Monash Health

PARLIAMENT OF VICTORIA

Public Accounts and Estimates Committee



2023–24 Financial and Performance Outcomes Questionnaire

Monash Health

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Introduction – Financial and Performance Outcomes Questionnaire

The Committee's inquiry into the 2023–24 Financial and Performance Outcomes examines:

- the Government's actual versus budgeted expenditure and revenue
- the actual versus target performance outcomes at a departmental/agency level
- other expenditure unforeseen at the time of preparing the 2023–24 Budget and outcomes achieved.

The inquiry aims to benefit the Parliament and the community by:

- promoting the accountability, transparency and integrity of the executive and the public sector
- encouraging the effective and efficient delivery of public services and assets.

This questionnaire seeks information on the departmental/agency financials for the 2023–24 financial year, what was achieved during the year and how that compares to expectations.

Timeline and format

Responses to this questionnaire are due by 5.00pm on Friday 8 November 2024.

Please email the completed questionnaire (in word and pdf) to paec@parliament.vic.gov.au

Consistency with the budget papers

Wherever referring to an initiative/program/project that is in the budget papers, please use the same name as is used in the budget papers. This ensures that the Committee can correlate the information provided by the department with the information in the budget papers.

Basis of consolidation

For departments, please use the same basis of consolidation as was used in the budget papers and in the budget portfolio outcomes statement in the department's annual report.

Guidance

Please contact the secretariat should you require guidance in relation to any questions:

Charlotte Lever, Lead Analyst – <u>charlotte.lever@parliament.vic.gov.au</u> Kathleen Hurley, Financial Analyst – <u>kathleen.hurley@parliament.vic.gov.au</u>

Section A: Output variances and program outcomes

Question 1 (all departments) Completed output initiatives from past budgets

For all initiatives that were completed in 2023–24 please provide details of the expected outcomes for the community and the actual outcomes achieved to date. Please use initiatives names as specified in *Budget Paper No. 3: Service Delivery* and link the initiative to the responsible output(s) and portfolio(s).

	Year and fund	ding allocated	Actual date of completion			Qutput(s) and
Initiative	Budget year	Funding allocated	(month and year)	Expected outcomes	Actual outcomes	Output(s) and portfolio(s)

Question 2 (all departments) Program outcomes

Outcomes reflect the impact on the community of the goods and services provided by a department. The questions in this section relate to the outcomes that the department contributed to in 2023–24.

- a) Using the table below, please outline the five programs that delivered the most important outcomes in the community¹ achieved by the department in 2023–24, including:
 - i. The name of the program
 - ii. The output(s) and portfolio(s) responsible for delivery of the program
 - iii. The program objectives
 - iv. The actual outcome achieved
 - v. The actions taken to deliver the actual outcome (i.e. the most important elements/essential parts that led the department to deliver the outcome).

Pro	gram	Output(s) and portfolio(s)	Program objectives	Description of actual outcome achieved	Description of the actions taken to deliver the actual outcome
1.					
2.					
3.					
4.					
5.					

- b) Using the table below, please outline the five least performing programs that did not deliver their planned outcomes in the community by the department in 2023–24, including:
 - i. The name of the program
 - ii. The output(s) and portfolio(s) responsible for delivery of the program
 - iii. The program objectives
 - iv. The actual outcome achieved
 - v. Explanation for not achieving the planned outcome (including a description of what actions were taken to try and achieve the planned outcome).

¹ 'Outcomes' are the impact of service delivery on the community rather than a description of the services delivered. An outcome could be considered important for a variety of reasons, such as the amount of funding allocated to the program, the public interest in the service or goods being delivered or where particular actions taken by the Department delivered improved outcomes.

Program	Output(s) and portfolio(s)	Program objectives	Description of actual outcome achieved	Detailed explanation for not delivering the planned outcome
1.				
2.				
3.				
4.				
5.				

Question 3 (all departments) Treasurer's Advances and other budget supplementation

a) Please identify all output(s) and portfolio(s) (and relate them to departmental programs) for which the department received additional funding after the 2023–24 Budget.

For each output, please quantify the additional funding, indicate the source of the additional funding (e.g. Treasurer's Advance, unused prior years appropriations under s32 of the *Financial Management Act 1994* (Vic), supplementation through a Temporary Advance under section 35 of the FMA, or any possible sources of funding as listed in the Resource Management Framework (2024), (section 4)) and explain why additional funding was required after funding was allocated in the Budget.

Output(s) and portfolio(s)	Program	Program objectives	Funding allocated in 2023–24 Budget	Additional funding (\$ million)	Source of additional funding as per the Resource Management Framework	Funding utilised 2023–24	Reasons why additional funding was required
	Total 2023–24						

b) Please provide the details of the outcomes achieved from each of these programs.

Output(s) and portfolio(s)	Program	Outcomes achieved

Question 4 (all departments) Central contingencies

The Resource Management Framework (2024, Section 4.5, pg. 90) provides guidance on how departments access funding from central contingencies.

Please provide information regarding funding received from central contingency in 2023–24, including: the output and portfolio or Government decision related to the funding, the amount of funding received, the amount of funding utilised, funding received through previous budgets for the same purpose and why funding from contingency was required.

Output(s) and portfolio(s) or Government decision associated	Funding received	Funding utilised 2023–24	Funding received in previous budget/s for same purpose. Please specify which budget	Reasons why funding was required
Total 2023–24				

Question 5 (Department of Health only) 2023–24 Budget funding allocation and performance

The 2023–24 Budget allocated \$2.3 billion to the line item *Meeting the needs of Victorian public hospital services*.

a) Please provide a detailed breakdown of the actual amount spent in 2023–24. Please provide an explanation for any variances of ±5% based on budgeted vs actuals by output.

Output	2023–24 Budget (\$ million)	2023–24 actual (\$ million)	Variance (%)	Explanation for variance	Outcomes delivered
Admitted Services					
Emergency Services					
Non-Admitted Services					
~insert more lines as necessary~					
Total	\$2,338.9				

b) To gain an understanding of Victoria's health care system and performance, please provide the data for the following variables, including an explanation for the increase or decrease compared to the previous year's data.

Category	As at 30 June 2021	As at 30 June 2022	As at 30 June 2023	As at 30 June 2024	Variance between 2022 and 2023 Explanation for the variance between 30 June 2022 and 2023	Variance between 2023 and 2024 Explanation for the variance between 30 June 2023 and 2024
Number of						
patients						
treated in						
emergency						
departments						
Number of						
hospital beds						
total						

Number of				
intensive care				
unit beds total				
Average time				
spent in				
waiting rooms				
 emergency 				
departments –				
non-mental				
health patients				
Average time				
spent in				
waiting rooms				
 emergency 				
departments –				
mental health				
patients				
Number of				
patients				
waiting for				
treatment –				
elective				
surgery				
Number of				
emergency				
department				
staff (FTE)				
			1	1

Question 6 (Department of Health only) Mental health and wellbeing levy

Regarding the Mental Health and Wellbeing surcharge/levy, please provide the amount of funding received from the levy in 2023-24, what outputs the department spent with the funds over 2023-24 and what outcomes were achieved.

2023-24 actual (\$ million)	Total expended for 2023- 24 financial year	Outputs the department utilised funding for	Outcomes of funding

Question 7 (Department of Families, Fairness and Housing only) Victorian Contribution to National Disability Insurance

Scheme

a) The 2023–24 Budget allocated \$2.9 billion in payments on behalf of the state to the National Disability Insurance Agency.² In relation to outcomes achieved in 2023–24, please provide the following information on disability services and support in Victoria:

Department of Families, Fairness and Housing	30 June 2022	30 June 2023	30 June 2024
Number of people with disability in Victoria			
Number of NDIS participants			
Number of NDIS participants - identified as culturally and linguistically			
diverse			
Participant satisfaction with services received			
Average wait time to access NDIS package			
Disability workforce - number of workers			
An update on NDIS Workforce and Skills Plan			
An update on NDIS Workforce and Skills Plan			

b) In 2023–24 what disability services did the Victorian Government provide?

c) Please outline the three most significant disability services/programs provided by the Victorian Government in 2023–24, including amount expended, funding source and outcomes achieved for people with disability.

Service/program	Amount expended in 2023–24	Funding source	Outcomes achieved for people with disability

² Department of Treasury and Finance, *Budget Paper No. 5: 2023–24 Statement of Finances*, Melbourne, 2023, p. 96.

Section B: Asset investment

Question 8 (all departments) Capital expenditure variances, completion date and scope changes – existing projects

Please provide details of all capital asset programs where:

- a) there was a variance between TEI at announcement compared to the TEI as at 30 June 2024 of equal to or greater than ±5% and an explanation for the variance
- b) the estimated completion date at announcement is different to the completion date as at 30 June 2024 and an explanation for the change
- c) the scope of the project at announcement is different to the scope of the project as at 30 June 2024.

Capital expenditure

Project	Output(s) and portfolio(s) and/or agency responsible for the project	Total actual expenditure from announcement to 30 June 2024 (\$ million)	TEI at announcement (\$ million)	Revised TEI as at 30 June 2024 (\$ million)	Variance between TEI at announcement compared to revised TEI as at 30 June 2024 Budget (±5%) explanation

Completion date

Project	Output(s) and portfolio(s) and/or agency responsible for the project	Estimated completion date at announcement	Revised completion date as at 30 June 2024	Explanation

Scope

Project	Output(s) and portfolio(s) and/or agency responsible for the project	Scope at announcement	Details of scope change(s) and date(s) scope changes occurred

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Question 9 (all departments) Details of actual capital expenditure – completed projects (or expected to be completed)

Please provide the following details about asset investment projects that were completed in 2023–24:

- a) Project name, project objectives and Department(s), Output(s) and Portfolio(s) and/or Agency/Agencies responsible for delivery of the project
- b) Total Estimated Investment (TEI) at announcement
- c) Actual cost of project
- d) Estimated completion date at announcement
- e) Actual completion date
- f) Explanations for any variance in capital expenditure and/or completion date.

Project	Original project objectives	Responsible Department(s), Output(s) and Portfolio(s) and/or Agency/Agencies	TEI at announcement (\$ million)	Actual cost of project (\$ million)	Estimated completion date at announcement	Actual completed date	Variance explanation (\$ value variance and/or time variance)

Question 10 (all departments) High-value high-risk projects, gateway reviews and business cases

Under the High Value High Risk (HVHR) Framework, a project will be classified as HVHR if it is a budget funded project that has a Total Estimated Investment (TEI) of over \$250 million. HVHR projects are subject to compulsory Gateway reviews, where Gates 1 through 6 are compulsory for all eligible projects: Gate 2 outlines the development of a business case.

Please list all projects included in 2023–24 that were allocated to the department and were classified as HVHR and the project objectives. Please also specify which Gateway reviews, if any, were completed during 2023–24 and business case details for each project.

HVHR Project	Original project objectives	Gateway review name/ Date completed	Date business case completed	Business case – publicly available? Y/N	Business case link (URL)

Question 11 (all departments) Public Private Partnership (PPP) expenditure – existing and completed

Please provide the following information related to the department's PPP projects:

- a) The total estimated PPP investment value, the total actual expenditure from announcement to 30 June 2024, or the actual expenditure to 30 June 2024 and the benefits of using the PPP financing model when delivering/funding a project over other financing methods.
- b) Where the estimated completion date at announcement is different to the completion date in the 2023–24 Budget, and an explanation for any variance.
- c) Where the scope of the PPP at announcement is different to the scope of the project as it is presented in the 2023–24 Budget.

Investment value and benefit of using PPP model

Project name	Project objectives	Output(s) and portfolio(s) and/or agency	Total estimated PPP investment value at the start of the project (\$ million)	Total actual expenditure since the announcement to 30 June 2024 (\$ million)	Actual expenditure in year ending 30 June 2024 (\$ million)	Benefits of using PPP model versus other delivery/funding models

Completion date

Project name	Output(s) and portfolio(s) and/or agency	Estimated completion date	Revised estimated completion date	Variance explanation

Scope

Project name	Output(s) and portfolio(s) and/or agency	Original scope	Revised scope	Explanation for scope changes

Question 12 (DTP only) Alliance contracting expenditure – existing and completed

Please provide the following information related to the department's alliance contracting projects:

- a) The total estimated investment value, the total actual expenditure from announcement to 30 June 2024, or the actual expenditure to 30 June 2024 and the benefits of using the alliance contracting model when delivering/funding a project over other financing methods.
- b) Where the estimated completion date at announcement is different to the completion date in the 2023–24 Budget and an explanation for any variance.
- c) Where the scope of the alliance contract at announcement is different to the scope of the project as it is presented in the 2023–24 Budget.

Investment value and benefit of using alliance contracting model

Project name	Project objectives	Output(s) and portfolio(s) and/or agency	Total estimated investment value at the start of the project (\$ million)	Total actual expenditure since the announcement to 30 June 2024 (\$ million)	Actual expenditure in year ending 30 June 2024 (\$ million)	Benefits of using alliance contracting model versus other delivery/funding models

Completion date

Project name	Output(s) and portfolio(s) and/or agency	Estimated completion date	Revised estimated completion date	Variance explanation

Scope

Project name	Output(s) and portfolio(s) and/or agency	Original scope	Revised scope	Explanation for scope changes

Section C: Revenue and appropriations

Question 13 (all departments and entities) Revenue – variances from previous year

Please explain any changes equal to or greater than ±10% or \$100 million between the actual result for 2022–23 and the actual result for 2023–24 for each revenue category detailed in your operating statement. Please also indicate what any additional revenue was used for or how any revenue reductions affected service delivery and then link it to the relevant output and portfolio.

Please also detail the outcomes in the community³ achieved by any additional expenses or the impact on the community of reduced expenses (if there was no impact, please explain how that was achieved).

For departments, please provide data consolidated on the same basis as the budget portfolios outcomes statement in your annual reports.

If there were no revenue/income categories for the department/agency for which the 2023–24 expenditure changed from the prior year's expenditure by more than ±10% or \$100 million, you do not need to answer this question. If this is the case, please indicate 'no relevant line items' in the table(s) below.

Revenue category	2022–23 actual (\$ million)	2023–24 actual (\$ million)	Explanations for changes ±10% or \$100 million	How the additional revenue was used/the impact of reduced revenue. If no impact, how was this achieved	Relevant output(s) and portfolio(s)
Government Grants (State) – Operating (combined revenue and income)	2,541	2,346	A reduction in financial sustainability funding provided by the Department of Health	Nil impact, cash surpluses used to ensure continued patient care, supplier and employee payments	
Patient and Resident Fees	52	73	Increased occupancy from expansion in the emergency department and full year of the Victorian Heart Hospital	Support patient activity	
Private Practice Fees	8	6	Offset with income in Patient and Resident fees	n/a, see above	

³That is, the impact of service delivery on the community rather than a description of the services delivered.

Commercial Activities	154	173	Increase in Inpatient accommodation fees due to full year of the Victorian Heart Hospital	Support patient activity	
Other revenue from operating activities	90	120	Increase primary due to the reallocation of Dental Grants from Government Grants (State)	n/a	
Government Grants (Commonwealth) - Operating Income	7	9	Increase in Aged Care residential subsidies	Support patient activity	
Other Capital purpose income	22	17	Reduction in capital allocation required for the Shared Pathology Project, partially offset by capital allocation to Monash Medical Centre Clayton Generator Upgrade and VHH	No impact, capital is used as required and available to support the capital requirements of the Health Service	
Assets received free of charge	15	3	Consumables received free of charge via COVID19 State Supply Chain	Decrease due to the decrease in COVID19 patients and PPE required within the Hospital setting	
Other income from Operating Activities	1	6	Increase in donations, in particular one major donor	This mostly supports capital requirements as needed	
Other Interest	1	4	Increase in bank interest received	Supports operational requirements	

Question 14 (all departments and entities) Revenue – variances from budget to actual

Please explain any variances equal to or greater than ±10% or \$100 million between the initial budget estimate (not the revised estimate) and the actual result for 2023–24 for each revenue category detailed in your operating statement. Please also indicate what any additional revenue was used for or how any revenue reductions affected service delivery and then link it to the relevant output and portfolio.

For departments, please provide data consolidated on the same basis as the budget portfolios outcomes statement in your annual reports.

Revenue category	2023–24 Budget estimate (\$ million)	2023–24 actual (\$ million)	Explanations for changes ±10% or \$100 million	How the additional revenue was used/the impact of reduced revenue. If no impact, explain why	Relevant output(s) and portfolio(s)
Private Practice Fees	24	6	Reduced fees in Monash Heart as the models of clinics changed during the move to VHH, this is offset in other revenue lines	No impact on Patient Care	
Commercial Activities	190	173	Reduced activity compared to budget in private hospital revenue, reduced imaging of private patients due to public demand	No impact on Patient Care	
Other revenue from operating activities	91	120	Incremental allocation to internal capital allocation, primarily unbudgeted bank interest.	No impact on Patient Care	
Government Grants (State) – Capital	46	144	Capital for Major Projects. This is difficult to budget as the projects are	Increased capital provided by the Government for: FY2024 programs of work include Kingston residential aged care; Moorabbin Hospital	

			controlled by the Government.	Surgical Services Upgrade; Victorian Heart Hospital; Moorabbin rapid access hubs; Mental Health Youth PARC - Dandenong; Improving Safety in Acute Mental Health Intensive Care Areas and Dandenong and Casey expansion programs	
Other Capital purpose income	10	17	Incremental internal capital allocation	Used for Health Service projects, infrastructure and critical plant and equipment replacement. FY24 included the Monash Medical Centre Clayton Generator Upgrade and additional capital required in the Victorian Heart Hospital	
Capital Donations	7	6	Reduced donations than expected in budget	n/a	
Assets received free of charge	0	3	Unbudgeted free PPE received from State Supply stockpile	n/a	
Other Interest	1	4	Increase in bank interest received	Supports operational requirements	

Section D: Expenses

Question 15 (all departments and entities) Expenses changed from previous year

Please explain any changes equal to or greater than ±10% or \$100 million with regards to the actual result for 2022–23 and the actual result for 2023–24 for each category of expenses detailed in your operating statement. Please explain any changes equal to or greater than ±10% or \$100 million with regards to the actual result for 2023–24 and the 2023–24 budget estimate. Please also detail the outcomes in the community⁴ achieved by any additional expenses or the impact on the community of reduced expenses (if there was no impact, please explain how that was achieved).

For departments, please provide data consolidated on the same basis as the budget portfolios outcomes statement in your annual reports.

Expenses category	2022–23 actual \$ million	2023–24 actual \$ million	Explanations for variances ±10% or \$100 million	Outcomes achieved by additional expenses/impact of reduced expenses. If no impact, how was this achieved	
Employee Expenses	2,302	2,507	Increase in Superannuation guarantee and EBA increases and back pays. Annual leave provisions have increased as well as sick leave requiring back fill. Increase in EFT for Victorian Heart Hospital (VHH) and Mental Health.	Meet statutory superannuation requirements providing EFT for the VHH and funded Mental Health demand	
Depreciation and Amortisation	139	162	Increase in building deprecation from the higher valuation on buildings (30 June 2023 revaluation) and a full year of VHH depreciation.	Meet accounting standards	
Other administrative expenses	101	114	Increased utilisation of senior medical staff Continuing Medical Education (CME)	Meet EBA requirements	
Other Non- Operating Expenses	7	11	Increase in bad debts primarily for Medicare ineligible	Increased pressure on cash flow and reduced capacity for Medicare eligible patients	

⁴That is, the impact of service delivery on the community rather than a description of the services delivered.

Expenses category	2023–24 budget \$ million	2023–24 actual \$ million	Explanations for variances ±10% or \$100 million	Outcomes achieved by additional expenses/impact of reduced expenses. If no impact, how was this achieved
Other Non-Operating Expenses	9	11	Increase in bad debts primarily for Medicare ineligible	Increased pressure on cash flow and reduced capacity for Medicare eligible patients

Question 16 (all departments, PFC, PNFC and entities) Changes to service delivery from savings initiatives

For each of the savings initiatives detailed in the 2023–24 Budget please provide the following details of the impact on service delivery:

- a) Savings target in the 2023–24 Budget and the amount of the savings target allocated to the department/entity.
- b) Actual savings achieved in 2023–24 and the actions taken to achieve the savings target allocated and their impact, including the link to the relevant output and portfolio impacted.

Savings initiative in the Budget	Savings target allocated to the department/entity in 2023–24 \$ million	Actual savings achieved in 2023–24 \$ million	Actions taken to achieve the allocated savings target	What was the impact as a result of the measures taken to achieve the savings target? (e.g. frontline and/or other areas of business that saw the impact) If no impact, how was this achieved	Which output(s) and portfolio(s) were impacted (if relevant)
Labor's	See note below				
Financial					
Statement					
savings					
Whole of	See note below				
Government					
savings and					
efficiencies					
COVID Debt	See note below				
Repayment Plan					
 – savings and 					
efficiencies					

Comment

Each year Monash Health have a number of cost savings initiatives built into the budget by Program and Department which are necessary to deliver a balanced result. Throughout the year these initiatives can be impacted by a number of factors and can also be substituted with other initiatives. In the main, the assumption is that if the Health Service has delivered its budget overall, the initiatives have been delivered.

Question 17 (all departments) Achievement of reprioritisation of existing resources

The 2023–24 Budget included targets for 'reprioritisation and revenue offsets' to fund new initiatives (2023–24 Budget Paper No. 2, p. 59). This is in addition to any savings or efficiencies resulting from expenditure reduction measures. For the department (including all controlled entities),⁵ please indicate:

- a) what areas of expenditure (including projects and programs if appropriate) the funding was reprioritised from (i.e. what the funding was initially provided for)
- b) what areas of expenditure the funds were spent on
- c) for each area of expenditure (or project or program), how much funding was reprioritised in each year
- d) the impact of the reprioritisation (in terms of service delivery) on those areas.

Area of expenditure originally funded	Area of expenditure actually funded	Value of funding reprioritised in 2023–24 (\$ million)	Impact of reprioritisation of funding. If no impact, how was this achieved	Output(s) and portfolio(s) impacted (if relevant)

⁵ That is, please provide this information for the department on the same basis of consolidation as is used in the budget papers.

Question 18 (all departments) Contractors, Consultants and Labour Hire Arrangements

a) Please indicate how much the department spent on contractors (including labour hire) and consultant arrangements during 2021–22, 2022–23 and 2023–24. Labour hire arrangements include the cost of engaging the labour recruiting firm, plus additional costs paid to the labour recruiting firm for the provision of the services of the contractor. Please also explain variances equal to or greater than ±10% between years and list the business areas impacted and how.

Contractors (including labour hire)

2021–22 Actual \$ million	2022–23 Actual \$ million	2023–24 Actual \$ million	Explanation for variances (2021– 22 over 2022–23) ±10%	Explanation for variances (2022–23 over 2023–24) ±10%	Which business areas were impacted/benefitted and how?	Please link your response to relevant output(s) and portfolio(s)

Consultants

2021–22 Actual \$ million	2022–23 Actual \$ million	2023–24 Actual \$ million	Explanation for variances (2021– 22 over 2022–23) ±10%	Explanation for variances (2022–23 over 2023–24) ±10%	Which business areas were impacted/benefitted and how?	Please link your response to relevant output(s) and portfolio(s)

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b) Please enter the actual amount spent on contractors and consultants that are from the Big Four accounting firms (aggregate) in 2023–24 and list the reasons for engaging the firms.

2023–24 Actual \$ million	Reason for engaging firms	Please link your response to relevant output(s) and portfolio(s)

Question 19 (PNFC and PFC entities only) Dividends and other amounts paid to the general government sector

Please detail the type and value of dividends, amounts equivalent to dividends, non-dividend grants, and capital repatriations paid by your agency to the general government sector in 2023–24, explaining the reasons for any significant changes over that period and the impact of any changes on the entity.

Please provide the economic funding ratio or accounting funding ratio as applicable at 30 June 2024. Please provide details of the methodology used for the ratio calculation.

Type of dividend paid	2023–24 Budget (\$ million)	2023–24 Actual (\$ million)	Explanations for variances ±10% or \$100 million	Impact on the agency (including on financial position, investment, impacts on service delivery or infrastructure projects). If no impact, how was this achieved.	Funding ratio at 30 June 2024

Economic funding ratio / accounting funding ratio as at 30 June 2024	Details of the methodology

Section E: Overall financial performance

Question 20 (all departments) Impact of unforeseen events on financial performance – 2023–24

Please outline and quantify, where possible, the impacts of unforeseen events over 2023–24 on the department/agency's financial performance.

Line item in the comprehensive operating statement for the financial year ended 30 June 2024	2023–24 Budget	2023–24 Actual	Impact of unforeseen events
Total revenue and income from			
transactions			
Total expenses from			
transactions			
Net result from transactions (net			
operating balance)			

Section F: Public sector workforce

Question 21 (all departments and entities) Full Time Equivalent (FTE) staff by level and category

a) Please provide total FTE as of 30 June 2022, 30 June 2023, 30 June 2024 and provide explanation for more than ±-10% change in FTE between years.

30 June 2022	30 June 2023	30 June 2024	Explanations of variance ±-10% between	Explanations of variance ±-10% between
Actual FTE	Actual FTE	Actual FTE	30 June 2022 and 30 June 2023	30 June 2023 and 30 June 2024
14,591	16,301	16,771	Increase due to VHH and Sandringham maternity services. Excluding these the increase was 8%	n/a < 10% change

b) For 2023–24, please provide information regarding any staffing challenges faced by the department, including but not limited to: staff shortages by category or position name, positions that were hard to staff, positions that were vacant for 6+ months, positions that have not equalled or surpassed attrition.

The Mental Health program continues to be difficult to recruit to however we are starting to see progress in this space

Question 22 (all departments and entities) Salary by employment category

In the table below, please detail the salary costs for 2021–22, 2022–23 and 2023–24, broken down by ongoing, fixed-term and casual, and explain any variances equal to or greater than ±10% or \$100 million between the years for each category.

Employment category	Gross salary 2021–22 (\$ million)	Gross salary 2022–23 (\$ million)	Gross salary 2023–24 (\$ million)	Explanation for any year-on-year variances ±10% or \$100 million
Ongoing	1,736	1,981	2,177	 FY23 v FY22 – Impacted by the COVID zone allowances paid in FY22 and Winter Surge payment paid in FY23 FY24 v FY23 – increase in super guarantee, EBA rate increases and back pays. Increased staff in Mental Health and VHH. Positions being placed that were previously filled by casual shifts at a premium cost
Fixed-term				
Casual	227	213	166	 Less reliance on casual staffing and recruiting into ongoing positions where possible
Total	1,963	2,194	2,341	

Question 23 (all departments and entities) Executive salary increases

Please detail the number of executives who received increases in their base remuneration in 2023–24, breaking that information down according to what proportion of their salary the increase was, and explaining the reasons for executives' salaries increasing in each bracket.

Increase in base remuneration	Number of execu rate of remunerat from increases of	-	Reasons for these increases	
	Female	Male	Self-described	
0-3%				All movements in line with employment agreements
3-5%				
5-10%				
10-15%				
greater than 15%				

Question 24 (all departments and entities) Enterprise Bargaining Agreement (EBAs)

Please list the Enterprise Bargaining Agreements (EBAs) concluded in 2023–24 that had an impact for the department/agency. For each EBA, please show the number of employees affected and the change in employee expenses attributable to the EBA.

Enterprise Bargaining Agreement	Number of employees affected	Number of employees as a % of department/entity	Change in employee expenses attributable to the EBA (\$ million)	Change in employee expenses attributable to the EBA (\$ million) as a % of total employee expenses

Section G: Government decisions impacting on finances

Question 25 (all departments and entities) Commonwealth Government and National Cabinet decisions

Please identify any Commonwealth Government and National Cabinet decisions during 2023–24 which had not been anticipated/not been concluded before the finalisation of the State budget in 2023–24 and their impact(s) on the department's/entity's finances or activities during those years (including new funding agreements, discontinued agreements and changes to funding levels). Please quantify the impact on income and expenses where possible.

	Impact(s) in 2023–24		
on income (\$ million)	on expenses (\$ million)		
Imnact(s)	in 2023–24		
	Impact(s) on income (\$ million)		

Section H: General

Question 26 (all departments and entities) Reviews/studies/evaluations undertaken

- a) Please list all internal⁶ and external reviews/studies/evaluations, established, commenced or completed by or on behalf of the department/agency in 2023–24 and provide the following information:
 - i. Name of the review/evaluation and which portfolio and output/agency is responsible
 - ii. Reasons for the review/evaluation
 - iii. Terms of reference/scope of the review/evaluation
 - iv. Timeline for the review/evaluation
 - v. Anticipated outcomes of the review/evaluation
 - vi. Estimated cost of the review/evaluation and final cost (if completed)
 - vii. Where completed, whether the review/evaluation is publicly available and where. If no, why it is not publicly available.

Name of the review (portfolio(s) and output(s)/agency responsible)	Reasons for the review/evaluation	Terms of reference/scope	Timeline	Anticipated outcomes	Estimated cost (\$)	Final cost if completed (\$)	Publicly available (Y/N) and URL If no, why.
Standing Directions under the Financial Management Act 1994	Part of Internal Audit Annual Plan	annual audit to assess compliance against the Standing Directions under the <i>Financial</i> <i>management Act</i> 1994	Reported July 2023	Review to support the attestation process of compliance against the Standing Directions under the Financial Management Act 1994	19,470	19,470	N Internal Audit Activity
Contract Management	Part of Internal Audit Annual Plan	To consider processes and	Reported August 2023	Identify whether improvements are	36,344	36,344	Ν

⁶ Internal reviews do not include internal costings. Internal reviews/evaluations include any reviews or evaluations undertaken by your department and not given to external consultants. Internal reviews/evaluations do not include inquiries carried out by Parliamentary Committees or reviews undertaken by integrity agencies.

		controls to manage/administer contracts to support Monash Health to manage lease agreements		required in the management of Contract Management			Internal Audit Activity
Audit of Financial Statements	External Audit by Victorian Auditor – General's Office	Annual audit of Monash Health's financial statements	Reported August 2023	Provision of an audit opinion on the accuracy of financial statements	350,000	313,000	Y – Annual Report
Cyber Security Penetration Testing	Part of Internal Audit Annual Plan	To perform a technical security assessment of Monash Health's PowerBI Web Application	Reported October 2023	Identify whether gaps in network security exist within the PowerBI Web Application	32,450	44,132	N Internal Audit Activity
Mental Health Act Compliance – Restrictive Interventions	Part of Internal Audit Annual Plan	To consider the control framework in place to foster compliance with the requirements of the Mental Health Act 2014 and the upcoming Mental Health and Wellbeing Act 2022.	Reported November 2023	Confirm that processes are complaint with the Mental Health Act 2014, and whether on track to remain compliant against updated legislation to Mental Health Act 2022	38,940	38,940	N Internal Audit Activity
Cyber Security Maturity Assessment	Part of Internal Audit Annual Plan	Conduct a maturity assessment of Monash Health's cyber security practices against EY's Cyber Program	Reported March 2024	Develop a 'Target State' maturity rating for each cybersecurity domain area, including what is	86,966	86,966	N Internal Audit Activity

		Assessment Framework		pragmatic and achievable for Monash Health			
Accounts Receivable (Pathology)	Part of Internal Audit Annual Plan	To consider Monash Health's end to end accounts receivable processes regarding Pathology, including billings	Reported March 2024	Identify whether processes improvements are required in with Pathology Billings	32,450	32,450	N Internal Audit Activity
HR Investigations	Part of Internal Audit Annual Plan	To consider processes supporting the conduct of HR investigations to determine whether matters are handled and resolved in a timely and aligned to Monash Health's policies and procedures.	Reported March 2024	To assist in continuous improvement of the approach to HR investigations	36,344	36,344	N Internal Audit Activity
Ward Clerk Data Entry and Management Review	Part of Internal Audit Annual Plan	To consider key data entry processes and controls performed by Ward Clerks	Reported May 2024	Identify whether improvements are required in the management of Ward Clerks within Monash Health	38,940	38,940	N Internal Audit Activity
Occupational Health & Safety (OHS)	Part of Internal Audit Annual Plan	To consider key processes and controls supporting	Reported May 2024	To identify whether improvements are	45,430	45,430	N Internal Audit Activity

		the management of OHS risks, including identification, recording and monitoring hazards		required in management of OHS risks and incidents, and confirm any gaps in comparison with ISO 45001 guidelines			
Internal Audit Follow Up	Part of Internal Audit Annual Plan	To review supporting evidence supplied by Monash Health Management in relation to Reported Recommendations intended to be closed at Audit Committee Meeting	Quarterly – August, November, March, May 2024	To confirm Management Supporting Evidence meets Report Recommendations requirements and are suitable for approval to close by Audit Committee	25,960	76,911	N Internal Audit Activity

a) Please outline the Department's/Agencies in house skills/capabilities/expertise to conduct reviews/studies/evaluations of the programs and services for which the Department /Agency is responsible.

Monash Health does not undertake internal audit activities in house but rather maintains a contract with Ernst Young (EY) to provide third party, independent internal audit activities.

Question 27 (all departments) Climate change

a) Under FRD 24 Reporting of environmental data by government entities, Victorian Government organisations must report their greenhouse gas emissions and other environmental impacts. Please list the department/entity's internal targets for reducing greenhouse gas emissions in 2023–24 and the department/entity's performance against these internal targets.

Internal target for reducing greenhouse gas emissions 2023–24	Performance against internal target as at 30 June 2024

b) Please outline and quantify where possible the department's actions in 2023–24 that have contributed to the Whole of Victorian Government emissions reduction pledge.

Question 28 (DTP, DE, DH, DEECA) Adaptation Action Plans

Please describe the progress made and actions taken to implement the department's Adaptation Action Plan in 2023–24. What measurable impact have these actions had on addressing the impacts of climate change?

Please provide information regarding all Adaptation Action Plans your department is responsible for.

Question 29 (all departments) Annual reports – performance measure targets and objective indicators

a) Please provide the following information on performance measures that did not meet 2023–24 targets.

Performance measure	2023–24 target (Budget)	2023–24 actual (Annual report)	Variance	Explanation	Output(s) and portfolio(s) impacted

b) Please provide the following information for objective indicators where data was not available at publication of the annual report 2023–24.

Objective indicators stated in annual report for which data was not available at date of publication	Best available data for 2023–24 and relevant date	Explanation for the absence of data in annual report	Action taken to ensure timely data for 2023–24 annual report

Question 30 (all departments and entities) Challenges experienced by department/agency

Please list a minimum of three main challenges/risks faced by the department/agency in 2023–24.

A significant challenge may be any matter or strategy that impacted the department/agency, whether it arose externally or internally or as a result of new policy or legislation.

	Challenge experienced	Internal/ External	Causes of the challenge	Action taken to manage the challenge/risk
1.	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.	External	Population growth and demand on the Health Service	 Monash Health has developed and implemented various new service models to improve patient safety and outcomes. These include: Complete Monash at Home Aged and Rehabilitation Care expanded from 20 to 40 beds in September 2023 to cover the entire Monash Health catchment. Approximately 25% of admissions are from our Emergency Departments, avoiding an acute admission. The Monash Health Financial Strategy has been developed to focus on the organisation is operating efficiency. It seeks to shift the culture by putting the organisation in a position to make the best decisions possible. In the strategy's first year, there has been a significant focus on fiscal education and operating and oversight frameworks. The separation of the Adult and Paediatric Emergency Departments at Monash Medical Centre, Clayton, enables models of care and staffing expertise to align with patient cohorts, improving quality, safety, and patient experience. A new model of care at Casey Emergency Department to separate low and high acuity patients and a separated paediatric area has decreased the "did not wait" rate from 6% to 2%. Implementation of new models of care across the Emergency Departments has significantly improved the time it takes for patients to be seen across all Emergency Departments. Implementation of a geographic model of care for general medicine at Monash Medical Centre has resulted in a significant decrease in the number of patients

 not being cared for on their home ward (outliers), improving efficiency and decreasing inpatient length of stay by 0.4 of a day over a sustained period. Implementation of a new model of care in renal dialysis to optimise onboarding of dialysis patients, education for home dialysis and supporting patients in a pathway to transplantation has lifted the percentage of patients on home dialysis from 25 to 27% (state average 24%). Revision of discharge lounge criteria reward system (enabled by EMR flagging of patients) has significantly improved the utilisation of the discharge lounge at Monash Medical Centre, improving access to care for patients in the Emergency Department.
 In progress A new Service Plan and model of care for the delivery of Eating Disorders Service has been undertaken to identify opportunities across the spectrum of care and life span to improve service delivery and care. The Community Program partnered with the South East Metro Health Services Partnership (SEMHSP) to implement a Vulnerable Care Pathway with a central referral-based service offering triage, assessment, clinical monitoring, and coordination for respiratory and vulnerable/complex cohorts across the South East. The Joint Sub-committee for Primary Care and Population Health analysed data across the eleven SEMHSP local government areas and established Cardiovascular Health as a collective priority area of focus to maximise health outcomes. A series of engagement workshops and 'Plan, Do, Study, Act' cycles with unit heads and ward governance teams looking at early discharge and "home for lunch" has enabled several initiatives across wards driven by the frontline workers, unit heads and nurse managers. These include initiatives such as PM rounds to organise tomorrow's discharges today, the high acuity clinics to enable the diversion of inpatients requiring specialty review and investigations, discharge Hospital Medical Officers, and patient communication plans. This initiative aims to shift the culture to a unit-led, constructive mindset and will continue to focus on 'Home for Lunch', progressing to weekend discharges and scaling to Dandenong and Casey sites. Where this work has taken place,

				 inpatient length of stay in Monash Medical Centre, Clayton has had a sustained 16% reduction. A review of the bed reconfiguration to improve home unit locations and decrease outliers within the current footprint at Monash Medical Centre will enable team efficiencies, particularly in the neurosciences.
2.	Develop strong and Effective relationships with consumer and clinical partners to drive service improvements	Internal and External	Higher acuity patients seeking treatment leading to longer length of stay	Throughout FY23-24, Monash Health participated in the Department of Health- facilitated 'Timely Emergency Care Collaborative' initiative. This work program aimed to reduce the length of stay for non-admitted and admitted Emergency Department patients. Focusing primarily on the adult Monash Medical Centre, Clayton site, targeted initiatives across emergency, inpatient and operational streams resulted in significant improvements in access to care: By February 2024, the Clayton site saw: - 11% reduction in non-admitted length of stay - 16% reduction in admitted length of stay - Nine-hour reduction in median length of stay for adult inpatients - >30% of all weekday discharges occurred by 12 pm On completion of the first iteration of the 'Timely Emergency Care Collaborative' on 30 June 2024, Monash Health was one of four health services to receive an 'Outstanding Overall Improvement' award from the Timely Emergency Care Collaborative faculty. Monash Health has submitted an Expression of Interest to participate in the second iteration of the Timely Care Collaborative, commencing in 2024-25.
3.	Recognition, escalation, and addressing clinical risk and preventable harm	Internal and External	Continued focus on patient centred care	This work aims to reduce preventable harm to Monash Health patients with earlier identification of deterioration. Patient/Caregiver concern has been demonstrated to be a stronger predictor for deterioration than abnormal vital signs in paediatric patients at Monash Health, and this will likely be similar in other patient populations. Barriers and enablers to patient escalation and clinician response were identified in three representative wards (an emergency department, a paediatric inpatient ward and an adult inpatient ward). A human factors/improvement science

framework was then used to develop several proposed improvements to the Family Escalation of Care process.
 Proposed improvements include: A process for clinicians to proactively assess for and respond to patient/carer concerns across the organisation (roll-out in progress) Electronic Medical Record updates to improve rates of documentation of Patient/Carer Concern (via visual prompt), to improve response to documented Patient/Carer Concern (task check-box), and to improve visibility of escalated concerns (via a new form) (complete) Development of a set of outcome measures and delegation of governance to the Deteriorating Patient Governance Committee for ongoing monitoring A new Monash Health Experience Survey question has been added for all patient populations: 'Did you know how to get help if you were getting worse?' This allowed us to quantify the problem and measure improvement. (complete) Our Business Intelligence team is developing data for monitoring the implementation and response to proactive Patient/Carer Concern assessments (in progress)

Question 31 (all departments) Lapsed or abolished bodies

Please list all existing bodies (authorities, offices, commissions, boards and/or councils) within the department that either lapsed or were abolished in 2023–24 and provide the following information:

- Date body lapsed/abolished
- Reason for closure of the body
- How much money is expected to be saved (if any) by the organisation's abolition
- How many staff (FTE) are expected to impacted by the organisation's closure

Name of the body	Date body abolished/lapsed	Reason for closure	Anticipated savings from closure	Number of staff (FTE) impacted

Question 32 (all departments) Newly created bodies

Please list all newly created bodies (authorities, offices, commissions, boards and/or councils) created within the department in 2023–24 and provide the following information:

- Date body created
- Expenditure in relevant financial year
- FTE staff at end of relevant financial year
- Purpose/function(s) of the body

Name of the body	Date body created	Expenditure in 2023–24	FTE staff	Purpose/function(s) of the body	Who the head of the newly created body directly reports to

Section I: Implementation of previous recommendations

Question 33 (relevant departments only)

a) Please provide an update on the status of the implementation of each of the below recommendations that were made by the Committee in its *Report on the 2021–22 and 2022–23 Financial and Performance Outcomes* and supported and supported-in-principle by the Government.

Department	Recommendations supported by Government	Actions taken at 30 September 2024

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b) Please provide an update on the status of the implementation of each of the recommendations that were made by the Committee in its *Report on 2020–21 Financial and Performance Outcomes* supported and supported-in-principle by the Government.

Department	Recommendations supported by Government	Actions taken at 30 September 2024

Section J: Department of Treasury and Finance only

Question 34 (DTF only) Net cash flows from investments in financial assets for policy purposes – General Government Sector (GGS)

Financial assets include cash, investments, loans and placements. This question seeks to ascertain the variance behind the estimated value of the financial assets held versus the actual value of the financial assets and the projects that contributed to the variance.

Regarding the 'net cash flows from investments in financial assets for policy purposes' in the GGS cash flow statement for 2023–24, please provide:

- a) the top five projects that contributed to the variance recorded in each year
- b) the initial budget estimate (not the revised estimate) for net cash flow in 2023–24 (source: 2023–24 BP5 p. 9) and the actual net cash flow in 2023–24
- c) an explanation for variances between budget estimate and actual net cash flow.

	Project name	Department	Output(s) and portfolio(s)	Estimated net cash flow in 2023–24	Actual net cash flow in 2023–24	Variance explanation
1.						
2.	·			*		
3.						
4.						
5.						
	Other					
Tot	al net cash flow					

Question 35 (DTF only) Purchases of non-financial assets – General Government Sector (GGS)

Regarding the 'purchases of non-financial assets' by the GGS in 2023–24 (source: 2023–24 BP 5, pg. 30), please compare the initial budget estimate for each department to the actual value of 'purchases of non-financial assets' for each department, explaining any variances equal to or greater than ±10% or \$100 million (please fill all blank spaces) and then link it to the relevant output and portfolio. For variance greater than ±10% or \$100 million, please provide a breakdown of the non-financial asset purchased.

By department	Types of non- financial assets	Initial budget estimate 2023–24 \$ million	Actual 2023–24 \$ million	Variance (%)	Variance explanation	Relevant Output(s) and portfolio(s)
Department of Health						
Department of Families,						
Fairness and Housing						
Department of Jobs, Skills,						
Industry and Regions						
Department of Transport and						
Planning						
Department Education						
Department of Justice and						
Community Safety						
Department of Energy,						
Environment and Climate						
Action						
Court Services Victoria						
Department of Premier and						
Cabinet						
Department of Government						
Services						
Department of Treasury and						
Finance						
Parliamentary Departments						

Question 36 (DTF only) Revenue initiatives

Regarding the revenue initiatives announced in the 2023–24 Budget, please provide an explanation for the variances equal to or greater than ±10% or \$100 million between budget estimates and the actual results.

Initiative	2023–24 budget estimate (\$ million)	2023–24 actual (\$ million)	Explanation for any variance ±10% or \$100 million

Question 37 (DTF only) Expenses by departments – General Government Sector (GGS)

Regarding expenses of the GGS in 2023–24 (source: 2023–24 BP5, p. 28), please compare the initial budget estimates (not the revised estimate) for each department to the actual expenses for each department, explaining any variances equal to or greater than ±10% or \$100 million (please fill all blank spaces) and then link it to the relevant output and portfolio.

By department	Initial budget estimate 2023–24 \$ million	Actual 2023– 24 \$ million	Variance (%)	Variance explanation	Relevant output(s) and portfolio(s)
Department of Health					
Department of Families, Fairness and Housing					
Department of Jobs, Skills, Industry and Regions					
Department of Transport and Planning					
Department Education					
Department of Justice and Community Safety					
Department of Energy, Environment and Climate Action					
Court Services Victoria					
Department of Premier and Cabinet					
Department of Government Services					
Department of Treasury and Finance					
Parliamentary Departments					

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Question 38 (DTF only) Economic variables

Please indicate the estimated and actual result for the following economic variables. For the estimate, please use the initial estimate used in preparing the 2023–24 budget papers. For any variance equal to or greater than ±0.5 percentage points, please provide an explanation for the variance. Please fill all blank spaces.

Economic variable	Budget estimate 2023–24	Actual 2023–24 result	Variance	Explanation for variances equal to or greater than ±0.5 percentage points
Real gross state product				
Labour force participation rate				
Unemployment rate – overall				
Unemployment rate – male				
Unemployment rate – female				
Underemployment rate				
Youth unemployment				
Youth underemployment				
Consumer price index				
Wage price index				
Population				
Household consumption				
Property prices				
Property volume				
Employee expenses				

Section K: Treasury Corporation of Victoria only

Question 39 Public Private Partnership (PPP)/alliance contracting projects

Please indicate how many PPP/alliance contracting projects (and which ones) TCV provided 'project advisory services' for in 2023–24. For each project, please also specify if the project is a newly confirmed engagement or if it was for a project that was already underway.

Please indicate how many business cases TCV provided (and which clients these were for) as part of its 'project advisory services' in 2023–24. For each business case, also specify if the project forms part of the Department of Treasury and Finance's Gateway Review Process.

Business case provided by TCV	Client	Gateway Review Process – Y/N