

## Consumer leadership for better health

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There is no better time than now for the Federal Government to support the development of consumer leadership in the health system, the Consumers Health Forum said today.

In its [submission](#) for the 2021-22 Federal Budget, CHF has urged Treasurer, Josh Frydenberg, to support the establishment of an independently-governed health consumer leadership academy.

“Consumer leadership in health is more important than ever in the COVID era when every Australian is both at risk and can play a part in countering the pandemic,” the CEO of CHF, Leanne Wells, said today.

“There is a growing acceptance that people-centred care leads to improved outcomes and a more efficient health system.

“This was identified by the Productivity Commission in its *Shift the Dial* report in 2017 when it called upon “All Australian Governments should re-configure the health system around the principles of patient-centred care, with this implemented within a five-year timeframe<sup>1</sup>”

“It is worth noting that then Treasurer, Scott Morrison, supported the Commission’s call for people-centred care.

“But to ensure health services are patient-centred it is important that the consumers are involved in all aspects of health care, from identifying the issues, to participating in the research and data gathering to working up solutions and implementing them.

“This is where a consumer leadership academy, also supported by the States, could play a pivotal role in supporting consumer leadership, qualifications, mentorship of emerging consumer leaders and advocates and networking opportunities to amplify the consumer voice.

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“We have come a long way in recognising the need for the consumers to have input and CHF has an ever-increasing number of requests from a broad range of health organisations and services to find consumer representatives for various committees and working groups.

“However, the experience of consumers in being involved in COVID-related work highlights the somewhat fragile nature of that engagement with some finding they were locked out of the process.

“The CHF [Consumer Commission](#) commented on this with many of the commissioners expressing the view that consumer engagement was the first thing to go in the name of urgency, even when the discussion was around issues such as ethical resource allocation which had a direct bearing on consumer access to care.

“With the increasing demand for consumers, we need to broaden the pool of people who can confidently bring that consumer voice to the table. A national academy would work with academic partners, state health consumer organisations and health service providers to identify the gaps in knowledge and skills and deliver high quality training and support to a broad group of consumers to fill the gaps,” Ms Wells said.

Other steps CHF has called for in the Budget submission include:

**Aged Care:** Accept the recommendations from the Royal Commission into Aged Care Quality and Safety and set out a detailed implementation plan with funding to put the reforms into effect.

**Digital Health:** Access to high-quality, affordable telehealth and virtual healthcare for all consumers starting with primary care, virtual hospitals and case conferencing across health and social care.

**Health in All Policies:** Implement a Health in All Policies approach and consider adopting a wellness budget to ensure all government policy supports health and wellbeing.

**Mental health:** Increase funding for mental health and suicide prevention services in line with the findings of the Productivity Commission’s Inquiry into Mental Health and over time increase funding for community ambulatory services, mental health bed-based services and psychosocial supports outside the NDIS to meet the existing shortfall.

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**Prevention:** Through the National Preventive Health Strategy, should increase the focus on preventive health measures, including in early childhood, increase investment in prevention and health promotion research, implement a national health literacy strategy and commit to at least 5% of overall health spending by 2030.

**Primary Health Care:** Finalise, appropriately fund and implement the 10 Year National Primary Care Plan as a priority and implement a nationally coordinated social prescribing scheme to be delivered by primary health networks.

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