

# Aged Care Workforce Strategy Taskforce WA Primary Health Alliance Submission

March 2018





Western Australian Primary Health Alliance (WAPHA) is pleased to provide the following submission to the Aged Care Workforce Strategy Taskforce.

WAPHA is the organisation that oversights the commissioning activities of WA's three Primary Health Networks (PHNs) – Perth North, Perth South and Country WA PHN. PHNS were established by the Australian Government in 2015 with the key objective of increasing the efficiency and effectiveness of medical services, particularly for those in our community who are at risk of poor health outcomes, and improving coordination of care to ensure people receive the right care in the right place at the right time.

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 create the 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.

WAPHA believes strongly in an integrated health care system that has a collective focus on delivering care in the most appropriate setting through formalised, cohesive relationships between all elements of the health system. WAPHA is committed to improving access to primary health care services for older people which is crucial in reducing hospitalisations and can contribute to the early diagnosis and management of chronic health conditions.

Aged care is one of six Commonwealth agreed priority areas for PHNs, providing guidance for WAPHA to improve health outcomes and experiences for older Western Australians. WAPHA is committed to commissioning efficient and appropriate services where they are needed most in the community.

WAPHA is committed to the progressive implementation of aged care reform in Western Australia over the next decade; working collaboratively and in a coordinated manner with all levels of government, community, consumers, industry and the private sector to deliver person-centred, best practice care for the people who live in our community.

### Chronic Disease

The Australian healthcare system is experiencing increasing demand due to numerous factors such as the changing profile of the population (ageing, longevity) and the shifting burden of disease from acute to chronic and complex conditions. It is estimated over half of the Australian population has at least one chronic condition with 29 per cent of people over the age of 65 having three or more chronic conditions. Australia's ageing population means that there will be a significant rise in the prevalence of people with multiple chronic conditions over the coming decade. It is imperative that more effective preventative, integrated, management and treatment services are put in place to avoid rising health costs and burden of disease.

The continued rise in chronic disease prevalence amongst older Western Australians causes significant pressure on the health care system with chronic disease estimated to be responsible for 80 per cent of the total burden of disease as measured in disability life adjusted years. Chronic disease particular amongst the elderly such as respiratory, digestive and circulatory disease are amongst the most common Emergency Department (ED) presentations in Western Australian hospitals.

For Western Australians over the age of 65, falls are the leading cause of death and hospitalisations. *The Western Australian Health Promotion Strategic Framework 2017-2021* outlines the importance of developing interventions for older people based on collaborative health promotion partnerships, and takes account of the diversity of older peoples' activity levels and care needs.<sup>iv</sup>



# WAPHA's Commissioning Approach

WAPHA's implementation of the *Health Care Home* trial aims to improve care for patients with chronic and complex conditions involving patients nominating a preferred general practice and GP to coordinate their care within a multidisciplinary, patient centered construct. From October 2017, WAPHA has engaged with practices throughout Perth North PHN to rollout this trial until November 2019.

WAPHA believes that appropriate and effective transfer of care arrangements between GPs and hospitals provide substantial benefits. When appropriate and effective transfer of care practices are put in place and followed, not only are hospital readmissions reduced and adverse events minimised, overall the patient, their families, clinicians and other health practitioners involved in providing care have a much more satisfactory and positive experience. The coordination of aged care services is important, both to provide services cost effectively and to provide the appropriate care for people at the appropriate time.

WA Country PHN has been successful in receiving Commonwealth funding; *The Greater Choice for At Home Palliative Care Measures,* trialing new ways to provide palliative care services in primary health and community care settings, delivering the right care at the right time, whilst aiming to reduce avoidable hospitalisations.

HealthPathways WA, has developed palliative care and aged care pathways to assist WA's ageing population with information on referral and management pathways helping clinicians to navigate patients through the complex primary, community and acute health care system in Western Australia.

Older Western Australians can become more susceptible to harms from alcohol and other drug use often as a result of pain management, poor health, grief, loss and the loss of independence. WAPHA recognises that long-term sustainable solutions to address health and social problems inclusive of alcohol and drug use requires action on system wide issues. In addressing multiple morbidities, avoiding hospitalisations and intervening early in the continuum of care, WAPHA supports a comprehensive and integrated systems approach to prevention, treatment support services and research to minimise the harm from alcohol and other drugs. To achieve this, we are committed to working collaboratively, and in a coordinated manner, with all levels of government, community, consumers, industry and the private sector so that alcohol and drug problems are detected and addressed more effectively within local communities.

WAPHA has published *Population Health Needs Assessments* for its three Primary Health Networks – Perth North, Perth South and Country WA. A health needs assessment is a systematic method of identifying unmet health and health care needs of a population and making choices to meet those unmet needs. It looks at what should be done and what can be done to address needs.

WAPHA's needs assessment for Perth South PHN identified the proportion of aged care places (per 1,000 people) is showing a declining trend despite the estimated growing ageing population. Nationally, twenty-five per cent of elderly people live at home with some Government-subsidised aged care services and about seven per cent of elderly people live in residential aged care.

### Workforce

As the Australian health system is changing, so too is the aged care workforce. WAPHA believes strongly in an integrated health care system with capacity to deliver person-centred, best practice care for the people who live in our community. An integrated system requires a collective focus on delivering care in the most appropriate setting through formalised, cohesive relationships between all elements of the health system.

Integrated care requires system-wide change. It involves many elements of the healthcare system including; general practice, pharmacy, specialist medical practitioners, pathology, carers, hospitals and extended care providers; all centred on providing the best care for people.



The Australian Institute of Health and Welfare found that in 2014-15, 35 million Medicare claims for unreferred GP attendances were provided to people over the age of 65, more than twice per person than those aged under 65. One in eleven (9%) of these GP visits were within residential aged care facilities. WAPHA is committed to building a robust and responsive patient centred primary health care system and recognises the important role GPs play in primary health care.

WAPHA supports further capacity building amongst GPs and their multidisciplinary care teams to provide high quality care to older people. GPs provide substantial support and care to older people in community and within residential aged care facilities. WAPHA supports initiatives such as the use of Advance Care Planning and Advance Heath Directives as a mechanism to engage the GP in the Goals of Patient Care initiative. WAPHA supports prioritising GP education and upskilling including use of HealthPathways.

GPs as the coordinators of care for older people prevent more expensive downstream health costs including visits to the ED and hospital admissions. High quality and safe early treatment by a GP who has an ongoing relationship with an elderly patient can circumvent a hospital visit which is likely to result in better patient outcomes and reduce pressure on WA's public hospital system.

WAPHA recommends the development of appropriate and accredited training places for doctors in aged care facilities to ensure a focus on education that prioritises caring for the aged as part of routine medical practice.

### Regional and Remote Health Care

Health care for the elderly within regional and rural Western Australia face particular challenges in accessing services with often poorer health outcomes and higher mortality rates in comparison to people living within major cities. The Pillars of Communities report (2017) laments the lack of services available within small rural towns throughout Australia. This apparent lack of access for primary health accounts for more than 60,000 preventable hospitalisations every year.

WAPHA is working collaboratively across the primary care sector to develop models of care that incorporate and recognise a multidisciplinary approach. The Grattan Institute's Report Access All Areas: new solutions for GP shortages in rural Australia, underscored the need for GPs to be better supported by Pharmacists and other health professionals.<sup>ix</sup>

WAPHA further recommend new models of GP led after hours care and telehealth services are developed and trialed in the specific context of rural and remote areas.

### WAPHA's commitment

WAPHA will more clearly articulate our approach and models of care to address primary health care for Western Australians over the age of 65 (over 55 for Aboriginal and Torres Strait Islander Western Australians), and further develop initiatives in line with Commonwealth policy direction and funding; prioritising action in consultation with stakeholders against the assessed needs of the community.

WAPHA supports a collaborative approach to improving coordination throughout the entire health care system to enable improved health and social outcomes. WAPHA is eager to continue to work with the Aged Care Workforce Strategy Taskforce to develop a strategy for growing and sustaining the workforce providing aged care services and support for older people, to meet their primary care needs.



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

## References

<sup>&</sup>lt;sup>1</sup> Vohma, V, Shao, C, Somerford, P, 2017. Potentially Preventable Hospitalisation Hotspots in Western Australia. Department of Health Western Australian and WA Primary Health Alliance, Perth, Western Australia

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iii Jelinek, G.A., et al., Frequent attenders at emergency departments: a linked-data population study of adult patients. Medical Journal of Australia, 2008. 189(10): p. 552.

iv Chronic Disease Prevention Directorate. Western Australian Health Promotion Strategic Framework 2017–2021. Perth: Department of Health, Western Australia; 2017.

 $<sup>^{\</sup>mathrm{v}}$  ABS, 2016; Australian Institute of health and Welfare [AIHW], 2016d

vi Department of Human Services (DHS) 2015. Medicare Australia statistics, MBS Group by patient demographics reports. Canberra: DHS. Viewed 12 March 2018.

vii Australian Institute of Health and Welfare (AIHW) 2013. Rural health: impact of rurality on health status. Canberra: AIHW. Viewed 12 March 2018.

viii Bourne, K., Nash, A., Houghton, K. (2017) Pillars of communities: Service delivery professionals in small Australian towns 1981 – 2011. The Regional Australia Institute

ix Duckett, S., Swerissen, H., and Moran, G. 2017. Building better foundations for primary care. Grattan Institute