

Consumer and Carer Reference Group Communiqué December 2017

This update highlights key discussions and considerations from the second meeting of the Sustainable Health Review (SHR) Consumer and Carer Reference Group held on 31 October 2017 and the joint meeting with the SHR Clinical Reference Group held on 22 November 2017.

Definition of 'sustainable'

A working concept of 'sustainability' has been widely used at Public Forums:

'Sustainability is using finite funding and limited resources in the most effective way, to meet our communities' current health needs without compromising the State's ability to meet needs in the future'.

The Reference Group discussed sustainability, including the notions of finite resources rather than funding, 'expectations' and 'needs', as well as querying whether the notion of 'finite' in the broader context of society.

Engagement

The Reference Group members were actively involved in a number of targeted engagement activities with specific consumer and carer groups to encourage submissions to the SHR and increase attendance at public forums. A number of Reference Group members also attended public forums. Mr Warren Harding (SHR Panel Member) led a discussion on themes arising from public forums from the consumer and carer perspective by providing his experiences attending forums including:

- Promotion, prevention, wellness;
- Pathways between GP, hospitals and home care;
- Health literacy and understanding the system;
- Care close to home and innovations to enable this;
- Electronic health record;
- End of life/palliative care; and
- Mental health.

Several Reference Group members are participating in working groups to develop discussion papers on key themes for the Review to be published following the release of the SHR Panel's interim report in early 2018. Challenging Issues Discussions

At the second meeting the Reference Group discussed the challenging issues that the SHR Panel must address in its second phase of community engagement. Some of the areas identified were:

- Different health roles and how digital innovation can assist in this area e.g. navigation roles, companion roles;
- Empowering people to choose a healthy lifestyle;
- Health literacy;
- Inequality in the system (regional vs metro);
- · Health prevention, social determinants of health needs proactive action; and
- Integration for people with mental illness for employers and the community.

The Reference Group also discussed the approach to community engagement including the importance of getting real public representation and engaging communities at the grassroots level. This could include presenting potential solutions to the community and requesting feedback on viability. It was suggested that widening the use of digital/social media would help to reach more community members.

At the joint meeting the Reference Group members discussed and provided advice on challenging issues with a particular focus on practical solutions that work for clinicians and consumers and carers.

Key points from their discussion;

More consistent end of life discussions

The members agreed that the language and setting are critical components to end of life discussions, as well as the integral role of community services and GPs. The potential for widening the use of advanced health directives that assist people to plan a 'natural' death according to their wishes was explored from the perspective of both clinicians and patients.

The role of the residential care facilities was discussed, as well as ways the health system could provide more support to people who are close to the end of their life with good care plans.

Both clinicians and consumers agreed that planning needed to play a more active part in end of life services - the Emergency Department is not the best place to start the discussion.

• Megatrends impacting sustainability

The members discussed the big issues that impact the sustainability of our health system – specifically chronic diseases, obesity, inequality and wealth disparity, drug and alcohol issues. The group also considered climate change and the associated health problems the population will face as temperatures increase, as well as whole of government approaches to address these macro issues, ways to fund programs and ways to drive change in the community.

• Data sharing

Both consumers and clinicians agreed that increased information sharing could have positive effects on the delivery of care and patient outcomes if done in a secure environment. The groups discussed building on existing initiatives, privacy for consumers, and the need for integrated systems.

• Increased uptake of telehealth

Discussion centred on new ways to use the existing technology and barriers from the perspective of consumers and clinicians that may be restricting its use.

• Better ways to coordinate patient transfers from regional areas to metro areas

The group discussed several alternative models for linking tertiary hospitals with regional hospitals for the purpose of better coordinating patient transfers from regional areas to metro areas. It was agreed that the problem needs more coordination between State-funded, not-for-profit and Commonwealth funded services so that they work together to minimise waste.

For more key points from the discussion at the joint meeting refer to the Clinical Reference Group Communique December 2017.

Next Meeting

The next meeting for the Consumer and Carer Reference Group will be scheduled for early 2018.

Further information

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Website: http://ww2.health.wa.gov.au/Improving-WA-Health/Sustainable-health-review