

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH PORTFOLIO

Budget Estimates 2017 - 2018, 30 May 2017

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OUTCOME: 2 - Health Access and Support Services

Topic: National Maternity Services Plan

Type of Question: Hansard Page 73, 30 May 2017

Senator: Waters, Larissa

Question:

Senator WATERS: I am just interested in the breadth of who has been consulted, not necessarily AMA, but that is good to know.

Mr Cormack: My understanding, and I do not actually have the full details in front of me, is that there was a consultative process set up that involved public and private healthcare providers and a number of professional groups. We are aware that the AMA and the National Association of Specialist Obstetricians and Gynaecologists had expressed some concerns about the level of representation in the working group. Queensland has taken that on board. They have admitted that at least one group, the AMA, was omitted from the initial consultation, and I understand they have taken steps to rectify that. I am certainly aware that there was some concern, and I think Maternity Choices Australia has also written to the Queensland health minister seeking some further advice about the way this has been undertaken. I understand that Queensland Health, as the lead institution, is following up on those concerns have been raised. I am not specifically aware of the nature and detail of the concerns they have raised, other than concerns have been raised about whether the consultation process is as inclusive as it should be, and I think Queensland Health is responding to that.

Senator WATERS: Could you take on notice to check on the list of folk who were consulted?

Mr Cormack: I certainly will.

Senator WATERS: An associated question is whether or not consumers of maternity services have been consulted.

Mr Cormack: I will take that on board.

Answer:

Queensland Health has provided the following advice regarding consultation on the development of the draft National Framework for Maternity Services (NFMS).

- Two phases of stakeholder consultation have occurred during the development of the NFMS with a third, via a national forum, planned for 23 June 2017.
- Phase 1 of the consultation process consisted of nine targeted stakeholder consultation workshops that were held in each of the capital cities, plus Cairns. The workshops brought together 95 stakeholders. Stakeholders were nominated by jurisdictions from key maternity service clinical workgroups and consumer representative organisations. A list

of stakeholders recorded as attending the workshops is provided in Appendix 1 of the Phase 1 Consultation Report for the National Maternity Services Framework, published on the COAG Health Council website at:

<http://www.coaghealthcouncil.gov.au/Projects/National-Framework-for-Maternity-Services>

- Phase 2 of the consultation process included seeking broad public feedback on the consultation draft of NFMS that was published on COAG Health Council's website. Feedback was sought via an online survey on the Queensland Government's Get Involved website and also by written submission.
- More than 200 written invitations to provide comment on the consultation draft of the NFMS were extended across Australia to non-government organisations, advocacy groups, universities, hospitals and health services, reference groups, clinical networks, Primary Health Networks, Aboriginal and Torres Strait Islander health services, peak industry associations, professional colleges and councils, as well as those who participated in Phase 1 targeted consultation.
- More than 100 submissions were received in response to the NFMS and a consultation report will be published in the near future on the COAG Health Council website.
- The third phase of consultation will take place on 23 June 2017 in Melbourne with more than 80 representatives invited from government, non-government organisations, advocacy groups, reference groups, clinical networks, Aboriginal and Torres Strait Islander services, peak industry associations, professional colleges and councils, as well as maternity service consumers.