

# Local Area Needs Assessment Snapshot December 2022



Queensland Government

# Acknowledgement of Traditional Owners and Custodians

Torres and Cape Hospital and Health Service acknowledges and respects the Traditional Owners of the land on which we live and work and recognises their continuing connection to the land and community which we serve. We pay respect to them, their culture, and their Elders past, present, and future.

# Glossary

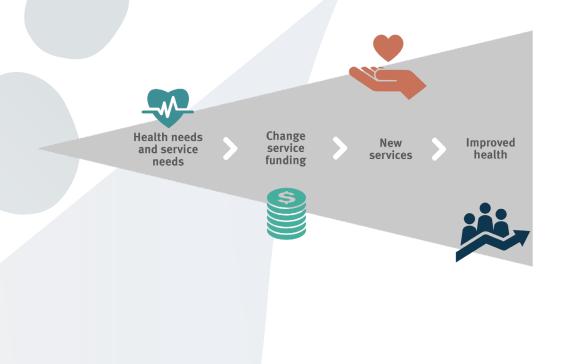
Term	Meaning
Acute Rheumatic Fever / Rheumatic Heart Disease	Health conditions caused by a bacterial throat infection that can affect the heart, joints, brain, and skin.
Antenatal visits	Health appointments during pregnancy.
Circulatory system diseases	Diseases related to the heart and blood vessels.
Cultural safety	Term for how a service meets the cultural needs of people with various cultural backgrounds including First Nations people.
Developmentally vulnerable children	A measure of physical growth and mental development in children.
Full Time Equivalent	A measure of full time working hours.
Immunology and infections	Illnesses that can be caught, spread and/or can be prevented with vaccinations.
Infant mortality	Number of deaths of children under 1 year old.
Life expectancy	Average number of years a person is expected to live.
Population health and primary preven- tion services	Population health refers to the state of health for all people in a region. Primary prevention is health care delivered before people become unwell. E.g. health education, reduc- ing unhealthy habits, vaccination programs.
Potentially Preventable Hospitalisations	Hospital admissions that may have been prevented if primary health or general practice services were available.
Premature deaths due to chronic illness	Deaths that occur earlier than expected because of chronic illnesses.
Renal dialysis	A procedure to clean blood when a persons kidneys are no longer work properly.
Scheduled and planned care services	Terms used to describe future health care appointments or hospital stays.
Secondary and tertiary prevention ser- vices	Secondary prevention services include regular health exams and screenings to detect illness at its earliest stages. Tertiary prevention services include managing current diseases to reduce the impact of illness and further issues.
Social-emotional wellbeing	A holistic term for mental health.
Socioeconomic status	A measure for a population's factors that affect peoples health including money, schooling, jobs, com- munity safety, etc.

# Summary

Torres and Cape Hospital and Health Service carried out a Local Area Needs Assessment in 2022 to find the main health and service needs of people living in the region.

To find these needs, we reviewed our health service data. We also spoke with community people, our health partners, other government groups, and our staff.

All of this information was combined and ranked based on the number of people affected. These also needed to be something a health service could change.



By finding and knowing these needs, we aim to improve the way our health services work. Our goal is to help the people of Cape York, Northern Peninsula, and the Torres Strait achieve better health. We worked with our key health partners listed below to help us rank the highest needs:



Apunipima Cape York Health Council (ACYHC)



NPA FAMILY & COMMUNITY SERVICES Aboriginal and Torres Strait Islander Corporation

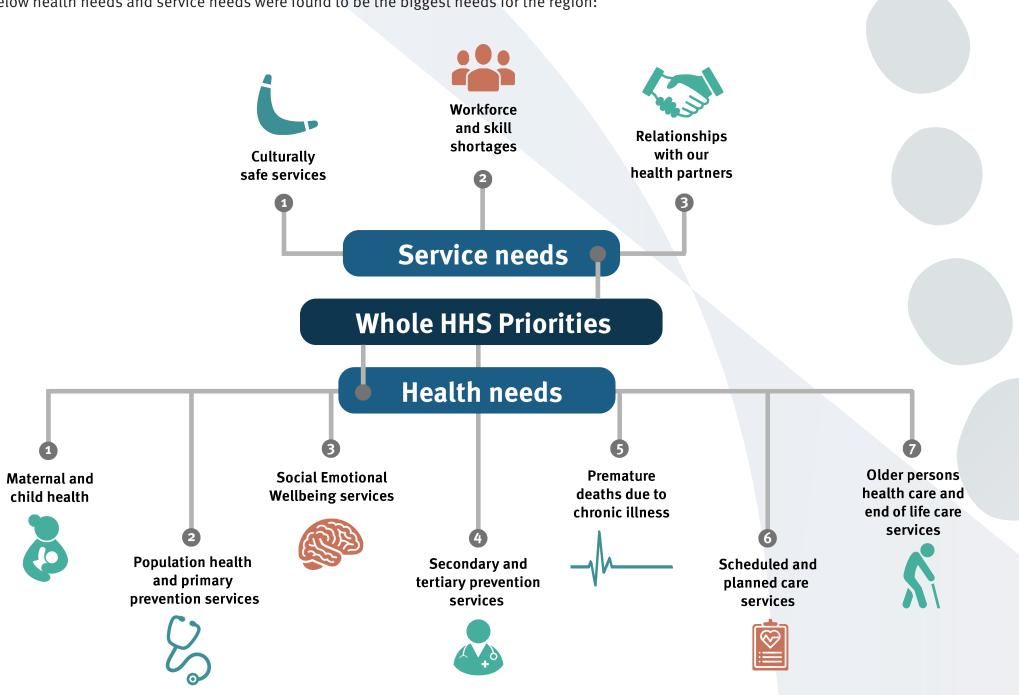
Northern Peninsula Area Family and Community Services (NPAFACS)



Torres Health Indigenous Corporation (THIC)



PHN Northern Queensland The below health needs and service needs were found to be the biggest needs for the region:



# Key measures

The health measures for people in the region shows poorer living conditions. There are also higher disease levels and higher use of health services. This is compared to other people living in Queensland. Some key measures are shown below:

### People and the region



In 2019, there were **27.928** people in the region

> In 2031, it is expected to be **29.317**

28.3% of people are aged 14 and under 7.6% are aged 65 and over

The life expectancy of both males and females is lower than the Qld rate

The total area covered is 130,238 km<sup>2</sup>, which is around 8% of Old

# Children and young people

The place with the most young people aged 14 and **Vounger** is Northern Peninsula and the Torres Strait Islands



Children who are considered developmentally vulnerable across 1 or 2 domains is much higher than the Qld rate

# Mums and bubs

#### Health outcomes for babies are much

poorer than the Qld rate

This includes more low birthweight and high birthweight babies

> There is also a higher rate of infant mortality

# There is also a big difference in baby health outcomes between First Nations

and non-First Nations people

Mums and bubs health outcomes includes lower socioeconomic status, high fertility, high rates of smoking during pregnancy for First Nations people, and obese mothers.

# Social-emotional wellbeing (mental health)



There isn't much data on **Social**emotional wellbeing in the region

Suicide is a leading cause of early death

#### There is low use of our social-emotional wellbeing services (23%), yet there are

a lot of people who experience social-

emotional wellbeing problems

This means they are not available enough

They may also not be used enough (which can be due to reasons like cultural safety)

# **Older people**

In 2019, 7.6% of people in the region were aged over 65 well below the

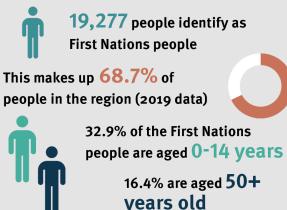
Old rate of 15.7%



compared to Qld at 40.3%

29.0% were aged over 45,

# **First Nations people**



# Service access, availability, use

There are many workforce shortages in the region compared to the state across many professions

Across all **Emergency Department** presentations at our facilities in 2020-21, 51% were the type that could have been handled by a General Practitioner



#### Social issues that affect health



85% of people are in the lowest socioeconomic areas

The **unemployment rate** is 18.6%, which is more than double the Qld rate of 7.3%





The number of **Single parent families** is much higher than the

Qld rate



People with a schooling level below year 11

is 43.9% for First Nations people (close to the Qld rate)\*

and 34.8% for non-First Nations people (1.3% higher than the Qld rate)

\*There are regions where the schooling level was not available for many First Nations people. This may greatly affect this number.

### **Chronic illness**

#### The top 3 causes of

cancer

**death** for people aged under 74 are:



- circulatory system diseases (heart diseases)
- external causes (which include suicide and self-inflicted injuries)

There is a high rate of head and neck, lung, ovarian, and uterine **Cancers** in the region

This is much higher than the Qld rate



The rate of hospital admissions for **immunology and infections** is 3.25x higher than expected

# Acute rheumatic fever/ Rheumatic Heart Disease (RHD)

is 15x higher in First Nations people compared to non-First Nations people



The rate of **overcrowding** in

houses is more than double the Qld rate



There are over 1 in 3 First Nations people living in crowded homes

#### The rate of **Sexually transmitted infections** is 287 per 10,000 people

For First Nations people this is 391 per 10,000



Rates of illness related admissions that could have been prevented with vaccinations are 2.8x higher than the Qld rate

The rate for First Nations people is 4.1x higher than the Qld rate

# **Recent health improvements**

The data showed that Cape York, Northern Peninsula, and the Torres Strait people have had health improvements over the last 5-10 years. This includes people living longer than before and more babies born at a healthy weight. This shows how health and service needs can be made better over time by focusing on the right things.

#### Average age of death



From 2012-14 to 2020-21, people lived for an average of 7 years longer

# Growing older

There are more older people in the region with 2% more people 65yrs and older between 2016 and 2021



# Mums and bubs health



4% less women including 4% less First Nations women smoked during any stage of pregnancy between 2016-17 and 2020-21

There have been 2% less babies born with low birthweight,

and 2.6% less First Nations babies born with low birthweight since 2016-17



for five or more check-up appointmentswhile pregnant

This is higher than the Qld rate and a 0.5% rise between 2016-17 and 2020-21

### Infectious diseases

The number of **Rheumatic Heart Disease** notifications has **almost halved** between 2018 and 2021

# Potentially Preventable Hospitalisations



Hospitalisations considered to be preventable dropped 4% from 2016 to 2021

# **Renal dialysis**

The health service provided more dialysis services closer to home (73% increase) between 2018-2022



# Workforce changes from 2018-2022



Increased Medical staff by 16 more Full Time Equivalent staff

**Increased total staff** by 81 staff members



### Increased First Nations staff by 3% of total staff



This includes 3% more First Nations clinicians (medical and nursing) and 3% more managerial and clerical staff

In 2021-2022 the health service employed 226 First Nations people

#### **Data Sources:**

- Median Age of Death-Chief Health Officer TCHHS Clinical Services Plan 2016 and Planning Portal. Extract 5/12/2022

- Growing Older - Queensland Regional Profiles:

Resident Profile: TCHHS region (ASGS 2012 and 2021) - Maternal Health - Queensland Health Statistical Services Branch, Indigenous Indicators. Extracted 24/11/2022

- Infectious Diseases - Queensland Health Notifiable Conditions Register. Extracted 23/11/2022

- PPHs - Chief Health Officer (CHO) Report. Extracted 25/11/2022

- Renal Dialysis - DSS (ABF Activity). Extracted 30/11/2022

- Workforce - HR Business Intelligence, Human Resource Branch, Brisbane. Provided 25/11/2022

# What comes next?

Torres and Cape Hospital and Health Service will use the information from the Local Area Needs Assessment to guide service changes from 2023 within our day to day work. We will also work with the Department of Health and our health partners to better address the health and service needs.

Some of the changes will need extra funding. This means bigger changes to services that need more planning will be achieved over time.

The Local Area Needs Assessment will be done every three years so that the needs of the region are kept up to date. Over time we aim to achieve better health for Cape York, Northern Peninsula, and the Torres Strait people.

# **More information needed?**

More information on the Local Area Needs Assessment can be found on our website, or contact us at <u>TCHHS-LANA@health.gld.gov.au</u>

https://www.torres-cape.health.qld.gov.au/about-us/corporatepublications-and-reporting/local-area-needs-assessment

