



# The National Health and Hospitals Reform Commission

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# The National Health and Hospitals Reform Commission: **Outline of presentation**

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- who we are
- what we need to do
- our principles to guide health reform
- our consultation and engagement process
- our first report



## The National Health and Hospitals Reform Commission: **Origins**

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Joint Media Release: 25 February 2008

The Prime Minister of Australia:

**The Hon Kevin Rudd MP**

The Minister for Health and Ageing:

**The Hon Nicola Roxon MP**



## The National Health and Hospitals Reform Commission: The Commissioners

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- **Dr Christine Bennett**, Chair of the Commission  
Group Executive, Health and Financial Solutions and Chief Medical Officer at MBF Australia Ltd.
- **Professor Justin Beilby**, Executive Dean, Faculty of Health Sciences, University of Adelaide
- **Dr Stephen Duckett**, Executive Director, Reform and Development Division, Queensland Health
- **The Hon Dr Geoff Gallop**, Professor, Director, Graduate School of Government, University of Sydney
- **Dr Mukesh Haikerwal**, general medical practitioner, Chair of the World Medical Association Finance and Planning Committee

## The National Health and Hospitals Reform Commission: The Commissioners (cont.)

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- **Ms Sabina Knight**, Remote Area Nurse, Senior Lecturer in Remote Health Practice and Management, Centre for Remote Health, Alice Springs
- **The Hon Rob Knowles AO**, Chair of the Mental Health Council of Australia and Food Standards Australia New Zealand
- **Ms Mary Ann O'Loughlin**, Director, the Allen Consulting Group
- **Professor Ron Penny AO**, Emeritus Professor of Medicine, University of NSW and Senior Clinical Advisor, NSW Health
- **Dr Sharon Willcox**, Director, Health Policy Solutions



## The National Health and Hospitals Reform Commission: **The challenge**

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*“Australia’s health system is in need of reform to meet a range of long-term challenges, including access to services, the growing burden of chronic disease, population ageing, costs and inefficiencies generated by blame and cost shifting, and the escalating costs of new health technologies.”*

(opening statement, terms of reference)



## The National Health and Hospitals Reform Commission: **The task**

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To develop a long-term health reform plan for a modern Australia, including:

- advising on a framework for the next AHCA's by April (completed)
- producing the final report by mid 2009



## The National Health and Hospitals Reform Commission: **Principles to shape the health system**

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What do we want from our health care system?

We have expectations about:

1. what we as citizens and potential patients want (*service design principles*), and
2. how the health system should work (*governance principles*).



## The National Health and Hospitals Reform Commission: **Service design principles**

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- People and family centred
- Equity
- Shared responsibility
- Strengthening prevention and wellness
- Comprehensive
- Value for money
- Providing for future generations
- Recognising that broader environmental influences shape our health



## The National Health and Hospitals Reform Commission: **Governance principles**

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- Taking the long term view
- Safety and quality
- Transparency and accountability
- Public voice
- A respectful, ethical system
- Responsible spending on health
- A culture of reflective improvement and innovation



## The National Health and Hospitals Reform Commission: Principles (cont.)

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- The principles should shape the whole health system, public and private, hospital and community based services
- The principles are explained in greater detail at: [www.nhhrc.org.au](http://www.nhhrc.org.au)
- The Commission is seeking comments on the principles as part of the submission process
  - Submissions close 30 May



## The National Health and Hospitals Reform Commission: **Consultation**

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*“We need to hear from the people who use the health system and the people who work in it.*

*There are great ideas out there and we would like to know about them.”*

(Dr Christine Bennett, Chair)

## The National Health and Hospitals Reform Commission: **Consultation (cont.)**

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We have planned a wide engagement process, with a phased approach

- the first phase: Call for submissions (till 30 May)
  - Comment invited on:
    - Terms of reference and
    - Principles to shape the health system,
  - see [www.nhhrc.org.au](http://www.nhhrc.org.au)

## The National Health and Hospitals Reform Commission: **Consultation (cont.)**

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- Second phase: May – July (listening)
  - Forums in every capital city & some regional centres
  - By invitation
  - Consumers; people working at the frontline of the health system; health sector organisations; government representatives
- Third phase: August – September (testing ideas)

Our consultations and reform ideas will be informed by extensive research and analysis

# The National Health and Hospitals Reform Commission: **First report**

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“Beyond the Blame Game: Accountability and performance benchmarks for the next Australian Health Care Agreements” (30 April):

- 44 benchmarks that relate to 12 priority areas
  - Health system as a whole, not just hospitals
  - Public and private services
  - Commonwealth performance as well as state/territory performance



## The National Health and Hospitals Reform Commission: **First report – clearer accountability**

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- the need for a clearer division of responsibilities between the Commonwealth and states/territories
  - The report is not suggesting that financial support for health services should only come from one level of government
  - But, we need to move beyond shared responsibilities so that the contributions of each level of government are clearly specified (for example, as a share of funding or the volume of services purchased)



## The National Health and Hospitals Reform Commission: **First report – clearer accountability (cont.)**

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### Improving accountability:

- State governments being accountable for public hospital services, mental health, public health and maternal and child health services
- The Commonwealth being accountable for all primary health care services and prevention and aged care
- The Commission is not proposing an immediate transfer of functions



## The National Health and Hospitals Reform Commission: **First report – clearer accountability (cont.)**

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Benchmarks that would encourage real improvement:

- For example, increased requirements for timely access to elective surgery – with time taken to be measured from the time a GP refers a person to a specialist, rather than from when the specialist places them on a waiting list

We will have more to say about accountabilities and performance frameworks further down the track



## The National Health and Hospitals Reform Commission: **First report – 12 priority areas**

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- closing the gap in Indigenous health status
- investing in prevention
- ensuring a healthy start
- redesigning care for those with chronic and complex conditions
- recognising the health needs of the whole person
- ensuring timely hospital access



## The National Health and Hospitals Reform Commission: **First report – 12 priority areas (cont.)**

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- caring for and respecting the needs of people at the end of life
- promoting improved safety and quality of health care
- improving distribution and equitable access to services
- ensuring access on the basis of need, not ability to pay
- improving and connecting information to support high quality of care
- ensuring enough well educated health professionals and promoting research.



## The National Health and Hospitals Reform Commission: **Workforce**

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What people are telling us:

- Workforce issues are central to health reform
- The health workforce needs to be valued
- Major shortages are looming
- Distributional issues
- Focus more on education and training – need to consider redesign

## The National Health and Hospitals Reform Commission: **Workforce (cont.)**

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- The Commission understands the importance of the workforce
- The Commission's 30 April report includes workforce as one of the twelve key challenges facing the health system
  - it includes performance benchmarks to ensure enough well-trained health professionals and to promote research



## The National Health and Hospitals Reform Commission: Timeline

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- 30 April: first report (as per ToRs)
- June – July: listening phase
- August – Sept: targeted testing of initial ideas
- End of year: interim report
- June 09: final report



## The National Health and Hospitals Reform Commission: **Contacts and information**

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for copies of the report: [www.nhhrc.org.au](http://www.nhhrc.org.au)

or call (02) 6289 8108

submissions to: [talkhealth@nhhrc.org.au](mailto:talkhealth@nhhrc.org.au)

or PO Box 685, Woden, ACT, 2606



# The National Health and Hospitals Reform Commission: **Questions**

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Any questions?



## The National Health and Hospitals Reform Commission: **Contacting the Commission**

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- The secretariat is based in Canberra
- Email: [talkhealth@nhhrc.org.au](mailto:talkhealth@nhhrc.org.au)
- Free call: 1800 017 533
- Mail: PO Box 685, Woden, ACT, 2606