



## Research report

# A study of council community directories and their use for information about local health services

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## ***Executive summary***

The World Wide Web is a valuable source of information for all sorts of products and services. Town councils use the web to provide town residents and visitors with large amounts of information. One resource provided by many town councils is a community information directory containing details of local services including health services. Other sources of health service information are frequently insufficiently detailed at the local level.

The Centre for Rural and Remote Area Health (CRRAH), a joint centre of the universities of Queensland and Southern Queensland, was interested in the value of these directories to town residents as a source about health services. This interest was prompted by the observations from health service providers in southern Queensland that sources of information about services are limited within the communities.

Questionnaires were distributed in four towns in southern Queensland by mail and in health clinics. In addition interviews were conducted in the street. All four towns have community information directories. Two directories advertise themselves as a source of health service information. All four directories contain information about health services within the town. The extent of the information varies from town to town according to the criteria that are placed on inclusion.

Questions determined the respondents' use of the internet, awareness of town community directories, use of the local directory to find information about health services and other sources of information.

Almost sixty percent of the 1125 respondents use the internet. This was highly correlated with age with fewer than 20% of respondents over 65 using the internet. Only 30% of respondents were aware of the existence of their town's community directory and this was unrelated to age. Use of community directories for acquiring information about health services was limited to 25% of the people who were aware of the service. Results therefore indicated that use of the local directories for acquiring information about health was limited to one person in 25. The principal source of information about health services is still the family doctor, followed by the telephone directory, friends and relatives.

Despite the current low level of awareness and use of web based directories the authors of this report believe that there is a potential to become a valuable and even the primary source of local information about health services. In order for this to occur some changes are necessary. These include:

- awareness of the resources has to increase with strategies employed to achieve this ;
- directories should be made more user friendly with extensive field testing ;
- entries should include both public and private health service providers;
- health providers should be supported to enter and update their data;
- provision for non internet users should be addressed through printed copies.

## ***Introduction***

The use of computers and the Internet has profoundly changed the lives of many individuals in Australia. Over the last few years, the increase in internet usage has risen rapidly owing to cheaper computers, convenience and flexibility of on-line services, the introduction of broadband and other factors. An estimated 77% of Queenslanders have access to a computer at home with 67% also having access to the Internet from their place of residence (Queensland Government Survey, 2005). The Internet has become a valuable gateway for information, with consumers increasingly turning to the Internet to obtain information about health and health care. In addition, accessing health care services and their providers on their various web-pages, has formed an integral part of the communication mechanisms in the total provision for health within Australia.

Computer usage and Internet access rates for different age categories, regardless of sex, have remained stable in the last three years. However, persons aged 65 and over are still the group least likely to have a computer or access the internet at home. Internet access for the 18-44 age range is amongst the highest followed by the 45-54 and 55-64 age groups. This demonstrates the pervading nature of information technology at all levels in society.

In 2006, a study by CRRAH revealed that health service providers from southwest Queensland perceive that there is insufficient information about health provision available to health providers or the general public. What is anecdotal and what is true requires further research.

Many community and commercial business directories now in existence contain information about health services. Furthermore there are state health department service provider databases. South Australia for example has developed the Human Services Finder which is advertised as *the place to access information about health, housing, family and community services from the private, public and community sectors in South Australia*. Queensland Health is developing a Health Service Provider Directory which will provide a similar function. Furthermore other government agencies such as Commonwealth Carelink have large database searchable by location.

Certainly many web based directories are springing up and it would appear at first glance that the problem is not lack of information but too much of it. Unfortunately directories are sometimes not detailed enough to contain information at a local level and

no one directory contains all the information that people are looking for. This is especially true for commercial directories that require payment for entry.

Detailed local information is what is needed. Fortunately city and shire councils as part of their public service are very interested in providing information to their communities through the internet. These community information directories may be an ideal location for detailed information about local services as noted in the introduction to the Warwick community resource directory: *Service providers based in Warwick have many services available to them, but often they are not well known or not accessible in a consolidated format. This Resource Directory may assist in increasing the awareness of these services and facilitate their access by service providers and users.*

To our knowledge, no surveys of customer use of council directories have been undertaken. This report provides the findings of a survey on awareness and use of community directories undertaken in the towns of Toowoomba, Dalby, Warwick and Kingaroy in southeast Queensland. All the towns have internet based community directories that contain information about local health service providers.

### ***Aims and objectives***

To determine:

- the general public's awareness of council web directories;
- the general public's use of those directories for health services;
- how easy directories are to use;
- where the general public seek information about health services.

## **Methodology**

### **Instrument**

A simple general questionnaire was used. The questionnaire was developed at CRRAH where it was refined for clarity following piloting by a group of people similar to the intended audience. The questions asked for the respondents sex and age group and followed by eight closed questions (Q1-Q8) involving either yes/no (Q1-3), a checklist of multiple selection from lists (Q5, Q8) or single selection from a Likert Scale (Q4, Q6-7). At the end of the questionnaire there was a place for free text comment. If the answer to Q1 was "no" only Q8 was answered.

### **Towns**

Data were collected from four towns. All towns are inner regional as classified by the Australian Standard Geographical Classification based on physical remoteness from goods and services. The town classification by the Rural, Remote, Metropolitan Areas (RRMA) Classification combining size and remoteness is indicated in Table 1.

**Table 1: Towns where the survey were conducted.**

<b>Town</b>	<b>Town population</b>	<b>Shire</b>	<b>Shire population</b>	<b>RRMA</b>
Dalby	10387	-	Not applicable	5
Kingaroy	8000	Kingaroy	12545	5
Toowoomba	90000	-	105,000*	3
Warwick	12000	Warwick	21814	4

\*greater Toowoomba

### **Ethics and consent**

The study received ethics approval from the USQ Human Research Ethics Committee and all necessary approvals from Queensland Police Service and town/shore councils for each town. Plain language statements were attached to the mail and clinic questionnaires with a consent tick box on the questionnaire itself. For the interviews consent was requested and was verbal after reading the plain language statement (Appendix 1d).

### **Respondents**

Data were collected by three different methods in each of the four towns.

- **Mail survey:** 1000 self-administered questionnaires (Appendix 1a) were distributed to households in each town by a commercial distributor. Distribution was random within each town.
- **Clinic survey:** 100 self-administered questionnaires (Appendix 1b) were delivered to each of 22 waiting rooms; doctors' surgeries (15), hospitals (2), physiotherapists (1), dentists (1) and X-ray facilities (3). The number of these facilities receiving questionnaires in each town was Dalby 6, Kingaroy 5, Toowoomba 6 and Warwick 5. One of the doctors' surgeries in Kingaroy decided not to display the questionnaires and returned them. One other medical practice in Toowoomba that was approached refused the survey to be placed in their waiting room. A total of 2100 questionnaires were distributed. Completed questionnaires were placed in a box in the waiting rooms and returned to CRRAH after 10 days.
- **Personal interview:** Two research staff undertook "cold intercept" in the streets of each town for about 6 hours each split over two consecutive days. Pedestrians were approached and asked if they would participate in a survey (Appendix 1c).

## **Data entry and analysis**

Data from the surveys were entered in SPSS V14 and quantitative data analysed by standard methodology. Comparisons of responses were made by sex, age, mode of data collection and town. Significance was set at 5%.

Thematic analysis of the qualitative data was undertaken by two members of the research team. Firstly each team member independently looked at all the comments and generated a short list of themes into which those comments fell. The two team members then discussed the themes until agreement was reached on name and number. Comments were then allocated to the themes.

## **Background information on Council web based directories.**

Council web sites were found through a government listing of council web sites [www.townname.qld.gov.au](http://www.townname.qld.gov.au) where "townname" is Dalby, Kingaroy, Toowoomba or Warwick. Community directories (however named) are found on each web site with health data contained in those directories. All directories provide quite an extensive range of health service information. For comparison among towns, Appendix 2 lists the actual health providers as generated from the web site for each town.

Three of the four directories appear on their council web site. Toowoomba and Warwick directories are council developed and maintained while the data on the Kingaroy database come directly from another database run by the Chamber of Commerce. The Dalby directory is not on the council web site but located on another web site that is hyper-linked from the council web site.

Two directories have a complete range of private, public, community organisations on them while the Toowoomba and Warwick directories are more restrictive. All require a minimum of four mouse clicks from the council home page to find a resource.

**Table 2: Information offered for each health provider on web page**

	<b>Dalby</b>	<b>Kingaroy</b>	<b>Toowoomba</b>	<b>Warwick</b>
Name	X	X	X	X
Description		X	X	
Postal address		X	X	
Webpage	Y	X	X	X
Phone	X	X	X	X
Fax		X	X	X
Email	Y	X	X	
Physical address	X	X	X	X
Contact person		X	X	
Position		X	X	
Opening hours		X	X	

X = provided for all services

Y = provided for services that pay for additional information to be entered

Further details of each town directory including comments on use appear in Appendices 4a – d.

## **Results**

### **Source of data**

Distribution of responses according to the method of data collection is presented in Table 3. The largest proportion of responses came from the mail survey and equal proportions from both the clinics and the street interviews. The response rate for the entire survey was 13.0%.

**Table 3: Distribution of respondents according to the methods of data collection**

<b>Method of data collection</b>	<b>Number distributed</b>	<b>Number returned</b>	<b>Percent returned</b>	<b>Percent of total surveys</b>
Mail	4000	467	11.6	42
Clinic	2100	326	15.5	29
<b>Sub-total</b>	<b>6100</b>	<b>793</b>	<b>13.0</b>	<b>71</b>
Interview		432		29
<b>Total</b>		<b>1125</b>		<b>100</b>

### **Location of respondents**

The highest proportion of respondents was from Dalby (36% of total) and lowest Kingaroy (17%). The response rate of the mail and clinic surveys ranged from 9.1% for Warwick to 16.5% from Dalby.

**Table 4: Distribution of respondents according to their location of survey**

<b>Location</b>	<b>Number completed surveys</b>	<b>Percent of total surveys</b>	<b>Surveys from Interview</b>	<b>Total distributed by mail and clinics</b>	<b>Total return from mail and clinic</b>	<b>Percent returned mail and clinics</b>
Dalby	401	36	136	1600	265	16.5
Toowoomba	300	27	66	1600	234	14.6
Kingaroy	195	17	38	1400	157	11.2
Warwick	229	20	92	1500	137	9.1
<b>Total</b>	<b>1125</b>	<b>100</b>	<b>332</b>	<b>6100</b>	<b>793</b>	<b>13.0</b>

### **Question 1: Do you use the internet?**

Analysis of data (Table 5) indicates that three out of every five of the respondents in the study use the internet.

There were 21 people who omitted to reply to this question. Their data and any data from the 449 people who responded "No" to the Q1 were not used for questions 2-7.

**Table 5: Distribution of respondents according to their use of the internet**

Use internet	Number	Percent
Yes	655	59.3
No	449	40.7
<b>Total</b>	<b>1104</b>	<b>100</b>

***Responses by location to use of the internet***

Table 6 explains the use of internet services by location. Analysis reveals that the percentage of respondents who use the internet was the highest in Toowoomba (69.7%) and lowest in Warwick (51.6%).

**Table 6: Use of the internet by location**

Town	Number surveys	Number responding to question	Number who use the internet	Percentage who use the internet
Dalby	401	395	225	57.0
Kingaroy	195	193	110	57.0
Toowoomba	300	297	207	69.7
Warwick	229	219	113	51.6
<b>Total</b>	<b>1125</b>	<b>1104</b>	<b>655</b>	<b>59.3</b>

***Responses by age to use of the internet***

Of the 1125 respondents, 1089 indicated their age and 1072 of these who responded to question 1. Table 7 shows that the use of the internet was highly correlated with age. Greater than four out of five respondents in the 18-24 age group use the internet as compared to only 1 in 5 of respondents over 65 years of age. That is, younger the people are the higher the use of internet.

**Table 7: Use of the internet by age**

Age band	Number of valid responses	Percentage valid responses	Number who use internet	Percentage who use the internet
18-24	91	8.4	76	83.5
25-45	371	34.6	288	77.6
46-65	388	36.1	230	59.3
Over 65	222	20.7	43	19.4
<b>Total</b>	<b>1072</b>	<b>99.8</b>	<b>637</b>	<b>59.4</b>

***Responses by sex to use of the internet***

Of the 1125 respondents, 965 identified their sex as male (30.5%) or female (69.5%) and 150 respondents did not indicate their sex. From the 965 who indicated their sex, 954 responded to the question of use of the internet (Table 8). Although there were no significant differences in use of internet based on sex; the females on the study were slightly higher users of the internet services than males.

**Table 8: Use of the internet by sex**

<b>Sex</b>	<b>Number</b>	<b>Number who use the internet</b>	<b>Percent who use the internet</b>
Male	293	170	58.0
Female	661	413	62.5
<b>Total</b>	<b>954</b>	<b>583</b>	<b>61.1</b>

***Responses by method of data collection to use of the internet***

The percentages of people who used the internet were analysed according to the method of data collection. Respondents from the clinic surveys used the internet more (68.0%) than those who responded by mail (57.9%) or who were interviewed (52.9%).

**Table 9: Use of internet by town and method of data collection**

<b>Location</b>	<b>Method of data collection</b>		
	<b>Mail</b>	<b>Clinic</b>	<b>Interview</b>
Dalby	51.8	58.2	61.0
Kingaroy	64.9	66.1	36.8
Toowoomba	68.8	81.1	53.0
Warwick	49.2	65.5	50.0

The people in Toowoomba (53%) and in Kingaroy (36.8%) who were interviewed on the street were significantly less likely to use the internet than were the respondents to the mail and clinic surveys from the same towns.

Further analysis revealed that there were no differences between males and females in the use of internet by the different methods of data collection in any of the locations.

Although there were no differences found within the age groups in the use of internet by the different methods of data collection, the data in Table 10 suggests that the people in the 25-45 and 46-65 age groups, who were interviewed on the street, were less likely to use the internet than were the same age respondents to the mail and clinic surveys.

**Table 10: Use of internet by age and method of data collection**

<b>Age group</b>	<b>Method of data collection</b>		
	<b>Mail</b>	<b>Clinic</b>	<b>Interview</b>
18-24 yrs	66.7	93.5	83.3
25-45 yrs	82.0	86.2	65.0
46-65 yrs	62.7	67.3	45.9
>65 yrs	21.2	18.8	16.1

Additional analysis confirmed that there were no differences in the age distribution of respondents by the methods of data collection among the four locations

## **Question 2: Are you aware of the existence of the community information directory in your town?**

The 655 respondents who answered “Yes” to Question 1 were asked the general question of whether they were aware of their own town or shire council’s community information directory. The questionnaires were town specific with the exact name of that directory as used by the council used in the question.

Results (Table11) show that less than one-third of the respondents who used the internet were aware of their council’s information directory. Furthermore as 40% of total respondents do not use the internet the percentage of people within the towns who may use the directories is reduced to 17%.

**Table 11: Awareness of the community information directory (however named)**

Aware of directory	Number aware	Percent aware
Yes	195	29.8
No	460	70.2
<b>Total</b>	<b>655</b>	<b>100</b>

Small differences were found in the awareness of council directory according to the methods of data collection. That is, more mail respondents (32.4%) who use the internet were aware of the existence of the council directories as compared to 28.5% and 28% of the clinic and interview respondents, respectively.

### ***Response by location to awareness of web based community directories***

Among our respondents there were some differences in awareness of council directory according to their location. Dalby respondents who used the internet were more aware of the council directory than were respondents from the other towns (Table 12).

**Table 12: Awareness of the community information directory by town.**

Town	Number who use internet	Number aware of directory	Percent aware of directory
Dalby	223	91	40.8
Kingaroy	108	24	22.2
Toowoomba	206	51	24.8
Warwick	111	28	25.2
<b>Total</b>	<b>648</b>	<b>194</b>	<b>29.9</b>

### ***Responses by age to awareness of web based community directories***

There were some differences in awareness of council directories according to age of the respondents. Table 13 shows that among users of the internet the awareness of local

directories was as high for the over 65 years (42.9%) of age as it was for those of 18-24 years (40.8%) of age group and over 10% higher than the other age groups.

**Table 13: Responses by age to awareness of web based community directories**

Age group	Number who use internet	Number aware of directory	Percent aware of directory
18-24	76	31	40.8
25-45	286	76	26.6
46-65	226	65	28.8
Over 65	42	18	42.9
<b>Total</b>	<b>630</b>	<b>190</b>	<b>30.2</b>

### **Responses by sex to awareness of web based community directories**

Data presented in Table 14 indicate no differences in awareness of council directory of the respondents based on their sex. Both male and female had the similar level of awareness of the council directory.

**Table 14: Responses by sex to awareness of the directories**

Sex	Number who use internet	Number aware of directory	Percent aware of directory
Male	168	52	30.5
Female	409	123	29.8
<b>Total</b>	<b>577</b>	<b>175</b>	<b>30.3</b>

### **Question 3: Have you ever accessed the community information directory to find out information about health services?**

Of the 195 people with awareness of the council directories, 185 responded to the question. About one quarter (25.4%) of the respondents indicated that they had accessed the council directory (Table15) and among them the mail respondents indicated proportionately higher level of access (27.4%) than those of clinic (24.6%) and interview (18.4%).

**Table 15: Accessed web based community directory for health purposes**

	Number accessed directory	Percent access
Yes	47	25.4
No	138	74.6
<b>Total</b>	<b>185</b>	<b>100</b>

The overall analysis of the data revealed that the total access to council directory for health information was 7.2% of the 655 who use the internet and 4.1% or 1 in 25 of the total 1125 respondents.

### **Responses by location to directory access**

The data in Table 16 illustrates that the access to council directory was proportionately higher in Warwick (37.0%) than those of other locations.

**Table 16: Access to internet directory by location.**

Town	Number aware of directory	Number use directory	Percent use directory
Dalby	91	21	23.1
Kingaroy	24	5	20.8
Toowoomba	43	11	25.6
Warwick	27	10	37.0
<b>Total</b>	<b>185</b>	<b>47</b>	<b>25.4</b>

### **Responses by age to directory access**

The age groups of 18-24 years (29.0%) and over 65 years (27.8%) of the respondents had proportionately higher access to the council directory for health information than those of other age groups.

**Table 17: Responses by age to access of directory**

Age	Number who use internet	Number aware of directory	Number who have accessed council web site	Percentage who have accessed council web site
18-24	76	31	9	29.0
25-45	286	73	16	21.9
46-65	226	59	14	23.7
Over 65	42	18	5	27.8
<b>Total</b>	<b>630</b>	<b>181</b>	<b>44</b>	<b>24.3</b>

### **Response by sex to directory access**

Although females had slightly more access to the council directory to find out health information than males, the differences were insignificant.

**Table 18: Response by sex to access of the directory**

Sex	Number aware of directory	Number use Directory	Percent use directory
Male	49	10	20.4
Female	117	30	25.6
<b>Total</b>	<b>166</b>	<b>40</b>	<b>24.1</b>

### **Question 4: How often have you used the directory in the last year for information about health services?**

The 47 people who had access to the community directory were asked how often they had accessed the data base in the last year. Results in Table 19 indicate that the majority of respondents (66%) had accessed their council directory between 1 and 4 times in the last year.

**Table 19: Frequency of use of the community directory**

Frequency	Number	Percent
1-4	31	66.0
5-9	9	19.1
10 or more	4	8.5
No answer	3	6.3
<b>Total</b>	<b>47</b>	<b>99.9</b>

### **Question 5: What information did you look for?**

The respondents who had access to the council directory were asked about what information they sought. Respondents were able to select more than one category. As shown in Table 20 the majority of respondents indicated that they looked for doctors followed by hospitals, community health clinics, dentists and podiatrists.

**Table 20. Health service looked for in directory**

Service	Number times
Doctor	26
Hospital	23
Community health clinic	18
Dentist	18
Podiatrist	13
Counsellor/psychologist	11
Aged care facility	11
Physiotherapist	7
Chiropractor	6
Other (Naturopath)	4
<b>Total</b>	<b>137</b>

In terms of absolute numbers directory use was greater in Dalby where awareness of the directory was highest. Use adjusted for level of awareness was highest in Warwick with 1.1 services sought in the last year. However after adjusted for the number of times the directories were used, the use per visit was the same for all towns (see bottom row in table 21).

**Table 21: information sought by town**

Service type	Number of times information sought				Total
	Dalby	Kingaroy	Toowoomba	Warwick	
Doctor	14	1	5	6	26
Hospital	7	4	6	6	23
Community Health Clinic	7	3	2	6	18
Dentist	8	1	5	4	18
Podiatrist	8	1	3	1	13
Counsellor/psychologist	2	2	4	3	11
Aged Care Facility	4	3	2	2	11
Physiotherapist	3	0	2	2	7
Chiropractor	3	1	1	1	6
Other (Naturopath)	2	0	2	0	4
<b>Total service sought</b>	<b>58</b>	<b>16</b>	<b>32</b>	<b>31</b>	<b>137</b>
Number aware of site	91	24	51	28	194
<b>Number of service sought per person</b>	<b>.63</b>	<b>.66</b>	<b>.62</b>	<b>1.1</b>	<b>.70</b>
Number of times used	21	5	11	10	47
<b>Number of service sought per visit</b>	<b>2.8</b>	<b>3.2</b>	<b>2.9</b>	<b>3.1</b>	<b>2.9</b>

**Question 6: Did you find the information useful?**

The vast majority of those people who had used directories stated that the information that they contained about health services was useful or very useful.

**Table 22: Was the information useful?**

	Frequency	Percent
Very useful	18	39.1
Useful	24	52.2
Not very useful	2	4.3
Not at all useful	2	4.3
Missing	1	.1
<b>Total</b>	<b>47</b>	<b>100</b>

**Question 7: Was the information easy to use?**

In most cases the respondents who had access to council directory indicated the information was easy or very easy to use.

**Table 23: Ease of use of the information**

	Frequency	Percent
Very easy	21	45.7
Easy	20	43.5
Not very easy	3	6.5
Not at all easy	2	4.3
Missing	1	.1
<b>Total</b>	<b>47</b>	<b>100</b>

## **Question 8: What source of information do you use to find the health services that you need?**

All 1125 respondents were given the opportunity to indicate where they find information about health services. They indicated that the greatest source of health information was doctors or other health persons followed by the phone directories, friends and family members. Computer searches were only used by one in ten people and only one in 20 consulted Commonwealth Carelink.

**Table 24: Sources of Information used for health services**

Where information is found	Number	Percent respondents
Doctor or other health person	910	80.9
Yellow/white pages	535	47.5
Friend/neighbour	503	44.7
Family member	433	38.4
Radio/TV	138	12.2
Computer search	121	10.7
Community newsletter	89	7.9
Council	58	5.1
Commonwealth Carelink	51	4.5
Other – go to hospital	17	1.5
Other – pharmacy	8	0.7

### **Comments**

One in eight respondents took the opportunity to add comments. The largest number of comments were 40 (29% of all comments) were about access to health services in general and not about access to information. All comments, grouped by theme are presented in Appendix 3.

### **Themes**

The following seven themes were identified:

#### Location and access to health information

These 15 comments contained comments as to where information is found and suggestions as to where information about health could be placed. Within the latter category included a printed directory especially for those who don't have use the internet, in local and free papers as a section on health and listings pinned up on notice boards or available to pick up in shops/businesses. There were nine comments from people largely concerned that information in general is becoming internet based and that they can't use it.

### Council directories

All 24 comments bar one were from people who had internet service. The majority of the comments in this theme were about the lack of awareness of the existence of council community information guides which duplicated what they noted in response to an earlier question.

### Existing knowledge

Fifteen respondents noted that they already had sufficient knowledge about how to access services in their town as they or their families were either long term residents or were working in the health industry.

### Survey

There were seven comments praising the fact that the survey was being undertaken.

### Own health

There were nine comments from people who offered information that they use natural remedies or are never sick.

### Provision and access to health service

The largest number of comments (40) was not about health information but about the number of health facilities in their towns and the access to health services in general. There were 16 comments from Dalby of which five praised the provision of health services in the town and 11 expressed dissatisfaction. All six comments from Toowoomba, seven of nine from Kingaroy and all seven from Warwick were negative about the number and access to health services.

### Other

There were 21 other comments outside of the above categories. These ranged from concern about the 13 Health telephone service operated by Queensland Health to a plea for assistance with moving house!

## ***Discussion***

### **Response Rate**

Response from the surveys that required return (mail survey and clinics) was below 15%. Although low this response rate is consistent with these types of surveys. Concern is always expressed as to how representative results are of the population and for that reason different mode of data collection were employed. It was expected, and indeed demonstrated that there were slightly different demographics of the respondents. However, overall results were so similar that collectively we are confident that the data are representative of the general population.

The low response rates may suggest that interest in health is low. Only when support is needed is it sought. This only emphasises the fact that information about health services needs to be complete, easily accessed and in a format that is easy to use.

### **Internet access**

Almost 60% of respondents indicated that they had access to the internet. This figure is consistent with Australian national statistics for household internet access. Use of the internet was however highly age dependant and only one in five of those people over 65 use the internet. This is an important consideration on information access as these people are those who are most likely to have demands on the health services.

### **Awareness of community directories**

The awareness of community directories was around one in three people who had internet access. One town, Dalby, had greater awareness than the other three towns. The reason for this is not known.

It should be noted that the question asked about awareness of the directory and not specifically about its content. After completion of the survey in the street respondents were shown a list of health services that were offered on the site. Most people are surprised by the extent of local services and that information about those services may be found in the community directories. An intention to use the facility more often was expressed by many.

As the directories have been established to provide information about all sorts of services in the town the level of awareness raises an important question, namely is this a good return of investment? However perhaps a more relevant question is can councils get a greater return with minimal extra work?

It may be argued that Kingaroy users may be aware of South Burnett database rather than the council one even though they are one and the same. The same may also be argued for Toowoomba which has a local paper sponsored database. However there was no evidence from answers to other questions or from free comments that there was more awareness or use of these other resources.

### **Use for information about health services**

The actual use of council directories to access information about health was very small. Among those people aware of the existence of the directories use was one in four. That figure, when referred back to the general population, means that fewer than one in 25 people have accessed their community directory at all for health services. Access of the directories for other services is not known as the relevant questions were not asked. However recognising that at least two of the directories are advertised with a health purpose in mind the results are very disappointing.

The data suggest that of the people who use the directories on average around three providers are looked for per year. However when these data are considered as number of services per person who has awareness of the sites the number falls on average to .7 per year and is only above one service per year for Warwick. In fact only 13 out of 1125 respondents to the study had looked at any directory more than four times in the past year.

### **Information sought**

Of the people who did access their web directories for health services the most common search was for doctors, hospitals, clinics and dentists. This information as to what services people looked for in their directories should be very important to database developers. The Toowoomba database for example does not list doctors or dentists and information about hospitals is not easy to find.

However it should be noted that the people who had used the directories were generally very pleased with the ease of use and information generated.

## **Sources of health information**

Databases are dynamic and that is the benefit of them, however despite technology people still rely on the age-old systems of word of mouth. Doctors are still the most important source of information and they need to recognise this and be up to date with all local services. However some of their time is probably being unnecessarily called upon to provide information that could be obtained elsewhere and as there is already a shortage of GPs any reduction in their time would be beneficial.

Commonwealth Carelink was hardly used at all. This despite the fact that 56% of the respondents are over 45 and are more likely to need access to aged care and respite services for self, friends or family. This finding is consistent with that found in recent strategic planning workshops where knowledge of the organisation, let alone the resources that were offered, was minimal even among professional health care workers.

## **Overall comments**

Most current sources of information about health information are fragmented and inconsistent in appearance and content. Existing directories from a variety of sources do not fulfil a local function and Council directories may be the best source of complete local information. However for them to serve this function some changes are required.

Health service information is essential to the community and should be offered special consideration. This special consideration should extend to provision of prominent advertising on the HOME page of council web sites and readily accessible free printed copies for non internet users.

Community directories should be made as simple as possible; simple to access, simple and intuitive to use and should offer simple instructions. If directories are found to be lacking in any of these areas then the audience may be lost. It is strongly recommended that directories are field tested by the users and not just the developers.

Searches must be intuitive, simple and trust worthy. If results from the same directory are inconsistent confidence by the user is lost. Our findings suggest that in some cases more attention is needed to search facilities to address this situation.

The location of the directories on the web sites could be improved. All four directories we studied are four mouse clicks away from the home page. The name and location of

the directories are not obvious. We believe to offer information about health services under the title of business is confusing. It is important to remember that in many cases those members of the community who may need health providers the most are the people who have the lowest computer literacy. Tutorials on use could be offered through the town library.

A challenge to making these directories the first point of call for many people is for them to be confident that the data are complete. Council directories that restrict themselves to public and non governmental organisations are not providing the complete service that they could so easily do. The issue of omitting private organisations reduces the impact especially for those providing health services whether they are for profit or not. Furthermore some private health providers are actually supported by external funds to provide free services.

Directories are only as good as the entries in them and the biggest challenge is to convince providers that their entries are important. How that can be achieved and how up-to-date information can be guaranteed is a challenge, but we do not believe that this is insurmountable if the subsequent use is demonstrated to be high. Strategies may be employed to increase and sustain engagement.

## ***Conclusions and recommendations***

- Community access to information about health services is essential and is made even more important by an aging population.
- Council web sites are poorly known about by members of the community yet have the potential to be a valuable source of information.
- Councils may need to assess the resources going into these sites, however our recommendation is to build on these resources and not abandon them.
- Community directories usefulness is reduced if entries are incomplete. Directories should be elevated to a position that their content is complete and they are universally known as the best source of local information. In order to do this a greater commitment from councils may be required.
- Community directories are all currently buried three or four layers deep in web sites. They should be more conveniently located or linked directly from home pages. Ideally we recommend that each council home page should have a “health services” button.
- Directory developers should ensure that the directories are intuitive to use and to ensure this the directories should be extensively field-tested by consumers.
- Search facilities should be more expansive than currently employed and instructions offered as to their use.
- There is a need to advertise the directories better through local free newspapers, advertising on council vehicles etc.
- Ideally directories should be standardised and in future councils may work together to accomplish this.
- Health service information should be made available in printed form for non internet users.

## ***Appendices***

### **Appendix 1: Surveys and plain language statements**

# TOWN NAME STREET SURVEY

Are you 18 years of age or above? Yes No  
Do you use any health services (e.g. Doctor or Dentist) in Town Name? Yes No

**READ PLAIN LANGUAGE STATEMENT BEFORE PROCEEDING. Consent given**

Sex: Male Female

Age group: 18 to 24 Years 25 to 45 Years 46 to 65 Years Over 65  
years

1. Do you use the internet? Yes No (**If no go to 8)**
2. Are you aware of the existence of the health services information on the Town/Shire Council web site?  
Yes (**If yes, continue with question 3)**  
No (**If no, go to question 8)**
3. Have you ever accessed the Council web site to find out information about health services (e.g. dentists, physiotherapists, aged care services) Yes No (**If no go to question 8)**
4. How often have you used the Council web site in the last year for information about health services?  
1 to 4 times 5 to 9 times 10 or more times Never (**if never go to question 8)**
5. What health information did you look for?  

----- Doctor	----- Hospital
----- Dentist	----- Community health clinic
----- Physiotherapist	----- Aged care facility
----- Podiatrist	----- Chiropractor
----- Counsellor/Psychologist	----- Other _____
6. Did you find the information useful? Very useful Useful Not very useful Not at all useful
7. Did you find the information easy to use? Very easy Easy Not very easy Not at all easy
8. What sources of information do you use to find the health services you need?  

----- Commonwealth Carelink	----- Friend / Neighbour
----- Community newsletter	----- Doctor or other health person
----- Computer search	----- Radio/TV
----- Council	----- Yellow pages/white pages
----- Family member	----- Other _____
9. Do you have any comments?

**Thank you very much for your time.**

# Town Name Survey for Mail and Clinics



Information about health services may be found in different locations. The Town/Shire Council web site provides information about health services. The purpose of this survey is to determine your use of that information. The data collected from this study will assist us in determining where people find out about the health services in their towns. **(For each question please circle the answer that applies)**

I have read and understood the plain language statement (please tick box)

**Sex:** Male Female

**Age:** 18 to 24 25 to 45 46 to 65 Over 65

10. Do you use the internet? Yes No **(If no go to question 8)**

11. Are you aware of the Business Database on the Town/Shire Council web site?

No **(If no, go to question 8)**

Yes **(If yes, continue with question 3)**

12. Have you ever accessed the Business Database on the Town/Shire Council web site to find out information about health services (e.g. dentist, physiotherapist, chiropractor, aged care service)

Yes No **(If no, go to question 8)**

13. How often have you used the database in the last year for information about health services?

1 to 4 times 5 to 9 times 10 or more times Never **(if never go to question 8)**

14. What health information did you look for? **Tick all that apply**

- |       |                           |       |                         |
|-------|---------------------------|-------|-------------------------|
| ----- | Doctor                    | ----- | Hospital                |
| ----- | Dentist                   | ----- | Community health clinic |
| ----- | Physiotherapist           | ----- | Aged care facility      |
| ----- | Podiatrist                | ----- | Chiropractor            |
| ----- | Counsellor / psychologist | ----- | Other _____             |

15. Did you find the information useful? Very useful Useful Not very useful Not at all useful

16. Did you find the information easy to use? Very easy Easy Not very easy Not at all easy

17. What sources of information do you use to find the health services you need? **Tick all that apply**

- |       |                       |       |                               |
|-------|-----------------------|-------|-------------------------------|
| ----- | Commonwealth CareLink | ----- | Friend / Neighbour            |
| ----- | Community newsletter  | ----- | Doctor or other health person |
| ----- | Computer search       | ----- | Radio/TV                      |
| ----- | Council               | ----- | Yellow pages/white pages      |
| ----- | Family member         | ----- | Other _____                   |

18. Additional comments?

Thank you very much for your time.

## **Plain Language Statement**

**To be used for interviews**

The Centre for Rural and Remote Area Health (CRRAH) is currently undertaking an evaluation of the accessibility and quality of health service information.

The interview should take no longer than 5 minutes of your time.

The researchers are undertaking interviews with the general public using a structured questionnaire. Should you consent to participate the project will gather data about your experiences regarding health service information access. Your participation is entirely voluntary and you are free to withdraw from the interview at any time.

The data collected is completely anonymous as no information about you other than your sex and age will be collected. Once the interview is completed it will be impossible to trace your information back to you.

Any questions regarding the study can be directed to: Dr. Rob Eley, CRRAH (phone: 07 4631 5477) or Dr. Yunus Khatri, CRRAH, (phone: 07 4631 5442). Any concerns you may have about ethical issues in this study should be directed to the Human Research and Ethics Committee, University of Southern Queensland. Phone: 4631 2956.

**The interviewer will now ask you if you understand this plain language statement and if you agree to participate.**

# Plain Language Statement



## For Clinics

The Centre for Rural and Remote Area Health (CRRAH) is currently undertaking an evaluation of the accessibility and quality of health service information.

Information is being sought from the general public using a structured questionnaire. Your participation is entirely voluntary. Should you consent to participate the project will gather data from your experiences regarding health service information access.

The data collected is completely anonymous as no information about you other than your sex and age will be collected. Once the completed questionnaire is placed in the collection box it will be impossible to trace your information back to you.

Any questions regarding the study can be directed to: Dr. Rob Eley, CRRAH (phone: 07 4631 5477) or Dr. Yunus Khatri, CRRAH, (phone: 07 4631 5442). Any concerns you may have about ethical issues in this study should be directed to the Human Research and Ethics Committee, University of Southern Queensland. Phone: 4631 2956.

## CONSENT TO PARTICIPATE

Please tick the appropriate box on the questionnaire as proof that you have read the Plain Language Statement and agree to participate in the study.

## **Plain Language Statement**



### **For Mail**

The Centre for Rural and Remote Area Health (CRRAH) is currently undertaking an evaluation of the accessibility and quality of health service information.

Information is being sought from the general public using a structured questionnaire. Your participation is entirely voluntary. Should you consent to participate the project will gather data from your experiences regarding health service information access.

The data collected is completely anonymous as no information about you other than your sex and age will be collected. Once the completed questionnaire is mailed back to us in the reply paid envelope it will be impossible to trace your information back to you.

Any questions regarding the study can be directed to: Dr. Rob Eley, CRRAH (phone: 07 4631 5477) or Dr. Yunus Khatri, CRRAH, (phone: 07 4631 5442). Any concerns you may have about ethical issues in this study should be directed to the Human Research and Ethics Committee, University of Southern Queensland. Phone: 4631 2956.

### **CONSENT TO PARTICIPATE**

Please tick the appropriate box on the questionnaire as proof that you have read the Plain Language Statement and agree to participate in the study.

## Appendix 2. Local health service providers listing in the community directories by major category presented in directory.

Note: not all sub categories in the Toowoomba directory are listed.

Service category	Dalby	Kingaroy	Toowoomba	Warwick
Aboriginal Services	<ul style="list-style-type: none"> <li><a href="#">Goondir Health Services</a></li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Barambah Regional Medical Services</a></li> </ul>	<ul style="list-style-type: none"> <li>Aboriginal and Torres Strait Islander Health Service</li> <li>Goolburri Mobile Dental Service</li> </ul>	<ul style="list-style-type: none"> <li>Aboriginal &amp; Torres Strait Islander/Indigenous Health Workers Warwick Health Service</li> <li>Garndoo Jarowair Childcare Training &amp; Resource Unit Toowoomba</li> <li>Medicare/PBS Aboriginal &amp; Torres Strait Help Line:</li> </ul>
Aged Care/Services	<ul style="list-style-type: none"> <li>Aged Care</li> <li>Dalby &amp; District National Seniors Assoc</li> <li>Dalby Wambo Care Association</li> <li>Dalby &amp; District Senior Citizens Inc</li> <li>Ningana Retirement Village</li> <li>Taralga Retirement Village Inc</li> <li>Dalby Pensioner &amp; Superannuation League</li> <li><b>Taralga Retirement Village Inc</b></li> </ul>	<ul style="list-style-type: none"> <li>Canowindra Residential Care</li> <li>Orana Lutheran Complex</li> <li>St Mary's Community Aged Care Program</li> </ul>	<ul style="list-style-type: none"> <li>Aged Care Assessment Team</li> <li><a href="#">Anglicare Southern Queensland</a></li> <li>Blue Care Toowoomba Respite Centre</li> <li>Blue Care Toowoomba Village</li> <li><a href="#">Brodrribb Home Incorporated</a></li> <li><a href="#">Challenge Employment and Training</a></li> <li><a href="#">Churches of Christ Care</a></li> <li><a href="#">Churches of Christ Care: Nubeena Retirement Village/NuMylo Aged Care</a></li> <li><a href="#">Downs Industry Schools Co-operation Inc. (DISCO)</a></li> <li><a href="#">East Creek Childcare</a></li> <li><a href="#">Lourdes Home for the Aged</a></li> <li><a href="#">Magann House</a></li> <li><a href="#">Northridge Salem Rest Home</a></li> <li><a href="#">Nubeena Aged Care</a></li> <li><a href="#">Queensland Aged and Disability Advocacy Inc.</a></li> <li><a href="#">RSL Care Westhaven</a></li> <li>Rural Allied Health Team</li> <li>Salem Lutheran Rest Home</li> <li><a href="#">Senior Citizens Day Respite Centre</a></li> <li><a href="#">Syme's Thorpe Home For The Aged</a></li> <li><a href="#">The Yukana Retirement Village</a></li> <li><a href="#">Toowoomba Community Care</a></li> </ul>	<ul style="list-style-type: none"> <li>Home and Community Care (HACC)</li> <li>Warwick Day Respite Centre Killara Blue Care</li> <li>Warwick Community Health CHIP Nurse</li> <li>Akooramak Home for the Aged</li> <li>'The Oaks' Nursing Home Warwick Health Service</li> <li>Homestead Aged Persons Hostel (Allora)</li> <li>Kadimah Nursing Home (Killarney)</li> <li><b>Meals on Wheels</b></li> </ul>

- Ambulance**
- Jandowae Local Ambulance Committee
  - Local Ambulance Committee
  - Department of Emergency Services South Western Regional Office
  - Queensland Ambulance Service
  - St John Ambulance Cadet Division
  - St Johns Ambulance Australia
  - Toowoomba Community Care Transport Incorporated
  - Warwick Ambulance Service
- Allied Health**
- Sandra Langton Physiotherapy
  - South Burnett Podiatry
  - Blue Care Toowoomba
  - Blue Care Toowoomba Village
  - Rural Allied Health Team
- Alternative health**
- Kingaroy Natural Therapies Centre
  - Seage-Pape, V. - Naturopath
  - Australian Academy of Tai Chi
  - Authentic Yang Style Tai Chi Chuan School
  - Darling Downs Yoga Centre (aka, Yoga with Lesleigh)
  - Yoga Queensland Pty Ltd (Toowoomba School of Yoga)
- Blue Care**
- Blue Nursing Service
  - Blue Care Blue Nursing Kingaroy, Murgon, Nanango
  - Blue Care Respite Service - Murgon
  - Blue Care Toowoomba Community
  - Blue Care Toowoomba Respite Centre
  - Blue Care Toowoomba Village
  - Commonwealth Carer Respite Centre: Darling Downs
  - Allora/Clifton Blue Care
  - Warwick Blue Care
  - Warwick Blue Care Auxiliary
- Chemists/Pharmacists**
- Amcal Dalby Pharmacy
  - Friendly Society Dispensary Ltd
  - Morrie Farmer Chemist (Jandowae)
  - Blackbutt Pharmacy
  - Blooms The Chemist – Kingaroy
  - Chem-Mart – Kingaroy
  - Lonsdale's Soul Pattinson
  - Nanango Pharmacy
  - Allora Pharmacy
  - Duggan's Amcal Chemist
  - Killarney Pharmacy
  - The Friendly Societies Pharmacy
  - Warwick Pharmacy

- **Wondai Pharmacy**

**Chiropractors**

- Dalby Chiropractic Clinic
- Hooke Chiropractic Centre

- McDonald, G.
- Barham Chiropractic
- Nanango Chiropractic

- Barham Chiropractic Clinic
- Esdale Family Chiropractic
- Spinewise Chiropractic

**Clinical Nutritionalist**

- Taylor, J.

**Counselling**

- Joan Saunders

- Aggregate Corporation
- Centacare South Burnett
- South Burnett Counselling Office

- Adult and Child Health Psychology Services
- Asthma Foundation of Queensland
- Bonnie Babes Foundation Incorporated
- Burstows Funeral Care
- Catholic Education Office, Diocese of Toowoomba
- Centacare
- Churches of Christ Care: Nubeena Retirement Village/NuMylo Aged Care
- Community Health
- Diabetes Australia - Queensland
- Discoveries Pty. Ltd.
- Domestic and Family Violence Prevention Service
- DPI Farm Financial Counselling Service
- Hepatitis C
- Kids Help Line
- Kobi House
- Lifeline Darling Downs and South West Queensland Limited
- Lifeline Darling downs; Family Therapy Team
- Men and Relationships Program
- Men's Line
- Multiple Sclerosis Society of Queensland
- Parentline
- Pre-term Infants Parents Association (PIPA)

- Allied Health Warwick Health Services (Social Workers):
- Bush Children's Counselling & Support Services
- Centre for Healthy Living
- Compassionate Friends (Anglican Church)
- Condamine ASSIST
- Private Counselling Service Warwick
- Veterans' Support & Advocacy Service Australia Inc - Warwick:
- Women's Health Service (Private Counselling)

## Crisis Support

- Dalby Crisis Support Association Inc
- Ozcare 42 Archibald Street
- Domestic and Family Violence Prevention Service
- OzCare
- Ozcare Men's Hostel
- Salvation Army Crisis Housing
- Sexual Assault Support Service
- St Anthony's Catholic Parish
- Toowoomba Youth Service
- Salvation Army
- St Vincent de Paul
- Warwick Youth Centre

## Dentists

- F Stritzel
- Renner M Paul
- Clarkson, R.M.
- Kenny, D.
- Ong, P.H
- Pye Dental Care
- Queensland Health Oral Health Services
- Watt, J.L (Murgon)
- Goolburri Mobile Dental Service
- Toowoomba Health Service
- Warwick Oral Health Service
- Mike Geisel Family Dentist
- Polkinghorne Dental Surgery
- Smiths Dentist (Allora)
- Williams Dental Surgery

## Disabled Services

- Parent 2 Parent Association of Qld
- St Mark's Further Education Centre-Waminda
- Home Healthcare
- Community Respite Options South Burnett
- Disability Aid Dogs Australia Pty Limited
- ACROD
- Australian Disability Media Association
- Blue Care Toowoomba Respite Centre
- Crossroads (QLD) Warwick Branch (Support Group for Social Activities for Intellectually Disabled)
- Endeavour Foundation

## **Emergency**

- Dalby Police Station
- Dalby SES, Aerodrome
- Jandowae SES Support Group

- **Cherbourg Hospital**
- Community Respite Options South
- Kingaroy Hospital
- Murgon Hospital
- Nanango Hospital
- South Burnett Community Private

- [Blue Care Toowoomba Village](#)
  - [Breakaway Toowoomba](#)
  - [Disability Information and Awareness Line \(DIAL\)](#)
  - [Disability Services Queensland](#)
  - [Disability Services Queensland - Friendship Program](#)
  - [Discovering DisAbility & Diversity](#)
  - [Endeavour Foundation - Kajewski Centre](#)
  - [Home Assist Secure](#)
  - [Personnel West Association Inc.](#)
  - [Queensland Aged and Disability Advocacy Inc.](#)
  - [Regional Disability Advocacy](#)
  - [Regional Disability Liaison Officer](#)
  - [Richmond Fellowship of Queensland \(RFQ\)](#)
  - [Sporting Wheelies & Disabled Sport & Recreation Association](#)
  - [The Advocacy and Support Centre](#)
  - [Toowoomba District Home Care Service](#)
  - [Toowoomba Horse Riding for the Disabled](#)
  - [Toowoomba Rehabilitation Unit Support Team TRUST \(Stroke Survivors & Carers\)](#)
  - [Toowoomba Service Providers Network Meeting](#)
  - [University Disability Action Group](#)
  - [Warrina Services](#)
  - Women Working Alongside Women with Intellectual & Learning Disability (WWILD); Sexual Violence Prevention Association
- [Commonwealth Carer Respite Centre: Darling Downs](#)
  - [Department of Emergency Services South Western Regional Office](#)
  - [Lifeline Darling Downs and South West Queensland Limited](#)

## Family welfare

- **Bonnie Babes Foundation**
- **Dalby Crisis Support Association Inc**
- **Gambling Help Toowoomba & South West**
- **Ozcare**
- **Salvation Army Family Store & Welfare Office**

## Health

- Al-Anon
- Alcoholics Anonymous
- Asthma Foundation
- Blue Nursing Service
- Dalby Community Health
- Dalby Diagnostic Imaging
- Dalby Meals on Wheels
- Jandowae Blood Bank
- Jandowae Domiciliary Care
- Jandowae Meals on Wheels
- **Lifestyle Support Service**
- Lifeline Darling Downs & South West
- **Queensland Cancer Fund**
- Queensland Council of Carers

- Hospital
- Wondai Hospital

- Ozcare Men's Hostel
- Queensland Youth Housing Hotline
- St Vincents Hospital Emergency Centre
- Toowoomba Youth Service

\* see note below

- **Aggregate Corporation**
- **Aquarius Naturopathic Clinic**
- Audio Clinic Queensland
- Australian Breastfeeding Association
- Australian Radiological Imaging
- Axion Biomedical
- **Barambah Aboriginal Community Care Agency**
- Blue Care Blue Nursing
- Centacare South Burnett
- **Cherbourg Community Health Service**
- **Cherbourg Respite Centre**
- **Disability Services Queensland**
- Farrhome Nursing Care Unit
- Taylor, J. - Clinical Nutritionist

\*all the listings in other categories such as chiropractors, optometrists and doctors also appear in this category.

- Aboriginal and Torres Strait Islander Corporation for Health, Education and Training Staff
- Aboriginal and Torres Strait Islander Health Service
- Acquired Brain Injury Outreach Service
- Acute and Community Mental Health Unit
- Adult and Child Health Psychology Services
- Baillie Henderson Hospital
- Better Health Self Management Course
- Blue Care South West Regional Office
- Blue Care Toowoomba
- BreastScreen Queensland
- Child, Youth and Family Health
- Commonwealth Carelink Centre Darling Downs / Southwest Queensland
- Community Health
- Consumer/ Carer Advisory Group - Toowoomba District
- Darling Downs Public Health Unit
- National Heart Foundation
- Older Persons Mental Health
- Southern Downs Health Service
- District
- Breast Screen
- Community Child Health
- Public Health Unit
- Warwick Child Health Service
- Pain Treatment Clinic

## Hospitals

- Dalby-Jandowae Health Services
- Cherbourg Hospital
- Kingaroy Hospital
- Murgon Hospital
- Nanango Hospital
- South Burnett Community Private Hospital
- Wondai Hospital
- Baillie Henderson Hospital
- Bonnie Babes Foundation Incorporated
- GROW
- Riverton Statewide Program Community Child Health
- Soroptimist International of Toowoomba
- St Andrew's Hospital Counselling Service
- St Andrews Hospital Auxiliary
- St Andrews Toowoomba Hospital
- St Vincent's Hospital
- St Vincent's Hospital Pastoral Care
- St Vincents Hospital Emergency Centre
- Toowoomba Base Hospital Alcohol and Drug Recovery Group
- Toowoomba Hospital Foundation
- Allora Hospital
- Clifton Hospital Coop Ltd
- Killarney and District Memorial Hospital
- Warwick Health Services

## Medical Practitioners

- IE Keys
- Myall Medical Practice
- RM Keighran
- The Gatehouse Medical Practice
- Armstrong, K
- Banerjee, N
- Butwell, B
- Cameron, A
- Allora Medical Centre
- Clifton Medical Centre
- Condamine Medical Centre
- King Street Medical Centre

- Carr, B
- Eadie, J.
- Fulcher, B. and J.
- Glasson, W - ophthalmologist
- Jonsson, C.I.J.
- Khan, A
- Lipp, P,
- Machin, A.
- McAllister, G
- Mohan, S.
- Morgan, F.
- Ogle, R.
- Oommen, V
- Robertson, D
- Robinson, A
- Ruscoe P.
- Tellam, D.
- Thomas, A.
- Van der Merwe, A.
- Walsh, I
- Wynn, P
- Killarney Medical Centre
- Millmerran Medical Centre
- Warwick Medical Centre
- Warwick Women's Health Service

## Mens health

## Mental health

- Acute and Community Mental Health Unit
- Consumer/ Carer Advisory Group - Toowoomba District
- GROW
- Older Persons Mental Health Services
- Richmond Fellowship of Queensland (RFQ)
- Toowoomba Clubhouse Association Inc.
- Post Natal Depression (PND) Support Group
- Southern Downs District Mental Health Service

## Occupational Therapist

- **Van der Heyden, B.**

- Community Health

## Optometrists

- Chas Sankey Fraser
- JR Davies

- Fitzpatrick, G.N
- **Laubman and Pank**
- Lee See, M

- Chas Sankey Fraser

## Orthodontist

- Rodney Mason
- Pathology**
- Sullivan Nicolaides Pathology Laboratories
  - QML Pathology Laboratory
  - **Sullivan and Nicolaides Pathology**
  - Toowoomba Health Service
  - Mullins & Smith Specialist Orthodontic Care
  - Wong's Orthodontic Service
- Physiotherapist**
- Bunya Therapy Centre
  - Dalby Physiotherapy Centre
  - Fowles, V.
  - Langton, Sandra
  - **Nanango Physiotherapy**
  - **South Burnett Physiotherapy**
  - Blue Care Toowoomba Community
  - Body Talk Manual Therapy
  - Hawaiian Massage
  - Warwick Physio Works
  - Warwick Physiotherapy Centre
- Podiatrist**
- South Burnett Podiatry
  - Blue Care Toowoomba Community
- Psychologist**
- Tricia Stewart
  - Aggregate Corporation
  - Lukes, D. (Meringandan)
  - Withers-Mayne, C (Mugon)
  - Adult and Child Health Psychology Services
  - Discoveries Pty. Ltd.
  - Warwick Medical Centre
- Social/Social Workers**
- Centacare South Burnett
  - Cerebral Palsy League of Queensland (South Queensland Country Region)
  - Community Health
  - Lifeline Darling downs; Family Therapy Team
  - Reconciliation Australia
- Speech Pathologist**
- Cleaves, D.
  - Centenary Heights Special Education Unit
  - Warwick Health Service (Allied Health)
  - Warwick West School Student Services
- Women's health**
- **Australian Breastfeeding Association - Kingaroy**
  - Centacare
  - **RSL Home Care**
  - Australian Breastfeeding Association Toowoomba Group
  - BreastScreen Queensland
  - Centacare
  - Children by Choice
  - Family Planning Queensland (FPQ)
  - Fresh Hope Association Incorporated
  - Pregnancy Help Queensland Inc.

## X Ray/radiology

- Dalby diagnostic imaging
- **Australian Radiological Imaging**
- St Vincent's Breast Centre
- Survivors of Abortion Ltd
- Women's Health Queensland Wide
- YWCA Toowoomba Encore Program
- Queensland X Ray

## Appendix 3: Comments from respondents

<b>Placement and access to health information</b>
Free paper needs medical services
Health info should moved to Government section instead in community guide
Hospital service needs advertising in local paper. May be in open days at Health services
Do not have the Internet
Do people not use phone any more?
I have found any information I need to get has been easy and helpful
I have no problems with the present set up
Very difficult to find in telephone directory.
May be doctor could advertise if they bulk bill as it is hard to find one who does, takes a few phone calls
A flyer to the public might be good advertisement if not the Chronicle perhaps
Have not had problems finding information
What I do is convenient and satisfactory for me
Should be advertised in the local paper for current and new people to town to be aware of it
A printed resource directory would be an asset for those of us older Australian who do not use computers
I would have to see more information and education given to stores & public building regarding disabled access to these necessary places
Unless you have a computers and on the web. High technology has left people my age well truly in the dark
Unless you see the internet, it seems that you cannot get the information
<b>Council directories</b>
Any health service information available on Dalby info must be well hidden as I have seen it?
Didn't know Dalby existed as we don't use the internet much
I did not look for this service at Dalby info before but I probably will now that I knew
I have only just moved to Dalby, now that I know about the site I may use it in the future
I only knew it was on internet was. I pay water, gas and rates online. I did not know I could access health services
The Dalby Info site isn't as good as it is made out to be
Use Dalby Info lots, little advertisement about Dalby Info
Completely unaware of this publication
Didn't even know that council had a website with that info on it
I have no idea what the Toowoomba Community Info Directory is
I may have used it without being aware of the name of it
I'd like to know more about where to find the TCID.
So many community directories seem to be published in Toowoomba. I am not sure which one you are referring to, who publicized and how it is promoted
This survey has brought the existence of Toowoomba Community directory to my attention. If I am in need of this type of info in the future I will be sure

Very incomplete list -not GP's list, no allied health at all. Difficult to use.
Now that I know there's a Database I may have a look next time I need to
Council should advertise that this service is available
Did not know it existed
I find the Warwick shire council website so frustrating I don't bother using it. Can't even find the community resources directory because everywhere I go I get blank pages
I had no idea this service existed, you should send out a magnet once a year with all the phone numbers of the local health services I know I would find that very helpful
I was not aware the community resource Directory was useful in this way. I will look it up
I would use the community resource directory if needed. So far have not had that
<b>Existing knowledge</b>
I am always health worker so I am aware of current health services
Know whose here
Lived 25 yrs know who's who
Having live in Toowoomba all my life. One knows what is available
I already have that information, chiropractor, etc. I have used the same areas for service
I am fairly new to the city but have brother and sister nearby and they have been here for many years
I came from a medical family so they are my first source of information apart from my doctor
I have been here so many years that most of my medical etc carers have been known and used for long time
Know them all
Local people know where is what
Small town - know where every one is
As I am a nurse , I think I have access to health info
Currently employed as a health care worker in the shire-working for 2 different employers
Know the area
Length of time, knows where is everything
Moved to this area 3 months ago
<b>Survey</b>
Thank you we didn't know any thing about this service
Great people and State
Thank you for the work you are doing. It is much needed and very appreciated. God bless you.
Thank you for your time
Thanks for this
All the best
Great Survey
You are welcome!
Own health

I use natural therapies
Keeping well
Never needed
At present time, rarely seek out other information. No need! Only family doctor, optometrist/dentist
I am happy to do the nursing
Care sought only when physically injured not when ill
I am quite happy with my life
Not much use to you as I am over 80
<b>Provision and Access to service</b>
Dalby needs more doctors and dentists
Difficult at time to use the services of a dentist as Dalby has no permanent government facility
Found grief/bereavement support very poor in this town for males and females
Happy with service in Dalby
Health care in Dalby is terribly lacking and totally inadequate
I am very happy with the health services available in Dalby
I find Dalby health very satisfactory
I have found the services quiet sufficient in regard to the Doctors in the Dalby region
I think we are well taken care of
It would be good to have our old hospital system when we used to be run by local members
No one should have trouble finding out what health services are available as there are so few here
Not happy with aged care services going community services
Our concerned Dalby no longer has a visiting surgeon to our hospital
Public hospital is too slow
We need more doctors in Dalby
What health services community health are useless and not interested their meetings are held at night when disabled and people on their own can not attend.
What health services! I work & cannot afford to see a doctor, there is no bulk billing unless you are a pensioner or on the dole. The health system is disgusting
Need to see more services for single gay white male
Please do a survey about waiting lis. My husband has waited 3 years for a orthoscopy an despite pain depression and social isolation with a health problem.
The health service in Toowoomba stinks I have been on a waiting list for two years to see a specialist about a prostrate problem
Toowoomba has a pretty bad public health services
Toowoomba health care via doctor and chemist very high and I am in late 80's and very impressed with service we get
Will this improve health services for Toowoomba?
Do any thing to make local medical services work better?
Hard to get doctor
I consider this town t be well served by the Medical, Dentist and Allied Health Professionals`
Kingaroy hospital is in desperate need of review
Kingaroy is well served with doctors, specialists, etc but I think the public system could use more doctors and a lot more staff

More caring for cancer free
Queensland health system needs to be improved
We need more public doctors
More information needs to be provided
I have used the above to try to access information for special needs students and non-English speaking students. It is very difficult for these people to become aware of any resource
I go to Toowoomba for better service
More funds should be spent on health care
Not all health services are easy to find when needed, eg. mental health. Help is generally needed outside normal 9am-4pm office hours
Qld health is poor service and long waiting times
the doctors here take too long, what if some one had a serious problem. Like hurry up I have to catch the bus home
We have travel for hour's to see specialist
<b>Other</b>
Small community, not hard to find health services.
Have not bothered
People are becoming more aware of the need of each individual to take more responsibility for their own health needs
People in the country need more help with all sorts of medical care
What a waste of tax payer money
What can I write when I am unfocused
More information on blood collection service would be handy
I feel for some people it is easy to access what services are available, however many people are unaware of what services they need and how to access them
Have just moved to Toowoomba
Having a family GP and private health insurance we are well cared for
Many organisations have names that don't really indicate what their services are - and whether they are medically oriented, private or governmental
Optometrist provides a very important role in the health of our eyes.
Our GP is our main source of health services. We only attend his clinic and have for the past 8 years
Traditional medicines are no longer the place to go when you are unwell; They do not have health answers. Alternative health care such as Chiropractor etc are more relevant
Do council have relevant info or people behind counters' informed doctor perhaps general public not aware that councils will know about health welfare concerns?
We need people that help us move
Health complex
I arrived in Queensland from overseas three months ago
I have heard something about nurses diagnosing patients over the phone and I don't agree with that. Is this what this survey about?
I like to know more about age care facilities an d health
I think some people have expectations that are too complicated! If you are sick, go to a doctor. Why complicate things? Keep it simple and inexpensive

## **Appendix 4: Town community information directories**

### **a) Dalby**

Dalby's community information directory is a privately run database that is a "business, employment, real estate, accommodation, restaurant dining and tourist guide to the Dalby region". Referred to both as *Dalby.INFO* and *Dalby.info*, the directory does not claim to be the access to health services, although most of Dalby's health services are to be found in the directory. The directory thus has the potential to be an extremely valuable health resource.

*Dalby.INFO* is accessed either directly (<http://www.dalby.info/>) or by two ways from the Dalby Town Council web site; either by the *Dalby.Info* link at the bottom of the council home page to the sites home pages or via an item labelled *Directory A\_Z* on a drop down menu labelled *Business Profile*. The latter mode of entry opens a page named *Business Directory* that offers further information. Clicking on the hyperlink opens the directory page of *Dalby.Info* in a new browser window. All business and organisations in the Dalby region have a free listing in the directory. There are additional charges for listing in multiple categories and for larger profile displays that include web links, an email link and a description of its services.

The directory home page lists 20 categories including one named *Health and Lifestyle*. This category in turn offers 20 sub categories ranging from 10 Pin Bowling to X ray. Although health service providers may be found in several of the sub categories of *Health and Lifestyle*, they also scattered elsewhere appearing in sub categories within the other main categories of *Community, Government and Professional*. Finding a provider through the home page's categories therefore may involve some trial and error.

Entries across all main and sub categories may be viewed by using the site's two search facilities. One search is by a drop down menu labelled *business type* and one by a free word entry labelled QuickFIND. Entering *Health* in QuickFIND only produces eight entries because the QuickFIND search is linked to the only to the full or part name of each entry and is not linked to other details such as profession or category of service. This search facility thus omits entries if the word or part word does not appear in the name. For example entry of *physio*, *physiother* or *physiotherapy* all result in a listing to the **Dalby Physiotherapy Centre**. The **Bunya Therapy Centre** which also offers physiotherapy is not listed by this type of search as the word or part word *physiotherapy* is not in the title. The search facility does not recognise professions so that entry of *physiotherapist* in the same search yields no

result.. Similarly *chiropractic*, *chiro*, *practic* result in two chiropractic providers been displayed, however entering *chiropractor* provide no results.

The other search function provides different results. Clicking on *Health* in the drop down *business type* provides a list of 45 entries. All but two of the entries are what may be referred to as basic entries which offer just the name, address and phone number of the provider. Unfortunately no profession is listed and so the type of service offered is not known if it is not listed in the business name. For example although the service provided by the **Dalby Chiropractic Clinic** is clear, the professional services offered by **IE Keys** or **Lesley Weier** or **RM Keighran** is unknown unless their names are entered in the QuickFind search. The other two of the 45 entries under *health* offer more information. Presumably a fee has been paid, and for this listed are links to web sites, email addresses and other information (see Table 2).

It may be seen therefore that the directory search facilities requires some familiarity with search techniques and knowledge of limitations to yield complete results. Furthermore the searching is not as intuitive as it may be. For example where would someone search for doctors? There is a full list of doctors in the sub category *medical practitioners* in the *professional* category. However would most users intuitively look under *professionals* to find a doctor? Given the other choices in the database, this is not necessarily the place where one would intuitively look for doctors. More obvious choices for searching for a doctor may be in QuickFIND or under *Health* in *Business type* or within *Health and Lifestyle* in the home page category list. However entering *doctor* to the QuickFIND produces no results as word does not appear in the title of any of the medical practitioners (entry of the word *medical* does result in two entries for medical practices in which the word *medical* appears in their name).

We tested people's use of the directory by asking colleagues to look for doctor and in every case people either entered doctor in QuickFIND or clicked on Health and Lifestyle as their first move. Although the directory does not promote itself as being the source of information about health in Dalby it could serve this function quite easily. To do this effectively we suggest that more awareness of the directory is required, the search function needs to be tightened up and the information about health consolidated and made more intuitive by perhaps moving categories.

### **b) Kingaroy**

The Kingaroy directory is labelled *Business database* and access to further information and the database itself is via a drop down menu on a *Business* tab on the Council home page.

The *Business Database* is drawn from the South Burnett's regional online business database SouthBurnett.biz which itself is maintained by the Chamber of Commerce and Industry on behalf of the Kingaroy Shire Council.

The Kingaroy database is geared to business and is advertised as “*our region's central business database [which] holds the details of every business in our Shire (as well as every other business in our region)*”. However the database does contains a lot of information about health and offers extremely detailed entries as indicated in Table 2.

Entry in the database is free and undertaken by completion of an online form. Categories are offered in the entry process but are not offered as a means of searching the data on the council web site. Categories, including one of Health and Welfare, are however offered on the web site of the parent database <http://southburnett.biz/>.

The Council site does have a search facility by 16 towns within the shire or across all towns. There are however no instructions given and is not clear to users what terms to use, e.g. *counsellor* and *counselling* yield 1 and 6 entries, respectively. A search by *health* yield 5 pages of entries, each page containing about 40 organisations. The town search facility gives all business entries within the chosen town and a more refined search for example by category within town is not possible.

Although the directory does not promote itself as being the source of information about health it could serve this function quite easily. To do this effectively we suggest that more awareness of the directory is required, the search function needs to be tightened up and instructions on how to search given. Furthermore the directory should not be hidden. It is not intuitive to look for health services under business.

### c) Toowoomba

The Toowoomba *Community Information Directory* is accessed via the *Community* link on a *Quick Link* menu on the Council home page. A *Community Information Directory* page opens in a new browser window with instructions on use. The description states “*from Hobbies to Health, Education to Environment, Toowoomba provides an extensive range of community services and facilities to improve and enrich our lifestyle*”. Entries may be submitted to the Council for inclusion into the directory by a downloadable Word Form. The complete directory can be downloaded to file and there is a zip version. Each entry has extensive information about the service provided including in many cases the times of operation (Table2).

The directory has multiple categories and a search function; however entries are limited to public and community organisations. Health professionals in the private sector are not in the database. Consequently although the directory contains a large number of entries for health services, of all the four directories we studied this one is the most limited. This reduces the directory’s value as a source of information about health services.

In addition to containing no private health providers a major limitation to the database is that major public health providers have not offered their data for entry into the database. Some sub categories within health, for example allied health, have no entries. Nor are there any entries in *Hospitals – Public Health Services*. The absence of private practitioners means that a search of *physiotherapy* only yields one entry (Queensland Health Community Health) and *doctor* only two (Royal Flying Doctor and, curiously, the Sisters of Charity Outreach Centre). There are no listings for *dentists* but two for *dental services*. One observation on the directory is that it offers radically different results for similar entries with little direction on how search terms should be entered. Examples follow:

- *Counsellor* has two entries and *counselling* 48 suggesting that the health service rather than the professional offering the service should be used in the search term. However *podiatry* has no entry while *podiatrist* has, which is the reverse.
- *Physiotherapy* and *physiotherapist* both result in one service however the two listed services differ.
- *Disabled services*, *disability* and *disability services* yield 2, 22 and 6 entries respectively.
- The number of entries for *social work* (2) is doubled by entering *social worker*.
- *X ray* offers one entry which is a Church.
- Entering *hospital* in the free search produces 13 entries whereas *hospitals* (plural) results in only 3 entries. However the plural term *hospitals* is an offered

sub category within *health services* when browsing by category. This sub category offers two further sub categories of *private* and *public health services*. The former has 3 entries and the latter (i.e. public) none!

This inconsistency in results compromises the directory usefulness, especially for people who are not too conversant with searching. We would strongly endorse making the TCC Community Directory as THE source of information about health services in Toowoomba. However this requires a major commitment by council and a major commitment by health providers. Our finding suggest a) more advertising is required to make people aware of its existence, b) putting a link to the database on the main page of the directory, c) making resources about health prominent on the home site perhaps by the use of an icon and d) including all health and allied health professionals in the directory in clear categories.

#### **d) Warwick**

The Warwick web site states the *Community Welfare Directory* is current as of 2004 but the title page of the directory itself is dated January 2006. The introduction to the directory states that “*all identified services and organisations relevant to the health and well being of the Warwick and Districts community are included in this Directory, as well as other services that may be useful for referring clients*”. The directory is in the form of a pdf file which may be opened on line or downloaded to file or print. The directory is also available on CD (on request), email and hardcopy.

The directory is accessed from a drop down menu on a *Lifestyle and Community* tab on the Council home page. This opens a *Lifestyle and Community* page with a menu button labelled *Community Organisations*. This then opens a further page with a hyperlink to the *Community Welfare Directory* file. There is no instruction that Adobe Reader is required and no option provided to download the free Adobe software.

Most entries in the directory have name, address and phone numbers only, however there are a few with fax numbers and web page links. Community organisations may add information by contacting council. The services listed in the directory include many help lines and other health service providers not resident in Warwick and environs. Although listing in the directory is restricted, the entries for local health providers are extensive as the definition of community organisation have been extended to include medical practitioners, dentists, chemists, optometrists and other allied health professionals.

Entries are categorised by sector or profession although some better known organisations are listed under their organisational name, for example Blue Care. A table of contents lists entries by categories and an index at the back lists all entries alphabetically by name. Neither list is hyperlinked to the page in the directory where the entry appears.

Search is possible through the Adobe word search facility, however no instructions are provided. The directory is extensive and useful and appears to contain a comprehensive listing of health services.

We recommend advertising to increase public knowledge of its existence, the directory to be made available in print version at Tourist Information. Ideally in future there will be a dynamic directory backed by a database. We would also suggest that instructions about Adobe are given as well as how to search in that software package.