

**NATIONAL PRIMARY AND COMMUNITY HEALTH NETWORK
FORMAT FOR REPORTS FROM JURISDICTIONS 2007**

State/Territory: NEW SOUTH WALES

HIGHLIGHTS OF REFORMS AND NEW INITIATIVES

Integrating the social determinates of health into primary health care:

Reforms and New Initiatives	Description	Issues
<p>Aboriginal Maternal and Infant Health Strategy (AMIHS)</p>	<p>Aboriginal mothers, like all women, hope for their child to be born healthy, to thrive, learn, and have a good life. Obstacles such as cultural barriers to the right health and support systems have in the past been insurmountable making it more difficult for Aboriginal communities to be confident that their children would be born healthy, thrive and have a good life.</p> <p>The Aboriginal Maternal and Infant Health Strategy (AMIHS) was developed by NSW Health to improve health service delivery for Aboriginal women and babies in NSW by providing a culturally sensitive service. Through better service delivery to Aboriginal women in pregnancy and the early weeks after birth, it was anticipated that some of the social, economic and political determinants of Aboriginal health could be influenced, and that the health and wellbeing of Aboriginal mothers and their babies would improve.</p> <p>In order to improve the health of Aboriginal mothers and their babies, the report recommended a specific model of service provision which included a team approach to community maternity services (including midwifery, Aboriginal health workers, specialists and general practice), a flexible and non-judgmental approach, and sensitivity to the underlying social and economic circumstances which have such an impact on the lives of Aboriginal people. This model is the core of AMIHS.</p> <p>The model was comprehensively and independently evaluated over three years. The evaluation found that after the implementation of AMIHS in the sites where it was funded:</p>	<p>Workforce issues, social disadvantage, a lower level of cultural competence and historic underinvestment in early intervention and prevention programs pose challenges for implementing programs that seek to redress these issues.</p>

	<ul style="list-style-type: none"> • Significantly more women attended their first antenatal visit before they were 20 weeks pregnant. • More women initiated breastfeeding, and more were still breastfeeding when asked again at 6 weeks after the baby was born. • There was a significant reduction in the number of babies born preterm. • Aboriginal women were very satisfied with the services provided by the AMIHS programs. <p>In view of these results, in April 2007 the NSW Department of Community Services and NSW Health entered a partnership to link Aboriginal children and families more effectively with existing prevention and early intervention programs. The project will strengthen the early intervention service spectrum for Aboriginal children and families in order to effect change in lifelong outcomes for this population group.</p>	
Men's Health Strategic Plan	<p>Eight years have passed since NSW Health launched its men's health policy, <i>Moving Forward in Men's Health</i>. At the time it was the first policy in Australia that aimed to provide leadership in improving the health outcomes of men.</p> <p>Given the continued levels of health disparities between men and women, it is considered timely to assess progress made under <i>Moving Forward in Men's Health</i>, to set new directions and to align work in men's health to higher level government policies.</p> <p>The Men's Health Strategic Plan will include the following:</p> <ul style="list-style-type: none"> • An overview of the current policy context, including a summary of key NSW Policy documents relating to Men's Health. This overview section will align the Men's Health Strategic Plan to the broader NSW State and State Health Plans. • An analysis of progress made under <i>Moving Forward in Men's Health</i>. • An articulation of the concepts of social determinants of health, and other concepts that are key to an understanding of men's health issues. • The identification of a set of key principles and priorities for men's health based on current evidence which has, where possible, been analysed according to key health determinants. Priorities will be linked to the NSW State Plan priorities and NSW State Health Plan directions. • Guidance to Area Health Services on Area Health Service Men's Health Plans and on 	<p>Men in NSW continue to suffer higher rates of mortality and morbidity than women across many significant health outcome indicators including mental health, cardiovascular disease, cancer and accident and injury. In spite of this, men tend to also have fewer hospital separations and seek medical assistance at later stages of the course of their illness. As a consequence, the</p>

	reporting/monitoring requirements.	length of stay in hospital is often longer for men, and hospital interventions tend to be more intensive.
Women's Health Strategic Implementation Plan	<p>The Women's Health Strategic Implementation Plan (WHSIP) will identify a set of key health priorities to improve the health and wellbeing of all women in NSW, to reduce health inequities experienced by women, and strengthen the health system to become more responsive to the needs of women.</p> <p>The WHSIP will build on the achievements made by NSW Health under the <i>Strategic Framework to Advance the Health of Women</i> (2000). This Framework outlined guiding principles for policy and practice, based on a social view of health, to provide the basis for advancing the health of women in NSW. The Framework also identified four strategic directions to inform women's health policy and service development.</p> <p>The WHSIP will provide:</p> <ul style="list-style-type: none"> • A brief overview of the current policy context, involving a summary of key NSW Policy documents relating to Women's Health. This overview section will place the WHSIP in a context of the NSW State Plan, NSW State Health Plan and the NSW Government's Commitment to Women. • Articulation and discussion of the concepts of health inequity and social determinants of health, gender and health and other concepts that are key to an understanding of women's health issues. • The identification of a set of key priorities for women's health over the next five years, based on current evidence, analysed according to social determinants of health. These priorities will be overtly linked to the NSW State Plan priorities and NSW State Health Plan directions. • Guidance to Area Health Services on the expected components of Area Health Service Women's Health Plans for the next five years and on reporting/monitoring systems to be developed to measure advancements of women's health outcomes. 	<p>Women have identified that there is a decreasing focus on women's health areas such as reproductive health, maternity models of care, domestic violence, sexual assault, post-traumatic stress disorder and other mental health matters. This is coupled with the identified barriers to access to health services including cost, transport, cultural and language barriers and a lack of service availability such as counselling and welfare services.</p>

Other:

Reforms and New Initiatives	Description	Issues
<p>Integrated Primary and Community Health Policy 2007-12</p>	<p>The <i>Integrated Primary and Community Health Policy 2007 - 2012</i> is a five-year plan to provide comprehensive and well-coordinated primary and community health services for the people of NSW. It aims to ensure that the activities of the primary and community health sector are integrated, both internally and with other parts of the NSW health system.</p> <p>The policy provides an overarching framework and vision for the delivery of primary and community health services in NSW. The policy's initial priorities for action focus on building strong foundations for developing comprehensive, integrated primary and community health services.</p> <p>The policy explicitly recognises that, to achieve the desired outcomes, the NSW public health sector must work in close partnership with general practice and other private health care providers, non-government agencies, consumers and carers, other government departments and the Australian Government.</p>	<p>Investment has historically been imbalanced, with under-investment in prevention, health promotion and early intervention. Fee for service funding arrangements for primary medical care have not encouraged a focus on these areas.</p> <p>Most health care – and investment – has been focused at the acute phase of disease progression, and delivered in the hospital setting. Prevention and avoiding the need for hospitalisation have been sidelined in the past.</p> <p>Workforce distribution issues and staff shortages have led to local differences in structure and service levels at the local level – and in many cases, lengthy waiting lists for services. This is frequently most sharply evident in areas of great socio-economic need.</p>
<p>HealthOne NSW</p>	<p>The NSW Government has committed \$40m over 5 years to the HealthOne Program - a new way of working in primary health and community care. HealthOne NSW services will have a focus on population health approaches, primary prevention, health promotion and early diagnosis and management of disease. It is envisaged that the composition of each service will reflect the needs of the community. In some instances this will mean that</p>	<p>Many of these partnerships have a large capital works component, and full operation is not expected for several years.</p>

the service provides access to a social worker, or other professional support outside the usual sphere of healthcare.

Many inequities and barriers to accessing adequate health care are now obvious and include:

- Timely access to and an appropriate amount of quality time with a general practitioner – this can be a challenge particularly in socio-economically disadvantaged areas where there may be additional pressure to bulk bill and see large numbers of patients
- Access to a range of affordable services provided by allied health professionals (public and private)
- Access to affordable specialist care
- Access to coordinated, integrated care for complex health needs.

HealthOne NSW will address the above inequities by establishing and subsequently evaluating a number of sites that will deliver a new model of primary care. The model will emphasise prevention, early diagnosis, and the improved management of chronic diseases. The success of similar international approaches suggests that HealthOne NSW can also be successful in NSW.