



The Hon Mary-Anne Thomas MP

Minister for Health
Minister for Health Infrastructure
Minister for Medical Research

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Sarah Connolly MP,
Chair, Public Accounts and Estimates Committee
cc
PAEC Committee Members
PAEC Secretariat
Via email: paec@parliament.vic.gov.au

Dear Ms Connolly *Sarah*

Thank you for your letter of 26 July 2023 in relation to the 2023-24 Budget Estimates hearings.

At the recent hearing, I undertook to provide committee member Ellen Sandell MP with information about access to medical and surgical abortion termination services in Victoria, as below.

Timely and safe termination of pregnancy care

Improving access to timely and safe termination of pregnancy care is a priority for the Victorian Government and there is significant work already underway to support women to access the services they need, earlier and closer to home.

The Abortion Law Reform Act regulates health practitioners providing termination of pregnancy services. The Act requires that registered health practitioners who hold a conscientious objection to termination of pregnancy must refer a woman to another registered health practitioner who does not hold a conscientious objection. Available in early pregnancy (up to 63 days), the use of medical termination in Victoria is growing steadily.

In addition to general practice, a network of community-based sexual and reproductive health hubs, public and private health services support women to access to medical and surgical termination services.

The 1800 My Options telephone service and website provides free and confidential advice for people seeking access to contraception, pregnancy options, abortion and sexual health services. The website includes location and service information for services that have registered and chosen to share this information publicly.

The database is continuously growing as new services are bought online and they work with key public and private providers to monitor availability of services, ensuring Victorian women who call the service are provided the best pathways to the services that are available.

The recent Victorian Auditor General Office's (VAGO) report on *Supporting Sexual and Reproductive Health* drew on point in time data from 1800 My Options to identify a number of priority areas for improved access to sexual and reproductive health services in the state's north and west.

The Victorian Government welcomes the report and action is already underway on all three recommendations.

From August 2023, any healthcare practitioner with appropriate qualifications and training, including nurse practitioners can prescribe MS2-Step. Announced by the Therapeutic Goods Administration in July, this important change is designed to further improve access to medical termination.

Working alongside general practice, Victoria's sexual and reproductive community hubs provide access to free or low-cost medical termination of pregnancy and referral for surgical termination of pregnancy. With 11 hubs currently operating across Victoria, this network will expand to 20 by 2025.

The Victorian Government will ensure a needs and equity-led approach for the selection and prioritisation of future locations of new hubs, with reference to available data, service availability and stakeholder feedback.

Our women's health package is also delivering 20 new women's health clinics, a dedicated Aboriginal-led clinic as well as a mobile women's health clinic to reach rural and remote communities.

To help address workforce shortages in women's health and ensure we can better meet the needs of women, we are also delivering \$2 million to provide scholarships for more women's health specialists.

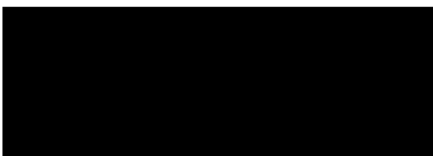
The vast majority of surgical terminations of pregnancy in Victoria are provided before 14 weeks gestation, by a network of public and private providers.

While late gestation termination is less common, there is a real need for these services and our current legislation enables this. In Victoria, the Royal Women's Hospital (the Women's) is one of the key providers of public access to late gestation termination.

The Women's Clinical Champions Network provides state-wide access to training and capacity building within outer metropolitan, regional hospitals and primary healthcare. By responding flexibly (training, advice and mentoring) to needs of individual health practitioners and organisations, the network is designed to improve access to local terminations.

The Victorian Government continues to work with key stakeholders, including publicly funded health services, to identify opportunities for further action and support increased timely and efficient access to termination procedures in the Victorian health system.

Yours sincerely



The Hon Mary-Anne Thomas MP

12/08/23

Public Accounts and Estimates Committee

Inquiry into the 2023-24 Budget Estimates – Questions on Notice

9 JUNE 2023

PORTFOLIO: HEALTH

Members

Sarah Connolly – Chair

Lauren Kathage

Nicholas McGowan – Deputy Chair

Bev McArthur

Michael Galea

Danny O'Brien

Paul Hamer

Ellen Sandell

Mathew Hilakari

Witnesses

- Ms Mary-Anne Thomas MP, Minister for Health Infrastructure,
- Professor Euan Wallace, Secretary,
- Mr Daen Dorazio, Deputy Secretary, Corporate Services,
- Ms Louise McKinlay, Acting Deputy Secretary, Commissioning and System Improvement, and
- Professor Zoe Wainer, Deputy Secretary, Public Health, Department of Health.

QUESTIONS ON NOTICE

Question 1, page 7

Nicholas McGowan: In respect of the I Cook Foods case, can you tell much how much the department has paid in legal fees to date?

RESPONSE

Answer:

The department is covered by VMIA for the legal fees to date, noting that there has been a 25K excess

Source:

N/A

Question 2, page 8

Nicholas McGowan: How many court cases is the department currently involved in?

RESPONSE

Answer:

The Department of Health is a party to 88 matters in Courts and VCAT. This includes cases where the department is undertaking a prosecution under health regulation and

Crimes (Mental Impairment and Unfitness to be Tried) Act 1997 matters involving individuals.

Source:

N/A

Question 3, page 27

Ellen Sandell: And just in terms of sexual and reproductive hubs – a number of them provide services at no cost to patients, but as I understand it, some others, such as the Bendigo hub, have an out-of-pocket cost, for example, for IUDs. Why do they differ across the hubs in terms of the cost?

RESPONSE

- The Victorian Government supports women to make choices that are right for them. Contraception, termination and sexual health services are essential health care. As part of the focus on supporting women's sexual and reproductive health, support for access to safe and affordable pregnancy termination is available.
- Since 2017, the Victorian Government has established 11 women's sexual and reproductive health hubs in community-based health services to improve access to care closer to home. The hubs provide access to affordable contraception methods, medical termination of pregnancy, referral for surgical terminations and STI testing and treatment.
- The 2023-24 State Budget allocated \$10 million to implement sexual and reproductive system strengthening and expansion initiatives as part of the women's health election commitments. This includes the establishment of a further nine women's sexual and reproductive health hubs in community-based health services, ensuring women have access to the care they need, when and where they need it.
- Women's sexual and reproductive health hubs offer free or relatively low fees for services to ensure they are affordable for vulnerable women. State funding is provided to support services to keep costs as low as possible.
- Variations in the out-of-pocket costs for contraception and termination of pregnancy services at the women's sexual and reproductive health hubs arise due to the inadequate Medicare rebates for sexual and reproductive health consultation care as well as limitations in pharmaceutical subsidies.
- The hubs use a hybrid model of care including nurses, nurse practitioners and general practitioners.
- Nurse-led models of care are well accepted and acknowledged as being flexible, reaching people with vulnerabilities and improving patient continuity of care. There are currently no Medicare Benefits Schedule item numbers for nurse-led models of care or sexual health consultations. The

Victorian Government continues to advocate to the Commonwealth for Medicare reform to better support nurse-led models and sexual health care.

- Commonwealth funding through Medicare Benefits Schedule rebates offsets some of the costs for medical consultations. Commonwealth funding through the Pharmaceutical Benefits Scheme subsidises the cost of medications and devices, noting that there is currently no subsidy for non-hormonal copper intra-uterine device.
- In September 2022, the Senate referred an inquiry into the Universal access to reproductive healthcare. The inquiry report was tabled in Parliament on the 25 May 2023 and is now publicly available. The inquiry has recommended that the Australian Government ensures that there is adequate remuneration, through Medicare, for general practitioners, nurses, and midwives to provide contraceptive administration services, including the insertion and removal of long-acting reversible contraceptives. The inquiry has further recommended that consideration is given to subsidising a broader range of contraceptives that are not currently Pharmaceutical Benefits Scheme subsidised.
- Bendigo Community Health Service is one of 11 community-based health services that deliver a women's sexual and reproductive health hub. This service was also one of the three hubs examined by the Victorian Auditor-General's Office performance audit: Supporting sexual and reproductive health. The Bendigo hub delivers services that are bulk billed or have low fees for people eligible for Medicare. There are consultation, pathology and medications costs for Medicare ineligible people seeking care.

Source: Department of Health, Public Health, Sexual Health and Viral Hepatitis. Confirmation with Bendigo Hub.

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