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## **General practice needs to lead the charge for health care reform**

Health dollars should follow patients, not doctors, and care should be provided by teams of health care workers, led by GPs, says the bold vision for primary health care's future put forward today by the Australian General Practice Network (AGPN) chair, Dr Emil Djakic.

Launching the AGPN's Primary Health Care Position Statement Dr Djakic said patient needs should be the centre of any health reform in Australia, and primary health care should be leading the push for change.

The statement, which represents six months of consultation and debate within the Network, calls for significant change in payment models, care models and primary health care organisation to set Australia up to manage future health care needs.

"If primary health care is to lead the way in health care delivery in the future – and key indicators, both here and internationally, say it has to be – then how will health care organisations prepare to be part of that? We need to think now about where we want to be in five or 20 years' time," he said.

Primary health care is the place to start this change, he said.

"General practice knows its patients and community best," says Dr Djakic. "We build relationships over years, often over generations, and are deeply integrated into our communities. This important area of the health system needs to prepare for the challenges suggested by the Government's reform agenda."

AGPN, which represents eight State Based Organisations and 111 divisions of general practice across Australia, with those divisions having a membership of about 90 per cent of the country's GPs, says the Network has a role to play in health reform, in both supporting general practice and working to improve the health of Australians.

"While people may disagree with some of the views we have taken, few in the health system would say what exists is consistently providing the right care at the right time by the right health care provider throughout Australia – just ask the Indigenous population or rural Australia," Dr Djakic said. "I think the model we have put forward will move us closer to that ideal."

The Statement calls for an expanded blended payment system for GPs, with fee-for-service the core model of GP payment for episodic care. The existing blended payment system would be augmented by pooled funds so GPs can manage chronically ill patients on a long-term basis, rather than episodic care.

"Our current payment system rewards inputs over health outcomes, it works well for sections of the population, but fails those who need it most – the chronically ill, the Indigenous population and rural communities," Dr Djakic said.

The Position Statement flags a role for regional primary health care organisations, which was mooted by the independent National Health and Hospitals Reform Commission, as a future role for divisions willing to take up the challenge.

Network division members may develop into a primary health care organisation or participate in one, depending on their capacity.

“Many of these initiatives have been put forward by the Commission in its interim report. I’m pleased to see that our vision lines up on core issues for the sector and we will continue to lobby for the uptake of these important initiatives,” Dr Djakic said.

**For media interviews please phone AGPN Communications Manager Frith Rayner on 0402 267 190**

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