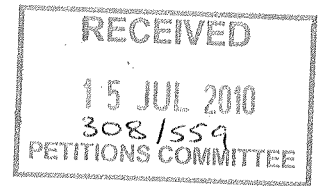




**THE HON NICOLA ROXON MP  
MINISTER FOR HEALTH AND AGEING**



Mrs Julia Irwin MP  
Chair  
Standing Committee on Petitions  
Member for Fowler  
Parliament House  
CANBERRA ACT 2600

Dear Mrs Irwin *Julia*

Thank you for your letter of 25 May 2010 regarding the petition of citizens of the Paterson electorate about a New South Wales State Government proposal to replace ambulance drivers with volunteers in Buladelah, Stroud, and Gloucester. As per Standing Order 209(b), I am providing a written response to you on the matters raised in the petition at points (3) and (4).

I note that the petition calls on the New South Wales State Government to refute the proposal to replace ambulance drivers with volunteers, and to maintain a two-person ambulance crew with fully trained ambulance personnel. I further note that the petition calls on the Commonwealth Government to make health services a priority and ensure adequate funding to train more paramedics and ambulance personnel, including in regional areas.

This Government has already made significant investments in our health and hospitals system. The Council of Australian Governments (COAG), at the 28 November 2008 meeting, agreed to a landmark deal providing \$64 billion to the states and territories over five years – an increase of \$22 billion or 50 per cent on the previous health care agreements. New South Wales received approximately \$20.3 billion of this funding.

The 2008 COAG package included \$750 million to improve the operations of emergency departments (EDs), through the 'Taking Pressure off Public Hospitals' measure. I understand that the New South Wales Government has allocated some of the funding it received under this measure to recruit additional Extended Care Paramedics for its Extended Care Paramedics Program. This Program aims to reduce the number of patients requiring transportation to EDs and to potentially reduce the number of unnecessary ED presentations.

Furthermore, at the most recent COAG meeting of 20 April 2010, the Prime Minister, Premiers, and Chief Ministers of states and territories, with the exception of Western Australia, reached an historic agreement on health and hospitals reform – the establishment of a National Health and Hospitals Network. The Commonwealth Government is investing an additional \$7.3 billion commencing June 2010 to implement these reforms, including:

- measures to tackle the key pressure points in our public hospitals including quicker access to EDs and elective surgery waiting times;
- over 1,300 new sub-acute care beds to support rehabilitation, palliative care and mental health services and 2,500 additional aged care beds to provide the right care at the right time;

- more training places for GPs and specialists and locum relief for rural nurses and allied health professionals;
- more support for nurses, particularly in aged care and general practice;
- an expansion of GP and primary health care infrastructure, and better access to after-hours primary care;
- transforming the way in which Australians with long-term illness are treated – starting with people living with diabetes – through voluntary coordinated care arrangements;
- new investments in mental health, including help for 20,000 extra young people to get access to mental health services;
- a nationally consistent aged care system providing extra places, better access to services, and stronger choice and protections for older Australians;
- a personally controlled electronic health record system; and
- new investments in prevention, including tough new action to tackle smoking.

While the Commonwealth Government is providing record health funding to the states and territories, policy and funding responsibility for ambulance services continues to be a state matter. This is reflected in clause 24(c) of the National Healthcare Agreement and reinforced at clause B9a. of the new National Health and Hospitals Network Agreement, which stipulates that ambulance services have been agreed as excluded from transfer to the Commonwealth.

The Commonwealth has, however, provided flexibility for states and territories in the application of health reforms with regard to rural Australia. The Commonwealth will, for example, ensure that new financing arrangements effectively support small regional and rural hospitals, including providing block funding where appropriate, so that small rural and regional hospitals can continue to deliver on Community Service Obligations.

As you are aware, the Commonwealth will also become the majority funder of Australian public hospitals. The Commonwealth will fund 60 per cent of the efficient price for all public hospital services, and 60 per cent of capital, research and training in our public hospitals. In addition, the Commonwealth will take full funding responsibility for GP and primary health care services, and for aged care services.

The Commonwealth is committed to delivering better health and better hospitals for all Australians, and welcomes the input of the Australian community on its unprecedented health reforms.

I appreciate you bringing this matter to my attention.

Yours sincerely

**NICOLA ROXON**

13 JUL 2010