Public and private health services

Privatisation of public health services includes such practices as the:
- transfer of public hospital ownership to private owners; and
- contracting out of services provided by public employees such as facility management, radiology and/or pathology services;
- delivery of government funded health services by private providers.

The Australian Nursing and Midwifery Federation recognises that:
- access to health care is a fundamental human right for every Australian, not a privilege;
- health is a public good with shared benefits and shared responsibilities;
- individuals requiring health care have a right to choose how and where that health care is provided;
- publicly funded universal health insurance is an efficient and effective mechanism to distribute resources in a manner that ensures timely and equitable access to affordable health care on the basis of clinical need rather than capacity to pay; and
- the private health sector has a legitimate and important role as an alternate choice for the provision of health care, however, its expansion must not be at the expense of publicly provided services available to all.

It is the position of the Australian Nursing and Midwifery Federation that:

1. All Australians must have access to high quality health services, delivered in both the public and private sector.
2. A public health system is strongly supported as it provides equity of access to free public health care for all Australians. Public health services should remain in the public sector. The provision of private health services is and should remain complementary to a high quality, viable and effective public health system.
3. Privatisation of public health services is opposed.
4. Privately operated public health services are not supported as they create an undesirable tension between the goals of quality, access and equity and the need for private businesses to make a profit.
5. The provision of all public and private health services should be subject to Government regulation and accountability, should meet acceptable health outcome standards, and be planned in the context of the total needs and requirements of the population using the health service.
6. Remuneration, conditions of employment, and other entitlements of nursing and midwifery staff employed in the public and private sectors should be comparable across sectors.
7. Information should be publicly available to enable scrutiny of nursing and midwifery staffing numbers, skills mix and quality outcomes across public and private sectors.

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