

16 July, 2007

Ms Ruth Paterson
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Dear Ruth

Thank you for the opportunity to comment on the Rural Health Alliances Working Paper.

You may be aware that DHS is in the process of preparing a DHS-wide GP Position Statement which will formally confirm the recognition by the DHS senior executive of the central importance of general practice to the state's health system. This statement will:

- enhance the productive collaboration between the private primary health care sector and the state-funded health and human services sector, with both its primary and tertiary health care elements
- establish a framework for this collaboration to occur.

Our concern with the present state of the review of the alliances is that it is not prepared within the spirit of this commitment to linking with general practice. The review provides an excellent opportunity to commit more fully to coordination and continuity across the entire health sector, not just across state-funded services. While the overall trend in DHS is to emphasise the importance of integration across the health sector and not just across publicly funded services, the ICT strategy does not seem as committed to working outside the boundaries of DHS. The main reference to general practice is in the entitlement to membership for divisions and for practices. At the same time, the HealthSMART Participation Policy, which the Alliances are charged with implementing in their respective areas, states that *'It is important that we implement ICT to support the Health Sector as a whole rather than just to meet the individual needs of individual agencies.'*

Some of the links between DHS funded agencies and services and general practice include:

- Referral of the patient to another service, setting, or the addition of another care provider
- Communication between the GP and other health providers to enhance care (referral and feedback information, and discharge information)
- GP participation in multidisciplinary care
- Shared care
- Monitoring where patients are within the service system
- Providing services under the auspice of another organisation (e.g. Hospital in the Home)
- 'trouble shooting' clinics which provide short-term specialist care on behalf of the GP

The need for connectivity between the state-funded services and general practice is never formally denied but the state and federal systems continue to work in isolation from each other despite the fact that the GP is the health professional who is at the centre of patient care wherever the person is in the system. There are potentially significant advantages to health services to engage with general practice to ensure continuity and coordination of care.

Barriers to GP participation

Specific problems that Victorian divisions of general practice have raised include:

- The cost of access is too high for the division and general practice. In most areas GPs have not participated in the ICT Alliance because the current approach to calculating the fee for ICT service is not equitable. GPs do not require the entire package of services offered by the Alliances but at present the Alliances do not separate out the individual components at a price point that is competitive for general practice and divisions.
- The view that the cost of membership is excessive is reinforced by the lack of any perceived benefit to divisions and general practices from membership and by the general failure of the Alliances to promote the benefits of their services to divisions and general practice.
- The Alliances' communications with divisions have generally been poor and ineffective.

We recommend that DHS review the pricing structure for membership of the Alliances in order to make it feasible for divisions and general practices to participate and direct the Alliances to engage with general practice through divisions in the spirit of the DHS-wide Position Statement on General Practice referred to above.

May I suggest that an early step to enable general practice to participate fully in the important developments taking place in Victoria might be for the Rural and Regional Health Services Branch to meet with GPDV to discuss the purposes and benefits of the Alliances and how best to ensure that they become a platform for the effective integration of the health system in Victoria.

A handwritten signature in black ink, appearing to read 'Bill Newton', is positioned above a thin vertical red line.

Bill Newton
CEO