


Request for Costing an Election Commitment

Name of election commitment:	Health – obesity services
Person and party requesting costing:	Katy Gallagher, ACT Labor
Date of public release of election commitment, including source:	8/9/12 http://www.katygallagher.net/?p=2052
Summary of election commitment:	\$5 million to provide additional obesity services
Intention of election commitment:	To help prevent obesity and to provide additional services for obese Canberrans.
Signature of person requesting costing:	
Date of request for costing:	8.10.12

What are the key assumptions that have been made in the election commitment?

This policy includes two initiatives as phased in below:

Obesity services:

Cost	2013-14	2014-15	2015-16	2016-17
Nurses (FTE)	1	2	2	2
Allied health professionals (FTE)	1.5	3	3	3
Specialists (FTE)	0.5	1	1	1
Administration staff (FTE)	0.5	1	1	1
Supplies	\$80,000	\$160,000	\$164,800	\$169,744

Bariatric surgery program:

	2013-14	2014-15	2015-16	2016-17
Number of procedures		13 (rounded)	26 (rounded)	38 (rounded)

Where relevant, is the funding for the policy to be demand driven or a capped amount? Capped

Will third parties, for instance the Commonwealth or other State/Territories, have a role in funding or delivering the election commitment? No

Will funding/the cost require indexation? Indexation is included in the costing.

What are the estimated revenue and operating costs each year (if available) and what are the capital requirements for this election commitment and estimated costs each year (if available)?

	2012-13	2013-14	2014-15	2015-16	2016-17	Total
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000

Revenue ^(a)						
Expenses ^(a)		-500	-1,255	-1,511	-1,768	-5,034
Capital						

(a) A negative number indicates a decrease in revenue or an increase in expenses.

What is the likely take up?

Any other assumptions?

Administration of the election commitment

How will the election commitment be administered? Through the Health Directorate

Who will administer the election commitment? The Health Directorate

Has an allowance been made for expenses necessary to support the implementation of this election commitment?

– No. Additional administration costs are not expected.

What is the intended implementation date of the election commitment? 2013-14

Are there transitional arrangements associated with election commitment implementation? No

Are there any other assumptions that need to be considered? No

When is the election commitment expected to be fully operational?

The outpatient service will begin part way through 2013-14 and will be fully operational. Surgical options will be provided from 2014-15.

Will the election commitment cease and if so when? The intention is for this service to continue however any decision to extend the funding past 2016-17 will be one for the Government of the day.