

COMMUNITY AFFAIRS LEGISLATION COMMITTEE

QUESTIONS ON NOTICE – SUPPLEMENTARY BUDGET ESTIMATES - 20 OCTOBER 2010

HEALTH AND AGEING PORTFOLIO

Q No.	Outcome /Agency	Senator	Broad Topic	Question	Proof Hansard Page & Hearing Date or Written Q
79	5	Fierravanti-Wells	GP Super Clinics	Senator FIERRAVANTI-WELLS—I would like, with the permission of the chair, to give this to you, Ms Halton. I am happy for it to come to you electronically. If you could update that, it would save us a lot of time, rather than trawling through each one. Ms Halton—Sure.	CA 6
80	0	Fierravanti-Wells	Minister Roxon's trip to Paris	a) How long was the Minister in Paris? b) How long was the Minister's overseas trip? c) Did she only attend the OECD meeting in Paris? d) Details of the trip, such as what other meetings she attended? e) What were the costs? f) What were the travel costs? g) I would like a full breakdown of her trip. h) In so far as the Department of Health and Ageing is concerned, all details of trips Minister Roxon has taken since 2007. i) What embassy involvement was there in relation to this trip?	CA 10

114	0	Fierravanti-Wells	Minister Roxon's trip to Paris	a) What were the costs to the Department? b) What were the travel costs for Departmental officers? c) What involvement did the Department have?	
81	0	Fierravanti-Wells	National Funding Authority	Senator FIERRAVANTI-WELLS—When did the department first become aware of that decision? Ms Halton—We might have to take that on notice, Senator, unless Mr Head can correct me? Mr Head—I think we would need to take that on notice.... Senator FIERRAVANTI-WELLS—On 26 May, at estimates when I asked questions of Finance about the national funding authority, they had no inkling whatsoever that it was about to be dumped. We had the COAG hearing here in Canberra on 7 June and evidence was given. It was only in response to that answer on 16 June that we were advised that the national funding authority would be scrapped. I really have to question the bona fides of this. We had a full-blown hearing. As far as Health and Ageing is concerned, was anybody aware at that time, at that hearing, that the national funding authority was about to be dumped? Ms Halton—I was not at that hearing but people give evidence on the basis of their understanding. No-one would have given you false or misleading evidence; of that I am absolutely confident. I will have to go back and look at the dates to give you a precise answer as to when we were aware.	CA 10-11
153	0	Fierravanti-Wells	Boston Consulting Group	Senator FIERRAVANTI-WELLS—Interesting that Boston Consulting Group were successful yet again? What is the value of work given to Boston Consulting in the department of health since 2007? Ms Halton—I will have to take that on notice.	CA 12

392	1	Fierravanti-Wells	FOI requests from Tobacco Companies	Senator SIEWERT—I am trying to find out if any tobacco companies have used the FOI process to get information from the department. Ms Halton—The officers are not here, as that is actually under the program item, but I can tell you the answer is yes, we have a large number of FOI requests from tobacco companies. Senator SIEWERT—I do not expect you to list them all here, but is it possible to get a list of those requests? Ms Halton—I cannot imagine we could not. Can I take it on notice?	CA 14
145	0	Fierravanti-Wells	Boston Consulting Group	Senator FIERRAVANTI-WELLS—Are you able to just give an idea in general terms, perhaps if you would like to take it on notice because you will have a better idea in terms of timing. I appreciate there is a flexibility. Ms Halton—When the timing is clear I can answer that question. Senator FIERRAVANTI-WELLS—Why do you not take it notice. Given the period of time that is likely to elapse, if you could take that on notice in relation to that? Ms Halton—Yes, I am happy to do that.	CA 15

405	1	Fierravanti-Wells	Pandemic Survey	Senator FIERRAVANTI-WELLS—Some of the findings were very interesting. What was the number of people that you surveyed? Dr Allbon—I do not have that exact information in front of at this point in time. I would have to take that on notice. Senator FIERRAVANTI-WELLS—Thousands? Dr Allbon—Yes, it was in the thousands. Senator FIERRAVANTI-WELLS—Could you take that on notice and also the categories and the demographics—the categories of people. I am most interested in the usage and the take-up rates... Senator FIERRAVANTI-WELLS—Of course, those that were targeted as being more at risk were the younger people but there did not seem to be too many of those. Dr Allbon—I do not have those figures in front of me. I can certainly provide you with a copy of the report that would have those figures in it.... Senator FIERRAVANTI-WELLS—In answering your questions on the survey, did you ask people things like, ‘How did you hear about the vaccine?’ Did you ask that sort of question? Dr Allbon—I do not believe that was amongst the questions but I would have to look. I could certainly answer that from looking at the report. Senator FIERRAVANTI-WELLS—‘How did you become aware that there was a vaccine’; you did not ask that sort of question? Dr Allbon—Not that I can recall, but I certainly can look that up in the report. The full list of questions is in there... Senator FIERRAVANTI-WELLS—What was the cost of the survey? Dr Allbon—Again, I am not aware of that off the top of my head, unless Professor Bishop is? No? I would have to get back to you on that one. Senator FIERRAVANTI-WELLS—I am just a bit confused. Can you just go back and give me a timeline on your involvement and the work that you have done in relation to the pandemic vaccine? That is what I would like to know. Dr Allbon—Yes, I will do that... Senator FIERRAVANTI-WELLS—You published your preliminary results in February 2010, your draft report in late March 2010 and your final report in May-June 2010; is that the case? Dr Allbon—I think there is a little bit of confusion about which survey because there was actually a supplementary survey that we did which was subsequent. I can get you the details of that.	CA 15-17
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406	1	Boyce		Senator BOYCE—You may have to take this on notice. You put out a research paper in 2005 looking at the national health priority areas such as cancer control, injury prevention and control, cardiovascular health, diabetes mellitus, mental health, asthma, arthritis and musculoskeletal conditions, which said that about 50 per cent of the health system's expenditure went into those areas; that was about \$22.3 billion. That was in 2005, and it used data from earlier in the 2000s. Has that paper been updated? Dr Allbon—Not to my knowledge. Although it was before my time and I will certainly take it on notice, I suspect it was a contracted piece of work that we carried out. It sounds like it was for the national health priority areas. I am not aware that that has been updated across the board... Senator BOYCE—You will probably need to take this question on notice as well. With the 50 per cent going to that list of health priority areas that I read out earlier, do you think that those proportions have remained roughly the same? Have you done any work that would allow you to look at those proportions? Dr Allbon—I would certainly have to go away and have a look at whether we had done any work that had identified any trends in spending on those particular diseases. It may well be that it was based on the burden of disease information, which is 2003 information. We do not have any more recent information than that. If that is the case, we would not have an update, but I will check that for you.	CA 18
407	1	Siewert		Senator SIEWERT—I am just chasing up any issues around any involvement you have with the ongoing evaluation of income management. Have you been involved, or been approached to be involved in the new process? Dr Allbon—No, not that I am aware of. Senator SIEWERT—Could you take that on notice to double-check? Dr Allbon—Will do.	CA 19

140	14	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I have got separately that information from the World Health Organisation, so I will just take you through that. Thank you for that. Ms J Bryant—We can certainly do for you key dates from the WHO as well, on notice. Senator FIERRAVANTI-WELLS—I will compile it, but what would be helpful is one document of key milestones in the whole process, which not only covers what you have just said— Ms J Bryant—Yes, we can interleave them. We can produce that for you. Senator FIERRAVANTI-WELLS—An article in the <i>Australian</i>—I do not have a copy of the actual original article. Do you need me to go and get the copy of that article for you? Is that something that you are aware of? Ms J Bryant—I am not aware of this article but I also was not aware of claims that WHO had—so it would be helpful. Prof. Bishop—I might just try to clarify but we can get some specific information that you need as well. The broad issue is that the WHO normally decides on the next year's flu strains in September—so that would have been September 2009—and then an Australian committee considers it. We can get you more information about that, but that occurs soon after that. So that takes us back to September.	CA 22
141	14	Boyce		Senator BOYCE—How did the department become aware that this would not be happening? Was it in response to the questions you were asked to put or were you in close contact with them to know this? Ms J Bryant—I would have to take that on notice.	CA 28

424	1	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—So CSL? Prof. Bishop—I think the important point I have not made yet is that our advice at this stage, given that it is incomplete information, is that the discolouration is most unlikely to be relevant to the febrile convulsion issue. It is probably to do with the temperature and an accumulation of protein but it is not thought to be the reason that we have the febrile convulsions. As I said, we still are finishing that work off so I would like to come back to you with that.	CA 29
143	14	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—There were some thermal scanners there but we ordered more at a particular point? Ms Murnane—Yes, I cannot remember exactly when but we can find it. Senator FIERRAVANTI-WELLS—Would you take that on notice? Ms Murnane—We will, yes. Senator FIERRAVANTI-WELLS—Also whether that was on the advice of the Prime Minister's office or the health minister? Where did that advice come from? Ms Murnane—The money was in the national stockpile for it. We pre-plan the national stockpile and review it regularly. I have a six-weekly meeting on it. We will provide you with all the information about the thermal scanners, going back to the time of SARS.	CA 30
142	14	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—Perhaps if you could take on notice, now that you can look back, what the total cost of that whole pandemic is, if I could put it under that umbrella, rather than separate from the usual seasonal flu?	CA 31

154	4	Siewert/Boyce	Senator SIEWERT—Thank you. In terms of the bed spaces that have been handed back—and you might have to take this on notice—what proportion of those beds were then converted into community care places, for example? Ms Podesta—Are you asking specifically about Western Australia? Senator SIEWERT—Yes. I will do Western Australia, but I do want to know nationally as well, but I also want to know the breakdown for state by state. Ms Podesta—We will take that on notice.... Senator SIEWERT—So, of the beds that have been handed back, we have 17 per cent? Do you see the point I am making? That is almost double the percentage of what we have? In other words, we have had a higher proportion handed back. Prof. Cullen—I think we have to take something on notice there, because I do not think that that is the right comparator. The right comparator is allocated places that are not operational. We have to work out what percentage of allocated places that are not operational are in WA... Ms Podesta—That is why, when you asked me the question previously, I said there are actually two quite distinct issues there about surrender of provisional allocations. There is also lapsing of provisional allocations. Then there is relinquishment of operational places. They are measured in different ways. We will give you an analysis under the three categories, particularly for Western Australia. I believe you want to know what that means in terms of the percentage of that activity in Western Australia as compared to the rest of Australia? Senator SIEWERT—Yes. Senator BOYCE—If you are taking that on notice, could you do that analysis for each state? Ms Podesta—Yes, Senator.	CA 34-35
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433	4	Siewert		Senator SIEWERT—I am aware of that process. But I refer to those beds that are not operational, not just because of renovation et cetera, but because they cannot afford them, for various reasons. I am aware of operators saying that, because of the cost of care et cetera, there are issues around maintaining beds. Ms Podesta—At any time there will be a number of beds offline, to use our jargon, for a number of reasons. We do keep information based on the providers' circumstances and the information that they have given us. I do not believe that we produce a report on the circumstances leading to a bed being offline, but certainly as part of the process with monitoring capacity under the ratio we identify operational beds, and if there are groups of beds not operational, we identify the circumstances and we have contact with the approved provider. That is a key role of the state office. We do not produce a specific report on that, but we could certainly give you some information in general terms about what that looks like.	CA 35
155	4	Boyce		Senator BOYCE—On notice, could you provide me with a state breakdown of both the residential and those community figures? Ms Podesta—Yes. Senator BOYCE—That would be useful. Ms Podesta—You would like applications received in the current aged care approvals round? Senator BOYCE—Well, licences available versus applications received. Ms Podesta—We will... Ms Podesta—The number of places made available for allocation has decreased significantly over that period of time, too. I cannot give you a personal opinion. We said that the figures you have provided to us are not in line with our perception of what we have seen this year. We have had the discussion that there is a growth in the number of places that have been made available through allocation, and therefore there is a constant growth of this market of provision of places. The numbers of places in the rounds are very high. I do not have a personal opinion. I am very happy to take on notice your questions and give you any analysis that we have identified. Senator BOYCE—I guess I was not seeking a personal opinion but the department's view on the subject, and if you have done any analysis of that, what were your findings.	CA 36

156	4	Siewert		Senator SIEWERT—In terms of the other regions, and I go back to Senator Boyce’s issue about the number of applications there have been for each— Ms Podesta—In the current round, there have been 78 applications for extra service status amounting to 3,400 places from across Australia. I do not have a breakdown by state. Senator SIEWERT—Is it possible to take that on notice?	
146	4	Fierravanti-Wells	Aged Care	Has any work been undertaken in relation to aged care and where it fits in the Medicare Locals in particular.	CA 39
157	4	Boyce	Hours of Care	What are the average or median hours of care being offered under community care packages?	CA 38
158	4	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—If you could also give us a percentage of how much of the package is actually taken up in administration and in travel time, and what the travel component is, particularly for the regional and rural areas? Ms Podesta—I will have to take it on notice. Ms Halton—We do not collect that information, but when we get some census information, we will have it. We do not know just offhand when that will be available. We will take it on notice; we just cannot say how long it will take us to answer the question.	CA 38-39
159	4	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—In the national hospital networks and the primary care networks that were talked about, what has happened with aged care? Has any work been undertaken in relation to aged care and where it fits in the Medicare Locals in particular? Ms Halton—I am sort of struggling with the work. There is an ongoing dialogue about how all the bits fit together. Regarding specifics, because there is a discussion going on about the HACC transfer, there are all these things happening, so I cannot point you to a— Senator FIERRAVANTI-WELLS—Can you just take that on notice, please, and have a look?	CA 39

160	4	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—All right. Where are we at with one-stop shops? They are still on track, but we do not know where they are going to be. You have obviously done some work in relation to that. Please take that question on notice. Ms Podesta—We will take it on notice.	CA 40
125	4	Fierravanti-Wells	Aged Care - Community Visitors Scheme	With respect to the Community Visitors Scheme, could you provide me with an updated list of the projects that have been funded, the evaluation process, and when applications for new projects are open?	CA 40
426	4	Fierravanti-Wells		Ms Podesta —Because of the number of grant programs, it is possible that New South Wales Alzheimer's, along with the other state bodies, may have received a grant under the dementia program, and I would like to take that on notice so I can be complete.	CA 41
123	1	Ludlam		Senator LUDLAM—Can you give us any background at all as to why that decision was made and whether the facility somehow became safer in the 1980s or whether the initial exclusion zone was an overreaction? Can you step us back through that decision making? Dr Larsson—I would prefer to take that on notice. We really need to go back and go through all the reasoning behind that. Senator LUDLAM—You do not have 30 years worth of reports? Dr Larsson—I am completely comfortable with the fact that we have lifted those restrictions, but the reasoning and argument behind it I cannot pull up from the top of my head. Senator LUDLAM—I think that is reasonable, because it is a while ago. While you are there, can you explain the reason for the one-mile buffer zone that still exists, where horticulture and indeed habitation is prohibited? What is the reason for that?	CA 43

124	1	Ludlam		Senator LUDLAM—I am hoping that you are aware of a December 2006 IATSIIS research discussion paper No. 20 by Professors Colin Tatz, John Condon and George Tippet that explored the Indigenous health impacts of uranium mining, particularly in regard to Kakadu in the Territory. The findings of the paper were pretty hair raising, although they did say that further research was required. Has ARPANSA been requested to provide or provided any advice on this publication to any other department or agency? Dr Larsson—I am not aware of that, so I would like to take that on notice. Can you provide me with the information on the relevant paper? Senator LUDLAM—I can provide you with a citation for the paper. Are you familiar with it? They found an incidence of cancer in populations surrounding the Ranger uranium mine. I think it was approximately double the background level for Aboriginal people in the region. It caused quite a stir when it was published. The recommendation that came from it was to find approximately \$450,000 a year to monitor the social and physical health of Aboriginal people living in the surrounding communities.	CA 44
161	4	C. Brown	Carer's Care program for Dementia Carers	Senator CAROL BROWN—I would like to know how the trial has been rolled out in Tasmania. Can you provide as much information as you can on notice. I am particularly interested to know what the program involves, how it is being rolled out and how the packages are being distributed. I understand there are DVDs and fact sheets.	CA 51
147	5	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—We do not know how many of the superclinics bulk-bill concession card holders and children under the age of 16 years. Ms Morris—We can actually provide that. With most of them, if not all of them, I would think they will say whether they are bulk-billing everyone who comes in the door or what their approach to bulk-billing is, so we can provide that level of detail. We can probably provide patient numbers. We can provide that now if you are interested. Senator FIERRAVANTI-WELLS—Just take it on notice at this stage.	CA 55-56

431	13	Siewert		setting, to precisely obviate the need that you have outlined. Senator SIEWERT—I appreciate that and thank you very much for that information, but that is not broken down into metro versus rural? Ms Halton—We do not have that, I do not think. Whether we can get it is a separate question, but we certainly have not seen it.	CA 62
		Adams		Mr Andreatta—The rural health stakeholders are the Rural Doctors Association, the National Rural Health Alliance, nursing groups, and CRANA, which is the remote area nurses. They are the main players, but certainly the RFDS has been involved. Senator ADAMS—Can I have a list of those on notice?	CA 62
149	5	Barnett		Senator BARNETT—Have you had any meetings with Diabetes Australia? Ms Morris—No, I have not had a meeting with them yet. I have not. Other people in the department may have. Ms Huxtable—We would have to take that on notice. Senator BARNETT—I am asking the question: have any meetings been held with the peak body for diabetes in Australia, which is Diabetes Australia?	CA 64
150	5	Barnett		Senator BARNETT—How many meetings have you had with the AMA and how have they progressed? Ms Halton—We will not have details of meetings with us in terms of numbers and things like that. Senator BARNETT—Can you take that on notice?	CA 64
151	5	Barnett		Senator BARNETT—I know some of those names, obviously, but if you could, on notice, give us the details of their organisations that would be appreciated. Ms Morris—Yes, we can. I think we can give you the press release.	CA 65

152	5	Barnett		Senator BARNETT—Can you please advise us on the role and function of the group—the terms of reference for the group? Senator BARNETT—No, it is not. It is for him to determine, but you can answer the question: do you have draft terms of reference? Ms Halton—The officer is confident there is one, but, given the officer concerned is not physically here, I will take it on notice. Senator BARNETT—But the officer is confident that there are draft terms of reference? Ms Halton—Yes, but we want to be completely certain that that is a correct answer. We believe there is. Program 5 has finished. The individual has left. Senator BARNETT—You will take it on notice to confirm or otherwise the veracity of that statement?	CA 65
393	11	Siewert	LIFE Communica tions research work	Senator SIEWERT—Please take on notice: when is the current funding contracted to? Ms Krestensen—Certainly.	CA 66
394	11	Siewert		Senator SIEWERT—It goes to the issue around carers and supporters of people with mental health issues. I understand that there has been a proposal put in to sponsor a pilot to look at the viability or suitability of having a peak organisation specifically for carers for people with mental illnesses. Ms Harman—I am not aware of such a proposal. You may be referring to the scoping work that we commissioned, looking at a consumer representative structure. Senator SIEWERT—I understand there is that, but this is separate to that. Ms Harman—I am not aware of that proposal, but I can take that on notice and have a look.	CA 69

395	11	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I would now like to move over to comments that have been made by Professor Mendoza. Is there an intention by the government to replace Professor Mendoza? He resigned in a fairly spectacular way as chair of the advisory group that the minister says that she has. Senator McLucas—I will take that on notice and try to get some information back to you in the very short term.	CA 69
396	11	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—Do we have somewhere where I can find the criteria? Ms Harman—I believe those are criteria developed by Headspace itself. Senator FIERRAVANTI-WELLS—Perhaps you could take that on notice. It would help me because I am new in the portfolio.	CA 71
397	11	Siewert	Better Access Program	Senator SIEWERT—What process was used to select those clients and the clients from some of the other services? Ms Harman—I might have to take that on notice. I do not want to give you the wrong information, but I believe that it is the same process that was being used for clients of other provider groups, which was that the actual providers themselves would recruit clients. Senator SIEWERT—Can you confirm the process? Ms Halton—We will advise if that is not correct.	CA 73

398	11	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—Do we have defined criteria for where these centres will be located? Ms Harman—We would be interested in the capacity of the centres to link to existing services. They would need to have access to crisis teams, inpatient services and that kind of thing, so there are some considerations in that respect. Senator FIERRAVANTI-WELLS—Where are those criteria? Are they set out somewhere? Ms Harman—I do not believe they are available at this stage, but I can take that on notice. Senator FIERRAVANTI-WELLS—You can take on notice to tell me where they are. Of course, we do not know when they are likely to open and become operational.	CA 74
105	12	Fierravanti-Wells	Mental Health Nurse Initiative Program	Senator FIERRAVANTI-WELLS—How many additional nurses have been engaged to date? I did not hear your answer properly. Do we have a figure? Ms McLarty—We do not have a figure, no. Senator FIERRAVANTI-WELLS—When are we likely to? Would you like to take that on notice?	CA 75
106		Fierravanti-Wells		Senator FIERRAVANTI-WELLS—Do you know how many nurses you envisage will be engaged over the two-year period to the end of June 2012? Do you want to take that on notice as well? Ms McLarty—Yes, I will take it on notice.	CA 75
399	11	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I guess this is really a question to you, Senator McLucas. Given the strong comments that have been made by Professor Mendoza, will the government potentially look at some sort of change of composition or roles and operation of the council, or give thought to some alternative structure? Professor Mendoza's comments are very strident, so does the government intend to take those on board in terms of where it goes on this committee? Senator McLucas—We will come back to you on notice.	CA 76

117	3	Siewert	Maternity Services Review	Senator SIEWERT—Do you have an already documented formal process on how you are going to handle complaints and concerns? Mr Dennis—We do not have a formally documented process at this stage. Senator SIEWERT—Will you have that by 1 November? Mr Dennis—We will. Senator SIEWERT—That is two weeks. Mr Dennis—That is fine. Senator SIEWERT—In that case, could you take on notice to provide it to me when it has been established? Mr Dennis—We will do that.	CA 77
118	3	Fierravanti-Wells	National Prescribing Service	Mr Bartlett—There is a rolling program that is happening at the moment as they go through individual issues. They are discussed with a range of advisory committees and they will be rolled out. Senator FIERRAVANTI-WELLS—Could you take on notice to provide a bit more detail in relation to what they are doing?	CA 79
428	10	Boyce		Senator BOYCE—Nevertheless, the current offer from Queensland X-Ray, and in a newly built facility already in existence at the Townsville Mater Hospital, was to go halves in the cost of a PET scheme with the federal government and to have that installed and operational within six months. Apparently, you are saying the department is not aware of the offer. I find that unbelievable. Ms Halton—We will come back to you on notice on this, but my memory of this is that this is an HHF proposal; that the respective merits, including access by public patients at the location of the facility and the issues for access by public patients in the Mater proposal, were all considered as part of the consideration of all of those options; and that the decision was made to go with the public hospital option.	CA 80
119	3	Boyce		Senator BOYCE—Is it correct that 90 per cent of PET scans are done on a walk-in, walk-out basis? Mr Bartlett—I could not answer that. I will have to take that on notice.	CA 80

111		Boyce		Senator BOYCE—No. What about the Townsville General Hospital scanner; does that meet the criteria? Ms Halton—It was funded as part of the RCCs. Yes. Senator BOYCE—I am just making sure we are talking about separate projects. Could you provide me with a list of the criteria and in what ways the Townsville Mater project did not meet those criteria? Ms Halton—I am sure that we can do that.	CA 81
434		Siewert		Senator SIEWERT—How long ago was the list established? Ms Fisher—I might have to take that on notice. I think it was 2003, but it was reviewed in 2007. As I said, we are in the process of reviewing it again now.	CA 82
107	1	Siewert		Senator SIEWERT—How recent was that work done that you were just talking about? Dr Brent—I would have to take that on notice, but the WHO opinions probably go back to the early 2000s and the EAGAR opinion, I think, is probably also around 2002-03.	CA 84
108	1	Siewert		Senator SIEWERT—Have there ever been other instances recently where you are aware the marker has been found? Dr Brent—I would have to take that on notice, but I think the life sciences companies that produce these products were listening to the concerns of consumers and so on, and they started to look for alternatives to use instead of antibiotic resistance marker genes. I think that is the case. There may be one or two examples, but we would have to take it on notice if you wanted that.	CA 84
109	1	Xenophon		Senator XENOPHON—On notice could you provide details of any memos, notes or any documentary material that you have in relation to the discussions between FSANZ and the company concerned?	CA 86

110	1	Xenophon		Senator XENOPHON—Finally on this, can I put you on notice to indicate how many times you have had complaints in terms of an unintentional GM presence in particular products? Mr McCutcheon—We can take that on notice. Senator XENOPHON—With a particular reference to the S-26 soy formula. Mr McCutcheon—Yes.	CA 86
120	1	Xenophon		Senator XENOPHON—Can you take on notice whether our restrictions that apply to the marketing and prescription of Avandia are equivalent to or as rigorous as those in Europe and the US?	CA 91
121	1	Xenophon		Senator XENOPHON—I have one other question about dental devices. Is it correct that dentists are able to bring unregistered dental products into the country for personal use? We had a constituent contacting us to say that if you are an importer of such products you need to go through a rigorous process of approval through the TGA, but if it is for personal use you can bring it in and the same rules do not apply. You may want to take that on notice. Dr Hammett—I may need to take that on notice. Certainly there are provisions in the act for personal use exemptions. They apply to prescribing as well as for use of devices. Senator XENOPHON—I will put some questions on notice, but can you advise how it is defined and how it is monitored? Do we know how much has come into the country. Even if it is not assessed, do we have an idea of how many of these products come in, because there are assertions that there is a lot of personal use going on, according to one constituent.	CA 92

425	1	Xenophon		Senator XENOPHON —Perhaps on notice if you could just let me know how many sessions were held and how many people attended; what were the expectations in relation to that; how did this compare to expectations, as well as details of the cost of the program; was it above or below budget; and what feedback and in what form did the department proceed in relation to this program? Those things you can take on notice. But why did the department decide to end this program given that it seemed to be a sensible preventive health approach particularly for men's health?	CA 94
135	1	Adams	Breast Screening	Why can we not book screening online?	CA 94
136	1	Xenophon	Male Health Ambassador Program	a) Will there be a determination as to whether there will be a similar program rolled out at some time in the future? b) In terms of what the men's health ambassador program was trying to achieve in disseminating information about men's health, are there plans to do anything similar?	CA 94-95
425	1	Xenophon		Mr Smyth—As part of the announcement of the male health policy there was \$16.7 million in funding allocated. A part of that is an information arrangement whereby regular male health bulletins will be produced by the AOHW. There is also some funding, \$350,000, that is available for the production of various male health material to be made publicly available through a variety of mechanisms. One of the remits of the stakeholder male health reference group is to determine the most appropriate locations and the methods by which to make that— Senator XENOPHON—Perhaps on notice I can have that further information.	CA 95

137	1	Xenophon		Senator XENOPHON—In terms of any funding for prostate cancer awareness and in terms of any programs to do with prostate cancer, could you take on notice whether programs are continuing as before, whether there has been any diminution of funding or any programs? Ms Halton—No, I am not aware that there has been any wind-back. We will check but— Senator XENOPHON—And in terms of any funding for an ancillary organisations that provide that. Ms Halton—Let us have a look, but I am not aware of it.	CA 95
138	1	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I am sure he will make a good contribution, too. In answer to question E10-232, where I asked whether all research commissioned by the taskforce has been made publicly available, the answer was, ‘No, commission papers that have been made publicly available are on the website.’ How many papers are we talking about that have been commissioned and are not available on the website? Mr Smyth—I would have to take that on notice, because I just do not have that information with me at the moment. Senator FIERRAVANTI-WELLS—The point is that they have obviously been paid for. They have been commissioned and paid for so one would assume that they should be on the website. Is there any reason they would not be on the website?	CA 96

400	1	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I have this document stating, ‘Important notice, suspension of accreditation ... new applications for accreditation will not be accepted for processing after 1 December 2009’. Ms Harman—I would have to take that question on notice. Ms Huxtable—What is the source of that? Senator FIERRAVANTI-WELLS—It is from the website. I have a printout. It was printed out on 13 July. It states, ‘Please note that the Department of Health and Ageing is currently reviewing the lifestyle modification program component of the Australian Government Prevention of Type 2 Diabetes program’ and that the aim of the review is to identify areas of improvement leading to increased accessibility. Ms Harman—I will take that on notice.	CA 96-97
139	1	Adams		Senator ADAMS—The other one is in regard to diagnostic mammograms, where people are having screening mammograms free through BreastScreen and then when they have to have a diagnostic one they, of course, cannot claim on Medicare for it. Can anyone help me with that? Mr Smyth—If you could articulate the question, then I might be able to take it on notice. I would need to know a little bit more about exactly what you are asking. Senator ADAMS—I will put it on notice, because I have to contact a group that have been talking to me about this. The fact is that the initial screening mammogram is free and then if people have to go to the city it is an extra cost for them to have a diagnostic mammogram. I am wondering whether that might come into the Medicare area later on. I will get a bit more information on it.	CA 99

401	1	Siewert		Senator SIEWERT—At what stage do you expect that people could start applying for that and that the fund will start rolling out? Ms Harman—Are you talking about the \$25 million sponsorship fund? Senator SIEWERT—Yes. Ms Harman—That is something that I will have to take on notice. I guess that will come out of a result of the timing of the consultation, the length of time that consultation goes on until we receive the volume of responses, the process of using that information to finalise the program guidelines and then go out seeking interest in grants. I do not think that I can be specific at this particular point to you, but I am happy to take that on notice.	CA 100
435		Siewert		Senator SIEWERT—The issue around mercury in vaccines was raised. Do we have any vaccines in Australia? Ms J Bryant—My understanding is that thiomersal has been eliminated from most vaccines used in Australia. I am not sure whether it is in any. I would have to take that on notice. Certainly it is not in any products used in children's programs. Prof. Bishop—I just wanted to say it is part of multidose vials, which is always a consideration with respect to the pandemic vaccine. Also, information is available through the CDC, the FDA and through the TGA that there is no evidence of it essentially causing difficulty. There is quite a lot of literature on this, so I am happy to make that information available.	CA 101
429	10	Furner		Ms Morris—It is estimated by a Booz and Company report for release this year that as many as 18,000 Australians die each year as a result of adverse drug events. The most commonly acknowledged cause of these events relates to disjointed communications or unavailable information. Depending on how much time you have got I could give you a variety. Senator FURNER—You could give me maybe some of that on notice.	CA 107

115	10	Barnett		Prof. Anderson—From 2000 to 2010 we spent \$810 million on 1,680 grants in the general area of prevention. Senator BARNETT—Can you list the grants for us on notice... Prof. Anderson—No, I am talking about prevention in all its aspects. The figures that I have quoted are the definitions that the researchers give us, as to one of the aims of their research. We require them to categorise their research in many ways. Senator BARNETT—Would you be able to provide further and better particulars on notice? ... Senator BARNETT—When you answer those questions on notice, with the specific one regarding health prevention where you mentioned the \$810 million and the \$232 million, could you advise us what proportion that is of your total funds? Prof. Anderson—Yes.	CA 111-112
116	10	Barnett		Prof. Anderson—In fact, I was made aware today of a report released by Research Australia showing a return. The one that I remember is the work done by Access Economics for the Australian Society for Medical Research which showed, depending on which way you looked at it, a return of about \$2 to \$5 on every taxpayer invested dollar. Senator BARNETT—Yes. I guess it is a matter of how you value the return. Can you clarify the report or perhaps, on notice, refer us to the report... Senator BARNETT—If you could, on notice, provide us with those relevant reports that show the return on investment funds and, obviously, the funds that you obtain from third parties that support your research. I am talking about key performance indicators, whether the research is just theoretical or whether there is going to be some application of it, and the benefits that are derived, firstly, by the community and then, secondly, by the taxpayer.	CA 112

104	12	Siewert	Midwives registration and exemption	Senator SIEWERT— In other words, we are now a significant way down the track of the two years, and I am concerned that the process needs to be put in place sooner rather than later. Do you have a time frame for when you are completing the process? Ms Jolly—I do not have one with me today. I am certainly happy to take on notice to give you more detail about the process that we will need to go through. As I said, the Commonwealth will obviously have part of that role, but it is also something across states and territories, and the national registration agency has a role through the board. I would need to take some advice and get you some further detail on how that would work. Senator SIEWERT—That would be appreciated. I am acutely aware of the process and time lines. You are talking about it being a responsibility of the Commonwealth and the states, but presumably there will be a process of consultation with midwives and stakeholders? Ms Jolly—I would anticipate that would be the case. Senator SIEWERT—If you could take it on notice, that would be appreciated.	CA 113
101	12	Adams		Senator ADAMS—How does the total number of these bonded places compare with the number of scholarships for nurses and allied health professionals from rural areas? What is the comparison with scholarships there? Ms Jolly—I think I had best probably take that on notice because I would need to do the comparative figures.	CA 114
102	12	Adams		Senator ADAMS—Do you have the numbers of Indigenous medical students, nursing students and allied health students that are actually training at the moment? Ms Jolly—Can we take that on notice?	CA 114
103	12	Adams		Senator ADAMS—I have got one here on the rate of completion for Indigenous health students in Australian universities. Are most of them actually completing, not dropping out? Ms Jolly—Again, I would have to take that on notice and I would have to consult with my colleagues at education on the completion rates.	CA 115

122	12	Fierravanti-Wells	Senator FIERRAVANTI-WELLS—With the 1.2 million additional training days, it is very hard to work out why you have put it in terms of the training days and it is very difficult to actually work out how many actual students that is going to benefit. Do you have an estimation of that? Mr Cormack—It is 8,232 initially and up to 12,000 by the end of the national partnership agreement. Senator FIERRAVANTI-WELLS—That is not contained in the release. That must be buried in the detail. Could you just provide that for me, please?	CA 116
11	2	Siewert	Senator SIEWERT—Do we have figures to show us the amount of generic medicines that are available that are below the co-payment thresholds? Ms McNeill—I would have to take that on notice.	CA 121

82	10	Fierravanti-Wells	Senator FIERRAVANTI-WELLS—How many private hospitals applied? Dr Morris—I would have to take that on notice. Ms Halton—There were a number, Senator. Senator FIERRAVANTI-WELLS—Okay. How many private hospitals were successful in gaining round 1 and 2 funding? Dr Morris—I would need to take that on notice as well. Senator FIERRAVANTI-WELLS—How many public hospitals were successful? Dr Morris—I will take that on notice... Senator FIERRAVANTI-WELLS—If a disparity does exist, why is that? I assume you will take this one on notice, because you have not conceded that there is a disparity in terms of the number of applications. Can you tell me— Ms Halton—Can I just make one comment about that, Senator. I can tell you, from assessing the applications in the last round for regional cancer centres, that basically—and we have already touched on this with the Townsville discussion earlier—it was to do with the delivery of an integrated solution. There was a greater propensity to have stand-alone propositions that were not connected to other things that led to, by definition, less success. Senator FIERRAVANTI-WELLS—I am about to come to the magic word of the day: against what criteria were round 1 and 2 applications assessed? Ms Halton—They are public. We can provide them to you.	CA 127-128
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83	10	Fierravanti-Wells		Mr Morris—The department wrote to the unsuccessful applicants and invited the opportunity to give them feedback. Senator FIERRAVANTI-WELLS—When did you do that? Mr Morris—I will have to take that on notice. Senator FIERRAVANTI-WELLS—Could you take that on notice in relation to the unsuccessful ones? Mr Morris—Sure. Senator FIERRAVANTI-WELLS—And provide me with when that feedback was given? Mr Morris—The feedback was only given to those who took up the opportunity. Senator FIERRAVANTI-WELLS—Yes. I was about to qualify by saying— Mr Morris—Yes. We can identify who those were. Senator FIERRAVANTI-WELLS—And whether that feedback was oral or in writing?	CA 128
113	10	Fierravanti-Wells		Senator FIERRAVANTI-WELLS—Can you take on notice and provide documentation relating to the assessment of applicants in rounds 1 and 2 and an explanation of why decisions were made to fund those applications and how each of those assessment criteria were devised? Who was responsible for making assessments or agreeing to the funding? Was that a departmental decision or a ministerial decision?	CA 128
162	13	Furner		Senator FURNER—In terms of the situation of the current emergency department waiting times, can you identify those that are over four hours in waiting time? Mr Kingdon—I would have to take that on notice.	CA 130

432	1	Barnett		Senator BARNETT—What steps is the government taking in response to that recommendation? Does it support the merit of a national register? Ms Halton—I am not aware of them having taken a decision about that. Senator BARNETT—You do not have a view or you are just not aware? Is that something you could take on notice to clarify the position? Ms Halton—I am saying that I do not think the government has considered formally that recommendation, so I cannot put to you my understanding of what the government's view on that is. Senator BARNETT—It was released in May last year. I am pretty sure the government has responded. Ms Halton—Yes, but I do not think there is an active decision in respect of that particular issue, is my point. We are happy to take it on notice.	CA 131
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64	10	Barnett	Cloning	1. Has any progress been made since 17 September 2010 in establishing the independent review of the operation of the <i>Prohibition of Human Cloning For Reproduction Act 2002</i> and the <i>Research Involving Human Embryos Act 2002</i> each as amended by the <i>Prohibition of Human Cloning for Reproduction and the Regulation of Human Embryo Research Amendment Act 2006</i> as required by Section 25A of the <i>Prohibition of Human Cloning For Reproduction Act 2002</i> and by Section 47A of the <i>Research Involving Human Embryos Act 2002</i> to be undertaken as soon as possible after the third anniversary of the day on which the amending Act received Royal Assent (12 December 2006)? 2. When is it now anticipated that the composition of the committee that will conduct the review will be announced? 3. What will be the cost of the review and how will this be funded? 4. Is it anticipated that in accordance with the statutory requirements the persons undertaking the review will give the Council of Australian Governments and both Houses of the Parliament a written report of the review before the fourth anniversary of the day on which the amending Act received the Royal Assent, that is December 12 December 2010? 5. Is it considered that a period of two months or less is sufficient for the review to be carried out in a proper manner? 6. Please provide a detailed timetable of the steps the Minister took to ensure that the review was “undertaken as soon as possible after the third anniversary of the day on which the amending Act received the Royal Assent”, that is as soon as possible after 12 December 2009.	Written
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65	1	Barnett	RU486	1. For each state and territory please provide: (a) the number of practitioners who are currently authorised to supply mifepristone (RU486) for the termination of pregnancy; (b) a breakdown of these numbers by each of the three indications (medical abortion in the first trimester; medical abortion in the second trimester; surgical priming prior to surgical abortion in the first and second trimesters) for which authorisations have been granted; (c) for the six month period 1 January -30 June 2010 the total number of the number of patients for whom mifepristone has been prescribed; and (d) a breakdown of the number of patients by each of the three indications (medical abortion in the first trimester; medical abortion in the second trimester; surgical priming prior to surgical abortion in the first and second trimesters) for which authorisations have been granted.	Written
66	1	Barnett	RU486	2. Please provide updated data on the number of occasions on which the administration of mifepristone and misoprostol has failed to result in a completed termination of pregnancy	
67	1	Barnett	RU486	3. Please provide updated data on all other adverse effects that have been reported to the TGA	
68	1	Barnett	RU486	4. How many deaths of women worldwide have occurred in relation to the use of RU486?	
69	1	Barnett	RU486	5. What was the nature of the infection or suspected infections reported to the TGA following the use of RU486? Have any of these cases involved infection with <i>Clostridium sordellii</i> or <i>Clostridium perfringens</i> ?	
70	1	Barnett	RU486	6. Do any of the protocols approved by the TGA allow the vaginal administration of misoprostol in association with the use of RU486?	

71	1	Barnett	RU486	7. Does each of the protocols require the routine administration of prophylactic antibiotics after the use of RU486 and misoprostol? If not, why not, given the fatalities reported from toxic infection following the use of RU486 and misoprostol? 8. Please provide copies of each of the treatment protocols for the use of RU486 that is currently approved by the TGA.	
72	1	Barnett	RU486	9. Please provide copies of all adverse effects reports received by the TGA in relation to the use of RU486.	Written
73	1	Barnett	RU486	10. The answer to Question: E10-081 indicates that a total of 7216 doses of RU486 has been imported by the end of 2009. However, only 2926 patients had been given RU486 by the end of 2009. Are importers stockpiling RU486? Are patients given more than one dose of RU486 per abortion? 11. In particular for South Australia there were 1878 doses of RU486 imported by the end of 2009 but only 317 reported uses of RU486. Please explain this difference.	
84	0	Boyce	National Health Priorities	1. A research paper in 2005 looking at the national health priority areas such as cancer control, injury prevention and control, cardiovascular health, diabetes mellitus, mental health, asthma, arthritis and musculoskeletal conditions, which said that about 50 per cent of the health system's expenditure about \$22.3 billion went into those areas. That was in 2005, and it used data from earlier in the 2000s. Has that paper been updated? 2. In terms of the list of health priority areas in the previous question, does the Department Believe those proportions have remained roughly the same? 3. Have you done any work that would allow you to look at those proportions?	Written
85	2	Boyce	Outcome 2.2/PBS	1. Could you please provide the annual growth rate by year of the PBS over the past 10 years and the average over this period? 2. What is the future rate of growth of the PBS projected by the Department with and without the proposed reforms to the PBS? 3. What is the future rate of growth of the PBS by F1 and F2 formulary?	Written

86	2	Boyce		4. On what basis has the Minister arrived at the conclusion that Medicines Australia companies supply 60 per cent of generic medicines in Australia? 5. Is the Minister relying on IMS data? 6. Does the Minister realise that Australia's leading supplier of generic medicines – Alphapharm, does not provide sales data to IMS and that therefore IMS data is not accurate about the generic medicines market?	
87	2	Boyce		7. Is the Minister/Government aware that the PBPA Annual Report only captures those medicines that cost more than the patient co-payments of \$31.83 for general patients or \$5.40 for concessional patients? 8. Is the Minister relying only on data available from the Pharmaceutical Benefits Pricing Authority (PBPA) Annual Report?	
88	2	Boyce		9. Can you provide the Committee with specific per cent of the market share of MA members, GMiA members and others of the PBS F2 formulary by volume and dollars? Can you provide the source of the data and the time frame?	
89	2	Boyce		10. Is the Minister/Government aware that more than 50 per cent of generic medicines cost less than the co-payment? 11. Is it for political expediency that the Minister continues to ignore the fact that the major suppliers of generic medicines in Australia are members of the Generic Medicines Industry Association?	
90	2	Boyce		12. Is the Government railroading the reforms through in a desperate attempt to balance its Budget in the forward estimates? 13. Why won't the Minister meet with representatives of the Generic Medicines industry Association and work with them on other mechanisms by which PBS savings can be booked forward into the Budget estimates? 14. What assurances does the Government have that the proposed reforms will not jeopardise the public's ongoing access to a stable supply of generic medicines?	

91	2	Boyce	Outcome 2.2/PBS	15. The First Assistant Secretary for the Department of Health and Ageing stated at Senate Estimates on 2 June 2010 that the Department of Health and Ageing believes that the impact of the proposed 2010 PBS reforms on the investment and jobs of the generic medicines sector would be low. At the time you gave three reasons for reaching this conclusion, briefly that (1) the reforms offer a stable pricing policy for four years (2) reforms will not take cuts out of the earnings of pharmaceutical companies (3) there is growth for generic medicines. Under the proposed reforms to the PBS, suppliers of generic medicines will face price uncertainty for over 1600 as compared to the current 162 items. Changes to the PBS list price of items can reduce overnight by spikes of over 70% under price disclosure How does this provide a stable pricing environment for suppliers of generic medicines?	Written
92	2	Boyce		16. The proposed reforms and price disclosure generally are designed to claw back to the public purse the discounts that are currently being passed on from supplier of generic medicines to the pharmacist. Your statement that the proposed reforms will not take cuts out of the earnings of pharmaceutical companies must assume that as the PBS list price falls due to the price disclosure policy, pharmaceutical companies will be able to reduce the size of discounts while not reducing their competitiveness. What evidence does the Department have pharmaceutical companies will be able to reduce the size of the discounts while not reducing their competitiveness?	
93	2	Boyce		17. The Minister said in Parliament on 2 June and again on 29 September that the proposed reforms do not prevent the generic medicines industry from competing for a growing share of the PBS scripts. Currently suppliers of generic medicines compete heavily by discounting the price into pharmacy. As these discounts are clawed back through price disclosure, what mechanisms are available to suppliers of generic medicines to compete?	

94	2	Boyce		18. The Department advised this committee earlier this year that the generic medicines sector is expected to grow. I assume that suppliers of generic medicines will make commercial decisions about market entry on more than just the market size. Clearly low prices and limited market incentives to choose a generic medicine make a market commercially unattractive. 19. What assurances can the Department provide that the proposed reforms will not cripple the generic medicines sector market and consequently jeopardise access to market of generic medicines? 20. What analysis has the Department done to assure the Government of the ongoing stability of supply of generic medicines?	
95	3	Boyce	Pet Scanners	1. Is the Department aware of the offer of Queensland X-Ray to provide a PET scanner in an already constructed facility in Townsville, which would be in operation within 6 months of being ordered as opposed to the Government promised facility that would only be ready to use by 2014? 2. Is the Department aware that this offer by Queensland would offer bulk billing and that they would be responsible for all ongoing costs, including its replacement at the end of its serviceable life (3-5 years)? Is the Department also aware that taking up this offer it would only cost the Federal government \$1.5 million by a way of a grant to the applicant for half the capital costs of the first PET scanner? 3. If the Department is not aware of this offer and its detail, why not? 4. If the Department is aware of this offer why wouldn't it take the offer up, given the manifest cost savings to the taxpayer? 5. Could the Department provide the list of all the criteria used by the HHF in assessing the Queensland X-Ray proposal and all the reasons why the Department claims it didn't meet those criteria? 6. Is it correct that 90% of PET scans are done on a 'walk in, walk out' basis?	Written
96	13	Boyce	MyHospital's website	1. This site was to be ready by August, 2010. Why wasn't it ready by that date? 2. When can we expect it to be operational? 3. What has been the problem? Why the delay? 4. Are the cost estimates for this project on track or have they exceeded estimates?	Written

129	4	Boyce	Community Care	1. All indications from the private aged care industry would suggest that the construction of new aged care beds especially acute care has stalled. Could the Department provide all and any data that would reveal the facts of the situation? 2. If its shown that there is indeed a serious downturn in the construction of aged care facilities by the private sector and bearing in mind the at least three year led time for the delivery of new facilities what would the Department plan to do to kick start new investment and construction in the sector?	Written
130	4	Boyce		3. We have all heard of the importance of the stimulus funding in the construction industry why hasn't this been applied to the provision of aged care services?	
131	4	Boyce		4. In examining the return of aged care bed licenses over the last five years has the Department examined the reasons for those returns? 5. What has it discovered in regard to same? 6. And if that analysis hasn't occurred why not?	
132	4	Boyce		1. The government has made much of the importance of stimulus spending to the construction industry i.e. the schools projects but why hasn't the same been applied to the provision of aged care facilities?	Written
133	4	Boyce		2. It's been claimed by the aged care industry that a sign of the lack of future building plans is evidenced by the hand back of aged care bed licenses. What information does the Department collect on the reasons for such hand backs and what does that information show as to the reason for the return of bed licenses?	

134	4	Boyce		3. It's been claimed by the aged care industry that a sign of the lack of future building plans is evidenced by the hand back of aged care bed licenses. What information does the Department collect on the reasons for such hand backs and what does that information show as to the reason for the return of bed licenses? 4. It's been claimed by the Department that many private aged care providers are doing well, are profitable and that this is a measure of their efficiency. What are the providers so indentified by the Department doing to be so efficient? 5. What does the Department's notion of efficiency mean? 6. How is it defined, quantified and measured in relation to an aged care facility? 7. Does the Department accept that 'efficiency' can also be a warning sign that something is wrong? 8. Could so-called efficient facilities be offering a lower standard of accommodation, or a lower level of staffing, or a lower standard of staff care? 9. Could their efficiency be based on a strategy of 'cherry picking residents who can afford to pay more? 10. Are the Department's facilities of 'efficiency' providing the standard of care the community wants and a standard of which we can be proud? 11. Does the Department actively measure and monitor the operations of aged care facilities that provide them with the data to enable it to answer the previous three questions? If so what is it?	
75	2	Fielding		1. Given that Clause 5 of the MoU re-affirms the split in pricing of patented and generic medicines, resulting in Australians paying more per health outcome for patented medicines than generic medicines in some cases – which seems to provide the suppliers of on-patent medicines a significant advantage, as the price of a patented medicine can have a price higher than an off-patent medicines that delivers the same health benefit (eg. I understand that the following doses cholesterol lowering medicines provide the same health benefit, yet are priced at significantly different prices because one is on patent and the other is off patent: Rosuvastatin 20mg costs \$96.43 (patented); Atorvastatin 20mg costs \$100.70 (patented) and Simvastatin 80mg costs \$59.42 (off-patent), can the department explain how this will not eventually give the on-patent sector a significant advantage?	Written

76	2	Fielding		2. Given that Clause 16 of the MoU prohibits the Government from introducing therapeutic groups - an important policy tool that allows Government to set the price of medicines delivering the same health outcome at the same price, can the department explain how this will not eventually give the on-patent sector a significant advantage?	
77	2	Fielding		3. Given that Clause 20 of the MoU prohibits the Government from introducing any measure to favour prescribing or dispensing of generic medicines without the agreement of Medicines Australia, can the department explain how this will not eventually give the on-patent sector a significant advantage?	
78	2	Fielding		4. Given that restrictive prescription medicine pricing policy can result in the exit of major generic players, reduced competition in the market place and resulting in the paradoxical effect of increased prices of generic medicines over time (eg. The GMiA submission to the Senate Inquiry of 20 August provides a case study of this outcome occurring in the Canadian market), what analysis has the department performed such that the public can be assured that the proposed reforms to the PBS of the National Health Amendment (PBS) Bill 2010 will not have the paradoxical effect of increased prices of generic medicines over time?	
3	0	Fielding	Red Book	1. Did the department prepare a post-election brief for a returned Labor Government (the so-called 'Red Book')? 2. Can the department provide the committee with a copy of this brief? 3. If not, can the department outline its reasons for refusing to provide a copy of this brief? 4. If the department will not provide a copy of this brief because it contains confidential or sensitive information, can the department provide a redacted copy of this brief as was done by the Treasury Department? 5. Has the Minister given any instructions to the department regarding the release of this brief and if so, what were these instructions?	Written

4	0	Fielding	Blue Book	6. Did the department prepare a post-election brief for a newly elected Coalition Government (the 'Blue Book')? 7. Can the department provide the committee with a copy of this brief? 8. If not, can the department outline its reasons for refusing to provide a copy of this brief? 9. If the department will not provide a copy of this brief because it contains confidential or sensitive information, can the department provide a redacted copy of this brief as was done by the Treasury Department? 10. Has the Minister given any instructions to the department regarding the release of this brief and if so, what were these instructions?	
49	4	Fifield	Continence Aids Payment Scheme	• Please provide an update on how the transition from the Continence Aids Assistance Scheme (CAAS) to the new Continence Aids Payment Scheme has progressed? • How many people are currently claiming from the CAAS? • Does the Department expect to expend more or less money on the new scheme than the old scheme – i.e. do you expect the new arrangements to result in a net saving to the Commonwealth or not?	Written
50	4	Fifield	Young People in Aged Care	• How many people under the age of 45 have been placed in aged care facilities in each state or territory directly from hospital or rehabilitation facilities in each year since 2006? Please provide a breakdown of the age of these individuals using the following categories: - o Under 18 years of age - o 18-25 - o 26-39 - o 40-45	Written
51	4	Fifield		• Please provide a breakdown of funding for young people in nursing homes by state and territory for the years 2006-07 to 2009-10 inclusive	
52	4	Fifield		• Please provide details of the numbers of people living in residential aged care by state and territory and broken down into the following age categories - o Under 30 years of age - o 31-45 years - o 46-55 years - o 55 years and over	

53	4	Fifield		- How many residents of aged care facilities, broken down by State and Territory, and from the following age groups, have begun living at aged care facilities since YPINH packages were announced by the Howard Government: - Under 30 years of age 31-45 years	
1	0	Kroger		- On March 3 this year the Federal Government announced “major structural reforms to Australia’s health and hospital system” that will result in and I quote [see attached release] “by taking the dominant funding role in the entire public hospital system the Australian Government will end the blame game, eliminate waste and shoulder the burden of funding to meet rapidly rising health costs.” Is this correct? - Has this reform been made because vital treatments and services within the public health system are not being funded appropriately?	Written

2	13	Kroger		3. Is the Department familiar with a treatment called Nitric Oxide that is provided (only) in public hospitals for treating 'blue babies' or those suffering Hypoxic Respiratory Failure – that account to around 500 newborns each year? 4. Is the Department aware of concerns voiced by both Doctors and the company that markets the therapy – of rationalising use of this life-saving treatment owing to budgetary pressures. 5. Has the Department been informed by Neonatologists that, despite assurances that the states are being funded to pay for this treatment – many hospitals are struggling to meet the increased cost of this treatment that was brought about by the introduction of TGA approved pharmaceutical grade inhaled nitric oxide and safety standards for the delivery system associated with the treatment? 6. I understand that the Government has received correspondence from Doctors Groups on this matter, in particular I would like to reference Associate Professor Dr Kei Lui from the Australian New Zealand Neonatal Network when he says: “Unfortunately access to this schedule 4 pharmaceutical grade gas is not funded and we are under growing pressure to moderate the administration of this life saving treatment. Due to nitric oxide only being used in public hospitals – it is not eligible for Pharmaceutical Benefits Scheme (PBS) funding and because it is used in combination with a technological delivery system, it is unable to attract a Medicare Benefits Schedule (MBS) item number. What is the Government doing to fix this funding oversight? 7. Why can't the Federal Government directly Fund this life-saving therapy? 8. Why can't the process be changed so that funding can be provided directly for this treatment – to alleviate the concerns being generated by Doctors, hospitals and most importantly the families of newborns who should be receiving this treatment in an optimal fashion?	
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74	13	Scullion	Indigenous Dental Health	On the subject of dental services, The Federal Government's 2009 Budget announcement, as reported by the Department of Family and Community Services under "closing the gap between Indigenous and Non-Indigenous Australians", outlined, for Indigenous dental services in regional and remote areas: "\$11.0 million will fund dental treatment and <u>preventative services</u> to regional and remote Indigenous communities and assess the effectiveness of transportable dental facilities in communities where <u>dental professionals</u> and infrastructure are scarce". The measure was reported in the Government's Budget 2009-10: Budget initiative: Mobile Dental Services Poor oral health can affect a person's education and employment and exacerbate other chronic diseases. Indigenous oral health is significantly worse than that of the general population. Indigenous children have twice the rate of tooth decay and are less likely to visit a dentist than other Australian children. Many Indigenous people living in regional and remote Australia do not have access to dental treatment facilities. The Australian Government is providing \$11.0 million over four years to pilot the use of mobile dental facilities to deliver dental care to regional and remote Indigenous communities. Improving dental care for all Australians is a policy priority of this Government. • Could you please clarify the term/roll out period for the amount identified by FaHCSIA (\$11.0 million) • How many mobile dental services are currently in operation? What areas are they serving? • How many more mobile dental services are planned for the next four years? • Could you please list are any other Commonwealth policies or programs other than the 'mobile dental services' to deliver indigenous oral health services? • How are you assessing the effectiveness of transportable dental facilities in communities where dental professionals and infrastructure are scarce". How will dental workforce and infrastructure serving Indigenous people be improved?	Written
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5	0	Siewert	Tobacco FOI	Could you please provide the following details on the FOI requests 1. Who made the requests? 2. The dates they the requests were lodged? 3. How many have been completed and information provided?	Written
17	5	Siewert	Diabetes Initiative	Prior to the election, an Advisory Group was established to inform the Government about the new diabetes initiative. 1. Has this group met yet? 2. If not, when is its first meeting likely to be held? 3. Will information about its discussions be publicly available?	Written
6	1	Siewert	FSANZ testing for GM labelling	1. Can you confirm that in Food Standard 1.5.2 both the requirements to label GM foods and the exemptions from labelling GM foods both rely on the concept of 'substantial equivalence'? 2. Does this mean that processed foods which contain refined GM ingredients - such as vegetable oils, starches and sugars - may remain silent about this fact and are not required to label their products GM, provided no identifiable GM DNA or protein can be routinely detected in the end product?	Written
7	1	Siewert		3. Does FSANZ monitor and test processed foods for compliance with standard 1.5.2 (Food Produced using Gene Technology)? 4. If so, how often and on what basis are products selected for testing?	
8	1	Siewert		5. Do FSANZ and the ACCC apply the same requirements for honesty, fairness and equivalence to the labelling of GM and GM-free foods?	
9	1	Siewert		6. Is there a double standard in applying zero tolerance for any inadvertent use of GM techniques or GM products during processing to foods labelled GM-free or GMO-free while, in contrast, not requiring GM labelling of infant formulas or other foods found by laboratory test to routinely contain GM soy or corn?	
10	1	Siewert		7. What objective criteria are there by which the routine presence of GM DNA or protein detected in a processed product would also trigger a requirement for the product to be labelled and/or recalled? 8. If GM DNA or protein were detected in a processed food product, how many times, how often and according to what criteria would that product be retested to ascertain whether or not the GM presence was adventitious rather than routine? 9. If the GM presence were judged to be routine, what action would result?	

40	1	Siewert	GM Compliance and Monitoring Strategy	Can the documents the department holds that pertain to the National Compliance and Monitoring Strategy for Genetically Modified Foods please be tabled?	Written
13	13	Siewert	National Blood Authority	1. As outlined in the 2010-11 Portfolio Budget Statements, the National Blood Authority will be seeking independent advice as part of assessing proposals for new blood products and services. Can the NBA advise the Committee on whether this independent advice has or will be sought for the current tender process; and who is providing that independent advice?	Written
14	13	Siewert		2. With respect to the current review of the national blood arrangements that I understand is hoped will improve the process and the cost effectiveness and efficient use of public monies, can the NBA update the committee on the timing of the completion of the review? Is it still expected in mid 2011? a. Why wasn't the review brought forward or the current contract extended for the supply of blood products for a further 12 months to take advantage of the outcomes of the review rather than proceeding with a tender and contract negotiations that would lock the Government into a 3 year agreement? b. If neither timing nor process can be modified, does the NBA have any interim results from the review that will be utilised in this current tender process; and if so, will you share those with relevant stakeholders?	
15	13	Siewert		3. The Government has indicated it will continue to support the work of the Haemophilia Foundation of Australia. Can the NBA outline the extent of Government support and the priority activities for the coming year?	
37	7	Siewert	Newborn Hearing Screening	1. What percentage of newborns are currently receiving hearing screening across Australia?	
38	7	Siewert		2. Is it intended that the screening program be carried out in both public and private hospitals?	Written

39	7	Siewert		3. What percentage of newborns are receiving hearing screening in WA in public hospitals? 4. What percentage of newborns are receiving hearing screening in WA in private hospitals?	
33	2	Siewert	Ongoing Supply under the National Health Amendment (PBS) Bill 2010	1. The Health Amendment (PBS) Bill 2010 increases ten-fold (from 162 to over 1600) the number of medicines that will be subjected to repeated price reductions to pharmacists. What assurances does the Government have that the price changes will not coincide with stock shortages resulting in patients' inability to obtain prescription medicines as needed?	Written
34	2	Siewert		2. Under price disclosure the price of the medicine can drop below the cost of goods of some manufacturers, forcing the market exit of these less efficient suppliers. What assurances does the Government have that the remaining suppliers can produce sufficient volumes to meet the whole supply of the market?	
35	2	Siewert		3. Has the Government considered the likely mix of domestic and offshore supply of generic medicines under the proposed reforms? Is it expected that domestic manufacturing of generic medicines will move offshore?	
36	2	Siewert		4. If the proposed reforms result in diminished local manufacturing capability, what measures has the Government put in place to ensure Australians have access to specific medicines in the event of a pandemic?	
18	1	Siewert	Post market testing of GM effects	1. What is Population Health doing to explore the post-market introduction effects of the population-wide consumption of ingredients derived from genetically modified processes?	Written

19	1	Siewert		2. Is the Department aware of the range of risks associated with GM crops include a. altered toxicity, b. novel or altered allergenicity, c. increased capacity to promote immune response through production of novel adjuvants, d. altered nutritional content, e. risks associated with antibiotic resistance?	
20	1	Siewert		3. In light of research linking GM and food allergy has any review of previously approved GM products been undertaken?	
21	1	Siewert		4. FSANZ is the body that gives the initial approval for the public consumption of GM foods in Australia and New Zealand. Is the Department aware that FSANZ GM food approvals are based on data provided by the commercial company of interest? (That is, company that wish to profit provides the data) 5. Does the Department consider such data to be sufficiently independent to be of reliable quality?	
22	1	Siewert		6. Is the Department aware that prior to commercial release, a GM crop developer may have only given regard to two possible tests with non-standard associations with allergenicity: a. compared an <i>intended</i> sequence of a GM protein with a limited database of known allergenic proteins b. tested an <i>artificially produced</i> version of the <i>intended</i> GM protein in a pharmacological digestion test, of a certain acidity and pepsin (a digestive enzyme) content	

23	1	Siewert		7. Is the Department aware that the European Food Safety Authority has recently released a Scientific Opinion on the allergenicity assessment of GM crops for human food safety?		01.12.10	10.02.11
24	1	Siewert		8. Is the Department aware that Australian hospital separation rates for severe food anaphylaxis and adverse food reaction have increased dramatically across all age groups? 9. Has the Department considered that this may be related to the introduction of GM food ingredients and contamination through global trade lines? 10. Is the Department aware that FSANZ declared that the post-market follow up to the safety of these products be left in the hands of the GM crop developers themselves? 11. Do you consider it appropriate to leave the post-market follow-up to the commercial company of financial interest?	Written	01.12.10	10.02.11
12	12	Siewert	Rural mental health	1. Has the Department done any modelling for developing a rural and regional mental health workforce for effective outreach capacity in rural towns and remote communities? 2. If yes, is there benefit in such a workforce?	Written	30.11.10	10.02.11
25	1	Siewert	Therapeutic Goods Administration	<i>Public communication</i> 1. The TGA has a 'Customer Service Charter' on its website – who does the TGA consider to be its 'customers'?	Written	01.12.10	10.02.11
26	1	Siewert	Therapeutic Goods Administration	2. Why doesn't the TGA play a greater role in promoting its activities in the media and the public along the lines of similar organisations in other countries, such as the FDA?		01.12.10	10.02.11
27	1	Siewert	Therapeutic Goods Administration	3. Apart from the publication of CMIs, PIs and AUSPARS on its website, what is the TGA doing to increase public transparency and consumer confidence?		01.12.10	10.02.11

28	1	Siewert	Therapeutic Goods Administration	4. Who is the official spokesperson for the TGA? Does the TGA have its own media relations officer or do all media inquiries have to go through the Department of Health and Ageing? 5. If it is the latter, why is this the case when the TGA would arguably be more expert in its work? Does the TGA believe that it has an important role to play in promoting greater transparency by providing public comment on its decision making?		01.12.10	10.02.11
29	1	Siewert	Therapeutic Goods Administration	6. There are several advisory statements on the TGA's website that note the problems that may arise from products ordered from overseas via the internet (eg Hydroxycut, CORE HIV Rapid Test, 'Botanical Slimming Soft Gel' capsules.) What is the TGA doing to publicise these issues to consumers?		01.12.10	10.02.11
30	1	Siewert	Therapeutic Goods Administration	<i>Adverse events reporting</i> 1. The Australian Technical Advisory Group on Immunisation (ATAGI) and TGA Joint Working Group reported on 28 September 2010 that 'the overall rate of febrile convulsions post Panvax/Panvax Junior is estimated to lie between 7 and 18 per 100,000 doses nationally'. How does this conclusion fit with the research published in the journal Eurosurveillance showing Fluvax may have caused two to three hospital admissions due to seizure for every admission from flu it prevented? 2. What steps is the TGA taking to improve its adverse events reporting systems in light of the Fluvax issue?	Written	01.12.10	10.02.11
31	1	Siewert	Therapeutic Goods Administration	<i>Cost recovery</i> 1. The TGA's current funding is fully cost-recovered from industry. How does the TGA manage the perceived conflict of interest presented by its cost recovery arrangements? Has there been any discussion about a portion of its funding coming from Government, as is usual in other countries, to reduce the potential perceived conflict of interest?	Written	01.12.10	10.02.11
32	1	Siewert	Therapeutic Goods Administration	<i>Advertising</i> 1. Submissions to the consultation on 'Improving advertising arrangements for therapeutic goods' closed on 27 August 2010. When can we expect to see submissions released publicly? 2. When are recommendations from this consultation likely to be available? 3. How will the outcomes be published?	Written	02.12.10	10.02.11

54	1	Siewert	Alcopops Tax Program	Please report on the status of package of programs that were promised by the Government in the agreement with The Greens on the passage of the Alcopops legislation? How many projects have been funded to date? 1. Can you provide a breakdown and description of projects funded to date? 2. Please provide an update on progress of projects yet to commence?	Written	07.12.10	10.02.11
55	8	Siewert	Bega medical Clinic	1. What is being done to ensure funding and resources are given to the Katungal Aboriginal Corporation Community Medical Health Services to maintain and enhance Aboriginal health services in Bega and throughout the region?	Written	18.11.10	25.11.10
56	11	Siewert	Better Access	1. What qualifications, work experience or years of experience are required as a minimum standard for a “mental health social worker”?	Written	23.11.10	25.11.10
57	11			2. Given the late inclusion of social workers and occupational therapists in current The Better Access evaluation process, will the data be comparable with the other service provider data? 3. Are there enough psychologists and clinical Psychologists who can move into the gap left behind by the removal of SW's and OT's?		30.11.10	
58	11			4. What alternatives will be available to those living in urban fringe and rural areas receive focused psychological strategies for mild to moderate depression and anxiety, under Better Access, if there are minimal psychologists practicing in the area who will bulk bill?		30.11.10	
59	11			5. Has there been any consultation with consumers about the Better Access program? Has it included analysis of workers and occupational therapists?		23.11.10	25.11.10
60	11			6. What costing estimates have been prepared with respect to: i. The cost of establishing, staffing and maintaining ATAPS service centres ii. The cost of retaining social workers and OTs?		30.11.10	
61	11			7. How many social worker client questionnaires have been sent out? When were these questionnaires sent out in comparison to the other client questionnaires 8. How many private social workers have received questionnaires?		30.11.10	

62	8	Siewert	OATSIH travel allowance payments	Which were the 5 most frequently visited destinations for which travel allowance was paid and how much money was spent in travel allowance?	Written	18.11.10	25.11.10
112	5	Siewert	Hyperbaric oxygen therapy	I understand that interim funding for item 13015 is due to cease on October 31 st . The most recent figures for the total cost of benefits paid on this item were \$6.8million. 1. Could you let me know what the reasons are for no longer funding this item? 2. Can you clarify the funding situation with regards item 13020, which I believes may also cease to receive interim funding in October.	Written	8.11.10	25.11.10
408	5	Colbeck		- Can the Department provide the number of General Practitioners working in Tasmania, cross-referenced to local government area. - Can the Department provide the number of GPs who have commenced work in Tasmania since July 1, 2010, cross-referenced to local government area. - Can the Department provide the number of GPs who commenced work in Tasmania between July 1, 2009 and June 30, 2010, cross-referenced to local government area. - Can the Department provide the number of GPs who discontinued work in Tasmania between July 1, 2009 and June 30, 2010, cross-referenced to local government area. - Can the Department provide the number of GPs who have discontinued work in Tasmania since July 1, 2010, cross referenced to local government area.	Written		
409	11	Colbeck		- When does the funding for Sisters of Charity Outreach (based in Devonport, Tasmania) for grief counselling services expire? - What is the total amount that this service will have been funded over that period? - What discussions or correspondence have taken place with Sisters of Charity with respect to a further funding period? - Has funding been finalised for a certain period? If so, for what period and at what level?	Written		

410	13	Colbeck		• When does the current Commonwealth funding contract for the operation of the Mersey Community Hospital in Tasmania expire? • At what stage is the negotiation between the Commonwealth and the Tasmanian Government for a further funding contract for operation? • What interim funding arrangements have been agreed for the Mersey Hospital? • Will there be any amendments to the contract between governments with respect to: • Service delivery • Staffing levels • Capital works • Other funding aspects • Length of the contract	Written		
411	10	Colbeck		• Can you please provide a breakdown by financial year of funding budgeted for cancer services in North West Tasmania (including funding announced by the Prime Minister in May 2010 and further funding committed to by the Government during election 2010)? • From what program/s will these services be funded? • What advice was provided by the Department to the Government between May 19 2010 and 12 August 2010 about additional funding? Was further funding recommended by the Department? • On what dates did the Tasmanian Government write to the Department/Government seeking financial assistance for cancer services in North West Tasmania? When did they write? What did they request?	Written		
412	10	Colbeck		• What advice has the NHMRC received from DAFF on its work on 'A new food guidance system for Australia – Foundation and Total Diets'? What meetings have occurred and when? With which officers of DAFF? • What advice, if any, has the NHMRC received from DEWHA/SEWPC on its work on 'A new food guidance system for Australia – Foundation and Total Diets'? What meetings have occurred and when? With which officers of DAFF/SEWPC?	Written	08.12.10	10.02.11

413	10	Colbeck		Is NHMRC aware of the concerns of the seafood industry about the draft guidelines which recommend Australians eat seafood just once a week? What correspondence or communication has it received demonstrating these concerns? When?		30.11.10	
414	1	Colbeck		- Which government agencies or officials did the NHMRC consult with about 'sustainability of stocks' which has apparently been used to influence the draft dietary guidelines? - Has it consulted with or received advice from any environmental non-government organisations about this matter? (HSI International, PEW, WWF, etc) - On what advice or data did the NHMRC refer to with respect to 'sustainability of (fish) stocks'? - When will the final report be released?		30.11.10	
415	5	Colbeck		- How many tenders were submitted for the operation of the Devonport GP Super Clinic? - When was a decision made to award the contract to the successful operators? - When was the contract signed with the operator of the Devonport GP Superclinic? - What was the original contracted opening date? Was there any delay? If so, why? - What conditions were placed within the contract with respect to opening hours and bulk billing? - From where did the Minister and Mr Sidebottom's obtain advice to make that statement of 9 April 2009 that the clinic would be open until 10.30pm each night? - How is the GP Super Clinic "easing the burden" on the Mersey Hospital Emergency Department when it is not operating extended hours? What measures does the Department use to measure this?	Written	07.12.10	10.02.11

416	5	Colbeck		- Can the Department explain how the investment of \$5 million in this Devonport GP practice is not just a \$5 million boost for one local business at the expense of other GP practices in the area? - How many extra GPs are at the clinic compared to before it became a GP Superclinic? - What performance measures are placed on the operator of the Devonport GP Superclinic? - Was any analysis conducted on the impact of other clinics in Devonport and surrounds?			
417	5	Colbeck		- How many tenders were submitted for the operation of the Burnie (Cooe) GP Super Clinic? - When was a decision made to award the contract to the successful operators? - When was the contract signed with the operator? - What conditions were placed within the contract with respect to opening hours and bulk billing? - When will the clinic start operating? - What is the reason for the substantial blow out in the time line for this project?	Written	02.12.10	10.02.11
418	5	Colbeck		What will be its hours of operation? In April 2009 Health Minister Nicola Roxon stated 9am-9pm on weekdays and 10am-4pm on weekends, but in May 2010, the Prime Minister stated 8am-9pm weekends and weekdays. Where did each of these people obtain their advice on opening hours for the clinic? Why are the statements different?			
419	5	Colbeck		- The operators of the Cooe clinic have said this GP Super Clinic will have four GPs when it opens. Again in local media reports, the operator has stated that 3 of these GPs already work locally. How many GPs will be working at the clinic full time? Part time? How many are already working locally? - Is it justifiable to invest \$2.5 million in a major construction upgrade which results in the addition of just one new GP, but at the same time removes three other GP from existing practices? - Was any analysis conducted on the impact of other clinics in Burnie and surrounds?			

41	1	Xenophon	Office of the Gene Technology Regulator	• When were the criteria for establishing buffer zones for GM crops last reviewed? • Did this review take into account instances overseas where established buffer zones have failed to stop the spread of GM crops? • When will the buffer zones next be reviewed? • Is the OGTR aware of any breaches of buffer zones in Australia? - o What are the instances when this has happened? - o What action did the OGTR take in these instances?	Written	01.12.10	10.02.11
42	1	Xenophon		• What reporting processes are in place to ensure that the relevant authorities are notified of any breach? - o How confident is the OGTR in these processes? - o Is the OTGR aware of any occasions where the processes have failed?		01.12.10	10.02.11
43	1	Xenophon		• What monitoring does the OTGR undertake to ensure that buffer zones are not being breached? - o When were these processes last reviewed? - o When are these processed due for review?		01.12.10	10.02.11
44	1	Xenophon		• Does the OGTR support the Cartagena Protocol? • Is the OGTR aware of any plans for Australia to support the treaty? • What place does the OGTR have in advising the Government on this treaty? - o What representations has the OGTR made to the Government in relation to the treaty? - o What future representations will the OGTR make?		01.12.10	10.02.11

45	1	Xenophon	Therapeutic goods administration	- What steps has the TGA taken to review the approval of Avandia since September? - What independent assessments and tests of the drug were used in this process? - Were independent assessments and tests used in the original approval of the drug and any subsequent reassessments? - What steps will the TGA be taking in the future to continue monitoring the effects of this drug? - Does the TGA acknowledge that the actions of some GSK executives in withholding information about the drug make a strong argument for more independent testing of drugs and medical devices?	Written	01.12.10	10.02.11
46	1	Xenophon		Last Estimates, I asked questions regarding the remanufacture of single use devices. Further to that, can the TGA indicate if there is, or has recently been, an application for a facility to obtain GMP accreditation to remanufacture single use devices?		01.12.10	10.02.11
47	1	Xenophon		- In June, in response to comments from Canadian cardiologist Dr Larry Sterns expressing his concerns about the performance of remanufactured heart catheters, Dr Hammet said: <i>“I am delighted that you have got those views in the Hansard, because those views are very similar to the views shared within the TGA.”</i> Is this still the TGA’s view on remanufactured devices? - How has the TGA’s position changed, and why?		02.12.10	10.02.11
48	1	Xenophon		- The TGA’s Guidelines on single use devices state that <i>The TGA will include the device in the ARTG based on the manufacturers intended purpose. Therefore, the TGA does not conduct any pre-market assessments to determine if a device can be reused if the manufacturer states that the device is for single use or single patient use.</i> - Is this case for devices remanufactured overseas as well as in Australia? - When is the TGA planning to review these guidelines?		01.12.10	10.02.11

144	0	Fierravanti-Wells	Outstanding QON	If there are any outstanding questions on notice from Budget Estimates 2010: Please explain why there are still some outstanding questions on notice from Budget Estimates 2010.	Written	07.12.10	10.02.11
163	0	Fierravanti-Wells	Media monitoring	- What was the total cost of media monitoring services, including press clippings, electronic media transcripts etcetera, provided to the Minister's office in the 2009/10 financial year? Which agency or agencies provided these services? - What was the total cost of media monitoring services, including press clippings, electronic media transcripts etcetera, provided to the Department and its agencies in the 2009/10 financial year? Which agency or agencies provided these services?	Written		
164	0	Fierravanti-Wells	Social Media	- Has the department instituted any policies or protocols that restrict or deny staff the use of Youtube; online social media, such as Facebook, MySpace and Twitter; and access to online discussions forums and blogs? If yes, please explain what restrictions have been put in place. Why were these restrictions put in place? - IF NO: Why not? - Are staff utilising these sites during work hours? If yes, how many hours are spent on these sites? - What time are these sites most accessed (i.e. lunch time?). - Will measures be introduced to restrict access to these sites?	Written		

165	0	Fierravanti-Wells	Ministerial submissions	- Did the Government, Minister or his office return any documents to the Department once the caretaker conventions began? - Did these documents include Ministerial submissions, briefs or notes? - How many unread, unsigned or undealt with Ministerial submissions, briefs or notes were sent back? - What was the date of the earliest such document that was sent back from the Minister's office and the date of the last? - Did the Minister or his office request prior to the calling of the election that no more submissions, briefs or notes be sent?	Written		
166	0	Fierravanti-Wells	Election Commitments	- Were any of the government's election promises in your portfolio costed before the election was called by the department or Treasury or Finance? If so, which ones? Provide details of what work was done. - Had your department or any agency in your portfolio provided information on any of the government's election promises in your portfolio to the Government before the election was called? Was any work done on formulating any of the Government's election commitments? If so, which ones? Provide details of what work was done.	Written		
167	0	Fierravanti-Wells		- What is the status of each election commitment from the 2007 election within the portfolio? - Which 2007 election commitments are experiencing slippages? Why? Where relevant, what are the revised implementation dates? What are the implications of this slippage? - Are there any 2007 election commitments that will not be implemented? If yes, please provide details. Were departmental resources provided to implement these commitments? How much? What will happen to the funding now?	Written		
168	0	Fierravanti-Wells		- What is the status of each election commitment from the 2010 election within the portfolio? Please provide a list. - Has implementation of the 2010 election commitments within the portfolio commenced? If yes, provide details. If not, why not?			

169	0	Fierravanti-Wells		Will additional departmental resources be required to implement 2010 election commitments within your portfolio? If yes, provide details. If not, why not? If unable to provide an answer please explain why.			
170	0	Fierravanti-Wells		How will the election commitments in your portfolio be offset? Will your portfolio be required to offset the new spending in your portfolio?			
171	0	Fierravanti-Wells	2010 election	What type of work did your portfolio engage in during the campaign?			
172	0	Fierravanti-Wells		Did you receive any requests for information from the Government, your portfolio Ministers or any other Ministers?	Written		
173	0	Fierravanti-Wells		- Will the Department be releasing its Incoming Government Brief ('Red Book')? If yes, when and why? If not, why not? - Will the Department be releasing its Incoming Government Brief ('Blue Book')? If yes, when and why? If not, why not			
174	0	Fierravanti-Wells	Efficiency dividend	- Has your portfolio started implementing the Government's savings election commitment of a maintaining the annual efficiency dividend on departmental expenses at 1.25 per cent? If not, why not? If yes, give details. Will any agencies in your portfolio be seeking an exemption to implementing the efficiency dividend? - How do you think you will implement it? Give examples of the types of cuts you will make (i.e. no more pot plants in departmental buildings). - Will there be cuts to staff? If yes, give details.	Written	22.11.10	25.11.10
175	0	Fierravanti-Wells	Staffing levels	What is the total expenditure on staffing for the Department and for all portfolio agencies? What is the SES and non-SES breakdown?	Written	22.11.10	25.11.10
176	0	Fierravanti-Wells		What are the current staffing levels for SES and non-SES officers?			

177	0	Fierravanti-Wells		- How many SES were employed in your Department and portfolio agencies on 10 May 2010? - How many SES were employed in your Department and portfolio agencies as of today? - What is the breakdown by each level (each SES band, each Executive Level band and each APS band)?			
178	0	Fierravanti-Wells		What is the gender breakdown by each level (each SES band, each Executive Level band and each APS band)?		02.12.10	10.02.11
179	0	Fierravanti-Wells		What is the breakdown by location for each level (each SES band, each Executive level band and each APS band)?			
180	0	Fierravanti-Wells		What is the breakdown by each level of ongoing staff and non ongoing staff (each SES band, each Executive Level band and each APS band)?		02.12.10	10.02.11
181	0	Fierravanti-Wells		What has been the general staffing trend in your department and portfolio agencies since the 2007 election (for example SES numbers and recruitment has increased by X per cent because of Y).			
182	0	Fierravanti-Wells		What have been the changes in staffing levels since Budget Estimates 2010? Why have these changes occurred? What have been the Budgetary implications? In the case of reductions in staff numbers, how have these reductions been absorbed by the Department? What functions these staff performed have been sacrificed and why?		22.11.10	25.11.10
183	0	Fierravanti-Wells	Staffing levels	Are there expected changes to current staffing levels over the next 12 months? If yes, provide details including a breakdown of each level staff (each SES band, each Executive Level band and each APS band) detailing the changes. Will this be different to what was reported in the 2010-11 Budget?	Written	22.11.10	25.11.10

184	0	Fierravanti-Wells		Has there been a target for staff reductions to achieve savings? What is that target and what strategy is being implemented to achieve this? Will staff reductions be used to achieve the Government's election commitment to maintain the 1.25 per cent efficiency dividend?		22.11.10	25.11.10
185	0	Fierravanti-Wells		Have any voluntary or involuntary redundancies been offered to staff? If so, how have staff been identified for such offers? Are there such plans for the future?		02.12.10	10.02.11
186	0	Fierravanti-Wells		How many permanent staff recruited since Budget Estimates 2010? What level are these staff? Where is their location?			
187	0	Fierravanti-Wells		Since Budget Estimates 2010, how many employees have been employed on contract and what is the average length of their employment period?		07.12.10	10.02.11
188	0	Fierravanti-Wells		Have staffing numbers been reduced as a result of the current efficiency dividend and/or other budget cuts since Budget Estimate s2010? If so, where and at what level?		23.11.10	25.11.10
189	0	Fierravanti-Wells		Are there any plans for staff reduction? If so, please advise details i.e. reduction target, how this will be achieved, services/programs to be cut etc.		22.11.10	25.11.10
190	0	Fierravanti-Wells		If your Department/agency has been identified in the 2010 election as delivering efficiencies (savings), how will these be delivered? (for example, savings commitments included reducing program funding, rationalising grants etc how will these impact the department and staffing) .			
191	0	Fierravanti-Wells		What changes are underway or planned for graduate recruitment, cadetships or similar programs? If reductions or increases are envisaged please explain including reasons, target numbers etc.		02.12.10	10.02.11
192	0	Fierravanti-Wells	Electoral reports	Are there plans to publish a full suite of electoral reports on the Department's website? If not, why not? If so, when? What data will be included?	Written	22.11.10	25.11.10

193	0	Fierravanti-Wells		Did the Department prepare electorate level reports for the Government Ministers for the 2010 election? What data is included in these reports? How often is this updated? Why is this material not publicly available? Please provide copy of latest reports.			
194	0	Fierravanti-Wells		Has electoral specific data been used by the current Government in any grants scheme since November 2007?		22.11.10	25.11.10
195	0	Fierravanti-Wells	Consultancies	- How much has the Department spent on consultancy services since Budget Estimates 2010? Please identify the name of the consultant, the subject matter of the consultancy, the duration and cost of the contract, and the method of procurement (ie. open tender, direct source, etc). - How can the department justify this expenditure?	Written	07.12.10	10.02.11
196	0	Fierravanti-Wells		- How many consultancies have been undertaken or are underway since Budget Estimates 2010? Please identify the name of the consultant, the subject matter of the consultancy, the duration and cost of the contract, and the method of procurement (ie. open tender, direct source, etc). - Please also include total value for all consultancies, including figures for total spending on consultancies and also value of contracts awarded? Provide total figures since Budget Estimates 2010 and a breakdown on these figures for FY 2008/09 and 2009/10 FYTD.		07.12.10	10.02.11
197	0	Fierravanti-Wells		Is the Department/agency up to date with its reporting requirements on the Government's tenders and contracts website? Are the figures available on that site correct?		07.12.10	10.02.11
198	0	Fierravanti-Wells		Has there been any changes in the consultancies are planned for this calendar year since Budget Estimates 2010? If yes, have these been published in your Annual Procurement Plan (APP) on the AusTender website and if not why not? In each case please identify the subject matter, duration, projected cost and method of procurement as above, and the name of the consultant if known.		07.12.10	10.02.11

199	0	Fierravanti-Wells		Could the Department provide a complete list of current consultancy services. For each consultancy, please indicate the rationale for the project and its intended use. For each consultancy, please indicate why the Department or its agencies could not have undertaken the work themselves.		07.12.10	10.02.11
200		Fierravanti-Wells	Contractors	Has the department/agency ever employed Hawker Britton in any capacity or is it considering employing Hawker Britton? If yes, provide details.	Written	07.12.10	10.02.11
279	0	Fierravanti-Wells		Has the department/agency ever employed Shannon's Way in any capacity or is it considering employing Shannon's Way? If yes, provide details.		07.12.10	10.02.11
280	0	Fierravanti-Wells		Has the department/agency ever employed John Utting & UMR Research Group in any capacity or is it considering employing John Utting & UMR Research Group? If yes, provide details.		07.12.10	10.02.11
281	0	Fierravanti-Wells		Has the department/agency ever employed McCann-Erickson in any capacity or is it considering employing McCann-Erickson? If yes, provide details.		07.12.10	10.02.11
282	0	Fierravanti-Wells		Has the department/agency ever employed Cutting Edge in any capacity or is it considering employing Cutting Edge? If yes, provide details.		07.12.10	10.02.11
283	0	Fierravanti-Wells		Has the department/agency ever employed Ikon Communications in any capacity or is it considering employing Ikon Communications? If yes, provide details.		07.12.10	10.02.11
284	0	Fierravanti-Wells		Has the department/agency ever employed CMAX Communications in any capacity or is it considering employing CMAX Communications? If yes, provide details.		07.12.10	10.02.11
285	0	Fierravanti-Wells		Has the department/agency ever employed Boston Consulting Group in any capacity or is it considering employing Boston Consulting Group? If yes, provide details.		07.12.10	10.02.11
286	0	Fierravanti-Wells		Has the department/agency ever employed McKinsey & Company in any capacity or is it considering employing McKinsey & Company? If yes, provide details.		07.12.10	10.02.11
201	0	Fierravanti-Wells	Advertising and marketing	How much has the Department and portfolio agencies spent on advertising and marketing since Budget Estimates? Ask for justification of expenditure.	Written		
287	0	Fierravanti-Wells		Could the Department provide a complete list of current contracts. Please indicate the rationale for each service provided and its intended use.			

202	0	Fierravanti-Wells		What communications programs has the Department and portfolio agencies undertaken since additional estimates and what communications programs are planned to be undertaken? For each program, what is the total spend?			
203	0	Fierravanti-Wells	Discretionary grants	- Could the Department provide a list of all discretionary grants, including ad hoc and one-off grants since Budget Estimates 2010? Please provide details of the recipients, the intended use of the grants and what locations have benefited from the grants. - Has the Department complied with interim requirements relating to the publication of discretionary grants?	Written	07.12.10	10.02.11
204	0	Fierravanti-Wells	Commissioned reports	- How many Reports have been commissioned by the Government in your portfolio since Budget Estimates 2010? Please provide details of each report including date commissioned, date report handed to Government, date of public release, Terms of Reference and Committee members. - How much did each report cost? How many departmental staff were involved in each report and at what level? - What is the current status of each report? When is the Government intending to respond to these reports?	Written		
205	0	Fierravanti-Wells	Hospitality spend	- What is the Department's hospitality spend since Budget Estimates 2010? Please detail date, location, purpose and cost of all events. - For each Minister/Parl Sec's office, please detail total hospitality spend FYTD. Please detail date, location, purpose and cost of each event.	Written	22.11.10	25.11.10
206	0	Fierravanti-Wells	Board appointment	- What is the gender ratio on each board and across the portfolio? - What is the gender ratio of appointments made to boards since Budget Estimates 2010? - Are you implementing the Government target of 40 per cent women appointed to Boards?	Written	22.11.10	25.11.10
207	0	Fierravanti-Wells	FOI Requests	Has the Department/agency received any advice from the Government or any other source on how to respond to FOI requests?	Written		

208	0			• How many FOI requests has the Department received? • How many have been granted or denied? • How many conclusive certificates have been issued in relation to FOI requests? • Has the Department/agency received any FOI requests for its Incoming Government Brief ('Red Book')? If yes, when and will it be released? • Has the Department/agency received any FOI requests for its Incoming Government Brief ('Blue Book')? If yes, when and will it be released?			
209	0	Fierravanti-Wells	Community Cabinet	• What was the cost of Minister's travel and expenses for the Community Cabinet meetings held since Budget Estimates 2010? • How many Ministerial Staff and Departmental officers travelled with the Minister for the Community Cabinet meeting? • What was the total cost of this travel? • What was the total cost to the Department and the Minister's office?	Written		
210	0	Fierravanti-Wells	Cabinet and sub-cabinet committee meetings	• How much time is spent preparing papers/submissions for Cabinet and Sub-Cabinet Committee meetings? • How often must papers/submissions for Cabinet and Sub-Cabinet Committee Meetings be redrafted or relodged? Please provide example of why this would happen. (i.e. last minute policy changes or redate papers due to items not being discussed when initially scheduled).	Written	07.12.10	10.02.11
211	0	Fierravanti-Wells	Reviews	• What is the total number of Reviews both completed and ongoing in the portfolio/agency or affecting the portfolio agency since Budget Estimates 2010? • Please provide a breakdown of reviews completed since Budget Estimates 2010 including: • when those reviews were provided to Government, • estimated cost of producing each review (and total cost) and • if the Government has responded to the review or information about when the Government has indicated it will/will not respond to the review. • How many reviews are ongoing? • How many reviews have been completed since additional estimates? • What further reviews are planned in the portfolio/agency? • Will any of these reviews cease due to the 2010 Election?	Written		

212	0	Fierravanti-Wells	Government payment of accounts	- Has the department/agency paid its accounts to contractors/consultants etc in accordance with Government policy in terms of time for payment (i.e. within 30 days)? If not, why not, and what has been the timeframe for payment of accounts? Please provide a breakdown, average statistics etc as appropriate to give insight into how this issue is being approached.) - For accounts not paid within 30 days, is interest being paid on overdue amounts and if so how much has been paid by the portfolio/department agency for the current financial year and the previous financial year? - Where interest is being paid, what rate of interest is being paid and how is this rate determined?	Written	02.12.10	10.02.11
213	0	Fierravanti-Wells	Government stationery requirements	- What are the government (Ministers/Parliamentary Secretaries) stationery requirements in your portfolio (i.e. special type of paper, envelopes)? - What are the cost of these items? Is the Department/portfolio agencies paying for these?	Written		
214	0	Fierravanti-Wells	Administrative Arrangement Orders	- Can you detail what changes have occurred in your portfolio as a result of the Administrative Arrangements Orders published on 14 September 2010. - Were there any costs associated with these changes (for example changes to departmental signage or whether refurbishment or additional space will need to be leased to accommodate new staff. Alternatively, will agencies be left with empty office space due to loss of staff). Please provide details - Were there any staff changes as a result (staff transferring to or from your agency)? If yes, please detail what the staff changes were, including a breakdown of changes to each SES band, each Executive Level band and each APS band. - Were there any changes in your portfolio as a result of the Administrative Arrangements Orders published on 14 October 2010. - Were there any costs associated with these changes (for example changes to departmental signage). Please provide details. - Were there any staff changes as a result (staff transferring to or from your agency)? If yes, please detail what the staff changes were, including a breakdown of changes to each SES band, each Executive Level band and each APS band. - Can you describe what, if any, Administrative Arrangements Orders occurred in your portfolio between November 2007 and July 2010? Please detail the costs associated with these.	Written		

215	0	Fierravanti-Wells	Media subscription s	- Does your department or agencies within your portfolio subscribe to pay TV (for example Foxtel)? If yes, please provide the reason why, the cost and what channels. - Does your department or agencies within your portfolio subscribe to newspapers? If yes, please provide the reason why, the cost and what newspapers. - Does your department or agencies within your portfolio subscribe to magazines? If yes, please provide the reason why, the cost and what magazines.	Written		
216	0	Fierravanti-Wells	Travel costs	- The 2009-10 Mid Year Economic and Fiscal Outlook detailed a whole-of-government coordinated procurement arrangements for travel and related services. How has this applied to your department and portfolio agencies? Please explain the changes that have occurred to your department and portfolio agencies in relation to its travel and related services. - Is purchasing of travel and related services less expensive under the new arrangements? - Is purchasing of travel and related services more efficient under the new arrangements? - Have savings been achieved in your portfolio because of the new arrangements? - How much did your department and portfolio agencies spend on travel in 2008-09, 2009-10 and to date this financial year. - How have staff within your department and portfolio agencies found the new arrangements? For example is it more efficient to arrange travel?	Written	02.12.10	10.02.11
217	0	Fierravanti-Wells	Commonwealth Property Management Framework	- The 2009-10 Mid Year Economic and Fiscal Outlook detailed the establishment of Commonwealth Property Management Framework. How has this applied to your department and portfolio agencies? - Has the implementation of this Framework lead to savings in your portfolio? Please provide details.	Written	22.11.10	25.11.10

218	0	Fierravanti-Wells	Whole of government departmental efficiencies	- The 2009-10 Mid Year Economic and Fiscal Outlook detailed whole-of-government departmental efficiencies. How has this applied to your department and portfolio agencies? - Can you provide details of how these efficiencies will be achieved? Please provide specific examples. - Will the implementation of the Government's election commitment to maintain the 1.25 per cent efficiency dividend impact on your department or portfolio agencies ability to meet the efficiencies outlined in the 2009-10 Mid Year Economic and Fiscal Outlook? - Have any voluntary or involuntary redundancies been offered to staff to meet the 2009-10 Mid Year Economic and Fiscal Outlook detailed whole-of-government departmental efficiencies in your portfolio? If so, please provide details? Are there such plans for the future?	Written	22.11.10	25.11.10
219	0	Fierravanti-Wells	Program spending	- Are there any programs within your portfolio that are likely to exceed their current budget. If yes, please provide details (for example a demand driven program that has had higher than anticipated take up). - Are there any programs within your portfolio that are likely to under spend their current budget. If yes, please provide details (for example a demand driven program that has had higher than anticipated take up).	Written		
220	0	Fierravanti-Wells	IBM Contract	- I refer to the IBM contract which expires on 30 June 2011. In relation to this contact, please advise: - What steps are in place to ensure a robust market testing will occur? - To ensure adequate time adequate time for industry to respond and evaluations to occur, when should the tender should have been in the market? Should this have been a date earlier this year? - When you last signed with IBM this was reported as a direct source, which of the CPG clauses that cover direct sourcing was used to justify this? Are you going to do this again? When will industry be invited to provide a competitive bid?	Written	02.12.10	10.02.11

221	0	Fierravanti-Wells		- The recent telephone project for the new Sirius building was reported to cost some \$5.5million. In relation to this: - How much is the annual maintenance? - Has this figure been reported? If so, where is it reported? If not, ought it not have been put on the Aus Tender website?			
222	0	Fierravanti-Wells		- Is the Department in the process of rolling out a thin client computing model? If so, please advise: - Are there cost justification documents that supported this decision? If so, please provide copies. - Is IBM providing this solution? If not, who is? - Is it direct sourced again?? Why no market test??		02.12.10	10.02.11
223	0	Fierravanti-Wells		How much has IBM received from the Department in the past 2 years? In relation to any moneys received, has IBM undertaken any tender process? If so, please provide details. If no, why not?			
224	0	Fierravanti-Wells	YourHealth website	- Who gave the instruction for this website to be established? - When was this instruction given? - Did the former Prime Minister or his department create the yourhealth website or was Minister Roxon or her department instructed to do so? - Which department was responsible for 'populating' the website with photos and material? - What has been the total cost of this website? - What is its current usage? - Does the department monitor access to the site? - Are polls still being conducted on the site? Please provide details of contribution rates.	Written		
225	0	Fierravanti-Wells	Minister's Paris trip	- Further to evidence given at Estimates, please provide copies of any papers that the minister gave (other than the 2 page speech available on the internet). - In relation to the Programme of the Forum on the Quality of Care (OECD) on 7 October 2010, please advise: - Which session the Minister chaired – the 9.15 to 10.45 session or the 11.15 to 12.30pm session? - Which countries were represented at the forum? - What other engagements did the minister have connected with the OECD in Paris?	Written	22.11.10	25.11.10

226	0	Fierravanti-Wells	COAG health reforms	The Budget provided \$35 million over four years to expansion of the Australian Commission on Safety and Quality in Health Care to be moved from within the DoHA and established as an independent agency. What progress has been made and when it is anticipated that the agency will be established.	Written		
227	0	Fierravanti-Wells		- The Budget provided \$29.5 million for a national communications program to promote the National health and Hospitals Network. - Since the NHHN agreement signed at the COAG meeting in April this year – how far have these so-called reforms progressed?			
228	0	Fierravanti-Wells	A National Health and Hospitals Network for Australia's Future	- For each measure outlined in this book, are these timetables still applicable? - If there are any that have revised timetables and implementation dates for any measures since the publication of the yellow book, what are they? - If timeframes are the same or have been reduced for any measures, will this reduce the department's ability to properly consult with stakeholders on the details of implementation?	Written		
229	0	Fierravanti-Wells		- So called health reform seemed to drive the previous Rudd Government, but it now appears to have taken a back seat in the Gillard Government – have the Rudd health reforms stalled? - I refer to an article in the Australian Financial Review on 15 October 2010 which reports the Health Minister as saying the timing of reform could change – can you detail what timing changes are under consideration? - In the same article the Minister referred to “contingency plans” for various parts of the reforms – please detail what contingency plans are being formulated by the department?			
230	13	Fierravanti-Wells		- In relation to the Independent Hospital Pricing Authority: - has this legislation been drawn up? - when will it be presented to Parliament for consideration?			

231	0	Fierravanti-Wells	A National Health and Hospitals Network for Australia's Future	We have already seen the Government within two months of signing the health reform agreement with the states kill-off a central measure of the Rudd reforms – the national funding authority – is the government now paving the way for further unravelling of its hastily thrown together reform plan?	Written		
232	0			- A key aspect of the so-called reforms is the clawback of GST funds from the states to enable the Commonwealth to say that it will provide 60% of hospital funding – that legislation was presented to the previous Parliament, but has not been re-introduced, why is that the case? - When will the legislation be reintroduced into the Parliament to amend the GST funding agreement with states to enable the COAG health reforms to be implemented? - What are the administrative implications for the implementation of the COAG health reforms if this legislation is not passed by 1 July 2011?		Transferred to Treasury	-----
233	0			- What progress has been made in discussions with Western Australian government in reaching agreement on their participation in the COAG health reform agreement? - Is funding being provided to the Western Australia outside of the COAG agreement arrangements? If so, has this commenced yet and how is the funding being provided? - Is it the case that the government cannot proceed without agreement of the West Australian Government? If so, where then does this leave the Rudd/Gillard health reforms? - Does the Federal Government intend to penalise Western Australia which already receives far less of the GST carve up than any other states? - Will all funds flow to Western Australia as they will to other states?			

234	0	Fierravanti-Wells	A National Health and Hospitals Network for Australia's Future	• In relation to <i>The National Health and Hospitals Network – National Partnership Agreement on Improving Public Hospital Services</i>: ○ What is the status of this agreement? ○ Has this Agreement been signed off by the Commonwealth and States? ○ Have any states not signed this agreement which is to give effect to the Rudd-Gillard Government's promises to cut elective surgery waiting lists, cut emergency department waiting times and provide increased capacity in the hospital? ○ Is this agreement legally binding on the states to produce results noting the provisions of Clause 10? ○ If the agreement is not enforceable then what effect does it actually have? Does it mean that the states do not have to meet the targets supposedly agreed with the Commonwealth?	Written		
235	13			• The Rudd/Gillard reforms talked long and hard about making states unblock emergency departments and cut waiting lists. What provisions exist in the agreement to enforce performance of State obligations?	Written		
236	0			• Have any states, other than WA, indicated they are now not prepared to fulfil the National Health and Hospitals Networks agreement?	Written		

237	0	Fierravanti-Wells	A National Health and Hospitals Network for Australia's Future	- I refer to an article in <i>The Australian Financial Review</i> of 11 August 2010 regarding a confidential e-mail from Assistant Secretary Peter Broadhead to among others Deputy Secretaries Huxtable and Head regarding an assessment of Victoria's position on key elements of the so-called reforms after meeting with them. That assessment was <i>that Victoria had made it clear it would not be changing its existing hospital network legislation, nor the make up of its networks, nor the names of them and noted that Victoria did not define geographic boundaries for their networks "and won't be"</i>. In relation to this e-mail, please advise: - how does so-called reform proceed in Victoria? - Is the Department aware of the contents of the e-mail? - What is the department's view as to veracity of the contents of the e-mail? - Can the department confirm the truth or otherwise of the various assertions in the e-mail. - If Victoria will not sign up to hospital networks and not change what they've got – how does reform proceed? - Is Victoria going to alter its existing health framework to meet the health reform agreement?	Written		
238	0			Can the Department confirm that NSW has indicated it will have 18 hospital networks from its eight area health services? If not, please provide details of the Department's understanding of NSW's position on area health services. Have any other states yet indicated what they will do?			
239	0	Fierravanti-Wells	A National Health and Hospitals Network for Australia's Future	- In relation to the leaked email referred to in the AFR on 11 August, it also apparently says that Victoria considers there is an <i>"absence of detail in Commonwealth material about the reforms"</i>. Does this mean that the Commonwealth does not know and cannot explain of their so-called reforms? - In relation to the leaked e-mail, there is criticism of the Rudd-Gillard plan for Medicare Locals and I quote – <i>"it was hard to tell what the commonwealth is trying to do"</i> – Is this not another indication that the Commonwealth has no idea what it is doing? - Does the e-mail also question how Medicare Locals are to be established – are they private companies or statutory authorities?	Written		

240	0			• I refer to the dumping of the National Funding Authority – a centrepiece of the Rudd/Gillard reforms – which Kevin Rudd dumped before the ink was dry on the reform agreement saying it was unnecessary and just before he was dumped himself – does the email indicate that Victoria had put proposals to the Federal Government about how to establish the Funding Authority – and got no response – is that the case? • It would appear Victoria and probably other states are working on detail of these so-called reforms because there is no detail from the Federal Government which supposedly developed the reforms – and doesn't know that a centre-piece of the "reforms" has already been dumped. Does this not indicate that the Commonwealth is not on top of what it is doing? • Did the Victorian officials also point out that the Commonwealth's high level implementation plan (apparently referred to as the Gold Book) did not include any reference to "Lead Clinician Groups"? • Is that because the "Lead Clinician Groups" hadn't been thought of then – that yet again this was policy on the run and that idea came later? • Doesn't this leaked email show that the government and department don't know what they are doing, that from the outset this has been made up on the run and as you go? • Isn't this proof that these so-called reforms are all about a political fix for the criticism the government was under for not "fixing" hospitals by mid-2009 – and that yet again this is all spin and no substance? • Isn't it proof that this multi-billion dollar political fix has all the hallmarks of Labor's inability to deliver – that this could do to our hospital system what the pink batts did to hundreds of thousands of Australians homes?			
241	0	Fierravanti-Wells	Lead Clinician Groups	• Please confirm that this was a concept that Kevin Rudd first outlined in a speech to the AMA in Sydney on 28 May 2010. • Given that this was well after the Health and Hospitals Reform Agreement was signed, was it an afterthought?	Written		

242	0			- The agreement with the states clearly outlines that clinical expertise on Network Governing Councils should be external to the particular network. What guarantees do local doctors have that they will be eligible to be members of their local Network Governing Councils? What processes will be in place to ensure that this happens? - What is the position of the various states on local doctors sitting on local boards, noting the Rudd mantra of "federally funded – locally controlled"?			
243	1	Fierravanti-Wells		- Is the Government aware of any audits undertaken of CSL by the TGA? If so, please advise: - The dates of those audits - What deficiencies were identified during those audits - The extent of those audits – what was inspected, reviewed etc. - Did any relate to product safety issues? - Any corrective action required to remedy the deficiency - The corrective action taken to remedy the deficiency Any product recall resulting from any deficiency	Written	01.12.10	10.02.11
244	1	Fierravanti-Wells		- Is the Government aware of any audits undertaken of CSL any US authority? If so, please advise: - The dates of those audits - What deficiencies were identified during those audits - The extent of those audits – what was inspected, reviewed etc. - Did any relate to product safety issues? - Any corrective action required to remedy the deficiency - The corrective action taken to remedy the deficiency - Any product recall resulting from any deficiency	Written	02.12.10	10.02.11
245	1			Please provide copies of any audits relating to CSL undertaken since the 2007-2008 financial year.		02.12.10	10.02.11
246	1	Fierravanti-Wells	TGA	Does a product need to be approved by the TGA and listed on the Australian Register of Therapeutic Goods before it can be approved by the Prostheses and Devices Committee (PDC)?	Written	22.11.10	25.11.10

247	1			- Is the TGA aware of any devices that are or have been approved by the PDC that have not been listed on the Australian Register of Therapeutic Goods (ARTG)? - If so, what was the nature of these products? How did a PDC approve a listing without it being on the ARTG? How long have the products been on the prostheses list? What action has been taken?			
248	1			- How many audits were undertaken during the 2008-09 and 2009-2010 financial years of Australian companies or organisations? - How many of these audits were in relation to sites that produced medical or medicinal products? Please identify the companies or organisations. - Did any of the audits identify deficiencies at any of those sites? If so, how many deficiencies were identified? Please provide details including: - The name of the site - The name of the company or organisation - The nature of each deficiency - Any corrective action required to remedy the deficiency - The corrective action taken to remedy the deficiency		02.12.10	10.02.11
249	1			Further to evidence given at the Estimates hearing, please provide copies of any audit reports, investigations or other inquiries into CSL since 2008.		02.12.10	10.02.11
250	1			- In relation to audits undertaken of CSL, please advise: - The dates of those audits - The extent of those audits – what was inspected, reviewed etc. - What deficiencies were identified during TGA audits - Did any relate to product safety issues - Any corrective action required to remedy the deficiency - The corrective action taken to remedy the deficiency - Any product recall resulting from any deficiency		02.12.10	10.02.11
251	1	Fierravanti-Wells	TGA	- Is the TGA aware of any audits undertaken of CSL by any US authority? If so, please advise: - The dates of those audits - What deficiencies were identified during those audits - The extent of those audits – what was inspected, reviewed etc. - Did any relate to product safety issues? - Any corrective action required to remedy the deficiency - The corrective action taken to remedy the deficiency - Any product recall resulting from any deficiency	Written	02.12.10	10.02.11

252	1	Fierravanti-Wells	AIHW	- From the commencement of the recording of such data: - What are the pregnancy rates in IVF? - What the rates of multiple pregnancies in IVF? - What are the numbers of non-live births through IVF?	Written	24.11.10	25.11.10
253	1			What are the details of the range of data kept by the National Perinatal Statistics Unit and where can these figures can be accessed?		24.11.10	25.11.10
254	1			Where is the detailed data which provides the past the twenty years of statistics showing trends in birth rates by geographic location and place of delivery (public hospitals, private hospitals, home births)?		24.11.10	25.11.10
255	2	Fierravanti-Wells	MOU with Medicines Australia	- Could you provide the annual growth rate by year of the PBS over the past 10 years and the average over this period? - What is the future rate of growth of the PBS projected by the Department with and without the proposed reforms to the PBS? - What is the future rate of growth of the PBS by F1 and F2 formulary?	Written	03.11.10	10.02.11
256	2			- What percentage of generic medicines in Australia is supplied by pharmaceutical firms that are members of Medicines Australia? - What percentage of generic medicines is supplied by pharmaceutical firms that are members of the Generic Medicines Industry Association? - What percentage of generic medicines is supplied by other pharmaceutical firms? - What is the basis on which the department arrives at those percentage break-ups?		03.11.10	10.02.11

257	2			- Does the department rely on IMS data for its figures? - Do all pharmaceutical companies supply sales data to IMS? - Is the Department aware of which firms do not supply such data? - Is the IMS data then accurate in regard to the generic medicine market? - Does the department also rely on the Pharmaceutical benefits Pricing Authority annual report for its data? - Does the PBPA only capture those medicines that cost more than the patient co-payments of \$31.83 for general patients or \$5.40 for concessional patients?		03.11.10	10.02.11
258	2			- Can you provide the Committee with specific per cent of the market share of MA members, GMiA members and others of the PBS F2 formulary by volume and dollars? - Can you provide the source of the data and the timeframe?		03.11.10	10.02.11
259	2			Is it the case that more than 50 per cent of generic medicines cost less than the co-payment?		03.11.10	10.02.11
260	2	Fierravanti-Wells	MOU with Medicines Australia	- What assurances does the Government have that the proposed reforms will not jeopardise access to a stable supply of generic medicines? - What analysis has the Department done to assure the ongoing stability of supply of generic medicines? - Was the Generic Medicines Industry involved in the negotiations for these significant measures to provide savings on the PBS?	Written	13.12.10	10.02.11
261	3	Fierravanti-Wells	Arthritis	What is the situation regarding joint injections for arthritis – this was on the MBS and then removed – has it been re-instated?	Written	13.12.10	10.02.11
262	3			In February, Estimates hearings were told that rheumatologists had lodged an application for a new MBS item – what has been the result of that application?		13.12.10	10.02.11

263	3			- Large numbers of people are complaining about the removal of this procedure from the MBS schedule, does the government recognise that it made a mistake in doing so? - Is it intended that the procedure will be re-instated to the MBS schedule?		13.12.10	10.02.11
264	2	Fierravanti-Wells	Fifth Community Pharmacy Agreement	- The Fifth Community Pharmacy Agreement states at page 21 that “medication continuance is the supply of a standard PBS pack of chronic medicine to a patient by a community pharmacist, under specific circumstances, to facilitate patient adherence to therapy and prevent treatment interruption due to the inability to obtain a timely prescription renewal”. - What medicines will pharmacists be able to dispense without a prescription under this measure? - What conditions do they treat? - The contraceptive pill can’t be described as a chronic therapy medicine. Why is it included in this measure? - For each medicine being considered under this program, what independent clinical evidence do you have to support the proposition that the treatment can’t be interrupted and therefore warrants urgent prescription medication being dispensed by a pharmacist without prescription from a medical practitioner? - What advice have you taken from the medical profession on the clinical appropriateness of each of the proposed medicines to be covered under this program? - What work has been done to define the specific circumstances in which pharmacists will be allowed to dispense without a prescription? - What is the estimated increase in PBS expenditure that will result from this measure?	Written	03.11.10	10.02.11

265	2			• What does DOHA forecast the impact of the additional changes to the PBS reform arrangements to be over and above the projections of PWC? • How will wholesalers survive the current PBS reforms, let alone the further reforms, given the quantum of the reforms are likely to wipe out a significant percentage of their combined annual results. • If the assumption is that wholesalers will adjust their prices to pharmacy, what evidence is there that wholesalers have the capacity to do this within the constraints of a very competitive market. It seems clear that to date wholesalers have not been able to maintain their returns in the face of reducing income due to cuts in PBS prices. • What will happen to patient services if one of the three wholesalers withdraws from providing services as a result of these further reforms? • Were these issues discussed with the wholesaler before the reforms were agreed to?		01.12.10	
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266	2	Fierravanti-Wells	Life Saving Drugs	<i>Soliris</i> • In March 2009 the PBAC recommended that the government put the life Saving the government consider funding of the drug Soliris via the Life Saving Drug Program (LSDP) for treatment of Paroxysmal Nocturnal Haemoglobinuria (PNH). Has the drug been listed on the LSDP as yet? • Is it the case that on May 10 this year – one day before the Budget – the Department of Health and Ageing released new criteria for funding LSDP applications and the Budget the next day provided no new funding for the LSDP program? • Did the Minister send Soliris back to the PBAC for re-consideration and state in a Press Release on May 20 that – and I quote - “due to the uncertainty outlined by the PBAC on the effectiveness of Soliris the Government was not able to fund Soliris through the LSDP in the 2010-11 Budget. Soliris is one of the world’s most expensive drugs”? • Did the PBAC in August this year re-confirm that this drug met all of the new LSDP criteria and again recommended its funding – stating that –Soliris dramatically reduced mortality for PNH patients with unequivocal statistical significance; that there is a high certainty of a better outcome with Soliris against Basic Standard Care and a very high level of confidence in survival with Soliris is substantial; that the price proposed for Soliris in Australia is less than prices paid overseas; and that the price is less for adults than other drugs in the LDSP program? Now that the Government has had this information for more than two months does the department know when the Minister and Cabinet will make a decision to fund and provide access to this life saving medicine?	Written		
267	2	Fierravanti-Wells	Life Saving Drugs	<i>Erbix</i> Similarly, the Health Minister has had for several months a PBAC recommendation to list the cancer therapy Erbitux on the PBS – does the department know when the Minister and Cabinet will make a decision to list this vital therapy to assist patients suffering from bowel cancer?	Written	01.12.10	10.02.11

268	2	Fierravanti-Wells	Life Saving Drugs	- In relation to the drug Vidaza for acute myeloid leukemia, Mr Andrew Stewart told Senate Estimates in June that the PBAC had recommended subsidising the drug in September last year – more than a year ago - that the Government had agreed on the price it would pay for the drug in December and that essentially everyone was now waiting on the Minister and Cabinet to sign off on the listing of Vidaza – Has that happened yet? - Does the department have any idea when the Minister and Cabinet might get around to approving this critical drug? How many other vital drugs and treatments like these are awaiting this Government's sign-off?	Written		
269	3	Fierravanti-Wells	Medicare – bulk billing	- If a doctor is working at a public hospital on a salaried basis can he/she also bill Medicare for services performed while working on a paid public basis? - If such a matter were to occur would it be a breach of Federal law? - Does Medicare investigate allegations of such behaviour? - Has anyone ever been charged and/or prosecuted for such behaviour and if so what was the outcome? - How many hospitals and doctors have been investigated in 2009 and 2010 for billing Medicare while working on hospital salaried hours? - Which hospitals have been investigated? - What has been the outcome of those investigations? - Have any matters been referred to the Department of Public Prosecutions for possible legal action? - Will any matters be referred to the Department of Public Prosecutions? - What action does Medicare intend to take in these matters?	Written	12.11.10	25.11.10

270	3	Fierravanti-Wells	Medicare benefits schedule – new and revised listings (PB2, page 216)	- Revisions of existing items to include new services and the addition of new items will result in savings of \$6.8 million over five years. - Under a 2009-10 Budget measure the Department is developing the MBS Quality Framework for evaluating and reviewing MBS services. The Department has released discussion papers on how the framework arrangements could work, and taken submissions, but the framework has not been finalised. In the meantime, services are being reviewed under the framework and applications are being taken, but the Department has not convened any of the advisory committees. There is very little information available about the services being assessed under the framework and consultation with stakeholders has been limited to making submissions to discussion papers. - Is this framework in place? - Have the advisory committees been appointed, and if so has the membership been announced? - How many applications have been made to it and what services are they for? - Where are those applications up to in the process? - Will you be making details of the progress of applications publicly available? If so, when?	Written	12.11.10	25.11.10
271	3	Fierravanti-Wells	Pathology	- What has been the average annual growth rate in pathology Medicare services and benefits? - How many collection centres were there prior to 1 July 2010? - How many additional collection centres have been <u>approved</u> since 1 July 2010? - Is the Department aware of any information or advice that the growth in collection centres will lead to higher than average growth in pathology expenditure and services? - What is the cause attributed to this higher than average predicted growth? - Does the Department or Medicare collect or have access to information on rental costs and space rented by collection centres? If so, what is the average cost per square metre prior to 1 July 2010? What is the average cost per square metre after 1 July 2010.	Written	22.11.10	25.11.10

272	4	Fierravanti-Wells	Reviews	- Please indicate all reviews currently regarding ageing, aged care and population ageing. - In relation to each, please outline: - The status of each report - Is it intended that the report be released and if so when? - If it is not intended that the report is released, why not?	Written		
273	4	Fierravanti-Wells	ACAR Rounds	- Further to evidence at the Estimates hearing regarding the "big and complex" ACAR round, please advise: - Number of applicants for both residential and community care - Location of applicant - any licences that have been handed back and where they are located - Details regarding the complexity	Written		
274	4			- Please provide details of all allocated bed licences including statistics on the allocated licences that are not operational, including: - Where the allocated, non-operational licences are located - How long have they been non-operational - Reasons for their non-operational status - Details of off-line beds and reasons for same			
275	4			Since 2007, given the timing of the ACAR rounds, has this Government missed an ACAR round? Please provide a consolidation of the timings of each round since 2007.			
276	4			Given the growing demand for community packages, should consideration be given to a "waiting list" for providers seeking to access packages in areas of high need.			
277	4			Is the department aware of any reports of providers charging residents extra fees in anticipation of the announcement of the ACAR round? If so, have any complaints been received and what action has been taken in relation to the same.			

278	4	Fierravanti-Wells	Annual Stocktake Aged Care Places	- Has the department completed the annual stocktake of the industry as at 30 June 2010? If so please provide a complete set of the information flowing from the stocktake? - Does the stocktake show the average number of occupied beds across the industry? If so, please provide this data by national state-territory and region including the trend data for the past five years? - Does the stocktake show the number of places approved but not yet on line? If so please provide this data on a national state-territory and regional basis by allocated service type? - Does the stocktake drill down into the assessed category of each resident? If not, please advise where this information is available?	Written	13.12.10	10.02.11
288	4			Can the ACFI funding tool produce a minimum data set that supports an analysis of the aged care population? If so, please provide a list of the data set available.			
289	4			Is the department able to provide data as to the number of people in care who have an assessment of depression, dementia, psychosis, Alzheimer's or other mental health or cognitive impairment diagnosis? If not how and where can this type of data be obtained?		13.12.10	10.02.11
290	4	Fierravanti-Wells	Aged Care Workforce	- In relation to each of the new programs referred to at p. 165 of the Portfolio Budget Statement, namely: - The Aged Care Education and Training Incentives program - The Building Nurses Career Program; and - The Aged Care Nurse Practitioner Program Please advise: - Is any or all of the money for such programs "new" money or recycled from the dumping of other programs such as Bringing the Nurses Back Program - How many people have been recruited, retained, engaged or otherwise engaged under each program? - are the programs on track to meet the deliverables outlined in the PBS?	Written		

291	4			• In relation to Teaching Nursing Homes, please advise: - o What is the criteria for establishing the same? - o Where is that criteria located? Please provide a copy. - o Have any homes been identified and what was the process and criteria used to do that? - o How many teaching nursing homes are intended to be established? • What process of consultation will be undertaken with the sector in relation to the same?		13.12.10	10.02.11
292	4	Fierravanti-Wells	Day Therapy Centres	• In relation to the Day Therapy Centres, please provide details including: - o Where they are located; - o The program pursuant to which they are funded; - o How are they funded - o Does the Government intend to cease funding of the centres and if so, when will that occur? - o The contractual obligations of the recipients Any statistical information available regarding the users of the centres.	Written		
293	4	Fierravanti-Wells	Culturally appropriate Aged Care	• In relation to one of the only two election commitments of the Labor Government's regarding "improving translation services for Australians in aged care". In relation to this announcement, please advise: - o The provisions and programs dealing with translation services in aged care before the announcement - o The number of people accessing translation services - o The languages accessed as part of the translation process - o Any specific requirements on aged care providers in relation to translation and language services currently and additionally as a consequence of the new program - o When did the Government first become aware of the deficiencies in its existing programs - o Is it intended that the program be implemented at all aged care homes. If not, at which homes will the program be implemented and how have these homes been chosen? - o What staff training is proposed as part of this program? - o Will the Commonwealth fund the training or will providers have further obligations imposed on them. If so, will providers be responsible for the costs of additional training	Written	13.12.10	10.02.11

294	4			• Please provide details, if available, of the number of people accessing residential or community aged care from a culturally and linguistically diverse backgrounds. • In relation to the Partners in Culturally Appropriate Care, please advise: - o The process and criteria for obtaining a grant; - o The current list of organisations, persons or services that have been allocated grants - o When those grants lapse - o Recipients of grants since 2007 • The accountability processes associated with the grants including reporting obligations.			
295	4	Fierravanti-Wells	Indigenous Aged Care	• In relation to the Indigenous Aged Care Plan, please advise: - o The progress of the Quality Framework for the National Aboriginal and Torres Strait Islander Flexible Aged Care program; - o When will the Framework be released - o Outline how aged care services will be more flexible Outline how the parameters under which providers of flexible aged care services differ from other providers.	Written	13.12.10	10.02.11
296	4	Fierravanti-Wells	Dementia	• In relation to the Dementia Community Support Grants program, please advise: - o The process and criteria for obtaining a grant; - o The current list of organisations, persons or services that have been allocated grants - o When those grants lapse - o Recipients of grants since 2007 - o The accountability processes associated with the grants including reporting obligations.	Written	13.12.10	10.02.11
297	4			• In relation to the National Dementia Support Program, please advise: - o What organisations were considered as providers of this program and in particular, the National Dementia Helpline? - o What criteria was used to evaluate the provider of the program? Where is that criteria located? Please provide a copy. • When does the funding agreement with Alzheimer's Australia expire?			

298	4	Fierravanti-Wells	Transition Care	- In relation to transition care places, please advise: - The current number of operational places - Where are they located - Where will the additional transition places referred to at p. 196 of the PBS be located What is the criteria for allocation of places? Where is it located. Please provide a copy.	Written	13.12.10	10.02.11
299	4	Fierravanti-Wells	Zero Interest Loans	- Please provide a consolidated list of all applications for zero interest loans, including demographic details. - In relation to the program, please provide details of the loans including: - Loans that have been paid out - Loan applications under consideration - Loan application refused and the basis of such refusal - Loan approved but subsequently not proceeded with by the provider In relation to each of these 3 categories, advise: - the number of places covered - the location of the places proposed	Written	13.12.10	10.02.11
300	4			- What was the criteria for consideration of each of the rounds for the zero interest loans? Please provide copies of the same. - What was the basis for any changes to the criteria from Round 1 to subsequent rounds?		13.12.10	10.02.11
301	4	Fierravanti-Wells	Special Needs Category	- Further to questions at Senate Estimates, please provide a list of the current special needs group and the date when each category was added to the group. - Outline the obligations on providers in relation to special needs groups including notification of change of requirements on providers in relation to the addition of each of the categories to the group. Are there any specific and additional requirements imposed on providers in relation to special needs aged care recipients that are not required for other aged care recipients?	Written	13.12.10	10.02.11

302	4	Fierravanti-Wells	Complaints Investigation Scheme	- The budget allocated approximately \$50 million over four years in response to the Walton Report on the CIS. Has any progress been made on implementing the reforms recommended by Professor Walton? - How many staff are now employed by the CIS? - How many investigators are employed? - What is the budget of the CIS? - Can the CIS demonstrate any systemic improvement in quality outcomes in the aged care program? In the October 2009 Review of the Aged Care Complaints Scheme, the reviewer recommended that the government establish a new Aged care Complaints Commission as a separate statutory authority. Does the Government intend implementing this measure and if so, when?	Written		
303	5	Fierravanti-Wells	GP Super Clinics	Note: I acknowledge receipt of answer E10-079 and the GP Super Clinic Table. In so far as the table does not provide the information sought in the following questions, I would appreciate the department's answers. <i>General</i> - The 2010-11 Budget provided an additional \$355 million for another 23 GP Super Clinics and for grants to existing general practice to expand their operations. - The “GP Super Clinic Program” has now been in operation for three years – how many clinics are fully operational and how many are partially operational? - What is the progress of each of the previously announced GP super clinics? - What is the progress of each of the extra GP super clinics announced in the budget and in the election context? - What criteria were used to determine the location of the GP super clinics announced in the Budget and during the election? - How were these locations determined?	Written		

304	5			- The professed aims of these clinics as outlined in Labor's "<i>Delivering GP Super Clinics to local communities</i>" were to – - Be established in areas of need - Particularly in rural and regional Australia - Attract health professionals to areas of workforce shortage - Help take pressure off hospitals - Provide a greater focus for tackling chronic disease - Additionally the <i>GP Super Clinics National Program Guide</i> states the clinics will - Boost the capacity of primary health care services - Be 'strongly' encouraged to bulk bill - Complement and enhance the range of existing health services - Across the entire planned roll-out of these GP Super Clinics – now totalling 59 - how many are located in designated Districts of Workforce Shortage? - How many additional health professionals have been attracted/recruited to areas of workforce shortage? - What criteria were used to decide the locations of all these clinics and who made the decisions on the locations?		07.12.10	10.02.11
305	5	Fierravanti-Wells	GP Super Clinics: Rural and Regional	- How many clinics are located in rural communities? - How many are located in regional cities? - How many are located in metropolitan areas?	Written	02.12.10	10.02.11
306	5	Fierravanti-Wells	GP Super Clinics: Pressure on Hospitals	- What pressure has been taken off hospitals? - Given that a <u>stated objective</u> of these clinics was to <u>relieve pressure on public hospitals</u>, what impact have these clinics had on presentations at public hospital emergency departments? - Does the Department have a means of measuring or monitoring their impact on supposedly relieving pressure on hospital emergency departments? - First Asst Sec Megan Morris told Estimates hearings on 4 June 2009 – "There will be an evaluation of the GP Super Clinics Program and we will be working together with state and territory governments on that." Does the Department intend to provide an evaluation of this clinic program – if so how and when?	Written		

307	5	Fierravanti-Wells	GP Super Clinics: Focus on chronic disease	• What impact have these clinics had on the burden of chronic disease in the Australian community? • How does the Department measure the impact these clinics have on tackling chronic disease?	Written		
308	5	Fierravanti-Wells	GP Super Clinics: Boost capacity of primary care	What statistical information does the Department have to show that primary healthcare has boosted by these clinics?	Written		
309	5	Fierravanti-Wells	GP Super Clinics: Bulk Billing	• How many of these clinics bulk bill for all services? • How many bulk bill for some services and what are those services and patient segments? • Is this considered a strong outcome from “strong encouragement” to bulk bill? • How many services have been billed to Medicare at each super clinic? • How many of the super clinics bulk bill concession cardholders and children under the age of sixteen years? • Do any of the super clinics bulk bill for all patients? If so, which locations? • Do any of the contracts provide an obligation to bulk bill?	Written		
310	5	Fierravanti-Wells	GP Super Clinics: Extended Services	• How many offer after-hours services – detail the clinics, their opening times and services offered? • How many offer weekend services – detail the clinics and their opening times and services offered? • How many offer round-the-clock services? • How many provide dental services? • How many provide renal and cancer services?	Written		

311	5	Fierravanti-Wells	GP Super Clinics: Complement and enhance existing services	What consultation, if any, is undertaken with affected medical practices and patients before approving a super clinic?	Written		
312	5			What response does the department have that the affected medical practices were not consulted before a GP Super Clinic was announced for Townsville, Queensland?		02.12.10	10.02.11
313	5			- What plans are there for further industry consultation? - Will you invite submissions from affected medical practices and other key stakeholders in the local communities? - Are these clinics providing only complementary services or are they competing with existing general practices?		02.12.10	10.02.11
314	5			Given that the former Parliamentary Secretary to the Minister for Health and Ageing Senator McLucas told Estimates hearings that and I quote – <i>“there will not be impact on existing services, that is a given. The last thing you would want to do through any program is jeopardise existing programs that are there. The GP super clinics are designed to complement existing services, not compete with them. That is a fundamental of the program”</i> and at the same hearing Department Deputy Secretary Philip Davies said and I quote – <i>“One of the criteria that we will be looking at in the evaluation (of clinic proposals) is precisely the impact on existing providers”</i> - Is the Department concerned about the rising volume of concern from doctors providing services to communities where the government funded GP clinics are opening that they are damaging existing general practices?		02.12.10	10.02.11

315	5			- One of the first clinics to open was at Strathpine - What response does the department have to the complaints of Dr Morris Williams of the Strathpine Seven-Day Medical Centre – which is near the new super clinic – that it does not provide services that were not already provided? - What response does the department have to Dr Morris’s claim that his patient numbers have halved since the super clinic arrived? - What response does the department have to Dr William Rath of the Brendale Medical Centre, also near the new super clinic, whose assessment is the super clinic received “<i>special dispensation</i>” to employ Overseas Trained Doctors and says – and I quote – “<i>It’s just not fair. They are giving them \$2.5 million to do exactly what we are doing and it is an unfair advantage. I have been here for 22 years and it is not fair when you have to buy everything.</i>” - How does the stated aims of the super clinic program to complement and enhance existing services equate to the Health Minister’s response to these doctor’s criticisms that they “<i>should become more competitive</i>”?			
316	5	Fierravanti-Wells	GP Super Clinics: Complement and enhance existing services	What response does the Department have to the North East Division of General Practice in Adelaide which says there are “<i>double standards</i>” and an “<i>unfair playing field</i>” in regard to the Commonwealth and State Government funded Modbury Super Clinic?	Written	07.12.10	10.02.11
317	5			- Why has one Perth general practice registered the name “super clinic” to protect itself from a government funded clinic at Midland? - If this clinic is not going to compete with existing practices why would Dr Don Prendergast accuse the government of a “<i>scandalous misuse of taxpayer funds</i>” and I quote – “<i>Whoever heard of a government giving someone \$10 million which they don’t have to repay, to set up another small business just like ours, We’re going to take an enormous hit when it’s built</i>”.		02.12.10	10.02.11

318	5			- Will a planned super clinic in Mackay compete with a clinic under development from the private sector? - Given that super clinics are to have community support how does that requirement equate with the comments of David Farlow spokesman for the Mackay Medical Staff Association who says – and I quote – “<i>We are against this new government super clinic because one is already being developed by a local doctor and there is no reason to have two in the town. It would be better for the government to consult with the local doctors and the community and reallocate the money to ensure we retain the specialists’ services.</i>”?		02.12.10	10.02.11
319	5	Fierravanti-Wells	GP Super Clinics: Preferential Treatment	Apart from the infrastructure funding and some recurrent funding given to these clinics, what other preferential treatment is available to them?	Written	02.12.10	10.02.11
320	5			- How many General Practitioners or GP Super Clinics have claimed or received incentives to relocate to GP Super Clinics – and to what clinics did they re-locate? - How much has been paid in incentives as a total figure and as individual amounts per clinic?		02.12.10	10.02.11
321	5			- How many Overseas Trained Doctors are working in GP Super Clinics and at which clinics are they practicing? - How many existing or future GP Super Clinics have applied for exemptions under the section 19AB of the Health Insurance Act to employ Overseas Trained Doctors? - How many exemptions have been granted – and at which GP Super Clinics? - How many are currently being given consideration – and for which GP Super Clinics? - How many have been rejected – and which GP Super Clinics did these rejected exemptions apply to? - What special circumstances have applied for exemptions to be granted and at what GP Super Clinics?		23.11.10	25.11.10

322	5	Fierravanti-Wells	GP Super Clinics: Strathpine	• Answers from the last estimates hearing indicate that three Overseas Trained Doctors have exemptions to work at the Strathpine GP Super Clinic and that other practices in Strathpine have been granted approval to employ OTDs. - o What are the five GP practices in Strathpine that have been granted exemptions to employ OTDs? - o Identify by name and location? - o How many practices in Strathpine have had applications to employ an OTD rejected – name and identify locations of these practices? - o Is it correct that the Strathpine Clinic opened on January 29 this year? - o How many patients were treated at the Strathpine clinic within its first month of operation? - o As of February 25 this year was there three Overseas Trained Doctors working at the Strathpine Clinic? - o On what date was the first Overseas Trained Doctor employed at the Strathpine Clinic? - o On what dates were subsequent Overseas Trained Doctors employed? - o On what date did the Strathpine Clinic apply for exemptions under the Health Insurance Act to employ Overseas Trained Doctors? - o On what date was the exemption granted by the Department? - o The Strathpine Clinic was granted special exemptions to employ Overseas Trained Doctors even though it was not in a District of Workforce Shortage because it said a substantial proportion of its patients would be indigenous, from lower socio-economic groups or were drawn from locations that have a DWS classification – how many of the patients treated at this clinic are indigenous Australians, from lower socio-economic groups or are drawn from Districts of Workforce Shortage? - o If unable to provide figures how then does the department know that a “substantial proportion” of patients are indigenous, from a lower socio-economic group or were from a District of Workforce Shortage? - o (Depending on the dates provided) – How was it known within a month of this clinic opening that a “substantial proportion” of patients would be indigenous, from a lower socio-economic group or from a District of Workforce Shortage?	Written		
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323	5	Fierravanti-Wells	GP Super Clinics: Modbury	• At what stage of development is the Modbury GP Super Clinic in Adelaide? • Is this clinic being developed in conjunction with the South Australian Government via South Australia Health? • Is it the case that this clinic will not be opened until Late 2011? • What staff has been employed by this clinic to be operated by South Australian Health? • When is it expected the clinic will recruit staff? • Is it the case that the Department received and approved an application from this clinic to appoint Overseas Trained Doctors on the grounds that it was a District of Workforce Shortage? • Did the Department subsequently withdraw this approval and why did it do so? • Why would this clinic, located in metropolitan Adelaide seek this status and why did the Department approve it?	Written		
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324	5	Fierravanti-Wells	GP Super Clinics: Palmerston	• What is the department's response to the report on 14 October in NT News (p.2) that the Dwyer Medical Centre, a bulk billing medical center in Palmerston (NT) intends to close because it can't compete with the Government's new GP Superclinic which is located very close to this existing service and that the owner of another clinic says it may be in jeopardy because of the Super Clinics presence? • Also under this budget measure, the Government announced funding for approximately 425 grants to expand existing GP practices; and primary care services? - o What progress has been made in implementing this grant funding? - o How many applications have been received in total for this grant funding? - o Of these, how many applications were received from (i) GP practices (ii) primary care services (iii) community health services (iv) Indigenous medical services? - o What proportion of the grant applications were received from rural and remote areas? - o When will the successful grant recipients be announced? - o Will additional funding be available if there are more than 425 worthy grant applications?	Written		
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325	5	Fierravanti-Wells	GP Super Clinics: Diabetes - General practice and primary care	• Has the department had discussions on the implementation of this measure and concerns about this measure with GP stakeholder groups? If yes, who and when? • Has the department convened an advisory group of external stakeholders to advise on the implementation of this measure? If so: - o Who is on the advisory group? - o Are the individuals on the advisory group there are individual advisors or representing specific organizations? If specific organizations, list them? - o Has this group met yet? If yes, when? If yes, what issues were discussed and what concerns were raised? • We understand that the AMA is not participating in the advisory group. If so, how can the department guarantee that it has adequately consulted the profession? • What proposals have been discussed to mitigate against the concerns that stakeholder groups have been raising publicly and with the department about this measure? • Is this program on track to be implemented from the announced start date? • Will patients who are enrolled under this program still have access to Medicare rebates? If yes, for what services? • Will patients with diabetes who aren't enrolled under this program get access to additional allied health services to assist in the treatment of their diabetes? If not, why not? • Will the higher costs of delivering multidisciplinary care in areas such as rural Australia be recognized through some sort of rural loading built into the funding arrangements? • Has any modeling been done or advice provided to government on the extension of this program to patients with chronic diseases other than diabetes?	Written		
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326	6	Fierravanti-Wells	New geographic classification system	• What was the rationale behind the move from the older Rural, Remote and Metropolitan Areas (RRMA) classification to the Australian Standard Geographical Classification (ASGC). • What locations that have been reclassified now receive a lower level of funding than under previous classification system? • What has been the general response to the implementation of the ASGC and revised rural health program arrangements from 1 July 2010? • What specific concerns have been raised about these new arrangements and from what locations in Australia? • What is the overall impact of these changes on program expenditure and on the amount claimed to date (compared with the same time last year) since the changes were introduced? • What refinements, if any, is the department modelling or considering? • How is the department intending to evaluate the new arrangements?	Written		
327	10	Fierravanti-Wells	Albury-Wodonga Cancer Centre	• What needs criteria is applied by DoHA to determine which rural areas receive funding for cancer treatment services? • As suggested by the Minister, has DoHA reviewed Albury-Wodonga's need for cancer services as promised? If a cancer treatment centre is warranted, through what funding source, and when, will the centre be established? • Has the Minister sought DoHA briefings from her department on cancer services option for Albury-Wodonga as promised in a media report (The Border Mail, 9 April 2010) and if so what are the outcomes of those briefings?	Written	30.11.10	

328	6	Fierravanti-Wells	Rural Health	- Can you provide the staffing structure and names of the Rural Health division of DOHA, including any changes that have been made since the agreement between the Prime Minister and various independents? - Can DOHA provide a list of rural health organisations that it funds and their contact details? - Can this list include competitive grant round recipients, the subject of funding, their funding timelines and the current disbursement status? - Which organisations have had funding (triennial or otherwise) reduced, suspended or terminated. - Provide a list of all announced, opened, closed competitive grant rounds since 1 January 2008 and note any where delays exist and reasons for those delays.	Written		
329	7	Fierravanti-Wells	Hearing Services	- Further to evidence given at estimates, please specify the announcement date for the new threshold and the commencement date for its operation. - From the date of the announcement and the date of implementation, what was the increase in claims figures?	Written	30.11.10	
330	8	Fierravanti-Wells	Indigenous Health	What is the staffing structure and names of the OATSIH division of DOHA?	Written	18.11.10	25.11.10
331	8			- List all Indigenous (ATSI) organisations which are the beneficiaries of OATSIH funding and contact details including: - competitive grant round recipients - the subject of funding - their funding timelines and - the current disbursement status.		23.11.10	25.11.10
332	8			Provide a list of all organisations which have had funding (triennial or otherwise) reduced, suspended or terminated.		23.11.10	25.11.10
333	8			Provide a list of all announced, opened, closed competitive grant rounds since Jan 1, 2008 and note any where delays exist and reasons for those delays.		06.12.10	10.02.11
334	9	Fierravanti-Wells	Private Health	Has the Department drawn up drawn up measures to end rebates?	Written		

335	10	Fierravanti-Wells	E-Health	- I refer to the Budget allocation of \$446.7 million over two years to establish the key components of the personally controlled electronic health record. In relation to the funding allocated to three primary care-led PCEHR pilot programs in Queensland, New South Wales and Victoria (around \$12.5m over two years), please advise: - Has any of the money been allocated yet? - NeHTA has let a tender for the National Authentication Service for Health – is this what some of these funds will be used for? If so, how much of it will go to this project? - Do you have criteria for funding other projects? - What process are you running to allocate funding to other projects? <i>How will the three projects that have already been funded progress to a personally controlled health record?</i>	Written		
336	11	Fierravanti-Wells	Better Access	- What is the status of negotiations with representative organisations of therapists and social workers regarding this Budget funding cut? - Does the Government intend to publish the review of the Better Access program that is due for completion this year? - When will it be publicly available?	Written	30.11.10	
337	11	Fierravanti-Wells	Suicide Prevention	- The Prime Minister promised to spend \$276 million over the next four years for suicide prevention measures – what work has been done to implement this election commitment? - What action has been taken to boost frontline services as promised by the Prime Minister? - Providing more psychological services under this commitment has been left to Medicare Locals – given that these organisations do not yet exist and are unlikely to be operational for some considerable time – what action is being taken to deliver this commitment? - Experts – among them the former head of Prime Minister Rudd’s mental health advisory council, Professor John Mendoza, who quit because of the Rudd-Gillard Government’s inaction on mental health – have called for development of a National Suicide Prevention Plan – has the department been asked to work on a national plan?	Written		

338	11	Fierravanti-Wells	Headspace	• The Budget provided for funding of \$78 million over four years for an additional 30 headspace sites across Australia – 10 of those to be provided by mid 2011 – what progress has been made on providing these services at the locations identified in July? • When and where is the first of these additional facilities expected to be open and operational? • Is there a timetable for the delivery of these additional headspace sites over the next 8 months? • How much funding annually is made available to existing headspace sites? • How much funding annually will be made available to the new sites? • How much core funding is available to the headspace organisation?	Written		
339	11	Fierravanti-Wells	Early Psychosis Prevention and Intervention Centres (EPPIC)	• The Budget provided \$25.5 million over four years to establish additional Early Psychosis Prevention and Intervention Centres – how many additional EPPIC centres will this funding provide? • Where will these centres be located? • When is the first of these additional EPPIC centres expected to be open and operational? • Is there a timeline for delivery of each of these additional facilities? • How much federal funding will be available to each of these centres and how much state funding will be available to each centre? • How many acute and sub-acute beds will each centre have?	Written		

340	12	Fierravanti-Wells	Mental Health Nurse Incentive Program	- The Budget provided \$13 million over two years for the Mental Health Nurse Incentive Program - How many additional mental health nurses have been engaged to date under this measure? - Is there a target for the number of additional nurses this measure will provide? - How many additional nurses are expected to have been engaged by end June 2011? - How many additional nurses are expected in total to be engaged over the two year period to end June 2012?	Written	22.11.10	25.11.10
341	11	Fierravanti-Wells	Youth Services	- The Government has promised to deliver 30 new <i>headspace</i> sites. Can you provide details of where these sites will be located? - How many will be situated in outer metropolitan areas? How many in rural and regional Australia? - How many of these new <i>headspace</i> centres will be specifically created to address young Indigenous people needing mental health services? - What is the timetable for the completion of these 30 centres – when will young people desperately in need of early intervention and diagnosis be able to start using these services? - Can you provide a breakdown of costs associated with each new headspace centre as I'm sure they will differ depending on location and demand? - How many new <i>headspace</i> centres will be servicing young Australians by 2013 ... just how many years are young people in need going to wait for you to fulfil your election promises? - The Government claims up to 20,000 young people will access these new services- can you tell the Committee what the demand is among young Australians for mental health services? - Does the Government believe Professor Pat McGorry is wrong when he says we need a total of 90 to 100 headspaces centres to meet demand?	Written		

342	11	Fierravanti-Wells	Mental Health as Priority	- During the election campaign, the Prime Minister stated “I want to be absolutely clear – mental health will be a second term priority for this Government”. (‘Moving forward to a better health system,’ Brisbane, 27th July 2010). - What are the core goals for mental health that the Government plans to accomplish during its second term? - Will a Prime Ministerial mental health taskforce be established as called for by leading mental health experts? - Does the Government intend to provide further investment in mental health to increase its share of the health budget from the current low level of 6%? - During the same speech, the Prime Minister stated that “illness of the mind is as debilitating as illness of the heart, the lungs or the bones and no less important or deserving of our understanding and care.” - How will the Government ensure that Australians will enjoy the same access to quality care for mental ill-health as for physical ill-health? - How will this be accomplished? Over what timeframe?	Written	30.11.10	
343	11			- During the election campaign, the ALP released a mental health factsheet that stated “Labor will move towards providing greater funding and policy leadership for community mental health services over time. (Mental health: taking action to tackle suicide, ALP 27th July 2010). - What scale of funding increase is envisioned? - What timeframe is envisioned for achieving these goals? - Under the heading “Foundations for long term mental health reform” the same document also stated: “As part our investments in the National Health and Hospitals Network, the Labor Government is investing \$1.6 billion in providing 1300 sub-acute beds around the country which will help to provide more mental health beds. - How many of these beds are mental health beds? - When will these beds be available?			

344	11	Fierravanti-Wells	Youth mental health	- During the election campaign, the Prime Minister stated “in particular, the Government recognises that better youth mental health services is an area where further investment is needed – and that our existing network of services will need to be scaled up over time.” (‘Moving forward to a better health system,’ Brisbane, 27th July 2010). - Does the Government anticipate significantly increasing its levels of investment in headspace - for young Australians with mild to moderate mental ill-health and Early Psychosis Prevention and Intervention Centres (EPPICs) for young Australians with serious mental illness? - Does the Government have a target for when all Australian communities can provide their young people with access to the kind of evidence based youth mental health care represented by headspace and EPPIC?	Written		
345	11			In evidence to the Senate Community Affairs Committee on 3rd June 2010, officials from DoHA stated that the goal for the Government’s \$25.5m over 4 years commitment to EPPIC (early psychosis services) was to partner with States & Territories in order to establish 4 new EPPIC centres that will provide additional support to up to 3500 young people over 4 years. These figures would appear to translate to an Australian Government contribution of roughly \$1.5m per EPPIC centre. Is this correct?		30.11.10	
346	11			- Currently, Australia’s only existing EPPIC centre is at Orygen Youth Health, which operates with an annual clinical services budget of approximately \$14.5m. Is it the Government’s intention to create 4 EPPIC centres of similar scale, or to create 4 centres of much smaller scale, that lack some of the features of the EPPIC centre in Melbourne? - If the Government intends to create 4 full scale EPPIC centres, what level of State & Territory government co-funding is it seeking for each centre? - If the Government intends to establish 4 smaller scale centres, what elements of the EPPIC program in Melbourne will not be available in the new centres?		30.11.10	
347	11	Fierravanti-Wells	Youth mental health	How can the level of funds provided possibly provide care within the EPPIC model for the 3,500 young Australians who are expected to benefit from the new centres? What services can these young Australians expect to receive?	Written	30.11.10	

348	11			• In the last budget, the Government announced \$78.8m of additional funding for headspace, to both increase funds to existing headspace sites, and establish up to 30 new headspace centres. Have additional funds been provided to existing headspace sites? If so, how much? If not, why not? • What are the current waiting lists at headspace sites? • Is it anticipated that this increase in per-site funding will be sufficient to address staffing shortfalls, waiting lists and service constraints that have emerged in many headspace centres? • 10 new headspace centres were announced on 23rd July. How were these sites selected? When will these new sites open? What selection criteria will be used for the next round of new sites?			
349	11	Fierravanti-Wells	Advice, Governance & Evaluation of Reform	• On 18th June 2010, John Mendoza resigned as Chair of the National Advisory Council on Mental Health, stating that the “Council is seriously compromised in its stated mandate to provide timely, independent advice to the Government.” What is the Government's response to prof. Mendoza's criticism?	Written	30.11.10	
350	11			• During the election campaign, the Prime Minister stated that “making progress in preventing suicide and improving mental health will not just take investment, but it will also take reform” and that “reforms will be pursued constructively and cooperatively – in close consultation with experts in the mental health sector” and would involve “parents and school teachers, doctors and nurses, and carers and, most importantly, those who live with mental illness” (‘Moving forward to a better health system,’ Brisbane, 27th July 2010). - o Is it the Government’s intention to reconfirm the establishment of the National Advisory Council on Mental Health for its second term? - o If so, what measures will be taken to address the concerns raised in John Mendoza’s resignation? - o Will there be any changes in composition, role or operations of the Council? - o if not, what if any alternative structure does the Government envision to replace NACMH to fulfill the Prime Minister’s commitment. - o How will its composition be determined? - o What will be its role and resources?		30.11.10	

351	11			Given the complex and interdepartmental nature of mental health, what will be the ongoing level of engagement of the Prime Minister and relevant Cabinet Ministers in the reform process?		30.11.10	
352	11			- During the election campaign the Government committed \$9m over three years for better reporting measures. This investment is to establish an annual report card on mental health and suicide prevention and consistent reporting by Medicare Locals and Local Hospital Networks of mental health service performance and outcomes for consumers. - What are the core performance measures that these new initiatives will track? - How will reporting of these measures link to performance targets and performance management at a local and national level?		30.11.10	
353	12	Fierravanti-Wells	Support for practice nurses	- Has the department done any further financial modelling to assess the impact of these changes on general practices and what did this modelling show, particularly in terms of the impact on general practices that currently employ one or more practice nurses? - Could some general practices be worse off under these changes? If so, what type of practices and what kinds of locations would this apply to? What does the Government's modelling show in this regard. - Has the Department consulted with stakeholders on this budget measure? If yes, who and when? - What consultation processes does the Department intend to undertake to ensure that this measure does not disadvantage general practices?	Written	23.11.10	25.11.10
354	12			Has the department done any work on the implications of grandfathering those existing practices which would be better off the under current practice nurse funding arrangements than the new funding arrangements? If yes, what options are available? What are the implications? Have these options been discussed with stakeholders?		23.11.10	25.11.10

355	12			Given that the Government's scheme is capped at 5 grants, what modeling has the department done to explore what the impact of the Government's changes will be on mid to large size general practices? Why was a cap of 5 grants per practice chosen when the government is trying to encourage the establishment of larger multidisciplinary practices?		23.11.10	25.11.10
356	12			With the elimination of the relevant MBS fee for service items for practice nurse services, what information does the Department have on the effect of the Government's changes on total practice incomes and on individual GP incomes (given that all funding will now be directed to the practice)?		23.11.10	25.11.10
357	12	Fierravanti-Wells	Workforce — nurse practitioners	This measure provides \$18.7m. - What consultation has the Department undertaken with stakeholders on the implementation of this measure? Who and when? - What concerns have been raised by stakeholders in these consultations? - How will the projects funded under this measure be evaluated? - Will the requirements under new Nurse Practitioner (NP) legislation (which stipulates that nurse practitioners will have access to Medicare and the PBS only when they have a collaborative arrangement with a doctor in place) be imposed on all nurse practitioners involved in projects funded through this measure? - What other requirements will be put in place to ensure that the nursing home residents' doctors (including their general practitioner) will be kept informed of the care and health status of their patients by nurse practitioners? - Are nurse practitioners required under national registration to undertake continuous professional development? Are CPD courses available in Australia at this time for nurse practitioners? If not, what steps will the Department be taking to ensure that nurse practitioners employed under these projects have ongoing professional development? - How many nurse practitioners are currently registered and therefore potentially available to provide services under this program across Australia at this time? Of these, how many are qualified in specific fields of practice relevant to the care of aged care patients? - Is this measure on track to commence within the announced timeframes?	Written		

358	5	Fierravanti-Wells	Practice Nurses in General Practice	- According to media reports (<i>Australian</i>, 7 October 2010), the change was not recommended by the Primary Health Advisory Council. - Was the decision to the abolish Medicare rebates for treatments by practice nurses based on improving primary healthcare delivery or budgetary concerns? - What advice led to the decision to move away from the current proven model for practice nurses?	Written	23.11.10	25.11.10
359	5			- According to media reports (<i>Australian</i>, 7 October 2010), there is considerable concern amongst general practice as to the viability and effectiveness of the new system. - Is there any proof that these cost-cutting measures will not exacerbate pressure on general practice? - Is there evidence that the national doctor shortage and workload of GPs will be addressed under this new model? - Will some general practices be worse off under the new system? - What modelling has the Department done to explore the impact of the Government's changes on the uptake of practice nurses by general practices?		23.11.10	25.11.10
360	12	Fierravanti-Wells	Specialist Training Program	- For the 2011 placements, how many will be in public hospitals, private hospitals, and other settings? - How many of the additional new placements were awarded to public hospitals, private hospitals and other settings? - Could we get the above information by state?	Written	22.11.10	25.11.10
361	3	Fierravanti-Wells	Professional Services Review	- How many <u>health professionals</u> were investigated last financial year? - How many <u>medical practitioners</u> were investigated in the last financial year?	Written	22.11.10	25.11.10

362	3			- In what proportion of cases involving medical practitioners was there an adverse finding or breach? - How does this compare to historical trends? - What are the main issues leading to an adverse finding? - What avenues of appeal are available to health professionals and what proportion successfully appeal an adverse finding of the PSR? - What process is available to health professionals for interpretation of the MBS and is definitive written advice provided to health professionals experiencing difficulty interpreting an aspect of the MBS?		22.11.10	25.11.10
363	12	Fierravanti-Wells	National Registration and Accreditation	- How many health professionals have been prevented from practicing as a result of delays in processing applications or renewals for registration since 1 July 2010? For those effected, what was the average delay incurred? - What caused the delays? - Is there still a delay in processing applications?	Written	23.11.10	25.11.10
364	12			There are reports that conditions have been mistakenly dropped from and added to some doctors' registration status? How many medical practitioners have been affected? What types of errors in registration status have been detected?		23.11.10	25.11.10
365	12			- What impact has national registration had on overseas trained medical practitioners working in areas of need? - How many overseas trained doctors will be affected by changes to registration requirements who are currently working in areas of need?		23.11.10	25.11.10
366	12			By how much have bodies formed by the new national health law already overspent their budgets? By how much are they expected to overspend their budgets over the next year? How will the short falls in financing be met?		23.11.10	25.11.10
367	12			How are continuing State Medical Boards funded? Are they entirely funded from a national source: do the States contribute to their funding? Are the staffs of these boards, including doctors, still being paid regularly? If not, why not?		23.11.10	25.11.10

368	12			- What steps are being taken to overcome ongoing difficulties re-registering doctors? Fees for late registration have been waived: for how long will this apply? How will the substantial loss of AHPRA funds be recouped? Registration fees for doctors have doubled: for how long will there be no further increase in registration fees? Will the Australian Medical Board partly address problems resulting from most registrations becoming due at the same time by registering doctors from their date of birth (as was the case in NSW) which would stagger registration dates through the year? - Are problems similar to those encountered re-registering doctors occurring with respect to the other nine groups of health professionals? If so, what is planned to deal with these problems?		23.11.10	25.11.10
369	13	Fierravanti-Wells	MyHospital website	- What has been the total cost of this website? - What is its current usage? - Does the department monitor access to the site? If so, provide details of access and usage of the site.	Written		
370	0	Fierravanti-Wells	National Health and Hospitals Network – Hospitals	- In relation to each of the following measures: - Flexible funding for emergency departments, elective surgery and subacute care - Improving access to elective surgery - Four hour national access target for emergency departments - New sub-acute hospital beds Please advise: - What progress has been made in implementing each of these measures? - For each one, what consultation has occurred with (i) state governments (ii) clinicians (iii) other stakeholders? - What funding has been rolled out to date for each of these measures? - In respect of allocated funding please advise by state, how much has been allocated, for what purpose and to whom? - What is the actual definition and requirements to meet the four hour national access target for emergency departments that will be introduced on 1 January 2011?	Written		

371	0	Fierravanti-Wells	National Health and Hospitals Network – Hospitals	• In relation to Activity based funding (BRP2 page 229) and the Independent Hospital Pricing Authority (BRP2 page 233) - o What progress has been made in implementing each of these measures? - o For each one, what consultation has occurred with (i) state governments (ii) clinicians (iii) other stakeholders? - o What are the major implementation issues and concerns arising in respect of these measures? What funding has been provided for each of these measures? In respect of allocated funding please advise by state, how much has been allocated, for what purpose and to whom?	Written		
372	13	Fierravanti-Wells	Local Hospitals Network – establishment	• For each jurisdiction, what progress has been made by state government in defining the boundaries and composition of local hospital networks? • To date, what involvement has the Department had in providing input to or reviewing the state governments' proposals for the geographic boundaries and governance arrangements of local hospital networks? • In the future, what involvement does the Department expect to have in providing input to or reviewing the state governments' proposals?	Written		
373	13			• Will all states and territories be implementing the same local hospital network governance arrangements? How is the Department ensuring that the state governments comply with the former Prime Minister's requirement that local doctors be on local hospital networks?			

374	0	Fierravanti-Wells	Health and Hospitals Fund: Regional Priority Round	• Can private hospitals apply to the Health and Hospitals Fund: Regional Priority Round (Round3)? • Does the department want private hospitals to apply to the Regional Priority Round? • Were private hospitals eligible to apply for round 1 and round 2 funding? • How many private hospitals applied? • How many private hospitals were successful in gaining round 1 and round 2 funding? • How many public hospitals were successful in gaining round 1 and round 2 funding? • Is there a disparity in terms of the number of applications by public and private hospitals and the number of grants awarded? • Why does this disparity exist?	Written		
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375	0			• On what criteria were round 1 and 2 applications assessed? • Did the hospital ownership structure (i.e. public or private) affect how the application was assessed? • Were private hospitals disadvantaged in the assessment of applications on the basis that were private hospitals and not public hospitals? • Putting together an application for funding takes a considerable amount of time and effort, how did the Department communicate the outcome with the unsuccessful applicants? • Did the Department notify unsuccessful applicants? • Did the Department provide formal or informal feedback to unsuccessful applicants? • When was this feedback given? • If so, what form did this feedback take? Was it outlined in writing? • If no feedback was given, why did the Department not provide formal feedback to unsuccessful applicants – even when they requested it? • Private hospitals asked for feedback as to why their applications were not successful. Why did they receive no feedback?			
376	0	Fierravanti-Wells	Health and Hospitals Fund: Regional Priority	• Will the department provide a copy of the assessment criteria for rounds 1 to 3? • Will the department provide documentation relating to the assessment of applicants in rounds 1 to 2, and explanation of why decisions were made to fund these applications.	Written		

377	0		Round	• How was the assessment criteria devised? • Who was the responsible for making assessments and agreeing to funding? • Was this a Departmental decisions or did it require Ministerial sign off? • Did the Minister intervene to prevent any applications from being funded, or intervene on behalf of any applications? • Were applications assessed, given a score, and then ranked? • Will the department provide a final copy that lists the scores of the applications? • What was the process whereby one application was chosen over another? • Obviously you have put together criteria, but how did you decide which applications best met that criteria? • Is there documentation of how those decisions were made?			
378	0	Fierravanti-Wells	Health and Hospitals Fund: Regional Priority Round	• In rounds 1 and 2 were government providers given automatic priority in the assessment process over non-government providers?	Written		
379	0			• The list of successful applicants in rounds 1 and 2 shows a heavy bias towards public hospitals, why were they more successful? • Was it the quality of their bids, or was there a deliberate effort to ensure that public hospitals were the successful bidders in the process at the expense of others? If so, why? • If the Department so desired that public hospitals only, or predominately be the recipients of such grants, do you not think it would have been helpful to communicate this with other applicants?			
380	0			• Putting forward an application takes a significant amount of time, money and effort. Is it not a little disingenuous to ask health care providers to put in applications that stand no chance of receiving funding?			

381	0			• How will round 3 applications, the regional priority round, be assessed? • Some details are provided on pages 6 to 13 of the 'Funding Applications and Assessment Guidelines', but how will the department determine which applications best meet the criteria? • Who will make that decision? • Will government providers be prioritised over non-government providers, irrespective of the quality of the bid? • Will there be some sort of scoring chart or matrix to assess bids? • If so, on what basis was this devised, and has it been made available to applicants? • And if so, after applications are assessed can you provide the scores of each applications (successful and unsuccessful)?			
382	0	Fierravanti-Wells	Health and Hospitals Fund: Regional Priority Round	• Who will assess round 3, regional priority round applications? • Are they Departmental staff or external experts, or is it a Ministerial decision? • On what basis were they chosen to make the assessment? • Has any documentation in relation to the assessment of applications been produced for these people to help them make their decision? • If so, will the department provide a copy of it?	Written		

383	0			• After assessing round 3 applications, will the Department inform unsuccessful applicants of the outcome in timely fashion? • Will the Department provide formal written feedback to unsuccessful applicants as to why their application was not successful? • Will the Department give an indication to unsuccessful applicants as to how their application did relative to others? I.e. was it close to getting funding, or required much more work? • When will the outcome of the regional priority round be announced?			
384	0	Fierravanti-Wells	Health reform (1,316 additional beds)	• How many of the additional 1300 hospital beds promised are operational? • Where are they located? • Are they fully funded by the Commonwealth or have states and territories contributed to the capital or recurrent costs? What is the average total capital and annual recurrent cost of a new <u>acute</u> care hospital bed?	Written		
385	14	Fierravanti-Wells	Australian Technical Advisory Group on Immunisation (ATAGI)	• Outline the decisions made by ATAGI in relation to the HINI pandemic and the seasonal flu season including: - o Meeting dates; - o outcome of meetings - o dates of any advice to Government - o dates of any advice to other government bodies, including the name of that other organisation - o were any conflicts of interests declared by any members in relation to any of such meetings How does ATAGI deal with conflicts of interest?	Written		

386	14	Fierravanti-Wells	Australian Influenza Vaccine Committee (AIVC)	- Outline the decisions made by AIVC in relation to the HINI pandemic and the seasonal flu season including: - Meeting dates; - outcome of meetings - dates of any advice to Government - dates of any advice to other government bodies, including the name of that other organisation - were any conflicts of interests declared by any members in relation to any of such meetings - How does AIVC deal with conflicts of interest?	Written	02.12.10	10.02.11
387	14			Does the AIVC have a website? If so, what is the link?		02.12.10	10.02.11
388	14			- In relation to the Observers to the AIVC, what is the process for appointment or otherwise nominating observers? - Do observers comply with conflict of interests provisions? If so, please provide details of the process.		02.12.10	10.02.11
389	14	Fierravanti-Wells	Registration category for retired doctors	- What are the rights of retired doctors in the provision of a limited right to practice medicine? - Do they have any rights or is it true that the Medical Board of Australia decided to abolish the present limited rights of practice for retired doctors? - How was this decision made? - How much consultation was there and who conducted it? - What are the anticipated costs to Medicare in not allowing retired doctors a limited right to practice medicine?	Written	23.11.10	25.11.10
97	11	Boyce	Better Access Program	a) Is the Department aware of the 'wrap around' services provided for free by social workers under the Better Access program? b) If the Department is not aware, why not?	Written	30.11.10	
98	11	Boyce	Social Workers	How many hours do social workers, on average, supply for a 50 minute rebated session?	Written	30.11.10	

99	11	Boyce	Better Access	a) In regard to the Government's announcement that social workers and OT's will be excluded from the Better Access program, what will be the increased cost of this decision to tax payers given that rebates for clinical psychologists for a 50 minute session are \$117.65, for general psychologists is \$80.20, while the same sessions conducted by social workers cost in rebates \$70.65? b) Is it not true that the only way this decision saves money is by the current clients of social workers going without any service? c) How can this decision, limiting access for mental health clients, be justified in light of the research by Access Economics that has found only 35% of people with a mental illness receive any form of treatment, while for those aged between 16-24 it's just 25%?	Written	30.11.10	
100	11	Boyce	Staff Recruitment in Mental Health	a) Why does the Department have serious problems with staff recruitment and retention especially in the area of community mental health care? b) Could the cause of this problem be in any way connected to confusion about what existing community mental health services are meant to do?	Written	30.11.10	
430	1	Macdonald	Health Places and Spaces Initiative	Will the Federal Government be committing the second stage of funding for the Healthy Places and Spaces initiative between the National Heart Foundation of Australia, the Planning Institute of Australia and the Australian Local Government Association?	Written	02.12.10	10.02.11

		Fierravanti-Wells		Senator FIERRAVANTI-WELLS—I guess this is a question to Senator McLucas. I have put these concerns on the record. I am very concerned about the spokesperson for Alzheimer’s Australia, New South Wales, former Deputy Premier John Watkins. He obviously wears a number of hats. I do not criticise the work that he does for Alzheimer’s Australia, but the reality is he is a very politically active person. Does the government have any concerns in relation to giving funding to an organisation that is so visibly partisan political in New South Wales, not necessarily about its Alzheimer’s aspects but about other issues? John Watkins is regularly on Sky News having a go for all sorts of reasons at, in particular, the coalition, and this organisation is getting a lot of money. There is, in my view, a potential conflict of interest. Do you have any comments in relation to that? Senator McLucas—I cannot answer that because I am simply unaware of Mr Watkins activity. It may be that Mr Watkins is invited as a former deputy premier to appear on Sky News. I do not know, I am not sure, but we will come back to you with some assessment.	CA 41		
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