



SUBMISSION

HCCA Response to ACT Budget 2024-25

July 2024

Health Care Consumers' Association

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HCCA initial response to the ACT Budget 2024-25

The 2024-5 ACT Budget was released on Tuesday 25 June 2024 by Andrew Barr MLA, Chief Minister and Treasurer of the ACT. The Budget papers can be found here: [Budget Papers - Budget 2024-25 \(act.gov.au\)](https://act.gov.au/budget-papers)

[HCCA made a pre-budget submission to the Government, highlighting a range of potential investments in areas of need.](#) A number of these areas have been supported or provided with funding in the 2024-25 budget. There are also important and ongoing issues this Budget has failed to address.

In our submission we set out our desire to see the Budget address three key areas of health:

- improving consumer access to specific support and **health services**,
- improving the integration of care within the **health system**.
- Support for the **community sector** to meet demand for services.

The ACT Budget does two things – it tells the community about the income and expenditure of Government, but it also includes a range of performance measures each year. This offers us a valuable opportunity to understand the achievements (or failures) of current measures addressing these key areas.

A high performing health system is a system committed to transparency. To be meaningful, the accountability indicators (performance measures) used need to be set by the community – the users and funders of the services, not only those people working in the system. Current accountability indicators are not always particularly meaningful to consumers but there are some existing indicators, that are worthy of our closer attention.

Overall, the ACT Government has delivered a budget that seeks to meet increasing demand for many health and hospital services through continuing and new commitments to infrastructure and service development. It includes measures relevant to many of HCCA's current priorities including funding for improvements to:

- access to outpatients' services
- support for consumers from multicultural communities care of older people, and
- digital health.

Overview of funding

The ACT continues to experience significant pressure within our public hospital system. Drivers of this pressure include the need to provide services to a growing population, within the ACT as well as surrounding areas, and the compounding impacts of widespread workforce shortages.

The ACT budget for the health sector (\$2.6 billion) accounts for about a third (32%) of the total budget.

Some of the notable commitments in the 2024-25 health budget include:

- \$53 million over four years to construct two new health centres in the Inner South and in North Gungahlin and to undertake design work for the West Belconnen centre,
- Ongoing funding for the second Police, Ambulance, and Clinician Early Response team (PACER), a multi-disciplinary team which provides safe assessment and treatment of people experiencing acute mental health crises,
- \$19.2 million over four years for the implementation of Voluntary Assisted Dying,
- \$86 million to expand mandatory nurse/midwife to patient ratios across remaining inpatient settings. This will create more than 137 full-time equivalent nursing and midwifery positions across the ACT,
- \$57 million to expand paediatric services at Canberra Hospital,
- More than \$1 billion for the new northside hospital including an immediate investment of \$27.5 million supporting commencement of design and demolition work,
- \$14.6 million over two years to complete the legal and commercial transition of North Canberra Hospital as well as \$5 million for updates to equipment and IT Infrastructure at North Canberra Hospital to ensure it continues to provide high quality care,
- \$52 million to boost emergency and elective surgery,
- \$195 million over four years to continue delivering the Digital Health Strategy,
- \$18 million in improving care for older Canberrans through enhancements for specialist dementia care at North Canberra Hospital and funding for the Care, Optimisation and Transition Unit at Canberra Hospital, and
- \$350,000 to re-establish the gym at Chifley that previously supported many older Canberrans to remain well in the community.

We are pleased to see some recognition of the role of community organisations in the health sector with the commitment of a one off \$1.65 million boost to selected

community organisations. This will temporarily support the important work done by our colleagues at Arthritis ACT, Directions Healthcare, Gugan Gulwan Youth Aboriginal Corporation, Women's Health Matters, Kidsafe ACT, and Palliative Care ACT.

The growing and ongoing challenges currently faced by community sector organisations need to be addressed. We were disappointed not to see measures to improve the chronic shortage of affordable accommodation for community organisations. Community organisations like HCCA, provide important support and advocacy for ACT residents. While we view the allocation of this targeted funding as a positive first step, it does not begin to address the increased costs faced by the community sector, which (much like the health system) is being squeezed by increased costs and a ballooning consumer base.

HCCA priorities for investment

- **Geriatric Streaming**

We note that there is no designated funding for implementation of geriatric streaming in the Emergency Department of the Canberra Hospital. We have been advocating for this service for many years. Recently we discussed this with Canberra Health Services and there may be potential to consider this in terms of a Frailty Unit. This will be progressed through discussions with our Health of Older People Consumer Reference Group. We have also been strongly advocating for the inclusion of geriatric streaming in the Model of Care for the new Emergency Department in the Critical Services Building.

- **Emergency Care (emergency department and emergency surgery)**

We acknowledge the recent reporting of improved Emergency Department waiting times. This is good news but not reflected in the Budget Papers. Instead, they tell a more concerning story, that consumers continue to wait for longer than the established targets to access the care they need.

There is a critical link between what is happening in the rest of the hospital and waiting times in the ED. Higher inpatient bed occupancy makes it more challenging to find beds to admit new patients.

The increase in funding for emergency and elective surgery in this budget is welcome news.

- **Planned Care**

The Government needs to meet the challenges of improving the delivery of care that can be planned – such as outpatient appointments and elective surgery. We expect to see an increase in funding for elective (planned) surgeries and outpatients clinics to support the increased demand from a growing population in the ACT.

The Budget papers show that consumers still face long waiting times. This means that many consumers are waiting longer than clinically recommended timeframes (Budget Statements C, p.61). The Budget papers tell us that 74% of people who needed surgery within 30 days received that surgery. For people in triage category 2, 44% have been admitted for surgery within the clinically recommended timeframe of 90 days.

Delays in care continue to be of great concern to HCCA. We acknowledge this is not an easy fix but it needs to be prioritised.

- **Digital Health Record**

We note that funding has been allocated for ongoing delivery of the digital health record. There is more work to do to support consumers to make the most of this tool in managing both our health and our health care. We had called on government to fund specific initiatives for the training and support of consumers and community organisations to use MyDHR. We continue to see a need for services to support consumers and carers to use the digital health record effectively in order to achieve the benefits promised by the system.

We also hope to see a commitment to development of language options to provide access to the interface for our multicultural communities.

We are keen to discuss with government how to meet the needs of consumers and the community as well as the needs of health service staff through targeted funding allocation.

- **Languages other than English**

Through our community programs we understand the significant barriers experienced by many people whose main language is other than English. In our budget submissions we have called on the Government to invest in initiatives to improve communication with consumers and carers from multicultural communities, including translation of MyDHR. We are disappointed that this has not been supported in the budget.

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Performance of the system

The Budget papers also allow us to examine the performance of the health system with reporting against a range of indicators. The indicators included do not capture the areas of interest for consumers and communities. We are keen to work with Government to have more meaningful indicators – for example, access to outpatient clinics. This is a significant area of activity for our public health services and yet there is little visibility of this in the budget papers.

There are some specific services where we continue to not meet targets or fall below community need and expectations in the ACT. Delays in accessing radiotherapy and oral health services are an ongoing issue.

- **Cancer Services**

The Government has placed a priority on cancer care services, including early detection and timely access to diagnostic and treatment services (Budget Statement C, p.40). This includes waiting times for access to radiotherapy consistent with agreed benchmarks. The service has not met the targets and many people are not starting radiotherapy treatment within standard timeframes (Budget Statement C, p.42). We are pleased to read that CHS has seen improvements with the operation of four advanced linear accelerators and successful recruitment of staff but the performance was still well below the agreed target meaning delays in care for many people, potentially impacting health outcomes.

- **Public Dental Care**

None of the key priorities in sub-acute and community services is to reduce waiting times for access to emergency dental healthcare (Budget Paper C, p 42). We remain concerned that the mean waiting time for people on dental services waiting lists continues to be 12 months. Public dental services are essential to the health and wellbeing of many people in our communities. An extended wait of 12 months is a long time to be living with dental issues that require restorative and denture services and this has an impact on health, wellbeing and quality of life. People who qualify for public dental care are also nine times more likely to suffer complete tooth loss and five times more likely to suffer inadequate dentition¹. Poor oral health also has flow on effects in the broader areas of physical health, nutrition, employment, self-esteem and mental health².

¹ Australian Institute of Health and Welfare, 2023, Oral health and dental care in Australia, viewed 19 July 2024, <https://www.aihw.gov.au/reports/dental-oral-health/oral-health-and-dental-care-in-australia/contents/healthy-mouths>

² Australian Institute of Health and Welfare, 2023, Dental and Oral Health, viewed 19 July 2024, <https://www.aihw.gov.au/reports-data/health-conditions-disability-deaths/dental-oral-health/overview>