



CHA welcomes Surgery Connect continuation

Catholic Health Australia

Catholic Health Australia has welcomed the Queensland Government's decision to continue Surgery Connect by investing \$1.2 billion to deliver 30,000 surgeries next year.

"When public hospitals are under pressure it makes enormous sense to allow not-for-profit private hospitals to step in and help," said Alex Lynch, Director of Public Health and In Home Support Policy.

"Surgery Connect has proved extremely successful in delivering timely, high-quality care for Queenslanders.

"CHA and our member hospitals strongly advocated for its continuation over a long period of time and it's heartening to see the Government make this commitment in the Budget.

"We thank Health Minister Timothy Nicholls for his constructive engagement and making this important decision."

In the 2023–24 financial year, nearly 24,000 patients were referred to private hospitals under the program, significantly improving Queensland's elective surgery performance.

"This initiative is a great example of health reforms we need across the nation," said Mr Lynch.

"Other states should look to Surgery Connect as a model for collaboration that delivers better outcomes for patients and helps ease pressure on public hospitals."

Notes to editors: *Catholic Health Australia (CHA) is Australia's largest non-government, not-for-profit group of health, community, and aged care providers. Our members operate 80 hospitals in each Australian state and the ACT, providing around 30 per cent of private hospital care and 5 per cent of public hospital care, in addition to extensive community and residential aged care. There are 63 private hospitals operated by CHA members. In QLD these include hospitals operated by St Vincent's Health Australia, Mater, Ozcare and Unitingcare Queensland. CHA members also provide approximately 12 per cent of all aged care facilities across Australia, in addition to around 20 per cent of home care services. 25 per cent of our members' service provision is regional, rural and remote.*

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