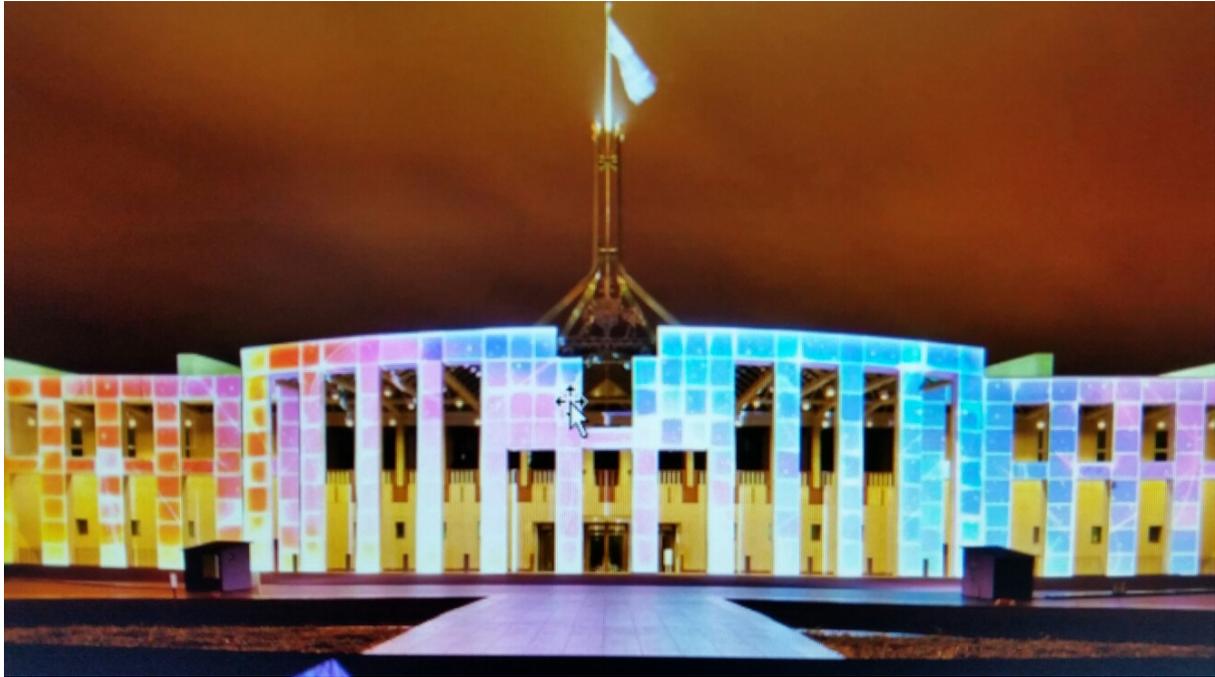


CPMC News- April 2016



Resumption of Parliament and an Election Year

The Governor-General has prorogued Parliament to resume Monday 18 April to deal with several pieces of legislation which may result in an early General Election.

The campaigning has already commenced with launches of policies and the COAG roundtable attempting to deal with how to connect tax reform with microeconomic challenges such as health and education. An election campaign brings forth some opportunities for peak bodies to put forward their suggestions and CPMC has released its Election Statement for 2016. CPMC is calling on all parties to care for health and to do so, a commitment is necessary to maintaining the momentum on system reform and a greater focus on access and equity for people medical specialists provide care for.

This issue of the popular CPMC News will provide a Parliamentary update including an overview of the rules around proroguing and timing of any General Election as well as health reform updates and general news from around the Colleges.

The May CPMC News will feature analysis on the Federal Budget.

Angela Magarry
CEO

PARLIAMENTARY UPDATE

Early Resumption of Australia's Parliament – 18 April 2016

As provided for under S.7 of the Constitution, the Governor-General has the power to prorogue Parliament and did so 21 March, 2016 from 5pm 15th April until 9:30am on Monday 18th April. His Excellency then appointed the 18th April as the day for the Parliament to meet to hold a session and summoned all Senators and MPs to meet that day. The Prime Minister wrote to the Governor-General to state the two reasons for recalling parliament as to give it time to consider two parcels of industrial legislation:

1. *Building and Construction Industry (improving Productivity) Bill 2013 (no. 2) and Building and Construction Industry (Consequential and Transitional Provisions) Bill 2013 (No. 2) and*
2. *The Fair Work (Registered Organisations) Bill 2014.*

The PM noted that for *Item 1* these Bills were rejected by the Senate last year and passed again in identical terms by the House of Representatives for a second time earlier this year. These Bills are currently in the Senate. The Registered Organisations Bill has been rejected twice by the Senate. As indicated by the PM, there are grounds for a double dissolution under s. 57 of the Constitution in respect of *Item 2* the Registered Organisations Bill. However the government wants to have the above Bills passed together rather than invoke the s.57 procedure. You can about this by going to: <https://www.gg.gov.au/sites/default/files/files/gg/2016/Documents%20relating%20to%20prorogation%20of%20the%20Parliament%201%20March%202016.pdf>

Senate Electoral Reforms

The government achieved its Senate electoral reforms on 18 March, after more than twenty-eight hours of debating the changes in the Senate. While Labor and the crossbench delayed the vote, it eventually passed with the support of the Greens party. It was later passed by the House of Representatives 81 votes to 31. What this legislation means is that rather than placing a number '1' above the line on Senate ballot papers or numbering every box below the line, voters now can vote 1-6 above the line in order of their preferences. It will make it harder for micro parties to be elected as they will not be able to swap preferences in order to secure Senate seats.

Calling an election- it is all about timing!

The one thing about Australia's Constitution is that it is not simply a list of rules. It contains provisions to protect against undue use of power, with a series of checks and balances and wherever there is consideration of going to an early election, it is all about the timing. In this instance, in order to call a double dissolution in early July, there was a need to prevent any impact upon other areas of government. The benefit of shifting the Federal Budget forward from May 10th to May 3rd was to avoid having to backdate Senate terms to 2015 as set out in S.13 of the Constitution. Holding an election on 2 July would therefore avoid the need for a half-Senate election to be held before 30 June 2018. Then if you consider S.64 there is a need for results to be called before 11 August as otherwise all senators serving as Ministers would need to leave office on that day. Calling the election requires some considerable knowledge of the Constitution and if you are interested in it you may wish to refer to: http://www.aph.gov.au/About_Parliament/Senate/Powers_practice_n_procedures/Constitution

Alternatively you can read Professor Greg Craven's *Conversations with the Constitution: not just a piece of paper* published by UNSW Press, 2004.

CPMC Election Statement now available at <http://cpmc.edu.au/about-us/policy-statements/Senate-Community-Affairs-References-Committee-Inquiry-into-Medical-Complaints-Processes-in-Australia>

The submissions close on 13 May 2016 with a reporting date of 23 June. This inquiry is broad-ranging and the terms of reference can be found

at: <http://www.aph.gov.au/Parliamentary-Business/Committees/Senate/Community-Affairs/Medical-Complaints>

CPMC released a statement on 7 December 2015 which said that while discrimination, bullying and sexual harassment (DBSH) is an issue in the broader health sector, it does not mean it is widely prevalent in Australia's medical profession, but all Colleges take these issues seriously and are prepared to make adjustments as necessary to prevent it from occurring. It should be noted that while all Colleges are making considerable efforts to improve processes they cannot do it alone, and there needs to be greater engagement by employers and the regulators to achieving change. CPMC has lodged its submission to the inquiry and should hearings occur, will appear before the Community Affairs References Committee.

Senate Committee Enquiries now numbering 66 enquiries across 21 Committees.

In relation to whether Senate committees continue to operate following a prorogation, this can occur because of the Senate's status as a continuing House. There are resolutions and Standing Orders which allow for their continuation. The power of the Senate to authorise its committees to meet is based in the Constitution.

Senate Select Committee on Health has been established to inquire into and report on health policy, administration and expenditure. It will look at integration between the system as well as funding but also at ToR (g): health workforce planning. The Committee is holding public hearings around Australia and is accepting submissions with a view to reporting by 20 June, 2016. You can find out more by going

to: <http://www.aph.gov.au/Parliamentary-Business/Committees/Senate/Health/Health>

GOVERNMENT UPDATE

COAG UPDATE – 42nd meeting was held in Canberra

The Council of Australian Governments (COAG) is the peak intergovernmental forum in Australia comprising membership by the Prime Minister, State and Territory Premiers and Chief Ministers and the President of the Australian Local Government Association. On Friday 1 April, 2016 COAG met in Canberra where a key focus was on hospital funding and exploring changes to federation.

Heads of Agreement for Public Hospitals from 1 July 2017 to 30 June 2020

COAG reaffirmed that providing universal health care for all Australians is a "shared priority" and an additional \$2.9B in funding for public hospitals services was provided by the Commonwealth capped at 6.5 per cent per year. Preservation of activity based funding and the national efficient price was agreed along with continuing a focus on improving patient safety and the quality of services, and reducing unnecessary hospitalisations.

You can find the Communique here: <https://www.coag.gov.au/node/537>

COAG Health Council meeting as the Australian Health Workforce Ministerial Council met on 8 April 2016 in Perth to discuss a range of issues. The Council considered the recommendations of the final report on NRAS and they have decided not to consolidate nine of the National Boards – Ministers accepted that efficiencies can and should be achieved by streamlining existing committee and operational arrangements under all the National Boards. You can read more about this by going to: www.coaghealthcouncil.gov.au/Projects/Independent-Review-of-NRAS

Health Reform Update: The Australian government has launched *A Healthier Medicare for chronically ill patients* which it says will revolutionise the way care is coordinated for people with chronic and complex diseases. The aim is to avoid hospitalisation for issues which are able to be managed by better coordination of services. You can find out more about this package at: <http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2016-ley021.htm>

MBS Review Update: The fourth issue of the MBS Review Taskforce Newsletter is available on the Department of Health's website: <http://www.health.gov.au/internet/main/publishing.nsf/Content/MBSR-newsletters>

Machinery of Government changes announced by the Department of Health relating to transferring of health provider compliance became effective on November 2015, and since then the Department has been actively engaging with key stakeholders to discuss the new Compliance Strategy 2016, and ways to collaborate on compliance and related issues. You can find out more at: <https://www.health.gov.au/internet/main/publishing.nsf/Content/compliance-health-professional>

CPMC National Health Summit on Obesity: Wednesday 9 November 2016

In Australia, obesity is because it is fast becoming our biggest health challenge with 62% of the population overweight or obese in 2008, and in 2015 the projection is 75%. Overweight and obese people are at higher risk of cancer, type 2 diabetes, heart disease, and other life-threatening illnesses.

CPMC released a statement on the need for Australia to introduce a tax on sugary drinks. <http://cpmc.edu.au/media-release/australia-needs-to-consider-a-tax-on-sugary-drinks/>

The Australian government's policy approach is to encourage people to be more responsible and they have initiated a Health Food Partnership which is focussed on making achievements in the food aspect. The group has broad representation from the industry and CPMC will extend an invitation to ensure adequate representation is from the food industry at the Summit.

It is fair to state that while there is a lot of discussion going, there is a fragmented response to what needs to happen to arrest the rising rates of obesity in Australia. Leadership is necessary and CPMC is well positioned to take the lead. We will bring together key stakeholders to provide the expert research and opinion and discuss ways to reduce and eliminate obesity in Australian society. Watch this space for updates including a dedicated webpage for the Summit featuring the program, speakers profile and other relevant information.

Support for Rural Specialists in Australia receives government funding!

CPMC is pleased to be able to continue our work in supporting medical specialists in rural areas. With the conclusion of the Rural Health Continuing Education program, CPMC made representations to government to continue to support rural specialists and build upon the good work of RHCE. CPMC has been advised of government funding over a three year period for a new program known as Support for Rural Specialists in Australia (SRSA) and the development of a funding instrument is underway. The grant funding program will be for rural medical specialists only. In the transition period the www.ruralspecialist.org.au website will be updated to reflect a more modern website and it will also be continued as the SRSA website. All the existing material will remain insitu. This funding is a very positive outcome for Australian rural specialists and reflects the Health Minister's concern to ensure quality medical care is available in rural and regional Australia.

CPMC MEMBERSHIP UPDATE

Farewells



CPMC will farewell **Professor Bala Venkatesh** in June as he will complete his term as Director, and as President of the College of Intensive Care Medicine. Professor Venkatesh has been an active member of the CPMC Board and also on the Executive.

We will update you on the new CICM President in the next newsletter.



CPMC will farewell **Professor David Watters, OBE** as President of RACS. Professor Watters has been an active member of the CPMC Board and has lead a number of discussion items throughout his term. He has also been an active contributor on the Executive. Professor Watters is replaced by Dr Phil Truskett as RACS President.

Introducing: Professor Tony Lawler, President, Australasian College for Emergency Medicine



Tony practises clinically at Royal Hobart Hospital, Tasmania. He also has roles as Associate Professor in Health Services at the University of Tasmania, and Director of Acute Planning and Strategy and Principal Medical Advisor with the Tasmanian Department of Health and Human Services. He is a member of the Australian Medical Council's Special Education Accreditation Committee, a Director of the Postgraduate Medical Education Council of Tasmania,

and a member of the National Health and Medical Research Council. Tony is also a Director on the Board of HealthDirect Australia.