Statement of Priorities 2023-24 for Calvary Health Care Bethlehem

OFFICIAL



The department proudly acknowledges Victoria's Aboriginal communities and their rich culture and pays respect to their Elders past and present.

We acknowledge Aboriginal people as Australia's first peoples and as the Traditional Owners and custodians of the land and water on which we rely.

We recognise and value the ongoing contribution of Aboriginal people and communities to Victorian life and how this enriches us.

We embrace the spirit of reconciliation, working towards the equality of outcomes and ensuring an equal voice.

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Accountability.on <a href="ma

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Available at The Department of Health Statements of Priorities

https://www.health.vic.gov.au/funding-performance-accountability/statements-of-priorities>

Contents

Background	4
Strategic Priorities	5
Government Commitments	5
Part A: Department of Health Strategic Plan	6
Part B: Performance Priorities	10
Part C: Activity and Funding	11
Part D: Commonwealth Funding Contribution	12
Accountability and funding requirements	13
Signing Page	Error! Bookmark not defined.

Background

Statement of Priorities are the key accountability agreements between the Victorian State 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*.

Statement of Priorities are consistent with the health services' strategic plans and aligned to government policy directions and priorities. For 2023-24, the Statement of Priorities also refer to the *Department of Health Strategic Plan 2023-27* (Strategic Plan). 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.

Statement of Priorities consists of four main parts:

- Part A provides the strategic priorities for the health service to contribute to 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 (the department) to monitor and manage performance are described in the *Victorian Health Service Performance Monitoring Framework 2023-24* (The Framework).

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

Strategic Priorities

The department on behalf of government delivers policies, programs and services that support and enhance the health and wellbeing of all Victorians. The department's vision is to create a future where Victorians are the healthiest people in the world. A Victoria where children and people thrive, where workplaces are productive and safe, and where communities are more connected.

The department's job is to support Victorians to stay healthy and safe; and to deliver a worldclass healthcare system that ensures every single Victorian can access safe, quality care that leads to better health outcomes for all.

To fulfil these obligations, the department has developed the *Department of Health Strategic Plan 2023-27* (Strategic Plan) with seven guiding strategic priorities, to shape the health system's direction. Health services will contribute to the department's strategic priorities through signing and enacting the Statement of Priorities. The seven strategic priorities are:

- Keeping people healthy and well in the community
- · Providing care closer to home
- Keep innovating and improving care
- · Improving Aboriginal health and wellbeing
- Moving from competition to collaboration
- · A stronger and more sustainable workforce
- A safe and sustainable health, wellbeing and care system

Government Commitments

The Victorian Budget 2023–24 (the budget) continues to invest in building hospitals, supporting our health system to meet growing demand and supporting our hardworking healthcare workers to ensure Victorians get the care they need, close to home. This budget provides investment in essential services including:

- \$1.5 billion to boost deferred elective surgery and ease the pressure on our hospitals.
- \$776 million for critical bed-based services, alcohol and other drug services, infrastructure, earlier support in community mental health services and the roll-out of the new Mental Health and Wellbeing Act.
- \$320 million to plan the delivery of major investments at seven hospitals across the state to ensure Victorians receive the highest quality healthcare.
- A \$270 million investment in our health workforce to make it free to study nursing and midwifery for nurses that join the public health system.
- A \$201 million system wide boost to support timely emergency care, including more ambulance services and improvements to emergency department programs, to get patients the care they need as quickly as possible.
- \$162 million for better aged care services across regional Victoria, to build new public aged care services in Cohuna, Maffra and Numurkah.
- \$157 million for critical bed-based mental health services across our state including more
 Hospital in the Home beds for Barwon Health, improving in-home mental health care for
 acutely unwell residents across the Geelong region.
- \$154 million to give women's health the focus and funding it deserves, including 20 new comprehensive women's health clinics at public hospitals.

Part A: Department of Health Strategic Plan

The Statement of Priorities are aligned with the <u>Strategic Plan 2023-27</u> https://www.health.vic.gov.au/our-strategic-plan-2023-27.

Calvary Health Care Bethlehem will contribute to the Strategic Plan 2023-27 by agreeing to the following priorities:

Ministerial Priorities

- 1. Improved health system culture, grounded in respect and safety.
- 2. A supported, growing, and fit-for-purpose health workforce.
- A reformed overall health system (community-based and acute health services), with reforms to service models and enablers (structural, financial and cultural), delivering improved patient safety, experiences and outcomes, particularly for people in regional and rural Victoria.
- 4. A step-change in women's health.
- 5. Nation-leading reductions in rates of vaping.
- 6. Improved health equity through:
 - determination and ceding power.
 - Family-centred health models for priority populations.
 - Intersectional improvements in health access and outcomes for priority cohorts.
- 7. Improved mental health system through:
 - New and transformed integrated services through the implementation of the Royal Commission into Victoria's Mental Health System.
 - Strengthening system guidance, stewardship and commissioning.
 - Realising the vision of the new Mental Health and Wellbeing Act 2022 by driving cultural change.
 - Supporting a culture that embraces lived experience leadership at every level of the mental health and wellbeing system.
 - Investing in suicide prevention and mental health and wellbeing promotion.

System Priorities

Excellence in clinical governance

We aim for the best patient experience and care outcomes by assuring safe practice, leadership of safety, an engaged and capable workforce, and continuing to improve and innovate care.

Goals

- MA2 Strengthen clinical governance systems that support safe care, including clear recognition, escalation, and addressing clinical risk and preventable harm.
- MA10 Implementation of the nutrition and quality food standards for health services.
- MA11 Develop strong and effective systems to support early and accurate recognition and management of deterioration of paediatric patients.

Health service deliverables:

 MA2 Implement Speak Up for Safety program across all service streams, achieve 80% compliance rate for SUFS training attendance.

- MA10 Consultation with dietitians to formulate strategies to ensure all food provided to
 patients and residents is of optimal nutritional quality, appealing, offers variety and is
 culturally diverse, to sustain their nutritional intake, quality of life and wellbeing.
- MA11 Partner with Safer Care Victoria (SCV) and relevant multidisciplinary groups to
 establish protocols and auditing processes to manage effective monitoring and escalation of
 deterioration in paediatric patients via ViCTOR charts.
- MA11 Improve paediatric patient outcomes through implementation of the "ViCTOR track and trigger" observation chart and escalation system, whenever children have observations taken.
- MA11 Implement staff training on the "ViCTOR track and trigger" tool to enhance identification and prompt response to deteriorating paediatric patient conditions.

Working to achieve long term financial sustainability

Ensure equitable and transparent use of available resources to achieve optimum outcomes.

Goals

 MB1 Co-operate with and support Department-led reforms that look towards reducing waste and improving efficiency to address financial sustainability, operational and safety performance, and system management.

Health service deliverables:

 MB1 Implementation of cost-saving initiatives: Identify and implement cost-saving measures such as reducing unnecessary procedures, optimising supply chain management, and streamlining administrative processes.

Improving equitable access to healthcare and wellbeing

Ensure that Aboriginal people have access to a health, wellbeing and care system that is holistic, culturally safe, accessible, and empowering.

Ensure that communities in rural and regional areas have equitable health outcomes irrespective of locality.

Goals

 MC3 Enhance the provision of appropriate and culturally safe services, programs and clinical trials for and as determined by Aboriginal people, embedding the principles of selfdetermination.

Health service deliverables:

 MC3 Promote a culturally safe welcoming environment with Aboriginal cultural symbols and spaces demonstrating, recognising, celebrating and respecting Aboriginal communities and culture.

A stronger workforce

There is increased supply of critical roles, which supports safe, high-quality care. Victoria is a world leader in employee experience, with a focus on future roles, capabilities and professional development. The workforce is regenerative and sustainable, bringing a diversity of skills and experience that reflect the people and communities it serves. As a result of a stronger workforce, Victorians receive the right care at the right time closer to home.

Goals

 MD1 Improve employee experience across four initial focus areas to assure safe, highquality care: leadership, health and safety, flexibility, and career development and agility.

Health service deliverables:

 MD1 Deliver programs to improve employee experience across four initial focus areas: leadership, safety and wellbeing, flexibility, and career development and agility.

Moving from competition to collaboration

Share knowledge, information and resources with partner health and wellbeing services and care providers. This will allow patients to experience one health, wellbeing and care system through connected digital health information, evidence and data flows, enabled by advanced interoperable platforms.

Goals

 ME2 Engage in integrated planning and service design approaches, whilst assuring consistent and strong clinical governance, with partners to join up the system to deliver seamless and sustainable care pathways and build sector collaboration.

Health service deliverables:

 ME2 Reviewing specialist workforce requirements to develop a shared workforce model, including coordinating efforts to attract workforce.

Empowering people to keep healthy and safe in the community

Support individual health and mental wellbeing by giving people the tools and information they need to stay healthy and well. Work with the local government to respond to health threats and empower the community to proactively respond to health risks.

Goals

 EA4 Enhance health literacy and promote high-quality health information so that the local community, including those in priority cohorts, can apply this knowledge to their own circumstances.

Health service deliverables:

 EA4 Collaborate with local community groups to implement activities promoting positive ageing and increasing death literacy.

Local Priorities

- Local Goal: Establish a workforce plan to meet existing and future service demands and challenges, supported by a skilled and engaged workforce. Implementation a continuous planning process to shape and structure the CHCB workforce, ensuring sufficient and sustainable capability, skills and capacity to deliver services no and into the future.
- Local Deliverable 1: Establish a Workforce Development Working Party.
- Local Deliverable 2: Develop and implement a workforce plan.

Part B: Performance Priorities

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

Further information is available at the <u>Funding</u>, <u>Performance and Accountability webpage</u> https://www.health.vic.gov.au/funding-performance-accountability/performance-monitoring-framework.

High quality and safe care:

Key Performance Measure	Target			
Infection prevention and control				
Compliance with the Hand Hygiene Australia program ¹	85%			
Percentage of healthcare workers immunised for influenza	94%			
Healthcare associated infections (HAI's)				
Rate of healthcare-associated <i>S. aureus</i> bloodstream infections per 10,000 bed days	≤ 0.7			
Patient experience				
Percentage of patients who reported positive experiences of their hospital stay	95%			

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
Adjusted current asset ratio	0.7 or 3% improvement from health service base target
Variance between forecast and actual Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000
Actual number of days of available cash, measured on the last day of each month	14 days

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¹ Effective date of target change from 85% to 80% conditional on pending changes to BP3 requirements.

Part C: Activity and Funding

The performance and financial framework within which state government-funded organisations operate is described in *The Policy and Funding Guidelines – Funding Rules*. The Funding Rules details funding and pricing arrangements and provides modelled budgets and targets for a range of programs. The <u>Policy and Funding Guidelines</u> webpage https://www.health.vic.gov.au/policy-and-funding-guidelines-for-health-services.

Period 1 July 2023 - 30 June 2024

Table 1 Calvary Health Care Bethlehem funding summary for 1 July 2023 – 30 June 2024

Funding Type	Activity	Budget (\$'000)
Consolidated Activity Funding		
Acute admitted, subacute admitted, emergency services, non-admitted NWAU	3,218	13,762
Acute Admitted		
Other Admitted		928
Acute Non-Admitted		
Home Enteral Nutrition NWAU	18	66
Subacute/Non-Acute, Admitted & Non-admitted		
Palliative Care Non-admitted		6,707
Subacute & Non-Acute Other		
Other specified funding		3,094
Other		
Health Workforce		666
Supplementation funding		1,052
Total Funding		26,275

Please note:

- Base level funding, related services and activity levels, outlined within the Policy and
 Funding Guidelines are subject to change throughout the year. Further information about
 the department's approach to funding and price setting for specific clinical activities, and
 funding policy changes is also available from: Policy and funding guidelines for health
 services between the policy and services
- Each funding type row (eg "emergency services") comprises a mix of activity based funding and block grants. Funding depends on the service profile. For further details, refer to the Policy and funding guidelines for health services (see above point for link).
- In situations where a change is required to Part C, changes to the agreement will be actioned through an exchange of letters between the department and the health service's Chief Executive Officer.

Part D: Commonwealth Funding Contribution

Commonwealth funding contribution is provided by the 2023-24 Commonwealth budget, which is based on estimates. This is updated throughout the year based on updated activity levels, by the Administrator of the National Health Funding Pool.

Commonwealth funding is based on actual activity, there may be adjustments to funding throughout the year as a result of reconciliations and other factors.

Table 2 Commonwealth contribution for period: 1 July 2023 – 30 June 2024

Funding Type	Number of services (NWAU)	Victorian average price per NWAU	Funding allocation (\$)
Acute Admitted			1,966,545
Sub-Acute	2,105	4,692	8,276,870
Non-Admitted	1,131	4,966	12,402,694
Total ABF Allocation	3,236		22,646,109
Teaching, Training and Research			725,818
Total Block Allocation			725,818
Total NHRA in-scope funding allocation			23,371,927

Please note:

• 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. Letters will be made publicly available.

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 Policy and Funding Guidelines 2023-24.
- Policies and procedures and appropriate internal controls to ensure accurate and timely submission of data to the Department of Health.
- All applicable policies and guidelines issued by the Department of Health 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 relating to the provision of health services which is in force at any time during the 2023-24 financial year.
- 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.
- Where applicable, this includes the National Safety and Quality Health Service Standards ('NSQHS standards') as accredited through the Australian Health Service Safety and Quality Accreditation Scheme.
- Specific to DHSV: in relation to the School Dental Project Plan, as agreed and specified by both parties, including meeting the requirements outlined in the School Licence Agreement.
- Any other relevant, applicable statutory, regulatory or accountability rules, policies, plans, procedures or publications.

Signing Page

The Minister for Health 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 Mary-Anne Thomas MP

Minister for Health

Date: 29 / 05/2024

Jim Birch

Chairperson

Calvary Health Care Bethlehem

Limited

Date: 4/06/2024