

The Senate

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Community Affairs  
Legislation Committee

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Additional estimates 2011–12

March 2012

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# MEMBERSHIP OF THE COMMITTEE

## 43<sup>rd</sup> Parliament

### Members

Senator Claire Moore, Chair	Queensland, ALP
Senator Rachel Siewert, Deputy Chair	Western Australia, AG
Senator Carol Brown	Tasmania, ALP
Senator Mark Furner	Queensland, ALP
Senator Bridget McKenzie	Victoria, NATS

### Substitute member

Senator Sue Boyce	Queensland, LP
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for Senator Judith Adams (from 7 February to 30 March 2012)

### Senators in attendance

Senators Moore (Chair), Siewert (Deputy Chair), Abetz, Bernardi, Bilyk, Boyce, Brandis, Carol Brown, Bushby, Cash, Di Natale, Edwards, Fierravanti-Wells, Fifield, Furner, Herffernan, Humphries, Johnston, Kroger, Ludlam, McKenzie, Parry, Payne, Polley, Rhiannon, Scullion, Wright and Xenophon

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# Chapter 1

## Introduction

1.1 On 9 February 2012, the Senate referred the following documents to the Community Affairs Legislation Committee (the committee) for examination and report:

- Particulars of proposed additional expenditure in respect of the year ending on 30 June 2012 [Appropriation Bill (No. 3) 2011-12];
- Particulars of certain proposed additional expenditure in respect of the year ending on 30 June 2012 [Appropriation Bill (No. 4) 2011-12];
- Final Budget outcome for 2010-2011; and
- Issues from the advances under the annual Appropriation Acts for 2010-2011.<sup>1</sup>

1.2 The committee is responsible for the examination of the Health and Ageing portfolio; the Families, Housing, Community Services and Indigenous Affairs portfolio; and the Human Services portfolio.

1.3 The committee was required to report to the Senate on its consideration of the 2011-2012 additional estimates by 29 March 2012.

1.4 The committee considered the Portfolio Additional Estimates Statements for 2011-2012 for both portfolios at hearings on the 15, 16, and 17 February 2012. The Hearing were conducted in accordance with the agreed agenda as follows:

- Wednesday 15 February 2012 – Health and Ageing Portfolio
- Thursday 16 February 2012 – Families, Housing, Community Services and Indigenous Affairs portfolio; Human Services portfolio
- Friday 17 February 2012 – Cross Portfolio – Indigenous Matters
- Thursday 22 March 2012 - Families, Housing, Community Services and Indigenous Affairs portfolio

1.5 The committee heard evidence from Senator the Hon. Jan McLucas, Parliamentary Secretary for Disabilities and Carers (representing the Minister for Health and Ageing; and the Minister for Families, Housing, Community Services and Indigenous Affairs); Senator the Hon. David Feeney, Parliamentary Secretary for Defence (representing the Minister for Families, Housing, Community Services and Indigenous Affairs); and Senator the Hon. Kate Lundy, Parliamentary Secretary to the Prime Minister and Parliamentary Secretary for Immigration and Multicultural Affairs (representing the Minister for the Department of Human Services).

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1 *Journals of the Senate*, No. 75, 9 February 2012, p. 2090.

1.6 Evidence was also provided by Ms Jane Halton, Secretary of the Department of Health and Ageing; Mr Finn Pratt, Secretary of the Department of Families, Housing Community Services and Indigenous Affairs; Ms Kathryn Campbell, Secretary of the Department of Human Services; and officers representing the departments and agencies covered by the estimates before the committee.

1.7 The committee thanks the ministers, departmental secretaries and officers for their assistance and cooperation during the hearings.

### **Changes to departmental structures**

1.8 The committee notes that since the 2011-12 Budget the following agencies have been added to the departmental structure of the Department of Health and Ageing:

- The National Health Performance Authority<sup>2</sup>
- The Independent Hospital Pricing Authority<sup>3</sup>

1.9 The committee notes that since the 2011-12 Budget the following agencies have been added to the departmental structure of the Department of Families, Housing, Community Services and Indigenous Affairs:

- Aboriginal Land Commissioner, Northern Territory
- Australian Institute of Family Studies
- Office of the Coordinator General for Remote Indigenous Communities
- Office of the Registrar of Indigenous Corporations
- Social Security Appeals Tribunal<sup>4</sup>

1.10 Due to the Administrative Arrangement Orders changes, the Department of Families, Housing, Community Services and Indigenous Affairs is no longer responsible for the following:

- Volunteer Management
- Australian Government Disaster Recovery Payment
- Repatriation of Indigenous Remains<sup>5</sup>

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2 *National Health Reform Amendment (National Health Performance Authority) Act 2011*

3 *National Health Reform Amendment (Independent Hospital Pricing Authority) Act 2011*

4 Portfolio Additional Estimates Statements 2011-12, *Families, Housing, Community Services and Indigenous Affairs Portfolio: Explanations of Additional Estimates 2011-12*, p.4.

5 Department of Families, Housing, Community Services and Indigenous Affairs, *Annual Report 2010-11*, pp. 24-27.

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1.11 The committee also notes that as a result of the *Human Services Legislation Act 2011*, the Department of Human Services is responsible for all programs formerly provided by Centrelink and Medicare Australia.<sup>6</sup>

### **Questions on Notice**

1.12 In accordance with Standing Order 26, the committee is required to set a date for the lodgement of written answers and additional information. The committee requested that written answers and additional information be submitted by Thursday 29 March 2012. For the additional hearing held on 22 March 2012 for the Torres Strait Regional Authority the committee requested that written answers and additional information be submitted by Friday 20 April 2012.

### **Additional information**

1.13 Answers to questions taken on notice at the committee's additional estimates hearings will be tabled in the Senate in separate volumes entitled 'Additional information relating to the examination of additional estimates 2011-2012, February 2011, Senate Community Affairs Legislation Committee.' Documents not suitable for inclusion in the additional information volumes will be available on request from the committee secretariat.

1.14 Answers to questions on notice received from the departments will also be posted on the committee's website at a later date.

### **Note on references**

1.15 References to the Hansard transcript are to the proof Hansard; page numbers may vary between the proof and the official Hansard transcript.

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6 Department of Human Services (DHS), *Annual Report 2010-11*, p. 6.



# Chapter 2

## Health and Ageing portfolio

### Department of Health and Ageing

2.1 This chapter contains the key issues discussed during the 2011-2012 additional estimates hearing for the Health and Ageing portfolio.

2.2 The committee heard evidence from the Department on Wednesday 15 February 2012. Areas of the portfolio were called in the following order:

- Whole of Portfolio/Corporate matters
- Australian Commission on Safety and Quality in Health Care
- General Practice Education and Training Ltd
- Primary Care
- Private Health
- Mental Health
- Aged Care and Population Ageing
- Aged Care Standards and Accreditation Agency Ltd
- Hearing Services
- National E-Health Transition Authority
- Cancer Australia
- Health Infrastructure
- National Health and Medical Research Council
- Medical Services
- Australian Institute of Health and Welfare
- Australian National Preventive Health Agency
- Australian Radiation Protection and Nuclear Safety Agency (ARPANSA)
- Food Standards Australia New Zealand (FSANZ)
- Office of the Gene Technology Regulator
- Therapeutic Goods Administration
- Population Health
- Access to Pharmaceutical Services
- Acute Care
- Organ and Tissue Donation and Transplantation Authority

- Rural Health
- Health Workforce Capacity
- Biosecurity and Emergency Response

2.3 The committee agreed to provide any questions on notice to the following outcomes and agencies:

- Private Health Insurance Administration Council (PHIAC)

## **Whole of Portfolio/Corporate Matters**

### ***The Independent Hospital Pricing Authority***

2.4 The committee made a number of inquiries of the Independent Hospital Pricing Authority (IHPA). These included whether IHPA had completed its recruitment process, its final staffing numbers, and if a breakdown by staffing levels and classifications was available. The committee also noted the difficulties involved in achieving the 1 July 2012 deadline for activity based payment.<sup>1</sup>

2.5 Dr Sherbon, Acting Chief Executive Officer of the Independent Hospital Pricing Authority, stated that IHPA is presently fully staffed for its current role. Dr Sherbon added that there were currently 37 full time equivalents and they included technical positions to assist with statistical modelling.<sup>2</sup> Dr Sherbon gave a breakdown of these positions: 'APS4, three FTE; APS5, two FTE; APS6, five FTE; E01 executive level 1, 13 FTE, executive level 2, 11 FTE; SES band 1, two FTE; and one holder of the public office.'<sup>3</sup>

2.6 Ms Jane Halton, Secretary of the Department of Health and Ageing, reinforced Dr Sherbon's position that the deadline of 1 July 2012 would be met for the activity based payments for agreed classifications.<sup>4</sup>

2.7 The Department was asked why it had contracted a company \$420,000<sup>5</sup> to develop a comprehensive pricing framework. Ms Halton reassured the committee by explaining that a number of public discussions are required when attempting to set a certain price.<sup>6</sup> Policy and philosophical debates are needed to create framework, and it is important that they are publicly discussed. Ms Halton stated that:

The authority will [then] marry together a draft of framework, feedback from all the interested parties, [...] ultimately that all comes together as a

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1 *Proof Estimates Hansard*, 15 February 2012, p. 10.

2 *Proof Estimates Hansard*, 15 February 2012, p. 10.

3 *Proof Estimates Hansard*, 15 February 2012, p. 10.

4 *Proof Estimates Hansard*, 15 February 2012, p. 10.

5 *Proof Estimates Hansard*, 15 February 2012, pp. 12–13.

6 *Proof Estimates Hansard*, 15 February 2012, p. 13.

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proposition, as a debate, however the authority will run this. They will then decide on what it looks like.<sup>7</sup>

## **Australian Commission on Safety and Quality in Health Care**

### ***Health Reform Agreement***

2.8 The committee sought information on the Health Reform Agreement, with regards to the transparency of funding agreements and how these would evolve under the new agreement reached by Council of Australian Governments (COAG). Mr Charles Maskell-Knight, Acting Chief Executive Officer of the Health Reform Transition office, explained that Commonwealth funding is reported in budget papers and is allotted to hospitals on a basis of activity, while block funding is appropriated to a few other hospitals.<sup>8</sup> The funding is to flow into state accounts within the national health funding pool. The states make their payments for activity based funding into the same account and this is dispersed to local hospital networks. A monthly report is produced on the amount of money spent and on what basis spending has occurred.<sup>9</sup>

### **Primary Care**

2.9 The committee inquired about the number of GPs currently employed at the Springwood Super Clinic. In addition, information was sought as to whether these positions were full-time and if it was possible for a super clinic to open without the presence of GPs.<sup>10</sup> Ms Meredith Taylor, Assistant Secretary of the GP Super Clinics Branch, assured the committee that there were several GPs available when the clinic opened and more were going to be recruited. Ms Taylor added that there would be approximately two GPs currently working at the clinic, that the super clinic had to open for certain hours, and that there were always GPs present.<sup>11</sup>

2.10 The committee sought clarification as to the reason for the removal of dates from a copy of an agreement between the government and the Redcliffe Hospital Foundation, which was supplied in response to a question on notice to the committee at a previous estimates hearing. The committee also sought the reason behind classing these dates as commercial-in-confidence.<sup>12</sup> Mr Mark Booth, First Assistant Secretary for the Primary and Ambulatory Care Division, responded by stating that as many dates and as much information as possible is provided to the committee for answers to questions, but that external parties may want to keep some information from being

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7 *Proof Estimates Hansard*, 15 February 2012, p. 13.

8 *Proof Estimates Hansard*, 15 February 2012, p. 17.

9 *Proof Estimates Hansard*, 15 February 2012, p. 17.

10 *Proof Estimates Hansard*, 15 February 2012, pp. 21–22.

11 *Proof Estimates Hansard*, 15 February 2012, p. 22.

12 *Proof Estimates Hansard*, 15 February 2012, p. 23.

released to the public so that the information does not negatively impact on their business.<sup>13</sup>

2.11 The committee sought an update on HealthDirect, concerning the amount of callers that had requested medical care within one to four hours of the call. The committee added a request for information on the options given to these callers and whether the advice was followed by the caller.<sup>14</sup> Officers stated that from 1 July 2011 to 12 February 2012 the service received approximately 97 000 calls and that 60 per cent of these were referred to a GP within four hours.<sup>15</sup> These callers usually have three options, consisting of: consultation with a GP after-hours service, the medical deputising service or attendance at an emergency department. The Officers explained that it was difficult to record compliance, however the National Health Call Centre Network are conducting a study that follows up with callers in order to identify whether advice was followed.<sup>16</sup>

2.12 The committee asked for information concerning the funding formula for Medicare Locals based on characteristics from individual Medicare Local communities.<sup>17</sup> Officers explained that a number of characteristics were taken into account including: age, socioeconomic status, English as a second language and Indigenous population.<sup>18</sup> The funding formula is population based.<sup>19</sup>

## **Mental Health**

2.13 The committee asked officers about the reduction in the number of treatment sessions available for Better Access and whether there are any other current programs that will be able to replace the need for services created by the changes that take effect on 1 January 2013.<sup>20</sup> Officers identified several programs that would be able to achieve this:

Some of the programs that will meet the needs of those patients include the Partners in Recovery measure, [...] the expansion of the Support for Day to Day Living in the Community program, [...] and the early Psychosis Prevention and Intervention Centre program.<sup>21</sup>

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13 *Proof Estimates Hansard*, 15 February 2012, pp. 22–23.

14 *Proof Estimates Hansard*, 15 February 2012, p. 30.

15 *Proof Estimates Hansard*, 15 February 2012, p. 30.

16 *Proof Estimates Hansard*, 15 February 2012, pp. 30–31.

17 *Proof Estimates Hansard*, 15 February 2012, p. 35.

18 *Proof Estimates Hansard*, 15 February 2012, p.35.

19 *Proof Estimates Hansard*, 15 February 2012, p.35.

20 *Proof Estimates Hansard*, 15 February 2012, p. 43.

21 *Proof Estimates Hansard*, 15 February 2012, p. 43.

2.14 In addition, officers stated that funding for the Access to Allied Psychological Service (ATAPS) program has been more than doubled and that:

...both Better Access and ATAPS have the same client group. A decision about whether a client should be referred to Better Access or to ATAPS would need to take into account what the needs of the client were. ATAPS has been specifically designed and developed to complement Better Access and to deliver psychological services and other allied therapy services to people who would not otherwise be able to access them under Better Access. It particularly targets the hard-to-reach groups like rural and remote people, people in low socioeconomic positions, and Aboriginal and Torres Strait Islanders.<sup>22</sup>

2.15 Officers updated the committee on actions taken after a number of suicides in Mount Isa. The department held community forums at the end of 2011 and created a suicide prevention coordination group. A group was established by the Commonwealth and the Queensland governments to work on a local action plan.<sup>23</sup> A critical response service was provided by a locally based organisation called United Synergies and a final report issued by StandBy is being assessed.<sup>24</sup>

2.16 The department later added that Queensland Health has staff based at Mount Isa, that includes relevant mental health counselling qualified staff. A suicide prevention group also operates in Mount Isa.<sup>25</sup>

## **Hearing Services**

2.17 The committee sought information on hearing aid usage, noting that some hearing aids supplied are often not used. Using a National Acoustics Laboratory additional analysis of client surveys, officers corrected a previous statistic of hearing aid non usage of 30 per cent to being approximately 13 per cent.<sup>26</sup>

## **National E-Health Transition Authority**

2.18 The committee had queried surrounding the introduction of personally controlled e-health records. The committee sought clarification on whether the problems occurring within the smaller e-health system being trialled by NeHTA, which is not personally controlled and has a small number of health records, would be exacerbated when the more complex, personally controlled system is introduced.<sup>27</sup> Mr Peter Fleming, Chief Executive Officer of the National E-Health Transition Authority,

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22 *Proof Estimates Hansard*, 15 February 2012, p. 43.

23 *Proof Estimates Hansard*, 15 February 2012, p. 53.

24 *Proof Estimates Hansard*, 15 February 2012, p. 54.

25 *Proof Estimates Hansard*, 15 February 2012, p. 94.

26 *Proof Estimates Hansard*, 15 February 2012, p.65.

27 *Proof Estimates Hansard*, 15 February 2012, p. 72.

reassured the committee that the issues arising were due to the testing of the specifications.<sup>28</sup> This testing is done to ensure that problems such as the one that was found do not arise later in the more complex system:

It is very early days. It is not yet in production. That is the reason why we are doing it in those early wave sites, to pick up and make sure it is scalable. We are not implementing a component of it; we are doing the full build with them to see how it works in a local environment and therefore how it will scale.<sup>29</sup>

## **Cancer Australia**

2.19 The committee asked the department if any resources had been provided towards prostate cancer screening. Associate Professor Christine Giles, Executive Director of Cancer Australia, informed the committee that it had received \$3.97 million over three years to 2014.<sup>30</sup> This funding will help provide national evidence based information, resources and psychological support for men and their families who are affected by prostate cancer.<sup>31</sup>

## **National Health and Medical Research Council**

2.20 The committee asked officers to clarify the Australian Dietary Guidelines report, particularly with regards to the research that the report was based on, the public consultation process and the manner in which information is communicated.<sup>32</sup> It was noted that the report was based on international best practice standards and it has undergone extensive review. Professor Warwick Anderson, Chief Executive Officer of the National Health and Medical Research Council stated:

The important thing here is that there was an extraordinary amount of work to get to these guidelines. All the recommendations were built on all the work that was put together for the 2003 guidelines. Then 55,000 pieces of additional published peer-reviewed research since 2003 were analysed by our expert groups, all graded in terms of the evidence in support of it, and then that ranked A, B, C, or D, depending on the strength. Any of the recommendations in there are based on level A or level B evidence. I am not the expert, but I can assure you that the work that underpins any of these recommendations is extremely—I was going to say dense—well done.

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28 *Proof Estimates Hansard*, 15 February 2012, p. 72.

29 *Proof Estimates Hansard*, 15 February 2012, p. 72.

30 *Proof Estimates Hansard*, 15 February 2012, p. 75.

31 *Proof Estimates Hansard*, 15 February 2012, p. 75.

32 *Proof Estimates Hansard*, 15 February 2012, pp. 78–79.

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One of the reasons for putting this out to public consultation is that, not only does our act require it, but we always know that people pick up things. Committees are looking intensely at the evidence.<sup>33</sup>

2.21 The department added that in order for the Guidelines to be successful, they need to be easily comprehensible for consumers and that the public consultation process aids this goal.<sup>34</sup>

### **Australian Radiation Protection and Nuclear Safety Agency**

2.22 The committee noted that while processes unfold around a nuclear waste dump in central Australia, nuclear material is coming back from Europe and being stored temporarily in Sydney.<sup>35</sup> Dr Carl-Magnus Larsson, Chief Executive Officer of the Australian Radiation Protection and Nuclear Safety Agency, told the committee that the work ARPANSA is currently undertaking covers both the storage of the nuclear material as well as its disposal.<sup>36</sup>

### **Food Standards Australia New Zealand**

2.23 The committee sought clarification as to why the use of the chemical carbendazim has been banned for Citrus growers in Australia for two years, and yet Australia accepts orange juice imports from Brazil that can contain up to 10 parts per billion Maximum Residue Limits (MRL).<sup>37</sup> Mr Steve McCutcheon, Chief Executive Officer of Food Standards Australia New Zealand, explained that there are also chemicals used in Australia that are not used in some of its export markets and as a result Australia seeks import tolerances in those markets.<sup>38</sup>

### **Population Health**

2.24 The committee queried officers as to the international response regarding the implementation of plain-packaging procedures for tobacco.<sup>39</sup> The department responded that there had been a large amount of international interest and support:

We are definitely a world leader with this particular initiative, as I think is well known and acknowledged. [...] We have had a great deal of support from a number of countries that are similarly tackling some of these issues [...].<sup>40</sup>

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33 *Proof Estimates Hansard*, 15 February 2012, p. 78.

34 *Proof Estimates Hansard*, 15 February 2012, p. 79.

35 *Proof Estimates Hansard*, 15 February 2012, p. 103.

36 *Proof Estimates Hansard*, 15 February 2012, p. 103.

37 *Proof Estimates Hansard*, 15 February 2012, p. 108.

38 *Proof Estimates Hansard*, 15 February 2012, p. 108.

39 *Proof Estimates Hansard*, 15 February 2012, p. 121.

40 *Proof Estimates Hansard*, 15 February 2012, p. 121.

## **Workforce Capacity**

2.25 The committee sought information on the criteria used in addition to the national average of medical practitioners per capita to determine if a location is categorised as having a district workforce shortage (DWS).<sup>41</sup>

2.26 Officers explained that DWS is defined as a location where there is less access to medical services rather than medical practitioners compared to the national average:

This is worked out by using ABS population data for an area and comparing that to Medicare billing data. The district of workforce shortage will be an area where the Medicare billing per population is below the national average.<sup>42</sup>

## **Biosecurity and Emergency Response**

2.27 The committee discussed the closure of TB clinics in the Torres Strait Islands, particularly noting the effects this would have on TB patients arriving from Papua New Guinea.<sup>43</sup> Professor Chris Baggoley, Chief Medical Officer for the Department of Health and Ageing, explained that it is important for Papua New Guineans to receive treatment in their local communities rather than in the Torres Strait in order to reduce drug resistant TB:

The concern is that the best treatment for tuberculosis is what is called directly observed treatment, which can only occur when someone is being treated within their local community [...] when someone goes offshore to get their medication and takes some of it but in fact is not observed to take it because they are not part of a treatment program, they may then either discontinue taking the treatment or provide that medication for others. [...] That is the greatest risk for developing multi drug resistant TB.<sup>44</sup>

## **Death of Jenny Bryant**

2.28 The committee took the opportunity to offer its commiserations to the staff of the department and the family of Ms Jenny Bryant who passed away on 20 January 2012. The committee remembered Ms Bryant by her compassion, intelligence, patience and focus.

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41 *Proof Estimates Hansard*, 15 February 2012, p. 131.

42 *Proof Estimates Hansard*, 15 February 2012, p. 131.

43 *Proof Estimates Hansard*, 15 February 2012, p. 132.

44 *Proof Estimates Hansard*, 15 February 2012, p. 132.

## Chapter 3

### Families, Housing, Community Services and Indigenous Affairs Portfolio

#### Department of Families, Housing, Community Services and Indigenous Affairs

3.1 This chapter contains the key issues discussed during the 2011-2012 additional estimates hearings for the Families, Housing, Community Services and Indigenous Affairs portfolio.

3.2 The committee heard evidence from the department on Thursday 16 February 2012. Areas of the portfolio were called in the following order:

- Cross Outcomes/Corporate Matters
- Families and Children
- Australian Institute of Family Studies
- Housing
- Community Capability and the Vulnerable
- Seniors
- Disability and Carers
- Women
- Equal Opportunity for Women in the Workplace Agency

3.3 The committee also heard evidence from the department on Thursday 22 March 2012. The area of the portfolio that was called was the Torres Strait Regional Authority.

#### Cross Outcomes/Corporate Matters

3.4 The committee sought information on answers to questions on notice provided from the previous round of estimates. Mr Finn Pratt, Secretary of the Department of Families, Housing, Community Services and Indigenous Affairs, stated that all answers to questions on notice had been received by the day of the estimates hearing and that the majority of those answers were delivered before the due date. Officers added that 262 questions had been taken on notice and that 56.9 per cent of answers were submitted before the deadline.<sup>1</sup>

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<sup>1</sup> *Proof Estimates Hansard*, 16 February 2012, p. 6.

### ***Assistance for Carbon Price Impacts***

3.5 The committee questioned the department on the assistance provide to citizens to offset the increase of cost of living created by the carbon price and whether this would be an ongoing commitment.<sup>2</sup> Officers replied that government is assisting low and middle-income households by providing tax cuts and a 1.7 per cent increase in pensions, allowance and family payments:

Some of the elements of that assistance are [...] all taxpayers earning under \$80,000 a year will get a tax cut and most will get a tax cut of at least \$300 a year... The 3.4 million pensioners will get a payment increase... There is assistance for low-income households who may not receive tax cuts or government payment through an annual low income supplement... The assistance is ongoing.<sup>3</sup>

### **Families and Children**

3.6 The committee queried the progress of the Forgotten Australians exhibition. Officers reported that the exhibition launched on 15 November 2011 at the National Museum of Australia and has had approximately 1500 visitors per week. The exhibition closed on 26 February 2012 with the expectation that around 50 000 people would have attended. Officers explained that it also included a public forum in which issues around Forgotten Australians and Former Child Migrants were discussed. The department stated that the amount of public interest in the exhibition shows how effectively this aspect of Australia's history has been brought to light.<sup>4</sup>

### **Australian Institute of Family Studies**

3.7 The committee asked a series of questions relating to the adoption research project being undertaken by Australian Institute of Family Studies (AIFS). The committee was particularly interested in whether the project would meet its deadline and the process of public engagement.<sup>5</sup>

3.8 Officers reported that 1300 people had responded to the online survey and that it is expected that approximately 1500 people in total will have participated when it is closed. In addition, focus groups and face-to-face interviews are being conducted, with over 300 people having participated.<sup>6</sup> The department clarified that it was on track to meet its deadline.<sup>7</sup>

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2 *Proof Estimates Hansard*, 16 February 2012, pp. 15–16.

3 *Proof Estimates Hansard*, 16 February 2012, pp. 15–16.

4 *Proof Estimates Hansard*, 16 February 2012, p. 23.

5 *Proof Estimates Hansard*, 16 February 2012, pp. 26–27.

6 *Proof Estimates Hansard*, 16 February 2012, p. 26.

7 *Proof Estimates Hansard*, 16 February 2012, p. 27.

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## Housing

3.9 The committee sought an update on the Social Housing Initiative. Officers reported that they are reasonably on track in terms of the allocated construction timetable and that the initiative will be close to full completion by 30 June 2012. The department added that there would be a few projects that could be completed after the deadline and that only 28 sites had not yet commenced construction. These sites are located in Victoria and they would incorporate sites already under construction rather than new sites.<sup>8</sup>

## Community Capability and the Vulnerable

### *Gambling*

3.10 The committee queried statements made by game manufacturers as to whether or not the ACT poker machine trial date was unrealistic. Officers reassured the committee by explaining that manufacturers had been consulted on the trial for the ACT as well as its time frame. The department added that an independent technical adviser was also consulted.<sup>9</sup>

### Seniors

3.11 The committee sought information on senior internet kiosks, whether they were successful and if there was any training involved for the use of the kiosks.<sup>10</sup> Officers were eager to share the success of the senior internet kiosks stating that:

The kiosks have been very successful. We have heard of lots of stories where people have not had any involvement with the internet but, after a period of time, they have actually been very comfortable to use it for things such as Skype and keeping in contact with family.<sup>11</sup>

3.12 The department highlighted the tutoring involved with the internet kiosks, including the use of the mouse and, depending on the individual, different programs available. The tutoring is conducted by volunteers from the organisation that hosts the kiosk.<sup>12</sup>

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8 *Proof Estimates Hansard*, 16 February 2012, p. 30.

9 *Proof Estimates Hansard*, 16 February 2012, p. 51.

10 *Proof Estimates Hansard*, 16 February 2012, p. 63.

11 *Proof Estimates Hansard*, 16 February 2012, p. 63.

12 *Proof Estimates Hansard*, 16 February 2012, p. 63.

## Disability and Carers

3.13 The committee asked officers about the community consultation process for the National Disability Insurance Scheme (NDIS).<sup>13</sup> Officers explained:

Certainly there is an intention to engage with stakeholders and the broader community... All officials, and I believe all ministers, are cognisant of the importance of that as their work on design and the NDIS progresses.<sup>14</sup>

3.14 The committee asked the department if there were any programs that had been proposed in relation to achieving the objectives laid out in the draft of the ten year roadmap for national mental health reform.<sup>15</sup> Officers stated that the draft is an attempt to create overarching general directions in order to guide reform rather than to build specific programs.<sup>16</sup>

## Women

3.15 The committee asked officers for an update on the priorities that the Office of Women is focused on. Officers outlined key priorities such as reforms to the Equal Opportunity for Women in the Workplace Agency (EOWA) and the implementation of the National Plan to Reduce Violence against Women.<sup>17</sup>

3.16 The committee sought further information on domestic violence against women with disabilities and the actions that EOWA was taking in order to address this issue.<sup>18</sup> Officers replied:

[E]stablishing the Violence against Women Advisory Group [...] ensured that there was somebody [...] who was able to represent those views. We have now agreed a national plan through COAG with the states and territories. One of the projects that was seen as critical [...] relates to women with disabilities and trying to [...] understand the issues from their point of view but also understand the practical actions that can be taken.<sup>19</sup>

3.17 The department added that it had been working with Women with Disabilities Australia (WWDA) on the development of the project and that WWDA would be returning with a formal project proposal.<sup>20</sup>

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13 *Proof Estimates Hansard*, 16 February 2012, p. 69.

14 *Proof Estimates Hansard*, 16 February 2012, p. 69.

15 *Proof Estimates Hansard*, 16 February 2012, p. 72.

16 *Proof Estimates Hansard*, 16 February 2012, p. 72.

17 *Proof Estimates Hansard*, 16 February 2012, p.76.

18 *Proof Estimates Hansard*, 16 February 2012, p. 81.

19 *Proof Estimates Hansard*, 16 February 2012, p. 81.

20 *Proof Estimates Hansard*, 16 February 2012, p. 81.

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## Torres Strait Regional Authority

3.18 The committee welcomed representatives of the Torres Strait Regional Authority (TSRA) noting that it had been some since they had been invited to appear at estimates. The committee sought further information on the tuberculosis clinics in the Torres Strait Islands and the treatment of Papua New Guineans.<sup>21</sup> Mr John Kris, Chairperson of the Torres Strait Regional Authority, explained that a clinic is needed within or close to the Papua New Guinean community, eliminating the need for people to travel to the Torres Strait Islands.<sup>22</sup> Mr Kris added that if more TB clinics close there is a higher potential for people with untreated TB to be travelling to the Torres Strait Region for treatment.<sup>23</sup>

3.19 The committee asked officers about increased costs in food and petrol due to the distance from supply centres.<sup>24</sup> Officers stated that there was a significant increase to petrol prices in comparison to the mainland. Due to the lower median earning in the Torres Strait and higher food prices, food security becomes a clear issue.<sup>25</sup> Officers mentioned a possible solution consisting of a subsidy for the region to assist with maintaining an affordable cost of living, such as Tasmania's freight subsidy.<sup>26</sup>

3.20 The committee queried whether it would be beneficial for the TSRA to have separate statistics for Torres Strait Islanders separate from those for the Aboriginal people as a whole, for the closing the gap analysis.<sup>27</sup> Officers stated that although the major issues presented for the indigenous populations remain the same, it would be beneficial for the TSRA to have access to separate figures to aid planning for the region and so that baselines can be conceptualised.<sup>28</sup>

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21 *Proof Estimates Hansard*, 22 March 2012, p. 4.

22 *Proof Estimates Hansard*, 22 March 2012, p. 5.

23 *Proof Estimates Hansard*, 22 March 2012, p. 4.

24 *Proof Estimates Hansard*, 22 March 2012, p. 6.

25 *Proof Estimates Hansard*, 22 March 2012, p. 7.

26 *Proof Estimates Hansard*, 22 March 2012, p. 7.

27 *Proof Estimates Hansard*, 22 March 2012, p. 7.

28 *Proof Estimates Hansard*, 22 March 2012, p. 7.



# Chapter 4

## Human Services Portfolio

### Department of Human Services

4.1 This chapter contains the key issues discussed during the 2011-2012 additional estimates hearings for the Human Services portfolio.

4.2 The committee heard evidence from the department on Thursday 16 February 2012. Areas of the portfolio were called in the following order:

- Australian Hearing
- Medicare Australia
- Corporate
- Centrelink

### Australian Hearing

4.3 The committee began proceedings by asking about the work being done to encourage people to use hearing aids that are being supplied to them.<sup>1</sup> Ms Michelle Clapham, Executive Manager of Clinical Practice, reported that Australian Hearing encourages all of its clients to talk to staff when they are uncertain about their hearing aids and that staff are trained to help with all basic management and questions. Clients are also surveyed every year, with results showing that 10 per cent of clients do not wear their hearing aids for more than one hour per day.<sup>2</sup>

### Medicare Australia

4.4 Committee members asked an extensive series of questions relating to the Chronic Disease Dental Scheme. Senators asked about the numbers of audits conducted of participants in the scheme and the outcomes of those audits. They queried the extent of non-compliance and the approach taken to the recovery of funds. Officers reported that while 540 audits are still ongoing, 89 audit processes have been closed.<sup>3</sup> Of these cases, 26 were found to be compliant with the requirements of the scheme while 63 cases were noncompliant.<sup>4</sup>

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1 *Proof Estimates Hansard*, 16 February 2012, p. 86.

2 *Proof Estimates Hansard*, 16 February 2012, p. 86.

3 *Proof Estimates Hansard*, 16 February 2012, p. 88.

4 *Proof Estimates Hansard*, 16 February 2012, p. 88.

## Corporate

4.5 The committee questioned the department about a newspaper article that stated that the department spent \$2.5 million in taxi fares over the 2011-12 period.<sup>5</sup> Officers explained that this was an estimate for the contract entered into by the department and that the number was the value for potential Cabcharge vouchers that could be purchased over two financial years, 2010-11 and 2011-12.<sup>6</sup> The committee noted that after the two years it would be possible that the final figure could be lower than the original estimate.<sup>7</sup>

## Centrelink

4.6 The committee asked the department about the role that staff have in relation to the set-top box rollout. Officers replied that they are assisting the Department of Broadband in identifying customers who are eligible and writing to those customers to indicate the period of eligibility to claim for a set-top box. The department added that it offers call centre support, and quality checks for customers on the services provided to them by installers.<sup>8</sup>

4.7 The committee sought an update on the role the department played during the recent floods in Queensland and Northern New South Wales. Ms Kathryn Campbell, Secretary of the Department of Human Services, reported that the Minister for Human Services visited the region and that the department delivered the Australian government disaster recovery payment, in location and through call centres.<sup>9</sup>

4.8 The department added that it had received 20 000 claims and that 15 851 of those claims had been processed totalling \$18.5 million.<sup>10</sup> Officers reported that there was a greater awareness of the assistance available to the public after the flooding of 2011 and that claims were processed almost immediately.<sup>11</sup> Officers also added that as of yet there had been no fraudulent claims.<sup>12</sup>

## Acknowledgement of Senator Judith Adams

4.9 The committee concluded its proceedings by acknowledging the absence of Senator Judith Adams, a member of the committee since July 2005, who was unable to attend the estimates hearing process for health reasons. The committee added that

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5 *Proof Estimates Hansard*, 16 February 2012, p. 103.

6 *Proof Estimates Hansard*, 16 February 2012, p. 106.

7 *Proof Estimates Hansard*, 16 February 2012, p. 107.

8 *Proof Estimates Hansard*, 16 February 2012, p. 114.

9 *Proof Estimates Hansard*, 16 February 2012, p. 123.

10 *Proof Estimates Hansard*, 16 February 2012, p. 123.

11 *Proof Estimates Hansard*, 16 February 2012, pp. 123–124.

12 *Proof Estimates Hansard*, 16 February 2012, p. 124.

her input and questioning during estimates had been missed. The department and officials also passed on their best regards.



# Chapter 5

## Cross Portfolio Indigenous Matters

5.1 This chapter contains the key issues discussed during the 2011-2012 additional estimates hearings for cross portfolio Indigenous matters pursuant to Resolution of the Senate of 26 August 2008.<sup>1</sup> The following portfolio departments were in attendance:

- Department of Education, Employment and Workplace Relations
- Department of Families, Housing, Community Services and Indigenous Affairs
- Department of Health and Ageing
- Department of Human Services

5.2 The committee heard evidence from the departments on Friday 17 February 2012. Areas of the portfolios were called in the following order:

- Closing the Gap
- Northern Territory Emergency Response
- Employment and Economic Development
- Indigenous Business Australia
- Indigenous Housing
- Health Issues

### Closing the Gap

5.3 The committee sought information on the reported 90 per cent of Indigenous children that were enrolled in a preschool program in the year before full-time schooling and whether any additional data had been collected on the attendance at preschool.<sup>2</sup> Officers reported that a new national collection is being developed by the Australian Bureau of Statistics that will attempt to measure attendance where it is possible.<sup>3</sup> The department also clarified that attendance data for preschool is available by jurisdiction, however the difficulty with monitoring attendance at preschool is that it is not compulsory.<sup>4</sup>

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1 *Journals of the Senate*: No.22–26 August 2008, p. 683.

2 *Proof Estimates Hansard*, 17 February 2012, p. 10.

3 *Proof Estimates Hansard*, 17 February 2012, p. 10.

4 *Proof Estimates Hansard*, 17 February 2012, p. 11.

### ***Office of the Coordinator General for Remote Indigenous Services***

5.4 The committee asked officers about the gap between opportunities in metropolitan and regional Australia, mentioning that there is a 50 per cent gap in educational outcomes for Indigenous Australians who live in metropolitan areas compared to those that live in remote areas, and queried the department on its role in measuring the standards of delivery in remote areas.<sup>5</sup>

5.5 Mr Brian Gleeson, Coordinator General for Remote Indigenous Services, explained that his office is attempting to develop performance indicators in order to achieve measurable examples of progress. This will lead to an evaluation to assess whether outcomes are being achieved:

As an example of that [...] I convened a series of roundtables last year around school attendance. I found it very helpful to get the jurisdictions around the table to ask some very hard questions about the issues of teaching, quality of teaching, school attendance.<sup>6</sup>

### **Northern Territory Emergency Response**

5.6 The committee queried on what basis new signs were being installed in indigenous communities. The department replied that the new signs incorporated new words and better placement in order to be succinct and clear.<sup>7</sup> Officers stated that communities were consulted around what messages they thought the signs needed to reflect, as well as the messaging the government needs to add. Officers added that these signs will be located in places which give people a general warning that there are restrictions that apply in the Northern Territory.<sup>8</sup> Officers added that if a community does not want a sign, the legislation does not require it.<sup>9</sup>

### **Indigenous Business Australia**

5.7 The committee began by commending the Indigenous Land Corporation for the work they had done in increasing the amount of full-time employees at the Ayers Rock Resort.<sup>10</sup>

5.8 The committee sought further information on the issue of cadastral boundaries and if the circumstances for the drawing of these boundaries had changed.<sup>11</sup> Officers replied that different surveying is currently taking place:

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5 *Proof Estimates Hansard*, 17 February 2012, p. 16.

6 *Proof Estimates Hansard*, 17 February 2012, p. 16.

7 *Proof Estimates Hansard*, 17 February 2012, p. 24.

8 *Proof Estimates Hansard*, 17 February 2012, p. 24.

9 *Proof Estimates Hansard*, 17 February 2012, p. 24.

10 *Proof Estimates Hansard*, 17 February 2012, p. 26.

11 *Proof Estimates Hansard*, 17 February 2012, p. 33.

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What is different with the surveying that the Executive Director of Township Leasing is doing now is that the work involves the subdivision of the actual blocks within the town. This sets up the ability of proponents of leases to take a particular block of land without having to pay the survey costs up front.<sup>12</sup>

5.9 Indigenous Business Australia was keen to update the committee on its home ownership program, pointing out that it was about to approve its 15 000<sup>th</sup> home loan.<sup>13</sup> Mr Chris Fry, Chief Executive Officer, explained that most of the home loan clients would not have got a home loan through mainstream finance and that it is important because it represents a wealth transfer to the clients.<sup>14</sup>

## Housing

5.10 The committee noted that there are some houses in Indigenous communities that are in need of repair. Officers explained that work and repairs are carried on after construction by the Northern Territory government during regular repairs and maintenance.<sup>15</sup> Occasionally, staff from the repairs and maintenance program have to schedule a particular visit to a house if there is a long waiting period before they were originally scheduled to visit that area.

## Health

5.11 The committee noted that there are currently a few petrol stations that are still refusing to stock Opal fuel. Officers stated that there are eight stations refusing Opal and that these consist of five in the Northern Territory, two in South Australia and one in Queensland.<sup>16</sup>

5.12 The committee sought information on children receiving the first ear, nose and throat health checks in the Northern Territory Emergency Response, particularly whether children were referred for a second check up.<sup>17</sup> The department stated that of the 1968 children who had a first consultation there were 1283 who required a follow up:

As of May 2011, of those 1,283 who required further follow up, 227 had been reviewed by an ENT specialist, 85 still had their review period active, 751 had not been reviewed by an ENT specialist and 170 had no fixed review period and had not been seen.<sup>18</sup>

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12 *Proof Estimates Hansard*, 17 February 2012, p. 33.

13 *Proof Estimates Hansard*, 17 February 2012, p. 35.

14 *Proof Estimates Hansard*, 17 February 2012, p. 35.

15 *Proof Estimates Hansard*, 17 February 2012, p. 47.

16 *Proof Estimates Hansard*, 17 February 2012, p. 58.

17 *Proof Estimates Hansard*, 17 February 2012, p. 59.

18 *Proof Estimates Hansard*, 17 February 2012, p. 59.

5.13 The committee asked the department about the funding allotted to address suicides in the Kimberley, specifically involving the Taking Action to Tackle Suicide initiative.<sup>19</sup> Officers stated that Boab Health Services was funded in order to deliver extra services in the region and that it had employed two experienced psychologists that are delivering Indigenous suicide prevention services under the initiative. These services are being provided out of Broome and Kununurra.<sup>20</sup>

## **Conclusion**

5.14 The committee thanked the departments, officers and ministers for their attendance and confirmed the importance of the cross portfolio estimates hearings for addressing Indigenous issues. During the entire Additional Estimates process for 2011-2012 the committee asked over 850 questions on notice.

**Senator Claire Moore**

**Chair**

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19 *Proof Estimates Hansard*, 17 February 2012, p. 65.

20 *Proof Estimates Hansard*, 16 February 2012, p. 65.