

CONSUMER FORUM 9/12/09

Opportunity to Have Your Say at:

www.yourhealth.gov.au *The government is inviting feedback on the health reforms and encourages consumers to submit their views.*

Questions to Key Speaker - Anthony Speed, DoHA

Q. In terms of health reform, how is government foreseeing the impact of 'baby boomers'?

- Noted that 'baby boomers' have high expectations on government to provide accessible and high quality health care.
- Seeing this already in the aged and community services sector.
- Pressure on government. There is a need to assess now the high cost of an ageing community profile. Sustainability of government services is an issue.

Q. Aged Care System - is not well funded and subsequently there is significant pressure on hospitals to provide services in the acute setting which could potentially be met in the primary care sector.

- Looking at bringing aged care programs together and the possibility of introducing 'individual packages' (individualised funding to purchase services).
- Looking at 'step-down-care' - high care services being provided more in the community with support.
- Current aged care funding ratio based on 1985 ratio - not reflective of aged care profile now.

Re: Options for reform

Q. What is the logic behind the 40% option (1st strategic option)?

- Recognition that the States play an important role in the health system. It is a funding rather than management model - looks to ensure viability and sustainability.

Further Comments:

- There is also a 4th option not listed i.e. a model whereby a national "Health Authority" is created.
- Recruitment should be a high priority on the agenda. (Currently a lack of support for former nurses needing to retrain to re-enter the workforce). Response: Workforce issues have been raised in consultations held to date.
- Australian Government has extended the period for feedback to June 2010.

Additional Questions/Comments arising from group discussion regarding establishing primary health care centres

- Parking availability and accessibility a significant issue
- Worry that the facilities will be less accessible

There is a need for 'community space' within facilities. Example cited of new Eastern Shore Centre not being seen as somewhere the community can interact

- Voluntary Registration: people registering with a specific service
NZ model seen as 'friendly'
Privacy issues - huge in the country (especially regarding mental health issues)
- Existing GPs
Issue of survival of their practice
Opportunities for moving into larger Centre and taking their patient lists with them.
Erosion of the more traditional relationship between a GP and their patient - protection of the patient as 'your patient'. The intimate relationship between an individual and their service provider.
Could see resistance from Doctors to going into a larger institutional service model.
Need fine balance between intimacy issue and large scale complex service demands.
Concern from patients about not being able to see their own GP.
- Need more representation from the younger generation in health reform planning.
Concern expressed that the people planning future health reform are predominantly not going to be the 'end user'.
- E-health: potential for more efficient sharing of patient information between practice practitioners. Improved information flow particularly important in a service where the patient won't necessarily always be able to see their 'own Doctor'.
There will potentially be a need for a broader base of clinicians to access patient records.
- Challenge - how do we better manage a person coming in, creating intimate spaces and facilitating multidisciplinary care.
- GP service provision is changing - some activities, traditionally the domain of the GP are being performed by other health care providers.
Need to address primary care workforce issues
Changing/expanding roles for Nurse Practitioners is positive and should be encouraged
- Social media/social networking tools needs to be better utilised in health care and health promotion.
- E-care:
Patients are left 'out of the loop'. Don't have access to their own personal information about their health nor the ability to participate in electronic communication exchanges to ask questions/seek clarity. There is a need to find a way for patients to be actively involved in their care.