



WAPHA
WA Primary Health Alliance

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PERTH NORTH, PERTH SOUTH,
COUNTRY WA

An Australian Government Initiative

Review of Better Choices: Youth in WA (Department of Communities)

WA Primary Health Alliance Submission

18 December 2017



Introduction

Primary Health Networks (PHNs) were established by the Australian Government in 2015 with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time.

The three WA Primary Health Networks (PHNs) across Perth North Metro, Perth South Metro and Country WA are operated by the WA Primary Health Alliance (WAPHA) that aims to facilitate changes to the health system that will improve health outcomes and deliver better value to our community. These changes require the health system to move to integrated place-based models of care that result in the improved health status of the community. By reimagining health as place-based, we seek a system that opens out the definition of health from clinical care to one that encompasses wider determinants. Our role is to ensure the services and resources that already exist are aligned and utilised to contribute to improved and more equal health outcomes for people and their communities¹.

The alignment of WA's three PHNs under one organisation (WAPHA) affords a once in a generation opportunity to place primary care at the heart of the WA health system and creates a mechanism for integrating services across organisations and across boundaries. WAPHA's vision is improved health equity in WA and our mission is to build a robust and responsive primary health care system through innovative and meaningful partnerships at the local and state-wide level. At the heart of WAPHA's commissioning is the design for a whole-of-system integrated approach to health care; with capacity to deliver patient-centred, best practice care for people to receive the right care in the right place at the right time.

WAPHA welcomes the opportunity to respond to the Department of Communities, *Better Choices: Youth in WA* discussion paper due to our mutual interest in supporting young people to reach their potential and optimal health and wellbeing. In particular, WAPHA would like to extend an invitation to Department of Communities to work with us more directly and collaboratively to build an integrated system of care for improving the health and wellbeing of Western Australian young people. WAPHA is committed to advocating and supporting work with key partners on shared health priority areas to improve equity, access and health outcomes. WAPHA acknowledges the system is fragmented with significant access barriers for people trying to navigate the system; this is especially true for people at risk of poor health outcomes. WAPHA is dedicated to building sustainable partnerships across the health and social care systems to effectively address the barriers by working collaboratively with stakeholders to develop a shared perspective to solve complex problems²

¹ WA Primary Health Alliance (2015) *WA Primary Health Alliance: Improved health equity in Western Australia*. Accessed 13/12/2017 at: <http://www.wapha.org.au/wp-content/uploads/2016/01/WAPHA-Improved-health-equity-in-WA.pdf>

² WA Primary Health Alliance (2017) [Mental Health Reform Strategy](#): A community based approach targeting depression and suicide globally. Accessed 13/12/2017 at <http://www.wapha.org.au/wp-content/uploads/2017/08/Mental-Health-Reform-strategy-document.pdf>

As indicated in the *Better Choices* discussion paper under ‘Life as a young person in WA’ (p8), the present generation of young people faces a range of complex challenges, including multifaceted health concerns; arguably more than previous generations³. One PHN priority includes services being ‘designed to meet the health needs of vulnerable and disadvantaged people, including people of Aboriginal heritage’. Marginalised young people are a heterogeneous group who often have multiple and complex needs. While they experience the same health problems as the broader youth population, including overweight and obesity, mental health problems, sexually transmissible infections and health risk behaviours, their access to healthcare is complicated by psychosocial factors including lack of safe or adequate housing, inadequate access to financial support, education or employment, and a mistrust of health services⁴. The role of general practice and primary care is important in improving the coordination and management of care for people in the community.

Collaboration between WAPHA and Department of Communities can enhance the role of primary health in helping to improve young people’s health and wellbeing. WAPHA has commissioned a range of health and social care services across mental health, alcohol and other drugs and suicide prevention⁵, including the establishment of an Integrated Primary Mental Health Care model. This new approach will ensure vulnerable people can easily access mental health support at the right level and at the right time, wherever they are in WA⁶.

Delivery of the Western Australian Mental Health, Alcohol and other Drug Services Plan 2015-2025 provides opportunity for cross-agency collaboration across the WA health system. This Plan outlines the creation of a specialist Youth Mental Health service stream:

“We aim to configure the existing and new mental health services into the following new age streams: ...youth (16-24 years)... as soon as possible in order to meet the needs of young people with co-occurring mental health, alcohol and other drug problems.” (pg 25)

WAPHA has commissioned youth mental health services through the **headspace** and Early Psychosis Youth Services streams and we anticipate active collaboration with state funded youth mental health services.

WAPHA encourages service providers to design and deliver integrated services in collaboration with the people intended to access them. WAPHA is pursuing opportunities to work within the current activity driven health system (that is episodic in its focus and funding, and supply driven) to encourage place based and consumer centric models of care that focus on outcomes. WAPHA’s emerging approach to Outcomes-based Commissioning is supported by a set of tools including resources such

³ Tylee, Andre., Haller, Dagmar M., Graham, Tanya., Churchill, Rachel. & Sanci, Lena A. (2007) *Youth-friendly primary care services: how are we doing and what more needs to be done?* Access: 13/12/2017 at: https://s3.amazonaws.com/academia.edu.documents/38059877/Adolescent_Health_6.pdf?AWSAccessKeyId=AKIAIWOWYYGZ2Y53UL3A&Expires=1513131050&Signature=XBAnJunVJ8zeakWZFCxSHXEsa0%3D&response-content-disposition=inline%3B%20filename%3DAdolescent_Health_6_Youth-friendly_prima.pdf

⁴ Michael Cummings and Melissa Kang (2012) *Youth health services: Improving access to primary care.* Australian Family Physician, Volume 41, No. 5, May 2012. Accessed: 13/12/2017 at: <https://www.racgp.org.au/afp/2012/may/youth-health-services/>

⁵ WA Primary Health Alliance (2017) Media Release: Funding boost for Integrated Mental Health and Drug & Alcohol Treatment Services. Accessed 13/12/2017 at: http://www.wapha.org.au/wp-content/uploads/2015/12/170530_Media-Release_Investment-in-new-services-to-support-people-impacted-by-drugs-and-alcohol-mental-health-v2.pdf

⁶ WA Primary Health Alliance, *Integrated Primary Mental Health Care.* Accessed: 13/12/2017 at: <http://www.wapha.org.au/primary-health-networks/mental-health/ipmhc/>

as the Quadruple Aim that can be used as a framework underpinning both activities for the PHN and the activities identified in contracts with commissioned organisations. The Quadruple Aim consists of the Triple Aim⁷ developed by the US Institute for Healthcare Improvement and an added fourth dimension advanced by Thomas Bodenheimer and Christine Sinsky⁸.

Figure 1: The Quadruple Aim



WAPHA is actively establishing partnerships with like-minded and committed organisations dedicated to building a robust and responsive person centred health and social care system.

WAPHA has recently engaged in additional policy submission processes, including:

- WA Health: [Draft WA Youth Health Policy 2018-2023](#) (closed 30/11/2017;)
- WA Health: [Western Australian Women's Health Strategy 2018-2023](#) (closed 10/12/2017); and
- Aboriginal Health Council of Western Australia: [Have your say, Aboriginal Youth Health](#) (open)

In the above policy consultation processes, WAPHA provided commentary on the implementation of the stepped care approach where collaboration and place-based solutions through WAPHA, state-based services and non-government organisations are encouraged to facilitate co-design and joint planning. WAPHA is working towards a whole-of-government, whole-of-community approach to realise our strategic priorities of:

1. Identifying barriers to access by applying an evidence-based monitoring and evaluation approach to prioritise the commissioning of services in the areas of greatest needs;
2. Address the priority health gaps and inequities identified by developing contextualized, person-centered models of care;
3. Commission services with a focus on quality and value based outcomes;
4. Build sustainable relationships with clinicians, communities, providers and other stakeholders to improve coordination across a person's (patient) journey; and
5. Uplift the capacity and capability in the primary care environment to support the development of a skilled and sustainable workforce.

⁷ Berwick D. *The triple aim: care, health and cost*. Health Affairs, 2008; 27: 3: 759-769.

⁸ Bodenheimer T. & Sinsky S. *From Triple to Quadruple Aim: Care of the Patient Requires Care of the Provider*. [Annals of Family Medicine](#). November/December 2014; 12:573-576. November/December 2014; 12:573-576

WAPHA appreciates the Department's consideration of our submission. If you wish to discuss our recommendations in more detail, contact Mrs Christine Kane, General Manager Strategy and Health Planning, on 08 6272 4966 or chris.kane@wapha.org.au