

Outcome 10

Health System Capacity and Quality

The capacity and quality of the health care system meet the needs of Australians

OUTCOME SUMMARY – THE YEAR AHEAD

This outcome brings together several health investment and information strategies aimed at improving the capacity of the Australian health system, both public and private. These strategies include:

- national leadership in cancer control;
- improving the standard of palliative care in the community;
- support for safety and quality improvement across the health system;
- leading a national approach to more effective electronic management of key health information (ehealth); and
- providing a leadership role in improving outcomes in the National Health Priority areas.

The Health Services Improvement Division, the Portfolio Strategies Division, and the National Institute of Clinical Studies all contribute to the achievement of Outcome 10.

Key Strategic Directions for 2006-07

During 2006-07, the Australian Government will:

- implement programs of the Strengthening Cancer Care initiative and work with Cancer Australia to provide national leadership to improve quality and coordination of cancer control in Australia;
- implement the National Chronic Disease Strategy and the National Service Improvement Frameworks to improve the quality of care available to the Australian people;
- improve the provision of, and access to, quality palliative care services across Australia, including in rural and remote communities;
- facilitate and encourage the health sector to move quickly to electronic clinical communications; and
- work with the Australian Commission on Safety and Quality in Health Care in conjunction with all State and Territory governments.

Major Activities

Strengthening Cancer Care

Over the past decade in Australia, new cases of cancer have increased at three times the rate of population growth. The Strengthening Cancer Care initiative will continue to support Australians living with cancer. Programs identified under Strengthening Cancer Care will provide further support for those affected by cancer. These include establishing Cancer Australia, Mentoring for Regional Hospitals and Cancer Professionals Program, Building

Cancer Support Groups Program, and improving Professional Development for Cancer Professionals. Funding under the Strengthening Cancer Care initiative is focused on prevention, treatment, research and support for cancer patients and their families.

National Chronic Disease Strategy

The National Chronic Disease Strategy and National Service Implementation Frameworks were developed in 2005-06. The next important work is the development of implementation plans. This will be done in consultation with State and Territory governments.

In 2006-07, a key activity for the Department will be the development of implementation plans for the National Chronic Disease Strategy and the National Service Improvement Frameworks for asthma, diabetes, cancer, heart, stroke, vascular disease and osteoarthritis, rheumatoid arthritis and osteoporosis to improve the quality of care available to the Australian people.

National Health Priority Areas

The Department is focusing on a number of national health priority areas, such as; cancer, cardiovascular health and stroke, asthma, arthritis and musculoskeletal conditions, and diabetes mellitus

The National Diabetes Strategy provides a focus for coordinating the wide range of activities being undertaken throughout Australia to improve the prevention, early detection and management of diabetes in all age groups. Performance indicators have recently been endorsed by the National Diabetes Strategies Group to measure progress across all areas of the National Diabetes Strategy. Funding under the Support for Diabetes Research measure will aid the establishment of a Centre of Excellence to research and refine islet cell transplantation as a method of treating Type 1 (juvenile) diabetes. Support is also being provided to further develop and implement the Lift for Life® Strength Training Program for older Australians, to improve their management of Type 2 diabetes.

The Asthma Management Program will implement a national asthma awareness campaign and will support consumer self management through programs delivered by the Asthma Foundations of Australia. Asthma education for health professionals will be provided through programs delivered by National Asthma Council Australia. This outcome will be measured by a reduction in the personal, social and economic impacts of asthma in Australia.

Palliative Care

The Australian Government is committed to helping maintain quality of life during the terminal phase of a person's illness by increasing access to appropriate medicines for people being cared for at home. During 2006-07 the number of medicines for palliative care on the Pharmaceutical Benefits Scheme will increase. There will also be a targeted communication strategy to inform health professionals of these changes.

In May 2005, to ensure the provision of high quality palliative care, the Australian Government established a consortium of four universities (led by the Centre for Health Services Development, University of Wollongong) to form the Australian Palliative Care Outcomes Collaboration. During the coming year, this collaboration will develop data collection tools, provide related training, and provide reports to enable palliative care services to consistently compare and measure the quality of their service. To further support good quality data for service improvement, the Department will fund the Australian Institute of Health and Welfare to undertake a survey of palliative care services against nationally agreed performance indicators.

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Continued support for palliative care will be provided through the Local Palliative Care Grants Program under the Strengthening Cancer Care initiative. During 2006-07 a competitive grants process will be advertised for equipping and fitting out premises to help organisations better support palliative care patients, their families and the community.

Leadership in eHealth

In 2006-07, the Department will focus on supporting the development of the electronic clinical communication's architecture, individual health identifier and provider index, to enable a national electronic health record, which will contain a summary of important health information for use by both health care providers and consumers. The Department continues work in collaboration with all States and Territories on the eHealth strategy, and with the National E-Health Transition Authority on standards and infrastructure.

Safety and Quality in Health Care

The Australian Commission on Safety and Quality in Health Care was established on 1 January 2006. The Department will continue its ongoing role in safety and quality. The Department will work with the Commission, jurisdictions within the portfolio and cross-portfolio agencies, to promote improved patient safety.

Outcome 10 Resourcing

Table 3.1.10 shows how the 2006-07 Budget appropriations translate to total resourcing for Outcome 10, including administered expenses, revenue from government (appropriation), revenue from other sources, and the total price of outputs.

Table 3.1.10: Total resources for Outcome 10

	Estimated actual 2005-06 \$'000	Budget estimate 2006-07 \$'000
Administered appropriations		
Program 10.1: Chronic Disease - Treatment		
Appropriation Bill 1	25,721	16,891
	25,721	16,891
Program 10.2: e-Health Implementation		
Appropriation Bill 1	53,670	56,768
	53,670	56,768
Program 10.3: Health Information		
Appropriation Bill 1	6,599	6,862
	6,599	6,862
Program 10.4: International Policy Engagement		
Appropriation Bill 1	11,575	11,575
	11,575	11,575
Program 10.5: Palliative Care and Community Assistance		
Appropriation Bill 1	20,572	19,760
<i>Health Care (Appropriation) Act 1998 - Australian Health Care Agreements - Provision of Designated Health Services (p)</i>	3,315	2,740
Total Special Appropriations	3,315	2,740
	23,887	22,500
Program 10.6: Research Capacity		
to Department of Health and Ageing	220,214	21,301
to National Institute of Clinical Studies	5,252	5,338
Appropriation Bill 1	225,466	26,639
	225,466	26,639
Total Administered Appropriations	346,918	141,235

Table 3.1.10: Total resources for Outcome 10 (cont)

	Estimated actual 2005-06 \$'000	Budget estimate 2006-07 \$'000
Departmental appropriations		
Health and Ageing		
Output Group 1 - Policy Advice	10,577	10,466
Output Group 2 - Program Management	18,804	18,605
Total price from departmental outputs <i>(Total revenue from government and from other sources)</i>	29,381	29,071
Total revenue from government (appropriations) contributing to price of departmental outputs	27,381	27,051
Total revenue from other sources	2,000	2,020
Total price from departmental outputs <i>(Total revenue from government and from other sources)</i>	29,381	29,071
Total Price of Outputs for Outcome 10 <i>(Total Revenue from Government and from other sources)</i>	29,381	29,071
Total estimated resourcing for Outcome 10 <i>(Total price of outputs and administered appropriations)</i>	376,299	170,306
	2005-06	2006-07
Average staffing level (number)		
Department	239	246

1. Flows into Special Accounts are also shown in the receipts column of the Special Accounts table in Table 2.6.
2. Where names of Acts have been abbreviated, the full name of the Act can be found in the Acts Glossary at the end of Table 2.6.

Measures Affecting Outcome 10

A summary of measures affecting this outcome is provided at Table 2.2, Section 2. Measure descriptions are published in full in Budget Paper No. 2, *Budget Measures 2006-07*, available on the Australian Government website at <<http://www.budget.gov.au>>.

Contribution of Administered Programs to Outcome 10

Program 10.1: Chronic Diseases – Treatment

Strengthening Cancer Care

The Strengthening Cancer Care initiative provides national leadership in cancer control; guides improvements in cancer prevention and care; ensures cancer treatments are scientifically based; and ensures better coordination and liaison among the wide range of stakeholders with an interest in cancer. The contribution to this outcome will be measured by improvements in the diagnosis, treatment and support for people with cancer, their families and the community.

Dedicated cancer research funding will be provided under the Strengthening Cancer Care initiative to improve screening programs, the early detection of breast and ovarian cancer, the application of emerging new treatments and technology and cancer outcomes through better coordination of care. The contributions to this outcome will be measured by the number of research grants within the priority research areas.

Support for Women in Rural Areas with Breast Cancer

Support for Women in Rural Areas with Breast Cancer provides funding to enable women who live in rural Australia and who are diagnosed with breast cancer to receive supportive care and information on treatment, management and quality of life issues in their local area. The contribution to the outcome will be measured by the number of publications delivered, the patterns of the distribution, quality of information provided and the level of psychological support provided in regional areas of Australia.

National Diabetes Strategy

The National Diabetes Strategy provides a focus for coordinating the wide range of activities being undertaken throughout Australia to improve the prevention, early detection and management of diabetes across all age groups. The contribution to this outcome will be measured by improved quality of care and better outcomes for people with diabetes.

The Juvenile Diabetes Research Foundation is funded to establish and operate a research centre to develop an islet cell transplantation program in Australia as part of the research effort to find a cure for Type 1 diabetes. The contribution to this outcome will be measured by the successful clinical trial of islet cell transplantation and a subsequent on-going transplantation program and the level of participation in the Lift for Life® program.

Asthma Management

The Asthma Management initiative supports best practice management of asthma through the Medical Benefits Schedule and provides funding to State and Territory Asthma Foundations. The initiative provides funding for an asthma communications campaign, health workforce support and monitoring of asthma in Australia. This outcome will be measured by a reduction in the personal, social and economic impacts of asthma in Australia.

Program 10.2: eHealth Implementation

The Broadband for Health Program provides funding to health care providers for connection to high speed broadband. The program's success is measured by the number of community pharmacies, general practices and Aboriginal Community Controlled Health Services who have connected to a broadband service that qualifies under the Broadband for Health Program.

Program 10.3: Health Information

Health Information Networks encourage health care providers to communicate and access important health information electronically at the point of care. Consumers will benefit by having better access to health information.

Program 10.4: International Policy Engagement

In 2006-07, the Department will continue to manage health contributions to existing international treaties and Memoranda of Understanding (MOU) arrangements including the World Health Organization (WHO). The contribution to this outcome is measured by the timeliness of the contributions as per the MOU arrangements in order to ensure that implementation of the WHO Program Budget is not impeded by lack of financial resources.

Program 10.5: Palliative Care and Community Assistance

The Australian Health Care Agreements provide funding for national initiatives that improve the provision of palliative care services. The contribution to this outcome is measured by the extent to which these initiatives improve access to, and quality of, palliative care.

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The Strengthening Palliative Care Services Program provides grants to health-related services to improve access to, and quality of, services for people requiring palliative care, their families and carers. The contribution to this outcome is measured by the level of assistance provided to organisations in local communities providing palliative care.

Program 10.6: Research Capacity

National Institute of Clinical Studies Ltd

The National Institute of Clinical Studies Ltd (NICS) promotes best clinical practice throughout the public and private health sectors. NICS role is to close gaps between the best available evidence and current clinical practice. Funding is provided to NICS as a national authority on clinical improvement, and for its activities associated with the Australian based Cochrane Collaboration. Further information about NICS is available later in this document under its own Budget statements.

Contribution of Departmental Outputs to Outcome 10

The Department describes its core activities in terms of three output groups: policy advice, program management and agency-specific service delivery. Outcome 10 reports on policy advice and program management. Refer to Section 3.1 for more information on output groups.

Performance Information for Outcome 10

Performance information for administered items, individual outputs and output groups relating to Outcome 10 are summarised in Table 3.2.

Table 3.2.10: Key Performance Information for Outcome 10

Performance Information for Administered Items

Indicator	Measured by	Reference Point or Target
Administered Funding – Health System Capacity and Quality Programs		
Access and quality of palliative care in the community.	Improved palliative care, including increased access to a range of medicines on the Pharmaceutical Benefits Scheme and increased number of services participating in the Palliative Care Outcomes Collaboration.	Maintain or increase the level of access from previous year.
Better use of evidence to inform patient treatment options.	Increased uptake of evidence based medicine by healthcare providers.	Increased level of uptake from previous years.
Initiatives that prevent Type 2 diabetes or modify the prevalence of Type 2 diabetes risk factors.	Initiatives will be assessed against the National Diabetes Indicators.	Increased programs / initiatives to prevent Type 2 diabetes or to modify the prevalence of Type 2 diabetes risk factors.
Key stakeholders use electronic clinical communications to improve quality and safety in health care.	Increased implementation of relevant projects and uptake of incentives by key stakeholders.	Increased use of electronic communications by key stakeholders in the health sector.
Improved quality of, and access to, online health information and Australian Government health policy by medical professionals and the Australian public.	Quality online health information is made available through the Health Insite program.	Improved access and quality information.

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Indicator	Measured by	Reference Point or Target
Administered Funding – Health System Capacity and Quality Programs (cont)		
Access to broadband infrastructure to enable health care providers to better engage with state and national level activity in the implementation of eHealth initiatives (such as HIC Online).	Level of health care provider access to broadband infrastructure.	Increased access from previous year.
Australian Government investment in NEHTA contributes to the development of priority ehealth interoperability initiatives.	Timely and quality contributions to NEHTA during the development of priority ehealth initiatives.	Achievement of work outlined in the NEHTA work program.
Effective international health policy engagement.	Feedback from international organisations.	Domestic health policy informed by international experience. Australian contribution to health policy/programs in our region acknowledged.
Effective management of Memorandum of Understanding arrangements with the World Health Organization.	Timeliness of contributions.	Contributions made as per Memorandum of Understanding arrangements.
Cost: \$141.235m		

Performance Information for Departmental Outputs

Indicator	Measured by	Reference Point or Target
Output Group 1 – Policy Advice		
Quality, relevant and timely advice for Australian Government decision-making.	Ministerial satisfaction	Maintain or increase from previous year
Relevant and timely evidence-based policy research.	Production of relevant and timely evidence-based policy research.	Relevant evidence-based policy research produced in a timely manner.
Price: \$10.466m		

Indicator	Measured by	Reference Point or Target
Output Group 2 – Program Management		
Administered budget predictions are met and actual expenses vary less than 0.5% from budgeted expenses.	Percentage that actual expenses vary from budgeted expenses.	0.5% variance from budgeted expenses.
Stakeholders to participate in program development.	Opportunities for stakeholder participation through a range of avenues, such as surveys, conferences and meetings.	Stakeholders participated in program development through (eg. surveys, conferences and meetings).
Price: \$18.605m		

Evaluations

Health Information Network

Funding for the Health Information Network implementation strategy will lapse in 2007-08. During 2006-07, an evaluation framework will be implemented for the Strategy which will provide the strategic context for national evaluation activities to be undertaken by the Federal and State and Territory Governments. The national evaluation will consider both the change management activities and deliverables contained in the Strategy and will also consider the detailed approach required to evaluate the contribution of the Strategy to improved quality and safety outcomes. The final evaluation report will be published in 2009.

Major Reviews

National Diabetes Register

A review of the National Diabetes Register will commence in November 2006. This review will focus on process issues related to the coverage of the population estimated to have insulin treated diabetes, the timeliness of reporting, improvements in categorisation of registrants, and the potential of the Register for research. There is no end date at this time; this depends on an initial scoping phase which will set the parameters for the overall review.

Performance Improvement Initiatives

There are no performance improvement initiatives planned to be undertaken in 2006-07.

