

MEDIA RELEASE

21 May 2021

[starts]

Alcohol and other drug treatment on the coat tails of MH

The Victorian Government has handed down a mental health budget that will herald a breadth of reform in the sector not seen since the 1990s.

The Victorian Alcohol and Drug Association (VAADA) acknowledges that the budget works to address significant underinvestment and support for people experiencing mental health issues within the complex environment of a global pandemic.

This budget includes predicted expenditure on service integration with mental health services, the pending CBD based medically supervised injecting room as well as the progression the public drunkenness reforms. The budget also included some ongoing establishment expenditure for the regional residential rehabilitations facilities, as well as a facility in St Albans.

A preliminary review of the budget documents has uncovered the following items:

Mental Health Royal Commission:

- \$22.5M over 4 years for addiction medicine specialist and related workforce uplift
- \$2.59M to establish a new statewide service to support dual diagnosis capacity and workforce capability
- \$26.5M investment over 2 years to establish some trial sites relating to adult mental health services and youth services working within the dual diagnosis space

Broader AOD allocations:

- \$23.2M over 2 years to continue the development of regional residential rehabilitation facilities
- \$1.3M for the AOD forensic system
- Operational funding of \$5M for AOD counselling
- \$1M to continue the Aboriginal Ice Partnership activities
- \$9.4M in progressing facilities renewal activity
- \$40.1M over two years relating to medically supervised injecting
- \$10.4M over 2 years relating to the decriminalization of public drunkenness

VAADA CEO, Mr Sam Biondo says, 'we welcome these allocations and look forward to working with government in progressing the reform agenda from the mental health royal commission. We note that despite the various elements of AOD spending, the sector is reeling from the increased community demand and exacerbated trauma evident for many people who are seeking AOD support.'

[ends]

VAADA is the peak body that represents over 80 Alcohol and other Drug services across Victoria. On a daily basis these services are dealing with the effects of harmful alcohol and other drug consumption.

For more information or to arrange an interview please contact Sam Biondo 0414 974 121 for comment or if unavailable, David Taylor on 0413 914 206.

Output summary by departmental objectives

The Department's outputs and funding are provided in the table below. Detailed descriptions of objectives, outputs, together with their key performance indicators are presented in subsequent tables.

(\$ million)

	2020-21 budget	2020-21 expected outcome	2021-22 budget	Variation ^(a) %
Victorians are healthy and well				
Admitted Services	12 796.1	13 185.2	12 903.4	0.8
Non-Admitted Services	2 050.3	2 008.2	2 208.8	7.7
Emergency Services	773.9	771.3	838.3	8.3
Acute Training and Development	322.8	342.6	352.3	9.1
Residential Aged Care	423.3	421.8	436.1	3.0
Aged Care Assessment	60.8	59.8	59.6	(2.0)
Aged Support Services	120.4	119.2	108.8	(9.6)
Home and Community Care Program for Younger People	203.3	203.6	202.2	(0.5)
Ambulance Emergency Services	1 082.9	1 086.7	1 166.5	7.7
Ambulance Non-Emergency Services	166.1	168.1	196.9	18.6
Drug Prevention and Control	43.2	45.8	44.8	3.7
Drug Treatment and Rehabilitation	264.8	260.5	285.4	7.8
Mental Health Clinical Care	1 911.2	1 893.5	2 177.0	13.9
Mental Health Community Support Services	124.1	125.5	166.3	34.0
Community Health Care	333.6	337.8	381.0	14.2
Dental Services	310.1	297.7	351.9	13.5
Maternal and Child Health and Early Parenting Services	134.4	137.5	150.6	12.1
Health Protection	1 083.8	1 435.8	555.0	(48.8)
Health Advancement	80.8	81.8	81.5	0.9
Emergency Management	12.6	19.5	15.0	19.0
Small Rural Services – Acute Health	416.9	420.2	431.5	3.5
Small Rural Services – Aged Care	238.8	238.8	243.9	2.1
Small Rural Services – Home and Community Care Services	5.3	5.3	5.3	0.0
Small Rural Services – Primary Health	25.2	24.1	24.5	(2.8)
Total ^{(b)(c)}	22 984.5	23 690.0	23 386.6	1.7

Source: Department of Health

Notes:

- (a) Variation between the 2020-21 budget and the 2021-22 budget. Explanations for variations greater than five per cent are included in footnotes to the relevant output cost.
- (b) The Capital Assets Charge (CAC) policy is discontinued from the 2021-22 Budget and CAC impacts are therefore excluded from the figures. Refer to individual output sections for comparative output costs inclusive of CAC.
- (c) Table may not add due to rounding.

Performance measures	Unit of measure	2021-22 target	2020-21 expected	2020-21 target
Cost				
Total output cost	\$ million	196.9	168.1	166.1
Total output cost including the CAC	\$ million	197.3	168.4	166.4
<i>The higher 2021-22 target reflects funding provided for government policy commitments.</i>				
<i>The output cost including the CAC is provided for comparative purposes in the 2021-22 Budget.</i>				
<i>The CAC is discontinued from the 2021-22 Budget.</i>				

Source: Department of Health

Drug Prevention and Control (2021-22: \$44.8 million)

Encourages all Victorians to minimise the harmful effects of alcohol and other drugs by providing a comprehensive range of strategies, which focus on enhanced community and professional education, targeted prevention and early intervention programs, community and residential treatment services, and the use of effective regulation.

Performance measures	Unit of measure	2021-22 target	2020-21 expected	2020-21 target
Quantity				
Number of phone contacts from family members seeking support	number	10 682	10 682	10 682
Needles and syringes provided through the Needle and Syringe program	number (thousand)	10 170	10 170	10 170
Number of telephone, email, website contacts and requests for information on alcohol and other drugs	number (thousand)	4 200	5 796	4 200
<i>The 2020-21 expected outcome is higher than the 2020-21 target primarily due to the impact of the COVID-19 pandemic on activities.</i>				
Quality				
Pharmacotherapy permits processed within designated timeframe	per cent	100	100	100
Timeliness				
Percentage of new licences and permits issued to health services or businesses for the manufacture, use or supply of drugs and poisons within six weeks following receipt of full information	per cent	100	100	100
Percentage of treatment permits for medical practitioners or nurse practitioners to prescribe Schedule 8 drugs assessed within four weeks	per cent	80	100	75
<i>The 2020-21 expected outcome is higher than the 2020-21 target primarily due to improvements in processing.</i>				
<i>The higher 2021-22 target reflects desired clinical performance.</i>				
Cost				
Total output cost	\$ million	44.8	45.8	43.2
Total output cost including the CAC	\$ million	44.8	45.8	43.2
<i>The 2020-21 expected outcome is higher than the 2020-21 target due to an output realignment from Drug Treatment and Rehabilitation to Drug Prevention and Control.</i>				
<i>The output cost including the CAC is provided for comparative purposes in the 2021-22 Budget.</i>				
<i>The CAC is discontinued from the 2021-22 Budget.</i>				
<i>This output did not have a provision for CAC in previous budgets.</i>				

Source: Department of Health

Drug Treatment and Rehabilitation

(2021-22: \$285.4 million)

Assists the community and individuals to control and reduce the harmful effects of illicit and licit drugs, including alcohol, in Victoria through the provision of community-based non-residential and residential treatment services, education and training, and support services.

<i>Performance measures</i>	<i>Unit of measure</i>	<i>2021-22 target</i>	<i>2020-21 expected</i>	<i>2020-21 target</i>
<i>Quantity</i>				
Clients on the Pharmacotherapy program	number	14 000	14 000	14 000
Commenced courses of treatment – community-based drug treatment services	number	10 189	11 885	8 489
<i>The 2020-21 expected outcome is higher than the 2020-21 target primarily due to the impact of the COVID-19 pandemic on activities.</i>				
<i>The higher 2021-22 target reflects historical performance.</i>				
Number of drug treatment activity units – residential services	number	78 535	55 201	78 535
<i>The 2020-21 expected outcome is lower than the 2020-21 target primarily due to the impact of the COVID-19 pandemic on activities.</i>				
Number of drug treatment activity units – community-based services	number	97 855	72 260	90 325
<i>The 2020-21 expected outcome is lower than the 2020-21 target primarily due to the impact of the COVID-19 pandemic on activities.</i>				
<i>The higher 2021-22 target reflects the impact of funding provided in the 2021-22 Budget.</i>				
Workers complying with Alcohol and Other Drug Minimum Qualification Strategy requirements	per cent	85	85	85
<i>Quality</i>				
Percentage of new clients to existing clients	per cent	50	50	50
Percentage of residential rehabilitation clients remaining in treatment for 10 days or more	per cent	80	80	80
Successful courses of treatment (episodes of care) – community-based drug treatment services	number	7 385	10 339	7 385
<i>The 2020-21 expected outcome is higher than the 2020-21 target primarily due to the impact of the COVID-19 pandemic on activities.</i>				
Percentage of residential withdrawal clients remaining in treatment for two days or more	per cent	80	80	80
<i>Timeliness</i>				
Median wait time between intake and assessment	days	10	10	10
Median wait time between assessment and commencement of treatment	days	20	20	20
<i>Cost</i>				
Total output cost	\$ million	285.4	260.5	264.8
Total output cost including the CAC	\$ million	292.1	267.3	271.6
<i>The higher 2021-22 target primarily reflects funding provided for government policy commitments; and to align with Commonwealth funding under the National Health Reform Agreement.</i>				
<i>The output cost including the CAC is provided for comparative purposes in the 2021-22 Budget.</i>				
<i>The CAC is discontinued from the 2021-22 Budget.</i>				

Source: Department of Health



Martin Foley MP

Minister for Health

Thursday, 20 May 2021

BUILDING WORLD-CLASS HOSPITALS VICTORIANS CAN RELY ON

The Andrews Labor Government is ensuring all Victorians, no matter their postcode, have access to the highest quality care by building bigger and better hospitals, providing more equipment and upgrading emergency departments right across Victoria.

The *Victorian Budget 2021/22* will deliver more than \$1.2 billion to upgrade and build more hospitals so our health services can deliver the highest quality of care for more Victorians.

The Budget delivers on the Labor Government's election commitment, with more than \$556 million to build and expand 10 community hospitals in Craigieburn, Cranbourne, Pakenham, Phillip Island, Sunbury, Torquay, Mernda, Eltham, Point Cook and the inner south of Melbourne.

This investment will ease strain on existing services, by delivering care at a local level. It also means that if a child falls sick late at night, a teenager breaks their ankle at sport, or if a loved one needs dialysis, local families will be able to get the care they need, close to home.

Our upgrade and expansion of Victoria's hospitals and health services continues, with \$94.8 million for a new world-class hospital in Maryborough, delivering a new day surgery, birthing suites, imaging and pathology services, and urgent care. A further \$98.9 million will expand the Angliss Hospital – including a new inpatient unit.

A \$99.7 million investment will mean our youngest Victorians continue to get the very best care with the construction of new paediatric emergency departments at Maroondah Hospital, Casey Hospital, Northern Hospital, University Hospital Geelong and Frankston Hospital.

An additional \$5.7 million will fund planning and business cases for new adult emergency departments at Maroondah, Casey, Northern, Werribee Mercy and Austin Hospitals.

Not only will this big health infrastructure build deliver better care for local families, it will also drive the creation of more than 2,400 new local jobs.

Hospitals across Victoria will be able to upgrade their engineering infrastructure and medical equipment with \$85 million.

A further \$20 million will be invested in the Regional Health Infrastructure Fund, so regional health services continue to have the facilities they need to respond to the needs of their local community. This brings the total funding to \$490 million and makes it the largest ever investment dedicated to our rural and regional health services.

Recognising the need for more alcohol and other drug (AOD) services – particularly in regional Victoria – this Budget will also deliver \$38.7 million in funding to build and open new residential rehabilitation beds, boost community-based treatment services and deliver specific services for Aboriginal people in Victoria.

This Budget will further deliver on our work to decriminalise public drunkenness and set up a health-based response, with nearly \$10.5 million to roll out trials across the state.

The Labor Government has made unprecedented investments in Victoria's health system, with more than \$133 billion in funding since coming into office – ensuring all Victorians have access to the care, treatment and support they need to stay happy, healthy and well.

Quotes attributable to Minister for Health Martin Foley

“We know the quality of care Victorians receive shouldn't be reliant on where they live, which is why we're building new hospitals and upgrading services right across the state. Even better, it's creating more than 2,400 new local jobs.”

“Whether it's a visit to the emergency room or help for a loved one struggling with addiction – Victorian families deserve the very best healthcare. This Budget and this Government are delivering exactly that.”

“We're continuing to deliver on the commitments we made to Victorians during the last election, including building ten brand new community hospitals right across the state.”

Drug Treatment and Rehabilitation

Decriminalising public drunkenness

Funding is provided to establish the foundations for a health-based response to public drunkenness, implementing the Government's commitment to decriminalise public drunkenness. This includes funding for trial sites, including health outreach teams, transport and sobering up services. Funding is also provided for Aboriginal cultural safety initiatives.

This initiative contributes to the Department of Health's Drug Treatment and Rehabilitation output.

This initiative contributes to the Department of Justice and Community Safety's Justice Policy, Services and Law Reform output.

Medically supervised injecting rooms

Funding is provided to support the continued implementation of responses to the review of the supervised injecting room trial, including operating funding for a further two years of service of the supervised injecting room located in North Richmond and funding to establish a second supervised injecting room in the City of Melbourne.

This initiative contributes to the Department of Health's Drug Treatment and Rehabilitation output.

Mental Health

Victorian Fixated Threat Assessment Centre

Funding is provided for the Victorian Fixated Threat Assessment Centre to continue delivering coordinated responses, through co-located police and mental health clinicians, to serious threats of violence posed by people with complex needs.

This initiative contributes to the Department of Health's Clinical Care output.

This initiative contributes to the Department of Justice and Community Safety's Policing and Community Safety output.