

# 10-Year Primary Health Care Plan

The National Primary Health Care Strategic Framework provides a vision for primary health care in Australia which aims to:

- improve health care for all Australians, particularly those who currently experience inequitable health outcomes
- keep people healthy and prevent illness
- reduce the need for unnecessary hospital presentations
- improve the management of complex and chronic conditions.

Primary health care provides the first point of contact for consumers. It can be delivered in the home, general or private practice, community health facilities, community pharmacies, local government services, Aboriginal Community Controlled Health Services or non-government services. There is a diverse workforce, including nurses, midwives, medical practitioners, dental practitioners, pharmacists, allied health professionals and Aboriginal and Torres Strait Islander health practitioners.

Primary Health Networks (PHNs) have been established to develop and support primary health care capacity. A core function is to improve primary care services at the local level, to be responsive to local need and differences in regional health infrastructure and services. PHNs approach this:

- In partnership with clinicians, Local Health Networks (LHNs or their equivalent), local governments, non-government organisations and communities.
- Through analysing regional population health needs and local health services, building workforce capacity, developing localised care and referral pathways, and commissioning health services to meet identified local place-based community needs.

In August 2019, Federal Health Minister the Hon Greg Hunt announced *Australia's Long Term National Health Plan*. This plan includes the development of a 10-year Primary Health Care Plan (the Plan). The Council of Australian Governments (COAG) Heads of Agreement on public hospital funding and health reform for 2020-2025 outlines a commitment by the Commonwealth to reforms in primary care that are designed to improve patient outcomes and reduce avoidable hospital admissions (clause 7b).

**For information: Alison Verhoeven, Chief Executive, 0403 282 501**

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Released January 2020

## AHHA POSITION:

- ✧ Integrated health systems and flexible funding approaches should be prioritised within the Plan so that Australians with multiple care needs are able to seamlessly access services and transition between sectors and care providers.
- ✧ The reforms foreshadowed in the COAG Heads of Agreement should include governance and funding arrangements which will support better integration of care. PHNs should be empowered to work in partnership with LHNs to promote integrated care which is patient-centred, outcomes-driven, and cost effective. They must be supported and provided with sufficient flexibility, authority and accountability to ensure the commissioning of innovative services that meet local requirements.
- ✧ Collaboration and communication across primary, acute, community, social, disability, and allied health care sectors should be prioritised in order to coordinate population health planning and reduce inequities in health service access and health outcomes.
- ✧ The Plan should support and enhance other Commonwealth health strategies, including those in the areas of preventive health, mental health, women's, men's and children's health, suicide prevention, health workforce, digital health, aged care, palliative care, Aboriginal and Torres Strait Islander health, maternity services, alcohol and other drugs, and oral health.
- ✧ In addition to alignment with the priorities of the National Health Agreement, the Plan must consider the recommendations of the Royal Commission into Aged Care and the Productivity Commission Report into Mental Health.
- ✧ Mechanisms to embed research, evaluation and data management within primary health care processes must be incentivised in order to inform continuous improvement strategies.
- ✧ The development of a national primary health minimum dataset that links to broader, more extensive national health data registries is necessary. Governments should embed a minimum data requirement for all primary health services receiving government funding.