Strengthening Primary Care – Improving access to primary health care

The Australian Government continues to improve access to primary health care services and important health information for all Australians with an additional investment of $133.8 million, including:

- $71.9 million for the Primary Health Network’s (PHN) After Hours Program to commission after hours services and improve service integration in communities around the country
  - This will also improve access to after-hours services for residents of aged care facilities, rural and remote communities, women and children, homeless people, people with disability, people with mental illness, and Aboriginal and Torres Strait Islander people, who may not have regular access to GP services.

- $50.7 million to continue to develop an ICT system that enables a voluntary patient registration (VPR) initiative, to be known as MyGP, which will improve health outcomes, and lift the quality of services delivered to Australian patients through continuity of care.

- $5.5 million to expand the National Health Call Centre Network, Healthdirect, to include Victoria.
  - This will give Victorians access to evidence-based, accurate, trusted and quality health information, and
  - A health helpline for culturally and linguistically diverse Australians will also be established.

- $5.7 million to modernise the Hearing Services Online (HSO) portal, which supports the Hearing Services Program and helps hearing service providers deliver care to Australians who have hearing loss. This funding will ensure the ongoing viability of the portal and improve service delivery data collection, guaranteeing the program’s client-focused approach.
**Why is this important?**

New and improved medical services and technologies offer ever evolving opportunities to improve the health outcomes of Australians, and their access to health services.

Support to communities via the PHN After Hours Program helps to reduce after hours pressure on emergency departments. An independent evaluation of the program, finalised in January 2021, found it reduced low-urgency after-hours emergency department presentations and potentially preventable hospitalisations.

Victoria will become the latest state or territory to join Healthdirect, ensuring Victorian residents can access the same consistent, high-quality health advice as other Australians.

The existing HSO portal is nearing the end of its supported life, so it must be updated with technology to ensure the continuity of its service.

**Who will benefit?**

The extension of the PHN After Hours Program will benefit Australians requiring after hours healthcare where general practice and other services are unavailable and will reduce after hours demand on emergency departments. This program has a particular focus on vulnerable Australians and communities.

The funding to individual PHNs will be based on an established distribution formula which considers each PHN’s size, remoteness and population demographics.

A future VPR initiative such as MyGP will strengthen the relationship between a patient, their medical practice and GP, and make it more likely that patients receive high quality, coordinated and ongoing care from their preferred provider.

The expansion of Healthdirect to include Victoria will mean Victorians can access consistent, evidence-based health advice from the same trusted and reliable source as other participating states and territories.

The Victorian Government will also receive the same 40% call costs subsidy that is provided to other states and territories using Healthdirect.

More than one million Australians suffering hearing loss will benefit from being able to continue to use the HSO portal to access hearing services around the country. In 2019–20, the HSO portal was accessed more than 7.7 million times.

The almost 300 hearing service providers who use the portal also will continue to benefit from a site which is client-focused and fit-for-purpose.

**How much will this cost?**

The Australian Government is investing $133.8 million over 4 years, from 2021–22.