



Legislative Assembly for the ACT

STANDING COMMITTEE ON HEALTH AND DISABILITY

Report on 2003-2004 Annual and Financial Reports

JUNE 2005

Report 1

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Resolution of Appointment

On 7 December 2004, the Legislative Assembly for the ACT resolved to establish a general purpose standing Committee, called the Standing Committee on Health and Disability:

to examine matters related to hospitals, community, public and mental health, health promotion and disease prevention, disability matters, drug and substance misuse targeted health programs and community services, including services for older persons and women, housing, poverty, and multicultural and indigenous affairs.¹

Terms of Reference

On 7 December 2004, the Legislative Assembly for the ACT agreed that the annual and financial reports for the calendar years 2003 and 2004, and the financial year 2003-04, presented to the Assembly pursuant to the *Annual Reports (Government Agencies) Act 2004*, would stand referred to the Assembly's standing committees on presentation, in accordance with an agreed schedule.²

¹ Legislative Assembly for the ACT, *Minutes of Proceedings No. 2*, 7 December 2004.

² Legislative Assembly for the ACT, *Minutes of Proceedings, No. 2*, 7 December 2004.

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1 INTRODUCTION

- 1.1 On 7 December 2004, annual and financial reports for all ACT Government agencies for 2003-04 were presented to the Legislative Assembly and referred to Standing Committees for inquiry and report.
- 1.2 In accordance with the schedule defined by the Speaker, the Standing Committee on Health and Disability is responsible for inquiring into the following reports:
 - ACT Health;
 - ACT Mental Health Official Visitors;
 - Community and Health Services Complaints Commissioner;
 - Healthpact; and
 - Department of Disability, Housing and Community Services.
- 1.3 On 1 February 2005, the Committee resolved³ to take evidence from representatives from each of the above agencies and the relevant Ministers, with the exception of ACT Mental Health Official Visitors.

Purpose and Intent of Annual Reports

- 1.4 The annual and financial reports prepared by departments and agencies are the primary means of reporting to the Minister responsible on the performance of the department or agency for the financial or calendar year under review.
- 1.5 As key accountability documents, reports should provide a clear and accurate representation of an agencies performance, achievements and outcomes as well as detail any specific difficulties faced during the year. Annual reports should also provide a concise means of accounting for the expenditure of public monies.
- 1.6 In addition to accounting to the Minister in relation to the management and performance of an agency, annual reports also provide the Legislative Assembly with a vehicle through which it can review the work of the Executive.

³ Standing Committee on Health and Disability, Minutes of Meeting No. 3, 1 February 2005, p. 2.

- 1.7 As documents that are tabled in the Legislative Assembly, annual reports are also public documents and are available to be scrutinised by key stakeholders, the media and the general public.
- 1.8 In addition to the statutory requirements which define the form and content of the financial statements and other information that must be included, the annual and financial reports of ACT Government departments and agencies must comply with the 2004 Annual Report Directions, which are issued under the *Annual Reports (Government Agencies) Act 2004*.
- 1.9 The 2004 Annual Report Directions describe annual reports as ‘key accountability documents’, because they are:
- the principal way in which agencies account for management performance through Ministers to the Legislative Assembly and the wider community;
 - tabled in the Assembly and form a key part of the historical record of government and public administration decisions, actions and outcomes;
 - a source of information and reference about the performance of agencies and service providers for other stakeholders, educational and research institutions, the media and the public; and
 - key reference documents and documents for internal management.⁴
- 1.10 In addition to the Annual Report Directions, departments and agencies also have access to guides on effective reporting such as:
- Auditor-General’s Report 1, 2003, the *Effectiveness of Annual Reporting*; and
 - the NSW Audit Office guidelines to reporting titled *Reporting performance: a guide to preparing performance information for annual reports*.
- 1.11 The NSW Audit Office guidelines state that annual reports should:
- report objectives that are clear and measurable;
 - focus on results and outcomes;
 - discuss results against expectations;
 - be complete and informative;
 - explain changes over time;
 - provide evidence of value for money; and
 - discuss risks, strategies and external operating environment.⁵

⁴ Chief Minister’s Department, *2004 Annual Reports Directions*, June 2004, p.1.

- 1.12 The Committee also assessed the reports in terms of:
- accessibility, clarity and focus in presentation;
 - clear links between output classes and results; and
 - open and honest discussion of the impact of outside scrutiny on the agency and any difficulties faced.

Conduct of Inquiry

- 1.13 On 20 April 2005, the Committee held a public hearing with the Minister for Disability, Housing and Community Services and departmental officials in relation to the Annual Report 2003-04 of the Department of Disability, Housing and Community Services, Volumes 1 and 2.
- 1.14 The Committee also held a public hearing on 21 April 2005 with the Minister for Health and officials representing Healthpact, the Community and Health Services Complaints Commissioner and ACT Health. A full list of participants is included at Appendix A.
- 1.15 In an election year, the timing of all annual reports hearings needs to be carefully considered in order to ensure the relevance and usefulness of such hearings. The lateness of this year's hearings and the subsequent relevance of the actual evidence presented, gave the Committee cause for concern. The value of hearings, and the evidence presented in relation to the 2003-2004 annual reports, was therefore diminished.
- 1.16 Given the importance of the annual reports inquiry process, the Committee would appreciate all Ministers ensuring their availability to appear at the hearings in a timely manner.

ACT Mental Health Official Visitors Annual Report 2003

- 1.17 The role of 'Mental Health Official Visitor' was created in 1999 through amendments to the *Mental Health (Treatment and Care) Act 1994*. Part 11 of the Act provides the legislative framework for the Mental Health Official Visitors Scheme.

⁵ Audit Office of New South Wales, *Reporting performance: a guide to preparing performance information for annual reports*, November 2000, p.2.

- 1.18 Mental Health Official Visitors are part-time statutory office holders, and are appointed directly by the Minister. They are independent of both Mental Health ACT and ACT Health and report directly to the Minister for Health.
- 1.19 Whilst there is no requirement in the Mental Health Act for Mental Health Official Visitors to produce an annual report, the Explanatory Memorandum for the *Mental Health (Treatment and Care) (Amendment) Bill 1999* requires that (in the interests of public scrutiny) Official Visitors should table an annual report in the Assembly. The *ACT Mental Health Official Visitors Annual Report 2003* is the first of these reports. The Committee welcomes the tabling of the report, but chose not to take formal evidence in relation to its content on this occasion.
- 1.20 The annual report deals primarily with issues directly related to the Mental Health Official Visitors Scheme during 2003. The Committee notes, however, that in addition to reporting on current operational matters, it also provides the reader with useful historical and background information.
- 1.21 The Committee notes that following the Review of Statutory Oversight and Community Advocate Agencies, it is proposed to relocate the Mental Health Official Visitors Scheme to the office of the ACT Public Advocate. As a consequence of the review, the role of Mental Health Official Visitors will be expanded to include persons subject to community care orders. Official Visitors will also be given additional powers – including the right to require the provision of information by those running a visited facility.⁶
- 1.22 The *Mental Health (Treatment and Care) Act 1994* requires that the Mental Health Official Visitors report in writing to the Minister for Health and the Community Advocate regarding the outcomes of their visits to mental health facilities.
- 1.23 The Committee notes that the Principal Official Visitor provided the following written reports to the Minister for Health providing details of visits made during 2003:
- Report to the Health Minister by the Official Visitors, Mental Health: Period November 2002 to February 2003;
 - Quarterly Report to the Health Minister by the Official Visitors, Mental

⁶ *The right system for rights protection: An ACT Government Position Paper on the System of Statutory Oversight in the ACT*, August 2004, p. 27.

Health: Period March 2003 to June 2003; and

- Quarterly Report to the Health Minister by the Official Visitors, Mental Health: Period July 2003 to December 2003.

- 1.24 The Committee is pleased with the level of accountability being demonstrated by the ACT Mental Health Official Visitors. In light of the proposed expansion of the Official Visitor role, the Committee encourages the continuation of regular reporting to the Minister for Health and the continued preparation and presentation of annual reports.

2 DEPARTMENT OF DISABILITY, HOUSING AND COMMUNITY SERVICES

- 2.1 The report of the Department of Disability, Housing and Community Services was prepared under Section 5(1) of the *Annual Reports (Government Agencies) Act 2004* and in accordance with the requirements referred to in the 2004 Annual Report Directions.
- 2.2 The Department of Disability, Housing and Community Services is a relatively new department and is currently in its second year of operation. The Committee notes that during the financial year 2003-04, the Department has determined its strategic direction from a number of whole of government plans such as *Shaping Canberra's Future*, *The Canberra Plan*, *The Canberra Social Plan*, and the *Canberra Spatial Plan*.⁷
- 2.3 The work undertaken by the Department during the year has been influenced significantly by the recommendations of (and matters arising from) the Government Response to the Board of Inquiry into Disability Services and the *Steps to Reform* action strategy. In addition to providing regular reports on progress made in relation to the Disability Services report, the Department has produced the Government Responses to the Coronial Reports into the deaths of Mr Brett Ponting and Mr Neil Summerell⁸ during the reporting period.
- 2.4 The Committee notes that the Department's Strategic Plan has proved to be a practical document, which has provided a clear framework for the

⁷ *Annual Report 2003-04, Department of Disability, Housing and Community Services ACT*, Volume 1, p. 1.

⁸ *Annual Report 2003-04, Department of Disability, Housing and Community Services ACT*, Volume 1, p. 5.

development of business plans, improving client services and working with the community sector.

2.5 The Committee considered the Department's annual report to be compliant with the 2004 Annual Report Directions. The information contained in the report was clearly presented, particularly in relation to the links between output classes and results. The Chief Executive's overview also provided a very open and honest discussion of both the achievements of, and challenges faced by the Department during the reporting period.

2.6 The Committee was particularly impressed with the layout of this year's report:

... I would like to congratulate you on the way this report has been presented. I have to say, of all of the annual reports, it is probably the most readable that I have seen. I am particularly impressed with volume 2 of the annual report, which has all the attachments, which are responses to different reports.⁹

2.7 Questioning and discussion during the public hearing focussed on issues such as:

- the progress being made toward reform in the disability sector;
- access to employment for people with a disability;
- Individual Support Packages (ISP);
- funding for the Taxi Subsidy Scheme;
- the conduct of Disability Access Audits;
- Therapy ACT's involvement in the ACT Children's Plan;
- funding for community housing;
- new initiatives at Ainslie Village;
- the performance of Housing ACT; and
- rental debt recovery.

⁹ Transcript of Evidence, 20 April 2005, p. 6.

3 HEALTHPACT

- 3.1 The 2003-2004 Annual Report of Healthpact, the ACT Health Promotion Board, was prepared under Section 6(1) of the *Annual Reports (Government Agencies) Act 2004*. The report is also required to conform with other legislation, including Section 30 of the *Health Promotion Act 1995*.
- 3.2 As a public authority, Healthpact is not required to report against all the requirements of the 2004 Annual Report Directions. The Committee notes, however, that in response to comments made by the Standing Committee on Health in last year's report,¹⁰ Healthpact has attempted (as far as possible) to adhere to the Annual Report Directions in the preparation of the 2003-2004 report.
- 3.3 The Committee notes, for example, that Healthpact has made a specific effort to report on issues around community engagement and has provided more detailed information regarding major community consultation undertaken during the year. Healthpact has also met reporting requirements this year by providing appropriate information on equity and diversity issues.
- 3.4 Healthpact's Annual Report listed the following as major achievements for 2003-04:
 - the Healthpact 9th Australian Masters Games;
 - the establishment of the Healthpact Research Centre for Health Promotion and Wellbeing; and
 - the identification of Aboriginal and Torres Strait Islander communities and individuals as an affirmative action group for the 2003-04 funding round.
- 3.5 Questioning and discussion during the public hearing focussed on issues such as:
 - Healthpact's staffing profile
 - the Healthpact Awards;
 - the contribution of volunteers at the 9th Australian Masters Games;
 - Aboriginal and Torres Strait Islander reporting – and the Health Strategy

¹⁰ 2002-2003 annual and financial reports: ACT Health, Community and Health Services Complaints Commissioner, Healthpact, (Report 7), December 2003.

Project being conducted with Winnunga Nimmityjah;

- processes for encouraging community engagement; and
- research being undertaken into the social determinants of health.

4 COMMUNITY AND HEALTH SERVICES COMPLAINTS COMMISSIONER

4.1 The Community and Health Services Complaints Commissioner's Annual Report for 2003-2004 was prepared under paragraph 6(1) of the *Annual Reports (Government Agencies) Act 1995* and in accordance with the requirements of the 2004 Annual Report Directions. The report has also been prepared in conformity with paragraph 77 of the *Community and Health Services Complaints Act 1993*.

4.2 The Office of the Community and Health Services Complaints Commissioner was established in 1994. The statutory obligations of the Commissioner are outlined in the *Community and Health Services Complaints Act 1993* and the *Health Records (Privacy and Access) Act 1997*. Section 3 of the Complaints Act outlines the Commissioner's primary responsibilities as:

- to assist consumers and providers of services to resolve complaints;
- to improve services; and
- to promote the rights of consumers.

4.3 The Commissioner indicated in his review that the focus during 2003-04 financial year was:

... on improving and documenting processes for complaints management, staff management and relationships with consumers, providers and regulators of health services.¹¹

4.4 The Committee also notes that the results of a Review of Statutory Oversight and Community Advocate Agencies will have an impact on the Office – particularly during the coming year.

4.5 In his overview, retiring Commissioner Ken Patterson raised a number of

¹¹ *Community and Health Services Complaints Commissioner: Australian Capital Territory, Annual Report 2003-2004*, September 2004, p. 7.

concerns about the Government's proposal to amalgamate the Office of the Community and Health Services Complaints Commissioner with new Human Rights and Service Review Commission.

- 4.6 In response to a question from Dr Deb Foskey the new Commissioner, Mr Phillip Moss, expanded on Ken Patterson's concerns and indicated that:

The location of the new body, being within justice and community safety, presents a challenge for the health services commissioner and the disability services commissioner to make sure that, despite the location of the commission in the Attorney-General's portfolio, the links are maintained with those other agencies. Dr Sherbon and I are determined, should I be in the position of having to act or be the health services commissioner, that despite that relocation we will maintain and establish the links we presently have.¹²

- 4.7 While the Committee has no formal comment to make in relation to the Community and Health Service Commissioner's Annual Report for 2003-2004, it is noted that comments made by the Committee in previous years have been taken into account, resulting in a clearer, more readable report. The Committee is pleased to note that this year's report provides a greater insight into the relevance of the Commission and a more accurate reflection of the work undertaken by the Commissioner.

5 ACT HEALTH

- 5.1 ACT Health's annual report for 2003-04 was prepared under Section 5(1) of the *Annual Reports (Government Agencies) Act 2004* and in accordance with the 2004 Annual Report Directions.
- 5.2 The Committee notes that 2003-04 was the first full financial year during which ACT Health has operated as an individual entity. This follows the repeal, in December 2002, of the purchaser/provider structural arrangements.
- 5.3 ACT Health consists of four key health service delivery agencies:
- The Canberra Hospital
 - Calvary Public Hospital

¹² Transcript of Evidence, 21 April 2005, p. 56.

- Community Health; and
- Mental Health ACT.

5.4 In his overview, the Chief Executive of ACT Health reported that the Department has been operating 'within an environment characterised by increasing demand'.¹³ The overview also made note of the following as being issues of significance during the 2003-2004 financial year:

- Inpatient services have been expanded by 8%.
- There has been a 60% increase in admissions since the early 1990s – due largely to an ageing population and reduced community access to GPs.
- There has been an increase in the demand for renal dialysis services.
- There has been an increase in the use of the Children at Risk Assessment Unit – following a refocusing of the service (in line with recommendations contained in the Vardon report)¹⁴.
- There has been an increased emphasis on strengthening partnerships with key stakeholder organisations.
- A new system of contractual arrangements for Visiting Medical Officers (VMOs) has been developed.
- The Department has conducted a successful recruitment drive for pharmacists during 2003-04.

5.5 The Committee notes that one of the key structural changes since last year's annual report is the abolition of the position of Executive Director, Corporate Services. The corporate services areas of finance, information and human resources now report directly to the Chief Executive. In terms of accountability, the Committee is also pleased to note that an Internal Audit Co-ordinator position has been created within the Department.

5.6 The Committee considered the Department's annual report to be compliant with the 2004 Annual Report Directions. The Committee is also pleased to note that ACT Health contracted a professional writer to prepare this year's report which has resulted in improved layout and readability. The Department has obviously taken note of issues raised by previous Health Committees in past years, and the report has been more appropriately structured.

¹³ *ACT Health Annual Report 2003-04*, Australian Capital Territory, September 2004, p. 1.

¹⁴ *The Territory as a Parent: Review of the Safety of Children in Care in the ACT and of ACT Child Protection Management*, May 2004.

- 5.7 The Committee notes, for example, that the report includes tables listing the implementation of Assembly Committee recommendations agreed to by the Government of the day. The Committee also notes that the Department has made an effort to limit the use of acronyms in this year's report.
- 5.8 In terms of this year's report, the Committee has only minor editorial comments to make in relation to the report. It would encourage the Department to provide a list of acronyms (even if their use is limited) at the beginning of the report and to provide a slightly more detailed index – as an additional tool for the reader.
- 5.9 Questioning and discussion during the public hearing focussed on issues such as:
- Ante-natal Shared Care Guidelines;
 - Commonwealth funding issues;
 - ANU Medical School and retention of interns;
 - Patient Mobility Status Chart/s;
 - increase in 'high urgency' cases;
 - access to General Practitioners;
 - increase in demand for cancer services;
 - shortage of, recruitment of, radiologists;
 - changes to rostering arrangements – Canberra Hospital;
 - Mental Health Strategy; and
 - integration of mental health services.

6 CONCLUSIONS

Human Rights and Service Review Commission (HRSRC)

- 6.1 The Committee would like to acknowledge the potential impact of the proposed Human Rights and Service Review Commission (HRSRC) on the functions and activities of agencies and areas within the Disability, Housing and Community Services and Health portfolios. The impact of the new Commission is likely to become more apparent during the 2004-2005 financial year, however a number of references have been made to the new administrative arrangements in this year's annual reports.

- 6.2 The Government's decision to establish the HRSRC follows the Board of Inquiry into Disability Services and the ACT Health Review – both of which indicated that there was a need for a more strategic and integrated approach to statutory oversight and community advocate functions in the ACT.
- 6.3 The new Commission will encompass the Human Rights Commissioner, Discrimination Commissioner, Health Services Commissioner, Disability Services Commissioner and Community Services Commissioner. It is proposed that Commissioners will be appointed for five-year terms.¹⁵
- 6.4 The ACT Government has committed to establishing a Commissioner for Children and Young people (in response to the Vardon Report) as well as an Official Visitors Scheme for Disability. It is also proposed that the Official Visitors for mental health, child protection, disability and youth justice will relocate to the office of the ACT Public Advocate.
- 6.5 Commissioners will have statutory functions and powers appropriate to their areas of responsibility. In addition to investigating complaints, Commissioners will undertake monitoring, mediation, referral, compliance and community education activities.¹⁶

Report Content and Presentation

- 6.6 The Committee is pleased with the presentation of this year's annual reports, particularly as a number of the recommendations made in relation to previous reports have been taken into consideration and incorporated into this year's reports.
- 6.7 The Committee welcomes the effort made by agencies such as Healthpact and the Community and Health Services Complaints Commissioner. These agencies are not officially required to report against all of the requirements of the Annual Report Directions, but have attempted, as far as possible to take the Committee's views into consideration and meet the requirements of the Directions for 2003-2004.
- 6.8 The Committee is generally pleased with the performance measures used in this year's reports and notes that both the Department of Disability, Housing

¹⁵ *The right system for rights protection: An ACT Government Position Paper on the System of Statutory Oversight in the ACT*, August 2004, p. 1.

¹⁶ *The right system for rights protection: An ACT Government Position Paper on the System of Statutory Oversight in the ACT*, August 2004, p. 16.

and Community Services and ACT Health have made a significant effort to provide clearer links between output classes and performance measures in the qualitative reports of agency areas.

Karin MacDonald, MLA

Chair

June 2005

APPENDIX A: List of Witnesses

Public Hearing – Wednesday, 20 April 2005

- Mr John Hargreaves, MLA, Minister for Disability, Housing and Community Services

Department of Disability, Housing and Community Services –

- Ms Sandra Lambert, Chief Executive
- Dr Colin Adrian, Deputy Chief Executive
- Mr Martin Hehir, Executive Director, Housing and Community Services
- Ms Bronwen Overton-Clarke, Executive Director, Policy and Organisational Services
- Ms Lois Ford, Executive Director, Disability ACT
- Ms Rosalie Hardy, Senior Manager, Therapy ACT
- Mr Adam Stankevicius, Senior Manager, Strategic Policy and Organisational Governance
- Mr Ian Hubbard, Director, Finance and Budget
- Ms Roslyn Hayes, Director, Disability ACT
- Ms Helen Fletcher, Director, Housing ACT
- Mr David Collett, Director, Strategic Asset Management, Housing and Community Services

Public Hearing – Thursday, 21 April 2005

- Mr Simon Corbell, MLA, Minister for Health

ACT Health

- Dr Tony Sherbon, Chief Executive
- Mr Mark Cormack, Deputy Chief Executive
- Mr Ron Foster, Chief Finance Officer
- Ms Laurann Yen, General Manager, Community Health
- Mr Brian Jacobs, General Manager, Mental Health ACT
- Mr John Mollett, General Manager, Canberra Hospital

- Ms Vicki Williams, Calvary Public Hospital
- Mr Paul Dugdale, Chief Health Officer and Executive Director, Population and Health Division
- Mr Doug Jackman, Director, Human Resource Management Branch
- Mr Owen Smalley, Chief Information Officer, Information Services Branch
- Mr Ian Thompson, Executive Director, Policy Division

Healthpact

- Ms Kerrie Arabena, Chairperson
- Ms Sam Moskwa, Director

Community and Health Services Complaints Commissioner

- Mr Phillip Moss, Commissioner
- Ms Roxane Shaw, Principal Investigations Officer