

Request for Costing an Election Commitment

Name of proposal:	Perinatal Mental Health Residential Mother and Baby Unit - Staffing
Person requesting costing:	Andrew Barr MLA 
Date of request:	11 October 2024
Summary of proposal:	Staffing of a Perinatal Mental Health Residential Mother and Baby Unit
Issue the proposal will address:	This proposal will support the mental health of new parents with specialist services dedicated to supporting people with a mental illness in the perinatal period.
Proposal's public announcement details (media release or policy statement published on a party website) ¹ :	More maternity services and support for families (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.

Operation of services assumes a 24/7 unit as per the Average Salary Costing Template from 2027-28.

The following workforce profile and wages have been calculated. Wages have been taken from the applicable enterprise agreement at the level specified below as at 1 July 2025 where applicable and then 2.75% annual indexation as per the average salary costing template.

For those under the Medical Practitioners agreement the top of the pay band and final pay point has been applied as per the current enterprise agreement (and then indexed as per the average salary costing template from 2025-26)

Assumed staffing requirements for a 6-bed Perinatal Residential Mental Health Unit
0.5 FTE Social Worker HP3 (\$109,543)
1 FTE Clinical Psychologist HP4 (\$125,344)
1 FTE ADON RN4.1 (\$141,990)
1 FTE Infant Mental Health Clinician HP4 (\$125,344)
1 FTE Psychiatric Registrar R4 (\$141,084)
1.5 FTE Consultant Psychiatrist Sen Spec (\$254,198)
14 FTE Registered Nurse Level 1.8 (\$106,712)
2 FTE Allied Health HP3 (\$109,543)
2 FTE ASO3 Administrative Staff (\$76,985)

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

Workers compensation assumption of 1.76% has been applied.

This results in the following expense table using the average salary costing template.

	2024-25	2025-26	2026-27	2027-28
	\$'000	\$'000	\$'000	\$'000
Allied Health	0	0	0	763.3
Administration and Medical	0	0	0	952.9
Nursing	0	0	0	2,403.9
Operational Costs	0	0	0	330.0
Total	0	0	0	4,450.1

Operating costs funding allocation includes medical supplies, catering, cleaning, linen services, pharmacy costs and repairs and maintenance. Assumptions consider the cost of acute bed costs – separate to staffing which has been costed above.

This is based on comparable operating assumptions. It is assumed this would \$330,000 in the first year and then annualised and indexed at CPI as per the standard costing parameters.

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	0	0	-4,450.1	-4,450.1
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	24	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.

ACTPS Administrative and Related Classifications Enterprise Agreement 2023-2026

ACTPS Medical Practitioners Enterprise Agreement 2021-2022

ACTPS Health Professional Enterprise Agreement 2023-2026

ACTPS Support Services Enterprise Agreement 2023-2026

ACTPS Nursing and Midwifery Enterprise Agreement 2023-2026

Royal Australian and New Zealand College of Psychiatrists Position Paper - [Perinatal mental health](#)

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

This proposal will be demand driven.

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?

Applied in the standard costing template.

Who will administer the proposal?

Canberra Health Services

How will the proposal be administered?

Canberra Health Services will support the development of the model of care and service profile.

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

Yes, this is part of Labor's plan to hire an extra 800 health workers.

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

- If no, will the government agency be expected to absorb expenses associated with this proposal?
- If yes, please specify the key assumptions.

As per this proposal.

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?

Perinatal mental health conditions are estimated to impact 1 in every 5 new and expecting mothers in Australia, these range from mild to severe conditions that require a range of service responses. These conditions can impact outcomes for pregnancy, babies and parents including attachment, breastfeeding and sleep. The Royal Australian and New Zealand College of Psychiatrists using Royal College of Psychiatrists (UK) estimations recommends 8 parent-baby unit beds for 15,000 deliveries, in the ACT there were 6352 births in 2022.

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?

Construction to commence in 2025-26.
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.
The Perinatal Residential Mental Health Unit to be fully operational in 2027-28
Will the proposal cease, and if so, when?
This proposal will be ongoing.
Is there any additional information relevant to this proposal?
No