HEALTHY NORTH COAST

NORTHERN RIVERS PRIMARY CARE

2022 Flood Reflections

November 2024

Acknowledgement of Country

Healthy North Coast acknowledges the Traditional Custodians of the lands across our region, and pays respect to Elders past, present and on their journey. We recognise these lands were never ceded and acknowledge the continuation of culture and connection to the land, sky and sea. We acknowledge the Bundjalung, Githabul, Yaegl, Gumbaynggirr, Dunghutti and Birpai peoples as the land's First Peoples and their rich diversity, history and culture.

CEO Introduction

It's been difficult to summarise our experience and reflections from the 2022 Northern Rivers floods. The data was imperfect, innovation undertaken was fast and furious and of course there were so many different players, including spontaneous volunteers from the community, who all played a role in assisting with response and recovery efforts.

It is hard to convey just how extreme the experience was and how this changes both your professional and personal perspective. Some parts of our region had neither groceries, fuel, electricity or internet or phone connections for weeks. I remember driving to work at the Lismore evacuation centre one day, through a myriad of dodgy back country roads as the main roads were still covered in water, when I saw a Woolworths delivery truck. I was so excited I cried. Extreme disasters have a way of changing you and your community.

Within the extremities, there was also heroism, innovation and a strong sense of community. Similar to catastrophic events throughout history, the floods carved a collective community consciousness marked by shared grief and trauma. There is now a steadfast commitment to become more resilient – communities and system leaders united in a desire to be more prepared for whatever disaster comes next.

Healthy North Coast has developed this report to summarise our lessons and recommendations for the Australian and NSW governments. The report is focussed on the primary health care experience and the activities we undertook as the local Primary Health Network. The report has contributed to organisational learning. It will inform our work with local health partners such as the Local Health Districts, Aboriginal Medical Services, general practices, community pharmacies, mental health providers and NSW government response and recovery agencies, to improve our local health response in future disasters.

We believe our experience is a cautionary tale for every region in Australia – think of the worst case scenario disaster, triple it and prepare for that. We hope our reflections drive awareness in other regions and improvements to the way primary health care is formally recognised and funded in all stages of disaster management, including in the preparation and planning stages, by both the Australian and NSW governments.

Yours sincerely

Monika Wheeler

CEO

Summary of insights

1. The 2022 Northern Rivers floods showed that place-based primary health care innovation strengthens the health response in disasters. We believe we were able to, alongside local primary health care clinicians:

   Be responsive to local needs

   Provide continuity of care to patients at their highest time of need

   Reduce the impact and severity of trauma

   Reduce pressure on hospital systems

2. Community and health system resilience reduces the impact of disasters, as well as reliance on acute and out of region resources

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3. PHNs and primary health care offer unique value and need to be embedded in national and state disaster management

> PHNs can move quickly to commission services
>
> Primary health care services need to be considered as essential services
>
> Spontaneous volunteerism is honourable, but needs to be supported within a quality management system

Summary of Healthy North Coast activities

Since March 2022, HNC has **delivered $40M+** in Australian and NSW government disaster response and recovery initiatives. Thank you to the Australian and NSW governments for the generous support provided. HNC has worked hand in hand with primary health care and communities to implement over 23 initiatives that provide support across the prevention, preparedness, response and recovery (PPRR) stages of disaster management.

The functional implementation of the PPRR cycle is complex. The four phases of PPRR are not linear nor are they independent of the others[1]. Figure 1 demonstrates HNC's activities and health services' intersection across the disaster management cycle since 2022.

Limitations

This report has been prepared using publicly available data, research and reports. Interviews were conducted with HNC staff in mid-2024 and insights have also been drawn from HNC program data and testimonials. The challenges, learnings and recommendations are based on the experiences of Healthy North Coast and relate only to the initiatives that HNC either directly delivered or participated in.

Acknowledgments

We recognise the efforts of former Healthy North Coast staff in response and recovery activities, particularly Julie Sturgess who was CEO at the time, Sarah Ford, Director of Healthy Communities, Samara Finlayson, Director Communications and Digital Services as well as many others.

[1] Queensland Disaster Management Guidelines https://www.qld.gov.au/disaster-dev/_resources/accordions/pprr-dmguideline/foreword

Healthy North Coast's activities and health services' intersection across the disaster management cycle since 2022
Figure 1

Response

- Coordinate primary care and mental health clinical support in evacuation centres
- GP telehealth
- 'We Are Open' extended hours campaign
- Primary care impact assessments, support and communications
- Crisis collateral and communications
- Residential Aged Care Home bed coordination and staff surge support
- Update health pathways
- Offer Employee Assistance Program counselling to primary health care workforce

Immediate recovery

- Represent primary care at Recovery Coordination Incident Management Centre
- Coordinate and deliver StreetSide Medics outreach clinics
- Establish Lismore Health Precinct at Southern Cross University Campus
- Establish Lismore Medicare Mental Health Centre

Short-medium term recovery

- Participate in the NSW Government Regional Health and Wellbeing Subcommittee
- Recruit and deploy 10 Health and Wellbeing Flood Recovery Navigators
- Develop and implement the Multi-Agency Care Planning Tool for rapid referral
- Establish four Safe Haven community wellbeing and support hubs
- Deliver Workforce Support & Wellbeing program
- Deliver Flood Infrastructure Grants to primary health care professionals in Lismore
- Participate in the NSW Government Skills Development and Employment Working Group
- Codesign and procure the $10M Resilient Kids program
- Deliver the Community Wellbeing and Resilience program
- Deliver the Northern NSW Stronger Community program

Preparedness

- Advocate for and sponsor the RACGP Evacuation Centre Guidelines and Information for GPs
- Coordinate Residential Aged Care Home capacity building and scenario exercises
- Establish the North Coast Health Disaster Management Working Group with the Mid North Coast and Northern NSW Local Health Districts:
  - Deliver health response exercise
  - Review evacuation centre plans and processes to improve integration
  - Deliver Disaster Ready Primary Care and business continuity workshops

Prevention

Advocacy & Feedback:

- National Climate & Health Strategy
- NSW Flood Inquiry
- NSW Recovery Response
- Joint Select Committee on the Reconstruction Authority Act
- Local government adaptation plans

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Recommendations

NSW and Australian governments

1. **Embed PHNs and primary health care** into emergency response plans and state-run emergency response committees with clear roles and responsibilities to ensure seamless and joined up responses across the health and social service providers.

2. **Ensure primary health care services** are considered 'essential services' and prioritised for electricity, water, internet, clean up services and infrastructure support.

3. **Build health system resilience** to support the long-term health and wellbeing of communities in the face of a changing climate **by funding the North Coast Climate Ready Health** initiative to test activities for scalability to other regions for $2 million over three years including*:

   > **Undertaking regional climate and health vulnerability** assessments to model and build understanding of the cascading impacts of climate hazards on health and wellbeing.
   >
   > **Developing a North Coast Health Adaptation Plan** to ensure primary and acute care services have clear roles and responsibilities and have undertaken scenario plans to be prepared for increases in the severity and frequency of disasters.
   >
   > **Building capacity of primary health care professionals** to deliver trauma-informed, culturally safe and responsive and coordinated disaster response care, reducing the potential for additional harm and pressure on acute health care and emergency services.

4. **Extend funding for the Resilient Kids Program** for an additional three years, up to 30 June 2028, for a total cost of $9.2 million, to support children and young people's recovery for from the 2022 floods and to build resilience for future disasters.

5. **Provide longer term funding for recovery activities** up to 5 years for catastrophic disasters, with flexibility to ensure the evolving needs of impacted communities can be met. This will be most effective when phased and aligned to the different stages of recovery.

6. **Extend funding for the Murwillumbah, Woodburn, Lismore and Mullumbimby Safe Havens** until 30 June 2027 (5 years after floods) for $2.43 million per annum. These drop-in wellbeing hubs have provided invaluable mental health supports to thousands of flood impacted residents and are still in high demand. Current NSW government funding ceases 31 December 2025.

7. Ensure all mental health disaster response and recovery initiatives are **evidence-based.**

8. Build the mental health **capacity of front-line emergency workers** so that community supports are trauma informed.

9. Conduct an **independent review of the NSW Reconstruction Authority's Regional Recovery Health and Wellbeing Sub-Committee** model within the context of catastrophic disasters to improve health-related recovery coordination and maximise outcomes from recovery investment.

10. Conduct **region-wide recovery debriefs** to capture lessons learned across health and community sectors while recovery experiences are fresh. For future recovery operations, particularly after catastrophic events, conduct multiple debriefs at agreed points in recovery to identify changes to issues, needs and priorities and develop solutions for implementation.

What happened

The Northern Rivers region of New South Wales is known for being situated on one of Australia's most active floodplains[2]. On the 28th of February 2022, the region experienced a catastrophic flooding event that surpassed recent historical records by nearly three meters. A second major flood occurred on 30 March 2022 compounding the initial impact.

The unprecedented flooding affected seven local government areas and towns with Lismore, Coraki and Woodburn experienced significant devastation. Tragically, 13 lives were lost. Additionally, 4,055 properties were declared uninhabitable, and another 10,849 properties sustained damage[3]. Approximately 4,000 people were evacuated from Lismore alone and over 7,330 people used formal emergency accommodation, with many more drawing upon the informal support of family and friends[4]. The events also severely impacted at least 3,500 Aboriginal people living on Bundjalung Country[5].

The National Emergency Management Agency (NEMA) describes the 2022 floods as one of the most devastating in the nation's recent history in Australia, particulary affecting Queensland and NSW. The sheer scale and size of the floods have made it difficult to measure the full extent of the impact accurately, and over two years on, the long tail of recovery persists for many individuals and communities. For example, there are 724 flood-affected households on the waitlist for temporary housing in the Northern Rivers and this demand is unlikely to be met[6].

[2] Regional Development Australia – Northern Rivers, Regional Economic Development Recovery Plan
[3] Audit Office of NSW: Flood Housing Response Performance Audit February 2024
[4] Ibid
[5] https://nrcf.org.au/thematic-analysis-of-needs-in-the-northern-rivers-post-2022-disaster-a-tapestry-of-resilience-and-vulnerability/
[6] Audit Office of NSW: Flood Housing Response Performance Audit February 2024

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Context

Northern NSW has a history of flooding with the Clarence, Richmond, and Tweed Rivers experiencing significant floods in 1954, 1974, and 2017. The 2022 floods surpassed all records in terms of rainfall intensity, river levels, and the extent of damage[7].

The 2022 floods highlighted the vulnerability of existing infrastructure, particularly in smaller towns where resources for flood mitigation and emergency response were limited. Established emergency response structures were overwhelmed by the scale and speed of the floods and many communities were left isolated for days, relying on local efforts and emergency services for rescue and relief. Fuel, groceries, electricity and internet was not available for weeks in some communities.

The event exposed gaps in disaster preparedness, communication, and coordination, leading to a NSW Parliamentary Inquiry into the flood response. The Inquiry report made a total of twenty-eight recommendations for change while highlighting areas of concern within the organisational, structural and community responses to the floods[8].

Despite the Australian and NSW governments committing more than $3.5 billion to support recovery, repair and rebuilding efforts of flood-impacted regions, the recovery process has been slow and challenging. Two and a half years on from the floods, demand for temporary housing has not been met. As of July 2023, 1,021 people were living in temporary housing villages and 257 caravans were on people's property. At the end of 2023, 724 households remained on the waitlist for temporary housing with no stock available to house them.

Funding is identified as a key issue affecting organisations two years after the flood[9]. Community and health sector organisations report that workloads have increased while funding has decreased and the inability to meet the high demand for services has a flow-on effect on the mental health of staff and volunteers[10]. Healthy North Coast-funded Community Wellbeing and Resilience grant recipients described a deep sense of fatigue within their communities and workforce as people struggle to make sense of a period of extended and recurrent natural disasters and the COVID-19 pandemic.

Within the primary care context, disasters are often accompanied by significant threats to the long-term physical and mental health of individuals living in affected communities and by disruptions to healthcare systems and delivery[11]. The ramifications of prolonged strain on physical and mental health due to the immediate trauma, disruption of essential services, loss of homes and livelihoods, and the ongoing stress of rebuilding are yet to be fully understood.

[7] CSIRO: Characterisation of the 2022 floods in the Northern Rivers region
[8] https://www.parliament.nsw.gov.au/tp/files/187631/Tabling%20report%20-%20Flood%20housing%20response.pdf
[9] https://nrcf.org.au/wp-content/uploads/2024/06/NRCF-FLOOD-REPORT-2024.pdf
[10] https://nrcf.org.au/wp-content/uploads/2024/06/NRCF-FLOOD-REPORT-2024.pdf
[11] https://www.ncbi.nlm.nih.gov/books/NBK316524/

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Challenges & Lessons Learned

PHNs and primary care are ideally placed to rapidly respond to disasters with proven capability to deliver robust, high-quality health and wellbeing initiatives that meet community needs. PHNs are well placed to contribute positively to health system resilience.

The challenges and lessons learned by Healthy North Coast after the 2022 floods across response, recovery, and prevention and preparedness activities offer insights and opportunities to support the health and wellbeing of communities when disasters occur in the future.

Crisis Response

The value of primary care in supporting the health and wellbeing of communities impacted by a catastrophic disaster was demonstrated when the health system was stretched beyond capacity.

Integration of primary care in disaster response is a key lesson from the 2022 floods. Healthy North Coast's role after a catastrophic event was untested but was largely effective, and included credentialing, coordinating and rostering clinicians into 31 evacuation centres. Strong local relationships across the health sector were a major contributor to the success of the health response.

Challenges included:

> Systems and processes for GPs, nurses, pharmacists and mental health clinical volunteers in evacuation centres were not fit for purpose for a disaster of the scale of the 2022 floods.
>
> Spontaneous medical volunteers, while admirable, presented a significant clinical risk if not coordinated within a broader emergency health response and quality management system.
>
> Inefficient medical volunteer management and duplication frustrated medical volunteers.
>
> Limited mental health knowledge of front-line evacuation centre staff led to requests for clinical support where it was not needed. Requests for clinical support were made with little lead time and sometimes for clinical activities out of scope for primary health care.
>
> Healthy North Coast staff worked out of hours and on weekends to roster clinicians and meet the requests of multiple agencies, who did not appear to be talking to each other.
>
> There was no funding to support the administrative load of 7 days per week coverage of clinical support.

The communications environment is very busy immediately after a disaster. When agencies and organisations are all trying to reach the community, it can create confusion.

The impact of the flood events on power and telecommunications infrastructure meant that printed health communications were extremely valuable. Rapid printing and distribution of wallet cards, flyers, and posters with tear-off tags were a huge success, however it was hard to find printers who were not flood-affected. Accessing and keeping up with rapidly changing service information and capturing and disseminating this effectively was a challenge.

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Recovery

Delivering recovery programs and initiatives

HNC was funded by the Australian and NSW governments to deliver programs to primary care and the community during the immediate and early stages of recovery, with pressure to rapidly establish services. HNC learned that establishing services after a catastrophic disaster is a complex task, frequently challenged by data, workforce and infrastructure limitations that can delay service delivery.

Most of the funding received by HNC had a 24-month delivery window. Short-term funding has resulted in HNC winding up trusted services that were effectively addressing community health and wellbeing needs. HNC negotiated extensions to funding agreements or drawn from reserves to continue the provision of health and wellbeing recovery services that reached their funding term.

The funding received by HNC to deliver disaster recovery initiatives increased the organisation's profile in the disaster recovery space and had the unexpected consequence of primary care and other recovery organisations seeking support from HNC that fell outside of funding scope. HNC worked hard to manage expectations and maintain positive relationships.

There is a hidden cost of goodwill in disaster recovery. Administration expenses are not in step with the resourcing required to deliver programs after a catastrophic event. HNC leveraged its existing workforce to commission and deliver funded programs and found that there was a significant strain on business-as-usual activities due to the support required.

Over two years on from the floods, HNC is still experiencing the flow-on effects to business-as-usual activities from the floods and other emergency responses such as the COVID-19 pandemic.

The rapid pace of service procurement led to missed opportunities in the design of robust data collection, evaluation and learning frameworks. There have been instances where HNC has sought to invest in independent evaluation, however, funders did not approve of using disaster recovery funds in this way.

The Resilient Kids program, funded by the National Emergency Response Agency, is an exemplar for the evaluation of recovery initiatives and includes baseline data collection and the development of a robust and agreed evaluation framework. This was only possible due to a three-year funding agreement and the willingness of the Australian government to invest upfront in strong metrics for success.

Planning for and delivering flood recovery program communications was not always consistent. In a communications environment characterised by large volumes of information at a time when stakeholders are under stress and unable to retain information, careful recovery communications planning is needed. Further, opportunities to share flood recovery program highlights, successes and lessons back to primary care practices and community is key to closing the loop and maintaining trust.

With a disaster of such as scale, most people have experienced impact either personally or professionally, or sometimes both. Resources are stretched and people working and volunteering in recovery are fatigued. Co-creating new programs and services often increases the workload of already fatigued, staff, volunteers and community members. Care should be taken when making requests or inviting participation.

The adversity of the catastrophic event presented an opportunity to take a collaborative grass-roots approach to co-create primary care workforce wellbeing investment which built transparency and trust. Demonstrating rigour in our processes through flood recovery programs has had a flow-on effect on service provider engagement and HNC's work more broadly.

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Collaboration and coordination

HNC found that investing in strong relationships with service providers was key to the success of programs and improved the recovery journey of individuals. Opening Safe Haven sites to community organisations for use outside of service hours provided vital community meeting space and created a soft entry point for people who may not have attended a Safe Haven otherwise.

Resilience building requires strong and trusted relationships. Competitive grant-making can undermine collaboration among organisations competing for limited resources. HNC also heard that resourcing grant writing and administration can be a barrier to applying for funding for small, grass-roots organisations, many of whom are already resource-constrained. HNC co-created a participatory grantmaking model that addresses these concerns and supports a more equitable and community-determined recovery investment environment.

The needs of flood-affected people are complex and cannot be resolved by any one agency. Identifying the roles and remit of recovery-funded agencies and organisations is difficult. The Regional Health and Wellbeing Subcommittee run by the NSW Reconstruction Authority could have more effectively drawn linkages and created opportunities to maximise the impact of recovery investment through collaboration. Improved direction and a clear focus will greatly enhance the effectiveness of the committee in disaster preparedness and future responses.

There is a risk of losing an extraordinary amount of tacit knowledge gained through the delivery of initiatives and services with the winding down of investment in recovery. Reflecting on catastrophic events such as the 2022 Northern NSW floods is crucial for improving disaster preparedness, enhancing response strategies, and building more resilience for the future. There is no process in place to capture lessons learned from all agencies involved in recovery.

Mental health

Almost all people affected by disasters will experience psychological distress, which for most people will improve over time[12].

Given the scale of the 2022 floods, intense attention was given to mental health throughout recovery. HNC saw a very high demand by agencies for clinical mental health support in community settings. Often there is a mismatch between what is reported and what is occurring on the ground. HNC is cognisant of the need to carefully manage limited clinical resources. Deploying clinical resources when they are not needed puts pressure on an already stretched workforce.

HNC observed well-intentioned service providers without a clear mental health remit or clinical training stepping out of their scope of practice. It is vital that front-line workers possess the relevant skills, experience and qualifications required for providing services and that all services provided are based on a sound evidence base to achieve positive outcomes for participants.

HNC saw positive outcomes where mental health programs were evidence-based and integrated across outreach and in-service settings and clinical and non-clinical staff work side by side.

[12] Black Dog Institute (2020) Mental Health Interventions Following Disasters

Preparedness

Response and recovery activities have highlighted that primary care should be effectively mobilised to provide vital care to the community in disasters. It should be connected to, and visible in, all stages of the disaster management cycle.

Impacts from disasters on general practices have a flow-on on effect to the rest of the health system, including pharmacy, ambulance, social services, emergency departments and other GP clinics. Primary care generally has low levels of disaster preparedness but has shown interest in developing capacity and improving business continuity.

Primary care providers operate as individual businesses that are often in competition with one another. Connection and cooperation need to be built within practice teams and between providers to improve outcomes for general practice and the community. Building on the momentum of the floods, HNC saw strong engagement and appetite for collaboration between primary care providers. This has also extended to allied health, particularly community pharmacy.

HNC's Workforce Wellbeing and Support Program funded by the Australian government saw local general practices choose a localised locum model to support rest and recovery for their exhausted workforce, rather than calling in resources from outside of the region.

During the 2022 floods, primary care and PHNs did not have a mandated role in disaster management or funding to support prepardness. The Australian Government's commitment to fund a disaster management position within PHNs and NSW Health's recognition of PHNs and general practice in the HEALTHPLAN are positive steps forward. Further planning and investment is needed to ensure that communities are adequately supported to recover from the physical and mental health impacts of natural disasters. PHNs and primary health care are well placed to support this.

Prevention

Building resilience in health systems to withstand disasters and disruptions is essential for ensuring the long-term health and wellbeing of communities. This requires sustained investment across every phase of the disaster management cycle. Both national and international evidence highlights the critical role of primary care in disaster management to improve access to essential health interventions, reduce the burden on hospitals and enable communities to take proactive measures that optimise their health and accelerate recovery[13].

The link between resilience in the community and resilience in the community service sector has been observed by HNC. To support community-sector sustainability and whole-of-system responses, HNC has provided capacity-building activities to Community Wellbeing and Resilience Program grant recipients in areas such as project management, governance and evaluation.

HNC has contributed its experiences and thought leadership to national, state and local level climate adaptation and resilience strategies and plans. It has also provided a carefully considered health and wellbeing lens to Parliamentary Inquiries, Joint Select Committee hearings and legislative reviews on disaster management and climate resilience.

Major and catastrophic disasters have the potential to immeasurably alter the lives of those affected. Preventative measures, particularly those that can assist with mitigating psychosocial harm, aren't adequately funded or prioritised from a policy perspective[14].

[13] World Health Organisation (2021) Health Systems Resilience Toolkit
[14] https://www.redcross.org.au/globalassets/cms/stories/cleenup-report.pdf

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Flood Support in Action
Exemplar Case Studies

Resilient Kids

Launched in November 2023, The Resilient Kids Program , was created to support the health and wellbeing of young people in the Northern Rivers region who were impacted by the 2022 floods. The program was funded by a $10 million Australian Government grant through the National Emergency Management Agency. The program was co-designed with children, young people, schools, families and service providers to ensure it met the needs of those it aimed to help.

The program is delivered by Social Futures in partnership with The Family Centre and Human Nature Therapy. It focuses on school-based education and skills building while establishing local hubs to support community resilience. Since its launch, 3,431 young people have accessed the program's services, with an impressive 93% reporting positive outcomes.

For First Nations youth and those with autism or cognitive disabilities, this positive response rate reached 100% and 73% respectively.

A 2022 Resilience Survey, which gathered insights from 6,611 students across 75 Northern Rivers schools, highlighted the ongoing need for such initiatives.

Quotes from Resilient Kids participants:

"Our family home went through the floods and even though we lost a lot we came out closer and stronger"

"I love Resilient Kids and can't wait each week to come"

"I can talk about anything here"

"I liked sharing our stories and feelings with each other"

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Safe Havens

Safe Havens were commissioned for three years by Healthy North Coast in 2022 through the NSW Government's Mental Health and Wellbeing Flood Recovery Package.

After one year of service delivery, more than 5,300 children and young people have accessed support, including:

> 2,551 participating in school-based workshops
>
> 568 engaging in individual or group therapy (including counselling, therapeutic groups, and social and emotional wellbeing groups)
>
> 2,030 participating in funded events for community connection

In June 2024 alone, more than 700 people connected with the Safe Havens showing that these services are still very much needed by the community.

> "I think it's great news that the Safe Havens are being continued in the heavily flood-affected communities that we work in. Mental health services are both valued and needed."
>
> - Safe Haven peer worker

Medicare Mental Health Centre Lismore

Formerly known as the Head to Health hub, was rapidly established in March 2022 as a service in response to the 2022 Northern Rivers flood events.

Medicare Mental Health Centre Lismore is a safe and welcoming place for people to access mental health information, services and support.

A multidisciplinary care team is accessible during extended hours, including weekends, without needing a GP referral or appointment.

The hub provides short-to-medium-term care for moderate to severe mental health needs, and anyone over 18 experiencing mental health concerns, or who are in crisis, can receive immediate support and follow-up.

In April 2023, the Australian Government and the NSW Government committed ongoing funding to the hub, and, following an open tender process, Open Minds were awarded the contract. It has been delivering the Medicare Mental Health Centre from the Lismore Health Precinct since 1 August 2022.

Since establishment in March 2022 to November 2024, the Medicare Mental Health Centre Lismore has provided services to:

1445 clients

Through 16006 occasions of service

The top three client primary diagnoses are anxiety disorder, mood disorders and post traumatic stress disorder.

Aged Care Disaster Capacity Building

In September 2023, Healthy North Coast partnered with the NSW SES to host disaster preparedness workshops for aged care providers.

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These workshops aimed to enhance emergency readiness by addressing the specific risks older people face during crises. With over 150 attendees across 5 Northern Rivers locations, including Coffs Harbour and Kempsey, the sessions focused on practical strategies for disaster response and recovery.Leveraging past experiences from the North Coast floods, bushfires, and the COVID-19 pandemic.

Participants worked through scenarios covering resident safety, resource management and communication, strengthening their capacity to protect vulnerable community members. This included understanding where residents and staff are located, what food, water, and medicines are required, how will a potential evacuation will be coordinated, and how everyone will communicate and work together to ensure residents are safe.

A scenario planning exercise was also conducted in Northern NSW with state disaster response agencies.

> "The workshops are a very practical way for aged care providers and emergency services to work together to help protect some of the community's most vulnerable residents during natural disasters."
>
> - NSW SES Community Capability Officer Steve Lawrence.

Lismore Primary Health Precinct

In March 2023 Healthy North Coast opened the doors on the new Lismore Primary Health Precinct at Southern Cross University Health Clinic, this gave flood-impacted primary care providers a new home and provided Lismore residents access to vital primary health services that they urgently needed.

Funded by the Australian Government through the PHN Program as part of the Northern NSW flood recovery efforts, the new precinct had the capacity to house more than 20 primary health services, including general practice, pharmacy, pathology, mental health, and a range of other allied health services.

At peak occupancy periods during 2023, over 25 front-line clinical service providers were working from the precinct, with some weeks resulting in more than 1,000 clients receiving occasions of care.

Clinical, therapy and counseling services included general practice, pharmacy and pathology collection services, mental health nursing services, psychology, counselling and behavioural therapy services, specialist medical services, allied health services including chiropractic, audiology and osteopathy services.

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Lismore Primary Health Care Infrastructure Grants

Healthy North Coast commissioned a $5 million infrastructure recovery support program through funding provided by Australian and NSW governments. The aim of the grants was to provide support to health service providers in Lismore to rebuild and repair damage to their clinic buildings.

> "This in turn will allow us to resume provision of COVID-19 vaccinations, along with other routine vaccinations, including for children and for influenza, as well as a host of other community and patient services,"
>
> "COVID-19 care is a high priority for our patients, and we have enquiries on a daily basis as to when we will be able to return to providing vaccinations. This funding will make all the difference in getting us back on track to vaccinating"
>
> - Dr Michelle Blandford

Community Wellbeing and Resilience program

Healthy North Coast's Community Wellbeing and Resilience program supported 23 local community organisations to a total value of $5.3 million, through funding provided by the NSW and Australian Governments, to support disaster impacted communities across the North Coast. The Community Wellbeing and Resilience initiative is a grants program that assists the community to recover from natural disasters and build capacity to face future compounding disasters.

The 2024 funding round trialled an innovative 'Participatory Grant Making' approach, which included communities in the decisions that impact them, and prioritised trust-building over traditional competitive grant making approaches.

The Community Wellbeing and Resilience Program was a winner in the 2024 NSW Resilient Australia Awards and a runner up in the National Resilient Australia Awards, managed by the Australian Institute for Disaster Resilience.

> "It felt like it levelled the playing field, especially for organisations that may not have as much skill and capacity in grant writing."
>
> - Workshop participant

Primary Health Care Workforce Support and Wellbeing

The Workforce Support and Wellbeing program, implemented from October 2022 to June 2024 through a $1.3 million grant from the Australian Government, provided much needed support to the flood impacted primary care workforce. The program followed an analysis of how more than 80 primary health care services had been impacted by the floods, which showed that 83% of services were concerned about staff wellbeing, burnout and fatigue.

The program operated through 4 key streams: wellbeing, education, locum support and disaster preparedness. 108 organisations and over 2,500 primary health care workers were supported in enhancing their wellbeing, resilience and preparedness. More than 40 organisations engaged in strengthening their business continuity planning.

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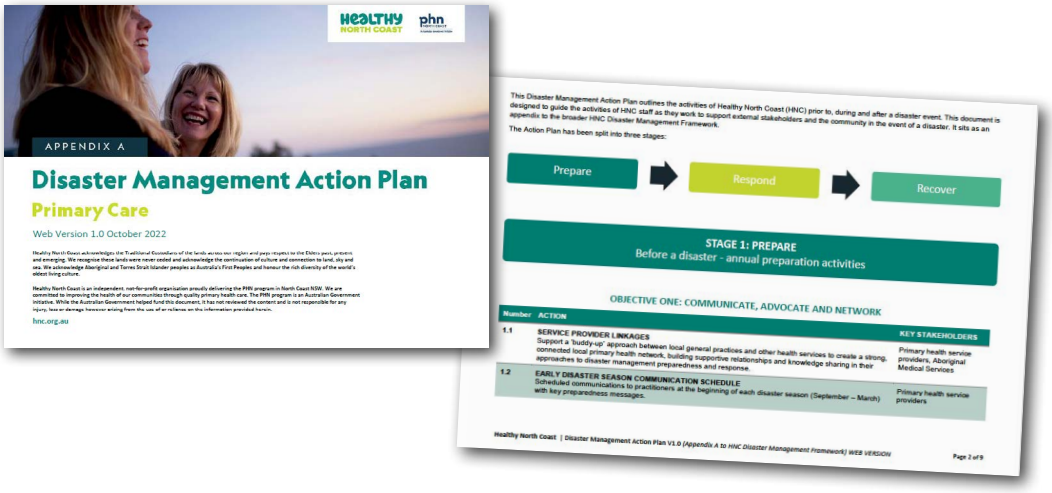
> “We attended a training session on exploring the nature, dynamics and risks of vicarious trauma and supporting staff to stay healthy and safe in our work. The aspects of this session I found most useful were the reminder of how organisational structures can support to minimise vicarious trauma. One thing I can apply as a result of this session is taking the things that are worrying me to supervisors and proactively asking for more debriefing.”
>
> - Workforce Support and Wellbeing participant
>
> “Like much of the Lismore community, many of our staff were directly affected by the floods. This program offers relief, rest and assistance to the health workforce in this region, while still enabling our businesses to service the community. It is very welcome and appreciated.”
>
> - Kyle Wood, owner and pharmacist at Southside Chempro in Lismore

Disaster preparedness and planning

Healthy North Coast has used our experience and insights from the 2022 floods to inform our local disaster management frameworks and national policy reviews and guidelines regarding the role of primary health care in disaster management.

Activities include:

- Developing the North Coast Primary Health Care Disaster Management Framework
- Establishing North Coast Health Disaster Management Working Group with the Mid North Coast and Northern NSW Local Health Districts
- Funding RACGP to develop GPs in Evacuation Centre Guidelines including input from local flood impacted GPs
- HNC submission to the NSW Parliamentary Inquiry into the 2022 floods
- HNC submission to the National Climate and Health Strategy and Adaptation Plan
- HNC submission to the Joint Senate Select Committee on the NSW Reconstruction Authority Act
- HNC submission to the National Climate Risk Assessment and National Adaptation Plan
- Contributed to the PHN Cooperative Submission into the Senate Select Committee on Australia’s Disaster Resilience



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