

Reform Planning Group

Stakeholder Consultation: Written Submission

The Reform Planning Group ('Group') was established for a limited time period to prepare advice to the Director-General of Queensland Health and the Deputy Premier and Minister for Health and Minister for Ambulance Services on system-wide reform activities for Queensland's health system arising from the COVID-19 pandemic. Reform activities will focus on preventing ill health and delivering better value for our patients, our workforce and our public health system.

As part of the Group's engagement and consultation across the Queensland health system, short written submissions are being sought in the form of **two (2) key questions**.

*Please provide your responses to the questions in the space provided (a **500 character limit** applies to each question).*

Question One: In response to the COVID-19 pandemic, a number of changes were implemented with how many health services are delivered. Of these changes, which do you think should be adopted on an ongoing basis, and why?

- Increased co-operation between inter-agency and community stakeholders to address issues requiring a multi-agency response e.g. the transition of people with disability and complex health conditions living long-term in hospital and health facilities to living in the community.

Question Two: What new opportunities for change have arisen out of the COVID-19 pandemic that you/your organisation would like to see pursued as part of long-term health system reform, and why?

- The expedited transition of people with disability from hospital and health environments to community living creates an opportunity for issues relating to the longer term health and wellbeing of this cohort to be addressed.
- The NDIS is responsible for the provision of disability supports and some health supports directly related to a participant's disability, however the provision of health care services for this cohort remains a State responsibility. There is insufficient communication between mainstream health services and the NDIS to ensure coordination of necessary services.
- People with disability and complex health conditions should be identified by the State health system (via health data or liaison with the NDIS), and have an annual health plan, which includes co-ordinated care involving: GPs and the Primary Health Network (PHN), allied health supports, emergency and specialist care by HHSs and NDIS service providers. The plan would include regular and routine appointments with GPs and specialists, screening and vaccinations and particular allied health programs where required (eg. Speech pathologists for conditions like dysphagia).
- Health liaison or co-ordinator positions could be developed by individual HHSs (similar to community nursing positions) to ensure the implementation and review of plans for participants. In the future, children with disability and complex health conditions could be transitioned to this service by paediatric teams once they reach adulthood, which has the potential to prevent long stays in health or related facilities by people with disability and health conditions in the future.

Please email your completed submission to: reformplanning@health.qld.gov.au