3 Expenditure by New South Wales health authorities

3.1 Introduction

New South Wales is the most populous of Australia's States and Territories, with, at 6.5 million in 2000, over one-third of the total Australian population. Most of the State's population is located around the three major urban centres of Newcastle, Sydney and Wollongong.

State Government health services in New South Wales are arranged into 17 relatively autonomous area health services, each covering a distinct geographic region of the State. Each area health service is responsible for, among other things, the provision of major public health services within its region. The State department of health (NSW Health), on the other hand, has major State-wide responsibilities for:

- policy development
- system-wide planning and performance monitoring
- management of health issues.

Many public health services are also delivered by local government authorities in New South Wales.

While legislative responsibility for public health rests with NSW Health, the area health services and LGAs, the State's public health system extends to all organisations and groups whose activities contribute to the achievement of the State's public health goals.

The period covered by this report, 1999–00, includes the lead-up to the Olympic and Paralympic Games, which were held in Sydney in September 2000. These two major events necessitated increased emphasis on public health services and facilities, not only in the Sydney metropolitan region but throughout the State. This included increased health surveillance, environmental and food safety inspection, and counter-disaster planning.

3.2 Overview of results

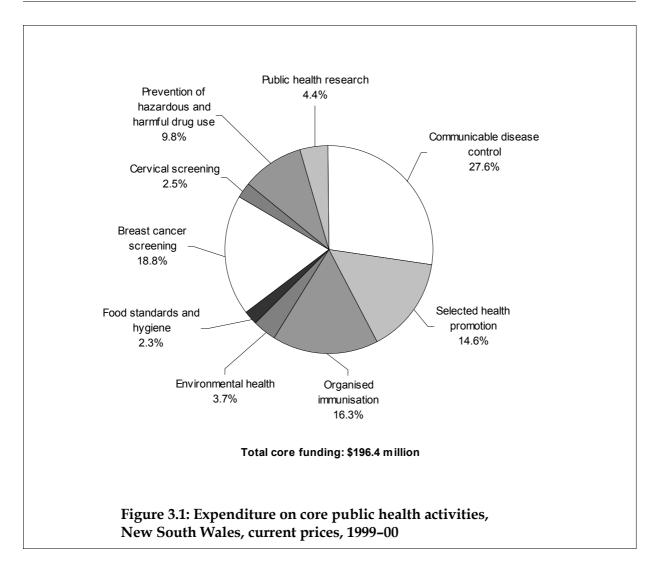
Estimated expenditure by New South Wales on core public health activities during 1999–00 was \$196.4 million (Table 3.1). This is equivalent to 2.7% of the total NSW Health recurrent expenditure. An additional \$18.2 million was reported as 'Public health related activities'.

Most of the expenditure was directed to four major core categories. These were:

- Communicable disease control
- Breast cancer screening
- Organised immunisation, and
- *Selected health promotion.*

Table 3.1: Expenditure on core public health activities, New South Wales, current prices, 1999-00

Category	Total expenditure (\$ million)	Proportion of total core public health expenditure (%)
Communicable disease control	54.2	27.6
Selected health promotion	28.7	14.6
Organised immunisation	31.9	16.3
Environmental health	7.3	3.7
Food standards and hygiene	4.4	2.3
Breast cancer screening	36.8	18.8
Cervical screening	5.0	2.5
Prevention of hazardous and harmful drug use	19.3	9.8
Public health research	8.7	4.4
Total core public health	196.4	100.0
Public health related activities	18.2	



The level of expenditure incurred in 1999–00 reflects important achievements during this period. Some of these initiatives are highlighted under the relevant core category; however, the following are initiatives that have an impact across public health:

- The publication of the 2000 edition of *The Health of the People of New South Wales Report of the Chief Health Officer*. This reported on the health of the State's population, including chronic and non-communicable conditions and a wide range of other health determinants.
- The 'Older People's Health Survey', conducted between June 1999 and February 2000. This involved telephone interviews with 8,500 people aged 65 years or over across the State, and focused on lifestyle, home and social environment, self-reported health status, older people as carers, physical activity and functioning, and the health priorities of diabetes, falls and mental health.
- The planning of public health services for the Sydney 2000 Olympic and Paralympic Games. NSW Health was responsible for public health services including health surveillance, environmental and food safety inspection, and counter-disaster planning.

3.2.1 Public health expenditure by categories

Communicable disease control

The expenditure reported for this category was \$54.2 million. This was 27.6% of the total expenditure on public health. The major components of this category are *HIV/AIDS*, *hepatitis C and STI programs*, *Needle and syringe programs* and *Other communicable disease control*, amounting to \$32.7 million, \$11.0 million and \$10.5 million respectively (Table 3.2).

Highlights in this category include the world's first major mass media information campaign on hepatitis C, conducted by NSW Health in partnership with a range of government and non-government organisations. It aimed to enhance the effectiveness of existing education and prevention programs and to increase awareness of hepatitis C risk. Evaluation of the campaign showed a significant increase in general community awareness and knowledge.

Table 3.2: Expenditure on *Communicable disease control*, New South Wales, current prices, 1999–00 (\$ million)

Sub-category Sub-category	Expenditure
HIV/AIDS, hepatitis C and STI programs	32.7
Needle and syringe programs	11.0
Other communicable disease control	10.5
Total	54.2

Selected health promotion

In 1999–00 the public health expenditure reported for the *Selected health promotion* category was \$28.7 million, which was equivalent to 14.6% of the total public health expenditure reported in the period (Table 3.1).

The main activities reported under this category were:

- general health promotion and education, and
- injury prevention.

During this period, the NSW Cancer Council was funded to implement Phase 2 of the Slip Slop Slap and Save Your Skin campaigns. These campaigns increased the number of 'correct' or 'acceptable' sun protection measures taken by parents from 51% to 67%.

In September 1999, the Aboriginal Health Strategic Plan was launched. It was developed in partnership with the Aboriginal Health and Medical Research Council, Commonwealth Department of Health and Aged Care, and Aboriginal and Torres Strait Islander Commission. It identified five priorities, among them the improvement of access to health services, the improvement of social and emotional wellbeing, and the greater effectiveness of health promotion.

The Plan It Right campaign was launched during December 1999. This print and radio campaign for English- and non-English- speaking people was undertaken to provide tips on how to make 'the biggest party of the Millennium' hosted by Sydney a safe and enjoyable event.

Organised immunisation

The expenditure reported for this category was \$31.9 million (Table 3.3). This was 16.3% of the total expenditure on public health during the year. Total expenditure for this category had been inflated in the 1998–99 collection, due to the misallocation of high-cost drugs. In this and future collections, expenditure on high-cost drugs is being excluded to bring New South Wales into line with the definitions for this category.

The major components for this category are:

- Organised childhood immunisation
- *All other organised immunisation.*

All other organised immunisation expenditure includes \$8.9 million reported by NSW Health Public Health Division for pneumococcal and influenza immunisation.

A major achievement of the year was the probable interruption of measles transmission in New South Wales. Indications are that the transmission may have been interrupted for the first time in New South Wales as there were no reports of measles during September 1999. This was the first month since 1991 (when the Public Health Act's enhancement notification began) and most likely the first month since colonial times, that measles has not occurred in New South Wales.

Another important achievement was the direct distribution of all the vaccines on the NHMRC's immunisation schedule to all service providers in New South Wales. The introduction of direct delivery of vaccines to GPs has contributed significantly to an increase in vaccine coverage among all target populations.

Table 3.3: Expenditure on *Organised immunisation*, New South Wales, current prices, 1999–00 (\$ million)

Sub-category	Expenditure
Organised childhood immunisation	20.3
All other organised immunisation	11.6
Total	31.9

Environmental health

The expenditure reported for *Environmental health* during 1999–00 was \$7.3 million, which was equivalent to 3.7% of the total public health expenditure incurred during the financial year (Table 3.1).

During this financial year, the Housing for Health program was successfully implemented in nine communities around the State. The Aboriginal Environmental Health Officer training program was also expanded by four additional places, bringing the total to seven trainees.

Considerable resources were devoted to planning for environmental health safety during the Sydney Olympics, including the development of a Vessel Inspection Program to prevent disease outbreaks on visiting passenger ships.

Lead management programs, particularly in Broken Hill and North Lake Macquarie, resulted in a continuing decrease in children's blood lead levels. Environmental Health also began investigations of indoor air quality and drinking water quality (using Colisure) during 1999–00.

Food standards and hygiene

The expenditure incurred for the *Food standards and hygiene* category during 1999–00 was \$4.4 million, which was equivalent to 2.3% of the total expenditure in public health during the period (Table 3.1).

During the period 232 responses were prepared on food issues raised in Parliament or directly to the Minister for Health. A significant milestone was achieved through the joint agreement by all Australian States and Territories to adopt uniform food standards across the country.

Breast cancer screening

The expenditure incurred for *Breast cancer screening* during 1999–00 was equivalent to \$36.8 million, which was 18.8% of the total public health expenditure incurred during the financial period (Table 3.1).

In this period the NSW BreastScreen program performed 280,829 screenings and a new fixed screening unit was implemented in Broken Hill to provide screening services to the women in the New South Wales far west.

Cervical screening

The expenditure on cervical cancer screening during 1999–00 was \$5.0 million, which was equivalent to 2.5% of the total public health expenditure reported during the period (Table 3.1).

As the NSW Pap Test Register is an important component of the Cervical Screening Program in New South Wales, its expenditure was included in this category.

Prevention of hazardous and harmful drug use

The expenditure reported for this category was \$19.3 million, which was equal to 9.8% of the total expenditure incurred during the financial year (Table 3.4).

Achievements in this category include the introduction of the Smoke Free Workplace Policy, which aims to prohibit smoking in all health service buildings, vehicles and property

controlled by NSW Health by September 2002, and the introduction of point of sale tobacco advertising legislation.

Table 3.4: Expenditure on *Prevention of hazardous and harmful drug use*, New South Wales, current prices, 1999–00 (\$ million)

Sub-category	Expenditure
Alcohol	3.5
Tobacco	5.7
Illicit and other drugs of dependence	0.5
Mixed	9.5
Total	19.3

Public health research

Total expenditure reported for research in public health was \$8.7 million. This represented 4.4% of the total expenditure incurred in public health during the year (Table 3.1). Although this is the first time that States and Territories are reporting expenditure on *Public health research* as a separate category, this will not affect total expenditure for New South Wales. In the 1998–99 report, this expenditure was included under program-wide expenditure for each of the eight core categories.

3.2.2 Expenditure on 'Public health related activities'

Total expenditure for 'Public health related activities' was \$18.2 million in 1999–00 (Table 3.5).

Table 3.5: Expenditure on 'Public health related activities', New South Wales, current prices, 1999–00 (\$ million)

Sub-category	Expenditure
Health service regulation—professional registration	5.4
Health service regulation—other regulation	1.4
Other public health related activities	11.5
Total	18.2