

A healthy Victoria

Significant initiatives

- **Giving women’s health the focus and funding it deserves**
 \$23.8m in 2023-24 (\$153.9m/4 yrs) to improve access to services and promote best-practice management of women’s health issues. This includes establishing 20 new women’s health clinics, a dedicated Aboriginal-led clinic, and sexual and reproductive health hubs. The funding will also deliver an additional 10,800 laparoscopies, provide scholarships to increase availability of women’s health specialists, and deliver an inquiry into women’s pain management.
- **Alcohol and other drug (AOD) treatment, support and harm reduction services**
 \$51.2m in 2023-24 (\$160.1m/4 yrs) to continue the delivery of AOD services, including the Medically Supervised Injecting Room in North Richmond, outreach services, treatment and withdrawal beds across nine locations, navigation and advocacy services, and surveillance of emerging drugs. Funding will also increase access to pharmacotherapy, support 84 new AOD trainee positions, expand Victoria’s naloxone supply program, and expand U-Turn, a Men’s Behaviour Change Program, into the Hume program.
- **Health-based response to public intoxication**
 \$25.4m in 2023-24 (\$53.4m/3 yrs) for the statewide rollout of the health-based response to public intoxication, including dedicated services for Aboriginal Victorians and central clinical and referral support services.
- **High quality and therapeutic bed-based services (mental health clinical care)**
 \$45.2m (\$156.6m/4 yrs) to operationalise 72 beds in Victoria’s mental health system to improve access to acute care for those experiencing mental illness. This includes funding to increase the availability of supports for people with an eating disorder, through the opening of a new state-wide residential eating disorder treatment centre. It will also support the continuation of Consultation Liaison Psychiatry Services and deliver 24 Hospital in the Home beds to provide acute mental health treatment, care and support in the comfort of a person’s home or usual place of residence.
- **Mental Health and Wellbeing Locals**
 \$22.5m in 2023-24 (\$90.5m/4 yrs) to:

 - Continue delivery of mental health and wellbeing supports through the Mental Health and Wellbeing Hubs and the Partners in Wellbeing program.
 - Establish three new Mental Health and Wellbeing Locals in Northcote, Leongatha and Narre Warren.
 - Plan for a further 20 Mental Health and Wellbeing Locals.
 - The Mental Health and Wellbeing Locals will provide integrated mental health treatment and wellbeing supports delivered by a multidisciplinary team.
- **Improving access and equity of service delivery**
 \$28m (\$41m/2 yrs) to continue the reform of mental health community-based and statewide services, including the Perinatal Emotional Health Program, the Mental Health Statewide Trauma Service and targeted services delivered by Eating Disorders Victoria, ARCVic, Perinatal Anxiety and Depression Australia (PANDA) and The Compassionate Friends Victoria.
- **Priority suicide prevention and response efforts**
 \$7.5m in 2023-24 (\$17.7m/3 yrs) to continue universal aftercare services as part of the Bilatera

agreement between the Commonwealth and the Victorian Government, and the expansion of LGBTIQ+ suicide prevention and mental health services. Funding also continues delivery of social and emotional wellbeing supports and suicide prevention services through the Strong Brother Strong Sister program for Aboriginal young people in the Geelong region, and continues delivery of the Youth Live4Life program for young people living in rural and regional Victoria.

- Strengthening and supporting the mental health and wellbeing workforce**
 \$4.1m in 2023-24 (\$11.8m/4 yrs) to continue the Earn and Learn and Aboriginal Traineeship programs, attracting new workforce by providing concurrent opportunities for education and on-the job learning.
- Targeted health support for children in care**
 \$4.6m in 2023/24 (\$37.8 m/4 yrs) to deliver multidisciplinary health assessments, access to in reach nursing, and health management plans to improve health outcomes for up to 5,000 children and young people in state care.
- Pathways to home**
 \$9.1m in 2023-24 to transition those who are well enough for discharge from hospital, including people with a disability, into home-like settings that are equipped to meet their needs. This will ensure people are not stuck in hospital longer than they need to be, making more hospital beds available to treat patients who need in-hospital care.
- Prevention and early intervention of chronic and preventable health conditions**
 \$41.9m in 2023-24 to continue the delivery of Priority Primary Care Centers and GP Respiratory Clinics to relieve pressure on emergency departments, as well as funds to maintain access to community-based care, continue services to refugees and asylum seekers and deliver a range of skin cancer prevention initiatives.

What's good

- A rich body of data and research – and women's lived experience – shows clear gender inequality in women's health. This Budget makes good on the Government's election commitment to elevate women's health through the establishment of new, dedicated clinical services and investments in research and workforce development. This is one of the highlights of the 2023-24 health budget.
- This Budget puts an additional \$520 million into the state's mental health and wellbeing system. Mental health peak bodies have noted that the investment choices made by government provide stability to service providers and consumers while ongoing reforms continue to mature. The investment in services is complemented by substantial investment to help establish and operate new and existing entities under the new *Mental Health and Wellbeing Act 2022*. The Budget papers identify that these dollars will be targeted to the Mental Health

What's missing

- The Budget papers bring into sharp relief the amount of funding going into acute care compared with preventive health care, admitted services compared with non-admitted services, and hospitals and hospital-based services compared with community health. VCOSS appreciates the important role of hospital services in the lives of Victorians – it's crucial that, no matter where people live, they have access to vital life-saving care and other health interventions that can only be delivered by and in hospitals. We recognise – for example – that the Budget commitment of \$560.7m in 2023-24 to meet the needs of Victorian public hospital services (\$2.328 billion/4 yrs) supports the delivery of quality patient outcomes, operationalises new and expanded facilities, and addresses the impacts of COVID-19 on public hospitals and the increasing costs of delivering healthcare. It also includes investment in blood products. These

and Wellbeing Commission, the Victorian Collaborative Centre for Mental Health and Wellbeing, the Office of the Chief Psychiatrist, and the Mental Health Tribunal, as well as funds for continued operation of the eight interim Regional Bodies (which coordinate and plan mental health and wellbeing services across Victoria).

- This Budget makes sensible investments to extend funding for existing AOD residential services. \$9.9m is provided over the next two years to provide additional support for nine opioid pharmacotherapy clinics in metropolitan and regional Victoria. Pharmacotherapy supports over 15,000 Victorians, and we welcome investment to increase access to this critical health program.
- With winter on its way and COVID placing enduring strain on Victoria's hospitals, we welcome the continuation of GP Respiratory Clinics (including those delivered by Community Health services) and Priority Primary Care clinics, as well as additional funding to maintain access to community-based health and services for refugees and asylum seekers in Victoria. The pandemic has demonstrated just how vital these services are to keep the community well and out of hospital.
- Like other states and territories, there is a well-documented shortage of General Practitioners in Victoria. We are pleased that the Victorian Government will help improve access to primary care by providing doctors with incentives to undertake GP training. While this will not address immediate access issues, or the cost of accessing private General Practice, we note there are a range of recently-announced Federal Government Budget measures intended to improve access to bulk billing.
- VCOSS welcomes a further year of funding for the Home and Community Care Program for younger people who are not eligible for the NDIS and need assistance with personal care, preparing meals and other daily activities.

investments are both important and necessary, and will be greatly welcomed by communities around the state and healthcare workers.

However, from a social and community services perspective, it's vital this is coupled with strategic investment in health promotion, disease prevention, early intervention and action on the social determinants of health, along with health maintenance and continuing care services – and that this investment is located in community health services.

Our 2022 election platform and submission to the 2023 Budget remain relevant. We continue to call for:

- Increased core funding and longer contracts to the community health sector so services can meet current demand and respond to increasingly complex community needs.
- Increased provision of non-acute and out-of-hospital care by the community health sector.
- Greater access to health infrastructure grants.
- Significant investment is going into Local Public Health Units (LPHUs) – including some resources previously located in community health for preventive healthcare initiatives. VCOSS welcomes all investment in prevention – but believes this funding is optimally placed with community health, leveraging off existing place-based system architecture, deep knowledge of communities, established cross-sectoral networks and partnerships, and in-reach to highly marginalised cohorts otherwise characterised as 'hard to reach' or 'hard to engage'.
That said, we do understand this decision is now made. Going forward, it will be important for the work of the LPHUs to be rendered more visible to other public health actors and social and community services that address social determinants and contribute to health and wellbeing outcomes. The LPHUs largely remain opaque to our sector, and this is a concern given they subsumed – and were meant to sustain – 'high-value' functions from the

former Primary Care Partnerships (catchment-based alliances of health and social services providers).

- More could be done to address health inequities and access to healthcare for rural and regional Victorians. In future budgets, we would like to see investments that support the existing healthcare workforce to work to their full scope of practice through innovative models such as the [Community Paramedic model](#), which is currently being implemented by Sunraysia Community Health Services. This initiative deploys paramedics in community to deliver evidence-based chronic disease prevention, management, and health promotion programs that are shaped around addressing the social determinants of health. We would like to see this model trialled in more sites across Victoria through the Early Intervention Investment Framework.
- The Community Connectors program has been defunded. This initiative – a post-COVID successor to the High Risk Accommodation Response Program – has been delivered in high-density public housing clusters in Melbourne and other priority settings around the state. It has levered off the high-trust relationships and place-based expertise of community health services, employing teams of local residents, people with lived experience and health promotion workers to link people at their doorstep to preventative and early intervention health and social care services. For relatively modest outlay, Community Connectors has been a high-impact initiative that improves health equity for people who are experiencing deep exclusion and need active linking to connect to much-needed support. Community Connectors is exactly the type of program the government should sustain investment in, to drive down long-term demand and cost pressure on expensive, over-stretched acute services.
- This Budget provides \$10m over two years for 84 trainee positions for graduates of the Cert IV in AOD. While we welcome a focus on a pipeline of new workers in the sector, this Budget misses an opportunity to invest

in 250 full-time clinicians needed to meet the current unmet demand for AOD treatment. Looking ahead, future investment should fund the development of an industry plan for the sector, to ensure adequate workforce and infrastructure to meet increasing and more complex needs.

- About 1.5 million Victorian adults are eligible for public dental care, but very few receive any. On average, it takes almost two years to see a dentist. The performance measure in this year's Budget papers specifies 23 months as the target wait time for general dental care. We continue to be concerned about the systemic under-investment in public dental care for adult Victorians.