

Sustainable, resilient, future-focused: The path to equitable care and healthier communities

Pre-Budget Submission to the Australian Treasury:
A summary of recommendations

The Royal Australasian College of Physicians (RACP) welcomes The Hon. Dr Jim Chalmers' commitment to a 'wellbeing budget' to be delivered on behalf of the Australian Government on 25 October 2022.

As physicians and paediatricians, our members know first-hand that wellbeing and health are interconnected and that gains in both translate to a more resilient, equitable and productive society. We note that the Government has already made valuable and welcome commitments in several key areas.

With this in mind, we have focused these recommendations on constructive and achievable short- and medium-term measures which will enhance and amplify the Government's commitments to the health and wellbeing of everyone in Australia.

WE CALL ON THE AUSTRALIAN GOVERNMENT TO SUPPORT THE FOLLOWING RECOMMENDATIONS.



System reform
to strengthen the
health system



Prevention to
reduce preventable
chronic disease
and ill health



Equity to give all
Australians the
opportunity for
good health and
wellbeing across
their lifespan



Climate resilience
to equip our
healthcare system
so it is climate
ready and climate
friendly



SYSTEM REFORM TO STRENGTHEN THE HEALTH SYSTEM

To strengthen Medicare and provide relief to the hospital system:

- Work with the RACP and our members to ensure that Urgent Care clinics are able to provide team-based multidisciplinary care that seamlessly integrates specialist medical care with general practice and allied health care, particularly for chronic and complex conditions which require specialist care.
- Fund care pathway for specialists to be included in the Voluntary Patient Registration scheme to support team-based multidisciplinary care.
- Fund independent studies exploring the number and location of clinics needed in each state and territory to have a marked impact on hospital admissions. While the initial commitment of at least fifty clinics is welcomed, the rationale for this number in the context of widely escalating national healthcare need is uncertain.
- Involve the RACP and its members in planning clinical assessment, treatment protocols and triage processes within the clinics. Physicians and paediatricians are specially trained to care and treat patients with complex illnesses or presentations in collaboration with General Practitioners and allied health professionals.
- Ensure Medicare supports equity of access to care for low income and vulnerable families, particularly in rural and regional areas.

To ensure effective and accessible delivery of telehealth:

- Fund the reinstatement of all telephone-based specialist consultations, including those for complex consultations.
- Reduce the negative impacts of the digital divide by funding videoconferencing technology packages to support capacity building for patients, especially those in priority and underserved groups.

To mitigate the impacts of COVID-19 on the health system and healthcare workers:

- Be led by medical advice and use public health measures when needed. The RACP supports improving building ventilation, the use of masks in public settings, COVID-19 vaccination, equitable access to RATs, PCR testing and antiviral treatments, and general measures such as staying home when unwell, physical distancing, hand hygiene and cough/sneeze etiquette.
- Expand public health messaging. All Australians must be provided up-to-date information that is accessible, easily understood and consistent.
- Increase support for Australians with post-COVID conditions including long COVID. We need to ensure specialist physicians are supported to identify and manage the treatment of these conditions in order to ensure equitable patient access to specialists and health services across the country.

To manage patients with comorbid chronic health conditions better:

- Develop and fund a model of care with proof of concept sites for the management of patients with comorbid chronic health conditions and associated disabilities that integrates specialist physician care (the [RACP Model of Chronic Care Management](#)¹ or variation).

To address health workforce pressures and burnout:

- Increase the number of Specialist Training Program (STP) places to grow access to specialist medicine in rural and regional communities and build a pipeline of specialists.
- Include the RACP in consultations about increasing the intake of skilled migrants in health.
- Invest in bolstering the healthcare workforce through national strategies for flexible training and work hours, parental leave and other support mechanisms.

1 https://www.racp.edu.au/docs/default-source/advocacy-library/c-final-mccm-document.pdf?sfvrsn=f873e21a_14



PREVENTION TO REDUCE PREVENTABLE CHRONIC DISEASE AND ILL HEALTH

To establish an effective Australian Centre for Disease Control and Prevention:

- Allocate funding specifically for the design and establishment of the Centre for Disease Control and Prevention.
- Consult with the RACP and other key health stakeholders on its design and establishment.
- Produce and commit to fund a plan to address Australia's public health capacity including establishing a national training program in public health medicine and providing adequate funding for training positions.

To effectively implement the National Preventive Health Strategy:

- Fully fund the effective implementation of the National Preventive Health Strategy which commits 5% of health expenditure for prevention over 10 years till 2030.
- Ensure that the implementation of the Strategy is aligned with the objectives and workplan of the forthcoming Australian CDC&P.
- Specify how prevention will be funded over forward estimates and note that COVID-related expenditure should be excluded from the funding for the Preventive Health Strategy to ensure that adequate funding is available to deliver preventive health for non-communicable diseases.
- Appropriately fund the implementation of the National Obesity Strategy 2022–2032 and Australian National Diabetes Strategy 2021–2030.



EQUITY TO GIVE ALL AUSTRALIANS THE OPPORTUNITY FOR GOOD HEALTH AND WELLBEING ACROSS THEIR LIFESPAN

To effectively boost training and employment of First Nations health workers:

- Fund the establishment of a national workforce development strategy led by NACCHO in collaboration with the Australian Indigenous Doctors' Association, Indigenous Allied Health Australia, the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives and the National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners, supported by the RACP and other stakeholders.
- Support the prioritisation, expansion and provision of sustained and long-term funding to Aboriginal Community Controlled Health Services (ACCHS) for the delivery of primary and specialist healthcare services for Aboriginal and Torres Strait Islander people.



EQUITY TO GIVE ALL AUSTRALIANS THE OPPORTUNITY FOR GOOD HEALTH AND WELLBEING ACROSS THEIR LIFESPAN

To improve child health and wellbeing, implement the recommendations of the RACP Kids COVID Catch Up campaign by:

- Establishing a National COVID-19 taskforce to lead a recovery plan for and with children and young people.
- Appointing and funding a National Chief Paediatrician to coordinate child health and wellbeing policy across portfolios and jurisdictions.
- Funding and implementing the National Children's Mental Health and Wellbeing Strategy to expand mental health support for children, young people and their families and carers. This will include increasing support for integrated mental health services that enable collaboration between paediatricians, child and adolescent psychiatrists and multidisciplinary specialists to deliver the right care at the right time for children and adolescents.
- Increasing funding for students with additional needs to better support children with disability and/or learning difficulties.
- Expanding its commitment to universal childhood education to all three- year-old children.
- Restricting marketing of unhealthy diets to children.

To better support older Australians' wellbeing and independence:

- Urgently fund and implement Recommendations 58 and 51 of the Royal Commission into Aged Care Quality and Safety: *Access to specialists and other health practitioners through Multidisciplinary Outreach Services and Support employment and training for Aboriginal and Torres Strait Islander aged care workers.*
- Increase the availability of Home Care Packages to eliminate delays in access which frequently lead to progressive impairment and loss of independence.

- Allocate funding to sufficient resourcing and monitoring of the National Palliative Care Strategy. There is a need for palliative care and end-of-life services for older people with life limiting illness and this was an important recommendation of the Aged Care Royal Commission.

To better support the autonomy of people living with disability:

- Ensure the NDIS remains appropriately funded and that full transparency is provided over future sustainability issues.
- Improve linkages and communication between the health and disability sectors.
- Develop a comprehensive cultural competence framework for the National Disability Insurance Agency (NDIA) to help improve the experience of the NDIS for people from culturally and linguistically diverse communities including Aboriginal and Torres Strait Islander people.
- Fund the effective implementation of the National Roadmap for Improving the Health of People with Intellectual Disability.²

To better support people with substance use disorders:

- Invest adequately in evidence-based interventions for the prevention and treatment of harms arising from the use of alcohol and other drugs, including services delivered by multidisciplinary teams as critical parts of the general and mental healthcare systems, as well as better treatment options.
- Increase investment for the addiction medicine and addiction psychiatry workforce and better support for General Practitioners who work in this area.
- Commit funding for increased access and affordability of opioid pharmacotherapies for people with opioid dependency.

2 <https://www.health.gov.au/sites/default/files/documents/2021/08/national-roadmap-for-improving-the-health-of-people-with-intellectual-disability.pdf>

Sustainable, resilient, future-focused: The path to equitable care and healthier communities



CLIMATE RESILIENCE TO EQUIP OUR HEALTHCARE SYSTEM SO IT IS CLIMATE READY AND CLIMATE FRIENDLY

To deliver an effective evidence-based National Climate Change, Health and Wellbeing Strategy by incorporating:

- A plan for equitably decarbonising healthcare to achieve net zero emissions in healthcare by 2040.
- The development of climate risk and vulnerability assessments and locally-led disaster planning for the healthcare system, acknowledging that rural and remote communities are at particular risk.
- Adaptation and resilience plans which acknowledge, support and are guided by Aboriginal and Torres Strait Islander leadership.
- Provision of tools, information and resources to health and medical professionals to support them to anticipate, prepare for and respond to climate risks.
- Establishment of a surge health and medical workforce for deployment in response to extreme weather events.

To support the delivery and implementation of the Strategy:

- As a first step, allocate approximately \$3.7 million in 2023 to establish the National Health Sustainability Unit (NHSU) to oversee the implementation of the Strategy. This initial costing for the establishment of the NHSU includes staffing, consultation and research, with additional operational support provided in kind. The NHSU would report to the Chief Medical Officer within the Department of Health and administer:
 - A Climate Friendly Health System Innovation Fund to provide grants to local health services for emissions reduction and sustainability initiatives.
 - National Climate Change and Health Resilience Research Fund to identify resilience strategies suited to our health system.

[Read the RACP submission here.](#)

The RACP represents 28,000 experts across a broad range of medical specialties, including general medicine, paediatrics and child health, cardiology, respiratory medicine, neurology, oncology, public health medicine, infectious diseases medicine, occupational and environmental medicine, palliative medicine, sexual health medicine, rehabilitation medicine, geriatric medicine, and addiction medicine.

The RACP and its members are available to work with the Government to provide the evidence, expertise and support for the implementation of above recommendations.



28,000

experts across a
broad range of
medical specialties