

Att: Hon Jeremy Rockliff MP
Premier of Tasmania
Minister for Health, Minister for Mental Health and Wellbeing
The Premier (DPaC) premier@dpac.tas.gov.au

National Cabinet: Federal Health Reforms – Strengthening Medicare

Dear Jeremy

Happy New Year and I trust you were able to enjoy some time away from work over the holiday period.

Health Consumers Tasmania would like to congratulate you on your recent announcements to pilot a new single-employer GP training model in Tasmania and to also fund seven GP after hour clinics. As you're aware, access to timely health care is one of the major concerns for Tasmanians and there is a need for new innovative solutions like those you have announced to help address this issue.

Health Consumers Tasmania understands that Fridays National Cabinet may discuss the Federal Governments National Health Reform Agenda, particularly given the imminent release of the Strengthening Medicare Taskforce Final report.

It is within this context that Health Consumers Tasmania welcomes the opportunity, based on our extensive community engagement, to provide you with some broad observations into primary healthcare reform in Tasmania and some possible solutions are outlined in the following pages.

Observations

- Tasmanians no longer want a piecemeal approach to 'fixing' health and they understand that more of the same no longer works.
- Along the way, the health system has lost sight of some key fundamentals of what it was designed to achieve, which in turn is impacting on the level of trust people have for their health system. For example,
 - The number of Tasmanians who cannot access healthcare is growing, particularly in rural and remote areas.
 - Most Tasmanian's do not have access to affordable health care. Tasmania has the second lowest bulk-billing rate in Australia (6.9%), well below the national average (42.7%) and the out-of-pocket charge in Tasmania is the second highest of any state (after ACT).
 - Tasmanians want continuity of care rather than the increased use of locums. Hence, the corporatisation of primary care and the systems driven approach is not popular and it is occurring at the expense of consumer centred care.
 - Keeping people well (preventative health) is important to communities but it is often not seen as a priority by funders. Health Consumers Tasmania believe preventative health should be incorporated into this primary healthcare reform process and not be treated separately.
 - Tasmanians have a broad view of health and wellbeing, and it extends well beyond the health sector (eg. hospitals and GPs).

Health Consumers Tasmania would like to provide you with a number of options that we believe would be helpful to the Tasmanian situation for you to consider prior to Fridays National Cabinet.

Tasmania also provides an ideal location to deploy and pilot a range of new initiatives outlined below.

- i. Much of the focus of the taskforce is on improving patient access to general practice, including after hours. In Tasmania, the reach of general practice no longer suits our States decentralised population, and therefore Health Consumers Tasmania would argue changes to improve primary care, including GP access, need to reach across our decentralised population and that this may require innovative solutions beyond GP access designed to fill this gap.

This could include expanding the frontline primary care workforce including pharmacies, nurse practitioners, community nurses, peer workers, allied health, and an expanded telehealth service that are funded under a new, streamlined funding model.

Our evidence suggests some in our communities are already desperately seeking health care support through some of these mechanisms because of high GP costs, lack of access and because they feel these services better meet their needs.

- ii. A fundamental rethink of service delivery models is required for Tasmania including new multidisciplinary care models that could be introduced and trialled across the State.

Central to improving patient access to multidisciplinary team care, including nursing and allied health is that any proposed model is:

- a. Patient centred or led rather than GP centred or led.
 - b. This would involve a system that provides continuity of care or oversight of the patient between health care visits, whether this is between GP visits or between acute care -primary care – allied health care visits. The gap between different service providers, and the ability of consumers to navigate the health system across these gaps is becoming, for many, overwhelming. This will require new thinking and the establishment of new roles or functions within healthcare.
 - c. Patient information stays with the patient, not just with the premise or practice.
 - d. Supporting funding models that move away from transactional primary care to chronic condition management and coordinated care.
 - e. New service delivery models that allow greater variety of entry points for consumers depending on their situation or location ensuring consumers are not just restricted to accessing GPs in the first instance to seek a referral. For example, a consumer could seek mental health support through a mental health practitioner rather than be forced to wait and access a referral through a GP.
- iii. Tasmanians continually tell us that they don't want to become ill if they can help it, therefore improving prevention and management of ongoing and chronic conditions is important.
 - a. To prioritise prevention, we would argue that all Tasmanians (or Australians for that matter) should have access to a free annual health and wellbeing check as a central component of the national health reform agenda.
 - b. Communities want access to opportunities for affordable healthy food as well as recreation and social activity and see the lack of these as a barrier to maintaining good health.

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- c. Health literacy plays a central role in prevention and given Tasmanians poor literacy levels (relative to other States), there is an opportunity to base Australia's health literacy expertise and focus within Tasmania, a place that could develop and trial new innovative strategies to lift health literacy levels across the State and nationally.
 - iv. Tasmanians continually tell Health Consumers Tasmania that they want to be treated within their communities when it is safe to do so.
 - a. Health Consumers Tasmania support the Federal Government's commitment to establish three urgent care centres in Tasmania.
 - b. Health Consumers Tasmania's experience working in regional centres including Scottsdale, Ulverstone and the Huon through your Government Health and Wellbeing Network initiative, together with our involvement in the Tasman Peninsula, Dover and Geeveston demonstrates that local communities can meaningfully influence the health service delivery models of their locality if they are empowered to do so.
 - c. Telehealth provides a wonderful innovation for both service providers and consumers and has additional significant benefits for those living in rural or remote areas across Tasmania. While it should not replace face-to-face care, continued refinement and expansion of telehealth is required, both to expand its reach to those without technology or knowhow, and in a way that doesn't penalise consumers because of the predatory actions of some service providers.
 - v. Health reform cannot be limited to primary care, it needs to incorporate deep reform of acute care, sub-acute care, dental care, aged care and disability care through the NDIS and associated funding models.

I trust this provides you with some food for thought and to acknowledge that Tasmanians are open to supporting your efforts to trial new innovative ways of delivering health services across the State.

I am happy to discuss further if you have any questions and Health Consumers Tasmania is available to support health reform initiatives in any way we can that go towards improving the health and wellbeing of Tasmanians.

Kind regards,



Bruce Levett
CEO
Health Consumers Tasmania Ltd

31 January 2023