

# Submission to the Targeted Consultation on Healthy Tasmania – The Next Five Years

## Response to online consultation questions

### ***1. Considering the proposed priorities and outcomes – are there any gaps? Do you have suggestions for other priorities or outcomes? (Max 250 words)***

Stroke Foundation strongly supports each of the priorities and outcomes included in the Strategic Plan Overview, and suggests the inclusion of an additional outcome, 'Tasmanians live as long as possible in good health'. Stroke Foundation supports the focus on preventing disease across the lifespan, acknowledging that risk of disease changes as we age. The risk of stroke increases with age, the incidence doubling with each decade after the age of 45 years, with over 70 percent of all strokes occurring after the age of 65. This is particularly relevant for Tasmania, which has the oldest population in Australia, and whose population is ageing faster than any other state or territory.

We know that 80 percent of strokes can be prevented, and primary stroke prevention remains the most effective means for reducing the incidence and burden of stroke in Australia. Health checks, which assess an individual's disease risk, provide an effective early detection process, and enable primary care providers to identify, intervene and reduce an individual's risk of developing stroke. Tasmanians aged 45 years and above (30 years and above for Aboriginal and Torres Strait Islander Tasmanians), can undergo a Medicare-funded absolute cardiovascular risk assessment to determine the probability they will develop cardiovascular disease, including stroke, in the next five years, based on a range of factors. Tasmanians identified as high risk for stroke, or any other chronic disease, must be supported to take action to address this risk, either through medical management, including medication (where appropriate), or lifestyle-related behaviour modification.

### ***2. What other actions could we undertake to achieve our outcomes? (Max 250 words)***

Stroke Foundation strongly supports each of the actions included in the Strategic Plan Overview, and suggests the inclusion of an additional action, 'Tasmanian Government investment in prevention is increased'. A realignment of health funding in Tasmania, to ensure a greater investment in prevention, will be essential to achieving the outcomes included in the Strategic Plan Overview.

Australia spends approximately \$2 billion on prevention each year, equivalent to \$89 per person. This is significantly less than equivalent Organisation for Economic Co-operation and Development (OECD) countries such as Canada (\$334 per person), the United States (\$322 per person) and the United Kingdom (\$154 per person) spend on preventive health. Yet we know that for every dollar invested in prevention there is a \$14 return.

As part of the Draft National Preventive Health Strategy 2021-2030, the Australian Government has committed to increasing investment in preventive health to 5 percent of total health system expenditure by 2030, which represents a more than three-fold increase in preventive health investment. Similarly, the Western Australian Government has committed to increasing funding for prevention to 5 percent of the health budget by 2029. Stroke Foundation strongly supports both of these targets and encourages similar commitments from other state and territory governments, including Tasmania.

Given the rates of many preventable chronic health conditions are higher in Tasmania than in other states and territories, this boost in funding for preventive health could have a significant impact on health outcomes for many Tasmanians.

### **3. *If money were no object, what bold actions might we take? (Max 250 words)***

Tasmania has the highest per capita incidence of first stroke nationally. When people are identified as high risk for chronic diseases such as stroke, it is critical there are proven, effective lifestyle modification programs, underpinned by validated behaviour change models, that GPs can refer them to. One such example is the *My Health for Life* program, an evidence-based, free, Queensland Government-funded behaviour modification program, for people at high-risk of developing a chronic disease.

*My Health for Life* has been developed using the validated Health Action Process Approach (HAPA) model for behaviour change. Stroke Foundation is partnering with the Healthier Queensland Alliance and the Queensland Government to deliver this program, which enables chronic disease to be detected early, helping participants to reduce their risk of developing stroke, heart disease and type 2 diabetes, and avoid unnecessary hospital admissions, delivering savings to the health system. To date, 16,658 Queenslanders have enrolled in the program, 10,620 participants have completed the program, and over 210,000 chronic disease risk assessments have been undertaken. Importantly, program participants have demonstrated sustained improvements in outcomes such as waist circumference, and the ability to meet Australian physical activity guidelines.

Stroke Foundation has developed a similar behaviour modification program focused on survivors of stroke, called *Living Well in our Community*. This program, which is ready to be rolled out across Tasmania, addresses risk factors that are common to many chronic diseases, and as such will benefit the many survivors of stroke with comorbid conditions such as diabetes and heart disease.

### **4. *If we could do only three things to achieve our outcomes over the next five years, what should they be? (Max 250 words)***

1. Tasmanian survivors of stroke, and those who have an identified need to change health behaviours to reduce their risk of a first stroke, find appropriate, evidence-informed interventions currently unavailable. Stroke Foundation's *Living Well in our Community* program will deliver education, and support participants to build motivation, set goals, plan, and implement and track health behaviour changes, empowering them to stay well, lessen their risk of developing stroke or recurrent stroke, and avoid unnecessary hospital admissions.
2. Only 13 percent of Tasmanians are able to recall two or more signs of stroke unprompted, and only 36 percent with stroke are arriving at hospital within the 4.5-hour window for clot-dissolving treatment. More work must be done to raise awareness. Tasmanian Government investment in a *Stroke Foundation F.A.S.T. Multimedia Education Campaign*, including television, radio and social media advertisements, as well as F.A.S.T messaging on public transport, will ensure more Tasmanians are able to recognise a stroke when it occurs, and understand how vital it is to call an ambulance.
3. Tasmania has the highest proportion of people aged over 55 living alone, a known risk factor for loneliness and social isolation, which have been linked to premature death and poor physical and mental health. Tasmanian Government investment in *social prescribing programs*, where GPs

connect at risk patients to navigators, who help them access appropriate supports and community services in their area, could be an effective way of addressing the loneliness and social isolation faced by older Tasmanians.

**5. How might all stakeholders work better together to achieve our outcomes? (Max 250 words)**

As discussed in our response to Question 6, Stroke Foundation believes that the development of an Action Plan, which will provide a clear and comprehensive summary of how the Strategic Plan's priorities and actions will be realised over the next 5 years, will be vital to the successful implementation of the Strategic Plan. We also believe that an important component of this Action Plan should be a Stakeholder Engagement Framework, outlining how Healthy Tasmania will work with all of its stakeholders to deliver on their goals, as well as the outcomes outlined in the Strategic Plan.

In order for Healthy Tasmania to successfully implement its new Strategic Plan, it will need to engage with stakeholders from a wide variety of sectors, including all levels of government, non-government and community organisations, health, sport, research and academia, media, education, transport, industry, workplaces, and local communities. Seeking input from all of these stakeholders during the development of the Framework will be important, as it will establish shared expectations of the collaborative process.

The Framework should outline the principles that will guide Healthy Tasmania's stakeholder engagement, including a commitment to open and direct engagement, and actively listen to stakeholders, as well as an appreciation and acknowledgement of stakeholders' expertise, experience and input. In this context, Healthy Tasmania, acting as a knowledge broker, has the opportunity to facilitate relationships, and collaborative opportunities, between organisations that may never have engaged with each other before.

**6. Considering the 'government and community partnership' approach, what sort of governance model could support the outcomes we want to achieve? (Max 250 words)**

We anticipate that the Minister for Health will oversee the delivery of the Strategic Plan and will be responsible for monitoring its progress, while the Tasmanian Department of Health and Human Services will be responsible for overseeing the implementation of the reforms detailed in the Strategic Plan, with support from other agencies where relevant.

Stroke Foundation recommends the formation of an independent *Healthy Tasmania Strategic Plan Taskforce*, with a broad-based membership and supported by funding for the 5-year term of the Strategic Plan. In line with the Strategic Plan's 'government and community partnership' approach, it is critical the Taskforce includes consumer representation, as well as representation from key Tasmanian health, non-government, and community sector organisations, such as the Stroke Foundation. The taskforce should:

- Facilitate effective implementation of the Strategic Plan, and coordinated policy development and implementation across all levels and portfolios of government.
- Play an important role in the development of an Action Plan, which will provide a clear and comprehensive plan on how the Strategic Plan's priorities and actions will be realised over the next 5 years, and will be vital to the successful implementation of the Strategic Plan. This will

include the development of specific, measurable, achievable, relevant, and time-bound targets for each of the Strategic Plan's outcomes.

- Provide the Department of Health and Human Services with evidence-based advice, identifying the most effective and relevant preventive health programs, that should be funded.

### **7. *What do you think are the most important features of a new governance model for the new Healthy Tasmania Strategic Plan? (Max 250 words)***

Stroke Foundation believes that the most important feature of a new governance model for the new Healthy Tasmania Strategic Plan, will be a *Healthy Tasmania Strategic Plan Taskforce* with expert knowledge of the Tasmanian health and community sectors, including an in-depth understanding of the strengths and unique capabilities of specific organisations within these sectors.

An excellent example of this is the Healthier Queensland Alliance which has been contracted by Queensland Health to deliver the *My Health for Life* program. The Alliance consists of Stroke Foundation, Diabetes Queensland, National Heart Foundation, Ethnic Communities Council of Queensland, Queensland Aboriginal and Islander Health Council, and the seven Queensland Primary Health Networks. Importantly, each of these organisations brings very specific knowledge, experience and skills to the program. For example, Stroke Foundation is the lead agency for the program's risk assessment stream of work, as it had been delivering the community risk assessment program, Know Your Numbers for eight years prior to the introduction of *My Health for Life*, and therefore brought significant experience in managing the risk assessment process. The Queensland Aboriginal and Islander Health Council on the other hand, supports the program's engagement with various Aboriginal and Islander organisations throughout Queensland, as well as the training of Aboriginal and Islander program facilitators.

The arrangements between each of the organisations are structured through subcontracts, with annual budgets and deliverables negotiated as part of the annual planning process, and dispute mechanisms in place in the event of any issues.

### **8. *How can we measure our success? (Max 250 words)***

While Stroke Foundation strongly supports the outcomes included in the Strategic Plan Overview, we believe these outcomes must be accompanied by targets. It is critical these targets are SMART (Specific, Measurable, Achievable, Relevant, Time-bound), to ensure their progress can be monitored appropriately.

National, population-wide, routine data collections and surveys, such as the National Health Survey undertaken by the Australian Bureau of Statistics, which collect state and territory level data on anthropometric, biomedical, and wider systemic factors that underpin health and wellbeing, will enable the Tasmanian Government to assess the impact of the Strategic Plan on the health and wellbeing of Tasmanians. The Tasmanian Government should undertake the next Tasmanian Population Health Survey in 2021, which would provide a picture of Tasmania's health status at the beginning of the Strategic Plan. Future surveys will help the Government measure progress.

The availability of up-to-date, quality research data on the impact of implemented preventive health programs and initiatives will be critical to the success of the Strategic Plan. To guarantee the availability of this data, it is important that monitoring and evaluation activities are built in to all new

and existing funded programs. This will enable modifications to be made as new data becomes available, facilitating the delivery of more effective and cost-effective programs, ensuring policy and funding decisions are informed by the best available evidence. This will allow the Government to build a robust evidence base from which to identify programs and interventions that offer the greatest value in the Tasmanian context.