



## Adelaide PHN Needs Assessment Update Priorities for 2019-2022 – Summary Document

An iterative engagement and consultation process form the basis to the Adelaide PHN (APHN) ethos. Our membership group model comprising our clinical and community advisory councils and Health Priority Network (HPN) are essential to this process. Together with our Board, they bring together a diverse range of experience and knowledge informing our evidence-based planning process to determine the local needs and resulting priorities of our catchment area.

This Needs Assessment Priorities summary document contains a total of **47** priorities for:

- General Population Health (GPH) – 22 priorities
  - General Practice Support (GPS) – 3 priorities
  - After Hours (AH) – 2 priorities (**new**)
- Primary Mental Health Care (including Suicide Prevention) (PMH) – 7 priorities
  - Psychosocial Support Services (PSM) – 3 priorities
- Alcohol and Other Drugs Treatment (AOD) – 3 priorities
- Indigenous Health (including Indigenous chronic disease) – 7 priorities

It should be noted that the priorities reflected in this document is an **update** for a three-year period and cover 1 July 2019 to 30 June 2022. As per Commonwealth guidelines it will be reviewed and updated as needed during this period. For more information on the quantitative and qualitative data including the health and service needs, please refer to the full Needs Assessment (updated) report found on our website.

In the reporting period from 2020 to 2022, the APHN will be redesigning the Needs Assessment process and reporting format to improve the translation of the health and service needs and local priorities of our PHN region.

## General Population Health

**APHN Needs Assessment 2019-22 Priorities for General Population Health** (note: priorities will have reference title: GPH, e.g. GPH1.)

1. *The CALD community are disproportionately affected by Hepatitis B.*

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2. *Accessibility to and appropriateness of primary health care services, particularly for CALD and new and emerging communities, LGBTIQ and older people.*

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3. *Identified areas of the APHN region have childhood immunisation rates below the national average.*

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4. *Selected areas of the APHN region have high rates of smoking which correlates with areas of high prevalence of COPD.*

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5. *Selected areas of the APHN region have high rates of obesity and overweight and correlate with areas of low physical activity and poor nutrition.*

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6. *Selected APHN LGAs have higher rates of a range of chronic conditions (respiratory disease, diabetes, circulatory system disease, chronic kidney disease, musculoskeletal) and multi-morbidities.*

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7. *Services for people living with persistent pain are limited with long delays to access hospital-based services.*

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8. *Higher rates of multimorbidity among the aged population lead to increased utilisation of health care services.*

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9. *Selected APHN regions have higher rates of PPH resulting from a range of chronic (Chronic Obstructive Pulmonary Disease, Congestive Heart Failure, diabetes complications, angina, iron deficiencies) and acute conditions (dental issues, urinary tract infections, cellulitis).*

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10. *Medication misadventure including poor quality use of medicines contributes greatly to the burden of potentially preventable hospitalisations.*

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11. *Early screening of selected cancers (cervix, bowel, breast) can assist in intervention measures which can help reduce mortality as part of a wider cancer control strategy.*

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- 12. A need to increase the ease of navigation and visibility of the health care system in selected APHN regions, population groups and for particular health issues.*
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- 13. Lack of easily understood and accessible referral pathways across systems and settings.*
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- 14. A need to increase communication and collaboration between service providers including hospitals to improve clinical handover.*
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- 15. Lack of community awareness about existing health care services for different population groups, consumers and providers.*
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- 16. Lack of person-centred care and responsiveness to individual circumstances, including co-morbidities.*
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- 17. Need to improve provision of education to consumers and professionals across the health sector to encourage the take-up and application of preventative health measures.*
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- 18. Need to improve the aptitude/attitude and consistency of empathic responses of a variety of health care staff across a range of sectors and settings as well as increase workforce capacity.*
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- 19. Minimise instances of poor quality and unwarranted variations of care and follow up.*
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- 20. Prevention and early intervention strategies for childhood and youth health conditions*
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- 21. Awareness of timely access to appropriate services (including after-hours services) for vulnerable population groups particularly, Children and Youth, people with a disability, Older people, Palliative Care patients, and their carers*
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- 22. A coordinated approach to improve navigation and pathways for patients to manage their conditions*
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## General Practice Support

**APHN Needs Assessment 2019-22 Priorities for General Practice Support (note: priorities will have reference title: GPS, e.g. GPS1.)**

1. *Increase awareness and uptake of digital health systems and benefits for patients*

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2. *Targeted support to increase awareness and utilisation of HealthPathways SA and specific pathways for patients*

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3. *Promote and targeted support to adopt best practice in utilisation of clinical softwares to improve patient care and quality improvement activities*

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## After Hours

**APHN Needs Assessment 2019-22 Priorities for After Hours (note: priorities will have reference title: GPH-AH, e.g. GPH-AH1.)**

1. *Lack of community awareness about appropriate after-hours health care services leading to increased potentially preventable hospitalisations*

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2. *RACFs have a low capacity to support their residents in the afterhours setting leading to increased transportation to emergency departments and medical deputising services*

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## Primary Mental Health Care (including Suicide Prevention)

**APHN Needs Assessment 2019-22 Priorities for Primary Mental Health Care (including Suicide Prevention) Needs (note: priorities will have reference title: PMH, e.g. PMH1.)**

- 1. High prevalence of mental health/behavioural issues and psychological distress in selected areas across the region.*
- 2. Provision of psychological services comparatively low in areas of highest need.*
- 3. Comparatively high numbers of people attempting to access psychological services in areas with minimal psychological service provision.*
- 4. Disproportionate quantities of mental health related medicines prescribed in women, disadvantaged areas and population groups such as people aged 75 and over.*
- 5. Difficulty in identifying and accessing appropriate mental health treatment services.*
- 6. Increase integration between AOD and Primary Mental Health (PMH) service providers to improve health outcomes.*
- 7. Increase awareness of appropriate mental health services to health professionals and community and carers through the provision of information and resources.*

## Psychosocial Support Services

**APHN Needs Assessment 2019-22 Priorities for Psychosocial Support Services (note: priorities will have reference title: PSM, e.g. PSM1.)**

- 1. Responsive and appropriate psychosocial support services that meets the needs of people with severe mental health conditions.*
- 2. Increase awareness and promotion of psychosocial support services for people with severe mental health conditions and their carers.*
- 3. Increase the health workforce capacity to provide appropriate care to people with severe mental health conditions.*

## Alcohol and Other Drug Treatment Needs

**APHN Needs Assessment 2019-22 Priorities for Alcohol and Other Drugs Treatment Needs (note: priorities will have reference title: AOD, e.g. AOD1.)**

- 1. Increase accessibility to appropriate alcohol and other drugs treatment options for targeted population groups and identified areas of need in APHN region.*
- 2. Build the capacity of health professionals through the provision of information, education and resources to support health professionals in the management of drug and alcohol dependence and related morbidities*
- 3. Increase integration between AOD and Primary Mental Health (PMH) service providers to improve health outcomes.*

## Indigenous Health (including Indigenous Chronic Disease)

**APHN Needs Assessment 2019-22 Priorities for Indigenous Health (note: priorities will have reference title and specific to Needs Area: IH, e.g. IH-GPH1., IH-PMH1., etc.)**

### General Population Health (GPH)

- 1. Immunisation rates for Aboriginal and Torres Strait Islander children are lower than non- Aboriginal and Torres Strait Islander children.*
- 2. Aboriginal and Torres Strait Islander South Australian people are more likely to have a range of chronic conditions (respiratory, diabetes, circulatory system disease, chronic kidney disease) than non- Aboriginal and Torres Strait Islander people.*
- 3. Accessibility to and appropriateness of primary health care services for Aboriginal and Torres Strait Islander people.*
- 4. Access and information to Breast, Cervix and Bowel cancer screening services for Aboriginal and Torres Strait Islander people.*
- 5. Awareness of timely access to appropriate services (including after-hours services) for Aboriginal and Torres Strait Islander people.*

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### Primary Mental Health (including Suicide Prevention) (PMH)

- 6. Greater prevalence of intentional self-harm and suicide in selected areas and specific population groups across the region including Aboriginal and Torres Strait Islander people.*

### Alcohol and Other Drug Treatment Needs (AOD)

- 7. Increase access to and availability of culturally appropriate AOD treatment services particularly alcohol and illicit drugs for Aboriginal and Torres Strait Islander people.*
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