ACT Government
Digital Canberra

DECISION ON OPEN ACCESS INFORMATION – MINISTERIAL BRIEFINGS

In accordance with section 24 of the *Freedom of Information Act 2016* (FOI Act), an agency or Minister must make open access information of the agency or Minister publicly available unless the information is contrary to the public interest information.

Section 23 of the FOI Act

Section 23(1)(i) states open access information includes any of the following ministerial briefs prepared by the agency that are 5 or more years old:

(i) incoming ministerial briefs;
(ii) parliamentary estimates briefs;
(iii) annual reports briefs;
(iv) question time briefs.

Authority

I am an Information Officer appointed by the Director-General of Digital Canberra (DCBR) under section 18 of the FOI Act to ensure that the agency meets its obligation to publish open access information under Part 4 of the Act.

Searches and material considered

Ten documents have been identified holding the information within scope of section 23(1)(i) of the FOI Act. This package contains Question Time Briefs (QTB) and Budget Estimates Briefs.

In reaching my access decision, I have taken the following into account:

- The FOI Act;
- The contents of the documents that fall within the open access information scheme; and
- The views of relevant subject matter experts.

Decision on access

My decision is to grant full access to the information in the identified documents.

Review rights

ACT Ombudsman
My decision is a reviewable decision as identified in Schedule 3 of the FOI Act. You have the right to seek Ombudsman review of this decision under section 74 of the FOI Act within 20 working days from the day that my decision is published on the ACT Governments Open Access website, or a longer period allowed by the Ombudsman.

If you wish to request a review of my decision you may write to the Ombudsman at:

The ACT Ombudsman
GPO Box 442
CANBERRA ACT 2601
Via email: ACTFOI@ombudsman.gov.au

Alternatively, you may wish to visit the website https://www.ombudsman.act.gov.au/accountability-and-oversight/freedom-of-information/foi-complaints-and-reviews.

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an ACT Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision.

If you wish to request a review of the Ombudsman decision you may write to the ACAT at:

ACT Civil and Administrative Tribunal
Allara House
15 Constitution Avenue
GPO Box 370
Canberra City ACT 2601
Telephone: (02) 6207 1740

Further information may be obtained from the ACAT at: http://www.acat.act.gov.au/.

Further assistance

Should you have any queries or would like further information, please do not hesitate to contact the Senior FOI Officer on (02) 6205 8410 or via email at digitalcanberrafoi@act.gov.au.

Yours sincerely

[redacted]

Peita Bonato
Executive Branch Manager
Ministerial & Government Services
Digital Canberra

23 April 2026

ACT Government
Digital Canberra

Open Access Information Scheme – Quarter 1 2021

Ref no.	Page number	Title	Status	Reason for Exemption
QUESTION TIME BRIEFS – FEBRUARY 2021 SITTING				
1	1 - 2	Digital Health Record	Full release	Not applicable
2	3 - 4	Minister's Fact Sheet	Full release	Not applicable
3	5 - 7	Quarterly Performance Reporting and Publication of Data for Consumers	Full release	Not applicable
4	8 - 13	Mental Health Access and Utilisation Rates	Full release	Not applicable
BUDEGET ESTIMATES BRIEFS – FEBRUARY 2021				
5	14 - 15	Key General Statistics – February 2021 – ACT Health Directorate – Health	Full release	Not applicable
6	16 - 17	Key General Statistics – February 2021 – ACT Health Directorate – Mental Health	Full release	Not applicable
QUESTION TIME BRIEFS – MARCH 2021 SITTING				
7	18 - 22	Mental Health Access and Utilisation	Full release	Not applicable
8	23 - 25	Digital Health Record	Full release	Not applicable
9	26 - 27	Minister's Fact Sheet	Full release	Not applicable
10	28 - 30	Quarterly Performance Reporting and Publication of Data for Consumers	Full release	Not applicable

QUESTION TIME BRIEF

TRIM Ref: GBC20/708

Portfolio: Health

DIGITAL HEALTH RECORD

Talking points

- The ACT Health Directorate signed a 10-year $114 million contract in July 2020 with Epic, a world-leading provider of digital medical record systems to deliver the ACT's Digital Health Record, which will be operational in 2022-23.
- The ACT Digital Health Record is a key priority in achieving the vision outlined in the *2019-29 ACT Digital Health Strategy.* It will enable clinicians to have a single view of a patient and to have access to all relevant treatment protocols and forms, in context for each case.
- Clinical and administrative staff as well as consumers will be closely involved in the implementation of the Digital Health Record.
- The ACT Digital Health Record will be implemented in all ACT public health services, including across our public hospitals, Walk-in Centres, Community Health Centres, and justice health.
- The ACT's Digital Health Record will be purpose built to securely manage information in one place to ensure that patient information is safe and protected.
- The Digital Health Record team consists of approximately 140 staff and commenced on 27 January 2021.
- The Digital Health Record Program Board commenced in September 2019. Lower level governance committees are being established.
- More than 300 subject matter experts have been identified who will provide key clinical guidance to the program team to ensure that the program remains clinically led.

Background

- The 2018-19 budget committed $151 million, comprised of $106 million capital and $45 million recurrent funding to the Digital Health Record over eight years.

Cleared as complete and accurate:	21 Jan 2021	
Cleared by:	Chief Information Officer	Ext: 49000
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Lead Directorate:	Health	
Information Officer name:	Sandra Cook	
TRIM Ref:	GBC20/708	

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- Configuration of the Digital Health Record will begin in early 2021 and will be operational in 2022-23.
- The contract with Epic is for 10 years, totalling to $114,802,796 (GST exclusive).
- The Tender Evaluation Team comprised of clinicians, consumer representatives and ICT experts. This team, along with more than 100 subject matter experts from the ACT public health services, non-government organisations and consumer representatives provided feedback and advice during the tender evaluation process.
- The Digital Health Record complements the national My Health Record. The Digital Health Record is a more detailed record than the My Health Record, which only holds a summary of key health information.
- The Digital Health Record will contain the detail of a person's care, including which bed they are in, which theatre they are booked into, detailed observations and the time their treatments and medications are required and administered.
- The My Health Record contains a snapshot summary of this care which is particularly useful when a person is treated at a health service outside of the ACT public health system such as physios, GPs, private hospitals, or hospitals in other jurisdictions.
- Maddocks, an external legal firm have been engaged by the ACT Government Solicitor's Office to undertake a Privacy Impact Assessment for the Digital Health Record. This will support the team in addressing any risks associated with the management of the personal health information and sensitive information that will be stored.
- A Deed was executed with NTT Australia Pty Ltd in December 2020 for the hosting of the Digital Health Record and its related systems.
- The contract with NTT Australia Pty Ltd is for 5 years and will operate under a work order arrangement.
- Procurement is currently underway for three systems that are required to support the effective implementation of the Digital Health Record as outlined below:
    - A blood bank solution as Epic does not provide blood bank functionality within its pathology module due to the tight regulatory framework around the provision of blood and blood products.
    - Pathology analyser integration middleware to streamline the integration of pathology analysers into the Digital Health Record.
    - Device integration middleware to facilitate the integration of medical devices to the Digital Health Record. This will increase efficiency and reduce errors that can occur when transcribing information from devices onto paper or other systems.

QUESTION TIME BRIEF

GBC20/708

Portfolio: Health

ISSUE: MINISTER'S FACT SHEET

	YTD 2019-20	YTD 2020-21	change	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
Walk-in Centres							
Number of presentations to Walk-in Centres	17,481	12,401	-29.1%	17,707	21,798	9,516	12,401
COVID-19 Testing Centres							
Number of presentations to COVID-19 Testing Centres	n/a	52,327			1,620	21,424	52,327
Emergency department							
Number of presentations by hospital							
Canberra Hospital	23,954	21,818	-8.9%	23,362	21,871	18,201	21,818
Calvary Public Hospital Bruce	14,230	13,821	-2.9%	14,199	13,932	11,271	13,821
Total	**38,184**	**35,639**	**-6.7%**	**37,561**	**35,803**	**29,472**	**35,639**
Number of presentations by triage category							
1—Resuscitation	267	224	-16.1%	257	270	226	224
2—Emergency	4,509	4,194	-7.0%	4,649	4,202	3,809	4,194
3—Urgent	17,481	15,732	-10.0%	16,977	15,753	12,844	15,732
4—Semi-urgent	13,670	13,151	-3.8%	13,333	13,243	10,746	13,151
5—Non-urgent	2,257	2,338	3.6%	2,345	2,335	1,847	2,338
Total	**38,184**	**35,639**	**-6.7%**	**37,561**	**35,803**	**29,472**	**35,639**
Percentage of patients seen on time by triage category[1]							
1—Resuscitation	99.6%	100.0%	0.4	100%	100%	100.0%	100.0%
2—Emergency	72.8%	78.7%	5.9	73.6%	76.4%	78.8%	78.7%
3—Urgent	25.8%	43.0%	17.2	26.7%	30.6%	57.3%	43.0%
4—Semi-urgent	40.6%	58.4%	17.8	40.6%	48.0%	77.1%	58.4%
5—Non-urgent	78.9%	88.6%	9.7	78.6%	82.2%	97.8%	88.6%
Total	**40.4%**	**56.2%**	**15.8**	**41.3%**	**42.3%**	**70.1%**	**56.2%**
Proportion of presentations with a length of stay of 4 hours or less[2]							
Canberra Hospital	51.8%	55.3%	3.5	51.1%	53.3%	62.2%	55.3%
Calvary Public Hospital Bruce	61.0%	66.8%	5.8	61.5%	63.4%	68.1%	66.8%
Total	**55.2%**	**59.8%**	**4.6**	**55.0%**	**57.2%**	**64.5%**	**59.8%**

1. The benchmarks for seen on time are as follows:

- *Triage category 1—100%*
- *Triage category 2—80%*
- *Triage category 3—75%*
- *Triage categories 4, 5 and overall—70%*

2. The performance benchmark for emergency department presentations with a length of stay of 4 hours or less is 90%.

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ACT Government

QUESTION TIME BRIEF

	YTD 2019-20	YTD 2020-21	change	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
Elective surgery waiting lists							
Number of patients waiting longer than clinically recommended at end of period	594	1,013	70.5%	783	889	1,317	1,013
Percentage of elective surgery prorcedures performed within clinically recommended timeframes							
Urgency 1 (see within 30 days)	96.6%	98.3%	1.7	97.9%	97.0%	98.3%	98.3%
Urgency 2 (see within 90 days)	70.8%	60.3%	-10.5	70.6%	61.9%	48.6%	60.3%
Urgency 3 (see within 365 days)	75.8%	70.7%	-5.1	75.6%	76.0%	77.0%	70.7%
Total number of elective surgery procedures	3,840	3,982	3.7%	3,477	3,087	2,448	3,982
Additions to the elective surgery waiting list	4,452	4,300	-3.4%	4,035	3,732	3,097	4,300
Separations from public hospitals							
Number of inpatient separations							
Same day	15,313	15,966	4.3%	15,282	14,654	13,642	15,966
Overnight	15,115	14,838	-1.8%	14,548	13,654	12,703	14,838
Total	**30,428**	**30,804**	**1.2%**	**29,830**	**28,308**	**26,345**	**30,804**

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QUESTION TIME BRIEF

GBC20/708

Portfolio: Health

QUARTERLY PERFORMANCE REPORTING AND PUBLICATION OF DATA FOR CONSUMERS

Talking points:

Quarterly Performance Report – July to September 2020

Patient experience

- The quarterly performance report continues to show that the vast majority of people treated in our public hospitals experience a high quality of care.
- 96.3 per cent of patients provided positive feedback on their experience within Canberra Health Services and 97.5 per cent reported a positive experience at Calvary Public Hospital Bruce. This is an increase for both services on their already high results from the previous quarter.

Emergency presentations

- Since restrictions relating to the COVID-19 pandemic have been lifted, we've seen activity in our emergency departments returning to pre-COVID levels.
- There were 35,639 emergency department presentations in Quarter 1, 2020-21, with 8,525 patient arrivals via ambulance, an increase of 20.9 and 15.9 per cent respectively, compared to Quarter 4, 2019-20.
- 100 per cent of Category 1 patients were seen on time in 2019-20 and Quarter 1, 2020-21. The timeliness performance for Category 2 patients improved each quarter in 2019-20, and maintained at just one percentage point below target in Quarter 1, 2020-21 (79 per cent against the target of 80 per cent).
- 59.8 per cent of patients were treated and left the emergency department within four hours.
    - Although this is a decrease of 4.7 per cent from the previous quarter in April to June 2020 during the height of COVID-19 restrictions, it is an improvement of 2.6 per cent from the January to March 2020 quarter when activity was relatively normal.

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- Median waiting times in the most urgent triage categories remained the same as the previous quarter, with all Category 1 patients treated immediately and Category 2 patients waiting only 6 minutes for treatment. Both median waiting times are in line with the recommended national treatment times.
- In the less urgent triage categories (i.e. Categories 3-5), the median waiting time to treatment increased by more than 50 per cent in each triage category compared with the previous quarter. The median waiting time ranged between 38-49 minutes for these three categories.
    - While there were increases for each triage category, when compared with two quarters ago (i.e. January to March 2020), the median waiting times for each category improved substantially.

Elective surgeries

- In the first quarter of 2020-21, the ACT delivered 3,982 elective surgeries, an increase of 62.7 per cent from the previous quarter, and is on track to deliver a record number of elective surgeries this financial year.
- The number of overdue patients waiting for their elective surgery reduced by 23.1 per cent to 1,013 patients in Quarter 1, 2020-21.
- While there was an increase in the number of people added to the elective surgery waiting list compared with the previous quarter, overall the number of people on the waiting list has also decreased.
- The significant increase in elective surgeries in Quarter 1, 2020-21 has been part of the ACT Government's recent investment of $30 million for COVID-19 prevention, preparedness and recovery of services impacted by the COVID-19 shutdown.

Walk-in Centres and COVID-19 Testing Centres

- Our Nurse-led Walk-in Centres continue to be very popular with Canberrans, with the opening of a fifth Walk-in Centre in the Inner North in August 2020 and the important role that the Weston Creek Walk-in Centre has played in responding to COVID-19.
- The Walk-in Centres experienced an increase in presentations of 30.3 per cent compared with the April to June 2020 quarter. This excludes presentations to the Weston Creek Walk-in Centre, which was a dedicated COVID-19 respiratory clinic and testing centre.

- During the July-September quarter, the six COVID-19 respiratory clinics and testing centres saw a total of 52,327 presentations, an increase of 144.2 per cent from the previous quarter. This ensured that everyone who needed to be tested had timely and convenient access.

Publication of Data for Consumers

- The ACT Government continues to improve the information available on our public health system and the health of Canberrans.
- In addition to existing sources of timely health information like the Quarterly Performance Report, HealthStatsACT and the ACT Government's Open Data Portal, the ACT Government also publishes the COVID-19 dashboard on covid19.act.gov.au to provide Canberrans with up-to-date case information and visualisations.

QUESTION TIME BRIEF

GBC20/709

Portfolio: Mental Health

MENTAL HEALTH ACCESS AND UTILISATION RATES

Talking points:

- Mental health is a key priority area for the ACT Government.
- The ACT Government has invested significantly in mental health – as recently as last week when we announced in the February 2021 ACT Budget that we are investing over $19 million into the mental health system.
- These investments include:
    - $3.156 million for Child and Adolescent Mental Health Services (CAMHS) to ensure the continuation of the Adolescent Mobile Outreach Service;
    - $14.1 million to the Police, Ambulance and Clinician Early Response (PACER) program through until 2024;
    - $1.7 million to continue a range of mental health programs and services that were funded by the COVID-19 Mental Health Support Package, which was originally announced in May 2020; and
    - $655,000 to establish two scoping studies for multidisciplinary services for adolescents and young people and to fund an Alcohol and Other Drug Nurse.
- We have made these investments to support the mental health needs of Canberrans whose mental health has been impacted by the COVID-19 pandemic.
- These themes focus on early intervention, care in the community and diversion from acute services. Investments support help-seeking for mental health issues within the community and help people manage the challenges that the pandemic poses for mental wellbeing.
- These investments support a range of initiatives that we have taken to improve the capacity of the acute system in the ACT and meet the needs of the growing Canberra community. This includes the work underway to deliver an Adolescent Mental Health Unit by September 2022 and work to provide additional capacity for surge beds in the system.
- These investments aim to develop a dynamic and flexible service that improves safety for staff and consumers and improves the quality of care that can be provided.

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- The *2021 Report on Government Services*, which includes data up to the 2018-19 financial year, shows that the ACT Government has increased its expenditure on public mental health services year on year to meet the demand from the community.
- The ACT Government provided $121.5 million for public mental health services in 2018-19, compared to $109.9 million the previous year. This includes expenditure across services in hospital admitted patient settings, emergency departments and community mental health settings.

Mental health presentations to emergency departments (EDs)

- The number of mental health presentations to ACT emergency departments have generally remained stable throughout the past 6 months, during which time our COVID-19 restrictions have applied.

Table 1: Mental health presentations to ACT EDs, 6 months to 31 January 2021

	Aug 2020	**Sept 2020**	**Oct 2020**	**Nov 2020**	**Dec 2020**	**Jan 2021**
Canberra Hospital ED	330	266	304	261	266	260
Calvary Public Hospital Bruce ED	202	168	159	187	175	165
ACT ED total	**532**	**434**	**463**	**448**	**441**	**425**

Mental health ward utilisation rates

- The ward utilisation rates for mental health adult overnight beds continued to be high throughout the past 6 months, with utilisation rates regularly exceeding the number of permanently resourced beds.

Table 2: Mental health utilisation rates, 6 months to 31 January 2021

	No. of beds	Aug 2020 (%)	Sept 2020 (%)	Oct 2020 (%)	Nov 2020 (%)	Dec 2020 (%)	Jan 2021 (%)
Canberra Hospital	46	97.88%	97.59%	97.03%	98.64%	95.95%	95.86%
Adult Mental Health Unit (AMHU)	40	98.15%	97.76%	97.31%	99.27%	96.94%	96.72%
Mental Health Short Stay Unit (MHSSU)	6	96.07%	96.48%	95.18%	94.40%	89.38%	90.08%
Calvary Public Hospital Bruce	41	108.06%	103.80%	108.91%	111.46%	108.09%	108.84%
Acacia Ward (formerly Ward 2N)	21	98.21%	88.36%	97.75%	97.30%	94.31%	98.21%
Older Persons Mental Health Unit (OPMHU)	20	121.85%	125.40%	124.53%	131.28%	127.38%	123.72%
ACT total	**87**	**102.35%**	**100.32%**	**102.25%**	**104.27%**	**101.28%**	**101.56%**

<u>Access to mental health services for admitted patients (Quarterly Performance Report July-September 2020)</u>

- Despite continued strong emergency department presentations and sustained ward utilisation rates exceeding capacity, the recently published *ACT Public Health Services Quarterly Performance Report* shows that mental health overnight bed days of care decreased by 17 per cent in the July to September 2020 quarter, when compared with the previous quarter.
- Overnight bed days of care are calculated in accordance with national reporting methods used by the Australian Institute of Health and Welfare, where a patient's complete episode of care is counted on their discharge. The quarter preceding July to September 2020 had a number of patients discharged with combined stays exceeding 2,000 days. The

totality of those bed days are captured and reported in that quarter, rather than spread throughout the year. This means quarterly statistics vary considerably and do not reflect demand and utilisation rates.

Table 3: Comparison of mental health overnight bed days of care

	July to September 2020 (bed days)	April to June 2020 (bed days)	Percentage change (%)
Canberra Hospital	4,469	5,975	-25.2
Calvary Public Hospital Bruce	3,380	3,746	-9.8
University of Canberra Hospital	1,586	1,663	-4.6
ACT total	**9,435**	**11,384**	**-17.1**

- The total average length of stay for mental health overnight patients decreased by 18 percent in the July to September 2020 quarter, when compared with the previous quarter. However, when compared to the same quarter in the previous year there was only a 5 per cent decrease.
- Similarly, this result is due to the separation of three extremely long stay patients in the previous quarter with a combined length of stay in excess of 2,000 days. In Quarter 1, 2020-21 there were no separations of patients with similar lengths of stay, hence the reported difference.

Table 4: Comparison of average length of stay for mental health overnight patients

	July to September 2020 (days)	April to June 2020 (days)	Percentage change (%)
Canberra Hospital	11.3	14.7	-23.1
Calvary Public Hospital Bruce	20.5	25.1	-18.3
University of Canberra Hospital	56.6	61.6	-8.1
ACT total	**16.0**	**19.6**	**-18.4**

Background Information

New projects and funding commitments

- The projects planned by the ACT Government will improve and expand clinical spaces to provide improved physical and psychological safety for people admitted to

acute services as well as improving staff safety and reduce the level of occupational violence. These projects include:

  - Increasing the number of High Dependency bed capacity across the Territory to meet the needs of the changing demand for people requiring access to high acuity services; and
  - Increasing the number of Low Dependency (LDU) bed capacity across the Territory to meet the needs of the increasing demand for people requiring access to acute Mental Health services.

- As part of the $4.5 million Mental Health Support Package, the ACT Government is investing in programs to increase options to respond early to mental health issues and suicidal crisis, reducing demand on critical emergency and crisis services:
  - $720,000 to expand Access Mental Health and Home Assessment Acute Response Team (HAART);
  - $720,000 to expand the tri-service Police, Ambulance and Clinician Emergency Response (PACER) service to 7 days a week;
  - $500,000 for transitional accommodation services to address delays to discharge form acute services due to accommodation issues;
  - $341,843 to commence work on establishing two safe haven cafes to better support for people in distress and reduce demand on emergency and crisis services;
  - $250,000 for an Aboriginal and Torres Strait Islander suicide prevention Program;
  - Funding to support community organisations adapt to new modes of service delivery; and
  - A grants program to support innovative approaches to promote mental health and wellbeing in the ACT community. The range of projects will be supported by appropriate resources to match the increase in capacity and demand.
- The ACT Government has also committed to a range of additional investments and supports for mental health and suicide prevention in the Parliamentary and Governing Agreement for the 10th Legislative Assembly. This Agreement outlines a progressive agenda for the ACT Government to strive towards over the next 4 years and includes a range of important mental health programs including:
  - Expansions to PACER;
  - Improving the emergency department experience for people with the development of a Psychiatric Alcohol and non-prescription Drugs Assessment Unit;
  - Building additional supported accommodation houses;
  - Boosting community counselling, mentoring, home visits, advocacy and case management for young people; and

- Improving the range of programs that target and support youth mental health, eating disorders, alcohol and substance use with mental health, First Nations mental health, First Nations suicide prevention and postvention and respite for mental health carers.

Mental health beds at ACT public hospitals

- At Canberra Hospital, AMHU and MHSSU have 46 adult admitted patient mental health beds, providing voluntary and involuntary psychiatric care and treatment for people with a mental health illness.
- At Calvary Public Hospital Bruce, the Acacia Ward and OPMHU have 41 adult admitted patient mental health beds, providing voluntary and involuntary psychiatric care and treatment. In 2020-21, the ACT Government has funded an additional 5 mental health "surge" beds, which are included in the total of 41 beds.
- There are currently no dedicated adolescent mental health beds in the ACT. The model of care for children and young people requiring admitted patient mental health services is that they are admitted to the most appropriate admitted patient unit under the lead care of a paediatrician. A dedicated adolescent mental health facility is planned for opening in late 2022 as part of an integrated adolescent unit within the Centenary Hospital for Women and Children.

Calculation methods

Tables 2 and 3

- Overnight bed days and average lengths of stay are calculated in accordance with national counting rules, where a patient's episode of care is not counted until the episode is complete and they are discharged from hospital.
- Depending on the timings of patient admissions and discharges within a quarter, and due to the relatively small population serviced by ACT public hospitals, a small number of episodes of care can result in substantial differences in results when comparing consecutive quarters.

Table 4

- Utilisation rates (also known as occupancy rates) are a measure of resource utilisation within available hospital funding. Utilisation rates are measured using the minutes per day that an available overnight bed is used for patient care.
- In accordance with standard calculation methods used nationally, utilisation rates are calculated using the average available overnight beds. It is possible to have a utilisation rate greater than 100 per cent if beds are temporarily opened to accommodate patients as required. These beds are generally not permanently resourced and are closed when patients depart the relevant ward.

BUDGET ESTIMATES BRIEF

GBC21/37

Portfolio/s: Health

Key General Statistics – February 2021 – ACT Health Directorate

Table 1: ACT Health Directorate staff numbers[(1)(2)]

	2018-19	2019-20	Change (%)
Full-time equivalent	539.5	613.1	13.7
Headcount	567	651	14.8

Sources

(1) *ACT Health Directorate Annual Report 2019-2*0, Table 35.

(2) *ACT Health Directorate Annual Report 2018-19*, Table 15.

Table 2: ACT public health services – overall activity and performance[(3)]

	YTD 2019-20 (Q1 only)	YTD 2020-21 (Q1 only)	Change (%)	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
Walk-in Centres							
Number of presentations to Walk-in Centres	17,481	12,401	-29.1	17,707	21,798	9,516	12,401
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4—Semi-urgent	13,670	13,151	-3.8	13,333	13,243	10,746	13,151
5—Non-urgent	2,257	2,338	3.6	2,345	2,335	1,847	2,338
Total	**38,184**	**35,639**	**-6.7**	**37,561**	**35,803**	**29,472**	**35,639**
Percentage of patients seen on time by triage category							
1—Resuscitation	99.6%	100.0%	0.4	100%	100%	100.0%	100.0%
2—Emergency	72.8%	78.7%	5.9	73.6%	76.4%	78.8%	78.7%
3—Urgent	25.8%	43.0%	17.2	26.7%	30.6%	57.3%	43.0%
4—Semi-urgent	40.6%	58.4%	17.8	40.6%	48.0%	77.1%	58.4%
5—Non-urgent	78.9%	88.6%	9.7	78.6%	82.2%	97.8%	88.6%
Total	**40.4%**	**56.2%**	**15.8**	**41.3%**	**42.3%**	**70.1%**	**56.2%**

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Lead Directorate: Health
TRIM Ref: GBC21/37

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	YTD 2019-20 (Q1 only)	YTD 2020-21 (Q1 only)	Change (%)	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
Proportion of presentations with a length of stay of 4 hours or less							
Canberra Hospital	51.8%	55.3%	3.5	51.1%	53.3%	62.2%	55.3%
Calvary Public Hospital Bruce	61.0%	66.8%	5.8	61.5%	63.4%	68.1%	66.8%
Total	**55.2%**	**59.8%**	**4.6**	**55.0%**	**57.2%**	**64.5%**	**59.8%**
Elective surgery waiting lists							
Number of patients waiting longer than clinically recommended at end of period	594	1,013	70.5	783	889	1,317	1,013
Percentage of elective surgery procedures performed within clinically recommended timeframes							
Urgency 1 (see within 30 days)	96.6%	98.3%	1.7	97.9%	97.0%	98.3%	98.3%
Urgency 2 (see within 90 days)	70.8%	60.3%	-10.5	70.6%	61.9%	48.6%	60.3%
Urgency 3 (see within 365 days)	75.8%	70.7%	-5.1	75.6%	76.0%	77.0%	70.7%
Total number of elective surgery procedures	3,840	3,982	3.7	3,477	3,087	2,448	3,982
Additions to the elective surgery waiting list	4,452	4,300	-3.4	4,035	3,732	3,097	4,300
Separations from public hospitals							
Number of admitted patient separations							
Same day	15,313	15,966	4.3	15,282	14,654	13,642	15,966
Overnight	15,115	14,838	-1.8	14,548	13,654	12,703	14,838
Total	**30,428**	**30,804**	**1.2**	**29,830**	**28,308**	**26,345**	**30,804**

Source

(3) *ACT Public Health Services Quarterly Performance Report (four most recent reports to Quarter 1, 2020-21)*

Table 3: ACT public health services – mental health activity and performance[(4)]

	Q4, 2019-20 (bed days)	Q1, 2020-21 (bed days)	Change (%)
Mental health overnight bed days of care			
Canberra Hospital	5,975	4,469	-25.2
Calvary Public Hospital Bruce	3,746	3,380	-9.8
University of Canberra Hospital	1,663	1,586	-4.6
ACT total	**11,384**	**9,435**	**-17.1**
Average length of stay for mental health overnight patients			
Canberra Hospital	14.7	11.3	-23.1
Calvary Public Hospital Bruce	25.1	20.5	-18.3
University of Canberra Hospital	61.6	56.6	-8.1
ACT total	**19.6**	**16.0**	**-18.4**

Source

(4) *ACT Public Health Services Quarterly Performance Report (two most recent reports to Quarter 1, 2020-21)*

BUDGET ESTIMATES BRIEF

GBC21/38

Portfolio/s: Mental Health

Key General Statistics – February 2021 – ACT Health Directorate

Table 1: ACT Health Directorate staff numbers[(1)(2)]

	2018-19	2019-20	Change (%)
Full-time equivalent	539.5	613.1	13.7
Headcount	567	651	14.8

Sources

(1) *ACT Health Directorate Annual Report 2019-2*0, Table 35.

(2) *ACT Health Directorate Annual Report 2018-19*, Table 15.

Table 2: ACT public health services – overall activity and performance[(3)]

	YTD 2019-20 (Q1 only)	YTD 2020-21 (Q1 only)	Change (%)	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
Walk-in Centres							
Number of presentations to Walk-in Centres	17,481	12,401	-29.1	17,707	21,798	9,516	12,401
COVID-19 Testing Centres							
Number of presentations to COVID-19 Testing Centres	n/a	52,327	n/a	n/a	1,620	21,424	52,327
Emergency departments							
Number of presentations by hospital							
Canberra Hospital	23,954	21,818	-8.9	23,362	21,871	18,201	21,818
Calvary Public Hospital Bruce	14,230	13,821	-2.9	14,199	13,932	11,271	13,821
Total	**38,184**	**35,639**	**-6.7**	**37,561**	**35,803**	**29,472**	**35,639**
Number of presentations by triage category							
1—Resuscitation	267	224	-16.1	257	270	226	224
2—Emergency	4,509	4,194	-7.0	4,649	4,202	3,809	4,194
3—Urgent	17,481	15,732	-10.0	16,977	15,753	12,844	15,732
4—Semi-urgent	13,670	13,151	-3.8	13,333	13,243	10,746	13,151
5—Non-urgent	2,257	2,338	3.6	2,345	2,335	1,847	2,338
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Lead Directorate: Health
TRIM Ref: GBC21/38

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Source

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University of Canberra Hospital	61.6	56.6	-8.1
ACT total	**19.6**	**16.0**	**-18.4**

Source

(4) *ACT Public Health Services Quarterly Performance Report (two most recent reports to Quarter 1, 2020-21)*

QUESTION TIME BRIEF

GBC21/62

Portfolio: Mental Health

MENTAL HEALTH ACCESS AND UTILISATION

Talking points:

- Mental health is a key priority area for the ACT Government. Considerable investment has been made in the ACT's mental health system over the last 10 years.
- Key achievements have included the establishment of the Office for Mental Health and Wellbeing and the appointment of an ACT Coordinator-General. The Office has a mandate to work across all of government agencies to promote action for mental health in all Government agencies. The Office is an important demonstration of the ACT Government's commitment to improving mental health for all Canberrans.
- In May 2020, the ACT Government announced the $4.5 million COVID-19 Mental Health Support Package to address increased demands on mental health support services to ensure Canberrans can receive the support they need.
- The package included a number of initiatives to support the ongoing demand for mental health care in our emergency departments and acute mental health services.
- A range of new projects are underway and in the early planning stages, to meet the needs of the growing Canberra community. This investment aims to develop a dynamic and flexible service that improves safety for staff and consumers and improves the quality of care that can be provided.
- The ACT Government, through Canberra Health Services and the ACT Health Directorate, is acting now to increase Territory-wide capacity so we can continue to provide care that meets the needs of the community.
- The recently released *2021 Report on Government Services*, which includes data up to the 2018-19 financial year, shows that demand for government mental health services continues to increase year on year. This includes services in hospital admitted patient settings, emergency departments and community mental health settings.

Cleared as complete and accurate:	09/02/2021	
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TRIM Ref:	GBC21/61	

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Mental health presentations to emergency departments (EDs)

- The number of mental health presentations to ACT emergency departments have generally remained stable throughout the previous 6 months, during which time our COVID-19 restrictions have applied.
- 6 months.

Table 1: Mental health presentations to ACT EDs, 6 months to 31 January 2021

	Aug 2020	Sept 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021
Canberra Hospital ED	330	266	304	261	266	260
Calvary Public Hospital Bruce ED	202	168	159	187	175	165
ACT ED total	**532**	**434**	**463**	**448**	**441**	**425**

Access to mental health services for admitted patients (Quarterly Performance Report July-September 2020)

- The total number of mental health overnight bed days of care decreased by 17 per cent in the July to September 2020 quarter, when compared with the previous quarter. However, when compared to the same quarter in the previous year there was only a 6 per cent decrease.

Table 2: Comparison of mental health overnight bed days of care

	July to September 2020 (bed days)	April to June 2020 (bed days)	Percentage change (%)
Canberra Hospital	4,469	5,975	-25.2
Calvary Public Hospital Bruce	3,380	3,746	-9.8
University of Canberra Hospital	1,586	1,663	-4.6
ACT total	**9,435**	**11,384**	**-17.1**

- The total average length of stay for mental health overnight patients decreased by 18 percent in the July to September 2020 quarter, when compared with the previous quarter. However, when compared to the same quarter in the previous year there was only a 5 per cent decrease.

Table 3: Comparison of average length of stay for mental health overnight patients

	July to September 2020 (days)	April to June 2020 (days)	Percentage change (%)
Canberra Hospital	11.3	14.7	-23.1
Calvary Public Hospital Bruce	20.5	25.1	-18.3
University of Canberra Hospital	56.6	61.6	-8.1
ACT total	**16.0**	**19.6**	**-18.4**

Mental health ward utilisation rates

- The ward utilisation rates for mental health adult overnight beds continued to be high throughout the previous 6 months, with utilisation rates regularly exceeding the number of permanently resourced beds.
- *Table 4: Mental health utilisation rates, 6 months to 31 January 2021*

	No. of beds	Aug 2020 (%)	Sept 2020 (%)	Oct 2020 (%)	Nov 2020 (%)	Dec 2020 (%)	Jan 2021 (%)
Canberra Hospital	46	97.88%	97.59%	97.03%	98.64%	95.95%	95.86%
Adult Mental Health Unit (AMHU)	40	98.15%	97.76%	97.31%	99.27%	96.94%	96.72%
Mental Health Short Stay Unit (MHSSU)	6	96.07%	96.48%	95.18%	94.40%	89.38%	90.08%
Calvary Public Hospital Bruce	41	108.06%	103.80%	108.91%	111.46%	108.09%	108.84%
Acacia Ward (formerly Ward 2N)	21	98.21%	88.36%	97.75%	97.30%	94.31%	98.21%
Older Persons Mental Health Unit (OPMHU)	20	121.85%	125.40%	124.53%	131.28%	127.38%	123.72%
ACT total	**87**	**102.35%**	**100.32%**	**102.25%**	**104.27%**	**101.28%**	**101.56%**

QUESTION TIME BRIEF

Background Information

New projects and funding commitments

- The projects planned by the ACT Government will improve and expand clinical spaces to provide improved physical and psychological safety for people admitted to acute services as well as improving staff safety and reduce the level of cccupational violence. These projects include:
    - Increasing the number of High Dependency bed capacity across the Territory to meet the needs of the changing demand for people requiring access to high acuity services; and
    - Increasing the number of Low Dependency (LDU) bed capacity across the Territory to meet the needs of the increasing demand for people requiring access to acute Mental Health services.
- As part of the $4.5 million Mental Health Support Package, the ACT Government is investing in programs to increase options to respond early to mental health issues and suicidal crisis, reducing demand on critical emergency and crisis services:
    - $720,000 to expand Access Mental Health and Home Assessment Acute Response Team (HAART);
    - $720,000 to expand the tri-service Police, Ambulance and Clinician Emergency Response (PACER) service to 7 days a week;
    - $500,000 for transitional accommodation services to address delays to discharge form acute services due to accommodation issues;
    - $341,843 to commence work on establishing two safe haven cafes that are aimed at better support for people in distress and reduce demand on emergency and crisis services;
    - $250,000 for an Aboriginal and Torres Strait Islander Mental Health Program;
    - Funding to support community organisations adapt to new modes of service delivery; and
    - A grants program to support innovative approaches to promote mental health and wellbeing in the ACT community. The range of projects will be supported by appropriate resources to match the increase in capacity and demand.
- The ACT Government has also committed to a range of additional investments and supports for mental health and suicide prevention in the Parliamentary and Governing Agreement for the 10th Legislative Assembly. This Agreement outlines a progressive agenda for the ACT Government to strive towards over the next 4 years and includes a range of important mental health programs including:
    - Expansions to PACER;
    - Improving the emergency department experience for people with the development of a Psychiatric Alcohol and non-prescription Drugs Assessment Unit;

- Building additional supported accommodation houses;
- Boosting community counselling, mentoring, home visits, advocacy and case management for young people; and
- Improving the range of programs that target and support youth mental health, eating disorders, alcohol and substance use with mental health, First Nations mental health, First Nations suicide prevention and postvention and respite for mental health carers.

Mental health beds at ACT public hospitals

- At Canberra Hospital, AMHU and MHSSU contain 46 adult admitted patient mental health beds, providing voluntary and involuntary psychiatric care and treatment for people with a mental health illness.
- At Calvary Public Hospital Bruce, the Acacia Ward and OPMHU contain 41 adult admitted patient mental health beds, providing voluntary and involuntary psychiatric care and treatment. In 2020-21, the ACT Government has funded an additional 5 mental health "surge" beds, which are included in the total of 41 beds.
- There are currently no dedicated adolescent mental health beds in the ACT. The model of care for children and young people requiring admitted patient mental health services is that they are admitted to the most appropriate admitted patient unit under the lead care of a paediatrician. A dedicated adolescent mental health facility is planned for opening in late 2022 as part of an integrated adolescent unit within the Centenary Hospital for Women and Children.

Calculation methods

<u>Tables 2 and 3</u>

- Overnight bed days and average lengths of stay are calculated in accordance with national counting rules, where a patient's episode of care is not counted until the episode is complete and they are discharged from hospital.
- Depending on the timings of patient admissions and discharges within a quarter, and due to the relatively small population serviced by ACT public hospitals, a small number of episodes of care can result in substantial differences in results when comparing consecutive quarters.

<u>Table 4</u>

- Utilisation rates (also known as occupancy rates) are a measure of resource utilisation within available hospital funding. Utilisation rates are measured using the minutes per day that an available overnight bed is used for patient care.
- In accordance with standard calculation methods used nationally, utilisation rates are calculated using the average available overnight beds. It is possible to have a utilisation rate greater than 100 per cent if beds are temporarily opened to accommodate patients as required. These beds are generally not permanently resourced and are closed when patients depart the relevant ward.

QUESTION TIME BRIEF

TRIM Ref: GBC21/61

Portfolio: Health

DIGITAL HEALTH RECORD

Talking points

- The ACT Health Directorate signed a 10-year $114 million contract in July 2020 with Epic, a world-leading provider of digital medical record systems to deliver the ACT's Digital Health Record, which will be operational in 2022-23.
- The ACT Digital Health Record is a key priority in achieving the vision outlined in the *2019-29 ACT Digital Health Strategy.* It will enable clinicians to have a single view of a patient and to have access to all relevant treatment protocols and forms, in context for each case.
- Clinical and administrative staff as well as consumers will be closely involved in the implementation of the Digital Health Record.
- The ACT Digital Health Record will be implemented in all ACT public health services, including across our public hospitals, Walk-in Centres, Community Health Centres, and justice health.
- The ACT's Digital Health Record will be purpose built to securely manage information in one place to ensure that patient information is safe and protected.

<u>DHR implementation project</u>

- The Digital Health Record team consists of approximately 140 staff and commenced on 27 January 2021.
- At the end of phase one of six, the program has achieved the following key milestones:
    - Overview of Implementation held with key project leadership;
    - Project team recruited;
    - More than 300 subject matter experts have been identified to provide key clinical guidance to the team, ensuring that the program remains clinically led;

Cleared as complete and accurate:	17 March 2021	
Cleared by:	Chief Information Officer	Ext: 49000
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Lead Directorate:	Health	
TRIM Ref:	GBC21/61	

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- Governance structure agreed;
- Team member training commenced;
- Legacy data workbook leads identified, and data collected;
- Application scope finalised with agreement to include Pathology, Dental and Medical Imaging;

- ACT Health have implemented Epic's vaccine administration capability to support health care teams in making COVID-19 vaccines accessible to the community in a timely manner.
- The Epic vaccine capability went live on 18 February 2021 and is being used to schedule bookings, record vaccine administration and support reporting to ensure the health system is able to monitor the progress of the rollout of the COVID-19 vaccine across the Territory. The commencement of the vaccine administration capability is 18 months earlier than planned.

Background

- The 2018-19 budget committed $151 million, comprised of $106 million capital and $45 million recurrent funding to the Digital Health Record over eight years.
- Configuration of the Digital Health Record will begin in early 2021 and will be operational in 2022-23.
- The contract with Epic is for 10 years, totalling to $114,802,796 (GST exclusive).
- The Tender Evaluation Team comprised of clinicians, consumer representatives and ICT experts. This team, along with more than 100 subject matter experts from the ACT public health services, non-government organisations and consumer representatives provided feedback and advice during the tender evaluation process.
- The Digital Health Record complements the national My Health Record. The Digital Health Record is a more detailed record than the My Health Record, which only holds a summary of key health information.
- The Digital Health Record will contain the detail of a person's care, including which bed they are in, which theatre they are booked into, detailed observations and the time their treatments and medications are required and administered.
- The My Health Record contains a snapshot summary of this care which is particularly useful when a person is treated at a health service outside of the ACT public health system such as physios, GPs, private hospitals, or hospitals in other jurisdictions.
- Maddocks, an external legal firm have been engaged by the ACT Government Solicitor's Office to undertake a Privacy Impact Assessment for the Digital Health Record. This will

support the team in addressing any risks associated with the management of the personal health information and sensitive information that will be stored.

- A Deed was executed with NTT Australia Pty Ltd in December 2020 for the hosting of the Digital Health Record and its related systems.
- The contract with NTT Australia Pty Ltd is for 5 years and will operate under a work order arrangement.
- Procurement is currently underway for three systems that are required to support the effective implementation of the Digital Health Record as outlined below:
    - A blood bank solution as Epic does not provide blood bank functionality within its pathology module due to the tight regulatory framework around the provision of blood and blood products.
    - Pathology analyser integration middleware to streamline the integration of pathology analysers into the Digital Health Record.
    - Device integration middleware to facilitate the integration of medical devices to the Digital Health Record. This will increase efficiency and reduce errors that can occur when transcribing information from devices onto paper or other systems.

QUESTION TIME BRIEF

GBC21/61

Portfolio: Health

ISSUE: MINISTER'S FACT SHEET

	YTD 2019-20	YTD 2020-21	change	Q2 2019-20	Q3 2019-20	Q4 2019-20	Q1 2020-21
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Total	**55.2%**	**59.8%**	**4.6**	**55.0%**	**57.2%**	**64.5%**	**59.8%**

1. The benchmarks for seen on time are as follows:

- *Triage category 1—100%*
- *Triage category 2—80%*
- *Triage category 3—75%*
- *Triage categories 4, 5 and overall—70%*

2. The performance benchmark for emergency department presentations with a length of stay of 4 hours or less is 90%.

Cleared as complete and accurate:	12/03/2021	
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Lead Directorate:	Health	
TRIM Ref:	GBC21/61	

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QUESTION TIME BRIEF

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Urgency 3 (see within 365 days)	75.8%	70.7%	-5.1	75.6%	76.0%	77.0%	70.7%
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Additions to the elective surgery waiting list	4,452	4,300	-3.4%	4,035	3,732	3,097	4,300
Separations from public hospitals							
Number of inpatient separations							
Same day	15,313	15,966	4.3%	15,282	14,654	13,642	15,966
Overnight	15,115	14,838	-1.8%	14,548	13,654	12,703	14,838
Total	**30,428**	**30,804**	**1.2%**	**29,830**	**28,308**	**26,345**	**30,804**

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Cleared for public release by:	Executive Group Manager	Ext: 49000
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TRIM Ref:	GBC21/61	

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QUESTION TIME BRIEF

GBC21/61

Portfolio: Health

QUARTERLY PERFORMANCE REPORTING AND PUBLICATION OF DATA FOR CONSUMERS

Talking points:

Quarterly Performance Report – July to September 2020

Patient experience

- The quarterly performance report continues to show that the vast majority of people treated in our public hospitals experience a high quality of care.
- 96.3 per cent of patients provided positive feedback on their experience within Canberra Health Services and 97.5 per cent reported a positive experience at Calvary Public Hospital Bruce. This is an increase for both services on their already high results from the previous quarter.

Emergency presentations

- Since restrictions relating to the COVID-19 pandemic have been lifted, we've seen activity in our emergency departments returning to pre-COVID levels.
- There were 35,639 emergency department presentations in Quarter 1, 2020-21, with 8,525 patient arrivals via ambulance, an increase of 20.9 and 15.9 per cent respectively, compared to Quarter 4, 2019-20.
- 100 per cent of Category 1 patients were seen on time in 2019-20 and Quarter 1, 2020-21. The timeliness performance for Category 2 patients improved each quarter in 2019-20, and maintained at just one percentage point below target in Quarter 1, 2020-21 (79 per cent against the target of 80 per cent).
- 59.8 per cent of patients were treated and left the emergency department within four hours.
    - Although this is a decrease of 4.7 per cent from the previous quarter in April to June 2020 during the height of COVID-19 restrictions, it is an improvement of 2.6 per cent from the January to March 2020 quarter when activity was relatively normal.

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- Median waiting times in the most urgent triage categories remained the same as the previous quarter, with all Category 1 patients treated immediately and Category 2 patients waiting only 6 minutes for treatment. Both median waiting times are in line with the recommended national treatment times.
- In the less urgent triage categories (i.e. Categories 3-5), the median waiting time to treatment increased by more than 50 per cent in each triage category compared with the previous quarter. The median waiting time ranged between 38-49 minutes for these three categories.
    - While there were increases for each triage category, when compared with two quarters ago (i.e. January to March 2020), the median waiting times for each category improved substantially.

Elective surgeries

- In the first quarter of 2020-21, the ACT delivered 3,982 elective surgeries, an increase of 62.7 per cent from the previous quarter, and is on track to deliver a record number of elective surgeries this financial year.
- The number of overdue patients waiting for their elective surgery reduced by 23.1 per cent to 1,013 patients in Quarter 1, 2020-21.
- While there was an increase in the number of people added to the elective surgery waiting list compared with the previous quarter, overall the number of people on the waiting list has also decreased.
- The significant increase in elective surgeries in Quarter 1, 2020-21 has been part of the ACT Government's recent investment of $30 million for COVID-19 prevention, preparedness and recovery of services impacted by the COVID-19 shutdown.

Walk-in Centres and COVID-19 Testing Centres

- Our Nurse-led Walk-in Centres continue to be very popular with Canberrans, with the opening of a fifth Walk-in Centre in the Inner North in August 2020 and the important role that the Weston Creek Walk-in Centre has played in responding to COVID-19.
- The Walk-in Centres experienced an increase in presentations of 30.3 per cent compared with the April to June 2020 quarter. This excludes presentations to the Weston Creek Walk-in Centre, which was a dedicated COVID-19 respiratory clinic and testing centre.

- During the July-September quarter, the six COVID-19 respiratory clinics and testing centres saw a total of 52,327 presentations, an increase of 144.2 per cent from the previous quarter. This ensured that everyone who needed to be tested had timely and convenient access.

Publication of Data for Consumers

- The ACT Government continues to improve the information available on our public health system and the health of Canberrans.
- In addition to existing sources of timely health information like the Quarterly Performance Report, HealthStatsACT and the ACT Government's Open Data Portal, the ACT Government also publishes the COVID-19 dashboard on covid19.act.gov.au to provide Canberrans with up-to-date case information and visualisations.