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Tele

File Ref:

CAPS496

Ms Leanne Linard MP
Chair
Health and Ambulance Services Committee
Queensland Parliamentary Service
Parliament House
Cnr George and Alice Streets
BRISBANE QLD 4000

Dear Mrs Linard

I refer to the call for submissions from the Health and Ambulance Services Committee to the Health Legislation (Waiting List Integrity) Amendment Bill 2015, hereafter referred to as the Bill.

I understand the abovementioned Bill was tabled on 19 May 2015, by the Member for Caloundra, Mr Mark McArdle. The Bill arose as a result of the previous Queensland Government's announcement of its intention to create an independent body to audit clinical waiting times and publish this information in an open and transparent way. The Bill is intended to provide peace of mind for patients in the Queensland health system through independent auditing and publication of waiting times.

I would like to assure the Committee that Queensland Health is transparent in its activities and is a national leader in health performance reporting. Publishing timely, accurate and relevant information of the activity and performance of local hospitals provides a complete and open picture to the community to which the Government is accountable. This transparency also drives improvement within the Hospital and Health Services (HHSs). I am pleased to say there are more than 1,000 measures published on the Queensland Health Hospital Performance website.

The Department of Health through the Clinical Access and Redesign Unit (CARU) manages key statewide data collections, including elective surgery and specialist outpatients, to enable meaningful analysis to inform effective decision making. The collections have been developed and maintained to ensure that appropriate data is captured to fulfil the business needs of HHSs and the Department.

Please find attached a copy of a selection of performance data, including waiting time data that is available on the Queensland Health website at <https://www.health.qld.gov.au/system-governance/performance/>

This data is captured from an appropriate selection of hospitals, health services and information systems, and capturing sufficient data elements to monitor and evaluate services with relevant frequency. These data are collated and stored centrally in a supported and secure technical environment with efficient architecture, indexing and reference data, and is translated into information and knowledge that is relevant to a range of stakeholders.

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Structural changes to Queensland Health

I also understand that the Bill responds to a commitment sought by the Australian Medical Association Queensland (AMAQ) in 2012 to provide independent oversight of wait list reporting. In that regard, I would draw the Committee's attention to the systemic changes that have occurred to Queensland Health in the subsequent period. In particular, the division of Queensland Health system has been organised into independent HHSs and the Department of Health has become a defining characteristic of our health system. The Department directly provides health care services, and is legally independent of the HHSs that do, eliminating conflicts of interest that may have been of concern to the AMAQ in 2012.

The Committee may also note that the Department is currently implementing the recommendations of the Hunter Review. This implementation will further define and strengthen the role of the Department as the independent system manager, and provide for clearer lines of accountability between HHSs and the Department of Health. The review provides new directions to improve the Department's role in assessing the performance of the HHSs, and I see the use of wait time information as central to this task.

Potential duplication

I would also like to draw the committee's attention to potential duplication that may result from the arrangements established by the Bill. In particular, the duplication results from the Department of Health operating as a system manager and the proposal for the Health Ombudsman to also monitor waiting time data.

The Queensland Audit Office (QAO) provides the Parliament with an independent auditing function through reporting on the efficiency and effectiveness of any aspect of public sector finances and administration.

Other Issues

The Department is also concerned at the lack of specificity in the Bill, including:

- apparent power for examination in the accuracy of the data without details of the mechanisms and powers by which OHO could deliver this objective; and
- format, method of submission and scope of data to be provided by HHSs, in particular 244A (d) which allows for the Bill to be expanded to 'other data' without clear boundaries.

The Department is currently reviewing the processes for collecting, validating and reporting elective surgery and specialist outpatient information. I will be able to provide the committee with copies of these when they are complete.

In conclusion, the Department is concerned the Bill may increase costs and reduce efficiency as a result of duplication, without necessarily improving the quality, integrity or transparency of the data. I, and my officers, would welcome the opportunity to further contribute to the deliberations of the committee.

Should you require further information, Department of Health's contact is Mrs Narelle Doss, Director, Clinical Access and Redesign Unit, on telephone 3328 9352.

Yours sincerely



Michael Walsh
Director-General

8-7-2015



Home > Health system and governance > Performance

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Performance

Policies and standards

Legislation

Strategic direction

Health system

Industry licensing and regulation

Health records and privacy

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- Hospital performance
- Hospital activity indicators

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Information and data released by the department as part of our commitment to openness and transparency.

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Patient experience surveys on the quality of services delivered in our Emergency Departments.

Breastscreen and oral health data

Breastscreen and oral health activity and performance data is available via our [Hospital Performance portal](#).

Last updated: 10 June 2014

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- Data

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