

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Cross Portfolio Indigenous Hearing 2010-2011, 25 February 2011

Question: E11-046

OUTCOME 8: Indigenous Health

Topic: ABORIGINAL MEDICAL SERVICES

Written Question on Notice

Senator Scullion asked:

- a) How does the Office for Aboriginal and Torres Strait Islander Health (OATSIH) monitor capital works needs of Aboriginal Community Controlled Health Services?
- b) Has OATSIH supported all the capital works needs identified in the process of Aboriginal Community Controlled Health Services seeking accreditation?
- c) As a member of the National Rural and Remote Health Infrastructure Program (NRRHIP) panel, how is OATSIH contributing to the assessment of applications from Aboriginal Community Controlled Health Services?
- d) How does OATSIH know what the capital works needs of Aboriginal Community Controlled Health Services are?
- e) What is OATSIH's estimate of the costs needed to address the capital works needs of Aboriginal Community Controlled Health Services over the next four to five years? If OATSIH is unable to estimate this, please outline why not?

Answer:

a and d)

OATSIH has a general overview on health infrastructure requirements of Aboriginal Community Controlled Health Services, collected through several processes:

- interaction with OATSIH-funded organisations as part of regular contract management review practices;
- funding submissions received through formal grant funding processes across the Department of Health and Ageing (for example, the National Rural and Remote Health Infrastructure Program (NRRHIP); Health and Hospital Fund; Primary Care Infrastructure Grants);
- condition assessments of facilities that may be conducted from time to time (for example, the Northern Territory Regional Infrastructure Assessment); and
- receipt of unsolicited funding submissions provided by organisations.

- b) Accreditation is supported by the *Establishing Quality Health Standards* measure for eligible Indigenous health organisations. The *Establishing Quality Health Standards* measure includes, among other things, the capacity to fund minor capital works activities required to overcome barriers to accreditation. Major capital works, such as extensions to a health facility or building a new health facility, are outside the scope of this measure. Subject to availability of funds and to meeting the accreditation requirement criterion, 77% of applications for minor capital works were approved for items such as disability ramps, cyclone proof storage facilities, uninterruptible power supply, etc.
- c) The role of the NRRHIP National Assessment Panel is to provide a final overview of the assessment of applications undertaken by the Department of Health and Ageing and agree on a list of recommended projects that can be put to the Minister for Health and Ageing. A representative of OATSIH participates on the NRRHIP National Assessment Panel. The OATSIH representative reviews the assessments undertaken of those applications that focus on improved services for Aboriginal and Torres Strait Islander communities and provides additional background on the applications, including details of recent site visits and/or information provided at jurisdictional health forum meetings, which include membership from NACCHO's state or territory Affiliate.
- e) OATSIH does not have an estimate of the capital works needs of Aboriginal Community Controlled Health Services. Maintenance of capital infrastructure is the responsibility of the property owner. As OATSIH is not the owner of any capital infrastructure, it does not hold a current comprehensive condition report of all assets owned and/or operated by Aboriginal Community Controlled Health Services, apart from the processes outlined in the response to parts a) and d).