

Using the MBS to expand the range of services for our clients

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Working with general practice

Department of Human Services position statement



*Bringing together
departmental &
general practice
work to enhance
the integration of
health care*

Alignment of priorities

- Supporting the role of GPs in the health care team
- Focus on multi-disciplinary team-based care
- Evidence-based management of chronic disease
- Self-management
- Supporting prevention

Developing a PH Strategy for Vic

Why are we doing it (big picture)?

- improving primary health care in Victoria
↑ outcomes for consumers;
- as a positioning tool to ↑ opportunities
- contribute to coordinated and integrated health system in Victoria.

Developing a PH Strategy for Vic

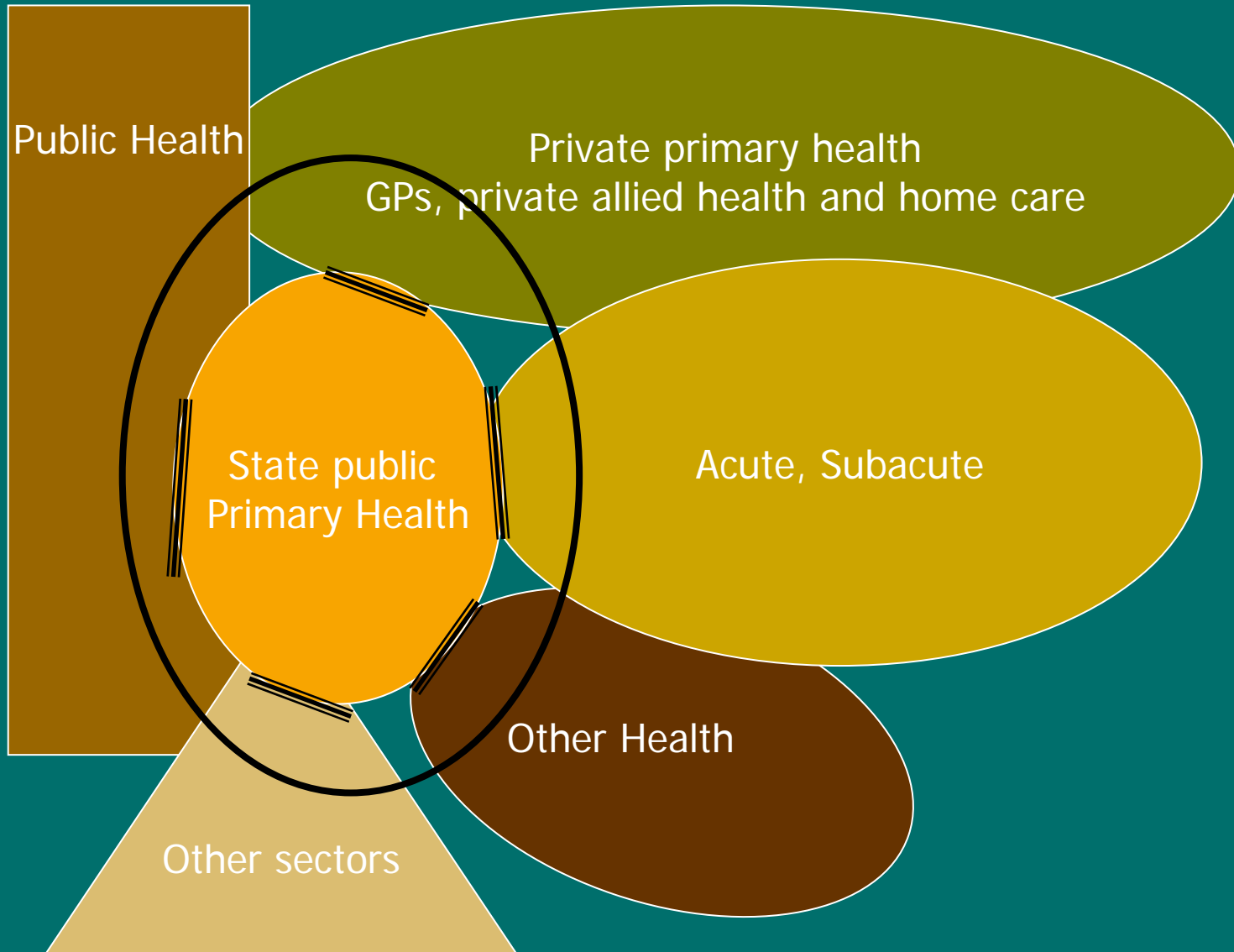
Why are we doing it (DHS perspective)?

- To bring the work across a range of programs together under agreed future directions (PH Branch and others)
- Timely in terms of:
 - Commonwealth Gov directions
 - New 3 year agreements 09-12
 - Positioning in the development of a Vic WoH policy

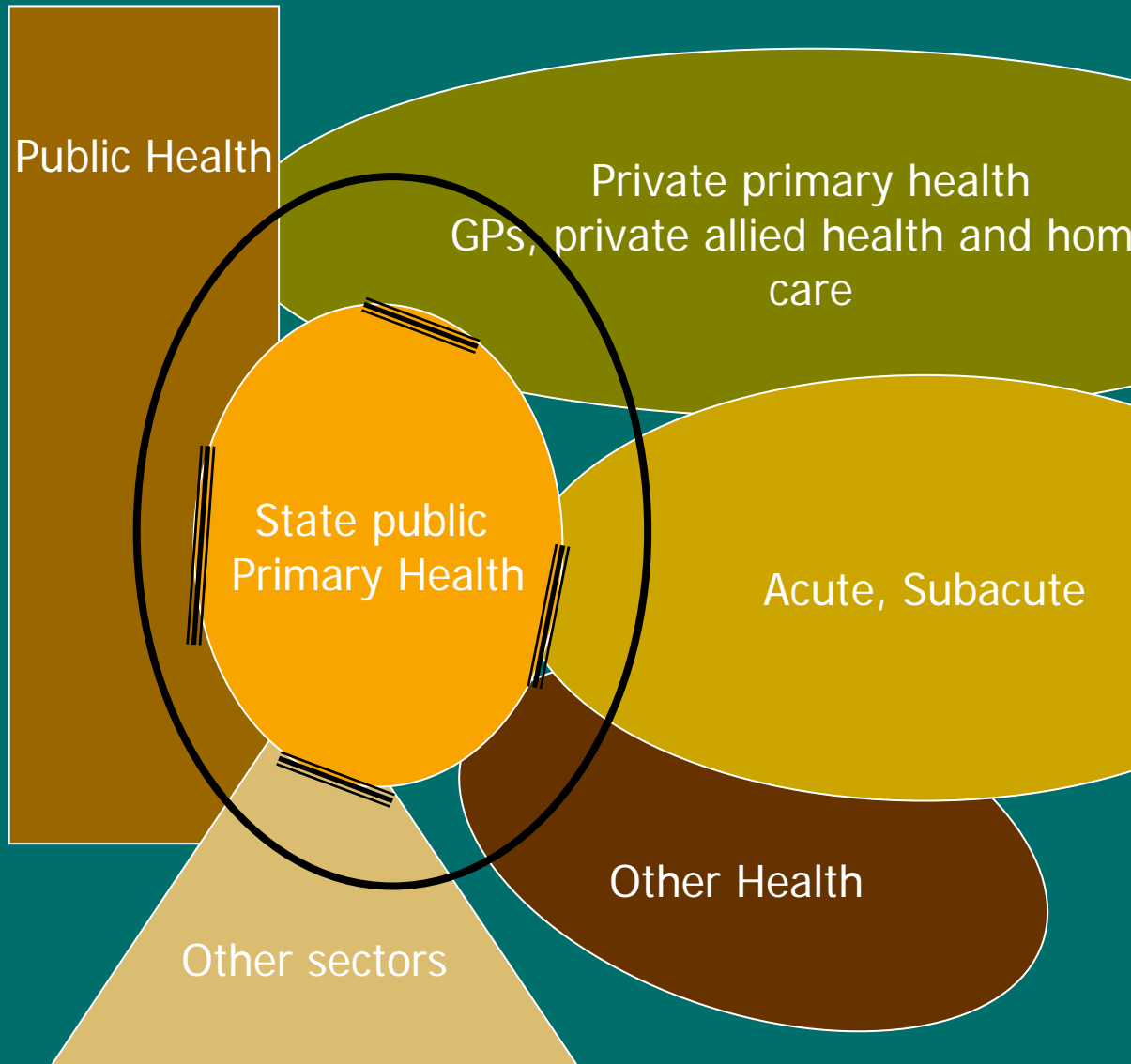
The challenges for PHC

- Responding to the needs of an **increasing and ageing population**
- The growing incidence of **chronic disease and** reduce avoidable **hospital admissions**
- Rising health system and technology **costs**
- Widening **health inequalities**, particularly between indigenous and non-indigenous Victorians
- **Achieving integration** between PHC providers and across the interfaces with other sectors (multi issue care)
- Continuing to improve **health outcomes** for Victorian's across the **life course**
- Addressing health **workforce capacity constraints**

Primary Health Strategy – area of influence



Primary Health Strategy – area of influence

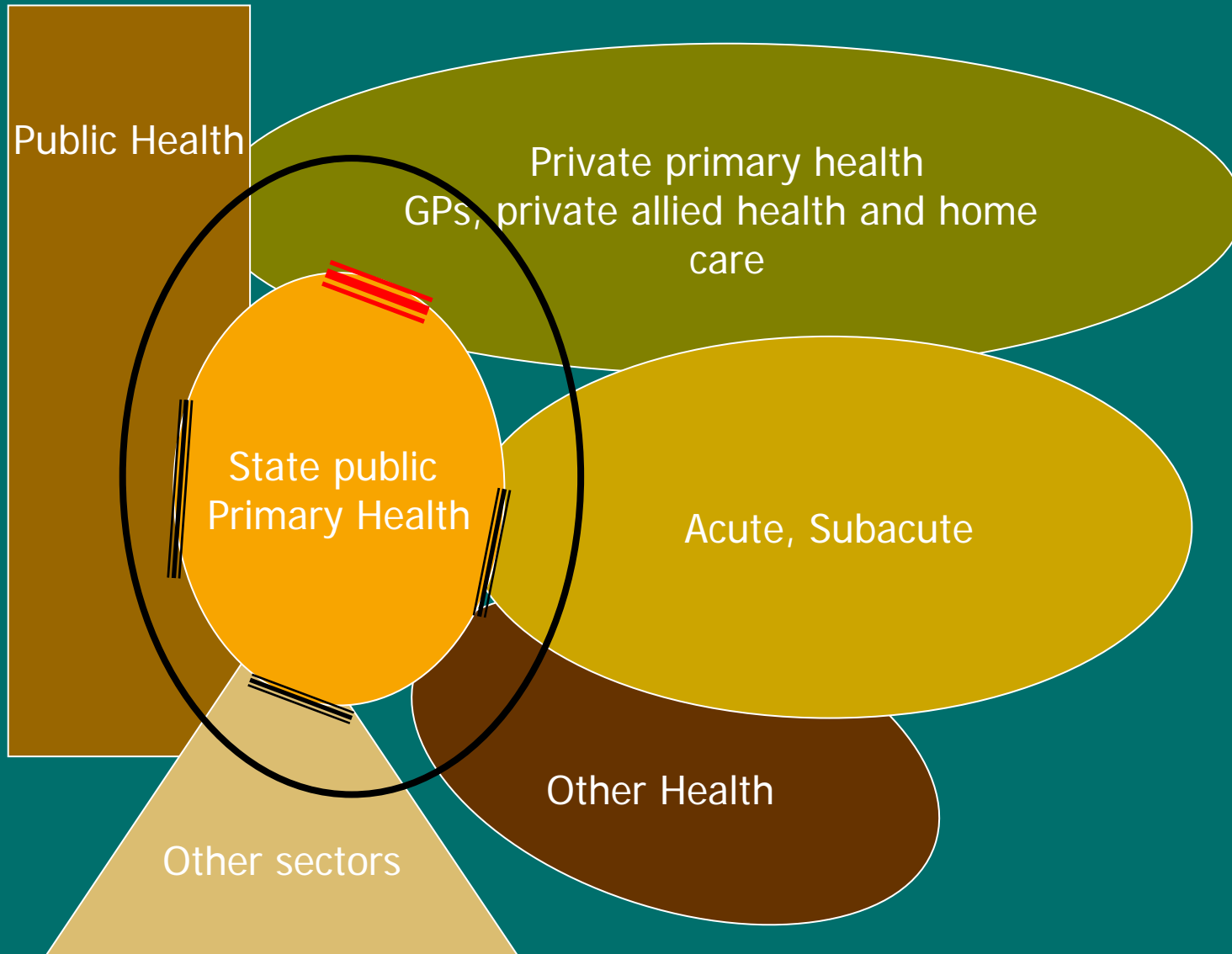


At points of intersection

Aims:

- Consolidate and develop partnerships for integrated planning and care with other sectors – health or other
- Limit avoidable hospital admissions

Primary Health Strategy – area of influence



What do we still need to do?

Short term

med term

long term

1. Drive and support better service access and integration
2. Improve and develop PH service, funding and accountability models
3. Cultivate and promote the PH workforce and evidence base

Policy agenda

ICDM
GP care planning & access
Area based planning
Expand Service Coordination

Service model implementation

Outcome based service models
Data Collection & utilisation for service planning
Embedded ICDM – enrolled pops
Flexible/satellite workforce models

Fully functioning system

Fully integrated IT/IM
PHC funding based on area pop plan
Access to services timely appropriate and streamlined
Service Coord uniform across HSs

Commonwealth agenda
MBS reform, e-health, Nat PHC plan, H&HRC etc

Questions?