



VICTORIA

inc. OSTEOPOROSIS VICTORIA

Arthritis Victoria
response to the
Victorian Health
Priorities
Framework 2012-
2022: Metropolitan
Health Plan

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Arthritis Victoria response to the Victorian Health Priorities Framework 2012-2022: Metropolitan Health Plan

Introduction

Arthritis Victoria is the peak consumer organisation for people with chronic musculoskeletal (MSK) conditions, their carers, and their supporting communities within Victoria. This response has been developed based on issues identified in consultation with Victorians living with MSK conditions.

Summary

Arthritis Victoria welcomes the [Victorian Health Priorities Framework 2012-2022: Metropolitan Health Plan and Technical Paper](#), and is pleased to provide this response. The purpose of this document is to provide feedback on the key reform priorities, principles and outcomes as a basis for meeting the future goals of the Victorian Health Priorities Framework 2012–2022.

Arthritis Victoria would like to highlight the following key issues and has further extrapolated on these further in this document.

- The future impact of rising rates of chronic disease on the health economy has great implications for the acute health sector and avoidable use of hospital emergency departments and hospitalisations. The development of a collaborative information based environment is required for individuals, the community, researchers, health service providers and policy makers to work together
- The Arthritis Map of Victoria is an example of how health system planning can be enhanced through an innovative, collaborative information-based environment. In addition to the healthy lifestyle and self-management components, the Arthritis Map integrates a range of data to provide indicators for service delivery needs, specific to arthritis and other MSK conditions, across the State
- It remains unclear in the Victorian Health Priorities Framework 2012-2022: Metropolitan Health Plan how state government are partnering with not for profit sector in order to add value to the health system and assist in reducing the economic impact of chronic disease. Arthritis Victoria's capacity to impact on health outcomes is significantly restricted by the lack of government support it receives.
- Arthritis Victoria is the peak body for MSK conditions in Victoria and plays an important role in providing early intervention and prevention of MSK conditions. Arthritis Victoria also provides a suite of evidence based, innovative services to help individuals manage and control their conditions

Background

Research by the Australian Institute of Health and Welfare highlights the impact of arthritis and musculoskeletal (MSK) conditions on health care spending and our health care system, with the disease now affecting almost one third of the population¹. Arthritis and other MSK conditions place a significant burden on the Australian community. They are the leading cause of chronic pain and disability in Australia and adversely affect the quality of life for individuals who experience the painful symptoms, limit workforce participation and productivity, and place high financial costs on people associated with ongoing management of the conditions². They also have a large impact on the lives of people's family members and carers, as well as the Australian health care system as a whole.

In 2007 more than half of all preventable hospitalisations in Australia were from selected chronic conditions, including arthritis and other MSK conditions. Arthritis, osteoporosis and back problems account for 6.9% of all problems managed by GPs, compared to 1.4% for asthma, 0.8% for ischaemic heart disease, 2.6% for diabetes, and 2.8% for depression³. Overall, arthritis and MSK conditions are the most common reasons for accessing health care services in Australia¹.

In 2007, the total cost of arthritis to the Australian economy was estimated to be \$23.9 billion, an increase of more than \$4.0 billion on the cost calculated in 2004⁴. Specific to direct health expenditure, arthritis and MSK conditions are the fourth largest overall contributor in Australia at AU\$4.0 billion (7.5% of total health expenditure), and the third largest of the National Health Priority Areas⁵.

As people with chronic MSK conditions, such as arthritis and osteoporosis, are vulnerable to multi morbidity and resultant high medical and social costs, the provision of quality care initiatives is seen as being important in preventing these situations from occurring⁶. In addition, an ageing and increasingly overweight population coupled with inadequate physical activity levels, are expected to continue to drive up expenditure for chronic disease within Australia⁴.

¹ AIHW (Australian Institute of Health and Welfare) 2008. Arthritis and osteoporosis in Australia 2008. Arthritis series no. 8. Cat. no. PHE 106. Canberra.

² NHPAC (National Health Priority Action Council) 2006. National Service Improvement Framework for Osteoarthritis, Rheumatoid Arthritis and Osteoporosis. Australian Government Department of Health and Ageing. Canberra.

³ Britt H, Miller GC, Charles J et al 2009. General practice activity in Australia 2008–09. General practice series no. 25. Cat. no. GEP 25. Canberra: AIHW.

⁴ Access Economics 2007. Painful realities: The economic impact of arthritis in Australia 2007.

⁵ Australian Institute of Health and Welfare 2009. Health expenditure for arthritis and musculoskeletal conditions, 2004–05. Arthritis series no. 10. Cat. no. PHE 115. Canberra: AIHW.

⁶ Metropolitan Health and Aged Care Services Division 2007. Linking Cancer Care, A Guide for Implementing Coordinated Cancer Care. Victorian Government Department of Human Services. Victoria.

Arthritis Victoria's comments regarding the Victorian Health Priorities Framework 2012-2022: Metropolitan Health Plan

1. The following comments can be seen to relate predominantly to the following key reform priorities within the Victorian Health Priorities Framework:

- Developing a system that is responsive to people's needs
- Improving every Victorian's health status and health experiences
- Utilising e-health and communications technology

Prevention & Information Based Planning

Chronic disease represents an unsustainable burden on health systems worldwide. Comprehensive planning solutions are required to address the underlying determinants of chronic disease in order to improve the delivery of prevention, primary care, and early intervention. Such planning is critical to minimise the exacerbation of chronic disease to complex acute illness and the over-reliance on acute hospital settings⁷.

Lifestyle Planning

Lifestyle factors such as inactivity, diet, smoking and alcohol consumption are key determinants to health outcomes and a major contributor to the burden of chronic disease⁸. The process of influencing healthy lifestyles is multifaceted and unique to each community's demographics and health care needs. To effectively cater to all communities, innovative solutions need to be developed to address the complex inter-relationships that exist within each community at a local level. Central to successful outcomes is support for the key role of health consumers in empowering individuals to make informed healthier choices.

In recognition of the need for influencing healthy lifestyles within a local community context, Arthritis Victoria has addressed this as a key focus within the recently launched 'Arthritis Map of Victoria'. The Arthritis Map is an innovative, online tool that addresses the increasing impact of arthritis and MSK conditions in communities across the State of Victoria. The Map empowers people living in Victoria to prevent or manage chronic MSK conditions by helping them to locate the programs and services they need in an efficient and cost-effective way. Specific to lifestyle planning, the Arthritis Map delivers key preventative lifestyle factor messages, specific to a person's own community, through an automatically generated 'Fact Sheet'. An example Fact Sheet is included in Appendix 1.

The map aims to be a shared resource for people living with musculoskeletal conditions, health professionals, researchers and policy makers. It seeks to bring together data to improve understanding of the impact of musculoskeletal conditions

⁷ Department of Health Victoria 2011. Victorian Health Priorities Framework 2012-2022. Metropolitan Health Plan. May 2011.

⁸ Harris.M. 2008. The role of primary health care in preventing the onset of chronic disease, with a particular focus on the lifestyle risk factors of obesity, tobacco and alcohol. Centre for Primary Health Care and Equity. UNSW

on the population of Victoria and improve future planning and service delivery across the State.

The Arthritis Map is an example of an innovative solution that addresses individual communities' health care needs around lifestyle planning, and squarely aligns with the Victorian Health Priorities Framework outcome of "People are managing their health better".

Self-management

Empowering consumers to self-manage their health can improve health status and reduce health care utilisation in patients with chronic diseases⁴.

In addition to its lifestyle planning function, the Arthritis Map also provides a platform for chronic disease management. The Map displays information on relevant local services such as rheumatologists, health services, physical activity classes, support groups, park and recreation services and disability accessible public facilities. It helps consumers navigate the health system, link in to appropriate services, and ultimately better manage their own health.

Health System Planning

Prevention of chronic disease is an important priority for the Australian health system. In 2006, the Council of Australian Governments "Plan for Better Health for All Australians" identified the importance of *promoting healthy lifestyles*, including addressing alcohol use, nutrition, smoking and physical activity⁷. It proposed that this be achieved through:-

- *Supporting the early detection of lifestyle risks and chronic disease* through a "Well Person's Health Check" in general practice for middle aged people with one or more identifiable lifestyle risks that lead to chronic disease; and
- *Supporting lifestyle and risk modification* through referral to services that assist people wanting to make changes to their lifestyle⁷.

The future impact of rising rates of chronic disease on the health economy has great implications for the acute health sector and avoidable use of hospital emergency departments and hospitalisations. The development of a collaborative information based environment is required for individuals, the community, researchers, health service providers and policy makers to work together. The planning of health systems delivery needs to evolve through the development of more sophisticated planning tools such as:

- Information systems incorporating more comprehensive data. The integration of a number of underutilised health data resources into one comprehensive system will assist informed planning across the entire continuum of care
- Evidence based planning and decision making to underpin the development of innovative health care models that reduce barriers to preventative and primary care

- Readily accessible planning tools to allow a range of stakeholders, such as health planners, researchers and the community, to identify local health needs and strengthen and expand cost-effective health service delivery models into these areas of need

The Arthritis Map of Victoria is an example of how health system planning can be enhanced through an innovative, collaborative information-based environment. In addition to the healthy lifestyle and self-management components outlined above, the Arthritis Map integrates a range of data to provide indicators for service delivery needs, specific to arthritis and other MSK conditions, across the State. This includes prevalence data per local government area (LGA), health service locations, projected population rates per LGA, urban growth boundaries, socioeconomic indexes per LGA and hospital utilisation data. Arthritis Victoria is also in the process of mapping hospital waiting times for joint replacement surgery. (www.arthritisvic.org.au)

The extension of the Arthritis Map of Victoria to include data related to other chronic disease and health system areas could facilitate evidence-based planning and decision making. The resultant informed planning could potentially minimise long term health expenditure.

2. Additional Comments

Not for Profit Sector value adding to the health economy

What remains unclear in the Victorian Health Priorities Framework 2012-2022: Metropolitan Health Plan is how the not for profit sector can add value to the health system and assist in reducing the economic impact of chronic disease.

Arthritis Victoria is the peak body for MSK conditions in Victoria and plays an important role in providing early intervention and prevention of MSK conditions. Arthritis Victoria also provides a suite of evidence based services to help individuals manage and control their conditions.

The projects outlined above illustrate the innovative ways in which non profit organisations, such as Arthritis Victoria, can assist the Victorian Government in achieving its health reform priorities. Since the launch of the Arthritis Map of Victoria in March 2011, Arthritis Victoria has been approached by a number of different peak health bodies working in chronic disease prevention and health planning who are interested in partnering to extend the use of the map to incorporate other cross-sectoral health data sets. Arthritis Victoria is aware that the product we have developed is unique and, according to General Practice Victoria and other sources, has capabilities in e-health beyond any other technology platform currently being used in Australia or internationally. Development of the Arthritis Map has provided Arthritis Victoria with a robust tool that assists the organisation to plan effectively for the future needs of its consumers. With support from the Victorian Government, the Arthritis Map could provide an innovative and cost-effective platform for integrated public health planning across the state for use by the Victorian Government and other key stakeholders.

Arthritis Victoria has plans to further develop and implement the Arthritis Map within Victoria but receives no government funding for this ground breaking and practical initiative.

Looking Ahead

Arthritis Victoria is excited to be leading the way with this geospatial population health planning tool, and would like to work with the Victorian State Government to extend the benefits of the Arthritis Map project to other areas of health planning across Victoria.

Arthritis Victoria is proposing a partnership with other peak organisations, such as General Practice Victoria, to share the map technology platform. We would like to support this as a Victorian Government initiative with other key stakeholders working in chronic disease prevention and health planning. A project plan is currently being developed and will be complete by the end of June 2011 for consideration by the Victorian Department of Health.

Our service model has a strong evidence base and expansion of these services could significantly decrease demand in the tertiary health system. We would welcome Victorian Government investment in expanding these programs in metropolitan Melbourne and into rural areas.

Arthritis Victoria would also like to emphasise the work that we are doing around access to health services in rural Victoria, through the Rheumatology Help Line and regional health research project, and would welcome the opportunity to discuss the outcomes of our research and explore potential solutions with the Victorian Government in the near future. We look forward to the consultation around the development of the rural health plan later in the year. As a very experienced and efficient non-government organisation we can help to dramatically change health outcomes for individuals, the community and health system.

Arthritis Victoria welcomes any opportunity to work with the Victorian Government in implementing the Victorian Health Priorities Framework 2012-2022 and strongly believe that we have much to offer the Victorian community in chronic disease prevention and health system planning.

Appendix 1: Arthritis Map Fact Sheet

DID YOU KNOW?

Arthritis and musculoskeletal conditions are the most common chronic conditions in Australia, affecting almost one-third of the population.

They are the most common cause of long-term disability in Australia.

Two out of every three people with a condition are between 15 and 60 years of age.

Arthritis and musculoskeletal conditions are the fourth largest overall contributor to direct health expenditure in

People living with arthritis shoulder 61% of the total cost of managing the condition.

HOW DO I GET INVOLVED?

To find out more about how you can help to raise awareness of arthritis and other musculoskeletal conditions go to:

[Join the conversation](#)

Please contact us for further information and advice

Arthritis Victoria
263 Kooyong Rd
Elsternwick Victoria 3185

Ph: (03) 8531 8000
or 1800 011 041

Key Arthritis Facts

Arthritis and musculoskeletal conditions are the most widespread of the National Health Priority Areas in Australia. They exceed asthma, injuries, mental disorders, diabetes and cancers in numbers of people affected. The World Health Organisation has stated that arthritis and musculoskeletal conditions have now reached epidemic proportions.

This epidemic can be seen across the state with a staggering 29.8% of Victorians being affected by arthritis and musculoskeletal conditions and an equally concerning rate of 28.7% in Whitehorse.

Arthritis Victoria's vision is the best possible musculoskeletal health and wellbeing for all Victorians. This means making sure people have the services they need in their local area to either prevent or manage arthritis

How You Can Make A Difference

Managing a musculoskeletal condition

The best ways to prevent the impact of musculoskeletal conditions is through early diagnosis and management. Appropriate medical management combined with exercise and a healthy weight can help to prevent progression of these conditions.

Preventing a musculoskeletal condition

You can also help to reduce your risk of acquiring some musculoskeletal conditions through regular physical activity, a healthy weight and by not smoking.

Across Whitehorse there is an urgent need for the community and individuals to take action with the rates of preventable risk factors steadily increasing:

- 29% of people physically inactive (15 years and over)
- 51% of males overweight or obese (18 years and over)
- 35% of females overweight or obese (18 years and over)
- 48% of people with at least one health risk of physical inactivity, obesity, smoking or harmful use of alcohol (18 years and over)

To help you, your family and friends get more active, click on www.arthritismap.com.au for a range of fun activities in your local area.

How You Can Help Your Community

To help prevent or manage a musculoskeletal condition, it is important to have access to the services you need, for example warm water classes or a rheumatologist.

Check out the www.arthritismap.com.au to see if you have access to relevant services in and around Whitehorse.

If there is a lack of services in your area you can help to change this by speaking or writing to your local Member of Parliament, Mayor, local government representative or local paper. [Click here](#) for more information.

Together, we can reduce the impact of arthritis and musculoskeletal conditions and, in the process, help make your local community of Whitehorse a healthier and more positive place to live.