

**Structure and Content**

of the 2023-24 Budget Papers

**The 2023-24 Budget is presented in two papers and a series of agency Budget Statements.**

**Budget Speech**

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

**Budget Outlook**

The Budget Outlook summarises the 2023-24 Budget and forward estimates for the General Government Sector, the Public Trading Enterprise sector and the total Territory Government. Details of the projected 2023‑24 Budget results are provided, as well as background information on the development of the 2023‑24 Budget, including economic conditions and federal financial relations. It also provides an overview of the Territory’s infrastructure investment program and details of 2023-24 initiatives. Full accrual financial statements and notes are provided for all sectors.

**Budget Statements**

The Budget Statements contain information on each directorate and agency, including descriptions of functions and roles and responsibilities, together with major strategic priorities.

**Acknowledgement**

We wish to acknowledge the Ngunnawal people as traditional custodians of the land we are meeting on and recognise any other people or families with connection to the lands of the ACT and region. We wish to acknowledge and respect their continuing culture and the contribution they make to the life of this city and this region.

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# ACT HEALTH DIRECTORATE

## Purpose

The ACT Health Directorate (the Directorate) is responsible for strategic direction and leadership of the ACT health system. The Directorate provides a strong policy and population health capability based on a foundation of world-leading health and medical research.

The Directorate develops and implements strategies to meet community needs and expectations, striving for an innovative, effective and sustainable health system, now and into the future.

The Directorate engages with its partners and stakeholders to ensure better health outcomes for all in the ACT and surrounding regions.

The Directorate’s key functions include:

* providing strategic leadership, policy advice, and oversight of the health system;
* leading engagement and negotiation with other jurisdictions on health funding agreements and national policy initiatives;
* administering the ACT Government’s legislative program on health matters;
* engaging with health system partners and stakeholders to ensure health outcomes and impacts are considered in whole-of-government policy and health services planning;
* delivering effective communications to ensure the ACT community can make informed decisions about their health and wellbeing;
* supporting and enabling clinical excellence, safe high-quality care, and research across the health system;
* delivering a range of health prevention, promotion, and protection services;
* implementing innovative digital technologies across the health system and supporting information and communication technology (ICT) solutions that enable person-centred care;
* conducting health system planning and evaluation for sustainable services, workforce and infrastructure, that supports effective resource allocation, innovation, and safe high-quality care;
* delivering Territory-wide health infrastructure strategy and design, including public hospital campus planning and planning for new health services;
* commissioning value-based care that improves health outcomes; and
* monitoring and evaluating health system performance to ensure it meets community expectations and performance criteria.

The Directorate’s work and vision is underpinned by the ACT Health Directorate Strategic Plan 2020-25, which provides a foundation for our high performing organisation that values its people and reflects the way we work across the whole health system and with our partner organisations.

## 2023-24 Priorities

In 2023-24, the Directorate will continue the transition of services at Calvary Health Care to Canberra Health Services (CHS) to ensure certainty of public health service provision while planning and construction of the new Northside Hospital are underway. A Transition Team has been established to ensure the transition is as smooth as possible, and this team will continue planning for transition, undertaking negotiations and engaging with our Calvary Health Care colleagues, just as we have been since the North Canberra Hospital decision was announced.

The Directorate will commence detailed design to deliver the ACT Government commitment to deliver a new Northside Hospital with construction to commence mid-decade. This significant infrastructure investment will deliver the required capacity to meet demand to 2040-41 and improve the overall resilience and capacity of the Territory wide health system. It will bring together a range of contemporary hospital services, consumer centred and flexible models of care to meet the growing and changing needs of community now and into the future.

The Directorate will continue to focus and invest in key infrastructure projects which include:

* modernisation of the Canberra Hospital Campus through implementation of the Canberra Hospital Masterplan;
* construction of three new health facilities at the Watson Health Precinct which will deliver new youth mental health, youth alcohol and other drug and Aboriginal and Torres Strait Islander alcohol and other drug health residential facilities;
* installation of new and upgrade of existing in-building Distributed Antenna Systems (DAS) to provide cellular network services at public hospital campuses across the Territory and support critical communications for staff, patients and the public while accessing health services; and
* continued investment for Ngunnawal Bush Healing Farm upgrades.

The Directorate will deliver a range of new health service initiatives, including:

* planning and implementing Voluntary Assisted Dying (VAD) legislation, including detailed planning, design and costing of an appropriate VAD model for the ACT;
* developing and implementing of an Activity Based Management system tailored to the needs of the ACT health system which will support financial performance analysis and commissioning the best value resources to where they are needed most;
* implementing initial recommendations from the LGBTIQ+ Health Scoping Study, and securing community health services for the LGBTIQ+ community;
* strengthening the future ACT health system to better meet the health and wellbeing needs of older Canberrans with complex healthcare needs;
* investing in future management of public health and communicable disease threats (including COVID-19) fulfilling Government and community expectations that these threats will be managed effectively;
* investing in a set of planned and targeted initiatives to build a sustainable health workforce across ACT public, private and non-government organisation health care settings;
* investing in nation leading drug law reform and harm minimisation measures including continuing the ACT drug checking pilot to December 2024, increasing peer support for alcohol, tobacco and other drug (ATOD) and co-occurring disorders;
* funding the Indigenous Allied Health Australia (IAHA) Health Academy program in the ACT to increase Aboriginal and Torres Strait Islander health workforce, and improve culturally accessible services, as well as improving educational outcomes for Aboriginal and Torres Strait Islander students in senior high school;
* supporting whole of government initiatives on integrated responses to hoarding and squalor;
* investing in research to improve the resilience and responsiveness of the health sector to climate change that are impacting the ACT;
* investing in the continuation of the operation of the Drug and Alcohol Sentencing List (DASL) program which assists in the diversion of eligible high‑risk, high‑need offenders from full-time imprisonment into an intensive community-based alcohol and other drug (AOD) treatment program;
* investing in planning and implementation for the commissioning of a new Eating Disorders Residential Treatment Centre;
* providing residential support for people with Mental Health needs to improve sustainable access to safe and secure accommodation and accompanying support;
* building capacity in community based early intervention mental health services in the ACT;
* investing in the Safe Haven expansion at the Canberra hospital. This initiative will have beneficial outcomes for the mental health of the wider community, by helping people in crisis to remain safely within the community; and
* extending youth mental health programs which will support the continuation of a range of child and youth mental health support programs that will significantly support the mental health of young people in the ACT.

## Estimated Employment Levels

Table 1: Estimated Employment Levels

|  | 2021-22  Actual  Outcome | 2022-23  Budget | 2022-23  Estimated  Outcome 1 | 2023-24  Budget 2 |
| --- | --- | --- | --- | --- |
| Staffing (FTE) | 968 | 891 | 942 | 929 |

**Notes:**

1. The increase in the estimated outcome relates mainly to the extension of COVID-19 Response staff funded through the Budget (mid-year) Review.
2. The decrease in FTE in the 2023-24 Budget relates to ceasing staff attached to time-limited projects including Digital Health Record and COVID-19 Response, offset by new initiatives.

## Strategic Objectives and Indicators

### Strategic Objective 1: A healthy community through collaborative leadership

To enable people to live healthy and active lives and stay well and productive, the Directorate leads the Territory’s health system, ensuring evidence-informed and strategic health policy advice drives system-wide strategies that set clear priorities for safety, quality, expenditure, and activities. To achieve this objective, the Directorate engages and works collaboratively with our community, health sector partners, businesses, and other directorates, and participates in national and inter-jurisdictional forums.

#### Strategic Indicator 1.1 - Improving the Health Status of Canberrans

Percentage of ACT adults who self-report their health status as very good or excellent.

Good health is the foundation of a good life and contributes to greater productivity, reduced inequality, and a decreased demand for health services. Physical health status at a population level is impacted by a range of factors relevant to the Directorate’s role as a health system leader, including access to appropriate preventive health, health protection, primary care, and hospital services.

Table 2: Percentage of ACT adults who self-report their health status as very good or excellent

|  |  |  |  |
| --- | --- | --- | --- |
| Strategic Indicator | 2022-23  Target | 2022-23  Est. Outcome | 2023-24  Target |
| Percentage of ACT adults who self-report their health status as very good or excellent | >55% | 47% | >55% |

*Sources: ACT General Health Survey*

#### Strategic Indicator 1.2 - Improving the Mental Wellbeing of Canberrans

Percentage of ACT adults who self-report their mental health status as very good or excellent.

Mental health status is impacted by a range of factors relevant to Directorate’s role as a health system leader, including access to appropriate preventive, early intervention, primary care, community, and acute services.

Table 3: Percentage of ACT adults who self-report their mental health status as very good or excellent

|  |  |  |  |
| --- | --- | --- | --- |
| Strategic Indicator | 2022-23  Target | 2022-23  Est. Outcome | 2023-24  Target |
| Percentage of ACT adults who self-report their mental health as very good or excellent | >60% | 49% | >60% |

*Sources: ACT General Health Survey*

#### Strategic Indicator 1.3 – Healthy eating

Fruit and vegetables form part of a balanced diet and evidence shows that eating the recommended five serves of vegetables and two serves of fruit daily improves gut health, provides vitamins and minerals such as folate and vitamin C, and helps to reduce the risk of heart disease, stroke, and some types of cancer.

This is a long-term population level health indicator. It is integral to monitoring and surveillance of a healthy diet in the ACT. It is used to:

* determine the proportion of the population meeting the NHMRC Australian Dietary Guidelines for fruit and vegetable requirements; and
* inform preventive health policy and health promotion programs.

As a population level indicator, the work of the Directorate to promote a healthy diet will serve as a contribution to this indicator.

This measure provides an indication of the success of the Directorate campaigns aimed to promote and encourage healthier food and drink choices for Canberrans.

Table 4: Percentage of children and adults who meet guidelines for daily serves of fruit and vegetables.

|  |  |  |
| --- | --- | --- |
| Strategic Indicator | 2022-23  Est. Outcome | 2023-24  Target |
| Percentage of children and adults who meet guidelines for daily serves of fruit and vegetables |  |  |
| Adults |  |  |
| * Fruit | 38% | ≥ last year’s result |
| * Vegetables | 4% | ≥ last year’s result |
| Children |  |  |
| * Fruit | 63% | ≥ last year’s result |
| * Vegetables | 3% | ≥ last year’s result |
|  |  |  |

*Sources: ACT General Health Survey*

#### Strategic Indicator 1.4 – Culturally responsive programs and services incorporating cultural models that connect with Country for Aboriginal and Torres Strait Islander peoples

The Directorate’s will report progress towards supporting Aboriginal and Torres Strait Islander peoples to find or maintain a sense of belonging and identity by providing health services that foster connection with Country and Aboriginal and Torres Strait Islander culture.

### Strategic Objective 2: A safe responsive and sustainable health system that supports our community

The Directorate plans for our community’s future needs, carefully considering how to allocate resources to best improve health outcomes and enable safe, high-quality care for now and into the future. Examples of how the Directorate meets this objective can be seen in the Canberra Hospital Master Plan, planning for a new Northside hospital, and release of the ACT Health Services Plan, which provides a system wide view of priorities for health service development and redesign across the ACT, until the end of the decade.

The Directorate works to deliver high quality services through:

* ensuring our regulatory services remain responsive and risk based and facilitate regulatory compliance through co-design and engagement;
* embedding and utilising accurate and responsive health data and analytics that inform planning, decision making and service delivery;
* delivering high quality person-centred digital solutions that enable safe, timely and effective care, improve collaboration and innovation, and are on time and on budget; and
* driving a dynamic and innovative health and medical research environment that translates research into better health outcomes.

#### Strategic Indicator 2.1 - Improved funding sustainability for the ACT public health system

Activity based funding is a way of funding health care. It means that hospitals are paid for the number of patients treated but with consideration of the complexity of each patient’s health care needs.

The Directorate is working to introduce an Activity Based Funding Model. Activity based funding will enable Activity Based Management, which is an approach that focuses on using patient level data to inform strategic decision making.

The goal is to deliver the best possible care for patients – activity-based funding and management can help to promote transparent and efficient service delivery.

The Directorate will report on progress towards implementing Activity Based Management (ABM) in its Annual Report.

#### Strategic Indicator 2.2 – Sustainable ACT Health Directorate Infrastructure

The ACT Government has committed to producing net zero emissions by 2040. Through implementation of the Canberra Hospital Master Plan, a new northside hospital, and investment in other Directorate assets, the Directorate aims to deliver net zero emissions by 2040.

This indicator measures the Directorate’s journey to meeting required emissions targets by 2040 for new and upgraded infrastructure, to comply with the ACT Government's policy of net zero-emissions in the health sector by 2040.

Table 5: Reduction in the Directorate’s CO2 emissions

|  |  |  |
| --- | --- | --- |
| Strategic Indicator | 2022-23  Est. Outcome | 2023-24  Target |
| Reduction in ACT Health Directorate’s C02 emissions | 397tCO2-e | <280tC02-e |

### Strategic Objective 3: Trusted, transparent and accountable

The Directorate is a trusted source of information and advice to the community and our stakeholders. Inclusion of our community in our work helps to build trust and holds the Directorate accountable to meet the needs of the community we serve.

#### Strategic Indicator 3.1 - Community engagement

The Directorate engages in community consultation and other activities designed to support the delivery of public health services, infrastructure projects, programs, and policies to the public. The Directorate is able to deliver better services and outcomes through effective, genuine community engagement. Information gathered through these activities is used to inform or improve policies, programs, services, or projects and is reported within the Directorate’s Annual Report.

#### Strategic Indicator 3.2 – Consumer engagement with their health care through MyDHR

This indicator measures and trends the number of MyDHR accounts registered, and the active users of those accounts, on a month-by-month basis.

Increasing usage of the MyDHR indicates patients, carers and consumers are trusting the health services and engaging with their care in a transparent way.

Table 6: Number of MyDHR accounts registered, and the active users of those accounts

|  |  |  |
| --- | --- | --- |
| Strategic Indicator | 2022-23  Est. Outcome | 2023-24  Target |
| Number of MyDHR accounts registered, and the active users of those accounts | 204,812 | >210,000 |

#### Strategic Indicator 3.3 - ACT Public Health Services Performance Reporting

This indicator reports the development and implementation of new regular publication of public hospital services and community-based walk-in centres quality and safety data to maintain transparency of key performance indicators for the ACT community.

### Strategic Objective 4: High performing organisation that values our people

The Directorate provides a range of health-related services aimed to benefit our community now and in the future. To achieve the best outcomes for our community, we require a knowledgeable and engaged workforce willing to give the Directorate their best efforts. This means we need to recognise and value the whole person and we need to provide a culture that meets their needs as an individual and as a member of our workforce.

#### Strategic Indicator 4.1 - ACT Health is a great place to work

The Directorate continues to implement governance systems and business processes to enable us to build the skills and knowledge of individuals within our workforce. We seek to create a culture where our staff are engaged with the work they do and feel recognised and accepted within the workplace.

This indicator measures how engaged the Directorate’s staff are with the organisation and the success of initiatives in place to improve organisational culture.

Table 7: ACT Health is a great place to work

|  |  |  |
| --- | --- | --- |
| Strategic Indicator | 2022-23  Outcome | 2023-24  Target |
| a. Staff engagement | 71% | >75% |
| b. Strengthening culture through living our values | 77% | >80% |

*Sources:*

*a. ACTPS Staff Survey Engagement Index.*

*b. Strengthening culture through living our values (ACTPS Staff Survey question).*

## Output Classes

The Directorate continues to work collaboratively with service partners, community sector organisations, peak bodies, and advocacy groups to design, develop, and implement inclusive policies, programs and strategies aimed at improving health outcomes for all members of the ACT community.

Table 8: ACT Health Directorate ($’000)

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | 2022-23  Estimated Outcome  $'000 | 2023-24  Budget  $'000 |
| Total Cost 1,2 |  | 499,844 | 487,207 |
| Controlled Recurrent Payments 2 |  | 308,502 | 296,101 |

**Notes:**

1. Total cost includes depreciation and amortisation of $33.359 million in 2022-23 and $41.438 million in 2023-24.
2. The reductions in total cost and Controlled Recurrent Payments in the 2023-24 Budget relate mainly to ceasing time-limited program and the transfer of information, communications and technology funding to the Chief Minister, Treasury and Economic Development Directorate (CMTEDD). These are partially offset by indexation and new initiatives.

#### Output 1.1: Collaborative leadership, strategic policy, programs and planning

The Directorate provides strategic leadership and direction for the health system through co-design, development, implementation and administration of policies, programs, and strategies.

This includes:

* developing strategic policy for the health system, including working with the Commonwealth and key service providers on priority health improvement initiatives;
* engaging with partners and stakeholders to develop health services plans, based on analysis of need, for sustainable health system services.
* investing in health services, workforce, and major capital investment to support health service usability and sustainability;
* driving service improvement and innovation through a collaborative policy cycle;
* providing responsive policy advice to government, reflecting the changing nature of the health sector and community need;
* supporting delivery of high-quality health services by working collaboratively with service providers and commissioned partner programs;
* conducting research programs that translate research evidence into improved healthcare;
* leading the development of strategies, policies, and programs supporting funding sustainability;
* leading the health workforce and clinical training strategy including building strong partnerships with key academic institutions and training providers; and
* commissioning and managing contracts for the provision of health services, including partnerships with community sector organisations, peak bodies, and advocacy groups.

The Directorate recognises the diversity of the ACT community and seeks to reflect that in our engagement, policies, and programs in order to ensure that what is created is inclusive, fit for purpose and culturally appropriate.

Table 9: Output 1.1: Collaborative leadership, strategic policy, programs and planning

|  |  |  |
| --- | --- | --- |
|  | 2022-23  Estimated Outcome 1 | 2023-24  Budget |
| Total Cost | n/a | 195,239 |
| Controlled Recurrent Payments | n/a | 127,481 |

**Note:**

1. This is a new Output in 2023-24, for the estimated outcomes see the ‘Discontinued Outputs – Table 12’.

#### Output 1.2: Population health and keeping Canberrans healthy

The Directorate seeks to improve the health of the ACT population through:

* evidence-based promotion of healthy lifestyles and interventions to address the range of risk and protective factors that determine the health of our community;
* influencing the social and environmental conditions that impact on population and individual health;
* improving the health and wellbeing of the ACT population by promoting healthy behaviours and lifestyles through ongoing monitoring and evaluation of health programs and policy;
* undertaking setting based, and priority population focussed activities and initiatives to increase healthy choices and encourage healthy behaviours;
* supporting programs and activities aimed to reduce the use of harmful substances and risk-taking behaviours;
* environmental monitoring of air and water quality;
* regulation and other public health responses to ensure food is safe for human consumption;
* preventing, identifying, and providing a timely response to potential public health incidents; and
* reducing the occurrence of infectious diseases

Table 10: Output 1.2: Population health and keeping Canberrans healthy

|  |  |  |
| --- | --- | --- |
|  | 2022-23  Estimated Outcome 1 | 2023-24  Budget |
| Total Cost | n/a | 110,892 |
| Controlled Recurrent Payments | n/a | 52,843 |

**Note:**

1. This is a new Output in 2023-24, for the estimated outcomes see the ‘Discontinued Outputs – Table 12’.

#### Output 1.3: Enabling a strong and safe health system

The Directorate supports an integrated health system that allows people access to appropriate treatment, care, or support in a timely manner. The Directorate collaborates with stakeholders on strategic policy and service system planning to ensure funding is targeted to provide safe, high-quality programs and services that offer seamless transition through hospital and community care as needed.

Table 11: Output 1.3: Enabling a strong and safe health system

|  |  |  |
| --- | --- | --- |
|  | 2022-23  Estimated Outcome 1 | 2023-24  Budget |
| Total Cost | n/a | 181,076 |
| Controlled Recurrent Payments | n/a | 115,777 |

**Note:**

1. This is a new Output in 2023-24, for the estimated outcomes see the ‘Discontinued Outputs – Table 12’.

Table 12: Discontinued Outputs

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | 2022-23 | 2023-24 |
|  |  | **Estimated Outcome** | **Budget** |
|  |  | **$'000** | **$'000** |
| **Improved Hospital Services** 1 |  |  |  |
| Total Cost |  | 108,160 | - |
| Controlled Recurrent Payments |  | 63,864 | - |
| **Healthy Communities** 1 |  |  |  |
| Total Cost |  | 157,795 | - |
| Controlled Recurrent Payments |  | 95,539 | - |
| **Mentally Healthy Communities** 1 |  |  |  |
| Total Cost |  | 99,801 | - |
| Controlled Recurrent Payments |  | 59,176 | - |
| **Continuous Improvement of the ACT Public Health System** 1 |  |  |  |
| Total Cost |  | 134,088 | - |
| Controlled Recurrent Payments |  | 89,923 | - |

**Note:**

1. The above Outputs have been replaced from 2023-24.

## Accountability Indicators

### Output Class 1: ACT Health Directorate

#### Output 1.1: Collaborative leadership, strategic policy, programs and planning

Table 13: Accountability Indicators Output 1.1

|  |  |  |  |
| --- | --- | --- | --- |
| Accountability Indicators | 2022-23 Targets | 2022-23  Estimated  Outcome | 2023-24  Targets |
| 1. Population Health - number of planned campaigns released annually | - | - | 3 |
| 1. Number of clinical services plans released | - | - | 2 |
| 1. Health system strategic documents released | - | - | 3 |
| 1. Annual progress report on the implementation of the Office for Mental Health and Wellbeing Workplan published | 1 | 1 | 1 |
|  |  |  |  |

**Notes:**

1. This is a new indicator which reports the Directorate’s activity in developing communication campaigns that support continued good health in the ACT community. Campaigns to be undertaken for 2023-24 are:
   * 1. Winter Wellness;
     2. Summer Safety; and
     3. Vaping/e-cigarettes campaign.
2. This is a new indicator which reports the Directorate’s health system leadership activity in identifying and addressing service demand and reform. The following clinical services plans are due to be released in the 2023-24 financial year:
3. ACT Child and Adolescent Clinical Services Plan; and
4. Northside Clinical Services Plan.
5. This is a new indicator which reports the Directorate’s activity in leading, developing, and implementing government health initiatives through release of strategic documents that guide and support improved health outcomes for the ACT community. The following strategic documents are due to be released in the 2023-24 financial year:
6. ACT Disability Health Strategy;
7. ACT Aboriginal and Torres Strait Islander Health Workforce Action Plan; and
8. ACT Mental Health Workforce Strategy Action Plan.
9. The annual progress report on the implementation of the office for Mental Health and Wellbeing Workplan is completed as a standalone component of ACT Health Directorate’s Annual Report.

### Output 1.2: Population health and keeping Canberrans healthy

Table 14: Accountability Indicators Output 1.2

|  |  |  |  |
| --- | --- | --- | --- |
| Accountability Indicators | 2022-23 Targets | 2022-23  Estimated  Outcome | 2023-24  Targets |
| 1. Total number of inspections and proactive site visits of food business 1 | 2,500 | 2,278 | 2,500 |
| 1. Percentage of children in the ACT who have been fully immunised as defined by the Australian Immunisation Register: |  |  |  |
| i. 12 to 15 months  ii. 24 to 27 months  iii. 60 to 63 months | 95%  -  - | 96%  95%  96% | 95%  95%  95% |
| 1. Percentage of Aboriginal and Torres Strait Islander children in the ACT who have been fully immunised as defined by the Australian Immunisation Register for the ACT Aboriginal and Torres Strait Islander population: |  |  |  |
| i. 12 to 15 months | 95% | 93% | 95% |
| ii. 24 to 27 months 2 | 95% | 88% | 95% |
| iii. 60 to 63 months | 95% | 93% | 95% |
| iv. All | 95% | 91% | - |

**Notes:**

1. Total number of inspections where compliance has been assessed according to the *ACT Food Act 2001* and the Food Standards Code, and proactive site visits of food businesses conducted by the Health Protection Service.
2. This measure has been expanded to reflect the definition of fully immunised according to the Australian Immunisation Register and shows performance by age groups.
3. The indicator description has been amended to reflect the definition of fully immunised according to the Australian Immunisation Register. The category for ‘All’ has been discontinued.

**Variances:**

* + - 1. The variance is a consequence of staff vacancies within the inspectorate team and staff unplanned absences due to COVID-19 and flu related illness.
      2. Based on the very low numbers of children identified as Aboriginal and/or Torres Strait Islander in the ACT, Immunisation rates should be read with caution. This small population means immunisation coverage data consistently fluctuates between reporting periods. One child missing a vaccine can make a difference of up to six percent in terms of overall quarterly coverage for the cohort. ACT Health actively pursues strategies to increase immunisation coverage rates for Aboriginal and Torres Strait Islander children.

### Output 1.3: Enabling a strong and safe health system

Table 15: Accountability Indicators Output 1.3

|  |  |  |  |
| --- | --- | --- | --- |
| Accountability Indicators | 2022-23 Targets | 2022-23  Estimated  Outcome | 2023-24  Targets |
| 1. ACT health system digital services are reliable and efficient:    * 1. Percentage of calls answered measures all phone calls placed to the Digital Solutions Division’s Service Desk answered within 240 seconds      2. Percentage of JIRA requests for assistance resolved within the 24-hour Service Level Agreement timeframe | -  - | 85%  84% | 80%  80% |

**Note:**

1. These are new indicators which reports the Directorate’s responsiveness and effectiveness in managing digital system issues. This percentage is based on the callers’ wait time in the queue and includes abandoned calls in the overall percentage. They are calculated on a monthly average.

### Discontinued or Transferred Accountability Indicators

Table 16: The following Accountability Indicators have been discontinued or transferred.

|  |  |  |  |
| --- | --- | --- | --- |
| Accountability Indicators | 2022-23 Targets | 2022-23  Estimated  Outcome | 2023-24  Targets |
| Output 1.1: Improved Hospital Services |  |  |  |
| 1. Percentage of all Emergency Department presentations treated within clinically appropriate timeframes 1 | 70% | n/a | - |
| 1. Percentage of Category 1 elective surgery patients admitted for surgery within clinically recommended timeframes 1 | 100% | n/a | - |
| 1. Percentage of Category 2 elective surgery patients admitted for surgery within clinically recommended timeframes 1 | 80% | n/a | - |
| 1. Percentage of Category 3 elective surgery patients admitted for surgery within clinically recommended timeframes 1 | 93% | n/a | - |
| Output 1.2: Healthy Communities |  |  |  |
| 1. Samples analysed 2 | 12,500 | 11,502 | - |
| 1. Number of businesses making a pledge as part of the Healthier Choices Canberra Initiative 3 | 100 | 90 | - |
| Output 1.4: Continuous Improvement of the ACT Public Health System |  |  |  |
| 1. Independent audit of the Review into the Workplace Culture of ACT Public Health Services tabled in the Legislative Assembly 4 | 1 | 1 | - |
| 1. ACT Public Health Services Quarterly Performance Report 5 | 4 | 4 | - |
|  |  |  |  |

**Notes:**

1. These measures will be reported by Canberra Health Services in 2023-24. An Estimated Outcome was not available at the time of publication. Following the implementation of the Digital Health Record (DHR) in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. The number of samples analysed at the ACT Government Analytical Laboratories is not a measure of productivity. These tests are tracked internally. The estimated outcome is attributed to samples which have been received but not yet analysed due to resource pressure.
3. This measure has been discontinued to allow the Directorate the flexibility to fund higher priority initiatives.
4. Final report was tabled in Legislative Assembly in March 2023.
5. This measure has been transferred to Strategic Indicators 3.3.

## Changes to Appropriation

Table 17: Changes to appropriation – Controlled Recurrent Payments ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2022-23 Budget** | **286,567** | **272,762** | **278,275** | **285,171** | **290,302** |
| **2nd Appropriation** |  |  |  |  |  |
| Continuing the COVID-19 public health support package | 8,964 | 0 | 0 | 0 | 0 |
| Developing the ACT Mental Health Workforce Strategy | 77 | 712 | 716 | 525 | 0 |
| Establishing a Wellbeing Fund across ACT Public Health Services | 335 | 1,875 | 1,875 | 1,875 | 0 |
| Extension to pilot pill testing | 350 | 0 | 0 | 0 | 0 |
| Japanese Encephalitis Virus (JEV) and Monkeypox vaccine program | 4,592 | 141 | 0 | 0 | 0 |
| Legal resourcing for legislative reform | 154 | 478 | 335 | 341 | 348 |
| Modernising the ACT Government Analytical Laboratory | 0 | 20 | 45 | 45 | 45 |
| Supporting early intervention services for eating disorders and perinatal mental health | 330 | 1,036 | 1,092 | 249 | 0 |
| **2023-24 Budget Policy Decisions** |  |  |  |  |  |
|  |  |  |  |  |  |
| Better care for our community |  |  |  |  |  |
| Establishing the Eating Disorders Residential Treatment Centre | 0 | 1,749 | 5,171 | 0 | 0 |
| Measures to reduce harm across the community | 0 | 1,081 | 696 | 262 | 141 |
|  |  |  |  |  |  |
| Improving Canberra’s health infrastructure |  |  |  |  |  |
| Establishing a second Safe Haven | 0 | 0 | 127 | 520 | 533 |
| Improvements at the Ngunnawal Bush Healing Farm | 0 | 0 | 0 | 6 | 12 |
| Improving support for mental health emergency department presentations | 0 | 250 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| Investing in public health care |  |  |  |  |  |
| Achieving a sustainable health workforce | 0 | 505 | 586 | 528 | 542 |
| Activity based management | 0 | 2,069 | 2,414 | 1,106 | 108 |
| Extend youth mental health programs | 0 | 2,178 | 0 | 0 | 0 |
| Managing the ongoing impact of COVID-19 and other emerging health threats | 0 | 2,813 | 2,624 | 1,329 | 1,250 |
| Research into the health impacts associated with climate change | 0 | 180 | 186 | 0 | 0 |
| Transitioning North Canberra Hospital from Calvary Health Care to Canberra Health Services | 8,000 | 25,894 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| Supporting our health workforce |  |  |  |  |  |
| Continued support for the Indigenous Allied Health Australia ACT Health Academy | 0 | 300 | 399 | 440 | 0 |
|  |  |  |  |  |  |
| Community based mental health accommodation and early intervention services | 0 | 1,520 | 2,253 | 1,058 | 1,083 |
| Community Sector Indexation | 0 | 2,575 | 1,814 | 2,621 | 3,259 |
| Drug and Alcohol Sentencing List | 0 | 1,884 | 1,933 | 1,983 | 2,033 |
| Enhancing specialist health services for LGBTIQ+ Canberrans | 0 | 767 | 1,225 | 1,262 | 1,298 |
| Establishing a Centre of Excellence for older Canberrans | 0 | 340 | 120 | 0 | 0 |
| Planning to implement the Voluntary Assisted Dying model | 0 | 990 | 270 | 0 | 0 |

Table 17: Changes to appropriation – Controlled Recurrent Payments ($’000) - continued

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |
| Savings |  |  |  |  |  |
| Investing in our digital future – ICT costs and services | 0 | -324 | -343 | -365 | -386 |
| Supporting public access to Government information | 0 | -23 | -8 | 0 | 0 |
| Workers’ compensation | 0 | -358 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
| Commonwealth Grant - Essential Vaccines | 0 | 0 | -13 | 0 | 0 |
| Commonwealth Grant - Japanese encephalitis virus mosquito surveillance and control | -2 | 0 | 0 | 0 | 0 |
| Commonwealth Grant - Medicare Urgent Care Clinics | 0 | 116 | 120 | 124 | 0 |
| Commonwealth Grant - Primary Care Pilots | 0 | 2,320 | 2,320 | 0 | 0 |
| Commonwealth Grant - Vaccine-Preventable Diseases Surveillance | 2 | 0 | 0 | 0 | 0 |
| Enterprise Agreement Bargaining and Pay Offer | 0 | 1,452 | 2,890 | 4,278 | 5,118 |
| Transfer - Deferrable medical interventions on intersex people from CMTEDD | 0 | 441 | 398 | 404 | 409 |
| Transfer - Digital Health Records from Capital Injection | 3,574 | 0 | 0 | 0 | 0 |
| Transfer - ICT costs from CHS to ACTHD | 530 | 461 | 968 | 1,004 | 900 |
| Transfer - Investing in our digital future – ICT costs and services to CMTEDD | 0 | -32,896 | -33,718 | -34,561 | -35,426 |
| Revised Indexation Parameters | 0 | 0 | 0 | 0 | 1,503 |
|  |  |  |  |  |  |
| Revised Funding Profile |  |  |  |  |  |
| Continuing Harm Reduction Measures in Combating Addiction and Overdoses | -200 | 200 | 0 | 0 | 0 |
| Developing the ACT Disability Health Strategy | -105 | 105 | 0 | 0 | 0 |
| Early Intervention Service for Eating Disorder and National Perinatal Mental Health Check Initiative | -279 | 279 | 0 | 0 | 0 |
| Japanese Encephalitis Virus (JEV) vaccine and Mosquito surveillance program | -925 | 925 | 0 | 0 | 0 |
| Implementation of Cultural Review | -100 | 100 | 0 | 0 | 0 |
| Intersex - Variations in Sex Characteristics Restricted Medical Treatment | -80 | 80 | 0 | 0 | 0 |
| Maternity Omnibus | -124 | 124 | 0 | 0 | 0 |
| More support for community delivered mental health | -1,190 | -988 | 0 | 0 | 0 |
| Ngunnawal Bush Healing Farm Residential Service | -644 | 644 | 0 | 0 | 0 |
| Strengthening mental health support for families and young children | -148 | 148 | 0 | 0 | 0 |
| Watson health precinct redevelopment | -400 | 400 | 0 | 0 | 0 |
| Youth Mental Health and Suicide Prevention Support | -776 | 776 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget** | **308,502** | **296,101** | **274,770** | **270,205** | **273,072** |

Table 18: Changes to Appropriation – Expenses on Behalf of the Territory ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2022-23 Budget** | **15,443** | **10,506** | **1,002** | **1,028** | **1,061** |
| **FMA Section 16B Rollovers from 2021-22** |  |  |  |  |  |
| North Canberra Hospital Critical Infrastructure Phase 2 | 646 | 0 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget Policy Decisions** |  |  |  |  |  |
|  |  |  |  |  |  |
| Improving Canberra’s health infrastructure |  |  |  |  |  |
| Replacing and enhancing critical equipment at the North Canberra Hospital - Phase 2 | 0 | 2,538 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
| Revised Economic Parameters | 0 | 0 | 0 | -1 | -8 |
| Revised Funding Profile - North Canberra Hospital Critical Infrastructure - Phase 1 | -3,626 | 3,626 | 0 | 0 | 0 |
| Revised Funding Profile - North Canberra Hospital Critical Infrastructure - Phase 2 | 3,357 | -3,357 | 0 | 0 | 0 |
| Revised Funding Profile - Replacing and Enhancing critical equipment at the North Canberra Hospital | -161 | 161 | 0 | 0 | 0 |
| Revised Funding Profile - Watson Health Precinct Redevelopment | -325 | 325 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget** | **15,334** | **13,799** | **1,002** | **1,027** | **1,053** |

Table 19: Changes to appropriation – Capital Injections, Controlled ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2022-23 Budget** | 89,190 | 51,964 | 26,318 | 2,036 | 2,047 |
| **2nd Appropriation** |  |  |  |  |  |
| Modernising the ACT Government Analytical Laboratory | 0 | 450 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **FMA Section 16B Rollovers from 2021-22** |  |  |  |  |  |
| A new carpark at Canberra Hospital | 300 | 0 | 0 | 0 | 0 |
| ACT Health Core IT Systems to align with the Digital Health | 2,064 | 0 | 0 | 0 | 0 |
| Alcohol & Other Residential Rehab Expansion & Modernisation | -3 | 0 | 0 | 0 | 0 |
| Better Infrastructure Fund 2021-22 | 254 | 0 | 0 | 0 | 0 |
| COVID-19 Notifiable Disease Management System | 463 | 0 | 0 | 0 | 0 |
| COVID-19 Vaccination Program | 716 | 0 | 0 | 0 | 0 |
| Expanded COVID-19 Vaccination Program | 48 | 0 | 0 | 0 | 0 |
| Implementing Real Time Prescription Monitoring | 268 | 0 | 0 | 0 | 0 |
| North Canberra Hospital Critical Infrastructure - Phase 1 | 62 | 0 | 0 | 0 | 0 |
| North Canberra Hospital Infrastructure Upgrades -Phase 2 | 699 | 0 | 0 | 0 | 0 |
| Northside Hospital development | 386 | 0 | 0 | 0 | 0 |
| Ngunnawal Bush Healing Farm | 273 | 0 | 0 | 0 | 0 |
| Watson Health Precinct redevelopment | 200 | 0 | 0 | 0 | 0 |
| **2023-24 Budget Policy Decisions** |  |  |  |  |  |
|  |  |  |  |  |  |
| Better care for our community |  |  |  |  |  |
| Measures to reduce harm across the community | 0 | 50 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| Improving Canberra's health infrastructure |  |  |  |  |  |
| Detailed design for the New Northside Hospital | 0 | 21,287 | 38,918 | 0 | 0 |
| Establishing a second Safe Haven | 0 | 0 | 700 | 0 | 0 |
| Improvements at the Ngunnawal Bush Healing Farm | -500 | 600 | 0 | 0 | 0 |
| Redeveloping and expanding the services of the Watson Health Precinct | 0 | 18,220 | 20,787 | 8,769 | 0 |
| Upgrading critical communications infrastructure across Canberra Health Services | 0 | 4,000 | 7,328 | 0 | 0 |
| Investing in public health care |  |  |  |  |  |
| Transitioning North Canberra Hospital from Calvary Health Care to Canberra Health Services | 0 | 11,800 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
|  |  |  |  |  |  |
| Revised Funding Profile |  |  |  |  |  |
| A New carpark at Canberra Hospital | -463 | 463 | 0 | 0 | 0 |
| ACT Government Analytical Laboratory (ACTGAL) modernisation project | -873 | 873 | 0 | 0 | 0 |
| ACT Health Core IT Systems to align with the Digital Health Strategy | 1,284 | -51 | -1,233 | 0 | 0 |
| CHHP - Alcohol & Other Residential Rehab Expansion & Modernisation | -689 | 689 | 0 | 0 | 0 |
| CHHP - Eating disorder Treatment Centre | -2,377 | -823 | 3,200 | 0 | 0 |
| COVID-19 and Disease Response Management System | -3,200 | 3,200 | 0 | 0 | 0 |
| Embedding a Positive Safety Culture | -150 | 150 | 0 | 0 | 0 |
| Harm Minimisation: Alcohol and Other Drug (AOD) treatment system capacity - Canberra Script enhancements | -855 | 0 | 855 | 0 | 0 |

Table 20: Changes to appropriation – Capital Injections, Controlled ($’000) - continued

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |
| Implementation of the Canberra Hospital Master Plan -transforming the Canberra Hospital Campus | 0 | -3,000 | 3,000 | 0 | 0 |
| Implementing real time prescription monitoring | -775 | 775 | 0 | 0 | 0 |
| Ngunnawal Bush Healing Farm | -150 | 150 | 0 | 0 | 0 |
| North Canberra Hospital Critical Infrastructure -Phase 2 | -1,325 | 1,325 | 0 | 0 | 0 |
| Northside Hospital Development | 4,385 | -4,385 | 0 | 0 | 0 |
| Southside Hydrotherapy Pool | -300 | 300 | 0 | 0 | 0 |
| Supplementary Digital Health Record (DHR) Implementation Costs | -2,000 | 2,000 | 0 | 0 | 0 |
| Watson Health Precinct Redevelopment | -500 | 500 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| Enterprise Agreement Bargaining and Pay Offer | 0 | 1,928 | 0 | 0 | 0 |
| Transfer - Digital Health Record from Capital to CRP | -3,574 | 0 | 0 | 0 | 0 |
| Transfer - Canberra Hospital Master Plan - Phase 2 Implementation to CRP | -6,000 | 0 | 0 | 0 | 0 |
| Transfer - Northside hospital development to CRP | -2,000 | 0 | 0 | 0 | 0 |
| Transfer - Design and Fit-out 64 bed inpatient unit - Canberra Hospital Masterplan to Major Projects Canberra | -2,038 | -16,845 | -750 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget** | **72,820** | **95,620** | **99,123** | **10,805** | **2,047** |

## Summary of 2023-24 Infrastructure Program

Table 21: 2023-24 ACT Health Directorate Infrastructure Program – New Works ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total**  **Project**  **Value 1** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **New Works** |  |  |  |  |  |  |  |
| Detailed design for the New Northside Hospital | **64,201** | 21,287 | 38,918 | 0 | 0 | **60,205** | Jun-25 |
| Establishing a second Safe Haven | **700** | 0 | 700 | 0 | 0 | **700** | Mar-25 |
| Improvements at the Ngunnawal Bush Healing Farm | **620** | 600 | 0 | 0 | 0 | **600** | Jun-24 |
| Measures to reduce harm across the community | **50** | 50 | 0 | 0 | 0 | **50** | Oct-24 |
| Redeveloping and expanding the services of the Watson Health Precinct | **48,993** | 18,220 | 20,787 | 8,769 | 0 | **47,776** | Jun-25 |
| Transitioning North Canberra Hospital from Calvary Health Care to Canberra Health Services | **11,800** | 11,800 | 0 | 0 | 0 | **11,800** | Jun-24 |
| Upgrading critical communications infrastructure across Canberra Health Services | **11,328** | 4,000 | 7,328 | 0 | 0 | **11,328** | Jun-25 |
|  |  |  |  |  |  |  |  |
| **Total New Works** | **137,692** | **55,957** | **67,733** | **8,769** | **0** | **132,459** |  |

Table 22: 2023-24 ACT Health Directorate Infrastructure Program – Better Infrastructure Fund (BIF) ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total**  **Project**  **Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| Better Infrastructure Fund | **n/a** | 490 | 503 | 516 | 527 | **2,036** | On-going |
|  |  |  |  |  |  |  |  |
| **Total BIF** | **n/a** | **490** | **503** | **516** | **527** | **2,036** |  |

**Note:**

1. Total project value includes expenditure to date, future years funding and resources received free of charge. Financial years are appropriation only, excluding resources received free of charge.

Table 23: 2023-24 ACT Health Directorate Infrastructure Program – Work In Progress ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total**  **Project**  **Value 1** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **Works In Progress** |  |  |  |  |  |  |  |
| A new carpark at Canberra Hospital | **3,000** | 2,155 | 0 | 0 | 0 | **2,155** | Jun-24 |
| ACT Government Analytical Laboratory modernisation project | **1,827** | 1,023 | 454 | 50 | 50 | **1,577** | Jun-26 |
| ACT Health Core IT Systems to align with the Digital Health Strategy | **98,869** | 4,958 | 3,776 | 0 | 0 | **8,734** | Jun-27 |
| CHHP - Alcohol & Other Rehabilitation Expansion & Modernisation | **4,300** | 2,689 | 0 | 0 | 0 | **2,689** | Jun-24 |
| CHHP - Expanding public healthcare services for eating disorders | **13,500** | 7,494 | 3,200 | 0 | 0 | **10,694** | Jun-24 |
| Continuing support for treatments and services in the community | **1,673** | 818 | 855 | 0 | 0 | **1,673** | Jun-25 |
| Digital Healthcare Record - transforming the way health care is provided | **15,396** | 2,000 | 0 | 0 | 0 | **2,000** | Jun-27 |
| Embedding a positive safety culture in the ACT public health system | **250** | 150 | 0 | 0 | 0 | **150** | Jun-24 |
| Implementation of the Canberra Hospital Master Plan | **26,776** | 5,258 | 18,602 | 1,470 | 1,470 | **26,800** | Jun-25 |
| Implementing real time prescription monitoring | **2,114** | 775 | 0 | 0 | 0 | **775** | Jun-24 |
| Modernising the ACT Government Analytical Laboratory | **450** | 450 | 0 | 0 | 0 | **450** | Jun-24 |
| New COVID-19 and Disease Response Management System | **6,115** | 3,200 | 0 | 0 | 0 | **3,200** | Mar-24 |
| North Canberra Hospital Critical Infrastructure phase 2 | **2,439** | 1,325 | 0 | 0 | 0 | **1,325** | Jun-24 |
| Ngunnawal Bush Healing Farm - Residential Service delivery trial | **150** | 150 | 0 | 0 | 0 | **150** | Mar-24 |
| Southside Hydrotherapy Pool - improving access to hydrotherapy services | **8,500** | 4,300 | 4,000 | 0 | 0 | **8,300** | Aug-24 |
| Watson Health Precinct redevelopment | **1,000** | 500 | 0 | 0 | 0 | **500** | Dec-24 |
|  |  |  |  |  |  |  |  |
| **Total Works In Progress** | **186,359** | **37,245** | **30,887** | **1,520** | **1,520** | **71,172** |  |

**Note:**

1. Total project value includes expenditure to date, future years funding and resources received free of charge. Financial years are appropriation only, excluding resources received free of charge.

Table 24: 2023-24 ACT Health Directorate Infrastructure Program – Total Infrastructure Program ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total**  **Project**  **Value 1** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **Territorial Capital Grants** |  |  |  |  |  |  |  |
| Better Infrastructure Fund - North Canberra Hospital | **n/a** | 978 | 1,002 | 1,027 | 1,053 | **4,060** | On-going |
| North Canberra Hospital Critical Infrastructure - Phase 1 | **9,988** | 3,626 | 0 | 0 | 0 | **3,626** | Jun-24 |
| North Canberra Hospital Critical Infrastructure - Phase 2 | **19,816** | 5,643 | 0 | 0 | 0 | **5,643** | Jun-24 |
| Replacing and enhancing critical equipment at the North Canberra Hospital - Phase 2 | **4,638** | 2,699 | 0 | 0 | 0 | **2,699** | Jun-24 |
| Watson Health Precinct Redevelopment | **1,598** | 853 | 0 | 0 | 0 | **853** | Sep-24 |
|  |  |  |  |  |  |  |  |
| **Total Territorial Capital Grants** | **36,040** | **13,799** | **1,002** | **1,027** | **1,053** | **16,881** |  |

Table 25: 2023-24 ACT Health Directorate Infrastructure Program – Total Infrastructure Program ($’000)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project value 1** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** |
|  |  |  |  |  |  |  |
| New Works | 137,692 | 55,957 | 67,733 | 8,769 | 0 | **132,459** |
| Better Infrastructure Fund | n/a | 490 | 503 | 516 | 527 | **2,036** |
| Works in progress | 186,359 | 37,245 | 30,887 | 1,520 | 1,520 | **71,172** |
| Territorial Capital Grants | 36,040 | 13,799 | 1,002 | 1,027 | 1,053 | **16,881** |
|  |  |  |  |  |  |  |
| **Total Infrastructure Program** | **360,091** | **107,491** | **100,125** | **11,832** | **3,100** | **222,548** |
|  |  |  |  |  |  |  |

**Note:**

1. Total project value includes expenditure to date, future years funding and resources received free of charge. Financial years are appropriation only, excluding resources received free of charge.

## Financial Statements

Presentational changes have been made to streamline the financial statements and the 2022‑23 Budget column also reflects this change. These changes will be consistent with future annual financial statements and ensure comparability of the annual financial statements with the budget estimates as required under section 27 of the *Financial Management Act 1996*.

Table 26: ACT Health Directorate: Operating Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022­23 Budget** | **2022­23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024­25 Estimate** | **2025­26 Estimate** | **2026­27 Estimate** |
| **Income** |  |  |  |  |  |  |  |
| Controlled Recurrent Payments | 286,567 | 308,502 | 296,101 | -4 | 274,770 | 270,205 | 273,072 |
| Sale of Goods and Services from Contracts with Customers | 20,133 | 27,476 | 11,095 | -60 | 11,724 | 12,402 | 13,123 |
| Grants and Contributions Revenue | 3,673 | 3,528 | 11,549 | 227 | 11,917 | 9,245 | 9,269 |
| Other Income | 123,285 | 123,285 | 126,367 | 2 | 128,894 | 132,117 | 135,419 |
| **Total Income** | **433,658** | **462,791** | **445,112** | **-4** | **427,305** | **423,969** | **430,883** |
| **Expenses** |  |  |  |  |  |  |  |
| Employee Expenses | 113,353 | 124,378 | 121,149 | -3 | 112,965 | 112,277 | 114,563 |
| Supplies and Services | 118,765 | 140,353 | 100,053 | -29 | 82,317 | 82,606 | 82,079 |
| Depreciation and Amortisation | 33,359 | 33,359 | 41,438 | 24 | 44,831 | 46,562 | 44,797 |
| Grants and Purchased Services | 202,075 | 199,670 | 222,431 | 11 | 230,343 | 230,278 | 235,697 |
| Borrowing Costs | 2 | 2 | 2 | - | 2 | 2 | 2 |
| Other Expenses | 2,082 | 2,082 | 2,134 | 2 | 2,171 | 2,229 | 2,288 |
| **Total Expenses** | **469,636** | **499,844** | **487,207** | **-3** | **472,629** | **473,954** | **479,426** |
| **Operating Result** | **-35,978** | **-37,053** | **-42,095** | **-14** | **-45,324** | **-49,985** | **-48,543** |
| **Total Comprehensive Result** | **-35,978** | **-37,053** | **-42,095** | **-14** | **-45,324** | **-49,985** | **-48,543** |
|  |  |  |  |  |  |  |  |

Table 27: ACT Health Directorate: Balance Sheet ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Current Assets** |  |  |  |  |  |  |  |
| Cash and Cash Equivalents | 17,226 | 305 | 365 | 20 | 415 | 465 | 215 |
| Receivables | 3,835 | 3,445 | 3,531 | 2 | 3,617 | 3,703 | 3,789 |
| Other Assets | 3,012 | 10,755 | 10,790 | .. | 10,825 | 10,860 | 10,895 |
| **Total Current Assets** | **24,073** | **14,505** | **14,686** | **1** | **14,857** | **15,028** | **14,899** |
| **Non-Current Assets** |  |  |  |  |  |  |  |
| Property, Plant and Equipment | 92,453 | 83,436 | 94,667 | 13 | 113,012 | 118,915 | 123,604 |
| Intangible Assets | 98,152 | 45,392 | 27,304 | -40 | 73,485 | 37,353 | 4,211 |
| Capital Works in Progress | 50,124 | 105,458 | 170,380 | 62 | 166,097 | 163,597 | 152,097 |
| **Total Non-Current Assets** | **240,729** | **234,286** | **292,351** | **25** | **352,594** | **319,865** | **279,912** |
| **TOTAL ASSETS** | **264,802** | **248,791** | **307,037** | **23** | **367,451** | **334,893** | **294,811** |
| **Current Liabilities** |  |  |  |  |  |  |  |
| Payables | 20,353 | 32,572 | 33,000 | 1 | 33,428 | 33,856 | 33,984 |
| Lease Liabilities | 1,813 | 923 | 978 | 6 | 1,033 | 1,088 | 1,143 |
| Employee Benefits | 45,618 | 47,310 | 52,066 | 10 | 58,705 | 65,346 | 72,079 |
| Other Liabilities | 1,739 | 1,726 | 1,726 | - | 1,726 | 1,726 | 1,726 |
| **Total Current Liabilities** | **69,523** | **82,531** | **87,770** | **6** | **94,892** | **102,016** | **108,932** |
| **Non-Current Liabilities** |  |  |  |  |  |  |  |
| Lease Liabilities | 721 | 653 | 672 | 3 | 691 | 710 | 729 |
| Employee Benefits | 1,615 | 1,976 | 2,008 | 2 | 2,051 | 2,099 | 2,147 |
| Other Provisions | 110 | 2,832 | 2,832 | - | 2,832 | 2,832 | 2,832 |
| Other Liabilities | 9,048 | 8,562 | 7,993 | -7 | 7,424 | 6,855 | 6,286 |
| **Total Non-Current Liabilities** | **11,494** | **14,023** | **13,505** | **-4** | **12,998** | **12,496** | **11,994** |
| **TOTAL LIABILITIES** | **81,017** | **96,554** | **101,275** | **5** | **107,890** | **114,512** | **120,926** |
| **NET ASSETS** | **183,785** | **152,237** | **205,762** | **35** | **259,561** | **220,381** | **173,885** |
| **Equity** |  |  |  |  |  |  |  |
| Accumulated Funds | 166,845 | 135,297 | 188,822 | 40 | 242,621 | 203,441 | 156,945 |
| Asset Revaluation Surplus | 16,940 | 16,940 | 16,940 | - | 16,940 | 16,940 | 16,940 |
| **TOTAL EQUITY** | **183,785** | **152,237** | **205,762** | **35** | **259,561** | **220,381** | **173,885** |
|  |  |  |  |  |  |  |  |

Table 28: ACT Health Directorate: Statement of Changes in Equity ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Opening Equity** |  |  |  |  |  |  |  |
| Opening Accumulated Funds | 113,633 | 99,530 | 135,297 | 36 | 188,822 | 242,621 | 203,441 |
| Opening Asset Revaluation Surplus | 16,940 | 16,940 | 16,940 | - | 16,940 | 16,940 | 16,940 |
| **Balance at the Start of the Reporting Period** | **130,573** | **116,470** | **152,237** | **31** | **205,762** | **259,561** | **220,381** |
| **Comprehensive Income** |  |  |  |  |  |  |  |
| Operating Result | -35,978 | -37,053 | -42,095 | -14 | -45,324 | -49,985 | -48,543 |
| **Total Comprehensive Result** | **-35,978** | **-37,053** | **-42,095** | **-14** | **-45,324** | **-49,985** | **-48,543** |
| **Total Movement in Reserves** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Transactions Involving Owners Affecting Accumulated Funds** |  |  |  |  |  |  |  |
| Capital Injections | 89,190 | 72,820 | 95,620 | 31 | 99,123 | 10,805 | 2,047 |
|  |  |  |  |  |  |  |  |
| **Total Transactions Involving Owners Affecting Accumulated Funds** | **89,190** | **72,820** | **95,620** | **31** | **99,123** | **10,805** | **2,047** |
| **Closing Equity** |  |  |  |  |  |  |  |
| Closing Accumulated Funds | 166,845 | 135,297 | 188,822 | 40 | 242,621 | 203,441 | 156,945 |
| Closing Asset Revaluation Surplus | 16,940 | 16,940 | 16,940 | - | 16,940 | 16,940 | 16,940 |
|  |  |  |  |  |  |  |  |
| **Balance at the end of the Reporting Period** | **183,785** | **152,237** | **205,762** | **35** | **259,561** | **220,381** | **173,885** |
|  |  |  |  |  |  |  |  |

Table 29: ACT Health Directorate: Cash Flow Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |  |  |
| **CASH FLOWS FROM OPERATING ACTIVITIES** |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Controlled Recurrent Payments | 286,567 | 308,502 | 296,101 | -4 | 274,770 | 270,205 | 273,072 |
| Sale of Goods and Services from Contracts with Customers | 20,133 | 27,476 | 11,095 | -60 | 11,724 | 12,402 | 13,123 |
| Grants and Contributions Receipts | 119,124 | 119,124 | 122,102 | 2 | 124,544 | 127,658 | 130,867 |
| Goods and Services Tax Input Tax Credits from the Australian Taxation Office | 15,113 | 15,113 | 15,165 | .. | 15,544 | 16,368 | 16,777 |
| Goods and Services Tax Collected from Customers | 681 | 681 | 681 | - | 698 | 736 | 736 |
| Other | 4,165 | 4,165 | 4,269 | 2 | 4,354 | 4,463 | 4,573 |
| **Total Receipts from Operating Activities** | **445,783** | **475,061** | **449,413** | **-5** | **431,634** | **431,832** | **439,148** |
| **Payments** |  |  |  |  |  |  |  |
| Employee Payments | 107,630 | 117,580 | 116,927 | -1 | 106,849 | 106,154 | 108,346 |
| Supplies and Services | 115,757 | 137,190 | 93,833 | -32 | 75,098 | 75,943 | 76,099 |
| Grants and Purchased Services | 202,075 | 199,670 | 219,856 | 10 | 228,529 | 227,657 | 232,438 |
| Borrowing Costs | 2 | 2 | 2 | - | 2 | 2 | 2 |
| Goods and Services Tax Paid to Suppliers | 15,794 | 15,794 | 15,846 | .. | 16,242 | 17,104 | 17,532 |
| Other | 2,082 | 2,082 | 2,134 | 2 | 2,171 | 2,229 | 2,288 |
| **Total Payments from Operating Activities** | **443,340** | **472,318** | **448,598** | **-5** | **428,891** | **429,089** | **436,705** |
| **Net Cash Inflows/(Outflows) from Operating Activities** | **2,443** | **2,743** | **815** | **-70** | **2,743** | **2,743** | **2,443** |
| **CASH FLOWS FROM INVESTING ACTIVITIES** |  |  |  |  |  |  |  |
| **Payments** |  |  |  |  |  |  |  |
| Purchase of Property, Plant and Equipment | 8,365 | 7,492 | 4,101 | -45 | 3,092 | 2,688 | 2,688 |
| Purchase of Capital Works | 83,443 | 67,946 | 92,219 | 36 | 98,669 | 10,755 | 1,997 |
| **Total Payments from Investing Activities** | **91,808** | **75,438** | **96,320** | **28** | **101,761** | **13,443** | **4,685** |
| **Net Cash Inflows/(Outflows) from Investing Activities** | **-91,808** | **-75,438** | **-96,320** | **-28** | **-101,761** | **-13,443** | **-4,685** |

Table 29: ACT Health Directorate: Cash Flow Statement ($’000) - continued

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |  |  |
| **CASH FLOWS FROM FINANCING ACTIVITIES** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Capital Injections | 89,190 | 72,820 | 95,620 | 31 | 99,123 | 10,805 | 2,047 |
| **Total Receipts from Financing Activities** | **89,190** | **72,820** | **95,620** | **31** | **99,123** | **10,805** | **2,047** |
| **Payments** |  |  |  |  |  |  |  |
| Repayment of Lease Liabilities - Principal | 55 | 55 | 55 | - | 55 | 55 | 55 |
| **Total Payments from Financing Activities** | **55** | **55** | **55** | **-** | **55** | **55** | **55** |
| **Net Cash Inflows/(Outflows) from Financing Activities** | **89,135** | **72,765** | **95,565** | **31** | **99,068** | **10,750** | **1,992** |
| **Net Increase/(Decrease) in Cash and Cash Equivalents** | **-230** | **70** | **60** | **-14** | **50** | **50** | **-250** |
| **Cash and Cash Equivalents at the Beginning of the Reporting Period** | **17,456** | **235** | **305** | **30** | **365** | **415** | **465** |
| **Cash and Cash Equivalents at the End of the Reporting Period** | **17,226** | **305** | **365** | **20** | **415** | **465** | **215** |
|  |  |  |  |  |  |  |  |

### Notes to the Controlled Budget Statements

Significant variations are as follows:

#### Operating Statement

controlled recurrent payments (CRP):

* the increase of $21.935 million in the estimated outcome from the original budget is mainly due to COVID-19 related initiatives funded through the 2022-23 Budget Review and conversion of capital funding to CRP. These are partially offset by reprofiling of initiatives into 2023-24 to align with expected expenditure patterns; and
* the decrease of $12.401 million in the 2023-24 Budget from the 2022-23 estimated outcome is mainly due to the cessation of COVID-19 response initiatives and the transfer of information, communication technology (ICT) funding to the Chief Minister, Treasury and Economic Development Directorate (CMTEDD), partially offset by indexation and new initiatives.

sale of goods and services: the increase of $7.343 million in the estimated outcome from the original budget is mainly due to the extension of the *National Partnership on COVID‑19 Response* agreement with the Commonwealth from September to December 2022, while the decrease of $16.381 million into the 2023-24 Budget is due to the cessation of the same agreement.

grants and contributions revenue: the increase of $8.021 million in the 2023-24 Budget from the 2022-23 estimated outcome is mainly due to resources received free of change for new projects provided by Major Projects Canberra (MPC), the transfer of ICT funding to CMTEDD and the subsequent recognition of those services as resources received free of charge.

employee expenses: the increase of $11.025 million in the estimated outcome from the original budget relates mainly to COVID-19 related initiatives funded through the 2022‑23 Budget Review.

supplies and services:

* the increase of $21.588 million in the estimated outcome from the original budget is largely due to COVID-19 related initiatives and other vaccination programs funded through the 2022‑23 Budget Review; and
* the decrease of $40.3 million in the 2023-24 Budget from the 2022-23 estimated outcome relates mainly to the transfer of ICT funding to CMTEDD and the cessation of time-limited programs such as the COVID-19 response, partially offset by indexation and new initiatives.

depreciation and amortisation: the increase of $8.079 million in the 2023-24 Budget from the 2022-23 estimated outcome relates mainly to the full year effect of amortisation on the Digital Health Record project.

grants and purchased services: the increase of $22.761 million in the 2023-24 Budget from the 2022-23 estimated outcome relates to mainly to indexation and prior and current financial year initiatives, including *Community based mental health accommodation and early intervention services*, the *Eating Disorders Residential Treatment Centre* and *Measures to reduce harm across the community*.

#### Balance Sheet

cash: the decrease of $16.921 million in the estimated outcome from the original budget relates to the flow-on effect of the 2021-22 audited outcome.

other assets: the increase of $7.743 million in the estimated outcome from the original budget relates to the flow-on effect of the 2021-22 audited outcome.

Total non-current assets:

* the decrease of $6.443 million in the estimated outcome from the original budget is mainly due to the reclassification of expenditure from capital to expenses; and
* the increase of $58.065 million in the 2023-24 Budget from the 2022-23 estimated outcome is mainly due to prior and current financial year new initiatives including *Redeveloping and expanding the services of the Watson Health Precinct* and *Detailed design for the Northside Hospital*.

payables: the increase of $12.219 million in the estimated outcome from the original budget relates to the flow-on effect of the 2021-22 audited outcome.

#### Statement of Changes in Equity and Cash Flow Statement

Variations in these Statements are explained in the notes above.

## Financial Statements – Territorial

Table 30: ACT Health Directorate: Statement of Income and Expenses on behalf of the Territory ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **Income** |  |  |  |  |  |  |  |
| Payment for Expenses on Behalf of the Territory | 15,443 | 15,334 | 13,799 | -10 | 1,002 | 1,027 | 1,053 |
| Taxes, Licences, Fees and Fines | 1,578 | 1,578 | 1,617 | 2 | 1,657 | 1,698 | 1,741 |
| **Total Income** | **17,021** | **16,912** | **15,416** | **-9** | **2,659** | **2,725** | **2,794** |
| **Expenses** |  |  |  |  |  |  |  |
| Grants and Purchased Services | 15,443 | 15,334 | 13,799 | -10 | 1,002 | 1,027 | 1,053 |
| Transfer Expenses | 1,578 | 1,578 | 1,617 | 2 | 1,657 | 1,698 | 1,741 |
| **Total Expenses** | **17,021** | **16,912** | **15,416** | **-9** | **2,659** | **2,725** | **2,794** |
| **Operating Result** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |
| **Total Comprehensive Result** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |

Table 31: ACT Health Directorate: Statement of Assets and Liabilities on behalf of the Territory ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Current Assets** |  |  |  |  |  |  |  |
| Cash and Cash Equivalents | 210 | 594 | 594 | - | 594 | 594 | 594 |
| Receivables | 33 | 7 | 7 | - | 7 | 7 | 7 |
| **Total Current Assets** | **243** | **601** | **601** | **-** | **601** | **601** | **601** |
| **Non-Current Assets** |  |  |  |  |  |  |  |
| **Total Non-Current Assets** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **TOTAL ASSETS** | **243** | **601** | **601** | **-** | **601** | **601** | **601** |
| **Current Liabilities** |  |  |  |  |  |  |  |
| Payables | 244 | 602 | 602 | - | 602 | 602 | 602 |
| **Total Current Liabilities** | **244** | **602** | **602** | **-** | **602** | **602** | **602** |
| **Non-Current Liabilities** |  |  |  |  |  |  |  |
| **Total Non-Current Liabilities** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **TOTAL LIABILITIES** | **244** | **602** | **602** | **-** | **602** | **602** | **602** |
| **NET ASSETS** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Equity** |  |  |  |  |  |  |  |
| Accumulated Funds | 0 | 0 | 0 | - | 0 | 0 | 0 |
| **TOTAL EQUITY** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |

Table 32: ACT Health Directorate: Statement of Changes in Equity on behalf of the Territory ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Opening Equity** |  |  |  |  |  |  |  |
| Opening Accumulated Funds | 0 | 0 | 0 | - | 0 | 0 | 0 |
| **Balance at the Start of the Reporting Period** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Comprehensive Income** |  |  |  |  |  |  |  |
| **Total Comprehensive Result** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |
| **Transactions Involving Owners Affecting Accumulated Funds** |  |  |  |  |  |  |  |
| **Total Transactions Involving Owners Affecting Accumulated Funds** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Closing Equity** |  |  |  |  |  |  |  |
| Closing Accumulated Funds | 0 | 0 | 0 | - | 0 | 0 | 0 |
| **Balance at the end of the Reporting Period** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |

Table 33: ACT Health Directorate: Cash Flow Statement on behalf of the Territory ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **CASH FLOWS FROM OPERATING ACTIVITIES** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Payment for Expenses on Behalf of the Territory | 15,443 | 15,334 | 13,799 | -10 | 1,002 | 1,027 | 1,053 |
| Taxes, Licences, Fees and Fines | 1,578 | 1,578 | 1,617 | 2 | 1,657 | 1,698 | 1,741 |
| Goods and Services Tax Input Tax Credits from the Australian Taxation Office | 1,543 | 1,532 | 86 | -94 | 0 | 0 | 0 |
| **Total Receipts from Operating Activities** | **18,564** | **18,444** | **15,502** | **-16** | **2,659** | **2,725** | **2,794** |
| **Payments** |  |  |  |  |  |  |  |
| Grants and Purchased Services | 15,443 | 15,334 | 13,799 | -10 | 1,002 | 1,027 | 1,053 |
| Transfer of Territory Receipts to the ACT Government | 1,578 | 1,578 | 1,617 | 2 | 1,657 | 1,698 | 1,741 |
| Goods and Services Tax Paid to Suppliers | 1,543 | 1,532 | 86 | -94 | 0 | 0 | 0 |
| **Total Payments from Operating Activities** | **18,564** | **18,444** | **15,502** | **-16** | **2,659** | **2,725** | **2,794** |
| **Cash and Cash Equivalents at the Beginning of the Reporting Period** | **210** | **594** | **594** | **-** | **594** | **594** | **594** |
| **Cash and Cash Equivalents at the End of the Reporting Period** | **210** | **594** | **594** | **-** | **594** | **594** | **594** |
|  |  |  |  |  |  |  |  |

### Notes to the Territorial Budget Statements

There are no significant variations in the Territorial Budget Statements.

# CANBERRA HEALTH SERVICES

## Purpose

Canberra Health Services partners with the community and consumers, creating exceptional health care together, by:

* delivering personal health services;
* working in partnerships to improve people’s health;
* improving the experience of our consumers by engaging and listening;
* providing leadership in research, education, and clinical excellence; and
* designing models of care that deliver the highest standards of safety and quality.

## 2023-24 Priorities

In 2023-24, Canberra Health Services will continue to focus on performance and ensuring timely access to health services through improving emergency department treatment times, reducing outpatient waitlists, and delivering 60,000 elective surgeries over four years.

Following the acquisition of Calvary Public Hospital Bruce (North Canberra Hospital) from 3 July 2023, we will safely transition services in a staged and consultative approach across the Territory.

We will engage and support our new teams at North Canberra Hospital and ensure our consumers also experience a seamless transition. We will provide enhanced care for some of our vulnerable by opening the Adolescent Health Unit at Centenary Hospital for Women and Children and delivery of programs to support those who require dementia care.

We will work in partnership to deliver inclusive and culturally appropriate services through the implementation of the Disability Action and Inclusion Plan and Together, Forward - our commitment to Aboriginal and Torres Strait Islander peoples. In making Canberra Health Services a great place to work, we will continue to invest in workforce initiatives that support Team Canberra Health Services’ wellbeing, engagement, and culture.

This year we will also support the delivery of major future focussed infrastructure projects including the Canberra Hospital Expansion and Health Hubs to ensure the Canberra community can access the right care, in the right place.

## Estimated Employment Levels

Table 1: Estimated Employment Levels

|  | 2021-22  Actual  Outcome | 2022-23  Budget | 2022-23  Estimated  Outcome1 | 2023-24  Budget2 |
| --- | --- | --- | --- | --- |
| Staffing (FTE) | 7,134 | 7,062 | 7,253 | 7,259 |

**Notes:**

1. The increase of 191 FTE from 2022-23 Budget to the 2022-23 estimated outcome is due to the Territory’s continued support of the COVID-19 public health response.
2. The increase of 6 FTE from the 2022-23 estimated outcome to the 2023-24 Budget is mainly due to new and continuing initiatives, including Investing in public health care - Managing the ongoing impact of COVID-19 and other emerging health threats and Drugs and Justice reform - Alcohol Sentencing List. This is partially offset by a decrease in FTE associated with the COVID-19 public health response ceasing.

## Strategic Objectives and Indicators

### Strategic Objective 1: Maximising the Quality of Hospital Services

#### Strategic Indicator 1.1: Quality of care provided to patients

This indicator highlights the effectiveness and quality of care provided within Canberra Health Services from a patient’s perspective.

Table 2: Overall how would you rate the care you received in hospital

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Patient Experience Survey - Proportion of respondents rating their overall care as good or very good | >85% | N/A | >85% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the Digital Health Record (DHR) in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

#### Strategic Indicator 1.2: The number of people admitted to hospitals per 10,000 patient days who acquire a Staphylococcus Aureus Bacteraemia infection (SAB infection) during their stay

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

Table 3: The number of people admitted to hospitals per 10,000 patient days who acquire a SAB infection during their stay

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Number of admitted patients who acquire a SAB infection per 10,000 patient days2 | <1.0 per  10,000 | N/A | <1.0 per  10,000 |

**Notes:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. The indicator has changed from occupied bed days to patient days to align to the national definition determined by the Australian Commissions on Safety and Quality in Health Care.

#### Strategic Indicator 1.3: 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 4: Estimated hand hygiene rate

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Estimated hand hygiene rate | 80% | N/A | 80% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

### Strategic Objective 2: Proportion of women in the target age group (50‑74 years) screened through BreastScreen Australia in a 24-month period

#### Strategic Indicator 2.1: Participation rate - proportion of women aged 50 to 74 who had a breast screen

This indicator measures proportion of women (50 to 74 years) who had a breast screen.

Table 5: Participation rate - proportion of women aged 50 to 74 who had a breast screen

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Participation rate - proportion of women aged 50 to 74 who had a breast screen | 60% | N/A | 60% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

### Strategic Objective 3: Timely access to inpatient beds for mental health consumers

#### Strategic Indicator 3.1: Proportion of mental health patients whose emergency department length of stay is greater than 24 hours

This indicator measures timely access to inpatient beds for mental health patients.

Table 6: Proportion of mental health patients whose emergency department length of stay is greater than 24 hours

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Proportion of mental health patients whose emergency department length of stay is greater than 24 hours | 0% | N/A | 0% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

### Strategic Objective 4: Reducing the impacts of occupational violence on our staff

#### Strategic Indicator 4.1: The reduction in occasions of staff absence caused by occupational violence

This indicator details the rate of staff absence due to reported occupational violence incidents (i.e. staff time lost from the workplace).

Table 7: Reduction in occasions of staff absence caused by an occupational violence incident (lost time incident frequency rate due to occupational violence)

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Occasions of staff absence caused by an occupational violence incident (lost time incident frequency rate due to occupational violence) | 5.8 per million hours worked | N/A | 5.8 per million hours worked |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

### Strategic Objective 5: Improving quality of care for inpatients at Canberra Health Services for patients 80 years or older

#### Strategic Indicator 5.1: Proportion of patients 80 years or older at admission for an inpatient episode of care at Canberra Health Services with “Goals of Care” registered during admission

This details the proportion of patients 80 years or older at admission for an inpatient episode of care at Canberra Health Services with “Goals of Care” registered during admission.

Table 8: Proportion of patients 80 years or older at admission for an inpatient episode of care at Canberra Health Services with “Goals of Care” registered during admission

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Proportion of patients 80 years or older at admission for an inpatient episode of care at Canberra Health Services with “Goals of Care” registered during admission | 100% | N/A | 100% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

### Strategic Objective 6: Improving partnerships with primary health care providers

#### Strategic Indicator 6.1: Proportion of patients who present to Canberra Health Services’ emergency department or Walk-in Centre who have a registered primary health care provider recorded

This details the proportion of patients who present to a Canberra Health Services’ emergency department or Walk-in Centre who have a registered primary health care provider recorded.

Table 9: Proportion of patients who present to Canberra Health Services’ emergency department or Walk-in Centre who have a recorded registered primary health care provider

| **Strategic Indicator** | **2022-23**  **Targets** | **2022-23**  **Estimated**  **Outcome1** | **2023-24**  **Targets** |
| --- | --- | --- | --- |
| Proportion of patients who present to Canberra Health Services’ emergency department or Walk-in Centre who have a registered primary health care provider recorded | 100% | N/A | 100% |

**Note:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

**Output Classes**

Canberra Health Services aims to deliver the best possible healthcare and health related services in Australia. It will do this via its public hospitals and related health services, including Acute Services; Mental Health, Justice Health and Alcohol and Drug Services; Cancer Services; and Subacute and Community Services.

### Output Class 1: Health and Community Care

Table 10: Health and Community Care ($’000)

|  |  |  |
| --- | --- | --- |
|  | **2022-23**  **Estimated Outcome** | **2023-24**  **Budget** |
| Total Cost1 | 1,630,885 | 1,673,287 |
| Controlled Recurrent Payments2 | 0 | 0 |

**Notes:**

1. Total cost includes depreciation of $40.203 million in 2022-23 and $42.361 million in 2023-24.
2. Funding is received from the ACT Local Hospital Network Directorate (LHN) as Grants and Contributions, not as Controlled Recurrent Payments (CRP).

#### Output 1.1: Acute Services

Canberra Health Services provides a comprehensive range of acute care, including:

* tertiary inpatient, outpatient and ambulatory services to the ACT and surrounding NSW;
* emergency department, intensive care unit and retrieval services;
* a range of medical speciality services including cardiology, respiratory, gastroenterology, neurology, endocrinology, rheumatology, and renal services;
* elective and emergency surgery services; and
* services for women, youth and children in obstetrics, gynaecology, gynaecology surgery, paediatrics, and paediatric surgery.

The key strategic priority for acute services is to deliver timely access to effective and safe hospital care services while responding to the growing demand of services. This means focusing on:

* strategies to improve access to services, including for the emergency department and elective surgery; and
* continuing to increase the efficiency of acute care services.

Table 11: Output 1.1: Acute Services ($’000)

|  |  |  |
| --- | --- | --- |
|  | **2022-23**  **Estimated Outcome** | **2023-24**  **Budget** |
| Total Cost | 1,084,861 | 1,117,329 |
| Controlled Recurrent Payments1 | 0 | 0 |

**Note:**

1. Funding is received from the LHN as Grants and Contributions, not as CRP.

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

Canberra Health Services 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 people’s homes across the Territory. These services work to provide integrated and responsive care to a range of services including hospital-based specialist services, therapeutic rehabilitation, counselling, supported accommodation services and other community-based services.

The key 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 focusing on:

* ensuring timely access to emergency mental health care;
* 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;
* providing community and hospital-based alcohol and drug services;
* providing health assessments and care for people detained in corrective facilities; and
* engaging and liaising with community sector services, primary care and other government agencies providing support and shared care arrangements.

Table 12: Output 1.2: Mental Health, Justice Health and Alcohol and Drug Services ($’000)

|  |  |  |
| --- | --- | --- |
|  | **2022-23**  **Estimated Outcome** | **2023-24**  **Budget** |
| Total Cost | 216,119 | 220,259 |
| Controlled Recurrent Payments1 | 0 | 0 |

**Note:**

1. Funding is received from the LHN as Grants and Contributions, not as CRP.

#### Output 1.3: Cancer Services

Canberra Health 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 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 cancer meet targets, waiting time for access to essential services such as radiotherapy are consistent with agreed benchmarks and there is timely access to chemotherapy and haematological treatments.

Table 13: Output 1.3: Cancer Services ($’000)

|  |  |  |
| --- | --- | --- |
|  | **2022-23**  **Estimated Outcome** | **2023-24**  **Budget** |
| Total Cost | 93,443 | 93,965 |
| Controlled Recurrent Payments1 | 0 | 0 |

**Note:**

1. Funding is received from the LHN as Grants and Contributions, not as CRP.

#### Output 1.4: Subacute and Community Services

The provision of timely and effective, coordinated, and comprehensive services which optimise the functionality and quality of life of adult patients. Following illness, injury or surgery, subacute services enable individuals to safely transition to community living. Community-based services sees care delivered safely and closely to where people live.

The key priorities for Subacute and Community Services are:

* ensuring consistent and timely access to appropriate care and services, based on clinical need. This includes the efficient and appropriate transfer of people from acute to subacute settings, rehabilitation and ensuring community-based services are in place to support healthcare needs;
* ensuring effective planning for discharge and care planning occurs, including comprehensive aged care assessment where necessary, in order to provide appropriate support for independent living and minimise unplanned readmissions to hospital;
* for services that receive Commonwealth aged care funding, complying with the Commonwealth’s quality and safety requirements;
* reduced waiting times for access to emergency dental health services; and
* achieving lower than the Australian Average in the Decayed, Missing, or Filled Teeth Index.

Table 14: Output 1.4: Subacute and Community Services ($’000)

|  |  |  |
| --- | --- | --- |
|  | **2022-23**  **Estimated Outcome** | **2023-24**  **Budget** |
| Total Cost | 236,462 | 241,734 |
| Controlled Recurrent Payments1 | 0 | 0 |

**Note:**

1. Funding is received from the LHN as Grants and Contributions, not as CRP.

## Accountability Indicators

### Output Class 1: Health and Community Care

#### Output 1.1: Acute Services

Table 15: Accountability Indicators Output 1.1

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| 1. Number of surgical complications requiring   unplanned return to theatre per 10,000 hospital admissions | <45 | N/A | <45 |
| 1. Number of avoidable readmissions for selected conditions per 10,000 hospital admissions2 2. Percentage of emergency department presentations whose length of stay in the emergency department is four hours or less3 | <123  - | N/A  - | <125  ≥90% |
| **Percentage of Elective Surgery Cases Admitted on Time by Clinical Urgency**4 |  |  |  |
| 1. 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 | 100% | N/A | - |
| 1. 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 | 80% | N/A | - |
| 1. Non-urgent – admission within 365 days is desirable 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 | 93% | N/A | - |
| **Percentage of ACT emergency department presentations that are treated within clinically recommended timeframes, by triage category**5 |  |  |  |
| 1. Category 1 - Resuscitation patients seen immediately | 100% | N/A | 100% |
| 1. Category 2 - Emergency patients seen within 10 minutes | 80% | N/A | 80% |
| 1. Category 3 - Urgent patients seen within 30 minutes | 75% | N/A | 75% |
| 1. Category 4 - Semi-Urgent patients seen within 60 minutes | 70% | N/A | 70% |
| 1. Category 5 - Non-Urgent patients seen within 120 minutes | 70% | N/A | 70% |
| 1. All presentations | 70% | N/A | - |

Table 15: Accountability Indicators Output 1.1 (Cont.)

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| **National Weighted Activity Units**6 |  |  |  |
| 1. Admitted acute care {NWAU 23} 2. Non-admitted services {NWAU 23} 3. Emergency services {NWAU 23} | 80,000  22,000  12,500 | N/A  N/A  N/A | -  -  - |

**Accountability Indicator Descriptions and Variance Commentary:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. The 2023-24 target has been revised to be in line with targets previously reported through the LHN.
3. This indicator for 2023-24 has been transferred to CHS from the ACTHD. This provides an indication of the effectiveness of the public hospital system in meeting the need for emergency treatment.
4. These indicators for 2023-24 have transferred from CHS to the LHN.
5. These indicators have been revised for 2023-24 to reflect the targets set by the Australasian College of Emergency Medicine.
6. These indicators have been discontinued for 2023-24 as they are no longer reported at the sub-class level and total targets are reported through the LHN.

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

Table 16: Accountability Indicators Output 1.2

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| 1. Proportion of detainees at the Alexander Maconochie Centre with a completed health assessment within 24 hours of detention | 100% | N/A | 100% |
| 1. Proportion of detainees at the Bimberi Youth Detention Centre with a completed health assessment within 24 hours of detention | 100% | N/A | 100% |
| 1. Proportion of current clients on opioid treatment with management plans | 98% | N/A | 98% |
| 1. Proportion of mental health clients contacted by a Canberra Health Services’ community facility within 7 days post discharge from inpatient services | 75% | N/A | 75% |
| 1. The rate of mental health clients who are subjected to a seclusion event while being an admitted patient in an ACT public mental health inpatient unit per 1,000 patient days2 | <7 per 1,000  patient days | N/A | <7 per 1,000  patient days |
| 1. Proportion of clients who return to hospital within 28 days of discharge from an ACT acute psychiatric mental health inpatient unit | <17% | N/A | <17% |

Table 16: Accountability Indicators Output 1.2 (Cont.)

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| 1. Percentage of mental health clients with outcome measures completed3 | 65% | N/A | - |
| **National Weighted Activity Units** |  |  |  |
| 1. Acute admitted mental health services {NWAU 23}4 | 7,000 | N/A | - |

**Accountability Indicator Descriptions and Variance Commentary:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. The indicator has changed from occupied bed days to patient days to align to the national definition determined by the Australian Commissions on Safety and Quality in Health Care.
3. This indicator has been discontinued for 2023-24 after a review of all performance indicators for Canberra Health Services.
4. This indicator has been discontinued for 2023-24 as it is no longer reported at the sub-class level and the total target is reported through the LHN.

#### Output 1.3: Cancer Services

Table 17: Accountability Indicators Output 1.3

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| 1. The percentage of patients requiring a breast screen who attend for an assessment visit within 28 calendar days of their screening visit | 90% | N/A | 90% |
| **Radiotherapy Treatment Within Standard Timeframes** |  |  |  |
| 1. Emergency - treatment starts within 48 hours | 100% | N/A | 100% |
| 1. Palliative - treatment starts within 2 weeks | 90% | N/A | 90% |
| 1. Radical - treatment starts within 4 weeks | 90% | N/A | 90% |

**Accountability Indicator Descriptions and Variance Commentary:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.

#### Output 1.4: Subacute and Community Services

Table 18: Accountability Indicators Output 1.4

|  | 2022-23  Targets | 2022-23  Estimated  Outcome1 | 2023-24  Targets |
| --- | --- | --- | --- |
| 1. Mean waiting time for clients on the dental services waiting list | 12 months | N/A | 12 months |
| 1. Median wait time to be seen (all Walk-in Centres combined) | <30 minutes | N/A | <30 minutes |
| **National Weighted Activity Units** |  |  |  |
| 1. Subacute services {NWAU 23}2 | 10,000 | N/A | - |

**Accountability Indicator Descriptions and Variance Commentary:**

1. An estimated outcome was not available at the time of publication. Following the implementation of the DHR in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. This indicator has been discontinued for 2023-24 as it is no longer reported at the sub-class level and the total target is reported through the LHN.

## Changes to Appropriation

Table 19: Changes to appropriation - Capital Injections, Controlled ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2022-23 Budget** | 80,120 | 45,212 | 14,172 | 4,658 | 4,774 |
| **FMA Section 16B Rollovers from 2021-22** |  |  |  |  |  |
| Better healthcare for a growing community - ACT Health  critical asset upgrades | -49 | 0 | 0 | 0 | 0 |
| Better healthcare for a growing community - More mental  health accommodation | 108 | 0 | 0 | 0 | 0 |
| Better Health Services - Upgrading and maintaining ACT  Health assets | 197 | 0 | 0 | 0 | 0 |
| Better Infrastructure Fund | -181 | 0 | 0 | 0 | 0 |
| Clinical Services and Inpatient Unit Design and Infrastructure  Expansion | 272 | 0 | 0 | 0 | 0 |
| Community, Health, and Hospitals Program - Australian  Capital Territory Initiatives | 219 | 0 | 0 | 0 | 0 |
| Delivering the Inner North Walk-in Centre | 0 | -8 | 0 | 0 | 0 |
| Expanding pharmacy services at The Canberra Hospital | 80 | 0 | 0 | 0 | 0 |
| Expanding the Centenary Hospital for Women and Children | 2,718 | 0 | 0 | 0 | 0 |
| Health Innovation Fund | -562 | 0 | 0 | 0 | 0 |
| Imaging Services at the Weston Creek Walk-in Centre | 12 | 0 | 0 | 0 | 0 |
| Improved Infrastructure for Acute Aged Care and Cancer  Inpatients | 0 | -585 | 0 | 0 | 0 |
| Improving Canberra's health infrastructure - Cancer Research  Centre | 41 | 0 | 0 | 0 | 0 |
| Improving Canberra's Health Infrastructure - Medical  Warehouse Relocation | -27 | 0 | 0 | 0 | 0 |
| Improving Canberra's Health Infrastructure - Upgrade of the  Endoscopy Rooms at the Canberra Hospital | 85 | 0 | 0 | 0 | 0 |
| More mental health services at The Canberra Hospital | 0 | -474 | 0 | 0 | 0 |
| More public medical imaging services for Canberra Hospital | 146 | 0 | 0 | 0 | 0 |
| Opioid Treatment Services on Canberra's Northside | -37 | 0 | 0 | 0 | 0 |
| Sterilising Services - Relocation and Upgrade | 0 | -14 | 0 | 0 | 0 |
| The Canberra Hospital - Essential Infrastructure and  engineering works | -452 | 0 | 0 | 0 | 0 |
| University of Canberra Public Hospital Car Park | 286 | 0 | 0 | 0 | 0 |
| Upgrade and Refurbishment of Buildings at the Canberra  Hospital | 1,145 | 0 | 0 | 0 | 0 |
| Walk-in Health Centre - Coombs Pilot | 138 | 0 | 0 | 0 | 0 |

Table 19: Changes to appropriation - Capital Injections, Controlled ($’000) (Cont.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2023-24 Budget Policy Decisions** |  |  |  |  |  |
| Enterprise Bargaining Agreement and Pay Offer | 0 | 17,282 | 0 | 0 | 0 |
| Improving Canberra’s health infrastructure - Delivering a  new palliative care ward at the Canberra Hospital | 0 | 617 | 5,204 | 6,049 | 3,000 |
| Improving Canberra’s health infrastructure - Expanding and  upgrading endoscopy services | 0 | 607 | 4,104 | 3,498 | 0 |
| Improving Canberra’s health infrastructure - Expanding  health centres across the city | 0 | 976 | 5,858 | 6,890 | 2,200 |
| Improving Canberra’s health infrastructure - new location for  the Child and Adolescent Mental Health Service | 402 | 4,624 | 0 | 0 | 0 |
| Improving Canberra’s health infrastructure - Upgrading ACT  Pathology’s laboratory | 222 | 3,034 | 0 | 0 | 0 |
| Investing in public health care – Boosting the workforce and  operationalising the Critical Services Building | 0 | 2,215 | 0 | 0 | 0 |
| Offset - From Better Infrastructure Fund to Improving  Canberra’s health infrastructure - new location for the Child  and Adolescent Mental Health Service | -402 | 0 | 0 | 0 | 0 |
| Offset - From Upgrade and Refurbishment of buildings at  Canberra Hospital to Improving Canberra’s health  infrastructure - Upgrading ACT Pathology’s laboratory | -222 | -3,034 | 0 | 0 | 0 |
| Supporting our health workforce - Safety systems  upgrades to our public health services | 0 | 1,381 | 1,963 | 0 | 0 |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
| Revised Funding Profile - Better care when you need it -  Training our future health workforce | -800 | 800 | 0 | 0 | 0 |
| Revised Funding Profile - Better Health Services - Upgrading  and maintaining ACT Health assets | 2,000 | -2,000 | 0 | 0 | 0 |
| Revised Funding Profile - Better healthcare for a growing  community - ACT Health critical assets upgrades | -6,500 | 4,000 | 2,500 | 0 | 0 |
| Revised Funding Profile – Embedding a positive safety culture  in the ACT public health system | -400 | 400 | 0 | 0 | 0 |
| Revised Funding Profile - Expanding pharmacy services at The  Canberra Hospital | 0 | -500 | 500 | 0 | 0 |
| Revised Funding Profile - Expanding the Centenary Hospital  for Women and Children | -2,660 | 660 | 2,000 | 0 | 0 |
| Revised Funding Profile - Imaging services at the Weston  Creek Walk-in Centre | 0 | -613 | 613 | 0 | 0 |
| Revised Funding Profile - Improving Canberra’s health  infrastructure - Delivering new clinical equipment and  building services at the Canberra Hospital | -2,600 | -1,000 | 1,600 | 2,000 | 0 |
| Revised Funding Profile - Improving Canberra's health  infrastructure - Replacing and enhancing critical equipment  at North Canberra Hospital | -5,300 | -2,700 | 5,300 | 2,700 | 0 |
| Revised Funding Profile - Improving Canberra's health  infrastructure - Canberra Health Services warehouse and  logistics facility | -1,125 | 1,125 | 0 | 0 | 0 |
| Revised Funding Profile - Improving Canberra's health  infrastructure - Cancer Research Centre | -3,200 | -400 | 3,600 | 0 | 0 |
| Revised Funding Profile - Improving Canberra's health  infrastructure - new location for the Child and Adolescent  Mental Health Service | 0 | -1,000 | 1,000 | 0 | 0 |

Table 19: Changes to appropriation - Capital Injections, Controlled ($’000) (Cont.)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| Revised Funding Profile - Improving Canberra's health  infrastructure - Upgrading ACT Pathology’s laboratory | -170 | -1,830 | 1,500 | 500 | 0 |
| Revised Funding Profile - Improving Canberra’s health  infrastructure - Canberra Hospital Expansion operational  commissioning | -300 | -415 | 715 | 0 | 0 |
| Revised Funding Profile - Investing in public health care -  Digital Healthcare Record - transforming the way health  care is provided | -8,434 | 8,434 | 0 | 0 | 0 |
| Revised Funding Profile - Investing in public health care -  Expanding endoscopy services | -200 | 200 | 0 | 0 | 0 |
| Revised Funding Profile - Investing in public health care -  Implementation and integration of a modern rostering  system | -574 | -184 | 758 | 0 | 0 |
| Revised Funding Profile - Upgrade and Refurbishment of  buildings at Canberra Hospital | -1,534 | 1,534 | 0 | 0 | 0 |
| Variation - Better healthcare for a growing community -  More mental health accommodation | 0 | -439 | 0 | 0 | 0 |
| Variation - Health Innovation Fund- Mental Health 12B  Redevelopment | 0 | -223 | 0 | 0 | 0 |
| **2023-24 Budget** | **52,462** | **77,682** | **51,387** | **26,295** | **9,974** |

## Summary of 2023-24 Infrastructure Program

Table 20: 2023-24 Canberra Health Services Infrastructure Program - New Works ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **New Works** |  |  |  |  |  |  |  |
| Improving Canberra’s health  infrastructure ‑ Delivering  a new palliative care ward  at the Canberra Hospital | **15,466** | 642 | 5,413 | 6,291 | 3,120 | **15,466** | Feb-26 |
| Improving Canberra’s health  infrastructure - Expanding  and upgrading endoscopy  services | **8,537** | 631 | 4,268 | 3,638 | 0 | **8,537** | Mar-26 |
| Improving Canberra’s health  infrastructure ‑ Expanding  health centres across the  city | **16,561** | 1,015 | 6,092 | 7,166 | 2,288 | **16,561** | Aug-26 |
| Investing in public health  care ‑ Boosting the  workforce and  operationalising the  Critical Services Building | **2,215** | 2,215 | 0 | 0 | 0 | **2,215** | May-24 |
| Supporting our health  workforce - Safety systems  upgrades to our public  health services | **3,478** | 1,436 | 2,042 | 0 | 0 | **3,478** | Oct-25 |
| **Total New Works** | **46,257** | **5,939** | **17,815** | **17,095** | **5,408** | **46,257** |  |

Table 21: 2023-24 Canberra Health Services Infrastructure Program - Capital Upgrade Program ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **Capital Upgrade Program** |  |  |  |  |  |  |  |
| Better Infrastructure Fund | **Ongoing** | 4,434 | 4,545 | 4,658 | 4,774 | **18,411** | Ongoing |
| **Total Capital Upgrade Program** | **Ongoing** | **4,434** | **4,545** | **4,658** | **4,774** | **18,411** |  |

Table 22: 2023-24 Canberra Health Services Infrastructure Program - Works In Progress ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| **CAPITAL WORKS PROGRAM** |  |  |  |  |  |  |  |
| **Works In Progress** |  |  |  |  |  |  |  |
| Better care when you need  it - Training our future  health workforce | **1,700** | 800 | 0 | 0 | 0 | **800** | Jan-24 |
| Better Health Services -  Upgrading and  maintaining ACT Health  assets | **98,543** | 1,548 | 0 | 0 | 0 | **1,548** | Jun-24 |
| Better healthcare for a  growing community - ACT  Health critical assets  upgrades | **21,083** | 2,083 | 2,603 | 0 | 0 | **4,686** | Jun-25 |
| Better healthcare for a  growing community -  Delivering the Weston  Creek Walk-in Centre | **5,045** | 42 | 0 | 0 | 0 | **42** | Completed1 |
| Clinical Services and  Inpatient Unit Design and  Infrastructure Expansion | **26,186** | 302 | 0 | 0 | 0 | **302** | Completed1 |
| Community, Health and  Hospitals Program -  Australian Capital Territory  Initiatives | **13,500** | 321 | 0 | 0 | 0 | **321** | Completed1 |
| Delivering the Inner North  Walk-in Centre | **1,714** | 119 | 0 | 0 | 0 | **119** | Completed1 |
| Expanding pharmacy  services at The Canberra  Hospital | **5,530** | 1,689 | 500 | 0 | 0 | **2,189** | Dec-23 |
| Expanding the Centenary  Hospital for Women and  Children | **50,050** | 8,439 | 2,126 | 0 | 0 | **10,565** | Dec-23 |
| Imaging services at the  Weston Creek Walk-in  Centre | **5,670** | 1,000 | 613 | 0 | 0 | **1,613** | Completed1 |
| Improved Infrastructure for  Acute Aged Care and  Cancer Inpatients | **18,910** | 249 | 0 | 0 | 0 | **249** | Completed1 |
| Improving Canberra’s health  infrastructure - Delivering  new clinical equipment  and building services at  the Canberra Hospital | **21,781** | 5,651 | 9,788 | 2,000 | 0 | **17,439** | Jun-26 |
| Improving Canberra’s health  infrastructure - Canberra  Hospital Expansion  operational  commissioning | **6,335** | 2,450 | 2,240 | 0 | 0 | **4,690** | Jun-25 |

Table 22: 2023-24 Canberra Health Services Infrastructure Program - Works In Progress ($’000) (Cont.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| Improving Canberra's health  infrastructure - Replacing  and enhancing critical  equipment at North  Canberra Hospital | **10,490** | 1,820 | 5,653 | 2,880 | 0 | **10,353** | Jun-26 |
| Improving Canberra's health  infrastructure - Canberra  Health Services warehouse  and logistics facility | **1,267** | 1,225 | 0 | 0 | 0 | **1,225** | Oct-23 |
| Improving Canberra's health  infrastructure - Cancer  Research Centre | **7,045** | 2,600 | 3,600 | 0 | 0 | **6,200** | Sep-24 |
| Improving Canberra's health  infrastructure - New  location for the Child and  Adolescent Mental Health  Service | **5,026** | 3,624 | 1,000 | 0 | 0 | **4,624** | Sep-24 |
| Improving Canberra's health  infrastructure - Upgrading  ACT Pathology’s  laboratory | **3,391** | 1,257 | 1,560 | 520 | 0 | **3,337** | Jan-25 |
| Investing in public health  care - Digital Health  Record - transforming the  way health care is  provided | **8,500** | 8,434 | 0 | 0 | 0 | **8,434** | Mar-24 |
| Investing in public health  care - Embedding a  positive safety culture in  the ACT public health  system | **500** | 400 | 0 | 0 | 0 | **400** | Jun-24 |
| Investing in public health  care - Implementation and  integration of a modern  rostering system | **2,442** | 1,000 | 758 | 0 | 0 | **1,758** | Dec-24 |
| Investing in public health  care - Expanding  endoscopy services | **825** | 208 | 0 | 0 | 0 | **208** | Dec-23 |
| More mental health services  at The Canberra Hospital | **2,520** | 429 | 0 | 0 | 0 | **429** | Completed1 |
| More public medical  imaging services for  Canberra Hospital | **5,700** | 3,141 | 0 | 0 | 0 | **3,141** | Dec-23 |
| Secure Mental Health Unit | **42,568** | 84 | 0 | 0 | 0 | **84** | Completed1 |
| Sterilising Services ‑  Relocation and upgrade | **5,852** | 397 | 0 | 0 | 0 | **397** | Jun-24 |
| The Canberra Hospital ‑  Essential infrastructure  and engineering works | **5,390** | 58 | 0 | 0 | 0 | **58** | Completed1 |
| University of Canberra  Public Hospital | **158,262** | 198 | 0 | 0 | 0 | **198** | Completed1 |
| Upgrade and refurbishment  of buildings at Canberra  Hospital | **14,243** | 519 | 0 | 0 | 0 | **519** | Completed1 |

Table 22: 2023-24 Canberra Health Services Infrastructure Program - Works In Progress ($’000) (Cont.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** | **Physical**  **Completion**  **Date** |
| Walk-in health centre ‑  Coombs pilot | **250** | 58 | 0 | 0 | 0 | **58** | Completed1 |
| **Total Works In Progress** | **550,318** | **50,145** | **30,441** | **5,400** | **0** | **85,986** |  |

Note:

1. Completed projects that show funding into the forward years are physically complete, but they are not financially complete (including those that have entered into the defect liability period).

Table 23: 2023-24 Canberra Health Services Infrastructure Program - Total Infrastructure Program ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Project** | **Total Project Value** | **2023-24** | **2024­25** | **2025­26** | **2026­27** | **Four Year**  **Investment** |  |
| New Works | **46,257** | 5,939 | 17,815 | 17,095 | 5,408 | **46,257** |  |
| Capital Upgrade Program | **Ongoing** | 4,434 | 4,545 | 4,658 | 4,774 | **18,411** |  |
| Works in Progress | **550,318** | 50,145 | 30,441 | 5,400 | 0 | **85,986** |  |
| **TOTAL INFRASTRUCTURE PROGRAM** | **596,575** | **60,518** | **52,801** | **27,153** | **10,182** | **150,654** |  |

## Financial Statements

Presentational changes have been made to streamline the financial statements and the 2022‑23 Budget column also reflects this change. These changes will be consistent with future annual financial statements and ensure comparability of the annual financial statements with the budget estimates as required under section 27 of the *Financial Management Act 1996*.

***North Canberra Hospital Acquisition***

On 31 May 2023, the *Health Infrastructure Enabling Act 2023* (the Act) was debated and passed in the ACT Legislative Assembly. The Act is scheduled to take effect on 3 July 2023 at which time the existing Calvary Public Hospital Bruce will transition to Canberra Health Services.

The Act contains provisions for compensation on just terms resulting from the transition. At the time of finalising the 2023-24 Budget estimates negotiations of these terms were ongoing. The Territory’s budget estimates contain a number of central provision estimates in relation to the transition based on information known and quantifiable at the time of finalising the estimates. These impacts are incorporated in the consolidated financial statements contained in the 2023-24 Budget. They are not reflected in the estimates of Canberra Health Services at this time.

Table 24: Canberra Health Services: Operating Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022­23 Budget** | **2022­23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024­25 Estimate** | **2025­26 Estimate** | **2026­27 Estimate** |
| **Income** |  |  |  |  |  |  |  |
| Sale of Goods and Services  from Contracts with  Customers | 124,098 | 105,055 | 104,582 | .. | 106,629 | 108,815 | 112,377 |
| Grants and Contributions | 1,391,240 | 1,452,475 | 1,489,589 | 3 | 1,547,578 | 1,585,955 | 1,620,491 |
| Other Income | 16,643 | 10,295 | 10,467 | 2 | 10,608 | 10,699 | 10,818 |
| **Total Income** | **1,531,981** | **1,567,825** | **1,604,638** | **2** | **1,664,815** | **1,705,469** | **1,743,686** |
| **Expenses** |  |  |  |  |  |  |  |
| Employee Expenses | 1,044,571 | 1,093,411 | 1,128,425 | 3 | 1,162,984 | 1,195,063 | 1,223,427 |
| Supplies and Services | 460,848 | 454,883 | 454,594 | .. | 479,478 | 487,270 | 496,329 |
| Depreciation | 40,203 | 40,203 | 42,361 | 5 | 56,451 | 57,457 | 57,670 |
| Purchased Services | 17,684 | 30,205 | 35,479 | 17 | 31,975 | 32,615 | 33,267 |
| Cost of Goods Sold | 10,636 | 9,708 | 9,902 | 2 | 10,100 | 10,302 | 10,508 |
| Other Expenses | 6,535 | 2,475 | 2,526 | 2 | 2,577 | 2,629 | 2,682 |
| **Total Expenses** | **1,580,477** | **1,630,885** | **1,673,287** | **3** | **1,743,565** | **1,785,336** | **1,823,883** |
| **Operating Result** | **-48,496** | **-63,060** | **-68,649** | **-9** | **-78,750** | **-79,867** | **-80,197** |
| **Total Comprehensive Result** | **-48,496** | **-63,060** | **-68,649** | **-9** | **-78,750** | **-79,867** | **-80,197** |
|  |  |  |  |  |  |  |  |

“-“ denotes “nil”. “..” denotes that the figure rounds to zero.

Table 25: Canberra Health Services: Balance Sheet ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Current Assets** |  |  |  |  |  |  |  |
| Cash | 37,351 | 39,732 | 32,180 | -19 | 25,506 | 18,089 | 11,149 |
| Receivables | 33,812 | 32,588 | 33,631 | 3 | 34,639 | 35,601 | 36,516 |
| Inventories | 16,952 | 34,343 | 34,543 | 1 | 34,749 | 34,951 | 35,149 |
| Other Assets | 2,757 | 3,113 | 3,178 | 2 | 3,243 | 3,308 | 3,373 |
| **Total Current Assets** | **90,872** | **109,776** | **103,532** | **-6** | **98,137** | **91,949** | **86,187** |
| **Non-Current Assets** |  |  |  |  |  |  |  |
| Property, Plant and  Equipment | 1,222,399 | 1,177,998 | 1,165,302 | -1 | 1,735,456 | 1,710,133 | 1,685,011 |
| Capital Works in Progress | 119,267 | 131,704 | 169,943 | 29 | 198,809 | 201,914 | 187,932 |
| **Total Non-Current Assets** | **1,341,666** | **1,309,702** | **1,335,245** | **2** | **1,934,265** | **1,912,047** | **1,872,943** |
| **TOTAL ASSETS** | **1,432,538** | **1,419,478** | **1,438,777** | **1** | **2,032,402** | **2,003,996** | **1,959,130** |
| **Current Liabilities** |  |  |  |  |  |  |  |
| Payables | 60,377 | 62,082 | 63,923 | 3 | 65,764 | 67,605 | 69,446 |
| Lease Liabilities | 2,951 | 1,794 | 2,480 | 38 | 3,166 | 3,852 | 4,538 |
| Employee Benefits | 338,533 | 361,877 | 367,443 | 2 | 388,329 | 408,303 | 428,594 |
| Other Liabilities | 14,810 | 3,587 | 3,377 | -6 | 3,577 | 3,777 | 3,977 |
| **Total Current Liabilities** | **416,671** | **429,340** | **437,223** | **2** | **460,836** | **483,537** | **506,555** |
| **Non-Current Liabilities** |  |  |  |  |  |  |  |
| Lease Liabilities | 2,378 | 1,693 | 2,058 | 22 | 2,423 | 2,788 | 3,153 |
| Employee Benefits | 20,610 | 18,119 | 20,154 | 11 | 22,350 | 24,450 | 26,424 |
| Other Liabilities | 2,431 | 2,003 | 1,986 | -1 | 1,986 | 1,986 | 1,986 |
| **Total Non-Current Liabilities** | **25,419** | **21,815** | **24,198** | **11** | **26,759** | **29,224** | **31,563** |
| **TOTAL LIABILITIES** | **442,090** | **451,155** | **461,421** | **2** | **487,595** | **512,761** | **538,118** |
| **NET ASSETS** | **990,448** | **968,323** | **977,356** | **1** | **1,544,807** | **1,491,235** | **1,421,012** |
| **Equity** |  |  |  |  |  |  |  |
| Accumulated Funds | 924,912 | 902,787 | 911,820 | 1 | 1,479,271 | 1,425,699 | 1,355,476 |
| Asset Revaluation Surplus | 65,536 | 65,536 | 65,536 | - | 65,536 | 65,536 | 65,536 |
| **TOTAL EQUITY** | **990,448** | **968,323** | **977,356** | **1** | **1,544,807** | **1,491,235** | **1,421,012** |
|  |  |  |  |  |  |  |  |

“-“ denotes “nil”. “..” denotes that the figure rounds to zero.

Table 26: Canberra Health Services: Statement of Changes in Equity ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Opening Equity** |  |  |  |  |  |  |  |
| Opening Accumulated Funds | 894,633 | 913,385 | 902,787 | -1 | 911,820 | 1,479,271 | 1,425,699 |
| Opening Asset Revaluation  Surplus | 65,536 | 65,536 | 65,536 | - | 65,536 | 65,536 | 65,536 |
| **Balance at the Start of the**  **Reporting Period** | **960,169** | **978,921** | **968,323** | **-1** | **977,356** | **1,544,807** | **1,491,235** |
| **Comprehensive Result** |  |  |  |  |  |  |  |
| Operating Result | -48,496 | -63,060 | -68,649 | -9 | -78,750 | -79,867 | -80,197 |
| **Total Comprehensive Result** | **-48,496** | **-63,060** | **-68,649** | **-9** | **-78,750** | **-79,867** | **-80,197** |
| **Total Movement in Reserves** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Transactions Involving Owners**  **Affecting Accumulated**  **Funds** |  |  |  |  |  |  |  |
| Capital Injections | 80,120 | 52,462 | 77,682 | 48 | 51,387 | 26,295 | 9,974 |
| Net Assets Transferred from  Other Agencies | 0 | 0 | 0 | - | 594,814 | 0 | 0 |
|  |  |  |  |  |  |  |  |
| **Total Transactions Involving**  **Owners Affecting**  **Accumulated Funds** | **80,120** | **52,462** | **77,682** | **48** | **646,201** | **26,295** | **9,974** |
| **Closing Equity** |  |  |  |  |  |  |  |
| Closing Accumulated Funds | 924,912 | 902,787 | 911,820 | 1 | 1,479,271 | 1,425,699 | 1,355,476 |
| Closing Asset Revaluation  Surplus | 65,536 | 65,536 | 65,536 | - | 65,536 | 65,536 | 65,536 |
| **Balance at the end of the**  **Reporting Period** | **990,448** | **968,323** | **977,356** | **1** | **1,544,807** | **1,491,235** | **1,421,012** |

“-“ denotes “nil”. “..” denotes that the figure rounds to zero.

Table 27: Canberra Health Services: Cash Flow Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **CASH FLOWS FROM**  **OPERATING ACTIVITIES** |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Sale of Goods and Services  from Contracts with  Customers | 120,460 | 105,055 | 104,582 | .. | 106,629 | 108,815 | 112,377 |
| Grants and Contributions  Receipts | 1,311,559 | 1,370,779 | 1,417,241 | 3 | 1,471,251 | 1,509,672 | 1,544,636 |
| Goods and Services Tax Input  Tax Credits from the  Australian Taxation Office | 52,876 | 44,870 | 42,950 | -4 | 42,816 | 42,441 | 42,035 |
| Goods and Services Tax  Collected from Customers | 4,656 | 4,283 | 4,283 | - | 4,283 | 4,283 | 4,283 |
| Other | 21,052 | 10,592 | 10,767 | 2 | 10,913 | 11,027 | 11,176 |
| **Total Receipts from Operating**  **Activities** | **1,510,603** | **1,535,579** | **1,579,823** | **3** | **1,635,892** | **1,676,238** | **1,714,507** |
| **Payments** |  |  |  |  |  |  |  |
| Employee Payments | 1,022,606 | 1,076,958 | 1,136,909 | 6 | 1,156,336 | 1,189,788 | 1,218,532 |
| Supplies and Services | 386,198 | 368,057 | 374,655 | 2 | 396,907 | 404,173 | 412,840 |
| Purchased Services | 17,809 | 30,205 | 35,479 | 17 | 31,975 | 32,615 | 33,267 |
| Goods and Services Tax Paid to  Suppliers | 57,532 | 39,857 | 39,297 | -1 | 38,831 | 38,358 | 37,879 |
| Related to Cost of Goods Sold | 10,636 | 9,708 | 9,902 | 2 | 10,100 | 10,302 | 10,508 |
| Other | 2,092 | 0 | 0 | - | 0 | 0 | 0 |
| **Total Payments from**  **Operating Activities** | **1,496,873** | **1,524,785** | **1,596,242** | **5** | **1,634,149** | **1,675,236** | **1,713,026** |
| **Net Cash Inflows/(Outflows)**  **from Operating Activities** | **13,730** | **10,794** | **-16,419** | **-267** | **1,743** | **1,002** | **1,481** |
| **CASH FLOWS FROM**  **INVESTING ACTIVITIES** |  |  |  |  |  |  |  |
| **Payments** |  |  |  |  |  |  |  |
| Purchase of Property, Plant  and Equipment | 17,639 | 12,639 | 12,448 | -2 | 8,333 | 8,333 | 8,333 |
| Purchase of Capital Works | 70,789 | 48,156 | 56,285 | 17 | 51,387 | 26,295 | 9,974 |
| **Total Payments from Investing**  **Activities** | **88,428** | **60,795** | **68,733** | **13** | **59,720** | **34,628** | **18,307** |
| **Net Cash (Outflows) from**  **Investing Activities** | **-88,428** | **-60,795** | **-68,733** | **-13** | **-59,720** | **-34,628** | **-18,307** |
|  |  |  |  |  |  |  |  |

Table 27: Canberra Health Services: Cash Flow Statement ($’000) (Cont.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **CASH FLOWS FROM**  **FINANCING ACTIVITIES** |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Capital Injections | 80,120 | 52,462 | 77,682 | 48 | 51,387 | 26,295 | 9,974 |
| **Total Receipts from Financing**  **Activities** | **80,120** | **52,462** | **77,682** | **48** | **51,387** | **26,295** | **9,974** |
| **Payments** |  |  |  |  |  |  |  |
| Repayment of Lease  Liabilities ‑ Principal | 2,484 | 80 | 82 | 3 | 84 | 86 | 88 |
| Repayment of Borrowings | 386 | 0 | 0 | - | 0 | 0 | 0 |
| **Total Payments from**  **Financing Activities** | **2,870** | **80** | **82** | **3** | **84** | **86** | **88** |
| **Net Cash Inflows from**  **Financing Activities** | **77,250** | **52,382** | **77,600** | **48** | **51,303** | **26,209** | **9,886** |
| **Net Increase/(Decrease) in**  **Cash** | **2,552** | **2,381** | **-7,552** | **-631** | **-6,674** | **-7,417** | **-6,940** |
| **Cash at the Beginning of the**  **Reporting Period** | **34,799** | **37,351** | **39,732** | **4** | **32,180** | **25,506** | **18,089** |
| **Cash at the End of the**  **Reporting Period** | **37,351** | **39,732** | **32,180** | **-19** | **25,506** | **18,089** | **11,149** |

“-“ denotes “nil”. “..” denotes that the figure rounds to zero.

### Notes to the Controlled Budget Statements

Significant variations are as follows:

#### Operating Statement

* Sales of Goods and Services from Contracts with Customers:
* the decrease of $19.043 million from 2022-23 Budget to the 2022-23 estimated outcome is mainly due to the reclassification of highly specialised drugs program revenue to Grants and Contributions.
* Grants and Contributions:
* the increase of $61.235 million from 2022-23 Budget to the 2022-23 estimated outcome is mainly due to the reclassification of highly specialised drugs program revenue from Sales of Goods and Services from Contracts with Customers, funding provided in Budget Review to support the COVID‑19 public health response and additional ICT services provided by the Health Directorate to implement DHR Go‑Live; and
* the increase of $37.114 million from 2022-23 estimated outcome to 2023-24 Budget is due to new initiatives, the Government’s enterprise bargaining agreement and pay offer and the reprofiling of funding from 2022-23 to 2023-24. This is partially offset by a decrease in revenue associated with ceasing initiatives.
* Employee Expenses:
* the increase of $48.840 million from 2022-23 Budget to 2022-23 estimated outcome is mainly due to the Government’s enterprise bargaining agreement and pay offer and funding provided in Budget Review to support the COVID-19 public health response.
* the increase of $35.014 million from 2022-23 estimated outcome to 2023-24 Budget is due to new and continuing initiatives, the Government’s enterprise bargaining agreement and pay offer and higher workers compensation insurance premiums. This is partially offset by a decrease associated with ceasing initiatives.
* Supplies and Services:
* the decrease of $5.965 million from 2022-23 Budget to 2022-23 estimated outcome is mainly due to a partial reclassification of the private provider program and elective joint replacement program to Purchased Services. This decrease is partially offset by funding provided in Budget Review to support the COVID-19 public health response and additional ICT services provided by the Health Directorate to support DHR Go-Live.
* Purchased Services:
* the increase of $12.521 million from 2022-23 Budget to 2022-23 estimated outcome is due to a partial reclassification of the private provider program and elective joint replacement program from Supplies and Services; and
* the increase of $5.274 million from 2022-23 estimated outcome to 2023-24 Budget is mainly due to new initiative funding to support the Territory’s continued investment in elective surgery recovery.
* Operating Result:
* the negative operating results in all years largely reflects the forecast movement in employee entitlements and the impact of depreciation, particularly as a result of the Canberra Hospital Expansion - Critical Services Building asset transfer from Major Projects Canberra in 2024-25.

#### Balance Sheet

* Cash (current):
* the decrease of $7.552 million from 2022-23 estimated outcome to 2023-24 Budget is mainly due to higher than forecast workers compensation insurance premiums and employee expenses.
* Inventories (current):
* the increase of $17.391 million from 2022-23 Budget to 2022-23 estimated outcome is due to higher stock requirements related to the COVID-19 public health response.
* Capital Works in Progress (non-current):
* the increase of $12.437 million from 2022-23 Budget to 2022-23 estimated outcome is due to the accumulation of uncompleted capital works in progress as a result of equipment procurement delays, re-prioritisation of project works to address clinical operational priorities and diversion of resources to DHR activities; and
* the increase of $38.239 million from 2022-23 estimated outcome to 2023-24 Budget is due to reprofiling of the 2022-23 scheduled capital works program into 2023-24 Budget and forward estimates and funding for new initiatives.
* Employee Benefits (current and non-current):
* the increase of $20.853 million from 2022-23 Budget to 2022-23 estimated outcome is mainly due to the Government’s enterprise bargaining agreement and pay offer. This is partially offset by a decrease in employee leave entitlements due to the change in the present value factor.
* the increase of $7.601 million from 2022-23 estimated outcome to 2023-24 Budget is mainly due to the Government’s enterprise bargaining agreement and pay offer.

#### Statement of Changes in Equity and Cash Flow Statement

Variations in these Statements are explained in the notes above.

# ACT LOCAL HOSPITAL NETWORK

## Purpose

The ACT Local Hospital Network (LHN), established in accordance with the National Health Reform Agreement 2020-25, and managed in accordance with the Health (National Health Funding Pool and Administration) Act 2013, is administered by the Director-General of the ACT Health Directorate. The LHN is supported by the ACT Health Directorate’s staff.

The LHN receives funding from the Commonwealth, the ACT and other state and territory governments. Funding from other state and territory governments is mainly received from the NSW Government for patients accessing services from the surrounding NSW region.

## 2023-24 Priorities

The LHN will receive and distribute funding for public hospital services under the National Health Reform Agreement (NHRA) for the purchase of public hospital services.

In 2023-24, funding will be provided for the following new initiatives:

* boosting outpatient clinics to provide additional capacity to manage the increasing demand and improve access to outpatient appointments;
* first stage of operationalising the new Critical Services Building at Canberra Hospital, including transferring current services from the existing buildings, funding an additional operating theatre at Canberra Hospital, and establishing a new Medical Imaging service in the Clinical Services Building to expand 24/7 emergency services;
* increasing to a range of health care services at North Canberra Hospital, including additional medical beds and a package of measures aimed at freeing up inpatient beds to support the Emergency Department and better coordination of care, including after-hours and weekend provision of support services;
* funding to progress the Government’s commitment to deliver 60,000 elective surgeries over four years to 2024-25 and respond to the significant and unforeseen impacts caused by the operating theatre fires and impacts of COVID-19 over the previous two financial years;
* expanding paediatric services at Canberra Hospital to meet the needs of a rapidly expanding 0-17-year-old cohort in Canberra and the surrounding region;
* continuing the post-COVID-19 Recovery Clinic at the University of Canberra Hospital and the COVID-19 Care at Home program to respond to the remaining impacts of the pandemic in the community;
* investing in the Junior Medical Officer (JMO) workforce;
* continuing support for the Fitness to Drive Medical Clinic;
* supporting the short-term continuation of the second Police, Ambulance, Clinician Emergency Response (PACER) team to improve health outcomes for Canberrans experiencing mental health crises;
* funding for a feasibility study and early design of a safe assessment area in the North Canberra Hospital Emergency Department for mental health patients presenting with high-risk behaviours;
* establishing of an Adult Gender Service at Canberra Health Services; and
* supporting the continuation of the Fixated and Lone-Actor Grievance-Fuelled Violence Assessment Team (FLAG).

## Estimated Employment Levels

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

## Strategic Objectives and Indicators

### Strategic Objective 1: *Access – Providing the right service, at the right time, in the right place, by the right team – every time*

#### Strategic Indicator 1.1 - Reducing the wait list for elective surgery

This indicator measures the effectiveness of LHN funded Territory-wide surgical services in reducing the number of people waiting for planned surgery longer than clinically recommended.

Table 1: The number of patients waiting longer than clinically recommended timeframes for elective surgery

|  |  |  |  |
| --- | --- | --- | --- |
| Strategic Indicator | 2022-23 | 2022-23 | 2023-24 |
|  | **Target** | **Estimated Outcome** | **Target** |
| The number of patients waiting longer than clinically recommended timeframes for elective surgery 1,2 | 430 | n/a | 430 |

Note:

1. An Estimated Outcome was not available at the time of publication. Following the implementation of the Digital Health Record (DHR) in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. This indicator has been transferred from ACT Health Directorate to the LHN. There is no change to the target.

#### Strategic Indicator 1.2 – Care Close to Home

This indicator measures the Territory-wide activity of LHN funded care close to home.

Table 2: Number of separations with a Hospital in the Home (HITH) component to their stay.

|  |  |  |
| --- | --- | --- |
| Strategic Indicator | 2022-23 | 2023-24 |
|  | **Estimated Outcome** | **Target** |
| Number of separations with a HITH component to their stay 1,2 | n/a | >3,000 |

Note:

1. This is a new indicator in 2023-24. An Estimated Outcome was not available at the time of publication. Following the implementation of the Digital Health Record (DHR) in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. This measure is defined as patients that spent time in ward HOM (CHS) or HH\_CHC (CPHB or equivalent)).

## Output Classes

The LHN will receive funding under the NHRA and purchase public hospital services from Canberra Health Services and Tresillian Family Care Centres.

The NHRA commits the Commonwealth to fund public hospitals using Activity Based Funding where practicable using the National Efficient Price (NEP) determined by the Independent Health and Aged Care Pricing Authority (IHACPA). The NEP is based on the projected average cost of a National Weighted Activity Unit (NWAU). The LHN also receives block funding from the Commonwealth for services not in scope to be funded on an activity basis.

An NWAU is a measure of health service activity expressed as a common unit, against which the NEP is paid. It provides a way of comparing and valuing each public hospital service (whether it is an admission, emergency department presentation or outpatient episode), by weighting it for its clinical complexity. The average hospital service is worth one NWAU, the most intensive and expensive activities are worth multiple NWAU’s, while the simplest and least expensive activities are worth fractions of an NWAU. NWAU’s are reviewed and updated by the Commonwealth annually.

The 2023-24 National Efficient Price is $6,032 per NWAU.

### Output Class 1: ACT Local Hospital Network

Table 3: Output Class 1: ACT Local Hospital Network

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | 2022-23 | 2023-24 |
|  |  | **Estimated Outcome** | **Budget 1** |
|  |  | **$'000** | **$'000** |
| Total Cost |  | 1,705,154 | 1,719,139 |
| Controlled Recurrent Payments |  | 1,039,215 | 1,051,992 |

**Note:**

1. The increase in the 2023-24 Budget reflects indexation and growth in services, offset by reduced time-limited funding in responding to the COVID-19 pandemic, including Commonwealth funding under the National Partnership on COVID‑19 Response.

## Accountability Indicators

### Output Class 1: ACT Local Hospital Network

Table 4: Accountability Indicators

|  |  |  |  |
| --- | --- | --- | --- |
|  | 2022-23  Target | 2022-23  Estimated Outcome | 2023-24  Target |
| Performing more elective surgery |  |  |  |
| 1. Number of elective surgeries performed 1,2 | 14,800 | n/a | 15,500 |
|  |  |  |  |
| Percentage of ACT elective surgery patients admitted for surgery within clinically recommended timeframes, by triage category |  |  |  |
| 1. Percentage of Category 1 elective surgery patients admitted for surgery within clinically recommended timeframes (30 days) 1 | 100% | n/a | 100% |
| 1. Percentage of Category 2 elective surgery patients admitted for surgery within clinically recommended timeframes (90 days) 1 | 80% | n/a | 80% |
| 1. Percentage of Category 3 elective surgery patients admitted for surgery within clinically recommended timeframes (365 days) 1 | 93% | n/a | 93% |
|  |  |  |  |
| National Weighted Activity Units | **NWAU{22}** |  | **NWAU{23}** |
| 1. Admitted Services 1,3 | 109,253 | n/a | - |
| 1. Non-admitted Services 1,3 | 28,527 | n/a | - |
| 1. Emergency Services 1,3 | 19,525 | n/a | - |
| 1. Acute Admitted Mental Health Services 1,3 | 10,812 | n/a | - |
| 1. Sub-Acute Services 1,3 | 14,715 | n/a | - |
| 1. Total in Scope 1,3 | 182,832 | n/a | 187,173 |
|  |  |  |  |
| Performance Monitoring |  |  |  |
| 1. Funding and performance agreements in place with all ACT Local Hospital Network non-government providers 4 | 100% | 100% | 100% |
|  |  |  |  |

Notes:

1. An Estimated Outcome was not available at the time of publication. Following the implementation of the Digital Health Record (DHR) in early November 2022, processes for the collection and collation of health service data are still under development. The Health Directorate and Canberra Health Services have agreed that further refinement and quality assurance is required prior to releasing this data. With the wealth of additional data provided by the new DHR, it is imperative for additional quality assurance and validation on this data before publication. This will ensure our public hospital data provides trustworthy information and evidence about the health and welfare of all ACT residents.
2. This indicator has been transferred from ACT Health Directorate to the LHN.
3. Activity purchased by the ACT LHN is consistent with the criteria in the National Health Reform Agreement. 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 {23} is the currency as defined by the Independent Health and Aged Care Pricing Authority (IHACPA) in the National Price Determination 2023-24. NWAU {23} is not directly comparable to NWAU {22}. These measures report activity that meets the IHACPA's criteria for inclusion on the ‘General List of In-Scope Public Hospital Services’.
4. Canberra Health Services (CHS) is excluded from this measure as the mechanism to monitor CHS funding and performance is through the CHS Budget Statements.

## Changes to Appropriation

Table 5: Changes to appropriation – Controlled Recurrent Payments ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **2022-23 Budget** | 1,006,645 | 995,314 | 979,273 | 964,381 | 926,902 |
| **2nd Appropriation** |  |  |  |  |  |
| Continuing the COVID-19 public health support package | 35,690 | 0 | 0 | 0 | 0 |
| Establishing a Wellbeing Fund across ACT Public Health Services | 1,415 | 0 | 0 | 0 | 0 |
| More specialist cancer nurses | 111 | 400 | 406 | 415 | 424 |
| New location for the Child and Adolescent Mental Health Service | 211 | 324 | 197 | 203 | 210 |
| **2023-24 Budget Policy Decisions** |  |  |  |  |  |
|  |  |  |  |  |  |
| Better care for our community |  |  |  |  |  |
| Measures to reduce harm across the community | 0 | 111 | 153 | 158 | 162 |
| Second Police, Ambulance and Clinician Early Response team | 0 | 359 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| Improving Canberra’s health infrastructure |  |  |  |  |  |
| Establishing a second Safe Haven | 0 | 0 | 47 | 192 | 197 |
| Expanding and upgrading endoscopy services | 0 | 0 | 5 | 5 | 119 |
| Expanding health centres across the city | 0 | 215 | 30 | 5 | 5 |
|  |  |  |  |  |  |
| Investing in public health care |  |  |  |  |  |
| Boosting the workforce and operationalising the Critical Services Building | 0 | 8,277 | 36,883 | 37,328 | 38,197 |
| Continuing to deliver more elective surgeries | -2,976 | 6,717 | 0 | 0 | 0 |
| Expanding capacity at North Canberra Hospital | 0 | 3,193 | 3,633 | 3,718 | 3,797 |
| Expanding paediatric services in the ACT |  | 2,673 | 4,458 | 4,277 | 4,388 |
| Managing the ongoing impact of COVID-19 and other emerging health threats | 0 | 1,939 | 0 | 0 | 0 |
| More specialist medical and paediatric outpatient services | 0 | 1,031 | 1,052 | 2,308 | 2,356 |
|  |  |  |  |  |  |
| Supporting our health workforce |  |  |  |  |  |
| Boosting wages for Canberra Hospital cleaners and planning for the future | 0 | 953 | 1,861 | 1,907 | 1,955 |
| Delivering better support for our Junior Medical Officers | 0 | 2,375 | 3,054 | 3,145 | 0 |
| Safety systems upgrades to our public health services | 0 | 0 | 23 | 54 | 55 |
|  |  |  |  |  |  |
| Community Sector Indexation | 0 | 542 | 0 | 0 | 0 |
| Drug and Alcohol Sentencing List | 0 | 2,351 | 2,428 | 2,506 | 2,575 |
| Enhancing specialist health services for LGBTIQ+ Canberrans | 0 | 919 | 1,283 | 1,441 | 1,557 |
| Establishing a Centre of Excellence for older Canberrans | 0 | 630 | 326 | 0 | 0 |
| Improving assessments for driver safety | 0 | 391 | 403 | 0 | 0 |
| More support for the Fixated Lone Actor Grievance Fuelled Violence (FLAG) Assessment Team | 0 | 309 | 306 | 315 | 323 |
| Planning to implement the Voluntary Assisted Dying model | 0 | 277 | 72 | 0 | 0 |
|  |  |  |  |  |  |
| Savings |  |  |  |  |  |
| Broadening the ACT Public Service flexibility | 0 | -27 | -28 | -31 | -32 |
| Investing in our digital future - ICT costs and services | 0 | -1,498 | -1,589 | -1,689 | -1,786 |
| Workers’ compensation | 0 | -3,737 | 0 | 0 | 0 |
|  |  |  |  |  |  |

Table 5: Changes to appropriation – Controlled Recurrent Payments ($’000) - continued

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
| Commonwealth Grant - Encourage more clinical trials in Australia | 150 | 150 | 150 | 0 | 0 |
| Commonwealth Grant - Medicare Urgent Care Clinics | 0 | 2,451 | 2,126 | 2,160 | 0 |
| Commonwealth Grant - Primary Care Pilot | 0 | 1,550 | 1,550 | 0 | 0 |
| Commonwealth Grant - Public Dental Services for Adults | 192 | 967 | 967 | 0 | 0 |
| Commonwealth Grant - Specialist Dementia | -112 | 0 | 0 | 0 | 0 |
| Commonwealth Grant - Surge Capacity for BreastScreen Australia | 29 | 116 | 0 | 0 | 0 |
| Commonwealth Grant - World-class newborn bloodspot screening program | 90 | 110 | 110 | 130 | 0 |
| Enterprise Agreement Bargaining and Pay Offer | 0 | 21,601 | 42,422 | 62,067 | 71,865 |
| Revised Indexation Parameters | 0 | -230 | 333 | 352 | 33,033 |
| Revised Funding Profile - Canberra Hospital operational commissioning | -1,700 | 1,700 | 0 | 0 | 0 |
| Transfer - Canberra Hospital Expansion Project from MPC | 0 | 0 | 0 | 169 | 338 |
| Transfer - ICT expenses from CHS to ACTHD | -530 | -461 | -968 | -1,004 | -900 |
|  |  |  |  |  |  |
| **2023-24 Budget** | **1,039,215** | **1,051,992** | **1,080,966** | **1,084,512** | **1,085,740** |

Table 6: Changes to appropriation – Capital Injection ($’000)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **2022-23 Estimated Outcome** | **2023-24 Budget** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
|  |  |  |  |  |  |
| **2022-23 Budget** | **0** | **0** | **0** | **0** | **0** |
|  |  |  |  |  |  |
| **2023-24 Budget Technical Adjustments** |  |  |  |  |  |
| Enterprise Agreement Bargaining and Pay Offer | 0 | 3,588 | 0 | 0 | 0 |
|  |  |  |  |  |  |
| **2023-24 Budget** | **0** | **3,588** | **0** | **0** | **0** |

## Financial Statements

Presentational changes have been made to streamline the financial statements and the 2022‑23 Budget column also reflects this change. These changes will be consistent with future annual financial statements and ensure comparability of the annual financial statements with the budget estimates as required under section 27 of the *Financial Management Act 1996*.

Table 7: ACT Local Hospital Network: Operating Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022­23 Budget** | **2022­23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024­25 Estimate** | **2025­26 Estimate** | **2026­27 Estimate** |
| **Income** |  |  |  |  |  |  |  |
| Controlled Recurrent Payments | 1,006,645 | 1,039,215 | 1,051,992 | 1 | 1,080,966 | 1,084,512 | 1,085,740 |
| Sale of Goods and Services from Contracts with Customers | 119,124 | 119,124 | 122,102 | 2 | 124,544 | 127,658 | 130,849 |
| Grants and Contributions Revenue | 531,911 | 543,227 | 545,045 | .. | 580,473 | 618,204 | 658,387 |
| **Total Income** | **1,657,680** | **1,701,566** | **1,719,139** | **1** | **1,785,983** | **1,830,374** | **1,874,976** |
| **Expenses** |  |  |  |  |  |  |  |
| Grants and Purchased Services | 1,639,546 | 1,679,677 | 1,710,093 | 2 | 1,776,349 | 1,820,114 | 1,864,049 |
| Payments to ACT Government Agencies | 18,134 | 25,477 | 9,046 | -64 | 9,634 | 10,260 | 10,927 |
| **Total Expenses** | **1,657,680** | **1,705,154** | **1,719,139** | **1** | **1,785,983** | **1,830,374** | **1,874,976** |
| **Operating Result** | **0** | **-3,588** | **0** | **100** | **0** | **0** | **0** |
| **Total Comprehensive Result** | **0** | **-3,588** | **0** | **100** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |

Table 8: ACT Local Hospital Network: Balance Sheet ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Current Assets** |  |  |  |  |  |  |  |
| Cash and Cash Equivalents | 2,178 | 2,171 | 2,171 | - | 2,171 | 2,171 | 2,171 |
| Receivables | 65,865 | 55,430 | 55,430 | - | 55,430 | 55,430 | 55,430 |
| **Total Current Assets** | **68,043** | **57,601** | **57,601** | **-** | **57,601** | **57,601** | **57,601** |
| **Non-Current Assets** |  |  |  |  |  |  |  |
| **Total Non-Current Assets** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **TOTAL ASSETS** | **68,043** | **57,601** | **57,601** | **-** | **57,601** | **57,601** | **57,601** |
| **Current Liabilities** |  |  |  |  |  |  |  |
| Payables | 42,619 | 48,996 | 45,408 | -7 | 45,408 | 45,408 | 45,408 |
| Other Liabilities | 2,584 | 0 | 0 | - | 0 | 0 | 0 |
| **Total Current Liabilities** | **45,203** | **48,996** | **45,408** | **-7** | **45,408** | **45,408** | **45,408** |
| **Non-Current Liabilities** |  |  |  |  |  |  |  |
| **Total Non-Current Liabilities** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **TOTAL LIABILITIES** | **45,203** | **48,996** | **45,408** | **-7** | **45,408** | **45,408** | **45,408** |
| **NET ASSETS** | **22,840** | **8,605** | **12,193** | **42** | **12,193** | **12,193** | **12,193** |
| **Equity** |  |  |  |  |  |  |  |
| Accumulated Funds | 22,840 | 8,605 | 12,193 | 42 | 12,193 | 12,193 | 12,193 |
| **TOTAL EQUITY** | **22,840** | **8,605** | **12,193** | **42** | **12,193** | **12,193** | **12,193** |
|  |  |  |  |  |  |  |  |

Table 9: ACT Local Hospital Network: Statement of Changes in Equity ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Budget**  **at 30/6/23** | **Estimated Outcome at 30/6/23** | **Budget**  **at 30/6/24** | **Var**  **%** | **Estimate**  **at 30/6/25** | **Estimate**  **at 30/6/26** | **Estimate**  **at 30/6/27** |
| **Opening Equity** |  |  |  |  |  |  |  |
| Opening Accumulated Funds | 22,840 | 12,193 | 8,605 | -29 | 12,193 | 12,193 | 12,193 |
| **Balance at the Start of the Reporting Period** | **22,840** | **12,193** | **8,605** | **-29** | **12,193** | **12,193** | **12,193** |
| **Comprehensive Income** |  |  |  |  |  |  |  |
| Operating Result | 0 | -3,588 | 0 | 100 | 0 | 0 | 0 |
| **Total Comprehensive Result** | **0** | **-3,588** | **0** | **100** | **0** | **0** | **0** |
| **Movement in Asset Revaluation Surplus** |  |  |  |  |  |  |  |
| **Total Movement in Reserves** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
|  |  |  |  |  |  |  |  |
| **Transactions Involving Owners Affecting Accumulated Funds** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| Capital Injections | 0 | 0 | 3,588 | # | 0 | 0 | 0 |
|  |  |  |  |  |  |  |  |
| **Total Transactions Involving Owners Affecting Accumulated Funds** | **0** | **0** | **3,588** | **#** | **0** | **0** | **0** |
| **Closing Equity** |  |  |  |  |  |  |  |
| Closing Accumulated Funds | 22,840 | 8,605 | 12,193 | 42 | 12,193 | 12,193 | 12,193 |
|  |  |  |  |  |  |  |  |
| **Balance at the end of the Reporting Period** | **22,840** | **8,605** | **12,193** | **42** | **12,193** | **12,193** | **12,193** |

Table 10: ACT Local Hospital Network: Cash Flow Statement ($’000)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **2022-23 Budget** | **2022-23 Estimated Outcome** | **2023-24 Budget** | **Var**  **%** | **2024-25 Estimate** | **2025-26 Estimate** | **2026-27 Estimate** |
| **CASH FLOWS FROM OPERATING ACTIVITIES** |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Controlled Recurrent Payments | 1,006,645 | 1,039,215 | 1,051,992 | 1 | 1,080,966 | 1,084,512 | 1,085,740 |
| Sale of Goods and Services | 119,124 | 119,124 | 122,102 | 2 | 124,544 | 127,658 | 130,849 |
| Grants and Contributions Receipts | 531,911 | 543,227 | 545,045 | .. | 580,473 | 618,204 | 658,387 |
| Goods and Services Tax Input Tax Credits from the Australian Taxation Office | 24,986 | 24,986 | 25,425 | 2 | 25,877 | 26,524 | 27,187 |
| Other | 119,124 | 119,124 | 122,102 | 2 | 124,544 | 127,658 | 130,849 |
| **Total Receipts from Operating Activities** | **1,801,790** | **1,845,676** | **1,866,666** | **1** | **1,936,404** | **1,984,556** | **2,033,012** |
| **Payments** |  |  |  |  |  |  |  |
| Grants and Purchased Services | 1,657,680 | 1,701,566 | 1,722,727 | 1 | 1,785,983 | 1,830,374 | 1,874,976 |
| Goods and Services Tax Paid to Suppliers | 24,986 | 24,986 | 25,425 | 2 | 25,877 | 26,524 | 27,187 |
| Other | 119,124 | 119,124 | 122,102 | 2 | 124,544 | 127,658 | 130,849 |
| **Total Payments from Operating Activities** | **1,801,790** | **1,845,676** | **1,870,254** | **1** | **1,936,404** | **1,984,556** | **2,033,012** |
| **Net Cash Inflows/(Outflows) from Operating Activities** | **0** | **0** | **-3,588** | **#** | **0** | **0** | **0** |
| **CASH FLOWS FROM FINANCING ACTIVITIES** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **Receipts** |  |  |  |  |  |  |  |
| Capital Injections | 0 | 0 | 3,588 | # | 0 | 0 | 0 |
| **Net Cash Inflows/(Outflows) from Financing Activities** | **0** | **0** | **3,588** | **#** | **0** | **0** | **0** |
| **Net Increase/(Decrease) in Cash and Cash Equivalents** | **0** | **0** | **0** | **-** | **0** | **0** | **0** |
| **Cash and Cash Equivalents at the Beginning of the Reporting Period** | **2,178** | **2,171** | **2,171** | **-** | **2,171** | **2,171** | **2,171** |
| **Cash and Cash Equivalents at the End of the Reporting Period** | **2,178** | **2,171** | **2,171** | **-** | **2,171** | **2,171** | **2,171** |

### Notes to the Controlled Budget Statements

Significant variations are as follows:

#### Operating Statement

controlled recurrent payments (CRP):

* the increase of $32.570 million in the estimated outcome from the original budget is mainly due to the COVID-19 public health support package approved through the 2022‑23 Budget Review; and
* the increase of $12.777 million in the 2023-24 Budget from the 2022-23 estimated outcome is mainly due to indexation and new initiatives, offset by ceasing time-limited programs.

grants and contributions revenue: the increase of $11.316 million in the estimated outcome from the original budget is mainly due to the extension of the *National Partnership on COVID-19 Response* agreement with the Commonwealth from September to December 2022.

grants and purchased services:

* the increase of $40.131 million in the estimated outcome from the original budget is mainly due to the COVID-19 public health support package approved through the 2022‑23 Budget Review, including Commonwealth contributions; and
* the increase of $30.416 million in the 2023-24 Budget from the 2022-23 estimated outcome is mainly due to indexation and new initiatives, offset by ceasing time-limited programs.

Payments to ACT Government Agencies:

* the increase of $7.343 million in the estimated outcome from the original budget is mainly due to the COVID-19 public health support package approved through the 2022‑23 Budget Review, including Commonwealth contributions; and
* the decrease of $16.431 million in the 2023-24 Budget from the 2022-23 estimated outcome is due to the cessation of the *National Partnership on COVID-19 Response*.

#### Balance Sheet

receivables: the decrease of $10.435 million in the estimated outcome from the original budget is mainly due to the flow-on effect of the 2021-22 audited outcome.

#### Statement of Changes in Equity and Cash Flow Statement

Variations in these Statements are explained in the notes above.