

# Briefing Paper

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## Federal Budget 2010-2011

### Overview of main health and aged-care measures

The Government announced additional funding of \$7.3 billion over five years and \$23 billion over the rest of the decade. Funding is for initiatives including some of those already announced in response to recommendations made by the National Health and Hospitals Reform Commission (NHHRC) and The Preventative Health Taskforce, as well as initiatives under the Primary Care Strategy. Funding for preventative health strategies includes measures to reduce tobacco consumption and e-Health initiatives previously announced.

The health and aged-care Budget is presented as providing the under-pinning of a secure future funding base for the Commonwealth taking on the dominant funding responsibility for hospitals, GP services, primary care and aged services. (The Minister noted at the 13 May Post-Budget Health Briefing that the Commonwealth is 'contemplating' how the system will operate in Western Australia.)

Notably, the Budget contains no references to the new blood borne virus (BBV) and sexually transmitted infections (STI) national strategies, and makes no announcements relating to HIV, STI, or hepatitis prevention or services at all. This may be partly due to the fact that the five BBV/STI National Strategies have only recently been signed off and are yet to be formally released.

Speaking at the Budget briefing on 13 May, Minister Roxon argued that the general absence of initiatives targeting particular health conditions (other than diabetes) was deliberate, noting that the Health Budget announcements focus on practical changes to effect reform of health and aged-care infrastructures - to address gaps resulting from fragmentation of the current system.

### Measures

#### Health and Hospital reforms

The Budget funds 94 (i.e., most) of the NHHRC's recommendations for structural reform, including the Commonwealth taking on majority funding responsibility for hospitals (and the development and monitoring of national standards), setting of performance targets, measures to improve sub-acute care and the introduction of preliminary e-health measures (see below).

For further information on the proposed Health and Hospitals Network, see AFAO's separate Briefing Paper (available at: [http://www.afao.org.au/library\\_docs/policy/BP2010Proposed\\_National\\_Health\\_and\\_Hospitals\\_Network.pdf](http://www.afao.org.au/library_docs/policy/BP2010Proposed_National_Health_and_Hospitals_Network.pdf))

#### Preventative health

Preventative Health was not a focus in the Budget, however, the Government also released 'Preventative Health Action' on 11 May, in response to the recently released Preventative Health Taskforce's Report (AFAO will be providing a separate briefing paper on the Taskforce's report and the Government's response.)

Previously announced initiatives were re-announced regarding the tobacco excise (expected to reap about \$7.5 billion per year), and quit-smoking campaigns. Funding announcements included:

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- \$50 million for the National Binge Drinking Strategy
  - \$27.8 million for a new anti-smoking campaign targeting 'high-risk and disadvantaged groups'
  - a \$262.7 million sport/recreation funding 'boost'
  - \$54 million for 'the most ambitious study of Australia's health ever conducted'. The study, supported by the National Heart Foundation, will commence in 2011 and will involve surveying 50,000 people regarding health issues, nutrition, medications, exercise and optional pathology samples will be offered. The data is intended to provide researchers with data regarding disease risk factors and changing patterns of disease in the Australian population.

### GP and primary care initiatives

\$416.8 million will be directed to establishing a **National Network of Medicare Locals**. The Network is intended to act as a 'patient guide to help navigate through the many avenues of health care'. The Medicare Locals will coordinate initiatives including around the clock access to GPs via the proposed National Health Call Centre Network after hours services. The Medicare Locals will also better connect hospital, GP, allied health, aged care, mental health and Aboriginal and Torres Strait Islander (ATSI) health services in local communities.

\$355.2 million will be directed to establish further GP Super Clinics and the expansion of existing GP clinics, and 5,500 new GP places will be provided over the next decade. These measures are presented not only as part of the Government's greater focus on 'prevention and management of disease' but also as providing 'more room to train the next generation of doctors and nurses'.

### Workforce initiatives

The Budget provides \$1.2 billion for health workforce development, including:

- \$493.4 to expand the nursing workforce
- \$5.3 million for measures to enhance allied health professionals' access to training and \$6.5 million for 1,000 extra clinical training scholarships for allied health professionals
- \$40.6 million to support rural nurses and allied health workers
- \$640 million for GP and specialist training places
- \$447.9 million to better coordinate care of people with diabetes.
- \$390.3 million to 'support' 5000 full-time practice nurses in GP clinics, so as to provide 'immunisations and wound care', to assist in managing appointment reminder and recall systems, and to assist in patient education regarding, e.g., weight loss, reducing alcohol consumption and quitting smoking. The measure responds to Australian General Practice Network research findings that practices employing a practice nurse see more than 800 extra patients a year. The measure would mean that GP's in urban areas would be eligible for funding to assist in employing practice nurses. The initiative would involve annual incentive payments of \$25,000 for full-time GPs to engage a registered nurse, and \$12,500 per full-time GP for an enrolled nurse being made available. The funding would be available for registered accredited general practices.

### Aged care initiatives

\$103.1 in additional funding will be provided to better support the aged-care nursing workforce, with measures to provide incentives for qualifications upgrade, to increase training places, and to fund trials for new models of care for nurses in aged care. Also funded are measures to build on 2009 Budget changes to provide access to Medicare and the Pharmaceutical Benefits Scheme (PBS) for nurse practitioners, and to explore the viability of regulating of personal care workers and assistants in aged care.

As part of the Productivity Commission's ongoing Inquiry into Aged Care, future workforce requirements will be examined, including supply and demand issues. Strategies will be developed to ensure that the sector continues to have a suitably qualified workforce providing the 'best possible care'.

### E-Health

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\$466.7 million over the next two years will fund already announced e-Health measures – these now being presented as ‘personally controlled electronic health records’. Patients will be able to access their record online. The funding will be used to establish a secure system of e-health records that will provide:

- summaries of health information, including medications, immunisations and medical tests, and an indexed summary of specific healthcare events – patients will control what information is stored about them and which medical professionals can access or add to their files
- secure access by patients regardless of location
- rigorous ‘governance and oversight’ to maintain privacy
- National standards governing healthcare providers.

### **Hospital and sub-acute services**

\$3 billion will be provided over four years to improve patient access. Measures to include:

- \$753.2 million to reduce emergency department waiting times
- \$803 million for additional elective surgery procedures and expanded capacity
- \$1.63 billion to states and territories (in capital and recurrent funding) for an estimated additional 13,016 sub-acute beds by 2013-14 – targeted to bottle-necks, to support rehabilitation, palliative care and mental health services, care coordination.

### **Mental health**

\$180 million investment in mental health initiatives ‘focusing on young Australians’ is presented as beginning the task of reforming the mental health system.

\$13 million will be provided over two years to employ additional mental health workers.

\$58.5 million will be provided for care packages – for both clinical and non-clinical care to better support up to 25,000 people with severe mental illness in primary care settings, by providing personally tailored care package to patients. Medicare Locals will play a part in better integrating primary health care in local communities and will assist in the coordination of existing commonwealth mental health programs.

### **ATSI workforce: health and aged care**

A \$15.7 million cross-portfolio program was announced to increase ATSI traineeships in aged care and frontline health care. Measures – incorporating traineeship measures previously announced - will include:

- providing for 80 traineeships in business and administration for ATSI people in aged and primary health care facilities (part of COAG’s National Partnership on Indigenous Economic Participation), from June 2010 to June 2013
- further reforms to employment services targeting ATSI people, with a view to attracting people to health care and aged care traineeships.

### **Indigenous Health**

No new Close the Gap health initiatives were announced, the Government noting that all Australian Governments have committed over \$4.6 billion to Close the Gap initiatives under a new partnership agreed by the Council of Australian Governments (COAG).

### **Comments**

- **Ageing initiatives** announced in the Budget are highly relevant to our work around the premature ageing of people living with HIV, and the ageing of the Australian population living with HIV. There will be opportunities to focus the Commonwealth’s attention on strategies to ensure that the psycho-social and health care issues faced by older people with HIV are recognised and met.

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- **GP initiatives and the development of the nursing and allied health workforce** are relevant to our work identifying policy and treatment, care and support issues for people living with HIV.
  - **Announcements regarding practice nurses in GP clinics** appear to limit the role of practice nurses to patient assistance/management and health education. We had hoped that there would be specific reference to practice nurses' potential role in BBV rapid-tests – with a view to undertaking rapid-tests for syphilis as well as for HIV (the latter being conditional on approval by the TGA).
  - **Mental health initiatives:** The press release 'Building the Foundations for Better Health Care', notes that 'the Government intends to take a greater policy and funding role for primary mental health services – to provide better coordinated care for people with mental illness. In response to questions raised at the 13 May Budget breakfast briefing regarding the paucity of mental health measures, the Minister responded by saying that the Government has an "obligation to get our house in order for front end of mental health services – there's a lot of work needed re specialist mental health services, sub-acute care and mental health beds that don't belong in public hospitals."
  - **Dental and oral health:** it is disappointing that there is nothing in the Budget addressing this, despite relevance regarding primary care. In response to questions at the Budget briefing, the Minister noted the Government's commitments to health, hospital, aged-care, primary health and preventative health reforms made dental health reforms impossible at this time, however, she noted that the GP super-clinics already in operation are providing dental care in response to community demand.

## Resources

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Australian Government, 2009-2010 Federal Budget – [www.budget.gov.au](http://www.budget.gov.au) (for all Budget materials, including Ministerial press releases)