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## **HCCA Submission to the ACT Legislative Assembly Select Committee on Regional Development**

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HCCA welcomes the opportunity to provide input to the *Select Committee on Regional Development*.

### **1. Background**

Health Care Consumers' Association (HCCA) of the ACT was formed in 1978 to provide a voice for consumers on local health issues and now provides opportunities for health care consumers in the ACT to participate in all levels of health service planning, policy development and decision making. Health consumers have an ongoing role in the management of their health care and the decisions-making process which influences their health and wellbeing. As such, it is vital that their perspectives are heard and woven into quality health decision-making. We work collaboratively with health services, policy makers and Government to bring about system change to improve the access to and experience of health care.

### **2. Summary**

We have long advocated for cross border planning, policies and partnerships that bring about healthy communities in our region. HCCA remains committed to a regional model of health care that includes the smaller regional hospitals and health services in the broader South East Region. Health services cannot be planned effectively in isolation. We need a more coordinated approach that enables continuity of care for consumers at all levels of the health system.

We want assurance that decisions regarding the planning and design of our health system will be taken on sound advice, based on identified clinical and community needs and sound economic judgment. Cross border collaboration is essential.

Regional health services also need to be effectively interlinked with other social determinants of health, including housing, transport, literacy and health literacy.

### 3. Steps taken towards a regional approach

Recently positive steps have been taken to improve the regional approach to the planning and delivery of health services:

- In 2011 the NSW Minister for Health, Jillian Skinner MP, and the ACT Minister for Health, Katy Gallagher, announced that each jurisdiction will work together to develop an action plan to improve service coordination [3].
- In September 2011 the NSW Premier, Barry O'Farrell MP, and the ACT Chief Minister, Katy Gallagher MLA, signed a Memorandum of Understanding on Regional Collaboration [3].

We are very supportive of the areas identified for further work in the Memorandum of Understanding, which identified '*Integrated Service Planning, initially focussing on the health and education sectors*' as a priority area. To achieve this, the ACT and NSW Governments planned to:

- establish a common information base on the trends in demographics and population for the South East region of NSW and the ACT;
- map current and anticipated future service demand;
- support discussions about where future services should be located;
- identify appropriate sequencing of strategic infrastructure; and
- examine cost sharing arrangements.

There are current examples of where cross border collaboration is delivering benefits to people in the broader South East Region:

- SNSWLHD and the ACT Health are establishing a common renal network that gives NSW residents access to specialist renal services as well as dialysis and post-transplant care [5].
- NSW ambulance paramedics are able to transmit an ECG to the Canberra Hospital emergency department before the patient arrives. This is an excellent development as it has allowed decisions to be made regarding appropriate treatment for heart attack patients prior to their arrival at the Hospital. [5]
- A new telehealth project links regional emergency departments to the Canberra Hospital emergency department, enabling ACT clinicians to make life-saving decisions more quickly by remotely accessing critically ill patients. ACT clinicians are also providing clinical support and backup to those health professionals working in the smaller regional hospitals.
- Emergency medicine specialists from Calvary and Canberra specialists will visit hospitals across southern NSW to train local doctors in areas such as

paediatric resuscitation and advanced vascular access and airway management [6].

- The Snowy Hydro Southcare helicopter retrieval service provides emergency support for people in the South Eastern regions of NSW, allowing efficient transport to the Canberra Hospital for care. This service enables fast access to the major trauma centre for residents of the surrounding region that would be impossible by other means of transport.

We are particularly pleased to see Queanbeyan Hospital being used to deliver some elective surgery for consumers in the region. This is not only an efficient use of our region's health facilities but also an effective means of improving access for patients to have their operations sooner. We think there is scope to include Queanbeyan Hospital into the network of public hospitals, along with Canberra Hospital and Calvary Public Hospital.

#### **4. The need for a regional approach in *planning* health services**

The region currently has a population of over 600,000 people and will continue to grow. Across the region, public hospital and community health services are governed by the ACT Local Hospital Network (LHN), the Southern NSW Local Health District (SNSWLHD) and Murrumbidgee Local Health District (MLHD). In addition the three Medical Locals in the ACT, Southern NSW and Murrumbidgee play a critical role in ensuring that our communities have access to affordable and appropriate primary health care.

4.1 Consumers value integrated health care and the recent health reform agenda presented a good opportunity to move towards an integrated health care system. It was a lost opportunity that the areas for the Medical Local and LHN in the Canberra region were confined to the ACT border.

4.2 We emphasise the need to develop a population health approach which can truly meet the needs of our community and will be able to integrate effectively and seamlessly with other human services. This includes the people living in the surrounding regions.

4.3 We are concerned that regional planning for health services is made more difficult due to multiple layers of bureaucracy. In order to decrease fragmentation in health services and structures it is crucial to support integration and seamless transitions across the continuum of care for consumers. There must be strong and coherent arrangements between the LHN and Medicare Locals as well as between the policy and planning sectors of ACT Health and the NSW Ministry of Health.

## 5. The need for a regional approach in *delivering* health services

HCCA remains committed to a regional model of health care that includes the smaller regional hospitals and health services in the broader Capital Region. This is particularly important given that around 25% of the total services are provided to people who live within the Capital Region in NSW [1].

5.1 We acknowledge the practical obstacles preventing this from happening in the short to medium term, including differences in legislative frameworks and industrial relations. However, we strongly encourage the ACT Government to develop a strategy to address these obstacles so that a regional model can be implemented in the longer term.

5.2 There needs to be a focus on improving clinical handover and transport between health services throughout the region.

5.3 There need to be better arrangements in place so that there is less time spent by public servants on negotiating and pursuing payments for Cross Border Health Services. As at 30 June 2011, the ACT estimated it was owed \$16.4m by NSW for Cross Border Health services for non-disputed activity [2].

5.4 Anomalies around geographical and service provision boundaries can mean consumers fall through the cracks. In the short to medium term, there is significant benefit in negotiating with the NSW Government, SNSWLHD and MLHD to complete collaborative clinical planning in the region.

5.5 There also needs to be collaboration between all areas of the ACT and NSW Government so that an approach similar to Health in All Policies (HiAP) can be taken to address the social determinants of health. This will require interlinking regional health services with housing, transport, literacy and health literacy.

5.6 There are other forums where there is value in including health matters. The establishment of the South East Regional Organisation of Councils (SEROC) and the network of Regional Development Australia (RDA) Boards offer opportunities for collaboration.

We are happy to discuss our submission further.

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## References

[1] *New South Wales patients accessing treatment in ACT Public Hospitals*, in ACT Public Health Services Performance Report Quarter 1 2012-1013.

[2] Legislative Assembly for the ACT: 2012 Week 7 Hansard (7 June) p.3032

[3] Australian Capital Territory and New South Wales Memorandum of Understanding for Regional Collaboration, December 2011

[4] Towards a Healthier Australian Capital Territory: A Strategic Framework for the Population Health Division 2010–2015

<http://www.health.act.gov.au/c/health?a=sendfile&ft=p&fid=-303323664&sid=>

[5] *Cross-border collaboration to benefit Southern NSW patients*, Australian Health Care and Hospitals Association, 8 February, 2013. <http://ahha.asn.au/news/cross-border-collaboration-benefit-southern-nsw-patients>

[6] *Cross border health service a step closer*, in The Canberra Times, 18 February, 2013. <http://www.canberratimes.com.au/act-news/cross-border-health-service-a-step-closer-20130218-2emuc.html>