



AUSTRALIAN  
PHYSIOTHERAPY  
ASSOCIATION

# APA ADVOCACY NEWS

MAY 2021



# Contents

<b>Federal Budget 2021-22</b> .....	2
Aged care .....	3
Rural and regional health.....	4
Mental health .....	4
<b>Helping you remain viable in challenging times</b> .....	5
Our strategy and approach to strengthening viability.....	5
What can you do? Get to know your PHN.....	5
Steps to joining.....	6
I'm in, what next?.....	6
Webinar opportunity .....	6
<b>NDIS Independent Assessors inquiry</b> .....	7
<b>NDIS Workers Screening Checks delay addressed</b> .....	8
<b>Digital health</b> .....	9
<b>Reconciliation Action Plan</b> .....	9
<b>Submissions</b> .....	10
NDIS Autism Consultation .....	10
Mental Health and Suicide Prevention inquiry.....	11
Australian Health Practitioner Regulation Agency (Ahpra) and the Physiotherapy Board of Australia .....	11

# Federal Budget 2021-22

The Federal Budget has been handed down with significant investment in key areas of health and aged care. It included many positive announcements and the APA welcomes many of the funding initiatives.

However, significant investment must be accompanied by reform. It is clear the government remains GP-centric. We look forward to working with the government on its primary and preventative health agenda.

The APA welcomes:

- \$3.9 billion over four years from 2021-22 to increase the amount of front line care (care minutes) delivered to 240,000 aged care residents and 67,000 who access respite services, by 1 October 2023. This will be mandated at 200 minutes per day, including 40 minutes with a registered nurse
- \$365.7 million to improve access to primary care and other health services in residential aged care, and additional investment in digital and face-to-face assistance to make it easier to navigate the aged care system
- \$9.6 million to expand the Allied Health Rural Generalist Pathway to support more allied health professionals to train in rural and remote Australia
- \$2.3 billion to be spent on mental health in total, including a national suicide prevention office
- \$14.2 million to list six new items on the MBS for allied health providers who participate in case conferencing
- the extension of telehealth funding until the end of 2021.

We are calling on the government to support innovative, collaborative and multidisciplinary models of care, including reform of primary care that allows patient access to Medicare-funded physiotherapy as first contact practitioners.

We will continue to advocate for the government to support the MBS Review's recommendations on allied health.





## Aged care

Funding for 80,000 new home care packages is an opportunity to improve access to physiotherapy for older people and help them remain in their homes longer.

Mandated care hours of 200 minutes per person per day in residential aged care is a step in the right direction and we will seek to understand how this will be implemented.

While the government's focus on upskilling aged care and personal care workers with investment in vocational training and additional nurses are positive, there appears to be no investment in essential allied health services. APA is seeking further detail on these measures.

The government will implement the Australian National Aged Care Classification (AN-ACC) in residential aged care but has not accepted the Royal Commission into Quality and Safety's recommendation for specific allied health funding.

The APA will continue to advocate for:

- dedicated restorative and reablement care
- increased access to physiotherapy via a permanent extension of MBS Chronic Disease Management Plan
- representation on the new Aged Care Advisory Council, and
- mandated care times, the reporting of care and the new star rating system to include physiotherapy.

The APA will also be seeking more details about the government's response to the Royal Commission's recommendation (25) to combine a number of funding packages, including a short-term restorative program, to create a new aged care program.



## Rural and regional health

The \$123 million investment in rural health workforce and training under the Stronger Rural Health Strategy delivers a strong package for the rural health workforce and health services.

The APA welcomes:

- \$13.7 million for allied health case conferencing combined with new MBS items to better support allied health participation in multidisciplinary care for patients
- allied health workforce measures, including \$9.6 million to add 90 workplace training packages through the Allied Health Rural Generalist Pathway including the allocation of 30 positions to the Aboriginal Community Controlled Health Services (ACCHS) to address the significant barriers to physiotherapy access for Aboriginal and Torres Strait Islander people, and
- \$1.8 million to expand the existing NSW trial of collaborative primary care models to other states and territories.

The \$65.8 million package to increase the value of the Rural Bulk Billing Incentive is a vital measure to improving access to general practice and reducing out-of-pocket costs for rural and remote Australians. However, more funding is required to increase access to physiotherapy and allied health services and support a sustainable rural allied health workforce.

## Mental health

**There is substantial increased funding for mental health, however, integrated and collaborative models of care that include physiotherapists in multidisciplinary care teams are needed.**

The APA welcomes:

- \$34.2 million to expand and implement the Initial Assessment and Referral tool to assist health practitioners to consistently assess and refer consumers in the mental health system
- \$27.8 million to increase the number of nurses, psychologists, and allied health practitioners in mental health settings through scholarships and clinical placements
- \$487.2 million to establish a network of Head to Health adult mental health centres and satellites to provide accessible, coordinated, multidisciplinary care, and
- \$54.2 million over four years from 2021-22 to work with the states and territories to establish child mental health and wellbeing hubs to provide multidisciplinary care and preventive services.

The APA also welcomes continued funding towards The Essential Network (TEN) program delivered by the Black Dog Institute and which provides tailored support for the mental health of Australia's health workforce.

The APA is calling for funded and supported coordinated multidisciplinary and multisector teams that include general practitioners, psychiatrists, paediatricians and mental health nurses working alongside physiotherapists and other allied health practitioners, including psychologists, social workers, counsellors, peer workers and drug, alcohol and gambling counsellors.





# Helping you remain viable in challenging times

## Our strategy and approach to strengthening viability

In ensuring a strong physiotherapy workforce, our advocacy work remains firmly focused on the viability of our members' practices. In the context of a dual public/private system, we need to work across a number of areas of the health system in offering solutions to strengthen care and in finding new funding sources.

Following the reforms and policy changes is a key strategy, so we can position for more physio-led models of care to address health service challenges. This includes stronger investment in public funded physiotherapy to increase the coverage of preventive health services in Australia.

We ensure an equal focus to Primary Health Network (PHN) product offerings and strengthened model design including exploring the close links between mental health and physical health outcomes as an integral part of the value package.

In addition, partnerships PHNs offer an almost untapped opportunity for members and a core focus area for our team in building relationships.

## What can you do? Get to know your PHN.

The Primary Health Networks (PHNs) are key to supporting the viability of an integrated service model that targets chronic disease, mental health and aged care. Their policy remit is to help meet the primary healthcare needs of Australians through locally commissioned health and wellbeing services. They are also key to supporting more viable models in enabling stronger access to services in rural and remote areas.

The APA is working hard to build and strengthen relationships with the PHNs nationally and significant work is occurring and being led by our President, Scott Willis. We also encourage members to connect with their PHNs locally to ensure you and your practice are across opportunities.



## Steps to joining

Members can find their local PHN [here](#).

From there, just register for updates in the 'connect with us' tab or similar so you can join your community and be kept across opportunities.

## I'm in, what next?

The PHN model itself is a little different and we are supporting members in this space. The funding streams are targeted, in addressing unmet service need, are tendered through a commissioning approach. Locally commissioned health and wellbeing services offer significant opportunities and we're working with each PHN to promote physio-led solutions.

**Here's a sample of current opportunities:**

[Deliver physical group therapy in Residential Aged Care Facilities](#)

[Low Intensity Mental Health Services Tender Now Open \(Western Vic PHN\)](#)

[City of Gold Coast Tender for Medical and Allied Health Services](#)

## Webinar opportunity

### How are your tender writing skills?

A commissioning environment calls for solid tender writing skills and this can act as a barrier for some.

To support members with their tender writing skills, the APA is offering a free webinar 'How to write a tender – Government funding opportunities' on **Thursday 27 May** at the following local times:

Webinar times		
VIC, TAS, NSW, ACT, QLD: 7pm	SA, NT: 6.30pm	WA: 5pm

This online presentation is being delivered by two of the best in the business – Jennifer Doggett and Kelly Dargan.

Both have built a strong reputation as health policy experts and offer strong tender credentials.

The session will showcase opportunities for physiotherapists to obtain government funding while helping to address some of Australia's greatest health challenges.

This is a great opportunity for members to get across the essentials of what is a coveted skillset to ensure your next tender is a winning one.

[Register now](#)

# NDIS Independent Assessors inquiry

The Policy team has worked with the Disability, Neurology and Paediatrics National Groups to contribute to the Joint Standing Committee on the National Disability Insurance Scheme inquiry into Independent Assessments (IA). With the invaluable contributions of the National Groups, the APA submission – which is available on the committee's website under submission #235' – calls on the government to immediately cease the implementation of independent assessments tools into NDIS planning.

We have also published a position statement on this issue available on the APA's website. The publication of the position statement was supported by a media release and distributed on APA's social media channels.

Engagement with the Joint Standing Committee secretariat is ongoing to secure an invitation to one of the upcoming inquiry's public hearings.

Currently, people entering the NDIS need to get reports from multiple health providers of their choosing to assess their NDIS eligibility.

The proposed mandatory independent assessments would be conducted by NDIS-appointed healthcare professionals using standardised tools in the plan review process, which determines participants' NDIS supports and budget.

The concern expressed across the disability sector is that it is very difficult to assess a person's full and complex support needs based on a brief interview using standardised tools looking at capacity, not disability.

The government's IA proposal will lock out physiotherapists with specialist clinical expertise from making assessments of their patients.





The proposal also ignores the essential relationship between a patient and their physiotherapist, which is fundamental to contextualise the impact of disability on an individual.

The APA recommends that the government immediately ceases the implementation of IA until a valid and independent study can be carried out to assess the risks of such measures.

The APA further recommends that the government directs the NDIA to work in partnership with people with disability, move to a co-design approach, and consider the alternative model put forward by Professor Bruce Bonyhady AM in his [submission](#) to the NDIS consultation.

**Further details:**

- [Joint Standing Committee on the National Disability Insurance Scheme inquiry into Independent Assessments](#)
- [APA Position Statement](#)
- [APA Media Release](#)

## NDIS Workers Screening Checks delay addressed

On another NDIS related issue, the Policy team, with contributions from the National Groups, wrote to Ministers Reynolds, Ruston and Robert to alert them of the dramatic impact that delays in processing NDIS Workers Screening Checks have on patients in needs.

While the APA supports the recent introduction of the checks, the delays in implementation impacts our members' capacity to provide care for their patients and puts jobs at risk.



## Digital health

The APA have recently collaborated with the Australian Institute of Health and Welfare (AIHW) to develop a Digital Health Audit to better understand the digital habits of physiotherapists. This work is a part of a project being undertaken by the AIHW to develop a National Primary Healthcare Data Asset. The APA were approached to take part in this project due to our large member base and as we have previously engaged on other digital projects with the AIHW.

The audit will capture information on the types of digital technology being used and will enable the mapping of the physiotherapy digital ecosystem. The data captured will assist the APA in our advocacy work and enable us to best support our members in the changing digital healthcare landscape.

**Further details:**

[Digital Health Audit](#)

## Reconciliation Action Plan



As a part of our ongoing reconciliation journey the APA has commenced working on our next Reconciliation Action Plan (RAP). The first meeting of our RAP Working Group, chaired by National President Scott Willis (pictured), was held in April.

The RAP Working Group consists of members and staff including Chair of the Aboriginal and Torres Strait Islander Health Committee (ATSIHC), Mick Reynolds (pictured below, bottom centre), Honoured Member Marilyn Morgan (pictured below, bottom left) and APA CEO Anja Nikolic.



# Submissions

The APA Advocacy team, working with our National Groups, have produced a number of important submissions recently. These include:

## NDIS Autism Consultation

The APA has provided policy input to the National Disability Insurance Agency's guidance for reasonable and necessary funding of early interventions for children on the autism spectrum. While we support the core principles as outlined in the 'Interventions for children on the autism spectrum' paper and the core aim to enable supports to build the child and family capacity in daily activities and everyday settings, we outlined a number of concerns in our response.

First and foremost, the funding levels for autism early intervention, as proposed in the consultation draft, place unrealistic expectations on families to implement therapy at home. We support the need to promote evidence-based practice within the NDIS and support families to be in a position to make informed decisions on the interventions they engage in, however the level of funding must be reflective of the needs of the child and the family and must have a level of flexibility to change at times of need through the lifespan.

Further, in ensuring the intervention is adapted to need, a focus on targeted responses through a multidisciplinary approach enabling different therapies, or therapy combinations at different stages of development, is required. Enabling flexibility in policy design to apply the required treatment factors – type, duration and intensity – is also essential.





## Mental Health and Suicide Prevention inquiry

Our submission to the [Select Committee on Mental Health and Suicide Prevention](#) outlined the important role of physiotherapy in mental health and the transformational change required to incorporate physiotherapy in mental health and suicide prevention strategies. The APA called for investment in:

- public health messaging to improve the understanding of the link between physical pain, mental health and pain management
- expanding multidisciplinary mental health teams that offer diverse skills and expertise, and
- formalising of the role of physiotherapy in addressing the physical wellbeing of people with mental health conditions from across the lifespan.

## Australian Health Practitioner Regulation Agency (Ahpra) and the Physiotherapy Board of Australia

The APA is committed to supporting members on matters related to the National Law and their registration. We continue to engage with the Physiotherapy Board of Australia to discuss topics of interest and develop education and support for members.

We recently had the opportunity to provide submissions on topics related to Ahpra and the National Law, these include to:

- The Senate Community Affairs References Committee on the Administration of registration and notifications by Ahpra and related entities under the National Law
- Ahpra on the revised regulatory principles for the National Scheme
- The Health Chiefs Executives Form on the *Health Practitioner Regulation National Law Amendment Bill 2021*.





AUSTRALIAN  
PHYSIOTHERAPY  
ASSOCIATION

[australian.physio](http://australian.physio)