



The 2021/22 – 2023/24 Health Needs Assessment has identified numerous health and service issues in the Brisbane North community that relate to population health. Population health refers to components or aspects that impact upon the collective health of a community. These needs are listed below:

Health Issues	Service Issues
✓ Social determinants	✓ Geographic areas of need
✓ Lifestyle risk factors	✓ Health screening
✓ Potentially preventable hospitalisations	✓ Vaccinations
	✓ Patient activation and empowerment
	✓ Genomics

Relative rank for					
prioritised needs:	Not raised	Low	Moderate	High / Important	High / Priority
Health Issues			Overall Prioritisation Rank		
Social determinants (2016 Census)					

- Education: 66.8% of people have a Year 11 or Year 12 or equivalent education.
- Income: Most families (34.6%) had a total family income between \$78,000 to \$155,999 per year. Families with a total income of \$33,800 to \$77,999 per year accounted for 26.9% of families in the region, and 7.5% of families were low-income earners with a total income of less than \$33,800 per year.
- Employment: In the June quarter of 2021, the unemployment rate in Brisbane North was 6.2%, equivalent to 36,338 unemployed persons in a labour force of 589,355 people.
- **Socioeconomic Disadvantage:** One in eight people in the region (12.2 per cent) reside in areas considered as most disadvantaged.
- Diversity: Over 1 in 5 people in the region were born overseas. 1 in 8 people spoke a language other than English at home.
- Crime: There were 90,204 reported offences in 2020-21, or 8,325 per 100,000 persons.

Lifestyle risk factors

LEGEND:

- Smoking: 70,000 people (or 8.7%) aged 18 years and above were daily smokers.
- Alcohol: 160,000 people (or 20.1%) aged 18 years and above had consumed alcohol at lifetime risky levels.
- Weight: 58.8% (or 470,000) of the community are considered overweight or obese, while 23,000 people (or 2.8%) aged 18 years and above were considered underweight.
- Physical activity: 69,000 people (or 9.2%) aged between 18–75 years were inactive or not performing physical activity.

*Risk factors for children are also described in the HNA.

Potentially preventable hospitalisations (PPH)

The following conditions contributed high rates of PPH in 2017–18:

- Pneumonia and influenza: 2,843 PPH. People aged 65 years and over were substantially more affected. Accounted for over 20,400 hospital bed days.
- Cellulitis: 3,440 PPH. 1 in 4 people were admitted and separated on the same day. Older people hospitalised for twice as long as younger people.
- **Dental conditions:** 3,039 PPH. People aged under 65 years accounted for 86% of hospitalisations. Had the highest percentage of same day separation.
- **Urinary tract infections:** 3,725 PPH. Mostly affects older people, who were also likely to stay in hospital for twice as long compared to those aged under 65 years.
- **COPD:** 2,992 PPH. Older people were hopsitalised 3.7 times the volume of younger persons. Majority of patients required further hospital management over an average period of 5 hospital bed days.

Service Issues

Overall Prioritisation Rank

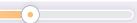
Geographic areas of need



There is substantial evidence of geographic disparities that exist in the social determinants, health status and subsequent health outcomes of the community. The northern regions of our catchment demonstrate:

- · Higher rates of premature mortality
- Higher rates of potentially avoidable deaths
- Higher rates of potentially preventable hospitalisations
- Higher rates of accessing chronic disease management plans.

Health screening



- National bowel cancer screening: In 2018-19, 42.9% of 233,219 invited participants in undertook a bowel cancer screening test. There is approximately 10 percentage points between the highest and lowest participation rates in Brisbane North.
- National cervical screening program: In 2018-19, 47.2% of 280,909 eligible women in participated in the NCSP. Participation peaked in the 55-59 year age cohort. There is approximately 18 percentage points between the highest and lowest participation rates in Brisbane North.
- BreastScreen Australia: In 2018-19, 52.0% of women participated in a breast screen, out of a possible 132,694 who were eligible. Participation peaked in the 65-69 year age cohort. There is approximately 14 percentage points between the highest and lowest participation rates in Brisbane North.

Vaccinations



- Childhood Immunisation Program: As of 30 June 2021, overall immunisation rates for the PHN region are 95.8% for children aged one year, 94.5% for children aged two years, and 95.3% for children aged five years. There is some geographic variation in immunisation rates for each age cohort within the region.
- First Nations Children: As of 30 June 2021, immunisation rates were 95.3% for children aged one year, 93.6% for children aged two years, and 96.6% for children aged five years.
- Notifiable conditions: Pertussis (whooping cough), rotavirus and varicella (chicken pox/shingles) have seen varying levels of activity since 2016. In 2020, there were 97 cases of pertussis, 47 cases of rotavirus, and 2,355 cases of varicella.
- Infleunza: In 2020, there were 1,493 notified cases of Influenza, which was a substantial drop in comparison to previous years. In 2019 there were 14,422 notified cases, 3,370 notified cases in 2018, and 12,253 notified cases in 2017.

Patient activation and empowerment



A 2019 survey found that consumer experience as well as perceived health status was positively associated with degrees of patient activation. Other associations that were noticed was that levels of engagement were related to health literacy, service utilisation and experiences of care with health providers. Typically, higher levels of engagement demonstrated better satisfaction and/or health outcomes in respondents.

Genomics



While genomics has not been adopted widely across Australia, advances in its use and the attention given to developing a national framework lays the foundations for integrating genomics into the healthcare system. Given that genomics is expected to constitute healthcare in the future, preparing the community, practitioners and services will be critical.

"Having a person with multiple health needs, who needs to see a few specialists or allied health providers, who do not bulk bill in the Moreton area, means that they will probably not attend all the appointments due to the cost. Having assistance for timely coordinated care across the health system is needed. There is an inequity in the Moreton area due to the low number of providers that bulk bill. I have lived in many places in Australia and this is by far, the area where people are charged exorbitant amounts or just turned away if they cannot pay the fees." — Community member