

Statement of Priorities

2018–19 Agreement between the Minister for Health and
Monash Health.

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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 a \$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

At Monash Health we are trusted to provide safe, high quality healthcare for people at all stages of life, from pre-birth to end of life. We do this in all types of settings; hospitals, community, and people's homes. Together we work with a range of partner organisations to improve the population's health and, when needed, we deliver treatment and care to people unwell or injured, in recovery, in support of their daily life, in birth, or at the end of their life.

Strategic Intent

We are relentless in our pursuit of excellence

Guiding principles

The Monash Health Strategic Plan 2018-2023 identifies six guiding principles, centred on our values, to underpin the strategic plan and upon which our future work priorities have and will be built.

Service profile

Monash Health provides the community with access to integrated community and hospital based services across the entire lifespan focusing on improving health through:

- Prevention and early intervention
- Care and services from pre-birth to end of life: maternity, paediatrics and adults
- Integrated hospital and community-based treatment and rehabilitation
- Highly specialised surgical and medical diagnosis, treatment and monitoring services
- Hospital and community based mental health services
- Comprehensive aged care programs including Residential Aged Care Services
- Palliative care
- Quaternary services: foetal surgery, thalassemia, and the Jack Jumper Ant Clinic

Monash Health wide system improvements that will be undertaken in 2018-19, include:

- Continued implementation of the Transforming Care program: Comprising of 12 connected streams of work, this is a shared and consistent way of working across the health service, through guiding principles, leadership, teamwork and redesigning systems and processes.
- Implementation of our Electronic Medical Record (EMR), Monash Health's biggest technology based transformation: The EMR will provide clinicians with access to timely information about the people they are caring for, and assist them in making decisions with better evidence. For consumers, this means safer, higher quality care.
- Development of the Monash Health Strategic Service Plan 2018-2032: This will ensure Monash Health is well placed to meet the needs of the local and broader Victorian community into the future.

Clayton Campus

Monash Medical Centre is a teaching and research hospital of international standing located on the Clayton Campus. It provides a range of specialist surgical, medical, allied health and mental health services. It is a designated national provider of kidney and pancreatic transplants and a state-wide provider of Thalassaemia services.

Offering integrated maternity and newborn services on the one site, Monash Medical Centre provides one of Victoria's largest women's health services. McCulloch House, located on-site, provides palliative care for people with advanced progressive disease.

The Clayton campus is also home to Monash Children's Hospital which was opened in April 2017. The hospital provides tertiary level paediatric care to children in Victoria and includes: a helipad; neonatal and paediatric intensive care; specialist surgical, medical and allied health care; a world-class child-friendly MRI; and specialist consulting. Telehealth capabilities facilitate the delivery of care to children across the south east of Victoria.

This site also houses Monash Health Translational Research Precinct, a collaboration between Monash University, the Hudson Institute of Medical Research and Monash Health, which strengthens links between education, research and patient care.

System improvements and capital developments will continue in 2017-18 to progress:

- capital planning for the expansion of the Emergency Department in order to establish a dedicated children's emergency service and to provide a dedicated mental health area and improve traffic flows on the site;
- service and capital planning for the establishment of the Victorian Heart Hospital and cardiac service provision at other Monash Health sites; and,
- service planning across Monash Health to optimise service configuration, capacity and patient flow.

Moorabbin Hospital

Moorabbin Hospital is the home of the Monash Cancer Centre and one of Victoria's leading cancer treatment centres, providing a range of clinical oncology services. The hospital hosts the Southern Melbourne Integrated Cancer Service and offers radiotherapy. It is a centre for research, and a major contributor to cancer-related research in collaboration the Monash Health Translation Precinct. It also offers elective surgery, short-stay care and dialysis. Home to Victoria's first Simulation Centre, the hospital plays a major role in the education and training of undergraduate and postgraduate medical students, nurses and allied health professionals.

Detailed service planning for Moorabbin Hospital will occur in 2018-19 to ensure the right type and mix of services are in place to meet future service challenges.

Dandenong Hospital

Dandenong Hospital is an acute hospital providing a wide range of health services to the people living and working in Dandenong and surrounding areas. Services include general medical and surgical care including orthopaedic services, an intensive care unit, emergency department, pathology, radiology, day oncology, maternity unit, special care nursery, Monash Children's services, mental health services and allied health services. The hospital is also central to our role as a State leader in addressing refugee health needs.

Detailed service planning for Dandenong Hospital will occur in 2018-19 to ensure the right type and mix of services are in place to meet future service challenges within the local catchment area.

Casey Hospital

Casey Hospital services one of the fastest growing areas in Melbourne's outer east. Services include an emergency department, general medical, mental health, rehabilitation, surgical and ambulatory care services, maternity and a special care nursery. Monash Children's paediatrics services are also provided at Casey Hospital.

Construction of the Casey Hospital expansion has commenced in order to significantly increase the volume and scope of services to the local community through the delivery of: an additional 136 multiday beds; a new 12 bed Intensive Care Unit/ High Dependency Unit; a new 12 bed day surgical unit, and four additional operating theatres.

The Casey Hospital expansion is expected to be completed by late 2019. A key focus of 2018-19 will be detailed operational and budget planning for the site.

Cranbourne Centre

The Cranbourne Centre provides a range of same-day acute and sub-acute services including surgery, renal dialysis, specialist consulting services, regional ophthalmology services and mental health services. It also provides the local community with access to community health services and a community rehabilitation centre.

Detailed service planning for Cranbourne Centre will be undertaken in combination with the Dandenong Hospital service plan to maximise the synergies between these two campuses.

Kingston Centre

Kingston Centre specialises in high quality rehabilitation, function restoration, aged care and aged mental health. Residential care beds are also in operation at this campus. The Kingston Centre's highly regarded rehabilitation program focuses on restoring function after illness or injury with the full range of allied health services provided to adults of all ages.

The centre provides specialist services for older people including Aged Care Assessment, cognitive dementia and memory services. It also offers a Falls and Balance Clinic, Pain Clinic, Clinical Gait Analysis, and continence service. It is at the forefront of research into movement and gait disorders, aged mental health and geriatric medicine and has a leading role in providing care for sufferers of Parkinson's disease.

Monash Health Community

Monash Health Community proactively supports our local community to improve and maintain health, independence and wellbeing by coordinating and/or providing integrated, multidisciplinary care in the local community. The aim is to empower and prepare clients to self-manage their health and health care. Monash Health Community delivers services to people of all ages across the continuum of care, supporting clients through all stages of their community care and delivering an integrated pathway from acute and sub-acute care to the community.

Monash Health Community delivers care from multiple locations across the Cities of Kingston, Monash, Greater Dandenong and Casey and Cardinia Shire. Monash Health Community is responsible for the Hospital in the Home program that operates virtual acute beds in client's homes and in Residential Aged Care Facilities.

In 2018-19, the Program will continue to work to respond to implementation of major reforms in the aged care and disability sectors; and service planning will continue to ensure Pakenham Health Centre is well placed to meet growing demand into the future

Mental Health Program

The Mental Health Program delivers a comprehensive range of mental health services to adults and children in both admitted inpatient settings and community-based facilities. Services include alcohol and drug; telephone psychiatric triage; crisis assessment and treatment; consultation

liaison psychiatry; mobile support and treatment; acute inpatient care; extended inpatient care; perinatal and infant care; eating disorders care; gender dysphoria; prevention and recovery care; community residential and rehabilitation services; agile psychological medicine outpatient assessments; and Police, Ambulance and Clinical Early Response (PACER) response.

Service improvements in 2018-19 will include:

- Opening of a new 10 bed Transition Support Unit in Narre Warren.
- Refurbishment of P Block, the acute adult mental health unit at Monash Medical Centre. This will modernise the delivery of care and improve patient safety and experience at the unit.

Detailed service planning will continue to ensure Monash Health's mental health service is well placed to meet growing demand into the future.

Residential care

Monash Health provides aged residential care at a variety of locations: at Allambee Nursing Home and AG Eastwood Hostel at the Kingston Centre (Cheltenham); Chestnut Gardens Aged Care (Doveton); Yarraman Nursing Home (Noble Park) and Mooraleigh Hostel (East Bentleigh).

Strategic planning

Further details regarding Monash Health's Strategic Plan 2018-2023 (yet to be finalised) are available online at www.monashhealth.org/strategicplan.

Strategic priorities

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

Goals	Strategies	Health Service Deliverables
<p>Better Health</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>Better Health</p> <p>Reduce statewide risks</p> <p>Build healthy neighbourhoods</p> <p>Help people to stay healthy</p> <p>Target health gaps</p>	<p>Optimise the provision of acute, subacute and community based mental health services into the future by developing Monash Health's Mental Health Program Service Plan.</p>
		<p>Continue to support and care for victims of family violence by implementing the Family Violence Education Plan into Monash Health's paediatrics, maternity, emergency care, mental health and elder abuse services. This is measured by the number of staff trained to respond and responses to family violence related questions in the People Matter Survey.</p>
		<p>Together with the regional chronic disease coalition, deliver the actions planned for 2018-19 against the four key objectives of the Monash Health Chronic Disease Strategy.</p>
		<p>Plan for integrated health services for our community by developing a Monash Health Community Strategy to increase the provision of services in the community and people's homes.</p>
<p>Better Access</p> <p>Care is always there when people need it</p> <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>Better Access</p> <p>Plan and invest</p> <p>Unlock innovation</p> <p>Provide easier access</p> <p>Ensure fair access</p>	<p>Complete the Monash Health Strategic Service Plan to ensure Monash Health is well placed to deliver on its role in ensuring Victorians have ready access to a full range of safe, high quality services.</p>
		<p>Together with Monash University and the Department of Health and Human Services, progress the planning for the Victorian Heart Hospital according to the project plan.</p>
		<p>Develop a Dandenong Hospital and Cranbourne Centre Service Plan in the context of the Monash Health system of care.</p>
		<p>Provide easier access to the right care for people living in the south eastern growth corridor and Gippsland by finalising the operational commissioning plans for the expansion of Casey Hospital.</p>

Goals	Strategies	Health Service Deliverables
		<p>Improve the access to and experience of emergency care for adult, paediatric and mental health patients by progressing the expansion of the Monash Medical Centre emergency department within project milestones.</p> <p>Improve access to specialist consulting clinics by: relocating children's and high risk adult clinics; implementing a standardised electronic outpatient triage system (e-referral) to all adult specialist clinics; updating specialty referral guidelines to Monash Health; scaling up Monash Health's telehealth consultation in the Gippsland region for at least three additional adult services; and, integrating the state wide referral guidelines for selected specialist clinics.</p>
<p>Better Care</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>Better Care</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>Develop an implementation plan to support Monash Health's recently established Equity and Inclusion Strategy, including progressing the implementation of Monash Health's Aboriginal and Torres Strait Islander (ATSI) employment plan to continue to increase the number and inclusion of ATSI people at Monash Health.</p> <p>Support effective clinical governance by embedding the clinical governance framework across Monash Health and continuing to train our clinical ward governance leaders and teams.</p> <p>Undertake the review, validation, testing and implementation of the first phase of an electronic medical record.</p> <p>Partner with patients to improve their overall experience of the health service, and their experience of: the discharge of their care, by implementing the discharge passport across the health service; and the cleanliness of the health service, by implementing the cleaning action plan.</p> <p>Strengthen the workforce by completing the Monash Health workforce strategy and developing clear actions for 2018-19 to progress the delivery of the strategy.</p>

Goals	Strategies	Health Service Deliverables
<p>Specific 2018-19 priorities (mandatory)</p>	<p>Disability Action Plans Draft disability action plans are completed in 2018-19. <i>Note: Guidance on developing disability action plans can be found at https://providers.dhhs.vic.gov.au/disability-action-plans. Queries can be directed to the Office for Disability by phone on 1300 880 043 or by email at ofd@dhhs.vic.gov.au.</i></p>	<p>Submit a draft disability action plan to the Department of Health and Human Services by 30 June 2019. The draft plan needs to outline the approach to full implementation within three years of publication.</p>
	<p>Volunteer engagement Ensure that the health service executives have appropriate measures to engage and recognise volunteers.</p>	<p>Provide an annual report to the Monash Health Executive Committee to monitor the engagement of volunteers, and develop an award for the recognition of volunteers across Monash Health in alignment Monash Health's recognition program.</p>

Goals	Strategies	Health Service Deliverables
	<p>Bullying and harassment 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. 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>Continue to implement Monash Health's bullying and harassment work plan: provide quarterly reporting of related information, incident types and outcomes of investigations and claims to the Monash Health Executive Committee and Board, and make available to all employees; monitor, action and communicate feedback from the People Matter and Best Practice Clinical Learning Environment Surveys; and, mandate all employees complete the 'Introduction to OHS' online training.</p>
	<p>Occupational violence 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>Based on the Department of Health and Human Services' OVA training principles, provide all employees with access to online occupational violence and aggression (OVA) training and those with patient and visitor contact with practical OVA training, as measured by training participation rates.</p>

Goals	Strategies	Health Service Deliverables
	<p>Environmental Sustainability</p> <p>Actively contribute to the development of the Victorian Government's:</p> <ul style="list-style-type: none"> • policy to be net zero carbon by 2050 and improve environmental • sustainability by identifying and implementing projects, including • workforce education, to reduce material environmental impacts with • particular consideration of procurement and waste management, and • publicly reporting environmental performance data, including • measureable targets related to reduction of clinical, sharps and landfill • waste, water and energy use and improved recycling. 	<p>Improve environmental sustainability by: identifying opportunities and an action plan to reduce our environmental impact through the completion of level two energy audits at Monash Medical Centre and Dandenong Hospital; and, provide an environmental project officer role to deliver a five year environmental sustainability strategy.</p>
	<p>LGBTI</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 the DHHS Rainbow eQuality Guide (see at www2.health.vic.gov.au/about/populations/lgbti-health/rainbow-equality) and the Rainbow Tick Accreditation Guide (see at www.glhv.org.au)</i></p>	<p>Develop for Board endorsement and deliver actions to support Monash Health's Equity and Inclusion Strategy, of which LGBTI is a key focus area. The strategy is and the work plan for development will be informed by the Department of Health and Human Services Rainbow eQuality Guide.</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

High quality and safe care

Key performance indicator	Target
Accreditation	
Accreditation against the National Safety and Quality Health Service Standards	Accredited
Compliance with the Commonwealth's Aged Care Accreditation Standards	Accredited
Infection prevention and control	
Compliance with the Hand Hygiene Australia program	80%
Percentage of healthcare workers immunised for influenza	80%
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 – patients perception of cleanliness	70%
Healthcare associated infections (HAI's)	
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 ¹ per occupied bed day	≤ 1/10,000

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

¹ 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
Rate of seclusion events relating to an aged 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%
Percentage of aged acute mental health inpatients who have a post-discharge follow-up within seven days	80%
Maternity and Newborn	
Rate of singleton term infants without birth anomalies with APGAR score <7 to 5 minutes	≤ 1.4%
Rate of severe foetal growth restriction (FGR) in singleton pregnancy undelivered by 40 weeks	≤ 28.6%
Proportion of urgent maternity patients referred for obstetric care to a level 4, 5 or 6 maternity service who were booked for a specialist clinic appointment within 30 days of accepted referral	100%
Continuing Care	
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
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%
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%

Key performance indicator	Target
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
Emergency care	
Percentage of patients transferred from ambulance to emergency department within 40 minutes	90%
Percentage of Triage Category 1 emergency patients seen immediately	100%
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
Elective surgery	
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 ²	5050
Number of hospital initiated postponements per 100 scheduled elective surgery admissions	≤ 7 /100
Number of patients admitted from the elective surgery waiting list	32,200
Specialist clinics	
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%

Effective financial management

Key performance indicator	Target
Finance	
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 ² 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

² 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>

2018-19 PART C: ACTIVITY AND FUNDING

Funding type	Activity	Budget (\$'000)
Acute Admitted		
WIES Public	159,599	771,340
WIES Private	17,044	60,677
WIES DVA	495	2,516
WIES TAC	702	2,997
Other Admitted		98,548
Acute Non-Admitted		
Emergency Services		66,128
Genetic services		5,439
Home Enteral Nutrition	4,238	901
Home Renal Dialysis	166	9,379
Radiotherapy Non Admitted Shared Care	138	233
Specialist Clinics	289,269	76,050
Specialist Clinics - DVA		10
Other non-admitted		3,933
Total Perinatal Nutrition	156	1,219
Subacute & Non-Acute Admitted		
Subacute WIES - Rehabilitation Public	2,579	27,278
Subacute WIES - Rehabilitation Private	562	5,526
Subacute WIES - GEM Public	1,631	17,250
Subacute WIES - GEM Private	370	3,640
Subacute WIES - Palliative Care Public	373	3,948
Subacute WIES - Palliative Care Private	47	458
Subacute WIES - DVA	50	636
Transition Care - Bed days	17,491	2,708
Transition Care - Home days	10,983	624

Subacute & Non-Acute Other		
Other specified funding		342
Subacute Non-Admitted		
Health Independence Program - Public	167,823	37,087
Health Independence Program - DVA		3
Subacute Non-Admitted Other		946
Aged Care		
Aged Care Assessment Service		3,262
Residential Aged Care	57,856	3,185
HACC	52,343	4,988
Aged Care Other		344
Mental Health and Drug Services		
Mental Health Ambulatory	188,415	84,034
Mental Health Inpatient - Available bed days	66,474	54,357
Mental Health Inpatient - Secure Unit	18,240	10,431
Mental Health Residential	45,291	3,511
Mental Health Service System Capacity	953	1,687
Mental Health Subacute	36,527	17,392
Mental Health Other		2,677
Drug Services	707	5,174
Primary Health		
Community Health / Primary Care Programs	85,013	9,025
Community Health Other	3,140	4,033
Other		
NFC - Pancreas Transplants	20	3,600
Health Workforce	496	25,472
Other specified funding		34,816
Total Funding		1,467,804

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

	Service category	Estimated National Weighted Activity Units (NWAU18)	Total funding (\$'000)
Activity based funding	Acute admitted services	182,863	1,276,126
	Admitted mental health services	24,570	
	Admitted subacute services	16,509	
	Emergency services	35,330	
	Non-admitted services	21,601	
Block Funding	Non-admitted mental health services	-	138,736
	Teaching, training and research		
	Other non-admitted services		
Other Funding		-	58,552
Total		280,873	1,473,414

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 Jill Hennessy MP
Minister for Health

Date: 28/8/2018



Mr Dipak Sanghvi
Chairperson
Monash Health

Date: 28/8/2018