



# Inquiry into endometriosis and other pelvic pain conditions

## Answer to question taken on notice

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Asked by: Mr Thomas Emerson MLA

Addressed to: Minister for Health

In relation to: Outpatient clinic data

Ms Katherine Wakefield took on notice the following question(s):

**THE CHAIR:** Okay; thank you. I understand it is not being done now. Is this something that is a priority for the government, to be able to bring more staff in and train them up to do that, to do those scans? We have heard all day about the benefit of an early diagnosis and how much that can save—obviously, a lot of suffering, but also time and money down the track.

**Ms Stephen-Smith:** One of the things that we will look for, coming out of this inquiry, is where the committee concludes that we really need to focus our effort.

Obviously, there is a lot we could do. In every space across the health system, there is more that we can do. We do not have the resources to do everything, everywhere, all at once. That will be something that we assess, and we will look forward to the committee's view about where we should be focusing our resources in this space.

**Dr Glading:** There is work happening nationally. I was at a meeting yesterday, and the college of obstetrics was there as well. Part of what we are talking about is that you need to have enough trainers to train the clinicians who might have an interest and who want to. Yesterday's meeting talked about how we create capabilities so that our trainers can train those who are coming, not just as their replacement but to increase. We were looking at that across multiple disciplines, but gynaecology was one of the key areas that we were looking at.

Nationally, there is some focus on how we do that, so that when the timing is right for ACT to hire someone with that skill, there are people with that skill. While it might not be something we are doing specifically locally, we are still tapped into pushing that agenda at that national level and working with the colleges.

**Dr Van Diemen:** RANZCOG also are doing a piece of work on establishing what qualifications and guidelines are required, and skills to be able to do the scans and be able to read the scans. We will wait for that piece to come out.

**THE CHAIR:** Ms Wakefield, you look like you may have finished searching.

**Ms Wakefield:** Yes. I do have a figure, but it is internal operating data. In the gynae outpatient clinic, we have a single-pool wait queue; our doctors triage that and we are able to triage those onto a

separate work queue. Rather than having general outpatient data, I think it is that data that you are looking for. If we take that on notice, we can give you that based on category.

**THE CHAIR:** That would be great. Any detail that you are able to provide would be fantastic.

**Question: What do the wait times in the Canberra Endo Centre look like?**

**Rachel Stephen-Smith: The answer to the Member’s question is as follows:**

- Referrals to the gynaecology outpatients are reviewed and clinically triaged by a specialist gynaecologist, with patients prioritised according to clinical need as per below.
  - Category 1: Appointments that are clinically indicated within 30 days
  - Category 2: Appointments that are clinically indicated within 90 days
  - Category 3: Appointments that are clinically indicated within 365 days
- During triage, patients identified as suitable for the Endometriosis and Pelvic Pain (EPP) pathway are referred for further review by the EPP physiotherapist to determine the most appropriate model of care, including a group appointment or an individual appointment with a physiotherapist, registered nurse, or doctor.
- Referrals are then processed for booking and allocation.
- Patients are subsequently contacted to arrange participation in the most appropriate care pathway. Where a patient is allocated to a group session and is unable or unwilling to participate, a one-on-one appointment is offered as an alternative.

The Canberra Hospital, Endometriosis / Pelvic Pain work queue data as of 27 May 2026 is:

Canberra Hospital 27.05.2026	Priority	Total Waitlist	Overdue	% overdue
	CAT 1	3	0	0
	CAT 2	184	97	53
	CAT 3	2	0	0
	<b>Total</b>	<b>189</b>	<b>97</b>	<b>53</b>

*Note: This data has been prepared using DHR operational level data and therefore is subject to change following data maturation processes and may differ from any activity numbers published externally.*

Approved for circulation to the Standing Committee on Social Policy

Signature:



Date: 7/6/26

By the Minister for Health, Rachel Stephen-Smith MLA