

2012

Health Outcomes 2004: Perspectives on Population Health, Canberra, Australia.

Amee Morgans

amee.morgans@med.monash.edu.au

Recommended Citation

Morgans, A. (2004). Health Outcomes 2004: Perspectives on Population Health, Canberra, Australia.. *Australasian Journal of Paramedicine*, 2(1).

Retrieved from <http://ro.ecu.edu.au/jephc/vol2/iss1/19>

This Conference Proceeding is posted at Research Online.

<http://ro.ecu.edu.au/jephc/vol2/iss1/19>

CONFERENCE REPORT

Health Outcomes 2004: Perspectives on Population Health. 10th National Health Outcomes Conference, 15th-16th September 2004, Canberra.

Article 990094

Amee Morgans

This conference was the 10th annual conference for the Australian Health Outcomes Collaboration, which is comprised of representatives of many state and federal health organisations. The conference was a comparatively small two day event, preceded by some pre-conference workshops which were based on concepts of population health and measures of health outcomes. The conference was public health focussed, and therefore had the results of many large scale trials and interventions presented and discussed in a friendly and reasonably informal environment.

The conference topic areas encompassed measures of population health, setting priorities for health care in Australia and identifying risk areas for monitoring. The conference was well attended, with approximately 450 delegates who attended from all areas of Australia and New Zealand. The conference had several keynote presentations, who discussed the policies of identifying public health risk and priority areas, and the impact that can be made with preventative health care priorities.

Several keynote presenters had the audience enraptured with their honest and enlightening plenary sessions, such as Professor David Currow from Flinders University who spoke candidly about the plight of palliative care patients. Another excellent keynote presentation was given by Professor Robert Cummings of Sydney University, who discussed the perils of measuring health related quality of life with imperfect measures. Professor Cummings asserted that health related quality of life is measured medically, and fails to take into account social and personal factors that affect patients, the negative impacts of which can override the supposed benefits of physiological improvements.

Most of the conference was structured to a concurrent session style, with a maximum of four concurrent sessions at any one time. Each session had 4 speakers who were able to speak for 20 minutes each. Most sessions were kept to time, which was a pleasant change from many other larger conferences. Smaller more specific topics within public health and national priority areas were discussed, which included a range of formats, such as research in progress and evaluation of interventions and public health prevention efforts.

A special session was run on New Zealand public health issues, including drug and alcohol research and modification of standard drug and alcohol prevention programs to ensure cultural sensitivities were considered. The influence of the native Maori population on health care service provision was discussed and parallels with other cultural groups were emphasised. Also included in this session were the issues facing health care in rural areas of Australia which was very informative.

Author: Amee Morgans

Prescription of medication was identified as an issue with impacts in several areas of health, including chronic disease management, mental health, depression and the role of GP's in primary care management. There were presentations on most areas of national priority health significance, including stroke, cardiac care, asthma, COPD, cancer and indigenous health.

Presentations on the use of datasets as measures of population health discussed chronic disease management and the use of electronic measures to track patient health care. The added benefits of electronic management were the ability to track and manage costs of patient care, which is in turn able to predict costs of treatments and assist planning and identify priority areas.

This conference was of great benefit in terms of understanding how health priority areas are selected and how population health can be measured and managed on a national scale. The next Australian Health Outcomes Collaboration Conference is scheduled for September 2006, and more information is available at; www.uow.edu.au/commerce/ahoc