LEGISLATIVE COUNCIL STANDING COMMITTEE ON ESTIMATES AND FINANCIAL OPERATIONS

QUESTIONS PRIOR TO HEARING

Mental Health Commission Hon Nick Goiran MLC asked:

- 5) I refer to p.269 of Budget Paper No.2, Volume 1, where it is stated that the Government is investing \$26.4 million to commence the recommendations of the Sustainable Health Review, and I note on page 3 of the Sustainable Health Review that WA's suicide rate was approximately 20 per cent higher than the national average in 2016 and has been consistently higher than the national average since 2007, and I ask:
 - b) Which stakeholders has the Minister consulted in 2018/19 on this issue; and Answer:

The implementation of Suicide Prevention 2020, which was initiated with extensive community consultation, has been in conjunction with a wide range of State Government departments and the Commonwealth Government, Local Government, non-government organisations and peak industry bodies (for workplace suicide prevention initiatives).

Core stakeholders across Government agencies include:

- Western Australian Department of Health
- Western Australian Department of Education
- Western Australia Police
- Department of Communities
- Commissioner for Children and Young People
- State Coroner's Office
- State Ombudsman
- WA Primary Health Alliance
- Commonwealth Department of Prime Minister and Cabinet

Core stakeholders across non-government organisations include:

- Western Australian Mental Health Association
- Western Australian Network of Alcohol and other Drug Agencies
- Consumers of Mental Health Western Australia
- Helping Minds
- Aboriginal Health Council of Western Australia
- The multiple organisations which currently hold contracts under Suicide Prevention 2020

Suicide Prevention 2020 is subject to ongoing evaluation, through which regular feedback from stakeholders is received.

c) Which stakeholders does the Minister plan to consult on this issue in 2019/20? Answer:

The additional funding awarded to Suicide Prevention 2020 will see the strategy continue until 31 December 2020, during which time a new Suicide Prevention Action Plan will be developed and submitted for consideration as part of the 2020/21 budget process. Broad and contemporary State-wide consultation will be undertaken as part of development of the new Suicide Prevention Action Plan.

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The new Suicide Prevention Action Plan will also be developed in line with framework outlined in the Fifth National Mental Health and Suicide Prevention Plan, which has been endorsed by the State Government via the Council of Australian Governments Health Council.

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Page number 2 of 2 pages

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LEGISLATIVE COUNCIL STANDING COMMITTEE ON ESTIMATES AND FINANCIAL OPERATIONS 2019-20 BUDGET ESTIMATES HEARINGS

QUESTIONS PRIOR TO HEARING

Mental Health Commission The Committee asked:

1) We refer to Budget Paper No. 2, p 305, Statement of Cashflows, and ask for a project-level breakdown of Royalties for Regions funded projects for each Fund?

Answer:

The following two tables reflect the breakdown of Royalties for Regions funded programs for the Regional Community Services Fund and the Regional Infrastructure and Headworks Fund.

	2017-18	2018-19	2018-19	2019-20	2020-21	2021-22	2022-23
PROGRAM	Actual	Budget	Estimated	Budget	Forward	Forward	Forward
FROGRAM		Estimate	Actual	Estimate	Estimate	Estimate	Estimate
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Regional Community Services							
Fund							
North West Drug and Alcohol							
Support Program	6,100	6,300	5,932	6,500	6,500	6,686	6,877
Step Up/Step Down Mental Health							
Facilities:							
Bunbury – Expensed Capital	-	230	1,817	2,193	-	-	-
Bunbury – Operating	_	2,374	-	1,362	2,176	2,230	2,286
Geraldton – Operating	-	-	_	100	-	1,800	2,465
Kalgoorlie – Operating	-	-		_	1,658	2,550	2,614
Karratha – Expensed Capital		230	1,032	4,641	_	-	-
Karratha – Operating	-	2,759	_	753	2,528	2,591	2,656
South West Residential							
Rehabilitation Service	_	1,307	1,307	2,640	2,666	2,693	_
Kimberley Residential Rehabilitation							
Service – Planning	200	-	-	77.54	-	-	-
Ice Breakers Program – Albany	180	180	180	-	-	_	-
3 Tier Youth Mental Health							
Program - GP Down South	133	133	133	133	-	-	-
Cash funding from Regional							
Community Services Fund	6,613	13,513	10,401	18,222	15,528	18,550	16,898

Page number 1 of 3 pages

	2017-18	2018-19	2018-19	2019-20	2020-21	2021-22	2022-23
PROGRAM	Actual	Budget	Estimated	Budget	Forward	Forward	Forward
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	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Regional Infrastructure and							
Headworks Fund							
Step Up/Step Down Mental Health							
Facilities:							
Geraldton –Capital	-	-	_	1,508	4,176	246	_
Kalgoorlie – Expensed Capital	-	976	1,280	4,075	284	-	_
Cash funding from Regional							
Infrastructure and Headworks							
Fund	-	976	1,280	5,583	4,460	246	

2) On non-operational special purpose accounts:

a) How many has your agency established under sections 16(1)(b) to (d) of the Financial Management Act 2006;

Answer:

The Mental Health Commission does not have a non-operational special purpose account. However, the Mental Health Commission does report one operational special purpose account (State Managed Fund) in the Annual Report and Budget Paper.

- b) In a table include:
 - i) the name of each account;
 - ii) when it was established;
 - iii) each account's purpose;
 - iv) balance as at 9 May 2019; and
 - v) the last 12 months of activity;

Answer:

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(i) Name of account	State Managed Fund Account
(ii) When it was established	Established August 2013 under section 16(1)(b) of the <i>Financial Management Act 2006</i>
(iii) Purpose of account	The purpose of the special purpose account is to hold money received by the Mental Health Commission, for the purposes of health funding under the National Health Reform Agreement that is required to be undertaken in the State through a State Managed Fund.
(iv) Balance as at 9 May 2019	Nil
(v) Last 12 months activity	Service purchased from Department of Health Area Health Services for non-Activity Based Funding activities such as Community Mental Health and Teaching, Training and Research.

Page number 2 of 3 pages

SILL C 5/6/79 MINISTER c) Describe the (1) governance mechanisms and (2) safeguards that are in place to meet the demands of section 16(2) of the Financial Management Act 2006; and

Answer:

The Mental Health Commission created a separate accounting entity and cost centres to receive funding from the State Pool Account and purchasing services in accordance with the purpose of the special purpose account.

Any payments from the special purpose account are authorised in accordance with Commissioning Service Agreements between the Mental Health Commission and the Health Service Providers within the Department of Health, and approved by the Chief Finance Officer of the Mental Health Commission.

- d) When was your agency last audited by the Office of the Auditor General primarily about special purpose accounts:
 - i) If applicable, what were the findings of that audit?

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Answer:

The Mental Health Commission has not had an audit primarily about special purpose accounts, however the special purpose account is audited as part of the Mental Health Commission annual financial statement audit by the Office of the Auditor General.

LEGISLATIVE COUNCIL STANDING COMMITTEE ON ESTIMATES AND FINANCIAL OPERATIONS 2019-20 BUDGET ESTIMATES HEARINGS

QUESTIONS PRIOR TO HEARING

Mental Health Commission Hon Martin Aldridge MLC asked:

- 5) I refer to page 300, subheading 2. Hospital Bed-Based Services and I ask:
 - a) Why is there an increase in net cost to these services?

Answer:

The net cost of services for Hospital Bed Based services increases by \$5.4 million from \$277.53 million (2018-19 Estimated Actual) to \$282.93 million (2019-20 Budget Target). The increase is due to an increase of \$9.76 million in Total Cost of Services partially offset by an increase in Income of \$4.36 million.

The increase in the Total Cost of Services budget of \$9.76 million is primarily due to increases related to purchasing Mental Health Services from the Health Service Providers which is funded by both the State Government and Commonwealth funding.

The increase in the Income budget of \$4.36 million is primarily related to the increased Commonwealth funding received under the National Health Reform Agreement.

b) The number of FTE indicates a decrease by 2 FTEs, why is there a decrease to these services?

Answer:

The FTE relates to the Mental Health Commission staff who either directly or indirectly undertake commissioning and contracting of services to the Health Service Providers who provide mental health services. The reduction of two FTEs primarily relates to the corporate support staff and there is no impact on frontline service delivery.

c) Where will these FTE cuts be made, will they be in regional WA?

Answer:

The Mental Health Commission staff is metropolitan based. The reduction of FTEs primarily relates to support functions within the Commission.

d) Considering these FTE cuts, how will the Minister ensure that patients using Hospital Bed-Based services will be accessing safe and high quality care?

Answer

The FTE reduction identified for Hospital Bed-Based Services do not relate to Hospital based staff and therefore there will be no impact to the level of care.

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