



LEGISLATIVE COUNCIL

Legislative Council Government Administration Committee 'A'

MEDIA ADVISORY

2 July 2021

Re-establishment of the Inquiry into Rural Health Services in Tasmania

On 21 December 2020, Government Administration Committee 'A' resolved to commence an inquiry into rural health services in Tasmania, and on 21 January 2021 the Committee resolved to establish a sub-committee to conduct this inquiry. The work of the inquiry commenced and 64 submissions were received.

Due to the State Government election being called in March 2021, the work of the inquiry was suspended until Parliament resumed in June. The sub-committee was re-established on 29 June 2021 with slightly revised terms of reference, which now includes mental health services for Tasmanians living in rural and remote Tasmania. This broadening of the terms of reference was enabled by the Ministerial reshuffle that occurred meaning the new Minister for Health, Mr Jeremy Rockliff MP, now also holds responsibility for the Mental Health and Wellbeing portfolio.

The current Terms of Reference of the inquiry are attached.

The sub-committee wishes to confirm that all submissions received by the inquiry prior to the prorogation of Parliament have been accepted into evidence and have been published on the webpage (https://www.parliament.tas.gov.au/ctee/Council/GovAdminA_RuralHealth.htm).

The sub-committee is writing to all witnesses who prepared a submission to the inquiry, to provide an opportunity to add any additional information to their submission as a result of the expansion of the terms of reference to include mental health services. An extension will be granted until COB Friday 13 August 2021 for additional information to be provided to the inquiry.

Members of the Committee are:

Hon Nick Duigan MLC
Hon Ruth Forrest MLC (Inquiry Chair)
Hon Mike Gaffney MLC
Hon Sarah Lovell MLC
Hon Bastian Seidel MLC (Inquiry Deputy Chair)

For further information: Hon Ruth Forrest MLC, Inquiry Chair - 0419 879 524

Terms of Reference:

To inquire into and report on health outcomes and access to community health and hospital services for Tasmanians living in rural and remote Tasmania, with particular regard to:

1. Health outcomes, including comparative health outcomes;
2. Availability and timeliness of health services including:
 - a. Ambulance services;
 - b. Primary care, allied health and general practice services;
 - c. Non-GP specialist medical services;
 - d. Hospital services;
 - e. Maternity, maternal and child health services;
 - f. Pain management services;
 - g. Palliative care services;
 - h. Pharmacy services;
 - i. Dental services;
 - j. Patient transport services;
 - k. 'After hours' health care;
 - l. Indigenous and culturally and linguistically diverse (CALD) communities;
 - m. *Mental health services*; and
 - n. Other.
3. Barriers to access to:
 - a. Ambulance services;
 - b. Primary care, allied health and general practice services;
 - c. Non-GP specialist medical services;
 - d. Hospital services;
 - e. Maternity, maternal and child health services;
 - f. Pain management services;
 - g. Palliative care services;
 - h. Pharmacy services;
 - i. Dental services;
 - j. Patient transport services;
 - k. 'After hours' health care;
 - l. Indigenous and culturally and linguistically diverse (CALD) communities;
 - m. *Mental health services*; and
 - n. Other
4. Planning systems, projections and outcomes measures used to determine provision of community health and hospital services;
5. Staffing of community health and hospital services;
6. Capital and recurrent health expenditure;
7. Referral to tertiary care including:
 - a. Adequacy of referral pathways;
 - b. Out-of-pocket expenses;
 - c. Wait-times; and
 - d. Health outcome impact of delays accessing care;
8. Availability, functionality and use of telehealth services; and
9. Any other matters incidental thereto.