

Conversations with Australians: the first step

Two page summary for National Health and Hospitals Reform Commission of a pilot consultation May-June 2007

"This is OUR health system, not the government's, the Minister's or the providers'. The system must be consumer-centred with decisions made from this perspective."

This report summarises a process undertaken by the Australian Health Care Reform Alliance (AHCRA) that aimed to start a conversation with Australians, albeit it in a modest way, around the future of health care in Australia at a critical point in its history.

Approach

A brief literature review was undertaken, followed by 12 structured consultations with consumers and citizens across Australia (four states, rural and metro) between April and June 2007, and 180 Australians participated.

Findings

The majority of participants (87%) were aged over 40. Six people (3%) identified themselves as Aboriginal and Torres Strait Islander and 12% identified themselves as being of a culturally and linguistically diverse background.

Firstly these findings confirmed those of previous consultations regarding majority (although not unanimous) recognition of:

- The importance of access and equity as crucial principles of Australian health care.
- The significant access issues facing rural consumers.
- Support for a stronger focus on prevention.

Cost of health care is clearly a crucial access issue: cost had prevented 45% from accessing essential care (inc. medication, dental and allied health) in past year. Also over 25% not had not used dental services because too expensive.

- *"I now take one quarter to one half the dose that was recommended by the doctor to save money."*
- *"Service should be affordable" (many thought "free")*
- *"Patients should not have to 'go private' to get services."*

Our consultation also found the following:

- Mixed levels of satisfaction with the health system including very good but over 20% experienced poor care in the last year.
- Care for 32% of those with chronic condition was not well coordinated.
 - *"does the consumer have a 'map' of care laid out for them or does the consumer/family need to navigate the system themselves?"*
- High support for consumer and citizen participation in health

Common sentiments included:

..(we need) good dental care within 120kms. At present we have to travel 500kms for urgent care. If we can wait six months, the nearest competent care is 300kms.

Treatment has been very good but prevention and rehab have been almost non existent. It's all about treating the symptoms presented as opposed to the cause.

Prevention should have a higher priority than cure

More information, easier access to relevant services. Information on how to use the health system for people with chronic conditions.

Medicines being affordable when needed. Dental should be made available on Medicare...

Keep cost to a minimum by utilising the taxpayer system to fund a Medicare system that supports every member of the community and prevents us (Australians) from following the American medical system.

Many services I need are not in the public system such as for my feet. They want me to pay \$900 for prosthetic shoes to help me walk.

One is concessions and provisions for isolated and remote patients; two is accommodation and three transport.

More focus on care in the community and home care to prevent hospital admissions...

Immediate/same day appointment at GP is really important to keep an illness from getting worse.

Secondly it produced a rudimentary set of **consumer-developed criteria** against which the current system, proposed changes/reforms, and future systems can be judged. The criteria that enjoyed **by far** the highest support among participants reflect the above comments and were as follows.

The health system/services should be:

- **Affordable** - and not dependent on ability to pay.
- **Accessible in geographic terms** (especially for rural Australians) including access to specialists.
- **Accessible in cultural and social ways** (e.g., via language services, cultural sensitivity, accessibility to most disadvantaged) but also show respect more broadly for all users.
- **Equitable** – for all Australians "*Equitable, fair system for all Australians, city or country, regardless of race*".

Other criteria with reasonable support were that the system should also ensure:

- Continuity of care and assistance to navigate the system
- A stronger focus on prevention than currently exists
- Provision of quality care
- Higher level of integration of services, and holistic approach
- Consumer involvement in decision-making.

The findings support AHCRA's position that there should be a national consultation to underpin a new national health policy around which an Australian health care system could be designed.