Background Discussion Paper
GPDV Forum August 2005

ADGP's Primary Health Care Position Statement

For the last several years there have been many calls for the federal government to form a national primary health care policy. The Review led by Ron Phillips was, obviously, the instance most relevant to the Divisions movement. As is widely known, in its response the Government chose not to form a national primary health care policy but instead to persevere with its primary care 'strategy in action'. This 'strategy in action' is an incrementalist approach to change that has the advantage of avoiding the disruptions associated with large scale change and allows for the possibility of testing smaller changes (for example, EPC items) and modifying them as required without affecting other parts of the system.

In GPDV's Policy Issues Paper No.22 on the need for a national primary health care policy, we argued that the problem with an incrementalist approach in health is that it is unable to overcome the structural problems caused by the state-commonwealth divide and only a national policy that involves a position agreed upon by the states and Commonwealth, could overcome the present difficulties.

ADGP is leading the divisions' contribution to this debate by putting forward a position statement on primary health care. This position statement identifies ADGP's view of the essential components of primary health care and, in particular, defines the role that divisions and GPs could and should play within the context of a national primary health care policy. ADGP is embarking on a national consultation that will culminate in the presentation of a position paper at the National Forum in Perth in November. The GPDV Forum gives Victorian divisions an opportunity to influence the position paper to be presented in Perth.

ADGP's paper makes large claims for GPs and divisions. It appears its purpose is to ensure that in a negotiation with other providers on the relative place within a primary health care policy that divisions of general practice are able to protect the central role for general practice and to strengthen that role through fundholding. At the Forum on 21st August, we will examine the claims and consider them from a Victorian point of view. Questions will include:

- Does the paper recognise and try to build on the strengths of divisions and of general practice? Two divisions will present examples of their work to provide some specific examples to support this discussion.

- Does the paper give due recognition to other players in the field that have a stake in the matters under consideration? For example, in health promotion the Victorian Health Promotion Foundation, the Victorian Primary Care Partnerships, Community Health Centres and the Foundations (Arthritis, Heart etc) all have an interest and a role. When the claim is made for a division role in fundholding, who else would consider they had a claim to fundholding? How would divisions justify their claim vis-à-vis others? How should the relative merits of the various claims be negotiated?

- Does the paper recognise the need to accommodate state differences? For example, community health centres in Victoria are major organisations with a strong and unique role in the provision of primary health care.

- Should the paper suggest a process for moving from a position statement to policy advocacy? For example, should there be a national forum on primary health care policy that involves the presentation of arguments from all the providers with a stake in service delivery as well as from consumers?