



Public Submission Cover Sheet

Please complete this sheet and submit with any attachments to the Sustainable Health Review Secretariat

Your Personal Details This information will be used only for contacting you in relation to this submission	
Title	Mr Miss Mrs Ms Dr Other
Organisation	Multidisciplinary Pain Management Centre, Royal Perth Hospital
First Name(s)	Donald
Surname	Johnson
Contact Details	
Publication of Submissions	
Please note all Public Submissions will be published unless otherwise selected below	
☐ I do not want my submission published	
I would like my submission to be published but remain anonymous	

Submission Guidance

You are encouraged to address the following question:

In the context of the Sustainable Health Review Terms of Reference listed below, what is needed to develop a more sustainable, patient centred health system in WA?

- Leveraging existing investment in Primary, Secondary and Tertiary healthcare, as well as new initiatives to improve patient centred service delivery, pathways and transition;
- The mix of services provided across the system, including gaps in service provision, sub-acute, step-down, community and other out-of-hospital services across WA to deliver care in the most appropriate setting and to maximise health outcomes and value to the public;
- Ways to encourage and drive digital innovation, the use of new technology, research and data to support patient centred care and improved performance;
- Opportunities to drive partnerships across sectors and all levels of government to reduce duplication and to deliver integrated and coordinated care;
- Ways to drive improvements in safety and quality for patients, value and financial sustainability, including cost drivers, allocative and technical efficiencies;
- The key enablers of new efficiencies and change, including, research, productivity, teaching and training, culture, leadership development, procurement and improved performance monitoring;
- Any further opportunities concerning patient centred service delivery and the sustainability of the WA health system.





Submissions Response Field

Please type your response into the field below. Alternatively you may provide your submissions as a separate attachment (Suggested Maximum 5 pages).

Persistent Pain affects 1 in 5 Australians and costs the Australian economy \$34 billion a year.(National Pain Summit 2010). It is the nation's 3rd most costly health problem.

Contemporary best practice is interdisciplinary care delivered by a team of health professionals addressing the sociopsychobiomedical contributions to pain. In this respect pain medicine is leading the field in the holistic care of the patient with a whole person approach.

Currently patients have to wait for months or years for an appointment with a specialist pain medicine physician.

In WA, patients in pain can seek help through their general practitioner in primary care, specialist pain medicine physicians in private practice or public hospitals. WAPHA, the WA Primary Health Alliance funds 3 chronic pain education programs in primary care but this is through a flexible funding pool which may be withdrawn. Public hospitals in WA run introductory pain management programs and full pain management programs are run at FSH (PUMP) and RPH (LEAP). These services are under increasing pressure.

While searching for help in the current system patients can become overly reliant on short-term treatments for pain such as opioid medication. Australia is facing an opioid epidemic where prescription opioid related deaths are rising in line with increased opioid prescribing.

The electronic persistent pain outcomes collaboration (ePPOC) is a national project that will guide future pain management but requires funding for data collection across WA.

Properly funded WA interdisciplinary pain management services will save the WA Department of Health money by:

- Avoiding unnecessary treatments, as per the Choosing Wisely campaign
- Assisting patients return to function and work
- Reducing healthcare utilisation of patients in pain
- Avoiding unnecessary surgery
- Improved chronic disease management
- Reducing medication burden
- Modification of lifestyle to improve health
- Reducing opioid related dangers at the patient and community level