

Summaries were developed from the 2017 Needs Assessment and were used to inform engagement with key stakeholders. It is considered the resulting engagement was much more meaningful and detailed than much more general top-of-mind responses usually elicited through generic surveys and discussions.

It is proposed that in 2018 summaries will be used as the basis for engagement, including an online engagement campaign with the broader community and service sector. These summary topics were presented to the Community Advisory Council (CAC) who gave their feedback.

Topics for which summaries were developed:

- Older Adults
- Aboriginal and Torres Strait Islander Health
- Cancer
- Chronic Disease
- Immunisation
- Persistent Pain
- Primary Health Care System
- Alcohol and Other Drugs
- Mental Health Aboriginal and Torres Strait Islander Health
- Mental Health Hard to Reach
- Mental Health Low Intensity
- Mental Health Severe and Complex
- Mental Health Suicide
- Mental Health Youth and Children

Prior to the CAC meeting, the following feedback had already been received:

- **Older Adults** should be split into **Older Adults** and **End of Life Planning**
- **Immunisation** should be expanded to become **Communicable Diseases**
- There should be a new topic of **Perinatal and Early Childhood**
- There should be a new topic of: **Social Disadvantage**, which would include **Homelessness, Domestic Violence** and **Poverty**



100% of CAC members agreed that **OLDER ADULTS** should be split into **OLDER ADULTS** and **END OF LIFE PLANNING** providers as examples.

100% of CAC members agreed that **IMMUNISATION** should be expanded to become **COMMUNICABLE DISEASES**.

100% of CAC members agreed that there should be a new topic called: **SOCIAL DISADVANTAGE** which includes **HOMELESSNESS, DOMESTIC VIOLENCE** and **POVERTY**.

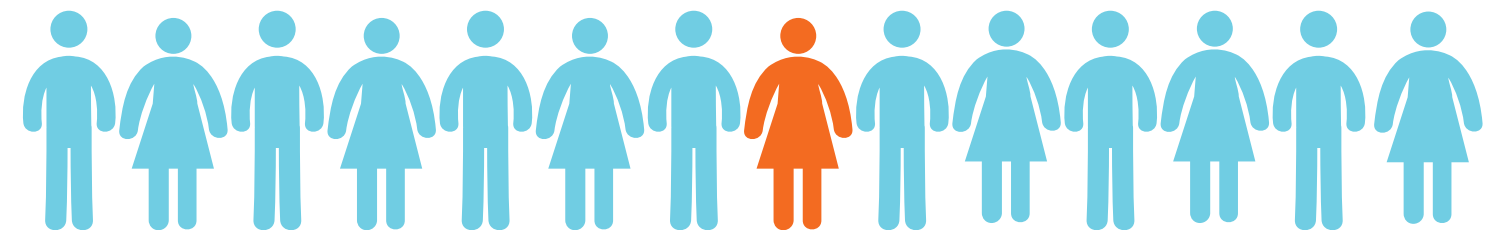
What else did CAC members have to say about the Scoping for 2018 Needs Assessment?

Some CAC members suggested that more descriptive and inclusive wording could be used for the new **Social Disadvantage** topic such as disability, youth disadvantage or youth at risk.

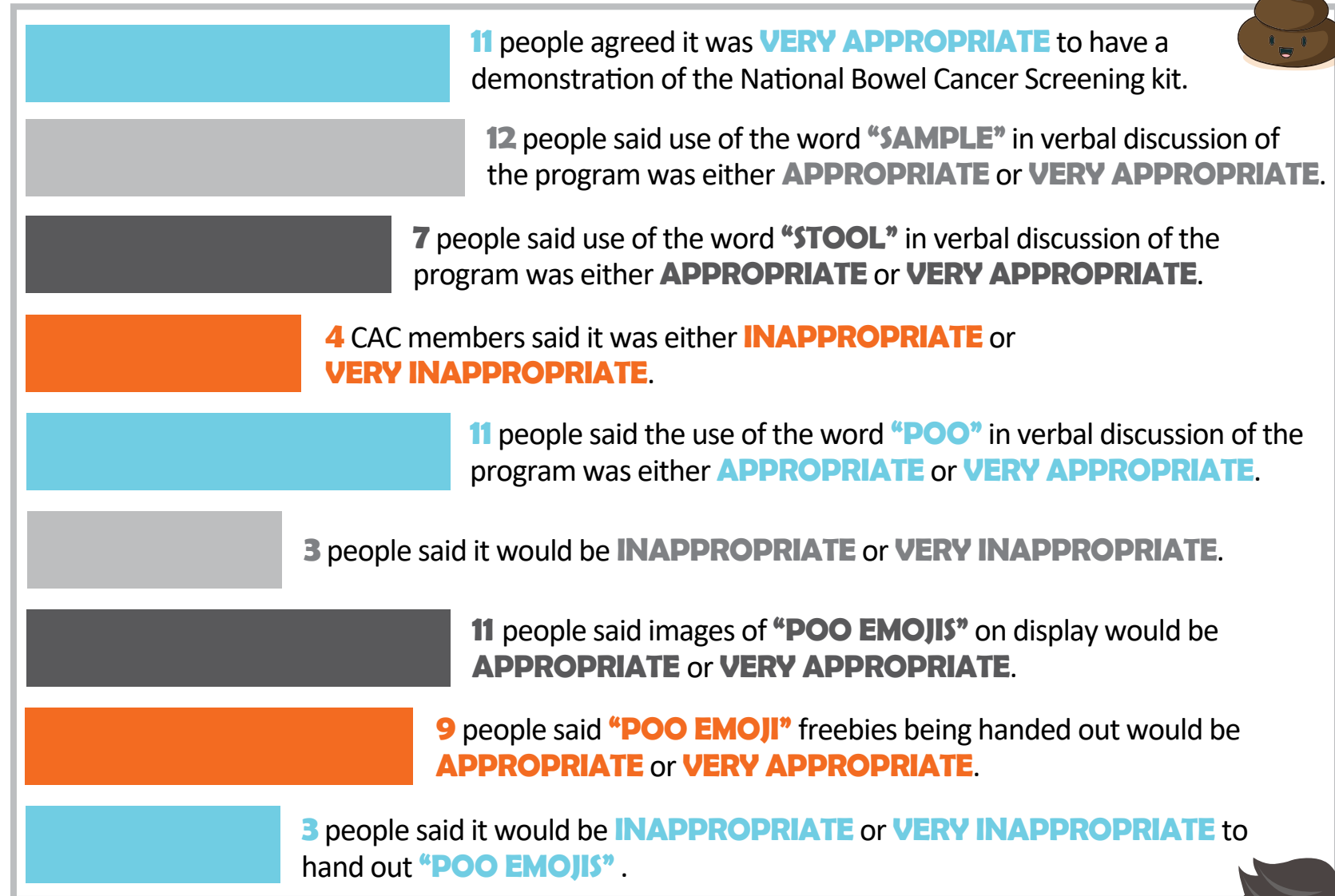
CAC members stressed the importance of **social disadvantage** becoming a priority area, and the need for **homelessness, living in poverty** and **illicit drug use** to be addressed in this category.

14 out of 15 CAC members

agreed that there should be a new topic of **PERINATAL AND EARLY CHILDHOOD**



Community Advisory Council (CAC) members were presented with information and presentations on bowel cancer screening and asked for their feedback and opinions around promoting awareness and understanding of bowel cancer screening. CAC members were asked to rate the appropriateness of each of the options below, with 1 being very inappropriate and 5 being very appropriate.



CAC members made some suggestions on ways to promote awareness and understanding of bowel cancer screening target groups/eligibility:

- » Advertising e.g. free local newsletters, social media, posters and brochures in shopping centre toilets, community centres and libraries
- » Media e.g. television, social media, SMS messages, fridge magnets, magazines
- » Visual learning in primary schools and high schools, with the recommendation of “poo” language to be used with younger age groups only
- » Personal testimonies e.g. sports identities and people who have had bowel cancer
- » GPs should include it as a topic for discussion with patients during yearly physical (e.g. men’s over 50)
- » Pass on information to people when they are having other regular tests done i.e. breast screening
- » Through senior’s magazines and senior’s clubs

What else did CAC members have to say about bowel cancer screening?

- » Some CAC members suggested that the word “defecate” might be unknown/misunderstood.
- » Some CAC members suggested that the word “stool” be replaced by “poo” or removed from resources for older people. It was suggested that the word “poo” only be used with younger age groups.



93% of CAC members **AGREED** having one or more **SEALED** National Bowel Cancer Screening kit/s on display would be **APPROPRIATE** or **VERY APPROPRIATE**.

The majority of CAC members **AGREED** that having the **CONTENTS** of the National Bowel Cancer Screening kit/s on display would be **APPROPRIATE** or **VERY APPROPRIATE**.

To achieve greater participation levels in the National Bowel Cancer Screening Program (NBCSP), the Community Advisory Council (CAC) recommended the below actions be passed onto the NBCSP.



RECOMMENDATIONS TO NBCSP:

1 SMS reminders to be sent to kit recipients around the time the kit is received.



2 Pre-print the participant's name on the sample tube stickers to streamline the process.

3 The issue of inappropriate colonoscopies as a screening method be raised at the Clinical Council and this was done on 19 April 2018.



4 Participant inquiry mechanisms within the NBCSP are reviewed as some CAC members had experienced poor communication when making inquiries - this has potentially had a negative impact on the reputation of the program.