



Malcolm (Mick) GRAHAM

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30/5/2005

The Secretary
Standing Committee of Health and Ageing

Dear Secretary,

Many thanks for allowing me to postpone my submission to this time due to my previous travel commitments.

As an 8 year retiree from Victoria to the Sunshine Coast I spend a lot of my time involved in community groups such as Chair of the Sunshine Coast Schools Industry Links Scheme - which is an organization that puts Year 10, 11 and 12 students into work experience; Chair Sunshine Coast Reconciliation Group, Deputy Chair Caloundra Community Centre, Chair of the Golden Beach Progress Association and a member of the State Government's Regional Ministerial Forum, plus a volunteer of several other community groups.

Even though some of these groups seem to be unrelated there often is a common thread linking part of one organization to another one - irrespective of how diverse they may seem.

I write as Chair of the Caloundra Home and Community Care Association which has one full time and three part time staff with 140 volunteers and 1500 frail and aged and disabled clients and also as a member of the Sunshine Coast Division of General Practice Community Panel.

The Division has almost 400 doctors on its books and with the general practice C.E.O. Ian Landreth the Association and Caloundra Home and Community Care have explored a number of programs and options for future co-operation.

A major challenge that has emerged is the Health Service inefficiencies emerging through the splitting of funding to HACC being both federal and state funds. General Practitioners are not supported to be across all health funded services and cannot appreciate or know how to formally access the many services available. Service organizations often are confronted with the same problems.

A program of education and co-operation would have the potential to speed up and promote the well being of doctors patients and service clients.

Another interesting trend that has been identified, although not substantiated by research, is the number of patients who visit doctors for social outings. If doctors were able to refer such patients to services such as Caloundra HACC we could offer a social lifestyle alternative and free up some medical visitation time. Also services such as ours could examine a scheme of arrangement where maybe groups of frail and aged clients could visit a medical center 'en block' again to speed up the consultation process.

These are just a couple of suggestions that could be explored and could lead to other initiatives to streamline the delivery of medical and related services.

Due to the large number of frail and aged people on the Sunshine Coast a trial program could be formulated with federal and state governments and health and social organizations to examine and develop a program of future directions.

Yours faithfully,

Malcolm (Mick) Graham