

Community Health Vision

2025 – 2028

DRAFT

A SHARED HEALTH VISION FOR CLONCURRY

"Our health is one thing many of us take for granted until we have an issue. It is definitely something we all need to be more proactive with. The Cloncurry Community Health Vision is designed to be proactive in driving improved health outcomes for the Shire.

Good health is a cornerstone of happiness and wellbeing. Where we live and the things we do add to the challenge of maintaining our health. Rural and remote residents are significantly more likely to die from a treatable injury or illness than urban residents. There are no doubt many factors that influence these outcomes. As John Flynn identified over a century ago, the tyranny of distance is one factor. Another, more evident one is the broadening inequity in services generally afforded to rural areas, but especially health services.

Health and Wellbeing Queensland has an established definition for equity, it is "Equity exists when social conditions enable communities, families and individuals to flourish". I believe strongly that the people of the Cloncurry Shire have a right to flourish and when everyone gets the chance to do their best, our whole society benefits. Equity is about making sure everybody is valued and has what they need to thrive.

Our community also has every right to feel valued by the organisations responsible for providing health care to us. This document captures this."



Mayor Greg Campbell
Cloncurry Shire Council

ABOUT THE VISION

The Cloncurry Community Health Vision sets a clear and shared direction for improving health outcomes across the Shire – a commitment shaped by Council, local health services, community organisations, and the broader community itself.

Anchored in the belief that good health underpins a thriving, liveable, and connected Cloncurry, the vision sets out the planning, partnerships, and investment required to address both the immediate health needs and longer-term health security. It recognises that securing positive health outcomes in Cloncurry Shire demands a ‘whole-of-community’ response, backed by investment.

At its core, the Cloncurry Community Health Vision seeks to:

1. **Advocate** on behalf of the community for investment in critical health infrastructure, services, workforce, and transport.
2. **Develop** a sustainable and skilled local health workforce that meets the ongoing and future needs of the Shire.
3. **Enable** the community to better understand, define, and manage their own health needs through improved health literacy and education.
4. **Ensure** health services provided in Cloncurry Shire are appropriate, high-quality, and reflective of the community’s unique health needs.
5. **Increase** accessibility to health services for all residents and workers, reducing barriers to care.

The vision is the culmination of comprehensive engagement with community and stakeholders, detailed analysis of health service provision and demographic trends, and a shared commitment to action. It positions Council not only as an advocate and enabler – but as a key partner working alongside health agencies, government, and the community to drive better health outcomes.

Ultimately, the vision reflects a commitment to ensuring every person living and working in the Shire can access quality health care, live active and healthy lives, and feel that their voices have shaped the region’s health future.

“The community health vision is a community-wide commitment, one that seeks to ensure the health needs of our community are met, and that accessible health solutions are available to those that live and work in our Shire.”

– Philip Keirle, CEO – Cloncurry Shire Council

BUILDING THE VISION

Grounded in extensive consultation and community engagement, the Community Health Vision represents an independent and authentic voice of the Cloncurry community. Facilitated by specialist consultancy ‘The Social Planners’, the vision identifies priority projects, investment needs, and practical steps to improve health and wellbeing outcomes across the Shire.

Development of the vision was informed by comprehensive research and engagement, including:

- Background research – various sources
- Community Planning Workshop – 33 participants
- 1:1 meetings – health services, MPs, service providers, Council, and community organisations
- Schools engagement – Cloncurry State School (Years 10 – 12)
- Community survey

COMMUNITY WORKSHOP

Held on Tuesday 11th March, the workshop brought together 33 participants representing health services, community leaders, and stakeholders from across the Shire. Participants worked collaboratively to identify health gaps, shape solutions, and outline immediate action to strengthen local health outcomes.

Discussion areas:

- Priority health challenges across the Shire
- Potential solutions to these challenges
- Immediate actions required to create momentum for change.

Across six working groups, common themes started to emerge, with areas such as aged care, accessible specialist care, integrated service planning and delivery, mental health, communication challenges, health literacy, First Nations health (specifically Dajarra), transport, workforce (attraction and development), Dental, funding, and continuity of care being the areas of greatest discussion.



PRIORITY AREAS

ACCESS, EQUITY, & INCLUSION: Distance to services, high costs, limited transport, and finite local health resources all reduce residents’ awareness of and access to health services, further compounding already poor health outcomes. To address this, priorities and initiatives must focus on improving overall access (through greater presence and availability), while ensuring equitable care for the entire community – not just those with the most severe health needs. By exploring viable, sustainable, and innovative solutions to these barriers, we begin to close the health gap.

EDUCATION: Recognising the gap in residents’ understanding of their health needs and their ability to make proactive, informed decisions, investing in health education empowers individuals to better manage their wellbeing – often without the need to consult a healthcare provider. By focusing on culturally tailored, targeted initiatives, particularly in areas like mental health and chronic disease prevention, we can improve engagement with preventative care and reduce the burden of chronic conditions in the community.

INFRASTRUCTURE: Ensuring residents and workers have equitable access to quality healthcare starts with investing in infrastructure that is appropriate, responsive, and fit-for-purpose. This includes wider general infrastructure investment that facilitates health and wellbeing, such as parks, opens spaces, and recreation areas. Through the provision of robust local infrastructure, we can improve the overall health outcomes for the community through preventative measures being developed alongside diagnosis and treatment services that can be accessed closer to home.

SERVICES: A coordinated, integrated, and well-communicated approach to service delivery aims to better connect residents with health-relevant information and enhance the overall effectiveness of the health services ecosystem across the Shire. By strengthening in-region service delivery and strategically engaging out-of-region providers, this coordinated approach seeks to improve accessibility, awareness, and community trust in health services. It also ensures the thoughtful use of local resources, knowledge, and skills to meet community needs more effectively.

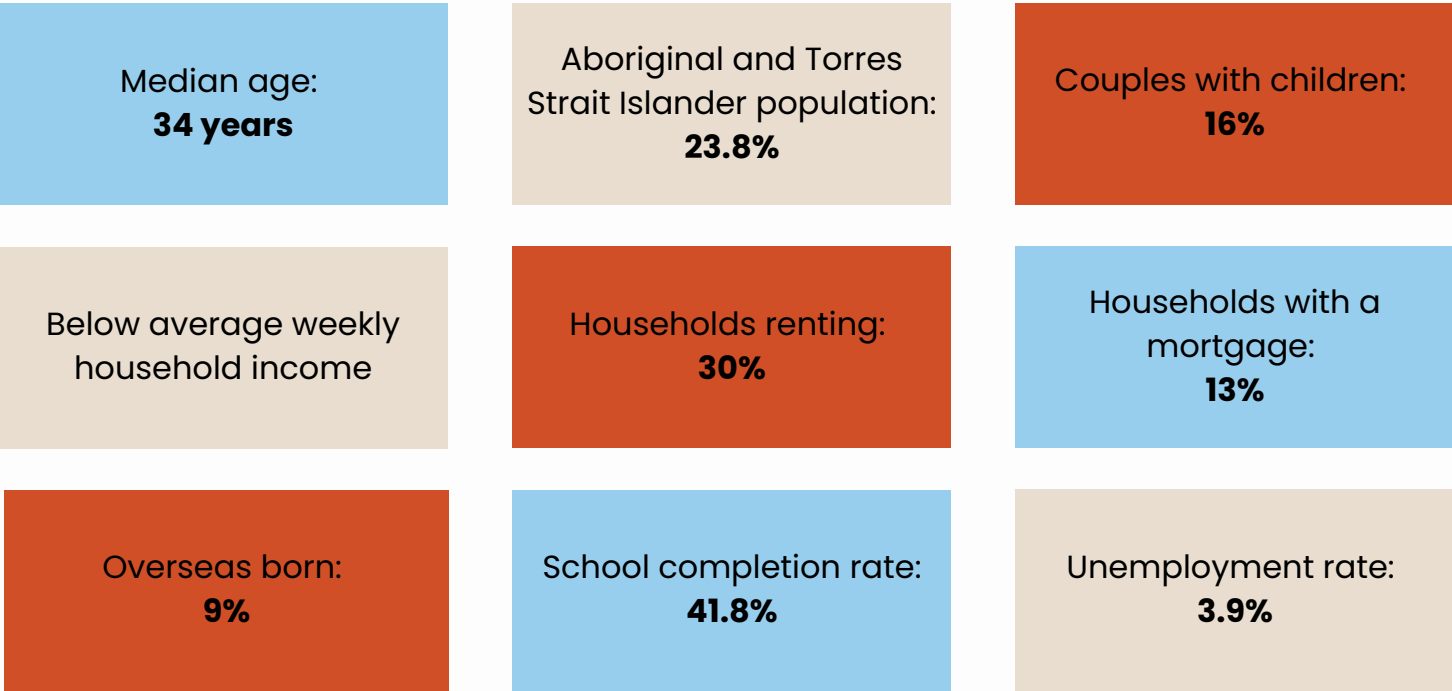
WORKFORCE: Of vital importance to strengthening the health care capacity in the Shire of Cloncurry is the sustainable development of a locally responsive health workforce while also attracting skilled specialists from beyond the region. Ensuring an equitable, health needs relevant distribution of health professionals – aligned with the unique needs of our community – will enhance access to essential healthcare services. This strategic investment will help drive improved health outcomes for our residents and support the long-term wellbeing and resilience of the Cloncurry region.

COMMUNITY OVERVIEW

Located in remote Northwest Queensland and covering an area of 47,971 square kilometres, The Shire of Cloncurry is home to a permanent population of almost 4,000 residents, as well as a sizeable fly-in-fly-out and drive-in-drive-out workforce. Encompassing the traditional lands of the Mitakoodi people along with parts of Kalkadoon, Pitta Pitta, and Wanamara lands, the main township is Cloncurry, with numerous other smaller settlements including Dajarra, Kajabbi, Malbon, and Duchess.

Known as the “Friendly Heart of the Great North West”, the Shire is built upon strong pastoral and mining backgrounds, with a vibrant tourism industry also emerging. Having played a pivotal role in the establishment of two Australian icons – QANTAS and the Royal Flying Doctor Service (RFDS), it is the beating heart of the Australian Outback and a future focused community striving to improve all facets of life in the Shire.

As the second most populated local government area in the region and experiencing population growth year on year, the Shire is a centre for mining, grazing, and a growing transport industry. Voted Queensland’s friendliest town in 2013 and 2018, and Queensland’s Tidiest Town in 2022, ‘The Curry’ – as it is affectionately known by the locals, is full of innovation, exploration, and community spirit.



ACCESS TO HEALTHCARE

VERY REMOTE AUSTRALIA

Every year, rural and remote Australians miss out on an estimated \$6.5 billion in health funding – an extraordinary shortfall that equates to almost \$850 less per person, per year, compared to those living in metropolitan areas. The funding gaps spans the full spectrum of health care – from public and private hospitals, Medicare and Pharmaceuticals, dental care, NDIS, aged care, First Nations health services, and primary health networks.

For Australians living in Remote and Very Remote communities, the consequence of this systemic underinvestment is stark and deeply felt. It means:

- Almost 50% less Medicare utilisation than metropolitan counterparts
- Lower participation in life-saving cancer screening programs
- Reduced access to dental care and after-hours GP services
- Barriers to accessing disability and aged care supports
- Longer wait times to see a GP – if one is available at all
- Lower levels of private health insurance coverage.

This widening gap in infrastructure, access, and services translates to poorer health outcomes, with rural and remote Australians carrying a higher rate of disease burden, face greater risks of preventable illness, and are more likely to experience compounding social and economic disadvantage that affects their long-term wellbeing. While new models of care, digital health, and innovative workforce strategies offer promise – their benefits remain unevenly distributed and slow to reach the communities who need them most. Without urgent and targeted action to embed these solutions locally, remote Australians will continue to fall further behind.

Closing the rural health gap isn't optional – it's essential. It requires bold investment, sustained commitment, and a place-based approach that recognises health access as a fundamental right for all Australians, regardless of postcode.

RURAL HEALTH IN AUSTRALIA

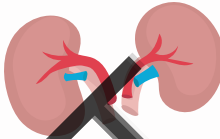
2025 SNAPSHOT

DISEASE BURDEN



Coronary Heart Disease

The leading disease burden for Very Remote Australians, **2.2 times** higher than those in Major Cities.



Chronic Kidney Disease

3.1 times the disease burden for Australians living Remote and Very Remote.

TOP 5 leading causes of disease burden for Very Remote Australians:

- Type 2 Diabetes
- Suicide
- Self-inflicted injuries
- Chronic obstructive pulmonary disease
- Lung cancer

Potentially Avoidable Deaths:

When compared to the rate in Major Cities, potentially avoidable deaths in Very Remote Australia are **2.5 times** higher in males and **3.7 times** higher in females.

Health Risk Behaviours (Very Remote):

- Daily smoking rate: 20.4%
- High blood pressure: 25.2%
- Alcohol consumption rate (exceeding Australian guidelines): 30.9%
- Smoking during pregnancy: 5.5x higher likelihood than Major Cities
- Pre-term birth rate: 14.4% (8.1% for Major Cities)
- Adults classified overweight or obese: 69.8%

PRIORITY OPPORTUNITIES

The following Priority Opportunities are those that were collectively identified as being the most **CRITICAL** or **HIGH PRIORITY** projects needing to be progressed, supported by coordinated Investment and a sustainable, locally-led response.

PRIORITY OPPORTUNITY 1:

A NEW, FIT-FOR-PURPOSE CLONCURRY HOSPITAL

Cloncurry needs a new hospital – it’s a health investment that’s long overdue. Despite the Queensland Government’s \$1.083 billion Building Rural and Remote Health Program, Cloncurry – in the bottom 10% of health standards nationally – remains without the health infrastructure it desperately needs.

A region that has a growing population, a thriving mining sector, and an ageing community – has some of the worst health outcomes – largely due to limited access to a modern, fit-for-purpose hospital.

Cloncurry’s Health Reality:

- Ranked in the bottom 10% of all Australian LGAs for health outcomes (468th of 518)
- 1 in 4 residents living with long-term health conditions
- One of Australia’s highest rates of heart disease mortality (0.175%)
- A national hotspot for heart-related hospital admissions
- Limited and inconsistent access to primary health, allied health, and aged care

Cloncurry residents are often having to wait, expected to travel, or go without. And whilst the local hospital has had an upgrade, it is ageing, inadequate, and no longer meets the health need of the community.

A new Cloncurry Hospital would deliver health infrastructure essential to meet current and future demand, enabling residents to access the care they need locally, safely, and with dignity. Priorities for a new hospital include:

- | | |
|--|---|
| • Increased inpatient unit capacity | • Increased residential aged care provision |
| • Maternity, birthing, and neonatal services | • Designated acute and non-acute spaces |
| • New, modern Emergency Department and waiting areas | • Dedicated Mental Health service provision |
| • Cardiac care unit | • Drug and Alcohol rehabilitation unit |
| • Cancer treatment unit | • Boosted digital capability |
| • Palliative care unit | • Workforce accommodation block |

The health need in Cloncurry exceeds many other locations already receiving hospital investment, with recently announced new hospital locations (Camooweal, Normanton, Doomadgee) having smaller combined populations than Cloncurry. With significant mining growth and regional workforce expansion, the Shire required sustainable health infrastructure that meets the needs of the community.

Without the required investment, the health inequality of the community will continue to widen – undermining liveability, workforce attraction, and regional prosperity. A future-focused, fit-for-purpose health precinct that meets the needs of residents, industry, and the broader region is not just an investment in health infrastructure...but an investment in equity, liveability, and the future of regional Queensland to ensure ‘no one gets left behind’.

WHAT OUR COMMUNITY EXPECTS – AND DESERVES:

- ✓ **Equitable access:** Timely, affordable access to basic health services – without having to travel hundreds of kilometres.
- ✓ **Fit-for-purpose Health Infrastructure:** Modern, safe, inclusive, and welcoming health facilities that meet the needs of our growing and diverse community.
- ✓ **Local-to-region Health Care:** Access to primary care, allied health, preventative health, and patient transport – without the financial burden placed on residents currently.
- ✓ **More Doctors, Nurses, Specialists, and Allied Health Professionals:** Sufficient workforce, supported by appropriate infrastructure, to improve service availability, continuity of care, and reduce burnout.
- ✓ **Maternal, birthing, neonatal services:** Local families should not have to leave town to give birth or access essential early childhood services.
- ✓ **Improved health outcomes for all:** Increased participation in health screening, early intervention, and preventative care – enabling residents to live longer, healthier, and more connected lives.



KEY ISSUES:

- Not centrally located
- Unsafe, unwelcoming
- Unattractive for workforce
- Ageing infrastructure
- Poor layout
- Services don’t meet community needs!

PRIORITY OPPORTUNITY 2:

INVESTING IN MENTAL HEALTH

PRIORITY LEVEL: HIGH
TIMEFRAME: 1 – 2 years

Cloncurry needs a mental health response that is built for the reality it is facing. Mental ill-health is one of the most urgent and growing challenges facing Cloncurry – impacting residents, workers, families, and entire communities across the Shire.

Living in Very Remote Australia comes with unique stressors – but in Cloncurry, those stressors are amplified by systemic gaps in health access, compounding disadvantage, and an almost total absence of local mental health services. This is a situation that demands action, recognising that mental illness in Cloncurry doesn't happen in isolation – but is shaped and worsened by the lived conditions of remote life, including:

- Poorer overall health outcomes
- Higher rates of chronic disease and disability
- Increased smoking, alcohol, and illicit drug use
- Limited access to education and employment pathways
- Financial insecurity and housing stress
- Poor housing conditions and homelessness

Despite these factors, Cloncurry residents have **almost six times less** to mental health care compared to those living in Major Cities. Without local services, residents are presenting later, sicker, and in crisis – often through the hospital Emergency Department, a setting very much ill-equipped to meet the complexity of mental health needs. For many young people, older residents, and First Nations residents in outlying areas – mental health support simply doesn't exist.

The impact is clear. We're seeing:

- Increased rates of untreated and chronic mental ill-health
- Rising severity of symptoms at time of presentation
- Disengagement from help-seeking, particularly among First Nations residents
- Lack of clear referral pathways and age-appropriate services
- Greater pressure on already stretched health and community services.

Cloncurry Shire needs a response. One that is driving a bold and coordinated solution – a regionally-led response that puts local people, capacity, and care at the centre. As a project that requires fast-tracked investment, local capability building, and a strengthening of service access for those who need it most, priorities are to include:

- Increased investment from State and Federal Government in local, in-community mental health services
- Delivery of low-no-cost, accessible care options for all residents
- Locally-based mental health service hubs, supported by digital care and outreach
- Improved mental health literacy, early intervention, and stigma reduction across the community

- Clearer referral pathways and integrated care between services
- Targeted youth and older person mental health supports
- Culturally safe and community-driven mental health responses for First Nations residents
- Addressing practical barriers to accessing specialist care – including transport and out-of-region travel costs
- Upskilling local residents, workers, and frontline staff to better recognise and respond to mental health issues.

This is not a problem Cloncurry Shire and its residents can solve alone. A sustainable, coordinated mental health response is required – with shared commitment and collaboration across all levels of Government, service providers, industry, and community. Investment in local mental health services is not just an investment in health – but also in safety, belonging, workforce sustainability, and future liveability of Cloncurry.

COMMUNITY PRIORITIES:

- ✓ **Adequate mental health services:** Enough local services to meet the scale and complexity of mental health needs in our community.
- ✓ **Timely Access to support:** Reduce wait times and earlier intervention – ensuring residents can access care before issues escalate into crisis.
- ✓ **Culturally safe and inclusive services:** Services that understand our community, respect our diversity, and are tailored to work for Cloncurry – not around it!
- ✓ **Age-relevant services:** Targeted mental health supports that respond to the unique needs of young people, older residents, and vulnerable groups.
- ✓ **Reducing stigma and normalising help-seeking:** Investing in local awareness, education, and community conversations to break down barriers and encourage early access to support.
- ✓ **Continuity of care:** Ensuring residents have regular, reliable access to mental health professionals – with consistent follow-up and wraparound support.

PRIORITY OPPORTUNITY 3:

AGED CARE INFRASTRUCTURE

Investment in Aged Care Infrastructure is critical for Cloncurry Shire's future. Cloncurry is at a tipping point in its aged care provision, with local aged care services already stretched beyond capacity and no forward planning in place to increase provision to meet future demand.

Like much of regional Australia, the Shire is experiencing rapid growth in its ageing population – but without the infrastructure to support it. Cloncurry's only residential aged care facility has a growing waitlist, limited bed availability, and no capacity for expansion. Older residents are being left behind – facing health decline, housing insecurity, and the prospect of leaving their lifelong community simply to access the care they need.

This is not just a health crisis – it's a liveability challenge, a workforce challenge, and a future prosperity challenge for Cloncurry.

A New Model of Aged Care for Cloncurry:

Strategic investment in a modern, fit-for-purpose aged care facility would enable Cloncurry residents to age safely, with dignity, and close to family and community. This investment would deliver:

- Doubling the number of aged care beds available (from 10 to 20)
- Fit-for-purpose facility design – blending small household models with ward-style options
- New single rooms with private ensuites for all residents
- Modern, welcoming, and liveable communal spaces
- Increased capacity for culturally appropriate care, reflective of local needs
- On-site, or local-to-site staff accommodation to support the recruitment and retention of aged care and health workers
- Integration with Cloncurry's existing health and community services
- Inclusion of respite, transitional, dementia-specific and palliative care options
- Digital and technology infrastructure to support telehealth, virtual consultation, and remote health monitoring.

This is a critical and time-sensitive opportunity to strengthen regional liveability and population retention, and transition residents to supported care when they are ready (not when a spot becomes available). It enables the region to address health workforce shortages through staff accommodation whilst alleviating felt pressure on local hospital and health services which are already oversubscribed and under-resourced.

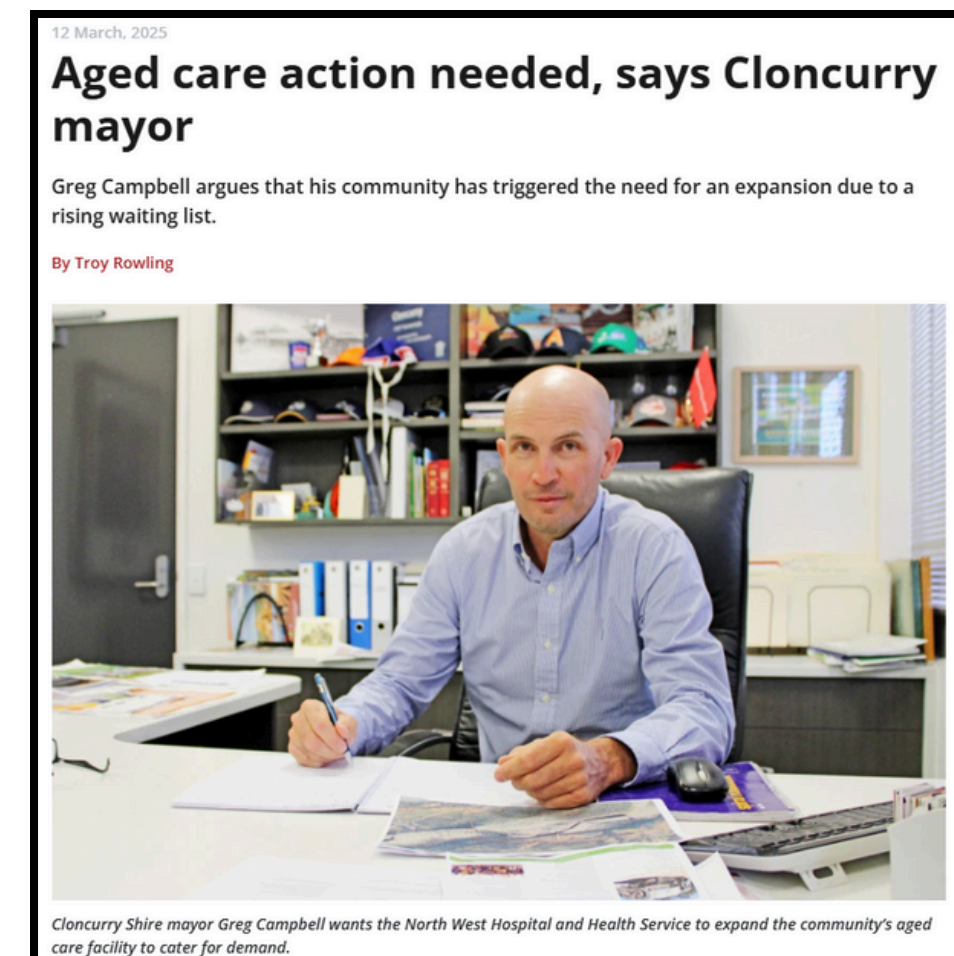
Without action, the aged care gap in Cloncurry will continue to widen – driving vulnerable residents out of their community and placing increasing pressure on already stretched regional health services. Enabling older residents to age with dignity, connected to their place, people, and culture is of upmost priority for the Shire, and investment in this through State and Federal funding channels must be achieved.

PRIORITY LEVEL: CRITICAL

TIMEFRAME: Ongoing

COMMUNITY PRIORITIES:

- ✓ **Aged care beds that meet the local demand:** Reduced waitlists and a better transition to residential care as/when residents are ready.
- ✓ **Fit-for-purpose, modern facilities.**
- ✓ **'Age-in-place':** Remove the provision gap that drives vulnerable residents out of this community.
- ✓ **Key worker accommodation:** Used to attract and retain aged care and health workers to Cloncurry.
- ✓ **Choice:** Enabling informed decision making by providing older residents and their families with appropriate information and support, and a range of aged care services and supports available locally.



PRIORITY OPPORTUNITY 4:

COMMUNITY HEALTH HUB

Offering up a frontline, place-based solution that delivers coordinated, wrap-around care close to home, a Community Hub in Cloncurry is an investment in access, prevention, and local health equity that's built by the community, for the community.

Cloncurry residents face some of the highest barriers in accessing care. These include:

- Distance and geographic isolation
- Critical workforce shortages
- Limited availability of primary and preventative health care
- Few culturally safe, inclusive service models
- Fragmented systems with little coordination between providers.

Without locally, one-stop-shop solutions, residents are presenting later, sicker, and in crisis – driving up hospital admissions, emergency presentations, and avoidable health costs.

The Solution – A Community Health Hub for Cloncurry

A centrally located, multi-disciplinary 'one-stop-shop' for healthcare – governed and led by the Cloncurry community, backed by sustainable funding models, and designed to reflect local needs. A new way of delivering care for Cloncurry, the model is:

- Community-governed and community-led
- Backed by block funding for long-term sustainability
- Driven with a clear service delivery plan approved by community
- Integrated for coordinated care between providers
- Culturally safe and inclusive in its service design
- Strengthened with information-sharing for continuity of care
- Delivers early intervention, prevention, and health promotion
- Aligns (potentially) with the establishment of an Aboriginal Community Controlled Health Organisation (ACCHO) to deliver services to all of community.

To operate as a central hub, delivered by a multi-disciplinary workforce, with flexibility to grow as local skills and capacity increase. To offer (over time):

- **Primary Health:** GP services, preventative care, chronic disease management, women's and men's health
- **Mental Health and Wellbeing:** Counselling and therapy, crisis support, alcohol and other drug services, peer programs
- **Child, Youth and Family Services:** Paediatrics, parenting support, youth mental health services
- **Aged Care and Geriatric Support:** Social connection programs, dementia support, in-home care coordination

PRIORITY LEVEL: HIGH
TIMEFRAME: 3 years

- **Health Promotion and Lifestyle Programs:** Nutrition, dietetics, physical activity, sexual health education, chronic condition management
- **Care Navigation and Social Support:** Service navigation, case coordination, housing and food security support, domestic and family violence safety planning, Indigenous health support
- **Diagnostic and Allied Health:** Physiotherapy, podiatry, occupational therapy, diagnostic screening
- **Mobile outreach and Community Transport:** Flexible delivery to outlying areas and transport for residents.

Through the establishment of a Community Hub in Cloncurry, we can enable a local-to-region response that is uniquely placed to meet the needs of the community. Whilst not only easing pressure on the hospital and other service providers, it can also enable earlier care that prevents the worsening of conditions. Able to support the growth of a locally-developed, locally-response health workforce, the hub ensures a culturally safe, community-led response to the health needs of Cloncurry.



WIDER OPPORTUNITIES

The following **Investment & Project Concepts** were identified through the extensive engagement and consultation that was undertaken to inform the Cloncurry Shire Community Health Vision. The concepts represent a range of opportunities that will assist the strengthening of the overall health performance and health outcomes of the Shire.

The opportunities are at concept stage and require further scoping to understand their viability, performance, and impact. Key factors including investment and the determination of lead agencies will impact the ability to develop these concepts into meaningful, sustainable, and locally-driven initiatives.

INVESTMENT & PROJECT CONCEPTS:

Area: Access, Equity & Inclusion
Concept: 'Access for All' Planning

A time-bound, capacity building exercise that plots the health access requirements of the community (including preventative and proactive). In each instance, a range of interventions are explored to 'tackle the gap', embedding quick win opportunities alongside a longer-term game plan.

Area: Access, Equity & Inclusion
Concept: Establish an ACCHO

Based in Cloncurry, the establishment of a Northwest Queensland Aboriginal Community Controlled Health Organisation (ACCHO), delivering a place-based and community-led response to health and wellbeing.

Area: Access, Equity & Inclusion
Concept: Community Transport

A locally responsive concept supporting those in the community who have trouble accessing transport options to get around. Program focuses specifically on the most vulnerable in the community to gain or regain independence, those creating more equitable participation.

Area: Education
Concept: Health Promotion & Health Literacy

A collaborative, cross sector approach to enhance community awareness of their health needs, recognising an existing knowledge gap in residents in how they understand information about health and health care and how to apply that information. Initiative to focus on both individual health literacy AND health literacy environment.

Area: Education
Concept: Reducing Risky Behaviours

Recognising the role of local government and service providers in supporting the reduction of risky behaviours among residents through a proactive, community-centred approach that facilitates targeted education/awareness programs, improves referral pathways/access, enables a community-led response, and delivers skills building relevant to core life skills.

Area: Education
Concept: Community Needs Assessment

An opportunity to educate service providers and funders about health needs of the community through a whole-of-community health assessment. Captures both qualitative and quantitative data on the current health status, needs, and issues, used to underpin the development of a Community Health Improvement Plan and provide evidence to support funding and resource allocation decisions.

Area: Infrastructure
Concept: Residential Drug and Alcohol Facility - Business Case Stage

Informed through a needs assessment, service gap analysis, demographic profiling and stakeholder input, the coordination of a business case in favour of establishing a residential drug and alcohol facility in Cloncurry Shire.

Area: Infrastructure
Concept: Key Worker Accommodation

The development of modern, sustainable short-term and long-term housing for health workers in the Shire, reducing the barrier to attracting and retaining key health workers. Secured through State-driven investment, delivering fit-for-purpose accommodation solutions that would otherwise be hampered by slow development rates, increasing demand, and limiting housing supply in the region.

Area: Infrastructure
Concept: Short Term Crisis Accommodation

A trauma informed, locally responsive, and systems integrated provision of short-term crisis accommodation for those experiencing family and domestic violence. Designed to increase safety and immediate crisis support for those experiencing FDV, whilst reducing the incidence and severity of FDV through a culturally safe, community-trusted response.

INVESTMENT & PROJECT CONCEPTS:

Area: Services
Concept: Integrated Health Services Plan

A five-year plan specific to Cloncurry Shire (and not all of Northwest Queensland). Designed to outline how the various health services across the Shire will align, collaborate, and grow services to meet the changing community needs whilst making the most effective and efficient use of available and future resources.

Area: Services
Concept: Middle Ear Disease

Targeted, specialist service delivery to reduce the overwhelming yet preventable incidence of middle ear disease and other hearing conditions in Aboriginal and at-risk children in Cloncurry Shire. To review existing outreach programs and mobile ear health clinics, mobilising a local and out-of-region response that offers a continuity of care model to children and young people in schools, daycares, kindergartens and playgroups.

Area: Services
Concept: A Private, Mobile Dentist – A Regional Approach

A regional partnership model with multiple government LGA's and vested stakeholders (mining sector, key industries), sharing the costs of attracting a private, mobile dentist to service the broader region. Removes the reliance on the public health system and pools funds together to allow a greater financial incentive/support package to attract a private dentist who can service residents across multiple LGA's.

Area: Workforce
Concept: 'Grow Your Own' Health Workforce

A place-based workforce development model that focuses on attracting, developing, and retaining local residents in health careers. Looks at the short-term opportunity of upskilling, redirecting, and development of working age residents into health careers whilst also engaging young people and First Nations residents to enter and succeed in employment specific to health.

Area: Workforce
Concept: Rural Generalism

Supporting the specific training of existing health workers into rural generalism, who are then able to provide a broad scope of medical care in a rural context. Enables locally responsive care across a wider range of health disciplines, with a system of care that is aligned and responsive to the needs of the community. Consider possible pathways for both Allied Health and Medicine.

Area: Workforce
Concept: Attracting Healthcare Professionals to Cloncurry

An external facing campaign to support and retain a skilled, sustainable health workforce in Cloncurry Shire by addressing barriers to rural recruitment and building a locally relevant, supportive ecosystem. Required to consider a number of factors that will strengthen the overall impact and attraction success including incentives/support, lifestyle and community promotion, professional infrastructure and opportunity, and narrative/purpose.

APPENDICES

HEALTH WORKFORCE

SHIRE OF CLONCURRY

Cloncurry Multipurpose Health Service:

Provides rural and remote hospital services, operating as a multipurpose facility delivering inpatient services, residential aged care, allied health, and community health. Also operates an emergency department and outpatient department.

Performance:

(Quarterly insights for period July to September 2024)

- Number of beds – 17
- Patient admissions – 171
- Non-admitted patient services provided – 1,177
- Emergency arrivals – 1,119 (205 – children under 15 yrs)
- Overnight admissions – 90

Workforce:

- Doctors – 4 (3.0 FTE)
- Nurses and Midwives – 42 (34.13 FTE)
- Allied Health – 1 (1.0 FTE)

District of Workforce Shortage for Specialists:(Yes = Regional Shortage)

Anaesthetics – Yes

Cardiology – Yes

Diagnostic Radiology – Yes

General Surgery – Yes

Medical Oncology – Yes

Obstetrics and Gynaecology – Yes

Ophthalmology – Yes

Psychiatry – Yes

Dental – Yes

IIMGs/FGAMS – Yes

Bonded Doctors – Yes

NATIONAL WELLBEING RANKINGS: SHIRE OF CLONCURRY

Bottom 10% Nationally:

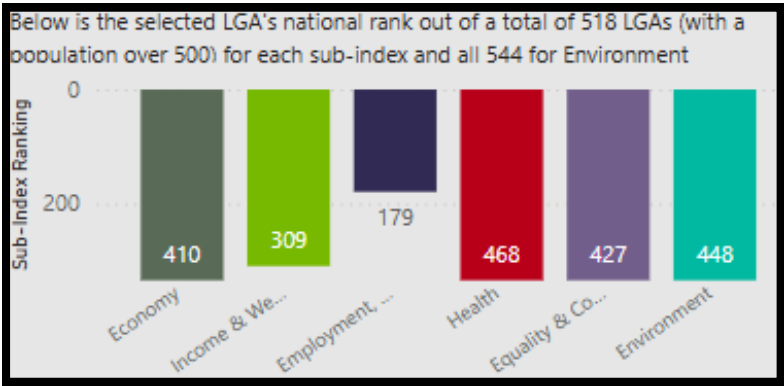
- Health (Ranked 468th)

Bottom 20% Nationally:

- Environment (Ranked 448th)
- Equality and Community (Ranked 427th)

Bottom 30% Nationally:

- Economy (Ranked 410th)



Local Health Services and Facilities:

- **BlueCare:** In-home, retirement and aged care provider, delivering a range of community-based services including home care, dementia care, palliative care, personal care, respite care, medical supervision, domestic assistance meals, personal support, and transport support.
- **Centacare:** Provides a range of key services including community support, counselling, family intervention and support, youth support, and community engagement initiatives.
- **Centre for Rural and Remote Health, James Cook University:** Operates the Cloncurry Learning Centre to provide localised health workforce training, education, and student accommodation to support students undertaking rural placements.
- **Cloncurry Community Health Centre:** Operated by NWHHS, it provides a range of community-based health services that support the wellbeing of residents and surrounding areas. Services include general health, community health, and outreach services for visiting specialists.
- **Cloncurry Justice Association:** Community led organisation that supports the justice needs of the community, offering support to both victims and offenders, facilitating reintegration, and promoting self-determination, particularly among Aboriginal/Torres Strait Islander peoples.
- **Cloncurry Pharmacy:** Locally owned and operated chemist.
- **North and West Remote Health:** Operates from the Cloncurry Health Precinct, providing a range of allied health, mental health and wellbeing, home and community supports, NDIS services, and carer support.
- **North West Hospital and Health Service:** The largest public health provider in the region, providing a comprehensive range of clinical and community health services.
- **PCYC Cloncurry:** A community hub offering a range of youth engagement, fitness, and community development programs that foster wellbeing and active lifestyles.
- **Ramsay Street General Practice:** A private, mixed-billing clinic. Serves as a key healthcare provider of GP and allied health services to the local community.

A number of services also operate that are responsible for contributing to the health and wellbeing outcomes of Cloncurry Shire. These include:

Royal Flying Doctor Services; Dept. of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism; Dept. of Families, Seniors, Disability Services and Child Safety; Cloncurry State School; St Andrews Church Cloncurry; Wellways Australia; Rainbow Gateway; The Care Tribe; Lives Lived Well; 54 Reasons; Aged and Disability Advocacy Australia; Queensland Corrective Services; QulHN; Dept. of Justice; Dept. of Housing and Public Works; Selectability; James Cook University; DV Connect; Mitakoodi Elders Council; Australian Physiotherapy Association; Western Queensland PHN; Salvation Army; Tafe QLD; Dept. of Youth Justice and Victim Support; Outback Futures; Services Australia; and Headspace.

COMMUNITY WORKSHOP

On Tuesday the 11th of March, the diverse intersects of the Cloncurry Shire community came together to discuss priority health planning matters for the Shire. With 33 individuals in attendance representing Council, health services, key industry/employers, education providers, and wider community, this thought provoking, priorities mapping, and solutions focused workshop covered a range of considerations, including:

- A performance review of the 2022-2024 Community Health Vision
- Mapping the biggest health gaps/health related issues that need to be addressed for Cloncurry Shire
- The possible solutions to the gaps and issues identified
- What actions need to be started NOW in order to make progress
- Hypothetical Planning: A NEW hospital for Cloncurry

PERFORMANCE REVIEW: 2022 – 2024 Community Health Vision

Each of the tables were asked to review the overall performance of the 2022 – 2024 Community Health Vision. As a fast-paced review exercise, attendees had to give a grading against each of the actions listed, reflecting the extent of progress made, as well as an overall grading:

The overall grading given by the tables varied from a C through to an E, reflecting a consensus that many of the action items underperformed, and more work was required.

PRIORITY	GRADE (A to F)	COMMENTS	CRITICAL
Age services	B/C	My aged care difficult to navigate, but care is good	High
Centres	F	More service provision	
Drug/alcohol/DOC	D	More support infrastructure	High
Long schools-based	D	No voluntary centre, just rely on school	High
Health and therapy infrastructure	D	Need health service provision	
Port, after school vacation care, aged care, allied health	D	More service provision required	
	A		Critical
Need health, and medical staff	D	Post opening hours	Critical
In community facilities (shops, more facilities)	D	Limited having avail.	Critical
With positions – dental, social worker, nurses, etc	F	Transition workforce	
Use to support medical appointments, school, aged care	F	Trans only	High
Wellbeing activities, drop-in centres, activity hub, mental assessment and intervention support	B/C	More support, allow to accept services, no child & youth services (after school), JCYC require additional support, literacy	
Prevention – speech therapy, occupational therapy, mental	F	More permanent locally based positions	High
In longer planning and recruitment/retention certainty	C	Monthly cycles continued	
Living, accommodation, infrastructure, transport, and	F	Too many senior staff, almost no staff, no child & youth services (after school), JCYC require additional support, literacy	
Priority and dialysis plans, progress dentistry	D	Need training, dentistry recruitment	
Population – increasing permanent residents through	E	Housing dependent	

Part A
Men - represented in health - not enough resources for men
Solutions
- advocacy for men's mental health
- men's shed
- dads group
Pre + Post Natal Care - not enough + Post natal depression
Aged care + transition to care → Palliative care
→ Aged care facilities
→ no supported living (in-home support)
Communication between services
Problems getting adequate referrals for services
- particularly for children needing specialist care
Lack of access to specialist care locally + limited patient transport (or knowledge of services)
Dentist waitlist
Local trend
"Health is a negative in Cloncurry"

WIDER DISCUSSIONS:

Covering off the three main discussion points for the workshop, the following reflections and priorities setting was captured across the various tables.

Key Issues:

- Aged Care: Lack of facilities, gaps in home-care options, concerns about how to support ageing population long term, transition to care options inadequate/unclear.
- Mental Health: Most notably the rise of Men's mental health as a major gap, and for younger residents, inadequate pre/post-natal mental health care, general lack of accessible mental health supports/services.
- Access to Specialist Care: Limited paediatricians, dentists, and allied health, long wait lists and referral issues, especially for younger children, lack of transport and patient accommodation to access regional specialists, unaffordable for many as well.
- Service Awareness/Systems Navigation: Community confusion around services available in community and how to access, need someone to help connect the dots locally.
- Workforce: Need to balance local staffing and the reliance on out-of-region/fly-in, recruiting and retaining healthcare professionals needs to be better understood, accommodation shortages for key workers.
- Health Literacy and Perception: Health seen as a negative or too hard in Cloncurry, lack of culturally appropriate communication, low level of service trust in community.
- Infrastructure/Technology: Need to increase presence of tech-enabled health, limited infrastructure to support integrated care, need more proactive health infrastructure/services.
- Broader Determinants: Food security, transport, affordable housing, healthy lifestyle factors.

Possible Solutions/Actions:

- Increased partnership working and service delivery locally (Blue Care, Mitakoodi, etc.)
- Invest in accommodation units for increased aged care provision
- Establish a community connector role to help residents access services
- Advocate for men's mental health programs in the region (Men's Shed, Dads Group)
- Invest in local-to-region pre-and-post-natal support
- Train local workforce to increase supply of localised delivery
- Improve referral pathways and system navigation for locals
- Build a central directory of services and educate community better on what's in town
- Provide incentives and accommodation to attract resident health professionals
- Explore grow-your-own workforce modelling for health and allied health careers

Emerging Priorities for Immediate Action:

- Advocate for aged care investment to increase amount of provision / unlock land for use
- Develop a community connector role, either through Council or through a service provider
- Improve service directories and communication about public health information
- Strengthen advocacy efforts for locally based health workforce
- Train/upskill existing health workforce in the region
- Address mental health with visible, practical supports

SCHOOLS WORKSHOP

On Tuesday the 11th of March, The Social Planners connected with Cloncurry State School, engaging later years high school students in discussions and priorities mapping around a number of health and wellbeing considerations for the community. Approximately 40 students were in attendance at the session.

Top 5 things impacting overall health of young people (cumulative results):

- Family
- Housing
- Mental health
- Social connections/isolation
- Food security

Biggest health challenges facing the Cloncurry community:

- Heart disease
- Cancer (skin cancer)
- Mental health/wellbeing
- Drug and alcohol misuse
- Access to specialist care

Most prevalent 'Risky Behaviours' in Cloncurry:

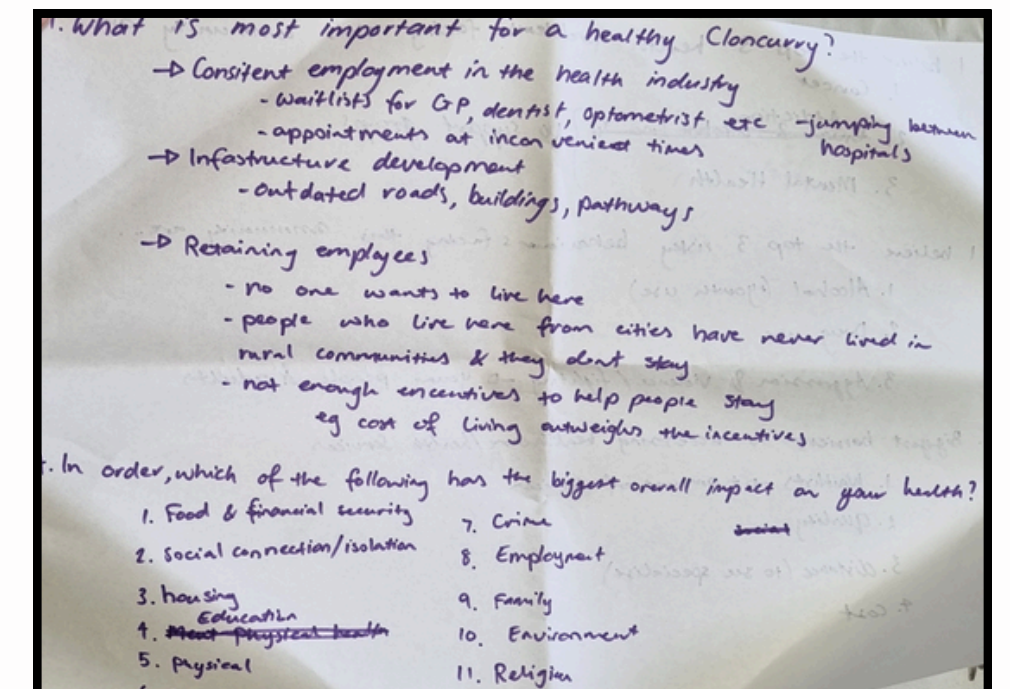
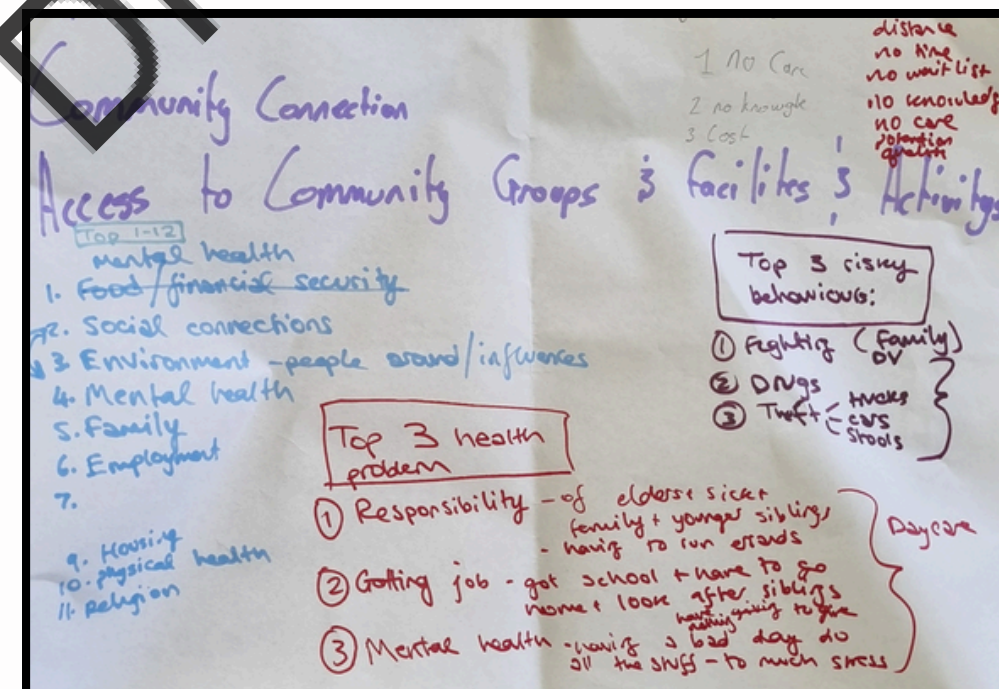
- Drug and Alcohol use
- Vaping
- Domestic Violence
- Youth Crime
- Understanding of health needs / preventative health

Biggest barriers to accessing health services:

- Amount of services / long waitlists
- Quality of local care
- Distance to access out of region services
- Costs
- Perception in community around their health needs

What is most important for a healthy Cloncurry?

- Health education/awareness
- Things for people to do
- Quality, affordable housing
- Access to specialist care and GP's
- Healthy food options in town
- Range of community activities / recreational opportunities
- Measures in place to tackle youth crime
- Consistent employment into health industry to build health workforce locally
- Infrastructure development (roads, buildings, services)
- Retain employees - make it attractive to live in Cloncurry, incentives to attract and retain
- Reduce the burden of carers responsibilities on young people in the family home
- Tackle domestic and family violence
- Support young people into local employment



COMMUNITY SURVEY

A survey was coordinated to understand local perceptions of health, access to services, and community health priorities across Cloncurry Shire. The findings are to help inform horizon planning for health infrastructure, services, and workforce needs for the community.

Total Respondents: 46

Respondent Types:

- Residents (72%)
- Healthcare workers (13%)
- FIFI/DIDO (4%)
- Community representative (11%)

Length of connection to Cloncurry:

- 10+ years (52%)
- 6 – 10 years (11%)
- 1 – 5 years (33%)
- Less than 1 year (4%)

Demographics:

- 74% of respondents were female
- 9% identified as Aboriginal or Torres Strait Islander

Health & Service Experience:

- 64% of respondents rated their health as good or excellent
- 100% reported in being very or somewhat active in managing their health
- 72% were at least partially aware of available services in the community
- 56% had delayed or avoided care at least once due to barriers such as cost, distance, lack of local providers, or a negative past experience
- Nearly half the respondents travel outside Cloncurry for routine checks, whilst 62% travelled out of region at least somewhat regularly for health care.
- In accessing services, over 58% were via GP referral, whilst other pathways (community health, online info) are less utilised.

Priority Health Challenges (Top 5):

Based on a multiple-choice response, the top 5 priority health challenges were identified as:

- 1.Dental – 81%
- 2.Access to health services – 70%
- 3.Specialist care – 65%
- 4.Mental health support – 49%
- 5.Hearing – 30%

Top Services Most Difficult to Access:

- 1.Specialist Care – 78%
- 2.Primary health care (GPs, Nurses, Dentists, etc.) – 57%
- 3.Allied health services – 49%
- 4.Mental health – 46%
- 5.Community health – 32%

COMMUNITY IDENTIFIED HEALTH PRIORITIES

Health Infrastructure Projects (in ranked order):

- 1st: Securing a community health hub in Cloncurry
- 2nd: Lobbying State Government to deliver a new hospital for Cloncurry
- 3rd: Aged Care infrastructure
- 4th: Domestic violence accommodation
- 5th: Proactive/preventative health infrastructure (community/recreation facilities, open spaces)

Services Projects (in ranked order):

- 1st: Increased mental health services
- 2nd: Integrated services planning
- 3rd: Substance misuse/addiction programs (Drugs, Alcohol, Gambling)
- 4th: Indigenous/First Nations health services

Health Access Projects (in ranked order):

- 1st: Improving access to current services
- 2nd: Community transport solutions
- 3rd: Strengthening communication of what health services are in the community
- 4th: Improving residents understanding of their health needs
- 5th: Health education and health literacy programs

Health Workforce Projects (in ranked order):

- 1st: Attracting health professionals to live and work in Cloncurry Shire
- 2nd: Upskilling existing health care professionals
- 3rd: Attracting out of region specialists to deliver outreach services in Cloncurry Shire
- 4th: Developing a local to region, culturally responsive workforce

ACKNOWLEDGEMENTS:

The development of the 2025 - 2028 Community Health Vision has been made possible through the many individuals, organisations, and services providers who have generously committed their time, knowledge, and experiences to shape a shared vision for the health and wellbeing of Cloncurry Shire.

The vision represents the collective aspirations for the community and reflects the strength, resilience, and insights of all those who live and work across Cloncurry Shire.

DRAFT

PRODUCTION

The 2025 - 2028 Community Health Vision was produced by specialist planning consultants The Social Planners, undertaken in partnership with staff at Cloncurry Shire Council.

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