

APHCRI DIALOGUE

The bulletin of the Australian Primary Health Care Research Institute

Issue 1, 2005



Welcome to this first edition of *APHCRI Dialogue*, from the Australian Primary Health Care Research Institute.

The title accurately reflects the ambitions, not only of this quarterly publication, but also those of the Australian Primary Health Care Research Institute (APHCRI).

APHCRI was set up to facilitate debate on primary health care policy and practice and, ultimately, through dialogue between government, researchers, policy makers and consumers to influence health policy development for the benefit of all Australians.

Through this bulletin, APHCRI will debate issues applicable to national policy formulation.

Issues will emerge through national and international media watches, systematic reviews of research, government documents and discussion at workshops and conferences attended by APHCRI staff.

Initially they will be within one of eight identified areas of interest for APHCRI addressed in the primary health care setting - namely:

1. Chronic disease management;
2. Integration, co-ordination and multidisciplinary care;
3. Prevention and early intervention;
4. Innovative models for comprehensive primary health care delivery;
5. Innovative models for the management of mental health in primary health care settings;
6. Older Australians and health promotion, prevention and post-acute care;
7. Children and young Australians, health promotion and prevention; and
8. Workforce.

A topic area will be selected for each issue of the publication and will be discussed in the bulletin, with room for responses from readers in future issues.

We recognise that issues addressed in the APHCRI Dialogue will at times be controversial. In putting forward the evidence and raising the questions we aim to facilitate informed debate - not to take a particular 'partisan' line.

APHCRI Dialogue will have regular features examining how issues discussed in the bulletin have been explored in the media, and an update on the activities of the APHCRI team during the quarter, including their policy development work, new research grants, the latest research results and policy and information seminars.

We look forward to receiving feedback from readers so that the publication can become more useful, and achieve its aim.

Let the debates begin!

Nicholas Glasgow
Director

IN THIS ISSUE: \$2.6m in research grants awarded
 Stream Four announced
 National Performance Indicators
 An eye on the media

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AN EYE ON THE MEDIA

APHCRI comment



Nurses, doctors and pharmacists are fighting a 'turf war', according to media articles in recent months.

The *Sydney Morning Herald* suggested nurses are raising the hackles of doctors by eyeing up a bigger slice of the patient-care pie in a 9 May story "Turf war as nurses eye bigger role". This signals a shift away from the pharmacist-verses-doctor debates of recent times, though pharmacists have been busy on another front - trying to stop supermarket chains from owning pharmacies ("Supermarkets should not be selling drugs" *The Canberra Times*, 30 June).

Meanwhile, the medical press has suggested doctors are, in fact, in favour of the multidisciplinary approach. Both *Medical Observer* and *Australian Doctor* ran surveys which, despite the small number of respondents, show GP interest in working in multi-professional teams, so long as the GP remains the team lead.

The articles are sub-text to the on-going debate about how best to deploy the health workforce in Australia, and around the world. What the articles infer is there are no easy answers and a culture change in the way we view the roles of medical professionals is needed.

On a 'they wouldn't do that to us' note: fears that Australian doctors may be subjected to the same performance ratings as cardio-thoracic surgeons in the UK may have some basis.

The idea was mooted by Charles Sturt University research fellow Stephen Clarke at the Royal Australian and New Zealand College of Obstetricians and Gynaecologists annual meeting ("Rating plan for doctors a bitter pill" *The Mercury* 13 April).

Despite the moves in the United Kingdom, surgeons at the Hobart conference rejected the idea.

APHCRI ACTIVITIES

Stream One visits: APHCRI Deputy Director Dr Beverly Sibthorpe visited four of the five research teams 'on location' during May. Pictured (right) are some of the team from the RAISE Well-being program in Port Augusta.



Stream Four announced:

The Australian Primary Health Care Research Institute calls for participation in Stream Four of its Research Program.

The aim of Stream Four is to systematically identify, review and apply knowledge about primary health care organisation, funding and performance to the Australian context.

Stream Four continues to address the three priorities of APHCRI:

- Innovation in State/Commonwealth relationships
- Innovation in funding arrangements for new or existing services/models
- Innovation in organisation and linkages within the Primary Health Care sector

APHCRI has determined specific sets of research questions within these three priorities, and is now seeking to commission groups to form spokes to address these questions.

The closing date for Stream Four proposals is 27 July 2005.

Full details are available at:

http://www.anu.edu.au/aphcri/Spokes_Research_Program/Stream_Four.php

\$2.6 million in research grants awarded

APHCRI announced four research grants, worth a total of \$2.6 million at the end of April.

The funding will go towards projects looking at the role of nurses in general practice; the effect of counselling adolescents in general practice on lowering risky behaviours; managing depression in general practice and the benefits of self-help organisations to patients.

Each project will run for three years and hopes to inform health policy in each area.

Performance Indicators

APHCRI brought together the team that developed the National Performance Indicators for the Divisions network that go live in July.

Under the leadership of APHCRI's Deputy Director Dr Beverly Sibthorpe the program indicators for immunisation, residential aged care, GP and hospital integration, diabetes, mental health and asthma were produced and released in February this year.

The program indicators are, wherever possible, guideline and evidence based. They support government policies and programs such as GP Immunisation Incentives Scheme, aged care initiatives, and Better Outcomes in Mental Health.

The indicators were formed using a framework for performance assessment developed by Dr Sibthorpe. All existing and future indicators for Divisions will be reviewed and developed using the framework.

The indicators are for the 2005 - 2008 funding period.

http://www.anu.edu.au/aphcri/Performance_Indicators/index.php