

STATE BUDGET, HEALTH SERVICE

1617. Mr M.W. Trenorden to the Minister for Health

- (1) I refer to page 1076, Significant Issues and Trends, Country Health Services Review, 3rd dot-point in relation to the outcomes from the Country Health Services Review, and ask will the Minister advise -
 - (a) what is the total cost of implementation of the reforms outlined in the Country Health Services Review Report;
 - (b) has a new allocation been made in this budget to meet these costs or will they be funded from existing resources;
 - (c) if any existing health programs and services will be downgraded or cut as a result of this review;
 - (d) how will people living in regional communities benefit from the changes outlined in the Review; and
 - (e) will any health services currently provided in regional areas be centralised in the Perth metropolitan area as a result of the review?
- (2) I refer to page 1076, Significant Issues and Trends, Country Health Services Review, dot-point 3 and specifically to the implementation of the Government's Country Health Services Review and ask -
 - (a) does the implementation of this review include funding for any new Multi-Purpose Services in the budget;
 - (b) are there any further plans for the establishment of specific Multi Purpose Services; and
 - (c) if not, how will the Government be continuing the development of the multipurpose service initiative?
- (3) I refer to page 1076, Significant Issues and Trends, Health System Reform, 1st dot-point and specifically to the establishment of the Health Reform Committee and ask -
 - (a) will the staff that physically support this Committee come from within the Health Department or from external sources;
 - (b) given the appointment of the Health Reform Committee and its broad mandate to reform the Health system, will the reforms already outlined in the Country Health Services Review be put on hold; and
 - (c) will the Committee's mandate to reform the health system and constrain growth result in reduced health services to people living in regional WA?
- (4) I refer to page 1076, Significant Issues and Trends, Health System Reform, 2nd dot-point and specifically to the priority areas for reform to be pursued by the Health Committee and ask why improved financial reporting and accountability is not featured as either a 'Significant Issue' in the Budget Papers or as a priority area for reform for the Health Reform Committee?
- (5) I refer to page 1076, Significant Issues and Trends, Health System Reform, 2nd dot-point and specifically to the priority areas for reform to be pursued by the Health Committee and ask will the Minister explain what is meant by the '*distribution of services between hospitals and regions*' and advise if this will result in the downgrading or closure of any regional hospitals?

Mr R.C. KUCERA replied:

1.
 - (a) The Country Health Service Review (Review) sets the future direction for country health services and is not a plan of action with an allocated budget. Planning for the implementation of the Review recommendations is being undertaken as part of the core business and annual recurrent budgets of the WA Country Health Service (WACHS).
 - (b) The 2003/04 budget for the Department of Health has been increased significantly from the previous year. The resulting increase in recurrent funding for the WACHS will provide an opportunity to commence development and implementation of some of the strategies outlined in the Review.
 - (c) A major theme of the Review is the development of a country health system that ensures appropriate allocation of resources according to community health needs. As a result, the WACHS will continue to review and evaluate health programs and services to ensure that

- current and future health programs and services are aligned with the health needs and priorities of the community.
- (d) The Review recommends the development of a sustainable and safe service delivery system for the future, so that country people can access the services they need either locally, within the region and when necessary, from a metropolitan specialist service not able to be provided outside the metropolitan area. The Review observed that if much needed health service reforms in the regions are ignored, the sustainability of services for country residents will be at even greater risk in the future than it is at the present time.
 - (e) Rather than centralising health service activity in the metropolitan area, the Review recommends that unified regional systems are to be developed.
2. (a) Multipurpose Services (MPS) are health service arrangements where existing State and Commonwealth health and aged care funding is pooled and supplemented by additional Commonwealth funds to provide an integrated approach to service delivery. As such, new MPS do not require an additional State Budget allocation.
- (b) It is expected that new MPS agreements will be signed with the Commonwealth for Mullewa/Yalgoo/Murchison on 1 July 2003 and for Plantagenet/Cranbrook in 2004. The Review recommends the further development of MPS service models and the WACHS will continue to liaise with interested country communities and with the Commonwealth in regards to future MPS sites.
- (c) Not applicable
3. (a) The staff supporting the Health Reform Committee are from within the Department of Health as well as an officer on secondment from the Department of Treasury and Finance.
- (b) The Health Reform Committee aims to build on work already underway or completed within the Department of Health, including the reforms outlined in the Country Health Services Review.
- (c) No. The health needs of people living in regional Western Australia will continue to be met. The Health Reform Committee aims to ensure that public health services provided to the Western Australian community are high quality, safe, appropriate and efficient. As identified in the Country Health Services Review, enhancements to health services in regional Western Australia will occur by ensuring services meet the health needs of the community.
4. Financial accountability is incorporated as part of the Health Reform Committee's agenda, and therefore did not feature in the Budget Papers. The Committee aims to ensure that all recommendations are fully costed and are financially sustainable. In addition, robust cost/benefit analysis methodology will be developed to support future capital investment proposals.
5. The Government has no plans to downgrade or close any regional hospitals. The Health Reform Committee agrees that a major underlying principle of the reform agenda is the need to both improve the quality and effectiveness of clinical services, and ensure expenditure growth is sustainable within fiscal constraints set by Government.