

#10

**Portfolio: Health & Wellbeing****ISSUE: Health Staffing – Movement in budgeted FTE****Budget Statements C (Health) Pages 2 & 34****Talking points:**

- Across the Health Portfolio, staffing numbers will increase in 2019-20 by a combined total of 185 full time equivalents (FTE). The classification breakdown is:
  - Medical / Doctors 15.9 FTE
  - Nurses 77.5 FTE
  - Allied Health 40.1 FTE
  - Administration 51.5 FTE
  
- Canberra Health Services full time equivalents will increase by 138.8 in 2019-20 due to investment in new initiatives (as per the table below):

|  |              |
|--|--------------|
| ICU additional bed   | 38.8         |
| AMHU additional beds   | 13.9         |
| Increased bed base   | 32.5         |
| Fracture clinic nurse  | 3.2          |
| Maternity access strategy  | 4.2          |
| Transvaginal Mesh Review Clinic  | 0.7          |
| Dermatology staffing increase  | 1.0          |
| Rheumatology staffing increase   | 1.0          |
| Expand Mental Health Consultation Liaison service                        | 4.0          |
| RACC Inpatient services staffing increase                                | 3.7          |
| Pharmacy works and more staff  | 2.1          |
| Childhood and Gestational Diabetes Services                              | 2.8          |
| Expansion of Justice Health Services at the AMC                          | 1.8          |
| Weston Creek Region Walk in-Centre - Operational Funding                 | 10.4         |
| Police, Ambulance and Clinician Early Response (PACER) Tri-service Model | 1.0          |
| Diverting people with a mental illness                                   | 2.2          |
| Addressing the impacts of alcohol and drug dependence                    | 6.0          |
| Increased Doctors in Emergency Department                                | 2.0          |
| Comprehensive Palliative Care in Aged Care                               | 2.0          |
| Domestic & Family Violence Frontline training                            | 2.0          |
| Improving the safety of older drivers                                    | 1.6          |
| A Safer Canberra - CHS resources for fixated threat mgt capability trial | 0.5          |
| Meningococcal ACWY adolescent vaccination program implementation         | 1.4          |
|  | <b>138.8</b> |

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 TRIM Ref: GBC19/253

## BUDGET ESTIMATES BRIEF

- The ACT Health Directorate Full Time Equivalents will increase by 46.2 in 2019-20 through investment in new initiatives (as per the table below):

|  |             |
|--|-------------|
| Medical and Health Research  | 0.5         |
| Health Responses to LGBTIQ   | 0.5         |
| Implementing recommendations from the Royal Commission   | 2.0         |
| Expansion of ACT Eating Disorder Services  | 1.5         |
| Capacity Building for Mental Health Carers   | 2.0         |
| Meningococcal ACWY adolescent vaccination program implementation   | 1.0         |
| Nurses and Midwives: Towards a Safer Culture   | 2.2         |
| Co-design and Planning: Aboriginal and Torres Strait Islander Alcohol and Drug Residential Rehabilitation Facility | 1.0         |
| National Real Time Prescription Monitoring   | 2.5         |
| Surgical Procedures, Interventional Radiology and Emergency Centre (SPIRE)   | 21.0        |
| ACT Health Core IT Systems to align with the Digital Health Strategy   | 6.0         |
| Implementation of Cultural Review  | 6.0         |
|  | <b>46.2</b> |

- The increases across the Budget and out years are:

|                          | 2019-20      | 2020-21      | 2021-22      | 2022-23      |
|--------------------------|--------------|--------------|--------------|--------------|
| Canberra Health Services | 138.8        | 171.1        | 226.3        | 247.7        |
| ACT Health Directorate   | * 46.2       | * 73.1       | * 90.9       | * 105.6      |
|                          | <b>185.0</b> | <b>244.2</b> | <b>317.2</b> | <b>353.3</b> |

\* ACT Health Directorate figures include increased FTE for the ACT Health Core IT Systems initiative of:

- 6 FTE in 2019-20;
- 32 FTE in 2020-21;
- 55 FTE in 2021-22; and
- 77 FTE in 2022-23.

- Calvary Public Hospital FTE's are not counted in the overall ACT Government FTE count (above). The additional FTE likely to be employed by Calvary Public Hospital as a result of the 2019-20 Budget are:

|  |             |
|--|-------------|
| Service Expansion Calvary Urology (SECU) | 3.1         |
| Additional Theatres (2)                  | 15.5        |
| Emergency Department                     | 22.8        |
|  | <b>41.4</b> |

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GBC19/253

**Portfolio:** Health & Wellbeing

**ISSUE: Basis of health funding from the Commonwealth to ACT Government**

**Talking points:**

- The ACT Government expects to receive \$423 million in Commonwealth National Health Reform funding entitlements in 2019-20.
  - This amount is higher than the Commonwealth Budget 2019-20 published figure of \$411.8 million, as the Commonwealth amount is an estimate based on available data at the time.
- Commonwealth funding to the States and Territories in respect of public hospital services delivery is based on the National Health Reform Agreement 2011 (NHRA) and the *National Health Reform Act 2011*.
  - The NHRA expires in June 2020. Negotiations for a new Agreement to secure Commonwealth funding for public health service delivery are underway.
- The national Activity Based Funding and Block Funding system, and the underlying mechanisms for the determination of this funding are expected to remain in place in the new Agreement.
  - Actual funding to the ACT Government in any year would depend on delivered activity in the ACT and its relationship to the operation of a likely National funding growth cap under the new Agreement.

**Key Information**

- The discrepancy between published Commonwealth Budget figures for public hospital funding in the ACT and ACT Government estimates is reflective of the timing of data availability, with the ACT Government having more up-to-date information.
- Although the National Health Reform Agreement (2011) expires in June 2020, ACT Chief Minister Barr signed a Head Agreement between the States and Territories and the Commonwealth on public hospital funding and health reform on 27 April, 2018.
- This Head Agreement provides the ACT Government funding certainty for the provision of public hospital services over the term 2020-21 to 2024-25.

|                                   |                           |            |
|-----------------------------------|---------------------------|------------|
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## BUDGET ESTIMATES BRIEF

- It is expected that the ACT Government will receive \$2.6 billion in funding from the Commonwealth for providing public hospital services over this period.

### Background Information

- Commonwealth funding of public hospital services under the National Health Reform Agreement (2011) (NHRA) is comprised of three parts:
  - Activity Based Funding:
    - Activity Based Funding amounts are paid at the National Efficient Price (NEP) (\$5,134 in 2019-20) against jurisdictional public hospital activity, recorded in National Weighted Activity Units (NWAU).
      - The Commonwealth is expected to contribute 44.9 per cent of funding at the NEP for public hospital activity in the ACT.
  - Block Funding:
    - Block Funding amounts are based on jurisdictions' calculations of the cost of providing certain public hospital services that are not amenable to measurement under an Activity Based Funding approach, of which the Commonwealth contributes part of the total anticipated cost.
  - Public Health Initiatives Funding:
    - This funding allocation is determined by the Commonwealth Department of Health and Commonwealth Treasury, and grows at a combination of national CPI and population growth.
- Under the NHRA, the Commonwealth provides approximately 45 per cent of efficient growth in total public hospital funding requirements. Moreover, growth in total funding to States and Territories is currently capped at 6.5 per cent per annum.
  - The ABF and Block Funding components are subject to a determination by the Independent Hospital Pricing Authority (IHPA), who validate jurisdictional data and ensures adherence to proper calculation methodologies.
  - The Commonwealth Treasurer makes the final determination for State and Territory funding allocations, and may choose alternative funding amounts than determined by the IHPA.

|                                   |                           |            |
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**ISSUE: Funding of election commitments and items in the Parliamentary agreement – summary**

**Talking points:**

- Election and Parliamentary Agreement commitments funded in the 2019-20 Budget are:
  - Medical and Health Research - \$3.000 million over three years
  - Family Assistance Fund – \$1.825 million over four years (recurrent)
  - Nurses and Midwives: Towards a Safer Culture - \$1.292 million over three years

**Key Information**

- The following election commitments remain outstanding:
  - Free vaccinations for Babies – (meningococcal B) – This has been deferred to the 2020-21 Budget.

|                                   |                       |            |
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**ISSUE: Increase in Total Health Expenses since the Labor Government in 2001**
**Talking points:**

- The following table shows the increases in total ACT Government health expenses since 2001-02. The table demonstrates a reduction in the growth percentage in recent years.

|                          | Total<br>Expenses<br>\$000's | Increase<br>\$000's | %     |
|--------------------------|------------------------------|---------------------|-------|
| 2001-02 Adjusted Actuals | 472,184                      |                     |       |
| 2002-03 Actual           | 511,892                      | 39,708              | 8.4%  |
| 2003-04 Actual           | 562,953                      | 51,061              | 10.0% |
| 2004-05 Actual           | 636,206                      | 73,253              | 13.0% |
| 2005-06 Actual           | 697,102                      | 60,896              | 9.6%  |
| 2006-07 Actual           | 762,187                      | 65,085              | 9.3%  |
| 2007-08 Actual           | 838,964                      | 76,777              | 10.1% |
| 2008-09 Adjusted Actual  | 917,112                      | 78,148              | 9.3%  |
| 2009-10 Actual           | 990,380                      | 73,268              | 8.0%  |
| 2010-11 Actual           | 1,077,582                    | 87,202              | 8.8%  |
| 2011-12 Adjusted Actual  | 1,167,062                    | 89,480              | 8.3%  |
| 2012-13 Adjusted Actual  | 1,232,682                    | 65,620              | 5.6%  |
| 2013-14 Actual           | 1,314,067                    | 81,385              | 6.6%  |
| 2014-15 Actual           | 1,401,086                    | 87,019              | 6.6%  |
| 2015-16 Adjusted Actual  | 1,497,790                    | 96,704              | 6.9%  |
| 2016-17 Adjusted Actual  | 1,561,804                    | 64,014              | 4.3%  |
| 2017-18 Actual           | 1,597,528                    | 35,724              | 2.3%  |
| 2018-19 Budget           | 1,683,201                    | 85,673              | 5.4%  |
| 2019-20 Budget           | 1,753,430                    | 70,229              | 4.2%  |

**Key Information**

- The 2001-02 and 2002-03 figures have been adjusted to account for the consolidation of ACT Health by including Canberra Hospital and ACT Community Care in 2002-03.
- The 2008-09, 2011-12, 2015-16, 2016-17 figures have been adjusted to remove the effect of the present value impact on employee provisions.

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## BUDGET ESTIMATES BRIEF

- The 2012-13 figure have been adjusted to remove the one-off impact of building write-offs.
- From 2012-13 the above figures have been adjusted to include the ACT Local Hospital Network, specifically Calvary Public Hospital, Clare Holland House, QEII and Cross Border Expenses.
- Figures do not include Territorial expenses as these are predominantly capital grants.

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**ISSUE: Movement in Total Cost and Controlled Recurrent Payments (CRP) by output**
**Talking points:**

- The movements in Total Cost and Controlled Recurrent Payments (CRP) for the 2018-19 estimated outcome and the 2019-20 Budget are significantly affected by the separation of the former ACT Health Directorate into the ACT Health .

ACT Health Directorate

- The ACT Health Directorate has been in operation for nine months in 2018-19, when compared to the 2019-20 Budgets which are full year effect.

|   | 2018-19             |                | 2019-20        |                |
|---|---------------------|----------------|----------------|----------------|
|   | Estimated Outcome * |                | Budget         |                |
|   | \$'000              |                | \$'000         |                |
|   | CRP                 | Cost           | CRP            | Cost           |
| <b>ACT Health Directorate</b>                                     |                     |                |                |                |
| Output 1.1 Improved Hospital Services                             | 45,913              | 51,933         | 48,162         | 59,240         |
| Output 1.2 Healthy Communities                                    | 61,217              | 66,305         | 64,216         | 75,635         |
| Output 1.3 Mentally Healthy Communities                           | 43,726              | 48,309         | 45,868         | 55,107         |
| Output 1.4 Continuous Improvement of the ACT Public Health System | 67,776              | 74,470         | 71,095         | 84,948         |
| <b>Total</b>  | <b>218,632</b>      | <b>241,017</b> | <b>229,341</b> | <b>274,930</b> |

*\* 2018-19 estimated outcome reflects 9 months in operation*

- The increase in CRP from the 2018-19 estimated outcome to the 2019-20 Budget (\$10.709 million) relates to nine months of operations in 2018-19 compared to a full year in 2019-20 and additional initiatives of \$9.5 million in the Budget.

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## BUDGET ESTIMATES BRIEF

- The increases in CRP and Total Costs by output include the following new initiatives:

|  | 000's |
|--|-------|
| ▪ Output 1.1:  |       |
| • Medical and Health Research  | 1,000 |
| • Nurses and Midwives: Towards a Safer Culture   | 560   |
| ▪ Output 1.2:  |       |
| • Scoping for a potential medically supervised injecting facility  | 200   |
| • Increased Provision of Naloxone  | 300   |
| • Meningococcal ACWY adolescent vaccination program implementation   | 320   |
| ▪ Output 1.3:  |       |
| • Expansion of ACT Eating Disorder Services  | 179   |
| • Capacity Building for Mental Health Carers   | 226   |
| ▪ Output 1.4:  |       |
| • Health Responses to LGBTIQ   | 87    |
| • Implementing recommendations from the Royal Commission   | 321   |
| • Supporting complex care in General Practice (mental health)  | 500   |
| • ACT Strategic Priorities for Aboriginal and Torres Strait Islander Health 2019-2028                                | 180   |
| • Co-design and Planning: Aboriginal and Torres Strait Islander Alcohol and Drug Residential Rehabilitation Facility | 300   |
| ▪ The following initiatives are treated as overheads and spread across all outputs:                                  |       |
| • Implementation of Cultural Review  | 2,500 |
| • ACT Health Core IT Systems to align with the Digital Health Strategy   | 2,860 |

|                                   |                       |            |
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**ISSUE: Summary of Rollovers – Controlled Recurrent Payments****Talking points:**

- The ACT Health Directorate rolled over \$4.258m in Controlled Recurrent Payments (CRP) from 2018-19 into 2019-20 or 2020-21. This comprises of:

| <b>CRP Rollover</b>                                     | <b>\$'000</b> |
|---|---------------|
| Healthy Canberra Grants                                 | 423           |
| Safer Families  | 598           |
| Early Planning to expand Alcohol and Drug Services      | 154           |
| ACT Pathology Laboratory Information System Replacement | 1,017         |
| Digital Solutions Capital ICT Program                   | 1,066         |
| Essential Vaccines Program                              | 1,000         |
| <b>Total</b>  | <b>4,258</b>  |

- \$1.5million has also been carried forward into 2019-20 for the implementation of the recommendations of the Workplace Cultural Review.

**Key Information**

- **Healthy Canberra Grants (Based ACT funding)**

This funding was supported in 2017-18 financial year to roll the current year projected underspend over three financial years 2018-19, 2019-20 and 2020-21. A Section 16B instrument was used in November 2018 to roll forward \$0.635m. This rollover defers \$0.212m to each of 2019-20 and 2020-21 financial years.

- **Safer Families (2016-17 New Initiative)**

There have been delays in establishing the initial funding arrangements needed to progress the Safer Families - Alcohol and Other Drugs initiative. The outcomes of this initiative due to be delivered in 2018-19, will provide the evidence-based advice needed to successfully implement the initiative in 2019-20 and 2020-21.

|                                   |                       |            |
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## BUDGET ESTIMATES BRIEF

- **Early Planning to expand Alcohol and Drug Services (2018-19 New Initiative)**

Funding was provided as a one-off in 2018-19 to identify options to address the unmet need for alcohol and other drug treatment services in the ACT. Early planning has commenced funding will be required in 2019-20 to continue this initial work.

- **ACT Pathology Laboratory Information System Replacement (2018-19 New Initiative)**

This funding relates to the implementation of a planning study that was anticipated to be completed by June 2019, however, this has been delayed requiring the funding to be carried forward to 2019-20.

- **Digital Solutions Capital ICT Program (Base ACT Funding)**

This rollover relates to two specific projects, Infection Control and the Extension of Patientrack. Infection Control has experienced delays in the procurement process while Patientrack has seen configuration delays that will push testing out until the end of 2019.

- **Essential Vaccines Program (Commonwealth Funding)**

This funding has been rolled over in order to complete the milestones contained within the Commonwealth Agreement.

|                                   |                       |            |
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HEA E01

**Portfolio:** Health & Wellbeing**ISSUE: HEA E01 – More urology services at Calvary Public Hospital****2019-20 Budget Paper Description:**

The Government will expand urology services at Calvary Public Hospital and implement a new urology model of care. This will provide capacity for additional minor day procedures and provide co-located outpatient services.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|----------|---------|---------|---------|---------|--------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expenses | 432     | 962     | 991     | 1,021   | 3,406  |
| Capital  | 2,500   | 0       | 0       | 0       | 2,500  |

**Talking points:**

- This funding will implement a new platform or Model of Care for urology services at Calvary Public Hospital Bruce (CPHB).
- This model will enable CPHB to overtime undertake most of the elective urology surgery in the territory, improving the theatre capacity at Canberra Health Services. Major elective, and emergency urology surgery would remain at CHS.
- Currently, CPHB undertakes a specific case mix of surgery that comprises mostly day-only cases. Many outpatients are seen at CHS.
- With growing demand for urology surgery in the ACT, this funding will expand CPHB's ability to provide additional urology services and to provide non- outpatient clinics, providing greater flexibility to plan urology services across the territory.

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**Key / background information**

- Without a Urology Service, CPHB's ability to increase the number of urology surgeries, complexity of surgeries and ability to provide outpatient clinics will be limited. This will in turn impact the ability to participate in providing a service to a speciality with a known, and growing demand.

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HEA E02

**Portfolio:** Health & Wellbeing**ISSUE: HEA E02 – Delivering the Weston Creek Walk-in-Centre****2019-20 Budget Paper Description:**

The Government will commence operations at the Weston Creek Walk in Centre, which is being delivered as part of the broader Weston Creek Region Community Health Infrastructure project. The Weston Creek Walk in Centre will provide faster access to care for minor injury and illnesses, and forms part of our newly-expanded network of five Walk in Centres across Canberra.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total         |
|---------|---------|---------|---------|---------|---------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000        |
| Expense | 1,946   | 2,705   | 2,887   | 2,933   | <b>10,471</b> |
| FTE     | 10.4    | 13.9    | 13.9    | 13.9    |               |

**Talking points:**

- This proposal will fund operational costs for the Weston Walk-in-Centre consistent with the operational costs for the Gungahlin WiC. The WiC is expected to be opened in November 2019.
- The newly refurbished Centre will deliver a Walk in Centre integrated with an expanded Community Health Centre focussing on nursing clinics and maternal and child health.

**Key / background information**

- The Weston Creek WiC will operate from the refurbished health facility at 24 Parkinson Street Weston. The refurbishment has commenced and is funded through 2018-19 commitments and will improve community access to acute primary health care service, relieve pressure on public hospital services.
- The Weston Walk-in-Centre is an election commitment.

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HEA E03

**Portfolio:** Health & Wellbeing**ISSUE: HEA E03 – More surgical theatres at Calvary Public Hospital****2019-20 Budget Paper Description:**

The Government will expand elective surgery capacity at Calvary Public Hospital by providing resources to support up to 250 more surgeries a year being delivered there. This is in line with Territory -wide work to distribute surgical activity more appropriately across the ACT to improve timely access to care.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total         |
|----------|---------|---------|---------|---------|---------------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000        |
| Expenses | 1,539   | 3,302   | 3,461   | 3,625   | <b>11,927</b> |
| Capital  | 640     | 14      | 0       | 0       | <b>654</b>    |

**Talking points:**

- This funding will see the commissioning of additional theatres at Calvary Public Hospital Bruce (CPHB).
- One theatre will come online in 2019-20 and the second theatre in 2020-21.
- These new theatres are a key component of creating a territory-wide health services network and will enable more elective surgery to be delivered across the ACT.
- Providing capacity to undertake additional elective surgery procedures at CPHB is partially offset by the transfer of funding from Canberra Health Services for 1 additional theatre.

**Key / background information**

- ACT Health Directorate Territory-wide Surgical Services has undertaken strategic work for surgery across the Territory, including work within specific surgical disciplines to meet the growing elective and non-elective demand for surgery in the

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public system. Theatres at CHS are approaching capacity and CPHB is able to commission up to two additional theatres to increase capacity to undertake elective surgery.

- This is in line with Territory-wide work regarding the role of CHS and CPHB in elective surgery, namely increasing the role of CPHB as a provider of elective surgery, thereby improving the capacity of CHS to undertake emergency surgery and distributing surgical activity more consistently across the Territory.

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HEA E04

**Portfolio:** Health & Wellbeing
**ISSUE: HEA E04 – Expanding the emergency department at Calvary Public Hospital**
**2019-20 Budget Paper Description:**

The Government will add more staff to Calvary Public Hospital's Emergency Department, following the completion of Emergency Department expansion works delivered through the 2018-19 Budget. This investment will support faster access to care for people on Canberra's Northside and continue to help reduce waiting times Territory-wide.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total         |
|---------|---------|---------|---------|---------|---------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000        |
| Expense | 3,021   | 6,143   | 6,352   | 6,475   | <b>21,991</b> |

**Talking points:**

- This proposal for staffing resources will support the capital expansion of the Calvary Public Hospital Bruce Emergency Department, and will enable a phased approach of the expansion.
- Rising Emergency Department presentations and an increase in population in Belconnen, Gungahlin and North Canberra regions saw the ACT Government commit to redeveloping and expanding the Emergency Department at Calvary Public Hospital Bruce, which is currently underway.
- The capacity of the Calvary Emergency Department will increase bed/treatment capacity from 39 spaces to 61 when the redevelopment is completed in the 2019-20 financial year.

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HEA E06

**Portfolio:** Health & Wellbeing**ISSUE:** HEA E06 – Expanding palliative care for older Canberrans**2019-20 Budget Paper Description:**

The Government will support the delivery of the INSPIRED program in all ACT residential aged care facilities. The program supports residential facility staff to integrate specialist palliative care into their practices, and will respond to growing demand for services that sensitively and respectfully support older Canberrans with their end of life needs.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|----------|---------|---------|---------|---------|--------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expenses | 408     | 363     | 373     | 519     | 1,663  |
| FTE      | 2.0     | 2.0     | 2.0     | 2.0     |        |

**Talking points:**

- This proposal will fund the rollout across the ACT of the INSPIRED program to improve palliative and end of life care coordination of older people living in residential aged care facilities.
- Palliative care aims to relieve suffering in all stages of a life-limiting disease.
- The demand for palliative care in Australia, including the ACT, is increasing due to the ageing of the population and increases in the prevalence of cancer and other chronic and terminal illnesses.
- The number of deaths in Australia is likely to double in the next 25 years and improving access to palliative care for people in residential aged care facilities is recognised internationally as a pressing clinical need.
- The INSPIRED program involves staff at residential care facilities receiving education, training and advice so they become confident about preparing residents for the end-of-life and providing appropriate care to patients with complex conditions and symptoms.

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
| Cleared as complete and accurate: | 24/05/2019              |            |
| Cleared by:                       | Executive Group Manager | Ext: 49392 |
| Contact Officer name:             | Gabriela Sermeno        | Ext: 49922 |
| Lead Directorate:                 | Health                  |            |
| Cleared for release               | Yes                     |            |
| Information Officer name:         | Peter Matwijiw          |            |
| TRIM Ref:                         | GBC19/253               |            |

## BUDGET DAY BRIEF

- This investment will reduce the use and costs of Emergency Department visits and hospital admissions.

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
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| Cleared by:                       | Executive Group Manager | Ext: 49392 |
| Contact Officer name:             | Gabriela Sermeno        | Ext: 49922 |
| Lead Directorate:                 | Health                  |            |
| Cleared for release               | Yes                     |            |
| Information Officer name:         | Peter Matwijiw          |            |
| TRIM Ref:                         | GBC19/253               |            |

HEA E07

**Portfolio:** Health & Wellbeing

**ISSUE:** HEA E07 – Investing in medical and health research

**2019-20 Budget Paper Description:**

The Government will boost investment in clinical research in priority health areas including cancer, type 2 diabetes, cardiology, nursing, mental health, women and children, dementia, palliative care and population health. This investment will support the delivery of high quality and appropriate health care for Canberrans in the future. It will also continue strengthening partnerships between the ACT's health care services and leading tertiary research institutions.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|----------|---------|---------|---------|---------|--------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expenses | 1,000   | 1,000   | 1,000   | 0       | 3,000  |
| FTE      | 0.5     | 0.5     | 0.5     |         |        |

**Talking points:**

- This proposal will deliver on Election commitment LAB037 – Research and Innovation Fund. The Government will invest in key health research in areas such as cancer, type 2 diabetes, cardiology, nursing, mental health, women and children, dementia, palliative care, and population health, and the ACT Government's COAG commitment to the Brain Cancer Mission.

**Key / background information**

- \$0.600 million over three years to the Brain Cancer Mission;
- \$0.800 million in 2019-20 to projects in the ACT, to build research capacity in methods and data analytics that enable high quality research to be embedded in everyday healthcare, with research results readily translated into practice for individual patient care;
- \$1.600 million (2020-21 and 2021-22) to projects that focus on research which readily translates into ongoing practice; and

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Executive Group Manager Ext:  
 Contact Officer name: Ext:  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

- Administrative expenses for the health research grants program will be met within existing resources, equivalent to 0.5 FTE.

Cleared as complete and accurate: 24/05/2019  
Cleared by: Executive Group Manager Ext:  
Contact Officer name: Ext:  
Lead Directorate: Health  
Cleared for release Yes  
Information Officer name:  
TRIM Ref: GBC19/253

HEA E08

**Portfolio:** Health & Wellbeing

**ISSUE:** HEA E08 – Supporting better healthcare for lesbian, gay, bisexual, transgender, intersex and queer Canberrans

### 2019-20 Budget Paper Description:

The Government will undertake a 12-month scoping study to consider the ACT Government LGBTIQ Strategy and its implications for health services in the Territory. This is part of the Government's commitment to being the most LGBTIQ-friendly city in Australia and delivering on the principles outlined in the Darlington Statement.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 87      | 0       | 0       | 0       | 87     |
| FTE     | 0.5     |         |         |         |        |

### Talking points:

- A detailed scoping study will consider health priorities in line with the Whole of Government LGBTIQ Strategy.
- This initiative will scope: gap analysis; identification for priority areas of focus for Health. eg. Health workforce development, data definitions and management, consideration of what best practice healthcare looks like for LGBTIQ, policy and procedure development; consideration of implementation planning; and consultation with key stakeholders including health consumers and health staff would need to be part of this process.
- At the conclusion of the scoping study a report will guide the proposed direction.

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
| Cleared as complete and accurate: | 24/05/2019              |            |
| Cleared by:                       | Executive Group Manager | Ext: 49392 |
| Contact Officer name:             | Gabriela Sermeno        | Ext: 49922 |
| Lead Directorate:                 | Health                  |            |
| Cleared for release               | Yes                     |            |
| Information Officer name:         | Marilynne Read          |            |
| TRIM Ref:                         | GBC19/253               |            |

HEA E09

**Portfolio:** Health & Wellbeing

**ISSUE: HEA E09 – Implementing the recommendations of the Royal Commission into Institutional Responses to Child Sexual Abuse**

**2019-20 Budget Paper Description:**

The Government will make a dedicated investment to respond to the recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse relating to the health sector. This will support the implementation of the *Child Safe, Child Friendly and Child Aware Framework* across all ACT hospitals and health services, in response to the Royal Commission's recommendations on keeping children safe in all institutional contexts.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|---------|---------|---------|---------|---------|--------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000       |
| Expense | 321     | 377     | 285     | 289     | <b>1,272</b> |
| FTE     | 2.0     | 2.0     | 2.0     | 2.0     |              |

**Talking points:**

- This proposal will fund the ACT Health Directorate to implement health-related recommendations for the Royal Commission into Institutional Responses to Child Sexual Abuse.

**Key / background information**

- The Government Response committed to further action on these recommendations. These include:
  - all institutions should uphold the rights of the child;
  - processes to respond to complaints of child sexual abuse are child focused; and
  - child safety is embedded in institutional leadership, governance and culture.
  - The ACT Government Royal Commission Working Group continues to provide a forum for all Directorates to collaborate on the implementation of responses to the Royal Commission's recommendation. ACTHD is working closely with CHS to ensure coordination.

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Executive Group Manager Ext: 49392  
 Contact Officer name: Gabriela Sermeno Ext: 49922  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name: Mrilynne Read  
 TRIM Ref: GBC19/253

HEA E13

**Portfolio:** Health & Wellbeing

**ISSUE: HEA E13 – Delivering better care for Canberrans with complex needs through general practice**

**2019-20 Budget Paper Description:**

The Government will co-design a program with existing GP practices to develop better integrated care pathways and improve health outcomes for people with complex and ongoing health conditions, including mental health.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 500     | 1,000   | 1,000   | 0       | 2,500  |

**Talking points:**

- The government will develop approaches to address the identified need for integrated health pathways for people living with chronic and/or complex illnesses, including people with mental illness. A pilot project will identify and test whole of system approaches to determine an effective and sustainable model of service in the ACT.
- The pilot will begin with an expression of interest procurement process seeking submissions from General Practices to outline their suitability and interest in participating in this project. Submissions from either a single practice or a small cluster of practices will be identified to participate.
- This pilot will identify, implement and evaluate a sustainable model of integrated care that builds on existing General Practitioner (GP) support programs in the ACT. It will improve health outcomes and the whole of health system coordination of care for a specific cohort with complex and/or ongoing health needs. The pilot will focus on chronic conditions which may include diabetes, chronic pain, mental illness, asthma, ageing

Cleared as complete and accurate: 30/05/2019  
 Cleared by: Executive Group Manager Ext:  
 Contact Officer name: Ext:  
 Lead Directorate: Choose directorate:  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253



(including osteoporosis and fractures), cardiovascular disease, chronic obstructive pulmonary disease and dementia.

Cleared as complete and accurate: 30/05/2019  
Cleared by: Executive Group Manager Ext:  
Contact Officer name: Ext:  
Lead Directorate: Choose directorate:  
Cleared for release Yes  
Information Officer name:  
TRIM Ref: GBC19/253

HEA E15

**Portfolio:** Health & Wellbeing

Mental Health

**ISSUE: HEA E15 – Delivering the ACT Strategic Priorities for Aboriginal and Torres Strait Islander Health 2019-2028**
**2019-20 Budget Paper Description:**

In partnership with the Aboriginal and Torres Strait Islander community the Government will implement the *ACT Strategic Priorities for Aboriginal and Torres Strait Islander Health 2019-2028*. These priorities aim to drive better health, well-being and quality of life outcomes addressing health inequalities between Aboriginal and Torres Strait Islander Canberrans and other Australians.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|----------|---------|---------|---------|---------|--------------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000       |
| Expenses | 180     | 310     | 310     | 315     | <b>1,115</b> |

**Talking points:**

- The government will implement the ACT Strategic Priorities for Aboriginal and Torres Strait Islander Health. These priorities are a ten-year initiative to drive health, well-being and life quality outcomes aligning with national strategies relating to and addressing health inequalities between Aboriginal and Torres Strait Islanders and other Australians.
- The priorities clearly demonstrate and implement the ACT Government's commitment to initiatives that increase the life expectancy and quality-of-life outcomes of Aboriginal and Torres Strait Islander peoples by improving their health, and social, emotional and cultural well-being.
- Key priorities are a culmination of community consultation
- The priorities include:
  - a community based Mental Health Nurse;

|                                   |                         |      |
|-----------------------------------|-------------------------|------|
| Cleared as complete and accurate: | 24/05/2019              |      |
| Cleared by:                       | Executive Group Manager | Ext: |
| Contact Officer name:             | Amber Shuhyta           | Ext: |
| Lead Directorate:                 | Health                  |      |
| Cleared for release               | Yes                     |      |
| Information Officer name:         | Jo Lesiputty            |      |
| TRIM Ref:                         | GBC19/253               |      |

- publishing an ACT Health Aboriginal and Torres Strait Islander Health Performance Report;
- developing a Cultural Framework to support ACTHD and CHS towards cultural proficiency;
- promoting Aboriginal and Torres Strait Islander health, social, emotional and culture well-being; and
- undertake reviews of evidence-based research, that translates research findings into practical, patient focused health and wellbeing programs;

### Key / background information

- The four focus areas are:
  1. Supporting and building on existing health initiatives in the ACT
  2. Developing an improved understanding of local health needs
  3. Designing and implementing targeted programs based on evidence
  4. Promoting social, emotional and cultural well-being.
  
- The recently launched ACT Aboriginal and Torres Strait Islander Agreement 2019-2028 commits to the delivery of the Strategic Priorities as part of the Health Action Plan

|                                   |                         |      |
|-----------------------------------|-------------------------|------|
| Cleared as complete and accurate: | 24/05/2019              |      |
| Cleared by:                       | Executive Group Manager | Ext: |
| Contact Officer name:             | Amber Shuhyta           | Ext: |
| Lead Directorate:                 | Health                  |      |
| Cleared for release               | Yes                     |      |
| Information Officer name:         | Jo Lesiputty            |      |
| TRIM Ref:                         | GBC19/253               |      |

HEA E16a

**Portfolio:** Health & Wellbeing**ISSUE:** HEA E16a – Delivering the ACT Drug Strategy Action Plan**2019-20 Budget Paper Description:**

The Government will undertake a feasibility and needs assessment for a medically supervised injecting facility in the ACT, and increase the availability of naloxone training. These actions align with the *National Drug Strategy 2017-2026*, and the *ACT Drug Strategy Action Plan 2018-2021*.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 200     | 0       | 0       | 0       | 200    |

**Talking points:**

- This proposal will provide funding to investigate the feasibility of implementing a medically supervised injecting facility (MSIF) in the ACT.
- Supervised injecting rooms are a proven intervention that has saved thousands of lives in Sydney and Melbourne.
- Such facilities in other jurisdictions have not reported a single overdose death despite thousands of people having used these services.
- There is also evidence that these facilities reduce needle litter, result in less public drug use, fewer ambulance callouts and improved referrals to drug treatment services.
- Given the increased use of opioid drugs in the ACT, it is prudent the ACT Government examine creating such a facility for the ACT Community.
- This facility is part of the ACT Government commitment to treating harmful drug and alcohol use as primarily a health matter, and is in alignment with our recently released *ACT Drug Strategy Action Plan* and our other commitments in the ACT Budget.

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Executive Group Manager Ext: 51854  
 Contact Officer name: Erica Nixon Ext: 49460  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

**Key / background information**

- This proposal seeks funding to appropriately scope a potential Medically Supervised Injecting Facility (MSIF). This would include:
  - needs analysis
  - cost-benefit analysis
  - identification of suitable potential sites for the facility and estimates of the capital costs to make these sites fit for purpose; and
  - observations and data review of the outcomes arising from similar facilities in Sydney and Melbourne
- It is anticipated this scoping exercise would inform a further Budget proposal for service introduction should the analysis prove the concept feasible in the ACT.
- At existing MSIFs, people who inject drugs present to the service, where sterile injecting equipment is provided in a clean and safe environment, and their injection supervised by health professionals. In this way, blood borne virus transmission is reduced, and overdose treated.
- Deaths from drug overdose are increasing in Australia, for the first time since the heroin crisis of the 1990s. Recent deaths in the ACT from suspected opioid overdose have renewed calls for consideration of harm reduction initiatives.
- There have been consistent calls for a supervised injecting facility to be implemented in the ACT (from consumers, service providers and health experts). There are numerous examples of injecting facilities operating in other jurisdictions in Australia and internationally.
- The cost of this initiative is \$200k for one year and is proposed to be internally absorbed by ACT Health.

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
| Cleared as complete and accurate: | 24/05/2019              |            |
| Cleared by:                       | Executive Group Manager | Ext: 51854 |
| Contact Officer name:             | Erica Nixon             | Ext: 49460 |
| Lead Directorate:                 | Health                  |            |
| Cleared for release               | Yes                     |            |
| Information Officer name:         |                         |            |
| TRIM Ref:                         | GBC19/253               |            |

HEA E16b

**Portfolio:** Health & Wellbeing

**ISSUE: HEA E16b – Delivering the ACT Drug Strategy Action Plan - Naloxone**

**2019-20 Budget Paper Description:**

The Government will undertake a feasibility and needs assessment for a medically supervised injecting facility in the ACT, and increase the availability of naloxone training. These actions align with the *National Drug Strategy 2017-2026*, and the *ACT Drug Strategy Action Plan 2018-2021*.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 300     | 308     | 315     | 323     | 1,246  |

**Talking points:**

- The objective of this proposal is to reduce the frequency of fatal overdoses resulting from opioid use, through increasing the awareness and availability of naloxone and related training. Naloxone is a reversal agent used specifically to treat opioid overdose.
- This initiative further expands the existing Take Home Naloxone program, which has already proven successful in the ACT community.
- Our expansion will build on the success by expanding the availability of this life saving medication to even more people in the ACT.

**Key / background information**

- Naloxone is a reversal agent used specifically to treat opioid overdose.
- The aim of this proposal is to reduce deaths from opioid overdose through initiatives to increase the availability and use of naloxone. These include:

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Executive Group Manager Ext: 51854  
 Contact Officer name: Erica Nixon Ext: 49460  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

- Funding for provision of naloxone from public hospitals, including the Alcohol and Drug Service, emergency departments following non-fatal overdose and other occasions when large doses of opioids are prescribed for patients.
- Introducing naloxone training during custodial drug education programs, with medication supply to be provided upon release.
- Increasing the training and supply availability through alcohol and other drug service providers, such as needle and syringe programs.
- The ACT Government currently funds the Canberra Alliance for Harm Minimisation and Advocacy (CAHMA) to deliver take home naloxone training and medication supply to their clients at risk of experiencing or witnessing an opioid overdose.
- While the CAHMA program is valuable and demonstrably effective, it does not reach the whole population at risk of experiencing or witnessing an opioid overdose.
- This proposal aligns with the *National Drug Strategy 2017-2026*, which discusses prevention and response to overdose including increased access to naloxone.
- The proposal also aligns with the recently released *ACT Drug Strategy Action Plan 2018-2021* (Action Plan).

### **Background Information**

- In September 2018 the Penington Institute released a report *Saving Lives: Australian Naloxone Access model* which outlines a proposed national model for naloxone education and availability. This report identified that approximately 70 per cent of fatal opioid overdoses involved pharmaceutical opioids.
- The report also identifies the target populations for access to naloxone as:
  - people who inject drugs
  - people prescribed strong opioids
  - people who are misusing pharmaceutical opioids
  - people soon to be released from custodial facilities
  - family and friends of people who use drugs.

There is an urgent need to broaden the naloxone programs in the ACT to ensure coverage of these target populations.

- The Penington Institute report was developed using the expertise of a range of individuals with specialist knowledge of overdose identification and management. It proposes a co-ordinated effort by State and Territory Governments to increase equity of access and availability of naloxone.
- The ACT was the first Australian jurisdiction to implement a take home naloxone program in 2012, however other States have subsequently moved ahead with innovation in delivery points and education services.
- In 2018, the ACT Health Services Commissioner recommended that Alexander Maconochie Centre staff detainees be provided with education on recognising the

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Contact Officer name: Erica Nixon Ext: 49460  
Lead Directorate: Health  
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Information Officer name:  
TRIM Ref: GBC19/253

signs of intoxication and overdose, as well as having naloxone available in the facility at all times.

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Cleared by: Executive Group Manager Ext: 51854  
Contact Officer name: Erica Nixon Ext: 49460  
Lead Directorate: Health  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: GBC19/253



HEA E18

**Portfolio:** Health & Wellbeing
**ISSUE: HEA E18 – Protecting Teens with meningococcal ACWY vaccinations**
**2019-20 Budget Paper Description:**

The Government will make the Meningococcal ACWY vaccination a permanent part of the vaccination schedule for the ACT, protecting young people and the community from the more common strains of the meningococcal diseases.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|---------|---------|---------|---------|---------|--------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000       |
| Expense | 320     | 328     | 337     | 342     | <b>1,327</b> |
| FTE     | 2.4     | 2.4     | 2.4     | 2.4     |              |

**Talking points:**

- This initiative will continue the MenACWY vaccination program implemented by the ACT in 2018. The vaccine will be provided through the school immunisation program for year 10 students, and available through General Practice for adolescents from 15 to 19 years of age.

**Key / background information**

- The ACT Government implemented an adolescent MenACWY vaccination program in 2018. This was in response to the increasing incidence of meningococcal W & Y nationally.
- Meningococcal disease is a rare but serious bacterial infection caused by meningococcal bacteria.

Meningococcal W (MenW) and meningococcal Y disease have been on the increase since 2013/14. MenW cases in Australia are associated with a higher fatality rate. In 2016, 8% of MenW cases died, compared to 4% of MenB cases. Incidence of MenW disease has peaks in the under 5 and 15–19 year age groups.

Cleared as complete and accurate: 30/05/2019  
 Cleared by: Executive Group Manager Ext:  
 Contact Officer name: Ext:  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

HEA E23

**Portfolio:** Health & Wellbeing

Mental Health

**ISSUE:** HEA E23 – Implementing the *Nurses and Midwives: Towards a Safer Culture – The First Step strategy*

### 2019-20 Budget Paper Description:

The Government will recruit three full-time equivalent project officers to implement the *Nurses and Midwives: Towards a Safer Culture - The First Step strategy* to better support nurses in the workplace.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 560     | 588     | 144     | 0       | 1,292  |
| FTE     | 2.2     | 3.0     | 0.8     |         |        |

### Talking points:

- In December 2018, the Minister for Mental Health and I launched ACT Health's strategy to improve the workplace health and safety of nurses and midwives.
- The *Nurses and Midwives: Towards a Safer Culture – The First Step Strategy (the strategy)* outlines ACT Health's vision of an ACT public health care system where staff, patients, and visitors are protected from harm and feel safe at all times.
- The Strategy is being led by ACT Health and includes Canberra Health Services, including the University of Canberra Hospital, and Calvary Public Hospital Bruce.
- Engagement with nurses, midwives and executives across the three workplaces continues to raise awareness of the Strategy.
- The Nurses and Midwives: Towards a Safer Culture – The First Step Strategy Steering committee has been established, chaired by the Chief

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Deputy Director-General Ext:49180  
 Contact Officer name: Hamish Jeffrey Ext:49628  
 Lead Directorate: Health  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

## BUDGET DAY BRIEF

- Nursing and Midwifery Officer, to provide governance for decision making, project direction and monitoring project deliverables.
- An expert advisory group will be established to provide advice on each of the key focus area of the strategy being
    - organisation wide governance,
    - occupational violence and aggression,
    - challenging occupational behaviour and
    - safe work practices .
  - To date interactive consultation sessions with 126 nurses and midwives from across the three workplaces have occurred to inform the implementation of the strategy.
  - To continue the positive change to improve safety for nurses and midwives this funding is required to continue this important work.

### Key / background information

- The Nurses and Midwives, Towards a Safer Culture Project requires funding during the 2019-20 Budget as the project continues to develop the strategy and its implementation.
- The project officers, who both have clinical experience, are a dedicated resource to meet the develop and implement the strategy end of financial year 2020-2021.
- A key component of the strategy is the piloting and evaluation of the Safewards model.
- The Safewards Model is a mental health in-patient health program developed in the United Kingdom by Professor Len Bowers and has been successfully implemented internationally and nationally in public health services in Victoria, NSW and Queensland.
- The project team is liaising closely with other ACT Government departments, other jurisdictions to investigate the introduction of Safewards in ACT public health services to support staff in the workplace.
- Workplace (occupational) violence and aggression is a threat facing all health care workers and health services world wide.
- Addressing this threat is a major focus for all health services as they strive to provide a safe and healthy workplace for staff in a constantly changing health care environment.

Cleared as complete and accurate: 24/05/2019  
Cleared by: Deputy Director-General Ext:49180  
Contact Officer name: Hamish Jeffrey Ext:49628  
Lead Directorate: Health  
Cleared for release Yes  
Information Officer name:  
TRIM Ref: GBC19/253

- Nurses and midwives are at the forefront of health care delivery and are the largest health care group exposed to Occupational Violence and Aggression (OVA).
- Research suggests significant under-reporting of OVA incidents against staff due to multitude of factors, including complexity of reporting systems, a culture normalisation of OVA and stigma related to reporting.

Cleared as complete and accurate: 24/05/2019  
Cleared by: Deputy Director-General Ext:49180  
Contact Officer name: Hamish Jeffrey Ext:49628  
Lead Directorate: Health  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: GBC19/253

HEA E25

**Portfolio:** Health & Wellbeing
**ISSUE: HEA E25 – Co-design and Planning: Aboriginal and Torres Strait Islander Alcohol and Drug Residential Rehabilitation Facility**
**2019-20 Budget Paper Description:**

The Government will partner with the Aboriginal and Torres Strait Islander community to inform the development of a culturally appropriate residential service supporting drug and alcohol rehabilitation for Aboriginal and Torres Strait Islander people in the ACT to complement existing services, including the Ngunnawal Bush Healing Farm.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 300     | 0       | 0       | 0       | 300    |
| FTE     | 1.0     |         |         |         |        |

**Talking points:**

- This proposal will engage with the community and relevant service providers on planning for the provision of a culturally appropriate residential alcohol and other drug rehabilitation service for the ACT Aboriginal and Torres Strait Islander community.
- Alcohol and other drug issues have a disproportionately high impact on Aboriginal and Torres Strait Islander peoples. The current absence of a culturally appropriate residential rehabilitation facility in the ACT is widely recognised as a critical service gap.
- The proposal seeks 1.0 FTE (SOGC) policy officer for 12 months to lead engagement with relevant experts, service providers and the ACT Aboriginal and Torres Strait Islander community to inform the development of a detailed proposal regarding the implementation of a culturally appropriate residential rehabilitation service in the ACT.
- This investment provides \$300,000 in 19/20 to support work with the Aboriginal and Torres Strait Islander community to co-design a culturally

Cleared as complete and accurate: 24/05/2019  
 Cleared by: Executive Group Manager Ext: 51854  
 Contact Officer name: Erica Nixon Ext: 49460  
 Lead Directorate: Health  
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 Information Officer name:  
 TRIM Ref: GBC19/253

appropriate residential rehabilitation service to support the needs of the local community.

- This is in keeping with the commitments we made in the *ACT Aboriginal and Torres Strait Islander Agreement 2019-2028* and the *ACT Drug Strategy Action Plan 2018-2021*.

#### **Key / background information**

- Alcohol and other drug issues have a disproportionately high impact on Aboriginal and Torres Strait Islander peoples. The current absence of a culturally appropriate residential rehabilitation facility in the ACT is widely recognised as a critical service gap.
- The proposal provides funding to support engagement with relevant experts, service providers and the ACT Aboriginal and Torres Strait Islander community to inform the development of a culturally appropriate residential rehabilitation service in the ACT.
- The development of the service will require detailed consultation using facilitators who are respected within the community and considered culturally appropriate.
- It is anticipated that this engagement and service development will take 12 months and would inform a further Budget proposal outlining the detail of any potential residential rehabilitation service.
- The ACT Government has been criticised for failing to invest in culturally appropriate alcohol and other drug treatment services, notwithstanding the investment in cultural healing services at the Ngunnawal Bush Healing Farm.
- The absence of an appropriate service in the ACT means that many Aboriginal and Torres Strait Islander Canberrans seek treatment for their problematic drug and alcohol use through services in NSW.

|                                   |                         |            |
|-----------------------------------|-------------------------|------------|
| Cleared as complete and accurate: | 24/05/2019              |            |
| Cleared by:                       | Executive Group Manager | Ext: 51854 |
| Contact Officer name:             | Erica Nixon             | Ext: 49460 |
| Lead Directorate:                 | Health                  |            |
| Cleared for release               | Yes                     |            |
| Information Officer name:         |                         |            |
| TRIM Ref:                         | GBC19/253               |            |

HEA E30

**Portfolio: Health & Wellbeing****ISSUE: HEA E30 – Expanding early intervention and diversion programs for people experiencing alcohol and drug dependence****2019-20 Budget Paper Description:**

The Government will improve drug and alcohol services for individuals who are in contact, or at risk of contact, with the justice system. This will help respond to community need and allow for more responsive early intervention services.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 949     | 644     | 660     | 677     | 2,930  |
| FTE     | 6.0     | 4.8     | 4.8     | 4.8     |        |

**Talking points:**

- The ACT Government will provide \$2.93 million over 4 years to support the expansion of alcohol and drug treatment services delivered by Canberra Health Services.
- This funding will support an expansion of service provision and enable Canberra Health Services to provide additional support to individuals at risk of contact with the criminal justice system along with those already involved with the system.
- This would lead to an increase in the services provision within the community via early intervention services and is likely lead to judicial and community confidence that individuals experiencing AOD concerns are being supported and monitored by specialist agencies.
- This proposal aligns with JACS omnibus business case 'Building Communities not Prisons' with distinct focus to on diverting people from the criminal justice system. It is the Government view that harmful drug and alcohol use is primarily a health matter.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5125 1577  
Contact Officer name: Karen Grace Ext: 5125 1577  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: GBC19/253

**Key / background information**

- The budget initiative provides funding support for specific Alcohol and Other Drug (AOD) initiatives that target individuals with AOD concerns who are in contact with the criminal justice system or at risk of contact. It specifically provides:
  - Recurrent budget for an expansion of early intervention services provided by Mental Health Justice Health Alcohol and Drug Service (MHJHADS) specifically the Alcohol and Drug Service (ADS) Diversion Services. This expansion of these services will meet the increasing demand in the community and allow for responsive early intervention services prior to an individual coming into contact with the criminal justice system;
  - Employment of two additional clinicians to support demand within the Court Alcohol and Drug Assessment Service (CADAS), whilst a review process of service delivery is underway;
  - Funding to undertake an external operational review of the current Illicit Drug Diversion (IDD) program focusing on the linkage between justice and health; and
  - To seek time limited budget to employ a Senior Project Officer to provide guidance for MHJHADS operational processes and governance within ADS.
- The prevalence of AOD use for individuals in contact with the criminal justice system is a widely debated topic with regards to whether drug use leads to criminal activity or alternatively crime leads to drug use.
- The Australian Institute of Criminology reports that research is unable to identify a strong causal relationship and in fact reports that the relationship between the two entities are complex and directionality is unable to be identified.
- National policy alignment has typically focused on a harm minimisation approach however diversion from the criminal justice system into treatment has become a priority (Passey, Flaherty & Didcott 2011).
- The National Drug Strategy 2017-2026 identifies key priority groups for the ten year strategy and these include;
  - Aboriginal and Torres Strait Islanders,
  - individuals with a mental health condition; and
  - individuals in contact with the criminal justice system.
- The strategy emphasises the need for evidence based interventions and approaches to addressing the complexity of AOD use.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5125 1577  
Contact Officer name: Karen Grace Ext: 5125 1577  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: GBC19/253



HEA E31

**Portfolio:** Health & Wellbeing

**ISSUE: HEA E31 – Implementing the Independent Review into the Workplace Culture within ACT Public Health Services**

**2019-20 Budget Paper Description:**

The Government will implement all 20 recommendations from the Independent Review into the Workplace Culture within ACT Public Health Services. These will commence a comprehensive reform program to promote a healthier culture, reduce inappropriate workplace behaviour, bullying, and harassment, and re-engage staff in ensuring the vision and values are lived and embraced at all levels.

|          | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|----------|---------|---------|---------|---------|--------|
|          | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expenses | 2,500   | 4,000   | 4,000   | 0       | 10,500 |
| FTE      | 6       | 6       | 6       |         |        |

**Talking points:**

- The ACT Government has committed to the implementation of all recommendations arising from the Independent Review into the Workplace Culture within ACT Public Health Services, which was completed in March 2019.
- This initiative will fund the implementation of all 20 recommendations over a three-year period.
- The recommendations contained in the Independent Panel's Report provide a comprehensive and practical approach to improving workplace culture across the public health system. The effect of this will be an enhanced public health system for staff and the Canberra community.
- Costs include funding the implementation of the recommendations and the establishment of the Culture Implementation Team. A few key examples of what the funding will cover include:

Cleared as complete and accurate: 30/05/2019  
 Cleared by: Executive Group Manager Ext:  
 Contact Officer name: Ext:  
 Lead Directorate: Choose directorate:  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref: GBC19/253

## BUDGET DAY BRIEF

- The development of an ACT public health system culture framework that will support the shaping and embedding of a best practice culture strategy;
- Development of a suite of measures to serve as a platform to progressively evaluate initiatives and program implementation. These will enable ongoing assessment of organisational health indicators and longitudinal data capture;
- Undertake the assessment, project planning, and commence program implementation, including staff training, of a model consistent with the Vanderbilt system;
- Develop a strategic leadership approach articulating leadership behaviours and expectations for all staff, consultants and contractors working within the ACT public health system;
- Conduct a system-wide independent review of HR functions and resources;
- Establish the annual independent reviews of implementation including independent staff to support the Reviews for the next three years;
- significant levels of engagement aimed at improving relationships with a wide range of stakeholders; and
- Establish the dedicated project team, with approximately six staff members, within the ACT Health Directorate to project manage and drive the implementation response and the ongoing change to culture across the ACT public health system.

### Key / background information

- On 18 March 2019, the Minister for Health and Wellbeing, Ms Meegan Fitzharris MLA, tabled the Final Report of the Independent Review into the Workplace Culture within the ACT Public Health Services, in the ACT Legislative Assembly.
- The Minister announced the establishment of the Independent Review into Workplace Culture in the ACT public health system on 10 September 2018. The Terms of Reference for the Review were released and details of the Independent Panel appointed were released on 21 September 2018.
- The Final Report of the Review was publicly released on 7 March 2019.

Cleared as complete and accurate: 30/05/2019  
Cleared by: Executive Group Manager Ext:  
Contact Officer name: Ext:  
Lead Directorate: Choose directorate:  
Cleared for release Yes  
Information Officer name:  
TRIM Ref: GBC19/253

- Key themes highlighted in the Report were:
  - Staff members within the public health system have been subjected to inappropriate behaviours, including bullying and harassment, in the workplace;
  - There are inefficient processes to manage complaints handling;
  - Additional training is required to support management in dealing with inappropriate workplace practices;
  - An inability to make timely decisions;
  - Inefficient and inappropriate Human Resources practices;
  - Historically there has been a lack of effective leadership and management throughout the ACT public health system; and
  - There is a need to ensure greater clinical engagement to ensure that the system can benefit from expert knowledge and input of individuals.
- The government has established a strong governance framework to ensure the implementation of the recommendations made by the Review Panel is effective, efficient and accountable. The ACT Health Directorate, as system steward, will lead the response to ensure that there is a consistent and territory wide approach taken.
- Governance through the inaugural Culture Review Oversight Group was held on 28 March 2019, chaired by the Minister for Health and Wellbeing, with the Minister for Mental Health as the deputy Chair and included key senior stakeholders and the senior executive leadership team for the public health system.
- The Government Response to the Final Report of the Independent Review into the Workplace Culture within ACT Public Health Services was tabled by the Minister for Health and Wellbeing, Meegan Fitzharris MLA on 16 May 2019.
- A public commitment to implement the recommendations of the Independent Review was made to the people of the ACT on 16 May 2019 by the Minister for Health and Wellbeing, Ms Meegan Fitzharris MLA; the Minister for Mental Health, Mr Shane Rattenbury MLA; the Director-General ACT Health Directorate, Mr Michael De'Ath; the Chief Executive Officer Canberra Health Service, Ms Bernadette McDonald; and the Chief Executive Officer Calvary Public Hospital, Ms Barb Reid .

Cleared as complete and accurate: 30/05/2019  
Cleared by: Executive Group Manager Ext:  
Contact Officer name: Ext:  
Lead Directorate: Choose directorate:  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: GBC19/253

**ATTACHMENT A**

CHS E01

**Portfolio/s:** Health & Wellbeing

**ISSUE: CHS E01 - Expanding intensive care services at Canberra Hospital**
**2019-20 Budget Paper Description:**

The Government will bring online four Intensive Care Unit beds at Canberra Hospital to meet the increasing demand for Intensive Care services.

|                | 2019/20      | 2020/21      | 2021/22      | 2022/23      | Total         |
|----------------|--------------|--------------|--------------|--------------|---------------|
|                | \$'000       | \$'000       | \$'000       | \$'000       | \$'000        |
| Expense        | 8,152        | 8,069        | 8,289        | 8,421        | <b>32,971</b> |
| Revenue Offset | -1,003       | -1,028       | -1,054       | -1,080       | <b>-4,165</b> |
| <b>Net</b>     | <b>7,149</b> | <b>7,041</b> | <b>7,235</b> | <b>7,341</b> | <b>28,766</b> |
| FTE            | 38.8         | 38.8         | 38.8         | 38.8         |               |

**Talking points:**

- The additional funding being sought will support an increase in staff to operate four more beds to assist in meeting service demand

**Key / background information**

- The last time ICU bed numbers were expanded was in the 2016-17 budget. The number of beds increased by 1.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Deputy Director-General Ext: 5124 2728  
 Contact Officer name: Elizabeth Chatham Ext: 5124 2728  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

**ATTACHMENT B**

CHS E03

**Portfolio/s:** Health & Wellbeing**ISSUE: CHS E03 – More beds at Canberra Hospital****2019-20 Budget Paper Description:**

The Government will add 12 beds at Canberra Hospital commencing FY2019-20 to meet demand for acute inpatient services.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total         |
|---------|---------|---------|---------|---------|---------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000        |
| Expense | 3,086   | 3,448   | 3,559   | 3,617   | <b>13,710</b> |
| FTE     | 32.5    | 32.5    | 32.5    | 32.5    |               |

**Talking points:**

- The additional 12 beds will be added to the existing available bed base to support acute inpatient services experiencing sustained increases in demand.

**Key / background information**

- Staffing required for the beds comprises:  
Medical staff;  
Nursing staff; and  
Support staff including allied health, ward support and administration services.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Deputy Director-General Ext: 5124 2728  
Contact Officer name: Elizabeth Chatham Ext: 5124 2728  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref:

CHS E05

**Portfolio/s:** Health & Wellbeing**ISSUE: CHS E05 – Expanding Public Fracture Clinic Services****2019-20 Budget Paper Description:**

The Government will increase staffing for the Fracture Clinic at The Canberra Hospital to help reduce waiting times and respond to increased demand.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 556     | 1,139   | 1,167   | 1,197   | 4,059  |
| FTE     | 3.2     | 5.4     | 5.4     | 5.4     |        |

**Talking points:**

- This proposal will fund an increase to the fracture clinic capacity at the Canberra Hospital to support increasing demand.

**Key / background information**

- 2019-20 is a half year impact.
- This initiative seeks to meet demand through the employment of additional staff:
  - 0.6 FTE staff specialist orthopaedic surgeon (meeting criteria for Medicare billing);
  - 1.8 FTE Career Medical Officers to assist with the high demand;
  - 2.0 FTE registered nurses; and
  - 1.0 FTE (ASO3) to administer the Medicare billing process.
- This will enable additional clinics for both paediatric and adults, earlier review of patients presenting to emergency department and reduced waiting time in the clinic.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Executive Group Manager Ext: 6244 2738  
 Contact Officer name: Cathie O'Neill Ext: 6244 2738  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

CHS E06

**Portfolio/s:** Health & Wellbeing

**ISSUE:** CHS E06 – Improving access to maternity services across Canberra

**2019-20 Budget Paper Description:**

The Government will establish a single Territory-wide intake phone line for maternity services, as well as a community-based early pregnancy and parenting service. These services will support access to models of maternity care which match each woman's individual needs, and promote service choices closer to home where this is safe and suitable for new mothers.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|---------|---------|---------|---------|---------|--------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000       |
| Expense | 513     | 515     | 529     | 537     | <b>2,094</b> |
| FTE     | 4.2     | 4.2     | 4.2     | 4.2     |              |

**Talking points:**

This initiative will see the establishment of:

- A single intake line for maternity services; and
- A community based early pregnancy and parenting service.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Executive Group Manager Ext: 5124 7389  
 Contact Officer name: Katrina Bracher Ext: 5124 7389  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

CHS E08

**Portfolio/s:** Health & Wellbeing**ISSUE:** CHS E08 – More Specialised Women’s Health Care**2019-20 Budget Paper Description:**

The Government will establish a dedicated multidisciplinary Transvaginal Mesh Service. This service will provide ongoing support and clinical care for women affected by transvaginal mesh procedures, strengthening sensitive and specialist care for women's health matters.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 114     | 214     | 220     | 223     | 771    |
| FTE     | 0.7     | 1.3     | 1.3     | 1.3     |        |

**Talking points:**

- The key feature of this proposal is to set up a multidisciplinary service consisting of specialist gynaecologists, pain specialists, psychologists, physiotherapists and continence nurses to assess and provide on-going support in one setting, rather than referring them to several services.

**Key / background information**

This initiative funds the following positions (half year in 2019-20):

- 0.2 FTE Staff Specialist
- 0.5 FTE RN 1
- 0.6 FTE Allied Health HP4

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5124 7389  
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Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref:



CHS E12

**Portfolio/s:** Health & Wellbeing**ISSUE:** CHS E12 – Expanding Public Dermatology Services**2019-20 Budget Paper Description:**

The Government will increase the capacity of dermatology services at The Canberra Hospital, to help respond to growing demand and ensure patients can receive more timely care.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total      |
|---------|---------|---------|---------|---------|------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000     |
| Expense | 175     | 180     | 185     | 188     | <b>728</b> |
| FTE     | 1.0     | 1.0     | 1.0     | 1.0     |            |

**Talking points:**

- The demand for dermatology services continues to grow an additional advanced trainee would help in increasing access to outpatient clinics, to support and manage the wait list in dermatology as well as support the existing registrar position.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5124 4037  
Contact Officer name: Jacqui Taylor Ext: 5124 4037  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref:

CHS E13

**Portfolio/s:** Health & Wellbeing**ISSUE:** CHS E13 – Strengthening Care for Chronic Disease**2019-20 Budget Paper Description:**

The Government will increase the capacity of rheumatology services at The Canberra Hospital. This will help meet demand and reduce waiting times, as well as providing alternative care pathways to prevent avoidable Emergency Department presentations.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 240     | 462     | 474     | 487     | 1,657  |
| FTE     | 1.0     | 2.0     | 2.0     | 2.0     |        |

**Talking points:**

- This proposal will provide two additional positions (1.0 FTE Staff specialist and 1.0 FTE Registrar) to support new models of care.
- Improve clinical throughput and better manage demand through partnerships with General Practice and community health services.

**Key / background information**

The present waiting list for rheumatology is approximately 1,800 patients, consisting of:

- Approximately 500 category 1 (urgent) patients; and
- 800 category 2 (semi urgent) patients.

Current rheumatology staffing (2 FTE rheumatologists, 1 FTE advance practice nurse, 1 FTE registered nurse and 1 FTE rheumatology advance trainee).

Cleared as complete and accurate: 30/01/2018  
 Cleared by: Executive Group Manager Ext: 5124 4037  
 Contact Officer name: Jacqui Taylor Ext: 5124 4037  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

CHS E25

**Portfolio/s:** Health & Wellbeing**ISSUE:** CHS E25 – Strengthening Care for Older Canberrans**2019-20 Budget Paper Description:**

The Government will increase staffing for aged care services within the Rehabilitation, Aged and Community Services Division. This investment will help meet growing demand, and maintain the safety and wellbeing of patients in geriatric units at The Canberra Hospital to the highest standard.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 470     | 482     | 494     | 506     | 1,952  |
| FTE     | 3.7     | 3.7     | 3.7     | 3.7     |        |

**Talking points:**

- Additional staff will be recruited to maintain the highest level of care for patients admitted to the Rehabilitation, Aged and Community Services Division at the Canberra Hospital.

**Key / background information**

- Ward 11B at the Canberra hospital was initially established in November 2014 as a subacute geriatric unit with eight non acute beds for patients approved and waiting for placement in an aged care facility, in addition to ten subacute beds.
- There has also been an increase in acuity and complexity in the Division's other Geriatric unit (11A).
- This will fund a mix of nursing and allied health professionals.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Executive Group Manager Ext: 5124 0004  
 Contact Officer name: Linda Kohlhagen Ext: 5124 0004  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

CHS E26

**Portfolio/s:** Health & Wellbeing**ISSUE: CHS E26 – More Support for Families travelling for healthcare****2019-20 Budget Paper Description:**

The Government will provide more support for families of paediatric patients who must travel interstate to access specialist healthcare. We will expand the support provided through the Interstate Patient Travel Assistance Scheme so that two people can travel with a sick child, and increase the subsidies available for accommodation and parking.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 250     | 512     | 525     | 538     | 1,825  |

**Talking points:**

- The Government will provide additional financial assistance for paediatric families through the expansion of claimable expenses, currently unavailable through the Interstate Patient Travel Assistance Scheme (IPTAS).
- The funding will provide financial support for families of paediatric patients by expanding or increasing the value of funded items including covering more than 1 family member escorting a child and an increase to the amount eligible to claim for accommodation or car parking expenses for day trips and travel when the paediatric patient is airlifted.

**Key / background information**

- An example of the families who will benefit from the additional support are those with newborn babies who are sent interstate, usually to Sydney, when there is no NICU bed available locally or for older children because the condition is rare. This usually occurs when there are not enough children with the particular disease/condition in the ACT and surrounds to maintain the necessary expertise and infrastructure.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5124 7389  
Contact Officer name: Katrina Bracher Ext: 5124 7389  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref:

CHS E27

**Portfolio/s:** Health & Wellbeing
**ISSUE: CHS E27 – Expanding public pharmacy services at the Canberra Hospital**
**2019-20 Budget Paper Description:**

The Government will boost services at The Canberra Hospital Pharmacy to reduce waiting times for dispensed medications and improve medication safety, helping Canberrans who are treated at the hospital to get access to necessary medications more quickly and easily.

|              | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|--------------|---------|---------|---------|---------|--------|
|              | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense      | 302     | 545     | 749     | 813     | 2,409  |
| Depreciation | 0       | 0       | 318     | 318     | 636    |
| Capital      | 2,212   | 3,318   | 0       | 0       | 5,530  |
| FTE          | 2.1     | 3.8     | 4.8     | 4.8     |        |

**Talking points:**

- The Government will be providing for the refurbishment and reconfiguration of the pharmacy areas at Canberra Hospital which will address current infrastructure issues. The Government will also address staffing shortage which will improve medication safety for patients and improve service efficiencies.

**Key / background information**

- Funding will address pharmacy services provided by CHS through a number of measures:
  - increase to Pharmacy staffing levels to meet recommended staffing guidelines;
  - capital funding for the redesign and refurbishment of main pharmacy dispensary;
  - design of the upgrade to the Medication Imprest Rooms (sterile manufacturing suites); and
  - design and construction of a new fit for purpose Compounding Specialised Medicine room that is compliant with relevant standards.

Cleared as complete and accurate: 30/05/2018

Cleared by: Executive Group Manager Ext: 5124 9796

Contact Officer name: Colm Mooney Ext: 5124 9796

Lead Directorate: Canberra Health Services

Cleared for release Yes

Information Officer name:

TRIM Ref:

CHS E29

**Portfolio/s:** Health & Wellbeing**ISSUE:** CHS E29 – Expanding Public Ophthalmology Services**2019-20 Budget Paper Description:**

The Government will undertake a feasibility study for the relocation of the Canberra Health Services Eye Clinic. The study will seek to identify a suitable and accessible location to meet the future expansion needs of this public outpatient service.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 250     | 0       | 0       | 0       | 250    |

**Talking points:**

- Chronic eye disease is increasing in the community, particularly Aged Related Macular Degeneration (AMD) in the elderly, and Diabetic Retinopathy (DR) in the working age group. While there has been growth in demand and growth in services, the Government will undertake a feasibility study for the relocation of the Eye Clinic to support these changes.

**Key / background information**

- The Ophthalmology Service does not have physical capacity to expand its current service or meet future demand without a larger clinical space. Ophthalmology Services are not proposed to be relocated to the future SPIRE Centre.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Executive Group Manager Ext: 5124 3515  
Contact Officer name: Daniel Wood Ext: 5124 3515  
Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref:

CHS E30

**Portfolio/s:** Health & Wellbeing
**ISSUE: CHS E30 – Strengthening care for childhood and gestational diabetes**
**2019-20 Budget Paper Description:**

The Government will expand the capacity of childhood and gestational diabetes services at The Canberra Hospital to provide faster access to care and support for people with this chronic illness.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|---------|---------|---------|---------|---------|--------------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000       |
| Expense | 567     | 765     | 784     | 796     | <b>2,912</b> |
| FTE     | 2.8     | 3.7     | 3.7     | 3.7     |              |

**Talking points:**

- Diabetes is affecting a growing number of people, including an increasing number of children with diabetes and women with gestational diabetes, leading to increased demand for both childhood and gestational diabetes services.
- The Government will invest in more resources to add to the multidisciplinary team, to improve timeliness of access to outpatient clinics for childhood and gestational diabetes.

**Key / background information**

- This proposal will employ a 0.5 FTE senior staff specialist, 1.0 FTE senior registrar, 1.5 FTE Registered nurse, 0.5 FTE Allied health and 0.2 FTE Administrative support.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Executive Group Manager Ext: 5124 7389  
 Contact Officer name: Katrina Bracher Ext: 5124 7389  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:

CHS E32

**Portfolio/s:** Health & Wellbeing
**ISSUE: CHS E32 – More Opioid Treatment Services on Canberra’s Northside**
**2019-20 Budget Paper Description:**

The Government will establish a satellite opioid maintenance treatment clinic in Canberra’s north. This will enable more timely access to treatment for north side Canberrans, and lead to fewer patients dropping out of the program.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total        |
|---------|---------|---------|---------|---------|--------------|
|         | \$’000  | \$’000  | \$’000  | \$’000  | \$’000       |
| Expense | 0       | 750     | 770     | 790     | <b>2,310</b> |
| Capital | 611     | 0       | 0       | 0       | <b>611</b>   |
| FTE     | 0       | 3.6     | 3.6     | 3.6     |              |

**Talking points:**

- The expansion of the public Opioid Treatment Service to the north side of Canberra aims to address barriers of access for treatment of people with complex opioid addiction.
- At least 50% of people who access Opioid Maintenance Treatment through the public clinic reside in Canberra’s north and are forced to travel every day to the Canberra Hospital.
- The Government will establish a satellite opioid maintenance treatment clinic in Canberra’s north, expanding on current services provided by the Opioid Treatment Service at Canberra Hospital.

**Key / background information**

- The expansion to the OTS proposal includes funding for 2.6FTE Registered Nurse, 0.4FTE Addition Medicine Specialist and 0.6FTE HP3 Counsellor.

Cleared as complete and accurate: 30/05/2018  
 Cleared by: Executive Group Manager Ext: 5125 1577  
 Contact Officer name: Karen Grace Ext: 5125 1577  
 Lead Directorate: Canberra Health Services  
 Cleared for release: Yes  
 Information Officer name:  
 TRIM Ref:



**BUDGET DAY BRIEF****ATTACHMENT C**

CHS E33

**Portfolio/s:** Health & Wellbeing

**ISSUE: CHS E33 – More doctors in the Canberra Hospital Emergency Department to respond to increased demand**

**2019-20 Budget Paper Description:**

The Government will recruit two Senior Staff Specialists within the Canberra Hospital Emergency Department, responding to increasing demand.

|         | 2019/20 | 2020/21 | 2021/22 | 2022/23 | Total  |
|---------|---------|---------|---------|---------|--------|
|         | \$'000  | \$'000  | \$'000  | \$'000  | \$'000 |
| Expense | 1,213   | 1,125   | 1,140   | 1,148   | 4,626  |
| FTE     | 2.0     | 2.0     | 2.0     | 2.0     |        |

**Talking points:**

- This is a step towards the recommended standards of the Australian College for Emergency Medicine (ACEM), contained in their ACEM Guidelines on Constructing and Retaining a Senior Emergency Medicine Workforce (the Guidelines)
- The expenses for these two Staff Specialists will be funded from within the CHS budget, it is not new funding.

Cleared as complete and accurate: 30/05/2018  
Cleared by: Deputy Director-General Ext: 5124 2728  
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Lead Directorate: Canberra Health Services  
Cleared for release: Yes  
Information Officer name:  
TRIM Ref: