Outcome 10

Health System Capacity and Quality

The capacity and quality of the health care system meets the needs of Australians

OUTCOME SUMMARY

Outcome 10 is focused on improving the capacity, coordination and quality of the nation’s health system as part of the Australian Government’s commitment to reform and refocus the health system so that it is world-class. The Government aims to achieve this through programs that improve chronic disease management and palliative care issues, and tackle cancer on several fronts through a national approach.

The Government will also support safety and quality improvements across the health system and lead a national approach to more effective electronic management of key health information (e-Health). Furthermore, the Government will contribute to the strategic development of health and ageing policies by engaging with the community and international organisations.

Outcome 10 is the responsibility of the Population Health Division, the Portfolio Strategies Division, the Primary and Ambulatory Care Division and the Regulatory Policy and Governance Division. Mental Health and Workforce Division also contributes to this outcome.

Key Strategic Directions

- Reduce the burden of cancer, improve support for Australians living with cancer, and improve research and knowledge about cancer.
- Improve access to, and the quality of, palliative care for people with a terminal illness.
- Improve chronic disease management, including early intervention and the integration of care and self-management.
- Promote improved patient safety.
- Support improvements in clinical practice and decision-making through e-Health.
- Promote Australian health policy through participation in relevant international, regional and bilateral forums.

The Government will also support:

- The states and territories to improve the efficiency, and access to, public hospitals and health services (Outcome 13).
Major Activities

Cancer Care and National Leadership in Cancer Control

The Australian Government will implement the National Cancer Plan and the Better Cancer Care and Support for Women package of initiatives to reduce the burden of cancer by improving the well-being and health outcomes of Australians affected by cancer, their families and carers.

In 2008-09, the National Cancer Plan includes measures to provide: independent trials of drugs and research into cancer treatments to be administered by Cancer Australia; two prostate cancer specific research centres to develop non-invasive diagnostic tests to detect prostate cancer, new therapies for treatment and the reliable differentiation between slow growing and aggressive cancers; and the construction of a new Children’s Cancer Centre at the Women’s and Children’s Hospital in Adelaide. In addition, the plan will establish a range of cancer centres and networks throughout Australia to improve supportive care for cancer patients and their families. The centres will provide high quality training, clinical trials of drugs and research, and will improve the evidence-base that will contribute to improved health outcomes for Australians affected by cancer. The Department will negotiate agreements with relevant stakeholders to implement measures. In particular, the Department will work closely with State and Territory governments to implement relevant measures collaboratively to contribute to the work of the Council of Australian Governments Health and Ageing Working Group.

The Better Cancer Care and Support for Women initiative provides funding to the McGrath Foundation for the recruitment, training and employment of 30 new breast cancer nurses across Australia and funding for breast prostheses for women who have undergone mastectomy as a result of breast cancer. The nurses will provide women with breast cancer, and their families, access to information, care and support. The Government will also support the National Centre for Gynaecological Cancers (NCGC)\(^1\) to improve outcomes for women affected by gynaecological cancers, their families and carers. Refer to Outcome 1 for a discussion on the National Bowel Cancer Screening Program.

Funding for this major activity is sourced from Program 10.1 – Chronic Diseases – Treatment.

Access to National Palliative Care Program

The Australian Government is committed to improving access to quality palliative care for patients, their families and carers through the National Palliative Care Program. This will involve working closely with State and Territory governments, which provide most palliative care, and ensuring that Australian Government activities complement each other.

The National Palliative Care Program supports a range of national initiatives across the broad priority areas of support for patients, families and carers in the community; and increased access to palliative care medicines in the community. It is also focused on education, training and support for the workforce; and research and quality improvement for palliative care services. In 2008-09, as part of this initiative, the Australian Government

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\(^1\) For further discussion on the NCGC, please refer to the Cancer Australia chapter located later in these Portfolio Budget Statements.
will provide funding for a Local Palliative Care Grants Program that assists local communities to better support people requiring palliative care and their families.

To improve access to palliative care medicines, the Government is providing funding through the Palliative Care Clinical Studies Collaborative, which will enable multi-site drug trials to be undertaken. The data collected from these trials may allow relevant medicines used in palliative care to be registered on the Australian Register of Therapeutic Goods and ultimately would result in the medicines being listed through the Pharmaceutical Benefits Scheme. This will also provide capacity building for other clinical and non-clinical research in palliative care.

The Government will support palliative care workplace training opportunities and workshops for health care professionals, including general practitioners and nurses, currently working in primary care settings through the Program of Experience in Palliative Approach. The Department will manage a funding agreement with the Queensland University of Technology to improve the quality of palliative care for patients in primary care settings by providing education and training to health professionals working with palliative care patients. In addition, in 2008-09 the Department will focus on increasing participation by Indigenous health care workers.

Furthermore, the Government will fund the Advance Care Planning project; Respecting Patient Choices, to help improve the quality and effectiveness of end of life care. This work will provide patients with a mechanism for discussing and recording their choices about health care in an advanced care plan. The Department will promote a nationally consistent approach to advanced care directives through the Australian Health Ministers Advisory Council.

Funding for this major activity is sourced from Program 10. 5 – Palliative Care and Community Assistance.

**Improved Chronic Disease Management**

Effective prevention and management of chronic disease is a key policy objective within the Australian health system. The Australian Government’s agenda in improving chronic disease management encompasses the need to curb the escalating prevalence of lifestyle preventable chronic disease. Over the next five years, the Government aims to increase awareness of chronic disease factors including: simple steps for individuals to address risk factors, support for primary health care providers in identifying and addressing chronic disease risk factors, and improved participation in cancer screening.

In implementing the National Cancer Plan and Better Cancer Care and Support for Women, the Australian Government will consult with State and Territory governments to ensure rural and regional services for people with cancer are maintained, and improved through the provision of outreach services to regional areas.

Through the Better Arthritis and Osteoporosis Care Initiative, the Australian Government will fund programs that focus on primary and secondary prevention, and best practice management of arthritis and osteoporosis. The programs include: data collection, awareness programs, consumer information, health service improvement and health professional educational activities. The Department is funding peak organisations and other stakeholders to develop guidelines, core competencies and consumer information material, which will be disseminated in a sustainable and coordinated manner. Coordinated and updated educational information is required to ensure that health professionals and consumers...
obtain consistent, best practice messages and education. This will benefit the community as it will improve treatment and management outcomes for people with arthritis and osteoporosis.

The Australian Government has implemented the Asthma Management Program 2005-06 to 2008-09 and will undertake a program evaluation to inform future directions. The program aims to facilitate best practice treatment and encourage proactive management through initiatives including a national awareness campaign, consumer self-management support through the Asthma Foundations of Australia and asthma education for health professionals through the National Asthma Council Australia. In 2008-09, the Department will undertake a review of the National Asthma Strategy, in conjunction with the states and territories, to take into account the linkage between asthma and other respiratory diseases such as chronic obstructive pulmonary disease. The review will be overseen by the Australian Population Health Principal Development Committee and is expected to be completed and released by early 2009. The revised strategy will be a guide for those with an interest in asthma care and the other chronic respiratory diseases and will provide a framework to plan and implement activities at local, state, territory and national levels.

Funding for this major activity is sourced from Program 10.1 – Chronic Disease – Treatment.

**Improved Patient Safety**

The Australian Government is committed to strengthening the Australian health care system by improving the safety and quality of health services and outcomes. To this end, the Department is supporting, in conjunction with the states and territories, the role of the Australian Commission on Safety and Quality in Health Care to lead and coordinate national improvements in safety and quality in health care across all health care settings. This work includes identifying issues, recommending policy directions and providing strategic advice to Australian health ministers. Over the next three years, this work will focus on a number of priority areas (included in the Commission’s work plan, as approved by the Australian Health Ministers’ Advisory Council in March 2008) such as a National Patient Charter of Rights, accreditation, medication safety and hygiene.

The Department also assists the Commission to provide robust advice to health ministers who are then able to make sound decisions about improvements to Australia’s health care system. The Department supports the work of the Commission through the Secretary’s role as a Commissioner and through representation on a number of other Commission committees, as well as providing input to the Commission’s work program.

The Australian Government will work with State and Territory governments and other stakeholders to develop a more strategic approach to maternity services, particularly in rural areas. The Government will develop a national maternity services plan to ensure the national coordination of maternity services. As part of the Government’s ongoing health reforms the current Medicare Benefit Schedule arrangements will be reviewed to examine the role of midwives in the provision of maternity care.

Funding for this major activity is sourced from Program 10.6 – Research Capacity.
Improved Clinical Practice and Decision-Making Through e-Health

The Australian Government’s e-Health agenda aims to support improved safety and quality outcomes, and better clinical and administrative decision-making. The Australian Government will provide national leadership in e-Health, in demonstrating to the Australian community the health care safety and quality benefits of e-Health, and developing measures to ensure the necessary privacy of health information.

In 2008-09, the Australian Government, through the Department, will work with the states and territories, professional groups and consumers, to address the aspects of e-Health requiring national leadership and coordination. This includes the development of a national e-Health strategy.

The Department will specifically oversee the development of national standards to enable compatibility of e-Health systems across the national health network and ensure these standards align with national e-Health policy. The Department is working to ensure health systems are interoperable, and can safely and securely exchange electronic health information between health professionals with patients’ permission. The Government will consult with medical groups, the software industry, other professions and the community to ensure the needs of all are taken into account and the benefits of e-Health are communicated.

The challenges facing this work relate to the high-level of complexity and pace of technology development in e-Health, and the willingness of the health sector to embrace it. The Department will manage this challenge through effective consultation strategies, and the ongoing involvement of appropriate stakeholders.

Funding for this major activity is sourced from Program 10.2 – e-Health Implementation.

Promote Australian Health Policy Through Participation in Relevant International, Regional and Bilateral Forums.

The Australian Government’s contribution to international, regional and bilateral discussions on health policy helps to improve health outcomes for Australians by facilitating exchange of information and ensuring that any international policy commitments are consistent with Australia’s needs and experience. Sharing information and expertise with other countries in the region also assists them to further develop their health protection mechanisms, which in turn helps to protect Australia from pandemics and other forms of communicable disease transmission. Reducing the burden of disease in the Asia Pacific also assists in promoting regional stability and fosters economic and social development.

In 2008-09, the Department will contribute actively to the work of key international organisations such as the World Health Organization (WHO), the Organisation for Economic Co-operation and Development (OECD) and the Asia-Pacific Economic Cooperation (APEC) forum. Key issues for engagement include pandemic preparedness, chronic disease prevention, e-health, health systems improvement and workforce issues. The Department also works closely with AusAID and the Department of Foreign Affairs and Trade to foster Australian development goals in the region, including maintenance of bilateral relationships with China, Indonesia, and engagement with Pacific Island nations at senior health official level.
The Department provides health policy advice to the Department of Immigration and Citizenship under a Memorandum of Understanding. It also provides advice to the Department of Foreign Affairs and Trade on any health policy issues arising from Free Trade Agreement negotiations, particularly where they relate to the integrity of therapeutic goods regulation.

Funding for this major activity is sourced from Program 10.4 – International Policy Engagement.
Outcome 10 Resourcing

Table 10.1 shows how the 2008-09 Budget appropriations translate to total resourcing for Outcome 10, including administered expenses, revenue from Government (appropriations), revenue from other sources, and the total price of outputs.

Table 10.1: Total Resources for Outcome 10

<table>
<thead>
<tr>
<th>Outcome 10 Administered and Departmental Output Resources</th>
<th>2008-09</th>
<th>2007-08</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program 10.1: Chronic Disease - Treatment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>37,140</td>
<td>17,017</td>
</tr>
<tr>
<td>Departmental Outputs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>5,295</td>
<td>5,761</td>
</tr>
<tr>
<td>Revenues from other sources (s.31) for goods and services</td>
<td>157</td>
<td>156</td>
</tr>
<tr>
<td><strong>Subtotal for Program 10.1</strong></td>
<td>42,592</td>
<td>22,934</td>
</tr>
<tr>
<td><strong>Program 10.2: e-Health Implementation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>49,713</td>
<td>53,779</td>
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<tr>
<td>Departmental Outputs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>10,629</td>
<td>10,622</td>
</tr>
<tr>
<td>Revenues from other sources (s.31) for goods and services</td>
<td>288</td>
<td>288</td>
</tr>
<tr>
<td><strong>Subtotal for Program 10.2</strong></td>
<td>60,630</td>
<td>64,669</td>
</tr>
<tr>
<td><strong>Program 10.3: Health Information</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
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<td>7,694</td>
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<td>Departmental Outputs</td>
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<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
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<td>46</td>
</tr>
<tr>
<td>Revenues from other sources (s.31) for goods and services</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Subtotal for Program 10.3</strong></td>
<td>7,895</td>
<td>7,741</td>
</tr>
<tr>
<td><strong>Program 10.4: International Policy Engagement</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>11,575</td>
<td>10,576</td>
</tr>
<tr>
<td>Departmental Outputs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>37</td>
<td>39</td>
</tr>
<tr>
<td>Revenues from other sources (s.31) for goods and services</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Subtotal for Program 10.4</strong></td>
<td>11,613</td>
<td>10,616</td>
</tr>
<tr>
<td><strong>Program 10.5: Palliative Care and Community Assistance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>23,436</td>
<td>25,579</td>
</tr>
<tr>
<td>Special Appropriations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Care (Appropriation) Act 1998 - Australian Health Care Agreements - Provision of Designated Health (p)</td>
<td>2,987</td>
<td>2,931</td>
</tr>
<tr>
<td>Departmental Outputs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Annual Appropriation Bill 1 (Ordinary Annual Services)</td>
<td>5,023</td>
<td>5,476</td>
</tr>
<tr>
<td>Revenues from other sources (s.31) for goods and services</td>
<td>149</td>
<td>148</td>
</tr>
<tr>
<td><strong>Subtotal for Program 10.5</strong></td>
<td>31,598</td>
<td>34,134</td>
</tr>
</tbody>
</table>
### Table 10.1: Total Resources for Outcome 10 (cont)

<table>
<thead>
<tr>
<th></th>
<th>2008-09</th>
<th>2007-08</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Resources for Outcome 10</strong></td>
<td>2,870,505</td>
<td>2,670,081</td>
</tr>
</tbody>
</table>

#### Program 10.6: Research Capacity

**Administered Items**

- **Annual Appropriation Bill 1 (Ordinary Annual Services)**
  - 27,846
  - 27,555

- **to Australian Council for Safety and Quality in Healthcare Special Account**
  - (11,000)
  - -

**Departmental Outputs**

- **Annual Appropriation Bill 1 (Ordinary Annual Services)**
  - 2,111
  - 2,318

- **Revenues from other sources (s.31) for goods and services**
  - 63
  - 63

**Special Accounts**

- **Australian Council for Safety and Quality in Healthcare**
  - **Opening balance**
    - 4,910
    - 17,871
  - **Appropriation receipts**
    - 11,000
    - -
  - **Non-Appropriation receipts to Special Accounts**
    - -
    - -

**Subtotal for Program 10.6**

- 34,930
- 29,936

#### Program 10.7: Health and Medical Investment Fund

- **Health and Medical Investment Fund**
  - **Opening balance**
    - 2,500,000
    - -
  - **Appropriation receipts**
    - -
    - 2,500,000
  - **Non-Appropriation receipts to Special Accounts**
    - 181,250
    - -

**Subtotal for Program 10.7**

- 2,681,250
- 2,500,000

**Total Resources for Outcome 10**

- 2,870,505
- 2,670,081

#### Outcome 10 Resources by Departmental Output Group

<table>
<thead>
<tr>
<th>Department of Health and Ageing</th>
<th>2008-09</th>
<th>2007-08</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Output Group 1: Policy Advice</strong></td>
<td>9,305</td>
<td>9,743</td>
</tr>
<tr>
<td><strong>Output Group 2: Program Management</strong></td>
<td>14,493</td>
<td>15,176</td>
</tr>
<tr>
<td><strong>Total Departmental Resources</strong></td>
<td>23,798</td>
<td>24,919</td>
</tr>
</tbody>
</table>

**Average Staffing Level (Number)**

- 2008-09: 166.1
- 2007-08: 181.8

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1. Pending the development of legislation establishing the Health and Hospitals Fund (HHF), the administered financial schedules in these Portfolio Budget Statements reflect the amounts previously allocated for the Health and Medical Investment Fund. Following the establishment of the HHF the amounts recorded in these administered schedules will instead be allocated to the new fund, as budget surpluses are realised. Further information on the establishment of the new HHF is contained in Budget Paper No. 1 and in Budget Paper No. 2.

(p) This Special Appropriation is also funded through outcomes 11 and 13.
Measures Affecting Outcome 10

A summary of measures affecting this outcome is provided at Table 1.3.1, Section 1. Measure descriptions are published in full in Budget Paper No. 2, Budget Measures 2008-09, available on the Australian Government website at <http://www.budget.gov.au>.

Contribution of Administered Programs

Program 10.1 – Chronic Diseases – Treatment

The Chronic Diseases – Treatment Program provides funding to improve the prevention, early detection and management of diabetes; and treatment and support for people with cancer, their families and the community. It also funds programs to reduce the social and economic impacts of asthma in Australia; and to improve the quality of life for people with arthritis and osteoporosis, and their carers. The contribution to this outcome is measured by improved prevention and management of chronic diseases in the Australian community.

Program 10.2 – e-Health Implementation

The e-Health Implementation Program funds a range of activities aimed at improving health outcomes through the use of technology to promote a more integrated and coordinated approach to health care. This is achieved through encouraging the development of national standards to ensure compatibility of e-Health systems across the health sector. The contribution to this outcome is measured by the uptake of e-Health initiatives.

Program 10.3 – Health Information

The Health Information Program facilitates the portfolio’s involvement in collaborative policy development with other jurisdictions and funds a range of activities including the development, gathering and disseminating of information that contributes to the strategic development of health and ageing policies and programs.

The contribution to this outcome is measured and achieved through participation in collaborative information management and development forums at the Australian, State and Territory Government level, and the collection and analysis of health data to assist in identifying areas where health improvement or improved processes and policies are required. Furthermore, the program provides support for community organisations with a national focus; and the collection, analysis and provision of consumer information on health and ageing policies and programs nationally.

Program 10.4 – International Policy Engagement

The International Policy Engagement Program funds contributions to an existing range of international treaties, commitments and memoranda of understanding aimed at improving the quality and capacity of the Australian health system. This is achieved through engagement with other countries and international organisations on issues of mutual interest (for example, communicable diseases).

The contribution to this outcome is measured by the timeliness and quality of the contributions under these commitments.
Program 10.5 – Palliative Care and Community Assistance

The Program of Assistance for Survivors of Torture and Trauma promotes the physical health and psycho-social recovery of entrants to Australia under the Humanitarian Program who have pre-migration experiences of conflict and human rights abuses, making them vulnerable to developing mental health problems. The Australian Government will continue to fund eight specialist torture and trauma agencies, one in each state and territory, to provide counselling, education for mainstream service providers and community capacity building activities.

The contribution to this outcome is measured by the extent to which this program improves access to specialised services by entrants to Australia under the Humanitarian Program who have been victims of torture and trauma.

Program 10.6 – Research Capacity

The Research Capacity Program provides support for health and medical research to enable further improvements in the prevention and treatment of type 1 and type 2 diabetes.

The contribution to this outcome is measured by the number of research grants provided and progress in the research and clinical program.

The program also supports the Australian Commission on Safety and Quality Health Care which was set up by Australian health ministers to lead and coordinate national improvements in safety and quality in health care. This includes identifying issues, recommending policy directions and providing strategic advice to health ministers.

The contribution to this outcome is measured by the level of engagement the Department has with the Commission in all areas of its work, so that ministers can receive robust and appropriate advice on all identified priority areas relating to safety and quality affecting the Australian health care system.

In addition, the program supports Australia’s medical research to ensure that Australia’s research institutions maintain their competitive edge by building capacity for priority research.

The Maternity Services Reform package will develop options to facilitate access to maternity care in consultation with State and Territory governments and other stakeholders. This includes a broader review of maternity services to ensure national coordination of antenatal and perinatal services. The contribution to this outcome is measured and achieved by the development of the National Maternity Services Plan.
Contribution of Departmental Outputs to Outcome 10

The Department describes its core activities in terms of two output groups: policy advice and program management. Outcome 10 reports on both output groups. Refer to Section 2.1 for more information on output groups.

Performance Information for Outcome 10

Performance information for administered programs, individual outputs and output groups relating to Outcome 10 are summarised in Table 10.2.

Table 10.2: Key Performance Information for Outcome 10

Performance Information for Administered Programs

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program 10.1 – Chronic Diseases – Treatment</td>
<td></td>
</tr>
<tr>
<td>Administered Items</td>
<td></td>
</tr>
<tr>
<td>Complete primary care guidelines and undergraduate competencies for arthritis and osteoporosis under the Better Arthritis and Osteoporosis Care Program. Measured by the publication and dissemination of the guidelines and competencies in 2008-09.</td>
<td>Primary care guidelines endorsed by the National Health Medical Research Council in 2008-09 on a national website.</td>
</tr>
<tr>
<td></td>
<td>Publication of the musculoskeletal undergraduate competencies in 2008-09.</td>
</tr>
<tr>
<td>Divisions of General Practice invited to host an Australian Asthma Management Plan (AMP) asthma workshop for health professionals conducted by the National Asthma Council Australia.</td>
<td>Training and resources available nationally in 2008-09.</td>
</tr>
<tr>
<td>Timeliness of AMP asthma action plans available to health professionals nationally via National Mailing and Marketing.</td>
<td></td>
</tr>
<tr>
<td>Proportion of schools invited to participate in the Asthma Friendly Schools Program.</td>
<td>The registration target for 2008-09 is 80% of all schools nationally.</td>
</tr>
<tr>
<td>Information and advice is available to consumers via Asthma Foundations in every state and territory.</td>
<td>Information and advice is available nationally in 2008-09.</td>
</tr>
<tr>
<td>Implementation of the National Diabetes Strategy.</td>
<td>Programs and initiatives that aim to prevent and improve the management of diabetes will be implemented on time and within budget in 2008-09.</td>
</tr>
</tbody>
</table>
### Program 10.1 – Chronic Diseases – Treatment

**Administered Items**

- Implementation of the National Cancer Plan and the Better Cancer Care and Support for Women package of initiatives.

Initiatives that aim to prevent and improve the well-being and health outcomes of Australians affected by cancer will be implemented on time and within budget in 2008-09.

**Departmental Outputs**

*Resourcing: $42.592m*

### Program 10.2 – e-Health Implementation

**Administered Items**

- Key stakeholders use electronic clinical communications to support quality and safety in health care.

- Australian Government investment in the National E-Health Transition Authority contributes to the development of nationally consistent e-Health standards and basic infrastructure.

Increased use of electronic communications by service providers for electronic prescribing, secure electronic messaging and the components of shared health records.

Timely input to National E-Health Transition Authority programs and ensure work is delivered within agreed timeframes.

**Departmental Outputs**

*Resourcing: $60.630m*

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2 The Department has four standard performance indicators for departmental output groups. See ‘Performance Information for Departmental Outputs’ for further information.
### Section 2 – Department Outcomes – 10 Health System Capacity and Quality

#### Program 10.3 – Health Information
- **Administered Items**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective management of the Australian Government’s contribution towards the annual Australian Health Ministers’ Advisory Council (AHMAC) cost-shared budget.</td>
<td>Containment of overall cost-shared budget within agreed budget principles and Australian Government priorities are reflected in the annual AHMAC work plan.</td>
</tr>
<tr>
<td>Peak community organisations’ input into policy and program development and delivery, through the Community Sector Support Scheme.</td>
<td>Achievement of agreed plans and targets by funded organisations within agreed timeframes.</td>
</tr>
<tr>
<td>Improved strategic policy and program development through support for the development, conduct and analysis of national surveys.</td>
<td>Analysis and release of data from the 2007-08 National Health Survey.</td>
</tr>
</tbody>
</table>

- **Departmental Outputs**

**Resourcing:** $7.895m

#### Program 10.4 – International Policy Engagement
- **Administered Items**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote Australian international leadership in health policy through participation in meetings and other activities under the auspices of the WHO, OECD, APEC and other international and multilateral bodies.</td>
<td>High level/strategic engagement with WHO Executive Board meetings, the World Health Assembly, chairing the APEC Health Working Group and the OECD Health Committee.</td>
</tr>
<tr>
<td>Measured through the number of meetings/activities where Australia has played a leading or significant role.</td>
<td></td>
</tr>
</tbody>
</table>

---

3 The Department has four standard performance indicators for departmental output groups. See ‘Performance Information for Departmental Outputs’ for further information.
### Program 10.4 – **International Policy Engagement**

**Administered Items**

- Timely, consistent and complete Australian policy positions for international negotiations and discussions.

- Measured through evidence of effective cross-departmental communications and opportunities for stakeholder participation through a range of forums.

**Departmental Outputs**

**Resourcing:** $11.613m

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>**Program 10.5 – <strong>Palliative Care and Community Assistance</strong></td>
</tr>
<tr>
<td><strong>Administered Items</strong></td>
<td></td>
</tr>
<tr>
<td>The Palliative Care in the Community projects are progressed and completed.</td>
<td>Projects that aim to better support palliative care patients, their families and carers in the community are implemented on time and within budget in 2008-09.</td>
</tr>
<tr>
<td>Increased use of palliative care in the community.</td>
<td>Increased engagement at a local, state and territory level with the needs of palliative care patients considered.</td>
</tr>
<tr>
<td>CareSearch website will meet the information and resource needs of health professionals, volunteers, patients, families and carers.</td>
<td>Increase in use of the CareSearch website by target groups.</td>
</tr>
<tr>
<td>Provision of multi-site drug trials through the Palliative Care Clinical Studies Collaborative.</td>
<td>Increased number of multi-site drug trials.</td>
</tr>
</tbody>
</table>

---

*The Department has four standard performance indicators for departmental output groups. See ‘Performance Information for Departmental Outputs’ for further information.*
## Program 10.5 – Palliative Care and Community Assistance

**Administered Items**

- Increased access to services for survivors of torture and trauma.
  - Over 3,000 clients per annum nationally receive services.

**Departmental Outputs**

- Resourcing: $31,595m

## Program 10.6 – Research Capacity

**Administered Items**

- Provide support for health and medical research by maintaining the clinical Islet Transplantation Program. This will be measured by the number of research grants provided and progress in the research and clinical program.
  - Funding initiatives that enhance health and medical research initiated and progressed.

- Support for Australia’s health and medical research by implementing funding initiatives that improve health and medical research capacity.
  - Achievement of agreed plans and targets by funded organisations within agreed timeframes.

**Departmental Outputs**

- Resourcing: $34,930m

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5 The Department has four standard performance indicators for departmental output groups. See ‘Performance Information for Departmental Outputs’ for further information.
Performance Information for Departmental Outputs

In relation to the following programs:

- 10.1: Chronic Disease – Treatment;
- 10.2: e-Health Implementation;
- 10.3: Health Information;
- 10.4: International Policy Engagement;
- 10.5: Palliative Care and Community Assistance; and
- 10.6: Research Capacity.

### Output Group 1 – Policy Advice

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality, relevant and timely advice for Australian Government decision-making measured by Ministerial satisfaction.</td>
<td>Ministerial satisfaction.</td>
</tr>
<tr>
<td>Production of relevant and timely evidence-based policy research.</td>
<td>Relevant evidence-based policy research produced in a timely manner.</td>
</tr>
</tbody>
</table>

**Output Group 1 Resourcing:** $9.305m

### Output Group 2 – Program Management

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2008-09 Reference Point or Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administered budget predictions are met and actual expenses vary less than 0.5% from budgeted expenses measured by comparison of actual expenses against budget.</td>
<td>0.5% variance from budgeted expenses.</td>
</tr>
<tr>
<td>Stakeholders participate in program development through a range of avenues, such as surveys, conferences, meetings, and submissions on departmental discussion papers.</td>
<td>Stakeholders participate in program development.</td>
</tr>
</tbody>
</table>

**Output Group 2 Resourcing:** $14.493m