

## **Australian Association for Academic Primary Care (AAAPC) submission to the Government review of Medicare Locals December 2013**

The Australian Association for Academic Primary Care (AAAPC) wishes to make the following submission to the review of Medicare Locals. AAAPC is a representative body for people undertaking teaching and research in general practice and primary health care.

Firstly we fully support the existence of Medicare Locals (MLs) and believe they are essential to the effectiveness and support of primary health care in Australia. They provide a focus for the planning, regionalization, coordination and integration of primary health care services and are an important method of liaison and support of primary health care practitioners working in the community. AAAPC sees the broader role of Medicare Locals and engagement of nursing and allied health professionals as well as GPs as a strength of these primary health care organisations. In Australia's complex health care system Medicare locals are increasingly playing a key role in linkage and integration of services.

We do however wish to raise several issues, which we believe would strengthen the work undertaken by MLs.

In the transition to Medicare Locals, Division of General Practice were encouraged to engage with universities to support the work of the new primary health care organisations. We are concerned that this has not occurred in a systematic way and that collaboration between MLs and universities has been patchy. One factor that has contributed to this is the way in which funding has been delivered for projects, with short lead in times, specific criteria that have not promoted engagement and a minimal support to facilitate ongoing strategic partnerships between tertiary institutions and the primary care sector

Universities can assist Medicare Locals in:

- Project planning
- Research and evaluation
- Generating and reviewing the evidence to support best practice
- Characterization of best practice models
- Training and professional development of Medicare Local staff

Many academic GPs currently sit on the boards of MLs but this could be expanded to include primary health care academics from other professional backgrounds. There are some good examples of close collaboration between universities and Medicare Locals including the establishment of joint initiatives such as:

- SAPCRU - The Southern Academic Primary Care Research Unit (SAPCRU) is a organisational partnership between Monash University, Monash Health and the South Eastern Melbourne Medicare Local (SEMML). <http://sapcru.org/>
- MAGNET - The **M**elbourne East **M**on**A**sh **G**e**N**eral **P**ractic**E** **D**a**T**abase (MAGNET) research platform is a dataset capable of generating evidence to inform primary health care policy and practice and improve health outcomes for patients in Australia. It is collaboration between Monash University and Inner East Melbourne Medicare Local (IEMML). <http://med.monash.edu.au/general-practice/magnet/>
- The University of Newcastle has been invited to assist the Central Coast NSW Medicare Local with the evaluation of their Partners in Recovery Program
- James Cook University , La Trobe University, Townsville Mackay Medicare Local and Loddon Mallee Murray Medicare local are partners on a current NHMRC Partnership grant studying participatory oral health planning in rural communities.
- The University of New South Wales is working with Medicare Locals in NSW, Queensland Victoria and South Australia on implementation of evidence-based preventive care in general practice funded by an NHMRC partnership grant.

A critical issue to advance general practice and primary health care is generation and access to relevant data, and the analysis and utilization of it to support primary health care practice and policy. Currently Medicare Local population health data and needs assessments are being drawn mainly from secondary sources and not from general practice itself. We believe further emphasis and support should be provided to Medicare Locals to drive data collection and utilization. Universities may be able to assist in this through their Practice Based Research Networks (PBRN) programs which include data linkage systems such as the one being developed by the ePBRN at the University of New South Wales.

Workforce planning is central to achieving many of the roles of Medicare Locals. The core business of universities is to train medical, nursing and allied health professionals. As such it is important that MLs and universities (and regional training providers of GP Registrars together with organisations funded by Health Workforce Australia) work more collaboratively together to develop innovative and sustainable solutions to achieving high quality clinical placements and providing training opportunities at a regional level.

One of the core functions of Divisions of General Practice was to support the implementation of quality care in general practice and promote evidence-based practice. It is critical that MLs continue that role by supporting and providing continuing professional development for GPs and other health professionals working in primary health care. MLs should be available as a conduit for the dissemination of evidence based education and resources produced by peak bodies and Non Government Organisations e.g. Cancer Australia, National Heart Foundation, Diabetes Australia. If their focus is solely on chronic disease or high prevalence diseases as assessed by population health needs assessments then there will be a diminution of the richness and diversity of educational opportunities for primary health care practitioners and this may adversely affect the quality of care provided.

In conclusion, the AAAPC remains highly supportive of Medicare Locals and seeks avenues to engage with them further particularly in terms of research and evaluation, workforce training, data analysis and knowledge translation and exchange. We believe that the importance of engagement with universities and the subsequent benefits this engagement can

bring should be highlighted in future strategic planning and in the core objectives of Medicare Locals.

We would welcome an opportunity to discuss our views further in person.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'Nicholas Zwar', with a long horizontal line extending to the right.

Nicholas Zwar  
President  
Australian Association for Academic Primary Care

20<sup>th</sup> December 2013