

Minister for Health Minister for Ambulance Services Minister for Equality GPO Box 4057 Melbourne Victoria 3001 Telephone: +61 3 9096 8561 www.health.vic.gov.au

David Stevenson Chairperson Dental Health Services Victoria GPO Box 1273L MELBOURNE VIC 3001

#### Dear Mr Stevenson

First, let me convey my thanks, and those of my department, to you and your service 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 your community have still been 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 are unprecedented, complex and ever-changing. The ongoing pressures on your health service 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, in addition to elective surgery and specialist services, while supporting the COVID-19 response and vaccine rollout, 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 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 to testing for your community and staff, where necessary and if required. This includes preparing to participate in, and assist with, the implementation of our COVID-19 vaccine immunisation program rollout, ensuring your local community's confidence in the program.
- Actively collaborate on the development and delivery of priorities within your Health Service Partnership, contribute to inclusive and consensus-based decision-making, support optimum utilisation of services, facilities and resources within the Partnership, and be collectively accountable for delivering against Partnership accountabilities as set out in the Health Service Partnership Policy and Guidelines.
- Engage with your community to address the needs of patients, especially our vulnerable Victorians whose care has been delayed due to the pandemic and provide the necessary "catch-up" care to support them to get back on track. This includes:
  - the delivery of additional activity under the Responding to community-based healthcare demand initiative.
  - o Continuing to provide telehealth services to enhance in-home and virtual models of patient care when it is safe, appropriate and consistent with patient preference.
- Embed the Aboriginal and Torres Strait Islander Cultural Safety Framework into your organisation and 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.
- Develop and implement a plan which enables the increase in utilisation and revenue collected through the *Child Dental Benefits Schedule* for services provided to children and young people at the Royal Dental Hospital Melbourne and community based public dental services.
- Deliver an Innovations Grants Program that will fund the development and implementation of innovative projects which redesign the service system to improve access to dental care for vulnerable Victorians.
- Develop a statewide model of care to deliver public dental services for Aboriginal people, that allows collaborative partnerships to be developed and maintained to enable improvements in Aboriginal oral health with a focus on prevention and early intervention and system enhancements.
- Develop a statewide service plan for public dental services that establishes clear direction and priorities for the future design of the public dental system. The service plan will support the development of a public dental system that can respond to increasing



and changing demand, improve access to public dental care and deliver better oral health outcomes for vulnerable Victorians.

#### **Performance priorities**

The performance priorities for Dental Health Services Victoria in 2021-22 are **enclosed**, which includes a summary of key changes from 2020-21.

#### State and Commonwealth funding

The 2021-22 funding summary for Dental Health Services Victoria is enclosed.

#### **School Dental Program**

Specific responsibilities and requirements of Dental Health Services Victoria in relation to the delivery of the Program, as agreed by both parties, are specified in the School Dental Project Plan.

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 your relevant performance team.

Yours sincerely

**Martin Foley MP** 

Minister for Health Minister for Ambulance Services Minister for Equality

21 / 03 / 2022



**OFFICIAL: Sensitive** 

## 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

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: <a href="https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability">www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability</a>

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: <a href="http://performance.health.vic.gov.au/Home.aspx">http://performance.health.vic.gov.au/Home.aspx</a>

## 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: <a href="https://performance.vahi.vic.gov.au/">https://performance.vahi.vic.gov.au/</a>

## Key 2021-22 Dental Health Services Victoria performance priorities

#### High quality and safe care

Key performance measure	Target		
Infection prevention and control			
Compliance with the Hand Hygiene Australia program	85%		
Percentage of healthcare workers immunised for influenza	92%		
Patient experience			
Patient satisfaction at the Royal Dental Hospital of Melbourne, as measured by the Patient Experience Trackers	85% positive experience		

#### Strong governance, leadership and culture

Key performance measure	Target
Organisational culture	
People matter survey – Percentage of staff with an overall positive response to safety culture survey questions	62%

### Timely access to care

Key performance measure	2021-22 Agencies Target	2021-22 RDHM Target	2021-22 Statewide Target
Emergency care			
Percentage of Dental Emergency Triage Category 1 clients treated within 24 hours	90%	90%	90%
Percentage of Dental Emergency Triage Category 2 clients treated within 7 days	80%	80%	80%
Percentage of Dental Emergency Triage Category 3 treated within 14 days	75%	75%	75%
General and denture care	•	,	
Number of hospital initiated postponements per 100 scheduled appointments.		3	
Average recall interval for high caries risk eligible clients aged 0 – 17 years (months)			12
Average recall interval for low caries risk eligible clients aged 0 – 17 years (months)			24
Waiting time for prosthodontics, endodontic, and orthodontics specialist services patients (months)		15	
Waiting time for other dental specialist services patients (months)		9	
Waiting time for general care (months)			23
Waiting time for denture care (months)			22
Waiting time for priority denture care (months)			3
Activity*			
Total number of individuals treated <sup>1,2</sup>			409,000
Priority and emergency clients treated <sup>1,2</sup>			273,800
Dental Weighted Activity Units (DWAUs) <sup>1,2</sup>			391,892

<sup>\*</sup> Note: The impact of COVID-19 may realise the delivery of services at a lower level than historically achieved and may affect performance against targets.

<sup>&</sup>lt;sup>1</sup> Targets reflect additional activity to be delivered under the *Federation Funding Agreement – Schedule on Public Dental Services for Adults* and additional State investment for *Responding to community – based healthcare demand.* 

<sup>&</sup>lt;sup>2</sup> Targets exclude services provided via the *Child Dental Benefits Schedule*.

### Participation in oral health promotion

Key performance measure	2021-22 Statewide Target
Oral Health Promotion Program	
Children participating in Smiles 4 Miles	49,000

### **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
Variance between forecast and actual Net result from transactions (NRFT) for the current financial year ending 30 June.	Variance ≤ \$250,000

# 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: <a href="https://www2.health.vic.gov.au/about/policy-and-funding-guidelines">https://www2.health.vic.gov.au/about/policy-and-funding-guidelines</a>.

The tables below summarise funding by activity to Dental Health Services Victoria 2021-22

Funding	Activity number	Base funding 2021-22(\$)	Measure and Target 2021-22
Oral Cancer Screening & Prevention Program	16454	271,139	Implement negotiated deliverables
Service System Resourcing and Development <sup>3</sup>	27010	11,869,147	Reported in Annual Report
Annual Provisions/Minor Works	27011	1,038,550	Reported in Annual Report
Oral Health Promotion	27017	2,080,754	Implement negotiated deliverables
RDHM Dental Care	27019	29,754,730	Individuals treated/DWAU
Workforce, Resourcing and Development	27020	2,231,496	Report on implementation of DHSV Workforce Strategy
Community Dental Care	27023	117,722,521	Individuals treated/DWAU
TOTAL		164,968,337	
Federal Funding Agreement (FFA)*	Funding 2021-22 (\$)	Measure and Target 2021-22	
Service delivery Q1	6,200,000	FFA Service Funding (Commonwealth Department of Health reporting requirements, including DWAUs)	
Service delivery Q2	6,200,000		
Service delivery Q3	6,200,000		
Service delivery Q4	6,200,000		
TOTAL	24,800,000		

<sup>\*</sup>Funding allocation for 2021-22 from the Federal Funding Agreement on Public Dental Services for Adults to 30 June 2022.

<sup>&</sup>lt;sup>3</sup> Includes \$30,000 (fixed) to support the Balibo House Trust Dental Clinic and funding under the following activities and activity numbers: Acute activity - Admitted Patients (11008); Dental Services Purchasing (27024); Clinical Leadership and Governance (27025); Capital Planning and Development (27026); Regional Service System Support (27028); Data Management and IT (27029).

Additional approved funding	Funding 2021-22 (\$)	Measure and Target 2021-22
Responding to community- based healthcare demand	27,000,000	Individuals treated/DWAU
TOTAL	27,000,000	

School Dental Program	Funding 2021-22 (\$)	Measure and Target 2021-22
Funding 2021-22*	35,796,146	Implement negotiated deliverables**
TOTAL	35,796,146	

<sup>\*</sup> Estimated funding required to deliver the program. Amount includes and will be reconciled against surplus funds held by DHSV from the 2020-21 allocation.

<sup>\*\*</sup> Details of negotiated deliverables are provided in the agreed project plan.

# Part D: Commonwealth funding contribution

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 *Federal Funding Agreement*.

#### 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:
  <a href="https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/pricing-funding-framework/funding-policy">https://www2.health.vic.gov.au/hospitals-and-health-services/funding-performance-accountability/pricing-funding-framework/funding-policy</a>
- 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.

## Other obligations and accountabilities

Health services must also comply with the following:

- Relevant legislative, statutory and other applicable duties;
- · National Health Reform Agreement,
- All applicable requirements, policies, terms or conditions of funding specified or referred to in the Policy and funding guidelines;
- Policies, procedures and internal controls to ensure accurate and timely submission of data to the department;
- All applicable policies and guidelines issued by the department;
- Where applicable, all terms and conditions specified in an agreement between this health service and the
  department relating to the provision of health services, which are in force and covered by the period of
  this Statement of Priorities;
- Relevant standards for programs which have been adopted, such as 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 as accredited through the Australian Health Service Safety and Quality Accreditation Scheme and Compliance with the Aged care standards and
- Any other relevant, applicable statutory, regulatory or accountability rules, policies, plans, procedures or publications.

Please note, this is not an exhaustive list.

# 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.

Martin Foley MP

**Minister for Health** 

Date: 17/06 /2022

David Stevenson Chairperson

**Dental Health Services Victoria** 

Date: 02 / 03 /2022