

**Senate Community Affairs Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH AND AGEING PORTFOLIO**

**Additional Estimates 13 & 15 February 2013**

**Question:** E13-141

**OUTCOME 13:** Acute Care

**Topic:** National Partnership Agreement on Hospital and Workforce Reform

**Type of Question:** Written Question on Notice

**Senator:** Senator Di Natale

**Question:**

- a) What additional sub-acute services in which jurisdiction have been provided as a result of the National Partnership Agreement on Hospital Workforce Reform?
- b) Is the Department aware whether funding will be continued for these services beyond 30 June 2013
- c) If not, is the Department aware of what cuts to services will result?

**Answer:**

- a) States and territories are required to increase subacute care services by 5 per cent per year, or by 20 per cent over the four years of the National Partnership Agreement on Hospital and Health Workforce Reform (NPA HHWR).

Under NPA HHWR states and territories are required to report cumulative growth in subacute services. As at 30 June 2012 the cumulative growth for each state and territory was:

	<b>NSW</b>	<b>VIC</b>	<b>QLD</b>	<b>WA</b>	<b>SA</b>	<b>TAS</b>	<b>ACT</b>	<b>NT</b>
Total Growth (compared to baseline 2007-08)	19.77%	18.72%	42.76%	28.8%	47.10%	20.10%	8.44%	45.00%

- b) As system managers, the states and territories are responsible for the day-to-day administration of hospital services, including the ongoing provision of subacute care services. Schedule C of the NPA HHWR was a one off grant of \$500 million intended to support states and territories to expand subacute care services.
- c) Not Applicable.