

Committee of Presidents of Medical Colleges

MEDIA RELEASE

Federal Election 2016 A Call to All Parties to Care for Australia's Health

The Committee of Presidents of Medical Colleges (CPMC) is the unifying organisation that supports Australia's Medical Colleges which oversee and maintain professional standards for doctors training in their individual areas of specialty.

CPMC supports universal health care and equity in access for all Australians regardless of geographical isolation, including initiatives which are aimed at ensuring quality and safety in the organisation and delivery of health services.

Working in all areas and in every part of the country from the city to the bush Australia's medical specialists have extensive knowledge of the health and aged care system. They navigate it every day to manage patient care. They see the challenges being faced by Australians and the need for system reform.

CPMC's vision for Australia's health is one which is integrated, adequately funded and seamless for patients to transition throughout their care pathways.

The 2016 Federal Election is an opportunity for all political parties to commit to system reform as part of a coordinated approach to ensure equity in access across the primary, acute, aged and disability sectors.

CPMC is calling on all parties to commit to caring for Australia's health by:

- Focussing on system reform not piecemeal reforms.
- Lifting the freeze on Medicare rebates.
- Properly funding Primary Health Networks in the longer term.
- Enabling access and equity for people with mental illness across the care systems.
- Embracing technology as a life-saving tool in modern health care and reducing barriers to accessing quality pathology and radiology services.
- Continuing to fund the Specialist Training Program and opening up new areas for trainees in non-hospital settings across Australia.
- Focussing on accessible oral and dental health care within the Medicare system.
- Addressing end of life care for all Australians.
- Enabling greater investment in clinical research.

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CPMC Key Policy Priority Areas for Federal Election 2016

Commit to Health System Reform

Specialist Medical Colleges train doctors to become specialists in a wide range of areas such as anaesthesia and pain management, dermatology, emergency, general practice, intensive care, obstetrics and gynaecology, ophthalmology, pathology, radiology, psychiatry, paediatrics, endocrinology, gastroenterology, oncology, general physicians, medical administration, rural medicine, exercise medicine and all forms of surgery.

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Working in all areas and in every part of the country from the city to the bush Australia's medical specialists have extensive knowledge of the health and ageing system. They navigate it every day to manage patient care. They see the challenges being faced by Australians and the need for system reform.

The 2016 Federal Election is an opportunity for all political parties to commit to system reform as part of a coordinated approach to ensure equity in access across the primary, acute, aged and disability sectors.

The Australian government is currently overseeing five major reforms which will each likely produce recommendations which cannot be considered in isolation but rather, as a whole package aimed at better system integration.

CPMC recommends all parties commit to maintaining a focus on system reform which builds the interface needed between primary through to specialist care and with aged care.

Primary Care

Access to timely and affordable health care is a fundamental tenet of Medicare. The freeze on rebates for Medicare-eligible consultations and procedures performed by general practitioners and specialists puts that at risk. Adequate indexation such as in the form of WCI-5 is considered the best way to keep pace with the costs associated with providing quality health care and employing skilled staff. CPMC recommends all parties commit to restoring indexation for Medicare rebates and back-dating it to 2014.

In order to ensure a viable primary health care sector all parties must also commit to long-term flexible funding for Australia's primary health care networks. These networks are designed to provide for better coordinated care and to enable a more responsive health and ageing system. CPMC recommends a consumer-focussed funding envelope as the mechanism for targeting different community needs in these networks.

Invest and Prioritise Mental Health Care

With 3.6 million Australian adults and 600,000 children and adolescents experiencing mental health issues each year, and the rate expected to rise, access to services must be a priority for government.

Mental health care is under-funded in Australia relative to other parts of the system with only 7% of government funding going to mental health to support 14% of the burden of disease.

CPMC recommends that all parties must commit to adequate funding for mental health care in Australia as a public policy priority.

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Better integration of mental health care into the broader system is urgently required with inequities in access evident for people living with mental illness compared with the general population. For example, more than 80% of deaths of people living with serious mental illness occur as a result of physical health conditions, and not their mental illness. On top of this, the evidence shows that these deaths are mostly caused by illnesses commonly treated successfully in the broader community such as heart disease, respiratory disease and some cancers. CPMC recommends that all parties to commit to enabling greater equity in access for people with mental illness.

People with mental illness are often prevented from accessing community and residential aged care services via exclusions in the *Aged Care Act, 1997*. CPMC recommends the all parties commit to ensuring all Australians have the same access to services by removing these care exclusions.

Embrace Diagnostic Technology

A modern health care system is one which recognises and embraces technology in the delivery of quality and cost-effective care. Pathology and radiology services are essential to modern health care.

Access to quality pathology is dependent upon the availability of laboratories and specialist pathologists. In recent times due to financial pressures, many laboratories have been rationalised with some in rural and remote areas closing. With the removal of bulk-billing incentives it is likely to impact on quality and patient care. Given pathology fees are not indexed for changes in CPI and have decreased progressively over the past 15 years, CPMC recommends maintaining incentives to enable access to quality pathology services.

For clinical radiology, a series of reforms are in progress to improve the quality, safety and appropriateness of diagnostic imaging. The implementation of these measures needs to be prioritised by the Australian government to ensure the delivery of a more sustainable model of diagnostic imaging.

Radiation therapy is involved in 40% of all cures, and about one in two people diagnosed with cancer would benefit from it at some point in their journey. Yet despite it being a cost-effective, high-value service, radiation therapy is very much under-utilised in Australia. CPMC recommends technologies such as radiation therapy be embraced and better utilised in the treatment of cancer.

Manage the Specialist Medical Workforce

Medical workforce policy is acknowledged as an inexact science with decisions to change numbers entering the training pipeline taking up to a decade to impact. Australia's specialist medical workforce is in balance in most specialty areas except psychiatry and CPMC recommends better management of the supply of graduates into the training pipeline to control against oversupply.

To address the geographic mal-distribution of medical practitioners in rural and remote areas of Australia CPMC supports policy levers which encourages specialist training in rural and regional centres.

CPMC recommends all parties commit to continue and expand the funding for the Specialist Training Program beyond 2017 to ensure that specialist trainees can work in non-public hospital settings. In order to meet Australia's current and future workforce requirements CPMC recommends aligning the program funding with workforce data to ensure ongoing viability and utility and to mitigate against shortages.

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More Australians Need Access to Oral and Dental Health Services

In 2013-14 Australians paid more than half of the cost of their dental care compared with 15% for all other services. Oral diseases are closely associated with major cardio-vascular disease, diabetes, and can impact on birth outcomes.

With dental care considered to be one of the most expensive types of treatment and the cost borne largely by the consumer, CPMC recommends all parties commit to better access to dental health care and extend the eligibility for public dental to people with incomes lower than \$50,000 per annum. Consideration should also be given to including dental health in Medicare with Australia's Chief Medical Officer assuming responsibility for it.

End of Life Care

End of life care is health care for people with a terminal illness or terminal disease condition that has become advanced, is typically progressive and incurable. The uptake of advance care planning has been slow and CPMC recommends they be part of the electronic health record and the process to be incorporated into the accreditation system.

Invest in Medical and Clinical Research

Medical research is a central platform underpinning the development of knowledge in the field of medicine. Clinical research is where efforts are placed on determining the safety and effectiveness of medications, devices, products and treatment regimens which can be used for the practice of medicine.

CPMC acknowledges the efforts of the previous governments in enabling the Medical Research Future Fund policy to boost Australia's strength in medical research. CPMC calls on all parties to recognise the need for greater investment in medical research and in particular clinical research.