



# Sustainable Health Review

## PUBLIC CONSULTATION

# Great Southern Region Public Forum

Albany / Wednesday, 27 September 2017

## SUMMARY

Public Forums are being held in metropolitan and regional areas to provide input on developing a more sustainable and patient centred health system in Western Australia.

This Summary outlines major themes from the workshop only and is intended to be indicative of the more extensive information from the forum that will be provided to the Sustainable Health Review Panel to consider. This material is not to be regarded as endorsed by the State Government.

To keep in touch with the progress of the Review and for lodgement of Public Submissions, please go to [www.health.wa.gov.au/sustainablehealthreview](http://www.health.wa.gov.au/sustainablehealthreview).

The Sustainable Health Review Panel would like to thank all participants for their contributions to improving our health system.



# THE BURNING ISSUES

From a large number of identified concerns, the following burning issues stood out:

- Better access to care by diverting ill and injured patients to clinics, and using emergency evacuation access via helicopter
- Community expectations around what services should and should not be delivered and around appropriate resourcing for defined services, not all services
- Addressing access to, and capacity of communication technologies to reduce geographical isolation beyond the hubs, in NBN free zones
- Limited availability of GPs, nursing services and visiting specialist doctors in regional areas
- Need for better connection between acute and primary health to provide continuity of care, better mental health support and flexible respite care
- Attracting and retaining a skilled and flexible workforce that can problem solve, facilitate, navigate and coordinate on behalf of consumers

## THE CRITICAL CONVERSATIONS THAT WE MUST HAVE

- The uncomfortable truth is that rational decisions have to be made about what facilities and services are provided, what should not be provided and how community, business and Shire expectations are managed
- How a compassionate community approach can link all service providers and levels of Government with the client, their family and friends at the centre
- How to reframe the conversation on health away from acute and towards prevention to keep people well before the need for health care
- The integration of information and technology to deliver choice to consumers to face their health challenges
- Asking the community about the level of cost of chronic disease management in public hospitals that they are prepared to bear

# SUGGESTIONS FOR WHAT SERVICES ARE PROVIDED WHERE AND DEFINING UNIVERSAL ACCESS

- Review current services in terms of outcomes versus costs, including clinical indicators
- Increase Hospital in the Home for the management of chronic diseases
- Educate the community about the services that are available and how to access them
- Increase the focus on transitional care step down and community readmission
- A beginning definition of universal health care as: child health, school health, general practice, parenting training, urgent care, youth development, mild / moderate mental health care, and aged care
- A focus on access to universal services as the critical feature so that people are reassured that they will get expert help when they really need it



# SUGGESTIONS FOR LINKAGES AND INTEGRATION BETWEEN PROVIDERS OF SERVICES

- Better community services directories in all formats
- Broaden the scope and effectiveness of health navigators
- Challenge processes that create silos, especially in aged care
- Evaluate and improve current linkages

# SUGGESTIONS FOR WELLNESS AND THE SHIFT FROM ACUTE TO PREVENTATIVE HEALTH

- Implement the World Health Organisation Social Determinants of Health as a focus area for all human services programs to build community capacity to manage their own health
- Shift expenditure on chronic disease from the public hospital system to community preventative health, which will mean informing the community of relative costs and benefits and the development of more community treatment strategies for the complications of chronic disease
- Create incentives for consumers and businesses who participate in proactive health programs, similar to frequent flyer schemes
- Translate health business such as the Clinical Services Framework into words the community understands

# SUGGESTIONS ON USING INTEGRATED INFORMATION AND TECHNOLOGY FOR INNOVATIVE DELIVERY OF SERVICES

- Telehealth booths at the point of access such as GPs, pharmacies and health services after hours so that emergency care is available
- Put Telehealth into ambulances
- Expand the provision of the health concierge and navigator services
- Use community events to demonstrate and promote the Emergency Telehealth Service
- Re-evaluate existing IT health portals and rationalise where necessary
- Introduce one system of clinical governance across human services, such as St John Ambulance and WACHS