

# Statement of Priorities

2019-20 Agreement between the Minister for Health and St Vincent's Hospital (Melbourne) Limited.

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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

Our Vision: We lead through research-driven, excellent and compassionate health and aged care.

Our Values: **Compassion, Justice, Integrity and Excellence.** Based on the Gospel, these values underpin all we do, acting as a point of reference for decision making and giving our mission life.

As a Catholic health and aged care service, St Vincent's Hospital Melbourne (SVHM) is committed to providing compassionate and innovative care, enabling hope for those we serve. We are especially committed to people who are poor or vulnerable.

### Service profile

As one of only five Australian hospitals named in Newsweek's Top 100 Hospitals 2019, SVHM is at the forefront of adapting to new challenges, while providing the best patient care.

SVHM's commitment to excellence is reflected in our thriving research program, soon to be augmented by a new state-of-the-art biomedical research hub, the Aikenhead Centre for Medical Discovery. We foster future talent, with our highly regarded nursing and medical education programs attracting the very best in their fields, who are encouraged to build diverse skills and expertise.

SVHM's core commitments that will define our service between now and 2025 are:

- **Care Beyond the Hospital Walls** – we will increase activity in the community where opportunity arises to better meet the needs of our patients and their families, closer to home.
- **The Improvement Movement** – we will drive better value, safer health care, leading the state in continuous improvement.
- **A broader reach** – we will leverage strategic partnerships for growth, working with St Vincent's Private and our network of referring health services to respond to a growing and increasingly complex patient population.
- **A reputation for excellence** – we will become a destination for world class treatment, research and training through the newly formed Centres for Digestive Diseases and Musculoskeletal Care.
- **Leadership and influence** – we will lead through advocacy, influencing policy and practice and creating new models of care in Palliative Care and Addiction Medicine.
- **Responsive, integrated care** – we will transform tertiary hospital care by designing reliable, integrated patient-driven systems of care.
- **Biomedical advancement** – we will lead the biomedical engineering revolution, developing future treatments through advances in bioengineering, limb and tissue reconstruction and implants.
- **Supporting the vulnerable** – we will continue to address the complex needs of our priority populations including people who are mentally ill, drug and alcohol addicted, homeless, Aboriginal and Torres Strait Islander and prisoners.

#### Our major services include:

**Acute** – SVHMs expertise spans a wide range of medical, surgical, cancer, allied and mental health services, we are a major tertiary referral centre, providing care at the edge – pushing the boundaries of science and medicine, while supporting the vulnerable and marginalised. SVHM has a proud history in correctional health, providing secure primary, secondary and tertiary health services for Victorian prisoners.

**Sub-Acute** – a comprehensive suite of subacute and community services including inpatient rehabilitation, geriatric evaluation and management, transition care, residential aged care, acute aged psychiatry and a broad range of community based rehabilitation, assessment and treatment services.

**Palliative Care** – a leading palliative care service including inpatient care, day hospice and community day care centre. Caritas Christie Hospice (Kew) is currently under redevelopment with services temporarily relocated to Fitzroy.

The 20-year Health Service Agreement with the Department of Health and Human Services enables SVHM to continue providing world-class acute, sub-acute, cancer, aged, mental health, palliative care and community care services.

## Strategic planning

St Vincent's Health Australia's strategic plan for 2015-2025 can be read at <https://svha.org.au/home/about-us/our-strategy-2025>. The St Vincent's Hospital Melbourne (SVHM) Strategic Service Plan can be found at <https://svhm.org.au/home/about-us/our-strategic-service-plan>.

## Strategic priorities – Health 2040;

In 2019-20, St Vincent’s Hospital Melbourne 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:**

- Actively participate in the strategic development of the NorthEast Cardiac Network focusing on developing the Level 6 cardiac partnership with Austin Health to improve access and safety of care.
- Expand telehealth as part of the SVHM Care Beyond Hospital Walls strategy to improve access for rural and regional patients.
- Further develop and formalise a strategic and operational partnership with Goulburn Valley Health to contribute to improve health and wellbeing for our regional 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:**

- Complete the design and commence construction of the Mental Health and AOD hub to provide holistic care within the ED setting.
- Work with the Department of Health and Human Services to plan a new facility for Addiction Medicine to improve the patient experience for this vulnerable population.
- Continue the development of Berengarra, the 90-bed aged care development at SGHS.
- Progress the Caritas Christi redevelopment including commencement of construction in partnership with SVHA Care Services.
- Deliver a Care Beyond the Hospital Walls Framework to support SVHM to transform the way care is provided and deliver more care closer to home for our patients.
- Partner with Safer Care Victoria to accelerate the implementation of continuous improvement and daily management system throughout the sector.
- Complete the capital and operational planning for an additional operating theatre to support improved access to surgical care.



## Better Care

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**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

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**Deliverables:**

- Establish the "Improvement Movement" strategy and commence implementation to improve staff safety, increase patient access and quality outcomes.
- Continue to support SVHM clinicians in our response to Voluntary Assisted Dying Legislation, ensuring patients receive the best care.
- Respond to activities associated with the Aged Care Royal Commission.
- Respond to activities associated with the Mental Health Royal Commission.
- Undertake a critical analysis of opportunities to actively include consumers in our strategic planning, improvement and clinical processes.

## Specific priorities for 2019-20

In 2019-20 St Vincent's Hospital Melbourne 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.

- Continue implementation of the SVHM Mental Health Service Plan 2018-2028, focusing on prioritisation of activities and resourcing.

### **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.
- Complete the continuous improvement project regarding serious injuries arising from occupational violence to ensure better staff safety.
- Review the SVHM security training program using the department's pilot program to ensure our staff appropriately trained.

### **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*.

- Complete a gap analysis and implement actions to address gaps based on the department's framework to promote a positive workplace culture.

### **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.

- Deliver partnership initiatives that connect housing security to improved health outcomes for patients experiencing, or at risk of, homelessness.
- Implement the five objectives of the SVHM Gender and Sexual Responsiveness Guidelines: organisational capability, workforce development, consumer participation, a welcoming and accessible organisation, disclosure and documentation and culturally safe and accessible 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.

- Extend SVHM's Reconciliation Action Plan through the delivery of inclusive health funded projects in partnership with the Victorian Aboriginal Health Service and Victorian Aboriginal Community Controlled Health Organisation (Mission).
- Monitor and report completion rate of mandatory online Aboriginal Cultural Safety Training program against organisational target.
- As part of the 'Improving Care for Aboriginal Patients Program', ensure that the SVHM Aboriginal and

Torres Strait Islander Liaison Officer sees all Aboriginal and / or Torres Strait Islander patients within 24-48 hours of admission.

### ***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.

- Lead the implementation of policies and training packages for Strengthening Hospitals Response to Family Violence.

### ***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.

- Implement the identified priorities for 2019/20 from the SVHM Accessibility and Inclusion Plan for People with Disabilities including:
  - Provision of training for selected staff on how to develop accessible written information for people with disabilities.
  - Ensuring all strategic and service planning activities explicitly consider optimal responses for enhancing accessibility and inclusion for people with disabilities.

### ***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.

- Develop and consult on an Environmental Sustainability Plan, targeting the following initiatives:
  - Replacement of refrigerant gasses that impact environment.
  - Modify heating, ventilation & air conditioning plant for increased efficiency and reduction of power consumption including for example installation of variable frequency drives.

## 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](http://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability)

### High quality and safe care

Key performance measure	Target
<b>Accreditation</b>	
Compliance with the Aged Care Standards	Full compliance
<b>Infection prevention and control</b>	
Compliance with the Hand Hygiene Australia program	83%
Percentage of healthcare workers immunised for influenza	84%
<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 – patient's perception of cleanliness	70%
<b>Healthcare associated infections (HAI's)</b>	
Rate of patients with surgical site infection	No outliers
Rate of patients with ICU central-line-associated bloodstream infection (CLABSI)	Nil
Rate of patients with SAB <sup>1</sup> per 10,000 occupied bed days	≤ 1

Key performance measure	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%
Rate of seclusion events relating to an adult acute mental health admission	≤ 15/1,000

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

Key performance measure	Target
Rate of seclusion events relating to an aged acute mental health admission	≤ 15/1,000
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%
<b>Continuing Care</b>	
Functional independence gain from an episode of rehabilitation admission to discharge relative to length of stay	≥ 0.645

## Timely access to care

Key performance measure	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%
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>	1,800
Number of hospital initiated postponements per 100 scheduled elective surgery admissions	≤ 7 /100
Number of patients admitted from the elective surgery waiting list	7,187
<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 2020

## Effective financial management

Key performance measure	Target
Operating result (\$m)	\$0.00
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 <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 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

<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 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>

<b>Funding type</b>	<b>Activity</b>	<b>Budget (\$'000)</b>
<b>Acute Admitted</b>		
Acute WIES	56,331	273,613
WIES DVA	203	1,050
WIES TAC	184	1,072
Other Admitted		34,010
<b>Acute Non-Admitted</b>		
Emergency Services		27,828
Genetic services		1,803
Home Enteral Nutrition	1,667	360
Home Renal Dialysis	83	4,780
Specialist Clinics	119,314	33,421
Specialist Clinics - DVA		32
Other non-admitted		2,752
Total Perinatal Nutrition	76	603
<b>Subacute &amp; Non-Acute Admitted</b>		
Subacute WIES - Rehabilitation Public	1,076	11,549
Subacute WIES - Rehabilitation Private	256	2,552
Subacute WIES - GEM Public	855	9,185
Subacute WIES - GEM Private	334	3,339
Subacute WIES - Palliative Care Public	359	3,852
Subacute WIES - Palliative Care Private	268	2,681
Subacute WIES - DVA	48	629
Transition Care - Bed days	10,932	1,718
Transition Care - Home days	11,349	654
<b>Subacute &amp; Non-Acute Other</b>		
Other specified funding		775
<b>Subacute Non-Admitted</b>		
Palliative Care Non-admitted		177
Health Independence Program - Public	66,263	16,741
Health Independence Program - DVA		29
Victorian Artificial Limb Program		707
Subacute Non-Admitted Other		2,272
Other specified funding		250

<b>Aged Care</b>		
Aged Care Assessment Service		2,368
Residential Aged Care	10,848	883
HACC	4,307	406
<b>Mental Health and Drug Services</b>		
Mental Health Ambulatory	70,952	34,148
Mental Health Inpatient - Available bed days	23,375	21,022
Mental Health Residential	21,915	2,720
Mental Health Service System Capacity	1	2,177
Mental Health Subacute	10,961	5,728
Mental Health Other		1,689
Drug Services	2,769	3,092
<b>Primary Health</b>		
Community Health Other		485
<b>Other</b>		
NFC - Islet Cell Transplantation	6	1,204
Health Workforce		12,175
Other specified funding		26,380
<b>Total Funding</b>		<b>552,912</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 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

	<b>Service category</b>	<b>Estimated National Weighted Activity Units (NWAU18)</b>	<b>Total funding (\$'000)</b>
Activity based funding	Acute admitted services	61,695	444,049
	Admitted mental health services	4,452	
	Admitted subacute services	8,093	
	Emergency services	7,172	
	Non-admitted services	8,548	
Block Funding	Non-admitted mental health services	-	64,975
	Teaching, training and research		
	Other non-admitted services		
Other Funding		-	42,513
<b>Total</b>		<b>89,960</b>	<b>551,537</b>

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.

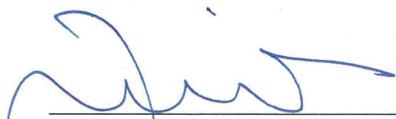
## Accountability and funding requirements

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 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.



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**Jenny Mikakos MP**  
**Minister for Health**

Date: 25 / 10 / 2019



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**Prof Suzanne Crowe AM**  
**Chairperson**  
**St Vincent's Health Australia Board**  
**Clinical Governance and Safety**  
**Committee**

Date: 25 / 10 / 2019

