

## Public Submission Cover Sheet

Please complete this sheet and submit with any attachments to the Sustainable Health Review Secretariat

### Your Personal Details

*This information will be used only for contacting you in relation to this submission*

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| <b>Contact Details</b> |        |

### Publication of Submissions

***Please note all Public Submissions will be published unless otherwise selected below***

I would like my submission published but remain anonymous

### Submission Guidance

**You are encouraged to address the following question:**

**In the context of the Sustainable Health Review Terms of Reference listed below, what is needed to develop a more sustainable, patient centred health system in WA?**

- Leveraging existing investment in Primary, Secondary and Tertiary healthcare, as well as new initiatives to improve patient centred service delivery, pathways and transition;
- The mix of services provided across the system, including gaps in service provision, sub-acute, step-down, community and other out-of-hospital services across WA to deliver care in the most appropriate setting and to maximise health outcomes and value to the public;
- Ways to encourage and drive digital innovation, the use of new technology, research and data to support patient centred care and improved performance;
- Opportunities to drive partnerships across sectors and all levels of government to reduce duplication and to deliver integrated and coordinated care;
- Ways to drive improvements in safety and quality for patients, value and financial sustainability, including cost drivers, allocative and technical efficiencies;
- The key enablers of new efficiencies and change, including, research, productivity, teaching and training, culture, leadership development, procurement and improved performance monitoring;
- Any further opportunities concerning patient centred service delivery and the sustainability of the WA health system.

### Submissions Response Field

*Please type your response into the field below. Alternatively you may provide your submissions as a separate attachment (Suggested Maximum 5 pages).*

1. Consistency of data collection across health services. For people with intellectual disability and significant cognitive impairment, the opportunity to identify patient records with that detail, in order to facilitate better mechanisms for reporting across health systems (and to primary health). For example, if an individual with ID has an unplanned admission into hospital, then their GP should know about it.
2. Implementation of the transition framework from paediatric to adult services, with a focus on the complexity of navigation between health services for people who may be considered vulnerable. For example, an adolescent being seen by the Child Development Service may need to see multiple specialists in the adult health and mental health systems. This is difficult enough to navigate at the best of times, but very difficult under adverse conditions.
3. A focus on care-coordination with a lead practitioner (GP). Other jurisdictions may call it a health care home, etc. There is evidence from overseas that the holistic patient-centred model improves health and mental health outcomes for individuals with intellectual disability or significant cognitive impairment.
4. Clear referral pathways between services. Consider service re-design for complex cases, with clinician involvement to determine where people should land for services.