

Our reference: **CHSFOI25-26.41**

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Dear ██████████

DECISION ON YOUR ACCESS APPLICATION

I refer to your application under section 30 of the *Freedom of Information Act 2016* (FOI Act), received by Canberra Health Services (the Directorate) on **Tuesday 10 March 2026**.

This application requested access to:

'From January 1 2025 until February 28 2026:

- *Any ministerial briefings, briefing notes and communications regarding safety concerns around patients in the Canberra Hospital renal unit.*
- *Any reviews of the renal unit at Canberra Hospital.*
- *Correspondence from CHS Chief Executive Officer Janet Zagari and other senior executives regarding the implementation of Medical and Dental Appointments Advisory Committee recommendations for the Renal Unit at Canberra Hospital, which were received around April 2025.'*

I am an Information Officer appointed by the Chief Executive Officer of the Directorate under section 18 of the FOI Act to deal with access applications made under Part 5 of the Act. The Directorate was required to provide a decision on your access application by **Thursday 23 April 2026**.

I have identified one document holding the information within scope of your access application. These are outlined in the schedule of documents included at Attachment A to this decision letter.

Decisions

I have decided to grant full access to the document. My access decisions are detailed further in the following statement of reasons and the document released to you are provided as Attachment A to this letter.

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

- The FOI Act;
- The contents of the documents that fall within the scope of your request; and
- The *Human Rights Act 2004*.

Charges

Processing charges are not applicable to this request.

Disclosure Log

Under section 28 of the FOI Act, the Directorate maintains an online record of access applications called a disclosure log. The scope of your access application, my decision and documents released to you will be published in the disclosure log not less than three days but not more than 10 days after the date of this decision.

Please be aware that no personal information will be included in the published information all other information will be published on <https://www.act.gov.au/open/foi-disclosure-logs/act-health-directorate-and-canberra-health-services-disclosure-logs>.

Ombudsman review

My decision on your access request is a reviewable decision as identified in Schedule 3 of the FOI Act. You have the right to seek Ombudsman review of this outcome under section 73 of the Act within 20 working days from the day that my decision is published on the Directorate's disclosure log, 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
Website: ombudsman.act.gov.au

ACT Civil and Administrative Tribunal (ACAT) review

Under section 84 of the Act, if a decision is made under section 82(1) on an Ombudsman review, you may apply to the ACAT for review of the Ombudsman decision. Further information may be obtained from the ACAT at:

ACT Civil and Administrative Tribunal
Allara House
15 Constitution Avenue
GPO Box 370
Canberra City ACT 2601
Telephone: (02) 6207 1740
<http://www.acat.act.gov.au/>

Further assistance

Should you have any queries in relation to your request, please do not hesitate to contact the FOI Coordinator on (02) 5124 9831 or email HealthFOI@act.gov.au.

Yours sincerely



Rebekah Ogilvie
Executive Director
Division of Medicine
Canberra Health Services
8 April 2026

Directorate Request for Input | Canberra Health Services

OFFICIAL Sensitive

Topic:	Input for HCSD - Australia and New Zealand Dialysis and Transplant Registry and the Australian and New Zealand Society of Nephrology - Survey of Kidney Units in Australia
Requested By:	Pieta McCarthy, Office of the Chief Medical Officer, HCSD
Date of Request:	1 September 2025
Due Date to HCSD:	15 September 2025
TRIM Ref:	MCHS25/511

Request details:

1. HCSD is preparing a ministerial response to correspondence from the Australia and New Zealand Dialysis and Transplant Registry and the Australian and New Zealand Society of Nephrology re a survey that has been conducted of kidney units in Australia and New Zealand to determine the types of kidney replacement therapies offered, staffing numbers, staff to patient ratios, and limitations to delivering services.

HCSD is requesting any input that CHS has to assist in preparation of the ministerial response.

Content for clearance:

1. The ACT Renal Service currently has sufficient dialysis capacity, thanks to proactive planning initiated in 2010 for needs through 2025/26. Ongoing monitoring of growth data will ensure this remains aligned with demand.
2. Workforce variation data is difficult to interpret due to the mix of hospital levels and transplanting vs non-transplanting centres. Nonetheless, it highlights the need to strengthen allied health support; particularly dietitians, pharmacists, psychologists, and social workers, who are essential to patient safety and wellbeing. ACT patients currently lack dedicated access to these roles.
3. While the ACT's nephrologist-to-patient ratio (76) compares favourably to the national median (84), it excludes non-clinical roles and VMO contributions seen in other jurisdictions. As the ACT operates without VMOs, adjusting for this would support an increase in physician numbers.
4. The ACT Renal service is exploring the introduction of roles such as an anaemia coordinator to enhance care delivery.

5. There is a national shortage of renal palliative care physicians. The ACT is fortunate to have one (0.5 FTE), but additional support is clearly needed for this vulnerable group.
6. The ACT Renal Service welcomes opportunities to further contribute to discussions aimed at enhancing care quality.

CHS Executive: Rebekah Ogilvie

Action Officer: Kristi Vaughan