# **Senate Community Affairs Committee**

## ANSWERS TO ESTIMATES OUESTIONS ON NOTICE

#### HEALTH AND AGEING PORTFOLIO

# Budget Estimates 2013-14, 5/6 & 7 June 2013

**Question:** E13-007

**OUTCOME:** 13 - Acute Care

**Topic:** Palliative Care

Type of Question: Written Question on Notice

Senator: Boyce

## **Question:**

According to the AIHW - palliative care admissions rose by more than 50% between 2001-2010.

- a) Could you provide me with the detailed planning that has been undertaken by the Department since 2001 to deal with these substantial increases in care demand, given they were predicted by the system and its experts in the decades leading up to 2001?
- b) What resources are being directed to this problem now?

#### Answer:

- a) The Department of Health and Ageing has not undertaken detailed planning in relation to the delivery of inpatient palliative care. States and territories have responsibility for undertaking detailed services planning to meet the health care needs of their resident population.
- b) Palliative care services provided by public hospitals attract a Commonwealth funding contribution under standard public hospital funding arrangements. The size of this contribution would be complex to calculate because of differences in the percentage of the National Efficient Price the Commonwealth contributes, by jurisdiction, to these services. In addition to this contribution, Schedule E (new subacute beds guarantee funding) of the National Partnership Agreement on Improving Public Hospital Services, provides states with a total of \$1.6 billion in funding over the period 2010-11 to 2013-14. Among the services to be funded from this amount, states and territories have committed to deliver a total of 114.5 palliative care beds / bed equivalents.