

Outcome 15

Biosecurity and Emergency Response

Australia's health system has coordinated arrangements to respond effectively to national health emergencies, including infectious disease outbreaks, terrorism and natural disaster

OUTCOME SUMMARY – THE YEAR AHEAD

With increased international mobility there is increasing risk to Australia from emerging and re-emerging infectious diseases, increased global incidence of terrorist attacks, and the ever present threat of natural disaster. The Office of Health Protection will ensure that Australia is able to provide an effective and sustained health response in an emergency and will lead the development of national biosecurity and emergency response initiatives to protect the health and well being of all Australians.

Outcome 15 is the responsibility of the Office of Health Protection.

Key Strategic Directions for 2006-07

During 2006-07, the Australian Government will:

- develop communicable disease surveillance systems to detect and respond to communicable disease threats;
- implement legislative and regulatory measures to support effective communicable disease control and national biosecurity initiatives;
- provide technical and strategic advice to inform policy development; and
- strengthen the existing capability to respond to national health emergencies.

Major Activities

In 2006-07, the Australian Government will continue to build upon Australia's capability to provide an effective response to national public health emergencies, either due to natural or man-made causes. The Office of Health Protection will provide national leadership in any health emergency through communication infrastructure, decision making networks, and the provision of an operational response coordination capability.

The Government will strengthen national capacity for early detection and rapid control of communicable diseases, particularly through more comprehensive surveillance in conjunction with the states and territories.

Surveillance

A Biosecurity Surveillance System is being developed to support the Australian Government's ability to detect and respond to new and emerging infectious diseases like Severe Acute Respiratory Syndrome (SARS) and Avian influenza (bird flu) and to the threat of bioterrorism. In addition, the Government is expanding and strengthening Australia's influenza surveillance networks through the development of a Syndromic Surveillance System. This new system will provide timely surveillance of highly infectious and fast-spreading diseases such as pandemic

influenza. This will be critical to the early detection of the disease and will enable the early deployment of response measures, such as the use of antivirals, to minimise the impact of the disease in Australia.

The Australian Government will continue to undertake horizon scanning to ensure preparedness for emerging risks and diseases, changes in the disease burden, and new technologies.

Programs that provide effective border surveillance and control of international communicable disease threats will be maintained.

Legislation

National health security legislation is being reviewed to ensure it is sufficiently robust to support the Australian Government's leadership role in the event of a public health emergency requiring a national response.

Pandemic Preparedness

In 2006, the Australian Government will continue to develop and implement initiatives to ensure an effective response to the growing threat of an influenza pandemic. Australia's capacity to respond to an influenza pandemic will be strengthened through: enhanced surveillance; adding additional antiviral medicines, personal protective equipment and H5N1 vaccine to the National Medicines Stockpile; better communication with healthcare professionals and the public on what to do in the event of a pandemic; establishing a new state of the art World Health Organization Collaborating Centre for Reference and Research on Influenza; a live simulation exercise to identify gaps in response and how these can be filled; and the revision of the *Australian Management Plan for Pandemic Influenza*.

The National Medical Stockpile represents a significant component of national public health preparedness. In 2006-07, the Stockpile will be further enhanced and capacity to respond to bioterrorist threats will be improved.

Trauma and Critical Care

The National Centre for Trauma and Critical Care being established at the Royal Darwin Hospital will be fully established in 2006-07 and will increase Australia's capacity to manage large numbers of casualties. The Centre will maintain a state of readiness to treat the injured in the event of a national health emergency such as an act of bioterrorism or large scale natural disaster in Australia or the region.

National Response Planning

National public health diagnostic laboratory capacity will be strengthened to facilitate a rapid response to an emerging influenza pandemic or to a bioterrorist incident. The national control of biological materials that are a potential threat to human health will also be improved through the establishment of a register of laboratories handling high-risk pathogens.

Other arrangements will be put in place to secure Australia's ongoing supply of antivenom and to provide support to Human Pituitary Hormone Recipients that may have contracted or be at risk of contracting forms of Creutzfeldt-Jakob disease (CJD).

The Office of Health Protection will also continue to be a significant contributor to national terrorism response planning.

Outcome 15 Resourcing

Table 3.1.15 shows how the 2006-07 Budget appropriations translate to total resourcing for Outcome 15, including administered expenses, revenue from government (appropriation), revenue from other sources, and the total price of outputs.

Table 3.1.15: Total resources for Outcome 15

	Estimated actual 2005-06 \$'000	Budget estimate 2006-07 \$'000
Administered appropriations		
Program 15.1: Health Emergency Planning and Response		
Appropriation Bill 1	28,184	16,717
Appropriation Bill 2	22,994	13,184
	51,178	29,901
Program 15.2: Surveillance		
Appropriation Bill 1	4,621	4,809
Appropriation Bill 2	822	818
	5,443	5,627
Total Administered Appropriations	56,621	35,528
Departmental appropriations		
Health and Ageing		
Output Group 1 - Policy Advice	7,901	8,367
Output Group 2 - Program Management	11,852	12,551
Total price of departmental outputs <i>(Total revenue from government and from other sources)</i>	19,753	20,918
Total revenue from government (appropriations) contributing to price of departmental outputs	19,753	20,918
Total revenue from other sources	-	-
Total price of departmental outputs <i>(Total revenue from government and from other sources)</i>	19,753	20,918
Total Price of Outputs for Outcome 15 <i>(Total Revenue from Government and from other sources)</i>	19,753	20,918
Total estimated resourcing for Outcome 15 <i>(Total price of outputs and administered appropriations)</i>	76,374	56,446
	2005-06	2006-07
Average staffing level (number)		
Department	108	137

Measures Affecting Outcome 15

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 15

Program 15.1: Health Emergency Planning and Response

The Health Emergency and Response Program provides the capability for the Office of Health Protection to prepare for and respond to national public health emergencies such as infectious disease outbreaks, terrorism and natural disaster. This capability will be achieved through acquiring and maintaining a strategic reserve of medical equipment, supplies and pharmaceuticals which can be rapidly deployed to support the first line public health response. The Program also maintains the expert infrastructure required to provide high level policy advice to Australian Governments on preparing for a health emergency and also the capability to coordinate the national response through a National Incident Room and appropriate national advisory structures. The contribution of the Program will be measured by the effectiveness of the national response to a public health emergency.

Program 15.2: Surveillance

The Surveillance Program supports a range of activities to inform the Australian Government of the burden of communicable diseases nationally, regionally and internationally, and interventions to protect the safety of all Australians. The contribution of this program will be measured by the effectiveness of the component initiatives in detecting emerging diseases locally, nationally and regionally and responding rapidly to contain outbreaks of communicable diseases through appropriate collaborative networks.

Contribution of Departmental Outputs to Outcome 15

The Department describes its core activities in terms of three output groups: policy advice, program management and agency-specific service delivery. Outcome 15 reports on policy advice and program management. Refer to Section 3.1 for more information on output groups.

Performance Information for Outcome 15

Performance information for administered programs, individual outputs and output groups relating to Outcome 15 are summarised in Table 3.2.15.

Table 3.2.15: Key Performance Information for Outcome 15

Performance Information for Administered Programs

Indicator	Measured by	Reference Point or Target
Administered Funding – Biosecurity and Emergency Response Programs		
<p>Systematic approach to protecting Australians from health threats through improved surveillance, reporting, policy and programme development, emergency planning and crisis response systems.</p>	<p>Successful national pandemic influenza exercise.</p> <p>Up-to-date Australian Health Management Plan for Pandemic Influenza (AHMPPI) available.</p> <p>Office of Health Protection recognised across jurisdictions as authoritative source of guidance on disease control and prevention.</p>	<p>Successful national pandemic influenza exercise held in in October 2006.</p> <p>Australian Management Plan for Pandemic Influenza up-to-date and available throughout 2006-07.</p> <p>Feedback provided by States and Territories recognise Office of Health Protection as authoritative source of guidance on disease control and prevention.</p>
<p>Timely recognition of emerging threats to human health.</p>	<p>Accurate analysis and assessment of emerging threats.</p> <p>Timely and appropriate response to national and international developments in communicable diseases, bioterrorism and natural disasters.</p>	<p>Timely analysis and reporting of developments throughout year.</p> <p>Immediate activation of National Incident Room in event of emergency.</p>

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Indicator	Measured by	Reference Point or Target
Administered Funding – Biosecurity and Emergency Response Programs (cont)		
Containment of communicable disease outbreaks and biosecurity incidents.	<p>Early detection of communicable disease outbreaks.</p> <p>Timely engagement of national health coordination mechanisms and implementation of containment plans.</p> <p>Timely and appropriate deployment of the national medicines stockpile.</p>	Low impact of communicable disease outbreaks and biosecurity incidents on the community.
Improved food safety through enhanced surveillance of foodborne illness.	<p>Early detection and reporting of food safety incidents.</p> <p>Timely implementation of national prevention and response programs.</p>	Incidence of foodborne illness minimised.
Development of evidence base to support health protection policy.	<p>Clinical and scientific expertise maintained in Office of Health Protection.</p> <p>Participation in information-sharing networks.</p> <p>Funding of targeted research.</p>	Office of Health Protection consulted as authoritative source of information and advice.
Improved knowledge, attitude and behaviours in relation to communicable diseases, biosecurity and health emergencies amongst public and health professionals.	<p>Effective communications strategies in place for ongoing disease and biosecurity threats.</p> <p>Contingency communications plans in place for health emergencies.</p>	<p>Heightened public awareness of health protection issues and confidence in health protection system.</p> <p>Positive responses to communications campaigns.</p>
Cost: \$35.528m		

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.
Timeliness and relevance of evidence-based policy research.	Recent evidence-based research available to support policy advice.	Advice to Minister supported by up-to-date scientific, clinical and other evidence.
Price: \$8.367m		

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 participate in program development and implementation.	Opportunities provided for stakeholder participation through consultations, forums, meetings and surveys.	All relevant stakeholders consulted during program development and implementation phases.
Price: \$12.551m		

Evaluations

There are no evaluations planned to be undertaken in 2006-07.

Major Reviews

There are no major reviews planned to be undertaken in 2006-07.

Performance Improvement Initiatives

The pandemic influenza exercise will evaluate the capacity and capability of the Australian health response to an influenza pandemic involving human to human transmission. Its scope includes validation of: health planning and coordination arrangements within and between all jurisdictions; surveillance arrangements; public health measures; healthcare and emergency response arrangements; public communication strategies; and decision making between and

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within jurisdictions. A series of national activities will be conducted, with all States and Territories invited to be involved, culminating in a nationally coordinated three-day exercise. Opportunities will be provided for government, industry, non-government organisations and international observers to participate. The exercise will demonstrate Australia's level of preparedness and allow any gaps or shortfalls to be identified and addressed. The outcomes will serve to improve the performance of health emergency response systems, processes and decision making.