cohealth is calling for health system innovations that will improve the health and wellbeing of Australians with the poorest health. People who experience disadvantage or have complex health conditions have the greatest health needs yet face significant barriers to receiving care.

Improving health requires team-based, multidisciplinary primary health care, including GPs, integrated with social services and delivered close to where people live. The community health sector provides a successful model of delivering care in this way that we call on all parties to support and expand.

### The Issue

Compared with the wealthiest people in Australia, people who experience disadvantage are:

- **Twice as likely to have a long-term health condition.**
- **Twice as likely to suffer from chronic illnesses.**
- Are more likely to delay seeking medical care because of cost.

### The Solution

A **multidisciplinary community health model of care** is proven to meet complex care needs. This is what it looks like:

- Local services that are tailored to the community.
- Longer appointment times to address multiple health issues.
- Co-located with medical, allied health and social supports.
- Outreach services into public spaces or homes.
- Care navigation between the disability, aged care, primary care and hospital sectors.

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The issue

The Australian health system provides world class, high quality care. Despite this, too many people are not able to access the care they need, particularly those who experience disadvantage. As a result, these groups have poorer health than other Australians.

Everyone deserves access to the physical and mental health care they require. Care should be provided as soon as it is needed and integrated with social support to best treat conditions before acute, complex care is required.

Australia’s health system faces a range of challenges due to an aging population, rising rates of chronic disease and the long impacts of COVID-19. Responding to these challenges requires reorienting the health system towards prevention and early intervention and providing more care in the community.

The community health sector delivers health and social care for people who face disadvantage and marginalisation. For some clients this might involve ensuring interpreters are available; for others this might involve longer appointment times to address...
multiple health issues, multidisciplinary team-based care and care navigation between the disability, aged care, primary care and hospital sectors, or the delivery of outreach services into public spaces or homes.

With co-located medical, allied health and social supports, the community health sector can assist people navigate a fragmented system and enable them to access holistic, integrated care. The provision of holistic healthcare for our communities is enhanced by the sector’s ability to draw together both Federal and State Government funded programs to provide a wide range of health and social support services.

This multidisciplinary community health model of care is proven and was recently recommended in the Primary Health Care 10 Year Plan.

However, the current primary health fee-for-service funding model is not sufficient to meet the complex and diverse needs of our clients as it fails to adequately recognise their complex care needs. This funding model is geared to high volume, short, transactional appointments, and is unsuitable for community health primary care. Within cohealth general practice (GP) services are loss making, a position that is not sustainable.

cOHEALTH IS CALLING ON ALL PARTIES TO COMMIT TO:

1. Reform health funding to ensure that comprehensive, integrated care can be provided to people experiencing disadvantage, with general practice a critical component of community health care. The community health sector’s primary health care role in meeting the needs of people who experience disadvantage must be acknowledged.

   The reformed funding model must recognise the additional costs and benefits associated with providing care to groups facing disadvantage and acknowledge the specialised skills of community health GPs. A model of blended payments is needed, including a loading for client complexity and outcome-based payments, rather than an exclusive fee-for-service model. There are precedents that demonstrate some of these features, such as incentives for rural and regional primary health care, GP Super Clinics and primary care trials (such as Health Care Homes), and the proposals in the Primary Health Care 10 Year Plan.

2. Fund innovative programs that demonstrate the social impact and benefits of providing a package of integrated primary health care and social determinants of health supports such as housing and pathways into education and employment to improve the outcomes of groups that experience disadvantage.

3. Improve the circumstances in which people live, work and age (the social determinants of health) that impact people’s health outcomes more than any other factor. Widespread improvements in the health and wellbeing of all Australians will not be achieved unless this occurs. Comprehensive action on addressing the social determinants of health is needed, including:

   a) Reducing poverty and socio-economic inequalities. At a minimum, JobSeeker Payment, and related payments, must be increased so they are above the poverty line, to at least $70 a day.

   b) Increasing Federal Government investment in social and affordable housing to build 25,000 homes per year. Stable, secure and affordable housing is essential to good health and wellbeing, and is a responsibility shared between the Commonwealth and States/Territories.

   c) Taking urgent, ambitious action against climate change, through committing to net zero carbon emissions by 2035, supported by policies for a fair and inclusive transition. Climate change is already having alarming impacts on people’s physical and mental health. The biggest impacts are born by those people who are already disadvantaged. Without urgent action these impacts will continue to worsen.

   d) Recognise the impacts of racism, stigma and discrimination on health and wellbeing and implement a range of strategies to prevent and address the impacts of these social issues in Australia.
cohealth is calling on all parties to commit to three key reforms:

**reform health funding**

Reforming health funding to ensure that comprehensive, integrated care can be provided to people experiencing disadvantage, with general practice a critical component of community health care.

**fund innovative programs**

Programs that demonstrate social impact and benefit to groups that experience disadvantage such as housing and pathways into education and employment.

**improve the social determinants of health**

Increase JobSeeker Payment to above the poverty line; invest in 25,000 affordable homes per year; commit to net zero carbon emissions by 2035; and address the impacts of racism, stigma and discrimination.

cohealth is one of Australia’s largest not-for-profit community health organisations that strives to improve health and wellbeing for all. cohealth provides universal access to services as well as targeted programs and assertive models developed with communities to address the health disparities experienced by people who experience social disadvantage and are consequently marginalised from mainstream health and other services. cohealth offers a broad range of high quality, integrated health and support services, including medical, dental, allied health, mental health, pharmacy, drug and alcohol services and community support services.

cohealth would welcome the opportunity to discuss this election statement. Please contact Nicole Bartholomeusz, Chief Executive on nicole.bartholomeusz@cohealth.org.au.