



# Sustainable Health Review

## PUBLIC CONSULTATION

# Metro North Public Forum

Tuesday, 19 September 2017

## SUMMARY

Public Forums are being held in metropolitan and regional areas to provide input on developing a more sustainable and patient centred health system in Western Australia.

This Summary outlines major themes from the workshop only and is intended to be indicative of the more extensive information from the forum that will be provided to the Sustainable Health Review Panel to consider. This material is not to be regarded as endorsed by the State Government.

To keep in touch with the progress of the Review and for lodgement of Public Submissions, please go to [www.health.wa.gov.au/sustainablehealthreview](http://www.health.wa.gov.au/sustainablehealthreview).

The Sustainable Health Review Panel would like to thank all participants for their contributions to improving our health system.



# WHAT ARE THE BURNING ISSUES

From a large number of identified concerns, the following burning issues stood out:

- Low health literacy and the need to educate people about the true costs of health care
- The need for better linkage and interface of State and Commonwealth funded services, especially for prevention programs and for NDIS services
- Requirements for investment in soft infrastructure to support community based complex care and case management
- The need to focus on transitions in care to boost fluidity and seamless movement of consumers across the health system
- Less than optimal integration of allied health management into hospital systems
- Workforce culture challenges including poor communication at managerial levels, low clinical collaboration across some services and settings and a culture of vertical appeasement

# THE CRITICAL CONVERSATIONS THAT WE MUST HAVE

- Overcoming the demarcation that exists between Federal and State funding silos so that patients can be more effectively transitioned and supported in the community with quality specialist care
- Clear articulation of the services that 'must' be provided by the public health system and those services that can be purchased by private and community providers as a 'need' rather than a 'must have'
- Moving from a system that focuses on tertiary crisis management to preventative community based care, and the support structures that need change
- Genuine dialogue with the community around agreed ceilings of care to provide guidance and safeguards for clinicians and administrators on equitable resource utilisation
- How to improve transitions from hospital to community and empowering consumers and carers to meet their transitional needs
- A conversation about the culture of workforce managers so that managing risk does not impede flexible, innovative clinical practice and policy and enables new roles and services to be introduced

# SUGGESTIONS FOR INTEGRATED AND COORDINATED CARE TO REDUCE GAPS AND IMPROVE TRANSITIONS

- Identification of the cohort before they enter the treatment system and advanced analysis to provide targeted services and information most likely to change outcomes
- Working across disciplines, programs, community services, business and government to develop initiatives such as medi hotels
- Improving mental health hospital liaison services in WA to reduce the disjunction between health and mental health in this State
- The use of technology to share information with all care providers and improve flow alignment for consumers



# SUGGESTIONS FOR GENUINE DIALOGUE WITH THE COMMUNITY ABOUT THE LEVELS OF CARE PROVIDED

- Candid consultation processes involving carers, consumers, clinicians, service administrators, lawyers, university experts and ethicists about what levels of care we as a community see as essential, what we see as optional, where the gaps are, and how we can limit futile provision of care and limited resources in areas of extreme cost without significant likelihood of benefit.
- Encouraging consumers to take responsibility for their own health and to have the challenging conversations with health providers
- Improving health literacy and awareness of the different layers of service within the health system

# SUGGESTIONS FOR INVESTING IN PREVENTATIVE HEALTH BECAUSE IT'S GOOD VALUE

- Encourage and reward people who regularly invest and participate in preventative health measures
- Early discharge and hospital avoidance programs that are across the health, aged care and mental health sectors
- Identify and fund more agencies, organisations and sectors such as local government that can deliver preventative health measures
- Reallocate resources to patients when they first start to experience health problems

# SUGGESTIONS ABOUT MANAGEMENT CULTURE AND GOVERNANCE

- Self service for the patient needs to be easily accessible, centralised, comprehensive and based on data sharing between all health providers
- Implement clinical re-design to make the best use of staff skills and introduce new roles
- Focus on good environmental sustainability in high energy users such as hospitals to redirect savings into patient care
- Utilise the experience of all of us - clinicians who are highly trained and struggling to contribute to better patient care, individuals and families with lived experience that firmly grounds us in the realities of our health system, university academics and researchers who can provide us with evidence about how we can learn from our mistakes and from the experiences of experts in other places and countries