

AUSTRALIAN CAPITAL TERRITORY

BUDGET 2014-15

INVESTING IN CANBERRA

BUDGET STATEMENTS

HEALTH DIRECTORATE
ACT LOCAL HOSPITAL NETWORK

GUIDE TO THE BUDGET PAPERS

STRUCTURE AND CONTENT OF THE 2014-15 BUDGET PAPERS

The 2014-15 Budget is presented in three papers and a series of agency Budget Statements.

BUDGET PAPER 1: BUDGET SPEECH

The Treasurer's speech to the Legislative Assembly highlights the Government's Budget strategies and key features of the Budget.

BUDGET PAPER 2: BUDGET IN BRIEF

A summary of the overall budgetary position together with information on the Government's expenditure priorities in key service delivery areas.

BUDGET PAPER 3: BUDGET OUTLOOK

Summarises the 2014-15 Budget and forward estimates for the general government sector, the public trading enterprise sector and the total Territory Government. Details of the projected 2014-15 Budget results are provided, as well as background information on the development of the 2014-15 Budget, including economic conditions and federal financial relations.

Also provides an overview of the Territory's infrastructure investment program and details of the 2014-15 expense, infrastructure and capital, and revenue initiatives.

Full accrual financial statements and notes are provided for all sectors.

BUDGET STATEMENTS

Information on each directorate and Territory authority and corporation is broken up into several smaller documents. This includes output classes (where relevant), descriptions of functions, roles and responsibilities, together with major strategic priorities.

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HEALTH DIRECTORATE

Purpose

ACT Health partners with the community and consumers for better health outcomes by:

- delivering patient and family centred care;
- strengthening partnerships;
- promoting good health and wellbeing;
- improving access to appropriate healthcare; and
- having robust safety and quality systems.

We aim for sustainability and improved efficiency in the use of resources, by designing sustainable services to deliver outcomes efficiently, and embedding a culture of research and innovation.

ACT Health continues to strengthen clinical governance of its processes, and strives to be accountable to both the government and the community.

ACT Health aims to support our people and strengthen teams, by helping staff to reach their potential, promoting a learning culture and providing high-level leadership.

2014-15 Priorities

Strategic and operational initiatives to be pursued in 2014-15 include:

- continuing to meet the growth in demand for acute care, emergency department, critical care, cancer treatment, mental health, women's and children's services, outpatient services and community health centres through extra capacity and by redesigning care delivery systems;
- continuing implementation of a comprehensive Health Infrastructure Program (HIP) to build a sustainable and modern health system to ensure safety, availability and viability of quality healthcare in the ACT for now and into the future;
- continuing work to improve health and wellbeing within the Aboriginal and Torres Strait Islander community;
- opening the Canberra Region Cancer Centre;
- opening the new walk in centre at Belconnen and relocation of the existing centre at the Canberra Hospital to the Tuggeranong Health Centre; and
- maintaining accreditation with international standards and other appropriate national bodies.

Business and Corporate Strategies

The Health Directorate has a comprehensive and effective governance framework, which manages strategic and operational risk, infrastructure and workforce planning, activity, information technology and financial performance.

The Health Directorate is committed to:

- achieving a comprehensive health system that protects and improves the health of the community;
- being an effective and efficient service provider;
- working in partnership with other government services and community organisations;
- developing new models of care and service delivery;
- ongoing improvement in the cost of acute health services against the national peer hospital costs;
- strengthening staff skills and professionalism; and
- achieving a system of care and support that improves the quality of life for vulnerable groups.

Estimated Employment Level

Table 1: Estimated Employment Level

	2012-13 Actual Outcome	2013-14 Budget	2013-14 Est. Outcome	2014-15 Budget
Staffing (FTE) ^{1,2}	5,749	5,811	5,939	6,093

Notes:

1. The increase of 128 FTE in the 2013-14 estimated outcome is mainly due to the employment of project management staff associated with the Health Infrastructure Program (HIP), An E-Healthy Future programs, Commonwealth funded programs and a higher intake of junior medical doctors.
2. The increase of 154 FTE in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to the implementation of new and continuing initiatives.

Strategic Objectives and Indicators

Strategic Objective 1

Removals from Waiting List for Elective Surgery

Strategic Indicator 1: Number of People Removed From Waiting List

In order to improve access to elective surgery, the ACT Government has committed to significantly increase the number of elective surgery operations provided in our public hospitals, and to reduce the number of people waiting more than the clinically recommended times for that surgery.

Table 2: The number of people removed from the ACT elective surgery waiting lists managed by ACT public hospitals. This may include public patients treated in private hospitals.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target
People removed from the ACT elective surgery waiting list for surgery	11,000	11,500	12,000

Strategic Objective 2

No Waiting for Access to Emergency Dental Health Services

Strategic Indicator 2: Percentage of Assessed Emergency Clients Seen within 24 hours

This provides an indication of the responsiveness of the dental service to emergency clients.

Table 3: The percentage of assessed emergency clients seen within 24 hours.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
Percentage of emergency clients seen within 24 hours	100%	100%	100%	100%

Strategic Objective 3

Improving Timeliness of Access to Radiotherapy Services

Strategic Indicator 3: Percentage of Radiotherapy Patients who Commence Treatment within Standard Timeframes

This provides an indication of the effectiveness of public hospitals in meeting the need for cancer treatment services.

Table 4: The percentage of cancer patients who commence radiotherapy treatment within standard time frames.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target
Category			
Emergency — treatment starts within 48 hours	100%	100%	100%
Palliative — treatment starts within 2 weeks ¹	n/a	91%	90%
Radical — treatment starts within 4 weeks ¹	n/a	96%	90%
Semi urgent — treatment starts within 4 weeks ²	95%	100%	n/a
Non urgent — treatment starts within 6 weeks ²	95%	100%	n/a

Notes:

1. New measure for 2014-15 in line with the National Radiation Oncology Practice Standards.
2. Discontinued measure. This measure has been replaced to match National Radiation Oncology Practice Standards.

Strategic Objective 4

Improving the Breast Screen Participation Rate for Women aged 50 to 69 years

Strategic Indicator 4: Participation Rate for Breast Screening

Table 5: The proportion of women in the target age group (50 to 69 years) who had a breast screen in the 24 months prior to each counting period.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
Proportion of women aged 50 to 69 who have a breast screen	60%	55% ¹	60%	70%

Note:

1. The Program has an annual Recruitment Plan, which outlines the objectives, strategies, timelines, evaluation, and expected outcomes required to meet the BreastScreen Australia National Accreditation Standards in relation to health promotion. BreastScreen ACT has readily available appointments but is experiencing difficulty filling them. A number of initiatives are underway to raise awareness and profile of the service, particularly within the target group of women aged 50-69 years.

Strategic Objective 5

Maintaining the Waiting Times for in Hospital Assessments by the Aged Care Assessment Team

Strategic Indicator 5: Aged Care Assessment Waiting Time

This provides an indication of the responsiveness of the Aged Care Assessment Team (ACAT) in assessing the needs of clients.

Table 6: The mean waiting time in working days between the request for, and provision of, assessment by the ACAT for patients in public hospitals.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
Mean waiting time in working days	2 days	2 days	2 days	2 days

Strategic Objective 6

Reducing the Usage of Seclusion in Mental Health Episodes

Strategic Indicator 6: Proportion of Clients with a Mental Health Seclusion Episode

This measures the effectiveness of public mental health services in the ACT over time in providing services that minimise the need for seclusion.

Table 7: The proportion of mental health clients who are subject to a seclusion episode while being an admitted patient in an ACT public mental health inpatient unit.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
The proportion of mental health clients who are subject to a seclusion episode while being an admitted patient in an ACT public mental health inpatient unit	<3%	2.1%	<3%	<3%

Strategic Objective 7

Maintaining Reduced Rates of Patient Return to an ACT Public Acute Psychiatric Inpatient Unit

Strategic Indicator 7: Acute Psychiatric Unit Patient 28 Day Readmission Rate

This indicator reflects the quality of care provided to acute mental health patients.

Table 8: The proportion of clients who return to hospital within 28 days of discharge from an ACT public acute psychiatric unit following an acute episode of care.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	National Rate
Proportion of clients who return to hospital within 28 days of discharge from an ACT acute psychiatric mental health inpatient unit	<5% ¹	8.9%	<10%	14.7%

Note:

1. The 2013-14 target for this measure was recorded inaccurately in the 2013-14 budget papers at <5%. The correct target should have been <10%. This was advised to the Select Committee on Estimates in their consideration of the 2013-14 Budget.

Strategic Objective 8

Reaching the Optimum Occupancy Rate for all Overnight Hospital Beds

Strategic Indicator 8: Percentage of Overnight Hospital Beds in Use

This provides an indication of the efficient use of resources available for hospital services.

Table 9: The mean percentage of overnight hospital beds in use.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
Mean percentage of overnight hospital beds in use	90%	90%	90%	85%

Strategic Objective 9

Management of Chronic Disease: Maintenance of the Highest Life Expectancy at Birth in Australia

Australians are living longer and gains in life expectancy are continuing. Premature deaths (those of people aged under 75 years) from leading potentially preventable chronic diseases have decreased by 17% between 1997 and 2007.

Strategic Indicator 9: Maintenance of the Highest Life Expectancy at Birth in Australia

Life expectancy at birth provides an indication of the general health of the population and reflects on a range of issues other than the provision of health services, such as economic and environmental factors. The ACT continues to enjoy the highest life expectancy of any jurisdiction in Australia and the Government aims to maintain this result.

Table 10: Life expectancy at birth in Australia 2012.

	ACT Rate	National Rate
Females	85.1	84.3
Males	81.2	79.9

Source: ABS 2012, Deaths, Australia, 2012, cat. no. 3302.0, ABS, Canberra.

Strategic Objective 10

Lower Prevalence of Circulatory Disease than the National Average

Strategic Indicator 10: The Proportion of the ACT Population with Some Form of Cardiovascular Disease

Population projections suggest that the ACT population is ageing faster than other jurisdictions. The median age of the ACT population (36.9 years in 2010) has increased by 4.8 years since 1990. While people of all ages can present with a chronic disease, the ageing of the population and longer life spans mean that chronic diseases will place major demands on the health system for workforce and financial resources.

Table 11: Proportion of the ACT Population with Some Form of Cardiovascular Disease

	ACT Rate	National Rate
Proportion of the population diagnosed with some form of cardiovascular disease	18.4%	16.9%

Source: Australian Health Survey: First Results, 2011-12. Australian Bureau of Statistics Catalogue No: 4364.0.55.001.

Strategic Objective 11

Lower Prevalence of Diabetes than the National Average

Strategic Indicator 11: The Proportion of the ACT Population Diagnosed with Some Form of Diabetes

This indicator provides a marker of the success of prevention and early intervention initiatives. The self reported prevalence of diabetes in Australia has more than doubled over the past 25 years. Prevalence rates may increase in the short term as a result of early intervention and detection campaigns. This would be a positive result as experts predict that only half of those with diabetes are aware of their condition. This can have significant impacts on their long term health. The prevalence of diabetes in the ACT was similar to the national rate.

Table 12: Proportion of the ACT Population Diagnosed with Some Form of Diabetes

	ACT Rate	National Rate
Prevalence of diabetes in the ACT	3.8%	3.7%

Source: Australian Health Survey: First Results, 2011-12. Australian Bureau of Statistics Catalogue No: 4364.0.55.001.

Strategic Objective 12

Government Capital Expenditure on Healthcare Infrastructure

Strategic Indicator 12: Capital Consumption

This indicator provides information on government investment to improve healthcare infrastructure. Information on the level of funding allocated for health infrastructure as a proportion of overall expenditure provides an indication of investment towards developing sustainable and improved models of care. The aim for the ACT is to exceed the national rate of expenditure on infrastructure.

Table 13: Capital Consumption

	ACT Rate	National Rate
Government ¹ capital expenditure as a proportion of Government ² capital consumption expenditure by healthcare facilities, 2008-09 to 2010-11		
2008-09	2.76%	1.90%
2009-10	2.67%	1.57%
2010-11	3.84%	2.15%

Source: Health Expenditure Australia 2010-11 (Australian Institute of Health and Welfare).

Notes:

1. Excludes local government.
2. Expenditure on publicly owned healthcare facilities.

Strategic Objective 13

Higher Proportion of Government Recurrent Health Funding Expenditure on Public Health Activities than the National Average

Strategic Indicator 13: Proportion of Government Recurrent Health Funding Expenditure on Public Health Activities

Improvements in the prevention of diseases can reduce longer term impacts on the health system, particularly for people with chronic diseases. The aim for the ACT is to exceed the Australian average rate of recurrent health funding on public health activities as a strategy to reduce the long term chronic disease burden.

Table 14: Estimated total Government expenditure on Public Health Activities as a proportion of total current health expenditure

	ACT Rate	National Rate
2008-09	3.1%	2.7%
2009-10	2.7%	2.2%
2010-11	2.6%	2.1%

Source: *Health Expenditure Australia 2010-11* (Australian Institute of Health and Welfare).

Strategic Objective 14

Addressing Gaps in Aboriginal and Torres Strait Islander Immunisation Status

Strategic Indicator 14: Immunisation Rates – ACT Aboriginal and Torres Strait Islander Population

The immunisation rate provides an indication of the level of investment in public health services to minimise the incidence of vaccine preventable diseases. The ACT's indigenous population has a much lower rate of immunisation than the general population. The ACT aims to minimise disparities between indigenous and non indigenous Australians through a targeted immunisation strategy.

Table 15: Immunisation Rates – ACT Aboriginal and Torres Strait Islander Population

	2013-14 Target	2013-14 Est. Outcome ¹	2014-15 Target	Long Term Target
Immunisation rates for vaccines in the national schedule for the ACT indigenous population:				
12 to 15 months	≥90%	90.9%	≥90%	≥90%
24 to 27 months	≥90%	92.8%	≥90%	≥90%
60 to 63 months	≥90%	95.2%	≥90%	≥90%
All	≥90%	92.9%	≥90%	≥90%

Note:

1. The very low numbers of Aboriginal and Torres Strait Islander children in the ACT means that the ACT Aboriginal and Torres Strait Islander coverage data should be read with caution. This small population can cause rate fluctuations.

Strategic Objective 15

Higher Participation Rate in the Cervical Screening Program than the National Average

Strategic Indicator 15: Two Year Participation Rate in the Cervical Screening Program

The two year participation rate provides an indication of the effectiveness of early intervention health messages. The ACT aims to exceed the national average for this indicator.

Table 16: Two Year Participation Rate in the Cervical Screening Program

	ACT Rate	National Rate
Two year participation rate	57.6%	57.2%

Source: *Cervical Screening in Australia 2010-11* (Published: Australian Institute of Health and Welfare, June 2013).

Strategic Objective 16

Achieve Lower than the Australian Average in the Decayed, Missing, or Filled Teeth (DMFT) Index

Strategic Indicator 16: The Mean Number of Teeth with Dental Decay, Missing or Filled Teeth at Ages 6 and 12

This gives an indication of the effectiveness of dental prevention, early intervention and treatment services in the ACT. The aim for the ACT is to better the national average on the DMFT.

Table 17: The Mean Number of Teeth with Dental Decay, Missing or Filled Teeth at Ages 6 and 12

	ACT Rate¹	National Rate
DMFT index at 6 years	1.03	2.13
DMFT Index at 12 years	0.70	1.05

Source: *Child Dental Health Survey, 2009* (Published: Australian Institute of Health and Welfare, 2013).

Note:

1. Lowest of all jurisdictions.

Strategic Objective 17

Reducing the Risk of Fractured Femurs in ACT Residents Aged Over 75 years

Strategic Indicator 17: Reduction in the Rate of Broken Hips (Fractured Neck of Femur)

This indicator provides an indication of the success of public and community health initiatives to prevent hip fractures. In 2012-13, the ACT rate of admissions in persons aged 75 years and over with a fractured neck of femur was 5.5 per 1,000 persons in the ACT population. This is slightly above the long term target and follows a generally decreasing trend over the 10 year period from 2001-02.

Table 18: Reduction in the Rate of Broken Hips (Fractured Neck of Femur)

	2012-13 Outcome	Long Term Target
Rate per 1,000 people	5.5	5.3

Source: ACT Admitted Patient Care data, 2012-13.

Strategic Objective 18

Reduction in the Youth Smoking Rate

Strategic Indicator 18: Percentage of Persons Aged 12 to 17 Years Who Smoke Regularly

Results from the 2011 Australian Secondary School Alcohol and Drug Survey (ASSAD) show that 5.8 per cent of students were current smokers in that year. This demonstrates a continued decline in current smoking from 15.3 per cent in 2001, 6.7 per cent in 2008 to 5.8 per cent in 2011. The national rate for current smoking in youths in 2011 was 6.7 per cent.

Table 19: Percentage of Persons Aged 12 to 17 Years Who Smoke Regularly

	2011 Outcome	National Rate	Long Term Target
Percentage of persons aged 12 to 17 who are current smokers	5.8%	6.7%	5%

Source: ASSAD confidentialised unit record files 2011, ACT Health. Australian secondary students' use of tobacco, alcohol, and over-the-counter and illicit substances in 2011 report, The Cancer Council Victoria, December 2012.

Output Classes

The Health Directorate aims to deliver the best possible healthcare and health related services in Australia. It will do this through its public hospitals and related health services at Canberra Hospital; Mental Health, Justice Health and Alcohol and Drug Services; Public Health Services; Cancer Services; and through Rehabilitation, Aged and Community Care.

Output Class 1: Health and Community Care

Table 20: Output Class 1: Health and Community Care

	2013-14	2014-15
	Estimated Outcome	Budget
	\$'000	\$'000
Total Cost ¹	1,115,314	1,188,749
Government Payment for Outputs	232,249	257,615

Note:

1. Total cost includes depreciation and amortisation of \$32.673 million in 2013-14 and \$38.395 million in 2014-15.

Output 1.1: Acute Services

The Canberra Hospital provides a comprehensive range of acute care, including inpatient, outpatient, and emergency department services. The key strategic priority for acute services is to deliver timely access to effective and safe hospital care services.

This means focussing on:

1. strategies to meet performance targets for the emergency department, elective and emergency surgery; and
2. continuing to increase the capacity of acute care services.

Table 21: Output 1.1: Acute Services

	2013-14	2014-15
	Estimated Outcome	Budget
	\$'000	\$'000
Total Cost	705,145	751,424
Government Payment for Outputs	83,774	100,469

Output 1.2: Mental Health, Justice Health and Alcohol and Drug Services

The Health Directorate provides a range of Mental Health, Justice Health and Alcohol and Drug Services through the public and community sectors in hospitals, community health centres and other community settings, adult and youth correctional facilities and peoples' homes across the Territory. These services work to provide integrated and responsive care to a range of services, including hospital based specialist services, and therapeutic rehabilitation, counselling, supported accommodation services and other community based services.

The key strategic priorities for Mental Health, Justice Health and Alcohol and Drug Services are ensuring that people's health needs are met in a timely fashion and that care is integrated across hospital, community, and residential support services.

This means focussing on:

1. ensuring timely access to emergency mental health care;
2. ensuring that public and community mental health services in the ACT provide people with appropriate assessment, treatment and care that result in improved mental health outcomes;
3. providing community and hospital based alcohol and drug services; and
4. providing health assessments and care for people detained in corrective facilities.

Table 22: Output 1.2: Mental Health, Justice Health and Alcohol and Drug Services

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	123,258	126,378
Government Payment for Outputs	48,680	47,102

Output 1.3: Public Health Services

Improving the health status of the ACT population through interventions which promote behaviour changes to reduce susceptibility to illness, alter the ACT environment to promote the health of the population and promote interventions that remove or mitigate population health hazards. This includes programs that evaluate and report on the health status of the ACT population, assist in identifying particular health hazards and measures to reduce the risk to the health of the public from communicable diseases, environmental hazards and the supply of medicines and poisons.

Table 23: Output 1.3: Public Health Services

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	29,419	32,387
Government Payment for Outputs	26,477	26,148

Output 1.4: Cancer Services

Capital Region Cancer Services provides a comprehensive range of screening, assessment, diagnostic, treatment, and palliative care services. Services are provided in inpatient, outpatient and community settings.

The key strategic priorities for cancer care services are early detection and timely access to diagnostic and treatment services. These include ensuring that population screening rates for breast and cervical cancer meet targets, waiting time for access to essential services such as radiotherapy are consistent with agreed benchmarks, and increasing the proportion of women screened through the BreastScreen Australia program for the target population (aged 50 to 69 years) to 70 per cent over time.

Table 24: Output 1.4: Cancer Services

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	70,739	73,599
Government Payment for Outputs	7,278	8,097

Output 1.5: Rehabilitation, Aged and Community Care

The provision of an integrated, effective and timely response to rehabilitation, aged care and community care services in inpatient, outpatient, emergency department, sub-acute and community based settings.

The key strategic priorities for Rehabilitation, Aged and Community Care are:

1. ensuring that older persons in hospital wait an appropriate time for access to comprehensive assessment by the Aged Care Assessment Team. This will assist in their safe return home with appropriate support, or access to appropriately supported residential accommodation;
2. improving discharge planning to minimise the likelihood of readmission or inadequate support for independent living, following completion of hospital care; and
3. ensuring that access is consistent with clinical need, is timely for community based nursing and allied health services and that community based services are in place to better provide for the acute and post acute healthcare needs of the community.

Table 25: Output 1.5: Rehabilitation, Aged and Community Care

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	109,828	128,319
Government Payment for Outputs	39,288	44,490

Output 1.6: Early Intervention and Prevention

Improving the health and wellbeing of the ACT population through a range of programs, services and initiatives, focused on early intervention, prevention and health promotion. The key strategic priorities for early intervention and prevention include encouraging and promoting healthy lifestyle choices to decrease the rates of conditions like obesity and diabetes and reducing risky health behaviours such as smoking and alcohol consumption and maintaining high levels of immunisation.

Table 26: Output 1.6: Early Intervention and Prevention

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	76,925	76,642
Government Payment for Outputs	26,752	31,309

Accountability Indicators

Targets do not include Calvary Public Hospital and Clare Holland House activity that is included in the Local Hospital Network Directorate.

Output Class 1: Health and Community Care

Output 1.1: Acute Services

Table 27: Accountability Indicators Output 1.1

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
	NWAU{13}	NWAU{13}	NWAU{14}
a. Admitted Services – National Weighted Activity Units ^{1,2}	62,217	62,217	72,058
b. Non-Admitted Services – National Weighted Activity Units ^{1,2}	23,023	23,023	26,966
c. Emergency Services – National Weighted Activity Units ^{1,2}	8,115	8,115	9,720
d. Acute Admitted Mental Health Services – National Weighted Activity Units ^{1,2}	n/a	n/a	841
e. Sub Acute Services – National Weighted Activity Units ^{1,2}	n/a	n/a	3,942
f. Calvary Services – National Weighted Activity Units (out of scope) ^{1,3}	n/a	n/a	1,567
g. Mean waiting time for clients on the dental services waiting list ⁴	12 months	6 months	6 months
h. Percentage of the Women’s Health Service Intake Officer’s clients who receive an intake and assessment service within 14 working days of their initial referral	100%	100%	100%

Notes:

1. National Weighted Activity Unit (NWAU) is the ‘currency’ that is used to express the price weights for all services that are funded on an activity basis. NWAU {13} is the currency as defined by the Independent Hospital Pricing Authority in the National Efficient Price Determination 2013-14, while NWAU {14} is the currency for 2014-15.
2. The 2014-15 targets, in line with new national counting methodologies under the National Health Reform Agreement, are a consolidation of activity formerly counted under other outputs for mental health, rehabilitation and cancer services.
3. This is activity that has a separate funding source to the National Health Reform Agreement. This includes Department of Veteran Affairs, Pharmaceutical Benefit Scheme, and Medicare Benefits Scheme activity which is deemed as out of scope and is not included in the targets for the Local Hospital Network Directorate.
4. The 2013-14 estimated outcome and 2014-15 target of 6 months is linked to Commonwealth National Partnership funding to reduce public dental waiting lists.

Output 1.2: Mental Health, Justice Health and Alcohol and Drug Services

Table 28: Accountability Indicators Output 1.2

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
a. Adult mental health program community service contacts ¹	100,000	109,000	109,000
b. Children and youth mental health program community service contacts ²	65,000	60,000	65,000
c. ACT wide mental health program community service contacts ³	97,000	100,000	100,000
d. Proportion of detainees at the Alexander Maconochie Centre with a completed health assessment within 24 hours of detention	100%	100%	100%
e. Proportion of detainees in the Bimberi Youth Detention Centre with a completed health assessment within 24 hours of detention	100%	98%	100%
f. Justice Health Services community contacts	103,000	105,000	105,000
g. Percentage of current clients on opioid treatment with management plans	98%	98%	98%
h. Alcohol and Drug Services community contacts	70,000	70,000	70,000
i. Admitted Services – National Weighted Activity Units {13} ⁴	2,586	2,800	n/a
j. Non-Admitted Services – National Weighted Activity Units {13} ⁴	1,448	1,488	n/a

Notes:

1. Reflects community component of adult mental health services. Includes all community mental health services included in program area. This consists of Belconnen, City, Tuggeranong, Woden, Gungahlin, Children of parents with mental illness (COPMI) community mental health services.
2. Reflects community program of Child and Adolescent Mental Health Services (CAMHS) and youth services. Includes CAMHS North and South, The Cottage, DBT Program, CAMHS Early Intervention, Peri natal MH Consultation and Eating Disorders Program (EDP).
3. To replace "Older Persons' services". Indicator reflects community program of ACT wide Mental Health Services. This program includes Aboriginal and Torres Strait Islander Services, MITT North, MHS Intellectual Disability, Neuropsychology, Mental Health Dual Diagnosis, CATT, Older Persons MH community team.
4. Admitted and non-admitted Mental Health, Justice Health and Alcohol & Drug Service (MHJHADS) NWAU activity measures have been discontinued and consolidated as new measures in the 2014-15 budget papers under output class 1.1 acute services. The new Acute Admitted Mental Health (MH) output target measures any mental health activity captured across the entire campus not just within the divisions of MHJHADS at Canberra Hospital. The new output measures are in line with the new national counting methodologies under the National Health Reform Agreement for 2014-15.

Output 1.3: Public Health Services

Table 29: Accountability Indicators Output 1.3

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
a. Samples analysed	7,800	9,500	8,500
b. Compliance of licensable, registrable and non licensable activities at time of inspection	85%	75%	85%
c. Response time to environmental health hazards, communicable disease hazards relating to measles and meningococcal infections and food poisoning outbreaks is less than 24 hours	100%	95%	100%
d. Legalisation amendments to allow for deregulation of temporary non-profit community organisations (TNPCOs) that sell food ¹	n/a	n/a	1
e. Percentage of Health Protection Service's regulated businesses/activities who have access to Multi-year licenses/registrations ²	n/a	n/a	20%

Notes:

1. Relates to legislative amendments to the *Food Act 2001*.
2. Relates to activities regulated under the: *Public Health Act 1997*; *Food Act 2001*; *Medicines, Poisons and Therapeutic Goods Act 2008*; and *Radiation Protection Act 2008*.

Output 1.4: Cancer Services

Table 30: Accountability Indicators Output 1.4

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
a. Total breast screens	14,907	16,000	15,500
b. Number of breast screens for women aged 50 to 69	12,552	12,730	12,950
c. Percentage of women who receive results of screen within 28 days	100%	100%	100%
d. Percentage of screened patients who are assessed within 28 days	90%	92%	90%
e. Admitted Services – National Weighted Activity Units ¹	3,640	4,200	n/a
f. Non-Admitted Services – National Weighted Activity Units ¹	1,605	1,605	n/a

Note:

1. Admitted and non-admitted Cancer, Ambulatory and Community Health Support Service (CACHS) NWAU activity measures have been discontinued and consolidated as new measures in the 2014-15 budget papers under output class 1.1 acute services. The new activity targets measure all cancer affiliated activity captured across the entire campus not just within the divisions of CACHS at Canberra Hospital. The new output measures are in line with the new national counting methodologies under the National Health Reform Agreement for 2014-15.

Output 1.5: Rehabilitation, Aged and Community Care

Table 31: Accountability Indicators Output 1.5

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
a. Number of nursing (domiciliary and clinic based) occasions of service	82,000	80,000	82,000
b. Number of allied health regional services (occasions of service)	22,600	22,300	22,600
c. Admitted Services– National Weighted Activity Units ¹	3,183	4,032	n/a
d. Non-Admitted Services – National Weighted Activity Units ¹	734	734	n/a

Note:

1. Admitted and non-admitted Rehabilitation, Aged and Community Care Service (RACC) NWAU activity measures have been discontinued and consolidated as new measures in the 2014-15 budget papers under output class 1.1 acute services. The new activity targets measure all rehabilitation and aged care activity captured across the entire campus not just within the divisions of RACC at Canberra Hospital. The new output measures are in line with the new national counting methodologies under the National Health Reform Agreement for 2014-15.

Output 1.6: Early Intervention and Prevention

Table 32: Accountability Indicators Output 1.6

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
a. Immunisation coverage for the primary immunisation schedule measured at 1 year of age, in accordance with the Australian Childhood Immunisation Register	92%	93%	92%
b. Proportion of clients attending 'Well Women's Check' within the Women's Health Service that are from culturally and linguistically diverse communities	35%	40%	40%
c. Proportion of children aged 0-14 who are entering substitute and kinship care within the ACT who attend the Child at Risk Health Unit for a health and wellbeing screen	80%	95%	90%

Changes to Appropriation

Table 33: Changes to appropriation—Government Payment for Outputs, Controlled

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
2013-14 Budget	231,100	240,721	258,533	279,156	279,156
2nd Appropriation					
Revised Wage Parameters	6,356	5,398	11,878	22,466	23,981
FMA Section 16B Rollovers from 2012-13					
Commonwealth Grants — Mental Health (Reform Program) NP	310	-	-	-	-
2014-15 Budget Policy Adjustments					
Belconnen Community Health Centre and Walk-in Centre — More services, more staff	-	2,280	2,328	2,377	2,427
Calvary Ophthalmology services — Expansion	-	250	300	350	357
Canberra Region Cancer Centre — More services, more staff	-	2,059	2,102	2,146	2,191
Centenary Hospital for Women and Children — Expanding services	-	2,135	2,180	2,226	2,272
Community Mental Health — Expanding services	-	1,000	1,038	1,076	1,116
Community Nursing — Expanding services	-	581	1,058	1,080	1,103
Elective Surgery — Including bariatric surgery	-	8,250	8,423	8,600	8,781
Emergency Department Services — Better services	-	860	878	896	915
Endoscopy Services — Expanding services	-	300	306	313	319
Intensive and Critical Care — Expanding services	-	3,669	3,746	3,825	3,905
Lymphoedema Services — Expanding services	-	252	519	534	546
Mental Health Act — Amendments implementation	-	447	682	703	724
Our Hospitals — More general inpatient beds	-	10,760	14,320	14,621	14,928
Outpatient and Imaging Services — Expanding services	-	2,177	2,223	2,270	2,317
Suicide Prevention — Improving services	-	500	519	538	558
Tuggeranong Health Centre — More services, more staff	-	560	572	584	596
Women, Youth and Children Services	-	472	482	492	502
Offset — Base Funding Envelope	-	(36,552)	(41,676)	(42,631)	(43,557)
Health Infrastructure Program — Project management continuation	-	876	911	-	-
General Savings	-	(1,630)	(1,646)	(1,646)	(1,646)
2014-15 Budget Technical Adjustments					
Revised Indexation Parameters	-	665	682	(19,301)	30,235
Revised Indexation Parameters — Community Sector Funding	-	(242)	(313)	(389)	(470)
Rebase ACT Local Hospital Network Based on In-scope Services	-	10,571	31,563	68,615	50,884
Social and Community Services (SACS) Pay Equity Award	8	(121)	20	(158)	(130)
Redirection of SACS Contribution to the National Disability Insurance Agency	-	-	23	172	515
Transfer — Alcohol Interlocks Program from JACS	-	235	238	242	245
Transfer — Ambulance Service — Extended Care Paramedic Program to JACS (ESA)	-	(455)	-	-	-
Transfer — Carbon Neutral Fund to ESDD	(212)	(99)	-	-	-
Transfer — Official Visitors to Public Trustee	-	(78)	(80)	(82)	(84)

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
Revised Funding Profile — Aboriginal and Torres Strait Islander Smoking Cessation Program	(178)	178	-	-	-
Revised Funding Profile — Commonwealth Grants — Commonwealth Dental Health Program NP	(530)	530	-	-	-
Revised Funding Profile — Commonwealth Grants — Essential Vaccines NP	(600)	600	-	-	-
Revised Funding Profile — Commonwealth Grants — Health Services NP	(200)	200	-	-	-
Revised Funding Profile — Commonwealth Grants — Home and Community Care for Veterans NP	(101)	101	-	-	-
Revised Funding Profile — Commonwealth Grants — Indigenous Early Childhood Development NP	(35)	35	-	-	-
Revised Funding Profile — Commonwealth Grants — National Health Reform NP	(4,006)	4,006	-	-	-
Revised Funding Profile — Commonwealth Grants — Preventive Health NP	(1,733)	1,733	-	-	-
Commonwealth Grants — Adult Public Dental Services NP	-	(3,298)	(1,566)	(1,566)	(1,566)
Commonwealth Grants — Essential Vaccines NP	21	(233)	(238)	(250)	(647)
Commonwealth Grants — Health Services NP	(38)	37	47	172	(437)
Commonwealth Grants — Improving Public Hospitals NP	(810)	(1,483)	(1,483)	(1,483)	(2,293)
Commonwealth Grants — Indigenous Early Childhood Development — Antenatal and Reproductive Health NP	-	262	-	-	-
Commonwealth Grants — Long Stay Older Patients NP	3,207	-	-	-	-
Commonwealth Grants — Preventive Health NP	-	(894)	(894)	(2,181)	(3,468)
Commonwealth Grants — Mental Health (Reform Program) NP	(310)	-	-	-	-
2014-15 Budget	232,249	257,615	297,675	343,767	374,275

Table 34: Changes to appropriation—Territorial

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
2013-14 Budget	4,615	784	803	823	823
2014-15 Budget Policy Adjustments					
Calvary Public Hospital — Car park — Electrical substation	-	2,208	-	-	-
Calvary Public Hospital — Refurbishments for more beds	-	1,605	-	-	-
The Canberra Hospital Redevelopment — Calvary component	-	3,022	-	-	-
2014-15 Budget Technical Adjustments					
Capital Upgrades Indexation	-	-	-	-	21
2014-15 Budget	4,615	7,619	803	823	844

Table 35: Changes to appropriation—Capital Injections, Controlled

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
2013-14 Budget	190,408	95,366	17,333	6,809	6,809
FMA Section 16B Rollovers from 2012-13					
Enhanced Community Health Centre — Belconnen	3,241	-	-	-	-
National Health Reform	3,173	-	-	-	-
Clinical Services Redevelopment — Phase 3	3,093	-	-	-	-
Replacement of CT Scanner at the Canberra Hospital	2,893	-	-	-	-
Tuggeranong Health Centre — Stage 2	1,802	-	-	-	-
Major Building Plant Replacement and Upgrade	1,655	-	-	-	-
Clinical Equipment for Calvary Hospital	1,500	-	-	-	-
Clinical Services Redevelopment — Phase 2	1,281	-	-	-	-
Enhanced Community Centre Backup Power	1,250	-	-	-	-
Linear Accelerator Procurement and Replacement	733	-	-	-	-
Staging and Decanting — Moving To Our Future	520	-	-	-	-
HIP Change Management and Communication Support	486	-	-	-	-
Provision for Project Definition Planning	466	-	-	-	-
Integrated Cancer Centre — Phase 1	423	-	-	-	-
Facilities Improvements to Patient Accommodation	393	-	-	-	-
Ambulatory Care Improvements	377	-	-	-	-
Identity and Access Management	242	-	-	-	-
Building Upgrades	213	-	-	-	-
Additional Air Quality Performance Station	204	-	-	-	-
Central Sterilising Services	172	-	-	-	-
New Gungahlin Health Centre	155	-	-	-	-
Augmentation of Medical and Administrative Offices	114	-	-	-	-
Aboriginal and Torres Strait Islander Residential Alcohol and Other Drug Rehabilitation Facility	109	-	-	-	-
Mechanical Systems Upgrades	106	-	-	-	-
Fire Safety/Security Upgrades	99	-	-	-	-
Northside Hospital Specification and Documentation	95	-	-	-	-
Medical Facilities Upgrades	77	-	-	-	-
Mental Health Young Persons Unit	25	-	-	-	-
Adult Mental Health Inpatient Facility	4	-	-	-	-
Women and Children's Hospital	(4,418)	-	-	-	-
Integrated Cancer Centre — Phase 2	(3,047)	-	-	-	-
An E-Healthy Future	(1,574)	-	-	-	-
Health Infrastructure Program — Project Management	(1,020)	-	-	-	-
Staging, Decanting and Continuity of Services	(869)	-	-	-	-
Refurbishment of Health Centre — Tuggeranong	(523)	-	-	-	-
Digital Mammography	(260)	-	-	-	-
Secure Adult Mental Health Unit — Forward Design	(14)	-	-	-	-
Enhancing Canberra Hospital Facilities — Design	(12)	-	-	-	-
2014-15 Budget Policy Adjustments					
Calvary Public Hospital — Car Park	-	15,219	1,653	-	-
Health Infrastructure Program — Project management continuation	-	13,184	14,522	-	-
Secure Mental Health Unit	-	3,808	30,619	9,064	-
The Canberra Hospital — Essential infrastructure and engineering works	-	3,301	2,339	-	-
The Canberra Hospital Redevelopment	-	3,052	13,000	5,189	-

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
2014-15 Budget Technical Adjustments					
Capital Upgrades Indexation	-	-	-	-	104
Project Transfer — From Clinical Services Redevelopment — Phase 3 to Integrated Cancer Centre — Phase 2	(3,110)	-	-	-	-
Project Transfer — From Enhanced Community Backup Power to Integrated Cancer Centre — Phase 2	(1,200)	-	-	-	-
Project Transfer — From Provision for Project Definition Planning to Integrated Cancer Centre — Phase 2	(1,000)	-	-	-	-
Project Transfer — To Integrated Cancer Centre — Phase 2 From Various Projects	5,310	-	-	-	-
Revised Funding Profile — Aboriginal and Torres Strait Islander Residential Alcohol and Other Drug Rehabilitation Facility	(2,669)	(2,017)	4,686	-	-
Revised Funding Profile — Adult Secure Mental Health — Finalising Design	(1,109)	1,109	-	-	-
Revised Funding Profile — Ambulatory Care Improvements at the Canberra Hospital including the Respiratory Medicine and Gastroenterology Areas	(124)	124	-	-	-
Revised Funding Profile — An E-Healthy Future	(5,926)	-	5,926	-	-
Revised Funding Profile — Augmentation of Medical and Administrative Offices to meet Organisational Change and Growth	(75)	75	-	-	-
Revised Funding Profile — Building Upgrades	(463)	463	-	-	-
Revised Funding Profile — Building Upgrades to address Condition Report Findings including Works to Bathrooms, Plumbing and Other Works	(120)	120	-	-	-
Revised Funding Profile — Calvary Hospital Car Park — Design	(798)	798	-	-	-
Revised Funding Profile — Clinical Services and Inpatient Unit Design and Infrastructure Expansion	(18,149)	(12,793)	30,942	-	-
Revised Funding Profile — Clinical Services Redevelopment — Phase 2	(1,116)	1,116	-	-	-
Revised Funding Profile — Clinical Services Redevelopment — Phase 3	(5,844)	4,491	1,353	-	-
Revised Funding Profile — Continuity of Health Services Plan — Essential Infrastructure	(7,357)	8,067	1,957	(2,667)	-
Revised Funding Profile — Electrical/Fire/Safety Upgrades	(390)	390	-	-	-
Revised Funding Profile — Enhanced Community Centre Backup Power	(996)	996	-	-	-
Revised Funding Profile — Enhanced Community Health Centre — Belconnen	(757)	757	-	-	-
Revised Funding Profile — Facilities Improvements to Laboratory and Outpatients Area	(737)	737	-	-	-
Revised Funding Profile — Health Infrastructure Program — Project Management	8,384	(8,384)	-	-	-
Revised Funding Profile — Heating, Ventilation and Air Conditioning Systems Upgrades	(154)	154	-	-	-
Revised Funding Profile — HIP Change Management and Communication Support	(369)	369	-	-	-
Revised Funding Profile — Linear Accelerator Procurement and Replacement	(661)	661	-	-	-
Revised Funding Profile — Major Building Plant Replacement and Upgrade	(1,597)	1,597	-	-	-
Revised Funding Profile — Medical Facilities Upgrades	(332)	332	-	-	-
Revised Funding Profile — Mental Health Young Persons Unit	(655)	655	-	-	-

	2013-14 Est. Out. \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
Revised Funding Profile — Mobile Dental Clinic	(155)	155	-	-	-
Revised Funding Profile — National Health Reform	(53)	53	-	-	-
Revised Funding Profile — New Gungahlin Health Centre	(380)	380	-	-	-
Revised Funding Profile — New Multistorey Car Park TCH	(517)	517	-	-	-
Revised Funding Profile — Northside Hospital Specification and Documentation (now University of Canberra Public Hospital)	(2,296)	2,296	-	-	-
Revised Funding Profile — Provision for Project Definition Planning	(1,208)	1,208	-	-	-
Revised Funding Profile — Replacement of ICT Scanner at the Canberra Hospital	(400)	400	-	-	-
Revised Funding Profile — Staging and Decanting — Moving To Our Future	(12,361)	7,034	5,327	-	-
Revised Funding Profile — Staging, Decanting and Continuity of Services	(3,127)	1,283	1,844	-	-
Revised Funding Profile — Tuggeranong Health Centre — Stage 2	1,970	(1,970)	-	-	-
Revised Funding Profile — University of Canberra Public Hospital — Design	(5,220)	(32)	5,252	-	-
Revised Funding Profile — Upgrade of Medical and Administrative Offices	(479)	479	-	-	-
Cessation — Continuity of Health Services Plan — Essential Infrastructure	-	-	-	-	(2,667)
Savings — Central Sterilising Services	(3,696)	(13,299)	-	-	-
2014-15 Budget	133,636	132,251	136,753	18,395	4,246

Financial Statements

Table 36: Health Directorate: Operating Statement

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
Income							
Revenue							
231,100	Government Payment for Outputs	232,249	257,615	11	297,675	343,767	374,275
102,448	User Charges - Non ACT Government	105,548	105,806	..	108,372	110,766	112,137
718,290	User Charges - ACT Government	718,290	757,356	5	795,130	834,632	869,856
4,120	Grants from the Commonwealth	4,120	4,245	3	4,370	4,495	4,551
100	Interest	100	100	-	100	100	100
178	Distribution from Investments with the Territory Banking Account	178	178	-	178	178	178
13,230	Other Revenue	16,230	16,722	3	17,183	17,633	17,816
780	Resources Received Free of Charge	780	792	2	804	824	834
1,070,246	Total Revenue	1,077,495	1,142,814	6	1,223,812	1,312,395	1,379,747
Gains							
1,544	Other Gains	1,544	1,574	2	1,604	1,624	1,644
1,544	Total Gains	1,544	1,574	2	1,604	1,624	1,644
1,071,790	Total Income	1,079,039	1,144,388	6	1,225,416	1,314,019	1,381,391
Expenses							
576,404	Employee Expenses	594,087	635,448	7	681,688	731,095	765,324
72,099	Superannuation Expenses	77,300	79,614	3	82,430	85,567	88,457
318,133	Supplies and Services	302,924	319,790	6	345,536	372,564	394,914
35,673	Depreciation and Amortisation	32,673	38,395	18	39,794	42,494	42,903
401	Borrowing Costs	401	401	-	401	401	401
10,551	Cost of Goods Sold	10,551	10,934	4	11,353	11,773	12,067
84,023	Grants and Purchased Services	86,453	92,810	7	98,406	103,906	110,293
12,425	Other Expenses	10,925	11,357	4	11,981	12,525	13,128
1,109,709	Total Expenses	1,115,314	1,188,749	7	1,271,589	1,360,325	1,427,487
-37,919	Operating Result	-36,275	-44,361	-22	-46,173	-46,306	-46,096
Other Comprehensive Income							
-37,919	Total Comprehensive Income	-36,275	-44,361	-22	-46,173	-46,306	-46,096

Table 37: Health Directorate: Balance Sheet

Budget at 30/6/14 \$'000		2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
Current Assets							
23,803	Cash and Cash Equivalents	64,816	42,075	-35	41,037	39,999	38,961
67,010	Receivables	70,994	73,236	3	75,478	77,720	79,962
2,990	Investments	3,011	3,011	-	3,011	3,011	3,011
7,953	Inventories	8,313	8,513	2	8,713	8,913	9,113
168	Assets Held for Sale	34	34	-	34	34	34
2,715	Other Current Assets	4,072	4,172	2	4,272	4,372	4,472
104,639	Total Current Assets	151,240	131,041	-13	132,545	134,049	135,553
Non Current Assets							
200	Receivables	100	200	100	300	400	500
1,002,588	Property, Plant and Equipment	955,829	1,015,328	6	1,199,013	1,226,773	1,215,990
21,023	Intangibles	17,896	30,411	70	40,352	34,367	28,382
127,925	Capital Works in Progress	98,157	130,259	33	44,424	9,997	0
1,151,736	Total Non Current Assets	1,071,982	1,176,198	10	1,284,089	1,271,537	1,244,872
1,256,375	TOTAL ASSETS	1,223,222	1,307,239	7	1,416,634	1,405,586	1,380,425
Current Liabilities							
59,851	Payables	87,972	88,172	..	88,372	88,572	88,772
3,488	Finance Leases	2,415	2,515	4	2,615	2,715	2,815
181,438	Employee Benefits	193,184	187,149	-3	203,677	218,162	232,648
1,056	Other Liabilities	2,424	2,624	8	2,824	3,024	3,224
245,833	Total Current Liabilities	285,995	280,460	-2	297,488	312,473	327,459
Non Current Liabilities							
2,002	Finance Leases	4,262	4,362	2	4,462	4,562	4,662
18,282	Employee Benefits	14,130	15,692	11	17,379	19,157	20,760
1,503	Other	1,503	1,503	-	1,503	1,503	1,503
21,787	Total Non Current Liabilities	19,895	21,557	8	23,344	25,222	26,925
267,620	TOTAL LIABILITIES	305,890	302,017	-1	320,832	337,695	354,384
988,755	NET ASSETS	917,332	1,005,222	10	1,095,802	1,067,891	1,026,041
REPRESENTED BY FUNDS EMPLOYED							
844,748	Accumulated Funds	773,325	861,215	11	951,795	923,884	882,034
144,007	Reserves	144,007	144,007	-	144,007	144,007	144,007
988,755	TOTAL FUNDS EMPLOYED	917,332	1,005,222	10	1,095,802	1,067,891	1,026,041

Table 38: Health Directorate: Cash Flows Statement

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
CASH FLOWS FROM OPERATING ACTIVITIES							
Receipts							
231,100	Cash from Government for Outputs	232,249	257,615	11	297,675	343,767	374,275
820,496	User Charges	879,879	862,920	-2	903,260	945,136	981,731
4,120	Grants Received from the Commonwealth	4,120	4,245	3	4,370	4,495	4,551
100	Interest Received	100	100	-	100	100	100
178	Distribution from Investments with the Territory Banking Account	178	178	-	178	178	178
82,174	Other Receipts	71,174	71,696	1	72,187	72,657	72,860
1,138,168	Operating Receipts	1,187,700	1,196,754	1	1,277,770	1,366,333	1,433,695
Payments							
563,462	Related to Employees	579,789	637,897	10	663,447	714,806	749,208
72,099	Related to Superannuation	77,300	81,675	6	82,430	85,567	88,457
318,937	Related to Supplies and Services	303,728	320,619	6	346,434	373,462	395,843
401	Borrowing Costs	401	401	-	401	401	401
84,023	Grants and Purchased Services	86,453	92,810	7	98,406	103,906	110,293
90,545	Other	75,045	75,832	1	76,857	77,781	78,638
1,129,467	Operating Payments	1,122,716	1,209,234	8	1,267,975	1,355,923	1,422,840
8,701	NET CASH INFLOW/(OUTFLOW) FROM OPERATING ACTIVITIES	64,984	-12,480	-119	9,795	10,410	10,855
CASH FLOWS FROM INVESTING ACTIVITIES							
Payments							
198,686	Purchase of Property, Plant and Equipment and Capital Works	141,914	141,060	-1	146,134	28,391	14,687
198,686	Investing Payments	141,914	141,060	-1	146,134	28,391	14,687
-198,686	NET CASH INFLOW/(OUTFLOW) FROM INVESTING ACTIVITIES	-141,914	-141,060	1	-146,134	-28,391	-14,687

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
CASH FLOWS FROM FINANCING ACTIVITIES							
Receipts							
190,408	Capital Injections from Government	133,636	132,251	-1	136,753	18,395	4,246
190,408	Financing Receipts	133,636	132,251	-1	136,753	18,395	4,246
Payments							
1,452	Repayment of Finance Leases	1,452	1,452	-	1,452	1,452	1,452
1,452	Financing Payments	1,452	1,452	-	1,452	1,452	1,452
188,956	NET CASH INFLOW/(OUTFLOW) FROM FINANCING ACTIVITIES	132,184	130,799	-1	135,301	16,943	2,794
-1,029	NET INCREASE / (DECREASE) IN CASH HELD	55,254	-22,741	-141	-1,038	-1,038	-1,038
24,832	CASH AT THE BEGINNING OF REPORTING PERIOD	9,562	64,816	578	42,075	41,037	39,999
23,803	CASH AT THE END OF REPORTING PERIOD	64,816	42,075	-35	41,037	39,999	38,961

Table 39: Health Directorate: Statement of Changes in Equity

Budget at 30/6/14 \$'000		2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
Opening Equity							
692,259	Opening Accumulated Funds	675,964	773,325	14	861,215	951,795	923,884
144,007	Opening Asset Revaluation Reserve	144,007	144,007	-	144,007	144,007	144,007
836,266	Balance at the Start of the Reporting Period	819,971	917,332	12	1,005,222	1,095,802	1,067,891
Comprehensive Income							
-37,919	Operating Result for the Period	-36,275	-44,361	-22	-46,173	-46,306	-46,096
-37,919	Total Comprehensive Income	-36,275	-44,361	-22	-46,173	-46,306	-46,096
0	Total Movement in Reserves	0	0	-	0	0	0
Transactions Involving Owners Affecting Accumulated Funds							
190,408	Capital Injections	133,636	132,251	-1	136,753	18,395	4,246
190,408	Total Transactions Involving Owners Affecting Accumulated Funds	133,636	132,251	-1	136,753	18,395	4,246
Closing Equity							
844,748	Closing Accumulated Funds	773,325	861,215	11	951,795	923,884	882,034
144,007	Closing Asset Revaluation Reserve	144,007	144,007	-	144,007	144,007	144,007
988,755	Balance at the End of the Reporting Period	917,332	1,005,222	10	1,095,802	1,067,891	1,026,041

Notes to the Controlled Budget Statements

Significant variations are as follows:

Operating Statement

- government payment for outputs: the increase of \$25.366 million in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to planned growth in expenses, and new and continuing initiatives.
- user charges – Non ACT Government: the increase of \$3.1 million in the 2013-14 estimated outcome from the original budget is due to final acquittal of prior year NSW Cross Border activity, partially offset by a decrease in in-patient revenue associated with Department of Veterans' Affairs patients.
- user charges — ACT Government: the increase of \$39.066 million in the 2014-15 Budget from the 2013-14 estimated outcome is due to an increase in payments from the ACT Local Hospital Network to the Health Directorate for services delivered by the Canberra Hospital and Health Services associated with growth and indexation.
- other revenue: the increase of \$3 million in the 2013-14 estimated outcome from the original budget is mainly due to grant revenue from Health Workforce Australia.
- employee expenses:
 - the increase of \$17.683 million in the 2013-14 estimated outcome from the original budget relates to wage increases from the new Enterprise Bargaining Agreements and a reallocation of expenses from supplies and services following a review of the allocation of the health funding envelope against current spending patterns; and
 - the increase of \$41.361 million in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to planned growth in expenses, and new and continuing initiatives.
- superannuation: the increase of \$5.201 million in the 2013-14 estimated outcome from the original budget relates to wage increases from the new Enterprise Bargaining Agreements and a reallocation of expenses from supplies and services following a review of the allocation of the health funding envelope against current spending patterns.
- supplies and service:
 - the decrease of \$15.209 million in the 2013-14 estimated outcome from the original budget is due to a reallocation of expenses to employee expenses and superannuation following a review of the allocation of the health funding envelope against current spending patterns; and
 - the increase of \$16.866 million in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to indexation and new initiatives.

- depreciation and amortisation:
 - the decrease of \$3 million in the 2013-14 estimated outcome from the original budget is mainly due to delay in the completion of Health Infrastructure Program (HIP) projects, including elements of the information technology project, 'An E-Healthy Future'; and
 - the increase of \$5.722 million in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to the expected completion of HIP projects.
- grants and purchased services:
 - the increase of \$2.430 million in the 2013-14 estimated outcome from the original budget is mainly due to wage increases from the new Enterprise Bargaining Agreements for Calvary Public Hospital; and
 - the increase of \$6.357 million in the 2014-15 Budget from the 2013-14 estimated outcome is due to indexation and new initiatives.
- other expenses: the decrease of \$1.5 million in the 2013-14 estimated outcome from the original budget relates to a reduction in asset write-offs and impairments.

Balance Sheet

- cash and cash equivalents:
 - the increase of \$41.013 million in the 2013-14 estimated outcome from the original budget relates to NSW cross border payments for prior years; and
 - the decrease of \$22.741 million in the 2014-15 Budget from the 2013-14 estimated outcome relates to additional cash outflows associated with the 27th pay.
- current and non-current receivables: the increase of \$3.884 million in the 2013-14 estimated outcome from the original budget is due to the 2012-13 audited outcome flow-on effect.
- other current assets: the increase of \$1.357 million in the 2013-14 estimated outcome from the original budget is due to the 2012-13 audited outcome flow-on effect.
- property, plant and equipment:
 - the decrease of \$46.759 million in the 2013-14 estimated outcome from the original budget is mainly due to delays in projects under HIP; and
 - the increase of \$59.499 million in the 2014-15 Budget from the 2013-14 estimated outcome is mainly due to expected completion of HIP projects.

- intangibles:
 - the decrease of \$3.127 million in the 2013-14 estimated outcome from the original budget is mainly due to delays in 'An E-Healthy Future' capital program; and
 - the increase of \$12.515 million in 2014-15 Budget from the 2013-14 estimated outcome is due to the expected completion of projects under the 'An E-Healthy Future' capital program.
- capital works in progress: the decrease of \$29.768 million in the 2013-14 estimated outcome from the original budget and the increase of \$32.102 million in the 2014-15 Budget from the 2013-14 estimated outcome is due to the timing of HIP projects currently underway or commencing in 2014-15.
- payables: the increase of \$28.121 million in the 2013-14 estimated outcome from the original budget is due to the 2012-13 audited outcome flow-on effect.
- current and non current finance leases: the increase of \$1.187 million in the 2013-14 estimated outcome from the original budget relates to the 2012-13 audited outcome flow-on effect.
- current and non current employee benefits:
 - the increase of \$7.594 million in the 2013-14 estimated outcome from the original budget relates to the 2012-13 audited outcome flow-on effect and wage increases from the new Enterprise Bargaining Agreements; and
 - the decrease of \$4.473 million in the 2014-15 Budget from the 2013-14 estimated outcome relates to the 27th pay, partially offset by wage increases.

Statement of Cash Flows

- Variations in the statement are explained in the notes above.

Statement of Changes in Equity

- Variations in the statement are explained in the notes above.

Table 40: Health Directorate: Statement of Income and Expenses on behalf of the Territory

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
	Revenue						
4,615	Payment for Expenses on Behalf of the Territory	4,615	7,619	65	803	823	844
1,230	Taxes, Fees and Fines	1,230	1,275	4	1,308	1,342	1,376
5,845	Total Revenue	5,845	8,894	52	2,111	2,165	2,220
	Expenses						
4,615	Grants and Purchased Services	4,615	7,619	65	803	823	844
1,230	Transfer Expenses	1,230	1,275	4	1,308	1,342	1,376
5,845	Total Expenses	5,845	8,894	52	2,111	2,165	2,220
0	Operating Result	0	0	-	0	0	0
	Other Comprehensive Income						
0	Total Comprehensive Income	0	0	-	0	0	0

Table 41: Health Directorate: Statement of Assets and Liabilities on behalf of the Territory

Budget at 30/6/14 \$'000		2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
	Current Assets						
300	Cash and Cash Equivalents	295	295	-	295	295	295
0	Receivables	5	5	-	5	5	5
300	Total Current Assets	300	300	-	300	300	300
300	TOTAL ASSETS	300	300	-	300	300	300
	Current Liabilities						
300	Payables	300	300	-	300	300	300
300	Total Current Liabilities	300	300	-	300	300	300
300	TOTAL LIABILITIES	300	300	-	300	300	300
0	NET ASSETS	0	0	-	0	0	0
	REPRESENTED BY FUNDS EMPLOYED						
0	TOTAL FUNDS EMPLOYED	0	0	-	0	0	0

Table 42: Health Directorate: Statement of Cash Flows on behalf of the Territory

Budget at 30/6/14 \$'000		2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
CASH FLOWS FROM OPERATING ACTIVITIES							
Receipts							
4,615	Cash from Government for EBT	4,615	7,619	65	803	823	844
1,230	Taxes, Fees and Fines	1,230	1,275	4	1,308	1,342	1,376
462	Other Receipts	462	763	65	81	82	84
6,307	Operating Receipts	6,307	9,657	53	2,192	2,247	2,304
Payments							
4,615	Grants and Purchased Services	4,615	7,619	65	803	823	844
462	Other	462	763	65	81	82	84
1,230	Territory Receipts to Government	1,230	1,275	4	1,308	1,342	1,376
6,307	Operating Payments	6,307	9,657	53	2,192	2,247	2,304
0	NET CASH INFLOW/ (OUTFLOW) FROM OPERATING ACTIVITIES	0	0	-	0	0	0
300	CASH AT THE BEGINNING OF REPORTING PERIOD	295	295	-	295	295	295
300	CASH AT THE END OF REPORTING PERIOD	295	295	-	295	295	295

Table 43: Health Directorate: Statement of Changes in Equity on behalf of the Territory

Budget at 30/6/14 \$'000		2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
0	Total Movement in Reserves	0	0	-	0	0	0
0	Balance at the End of the Reporting Period	0	0	-	0	0	0

Notes to the Territorial Budget Statements

Statement of Income and Expenses on Behalf of the Territory

- payment for expenses on behalf of the Territory and grants and purchased services: the increase of \$3.004 million in the 2014-15 Budget from the 2013-14 estimated outcome relates to higher levels of funding for capital works at Calvary Public Hospital.

Statement of Cash Flows on Behalf of the Territory

- Variations in the statement are explained in the note above.

ACT LOCAL HOSPITAL NETWORK DIRECTORATE

Purpose

The ACT Local Hospital Network Directorate (ACT LHN) was established under the *Health Act 1953* (the Act), and is administered by the Director-General of the Health Directorate and supported by staff from the Health Directorate.

The ACT Local Hospital Council (Council), constituted under the Act, provides advice to the Director-General of the Health Directorate on the clinical and corporate governance framework needed to support the improvement in standards of patient care and services provided through the ACT LHN. The Council also advises on ways to support, encourage and facilitate community and clinician involvement in the planning of services that form part of the ACT LHN. The Council reports to the Minister for Health on the state of the ACT LHN and any recommendations relating to improvement of the ACT LHN that the Council considers necessary.

The ACT LHN receives Activity Based Funding (ABF) from both the Commonwealth and the ACT Governments, and block funding for teaching, training and research. It purchases public hospital services from four ACT public hospital providers:

- Canberra Hospital;
- Calvary Public Hospital;
- Clare Holland House; and
- Queen Elizabeth II Family Centre.

2014-15 Priorities

Strategic and operational priorities to be pursued in 2014-15 include:

- receiving and distributing funding for public hospital services under the *National Health Reform Agreement* (NHRA); and
- purchasing public hospital services from four ACT public hospital providers.

Estimated Employment Level

The ACT LHN does not employ any staff. All staff providing administrative support for the ACT LHN are employed by the Health Directorate.

Strategic Objectives and Indicators

The ACT Local Hospital Network Directorate (ACT LHN) consists of a networked system that includes the Canberra Hospital and Health Services, Calvary Hospital, Clare Holland House and Queen Elizabeth II Family Centre. The ACT LHN has a yearly *Service Level Agreement* (SLA) which sets out the delivery of public hospital services and is agreed between the ACT Minister for Health and the Director General of the ACT LHN. This SLA identifies the funding and activity to be delivered by the ACT LHN and key performance priority targets. The ACT Government manages system-wide public hospital service delivery, planning and performance, including the purchasing of public hospital services and capital planning, and is responsible for the management of the ACT LHN.

The following Strategic Indicators include some of the major performance indicators implemented under the requirements of the *National Health Reform Agreement*.

Strategic Objective 1

Percentage of Elective Surgery Cases Admitted on Time by Clinical Urgency

Strategic Indicator 1: Percentage of Elective Surgery Cases Admitted on Time by Clinical Urgency

Table 44: Percentage of Elective Surgery Cases Admitted on Time by Clinical Urgency.

Clinically recommended time by urgency category	2013¹ Target	2013 Outcome	2014¹ Target	2015¹ Target
Urgent – admission within 30 days is desirable for a condition that has the potential to deteriorate quickly to the point that it may become an emergency	97%	98%	100%	100%
Semi urgent – admission within 90 days is desirable for a condition causing some pain, dysfunction or disability which is not likely to deteriorate quickly or become an emergency	66%	66%	78%	89%
Non urgent – admission at some time in the future acceptable for a condition causing minimal or no pain, dysfunction or disability, which is not likely to deteriorate quickly and which does not have the potential to become an emergency ²	86%	90%	91%	95%

Notes:

1. Targets are based on calendar year data in accordance with national reporting requirements.
2. Health Directorate establishes a 365 day maximum desirable waiting time for category three non urgent patients.

Strategic Objective 2

Improved Emergency Department Timeliness

Strategic Indicator 2.1: The Proportion of Emergency Department Presentations that are Treated within Clinically Appropriate Timeframes

Table 45: The proportion Emergency Department Presentations that are Treated within Clinically Appropriate Timeframes.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target	Long Term Target
One (resuscitation seen immediately)	100%	100%	100%	100%
Two (emergency seen within 10 mins)	80%	80%	80%	80%
Three (urgent seen within 30 mins)	75%	50%	75%	75%
Four (semi urgent seen within 60 mins)	70%	57%	70%	70%
Five (non urgent seen within 120 mins)	70%	85%	70%	70%
All Presentations	70%	60%	70%	70%

Strategic Indicator 2.2: The proportion of Emergency Department presentations whose length of stay in the Emergency Department is four hours or less

Table 46: The proportion of Emergency Department presentations whose length of stay in the Emergency Department is four hours or less

	2013 ¹ Target	2013 Outcome	2014 ¹ Target	2015 ¹ Target
The proportion of Emergency Department presentations who either physically leave the Emergency Department for admission to hospital, are referred for treatment or are discharged, whose total time in the Emergency Department is within four hours.	65%	59%	77%	90%

Note:

1. Targets are based on calendar year data in accordance with national reporting requirements.

Strategic Objective 3

Maximising the Quality of Hospital Services

The following four indicators are a selection of the patient safety and service quality indicators that are used to monitor ACT public hospital services. The targets provide an indication of the desired outcomes over time. Given the nature of the indicators, small fluctuations during a particular period can skew results. The success in meeting these indicators requires a consideration of performance over time rather than for any given period.

Strategic Indicator 3.1: The Proportion of People who Undergo a Surgical Operation Requiring an Unplanned Return to the Operating Theatre within a Single Episode of Care due to Complications of their Primary Condition

This indicator represents the quality of theatre and post operative care.

Table 47: The Proportion of People who Undergo a Surgical Operation Requiring an Unplanned Return to the Operating Theatre within a Single Episode of Care due to Complications of their Primary Condition.

	2013-14 Target ¹	2013-14 Est. Outcome	2014-15 Target ¹
Canberra Hospital	<1.0%	0.7%	<1.0%
Calvary Public Hospital	<0.5%	0.3%	<0.5%

Note:

1. Hospital targets are based on similar rates for peer hospitals – based on the Australian Council of Healthcare Standards (ACHS).

Strategic Indicator 3.2: The Proportion of People Separated from ACT public hospitals who are re-admitted to Hospital within 28 Days of their Separation due to Complications of their Condition (where the re-admission was unforeseen at the time of separation).

This indicator highlights the effectiveness of hospital based and community services in the ACT in the treatment of persons who receive hospital based care.

Table 48: The Proportion of People Separated from ACT public hospitals who are re-admitted to Hospital within 28 Days of their Separation due to Complications of their Condition (where the re-admission was unforeseen at the time of separation)

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target
Canberra Hospital	<2.0%	1.4%	<2.0%
Calvary Public Hospital	<1.0%	0.7%	<1.0%

Strategic Indicator 3.3: The Number of People Admitted to Hospitals per 10,000 Occupied Bed Days who Acquire a Staphylococcus Aureus Bacteraemia Infection (SAB infection) During their Stay

This provides an indication of the safety of hospital based services.

Table 49: The Number of People Admitted to Hospitals per 10,000 Occupied Bed Days who Acquire a Staphylococcus Aureus Bacteraemia Infection (SAB infection) During their Stay.

	2013-14 Target	2013-14 Est. Outcome ¹	2014-15 Target
Canberra Hospital	<2 per 10,000	1.6 per 10,000	<2 per 10,000
Calvary Public Hospital	<2 per 10,000	0.4 per 10,000	<2 per 10,000

Note:

1. Very small numbers can cause fluctuations in the results for this indicator.

Strategic Indicator 3.4: The Estimated Hand Hygiene Rate

The estimated hand hygiene rate for a hospital is a measure of how often (as a percentage) hand hygiene is correctly performed.

It is calculated by dividing the number of observed hand hygiene 'moments' where proper hand hygiene was practiced in a specified audit period, by the total number of observed hand hygiene 'moments' in the same audit period.

Table 50: Estimated Hand Hygiene Rate.

	2013-14 Target	2013-14 Est. Outcome	2014-15 Target
Canberra Hospital	70%	72.5%	70%
Calvary Public Hospital	70%	75.6%	70%

Output Classes

The ACT Local Hospital Network Directorate will receive funding under the NHRA and purchase public hospital services from the Canberra Hospital and Health Services, Calvary Hospital, Clare Holland House and Queen Elizabeth II Family Centre.

Output Class 1: ACT Local Hospital Network

Table 51: Output Class 1: ACT Local Hospital Network

	2013-14 Estimated Outcome \$'000	2014-15 Budget \$'000
Total Cost	906,340	957,054
Government Payment for Outputs	554,315	601,725

Accountability Indicators

Output Class 1: ACT Local Hospital Network

Table 52: Accountability Indicators Output Class 1

	2013-14 Targets	2013-14 Estimated Outcome	2014-15 Targets
Number of National Weighted Activity Units ¹	NWAU{13}	NWAU{13}	NWAU{14}
a. Admitted Services– NWAU {13}	95,358	95,358	86,324
b. Non-admitted Services - NWAU {13}	9,770	9,770	10,272
c. Emergency Services – NWAU {13}	13,648	13,648	15,929
d. Acute Mental Health Services – NWAU {14} ²	n/a	n/a	4,778
e. Sub Acute Services – NWAU {14} ²	n/a	n/a	6,360
f. Total in scope – NWAU {14}	118,776	118,776	123,663
g. Percentage of mental health clients with outcome measures completed	>65%	63%	>65%
h. Proportion of mental health clients contacted by a Health Directorate community facility within 7 days post discharge from inpatient services	75%	90% ³	85%

Notes:

1. National Weighted Activity Unit (NWAU) is the 'currency' that is used to express the price weights for all services that are funded on an activity basis. NWAU {13} is the currency as defined by the Independent Hospital Pricing Authority in the National Price Determination 2013-14, while NWAU {14} is the currency for 2014-15. These measures combine the results for Canberra Hospital and Calvary Public Hospital in-scope activity.
2. New measures previously included in the Admitted Services category.
3. The favourable estimated outcome reflects higher levels of adult mental health program community service contacts due to increased staffing levels.

Changes to Appropriation

Table 53: Changes to appropriation—Government Payment for Outputs, Controlled

	2013-14 Est'd Outcome \$'000	2014-15 Budget \$'000	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
2013-14 Budget	550,054	566,938	594,143	632,639	632,639
2014-15 Budget Policy Adjustments					
Savings — Increase in cross border revenue	-	(2,000)	(5,000)	(5,000)	(5,000)
2014-15 Budget Technical Adjustments					
Revised Indexation Parameters	-	-	-	-	15,816
Rebase ACT Local Hospital Network Based on In-scope Services	-	(10,571)	(31,563)	(68,615)	(50,884)
National Health Reform Funding to Local Hospital Network	-	47,358	62,560	79,470	54,464
Commonwealth Grants — Public Hospital System Additional Funding NP	4,261	-	-	-	-
2014-15 Budget	554,315	601,725	620,140	638,494	647,035

Financial Statements

Table 54: ACT Local Hospital Network: Operating Statement

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
	Revenue						
550,054	Government Payment for Outputs	554,315	601,725	9	620,140	638,494	647,035
76,750	User Charges - Non ACT Government	81,750	84,249	3	86,053	87,896	142,254
279,536	Grants from the Commonwealth	271,938	271,080	..	298,420	328,153	311,064
906,340	Total Revenue	908,003	957,054	5	1,004,613	1,054,543	1,100,353
	Expenses						
886,520	Grants and Purchased Services	886,618	936,600	6	983,397	1,032,533	1,084,123
14,420	Other Expenses	14,420	14,853	3	15,298	15,757	16,230
5,400	Transfer Expenses	5,302	5,601	6	5,918	6,253	0
906,340	Total Expenses	906,340	957,054	6	1,004,613	1,054,543	1,100,353
0	Operating Result	1,663	0	-100	0	0	0
	Other Comprehensive Income						
0	Total Comprehensive Income	1,663	0	-100	0	0	0

Table 55: ACT Local Hospital Network: Balance Sheet

Budget at 30/6/14 \$'000	2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000
Current Assets						
0 Cash and Cash Equivalents	15,502	15,502	-	15,502	15,502	15,502
0 Receivables	1,177	1,177	-	1,177	1,177	1,177
0 Total Current Assets	16,679	16,679	-	16,679	16,679	16,679
0 TOTAL ASSETS	16,679	16,679	-	16,679	16,679	16,679
0 NET ASSETS	16,679	16,679	-	16,679	16,679	16,679
REPRESENTED BY FUNDS EMPLOYED						
0 Accumulated Funds	16,679	16,679	-	16,679	16,679	16,679
0 TOTAL FUNDS EMPLOYED	16,679	16,679	-	16,679	16,679	16,679

Table 56: ACT Local Hospital Network: Cash Flows Statement

2013-14 Budget \$'000		2013-14 Est. Outcome \$'000	2014-15 Budget \$'000	Var %	2015-16 Estimate \$'000	2016-17 Estimate \$'000	2017-18 Estimate \$'000
CASH FLOWS FROM OPERATING ACTIVITIES							
Receipts							
550,054	Cash from Government for Outputs	554,315	601,725	9	620,140	638,494	647,035
76,750	User Charges	149,549	84,249	-44	86,053	87,896	142,254
279,536	Grants Received from the Commonwealth	271,938	271,080	..	298,420	328,153	311,064
0	Other Receipts	17,456	18,623	7	19,551	20,525	21,547
906,340	Operating Receipts	993,258	975,677	-2	1,024,164	1,075,068	1,121,900
Payments							
886,520	Grants and Purchased Services	948,203	942,201	-1	989,315	1,038,786	1,084,123
5,400	Payments to GGS Agencies for Outputs	0	0	-	0	0	0
14,420	Other	31,876	33,476	5	34,849	36,282	37,777
906,340	Operating Payments	980,079	975,677	..	1,024,164	1,075,068	1,121,900
0	NET CASH INFLOW/ (OUTFLOW) FROM OPERATING ACTIVITIES	13,179	0	-100	0	0	0
0	NET INCREASE / (DECREASE) IN CASH HELD	13,179	0	-100	0	0	0
0	CASH AT THE BEGINNING OF REPORTING PERIOD	2,323	15,502	567	15,502	15,502	15,502
0	CASH AT THE END OF REPORTING PERIOD	15,502	15,502	-	15,502	15,502	15,502

Table 57: ACT Local Hospital Network: Statement of Changes in Equity

Budget at 30/6/14 \$'000	2013-14 Est. Outcome \$'000	Budget at 30/6/15 \$'000	Var %	Estimate at 30/6/16 \$'000	Estimate at 30/6/17 \$'000	Estimate at 30/6/18 \$'000	
Opening Equity							
0	Opening Accumulated Funds	15,016	16,679	11	16,679	16,679	16,679
0	Balance at the Start of the Reporting Period	15,016	16,679	11	16,679	16,679	16,679
Comprehensive Income							
0	Operating Result for the Period	1,663	0	-100	0	0	0
0	Total Comprehensive Income	1,663	0	-100	0	0	0
0	Total Movement in Reserves	0	0	-	0	0	0
Closing Equity							
0	Closing Accumulated Funds	16,679	16,679	-	16,679	16,679	16,679
0	Balance at the End of the Reporting Period	16,679	16,679	-	16,679	16,679	16,679

Notes to the Controlled Budget Statements

Significant variations are as follows:

Operating Statement

- government payment for outputs:
 - the increase of \$4.261 million in the 2013-14 estimated outcome from the original budget is due to a Commonwealth top-up payment to offset a reduction in the National Health Reform Agreement (NHRA) payments; and
 - the increase of \$47.410 million in the 2014-15 Budget from the 2013-14 estimated outcome reflects growth and indexation, partially offset by rebasing of the services classified as in-scope under the NHRA.
- user charges — non ACT Government: the increase of \$5 million in the 2013-14 estimated outcome from the original budget and the increase of \$2.499m in the 2014-15 Budget from the 2013-14 estimated outcome reflects the estimated outcome of cross border agreement negotiations with NSW.
- grants from the Commonwealth: the decrease of \$7.598 million in the 2013-14 estimated outcome from the original budget relates to indexation and population changes to the NHRA payments and an adjustment for cross border revenue.
- grants and purchased services: the increase of \$49.982 million in the 2014-15 Budget from the 2013-14 estimated outcome is due to growth and indexation, partially offset by rebasing of the services classified as in-scope of the NHRA.

Balance Sheet

- cash and cash equivalents: the increase of \$15.502 million in the 2013-14 estimated outcome from the original budget relates to the receipt of prior year cross border revenue and a capital injection from the ACT Government to cover timing of Goods and Services Tax (GST) reimbursement.
- receivables: the increase of \$1.177 million in the 2013-14 estimated outcome from the original budget relates to GST receivables from the Australian Taxation Office.

Statement of Cash Flows

- Variations in the statement are explained in the notes above.

Statement of Changes in Equity

- Variations in the statement are explained in the notes above.