



Surgeons assess Major Party responses to priorities for 2013 Federal Election

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Having compared and assessed the responses of the two major political parties to its 2013 Federal Election document, the Royal Australasian College of Surgeons has concluded that neither party had health as a priority in the election and the parties policy positions were essentially 'more of the same'.

College Vice President, Professor Michael Grigg said, "Unfortunately healthcare has not featured prominently in this campaign. The responses of both major parties to the College's key issues reflects this lack of prominence – they are lacklustre and there is little new to benefit patients and the surgical care they need."

The response provided by the Labor Party's National Campaign Headquarters was essentially to stand on its record, while the Coalition response referred to its track record of strong economic management to deliver future investment for better healthcare.

With polling day this Saturday, the College provides this assessment of the ALP's and LNP's respective positions in regard to the five key areas identified by the College for this election:

- provision of adequate specialist medical training opportunities;
- alcohol related harm;
- ensuring timely access to safe and effective surgical care;
- funding models; and
- the threat to surgical standards posed by a cap on the tax deductibility of self-education expenses.

Both major parties failed to recognise that the substantial increase in medical graduates has led to an acute shortage of post-graduate training opportunities, including substantial pressure on the number of specialist training places.

While Labor points to increases in the number of Specialist Training Program places and Australian General Practice Training places and the Coalition announced funding to support 100 additional intern places a year with priority given to areas outside major metropolitan centres, both parties failed to project a plan for the future in this critical area.

Regarding alcohol related harm – Labor's direction is focussed on changing attitudes (\$103 million for the National Binge Drinking Strategy to raise awareness of the harm from alcohol) rather than taking the steps proposed by the College: effective alcohol taxation and marketing policies, restricting the hours in which alcohol can be sold and reducing the density of alcohol outlets in the community.

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The Coalition said it supports a “national approach to high risk alcohol consumption” but critically it had no plans to change the taxation on alcohol. The alcohol taxation regime will form part of the Coalition’s taxation review, with any proposed changes put off until after the next election. The Coalition did however, note it would continue to consult with all stakeholders “in the development of new initiatives to tackle alcohol abuse”.

The College welcomes the fact that both Labor and the Coalition commit to the continuing transition to Activity Based Funding of the public hospital system and both acknowledge that more work needs to be done by all governments to ensure timely access to safe and effective surgical care.

Labor pointed to its National Health and Hospital Network and the setting of national standards and national pricing for hospital services as having set the health system on a more favourable funding footing. The Coalition affirmed its intent to provide “certainty” to the public hospital system and to cut administration and bureaucracy for the benefit of frontline services.

While both of these are laudable, the College reaffirms its stance that fundamental change to a single funder model is the only way to provide certainty and end the cost shifting ‘blame game’.

While Labor has deferred the introduction of a \$2000 cap on tax-deductible, self-education expenses for an 18-month period of review, the College is disappointed that the connection between the tax cap and Labor’s Better Schools Plan has been reaffirmed. The College is firmly of the view that cuts to one form of education should not be used to pay for another.

The Coalition stated it could not immediately reverse “all of Labor’s bad decisions” but the only prospect for change in the future was to change the government at the election.

Professor Michael Grigg said, “The proposed cap is a major issue for the College, its Fellows and Trainees. We will continue to fight this arbitrary tax cap which is likely to have a detrimental impact on Australians’ access to the highest possible standards of surgical care.”

Professor Grigg urged interested parties to take the time to read the College’s document and the responses provided by both parties.

“The College is, to some extent, disappointed with both party’s responses to these critical issues facing surgery and surgical care, but we will pursue our agenda with whichever party forms government on Sunday morning, for the benefit of surgery and the patients we serve,” he said.

Professor Grigg thanked both parties for responding to the College’s questions, which are publicly available on the College website: www.surgeons.org

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