

HEALTH

Gold Coast University Hospital (Source: Queensland Health)



HEALTH

OVERVIEW

Thanks to Queenslanders' united efforts, our response to the COVID-19 pandemic has been outstanding.

We demonstrated how Queensland's health system ranks among the best in the world. With the state's population growing and rates of chronic disease increasing, demand for health services is expected to continue to increase significantly.

The government is working to ensure Queenslanders will be among the healthiest people in the world by 2026 by providing more equitable access to high-quality healthcare. To achieve this, all service areas across our entire health system aim to provide relevant and timely care in the most appropriate locations possible.

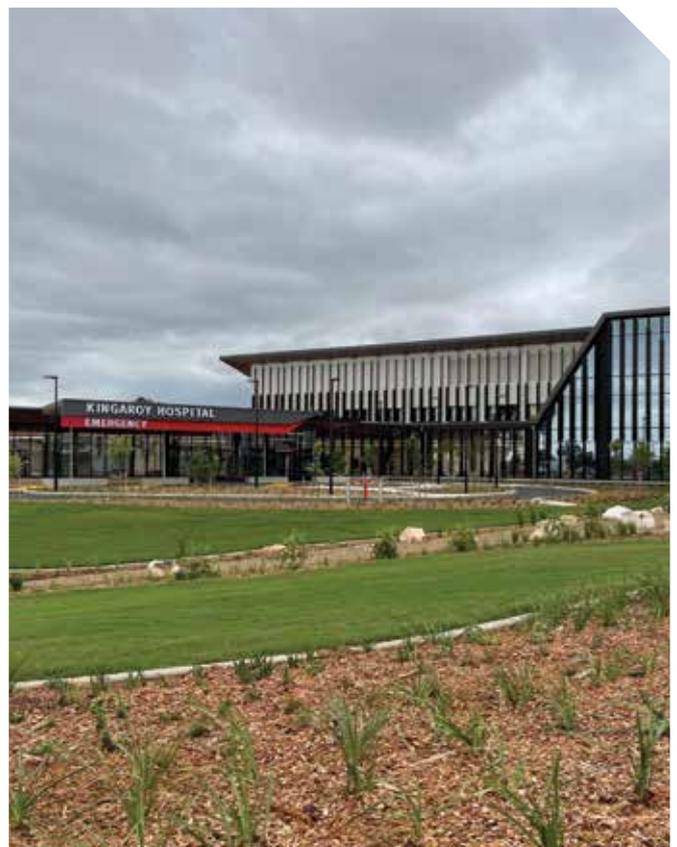
The geographic distribution of Queensland's population creates challenges to providing equitable access to health services for rural and remote communities. In addition to this, pressure in responding to large-scale public health events like COVID-19, requires innovative approaches to deliver improved value, promote partnerships, and support affordability and sustainability.

The health sector's response to these challenges and opportunities is system wide, including how infrastructure is planned, delivered and maintained. Working together to integrate our efforts, we can optimise our health care system to make better use of existing infrastructure, transform how care is delivered and sustainably grow the health system to support all Queenslanders to live healthier lives.

Queensland's healthcare system is in an era of unprecedented technological change. Exciting advances in medical science enable medicine to be tailored to individuals. Technologies like artificial intelligence, robotics, and virtual and augmented reality are transforming the way the healthcare system operates, providing targeted services within the community and in the home, taking pressure off existing facilities. Built infrastructure including hospitals, state-funded residential care, health and community centres, and ambulance stations, together with digital technologies, will be critical enablers, delivering quality health and community services to Queenslanders. This will need to be supported by enhanced digital literacy for both patients and the health workforce.

Even with innovation and improvement in the models of care, increased service demand ultimately drives a need for infrastructure investment. This may include accommodating growth in services, renewing or repurposing older assets to extend their life, improving energy efficiency through the \$30 million Solar Panel and Efficiency Program, or adapting facilities to support the delivery of contemporary health services. Smarter infrastructure investment that considers equitable, efficient and effective person-centred care in alternate settings and encourages partnerships across industries, research and other sectors is critical.

Co-locating health with other social infrastructure and the maturing of precincts that foster health and knowledge are a few examples of how Queensland can continue to deliver world-leading healthcare and maintain a highly skilled and robust workforce. As an example, the \$1.1 billion transformation of the Herston Quarter will result in a mixed-use community hub that will cater for world-class health research, residential, commercial and retail facilities.⁵⁶



Kingaroy Hospital (Source: Queensland Health)

CURRENT KEY INITIATIVES

Keeping Queensland Healthy

Record health investment of \$22.2 billion in 2021–22.⁵⁷

Hospital Building Fund

\$2 billion to deliver hospital upgrades and expansions and uplift Queensland Health’s base capital program.

Partnering for the future: advancing Queensland’s community services

Co-designing a strategic framework with neighbourhood and community centres and other stakeholders to build capacity to meet community needs, increase wellbeing, impede disadvantage and avoid increasing costs for services.

Healthy ageing: A strategy for older Queenslanders

Supporting older Queenslanders to stay well for longer, adopt person-centred care and integrate health and other support services.

Queensland Health Virtual Healthcare Strategy

Developing the future strategic direction for virtual healthcare.

The Digital Strategy for Rural and Remote Healthcare

Improving access to, and participation in, healthcare services in rural and remote Queensland.

Release of Making Tracks Together: Queensland’s Aboriginal and Torres Strait Islander Health Equity Framework

Placing First Nations peoples and voices at the centre of healthcare service design and delivery.

National Agreement on Closing the Gap

Queensland is a signatory and committed partner of Closing the Gap to achieve better outcomes for First Nations peoples, including improving life expectancy, increasing the proportion of healthy birthweight babies, and reducing suicide rates toward zero.

Digital Information Strategy for mental health, alcohol and other drugs healthcare

Digital health innovation and better integrated information to improve outcomes for consumers of Queensland Health funded mental health, alcohol and other drugs services.

Healthy Places, Healthy People Framework

Queensland Health and Queensland Government Architect initiative to integrate health considerations in infrastructure planning and delivery.



Herston Biofabrication Institute (Source: Queensland Health)

TRENDS



EMERGENCY DEPARTMENT PRESENTATIONS
in Queensland public hospitals are projected to **INCREASE BY 46.5 PER CENT** to almost 3 million in 2031–32⁵⁸



At the end of 2020, **ALMOST 50 PER CENT OF AUSTRALIANS** reported they were likely to **USE TELEHEALTH SERVICES** in the future⁵⁹



BETWEEN 2016 AND 2026, IT IS EXPECTED THERE WILL BE 252,739 EXTRA ADULTS in Queensland above 70 years of age, accounting for 13 per cent of the state’s population⁶⁰



HEALTH

CHALLENGES

Keeping pace with shifting consumer needs

There is a growing preference for care and services to adopt more place-based, preventive and collaborative partnership approaches, as well as virtual and digitally-enabled health care options, informed by consumer needs. Queensland Health's virtual healthcare agenda focuses on resolving connectivity challenges to improve service delivery models.



Climate change impacts on health infrastructure

Climate change requires infrastructure to be designed and built with increased resilience, to support the community-wide transition to a zero net emissions economy, as well as waste reduction and sustainability practices. This may challenge the way health infrastructure has traditionally been planned, designed, delivered and operated.



Growing and ageing population and unhealthy environments

Queensland's population is expected to grow by over one million to 2031. Population changes, lifestyle choices and modern environments that do not enable healthy living are contributing to increasing rates of obesity and chronic health conditions such as cancer, heart disease and diabetes. This places continued pressure on our health system and supporting infrastructure.



Health equity for all Queenslanders through a responsive, adaptable health system

First Nations peoples, people with disability, socio-economically disadvantaged people and those living in rural communities generally experience poorer health outcomes than the rest of the population. Health infrastructure must be designed and supported to close the gap in health outcomes and address future challenges such as pandemics, natural disasters, and other significant disruptions. Achieving equity in healthcare access and outcomes requires tailoring care so all population groups can reach their full health potential. For First Nations Queenslanders, this involves delivering both culturally and clinically safe care that responds to what First Nations peoples need and want.



Expanding pressure on health budgets

There is pressure to deliver more effectively with finite funding. It is important that the government's investment in health is financially sustainable and makes best use of available resources for the benefit of all Queenslanders, while also considering alternative finance models with private and non-government organisations.

Increased and more complex demand for ambulance services

Existing assets need to be maintained and improved to accommodate current and future service capability requirements. Early coordinated planning is needed to secure land and facilities early in new developments in areas of high growth. This will ensure the future needs of communities continue to be met through integrated health pathways.



Improving access to virtual healthcare

Remote and very remote locations may lack the digital capacity and resiliency to increase bandwidth and can suffer from ICT outages. Queensland Health's virtual healthcare agenda focuses on the consideration and resolution of connectivity challenges to transform service delivery models.



A responsive and adaptable health system in a world of increasing complexity

Our economic and social prosperity relies on the health of all Queenslanders. While the state's healthcare system ranks among the best in the world, we are not immune to future challenges, including pandemics, natural disasters, or other significant disruptions.



OPPORTUNITIES

Providing more jobs and growing our health knowledge economy

Queensland's future as a leader in health research was shown throughout COVID-19 and continues to evolve through centres of excellence such as the Translational Research Institute in Brisbane, The Gold Coast Health and Knowledge Precinct, and the TropiQ – Townsville Tropical Intelligence and Health Precinct. There is growing potential to expand Queensland's capacity in biomedical research and manufacturing, partner with industry, and build our knowledge-based economy.

The 10-year Queensland Innovation Places Strategy being led by Advance Queensland will support the development of a highly collaborative system of innovation places to further strengthen our health and knowledge-based economy.



Health workforce for the future

We are building a health workforce for the future by developing education, training and employment pathways connected and integrated into a range of settings, beyond traditional environments. An example is the Satellite Hospitals Program, where facilities operate as mini-hospitals to deliver integrated, out-of-hospital community-based care in rapidly growing urban areas.



Co-locate health, community, disability, and housing services

We can improve access and support for the community by delivering public, private and not-for-profit services in the one location.

This may include connections with public transport, employment and training opportunities, and shared use of new and existing infrastructure and resources. Examples include community centres that provide a soft entry point for crisis services, through to the planned Meadowbrook Health and Wellbeing Precinct in Logan.



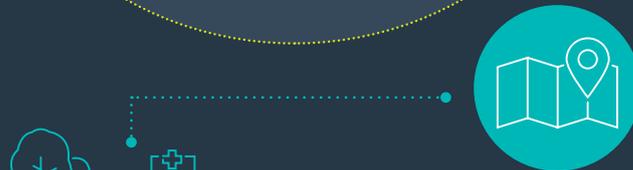
Unprecedented and continuous technological change in healthcare

Digitally-enabled models of care are changing our existing infrastructure requirements (including the health workforce), providing opportunities to personalise healthcare, overcome Queensland's vast distances and improve efficiencies and health outcomes. Queensland Health has the largest digital portfolio in the Queensland Government, representing nearly 50 per cent of reported ICT projects.⁶¹



Consumer engagement

The community's desire for fast, reliable access to knowledge is contributing to a role shift from 'passenger' to 'driver' of their own healthcare and greater access to community services. For example, one in 20 Google searches involve a request for health information.⁶² Consumer engagement and insight into community needs, backed by data and growth trends, enables informed investment in new neighbourhood, community centres and health services.



Building infrastructure that supports health and wellbeing

Queensland's COVID-19 Economic Recovery Plan prioritises the building of infrastructure to protect and safeguard the health and wellbeing of our diverse communities. Certain attributes of built environments, along with natural environments, are proven to support both physical and mental health and wellbeing. Embedding health and wellbeing outcomes as part of infrastructure planning and delivery can lessen the growing burden on our health system.





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PRIORITY ACTIONS

1 Co-location and shared services (QH, DCHDE, DSDSATSIP)



Consider options for co-location across community, health and disability services with private and non-government sectors to improve access and efficiencies. This can include culturally appropriate integrated care for Aboriginal and Torres Strait Islander peoples and culturally diverse communities.

2 Health and knowledge precincts (QH, DTIS, DSDILGP)



Partner with well-established institutions such as hospitals, universities and research organisations to support an environment of knowledge transfer that nurtures the start-up, incubation, and development of innovation-led, high-growth, knowledge-based organisations.

3 Increasing hospital beds and services (QH)



Investment in key hospitals in high-growth areas, including the Building Better Hospitals initiative.

4 Meeting growing demand for health services (QH)



Encourage a networked health system and a range of demand management initiatives including Satellite Hospitals, hospital based crisis support spaces, short-term leasing of facilities, expansion of eHealth services or arrangements with private hospitals. This will take pressure off nearby emergency departments and acute service facilities and provide quality care closer to home.

5 Health service resilience and surety of supply (QH)



Build upon lessons learnt and enable better resilience across the health system to respond to COVID-19, natural disasters, and other impacts such as climate change. This includes improvements to the supply chain such as the Queensland Government Critical Supply Reserve, and digital infrastructure.

6 Partnering with key private sector and non-government providers (QH)



To deliver additional capacity and service through innovative delivery models, including utilising the private sector to manage health service demands, where appropriate.

7 Engaging with all levels of government and industry partners (QH, DCHDE, DSDILGP)



Plan for and secure future health and ambulance services, aged care, community and neighbourhood centres, with a coordinated approach such as through Priority Development Area processes, strategic land acquisition in growth areas and co-location strategies.

8 Improving healthcare services in rural and remote areas (QH)



Apply innovative and flexible facility design and construction methods such as modularised buildings that deliver more affordable and faster to build facilities, including for staff accommodation, Primary Health Care Centres, Multi-Purpose Health Services, residential aged care and rural hospitals. Complement infrastructure investment through local cross-sectoral planning, policy development and collaboration that leverages alternative facilities and services.

9 Growing our rural and remote digital infrastructure and technology (QH)



Transform rural and remote health services from their current state to being fully digitised to enable the delivery of integrated health services to all Queenslanders regardless of their location to address the unique challenges faced by rural and remote facilities.

10 Achieving the Queensland Government's zero net emissions by 2050 target (QH)



Lead health sector efforts to improve the environmental performance of existing and new health facilities, through the establishment of an Office of Hospital Sustainability and local responses such as *Green Metro North Sustainability Strategy*.

11 First Nation Health Equity strategies (QH, supported by DSDSATSIP)



Implement strategies and master plans to provide equitable access to culturally compatible community and healthcare services for Aboriginal and Torres Strait Island communities in local health systems, and health and community infrastructure across Queensland. Each Hospital and Health Service is required to release a Health Equity Strategy that is co-designed, co-developed, co-owned and co-implemented in partnership with First Nations peoples.

12 Mental health and wellbeing of Queenslanders (QH)



Enhance and transform the provision of high quality and accessible mental health, alcohol and other drugs services through increased investment in community mental health, suicide prevention and planning and delivering priority infrastructure projects. This will deliver improved mental health facilities and advanced digital healthcare capabilities to support new models of care delivery.

13 Preventive health measures to improve population health (QH, HWQ)



Lessen the burden of disease through infrastructure solutions and investment that can support Queenslanders to make healthy lifestyle choices and enjoy better health. For example, working in collaboration with agencies to achieve more consistent delivery and measurement of infrastructure investments to support active living.⁶³

14 Promoting and implementing the Healthy Places, Healthy People Framework (QH)



Embed health considerations into infrastructure planning and delivery. This includes smart investment solutions that prioritise healthier living in well-designed places.

15 Queensland Ambulance Service infrastructure planning (QH)



Early planning and investment to meet community needs for services in areas expecting growth and changing demand.

16 Funding and financing strategy for healthcare infrastructure (QH)



Develop a sustainable strategy involving a range of initiatives aimed at addressing the growing gap between supply and demand for infrastructure funding required to support growth and renewal in the asset base of the health system.

17 Enabling the health workforce of the future (QH)



Continue to invest in health education, training and employment pathways through supporting education and training infrastructure in the right locations to ensure sustainable healthcare capabilities across the state. This includes working with universities to deliver practical training and research.

Securing a quality health workforce may also require the provision of adequate and safe key-worker housing in locations where dwelling availability is limited, expensive or unavailable.

18 Community and consumer engagement (QH)



Promote active and meaningful engagement and participation of consumers and their family/carers in their journeys across the health system, through collaboration in the planning, design, delivery, monitoring and evaluation of health services for improved health outcomes for all.



COVID-19 Response – Personal Protective Equipment (Source: Queensland Health)

INFRASTRUCTURE OBJECTIVES



Encourage jobs, growth and productivity



Develop regions, places and precincts



Enhance sustainability and resilience



Adopt smarter approaches



HEALTH

▼ CASE STUDY

Queensland Health's Virtual Healthcare Strategy – Virtual Care Hubs

Virtual care, including telehealth, has transformed the way health services are delivered, leveraging digital technologies to connect healthcare across multi-disciplinary teams who can communicate and easily share patient information. An agile and digitally responsive health system helps free up hospitals and clinics, supporting patients to receive safe, quality and consistent care closer to home without entering hospital environments.

We are building on opportunities arising from the COVID-19 pandemic to leverage hospital and health service capability in the digital health environment. This would help to empower Queenslanders with integrated virtual and in-person health services, to deliver the right care in the right place, at the right time. This could be supported by virtually enabled models of care including the expansion of virtual care hubs. These hubs will network regional healthcare providers to facilitate the remote delivery, assessment and coordination of clinical services.

They will leverage existing virtual care initiatives and grow capabilities with the use of remote monitoring and integrated electronic medical records with primary and specialist care providers. The convenience and holistic approach enables a person's healthcare journey to be enhanced by technology in the community. An example of this is the collaborative Virtual Integrated Pain Centre, connecting patients in rural and remote Queensland to specialist allied health persistent pain services in local facilities.

Metro North Hospital and Health Service is establishing the Clinical Care and Coordination Hub, a central intake, information and intervention hub to improve patient flow and integrate services. This will include a range of co-located virtual health care and coordination services, enabled by interoperable digital systems.



Telehealth transforming health services (Source: Queensland Health)