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Submission to Inquiry on closure of the Wanniasa Medical Centre

In this Submission to the Standing Committee on Health and Disability of the ACT Legislative Assembly, the Health Care Consumers Association of the ACT (HCCA) has sought to address the issues identified by the Committee.

The closure of the Wanniasa Medical Centre and relocation of the services and General Practitioners to Phillip is a matter of great concern to residents in the Wanniasa area. While the Centre has indicated a willingness to keep serving the Wanniasa area, the mechanisms suggested by the Centre, such as a courtesy car, only amount to short term tokenism. The method of communication with patients regarding the closure and relocation of services did not reflect respectful consideration of consumer or their needs.

While HCCA is unable to comment on the circumstances of the closure there have been suggestions that the Wanniasa Centre was not financially viable. If this is the case it is likely to apply to a number of communities in the ACT (and elsewhere). It would be valuable if the ACT Government worked with the Federal Government to answer this financial viability question. Is the current level of remuneration through Medicare and health insurance for general practice insufficient to provide a medical practice with the revenue needed to meet practice costs and provide adequate income to the medical practitioners? If the level of remuneration is not viable why is only Wanniasa being affected?

HCCA has received considerable public comment expressing a range of concerns relating to reduced access to health consumers, including parking difficulties and bus services, reduced access to their doctor of choice and therefore lack of continuity of care, the perception of profit coming before patient care, lengthened travel time and the flow-on effects on other businesses and the community. There has also been extensive broad public concern expressed through the media. The removal of the seven full time general practitioners from Wanniasa is a major blow to the already under serviced Tuggeranong area and the health of consumers in that area.

The ACT (and the Australian) health care system is predicated on ready access to a general practitioner. The GP is the entry point and gatekeeper for the health care system. In those roles the GP is required to be involved in a number of “authorising” processes, including referrals to specialists and allied health professionals, approving diagnostic tests and prescribing medications. In those roles the GP also plays a pivotal role in coordinating their patients’ care in the primary and community health care systems. As part of this role it is expected that the GPs will know their patients – the foundation stone for this is continuity of care.

The impact on health consumers is considerable. By moving the medical centre from the hub of the suburban area being served, access is significantly decreased. Phillip as a light industrial area is poorly served by public transport. Reduced access due to the need for “out-of-suburb” travel and poorer public transport will have an even greater impact on those with mobility difficulties whether they are because of age, disability or chronic conditions. It has been suggested that there is likely to be a reduced ability for consumers to see their doctor of choice with a consequential compromise of continuity of care. This is a very important issue for older people and people with chronic conditions. There is also the suggestion that corporate medical practices do not seek patients with chronic or complex problems as they are often more time consuming with little additional remuneration. Overall these factors, plus the lengthened waiting times, are likely to result in more consumers going direct to the Emergency Department of The Canberra Hospital. Not a desirable outcome for anyone.

There are two other general issues that are of immediate concern to health care consumers. Firstly, reducing ready access to general practitioners, in effect, also restricts entry into the health system other than through hospitals. Secondly, the financial imperative for corporately owned medical practices is for them to be run as businesses, meaning that primary health care practices seek to run their practices more cost effectively and maximise profits. Maximising profits is unlikely to be consistent with maximising health outcomes for the consumers.

HCCA understands that the ACT Government has limited power to control privately owned medical practices and is not advocating additional government control over private sector health services. However, HCCA strongly advocates that the ACT Government has the responsibility to meet the needs of health consumers in the ACT. There is a range of mechanisms and measures that it can implement to do this, including providing some alternative models of primary health care and competition. The ACT Government could take an active role in facilitating patients’ access to their own medical records (so that they can use them to transfer to another practice) by making them aware of their rights to access.

Discussions could be held by the ACT Government with the Federal Government on mechanisms that provide incentives for medical practice in target areas of medical workforce shortage, as Wanniasa must be now defined, and tailoring medical provider number availability to defined areas of shortage.

The ACT Government can either provide or encourage the provision of primary health care services for all ACT residents. The ACT Government has the power to establish public community health centres with salaried medical practitioners or provide facilities and support for a private or contracted medical practitioners. On the other hand the Government could assist private practitioners to establish practices by way of subsidies, incentive payments, guaranteed level of income. The ACT Government could certainly provide a walk-in health centre for the people in Wanniasa.

HCCA believes that the closure does provide an opportunity for the implementation of some innovative approaches in delivering primary health care to the Wanniasa community. As ACT Health is in the process of developing a community based health services plan this is an opportunity for ACT Health to look at possible options in the provision of improved primary health care in the area. While access is critical the provision of a range of suitable services and the use of appropriate health care practitioners – not only GPs, are important elements in any solution. There are options to support and enhance the GPs role in this context including the Nurse Practitioner currently being developed in the ACT and the Physician Assistant which Queensland is seeking to establish.

Establishment of a Wanniasa community based primary health care centre could provide a valuable opportunity to develop and evaluate integrated primary care and preventive health services supported by a range of allied health professionals with a strong community focus.

Involvement of health care consumers in that development process, together with careful monitoring and evaluation would provide the Government with an ideal chance to trial different approaches to service delivery. This would be of immediate benefit to that community with the added benefit of developing community services models that have the potential to have a broader benefit to all the ACT community.

There is a depth of concern about the closure of the service being expressed by members of the Wanniasa community. That concern spills over into adjoining suburbs.