

Our reference: ACTHDFOI23-24.14



#### **DECISION ON YOUR ACCESS APPLICATION**

I refer to your application under section 30 of the *Freedom of Information Act 2016* (FOI Act), received by the ACT Health Directorate (ACTHD) on **Tuesday 12 September 2023**.

This application requested access to:

All ministerial brief and attachments related to "Parliamentary and Governing Agreement and Election Commitment Reporting for ACTHD and CHS" since the 8th of June 2022'.

I am an Information Officer appointed by the Director-General of ACTHD under section 18 of the FOI Act to deal with access applications made under Part 5 of the Act. ACTHD was required to provide a decision on your access application by (date).

I have identified 3 documents holding the information within scope of your access application. These are outlined in the schedule of documents included at Attachment A to this decision letter.

## **Decisions**

I have decided to:

grant partial access to three documents;

My access decisions are detailed further in the following statement of reasons and the documents released to you are provided as <u>Attachment B</u> to this letter.

In reaching my access decision, I have taken the following into account:

- The FOI Act;
- The contents of the documents that fall within the scope of your request;
- The Human Rights Act 2004.

#### **Partial Access**

I have decided to grant partial access to all three documents. These documents contain information that I consider, on balance, to be contrary to the public interest to disclose under Section 16 of the FOI Act.

### Public Interest Factors Favouring Disclosure

The following factors were considered relevant in favour of the disclosure of the documents:

- Schedule 2, 2.1 (a)(i) promote open discussion of public affairs and enhance the government's accountability; and
- Schedule 2, 2.1 (a)(ii) contribute to positive and informed debate on important issues or matters of public interest.

### Public Interest Factors Favouring Non-Disclosure

The following factors were considered relevant in favour of the non-disclosure of the documents:

• Schedule 1.6, 1(d) Information the disclosure of which would reveal any deliberation of Cabinet (other than through the official publication of a Cabinet decision).

All three documents are partially comprised of information classified as cabinet information the disclosure of which would reveal any deliberation of Cabinet (other than through the official publication of a Cabinet decision), and under Schedule 1.6 Cabinet Information, it is taken to be contrary to the public interest to release.

On balance, the information identified factors favouring disclosure were outweighed by the factors favouring non-disclosure as I have determined that the information would be identified is contrary to the public interest and have decided not to disclose this information.

#### Charges

Processing charges are not applicable to this request.

### **Disclosure Log**

Under section 28 of the FOI Act, ACTHD maintains an online record of access applications called a disclosure log. The scope of your access application, my decision and documents released to you will be published in the disclosure log not less than three days but not more than 10 days after the date of this decision. Your personal contact details will not be published.

https://www.health.act.gov.au/about-our-health-system/freedom-information/disclosure-log.

## **Ombudsman review**

My decision on your access request is a reviewable decision as identified in Schedule 3 of the FOI Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published in ACT Health's disclosure log, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman GPO Box 442 CANBERRA ACT 2601

Via email: <u>ACTFOI@ombudsman.gov.au</u> Website: ombudsman.act.gov.au

## ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision. Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal Allara House 15 Constitution Avenue GPO Box 370 Canberra City ACT 2601

Telephone: (02) 6207 1740 http://www.acat.act.gov.au/

## **Further assistance**

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on (02) 5124 9831 or email <a href="mailto:HealthFOI@act.gov.au">HealthFOI@act.gov.au</a>.

Yours sincerely

Catherine Ellis

**Senior Director** 

Ministerial and Government Services

18 October 2023



## FREEDOM OF INFORMATION SCHEDULE OF DOCUMENTS

Please be aware that under the Freedom of Information Act 2016, some of the information provided to you will be released to the public through the ACT Government's Open Access Scheme. The Open Access release status column of the table below indicates what documents are intended for release online through open access.

Personal information or business affairs information will not be made available under this policy. If you think the content of your request would contain such information, please inform the contact officer immediately.

Information about what is published on open access is available online at: <a href="http://www.health.act.gov.au/public-information/consumers/freedom-information">http://www.health.act.gov.au/public-information/consumers/freedom-information</a>

APPLICANT NAME	WHAT ARE THE PARAMETERS OF THE REQUEST	FILE NUMBER
	I would like to request all ministerial brief and attachments related to "Parliamentary and Governing Agreement and Election Commitment Reporting for ACTHD and CHS" since the 8th of June 2022.	ACTHDFOI23-24.14

Ref Number	Page Number	Description	Date	Status Decision	Factor	Open Access release status
1.	1-5	GBC22/282 PaGA Brief Report 3 - Minister for Mental Health (June)	June 2022	Partial Release	Schedule 1.6 (1) Cabinet Information	Yes
2.	6-9	GBC22/679 PaGA Brief Report 4 - Minister for Mental Health (December)	Dec 2022	Partial release	Schedule 1.6 (1) Cabinet Information	Yes
3.	10-17	GBC22/680 PaGA Brief Report 4 - Minister for Health (December)	Dec 2022	Partial release	Schedule 1.6 (1) Cabinet Information	Yes

Total Number of Docu	



## **ACT Health Directorate**

То:	Minister for Mental Health	Tracking No.: GBC22/282
Date:	20 June 2022	
Through:	Colm Mooney, A/g Deputy Chief Executive Office	cer, Canberra Health Services
From:	Rebecca Cross, Director-General  Dave Peffer, Chief Executive Officer, Canberra F	Health Services
CC:	Deborah Anton, Deputy Director-General	
Subject:	Parliamentary and Governing Agreement & Elec – Internal Report 3 (ACT Health Directorate and	
Critical Date:	Not Applicable	
Critical Reason:	Not Applicable	
2. Note the Who	e information contained in this brief; and e change in reporting timelines from quarterly to ble of Government reporting process to Cabinet, r, Treasury and Economic Development Directors	coordinated by Chief
	Emma Davidson MLA	Noted / Please Discuss
Minister's Office Fe		

## Background

- 1. On 2 November 2020, ACT Labor and the ACT Greens signed a Parliamentary and Governing Agreement (PaGA) for the 10th Legislative Assembly, agreeing to work constructively and collaboratively to govern in the best interests of ACT residents.
- 2. The Agreement stipulates that the Chief Minister and ACT Greens leader will brief all ACT Labor and Greens MLAs on implementation of this Agreement at least every six months and will make a public statement on progress every year.
- 3. In February 2022, Chief Minister, Treasury and Economic Development Directorate (CMTEDD) sought updates from Directorates on commitments only within Appendix 1 and Appendix 2 of the PAGA which was considered by Cabinet in April 2022.
- 4. For the CMTEDD reporting round, ACT Health Directorate (ACTHD) provided an update on the progress of **PaGA 023** *MyHome in Curtin*. This initiative falls within your portfolio responsibility as the Minister for Mental Health and is currently being led by ACTHD. There are no other items that fall within the responsibility of the ACTHD or Canberra Health Services (CHS) captured within the CMTEDD reporting scope.
- 5. You have previously been briefed on the internal reporting process undertaken by ACTHD and CHS to record, monitor and report on all health, mental health and justice health portfolio commitments in the PaGA, in particular Appendix 3 and 4 which include the majority of health related commitments.
- 6. The information also includes commitments sourced from the Chief Minister's commissioning letters provided to Ministers from the beginning of the current term of government. The system allowed for regular quarterly updates to be provided to you on the status of all mental health and justice health portfolio commitments as well as inform updates to Whole of Government (WoG) reporting.

### Issues

7. ACTHD undertook the third round of reporting on commitments within PaGA and has sought input from ACTHD business units and CHS on identified initiatives that fall within your portfolio responsibilities - refer to Attachment A.

### Status Update as at June 2022

- 8. The progress update at <u>Attachment A</u> details the implementation status and provides progress in relation to all health related PaGA.
- 9. In summary, of nine initiatives, the following status was recorded:
  - a. five are on track (PaGA16.1, 16.3, 16.4, 16.6, 2.8);
  - b. three have not yet commenced (PaGA 15.4,16.2, 16.5); and
  - c. one delayed (PaGA 16.2)

## Reporting timeframes

- 10. To date, you have been provided with quarterly updates on the progress of relevant PaGA initiatives and election commitments.
- 11. Quarterly updates provided on initiatives have been relatively minor and incremental, and adjusting to a longer timeframe for reporting will provide for more substantive updates.
- 12. To ensure adequate updates are provided and to align with CMTEDD current timeframes, we will amend the current reporting timeline from quarterly to biannual. CMTEDD currently coordinate six-monthly reporting to Cabinet, including an internal status report and a public status report.
- 13. We anticipate on providing you with the next round of updates late 2022.

## **Financial Implications**

14. Not applicable.

### Consultation

## Internal

15. All business areas within ACTHD were consulted for input to Report 3.

## Cross Directorate

16. ACTHD worked closely with CHS to inform updates on initiatives listed with Attachment A for this reporting round.

## External

17. Not Applicable.

## **Work Health and Safety**

18. Not applicable.

## **Benefits/Sensitivities**

19. To ensure objectives of the reporting mechanism are met, input and updates are required from all areas within ACTHD and CHS to ensure commitments are met.

### Communications, media and engagement implications

20. Not applicable.

Signatory Name: Rebecca Cross, Director-General Phone: 49400

Dave Peffer, Chief Executive Officer,

Canberra Health Services

## **OFFICIAL**

Action Officer: Chadia Rad, Senior Director, Phone: 0406 306 009

Ministerial and Government Services

## **Attachments**

Attachment	Title
Attachment A	Parliamentary and Governing Agreement & Election Commitments
	Reporting – Internal Report 3

leference No	Category			Lead Directorate	Expected Commencement Date	Expected Completion Date	Report 3 (June 2022) Progress Update	Budget	De ivery Status
11	Commissioning Letter	Employing an additional suction Health Service Aschool and other Drugs nurse is Billmeter to increase support available. For proving people engaged with the justice system to integrate service needs will work with young people on community-based orders in the integrated service needs will work with young people on community-based orders in determinion at Billmeth and post-release conflowarding with Official off Youth Protection. Services and community partners including Gogan Guilwen Youth Aboriginal Corporation and Tel Motifs Condidation.			February 2021	TRA	Following two unsuccessful permanent recruitment attempts this position was recruited to on a temporary basis for 12 months anding Jenuary 2023. Permanent recruitment will again commence in November 2022.	February 2021 mini budget - \$475 000	Delayed
GA 15.4	Maternity	Increase investment in Perinatal Mental Health and Wel being	Minister for Mental Health		2022-23	2024-25	Mental Health and Suidole Prevention Bilaterial Agreement between ACT and Australian Government provides flunding to support perintual mental health screening. The ACT Covernment has developed an action pleat to address the Government's multiple maternity related commitments. This plan was endorsed by Cabinet in April 2022 with public release of the plan expected in the coming months. Implementation of actions within the plan will commence shartly following project planning and implementation scheduling.	Funding may be sought through a future Budget process	Not yet commence
6A 16.1	Mental Health and Youth Mental Health	Expand PACER to two teams to service the North and South of Camberra 7 days a week	Minister for Mental Health	CHS	February 2022	July 2022	The second Police Ambulance and Cliniciae Early Response (PACER) team — PACER AMT commenced on 21 February 2022. The team operates from 8:00 to 18:30. Notwithstanding the delays this commitment is now on track.  An external evaluation of the PACER program is in the process of being commissioned which will make recommendations for the ongoing operation of the second PACER team should further funding for the second team be provided beyond the Second PACER team should further funding for the second team.	\$1.065M1	On track
GA 16.2	Mental Health and Youth Mental Health	Build 5 additional supported accommodation houses over the next 4 years	Minister for Mental Health	CHS	Dec-21	Dec-24	Delayed - expected completed 30/08/2022.  Draft Model of Care to be sent to internal and external stakeholders for consultation by mid June 2022.  Protect fellowing the answers from prostits.	\$0	Delayed
GA 16.3	Mental Health and Youth Mental Health	Refurbish 10 beds at the Brian Hennessy Rehab litation Centre for transitional and rehab litation accommodation for consumers with enduring mental illness (\$10 Million Capital expenditure plus \$3.25 Mil Ion over 4 years)	Minister for Mental Health	CHS	Dec-21	Jun-24		5184 000	Not yet commenced
wGA 16.4	Mental Health and Youth Mental Health	Sout community course ling mentoring home violits advocacy and case management for 10-35 year olds	Minister for Mental Health	ACT Health	October 2000	2004-25	Additional one-off funding was a located through the COVID-19 Mental Health and Community Support Packages.  The OMPMY is continuing to working with the ACT youth Coaldion and the Capital Health Network to finalise a project on the needs of young people with moderate mental health concerns.  The Bilderal Agreement under the National Mental Health and Solidde Prevention Agreement provides matched flunding for two new services.  1. Kilds heal to health program to support emerging and moderate mental health concerns for children.  2. Youth at Risk to support young people with complex needs including emerging mental health concerns. Co-cleaging and employment of the services will communicate the July 2022.  The Implementation of the MOST (Moderated Chiline Social Therapy) platform in the ACT is progressing to the inconcernent plants.  Funding of Parentilline (family support program) and CatholicCare Youth and We Being is ongoing.	Detailed in Progress update.	On track
uGA 16.5	Mental Health and Youth Mental Hea th	Establish a psychologist subsidy scheme for young people and people on low incomes (S2M over 4 years)	Minister for Mental Health	ACT Health	Unknown	Unknown	Under the National Agreement for Mental Health and Suicide Prevention the Commonwea th Government has responsibly for primary care. Feas bility study recommended to consider impact on this Agreement	S2M over four years. Funding to be identified hrough a future budget process	Not yet commenced
wich 16.6	Mental Health and Youth Mental Health	hearone programs that target and support youth mental health eating disorders acched/dring segmental health First Mations mental health First Mations suicide prevention & postvention and respite for mental health care's	Minister for Mental Health	ACT Health	October 2000	Ongoing	The ACT Government has made a range of investments to support this adde range of sub-sectors. Investments for youth mental health are described in PGA-23 and 15.4.  Examples of wider mental health program development include:  The eating disorders project is broadly on track.  The ACT Eating Disorders Chinical History beautiful to the Commission of the	detailed in Progress Update	On track
#GA 2.8	De ivering High Quality Health Care for Camberrans	Invest \$15 million in more mental health support for Catherra's young people	Minister for Mental Health	ACT Health	October 2020	2024-25	An additional SE3 million was affocuted in the August 2021 ACT budget. The funding for Pseunitine and CarbolicCare was executed on track. The rolling cut of the MOST program has taken longer than expected due to the consideration on how to roll out in the ACT incidualing the possible expension to include a community based clinical enviror and shretfled the appropriate procurement serbood. It has been decided to progress an 12 month thall with an evaluation to inform longer term funding enrangements for MOST.  As part of the Bilateral Agreement under the National Mental Health and Solidde Prevention Agreement two new services for ACT young people will be jointly funded. The ACT funding for the two services totals approximately \$2.5 million over the 2 year agreement - ending in 2026.  The first is a 16cs Healt to Health program to support energing and moderate mental health concerns for children. The second is a Youth at Risk to support young people with complex needs including emerging mental health concerns.	On track	On track





# **ACT Health Directorate**

То:	Minister for Mental Health	Tracking No.: GBC22/679						
From:	Rebecca Cross, Director-General							
	Janet Zagari, Acting Chief Executive Officer, Canberra Health Services							
Subject:	Parliamentary and Governing Agreement & Electorian Report 4 (ACT Health Directorate and							
Critical Date:	Not Applicable							
Critical Reason:	Not Applicable							
Recommendation								
That you note the i	nformation contained in this brief.							
		Noted / Please Discuss						
	Emma Davidson MLA	//						
Minister's Office Fe	eedback							

## **Background**

- 1. On 2 November 2020, ACT Labor and the ACT Greens signed the Parliamentary and Governing Agreement (PaGA) for the 10th Legislative Assembly, agreeing to work constructively and collaboratively to govern in the best interests of ACT residents.
- 2. The PaGA stipulates that the Chief Minister and ACT Greens leader will brief all ACT Labor and Greens MLAs on implementation of this Agreement at least every six months and will make a public statement on progress every year.
- 3. In September 2022, Chief Minister, Treasury and Economic Development Directorate (CMTEDD) sought updates from Directorates on commitments only within Appendix 1 and Appendix 2 of the PaGA which was considered by Cabinet in November 2022.
- 4. For the CMTEDD reporting round, ACT Health Directorate (ACTHD) provided an update on the progress of PaGA 023 *MyHome in Curtin*. This initiative falls within your portfolio responsibility as the Minister for Mental Health and is currently being led by ACTHD. ACTHD is seeking to transfer reporting responsibility for this commitment to the Community Services Directorate. There are no other items that fall within the responsibility of the ACTHD or Canberra Health Services (CHS) captured within the CMTEDD reporting scope.
- 5. You have previously been briefed via an internal reporting process undertaken by ACTHD and CHS to record, monitor and report on all mental health and justice health portfolio commitments in the PaGA, in particular Appendix 3 and 4 which include the majority of health related commitments.
- 6. This reporting also includes commitments sourced from the Chief Minister's commissioning letters provided to Ministers from the beginning of the current term of government.
- 7. Internal reporting is designed to provide you with updates on the status of all mental health and justice health portfolio commitments rather than just commitments updated as part of the Whole of Government (WHoG) reporting process.

#### Issues

8. ACTHD undertook the fourth round of reporting on commitments within PaGA and has sought input from ACTHD business units and CHS on identified initiatives that fall within your portfolio responsibilities. A full report is available at <a href="https://example.com/Attachment-A">Attachment A</a>.

## Status Update as at December 2022

- 9. In summary, of the 10 initiatives led under your Ministerial portfolios, the following statuses were recorded:
  - a. two are delivered (PaGA 2.8, CL 1);
  - b. four are on track (PaGA16.1, 16.4, 16.6, 17.7);
  - c. three have not yet commenced (PaGA 15.4,16.3, 16.5); and
  - d. one is delayed (PaGA 16.2).

10. ACTHD anticipates providing you with further updates mid-2023, to be aligned closely with WHoG reporting activities administered by CMTEDD.

## **Financial Implications**

11. Not applicable.

#### Consultation

## <u>Internal</u>

12. All business areas within ACTHD were consulted for input to Report 4.

### **Cross Directorate**

13. ACTHD worked closely with CHS to inform updates on initiatives listed with Attachment A.

## External

14. Not applicable.

## **Work Health and Safety**

15. Not applicable.

## **Benefits/Sensitivities**

16. To ensure objectives of the reporting mechanism are met, input and updates are required from all areas within ACTHD and CHS to ensure commitments are met.

## Communications, media and engagement implications

17. Not applicable.

Signatory Name: Rebecca Cross, Director-General Phone: 5194 9400

Janet Zagari, A/g Chief Executive Officer, Canberra Health Services

Action Officer: Cath Ellis, A/g Senior Director, Phone: 0466 922 505

Ministerial and Government Services

### **Attachment**

Attachment	Title
Attachment A	Parliamentary and Governing Agreement & Election Commitments
	Reporting – Internal Report 4

Security of the security of th				etione.			
The state of the s				ommencement	Report 4 (Dec 2022)- Progress Update		
See and the Ministerior of Ministeri	eference No	Increase support available. For young people engaged with the justice system the integrated service needs will work with young people on community-based orders in detention at Bimbert and post-release to laborating with Child and Youth Protection	Leed Portfolio D	ate Expected Completio	Dute	Budget  Eabrouru 2021 mini horfort	Delivery Status
See the second section of the section of the second section of the section of the second section of the section of the second section of the section of the second section of the section of the second section of the secon	LI		Minister for Justice Health Fe	ebruary 2021	This position has been filed and will be recruited to on an ongoing basis should a vacancy arise.		Delivered / Complete
See 1 Mary 1 Mar	eGA 15.4	Increase investment in Perinatal Mental Health and Wellbeing	Minister for Mental Health 20	022-23 2024-25	the scope of work to be completed to a ign ACT with national data set. The 2022-23 ACT Budget provided \$300 000 over two years for a scoping study on a perinatal mental	Funding may be sought through a future Budget process.	Not yet commenced
Head to a bill a colination of the control of the control of the colination of the c					The evaluation has commenced and is due for completion in mid-Marich however this may be subject to change due to data analysis. The methodology will include a desistop review commenced are many commences surveys and earning succurrent interviews and focus groups with consumers and carefully members.  MESP input: Fo lowing budget commitment to continue funding the second team and to fund an independent evaluation. The Mental Health and Suicide Prevention Division		
All 14 Mills of adjunction amongs and an approximation of the largest and particularly and	IGA 16.1	Expand PACER to two teams to service the North and South of Canberra 7 days a week	Minister for Mental Health Fe	abruary 2022 July 2022	Mental Health and Strategic Po key is undertaking a strategic analysis of housing for people with mental health which will consider data needs and gaps. This will assist in building an evidence base for future investment including in response to this commitment.	\$1.065Mil	On track
in the absolute accommendation for commentary with and of the Water of March 12 Million and the Water of Mar	GA 16 2		Minister for Mental Health De	ec-21 Dec-24		\$0	Delayed
Sin hand to head to proper Mark 1 thresh till bis marked with motion for collings aged (2) was to all or jumped mediduliphings ammented bisomotion and imports in children as the modern important of the proper mediduliphings ammented bisomotion and imports in children as the modern important of the proper mediduliphings ammented bisomotion and imports in children as the modern important of the proper mediduliphings ammented bisomotion and imports in children as the modern important of the proper mediduling and important in the proper mediduling and important	AGA 16.3	rehabilitation accommodation for consumers with enduring mental illness (\$10 Million	Minister for Mental Health D	ec-21 Jun-24		5184 000	Not wet commenced
Miles Establish a psychologist subsidy scheme for young people and people on low incomes Miles (S2M over 4 years)  Miles for Mestal Health Unknown  Miles for Mestal Health Unknown  The ACT Government has respond a greenment for Mestal Health Unknown  The ACT Government has respond a people on the dependence on the Agreement of the Mestal Health Unknown  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  this and miles by the ACT Government has respond by for primary care. Feelib By  The ACT Government has respond by for primary care. Feelib By  The ACT Government has respond by for primary care. Feelib By  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  The ACT Government has respond by for primary care. Feelib By  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  The ACT Government has respond by for primary care. Feelib By  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  The ACT Government has respond by for primary care. Feelib By  S2M over four years. Funding to be identified through a finiture budget process  The ACT Government has a finite budget process for the Early Intervention in Finite budget and form a supportance of a milestified potential for the Early Intervention in Finite budget and form a support process of the Indian support process of the Indi	aria 164		Minister for Mental Haalth (1	vrober 2020 - 2024-25	commence project planning consultation and co-design.  Yoursh at 16th Sids Head to Neath Improgram  The National Mental Health and Suicide Prevention Bilateral Agreement includes funding to develop and estab is a youth mental health institute to fill identified gaps in the ACT sardice system to support youth withfor at risk of moderate mental III-bealth while ensuring the enhancement and integration of the existing youth mental health services. A Project Director and Assistant Director have been appointed to commence project planning consultation and co-design but lifting on a 2021 scoping study.  The Project is a fee Planning commention and design place which errors includes antivery including the development of a project management in an antiverse of the Project is a fee Planning consultation and to design project planning to the project planning to the Project in the Project is an antiverse of the Project is an an		O mai
Sign were dynam?  Minister for Mental Pleadib Unknown  Study Accommended to consider impact on this Agreement  The ACT Cooverments have made as range of restrictions to support this wide range of sub-section, investments for youth mental health (MOST fids Head to Health Youth at  The ACT Cooverments have made as range of restrictions to support this wide range of sub-sections, investments for youth mental health (MOST fids) Head to Health Youth at  The Expending Public Services for Esting Disorders  The Expending Disorders  The Expe	WGA 16.4	10-25 year olds	Minister for Mental Health O	ctober 2020 2024-25		Detailed in Progress update.	On track
Project has commenced to Identify Profeting beauting approaches to supporting people with Miff concerns and AOD misuse across the continuum of medi and service systems. This will illentify be they provided in the interaction between the Miff and AOD systems in the ACT develop in Farmwook For sankty for support services to unmore seed and develop business cases. First Nations Mental Health and disclafe Prevention Services to be delivered by Thirrill has progressed alover than Initially planted due to community feedback. A governance group has been estable label to support the delivery by Appropriate Abortifying land Torres Strait labelander Suicide Prevention Services and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service development to ensure self-determination of a service model that will interest menethy. The Abortifying and Torres Strait labelander Suicide Prevention Services and will meet menethly. Thirrill is currently flocusing on community engagement co-design and service development to ensure self-determination of a service model that will interest menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and service and service and will meet menethy. Thirrill is currently flocusing on community engagement co-design and service and will meet menethy. Thirrill is currently flocusing on community engagement conduction and service	wGA 16.5	Establish a psychologist subsidy scheme for young people and people on low incomes (\$25th over 4 years)	Minister for Mental Health U	nknown Unknown	study recommended to consider impact on this Agreement  'The ACT Converment has made a range of investments to support this wide range of sub-sectors, investments for youth mental health (MOST IOIs Head to Health Youth at  Fisk and Mining Middle are described in PARA 2.8 and 15.4.  Examples of wider mental health investment include:  Examples of wi	\$2M over four years. Funding to be identified through a future budget process	Not yet commenced
Such 15 6 prevention is portivention and resistic for Mental Health October 2020 Ongoing - an initiative through the eating disordent clinical hub.  Obstrack  The combined makes of through the 2020-21, 2021-22 and 2022-23 equates to 399.7 in the 2022-23 financial year - excluding time limited COVID-19 and		alcohol/drug use/mental health First Nations mental health First Nations suicide			Project has commenced to ident by evidence based approaches to supporting people with Mrt concerns and ACO misuse across the continuum of need and service systems. This will ident by the bay points of interaction between the Mrt and ACO systems in the ACT develop a framework for service to laboration and identify potential new responses to umme needs and develop business cases. First Nations Mental Realth and Suidise Prevention The codelign process for the new Suidise Prevention Service to be delivered by Thierilli has programed above than initially planned dus to community feedback. A governance The codelign process for the new Suidise Prevention Service to be the Suidise Prevention The codelign process for the new Suidise Prevention Service to be suited to the Suidise Prevention The codelign process for the new Suidise Prevention Service and Service Servic	detailed in Progress Update. CHS logut. ESED - Funding for the ESED is provided jointly by ACT Government and the Commonwealth for the first flour years for a total of \$1.914.000 over four years.	
					- an initiative through the eating disorders clinical hub.  The combined number of additional FTE planned through the 2020-21 2021-22 and 2022-23 equates to 399.7 in the 2022-23 financial year – excluding time limited COVID-19 and		
46A 2.1 Employ an additional 400 doctors nurses and alled health worker  Minister for Health This work is being To be confirmed.  Distrack  As additional funding and supports for youth mental health was provided in the 21-22 and 22-23 budgets this commitment is considered to have been delivered. An update on  As additional funding and supports for youth mental health was provided in the 21-22 and 22-23 budgets this commitment is considered to have been delivered. An update on  As additional funding and supports for youth mental health was provided in the 21-22 and 22-23 budgets this commitment is considered to have been delivered. An update on  detailed in Progress Update  Delivered / Go  Deli	STREET.	W Tolerand Market Market St. 18		annerse and	As additional funding and supports for youth mental health was provided in the 21-22 and 22-23 budgets this commitment is considered to have been delivered. An update on	350000 K0000	On track  Delivered / Complete



# **ACT Health Directorate**

То:	Minister for Health	Tracking No.: GBC22/680					
CC:	Michael Culhane, A/g Deputy Director-General,	ACT Health Directorate					
From:	Rebecca Cross, Director-General Janet Zagari, Deputy Chief Executive Officer, Ca	nberra Health Services					
Subject:	Parliamentary and Governing Agreement & Elec – Internal Report 4 (ACT Health Directorate and						
Critical Date:	Not Applicable						
Critical Reason:	Critical Reason: Not Applicable						
Recommendations That you note the i	nformation contained in this brief.	Noted / Please Discuss					
	el Stephen-Smith MLA	//					
Minister's Office Fe	eedback						

## Background

- 1. On 2 November 2020, ACT Labor and the ACT Greens signed the Parliamentary and Governing Agreement (PaGA) for the 10th Legislative Assembly, agreeing to work constructively and collaboratively to govern in the best interests of ACT residents.
- 2. The PaGA stipulates that the Chief Minister and ACT Greens leader will brief all ACT Labor and Greens MLAs on implementation of this Agreement at least every six months and will make a public statement on progress every year.
- 3. In September 2022, Chief Minister, Treasury and Economic Development Directorate (CMTEDD) sought updates from Directorates on commitments only within Appendix 1 and Appendix 2 of the PAGA which was considered by Cabinet in November 2022.
- 4. The ACT Health Directorate (ACTHD) did not provide any updates on items that fall under your portfolio as the Minister for Health as there are no items captured within the current CMTEDD reporting scope.
- 5. ACTHD, in collaboration with Canberra Health Services (CHS), undertakes regular internal reporting that is designed to provide you with updates on the status of all health portfolio commitments, noting these fall out of scope of the current Whole of Government (WHoG) reporting process.
- 6. You have previously been briefed via this internal reporting process for commitments included in Appendix 3 and 4 of the PaGA. This reporting also includes commitments sourced from the Chief Minister's commissioning letters provided to Ministers from the beginning of the current term of government.

#### Issues

7. ACTHD undertook the fourth round of reporting on commitments within PaGA and has sought input from ACTHD business units and CHS on identified initiatives that fall within your portfolio responsibilities. A full report is available at <a href="Attachment A">Attachment A</a>.

### Status Update as at December 2022

- 8. In summary, of 49 initiatives, the following status was recorded:
  - a. 5 are delivered (Labor 6, 10.13,11.3, 12.15, PaGA 12.1d))
  - b. 30 are on track (Labor 1.6,10.16, 10.16a, 10.16b, 10.16c, 10.18, 10.2, 12.20, 7.6, PaGA 12.1a, 12.1b, 12.1c, 12.1e, 12.1f, 12.3, 14.2, 15.3, 17.7, 2.1, 2.2, 2.3, 2.4, 2.5, 2.6, 2.7, 20.3, 7.1, 7.2, 7.5, 9.3);
  - c. 4 are under consideration (Labor 11, 12.4b,c,d&e, PaGA20.5, 7.4)
  - d. 6 have not yet commenced (Labor 4.12,9.3,PaGA 12.2, 12.4, 15.1, 15.2); and
  - e. 4 are delayed (Labor 10.14,2.8c, PaGA 20.6,7.3).
- 9. ACTHD anticipates providing you with further updates mid-2023, to be aligned closely with WHoG reporting activities administered by CMTEDD.

## **Financial Implications**

10. Not applicable.

#### Consultation

#### Internal

11. All business areas within ACTHD were consulted for input to Report 4.

## **Cross Directorate**

12. ACTHD worked closely with CHS to inform updates on initiatives listed within Attachment A.

#### External

13. Not Applicable.

## **Work Health and Safety**

14. Not applicable.

## **Benefits/Sensitivities**

15. To ensure objectives of the reporting mechanism are met, input and updates are required from all areas within ACTHD and CHS to ensure commitments are met.

## Communications, media and engagement implications

16. Not applicable.

Signatory Name: Rebecca Cross, Director-General Phone: 5194 9400

Janet Zagari, Deputy Chief Executive Officer, Canberra Health Services

Action Officer: Cath Ellis, A/g Senior Director, Phone: 0466 922 505

Ministerial and Government Services

## **Attachments**

Attachment	Title
Attachment A	Parliamentary and Governing Agreement & Election Commitments
	Reporting – Internal Report 4

Accessorations.		22.00		18100 000000000000000000000000000000000			No.	
Reference No	Category	Initiative	Lead Portfolio	Expected Commencement Date	Expected Completion Date	Report 4 (Dec 2022)- Progress Update	Budget	Delivery Status
						Amoesty from disputation period ended on 30 June 2022. This means that breaches to the agreement can now be managed via the disputation process within the ACT'FS Nursing and Midwifery RA. CHS and CFHB continues to refine their reporting processes. Prior in time reports continue as neither healt service is yet to find a solution to provide he resporting of compliance. ACT HO reporting of compliance is progressing through the digital solution team and has been provided for endorsament through the Ratio implementation itserring. Committee. Preliminary work has commerced in estription of their Two Next Design Encluded in the EA largening: that has begun.		
		Progress as a matter of priority negotiations for the new enterprise agreement for nurses and				Through the lens of Nursing and Midwifery to Patient Ratios a national nursing and midwifery recruitment campaign launched on 26 September 2022. The campaign is almed at recruiting people to live and work in Carberra. currently there have a total of 59 inquiries and applicants 2 people have		
Labor 1.6	More health care workers	midwives including the implementation of mandated nurse/midwife to patient ratios.  Establish a public non-surgical program for knee osteoarthritis using the Good Living with Arthritis:	Minister for Health	Ratios began being implemented at CHS	ar December 2022	been appointed to CHS with others still in the interview process.	Funded through 2020-21 and 2021-22 Budget HEA E02 (2021-22 budget).	On track
Labor 10.13	Empowering patients for better healthcare	Denmark (GLA:D) model of care.	Minister for Health	8 June 2021	Ongoing	Complete: The GLA:D clinic has been expanded to another health centre and permanently funded from	n Funding may be sought through a future budget process.	Delivered/Complete
		For people under 40 who are diagnosed with cancer and don't have more than one biological child a re-elected labor Government wil offer a single point of contact to access fert fity preservation. We will work with esting providers to delive pappropriate refringly preservations switches for individual in all work with esting providers to delive pappropriate refringly preservations switches for individual in the content of the content		5200	2000			
Labor 10.14	Empowering patients for better healthcare	patients according to their needs.  Continue to improve access to telehealth and support this with nurse-led services and integration with	Minister for Health	2023-24	Ongoing			Delayed
Labor 10.16	Empowering patients for better healthcare	General Practice other primary care providers and non-government partners.	Minister for Health	Ongoing	2023	See commnents at Labor 10.16 (a) (b) and ♥	No additional funding required	On track
Labor 10.10	corporating parameter for prices theretically	A service chose is transit, that is invarious was now. Known many the court.	Perilado IUI Freatul	Organia	2043	Telehealth Continues to be used across a variety of clinical services including the COVID Care@Home program. There are currently over 284 c linics set up to use telehealth across CRS. In 2021-22 there were 58 545 telehealth appointments conducted by CRS (comprising 11 423 video and 47 321 stelephone appointments). Work is commencing to develop c. 615 framework for virtual care to guide the delivery of telehealth across services. PPP program ACPTIO provides funding for telehealth services through Healthfulces for telephone appointments. ACPT all vortices were 3 282 the services are serviced to the control of	X .	Will state.
Labor 10.16 (a)	Empowering patients for better healthcare	Continue to improve access to telehealth	Minister for Health			July 2022 2 959 in August 2022 and 2 458 in September 2022.	no additional funding required	On track
Labor 10.16 (b)	Empowering patients for better healthcare	Improve Access to nurse led services	Minister for Health			The Walk-in Centres (WICs) continue to provide nurse-led services across the Territory having treated around 70 000 people with non-life threatening hyines: Binesses and a lineate his year (PTD November 2022). Since September 2022 the nurse-led WiCs began treating children aged one year and older providing more options for finitise with young children to seek local fine treatment for minor allments while dwerting young children wave from our emergency departments where appropriate. Previously only children aged the and above could be seen at the Workshop of the Company		On track
Labor 10.16 (c)	Empowering patients for better healthcare	lintegration of support services with general Practice other primary care providers and non- government partners	Minister for Health	Ongoing		CHS continues to progress its integrated Care Program with a focus on opportunities for improved integration and interdisciplinary care to provide patient-centred care. This has included CHS participation in the annual of Po icity Forum on 27 October 2022 which included a breakout session or integrated care to obtain feedback them GHS on future opportunities for better integrated on one whealth hubs in the community.  ACTHO PPP learn in August 2022 under the Prinary Caire Grants Round grants were awarded to Merfellam Rectif Practice Junction Youth Services and Companion House for integrated prinary care projects. The Integrated Care WHG has agreed on principles of Integrated care. Under Stage 3 of the Delivering Better Care programs, flanding for integrated primary care projects has been extended to 3 June 2026 for Directions Junction and Companion House.  A CHS integrated Care Framework is being developed to ensure a consistent CHS understanding and approach to integrating care across our service and its interface with other providers across the broader health system. It describes the foundations and principles of integrated care coldining the system makeds and provider partnerships required to captor Integrated or care.		On track
		Continue to invest beyond 2021 to implement the Stroke Foundation's Specia ist F.A.S.T education		Funding for two existing Stroke Foundation projects (beginning 2018) ha been extended. New funding for a 3rd project will commence following the	6	CHS legut: The CHS Stroke Service is aware and supportive of the boosted funding for the F. A. S. T. education program but has no role beyond this. PPF input: There are F.A.S.T. implementation plans for GP education event in early 2023 and that recruitment of Strokeside speakers and ethery of Strokeside stack to community have arready commenced. There has been the delivery of stroke	Funded through the 2021-22 Budget HEA E16	
Labor 10.18	Empowering patients for better healthcare  Empowering patients for better healthcare	program.  Invest 57 m Illon to introduce a new model of patient navigation to better coordinate care across the health system for people with chronic and complies conditions.	Minister for Health  Minister for Health	2021/22 budget announcements  January 2022	30/06/22	education to staff in the ACT health system with a National Webinar Suries and a training session  CHS input: The Integrated Care Program (ICP) team are continuing to explore and identify current examples of integrated care models and their als liy to be expanded or to replicate across the health system with particularly interest in models of care to sastie people with complex meeds. The ICP are currently focused on exploring infliations that can improve integration of care for two priority cohorts people with mental health lines and ocnoratio conditions and people with foreignerity stend the emergency department. The ICP are also building on stakeholder organizations from July/Jaquat 2021 and have initiated the first two stakeholder engagement panel workshops; seeking targeted input from ataleholders on the types of Integrated models of care and partient inerjustion options including the Interfacturice systems and processes to enable integrated care and that best supports the community. CHS continues to work with ACTRO to align community engagement activities with the Northade Clarical Services Than and the Northade Royal of the Northade Royal and the Services of the Northade Royal of the Northade Royal integrated care and that best supports the community.	Funded through 20-21 & 21-22 budget	On track On track

7.4								4.0
labor II	World-class medical research and training at Canberra Hospital	Continue to work with the ANU to deliver on this vision. Creating the region's leading professional health education and leadership training facility will help the ACT to attract the best and brightest to our city and strengthm con rocal health workforce.  Growing research partievables will also be a vital part of Carberra Nopplar's future with a focus on translating research hio better healthcare for patients. This include building genetic and genomic medicine into a core clinical service and creating a true Comprehensive Cancer Centre that will enable Carberra Nopplar's patients to get before access to foliotical bail and advanced treatments.	Minister for Health	Commenced	Ongoing	In May 2022 Complete Constructions (Aust) Psy Ltd was engaged to progress the design and construction of a new Cancer Research Centre within the Cunberra Region Cancer Centre. Thai sketch jain designs have been completed. List design amendments to expand laboratory spaces are expected to design construction commencement date to September 2023.  Comprehensive Cancer Centre: Level 3 planning is complete and building works progressing with completion currently scheduled for July 2024.  Umbrella agreement between ACTHO and University of Carderra executed in Q3 22/23. Second ANU/CHS Stevering Committee to be held in Q4 of 27/23 to continue planning on key initiatives. Learning and Traching: Flamming for ANU Head of Clinical School and fractional clinician education and policities of the Committee Com	To be confirmed with CHS.	Under consideration Construction of the Canner Research Centre is scheduled to be completed in July 2024.
		The Government has been working on a master plan for the Caniberra Hospital campus to consider				The Canberra Hospital Master Plan was launched by the Minister for Health on 1 December 2021. https://www.health.act.gov.au/about-our-health-system/planning-future/canberra-hospital-master-		
Labor 11.3	Labor Policy Platform for the 10th Assembly	how the hospital will need to develop to meet the region's needs over the next 20 years.  Fund Sexual Health and Family Planning ACT to address identified service gaps in disability sexual	Minister for Health	Underway	December 2021	plan	Funded through the 2020-21 and 2021-22 Budget.	Delivered/Complete
Labor 12.15	A health system for a I Canherrans	ruin Setual Health and sunly rearning Art. To accrete acettimes service pape in discissing seculal disuation through?  - Supporting sexual health education for students with disability in ACT shooks through the adequation of malestream learning for the needs of students with disability.  - Sector development for disability service providers including provision of information and referral services for people with disability related to sexual and reproductive health sinces and induction level training and networking in sexual and reproductive health for curren and staff who support people with a disability.	Minister for Health	Expected commencement in 2021	30 June 2022	A five year contract with SHFPACT for these services runs from Jan 2022 - June 2025.	The Budget Budiness Case seeks \$250 000 per year over fours years (subject to indexation) to address unnet need in the area of sexual health education information and support for people with disability. This amount is guided by previous funding for similar programs.	Delivered/Complete
		Significantly reduce the upfront cost of surgical abortion in the ACT eliminating the cost difference						
		between a medical or surgical abortion. This means young 20 women will be able to make d fficult choices about their health care based solely on what is best for them and their body.				Nil update from ICED. PPP input - The project has commenced. A discussion paper including a cross- jurisdictional analysis is currently being drafted in co laboration with Women's Health Matters. This	Funded through the 2022-23 Budget (HEA E02) to fund \$4.6 m Ilion over 4 years.	
Labor 12.20	A health system for a I Canberrans		Minister for Health	2022-23	Ongoing	will be used to inform stakeholder consultation on the best funding models to adopt.		On track
Labor 12-24b c d & e	A health system for a I Canherrans	Work with the LGBTIQ community to:  * Support the development and delivery of family therapy and support services to respond to the specific needs of LGBTIQ. Tamilies.  * Improve availability of specialist clinical services required by the transgender non-binary and gender deverse Cumberrars including investigating the feasibility of establishing a gender clinic.  * Finute that our public health arrives are safe and inclusive for all LGBTIQ. Carberrans.  * Work with the community to progress recommendations from the LGBTIQ. health survey.	Minister for Health	2021/22	Ongoing	The LGBTIQ. Health Scoping Study Implementation and Costing Plan is complete and awaiting approact. This Plan provides the detailed steps required to Implement the recommendations of the Health Scoping Study including the occleaped Gender Foundate Health Service. Funding will be sought through the 2023-24 ACT Government Budget to Implement the Plan.		Under consideration
		Establish an outpatient focused imaging service at Weston Creek Community Health Centre (including				Final Sketch Plan designs were completed in July 2022. Construction commenced in August 2022 with Internal demolition work complete. Construction is scheduled to be completed in May 2023. The project has experienced delays associated with current market conditions for the construction		
Labor 2.8c	Even better Walk-in Centres and more care in the community	CT ultrasound and Xray).	Minister for Health	June 2021	October 2022	industry and procurement of imaging equipment. Model of Care is still being developed following internal and external consultation. Operational model and staff requirements being finalised.	5 670 000	Delayed
		Inject \$15 million over three years to upgrade and expand existing endoscopy facilities at the Canberra Hospital. This investment will deliver an additional 5 000 endoscopy procedures each year				-		
		from 2023 meeting the growing need for diagnosis and detection of many conditions including some				Feasibility study complete. Business Case for funding the an expansion and upgrade of endoscopy		
Labor 4.12	Boosting elective surgery and outpatient support on the Northside	cancers.	Minister for Health	2023	2026	sultes prepared for submission as a 2023-24 budget initiative.	\$16milion	Not yet commenced
Labor 6	The first 1000 days – giving Canberra's Ch Idren the best start in life	Continue to work with experts from across government and the community to develop a First 1000. Days strategy that draws on the lived experience of families and targets investment towards early support for children parents and care.	Minister for Health	July 2021	June 2022	PHO Input: Report released  CHS input: As contributors in the Best Start for Camberra's Children: The First 1000 Days Strategy the Maternal and Child Health Nursing service within Women Youth and Children continute to work collaboratively with ACT Health and CSO. CHS are represented on the Early News Working Group.	\$238.000	Delivered/Complete
						The CHS and HCCA co-designed Pseulistric Navigation and Liaison Service (PLaNS) Model of Care has been drafted and currently open for consultation. PLaNS have recruited 1.34 FEE to the Pseulatric Advanced Pseulis Neuris role and 1.0 FEE time the Pseulistric Liaison position for Central Health Intale. Together the PLaNS team are currently providing advice information navigation and comprehensive care planning and navigation for 3 fe. feets. A soft launch of service occurred in Colciber 2022 and further equations of the team to include allele health and salid health assistant		
Labor 7.6	Better care for very sick children and their families	Introduce a Paediatric Nurse Liaison Service.	Minister for Health	December 2021		roles are currently being developed for recruitment.		On track
Labor 9.3	Better support for older Canberrans and end of life care	Establish Centre of Bice lence at Calvary Public Hospital Bruce expanding its inpatient capacity in addition to outreach. Calvary is a nation leader in developing invovative responses to the needs of older people founding the GNAE graym delivering acute care evaluation and pall lattice care needs rounds and case conferences in aged care fact lities.	Minister for Health	SID: Second quarter of 2021-22	SID: TBC. Pending funding receiv	_		Not yet commenced
PaGA 12.1a	Health	Improve services for walk-in centres including offering sexual health screening.	Minister for Health	November 2021	Unknown	Asymptomatic STI screening is available in the Walk in Centres. Chlamydia Clinical Treatment Protocol currently being updated in conjunction with Canberra Sexual Health Center.  Walting outcome from the Health Directorates Consumer engagement activities to inform Commissioning in the ACT sexually streamsible infections and blood borne viruses service sector.		On track
					2.000			

Part									
Second   S	PaGA 12.1b	Health	Reduce Elective Surgery Waltlists.	Minister for Health	1.July 2021	Oneoine	projected procedures completed with a shortfall of 800 procedures predominantly within Cahary Public Hospital Reuce (CHRIS). The fully are outcome was impacted by COVID Induced reductions in elective surgery and bed and staffing capacity shortages. The targets for 2022-23 financial year were modified to allow for capacity reductions related to the implementation of DRIA. As 310 September 2022 quarter 1 performance was impacted by theatre closures and workforce availability resulting in a year to date shortfal of 959 procedures. Coupled with the under delevier in 2022-222 the program was 130 procedures behind target mainly in the Private Provider Program and Cahary Public Hospital Bruce.  There was a plant to deliver to target plus grior year chortfals in place with CPHB however due to a fife in theatre 6 at CPHB in December 2022 at 1 theatres were closed. The impact of theatre closures cannot be quant field at this time.  Construction is expected to commence in second half of 2023 with the pool operational by the second half of 2024 (subject to Development Application and contractor availability market conditions etc). As statement of requirements is currently being finalised to take the project to market.  Operational funding will be considered in a future budget process that will be developed by Sport and	2021-22 Budget; 2021-22 MYR and 2022-23 Budget	On track
He seed to the seed of the see	PaGA 12.1c	Health	Build a hydrotherapy pool in Tuggeranong.	Minister for Health	Underway	December 2024	ultimate owner of the Tuggeranong Pool. PPP Injust - The planning and design work for the development of a new hydrotherapy pool in Camberra's south will continue in 2022-23. Construction could be expected to commence in mid/second hat 12023 and the pool be operational approximately second half of 2024 subject to Development Application and contractor availability and market conditions. ACTIV bull continue to consult with pool users and stakeholders a part of the part of the conditions.	construction of a new hydrotherapy facility adjacent to the Tuggeranong Lakeside Leisure	On track
He seed to the seed of the see							The Care Close to Home project was successfully completed in June 2022.		
Fig. 12 In 1981 (September 1982) And 1982 (S	PaGA 12 1-4	Health	Froand-Horselfal in the Horna	Minister for Health	May 2018 . See comment in Brown	vt 3ft lune 2022	HSPE engaged KPMG for an evaluation of the project. The evaluation report was final sed in November 2022. The report found that:  The project was successful at expanding the scope and activity of HiTH;  HTM services at both hospitals are delivering rafe and high quality services;  patient statisfaction with HTM is high, and		Delivered/Complete
No. 12.2 No. 10.0 Interview companies and with means in adding injurial scale for feed of the present of the companies and of all present and interview control and injuries and interview control and injuries and i	Paga 12.10	nediui	expand nospital in the nome.	Wilnister for Health	may 2018 - See comments in Progress no	30 June 2022	PHD Input: Mid-term review complete and provided to Population Health Division Executive for		Delivered/Complete
100 1. a cit in hymbol Coloral forward from the bear complained with least as part of largeted exclusives creations and control 2012 a large 2012 C.T. right - Proving control with the control 2012 and a large 2012 C.T. right - Proving control with the control 2012 and a large 2012 C.T. right - Proving control with the control of the c							approval. Second Action Plan will be delivered in 2023 following direction to undertake public consultation in early 023		
Had 2.1 In the control of the contro	PaGA 12.1e	Health	prescribing.	Minister for Health	2020	2025		To be delivered within existing resources.	On track
PEG. 12.2 Neath procupers (Department regioners with printed framement and a Phylinian's Acade and row procuped (Different regioners) with the printed framement of the procupers (Department of the printed framement and the pri	PaGA 12.1f	Health	Scope a Northside Hospital.	Minister for Health	Underway	The scoping study is due to be c	stakeholder consultation over December 2022 to March 2023. ICE floyar. Planning continues for the delivery of a new Northdel Hoopital. This includes the development of a Business Case for consideration in the 2023-24 Budget Process. ICE is developing options for the Government to consider as part of this business case. These options will seek agreement to a site an operator and a clinical scope of the building. It will seek funding for detailed design and provision the capital cost. Negotiations on operator of the new facility are continuing and will hopefully be resolved in early 2023. Work on a gerefield option has commenced for inclusion in the business case. Community In-		On track
In September 2022 19/NG Pty IsII was reguent to compress the Active Pty IsII was reguent to compress the Activ	PaGA 12.2	Health			Q2 2022-23	TBD			Not yet commenced
Camberra Hospital enhanced after hour palllative care replie facility for cares and a scoping study for a secular hospic.  PaGA 12.3 Health scoping study for a secular hospic.  PaGA 12.4 Health Provide an additional \$1.5 Million in Dental Care for Low Income Families Minister for Health 2023-24 financial year TBC - budget bid did not progress.  Nil update from ICED  Previous Update (Report 3): This commitment is now being lead by CMTEDD with input from EPSDD/SLA and ACTHD. ACTHD has contributed to the development of a discussion paper for consideration at Strategic Board Human Services Subcommittee and subspuent Human Services Subcommittee and subspuent Human Services and Access  Support The Neighbourhood to secure land for Canberra's first Dementia Care Village Minister for Health n/a n/a find by industry reviews and provision of advice in cellation to age care and demental policy.  Nil update provided and Strategic Board Human Services Subcommittee and subspuent Human Services Human Services Macromitment to build a residential eating disorder paid by Indicate the considerant sets plant the considerant sets plant the considerant sets plant the considerant sets plant the considerant and Strategic Board Human Services Subcommittee and subspuent Human Services Subcommitte			introduce more end-of-life treatment and care options including a palliative rare ward at the				Development Project. Initial site options are under consideration and an investment Logic Workshop was held in November 2022 as part of the ACT Government's Capital Framework requirements.  ACTH-Dipput - in 2020 Palliative Care ACT (PCACT) estab ished Leo's Place to provide non-clinical palliative care resplicit in the ACT. The ACT government provided funding to trail the concept over all smonths. An evaluation by the University of New South Wales (UNSW) reported Leo's Place is filling a gap in service provision and should be continued. The ascotated costing in the budget bild for the ongoing delivery of Leo's Place was approved by Treasury through the 2022-23 ACT budget process. An agreement is being drafted for Leo's Place to continue is to operation.  A scoping study for a secular hospice - Not commenced. The election commitment was for \$100 000 for this project. Budget allocation has yet to take place.	Cabinet has approved funding of \$ 00 000 for 2020–21 (which supports the current four beds for six months to June 202 ); and \$608 000 in 2021–22 (which continues to support the same four beds for a further 12 months). ACTHO lingut - subject to procuring PCACT to deliver this service the proposed term of the agreement will commence on contract execution and	
PaGA 12.4 Health Provide an additional \$1.5 Million in Dental Care for Low Income Families Minister for Health 2023-24 financial year TBC - budget bid did not progress  Nil update from ICED  Previous Update (Report 3): This commitment is now being lead by CMTEDD with input from EPSDD/SLA and ACT-MD. ACT-MD has contributed to the development of a discussion paper for consideration at Strategic Board Human Services Subcommittee and subsquent Human Services Subcommittee and subsquent Human Services Committee of Calibertia Care Village and Access  Support The Neighbourhood to secure land for Canberra's first Dementia Care Village Minister for Health n/a n/a fail by in Commiss and provision of advice in relation to aged care and demental policy.  Not yet commenced  Not yet commenced to provide from yet a factor of provided and care yet and provision of advice in relation to aged care and endernation policy.  Not yet commenced to provide the provided of provided pro	PaGA 12 3	Health	Canberra Hospital enhanced after hours palliative care palliative care respite fac lity for carers and a		Commenced	Refer comments in progress upon	Community Options Incorporated providing coordination of in-home (non-clinical) support services fo		on track
Nil update from ICED  Previous Update (Report 3): This commitment is now being lead by CMTEDD with input from EPSDn/SA and ACTHD. ACTHD has contributed to the development of a discussion paper for consideration at Strategic Board Human Services subcommittee and subspent Human Services Subcommittee Subspent Human Services Subcommittee and Subspent Human Services S			, United the second sec		and a second	sommence in progress upi			
Previous Update (Report 3): This commitment is now being lead by CMTEDD with input from EPSDD/SA and ACTHO. ACTHO has contributed to the development of a discussion paper for consideration at Strategy load of Human Services subcommittee and subsequent Human Services Subcommittee and	PaGA 12.4	Health	Provide an additional \$1.5 Million in Dental Care for Low Income Families	Minister for Health	2023-24 financial year	TBC - budget bid did not progres	ss	1.5Million	Not yet commenced
Previous Update (Report 3): The ACT Government has developed an action plan to address the Government's multiple maternity related commitments. This plan was endorsed by Cabinet in April Funding may be sought through a future Budget process	PaGA 14.2	Human Services and Access	Support The Neighbourhood to secure land for Canberra's first Dementia Care Village	Minister for Health	n/a	n/a	Previous Update (Report 3): This commitment is now being lead by CMTEDD with input from ESDD/SA and ACTHD. ACTHD has contributed to the development of a discussion paper for consideration at Strategie Board Human Services Subcommittee and subsquent Human Services Committee of Cabinet to consider next steps for The Neghboundood project including appropriate land options. ACTHD involvement is tied to the commitment to build a residential eating disorder fail by in Combis and provision of adults in relation to agad care and demential policy.	n/a	On track
Government's multiple maternity related commitments. This plan was endorsed by Cabinet in April Funding may be sought through a future Budget process									
	PaGA 15.1	Maternity	Expand capacity at the Birth Centre and establish a standalone family birth centre	Minister for Health	2024-25	2027-28	Government's multiple maternity related commitments. This plan was endorsed by Cabinet in April	Funding may be sought through a future Budget process	Not yet commenced

						Nil update provided		
						Previous Update (Report 3): The ACT Government has developed an action plan to address the Government's multiple maternity related commitments. This plan was endorsed by Cabinet in April		
						2022 with public release of the plan expected in the coming months. Implementation of actions	Funding may be sought through a future Budget process	
PaGA 15.2	Maternity	Expand home birthing e igibility criteria	Minister for Health	2021-22	2023-24	within the plan will commence shortly following project planning and implementation scheduling.		Not yet commenced
						HSPE: a draft Northside Clinical Services Plan has been completed and out ines plans for enhancing the capability and capacity of maternity services at the future northside hospital, PPP input - The		
						Maternity in Focus: The ACT Public Maternity System Plan 2022-2032 is the Governments 10 year		
						reform plan for the Pub ic Maternity system in the ACT. The vision of Maternity in Focus is to provide the right maternity care at the right time which meets the needs of the woman or pregnant person		
						and their fam ly and encompasses their social emotional physical psychological spiritual and		
						cultural needs and expectations. The Maternity in Focus: First Action Plan 2022-2025 ident fies the actions for implementation in the initial 4 years. Goal 4 of the Action Plan is Enabling and empowering		
						breastfeeding: Promote support and normalise breastfeeding exclusively for six months and continue		
						breastfeeding with appropriate complementary foods. Specifically actions 4.2 4.3 and 4.4 aim to increase breastfeeding supports and information for women and individuals through increased		
		Provide woman and baby-centred planning design and delivery of maternity services and increase				lactation consultants access to lactation clinics and peer support to assist individuals to make	Funding may be sought through a future Budget process	
PaGA 15.3	Maternity	access to breastfeeding information for new mothers	Minister for Health	2022-23	2024-25	informed decisions on infant and young child feeding.		On track
						ACTHD has recruited an ASO6 for 12 months to support the SOGC officer.		
						At the last two ACT Disability Health Strategy Steering Committee meetings a way forward for the		
						development of the Strategy was discussed and decided. The Project will not be doing further		
						consultation rather using the findings of the recent ACT Disability Strategy Health and Wellbeing consultation by the Office for Disability Community Services Directorate.		
						A draft strategy is being developed and will include the ACT Disability Strategy consultation findings and related legislation policy research and literature.		
						The Steering Committee will meet on 9 December to discuss the initial draft. Decisions from this		
							year to acquire adequate resources to ensure its scheduled completion.	
PaGA 17.7	Disability and Carers	Develop and implement a Disab lity Health Strategy	Minister for Health	2021-22		Committee in January before a final draft version is submitted to the Minister for Health for e consideration in February 2023.		
PaGA 17.7	Disability and Carers	Develop and implement a Disab lity Health Strategy	Minister for Health	2021-22	Late 2023 but is subject to budg	The combined number of additional FTE planned through the 2020-21 2021-22 and 2022-23 equates		On track
PaGA 2.1	Delivering High Quality Health Care for Canberrans	Employ an additional 400 doctors nurses and allied health worker	Minister for Health	This work is being commenced as part of	f + To be confirmed	to 399.7 in the 2022-23 financial year – excluding time limited COVID-19 and DHR positions. This number will increase to 516.3 by 2025-26.		On track
PAGA 2.1	belivering right quality health care for canberrans	Employ an additional 400 doctors. Ituises and affect featur worker	Wilnister for Health	This work is being commenced as part of	i t 10 de coniirmed.			On track
						PHD Input: The ACT Government continues to ensure access to COVID-19 testing and free PCR testing across the ACT. There are two COVID-19 testing centres open to the general pub ic which are based in		
						Garran and Holt. Across these centres COVID-19 testing is available seven days a week from 8:00am		
						to 6pm including public holidays.  In resposne to a reduction in postive case numbers and testing demand over the previous 3 months		
						locations and opening hours of testing centres continue to be reviewed to ensure they meet		
						community needs and demand.		
						CHS Input: As demand for COVID PCR testing has decreased COVID testing sites have been		
						decomissioned accross Canberra in response. RAT distr bution drive thru commenced at Garran Surge Centre 22/ 0 staffed by Health Directorate. Public wa k-in PCR tesing services in ACT are at Holt and		
						the Garran Surge Centre (CHS). Mitchell COVID testing closed 21/10. There are no dirve thru COVID	50/50 NPA agreement.	
						PCR testing services in ACT. Access and Sesnory PCR testing continues to be offered to the community at the Garran Surge Centre. Garran Surge Centre publicly advertised hours of operation 10:00 - 18:30	ACTHD has requested anguing funding for testing through the COVID-19 Response 2022-23	
PaGA 2.2	Delivering High Quality Health Care for Canberrans	Continue to provide accessible COVID-19 testing fac lities across Canberra for as long as is needed	Minister for Health	Underway	For as long as needed	seven days/week.	Budget Business case.	On track
						Business Case for funding for additional NPs supported. Funding to commence from January 2023.		
PaGA 2.3	Delivering High Quality Health Care for Canberrans	Expand the range of services available at our five nurse-led walk-in centres	Minister for Health	Unknown	Unknown	Recruitment underway with two NPs anticipated to commence in February 2023.	Funding may be sought through a future Budget Process.	On track
						Feasibi ity study complete. Business Case for funding the initial 2 Health Hubs (previously Walk-in		
		Roll out five new local walk-in health centres in South Tuggeranong West Belconnen North				Health Centre) in the Inner South and South Tuggeranong prepared for submission as a 2023-24 budget initiative. HSPE: the draft Northside C inical Services Plan incorporates the community health		
		Gungahlin Molonglo and the Inner South between 2021-22 and the middle of the decade offering				hubs as part of planning for the northside. More detailed direction will be developed through targeted		
PaGA 2.4	Delivering High Quality Health Care for Canberrans	access ble pub ic health care across Canberra	Minister for Health	Commenced	30/06/24	stakeholder consultation on the high level service model for the northside.	\$2 000 000	On track
						Ministerial advice provided recommending not to proceed with the proposal for establishment of a		
						Northside Elective Surgery Centre fo lowing further analysis of operating theatre capacity.		
						At the completion of the 2021-22 financial year the elective surgery program saw 95% of the		
						projected procedures completed with a shortfall of 800 procedures predominantly within Calvary Public Hospital Bruce (CPHB). The full year outcome was impacted by COVID induced reductions in		
						elective surgery and bed and staffing capacity shortages. The targets for 2022-23 financial year were		
						modified to allow for capacity reductions related to the implementation of DHR. As at 30 September		
						2022 quarter 1 performance was impacted by theatre closures and workforce availability resulting in a year to date shortfa I of 593 procedures. Coupled with the under delivery in 2021-22 the program		
PaGA 2.5	Delivering High Quality Health Care for Canberrans	Deliver 60 000 elective surgeries over the next four years and establish an Elective Surgery Centre or the University of Canberra camous	n Minister for Health	1 July 2021	30/06/2025	was 1 360 procedures behind target mainly in the Private Provider Program and Calvary Public Hospital Bruce. A plan to deliver to target plus prior year shortfalls is in place with CPHB.	2021-22 Budget; 2021-22 MYR and 2022-23 Budget	On track
F8GA 2.3	Seasoning riight quanty meann edie für editibertalis		minister for fleditri	1 July 2021	50/00/2023	respects or occ. A pion to deliver to target plus prior year Shortialis is in place with CPHB.	בעבר בב שמשפני, בעבד-בב ואו זה מווע בעבב-בש מטטעפנ	O. track
		Complete the major expansion of the Canberra Hospital delivering the biggest healthcare infrastructure investment since self-government with a new emergency surgical and critical care				ICE continue to work with CHS and MPC to ensure the implementation of the Canberra Hospital		
PaGA 2.6	Delivering High Quality Health Care for Canberrans	facility to ensure we keep meeting the acute care needs of Canberra and region residents	Minister for Health	MPC commenced early planning and Ena	ab Construction completion of the n	K Master Plan supports and enhances the delivery of the CHE Project.	Total project value \$624.5m appropriated in the 2018-19 2019-20 and 2021-22 Budgets	On track
						HSPE: a draft Northside Clinical Services Plan has been completed and will be used for targeted		
						consultation over December 2022 to March 2023. The draft Plan has informed requirements for the northside hospital and has reflected updated activity forecasting. ICE input - Planning continues for		
						the delivery of a new Northside Hospital. This includes the development of a Business Case for		
						consideration in the 2023-24 Budget Process. ICE is developing options for the Government to consider as part of this business case. These options will seek agreement to a site an operator and a		
						clinical scope of the building. It wi I seek funding for detailed design and provision the capital cost.		
		Continue the planning and design work for a new northside hospital with the aim to start				Negotiations on operator of the new facility are continuing and will hopefully be resolved in early 2023. Work on a greenfield option has commenced for inclusion in the business case. Community		
PaGA 2.7	Delivering High Quality Health Care for Canberrans	construction by mid-decade	Minister for Health	Underway	The planning work is due to be or	o engagement and clinical engagement are underway and informing the project.	Funded through 2020-21 and 2021-22 Budget.	On track
PaGA 20.3	Sexual orientation gender identity and intersex rights	Provide increased funding for A Gender Agenda including for a dedicated intersex officer and delivery of services in The Friday Centre	/ Minister for Health	October 2021	October 2025	No update from ACTHD - this initiative is led by CMTEDD	Funded through the 2021-22 Budget process (\$630 000 over 4 years).	On track
		·				·		

						PHD input: Nil update		
PaGA 20.5	Sexual orientation gender identity and intersex rights	Roll out community based rapid HIV testing and HIV/BBV prevention efforts	Minister for Health	Expected commencement date of 2022 depending on funding for STIBBV and resourcing in the Health Protection Service	1 January 2024	CHS input: The future procurement of rapid HIV testing is subject to the outcomes of commissioning. CHSC was a stakeholder in the work shops discussions that were conducted to inform the commissioning proces. CHSC is of the view that HIV testing should not be de-linked from testing for other blood burner viruses (BBV) and STTS.	The Budget Business Case seeks \$245 000 annually (subject to indexation) to support peer-led rapid HIV testing awareness raising campaigns outreach services; and post-test counselling services.	Under consideration
PaGA 20.6	Sexual orientation gender identity and intersex rights	Ban gender-related surgery on intersex babies (unless necessary for preservation of life) and provide training for midwives and doctors 40	Minister for Health	Drafting of legislation commenced 2021 22 legislation to be introduced 2022-23 implementation dates TBC		ACTHD continues to work with CMTEDD to progress the drafting of legislation. Implementation of related business cases are reliant upon the introduction of the legislation.	Pending confirmation from CMTEDD about success of omnibus as a whole.	Minor Delays
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PaGA 7.1	Drug Reform	Double the existing funding for services to address drug and mental health co-morbidity	Minister for Health	October 2021	TBD	Project meetings are we I underway for the Watson redevelopment and Winnunga work both design consultants working well together. Preferred designs for CatholicCare and Ted noffs being discussed.		On track
						PHD input: Fixed-site pilot commenced on 21 July 2022 and is currently funded to run until 20 Januar	у	
						2023. Festivals pill testing po icy continues to apply however festival-based pill testing has been unable to proceed in 2022 due to issues with the service provider securing insurance. The fixed site		
PaGA 7.2	Drug Reform	Introduce permanent pi I testing at all ACT festivals and other sites	Minister for Health	October 2021	December 2022	service will run additional hours in the week leading up to the Spilt M lk festival.	\$260 0000	On track
						PHD Input: On hold as agreed by the Minister for Health in September 2022. Remains an action in the		
PaGA 7.3	Drug Reform	Pilot a safe drug consumption site	Minister for Health	October 2021	TBD	Drug Strategy Action Plan 2022-26 to be published in December	\$400 000	Delayed
PaGA 7.4	Drug Reform	Train GPs to better understand the medicinal cannabis scheme	Minister for Health	November 2022 but may be delayed if C	'O' TRD	PHD input: To be considered as part of 2023 workplan noting the urgency and need for this has significantly decreased and there are competing priorities in this area.	N I.	Under consideration
1 400 7.4	Drug Neloiii	Trust of 5 to better understand the medicinal earnings serience	Williage For Frederic	November 2022 but may be delayed in c	.0 100	PHD Input: Drugs of Dependence (Personal Use) Amendment Bill 2021 was passed with Government	11.	Onder consideration
						amendments in October 2022. AOD Policy is leading the 12-month implementation process for the		
PaGA 7.5	Drug Reform	Enhance drug diversion pathways for law enforcement	Minister for Health	Government amendments planned for S	pring sitting 2022	reforms.		On track
							Funded through 2020-21 and 2021-22 Budget. The 2022-23 budget provides \$550 000 for	
							Winnunga Nimmityjah to continue design work on the new alcohol and other drug residential rehabilitation fac lity for Aboriginal Torres Strait Islander persons; and o\$1.048m for staffing	
		Establish a community controlled Aboriginal drug and alcohol residential rehabilitation facility and				Concept designs for the facility should be complete by the end of this year after which we will	for Winnunga to manage the design and construction process and prepare for the operation	
PaGA 9.3	First Nations	new family recovery programs	Minister for Health	Underway	June 2024			On track