

**Rachel Stephen-Smith MLA**

Minister for Health

Minister for Mental Health

Minister for Finance

Minister for the Public Service

Member for Kurrajong

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**RESPONSE TO QUESTION ON NOTICE**

**Questions on Notice Paper No 5**

**11 APRIL 2025**

**Question No. 340**

**MR RATTENBURY MLA:** To ask the Minister for Health

1. Given that the ACT Government's contract with Burrangiri Respite Centre is worth \$1.7 million, and over a year Burrangiri provides in excess of 4,500 overnight respite days, making the cost of stay for one night \$377, in comparison the average cost of admitted patient care for an admitted patient was \$6,000 (2014-2025), has the Government considered the potential cost savings by retaining an excess of 4,500 overnight stays provided by Burrangiri.
2. How much does the ACT currently contribute, per day, for a patient in a residential setting for the Transition Care Program.
3. How many patients does the Transition Care Program support annually.
4. What are the anticipated costs arising from the lack of funding for Burrangiri Respite Centre.

**RACHEL STEPHEN-SMITH MLA** - The answer to the Member's question is as follows:

1. The ACT Government carefully considered the impacts of closing the service, including the potential impacts on the hospital system. Burrangiri provides a respite service to the community that offers a different standard of care from that received by patients in the hospital. Further, hospital costs vary significantly across acute, sub-acute and rehabilitation beds. The average cost per bed night at the University of Canberra Hospital is approximately \$820. Retaining the Burrangiri respite facility would not be expected to deliver cost-savings in the hospital system.
2. The ACT's total contribution per place per day for 2024-25 is \$88.12.



3. In the 2024 calendar year, the Transitional Therapy and Care Program supported a total of 363 patients. Service delivery included both residential and community-based components, with some patients accessing both during their time on the program.
- a. 110 patients were admitted as residential patients for at least part of the time they were on the program.
  - b. 337 patients were admitted as community-based patients for at least part of the time they were on the program.
4. There are no anticipated costs associated with the closure of Burrangiri.

**Approved for circulation to the Member and incorporation into Hansard.**



**Rachel Stephen-Smith MLA**  
**Minister for Health**

**Date:** .....12/5/25.....

This response required 3hrs 50mins to complete, at an approximate cost of \$411.95.