

Statement of Priorities

2019–20 Agreement between the Secretary for the Department of Health and Human Services and Rural Northwest Health

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Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

© State of Victoria, Department of Health and Human Services, November 2019.

ISSN 2206-7051

Available at <https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/statement-of-priorities>

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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 main 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 2019–20*.

High standards of governance, transparency and accountability are essential. In this context, the Victorian Government commits to publish Statements of Priorities in November each year and present data on the performance of our health system in the public domain.

Strategic priorities

The Victorian Government is responsible for ensuring that a wide range of health care services are delivered to the Victorian community. The Department of Health and Human Services (the department) delivers policies, programs and services that support and enhance the health and wellbeing of all Victorians. By working together, we strive to build stronger functional, policy and service delivery connections to support the health, wellbeing and safety of all Victorians, no matter what their personal circumstances or stage of life.

Government commitments

This year's \$25.6 billion *Victorian Budget* will help us continue our work in supporting the most vulnerable Victorians and provide more services locally.

- \$2.3 billion of additional funding for meeting hospital services demand
- \$321.9 million for the roll-out of free dental care to all Victorian government school students
- \$299.6 million for more paramedics, vehicles and stations
- \$136.2 million to deliver 500,000 specialist appointments in regional Victoria
- \$117.8 million to recruit and train more nurses, midwives and frontline health workers and make further ratios improvements that will see 1,100 nurses & midwives in Victorian public hospitals.
- \$213.6 million for new parenting centres and more maternal and child health nurses
- \$116.5 million for medical research projects such as new cancer therapies
- A \$100 million boost to the Regional Health Infrastructure Fund to support hospitals and health facilities for rural and regional communities
- \$72 million on hospital and community based palliative care to ensure the end of life care choices of Victorians continue to be met
- \$67.6 million to meet critical mental health service demand
- \$1.5 billion to build a new Footscray Hospital
- \$59.5 million for a new rehabilitation centre at Bendigo Health
- \$31.4 million for an expansion of the Royal Children's Hospital
- \$2.4 million to plan for a new hospital in Melton

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

Rural Northwest Health will provide accessible, efficient and excellent care to our community within the Wimmera Mallee Region.

Service profile

Rural Northwest Health is a public hospital funded by State and Commonwealth Governments and supported by local community members. Rural Northwest Health catchment covers an area of 7,158 square kilometres serving a population of over 7,000 people.

Rural Northwest Health provides responsive quality care and community services by empowering a vibrant and committed group of staff working across three campuses; Warracknabeal, Beulah and Hopetoun.

The key focus of Rural Northwest Health is caring and supporting people to be healthy and living a full life. Our logo represents this by the carer reaching out and embracing its community over the broad horizon.

Rural Northwest Health is committed to achieving the best health for the Wimmera and Mallee community. We strive to deliver services that recognise our client's total needs in order for them to achieve optimal health and wellbeing. We believe that all clients are entitled to quality health care that respects their dignity, beliefs and rights regardless of their cultural, spiritual or socio-economic background.

Rural Northwest Health works in partnership with regional and subregional service providers to support community members to access high quality and safe care as close to home as possible. Key partners include the Wimmera Southern Mallee Alliance, Wimmera Primary Care partnership, West Vic Primary Health Network, Ballarat Health Services, Woodbine, Yarriambiack Shire, Ambulance Victoria, local general practitioners and the Department of Health and Human Services.

Services delivered by Rural Northwest Health include acute and urgent care, residential aged care and district nursing. Allied health programs include physiotherapy, occupational therapy, speech pathology, dietetics and nutrition advice, podiatry, social work, counselling, exercise physiology, health promotion, planned activity groups, health education and a range of health prevention initiatives.

Strategic planning

Rural Northwest Health Service strategic plan for 2016–2020 can be read at

<http://www.rnh.net.au/about-top/publications>.

Strategic priorities - Health 2040

In 2019–20 Rural Northwest Health will contribute to the achievement of the Government’s commitments within *Health 2040: Advancing health, access and care* by:

Better Health

Goals:

A system geared to prevention as much as treatment
 Everyone understands their own health and risks
 Illness is detected and managed early
 Healthy neighbourhoods and communities encourage healthy lifestyles

Strategies:

Reduce Statewide Risks
 Build Healthy Neighbourhoods
 Help people to stay healthy
 Target health gaps

Deliverables:

- Implement a comprehensive ‘lead from within’ staff education program throughout the four Wimmera local government areas to create awareness of the importance of the conditions in which people are born, grow, live, work and age and the impact on overall health.
- Rural Northwest Health, Edenhope and District Memorial Hospital and West Wimmera Health Service will undertake a joint service planning approach and together with data from Wimmera Health Care Group service plan identify shared strategic opportunities to improve the overall health and wellbeing of our communities.

Better Access

Goals:

Care is always being there when people need it
 Better access to care in the home and community
 People are connected to the full range of care and support they need
 Equal access to care

Strategies:

Plan and invest
 Unlock innovation
 Provide easier access
 Ensure fair access

Deliverables:

- Implement a best practice community health intake model that supports better and timely access to services for vulnerable population groups.
- Promote the after-hours service, aimed to reduce pressure on acute and emergency departments in the sub region, by drawing on patient experiences

Better Care

Goals:

Targeting zero avoidable harm
 Healthcare that focusses on outcomes
 Patients and carers are active partners in care
 Care fits together around people’s needs

Strategies:

Put quality First
 Join up care
 Partner with patients
 Strengthen the workforce
 Embed evidence
 Ensure equal care

Deliverables:

- Finalise the Grampians region clinical governance audit and associated action plan and support the implementation of the agreed actions to ensure best practice clinical governance throughout the Grampians region.
- Implement systems and processes to support participation in my emergency doctor urgent care project funded by the Primary Health Network.

Specific priorities for 2019–20

In 2019–20 Rural Northwest Health will contribute to the achievement of the Government's priorities by:

Supporting the Mental Health System

Improve service access to mental health treatment to address the physical and mental health needs of consumers.

Deliverable:

- Review and evaluate the effectiveness of the Rural Outreach Worker Program's support and service navigation advice in the Wimmera Southern Mallee catchment

Addressing Occupational Violence

Foster an organisational wide occupational health and safety risk management approach, including identifying security risks and implementing controls, with a focus on prevention and improved reporting and consultation.

Implement the department's security training principles to address identified security risks.

Deliverable:

- Work collaboratively with the Smart Rural Research Team partners to develop training on the key security training principles and address identified security risks.

Addressing Bullying and Harassment

Actively promote positive workplace behaviours, encourage reporting and action on all reports.

Implement the department's *Framework for promoting a positive workplace culture: preventing bullying, harassment and discrimination* and *Workplace culture and bullying, harassment and discrimination training: guiding principles for Victorian health services*.

Deliverable:

- Complete a gap analysis against the Department of Health and Human Services Framework for promoting a positive workplace culture by October 2019 and implement identified gaps to strengthen our positive workplace culture and implementation of the framework and guiding principles by 30 November 2019.

Supporting Vulnerable Patients

Partner with patients to develop strategies that build capability within the organisation to address the health needs of communities and consumers at risk of poor access to health care.

Deliverable:

- Establish a Warracknabeal reference group to co-design strategies to build capability within Rural Northwest Health to address the needs of our community and consumers at risk of poor health. These include young mothers, low-socioeconomic groups and identified populations currently not accessing our Community Health Services.

Supporting Aboriginal Cultural Safety

Improve the health outcomes of Aboriginal and Torres Strait Islander people by establishing culturally safe practices across all parts of the organisation to recognise and respect Aboriginal culture and deliver services that meet the needs, expectations and rights of Aboriginal patients, their families, and Aboriginal staff.

Deliverable:

- Formalise an arrangement with the Goolum Goolum Aboriginal Cooperative to establish opportunities to work collaboratively together for improving health outcomes and access for Aboriginal people.

Addressing Family Violence

Strengthen responses to family violence in line with the *Multiagency Risk Assessment and Risk Management Framework* (MARAM) and assist the government in understanding workforce capabilities by championing participation in the census of workforces that intersect with family violence.

Deliverables:

- Wimmera Southern Mallee Health Alliance partners shall work collaboratively across the sub region to ensure that tools, training, referral pathways, policies and procedures align with the multiagency risk assessment and risk management framework.
 - Continuing with implementation of systems and processes with stakeholders
 - Continuing to roll out training and education as appropriate
 - Ensuring that the implementation plan is understood and promulgated to all stakeholders.

Implementing Disability Action Plans

Continue to build upon last year's action by ensuring implementation and embedding of a disability action plan which seeks to reduce barriers, promote inclusion and change attitudes and practices to improve the quality of care and employment opportunities for people with disability.

Deliverable:

- Finalise our disability action plan and provide a copy of it to the department by 30 December 2019 and enhance customer and carer awareness of the types of services available to people utilising their National Disability Insurance Scheme funding to increase access to locally available services.

Supporting Environmental Sustainability

Contribute to improving the environmental sustainability of the health system by identifying and implementing projects and/or processes to reduce carbon emissions.

Deliverables:

- In collaboration with Health Purchasing Victoria achieve installation of solar panels at Rural Northwest Health to significantly reduce carbon emissions.
- Implement a sustainable recycling program across all health service facilities to ensure an increase recycling materials and e-waste.

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 2019–20 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

High quality and safe care

Key performance measure	Target
Accreditation	
Compliance with the Aged Care Standards	Full compliance
Infection prevention and control	
Compliance with the Hand Hygiene Australia program	83%
Percentage of healthcare workers immunised for influenza	84%
Patient experience	
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 – patient's perception of cleanliness	70%

Key performance measure	Target
Adverse events	
Sentinel events – root cause analysis (RCA) reporting	All RCA reports submitted within 30 business days

Strong governance, leadership and culture

Key performance measure	Target
Organisational culture	
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%

Key performance measure	Target
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%

Effective financial management

Key performance measure	Target
Operating result (\$m)	0.09
Average number of days to pay trade creditors	60 days
Average number of days to receive patient fee debtors	60 days
Adjusted current asset ratio	0.7 or 3% improvement from health service base target
Forecast number of days available cash (based on end of year forecast)	14 days
Actual number of days available cash, measured on the last day of each month.	14 days
Variance between forecast and actual Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000

Part C: Activity and funding

The performance and financial framework within which state government-funded organisations operate is described in 'Volume 2: Health operations 2019–20 of the *Department of Health and Human Services Policy and funding guidelines 2019*.

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>

Funding type	Activity	Budget (\$'000)
Small Rural		
Small Rural Acute	57	9,521
Small Rural Primary Health & HACC	4,444	897
Small Rural Residential Care	32,544	1,336
Health Workforce		122
Other specified funding		262
Total Funding		12,138

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 2019 to 30 June 2020 with funding continued to be linked to actual activity levels.

The Commonwealth funding contribution outlined the 2019–20 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 2019 – 30 June 2020

	Service category	Estimated National Weighted Activity Units (NWAU18)	Total funding (\$'000)
Activity based funding	Acute admitted services		
	Admitted mental health services		
	Admitted subacute services		
	Emergency services		
	Non-admitted services		
Block Funding	Non-admitted mental health services		
	Teaching, training and research		
	Other non-admitted services		
Other Funding			12,138
Total			12,138

Note:

- 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.

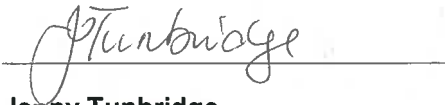
Accountability and funding requirements

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 2019;
- 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 2019-20 financial year; and
- Relevant standards for 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. This includes the National Safety and Quality Health Service Standards ('NSQHS standards') as accredited through the Australian Health Service Safety and Quality Accreditation Scheme.

Signature

The Secretary 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.



Jenny Tunbridge
Assistant Director, Rural and
Regional Health as Delegate for
the Secretary for the Department
of Health and Human Services

Date: 18/10/2019



Mrs Julia Hausler
Chairperson
Rural Northwest Health

Date: 18/10/2019

