



Martin Foley MP

Minister for Health  
Minister for Ambulance Services  
Minister for Equality

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BAC-BR-8513

Mr Ken Lay AO APM  
Board Chair  
Ambulance Victoria  
PO Box 2000  
DONCASTER VIC 3108

Dear Ken

First, let me convey my thanks, and those of my department, to you and your organisation for the pivotal, agile and responsive roles you continue to play in the state's management of the Coronavirus (COVID-19) pandemic while ensuring that the health needs of the community have continued to be met.

As I stated in my letter in 2020–21, the COVID-19 pandemic has caused a once in a generation disruption to the way Victorians live their lives. We are also all mindful of the potential for significant longer-term impacts on the health and wellbeing of Victorian communities, families and individuals.

The events of the past many months have been unprecedented and complex. The ongoing pressures on Ambulance Victoria and on our wider health system are recognised. However, I am confident that we will all continue to work together to meet those challenges head on, playing our parts in helping Victoria recover to achieve the best possible outcomes for all Victorians.

Given the ongoing circumstances and imminent pressures on your service to continue to deliver essential care, while supporting the COVID-19 response, I have asked my department to abbreviate the annual Statement of Priorities process again this year

Bearing in mind the current circumstances and the demands on your executive and staff I ask that you review the below **2021–22 Statement of Priorities** and advise of your agreement via return letter. Of course, I want to acknowledge that you and your service may wish to have further discussion with the department regarding the proposed priorities and performance outcomes set out in Attachment 1 before finalising your response.

### **Strategic priorities**

A pleasing lesson from this past year is the ability and willingness of our health services to come together and collaborate. However, it has also shown that this level of collaboration is difficult to maintain under our current policy settings. In that regard, while the Victorian health system has adapted quickly and rapidly to respond effectively to the pandemic there is more

we need to do. It is my intention to work closely with the sector over the next 12 months to develop and implement several important system reforms, including modernising our health system through redesigned governance; driving system reforms that deliver better population health, high quality care and improved patient outcomes and experiences; and reforming clinical services to ensure we are delivering our community the best value care.

I ask your board and health service to focus on the following immediate and ongoing priorities to support this intention:

- Maintain your robust COVID-19 readiness and response, working with my department to ensure we rapidly respond to outbreaks, if and when they occur, which includes providing testing for staff where necessary and if required. This includes participating in the implementation of our COVID-19 vaccine immunisation program rollout, ensuring the community's confidence in the program.
- Work collaboratively with Emergency Departments to ensure improved and efficient handover processes.
- Commence the delivery of the government's \$121 million Ambulance Improvement Plan (AIP) to update AV's operating model to better meet the emergency health needs of Victorians. Progress and implementation of initiatives will be reported via the AIP steering committee.
- Work with the Department of Health, Department of Justice and Community Services, Victoria Police and the Emergency Services Telecommunications Authority to deliver initial planning and design for the implementation of Recommendation 10 of the Royal Commission into Victoria's Mental Health System to enshrine health-led responses to mental health crises.
- Develop a detailed plan to implement recommendations contained in Volumes 1 and 2 of the final report from the Victorian Equal Opportunity and Human Rights Commission's independent review into workplace equality in Ambulance Victoria. I ask you keep me informed of the implementation process.
- Embed the Aboriginal and Torres Strait Islander Cultural Safety Framework into your organisation. Build a continuous quality improvement approach to improving cultural safety, underpinned by Aboriginal self-determination, to ensure delivery of culturally safe care to Aboriginal patients and families, and to provide culturally safe workplaces for Aboriginal employees.

## Performance priorities

The performance priorities for Victorian health services in 2021-22 are **enclosed**, which includes a key changes summary. The performance priorities set out in the enclosure contain the full suite of performance priorities applicable to all Victorian health services, however, the performance priorities applicable to Ambulance Victoria will coincide with your scope of services and those specific to your health service year on year.

## State funding

I recognise the pandemic has also resulted in significant financial implications and complexities and there have been a multitude of demands on funding.

On that basis, I **enclose** your 2021–22 modelled budget, which sets out the State's funding commitment for Ambulance Victoria. However, the funding enclosed may not capture full

consideration of the costs associated with addressing the COVID-19 response and further funding allocations that may be agreed with your health service for the delivery of additional services.

I am committed to covering reasonable COVID-19 associated costs. My department will continue to work with you to determine funding availability based on your quarterly financial submissions. As is the usual process for relevant funding elements, your 2021–22 COVID-19 costs will be subject to final reconciliation processes.

If you require further clarification on any of the above or would like to discuss the priorities or any other commentary set out in this letter, please contact the Ambulance Branch in my Department.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'M. Foley', is positioned above the printed name and titles.

**Martin Foley MP**  
Minister for Health  
Minister for Ambulance Services  
Minster for Equality

21 / 03 / 2022

cc: Professor Tony Walker, ASM, CEO Ambulance Victoria

## Part B: Performance priorities

The key performance methodology utilised by the department to support and manage our health services' performance is detailed in the *Performance Monitoring Framework*, available from:

[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)

The complete list of metrics and associated targets, including their technical specifications and temporal elements, that all public health services are required to acquit against, is set out in the *Key Performance Measures and Underlying Risk Factors* publication, available from: [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)

Supporting the performance evaluation of services and *Performance Monitoring Framework* is the *Mental Health Performance and Accountability Framework*. This companion framework is directed towards mental health services and outlines the process for monitoring and evaluating mental health service delivery across Victorian health services.

To support the Government's commitment to high standards of governance, transparency and accountability, performance will be reported, where applicable, on the department's performance website, available from: <http://performance.health.vic.gov.au/Home.aspx>

### Ministerial priorities

The Ministerial priority measures identified within this Part B are chosen because of their strategic importance and are also included within the *Performance Monitoring Framework*. Due to their strategic importance they attract additional oversight and governance, and are subsequently reported annually within health services' annual reports.

The Ministerial priorities measures are further supported by a suite of indicators made available, quarterly, on the Victorian health service performance page at: <https://performance.vahi.vic.gov.au/>.

### Key health service performance priorities (by performance domain)

#### High quality and safe care

Key performance measure	Target
<b>Accreditation</b>	
Certification to the ISO Standard ISO 9001:2015	Certified
<b>Infection prevention and control</b>	
Percentage of healthcare workers immunised for influenza	92%
<b>Patient experience</b>	
Percentage of respondents who rated care, treatment, advice and/or transport received from the ambulance service as good or very good	95%
Percentage of patients experiencing severe cardiac or traumatic pain whose level of pain was reduced significantly	90%
Percentage of adult stroke patients transported to definitive care within 60 minutes	90%

Percentage of major trauma patients that meet destination compliance	85%
Percentage of adult cardiac arrest patients surviving to hospital	50%
Percentage of adult cardiac arrest patients surviving to hospital discharge	25%
Percentage of respondents who rated care and treatment received from paramedics as good or very good	95%

### Strong governance, leadership and culture

Key performance measure	Target
<b>Organisational culture</b>	
People Matter Survey -percentage of staff with an overall positive response to safety and culture questions	62%

### Timely access to care

Key performance measure	Target
<b>Response times Statewide</b>	
Percentage of emergency Code 1 incidents responded to within 15 minutes	85%
Percentage of emergency Priority 0 incidents responded to within 13 minutes	85%
<b>Response times Urban</b>	
Percentage of emergency Code 1 incidents responded to within 15 minutes in centres with a population greater than 7,500	90%
<b>40 minute transfer</b>	
Percentage of patients transferred from ambulance to ED within 40 minutes	90%
<b>Call referral</b>	
Percentage of triple zero cases where the caller receives advice or service from another health provider as an alternative to an emergency ambulance response – statewide	15%
<b>Clearing time</b>	
Average ambulance hospital clearing time	20 minutes

### 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
Actual number of days available cash, measured on the last day of each month.	14 days

## Part C: State funding

The performance and financial framework within which relevant state government-funded health organisations operate, including the specific business-critical conditions of base-level funding, pricing arrangements, funding amounts, and activity levels are outlined in detail within the *Policy and funding guidelines*, available from: <https://www2.health.vic.gov.au/about/policy-and-funding-guidelines>. Table 1 below sets out the 2021–22 funding summary for your health service.

**Table 1: Ambulance Victoria’s funding summary for 2021–22**

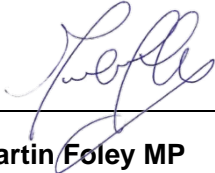
Funding type	Activity	Budget (\$'000)
<b>Community Service Obligation emergency road and air transport</b>		
Emergency Services	283,447	
Non-emergency Services	240,569	
<b>Statewide air transports</b>		
Emergency Services	5,071	
Non-emergency Services	2,538	
<b>Statewide road transports</b>		
Emergency Services	506,828	
Non-emergency Services	295,925	
<b>Treatment without transport</b>		
Emergency Services	88,587	
<b>Department of Health and Human Services Funding</b>		
Community Service Obligation – Emergency Transport		670,459
Community Service Obligation – Non Emergency Transport		183,855
Acute non-admitted		250
Government Initiatives and other specified funding		131,338
<b>Total Funding</b>		<b>985,902</b>

**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: <https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/pricing-funding-framework/funding-policy>
- 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.

## Signing page

The Minister for Health and Ambulance Services 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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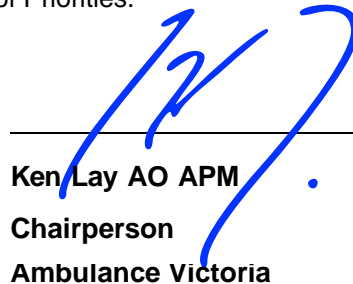
**Martin Foley MP**

**Minister for Health**

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**Date: 17/06/2022**



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**Ken Lay AO APM**

**Chairperson**

**Ambulance Victoria**

**Date: 27 February 2022**