

ANSWERS TO QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Inquiry into COAG reforms relating to health and hospitals
7 June 2010

Question no: 61

OUTCOME: Whole of Portfolio

Topic: HEALTH REFORM

Hansard Page: F&P 39

Senator Fierravanti-Wells asked:

I am going to give you a copy of this to take on notice. These are extracts from the Your Health website. Is there any of this campaign that is being run through the local hospital network? As I understand it, this is part of the advertising campaign, the \$29.9 million. What else is being run through the Your Health website? I will table these documents and you can take that on notice. You say that there is also the issue about consultations. The other thing is: how many of these consultations on this website have been solicited by the department rather than— **CHAIR**—I am going to ask you to place these on notice

Answer:

Local Hospital Networks are currently in the establishment phase, and therefore no part of this campaign is being run through the Local Hospital Networks.

The yourhealth.gov.au website was established in July 2009 as a consultation platform to enable the community to access the National Health and Hospital Commission report, view a range of fact sheets, provide their views through blog comments, sharing stories, voting on polls, asking questions, supplying comments and videos as well as follow the face to face consultations held around Australia. Photos, summaries and other materials from consultation events were posted on the site. A number of people were directly or randomly approached to be videoed for the website (mainly at consultation events) however all other interactive material posted on the site by visitors has been self-generated.

When the Government released the health reform package in early March, comments, stories, polls and other materials were placed on a “What you said” section of the site.

With the mid May launch of the Health Reform information campaign, the advertisements referred people to australia.gov.au/yourhealth which links through to yourhealth.gov.au. The site was uploaded with the advertising materials and certification statement as required by the Government’s Advertising Guidelines business processes. Further information to explain health reform was then and continues to be uploaded onto the site on a regular basis to ensure the community can access information about the reforms and progress.

ANSWERS TO QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Inquiry into COAG reforms relating to health and hospitals
11 June 2010

Question no: 62

OUTCOME 13

Topic: HEALTH REFORM

Written Question on Notice

Senator Fierravanti-Wells asked:

1. Where in the Budget papers can I find the allocated \$58 million for Lead Clinicians Groups in the Local Hospital Networks? Please provide Outcome and Program?
2. Is the \$58 million new funding and if not where has the funding been redirected from?
3. How will Lead Clinicians Groups be established and who will the Department of Health and Ageing be consulting with and has that consultation commenced?
4. By which date will Lead Clinicians Group be established?
5. How will the Lead Clinicians Groups interact with the Local Hospital Networks?
6. When was the decision made to establish Lead Clinicians Groups and was this a decision made with the States and Territories prior to, at or after the 19th and 20th April 2010 COAG meeting?
7. Will the Lead Clinicians Group be the responsibility of the Commonwealth or the State and Territory governments?
8. How will doctors nominate for the Lead Clinicians Group?

Answer:

1. The 2010-11 Budget Papers were released on 11th May 2010 which was before the announcement for this initiative. Therefore, the funds are included under "Decisions taken but not yet announced" in Table 2 of the 2010-11 Budget Paper No.2 (page 84). This expense measure is not disaggregated by program area.
2. This is new funding and has not been redirected from elsewhere.
3. The establishment, nature and constitution of the Lead Clinicians Groups will be determined following consultation with the professions and states and territories. Some states and territories have already moved in this direction. Lead Clinicians Groups will be complementary not duplicative where this is the case.

The Department will soon commence engagement with a wide variety of stakeholders including, but not limited to, state and territory governments, professional organisations and authorities such as the Australian Commission on Safety and Quality in Health Care.
4. It is envisaged that most Lead Clinician Groups will be established during 2010-2011.

5. Lead Clinician Groups will provide advice to the Local Hospital Networks on service delivery, optimal models of care and methods to improve clinical outcomes. They will assist in turning national clinical guidance into local clinical practice and guiding improved safety and quality outcomes for the Local Hospital Networks. They will also be invited to nominate clinicians to sit on the governing council of their Local Hospital Network.
6. It was agreed at the 19th and 20th April 2010 COAG meeting that Local Hospital Networks will engage with local clinicians to enable their views to be considered when making decisions on service delivery.

The Prime Minister announced the Lead Clinicians Group initiative on 28th May 2010 at the Australian Medical Association's Annual Conference.

7. Responsibility for the National Lead Clinicians Groups will be held by the Commonwealth. Responsibility for the local Lead Clinicians Groups will be the subject of stakeholder consultation.
8. Clinicians, including doctors, nurses and allied health professionals, will have the opportunity to nominate for membership of the Lead Clinicians Group. No decisions have been taken as to the process and it will be a part of stakeholder consultation.

Senate Finance and Public Administration Committee

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Written Question on Notice:

Senator Fierravanti-Wells asked:

What percentage of public hospitals in Australia have block funding. Please provide a list of them in each State.

Answer:

Under current funding arrangements, the Commonwealth Government provides block funding to each State and Territory Government through the Health Specific Purpose Payment to assist with the cost of providing public hospital services. The day-to-day administration of hospital services, including funding arrangements for individual hospitals rests with the State and Territory Governments.

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Question no: 64

OUTCOME 13

Topic: HEALTH REFORM

Written Question on Notice

Senator Fierravanti-Wells asked:

What documents have been provided to the Commonwealth or to any Commonwealth Minister by any State or Territory department or Minister in relation to any hospital closure/s including when they were provided and by whom were they provided. Please provide copies of such documents.

Answer:

Commonwealth Government departments have not received any documents on hospital closures from state or territory departments in the context of the COAG health reforms.

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Inquiry into COAG reforms relating to health and hospitals
7 June 2010

Question no: 65

OUTCOME 0

Topic: HEALTH REFORM

Written Question on Notice

Senator Fierravanti-Wells asked:

Please provide details of all discussions between State and Territory Departments or Ministers and Commonwealth Departments or Ministers in relation to the formation, location or boundaries of the local hospital networks, including any documents or other records of the Commonwealth or provided to the Commonwealth by any State or Territory.

Answer:

There were a number of discussions between Commonwealth and state and territory departments that included the topic of local hospital networks, including the meetings of the Health Reform Working Group. The Prime Minister and the Minister for Health and Ageing met with state and territory First Ministers and health ministers as required in the lead up to COAG. Local Hospital Networks were occasionally raised in these discussions.

The outcomes of these discussions are outlined in the National Health and Hospitals Network Agreement, including that boundaries will be initially resolved bilaterally between First Ministers by 31 December 2010.

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Question no: 66

OUTCOME 13

Topic: HEALTH REFORM

Written Question on Notice

Senator Fierravanti-Wells asked:

Please provide details of any modelling provided by any State or Territory or available to the Commonwealth or prepared by the Commonwealth in relation to case mix funding.

Answer:

The Department of Health and Ageing has long standing expertise in the development and maintenance of casemix classification particularly as it relates to acute care. Since the mid 1990s, the Department has also managed annual National Hospital Cost Data Collections (NHCDC) which identify patient level hospital costs and enable calculation of average costs and cost weights. The NHCDC focuses on acute care but also collects cost data on other modalities of hospital care, including emergency departments.

In addition the Department has recently undertaken preliminary modelling of factors contributing to cost variations in public hospitals that will likely be relevant in the development of pricing formulae. The modelling also seeks to quantify the contribution of those factors to the cost differences, and thereby to inform the development of funding models.

This work will provide useful background for the Independent Hospital Pricing Authority that will need to undertake similar analyses in the calculation of state-specific and national efficient prices.

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Question no: 67

OUTCOME 0

Topic: HEALTH REFORM

Written Question on Notice

Senator Fierravanti-Wells asked:

Further to the evidence given at the hearing, please provide details of all discussions between the Commonwealth and NSW regarding the future of the current Area Health Services including copies of any letters, documents or other information.

Answer:

There were a number of discussions between the Commonwealth and all states and territories that discussed the Commonwealth's intention to introduce local management of hospitals.

The outcomes of these discussions are outlined in the National Health and Hospitals Network Agreement.