



Ageing and Affordability in Primary Care – the gaps

PART 1: Panel:

- Preventive Health:

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Australian Health Policy Collaboration

21 July 2016

COTA National Policy Forum

Reframing Primary Health Care for Older Australians

Canberra

ahpc

**AUSTRALIAN
HEALTH POLICY
COLLABORATION**

Access and affordability in Primary Care - the gaps

Prevention of chronic diseases

Rosemary Calder

Director

Australian Health Policy Collaboration

Australian population health initiatives 1981+

1981

Australia becomes a signatory to the Health for All by the Year 2000 Agreement

1985

Better Health Commission established

1986

Yet, against this backdrop, the prevalence and burden of chronic diseases has continued to rise

1986

Better Health Commission and Looking Forward to better health report

1986

WHO Health For All 2nd international conference

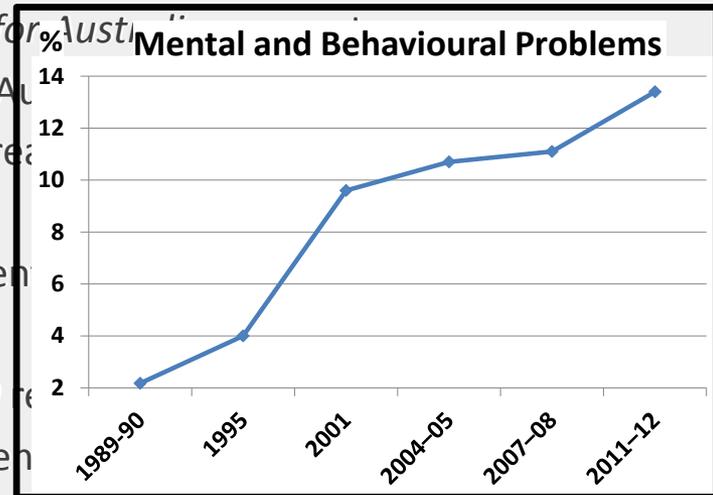
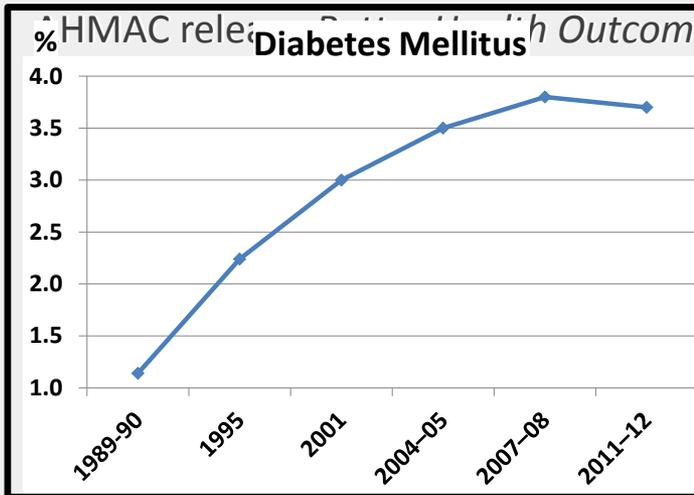
1988

Health for All Committee release Health for all Australians report

1989

Goals and targets for Australia's Health in the Year 2000 and beyond released

1994



1996

1997

2006

2008

2009

2011

2014

2015

Commonwealth terminates National Healthcare Agreements

ANPHA closed and its functions transferred to the Department of Health

Chronic Condition Framework developed

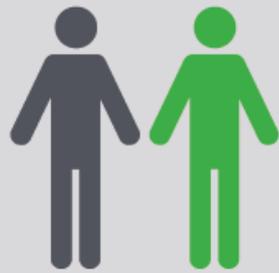


Australian Health Policy Collaboration

An independent health policy think tank established at Victoria University in 2015 with VU seed funding.

- Aimed at **transforming health outcomes**
- Tackles the **big, complex and persistent problems** in health
- Promotes compelling **evidence and realistic solutions**
- **Collaborates** with experts to delve deeper into complexity
- **Measures the impact** of health policy through economic costs/consequences and individual/community impacts
- Works to bring **new understanding** to policy challenges





1 in 2

Australians
have a chronic
disease.

Chronic diseases, like
**CARDIOVASCULAR
DISEASE**
CANCER
and
DIABETES

are the leading cause
of illness, disability and
death in Australia.



Almost
ONE THIRD
could be prevented

by removing exposure
to risk factors such as
smoking, high body
mass, alcohol use,
physical inactivity and
high blood pressure.

Despite the
need...

ONLY
1.5%

of spending* is
dedicated to
prevention.

*As a proportion of total
health expenditure.



Chronic diseases in Australia: the case for changing course

Background and policy paper

Policy paper No. 2014-02
October 2014
Sharon Willcox



Chronic diseases in Australia: Blueprint for preventive action

Policy paper No. 2015-01
June 2015
Sharon Willcox



Targets and indicators for chronic disease prevention in Australia

Technical paper No. 2015-08
November 2015

Kevin McNamara, Andrew Knight, Michael Livingston, Kypros Kypri, Jonathan Malo, Lyn Roberts, Sonya Stanley, Carley Grimes, Bruce Bolam, Michelle Gooley, Mike Daube, Sharleen O'Reilly, Stephen Colagiuri, Anna Peeters, Penny Tolhurst, Philip Batterham, James Dunbar, & Maximilian de Courten

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Prevention

“Preventive health action aims to support good health and eliminate or reduce those factors that contribute to poor health. While it focuses primarily on people who are currently in good health, and those who are at risk of illness, it is also concerned with preventing, where possible, the progression of disease among people already affected (secondary prevention)”

ANPHA, 2013



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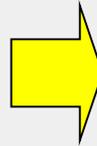
The need to change the current model

Traditional healthcare:

The healthcare system acts only when the chronic patient worsens becoming acute.



Chronic diseases are not optimally managed, and prevention as well as risk factors are not systematically taken into account



Proactive healthcare:

The patients' needs are taken into account before the disease worsens and possibly before disease onset, contributing to better health outcomes for the population

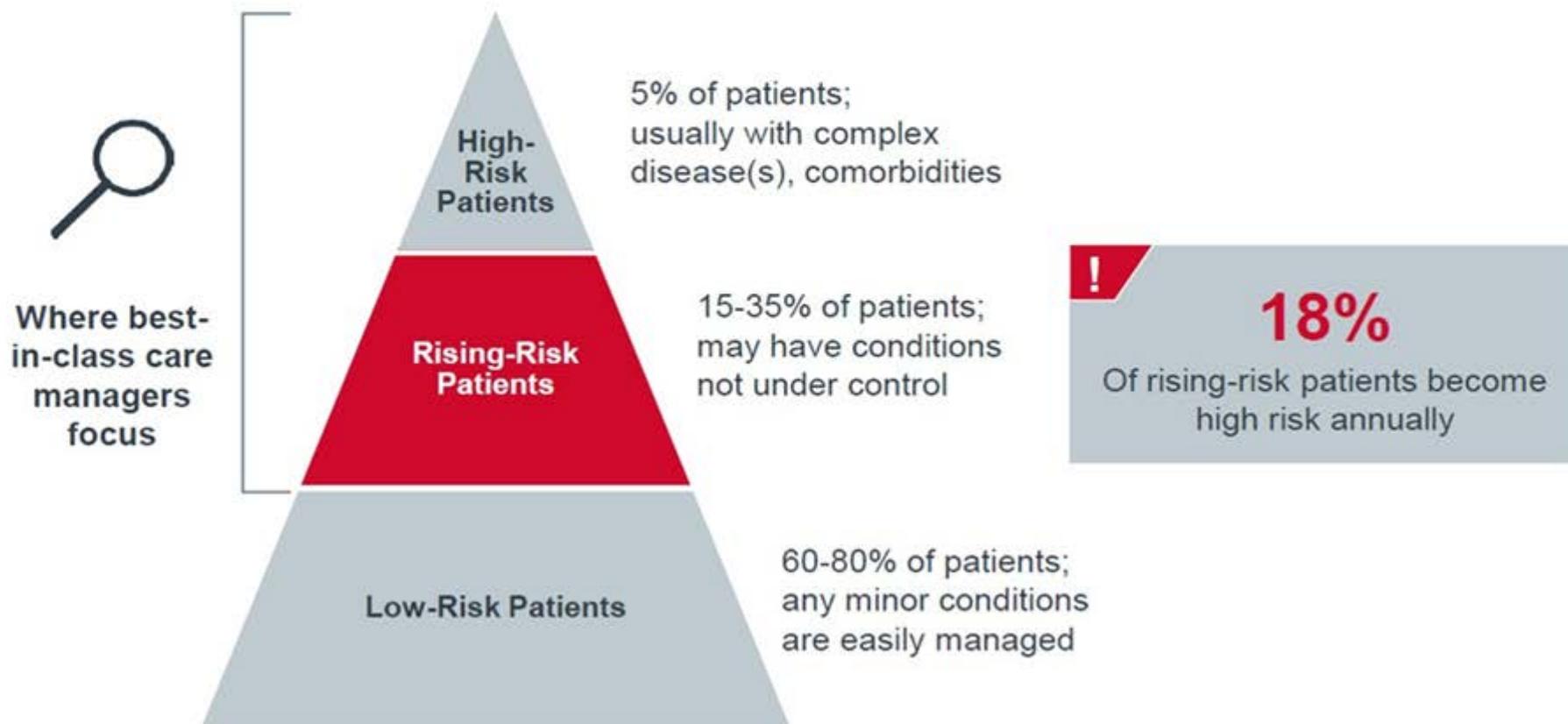


The healthcare system is able to manage chronic diseases, support self-management, and to delay onset of complications.

Improving outcomes; reducing and managing risks

Preventing New High-Risk Patients

Managing Three Types of Patient Demand



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Source: Advisory Board interviews and analysis.



2016

AUSTRALIA'S HEALTH TRACKER

A report card on preventable chronic diseases,
conditions and their risk factors. Tracking progress
for a healthier Australia by 2025.

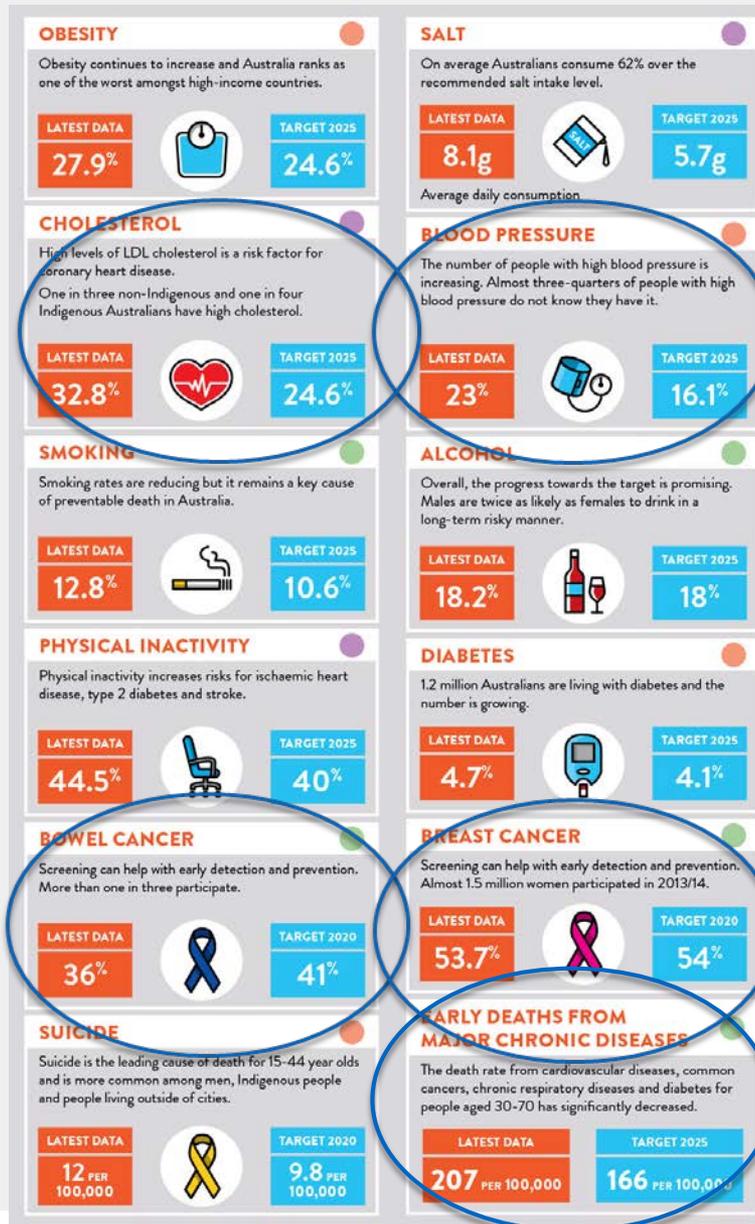


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RECOMMENDED AUSTRALIAN TARGETS AND INDICATORS

	25% reduction in overall mortality from CVD, cancer, chronic respiratory diseases & diabetes
	25% reduction in the overall mortality from CVD & diabetes
	25% reduction in the overall mortality from chronic respiratory diseases
	Elimination of asthma deaths in adults aged <65
	25% reduction in the overall mortality from cancer
	Reduction in the national suicide rate by 10% by 2023
	<p>At least 10% relative reduction in harmful use of alcohol, with regard to:</p> <ul style="list-style-type: none"> • Per capita consumption; and • Heavy episodic drinking; and • Alcohol-related morbidity and mortality
	A 10% relative reduction in insufficient physical activity
	A 30% relative reduction intake of salt/sodium
	A 30% relative reduction in current tobacco use in 14+ years
	Reduce smoking rates of adults with mental illness by 30% by 2020
	A 25% relative reduction in prevalence of raised blood pressure
	Halt the rise in obesity
	Halt the rise in new diabetes
PLUS	<p>- Age-standardised ave. total cholesterol levels for adults ≥ 5.0 mmol/L</p> <p>- Improve employment rates of adults with mental illness & participation rates of young people with mental illness in education & employment, halving the employment & education gap</p>



On track

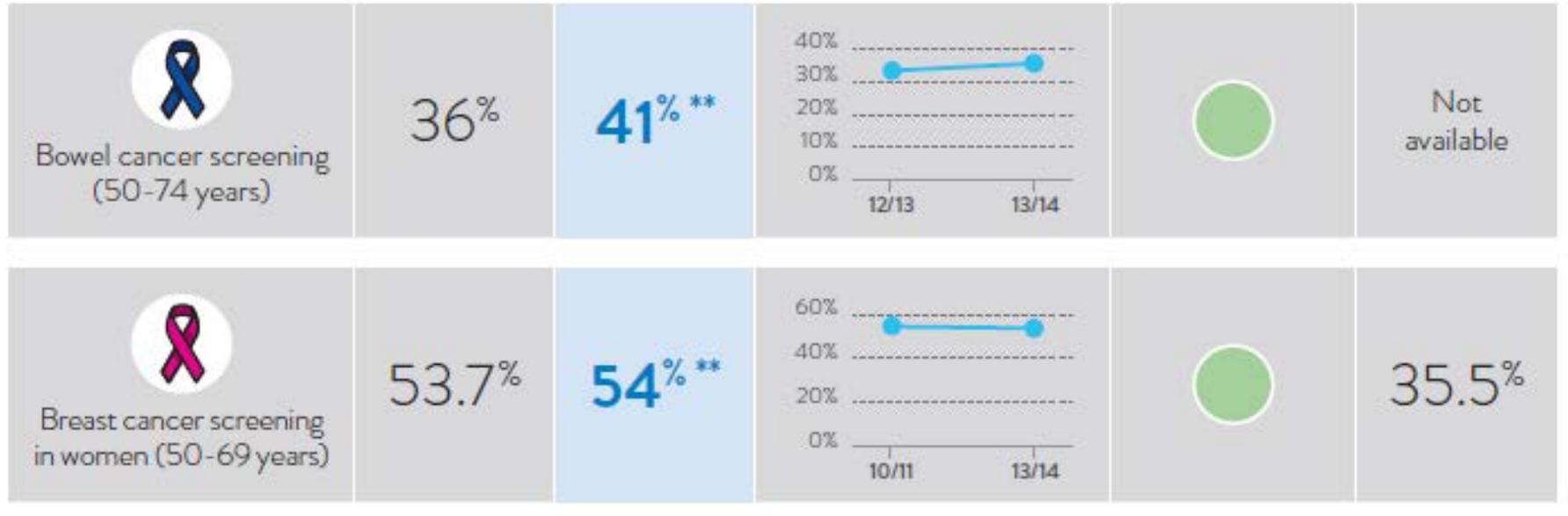
- ✓ Smoking
- ✓ Alcohol
- ✓ Screening
- ✓ Premature death

Not on track

- X Obesity
- X Blood pressure
- X Diabetes
- X Suicide

Screening

SCREENING



** 2020 target

Health check: cholesterol

CHOLESTEROL

High levels of LDL cholesterol is a risk factor for coronary heart disease.

One in three non-Indigenous and one in four Indigenous Australians have high cholesterol.

LATEST DATA

32.8%



TARGET 2025

24.6%

Access and affordability in primary care - the gaps

Today's adults are tomorrow's older Australians: Investment in prevention **now** enables quality of life for current and future older Australians.

Gaps: tackling risk factors like nutrition & physical activity and early-intervention/prevention in primary care

Opportunities:

- parks and active living spaces suitable for all: 8 to 80 year olds;
- reduction of salt/sugar/fat content in processed food;
- protection of young people from unhealthy products;
- improved integration of health care for chronic disease prevention and management (check ups, expanded screening for early intervention, funding incentives for early interventions and integrated health care management).