

## **2016 – 17 Budget Estimates**

**Report No. 22, 55<sup>th</sup> Parliament**  
**Health, Communities, Disability Services and**  
**Domestic and Family Violence Prevention**  
**Committee**

**August 2016**

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

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## Chair's Foreword

This report presents a summary of the Committee's examination of the Budget Estimates for the 2016-17 financial year.

Consideration of the Budget Estimates allows for the public examination of both the responsible Minister and Chief Executive Officers of agencies within the Committee's portfolio area. This was undertaken through the questions on notice and public hearing process.

The Committee has made the following recommendation:

- that the proposed expenditure, as detailed in the *Appropriation Bill 2016*, for the Committee's areas of responsibility be agreed to by the Legislative Assembly without amendment.

On behalf of the Committee, I also wish to thank the Minister for Communities, Women and Youth, Minister for Child Safety and Minister for Prevention of Domestic and Family Violence; the Minister for Disability Services, Minister for Seniors and Minister Assisting the Premier on North Queensland; and the Minister for Health and Minister for Ambulance Services and all departmental officers for their cooperation in providing information to the Committee throughout the estimates process.

I would also like to thank parliamentary service staff for their assistance. Finally, I would like to thank the other Members of the Committee.



Leanne Linard MP  
Chair

August 2016

## 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 required under section 88 of the *Parliament of Queensland Act 2001* and established under the Standing Rules and Orders.

The Committee's primary areas of responsibility include:

- Health and Ambulance Services;
- Communities, Women, Youth, Child Safety and Multicultural Affairs;
- Domestic and Family Violence Prevention; and
- Disability Services and Seniors.<sup>1</sup>

The Committee also has oversight functions in relation to the Health Ombudsman.

On 17 June 2016, the Appropriation Bill 2016 and the estimates for the Committee's area of responsibility were referred to the Committee for investigation and report.<sup>2</sup>

On 27 July 2016, the Committee conducted a public hearing and took evidence about the proposed expenditure from:

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

Other witnesses also provided evidence. A copy of the transcript of the Committee's hearing can be accessed at:

[http://www.parliament.qld.gov.au/documents/hansard/2016/2016\\_07\\_27\\_EstimatesHCC.pdf](http://www.parliament.qld.gov.au/documents/hansard/2016/2016_07_27_EstimatesHCC.pdf)

### 1.2 Aim of this report

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

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
- additional information given in relation to answers.

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<sup>1</sup> Standing Rules and Orders, 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.

<sup>2</sup> 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.

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

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

### **1.3 Other Members participation**

The Committee gave leave for other Members to participate in the hearing. The following Members participated in the hearing:

- Ms Ros Bates MP, Member for Mudgeeraba, Shadow Minister for Communities, Women and Youth, Child Safety and the Prevention of Domestic and Family Violence and Shadow Minister for Disability Services and Seniors
- Mr John-Paul Langbroek MP, Member for Surfers Paradise, Shadow Minister for Health and Ambulance Services and Shadow Minister for the Commonwealth Games
- Mr Andrew Cripps MP, Member for Hinchinbrook, Shadow Minister for Natural Resources and Mines and Shadow Minister for Northern Development
- Ms Jo-Anne Miller MP, Member for Bundamba

## 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 2016 for the Committee's areas of responsibility, be agreed to by the Legislative Assembly without amendment.

### 3. 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.

The following table compares the appropriations for the Department for 2015-16 and 2016-17.

**Table 1: Appropriations for the Department for 2015-16 and 2016-17**

<b>Appropriations</b>	<b>Budget 2015-16 \$'000</b>	<b>Vote 2016-17 \$'000</b>
<i>Controlled Items</i>		
departmental services	2,670,584	2,794,221
equity adjustment	(13,264)	(13,075)
<i>Administered Items</i>		
<b>Vote</b>	<b>2,900,146</b>	<b>3,170,868</b>

Source: Appropriation Bill 2016, Schedule 2, pp7-8

#### 3.1 Budget highlights

The Department's estimated operating budget of \$2.818 billion for 2016-17 comprises:

- \$2.417 billion in Queensland Government funding
- \$377.022 million in Australian Government funding
- \$21.766 million in user charges and fees, and
- \$1.872 million in other revenue.<sup>3</sup>

##### 3.1.1 Capital

The capital works program for the Department is \$32.7 million in 2016-17. Total capital grants for the Department will be \$10.6 million. These funds will focus on integrated community services and on strengthening and protecting the well-being of Queenslanders, particularly the vulnerable and those most in need.<sup>4</sup>

<sup>3</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p14

<sup>4</sup> Queensland Budget 2016-17, Capital Statement, Budget paper No. 3, p37

Capital grants highlights for the Department include:

- \$9.8 million for enhancements to various existing information systems and ICT programs associated with grants management, documents and records management, reporting and business intelligence, community recovery and Supporting Families Changing Futures. This will provide additional system functionality, information security, improved service delivery and business efficiencies.
- \$5.2 million to continue infrastructure upgrades, rectification works, and construct purpose built accommodation as part of a targeted response for people with an intellectual and/or cognitive disability who exhibit severely challenging behaviours.
- \$6.4 million to continue the maintenance and upgrade program for multipurpose and neighbourhood centres, including \$2.3 million to establish or upgrade neighbourhood centres in Inala and East Murgon, \$600,000 to upgrade existing facilities in Mackay and \$3.5 million for building upgrades, rectifications and compliance works.<sup>5</sup>

Capital works program highlights include:

- \$4.9 million to continue the Elderly Parent Carer Innovation Initiative which is aimed at assisting elderly parent carers to secure accommodation for their adult son or daughter with a disability when they can no longer care for them. This program has invested in projects to create new living arrangements that include use of accessible housing designs and assistive technologies to enable adults with disability to live a rich and valued life in their communities.
- \$5.7 million to provide supported accommodation including \$3.3 million to build or purchase supported accommodation for people with disability living in inappropriate settings and \$2.4 million for people with high and complex needs providing safe and sustainable long term accommodation in Townsville, Cairns and Brisbane.

## 3.2 Communities, Women and Youth, Child Safety, Domestic and Family Violence

### 3.2.1 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.<sup>6</sup> It leads and facilitates the delivery of family support, child protection and adoption services, and provides and invests in a number of child and family services such as out-of-home care and adoption. Child and Family Services also implements initiatives arising from the Supporting Families Changing Futures reforms.<sup>7</sup>

#### *Funding overview*

The total operating expenditure for Child and Family Services in 2016-17 is \$1.001 billion, an increase of 8.2% on the 2015-16 Budget.<sup>8</sup>

<sup>5</sup> Queensland Budget 2016-17, Capital Statement, Budget paper No. 3, p37

<sup>6</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p3

<sup>7</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p3

<sup>8</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p3

### *New measures and key funding initiatives*

Key new measures and funding initiatives for Child and Family Services in 2016-17 include:

- Funding of \$100 million to continue investment in services for vulnerable families and their children, in line with the Supporting Families Changing Futures reforms, including:
  - \$13.8 million for Family and Child Connect services including two new services in Mt Isa/Gulf and Cape York/Torres Strait,
  - \$45.7 million for Intensive Family Support services across the state which will complement the Family and Child Connect services,
  - \$3.3 million for support to young people through the Next Step Care initiative,
  - \$2.9 million to improve Collaborative Family Decision Making and expand capacity to facilitate family group meetings, and
  - \$1.8 million to establish the Office of the Child and Family Official Solicitor and improve departmental participation in child protection court proceedings.
- Addressing the over-representation of Aboriginal and Torres Strait Islander children and families in the child protection system through co-leading and facilitating development of an Action Plan for vulnerable Aboriginal and Torres Strait Islander children and families. In addition:
  - \$10 million to support the expansion and integration of Aboriginal and Torres Strait Islander family support and child protection services, and
  - \$2.9 million to trial new community-based referral and early intervention services for Indigenous families in seven discrete Aboriginal communities.
- Establish an Empowering Families Innovation Fund with an investment of \$6 million over three years to support innovative prevention and intervention strategies that strengthen families, support reunification and support greater stability and permanency of children in care.
- Funding of \$1.2 million over five years to establish a scholarship scheme in partnership with the Smith Family to support up to 100 young women leaving care to access higher education.<sup>9</sup>

### **3.2.2 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).

Disability Services leads and facilitates the delivery of disability services and community care services for people under 65 years of age. It also:

- 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.
- leads and facilitates whole-of-government NDIS transition planning and implementation.
- supports initiatives that create inclusive communities and services for people with disability.<sup>10</sup>

<sup>9</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, pp3-5

<sup>10</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p6

*Funding overview*

The total operating expenditure for Disability Services in 2016-17 is \$1.704 billion, an increase of 10.1% on the 2015-16 Budget.<sup>11</sup>

*New measures and key funding initiatives*

Key new measures and funding initiatives for Disability Services in 2016-17 include:

- Commence the state wide transition to the full NDIS from 1 July 2016. From 2016-17, as Queensland transitions to the NDIS funding will be provided to the National Disability Insurance Agency (NDIA) to administer the NDIS. As a result of this, funding for disability services will be made via administered payments to the NDIA. Consequently, from 2016-17, as clients move into the NDIS there will be a progressive reduction in the department's controlled funding for disability services and an increase in its administered funding.
- Prepare participants, service providers, government agencies and the broader community for the NDIS. Funding of \$5 million will be provided in 2016-17 for NDIS readiness initiatives.
- Continue to deliver disability services, including supported accommodation and respite services, as well as providing:
  - \$11.6 million to provide support for up to 64 young adults with disability exiting the care of the State,
  - \$10 million for aids and equipment and vehicle modifications,
  - \$7.5 million to support families of children with disability who have critical need,
  - \$5.6 million to provide assistance to up to 300 young people with disability leaving school,
  - \$4.9 million to continue to deliver innovative strategies to provide sustainable living options for adults with disability when they can no longer be cared for by their elderly parents,
  - \$3.3 million for housing solutions for people with disability for whom other housing options do not present a sustainable solution,
  - \$2.2 million to assist people with spinal cord injuries to leave the Princess Alexandra Hospital, and
  - \$2 million to assist people who are able to be discharged from hospital to move to community living with supports with a priority for long-stay patients in acute hospital settings.<sup>12</sup>

**3.2.3 Community Services**

The objective of Community Services is to enable vulnerable individuals, families and groups to access services and participate in their communities. This service area leads strategies to improve the social and economic participation of seniors, carers, young people and people from culturally and linguistically diverse backgrounds. Community Services also:

- invests in services delivered by non-government organisations for vulnerable groups and individuals,
- 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,

<sup>11</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p6

<sup>12</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, pp6-7

- contributes to the implementation of the Queensland Domestic and Family Violence Prevention Strategy, and
- facilitates the Violence Against Women Prevention Plan.

#### *Funding overview*

The total operating expenditure for Community Services in 2016-17 is \$223 million, an increase of 10.2% on the 2015-16 Budget.<sup>13</sup>

#### *New measures and key funding initiatives*

Key new measures and funding initiatives for Community Services in 2016-17 include:

- \$89.5 million over five years from 2015-16 to implement the Queensland Government's response to a number of the recommendations of the Domestic and Family Violence Taskforce *Not Now, Not Ever* Report and the Queensland Domestic and Family Violence Prevention Strategy. This includes:
  - \$3.4 million over five years has been provided for the integrated response trial in Logan/Beenleigh including funding to enhance the capacity of support services,
  - \$8.2 million over four years commencing 2016-17 to establish new High Risk Teams (HRT) to support the development of integrated responses to domestic and family violence in seven new catchment areas. This includes the establishment of integrated response trials in Mount Isa and Cherbourg along with the expanding integrated response trial in Logan-Beenleigh, with integrated responses to commence from 2017-18 in Cairns/Mossman, Brisbane, Ipswich, Mackay/Whitsunday and Moreton Bay areas. Total funding provided for this initiative across Government is \$24.2 million over four years,
  - \$10.3 million over four years commencing 2016-17 for new or enhanced perpetrator interventions, including a pilot of the Child Safety Walking with Dads initiative in Mount Isa, Sunshine Coast and Moreton Bay. An external organisation will also be engaged to review the practice standards for working with those experiencing domestic and family violence and to develop a suite of tools to support monitoring of perpetrator intervention programs,
  - \$43.1 million over four years commencing 2016-17 for new and enhanced domestic and family violence services to be directed to existing service gaps, prioritising areas where HRTs are established,
  - \$10.8 million over four years commencing 2016-17 to expand existing and implement new ICT solutions, supporting integrated service responses and to increase victim access to support,
  - \$6.8 million over four years commencing 2016-17 for the development of training for frontline professionals to support the delivery of quality services and to upskill workers, particularly in rural and remote locations,
  - \$4.4 million over five years commencing 2015-16 has been provided for five new services located in Mackay, Moreton Bay, Inala, Ipswich and the Redlands to support women who have experienced sexual assault, including assault within an intimate partner relationship,
  - \$846,000 over five years commencing 2015-16 has been provided for home safety upgrades brokerage to domestic violence counselling services. This brings the number of services to 28 across Queensland that are now allocated funding to provide for upgrades to home security of victims to support them, and their children, to remain safely in their own homes, close to existing support networks,

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<sup>13</sup> Queensland Budget 2017-17, Service Delivery Statement, Department of Communities, Child Safety and Disability Services, p8

- \$1 million provided in 2015-16 for domestic and family violence counselling initiatives, and
- \$508,000 over two years commencing 2015-16 has been provided to increase the capacity of domestic violence services to support the Southport Domestic Violence Court trial, in accordance with Recommendation 96 of the *Not Now, Not Ever* Report.
- \$3.5 million for new rest and recovery services in 15 Safe Night Precincts to reduce alcohol related violence and create safer entertainment precincts.
- \$4 million to extend existing community support measures in drought declared areas to strengthen resilience of drought affected Queenslanders.
- \$25 million over four years from 2016-17 has been reprioritised for the Financial Resilience program announced in the 2015-16 Budget. The program has been redesigned and enhanced, and will include new financial counselling positions, continued emergency relief, further financial literacy initiatives and Good Money shops.
- \$6.1 million over four years for initiatives to deliver the Queensland: an age friendly community strategy and implement recommendations from the Parliamentary Inquiry into the adequacy of existing financial protections for Queensland's seniors, including:
  - \$1 million per annum over three years commencing in 2017-18 to establish a grant program, Advancing Queensland: an age-friendly community, to seed fund community initiatives that involve partnerships with local councils and other organisations to test, implement and promote innovative age-friendly projects,
  - \$100,000 per annum over four years from 2016-17 to expand the state wide Seniors Enquiry Line to improve services throughout Queensland, including enhancing access to specific expertise and advice on a range of consumer protection issues and scams, and
  - \$900,000 per annum over three years commencing in 2017-18 to Seniors Legal and Support Services and the Elder Abuse Prevention Unit to support service delivery, particularly in regional and remote areas and underserved metropolitan areas such as the Gold Coast and Sunshine Coast.

### 3.3 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 included:

- Domestic and family violence packages;
- Child protection and family support reforms;
- Response times for investigations and assessments;
- Deaths of children known to the department;
- Commission of inquiry into Child Protection recommendations implementation;
- Child safety officers;
- Role of Child Safety Minister;
- Administration of *Child Protection Act 1999*;
- Child protection and family support reforms;
- Children in care who sustain injuries;
- Payments to parents as a result of legal action taken against the department;
- Domestic violence shelters;
- Response times and performance standards quarterly data;
- Child safety response times;
- Quarterly performance standards;

- Child safety service centres;
- Classes and training for new mothers;
- Domestic violence perpetrator programs;
- Integrated response to domestic and family violence;
- Specialist domestic violence courts;
- Domestic and family violence support programs in rural, regional and remote locations;
- Investment in community services and infrastructure;
- General principles for ensuring the safety, wellbeing and bests interest of a child under the Child Protection Act;
- Child safety investigation commencement rates;
- Financial resilience program; and
- Neighbourhood centres.

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

- Register of needs for funding support;
- Supported accommodation;
- NDIS trial sites;
- Transition to NDIS;
- Compliance audit and reviews;
- NDIS jobs;
- Demand for NDIS services;
- Disability Action Week;
- NDIS readiness initiatives;
- NDIS training and workforce requirements;
- Advancing North Queensland priority areas and projects;
- Role of Minister Assisting the Premier on North Queensland;
- Northern Australia Infrastructure Facility (NAIF) project businesses cases;
- NAIF office location;
- State government agency preparation for NDIS;
- Access opportunities for people requiring guide, hearing and assistance dogs;
- Seed funding of community initiatives;
- Funding for Men's Sheds;
- Combatting of social isolation of seniors;
- Accommodation Support and Respite Services (ASRS) costs and services; and
- North Queensland stadium.

## 4. Queensland Health

The Minister for Health and Minister for Ambulance Services has responsibility for the Queensland public healthcare system, which is collectively known as Queensland Health. This includes the Department of Health (the Department), the Queensland Ambulance Service and 16 Hospital and Health Services (HHSs).

The Minister also has responsibility for three statutory bodies - the Office of the Health Ombudsman, the Council of the Queensland Institute of Medical Research and the Queensland Mental Health Commission.

The Department is responsible for providing leadership and direction to enable the health system to deliver safe and responsive services for Queenslanders.

The following table compares the appropriations for the Department for 2015-16 and 2016-17.

**Table 2: Appropriations for the Department for 2015-16 and 2016-17**

Appropriations	Budget 2015-16 \$'000	Vote 2016-17 \$'000
<i>Controlled Items</i>		
departmental services	9,406,668	10,010,701
equity adjustment	506,709	52,644
<i>Administered Items</i>		
	33,544	33,974
<b>Vote</b>	<b>9,946,921</b>	<b>10,101,319</b>

Source: Appropriation Bill 2016, Schedule 2, pp14-15

### 4.1 Budget highlights

The Department's operating budget is \$15.274 billion for 2016-17, an increase of \$1.091 billion (7.7 per cent) on the 2015-16 Budget. The estimated operating budget comprises:

- \$9.956 billion in Queensland Government funding
- \$3.906 million in Australian Government funding
- \$1.279 billion in user charges and fees, and
- \$134 million in other revenue.<sup>14</sup>

#### *New measures and key funding initiatives*

New measures for Queensland Health in 2016-17 include:

- \$6 million over four years (including \$1.5 million in 2016-17) to continue the statewide Pre-Exposure Prophylaxis Demonstration project.
- \$15.8 million over three years to fund the North Queensland Aboriginal and Torres Strait Islander Sexually Transmissible Infections Action Plan 2016-2021.
- \$9.6 million over three years (including \$1.7 million in 2016-17) for a Suicide Prevention in Health Services Initiative.
- \$700,000 in 2016-17 to fund the development of an education program for health staff across domestic and family violence initiatives.

<sup>14</sup> Queensland Budget 2017-17, Service Delivery Statement, Queensland Health , pp6 and 19

- \$100,000 per annum over three years (2016-17 to 2018-19) to implement the proposed Refugee Health and Wellbeing Policy and Action Plan, including refugee health and wellbeing resources, training and communications.<sup>15</sup>

Other key funding initiatives and activities for Queensland Health include:

- \$114.2 million to support the Specialist Outpatient Strategy.
- \$6 million has been internally reallocated to tackle the Ice epidemic in Queensland.
- \$13 million over three years to fast track the employment of an additional 75 paramedics in the Queensland Ambulance Service.<sup>16</sup>

#### **4.1.1 Capital**

The total capital investment program Queensland Health and the Council of the Queensland Institute of Medical Research is \$957.5 million in 2016-17. Programs focus on ensuring staff, patients and communities have access to contemporary health infrastructure that supports the delivery of health services. They also support the acquisition of new and/or replacement scientific equipment.<sup>17</sup>

Capital program highlights for hospital and health facilities include:

- \$20 million of \$230 million over five years to 2020-21 for the Advancing Queensland's Health Infrastructure Program.
- \$167 million of direct capital purchases to prepare the Sunshine Coast University Hospital and the Sunshine Coast Health Institute at Kawana for opening in April 2017 and \$460 million recognition of acquisition of finance lease, which includes an initial payment of \$2.3 million in 2016-17.
- \$12.7 million for the development and construction of the Wynnum Integrated Health Care Centre.
- \$27.9 million as part of the \$180 million Enhancing Regional Hospitals Program announced in the 2015-16 Budget, for upgrades at the Hervey Bay and Gladstone Emergency Departments, Caloundra Health Service and Roma Hospital.
- \$15.5 million to complete the \$334 million Townsville Hospital Expansion (co-funded by the Queensland and Australian Governments).
- \$80 million under the Priority Capital Program to be distributed across Hospital and Health Services and Health Support Queensland for a range of capital works projects to enhance, refurbish or replace existing infrastructure and to sustain and improve business and service level continuity.
- \$60.3 million to finalise a number of major projects where construction is largely complete, including: Cairns Hospital, Lady Cilento Children's Hospital, Centre for Children's Health Research, Mackay Base Hospital, Rockhampton Hospital, Alpha Co-located health and emergency services precinct, and Gold Coast University Hospital.
- \$119.9 million for the continued state-wide roll out of clinical and administrative support systems and technology equipment replacement.
- \$195.8 million allocated by Hospital and Health Services to capital projects across Queensland, including, for example, \$8.6 million for delivery of a new MRI at the Toowoomba Hospital in Darling Downs Hospital and Health Service and \$22.7 million for new and extended information communication technology at the Sunshine Coast University Hospital in the Sunshine Coast Hospital and Health Service.<sup>18</sup>

<sup>15</sup> Queensland Budget 2017-17, Service Delivery Statement, Queensland Health, p6

<sup>16</sup> Queensland Budget 2017-17, Service Delivery Statement, Queensland Health, pp5-7

<sup>17</sup> Queensland Budget 2016-17, Capital Statement, Budget paper No. 3, pp96-99

<sup>18</sup> Queensland Budget 2016-17, Capital Statement, Budget Paper No. 3, pp96-98

The Queensland Ambulance Service will invest \$59.7 million in capital purchases in 2016-17 to support frontline services, including:

- \$27.5 million to purchase 170 new and replacement ambulance vehicles.
- \$5.2 million for operational equipment including further acquisition of new power assisted stretchers.
- \$8 million for strategic land and property acquisitions to accommodate future expansion of services.
- \$3.1 million for information systems development to enhance patient care and service delivery.
- \$15.9 million for ambulance facilities.

#### 4.1.2 Hospital and Health Services

A total of \$12.614 billion (82.6 per cent of the 2016-17 operating budget) will be allocated, through service agreements, to provide public healthcare services from HHSs, Mater Health Services and St Vincent's Health Australia. This represents an 8.6 percent increase compared to the 2015-16 Budget.<sup>19</sup>

The operating budget for each HHS in 2016-17, compared to 2015-16, is provided in Table 3.

**Table 3: Hospital and Health Service operating budgets 2015-16 and 2016-17**

Health Service	2015-16 Budget	2016-17 Budget	Percentage change between 2015-16 and 2016-17 Budget
	(\$ million)	(\$ million)	(%)
Cairns and Hinterland (page 52)	712.8	777.9	9.1
Central Queensland (page 62)	488	531.5	8.9
Central West (page 73)	62	68.8	10.7
Children's Health Queensland (page 81)	612.3	677.2	10.6
Darling Downs (page 91)	637.8	674.5	5.8
Gold Coast (page 100)	1,193	1,283	7.5
Mackay (page 108)	327.7	357.9	9.2
Metro North (page 118)	2,173	2,386	9.8
Metro South (page 155)	2,018	2,194	8.7
North West (page 137)	148.8	156.3	5
South West (page 146)	126.9	135.8	7
Sunshine Coast (page 154)	752.7	996.8	32.4
Torres and Cape (page 165)	179.5	201.2	12.1
Townsville (page 175)	804.6	864.3	7.4
West Moreton (page 184)	469.8	512.3	9
Wide Bay (page 194)	488.9	524.5	7.3

Source: Queensland Budget 2016-17, Service Delivery Statements, Queensland Health

#### 4.2 Concessions

The total cost of concessions provided via schemes administered by Queensland Health is estimated at \$282.4 million for 2016-17. This is a decrease of \$24 million on the 2015-16 estimated actual budget.<sup>20</sup>

<sup>19</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p6

<sup>20</sup> Queensland Budget 2016-17, Budget Strategy and Outlook, Budget Paper No. 2, p206

A breakdown of concessions by scheme for 2016-17 is provided in Table 4.

**Table 4: Concession schemes administered by Queensland Health for 2016-17**

Concession scheme	2016-17 Estimate
	(\$ million)
Oral Health Scheme	142.7
Patient Travel Subsidy Scheme	81.0
Medical Aids Subsidy Scheme	39.5
Community Aids Equipment and Assistive Technologies Initiative and Vehicle Options Subsidy Scheme	10.0
Spectacle Supply Scheme	9.2
<b>Total</b>	<b>282.4</b>

Source: Queensland Budget 2016-17, Budget Strategy and Outlook, Budget Paper No. 2

### 4.3 Key issues raised at the public hearing

Issues raised at the hearing in relation to Health included:

- Demand for health services;
- HHSs' results;
- Surgery Connect services;
- Rehabilitation physiotherapy;
- HHSs' staffing arrangements;
- Staff redundancies and voluntary separations;
- Nurse-to-patient ratio staffing;
- Nurses' shifts and breaks;
- Investigations into staff conduct;
- Supply and invoicing for goods and services;
- Debt collection services;
- Medicinal cannabis reforms;
- North Queensland health services;
- Mental health services;
- Central Queensland health services;
- Health payroll system key projects;
- Health rostering project;
- Health payroll system costs;
- Health payroll system overpayment recovery process;
- Working with local government to reduce smoking;
- Balancing the fiscal operating environment with effective service delivery;
- HHSs' organisational sustainability plans;
- Cairns and Hinterland HHS deficit;
- South of Cairns Health Precinct;
- HHSs' operating theatre efficiency;
- Patient transfers;
- HHSs' financial performance reporting information;
- Metro South HHS health services;
- Winter demand for hospital services;
- Specialist outpatient waiting times;
- 'Heart of Australia' service;

- Nurses' and midwives' enterprise bargaining agreement;
- Employee classifications;
- Asset renewal and enhancement works projects;
- Queensland Health laboratory information system;
- Follow up of audit reports;
- Community engagement for health and wellbeing programs;
- Impact of aged care places on health services;
- Mental health funding;
- Advancing Queensland Health Infrastructure program; and
- Gold Coast HHS hospital foundation.

## 5. Queensland Ambulance Services

The Queensland Ambulance Services (QAS) is accountable for the delivery of pre-hospital ambulance response services, emergency and non-emergency pre-hospital patient care and transport services, inter-facility ambulance transport, casualty room services, and planning and coordination of multi-casualty incidents and disasters.

The QAS delivers ambulance services through 15 Local Ambulance Service Networks (LASNs) which are aligned to the State's Hospital and Health Services (HHSs). A 16th statewide LASN comprises the Operations Centres. There are seven QAS Operations Centres throughout Queensland, which are responsible for taking emergency calls, operational deployment and dispatch, and coordination of non-urgent patient transport services.<sup>21</sup>

### 5.1 Budget highlights

The QAS will have an operating expense budget of \$673.1 million for 2016-17, which is an increase of \$39.8 million (6.3 percent) from 2015-16.<sup>22</sup>

Key activities for the QAS in 2016-17 include:

- recruiting 110 additional ambulance officers to provide enhanced roster coverage to manage increasing demand for ambulance services, in addition to the 40 ambulance officers recruited in late 2015-16
- commissioning 170 new and replacement ambulance vehicles and continuing the rollout of the new power assisted stretchers (these stretchers provide an enhanced work platform for paramedics and greatly assist in improving patient and officer safety)
- investing \$15.9 million to undertake minor works at various ambulance stations and for the planning or delivery of new and replacement ambulance stations at Collinsville, Rainbow Beach, Yandina, Bundaberg, Birtinya, Kenilworth, Coral Gardens, Wynnum and Thursday Island
- enhancing emergency and disaster response capability through the construction of a QAS Emergency and Fleet Management Hub
- commencing procurement of Dynamic Deployment software as a new solution to enhance resourcing and scheduling of frontline and response
- providing ambulance officers with refresher training in situational awareness to reduce the potential impact of occupational violence of paramedics.<sup>23</sup>

<sup>21</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p43

<sup>22</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p43

<sup>23</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p43

## 5.2 Key issues raised at the public hearing

Issues raised at the hearing in relation to Queensland Ambulance Services included:

- Administration of anti-psychotic drugs to sedate violent patients;
- Employee costs;
- Paramedic overtime costs;
- Paramedic crew scheduling tool;
- Ambulance shifts;
- Recruitment of ambulance officers;
- QAS's cardiac strategy;
- Bachelor of Paramedics student internships;
- Ambulance station capital works;
- QAS vehicles; and
- Protection of paramedics from occupational violence.

## 6. Office of the Health Ombudsman

The Committee has oversight responsibility for the Office of the Health Ombudsman (OHO) which has a separate appropriation.

The Health Ombudsman, supported by the 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
- report publicly on the performance of its functions.<sup>24</sup>

### 6.1 Budget highlights

The OHO has an operating budget of \$14.6 million in 2016-17, which is that same as the operating budget published in 2015-16.<sup>25</sup>

## 7. Queensland Mental Health Commission

The Queensland Mental Health Commission (the Commission) was established on 1 July 2013 as an independent statutory body under the *Queensland Mental Health Commission Act 2013*. The Commission'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
- maximising the collective impact of lived experience and professional expertise.

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<sup>24</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p218

<sup>25</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p218

## 7.1 Budget highlights

The Commission has an operating budget of \$8.8 million in 2016-17, which is an increase of \$500,000 on the 2015-16 operating budget of \$8.3 million.<sup>26</sup>

## 7.2 Key issues raised at the public hearing

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

- Review of alignment of adolescent and adult mental health services.

## 8. Queensland Institute of Medical Research

The Council of the Queensland Institute of Medical Research (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.<sup>27</sup>

### 8.1 Budget highlights

The QIMR receives funding from government and non-government sources. In 2016-17 it will receive \$18.9 million from the Queensland Government. This represents approximately 16.8 percent of its total revenue. In addition to medical research grants, funding from the Queensland Government is the QIMR's most significant source of funding.<sup>28</sup>

Key activities for the QIMR in 2016-17 include:

- continue to perform the Genome Wide Association Studies to further identify genetic risk factors and therapy targets for a range of cancers
- identify new immune-editing targets for treatment and move these toward the clinic
- work with clinicians to trial an online tool which has been developed to predict the risk of people aged 40 and over developing non-melanoma skin cancers in the next three years commence a major five-year study to look for new ways of preventing and treating aggressive breast cancers
- continue a major collaborative investigation into the early detection of Alzheimer's disease
- continue work on an experimental brain cancer treatment which QIMR Berghofer has developed for patients with glioblastoma multiforme
- commence stage-two trials using immunotherapy in early stages of metastatic nasopharyngeal carcinoma (NPC) following promising results in a phase-one clinical trial with terminal NPC patients
- continue analysing data from OPAL, the Ovarian Cancer Prognosis and Lifestyle study, Australia's first study into lifestyle factors that may improve survival and quality of life for women with ovarian cancer
- carry out a major study into malignant mesothelioma, investigating mutations, biomarkers and potential new therapeutic targets for the aggressive asbestos-related cancer
- continue leading D-Health, a five-year randomised trial of more than 20,000 people investigating the role of Vitamin D supplementation in preventing premature death, cancer and other chronic diseases
- continue developing brain-imaging technology for use in creating a diagnostic test for depression
- move cytomegalovirus vaccine development to an advanced stage

<sup>26</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p218

<sup>27</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p203

<sup>28</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , p203

- explore the ability of snake, cone snail, hookworm and jellyfish venom to control the body's immune system and potentially play a role in cancer treatments
- advance the world-leading work on new molecules and targets for immunotherapy use to treat cancers.<sup>29</sup>

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<sup>29</sup> Queensland Budget 2016-17, Service Delivery Statement, Queensland Health , pp204-205

## **9. Statement of Reservation**

## STATEMENT OF RESERVATIONS

The Palaszczuk Labor Government's second budget is best characterised as a budget of raids, write-downs and rip-offs with no long-term cohesive economic plan to create jobs and grow the Queensland economy.

This Committee reviewed the budget for the Minister for Communities, Child Safety and Domestic and Family Violence Prevention and the Minister for Disability Services and Seniors and the Minister Assisting the Premier in North Queensland and the Minister for Health and Minister for Ambulance Services.

### **Communities, Child Safety and Domestic and Family Violence Prevention**

The committee is concerned that despite an apparent 'record spending' in child safety performance outcomes and key performance measures under this Labor Government have dropped significantly.

It was unacceptable that the Minister responsible for Child Safety and the protection of children who have been abused refused to acknowledge or take responsibility for the system.

Overall the non-Government members were disappointed at the lack of accountability and oversight of the portfolio displayed by the Minister in her responses to questions. The limited time available to examine the portfolio was concerning given the significant level of intervention wielded by the Department over families and abused children.

There was no clear response to the Minister's delay in releasing key performance data and it was not evident that this information was being used to inform forward policy direction.

Under questioning the Minister failed to explain gaps in her diary that were supposed to contain critical briefing information in response to investigation time blow outs.

When asked specific questions regarding the actions of the Minister around being briefed on specific issues related to the Caboolture child safety service centre she would not address the question specifically.

The Committee is concerned that specific issues around resourcing of the Caboolture centre were not addressed when concerns were first raised despite issues of growing backlogs in child safety staff commencing investigations.

Non-Government members hold reservations that the Minister or the Government has any long term plan to address the growing backlog of child safety investigations not being commenced in required timeframes and the ongoing risk to children being left in abusive situations.

During the course of the hearing, the Minister noted on a number of occasions that the protection of children is everyone's business. The Minister is correct, protecting children is a role we must all take seriously. However the Minister would be well aware that the issue of protecting children from a statutory perspective relies on the proper resourcing of the department (Child Safety) to enable it to do the job it is legislated to do. Not everyone can put new resources on the frontline so that vulnerable children can be protected, so that cases can be investigated in a timely manner. Only the Minister has the ability to resource her department to do the job they are legislated to do. So whilst protecting children is indeed everyone's business, the Minister must make it her business to resource her department so it can protect the very children it is there to protect.

### **Disability Services and Senior**

The hearing process for disability services revealed an overall lack of forward planning and direction from the Labor Government who appears to be placing all its eggs in the NDIS basket.

Under questioning the Minister revealed a lack of forward investment beyond NDIS to address the significant level of unmet need for Queenslanders living with a disability.

There was no clear answer from the Minister as to what help if any will be made available to the more than 22,000 people on the register of need. That is people deemed eligible for disability support, but no money is available.

Non-Government members were concerned at the Minister's comparison of budgetary data from more than a decade ago as a way to obfuscate her answer around the lack of further investment in the disability services portfolio over the next three years.

During the hearing process evidence arose that the Government was willing to override the recommendations of both audit and legal advice to re-fund organisations that had demonstrated serious non-compliance with their contractual obligations for service delivery.

Finally, it was concerning that the Minister would not directly address the issue of funding shortfalls and cost differences between the NDIS price point and the cost of running Government owned accommodation support and respite services as part of the NDIS roll out.

### **Minister Assisting the Premier on North Queensland**

For the second year in a row, the role of the Minister Assisting the Premier on North Queensland was scrutinised at budget estimates. For the second year in a row, it was confirmed that Minister O'Rourke isn't responsible for any legislation, any budget allocations, or any public servants in her role representing North Queensland. Unlike every other Minister, there are no formal mechanisms to test or measure the accountability and transparency of Minister O'Rourke in this role.

Minister O'Rourke admitted she was responsible for administering none of the programs, initiatives or budgets associated with any of the five priority areas in the Palaszczuk Government's recently released *Advancing North Queensland* document, which is the only tangible outcome after 16 months of her tenure in this role. Despite this, most of the initiatives and certainly most of the funding in this document is dependent on the Federal LNP Government's Northern Australia White paper.

It was particularly concerning to learn at budget estimates that the Palaszczuk Government had not submitted any business cases to the Northern Australia Infrastructure Fund (NAIF), to ensure North Queensland secured its fair share of funding. This is despite the NAIF investment guidelines being released in March 2016 and the NAIF going live on 1 July 2016. The lack of transparency and accountability associated with Minister O'Rourke's North Queensland role is unacceptable.

### **Health and Ambulance Service**

The Estimates Hearing was instructive in that it gave the opportunity to bring to the Minister's attention some of the genuine concerns within the

community around changes made by the Government to the Surgery Connect program.

It appears there will be cuts to FTE positions across a number of HHS's in the 2016-17 financial year, which notably are occurring in a number of HHS's who delivered a deficit in the preceding financial year. The Committee was unable to ascertain what the final headcount reduction shall be, but given the Premier's previous statement that all public servants are frontline staff, the Minister's handling of these reductions appears to fly in the face of the Premier's commitment to boost frontline staff.

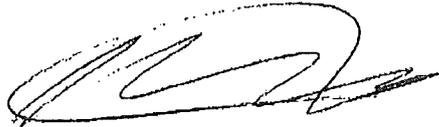
Given Labor's track record in health included maladministration and poor oversight- perhaps immortalised by the fake Tahitian Prince Non-Government Members were pleased to receive an assurance from the Director General that there had been no incidents where the Department, a HHS or the QAS had been invoiced for the supply of goods or services which were found to have not been supplied. It is clear the efforts undertaken by the former Minister to reform this area were delivering positive outcomes for taxpayers.

It was clear the Minister has attempted to take a hands-free approach to the issue of recovering over-payments from former staff. It seems incredulous the Director-General would make such a decision to let out a \$900,000 contract to a debt collection agency without first advising the Minister of such a decision, given the political repercussions of once again reminding people about Labor's payroll debacle.

The Minister's claim the payroll system was one he inherited from the LNP was a selective attempt to re-write history. As he seems to have conveniently overlooked the fact the payroll system was in fact the exact same one his Director-General was in charge of on the fateful day under the Bligh Labor Government when the Go-Live order was given which resulted in one of the largest pieces of public maladministration in the nation's history. It was therefore of little wonder when the Minister and Director-General refused to provide the final cost of the "fix" to the system, and refused to provide detail on those components over and above the \$1.2 billion price tag we are already aware of.

It would appear by taking this evasive approach the Minister is keen to ensure taxpayers never find out the true final cost of fixing Labor's payroll debacle – a system which continues to make overpayments - which as at the time of the Committee's Hearing totalled some \$62 million to existing and former staff.

Non-Government Committee members also pursued the response to the QAO Report No 15 for 2015-16 into operating theatre efficiency levels across the State. This is an area of significant public importance, as the Auditor General did identify this as a cause of the increase in patients not receiving surgery within the clinically-recommended timeframes.



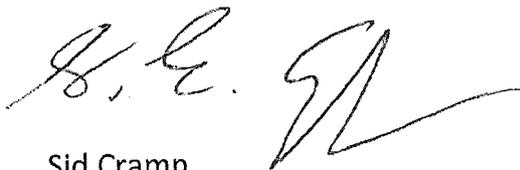
Mark McArdle

Member for Caloundra



Tarnya Smith

Member for Mount Ommaney



Sid Cramp

Member for Gaven