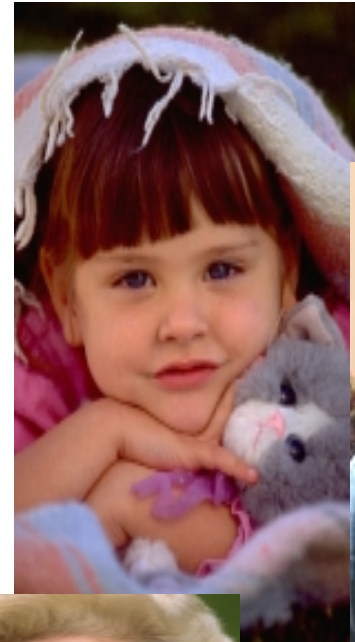


Explaining Divisions : sharing stories



Explaining Divisions 4 December 2002

Division stories



Explaining Divisions 4 December 2002

Agenda

- 10.00 About General Practice
- 10.30 About Divisions
- 11.15 MORNING TEA
- 11.30 About Divisions programs
- 12.30 Common roles for consumer and community reps
- 1.00 Your questions answered
- 1.30 LUNCH

How might divisions' stories about general practice differ from our personal one?



General Practice -the view from divisions



- **GPs are the members.**
- **Most GPs work in private practice**
- **Private practices are small businesses**
- **GPs work long hours and have limited time for division activities**
- **GPs want support for building practice quality**

GP support needs

Clinical
issues

Business
issues



Personal
issues

Professional
development
issues

Clinical issues



Personal issues

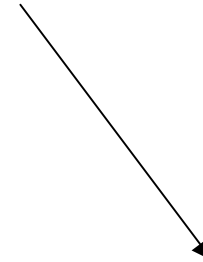
Business viability

- costs
- income
- red tape
- unpaid activities
- accreditation
- insurance
- regulation
- new technology

Professional development issues

Clinical issues

Business issues



Personal
issues

Professional development issues

- maintaining registration
- interests
- growth
- keeping up

Clinical issues

Business issues

Personal issues

- time management
- balancing work and
- family
- GP health



Professional
development issues

- When I am acting as a representative at division meetings I will need to reflect on some things about General Practice that may be outside my experience with my own GP. These might include

What is a Division of General Practice?



- A local organisation of GPs
- GP membership is voluntary
- Overseen by elected Board of Directors
- Funded by DoHA
- Varied in size and budget

The main aims of the Divisions of General Practice Program

- **To encourage GPs to work together**
- **with other health professionals**
- **at the local level**
- **to upgrade the quality of health service delivery and thereby**
- **improve health outcomes for patients.**

Why Divisions ?

Community

Profession

- GP isolation
- GP Professional standards
- GP income

• **Quality of services**

• **GP accessibility**

• **GP / patient communication**

• **GP role in linking patients with other services**

Government

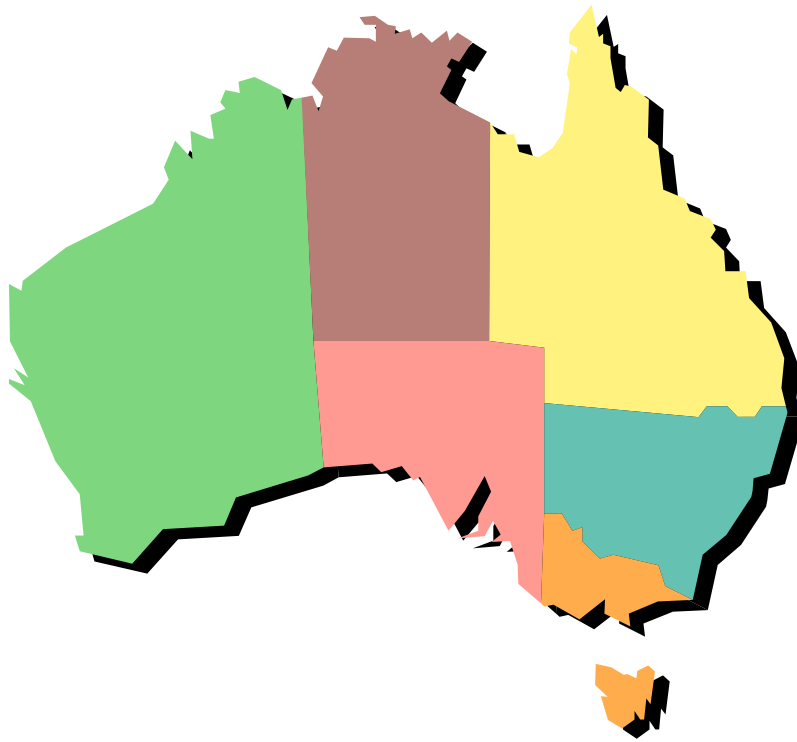
- Health system costs
- Quality of GP services
- Geographical distribution of GPs

How Divisions grew



- 1991/92 Demonstration Divisions
- 1992/93 Divisions and Projects Grants Program continued for six years
- 1999/2003 Outcomes Based Funding contracts for Divisions

How many Divisions?



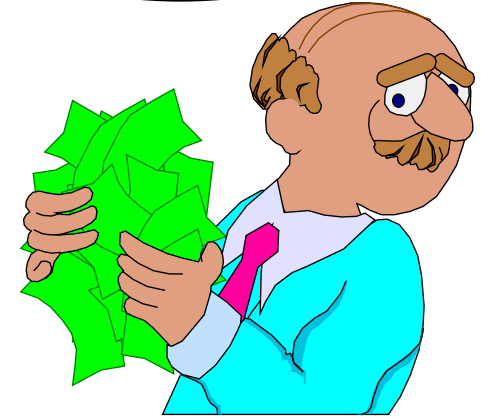
- 121 Divisions across Australia
- 30 Divisions across Victoria
- Budgets in Victoria range from \$300,000 to \$850,000

**Reduced GP
isolation**

**High GP
membership**

**Computerisation
of General Practice**

Key Achievements



**Voice heard by
government**

**Practice
Accreditation**

**GP Professional
Development**

**Divisions the vehicle
for promoting national
quality programs**

**Well informed
about local health
needs**

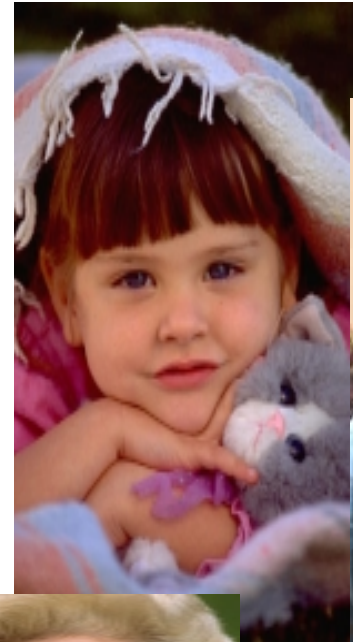
**Seek
local input**

Key Achievements

- community connections

Health service planning and design

Sharing stories is ongoing work.
What issues do GPs and consumers
have in common?



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Give one or two reasons why each of the following groups have a strong interest in Divisions.

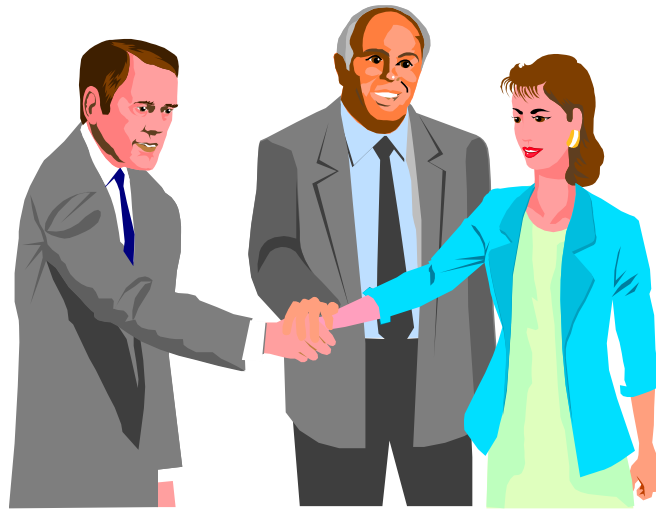
GPs ?

Community?

Government?

Roles of Community and Consumer Representatives in Divisions

- Community members are asked to play many and varied roles within Divisions



Your questions answered

- Do divisions have a regulatory function?
Can I complain to a division about a GP?
- What is the difference between a division and a local hospital or health care centre?
- What is the “reach” of the division. If I communicate with a division am I reaching all the GPs in the area?

Your questions answered

- What can I offer the division? I don't have a health background. I'm just a normal person.
- Do the GPs and Board take consumer input seriously?
- How do divisions impact on consumers?
- How much commitment do I need to make?