Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: Last Updated by Adviser:

NATIONAL CANCER SCREENING REGISTER

BUDGET

KEY POINTS

- One of the Government's important priorities is to build on Australia's world leading cancer screening programs through the implementation a national register that supports the delivery of the best outcomes for all eligible Australians.

 The renewed National C implement
- implemented on 1 December 2017. The register functions to support the renewed program and is being performed jointly between the NCSR and the state and territory registers, during a deligerately phased transition approach, which includes migration of state and territory cervical screening data planned for completion in March 2018.
- During the transition phase state and territory registers will continue to provide pre 1 December 2017 cervical screening histories to laboratories and healthcare products, and complete follow up for Paptest results received by the state and territory registers prior to 30 November 17.
- Transition of the National Bowel Cancer Screening Register (NBCSR) is planned to complete in 2018.

FACTS & FIGURES

- Telstra Heath, a standalone health-focused business unit of Telstra, was appointed on 4 May 2016 as the service provider to the Commonwealth, to implement and operate the NCSR to support the cer%al renewal and the transition of the NBCSR from Department of **₩**man Services.
- This document The protection of personal information held in the NCSR is of paramount importance. The NCSR is required to comply with Commonwealth cyber security policies, provide layers of defence to protect against malware, viruses or Trojans as set out in the Information Security Manual (ISM), and adhere to the stringent controls of the Commonwealth Protective Security Policy Framework.
 - The NCSP is a jointly delivered Commonwealth and state and territory program, in the process of transition from eight separate state and

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territory screening registers to the NCSR.

's Department of Health The National Bowel Cancer Screening Program is a Commonwealth program, run in partnership with the states and territories, supported by a single register currently operated by the Department of Human Services.

OUR COMMITMENTS

IF ASKED

This first phase of the NCSR has met all of the government's

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: Last Updated by Adviser:

Current inquiry on the Australian National Audit Office audit into the procurement of the NCSR

- The Joint Committee of Public Accounts and Audit is conducting an
- Ine Auditor General's report on the Procurement of the NCSR published on 29 June 2017 found that the department complied with the Commonwealth Procurement Guidelines (CPGs) and achieved value for money for the Commonwealth but made recommendations the management of conflicts of interest (Coll)

 The Department of Health has strength The Auditor General's report on the Procurement of the NCSR
- The Department of Health accepted the report recommendations and has strengthened its Col declarations and management processes of any actual, potential and perceived conflicts of interest that may arise in relation to Procurement exercises conducted Health.
- The department has prepared submission to the inquiry and will attend the public hearing scheduled for 14 Few uary 2018.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: Last Updated by Adviser:

ACTUAL IMPACT (Include a real world example)

The renewed NCSP is estimated to reduce cervical cancer incidence

BACKGROUND

The National Cancer Screening Register legislation

- The National Cancer Screening Register Act 2016 and National Cancer Screening Register (Consequential and Transitional Provisions) 2016 (the NCSR Legislation) commenced on 21 October The NCSR legislation limits information.
- information in the NCSR outside of the circumstances set out in the legislation; and creates an offence arising from the unauthorised recording, use or disclosure of personal information contained in the NCSR.
- The National Cancer Screening Register Rules 2017 commenced on 1 December 2017 and describes the information to be notified to the NCSR by pathologists and colposcopists

Delay to the renewal of the National Cervical Screening Program

- On 27 February 2017, Australia Chief Medical Officer announced a revised commencement date the NCSR to support the renewal of the NCSP from 1 May 2017 to December 2017, including interim arrangements for MBS items.
- The complexity of assimilating eight state and territory cervical screening registers and the MBCSR into a new national register and migrating the data has never been done before, so every precaution is being done to ensure it is right to protect individual's privacy and ensure clinical safety. This resulted in the requirement for significant replanning.
- Funding of \$40.8 million over five years for interim arrangements to support the continuation of the current NCSP and NBCSP following the delay was announced in the 2017-18 Budget, with additional funding of \$3 million for the one-off assistance package to be funded from existing health resources.

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yo _{Ciji}	Contact Officer: Assistant Secretary	David Paull	Work Phone: (02) 6289 7821	Mobile Phone: s22(1)(a)(ii)	
This docu	Cleared by: First Assistant Secretary	Bettina Konti	Work Phone: (02) 6289 9350	Mobile Phone: s22(1)(a)(ii)	
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¹ Jie-Bin Lew et al (2017). Primary HPV testing versus cytology-based cervical screening in women in Australia vaccinated for HPV and unvaccinated: effectiveness and economic assessment for the National Cervical Screening Program. The Lancet Public Health. Volume 2, February 2017.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

NATIONAL CANCER SCREENING REGISTER (NCSR)

BUDGET

KEY POINTS

- One of the Government's important priorities is to build on Australia's world leading cancer screening programs through the implementation a national register that supports the delivery of the best outcomes for all eligible Australians.

 The renewed National C implement
- implemented on 1 December 2017. The register functions to support the renewed program are being performed jointly between the NCSR and the state and territory registers, during a deliberately phased transition
- ansition phase state and territory registers will continue to provide pre 1 December 2017 cervical screening histories to laboratories and healthcare providers, and complete follow up for Paptest results received by the state and territory registers prior to 30 November 17. Women was still have unbroken according test as part of upon continue. All centre. healthcare provider no ordered the test, as well as to the NCSR.
 - Following the migration, the NCSR will match all pathology test results received since 1 December 2017 to participant records, and calculate the screening pathway outcome under the renewed cervical screening guidelines. From that point onwards, pathology laboratories and health@are providers will be able to obtain complete screening histories from the NCSR. The eight separate state and territory registers will be **v€**dundant.

The implementation of the next phase of the NCSR is planned for completion by 29 June 2018.

This document The new screening program rules are risk based and complex. The Commonwealth and states and territories are working together, taking every precaution to ensure the NCSR is working correctly to protect an individual's clinical safety.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

- The phased implementation approach will ensure the high clinical quality and safety standards expected by the program are supported by the NCSR.
- National Cervical Screening Program. The NBCSR is already a national register and is currently operated by the Department of Human Services (DHS) and DHS will continue to operate the NECSR is already and the NECSR is already and DHS will continue to operate the NECSR is already and DHS will be necessarily and DHS will be necessari Work on the transition of the National Bowel Cancer Screening Register transitioned to the NCSR. It is expected the transition will occ the 2019 calendar year.

FACTS & FIGURES

- The protection of personal information held in the NCSR is of paramount importance. The NCSR is required to comply with Commonwealth cyber The NCSP is a jointly delivered Commonwealth and state and territory screening registers to the NCSR.

 The National Bowel Cancer Screening Program is program, run in partnership with the commonwealth and state and territory screening registers to the NCSR.

 The National Bowel Cancer Screening Program is program, run in partnership with the commonwealth and state and territory screening registers to the NCSR.

 OUR COMMON TO STATE OF THE PROGRAM AND THE PROGRA security policies, provide layers of defence to profect against malware, viruses or Projans as set out in the Information Security Manual (ISM), and adhere to the stringent controls of the sommonwealth Protective Security Policy Framework.
 - The NCSP is a jointly delivered Componwealth and state and territory
 - The National Bowel Cancer Creening Program is a Commonwealth program, run in partnership with the states and territories, supported by

IF ASKED

ine NCSR has met all o constant for quality assurance includir safety standards and any further charguired to meet the same high standards. This first phase of the NCSR has met all of the government's requirements for quality assurance including privacy, security and clinical safety standards and any further changes to the system are

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

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e Department of Health

The department has been monitoring operational data using the number of tests being received by the NCSR. Based on this, it appears that the expected number of ceople continue to present for cervical screening. ine Australian Mational Audi

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

Procurement of Telstra Health

- Telstra Health, a standalone health-focused business unit of Telstra, During the selection process, a risk assessment was completed by the department. Risks and treatments were identified, and a comparison between the tenderers completed.

 The Australian National August Content of the NBCSR from Department of the NBC
- determine whether the department:
 - appropriately managed the procurement of services for the NCSR; and
- Auditor General's report on the Procurement of the NCSR sublished on 29 June 2017 found that the department complied with the CPGs and achieved value for maney for the Commonwealth but made recommendations regarding the management of conflicts of (Col).

 It was noted that some hard
 - had not declared the Telstra shares. Due to the low level of shares held, this was a considered a perceived rather than real Col. At no point in time was any single person in the evaluation process the sole decision maker.
 - The Department of Health accepted the report recommendations and has strengthened its Col declarations and management processes of any actual, potential and perceived conflicts of interest that may arise in exation to procurement exercises conducted by Health.

This document The Joint Committee of Public Accounts and Audit is conducting an inquiry on the Auditor-General's report on the Procurement of the National Cancer Screening Register, as well as two other Commonwealth procurement reports.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

- The department has prepared submission to the inquiry and attended the public hearing on for 14 February 2018. A follow-up session was held on 28 March 2018.
- e Department of Health Mr Julian Hill raised the finding in the ANAO report that the evaluation was undertaken using untreated risks when comparing the final two tenderers rather than the treated risks. An assertion was made by Mr Hill that this may have altered the outcome.

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Tris documents arranging for DHS to continue to operate the NBC will not require a new policy proposal funds are intended to be sourced from monies notionally allocated to Telstra Health to operate the NBCSR, brought forward from 2017/10 underspends as a movement of funds request in the context. This is estimated to The department is arranging for DHS to continue to operate the NBCSR a further 12-18 months. This will not require a new policy proposal as context. This is estimated to cost between \$40 million and \$50 million.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

Media reports about Telstra Health's Argus software

- The Sydney Morning Herald reported on 22 March 2018 that there is a Australian medical information to hackers.

 The Argus software relates to secure messaging and is an acquisition of Telstra Health.

 The Argus software product is not used by the NCSR. It is not connected to the NCSR solution in any way.

 ACTUAL IMPACT (Include a real world example)

 The renewed NCSP is estimated to reduce comical and mortalists.

and mortality by up to 30%¹.

BACKGROUND

The National Cancer Screening Register legislation

- The National Cancer Screening Register Act 2016 and National Cancer Screening Register (Consequential and Transitional Provisions) Act 2016 (the NCSR Legislation) commenced on 21 October 2016.
- The NCSR legislation limits the use and disclosure of personal information in the NCSR outside of the circumstances set out in the legislation; and creates an offece arising from the unauthorised recording, use or disclosure of personal information contained in the NCSR.
- The National Cancer Screening Register Rules 2017 commenced on 1 December 2017 and describes the information to be notified to the NCSR by pathologists and colposcopists.

Delay to the renewal of the National Cervical Screening Program

- On 27 February 2017, Australia's Chief Medical Officer announced a revise@commencement date for the NCSR to support the renewal of the NCSP from 1 May 2017 to 1 December 2017, including interim Pangements for MBS items.
- This document The complexity of assimilating eight state and territory cervical screening registers and the NBCSR into a new national register and migrating the data has never been done before, so every precaution is being done to ensure it is right to protect individual's privacy and ensure clinical safety. This resulted in the requirement for significant replanning.

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¹ Jie-Bin Lew et al (2017). Primary HPV testing versus cytology-based cervical screening in women in Australia vaccinated for HPV and unvaccinated: effectiveness and economic assessment for the National Cervical Screening Program. The Lancet Public Health. Volume 2, February 2017.

Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 28 March 2018 Last Updated by Adviser:

 Funding of \$40.8 million over five years for interim arrangements to support the continuation of the current NCSP and NBCSP following the delay was announced in the 2017-18 Budget, with additional funding of \$3 million for the one-off assistance package to be funded from existing health resources.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 16 May 2018 Last Updated by Adviser:

NATIONAL CANCER SCREENING REGISTER (NCSR)

- One of the Government's important priorities is to build on Apstralia's world leading cancer screening programs through the implementation of a national register that supports the delivery of the best possilion outcomes for all eligible Australians.

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- During the transition phase state and territory registers will continue to provide pre 1 December 2017 covical screening histories to laboratories and healthcare providers, and complete followest results received by the state and territory registers will continue to laboratories and healthcare providers, and complete followest results received by the state and territory registers will continue to laboratories and healthcare providers, and complete followest results received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers, and complete followers are received by the state and territory registers will continue to laboratories and healthcare providers. continue. All cervica screening test results are sent directly to the healthcare provider who ordered the test, as well as to the NCSR.
- Following the migration, the NCSR will match all pathology test results received since 1 December 2017 to participant records, and calculate the screening pathway outcome under the renewed cervical screening guidelines. From that point onwards, pathology laboratories and Rom the North redundant.

 The imhealthcare providers will be able to obtain complete screening histories From the NCSR. The eight separate state and territory registers will be
 - The implementation of the next phase of the NCSR is planned for completion by 29 June 2018.
 - The new screening program rules are risk based and complex. The Commonwealth and states and territories are working together, taking every precaution to ensure the NCSR is working correctly to protect an individual's clinical safety.

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Date QTB Fact Brief created: 23 January 2018
Last Updated by Department: 16 May 2018
Last Updated by Adviser:

- The phased implementation approach will ensure the high clinical quality and safety standards expected by the program are supported by the NCSR.
- Work on the transition of the National Bowel Cancer Screening Register (NBCSR) will recommence once the NCSR is fully supporting the National Cervical Screening Program. The NBCSR is already a national register and is currently operated by the Department of Human Services (DHS) and DHS will continue to operate the NBCSR until it is transitioned to the NCSR. It is expected the transition will occur are in the 2019 calendar year.

FACTS & FIGURES

- The protection of personal information held in the NCSR is of paramount importance. The NCSR is required to comply with Commonwealth cyber security policies, provide layers of defence to protect against malware, viruses or Trojans as set out in the Information Security Manual (ISM), and othere to the stringent controls of the Commonwealth Protective Security Policy Framework.
 - PThe NCSP is a jointly delivered Commonwealth and state and territory program, in the process of transition from eight separate state and territory screening registers. The NCSR.
- The National Bowel Capeer Screening Program is a Commonwealth program, run in partnership with the states and territories, supported by a single register curently operated by DHS.

OUR COMMITMENTS

IF ASKED

This first phase of the NCSR has met all of the government's requirements for quality assurance including privacy, security and clinical safety standards and any further changes to the system are required to meet the same high standards.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 16 May 2018 Last Updated by Adviser:

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e Department of Health

The department has been monitoring operational data using the number of tests being received by the NCSR. Based on this, it appears that the the Australian Mational Audi of tests being received by the NCSR. Based on this, it appears that the expected number of people continue to present for cervical screening.

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Procurement of Telstra Health

This document ha be Telstra Health, a standalone health-focused business unit of Telstra, was appointed on 4 May 2016 as the service provider to the Commonwealth, to implement and operate the NCSR to support the cervical renewal and the transition of the NBCSR from Department of Human Services.

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- During the selection process, a risk assessment was completed by the department. Risks and treatments were identified, and a comparison between the tenderers completed.
- The Australian National Audit Office (ANAO) conducted an audit to determine whether the department:
- o effectively considered value for money, consistent with the Commonwealth Procurement Guidelines (CPGs) in the procurement process.

 uditor General's report on the Production of the Procurement of services for the procurement with the Commonwealth Procurement Guidelines (CPGs) in the procurement process. The Auditor General's report on the Procurement of the NCSR published on 29 June 2017 found that the department complied with the CPGs and achieved value for money for the Commonwealth but made recommendations regarding the management of conflicts of interest (CoI).
- neld, this was a considered a perceived rather than real Col. At a rein time was any single person in the evaluation process the sole decision maker.

 The Department of Health accepted the rein has strengthened its Color any actual It was noted that some members on the procurement selection panel had not declared their Telstra shares. We to the low level of shares held, this was a considered a perceived rather than real Col. At no point
 - The Department of Health accepted the report recommendations and has strengthened its Coloic larations and management processes of any actual, potential and perceived conflicts of interest that may arise in relation to procure ment exercises conducted by Health.

Current inquiry on the Australian National Audit Office audit into the procurement of the NCSR

- The Joint Committee of Public Accounts and Audit (JCPAA) is conducting an inquiry on the Auditor-General's report on the Pro&rement of the National Cancer Screening Register, as well as two reports.
- This document The department prepared a submission to the inquiry detailing how it had implemented the ANAO's recommendations around management of Col, and the additional improvement actions it was implementing to enhance procurement practices.
 - Actions include: declarations of interest are a mandatory requirement; records are kept centrally and completion rates are tracked; conflicts are appropriately addressed; Senior Executive Service (SES) officers declare interests annually via an online form that is based on guidance

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from the Australian Public Service Commission; SES officers are required to review declarations where there has been a change in circumstances or position.

- The Department attended the public hearing on 14 February 2018.

 Mr Julian Hill raised the finding in the ANAO report that the evaluation was undertaken using untreated risks when comparing the final two tenderers rather than the treated risks. An assertion was Mr Hill that this may have altered the
- The Department would not want to speculate on whether this may have altered the outcome as there are a number of factors that can influence a value for money assessment, including the potential cost or impact of the treatment of risk.

 The JCPAA is still accepting submissions to the inquire completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as a second completion of the inquire as not been decreased as a second completion of the inquire as not been decreased as a second completion of the inquire as a second completion of the inquire as not been decreased as a second completion of the inquire as a second comple At the 28 March hearing the Auditor-General commented that "... we

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Funding to DHS to continue the NBCSR

Author The Department is arranging for a further 12-18 for a further 12-18 for a funds arrangement is a funds arrangement in the continue the NBCSR funds are second and the continue the NBCSR for the continue the NBCSR funds are second and the nBCSR fund The Department is arranging for DHS to continue to operate the NBCSR for a further 12-18 months. This will not require a new policy proposal as funds are intended to be sourced from monies notionally allocated to Telstra Health to operate the NBCSR, brought forward from 2017/18 underspends as a movement of funds request in the current budget context. This is estimated to cost between \$40 million and \$50 million.

ACTUAL IMPACT (Include a real world example)

The renewed NCSP is estimated to reduce cervical cancer incidence and mortality by up to 30%1.

BACKGROUND

The National Cancer Screening Register legislation

The National Cancer Screening Register Act 2016 ลูคุd National Cancer Screening Register (Consequential and Transitional Provisions) Act 2016 (the NCSR Legislation) commenced on 21 October 2016.

The NCSR Legislation limits the use and disclosure of personal information in the NCSR outside of the circumstances set out in the

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Delay to the renewal of the National Cervical Screening Program

- On 27 February 2017, Australia's Chief Medical Officer announce a revised commencement date for the NCSR to support the renewal of the NCSP from 1 May 2017 to 1 December 2017, including interim arrangements for MBS items.
- The complexity of assimilating eight state and territory cervical screening registers and the NBCSR into a new national register and migrating the data has never been done before, so every precaution is being done to ensure it is right to protect individual's privacy and ensure clinical safety.
- and ensure clinical safety and ensure clinical safety and ensure clinical safety and ensure clinical safety and the replanning.

 3 40.8 million over five years for interim arrangements to support the continuation of the current NCSP and NBCSP following the delay was announced in the 2017-78 Budget, with additional funding of \$3 million for the one-off assistance package to be funded from existing health resources.

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Date QTB Fact Brief created: 23 January 2018 Last Updated by Department: 1 June 2018 Last Updated by Adviser: 1 June 2018

NATIONAL CANCER SCREENING REGISTER (NCSR)

BUDGET

KEY POINTS

- One of the Government's important priorities is to build on Australia's world leading cancer screening programs through the implementation a national register that supports the delivery of the best outcomes for all eligible Australians.

 On 27 February 2017 Australians.
- announced a revised commencement date for the NCSR to support the renewal of the NCSP from 1 May 2017 to 1 December 2017, including interim an angements for MBS items.

 A \$3 million one-off assistance package was provided to the pathology sector so it could retain cytologists to continue the Pan test program for
- sector so it could retain cytologists to continue the Pap test program for

\$6.2 million for MBS items to continue the Pap test program was also

- made available.

 Since December 2017 (commencement of HPV testing), pathology labs have downsized their coolingly staffing levels as originally planned.
- The Government is wat aware of any current issues with cytology staffing as a result of this change.
- The renewed National Cervical Screening Program (NCSP) was implemented on 1 December 2017. The register functions to support the renewed program are being performed jointly between the NCSR and the state and territory registers, during a deliberately phased transition
- partial Notice of the transition phase state and territory registers will comprove the provide pre 1 December 2017 cervical screening histories to laboratories and healthcare providers, and complete following test results received by the state and territory registers will complete following the state and territory registers will register the state and territory registers wi ring the transition phase state and territory registers will continue to laboratories and healthcare providers, and complete follow up for Paptest results received by the state and territory registers prior to 30 November 2017. Women will still have unbroken access to the new cervical screening test as part of usual care arrangements. This will continue. All cervical screening test results are sent directly to the healthcare provider who ordered the test, as well as to the NCSR.

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- Following the migration, the NCSR will match all pathology test results received since 1 December 2017 to participant records, and calculate The implementation of the next phase of the NCSR is planned for acting to the new screening program rules are risk based and complex. The Commonwealth and states and territories are working every precaution to ensure the NCSR is planned for acting the new screening program rules are risk based and complex. The commonwealth and states and territories are working individual's clinical acting the new screening program to ensure the NCSR is planned for acting the new screening program rules are risk based and complex. The commonwealth and states and territories are working individual's clinical acting the new screening program rules are risk based and complex. the screening pathway outcome under the renewed cervical screening

- The phased implementation approach will ensure the high clinical quality
- (NBCSR) will recommence once the NCSR is fully supporting the National Cervical Screening Program. The NBCSR is already a national register and is currently operated by the Department of Human Services (DHS) and DHS will continue to operate the NBCSR until transitioned to the NCSR. Wis expected to the 2019 calendar veer

FACTS & FIGURES

- The protection of personal information held in the NCSR is of paramount importance. The NCSR is required to comply with Commonwealth cyber The NCSP is a jointly do program, in the territor security policies, provide layers of defence to protect against malware, viruses or Trojans as set out in the Information Security Manual (ISM), and adhere to the stringent controls of the Commonwealth Protective
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 - The National Bowel Cancer Screening Program is a Commonwealth program, run in partnership with the states and territories, supported by a single register currently operated by DHS.

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OUR COMMITMENTS

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IF ASKED

e Department of Health This first phase of the NCSR has met all of the government's requirements for quality assurance including privacy, security and clinical safety standards and any further changes to the system are required to meet the same high standards.

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This document ha be The department has been monitoring operational data using the number of tests being received by the NCSR. Based on this, it appears that the expected number of people continue to present for cervical screening.

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Procurement of Telstra Health

- Telstra Health, a standalone health-focused business unit of elstra, was appointed on 4 May 2016 as the service provider to the Commonwealth, to implement and operate the NCSR to surcervical renewal and the transition of the NBCSP (Human Services.

 During the selection prolegation and lepartment of the NBCSP)
- ine Australian National Audit Office
 Australian National Audit Office
 o appropriately management
 NCSR; and department. Risks and treatments were identified, and a comparison
 - The Australian National Audit Office (ANAO) conducted an audit to
 - appropriately manage The procurement of services for the
 - effectively considered value for money, consistent with the Commonwealth Procurement Guidelines (CPGs) in the procuremed process.
 - The Auditor General's report on the Procurement of the NCSR published on 29 June 2017 found that the department complied with the CPGs and Schieved value for money for the Commonwealth but made
- was noted that some members on the procurement selection pane had not declared their Telstra shares. Due to the low level of shares held, this was a considered a perceived rather than real Col. At no in time was any single person in the evaluation per decision maker.

 The Dor Itawas noted that some members on the procurement selection panel held, this was a considered a perceived rather than real Col. At no point
 - The Department of Health accepted the report recommendations and has strengthened its Col declarations and management processes of any actual, potential and perceived conflicts of interest that may arise in relation to procurement exercises conducted by Health.

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Current inquiry on the Australian National Audit Office audit into the procurement of the NCSR

- The department prepared a submission to the inquiry detailing how had implemented the ANAO's recommendations around managed.

 Col, and the additional improvement actions it was enhance procurement practices. The Joint Committee of Public Accounts and Audit (JCPAA) is
- Actions include: declarations of interest are a mandatory requirement; records are kept centrally and completion rates are tracked; conflicts are appropriately addressed; Senior Executive Service (SES) officers declare interests annually via an online form that based on guidance an addition, the department reviewed and updated its templates for exisignificant or complex procurements to provide more guidance to staff on probity protocols and management of Col during a tender process of the Department attended the public hearing of follow-up session was held or the public hearing of the Mr. Italian and the public hearing of th from the Australian Public Service Commission, SES officers are

 - was undertaken using untreated risks when comparing the final two tenderers rather than the treated risks. An assertion was made by Mr Hill that this may have altered the outcome.
 - At the 28 March hearing the Auditor-General commented that "... we different outcome if a different approach was taken, because we are not
- The Department would not want to speculate on whether this may have altered the outcome as there are a number of factors that can influence a value for money assessment, including the notor.

 The Department would not want to speculate on whether this may have altered the outcome as there are a number of factors that can influence a value for money assessment, including the notor.
 - The JCPAA is still accepting submissions to the inquiry. The date for completion of the inquiry has not been determined.

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Contract with Telstra Health

- During Budget Estimates on 29 May 2018, the department was
- and could contentation of the NCSR.

 In the Services Agreement to protect the security including termination options, delay provisions, reduction in scope and dispute resolution procedures.

 At this stage the Government has no plans to exercise any penalty provision as delivery is being achieved through withholding of page.

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Fuล®ing to DHS to continue the NBCSR

This documen The Department is arranging for DHS to continue to operate the NBCSR for a further 12-18 months. This will not require a new policy proposal as funds are intended to be sourced from monies notionally allocated to Telstra Health to operate the NBCSR, brought forward from 2017/18 underspends as a movement of funds request in the current budget context. This is estimated to cost between \$40 million and \$50 million.

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The National Cancer Screening Register Act 2016 and National Cancer Screening Register Act 2016 and National Cancer Screening Register (Consequential and Transitional Provisions) Act 2016 (the NCSR Legislation) commenced on 21 O

information in the NCSR outside of the circumstances set out in the

¹ Jie-Bin Lew et al (2017). Primary HPV testing versus cytology-based cervical screening in women in Australia vaccinated for HPV and unvaccinated: effectiveness and economic assessment for the National Cervical Screening Program. The Lancet Public Health. Volume 2, February 2017.

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legislation; and creates an offence arising from the unauthorised recording, use or disclosure of personal information contained in the NCSR.

- On 27 February 2017, Australia's Chief Medical Officer (CMO) announced a revised commencement date for the NCSR to support the renewal of the NCSP from 1 May 2017 to 1 December 2017, Including that an agreement had been reached between the Australia Government and representatives of the ensure that women. cervical cancer until the renewed NCSP commerced on
- Jennt state and territory cervical screening use in BCSR into a new national register and migrating the use has never been done before, so every precaution is being done to ensure it is right to protect individual's privacy and ensure clinical safety. This resulted in the requirement or significant replanning.

 Funding of \$40.8 million overflive years for interimal support the continuation of the current delay was announced. The complexity of assimilating eight state and territory cervical screening

 - A \$3 million one-off assistance package was provided to the pathology sector so it could retain cytologists to continue the Pap test program for the period 1 May 2017 to 1 December 2017.
 - \$6.2 million for MBS items to continue the Pap test program was also made available for the same period 1 May 2017 to 1 December 2017. This included increased fees for conventional cytology (pap test) and the introduction of a new MBS item for liquid based cytology (LBC).
- This document The renewed program commence on 1 December 2017 with new MBS tems with fees set following consultation with the Pathology Sector.

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