

LEGISLATIVE ASSEMBLY OF THE NORTHERN TERRITORY

WRITTEN QUESTION

Mrs Finocchiaro to the Minister for Health:

Appropriation Bill – Health

1. Please provide copies of:
 - All questions, which have been received from the public in relation to the Estimates process and consideration of the Appropriation Bill for the 2017/18 financial year; and
 - The answers to those questions that were presented to the Estimates Committee.

Please provide the information requested below for the Department of Attorney-General and Justice and the Department of Health, as at 31 March 2017.

DEPARTMENT OF HEALTH

Please accept apologies if questions are not under the correct Output. Where this is the case, it would be appreciated if you could indicate the appropriate Output in your response. Thank You.

OUTPUT GROUP: TERRITORY-WIDE SERVICES

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1. Compared to the funding allocated in the 2016/17 Budget, there has been a reduction of \$22,145,000 in funding committed in the 2017/18 Budget. Why has there been such a reduction in funding committed?
2. There has been an increase of 2% in grant funding. Where has this come from since the 2016/17 Budget and what it has been spent on?
3. Funding on Territory-Wide Services will drop from \$12,650,000 to \$10,723,000. Why is this happening and where will the savings go?
4. Is the Northern Territory Government currently investigating taking Ambulance Services in house rather than outsourcing the contract, as currently happens with St John's Ambulance Services?
5. Is St John's Ambulance Service currently meeting the performance standards outlined in their contract?

6. Following the passage of the *Termination of Pregnancy Law Reform Bill 2017*, it was indicated that the draft clinical guidelines would be made available for draft consultation during May 2017 with the Bill being gazetted on 1 July 2017, however as yet no draft clinical guidelines have been released for public consultation.
 - a. When will the draft clinical guidelines be released for public consultation?
 - b. Will the Gazettal of the Bill now be delayed to allow for public consultation to take place?
 - c. When is it expected that all the provisions of the *Termination of Pregnancy Law Reform Bill 2017* will come into force?

OUTPUT GROUP: DISEASE PREVENTION AND HEALTH PROMOTION

OUTPUT: ENVIRONMENTAL HEALTH

1. There has been a reduction of \$1,356,000 in funding this year for environmental health when compared with the 2016/17 Budget. Why has the funding been reduced?

OUTPUT: DISEASE CONTROL

1. What are the reasons for the 40% increase in notification of HIV between 2016/17 and this year's Budget and what will the costs to the Budget be due to this increase?
2. Why has there been a 315 occasion increase in services at Clinic 34 in Darwin and Alice Springs and what are the costs of these increased occasions?
3. What initiatives will the Government put in place to increase the rates of immunised children by 2% in both the 12 months of age and 2 years of age categories?
4. Noting the explanation in the Budget Papers for the increase of 50 000 units of sterile injecting equipment distributed through the needle and syringe program as being due to 'the increase is mainly due to the inclusion of injecting drug users into the program as part of public health efforts to curb the rates of HIV, Hepatitis C and Hepatitis B in the Territory', what are the costs of this increase and why has it occurred?
5. Funding for Disease Prevention and Health protection will reduce by \$3,341,000, why has this occurred and where will the money now be spent?

OUTPUT GROUP: COMMUNITY TREATMENT AND EXTENDED CARE

OUTPUT: ALCOHOL AND OTHER DRUGS

1. Why has the funding committed for alcohol and other drugs in the 2017/18 Budget reduced by \$3,816,000 when compared to last year's Budget?
2. Given the average daily bed usage at sobering up shelters is not included in the Department's KPI's in this year's Budget, what are the usage rates, compared to the 50% listed in the 2016/17 Budget?
3. Given that the number of 'closed episodes in non-government treatment services' were not included in the budget, what are the actual figures for 2016/17 compared to the 3546 listed in the 2016/17 Budget and what it's predicted to be for 2017/18?
4. Given that the number of 'completed closed episodes in non-government treatment services' were not included in this year's budget, what are the actual figures for 2016/17 compared to the 1910 listed in the 2016/17 Budget and what is predicted for 2017/18?
5. Why were these two measures removed from the Department of Health's KPI's and replaced with three new measures?
6. Why is the budget for Alcohol and Other Drugs decreasing from \$38,340,000 to \$37,318,000?

OUTPUT: DISABILITY SERVICES

1. Noting that the substantial variations in clients of Disability Services in the Northern Territory, according to the budget papers, are 'due to the transition to the National Disability Insurance Scheme (NDIS)', are there any other reasons why 108 less clients will be accessing full-time accommodation, 200 less clients will be accessing community support services, 2,171 less clients accessing professional support services and why there will be 8,926 less clients accessing professional support services?
2. Funding for disability services in financial year 2017/18 will decrease by \$3,480,000 when compared with the Mid-Year Economic Financial Outlook. Why has this occurred and where is this money now going?

OUTPUT: MENTAL HEALTH

1. Given the Government is developing its next Suicide Prevention Strategy, is it envisaged that the number of individuals attending suicide prevention training in the Territory will increase? What will this cost?

OUTPUT GROUP: NATIONAL CRITICAL CARE AND TRAUMA RESPONSE

NATIONAL CRITICAL CARE AND TRAUMA RESPONSE

1. Why is the number of responses to local, national and international deployment requests dropping by 10 between the 2016/17 Estimate and the 2017/18 Budget?

OUTPUT GROUP: OFFICE OF THE PUBLIC GUARDIAN

OUTPUT: OFFICE OF THE PUBLIC GUARDIAN

1. How many FTE's are currently in the Office of the Public Guardian?
2. What is the annual budget of the Office of the Public Guardian?
3. Have there been any cost overruns during the establishment period of the Office of the Public Guardian?
4. Given the increase in numbers of individuals under the Office of the Public Guardian, is it anticipated that the numbers will continue to grow over the coming years?
5. Given the numbers of individuals under the Public Guardian has increased, why has the budget reduced from \$4,608,000 to \$4,364,000?
6. Given the increased demand for the services of the Public Guardian, why is the funding reducing?

OUTPUT GROUP: HEALTH SERVICES

OUTPUT: TOP END AND CENTRAL AUSTRALIA HEALTH SERVICES

Top End and Central Australia Health Services

1. What is the reason for the Top End and Central Australia Health Boards being abolished from 30 June 2017?
2. What were the issues with the current governance structures?
3. Is this an attempt to 'recentralise' the governance of Territorians' healthcare?
4. Why couldn't the existing health boards remain in place whilst alternative arrangements were consulted on and instituted?

5. Please advise when the two transitional Service Administrators will be appointed. Who will they be?
6. What powers will they have?
7. Who will they be required to consult with before making any decisions?
8. What recruitment process, if any, will be undertaken to attract quality applicants to these positions, how will they be chosen and what skill sets will they be required to possess?
9. What consultation did the Department undertake with stakeholders prior to making the decision to abolish the health boards?
10. Were the boards advised of the decision to terminate them prior to the announcement?
11. How was this information communicated?
12. What legislative changes will be required to bring in the new governance system?
13. What will be the difference between the Health Service Boards and the new Health Advisory Committees?
14. Will they have the same powers?
15. Who will be appointed?
16. What recruitment process, if any, will be undertaken to attract these members, how will they be chosen and what skill sets will they be required to possess?
17. What will be the role of the Clinical Advisory Council? What powers will it have?
18. Who will be appointed to this Council?
19. How will they be chosen? What recruitment process, if any, will be undertaken to attract these new members?
20. What skill sets will they be required to possess?
21. What will be the cost of establishing this new governance system to replace the existing system?
22. Where will the \$1 million in savings from the abolition of the Health Boards, come from? Where will this money go?

OUTPUT GROUP: CORPORATE AND GOVERNANCE

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1. Given Corporate Governance KPI's are not listed in this year's budget, what is the percentage of corporate risks ranked as 'extreme' or has a risk mitigation plan been in place within 30 days of initial risk assessment?
2. How many staff have been given health literacy and cultural security training?
3. The cost of Corporate and Governance will rise by \$873,000, what is this increased funding being spent on?
4. How many Full Time Equivalents are currently employed within this Agency, broken down by Output and Business Unit?
5. How many Full Time Equivalents have resigned, retired, taken a redundancy package or have been made redundant, or terminated? Please break down these numbers by Output and Business Unit.
6. What has happened to these positions? Has the work been reallocated to existing staff?
7. Are there any plans to fill these positions in the near future?

OUTPUT: SHARED SERVICES PROVIDED

What was the level of satisfaction of the Health Services with the corporate support services provided by the Department?

OUTPUT GROUP: TOP END HOSPITALS

OUTPUT: TOP END HOSPITALS

1. An additional \$32.5 million was allocated to this Output at Mid-Year Review. Please explain what this was for and what outcomes can be expected.
2. Why is the average length of stay in the 2017/18 Budget reduced from 5.4 days in PEFO to 5.1 days?
3. Why has the percentage of patients who present at emergency departments that depart within 4 hours increased from 66% to 78%?

4. What is the number of interstate Doctors and Specialists (locums) contracted by the Top End Health Services?
5. What is the cost of the wages for these contracted Doctors and Specialists to the Top End Health Services?
6. What is the cost of accommodation for these contracted Doctors and Specialists to the Top End Health Services?
7. What Medical Specialties are under-resourced in terms of qualified practitioners in the Top End Health Services?
8. What is the cost of recruitment for Doctors and Specialist Physicians to the Top End Health Services?
9. How many Nurses and Personal Care Assistants are contracted from outside service providers to make up for the shortfall in staffing in the Top End Health Services?
10. What is the daily rate of Nurses and Personal Care Assistants who are contracted to this service?
11. What is the cost of these Nurses and Personal Care Assistants to the Top End Health Services?
12. What is the average length of stay for these Nurses and Personal Care Assistants with the Top End Health Services?
13. How does the Top End Health Services ensure continuity and quality of care if outside contracted medical and nursing staff are used on a regular basis at a medical facility?

Palmerston Regional Hospital

1. What funding has been allocated for the commissioning of the Palmerston Regional Hospital?
2. How many FTE's have been allocated to the coordination of activities associated with the commissioning of the Palmerston Regional Hospital?
3. What is the anticipated date of the commissioning of the Palmerston Regional Hospital?
4. What funding has been allocated for the fit-out of furniture, equipment and miscellaneous items for the Palmerston Regional Hospital?
5. What funding has been allocated for the annual operating costs of the Palmerston Regional Hospital?
6. What services will be located at the Palmerston Regional Hospital?

7. Will any services be relocated from the Royal Darwin Hospital to the Palmerston Regional Hospital?
8. When will the rehabilitation pool be constructed at the Palmerston Regional Hospital?
9. What funding has been allocated to the construction of the rehabilitation pool at the Palmerston Regional Hospital?

OUTPUT GROUP: COMMUNITY TREATMENT AND EXTENDED CARE

OUTPUT: MENTAL HEALTH

1. Why has the number of individuals indicated to receive community-based public mental health services been reduced by 200, from last year?
2. Why has the number of individuals under the age of 18 who receive community-based public mental health services been reduced by 300, from last year's figures?
3. Why is the target for post-discharge community health care for mental health consumers been reduced to 70% for 2017/18 when the figures from 2016/17 show the demand to be 87%?
4. Are these KPI's realistic given the actual demand occurring on mental health services?

OUTPUT: AGED CARE

1. Please explain how the additional \$2,205,000 will be spent on aged care.
2. Has the Government any further plans for additional aged care facilities across the Northern Territory?

OUTPUT: ALCOHOL AND OTHER DRUGS

1. Please explain the reduction of \$3,621,000 at Mid-Year Review.

OUTPUT GROUP: PRIMARY HEALTH CARE

OUTPUT: REMOTE PRIMARY HEALTH CARE

1. An additional \$6 million was allocated to this Output at Mid-Year Review. Please explain what this was for and what outcomes can be expected.
2. How many visiting specialists has the Government engaged to deliver services in rural and remote communities?

3. What is the cost of these specialists and are there any specialties which the Government is experiencing difficulty in recruiting?
4. How many primary health care clinics across the Territory have been transferred to the control of Aboriginal Health organisations since 1 September 2016? Which ones have been transferred?

OUTPUT: URBAN PRIMARY HEALTH CARE

1. How many Aboriginal Health Practitioners are employed by the Top End and Central Australia Health Services? Please provide a list.
2. What specific training is provided at clinic level and outside Batchelor College?

OUTPUT: TOP-END WIDE COMMUNITY SERVICES

1. An additional \$4 million was allocated to this Output at Mid-Year Review. Please explain what this was for and what outcomes can be expected.
2. How many remote health clinics are without a full complement of medical and nursing staff?
3. Which clinics are they and what is being done to address these shortfalls?

OUTPUT GROUP: TOP-END WIDE SUPPORT SERVICES

OUTPUT: TOP-END WIDE SUPPORT SERVICES

1. The allocation to this Output was reduced by \$3 million at Mid-Year Review. Please explain why this happened and how it will impact on support services in the Top End.
2. Since the opening of the Super Clinic at Palmerston, how much has it cost to fly in doctors to provide after-hour's services to patients?

OUTPUT GROUP: CENTRAL AUSTRALIA HOSPITALS

OUTPUT: CENTRAL AUSTRALIA HOSPITALS

1. The allocation to this Output was reduced by \$3,870,000 at Mid-Year Review. Please explain why this happened and how it will impact on this output.
2. Why is the average length of stay in the 2017/18 Budget reduced from 5.4 days in PEFO to 5.1 days?

3. Why has the percentage of patients who present at emergency departments that depart within 4 hours increased from 66% to 78%?
4. What is the number of interstate Doctors and Specialists (locums) contracted by the Central Australia Health Services?
5. What is the cost of the wages for these contracted Doctors and Specialists to the Central Australia Health Services?
6. What is the cost of accommodation for these contracted Doctors and Specialists to the Central Australia Health Services?
7. What Medical Specialties are under-resourced in terms of qualified practitioners in the Central Australia Health Services?
8. What is the cost of recruitment for Doctors and Specialist Physicians to the Central Australia Health Services?
9. How many Nurses and Personal Care Assistants are contracted from outside service providers to make up for the shortfall in staffing in the Central Australia Health Services?
10. What is the daily rate of Nurses and Personal Care Assistants who are contracted to this service?
11. What is the cost of these Nurses and Personal Care Assistants to the Central Australia Health Services?
12. What is the average length of stay for these Nurses and Personal Care Assistants with the Central Australia Health Services?
2. How does the Central Australia Health Services ensure continuity and quality of care if outside contracted medical and nursing staff are used on a regular basis at a medical facility?

OUTPUT GROUP: COMMUNITY TREATMENT AND EXTENDED CARE

OUTPUT: AGED CARE

1. There has been an increase of \$714,000 in funding between the 2016/17 and 2017/18 Budgets. What will this money be spent on and where?

OUTPUT: ALCOHOL AND OTHER DRUGS

1. Why has there been a reduction of \$2,980,000 in funding when comparing the 2016/17 and 2017/18 Budgets in this vital area? Where will this money now be spent?

2. The allocation to this Output was reduced by \$3 million at Mid-Year Review. Please explain why this happened and how it will impact on this Output.

OUTPUT GROUP: PRIMARY HEALTH CARE

OUTPUT: REMOTE PRIMARY HEALTH CARE

1. There has been an increase of \$12,230,000 in funding between the 2016/17 and 2017/18 Budgets. What are the reasons for this increase and what will this increased funding be spent on?
