



Parliament of Tasmania, Hobart, TAS, 7000
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Sessional Committee GOVERNMENT ADMINISTRATION 'A'

Tel: 03 6212 2249
Email: rur@parliament.tas.gov.au

1 July 2021

To whom it may concern,

Re-establishment of Inquiry into Rural Health Services in Tasmania

On behalf of the Legislative Council Government Administration Committee 'A' Sub-Committee Inquiry into Rural Health Services in Tasmania, I wish to notify you that the sub-committee inquiring into rural health services in Tasmania has been re-established following the prorogation of Parliament due to the State Government election called in March 2021.

At its meeting on Tuesday 29 June 2021, the sub-committee resolved to accept all evidence and papers received prior to the prorogation of Parliament into evidence. The submissions received by the inquiry have been published on the webpage (https://www.parliament.tas.gov.au/ctee/Council/GovAdminA_RuralHealth.htm).

Please be advised that there has been a broadening of the terms of reference to now include mental health services for Tasmanians living in rural and remote Tasmania. This broadening of the terms of reference was enabled by the Ministerial reshuffle that occurred in the new Government meaning the new Minister for Health, Mr Jeremy Rockliff MP, now also holds responsibility for the Mental Health and Wellbeing portfolio.

I would therefore like to provide you with an opportunity to add any additional information to your submission (either as an addendum or as a revised submission) should you have anything to add as a result of the expansion of the terms of reference to include mental health services. Should you have nothing further to add to your submission, no additional action is required by you.

A copy of the current Terms of Reference for this inquiry is attached for your information.

Should you have anything to add to your submission, please forward to the Inquiry Secretary at rur@parliament.tas.gov.au by **no later than close of business on Friday 13 August 2021**.

Alternatively written submissions can be forwarded to —

The Inquiry Secretary
Legislative Council Government Administration Committee 'A'
Inquiry into Rural Health Services in Tasmania
Legislative Council
Parliament House
HOBART TAS 7000
Tel: 03 62122249

Yours sincerely

A handwritten signature in black ink, appearing to read 'R Forrester', with a stylized, cursive script.

Hon Ruth Forrester MLC
Inquiry Chair

Terms of Reference:

To inquire into and report on health outcomes and access to community health and hospital services for Tasmanians living in rural and remote Tasmania, with particular regard to:

1. Health outcomes, including comparative health outcomes;
2. Availability and timeliness of health services including:
 - a. Ambulance services;
 - b. Primary care, allied health and general practice services;
 - c. Non-GP specialist medical services;
 - d. Hospital services;
 - e. Maternity, maternal and child health services;
 - f. Pain management services;
 - g. Palliative care services;
 - h. Pharmacy services;
 - i. Dental services;
 - j. Patient transport services;
 - k. 'After hours' health care;
 - l. Indigenous and culturally and linguistically diverse (CALD) communities;
 - m. *Mental health services*; and
 - n. Other.
3. Barriers to access to:
 - a. Ambulance services;
 - b. Primary care, allied health and general practice services;
 - c. Non-GP specialist medical services;
 - d. Hospital services;
 - e. Maternity, maternal and child health services;
 - f. Pain management services;
 - g. Palliative care services;
 - h. Pharmacy services;
 - i. Dental services;
 - j. Patient transport services;
 - k. 'After hours' health care;
 - l. Indigenous and culturally and linguistically diverse (CALD) communities;
 - m. *Mental health services*; and
 - n. Other
4. Planning systems, projections and outcomes measures used to determine provision of community health and hospital services;
5. Staffing of community health and hospital services;
6. Capital and recurrent health expenditure;
7. Referral to tertiary care including:
 - a. Adequacy of referral pathways;
 - b. Out-of-pocket expenses;
 - c. Wait-times; and
 - d. Health outcome impact of delays accessing care;
8. Availability, functionality and use of telehealth services; and
9. Any other matters incidental thereto.