



Health Needs Assessment

Shaping how we serve the community

Our Primary Health Network

Western NSW Primary Health Network is one of 31 Primary Health Networks across Australia, established to support frontline health services and increase the efficiency and effectiveness of primary health care.

We work to improve the quality and access to primary health care in our community. Our organisation does this by funding health services and working closely with general practice, Aboriginal health services and other health care providers to improve the quality of care.

Programs we fund

- Mental health
- Social and emotional wellbeing
- Suicide prevention
- Drug and alcohol
- Chronic disease prevention and management
- Aboriginal health
- After hours
- Early intervention for children
- Cultural safety training
- General practice support and improvement
- Immunisation workshops and cancer screening program
- Aged and palliative care































A profile of our region

Area profile



- the largest area of any PHN in NSW



6%



Health Districts





Demographics



309,900

people live in our region

329,470

by 2036

Bathurst Cabonne Orange 24.1%

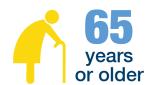
The Biggest growth

The Largest decline

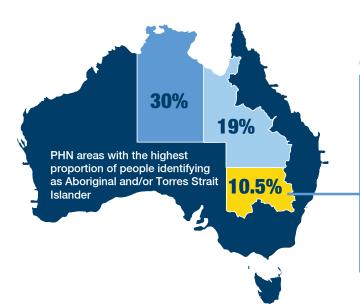
Walgett Weddin Lachlan

Compared to the NSW population we have MORE people





Aboriginal population



Our PHN has the

highest proportion of the total population identifying as Aboriginal behind Northern territory and Western Queensland PHNs

10.5% or just over 1 in 10 people in our region identify as Aboriginal and/or Torres Strait Islander Compared to 2.8% Nationally

How healthy are we?

Health risk factors



of people over 16 years **SMOKE** Compared to **15%** for NSW



26.5%
of people over
16 years are

Obese
Compared to
21.4% for NSW



32%
of people over
16 years consume
alcohol at levels posing long term risk
Compared to
29.8% for NSW

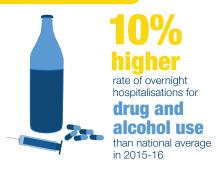
Health status



85.9% of Adults reported excellent, very good or good health

Lower than the Australian average 87%

Drug & alcohol



Mental health



20,155

patients had a

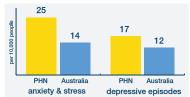
mental health treatment plan

created by a GP in 2015-16



Higher rates of overnight hospitalisations for

anxiety and stress disorders and depressive episodes



33.5% higher intentional self-harm hospitalisations

for males 15-24 years, than in NSW



16% higher 5-year average suicide rate

5-year average suicide rate than in NSW

Chronic disease



52.9%

of Adults reported having a long term health condition

5.4% higher than the Australian average of **50.2%** in 2015-16

23,690

patients received a GP **Health assessment**

for a **Chronic disease**

1.021

patients received GP Chronic disease treatment plans in 2015-16 20,000+

people are registered with the

National Diabetes Service Scheme

11% MORE

people reported having a disease of the circulatory system than the national average

What is a health Needs Assessment?

A Health Needs Assessment is a detailed research project that helps us understand where there are service gaps and unmet need in the community, so we can direct services to these areas.

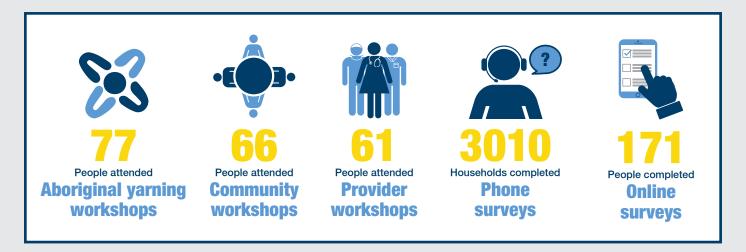
Our needs assessment is a collaboration with the Western and Far West NSW Local Health Districts, Health Intelligence Unit and other stakeholders that aims to improve the whole health system in our community. This needs assessment helps us plan where to direct future funding how to improve our services to meet community needs as well as connect existing service to improve access.

How we did it

More than 3,300 people participated in our needs assessment. The project was guided by our Advisory Committee. Data was collected through:

- Analysis of population and health data plus consultation
- Telephone and online surveys
- Aboriginal yarning workshops
- Community consultation workshops
- Health professional workshops







The priorities for our region

During the consultation these were the issues you told us needed to be addressed.



Mental health

- High or very high psychological distress in Western NSW
- Mental health hospital bed days 26% higher than national average
- Mental illness is often a barrier to accessing other services
- Mental illness hospitalisations are 87% higher in Aboriginal people than non-Aboriginal



Access to services

- Limited access to specialists
- · Low availability of after-hours GP services
- Travel distance and transport availability to visit services
- · Cultural safety of services important to ensure access for all



Health workforce

- Unequal distribution of GPs across the region
- Health professional recruitment and retention, high turnover leads to dissatisfaction with GP services
- Shortage of allied health professionals
- Lack of mental health professionals



Health system coordination and improvement

- A lack of change management when health services and programs cease
- Poor coordination between healthcare providers
- Records not being shared
- Current referral pathways not adequate



First 2000 days of life

- 30% higher rate of mortality for 0 4 compared to NSW average
- 45% higher rate of mortality in Aboriginal children in WNSW PHN compared to non-Aboriginal children
- Highest rate of low birth weights of any NSW PHN
- Highest rate of smoking in pregnancy of any NSW PHN





Health of Aboriginal people

- PHN hospitalisations in Aboriginal people is around twice that in non-Aboriginal people
- · Lack of culturally safe services
- Need more transport to services and appointments and coordination of care
- High levels of chronic disease risk factors, yet little focus on prevention



Chronic disease management

- Cardiovascular disease is the leading cause of deaths in the PHN
- Cancer is the second leading cause of deaths in PHN residents
- Respiratory disease is one of the leading cause of deaths and hospitalisations
- Low health literacy impacts on ability to self-manage complex conditions



Digital health

- Secure messaging still not widely interoperable for health professionals
- Telehealth not being fully utilised to access services in rural and remote communities
- Telehealth not considered appropriate for all mental health patients, but can be beneficial for some
- Poor internet connectivity a barrier to using telehealth in remote communities



Alcohol and drugs

- Highest rate of alcohol attributed deaths of any NSW PHN
- Alcohol attributable hospitalisation rates for Aboriginal people was more than double that for non-Aboriginal people
- Increase in rate of illicit substance related ED presentations
- Need more alcohol and drug detox and rehab services



Aged care and older people

- Social isolation older people feel forgotten, poor health literacy and computer literacy
- Aboriginal Elders felt that young people lack respect for older people
- Barriers to assessment and access to MyAgedCare packages for clients and GPs
- Exclusion of NDIS access for those aged 65 years and older



What are the solutions

This is what you told us we should include in services

Mental health

- "Better coordination between the different mental health services in our region is needed."
- "Services have to take into account gender and age and be culturally safe."
- "The focus should be on the recruitment and retainment of professionals, especially mental health nurses."

Health of Aboriginal people

- "There should be an acknowledgment of Aboriginal Elders as cultural advisors to provide traditional insight when developing programs."
- " More healthy lifestyle programs across all life stages."
- "We need co-designed services which are community-led and centred."

Access to services

- "There aren't enough locally available allied health services."
- "More GPs are needed to provide people with access to a doctor in their town."
- "Long specialist waiting lists, affordability and travel distance is a barrier for many people."

Chronic disease management

- "More general practice-based services including chronic disease practice nurses, Aboriginal health workers and visiting allied health workers."
- "There is a need for chronic disease prevention programs across all life stages, that are culturally safe, co-designed, evidence-based and community led."

Health workforce

- "More training and support are needed for medical staff."
- "The cultural competence of healthcare providers needs to be improved."
- "Stop high turnover of GPs in rural and remote areas."

Digital health

- "Need more GP telehealth and specialist services in Residential Aged Care Facilities."
- "Improve telehealth education for staff at remote sites."
- "There is a lack of Medicare Benefit Scheme rebates for many telehealth consultations."

Health systems coordination and improvement

- "Better promotion and awareness of the services which are available is needed."
- "Better connection and coordination of services is essential."
- "Referral pathways must be improved, often we don't know who to refer to."

Alcohol and other drugs

- "More detox and rehabilitation services close to home are needed, particularly for those exiting prison."
- "Gender-specific services are crucial and more programs for men to address drug and alcohol issues."
- "Culturally safe school and after-school programs addressing drug and alcohol use are needed."

First 2000 days of life

- "Fathers should be included and involved in support services."
- "There needs to be more awareness... about foetal alcohol spectrum disorder, especially in remote communities."
- "More education and support for parents on how to give their kids a healthy lifestyle."

Aged Care and older people

- "Culturally safe in-home care support services for Aboriginal people are needed."
- "Transport to health appointments needed."
- "There needs to be greater investment in falls prevention programs."

Our achievements



Launched new mental health programs **Rural Youth Mental Health** and **New Access** to **expand preventative mental health services** for the region's **young, rural and remote and Aboriginal people.**



More than \$1 m has been given to drought-hit communities through the Empowering our Communities grants program.



Working with **NSW Rural Doctors Network** and **Local Health Districts**to address workforce shortages and create a **workforce strategy**.



Expanded the use of technology to deliver positive health outcomes for diverse groups of people in regional and remote areas such as the **Telehealth in Residential Aged Care** (TRAC) program.



Leading the development of a **Regional Mental Health Plan** to co-ordinate services across the region.



In 2018/19 we allocated more than to **meet the primary health** care needs of our communities.



In support of the My Health Record extension program our digital health team visited;

- 109 locations across
- iii 26 local government areas to speak with communities.
- 98% of general practices in Western NSW are now registered to use MHR.



Strengthened consumer engagement as **one of the first PHNs to complete** the **Collaborative Pairs program** in partnership with the **Consumer Health Forum of Australia.**



Professional Development education sessions to more than 2000 health professionals in the last year.



Our region leads the country in the rate of children aged 5 who are fully immunized at 95%.

More information

Find out more at: www.wnswphn.org.au

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