

Responding to Delta:

Chance to change how care is delivered IF WE GET THIS RIGHT NOW

Health Consumers Queensland: Statewide HHS CAG Leaders online forum and online survey

When: Friday, 22 October 2021

Who: 14 health consumers from across the State

What: To hear from consumer leaders about their perceptions of Queensland's preparedness for a surge in COVID-19 cases and the system's on-going need to provide care as usual for so many.

An opportunity to change how care is delivered if we get this right

Queensland's COVID-19 pandemic response has exposed the existing disparities in access to healthcare.

Just as the state's vaccination response has needed to focus on our more vulnerable citizens, so too has our health system long needed a reset based on equity and value.

The safety and wellbeing of health consumers relies on a Queensland Health system that operates wholistically, collaborating to provide seamless, evidence-based care for the benefit of Queenslanders, no matter where they live or who they are.

The need during a pandemic surge to provide care closer to home, coordinated with primary care, is an opportunity to **finally embed the reform** consumers and many in the system have wanted for so long.

Consumer feedback key themes

In early 2020, Health Consumers Queensland consulted with consumers and carers to determine what values were important to them in a pandemic situation; and they want to be part of the conversations.

Consumers said they wanted to be informed early, giving them time to process information and understand the risks. They wanted to know who the most at risk are and why, to better understand the challenges ahead.

In October during consultations, consumers said they still didn't know what system plans were in place to meet their current health care needs if/when they get COVID-19. **There is a need to start talking more openly to Queenslanders about what plans are in place and how the system will cope in future.**

Consumers want more messaging about how the system is preparing to cope with the expected Delta outbreak. Consumers are aware that hospital and health staff are exhausted and overwhelmed and remain concerned that hospitals will not be able to treat the potential numbers of COVID-19 patients.

Rural and remote consumers remain concerned about how they will be cared for when they get COVID-19. Most consumers said they were unaware they may be sent to another hospital or region or managed via virtual care or Hospital in the Home (HITH).

Some consumers did say they feel Queensland is ready and that our vaccination rates are sufficient, however the majority of responses show people remain concerned, particularly for the most vulnerable.

Consumers are worried about "immunosuppressed people, old people, CALD communities, Indigenous communities, homeless and disabled... [and the] communities...[who have] difficulty in accessing services and often inability to look after themselves when they are unwell." Consumers want a communication plan for patients who are unable to use or have limited access to digital technologies.

Continued reassurance of care for people with COVID-19 remains important, including ongoing support with medication and meals, transport, in-home care, care for children and young people whose guardians become ill, and support for those in rural and remote communities.

Messaging to support the transition from zero cases to endemic COVID-19 will help to comfort Queenslanders as they deal with feelings of “anger, grief and disbelief when case numbers start to rise”.

Consumers who attended our online forum expressed great interest in our draft “**storm planning for COVID**” template that Queenslanders can use to prepare for a Delta surge.

Communications and stakeholder engagement

Health Consumers Queensland recommends co-developing a plan to ensure consumers and the wider community are appropriately engaged about the impact of COVID-19, similar to [Guidance for Managing Communications and Engagement: COVID-19 in residential aged care facilities](#).

Key priority population groups for communication include, but are not limited to:

- Aboriginal and Torres Strait Islander people in urban centres and rural and remote locations
- People in rural and remote regions
- CALD and refugee communities
- Users of the health system - those already getting care, receiving care, or about to receive care.

Queenslanders need to be kept **informed and updated** about what usual health care might look like during a COVID-19 surge, what care might look like if they were to become infected with COVID-19, and what HITH/virtual care might look like.

Communication for families of people with COVID-19 needs to include where their loved ones are being treated, how they can get news and information about them and their care, how they can be involved in care decisions, as well as discharge planning and management.

Health Consumers Queensland recommends the following communication mechanisms be expanded:

- **Access My Healthcare** (funded by QH and informed by our Kitchen Table Discussions) provides community with current health service availability in regions and communities.
- A statewide rollout of **yourQH**, depending on resourcing and capacity, could provide GPs and patients with accurate information about waits for appointments.
- **Local radio stations** could provide daily updates on hospital capacity, ED capacity and where people should go if ill, whether to their GP first or to the ED or a COVID testing station.
- **COVID community navigators** could be rapidly upskilled to provide navigation support to vulnerable Queenslanders including vaccine information, testing, healthcare access and more.

Online survey findings

- Queenslanders will need to change their mindset about living with COVID-19.
- Consumer involvement in HHS pandemic responses needs to increase.
- Consumers and health staff are fatigued but by empowering and informing communities ahead of time everyone can be better prepared and more resilient.
- Health Consumers Queensland’s ‘storm planning for COVID’ preparation document is needed, as is a vaccination road map for vaccinated and unvaccinated people.

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