

# SUNSHINE COAST HEALTH

REGIONAL NEEDS ASSESSMENT (RNA)  
REPORT 2024



## ACKNOWLEDGEMENT OF TRADITIONAL CUSTODIANS

Sunshine Coast Health respectfully acknowledges the Traditional Custodians, the Kabi Kabi (Gubbi Gubbi) and Jinibara people on whose land we provide our services.

We also pay our respects to the Aboriginal and Torres Strait Islander Elders, past, present, and future and recognise the strength and resilience that Aboriginal and Torres Strait Islander peoples and their ancestors have displayed in laying strong foundations for the generations that follow.

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## Introduction

The Sunshine Coast (SC) is a highly desirable place to live, work and play with a thriving community that is rapidly growing and showing no signs of slowing. People are continuing to choose the Sunshine Coast to retire to and newer migration trends piqued during the COVID-19 pandemic have sustained.

As the population and demographic profile of the region evolves, so too does its healthcare needs, particularly in relation to services. The Sunshine Coast has an increasing population, who are living longer, with increased chronic health conditions and comorbidities. This new patient paradigm is resulting in a population that requires greater access to a broader range of healthcare services and who is engaged with the healthcare system for longer periods of time.

This Sunshine Coast Health Regional Needs Assessment 2024 (SCH RNA) has been written by the Sunshine Coast Health (SCH), in consideration with key stakeholders.

## Purpose

The SCH RNA informs health service planning primarily by highlighting community health and service needs. This lens assists in identifying opportunities for service development, as well as exploring new innovative models of care and emerging technologies. Alongside existing integrated planning functions, the SCH

RNA will also guide decision making and drive implementation.

The SCH RNA assures the Sunshine Coast community that the challenges it faces are recognised and being actively managed. It provides a detailed and comprehensive overview of needs experienced across the region. It does not attempt to describe all priorities specific to and felt by all populations. It is current at the date of publication and acknowledges that health and service needs will continue to adapt and change as our population transforms and grows.

The Queensland-Commonwealth Partnership (QCP) Joint Statement articulates a shared commitment to Queensland's health system and highlights the priority of joint planning. It is intended the SCH RNA will, in parallel with the Country to Coast Queensland (CCQ) Health Needs Assessment (HNA) inform the inaugural Joint Regional Needs Assessment (JRNA) in 2025.

## What is the SCH RNA?

The SCH RNA is a detailed evaluation and prioritised order of the region's most pressing health and service needs. It is data driven and includes analysis gathered from multiple domains.



## Strategic Alignment

The SCH RNA reflects the strategic and operational goals of SCH and will be used alongside the following directional documents to inform local planning:

SCH Health Service Plan 2024-2034

SCH Strategic Plan 2022-2026

SCH Aboriginal and Torres Strait Islander Health Equity Strategy 2022-2031

SCH Research Strategic Plan 2021-2026

CCQ Health Needs Assessment 2024

### **The SCH RNA Process**

The development of the SCH RNA has involved a thorough and iterative process.

Information has been gathered from multiple sources, including public health statistics, health service data, service profiles, literature reviews, and consultation with stakeholders.

Input from key stakeholders—such as clinicians, consumers, health organisations, and ongoing engagement and collaboration with the PHN has enriched the data, providing valuable insights and context.

Triangulation of data identified trends and themes which were categorised into health and service related needs and then subsequently prioritised.

### **Methodology**

The methodology underpinning the SCH RNA process has involved a comparative data analysis - where available data, obtained from the 2022 Local Area Needs Assessments, as well as additional and updated data sets, have been examined alongside service availability and service utilisation data, and qualitative data.

Prioritisation of needs have been considered in the context of their magnitude, risk, and feasibility as well as their alignment to Government and/or Departmental direction.

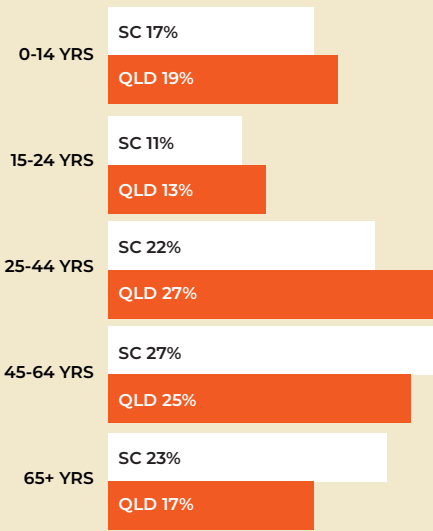
## Our region

The Sunshine Coast is located in South East Queensland, 100km north of Brisbane.

The SCH region encompasses three local council areas, made up of eight separate Statistical Areas Level 3 (SA3s), each with varying populations and unique geographical and socio-economic characteristics. The SA3s are Buderim, Caloundra, Gympie-Cooloola, Maroochy, Nambour, Noosa, Noosa Hinterland and the Sunshine Coast Hinterland.

## Our population

### Age Profiles 2022



**10,061** KM<sup>2</sup>

make up the Sunshine Coast region, incorporating coastal, hinterland and rural communities

**2.4%**

is the annual growth rate compared with 1.8% in Queensland from 2018-2023

**480,375**

people call the Sunshine Coast home and this makes up 9% of the total Queensland population

**7.0%**

of people need assistance with a profound or severe disability (QLD 6.0%)

**4,406**

babies were born within the Sunshine Coast region in 2022 (QLD 62,094)

**44.8** YRS

is the median age (QLD 38.6)

### Aboriginal and Torres Strait Islander population

**12,920**

people living in the Sunshine Coast Health region identify as Aboriginal and Torres Strait Islander peoples (2021)

**26** YRS

is the median age for the Aboriginal and Torres Strait Islander population on the Sunshine Coast

**2.8%**

of the Sunshine Coast Health population identify as Aboriginal and Torres Strait Islander peoples



## Resident population profile

Total current and projected population growth Sunshine Coast vs Queensland

Actual annual growth 2018 – 2023

SC **2.4%** QLD **1.8%**

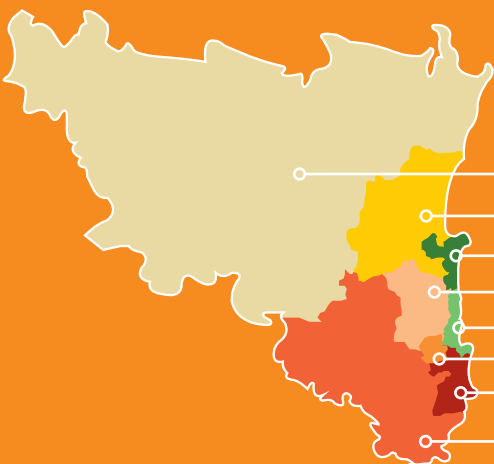
2018 – 427,697  
2023 – 480,375

Projected annual growth 2026 – 2036

SC **2.0%** QLD **1.6%**

2026 – 509,033  
2036 – 594,268

## Population growth



### Gympie/Cooloola

Population 2021: 53,749 / 2036: 59,477

**11% Growth**

### Noosa Hinterland

Population 2021: 24,520 / 2036: 28,212

**15% Growth**

### Noosa

Population 2021: 47,075 / 2036: 52,192

**11% Growth**

### Nambour

Population 2021: 50,618 / 2036: 62,338

**23% Growth**

### Maroochydore

Population 2021: 64,533 / 2036: 80,220

**24% Growth**

### Buderim

Population 2021: 59,796 / 2036: 65,190

**9% Growth**

### Caloundra

Population 2021: 97,290 / 2036: 152,621

**57% Growth**

### Sunshine Coast Hinterland

Population 2021: 59,669 / 2036: 94,018

**58% Growth**

**The Caloundra and Sunshine Coast Hinterland regions are projected to make up 42 % of the total population by 2036**

## Tourist population profile

As a popular tourist destination, the Sunshine Coast was host to approximately 4.5 million domestic and international visitors in the year to March 2024. Tourism can significantly impact Emergency Departments with SCH recording seasonal spikes in the number of presentations, particularly in the December and January school holidays.

## Socio-economic profile

# 3.4%

of SC residents are unemployed, QLD 4.0% (decreased by half for SC from 6.8% in June 2021)

# 4.0%

of SC residents live in crowded dwellings, QLD 5.6%

# 1,743

SC residents are homeless which is increasing, QLD 22,444

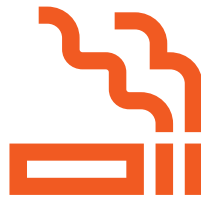
## Health risk factors

More than half of the Sunshine Coast population (58%) are overweight or obese with a high proportion of adults challenged by insufficient physical activity (37%) and insufficient consumption of vegetables (90%).

From a preventative health perspective, bowel and breast cancer screening rates have dropped over the past two years and risky alcohol consumption rates are higher, compared to the rest of Queensland.



**Overweight or obese**  
SC 58%, QLD 60%



**Daily Smoking**  
SC 9%, QLD 11%



**Alcohol consumption high risk**  
SC 28%, QLD 22%



**Insufficient physical activity in adults**  
SC 37%, QLD 42%



**Insufficient consumption of vegetables**  
SC 90%, QLD 92%



**Drop in Bowel and Breast Cancer screening rates; approx 3 to 5% respectively**

Burden of disease

Arthritis

**13.0%** 10.7%  
SCH QLD

Cancer

**4.6%** 3.7%  
SCH QLD

Heart Disease

**5.8%** 5.0%  
SCH QLD

Lung Conditions

**2.8%** 2.5%  
SCH QLD

Stroke

**1.4%** 1.2%  
SCH QLD

Disability

**6.4%** 5.8%  
SCH QLD



# Regional profiles

The SCH region spans over 10,000 square kilometres, encompassing eight SA3s, unique in their geographic and demographic profile and with distinct factors that contribute to the health and service needs within each.

The southern corner of the region is currently experiencing rapid population growth across the lifespan, however, in the newer development areas of Baringa and Nirimba an increase in younger families moving to the area is expected. As these communities are only just forming, it is challenging to gauge their demographics. In contrast, the northern and hinterland areas of the region are experiencing slower population growth, however, due to their demographics; they register high relative need with larger older persons, and priority populations.



**Caloundra** (Buddina to Pelican Waters and inland to Baringa and Nirimba)

**Population 2021: 97,290**  
**Median age of 43.8 years (QLD 38.6 years)**

Caloundra is the fastest growing and highest populated of all regions. It has a higher population density and a higher proportion of Aboriginal and Torres Strait Islander residents aged 0-14 years.

### Caloundra health status and risk factors

- Higher rate of physical activity
- Lower rate of smoking
- Higher rate of lifetime risky drinking
- Higher rate of arthritis and cancer



**Gympie-Cooloola** (Gympie and surrounds, Kilkivan and Cooloola Coast)

**Population 2021: 53,749**  
**Median age of 48.3 years (QLD 38.6 years)**

Gympie-Cooloola is the largest and most rural geographical region. It has the highest proportion of Aboriginal and Torres Strait Islander residents and the highest level of socioeconomic disadvantage.

### Gympie-Cooloola health status and risk factors

- Higher rates of overweight, obesity and chronic disease
- Higher rate of smoking and insufficient physical activity
- More developmentally vulnerable children
- More people living with a disability
- Higher rate of homelessness



**Sunshine Coast Hinterland** (Hinterland areas from Beerburrum to Kenilworth)

**Population 2021: 59,669**  
**Median age of 43.7 years (QLD 38.6 years)**

The Sunshine Coast Hinterland is the second largest geographical and second fastest growing region with the southernmost reach. It is projected to have the largest growth for residents aged 85+ years to 2031.

### SC Hinterland health status and risk factors

- Higher rates of overweight and obesity
- Higher rates of insufficient physical activity
- Higher infant mortality
- Lower rate of childhood immunisation
- Higher percentage of premature deaths



**Nambour** (Nambour and surrounding suburbs from Eumundi to Bli Bli)

**Population 2021: 47,075**  
**Median age of 41.4 years (QLD 38.6 years)**

Nambour is home to a younger demographic with the highest proportion of residents aged 0-14 and 25-44 years and the lowest proportion of residents aged over 65 years. Nambour has higher levels of socioeconomic disadvantage.

### Nambour health status and risk factors

- More people living with a disability
- Higher fertility rate
- Higher rate of mental health conditions
- Lower proportion of residents accessing primary health
- Higher rate of homelessness



**Maroochy** (All coastal areas from Coolum to Mooloolaba)

**Population 2021: 64,533**  
**Median age of 46.1 years (QLD 38.6 years)**

Maroochy has the lowest proportion of residents aged 0-14 years and the equal highest proportion of residents aged 25-44 years. It has a higher population density and a higher proportion of Aboriginal and Torres Strait Islander residents aged 55+ years.

#### **Maroochy health status and risk factors**

- Higher rate of lifetime risky alcohol consumption
- Higher financial hardship
- Lower rates of insufficient fruit and vegetable consumption
- Lower fertility rate
- Higher median age of death



**Buderim** (Buderim, Mountain Creek and Sippy Downs)

**Population 2021: 59,796**  
**Median age of 41.1 years (QLD 38.6 years)**

Buderim has the lowest median age, the highest proportion of residents aged 15-24 years and lower levels of socioeconomic disadvantage.

#### **Buderim health status and risk factors**

- Higher rates of risky lifetime drinking
- Lower rate of childhood immunisation
- Lower rate of unemployment
- Higher rate of insufficient fruit and vegetable consumption
- Higher rates of low birthweight and preterm birth



**Noosa** (Tewantin, Noosa, Peregian Beach)

**Population 2021: 47,075**  
**Median age of 48.2 years (QLD 38.6 years)**

Noosa has the lowest proportion of residents aged 15-24 years, highest proportion of residents aged 65+ and the highest proportion of residents born overseas. Noosa has a lower level of socioeconomic disadvantage.

#### **Noosa health status and risk factors**

- Lower rate of overweight or obesity
- Lowest percentage of insufficient physical activity
- Lower rate of developmentally vulnerable children
- Lower rates of breast cancer screening
- Lower rate of childhood immunisation



**Noosa Hinterland** (Hinterland areas from Cooroy to Kin Kin and coastal to Cootharaba)

**Population 2021: 24,520**  
**Median age of 48.9 years (QLD 38.6 years)**

Noosa Hinterland has the highest proportion of residents aged 45-64 years and is projected to have the second largest growth of residents aged 85+ years by 2031.

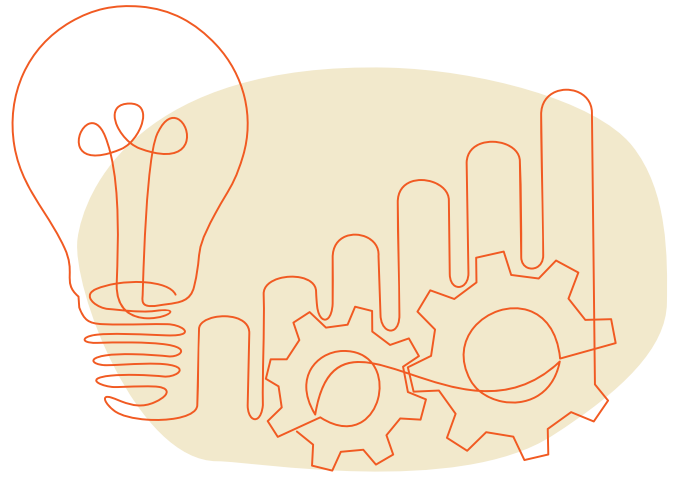
#### **Noosa Hinterland health status and risk factors**

- Higher proportion of smokers
- Lower rate of childhood immunisation
- Higher proportion of high birth weight
- Higher rate of suicide
- Higher rate of people living in a severely crowded dwelling

## Prioritisation

A combination of techniques were utilised to deliver a robust prioritisation of health and service needs across the Sunshine Coast. Lenses and criteria that informed the prioritisation process included:

public health statistics, health service data, literature reviews, magnitude of need, risk profile, feasibility, Government and/or Departmental direction.



## Health and service needs

- 1 - Planned care service availability
- 2 - Health service access for people living in regional and rural areas
- 3 - Access to tertiary level care
- 4 - Comprehensive and holistic cancer care, across the continuum
- 5 - Services and coordination to support adults with highly complex care needs
- 6 - Access to primary care services
- 7 - Aboriginal and Torres Strait Islander services
- 8 - Mental health care delivery across the lifespan
- 9 - Integrated care for older patients with dementia and delirium
- 10 - Access to specialist paediatric services, including developmental and surgical services
- 11 - Integrated maternal and infant care
- 12 - Integrated care for older patients with age-related health needs
- 13 - Connected care for people with disabilities
- 14 - Better access to emergency and urgent care
- 15 - Comprehensive trauma services
- 16 - Women's health and wellbeing services and support
- 17 - Palliative care services, across all stages of illness and alongside curative treatments
- 18 - Chronic disease detection and management
- 19 - Primary prevention and management of risky health behaviours
- 20 - Access to oral health services



# HEALTH NEEDS PRIORITISATION 2024

Identified needs in order from 1 (highest need) to 20 (lowest need) – data correct at time of development

## 1 Planned care service availability

*Timely access to planned care services, including increased access to elective surgery, outpatient and endoscopy services.*

**20,359**

patients are currently waiting out-patient services, 31% of patients are waiting longer than the clinically recommended time

**2,746**

Ear, nose and throat speciality have the highest number of outpatients on the waitlist, followed by orthopaedics (2,144) and ophthalmology (2,064)

**5,342**

ready-for-care patients are currently waiting for elective surgery

## 2 Health service access for people living in regional and rural areas

*A focus on the Gympie-Cooloola catchment.*

The Cooloola and Kilkivan SA2s are the furthest distance from any hospital

**82mins**

Residents from the Gympie-Cooloola SA3 have an average travel time of 82 minutes to the nearest tertiary hospital

**371,845**

total specialist outpatient service events (OSE'S), 15% were for residents from the Gympie-Cooloola SA3 in FY 23/24

## 3 Access to tertiary level care

*Advanced surgical procedures, complex cancer care treatments and high-risk neonatal care.*

**1,271**

SCH patients attended an outpatient service event at Royal Brisbane and Women's Hospital (RBWH) for neurosurgery in FY 22/23

**294**

SCH patients were treated as an inpatient at RBWH for neurosurgery FY 22/23

**355**

SCH patients were treated between RBWH and The Prince Charles Hospital (TPCH) for cardiac and thoracic surgery in FY 22/23

**16**

SCH high-risk neo-natal patients (29+ weeks gestation) were treated at RBWH in FY 21/22

## 4 Comprehensive and holistic cancer care, across the continuum

*Provision of comprehensive cancer care services, closer to home, including diagnostic imaging, chemotherapy and radiotherapy, surgical oncology, targeted Aboriginal and Torres Strait Islander services, and supportive care including pain management, psychological support and survivorship support.*

Higher incidence of new cases for haematological, gynaecological, endocrine and other invasive cancers compared to QLD

Cancer is one of the leading causes of death for Sunshine Coast residents

## 5 Services and coordination to support adults with highly complex care needs

*Highly complex care needs taking in multimorbidity, condition severity, mortality risk, as well as multiple socio-economic and behavioural characteristics.*

### 4.2 per 100

people in the Gympie-Cooloolo SA3 self-reported three or more long term conditions, compared to the QLD rate of 3.4 per 100 people, in 2021.

Premature death (before age 75) accounted for 38% of Sunshine Coast Hinterland SA3 and 37% of Gympie-Cooloolo SA3 resident deaths in 2022, compared to 34% for QLD.

The rate of homelessness per 100,000 people is 67 in the Gympie-Cooloolo SA3 and 57 in the Nambour SA3, compared to 38 for Queensland.

### 20%

of the SC population accessed General Practitioner (GP) chronic disease management plans in FY 22/23, compared to 16% for QLD.

## 6 Access to primary care services

*Initiatives that support and increase access to primary care, including post-discharge support for the ongoing management of chronic conditions, health assessments, vaccinations, investigations and management of minor illness and injury.*

### 414,355

SC residents were seen by a GP with 3,051,484 services recorded in FY 22/23

Residents aged 45-64 years accounted for the highest portion of patients (113, 594) and residents aged 65+ recorded the highest number of services (1,309,759)

Nambour SA3 had the highest percentage of people who did not see a GP (14%)

Gympie-Cooloolo have a lower GP to patient ratio which likely accounts for a higher emergency departments (ED) presentations of lower acuity

## 7 Aboriginal and Torres Strait Islander services

*Services and supports across the lifespan for Aboriginal and Torres Strait Islander patients.*

The Aboriginal and Torres Strait Islander population is upwards of 12,000 people approximately 2.8% of the total SC population

Almost half of the Aboriginal and Torres Strait Islander peoples are aged 20 years or under

The SC Aboriginal and Torres Strait Islander population is predicted to increase at a faster rate than the rest of the population

The SC Aboriginal and Torres Strait Islander population over represent in various conditions causing potentially preventable hospitalisations including ear, nose and throat infections, convulsions and asthma

## 8 Mental health care delivery across the lifespan

*Mental health care services ranging from, child and youth to adult and older persons.*

10% of SC residents visited a GP for mental health related diagnosis, treatment or planning in FY 23/24

Mental Health patients accounted for the 2nd longest length of stay patient cohort (20.3 days) in the year to May 2024.

Patients residing in the Sunshine Coast Hinterland and Nambour SA3s accounted for the highest portion of patients accessing GP services for mental health

## 9 Integrated care for older patients with dementia and delirium

*Specific services and supports for patients with dementia and delirium.*

**426**

admissions occurred across SCH for patients with dementia/delirium in FY 23/24 with an average length of stay of 11 days

Dementia was in the top two leading causes of death (of all SA3 except for Noosa Hinterland) from 2018-2022

## 10 Access to specialist paediatric services, including developmental and surgical services

*Services such as developmental paediatrics and tertiary medical and surgical services, including access to paediatric cardiology, respiratory, neurology, endocrinology and oncology and surgical specialties closer to home.*

**4,467**

outpatient service events occurred at Queensland Children's Hospital (QCH) for SCH patients in FY 23/24

Higher portion of developmentally vulnerable children reside in the Gympie-Cooloola and Noosa Hinterland SA3s

## 11 Integrated maternal and infant care

*Antenatal care, including inpatient and community-based prenatal, postnatal, birthing and neonatal services.*

**4,406**

Fertility rates are highest in Gympie-Cooloola and Nambour SA3s

births were registered across SCH in 2022

Number of births have increased across SCH due to higher population

## 12 Integrated care for older patients with age-related health needs

*Supporting older patients to navigate age-related health conditions across the care-continuum, including community and inpatient services that contribute to healthy ageing, hospital avoidance and smoother transitions between acute care and community based services, primary care and residential aged care facilities.*

SC has a generally older population 65+ (23%) compared to Queensland (17%)

SC is projected to experience rapid growth in the older age groups, 42% aged 70-84, and 83% aged 85+ between 2021 and 2031

## 13 Connected care for people with disability

*Actioning the Queensland Government response to the Disability Royal Commission. Working to co-design high quality and safe services and support for people with disability.*

**7%**

of the SC population were living in need of assistance with profound or severe disability in 2021, higher than the Queensland rate of 6%

Gympie-Cooloola SA3 had the highest proportion of people living in need of assistance with profound or severe disability (10%), followed by Nambour and Caloundra at 7%

**12,205**

SC residents were active participants in the National Disability Insurance Scheme (NDIS) as at March 2024

14

## Better access to emergency / urgent care

*Immediate treatment for non-life threatening conditions, in a walk-in and after hours /extended hours clinic context.*

Total of 183,406 presentations to ED across SCH by SC residents in FY 23/24

Caloundra SA3 residents accounted for 29% (53,899 presentations) of the above total of presentations

**42%**

of ED presentations were triage category 3 (urgent: not life threatening), followed by 32% triaged as category 4 (semi-urgent: not life threatening)

Of the total SCH ED presentations, 29% of patients arrived by ambulance

15

## Comprehensive trauma services

*Services for patients who experience significant traumatic injury within the SCH catchment from emergency medical response, to treatment and rehabilitation.*

Gympie-Cooloola had significantly higher rates of premature death from external causes (e.g., road traffic accident) compared to Queensland

External causes account for the highest number of potential years of life lost for residents in Gympie-Cooloola, Buderim, Nambour and Noosa Hinterland and the second highest for all other SA3.

16

## Women's health and wellbeing services and support

*Access to and support to navigate services in relation to; health screening, reproductive health, mental health and domestic violence.*

**3–5%**

drop in breast screening rates across the SC over the past 2 years

Mortality rates from gynaecological cancer and breast cancer were higher for residents of SCH compared to QLD in 2021

Approximately 85% of all Domestic Violence Order breach victims are female

17

## Palliative care services, across all stages of illness and alongside curative treatments

*End-of-life care planning, pain management, emotional, cultural and spiritual support as well as respite services for families delivered via specialised units and home care teams.*

Rise in demand for palliative care services

SCH palliative care admissions have increased by 44% over the past 4 years

**1,656**

admissions across SCH in FY 23/34

18

## Chronic disease detection and management

*Services that work in collaboration with Primary Care to support the detection and management of chronic disease across the lifespan.*

Chronic diseases contribute to a high burden of disease

Mental health conditions account for the highest portion of self-reported conditions followed by arthritis then asthma

Heart disease and cancer are among the leading causes of death

19

## Primary prevention and management of risky health behaviours

*A unified front in partnership with key stakeholders (incl. primary health care providers and State and Federal Government departments) - responding to behaviours i.e., alcohol and other drugs, smoking and vaping use.*

**58%**

of SC residents are overweight or obese

**37%**

of SC residents partake in insufficient physical activity

High smoking rates in Gympie-Cooloola (12%) and Noosa Hinterland (12%),

High risky lifetime drinking in Buderim (33%), Caloundra (30%), Maroochy (31%) compared to Queensland (22%)

20

## Access to oral health services

*Preventative, restorative and specialised services including orthodontics and periodontics.*

A total of 5,284 patients accessed oral health care at Caloundra Dental Services in FY 21/22

A total of 4,916 patients accessed care at Kawana Dental Services in FY 21/22

**16%**

of eligible children accessed public oral health services in FY 19/20

**12%**

of eligible adults accessed public oral health services in FY 19/20



## What next?

Insights garnered from the SCH RNA will be utilised to shape future planning conducted by SCH, both strategic and operational, as well as inform the direction and focus of future endeavours with key service delivery partners.

As the SCH RNA illustrates, health and service needs are often the result of many compounding factors. For many illnesses and health conditions, positive health outcomes do not occur as the result of siloed efforts, but rather as the result of the teamwork from a range of supports and services and by patients themselves being optimally engaged.

To address the SCH RNA's identified needs, SCH recognises the value of the layers of the health system working together and is committed to working with Country to Coast Queensland.

## Endorsement

Sunshine Coast Health  
Strategy and Planning Unit

Sunshine Coast Health  
Health Service Chief Executive  
Dr. Peter Gillies

Sunshine Coast Hospital and Health Board  
Board Chair  
Dr. David Rowlands OAM

## Data used in the development of this plan was obtained from the following sources:

Australian Bureau of Statistics

Cancer Alliance Queensland Dashboard

Commonwealth Government, Department of Health

National Disability Insurance Scheme Dashboard

Population Health Information Development Unit (PHIDU) Social Health Atlases

Queensland Government Statistician's Office (QGSO)

Queensland Health, Decision Support System

Queensland Health, Notifiable Conditions Annual Reporting

Queensland Health, Performance Dashboard

Queensland Health, Planning Portal

Queensland Health, System Performance Reporting

Queensland Health, The Health of Queenslanders: Report of the Chief Health Officer Queensland

Queensland Police, myPolice Queensland Crime Statistics

Queensland Reconstruction Authority, Disaster Funding Activations

Social Housing Register, Queensland Government Open Data Portal

Tourism and Events Queensland Dashboard

## Thank you to the following groups for their valuable contributions towards this plan:

Central Queensland Hospital and Health Service

Country to Coast Queensland

Country to Coast Queensland survey: My Healthy Community

Joint Needs Assessment Community of Practice

Mental Health Planning Branch

Sunshine Coast Public Health Unit

System Planning Branch

Wide Bay Hospital and Health Service

**Sunshine Coast**  
Hospital and Health Service



**Queensland**  
Government