


Request for Costing an Election Commitment

Name of proposal:	After hours access to palliative care medicines
Person requesting costing:	Andrew Barr MLA 
Date of request:	11 October 2024
Summary of proposal:	Funding for community pharmacies to provide after-hours access to palliative care medicines
Issue the proposal will address:	Continue to support quality end of life healthcare in the ACT.
Proposal's public announcement details (media release or policy statement published on a party website) ¹ :	More support for end-of-life care (andrewbarr.com.au)

What are the key assumptions that have been made in the proposal?

Note: The costing will be developed on the basis of information and assumptions provided in the costing request. The professional judgment of the Under Treasurer will determine whether these assumptions are adopted in the costing of the proposal.

This proposal will provide funding to five community pharmacies across the ACT to provide consumers and carers with access to after-hours palliative care medicine. These pharmacies will be geographically spread across the city and ACT Health Directorate will work with the sector to facilitate community pharmacies delivering this service.

Funding assumptions to deliver this program is based on an understanding that previous funding of an after-hours palliative care medicine program administered by the Capital Health Network cost \$201,372 (link below). This included a consumer co-payment for delivery of medications and the program ran from April 2017 to June 2021.

This proposal assumes \$300,000 in 2025-26, indexed at CPI (as outlined in the standard costing parameters) and no consumer co-payment for delivery. ACT Health Directorate will work with pharmacies as part of an expression of interest on individual community pharmacies costs to deliver this service.

Workers Compensation indexed at 1.21% for the Health Directorate has been applied.

It is assumed 0.25 FTE SOGC administration support will be required to manage grant funding for this initiative.

¹ As per Part 2, section 5 of the *Election Commitments Costing Act 2012*

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

	2024-25	2025-26	2026-27	2027-28	Total
	\$'000	\$'000	\$'000	\$'000	\$'000
Revenue ^(a)	0	0	0	0	0
Expenses ^(a)	0	-343.8	-352.5	-361.4	-1,057.7
Capital ^(a)	0	0	0	0	0
Depreciation ^(a)	0	0	0	0	0
Offset - Expenses ^(a)	0	0	0	0	0
Offset - Capital ^(a)	0	0	0	0	0
Full-time equivalent employees	0	0	0	0	0

(a) A negative number indicates a decrease in revenue or an increase in expenses, depreciation or capital outflows. A positive number indicates an increase in revenue or decrease in expenses, depreciation or capital inflows. The expenses row is not to include depreciation costs.

Has any specific information or data been utilised in generating the proposal? Please provide links or attach information/data sources referenced.

Capital Health Network program evaluation: [Microsoft Word - Afterhours Evaluation Report UCHRI FINAL SUBMITTED 31 March 2022 \(chnact.org.au\)](#)

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

Capped amount

Will third parties, for instance the Commonwealth or other State/Territories, have a role in funding or delivering the proposal? Does the proposal provide additional funding to, or redirect, any existing Commonwealth/State or Territory funding arrangements?

No

Will funding/the cost require indexation?

Operating costs (CPI), staff 2.75% as per Average Salary Costing Template

Who will administer the proposal?

ACT Health Directorate

How will the proposal be administered?

ACT Health Directorate will manage establishment of the program and contracts with community pharmacies.

Is the proposal part of a broader package? If so, please identify the other elements of the package.

No

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

proposal?
<ul style="list-style-type: none"> – If no, will the government agency be expected to absorb expenses associated with this proposal? – If yes, please specify the key assumptions.
Yes, as above 0.25 FTE SOGC to support administration of the program.
Will the proposal generate savings or offsets? If so, please quantify any savings or offsets.
No
Has the proposal been previously costed by an external (third) party? If so, will a copy of this material, including any assumptions, be made available to Treasury?
No
What are the community impacts associated with the proposal? Who and how many people will be affected?
Over the previous period of operation the after-hours palliative medicine program made 5,729 deliveries to provide essential palliative care medications and prevent emergency department presentations following worsening of symptoms in the community.
Are there any transitional considerations associated with implementation of the proposal? If so, how will they be managed?
No
What is the intended implementation date of the proposal?
1 July 2025
When is the proposal expected to be fully operational? Please provide details such as the start and end dates, the level of commitment during each period etc.
By October 2025
Will the proposal cease, and if so, when?
No, this is ongoing
Is there any additional information relevant to this proposal?
No