The Federal, State and Territory Health Ministers met in Alice Springs today at the COAG Health Council to discuss a range of national health issues.

The meeting was hosted by the Hon Natasha Fyles, the Northern Territory Minister for Health. The meeting was chaired by the Ms Meegan Fitzharris MLA, Australian Capital Territory Minister for Health and Wellbeing.

On Wednesday 1 August Health Ministers held a Roundtable with Indigenous leaders to listen to what is important to Indigenous people and to talk about how we can work together to improve health and healthcare for Aboriginal and Torres Strait Islander people to achieve equity in health outcomes.

A separate communiqué has been prepared for the Indigenous Roundtable.

Following the meeting the Australian Commission for Safety and Quality in Health Care launched the National Safety and Quality Health Service Standards – User Guide for Aboriginal and Torres Strait Islander Health.

Major items discussed by Health Ministers today included:

**National collaboration to improve health outcomes for Aboriginal and Torres Strait Islander Australians**

Health Ministers held a strategic discussion on national collaboration to improve health outcomes for Aboriginal and Torres Strait Islander Australians. The wide-ranging discussion covered the impacts of potentially preventable rates of eye disease, ear disease, kidney disease, crusted scabies, Rheumatic Heart Disease, Human T-Lymphotropic Virus Type 1 (HTLV-1) and mental health in Aboriginal and Torres Strait Islander communities. Ministers identified opportunities for collaborative action to improve Aboriginal and Torres Strait Islander health outcomes that builds on the work already underway across Australia.

**Mandatory reporting requirements by treating practitioners**

Health Ministers approved a targeted consultation process for amendments to mandatory reporting requirements by treating practitioners. The targeted consultation process will seek feedback on proposed legislation that strikes a balance between ensuring health practitioners can seek help when needed, while also protecting the public from harm. The consultation process will involve professional bodies representing each registered health profession, consumer groups, National Boards and professional indemnity insurers. The
results of the targeted consultation process will inform a Bill to be presented to the Queensland Parliament as soon as possible.
Western Australia is not included in this process as its current arrangements will continue.

**Australian Health Practitioner Regulation Agency**

Health Ministers welcomed advice that all 15 health practitioner National Boards, their Accreditation Councils and AHPRA have partnered with Aboriginal and Torres Strait Islander health sector leaders and organisations to sign a National Registration and Accreditation Scheme Statement of Intent to achieve equity in health outcomes. This joint commitment aims to ensure a culturally safe health workforce, increasing participation of Aboriginal and Torres Strait Islander Peoples in the registered health professions along with greater access to culturally safe health services. This work will reach over 700,000 registered health practitioners, over 150,000 registered students and the 740 plus programs of study accredited through the National Scheme. The launch was held on traditional lands of the Wurundjeri Peoples of the Kulin Nation in Melbourne, Victoria with a Welcome to Country and a traditional smoking ceremony.

**Update on 2016-17 determination of national health reform funding**

Health Ministers received an update from the Commonwealth Health Minister on the process and timing of the 2016-17 determination, and of the importance of rapidly setting the 2016-17 determination of the national health reform funding to provide certainty for hospital services into the future. Health Ministers also noted the work on improvements to the reconciliation process for inclusion in the next National Health Reform Agreement.

Ministers welcomed the appointment of Michael Lambert as the Administrator of the National Health Funding Pool.

**Private patients in public hospitals.**

Ministers agreed to commission an independent review of a range of factors regarding utilisation of private health insurance in public hospitals to report as soon as possible but no later than 31 December 2018.

**Progress update on the National Health Reform Agreement**

The Commonwealth Minister for Health provided an update on drafting of the National Health Reform Agreement. The Council noted the importance of a dispute resolution process.

**National approach to hearing health**

Ministers recognised that 3.6 million Australians currently experience hearing loss and that the prevalence of hearing loss is expected to more than double by 2060. Ministers discussed the economic, social and health impacts of hearing loss, particularly for the 90 per cent of
Aboriginal and Torres Strait Islander children in some remote communities who experience otitis media infections at any time. Ministers agreed to further consider a national approach to hearing health, following the Commonwealth’s response to the House of Representatives Inquiry Report ‘Still Waiting to be Heard’ expected later this year.

**Public dental funding arrangements**

Ministers noted that the current National Partnership Agreement on Public Dental Services for Adults will end on 30 June 2019, and that the State and Territory public provider access to the Child Dental Benefits Schedule will end on 31 December 2019.

Ministers agreed that securing sustainable and fair future funding arrangements is critical to providing timely access to public dental care. Ministers agreed to commence formal negotiations to achieve fair, long-term public dental funding arrangements, including extension of access to the Child Dental Benefits Schedule.

**Mutual recognition of mental health orders**

Ministers discussed the important issue of ensuring continuity of care for mental health consumers moving between jurisdictions with different legislation. Ministers agreed that work to ensure interoperability of mental health legislation between states and territories, as part of the 5th National Mental Health and Suicide Prevention Plan is prioritised.

**Recognising Continuity of Care for Consumers of Mental Health Services**

The Council discussed and agreed to South Australia’s proposal that the COAG Health Council monitor the ongoing transition to the NDIS of mental health clients and to identify any emerging services gaps that need to be addressed in order to ensure continuity of support.

Ministers agreed that the Australian Health Ministers’ Advisory Council work with the Disability Reform Council Senior Officials Working Group and provide advice at the next COAG Health Council on actions to resolve interface issues between health and disability services.

**Obesity – limiting the impact of unhealthy food and drinks on children**

The Queensland Minister led a discussion on a suite of actions to improve children’s diets and prevent child obesity with a focus on health care settings, schools, children’s sport and recreation, food promotion and food regulation.

The development of cross-sectoral initiatives with education and sport and recreation sectors was noted. Health departments were tasked with developing national minimum nutrition standards for food and drink supply in public health care facilities. The Queensland Minister presented a national interim guide for reducing children’s exposure to unhealthy food and drink marketing. This guide was endorsed by Ministers, noting that the guide is for voluntary use by governments.
Health Ministers noted the voluntary pledge made by the Australian Beverages Council Limited to reduce sugar across their portfolio of products by 20% on average by 2025.

Implementation of National Cancer Work Plan – Additional Optimal Cancer Care Pathway

Health Ministers endorsed the Optimal Cancer Care Pathway (OCP) for Aboriginal and Torres Strait Islander peoples, which is the first OCP under the National Cancer Work Plan that specifically addresses the needs of a cultural group. It is critical that cancer service systems are culturally responsive and competent to address the current and growing disparities in health outcomes for Aboriginal and Torres Strait Islander Australians relative to non-Indigenous Australians. This OCP is designed to provide culturally safe and responsive healthcare, including acknowledging how social determinants can impact health outcomes. This OCP is to be used in conjunction with the 15 tumour-specific OCPs.

The OCP for Aboriginal and Torres Strait Islander peoples was developed collaboratively by Cancer Australia in partnership with the Victorian Department of Health and Human Services and Cancer Council Victoria. Ministers also gratefully acknowledge Aboriginal leadership in development of this pathway with input from an Expert Working Group and from Cancer Australia’s Leadership Group on Aboriginal and Torres Strait Islander Cancer Control, as well as feedback from many Aboriginal Controlled Community Organisations and peak groups during the public consultation phase.

Public disclosure to support hospital and clinical comparisons

Ministers agreed to commit to create a data and reporting environment that increases patient choice through greater public disclosure of hospital and clinician performance and information.

Ministers noted it is the Australian Institute of Health and Welfare’s (AIHW) role to facilitate consistent and timely reporting of health and welfare statistics and performance information, including the publication of the MyHospitals and MyHealthy Communities websites following the cessation of the National Health Performance Authority.

All jurisdictions agreed to work with the Commonwealth’s Chief Medical Officer in his investigation of the issue around a number of women being diagnosed with cancer, which may be linked to breast implants. This includes the role all jurisdictions play in reporting information to track the use of implants.

National Action Plan for Endometriosis

Ministers noted that the National Action Plan for Endometriosis has been finalised and was launched on 26 July 2018. All states and territories will be working with the Commonwealth toward implementation of the plan.
Ministers noted that the Commonwealth is developing a National Women’s Health Strategy 2020-2030 and a National Men’s Health Strategy 2020-2030. Both Strategies are expected to be finalised and launched in early 2019.

**Ministerial Advisory Committee on Out-of-Pocket Costs**

Ministers noted the work being undertaken by the Ministerial Advisory Committee on Out-of-Pocket Costs. It was agreed that the Commonwealth release a detailed report of the activity of the Ministerial Advisory Committee on Out-of-Pocket Costs including specific fee transparency options before the next COAG Health Council meeting so that decisive actions can be agreed.

**Digital health**

Jurisdictions reaffirmed their support of a national opt out approach to the My Health Record. Jurisdictions noted clinical advice about the benefits of My Health Record and expressed their strong support for My Health Record to support patient’s health.

Ministers acknowledged some concerns in the community and noted actions proposed to provide community confidence, including strengthening privacy and security provisions of My Health Record.

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