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# Environmental scan

Primary health in the West Coast Local Government Area



# Contents

Background and context .....	3
The West Coast local government area .....	6
West Coast LGA Profile .....	7
Health Services in the West Coast Local Government Area .....	12
Community and consumer participation in primary health .....	15
Other influences and impact on health in the West Coast LGA .....	16

Author	Primary Health Tasmania: Anita Ogbeide, Claire Prior, Martina Wyss
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Primary Health Tasmania Limited  
1300 653 169  
[info@primaryhealthtas.com.au](mailto:info@primaryhealthtas.com.au)  
[www.primaryhealthtas.com.au](http://www.primaryhealthtas.com.au)  
ABN 47 082 572 629



## Background and context

This environmental scan forms part of the Strong, Liveable West Coast Tasmania – working with communities to understand local health and health service needs. The research project is led by the Tasmania Collaboration for Health Improvement, and supported by the West Coast Council, Health Consumers Tasmania and Primary Health Tasmania. It serves to capture and better understand the health and health services needs of the West Coast local government area.

Consumer and community involvement in research and healthcare redesign are not a new phenomenon, however, the value and emphasis on consumer and community involvement is building momentum in Tasmania. The Tasmanian Collaboration for Health Improvement together with partners, aim to improve the process of consumer and community involvement to inform research and health service planning, as well as implementation.

This desktop review and environmental scan report will provide researchers, consumers, community, and key partners with a baseline of information, which can be used as a conversation starter and as a means to validate publicly available information about the West Coast local government area. Environmental scans typically stay in a draft format until the community has provided inputs and feedback to the collated information. Findings from this scan may contribute to inform medium and long-term solutions to improve access to health and health services, in line with local health need(s).

### Rural health in Australia

The poor health status of people living in rural and remote areas is often attributed to three factors: limited access to health services; a higher prevalence of health risk factors generally associated with lower socio-economic status; and characteristics of the regional or remote environment itself,<sup>1,2</sup> which are linked to the social determinants of health.

In recent times, there has been a shift from the traditional model of general practice<sup>3</sup> service delivery to a holistic approach towards health care service and delivery. The government policies and programs have recently embraced this paradigm with focus on the social determinants of health (health literacy, poverty, discrimination, inequality and inequities in resource allocation) and social gradient<sup>4</sup> on its impact on health care. However, the implementation of this approach to health services has been sub-optimal due to limited systemic government response resulting in an often fragmented approach to service delivery and initiatives, highlighting the need to break down silos and work together for a locally meaningful outcome. Thus, mitigating this challenge is imperative for addressing the health and wellbeing of communities.<sup>5</sup>

Additionally, the [Australia's Primary Health Care 10 Year Plan 2022–2032](#) highlights the need to focus on preventative care and the importance of a highly skilled workforce in primary practice. Several policies, strategies and frameworks have been developed by state and federal governments to define and provide solutions for rural health issues. These have been referenced below to help understand the complexity of rural health and inform rural health planning. Some of these are:

- Future Focused Primary Health Care: Australia's Primary Health Care 10 Year Plan 2022-2032
- National Medical Workforce Strategy 2021–2031
- National Preventive Health Strategy 2021 –2030
- Drivers of Tasmania's Future Population Health Needs June 2022

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<sup>1</sup> Australian Institute of Health and Welfare 2010. 'A snapshot of men's health in regional and remote Australia.' *Rural Health Series* No. 11. Cat. no. PHE 120. Canberra: AIHW.

<sup>2</sup> Smith, KB, Humphreys, JS, and Wilson, MGA. 'Addressing the health disadvantage of rural populations: How does epidemiological evidence inform rural health policies and research?' *Aust. Journal of Rural Health* 2008; 16: 57.

<sup>3</sup> Commonwealth of Australia (Department of Health) 2022. 'Future focused primary health care: Australia's Primary Health Care 10 Year Plan 2022-2032'.

<sup>4</sup> Australian Institute of Health and Welfare 2016. Australia's health 2016. Australia's health series no. 15. Cat. no. AUS 199. Canberra: AIHW.

<sup>5</sup> Carey, G., Crammond, B., & Keast, R. (2014). Creating change in government to address the social determinants of health: how can efforts be improved?. *BMC Public Health*, 14(1), 1-11.

- Healthy Tasmania five-year Strategic Plan 2022–2026
- Health Workforce 2040 Strategy – Tasmania Department of Health

### Health status of Tasmanians

The [Primary Health Tasmania Health Needs Assessment 2022-23 to 2024-25](#) provides a comprehensive overview of the health status of Tasmanians. The report highlights:

- The median age of the Tasmanian population is the highest in Australia and continues to increase. In the 2021 Census it was 42 years, four years higher than the Australian average of 38 years.
- The proportion of the population aged 65 years and over is also higher in Tasmania than in other states with 20% of Tasmanians aged 65 years and over in 2016, compared with 16% for Australia overall.
- Tasmania has the second lowest life expectancy of all jurisdictions in Australia; 79.5 for Tasmanian males compared with 80.9 for Australian males and 83.6 for Tasmanian females compared to 85 for Australian females.
- Aboriginal and Torres Strait Islander peoples continue to have a lower life expectancy than the general population in Tasmania.
- Around half of Tasmanians report having a chronic condition, this is the highest of all jurisdictions in Australia.

### Health literacy

In 2006, only half of Tasmanians had sufficient literacy and numeracy skills to meet the complex demands of everyday life in a technologically rich and demanding world.<sup>6</sup> However, by 2019, the [Healthy Tasmania 5 year report 2016-2021](#) identified that around 90% of Tasmanians found it very easy, or easy, to understand health information and to know what to do.<sup>7</sup>

The Healthy Tasmania Five-Year Strategic Plan 2022-2026 also highlights that 1 in 10 Tasmanians have difficulty understanding health information which impacts on preventing and managing chronic conditions. Older people with multiple chronic conditions, those living in low-income households, and priority populations are heavily represented in this number.<sup>8</sup>

According to research by Swinburne University, '[Optimising Health Care for Tasmanians](#)'<sup>9</sup>, the intersectionality of sociodemographic characteristics, health conditions, lifestyle, and risk factors demonstrate the complex interplay between social determinants and health equity and outcomes.

The [Health Literacy Action Plan 2019-2024](#) working group has identified key actions and objectives to address these issues. Similarly, the [Healthy Tasmania Five-Year Strategic Plan 2022-2026](#) addresses the social determinants of health, highlighting the relationship between an individual's health and the 'circumstances in which they live, work, play, grow and age'. The plan acknowledges that to address these determinants of health a full systems approach is required including social, environmental, structural, economic, cultural, commercial, digital.

### Health status of rural Tasmanians

Tasmania's population is quite diverse with 51.5% living in the south, 27.4% in the north and 21.1% in the northwest as of June 2022. This dispersion of the population is an added challenge when planning and providing health services.<sup>10</sup> Several barriers to health care staffing have been noted regarding health care services and delivery in the West Coast local government area<sup>11,12</sup>, which are not dissimilar to other rural

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<sup>6</sup> Australian Bureau of Statistics 4228.0 Adult Literacy and Life Skills Survey, Summary Results, Australia. 2008.

<sup>7</sup> Department of Health, Tasmania 2021. Healthy Tasmania Five Year Report 2016–2021

<sup>8</sup> Department of Health, Tasmania 2022. *Healthy Tasmania Five-Year Strategic Plan 2022-2026*.

<sup>9</sup> Elmer, S., Cheng, C., & Osborne, R. (2022). *Optimising Health Care for Tasmanians*.

<sup>10</sup> Department of Health, Tasmania June 2022. *Drivers of Tasmania's Future Population Health Needs*.

<sup>11</sup> Health Consumer Tasmania. *Inquiry into rural services in Tasmania Submission 2021*

<sup>12</sup> Department of Health - 2021-22 Budget Paper 2 - Chapter 5 - Department of Health ([treasury.tas.gov.au](https://treasury.tas.gov.au))

communities in Tasmania. For example, recruitment is difficult due to accommodation, rural location, and travel. These factors can impact on staff turnover and the continuity of care for patients.

To measure the health disparities for rural and remote communities, Primary Health Tasmania uses the remoteness classification recommended by the Tasmanian Government Department of Health and Human Services, *Accessibility/Remoteness Index of Australia (ARIA)*, to determine rurality for rural primary health commissioning. According to the ARIA classification, the majority of Tasmanian local government areas are classified as inner or outer regional. However, the West Coast local government area is classified as remote.

Rurality/remoteness is an independent risk factor for poor health with rural Tasmanians experiencing poorer health outcomes than non-rural Tasmanians. However, some evidence indicates that the health status of rural Tasmanians is generally equivalent to that of regional Tasmanians 'even though there is poorer access to services in remote areas, lower per capita availability of health professionals locally and variable levels of social capital'.<sup>13</sup>

The [Primary Health Tasmania health needs assessment 2022-23 to 2024-25](#) has identified several barriers, gaps and challenges for people living in rural areas. These include:

- Access to health care and a necessary reliance on outreach services.
- Internet connectivity can be limited in rural areas meaning access to telehealth can be limited, this is further impacted by low information technology literacy levels.
- Difficulties recruiting general practitioners and allied health to rural areas.
- Difficulties accessing mental health services compared with regional areas and again internet connectivity can become a barrier to accessing online services.
- Lengthy distances to travel to services.

Remoteness can also be measured in several other ways which are utilised in policy and decision making or health reporting. The Modified Monash Model (MMM) defines if an area is city, rural, remote or very remote. West Coast is calculated to be an MMM6 classified under rural communities.<sup>14</sup> The Australian Statistical Geography Standard (ASGS) has been developed to reflect the 'location of people and communities'.<sup>15</sup> West Coast is considered SA2, remote Australia. Other measures of classification for workforce distribution in rural and remote areas can be found at [Health Workforce Locator | Australian Government Department of Health and Aged Care](#).

### **Socio-economic disadvantage**

The Index of Relative Socio-economic Advantage and Disadvantage (IRSAD) is a score that measures the relative advantage and disadvantaged areas. The West Coast is classified as an IRSAD 1 area. At a national level this means it is among the most disadvantaged areas.

Further information is available at [Census of Population and Housing: Socio-Economic Indexes for Areas \(SEIFA\), Australia, 2016 \(abs.gov.au\)](#).

### **Ageing population**

The proportion of the population aged 65 years and over is higher in Tasmania than in other states, with 20% of Tasmanians in this age group in 2019. Tasmania's ageing population also has a significant impact on the primary health care and acute care sectors, as older people are more likely to develop chronic diseases and to require the use of health services.

As our community ages, the emphasis of preventative care must include quality of life and the ability to maintain independence for all Tasmanians. The health of older Tasmanians is not equal. Older Tasmanians in rural or remote areas, as well as those in residential aged care, may not have access to the same health

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<sup>13</sup> Health Workforce 2040 strategy – Tasmania Department of Health

<sup>14</sup> Modified-monash-model-fact-sheet.pdf (health.gov.au)

<sup>15</sup> Australian Bureau of Statistics 2021 *Australian Statistical Geography Standard (ASGS)*. Available from: [https://www.abs.gov.au/websitedbs/D3310114.nsf/home/Australian+Statistical+Geography+Standard+\(ASGS\)](https://www.abs.gov.au/websitedbs/D3310114.nsf/home/Australian+Statistical+Geography+Standard+(ASGS))

care as other Tasmanian residents.<sup>16</sup> Further information about the West Coast ageing population is available in the population change section of this report.

### **Health services in rural Tasmania**

Health and community services in rural and remote areas are different to those in the city. Health facilities are generally smaller and provide a broad range of services, including mental health services, oral health, community and aged care, and human services. Services themselves generally have less infrastructure and, where more complex services are delivered, they provide these in lower volumes than city providers deliver.<sup>17,18</sup>

Rural and remote health and community services generally depend more on generalist service providers, including general practitioners (GPs) and registered nurses. There is limited availability of allied health professionals in most rural and remote areas. Some specialist services may be available locally, whereas others are provided by 'visiting' health professionals.<sup>19</sup>

People in rural areas generally need to travel further to access health and community services and receive a smaller share of overall health spending.<sup>20</sup> They face larger logistical challenges in accessing health services and are more likely to undergo overnight or prolonged hospital stays. This is related to fewer available GPs, specialist nurses and health professionals and more limited access to specialist services.

The role of GPs is increasingly important as the population ages and the burden of chronic disease increases, resulting in greater needs for care of complex conditions and negotiation of a complex healthcare system.<sup>21</sup>

## **The West Coast local government area**

West Coast is classified as a rural local government area and has a population of 4,263.<sup>22</sup> The major towns and localities of the region include Strahan, Rosebery, Zeehan and the principal town of Queenstown. The region covers an area of 9,575 square kilometres and is characterised by an old-world, outdoor, charismatic lifestyle complemented by spectacular scenery with its wild rivers, rugged mountains and flourishing rainforests home to the renowned Tasmanian Wilderness World Heritage Area.

The local government area is located in Western Tasmania and is bounded by the Southern Ocean in the west and our regional centres to the north. To the east and south vast tracts of natural bush and rainforest are traversed by the Lyell Highway leading to the state's capital city, Hobart. The west coast is rich in minerals with rich mining heritage and tourism as a key economic driver.<sup>23</sup>

Primary Health Tasmania's 'community health check' below, presents the health, wellbeing and demographic information for each of Tasmania's 29 local government areas and are updated as new information and data is released. The following five pages contain a copy of the 2021 West Coast LGA health check, it can also be accessed at [primaryhealthtas.com.au](http://primaryhealthtas.com.au)

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<sup>16</sup> COTA - Our healthcare future submission 2021. [ohf.1.19\\_cota\\_ohf\\_sub\\_20210215\\_1.pdf](http://ohf.1.19_cota_ohf_sub_20210215_1.pdf) (health.tas.gov.au)

<sup>17</sup> Thomas, S. L., Wakerman, J., & Humphreys, J. S. (2015). Ensuring equity of access to primary health care in rural and remote Australia-what core services should be locally available?. *International journal for equity in health*, 14(1), 1-8.

<sup>18</sup> Mental health in rural and remote Australia. [nrha-mental-health-factsheet-dec-2017.pdf](http://nrha-mental-health-factsheet-dec-2017.pdf) (ruralhealth.org.au)

<sup>19</sup> Health Consumers Tasmania (2021, March). Inquiry into Rural Health Services in Tasmania – Submission. [HCT-submission-to-Rural-Health-Inquiry-Mar-2021-1-1.pdf](http://hct-submission-to-Rural-Health-Inquiry-Mar-2021-1-1.pdf) (healthconsumerstas.org.au)

<sup>20</sup> National Rural Health Alliance 2010. Measuring the Metropolitan-rural Inequity.

<sup>21</sup> Australian Medical Association. General practice in primary health care – 2016, 2017. <https://ama.com.au/position-statement/general-practice-primary-health-care-2016>.

<sup>22</sup> West Coast Community Health Check 2021 V0.1 (primaryhealthtas.com.au)

<sup>23</sup> West Coast Community Plan 2025. [West-Coast-Community-Plan-2025-adopted-20-Oct-2015.pdf](http://westcoast.tas.gov.au) (westcoast.tas.gov.au)

# About us



	West Coast LGA	Tasmania																								
<b>Our population</b>	<b>4,263</b>	<b>557,571</b>																								
<b>Aboriginal population</b>	<p>8.1%</p>	<p>5.4%</p>																								
<b>Population by age</b>	<table border="1"> <tr><th>Age Group</th><th>Percentage</th></tr> <tr><td>0-14</td><td>15.8%</td></tr> <tr><td>15-24</td><td>8.7%</td></tr> <tr><td>25-44</td><td>22.8%</td></tr> <tr><td>45-64</td><td>31.7%</td></tr> <tr><td>65+</td><td>20.9%</td></tr> </table>	Age Group	Percentage	0-14	15.8%	15-24	8.7%	25-44	22.8%	45-64	31.7%	65+	20.9%	<table border="1"> <tr><th>Age Group</th><th>Percentage</th></tr> <tr><td>0-14</td><td>16.6%</td></tr> <tr><td>15-24</td><td>11%</td></tr> <tr><td>25-44</td><td>25.6%</td></tr> <tr><td>45-64</td><td>25.9%</td></tr> <tr><td>65+</td><td>20.9%</td></tr> </table>	Age Group	Percentage	0-14	16.6%	15-24	11%	25-44	25.6%	45-64	25.9%	65+	20.9%
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<b>Born outside Australia</b>	<p>22.5%</p>	<p>20.9%</p>																								
<b>Median age in years</b>	<b>47</b>	<b>42</b>																								

Sources: Our population, Aboriginal population, Population by age, Born outside Australia, and Median age in years: Australian Bureau of Statistics, 2021 Census All persons QuickStats, Local Government Areas, West Coast

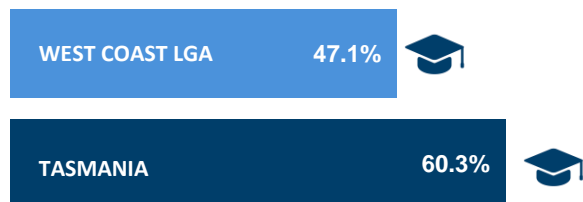
# Social and economic conditions



## Education

The proportion of people in the West Coast LGA who have completed Year 12 and above is lower than the proportion for Tasmania overall.

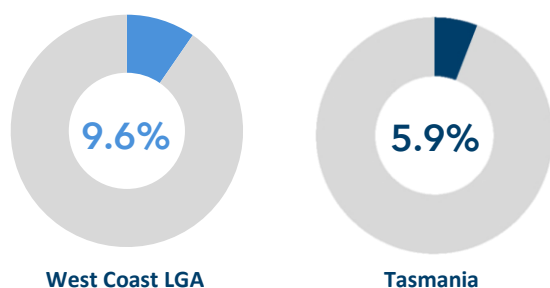
PER CENT OF ELIGIBLE POPULATION WHO HAVE COMPLETED YEAR 12 AND ABOVE



Higher education levels are associated with better health outcomes.

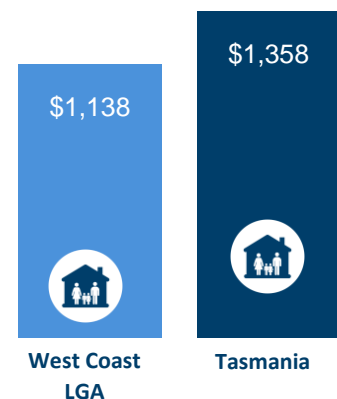
## Unemployment rates

The rate of people in the West Coast LGA who are unemployed is higher than the rate in Tasmania overall.



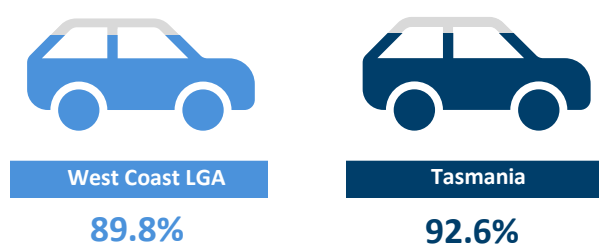
## Median weekly income

Weekly income per household is less in the West Coast LGA than in the rest of Tasmania.



## Motor vehicles

Ninety percent (89.8%) of households in the West Coast LGA have one or more motor vehicles.

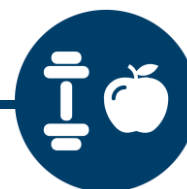


## Home ownership

More people in the West Coast LGA own their homes outright, compared to the rest of Tasmania.

	West Coast	Tasmania
Owned outright	45.2%	37.1%
Owned with mortgage	23.3%	33%
Rented	25.3%	26.4%

# Healthy living



## Self-reported health

Thirty-seven percent (37%) of Tasmanian residents rated their health as “excellent” or “very good”. Data is not available for West Coast LGA.

### ADULTS REPORTING THEIR OWN HEALTH AS ‘EXCELLENT’ OR ‘VERY GOOD’



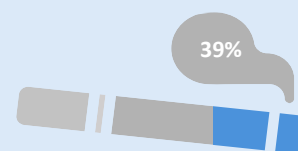
How people feel about their own health, their state of mind and their life in general is a common measure of health. (Australia’s Health 2018. AIHW)

## Risk factors

Risk factors are conditions or behaviours that make it more likely people will get a chronic condition or health problem.

	West Coast	Tasmania
<b>Overweight/obese body mass index (BMI)</b>	40%	58%
<b>Current smoker</b>	39%	12%
<b>Consumes 2 or more drinks per day*</b>	26%	19%
<b>Insufficient moderate/vigorous activity+</b>	--	11%
<b>Less than two serves of vegetables per day^</b>	98%	91%
<b>Less than two serves of fruit per day^</b>	49%	53%

In the West Coast LGA, around 39% of people aged 18 years and over, are daily and current smokers, which is higher than the rate for Tasmania.



Source: Self-reported health and Risk factors: Department of Health and Human Services Report on the Tasmania Population Health Survey 2019

\*2009 National Health and Medical Research Council alcohol guidelines

+2014 National Health and Medical Research Council physical activity guidelines

^2013 National Health and Medical Research Council dietary guidelines

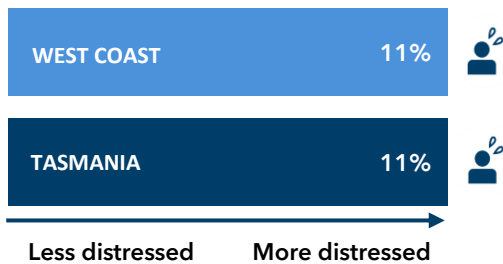
# Healthy living



## Psychological distress

Similar numbers of adults in the West Coast LGA are likely to experience high or very high levels of psychological distress compared with Tasmania overall.

### PEOPLE WITH HIGH OR VERY HIGH LEVELS OF PSYCHOLOGICAL DISTRESS



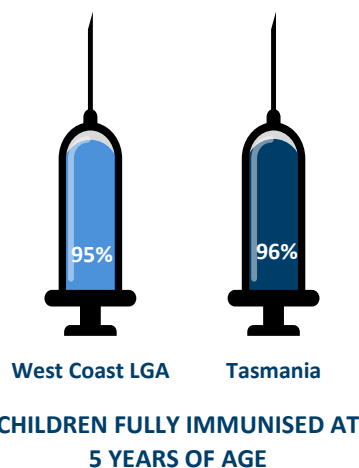
Psychological distress is a term used to describe unpleasant feelings or emotions that can influence how we function in daily life.

# Health care



## Immunisations

Ninety-five per cent (94.7%) of children in the West Coast LGA are fully immunised by the age of five, which is lower than the rate for Tasmania.



## GP and emergency department encounters



During 2019-2021, 4,558 individuals from the West Coast LGA had an encounter with a general practitioner\*



On average each year during 2019-2021, 561 individuals from the West Coast LGA visited an emergency department (129 people per 1,000 population<sup>^</sup>), with an average of 778 ED presentations per year (179 ED presentations per 1,000 population<sup>^</sup>)

<sup>^</sup>Estimated average annual population for 2019-21 =4,353

Sources: Psychological distress: Department of Health and Human Services Report on the Tasmanian Population Health Survey 2013 Immunisations: Primary Health Information Development Unit, Social Health Atlas of Australia: Local Government Areas; Compiled based on data provided by Australian Childhood Immunisation Register, Medicare Australia, 2018. GP encounters: Primary Health Information Network (PHIN) dataset (General Practice dataset), Analysed by Primary Health Tasmania; accessed October 2022 Emergency department encounters: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; accessed October 2022 \*Individual totals may be higher due to patients potentially visiting more than one practice outside an LGA area or possible de-identification linkage errors from patient administration extraction software.

# Health outcomes



## Public hospital admissions

During the five years from 2017-18 to 2021-22 there were 5,791 admissions to Tasmanian public hospitals from the West Coast LGA area, with 3,845 overnight stays.

### TOP FIVE CAUSES FOR OVERNIGHT ADMISSIONS



#### Factors influencing health status and contact with health services\*



#### Women giving birth



#### Other chronic obstructive pulmonary disease



#### Cholelithiasis



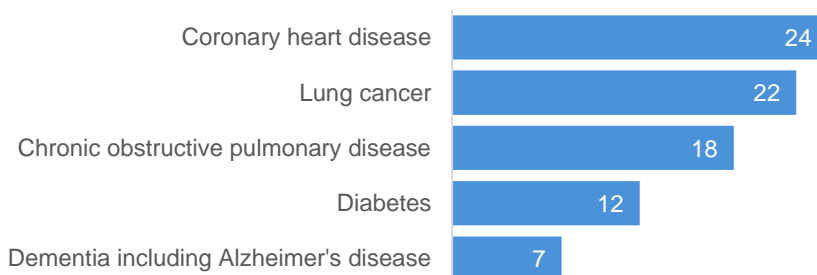
#### Acute myocardial infarction

## Causes of death

During 2016-2020 coronary heart disease (12.8%), lung cancer (11.8%), chronic obstructive pulmonary disease (9.6%), diabetes (6.4%), and dementia including Alzheimer disease (3.7%) were the leading causes of the 187 deaths in the West Coast LGA area.

### TOP CAUSES OF DEATH 2016-2020, BY NUMBER

### ALL CAUSES



187

Sources: Public hospital admissions: Department of Health and Human Services, Health Central Data Warehouse, Tasmania. Analysed by Primary Health Tasmania; Accessed October 2022; \*Includes i) examination and investigation, ii) communicable diseases, iii) related to socioeconomic and psychosocial circumstances, iv) health services in other circumstances and v) related to family and personal history and certain conditions influencing health status; Causes of death: Mortality over Regions and Time (MORT) book, LGA, 2016-2020, accessed November 2022.

The Tasmanian Community Health Checks feature information about the 29 Local Government Areas (LGAs) in Tasmania. For reports on the other 28 LGAs, please visit [primaryhealthtas.com.au](http://primaryhealthtas.com.au) and search for [Community Health Checks](#) or email [info@primaryhealthtas.com.au](mailto:info@primaryhealthtas.com.au).

*This data is sourced as part of Primary Health Tasmania's ongoing provider support activity. While extensive efforts have been made to ensure this information is as accurate as possible, the data is gleaned from multiple public and private organisations via visits and web searches, and Primary Health Tasmania cannot attest to the continued veracity of this dataset as practice and practitioner details change continually. The information presented is accurate as of November 2022. For the most current information, please go to [www.phnexchange.com.au](http://www.phnexchange.com.au).*

# Health Services in the West Coast Local Government Area

## Tasmanian Health Service-funded services

The West Coast District Hospital at Queenstown provides Queenstown and surrounding communities with access to health services including Accident and Emergency services, an Aged Care Residential facility, and visiting services such as Radiology, Diabetic Clinic, Physiotherapy and Podiatry. The Rosebery Community Health Centre is open 8:00 AM to 4:00 PM, 7 days per week and offers a community nursing service and emergency department service.

The Queenstown dental clinic (Oral health services Tasmania) operates on select visiting dates only and requires an appointment. This service is available to children and teens only.

The Tasmanian Department of Health is the fundholder for several Australian Government funded outreach services in the West Coast, these are administered through the TAZREACH office and include the following services (but not limited to):

- Cardiologist (Queenstown) – 6 visits per annum
- Obstetrics and Gynaecologist (Queenstown) – 10 visits per annum
- Optometrist (Queenstown) – 15 visits per annum
- Registered Nurse – Paediatrics Asthma (Queenstown/Roseberry) – 6 visits per annum
- Psychiatrist (Strahan) – 12 visits per annum

Ambulance Tasmania currently has volunteer stations in Rosebery and Tullah and a single branch station (a paramedic rostered on day shift) at Strahan, Queenstown and Zeehan which are supported by both volunteer crews and qualified, employed paramedics.

Further details on these services are available from:

- [TAZREACH services – North West | Tasmanian Department of Health](#)
- [Rosebery Community Health Centre | Tasmanian Department of Health](#)
- [Our locations | Tasmania Department of Health](#)

## Primary health services in the West Coast

Primary Health Tasmania undertakes a full commissioning process to determine the best means of investing in health services for improved rural health and currently funds several organisations to deliver rural primary health care services to people with chronic conditions in the West Coast LGA. In addition to the many statewide and telehealth commissioned services, the key current Primary Health Tasmania commissioned services in the West Coast are listed in table 1.

Primary care services refer to those services in the community that people go to first for health care: general practices, Aboriginal controlled community health services (ACCHS), community pharmacies, many allied health services, mental health services, drug and alcohol services, community health and community nursing services, maternal and child health services, sexual health services and oral health and dental services.<sup>24</sup>

Table 1 lists the primary health services in the West Coast LGA including the Primary Health Tasmania commissioned services.

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<sup>24</sup> Future Focused Primary Health Care: Australia's Primary Health Care 10 Year Plan 2022-2032. Available from: [australia-s-primary-health-care-10-year-plan-2022-2032-future-focused-primary-health-care-australia-s-primary-health-care-10-year-plan-2022-2032.pdf](#)

**Table 1: Primary health services in the West Coast**

Health service category	Services	Service summary
Primary Health Tasmania commissioned service	GP Assist	This service provides after-hours support for health professionals. Service providers including nurses at residential aged care facilities and community hospitals, pharmacists, pathology providers, and domiciliary nursing and palliative care services can contact a GP Assist doctor if they need assistance or advice while caring for a patient during the after-hours period
	Diabetes Tasmania	This service provides diabetes and dietetic education and support services for eligible Tasmanians plus support for GPs and other healthcare providers delivering diabetes care. One-on-one consultations with a diabetes educator are available for people with type 2 or non-complex type 1 diabetes. One-on-one dietetic consultations are available for anyone with type 1 or 2 diabetes, pre-diabetes or at high-risk in Devonport, the north-west part of Tasmania from Mondays to Fridays (9:00 AM – 5:00 pm).
	Rural Health Tasmania	This service provides support for people living with mental health conditions, cancer, cardiovascular disease, lung disease, and musculoskeletal conditions and addressing specific health needs for Aboriginal and Torres Strait Islanders peoples.
	Royal Flying Doctors Service	Currently funded to provide mental health services and the 'Prime-mover' program.
Primary care services	Ochre Medical Centre in Queenstown, Rosebery, Strahan and Zeehan	This primary care service is privately owned and serves the residents of the West Coast local government area. The specific communities have a range of 2 – 5 GPs per medical centre whom alternate between the different locations except for Queenstown where they currently have temporary GPs or locums providing primary care services. Further, they offer both visiting and on-site clinical and allied health services such as maternal and child service, cardiological, psychological, radiology and so on. The medical centres typically deliver services Mondays to Fridays (9:00 AM to 5:00 PM). However, the days, times and services may differ per location.
	Pharmacy in Queenstown, Rosebery, Strahan and Zeehan	The pharmacies operate weekdays within business hours with the Queenstown medical union pharmacy provides services from 9:00 AM to 12:30 PM on Saturdays.
	Psychology cafe Queenstown	The psychology practice provides psychological and social work service and operates within business hours on weekdays.

	Anglicare in Zeehan	This service provides a range of support services for individuals, families and groups on the west coast of Tasmania. Services include outreach assistance for families with parenting issues, help with dealing with personal difficulties and connecting people with appropriate services. The service operates from 9:00am to 5:00pm on weekdays and a contact service is available on weekends.
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**Community wellbeing and health services**

The services highlighted below reiterate the importance placed on the social determinants of health as indicated in [Australia’s Primary Health Care 10 Year Plan 2022–2032](#). These social care systems are key determinants that integrate with clinical systems to improve on communities’ health outcomes and reduce longstanding inequities in health. These community wellbeing and health services include:

- Queenstown childcare
- West Coast Community Services Hub Queenstown (Libraries Tasmania, Service Tasmania and Child and Family Centre)
- Zeehan Neighbourhood centre
- Zeehan Library
- Aboriginal housing service (Zeehan)
- Integrated family support service (Tullah)
- Rosebery neighbourhood house
- Swimming pool (Queenstown and Zeehan)

Further, information on community and social services can be found on the West Coast Council [website](#) and the specific service website pages.

**Technology and digital health**

Health information technology and digital health have the potential to change the way Tasmanians, and particularly people in rural and isolated municipalities, access services and manage their health care. Digital health can be defined as “[electronically connecting up points of care so that health information can be shared securely](#)”.<sup>25</sup> Health and digital literacy will be a key consideration in the West Coast area, which has an ageing population.

“The important aspect of health information technology is not software and computers – it is physicians making better treatment decisions, nurses and pharmacists delivering safer care, and consumers making better choices among treatment options. It is the way people connect together across a fragmented delivery system – from physician offices to hospitals to skilled nursing facilities and even to the consumer’s home. It is putting consumers in control of their health status and customizing care delivery to meet their needs.”<sup>26</sup>

**Accessibility of telehealth**

While telehealth presents opportunities to provide a link service that are otherwise unavailable or limited, the accessibility of telehealth is often dependent on the resources and capacity of the individual or community more broadly. The release of the 2021 Australian Digital Inclusion Index has highlighted that Tasmania is the most digitally disadvantaged state, and the “digital divide” between urban and rural populations presents additional barriers in the accessibility of telehealth services for many rural and remote communities and consumers.

<sup>25</sup> [Digital health - Primary Health Tasmania](#)

<sup>26</sup> Remarks by David Brailer, National Coordinator for Health Information Technology, at the HIMSS 2005 Conference, <http://www.himss.org/content/files/DavidBrailerRemarksHIMSS2005.pdf> (26 September 2005).

The Australian Digital Inclusion Index highlights uses dimensions to measure digital inclusivity. These are:

- Access
- Affordability
- Digital ability

Data from the Australian Digital Inclusion Index has shown that the average 2021 national digital inclusion score is 71.1. Tasmania's state average is 66, with the West Coast below both the state and national averages. A break-down of the West Coast scores is below.

Metric	West Coast	State Average	National Average
<b>Australian Digital Inclusion Index Score</b>	64	66	71.1
<b>Access Score</b>	62	65	70
<b>Affordability Score</b>	91	92	93.1
<b>Digital Ability Score</b>	57	58	64.4

The above scores are evident of the digital disadvantages experienced by the West Coast area, and thus are important to consider when analysing the viability of telehealth methods of service delivery within the region.

### Primary Care digital resources

The need for a connected healthcare system is greater than ever – one that is accessible, progressive and secure. Digital health has become a vital part of a modern, accessible healthcare system designed to meet the needs of all Australians.<sup>27</sup> The capacity for increased use of telehealth was demonstrated in 2020 as part of the COVID-19 National Health Plan in which the Australian Government's temporary Medicare Benefits Schedule (MBS) items enabled Australians to access essential health services in their home.

Examples of digital health are (but not limited to):

- **After hours support** Tas After Hours website provides guidance on who to call when needing medical help after hours. A triage system managed by HealthDirect is providing relevant health information or triages to the Tasmanian led GP Assist – a service run by general practitioners who provide on the phone support to patients.
- **Tasmanian HealthPathways** is a web-based information portal developed by Primary Health Tasmania, designed to help primary care clinicians plan local patient care through primary, community and secondary healthcare systems.
- **My Health Record** is a secure online summary of a person's significant health information that provides a single system through which information such as allergies, medical conditions, treatments and test or scan reports can be accessed. There is soon to be released a My Health Record app for consumers but can be accessed through the Telstra Health – [HealthNow app](#)
- **Electronic prescribing** allows patients and their prescribers to use electronic prescriptions and forms part of the broader digital health and medicines safety framework.

## Community and consumer participation in primary health

The established West Coast Local Advisory Group of the Strong, Liveable West Coast Tasmania project informed the recent July 2022, two-day workshop on primary health care need, facilitated by the University of Tasmania and supported by the Tasmania Department of Health, West Coast Council and the Australian Prevention Partnership Centre. This systemic inquiry highlighted on a broader scale the underlying challenges of what is covered in the [West Coast Community Plan 2025](#). Themes highlighted in the workshop include:

- Good understanding of what we are facing and the opportunities and hopefully willingness by the collective to engage in a collaborative approach.

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<sup>27</sup> Home | Australian Digital Health Agency

- Lack of ability to control and set priorities for how resources are allocated; short term funding leads to lack of continuity of services, relationships and complexity in terms of navigation and communication; waste and duplication; perception of adequate resources.
- A lot of different groups not working as one to achieve the same outcomes and lack of integration at all levels such as funding, service delivery and evaluation.

## Other influences and impact on health in the West Coast LGA

The interaction of social, economic and environmental factors impacting on the West Coast LGA are also significant in understanding health care access and service priorities.

Mining and Tourism have a significant influence and impact on the region. According to the [West Coast Community Plan 2025](#), mining and tourism sectors are the two drivers' of the west coast economy in terms of output and employment. The total economic output generated by the West Coast is estimated at \$1,230 million. The mining sector has the highest contribution of \$865.6 million (70%) while tourism is a significant driver of the economy making up 15% of all west coast employment compared with 2.5% of all tourism sector employment in Tasmania. Total tourism economic output is estimated to be \$53.8 million, of which \$38.8 million (72.1%) is attributable to the 'accommodation and food services' sector.

Together, mining and tourism directly provide jobs for 54% of all employed persons in the West Coast – or approximately one job in every two. A large proportion of other jobs in the region could be expected to be supported by these two sectors (indirect employment). However, employment arrangements in the mining sector in the West Coast such as the fly-in/fly-out (FIFO) and drive-in/drive-out (DIDO) have been noted to influence and impact on community sustainability.<sup>28</sup> Workers whom live outside of the host region are about 31% of the workforce, for instance, FIFO and DIDO workers earn twice as much as residents doing comparable labour on the West Coast, thus hollowing out the local community.<sup>25, 29</sup> These workers are often described as “shadow population” as local government only receive funding on their estimated population which may not include DIDO or FIFO workers, yet this shadow population are likely to utilise local services and infrastructures leading to underfunding the host community<sup>25</sup> and may reduce access and/or availability to other community services.

### Population change – an ageing population

The West Coast is projected to see a 28.8% population decrease between 2017 and 2042 (*see table 2*). This projection is the highest natural decline of all the LGAs in Tasmania.<sup>30</sup> This net migration loss (*see figure 1*) is in response to a projected ‘internal migration loss’. In contrast, as an example Latrobe LGA is projected to see an increase of 23.9% due to “hyper-ageing”.<sup>29</sup>

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<sup>28</sup> Johnson, L., Langridge, M., & Eccleston, R. (November, 2022). The changing nature of employment on Tasmania's West Coast. Available from: [UTAS\\_TPE-West-Coast-Employment-Nov-2022.pdf](#) (westcoast.tas.gov.au)

<sup>29</sup> Reliance on DIDO workers is short-changing West Coast economy | West Coast Council

<sup>30</sup> University of Tasmania 2018, - *Insight Nine Regional population trends in Tasmania: Issues and options*. Available [ISC-UTAS-Insight-Nine-Regional-Population-Trends-in-Tasmania.pdf](#)

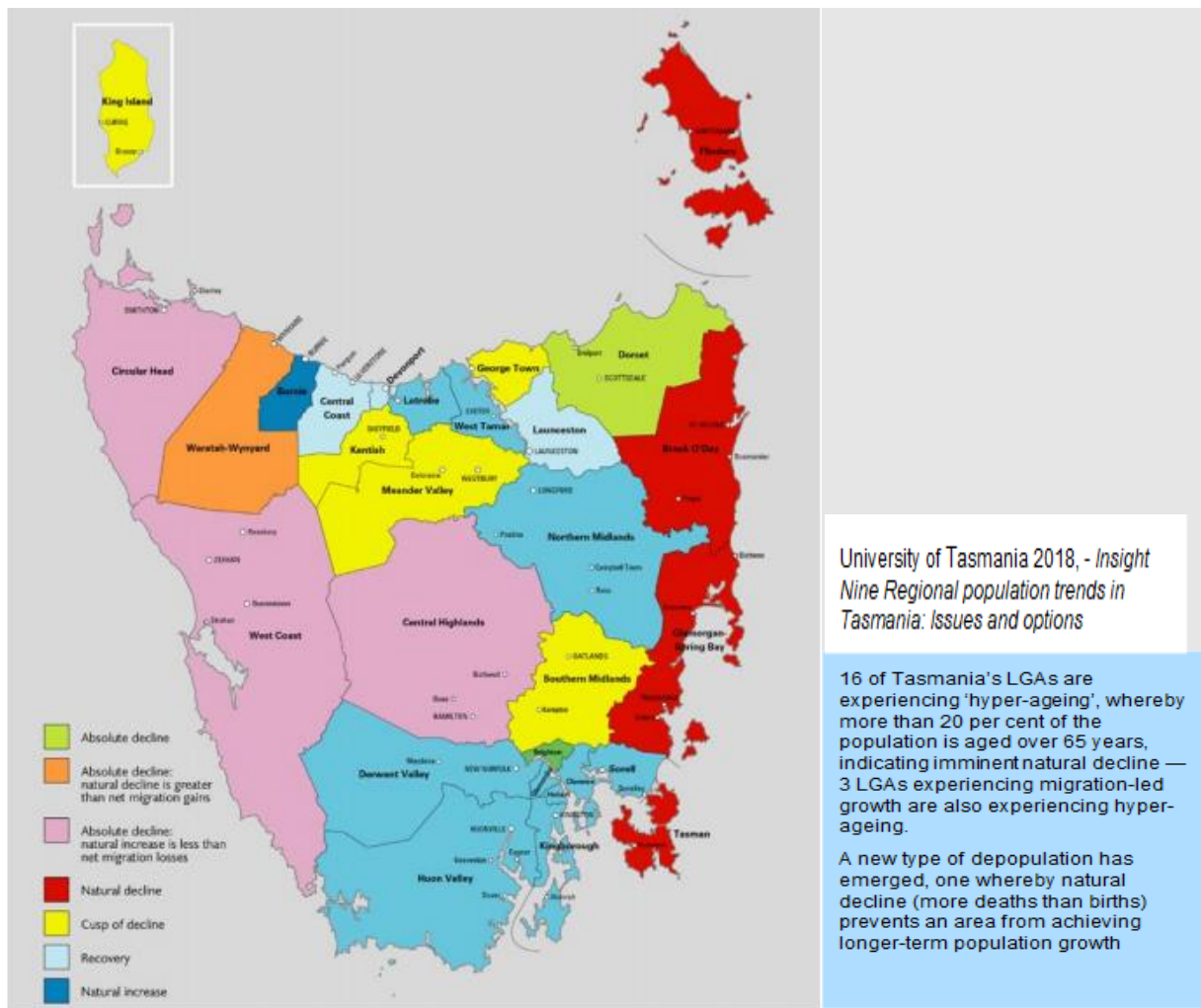


Figure 1: Regional population trends in Tasmania

Table 2: Projected population change in the West Coast LGA and neighbouring Latrobe LGA

LGA	2017	2042	Population loss	Percentage change
West Coast	4,162	2,963	-1199	-28.8
			Population gain	Percentage change
Latrobe	11,109	13,762	2,653	23.9

## Public health

In addition to the social determinants of health, which were outlined in the above sections, the following influences on health should be taken into consideration for the West Coast local government area:

**Climate change:** The Tasmanian Department of Health and Human Services has highlighted the potential for climate change to impact on public health, the environment and the economies of local government areas across Tasmania, with a consequent widening of existing health inequities.<sup>31</sup>

**Disaster management:** The West Coast remoteness and limited access to local emergency services and resources heighten potential risks from extreme weather events such as bushfires, floods and storms, as well as from pandemics such as COVID-19 and bio-security hazards.

<sup>31</sup> Tasmanian Department of Health and Human Services 2018, *The State of Public Health Tasmania 2018*

## Impacts of COVID-19 pandemic

The impact of COVID-19 varies based on a number of factors, the Australian Institute of Health and Wellness has stated that “the COVID-19 pandemic has had an impact on both patients and health practitioners in terms of the number of medical services, type of services and the way in which services are delivered.” The medium to long-term impact of the COVID-19 pandemic on the overall health, mental health, and socioeconomic well-being of populations more broadly is still being determined, however, preliminary research has shown that rural and remote communities are vulnerable to greater health inequalities as a result of COVID-19 – with this increasing by remoteness.<sup>32</sup>

Additionally, the impact of the COVID-19 pandemic on the healthcare system, and service availability and accessibility are also varied – with some communities and individuals reporting higher accessibility to services due to the increased use of telehealth, whilst others reporting decreased accessibility due to the limited availability of in-person services, and healthcare worker shortages.

A change in mental health need and acuity have also been highlighted as a pandemic can precipitate new psychiatric symptoms in people without mental illness, aggravate mental health conditions in those with pre-existing mental illness, and cause distress to the caregivers of affected individuals. Regardless of exposure to the virus causing the pandemic, people may experience fear and anxiety about falling sick or dying, or have a sense of helplessness, potentially triggering off a mental illness. This may result in increased demand for face-to-face, online and telephone-based mental health support and psychological interventions. Mental health and frontline workers providing primary health care to the West Coast residents may also require additional resourcing and support, as a consequence of the pandemic.

Along with the mental health impacts, [Australia's Welfare 2021 - In brief \(aihw.gov.au\)](https://www.aihw.gov.au) identified several other COVID-19 impacts (both positive and negative), with vulnerable populations at higher risk of poorer health and socio outcomes:

- improved social cohesion
- disruption to education
- potential increases in family, domestic and sexual violence
- housing stress, in particular in regional areas local home buyers and renters are facing greater competition with low- income tenants likely to face further affordability stress
- employment, whilst rates have now recovered in 2020 there was a marked drop in unemployment with the shutdown of non-essential business and activities having a significant economic impact across Australia.

In order to foster a continuous and sustainable health care system in service and delivery, it requires the engagement and actions of sectors other than those whose primary focus is health (for example, the mining and tourism sector in the West Coast). Success requires sustained health promotion and protection activities that coordinate all government departments, organisations, communities and individuals to tackle problems from many angles and in dynamic, flexible ways<sup>33</sup> to reduce to burden of disease and improve the health outcomes.

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<sup>32</sup> The Australian Institute of Health and Wellness, Rural and Remote Australians, “Impact of COVID-19” Available at: <https://www.aihw.gov.au/reports/rural-remote-australians/rural-and-remote-health>

<sup>33</sup> Tasmanian Department of Health and Human Services 2018, *The State of Public Health Tasmania 2018*