

Statement of Priorities

2019–20 Agreement between the Secretary for the Department of Health and Human Services and Wimmera Health Care Group

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.

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

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

ISSN 2206-7221

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

Contents

- Contents**..... iii
- Background**..... 4
- Strategic priorities** 5
 - Government commitments 5
- Part A: Strategic overview**..... 6
 - Mission statement 6
 - Service profile..... 6
 - Strategic planning 6
 - Strategic priorities - Health 2040 7
 - Specific priorities for 2019–20 8
- Part B: Performance Priorities** 10
 - High quality and safe care..... 10
 - Strong governance, leadership and culture 11
 - Timely access to care 11
 - Effective financial management..... 12
- Part C: Activity and funding** 13
- Part D: Commonwealth funding contribution**..... 15
- Accountability and funding requirements** 16
- Signature**..... 17

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

Wimmera Health Care Group focuses on the people (patients, residents, families, carers and the Wimmera Community), aiming to improve their health and wellbeing alongside our partners, communities and teams. The team's actions and decisions are underpinned by the Wimmera Health Care Group values of kindness, respect, integrity, courage and learning.

Service profile

Wimmera Health Care Group is based in the western end of the Grampians region approximately 300km from Melbourne and is the major specialist referral centre for the Wimmera and Southern Mallee which covers an area of 61,000 square km and a population of 54,000. With a workforce of over 1,000 staff we provide a range of acute, sub-acute, residential aged care, allied health and primary care services to our communities in Horsham and Dimboola.

We are part of the Wimmera Southern Mallee Health Alliance (WSMHA) with other members being Edenhope and District Memorial Hospital, Rural Northwest Health and West Wimmera Health Service.

In 2019–2020 the Wimmera Southern Mallee Health Alliance will continue to focus on enhancing its partnership activities across workforce and leadership development, preventing family violence and supporting each other across a wide range of services to allow community members to have high quality and safe care as close to home as possible.

Wimmera Health Care Group will continue to strengthen its relationship with Ballarat Health Services and the Grampians region and contribute to the development of a regionalised clinical workforce and clinical governance framework.

Major capital works to be undertaken will be the construction of an outdoor entertaining area at Kurrajong Lodge, the continued refurbishment of areas at Wimmera Nursing Home and Dimboola Campus and a feasibility review for the Horsham Campus Master plan.

Strategic planning

Wimmera Health Care Group has completed its Strategic Plan 2019–2024. The strategic planning process included consultation with community members, volunteers and staff. It is with the Department of Health and Human Services for endorsement and will be available at www.whcg.org.au

Strategic priorities - Health 2040

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

Better Health

<p>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</p>	<p>Strategies: Reduce Statewide Risks Build Healthy Neighbourhoods Help people to stay healthy Target health gaps</p>
---	--

Deliverables:

- Wimmera Health Care Group will work with the Community Engagement Committee to develop four approaches to support community member’s knowledge about issues that are important to them. These approaches may include information sessions and forums, links to evidenced based websites and changes to how services are delivered. The outcome will be enhanced access to evidenced based information for community members.
- Wimmera Health Care Group will work with the Grampians region and contribute to the establishment and running of mortality and morbidity reviews. A perioperative mortality and morbidity clinic will commence in September and be held 4 times in the year. An urgent care mortality and morbidity review will be held in early 2020 and an end of life mortality and morbidity review will be held before the end of June 2020.

Better Access

<p>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</p>	<p>Strategies: Plan and invest Unlock innovation Provide easier access Ensure fair access</p>
---	--

Deliverables:

- Wimmera Health Care Group, through its community engagement committee, will work with people attending the Horsham campus to ensure that they can find their way around the campus easily and access the multiple services that are widely dispersed on campus.
- Develop and implement a volunteer-led welcome and direction service.
- Work with the Department of Health and Human Services to finalise the master plan and implement the asset management framework.

Better Care

<p>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</p>	<p>Strategies: Put quality First Join up care Partner with patients Strengthen the workforce Embed evidence Ensure equal care</p>
--	--

Deliverables:

- In 2019, implement an evidence based approach to effectively communicate with the people we care for, resulting in improved health and wellbeing. This will be undertaken in partnership with Deakin University and Safer Care Victoria.
- Develop an assessment and care planning procedure to support team members to partner with people in developing plans of care resulting in personalised and holistic care that reflects their wishes and needs.

Specific priorities for 2019–20

In 2019–20 Wimmera Health Care Group 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:

- Implement a program to support team members to have timely and appropriate access to skilled mental health first aiders. Accredited mental health first aid training will be provided to the 16 Wimmera Health Care Group contact officers and all managers will attend a mental health first aid refresher session.

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 with the Design factory Melbourne to design and implement a program to improve occupational safety, in particular for nurses and other team members directly involved in patient care in the Oxley Unit.
- A development and implementation team will attend workshops and develop skills in design thinking and occupational violence minimisation strategies from October 2019 to February 2020 with agreed strategies to be implemented in February and evaluated in May 2020. An action plan for the implementation of the agreed strategies across the whole of the organisation will be finalised by June 2020, which will be linked to the DHHS security principles.

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:

- The We Matter Board of Management Committee will work with the operational team to implement the Framework for promoting positive workplace culture and the principles by November.

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:

- The Board of Management will have the advocacy group Compassionate Friends attend a board meeting to provide suggestions as to how Wimmera Health Care Group could improve services offered to families dealing with grief, loss and mental health issues.

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:

- Work with Goolum Goolum to implement a local training program to frontline team members who regularly support Aboriginal and Torres Strait Islander people to access the health system.

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.

Deliverable:

- Work collaboratively across the sub-region to ensure that tools, training, referral pathways, policies and procedures align to the strengthening hospitals response to family violence and the multiagency risk assessment and risk management framework. This includes:
 - continuing the implementation of systems and processes with stakeholders
 - continuing to roll out training and education as appropriate; and
 - 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:

- Focus on implementation of three agreed actions from the Disability Action Plan focusing on an equitable and inclusive approach to care will be implemented including:
 - Hearing directly from a disability advocacy group;
 - Reviewing the variety and formats of brochures provided by our service; and
 - Undertaking an annual physical accessibility review.

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.

Deliverable:

- Develop an action plan to:
 - expand the polymerizing vinyl chloride recycling in hospitals program to acute wards;
 - reduce clinical waste by introducing an environmentally friendly method to dispose of empty pharmaceutical glass bottles and vials; and
 - introduce a more environmentally friendly and cost effective alternative to plastic medicine cups.

The action plan will result in reduced polymerizing vinyl chloride, clinical and glass waste throughout our acute services.

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%
Healthcare associated infections (HAI's)	
Rate of patients with surgical site infection	No outliers
Rate of patients with ICU central-line-associated bloodstream infection (CLABSI)	Nil

Key performance measure	Target
Adverse events	
Sentinel events – root cause analysis (RCA) reporting	All RCA reports submitted within 30 business days
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 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%
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 measure	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
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 measure	Target
Operating result (\$m)	-1.65
Average number of days to pay trade creditors	60 days
Average number of days to receive patient fee debtors	60 days
Public and Private WIES ¹ activity performance to target	100%
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

¹ 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 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)
Acute Admitted		
Acute WIES	7,530	37,344
WIES DVA	129	667
WIES TAC	41	237
Other Admitted		10,187
Acute Non-Admitted		
Emergency Services		6,575
Home Enteral Nutrition	82	18
Specialist Clinics	18,737	5,319
Specialist Clinics - DVA		13
Subacute & Non-Acute Admitted		
Subacute WIES - Rehabilitation Public	99	1,068
Subacute WIES - Rehabilitation Private	44	437
Subacute WIES - GEM Public	113	1,209
Subacute WIES - GEM Private	41	405
Subacute WIES - Palliative Care Public	12	131
Subacute WIES - Palliative Care Private	7	67
Subacute WIES - DVA	24	312
Subacute Non-Admitted		
Palliative Care Non-admitted		655
Health Independence Program - Public	13,761	2,484
Health Independence Program - DVA		39
Aged Care		
Residential Aged Care	40,499	2,251
HACC	8,501	822
Mental Health and Drug Services		
Drug Services		139
Primary Health		
Community Health / Primary Care Programs	7,857	849
Community Health Other		426

Other		
Health Workforce		1,321
Other specified funding		1,047
Total Funding		74,021

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	8,042	59,614
	Admitted mental health services	0	
	Admitted subacute services	907	
	Emergency services	1,938	
	Non-admitted services	1,209	
Block Funding	Non-admitted mental health services	-	2,020
	Teaching, training and research		
	Other non-admitted services		
Other Funding		-	12,387
Total		12,096	74,021

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



Ms Marie Aitken
Chairperson
Wimmera Health Care Group

Date: 18/10/2019

