



**Australian Government**  
**Department of Health and Ageing**

Mr Matt Crawshaw  
Secretary  
Senate Standing Committee on Community Affairs  
Parliament House  
CANBERRA ACT 2600

Dear Mr Crawshaw

**Request for Amendment to Evidence Provided at Senate Estimates Hearing,  
Wednesday, 26 February 2014**

I am writing to correct three statements that I made at the Senate Estimates Hearing of the Senate Community Affairs Committee on Wednesday 26 February 2014.

The first correction (page 98) is in response to the following question asked by Senator Peris:

“When is the dental NPA likely to commence and will it be delayed from its original commencement of 1 July 2014?”

My response was as follows:

“That is the second of the two national partnerships. That is the one which was the subject of the budget commitment 2012-13 and planning is underway for that.”

In light of subsequent advice, the response should now be amended as follows (changes are underlined):

“That is the second of the two national partnerships. The NPA on Adult Public Dental Patients was announced as part of the Dental Health Reform package on 29 August 2012 and the funding was allocated in MYEFO 2012-13. Planning is currently underway for that.”

The second correction (page 124) is in response to the following question asked by Senator Moore:

“Can we get the timing for the centres that are not operational and when we can expect them to be treating patients? Do you have statistics for those centres that are open in terms of how many patients have been treated, and how many specialist doctors and cancer care nurses are employed in those centres?”

My response was as follows:

“I suspect we do not. I think that is information which is not readily available to us. We are managing a capital works program. We are looking to the states, territories and

non-government organisations who receive these funds to operationalise it and then continue to run it. There is a requirement that they continue to run it for the purposes for which the funding was provided, and there is a reporting arrangement which ensures that takes place. But we do not drill down and look in detail at their staffing profile and patient activities to the extent that—“

In light of subsequent advice, the response should now be amended as follows (changes are underlined):

“I suspect we do not. I think that is information which is not readily available to us. We are managing a capital works program. We are looking to the states, territories and non-government organisations who receive these funds to operationalise it and then continue to run it. There is a requirement for non-government organisations that they continue to run it for the purposes for which the funding was provided, and there is a reporting arrangement which ensures that takes place. But we do not drill down and look in detail at their staffing profile and patient activities to the extent that—”

The third correction (page 124) is in response to the following question asked by Senator Moore:

“What does the report include? What is the format of the report? Once you have given the money and they have actually created a cancer centre—and I have visited a couple; I know they treat patients—what reporting on their activities are they required to give back to the Commonwealth to justify the percentage of the \$5 billion they got?”

My response was as follows:

“We receive an annual report. Following completion there is a designated use period which is part of the contractual arrangement we have with them. Each year they provide us with a report which is framed against the original project agreement that we have negotiated. To the extent that that contains detail, we are looking to them to report against that detail.”

In light of subsequent advice, the response should now be amended as follows (changes are underlined):

“We receive an annual report from non-government organisations. Following completion there is a designated use period which is part of the contractual arrangement we have with non-government organisations. Each year they provide us with a report which is framed against the original project agreement that we have negotiated. To the extent that that contains detail, we are looking to them to report against that detail. States and territories are required to report on their activities as per normal hospital performance reporting processes.”

Yours sincerely

Janet Anderson  
First Assistant Secretary  
Acute Care Division  
17 March 2014