

Health and Services in the Flinders Shire

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QUEENSLAND PROJECT

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1. Background

This document aims to support place-based health planning in the Flinders Shire by providing local and regional information about population, health and services. Various data sources have been used throughout this document. Data have been sourced from public repositories such as the Australian Bureau of Statistics (ABS) and the Australian Institute of Health and Welfare, and also from special interest groups such as the Heart Foundation. In addition, summary data have been sourced from the Townsville Hospital and Health Service digital information unit and the Queensland Statistical Services Branch.

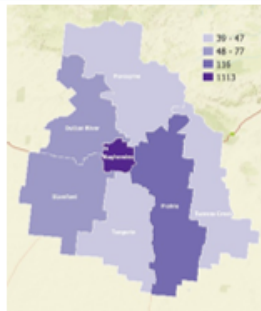
Data are presented at different levels of geography (geographic catchments) depending on availability. Box 1 describes the levels of geography that are used throughout this document.

Box 1. Description of levels of geography used to describe information about populations and health.

Suburbs and Localities (SAL)

SALs are structures within the Australian Statistical Geography Standard (ASGS) that have been defined by the Australian Bureau of Statistics. They are an approximation of the officially recognised boundaries of suburbs (in cities and larger towns) and localities (outside cities and larger towns) as defined by the State and Territory governments of Australia.

The suburbs of Flinders Shire are Hughenden, Torrens Creek, Prairie, Tangorin, Stamford, Dutton River and Porcupine.



Local Government Area (LGA)

LGAs are structures within the Australian Statistical Geography Standard (ASGS) that have been defined by the Australian Bureau of Statistics.

They are an approximation of gazetted local government boundaries as defined by each State and Territory Local Government Department.

For the community of Hughenden, LGA refers to the catchment area of Flinders Shire Council. This region is shaded in the map image.



Statistical Area Level 2 (SA2)

SA2s are structures within the Australian Statistical Geography Standard (ASGS) that have been defined by the Australian Bureau of Statistics. SA2s have been created to represent a community that interacts together socially and economically. They generally have a population between 3,000 and 25,000 with an average of about 10,000 people. SA2s in remote and regional areas generally have smaller populations than those in urban areas.

The community of Hughenden lies within the SA2 of Northern Highlands. This region is shaded in the map image. The Northern Highlands contains the LGAs of Flinders Shire, Richmond Shire and McKinlay Shire.



Statistical Area Level 3 (SA3)

SA3s are structures within the Australian Statistical Geography Standard (ASGS) that have been defined by the Australian Bureau of Statistics. SA3s have been created to represent areas that have similar regional characteristics and these units are recognised as having a distinct identity and similar social and economic characteristics. In general, SA3s are designed to have populations between 30,000 and 130,000 people.

The community of Hughenden lies within the SA3 of Outback North. This region is shaded in the map image. Outback North contains the LGAs of Flinders Shire, Richmond Shire, McKinlay Shire, Cloncurry Shire, Mount Isa City, Burke Shire, Doomadgee Shire, Mornington Shire and Carpentaria Shire.



Some important facts to keep in mind when reading through the data:

- The Census of Population and Housing is the most comprehensive snapshot of the country. Census data counts every person and household in Australia and provides information about the economic, social and cultural make-up of the country. The Census is conducted every five years meaning it is important to consider any changes that may have occurred between the time of Census data collection and when it is used.
- The Census count or usual resident population is a count of every person who usually lives in an area on census night, excluding visitors.
- The Estimated Resident Population is the official estimate of the population. It is based on the Census count and is adjusted to account for usual residents missed in the Census. It is updated quarterly for national and state/territory levels and every year for other geography levels.

2. Location

Hughenden is located in the Flinders Shire Local Government Area in north western Queensland. It is a remote community (Australian Statistical Geography Standard Remoteness Area 5 and Modified Monash Model Category 7). Hughenden is the main population centre located about four hours' drive west of Townsville and about 6.5 hours' drive east of Mount Isa.

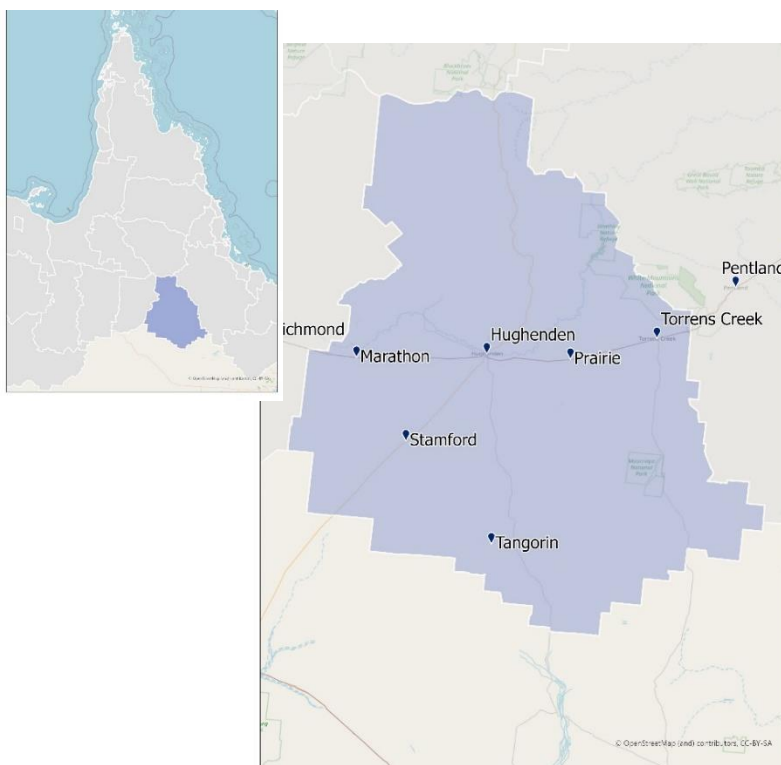


Figure 1. Map of Flinders Shire Local Government Area in north western Queensland and locations of communities.

3. Demographics

The estimated resident population of Flinders Shire Council (FSC) for 2021 was 1,521 people and the population has been projected to fall to 1,205 people by 2041.^{1,2}

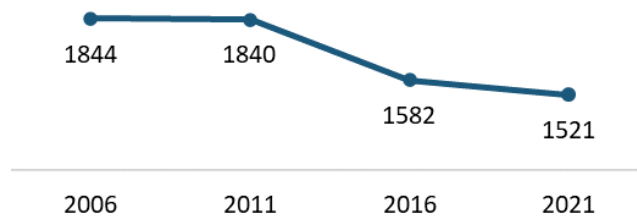


Figure 1. Estimated resident population for Flinders Shire in over time.²

Over the past five years, the proportion of the population in each life stage age group has remained similar, with the exception of older adults. The proportion of adults aged 65 years and over increased from 17.6% of the population in 2016 to 22.3% of the population in 2021.³ Based on forecast population figures,³ there will be an increase in dependency ratio (working population to population aged over 65 years) from 39% in 2021 to 61% in 2041.

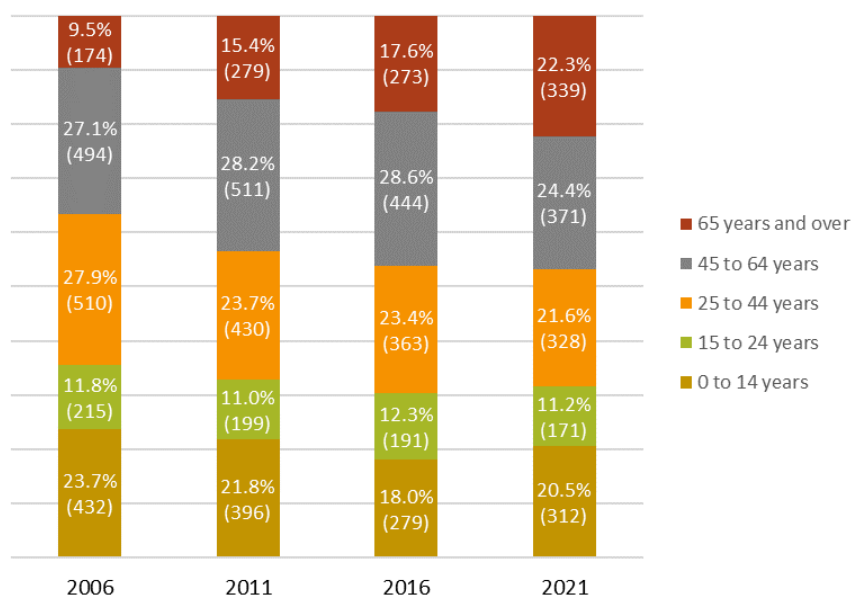


Figure 2. Estimated resident population for Flinders Shire by broad age groups, over time.²

The age structure for the estimated resident population in 2021 is depicted in Figure 3. In 2021, the largest population (by 5 year age groups) was aged 0 to 4 years making up about 9% of the population.²

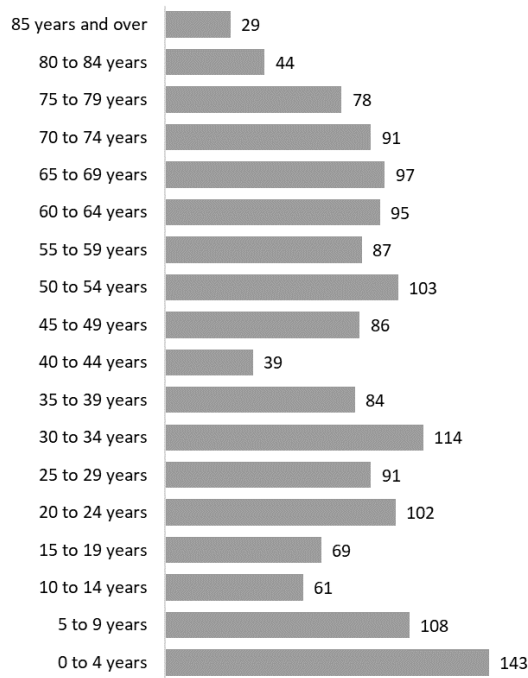


Figure 3. Estimated resident population for Flinders Shire in 2021 by 5 year age groups.²

In 2021, the Aboriginal and Torres Strait Islander population of Flinders Shire was 11.3% (n=169).⁴ About 26% of the Aboriginal and Torres Strait Islander population were aged 0 to 14 years and a further 31% were aged 45 years and over. About 9% of this population were aged 65 years and over.⁴

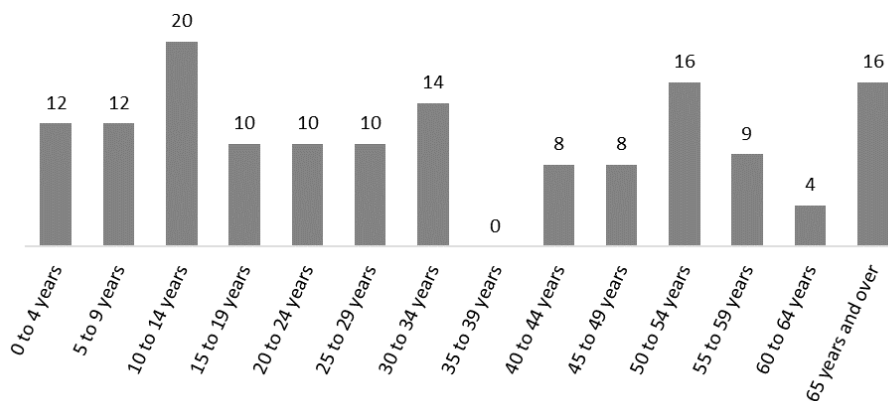


Figure 4. Aboriginal and Torres Strait Islander population residing in Flinders Shire by 5 year age groups.^{i, 4}

About 93% of the Flinders Shire population were born in Australia (not including the 198 people that didn't provide information on the Census about this topic).⁵ The remainder of the population were born in New Zealand (n=18), England (n=14) and India (n=10), with smaller numbers born in the Philippines, Bangladesh, Canada, Scotland, South Africa, the United States and elsewhere.^{i, 5}

The overall composition of the population by sex is fairly even with 50.1% of the population estimated to be female (Figure 5 shows the proportion of population by gender and age groups). Females of reproductive age (aged 15 to 44 years) made up 32% (n=241) of all females.² There was a recent surge in births in 2021 with 33 births reported, up from a five year average of 20 births per year.⁶

ⁱ Note: Usual resident population based on the Census of Population and Housing 2021. The ABS makes small random adjustments to all cell values to protect the confidentiality of data. Therefore, these numbers may not be exact counts as reported in the Census of Population and Housing.

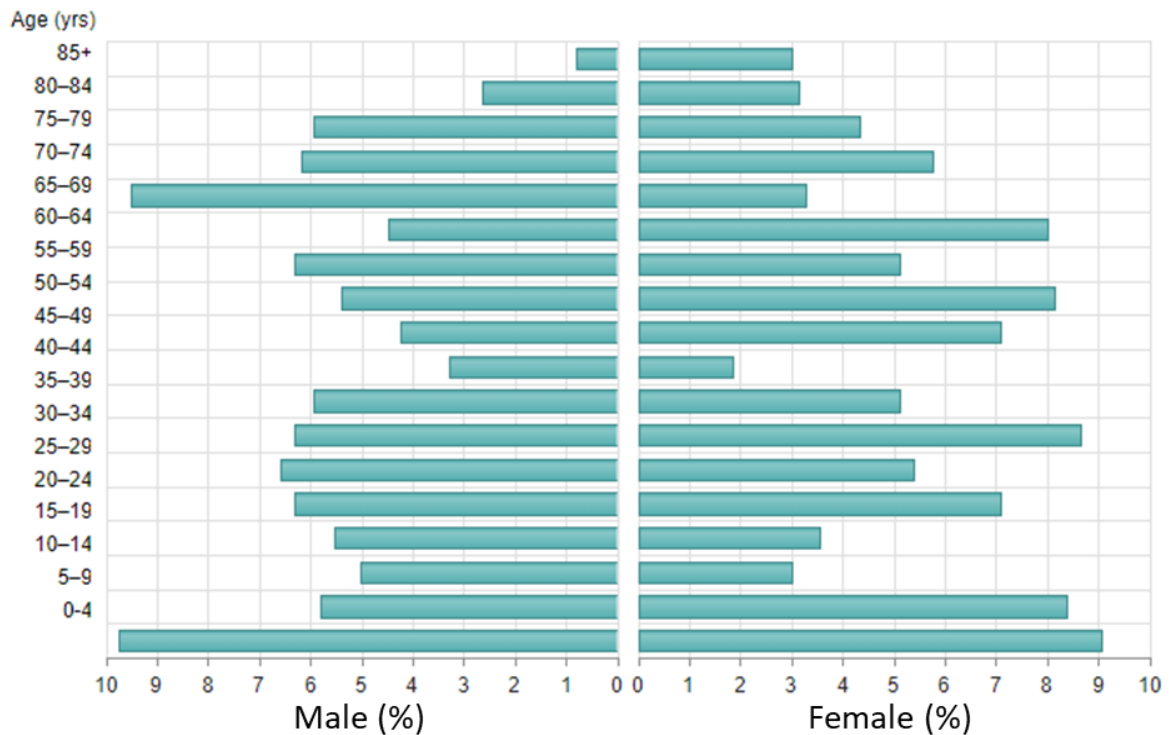


Figure 5. Population pyramid for Flinders Shire based on estimated resident population 2021 (proportion).⁷

In 2021, the majority (74%) of the population lived in the township of Hughenden (Figure 6). Prairie was the next largest community in Flinders Shire (8%), followed by Stamford and Dutton River (about 5% each) and then Torrens Creek, Tangorin and Porcupine with the smallest populations.⁸ The township of Hughenden had higher relative socioeconomic disadvantage (Quantile 2) than outer suburbs of Flinders Shire (Quantile 3 to Quantile 5) most of which are beef farming communities.⁹

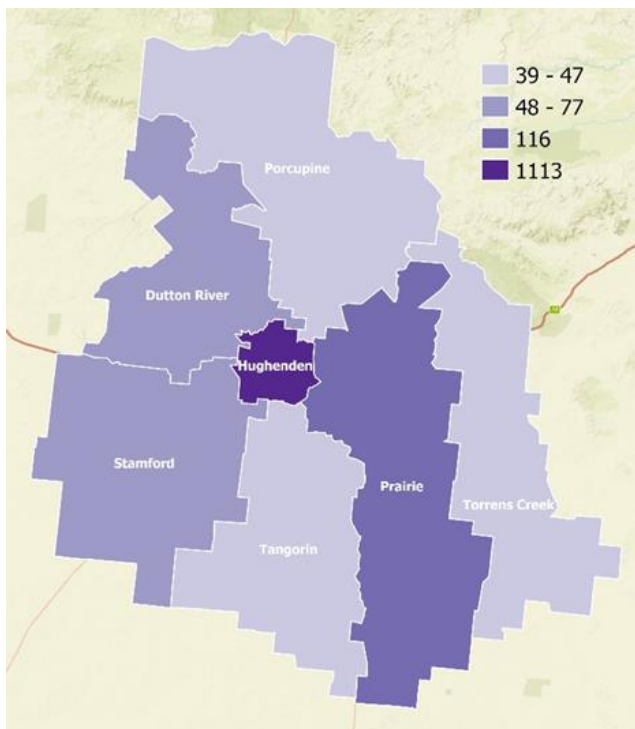


Figure 6. Suburbs of Flinders Shire by usual resident population, 2021.⁸

The largest industry of employment was agriculture (30%), mainly beef cattle farming, followed by public administration (14%) mainly within local government, construction (8%), and education and training (8%; Figure 7).¹⁰ Smoothed estimates of the labour market in Flinders Shire to June 2022 report 908 people in the workforce with an unemployment rate of 3.5% (or 32 people).¹¹

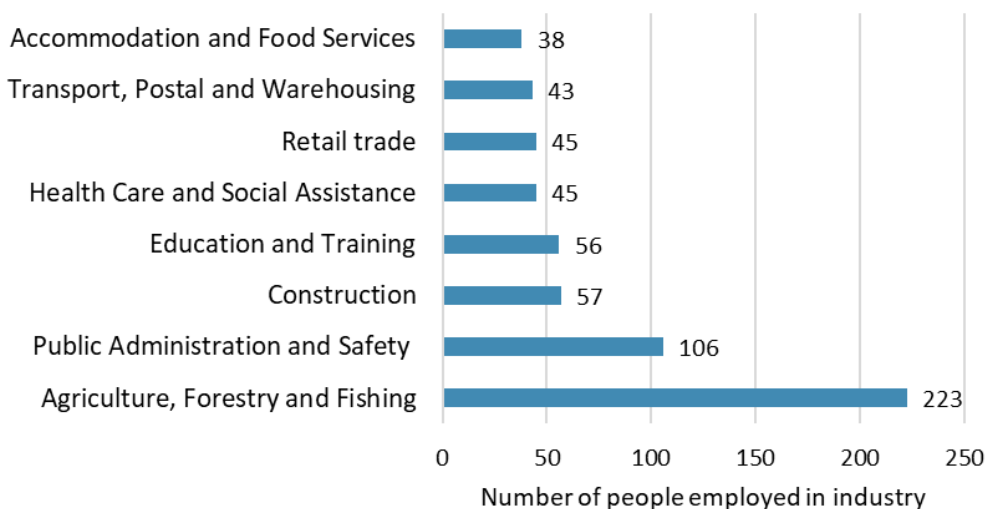


Figure 7. Employment by industry in Flinders Shire (2021).¹⁰

There were 513 visitors in the Flinders Shire on Census Night 2021 (10th August 2021).⁵ This is equivalent to about one third of the usual resident population in visitors. Tourism, visiting services workforce and industry developments including installation of a solar farm in 2021 likely accounts for the majority of visitors to the area. This is captured in the age ranges of the visiting population with the majority of visitors (54%) aged between 25 and 64 years (likely associated with visiting workforce and industry) and 37% of visitors aged 65 years and over (likely 'grey nomads'; Figure 8).⁵

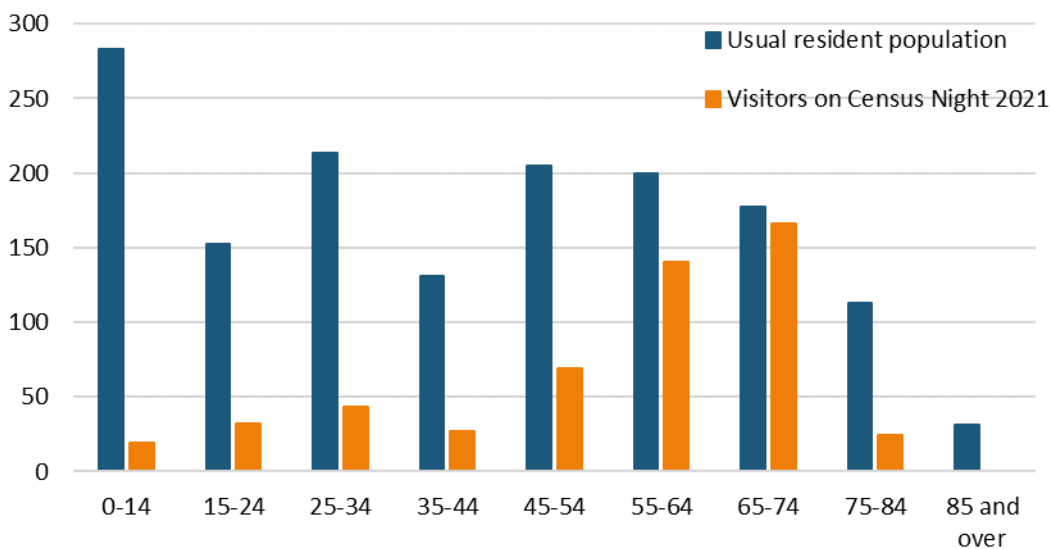


Figure 8. Number of visitors in the Flinders Shire on Census Night 2021 by age group compared with the usual resident population.⁵

In 2021, there were 129 families with children in the Flinders Shire, 75% of which had children aged under 15 years, and there were 42 single parent families.¹⁰ Nearly 45% of households were low income households (in the bottom 40% of the income distribution). Ten percent of households (or 56 households) were receiving rent assistance. Four percent of the population (n=50) living in private dwellings were living

in crowded conditions and 81 people (6.5%) were living in social housing.¹² About 83% of the population (aged over 15 years and no longer in school) had completed at least Year 10 (Year 10, 30%; Year 12, 46%)ⁱⁱ.¹⁰

The majority of school aged children were enrolled at Hughenden State School (123 students) which provides education from Prep to Year 12. St Francis Catholic School (46 students) is also located in Hughenden and two schools (Cameron Downs State School - 11 students and Prairie State School – 5 students) serve students in the outer communities of the Flinders Shire. Hughenden Kindergarten and Early Childhood Centre provides a kindergarten program, long day care and a before-and-after-school program.

The majority of children beginning Year 1 are developmentally on track. In 2021, at least 67% of children (n=14), assessed for development in the domains of health and wellbeing, social competence, emotional maturity, language and cognitive skills, and community skills and general knowledge, were reported to be on track.¹³ A quarter of children assessed (n=5) were reportedly developmentally vulnerable in two or more domains.¹³

4. Health behaviours

Prevalence of poor health behaviours is higher in regional, rural and remote areas compared with major cities. ***There are no data available about health behaviours specifically for the Flinders Shire.*** However, people living in rural and remote areas have higher rates of smoking, smoking during pregnancy, sugary drink consumption, overweight or obesity and risky drinking habits.¹⁴ Compared with Queensland overall, the Townsville Hospital and Health Service reported greater rates of daily smokers, smokers during pregnancy, lifetime risky alcohol use, physical inactivity, and obese or overweight adults and children.¹⁵ Importantly, rural and remote communities experience relatively lower socioeconomic status (compared with major cities) and this is also associated with higher rates of risky health behaviours.

Participation in national cancer screening programs is also lower in rural and remote areas. Participation in the BreastScreen Australia program (in 2019-2020) was higher in Queensland (52.3%) compared with Australia (49.9%). The SA3 region with highest participation rate was Charter Towers-Ayr-Ingham at 67.2% compared with 56.2% in the Outback-North region.¹⁶ Participation in the National Bowel Cancer Screening Program in 2020-21 was lower in the Northern Highlands (SA2) compared with Queensland, at 33.6% compared with 37.5%.¹⁶ Nationally, and at state level, participation increases with age and is higher amongst females.¹⁷ Participation of women aged 25 to 74 years in the National Cervical Cancer Screening Programⁱⁱⁱ (2018-2021) was lower (56.6%) in the Outback-North (SA3) region compared with Queensland (67.5%).¹⁶ Participation rates in Outback-North were lowest for 70-74 years age group at 25.5%, followed by 60-64 years and 30-34 years at 51.1% and 54.6% respectively.

Childhood immunisation coverage in the THHS catchment was 96% of children by 5 years of age in 2019/2020¹⁸ which is higher than the national aspirational coverage target of 95%.

5. Health status

5.1 Chronic Conditions

The most common chronic conditions estimated to affect Australians are mental and behavioural conditions (20.1%), back problems (15.7%), arthritis (12.5%), asthma (10.7%) and diabetes (5.3%); as

ⁱⁱ 181 people didn't answer the question about highest level of schooling and have not been included in the denominator.

ⁱⁱⁱ From 1 December 2017, The National Cervical Cancer Screening Program changed to a 5-yearly program for those aged 25-74 years. The participation rates detailed are interim estimates of 3-year participation rate.

captured from the National Health Survey 2020-21).¹⁹ The nationally recommended data source used to generate these figures is unavailable for small communities. Therefore, the 2021 Census of Population and Housing data for Flinders Shire are reported in this section. It is important to note that the Census asked participants to report long term health conditions diagnosed by a doctor or nurse that had lasted or were expected to last for six months or more. The Census asked about the following specific types of long-term health conditions: arthritis, asthma, cancer (including remission), dementia (including Alzheimer's), diabetes (excluding gestational diabetes), heart disease (including heart attack or angina), kidney disease, lung condition (including Chronic Obstructive Pulmonary Disease or emphysema), mental health condition (including depression or anxiety) and stroke. There was an 'other' option that could be chosen as applied.

In Flinders Shire, asthma (9.5%; n=143), arthritis (7.7%; n=116), heart disease (5.7%; n=86), diabetes (5.5%; n=83) and mental health conditions (5.1%; n=76) were the most commonly reported chronic conditions (Figure 9)^{iv, 5}

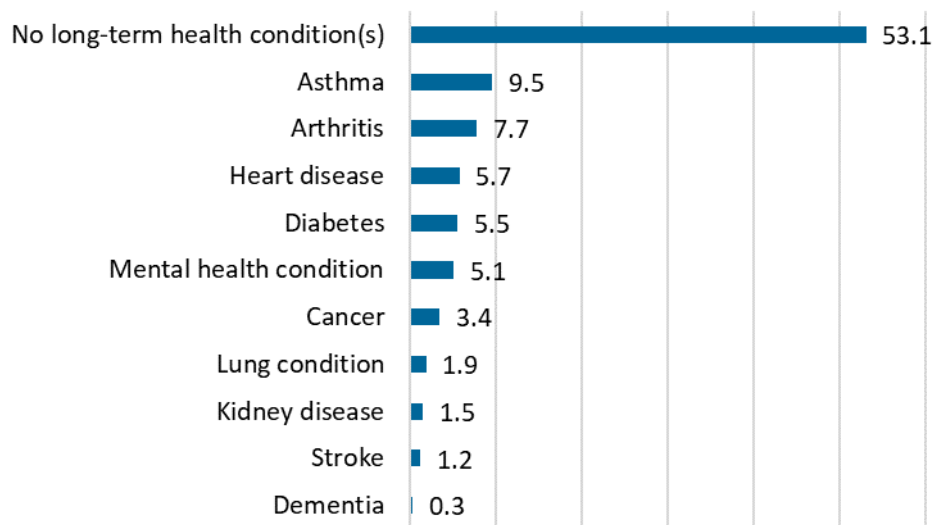


Figure 9. Self-reported prevalence of selected long-term health conditions, 2021.⁵

Twenty-eight percent (n=420) of the population reported experiencing at least one chronic condition, with 18.7% reporting one condition, 6.8% reporting two conditions and 2.5% reporting three or more conditions (Figure 10).⁵ Over half of the population aged 65 years and over reported living with at least one chronic condition with about 50% of this group experiencing two or more chronic conditions.

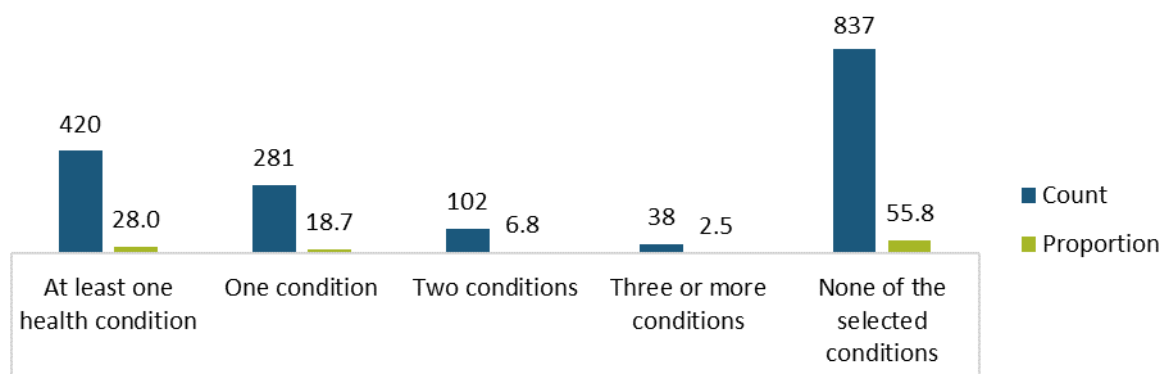


Figure 10. Self-reported prevalence of long-term health conditions in Flinders Shire, 2021.⁵

^{iv} Note: 239 people did not answer the questions about long-term conditions. The data presented are based on the total number of people counted in the Census of Population and Housing for Flinders Shire (n=1504).

^v The ABS suppress or adjust counts slightly to protect anonymity. This means that data presented in this section may not be exactly as captured in the Census of Population and Housing but is very close.

Most chronic conditions were reported by people aged 45 years and over (Figures 11 and 12). The population aged 65 years and over reported having arthritis (22.7% of age bracket; n=73), heart disease (19.9% of age bracket; n=64) and diabetes (13.7% of age bracket; n=44) most commonly. Generally, diabetes increased in prevalence with age and was reported by 8.8% of 45 to 54 year olds, 6.5% of those aged 55 to 64 years and 13.7% of those aged 65 years and over. The number of people reporting diabetes in younger age groups was very low to nil. Prevalence of heart disease also increased with age: 4.4% (n=9) of those aged 45 to 54 years, 6.5% (n=13) of those aged 55 to 64 years and 19.9% of those aged 65 years and over.

Asthma and mental health conditions were the main health conditions affecting the younger population (aged 0 to 54 years).⁵ The highest prevalence of mental health conditions was in the 45 to 54 years age group at 10.2% (n=21). Females more commonly reported mental health conditions, lung conditions, arthritis and asthma while males more commonly reported heart disease and diabetes.

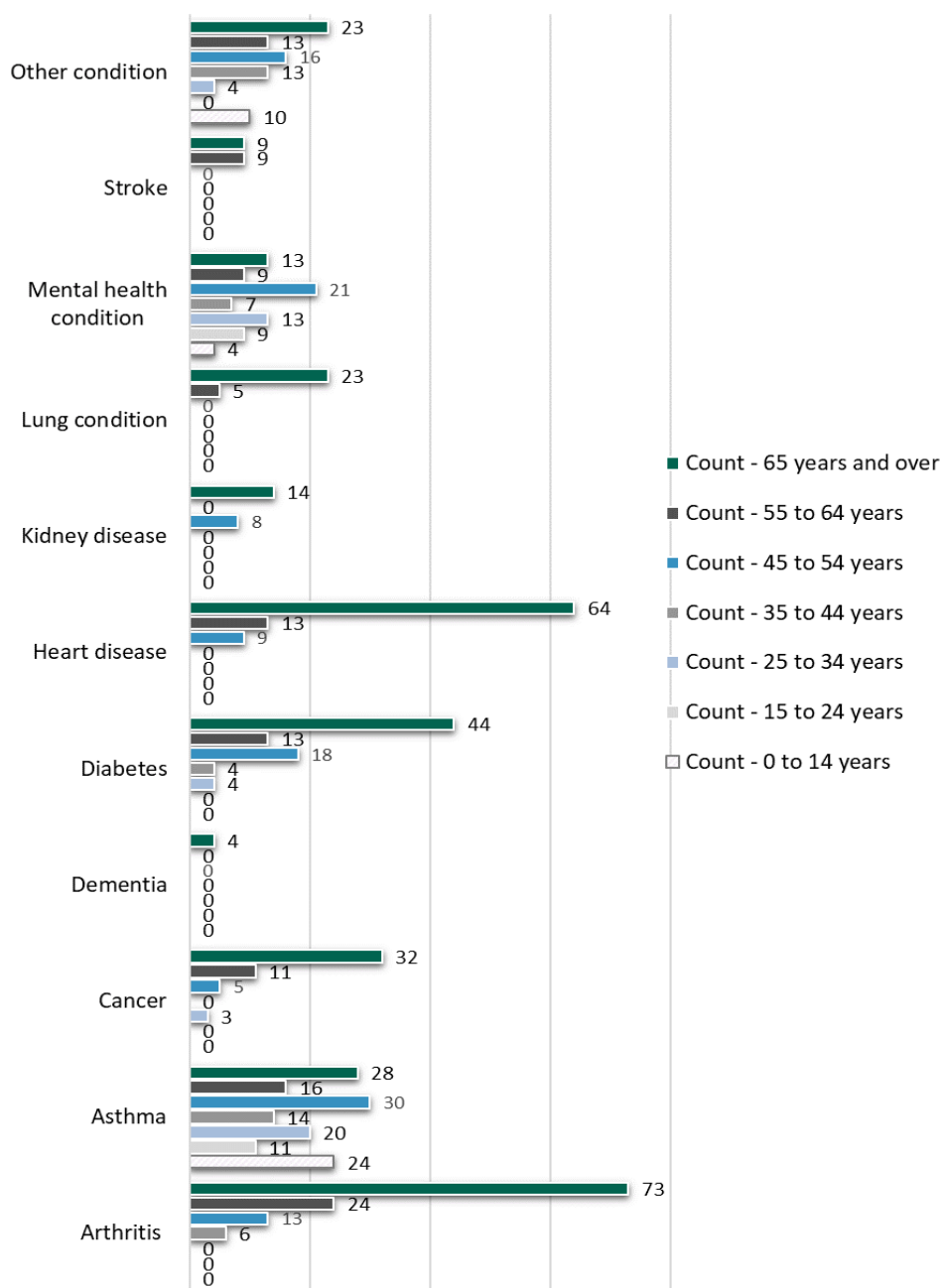


Figure 11. Number of people reporting a long-term health condition by age group in Flinders Shire, 2021.⁵

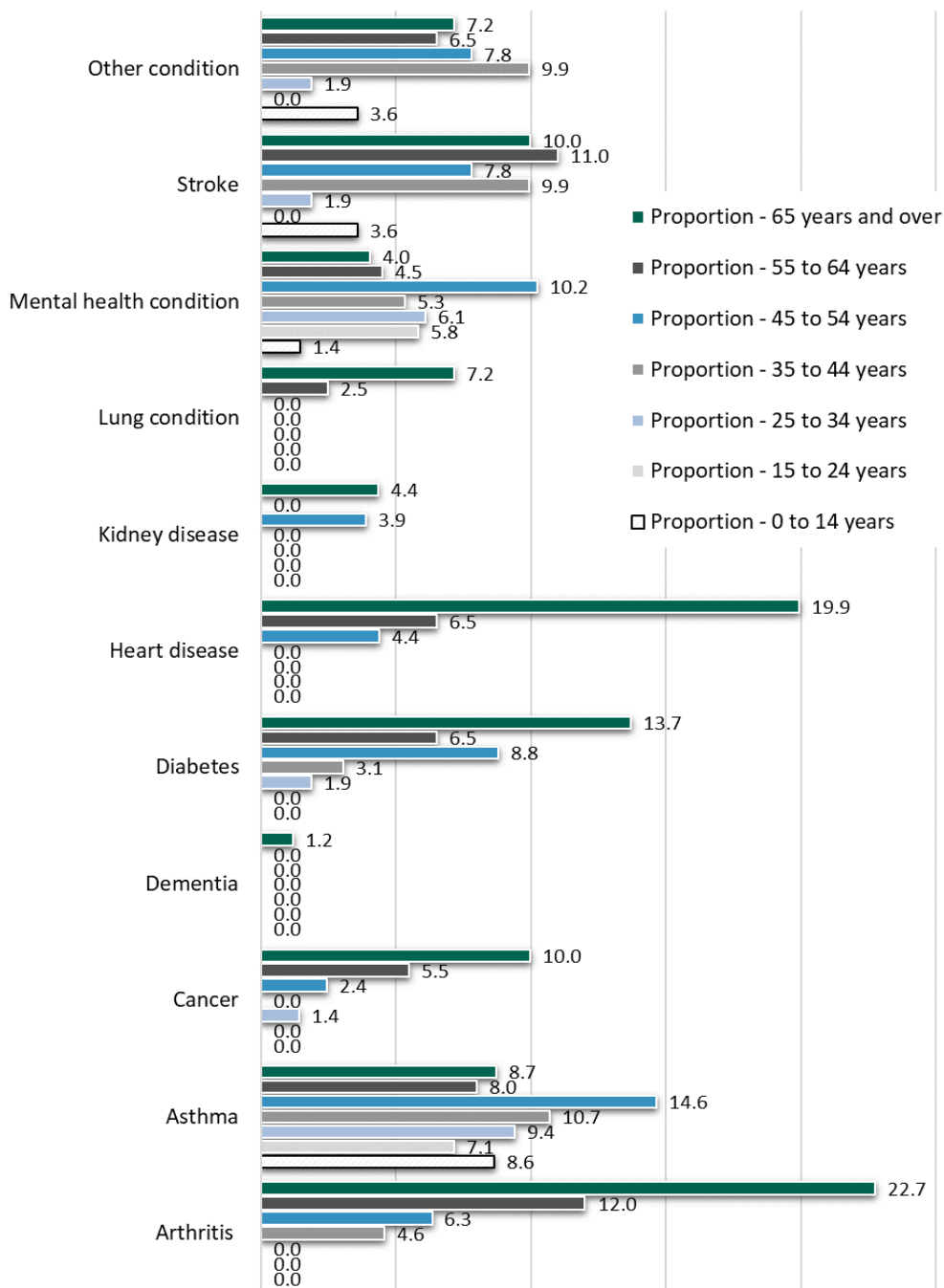


Figure 12. Self-reported prevalence of long-term health conditions in Flinders Shire, 2021 (proportion per age group).⁵

5.2 Disability

There were 63 people living with a profound or severe disability in Flinders Shire with the majority (n=58) living in the community, outside long-term accommodation.¹² Most people living with profound or severe disability were aged 65 years or over (n=42).

5.3 Cancer

About 3% of the population (or 50 people) in the Flinders Shire reported having cancer or being in remission from cancer.¹⁰ In the Northern Highlands (SA2), estimates of diagnoses of certain cancers were reportedly above the Australian average: head and neck cancers (64% above), cervical cancer (27% above), oesophageal cancer (23% above), lung cancer (14% above) and classic myeloproliferative neoplasms (11% above).²⁰ The estimated risk of dying from all cancers within five years of diagnosis was estimated to be

16% above the Australian average, with head and neck cancers estimated to be notably higher at 40% above the Australian average.²⁰

6. Morbidity and mortality

The rate of burden of disease, or the loss of healthy life due to injury, illness or premature deaths, increases with remoteness and socioeconomic disadvantage, and was 1.4 times higher in remote and very remote areas compared to metropolitan areas.²¹ In particular, the burden of kidney and urinary diseases, injuries, infectious diseases, endocrine disorders and cardiovascular diseases are higher in remote and very remote areas.²¹ The age-standardised rate for heart-related hospital admissions for Flinders Shire for the period 2012 to 2016 was 73.2 per 10,000 compared with 49.5 per 10,000 for Queensland presenting heart health as a significant issue.²²

Life expectancy at birth is lower for populations living outside metropolitan areas.¹⁴ The life expectancy at birth for people living in Greater Brisbane is 83.6 years compared with 82.5 years for the rest of Queensland (2018-2020).¹⁴ Aboriginal and Torres Strait Islander people have a lower life expectancy than non-Indigenous people. Based on deaths in the period 2015 to 2017, the life expectancy at birth for Aboriginal and Torres Strait Islander people was 71.6 years for males and 75.6 years for females compared with 80.5 years for non-indigenous males and 84.6 years for non-Indigenous females.^{23,24} In remote and very remote areas, life expectancy decreases considerably with Aboriginal and Torres Strait Islander males having a life expectancy of 65.9 years at birth and females having a life expectancy of 69.6 years at birth.²³

In the Flinders Shire, over the period 2017 to 2021, there were 54 deaths and 48% of these were premature deaths (that is, death occurred under 75 years of age).²⁵ In 2021, premature deaths equated to 50 potential years of life lost (PYLL) per 1,000 population compared with a rate of 44 PYLL per 1,000 in Townsville. The number one cause of death in Flinders Shire (for 2017-2021) was coronary heart disease with 11 of 54 deaths primarily attributed to this condition.

Age-standardised suicide rates were higher outside metropolitan areas.²⁶ In the Outback-North (SA3) region, there were 32 deaths by suicide for the period 2017 to 2021.²⁷ The age-standardised suicide rate was 20.2 deaths per 100,000 compared with 15.6 deaths per 100,000 for Queensland.²⁷ In 2020/2021, hospitalisation rates (crude) for the Outback-North (SA3) region (females 540 per 100,000; males 270 per 100,000) were much higher compared with Townsville (SA3; females 262 per 100,000; males 128 per 100,000). There was a trend of higher suicide rates among younger age groups.²⁸

7. Health care and social services

Health care and social support in the Flinders Shire involves a mixture of local, visiting and telehealth services (and there are a variety of funding sources). There are many organisations that provide outreach services to the Flinders Shire community and these are nearly always offered in the main township of Hughenden. Local and outreach service models often incorporate telehealth.

Flinders Shire is a part of the Townsville Hospital and Health Services (THHS) catchment for public health services and within the North Queensland Primary Health Network (NQPHN). The Flinders Shire is serviced by the Hughenden Multi-Purpose Health Service (Hughenden MPHS). The major referral hospital is Townsville University Hospital (TUH; classified as a level 5/6 specialist service). The Queensland Ambulance Service (QAS) is based in Hughenden and services 250km around this base. Retrieval Services Queensland (RSQ) coordinates retrieval services by air or road in emergencies. Figure 13 depicts other THHS facilities as well as the distance by road (the most common mode of travel) between services.



Figure 13. Public health services in THHS catchment (Flinders Shire shaded in lilac).

This rest of this section consists of information about services available locally or via other means for the Flinders Shire community. It draws on the findings of a desktop review of health and social services, informal stakeholder consultation and relevant knowledge shared through a formal co-design process with the community.

An overview of health and community services available during 2023 is found in Tables 1 and 2.

Table 1. Overview of health services for the Flinders Shire community as at 31 August 2023

Service Name	Emergency / Acute Health	Health – Primary care	Health - Secondary care	Health – Tertiary/specialist	Allied - Chiropractic	Allied - Dental	Allied – Diabetes Educator	Allied - Dietetics	Allied – Exercise Physiologist	Allied – Hearing/Ears	Allied - Mental Health	Allied – Occupational Therapy	Allied – Optometry/Eyes	Allied – Pharmacist / Medications	Allied - Physiotherapy	Allied - Podiatry	Allied Speech Pathology	Aged Care - Accommodation	Aged Care - Respite	Community Svs – Aged	Community Svs - Children	Community Svs - Youth	Community Svs – Women' s	Community Svs – Men' s	AOD Support	Cardiac Services	Health promotion / preventive	Indigenous Health	Palliative Care	Sexual Health	Skin Health
HUGHENDEN-BASED																															
Hughenden GP Surgery		H																						V			H	H		H	H
Hughenden MPHS	H	H	H	VT ₁	V	V				V	V	V	H ²	V		V	H			V	V	V	V	V				H	T	V	
Hughenden Pharmacy		H												H																	
Flinders Shire Council – Community Care																		H	H	H											
Queensland Ambulance Service	H																														
VISITING																															
BodyFix									V						V																
Clarity Hearing Solutions										V																					
DAWN Services (Community Care Nurse)																				V											
Flying Skin Doctor																															V
Hearing Australia										V																					
Heart of Australia																										V					
Hodgson Optical													V																		
Lives Lived Well																									V						
North West Remote Health						V	V	V		V	V				V																
O'Brien Chiropractic					V																										
Outback Futures											V																				
Project Outback Dental						V																									
TRACC Tackling Regional Adversity Connected Communities											V																				
RFDS Mental health selectability											T																				
Talk HQ											V						V														
Towers Podiatry																V															
Townsville University Hospital			O	VT ₁																											
Tropic Kids															V																
True Relationships & Reproductive Health																								V	V						V

H=Hughenden-based; V=Visiting; T=Telehealth; O=Other location;

1 Specialist visiting clinic – paediatrics. Specialist telehealth clinics include geriatrician and oncology. Other appointments by telehealth on an ad hoc basis.

2 Limited service to public

Table 2. Overview of community and social services for the Flinders Shire community as at 31 August 2023

Service Name	Advocacy	Charity clothing	Disability Care plans	Domestic Violence Support	Emergency Relief	Employment	Family Support	Financial assistance/Counselling	Housing Homelessness Support	Indigenous Services	Legal Services	Support services	Telehealth capabilities	Youth support
Aged and Disability Advocates (ADA) Australia	V													
Carer's Gateway (NWRH)												V		
Centrelink Community Support Services (Services Aust)				H	H	H	H	H	H					
Country Women's Association (CWA)									H					
Flinders Shire Council – Library Services													H	
Health Collective Group			V											
Independent Advocacy NQ	V													
Mercy Community			T											
National Disability Insurance Scheme (NDIS)– Mount Isa Office			V											
North West Indigenous Community Centre										H				H
Prospect Community Services			V	V	V		V	V	V					V
Qld Indigenous Family Violence Legal Service - QIFVLS											V			
Rainbow Gateway						H				H				
Rural Financial Counselling Service								V						
St Vincent de Paul		H			H									
Uniting Care - NQ Rural Family Support							V		V	V				
Yumba Community Co-op Society									H	H				

7.1 Hughenden Multi-Purpose Health Service (Hughenden MPHS) - Queensland Health

The Hughenden MPHS is the only public health care facility in Flinders Shire. It is a nine-bed acute care facility that provides Level 2 (Clinical Services Capability Framework; CSCF) medical and emergency services, and general medical services for outpatients. There are six long-stay nursing home-type beds.

The Medical Superintendent with Right to Private Practice was the model of care used in Hughenden for some years. However, the community has struggled to retain general practitioners recruited under this model since a long-term GP retired in 2013. A locum model of medical care is currently being used at the Hughenden MPHS following the recent loss of a private general practitioner (GP) who was also the medical superintendent at the facility.

There are very few visits by medical specialists to the Hughenden MPHS: a public paediatrician visits once per quarter and (in recent times) a geriatrician visits once per year.

Community health services are provided by multidisciplinary teams of nurses, allied health professionals and doctors based locally, or through outreach in-person or using telehealth. Adult, child and maternal community health services are provided at the Hughenden MPHS. In addition, in-person visiting allied health services occur at various intervals: visiting physiotherapy services, occupational services, and speech therapy (all monthly); and dental services (1 week per month). A podiatrist has commenced visiting every two months from July 2023. There is a vacant social worker position. A child development service also visits quarterly. The BreastScreen mobile van for breast cancer screening visits the community once a year.

Telehealth forms an important part of local service delivery. Local service providers access telehealth services to support management of care.

- Retrieval Services Queensland (RSQ; based in Brisbane) provides clinical coordination of emergency aeromedical retrieval and transport for Queensland Health (QH). Providers at the Hughenden MPHS and/or local QAS communicate with RSQ to organise emergency retrievals and transfers to other facilities.
- The QH Telehealth Emergency Management Support Unit (TEMSU; also based in Brisbane) supports rural and remote providers and patients by providing advice to nurses and doctors, as requested by local providers, to identify and manage patient deterioration and avoid unnecessary retrieval.
- Another telehealth service supporting providers and consumers at Hughenden MPHS is the QH Specialist Palliative Rural Telehealth service (SPaRTa). The Townsville-based service advises and supports providers in the THHS catchment area with managing patients with terminal illness.
- Patients also have access to telehealth services with some appointments with specialists and allied health providers being conducted via telehealth. These appointments may be held at the Hughenden MPHS via videoconference with support from local staff members. The Council Library has facilities or patients may use their own devices at home or another location. Patients must still travel to Charters Towers, Townsville or other major cities to access specialist and outpatient services, and access to the Patient Travel Subsidy Scheme provides some financial assistance.
- Patients receiving chemotherapy may be eligible (depending on their care requirements) to access a telehealth oncology service that is supervised by the Townsville University Hospital.

7.2 Hughenden Doctors Surgery

There is a single private general practice in the community. The practice was, up until recently, operated by a GP who was also the Medical Superintendent at the Hughenden MPHS. Prior to this, a GP had serviced the community for many years. Historically, there have been long waits for GP appointments and community members have been travelling to Richmond to access GP services there, particularly following the loss of the community's long-term doctor.

In addition to the full time Medical Superintendent with Right to Private Practice, there is a locum GP, a 0.6 FTE practice nurse, one full time practice manager / reception and a casual/relief receptionist.

7.3 Hughenden Pharmacy

There is one pharmacist who owns and operates the local pharmacy. The pharmacy services the general community and is open on weekdays.

7.4 Flinders Shire Council Community Care

Flinders Shire Council Community Care provides support for older people and people living with disabilities, as well as their caregivers, to live independently in the community. Community Care provides a range of services and programs (Table 3).

Table 3. Programs and services offered by Flinders Shire Council Community Care.

Program	Description
Care Finder	<p>This program services the Flinders and Richmond Shire Council areas and assists those who are eligible for government-funded aged care services and require intensive support to interact with My Aged Care, access aged care services and connect with other community supports. This includes people who already receive aged care services or other relevant supports.</p> <p>It focuses on older people who face significant barriers navigating the aged care system due to:</p> <ul style="list-style-type: none"> • communication barriers, including limited literacy skills • difficulty processing information to make decisions • reluctance to engage with aged care services for any reason • they are uncomfortable engaging with aged care, institutions or the government due to past discrimination and/or trauma • they are vulnerable or isolated with need for support <p>The care finder program supports people who don't have family, friends, a carer or a representative they are comfortable receiving help from and who is willing and able to help them access aged care services and supports. Eligibility criteria apply.</p>
Queensland Community Support Services (QCSS)	<ul style="list-style-type: none"> • This program provides support for people aged under 65 years (or under 50 years for Aboriginal and Torres Strait Islander people) with a disability (and are ineligible for NDIS), a health condition or have other circumstances impacting on the ability to live independently in the community. • Services include help with: shopping, recreational activities, health visits, meal preparation, household chore, personal care and basic home maintenance. • The program is funded by the Queensland Government and usually requires a contribution from clients to access the services.
Commonwealth Home Support Program (CHSP)	<ul style="list-style-type: none"> • This program provides support for people aged 65 years or over (or 45-50 years or older for Aboriginal and Torres Strait Islander people) to help with living independently in the community. Also for younger person with disability, dementia or other care needs not met through other programs. • Services include: meal preparation, hygiene, nursing care, podiatry, physiotherapy and other therapies, continence support, respite care,

	<p>household chores, socialising, transport, aids to stay independent, home modification and home and garden maintenance.</p> <ul style="list-style-type: none"> • The program is funded by the Commonwealth and may require a contribution from clients.
Home Care Packages, Levels 1, 2, 3 & 4 (HCP)	<ul style="list-style-type: none"> • This program provides support for people aged 65 years or over (or 45-50 years or older for Aboriginal and Torres Strait Islander people) with complex care needs to help with living independently in the community. • HCPs allow coordinated approach to support to stay home. Services are similar to the CHSP and availability of these services increase with the level of HCP. • The program is funded by the Commonwealth and may require a contribution from clients.
Veterans Home Care	<ul style="list-style-type: none"> • This program provides support for veterans and their dependents to live independently in the community. • Services include: financial support, health care, rehabilitation, returning to civilian life and home care assistance.
National Disability Insurance Scheme (NDIS)	<ul style="list-style-type: none"> • The NDIS provides funding for people aged 7 years to 65 years with disability caused by a permanent impairment to support greater independence, access to new skills, jobs, volunteering and improved quality of life. • An individualised package of support is developed and includes support and funding for health, housing, education, community services and informal supports. • The NDIS is jointly funded by the Commonwealth and state/territory governments.
Meals on Wheels	<ul style="list-style-type: none"> • This program aims to support people to live independently through delivery of nutritious meal, social connection and wellbeing check. • Meals on Wheels is a not for profit service. Meals cost from \$4.50 to \$12 and may also be accessed under the CHSP.
Accommodation - Hammond Court Cottages	<p>The six Hammond Court Cottages are provided by the Flinders Shire Council. Each cottage is a one bedroom unit with a kitchen, bathroom, lounge and laundry and two have garages. These cottages are available on a priority basis.</p>
Accommodation – Hughenden Centre for the Aged	<p>There are 12 self-contained units for independent living available to older people on a priority basis. The Centre was built by the community with financial commitment from the Flinders Shire Council. There is a formal tenancy agreement and a cost to tenants of \$150 per week per unit. The complex includes a caretaker cottage (although no employed caretaker at present), communal dining room, a hall, kitchen and landscaped gardens.</p>
Community Transport	<p>This service is available for residents aged who have trouble accessing transport to get around the local township. Eligibility criteria apply.</p>

7.5 Local Social Services

Health is often impacted by other issues being experienced by individuals and families such as homelessness/housing, education and employment and domestic violence for example. Hughenden has a small number of social services to support the community including:

- **Country Women's Association** which provides opportunities to support and be involved with the local community.
- **Flinders Shire Council Library Services** which provides children's programs such as First 5 Forever and access to resources including computers and internet which can be used for telehealth.
- **North West Indigenous Community Centre** is still in the establishment phase but planning to facilitate provide support and programs for local Indigenous people and their families.
- **Rainbow Gateway** is a registered charity that provides support for people who live in regional, rural and remote areas, Aboriginal and Torres Strait Islander people, financially disadvantaged people and unemployed people.
- **Services Australia** provides access to Centrelink services. This service is open Monday to Thursday from 9am to 12.30pm.
- **Vinnies** is a St Vincent de Paul shop selling recycled clothing, books and resources and offers emergency relief. It is managed and run by volunteers.
- **Yumba Co-op Society** is a not for profit organisation that provides social housing options and culturally appropriate support services for people on low incomes and having difficulty securing accommodation, particularly for Aboriginal and Torres Strait Islander people.

7.6 Visiting services

There are several health or community services that visit Hughenden. Services include disability and aged care support, physiotherapy, occupational therapy, speech pathology, podiatry, hearing, optical, skin cancer screening, women's health, chiropractic, dental care, support for alcohol and substance abuse, family violence support and financial counselling. These services may be privately funded, publicly funded (as outlined in services offered by Hughenden MPHS), supported with funding through CheckUP or funded through other sources. They may be delivered regularly, or more often at intervals through the year, through face to face visits as well as by telephone or telehealth. Tables 1 and 2 provide a summary of all services available for the Flinders Shire community, including visiting services. The service directory developed by the local project support officer and research team provides further detail on available services.²⁹

8. Service utilisation

8.1 Primary and secondary care

The main chronic conditions managed in general practice in the NQPHN catchment area (January 2017-July 2021) are hypertension and hyperlipidaemia (40.7% of patients), mental health problems (38.2%), musculoskeletal conditions (35.2%) and respiratory conditions (23.8%).¹⁸ General practice data about conditions that are being managed in general practice in the Flinders Shire could not be accessed locally or from the NQPHN. Given the self-reported prevalence of specific chronic conditions in Flinders Shire (in the Census of Population and Housing 2021) a similar trend is likely for residents accessing general practice in Flinders Shire.

Outpatient clinics at Hughenden MPHS

The Hughenden MPHS delivers adult and child community health, general medicine, general practice and primary care, and maternity clinics (and used to deliver paediatric medical clinics prior to 2020). The majority of these clinics were delivered in-person over the period 2019 to 2022 (Figure 14); with the exception of general medicine clinics in 2022 (Figure 15). The majority of general practice and primary care clinics were attended by infants aged 0 to 5 years. It is unclear as to what these GP clinics were for – may have been for supervision of child immunisations conducted by the community health nurse.

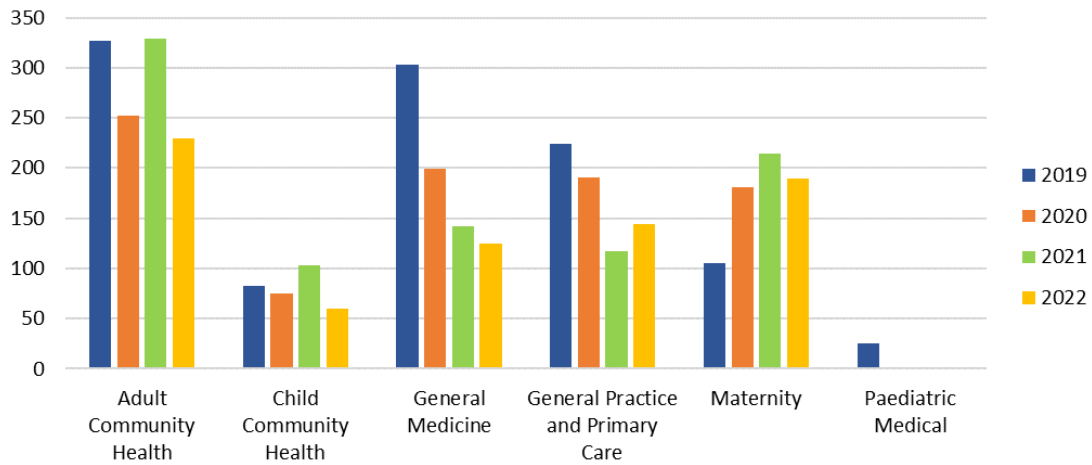


Figure 14. Number of attendances for primary and secondary care delivered in-person at Hughenden MPHS over time.³⁰

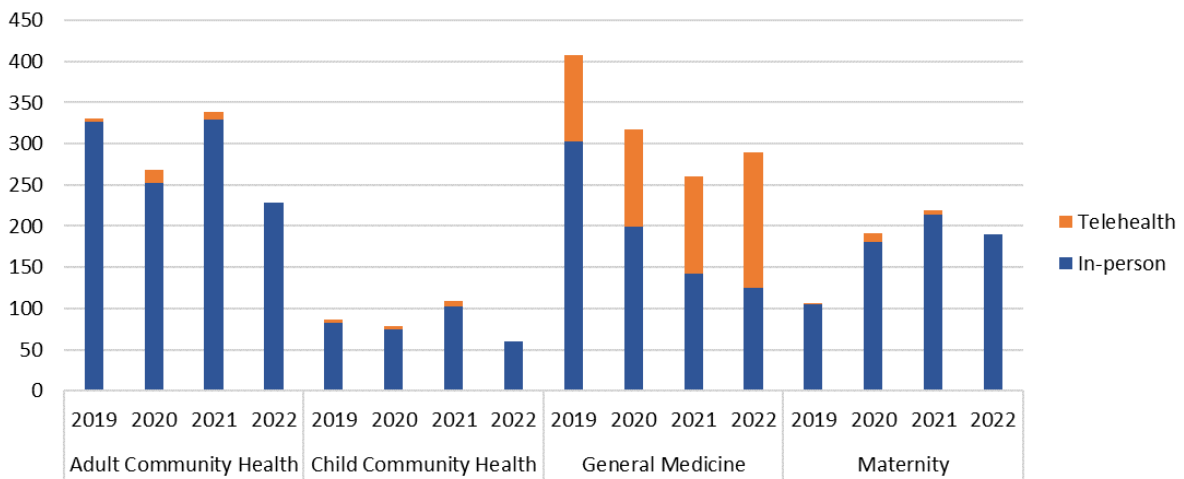


Figure 15. Number of attendances for primary and secondary care delivered in-person and by telehealth at Hughenden MPHS over time.³⁰

The number of attendances at maternity clinics for antenatal care is found in Figure 16.

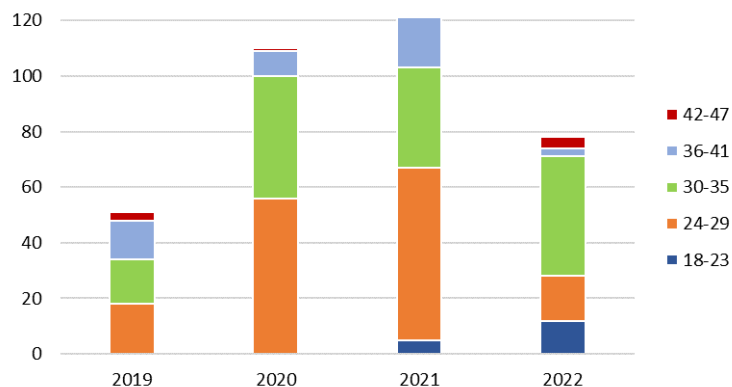


Figure 16. Number of attendances at maternity clinics for antenatal care over time.³⁰

Hughenden patients may access telehealth for specialist appointments where clinically appropriate. There has been an increase in telehealth activity over the period 2018 to 2023 with over 400 telehealth services provided for Hughenden patients in 2022 (see Appendix 1). Specialties accessed via telehealth include oncology, paediatrics, nephrology, orthopaedics, urology, plastic and reconstructive surgery, gynaecology,

gastroenterology, haematology, rheumatology, diabetes, neurology, cardiac surgery-cardiothoracic, pain management, psychiatry and geriatrics (see Appendix 1).

Potentially Preventable Hospitalisations

Potentially Preventable Hospitalisations (PPH) are an important indicator of the effectiveness of primary health care. PPH are specific chronic, acute or vaccine-preventable conditions whereby effective primary health care should have prevented hospitalisation. Between 9.6% and 10.9% of episodes of admitted patient care to private and public hospitals for usual residents of the Northern Highlands region (consisting of Flinders Shire, Richmond Shire and McKinlay Shire) were for PPH conditions in the years 2016/2017 to 2020/2021 (Figure 17).³¹

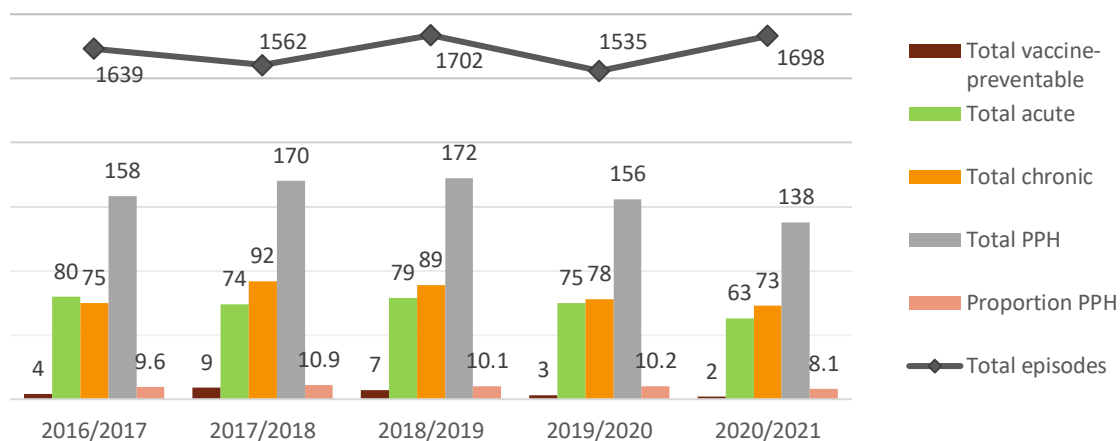


Figure 17. Episodes of admitted patient care for Potentially Preventable Hospitalisation conditions for usual residents of the Northern Highlands region.³¹

The majority of PPH were for chronic and acute conditions: hospitalisations due to diabetes complications were the most common PPH condition across all five years (32 to 40 episodes) followed by acute cellulitis (20 to 31 episodes).³² It is important to note that episodes of admitted patient care do not equate to number of individuals; an individual may have more than one episode of admitted patient care and thus multiple numbers of admissions for a PPH condition. Other high frequency chronic PPH conditions included chronic obstructive pulmonary disease, congestive cardiac failure and angina. Other high frequency acute PPH conditions were dental conditions; ear, nose and throat infections; and urinary tract infections.

Dental services at Hughenden MPHS

Data for dental services are mostly unavailable. There were 20 clients on the waiting list for general care at the public visiting dental service at Hughenden MPHS, as at May 2023.³³ Eighteen clients had been waiting less than 12 months and two had been waiting 12 to 24 months, with the type of care needed flagged to ideally occur within 24 months. There was one additional person who had been waiting for seven to twelve months for care that should occur within six months (Priority 3).

The school dental van, funded by Queensland Health, visits the Hughenden State School annually.

8.2 Acute care

Attendance at Hughenden MPHS for emergency care

Attendance at the Hughenden MPHS for emergency care steadily increased over the period 2018 to 2021 with about the same total number of attendances in 2021 and 2022 (Figure 18).³⁴

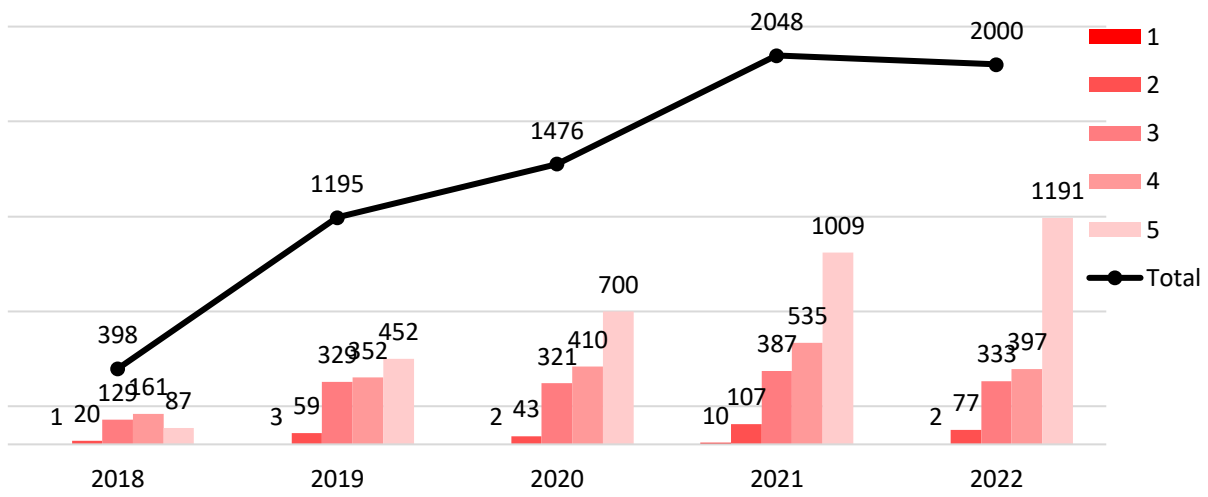


Figure 18. Attendances for emergency care at Hughenden MPHS by triage category, over time^{vi, 34}.

The biggest increase in numbers from 2020 were for less urgent care (Category 5; Figure 19). Hughenden has been in a period of instability with GP workforce and have been without a GP for intervals throughout 2021 and 2022. This could be part of an explanation for the observed increase in attendance for low urgency care at the Hughenden MPHS over the past two to three years. The COVID-19 pandemic, which affected Queensland communities in 2020 and 2021, may also partly explain this observation. It seems likely that the COVID-19 pandemic would also explain the small increase in numbers of attendances in 2021, compared with 2020, in all categories for more urgent care.

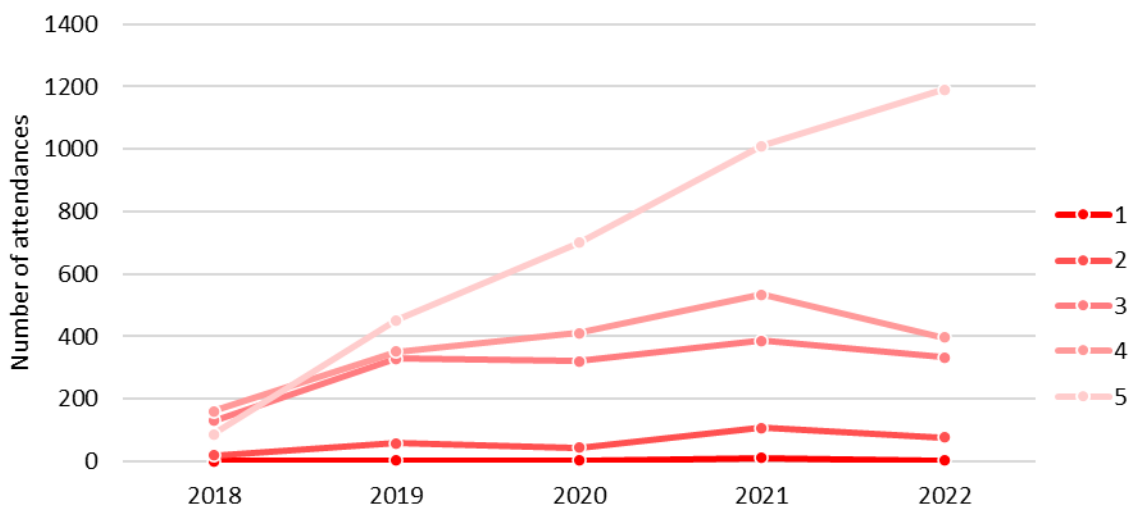


Figure 19. Attendances for emergency care at Hughenden MPHS by triage category.³⁴

For the period 2018 to 2022, between 23% and 29% of all emergency attendances were for adults aged 66 years and over.³⁴ This is high when compared to national data indicating that 22% of hospital attendances for emergency care were for adults aged 65 years and over in 2019/2020.³⁵ The total number of emergency attendances in 2022 for all age groups and by sex is found in Figures 20 and 21. Further breakdown by triage category is found in Figures 22 and 23.

^{vi} Note: Category 1 (Immediately life-threatening to be seen within 2 minutes of arriving); Category 2 (Imminently life-threatening to be seen within 10 minutes of arriving); Category 3 (Potentially life-threatening to be seen within 30 minutes of arriving); Category 4 (Potentially serious to be seen within 60 minutes of arriving); Category 5 (Less urgent to be seen within 120 minutes of arriving).

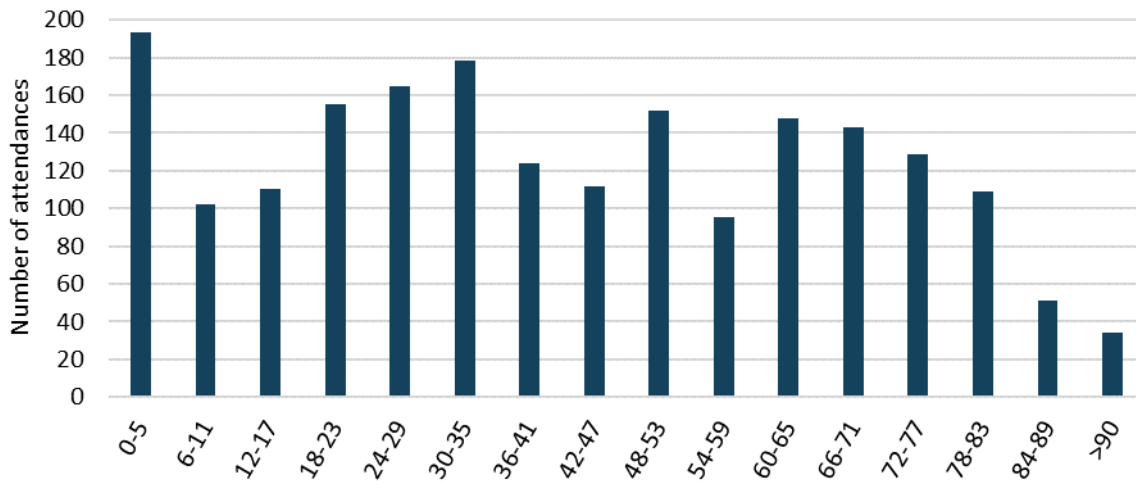


Figure 20. Attendances for emergency care at Hughenden MPHS by age group, 2022.³⁴

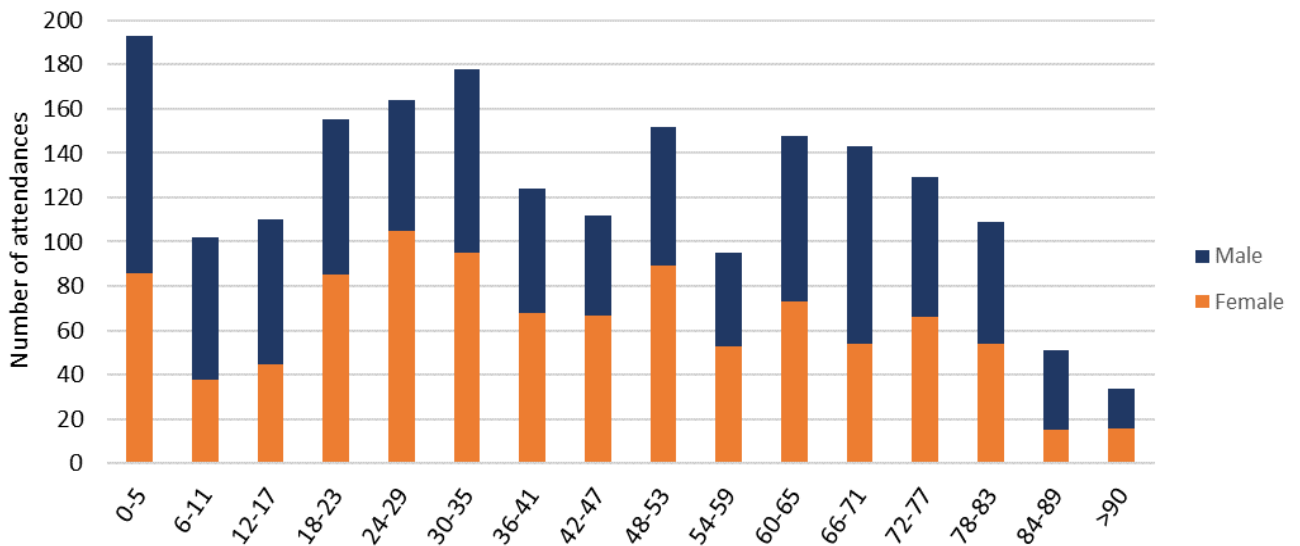


Figure 21. Attendances for emergency care at Hughenden MPHS by sex, 2022.³⁴

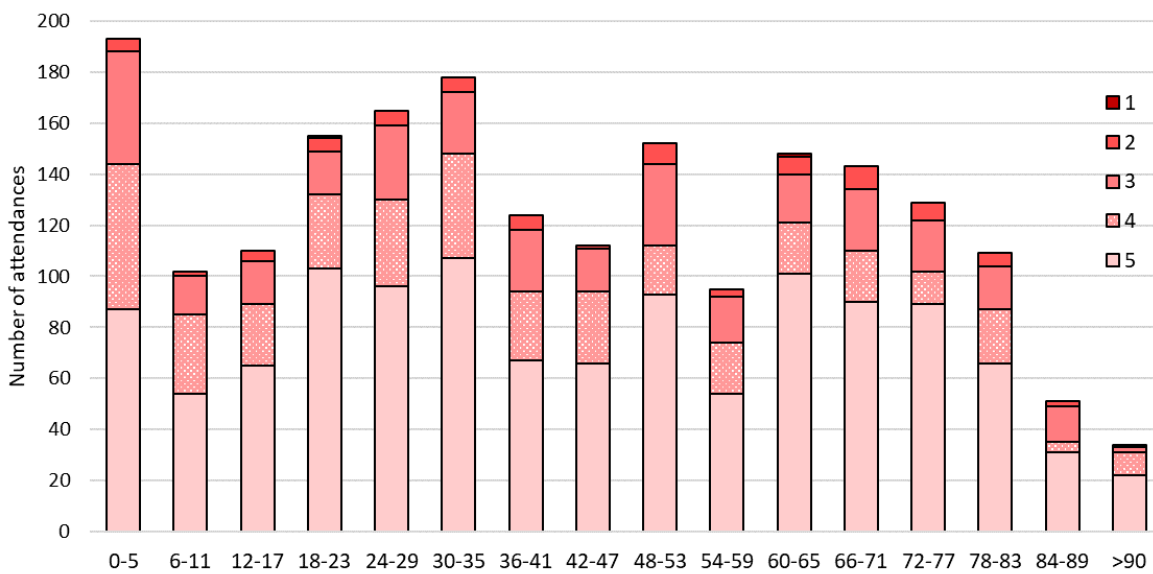


Figure 22. Attendances for emergency care at Hughenden MPHS by triage category and age group, 2022.³⁴

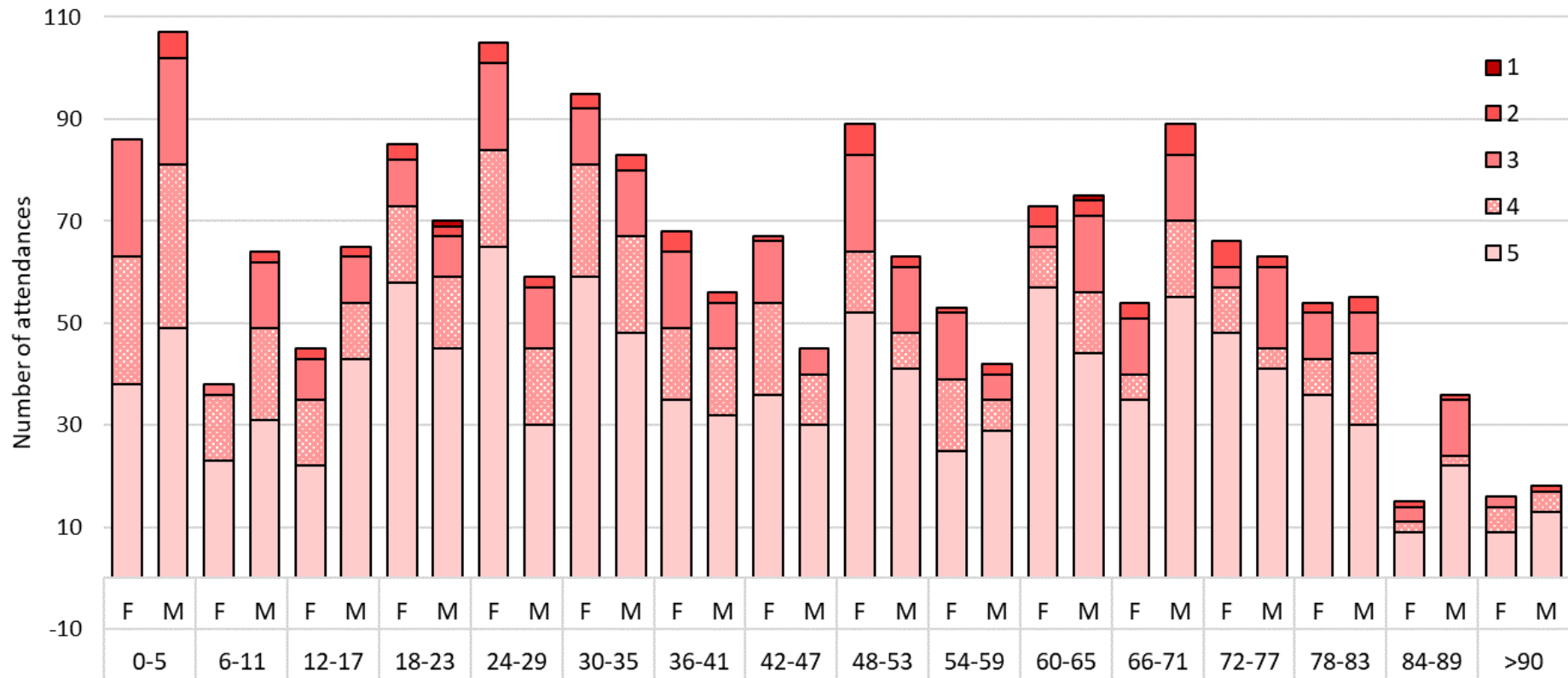


Figure 23. Attendances for emergency care at Hughenden MPHS by triage category, age group and sex, 2022

Emergency retrievals

RSQ coordinated between 53 and 98 emergency retrievals per year from Hughenden MPHS between 2014/2015 and 2020/2021 (Figure 24).³⁶

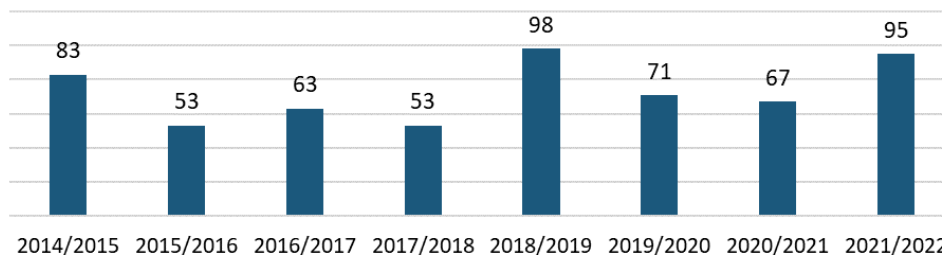


Figure 24. Total number of retrievals coordinated by RSQ, over time.³⁶ Interpret data prior to 2017/2018 with caution.

The majority of retrievals were categorised as Priority 3 (transfer within 3 to 6 hours) for the year range 2019/2020 to 2021/2022 (Figure 25).

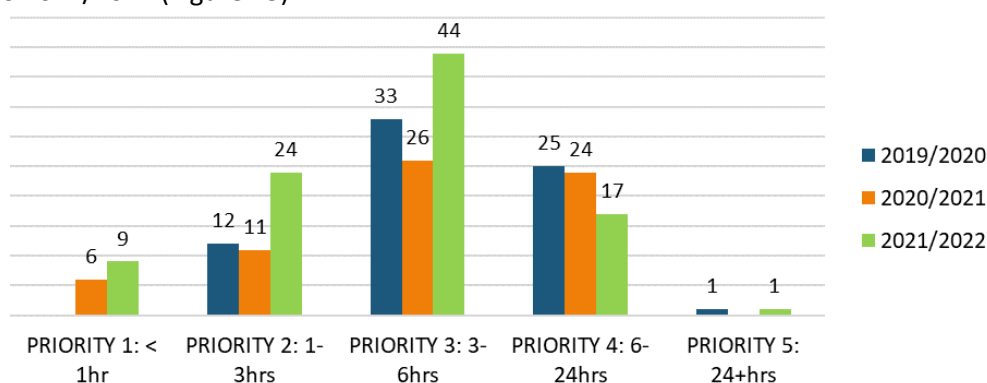


Figure 25. Total number of retrievals from Hughenden MPHS coordinated by RSQ over time.³⁶

Over the past three years and across all priority categories, more males than females have required retrieval from Hughenden MPHS (Figure 26).³⁶

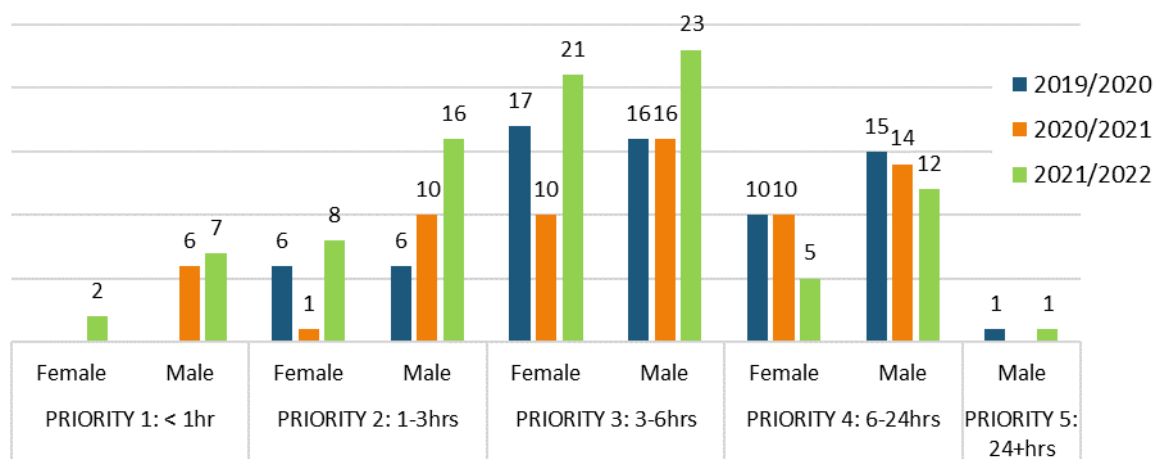


Figure 26.1. Number of retrievals coordinated by RSQ over time, by sex.³⁶

The top three illness assessments that required transfer from Hughenden MPHS are listed in Table 4.³⁶

Table 4. Top 3 reasons for emergency retrieval by RSQ from Hughenden MPHS.

Illness assessment	Year			
	2018/2019	2019/2020	2020/2021	2021/2022
Injury, poisoning and certain other consequence of external causes	27	18	22	28
Diseases of the circulatory system	12	12	19	15
Symptoms, signs, abnormal clinical and laboratory findings, not elsewhere classified	10	10	5	15

Admissions at Hughenden MPHS

The Hughenden MPHS is an acute care facility and the majority of admissions at Hughenden MPHS are emergency admissions (Figure 27).^{37,38} The average annual total number of admissions at Hughenden MPHS over the past five years (2018 to 2022) was 306 admissions.³⁷ There was a drop in the number of admissions in 2020 aligning with the COVID-19 pandemic in Australia that saw the implementation of quarantine and lockdown periods throughout the year. It is important to note that an individual patient may be admitted on more than one occasion in a year.

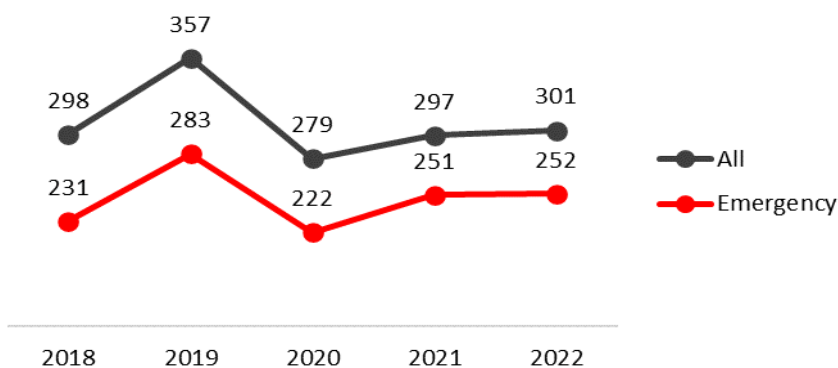


Figure 27. Total number of admissions to Hughenden MPHS for the period 2018 to 2022.^{37,38}

For each year over the five year period, emergency admissions at Hughenden MPHS for people aged 66 years and over formed 43% to 54% of all emergency admissions.³⁸ In 2022, 48% of emergency admissions were for people aged 66 years and over. Emergency admissions for males aged 66 years and over were consistently higher than for females for the five year period except for the oldest age group (90 years and older) and in the year 2021 (Figure 28 shows an example of this trend for the year 2022).

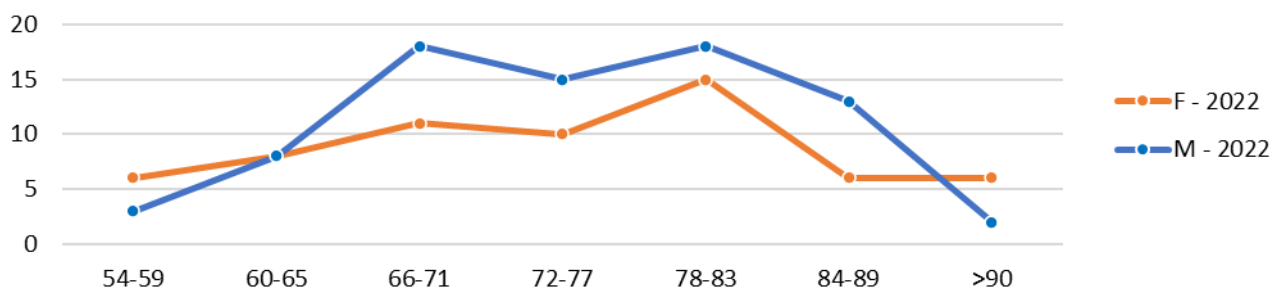


Figure 28. Number of emergency admissions by age group and sex, 2022.³⁸

The number of emergency admissions was consistently lowest, across the five year period, for the age groups 6 to 11 years, 12 to 17 years and 54 to 59 years (at under 10 admissions per year).³⁸ Figure 29 shows the number of admissions per age group in 2022.

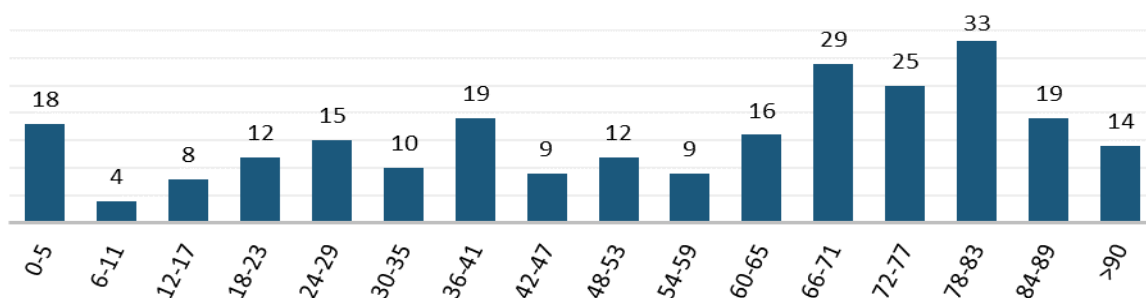


Figure 29. Number of emergency admissions at Hughenden MPHS per age group in 2022.³⁸

Top reasons for hospital admission in the Northern Highlands region

Data for reasons for hospital admission for residents of Flinders Shire are unavailable. The most common reasons for hospital admissions in 2020/2021 for usual residents of the Northern Highlands (SA2) by diagnostic chapter are found in Table 5.³⁹

Table 5. Most frequent reasons for hospitalisations for usual residents of the Northern Highlands by principal diagnosis chapter.

Principal diagnosis chapter	Number of admissions
Factors influencing health status and contact with health services: patients receiving services when a disease or injury is not the primary reason the service is provided e.g. examinations, medical observation	217
Injury, poisoning and certain other consequences of external causes	203
Diseases of the digestive system	186
Diseases of the musculoskeletal system and connective tissue	143
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	139
Neoplasms	119
Pregnancy, childbirth and the puerperium	112

8.3 Aged care and disability sector

About 11% of usual residents of the Flinders Shire (64% of whom were female) provided unpaid assistance to a person with a disability, health condition or due to old age during the two weeks before Census night 2021.¹⁰ There were 22 people registered with the NDIS in the Flinders Shire (March 2023).⁴⁰ Table 6 outlines the number of local residents accessing programs and services provided by the Flinders Shire Council Community Care.

Table 6. Residents accessing the Flinders Shire Council Community Care programs and services.

Program	Clients (December 2022)
Queensland Community Support Services (QCSS)	120
Commonwealth Home Support Program (CHSP)	Data N/A
Home Care Packages, Levels 1, 2, 3 & 4 (HCP)	30 (about 80% accessing level 3 or 4 packages)
Veterans Home Care	Data N/A
National Disability Insurance Scheme (NDIS)	Data N/A
Meals on Wheels	Data N/A
Independent Living Units (and waiting list?)	Data N/A

9. Road crash data

Safety issues associated with travelling alone on the roads between towns were also raised as significant considerations for the need to travel. For the period January 2018 to December 2022, there had been 103 traffic crashes on main roads between Richmond and Townsville (see Figure 30) in high-speed zones of 100km/hr to 110km/hr. This resulted in injury of varying severity for a total of 142 people with 10 fatalities, 82 people requiring hospitalisation, 35 people requiring medical treatment and 15 people with minor injuries.⁴¹

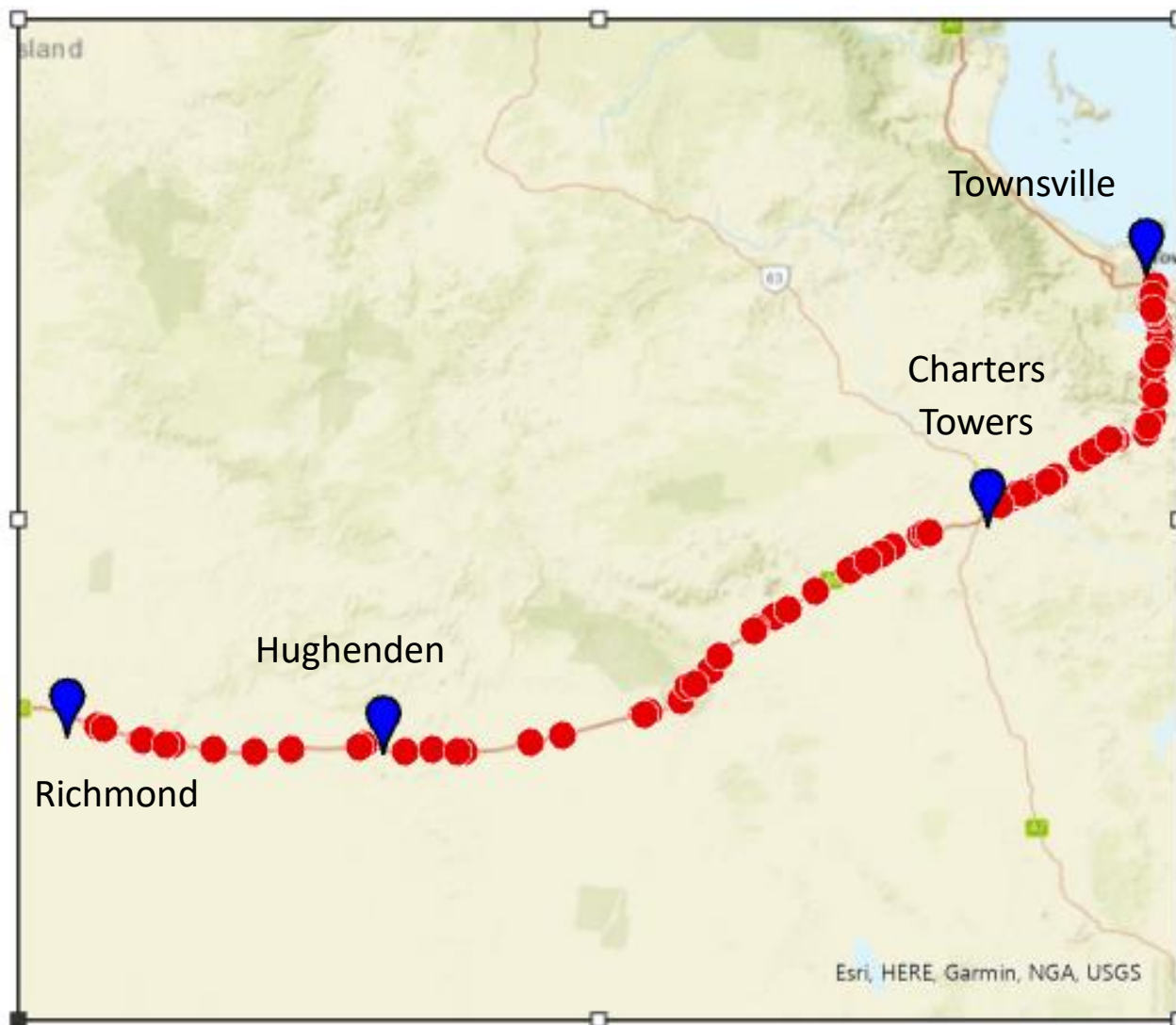


Figure 30. Crashes on main roads in high speed zones of 100km/hr to 110km/hr between important health services centres used by Hughenden residents (January 2018 to December 2022).⁴¹

Figure 31 displays the breakdown of incidents for each stretch of road.^{vii} A recent study in Queensland, found the risk of fatalities due to road travel for medical appointments increased with remoteness and represented avoidable risk of fatality by road travel.⁴²

^{vii} Based on public crash data reported to Queensland Police for Queensland roads.⁹ Licensed under <https://creativecommons.org/licenses/by/4.0/>.

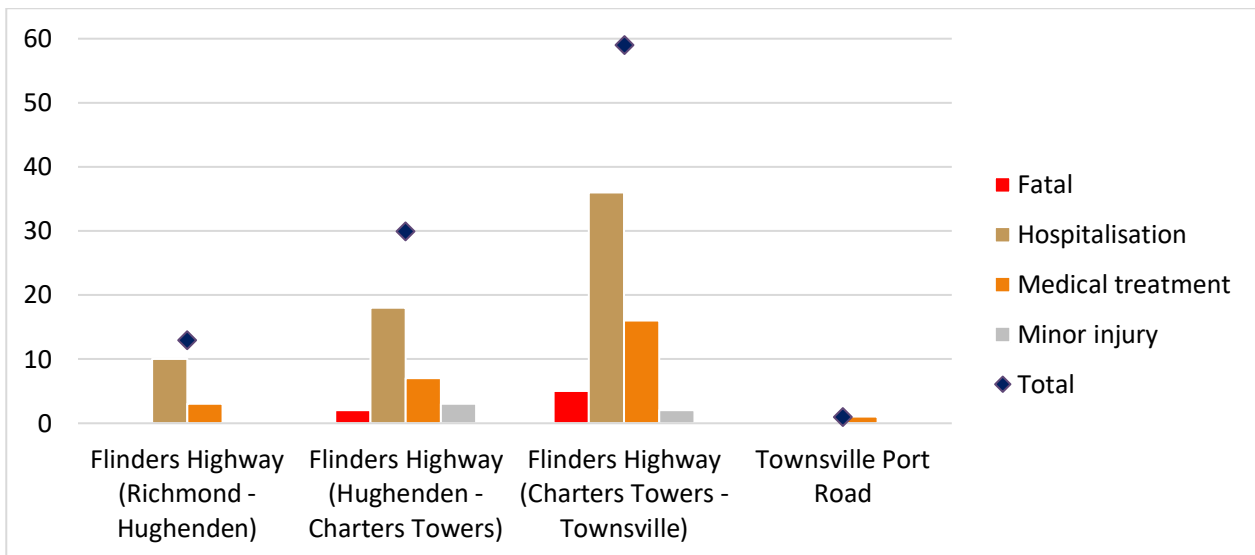


Figure 31. Crashes on main roads in high speed zones of 100km/hr to 110km/hr by severity (January 2018 to December 2022).⁴¹

Farming and high levels of travel to neighbouring towns were associated with high risk of injuries and accidents. Road accidents requiring medical care involved Hughenden QAS, Hughenden MPHS and Hughenden Fire Station staff and services. For the five year period, 2018 to 2022, there were 45 road accidents in the Flinders region resulting in 30 casualties that would likely have used Hughenden services (see Figure 32).⁴¹ There was one fatality, 18 people requiring hospitalisation, 8 people requiring medical treatment and 3 people with minor injuries.

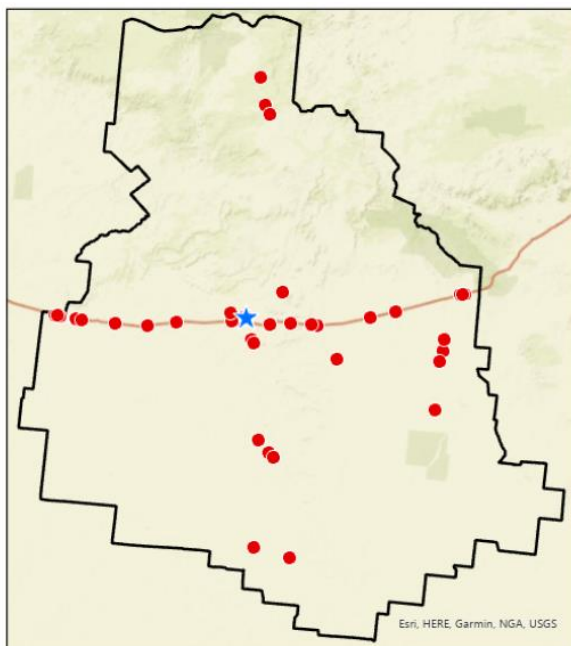


Figure 32. Road crashes between 2018 and 2022 within the Flinders region (Local Government Area).

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Appendix 1: Telehealth Presentation to the Hughenden Community Advisory Network (Sept 2023)

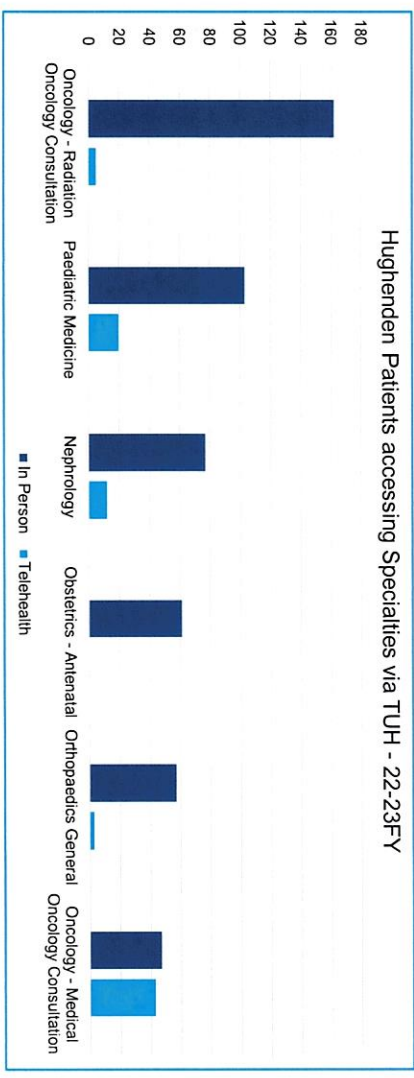
Telehealth Services

Hughenden Patients

Analysis of activity

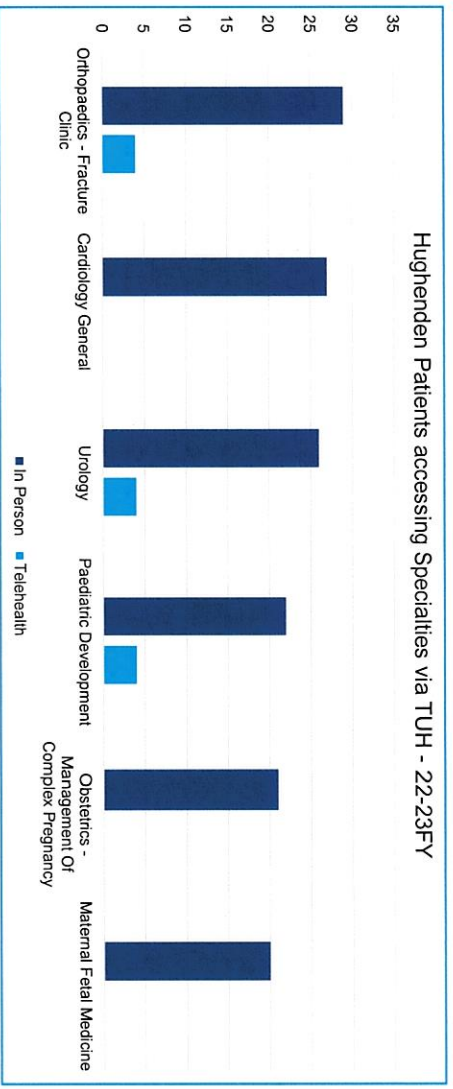
Number of Appointments by Specialty for Hughenden Patients via TUH –22-23FY

TUH HOSPITAL ACTIVITY – HUGHENDEN LOCAL HOSPITAL



Arranged by highest demand specialty to lowest.

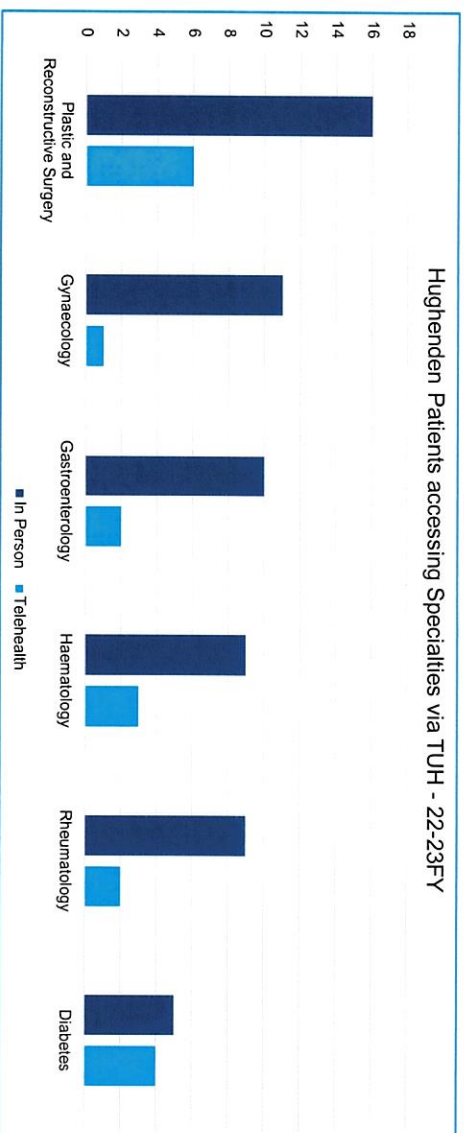
Shows comparison of In Person and Telehealth appointments



In Person – patients have travelled to TUH

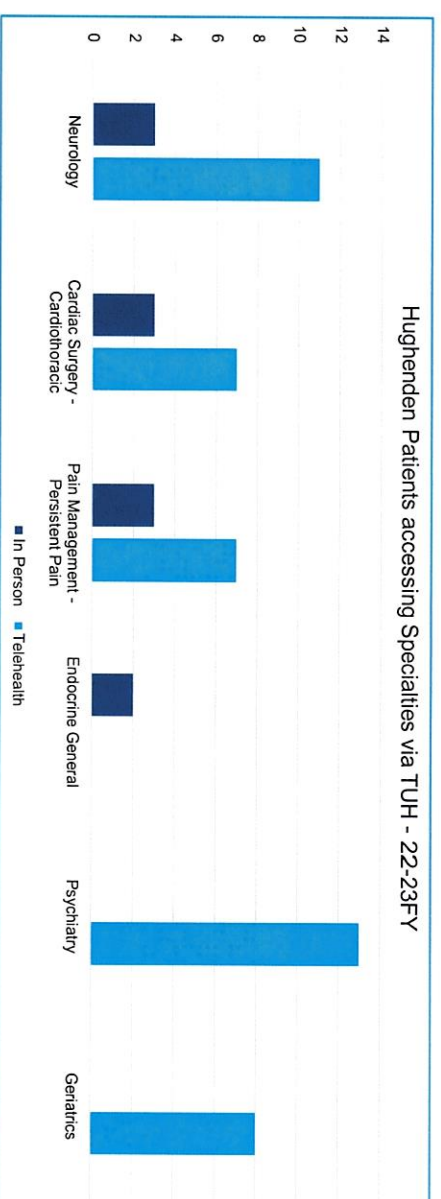
Number of Appointments by Specialty for Hughenden Patients via TUH –22-23FY

TUH HOSPITAL ACTIVITY – HUGHENDEN LOCAL HOSPITAL



Arranged by highest demand specialty to lowest.

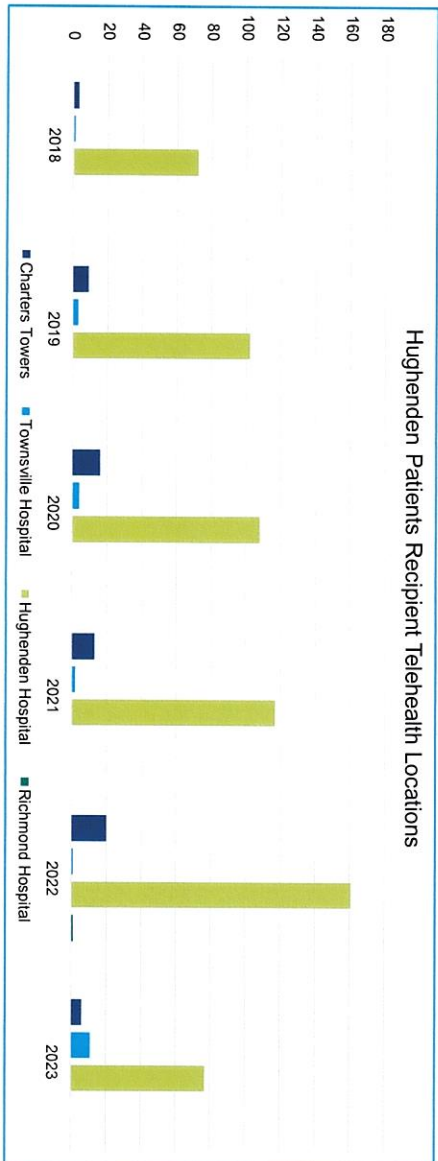
Shows comparison of In Person and Telehealth appointments



In Person – patients have travelled to TUH

Telehealth for Hughenden Patients by Site - 22-23FY

TUH HOSPITAL ACTIVITY – HUGHENDEN LOCAL HOSPITAL

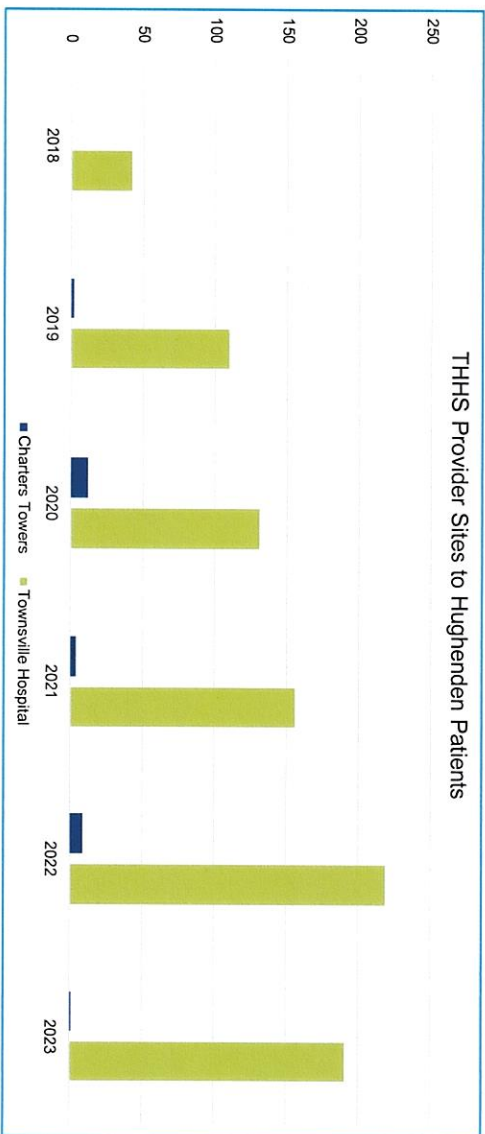


Patients are located at these hospitals receiving telehealth from another provider.



Hughenden patients receiving telehealth from THHS provider sites

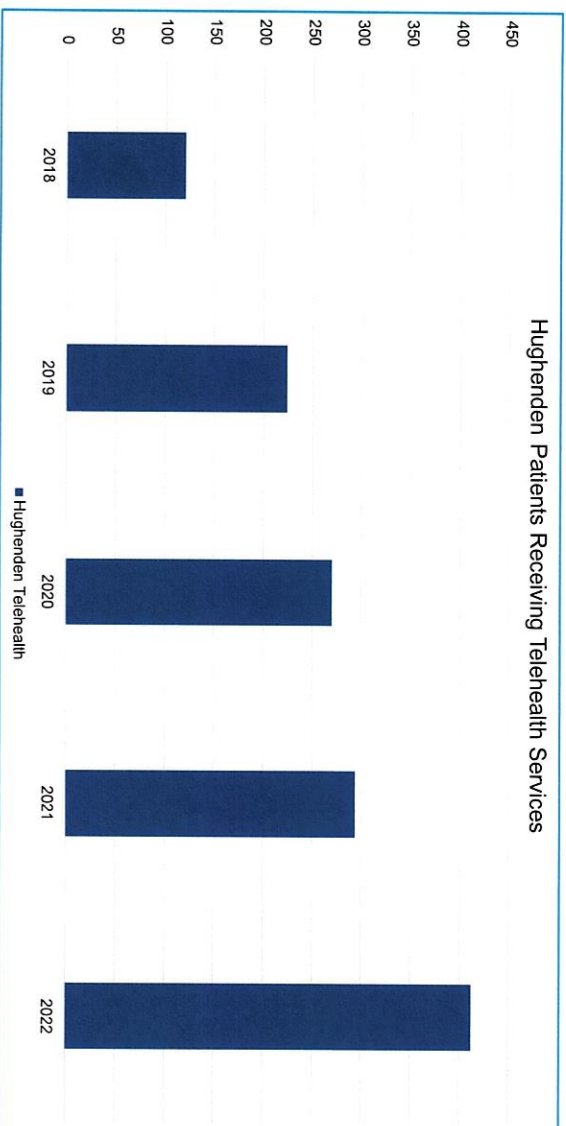
*does not show outside of HHS Providers



Telehealth for Hughenden Patients Over The Years

By Patient Local Hospital Provider & Recipient Telehealth Delivery Modes

Patients Local Hospital	2018	2019	2020	2021	2022
Hughenden Hospital	120	224	270	294	412
Grand Total	120	224	270	294	412



Steady increase of Telehealth services provided for Hughenden patients – 2023 on track to meet / exceed 2022 figures