# IN THE MATTER OF THE ROYAL COMMISSION INTO FAMILY VIOLENCE

## ATTACHMENT 'MS-1' TO STATEMENT OF MELISSA SKILBECK

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This is attachment 'MS-1' produced and shown to MELISSA SKILBECK at the time of signing her statement on 12 October 2015.

**Attachment MS-1** 

#### **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

#### Ministerial portfolios

The Department supports the ministerial portfolios of health, ambulance services, housing, disability and ageing, mental health, families and children, youth affairs, and sport.

### **Departmental mission statement**

The Department develops and delivers policies, programs and services that support and enhance the wellbeing of all Victorians.

With its service partners and the community, the Department provides services and support to:

- help Victorians to be as healthy as they can;
- assist people to access opportunities that lead to positive, fulfilling lives;
- build people's capacity to participate in social, economic and community life;
- contribute to a society that is inclusive, provides fair access to opportunity for all, and in which health and social inequality is minimised; and
- provide services, and protection for the most vulnerable members of society, and building resilience to overcome the challenges that communities and individuals face.

#### Departmental objectives, indicators and outputs

The Department's objectives, indicators and linked outputs are:

Departmental objectives	Indicators	Outputs
Victorians are as healthy as they can be by promoting good health, preventing disease and reducing health inequalities	The prevalence of smoking, obesity and psychological chronic disease risk factors are reduced Immunisation rates for vaccine preventable illness improve or compare favourably to other jurisdictions Incidence/prevalence of selected potentially preventable health conditions is reduced Fewer people are dying prematurely Differences in health and social cultures for disadvantaged groups are reduced	Ageing, Aged and Home Care Primary, Community and Dental Health Small Rural Services Public Health Drugs Services

Departmental objectives	Indicators	Outputs
Safe, integrated patient centred health services for the treatment of illness and disease	Percentage of patients seen within clinically recommended times Services provided to patients are safe and of high quality More people are treated within out-of-hospital care settings Patient experience demonstrates improvement in service-level engagement	Acute Health Services Ambulance Services Mental Health
The Victorian health system delivers best practice health care	Victoria derives greater value from its health investments The Victorian public health system has a sustainable workforce Reduced rate of hospital admissions for ambulatory care sensitive conditions Victoria has a framework for sustainable infrastructure and fabric	Acute Health Services Mental Health
Immediate support With its partners, the Department supports people in crisis, and helps individuals and families get their lives back on track	Stability of out-of-home care placements Improved safety of children reported to child protection Achievement of independent and sustainable housing on exit from homelessness services	Child Protection and Family Services Youth Justice Custodial Services Community-Based Services Housing Assistance
Capabilities and participation With its partners, the Department works with families, individuals, young people and communities to improve their lives through building capabilities and resilience, supporting participation in work, education and the community	People with a disability who participate in social and community activities Attendance of young people in detention in accredited education or training Children in out-of-home care meeting literacy and numeracy benchmarks Level of participation in sport and recreation at or above the national average	Disability Services Child Protection and Family Services Youth Justice Custodial Services Community Based Services Youth Affairs Office for Disability Community Participation Sport and Recreation

Departmental objectives	Indicators	Outputs
Quality of life With its partners, the Department provides services to support people in need to enjoy a positive life	New housing allocations to those in greatest need Efficient management of housing stock (including occupancy rate and turnaround time) Disability clients receiving individualised support to live in the community	Disability Services Concessions to Pensioners and Beneficiaries Housing Assistance Sport and Recreation

Source: Department of Health and Human Services

## Changes to the output structure

The Department of Health and Human Services was established following machinery of government changes effective 1 January 2015. Outputs changes are reflected in the table below.

2014-15 outputs na	Reason This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	2015-16 outputs Disability Services
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Child Protection and Family Services
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Community-Based Services
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Youth Justice Custodial Services

2014-15 outputs	Reason	2015-16 outputs
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Concessions to Pensioners and Beneficiaries
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Housing Assistance
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Community Participation
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Office for Disability
na	This output has been transferred from the former Department of Human Services as a result of the machinery of government changes.	Youth Affairs
na	This output has been transferred from the former Department of Transport, Planning and Local Infrastructure as a result of the machinery of government changes.	Sport and Recreation

Table 2.11: Output summary

(\$ million)

() 1111	mony			
	2014-15	2014-15	2015-16	Variation <sup>(a)</sup>
	budget	revised	budget	%
Acute Health Services (b)	10275.3	10304.0	10967.1	6.7
Ambulance Services (c)	696.5	711.8	736.6	5.8
Mental Health <sup>(d)</sup>	1260.6	1242.7	1309.0	3.8
Ageing Aged and Home Care (e)	1203.7	1230.2	1288.6	7.1
Primary, Community and Dental Health <sup>(f)</sup>	462.3	472.0	452.3	-2.2
Small Rural Services (g)	560.2	556.8	578.7	3.3
Public Health <sup>(h)</sup>	328.8	329.9	339.3	3.2
Drugs Services (i)	165.1	172.0	181.3	9.8
Disability Services <sup>(j)</sup>	1677.3	1671.0	1780.0	6.1
Child Protection and Family Services (k)	847.1	866.0	990.8	17.0
Youth Services and Youth Justice (1)	141.1	142.7	155.7	10.3
Concessions to Pensioners and Beneficiaries (m)(	<sup>1)</sup> 718.1	665.0	711.2	-1.0
Housing Assistance (o)	398.9	428.5	420.8	5.5
Empowering Individuals and Communities (p)(q)	147.7	148.8	137.5	-6.9
Total	18 882.6	18 941.3	20 048.9	6.2

Source: Department of Health and Human Services

#### Notes:

- (a) Variation between 2014-15 budget and 2015-16 budget.
- (b) The higher 2015-16 budget reflects funding for the implementation of policy initiatives announced in current and previous budgets as well as indexation.
- (c) The higher 2015-16 budget primarily reflects funding provided for government policy commitments.
- (d) The higher 2015-16 budget primarily reflects funding provided for government policy commitments.
- (e) The higher 2015-16 budget reflects additional funding provided in the 2015-16 Budget for the Social and Community Services Equal Remuneration Order and the ongoing impact of Commonwealth contributions, which had not been agreed at the time of publication of the 2014-15 Budget and indexation.
- (f) The lower 2015-16 budget primarily reflects the cessation of the National Partnership Agreement on Treating More Public Dental Patients.
- (g) The higher 2015-16 budget primarily reflects funding provided for government policy commitments and indexation.
- (h) The higher 2015-16 budget reflects the transfer of funding for Biomedical Research as a result of the machinery of government changes. This is partially offset by the cessation of the National partnership Agreement on Preventive Health.
- (i) The higher 2015-16 budget reflects funding provided for the Ice Action Plan, the Social and Community Services Equal Remuneration Order and indexation.
- (j) The higher 2015-16 budget reflects additional funding provided in the 2015-16 Budget and the impact of the Social and Community Services Equal Remuneration Order.
- (k) The higher 2015-16 budget reflects additional funding provided in 2015-16 Budget and the impact of the Social and Community Services Equal Remuneration Order.
- (I) The higher 2015-16 budget reflects the operation of an additional 45 bed facility at the Youth Justice Centre in Malmsbury to address capacity concerns and improve client safety.
- (m) The lower 2015-16 budget reflects efficiency improvements identified during compliance audits of concession providers and the improved administration of energy concessions.
- (n) The output summary includes funding for transport concessions transferred to the Department of Economic Development, Jobs, transport and Resources. This funding is reflected in the Department of Economic Development, Jobs, transport and Resources' Integrated Transport Services output.
- (o) The higher 2015-16 budget reflects additional funding provided in 2015-16 Budget and the Social and Community Services Equal Remuneration Order.
- (p) The 2015-16 budget reflects the full year impact of the machinery of government transfer of Sport and Recreation (excluding Major Events) from the Department of Economic Development, Jobs, Transport and Resources.
- (q) The 2014-15 budget differs to the amount reported in the 2014-15 Budget papers due to machinery of government changes.

#### **Amounts available**

The following tables detail the amounts available to the Department from Parliamentary authority and income generated through transactions.

Table 2.12 outlines the Department's income from transactions and Table 2.13 summarises the sources of Parliamentary authority available to the Department to fund the provision of outputs, additions to the net asset base and payments made on behalf of the State.

Table 2.12: Income from transactions

(\$ million)

	(4 ////////////////////////////////////			
	2013-14	2014-15	2014-15	2015-16
	actual <sup>(a)</sup>	budget <sup>(a)</sup>	revised <sup>(b)</sup>	budget <sup>(b)</sup>
Output appropriations	8 069.8	8 348.3	10 023.8	12 870.2
Special appropriations	1 280.8	1 192.7	1 296.0	1 360.9
Interest	66.7	67.8	65.1	68.2
Sale of goods and services	1 702.0	1 693.5	1 732.3	1 796.1
Grants	4 195.4	4 487.3	4 599.7	4 861.6
Other income	556.6	395.8	485.9	468.0
Total income from transactions	15 871.3	16 185.5	18 202.8	21 425.1

Sources: Departments of Health and Human Services, and Treasury and Finance

#### Notes:

- (a) Figures for 2013-14 actual and 2014-15 budget reflect the operations of the former Department of Health included in the 2013-14 Financial Report or the 2014-15 Budget, which do not include the impact of machinery of government changes effective from 1 January 2015.
- (b) The 2014-15 revised and 2015-16 budget reflect the full impact of machinery of government changes effective from 1 January 2015.

Table 2.13: Parliamentary authority for resources

(\$ million)

(\$ million)			
	2014-15	2014-15	2015-16
	budget <sup>(a)</sup>	revised <sup>(b)</sup>	budget <sup>(b)</sup>
Annual appropriations	7 587.1	9 110.1	12 012.6
Provision of outputs	7.498.2	9 061.7	11 865.5
Additions to the net asset base	88.9	48.4	147.1
Payments made on behalf of the State		••	
Receipts credited to appropriations	920.3	968.7	954.0
Unapplied previous years appropriation	135.4	227.2	192.1
Provision of outputs	69.0	101.0	112.8
Additions to the net asset base	66.4	126.2	79.3
Accumulated surplus – previously applied appropriation		157.0	47.4
Gross annual appropriation	8 642.8	10 463.0	13 206.2
Special appropriations	1 192.7	1 314.0	1 360.9
Trust funds	3 863.5	3 963.1	4 205.5
Total parliamentary authority	13 699.0	15 740.1	18 772.6

Sources: Departments of Health and Human Services, and Treasury and Finance

<sup>(</sup>a) Figures for 2014-15 budget reflect the operations of the former Department of Health included in the 2014-15 Budget, which do not include the impact of machinery of government changes effective from 1 January 2015.

<sup>(</sup>b) The 2014-15 revised and 2015-16 budget reflect the full impact of machinery of government changes effective from 1 January 2015.

#### **Acute Health Services**

Acute Health Services outputs provide a range of timely and high quality acute hospital inpatient, ambulatory, emergency, community-based and specialist services.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### **Admitted Services**

Acute and sub-acute patient services (elective and non-elective) provided at Victorian metropolitan and rural public hospitals.

Quantity Palliative care bed days	number (000)	92	90	92	91
Sub-acute bed days	number (000)	749	749	648	728

The 2014-15 expected outcome is higher than the 2014-15 target due to the continued increase of subacute beds coming on line as a result of the National Partnership Agreement on Improving Public Hospital Services.

The higher 2015-16 target reflects this increase.

Total separations – all hospitals	number	1 695	1 635	1 586	1 560
	(000)				

The higher 2015-16 target reflects the effect of anticipated growth in activity, and additional funding provided in the 2015-16 Budget.

Weighted Inlier Equivalent	number	1 190	1 144	1 133	1 114
Separations (WIES) – all hospitals	(000)				
except small rural health services			•		

The higher 2015-16 target reflects the effect of anticipated growth in activity, and additional funding provided in the 2015-16 Budget.

The 2013-14 actual published in the Department of Health Annual Report 2013-14 was a preliminary result.

WIES funded emergency	number	546	531	488	477
separations – all hospitals	(000)				

The higher 2015-16 target reflects the effect of anticipated growth in activity, and additional funding provided in the 2015-16 Budget.

WIES funded separations – all	number	1 509	1 449	1 411	1 379
hospitals except small rural health	(000)				
services					

The higher 2015-16 target reflects the effect of anticipated growth in activity, and additional funding provided in the 2015-16 Budget.

Hand hygiene compliance	per cent	80	80	80	79.2
hearing deficit before one month of age					
Quality Eligible newborns screened for	per cent	97	98.4	97	98.3

Major outputs/deliverablesUnit of performance measures2015-16 measureexpected outcome estimate2014-15 measure2013-14 measureHealthcare worker immunisation – influenzaper cent influenza75 nm nm nm nm nmnm nm nmNew performance measure for 2015-16 to reflect Government priorities regarding monitoring the rate of influenza immunisations for healthcare workers.per cent influenza100 nm nm nm nmHospitals participating in Victorian Hospital Acquired Infection Surveillance System (VICNISS)per cent influenza immunisation nm nm nm100 nm nm nm nm nmIntensive Care Unit central line associated blood stream infections (CLABSI) per 1 000 device daysrate ≤2.5 nm
Performance measures       measure       estimate       outcome       estimate       actual         Healthcare worker immunisation — influenza       per cent       75       nm       nm       nm         New performance measure for 2015-16 to reflect Government priorities regarding monitoring the rate of influenza immunisations for healthcare workers.       100       100       100       100         Hospitals participating in Victorian Hospital Acquired Infection Surveillance System (VICNISS)       per cent       100       100       100       100       100         Intensive Care Unit central line associated blood stream infections (CLABSI) per 1 000 device days       rate       ≤2.5       2.5       ≤2.5       0.7         Major trauma patients transferred to a major trauma service       The 2014-15 expected outcome is higher than the 2014-15 target due to a higher than anticipated percentage of major trauma patients being transferred to a major trauma service.         Perinatal morbidity notices       per cent       100       100       100       100         Perinatal morbidity notices       per cent       100       100       100       100
Healthcare worker immunisation — per cent influenza  New performance measure for 2015-16 to reflect Government priorities regarding monitoring the rate of influenza immunisations for healthcare workers.  Hospitals participating in Victorian per cent Hospital Acquired Infection Surveillance System (VICNISS)  Intensive Care Unit central line rate associated blood stream infections (CLABSI) per 1 000 device days  Major trauma patients transferred per cent to a major trauma service  The 2014-15 expected outcome is higher than the 2014-15 target due to a higher than anticipated percentage of major trauma patients being transferred to a major trauma service.  Perinatal morbidity notices per cent received, processed and reported
Influenza  New performance measure for 2015-16 to reflect Government priorities regarding monitoring the rate of influenza immunisations for healthcare workers.  Hospitals participating in Victorian per cent Hospital Acquired Infection Surveillance System (VICNISS)  Intensive Care Unit central line rate ≤2.5 2.5 ≤2.5 0.7 associated blood stream infections (CLABSI) per 1 000 device days  Major trauma patients transferred per cent 75 83.6 75 85.5 to a major trauma service  The 2014-15 expected outcome is higher than the 2014-15 target due to a higher than anticipated percentage of major trauma patients being transferred to a major trauma service.  Perinatal morbidity notices per cent 100 100 100 100  Political activities and the service of the ser
Hospitals participating in Victorian per cent Hospital Acquired Infection Surveillance System (VICNISS)  Intensive Care Unit central line rate associated blood stream infections (CLABSI) per 1 000 device days  Major trauma patients transferred per cent to a major trauma service  The 2014-15 expected outcome is higher than the 2014-15 target due to a higher than anticipated percentage of major trauma patients being transferred to a major trauma service.  Perinatal morbidity notices per cent 100 100 100 100  Public has it the service to the service of the
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(CLABSI) per 1 000 device days  Major trauma patients transferred per cent 75 83.6 75 85.5 to a major trauma service  The 2014-15 expected outcome is higher than the 2014-15 target due to a higher than anticipated percentage of major trauma patients being transferred to a major trauma service.  Perinatal morbidity notices per cent 100 100 100 100  The list have it the service of
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Dublic hard to be
Public hospitals meeting cleaning per cent 100 100 100 100 standards, as assessed by external
audit
Staphylococcus aureus rate ≤2 2 ≤2 0.9
bacteraemias (SAB) infections per
10 000 patient days
Unplanned/unexpected per cent 3.7 3.7 3.7 2.6
readmission for acute myocardial
infarction
Unplanned/unexpected per cent 10.3 10.3 8.7 readmission for heart failure
Unplanned/unexpected per cent 2.5 2.5 2.5 2.9 readmission for hip replacement
Unplanned/unexpected per cent 6 6 6 6.7
readmission for knee replacement
Unplanned/unexpected per cent 2.2 2.2 2.5
readmission for paediatric
tonsillectomy and adenoidectomy
Timeliness
Non-urgent (Category 3) elective per cent 94.5 92 94.5 90
surgery patients admitted within
365 days

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Semi-urgent (Category 2) elective surgery patients admitted within 90 days  The 2014-15 expected outcome is lower than elective surgery to the community.	per cent n the 2014-15 to	80 arget due to a foo	73 cus on delivering	80 urgent (catego	69 ory 1)
Urgent (Category 1) elective surgery patients admitted within 30 days	per cent	100	100	100	100
Cost					
Total output cost	\$ million	8531.9	7 943.6	7 910.9	7 520.1

The higher 2015-16 budget reflects funding for the implementation of policy initiatives announced in current and previous budgets as well as indexation.

The 2014-15 expected outcome reflects an increase in the Commonwealth's contribution to National Health Reform.

#### **Non-admitted Services**

Acute and sub-acute services provided at Victorian metropolitan and rural public hospitals. Access to high quality services allows the right care to be delivered at the right time in the right location. Non-admitted sub-acute services improve consumer access to services closer to home by providing models of integrated community care, which significantly reduces the demand for hospital beds and supports the transition from hospital to home in a safe and timely manner. The services improve health outcomes, particularly for older people and people with complex care needs.

people with complex care needs.					
Quantity					
Completed post-acute episodes	number	44 700	44 276	44 700	48 346
Health Independence Program direct contacts	number (000)	1 401	nm	nm	nm
New performance measure for 2015-16 to Independence Program which incorporates reflects the allocation of funding for these	activity across all				
Patients treated in Specialist	number	1 685	1 685	1 671	1 691
Outpatient Clinics – unweighted	(000)				

The higher 2015-16 target reflects the effect of anticipated growth in activity, and additional funding provided in the 2015-16 Budget.

Quality					
Post-acute clients not readmitted to acute hospital	per cent	90	90	90	93
Timeliness					
Health Independence Program clients contacted within three days of referral	per cent	80	nm	nm	nm

New performance measure for 2015-16 to reflect Government priorities regarding reporting on activity for the Health Independence Program which incorporates activity across all sub-acute ambulatory services programs and better reflects the allocation of funding for these services.

Total output cost  The higher 2015-16 target primarily reflec	\$ million	1 491.2	1 457.5	1 446.6	1 494.3
Performance measures Cost	measure measure	estimate	expected outcome	2014-15 estimate	2013-14 actual
Major outputs/deliverables	Unit of	2015-16	2014-15	2014 15	2012 14

## **Emergency Services**

These outputs relate to emergency presentations at reporting hospitals with emergency departments. These outputs aim to provide high quality, accessible health and community services, specifically in the area of improving waiting times for emergency services.

Quantity					
Emergency presentations	number (000)	1 653	1 613	1 592	1 571
The higher 2015-16 target reflects the effec 2015-16 Budget.	t of anticipated	growth in activity, o	and additional j	funding provide	d in the
Quality					
Number of occasions on Hospital Early Warning System (HEWS) The 2014-15 expected outcome is lower than	number n the 2014-15 t	11 388  arget, this is a posit	4 576 ive result.	11 388	4 119
Operating time on HEWS  The 2014-15 expected outcome is lower than The 2013-14 actual published in the Departr				10 minary result.	3.4
Time on hospital bypass  The 2014-15 expected outcome is lower that	per cent on the 2014-15 to	3 arget, this is a positi	2.2 ive result.	3	1.8
Timeliness					
Emergency Category 1 treated immediately	per cent	100	100	100	100
Emergency patients treated within time	per cent	80	74	80	75
The 2014-15 expected outcome is lower than presenting in emergency departments, howe showed improvement in sub-regional hospite departments are underway to improve patie	ever performand als. Changes rel	e remained compai	rable with the p	revious year an	d iency
Emergency patients with a length of stay of less than four hours  The 2014-15 expected outcome is lower than	per cent  the 2014-15 to	in time in compariso	on with the pre	vious year. Chai	nges
patients presenting in emergency departmer	in amargancy d		erway to impro	ve patient acce.	55.
patients presenting in emergency department relating to models of care and redesign with Proportion of ambulance patient transfers within 40 minutes	per cent	90	87	90	84.1
patients presenting in emergency department relating to models of care and redesign with Proportion of ambulance patient	in emergency d		87	90	84.1

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Acute Training and Development**

Provision of grants to hospitals for the training and accreditation of health workers. These outputs aim to provide career opportunities and contribute towards a stable and accredited workforce in the health sector in Victoria.

Quantity	CDA ACTION AND ACTION ACTION AND ACTION ACTION AND ACTION ACTION AND ACTION ACTI				
Clinical placement student days for medicine, nursing and allied health	number	993 960	971 935	993 960	nm
Number of filled rural generalist GP procedural positions	number	11	19	11	14
The 2014-15 expected outcome is higher tha	n the 2014-15 to	arget due to the c	continuing imple	mentation of init	iatives.
Percentage of public health services utilising the Best Practice Clinical Learning Environment (BPCLE) tool	per cent	80	95	80	nm
The 2014-15 expected outcome is higher that Practice Clinical Learning Environment tool b tool.					
Post graduate nursing places at Diploma and Certificate level	number	832	832	832	832
Total FTE (early graduate) allied health positions in public system	number	681	661	716	679
The 2014-15 expected outcome is lower thar previous years. Data on the number of positi The lower 2015-16 target takes into account	ons is now collec	cted annually to i	verestimation of improve the acc	required position uracy of this med	ns in asure.
Total FTE (early graduate) medical positions in public system	number	1 427.5	1 431.5	1 413.5	1 392
The higher 2015-16 target is a result of conti	nuing impiemen	itation oj initiativ	res.		
Total FTE (early graduate) nursing positions in public system	number	1 455	1 455	1 455	1 468
Cost			•		
Total output cost	\$ million	306.5	281.2	295.5	275.6

#### **Ambulance Services**

Ambulance Services outputs describe the units of activity for emergency and non-emergency ambulance services under the new funding model introduced 1 July 2014 including a range of performance deliverables that measure the quality and timeliness of ambulance services expected over the period. The quality and timeliness measures identify expected clinical output measures and ambulance response times, which are important to ensure critically ill Victorians receive the care they need.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Ambulance Emergency Services**

Emergency road, rotary and fixed air wing patient treatment and transport services provide timely and high quality emergency ambulance services. Timely and high quality emergency ambulance services contribute to high quality, accessible health and community services for all Victorians.

Quantity					
Community Service Obligation emergency road and air transports  This performance measure is proposed to recard-holder cases'. The performance measure	number eplace the 2014-1 re aligns with the	230 352 15 performance me e new Ambulance V	nm asure 'Pensioner lictoria funding n	nm and concessio	nm
Statewide emergency air transports  This performance measure is proposed to re performance measure aligns with the new A	place the 2014-1	4 189 5 performance media funding model.	nm asure 'Statewide	nm air cases'. The	nm
Statewide emergency road transports  This performance measure is proposed to coand 'Country road cases'. The performance is	number onsolidate the 20 measure aligns w	401 720  14-15 performance vith the new Ambul	nm measures 'Metr ance Victoria fun	nm opolitan road ( ding model.	nm cases'
Treatment without transport  New performance measure for 2015-16 to a	number lign with the new	86 001 v Ambulance Victor	nm ia funding mode	nm	nm
Quality					
Audited cases attended by Community Emergency Response Teams (CERT) meeting clinical practice standards	per cent	90	90	90	94.9
Audited cases statewide meeting clinical practice standards	per cent	95	95	95	98.6
Proportion of adult VF/VT cardiac arrest patients with vital signs at hospital  This performance measure renames the 201.	per cent	45	51.1	45	52.9

This performance measure renames the 2014-15 performance measure 'Percentage of adult VF/VT cardiac arrest patients with vital signs at hospital'. The performance measure reports on the same activity as the previous measure however has been amended for increased clarity.

The 2014-15 expected outcome is higher than the 2014-15 target due to improved clinical performance.

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Proportion of adult patients suspected of having a stroke who were transported to a stroke unit with thrombolysis facilities within 60 minutes	per cent	80	86.4	80	85.5

This performance measure renames the 2014-15 performance measure 'Percentage of adult patients suspected of having a stroke who were transported to a stroke unit with thrombolysis facilities within 60 minutes'. This new measure reports on the same activity as the previous measure however has been amended for increased clarity.

The 2014-15 expected outcome is higher than the 2014-15 target due to improved clinical performance.

Proportion of patients experiencing severe cardiac or traumatic pain whose level of pain is reduced significantly	per cent	90	92.2	90	91.6
Proportion of patients very satisfied or satisfied with overall services delivered by paramedics	per cent	95	97	95	97
Timeliness  CERT arrival occurs prior to ambulance	per cent	85	83.6	85	85
Proportion of emergency (Code 1) incidents responded to within 15 minutes – statewide	per cent	85	73.5	85	73.7

The 2014-15 expected outcome is lower than the 2014-15 target due to a range of interrelated factors including growing incident demand, case complexity and hospital transfer times. This performance measure is subject to review in 2015-16 as identified in the Ambulance Performance and Policy Committee's interim report.

Proportion of emergency (Code 1) per cent 90 79 90 78.5 incidents responded to within 15 minutes in centres with more than 7 500 population

The 2014-15 expected outcome is lower than the 2014-15 target due to a range of interrelated factors including growing incident demand, case complexity and hospital transfer times. This performance measure is subject to review in 2015-16 as identified in the Ambulance Performance and Policy Committee's interim report.

Cost

Total output cost \$ million 623.6 602.4 579.9 541.9

The higher 2015-16 target primarily reflects funding for government policy commitments.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Ambulance Non-Emergency Services**

Non-emergency road, rotary and fixed air wing patient treatment and transport services provide access to timely, high quality non-emergency ambulance services. High quality non-emergency ambulance services contribute to high quality, accessible health and community services for all Victorians. The output supports departmental priorities through provision of patient transport officers to service non-emergency, pre and post hospital patients.

Quantity				***************************************	•
Community Service Obligation non-emergency road and air transports	number	178 790	nm	nm	nm
This performance measure is proposed to re holders transported'. The performance med	eplace the 2014-2 asure aligns with	15 performance me the new Ambulanc	easure 'Pension e Victoria fundi	er and concessi ng model.	on card
Statewide non-emergency air transports	number	2 959	nm	· nm	nm
This performance measure is proposed to re performance measure aligns with the new r	eplace the 2014-1 Ambulance Victor	15 performance me ia funding model.	easure 'Statewic	de air cases'. Th	e
Statewide non-emergency road transports	number	261 428	nm	nm	nm
This performance measure is proposed to co and 'Country road cases'. The performance	onsolidate the 20 measure aligns w	14-15 performance with the new Ambu	e measures 'Me lance Victoria fo	tropolitan road unding model.	'cases'
Quality					
Audited cases statewide meeting clinical practice standards	per cent	95	95	94	98.7
The higher 2015-16 target reflects current s with the performance measure 'Audited cas Emergency Services output.	ervice levels that es statewide mee	have consistently of the consistent of the consistency of the	exceeded the ta ce standards' in	rget. This targe the Ambulance	et aligns e
Cost	NAME OF THE PARTY			*	******
Total output cost  The 2014-15 expected outcome is lower than Services output to reflect the new Ambulance	\$ million n the 2014-15 tar te Victoria fundin	113.0 get due to a transj a model.	109.4 fer to the Ambu	116.6 lance Emergen	100.2
The lower 2015-16 target reflects the transfinew Ambulance Victoria funding models.		=	ergency Services	output to refle	ect the

#### **Mental Health**

Mental Health outputs, including the provision of a range of inpatient, community-based residential and ambulatory services which treat and support people with a mental illness and their families and carers, identifying mental illness early, and seeking to reduce its impact through providing timely acute care services and appropriate longer-term accommodation and support for those living with a mental illness.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### **Clinical Care**

A range of inpatient, residential and community-based clinical services provided to people with mental illness, and their families so that those experiencing mental health problems can access timely, high quality care and support to recover and live successfully in the community.

Quantity					
Clinical inpatient separations  The 2014-15 expected outcome is higher that beds.	number in the 2014-15 tai	21 260 get due to susta	22 800 ined high demo	21 260 and for acute in	22 028 patient
Community service hours	number (000)	1 080	1 006	1 047	971
The higher 2015-16 target reflects additiona	l funding provided	d in the 2015-16	Budget.		
New case index	per cent	50	50	50	48
Registered community clients  The 2014-15 expected outcome is higher the mental health services.	number on the 2014-15 tai	64 000 rget due to conti	64 000 nued high dem	60 000 and for commu	63 466 nity and
The higher 2015-16 target reflects the effect	t of anticipated gr	owth in activity.			
Residential bed days  The lower 2015-16 target reflects the realignaged residential beds.	number nment of bed days	181 730 s between reside	192 000 ntial and sub-a	200 750 cute and the cl	361 538 osure of
Sub-acute bed days  The 2014-15 expected outcome is lower tha  sub-acute bed days.  The lower 2015-16 target reflects a realignr					
new prevention and recovery care services of	pened in 2014-15	).	•		ar ejject oj
new prevention and recovery care services of Quality	ppened in 2014-15	5.			ar ejject oj
	pened in 2014-15	14	14	14	
Quality Clients readmitted (unplanned)	opened in 2014-15	5.			14 45

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Post-discharge community care	per cent	75	85	75	85
The 2014-15 expected outcome is higher than	n the 2014-15 to	arget due to serv	ices improving p	performance.	
Pre-admission community care	per cent	60	58	60	56
Seclusions per 1 000 occupied bed	number	43	nm	nm	nm
days					
New performance measure for 2015-16 to regunder the Mental Health Act 2014.	flect Governme	nt priorities rega	rding the new le	gislative frame	work
Timeliness					
Emergency patients admitted to a	per cent	80	70	80	70
mental health bed within eight					
hours					
The 2014-15 expected outcome is lower than volume metropolitan emergency department		rget due to the h	igh number of p	resentations in	large
Cost					
Total output cost	\$ million	1 182.7	1 111.7	1 140.3	1 059.1
The higher 2015-16 target primarily reflects f	unding for gove	rnment policy co	ommitments.		

## **Mental Health Community Support Services (MHCSS)**

A range of rehabilitation and support services provided to youth and adults with a psychiatric disability, and their families and carers, so that those experiencing mental health problems can access timely, high quality care and support to recover and reintegrate into the community.

Quantity					
Bed days	number	87 000	71 200	87 000	86 085
The 2014-15 expected outcome is lower than transition to a new model and providers.	the 2014-15 to	arget due to repor	ting and data co	ompliance and t	he
Client Support Units	number	783 100	487 900	783 100	nm
The 2014-15 expected outcome is lower than challenges arising from adjustments within th		-	e provider data	system and rep	orting
Clients receiving community mental health support services	number	12 600	12 600	12 600	12 350
Quality					
Proportion of major agencies accredited	per cent	100	100	100	100
Cost					
Total output cost	\$ million	126.3	131.0	120.2	116.9
The 2014-15 expected outcome is higher than policy commitments.	the 2014-15 t	arget which reflec	ts funding provi	ided for governr	nent

The higher 2015-16 target primarily reflects funding for government policy commitments.

## Ageing, Aged and Home Care

Ageing, Aged and Home Care outputs encompass leading and coordinating the whole of government policy on issues affecting our ageing community. It includes a range of in home, specialist geriatric, residential care and community based programs, such as Home and Community Care (HACC), that are targeted to older people, people with a disability, and their carers.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

### **Seniors Programs and Participation**

Support broader community planning processes to facilitate an integrated community planning and response approach aimed at encouraging older Victorians to fully participate and engage in the community.

Quantity					
New University of the Third Age (U3A) programs funded	number	45–60	57	45–60	65
Number of hits on Seniors Online cost savings information pages	number	40 000	60 000	40 000	nm

The 2014-15 expected outcome is higher than the 2014-15 target due to additional mail outs to seniors highlighting the availability of this information, which has resulted in an increased number of hits.

Seniors funded activities and	number	140-160	152	110-130	143
programs: number approved					

The 2014-15 expected outcome is higher than the 2014-15 target due to a higher number of small grants in programs other than the Seniors Participation Action Plan.

The higher 2015-16 target reflects Seniors Participation Action Plan funding.

Quality					
Eligible seniors in the seniors card program	per cent	95	95	95	95
Senior satisfaction with Victorian Seniors Festival events	per cent	90	90	90	100
Cost					
Total output cost	\$ million	9.0	10.1	6.8	8.0

The 2014-15 expected outcome is higher than the 2014-15 target due to additional expenditure on the Seniors Card, Companion Card, Seniors Community programs and Elder Abuse Prevention Project.

The higher 2015-16 target primarily reflects funding for government policy commitments.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Residential Aged Care**

This output includes delivery of services for older Victorians requiring ongoing care and support in a residential aged care setting.

Quantity					*
Available bed days	days	1 193 995	1 236 184	1 259 082	nm
The lower 2015-16 target reflects the effect provider and some services temporarily taki Program.			•	-	
Standard Equivalent Value Units  The lower 2015-16 target reflects the effect provider and some services temporarily taking Program.			•	_	
Quality					
Residential care services certified and accredited	per cent	100	100	100	100
Cost					
Total output cost	\$ million	333.2	330.0	333.4	327.2

## **Aged Care Assessment**

This output includes delivery of comprehensive assessment of older Victorians requirements for treatment and residential aged care services.

Quantity					
Aged Care Assessments	number	59 000	59 000	59 000	60 070
Timeliness					
Percentage of priority 1, 2 and 3 clients assessed within the appropriate time — community-based assessment	per cent	85	88	85	89.3
Percentage of priority 1, 2 and 3 clients assessed within the appropriate time – hospital-based assessment	per cent	85	99	85	99.7

The 2014-15 expected outcome is higher than the 2014-15 target due to assessment staff prioritising hospital referrals to support patient flow.

Cost					
Total output cost	\$ million	60.4	57.1	55.7	54.0
The higher 2015-16 target is primar	ily due to additional Cor	mmonwealth fundin	g and indexation		

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Aged Support Services**

This output includes delivery of a range of community services that support older Victorians and their carers, such as respite services, EyeCare services, Personal Alert Victoria, and pension-level Supported Residential Services.

Quantity	CALLANDO MACA				
Individuals provided with respite and support services	number	8 254	8 254	8 254	8 886
Number of hours of respite and support services	hours	161 250	161 250	161 250	156 208
Pension-level Supported Residential Services residents provided with service coordination and support/brokerage services	number	775	775	775	775
Pension-level beds available in assisted Supported Residential Services facilities	number	1 876	1 876	1 876	1 876
Personal alert units allocated	number	27 370	27 370	27 255	27 355
Victorian EyeCare Service (occasions of service)	number	75 800	75 800	75 800	77 899
Quality					
Funded research and service development projects for which satisfactory reports have been received	per cent	100	100	100	100
Cost		100			
Total output cost	\$ million	111.2	95.8	99.8	93.6

The higher 2015-16 target is primarily due to funding for the Social and Community Services Equal Remuneration Order and indexation.

## **HACC Primary Health, Community Care and Support**

This output includes delivery of a range of community based nursing, allied health and support services enabling frail, older people and younger people with disabilities to maintain their independence in the community. This includes Home and Community Care (HACC) services.

Quantity					
Clients receiving Home and	number	317 600	300 000	300 000	304 499
Community Care services					
The higher 2015-16 target reflects addition	nal funding provi	ided in the 2015-16	Budget.		

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Home and Community Care service delivery hours	number (000)	10 729	11 700	11 700	11 655
The lower 2015-16 target reflects an increase reduced the number of services provided with			e for three cont	ributing activiti	es, which
Standard Equivalent Value Units	number (000)	6 249	6 141	6 141	5 992
The higher 2015-16 target reflects additional	funding provide	ed in the 2015-10	6 Budget.		
Quality				*****	
Eligible population receiving Home and Community Care services	per cent	30	30	30	33.2
Cost					***************************************
Total output cost	\$ million	774.9	734.2	707.9	675.0
The higher 2015-16 target is primarily due to Order, additional Commonwealth contribution			nunity Services I	Equal Remuner	ation

## **Primary, Community and Dental Health**

Primary, Community and Dental Health outputs, through the provision of a range of in home, community based, community, primary health and dental services designed to promote health and wellbeing and prevent the onset of more serious illnesses.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Community Health Care**

This output includes delivery of a range of community care and support services, including

counselling, allied health and nursing, the community.	that enable	people to co	ontinue to li	ve indepen	dently in
Quantity	AND				
Better Health Channel visits	number (000)	40 000	52 624	33 000	48 731
The 2014-15 expected outcome is higher than past two years. The higher 2015-16 target reflects the effect o				isation underto	aken in the
Number of referrals made using secure electronic referral systems	number	250 000	250 000	250 000	343 555
Primary Care Partnerships with reviewed and updated Strategic Plans	per cent	100	100	100	100
Rate of admissions for ambulatory care sensitive chronic conditions for Aboriginal Victorians	rate	30.9	23	30.9	nm
The 2014-15 expected outcome is lower than performance measure and the Australian Bur population.					

Service delivery hours in community health care  The 2013-14 actual published in the Depar	number (000) tment of Health	988 Annual Report 2013	988 3-14 was a prelir	988 minary result.	1 081
Standard Equivalent Value Units	number (000)	1 061	1 061	1 038	1 136

The higher 2015-16 target is due to a correction of the target published in the 2014-15 Budget.

The 2013-14 actual published in the Department of Health Annual Report 2013-14 was a preliminary result.

The higher 2015-16 target primarily reflects t	•			ents.	
Total output cost	\$ million	244.5	243.2	235.8	231.8
Cost					
Promotion plan that meets the stipulated planning requirements					
Agencies with an Integrated Health	per cent	95	95	95	94
Quality					

2015-16 Service Delivery

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### **Dental Services**

This output includes delivery of a range of dental health services to support health and wellbeing in the community.

Quantity					
Persons treated	number	332 150	340 000	365 000	407 442
The 2014-15 expected outcome is lower	than the 2014-15 t	arget due to the d	eferral of the No	ational Partner.	ship
Agreement on Adult Public Dental Servi					
the Commonwealth's introduction of th	e Child Dental Bene	fit Schedule.	-		-

The lower 2015-16 target excludes proposed new funding under the National Partnership Agreement for Adult Public Dental Services as negotiations with the Commonwealth have not yet commenced at time of publication and the current National Partnership Agreement on Treating More Public Dental Patients is lapsing.

Standard Equivalent Value Units	number	1 413	1 446	1 553	1 733
	(000)				

The lower 2015-16 target excludes proposed new funding under the National Partnership Agreement for Adult Public Dental Services as negotiations with the Commonwealth have not yet commenced at time of publication and the current National Partnership Agreement on Treating More Public Dental Patients is lapsing.

Quality					
Ratio of emergency to general courses of dental care	rate	40:60	40:60	40:60	38:62
Timeliness.					
Waiting time for dentures	months	22	13	11	10.9

The 2014-15 expected outcome is lower than the 2014-15 target due to the deferral of the National Partnership Agreement on Adult Public Dental Services and changes in the service profile of the State's dental program following the Commonwealth's introduction of the Child Dental Benefit Schedule.

The higher 2015-16 target excludes proposed new funding under the National Partnership Agreement for Adult Public Dental Services as negotiations with the Commonwealth have not yet commenced at time of publication and the current National Partnership Agreement on Treating More Public Dental Patients is lapsing.

Waiting time for restorative dental	months	23	13	13	12.4
care					

The higher 2015-16 target excludes proposed new funding under the National Partnership Agreement for Adult Public Dental Services as negotiations with the Commonwealth have not yet commenced at time of publication and the current National Partnership Agreement on Treating More Public Dental Patients is lapsing.

Cost				
Total output cost	\$ million <b>207</b> .	<b>8</b> 228.7	226.4	235.3

The lower 2015-16 target excludes proposed new funding under the National Partnership Agreement for Adult Public Dental Services as negotiations with the Commonwealth have not yet commenced at time of publication and the current National Partnership Agreement on Treating More Public Dental Patients is lapsing.

#### **Small Rural Services**

Small Rural Services includes a range of health and aged care services delivered in small rural towns. The funding and service delivery approach focuses on achieving a sustainable, flexible service mix that is responsive to local needs. Service providers include small rural hospitals, community health services, bush nursing centres, multi-purpose services and public sector residential aged care services.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### Small Rural Services - Acute Health

Admitted and non-admitted services delivered by small rural services, including elective and non-elective surgical and medical care, accident and emergency services, and maternity services.

Quantity					
Separations	number	41.6	36.9	41.6	39
	(000)				

The 2014-15 expected outcome is lower than the 2014-15 target due to the permissible substitution of acute, aged and home care, primary health services and other services (not captured by these measures) under the Small Rural Health Services funding model. This approach allows the flexibility to deliver services required to meet local needs.

This performance measure is likely to be discontinued and replaced with a new measure in 2016-17 following the outcome of the Small Rural Health Service funding model review.

Standard Equivalent Value Units	number	1 298	1 189	1 298	1 356
	(000)				

The 2014-15 expected outcome is lower than the 2014-15 target due to the permissible substitution of acute, aged and home care, primary health services and other services (not captured by these measures) under the Small Rural Health Services funding model. This approach allows the flexibility to deliver services required to meet local needs.

This performance measure is likely to be discontinued and replaced with a new measure in 2016-17 following the outcome of the Small Rural Health Service funding model review.

Weighted Inlier Equivalent	number	25.7	23.7	25.7	24
Separations (WIES)	(000)				

The 2014-15 expected outcome is lower than the 2014-15 target due to the permissible substitution of acute, aged and home care, primary health services and other services (not captured by these measures) under the Small Rural Health Services funding model. This approach allows the flexibility to deliver services required to meet local needs.

This performance measure is likely to be discontinued and replaced with a new measure in 2016-17 following the outcome of the Small Rural Health Service funding model review.

outcome of the Small Rural Heal	th Service funding model re	eview.			
Quality					
Beds accredited	per cent	100	100	100	100
This performance measure is like outcome of the Small Rural Heal			measure in 201	6-17 following	the
Cost					
Total output cost	\$ million	334.5	316.7	322.0	297.6

The higher 2015-16 target primarily reflects funding provided for government policy commitments and indexation.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Small Rural Services - Aged Care**

This output includes delivery of in home, community based and residential care services for older people, delivered in small rural towns.

Quantity					
Small Rural Available Bed Days  The higher 2015-16 target reflects the re-op a flood.	days pening of 13 aged	706 200 d care places at C	703 847 harlton which h	703 307 ave been rebuil	nm t following
Standard Equivalent Value Units  The higher 2015-16 target reflects the re-op a flood.	number pening of 13 aged	354 033 I care places at C	345 005 harlton which h	353 676 ave been rebuil	317 152 t following
Quality					
Residential care services certified and accredited	per cent	100	100	100	100
Cost					
Total output cost  The higher 2015-16 target primarily reflects	\$ million funding provided	<b>189.4</b> d for indexation.	185.5	186.9	181.5

## **Small Rural Services – Home and Community Care Services**

This output includes delivery of in home, community based care services for older people, and younger people with disabilities delivered by small rural services.

Quantity					
Home and Community Care service delivery hours The lower 2015-16 target reflects an increa reduced the number of services provided wi	se in the Commo		758 000	758 000 ributing activiti	763 300 es, which
Standard Equivalent Value Units The higher 2015-16 target reflects the full y	number rear effect of fund	347 000 ling provided in p	342 000 revious budgets	342 000	345 248
Cost					
Total output cost	\$ million	33.8	34.3	33.3	34.1

#### **Small Rural Services – Primary Health**

This output includes delivery of in home, community-based community and primary health services delivered by small rural services and designed to promote health and wellbeing and prevent the onset of more serious illness.

Quantity					
Service delivery hours in	number	99 000	99 000	99 000	85 317
community health care					
The 2013-14 actual published in the Departi	ment of Health	Annual Report 2013	-14 was a preli	minary result.	

		2014-15		
Unit of	2015-16	expected	2014-15	2013-14
measure	estimate	outcome	estimate	actual
number	104 000	104 000	104 000	89 253
ment of Health A	nnual Report 20	13-14 was a pre	liminary result.	
A CONTRACTOR OF THE CONTRACTOR				
\$ million	21.0	20.3	17.9	17.3
rants to non-gove	ernment organis	ations and index	xation.	
	measure number ment of Health A \$ million	measure estimate number 104 000 ment of Health Annual Report 20  \$ million 21.0	Unit of 2015-16 expected measure estimate outcome number 104 000 104 000 ment of Health Annual Report 2013-14 was a pre	Unit of 2015-16 expected 2014-15 measure estimate outcome estimate number 104 000 104 000 104 000 ment of Health Annual Report 2013-14 was a preliminary result.

### **Public Health**

Public Health outputs encompass services and support, including screening for health conditions and safety inspections, that promote and protect the health and wellbeing of all Victorians. These services are delivered in partnership with key stakeholders and communities.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### **Health Protection**

Protects the health of Victorians through a range of prevention programs including regulation, surveillance and the provision of statutory services.

Quantity					
Calls to food safety hotlines	number	4 500	4 500	4 500	4 628
Inspections of cooling towers	number	1 250	1 700	1 000	1 657

The 2014-15 expected outcome is higher than the 2014-15 target due to an increased number of inspections of disused cooling tower sites, which are less time intensive and have enabled a higher number of inspections to be conducted.

The higher 2015-16 target reflects anticipated activity for inspections.

Inspections of radiation safety management licences	number	480	480	480	388
Number of available HIV rapid test trial appointments used	number	2 688	2 688	2 688	nm
Number of built, demountable and natural shade projects funded under the Shade Grants Program	number	60	50	40	nm

The 2014-15 expected outcome is higher than the 2014-15 target due to the accelerated roll-out of the Program. The higher 2015-16 target reflects additional funding provided in the 2015-16 Budget.

Persons screened for prevention	number	243 000	240 000	230 000	230 157
and early detection of health					,
conditions - breast cancer					
screening					

The higher 2015-16 target reflects additional breast screens performed due to the National Partnership on the Expansion of the BreastScreen Australia Program.

Persons screened for prevention and early detection of health conditions – cervical cancer screening	number	570 000	566 000	570 000	565 754
Persons screened for prevention and early detection of health conditions – newborn and maternal serum screening	number	80 000	80 000	80 000	79 309

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Persons screened for prevention and early detection of health conditions — pulmonary tuberculosis screening  The lower 2015-16 target reflects the long-ten	number rm average nu	2 000 umber of screening	2 500 gs conducted ea	2 500 ch year.	1 225
Quality					
Calls to food safety hotlines that are answered  The higher 2015-16 target reflects improvements	per cent	97 one systems allow	96 ing for greater t	96 riage of calls re	98.2 eceived.
Immunisation coverage: adolescent (Year 10) students fully immunised for DTPa (diphtheria, tetanus and pertussis)	per cent	80	80	80	84
Immunisation coverage: At 65+ years of age (influenza)	per cent	80	80	80	80
Immunisation coverage: At school entry	per cent	95	92	95	93
Immunisation coverage: At two years of age	per cent	95	93	95	92
Public Health emergency response calls dealt with within designated plans and procedure timelines	per cent	100	100	100	100
Timeliness  Average time taken from notification of a food complaint to commencement of appropriate action	hours	24	24	24	24
Infectious disease outbreaks responded to within 24 hours	per cent	100	100	100	100
Target population screened within specified timeframe for breast cancer	per cent	54	54	54	54.5
Target population screened within specified timeframe for cervical cancer	per-cent	62	62	62	61.1
Cost  Total output cost  The higher 2015-16 target primarily reflects	\$ million funding provid		236.1 nt policy commit	231.3 tments.	212.1

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

#### **Health Advancement**

Improves the general health and wellbeing of Victorians through the provision of community information and the fostering of healthy behaviours.

Quantity					
Persons completing the Life! — Diabetes and Cardiovascular Disease Prevention program The 2014-15 expected outcome is higher than program.	number on the 2014-15 targ	5 616 get due to contin	6 376	5 616	8 225
Workplaces and pubs and clubs complying with smoke free environment laws	per cent	99	99	99	99
Quality					
Local Government Authorities with Municipal Public Health and Wellbeing Plans	per cent	100	100	95	100
The 2014-15 expected outcome is higher than	the 2014-15 targ	et due to all cou	ncils having nov	v adopted their	

The 2014-15 expected outcome is higher than the 2014-15 target due to all councils having now adopted their Municipal Public Health and Wellbeing Plan for 2013-17. The next planning cycle will occur in 2017.

The higher 2015-16 target reflects this activity.

Cost

Total output cost \$ million 68.4 81.7 87.5 81.1

The lower 2015-16 target primarily reflects the cessation of the National Partnership Agreement on Preventive Health.

#### Public Health Development, Research and Support

Develops and advocates for research and development activities, which support evidence based public health policies.

The lower 2014-15 expected outcome reflects realignments within the Public Health Output group.

Quantity					
Number of people trained in emergency response	number	2 000	2 000	2 000	1 997
Operational infrastructure support grants under management	number	11	11	11	12

This performance measure is transferred directly from the 'Innovation and Technology' output of the former Department of State Development, Business and Innovation.

 Cost
 \$ million
 35.1
 12.1
 10.1
 11.6

The higher 2015-16 target reflects the transfer of funding for Biomedical Research as a result of the Machinery of Government changes.

The higher 2014-15 expected outcome reflects additional funding for the Streamlining Ethical Review program.

## **Drug Services**

Drug Services outputs include programs and services aimed at promoting and protecting health by reducing death, disease and social harm caused by the use and misuse of licit and illicit drugs.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Drug Prevention and Control**

Encourages all Victorians to minimise the harmful effects of illicit and licit drugs, including alcohol, by providing a comprehensive range of strategies, which focus on enhanced community and professional education, targeted prevention and early intervention, and the use of effective regulation.

Quantity					
Contacts through Family Drug Help The 2014-15 expected outcome is higher than coverage (including the 'What are you doing		•	• .		5 514 media
Licences and permits issued to health services or businesses for the manufacture, use or supply of drugs and poisons	number	1 425	1 460	1 425	1 433
Needles and syringes provided through the Needle and Syringe Program	number (000)	8 800	8 800	8 800	8 903
Number of telephone, email, website contacts and in person responses to queries and requests for information on alcohol and drug issues (through the Australian Drug Foundation)	number	950 000	1 210 500	450 000	1 031 696

The 2014-15 expected outcome is higher than the 2014-15 target due to heightened public awareness and media coverage (including the 'What are you doing on Ice' campaign) of drug issues and available services.

The lower 2015-16 target reflects the effect of anticipated growth in activity.

Treatment permits issued to	number	48 000	45 000	54 000	43 445
medical practitioners or nurse					
practitioners to prescribe					
Schedule 8 drugs, including					
pharmacotherapy					

The 2014-15 expected outcome is lower than the 2014-15 target due to changes made to the processing of permits (including issuing permits with extended expiry dates) resulting in fewer renewals and a decrease in the total number of permit applications.

The lower 2015-16 target reflects these changes occurring during 2014-15.

Total output cost  The higher 2015-16 target reflects addition	\$ million	33.8	28.8	28.6	26.4
Cost					
Quality  Pharmacotherapy permits  processed within designated timeframe	per cent	100	98	100	97
Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual

## **Drug Treatment and Rehabilitation**

Assists the community and individuals to control and reduce the harmful effects of illicit and licit drugs, including alcohol, in Victoria through the provision of community based non-residential and residential treatment services, education and training, and support services.

			<del>-</del> -		
Quantity					
Clients on the pharmacotherapy program	number	14 000	14 000	14 000	13 961
Commenced courses of treatment: community-based drug treatment services	number	6 755	20 429	6 455	41 674
The higher 2015-16 target reflects the effect 2014-15 expected outcome is higher than the and data definitions. The data quality has be data collection stabilises.	e 2014-15 targe	et due to the intro	duction of new	reporting requi	
Commenced courses of treatment: residential-based drug treatment services	number	6 062	6 062	6 062	6 803
Number of Drug Treatment Activity Units (DTAUs) The 2014-15 expected outcome is lower than non-residential treatment services.	number the 2014-15 ta	67 394 irget due to delay:	53 900 s in recommission	67 394	nm
Number of new residential withdrawal clients  The 2014-15 expected outcome is lower than referral introduced in 2014.	number the 2014-15 ta	2 200	2 000 errangements fo	2 200 or intake, assess	2 310
Residential bed days  The 2014-15 expected outcome is higher that discharged cases are not being closed out. The be adjusted when compliance with the data is	ne data quality h	nas been improvin			
Quality					

The 2014-15 expected outcome is lower than the 2014-15 target due to increased client acuity and the transition to the new drug treatment system.

per cent

Percentage of new clients to

existing clients

50

45.26

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Percentage of residential rehabilitation courses of treatment greater than 65 days	per cent	50	50	50	36.92
Successful courses of treatment (episodes of care): community-based drug treatment services The 2014-15 expected outcome is higher than non-residential treatment services.	number on the 2014-15 to	5 868 arget due to dela	8 295 ys in recommiss	5 868	42 557
Successful courses of treatment (episodes of care): residential-based drug treatment services	number	5 636	5 636	5 636	5 541
Trained alcohol and drug workers	per cent	85	85	85	67
Timeliness  Average working days between screening of client and commencement of	days	3	1	3	1
community-based drug treatment The 2014-15 expected outcome is lower than Register, this is a positive result.	the 2014-15 ta	rget due to impr	oved manageme	ent of the Bed \	/acancy
Average working days between screening of client and commencement of residential-based drug treatment  The 2014-15 expected outcome is lower than Register, this is a positive result.	days the 2014-15 to	6 irget due to impr	3  oved management	6 ent of the Bed \	5 /acancy
Cost	-		·		
Total output cost  The higher 2015-16 target is primarily due to Services Equal Remuneration Order and inde:		147.5 ed for the Ice Act	143.1 ion Plan, the So	136.5 cial and Comm	127.7 unity

## **Disability Services**

The Disability Services output, through the provision of continuing care and support services for people with disabilities, their carers and their families, aims to make a positive difference for Victorians experiencing disadvantage and provide excellent community services to meet clients' needs.

This output provides:

- programs and resources that enable clients with a disability to exercise choice and control through the use of packages of individualised funding;
- specialised support for people with a disability and resources and programs that build capacity to respond to the needs of people with a disability; and
- bed and facility-based services characterised by the bundling of accommodation services and disability support.

This output supports the Department's capabilities and participation and quality of life objectives.

objectives.					
Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actua
<b>Disability Services</b>					
Quantity					
Clients accessing aids and equipment  The 2015-16 target includes an estimated 50 Insurance Scheme.	number 00 clients who a	30 307  Tre being support	30 307 red through the I	30 307 National Disabil	29 119
Clients in residential institutions The 2014-15 expected outcome is lower than new entrants. The lower 2015-16 target reflects the planne Services to Supported Accommodation by Ju	ed transition of .				
Clients receiving case management services  The 2015-16 target includes 86 clients receive National Disability Insurance Scheme.	number	5 300 e management v	5 300 who are being su	5 300	5 435 h the
Clients receiving individualised support  The higher 2015-16 target reflects funding pand includes the 853 clients who are being st					14 593 packages
Hours of community-based respite  The 2014-15 expected outcome is higher that clarification of counting rules that have been			ncreased focus o	1 000 000	

Number of respite days	number	101 475	105 000	96 000	111 006
Performance measures	measure	estimate	outcome	estimate	actual
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
			2014-15		

The 2014-15 expected outcome is higher than the 2014-15 target due to an increased focus on reporting and clarification of counting rules that have been implemented in the past 12 months.

The higher 2015-16 target reflects the addition of three growth facilities and includes an estimated 10 950 days of respite being delivered through the National Disability Insurance Scheme trial.

Number of supported	number	5 141	5 112	5 112	5 041
accommodation beds					

The 2014-15 expected outcome includes 212 beds delivered through the National Disability Insurance Scheme trial.

The higher 2015-16 target reflects additional capacity funded in the 2013-14 Budget. The 2015-16 target includes 219 beds delivered through the National Disability Insurance Scheme trial.

Quality	S. No.				
Clients satisfied with the aids and equipment services system	per cent	85	85	85	90
Clients who have had a comprehensive health status review	per cent	90	90	90	98
Organisations that have successfully completed a quality review (accommodation supports)	per cent	95	95	95	100
Organisations that have successfully completed a quality review (client services and capacity)	per cent	95	95	95	100
Organisations that have successfully completed a quality review (individualised supports)	per cent	95	95	95	96
Support plans reviewed at least once during each period of three years commencing from when the support plan was first prepared (accommodation supports)	per cent	100	100	100	98.8
Support plans reviewed at least once during each period of three years commencing from when the support plan was first prepared (individualised supports)	per cent	100	95	100	100
Support plans reviewed every 12 months for persons residing in residential institutions	per cent	100	100	100	99
Timeliness					
Applications for aids and equipment acknowledged in writing within 10 working days	per cent	90	90	90	97

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actua
Proportion of clients whose support is commenced within departmental timelines  The 2014-15 expected outcome is higher than delivery of services.	per cent	85	99	85	96
Support plans prepared within 60 days of the person commencing to regularly access the disability services (accommodation supports)	per cent	100	100	100	100
Support plans prepared within 60 days of the person commencing to regularly access the disability services (individualised supports)	per cent	100	100	100	98
Supported accommodation occupancy rate	per cent	95	95	95	97
Cost					
Total output cost	\$ million	1 780.0	1 671.0	1 677.3	1 573.5

Disability Services output cost also captures Victoria's contribution to the National Disability Insurance Scheme trial, operating in the Barwon area.

The higher 2015-16 target primarily reflects additional government investment provided in the 2015-16 Budget to support people with disabilities and their families, the impact of the social and community services pay equity case and the full year effect of prior year initiatives.

# **Child Protection and Family Services**

The Child Protection and Family Services output, through the funding of statutory child protection services, family support and parenting services, family violence and sexual assault services, adoption and placement care services and specialist support services, aims to ensure the safety and wellbeing of adolescents and children at risk of harm, abuse and neglect. This output aims to make a positive difference for Victorians experiencing disadvantage by providing excellent community services to meet clients' needs.

### This output provides:

- child protection services to ensure the safety and wellbeing of children and young people at risk of harm, abuse, and neglect;
- specialist support and placement services to ensure the safety and wellbeing of children and young people who require support to remain with their family or are placed in out-ofhome care; and
- a range of early intervention and support services to ensure the safety and wellbeing of children, young people and families.

This output supports the Department's immediate support and capabilities and participation objectives.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
<b>Child Protection and Famile</b>	y Service	es			
Quantity					
Daily average number of children in out-of-home care placements	number	7 500	7 930	7 343	7 283
The 2014-15 expected outcome is higher thar placements driven by increased reporting, inv coupled with the longer time children are rem The higher 2015-16 target reflects a continua	estigation and naining in care.	substantiation o			
		555557767857847845			
Number of Child FIRST assessments and interventions The higher 2015-16 target reflects the net im- intensive service delivery to address increasin			10 841 2015-16 Budgo	11 171 et, with a focus	
and interventions The higher 2015-16 target reflects the net im	nact of additior g client comple number the 2014-15 ta	nal funding in the xity. 750 rget due to capa	e 2015-16 Budgo 691 acity issues with	et, with a focus	666
and interventions  The higher 2015-16 target reflects the net im intensive service delivery to address increasing.  Number of children in kinship care whose placements are managed by community service organisations.  The 2014-15 expected outcome is lower than	nact of additior g client comple number the 2014-15 ta	nal funding in the xity. 750 rget due to capa	e 2015-16 Budgo 691 acity issues with	et, with a focus	on more

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Reports to child protection services about the wellbeing and safety of children	number	100 200	90 600	90 000	82 075
The higher 2015-16 target reflects an increas including family violence reports and greater				by a range of f	actors
Total number of family services cases provided  The higher 2015-16 target reflects the net im	number	35 215	33 115	33 600	31 962
intensive service delivery to address increasin			? 2015-16 Buage	rt, with a Jocus i	on more
Quality	W				
Children and young people in out-of-home care who have had two or less placements in the past 12 months (not including placements at home)	per cent	86	82	86	91
Children and young people who were the subject of a substantiated report within 12 months of the closure of a previous substantiated report	per cent	15	15	15	16
Children and young people who were the subject of an investigation which led to a decision not to substantiate, who were subsequently the subject of a substantiation within three months of case closure  The 2014-15 expected outcome is lower than	per cent the 2014-15 to	5 arget due to sound	<b>3</b> I risk assessmen	5 at and decision r	a a a a a a a a a a a a a a a a a a a
Organisations that have successfully completed a quality review (family and community services)	per cent	95	95	95	100
Organisations that have successfully completed a quality review (specialist support and placement services)	per cent	95	95	95	100
Proportion of Aboriginal children placed with relatives/kin, other Aboriginal carers or in Aboriginal residential care  The 2014-15 expected outcome is higher than Placement principle in the period.	per cent the 2014-15 to	60 arget due to an in	65 creased focus o	60 n the Aborigina	64   Child

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Proportion of placements that are home-based care	per cent	90	92	90	93
Timeliness					
Percentage of child protection investigations assessed as urgent, that were visited, or where attempts were made to visit, within two days of receipt of the report	per cent	97	97	97	97

This performance measure renames the 2014-15 performance measure 'Percentage of child protection reports requiring a priority investigation visited within two days'. The new measure reports on the same activity as the previous measure, however, has been amended for increased clarity.

Sexual assault support services clients receiving an initial response within five working days of referral	per cent	95	95	95	98
Cost	. ,				
Total output cost	\$ million	990.8	866.0	847.1	812.4

The higher 2015-16 target reflects additional government investment provided in the 2015-16 Budget as well as the impact of the Social and Community Services Equal Remuneration Order.

### Youth Services and Youth Justice

Youth Services and Youth Justice outputs, through the funding of a range of services including the provision of advice to courts, community-based and custodial supervision and youth services, aim to make a positive difference for Victorians experiencing disadvantage by providing excellent community services to meet clients' needs.

#### **Youth Justice Custodial Services**

This output provides supervision and rehabilitation, through the provision of case management, health and education services and the establishment of structured community supports, to assist young people address offending behaviour, develop non-offending lifestyles and support the reintegration of the young person into the community at the completion of their sentence.

This output supports the Department's immediate support objective and capabilities and participation objective.

### **Community-based Services**

This output provides community statutory supervision and support to young people subject to community-based dispositions in order to divert young people from the youth justice system and minimise the likelihood of further offending.

This output supports the Department's immediate support objective and capabilities and participation objective.

participation objective.					
Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Community-based Service	S				
Quantity  Average daily number of clients under community-based supervision  The 2014-15 expected outcome is lower than are redirecting young people from orders red			1 100	1 625 d diversion init:	1 076
Proportion of youth justice clients under community-based supervision	per cent	88.5	88	88.5	88
Quality					
Community-based orders completed successfully	per cent	<b>85</b>	85	85	91
Timeliness	A CONTRACTOR OF THE CONTRACTOR				
Young people on supervised orders who have a client assessment and plan completed within six weeks of the commencement of the order	per cent	95	95	<sub>.</sub> 95	96

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Cost					
Total output cost	\$ million	69.9	69.8	69.3	66.0
The higher 2015-16 target reflects additional			ed in the 2015-1	6 Budget as we	ll as the
impact of the Social and Community Services	Equal Remuner	ation Order.			
Youth Justice Custodial Ser	vices				
Quantity				-	
Annual daily average number of	number	15-25	18	15-25	10.2
young people in custody: male					
(under 15 years) and female					
Annual daily average number of	number	140-190	130	140-190	135.2
young people in custody: males (15					
years plus)					
The 2014-15 expected outcome is lower than within this cohort.	the 2014-15 ta	rget due to fewe	r young people	sentenced to cu	ıstody
Average daily custodial centre	per cent	90–95	75	90–95	74
utilisation rate: males (15 years	•				
plus)					
The 2014-15 expected outcome is lower than	the 2014-15 to	rget due to fewe	er young people	sentenced to co	ıstody
within this cohort.		*0 CF		40.05	24
Average daily custodial centre	per cent	40–65	60	40–65	34
utilisation rate: males (under					
15 years) and female				·····	
Quality	_		~=		
Clients participating in community	per cent	65	65	65	80
re-integration activities					
Timeliness					
Young people on custodial orders	per cent	95	95	95	98
who have a client assessment and plan completed within six weeks of					
the commencement of the order					
Cost					
	\$ million	85.8	72.9	71.8	70.7
Total output cost  The higher 2015-16 target reflects the opera	•				
Malmsbury to address capacity concerns and			, at the roati	. I Source Cerrore	***

# **Concessions to Pensioners and Beneficiaries**

The Concessions to Pensioners and Beneficiaries output, through the development and coordination of the delivery of concessions and relief grants to eligible consumers and concession card holders, aims to make a positive difference for Victorians experiencing disadvantage by providing excellent community services to meet clients' needs.

This output provides reductions in the price of energy, water, and municipal rates to eligible consumers and concession card holders. It also provides trustee services for people on a low income or those who are subject to an order by the Victorian Civil and Administrative Tribunal, and other social and community services, including the provision of emergency relief for individuals or families who are experiencing immediate and personal distress due to a financial or domestic crisis.

This output supports the Department's quality of life objective.

			2014-15							
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14					
Performance measures	measure	estimate	outcome	estimate	actual					
Concessions to Pensioners and Beneficiaries										
Quantity										
Households receiving mains electricity concessions  The higher 2015-16 target reflects a forecast	number	918 300	909 178	910 200	894 106					
Households receiving mains gas concessions	number	614 200	608 196	599 700	595 341					
The higher 2015-16 target reflects a forecast	increase in the	number of eligib	le households.							
Households receiving non-mains	number	22 800	22 174	22 700	22 091					
energy concessions										
The higher 2015-16 target reflects a forecast	increase in the	number of eligib	le households.							
Households receiving pensioner	number	435 400	432 441	435 900	430 118					
concessions for municipal rates and charges										
The lower 2015-16 target reflects a forecast a	lecrease in the	number of eliaibi	le households. F	liaihility for this						
concession has not changed.				ngiomey jor ems						
Households receiving water and	number	690 700	687 493	695 900	685 220					
sewerage concessions										
The lower 2015-16 target reflects a forecast a concession has not changed.	lecrease in the	number of eligibl	le households. Ei	ligibility for this						
Number of clients receiving trustee	number	14 600	14 600	14 600	14 252					
services					<del></del>					
Quality										
Percentage of Community Service	per cent	90	90	90	93.7					
Agreement performance targets										
that have been achieved by State Trustees										

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Percentage of customers satisfied with State Trustee Limited Services  New performance measure for 2015-16 to redelivery of trustee and administration services		75 ry client and care	nm er satisfaction w	nm vith the departn	nm nent's
Timeliness  Percentage of customer requests answered by State Trustees within the timelines set in the Community Service Agreement	per cent	90	90	90	93.4
Cost  Total output cost  The lower 2014-15 expected outcome and 20 compliance audits of concession providers are					541.0 ied during

# **Housing Assistance**

The Housing Assistance output, through the provision of homelessness services, crisis and transitional accommodation and long-term adequate, affordable and accessible housing assistance, coordinated with support services where required, home renovation assistance and the management of the home loan portfolio, aims to make a positive difference for Victorians experiencing disadvantage by providing excellent housing and community services to meet clients' needs.

### This output provides:

- housing assistance for low income families, older people, singles, youth and other households. It responds to the needs of clients through the provision of appropriate accommodation, including short-term and long-term properties that assist in reducing and preventing homelessness; and
- housing support services to people who are homeless or at risk of homelessness, in short-term housing or crisis situations. Support will assist clients in accessing and maintaining tenancies in appropriate accommodation. Services provided will assist in the prevention and overall reduction of homelessness and decrease demand for social housing.

This output supports the Department's immediate support and quality of life objectives.

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Housing Assistance					
Quantity			-		
Bond loans provided during year	number	12 000	12 200	12 000	12 443
Households assisted with housing establishment assistance during	number	40 000	36 000	36 000	36 000 (est)
year  The higher 2015-16 target reflects additional children in crisis due to family violence.	funding provide	ed in the 2015-10	5 Budget <i>to resp</i>	ond to women	and
Number of clients assisted to address and prevent homelessness	number	100 000	100 000	100 000	99 892
Number of households assisted with crisis/transitional accommodation	number	9 000	9 000	9 000	9 046
Number of households assisted with long term social housing (public, Aboriginal and community long-term tenancies at end of year)	number	77 343	77 848	77 343	77 848

Major outputs/deliverables	Unit of	2015-16	2014-15 expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Number of new households	number	4 300	4 100	4 300	4 181
assisted to maintain or enter home					
ownership (including home					
renovation inspections as well as					
loans)					
Number of public housing dwellings upgraded during year	number	2 003	1 720	1 720	1 648
The higher 2015-16 target reflects a focus on and additional maintenance.	increasing the	quality of existing	g public housing	stock through	upgrades
Total number of social housing dwellings	number	85 195	85 279	84 868	85 199
The higher 2015-16 target reflects the plans to	o extend the l	ife of existing asse	ets and reduce o	lisposals.	
Total social housing dwellings acquired during the year	number	371	500	500	930
The lower 2015-16 target reflects a commitme upgrades to existing stock.	ent to asset o	ptimisation, with	a focus on addit	ional maintena	nce and
Quality				,	
Percentage of clients with case	per cent	90	90	90	94
plans in homelessness support					
programs with some, most or all of					
their case plan goals achieved					
Social housing tenants satisfied	per cent	85	85	85	89
with completed urgent maintenance works					
Timeliness					<b>.</b>
Average waiting time for public	months	10.5	9	10.5	8.7
rental housing for those clients who					
have received early housing					
allocation					
The 2014-15 expected outcome is lower than improved data quality. This is a positive result		arget aue to bette	er management	of waiting lists	ana
Proportion of clients where support	per cent	18	18	18	15.3
to sustain housing tenure was	•				
unable to be provided or referred	-				
Cost					
Total output cost	\$ million	420.8	428.5	398.9	436.6
The 2014-15 expected outcome is higher thar year extension to the National Partnership Ag conclude the National Partnership Agreemen	reement on F	lomelessness, and	l a Commonwed		

conclude the National Partnership Agreement on Remote Indigenous Housing.

The higher 2015-16 target primarily reflects additional government investment provided in the 2015-16 Budget, the impact of the Social and Community Services Equal Remuneration Order and the full year effect of prior year initiatives.

# **Empowering Individuals and Communities**

Empowering Individuals and Communities is delivered through funded programs that support community participation including Neighbourhood Houses, Men's Sheds, community support projects and programs for youth and people with a disability. Leadership is delivered for whole of government policy on youth and disability that will create an environment that encourages equity and improves outcomes in all aspects of life for youth and people with a disability.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## **Community Participation**

Community Participation programs include the Neighbourhood House Coordination Program, Men's Sheds, Community Support and Community Finance initiatives. These programs support the social and economic participation of Victorian communities, particularly vulnerable populations.

This output supports the Department's capabilities and participation objective.

Quantity					
Hours of coordination funding provided to Neighbourhood Houses	number (000)	480	480	480	465
Quality					
Strategy implementation actions within agreed performance targets: Community Organisations	per cent	100	100	100	100
Strategy implementation actions within agreed performance targets: Volunteering	per cent	100	100	100	100
Timeliness				·	
Grants acquitted within the timeframe specified in the terms and conditions of the funding agreement	per cent	>90	90	>90	90
Cost			:		
Total output cost	\$ million	39.8	39.6	39.4	36.3

The higher 2015-16 target reflects additional government investment provided in the 2015-16 Budget as well as the impact of the Social and Community Services Equal Remuneration Order.

			2014-15		
Major outputs/deliverables	Unit of	2015-16	expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual

## Office for Disability

The Office for Disability leads and coordinates whole of government policy, disability action planning and funding, and support to disability advocacy and self-advocacy organisations so that people with a disability experience reduced disadvantage, can fully participate in the community and have their rights upheld.

This output supports the Department's capabilities and participation objective.

Quantity					
Number of Disability Advocacy clients	number	1700	1700	1700	1701
Quality					
Client satisfaction with advice provided	per cent	100	100	100	100
Timeliness					
Office for Disability projects delivered within agreed timeframes	per cent	90	90	90	100
Cost					
Total output cost	\$ million	5.2	5.1	5.5	4.8

The 2014-15 expected outcome is lower than the 2014-15 target due to a realignment of corporate attributes consistent with prior years' expenditures.

The lower 2015-16 target reflects this realignment.

### **Youth Affairs**

Youth Affairs leads and coordinates whole of government policy advice and delivers a range of initiatives for young people aged between 12 and 25 to gain a range of skills and experiences and to actively participate in their local communities.

This output supports the Department's capabilities and participation objective.

Quantity					
Participation by young people in programs that provide opportunities to be involved in social and economic life in their communities	number	200 000	200 000	200 000	262 665
Participation by young people in programs that support young people to be involved in decision making in their community	number	1775	1 775	1 775	2 667

Major outputs/deliverables Performance measures	Unit of measure	2015-16 estimate	2014-15 expected outcome	2014-15 estimate	2013-14 actual
Quality					
Participants reporting development of transferrable skills that support education, training and vocational opportunities	per cent	75	. <b>75</b>	75	94
Timeliness					
Percentage of programs delivered within agreed timeframes	per cent	90	90	90	99.6
Cost					
Total output cost	\$ million	16.1	16.2	14.7	16.6

The 2014-15 expected outcome is higher than the 2014-15 target due to the carryover of unspent 2013-14 funding. The higher 2015-16 target primarily reflects additional government investment provided in the 2015-16 Budget.

## **Sport and Recreation**

This output provides strategic leadership to the Victorian sport and recreation industry through innovation, sector development and funding support. It enhances participation in sport and active recreation and assists Victoria's elite athletes achieve their potential. This output improves community sport and recreation facilities across the state and guides the development and management of state-level sport facilities and a range of sporting events.

This output contributes to the Department's objective of enhancing community wellbeing through the platform of sport and recreation.

Quantity			·		
Combat sports licences, registrations and permits issued	number	>600	610	>600	706
Community Facility Grants: number approved	number	>130	285	>130	162

The 2014-15 expected outcome is higher than the 2014-15 target due to the impact of new programs having a larger than expected number of approvals.

Events facilitated: Sport and	number	>50	70	>50	88
recreation					

This performance measure now reports on projects funded through the Significant Sporting Events Program and similar events following transfer of responsibility for major sporting events to the Department of Economic Development, Jobs, Transport and Resources.

The 2014-15 expected outcome is higher than the 2014-15 target due to demand for event funding through the Significant Sporting Events Program by a large number of sports.

The 2015-16 target has not been raised due to the change in counting methodology.

Number of projects in progress that number >7 6 >3 6 relate to the planning and development of state level facilities

The 2014-15 expected outcome is higher than the 2014-15 target due to some state facility projects.

The higher 2014-15 target reflects the additional funding provided in the 2015-16 Budget and ongoing new state facility projects.

Major outputs/deliverables	Unit of	2015-16	2014-15 expected	2014-15	2013-14
Performance measures	measure	estimate	outcome	estimate	actual
Number of sports with athletes on Victorian Institute of Sport (VIS) scholarships The 2014-15 expected outcome is higher than	number on the 2014-15 to	>20 arget due to the	39 large number oj	>20 f sports that ha	38 ve athletes
who are eligible for individual scholarships.					
Sport and recreation organisations undertaking programs or activities to enhance participation	number	>85	100	>85	99
The 2014-15 expected outcome is higher thar organisations receiving support.	the 2014-15 to	arget due to a la	rger than expec	ted number of	
Sporting uniform grants: number approved	number	>600	610	>600	753
Victorian Institute of Sport scholarship holders on national teams/squads	per cent	>55	65	>55	72
The 2014-15 expected outcome is higher than Institute of Sport in developing athletes who		•		ance of the Vict	orian
Quality					
Contract management of outdoor recreation camps meets agreed key performance indicators	per cent	>90	94	>90	94
Timeliness					
Annual Community Sport and Recreation Awards held	date	Jun-16	Oct-14	Jun-15	Dec-13
Cost					
Total output cost  The 2014-15 budget and 2014-15 expected of	\$ million utcome reflect	76.4 the full year imp	87.8 act of the machi	88.1 nery of govern	91.4 ment

The 2014-15 budget and 2014-15 expected outcome reflect the full year impact of the machinery of government transfer of Sport and Recreation (including Major Events) from the Department of Economic Development, Jobs, Transport and Resources.

The 2015-16 target reflects the full year impact of the machinery of government transfer of Sport and Recreation (excluding Major Events) from the Department of Economic Development, Jobs, Transport and Resources, and additional government investment provided in 2015-16.