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LETTER TO THE EDITOR

going to get even sicker

BRUCE LEVETT, Mercury

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 MAKE IT BETTER: The community is awake to the pending health crisis.

HEALTH Consumers Tasmania welcomes the invitation from Health Minister Michael Ferguson to take part in tomorrow's "Access Block Solutions" meeting about the Royal Hobart Hospital.

The meeting has been brought forward as a result of the Tasmanian Auditor General's report into the performance of emergency services in Tasmania's four major hospitals.

Access Block refers to an overcrowded emergency department caused by patients staying longer than necessary in emergency because there aren't enough beds in the main part of the hospital for them to be transferred to.

Access Block is a common factor across many hospitals in Australia. In a complex industry made up of many stakeholders, decision-makers and funders, how can we find solutions to this problem?

Health Consumers Tasmania advocates that a longer-term approach needs to be considered as part of any solution to the Access Block problem because many of the contributing factors sit outside the Emergency Department. We acknowledge that a more immediate response is also required to the findings of the Auditor General's report — "that the Tasmanian hospital system is not working effectively to meet its growing demand for emergency care".

Part of the answer can be found in the Health Minister's Ministerial Charter July 2018 and I quote the minister, "a whole of system approach to care planning and delivery will be maintained, including strategies to improve co-ordination and integration of primary and community care services, with

hospital services and supporting individuals to stay well in their homes and communities”.

My conversations with people around Tasmania show the public expect safe and quality healthcare when they do get sick, and this is seen as non-negotiable, but many people want governments to think more broadly when it comes to health and health care, as the Charter suggests.

Tasmanians are telling me it's important to “keep people supported in their community by understanding their needs so they don't end up in the acute sector”. That is, hospital.

I am aware of a new service being rolled out by the Tasmanian Health Services called the Community Rapid Response Service that provides doctor and nurse support to patients in their homes when it is safe to do so. This provides an alternative to hospital care and can help in keeping inpatient beds free to those who come to hospital via Emergency.

The Department should be congratulated for this potentially valuable service, but we need more innovative solutions like this.

We need to apply this innovative thinking to another area that requires urgent attention.

The proportion of people in Tasmania who delay visiting a GP due to cost has risen from 6.9 to 8.7 per cent over the five years to 2018-2019. That's about 46,000 people in Tasmania who can't afford to see a GP. As bad as this number is, it has grown by nearly 10,000 Tasmanians over the past five years.

GPs provide a critical first point of contact for people who become unwell, but what happens to those 46,000 Tasmanians who can't afford to see a GP when they should, or for those who don't have easy access to a GP — as will be the case for those in Risdon Vale when their medical centre closes at the

end of this month?

I am not an expert, but I understand that they have a greater chance of ending up in Emergency when they do have health problems.

We should consider how to support this group in our community so they have equal access to primary healthcare so GPs can treat them first. This requires both state and federal government co-operation and intervention because the state funds hospitals while federal government manages GPs.

A second area where the community tells me a solution to the current hospital crisis can be found is in health prevention.

Tasmanians have told us that our state needs to consider a focus on “local health solutions including services, prevention and education”.

An analysis of the recent state budget by the Heart Foundation highlights that spending in public health services has fallen to 1.4 per cent of the health budget and will continue to fall over the forward estimates to 1.15 per cent.

Prevention helps people stay out of hospital for as long as possible.

Tasmanians don't understand why so little effort and resources are placed in the areas that, over the medium term, can generate savings to the health budget and at the same time, help reduce the squeeze on our emergency departments.

For a state like Tasmania, where people typically smoke more than other Australians, tends to be on average more overweight and obese than those who live on the mainland and therefore, are more prone to chronic conditions like diabetes and heart disease, this should be a priority for our policy-makers.

The community is awake to the fact that this is the

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pending health crisis as our next generation moves towards older age, but from a poorer health base compared to those already there.

This also goes to the hub of the minister’s charter that commits to support Tasmanians to stay well in their homes and communities.

Investing in hospitals is important, and we acknowledge that they provide critical support to our communities, but if we continue to ignore funding to those important areas outside the hospital system, like community services and prevention, then we will only see a Tasmanian health system under greater pressure.

And we will be back here again in one, two or five years time, having the same conversations over and over.

Bruce Levett is executive officer of Health Consumers Tasmania, the peak body for health consumer advocacy in Tasmania.



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