



Lung Foundation Australia

2024-2025 Pre-Budget Submission

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Executive Summary and recommendations

1 in 3 Australians live with a lung disease, and this is responsible for significant health system expenditure, at approximately \$8 Billion annually. In addition to the direct health system costs, the loss of life and inability to contribute to the workforce adds to the cost.

The 5% per annum increase in the tobacco excise (per year for 3 years) will see an increase in revenue of \$3.3Billion, which is in addition to the further GST revenue of \$290million. We wholly support the accompanying announcements of utilising a small portion of this additional revenue to improving the early diagnosis of lung cancer through the soon to be implemented targeted National Lung Cancer Screening Program, as well as investment in tobacco and vaping campaigns, community programs, policy change and enforcement. We encourage further utilisation of this revenue to improve prevention, diagnosis, support and research into lung disease and lung health, following over a decade of severe under investment.

Lung Foundation Australia's recommendations align with the Australian Government Department of Health's own National Strategic Framework for Chronic Conditions (Chronic Conditions Framework) (and associated Action Plan for Lung Conditions).

The additional investment we recommend per year amounts to \$11.7million or just over 1% of the total additional revenue from the tobacco excise increase. This small investment back into community health will ultimately reduce direct health system costs in the short and long term and contribute to a healthier and more produce Australia, aligned to the *Measuring What Matters Statement* in the first iteration of Australia's national wellbeing framework.

Key recommendations for the 2024-2025 budget.

1. Preparing for the lifesaving targeted National Lung Cancer Screening Program

- a) Specialist lung cancer nurses - [\\$5million](#)
- b) Lung cancer telehealth support - [\\$3.6million](#)

2. Supporting primary care

- a) Health professional education - [\\$0.7million](#)
- b) Respiratory Care Program - [\\$1.6million](#)
- c) Long covid support - [\\$0.4million](#)
- d) Department of Health and Aged Care review COPD diagnosis – [MBS reform](#)

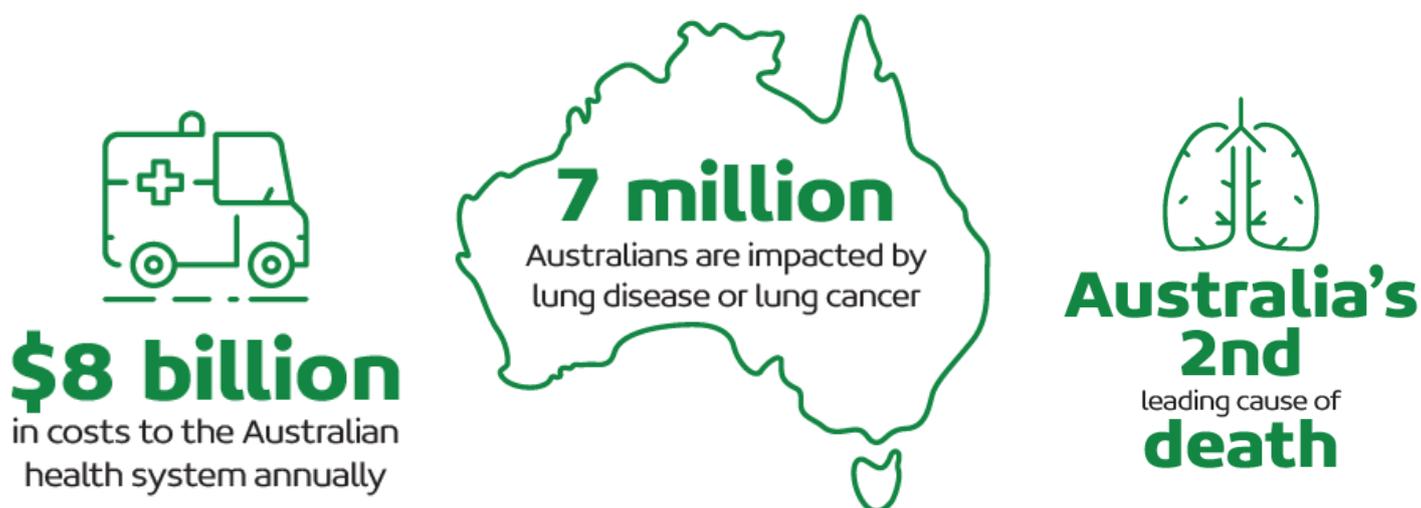
3. Preventive health

- a. Vaping - [\\$0.4million](#)
- b. Immunisation - [Policy reform and campaigns](#)

4. A dedicated research fund for silicosis and occupational respiratory diseases - [\\$25million](#)

About Lung Foundation Australia

Lung disease in Australia



Don't let smoking be the first thing you think of. Other risk factors include:

-  Exposure to asbestos, radon and occupation materials
-  Air pollution
-  Family history
-  Personal history of lung disease
-  Genetics

Our Impact

Lung Foundation Australia is the only national charity and leading peak-body dedicated to supporting anyone with a lung disease including lung cancer. For over 33 years, we have been the trusted national point-of-call for patients, their families, carers, health professionals and the general community on lung health.

Our mission is to improve lung health and reduce the impact of lung disease for all Australians. We will continue working to ensure lung health is a priority for all, from promoting lung health and early diagnosis, advocating for policy change and research investment, raising awareness about the symptoms and prevalence of lung disease and championing equitable access to treatment and care.

There are over 30 different types of lung disease currently impacting 1 in 3 Australians. Lung disease is also our nation's second leading cause of death, taking more lives than dementia and diabetes, yet until vaping emerged as an issue of significance and COVID-19 caused a renewed focus on lung health and the necessity to breathe freely, it has consistently been underfunded compared to other prominent diseases.

Through the Commonwealth's Health Peak Advisory Body Program, Lung Foundation Australia are formally recognised as the peak lung health organisation in Australia, and we will be further supporting the Commonwealth through the provision of expert advice, disseminating information to Australians, and consulting with consumers and clinicians on a range of topics.

Recommendations for the Federal Budget 2023-2024

Recommendation 1: Preparing for the lifesaving targeted National Lung Cancer Screening Program

Lung cancer is the leading cause of cancer death in Australia, and the key to improving survival and quality of life is to diagnose lung cancer early, where more treatment options are available. A targeted lung cancer screening program will position Australia as a world leader and the benefits are far reaching. As part of the preparation for this targeted screening program, we recommend the Australian Government invest in both place-based and telehealth nursing. This will ensure those navigating a lung cancer diagnosis have access to quality information and support, which evidence now shows will also improve patient outcomes and reduce pressure on the health system.

a) Specialist Lung Cancer Nurses - \$5million

Lung Foundation Australia's research completed as part of a Department of Health funded pilot study clearly demonstrates that Australia needs a hybrid model of Specialist Lung Cancer Nurses working together with All Cancer Nurse Navigators.

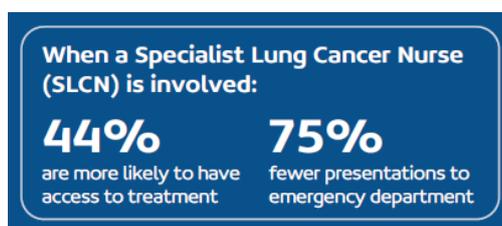
Lung Cancer is complex and the advances in treatment are fast paced. An analysis of the Specialist Lung Cancer Nurse service found that two key economic benefits are in reducing avoiding ED presentations and increasing the timeliness of access to treatments. More specifically, a cost-benefit ratio of 1:18 was determined.

A 'hub and spoke' model of care joining up specialist lung cancer nurses, nurse navigators and telehealth specialist nurses and allied health professionals is urgently required.

A pool of strategically positioned Specialist Lung Cancer Nurses will ensure the successful implementation of the National Targeted Lung Cancer Screening Program. To this end we have decreased our original recommendation of 100 Specialist Nurses by 2025 (which was supported by evidence) to an amended recommendation of 25 Specialist Lung Cancer Nurses placed in communities of highest need, working to support, advise and train All Cancer Nurses.

Why does Australia need specialist lung cancer nurses?

- Each year over 13,800 Australians are diagnosed with lung cancer, and they need support to navigate the healthcare system and throughout their cancer journey.
- As our pilot project demonstrates Specialist Lung Cancer Nurses will be essential to the successful implementation of the National Targeted Lung Cancer Screening Program commencing in July 2025.
- Current care for lung cancer patients is not sufficient or equitable compared to other common cancers.
- Specialist lung cancer nurses, like breast cancer and prostate cancer nurses, are proven to facilitate crucial care and support for people diagnosed with cancer.
- People living with lung cancer die earlier by an average of 11 years compared to the general population. This amounted to around 137,600 years of life lost in 2018 alone.
- The economic cost due to life lost from lung cancer was \$6.9 billion in 2018.
- Our nurses will aid in improving health outcomes for patients with lung cancer, reduce emergency department presentations, and will be an invaluable part of the health system.



b) Lung cancer telehealth support - \$3.6million

With more than 22,000 Australians currently living with lung cancer, who have unmet needs, lower quality of life and poorer outcomes, an investment of \$3.6million in lung cancer telehealth support (alongside \$5million in Specialist Lung Cancer Nurses) is recommended.

As part of the new *Australian Cancer Nursing and Navigation Program* the [Australian Government announced](#) an investment in specialist telehealth services. This intention is for this service to provide specialist information, support and advice that is tailored to the unique needs of people with particular cancer types and is to be delivered by cancer NGOs.

Given the significant complexities and disparities in current lung cancer care and outcomes, rapid treatment advances, and the imminent targeted National Lung Cancer Screening Program, Lung Foundation Australia recommend an investment of \$3.6million per year as part of this telehealth package.

Ensuring there is adequate telehealth support for lung cancer patients is vital, and is aligned to the Australian Cancer Plan, which was designed to improve cancer outcomes for all Australians, and particularly for those whose health outcomes are poorest. We believe this telehealth specialist service will be a vital adjunct to the other aspects of the Australian Cancer Nursing and Navigation Program, and through a hub and spoke model can enhance health system and patient outcomes improvements achieved alongside Specialist Lung Cancer Nurses.

We commend the Albanese Government for the commitment to launching the targeted National Lung Cancer Screening Program on July 1st 2025. This commitment sets Australia as a world leader, and evidence from Cancer Australia indicates that in the first 10 years, a targeted program would:

- Diagnose lung cancers earlier, with around 70% of all screen detected lung cancers diagnosed at an early stage, bringing it closer to the survival rate of the other common cancers (72% bowel, 92% breast, 95% prostate, 96% skin cancer).
- Save lives by preventing over 12,000 deaths
- Improve quality of life, with up to 50,000 quality adjusted life years (QALYs) gained
- Be cost-effective, with an incremental cost-effectiveness ratio of \$83,545 per QALY gained.
- Reduce lung cancer mortality in Australia by 20% in the screened population, and improve the survival, quality of life and productivity of Australians affected by lung cancer.
- Reduce inequities - lung cancer has a greater proportional impact on First Nations people, people in regional and rural areas, and those of lower socioeconomic status.

Lung Foundation Australia remain committed to supporting the Australian Government in the effective implementation of this screening program and are pleased to be working alongside the Department of Health and the implementation partners (Cancer Australia and NACCHO).

Recommendation 2: Supporting primary care

With primary care increasingly under pressure, the importance of evidence-based and cost-effective strategies and policies are vital. We recommend a number of initiatives that have the ability to increasingly support primary care through education and training, care in the community, information and resources, and MBS reform that sees chronic conditions detected earlier.

a) Health Professional Education - \$0.6million

With primary health care increasingly under pressure and patients presenting at General Practice with a number of conditions the need for training and professional development at a time and place that suits the busy schedule of primary health care professionals is noted as a high priority by the Department of Health.

Lung Foundation Australia and our partners *Asthma Australia* and *The Thoracic Society of Australia and New Zealand* on behalf of the Department of Health was funded to deliver the Lung Learning program. This program is focussed on workforce competency building and ensuring that primary care health professionals are provided with high quality, evidence-based training to improve patient outcomes, to detect diseases early and prevent avoidable hospitalisations.

With primary care under increasing pressures, we are committed to ensuring that this program continues to achieve meaningful outcomes, which is at risk with current grant funding coming to an end on June 30th 2024. Therefore, Lung Foundation Australia, and our partners, request a commitment of **\$0.6million for 2024-2025**. This will ensure continuation of service, meet a growing demand, and will bring this vital support for primary care in line with future grant opportunities aligned with the Chronic Conditions Framework refresh.



What is the Lung Learning program?

The purpose of this program is to apply the already developed [Lung Learning Framework](#) to enhance national lung health training and education framework for Primary Healthcare Professionals to improve awareness, knowledge and understanding in the identification, diagnosis, and management of lung conditions. The Lung Learning Framework is a world-first in respiratory healthcare, and one of Australia's most innovative approaches to improving outcomes for patients which was developed in collaboration with Australia's leading peak health bodies including RACGP, PSA, ACCRM and NACCHO. The Lung Learning program, utilising the Framework, can transform the early diagnosis of lung diseases and lung cancer which overwhelmingly impact people from low socio-economic areas, First Nations peoples, and those living in rural areas.

The program has been designed with similar principles that underpin the Chronic Conditions Framework (2017-2025):

- Moves away from a disease-specific approach
- Supports a stronger emphasis on coordinated, multidisciplinary care
- Acknowledges and builds on work already in place that supports chronic conditions
- Provides flexibility and responsive action towards future and emerging priorities (e.g. vaping, COVID, immunisation)
- Allows innovative approaches in prevention, earlier diagnosis and management of chronic conditions.

b) Respiratory Care Program - \$1.6million

Chronic Obstructive Pulmonary Disease (COPD) is a term that describes a range of conditions caused by obstructed airflow, including emphysema, chronic bronchitis, and chronic asthma.

COPD is the 5th leading cause of death in Australia (3rd for Aboriginal and Torres Strait Islander people), the 5th leading cause of disease burden, and costs the health system nearly \$1 Billion annually.

Despite the high prevalence, little is done to support the hundreds of thousands of Australians living with this chronic condition, many of whom are in the prime of their working lives.

COPD is inherently treatable, and with the right information and support, people with COPD can live well. In recognition of this service gap and aligned to the Australian Government's National Strategic Action Plan for Lung Conditions, Lung Foundation Australia delivered a telehealth respiratory care service which is an evidence-based and cost-effective means of improving health literacy and self-management, vaccination rates, and access to consumer-friendly information for people with COPD.

Funding for this vital program was previously provided by the Australian Government through grants associated with the Chronic Conditions Framework which is currently being refreshed. Due to delays in the refresh of this key Government strategy, funding for this program has ceased and the service is increasingly unable to meet demand.

This ultimately means there is additional burden being carried by primary care and the hospital systems. While we wait for the Chronic Conditions Framework to be refreshed, we urgently request an investment of **\$1.6million per year**.

About the service: This service offers a series of interactions for people with chronic lung disease to engage in essential self-management strategies. This nurse-led intervention supports people to identify gaps in their care according to evidence based guidelines for management. Via the provision of information and education the nurse motivates them to work, in collaboration with their treating healthcare team, to achieve evidence-based care, including physical activity, medication adherence and management of exacerbations.

Recent evaluation of the program demonstrated the following outcomes:

- ✓ Improved patient health
- ✓ Improved patient health-related quality of life
- ✓ Cost-effective
- ✓ Reduced healthcare utilisation
 - 50% reduction in ED presentations
 - 30% reduction in hospitalisations

This service is integral for strong primary care, and we remain committed to providing this service with the goal of helping Australians to live well with chronic respiratory disease.

*We recognise previous funding provided by the Department of Health for COPD information and support services. This grant came to an end in December 2023, and we highlight that this request is directly aligned to this previous grant, with a proposed expanded reach given demand. Full budget available on request with the ability to scale investment.

c) Long covid support - \$0.4million

Long COVID remains an ongoing risk for Australians, with evidence, recommendations and resources rapidly changing. Long COVID is now also recognised as a chronic condition, therefore, ongoing work is needed to ensure consumers and health professionals are able to access the latest information and support. As Australia's peak-body leading improvements in lung health, we are well-placed to address current and emerging gaps in long COVID information. Further, we have been leading work in this sector over the last two years and have the capabilities to rapidly begin these activities.

In partnership with consumers and key opinion leaders, Lung Foundation Australia developed the [Understanding long COVID booklet](#). The booklet has been widely disseminated and received strong support from consumers, health professionals, as well as positive feedback from key bodies. To continue and expand on this important work, Lung Foundation Australia are requesting funding to deliver the following:

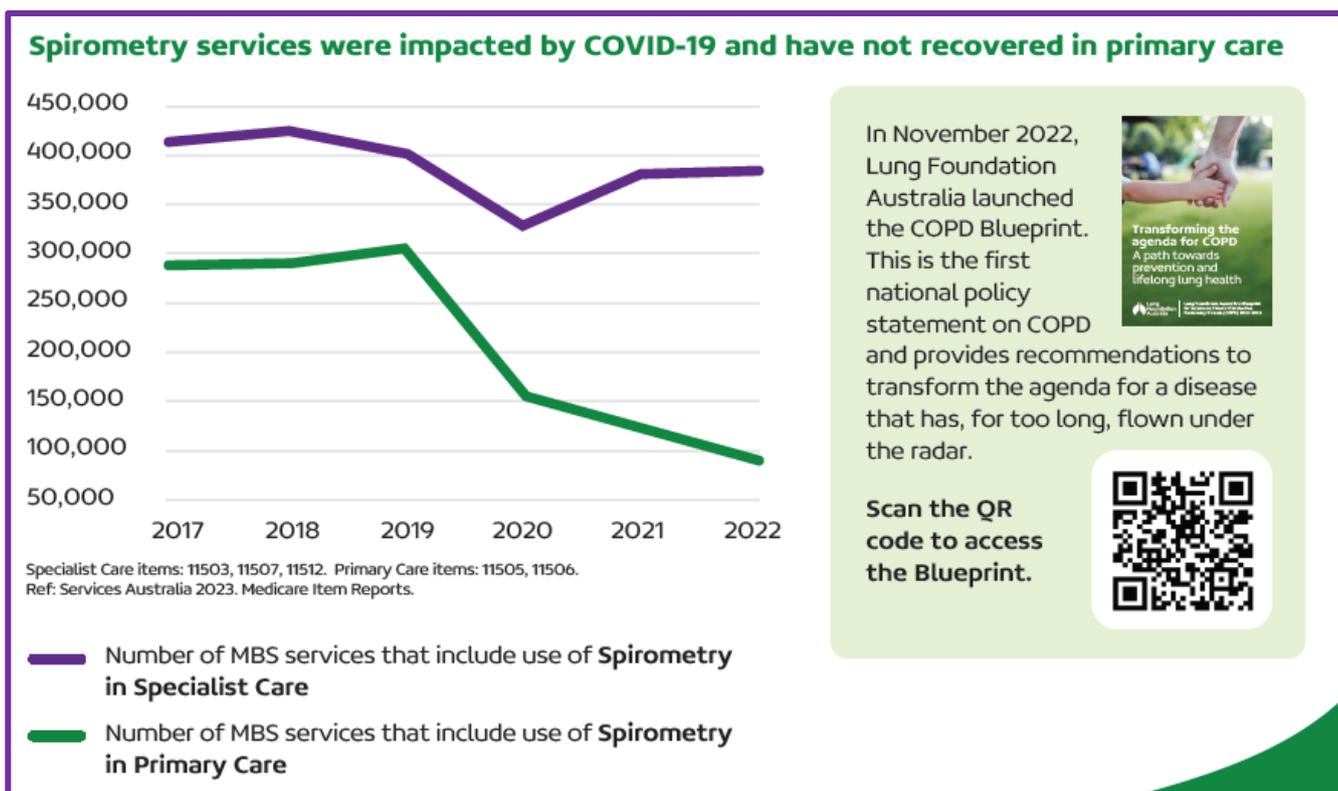
- Providing consumers and health professionals with regular updates on the latest evidence and resources.
- Development and targeted dissemination of long COVID resources for culturally and linguistically diverse communities and First Nations communities.
- Development and delivery of webinars dedicated to keeping consumers and health professionals informed of latest evidence in the evolving long COVID landscape.
- Community pulse survey to assess changes in attitudes and experiences of long COVID.

These activities represent priority areas for action based on feedback from key stakeholders, and align with the Parliamentary Inquiry report, [Sick and tired: casting a long shadow](#), and soon to be launched Government response and long covid plan.

d) **The Department of Health and Aged Care conduct a review into COPD diagnosis – MBS reform**

Spirometry is required for an accurate COPD diagnosis. When spirometry does not occur in primary care, GPs must refer patients to private laboratories or specialists. This increases costs to Medicare, and out-of-pocket costs for patients.

There are known, long-standing barriers to spirometry in primary care and the pandemic extinguished small gains that had been made. We urgently need to understand how COPD diagnosis is occurring, and address existing and new barriers, to improve prognosis for thousands of Australians. As such, we recommend a review be conducted by the Department of Health and Aged Care into the diagnosis of COPD and other chronic respiratory diseases.



Recommendation 3: Preventive health

As the prevalence of illness and disease continues to rise, so too does the pressure on our health system. Health expenditure continues to grow at a rate that is considered unsustainable, therefore, investment in evidence-based and cost-effective preventive health policy and programs should increase.

The [National Preventive Health Strategy](#) outlines opportunities for Australia to build a sustainable health system for the future that builds on previous success and momentum, addresses the increasing burden of disease, reduces health inequity and increases preparedness for emerging threats. Aligned with the new national wellbeing framework [Measuring What Matters](#), the National Preventive Health Strategy outlines actions that will reduce the pressure on the health system and see an increase in Australia's GDP through more healthy, happy and productive community. Overall, there are significant economic benefits to investing in prevention, and we support an increased investment in preventive health, aligned with the established National Targets and Policy Achievements by 2030 of the National Preventive Health Strategy priority areas.

a) Vaping - **\$0.4million**

Aligned to both the National Preventive Health Strategy, and the recently launched National Tobacco Strategy, is action to address vaping use in Australia. We know vaping by young people has increased significantly over the last few years, creating a new public health crisis and seriously harming our next generation. Australia has worked incredibly hard to drive down tobacco smoking rates to prevent avoidable health impacts and reduce subsequent costs to the health system and society more broadly, and to support Australians in their cessation journey and prevent uptake. However, we are witnessing a new generation of young people inhaling harmful chemicals, addicted to nicotine, and needing support. We recognise that the reforms announced in 2023 will have a marked impact on reducing use of e-cigarettes and will ultimately work to protect young people from these harmful products, and we strongly support these efforts. However, with a rapidly changing policy environment, and evidence continuing to emerge around best practice prevention, cessation and support, there is a need for additional information and resources.

LFA request funding to support young people in making healthy decisions informed by the latest evidence with a short-term investment of **\$0.4million** in the 2024-2025 budget.

Our work in vaping: In early 2023, LFA launched a free e-learning module on the harms of vaping for young people as means of supporting teachers, parents, and communities by providing evidence-based information. To build on what is currently available, and meet demand, we believe Australia need a co-ordinated approach from a leading and trusted organisation who can provide further learning opportunities aligned with government policy.

As the peak body for lung health, LFA are best placed to deliver this work, and we have a strong history of rapidly developing accurate, quality, and co-designed resources, for example:

- [Unveil what you inhale resources](#) – LFA was the first in the country to co-design vaping resources with young people^a
- [Vaping e-learning module](#) – interactive, co-designed, evaluated, and highly^a regarded by teachers, young people, and education departments across Australia
- [First Nations vaping resources](#) – these were co-designed with the Tackling Indigenous Smoking program and the National Best Practice Unit.^a

In August 2023 LFA completed a scoping review on e-cigarette resources across Australia and highlighted a significant gap in topics of e-learning modules and information broadly designed for young people, which we shared with the Department of Health and Aged Care.

b) Immunisation – Policy reform and campaigns

Lung Foundation Australia affirm that immunisation is the best protection against vaccine-preventable disease. A vaccine-preventable disease is one that can be prevented or have its severity reduced through vaccination. One of the key initiatives established to date is the National Immunisation Program (NIP), which provides free vaccines to eligible people. We believe that Australians should be better supported to receive all clinically recommended vaccines, and as the Health Peak Advisory Body for lung health, we support:

- The [National Preventive Health Strategy 2021-2030](#) desired 2030 immunisation policy achievements by 2030, specifically:
 - Individuals and communities' understanding of the value of vaccines is increased
 - Enhanced immunisation data are available through increased reporting of vaccinations to the Australian Immunisation Register for all Australians
 - Improved monitoring and uptake of influenza, and pneumococcal vaccination
 - Access to immunisation services is available for all Australians, regardless of financial or geographical barriers
 - Immunisation coverage of priority populations, including Aboriginal and Torres Strait Islander people and difficult to reach groups, has improved
 - Immunisation continues to evolve from a focus on infants and children to vaccinating along the life course
 - Establish a benchmark and targets for adults at increased risk of vaccine preventable diseases due to age or underlying medical conditions
- The [National Immunisation Strategy for Australia 2019-2024](#) Priority 1: improve immunisation coverage.

We note that improving vaccination coverage, particularly for adults, will require multiple strategies that enable Australians easy access to vaccinations and that they are motivated to take them. Following the COVID-19 pandemic there was increased awareness of the benefit of preventing disease with vaccines, however subsequent vaccine fatigue means there is an impetus for **policy reform and campaigns** that will influence behaviour change. Australia has been very successful in maintaining high vaccination levels in children, but with the absence of national adult vaccination targets there is much to be done.

Our work in immunisation: We have a range of resources and targeted campaigns aimed at improving vaccine uptake, including our annual flu vaccine campaign, and our co-designed First Nations campaign.

The five vaccine-preventable diseases that primarily affect the lungs are the focus of Lung Foundation's advocacy—**COVID-19, influenza, pertussis, pneumococcal pneumonia, and respiratory syncytial virus (RSV)**. An RSV vaccine only became available in Australia in January 2024 (for Australians aged 60 years and over) on private prescription, and this means that there is significant cost for those Australians who are accessing this vaccine.

Young children, older people, people living with chronic health conditions, and Aboriginal and Torres Strait Islander people experience a greater burden from each of these diseases than the general population. These viruses also put the one in three Australians living with a lung disease at increased risk of symptom exacerbation and lung function deterioration. Further, these diseases can lead to other lung diseases. COVID-19, influenza, and RSV are causes of viral pneumonia, pertussis can lead to bacterial pneumonia and RSV can cause bronchiolitis (inflammation of the airways) and bronchitis. Further, severe pneumonia in childhood can cause bronchiectasis (a chronic lung condition).

Recommendation 4: A dedicated research fund for silicosis and occupational respiratory diseases - \$25million

Despite widespread recognition of the risks of engineered stone and a recent ban on engineered stone products, thousands of Australian workers continue to be at risk, including those in the construction, mining and quarrying, manufacturing, and tunnelling industries. Furthermore, given the latency period of occupational respiratory conditions it will take many years to fully realise the benefit of the prohibition of engineered stone products and cases of silicosis in stone benchtop workers will continue to be identified in years to come. With no known cure, it is evident that more needs to be urgently understood regarding how best to prevent and manage silicosis and other occupational respiratory diseases.

National research investment from the National Health and Medical Research Council (NHMRC) and Medical Research Future Fund (MRFF) over the last 10 years has amounted to approximately \$6 million with five projects funded, which is insufficient. As such, we recommend an investment of **\$25million per year**.

Lung Foundation Australia were funded by the Australian Government Department of Health and Aged Care to establish a research network of interested stakeholders and collaboratively identify the top priorities for future research in occupational respiratory disease. The first stage of this work in silicosis has now been completed and shared with the Department in a report that outlines key topics or issues researchers should be working on regarding four priority areas:

- Preventing silica dust exposure and silicosis
- Screening and diagnosis
- Treatment
- Living with and managing the impacts of silicosis.

Utilising the developed silicosis research priorities (and in time the additional occupational respiratory disease research priorities 2024 and 2025), we recommend a dedicated Medical Research Future Fund (MRFF) grant opportunity. This proposed dedicated fund is aligned to the [MRFF's 2nd 10-year Investment Plan \(2022-23 to 2031-32\)](#), and importantly key recommendations made by the National Dust Disease Taskforce (NDDT) and soon to be launched National Silicosis Prevention Strategy (NSPS).

A significant amount of work has been done over the last few years in addressing the silicosis resurgence, including; the commitment by all jurisdictions to ban the use, supply and manufacture of all engineered stone commencing July 2024; the development of the National Occupational Respiratory Disease Registry (NORDR) due to become operational in May; and investment in dedicated support services and prevention and education campaigns.

Alignment with the NSPS: Lung Foundation Australia facilitated the development of the NSPS 2023-2028 and accompanying National Action Plan on behalf of the Department (Recommendation 3a from the NDDT). Following extensive public consultation, expert advice and guidance by the NSPS Expert Steering Committee and Reference Group, the penultimate Draft was delivered to the Department in June 2023. At the time of delivery, the NSPS included five priority areas for action to prevent and ultimately eliminate silicosis in Australia:

1. Workplace risk reduction
2. Education and awareness
3. Health monitoring, screening and surveillance
4. Governance
5. Research and development

The first round of recently developed research priorities showcase the breadth of work still to be done, and a significant investment in a dedicated MRFF opportunity annually will be to the benefit of Australian workers.