

Health Consumers Queensland submission

Queensland Parliament

Health, Communities, Disability Services and Domestic and Family Violence Prevention

Committee

Health Legislation Amendment Bill 2019

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Approved by: Health Consumers Queensland Board

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About us

Health Consumers Queensland is the peak organisation representing the interests of health consumers and carers in the state. Health Consumers Queensland is a not-for-profit organisation and a registered health promotion charity and we believe in improving health outcomes for people in Queensland.

Consumers are people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organizations of consumers, consumer representatives or communities.

Our priority focus is on consumer engagement that influences and leads improvements and delivers better health outcomes for all Queenslanders. We achieve this through our Queensland-wide health consumer network, tailored training and skills development programs, and maximising opportunities for consumer representation at all levels of the health system.

Consumer engagement is when health consumers actively participate in their own healthcare and in health policy, planning, service delivery and evaluation at service and agency levels.



Our Six Strategic Objectives

1. Enabling health consumers and healthcare staff statewide
We build consumer, staff and system capacity to design a health system together through collaborative, integrated and consumer-centred approaches by providing support, strategic advice, training and advocacy.

2. Acting as an agent of change for consumer-centred health care
In partnership with consumers and healthcare staff, we act as a strong voice on system wide issues to influence key decision makers, policies and models of care to deliver a high quality consumer-centred health care system for all Queenslanders.

3. Enhancing effective partnerships
We develop and grow effective organisational partnerships locally, nationally and internationally to achieve consumer-centred health care for all Queenslanders.

4. Building and using evidence
We support consumers and staff to be involved in co-creating the evidence base for health system development and transformation. We act on the evidence of the human lived experience of the health system to build capacity of consumers and to leverage system change.

5. Being transparent and enduring
We demonstrate transparency and responsiveness on behalf of consumers, community and our funders. We maintain strong leadership and governance to assure organisational sustainability and longevity. We support the passion, energy and courage of our staff and members of our Network.

6. Addressing the social determinants of health
We acknowledge that systemic reform of the health system requires recognising the social determinants of health and co-designing models of care that address them.

Areas of Focus

Our areas of focus in implementing our strategic objectives
In partnership with consumers (including vulnerable groups) and staff, we act as a strong voice on system wide issues such as:

- Healthcare Rights:** Breaches of healthcare rights which prevent fair, just and affordable access to healthcare;
- Quality & Safety:** Where quality and safety and/or consumer experiences are of concern;
- Healthcare Standards:** Embedding healthcare standards around consumer engagement, comprehensive care and health literacy; or
- Systemic Issues:** Complex, difficult or contentious systemic issues.

Introduction

Our organisation welcomes the opportunity to provide an organisational response to this Bill. The Chief Executive, Melissa Fox, is also available to give evidence before the Parliamentary Committee.

Our submission covers seven of the proposed amendments due to their impact on health consumers and carers and the community in general:

1. Strengthening networked governance in Queensland's public health system
2. Strengthening the commitment to health equity for Aboriginal and Torres Strait Islander people
3. Provision of root cause analysis reports to quality assurance committees
4. Prohibition of conversion therapy
5. Consequential amendments following on from discontinuation of the Queensland Pap Smear Register
6. Private Health Facilities Act 1999
7. Queensland Mental Health Commission Act 2013

Our submission is focused on these consumer-focused principles of person-centred, integrated health care:

- Accessibility - safe, affordable and high quality services, treatments, preventative care and health promotion activities.
- Respect - healthcare that meets consumers' unique needs, preferences and values
- Choice – a responsive health system which ensures consumer choices in treatment and management options
- Participation - patient involvement in health policy to ensure that they are designed with the patient at the centre¹.

How we consulted

Our staff who are not health care providers, work closely with consumer and carers from across Queensland in their day-to-day work and the knowledge gained from these daily interactions has helped to inform our organisational perspective on these amendments. Staff and Board members of Health Consumers Queensland have reviewed the contents of this submission. The submission has been approved by Health Consumers Queensland's Board.

¹ International Alliance of Patients' Organizations (2006) Declaration on Patient-Centred Healthcare (IAPO: London) <https://www.iapo.org.uk/sites/default/files/files/IAPO%20Declaration%20on%20Patient-Centred%20Healthcare%20Poster.pdf>

Recommendations

Strengthening networked governance in Queensland's public health system:

- Health Consumers Queensland agrees that these suggested amendments recognise the links between HHSs and the QAS, with their mutual and reciprocal obligations.
- Although it may be outside of the scope of these changes, we recommend that strengthened network governance in Queensland's public health system extend beyond the Department, HHSs and QAS to include other relevant statutory agencies including Health and Wellbeing Queensland, Office of the Health Ombudsman and the Queensland Mental Health Commission. Although not directly involved in patient care, these other agencies are making decisions every day that impact on patient care and their role in this should be reflected appropriately in the new governance structure.
- Health Consumers Queensland supports the amendments that HHSs and QAS are to make decisions in the best interests of patients and other users of health services, but we recommend the concept of 'best interests of patients' be supported by objective criteria/indicators/benchmarks to guide HHSs proper application of the concept. Health Consumers Queensland also recommends that this amendment be strengthened by a feedback loop to identify when decisions are not being made in the 'best interests of patients', with a clear process to remedy such situations (including at a system-wide level). We recommend that health consumers and their carers be involved in the implementation and subsequent evaluation of this amendment.

Strengthening the commitment to health equity for Aboriginal people and Torres Strait Islander people:

- We support the proposed changes on legislated representation for Aboriginal and Torres Strait Islander people, ensuring they have a voice on HHS Boards. Health Consumers Queensland recommends that as this legislation is implemented, time is taken to continue to consult and directly engage with Aboriginal and Torres Strait Islander people/community groups.
- So too do we commend the requirement for Health Equity Strategies. Health Consumers Queensland recommends that:
 - o there be a requirement that these strategies are developed directly with Aboriginal and Torres Strait Islander people and communities;
 - o that they refer to the social determinants of health (and not just the role of the health system itself to improve health outcomes)
 - o they recognise the importance of health literacy;
 - o that these Strategies are subject to periodic review (involving such people/communities) of their effectiveness in achieving genuine improvements in the health outcomes for these members of our population; and
 - o for accountability and transparency purposes, we recommend that HHSs publish their prevailing Health Equity Strategy, as well as the results of the suggested periodic reviews and any planned remedial action.

Provision of root cause analysis reports to quality assurance committees:

- Health Consumers Queensland supports the amendments so that the relevant quality assurance committee is involved in root cause analysis from all Hospital and Health Services. Health Consumers Queensland supports this as it will lead to better recommendations being made to the clinicians involved in the RCA and provide system oversight. This should lead to better patient care and experiences.
- Health Consumers Queensland hopes this amendment will also address situations where more than one HHS is involved in a Root Cause Analysis because of the clinical pathway that occurred i.e. transferring a patient between HHSs for care.
- Health Consumers Queensland also supports more involvement of the directly affected consumers in the root cause analysis process, including provisions on how the person and their family are communicated with following the completion of a Root Cause Analysis. Health Consumers Queensland hears from consumers and their families about their concern that they feel invisible in safety and quality reviews.

Prohibition of conversion therapy

- Health Consumers Queensland supports evidence-based, person-centred health treatments for all Queenslanders. We support the prohibition of conversion therapy.

Discontinuation of the Pap Smear Register

- Health Consumers Queensland supports the removal of redundant provisions of the Queensland Pap Smear Register as it is now the responsibility of the Commonwealth to notify women when screening is due and of any action required following a test.

Private Health Facilities Act 1999

- Health Consumers Queensland supports the amendments made to ensure Queensland's legislation for private health facilities is aligned with the requirements of the National Safety and Quality Health Service Standards.

Queensland Mental Health Commission Act 2013

- Health Consumers Queensland supports the two amendments: to ensure the power to employ staff is vested with the Mental Health Commissioner and to increase the maximum term of appointment for the Commissioner.

Conclusion

Health Consumers Queensland supports the amendments that we have highlighted, subject to recommendations outlined in this submission, and look forward to supporting the changes.