

# Statement of Priorities

2018–19 Agreement between the Minister for Health and  
Austin Health

To receive this publication in an accessible format phone 9096 1309, using the National Relay Service 13 36 77 if required, or email [jonathan.prescott@dhhs.vic.gov.au](mailto:jonathan.prescott@dhhs.vic.gov.au).

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# Background

Statements of Priorities are key accountability agreements between Government and Victorian publicly funded health, mental health and ambulance services. The content and process for preparation and agreement of the annual Statement of Priorities is consistent with sections 40G, 65ZFA, 65ZFB and section 26 of the Health Services Act 1988.

Statements of Priorities are consistent with the health services' strategic plans and aligned to government policy directions and priorities. The annual agreements support the delivery of, or substantial progress towards the key shared objectives of quality and safety, good governance and leadership, access and timeliness, and financial sustainability.

A Statement of Priorities consists of four parts:

- Part A provides an overview of the service profile, strategic priorities and deliverables the health service will achieve in the year ahead.
- Part B lists the performance priorities and agreed targets.
- Part C lists funding and associated activity.
- Part D forms the service agreement between each health service and the state of Victoria for the purposes of the National Health Reform Agreement.

Performance expectations and mechanisms used by the Department of Health and Human Services to monitor and manage performance are described in the *Victorian Health Service Performance Monitoring Framework 2018-19*.

High standards of governance, transparency and accountability are essential. In this context, the Victorian Government commits to publish Statements of Priorities by 1 November each year and place more data about the performance of our health system into the public domain.

# Strategic priorities

The Victorian Government is responsible for ensuring that a wide range of health services are delivered to the Victorian community. The Department of Health and Human Services (the department) develops policy, funds and regulates health services and activities that promote and protect the health of Victorians. Through the department, the government funds more than 500 organisations to provide various health services to Victorians.

## Government commitments

The *Victorian Budget 2018-19* provides an extra \$2.77 billion over 5 years for health, mental health, ambulance and aged care services across Victoria, including:

- \$1.6 billion over four years to meet hospital services demand to respond to growing patient demand across Victoria
- \$583.8 million over four years for mental health and drug services
- \$362.2 million over four years to improve access to elective surgery, to respond to demand, reduce waiting times and to maintain the current performance of Victoria's health service system.
- \$50 million (in 2017-18) for a *Winter Blitz* package to support health services to prepare for the 2018 winter flu season.
- \$55.1 million over four years for an additional 90 paramedics to meet increases in demand for ambulance services.

To support this investment, the Andrews Labor Government is funding an \$1.3 billion acute health capital, infrastructure and equipment program.

This investment will support the implementation of Health 2040: advancing health, access and care - which presents a clear vision for the health and wellbeing of Victorians and for the Victorian healthcare system.

# Part A: Strategic overview

## Mission statement

### Our vision

Shaping the future through exceptional care, discovery and learning.

### Our values

Our values define who we are, and shape our culture and the behaviours, practices and mindsets of our people. They guide how we work with each other and with consumers, the community and our partners. Our values reflect what is most important to us and what we care about. They will support us to deliver the goals outlined in the 2018-19 Statement of Priorities, by driving the qualities and behaviours that we will need individually and collectively to be successful. Our four organisational values are set out below:

1. **Our actions show we care** - we are inclusive and considerate. We appreciate one another, always listening and interacting with compassion.
2. **We bring our best** - we are guided by the needs of our patients, bringing commitment, integrity and energy to everything we do. We are passionate about delivering excellence.
3. **Together we achieve** - our culture of collaboration means we work openly with our people, our community and beyond to achieve great outcomes.
4. **We shape the future** - through research, education and learning we innovate, exploring new opportunities that will change healthcare for the better

## Service profile

Austin Health is a leading specialist tertiary and quaternary health service, located in the north east of Melbourne. It is known for its delivery of high-quality, safe care, a strong record in research and teaching, and a place where staff are proud to work.

Austin Health provides a comprehensive range of acute, sub-acute, mental health, specialist clinics and outreach services to our local community. Austin Health is also the state-wide provider of a range of specialist services, including the:

- Victorian Spinal Cord Service
- Victorian Respiratory Support Service
- Victorian Liver Transplant Service
- Acquired Brain Injury Unit
- Child Mental Health Inpatient Unit
- State-wide Toxicology Services (Including the Victorian Poisons Information Centre)

Austin Health is also renowned for its specialist work in cancer, neurology, endocrinology, mental health, infectious diseases, rehabilitation, sleep medicine, intensive care, emergency medicine and a range of other specialties.

As part of a broader healthcare system, Austin Health works closely with other healthcare providers to collectively deliver a comprehensive and accessible mix of services.

Austin Health is one of Victoria's largest healthcare providers, employing over 8,000 people over several locations, including Austin Hospital, Heidelberg Repatriation Hospital (HRH), the Royal Talbot Rehabilitation Centre (RTRC) and the Olivia Newton John Cancer Wellness & Research Centre.

Austin Health is an internationally recognised leader in clinical teaching and training, and is affiliated with 16 universities and 4 TAFEs. We have a significant research commitment through Austin LifeSciences which brings together over 800 researchers and several leading research institutes:

- The Olivia Newton-John Cancer Research Institute
- The Florey Institute of Neurosciences and Mental Health
- Institute for Breathing and Sleep
- Parent-Infant Research Institute
- Spinal Research Institute
- Austin Medical Research Foundation

Our new Strategic Plan provides a clear direction for Austin Health for the next five years and describes the 6 strategic priorities that we will pursue to achieve our vision of shaping the future through exceptional care, discovery and learning. In 2018-19, we will focus on:

- Redesigning our model of care to optimise service delivery and support the development of the new Austin Health Master Plan
- Undertaking a surgical services feasibility study
- Planning for the development of the Statewide Child and Family Intensive Assessment and Planning Service

## **Strategic planning**

The DRAFT Austin Health Strategic Plan 2018-2022 will be available online once endorsed by the Minister for Health at <http://www.austin.org.au>.

## Strategic priorities

In 2018-19 Austin Health will contribute to the achievement of the Victorian Government's commitments by:

Goals	Strategies	Health Service Deliverables
<p><b>Better Health</b></p> <p>A system geared to prevention as much as treatment</p> <p>Everyone understands their own health and risks</p> <p>Illness is detected and managed early</p> <p>Healthy neighborhoods and communities encourage healthy lifestyles</p>	<p><b>Better Health</b></p> <p>Reduce statewide risks</p> <p>Build healthy neighborhoods</p> <p>Help people to stay healthy</p> <p>Target health gaps</p>	<p>Support the delivery of the Better Health North East Melbourne Strategic Plan by collaborating on projects established that focus on the following priority areas:</p> <ul style="list-style-type: none"> <li>- Frail and elderly</li> <li>- Children with developmental delay</li> </ul> <p>Develop an optimal care pathway for patients in our region with oesophagogastric cancer, focusing on the identification and implementation of strategies that will achieve improved timeframes in the patient pathway for referral, detection and management of oesophagogastric cancer.</p> <p>Expand the reach of our Hepatitis C treatment program to focus on disadvantaged and marginalised members of our community, with the aim of treating 180 people in 2018-19.</p> <p>Explore opportunities to expand outreach services to our community.</p> <p>Develop a detailed operational model to inform the functional brief for the community based Statewide Child and Family Intensive Assessment and Planning Service</p>
<p><b>Better Access</b></p> <p>Care is always there when people need it</p>	<p><b>Better Access</b></p> <p>Plan and invest</p>	<p>Undertake a review of our model of care to inform the development of our Master Plan.</p>

Goals	Strategies	Health Service Deliverables
<p>More access to care in the home and community</p> <p>People are connected to the full range of care and support they need</p> <p>There is equal access to care</p>	<p>Unlock innovation</p> <p>Provide easier access</p> <p>Ensure fair access</p>	<p>Participate in the Better Care Victoria Patient Flow Partnership to support sustainable and continuous initiatives, focusing on improving access within clinically appropriate timeframes for:</p> <ul style="list-style-type: none"> <li>- Emergency and inpatients services</li> <li>- Specialist Clinics</li> </ul>
		<p>To improve access to surgery by maximising the utilisation of our existing theatre resources and capacity, undertake a theatre utilisation project that focuses on:</p> <ul style="list-style-type: none"> <li>- Identifying key issues impacting theatre utilisation</li> <li>- Developing a program of work to address key priority areas</li> </ul>
		<p>As a cardiac network lead, collaborate with St Vincent's Hospital to establish the North-East Cardiac Service network and develop a coordinated cardiac service for patients in our defined region.</p>

Goals	Strategies	Health Service Deliverables
		<p>To improve access to care for children in our community we will:</p> <ul style="list-style-type: none"> <li>- Explore opportunities for collaborative partnerships with health services such as the Royal Children’s Hospital that focus on: <ul style="list-style-type: none"> <li>➤ Supporting Austin Health to safely provide a range of paediatric services</li> <li>➤ Providing secondary care to children in our community to support specialist paediatric health services to focus on delivering tertiary and quaternary care</li> </ul> </li> <li>- Undertake a service review to determine the best service model and service profile for paediatric general surgery.</li> </ul>

Goals	Strategies	Health Service Deliverables
		<p>Expand our utilisation of telehealth to improve access to Specialist Clinics by:</p> <ul style="list-style-type: none"> <li>- Implementing telehealth in an additional 4 Specialist Clinics (including three Statewide Services)</li> <li>- Implementing telehealth to enhance access to Specialist Clinic care and reduce risk to clients and staff associated with client transfers for inpatients at: <ul style="list-style-type: none"> <li>➤ Thomas Embling Hospital (in partnership with Forensicare)</li> <li>➤ Mellor Ward</li> <li>➤ Spinal Rehabilitation Unit</li> </ul> </li> </ul> <p>Commence planning for the clinical commissioning of the new MRI linear accelerator in the Olivia Newton-John Cancer Wellness and Research Centre to improve access to state of the art radiation oncology treatment to the people of Victoria.</p>

Goals	Strategies	Health Service Deliverables
<p><b>Better Care</b></p> <p>Target zero avoidable harm</p> <p>Healthcare that focusses on outcomes</p> <p>Patients and carers are active partners in care</p> <p>Care fits together around people's needs</p>	<p><b>Better Care</b></p> <p>Put quality first</p> <p>Join up care</p> <p>Partner with patients</p> <p>Strengthen the workforce</p> <p>Embed evidence</p> <p>Ensure equal care</p>	<p>To demonstrate our commitment to providing better care, Austin Health has invested in Clinical Practice training (facilitated by the ACHS Improvement Academy) for our quality coordinators and key clinical leaders. 8 key projects that focus on avoiding harm and improving the patient experience have been derived from this training, and will be completed and outcomes presented to members of the Executive team.</p> <p>An Austin Health Research Strategy will be developed to review and define the structure of the Austin Health research precinct, and to enhance our capability to translate and embed research findings into clinical practice and improving patient care.</p> <p>To demonstrate our commitment to closing the gap, Austin Health will develop a Reconciliation Action Plan. This will be developed in collaboration with the Closing the Gap committee and the Aboriginal and Torres Strait Islander Employment committee.</p>

Goals	Strategies	Health Service Deliverables
		<p>Support our patients to be partners in their care by utilising patient centred technology:</p> <ul style="list-style-type: none"> <li>- Piloting the recently developed “My Austin Health Journey” app in 4 clinical services (colonoscopy, bariatric surgery, Joint replacement surgery, echocardiogram), to provide patients with step by step communication on: <ul style="list-style-type: none"> <li>➤ Preparation for their surgery or procedure</li> <li>➤ What to expect on their day of surgery or procedure</li> <li>➤ Post-surgery or procedure care</li> <li>➤ The app also includes mechanism for feedback on the patient experience.</li> </ul> </li> <li>- Commence the development of an Austin Health patient portal to support our patients to manage their care at Austin Health that includes the following features: <ul style="list-style-type: none"> <li>➤ Specialist Clinic appointment times</li> <li>➤ Wayfinding</li> <li>➤ General Austin Health information</li> </ul> </li> </ul>

Goals	Strategies	Health Service Deliverables
		<p>To improve prescribing and patient outcomes through evidence based drug selection, the Drug Stewardship initiative will undertake a series of 12 projects focusing on investigating evidence to support prescribing practices for a range of drugs such as :</p> <ul style="list-style-type: none"> <li>- Opioids</li> <li>- Botulinum toxin</li> <li>- Biosimilar medicines</li> </ul>
		<p>In response to the need to reduce harm associated with incorrect food and fluid provision, commence the implementation of recommendations from the meal matching project to reduce risk for patients with identified food allergies, and those requiring modified diets for swallowing issues.</p>
<p><b>Specific 2018-19 priorities (mandatory)</b></p>	<p><b>Disability Action Plans</b>  Draft disability action plans are completed in 2018-19. <i>Note: Guidance on developing disability action plans can be found at <a href="https://providers.dhhs.vic.gov.au/disability-action-plans">https://providers.dhhs.vic.gov.au/disability-action-plans</a>. Queries can be directed to the Office for Disability by phone on 1300 880 043 or by email at <a href="mailto:ofd@dhhs.vic.gov.au">ofd@dhhs.vic.gov.au</a>.</i></p>	<p>Submit the Austin Health Disability Action Plan 2015-2020 to the department by 30 June 2019.</p> <p>Commence the consultation process for the development of the new Austin Health Disability Plan 2021-25.</p>

Goals	Strategies	Health Service Deliverables
	<p>Volunteer engagement</p> <p>Ensure that the health service executives have appropriate measures to engage and recognise volunteers.</p>	<p>Develop a 3 year Volunteer Strategy for Austin Health that includes:</p> <ul style="list-style-type: none"> <li>- Establishment of a vision/mission statement for the volunteer program</li> <li>- Development of a robust governance framework to support the effective delivery of volunteer services</li> <li>- Strategies for recognising the contribution of our volunteers</li> <li>- A community and volunteer engagement plan</li> <li>- A process for review and evaluation of the volunteer program</li> </ul>

Goals	Strategies	Health Service Deliverables
	<p><b>Bullying and harassment</b></p> <p>Actively promote positive workplace behaviours and encourage reporting. Utilise staff surveys, incident reporting data, outcomes of investigations and claims to regularly monitor and identify risks related to bullying and harassment, in particular include as a regular item in Board and Executive meetings.</p> <p>Appropriately investigate all reports of bullying and harassment and ensure there is a feedback mechanism to staff involved and the broader health service staff.</p>	<p>Redesign our mandatory online Bullying, Harassment, Equal Opportunity &amp; Anti-Discrimination certification. The new behaviour based, e-learning package will promote positive workplace behaviours by focusing on the 7 guiding principles of the Austin Health Code of Conduct, and will incorporate the new Austin Health values.</p> <p>Modify the existing Health Safety and Wellness KPI Board/Executive report to incorporate monitoring of bullying and harassment risks, and add as a regular quarterly item at the full Board meeting.</p> <p>Complete the rollout of the 'Custodians of Culture' training for our senior leaders and managers to support them (as custodians of Austin Health's workplace culture) to prevent bullying, harassment and discrimination in the workplace. A development program for all staff will then be established to further enhance workforce culture and behaviours.</p>

Goals	Strategies	Health Service Deliverables
	<p><b>Occupational violence</b></p> <p>Ensure all staff who have contact with patients and visitors have undertaken core occupational violence training, annually. Ensure the department's occupational violence and aggression training principles are implemented.</p>	<p>In addition to the mandatory annual core occupational violence training for all staff, Austin Health provides face to face aggression management training for staff who have contact with patients and visitors. In 2018-19, we will review the face to face training to ensure it continues to meet the training needs of staff who may experience occupational violence.</p> <hr/> <p>In response to a gap analysis undertaken against the DHHS Occupational Violence and Aggression framework, which identified a need to introduce Behaviour Support Plans to proactively mitigate the risk of occupational violence, we will:</p> <ul style="list-style-type: none"> <li>- Pilot a Behaviour Support Program in the acute spinal ward</li> <li>- Evaluate the impact of Behaviour Support Plans in reducing the incidence and severity of occupational violence in the pilot area</li> </ul>

Goals	Strategies	Health Service Deliverables
	<p><b>Environmental Sustainability</b></p> <p>Actively contribute to the development of the Victorian Government's:</p> <ul style="list-style-type: none"> <li>• policy to be net zero carbon by 2050 and improve environmental</li> <li>• sustainability by identifying and implementing projects, including</li> <li>• workforce education, to reduce material environmental impacts with</li> <li>• particular consideration of procurement and waste management, and</li> <li>• publicly reporting environmental performance data, including</li> <li>• measureable targets related to reduction of clinical, sharps and landfill</li> <li>• waste, water and energy use and improved recycling.</li> </ul>	<p>Implement the year 2 actions in the Austin Health Environmental Sustainability Strategy, with a focus on:</p> <ul style="list-style-type: none"> <li>- Optimising heating and cooling systems and LED lighting upgrades to reduce energy use and operating costs.</li> <li>- Reducing the amount of waste generated, maximising recycling opportunities and minimising the amount of waste going to landfill through: <ul style="list-style-type: none"> <li>➢ Working with suppliers to improve the reuse and recyclability of packaging</li> <li>➢ Improved training and education programs on waste reduction, recycling and energy initiatives for staff.</li> </ul> </li> </ul> <p>Austin Health will fulfil its environmental sustainability reporting obligations including publically reporting on its performance</p>
	<p><b>LGBTI</b></p> <p>Develop and promulgate service level policies and protocols, in partnership with LGBTI communities, to avoid discrimination against LGBTI patients, ensure appropriate data collection, and actively promote rights to free expression of gender and sexuality in healthcare settings. Where relevant, services should offer leading practice approaches to trans and intersex related interventions. <i>Note: deliverables should be in accordance with</i></p>	<p>To support our staff to deliver effective person centred care that considers the specific issues and needs of LGBTI people, embed LGBTI inclusive practice principles into the patient centred care learning package.</p>

Goals	Strategies	Health Service Deliverables
	<p><i>the DHHS Rainbow eQuality Guide (see at <a href="http://www2.health.vic.gov.au/about/populations/lgbti-health/rainbow-equality">www2.health.vic.gov.au/about/populations/lgbti-health/rainbow-equality</a>) and the Rainbow Tick Accreditation Guide (see at <a href="http://www.glhv.org.au">www.glhv.org.au</a>)</i></p>	<p>In collaboration with the LGBTI community, develop a model of care to offer leading practice approaches to transgender interventions.</p>

## Part B: Performance Priorities

The *Victorian Health Services Performance monitoring framework* outlines the Government's approach to overseeing the performance of Victorian health services.

Changes to the key performance measures in 2018-19 strengthen the focus on high quality and safe care, organisational culture, patient experience and access and timeliness in line with Ministerial and departmental priorities.

Further information is available at [www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability](http://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability)

### High quality and safe care

Key performance indicator	Target
<b>Accreditation</b>	
Accreditation against the National Safety and Quality Health Service Standards	Accredited
Compliance with the Commonwealth's Aged Care Accreditation Standards	Accredited
<b>Infection prevention and control</b>	
Compliance with the Hand Hygiene Australia program	80%
Percentage of healthcare workers immunised for influenza	80%
<b>Patient experience</b>	
Victorian Healthcare Experience Survey – percentage of positive patient experience responses	95%
Victorian Healthcare Experience Survey – percentage of very positive responses to questions on discharge care	75%
Victorian Healthcare Experience Survey – patients perception of cleanliness	70%
<b>Healthcare associated infections (HAI's)</b>	
Number of patients with surgical site infection	No outliers
Number of patients with ICU central-line-associated bloodstream infection (CLABSI)	Nil
Rate of patients with SAB <sup>1</sup> per occupied bed day	≤ 1/10,000

Key performance indicator	Target
<b>Adverse events</b>	
Sentinel events – root cause analysis (RCA) reporting	All RCA reports submitted within 30 business days
Unplanned readmission hip replacement	Annual rate ≤ 2.5%
<b>Mental Health</b>	
Percentage of adult acute mental health inpatients who are readmitted within 28 days of discharge	14%

<sup>1</sup> SAB is Staphylococcus Aureus Bacteraemia

Key performance indicator	Target
Rate of seclusion events relating to a child and adolescent acute mental health admission	≤ 15/1,000
Rate of seclusion events relating to an adult acute mental health admission	≤ 15/1,000
Percentage of child and adolescent acute mental health inpatients who have a post-discharge follow-up within seven days	80%
Percentage of adult acute mental health inpatients who have a post-discharge follow-up within seven days	80%
<b>Continuing Care</b>	
Functional independence gain from an episode of rehabilitation admission to discharge relative to length of stay	≥ 0.645

## Strong governance, leadership and culture

Key performance indicator	Target
<b>Organisational culture</b>	
People matter survey - percentage of staff with an overall positive response to safety and culture questions	80%
People matter survey – percentage of staff with a positive response to the question, “I am encouraged by my colleagues to report any patient safety concerns I may have”	80%
People matter survey – percentage of staff with a positive response to the question, “Patient care errors are handled appropriately in my work area”	80%
People matter survey – percentage of staff with a positive response to the question, “My suggestions about patient safety would be acted upon if I expressed them to my manager”	80%
People matter survey – percentage of staff with a positive response to the question, “The culture in my work area makes it easy to learn from the errors of others”	80%
People matter survey – percentage of staff with a positive response to the question, “Management is driving us to be a safety-centred organisation”	80%
People matter survey – percentage of staff with a positive response to the question, “This health service does a good job of training new and existing staff”	80%
People matter survey – percentage of staff with a positive response to the question, “Trainees in my discipline are adequately supervised”	80%
People matter survey – percentage of staff with a positive response to the question, “I would recommend a friend or relative to be treated as a patient here”	80%

## Timely access to care

Key performance indicator	Target
<b>Emergency care</b>	
Percentage of patients transferred from ambulance to emergency department within 40 minutes	90%
Percentage of Triage Category 1 emergency patients seen immediately	100%

<b>Key performance indicator</b>	<b>Target</b>
Percentage of Triage Category 1 to 5 emergency patients seen within clinically recommended time	80%
Percentage of emergency patients with a length of stay in the emergency department of less than four hours	81%
Number of patients with a length of stay in the emergency department greater than 24 hours	0
<b>Elective surgery</b>	
Percentage of urgency category 1 elective surgery patients admitted within 30 days	100%
Percentage of urgency category 1,2 and 3 elective surgery patients admitted within clinically recommended time	94%
Percentage of patients on the waiting list who have waited longer than clinically recommended time for their respective triage category	5% or 15% proportional improvement from prior year
Number of patients on the elective surgery waiting list <sup>2</sup>	2,340
Number of hospital initiated postponements per 100 scheduled elective surgery admissions	≤ 7 /100
Number of patients admitted from the elective surgery waiting list	13,300
<b>Specialist clinics</b>	
Percentage of urgent patients referred by a GP or external specialist who attended a first appointment within 30 days	100%
Percentage of routine patients referred by GP or external specialist who attended a first appointment within 365 days	90%

<sup>2</sup> the target shown is the number of patients on the elective surgery waiting list as at 30 June 2019

## Effective financial management

Key performance indicator	Target
<b>Finance</b>	
Operating result (\$m)	0.00
Average number of days to paying trade creditors	60 days
Average number of days to receiving patient fee debtors	60 days
Public and Private WIES <sup>3</sup> activity performance to target	100%
Adjusted current asset ratio	0.7 or 3% improvement from health service base target
Forecast number of days a health service can maintain its operations with unrestricted available cash (based on end of year forecast)	14 days
Actual number of days a health service can maintain its operations with unrestricted available cash, measured on the last day of each month.	14 days
Measures the accuracy of forecasting the Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000

<sup>3</sup> WIES is a Weighted Inlier Equivalent Separation

## Part C: Activity and funding

The performance and financial framework within which state government-funded organisations operate is described in 'Volume 2: Health operations 2018-19 of the *Department of Health and Human Services Policy and funding guidelines 2018*.

The *Policy and funding guidelines* are available at <https://www2.health.vic.gov.au/about/policy-and-funding-guidelines>

Further information about the Department of Health and Human Services' approach to funding and price setting for specific clinical activities, and funding policy changes is also available at

<https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/pricing-funding-framework/funding-policy>

<b>Funding type</b>	<b>Activity</b>	<b>Budget (\$'000)</b>
<b>Acute Admitted</b>		
WIES Public	66,003	318,993
WIES Private	15,873	56,507
WIES DVA	799	4,065
WIES TAC	721	3,078
Other Admitted		35,906
<b>Acute Non-Admitted</b>		
Emergency Services		32,146
Genetic services		3,134
Home Enteral Nutrition	1,578	336
Home Renal Dialysis	73	4,153
Radiotherapy WAUs Public	68,439	16,178
Radiotherapy WAUs DVA	533	156
Specialist Clinics	166,910	41,648
Specialist Clinics - DVA		2,962
Other non-admitted		2,559
Total Perinatal Nutrition	137	1,070
<b>Subacute &amp; Non-Acute Admitted</b>		
Subacute WIES - Rehabilitation Public	1,407	14,878
Subacute WIES - Rehabilitation Private	464	4,563
Subacute WIES - GEM Public	1,315	13,906
Subacute WIES - GEM Private	386	3,797
Subacute WIES - Palliative Care Public	322	3,403
Subacute WIES - Palliative Care Private	73	722
Subacute WIES - DVA	92	1,174
Transition Care - Bed days	7,652	1,185
Transition Care - Home days	10,617	603
Subacute Admitted Other		7,070
<b>Subacute &amp; Non-Acute Other</b>		
Other specified funding		350

<b>Subacute Non-Admitted</b>		
Health Independence Program - Public	75,016	17,043
Health Independence Program - DVA		7
Victorian Artificial Limb Program		898
Subacute Non-Admitted Other		8,419
<b>Aged Care</b>		
Aged Care Assessment Service		1,124
<b>Mental Health and Drug Services</b>		
Mental Health Ambulatory	59,768	24,227
Mental Health Inpatient - Available bed days	39,078	27,081
Mental Health Inpatient - Secure Unit	9,126	5,219
Mental Health PDRS		115
Mental Health Service System Capacity	578	934
Mental Health Subacute	16,439	7,528
Mental Health Other		1,287
Drug Services	140	1,540
<b>Primary Health</b>		
Community Health Other		7
<b>Other</b>		
NFC - Transplants - Paediatric Liver	6	2,061
Health Workforce	289	14,118
Other specified funding		18,362
<b>Total Funding</b>		<b>704,512</b>

## Part D: Commonwealth funding contribution

The Victorian health system has faced a number of changes to Commonwealth funding since 2012–13. The changes to the funding arrangements announced in the 2014–15 Commonwealth Budget will continue to be applicable for the period 1 July 2018 to 30 June 2019 with funding continued to be linked to actual activity levels.

The Commonwealth funding contribution outlined the 2018–19 Commonwealth Budget was based on estimates and has since been updated by the Administrator of the National Health Funding Pool, based on latest activity estimates from States and Territories. However, given that final funding amounts are based on actual activity, there may be adjustments to funding throughout the year as a result of reconciliations and other factors outlined below.

Period: 1 July 2018 – 30 June 2019

	<b>Service category</b>	<b>Estimated National Weighted Activity Units (NWAU18)</b>	<b>Total funding (\$'000)</b>
Activity based funding	Acute admitted services	83,409	612,445
	Admitted mental health services	7,640	
	Admitted subacute services	10,865	
	Emergency services	13,072	
	Non-admitted services	10,107	
Block Funding	Non-admitted mental health services	-	50,571
	Teaching, training and research		
	Other non-admitted services		
Other Funding		-	41,882
<b>Total</b>		<b>125,093</b>	<b>704,898</b>

Note:

- Estimated National Weighted Activity Unit may be amended by the Department following the finalisation of the 2016–17 reconciliation by the Administrator of the National Health Funding Pool.
- Activity loadings are included in the Estimated National Weighted Activity Units (i.e. Paediatric, Indigenous, Remoteness, Intensive Care Unit, Private Patient Service Adjustment, and Private Patient Accommodation Adjustment).
- In situations where a change is required to Part D, changes to the agreement will be actioned through an exchange of letters between the Department and the Health Service Chief Executive Officer.

Ambulance Victoria and Dental Health Services Victoria do not receive a Commonwealth funding contribution under the National Health Reform Agreement. Dental Health Services Victoria receives Commonwealth funding through the National Partnership Agreement.

# Accountability and funding requirements

The health service must comply with:

- All laws applicable to it;
- The National Health Reform Agreement;
- All applicable requirements, policies, terms or conditions of funding specified or referred to in the Department of Health and Human Services policy and funding guidelines 2018;
- Policies and procedures and appropriate internal controls to ensure accurate and timely submission of data to the Department of Health and Human Services;
- All applicable policies and guidelines issued by the Department of Health and Human Services from time to time and notified to the health service;
- Where applicable, all terms and conditions specified in an agreement between the health service and the Department of Health and Human Services relating to the provision of health services which is in force at any time during the 2018-19 financial year; and
- Relevant standards for particular programs which have been adopted e.g. International Organisation for Standardisation standards and AS/NZS 4801:2001, Occupational Health and Safety Management Systems or an equivalent standard.

# Signature

The Minister and the health service board chairperson agree that funding will be provided to the health service to enable the health service to meet its service obligations and performance requirements as outlined in this Statement of Priorities.



Hon Jil Hennessy MP  
Minister for Health

Date: 15 / 8 / 2018



Hon Judith Troeth AM  
Chairperson  
Austin Health

Date: 15 / 8 / 2018