

Appendix A:

Submissions and comments

We have consulted with DH, Ambulance Victoria, The Royal Melbourne Hospital, Werribee Mercy Hospital and Bendigo Hospital, and we considered their views when reaching our audit conclusions. As required by the *Audit Act 1994*, we gave a draft copy of this report, or relevant extracts, to those agencies and asked for their submissions and comments.

Responsibility for the accuracy, fairness and balance of those comments rests solely with the agency head.

Responses received

| Agency | Page |
|------------------------------|------|
| DH | A-2 |
| Ambulance Victoria | A-7 |
| The Royal Melbourne Hospital | A-8 |

Response provided by the Secretary, DH



Secretary

Department of Health

50 Lonsdale Street
Melbourne Victoria 3000
Telephone: 1300 650 172
GPO Box 4057
Melbourne Victoria 3001
www.health.vic.gov.au
DX 210081

BAC-BR-25772

Andrew Greaves
Auditor-General
Victorian Auditor-General's Office (VAGO)
Via email: [REDACTED]

Dear Mr Greaves

Thank you for your letter of 20 May 2024 regarding the 'Performance Audit Report Access to Emergency Healthcare' (VAGO's report) and the opportunity to submit comments and respond to the proposed recommendations.

I support the first two recommendations and support the third recommendation in-principle. In line with this, please find attached the Department of Health's action plan in response to the three recommendations.

Timely access to emergency healthcare remains a priority for the Department of Health and we welcome VAGO's report and recommendations. The department will continue to progress initiatives to improve emergency healthcare performance in its forward work program, including initiatives such as the Timely Emergency Care Collaborative and the expansion of the Victorian Virtual Emergency Department.

I note that, given time constraints, the analysis in VAGO's report does not include the most recent performance data for emergency services and the data will be over one year old as of June 2024. The latest quarterly data (quarter three, 2023-24) shows gradual improvements in the performance of emergency services. For example, the percentage of patients seen within clinically recommended times has increased to 73.3%; and the percentage of ambulance arrivals transferred within 40 minutes has increased to 69.0%.¹

Should your office have any questions, please contact Maria Perera, Executive Director, Ambulance, Emergency Care and Access Branch at [REDACTED].

¹ Victorian Health Service Performance Data, VAHI, as of 21 May 2024 ([Emergency care | Victorian Agency for Health Information \(vahi.vic.gov.au\)](https://www.vahi.vic.gov.au)).



Response provided by the Secretary, DH – continued

Thank you to you and your team for the work on this important audit.

Yours sincerely



Professor Euan M Wallace AM
Secretary
27/05/2024

Copy: 



Department of Health action plan to address recommendations from Access to Emergency Healthcare

| No. | VAGO recommendation | Acceptance | Agreed management actions | Target completion date |
|-----|---|--|---|--|
| 1 | <p>Department of Health, in consultation with Victorian health services:</p> <ul style="list-style-type: none"> • investigate the root cause of why health services are not meeting timeliness measures • develop an action plan to further explore and address the root cause of why health services are not meeting timeliness measures • share learnings from effective interventions across the health system. | <p> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In part <input type="checkbox"/> In principle </p> | <p>The Department of Health (the department) supports this recommendation. The department proposes that the recommendation has been acquitted, and will continue to be acquitted, through the following:</p> <ol style="list-style-type: none"> 1. In 2022, the department undertook extensive engagement and fieldwork with frontline staff and operational leaders within health services to identify the challenges impacting access to emergency healthcare and performance, including timeliness measures, and interventions to address them. <p>A range of interventions were implemented, including the expansion of the Victorian Virtual Emergency Department and the establishment of the Timely Emergency Care Collaborative (the Collaborative).</p> <ol style="list-style-type: none"> 2. The Collaborative is a partnership between the department, the Institute for Healthcare Improvement, 14 health services, and Ambulance Victoria. The Collaborative focusses on identifying and progressing clinician-led patient-flow improvements across emergency departments, general wards, and operational aspects, to reduce pressures and improve timely emergency healthcare. <p>The Collaborative developed a comprehensive driver diagram that identified the priority drivers of emergency performance and barriers to timely healthcare and the initiatives to address them. This has shaped the work of the Collaborative and the range of initiatives that have been implemented at participating health services. By March 2024 initiatives under the Collaborative had led to reductions in patient length of stay in emergency departments and reductions in ambulance handover times.</p> <p>In 2024-25, the Collaborative will continue to focus on identifying challenges and progressing initiatives to address timely access to emergency healthcare. For example, it will have a focus on: the optimisation of patient flow of both inpatients and patients in emergency departments; excellence in flow to address factors that contribute to avoidable hospital stays; and innovation in flow with a focus on targeted initiatives to improve access to timely emergency care and emergency department performance.</p> | <ol style="list-style-type: none"> 1. Completed 2. June 2025 3. Ongoing |

OFFICIAL

Response provided by the Secretary, DH – continued

| | | | | |
|---|--|--|--|---|
| | | | <p>Through the Collaborative, health services routinely come together to share successes and lessons learned, with a view to spreading and scaling successful interventions across the system.</p> <p>The evaluation of the Collaborative's first year of work will be completed by June 2024. Learnings will be shared across the health system.</p> <p>3. In its forward work program, the department will continue to work with health services to review and update the Collaborative's driver diagram to identify the current, emerging and expected challenges that affect timely access to emergency healthcare and the solutions to address them.</p> | |
| 2 | <p>Department of Health, in consultation with Victorian health services, investigate the root cause and nature of differences in access to timely emergency care for different population groups and put in place any necessary measures to ensure equitable access.</p> | <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In part <input type="checkbox"/> In principle</p> | <p>The Department of Health (the department) supports this recommendation and proposes it will be acquitted through:</p> <p>1. The Timely Emergency Care Collaborative and the department's ongoing forward workplan, as described in row one of this table.</p> <p>This work will include the identification of different experiences and outcomes across various population groups, and identify initiatives to improve equitable access to emergency healthcare.</p> <p>A particular focus will be improving access for First Nations people to emergency care with this work progressed by bringing together health services and Aboriginal-led organisations.</p> | 1. June 2025 |
| 3 | <p>Department of Health improve its public reporting on timely access to emergency healthcare by:</p> <ul style="list-style-type: none"> publishing long-term performance data for Victoria's public health services and updating it regularly reviewing and updating its relevant Budget Paper No. 3: Service Delivery measures to ensure they are consistent | <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> In part <input checked="" type="checkbox"/> In principle</p> | <p>The Department of Health (the department) supports point one of this recommendation and proposes it will be acquitted through the following:</p> <p>1. By the end of 2025, the department will publish extended time series data (five years of data reported monthly, where available) for indicators within the Victorian Health Services Performance digital report (publicly available on the Victorian Agency for Health Information portal).</p> <p>The department supports point two of this recommendation in-principle, noting that any changes to the Budget Paper measures need to be approved by Cabinet and are not exclusively within the control of the department. The department proposes the recommendation will be acquitted, in-principle, through the following:</p> | <p>1. December 2025 2. July 2024 3. June 2025</p> |

OFFICIAL

| | | | | |
|--|--|--|--|--|
| | with health service targets and show trends over time. | | <p>2. In 2024, the department intends to conclude its review of the Victorian Health Services' Performance Monitoring Framework (the Framework). The Framework outlines the Victorian Government's approach to monitoring the performance of all Victorian public health services and hospitals. The Framework describes the contextual, strategic and operational aspects of monitoring and improving health services' performance.</p> <p>The review of the Framework aims to ensure that it is fit-for-purpose to achieve the best outcomes for patients and support performance improvement. As part of this reset, measures related to emergency care access are being updated to reflect the drivers of emergency department performance.</p> <p>3. After the review is concluded, the department will use the review's findings to inform analysis and decision-making regarding whether the Budget Paper No. 3 Service Delivery measures need to be reviewed and revised. The department notes that any changes to these measures must be undertaken in partnership with the Department of Premier and Cabinet and the Department of Treasury and Finance, and be approved by Cabinet.</p> | |
|--|--|--|--|--|

OFFICIAL

Response provided by the Chief Executive, Ambulance Victoria

375 Manningham Road
Doncaster VIC 3108
PO Box 2000
Doncaster VIC 3108
03 9840 3500
ambulance.vic.gov.au

OFFICIAL



AmbulanceVictoria

ABN 50 373 327 705

7 June 2024

Mr Andrew Greaves
Auditor General
Victorian Auditor General's Office
Level 31
35 Collins Street
MELBOURNE VIC 3000

By email: [REDACTED]

Dear Andrew

Proposed Performance Audit Report - Access to Emergency Healthcare

Thank you for the opportunity to consider the proposed report on Access to Emergency Healthcare.

Whilst we note that the recommendations within the report will be owned by the Department of Health, Ambulance Victoria remains committed to working closely with all our partners across the health sector in the implementation of the recommendations and in the delivery of our own performance uplift initiatives to improve access to emergency healthcare for our communities.

Yours sincerely

[REDACTED]

Jane Miller
Chief Executive

cc: Garry Button, Executive Director Corporate Services, Ambulance Victoria
([REDACTED])

Danielle North, Executive Director Clinical Operations, Ambulance Victoria
([REDACTED])

Anthony Carlyon, Executive Director Operational Communications, Ambulance Victoria
([REDACTED])

In an emergency, call Triple Zero (000)



Shelley Dolan
Chief Executive
Telephone: +61 3 9342 7762
Email: [REDACTED]



31 May 2024

Mr Andrew Greaves
Auditor-General
Victorian Audit-General's Office
Level 31 / 35 Collins Street
Melbourne Vic 3000

Dear Mr. Greaves

Proposed Performance Audit Report Access to Emergency Healthcare

Thank you for the invitation to include a submission or comment on the report.

The Royal Melbourne Hospital (RMH) team that have participated in this audit appreciated the opportunity to work with you to assess and understand this important topic of timely and equitable access to emergency healthcare for Victorians.

This report highlights some important issues facing Victorian Health Services and the Victorian community in general. We recognise our key role in ensuring equitable and timely access to emergency healthcare for Victorians and support the three recommendations made in the report.

We look forward to working collaboratively with the Department of Health, Ambulance Victoria and other Victorian Health Services to implement any actions resulting from any of the recommendations.

Yours sincerely



Professor Shelley Dolan RN MSc PhD
Chief Executive, The Royal Melbourne Hospital
Professor (Enterprise) Melbourne School of Health Science, University of Melbourne

300 Grattan Street,
Parkville VIC 3050 Australia
thermh.org.au
ABN 73 802 706 972