

13 August 2014

The Honourable Louise Markus  
Federal Member for Macquarie  
PO Box 855  
WINDSOR, NEW SOUTH WALES 2756

Dear Louise Markus

**Nepean Blue Mountains Medicare Local**

In 2009 the Blue Mountains Division of General Practice decided to form a Consumer Reference Group (CRG) to advise on what consumers with chronic conditions required from their General Practitioner. The membership of the group was formed by asking several chronic disease support groups to supply a representative, to attend on behalf of their consumer networks. You would be aware that the BM CRG has been active in improving health programs for chronically ill consumers. One example of their actions was the implementation of the *Moving On* program in 2010 & 2011. This is a specially designed self-management program for people with a chronic condition. The group obtained federal funding, and made up the management committee for this program. It was evaluated in 2010 by Sydney University, and the results were assessed as excellent, which provides an example where consumers have played an important and productive role in the delivery of a health program to the community.

We the members of the Blue Mountains GP Network Consumer Reference Group are writing this letter to express our Consumer Advocates' concerns regarding the future of our region's Nepean Blue Mountains Medicare Local, namely:

- The Federal Government's proposal to seemingly replace our existing primary Health Care organisation with a new one, and
- The Federal Government's cut in funding to support Patient consumer engagement and participation, inhibiting the local community from giving feedback regarding the delivery of Patients' health care services, in the Nepean Blue Mountains area, encompassing your electorate, and Lithgow.
- The current decisions affecting Medicare Locals will only achieve a freeze or hold up in services, and delay the in provision of important health programmes for at least a year, if not longer – this is a retrograde step indeed.

**The Federal Government's Proposal**

We have read Professor Horvath's "Review of Medicare Locals" with some alarm. Although we have no major concerns with the recommendations to include more representation for clinicians, we believe the proposed major reduction in the number of Primary Health Care Organisations is a backward step. In the past two and a half years the local community, through our local health consumer movement has helped to establish a good working relationship between the existing Medicare Locals and the NSW Local Health District (LHD). This has been achieved with the full co-operation of both Medicare Local and the NBM LHD. We believe there should be continued cooperation and functional improvements (where needed) of the existing established Medicare Locals, to allow the integration of health services to continue. "Reinventing the wheel" is not considered to be a viable option for our community, which would prefer to build upon, and improve what we have already painstakingly established in order to retain the standards of healthcare necessary.

We were also concerned that health consumers were not given greater emphasis in Professor Horvath's report. There is mention of a Community Advisory group, but no indication of how

consumers could be engaged in a range of communication roles that they can undertake to assist the health system, and to improve the quality the services it delivers. Horvath's view of health consumers is directly opposed to that of the NSW Ministry of Health, who are advocating strongly for increased consumer engagement and participation at all levels of the health service in this State. Indeed, they see the Patient Experience as integral to the efficiency and effectiveness of the health system. We as consumers agree with that strategy, and require the Australian Government's Department of Health to work collaboratively with the NSW Ministry of Health to achieve the best health outcomes for us all.

Our Medicare Local had as its genesis the superseded but effective Nepean, Blue Mountains and Hawkesbury Divisions of General Practice. These local organisations worked very closely together with each other and their constituent GP's. This work remains with our present Nepean Blue Mountains Medicare Local. Indeed the Chairman of our Board of Directors is an experienced and very capable GP who places great importance on meeting the needs of Patients, and there are many other professional clinicians on the Medicare Local Board. We believe the organisation should be renamed as the Nepean Blue Mountains Primary Health Care Organisation (in line with Professor Horvath's Report).

Our Medicare Local very much meets the respective needs of the Patients domiciled in the Nepean, Blue Mountains, Hawkesbury and Lithgow LGA's, in partnership with the Major Nepean Teaching hospital and its associated hospitals in the Blue Mountains, the Hawkesbury and Lithgow Hospitals – in fact the Lithgow Hospital has recently been upgraded. Under these arrangements, many outreach services, such as Diabetes Care have been established to ensure that chronically ill Patients living a considerable distance from Nepean Hospital do not need to travel to obtain the care they need, and are now able to access their care at selected venues much closer to home. We therefore see no need whatsoever for the LGA's currently serviced by our Medicare Local, and the Local Health District boundaries to be changed, or indeed expanded. If a Medicare Local or Primary Health Organisation is expected to service too large an area, we believe that Patient care will become fragmented, at the expense of gaining greater economies of scale, and ultimately delivering inferior health services.

Another very good reason for our Medicare Local to retain its established basic structure and culture is that it is very well and professionally managed. It already meets most of the recommendations made in Dr Horvath's Report. The current strategy is to improve existing services and any other of the recommendations can be met by expanding the existing Organisation appropriately. Medicare Locals in other areas that are not up to standard, simply need to be modified, upgraded and managed in such a way as to ensure that they meet their intended objectives in the near future. "If it is not broken, don't fix it".

Several of our members have been a Consumer Advocates since 2003, first with local support groups, then with the Blue Mountains GP Network, later with our Medicare Local and the Local Health District. Health consumers meet regularly with Medicare Local and LHD managers, and quickly realised the wonderful and comprehensive work done by these Organisations – and we have been very pleasantly surprised by, and have great respect for the dedicated, knowledgeable and conscientious staff employed by these organisations currently, and over the years.

Thus and so, we implore you, the Prime Minister, the NSW Premier and other responsible Commonwealth and State Ministers to ensure that our Medicare Local remains as it is, to be upgraded where necessary, to ensure it is able to fully meet its intended objectives to work in partnership to improve the health of our community.

### **Consumer Feedback**

One of the strengths of our Medicare Local is the mechanisms that have been established to ensure that it obtains meaningful and constructive feedback from consumers and patients that the Medical Local along with Primary Healthcare providers, and the associated Hospital services can act on in an effective and appropriate manner, to ensure appropriate health care is delivered to all Patients and has indeed made improvements. Over the years, in conjunction the GP's with whom we work, we have held a number of well attended, successful and effective Consumer Forums in the four local communities' within the established boundaries. It must be emphasised that consumer feedback mechanisms continue to remain a vital and essential communicative role as part of our Medicare Local and associated Hospitals. Otherwise we shall not know what health care our Patients really need, nor whether we are meeting their requirements and expectations.

We are therefore horrified to learn that the Federal Government is no longer prepared to fund essential consumer feedback from the Patients whom we service, by drastically reducing Federal funds previously provided for this paramount purpose. Likewise we implore you, as our local member, the Prime Minister, NSW Premier and responsible Ministers to ensure that our consumer feedback funding is restored – if not fully, in these difficult fiscal times, then substantially.

Would all of you please implement our requests set out above?

Louise Markus, a small group of our members would like to make a time with you to discuss these matters further. We will be in touch with your office to organise a time.

Thank you in anticipation.

Yours sincerely and kind regards,

John Haydon, Chairperson, and  
Cliff Newman - Health Consumer Advocate  
Blue Mountains GP Network Chronic Disease SelfManagement Consumer Reference Group

CC. Hon. Tony Abbott - Prime Minister  
Hon Peter Dutton - Federal Ministers for Health and Sport  
Hon Roza Sage - NSW Member for Blue Mountains  
Senator Doug Cameron  
Hon Jillian Skinner – NSW Minister for Health  
Ms Sheila Holcombe – CEO of Nepean Blue Mountains Medicare Local. Contact persons:  
John Haydon –

Cliff. Newman -

Member Representatives are from: Diabetes – Gabrielle Byrne and Cliff Newman;  
Arthritis - Diana Aspinall; Chronic Obstructive Airways Disease – Dianne Grove and  
John Haydon; Cancer Help – Elaine Holman; Dystonia – Kerrie Jackson; and,  
Haematology and Parkinson's support group representatives, and other services.