

Outcome 1

Population Health

The incidence of preventable mortality, illness and injury in Australians is minimised

Outcome | 01

OUTCOME SUMMARY

Outcome 1 aims to minimise the incidence of preventable mortality, illness and injury in Australians. A fundamental aspect of the Australian Government's reform process is to keep people healthy. The focus of the health system needs to shift from one where the predominant emphasis is on treating people when they get sick, to one which also focuses on keeping people well and out of hospital. The Government is committed to achieving this outcome through the development of national population health initiatives, regulatory policy for radiation protection and nuclear safety, and the regulation of therapeutic goods, industrial chemicals and gene technology.

Outcome 1 is the responsibility of the Population Health Division, the Regulatory Policy and Governance Division, the Therapeutic Goods Administration, the Office of Health Protection, the National Industrial Chemicals Notification and Assessment Scheme, and the Office of the Gene Technology Regulator.

Key Strategic Directions

- Work to reduce obesity, tobacco use and excessive alcohol consumption as key drivers of preventable chronic disease.
- Support targeted disease prevention and protection through population screening with a particular focus on bowel cancer screening and other initiatives.
- Work to reduce the demand, supply and harm caused by illicit drug use.
- Support improvements in child, youth, women's and men's health.
- Help close the gap in health outcomes between Aboriginal and Torres Strait Islander people and the wider Australian community through an increased focus on population health activities.
- Ensure therapeutic goods manufactured or supplied in Australia continue to be of high quality, and safe and effective for their intended purpose, through the implementation of reforms to Australia's regulatory framework.
- Work to ensure that the regulatory system for gene technology continues to be responsive, efficient and effective.
- Protect human health and the environment through the safe and sustainable use of industrial chemicals and implementation of further reforms to the industrial chemicals regulatory scheme.

Major Activities

Curbing Obesity, Tobacco and Excessive Alcohol Consumption

The Australian Government is committed to refocusing the health system on prevention in order to curb the growth in chronic disease and the associated costs to the health system and broader economy. The Government will develop a National Preventative Health Care Strategy to provide a blueprint for tackling the burden of chronic disease currently caused by obesity, tobacco use, and excessive consumption of alcohol. Its development will be supported by a new National Preventative Health Taskforce which will provide evidence-based advice to government and health providers – both public and private – on preventative health strategies. The Department will provide secretariat support and manage consultancies in support of its work. The strategy will be finalised by June 2009.

The Australian Government will also encourage a strategic focus on prevention in its health funding for the states and territories by introducing Preventative Health Care Partnerships and reviewing the Medicare Benefits Schedule to encourage a greater focus on prevention in general practice.

A number of initiatives will assist to combat the rise in childhood obesity. The Healthy Kids Check will be introduced for all four year olds prior to starting school, which will comprise height and weight measures, and a Healthy Habits for Life Guide for parents to provide them with practical information about healthy living habits for their children (refer to Outcome 5 for further discussion). In addition, the Kitchen Garden Program, based on the Stephanie Alexander Kitchen Garden Program in Victoria will be implemented in 190 schools nationally to help children understand the benefits of growing and preparing fresh food, and the pleasures of healthy eating.

The Australian Government will work to prevent and address the significant health and social problems caused by tobacco use and alcohol consumption through a range of strategies and initiatives.

The National Alcohol Strategy 2006-09 and the National Tobacco Strategy 2004-09 are due to expire in 2009 and significant effort will be invested to evaluate these strategies in terms of strengths, weaknesses and the needs of the changing social and economic environment. Both strategies exist under the National Drug Strategy, and are cooperative ventures between the Australian, State and Territory governments, and the non-government sector. This recognises that no single jurisdiction or sector can make an effective impact in these complex areas, that deal with both patterns of individual behaviour and wider cultural norms, without a coordinated approach involving all other partners.

The Government has developed a new National Binge Drinking Strategy to address binge drinking among young Australians. This national strategy comprises three practical measures to help reduce alcohol misuse and binge drinking among young Australians: investment in community level initiatives to confront the culture of binge drinking, particularly in sporting organisations; early intervention to assist young people ensure they assume personal responsibility for their drinking; and advertising that confronts young people with the costs and consequences of binge drinking.

A partnership between the Government and the six major sporting bodies under the new National Binge Drinking Strategy has seen the Government invest in programs that will support local sporting clubs to build a culture of responsible drinking at the grassroots level, and help foster leaders in responsible drinking at the elite level. This will be

supported by a nationally consistent code of conduct on alcohol use for peak sporting bodies and community sports organisations, to be developed by the sporting codes themselves.

The Government has committed to reinvigorating the National Tobacco Strategy by funding media campaigns targeted at young people on the risks of smoking, and supporting smoking cessation services. Through the strategy, the Government aims to prevent the uptake of smoking; encourage and assist smokers to quit; eliminate harmful exposure to tobacco smoke among non-smokers; and, where feasible, reduce harm associated with the continuing use of, and dependence on, tobacco and nicotine.

In 2008-09, the Australian Government will implement a national program under the Council of Australian Governments Diabetes – Reducing the Risk of Type 2 Diabetes Initiative that is designed to help delay, or possibly prevent, the development of type 2 diabetes by targeting risk factors. The Australian Government initiative offers subsidised lifestyle modification programs to people aged 40-49 years, at high risk of developing type 2 diabetes, who have been referred by a general practitioner.

Funding for this major activity is sourced from programs 1.1 – Chronic Disease – Early Detection and Prevention; 1.3 – Drug Strategy and 1.6 – Public Health.

Targeted Disease Prevention

The Australian Government's agenda in targeted disease prevention encompasses the need to curb infectious diseases that are preventable; and to renew efforts in combating infectious disease in target sub-populations, particularly given the growth in available vaccination and screening technologies. Sustaining prevention and treatment in the face of the rising incidence of sexually transmissible infections is also a priority for the Government. There will be a focus on improving participation in breast cancer, bowel cancer and cervical screening; consolidating efforts to establish a strong Human Papillomavirus (HPV) vaccination program; and maintaining the high proportion of immunisation coverage in children.

The Australian Government aims to improve the rates of early detection, and reduce the number of bowel cancer-related deaths each year, through the National Bowel Cancer Screening Program. The Department will manage the delivery of this program, which will provide testing to people aged 50, 55 and 65 years over three years commencing in 2008.

A priority for the Government in 2008-09 is reducing breast cancer mortality through the BreastScreen Australia Program, which provides free mammographic screening to well women in the target group of 50-69 years. Women aged 40-49 and over 70 years are also eligible to attend. The strategic direction of the program in 2008-09 will be informed by the outcomes of the BreastScreen Australia evaluation, which is expected to report to the Australian Health Ministers' Advisory Council during 2008-09. The evaluation will assess the appropriateness, efficiency and effectiveness of the program, and will address the ongoing and emerging issues that have an impact on the program. It will also identify opportunities for overall improvement.

The Australian Government will support the National Cervical Screening Program in 2008-09 to reduce illness and deaths from cervical cancer through an organised approach to screening. The program offers routine screening for Pap smears every two years for women aged 18-69 years. The program is a cost-shared program of the Australian and State and Territory governments, with the states and territories responsible for the implementation of

the program in their jurisdictions. The Department will provide overall coordination of policy formulation, national data collection, quality control, monitoring and evaluation.

The Australian Government will implement initiatives to reduce sexually transmissible and blood borne virus infections and their associated personal and social impacts under the National Sexually Transmissible Infections Strategy, the National HIV/AIDS Strategy, the National Aboriginal and Torres Strait Islander Sexual Health and Blood Borne Virus Strategy and the National Hepatitis C Strategy.

Improving immunisation coverage rates will also be a focus for the Australian Government in 2008-09. A National HPV Register is being developed on behalf of the Department by Victorian Cytology Services to provide ongoing monitoring of coverage rates and vaccine effectiveness. The register will begin collecting data in June 2008, with uploading to the electronic system to commence in November 2008. By January 2009, girls and health professionals will be able to access records.

The Australian Government will improve public health infrastructure and workforce capacity and capability in priority and emerging public health areas, including Indigenous health, through the Public Health Education and Research Program. Working in partnership with academic institutions, employers and specialists, the Government will ensure that a skilled public health workforce is available to address critical threats to public health and safety. The Government will also increase the number of Indigenous Australian students and academics in public health; implement a quality framework for public health education; and conduct educative and research projects that inform the prevention agenda.

Current significant challenges for the above activities include the need to curb the recent growth in sexually transmissible and blood borne virus infections and to close the gap for Indigenous participants in immunisation and screening.

Funding for this major activity is sourced from programs 1.2 – Communicable Disease Control; 1.5 – Immunisation; and 1.6 – Public Health.

Reducing the Demand, Supply and Harm Caused by Illicit Drug Use

The Australian Government is focused on preventing and addressing the significant health and social problems caused by illicit drugs through a range of programs that will increase the potential for greater social inclusion of those individuals and their families adversely affected by illicit drug use.

The Government is committed to reducing illicit drug use in Australia by providing young Australians with up-to-date information about methamphetamines, such as the highly addictive and destructive drug known as Ice (crystal methamphetamine). This initiative will strengthen national drug prevention efforts and help address the particular problem of Ice, targeting the high risk group of 18-25 year olds and current Ice users, through a comprehensive range of education activities and resources. It will encourage young people to assess their risk of using methamphetamines, support decisions not to use, and support current users to stop. Importantly, the initiative will encourage users to connect with services that can help them quit their drug use.

The Australian Government is also funding research to monitor emerging trends in drug use and support best practice in regard to prevention and treatment; public awareness initiatives to raise community understanding of drug-related issues and their impact on mental health; and non-government organisations for initiatives that complement state and territory

programs. Work will also be undertaken on improving national data on program effectiveness, and improving access to services for people in rural and remote areas, and Indigenous communities.

The Government's work in this area is undertaken under the umbrella of the National Drug Strategy 2004-09, a cooperative venture between the Australian, State and Territory governments (involving health, education and law enforcement), as well as the non-government sector.

Current significant challenges include the need to sustain prevention and treatment in the face of the constantly adapting market in illicit drugs, and delivering expansionary programs in a sector with limited capacity to provide appropriately skilled personnel. As the National Drug Strategy is due to expire in 2009, the Government has already begun the process of evaluating it in terms of strengths, weaknesses and the needs of the changing social and economic environment.

Funding for this major activity is sourced from Program 1.3 – Drug Strategy.

Supporting Child, Youth, Women's and Men's Health

Over the next five years, the Australian Government will implement a range of activities contributing to the Government's comprehensive reform agenda for early childhood and commitment to improving early childhood education, care and health outcomes. The Government will also establish national policies for men and women's health, encompassing practical activities to improve health outcomes across people's life span.

In 2008-09, the Australian Government will commence the development of a national strategic framework for action to support improvement in the health and well-being of children and young people in Australia. This work will complement the framework for child and youth health, and will focus on working in partnership with families and communities. It will reflect emerging trends in child and youth health research and practice, and foster a cross sectoral approach to service delivery.

The Australian Government, in conjunction with State and Territory governments, will develop antenatal care guidelines in line with National Health and Medical Research Council processes that will inform best practice in antenatal care to improve maternal and infant health outcomes in Australia. The guidelines will complement other policy initiatives such as *New Directions: An Equal Start in Life for Indigenous Children*, aimed at improving Indigenous health outcomes and life expectancy by identifying strategies that will benefit Aboriginal and Torres Strait Islander women. This will include the development, implementation and evaluation of plans to accompany the release of the guidelines in 2009 (refer to Outcome 8 for further discussion).

The Australian Government will develop national policies to ensure that the planning and delivery of health services better meet the needs of men and women. These will address gender specific health issues, discrepancies in access to services and health disparities. The Department will consult with state and territory health agencies, health service providers, and consumer and advocacy groups during 2008-09 to inform the development of these policies.

The Australian Government will support the Australian Longitudinal Study on Women's Health, to deliver quality information about the health and well-being of women. Findings from the study are used by the Department and other policy makers to support policy and

program development. Information is available in the areas of ageing, chronic diseases and risk factors, health service use, weight, physical activity, caring, continence and retirement.

In 2008-09, the Australian Government will also provide support for mothers to breastfeed through funding to the Australian Breastfeeding Association to set up a national 24 hour toll free helpline. The Department will monitor the progress of this project to ensure a quality service is being provided to breastfeeding mothers and their partners.

The Australian Government will provide funding to develop and distribute guidelines on healthy eating and physical activity in early childhood settings such as childcare centres, family day care and preschools. These evidence-based guidelines will encourage childcare providers and parents to make lifestyle choices that will benefit the health and well-being of children. The Department will consult with relevant State, Territory and Australian government agencies, and other key stakeholders during the development of the guidelines.

Funding for this major activity is sourced from Program 1.1 – Chronic Disease – Early Detection and Prevention.

Increased Focus on Indigenous Australians' Health

A key priority for the Australian Government is to ensure that all population health programs contribute to closing the gap in health outcomes between Aboriginal and Torres Strait Islander populations and the wider Australian community, particularly in the priority areas of maternal and child health, chronic disease risk factors, and tobacco control.

In 2008-09, the focus will be on reducing the impact of key population risk factors such as tobacco use, obesity, physical inactivity, high blood cholesterol, alcohol and illicit drug misuse, high blood pressure, low fruit and vegetable intake, and unsafe sex, which contribute significantly to poor health outcomes for Aboriginal and Torres Strait Islander people.

The Government will target the use of tobacco by Indigenous Australians through the Indigenous Tobacco Control Initiative. Indigenous smoking rates remain alarmingly high and require a long-term commitment if success in this area is to be achieved. Tackling smoking is critical to closing the gap in Indigenous life expectancy and this initiative will pave the way for future investment in addressing Indigenous smoking rates. The initiative will build an evidence-base through carrying out essential formative research to understand the reasons for the higher rates of smoking by Indigenous Australians and the barriers to quitting; and identify strategies, key messages, and audiences to be targeted. The initiative will also trial new community activities and targeted communication approaches and offer smoking cessation training to staff working in Indigenous health.

The significant challenges to be faced in this work include the need to foster effective stakeholder engagement across the Aboriginal and Torres Strait Islander community and the mainstream health system, and to identify and build on effective and appropriate interventions at the population level. There is also the challenge of ensuring an appropriately trained workforce. Initiatives in the area of Aboriginal and Torres Strait Islander health will take these factors into account. Interventions will be evaluated for their effectiveness as a basis for further expansion and investment in the future.

Funding for this major activity is sourced from Program 1.3 – Drug Strategy.

Enhancing Therapeutic Goods Regulation

Ensuring the Australian community has timely access to therapeutic goods that are of high quality, and safe and effective for their intended purpose, is an ongoing priority for the Australian Government.

In 2008-09, the Australian Government, through the Therapeutic Goods Administration (TGA), will regulate the quality, safety and efficacy or performance of therapeutic goods, including medicines and medical devices. The Government will consider implementing a reform agenda to update and streamline the existing regulatory framework for therapeutic goods in Australia. The reforms will ensure that the therapeutic goods regulatory scheme remains contemporary, responsive and consistent with community standards and international best practice. Should the Government agree, legislative change to implement the reform agenda will be required, following consultation with a diverse range of stakeholders with varying expectations of the regulatory system.

Funding for this major activity is sourced from a Special Account for the TGA.

Gene Technology Regulation

The Australian Government, through the Office of the Gene Technology Regulator (OGTR), will enhance the efficiency and effectiveness of the gene technology regulatory system in response to feedback from stakeholders, advances in scientific knowledge, and international developments in regulatory practice.

In 2008-09, the OGTR, will maintain its focus on protecting the health and safety of people and the environment through the regulation of dealings with genetically modified organisms. The OGTR will maintain high levels of openness and transparency, and rolling reviews to ensure that the Gene Technology Regulations 2001 remain up-to-date with advances in gene technology. In addition, bilateral arrangements with other Australian Government regulators, such as Food Standards Australia New Zealand, the TGA, the Australian Pesticides and Veterinary Medicines Authority, the Australian Quarantine and Inspection Service, and the National Industrial Chemicals Notification and Assessment Scheme (NICNAS) will be strengthened to enhance coordinated decision-making.

Funding for this major activity is sourced from a Special Account for the OGTR.

Ensuring a More Responsive Industrial Chemicals Regulatory Scheme

The Australian Government is focused on ensuring a more responsive industrial chemicals regulatory scheme so workers, the public and the environment are protected from the risks of industrial chemicals. To achieve this NICNAS will implement a range of reforms to the scheme, and benchmark its performance against comparable international regulatory schemes.

The Government will consider implementing reforms to NICNAS's Existing Chemicals Program to ensure the scheme's efficiency and effectiveness, flexibility and responsiveness to stakeholder needs, and harmonisation with comparable international schemes.

NICNAS will evaluate its Low Regulatory Concern Chemicals reforms, to determine options for future reforms and work will also take place to align with international regulators and to develop bilateral arrangements with major trading partners. NICNAS will

engage in a rigorous and proactive compliance program and will strengthen NICNAS assessment capabilities focusing in 2008-09 on exposure assessments.

A key challenge for NICNAS over the next five years will be implementing any reforms arising from Government considerations of the final report of the Productivity Commission study into chemicals and plastics regulation.

Funding for this major activity is sourced from a Special Account for NICNAS.

Outcome 1 Resourcing

Table 1.1 shows how the 2008-09 Budget appropriations translate to total resourcing for Outcome 1, including administered expenses, revenue from government (appropriations), revenue from other sources, and the total price of outputs.

Table 1.1: Total Resources for Outcome 1

	2008-09 Total estimate of available resources \$'000	2007-08 Estimated actual \$'000
Outcome 1 Administered and Departmental Output Resources		
Program 1.1: Chronic Disease - Early Detection and Prevention		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	51,924	31,078
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	9,096	9,905
Revenues From Other Sources (s.31) for goods and services	410	410
<i>Special Accounts</i>		
Services for Other Governments and Non Departmental Bodies		
Opening Balance	-	-
Appropriation Receipts	-	-
Non-Appropriation Receipts to Special Accounts	340	770
Subtotal for Program 1.1	61,770	42,163
Program 1.2: Communicable Disease Control		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	21,749	18,724
to Services for Other Government and Non Departmental Bodies	(104)	(102)
Special Account		
Annual Appropriation Bill 2 (Other Services)	2,366	2,320
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	3,318	3,613
Revenues From Other Sources (s.31) for goods and services	149	149
<i>Special Accounts</i>		
Services for Other Governments and Non Departmental Bodies		
Opening Balance	296	92
Appropriation Receipts	104	102
Non-Appropriation Receipts to Special Accounts	104	252
Subtotal for Program 1.2	27,982	25,150

Table 1.1: Total Resources for Outcome 1 (cont)

	2008-09 Total estimate of available resources \$'000	2007-08 Estimated actual \$'000
Program 1.3: Drug Strategy		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	141,831	121,806
to Services for Other Government and Non Departmental Bodies Special Account	(373)	(375)
Annual Appropriation Bill 2 (Other Services)	64,024	55,503
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	17,676	19,248
Revenues From Other Sources (s.31) for goods and services	796	796
<i>Special Accounts</i>		
Services for Other Governments and Non Departmental Bodies		
Opening Balance	692	692
Appropriation Receipts	373	375
Non-Appropriation Receipts to Special Accounts	377	375
Subtotal for Program 1.3	225,396	198,420
Program 1.4: Food and Regulatory Policy		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	584	663
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services)	2,894	3,152
to Services for Other Government and Non Departmental Bodies Special Account	(1,081)	(79)
Revenues From Other Sources (s.31) for goods and services	130	130
<i>Special Accounts</i>		
Services for Other Governments and Non Departmental Bodies		
Opening Balance	1,981	3,879
Appropriation Receipts	1,081	79
Non-Appropriation Receipts to Special Accounts	213	575
Subtotal for Program 1.4	5,802	8,399

Table 1.1: Total Resources for Outcome 1 (cont)

	2008-09 Total estimate of available resources \$'000	2007-08 Estimated actual \$'000
Program 1.5: Immunisation		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services) to Services for Other Government and Non Departmental Bodies Special Account	27,071 (4,900)	30,452 (4,900)
Annual Appropriation Bill 2 (Other Services) Special Appropriations <i>National Health Act 1953 - Essential Vaccines</i>	8,200 255,880	19,648 521,719
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services) Revenues From Other Sources (s.31) for goods and services	3,763 170	4,098 169
<i>Special Accounts</i>		
Australian Childhood Immunisation Register Opening Balance Appropriation Receipts Non-Appropriation Receipts to Special Accounts	1,540 4,900 3,091	1,863 4,900 3,091
Subtotal for Program 1.5	299,715	581,040
Program 1.6: Public Health		
<i>Administered Items</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services) to Services for Other Government and Non Departmental Bodies Special Account	108,148 (5,743)	51,761 (8,500)
Annual Appropriation Bill 2 (Other Services)	174,170	170,506
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services) Revenues From Other Sources (s.31) for goods and services	13,574 612	14,781 612
<i>Special Accounts</i>		
Services for Other Governments and Non Departmental Bodies Opening Balance Appropriation Receipts Non-Appropriation Receipts to Special Accounts	1,613 5,743 3,140	4,224 8,500 1,998
Subtotal for Program 1.6	301,257	243,882
Departmental Regulators		
<i>Departmental Outputs</i>		
Annual Appropriation Bill 1 (Ordinary Annual Services) to Therapeutic Goods Administration (TGA) Special Account to Office of Gene Technology Regulator (OGTR) Special Account to National Industrial Chemicals Notification and Assessment Scheme (NICNAS) Special Account	10,815 (2,383) (7,919) (513)	10,921 (2,439) (7,961) (521)

Table 1.1: Total Resources for Outcome 1 (cont)

	2008-09 Total estimate of available resources \$'000	2007-08 Estimated actual \$'000
<i>Special Accounts</i>		
TGA Special Account		
Opening Balance	33,057	26,854
Appropriation Receipts	2,383	2,439
Non-Appropriation Receipts to Special Accounts	91,332	91,338
OGTR Special Account		
Opening Balance	5,018	5,128
Appropriation Receipts	7,919	7,961
Non-Appropriation Receipts to Special Accounts	-	-
NICNAS Special Account		
Opening Balance	5,773	5,625
Appropriation Receipts	513	521
Non-Appropriation Receipts to Special Accounts	8,369	7,904
Subtotal for Departmental Regulators	154,364	147,770
Other Special Accounts		
<i>Special Account</i>		
Other Trust Monies		
Opening Balance	150	440
Appropriation Receipts	-	-
Non-Appropriation Receipts to Special Accounts	1,249	1,200
Subtotal for Other Special Accounts	1,399	1,640
Total Resources for Outcome 1	1,077,685	1,248,464
Outcome 1 Resources by Departmental Output Group		
Department of Health and Ageing		
Output Group 1: Policy Advice	23,349	25,336
Output Group 2: Program Management	29,239	31,727
<i>TGA Special Account</i>		
Output Group 2: Program Management	126,772	120,631
<i>OGTR Special Account</i>		
Output Group 2: Program Management	12,937	13,089
<i>NICNAS Special Account</i>		
Output Group 2: Program Management	14,655	14,050
Total Departmental Resources	206,952	204,833
	2008-09	2007-08
Average Staffing Level (Number)	1,020.4	991.1

Measures Affecting Outcome 1

A summary of measures affecting this outcome is provided at Table 1.3.1, Section 1. Measure descriptions are published in full in *Budget Paper No. 2, Budget Measures 2008-09*, available on the Australian Government website at <<http://www.budget.gov.au>>.

Contribution of Administered Programs

Program 1.1 – Chronic Disease – Early Detection and Prevention

The Chronic Disease – Early Detection and Prevention Program provides funding for governments, health professionals and community based organisations to promote and support the prevention of chronic disease, through the adoption of healthy lifestyles. The program also provides funding to improve the early detection of breast, cervical and bowel cancer.

The contribution to this outcome is measured by participation in programs and improvements in healthy living habits.

Program 1.2 – Communicable Disease Control

The Communicable Disease Control Program provides funding for governments and a range of non-government organisations to develop and deliver programs that reduce and control the spread of HIV/AIDS, Hepatitis C and sexually transmissible infections. Programs include workforce development and targeted health education programs.

The contribution to this outcome is measured by the notification rates of relevant communicable diseases.

Program 1.3 – Drug Strategy

The Drug Strategy Program provides funding for research to monitor emerging trends in drug use and supports best practice in regard to prevention and treatment. It funds public awareness initiatives to raise community understanding of drug-related issues and their impact on mental health. The program also funds non-government organisations for initiatives that complement state and territory programs.

The contribution to this outcome is measured by the monitoring of drug usage trends and data on the cost and social burden of drugs.

Program 1.4 – Food and Regulatory Policy

The Food and Regulatory Policy Program provides direction and leadership in food policy issues. The program provides funding for high level support to the Australia and New Zealand Food Regulation Ministerial Council and its supporting committees. Funding also supports a national stakeholder communications forum.

The contribution to this outcome is measured by Ministerial Council satisfaction and legislative compliance on notifications on food standards.

Program 1.5 – Immunisation

The Immunisation Program provides vaccines and immunisation advice to the Australian community, to protect against major vaccine preventable diseases.

The contribution to this outcome is measured by the assessment of vaccination coverage and disease rates in the targeted age groups, including children and older Australians.

Program 1.6 – Public Health

The Public Health Program leads and coordinates the chronic disease prevention agenda in Australia. This program contributes to the development and maintenance of national population health infrastructure and workforce capacity. It also strengthens the evidence-base for prevention. The program includes funding to evaluate the efficiency and effectiveness of public health activities through the Priority Setting Mechanism.

The contribution to this outcome is measured through the program’s ability to inform the prevention agenda.

Contribution of Departmental Outputs to Outcome 1

The Department describes its core activities in terms of two output groups: policy advice and program management. Outcome 1 reports on both output groups. Refer to Section 2.1 for more information on output groups.

Performance Information for Outcome 1

Performance information for administered programs, individual outputs and output groups relating to Outcome 1 are summarised in Table 1.2.

Table 1.2: Key Performance Information for Outcome 1

Performance Information for Administered Programs

Indicator	2008-09 Reference Point or Target
<p>Program 1.1 – Chronic Disease – Early Detection and Prevention</p> <ul style="list-style-type: none"> Administered Items 	
<p>Participation rates in breast cancer, bowel cancer, and cervical screening programs which have a sound evidence-base and are responsive to new and emerging trends.</p>	<p>Maintain participation in breast cancer, bowel cancer and cervical screening programs.</p>
<p>Establishment of a Preventative Health Care Taskforce and development of a National Preventative Health Care Strategy.</p>	<p>Preventative Health Care Taskforce established by June 2008.</p> <p>National Preventative Health Care Strategy established by June 2009.</p>

Indicator	2008-09 Reference Point or Target
Program 1.1 – Chronic Disease – Early Detection and Prevention	
<ul style="list-style-type: none"> Administered Items 	
Implementation of initiatives targeting nutrition, physical activity, obesity, overweight and injury.	Initiatives implemented in accordance with respective dates and targets.
<ul style="list-style-type: none"> Departmental Outputs¹ 	
Resourcing: \$61.770m	

Indicator	2008-09 Reference Point or Target
Program 1.2 – Communicable Disease Control	
<ul style="list-style-type: none"> Administered Items 	
Improved knowledge, attitude and behaviours in relation to communicable diseases and associated health risks through targeted health promotion and disease prevention campaigns, including social marketing.	Improvements in knowledge, attitudes and behaviours in relation to disease and health risks.
Effective communicable disease prevention and detection in accordance with a sound evidence-base and with responsiveness to new and emerging trends. Measured through notification rates for HIV/AIDS, Hepatitis C, and Sexually Transmissible Infections.	A positive impact on notification rates of HIV/AIDS, Hepatitis C and Sexually Transmissible Infections.
A new national strategic approach that identifies priority actions to reduce the transmission of sexually transmissible and blood borne viral infections developed through an evaluation and review of existing strategies. The new strategy will be endorsed by the Australian Health Ministers Conference (AHMC).	Evaluation and review of existing national strategies, development of a new strategy, and its endorsement by AHMC completed by 30 June 2009.
<ul style="list-style-type: none"> Departmental Outputs¹ 	
Resourcing: \$27.982m	

¹ The Department has four standard performance indicators for departmental output groups. See 'Performance Information for Departmental Outputs' for further information.

Indicator	2008-09 Reference Point or Target
Program 1.3 – Drug Strategy	
<ul style="list-style-type: none"> Administered Items 	
Reduced community harm caused by the misuse of licit drugs and the use of illicit drugs. Measured by monitoring the number of Australians using tobacco, consuming alcohol at harmful levels and using illicit drugs.	Continued reduction in the population using tobacco or illicit drugs, and/or consuming alcohol at harmful levels.
<ul style="list-style-type: none"> Departmental Outputs² 	
Resourcing: \$225.396m	

Indicator	2008-09 Reference Point or Target
Program 1.4 – Food and Regulatory Policy	
<ul style="list-style-type: none"> Administered Items 	
Effective support provided to the Australia and New Zealand Food Regulation Ministerial Council.	All meetings conducted.
Effective input into food standards development.	Input provided into all standard notifications.
Compensate licit importers of Kava affected by the June 2007 ban on Kava, with the intent to reduce community harm caused by misuse of Kava.	Comprehensive ‘buy back’ of Kava from permit holders who have paid for Kava or became bound to pay for Kava, on or before, 25 June 2007.
<ul style="list-style-type: none"> Departmental Outputs² 	
Resourcing: \$5.802m	

² The Department has four standard performance indicators for departmental output groups. See ‘Performance Information for Departmental Outputs’ for further information.

Indicator	2008-09 Reference Point or Target
Program 1.5 – Immunisation	
<ul style="list-style-type: none"> Administered Items 	
<p>The implementation of new immunisation registers and the linking of recently introduced vaccines to existing incentive schemes will continue to support and enhance high immunisation coverage rates across targeted cohorts.</p> <p>The effectiveness of immunisation programs will be evaluated by monitoring notification rates of vaccine preventable diseases.</p>	<p>Increase in immunisation from the previous year.</p> <p>A positive impact on notification rates of vaccine preventable diseases.</p>
<ul style="list-style-type: none"> Departmental Outputs³ 	
Resourcing: \$299.715m	

Indicator	2008-09 Reference Point or Target
Program 1.6 – Public Health	
<ul style="list-style-type: none"> Administered Items 	
<p>Skilled public health workforce is available to address critical threats of public health and safety.</p>	<p>Increased public health workforce capacity including the number of Indigenous Australian students and academics.</p>
<p>Health economic evaluations of investments in disease prevention and health promotion undertaken.</p>	<p>All programs scheduled for evaluation are assessed.</p>
<ul style="list-style-type: none"> Departmental Outputs³ 	
Resourcing: \$301.257m	

³ The Department has four standard performance indicators for departmental output groups. See 'Performance Information for Departmental Outputs' for further information.

Performance Information for Departmental Outputs

In relation to the following programs:

- 1.1: Chronic Disease – Early Detection and Prevention;
- 1.2: Communicable Disease Control;
- 1.3: Drug Strategy;
- 1.4: Food and Regulatory Policy;
- 1.5: Immunisation; and
- 1.6: Public Health.

Indicator	2008-09 Reference Point or Target
Output Group 1 – Policy Advice	
Quality, relevant and timely advice for Australian Government decision-making measured by Ministerial satisfaction.	Ministerial satisfaction.
Production of relevant and timely evidence-based policy research.	Relevant evidence-based policy research produced in a timely manner.
Output Group 1 Resourcing: \$23.349m	

Indicator	2008-09 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 measured by comparison of actual expenses against budget.	0.5% variance from budgeted expenses.
Stakeholders participate in program development through a range of avenues, such as surveys, conferences, meetings, and submissions on departmental discussion papers.	Stakeholders participate in program development.
Output Group 2 Resourcing: \$29.239m	

Performance Information for Regulatory Activities

Indicator	2008-09 Reference Point or Target
Output Group 2 – Program Management	
Evaluations and appeals of decisions in relation to: <ul style="list-style-type: none"> • entry of products onto the Australian Register of Therapeutic Goods; and • dealings with genetically modified organisms. 	100% of evaluations are made within legislated timeframes. 100% of appeals of decisions are considered within legislated timeframes.
Assessments and responses to appeals of decisions in relation to industrial chemicals are made within legislated timeframes.	100% of appeals of decisions are considered within legislated timeframes. 96% of New Chemicals assessments considered within legislated timeframes and 100% adherence to legislated timeframes for Existing Chemicals.
Licensing and surveillance audits of Australian and overseas manufacturers are performed within target timeframes.	100% of audits of Australian manufacturers and 90% of audits of overseas manufacturers are performed within target timeframes.
Efficient post-marketing surveillance testing of therapeutic goods measured by the number tested.	Minimum of 800 products tested.
Compliance with conditions in licences to undertake dealings with genetically modified organisms. Measured by the percentage of field trials inspected.	Minimum of 20% of field trials inspected.
High level of compliance with the <i>Therapeutic Goods Act 1989</i> .	Reports of alleged breaches are assessed within 10 working days and appropriate response initiated.
High level of compliance with the <i>Gene Technology Act 2000</i> .	Reports of alleged breaches are assessed within 10 working days and appropriate response initiated.
High level of compliance with the <i>Industrial Chemicals (Notification and Assessment) Act 1989</i> .	Potential breaches are investigated within 100 working days for 95% of cases.
Effective communication and consultation with stakeholders measured by stakeholder survey.	Majority of stakeholders satisfied with the TGA's communication and consultation processes.

Indicator	2008-09 Reference Point or Target
Output Group 2 – Program Management	
Timely and thorough consultation with stakeholders on regulatory change in relation to genetically modified organisms.	Seek input from stakeholders on proposed amendments to the Gene Technology Regulations 2001.
Timely and appropriate consultation with all stakeholders in relation to industrial chemicals.	All relevant stakeholders (community, governments and industry) consulted.
Influential role in international assessments, regulatory approaches, and methodologies for incorporation, as appropriate, into Australian industrial chemicals assessment and management systems.	Active participation in international harmonisation activities and progression of bilateral relationships.
Facilitate cooperation and harmonisation in the implementation of regulation of genetically modified organisms.	High degree of cooperation with relevant regulatory agencies.
NICNAS cost recovery activities undertaken in accordance with the <i>Industrial Chemicals (Notification and Assessment) Act 1989</i> .	100% adherence to legislated and departmental requirements.
Output Group 2 Resourcing for Regulators: \$154.364m	