Community Report on the Lithgow Community Forums on Health: EXECUTIVE SUMMARY

(incorporating the results of the online Lithgow Health Community Survey)

held Friday 16 November 2012

Conducted by the
Interim Joint Health Consumer Committee
of the Nepean-Blue Mountains Medicare Local
and the Nepean Blue Mountains Local Health District





EXECUTIVE SUMMARY

The Lithgow Community Forums on Health were part of a series of forums organised by the Interim Joint Consumer Committee of the Nepean-Blue Mountains Medicare Local (the Medicare Local) and the Nepean Blue Mountains Local Health District (the Local Health District).

The Lithgow Community Forums on Health were held on Friday 16 November 2012 and attended by 91 people. The forums were supplemented with an online survey for residents of the Lithgow Local Government Area (LGA) to have their say on health services in the region, to which 44 residents responded.

Many problems were identified. Some were specific to the Lithgow LGA while others were shared by participants at the Community Forums on Health held in other LGAs (Blue Mountains, Nepean and Hawkesbury). The proposed Lithgow Health Consumer Working Group will have an important role in progressing the recommendations arising and in ongoing consumer and community consultation.

The main problems identified include:

Transport difficulties: The requirement to travel beyond the Lithgow LGA to access specialist and hospital services creates hardship and presents many problems, for example the cost of private transport and parking and limited public transport.

Distance is a key issue for residents, especially for consumers living in the more remote reaches of the LGA. As well as cost and time issues, the provision of cross-border health services creates communication and coordination challenges that need to be addressed.

Accommodation: Residents who don't qualify for the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS) subsidy incur the same transport costs, and in some cases higher transport costs, than those who do, due to way that the eligibility boundary applies to Lithgow. These costs also affect the visiting family members and can isolate the person from their local support.

Aged care: There is an urgent need to improve access to aged care services and support, both in-home care and residential care. Lack of aged care assessment services is a major problem. Carers need increased respite, support and access to information. Palliative care and advanced care planning were also identified needs.

Knowledge, community expectations and where to go to get information: Across all the issues raised there are major gaps in knowledge and public awareness of what health services are available and how to access them, leading to misunderstanding and frustration.

Boundaries and cross-border use of health services: Consumers want flexibility to access health services in other areas, and are aware of people from other areas accessing Lithgow services. Some were concerned about how services cope with the demand from outside their own area. Service coordination and communication problems can occur in cross-border care.

Workforce problems: Consumers identified a shortage of GPs, specialists and allied health providers. Some GPs have closed their books and it can be difficult to arrange home visits. Telehealth is one means of accessing specialist and allied health services and should be expanded. Consumers want to know which visiting specialists will continue to use rooms at the hospital.

Aboriginal health services: Aboriginal community members told us that there is a shortage of Aboriginal health services in the Lithgow area. Better consultation with the Aboriginal and Torres Strait Islander community is needed to enable better health care.

Mental health services: Acute mental health services are not available in Lithgow. Having to go to Katoomba or Bathurst isolates consumers from support systems and services. Psychiatric services are available by telehealth.

Communication: Consumers want better communication between health services and between health professionals and consumers. They want to be kept informed of service changes and they feel that some health professionals could improve their communication skills.

Recommendations

Following the Lithgow Community Forums, the Interim Joint Health Consumer Committee made 16 recommendations. These are listed below, with consumer quotes *italicised*, and in more detail on pages 20-21. Progress on the recommendations to date is reported on page 22. It is recommended that:

Recommendation 1: A centralised information access point is developed and resourced for the entire region for consumers and health service staff.

'Knowing what services are available and who and where to contact.'

Recommendation 2: The Medicare Local and the Local Health District develop a comprehensive communication plan that covers internal and external communications for consumers, including the establishment of a senior communications manager position.

'People like to be listened to and to know about health services and why decisions are made.'

Recommendation 3: The complex transport and parking issues raised by consumers are tabled and addressed by high-level transport stakeholders.

'The cost of transport and parking is just too high.'

Recommendation 4: The Medicare Local and the Local Health District advocate for Lithgow to be included in the Isolated Patients Travel and Accommodation Assistance Scheme (IPTAAS).

Recommendation 5: The Medicare Local advocates for increased service and coordination for aged care, particularly the urgent need for increased Aged Care Assessment Team (ACAT) services in the region.

Recommendation 6: The health workforce (GPs, nurses, allied health professionals and hospital staff) is increased to reduce waiting lists and improve timely access to both acute and primary care.

'Waiting lists for GPs and specialised services are huge.'

Recommendation 7: The Medicare Local and the Local Health District work collaboratively with the Lead Clinicians Group to increase provision of relevant specialist and allied health services to consumers in Lithgow via various means, for example extra telehealth sessions.

Recommendation 8: The proposed Working Group agenda includes further consultation with Aboriginal and Torres Strait Islander community members and people from different cultures living in the area, as well as with people living on low income, with families, men, and young people.

Recommendation 9: The Working Group explores and advises the service network on access issues for residents living in remote parts of the LGA.

Recommendation 10: The Medicare Local and the Local Health District engage with the Aboriginal and Torres Strait Islander community to provide relevant and culturally appropriate health services.

Recommendation 11: Carer support services and resources are increased as per the NSW Carers Charter and the NSW Carers (Recognition) Act 2010.

'Carers are integral to health care and need to be recognised and be part of the process.'

Recommendation 12: The Medicare Local and Local Health District collaborate to implement illness prevention and wellbeing programs appropriate to the population.

'Preventative health care needs a higher priority to prevent health problems eventuating.'

Recommendation 13: Consumers who are admitted to hospital and their relatives are given clear instructions on what process they should follow if they experience any difficulties, and that outcomes are reported on within the health system and to the consumer.

'When things go wrong we don't know where to turn for help.'

Recommendation 14: The Medicare Local advocates for inclusion of the Lithgow area in the discharge planning section of the Personally Controlled Electronic Health Records (PCEHR) project.

Recommendation 15: The Blue Mountains GP Network Consumer Reference Group for Chronic Disease takes immediate action to address the need for a support group for people with cardiac conditions in the Lithgow area.

Recommendation 16: The Working Group works in partnership with local and community organisations and other relevant stakeholders to address the issues and gaps outlined in this report and provides regular feedback to the community.