



Improving Lung Health in the ACT

Lung Foundation Australia's submission to the 2026-27
Australian Capital Territory Budget

Executive summary

Lung Foundation Australia (LFA) is the only charity and leading peak body of its kind in Australia that funds life-changing research and delivers support services that give hope to people living with lung disease or lung cancer. Since 1990, we have been 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. We are a trusted point-of-call for the **1 in 3 Australians living with a lung disease**.

There are more than 30 different types of lung conditions, which are a cause of significant health and economic burden in the Australian Capital Territory (ACT). Lung cancer and chronic lower respiratory diseases are equal fourth leading causes of death in the territory¹. Lung conditions collectively **cost the ACT healthcare system approximately \$250 million in 2022-23**, that is 8% of total health spending on disease².

Lung Foundation Australia have identified **6 priorities requiring government action** to improve lung health in the ACT and reduce health system pressure.

Lung Foundation Australia's priorities for the 2026-27 ACT Budget

- 1** Invest \$215,000 per year, for 3 years, to increase access to Specialist Lung Cancer Nurses.
- 2** Invest \$260,000 per year, for 3 years, in the vital Respiratory Care Program.
- 3** Expand Canberra Hospital's centre-based pulmonary rehabilitation program to other Canberra Health Services in a hub-and-spoke model.
- 4** Invest \$255,000 per year, for 2 years, in vaping resources and information for young people.
- 5** Amend the Territory's Electoral Act 1992 to ban political donations by the tobacco industry.
- 6** Invest \$350,000 in air pollution resources and information to build climate resilience.

LFA's priorities align with several ACT policy documents, such as the [ACT Preventive Health Plan 2020-2025](#), [ACT Health Services Plan 2022-2030](#), and [ACT Health Workforce Strategy 2023-2032](#). We seek your action and investment to address these priorities and promote lung health in the ACT.

We welcome the opportunity to discuss this budget proposal with you further.

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Priorities on a page

1

\$215,000 per year, for 3 years, to increase access to Specialist Lung Cancer Nurses*



Lung cancer is the leading cause of cancer-related death in the ACT.



One Lung Foundation Australia SLCN generates >\$1 million in net cost savings and quality-of-life gains.

2

\$260,000 per year, for 3 years, in the vital Respiratory Care Program*



COPD is a leading cause of potentially preventable hospitalisations in the ACT.



Our Respiratory Care Program reduces ED presentations and hospitalisations.

3

Expand Canberra Hospital's centre-based pulmonary rehabilitation program to other Canberra Health Services in a hub-and-spoke model



More than 11,000 people in the ACT have COPD, but there is only one centre-based pulmonary rehabilitation program.



Expanding access to pulmonary rehabilitation will reduce avoidable hospitalisations and improve lives.

4

\$255,000 per year, for 2 years, for e-cigarette resources and information for young people in the ACT *



E-cigarette use by young people has increased significantly in recent years.



Resources are needed to empower young people to make healthy decisions.

5

Amend the Territory's Electoral Act 1992 to ban political donations by the tobacco industry



The tobacco industry continues to fight sensible reforms in Australia.



Banning political donations by the tobacco industry affirms that these industries should have no influence on public policy.

6

Invest \$350,000 in air pollution resources and information to build climate resilience*



There is no safe level of air pollution. Climate change and wood heaters threaten air quality in the ACT.



People need clear, timely, and practical guidance to safeguard their health in the face of worsening air quality.

* Full budget available on request.

Invest \$215,000 per year, for 3 years, to increase access to Specialist Lung Cancer Nurses (SLCNs) in the ACT

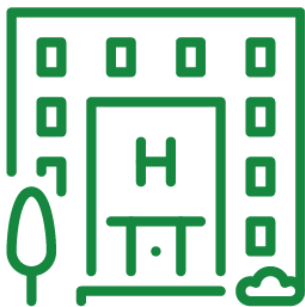
Partner with Lung Foundation Australia to strengthen lung cancer care in the ACT

Lung cancer is a significant cause of disease burden in Australia. It is the most common cause of cancer-related death¹ and a leading cause of premature mortality across all diseases³. Of the five most commonly diagnosed cancers, lung cancer has the lowest five-year survival rate⁴.

The pathway to a lung cancer diagnosis is **long, complicated, and fragmented**. To

reach a diagnosis, many patients must undergo multiple complex investigations, often conducted outside of formal cancer services. As a result, it can take **three months or more** to reach a diagnosis, causing delays to potentially life-saving treatment.

Existing models of care for lung cancer nursing, including the McGrath Foundation model, typically begin support only after a confirmed diagnosis. This **leaves people with suspected lung cancer without critical assistance during the pre-diagnosis phase**—a period marked by profound uncertainty, clinical complexity, and emotional distress.



Lung cancer is the
#1 cause of cancer
death in the ACT



- 90 deaths in 2023
- Over \$15 million in health system costs in 2022-23

The time to address these inadequacies in care is now. The **National Lung Cancer Screening Program** launched in July 2025 and will contribute to a rise in lung cancer cases, particularly at earlier stages when treatment can be more effective. While this is a major step forward in addressing the burden of lung cancer, it will place **additional pressure on respiratory services**, particularly during the diagnostic and staging phases. It is essential that screening efforts are supported by timely and coordinated diagnosis and treatment. Without the right workforce in place, there is a risk that system bottlenecks will undermine the benefits of improved early detection.

*Full budget available on request.

Lung Foundation Australia's Specialist Lung Cancer Nurses (SLCN)

Lung Foundation Australia's SLCNs are highly skilled, advanced practice registered nurses with expertise in lung cancer. Lung Foundation Australia's evidence-based model of care **uniquely positions SLCNs within respiratory medicine** so that they can support individuals through the **pre-diagnosis period**. As a result of being embedded within respiratory medicine, SLCNs can:

- triage and expedite referrals,
- coordinate timely diagnostic investigations and appointments,
- advocate for patients in lung cancer multidisciplinary teams,
- support patients through uncertainty and complex decision making,
- reduce time to diagnosis and commencement of treatment, and
- maximise the benefits of early detection as part of the new National Lung Cancer Screening Program.

Investment in the SLCN workforce, and in LFA's model of care specifically, will ensure people with suspected lung cancer receive the support they need **from the moment of suspicion, not just at the point of diagnosis**.

Investing in one Lung Foundation Australia SLCN generates >\$1 million in net cost savings and quality-of-life gains[†].



Success in South Australia and Queensland

LFA have been working with the governments of South Australia and Queensland to deliver on-the-ground SLCNs since late 2023. In this time, the SLCNs have **supported over 3,500 patients in more than 13,000 clinical interactions**. The SLCNs have been embedded within the local lung cancer multidisciplinary teams, advocating for the patients they have supported through the pre-diagnosis period. The SLCNs have also actively led improvements to triaging, referral pathways, and service delivery, enhancing care for patients.

Currently, in the ACT, there are a small number of specialist lung cancer nurses operating independently within health services. While these nurses provide valuable support to patients, they lack coordinated infrastructure and a consistent national model. This limits their reach, sustainability, and visibility. LFA's seeks to work in partnership with the ACT Government to:

- Fund SLCNs working to LFA's model of care in the hospitals of highest need, based on population health statistics and service demand. **Initially, we recommend funding one LFA SLCN to work at Canberra Hospital.**
- Fund LFA's to provide training, mentorship, professional development and national coordination, supported by a national program team and digital infrastructure. This includes access to a community of practice of more than 400 lung cancer nurses.
- Enable LFA to drive continuous quality improvement through program evaluation.

[†]2025 independent economic analysis of Lung Foundation Australia SLCN model of care. Available on request.

Invest \$260,000 per year, for 3 years, in the vital Respiratory Care Program

Reduce pressure on the ACT healthcare system by investing in our Respiratory Care Program

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 a progressive, long-term lung condition that leads to increasing breathing difficulty, disability, and premature death. COPD results from long-term exposure to irritants, such as cigarette smoke, occupational hazards and air pollution. Other risk factors are genetics, prenatal events, low birth weight, and frequent respiratory infections. COPD is a progressive, chronic lung condition that leads to increasing breathing difficulty, disability, and premature death.

COPD represents a significant burden to people living with the disease and the ACT health system. The high number of preventable hospital admissions alone puts enormous pressure on an already stretched health system in ACT.

The impact of COPD in the ACT

Prevalence: more than 11,000 people living with COPD in 2022 – second highest rate of all states and territories after adjusting for age

Hospitalisations: nearly 700 potentially preventable hospitalisations in 2023-24 – third-leading cause among chronic conditions

Health system costs: more than \$24 million in 2022-23



Although there is no cure for COPD, the condition is inherently treatable. **Early diagnosis and evidence-based interventions can slow the progression of the disease and allow people to live well.** In 2024, LFA commissioned research to better understand the lived experiences of people living with or caring for someone with a lung condition. Compared to all respondents, people with COPD were significantly more likely to report waiting too long to see a GP and then needing to go to hospital. One in four people with COPD stated that finding a GP with a good understanding of lung disease was a barrier to effectively managing their condition, as was lack of information and understanding about how to manage their lung disease. **People with COPD need clear, practical support—alongside primary care—to take charge of their health and manage their conditions with confidence.**

*Full budget available on request.

1 in 4 people with COPD say lack of information and understanding is a barrier to being able to effectively manage their condition.

Lung Foundation Australia's Respiratory Care Program

Our Respiratory Care Program aims to improve patient engagement with their healthcare teams and encourage effective self-management. **The service identifies gaps in evidence-based care and provides participants with the information and support required to address these.** The program comprises three clinician-led telephone appointments conducted over four to six months, plus a follow-up call 12 months after the final session.

Since 2019, 1,500 Australians living with COPD have been clients of our Respiratory Care Program. The program is underpinned by a robust data collection protocol to assess its impact. One key measure of success is the uptake of written COPD Action Plans, which are vital self-management tools that help individuals recognise baseline symptoms and respond appropriately to changes. To date, more than 400 participants have completed the program and their 12-month follow-up. Among this group, Action Plan ownership rose from 26% at baseline to 48% post-program, and further to 55% at 12 months. **Emergency department presentations dropped, with the proportion of participants reporting zero visits rising from 61% to 77%, and similar improvements were seen in hospitalisation rates.** An earlier independent evaluation has also confirmed the program's impact and cost effectiveness⁵.

"I have received invaluable information that has allowed me to undertake respiratory testing and medical follow-up including medication review. I have also ceased smoking."

- Participant of Lung Foundation Australia's Respiratory Care Program

Lung Foundation Australia's Respiratory Care Program is:

- ✓ **Free to consumers**, providing vital health support without added cost-of-living pressure.
- ✓ **Evidence based and cost effective**, helping to relieve pressure on the health system.
- ✓ **Accessible across Australia**, promoting equitable health outcomes.

We recommend the ACT Government commit to investing in the vital Respiratory Care Program. Our recommendation aligns with the ACT Health Services Plan 2022-2030 and the ACT Health Workforce Strategy 2023-2032. The recommendation also aligns to Quality Statement 3 and 9 from the COPD Clinical Care Standard released by the Australian Commission on Safety and Quality in Health Care.

We also note that this modest recommendation of \$260,000 annually amounts to just 1% of the current health system expenditure on this treatable and manageable chronic condition in the ACT.

Expand Canberra Hospital's centre-based pulmonary rehabilitation program to other Canberra Health Services in a hub-and-spoke model

Pulmonary rehabilitation is a six- to eight-week program combining exercise, education, and self-management techniques for people with a chronic lung condition. Delivered by a team of health professionals, pulmonary rehabilitation teaches the knowledge and skills to help individuals better manage their condition and to exercise safely.



Pulmonary rehabilitation programs are crucial to people being able to live well with complex and chronic lung conditions, especially COPD^{6,7}. The *COPD Clinical Care Standard* states that everyone with COPD can benefit from participating in pulmonary rehabilitation. **Participation is especially critical following hospitalisation for a COPD exacerbation as it can reduce the risk of readmission by 52%⁷ and improve exercise capacity and quality of life⁸.**

Despite the well-documented benefits of pulmonary rehabilitation for people with COPD, access to centre-based services remains severely limited due to long waitlists, insufficient funding, and logistical barriers. This is a nationwide issue, and the ACT is no exception.

There is only one centre-based pulmonary rehabilitation program in the ACT, which operates out of the Canberra Hospital. **It is reported that more than 150 people are on the waitlist for the Canberra Hospital program. For Category 3 patients, this means waiting 18 months or more for pulmonary rehabilitation, increasing the likelihood of hospitalisations for exacerbations.**

More than 11,000 people in the ACT have COPD —

but there is only one centre-based pulmonary rehabilitation program.

Local clinicians have reported that patients are unable to access the service in a timely manner, despite multiple hospitalisations for an exacerbation — a known powerful predictor of future exacerbations⁹. While clinicians remain strong advocates for pulmonary rehabilitation, patient barriers such as long wait times and limited service locations have been reported to discourage clinician referrals despite significant clinical need.

As outlined in the *National Pulmonary Rehabilitation Strategy Framework 2023–2026*, funding is needed to increase access to pulmonary rehabilitation programs across Australia. **We recommend the ACT Government expand Canberra Hospital's centre-based program to other Canberra Health Services in a hub-and-spoke model.** This recommendation would see access to pulmonary rehabilitation improve, without introducing unnecessary administrative burden. By expanding access to centre-based pulmonary rehabilitation, the ACT Government will be directly responding to Quality Statement 5 from the COPD Clinical Care Standard. Our recommendation also aligns with the *ACT Health Services Plan 2022–2030* and *ACT Health Workforce Strategy 2023–2032*.

\$255,000 per year, for 2 years, for e-cigarette resources and information for young people in the ACT

The number of people using e-cigarettes has increased significantly over the last few years, particularly among young adults¹⁰. With ongoing changes in the policy environment and evidence continuing to emerge, **it is important that updated information and resources are available to encourage healthy behaviours in young people in a way they can relate to.**

Lung Foundation Australia have developed a wide range of vaping resources, such as:

- Factsheets for youth, young adults, parents and carers, educators, and health professionals,
- Free vaping e-learning module,
- Animated short videos, posters, and factsheets for First Nations young people, co-designed with communities in New South Wales and Far North Queensland, and
- Videos, posters, and factsheets for young people who work in a trade industry.



"They [LFA's vaping videos] provided me [with] information about things I wouldn't have known about. It has taught me a lot about it."

Lung Foundation Australia's e-cigarette resources are in high demand. They have been used and promoted by health departments, education departments, schools, non-government organisations, and more. We are proud to co-design and collaborate with others to produce meaningful and impactful resources that improve knowledge and change behaviour.

We recommend the ACT Government fund Lung Foundation Australia to expand and disseminate new and existing information and resources on e-cigarettes for young people, particularly those from priority populations including First Nations young people and young adults working in a trade industry. Our recommendation aligns with objectives from the ACT Preventive Health Plan 2020-2025 and the associated action plan for 2023-2025.

*Full budget available on request.

Amend the Territory's *Electoral Act 1992* to ban political donations by the tobacco industry

In recognition of the current opportunity for electoral reform, ban political donations of any type by the tobacco industry

Our obligations as a signatory to the *WHO Framework Convention on Tobacco Control* compel Australia to ban political donations from the tobacco industry, as does the endorsement of the *National Preventive Health Strategy 2021-2030* and the *National Tobacco Strategy 2023-2030* by all Australian jurisdictions.

Legislating a ban on political donations from the tobacco industry operationalises the stated principle of ACT's main political parties (ACT Labor, Canberra Liberals, and The Greens) to not accept tobacco industry donations. The ACT Government already bans donations from certain entities, such as property developers and their associates. At a time when the tobacco industry continues to fight sensible tobacco and e-cigarette reforms, both in Australia and globally, banning donations from the tobacco industry would send a clear message that **the tobacco industry should have no influence on Australian public policy**. We recommend closing this policy gap and futureproofing the ACT from tobacco industry influence.

Action 1.4 of the *National Tobacco Strategy*:

Develop and implement measures to prohibit contributions from the tobacco industry and those working to further its interests to political parties, candidates, or campaigns.



This policy reform is possible, with New South Wales banning tobacco industry political donations in 2011 and South Australia banning all political donations in 2025. In July 2025, LFA provided a submission to the ACT Legislative Assembly Inquiry into the operation of the 2024 *ACT Election and Electoral Act 1992*, detailing our recommendation. This recommendation aligns with objectives from the *ACT Preventive Health Plan 2020-2025* and the associated action plan for 2023-2025.

Invest \$350,000 in air pollution resources and information to build climate resilience*

Empower Canberrans to protect their lung health in a changing climate

Air pollution is a serious and growing threat to public health, driven in large part by climate change. As fossil fuels are burned, greenhouse gases pollute the air and accelerate global warming. Rising temperatures intensify the presence of allergens and pollutants¹¹. Similarly, increasingly frequent and severe weather events, such as bushfires and storms, also release dangerous levels of smoke and mould into the atmosphere¹².

"I have a lung condition and [am] on oxygen 24x7 ... In winter there is a smoking wood fire from my neighbour which is severely impacting my lung health and my neighbours are suffering too. I cannot go outside between 4pm -10am."

In the ACT, air quality is susceptible to extreme pollution events, including wildfires and dust storms, which can expose residents to hazardous air conditions for days or even weeks¹³. In the winter, domestic wood heating routinely pushes pollution levels beyond safe limits¹⁴.

There is no safe level of air pollution. Even low levels of air pollution increase the risk of illness and death¹⁵. People with existing lung conditions are especially vulnerable, but no one is immune. As climate change continues to drive more frequent and intense natural disasters, the health risks associated with poor air quality will only grow.

To protect the community, we must act now to build climate resilience. People need clear, timely, and practical guidance to safeguard their health in the face of worsening air quality. Yet, this kind of information is critically lacking¹⁶, leaving many Canberrans unprepared and at risk.



With support from the ACT Government, LFA will develop and deliver evidence-based resources that fill this gap. These resources will be tailored for both the general public and those living with lung conditions, and will be designed for use before, during, and after climate emergencies. By improving public understanding of air pollution risks and empowering individuals to take protective action, this initiative will strengthen Canberra's climate resilience and help safeguard the health of its residents.

*Full budget available on request.

References

1. Australian Bureau of Statistics. Causes of Death, Australia, 2023. Australian Bureau of Statistics. October 10, 2024. <https://www.abs.gov.au/statistics/health/causes-death/causes-death-australia/latest-release>
2. Health system spending on disease and injury in Australia 2022–23, Data. Australian Institute of Health and Welfare. November 20, 2024. <https://www.aihw.gov.au/reports/health-welfare-expenditure/health-system-spending-on-disease-and-injury-aus/data>
3. Australian Institute of Health and Welfare. Australian Burden of Disease Study 2024. December 12, 2024. <https://www.aihw.gov.au/reports/burden-of-disease/australian-burden-of-disease-study-2024/contents/summary>
4. Australian Institute of Health and Welfare. Cancer data in Australia. October 8, 2025. <https://www.aihw.gov.au/reports/cancer/cancer-data-in-australia/contents/about>
5. Rana R, Gow J, Moloney C. *The Impact and Effectiveness of a Nurse Led Telehealth Education Program for Chronic Obstructive Pulmonary Disease Patients.*; 2022.
6. McCarthy B, Casey D, Devane D, Murphy K, Murphy E, Lacasse Y. Pulmonary rehabilitation for chronic obstructive pulmonary disease. *Cochrane Database Syst Rev.* 2015;2015(2):CD003793. doi:10.1002/14651858.CD003793.pub3
7. Jenkins AR, Burtin C, Camp PG, et al. Do pulmonary rehabilitation programmes improve outcomes in patients with COPD posthospital discharge for exacerbation: a systematic review and meta-analysis. *Thorax.* 2024;79(5):438-447. doi:10.1136/thorax-2023-220333
8. Australian Commission on Safety and Quality in Health Care. *Chronic Obstructive Pulmonary Disease Clinical Care Standard.* Australian Commission on Safety and Quality in Health Care; 2024. <https://www.safetyandquality.gov.au/standards/clinical-care-standards/chronic-obstructive-pulmonary-disease-clinical-care-standard>
9. Hurst JR, Han MK, Singh B, et al. Prognostic risk factors for moderate-to-severe exacerbations in patients with chronic obstructive pulmonary disease: a systematic literature review. *Respiratory Research.* 2022;23(1):213. doi:10.1186/s12931-022-02123-5
10. Electronic cigarette use (vaping) in Australia in 2022–2023. Australian Institute of Health and Welfare. July 2, 2024. <https://www.aihw.gov.au/reports/australias-health/vaping-e-cigarettes>
11. United States Environmental Protection Agency. Air Quality and Climate Change Research. February 5, 2024. <https://www.epa.gov/air-research/air-quality-and-climate-change-research>
12. Climate change. <https://www.who.int/news-room/fact-sheets/detail/climate-change-and-health>
13. IQAir. ACT Air Quality Index (AQI) and Australia Air Pollution. <https://www.iqair.com/au/australia/act>
14. Office of the Commissioner for Sustainability and the Environment. *Can Canberra “burn Right Tonight” or Is There “No Safe Level of Air Pollution”? An Investigation into Wood Heater Policy in the ACT.*; 2023. <https://envcomm.act.gov.au/wp-content/uploads/2022/08/OCSE-Wood-Heaters-Report-A40588031.pdf>
15. Health Effects Institute. *State of Global Air Report 2024.* Health Effects Institute; 2024. <https://www.stateofglobalair.org/resources/report/state-global-air-report-2024>
16. Grigsby-Duffy L, Preston P, Hatte L. *Climate Change and Air Pollution Survey Report.* Lung Foundation Australia; 2023. <https://lungfoundation.com.au/resources/climate-change-and-air-pollution-survey-report/>

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