



# Australian Health Care Reform Alliance

Media Release

July 12, 2006

## **COAG: Don't neglect health reform**

The Australian Health Care Reform Alliance (AHCRA) today called on the Council of Australian Governments to continue to heed calls for major reform in the health sector.

"COAG is the only body with the power to lead health reform and overcome the many problems of state and federal governments being responsible for different parts of the health system," said Alliance spokesperson, Jill Sewell.

"If genuine improvements to the Australian health system are to be achieved, COAG must seize this opportunity to put the system back on a path to recovery," said Dr Sewell. "Reform to the health workforce is urgently needed to improve the access of all Australians to quality health care."

"Better workforce planning, improvements to the delivery of primary care, reducing the burden and emphasis on acute hospital care, and improving access to care for rural and remote communities are some of the most urgent changes required," Dr Sewell said.

A report of a confidential draft of this week's COAG communiqué indicates it will ignore many of the Productivity Commission's recent recommendations.

Supporting transparent review and evaluation of access to Medicare, AHCRA advocates for the establishment of an independent national health reform body to implement necessary reforms to strengthen the health system's focus on health promotion, illness prevention, early intervention and primary care, and rationalise health funding to achieve this.

"Achieving the necessary changes will require a cooperative approach to health care planning, with government working together with clinicians and consumers, such as those represented by the Alliance," Dr Sewell said.

"The Alliance itself is the very embodiment of the cooperative approaches to decision making we would like to see improved in our health system," she said.

"With members from over forty organisations working together collaboratively, AHCRA represents a range of professional disciplines and consumers calling for changes to facilitate health care that is evidence based and reflective of community needs," said Dr Sewell.

Dr Sewell's comments came with the announcement of the Alliance's new leadership.

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Newly-elected acting chair Kerren Clark acknowledged AHCRA founder Professor John Dwyer, who has been instrumental in bringing the health reform agenda to the attention of Australian governments and the community since 2003.

“Professor Dwyer’s contribution in bringing together these national health and consumer organisations to form the Alliance was immense. AHCRA is now recognised as a leading force in health reform,” said Ms Clark.

“The new executive will to continue to advocate for a reform process that involves consumers and clinicians to help shape the future of the health system,” she said.

ENDS

### **For further information**

Media enquiries / interviews: Jill Sewell, 0418 372 328

Enquiries about AHCRA: Kerren Clark, 0427 559 448

### **AHCRA executive members**

Fiona Armstrong, Australian Nursing Federation

Kerren Clark, Australian Physiotherapy association

Gordon Gregory, National Rural Health Alliance

Kathy Kendell, Health Consumers Network

Michael Kidd, Royal Australian College of General Practitioners

Viola Korczak, Australian Consumers' Association

Tony McBride, Health Issues Centre

Gregor Macfie, Australian Council of Social Service

Prue Power, Australian Healthcare Association

Jill Sewell, Royal Australasian College of Physicians

Tim Woodruff, Doctors Reform Society

**AHCRA** > Audiological Society of Australia Inc., Australian College of Midwives, Australian Consumers’ Association, Australian Council For Intellectual Disability, Australian Council of Social Service, Australian Healthcare Association, Australian Health Promotion Association, Australian Nursing Federation, Australian Physiotherapy Association, Australian Rural Health Education Network, Australian Salaried Medical Officers Federation, Australians for Native Title and Reconciliation, Catholic Health Australia, Centre for Clinical Governance Research (UNSW), Centre for Health Services Research: Sydney West Health and USYD, Chiropractors’ Association of Australia, Chronic Illness Australia, Chronic Illness Alliance, Combined Pensioners and Superannuants Association of NSW Inc, Continence Foundation of Australia, Council of Remote Area Nurses of Australia, Country Women’s Association of Australia, Doctors Reform Society, Frontier Services of the Uniting Church, Health Consumers Association, (The) Health Consumers’ Council WA Inc, Health Consumers Network, Health Issues Centre, Health Professions Council of Australia (comprising Audiological Society of Australia, Health Reform SA, Maternity Coalition Inc, National Aboriginal Community Controlled Health Organisation, National Public Hospitals Clinicians’ Taskforce, National Rural Health Alliance, NSW Nurses Association, OT AUSTRALIA, Public Health Association of Australia, Public Hospitals, Health and Medicare Alliance (Qld), Redcliffe-Bribie-Caboolture Division Of General Practice, Royal Australian College of General Practitioners, Royal Australasian College of Physicians, Rural Doctors Association of Australia, Services for Australian Rural and Remote Allied Health, South Australian Salaried Medical Officers Association, Tasmanian Medicare Action Group, Victorian Medicare Action Group, Victorian Public Health Research And Education Council