2019-20 Local Hospital Network Service Level Agreement

An Agreement between the

ACT Minister for Health

and the

ACT Local Hospital Network

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Introduction

The ACT Government manages system-wide public hospital and health service delivery, planning and performance, including the purchasing of public hospital and health services and capital planning.

This Service Level Agreement (SLA), which is between the ACT Minister for Health and, the Director-General of the ACT Health Directorate for the ACT Local Hospital Network (LHN), formalises the performance framework, activity and funding levels for the ACT LHN for 2019-20. The Ministers for Health and for Mental Health have separately signed a Statement of Priorities agreement with the Chief Executive Officer of Canberra Health Services, which is the main service provider in the ACT LHN.

This SLA supports the delivery of safe, accessible, quality, financially sustainable and accountable healthcare for the ACT community and surrounding region. It also promotes visibility of responsibilities and accountabilities across relevant ACT agencies for the delivery of health services and provides information on funding of these services. Key elements of this SLA include:

- the services to be provided by the ACT LHN;
- funding provided to the ACT LHN for the provision of these services;
- · key service performance priorities and agreed targets; and
- other obligations of the parties.

Fundamental to the success of this agreement is a strong collaboration between the ACT Minister for Health, the Minister for Mental Health and Justice Health, the ACT Health Directorate (ACTHD), the ACT LHN service providers including Canberra Health Services, and the broader ACT public health system to achieve the best health outcomes for the community from available resources.

This Agreement commences 1 July 2019 and expires 30 June 2020.

Legislative and Policy Context

This Agreement is established in accordance with the requirements of the National Health Reform Agreement (NHRA) and the ACT Health (National Health Funding Pool and Administration) Act 2013. Under the NHRA, each LHN is required to have a service agreement established between it and the state/territory.

This Agreement is established to give effect to the objectives and priorities of the ACT Government for the ACT public health system as documented in the ACT 2019-20 Budget papers.

This Agreement is also established consistent with the objectives and priorities of the ACT-NSW Memorandum of Understanding (MOU) for Regional Collaboration.

The ACT Government is committed to delivering person and family-centred, safe and effective care, with the appropriate health infrastructure to meet the future needs of the ACT and surrounding region. This is supported by creating a transparent and accountable approach to health service delivery in the ACT, improved health service performance and system capacity within the funding provided.

Roles

ACT Health Directorate and ACT Local Hospital Network

One of the main roles of the Director-General of the ACTHD is to administer the ACT LHN. The ACTHD provides the administrative functions to support the ACT LHN to deliver the services in accordance with this Agreement.

As system steward, ACTHD provides commissioning cycle functions for the ACT LHN via:

- territory-wide health services planning;
- negotiations and submissions for funding;
- commissioning of service providers;
- monitoring of expenditure and delivery of services by providers against key performance indicators;
- accountability to Minister, legislature and community for the key system-wide performance indicators as per Budget Statements C, ACT 2019-20 Budget; and
- accountability for the management of the LHN service providers other than Canberra Health Services (see below).

Health Services Providers

The ACT LHN service providers are detailed below. The main role of the service providers within the ACT LHN under this Agreement is to deliver the services detailed in the schedules consistent with the ACT Government's objectives and priorities, key performance indicators and in accordance with all governing legislation and regulations.

As a Directorate created under the ACT Public Sector Management Act, Canberra Health Services (CHS) is directly responsible and accountable to the Minister for Health for delivery against activity and performance targets as assigned by the ACT Government. For this reason, the Chief Executive Officer (CEO) of CHS has entered into an agreement with the ACT Health Ministers, as indicated above.

Priorities for 2019-20

A major focus for the ACT LHN will be balancing the continued pressure of demand for hospital and health services within the resources available. ACTHD, as the ACT LHN manager, will continue to collaborate with, and promote collaboration amongst, service providers, particularly in relation to improving and identifying cost effective models of service delivery, as well as models of care that reduce the demand on hospital admissions and presentations.

A further major focus will be efforts to improve emergency department and elective surgery waiting times for those urgency categories where performance continues to be a challenge.

ACTHD will work with the ACT LHN providers to implement the range of investments that the government has made to improve waiting times. These include:

 an additional two senior staff specialists will be recruited within the emergency department at Canberra Hospital. This builds on the increase to emergency department staff delivered through the 2018-19 Budget, which has grown frontline resourcing by 14 staff;

- an additional 12 medical beds have also been funded in 2019-20 to meet demand for acute inpatient services. This builds on the additional 68 beds to be added this year as a result of the Government's investments through last year's Budget;
- completion of the emergency department expansion at Calvary Public Hospital Bruce, funded in the 2018-19 Budget, which will deliver additional treatment spaces, improved access and triage arrangements, enhanced waiting areas and an expanded short stay unit;
- new doctors, nurses, administration and other health professionals, funded in 2019-20, to staff the emergency department expansion at Calvary Public Hospital Bruce when it is complete;
- commissioning of two additional theatres at Calvary Public Hospital Bruce to boost elective surgery capacity, as well as staff to support these once they come online – one in 2019–20 and another in 2020–21; and
- expanded urology services and staff at Calvary Public Hospital Bruce to meet the ACT's growing demand for urology surgery.

Hospital and Health Service Profile

In 2019-20, the ACT LHN will secure services from the following providers:

| , · | |
|-----------------------------|--|
| Provider | Service Profile |
| Canberra Health Services | CHS delivers a range of publicly funded acute, sub-acute, primary and community-based health services and programs through: |
| | Canberra Hospital: an acute care teaching hospital which is also a tertiary referral centre that provides a broad range of specialist medical and surgical services to the people of the ACT and South East NSW. |
| | Canberra Hospital is the largest public hospital in the region of approximately 670 beds, supporting a catchment area population of around 617,000, with strong links to community-based services that provide continuity of care for patients. It is the principal teaching hospital of the Australian National University Medical School. It also has strong ties with the University of Canberra and the Australian Catholic University Schools of Nursing. |
| | Key facilities that are located on the Canberra Hospital campus include: |
| * | Centenary Hospital for Women and Children |
| | Canberra Region Cancer Centre |
| | Adult Mental Health Unit. |
| | Community Health Centres: providing a range of general and specialist health services to people of all ages, including early childhood services, youth and women's health, dental health, mental health and alcohol and drug services. |
| | Dhulwa Mental Health Unit: providing 24-hour treatment and care for adults with complex mental health needs. The unit has 10 acute care beds and 15 rehabilitation beds. |
| | University of Canberra Hospital – Specialist Centre for Rehabilitation, Recovery and Research: a dedicated and purpose-built rehabilitation health facility. It provides care and support for people over the age of 18 who are experiencing |

| Provider | Service Profile |
|-----------------------------------|---|
| | mental illness or recovering from surgery, illness or injury. Patients need a referral to attend UCH. It is the largest rehabilitation centre in the ACT and surrounding region, with 84 beds, 75 day places and additional outpatient services. Walk-in Centres: which provide free treatment for minor illness and injury, 7 days a week between 7.30am and 10pm. |
| Calvary Health Care ACT Ltd | Calvary Public Hospital Bruce (Calvary Public): Calvary Public is a fully accredited public hospital of around 190 beds located on the north side of Canberra. Services include an Emergency Department, an Intensive Care Unit, a Coronary Care Unit, medical and surgical wards, a Maternity Unit, a voluntary psychiatric ward, and ambulatory care and outreach facilities and services. |
| | Calvary Public is a teaching hospital affiliated with the Australian National University, the Australian Catholic University and the University of Canberra, as well as providing clinical placements for several other tertiary providers. |
| | Clare Holland House: Clare Holland House, operated by Calvary, is the main facility for the provision of specialist palliative care across the ACT and surrounding region. Clare Holland House is a modern palliative care service, publicly funded by the ACT LHN. |
| | The facility provides a mix of inpatient, outpatient and residential / community-based services. A consultation service is provided to Calvary Public, Canberra Health Services, Calvary John James Hospital and the National Capital Private Hospital. |
| Tresillian Family Care Centres | Queen Elizabeth II Family Centre (QEII): The QEII provides a residential program for families with young children (0-3 years) experiencing difficulties in the postnatal and early childhood periods. Families with complex lactation and other feeding problems, failure to thrive, unsettled babies, postnatal depression, child at risk, special needs, parenting support, and children with behavioural problems utilise this facility and the services provided. |
| Calvary John James Hospital | Elective Joint Replacement Program: approximately 400 joint replacements per year. |
| Private Provider Program | Panel for Elective Surgery Wait List Reduction: Barton Private Hospital Calvary Bruce Private Hospital Canberra Microsurgery Capital Coast Surgery Calvary John James Hospital Canberra Private Hospital |
| ACT Health Directorate | Public Health Services In accordance with the Public Health Act 1997, the Chief Health Officer leads: • Development and implementation of strategies to promote and protect public health |

| Provider | Service Profile | | |
|----------|--|--|--|
| | Advice to the Minister on matters of public health Biennial reporting on priority issues through the Chief Health Officer's Report Exercise of a range of critical health emergency management functions Oversight of regulatory compliance and enforcement of public health legislation which includes the Food Act 2001 and the Medicines, Poisons and Therapeutic Goods Act 2008 | | |

Performance, Activity and Funding

Performance Indicators, Strategic Objectives and Accountability
Indicators as per the 2019-20 Budget Statement (Budget Statements C)

Performance Indicators – ACT Local Hospital Network

| Establishment of an integrated planning, funding and performance monitoring framework that drives coordinated, high-quality health care service delivery | 2019-20 Target |
|--|-------------------|
| Performance Agreements with Public Hospital Service Providers in place ¹ | 2 |

Accountability Indicators

| Ou | Output Class 1 – ACT Local Hospital Network | | 2019-20 Targets NWAU {19} |
|----|---|---|---------------------------------|
| | a. | Admitted Services – National Weighted Activity Units ² | 101, 917 |
| | b. | Non-admitted Services – National Weighted Activity Units ² | 20,758 |
| | c. | Emergency Services – National Weighted Activity Units ² | 19,590 |
| | d. | Acute Admitted Mental Health Services – National Weighted Activity Units ² | 9,824 |
| | e. | Sub-Acute Services – National Weighted Activity Units ² | 12,340 |
| | f. | Total in Scope – National Weighted Activity Units ² | 164,429 |

¹ This is a new Strategic Indicator for 2019-20. Canberra Hospital and University of Canberra Hospital will be covered under the same agreement; Calvary Public and Clare Holland House are covered under a single second agreement.

² National Weighted Activity Unit (NWAU) is the 'currency' that is used to express the price weights for all services that are funded on an activity basis.

ACT Health Directorate Indicators

The ACT Health Directorate is responsible for the following indicators, however they are achieved through the performance of LHN providers.

Strategic Objectives

| Strategic Objective 1 – Reducing the Waiting List for Elective Surgery | 2019-20 |
|--|------------|
| | Target |
| The number of patients waiting longer than clinically recommended timeframes for elective surgery | 430 |
| | , jāsa, us |
| | 2019-20 |
| Strategic Objective 2 – Performing more Elective Surgery | Target |
| Number of elective surgeries performed | 14,250 |
| Strategic Objective 3 – Improving Timeliness of Emergency Department Demand | 2019-20 |
| Strategic Objective 3 Improving finitimess of Emergency Department Demand | Target |
| Percentage of Emergency Department presentations whose length of stay in the Emergency Department is four hours or less | 90% |

Accountability Indicators

| Outpu | t Class 1 – ACT Health Directorate | 2019-20 Targets |
|-------|--|--------------------|
| a. | Percentage of all Emergency Department presentations treated within clinically | |
| | appropriate timeframes | 70% |
| b. | Percentage of Category 1 elective surgery patients admitted for surgery within clinically appropriate timeframes | 100% |
| c. | Percentage of Category 2 elective surgery patients admitted for surgery within clinically recommended timeframes | 80% |
| d. | Percentage of Category 3 elective surgery patients admitted for surgery within clinically recommended timeframes | 93% |
| e. | Calvary service (out of scope) – discontinued | n/a |

| f. | Proportion of people who undergo a surgical operation requiring an unplanned return to the operating theatre within a single episode of care due to complication of their primary condition | |
|----|---|-------|
| | Canberra Hospital | <1.0% |
| | Calvary Public Hospital | <0.5% |
| g. | Proportion of people separated from ACT public hospitals who are re-admitted to hospital within 28 days of their separation due to complications of their condition (where re-admission was unforeseen at the time of separation) | |
| | Canberra Hospital | <2.0% |
| | Calvary Public Hospital | <1.0% |
| | | |

| | 2019-20 |
|--|---------|
| Output Class 1.3 – ACT Health Directorate | Targets |
| a. Percentage of mental health clients with outcome measures completed | 65% |

LHN Activity and Funding

The table below outlines total funding in the LHN budget for 2019-20, excluding funding under the National Partnership on COVID-19 Response.

Activity based funded services and block funded services are defined by the Independent Hospital Pricing Authority under the NHRA.

| Service Stream | NWAU ¹ {19} | Budget (\$) |
|--|------------------------|---------------|
| Activity Based Funded (ABF) Services | | |
| Acute Admitted | 101,917 | 650,560,679 |
| Non-Admitted | 20,758 | 132,503,298 |
| Emergency Department | 19,590 | 125,047,673 |
| Admitted Mental Health | 9,824 | 62,708,951 |
| Sub-acute Admitted | 12,340 | 78,769,183 |
| Total ABF | 164,429 | 1,049,589,783 |
| Block Funded Services | | |
| Non-admitted Mental Health | | 45,854,363 |
| Queen Elizabeth II Hospital | | 3,695,000 |
| Non-Admitted Child and Adolescent Mental Health Services (CAMHS) | | 9,877,637 |
| Non-Admitted Home Ventilation | | 1,334,190 |
| Teaching, Training and Research | | 53,765,879 |
| Total Block Funded | | 114,527,069 |
| Out of scope and unallocated services ² | | 170,880,079 |
| Total ACT Health Services Funding | | 1,334,996,932 |
| Cross Border Payments | | 25,437,000 |
| Public Health | | 7,182,000 |
| Total LHN Funding ³ | | 1,367,615,932 |

¹ NWAU refers to the National Weighted Activity Unit, which is the measure of health service activity against which the National Efficient Price is paid. It applies to ABF services only. NWAU {19} is the measure used for 2019-20.

² Includes services out of scope for ABF or block funding from the Commonwealth, as well as adjustments made at ACT Budget Review (February 2020) which were not allocated against individual funding streams.

³ Total LHN Funding includes updated estimates of QEII, cross border and public health payments compared to figures published in the 2019-20 Budget.

Parties to the Agreement:

Rachel Stephen-Smith MLA ACT Minister for Health

Date: 27 / 6 / 2020

Kylie Jonasson Director-General

ACT Health Directorate

Date: 27 / 6 / 2020