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**CHF/AHHA
Consumer Engagement Forum
25th August 2016**

Consumer participation in commissioning, planning & decision making

Consumer Participation (CP)

1. “Organised” primary care & PHNs
2. “Organised” CP, what does it take
3. How are we using the model

Organising primary care in Australia – at the meso level

General Practice as a specialty

Divisions of General Practice

1992-2011

~120 semi corporate entities representing GPs; developed progressively and independently

Corporate consolidation

Medicare Locals

2011-2015

61 corporate entities funded by Government more broadly tasked; coming out of 2009 H&H Reform

Health care homes

Primary Health Networks

2015-

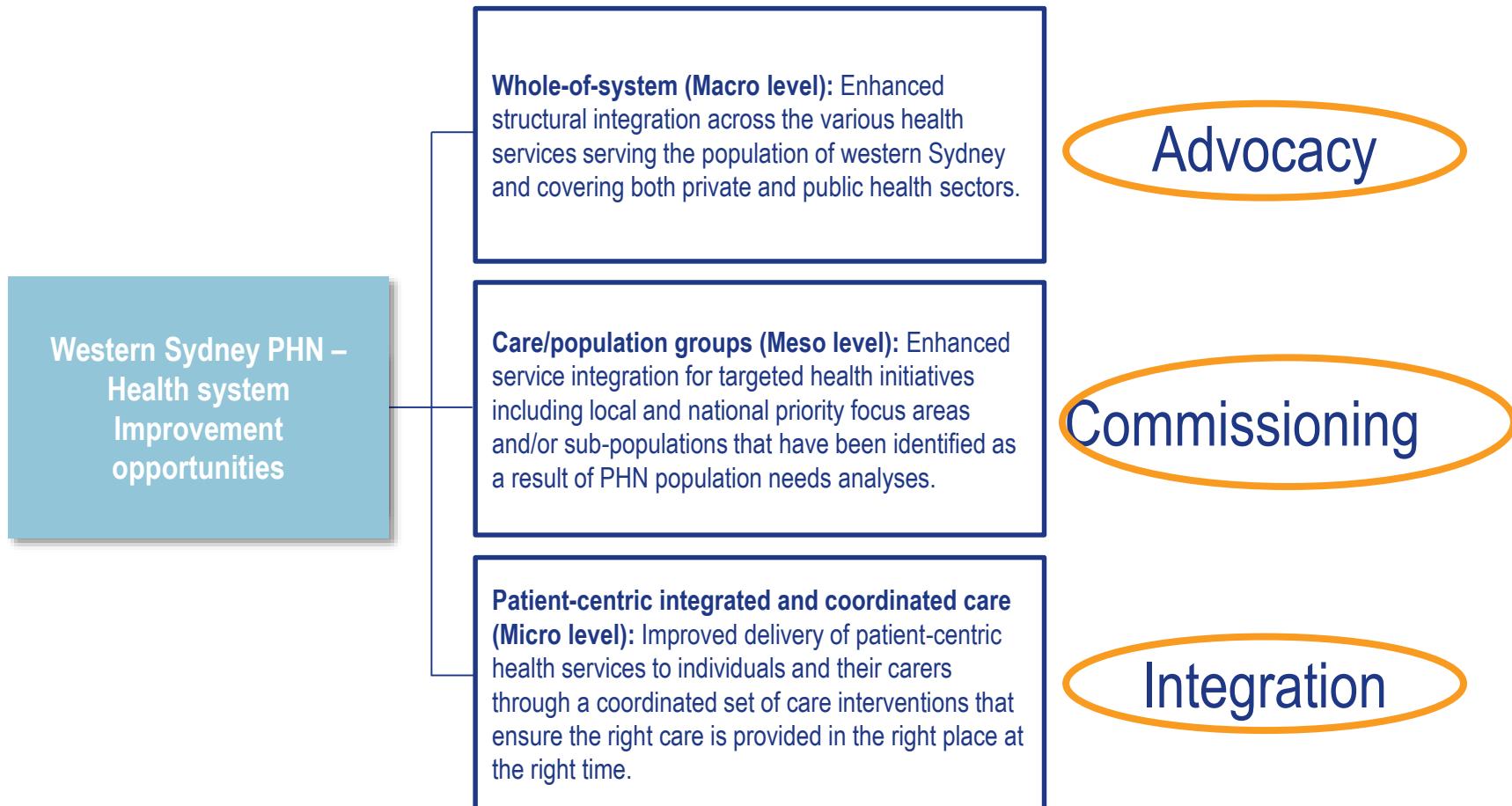
31 non service providing “market contested” entities; coming out of ML review



Key Characteristics of PHNs

- Fewer in number than Medicare Locals – economies of scale
- Boundary alignment with LHNs (clusters of LHNs)
- Clinically focused care integrators
 - primary, community and acute care
- Clinical Councils – Greater role for GPs
- Community voice through Community Advisory Committees
- Regional purchasers of services, not providers
- Outcomes focused performance expectations
- Maximising the investment in frontline services

PHN Framework Western Sydney



“Integration”: A developing priority

Care, which imposes the patient's perspective as the organising principle of service delivery and makes redundant old supply-driven models of care provision. Integrated care enables health and social care provision that is flexible, personalised, and seamless

(Lloyd & Wait 2005)

Commissioning: Framework

Evaluation

Understand and evaluate the quality of delivery and the impact that it is having against agreed standards and PHN goals

Managing performance

Acquire and analyse information about provider performance (including the broader relationship) to monitor, assess and deliver quality

Shaping the structure of supply

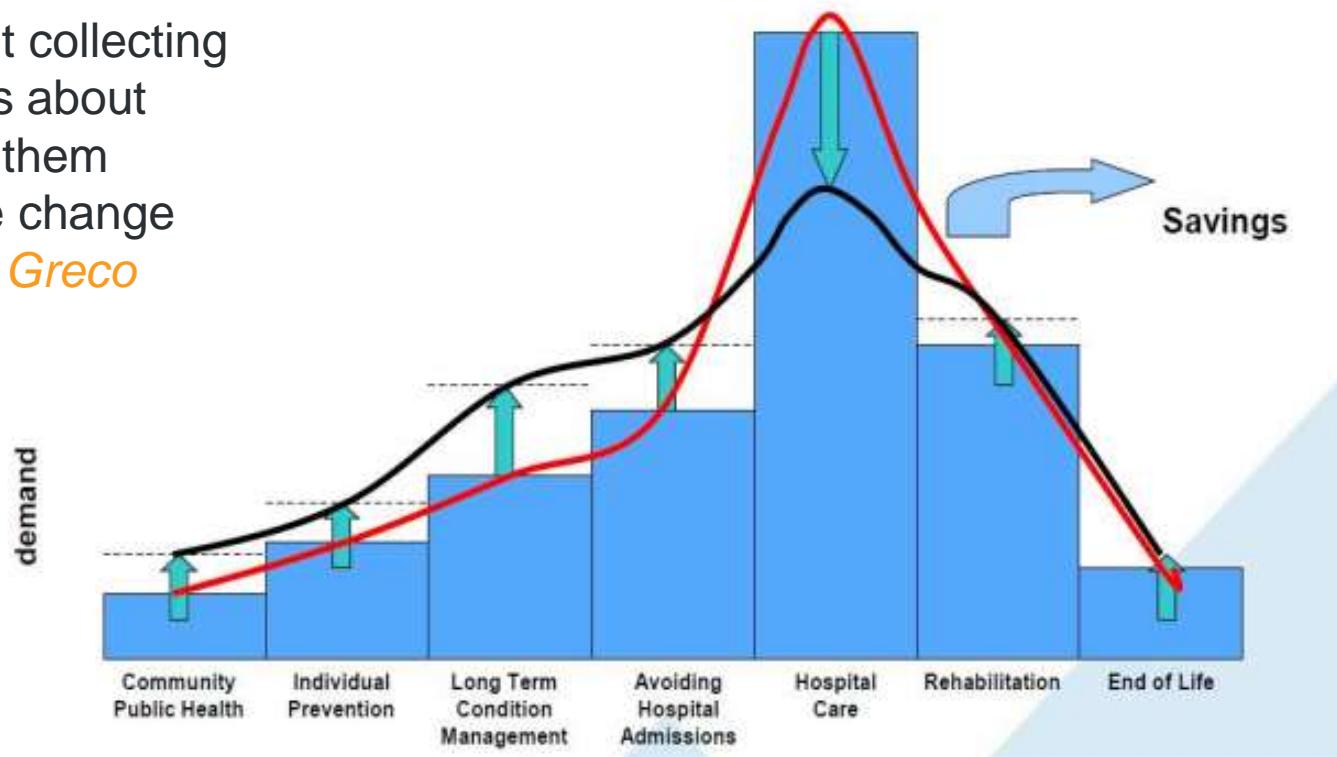
Stimulate a thriving and sustainable market to meet the ongoing health needs of the population and respond to commissioners' requirements.



Advocacy: Shifting focus & investment

Significant opportunities to redistribute health spending through strengthening of primary and community care

Empowering consumers is more than just collecting data. It's about helping them become change agents. *Greco*



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From the ACSQHC



“There is no single approach to partnering with consumers. How healthcare organisations choose to establish and maintain their partnerships needs to reflect the organisation’s context, the purpose of the partnership, the desired outcomes and the environment in which the partnership is occurring. Where possible, strategies to engage with consumers should build on existing processes.”

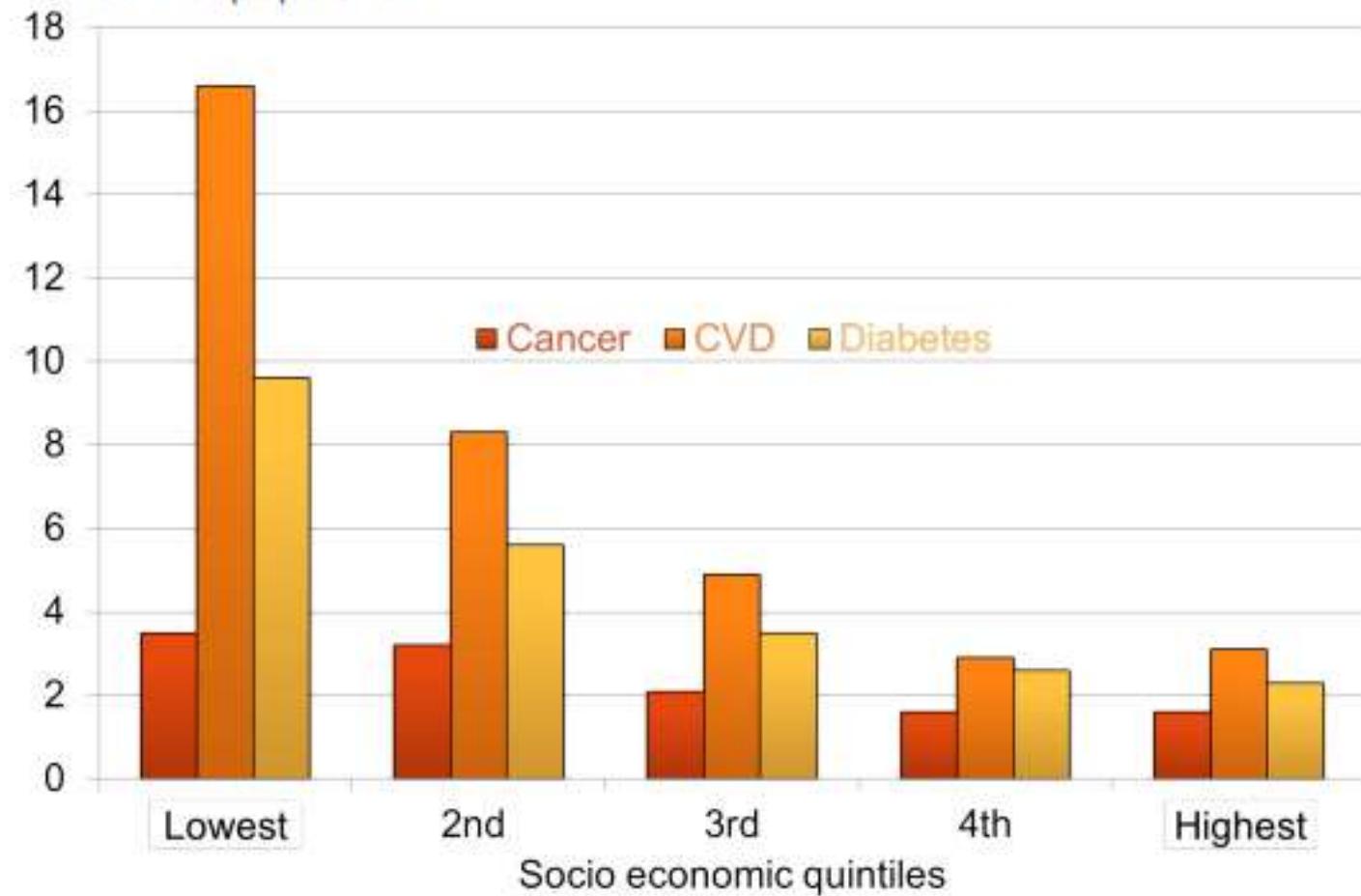
Optimising the solution for consumers will mean disregarding boundaries



Health is not just about health

Figure 1: People living with disadvantage have more chronic disease

Per cent of population



Levels of CP

Individual care

- Ability to make informed choices
- Partnering with providers

Systemic

- Shaping policy and structures
- Participation in decisions about service delivery

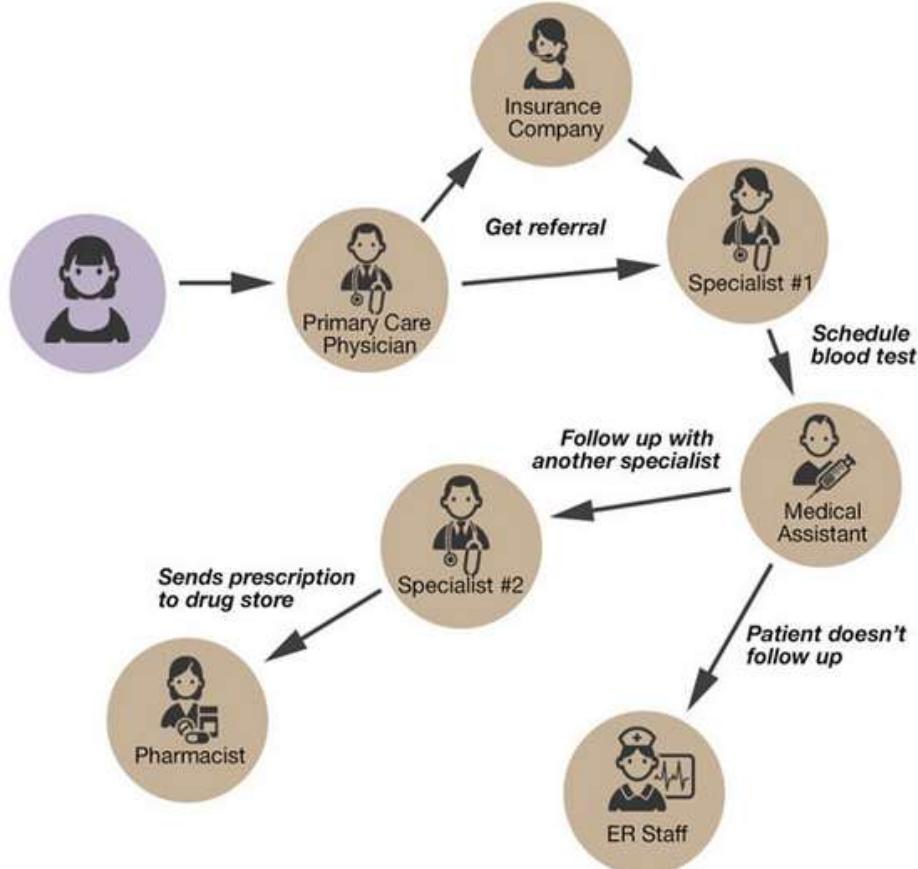
System wide

- Understanding quality, safety and performance of the system ~ transparency

Rethinking Primary Care – Rethinking our relationships

Clear communication and effective coordination among health care providers are vital for patient health, but the current primary care structure makes collaboration incredibly difficult. See the difference:

Current Model



Patient-Centered Medical Home





KEEP
CALM
AND
TAKE THE
RESPONSIBILITY

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“The Quadruple Aim”



Patient Experience of Care

- Safe and effective care
- Timely and equitable access
- Patient & family needs met



Quality and Population Health

- Improved health outcomes
- Reduced disease burden
- Improvement in individual behavioural and physical health



Sustainable Cost

- Efficiency and effectiveness of services
- Increased resourcing to primary care
- Evaluation of commissioning



Improved Provider Satisfaction

- Increased clinician and staff satisfaction
- Evidence of leadership and teamwork
- Quality improvement culture in practice

What are we trying to solve for better CP ~ “principles”

- An approach which sees CP move beyond organisational silos
- CP being relevant to the level at which an impact can be made
- Informed choices can be made about short & long term approaches to health challenges
- Outcomes of CP can be shown to influence systems, organisations & individuals
- Invest in the process of bringing these principles to life
- Consumer and career centric co-design and commissioning is business as usual

Community and consumer engagement in design

Top down

- Partnering with consumers
- Knowing health\service needs
- Improving existing services

Ground up

- Partnering with community
- Understanding what will better meet needs
- Reducing barriers by identifying and filling gaps

Using the Model-Top Down Engagement

- **Program specific**

Consumer Consultant(s) employed to work closely with, for example, WSPIR clients, to make improvements in care and support the design, delivery and evaluation of services

- **Commissioning approaches**

Operational funding allocated to support major functions, such as in AOD, with consumers and consumer activities that support the commissioning model

- **Regional partnerships**

Elevating the consumer voice in consumer structures to the same level as others in relationships and partnerships with other stakeholders, e.g. WSLHD

Using the Model - Ground Up Engagement



- **Partnering with Community**

Broadly based ‘town hall’ sessions with local communities, advising of approaches and testing them

- **Regional Needs Assessment (RNA)**

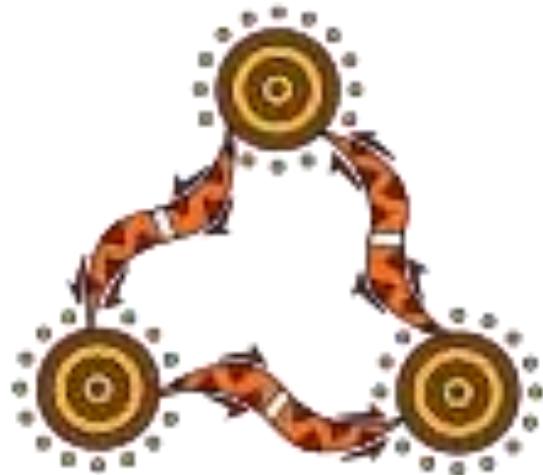
Reflecting structured feedback in RNA and the WSPHN Activity Work Plans that we invest/commission in to improve responsiveness and access

- **The consumer team member**

Beginning to formalise the consumer as a permanent team member in primary care teams, both at the practice “population” or community level, and individual level

Thank you

phn
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As the Western Sydney Primary Health Network, WentWest is focused on addressing both regional and national health challenges. Together with health professionals, partners from both the health and hospital sector, consumers and the broader community, WentWest seeks to identify gaps and commission solutions for better health outcomes.