

**Health Consumer Representative
Training Workshop
13 November, 2006**

**Jill Macandrew
Executive Director
Planning & Coordination
Department of Health &
Community Services**



Presentation Outline

- The NT context
- The Department of Health & Community Services?
- Community Engagement charter
- Current methods for consumer input within DHCS
- The future



Unique factors in the NT

- Aboriginal population
- multi-cultural population
- young population
- small population
- transient population
- remote areas
- close proximity to Asia
- broad range of career options



Demographics of the NT

NT Population

- Total 204 000
- Indigenous Total 56 875 (approx 29%)



Demographics of the NT

Darwin Population

- Total 111 300
- Indigenous Total 12 000



Department of Health and Community Services (DHCS)



November 2006



Department of Health & Community Services

- 05/06 expenditure approx \$790 million
- Staff of 4,544 FTE
- Approximately \$83 million to the non Government sector
- Negotiate with almost 200 Organisations to provide services across the NT



Challenges faced in DHCS

- diversity of clients and health conditions
- public health issues
- service delivery models
- advances in care provision
- increasing costs of health care
- increasing client expectations
- national standards and benchmarks



Aboriginal people and their health

Aboriginal health is:

- a priority of Government & DHCS
- well documented and discussed
- often sensationally/negatively portrayed

Some facts and figures:

- Aboriginal people make up 29% of the total population
- 69% reside outside the major towns
- over 50% are under the age of 20
- about 53% of the Health & Community Service budget spent addressing the issues



NT Mortality and Aboriginal people

Compared to non-Aboriginal people the mortality rate for Aboriginal people is 4x higher and the main causes of death are:

- circulatory disease **(3x)**
- respiratory disease **(6x)**
- injury **(6x)**
- diabetes related disease **(8x)**
- renal disease **(11x)**
- infections in children **(15x)**

Source: Plant A.J., Condon J.R., & Durling G. 1995, *Northern Territory Health Outcomes: Morbidity and Mortality 1979-1991*, Northern Territory Department of Health and Community Services, Darwin.



Underlying causes of morbidity and mortality in NT

- tobacco smoking
- alcohol consumption
- environmental health conditions
- poor nutrition

Source: Plant A.J., Condon J.R., & Durling G. 1995, *Northern Territory Health Outcomes: Morbidity and Mortality 1979-1991*, Northern Territory Department of Health and Community Services, Darwin.

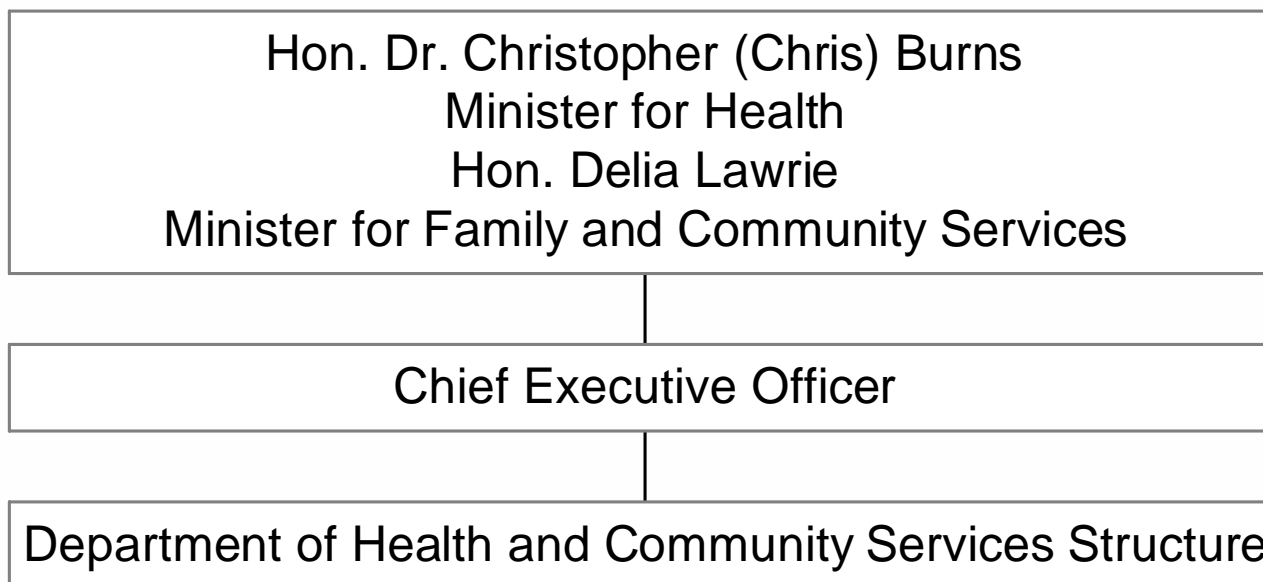


Building Healthier Communities

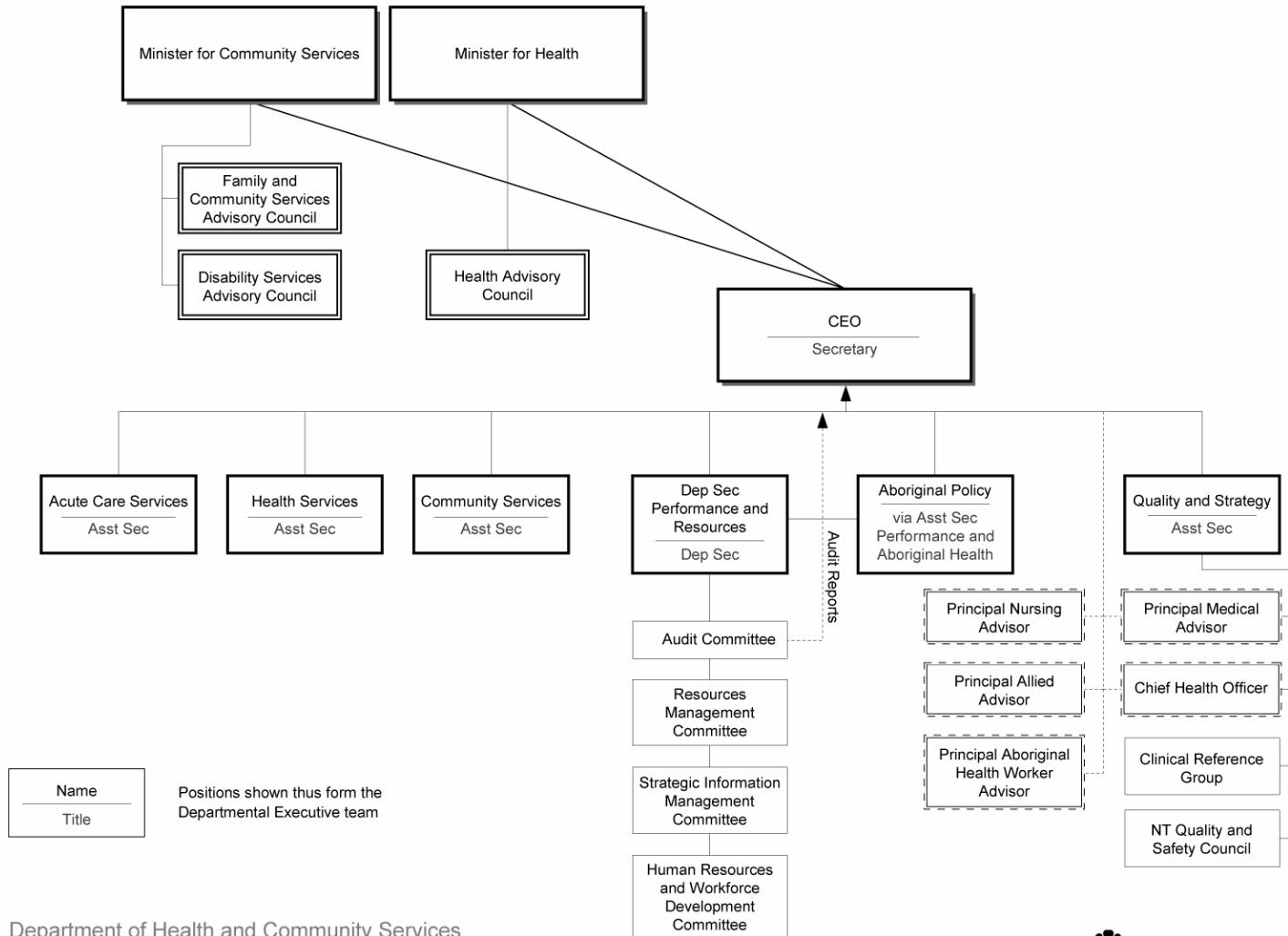
- Giving Kids a good start in Life
- Strengthening families & communities
- Getting serious about Aboriginal health
- Creating better pathways to health services
- Filling service gaps
- Building a quality health and community services
- Creating better ways of working together
- Valuing and supporting our workforce
- Creating a health information network



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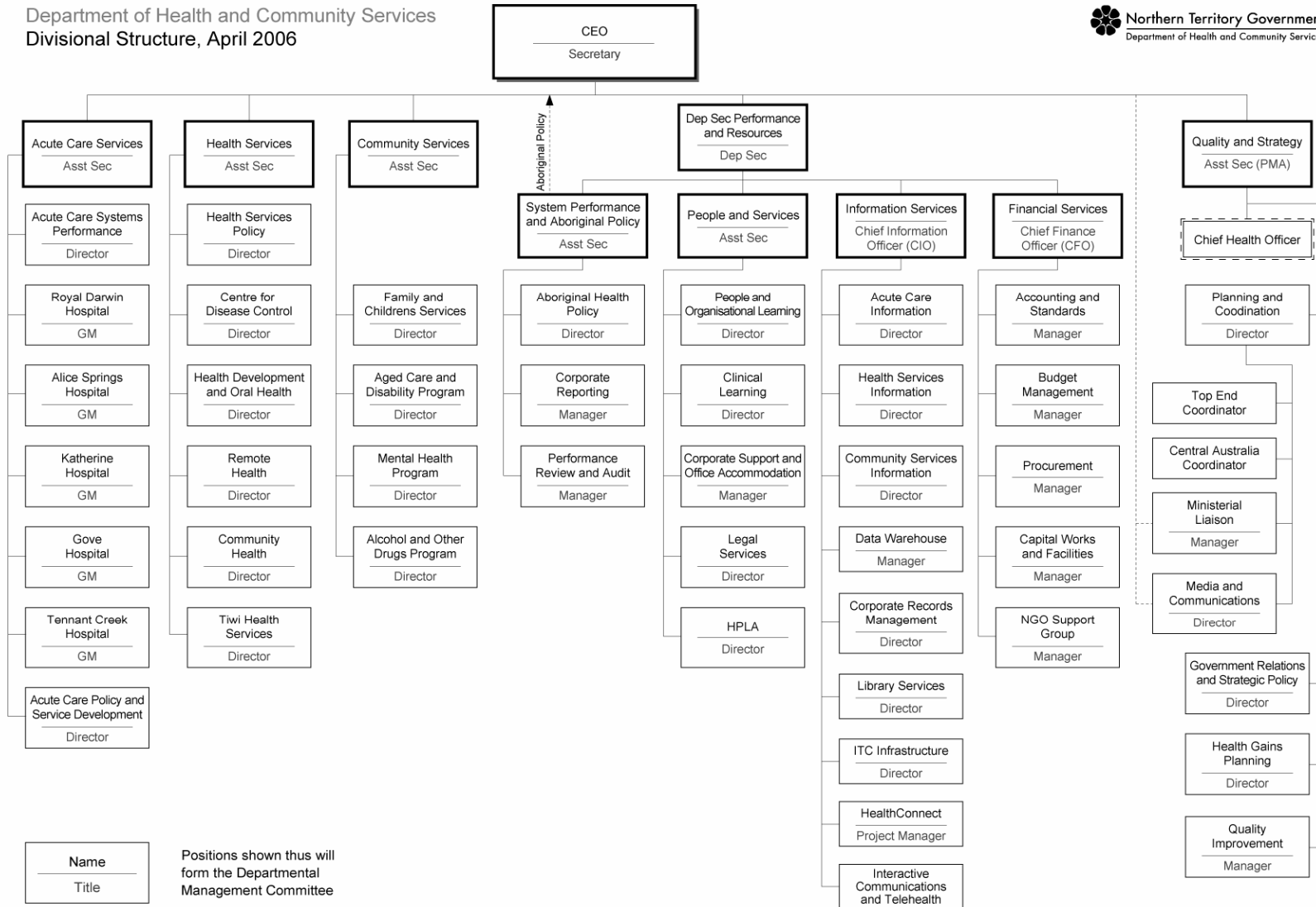
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Department of Health and Community Services
Executive and Governance Structure, April 2006

DEPARTMENT OF HEALTH AND COMMUNITY SERVICES

Department of Health and Community Services
 Divisional Structure, April 2006



Royal Darwin Hospital

- 326 beds
- Tertiary referral centre for Top End of Australia.
- Links with Flinders Medical Centre, Menzies School of Health Research and Charles Darwin University



Royal Darwin Hospital

- Has one third of all staff in DHCS
- Consumes one quarter of total health budget



DHCS Community Engagement Charter

Tools:

- Public meetings
- Focus groups
- Discussion papers
- Written submissions
- Feedback forms
- Surveys
- Media
- Newsletters



Current methods of Consumer Input

- NT Advisory Councils
- Health Professional Licencing Boards
- Ethics committees
- Various Departmental reviews



The Future

Questions???

