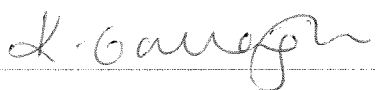


## Request for Costing an Election Commitment

<b>Name of election commitment:</b>	<b><i>Growth in community mental health services</i></b>
Person and party requesting costing:	Katy Gallagher, ACT Labor
Date of public release of election commitment, including source:	30/9/12 <a href="http://www.katygallagher.net/?p=2379">http://www.katygallagher.net/?p=2379</a>
Summary of election commitment:	\$10.5 million to meet increasing demand for community care delivered by ACT government and non government organisations.
Intention of election commitment:	To fund more mental health care in the community.
Signature of person requesting costing:	
Date of request for costing:	12-10-12

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

Half of this new funding will be allocated to community-based non-government organisations as has occurred in recent budgets. Funding for specific NGO programs will be determined each year as new needs are identified; where innovative programs and new ways of delivering care are developed; or where there is increasing demand for specific community-based services. The remaining 50% of funding will be allocated to ACT Health Directorate community mental health programs to help meet growing demand. This will allow at least 4 additional front line mental health clinicians to be employed for each of the four years, expanding community mental health services for adults, adolescents, children and older people. This funding could also be used for a range of new initiatives such as the development and implementation of specialist psychotherapy services and workforce development initiatives in specialised areas such as forensic mental health.

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? Yes, 50% of the funding will be delivered by community based non-government organisations.

Will funding/the cost require indexation? It has been indexed

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 <sup>(a)</sup>						
Expenses <sup>(a)</sup>		-1,000	-2,067	-3,170	-4,309	-10,546
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?

- It is not expected there will be increased administrative costs on top of those allowed for in the funding.

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?

This commitment will be progressively rolled out and involve a range of initiatives implemented in each of the four years.

Will the election commitment cease and if so when? This is a four year commitment. Any decision to extend this funding beyond 2016-17 will be a decision for the Government of the day.