

MEDIA RELEASE

Regional health system change

Murray PHN chief executive officer Matt Jones said today that residents of regional areas continued to be comparatively disadvantaged in health outcomes and that we need coordinated approaches to improve access to health care services.

Across the Murray PHN region, there are more than 33,300 adults affected by diabetes, 13,700 people over the age of 45 affected by chronic lung diseases and more than 8,300 affected by chronic heart failure.

“We have higher rates of debilitating chronic illnesses than residents of our cities, significant levels of poor mental health, alcohol and other drug issues, an ageing population, a huge geographical area to service, and the challenges of attracting and retaining a skilled medical workforce to support our regional populations,” he said.

“It is time for change in our health system, to find innovative ways of delivering coordinated services in a regional context and to enable us to cope with the increasing demands of acute and chronic illness.”

Mr Jones referenced population health data that showed that poor disease management and a lack of appropriate or available primary care services in some areas put pressure on ambulance services and emergency departments as patients' health deteriorated unnecessarily.

“We know that poorly managed illnesses contribute to an estimated 71,500 potentially preventable hospital days in our region each year, at a cost of more than \$200 million to our hospital system and a potential block to reducing hospital waiting lists.” Mr Jones said. “To address these issues, we really need to understand them. Without adequate co-ordination and focus, the system can't provide optimum and effective care – worse, the impact on individuals can be devastating.”

PHNs (Primary Health Networks) were established by the Australian Government in 2015 to provide a leadership role in the primary health care environment, to apply a regional lens and to encourage system improvement through increased efficiency and effectiveness.

From Mildura in the north west, to Woodend in the south, across to Seymour and up to Albury, Murray PHN covers an area of almost 100,000 square kilometres that is home to more than 560,000 people.

Murray PHN's evidence-based regional priorities of Chronic Obstructive Pulmonary Disease (COPD), cardiovascular diseases, and diabetes and its complications join the nationally established priorities of mental health, alcohol and other drugs, Aboriginal and Torres Strait Islander health and aged care.

Mr Jones described the application of population health priorities as assurance that funding would be directed to the areas of acute or chronic ill health that have the most significant impact on the health of Australians.

“It is vital that the system changes from a focus on single episodes of service, to working in collaboration with a range of health professionals to tackle the greatest burden of disease.

“With \$25 million available for health service commissioning in 2017/2018, Murray PHN is committed to ensuring our communities have access to co-ordinated models of care that are tailored to reducing the burden of disease, preventable hospitalisations and are tailored to regional circumstance,” he said.

“We are forming partnerships and looking for innovation to achieve our goals of delivering improved health outcomes for our communities,” he said. “Importantly, our partnerships include the input and perspectives of our eight community and clinical advisory councils, based in our four regional catchments North West, Central Victoria, Goulburn Valley and North East, to ensure our approaches are in touch with local needs and opportunities.

“Ultimately we must help the primary healthcare sector deliver high quality services to ensure patients receive the right care at the right time and place”.

“By treating illnesses more effectively at their earlier stages and by helping patients to manage aspects of their own care, some of the more serious disease consequences can be reduced,” Mr Jones said. “We need co-ordinated and focused approaches to ensure people are not going to hospital unnecessarily.”

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