Gympie Regional Council to introduce a chronic disease prevention program, designed to target multiple population groups across the life span continuum. The Healthy Towns Program funded a further four small, locally-designed programs aimed at reducing the impact of chronic disease within the Sunshine Coast and Gympie communities.

Locally-based, commissioned service providers delivered a range of chronic disease prevention and management services to target remote communities under the Rural Primary Health Services (RPHS) program.

RPHS focuses on providing affordable, accessible chronic disease prevention across the lifespan. Clients can be referred by a range of clinical channels, including general practice, social services, health services and community health days. Over 16,000 occasions of service, including podiatry, speech pathology, occupational therapy, exercise physiology and diabetes education were delivered in the 2016-17 year.

MEET MELINDA

Alcohol and Other Drugs Counsellor Drug Arm, Woorabinda

I am an Alcohol and Other Drugs Counsellor with Drug Arm in the PHN-funded Woorabinda clinic, acting as the first point of contact for drug and alcohol support.

I have amazing days here in Woorabinda. I meet so many community members with diverse and interesting stories to tell. Together, we look for creative ways to solve many of the issues we see in such a remote community. Even the local shops are a great place to have a yarn.

The people within this community are friendly – but strong too. They have a voice about their community, and their ways of life – that makes my job a lot easier. I provide drug and alcohol evaluations, referrals, advocacy and counselling support, interagency networking and capacity building, as well as community projects such as pantry days, twilight markets and healing camps for women – mums, girls and grandmothers.

Currently, I see 12 clients regularly, all with diverse issues around alcohol and other drugs. I had two clients who experienced homelessness, who now have their own homes and are making better decisions when it comes to alcohol. I also visit the local hospitals and high schools to have a yarn.

I've had lots of positive feedback working here and people are excited at the projects we're rolling out.

I am also very fortunate to have the support of the PHN staff here in Woorabinda - together we collaborate on community initiatives and support one another's ideas. These people have made me feel welcome from the minute I arrived and already I call Woorabinda my second home. Combined with the support from my DrugArm Agency, I feel empowered every day.



MENTAL HEALTH, ALCOHOL AND OTHER DRUGS

The National Mental Health Commission's review of mental health services recommended the introduction of evidence-based mental health reforms.

From early 2017, the PHN commenced a competitive tender process to commission mental health services under a stepped care approach under direction of the Department of Health and in collaboration with the mental health sector and Hospital and Health Services.

The stepped care approach is based on a hierarchy of interventions ranging from the well population to clients with complex needs, based on the individual's needs. With the stepped care approach due to take effect from early 2018, the PHN undertook extensive planning to ensure current services could transition to the new model without disruption to patient care.

Supporting the establishment of alcohol and other drug (AOD) services has been a relatively new area for the PHN. This year has seen the PHN establish strong strategic relationships to build a solid foundation for our role in the AOD sector. Comprehensive population health planning and service mapping has been essential to better understanding and addressing the complex needs of our communities.

Workforce capability and development has been an essential component of the PHN's AOD plan, along with culturally appropriate, evidence-based services and care, improved access to counselling and after hours support, and withdrawal services for high-needs groups.

Mental Health, Alcohol and Other Drugs Strategic Collaboratives were established across the region, with strong representation from professionals working within the sector. The aim of the groups was to create local-level relationships with those within the sector, and provide a level of governance

over PHN service mapping, funded activities and needs in the mental health, alcohol and other drugs sector.

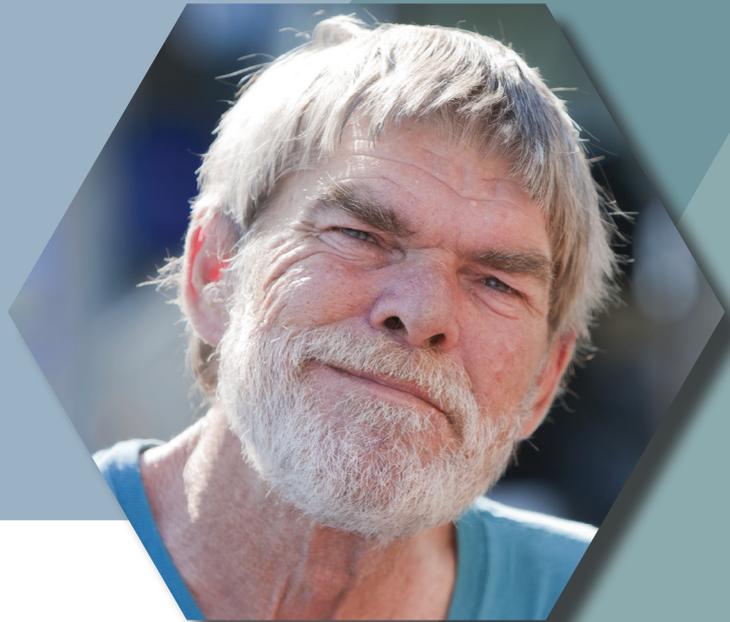
Practice Support Teams and PHN Data Management staff have facilitated the introduction of the newly introduced Primary Mental Health Care Minimum Data Set (PMHC-MDS), and have worked to reduce challenges for practices without sophisticated IT systems. As the PHN's role in mental health reforms develops, the PHN will continue to provide support and resources to mental health service providers.

Partners in Recovery (PIR) continues to deliver care coordination for people with severe and complex mental health needs. As the transition from PIR to NDIS nears, our focus is to ensure that clients and carers are well informed and prepared for impending changes. PIR's focus over this period is to establish NDIS-type services through the use of Individual Capacity Building funding, with the intention of providing a seamless transition for clients.

In February 2017, the Federal Department of Health announced that the Central Queensland, Wide Bay, Sunshine Coast PHN catchment would become one of 12 sites for the National Suicide Prevention Trial.

Supported by the Black Dog Institute, the trial aims to develop, establish and evaluate innovative suicide prevention activities, based on local need.

The PHN continues to value the role of community members with a lived experience of mental illness in service delivery, planning and commissioning. Direct access to those with a lived experience, as well as with representatives who volunteer their time to contribute to consumer and carer reference groups, ensured mental health solutions continued to be respectful and relevant to our local community for long term sustainability.



CONTACT US

info@ourphn.org.au | www.ourphn.org.au

Sunshine Coast

Ground Floor, Mayfield House
29 The Esplanade
Cotton Tree QLD 4558
t 07 5456 8100
f 07 5443 9100

Bundaberg

Ground floor
205 Bourbong Street
Bundaberg QLD 4670
t 07 4131 0800
f 07 4131 0899

Rockhampton

Level 1
44A William Street
Rockhampton QLD 4700
t 07 4921 7777
f 07 4927 2977

Gympie

Shop 2, 107 Mary Street
Gympie QLD 4570
t 07 5482 6770
f 07 5482 6723

Hervey Bay

Shop 3, 62 Main Street
Hervey Bay QLD 4655
t 07 4196 9800
f 07 4196 9899



The Sunshine Coast Health Network Annual Report 16/17 outlines the services commissioned and achievements made by the Central Queensland, Wide Bay, Sunshine Coast PHN during 2016-17. Visit www.ourphn.org.au for the latest information about services.

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