

KEY MESSAGES

Integrated primary/secondary health care governance for Australia

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Nicholson C,^{1,2} Jackson C,¹ Hepworth J,³ Marley J¹

¹The University of Queensland, ² Mater Health Ltd, ³Queensland University of Technology

Policy context

In 2009 Australia's National Health and Hospitals Reform Commission Report first recommended significant governance change as an important element in increasing the effectiveness and efficiency of health care delivery. In turn, regional service integration was one of the five key building blocks in Australia's First National Primary Health Care Strategy. Federal and State government reforms created new meso-level organisations – Primary Health Networks from 1st July 2015 and Local Hospital Networks, in some jurisdictions Local Hospital Districts/Health and Hospital Services, from June 2011. For the goals of health reform to be realised these organisations must work together to achieve co-ordinated and integrated primary healthcare services. At the COAG meeting, 1st April 2016, the Heads of Agreement between the Commonwealth and the States and Territories on Public Funding states that 'all governments have a shared responsibility to integrate systems and services'.

Key messages

Research undertaken in the Centre of Research Excellence in Primary Health Care Microsystems (<http://aphcri.anu.edu.au/aphcri-network/research-completed/improving-quality-and-sustainability-integrated-phc-governance>) identified ten elements linked to successful primary/secondary health care integration,

- > Joint planning
- > Integrated information communication technology
- > Change management
- > Shared clinical priorities
- > Incentives
- > Population focus
- > Using data as a measurement tool for both quality improvement and redesign
- > Inter professional education supporting the value of joint working
- > Patient/community engagement
- > Innovation

Building on this earlier work of the initial CRE, the ten elements using a balance scorecard approach were presented to the seven Qld PHNs at a meeting in Brisbane on 15th July 2015. These PHNs agreed to use this as the basis of their planning with local HHSs. In November 2015, Queensland Clinical Senate endorsed the use of the ten elements and tasked Queensland HHSs and PHNs to come back in 12 months and report outcomes. Metro North Brisbane HHS and Brisbane North PHN have used this as their Working Together agreement dated October 2016. The tool assists stakeholders to take a health system approach. This includes determining and agreeing a joint need and vision, agreeing shared responsibility for outcomes, and, in time aligning drivers and incentives. Key to this is leadership at clinician and executive locally and at policy level a reform agenda to support the change.

The process of transformation-led policy has been underway for a number of years with the most recent being the COAG announcement in April 2016. Specifically in Schedule 2, "Bilateral agreements will be signed off to provide flexibility for each jurisdiction to determine the best model of care", and the "Commonwealth will establish any enabling infrastructure, governance arrangements, or systems to support a pilot of a Health Care Homes model of primary health care, consistent with the advice provided by the Primary Health Care Advisory Group". The implications for this work are that it provides a tool to inform the development of such governance arrangements that can be used nationally and tailored locally.