

Stories of innovative primary care solutions for lasting impact: improving health and wellbeing outcomes for all in Brisbane's south.



New! Urgent Care Clinics

2 Medicare Urgent Care Clinics open in Brisbane's south, providing free, walk-in care for urgent conditions. Read more inside.

Free! My Health Journal

This simple, free tool helps people living with dementia and their carers to keep track of healthcare appointments and important communication.

Community-centric healthcare: it takes a village

The health and wellbeing strategy paving the way for holistic and culturally responsive approaches to healthcare with Pasifika and Māori peoples in Brisbane's south.

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This simple, free tool helps people living with dementia and their carers to keep track of healthcare appointments and important communication.



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Children's Hospital Queensland CEO, Frank Tracey (left) and Brisbane South PHN CEO, Mike Bosel signed a renewed Partnership Protocol between our organisations.



CEO's Message

Dear Readers,

As the calendar year comes to a close, I am proud to reflect on the progress and milestones achieved in partnership with our communities, health care providers, and system partners. Our joint mission to provide accessible and effective health care throughout our region has seen the launch and growth of initiatives that have made a tangible difference in our communities.

This year, we celebrated the opening of two Medicare Urgent Care Clinics in Brisbane's south.

These clinics offer free, walk-in care for urgent but non-life-threatening conditions, filling a critical gap in our healthcare infrastructure. Inside this issue, you'll find more on how these clinics are helping to increase people's access to urgent care, helping to reduce pressure on emergency departments.

We also introduced the My Health Journal, a free resource designed to assist individuals living with dementia and their carers. This journal is a simple yet vital tool for keeping track of healthcare appointments and important communications, empowering patients and their support networks.



This year's May Budget brought the exciting announcement of dedicated funding for multicultural health programs. Brisbane South PHN, a long-time advocate of culturally informed health approaches, is leveraging this to enhance health literacy and access. Our Pasifika and Māori Health and Wellbeing Strategy 2020-25 exemplifies this, focusing on holistic, culturally responsive care. I invite you to read our detailed update on our progress on page 3.

Reflecting on the year, it's evident that partnership and community engagement have been the cornerstones of our success. The stories shared here represent just a sample of our collaborative journey toward a more inclusive, responsive health system.

Our SMBI (Southern Moreton Bay Islands) initiative, featured on page 16 stands out as a model of community-led health transformation. Operating on the principle of 'Nothing about us without us', it's a testament to how community involvement is crucial in healthcare.

Finally, I extend heartfelt thanks to our system partners, healthcare professionals, our Clinical and Community Councils, Member organisations, and my team for your unwavering dedication and support.

Your passion and expertise are vital to our mission of improving the health and wellbeing outcomes of all people in our region, especially for those who need it most. As we look to the future, our continued partnerships and collaboration promises to sustain and grow our region's legacy of innovation in healthcare, as we work together to shape a system that meets the health needs of every person.



Warm regards,
Mike Bosel
CEO, Brisbane South PHN



Brisbane South PHN acknowledges the Aboriginal and Torres Strait Islander peoples of this nation. We acknowledge the Traditional Owners of the land across which we work. We recognise their continuing connection to land, water and community and pay respect to Elders past, present and future.

In the spirit of reconciliation, we will continue to work together with Aboriginal and Torres Strait Islander peoples to shape a health system which responds to the needs and aspirations of our communities.

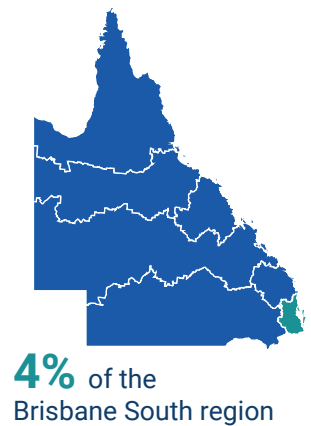
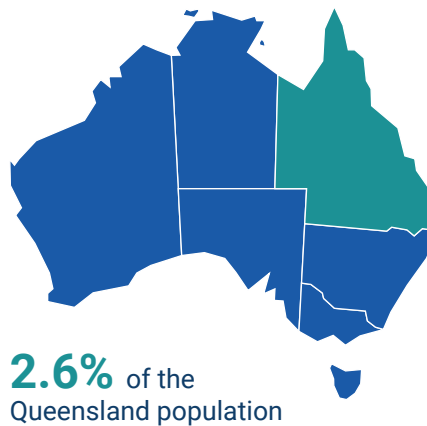
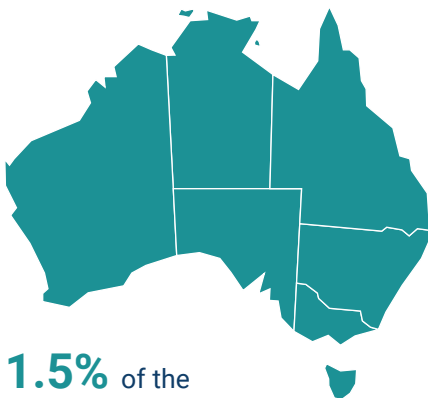
Pasifika and Māori Health and Wellbeing Strategy: it takes a village

Key points:

- Brisbane South PHN, Metro South Health and Children’s Health Queensland have collaborated with local service providers and community to provide a unified approach. Our shared objective is to support Pasifika and Māori¹ peoples to thrive.
- The Pasifika and Māori Wellbeing Strategy 2020–25 guides this cross-sector collaboration.
- While Pasifika and Māori peoples make up 1.5% of the Australian population, this almost triples to comprise 4% of the Brisbane South population, or approximately 52,000 people.
- Anecdotal evidence suggests the Pasifika and Māori community is over-represented in poor health and wellbeing outcomes in the Brisbane south region.



Pasifika and Māori population snapshot:



Background

The Brisbane south region is home to approximately 52 000 people of Pasifika and Māori decent.

Although many Pasifika and Māori communities are thriving overall, there are a significant number of long-standing health inequities and poorer health outcomes for Pasifika and Māori people compared to those of the total Queensland population.

A new approach was needed to improve engagement with preventative public health services.

Pasifika and Māori Health and Wellbeing: A Strategic Framework and Action Plan for Brisbane South 2020-2025 articulates a shared vision, values and priorities for Pasifika and Māori health and wellbeing in the Brisbane south region.

This approach is significant because:

- We’re taking a unified, cross-sector approach to improve health outcomes.
- The strategy helps Brisbane South PHN plan, consult and develop services that respond to current and future health needs.
- By collaborating with sector partners on solutions, we can deliver more effective health policy.
- It provides a framework to promote a culturally safe and community-embedded approach to preventative healthcare.
- It’s a true partnership between state and federal governments and the community. Engaging with community as partners in a meaningful and respectful way is critical to our success.



Our vision is to provide a collaborative, family-centred and culturally responsive approach for Pasifika and Māori peoples in our region.

Key focus areas

The strategy sets out three main priority areas:

Priority area	Our approach	Why is this important?
Long-term wellness	Support the community to live healthy lives by effectively preventing and managing health conditions.	There are high numbers of hospital admissions for Pasifika and Māori peoples with chronic conditions. Compared to the general population, Pasifika peoples are twice as likely to be admitted to the Logan, Redland or Queensland Elizabeth II Hospital with a preventable chronic complication ² .
Maternal and child wellbeing	Ensure mothers have healthy pregnancies and births, and babies are given the best start to life.	Pasifika and Māori women have high rates of gestational diabetes and hypertension, but low use of antenatal services.
Mental wealth	Take a holistic and strengths-based approach to mental health, aiming to reduce stigma and remove cultural taboos.	Anecdotal reports suggest Pasifika and Māori peoples in Queensland experience disproportionate levels of mental illness but under-utilise mental health services ³ . This is because mental health services are not culturally responsive and don't take a cultural and holistic perspective of mental illness.



How is this strategy different?

Despite significant work over the past 30 years, there have been limited successes in improving the health and wellbeing of the Pasifika and Māori community. This has led to distrust from community members.

‘With this strategy, we made a conscientious decision that implementation would occur from the beginning,’ said Eden Malama, Brisbane South PHN’s Program Coordinator of Palliative Care and Multicultural Health.

‘This is a true commitment across all health services, both federally and state-funded, with Brisbane South PHN, Metro South Health, and Children’s Health Queensland collaborating as health sector partners.’

Mr Fa’avale said: ‘This framework says, how about we get together as a community and government and we reach out to the community, rather than them walking into the clinic? We’re hoping to take health to the people.’

Why is a culturally informed health strategy needed?

‘The clinical lens doesn’t often consider social determinants of health,’ explained Ms Malama.

Cultural differences surrounding the concept of health and wellbeing have also traditionally been overlooked by mainstream public health models.

‘For instance, a GP might automatically refer someone with diabetes to an endocrinologist and dietitian. But this doesn’t necessarily work for the community. They might say, “we’re a one-income family and dietitians and specific meals don’t resonate with our culture. They’re also really expensive’, said Ms Malama.

During community workshops, Ms Malama has heard from people who would be willing to see their GP but are reluctant to obtain a chronic disease management plan without knowing what it is and what it does.

‘While clinical outcomes may not yet be obvious, it’s important to understand that taking a holistic approach will impact clinical outcomes organically,’ she said.

As another example, a community member struggling with depression and unemployment might prioritise finding a job rather than focusing on their mental health. ‘The clinical health issue won’t be prioritised for the community,’ Ms Malama explained. ‘However, because we’ve taken a cross-sector approach and linked in employment services, the social determinants are naturally improving.’



What has been achieved?

Outcomes will start to be evaluated in 2024, but Ms Malama says the strategy is on track. So far, the following results have been achieved:

- Quarterly workshops have been held on important health issues for the community, including diabetes, mental health, suicide prevention, and vaccine-preventable diseases. At least 30 community members have attended each workshop, which allows us to hear directly from the community about the solutions that would work for them.
- A Village Connect Hub has been established with many cross-sector partnerships available in one location, including a Maternity Hub, allied health, HeadStart Queensland, child health nurses and a play group.
- Free interpreting services are available to all mental health service providers commissioned by the PHN.
- A free Working with Pasifika Peoples course is available for community professionals and practitioners.
- Fortnightly healthy hearing clinics have been set up to test babies' hearing.
- A COVID outreach program helped over 500 people get vaccinated.

- A Community Connector Team Leader role has been funded to help integrate services with the Village Connect Hub. Community Connectors play an integral role in helping mothers feel supported and well-connected throughout their pregnancy.

'We're not just focused on clinical outcomes, but also cultural and community outcomes,' Ms Malama said. 'Once we have a good balance of both, clinical outcomes will improve. We are already re-building trust in GPs with the community.'

How can you support us?

- Visit <https://pasifikamaorihealthstrategy.org.au/> to find strategy updates, data, reports, and culturally appropriate health resources.
- Learn more about being culturally responsive by signing up for the next Working with Pasifika Peoples course. It involves a pre-reading component and face-to-face training. We're looking to host a course for GPs in the new year, so look for details on our website: bsphn.org.au
- Join our next workshop in February 2024 and hear directly from the community. Keep an eye on Primary Health Matters e-newsletter for more information or email the multicultural team on multiculturalhealth@bsphn.org.au

¹We use the term Pasifika and Māori to represent the peoples from the following island nations: New Zealand, Niue, Samoa, American Samoa, Tonga, Cook Islands, Hawaiian Islands, Rotuma, Midway Islands, Tokelau, Tuvalu, Cook Islands, French Polynesia, Easter Island (Rapa Nui), Papua New Guinea, the Indonesian provinces of Papua and West Papua, New Caledonia, Vanuatu, Fiji, Solomon Islands, Northern Marianas Islands, Guam, Wake Island, Palau, Marshall Islands, Kiribati, Nauru, and the Federated States of Micronesia.

²Metro South Hospital Admission Patient Data, Jan–April 2019. This data identifies Pasifika peoples based on Place of Birth only, therefore Māori peoples were unable to be identified from the total patients born in New Zealand.

³Pathways to achieving complete social, emotional and spiritual wellbeing: The Pasifika and Māori community vision for culturally safe mental health support services in south-east Queensland. Pasifika and Māori Mental Health Forum, Official Report. Brisbane, June 2015.

Medicare Urgent Care Clinics open in Brisbane's south region

Key points

- Two Medicare Urgent Care Clinics (UCCs) are now open in the Brisbane South PHN region.
- The South Brisbane Medicare UCC, is located at Cornwall Street Medical Centre in Woolloongabba.
- The Logan (Browns Plains) Medicare UCC is located at the Browns Plains Medical and Dental Centre.
- Medicare UCCs are funded by the Australian Government to help ease pressure on hospital emergency departments.

What are Medicare Urgent Care Clinics?

Medicare Urgent Care Clinics (UCCs) are designed to bridge the gap between the general practice (GP) care and hospital emergency departments, helping to reduce patient wait times and ease pressure on hospitals.

Two new clinics are now open to patients in the Brisbane South PHN region, located in Browns Plains and Woolloongabba.

Medicare UCCs are open for extended hours, 7 days a week, for the treatment and care of minor illnesses and injuries. They are staffed by qualified doctors and nurses for walk-in, bulk-billed urgent care.



Why do we need Medicare Urgent Care Clinics?

Each year, thousands of people present to hospital emergency departments with non-life-threatening conditions that could be treated in the primary care system.

Added to this mix, is a growing number of people living with chronic illnesses who experience acute but non-life-threatening episodes which can escalate to requiring a hospital admission – treatment which may otherwise have been prevented through timely access to urgent intervention and management in the primary care setting.

Consequently, in the 2023-24 May Budget, the Australian Government announced it would fund 58 Medicare UCCs – 11 in Queensland – to complement existing state-run emergency diversion initiatives.





Strategically located close to local hospitals, the Medicare UCCs make it easier for people to get the urgent treatment they need while helping to take pressure off local emergency departments.

Locate your nearest Medicare Urgent Care Clinic

There are 2 Medicare UCCs operating in the Brisbane South PHN region. The first UCC opened in the Logan area on 14 August 2023 and the second opened in South Brisbane on 23 October 2023.

Logan (Browns Plains) Medicare Urgent Care Clinic

Address: Browns Plains Medical & Dental Centre, 2-10 Grand Plaza Drive, Browns Plains

Opening hours: 7 days a week, 8am – 10pm

Easing pressure on: Logan Hospital

More than 22% of Emergency Department cases at Logan Hospital are classified as semi or non-urgent.

South Brisbane Medicare Urgent Care Clinic

Address: Cornwall Street Medical Centre, Level 4/20 Cornwall St, Woolloongabba

Opening hours: 7 days a week, 8am – 8pm

Easing pressure on: Mater, Queensland Children's and Princess Alexandra Hospitals

An average of 30% of emergency presentations at these three hospitals are classified as semi or non-urgent.

Other Queensland UCCs open now: Gold Coast, Ipswich, Murrumba Downs (Redcliffe), Toowoomba.
Opening by the end of 2023: Bundaberg, Cairns, North Brisbane, Rockhampton and Townsville

What can Medicare UCCs treat?

Medicare UCCs can treat urgent but non-life-threatening illnesses and injuries. They are suitable for conditions that can't wait for a regular GP appointment but don't require a trip to emergency, such as minor infections, sprains, urinary tract infections, and minor burns.

They are not suitable for people with major trauma or complex conditions. These patients will be escalated to their local hospital.

Although Medicare UCCs offer free, walk-in care to all, the funded service is limited to the scope of delivering urgent care. Should a person not require urgent care, they will be referred on to their nominated GP for further assessment and management.



General Care

This is your regular, trusted doctor.

Visit primary care for:

- General screening and health checks
- Vaccinations and prescriptions
- Mental health advice
- Family planning advice
- Referrals for tests, scans or specialist care

Contact your GP



Urgent Care

Free treatment for urgent conditions that aren't life threatening.

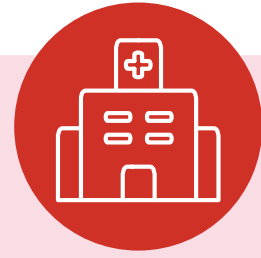
medicare

Urgent Care Clinic

Visit an urgent care service for:

- Minor infections
- Minor fractures, sprains, sports injuries and neck and back pain
- Urinary tract infections (UTIs)
- Sexually transmitted infections (STIs)
- Minor cuts
- Insect bites and rashes
- Minor eye and ear infections
- Respiratory illness
- Gastroenteritis
- Mild burns

Visit an Urgent Care Clinic



Emergency Care

Emergency departments should be reserved for situations that could result in loss of life or limb if not treated immediately.

Seek Emergency care for:

- Chest pain or tightness
- Breathing difficulties
- Uncontrollable bleeding
- Severe burns
- Poisoning
- Numbness or paralysis
- Unconscious, unresponsive, or having seizures
- Ongoing fever in infants

Go to nearest ED or call 000

Further information for GPs

Can I refer patients to a Medicare UCC?

Yes. Patients don't need an appointment. If they are experiencing one of the urgent issues outlined above, you can send patients to your nearest Medicare UCC.

Will patients opt for a UCC instead of a GP?

No. GPs are still the first point of contact for non-emergency, routine and preventative health care.

There are limited MBS items that patients can access at the Medicare UCC. Medicare UCCs won't be able to see people for things like chronic disease management or preventive health procedures such as cervical screening tests.

If no urgent care is required, patients will be referred back to their GP. If patients don't have a regular GP, the Medicare UCC will help them find one.

Will I know if one of my patients has received care at a Medicare UCC?

Yes. Any patient attending a Medicare UCC will have a discharge summary issued. The summary will be:

- uploaded into My Health Record (unless requested not to do so by the patient)
- electronically provided to the patient's nominated usual GP/practice within 24 hours.

If electronic transfer is not possible or the patient does not name a usual GP, the patient will be given a hard copy of the discharge summary.

The Medicare UCC will also advise the patient's nominated usual GP of any test results.

”

“From broken bones to burns, coughs, colds or cuts - you can head straight to the clinic rather than to the emergency department.”

- The Hon Mark Butler MP





Supporting community leaders to be health literacy champions

The Brisbane South PHN region is culturally diverse, with more than one third of the population born overseas compared to one quarter in the wider Queensland population.

More than 46,000 people in our region report they speak English 'not well' or 'not at all' (double the Queensland average), and Brisbane's south has the largest refugee resettlement in Queensland.

While our diversity creates a rich and vibrant culture, it's more difficult for culturally and linguistically diverse (CALD) communities to access healthcare services. This has an adverse impact on health outcomes.

CALD communities typically experience higher rates of chronic conditions, driven in part by a lack of interpreting services and lower health literacy around treatment and self-management of illnesses. People from CALD backgrounds also report experiencing cultural and language barriers, stigma and discrimination.



Corporate Services

Employment & Training
Community Support

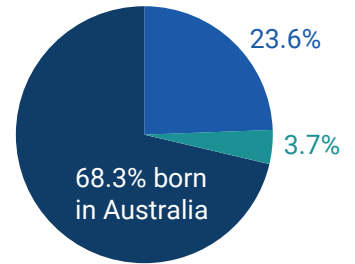
PLEASE TAKE SEATED
PLEASE AT
RECEPTION



Brisbane South PHN region

31.7% of the population were born overseas, making us the most culturally diverse region in Queensland.

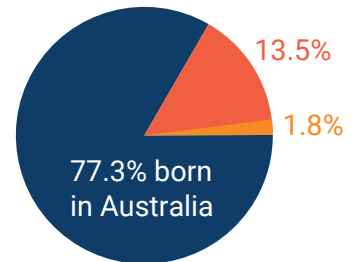
- **23.6%** speak a language other than English at home
- **3.7%** speak English 'not well' or 'not at all'



Queensland

22.7% of the population were born overseas.

- **13.5%** speak a language other than English at home
- **1.8%** speak English 'not well' or 'not at all'



How can we improve health outcomes for CALD communities?

Knowing the challenges for CALD communities, Brisbane South PHN partnered with Mater Refugee Health to establish a health literacy project. Our shared objective was to equip natural leaders with skills to help their communities look after their health.



‘Natural leaders are people of influence within their CALD community. They play a critical role in supporting their communities to look after their health.’





MultiLink
Community Services Inc.



To support CALD communities, we have:

- Trained 30 natural leaders, trusted community members and 18 bicultural workers in 'Navigating the Australian Health System'.
- Supported natural leaders to co-design material, tailor information and deliver content about the health system in an engaging and meaningful way.
- Developed a resource guide on navigating the health system for Queensland humanitarian arrivals. These guides are co-designed with the community and used in community health education sessions. They are currently available in English and Swahili, and will soon be available in Arabic, Farsi, Dari, Somali and Burmese.

How has health literacy improved for CALD communities?

Since the program began in 2021, natural leaders have delivered health information to almost 2,000 CALD community members.

One program participant said: 'After this workshop, I will take my medication correctly and tell my doctor if I'm on different medications. I learnt how to communicate with others and how to access medical services.'

While natural leaders play a critical role in improving their communities' health literacy, it can be taxing for them to provide ongoing mental and emotional support.

To address this, we funded Queensland Program of Assistance to Survivors of Torture and Trauma to develop a program to support natural leaders. The goal was to help leaders better manage their own needs and support their mental health.

The program has proved successful, with one participant saying: 'Previously I would not share my problems or feelings with any of my peers, but after the workshops I feel comfortable talking to [them]. We know that the discussion is confidential, and it really helps. There is always somebody who has some advice, and we support each other.'

Learn more

Visit our website for more information and links to resources for working with multicultural communities and people of CALD backgrounds:

<https://bsphn.org.au/support/for-your-patients-clients/multicultural-communities/>





Locals leading the way: The SMBI story of community-driven health transformation

Key points

- The Southern Moreton Bay Islands are comprised of Karragarra, Lamb, Macleay, and Russell Islands.
- Isolation from the mainland leads to social and health inequities. Rates of unemployment, socio-economic disadvantage, and child development issues are high.
- Brisbane South PHN has been working with SMBI Listeners Inc. and other key partners for five years.
- We've primarily focused on improving the health and wellbeing of children aged 0–8 and building relationships and trust with the community.
- This has led to increased engagement with health services, a collaborative culture, and a shared learning environment.

Gone are the days where a one-size-fits-all medical approach was the accepted norm for public health services. Today, mainstream concepts of health are being viewed through a wider lens, acknowledging the intricate patterns formed by societal, structural, and institutional disparities experienced by people and communities across the globe.

Here, in Australia, the shift towards more nuanced public health models is palpable. More and more, governments and health system partners are coming to accept that programmatic solutions are not the sole answer to closing population gaps in health and wellbeing outcomes. It calls for the peeling back of layers of top-down bureaucracy to discuss, plan and co-design health care initiatives with community there at the table; it requires listening and learning from the very people the system aims to serve.

Enter the Primary Health Networks (PHNs), positioned uniquely as local, independent health care commissioning entities. Their mandate? To champion and partner for person-centred, community-led healthcare strategies that resonate at a grassroots level, helping to transform health outcomes for vulnerable communities.

A case in point is the vibrant community initiative unfolding on the Southern Moreton Bay Islands (SMBI), championed by Brisbane South PHN and key health system partners. Here, a new narrative is being written, one that prioritises the health and wellbeing of its residents, particularly the children and families, through innovative, community-led interventions.

A closer look at the Southern Moreton Bay Islands

The Southern Moreton Bay Islands (SMBI) are a group of four islands – Karragarra, Lamb, Macleay, and Russell – located near the south-west point of North Stradbroke Island and 20 minutes by ferry from Redland Bay. The islands are home to around 750 families and 10,000 people.

The lifestyle is peaceful and relaxed, but the community’s separation from the mainland also brings its greatest challenge – inadequate access to health and social services.

The only way on or off the islands is by ferry, barge or dinghy, and residents need to have a car on the mainland or rely on public transport once they get there.

This means a trip to seek health services on the mainland can take a whole day. Some residents report sleeping in their cars if they can’t get home after an appointment.

Many of the children and families living on the islands are vulnerable, with access issues compounded by significant societal disadvantages.

	SMBI population	Queensland population
Socio-economic quintile	94.1% in most disadvantaged quintile	20% in most disadvantaged quintile
Unemployed	9.3%	3.8%
Median total income	\$455 per week	\$787 per week

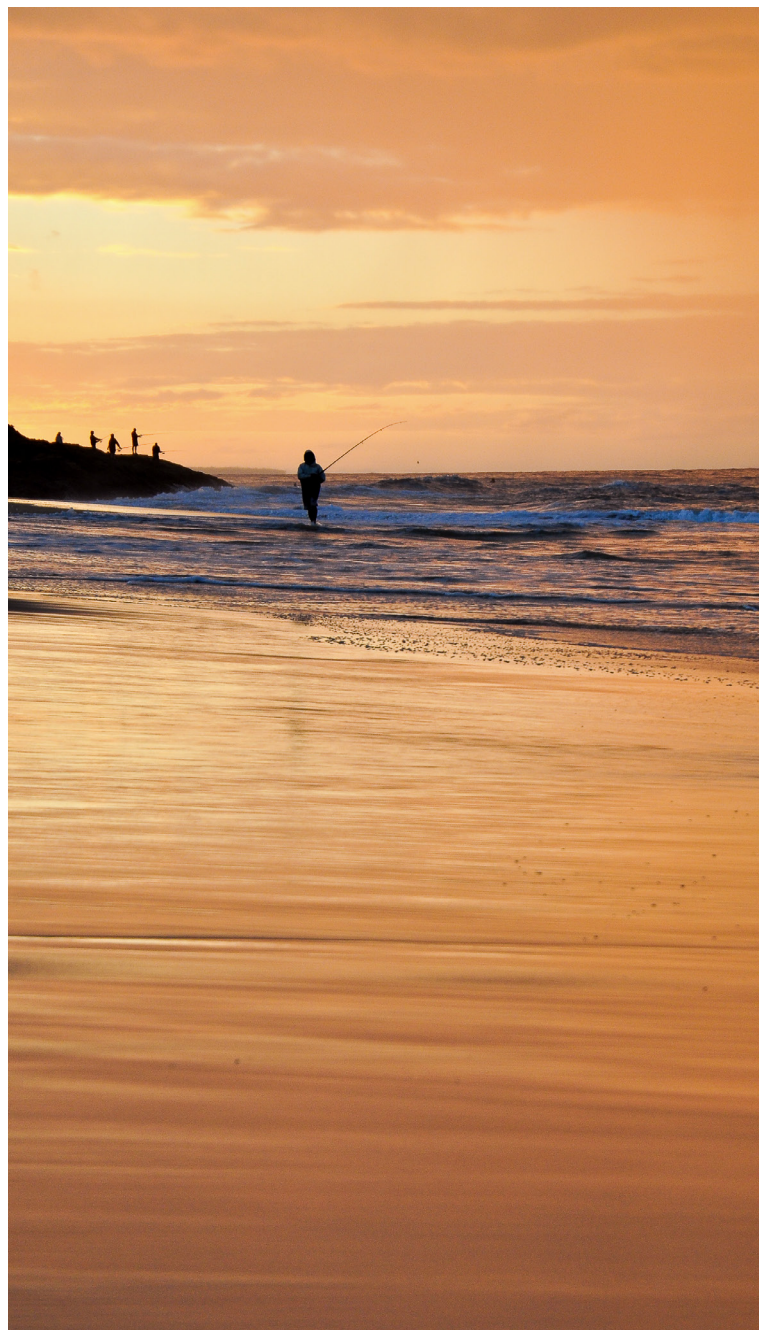
Further, child development issues and the rates of domestic and family violence are some of the highest in South East Queensland.

Social and health funding: what hasn’t worked

In the past, social and health funding focused on the broader geographic catchment area of Redland Bay.

Mainland models of care didn’t understand or cater to the unique cultural needs of the SMBI community, with funding support for the islands traditionally seen as an ‘uncosted add-on’.

As a result, the community reported they rarely felt consulted, did not feel heard and never felt part of the solutions offered.





The SMBI Community Impact Initiative

While the SMBI community has numerous skills, strengths, and lived experiences, they were unable to access the healthcare and social services they needed. Government data and community conversations indicated that challenges were entrenched beyond the scope of any individual program to effectively address.

A new approach was required to understand what it might take to provide accessible, culturally informed and inclusive services and programs to children and families in the community.

In response, the PHN opted to strategically lead a different, innovative way of working. With a foundation in international research and evidence, we began tackling historically poor health and wellbeing outcomes of SMBI children and families by applying an adaptive learning approach, with community voices leading the way.

We have been working in partnership with SMBI Listeners Inc. and other key partners for five years. Together, all have contributed to developing the SMBI Community Impact Initiative. The objective is to improve the health and wellbeing of SMBI children from birth to 8 years old, as well as their families, while bringing to life a place-based community-led approach.

We have four focus areas, as agreed in 2020 by the SMBI Community Governance Group:

- Healthy, thriving children
- Healthy family relationships
- Strong and connected community
- Wellbeing and recreational activities for school-aged children

What's different about this approach?

The SMBI Community Impact Initiative is designed to support and grow a sustainable, adaptive learning ecology, via a community-driven, cross-sector, place-based approach.

Why community-led?

'The approach is fundamentally collaborative. We respect and value community leadership and input through SMBI Listeners Inc.,' said Craig Cunningham, Brisbane South PHN's Senior Program Development Coordinator – Child and Youth.

SMBI Listeners Inc.¹ was established to develop community agency, bring a nuanced perspective, and help enable community voices and insights to be known when making decisions about them. It serves as a conduit between the community, healthcare and education system partners.

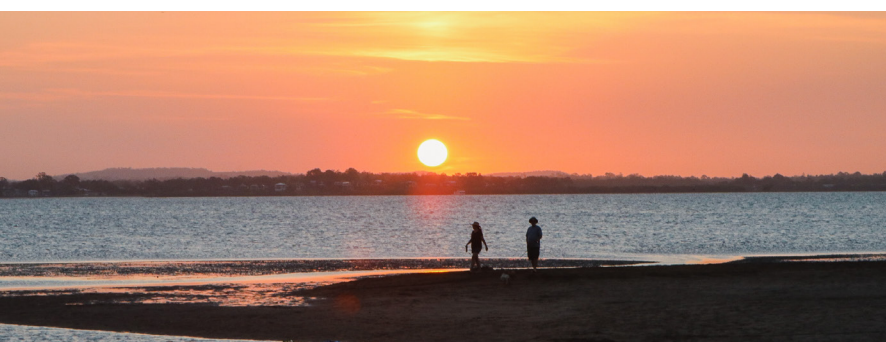
'Whenever possible, we must ensure community voices are at the table when making decisions that affect them,' said Mr Cunningham.



Since 2018, SMBI Listeners Inc., service providers and stakeholders have had around 4,000 conversations with community members. SMBI Listeners Inc. has a level of legitimacy and trust within their community that enables them to listen to, quickly connect with, and further support residents' needs. These conversations ensure the community has a voice – not just in response to the funding of services, but in how health care is designed, delivered, and experienced by children and families.

The SMBI way of working is also wishing to amplify and explicitly acknowledge the role families, carers and numerous community members play in improving the health and wellbeing of children and families. It's not all about services - The community led hubs and family groups are but one example of this. Community supporting community!

In short, 'Nothing about us without us'.





Why cross-sector?

It's widely recognised that health outcomes are influenced by many factors beyond the traditional scope of health service models. Adopting a cross-sector community led approach has enabled community and services to work better together, including integrating the service experience when appropriate. Strengthening relationships and trust between the community and between service providers has led to positive results, including:

- Services and the service experience being co-designed and co-produced, such as a hybrid-designed child development service and e-health experience
- Community leaders involved are more confident, and have strong respectful relationships with service providers. This is making it easier to identify problems and design and test solutions together
- Service delivery partners have a better understanding of the unique challenges and problems that matter to the community and that can drive change.
- The community is engaged and mobilising. For example, as active members of the Community Governance Group and the SMBI Innovation Lab.

Why place-based?

SMBI Listeners Inc. intimately understands their own community and arguably how best to engage and mobilise residents. This has been instrumental in developing trust and understanding between system partners and the community.

'I'd suggest the SMBI approach is different to other place-based work around Australia', said Mr Cunningham. 'We are collectively taking responsibility for creating and protecting safe learning environments – so together, we're growing a sustainable learning ecology, where we use collective intelligence to experiment - to try, test and learn what works for SMBI. We are generating context specific, practice-based evidence.'

'A service provider might have exceptional clinical expertise, but they can't do good work if the community doesn't know about or trust them. There may be critical interdependencies sitting beyond the control of an individual service. Those interdependencies need to be known and actors need to have line of sight of these. Often we need to play well together to get the job done. A healthy learning ecology is like a fine orchestra - we all have a role to play.'

Amy Fernando, Manager of SMBI Listeners Inc., agrees that trust is paramount to the initiative's success. 'A lot of parents haven't had a great experience with schools or health services in their past, so it's very difficult for them to cross the threshold of a school, doctor or government building. Sometimes, at first we literally need to hold someone's hand to take them through the door. Building trust with the community goes a long way towards eliminating that fear.'

What are the collective achievements so far?

'In the past, SMBI residents felt services would come and go, but this initiative is different, as community and service providers are working together, we've learnt we need to consider more than service delivery. We're valuing and enabling learning, we are acknowledging practitioners' expertise and leveraging the community's knowledge, capacity and assets. Healthy relationships enable understanding, trust and confidence grow. - So, continually cultivating these conditions is proving critical,' said Mr Cunningham.



Here's a snapshot of some of the measurable results we've achieved in the past couple of years:

Activity	Result
Dental health	<ul style="list-style-type: none"> • 109 children received free oral health screening in November 2022 – that's over one-third of the 300 children aged 0–8 on SMBI². • Of these, 35 children are now receiving follow-up dental care.
Babies' and children's health	<ul style="list-style-type: none"> • 150% + increase in appointments with free Child Health Nurse, from 84 in 2020 to 218 in 2022. • Well Baby Clinic (March 2022) and Birth to Five drop-in clinic established (fortnightly from July 2022), both on Macleay Island. • 176 children (almost 60% of the 0–8 population) registered with Children's Birthday Club, receiving an Ages and Stages milestones fact sheet on their birthday and improving health literacy. • Local children's health number established, October 2021. In its first year of operation, 86 calls were received. In the first three months of its second year, 94 calls were received – more than in the previous 12 months.
Development concerns	<ul style="list-style-type: none"> • Paediatric Allied Health Service established via HeadStart Queensland and funded by the PHN. Visits primary schools and KindyLinq on Russell and Macleay Islands • Free and responsive e-health offered via Child Development Services with almost 100% attendance rate once referral accepted
Child Health Connector role	<ul style="list-style-type: none"> • After identifying that a link between families and health providers was required, we conducted a design workshop to obtain community input into what the role should look like • Child Health Connector started November 2021, offering a service 3 days a week. More than 80 occasions of service and 40+ families referred • 'The Child Health Connector has made a significant difference for both families and clinicians,' said Mr Cunningham. 'It has increased the likelihood and ease for families to access services. The role is also playing a critical role for practitioners providing child development services on SMBI'

Feedback from the community, the PHN, and service providers

“

‘You offer such an essential service, it’s so helpful to have you working with us’

- a health practitioner who offers island outreach

‘This is a much-needed service’ ”

- a Russell Island resident being supported through Paediatric and Child Health Nurse engagement

“

‘The SMBI Bubs and Families Group is a completely community-led idea. It’s incredibly rewarding to hear positive stories from the community, especially when people have previously struggled to access services or get their children the support they need.’

- Amy Fernando, Manager of SMBI Listeners Inc.

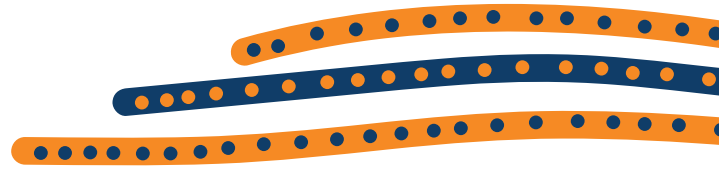
‘We’re taking an experimental and experiential learning approach, testing and validating our assumptions as we go. It’s a fundamentally collaborative process.’ ”

- Craig Cunningham, Senior Program Development Coordinator – Child and Youth, Brisbane South PHN

“

‘Things have improved so much.’

- a community member now connected with Child Health support



Where to from here?

We have three areas of focus over the next two years:

We will fine-tune our partnership with SMBI Listeners Inc., with the PHN acting as a system lead and SMBI Listeners Inc. as a critical context and community expert.

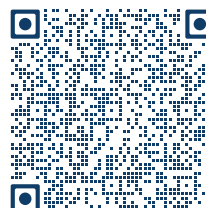
Secondly, to consolidate implementation and our learning approach. We wish to better understand how we might sustainably weave a practice of learning to access in real time and at completion—about how, where, for whom, and over what time frame, which aspects of an intervention may (or may not) have succeeded, and thus where improvements might be sought.

Thirdly, we see SMBI as an opportunity for leading and contributing to place-based learning nationally, via a partnership with Griffith Centre for Systems Innovation. This partnership allows us to collectively explore, test and learn more about HOW governance and investment structures (and functions) could be strengthened, better understood and where necessary, reimaged, so place-based initiatives like that on SMBI could deliver better outcomes in and with communities.

The Centre is also supporting growing the capability of community and service delivery partners to sustain a practice that drives innovation.

More broadly, the initiative embodies a shift towards empowering communities to lead in shaping their health outcomes. It’s a forward-thinking model with global relevance, showcasing the efficacy of place-based investments in creating sustainable health improvements. As we refine our approach, the SMBI experience will contribute to a blueprint for community-driven health innovation, demonstrating that when local communities can lead, meaningful change follows.

Further reading



Read more about the initiative and our collective learning and impact:

<https://rise.articulate.com/share/7ip1mrXWZ9hchzaYXFRbp4TNO4HROzdy#/>

¹This community-owned organisation originally started as SMBI Families We Are Listening in 2018, and became incorporated in October 2020 as SMBI Listeners Inc.

²Approximate total of 300 children aged 0-8 years on SMBI (Macleay, Russell, Lamb, Karragarra Islands) from 2021 CENSUS

My Health Journal: the free, user-friendly tool helping dementia patients manage their health

Keep track of appointments, communication and important healthcare information in one place with this free, easy-to-use journal.

In 2023, data from Dementia Australia shows an estimated 1.5 million people in Australia are involved in the care of someone living with dementia.

Coping with the diagnosis and managing the complexities of dementia can be challenging for patients, as well as their families and carers.

The My Health Journal aims to help reduce some of these challenges by assisting patients to communicate their health needs, preferences and values with their health care professionals.

Developed through intensive community consultation and trials, the journal has been designed for patients with mild to moderate symptoms of dementia who still reside within the community.

What are the benefits of the My Health Journal?

Dementia patients and their support networks all agreed – sifting through the overwhelming amount of available information is an added challenge. With this in mind, My Health Journal provides a structured, easy-to-use format to organise and access crucial details.





The journal can help patients to:

- make notes before, during and after appointments with their GP
- access helpful advice and contacts on seeking information on living with dementia
- access local support networks close by to their home (including networks for carers and family)
- keep a detailed record about their current medications
- keep prescriptions and any other important documents in a handy pocket.

The benefits of using the My Health Journal are multifaceted. For patients, it's a lifeline to maintain a sense of independence and continuity in their lives. It helps in keeping track of medical appointments, allowing for timely interventions and reducing the risk of missed consultations. This can lead to better management of dementia-related symptoms and an improved quality of life.

Families and carers also find value in the My Health Journal – it simplifies their responsibilities by centralising essential information and making it easily accessible.

One carer for her mother who has dementia said, 'The My Health Journal has been such a simple yet effective little thing in our household. I can quickly find info about mum's appointments, medications, and support services. It relieves some of the stress associated with caregiving.'

How can GPs and other health care providers use the journal?

My Health Journal has been developed to help people better prepare for and get the most out of appointments with doctors and health professionals. This resource puts individuals at the centre of their care, with space to write down important notes, concerns or questions before, during and after appointments. GPs can contribute by writing notes directly in the journal, offering advice, recommendations, and insights tailored to the patient's unique needs. Jointly recorded interactions help to foster a sense of community and shared responsibility in managing dementia.

Over 950 journals have already been distributed to local general practices, dementia services, healthy ageing hubs and other services to support older people who have been diagnosed within the early stages of dementia. My Health Journal is making a small but real difference in helping empower people to continue to lead connected, fulfilling lives in the community.

Get your free copy of *My Health Journal*

We can post a journal to you free of charge. Bulk orders can also be placed by general practices, community centres, and other health service providers.

To order the journal, please email agedcare@bsphn.org.au with the subject: My Health Journal

2023

Year in review: a snapshot of achievements

Brisbane South PHN partners with primary care providers, community services and all levels of government to build a safe and equitable system of health care for all.

In 2023 our support helped to deliver:



Better system coordination (health system coordination)

- **13** commissioned and **7** supported activities as aligned with our Pasifika and Māori Health and Wellbeing Strategy, providing a collaborative, family-centred and culturally responsive approach to delivering better health futures for Pasifika and Māori peoples in Brisbane south.
- Over **1000** monthly users of Brisbane South HealthPathways, an online clinical decision support tool helping GPs navigate patient referrals to services in our region.
- We formally renewed our partnership with Children's Health Queensland Hospital and Health Service (CHQ) through the joint endorsement of our Engagement Protocol and Schedule of Activities 2023-25. It outlines **19** local healthcare initiatives that we actively partner together on to improve health and wellbeing outcomes in our region.



Better health (improving healthcare access for all)

2 Medicare Urgent Care Clinics (UCCs) opened to service the Brisbane South PHN region and ease waiting times in hospital emergency departments.

23,900+ people engaged in our 'Emergency Choices' health literacy campaign. Targeted social media and online ads raised awareness of alternatives to visiting a hospital emergency department (ED) for non-urgent conditions, helping people to avoid long ED wait times by directing them to appropriate primary care alternatives available near them, via emergencychoices.org.au.

94 workforce education events delivered to support our health workforce, helping them stay updated and upskilled.

\$9 million in GP grant funds was administered to assist local practices improve across 3 areas – information technology, infection control, and maintaining or achieving accreditation.

Over **550** children supported in early childhood development through Thriving and on Track (ToTs).

8 organisations now offer Care finder services to give vulnerable older people free, intensive support to find and access aged care services in our region.

9 general practices embedded 11 pharmacists as part of team-based care initiatives, helping to support the quality use of medicines and improve patient safety.

950 My Health Journals distributed to local general practices, dementia services, healthy ageing hubs and other services to support older people who have been diagnosed within the early stages of dementia.

1800+ enquiries were responded to by Head to Health mental health phone service, helping connect people to the most appropriate local mental health service for their needs.

\$375,000 in Community Wellbeing and Resilience Grants administered to flood-affected community groups and organisations to help their local communities recover from the effects of the 2022 Brisbane floods.



Better organisational performance (walking our talk)

- We were proud to achieve Rainbow Tick accreditation to enhance our practices as a safer, more inclusive and affirming organisation that supports the needs of LGBTIQ+ people.
- Our second Stretch Reconciliation Action Plan (RAP) 2023-26 was endorsed by Reconciliation Australia, as we work to redefine our partnerships with Aboriginal Community Controlled Health Organisations (ACCHOs) to deliver a 'direct funding' model, supporting self-determination in the development of health programs and their delivery for First Nations communities in our region.
- Brisbane South PHN renewed its ISO-9001 accreditation, in recognition of our commitment to maintaining quality management practices for our organisation.

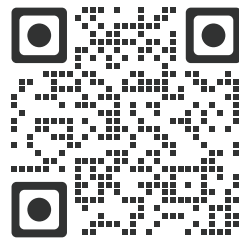
Statistics represent the period January 2023 to December 2023.



Stay in the loop!

Sign up to Primary Health Matters, our weekly email round-up of the top clinical news and information for the primary care sector in the Brisbane south region.

Sign up today at bsphn.org.au/about/news/primary-health-matters-newsletter/



Our member organisations

Brisbane South PHN has 20 members from across communities, not for profits, health and peak bodies who provide critical support for our work across policy, health reform and other matters – including opportunities to improve the mental health of people in Brisbane south. We are grateful for their guidance and expertise as we seek to support the best possible health and wellbeing outcomes for every person.



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