



South Australian

# HEALTH AND WELLBEING STRATEGY

2020 – 2025



Government  
of South Australia

SA Health

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# MINISTER'S FOREWORD

I am pleased to release the South Australian Health and Wellbeing Strategy 2020 – 2025.

Health and wellbeing touches everyone – we are all health consumers, whether as an individual patient, family member, local community or part of the health industry or workforce. Every interaction with a health service influences our ability to manage our own health and wellbeing. We trust that health services and programs will be available when we need them. We expect well-trained, highly competent and dedicated professionals will deliver these services.

This strategy is part of the new direction for South Australia's health system, which includes the establishment of 10 Local Health Network (LHN) Governing Boards to deliver services tailored to their local communities, and the creation of Wellbeing SA to lead community-based health and prevention services for all South Australians.

It is a long-term strategy that will guide how we align and balance our immediate priorities with a future vision of health and wellbeing, focusing on statewide health priorities over the next five years and beyond to 2030. To ensure the system is better prepared for the future, detailed service level planning will be undertaken by each Local Health Network, SA Ambulance Service, Drug and Alcohol Services, SA Dental Service and Statewide Clinical Support Services.

Importantly, it recognises the importance of health care provided by the many private, non-government/not-for-profit organisations and volunteer agencies who are our partners in delivering health services and programs across South Australia. In articulating the future priorities of the system, it also identifies focus areas that support the planning of other health service providers in the private and non-government sectors.

I am very encouraged by the feedback received from the public, health workforce, other government and industry stakeholders. The strategy reflects extensive consultation and the genuine enthusiasm and support for the new direction we are taking.

The South Australian health system was once renowned for the design and early adoption of innovative practices across clinical, service and system management and this plan seeks to reinvigorate the drive towards innovation and excellence in pursuit of a vision of the best health for all South Australians.

**Hon. Stephen Wade MLC**

Minister for Health and Wellbeing

# CHIEF EXECUTIVE'S FOREWORD

I am very proud to present the South Australian Health and Wellbeing Strategy 2020 – 2025 (the strategy) which outlines our key focus areas for development of our health system to ensure its ongoing relevance for the people of South Australia.

Building on the previous SA Health Strategic Plan 2017 – 2020, this new direction focuses on delivering better public health services to the community. It supports greater accountability at the local service level, delivery of more out-of-hospital services and greater emphasis on investing in the right areas to reduce the pressures on the health system.

To achieve our goal to keep people healthy and refocus our energy on prevention, promotion and early intervention initiatives, we must expand our capacity to support people with out-of-hospital services in the community, increase our already-strong partnerships with different government agencies, the non-government and private sector providers.

Digital health, data and technology are crucial to enable change to the way people participate in their health care and to propel innovation into practice and delivery. Supporting our system with 21st century skills provides SA with the opportunity to lead the way in data utilisation to drive clinical decisions and new technologies to improve our processes.

Developing simple to use digital tools for patients like computer-based treatment programs, app-based care and the ability to schedule their own appointments to better suit their lifestyle, will improve access into the system and alternative options for diagnosis, treatment and ongoing follow-up. Remote monitoring and surveillance will allow people to receive treatment in their own homes.

Many people have been involved in developing the strategy, and I want to thank all the individuals and organisations who volunteered to be part of the consultation. It will be important to continue to work collaboratively with stakeholder organisations, priority groups and individuals as we move forward.

We will actively support new and emerging health technologies, devices and other innovations. We will participate in activities with a view to minimising the time taken to translate research breakthroughs into everyday practice, giving people access to the best care as soon as it is proven to be safe and effective and better than existing approaches.



At the same time, we are committed to maintaining the 'human touch' that is embodied in our staff by supporting our workforce to deliver top quality care, while others focus on the future needs of our population and strategies to reduce inequalities in health outcomes.

The Health and Wellbeing Strategy 2020 – 2025 signals our intent to rebuild community trust in our system. We have heard and understood what patients, consumers and our workforce have told us and this is an emphatic response that demonstrates how we will reset the way we work. This is a long-term strategy but we are committed to a flexible, agile implementation that will be measured and adapted to ensure we deliver on our commitments to all South Australians.

**Dr Chris McGowan**

Chief Executive, Department for Health and Wellbeing

# INTRODUCTION

**The most important asset for South Australians is their health and wellbeing. Protecting and promoting good health and preventing illness is vital to support people to live healthy lives, ensuring they can participate and be productive, as individuals, families and carers in the workplace and in our communities.**

Many factors influence good health and wellbeing, including local, state and national government policies and programs that extend beyond the reach of the health system.

Our services are part of a broad and complex system, with multiple service providers and funding sources collectively supporting the delivery of services and care to South Australians. At times, the complexity of the health system can be challenging to understand and navigate. Access to reliable health information, health facts and health services needs to improve.

The extensive consultation that contributed to this plan unearthed some basic truths about how people view the health system and how it supports their desire to improve and maintain their health and wellbeing.

We heard that –

- > the current health system focus on ill health is short-sighted and inconsistent with the approach people take in their everyday lives
- > some have lost trust in the health system over time and regaining this trust is imperative.

SA has some specific challenges. Our population growth is low, but there is significant growth in certain geographical areas. We have an ageing population, which will require the health system to adapt how we deliver services to older South Australians. For example, ensuring our hospitals are ‘dementia friendly’ to provide the most appropriate health care needs and supporting older people to recover at home, with more service options in the community.

Dementia, cancer, cardiovascular disease, mental illness, chronic diseases like diabetes and respiratory conditions are challenges that require us to design services now to meet those future needs. Improving access to preventative programs will help people maintain a healthy weight, manage obesity and deal with emerging health issues related to poor nutrition. We must also focus on developing solutions that are more effective to reduce the incidence of domestic abuse and the resulting health and wellbeing issues for affected adults and children.

The health industry is at the forefront of science, providing opportunities to take advantage of new research and putting relevant findings into practice. The constant evolution of health care and delivery means that our workforce is continually learning, increasing in knowledge, and implementing new ways of working. We have seen improved patient outcomes from new models of care that have been developed based on innovative research outcomes, which highlights the importance of maintaining a contemporary system and workforce.

The innovative use of technology has also led to improving access to services in the last ten years, especially for people living in rural and remote SA. It needs to expand across the metropolitan area and include an expanded range of clinical speciality areas.

We must thoughtfully plan the future health system, informed by evidence and advice from experts and with ongoing contribution from consumers and the community so we can best meet the needs of all South Australians.

**Protecting and promoting good health and preventing illness is vital to support people to live healthy lives.**



# A HEALTH AND WELLBEING STRATEGY

The Health and Wellbeing Strategy is our guide to position SA's health system for the future. It provides individuals and organisations with a common foundation to build on and ways to work together effectively to stay focussed on achieving good long-term outcomes, as we continue to address daily challenges faced by a complex and dynamic system.

## WORKING TOGETHER

Governance changes from 1 July 2019, supported the establishment of 10 Local Health Network (LHN) Governing Boards, accountable to the Minister for Health and Wellbeing for delivering health care services to their respective local population and communities working as part of a health system across SA.

'SA Health' is how we describe the public health system as a whole. It includes the SA Department of Health and Wellbeing, the 10 LHNs and Statewide Clinical Support Services, the SA Ambulance Service, SA Dental Service, Prison Health, and Drug and Alcohol Services SA. This strategy has been developed in collaboration with all partners in health care in SA, including private and non-government sector services, consumer and volunteer representatives.

## NEXT STEPS

A complex system that responds to diverse health needs, as well as supporting individuals and communities, requires more than a one-size-fits-all approach. LHNs will develop their own strategic responses to meet the needs of patients, consumers and their communities, prioritising local services.

Each component of the public health system has targets, standards and budgets that must be achieved. Additionally, SA communities have high expectations that their health and wellbeing needs will be met. We will need to work collaboratively and be flexible enough to respond to changing needs throughout the life of this strategy.

To achieve the vision and goals set out in this strategy it will require a detailed implementation plan and governance arrangements to drive and monitor progress. A comprehensive suite of indicators to measure that performance will also be developed. We have a significant amount of data about system performance, but we need to improve the analysis of raw data to provide more meaningful measures.

Ongoing assessment of progress and outcomes will inform adjustments to plans, where necessary, to ensure expected delivery and outcomes are achieved.







# VISION

## **SOUTH AUSTRALIANS EXPERIENCE THE BEST HEALTH IN AUSTRALIA**

We can achieve this vision by individuals, families, our staff, other health providers and government or non-government agencies working together.

To achieve this we will work to:

- > prevent chronic disease, communicable disease and injury, and prevent exacerbation of established chronic disease
- > partner with individuals, families and communities to enhance their health and wellbeing
- > support individuals and their families through recovery
- > create healthier neighbourhoods and communities
- > respond when needed to manage acute conditions and injuries
- > assist individuals and families to adapt to changes in their health and wellbeing overtime, including at end of life
- > protect against public and environmental health risks and adapt to climate change.

We envisage a future where South Australia's health system is:

- > trusted and highly valued by all South Australians
- > recognised and respected for excellence in Australia and around the world
- > a preferred work destination for local, interstate and overseas clinicians
- > a source of learning and inspiration for health systems and workers everywhere.





# AIM

## TO IMPROVE THE HEALTH AND WELLBEING OF ALL SOUTH AUSTRALIANS

### GOALS

The goals of the Health and Wellbeing Strategy are to:

- > improve community trust and experience of the health system
- > reduce the incidence of preventable illness, injury and disability
- > improve the management of acute and chronic conditions and injuries
- > improve the management of recovery, rehabilitation and end of life care
- > improve individual and community capability to enhance health and wellbeing
- > improve the health workforce to embrace a participatory approach to health care
- > improve patient experience with the health system by positioning ourselves to be able to adopt cost effective emerging technologies and contemporary practice
- > improve the value and equity of health outcomes of the population by reducing inefficiencies and commissioning for health needs.

The aim and goals of the Strategy provide focus to drive the improvement efforts across the system and a structure to enable monitoring of outcomes.



# SA HEALTH COMMITMENT

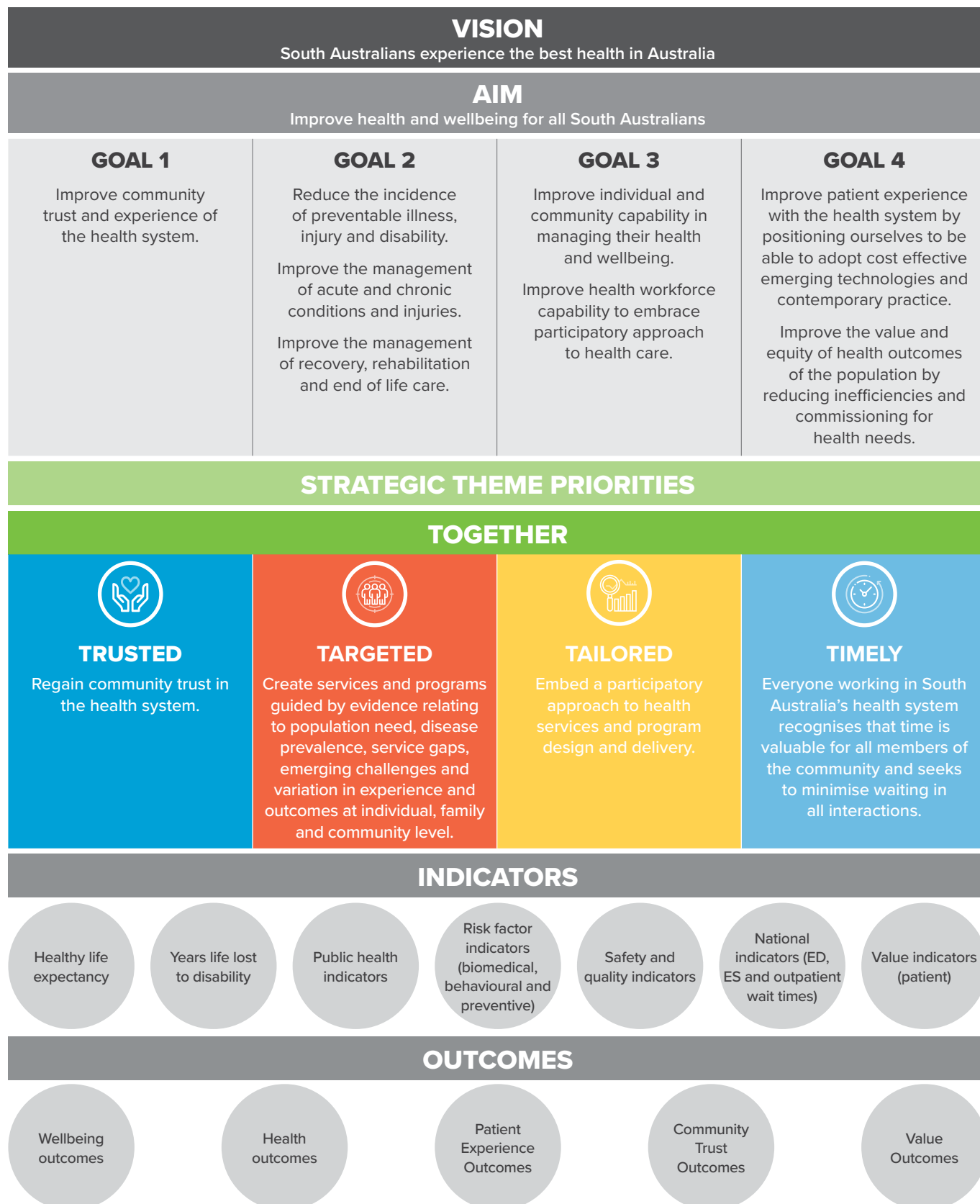


## TO MEET THESE GOALS, WE WILL:

- > Provide evidence-based treatment that is tailored to individual circumstances and delivered by well-trained and supported staff.
- > Support access to treatment and care that meets individual circumstances and is designed in partnership with each person.
- > Design services that minimise the time spent waiting to access and receive care, reducing the disruption to people's lives.
- > Fund and deliver services that are innovative, focused on prevention and self-management, accessible in the community and respond to the greatest needs of individuals and communities.
- > Ensure the delivery of safe and high-quality services to patients, families, carers and staff by designing and building systems, services, policies and procedures to minimise risk.
- > Support research, teaching and training that develop a strong workforce, now and in the future across the state, including country areas.



# SOUTH AUSTRALIAN HEALTH AND WELLBEING STRATEGY 2020-2025 SUMMARY FRAMEWORK





# STRATEGIC THEMES

The key themes that emerged early in the consultation for this strategy have remained constant throughout development. The themes provide the framework for the strategy, with deliverable actions aligned to one of the five themed areas.

The overarching theme ‘Together’ supports everyone working to protect and improve the health and wellbeing of South Australians.

The quality of the working relationship between health and wellbeing agencies is crucial to achieve positive health outcomes and meet the commitments outlined below.

## TOGETHER



*SA Health works in partnership to develop patient-centred solutions and service improvements*

We form strong partnerships, and our solutions and decisions are based on the collaborative feedback and agreement of properly informed health consumers, health professionals, local communities and broad health stakeholders

TRUSTED	TARGETED	TAILORED	TIMELY
SA Health is trusted to provide safe, reliable and high quality treatment and care	SA Health targets priority health needs and disparities with the right evidence, motivation and interventions	SA Health tailors services to meet the diverse and complex needs of individuals	SA Health optimises health and wellness outcomes delivering timely and appropriate health care
We build the trust, respect and confidence of patients, carers, families and communities through proper engagement, consultation, relationship and accountability	We understand that the best measure of our performance is bridging the gap to ensure equal opportunity to access the best available standards of health care	We integrate and balance clinical management with the personal needs, preferences and lifestyle of our patients	We enable flexible systems, processes and practice that support patients, carers and families to access the right services, in the right place, at the right time



## TOGETHER

*We recognise the importance of working in partnership with patients, consumers and other health providers to develop effective solutions, service and system improvements, together as part of the health system in SA.*

The health system is large and complex and the achievement of successful outcomes for individuals, families and communities requires smooth connections across many people, services and systems. This goes beyond the public health system to include partnerships and collaboration with non-government, not-for-profit and private health providers and other SA Government services and agencies.





## WHY IS THIS IMPORTANT?

Achieving successful outcomes requires the commitment of everyone involved to building strong partnerships and ensure health consumers, health professionals, local communities and health stakeholders are properly informed. Solutions and decisions are based on collaborative feedback and agreement.

Genuine partnerships will build workforce agility, capability, and capacity to transition the current and new service requirements.

## WE WILL:

- > Ensure DHW provides leadership and direction to the system, creating an environment where service providers can operate successfully, adopting innovative practices and approaches to meet the needs of their communities. Where possible, we will work together to determine the best response and implement at a statewide, LHN, and/or service delivery level.
  - > Support system-wide actions for working together including:
    - improving on the existing primary care sector coalition of General Practice, Aboriginal Community controlled entities, pharmacists, allied health professionals, private hospitals, private specialists, not for profit and private community based providers, to develop strategies that deliver timely first responses and co-ordinated care where required
    - develop a planned, collaborative approach to implement the strategies and evaluate the outcomes of the strategy
    - take action to reduce the carbon footprint of the health sector as part of achieving environmental sustainability in South Australia
    - reduce complexity by sharing responsibility as a health sector beginning with:
      - making the system easier to navigate for health consumers, families and communities
      - Improving the integration and co-ordination of services.
    - establish workforce development programs to support patient-led care and decision-making.
- develop a Health Workforce Strategy to guide workforce planning to:
    - build workforce agility, capability and capacity, skills to transition to new service requirements
    - identify the workforce numbers, skills and capabilities required to match health needs of future populations
    - optimise the utilisation of existing skills within the current workforce
    - support workforce participation in research activities.

## WE WILL MEASURE PROGRESS THROUGH:

- > Patient experience and outcomes
- > Partner agency experience and feedback
- > Appropriateness and timeliness of care
- > Workforce satisfaction
- > Community engagement and consumer participation



# TRUSTED

*The SA community trusts the public health sector to respond appropriately whenever they need care, treatment, advice, guidance or support to optimise their health.*

Trust in our health system has been eroded in the eyes of the community by a number of serious issues that have occurred in recent years. Errors in chemotherapy prescribing, serious shortcomings in the quality of care that was provided to residents at the Oakden facility, ongoing examples of long waits for service or elective surgery and ambulance ramping at Emergency Departments all contribute to the loss of trust in our system.

## WHY IS THIS IMPORTANT?

Lack of trust can cause people to delay seeking care, treatment or advice, putting their health and wellbeing at risk. Rebuilding trust by demonstrating improvements for our patients and the community is fundamental to achieving the best outcomes.

## WE WILL:

- > Support the newly established Commission on Excellence and Innovation to partner with clinicians, consumers and carers using research and evaluation to design high-quality, innovative and contemporary health services.
- > Clarify roles and responsibilities of LHNs and DHW in delivering this strategy, reflecting the governance arrangements that commenced in July 2019.
- > Establish processes to engage local community in the planning, design and evaluation of local services.
- > Develop strategies to establish SA Health as a trusted source of health and wellbeing information.
- > Develop innovative and contemporary ways for an ongoing dialogue between the community and the health system.
- > Develop consistent leadership capability across SA Health.
- > Develop a community and consumer engagement strategy.
- > Evaluate and publicly report health system performance indicators.

## WE WILL MEASURE PROGRESS THROUGH:

- > Emergency department wait times
- > Elective surgery waiting times
- > Ambulance ramping indicators
- > Community engagement indicators
- > Patient experience and outcome indicators





## TARGETED

*SA's health system, guided by evidence-based best practice, provides services and programs that meet population needs and disease prevalence, addressing service gaps and the variation in experience, and health outcomes.*

To achieve excellence, health systems need to respond to emerging challenges, remain at the forefront of relevant science and evidence, and be aware of changes in the quality of patient outcomes and experiences. We must be able to respond quickly and appropriately to the needs of individuals and families, knowing where, when and how to support the most vulnerable in our community.



## WHY IS THIS IMPORTANT?

The ability to continuously incorporate new evidence into practice and adopt emerging technologies will allow the health system to improve the overall health and wellbeing of the population while addressing the very specific needs of those population groups who currently experience poorer than average health outcomes.

## WE WILL:

- > Develop services to meet the diverse needs of expanding populations in both metropolitan and country areas.
- > Develop an Aboriginal Health Care Framework.
- > Complete the realignment of services between regions to achieve agreed self-sufficiency levels.
- > Develop strategies to improve access to country hospitals and services including improving capability through innovative use of workforce and technology, improving patient-flow between metropolitan and country facilities, and expanding cancer services.
- > Support the newly established Wellbeing SA to co-design and develop better integrated services and programs across the care continuum and life course including increasing:
  - services within the community to bridge the gap between primary care and hospital care to achieve a balanced suite of services and programs in the health system
  - focus on health promotion, prevention, screening and early intervention activity
  - high value programs focussed on risk factors relating to development of chronic disease, tailored to meet the needs of specific groups.
- > Develop a comprehensive, fully integrated response to address overweight and obesity at both population and individual level.
- > Develop a comprehensive data asset that supports the workforce and system to understand the value of services and programs to drive ongoing improvement in design and delivery of services and programs.
- > Expand and enhance specialist palliative care and end of life services as part of an integrated ambulatory model of care.
- > Support implementation of the Mental Health Services Plan 2019 – 2024 across SA.
- > Develop a Women's, Child and Youth Health Plan to meet the future needs of the population.
- > Develop integrated service plans targeting:
  - urgent care
  - dementia – including behavioural and psychological symptoms of Dementia
  - cancer
  - cardiovascular disease include stroke
  - diabetes.
- > Expand programs and services in community settings to support ageing well.
- > In partnership with other responsible agencies, improve health services for prisoners.

## WE WILL MEASURE PROGRESS THROUGH:

- > Access to services and treatment
- > Equity in service provision
- > Risk factors, healthy life expectancy and the prevalence of chronic disease
- > Hospital utilisation and potentially preventable hospitalisation
- > Quality and safety
- > Patient experience and outcomes
- > Timely availability of clinical information indicators



# TAILORED

*SA's health workforce are informed by evidence and tailor the care, treatment, advice, guidance and support they offer in accordance with the expressed wishes of the individual, family and community with whom they are working.*

Rapid uptake by the community of advances in digital technology across a range of service industries including banking and air travel has generated an appetite in consumers for greater flexibility, convenience and control over their interactions with service providers. Tapping into this preference offers many opportunities to drive improvements in the service provided and as a consequence, improvements in experience and outcomes for patients.

## WHY IS THIS IMPORTANT?

For the health workforce, recognising health is an asset that helps people live good lives, while understanding the impact care and treatment can have on achieving that must be carefully weighed against the benefits. Side effects, treatment time and the implication for patient goals provide the lens through which these decisions can be considered.

Patient experience and outcomes are improved when they can operate as equal and responsible partners in managing their health and wellbeing. Ensuring people are supported to do that is an important part of integrating informed, patient-led decision-making into the health system.

## WE WILL:

- > Establish workforce development programs on ways to increase patient and consumer participation.
- > Introduce digital technologies to improve the health system interaction with the community, including booking appointment times, increase ways for people to communicate with their health care providers/teams, share biometric and other data gathered by wearable devices, have remote consultations with their health care teams, deliver prescribed medicine and access trusted information on condition specific management.
- > Plan for early evaluation and response, supporting uptake of appropriate translational health research and medical breakthroughs.
- > Provide better long-term care for patients with a disability and improve links with the National Disability Insurance Scheme (NDIS).
- > Develop focussed responses for Aboriginal health priorities relating to cancer, diabetes, heart disease, stroke and injury with a particular focus on prevention and delivery of timely interventions.
- > Address the causes of disproportionate ill-health to improve health for people from culturally and linguistically diverse backgrounds.
- > Improve how we respond to the impact of domestic abuse.
- > Support translation research on motivating people to make positive behaviour change for their health. Understanding how people approach diet and exercise, consume alcohol, or use illicit drugs will inform service design and tailored individual care.

## WE WILL MEASURE PROGRESS THROUGH:

- > indicators for access, equity and patient experience
- > outcomes for priority populations
- > uptake of evidence based technology within service models
- > wait times for services





# TIMELY

*Everyone working in the SA health system recognises that people's time is valuable and seeks to minimise waiting in all interactions for all members of the community.*

Waiting for access to services, assessment of need, decisions about care or transfer between components of the system is frustrating for patients, can adversely affect outcomes and is costly to the system.

## WHY IS THIS IMPORTANT?

Reduction in waiting at all points of care improves outcomes for patients, reduces cost releasing funds which can then be allocated for other uses either in health or for other government priorities.

## WE WILL:

- > Develop integrated ambulatory care models in partnership with primary care providers – commencing with priority areas: respiratory, diabetes, care for older people, child development and obesity.
- > Co-design improvement projects with health consumers, community, health industry and stakeholders to:
  - create alternative patient pathways to more appropriate care to help reduce incidents of ambulance ramping
  - improve patient flow pathways to reduce unproductive days of stay in hospital
  - prevent inappropriate emergency department presentations
  - support primary care providers and residential care facilities to manage patient care in place.
- > Continue improving the function and patient experience of outpatient clinics and other consultation services.
- > Continue to improve wait times for elective surgery.

## WE WILL MEASURE PROGRESS THROUGH:

- > Wait times for services
- > Time spent in hospital
- > Ambulance ramping indicators
- > Patient experience and outcomes indicators



# KEEPING PEOPLE HEALTHY

The health system must refocus energy on maintaining good health through prevention, promotion and early intervention initiatives; supporting better health and wellbeing of individuals, communities and populations.

Nationally, almost one third of conditions are considered preventable or potentially avoidable. Activities and lifestyle that risk health and wellbeing, like poor diet, low exercise levels and smoking, contribute significantly to chronic disease. These risks can be reduced or avoided if the right supports and services are available. Individual wellbeing is affected by socioeconomic, cultural and environmental factors, affecting both our ability to make healthy lifestyle decisions/ choices and also impact feelings of happiness, fulfilment and how we generally feel about ourselves.

Small changes make a big difference. In SA, 63 percent of adults and 27 percent of children are overweight, we can improve individual health if just six percent of people maintain their current weight and 14 percent of people who are overweight lose 3kgs.

Accident and injury contributed to 13 percent of the 1.5 million hospital attendances in SA from July 2014 to June 2016. Half of these were accidental and potentially avoidable.

Wellbeing SA has been created to refocus our efforts on keeping people healthy by embedding health and wellbeing actions and initiatives throughout the health system in a coordinated way, addressing the major contributors to disease, conditions, disorders and health inequalities. Wellbeing SA will identify and implement priority prevention activities and initiatives across the journey and duration of a person's care and across their life. It will contribute to the prevention of avoidable hospital admissions by focussing on improving and extending community-based care, and promote wellbeing and prevention managing risk factors for individuals.

Wellbeing SA will lead significant system change, shifting the emphasis from treating illness to promoting physical, mental and social wellbeing, and supporting people to lead healthier lives.

## FUTURE READY – HOW TO MEET EMERGING HEALTH CARE NEEDS

The development of this strategy included extensive consultation with our key stakeholders and consumers, a review of population needs and analysis of the demand and supply of health services. This multidimensional approach has identified emerging themes that we have to address to achieve our vision and the SA Health commitment to action.



## RESPONDING TO NEED

### PRIORITY POPULATIONS

The state of our health is not the same for everyone. Particular population groups including people of different cultures, people experiencing social, economic and environmental (including location) disadvantage, people of diverse lifestyles, people who are older, and people with disability, their families and carers, have poorer health outcomes. Accessing services is often difficult and they are not always tailored to meet the complex needs of individuals and communities. Raising awareness and recognition of risk factors impacting equitable service provision for people with poorer health status and the limitations in accessing care, is an important first step in addressing these disparities.

Differences in health status and health outcomes are more prominent in Aboriginal people and people living in rural and regional areas.

Life expectancy for Aboriginal people is on average eight to ten years less than for the non-Aboriginal population, with these differences more marked in remote and very remote areas.

Homelessness is related to much poorer health outcomes due to exposure to the elements of environment and weather, poor nutrition, infection, mental illness, substance abuse and violence.

Older people often present to hospital with a range of complex, chronic and acute conditions, but hospitalisation for older people poses a risk of falls, condition deterioration, malnutrition, hospital acquired infections, medication errors and isolation.

In developing and improving solutions that are designed to meet the needs of priority populations, SA Health will align with specific solutions, service plans, and specialist solutions already underway that tap into expertise involved in supporting priority populations. For example, in response to key issues that impact health equity for country residents, SA's Rural Medical Workforce Plan 2019 – 2024 aims to improve recruitment, training and development of health professionals needed to deliver country health services. Specialised responses to priority populations must be part of the overall effort to support improved health outcomes.

The Mental Health Services Plan for 2019-2024 includes specific solutions for those living with mental illness.







## POPULATION NEED AND DEMAND

Over the next five years, population growth in SA will be highest in the peri-urban and Northern Adelaide Local Network (NALHN catchments). This will require investment and realignment of services to those areas so people can access care close to their home.

Ageing and a higher proportion of people living alone will continue to place greater demand for health services. People aged between 65 and 75 years are twice as likely to be admitted to hospitals as the rest of the population – and those aged over 85 years are more than five times likely to be admitted to hospitals. Those aged over 85 years account for less than three percent of the population but 15 per cent of hospital bed days. The relationship between high levels of disadvantage and hospital admissions is also well established.

Expansion of service capability in the northern suburbs of Adelaide and more recently in the country areas close to Adelaide has helped meet the needs of the growing populations in these areas, while expansion and upgrades to the metropolitan hospitals has helped to address growing demand. Contemporary design solutions ensure that new and refurbished infrastructure supports safe, high quality service delivery and promotes healing.

This demonstrates the importance of a planned approach to develop health infrastructure, which will be part of Wellbeing SA's development of alternative care pathways and out-of-hospital models of care.

## CHRONIC DISEASE

Half of the Australian population and many South Australians live with one or more chronic diseases, while many others are at risk of developing these conditions. Risk factors like poor diet and nutrition, and limited physical activity can increase with age and/or low social economic status.

In Australia:

- > 29 percent of people aged 65 years and over have three or more chronic diseases.
- > 47 percent of the potentially preventable hospitalisations in Australia in 2014-15 were due to five chronic conditions – chronic obstructive pulmonary disease (COPD), heart failure, cellulitis, kidney and urinary tract infections, and diabetes complications.

In South Australia, we have the:

- > highest prevalence of diabetes
- > second highest prevalence of CVD
- > third highest prevalence of COPD nationally.

Service Plans will guide how we respond to specific conditions that impact on health and wellbeing.

## CLIMATE AND ENVIRONMENTAL CHANGE

Climate change represents a number of risks for the health system to manage. Severe hot weather events and changes in the prevalence and type of vector borne [pathogens and parasites] and other new diseases pose challenges. While responding to the health impacts of climate change, as a system we also need to reduce the environmental impact of our business.



**Nearly half of all South Australians are likely to have experienced symptoms of mental illness at some point in their lives.**

## MENTAL HEALTH

In any year, almost one in five South Australians aged over 16 years are likely to experience mental health symptoms, including anxiety, depression, mood or substance use disorders. Nearly half of all South Australians are likely to have experienced symptoms of mental illness at some point in their lives.

Mental illnesses are the third leading cause of disease burden in SA, behind cardiovascular disease and cancer, but for young people under 24 years mental illnesses are estimated to be the leading cause of burden of disease. It is a leading health disparity for Aboriginal people in SA.

The Department for Health and Wellbeing Mental Health Services Plan for 2019 – 2024 builds on the core strategies in the SA Mental Health Strategic Plan 2017 – 2022. This includes promoting community education and early intervention, improving services and care, and providing strong leadership and governance. The new plan will also guide the commissioning and delivery of state government funded services with outcomes to benefit service users, and enable a skilled and dedicated workforce to deliver best practice treatment, care and services.

## CANCER

A diagnosis of cancer affects every aspect of an individual's physical, social, economic, personal and family wellbeing.

The risk of developing cancers increases with a combination of age, genetics, weight and poor nutrition, exposure to sun, carcinogens or chemicals, and other environmental factors.

In SA:

- > 63 percent of cancers diagnosed in 2016 occurred in people aged over 65 years
- > new cancer diagnosis rates have decreased by 1.1 percent per year in the period 2013 to 2017, rates are projected to continue to decrease in 2020
- > the top five cancers recorded in 2016 for females and males were colorectal, lung, breast and prostate
- > country residents account for the highest proportion of new cancer cases in the state, representing approximately 30 percent of all new diagnoses.



**More than one-third of cancers are preventable by making healthier choices about our diet and lifestyle, not smoking, reducing alcohol consumption, and moderating exposure to the sun.**

The five-year relative survival rate in South Australia has increased from 48 percent in 1984-88 to 67.3 percent in 2012-16.

Investment in health promotion and education can support closing the gap on preventable cancers.

Greater investment is needed to provide better and more accessible services in the community and acute health settings to enable early diagnosis, timely treatment and ensure the most effective treatments are available to everyone.

A Cancer Service Plan will be developed to guide service development over the next five years.

## DEMENTIA

Dementia is currently the second leading cause of death for Australians and since 2016, it has been the leading cause of death for Australian women.

Related conditions including Alzheimer's, vascular dementia, frontotemporal dementia and Lewy body disease are predicted to overtake heart disease as the leading cause of death for both men and women in the future.

Dementia largely occurs in people aged over 65 years with the risk increasing rapidly with age. It is the single greatest cause of disability in Australians over 65 years and the third leading cause of disability burden overall.

In 2018, an estimated 26,443 people were diagnosed with younger onset dementia in Australia; this is expected to rise to 29,375 people by 2025, and 42,252 people by 2056.

**Some risk factors are manageable through lifestyle changes or medical treatments, including cardiovascular conditions, diabetes and high cholesterol.**

Families often notice the signs and symptoms of dementia a few years before a diagnosis is clinically confirmed. There is no cure for dementia, but early awareness and diagnosis means the change to address nutrition, activity, safety and therapy that helps maintain quality of life for longer can be made.

A Dementia Service Plan will be developed to guide service responses over the next five years.





## END OF LIFE CARE

As our population ages and the rates of disease increase, so does the need for quality end of life care (EOLC).

Many South Australians do not receive the level or type of care that fully represents their choice about where and how they want to die.

Over the four years from 2012/13 to 2016/17, palliative care provided in Australian hospitals increased by 25.6 percent, but dying in hospital is not the preferred option for most palliative patients and for most Australians.

SA had the highest rate of palliative care related hospitalisations in Australia at 38.5 per 100,000 people in 2016-17.

The quality of clinical care provided by our acute hospitals at the end of life is excellent, but it is not always provided in an environment with access to palliative specialist expertise, or in a setting that meets the spiritual, cultural and therapeutic needs of the person, their loved ones and family.

The best outcome is to meet the clinical needs of patients while providing treatment that represents the personal preferences of each person's physical, spiritual, cultural, psychosocial and environmental choices.

To support personal choices, we need clinicians with palliative care expertise as part of a well-integrated end of life care program that is available across hospitals, hospices, homes and residences.

## DOMESTIC ABUSE

Domestic abuse is the most significant health risk to Australian women aged 15-44 years, and is the leading contributor to death, disability and illness with key health impacts including anxiety, depression, suicide risk and drug use. Aboriginal Australians are particularly at risk, with up to 32 times the rate of hospitalisations and twice the rate of partner homicides being experienced. Across Australia, one in six women and one in 16 men have experienced physical and/or sexual violence by a current or previous partner since age 15. Violence results in the admission of eight women and two men to an Australian hospital each day.

Raising staff awareness across all services is vital to early identification and intervention to prevent further abuse, harm and death. We must also raise community awareness to report abuse, the high utilisation of hospital and health services, and improve understanding of immediate, longer-term health impact.

Strategies to develop include:

- > education and training of the workforce
- > design and delivery of prevention programs informed by evidence
- > coordinated responses with other relevant agencies.



## BEST POSSIBLE CARE

### SAFETY AND QUALITY OF CARE

**Generally, South Australians get the healthcare that they need, and “their overall experience in hospital is positive.”**

But, in recent years, SA has had a high rate of adverse events related to the risks from being in hospital or the performance of the hospital relating to:

- > acquiring an infection
- > having a fall
- > being re-admitted after a surgical procedure
- > experiencing delays in treatment time
- > unreasonable waiting times for elective surgery, a follow up appointment or check-up.

Increasing access to safety, quality and performance data will support clinicians, health managers and planners with the right information they need to identify issues, inform strategies to address them and deliver better patient outcomes.

Advancing tools and access to more sophisticated health data reveals the true strengths and weaknesses across our system.

Good health data will:

- > foster new competencies
- > identify areas to invest in
- > highlight areas for operational improvement and performance
- > better engage with health consumers, stakeholders and industry
- > form solid partnerships
- > enhance the delivery of best quality health services to patients.

Work has commenced in this area but needs to be accelerated.

An interactive forum launched in 2018 allows users to track clinical outcomes, performance and consumer experience. The Quality Information and Performance Hub – ‘QIP Hub’ – presents data about clinical outcomes and system performance in a clear, uncomplicated way. It’s available across SA Health, alongside other quality, performance and emergency department dashboards that will be further expanded.





### TIMELY TREATMENT – EMERGENCY DEPARTMENT AND ELECTIVE SURGERY WAIT TIMES

In 2018/19, only 58 percent of patients were seen on time in SA metropolitan emergency departments, and the average waiting time has increased from 38 minutes to 50 minutes over the last five years.

For elective surgery, 88 percent of cases were seen within the clinically recommended time. However, only 90 percent of category one cases were seen on time, lower than all other states except Tasmania.

Continued emphasis will be on improving these outcomes through development and implementation of a range of specific strategies.

### THE APPROACH TO CARE

Patient centred care is no longer enough. We must progress to support full and equal partnerships between individuals and clinicians to enable joint decision-making improving and maintaining health and wellbeing. This is a fundamental change that will require the development of a strong partnership model to support treatment options that provide more choices for patients tailored to their lifestyle and personal circumstances.

Being a partner in care is a significant cultural shift for our system, for clinicians, and for patients and consumers. We will develop strategies to support clinicians and consumers to:

- > engage to build relationships and trust
- > share decision-making
- > establish effective communication, transparency, information sharing and being a responsive team member
- > empower health consumers to make informed choices about care, including at the end of life, set personal health goals, and achieve lasting lifestyle change.



## BETTER CONNECTED HEALTH SYSTEM AND INTEGRATED CARE

Demand for health services is increasing, challenging us to provide high quality services to meet the population health needs, as health care costs continue to rise. In SA since 2013/14, emergency department presentations increased on average 2.1 percent each year, while inpatient activity increased on average 1.4 percent each year. The SA population growth rate is only 0.9 percent per year.

There is a disconnect between primary care delivered by general practitioners, and tertiary care provided by state funded public hospitals, and there can be difficulties in navigating services within and between hospitals.

Integrated care relies on connecting people to the right service, in the right place at the right time. To achieve this, we must strengthen partnerships between service providers and across public, private and community sectors, improving communication and processes to streamline care delivery. Adopting available technologies that enable patients and teams of service providers to share information, communicate remotely, and coordinate availability, meetings and appointments. This will particularly assist in an improved patient experience where complex care is required.

## ADOPTING NEW TECHNIQUES, TECHNOLOGIES AND APPROACHES

To empower consumers, we must embrace technology and make it part of changing the approach to care and place genuine value on patients' time. Low cost, fast mobile connectivity and smart devices can revolutionise health care in the same way it has reformed how we purchase, bank and socialise. Rebalancing the patient-provider relationship is a cultural shift for some clinicians and there is a strong push to support our workforce to adopt change.

Finding alternative ways to provide and deliver healthcare can create efficiencies in the way we work. Digital technology like wearables and biosensors can:

- > help manage risk factors
- > detect disease
- > monitor chronic disease.

Tools and applications (Apps) can track personal health, and digital platforms can also provide opportunity for telemedicine and care coordination.





**To keep on top of emerging technology, new treatment and research breakthroughs that challenge our existing methods and assumptions, we need to incorporate ‘horizon scanning’ into our routine and develop a culture of continuous innovation, learning and improvement.**

Telehealth reduces travel time for patients, especially those living in rural and remote areas and can provide rapid access to urgently needed specialist care and advice. Smart devices can more thoroughly review medical notes, assisting early diagnosis, improved automation, decision-support-pathways and personalised medications.

Patients benefit significantly, allowing them to:

- > make appointments online at a time convenient for them
- > complete doctor or hospital administration details prior to visit
- > use at home diagnostic kits and electronically send results to their doctor
- > communicate with clinicians, via SMS and videoconferencing
- > order prescription repeats using mobile apps
- > use a wearable device that connects to your smartphone and sends information to clinical treatment teams.

SA Health is already collaborating with world class health and medical research precincts and dedicated researchers to minimise the time it takes to translate research breakthroughs and innovations into everyday practice. Advances in gene therapy and stem cell therapy were, until recently, considered a science fiction future and are now part of successful and accepted patient treatments.

To keep on top of emerging technology, new treatment and research breakthroughs that challenge our existing methods and assumptions, we need to incorporate ‘horizon scanning’ into our routine and develop a culture of continuous innovation, learning and improvement.

## BETTER USE OF INFORMATION

The diversity and volume of health and wellbeing data is expanding rapidly – clinical notes, prescriptions, medical imaging, pathology, pharmacy, patient records, sensory monitoring, social media platforms and posts, web pages, news media and medical journals can inform treatment and care options.

The more we learn from population health data, the better the outcomes for individual South Australians. The monitoring and analysis of health and wellbeing characteristics and profiles supports predictive modelling to help identify the type of people who will benefit from preventive services and specific lifestyle changes.

In such a data-rich environment, we need to find ways to better use the available information. SA Health will develop a comprehensive strategy that will ensure more reliable health data, evidence based clinical practice and organisational connectivity all in support of methods of delivery, access and interaction with consumers and more options for self-management, diagnosis and treatment programs.

## SUPPORTING THE WORKFORCE

SA Health's workforce is the most valuable asset, and planning for a future workforce to address emerging health care needs will require innovative solutions to build on existing capabilities. We are not alone – globally, health sectors are experiencing unprecedented change in the working environment in order to adapt and succeed. A health workforce strategy and plan will be developed to build workforce agility, capability and capacity and skills to transition to new service requirements, including:

- > support for clinicians to develop relationships with their patients
- > specific training to help staff adjust to new clinical practices, technologies and devices
- > leadership development, with emphasis on shaping cultural change
- > ensure research continues to be a core component of SA Health business and patient care.





# ENABLERS

To achieve the vision, aim and goals outlined in this strategy, we must ensure the right supports are in place. This long term strategic direction in itself is a key enabler, providing the many partners in health care delivery in SA with the same understanding of our intention, opportunities and challenges.

Our workforce, technology and information assets, the physical infrastructure and equipment are the core enablers that will ensure our health system can successfully deliver the priorities in this strategy.



# ENABLERS

## WORKFORCE SUPPORT

More than 40,000 people work in the state funded health system in SA, the vast majority are in frontline health care roles. Many more are employed through the private and not-for-profit sectors. This workforce is the most important asset and the long term sustainability of health care depends on people who are capable and ready to deliver the services and programs that South Australians need in the coming decades.

The Department of Health and Wellbeing will provide leadership and direction across the system to support this workforce development, creating an environment that allows service providers to operate successfully, and adopt innovative practices and approaches to meet the needs of their communities.

### WE WILL:

- > Develop a Health Workforce Plan to support the strategy, ensuring ongoing provision of the right roles at the right time, into the future.
- > Design a management and leadership capability strategy to develop our future leaders.
- > Develop skills and capability in clinical practice improvement and design activities.
- > Design programs to guide clinical workforce change to a consumer partnership/ participation culture of care.
- > Support workforce participation in research activities.

### WE WILL MEASURE PROGRESS THROUGH:

- > Workforce culture analysis
- > Workforce satisfaction surveys
- > Training package utilisation
- > Workforce availability

**This workforce is the most important asset and the long term sustainability of health care depends on people who are capable and ready to deliver the services and programs that South Australians will need in the coming decades.**







**Availability of comprehensive clinical information is essential for care delivery, research and evaluation.**

## TECHNOLOGY, DIGITAL AND INFORMATION ASSETS

Availability of comprehensive clinical information is essential for care delivery, research and evaluation. We need to build on the early steps towards a national Electronic Medical Record, a patient administration system and develop a 'smart' interactive online system that's simple for consumers and health practitioners to use.

### WE WILL:

- > Develop a Digital and Information Strategy to maximise SA Health's capacity to use and share clinical information, adopt effective new technologies rapidly and adapt quickly as the future unfolds.
- > Enable the community to interact with their own health care online by deploying easy-to-use digital and associated technologies to make convenient appointment times, communicate with their health care providers/teams, share information including biometric and other data gathered by wearable devices, have remote consultations and prescribed medicine delivered, and access trusted information on condition specific management.
- > Develop a comprehensive data asset which supports the workforce and system to understand the value of services and programs to drive ongoing improvement in design and delivery of services and programs.

### WE WILL MEASURE PROGRESS THROUGH:

- > Timely availability of clinical information
- > Clinician access to information indicators
- > Patient and partner agency utilisation indicators



# ENABLERS

## PHYSICAL INFRASTRUCTURE AND EQUIPMENT

Our hospitals and health care facilities where patients receive services can have specific design features that support good health outcomes and improve access for the community when located strategically. An ongoing program of capital works continues to support the health system.

### PLANNED WORKS INCLUDE:

- > New Women's and Children's hospital.
- > Metropolitan hospital redevelopments for:
  - Lyell McEwin Hospital – expansion of the emergency department and undercover carpark
  - Modbury Hospital – expanded acute surgical unit, high dependency unit, extended emergency care unit, acute short stay general medical unit, palliative care unit
  - The Queen Elizabeth Hospital – new emergency department, operating theatres and day surgery, medical imaging, outpatients and rehabilitation unit.
- > New Specialist Older Persons Mental Health Facility.
- > Reactivating the Repat Health Precinct.
- > Country hospital redevelopments:
  - upgrades to aged care facilities at Snowtown, Kingston
  - improved dialysis services at Gawler, Whyalla, Mt Gambier
  - upgrade surgical facilities at Yorketown.
- > New aged care facility at Strathalbyn.
- > Construction of a new ambulance station at Strathalbyn.
- > Construction of new medical retrieval base at Adelaide Airport.

### WE WILL MEASURE PROGRESS THROUGH:

- > Project delivery within agreed timeframes and budgets
- > Post commissioning evaluation in line with project objectives and expected patient outcomes
- > Infrastructure sufficient to manage the volume and type of demand



## FUTURE HEALTH NEEDS

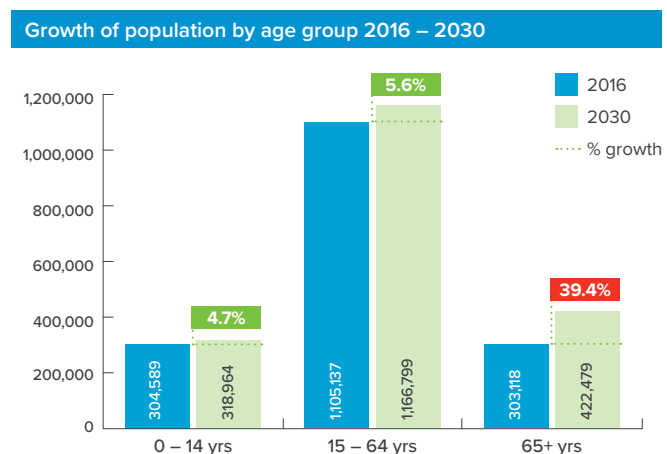
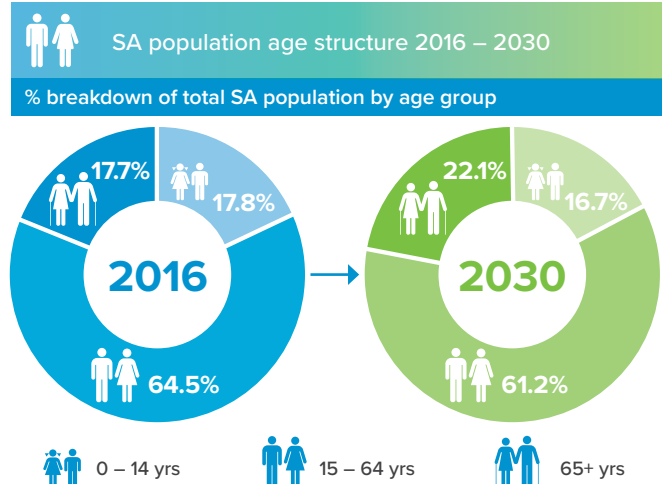
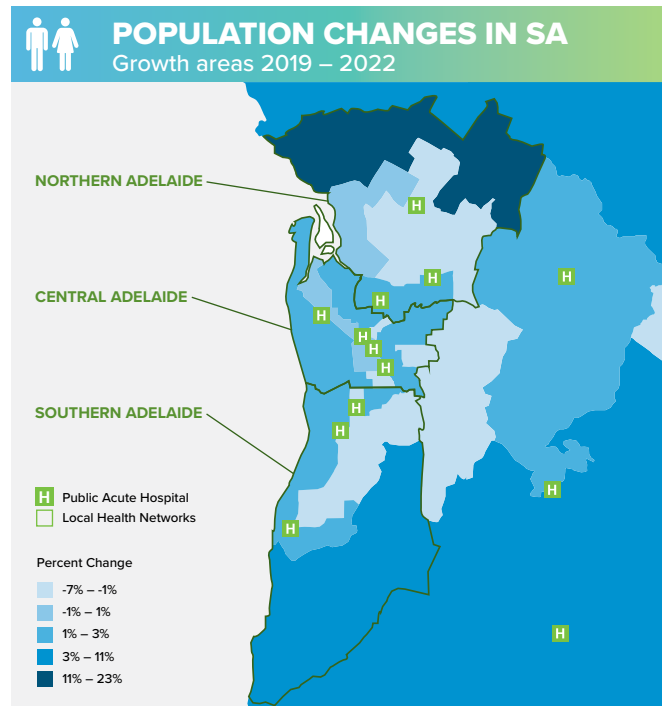
Changes in the population and age profile are indicators of future health needs. Although population growth in SA is slower than the national average, in the next few years, there are expected increases in population numbers particularly in the outer northern metropolitan area and continued growth particularly in the peri-urban areas and the thoroughfare between the city and Port Adelaide.

As people age, there is increased potential for health to deteriorate, resulting in increasing use of the health system. An increase in programs and services aimed at supporting people to age well is a key focus area.

We expect an increase in the number of children (0-14 years) and working adults (15-64 years) although the growth in these age groups is much smaller. Focussed strategies on both the first and last 1,000 days of life have shown positive health outcomes for both of these population groups.

Development of a Women's, Child and Youth Health Plan for SA will be an early priority, aiming to complete the plan by end-of-June 2020.

The age profile of the SA Aboriginal population differs significantly from the non-Aboriginal population with more than 33 percent under the age of 15, compared to 17.8 percent of the non-Aboriginal population for the same age group. Aboriginal people under the age of 25 make up 53 percent of the Aboriginal population. This very different population demographic requires targeted planning and service delivery to meet the specific health needs and address significant health inequalities experienced by Aboriginal people. This requires a specific focus and understanding of the variations in health outcomes experienced by different groups and the service models and programs that are shown to achieve best outcomes.



## CHRONIC DISEASE PREVALENCE

Many South Australians continue to live with one or more chronic diseases, while many others are at risk of developing these conditions. The lifestyle that we choose is leading to increased risk factors for developing chronic disease. Diet is an important aspect for healthy living, but less than 50 percent of the SA population eat the recommended daily intake of fruit and only 7.3 percent of the population consume the recommended daily intake of vegetables.

Poor diet increases the risks of high blood pressure and cholesterol and South Australians have higher rates than the national average. Other impacts of the limited dietary intake of fruit and vegetables are also being identified with a very recent localised study in southern Adelaide finding the re-emergence of scurvy.

Poor diet is leading to high overweight and obesity rates in SA, where 62.7% of adults and 23.5% of children are living in the unhealthy weight range and this is increasing.

**The lifestyle that we choose  
is leading to increasing  
risk factors for developing  
chronic disease.**





# DEVELOPING THE HEALTH AND WELLBEING STRATEGY 2020 – 2025

## HEALTH SYSTEM PLANNING

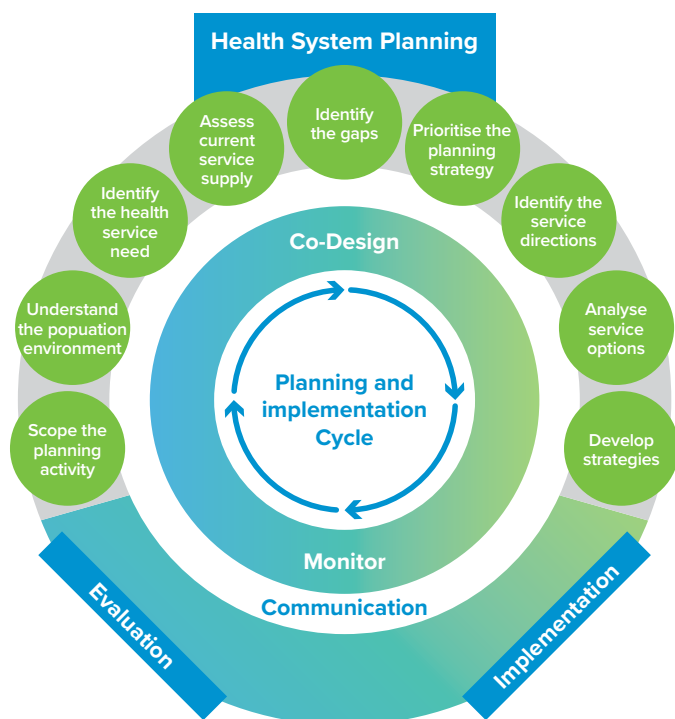
Healthcare is complex, multi-dimensional and dynamic. It can change from one day to the next, there are continuously emerging treatments, research, technology and discovery providing something new hour by hour. Health system planning requires us to look much further ahead, predicting what we will need in the next five to 10 years and what has to happen now to be prepared for that future.

This approach supports organisations to be better prepared to address emerging health trends and other factors that are central to contemporary healthcare: the changing health needs of the population; emerging clinical evidence; changes in technology; projecting future service need; prioritising the allocation of resources; benchmarking and improving efficiency and providing safe and sustainable services.

Health system planning takes a population health approach, using data and trends to predict population needs and works to balance between programs that protect and promote good health, prevent illness and the services required to meet the varying health needs of the community. It specifically aims to improve the health status of the SA population while safeguarding equity, fairness of access and responsiveness.



## THE HEALTH SYSTEM PLANNING PROCESS



## OUR PLANNING PRINCIPLES

- > Our people and partners are actively engaged in improving the health and wellbeing of all South Australians.
- > Consumers and communities are at the centre of our decisions to inform the design, and provision of health and well-being services.
- > Evidence and need informs clinical service design and delivery.
- > Innovation, research and teaching is valued and supported.
- > Diversity is recognised, planned for and catered to.
- > Value considerations drive decisions and investment is sustainable.
- > Outcomes are measured and responded to.
- > Services are designed to deliver access and opportunity for all.
- > Our current and future workforce is motivated and supported to provide excellent services to their community.

Figure 1 – Health Service Planning Process. Adapted from *Guide to health service planning: version 3* (p. 15), by Queensland Health, 2015, Queensland. Copyright 2015 by the State of Queensland (Queensland Health).

## CONSULTATION PROCESS AND PARTICIPANTS

The SA Health and Wellbeing Strategy is the outcome of extensive consultation with the health sector, patients, consumers and the public of SA.



## PERSONAL EXPERIENCES, REAL STORIES – SUMMARISING COMMUNITY FEEDBACK

In developing the strategy, we were supported by many people who generously shared their personal experiences. These experiences reinforced the ultimate purpose of the strategy: to deliver on the vision of the best health and wellbeing for all South Australians.

During the consultation, a number of themes were frequently raised, including:

- > Wellness and prevention rather than treating illness
- > Responsibility of individuals in maintaining good health, as one responder told us:

*“A priority is the ‘beliefs of health consumers’ that the system will just fix them, I think there should be more education about the ‘system’ and how consumers better utilise them and not rely on it to ‘save’ them all the time.*”

- > Concerns over ramping at our hospitals and the lengthy wait times for elective surgery.
- > Mental health and its related concerns within the health care setting was featured prominently.
- > Several priority groups must be identified and recognised individually within the strategy and have their specific health needs addressed.
- > The unique issues health consumers may have with access to services, especially for those who were outside of the metropolitan areas, was repeated throughout the feedback.

### SPECIAL ACKNOWLEDGEMENT

The feedback that has informed the strategy took time, careful thought and effort from many individuals and groups invested in the process. These experiences helped illuminate gaps and identified opportunities to improve the way the health system works. Those who shared their very moving personal stories have driven the deliverable priorities identified for the coming years.



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\*NB resources are not in-text referenced.

For more information

**Department for Health and Wellbeing**  
**[sahealth.sa.gov.au/HealthandWellbeingStrategy](https://sahealth.sa.gov.au/HealthandWellbeingStrategy)**

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