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## National Health and Hospitals Reform Commission

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### Issue:

- On 25 February 2008, Federal Cabinet approved the establishment of the National Health and Hospitals Reform Commission
- AFAO, member organisations and other public health sector organisations need to be aware of the scope and process of the Commission in order to effectively advocate for an improved HIV response and better focus on issues involving public health.

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### Background:

- In August 2007 in the lead up to the 2007 Federal Election; the Labor party announced that a Rudd Labor government would “undertake one of the most significant reforms of Australia’s health and hospital system since Federation”.
- As part of this announcement, there was a commitment to the establishment of a \$2 billion National Health Reform Plan (over four years).
- The plan (as announced) focussed on two major elements - \$2 billion in investments to deliver improved health outcomes for patients in Australia’s health and hospital system; and, a commitment that the Federal Labor government would take financial control of Australia’s public hospitals if State and Territory Governments had yet to implement an agreed National Health Reform plan by 2009.
- As part of this announcement, Labor committed to the establishment of a National Health and Hospitals Reform Commission within 100 days of the election.
- This announcement also hinted at the redevelopment of the AHCA/PHOFA system (see AFAO Briefing Paper ‘PHOFAs’ for further information)

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### Role of the National Health and Hospitals Reform Commission

- The Commission has been directed by Cabinet to develop a long-term health reform plan for Australia.
  - It has been tasked to provide an interim report to the Commonwealth Government by the end of 2008, and a final plan in mid 2009.
  - The Commission will report to the Federal Health Minister (Nicola Roxon) and through her to the Prime Minister, COAG and the Australian Health Minister’s Conference.
  - The health reform plan is to help manage future challenges to the Australian healthcare system including:
    - The rapidly increasing burden of chronic disease;
    - The ageing of the population;
    - Rising health costs; and,
    - Inefficiencies exacerbated by cost shifting and the blame game.
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- The Commission will focus on health financing, maximising the relationship between the public and private sectors and improving rural health.
  - The Commission will also advise the Government on the key aspects of the framework for the next health care agreements between the Commonwealth and the State and Territories.
  - Each member of the Commission has committed one or two days per week to the work of the Commission.

## Members of the Commission

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- Christine Bennet (Chair) – Chief Medical Officer for MBF Australia Ltd. (a private health insurance company) and former chief executive of Westmead Hospital. Dr Bennett was also the head of a national medical lobby group which has claimed success in securing increases in research funding. She is accounted a senior health policy expert with experience as both a clinician and administrator in the Australian healthcare system.
- Rob Knowles – former Victorian Liberal Health Minister, former Commissioner for Complaints
- Geoff Gallop – former Premier of Western Australia
- Mukesh Haikerwal – Melbourne GP and former President of the Australian Medical Association
- Stephen Duckett - health economist and former Secretary of the Commonwealth Department of Health
- Ron Penny, Emeritus Professor of Medicine, University of NSW
- Sabina Knight - Senior Lecturer for the Centre for Remote Health and remote area nurse
- Sharon Willcox - Director of Health Policy Solutions (a consulting firm)
- Justin Beilby - Executive Dean of the University of Adelaide's Medical School
- Mary Ann O'Loughlin - Director of The Allen Consulting Group; recently worked on the *Economic and Process Evaluation of Funding for HIV/AIDS, Hepatitis C and STI Research and HIV/AIDS and STI Education* (for the Commonwealth Department of Health and Ageing)

## Key issues of concern:

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The membership of the Commission highlights the potential risk of a medical/hospitals based focus to healthcare reform in Australia. Whilst chronic disease is included as an issue for the Reform Plan, there exists considerable risk that this focus will assume a highly medical perspective with little or no focus on the role of broader health principles (including health promotion and community development).

It is currently unclear what process the Commission will use to develop its Reform Plan; and how significant community consultation would be in this process.

## References

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Sydney Morning Herald, *Rudd names head for health commission*, 26 February, <http://www.smh.com.au/news/national/rudd-names-head-for-health-commission/2008/02/25/1203788248574.html> (accessed 26 February)