

Outcome 14

BIOSECURITY AND EMERGENCY RESPONSE

Preparedness to respond to national health emergencies and risks, including through surveillance, regulation, prevention, detection and leadership in national health coordination

Outcome Strategy

Through Outcome 14, the Australian Government aims to strengthen the nation's capacity to identify, monitor and implement effective and sustained responses to national health emergencies and risks. These national health emergencies and risks include mass casualty events, communicable disease outbreaks, terrorism, natural disasters and environmental hazards.

The Department will maintain links with other Australian Government agencies, state and territory governments and international agencies, to obtain information on current and emerging population health risks. The Department will also maintain a robust and timely communicable disease surveillance system to detect, assess and respond to communicable disease threats in Australia and to Australians overseas.

The Department will undertake emergency response planning across the health system in an all-hazards context. In the event of a health emergency, the Government will use established and tested plans and protocols. The Department will provide national leadership and coordination when dealing with national health emergencies through chairing the Australian Health Protection Principal Committee (AHPPC), working with states and territories to prioritise the use of resources, and providing a clearing house for information critical in managing an emergency response.

In addition, the Department will continue to provide human health risk assessment advice on the regulation of agricultural and veterinary chemical products, drugs and poisons, and the import, export and manufacture of controlled drugs and chemicals.

Outcome 14 is the responsibility of the Office of Health Protection and Regulatory Policy and Governance Division.

Programs Contributing to Outcome 14

Program 14.1: Health emergency planning and response

Outcome 14 Budgeted Expenses and Resources

Table 14.1: Budgeted Expenses and Resources for Outcome 14

	2011-12 Estimated actual \$'000	2012-13 Estimated expenses \$'000
Program 14.1: Health emergency planning and response¹		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	25,679	21,398
Non cash expenses - write down of assets ²	71,664	11,159
Special Accounts		
Human Pituitary Hormones Special Account	150	150
Departmental expenses		
Departmental appropriation ³	24,338	24,204
Expenses not requiring appropriation in the budget year ⁴	2,379	2,030
Total for Program 14.1	124,210	58,941
Outcome 14 totals by appropriation type		
Administered expenses		
Ordinary annual services (Appropriation Bill No. 1)	25,679	21,398
Non cash expenses - write down of assets ²	71,664	11,159
Special Accounts	150	150
Departmental expenses		
Departmental appropriation ³	24,338	24,204
Expenses not requiring appropriation in the budget year ⁴	2,379	2,030
Total expenses for Outcome 14	124,210	58,941
	2011-12	2012-13
Average staffing level (number)	156	142

- ¹ This program includes National Partnerships paid to state and territory governments by the Treasury as part of the Federal Financial Relations (FFR) Framework. National partnerships are listed in this chapter under each program. For budget estimates relating to the National Partnership component of the program, please refer to Budget Paper 3 or Program 1.10 of the Treasury Portfolio Budget Statements.
- ² Non cash expenses relate to the write down of the drug stockpile inventory due to expiration, consumption and distribution
- ³ Departmental appropriation combines "Ordinary annual services (Appropriation Bill No 1)" and "Revenue from independent sources (s31)".
- ⁴ "Expenses not requiring appropriation in the budget year" is made up of depreciation expense, amortisation expense, makegood expense and audit fees. This estimate also includes approved operating losses - please refer to the departmental financial statements in section 3 for further information.

Program 14.1: Health emergency planning and response

Program Objectives

National health emergency planning and response

The Department works with the states and territories to manage and coordinate national health emergencies through the Australian Health Protection Committee (AHPC). The Department ensures effective responses to national health emergencies by developing response plans underpinned by the National Health Emergency Response Arrangements.

In 2012-13, the Australian Government will support national preparedness by replenishing the National Medical Stockpile for major health emergencies, providing funding and support to the Australian Red Cross Society for health related humanitarian relief and community support activities, and increasing funding towards the maintenance of national capacity for antivenom production for the treatment of venomous bites/stings particular to Australia. About 8,000 individuals across Australia annually require access to antivenom.

Improve biosecurity, drug and chemical safety

The Australian Government will continue to improve biosecurity, drug and chemical safety through regulatory schemes and control mechanisms. In 2012-13, the Department will administer the Security Sensitive Biological Agents Regulatory Scheme to reduce the threat of deliberate release of biological agents.

The Department will also continue to administer a licensing and permit regime for controlled drugs in line with Australian legislation and international conventions, and determine the need for medicines and chemicals to be included in the Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP).

Minimise the risks posed by communicable diseases

The Australian Government is committed to strengthening Australia's defences against communicable diseases. In 2012-13, the Department will continue to coordinate the development of a national communicable diseases strategy in collaboration with the states and territories and expert groups and maintain the National Notifiable Diseases Surveillance System. The Department will assess the ability of Australia's existing ports and airports to respond to public health events, in compliance with the World Health Organization (WHO) International Health Regulations (2005) (IHR). The Department will also coordinate information exchange with states, territories and other countries to enable the tracing and management of potentially infected people through the National Focal Point.

Program 14.1 is linked as follows:

- This Program includes National Partnership payments for:
 - *Royal Darwin Hospital: Equipped, Prepared and Ready*
 - *OzFoodNet*;
 - *Human quarantine services*; and
 - *Torres Strait Health Protection Strategy – Mosquito Control*.

These Partnership Payments are paid to state and territory governments by the Treasury as part of the Federal Financial Relations (FFR) Framework. For budget estimates relating to the National Partnership component of the program, please refer to Budget Paper 3 or Program 1.10 of the Treasury's Portfolio Budget Statements.
- The Attorney-General's Department (Australian Customs and Border Protection Service – Program 1.2) for drug imports and exports.
- The Attorney General's Department (Australian Customs and Border Protection Service – Program 1.4) to work on national health emergency response activities.

Program 14.1 Expenses

Table 14.2: Program Expenses

	2011-12 Estimated actual \$'000	2012-13 Budget \$'000	2013-14 Forward year 1 \$'000	2014-15 Forward year 2 \$'000	2015-16 Forward year 3 \$'000
Annual administered expenses					
Ordinary annual services	25,679	21,398	20,320	20,763	21,168
Non cash expenses ¹	71,664	11,159	16,974	21,161	66,716
Special account expenses					
Human Pituitary Hormones Special Account	150	150	150	160	160
Program support	26,717	26,234	24,702	24,612	24,797
Total Program 14.1 expenses	124,210	58,941	62,146	66,696	112,841

¹ Non cash expenses relate to the write down of drug stockpile inventory due to expiration, consumption and distribution.

Program 14.1: Deliverables¹

Table 14.3: Qualitative Deliverables for Program 14.1

Qualitative Deliverables	2012-13 Reference Point or Target
National health emergency planning and response	
Develop, exercise and refine national health emergency policy under the National Health Emergency Response Arrangements	National Health Emergency Response Arrangements will be exercised and revised and an annex detailing health response to a terrorist incident will be developed
Improve biosecurity, drug and chemical safety	
Update and maintain the <i>Standard for the Uniform Scheduling of Medicines and Poisons</i> (SUSMP)	SUSMP to be amended as soon as practicable after the Secretary's, or the Secretary's delegate's, final decision under the <i>Therapeutic Goods Regulations 1990</i>
Minimise the risks posed by communicable diseases	
Collect and disseminate data in the National Notifiable Disease Surveillance System (NNDSS) and monitor data quality in accordance with the <i>National Health Security Act 2007</i>	Data is collected and available for regular reporting by the Commonwealth and ad-hoc requests by stakeholders, including for publication in the Department's journal <i>Communicable Diseases Intelligence</i>

Table 14.4: Quantitative Deliverables for Program 14.1

Quantitative Deliverables	2011-12 Revised Budget	2012-13 Budget Target	2013-14 Forward Year 1	2014-15 Forward Year 2	2015-16 Forward Year 3
Improve biosecurity, drug and chemical safety					
Percentage of applications for the import, export, and manufacture of controlled substances that are assessed and processed within agreed timeframes ²	98%	95%	95%	95%	95%

¹ In 2012-13, all deliverables and key performance indicators have been reviewed and updated to ensure targeted performance reporting.

² The target for this KPI has been amended for 2012-13 and future years to reflect the growing volume of applications received each year.

Program 14.1: Key Performance Indicators

Table 14.5: Qualitative Key Performance Indicators for Program 14.1

Qualitative Indicator	2012-13 Reference Point or Target
National health emergency planning and response	
Containment of national health emergencies through the timely engagement of national health coordination mechanisms and response plans	National responses to health emergencies are successfully managed
Improve biosecurity, drug and chemical safety	
Perform human health risk assessments and regulate access to chemicals and drugs	Chemical assessments completed in a timely manner and authorisation to access drugs and chemicals issued in accordance with legislative requirements

Table 14.6: Quantitative Key Performance Indicators for Program 14.1

Quantitative Indicators	2011-12 Revised Budget	2012-13 Budget Target	2013-14 Forward Year 1	2014-15 Forward Year 2	2015-16 Forward Year 3
Minimise the risks posed by communicable diseases					
Percentage of designated points of entry into Australia capable of responding to public health events, as defined in the International Health Regulations	100%	100%	100%	100%	100%