

Queensland Divisions Network Position Statement

The role of Divisions of General Practice in primary health care - July 2007



About this document

This statement is the Queensland Divisions Network's vision for the role of Divisions of General Practice in primary health care in Queensland. As well as primary health care, Divisions are integrally involved in building a better health system with other sectors, including the acute and tertiary health care sectors. This statement focuses on primary health care.

The Queensland Divisions Network supports the vision of a reformed, well planned and integrated Queensland primary health care system - a system that is based on collaborative partnerships and provides coordination of care services to meet the needs of individuals and local communities.

This document builds on the Australia Divisions of General Practice (ADGP) Primary health care (PHC) position statement¹, and the Queensland Divisions Network Position Statement on The Role of General Practice in Primary health care². It is complemented by the Queensland Divisions Background Paper on the Role of Divisions of General Practice in Primary Health Care.

What is the Queensland Divisions of General Practice Network?

The Queensland Divisions Network is a unique and well established primary health care infrastructure with the potential to provide improved health care solutions for Queensland. The Network comprises General Practice Queensland as the State Based Organisation, together with 18 Divisions of General Practice. This network links over 3,000 GPs, 1,300 General Practices, 1,420 practice nurses as well as other practice staff and allied health providers across Queensland.

In Queensland, Divisions of General Practice are implementing a number of programs that pool federal and state funds and/or integrate programs for better coordination and more efficient and responsive local service delivery.

What does the Queensland Divisions Network mean by primary health care?

The following definition of primary health care, as outlined by The World Health Organisation (WHO) Alma Ata, was agreed to at the November 2004 Board Chairs Forum, and the February 2005 Queensland Divisions Forum, and is used throughout this document.

*Primary health care is the provision of essential health based on practical, scientific and socially acceptable methods and technology. It is made universally accessible to individuals and families in the community through their full participation and at an affordable cost to the community and country. PHC is the central function and main focus of the country's health system and of the social and economic development of the community. It is the first contact of the individual, family and the community with the national health system, bringing health care as close as possible to where people live and work, and constituting the first element of a continuing health process.*³

Primary health care involves health promotion, illness prevention, and management of health issues over time. Primary health care emphasises working with individuals and communities to maintain and improve their health and wellbeing. An efficient and effective general practice sector is essential for the success of primary health care.

Which principles should underpin Queensland's primary health care system?

The Queensland Divisions' Network suggests that the key principles underlying integrated primary health care include, but are not limited to:

¹ Australian Divisions of General Practice 2005. Primary health care Position Statement

² Queensland Divisions Network October 2005

³ World Health Organisation 1999. Health Promotion: Definition of health. Declaration of Alma-Ata. <http://who.int/hpr/docs/almaata.html>

- Access to timely and coordinated care across service delivery settings.
- An emphasis on appropriate and timely provision of health care for individuals and communities, across the wellness-illness continuum, and throughout the life course.
- A focus on prevention, early detection and intervention, including increased self-management and personal responsibility for health, within a holistic view of health and wellbeing.
- General practice based multi-disciplinary and inter-organisational teams of health service providers with a focus on managing and preventing chronic disease, especially those significantly affecting Queenslanders⁴.
- A partnership approach to integrated service provision which includes clear governance structures and role definitions.
- Balanced investment that can utilize funding from multiple sources to integrate and coordinate services from various sectors.
- Appropriate infrastructure such as facilities to house multidisciplinary teams and IM/IT systems provision and support.
- A whole of government approach to investment in primary health care.

These principles highlight the importance of general practice, as well as allowing for access to or more formal partnerships with other health and community services as appropriate.

What is the Queensland Divisions Network's vision for Queensland's primary health care system?

The Queensland Divisions Network supports primary health care as the focus for health care delivery with general practice based multidisciplinary teams as the key component of such care. Evidence⁵ shows that team based approaches are of particular value in the management and prevention of chronic disease, and can assist with some of the health workforce issues that Queensland and the rest of Australia currently face. As well as GPs, other key players in the primary health care team include Practice Nurses, Practice Managers, Allied Health Professionals, Community Pharmacies, Community Health Services, Community Nursing Services, Aboriginal Health Workers, Aboriginal Community Controlled Health Services, Home and Community Care (HACC) and other related services.

The role of Divisions in primary health care – the vision

The Queensland Divisions Network supports the following vision statements for primary health care service delivery in Queensland. The arrangements for primary health care service delivery in any or all of these areas need to be determined locally, collaboratively, and in partnership between Divisions, GPs and other primary health care providers, both government and non-government. Within a well planned and integrated Queensland primary health care system, Divisions could have the following roles:

Improving access to primary health care services:

- Enhancing general practice's role as a principal point of contact with the primary health care system.
- Collaborating with relevant stakeholders to enhance individual and community access to relevant and essential primary health care services and their necessary clinical and service delivery linkages.
- Supporting initiatives that further improve Aboriginal and Torres Strait Islander health. Initiatives will need to be informed by evidence that shows how they will lead to demonstrable improvements.

⁴ Such as and including type II diabetes, coronary heart disease, stroke, chronic obstructive pulmonary disease, asthma, renal disease and associated depression, including national priority areas.

⁵ Wagner E, Austin B and Von Korff M. 1996 Organising Care for Patients with Chronic Illness. *The Millbank Quarterly* (74) 511-534
Sibbald B, Laurant M, Scott T. 2002 Changing Task Profiles in Saltman A, Rico A, and Boerma W(Eds) *Primary Care in the Drivers Seat? Organisational Reform in European Primary Care*
Watts I, Foley E, Hutchinson E, Pascoe T, Whitecross L, Snowden T, 2004. *General Practice Nursing in Australia*. RACGP/RCNA

Partnering with other primary health care providers in service planning and development:

- Partnering with local primary health care patients/consumers and other stakeholders in community development activities to determine local priority primary health care needs.
- Developing financing, service delivery, and governance models to meet priority target groups' primary health care needs.

Providing services directly:

- Enhancing Divisions' role as an alternative direct service provider, including managing Commonwealth and/or State Government service delivery contracts for defined populations or target groups.
- Developing flexible approaches that can be adapted to the varying needs and capacities of individuals, communities and localities that exist within Queensland.

Preferred provider of regional primary health care fundholding:

- Further developing Divisions' role as a regional primary health care fund holder including pooling state and federal dollars to develop and deliver services responsive to community needs.
- Fundholding by Divisions already occurs in Australia through Programs such as More Allied Health Services (MAHS), Better Outcomes in Mental Health Care and the Aged Care GP Panels Initiative.

Coordinating services:

- Facilitating primary health care service coordination and service integration across both primary health care (integration) and primary and secondary sectors (continuity), including through the utilisation of service coordinators.

Promoting and advocating change:

- Collaborating with other stakeholders in the development of a comprehensive approach to primary health care reform in Queensland (i.e., linking individual projects, programs or initiatives closely with existing, proposed, and related initiatives, at the Commonwealth and State levels).
- Driving local primary health care agendas, including community development and community engagement to determine community priority areas.
- Managing new initiatives/new models (as lead agency, as partner, as a member of a consortium – the models will be flexible and driven by local arrangements.)

Facilitating population health initiatives:


- Advocating for and managing population health initiatives that promote the health and wellbeing of the community.
- Development of systematic approaches to primary and secondary prevention through the establishment of practice based systems including recall-reminder systems, disease registers, evidence based decision support systems, establishment of clear referral pathways, practice audits and models of continuous quality improvement

Managing information and data:

- Developing communication support for team based approaches to preventive and chronic disease care such as reliable IM/IT systems and robust, formal referral pathways.
- IM/IT systems that support the use of appropriate information to plan, delivery and evaluate services at a population level.
- The Queensland Divisions Network welcomes opportunities to work with stakeholders to meet Queenslanders' ongoing primary health care needs. The Network seeks to realise this vision and build on the experience of current and diverse service delivery models across Queensland Divisions.

Conclusion:

This position statement outlines the Queensland Divisions Network's vision for the role of Divisions of General Practice in primary health care in Queensland. It focuses on the current and possible future systemic roles of Divisions in developing and implementing primary health care services in Queensland. The position statement needs to be discussed in a variety of forums, within and outside the Divisions Network. The position statement will assist the Queensland Divisions Network in these continuing discussions with key stakeholders about the way forward for primary health care services in this state.

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