



ACT's primary health network

Capital Health Network [ACT PHN] ACT Budget 2019/20 Submission



Overview

Capital Health Network (CHN), ACT's Primary Health Network (PHN), is pleased to make this submission in response to the ACT Budget 2019/20 Consultation.

As the PHN for the ACT, CHN's role is to advance the way health care is delivered in Canberra. We address community needs by collaborating with consumers, general practitioners (GPs), clinicians and sector stakeholders to improve health outcomes. We are unique in our ability to support general practice and design services that fill gaps and deliver lasting improvements.

We currently have over 560 members, including GPs; primary health clinicians such as pharmacists, psychologist and physiotherapists; peak bodies; consumer organisations; and health service providers. In addition, we have over 5,000 subscribers to our weekly e-newsletters where we provide information on events and initiatives relevant to primary care.

Through the ACT PHN Programme, our Population Health Planning Program continues to update and further develop our comprehensive evidence-based Needs Assessment to identify and monitor the health and wellbeing needs of the ACT population, considering the related circumstances that impact people's health such as their socio-economic status, level of educational attainment and housing status.

We consult with local service providers and community organisations, collate consumer experiences and feedback, and analyse local data (tertiary and primary care) to identify key areas of concern within the local health and welfare systems.

In this submission, we make a number of **recommendations** to address both economic and health policy imperatives facing the ACT Government in the priority areas of:

1. care across the continuum
2. vulnerable and at-risk groups
3. mental health
4. aged care
5. alcohol and drug
6. chronic disease management
7. prevention.

1. PRIORITY AREA: CARE ACROSS THE CONTINUUM

a) HealthPathways

CHN calls on the ACT Government to embed HealthPathways Program funding in the ongoing budget estimates to ensure sustainability and support the continued sharing of knowledge on best practice care between primary and acute care/specialist providers.

- HealthPathways provides current best practice clinical information, localised referral pathways and consumer resources to support GPs, other clinicians and hospital clinicians to deliver quality care. With ongoing funding, further opportunities to expand the online tool to support service improvement and efficiencies across the ACT health system could be achieved. HealthPathways could be utilised across acute and primary care health services to promote a whole of system approach to the delivery of best practice care.
- HealthPathways is a four-way financial partnership including collaboration between two regional Primary Health Networks and corresponding Local Health Districts (ACT and Southern NSW).
- HealthPathways usage continues to grow since it was initiated in the ACT and Southern NSW in April 2015. Over the past two years, usage has increased by 54% with over 5,500 users and 465 local pathways developed.
- Further development of a mobile friendly HealthPathways site to enhance usage and development of hospital pathways within Canberra Health Services would further enhance communication between health sectors.

2. PRIORITY AREA: VULNERABLE AND AT-RISK GROUPS

a) Domestic and family violence

CHN calls on the ACT Government to provide funding to support education and information for the primary health care workforce as a first point of contact for many people experiencing domestic and family violence. Additionally, to provide funding for mental health services for children experiencing domestic and family violence.

- Domestic and family violence is both a national and Territory priority and, as identified by the ACT Government, available services in the ACT are not meeting need.
- People affected by violence are more likely to confide in a person that they trust, so it is important that these trusted people feel equipped to respond in the right way. GPs, Practice Nurses and other primary care health professionals have a crucial role to play in identifying and preventing intimate partner and family violence, but they are often unaware family violence is happening. Estimates are that each GP will see up to five abused women per week without knowing they are being abused. GPs have reported that they do not generally inquire about abuse often because of a lack of confidence, skills and knowledge of available support services. If well trained, GPs are well placed to recognise signs and symptoms, pursue sensitive inquiry and work with their patient to develop safety and management plans.
- As our PHN Workforce Development Team is already working closely with GPs and other clinicians through our Practice Support and Education program, CHN is ideally placed to provide the appropriate training and support for GPs and other primary care clinicians such

as nurses and community pharmacists, to strengthen the links into the domestic and family violence support services and systems.

- CHN is also ideally placed to support women and children impacted by domestic and family violence in need of trauma informed psychological intervention services, through our mental health commissioning program.

b) Primary care outreach expansion

CHN calls on the ACT Government to support additional funding for the expansion of primary care outreach services to improve access to health care for at risk and vulnerable people in the ACT.

- Evidence indicates that health of individuals and communities is shaped by their social and economic conditions and that those people with the lowest socioeconomic resources experience the greatest health disadvantages and inequalities. There is significant evidence that complex chronic illnesses disproportionately affect vulnerable people, due to disparities in healthcare access and social determinants of health.
- Expansion of current primary health care outreach clinics to large public housing estates within the ACT to include GP, nurse and alcohol and other drugs practitioners would provide members of the ACT community who experience significant health disadvantages easy access to cost effective and holistic primary health care, potentially avoiding costly hospitalisation.
- We support the call by Directions Health Services for further expansion of primary care outreach services to vulnerable people in the ACT through a roll-out of a mobile primary health care outreach clinic or 'Street Doctor' style clinic for the ACT. This would provide access to primary care for more of Canberra's homeless, marginalised and disadvantaged populations.
- Investment in well-targeted primary care outreach services to vulnerable populations in the Canberra community will facilitate increased primary care provider involvement in the prevention and management of chronic illness for targeted cohorts of vulnerable people.

3. PRIORITY AREA: MENTAL HEALTH

a) Access to psychiatrists in the ACT

CHN calls on the ACT Government to address the issues faced by the Canberra community in accessing psychiatrist services in the ACT. The ACT PHN Mental Health Needs Assessment has identified access to psychiatrists as a significant issue in the ACT.

- Canberra residents, GPs and other service providers report experiencing difficulty finding private psychiatrists in Canberra that are accepting patients and can see people at the time they require assessment or treatment.
- Consumers report having to travel to Sydney to access private psychiatric services
- There are significant costs associated with seeing private psychiatrists for individuals.

4. PRIORITY AREA: AGED CARE

a) Geriatric Rapid Acute Care Evaluation (GRACE) Service model expansion

CHN calls for the ACT Government to support an expansion of the Geriatric Rapid Acute Care Evaluation (GRACE) service model to support the acute care of residents of all residential aged care facilities (RACFs) in the ACT. The current pilot program funded by CHN through the PHN Programme and delivered by Calvary Public Hospital Bruce (CPHB) has trialled the implementation of the GRACE model of care with five RACFs within north Canberra.

- The GRACE service model offers clinical support to the staff in the RACFs by providing a point of liaison at the RACF/acute care interface with the aim of improving patient outcomes for the acutely unwell residents. It is well documented that older people utilise emergency care more than other population groups and experience greater rates of hospitalisation, with residents of aged care facilities being disproportionately represented in hospital separation data.
- The GRACE model is based closely on the service pioneered by Hornsby Hospital in Sydney and other similar models in Victoria. The models have been well evaluated and provided proof of concept to produce better outcomes for residents and reduce the high cost of acute admissions for this cohort through supporting better management of acutely unwell residents within the RACF environment and promoting reduced length of hospital stays.
- A significant advantage of the GRACE trial in the ACT has been the provision of clinical and education resources to the participating RACFs to support skill and knowledge transfer and increase the capacity and confidence of RACF care managers in their clinical decision making and care of acutely unwell residents.
- Investment in the extension of the GRACE model of care to support all RACFs will provide equity in access to services for acutely unwell older people in residential care in the ACT, facilitate reduced emergency department (ED) and inpatient average length of stay and improved patient outcomes for this population.

5. PRIORITY AREA – ALCOHOL AND DRUG

a) Methadone Dosing Centre on the northside of Canberra

CHN calls for the ACT Government to increase access to Opioid Maintenance Treatment (OMT) through the provision of a Methadone/Suboxone Tier 1 Dosing Point on the northside of Canberra. Currently, people in Canberra receiving OMT treatment provided by ACT Health must access the service from the Canberra Hospital.

- OMT is a lifesaving treatment for people who are dependent on opioids. With 30% of clients prescribed OMT through ACT Health residing in the northside of Canberra, a Tier 1 northside dosing point is a key element in the provision of equitable access to treatment services to Canberrans.
- GPs in Canberra with clients with opioid dependence strongly advocate for a northside dosing point to prevent avoidable deaths and counter access issues for northside clients. GPs report northside clients encounter transport issues resulting in missed doses and cessation of treatment.
- GPs advocate for a northside dosing point to support the most vulnerable and unstable clients including clients who are not medically suitable for community pharmacy treatment

services, clients with limited financial and social support resources and clients recently discharged from custody.

- Support for a Tier 1 dosing point has been identified across a range of community stakeholders including general practice, ACT Council of Social Service, healthcare consumers Alcohol and Other Drugs Association ACT, Alcohol and Other Drugs service providers, and pharmacy member organisations.

6. PRIORITY AREA – CHRONIC DISEASE MANAGEMENT

a) The Change Program

CHN calls on the ACT Government to support the delivery of a GP-delivered weight management program “The Change Program” in general practices across the ACT. The weight management program was developed by Dr Elizabeth Sturgiss and her Australian National University research team, with grant funding from the Australian Primary HealthCare Research Institute, the Royal Australian College of General Practitioners and Independent Practitioner Network. Obesity is associated with most chronic diseases and is a major burden on the ACT public health system. Supporting GPs to provide effective obesity care would reduce the burden on acute services that is driven by obesity and chronic disease, particularly on the ACT Health’s Obesity Management Unit.

- The program provides a framework for translating the current guidelines on obesity management into the primary care setting, relying on the therapeutic relationship between the patient and their GP. It uses worksheets and factsheets to promote self-management strategies to improve nutrition, increase physical activity and provide support with psychological and behavioural strategies. This program is primarily funded through the usual MBS item numbers for GP consultations with patients.
- A pilot of the program found that it was acceptable and feasible for practices to implement and it achieved measurable positive patient outcomes.
- The delivery of this program in ACT general practices aligns with the work done by the ACT Government in obesity management and prevention, in particular through the “Towards Zero Growth Healthy Weight Strategy”. It will also provide an accessible, cost-effective and evidence-based weight management program for the Canberra community.
- As the Primary Health Network in the ACT, CHN will be able to provide support and training to general practices to implement this program.

b) Live Healthy Canberra online directory

CHN calls on the ACT Government to support the expansion and further development of the LiveHealthyCanberra lifestyle modification program directory website (livehealthycbr.com.au). This website helps consumers and clinicians to easily access current information on programs and services available across the ACT for physical activity, healthy eating and social participation.

- The website can be easily accessed via computer or mobile phone and provides detailed information on the services available including location, cost and hours of operation.
- Evidence shows that people require support and interventions to support a healthy lifestyle. There are many services available to provide this support to referrers and patients, and LiveHealthyCanberra provides an effective means of identifying these across the local region.

- LiveHealthyCanberra builds on the valuable ground work that has been laid by the “Towards Zero Growth Healthy Weight Strategy” and makes a commitment to the continued support of initiatives that contribute to better health outcomes for the ACT population through the promotion of long-term health behaviour change.
- The ongoing support for this web directory will build on existing health promotion activity to support and embed healthy behaviours across the whole ACT community with support from general practice. It draws on the best available evidence for health promotion program and service delivery from Australia and overseas.

7. PRIORITY AREA: PREVENTION

a) Cancer screening

CHN calls on the ACT Government to increase breast, bowel and cervical cancer screening rates in the ACT through a locally-based advertising campaign. This aligns with the development of the ACT Government’s “Healthy and Active Living Strategy” in which cancer screening is a key element. Despite Australia being a world leader in the early detection of cancer due to national cancer screening programs for breast, bowel and cervical cancer, we need to improve our participation screening rates. Adelaide PHN and Country South Australia PHN have worked with SA Health to develop an advertising campaign to promote cancer screening which will be launched early November. If the evaluation shows a positive change in behaviour, this could be a good model on which to base a local advertising campaign.

- Breast cancer is the most common cancer in women in Australia and the second most common cancer to cause death in women, after lung cancer. The screening participation rate for women aged 50-69 years nationally is 54%.
- Bowel cancer is the second most common form of cancer in Australia and causes the second highest number of deaths. Screening asymptomatic populations (presenting no symptoms of disease) reduces mortality from the disease through early detection but only 40% of the population utilise the National Bowel Cancer Screening Program. Around 80 people die in Australia each week from bowel cancer, however if caught early up to 90% of cases can be successfully treated.
- Cervical cancer is the 13th most common cancer affecting Australian women and the 19th most common cause of cancer-related deaths in women. Australia’s national cervical screening participation rate for 2015/16 was 55.4%.

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