



**SUBMISSION TO SENATE COMMUNITY AFFAIRS  
LEGISLATION COMMITTEE**

# **Australian Centre for Disease Control Bill 2025 and a Related Bill**

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Consumers Health Forum of Australia (2025)  
*Submission to Inquiry into Australian centre for Disease Control Bill  
2025 and a related Bill*

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# Executive Summary

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The Consumers Health Forum of Australia (CHF) welcomes the Australian Centre for Disease Control Bill 2025 and the related consequential Bill. We support the creation of a strong, independent national CDC, and seek to ensure it is trusted, inclusive, and effective from its first day.

Our central message is simple: **technical expertise alone is not enough**. To succeed, the CDC must embed consumer and community voices in its legislation, governance, and reporting.

We recommend that the Committee:

- Amend the Bill to guarantee consumer and lived-experience representation on the Advisory Council.
- Amend the definition of “public health matters” to explicitly include consumer engagement and community health.
- Insert a statutory function requiring the Director-General to establish and resource consumer and community engagement mechanisms.
- Require an annual Consumer and Community Engagement Plan and public reporting, modelled on New Zealand’s quality and safety reporting.
- Provide for rapid-consultation mechanisms during emergencies and mandate an independent review of engagement within three years.

**If legislative change is not made, we ask the Committee to recommend strong administrative measures and transparent public reporting to achieve the same effect.**

These steps will build trust, fairness and accountability. They will ensure the CDC is not only authoritative and independent, but also a national institution trusted by citizens to protect their health.

## Introduction

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The Consumers Health Forum of Australia (CHF) is the national peak body representing the interests of Australian health care consumers. We have more than 80 Member organisations including state-based consumer peaks, condition-specific groups, volunteer patient groups, professional associations, Primary Health Networks (PHNs) and the research community. Like CHF, our Members are dedicated to advocating for the needs of Australia’s health care consumers and ensuring that health care is accessible, affordable, and safe

## Background

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We welcome the opportunity to provide input on the **Australian Centre for Disease Control Bill 2025** and the related **Australian Centre for Disease Control (Consequential Amendments and Transitional Provisions) Bill 2025**. While both pieces of legislation are important, our submission focuses primarily on the main Bill that establishes the Centre, its functions, and its governance. These provisions will shape whether the CDC is not only technically strong and independent, but also trusted, inclusive, and effective.

Based on international experience and Australia's own track record, consumer and community engagement is essential to building legitimacy, trust, and effectiveness in public health. We then set out recommendations for strengthening the Bill so the CDC can deliver on its promise.

## Purpose of this submission

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Our purpose is to secure amendments to ensure consumer voices are embedded in the CDC legislation, or failing that, to secure strong administrative commitments and public reporting.

We offer practical recommendations to strengthen trust, accountability, and equity while keeping the agency agile in emergencies.

## Provisions that support trust

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The Bills contain important measures that can help build public trust in the CDC:

- **Independence** — the CDC will be established as a statutory agency, with the Director-General operating at arm's length from Government.
- **Transparency** — the Director-General will have a duty to publish advice, subject to limited exceptions. This is a significant step forward in making public health advice visible and accountable.
- **Expert input** — the Advisory Council will bring together diverse expertise across disciplines relevant to public health.

These are valuable foundations. They show a commitment to independence, expertise and transparency. All are essential to building confidence in a new national institution.

## Where stronger safeguards are needed

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Experience from Australia and overseas demonstrates that technical expertise alone is not enough to build legitimacy in public health. Citizens expect that national agencies will not only provide expert advice but also listen to the communities most affected.

Evidence from HIV, immunisation programs, and the COVID-19 response shows that when communities are engaged, outcomes are stronger because trust is deeper and compliance is higher. Without clear safeguards for consumer and community voice, there is a risk that the CDC will be seen as an expert body but unrepresentative, limiting its effectiveness and undermining public confidence.

The following recommendations outline specific amendments, grounded in evidence, that would strengthen the CDC's independence, accountability and legitimacy.

## Why this matters

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The Australian Centre for Disease Control will be a major new national institution. Its authority will rest not only on its scientific expertise but on whether it earns the trust of the people it serves. When engagement is weak or absent, guidance risks being seen as distant or irrelevant, eroding confidence in the institution. The CDC will only succeed if it works with those most affected, including people in rural communities, Aboriginal and Torres Strait Islander peoples, people with disabilities, and culturally diverse communities. Citizens are not passive recipients of public health advice. They are active participants whose actions determine whether policies succeed.

## Recommendations for amendments

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The table below sets out recommended amendments, together with supporting evidence, to ensure the CDC is both authoritative and trusted by the communities it serves.

Advisory Council membership	
<b>Evidence:</b> Comparable statutory bodies such as the Pharmaceutical Benefits Advisory Committee (PBAC) mandate consumer representation. This ensures advice reflects the lived realities of citizens, not only technical expertise. Also, evidence from HIV	<b>Recommendation:</b> Amend section 30(4) of the Bill to require consumer and lived-experience expertise on the Advisory Council. Appointments should follow a

and COVID-19 shows that guidance is more effective and widely adopted when communities are represented at the table where decisions are shaped.	transparent process with open expressions of interest and published selection criteria.
<b>Definition of public health matters</b>	
<b>Evidence:</b> International models, such as in UK and Canada, define public health to include community health and citizen engagement. This framing broadens the remit of public health agencies and strengthens fairness and trust. Without it, advice risks overlooking the perspectives of the very people whose behaviour determines whether measures succeed.	<b>Recommendation:</b> Amend the Bill's definition of "public health matters" to explicitly include consumer engagement and community health.
<b>Consumer engagement mechanisms</b>	
<b>Evidence:</b> The OECD, WHO, and Australia's NHMRC all highlight consumer partnership as critical to effective and ethical health systems. Domestically, Australia's HIV response shows that when communities are engaged as partners, outcomes improve dramatically — including testing rates, treatment adherence, and prevention uptake.	<b>Recommendation:</b> Insert a statutory function requiring the Director-General to establish and resource consumer and community engagement mechanisms, including for disproportionately affected populations.
<b>Annual reporting</b>	
<b>Evidence:</b> Public bodies such as the Australian Commission on Safety and Quality in Health Care prepare annual plans and report against performance indicators. In New Zealand, the Health Quality & Safety Commission publishes an annual "Window on the Quality of Health Care" report, providing a national snapshot of quality and safety across hospitals and services. This approach makes performance data transparent and accessible. It deliberately uses reporting as a lever for accountability and system improvement. These annual reports also show how consumer engagement is incorporated and measured.	<b>Recommendation:</b> Require the Director-General to prepare an annual Consumer and Community Engagement Plan, tabled in Parliament, along with a public report that includes key performance indicators such as diversity of consultation, reach, timeliness, accessibility, feedback-to-action, and participant satisfaction. The public reporting framework should include a national "scorecard" or dashboard summary of engagement performance, modelled on the NZ approach, to allow stakeholders and citizens to monitor progress. These activities can be streamlined and aligned with existing reporting obligations.

Emergency readiness	
<b>Evidence:</b> Studies of pandemic responses, in Australia and internationally, show that rapid, even informal, community consultation improved compliance. Communities were more willing to follow urgent advice when they felt their voices were respected, even in crisis.	<b>Recommendation:</b> Provide for a standing rapid-consultation mechanism so that the CDC can obtain community input during emergencies without delaying urgent action and require a post-event review of engagement to identify lessons learned.
Independent review	
<b>Evidence:</b> Major reforms across health and social policy (e.g. aged care, disability) have included statutory reviews within 2–3 years of commencement. These reviews allow course correction and ensure governance models are tested in practice.	<b>Recommendation:</b> Require an independent review of the CDC's consumer and community engagement within three years of commencement, reporting to Parliament with scope for legislative or administrative change.

## Committee outcomes

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We ask the Committee to recommend the amendments outlined above. Where amendments are not adopted, we ask the Committee to recommend that the Government and the CDC commit to strong administrative measures and transparent public reporting that achieve the same effect in practice. This allows Government to act immediately to address these matters.

By taking this position, the Committee can ensure that Parliament signals its expectation of genuine consumer and community engagement, regardless of whether legislative change is made straight away.

## If amendments are not made

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Even if the Bills pass without change, the CDC can use its existing powers to deliver strong consumer and community engagement from its first day. Parliament and the public will expect this, and evidence shows that practical steps can make a significant difference.



## Practical steps within the current Bill

- **Publish an engagement framework from inception:** Set out how the CDC will engage consumers and communities, with clear principles and methods.
- **Select advisers transparently:** Use open expressions of interest and published criteria to appoint consumer and community advisers to the Advisory Council and to Expert Advisory Groups.
- **Keep the Council and committees fresh:** There should be a limit on the number of times people can be reappointed or a total number of years they can serve on the Advisory Council and associated committees. This provision ensure that the advisory structures are refreshed regularly, ensuring that the CDC works with the leading advisors on the current and emerging issues.
- **Resource participation:** Provide adequate funding for consumer involvement, ensuring participation is accessible, inclusive, and culturally safe.
- **Communicate plainly:** Produce summaries of advice and decisions in clear, accessible language so that citizens can see and understand the CDC's work.
- **Produce public feedback reports:** Show how consumer input has been considered and acted on, "closing the loop" for participants and strengthening trust.
- **Guarantee Advisory Council practice:** Adopt a standing practice of hearing directly from consumer and community representatives on agenda items and publish how their contributions influenced deliberations.
- **Pilot rapid-consultation models:** In preparation for emergencies, establish and test lightweight mechanisms to bring in consumer voices quickly without delaying urgent action.

Acting early in this way would demonstrate the CDC's commitment to fairness, transparency, and accountability — and build the trust it needs to succeed.

## Conclusion

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The Australian Centre for Disease Control is a once-in-a-generation reform. Its success will depend on strong governance, clear accountability, and the confidence of citizens.

Our recommendations set out practical amendments to embed consumer and community voice in the CDC's structures, reporting and governance. If these amendments are not made, the CDC should still act from its first day to demonstrate transparency, accountability and genuine engagement.

The Consumers Health Forum stands ready to support this work. We bring the networks, expertise and experience needed to help the CDC design frameworks, test communications and establish reporting models that meet community expectations.

Strong consumer engagement is not a “nice to have.” It is the foundation for trust, fairness and compliance. With it, the CDC can become our newest national treasure, trusted with protecting the health of all Australians.