

4 Expenditure by Victorian health authorities

4.1 Introduction

Victoria is the second largest in terms of population, and the second smallest geographically, of the six Australian States. Consequently, Victoria is the most densely populated of the States. In 1999–00 its total population was 4.8 million.

Most public health activities in Victoria are controlled by the Public Health Division of the Department of Human Services (DHS).

In 1999–00 a major proportion of expenditure by the DHS was on services provided by agencies under service agreements with the DHS. These include both NGOs and government-related agencies, such as public hospitals, metropolitan health services, kindergartens, LGAs, community health centres and ambulance services.

The main public health issues addressed by the DHS during 1999–00 were to:

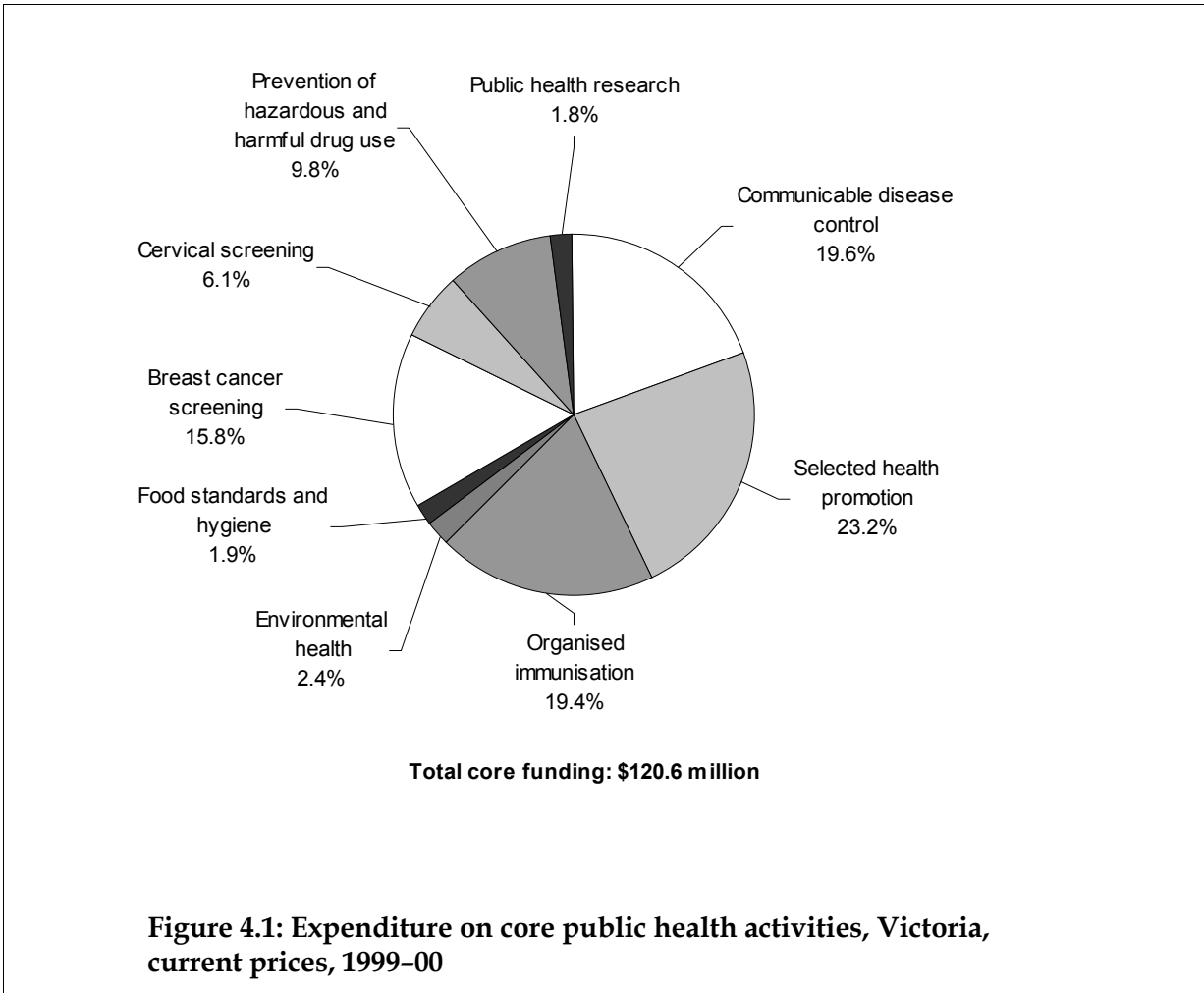
- improve community consultations
- review drug policy and treatment services to respond to the impact of drugs on the community
- lower smoking rates and reduce unwanted exposure to tobacco smoke
- review health promotion infrastructure support needs and programs for groups at greatest risk
- respond to the Legionella outbreak at Melbourne Aquarium
- achieve and maintain a high level of immunisation among children and adults
- increase investment in public health research infrastructure to take advantage of national and international research funding opportunities
- grow biotechnology industries.

4.2 Overview of results

Total expenditure on the core public health categories during 1999–00 was \$120.6 million (Table 4.1).

Table 4.1: Expenditure on core public health activities, Victoria, current prices, 1999-00

Category	Total expenditure (\$ million)	Proportion of total core public health expenditure (%)
Communicable disease control	23.7	19.6
Selected health promotion	27.9	23.2
Organised immunisation	23.4	19.4
Environmental health	2.9	2.4
Food standards and hygiene	2.3	1.9
Breast cancer screening	19.0	15.8
Cervical screening	7.3	6.1
Prevention of hazardous and harmful drug use	11.9	9.8
Public health research	2.2	1.8
Total core public health	120.6	100.0
Public health related activities	96.8	..



The DHS’s 1999-00 annual report shows overall operating expenses of \$173.7 million by the public health output groups (including some expenditures that were not within the core categories). The reason for the difference between the total expenditure on core public health

and the reported expenditure on public health outputs is due to expenditure from various trusts, accountable to the Department of Premier and Cabinet, that are excluded from this report.

Approximately \$7.1 million was spent on Divisional overheads and has been identified and included within each core category through their applicable reportable activities. This represents approximately 3.3% of the total reported expenditure. It is important to note that administrative overhead expenditure of the Victoria Health Promotion Foundation (VicHealth), which performs the majority of the health promotion activities for the DHS, has been excluded from the estimates because VicHealth does not consume any material overhead from the Public Health Division. All expenditure data for Victoria has been reported on an accrual basis for 1999–00. Accordingly, depreciation of \$768,000 and capital asset charge of \$794,000 charged to the Public Health Division has been included. This represents 0.35% and 0.37% respectively of the total reported expenditure.

4.2.1 Public health expenditure by categories

Communicable disease control

Total expenditure for *Communicable disease control* for Victoria in 1999–00 was \$23.7 million (Table 4.2). This was 19.6% of total core public health expenditure. The major components are described below.

HIV/AIDS, hepatitis C and sexually transmitted infections

Funding is provided to a range of agencies, including Melbourne Sexual Health Centre, which is managed and staffed by Public Health Division, some non-government agencies and various research laboratories, to provide HIV and associated testing, and counselling and support.

Needle and syringe programs

The needle and syringe program ensures the provision of sterile injecting equipment for injecting drug users. This is undertaken solely by non-government agencies funded by the Public Health Division.

Other communicable disease control

This sub-category of expenditure incorporates:

- collection, collating and reporting on data relating to notifiable infectious diseases
- provision of advice to health care professionals and the public on infectious diseases
- coordination of outbreak investigations
- provision of tracing, counselling and testing of contact cases of tuberculosis
- Vector Borne Virus Program that associates with the Virology and Entomology Services.

Table 4.2: Expenditure on *Communicable disease control*, Victoria, current prices, 1999–00 (\$ million)

Sub-category	Expenditure
HIV/AIDS, hepatitis C and STI programs	11.8
Needle and syringe programs	0.3
Other communicable disease control	11.5
Total	23.7

Selected health promotion

Total reported expenditure on *Selected health promotion* was \$27.9 million or 23.2% of total expenditure on core public health activities in 1999–00 (Table 4.1).

The DHS and VicHealth jointly undertake the promotion of healthy lifestyles in Victoria. VicHealth is funded directly by the Public Health Division to promote healthy living to all Victorians. Programs exclusively administered by the DHS support developmental projects that enhance health promotion in health and community agencies, schools and LGAs.

The Public Health Division provides grants for projects that aim to improve health promotion practice and to increase awareness and knowledge of physical activity in the general community and in vulnerable groups. This funding was also aimed at:

- increasing the skills of health professionals and other workers in promoting physical activity
- developing coherent strategies to reduce differentials in health status between rural and metropolitan areas of Victoria, with general emphasis on the prevention of non-communicable diseases and cardiovascular disease in particular.

Organised immunisation

This expenditure category includes spending on interventions delivered or purchased by the DHS that are aimed at preventing disease or responding to disease outbreaks. Funding comes from a combination of State appropriations and Commonwealth–State PHOFAs.

Total expenditure on *Organised immunisation* in 1999–00 was \$23.4 million (Table 4.3). This was 19.4% of total core public health expenditure.

Organised childhood immunisation

Organised childhood immunisation expenditure includes the purchase of vaccines and the provision of immunisation services to children and adolescents according to the NHMRC schedule. The childhood program is carried out with the assistance of private GPs and LGAs, whilst the adolescent program is carried out by LGAs.

Organised pneumococcal and influenza immunisation

Pneumococcal pneumonia immunisation includes the purchase of pneumococcal vaccine for immunisation of persons aged 65 or over and for Indigenous people aged over 50 years, and those aged 15–49 at high risk. The service is solely provided through GPs.

Victoria is the only State that funds and provides the pneumococcal pneumonia immunisation service to people aged 65 or over. The program for Indigenous people was part of a national campaign.

Expenditure on influenza immunisation includes costs associated with the purchase of influenza vaccines. This is part of a national program for persons over 65 years of age and for Indigenous people aged over 50 years, and those aged 15–49 who are considered to be at high risk.

All other organised immunisation

This sub-category of expenditure includes:

- purchase of vaccines and the provision of immunisation services to pre-school and school children through the ACIR and to adults according to the NHMRC’s schedule
- issuing school entry immunisation certificates
- provision of hepatitis B immunisation to eligible departmental staff and clients
- funding for pilot projects, for example mobile immunisation services.

Table 4.3: Expenditure on *Organised immunisation*, Victoria, current prices, 1999–00 (\$ million)

Sub-category	Expenditure
Organised childhood immunisation	13.3
Organised pneumococcal and influenza immunisation	8.4
All other organised immunisation	1.6
Total	23.4

Environmental health

Environmental health focuses upon the protection of the community from environmental dangers arising from air, land or water, as well as radiation and other poisonous substances. Expenditure on environmental health is largely in the form of funding for development and employment of environmental health officers within regions. Other activities include:

- investigation of the effects and public health risk of environmental contaminants
- safety regulation of radioactive sources and adverse events surveillance
- maintenance of emergency plan, protocols and procedures
- maintenance of emergency response capability and provision of a coordinated approach when a major health risk is detected
- laboratory testing of cooling towers, pools, spas and water treatment plants in response to public health risks
- licensing of persons with qualifications and training and those who operate radiation equipment
- provision of information and advice to home department, other government departments, community, pest control industry and radiation users
- provision of training and advice to persons who use registered chemicals for commercial pest control.

Total expenditure on *Environmental health* was \$2.9 million (Table 4.1). This was 2.4% of total expenditure on core public health during 1999–00.

Food standards and hygiene

Expenditure on this category is related to the following areas:

- food recall and emergency response
- food-borne illness investigation
- representation on national forums and committees
- collection, collation and reporting on non-compliance of foods against food standards code
- food surveillance microbiology to facilitate the collection, analysis and interpretation of population-based information
- food hygiene surveillance
- food safety and hygiene strategy research
- analysis and report on possible unsafe contaminated food
- surveillance of food premises on crown land
- information and advice on food safety issues and legislation
- implementation of new legislation provided to the community, stakeholders and government.

Total expenditure for *Food standards and hygiene* during 1999–00 was \$2.3 million (1.9% of total core public health expenditure).

Breast cancer screening

The provision of a breast cancer screening service is achieved through the DHS's funding of BreastScreen Victoria. Funding for *Breast cancer screening* is provided under a joint arrangement with the Commonwealth via the PHOFA.

BreastScreen Victoria has a network of 8 assessment centres and 31 screening centres around the State. All of these sites are specially designated centres and operate to strictly controlled standards. The program also employs a relocatable mammography machine in the Western region of Melbourne and a mobile van in rural Victoria to ensure that the service reaches women in all metropolitan and rural areas.

BreastScreen Victoria manages a breast screen registry that records and monitors the number of women screened and the cancers detected. There is also a comprehensive recruitment and education strategy in place for the BreastScreen program.

Total expenditure on *Breast cancer screening* during 1999–00 was \$19.0 million, or 15.8% of total core public health expenditure (Table 4.1).

Cervical screening

This expenditure category includes the costs associated with the provision of a cervical testing service, a State-wide database and strategies aimed to encourage Victorian women to have regular Pap smears.

Funding for the Victorian Cervical Screening Program is provided under a joint arrangement with the Commonwealth, via the PHOFA. About 572,000 screens were performed during 1999–00. This represented coverage of approximately 67% of the target population. The main goal of the Victorian Cervical Screening Program is to achieve optimal reductions in the

incidence, morbidity and mortality associated with cervical cancer at an acceptable cost through an organised approach.

In accordance with the Commonwealth-State Agreement, the program mainly deals with the following areas:

- recruitment and education of all population groups according to need
- working with consumers and NGOs in planning, operating, monitoring and evaluating the Pap screen recruitment program
- developing and supporting strategies to promote best practice and standard setting
- improving, wherever possible, information collection and analysis, workforce development and research.

Total expenditure on *Cervical screening* in Victoria during 1999–00 was \$7.3 million or 6.1% of total expenditure on core public health activities.

Prevention of hazardous and harmful drug use

Alcohol

This sub-category includes expenditure on:

- a range of counselling, consultancy and continuing care services
- Koori-specific alcohol and drug withdrawal workers and resource centres
- accreditation of drink-driver education programs for people convicted of drink-driving.

Tobacco

Expenditure under this subcategory funds prevention campaigns aimed at raising awareness of the harms associated with tobacco.

Illicit and other drugs of dependence

This program funds a range of prevention and health protection activities including:

- community drug education targeted at raising awareness of the harms associated with drugs
- public information services on drugs and poisons
- training of professionals, including medical practitioners and pharmacists
- targeted prevention initiatives and early intervention programs
- effective regulatory control of drugs and poisons governing their distribution.

All these programs are aimed at enhancing community awareness of the harmful effects of licit and illicit drugs, providing appropriate support and training for health care workers and minimising harm associated with drug use.

Total expenditure on *Prevention of hazardous and harmful drug use* in Victoria during 1999–00 was \$11.9 million (Table 4.4). This represented 9.8% of total core public health expenditure.

Table 4.4: Expenditure on *Prevention of hazardous and harmful drug use, Victoria, current prices, 1999–00 (\$ million)*

Sub-category	Expenditure
Alcohol	4.2
Tobacco	3.3
Illicit and other drugs of dependence	4.4
Mixed	—
Total	11.9

Public health research

Expenditure within this category is managed through the Biomedical and Public Health Research Section and involves:

- targeted research projects in the priority areas of injury prevention, environmental health, communicable and non-communicable diseases, and Aboriginal and rural health
- public health research capacity-building in public health organisations, which includes provision of operational assistance, grants-in-aid and funding for public health research fellowships
- support for public health events, which have a significant research basis
- Victorian representation on State and national forums and committees.

Total expenditure for these aspects of *Public health research* during 1999–00 was \$2.2 million¹. This represented 1.8% of total core public health expenditure (Table 4.1). It does not include public health research expenditure that is associated with ongoing program-wide development in other core public health categories.

4.2.2 Expenditure on ‘Public health related activities’

‘Public health related activities’ for Victoria include:

- drug treatment
- drug welfare and support
- biomedical research
- research infrastructure.

Total expenditure for ‘Public health related activities’ during 1999–00 was \$96.8 million.

¹ The 1999–00 budget assigned for this purpose is \$2,193,638.