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# **Body**

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Prime Minister

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**ANNE ALY**, MINISTER FOR EARLY CHILDHOOD EDUCATION: Good morning, everyone. And welcome to the electorate of Cowan and the suburb of Morley. It's wonderful to welcome back the Prime Minister on his second trip to Western **Australia** as part of his commitment to visit Western **Australia** ten times a year - an honorary Western Australian, if I might say so. And also to welcome the Federal Health Minister Mark Butler, and of course, the State Health Minister Amber-Jade Sanderson, who is also the Member for Morley, here to visit what could be a potential Urgent Care Clinic site. I'll hand over to the Prime Minister to talk a little bit more about the Albanese Labor Government's commitment to Urgent Care Clinics.

ANTHONY ALBANESE, PRIME MINISTER: Well, thanks very much, Anne. And it is great to be back in Western Australia for what is an exciting announcement. We, today, are announcing the expressions of interest for seven Urgent Care Clinics here in Western Australia. They will be in Perth City area, in Joondalup, in Rockingham, in Murdoch, in Midland, in Bunbury and in Broome. We hope to have the first three of those up and running by 1 July, and the last four to be up and running in 2023. Urgent Care Clinics are a common sense solution as part of our Strengthening Medicare program that we went to the election absolutely committed to do. Tomorrow night, I'll be presenting to the Premiers and Chief Ministers the Strengthening Medicare Taskforce report. But one of the measures that we believe will take pressure off emergency departments of hospitals are these Urgent Care Clinics. It's about two things - allowing people to access a doctor when they need it at an affordable rate, and then making sure that we take pressure off emergency departments. These Urgent Care Clinics will provide the sort of care that isn't an acute care, doesn't require an emergency specialist, but can be provided at a centre that looks something like this one here. Here you can get pathology services, X rays, there's a pharmacist on site as well, so that if your young one falls off a skateboard and breaks an arm there's somewhere they can go. At long hours as well, the

Urgent Care Clinics will be open until 10pm at night. The services will be bulk billed. So this is about better healthcare when it's needed, where it's needed, but also taking pressure off our hospital system. Quite clearly, we need to have a better way of engaging primary healthcare that the Commonwealth has responsibility for. With the hospital sector, that's a responsibility primarily of the states, but we can work better together. And I'm very pleased that the WA Government have been working with us on this announcement today. From today, those expressions of interest will result in better care for people in the community.

MARK BUTLER, MINISTER FOR HEALTH: As the Prime Minister has said, we went to the election very clearly hearing the message from Australians that it has never been harder to see a doctor than it is right now. And after six years of a Medicare rebate freeze by the former Government, it's also never been more expensive. We know that around half of all presentations to emergency departments around the country, including here in WA, are classified as non-urgent or semi-urgent, about four million ED presentations each and every year. We know that many of them could be quite adequately cared for in the community, in a setting like this, if people had the availability, if people knew they could get in to see a properly qualified doctor or nurse and other health professionals free of charge. And that's what we're responding to with our urgent care centre policy. I'm delighted that we're able to announce the expression of interest for the seven centres we promised at the last election here in Western Australia. Can I say, we've had terrific cooperation from all state and territory governments including the Western Australian Government. And as a result of deep work with them both at a ministerial level and at officials level, we've been able to agree with them locations for all 50 services, we've been able to agree operational rules and, very importantly, we've also been able to agree on protocols that will exist between the urgent care centres, local emergency departments and ambulance services as well, to make sure that people are going to the right place to get the right care from fully qualified health professionals. As the Prime Minister has said, these services will be open from 8am until 10pm at night. They must be available for walk-in, so not just their existing patient book. And they must be offering services completely free of charge. That's the commitment we made the last election. I'm delighted we've had such a level of cooperation by Ministers like Amber-Jade Sanderson and her equivalents right across the country. And we're really delighted that we'll probably see the first urgent care centres in the country rolled out here in Western Australia.

AMBER-JADE SANDERSON, MINISTER FOR HEALTH: I want to welcome the Prime Minister and the Federal Minister for Health to Morley and our local Federal Member *Anne Aly*, the Member for Cowan. This is a great progression in our development of supporting our community to access primary care. This clinic that we're in today in Morley as a really good example of a multidisciplinary clinic that can see and treat patients as they present when they have urgent but not necessarily need emergency care. We will work closely with the Commonwealth to ensure that we have an integrated primary, secondary and tertiary healthcare system. For these clinics to work well, they do need to be able to communicate and be integrated with local emergency departments. They also need to be bulk-billed. It's about getting the right care at the right time in the right place for people. And that is our commitment as a state government. And we will work very closely with the Commonwealth to ensure that we can do that. We very much welcome the findings of the Medicare Taskforce and the commitment from the Federal Government to ensure that people in the community have better access to primary care in their community. Western *Australia* has the lowest number of GPs per capita of any state and territory. And as a result, we get the least amount of Medicare rebate. It's important that we increase that and it's important that we have a model that also supports GPs in our rural and remote communities.

JOURNALIST: Is there a Federal plan to staff these centres? Because there's a chronic shortage right now of health care professionals in WA and across the country. So, opening all these by the end of the year is going to increase that.

BUTLER: What I'd say is that the cases that are going to come to an urgent care centre are gonna be dealt with somewhere. These are emergencies, they might not be life threatening emergencies, but they are emergencies that have to be cared for either in an existing GP practice, or more likely in a hospital emergency department. We've obviously engaged very closely, not just with states and territories, but also with the sector itself about workforce issues. Yes, there are workforce challenges in health right across the country, at every single level of the system. But talking to providers like this one, they tell us very clearly that if we have a properly funded model that's properly

integrated, as Minister Sanderson said, with state systems, there will be doctors and nurses and other allied health professionals desperately keen to work in a model like this.

JOURNALIST: So, if you've got a model like this at a GP clinic and people push in, the GPs working here have to just say, 'No, sorry, I can't see you. I've got a more urgent case'. So, they bump the ones that have booked in and take the more urgent cases?

BUTLER: Obviously, we're not going to be doing that. This is a service that sits on top of existing GP practices. This will not be simply funding to continue practice as operating business as usual, this has got to be an additional service. It's an additional service. That will mean sometimes the doctors might be providing some services in the general practice at times and in other shifts, providing services in the urgent care centre. That will obviously be a matter for existing practices to put in place through their expression of interests. What we've been very clear not to do is to build new clinics that will be operating or setting up in competition with existing practices. That was the very clear message I got through peaks like the AMA and the College and individual practices as well. They're doing it tough right now. The last thing they need is the Commonwealth Government to build and set up a practice that operates in competition with them. What we want to hear is practices in communities like this that want to take the next step, really lift the operation of their practice, to deliver a service their community needs, but is not getting right now.

JOURNALIST: In terms of funding, there have been all sorts of concerns raised about Medicare rebates. Has the Federal Government committed to fill in that gap?

BUTLER: One of the challenges with urgent care models, and some have been tried here in WA by the last Commonwealth Government, is that that the existing MBS in and of itself doesn't sustain the urgent care model. And we've heard that message loud and clear. So, the model we committed to at the last election, the one that will underpin the expression of interest process, provides one-off grants for services to buy some equipment they might need to deliver this extra level of service, something additional to a standard general practice. They'll get block funding to ensure they can sustain the staffing that's needed in a service like this, as well as having access to the MBS. Now, that's all quite new. That's why *Australia* doesn't have the sort of urgent care level of primary care practice you see in so many other countries in the developed world, particularly over the ditch in New Zealand. This is the first time you've seen, across the country, a model that we're confident will sustain an actual urgent care service in the long term. As to your general questions about Medicare, as the Prime Minister has said, we've been working very cooperatively with doctors groups, patient groups, nurses group, allied health groups, and many others to to develop the Strengthening Medicare Task Force report and the Prime Minister has committed to presenting that at National Cabinet later this week.

JOURNALIST: You mentioned those trial clinics that were set up by the previous Government. Two of those are in suburbs where you're intending to start these new clinics. Will that not be a doubling up or will St John, who I think run those clinics, be able to apply through the EOI?

BUTLER: Well, the EOI will be open to all general practices, community health centres and Aboriginal community-controlled organisations. So, of course, all services that meet those criteria will be able to apply. The problem with the St. John of God model that the former Government set up is it didn't recognise that the operating costs of this type of service are over and above what you would expect from a standard general practice, particularly the requirement that the staffing be open beyond 6pm into 10pm, and be fully bulk-billing. Now, we've heard the message very clearly from the community that that's what they needed to take a decision not to go to the local emergency department. And we've heard from organisations like this one, that has been doing quite a bit of urgent care around the country, that the existing funding model just wasn't sufficient to sustain a fully developed urgent care service. And if we don't find a way to sustain a fully developed urgent care service, we won't make it easier for people to see a doctor and we won't relieve the pressure that you currently see on all of our emergency departments across the country.

JOURNALIST: You said the last thing you want to do is compete with existing services. But how do you practically achieve that at a staffing level when there's such a short supply of doctors and nurses?

BUTLER: Well, there is a challenge getting enough GPs and nurses and other doctors into our health system right now. This is something that we've been grappling with in our Strengthening Medicare Taskforce. It's something that the Health Ministers Group, which meets very regularly to grapple with some of these workforce challenges that, frankly, have been aggravated by the pressures of the pandemic. So, this is not an issue particular to urgent care. It's something we're grappling with across the healthcare system. But it doesn't mean not we're simply going to sit on our hands and not proceed with a model we know is going to relieve pressures elsewhere in the system and make it easier to see a doctor than it is right now.

JOURNALIST: Have you done any modelling on how many staff will actually need to staff 50 centres?

BUTLER: The expression of interest process is going to tease that out. And frankly, it will be different in different parts of the community. You would expect an urgent care centre in the middle of a major city like this one, probably to be larger than some of the rural and regional urgent care centres that we've committed to elsewhere in the country. So, there's not a cookie-cutter approach to this, which is why we're engaging primary health networks that are that are so closely connected to their general practice community. And we're seeking those expressions of interest to make sure that the proposals that are put in suit the local needs of the community.

JOURNALIST: Are you expecting that number to be in the hundreds, dozens, or thousands?

BUTLER: Well, there's 50 services so you're certainly going to be into more than the dozens, you're going to be into the hundreds. They're operating seven days a week, they're operating from 8am to 10pm. But in the context of a system that that numbers tens and tens and tens of thousands, it's a relatively small number. And as I say, these people are being cared for by health professionals somewhere. This is not discretionary care we're talking about. This is not optional care. This is when little Joey falls off the skateboard and breaks the arm, they're either going to a hospital and taking out very substantial resources, or they're coming to a service like this.

JOURNALIST: Prime Minister, we saw you visit Alice Springs last week. (Inaudible).

PRIME MINISTER: I was in Fitzroy Crossing just a few weeks ago. This is my second visit to WA. I will be visiting Port Hedland and taking my entire Cabinet to Port Hedland later this month. And we're just finalising the details of that, in the week beginning, I think it's Monday the 20th or 21st, around that around that time. So in a few weeks' time. I visited Albany towards the end of last year. I am a regular visitor to WA, I will try to get around to all of this great big state as I try and get around to all of our very large country, whether it is our cities or our regions.

JOURNALIST: (Inaudible).

PRIME MINISTER: I think you will find that the visit to Fitzroy Crossing was very much with the community. We discussed a whole range of issues there, not just the impact of the flood, but we talked about the nature of issues that were there. We talked about employment. I was there with Pat Dodson and others as well, including the Premier of WA, Mark McGowan. But I will be getting around, as I do, around the country. In the last week I have not just been to Alice Springs. I have been to Devonport in Tassie, I have been to Bendigo in regional Victoria. I get around our regions and our cities and I look forward to doing so here in WA.

JOURNALIST: Prime Minister, the RBA says that interest rates have peaked. Are you confident that Australians will receive some rate relief?

PRIME MINISTER: Well, I am always conscious of the fact that the RBA are independent of government. But I certainly am very conscious that when they make their decisions, they give consideration to the impact of them. We know that people are under real pressure when it comes to cost of living. And that is why my government has done cheaper medicines, which came in on January 1 and fee-free TAFE for 180,000 Australians that starts this year. That is why we have cheaper child care coming in on 1 July. That is why we welcome the fact that wages has started to move again. But it is also why we brought down a very responsible Budget that didn't put more pressure on inflation last October, why we banked the increases in revenue which were there, 99 per cent of them we put in the bank because we understood the pressure that was there. Inflation is a global challenge. Some of it arises from the shock that occurred with the Russian invasion of Ukraine and supply chain issues throughout the world. So it is

something the whole world is grappling with and it is something that the government is very conscious of and we will be conscious of in the lead up to the budget as well.

JOURNALIST: And you have faith in the RBA to do the right thing?

PRIME MINISTER: I have faith in the RBA and its processes, which are at arms length from the Government.

JOURNALIST: The Northern Territory's Chief Minister says there will be no knee-jerk reaction to the review on alcohol. How quickly do you expect action to be taken once you receive that review? And how significant will that action be?

PRIME MINISTER: Last week there was already some action taken, which, when I spoke to the Chief Minister this morning, she reported that it was already making a difference. I want to act as soon as possible. I want to not delay, but I also understand that some of these issues are intergenerational. There are not easy, off-the-shelf solutions. It is not just about alcohol. It is about employment, it's about service delivery, it's about getting staff on the ground. You can fund programs, if you don't have people to do the services then that can create an issue as well. It is about community services, last week when I was there, I announced more than \$20 million of funding that was all due to end for community service delivery on June 30 of this year, programs that essentially just stopped. We need to examine all of these issues. When I receive the report, I of course will read it. I will sit down with the Chief Minister tomorrow, the meeting of the National Cabinet begins tomorrow night and goes into Friday morning, and I look forward to constructive engagement.

JOURNALIST: Have you received that report?

PRIME MINISTER: No.

JOURNALIST: Will you implement its recommendations?

PRIME MINISTER: I haven't seen it.

JOURNALIST: When you do receive it, will it be made public?

PRIME MINISTER: When I see it I will discuss it with the Chief Minister. I certainly think it should be made public. I haven't received it yet, so it is a bit hard to make it public. It is due today, I expect to receive it later today or if not early tomorrow morning. I will go back to Canberra for the National Cabinet meeting.

JOURNALIST: It is described as an initial or an interim report. Do you anticipate there will be things you will be able to do off of that initial report or will you wait for the final report?

PRIME MINISTER: I certainly hope so. If there are recommendations which suggest immediate action then I'm certainly up for it.

JOURNALIST: And that could include dealing with the opt-out alcohol restrictions?

PRIME MINISTER: I haven't seen the report yet, so it is a bit difficult to comment on something that I haven't received. I'm not sure if it has been completed. It is due today.

JOURNALIST: You said there had already been impacts from the restrictions that had come in, what were those impacts? What was she saying?

PRIME MINISTER: She spoke to the police, who were indicating to her that there were some positive outcomes with a reduction in the figures that were there for various crime issues.

JOURNALIST: What you hope that Peter Dutton takes away from the Voice working group meeting? And do you think he will get enough details in that?

PRIME MINISTER: Well, I hope that Peter Dutton joins the call from the Uluru Statement from the Heart to walk with Indigenous Australians on the path of reconciliation. This referendum is about two things, just two things: recognition and consultation. Recognition of Aboriginal and Torres Strait Islander peoples as our First Nations people, that is the what. The how is the consultation mechanism, which is there in the draft wording that I've forwarded, the three points that I've advanced. I'm yet to receive any proposed changes to that wording. But I hope he goes and meets with the Referendum Working Group that I've met with twice with an open mind, and importantly as well, an open heart. This is something that should be well above politics. This is a chance to unite the nation. This is a chance for us to be proud of sharing this continent with the world's oldest continuous culture. And saying to them, something I regard as good manners, if you are going to have an impact on someone or a group of people, ask them about it. And chances are you'll get better outcomes as well. Because we know that when people have been consulted and engaged - whether it is justice reinvestment, Indigenous Park Rangers, community health programs - you get better outcomes when people are involved. And that is a principle that applies across the board. One of the things we are talking about here today with urgent care clinics is something that has arisen from discussion with health providers on the ground, consumers, the AMA, the Royal Australian College and others all having that input. They have had input into the Medicare Task Force report that will go to National Cabinet this week

JOURNALIST: Greens Senator Dorinda Cox has today called for more details on the Voice, specifically on how people will be elected to the advisory body. If she has concerns, why shouldn't other Australians?

PRIME MINISTER: To be clear, what people are voting on isn't the structure of legislation. And the referendum makes it clear, the three constitutional changes are: there shall be a Voice, that the Voice will have input on issues, will be able to advise on issues which affect Aboriginal and Torres Strait Islander people, and the Parliament will legislate for the structure and organisational process related to the Voice. That's the detail. So, the Senator will have a direct way in it. This isn't something that is coming from on top. This is something that has come from below. And it has come from Aboriginal and Torres Strait Islander people themselves. There was a five year process in the lead up to the Uluru Statement from the Heart. This is a gracious request, which I believe people should accept in the spirit in which it is given. And the legislation will, of course, occur after if the referendum is successful. But this year there will be the Referendum Working Group, they are meeting tomorrow. There is a debate in the Parliament and the Senate committee report will come down on the Referendum Legislation because there hasn't been one of the century, so it needed to be updated. There will be a debate and vote on that legislation. Then there will be a legislation that will be tabled during this session of Parliament in March, before Parliament gets up. There will be a committee inquiry of which people, both inside the Parliament and outside, will be able to make submissions about specifically what the question is that will be put to the Australian people. That legislation will then be debated and, I hope, passed by the Parliament sometime during the winter budget sessions, which means towards the end of June. And then there has to be a two month and 33 day gap before a vote can be held of the Australian people between two months and 33 days and six months. So, there is a very clear process in which people are going to be able to talk all of these issues through. But the principle isn't whether there be 24 people, which was a recommendation, plus perhaps a supplement of two of Calma-Langton report, whether it is 20 or whether it is 32 or whether it is 16. The principle is whether there be a body. And over a period of time, because it is subject to the Parliament, of course like other elements, it will change. The Constitution is not the body that outlines every detail. The Constitution establishes the principles. So, for example, it says we will have an army and navy. It doesn't say we will have an Air Force because there were not planes flying in 1901 when the Constitution was written. It doesn't say where the naval ships will be or how many there will be. It doesn't anticipate nuclear subs. It says that is what we will do. That is the nature of a constitution, and part of the education process that needs to occur this year in an honest way is for people to talk about what the Constitution is. I think a whole lot of Australians wouldn't have ever had a discussion about a constitution before. But people in public office and public life have a responsibility to not spread misinformation, to talk about the facts. And there can be, with respect, differences. People will have different views and they are entitled to them, but it should be based upon the facts. And the fact is that the vote later this year will be about recognition and consultation.

JOURNALIST: Changes to 501 visas: is this a gesture of goodwill to New Zealand?

PRIME MINISTER: That is something that was discussed with Jacinda Ardern in the first meeting that was held, and I think we said that some common sense needs to be applied here between <u>Australia</u> and New Zealand. But we retain, of course, our right to take action on the basis that it is appropriate action.

JOURNALIST: Prime Minister, that is a massive search under way in Western <u>Australia</u>, a costly search for a dangerous radioactive capsule.

PRIME MINISTER: I thought this might come.

JOURNALIST: The penalty for losing something like that is up to \$1,000. Should there be stronger penalties for that> And how does \$1000 compared to the cost of searching for that?

PRIME MINISTER: Well, two points to be made there. One, it shouldn't have been lost, that is the first thing. And second, yes, of course, that figure is ridiculously low. But I suspect that it is ridiculously low because people didn't think that such an item would be lost. Thanks very much.

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