

Making sense of Omicron

What consumers are saying this week

HCQ Consumer Conversation with Queensland Health representatives

On-line Session: consumer attendees from SEQ, FNQ, Darling Downs, Mackay, South West and Townsville.

QH Leaders acknowledge the value of listening to consumers

“All of the HHSs that I've been involved with are conscious of the contribution of consumers and the importance of hearing their voices, even if, we don't always like what we hear because we think we're doing a great job. And sometimes we do need to be pulled back to recognizing that there are gaps. I just feel very privileged to be here today.” Dr Lynne McKinlay, Deputy Chief Health Officer

“And I just want to say that this sort of a forum is really important because it's the chance for us to talk to the consumers and listen to the concerns that you're having [...]It's great to be here.” Sean Birgan, A/COVID-19 Health System Response Lead

Key consumer issues

- **System capacity** is a concern for many consumers, with ramping, backlog of delayed treatments and screening, and underutilization of the surge workforce
- **COVID Information is still challenging, although improved** Consumer and clinicians are often not finding the information they need.
- **Complacency:** There is a perception that the public consider Omicron no more dangerous than a cold, and this is leading a relaxation of precautions.

System capacity

Ramping and catching up on delayed treatment

“...one of the issues is the elderly, people in hospital but not needing hospitalization. And I've often advocated [...] to look at transitional care beds, like Metro North has done at Eventide. But making more of those available across the regions because it would make an incredible difference to that waiting time to that ramping, and to the quality of care that those elderly people will get, because in a hospital system, they don't get the personalized interaction, social interaction by name, which they would in that transitional care applies.”

There was some concern about the backlog of treatment due to treatment and screenings that have been delayed by the health service or consumers themselves due to COVID.

"I take it with the recovery plans, there's going to be a lot of catch up. You know, this there has been screening that's been missed, preventative work that's been missed. And I guess the ramping is a real example of that." Consumer

Surge workforce not utilised

One consumer asked about the surge workforce of recently retired health professionals and students that was approved by AHPRA in 2020 for COVID-related work. 38 000 people nominated to be available for this workforce yet few to date have been used since large scale contact tracing ceased.

"...these people have been approved for at least another year. Ready, willing and able. I have a friend of mine, who's a GP in in Melbourne, desperate to help out and was literally only called up a few months ago. So I just think it's a wasted resource." Consumer

Staff burnt out

Consumers were concerned about health staff being burnt out after working under demanding conditions for so long. The potential for mistakes and a decline in the experience of healthcare for consumers was noted as a safety and quality issue.

Actions

- Consideration should be given to the potential of the **surge workforce to relieve some of the pressure on the system**. This would allow catch-up on the backlog of treatment and screening, alleviate ramping, and reduce the likelihood of a drop in safety and quality.
- **Priority given to increasing the number of transitional care beds** to make hospital places available to those who need them.

COVID-19 Information is still challenging, although improved

Some of the information given by Queensland Health was considered to be very good, but difficult to find. A consumer described the information on Queensland Health's *What to do if you have COVID page* as "extremely helpful" but noted that it took some dedicated hunting to find it. In particular, the consumer had to respond that they had COVID to get to the information they were seeking, even though this was not the case.

Public Health Directions provide critical advice to people in the community. However there is so much information about COVID, and it changes so often, it's difficult for people 'who need to know' to stay informed. Parents need to know if they are able to enter an emergency department with their 16 or 17 year old child.

Additionally, some directives provide crucial information for some people (e.g. hearing impaired people) but unless you need to know this information the wider community don't know it. As one consumer shared: *"Masks are a nightmare. Even though Qld Health advises an exemption for people who are communicating with those of us who don't hear well and depend on lip reading - this is not widely known, and hit and miss as to how much we understand when people refuse to briefly drop their mask. Effective communication is a safety factor."*

"[There is a] lack of clarity and who should be getting the boosters, etc. I'm immunocompromised and could not find out from my GP, about the fourth. I had three primaries and a booster. But when I asked about the booster, all I was told was go and Google it." Consumer

Another consumer with a neuro immune condition noted that consumers in **her community are confused whether they should get boosters** due to having had bad reactions to the initial vaccinations but were not able to get adequate information to make an informed choice. *“...there's a lot of confusion in that community, especially with people with comorbidities, like mast cell disorders, and other conditions. So they're missing out on care and not seeking help.”*

Other specific gaps included:

- How is immune-suppressed defined?
- Are anti-virals likely to be used, by whom and under what circumstances?
- The need for more information about long COVID

Actions

- The COVID information on Queensland Health's website has been gathered piece-by-piece as the pandemic has evolved. **Working with a group of consumers** to determine what information they need and how they expect to find it would be a practical step reorganising the website contents to bring key information into the easy reach of consumers.
- **Greater accessibility of the COVID consumer information available on GP portals.** This promotion should include the wider public – patients can bring information to the attention of their GP and have access to this information for their own healthcare navigation.

Complacency

“The message going around the community is Omicron, don't worry about it, it's fine. I'm just a little concerned.” Consumer.

“Public perception that Omicron is like the common cold because it's clearly not.”

As in previous Consumer Conversations, consumers living with chronic conditions that compromise their immunity voiced frustration with the general public's lack of concern about Omicron. Pandemic fatigue, a less virulent variant and wishful thinking have led to a relaxed attitude in the broader Queensland population. Participants felt that the CHO's messaging is reinforcing the idea that Omicron is not a threat.

Action

- Focus groups comprised of a wide range of consumers to **review current messaging and codesign new strategies.**

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