

2017 – 18 Budget Estimates

Report No. 41, 55th Parliament
Health, Communities, Disability Services and
Domestic and Family Violence Prevention
Committee

August 2017

Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee

Chair	Ms Leanne Linard MP, Member for Nudgee
Deputy Chair	Mr Mark McArdle MP, Member for Caloundra
Members	Mr Sid Cramp MP, Member for Gaven
	Ms Leanne Donaldson MP, Member for Bundaberg
	Mr Aaron Harper MP, Member for Thuringowa
	Dr Mark Robinson MP, Member for Cleveland

Committee Secretariat

Telephone	+61 7 3553 6626
Fax	+61 7 3553 6699
Email	hcdsdfvpc@parliament.qld.gov.au
Committee Webpage	www.parliament.qld.gov.au/hcdsdfvpc

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Chair's foreword

This report presents a summary of the Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee's examination of the budget estimates for the 2017-18 financial budget contained in the Appropriation Bill 2017 for the committee's areas of responsibility.

Consideration of the budget estimates allows for the public examination of the responsible Ministers and the chief executive officers of agencies within the committee's portfolio areas. This was undertaken through questions on notice and a public hearing process.

The committee has recommended that the proposed expenditure, as detailed in the Appropriation Bill 2017 for the committee's areas of responsibility, be agreed to by the Legislative Assembly without amendment.

On behalf of the committee, I thank the Minister for Health and Minister for Ambulance Services, the Minister for Communities, Women and Youth, Minister for Child Safety and Minister for the Prevention of Domestic and Family Violence and the Minister for Disability Services, Minister for Seniors and Minister Assisting the Premier on North Queensland. I also thank Ministers' departmental officers and statutory authority officials for their co-operation in providing information to the committee through this process.

I would also like to thank committee members for their hard work and valuable contribution to the estimates process, and other members whose participation in the hearing provided additional scrutiny of estimates.

Finally, I thank the committee's secretariat, other Parliamentary Service staff and Deaf Services Queensland for their assistance throughout the estimates process.



Leanne Linard MP

Chair

August 2017

1. Introduction

1.1 Role of the Committee

The Health, Communities, Disability Services and Domestic and Family Violence Prevention Committee (the committee) is a portfolio committee of the Queensland Parliament.¹ The committee's areas of responsibility are:

- health and ambulance services
- communities, women, youth, child safety and multicultural affairs
- domestic and family violence prevention, and
- disability services and seniors.²

The committee also has a monitoring and oversight function in relation to the Health Ombudsman.³

Section 92 of the *Parliament of Queensland Act 2001* provides that the committee's role includes consideration of Appropriation Bills.

On 13 June 2017, the Appropriation Bill 2017 and the estimates for the committee's area of responsibility were referred to the committee for investigation and report.⁴

The committee conducted a public hearing on 26 July 2017, and took evidence about the proposed expenditure from the:

- Minister for Health and Minister for Ambulance Services
- Minister for Communities, Women and Youth, Minister for Child Safety and Minister for the Prevention of Domestic and Family Violence, and
- Minister for Disability Services, Minister for Seniors and Minister Assisting the Premier on North Queensland.

A copy of the transcript of the committee's hearing can be accessed [here](#).⁵

1.2 Aim of this report

The committee considered the estimates referred to it by using information contained in:

- budget papers
- answers to pre-hearing questions on notice
- evidence taken at the hearing, and
- additional information given in relation to answers.

¹ The committee was formerly the Health and Ambulance Services Committee, which was established on 27 March 2015 under the *Parliament of Queensland Act 2001* (POQA), section 88 and the Standing Rules and Orders of the Legislative Assembly (Standing Orders), Standing Order 194. On 16 February 2016, the Legislative Assembly amended the Standing Orders, renaming the committee and expanding its areas of responsibility.

² POQA, section 88 and Standing Orders, Standing Order 194 and Schedule 6. The schedule provides that departments, statutory authorities, government owned corporations or other administrative units related to the relevant Minister's responsibilities regarding these areas are included.

³ *Health Ombudsman Act 2013*, section 179.

⁴ Standing Order 177 provides for the automatic referral of the Annual Appropriation Bills to portfolio committees once the Bills have been read a second time.

⁵ <http://www.parliament.qld.gov.au/work-of-committees/committees/HCDSDFVPC/inquiries/current-inquiries/Estimates-2017>

This report summarises the estimates referred to the committee and highlights some of the issues the committee examined.

Prior to the public hearing, the committee provided Ministers with questions on notice in relation to the estimates. Responses to all the questions were received.

The minutes of estimates meetings; correspondence about estimates; answers to the committee's pre-hearing questions on notice; documents tabled during the hearing; and answers and additional information provided by Ministers after the hearing, are included in a volume of additional information tabled with this report.

1.3 Other Members' participation

The committee gave leave for other Members of the Legislative Assembly to participate in the hearing. The following Members participated in the hearing:

- Ms Ros Bates MP, Member for Mudgeeraba
- Mr Andrew Cripps MP, Member for Hinchinbrook
- Mr Steve Dickson MP, Member for Buderim
- Mr John-Paul Langbroek MP, Member for Surfers Paradise
- Mrs Jo-Ann Miller MP, Member for Bundamba, and
- Mr Rob Pyne MP, Member for Cairns.

2. Recommendation

Pursuant to Standing Order 187(1), the committee must state whether the proposed expenditures referred to it are agreed to.

Recommendation 1

The committee recommends that the proposed expenditure, as detailed in the Appropriation Bill 2017 for the committee's areas of responsibility, be agreed to by the Legislative Assembly without amendment.

3. Queensland Health

The Minister for Health and Minister for Ambulance Services is responsible for the Queensland public healthcare system, which is collectively known as Queensland Health. Queensland Health comprises of:

- **Department of Health** – responsible for the overall leadership and management of the Queensland public health system under the *Hospital and Health Boards Act 2011*. To achieve this, the department works with the 16 Hospital and Health Services (HHSs) and the Queensland Ambulance Service (QAS) to ensure safe and responsive public health services for Queenslanders⁶
- **16 independent Hospital and Health Services** – HHSs are independent statutory bodies, established on 1 July 2012, to provide public hospital and health services, in accordance with the *Hospital and Health Boards Act 2011*, the principles and objectives of the national health system and the Queensland Government's priorities,⁷ and
- **Queensland Ambulance Service** – accountable for the delivery of pre-hospital ambulance response services, emergency and non-emergency pre-hospital care and transport services, inter-facility ambulance transport, casualty room services, and planning and coordination of multi-casualty incidents and disasters.⁸

The Minister is also responsible for three statutory bodies – the Office of the Health Ombudsman, the Council of the Queensland Institute of Medical Research (QIMR), known as the QIMR Berghofer Medical Research Institute, and the Queensland Mental Health Commission (QMHC), which make up the remainder of the Health portfolio.⁹

The following table compares the appropriations for Queensland Health for 2016-17 and 2017-18:

Appropriations	Budget 2016-17 \$'000	Est. Actual 2016-17 \$'000	Vote 2017-18 \$'000
<i>Controlled Items</i>			
departmental services	10,014,701	9,730,556	10,319,023
equity adjustment	52,644	(92,656)	113,690
<i>Administered Items</i>	33,974	42,512	34,149
Vote	10,101,319	9,680,412	10,466,862

Source: Appropriation Bill 2017, Schedule 2, p 15.

⁶ State Budget 2017-18, Service Delivery Statements, Queensland Health, pp 5 and 39.

⁷ State Budget 2017-18, Service Delivery Statements, Queensland Health, pp 2 and 5.

⁸ State Budget 2017-18, Service Delivery Statements, Queensland Health, p 53.

⁹ State Budget 2017-18, Service Delivery Statements, Queensland Health, p 5.

3.1 Budget highlights

Queensland Health's operating budget is \$16.554 billion for 2017-18, an increase of \$1.280 billion (8.4 per cent) on the 2016-17 Budget. The estimated operating budget comprises:

- \$10.276 billion in Queensland Government funding
- \$4.466 billion in Australian Government funding
- \$1.660 billion in user charges and fees, and
- \$150.801 million in other revenue.¹⁰

3.1.1 New measures and key funding initiatives

New measures and funding initiatives for Queensland Health in 2017-18 include:

- \$20 million, over three years, to fund the proposed Healthy Futures Commission Queensland
- \$2 million, over two years, for a suite of mental health initiatives for health professionals
- \$5.3 million to extend the School Immunisation Program to include the Meningococcal A, C, W and Y vaccine for year 10 students
- \$88 million under the *Making Tracks Investment Strategy 2015-18*, for Indigenous-specific health initiatives, including additional funding of \$3.2 million
- \$8 million to implement strategies identified under the *Queensland Sexual Health Strategy* and the *North Queensland Aboriginal and Torres Strait Islander Sexually Transmissible Infections Action Plan 2016-2021*
- \$126.5 million to support the continuation of initiatives to reduce specialist outpatient long waits and conversion to elective surgery
- \$37 million to deliver an additional 12,000 gastrointestinal endoscopies to meet the growth in demand associated with the *National Bowel Cancer Screening Program*
- \$6 million to continue to tackle the Ice epidemic in Queensland
- \$15 million to deliver the *Winter Bed Management Strategy*, and
- \$10 million, over four years, for the *Queensland Health and Medical Research Funding Program*.¹¹

3.1.2 Capital

The total capital investment program for Queensland Health (including the HHSs and the Queensland Ambulance Service (QAS)) and QIMR is \$916.1 million in 2017-18.¹² Capital program highlights for hospital and health facilities include:

- \$47.6 million (\$208.4 million over four years) for upgrades to health facilities and supporting infrastructure in rural and regional areas across the State
- \$24 million in 2017-18 (\$131.8 million over four years) as an initial investment to enhance public hospital capacity and services in south-east Queensland
- \$8.7 million in 2017-18 (\$68.2 million over four years) to establish a new Adolescent Extended Treatment Facility at The Prince Charles Hospital, two new adolescent Step Up

¹⁰ State Budget 2017-18, *Service Delivery Statements*, Queensland Health, pp 7 and 28.

¹¹ State Budget 2017-18, *Service Delivery Statements*, Queensland Health, pp 6 - 9.

¹² State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, p 99.

Step Down units in Brisbane and the refurbishment of two adolescent Day Program spaces at Logan and the Gold Coast

- \$80 million under the Priority Capital Program to be distributed across HHSs and Health Support Queensland for a range of capital works projects
- \$61.1 million, as part of the \$180 million Enhancing Regional Hospitals Program, for upgrades at the Hervey Bay and Gladstone Emergency Departments, Caloundra Health Service and Roma Hospital
- \$64.7 million for staged works as part of the new Sunshine Coast University Hospital
- \$27.3 million to progress Significant Regional Infrastructure Projects
- \$24.8 million as part of the \$230 million Advancing Queensland's Health Infrastructure Program, and
- \$31 million to finalise major programs of work where construction is largely complete, including: Cairns Hospital, Lady Cilento Children's Hospital, Rockhampton Hospital and Townsville Hospital Expansion.¹³

3.1.3 Concessions

The total cost of concessions provided via schemes administered by Queensland Health is estimated at \$287.4 million for 2017-18. This is a decrease of \$25.2 million on the 2016-17 estimated actual budget.¹⁴ A breakdown of concessions by scheme for 2017-18 is provided in the table below:

Concession scheme	2017-18 Estimate (\$ million)
Oral Health Scheme	149.2
Patient Travel Subsidy Scheme	82.7
Medical Aids Subsidy Scheme	35.7
Spectacle Supply Scheme	9.1
Community Aids Equipment and Assistive Technologies Initiative and Vehicle Options Subsidy Scheme	8.0
Total	284.7

Source: State Budget 2017-18, *Budget Strategy and Outlook – Budget Paper No. 2*, p 209.

3.2 Hospital and Health Services

3.2.1 Funding overview

A total of \$13.979 billion (84 per cent of the 2017-18 operating budget) will be allocated, through service agreements, to provide public healthcare services from HHSs, and other organisations. This represents an 11 per cent increase compared to the 2016-17 budget.¹⁵

The operating budget for each HHS in 2017-18, compared to 2016-17, is provided in the table below:

¹³ State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, pp 99 – 101.

¹⁴ State Budget 2017-18, *Budget Strategy and Outlook – Budget Paper No. 2*, p 186.

¹⁵ State Budget 2017-18, *Service Delivery Statements*, Queensland Health, p 7.

Health Service	2016-17 Budget (\$ million)	2017-18 Budget (\$ million)	Percentage change between 2016-17 and 2017-18 Budget (%)
Cairns and Hinterland (page 63)	777.9	906.8	16.6
Central Queensland (page 74)	531.5	566.3	6.5
Central West (page 86)	68.6	73.6	7.2
Children's Health (page 94)	677.2	720.2	6.4
Darling Downs (page 105)	674.5	761.7	12.9
Gold Coast (page 115)	1,283	1,391	8.4
Mackay (page 126)	357.9	415.1	16
Metro North (page 137)	2,386	2,666	11.7
Metro South (page 147)	2,194	2,315	5.5
North West (page 157)	156.3	172.5	10.4
South West (page 167)	135.8	141.6	4.3
Sunshine Coast (page 177)	996.8	1,155	15.9
Torres and Cape (page 189)	201.2	202.9	0.9
Townsville (page 200)	864.3	935.9	8.3
West Moreton (page 212)	512.3	554.6	8.3
Wide Bay (page 222)	524.5	581.9	10.9

Source: State Budget 2017-18, *Service Delivery Statements*, Queensland Health.

3.2.2 Capital

The HHSs will allocate \$190 million to capital projects across Queensland, including:

- \$7 million for the delivery of additional acute bed capacity at Redcliffe Hospital
- \$5.3 million for the expansion of the nuclear medicine hot-laboratory at Royal Brisbane and Women's Hospital, and
- \$3.3 million for the establishment of a Step Up Step Down mental health facility in Nundah to support the recovery of patients in the community.¹⁶

3.3 Queensland Ambulance Services

3.3.1 Funding overview

The QAS will have an operating expense budget of \$719.6 million for 2017-18, which is an increase of \$46.6 million (6.9 per cent) from 2016-17.¹⁷ Key activities for the QAS in 2017-18 include:

- recruiting 75 additional ambulance operatives to provide roster coverage to manage increased demand for ambulance services
- \$16.9 million for planning or delivering new and replacement ambulance stations at Birtinya, Bundaberg, Kenilworth, Thursday Island, Coral Gardens, Wynnum, Rockhampton, Hervey Bay, Drayton, Cairns and Kirwan, and
- continued procurement of Dynamic Deployment software to enhance resourcing and scheduling of frontline operations.¹⁸

¹⁶ State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, p 101.

¹⁷ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 53.

¹⁸ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 53.

3.3.2 Capital

The QAS will invest \$54.6 million in capital purchases in 2017-18 to support frontline services, including:

- \$21 million to purchase 150 new and replacement ambulance vehicles
- \$4 million for strategic land acquisitions to accommodate future expansion of services, and
- \$4.9 million for information systems development.¹⁹

3.4 Key issues raised at the public hearing

Issues raised at the hearing in relation to Queensland Health included:

- measures to tackle obesity and overweight levels
- specialist outpatient appointments, elective surgery and endoscopy wait times
- mental health services and funding
- nurse navigators and nurse-to-patient ratios
- access to medicinal cannabis
- the Service Delivery Statements
- health payroll system overpayment recovery process
- State and Commonwealth Government contributions to the Queensland Health budget
- redress scheme for former patients of the Wolston Park Mental Health Facility
- accuracy of blood tests since the introduction of integrated electronic medical records (ieMR)
- replacement of the Hospital Based Corporate Information System (HBCIS)
- provision of maternity services
- engagement with Health and Hospital Boards
- health services at the Cairns Hospital and budget deficit at the Cairns and Hinterland HHS
- use of local supplies of milk in Far North Queensland hospitals
- capital works programs - redevelopment and expansion of public hospitals
- urology services at the Hervey Bay Hospital
- Caloundra Hospital – closure of emergency department and opening of minor accidents and illness clinic, and
- intensive care services for Redland City residents.

Issues raised at the public hearing relating to the QAS included:

- provision of flags to ambulance stations
- patient off-stretcher time protocol and associated performance measures
- sedation of violent patients and assaults on paramedics
- paramedic meals allowances and overtime costs
- staffing and management

¹⁹ State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, p 102.

- ambulance station capital works, and
- transfer of passengers from the Sunshine Coast University Hospital to the Sunshine Coast Private Hospital.

4. Council of the Queensland Institute of Medical Research

The QIMR is a statutory body under the *Queensland Institute of Medical Research Act 1945*. The QIMR's research strategy focuses on the key areas of cancer, infectious diseases, mental health and chronic disorders.²⁰

4.1 Funding overview

The QIMR will receive \$18.9 million from the Queensland Government in 2017-18, which will represent approximately 15 per cent of its total revenue.²¹ In 2017-18, QIMR will:

- develop new blood-based biomarkers for detection and monitoring of cancers
- progress Alzheimers disease studies using a combination of genetics and imaging
- progress a major study into malignant mesothelioma
- use a Zika virus animal model to test internal and external treatment hypotheses and treatments
- expand its proteomics capacity to include metabolomics and lipidomics
- test at least six new anti-malaria drugs in human challenge trials
- continue the D-Health trial to investigate the role of vitamin D supplementation in preventing premature death, cancer and chronic diseases
- complete the genetic analysis of 19,000 participants in its QSkin study, and
- establish a start-up genomics company.²²

5. Queensland Mental Health Commission

The QMHC was established on 1 July 2013 as an independent statutory body under the *Queensland Mental Health Commission Act 2013*.

The QMHC's purpose is to drive ongoing reform towards a more integrated, evidence-based, recovery-oriented mental health, alcohol and other drugs service system in Queensland. It has a broad objective to achieve better outcomes for people in Queensland living with mental health difficulties, mental illness or problematic alcohol and other drug use by:

- reaching consensus on and making progress towards achieving system wide reforms, and
- maximising the collective impact of lived experience and professional expertise.²³

5.1 Funding overview

The QMHC has an operating budget of \$9 million in 2017-18, which is a slight increase on the budget of \$8.8 million in 2016-17.²⁴ In 2017-18, the QMHC will:

- renew and publish the Queensland Mental Health, Drugs and Alcohol Strategic Plan and updated action plans

²⁰ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 232.

²¹ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 232.

²² State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 233.

²³ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 240.

²⁴ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 240.

- initiate research on the rights protection framework for Queenslanders with a mental illness
- support mental health and wellbeing hubs in the Central Highlands, Logan and North Queensland
- design and implement an initiative for better coordination of quality mental health literacy training, and
- strengthen engagement with people with lived experiences and partnerships with non-government peak bodies and local governments.²⁵

6. Office of the Health Ombudsman

The Health Ombudsman, supported by the Office of the Health Ombudsman (OHO), commenced dealing with health complaints on 1 July 2014. The primary functions of the Health Ombudsman are to:

- receive and investigate complaints about health services and health service providers, including registered and unregistered health practitioners
- decide what action should be taken in relation to those complaints and, in certain instances, take immediate action to protect the safety of the public
- monitor the health, conduct and performance functions of the Australian Health Practitioner Regulation Agency (AHPRA) and national health practitioner boards
- provide information about minimising and resolving health service complaints, and
- report publicly on the performance of its functions.²⁶

6.1 Funding overview

The OHO has an operating budget of \$14.6 million in 2017-18, which is the same as the published operating budgets for 2016-17.²⁷ Key activities for the OHO in 2017-18 include:

- continued identification and management of immediate actions and oversight of and reporting on AHPRA and the Boards
- continued development of a legal case management system to support litigation practises
- implementation of phase 3 of its case management system database
- implementing any legislative amendments to the *Health Ombudsman Act 2013* and the *Health Practitioner Regulation National Law (Queensland) 2009*, and
- supporting the Government's consideration of the implementation of the committee's recommendations in its *Report No. 31, Inquiry into the performance of the Health Ombudsman's functions pursuant to section 179 of the Health Ombudsman Act 2013*.²⁸

²⁵ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 241.

²⁶ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 247.

²⁷ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 248.

²⁸ State Budget 2017-18, *Service Delivery Statement*, Queensland Health, p 248.

7. Department of Communities, Child Safety and Disability Services

The Department of Communities Child Safety and Disability Services (the department) falls under the shared responsibility of the:

- Minister for Communities, Women and Youth, Minister for Child Safety and the Minister for the Prevention of Domestic and Family Violence
- Minister for Disability Services, Minister for Seniors and Minister Assisting the Premier on North Queensland, and
- Minister for Employment and Industrial Relations, Minister for Racing and Minister for Multicultural Affairs.

The department provides or funds services through three service areas – Child and Family Services, Disability Services and Community Services.²⁹

The following table compares the appropriations for the department for 2016-17 and 2017-18:

Appropriations	Budget 2016-17 \$'000	Est. Actual 2016-17 \$'000	Vote 2017-18 \$'000
<i>Controlled Items</i>			
departmental services	2,794,221	2,780,900	2,722,317
equity adjustment	(13,075)	(22,915)	(24,319)
<i>Administered Items</i>	389,722	417,857	891,501
Vote	3,170,868	3,175,842	3,589,499

Source: Appropriation Bill 2017, Schedule 2, p 8.

7.1 Budget highlights

The department's total estimated expenditure of \$3.652 billion for 2017-18 comprises:

- \$2.418 billion in Queensland Government funding
- \$305.412 million in Australian Government funding
- \$14.697 million in user charges and fees, and
- \$5.558 million in other revenue.³⁰

7.1.1 Capital

The capital works program for the department is \$25.1 million in 2017-18. Total capital grants for the department will be \$4.2 million. These funds will focus on integrated community services and strengthen and protect the well-being of Queenslanders, particularly those who are vulnerable and most in need.³¹

²⁹ State Budget 2017-18, *Service Delivery Statements, Department of Communities, Child Safety and Disability Services* (DCCSDS), pp 1 – 2.

³⁰ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, pp 2 and 16.

³¹ State Budget 2017-18, *Capital Statement - Budget Paper No. 3*, p 32.

Capital works program highlights include:

- \$2.2 million for the construction of the Moranbah Youth and Community Centre, at a total cost of \$3.2 million
- \$7.3 million to continue the upgrade and construction program for multipurpose and neighbourhood centres
- \$2.1 million to continue infrastructure upgrades, rectification works, and construct purpose built accommodation for people with an intellectual and/or cognitive disability who exhibit extremely challenging behaviours
- \$1.4 million to establish a new Child Safety Service Centre in Morayfield and continue upgrades of child safety residential care facilities
- \$786,000, of a total \$2.6 million over two years, for the development of a whole-of-government ICT system to improve information sharing across agencies in regards to children missing from out-of-home care, and
- \$6.8 million for enhancements to key existing information systems and programs to implement new systems.³²

Capital grants highlights for the department include:

- \$2.2 million for the *Elderly Parent Carer Innovation Initiative*, and
- \$1.8 million for the purchase and modification of properties for people with high and complex needs providing safe and sustainable long term accommodation in Townsville, Cairns and Brisbane.³³

7.1.2 Concessions

The total cost of concessions provided via schemes administered by the department is estimated at \$290 million in 2017-18. This is an increase of \$27.9 million on the 2016-17 estimated actual budget.³⁴ A breakdown of concessions by scheme for 2017-18 is provided in the table below:

Concession scheme	2017-18 Estimate (\$ million)
Electricity Rebate Scheme	200
Pensioner Rate Subsidy Scheme	54.2
South East Queensland Pensioner Water Subsidy Scheme	19.6
Home Energy Emergency Assistance Scheme	10
Electricity Life Support Concession Scheme	2.5
Reticulated Natural Gas Rebate Scheme	2.3
Medical Cooling and Heating Electricity Concession Scheme	1.4
Total	290

Source: State Budget 2017-18, Budget Strategy and Outlook 2017-18 – Budget Paper No. 2, p 188.

7.2 Child and Family Services

The objective of Child and Family Services is to enable families to safely care for their children and to provide services to ensure the safety, belonging and well-being of children and young people not able to be cared for by their families. In doing so, Child and Family Services:

³² State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, p 32.

³³ State Budget 2017-18, *Capital Statement – Budget Paper No. 3*, pp 32 - 33.

³⁴ State Budget 2017-18, *Budget Strategy and Outlook 2017-18 – Budget Paper No. 2*, pp 186 - 188.

- leads and facilitates the delivery of family support, child protection and adoption services
- provides and invests in services delivered by the department and funded non-government organisations which support families to safely care for their children
- provides services to protect children and young people who have been harmed, or are at risk of harm, and secures their future safety and well-being
- provides and invests in out-of-home care and adoption services for children and young people not able to be cared for by their families
- helps families with multiple and complex needs through early intervention and intensive family support initiatives, and
- implements initiatives arising from Supporting Families Changing Futures reforms.³⁵

7.2.1 Funding overview

The total operating expenditure for Child and Family Services in 2017-18 is \$1.110 billion, an increase of 9.8 per cent on the 2016-17 adjusted budget.³⁶

7.2.2 New measures and key funding initiatives

Key new measures and funding initiatives for Child and Family Services in 2017-18 include:

- \$200 million, over four years, to fund and support frontline workers in the child protection system, including an additional 236 Child and Family Services staff in 2017-18, increasing to 292 in 2018-19
- \$7.4 million, over three years from 2017-18, to support families affected by the drug Ice, as part of the Action on Ice package
- continued investment in the rollout of the Supporting Families Changing Futures reforms, including:
 - state-wide implementation of Assessment and Service Connect to enable families to access services and support to help them address child protection concerns
 - \$6.9 million in 2017-18 to support foster and kinship carers through the non-government sector, and
 - \$13.4 million funding for intensive and secondary family support services in high needs locations across the State
- addressing the over-representation of Aboriginal and Torres Strait Islander children and families in the child protection system. Specific initiatives for 2017-18 include:
 - continued investment of \$32.2 million for the delivery of Family Wellbeing Services by Aboriginal and Torres Strait Islander community controlled organisations, and
 - continued funding of \$1.5 million, over three years from 2016-17, for the *First 1000 Days* program, to support young families from prior to the birth of their baby with a view to closing the gap across whole of life, and
- \$982,000 to facilitate the development of multi-agency responses to child and youth sexual abuse.³⁷

³⁵ State Budget 2017-18, *Service Delivery Statements, DCCSDS*, p 3.

³⁶ State Budget 2017-18, *Service Delivery Statements, DCCSDS*, p 3.

³⁷ State Budget 2017-18, *Service Delivery Statements, DCCSDS*, pp 3 - 4.

7.3 Disability Services

The objective of Disability Services is to enable Queenslanders with disability to have choice and control in their lives through access to disability services and other supports, and support for the transition to the National Disability Insurance Scheme (NDIS).³⁸ Disability Services:

- leads and facilitates the delivery of disability services and community care services for people under 65 years of age
- provides and invests in services delivered by the department and funded non-government organisations including personal care, accommodation and carer support, respite, community access, therapy and learning and skill development
- facilitates whole-of-government NDIS transition planning and implementation, and
- supports initiatives that create inclusive communities and services for people with disability.³⁹

7.3.1 Funding overview

The total operating expenditure for Disability Services in 2017-18 is \$1.945 billion, an increase of 10 per cent on the 2016-17 adjusted budget.⁴⁰

7.3.2 New measures and key funding initiatives

Key new measures and funding initiatives for Disability Services in 2017-18 include:

- roll out of NDIS to Ipswich, Bundaberg and Rockhampton
- contributing \$2.035 billion per annum to the NDIS from 2019-20
- \$8.3 million for NDIS readiness initiatives, including \$4.3 million under the Commonwealth Government's Sector Development Fund, and
- delivering disability services, including supported accommodation and respite services, as well as providing:
 - \$2.2 million to provide sustainable housing options for adults with disability when they can no longer be cared for by their elderly parents
 - \$7.0 million to fund school leavers with a disability who received funding in 2017, as well as 420 new students who will leave school in 2018
 - \$6.7 million to support up to 36 young adults with disability exiting State care, and
 - \$14.8 million for aids and equipment and vehicle modifications to assist people with disability access and participate in their community.⁴¹

7.4 Community Services

The objective of Community Services is to enable vulnerable individuals, families and groups to access services and participate in their communities.⁴² Community Services:

- leads strategies to improve the social and economic participation of seniors, carers, young people and people from culturally and linguistically diverse backgrounds and improve social cohesion
- invests in services delivered by non-government organisations for vulnerable groups and individuals

³⁸ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 7.

³⁹ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 7.

⁴⁰ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 7.

⁴¹ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 7 - 8.

⁴² State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 10.

- leads and facilitates initiatives to strengthen the Queensland community services sector
- leads and supports social and human recovery in disaster-impacted communities
- leads the Queensland Women's Strategy
- contributes to the implementation of the Queensland Domestic and Family Violence Prevention Strategy, and
- facilitates the Violence Against Women Prevention Plan.⁴³

7.4.1 Funding overview

The total operating expenditure for Community Services in 2017-18 is \$260.8 million, an increase of 4.2 per cent on the 2016-17 adjusted budget.⁴⁴

7.4.2 New measures and key funding initiatives

Key new measures and funding initiatives for Community Services in 2017-18 include:

- \$9.2 million, over four years, to respond to the recommendations of the *Not Now, Not Ever: Putting an End to Domestic and Family Violence in Queensland* report and the Queensland Domestic and Family Violence Prevention Strategy. Highlights include:
 - \$5.8 million, over four years from 2017-18, to support the Southport Domestic Violence Court trial, and the establishment of new courts in other locations
 - planning and procurement for the establishment of two new women's shelters in areas of high demand in South East Queensland, with \$3.4 million over three years from 2018-19 in operational funding
 - \$8.2 million, over four years from 2016-17, to establish new High Risk Teams (HRT) in Cairns/Mossman, Brisbane and Ipswich in 2017-18, and to continue the HRTs established in Logan-Beenleigh, Cherbourg and Mount Isa/Gulf
 - \$43.1 million, over four years from 2016-17, for new and enhanced domestic and family violence services
 - \$4.4 million to expand existing and implement new ICT solutions
 - \$6.8 million, over four years from 2016-17, for the development of training for frontline professionals to support the delivery of services and upskill workers, particularly in rural and remote locations, and
 - \$4.4 million, over five years from 2015-16, for services located in Mackay, Moreton Bay, Inala, Ipswich and Redlands to support women who have experienced sexual assault⁴⁵, and
- \$6.1 million, over four years from 2016-17, to deliver the *Queensland: an age-friendly community* strategy, and to implement recommendations from the Parliamentary Committee Inquiry into the adequacy of existing financial protections for Queensland's seniors.⁴⁶

⁴³ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 10.

⁴⁴ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 10.

⁴⁵ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 10.

⁴⁶ State Budget 2017-18, *Service Delivery Statements*, DCCSDS, p 11.

7.5 Key issues raised at the public hearing

Issues raised at the hearing in relation to Communities, Women and Youth, Child Safety, Domestic and Family Violence Prevention included:

- domestic and family violence prevention activities and support
- safety of children in approved care
- child safety officers – staffing, resources and performance
- foster and kinship carers
- number of child concern reports
- deaths of children known to the department
- the impact of the drug Ice
- parenting programs and measures to assist with financial stress
- Intervention with Parental Agreement and drug testing
- women's participation and leadership
- whether personal email accounts have been used to conduct Government business, and
- the replacement of the Child Safety Integrated Case Management System project.

Issues raised at the hearing in relation to Disability Services, Seniors and North Queensland included:

- disability services – accommodation support and respite services, post school leavers initiatives and aids, equipment and vehicle modifications
- transition to the NDIS – data transfer to the National Disability Insurance Agency and transition of staff
- whether personal email accounts have been used to conduct Government business
- the Stronger Communities Initiative in Townsville
- severe Tropical Cyclone Debbie
- unemployment rates and electricity prices in North Queensland
- Wacol Forensic Disability Service, and
- North Queensland stadium.

Statement of Reservation

STATEMENT OF RESERVATIONS

The Palaszczuk Labor Government promised a jobs bonanza but gave Queensland a jobs crisis and a budget con job.

The details exposed in the Palaszczuk Labor Government budget proves that Queensland under Labor faces higher unemployment, higher costs of living, less projects started and delivered, and more and more job-stifling red tape.

Queensland is stagnating, the community is crying out for leadership and we have a government stuck in neutral.

Labor's softly, softly approach is failing Queenslanders, doing nothing is not working and the economy is hurting.

Families and businesses are paying more through higher taxes and increased living costs and much needed infrastructure across Queensland is not being built.

Instead of leading the way in job creation and job security, Queensland is falling behind the other states. Labor has failed to meet its own employment projections, meaning 80,000 less jobs will be created over the next three years. Youth unemployment is out of control and above 20 per cent in many parts of Queensland and up to 50% in the Outback.

Health and Ambulance Service

The lack of time to properly examine the budget for health and ambulance services was a major issue. With a budget of \$16.5 Billion the limited time available demonstrates a lack of accountability required to properly examine single largest part of the overall state budget.

At least three pages of the service delivery statement were proven to be wrong and the Minister sought to blame treasury for the error despite the fact he signed off on the budget and it had remained uncorrected on the parliamentary record for five weeks.

Labor's disastrous health payroll continues to inflict pain on current and former employees with evidence produced in the estimates hearing of health now chasing overpaid tax and past pay records being archived.

There was a total lack of transparency shown by the Minister when he refused to reveal the total number of wrong blood in tubes over the previous 6 months.

Serious questions remain unanswered about how the Cairns Hospital and Health Service will reduce its growing deficit. There was no evidence forth-coming during the hearing that would give any certainty that things will improve. It is impossible to believe that at least \$10 million can be saved with no cuts to staffing or services.

Across each area of the portfolio of health spending has increased, but at the same time many key performance measures have declined. Ramping is back in almost every HHS area and the Government has no plan to address it.

Reservations are held at the continuing blow out in missed meal payments that hit a full year total for 16/17 of \$19 million. The Government is continuing to ignore the QIRC direction of 2014 and ignores the fact that \$19million could hire in excess of an extra 200 paramedics.

Serious concerns are held about the status of planning for ambulance officer deployment to the Commonwealth Games. There is no certainty of the contingency to support regions where officers will be drawn from. It is concerning that we are so close to the Games period and officers have not been identified.

Communities, Women and Youth, Child Safety and the Prevention of Domestic and Family Violence

During the estimates hearing the Director-General confirmed that the costs of the Minister's new mandatory drug testing for parents on Intervention with Parental Agreement was met through the Child Related Costs budget, however when asked where the CRC budget had been increased to cover the costs of this regime in the budget papers, the Director-General failed to answer.

The Department (Child Safety Services) provides financial support for the care and protection of children and young people subject to statutory intervention through the CRC budget. Historically the CRC budget has experienced over-spends, particularly in the area of Child Related Costs – Placement and Support (CRC PAS) spending.

The CRC budget is specifically designed for children in out-of-home care and for children residing at home, to enhance a child's safety and wellbeing and minimise the need for more intrusive child protection intervention. CRC reimburses costs that are specific to the child's individual needs; as recorded in the approved case plan, and are in excess of financial support provided by the allowances provided (including the fortnightly caring allowance, high support needs allowance and complex support needs allowance). Examples of costs that can be met under CRC for children include education support; in home support funding; medical and dental expenses (including specialist expenses); travel expenses; and carer support.

Whilst the CRC budget can be used, as stated above, to enhance a child's safety and wellbeing so that the need for more intrusive intervention is not required (in IPA cases for example), unless there has been an increase to the overall CRC budget to cover the costs of a new mandatory regime of drug testing, then the Opposition would be concerned that this budget will fall short for other children in care requiring essential costs normally borne from individual Service Centre's CRC budget.

Question on notice 11 remains unanswered and it is beyond belief that almost a month into the new financial year, budget allocations for each child safety service centre have not been finalised. This excuse is totally unbelievable and nothing more than a cover up of potential budget cuts in some areas.

The comments made by the Director General during the hearing were inflammatory and political in nature considering their position is supposed to be apolitical.

Given the serious issue of child protection, it was disgraceful to have the Minister spend more time talking about budgets from 5 years ago than about the very real crisis in child safety right now.

Serious reservations are held of the level of funding to domestic violence support in particular areas, including the South East region, where on the Governments own figures there has been in some cases only a two percent increase in funding despite the double digit increase in incidents.

There is no evidence of a plan to reduce the over-reliance on residential care in Queensland. The cost of this service is now more than \$200 million, at an average cost of \$300,000.

Overall the hearing was farcical and the Minister and the Director-General failed to adequately answer any question put to them by non-Government members.

Disability Services, Seniors and North Queensland

Questions were raised about the poor record keeping by Disability Services Queensland after a number of client files were rejected by the NDIA. The Minister could not say if clients that had incorrect contact information were still being paid supports.

A number of questions could not be answered at the estimates hearing about the operation of the Forensic Disability Service located at Wacol.

There remains more than 18,000 people living with a disability on the register of need and it is evident that the Government has no plan to support them whilst they wait for the NDIS to roll out in the remaining parts of Queensland.

As the Minister is responsible for nothing (no legislation, budget allocations, or public servants) in her capacity Assisting the Premier on North Queensland and no service delivery standards are applied to her performance, we must try and hold her to some standard of accountability by measuring what she says and claims to achieve.

Despite claiming that the Palaszczuk Government's first two budgets had created jobs in North Queensland, unemployment rates – particularly youth unemployment rates – in Townsville and north-west Queensland - have increased. The Minister was unable to explain why Labor's policies and expenditure had failed to make a difference.

In relation to youth crime, despite claiming that juvenile offenders would be made to fix the damage they caused when committing a property crime, none of the 17 High Risk Youth Court orders issued since February 2017 appear to have done that. This directly contradicts what Minister O'Rourke claimed would happen in this regard.

The Minister had claimed the Palaszczuk Government's *Powering North Queensland* Plan had stabilised power prices in North Queensland. Despite being asked twice, the Minister was unable to advise when the price stabilisation had occurred. Current prices paid by consumers in North Queensland contradict the Minister's claim.

General observations

Under Labor debt is increasing over \$80 billion for the first time in Queensland's history, equating to almost \$16,000 of debt for every man, woman and child in Queensland. Business investment has fallen by \$23 billion and the state's domestic economy is \$6.5 billion smaller than when Labor came to office.

There are serious problems that need to be solved. Labor under Annastacia Palaszczuk is afraid to make difficult decisions. With more than 200 reviews, committees and inquiries the Government is delaying every decision that needs to be made.

The greatest risk Queenslanders face today is job insecurity. We lost 30,000 jobs last year alone. Queensland's economy is ranked below Tasmania - despite the advantages we enjoy in tourism, agriculture and resources, the creative talents of Queenslanders and population growth. Under Labor we are the leading state for business bankruptcies and union strike action.

CONCLUSION

Queensland deserves better.

A Tim Nicholls led Liberal-National government will **Build a Better Queensland**. The LNP's **Plan** will create jobs, support small business, invest in education to raise standards and we will provide better services for families and retirees.

We will restore business confidence and get investment flowing to **create jobs throughout all of Queensland**.

An LNP Government will **reduce the risk to our economic security** by focusing on six drivers to **strengthen and diversify** the Queensland economy. The six drivers are:

- Tourism
- Agriculture
- Resources
- Construction and Manufacturing and
- Services, Science and Technology and
- Education

Without a strong economy, Governments can't provide better services in our hospitals, a better education for our children or invest in new technology and equipment to help police protect our communities.

The LNP has a four-point plan to help get young Queenslanders working. It includes a \$5,000 Queensland Apprenticeship incentive for small business; a \$500 Tools for Tradies vouchers; a \$4,000 Job Start Incentive; together with discounts on Work Cover premiums for small business.

An economy can't grow if it's weighed down by high costs and one of the biggest costs is electricity. **We'll make sure that Queensland's energy security is not put at risk** and that we don't end up like South Australia with blackouts and industry shutting up shop. A 50% renewable energy target in Queensland will mean higher prices and we won't stand for it.

The LNP is committed to leading a government that is better for Queensland. **More government isn't the answer to our problems – better government is.**

The LNP will be a common sense Government which listens, plans and acts to build a better Queensland.

Only by Building a Better Queensland – will we deliver the jobs needed and restart our economy.

X

Mark McArdle MP
Deputy Chair

X

Sid Cramp
Member for Gaven

X

Mark Robinson
Member for Cleveland