

Committee Secretary  
Education, Employment and Small Business Committee  
Parliament House  
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Dear Committee Secretary

**RE: Health and Wellbeing Queensland Bill 2019**

My name is Dr Sultan Linjawi. I am a diabetes specialist.

I have practised in the United Kingdom and New South Wales. Recently, I moved to Queensland. Throughout my career, I have treated people with prediabetes, more than 10,000 people with type 2 diabetes and more than 1000 people with type 1 diabetes.

I commend the Government's Health and Wellbeing Queensland Bill 2019 to the Committee, and I would welcome the opportunity to appear before the Committee.

As the Minister for Health and Ambulance Services The Honourable Steve Miles said in his First Reading Speech, the Bill has the stated objective of establishing "a *statutory body that can work across boundaries to promote health and wellbeing by funding and coordinating efforts to address the factors that prevent Queenslanders from being active and healthy*".

This objective supports the Government commitment to increase the proportion of Queenslanders with a healthy body weight to increase by 10% by 2026.

Shockingly, the explanatory notes for the Bill state:

*"The costs associated with these risk factors are significant for individuals and the community. In adults, being overweight or obese frequently results in chronic diseases such as Type 2 diabetes, heart disease and cancer, which can reduce life expectancy by up to 10 years. It is estimated that obesity-related illness had an estimated cost on the Queensland healthcare system of \$756 million in 2015. When the additional costs of absenteeism from employment, losses to productivity, loss of wellbeing and early death are included, the total financial impact on the Queensland economy was estimated to be \$11.2 billion."*

To put that in context, the cost to the Queensland economy is almost two-thirds of the total budgeted expenses for Health, including Queensland Health, Hospital and Health Services, and Queensland Ambulance Service, of \$17.3 billion this financial year.

The costs to the Queensland economy is the equivalent of more than \$2000 for every Queensland man, woman and child. The costs are more personal for many

Queenslanders and their loved ones. Aside from the increased risk of early death, there are health complications including amputations.

A Diabetes Australia report found that Queensland dominated the top 10 locations with the highest rates of hospital admissions for diabetes-related amputations in Australia. Based on an admission rate per 100,000 people, the Queensland outback was 2<sup>nd</sup> with 73 admissions, Cairns was 6<sup>th</sup> with 37 admissions, Darling Downs/Maranoa was 9<sup>th</sup> with 32 admissions and Townsville in 10<sup>th</sup> position with 32 admissions.

As a specialist, I know such an Authority to promote for initiatives to promote healthy and active lifestyles, and reduce the cost of chronic disease, is overdue.

Queensland and Queenslanders pay too high a price.

That is why I have developed and launch the app MyHealthExplained. I have attached background of MyHealthExplained and a proposal I have made to the Government to pilot the app with the support its use and help Queenslanders manage diabetes.

The Queensland Health and Wellbeing authority – based on the Bill – is an appropriate vehicle for helping Queenslanders to be more active and healthy.

The challenge for the authority, the Queensland Government and health professionals is to ensure Queenslanders are encouraged to be part of the journey and stay on their own personal journey otherwise the authority will eventually be an abandoned vehicle.

Dr Sultan Linjawi

## My Health Explained

### Introduction

My name is Dr Sultan Linjawi. I am a diabetes specialist and I have practised in the United Kingdom, and in Australia, both in New South Wales and most recently Queensland.

Throughout my career, I have treated people with prediabetes, more than 10,000 people with type 2 diabetes and more than 1000 people with type 1 diabetes.

I have developed an online 12-week app-based video education and treatment program for people diagnosed with diabetes and their caregivers, called *My Health Explained*. Please follow link <http://www.myhealthexplained.com>. We deliver the content using high-quality, engaging videos. An example is our "[Get back your 7 years](#)" video

The app is designed to educate and support users to personally manage their diabetes, supported with the highest quality and consistent education no matter where they live.

### **A shared problem -- Diabetes and chronic disease in Queensland**

Diabetes is a growing problem in Queensland, across Australia and around the globe.

The Health of Queenslanders 2018 report, released by the Minister and Chief Health Officer, revealed complications with diabetes accounted for 25% of potentially preventable hospitalisations in Queensland.

Diabetes Queensland found that:

*"Every day a further 280 Australians are diagnosed, including about 60 people with type 2 and up to two people with type 1 diabetes in Queensland"*.

That is an extra 22,000 Queenslanders – or the equivalent of the population of Maryborough - being diagnosed with diabetes in our State each year.

Diabetes Australia has reported of the 4400 amputation across Australia attributable to diabetes, 821 are undertaken in Queensland – almost one in five. Indeed, the rate of admissions for amputations in four Queensland regions are among the nation's highest. For Aboriginal and Torres Strait Islander Australians with diabetes, they are 38 times more likely undergo a major leg amputation compared to non-indigenous Australians with diabetes.

The Health of Queenslanders 2018 concluded that:

*"Obesity increases the risk of chronic disease, particularly diabetes. In 2011–12, Queensland adults who had been measured as obese were about four times as likely to also have diabetes (based on blood measurement) as those*

*who were not obese. The prevalence of diabetes was 11% among obese adults compared with 2.6% in non-obese adults.”*

The Government has made it a goal of its Our Future State: Advancing Queensland’s Priorities plan to “*increase the number of Queenslanders with a healthy body weight by 10% by 2026*”.

This goal is set in an environment where there is an ever-expanding options of high calorie meal options, increased convenience in meal delivery options with a prevalence of new platforms, and limited education about portion sizes.

The Government has recognised this challenge with its plan to establish *Health and Wellbeing Queensland*. In justifying the need for HWQ, as a new statutory authority, the Government estimated that:

*“The costs associated with these risk factors are significant for individuals and the community. In adults, being overweight or obese frequently results in chronic diseases such as Type 2 diabetes, heart disease and cancer, which can reduce life expectancy by up to 10 years. It is estimated that obesity-related illness had an estimated cost on the Queensland healthcare system of \$756 million in 2015. When the additional costs of absenteeism from employment, losses to productivity, loss of wellbeing and early death are included, the total financial impact on the Queensland economy was estimated to be \$11.2 billion.”*

According to the Minister for Health and Ambulance Services The Honourable Steven Miles, HWQ can:

*“Work across boundaries to promote health and wellbeing by funding and coordinating efforts to address the factors that prevent Queenslanders from being active and healthy. It will do this by reducing the burden of chronic diseases through targeting risk factors for those diseases such as obesity, low physical activity and poor nutrition.”*

According to the Government, HWQ functions include to:

- coordinate illness prevention and health and wellbeing promotion activities focused on reducing risk factors for chronic diseases such as eating well, being more active and creating environments that make healthier choices easier;
- develop partnerships and engage with sectors outside the health system, identify key leverage points and facilitate new opportunities to improve health and wellbeing;
- contribute to the evidence base by coordinating research, collecting, analysing and reporting data on the health of the population, and sharing information about the outcomes achieved through initiatives and programs; and
- reduce inequity through addressing the social determinants of health, and responding to differences in health status in the community by recognising the

needs of those groups whose health is poorest, and who are most likely to have limited opportunities to be healthy.

### **A shared solution - Recommendation for a *My Health Explained* pilot**

My Health Explained can support efforts of the HWQ and other cross-government initiatives to help Queensland reach its body weight goal and reduce the burden of chronic disease in our State.

We recommend a Government-supported pilot of My Health Explained app.

#### **Background**

According to the 2018 Health of Queenslanders report, poor diet and overweight/obesity were the top three leading risk factors for Queenslanders after health. This risk applies to all Queenslanders living and working across the State.

To address this risk, we would like to propose a pilot project to assess how digital support through the My Health Explained app, supported by local expert advice, can assist Queensland reduce the risk and support Queenslanders to manage and mitigate the impacts of chronic disease on their lives.

#### **Scale of the Issue**

Queensland currently has an estimated population of 280,000 people with diabetes with the numbers growing every day.

A large number of people in hospital have diabetes and have more complex and admissions in the hospital system. The burden of caring for these people is likely to increase the workload of in hospital diabetes teams with better identification of people with diabetes using electronic record systems.

The Queensland Diabetes Network current priorities are primarily hospital based improvements to deliver outcomes to Queensland Health but the majority of people with diabetes are in the community and tend to have contact with the hospital teams once complication develop.

Queensland is a vast state with large distances between health practitioners with expertise in diabetes.

The Queensland Government currently also employs more than 228,000 full-time equivalent staff across departments and agencies in all regions of the State.

As the terms of reference for the Review into Queensland Public Sector Workforce Reporting stated: *“The Queensland public service has a clear role in ensuring the [Future State] Plan’s priorities and targets are achieved. This will mean the public service and its workforce needs to be responsive to ensure this happens.”* These priorities including the priority to *“increase the number of Queenslanders with a healthy body weight by 10% by 2026”*.

In addition to being responsive to the priority, there is an opportunity for the public service to embrace this priority. The PSC reports that the cost of absenteeism across the public service was \$617 million in 2015-16 – the equivalent of \$51 million every month or \$2700 for every FTE public servant.

The Public Service Commission has developed and released the “Be healthy, be safe, be well framework” to create healthy and safe workplaces where our people thrive and achieve their best.

Through this framework, the PSC confirms it has established a health and wellbeing committee, which focused on the multi-dimensional aspects of staff wellbeing—physical, psychological, financial, social and work wellbeing. New initiatives included mindfulness sessions, blood drive to increase donations, flu vaccinations and skin cancer assessments.

The framework also recommends actions that government agencies can do in a work environment focus on an early return to work and the working environment.

Specifically, the framework stated:

*“Early return to work reduces the risks of long-term disability and improves quality-of-life. The chances of returning to work after an injury diminish over time and can be exacerbated by chronic disease, which slows recovery and rehabilitation and leads to longer absences.”*

*“Ensure physical work environments are conducive to healthy behaviours and reducing chronic disease risk (e.g. end-of-trip facilities for active commuters, work environment design that encourages physical activity, and kitchen equipment and space to encourage healthy eating behaviours).”*

Importantly, the framework also recommends the promotion of sector-wide approaches to healthy lifestyle behaviours that reduce modifiable chronic disease risks (e.g. smoking, poor nutrition, harmful alcohol consumption, physical inactivity and obesity) through the Office of Industrial Relations and Queensland Health.

## **Proposal**

We believe a My Health Explained pilot involving 2 separate groups will demonstrate the benefits to Queensland-

- 1) 1000 people across a specific geographic region with diabetes
- 2) 1000 public service volunteers across agencies, job functions and locations.

The Government could:

- Assess the response of their employees to structured, digital-based advice on healthy behaviours consistent with the commitments under the “Be healthy, be safe, be well framework”;

- Monitor performance of the staff during the 12-week My Health Explained course, and following the pilot program to tailor new programs and information as well as update existing advice and initiatives;
- Use the results in the wider population throughout Queensland Health, and help inform the proposed Health and Wellbeing Queensland statutory authority and Government messages such as the [www.healthier.qld.gov.au](http://www.healthier.qld.gov.au) website.

We would welcome the opportunity to demonstrate the app and to discuss this proposal with you as we believe a collaboration with the Government, particularly through Queensland Health and the Public Service Commission, are essential to:

- Promote and achieve the Government's laudable priority to increase the number of Queenslanders with a healthy body weight, and
- Reduce the burden of chronic disease, like diabetes, on the Queensland Health system, the broader Queensland public service, the Queensland economy and most significantly, on those Queenslanders with chronic diseases and those who know and love them.
- Deliver this program across Queensland, in a scalable reproducible way to ensure every Queenslander has been provided with the highest quality Australian diabetes education.