

## **Briefing Paper:**

# **MEDICARE LOCALS AND NGOS**

### **January 2012**

#### **Background**

New primary health care organisations, Medicare Locals, are being progressively established across Australia as part of the Commonwealth's national health reforms. Their role is to improve coordination and integration of primary health care in local communities, address service gaps, and make it easier for patients to navigate their local health care system.

There will be 62 Medicare Locals established nationally, of which 18 in NSW (see list at *Appendix 1*). They will be established in three phases: the first commenced operation on 1 July 2011, the second group commenced in January 2012, and the remainder will be established by July 2012.

The Commonwealth Government *yourHealth* website provides information about each Medicare Local, including boundary maps, service profiles and contact details.

See: <http://www.yourhealth.gov.au/internet/yourhealth/publishing.nsf/content/medilocprofiles#.TymrpIj6iLW>

Medicare Locals will be independent companies limited by guarantee managed by skills based boards. They will be operated by the Divisions of General Practice, in partnership with other high performing primary health care organisations, such as Aboriginal Medical Services. The make-up of each Medicare Locals will vary and reflect the needs and nature of the local community. They will receive annual core funding across the national network of approximately \$173m.

#### **Medicare Locals' Role**

The purpose of Medicare Locals is to coordinate primary health care delivery to address the health needs and service gaps in their local communities. They will have a broad focus that goes beyond that of the current Divisions of General Practice.

While Medicare Locals will use different approaches to meet the needs of their community, they must meet the same five strategic objectives:

1. Developing integrated and coordinated services to improve the patient journey
2. Provide support to clinicians and service providers to improve patient care
3. Identification of the health needs of local areas and development of locally focused and responsive services
4. Facilitation of the implementation and successful performance of primary health care initiatives and programs
5. Be efficient and accountable with strong governance and effective management

Specific tasks include:

- Effective collaborations with Local Hospital Districts and local Lead Clinician Groups;
- Supporting the development of e-health and health information
- Improving the planning of primary health care services to respond to local needs;

- Supporting the ongoing development of primary health care infrastructure, including GP Super Clinics;
- Initiatives to increase and enhance the primary health care workforce; and
- Initiatives to improve disease prevention and management and improve access to services. These include the access to afterhour's primary care, telehealth and services for older Australians.

The Commonwealth Government has identified the initial priorities for Medicare Locals as:

1. After hours GP services - Each ML will be provided with funding to plan and ensure the availability of face-to-face after-hours services for their region.
2. Aged Care - Each ML will be provided with funding to plan and ensure the availability of PHC services for the aged (community and RACFs).

From mid-2013, MLs will be provided with flexible funding to target gaps in local primary health care services.

### **Why Medicare Locals and Health NGOs need to engage**

Medicare Locals need collaborative relationships with the key health and community service providers in their local area in order to deliver more integrated and coordinated care. Non-government health and community service organisations are important providers of primary health care and other services. Engagement between the two sectors is essential to build effective working relationships to improve local health outcomes.

All Medicare Locals will set up local consultation structures and advisory groups to engage with Local Hospital Networks, health professionals and consumers in service planning and coordination.

### **How to engage**

Some of the potential opportunities for relationships between Medicare Locals and Health and Community Services NGOs include:

Governance:

- membership of Medicare Locals Boards
- representation on Advisory Committees / Working Groups

Planning:

- participating in joint service planning
- identifying evidence-based strategies to improve health outcomes and the quality of service delivery for disadvantaged or under-served population groups

Service provision:

- providing information for local service directories or databases
- making referrals for service
- joint or collaborative local service provision

Performance monitoring

- sharing service data
- participating in Health Communities reports

See *Appendix 2* for further details.

## **Barriers to engagement**

There are currently varying levels of understanding and relationships between General Practice and non-government services.

A scoping study by the Mental Health Coordinating Council found that many Divisions were not aware of the NGO sector and its differences to the public sector.

Some had a perception that NGOs provide poorer quality services.

At the local levels, GPs were often not aware of what services were available or how to refer clients to NGO services.

## **Strategies to improve engagement**

- Understand your current level of engagement - Map existing relationships and any current partnerships with the Divisions of General Practice. Identify examples of current good practice, what works well and the challenges
- Information and communication to build cross sector linkages and greater understanding
  - Provide your organisation's contact details, service descriptions, target client group and referral pathway to Medicare Locals / service directories
  - Hold regional Services Showcase / Open Day (e.g. MHCC "Meet your neighbour")
  - Establish regular communication channels, such as e-newsletters
  - Participate in local interagency meetings or primary care networks
- Be clear about your objectives and what you are seeking from engagement, as well as roles and responsibilities of both parties
- Explore informal and formal partnership opportunities,
  - Service MoUs or SLAs opportunities
  - Participation in project steering groups or program advisory committees
  - Identify ML community consultation mechanisms and process

Appendix 1

**NSW MEDICARE LOCALS**

**Medicare Locals from 1 July 2011**

<b>Medicare Local</b>
Western Sydney
Hunter Urban
New England
Murrumbidgee

**Medicare Locals - January 2012**

<b>Medicare Local</b>	<b>Applicant</b>
Illawarra-Shoalhaven	Illawarra Division of General Practice
Nepean-Blue Mountains	Nepean Division of General Practice
North Coast NSW	Northern Rivers General Practice Network
Northern Sydney	GP Network Northside (Hornsby Ku-ring-gai Ryde Division of General Practice)
Western NSW	Dubbo Plains Division of General Practice

**Medicare Locals - July 2012**

<b>Medicare Local</b>	<b>Applicant</b>
Central Coast NSW	Central Coast Division of General Practice
Eastern Sydney	South Eastern Sydney Division of General Practice
Far West NSW	NSW Outback Division of General Practice
Inner West Sydney	Central Sydney GP Network
South Eastern Sydney	Sutherland Division of General Practice
Southern NSW	Southern GP Network
South Western Sydney	Sydney South West GP Link and Southern Highlands Division of General Practice

**Medicare Locals where Applicants and Department of Health and Ageing are confirming Arrangements (for July 2012)**

<b>Medicare Local</b>
Hunter Rural
North Eastern Sydney

## Appendix two

**Working Together**

<b>Cooperation</b>	<b>Coordination</b>	<b>Collaboration</b>
<b>Contributing Resources</b> Agencies contribute resources to another agency's project or effort.	<b>Reconciling Activities</b> Agencies adjust or combine existing programs to deliver services more effectively.	<b>Sharing Program Responsibilities</b> Agencies come together as a new entity to provide services or to manage a resource.
<b>Promoting Others</b> Agencies willingly share information about the work or services of others.	<b>Sharing Resources or Programs</b> Agencies that use the same good or service agree to share in its cost.	<b>Creating New Systems</b> Agencies work to create and implement a new model to deliver services or address a public problem.
<b>Sharing Information</b> Agencies share information on a formal or informal basis.	<b>Producing Joint Projects</b> Agencies depend upon each other for producing a specific product or event; may be short-term.	<b>Planning Collectively</b> Agencies develop a vision or conduct a study for the management of a resource or the alleviation of a social problem.

<http://www.thirdsectorconnector.com/>