

The Pledges: Who gives what

Election 2018: who has promised what? Below are some of the undertakings and activity from major and minor parties on areas highlighted by the AMA(SA) and of interest to those in health – some good, some not so good. Read on to find out more ...

Labor Party

Clinician-led decision making, data and IT >>

Support for clinician involvement and advocacy, and the Health Performance Council >> Combining data science and health services; SA Health Quality Information and Performance Hub >> Outpatient clinic waiting times published online, in time >> Independent review of EPAS to resolve issues raised by clinicians and consider improvements suggested by AMA(SA); AMA(SA) to engage with EPAS Clinical Advisory Group.

NALHN, Modbury and Lyell McEwin >>

Expansion of the Modbury Acute Surgical Ward (\$35 million), with 1-3 night stays >> Increasing LMH self sufficiency to around 80% eg in ED rheumatology, dermatology, plastics, vascular, ENT; LMH can expand intensive care beds on need >> Free volunteer shuttle bus in NALHN; improving the public transport network; working party to review and improve patient transfers.

Children and the WCH >> \$528 million for a new Adelaide Women's Hospital (WH) co-located with the new RAH in 2024; new Children's Hospital site as close to the precinct as possible, announced by the end of 2019; Helen Mayo House to move to the WH. WCH to be upgraded >> A clinical services plan for children; continue 'No Jab No Play'; preventive measures against childhood obesity and diabetes.

RAH >> Committed to previously announced evaluation processes including performance, benefits and equipment. Some reviewing already commenced including security; signage; blue space; outpatients. Pain Management has moved to TQEH. >> Feasibility study underway on the Chest Clinic; interim strategies in place.

Integrated hospital and GP services >>

My Health Record expansion, including viewing in other systems

(eg EPAS) and integrated with public pathology, imaging and pharmacy by June 2019 >> Primary/tertiary collaboration and review of outpatient systems >> SA Health and SA PHNs have purchased HealthPathways; model of care for older people; and an end of life care strategy.

Rural health >> \$140 million to upgrade country infrastructure, including renal at Whyalla and Mount Gambier >> Moving away from models relying on GPs to cover hospitals 24/7; improving training opportunities in country SA; investigating additional incentives to attract rural health workforce >> Exploring expanded scope of clinical services in larger hospitals; steering groups to collaborate with GPs and co-design future services.

Training and research >> \$3.6 billion health and biomedical precinct including SAHMRI; proton therapy unit >> Established Health Industries SA; purpose-built Clinical Trials Research Centre (with HRF) opened Dec 2017; new partnerships such as the Beat Cancer Project >> Ensuring training needs considered in any service configurations >> Supporting statewide/networked training and accreditation; expansion of training positions in rural areas; recognise the need to increase specialist rural training places; a rural intern training pathway from 2019 >> Advocate with granting agencies for rural medical research grants.

Mental health >> Centre of Excellence for sub-acute care for people with severe-extreme dementia; support the concept of multiple Specialist Residential Units for non-acute accommodation for this group >> New mental health and drug addiction community outreach; new suicide prevention programs; new specialised service for people with BPD; reverse federal cuts to the Intensive Home Based Support

Service >> Enhance the SAHMRI mental health registry.

Palliative care >> Purpose-built Palliative Care Unit at Modbury (\$15.5 million); expanding the GP Palliative Shared Care to country; developing care pathways. >> Continue palliative care specialist visits to rural areas post withdrawal of federal funds to 30 June, and to look at a future revised model of care.

Other areas of interest >> Almost \$80 million over four years to replace equipment in metro and country hospitals >> Supportive of AMA(SA) call to adopt WA model on mandatory reporting of doctors – will discuss at COAG and look at WA and replication in SA if COAG agreement not reached.

Liberal Party

Engagement with clinicians and communities; data and IT >>

Commission on Excellence and Innovation in Health, governed by a board including doctors >> Decentralise the public health system: boards of management for each LHN, with clinicians on boards, and clinical engagement >> Open to engaging university research units to help manage and utilise data; government/SA Health will need to maintain its own capacity for data analysis >> Outpatient clinic waiting times published online from 1 July 2018, on a quarterly basis by speciality and hospital >> Suspend EPAS roll-out; an independent review of its functionality, performance and future, to determine if it should progress, costs to fix, or a pathway to a better system; involving the AMA(SA) and other organisations to address EPAS issues >> Real-time prescription monitoring against drug misuse.

TQEH, Modbury, Noarlunga and the Repat >> TQEH to be a key cardiac centre as part of a \$270 million upgrade >> \$110 million

to upgrade Modbury facilities and services, including a 16-bed purpose-built palliative care unit; extended emergency care unit; acute medical unit and 4-bed HDU >> 12-bed acute medical ward at Noarlunga (capacity to expand to 15); admission to three days; and a new Women's and Children's Health Hub >> Retain the Repat site as a health precinct, and look at Ward 18 for people with BPSD.

Children and the WCH >> A new WCH co-located with the RAH; in the first 100 days, a high-level task force including clinicians and representative groups to drive the project and develop a fully-costed plan, with a view to co-location by 2024 >> \$4 million paediatric eating disorder service; \$10 million Borderline Personality Disorder program >> Aquatic safety;

health and drug education in schools; tackling bullying in schools; and magistrate drug treatment orders for under-18s for up to 12 months >> Appointment of an Aboriginal Children's Commissioner.

RAH >> Operational and design problems at the RAH to be urgently addressed, including securing sites for respiratory and eye services, with the involvement of frontline clinicians and organisations.

Integrated care, prevention and more >> Multidisciplinary teams, integrated care, and preventative health – including targeted interventions for chronic conditions, end of life, and complex conditions >> Healthy Communities Program to focus on physical activity, smoking, alcohol, access to affordable healthy food,

improving health literacy >> Bowel cancer prevention initiative, catching up overdue colonoscopies in 12 months.

Rural and mental health >> Address capital works backlog in country hospitals; upgrades at Murray Bridge, McLaren Vale and Yorketown; and a 24-hour GP emergency service at Mt Barker >> \$20 million rural health workforce strategy including doubled country interns; recruiting and retaining resident specialists; and increased support for rural generalists >> Statewide mental health service plan within 12 months, including country SA >> Permanent renal dialysis on the APY Lands; upgrading and expanding the Mount Gambier unit >> Double chemotherapy delivered in regional SA through a country cancer initiative, including piloting GP training in oncology.

SA-BEST

SA-BEST has not provided a personalised response to the AMA(SA)'s election priorities, as we go to press, but has announced a number of measures that reflect recommendations or issues raised by the Association and some that differ. SA-BEST health policy themes include: securing medical and health services (focussing on reversals or mitigation of losses); and country health (upgrades, scope of services, and drug, rehabilitation and support services). Also supporting hospital and medical staff (whistleblower protection, protection against violence, less external consultants, and workforce planning); and improved governance, transparency and accountability (a Royal Commission into the health system, online data and performance statistics, reviewing EPAS, and strengthening local decision-making).

Greens

The Greens have provided a detailed and positive response to measures called for by the AMA(SA), supporting many of the Association's recommendations, including for a Clinical Data Analytics Unit and Clinical Senate; expansion of Modbury

services (including additional resources for the LMH); a co-located WCH; and independent, evidence-based reviews of child health, the RAH and EPAS, with a focus on clinical expertise and knowledge.

The Greens also support the AMA(SA)'s proposals for collaborative team-based models of care, funding for GP-led stepdown; and rural measures including an increased scope of services in larger hospitals and improved access to mental health care. The party also support purpose-built, high dependency accommodation for people with severe behavioural problems associated with dementia, mental illness and impairment. Training and research calls are also supported, and \$24.5 million per annum funding for palliative care, with outreach to country SA and a purpose-built hospice at Modbury. Other notable policies include increased carer respite, voluntary euthanasia, and a five-year plan for mental health.

Australian Conservatives

The Australian Conservatives have provided an informative and broadly supportive response to measures called for by the AMA(SA) including trialling and implementation of a clinical senate and a clinical analytics unit to provide independent strategy and clinical advice.

They also support expanded services at Modbury, Noarlunga and TQEH and a co-located WCH "at such time that the project can be paid for and implemented appropriately".

Australian Conservatives support the AMA(SA) calls on training and research and propose the establishment of a committee to determine what is most needed rurally, and strongly support the implementation of a mental health registry. They also support investment of \$24.5 million to improve access to palliative care services, and have actively campaigned for appropriate anti-bullying laws.

Dignity Party

The Dignity Party (formerly Dignity for Disability) will have a number of candidates in this election and continue to focus on a range of issues and areas also highlighted by the AMA(SA), including NDIS transition issues, the rights of people with a disability, mental health, the need for access to services in regional areas, and supporting the ageing population.

Full responses to the AMA(SA)'s Election Priorities 2018, commentary, and other policy information from the various parties, can be found at the AMA(SA) website www.amasa.org.au.