

Health

1. Congress agrees that a civilised society is one where everyone, regardless of income, location and cultural identity, is able to have timely access to high quality health care at all stages of their lives. This requires sustained investment by government not only in new buildings and technologies, but also in all those employees whose hard work, skills and dedication are essential to delivering and supporting quality care.
2. Congress notes that existing policy supports:
 - a) the principle of universal access to comprehensive health services, including dental care;
 - b) Medicare as an efficient and equitable system of health delivery;
 - c) universal access to bulk billing for GP services;
 - d) placing a high priority on tackling the crisis in mental health;
 - e) adequate funding for the full range of services needed to care for older people;
 - f) the provision of equitable and accessible health services to rural and remote regions, Aboriginal and Torres Strait Islander peoples, and to people whose language and culture differs from those dominant in the health sector;
 - g) equitable wages and fair working conditions for health care workers, including measures to redress staff shortages, increase skills, and ensure working arrangements which are safe, secure and equitable, and which support the delivery of high quality care.
3. Congress, working with like-minded organisations whenever possible, resolves to prioritise campaigning on the following issues.

Aged Care

4. Congress recognises that the quality of aged care in Australia is being undermined by poor staff pay and conditions and resulting problems of recruitment and retention. These problems are aggravated by the uneven quality of management across providers, a patchy commitment to skill and career

development, and government funding arrangements that often leave little scope for meaningful improvements to the numbers and pay of staff.

5. Congress welcomes the recent reforms of the age care sector announced by the Federal government which will involve an additional \$1.2 billion dollar injection into workforce improvements.
6. Specifically Congress supports the Workforce Compact overseen by an Advisory group and endorsed by the Government which will ensure that workforce reforms lead to improvements in terms and conditions for the aged care workforce including:
 - Higher wages;
 - Improved training and education opportunities;
 - Improved career development and workforce planning;
 - Better work practices.
7. These improvements will be provided directly to workers through enterprise bargaining.
8. For nurses and allied health workers this industry standard should bring them into line with wages in the public health system. For care staff and support workers this standard should lift the base rate of pay to professional rates.
9. Congress supports increasing the transparency of government funding of aged care. A key means of ensuring that government funds are translated clearly and directly into more quality care is by removing leakages from the system in the form of private profits and excessive remuneration for senior private sector managers;
10. Congress supports establishing enforceable minimum clinical and care standards, including specific targets for staff/resident ratios, to ensure that quality care is delivered under fair working conditions.

Public Health

11. Congress notes existing policy that increasing the quality and social efficiency of our public health system requires a more integrated approach to funding and planning. This should be combined with an increased emphasis on community-based services that are funded to guarantee universal access to high quality health care.
12. Congress therefore resolves to continue to campaign for:
 - a) increased public investment in health to ensure the quantity and quality of care is not undermined by rising costs and increasing demand;
 - b) greater co-operation between state and the commonwealth governments in relation to the allocation of resources and integration of services;

- c) a network of community health centres funded, equipped and staffed to provide access to a range of services provided by multi-disciplinary teams consisting of health professionals such as GPs, nurses and midwives, dentists, dieticians, psychologists, social workers and counsellors, physiotherapists, occupational and speech therapists that are appropriate to all stages of patients' lives;
 - d) the increased use of education and other preventative strategies to help reduce pressure on our hospitals;
 - e) improving access to health care by extending opening hours and bulk billing;
 - f) increasing the proportion of funding allocated to mental health services to 12 per cent as recommended by the Mental Health Council of Australia, and focussing additional mental health spending on improving access to clinical psychologists in the public health sector. The public mental health system is struggling to retain and attract clinical psychologists because of the attractiveness of private practice, underpinned by Medicare rebates for up to 10 sessions. However, people diagnosed with chronic long term and complex mental health problems usually rely on public mental health services for treatment and it is essential that quality staff are retained in the public sector;
 - g) improving the pay and conditions of all workers in the health care sector, particularly support workers such as Personal Care Assistants, Orderlies, Kitchen Staff and Cleaners who are often forgotten in health policy and planning.
13. Congress further agrees to support nurses and health professionals in their campaigns for:
- a) pay and conditions that respect their skills, professionalism and dedication to patient care;
 - b) an increased focus on quality care by linking Federal health funding to improved nurse/patient ratios.
14. In particular, Congress agrees to support efforts by health unions to oppose the privatisation of any and all services or aspects of our public health system. Congress believes that public service, not profit, should be the primary mission of health care delivery.
15. Congress supports the funding of a national standard of universal dental care to all Australians, as a keystone legacy for the current Federal Government – preferably as an integral part of Medicare, but otherwise as a stand-alone Denticare.
16. Congress recognises the important work of health and aged care departments of government performing functions such as public policy development, coordination, standard setting and compliance. Congress supports the workers

performing this work in the face of recent political attacks and supports the appropriate funding and resourcing of these government departments

Young People

17. Congress recognises that young people have particular health needs that need to be addressed by our health system and in the workplace. Young people are at risk of compromised mental and sexual health, suicide and substance abuse issues that often have a relationship with their socio-economic status, family relationships and their engagement in education, training and secure, meaningful work. Suicide is the leading cause of death to those aged 15 to 24. This is a specific health issue that needs to be addressed. Congress calls for:
- a) The adoption of youth suicide prevention strategies that deal with underlying causes such as poor mental health, abuse, substance abuse, discrimination, bullying and harassment;
 - b) Increased funding for age appropriate services for young people, with particular regard to sexual health, mental health and the removal of young people with brain injuries and disabilities from aged care facilities into facilities to be shared with other young people;
 - c) Ensuring access to high quality healthcare and related services for all young people, regardless of socio-economic, employment, study, relationship or other status;
 - d) The continued improvement in mental health strategies that include early intervention and meeting service needs of young people. Congress supports rebuilding of the mental health workforce to improve services and increase prevention strategies;
 - e) Access for all young people to high quality sexual health, sexuality and respectful relationships education, information and services;
 - f) Efforts to be placed in ensuring young people are engaged in formal education, training or meaningful work to ensure they experience the dignity, health and well-being effects of being engaged in these activities;
 - g) The NES to be extended to grant paid sick leave to all workers, regardless of the form of employment they are engaged in. This will assist young workers to stop working while they are sick because they can't afford to miss out on wages when taking sick leave, or they can't afford to go to a doctor to get treatment, or take time off work to attend a doctor's appointment.

Aboriginal and Torres Strait Islander Peoples

18. Congress recognises that the health status of Aboriginal and Torres Strait Islander peoples is considerably poorer than any other social group in Australia. Contributing factors to the health inequality of Aboriginal and Torres Strait Islander peoples include: racism; unequal access to primary health care and

infrastructure; poor nutrition and unsanitary living conditions; lack of cultural safety and culturally appropriate health facilities; and insufficient or poorly targeted funding to meet health care needs.

19. It is imperative that Aboriginal and Torres Strait Islander peoples have equal and affordable access to primary health care and health infrastructure. Adequate nutrition, education, and safe housing, are also integral to establishing healthy lifestyles and improved well-being.
20. Congress calls for:
 - a) a meaningful consultation with Aboriginal and Torres Strait Islander communities to deliver appropriate and culturally acceptable services that are well funded and promote healthy living and improved health outcomes;
 - b) greater investment in detoxification and rehabilitation services for Aboriginal and Torres Strait Islander people that promote holistic healing and practice;
 - c) increased funding for and further development of Aboriginal and Torres Strait Islander community controlled health services, care and aged care facilities that are locally delivered, supported and promoted within communities with predominantly new government resources for Closing the Gap;
 - d) the incorporation of culturally appropriate delivery of health care that recognises rights, beliefs and values of Aboriginal and Torres Strait Islander peoples;
 - e) the same rights for Aboriginal and Torres Strait Islander people to refuse or accept health treatment and care as is the case for other Australian citizens;
 - f) a focus on primary health care such as education and screening to address poor health outcomes for Aboriginal and Torres Strait Islander peoples through programs for early childhood development, maternal health, chronic illness, mental health, effects of abuse and violence, and disease;
 - g) the establishment of well supported links between local Aboriginal and Torres Strait Islander primary health care providers and other health sectors, such as hospitals and rehabilitation centres that support patients' safe journey through the system of care;
 - h) the incorporation of content relevant to the history, health and culture of Aboriginal and Torres Strait Islander peoples, including social justice issues into all Vocational and Education Training programs and undergraduate curricula for health professionals;
 - i) improved incentives including funding and mentoring support for Aboriginal and Torres Strait Islander peoples to undertake careers in health professions and increased support for Indigenous Health workers through affiliate associations.