

HEALTH REFORM IN SA



**Government
of South Australia**

SA Health

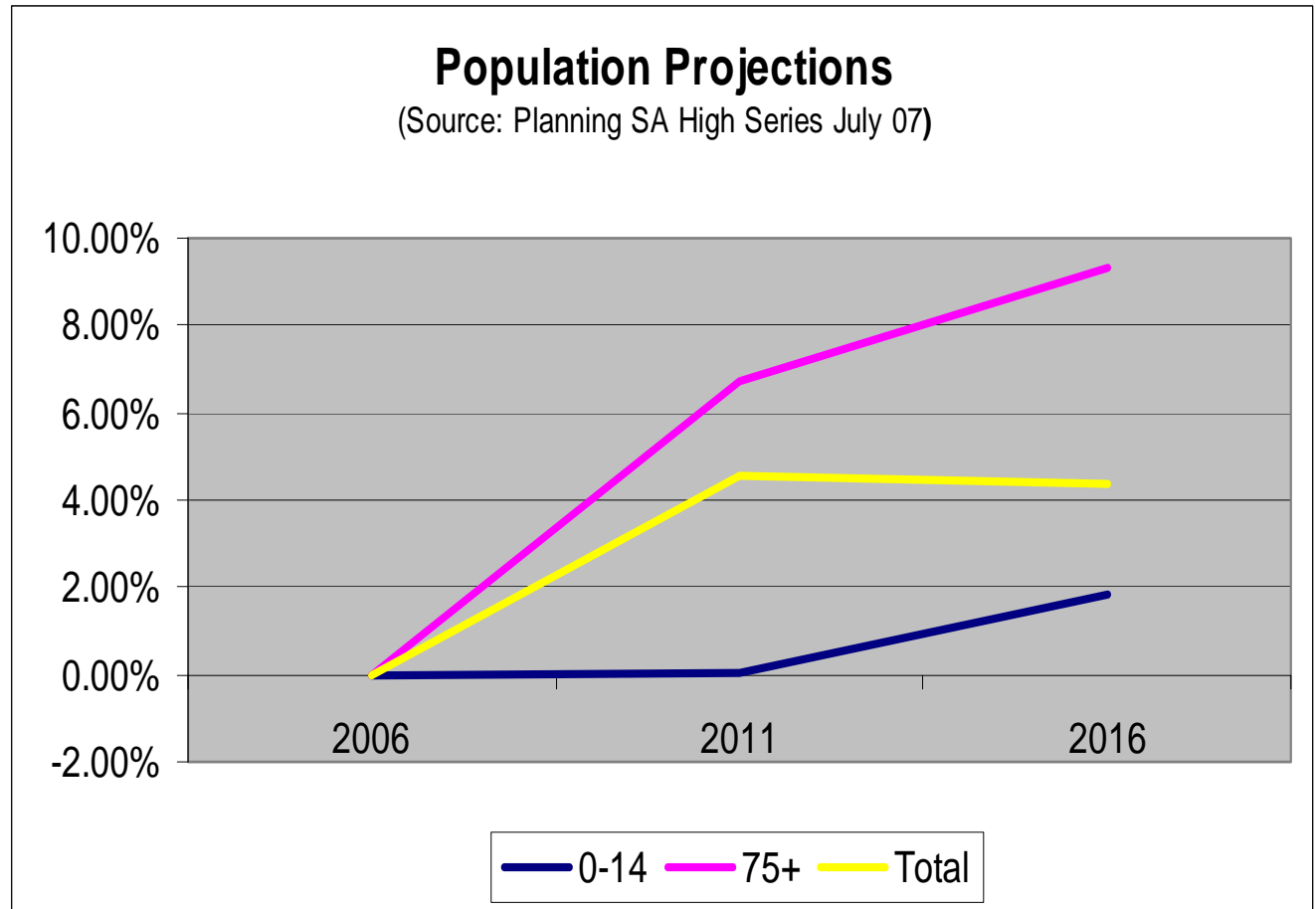
South Australian Health System Reform: Overview

- > Health System Change Drivers
- > SA Health Care Plan
- > GP Plus Health Care Strategy
- > New Models of Care
- > Workforce Reform
- > National Reform
- > Key Messages

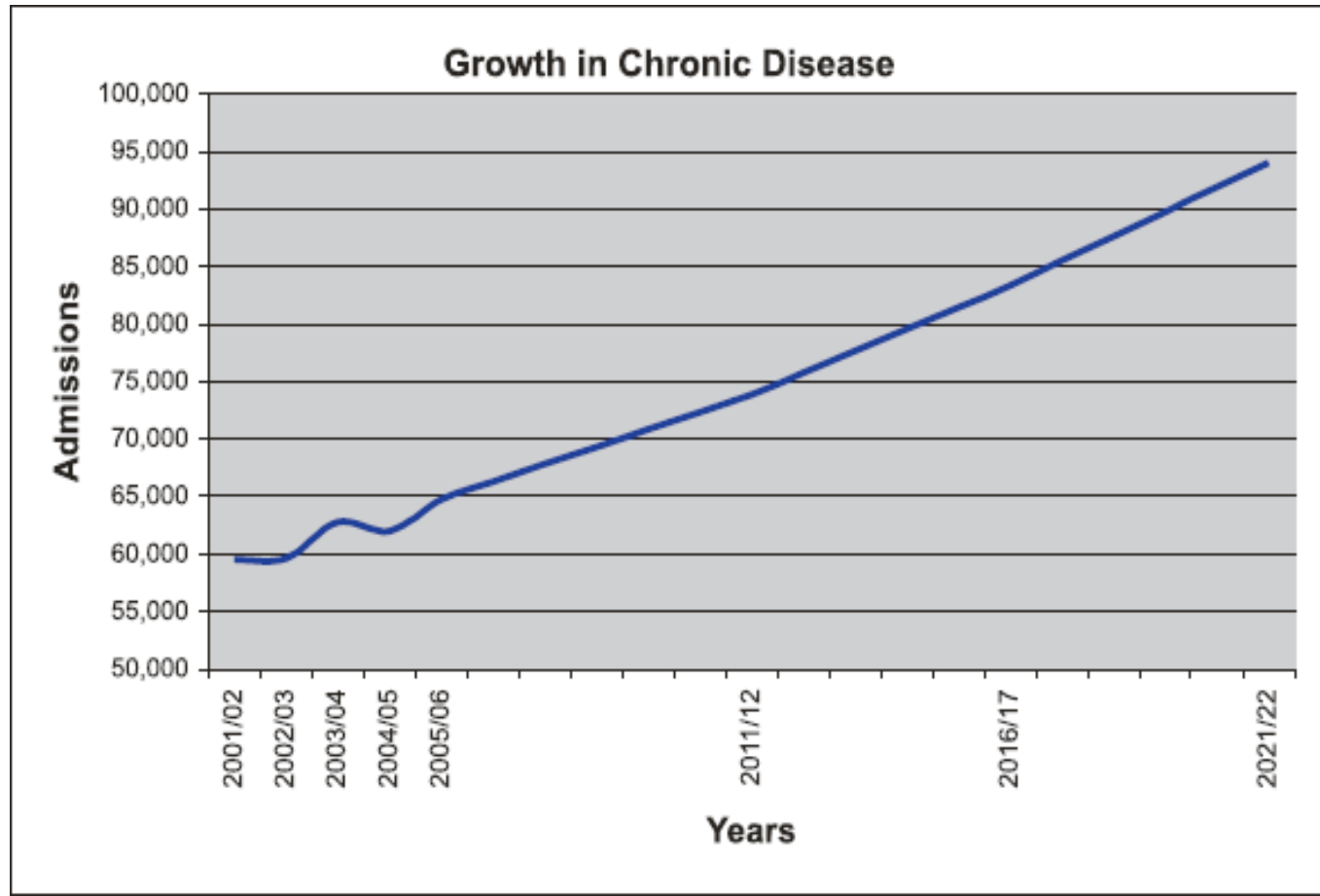
Drivers for Change

- > Changing demographics
 - Ageing population
 - Prevalence of chronic disease
- > Increasing demand
 - Community expectations
 - Technological improvements
- > Workforce shortages
 - Ageing of the workforce
 - Decreasing numbers entering the workforce
- > Increasing cost

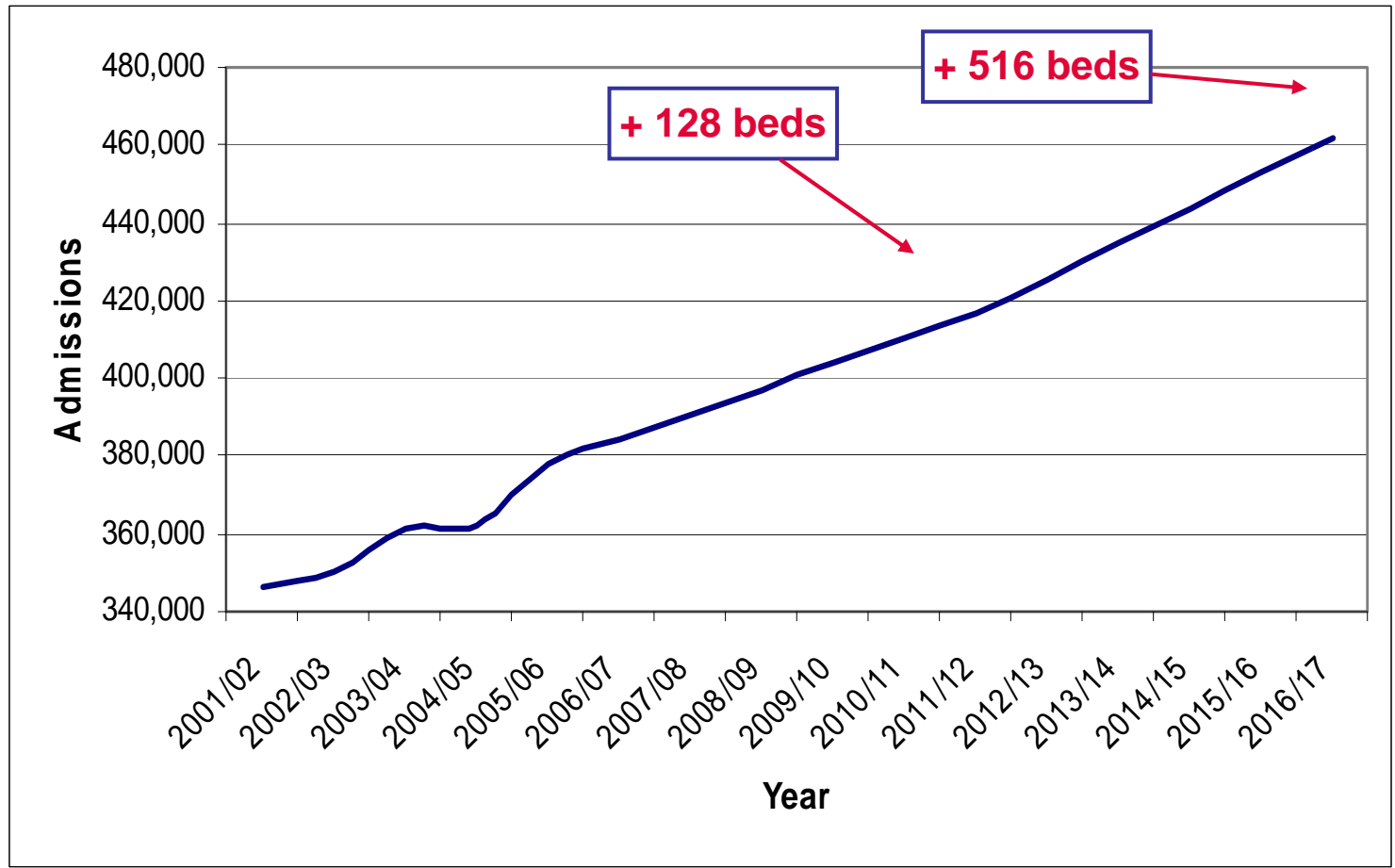
Population: Changing Profile



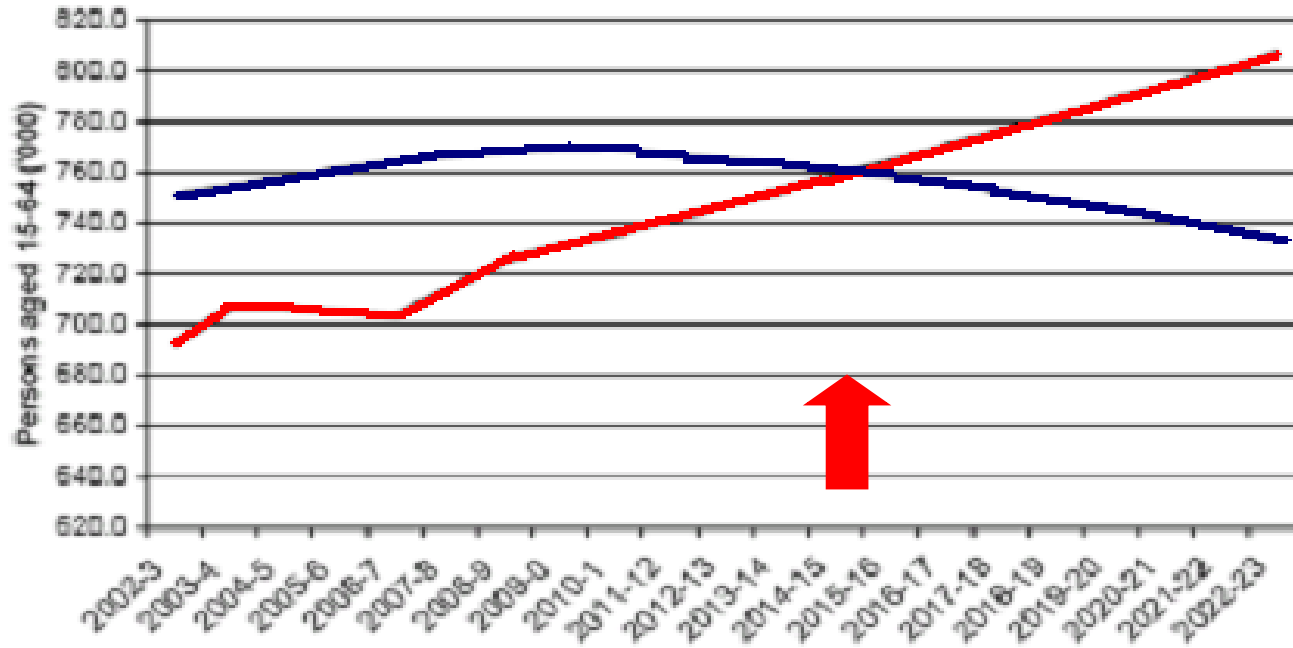
Chronic Disease Hospital Admissions



Increasing Demand Effect on Hospital Beds if we do not Reform



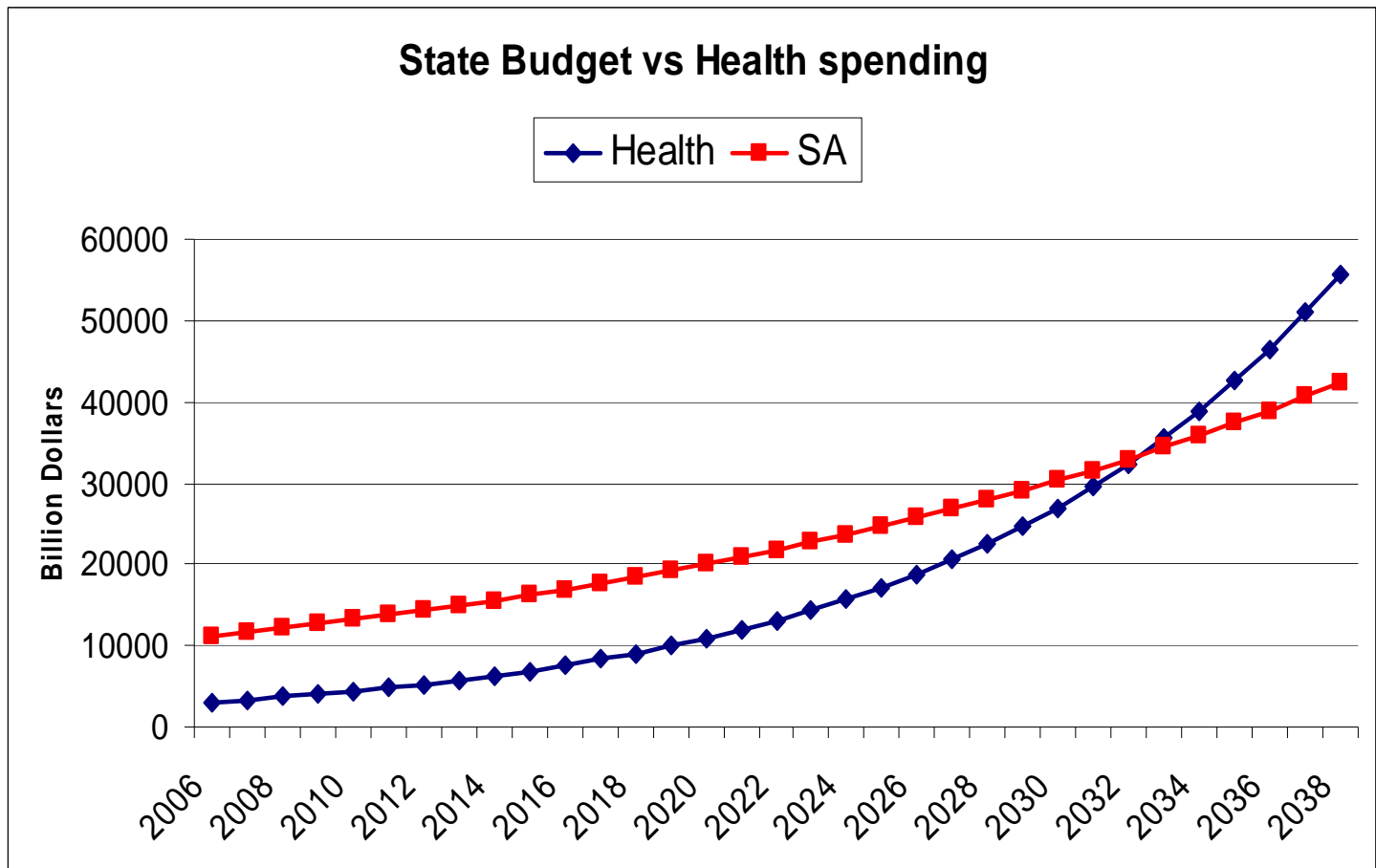
SA Projected labour demand and supply



John Spoehr (2004) Sleepers Awake: demographic change, ageing and the workforce.

— Demand — Supply

Cost Impact with no reform



SA Health Care Plan

- > Launched by the Premier and Minister for Health in June 2007
- > Sets the framework for
 - Service redistribution
 - Demand management
 - Clinical engagement
 - Workforce development
 - Infrastructure investment

Background to the Plan

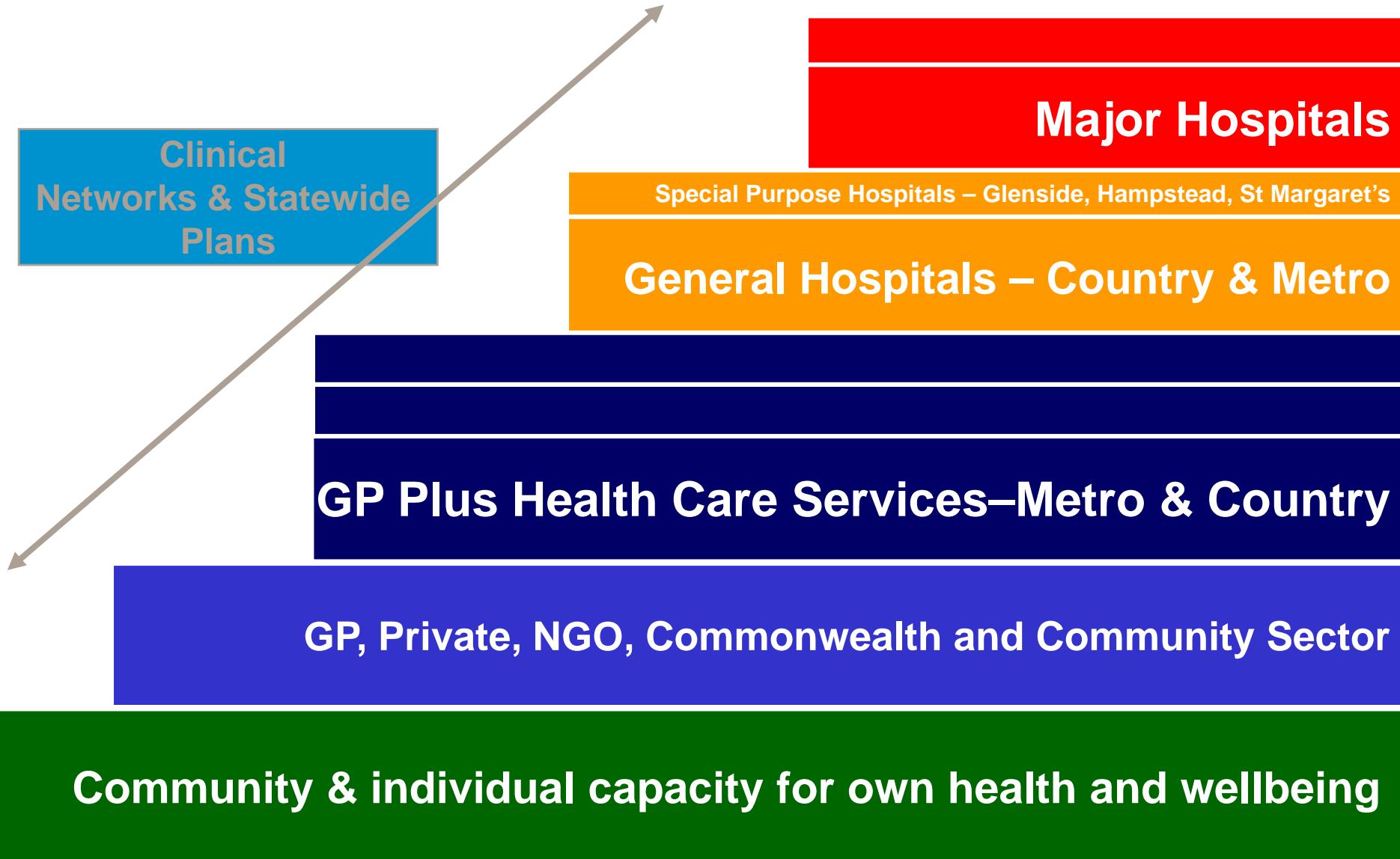
- > Population projections
- > Activity projections
- > Consideration of:
 - Improved patient access
 - Create a better balance
 - Future workforce needs
 - Duplication of infrastructure
 - Planning principles

Key Challenges

In summary, there are two key challenges underpinning The SA Health Care Plan

- **Enabling the hospital system to respond more adequately to the rise in demand**
- **Developing out of hospital services to reduce the rate of growth in demand**

System Architecture



General Practice in Australia

- > Commonwealth function
- > Fee for service
- > “Traditional” General Practice
- > Corporate General Practice
- > Little regulation

GP Plus Health Care Strategy & Objectives

- > Strategy comprises
 - GP Plus Health Networks
 - GP Plus Health Care Programs (incorporating out of hospital initiatives)
 - GP Plus Health Care Centres
- > Objectives
 - Increased primary prevention activities
 - Early detection of health status risk factors
 - Improved management of chronic conditions
 - Increased use of self management
 - Delivery of services closer to home
 - Managing the rate of growth in referrals to hospital
 - Increased research and teaching

GP Plus Health Networks

- > A forum for general practice and other primary care providers to work together
- > The creation of Health Improvement Plans
- > Drive the agenda for out-of-hospital services

GP Plus Health Care Programs

- > Practice Nurse Initiative
- > Risk factor and Lifestyle Programs
- > Chronic Disease Management Programs
- > Self-management Programs
- > Metro Home Link Service
- > Complex Care Programs
- > Universal Home Visiting
- > Health Promotion Activities

GP Plus Health Care Centres

- > Local determination via Health Improvement Plans
- > Add value and complement general practice
- > Enhance access to services for those most in need
- > Create new service delivery opportunities

A New Model of Care for the Hospital System

- > Delivering hospital reform as part of achieving a better balance
- > The Marjorie Jackson Nelson Hospital as catalyst for change

MJNH Profile

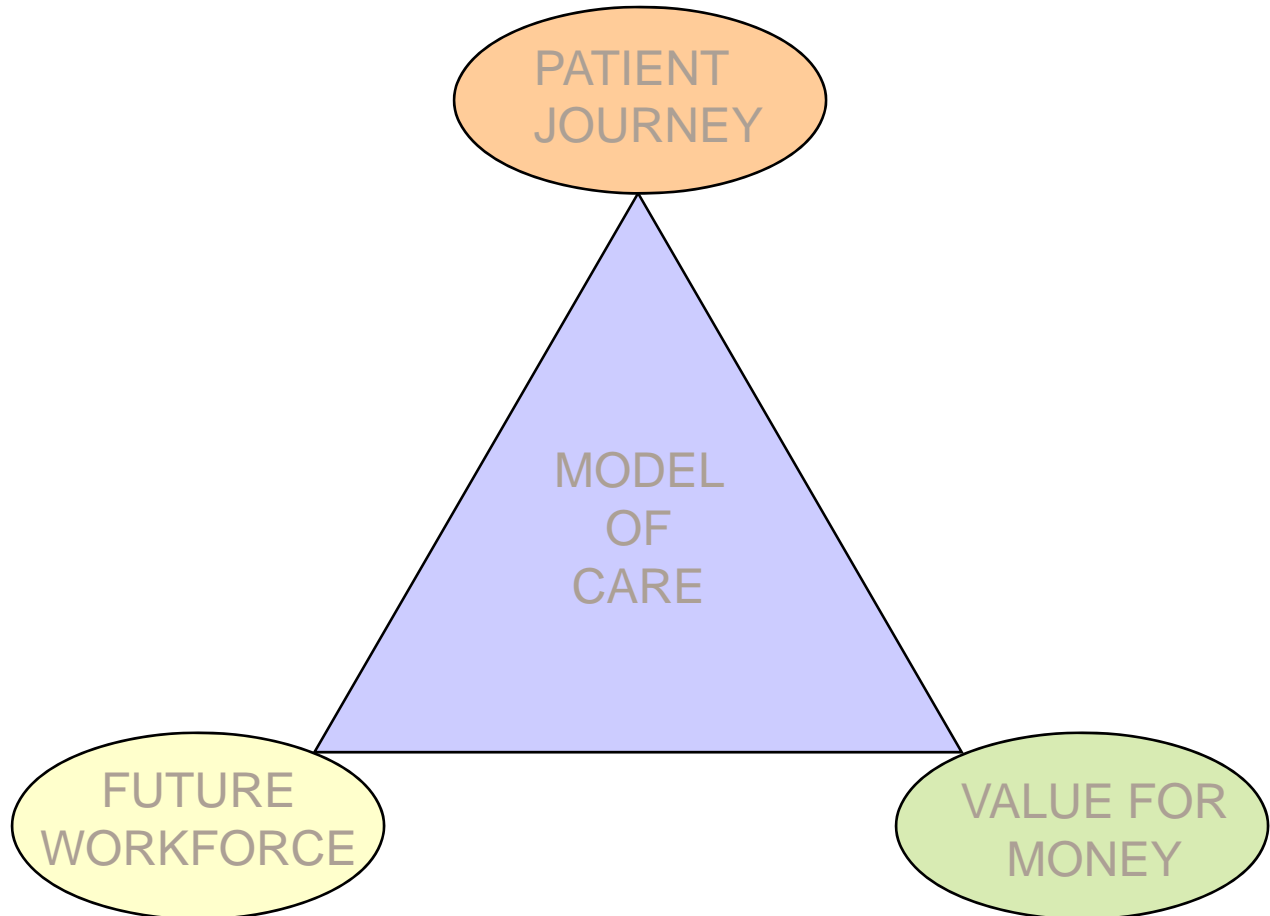
> SERVICE PROFILE

- own local community
- tertiary level services
- state-wide services
 - major burns,
 - trauma,
 - spinal,
 - renal transplantation,
 - neurosurgery,
 - complex vascular and
 - hyperbaric medicine

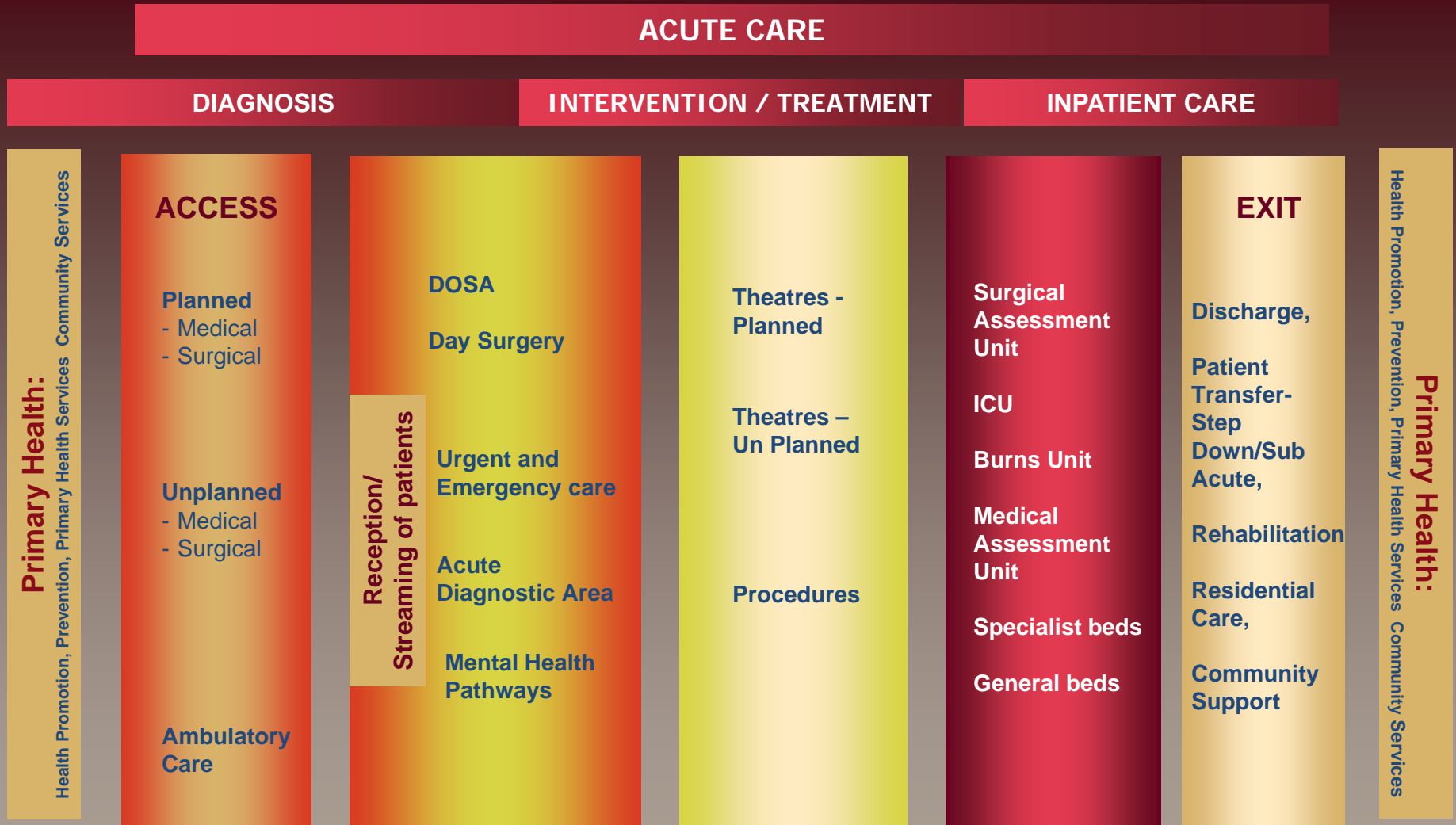
By 2016/17 :

- > 700 multi day beds including intensive care/high dependency beds
- > 100 same day beds.
- > Approximately 40,867 multi day and 42,400 same day admissions per year
- > Average length of stay for multi day patients of 5.2 days
- > Assess approximately 86,000 emergency department patients per annum
- > See approximately 400,000 out patients per annum

MJNH Clinical Model of Care



MJNH Model of Care: Draft Concept



Clinical Support (e.g. Allied Health, Pharmacy, Radiology); **Non Clinical Support** (e.g. IT, Hotel Services, Security, Linen, Waste Management); **Research & Teaching**

ENTRY

Known Patient

Ambulatory Care

Known Patient

Patient Pathways
Case Management

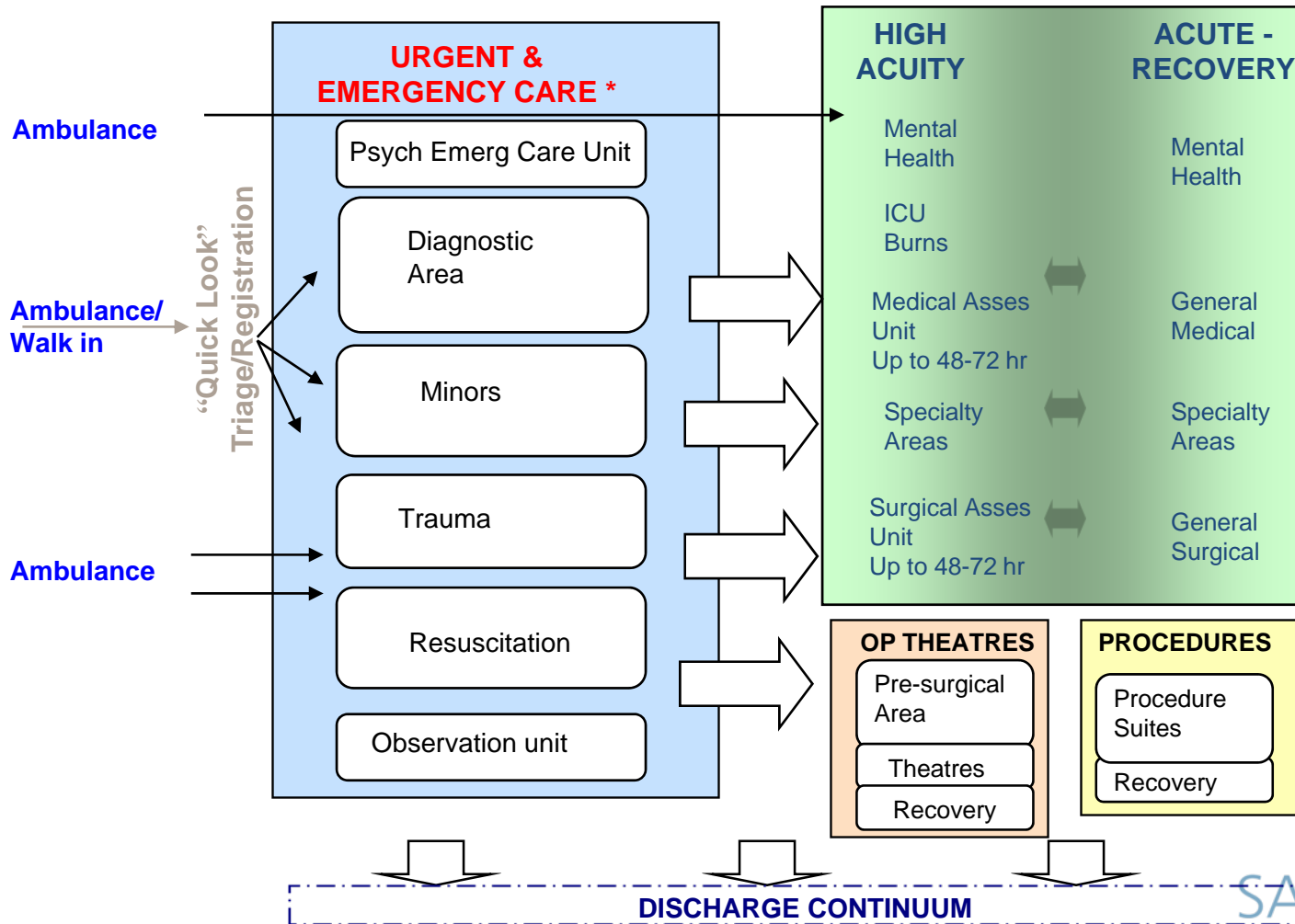
Ambulance -
Known Diagnosis

Diagnosis Pathways
/ Protocols

CARE

Care Plan

Direct Admission
Treatment – Cath
Lab, Theatre etc



The Essence of Care

- > A return to basic care processes
- > The importance of the 'best' death

Workforce Reform

- > Workforce innovation - New roles
 - Lifestyle advisors
 - Nurse sedationists
 - Physician assistants
- > Increased local training
- > Sustained immigration
- > The challenge of doctor mismatch

National Reform

- > ???????
- > ED's and Primary Care
- > Complex Chronic Disease

Key Messages

- > A whole system approach
- > A focus on the patient experience
- > A preparedness to challenge models
- > Investment in appropriate leadership
- > Creating the right incentives/culture
- > Recognising the challenge



Government of South Australia

SA Health