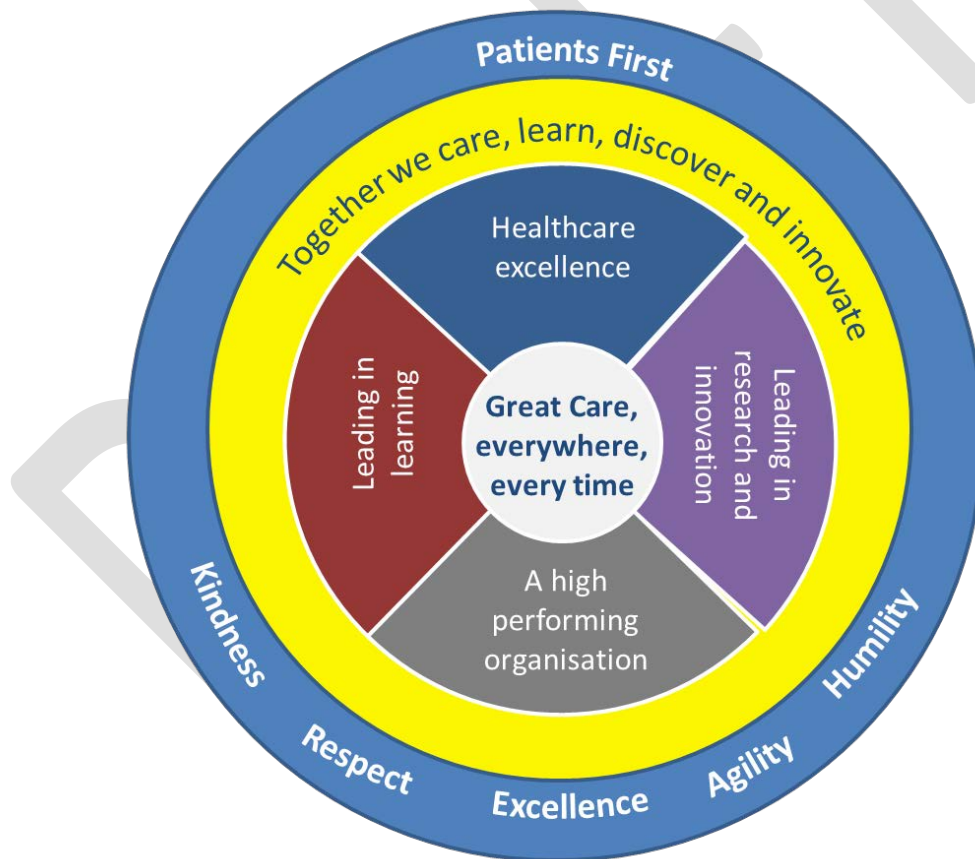


Eastern Health Strategic Plan



(Visual representation is for illustrative purposes only)

DRAFT V0.1

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Foreword

It is with immense pride that we present Eastern Health's Strategic Plan.

This plan represents Eastern Health's commitment to our community to continue to build on the rich and successful history of this health service.

This plan has been developed in consultation with many staff, consumers and other stakeholders across the community. Your contributions, insights and expertise have been invaluable in the development of this plan and we thank you all for your generosity. Without your feedback, input and support, we would not have such a clear strategy to guide Eastern Health into the future.

This strategic plan will be a guiding point for the organisation and all of its staff. The interactions, decisions and efforts of every member of staff are made towards the advancement of Eastern Health's vision and to achieving our strategic intent. This will ensure that Eastern Health, together with our consumers and the community, continues to support the health of the population.

There is no doubt that the healthcare system faces a number of challenges both now and into the future. Minimising variations in care and harm that this may cause, increasing demand, changing models of service delivery, and ongoing pressures relating to financial and environmental sustainability are just a few such challenges. Despite these challenges, it is also a time of great opportunity in areas such as the expert capability and knowledge of Eastern Health staff and the utilisation of technology to enhance care delivery. All of these changes are occurring within an environment where consumers are more informed than ever and are taking greater control over their health. This also comes with higher expectations of those who manage and deliver these services.

We are confident that this plan will support Eastern Health to continue to deliver Great Care, everywhere, every time with our community and look forward to achieving true excellence in healthcare together.

We commend this Strategic Plan to you.

[Insert photo]

[Insert Signature]
Dr Joanna Flynn (AOM)
Chair, Board of Directors

[Insert Signature]
Adjunct Professor David Plunkett
Chief Executive

1 Overview

This strategic plan provides a bold message to ourselves, our patients and the community, our partners and other stakeholders on the path that Eastern Health will tread into the future. Every aspect of our strategy has been considered and reimagined to create a powerful symbol which will guide our organisation to deliver on our existing and future commitments, and also our collaboration with partners to enhance the health of our community and the lives of those within it.

It is with this Strategic Plan that Eastern Health will continue to build on the success of the past and meet the challenges of the future.

Vision for the future

Great care, everywhere, every time

These five words symbolise what we wish for every individual who comes into contact with Eastern Health.

Our community, individual patients receiving care and our staff who work with them in achieving great care outcomes, work together for great care, regardless of where or when this occurs.

Over many years the term 'great' has come to symbolise not just the outcome for everyone involved, but also the effort in developing systems of care which support our staff and our patients to experience great care, everywhere and every time.

This vision statement will be embedded within our daily language to reinforce its significance for everyone who comes into contact with us.

Mission to deliver

Together we care, learn, discover and innovate

Eastern Health's mission statement is succinct and clear. In partnership with each other, our consumers, other healthcare providers and an array of other organisations, Eastern Health cares for the community. This community may reside nearby, within the eastern metropolitan region, within the state of Victoria or further afield.

In order to continue to meet the needs of our diverse population, we contribute to the development and refinement of the health system by sharing our knowledge and expertise in supporting the education of students, and ensuring the next generation of our workforce will have the skills and capability to continue to achieve great health care outcomes.

Through our research efforts in partnership with others, we contribute to building our collective understanding of health and how best to care for our community.

The challenge of maintaining and building the health of the population we serve requires that Eastern Health continuously adapts to the changing health needs and expectations of the community. This requires innovation not only in the technical delivery of individual care and clinical treatment decisions, but also in how health services are delivered through enhanced models of service delivery, as well as health management and governance systems.

Eastern Health's mission is wide ranging and encompasses all three business fields in which we operate every day.

The Values which guide us

Patients First

- Patients, clients, consumers, residents focused
- Recognising and meeting the needs of others
- Positive attitude in all interactions

Kindness

- Caring
- Compassionate
- Considerate
- Helpful

Respect

- Support the diversity and dignity of individuals
- Uphold basic human rights for all
- Value the contribution of others

Excellence

- Class leading quality
- Technical expertise
- Accountable
- Integrity and pride in all work

Agility

- Innovative
- Responsive
- Adaptable

Humility

- Self understanding
- Awareness
- Openness
- Appreciating other perspectives

These values represent and describe the very heart of our organisation and what it stands for. The principles which these values reflect guide how we work and what we hold as most important in ourselves and each other.

These values represent the first decisive change to the values of Eastern Health since it was established in 2000. The decision to revise the values was made specifically in response to feedback from our staff about what is important and the key attributes that the organisation requires in order to meet the challenges of the future.

'Patients First' is recognised as our primary and most important value. It recognises our focus and attention to the care and wellbeing of the patients we care for. Across Eastern Health, the term patient also represents consumer, client, resident, person and individual.

Strategic Initiatives and Priority Goals

Four strategic initiatives have been identified by which Eastern Health will deliver on its vision and mission and meet the expectations of our consumers, our staff and other stakeholders.. These are identified in the figure, along with a total of 14 priority goals which will be the focus of Eastern Health activity, decisions and improvements throughout the life of this strategic plan.

The four strategic initiatives are displayed as three across and supported by the fourth to recognise that a high performing organisation is a necessity to enable the other three initiatives to flourish.

1.1. Health Care Excellence

Great patient outcomes

Great patient experiences

Accessible care

Harm-free care

Excellence in health care is more than just the individual delivery of safe, high quality services. Eastern Health will excel in the delivery, management and governance of healthcare services. This includes working towards more reliable, safer health care with no instances of what might be considered preventable harm. We will strive to exceed consumer expectations in all interactions, achieving health outcomes which set the benchmark for others to follow.

Consumers will access the healthcare services which they need to support them to manage their own health conditions when and where they need them. This is expected to include access to a range of technology-enabled services via such things as telephone, online, self-help and virtual care options. This will include enhancing the health literacy of patients and the community so that together, we can partner for better health care outcomes.

1.2. Leading in Learning

Great learner outcomes

Great learning experiences

A dynamic learning organisation

Learning is recognised as a truly life-long pursuit for Eastern Health and as such, we will work towards being recognised as the destination of choice for learners in all aspects of health, including clinical and non-clinical roles. With dedicated and fit-for-purpose facilities, Eastern Health has the capability to deliver inter-professional education to build the expertise of the workforce, and develop the next generation of healthcare leaders.

Our students will seek employment at Eastern Health, recognising the organisation as a high-performing healthcare leader; while our staff are highly sought after for their, skills, knowledge and capability. By linking learning with our other strategic initiatives, Eastern Health will see a rapid translation of cutting-edge information, knowledge and practice, applied for the benefit our community.

1.3. Leading in Research and Innovation

Innovating for excellence

Renowned for research

Translating research and innovation to enhance care

Eastern Health is building a strong culture of innovation and our reputation for this continues to grow, both within Victoria, nationally and internationally. Through our robust improvement and innovation methodology, we are working with our consumers to transform the way we deliver and manage our health services. This strategic plan will see Eastern Health continue to drive innovation as a recognised and valued component of every role throughout the organisation.

Over the life of this strategic plan, Eastern Health will continue to build its reputation as a research centre with outcomes which are proven to save and improve the lives of those we care for. With improving rates of success for our research applications, we will contribute broadly to the collective understanding of disease management and health care. Through the combination of research and innovation, we will quickly translate positive research outcomes into practice. We will openly share our expertise with our healthcare partners to support their service development, as well as to influence state and national policy to enhance the effectiveness and efficiency of the entire healthcare system.

1.4. A High Performing Organisation

A great workforce

Sustainable systems that create value

Digitally transforming

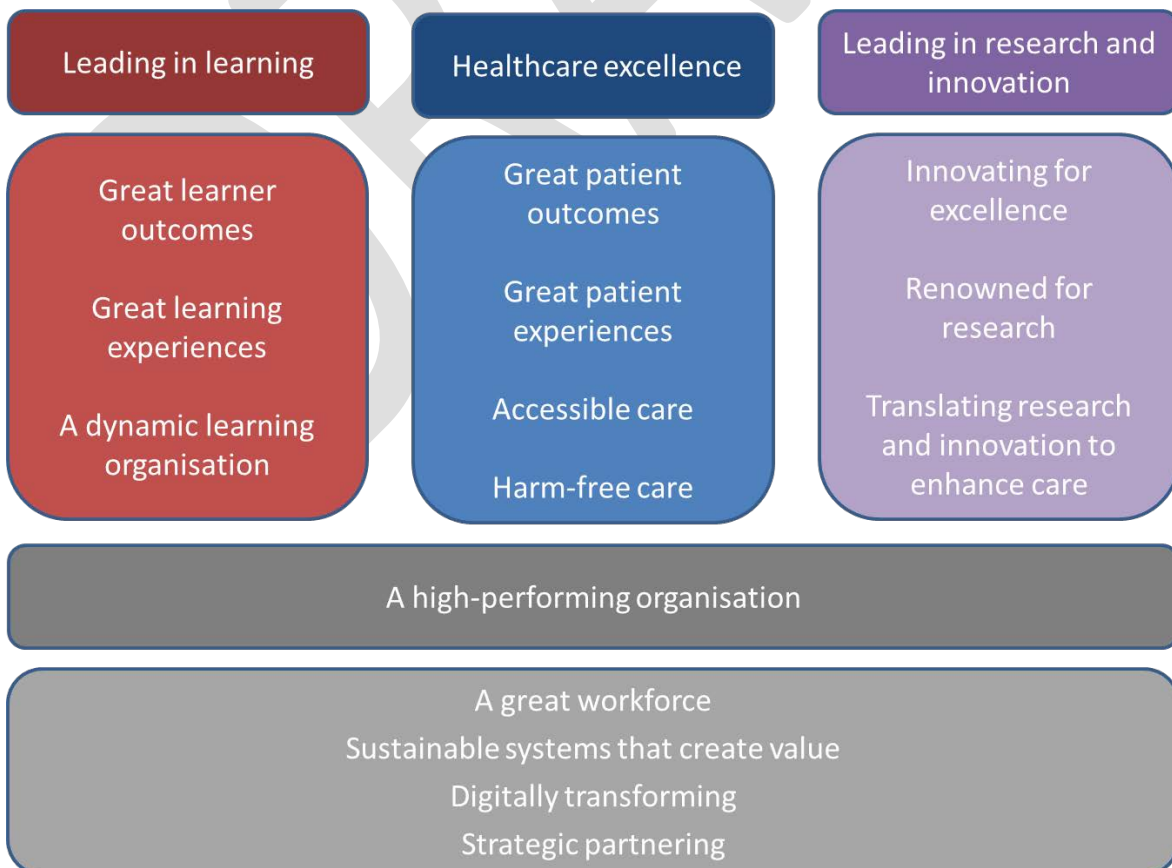
Strategic partnering

Our strong organisational culture will support a capable, high achieving workforce with leaders across our clinical and non-clinical operations. Eastern Health will take a no-tolerance approach to staff injuries, building a safe workplace environment for all our employees and visitors.

Over the course of this plan, Eastern Health will work towards being recognised as best in class for its rate of resource utilisation, including natural resources and waste production – both recyclable and non-recyclable. The return on investment in developing our systems will demonstrate our efficiency and effectiveness, while ensuring we build financial reserves for the future with surplus annual budgets to reinvest into health services.

Eastern Health will continue to pursue its journey towards a technologically advanced health service. We will continue to invest in digital systems and capability to underpin enhancements to our efficiency and effectiveness, as well as ensuring the safety and quality of our healthcare, education and research efforts.

Eastern Health will actively seek out and engage in positive partnerships with other organisations and institutions where tangible benefits can be delivered to everyone involved. We recognise that the achievement of this ambitious strategic plan cannot be achieved solely by Eastern Health operating independently of others. Collaborating with others within the health system and associated with it will deliver the greatest benefits for Eastern Health and for the health of our community.



(Visual representation is for illustrative purposes only)

Guiding our path

We will use a range of indicators and clear performance targets to monitor and guide the organisation on its strategic journey. Some of the key measures and targets aligned with each of the four strategic initiatives are identified below.

Strategic Initiative	Indicator (Indicative)	Target (Suggested)
Healthcare excellence	Benchmarked hospital standardised mortality rate (HSMR)	Results in the top 25% of benchmarked peers
	Accreditation relating to National Safety and Quality in Health Service (NSQHS) Standards 100% in ACHS accreditation (or relevant accreditation)	Achieve 'Met with Merit' assessment against all criteria related to patient outcomes
	Victorian Health Experience Survey results across the four common questions	Achieve top 5% of participating health services
	Net promoter/patient experience score (including data from patients, families and staff)	Achieve an average score ≥ 9 from each group
	Inpatient length of stay	Outperform the state average by 5% across all major clinically related groups (MCRGs)
	Rate of avoidable hospital presentations and admissions	0.0% of admissions are avoidable
	Patient access	Details of measure to be confirmed
	Incidents of preventable patient harm	Zero incidents per annum
	Patient safety culture	Results in the top 10% of health organisations
	Self-sufficiency	Average rate of 75% across all clinical streams that Eastern Health provides
Leading in learning	Learner achievement rates	Results in the top 10% of peer organisations
	Student retention rates	Results in the top 10% of peer organisations
	Percentage on vacancies filled by student and staff	Average of 70% per annum across all vacancies

	Patient experience with students as reported in Victorian Health Experience Survey	Results for student related questions (57 & 58) greater than statewide average
Leading in research and innovation	Percentage of staff who have completed Eastern Health improvement training and implemented at least innovation project	≥ 75% of all staff
	Percentage of innovation activities which consumers are directly involved in and/or lead	≥ 80%
	Number of published research studies and citations in reputable journals	Annual growth of 5% and 10% per annum
	Impact of research	Details of measure to be confirmed
	Research funding application success rate	65% of all external applications for funding are successful
A high performing organisation	Percentage of staff who agree with the 'engagement' questions in the annual People Matter survey	Average agreement responses (engagement index) are ≥ 5% above the benchmark rate
	Incidents of preventable staff harm	Zero incidents per annum
	Number of substantiated staff complaints of bullying and harassment	Zero substantiated complaints per annum
	Utility consumption and non-recyclable waste production rates	Average reduction of 2% per annum over the life of the plan
	Operating budget	Positive financial position of at least \$2.5 million over the life of the plan with no instances of financial deficit in any year.
	Digitally-enabled health care	Recognised as a HIMSS (Health Information Management Systems) level 6 organisation

Note: At the time of issuing this draft for consultation, these measures and associated targets remain under review.

2 Our organisation

As a health service in Victoria, Eastern Health not only provides a comprehensive range of high quality health services, but also undertakes and contributes to a large body of research and provides clinical placements for thousands of undergraduate and postgraduate students across medical, nursing and allied health disciplines.

Eastern Health employs over 8,700 people and manages a budget approaching \$820 million per year. We aspire to be **GREAT** in everything that we do, delivering great care to our consumers everywhere, every time. We focus extensively on achieving performance excellence and delivering a high quality healthcare system for the people we serve. As a progressive, responsive and innovative health service, we demonstrate our commitment to excellence through external accreditation against a broad range of health system standards including the National Safety and Quality Health Service Standards.

Figure 2a below represents how Eastern Health delivers on its vision and mission through the integration of health care, health education and health research across all aspects of the continuum of care to achieve positive health outcomes with our community.

Figure 2a: Eastern Health Business Model



2.1. Health services

Health care services are provided to a primary catchment population of more than 770,000 people spread across 2800 square kilometres of eastern metropolitan Melbourne, making ours the largest geographic catchment area of all metropolitan health services in Victoria. The communities we serve are diverse in culture, age, socio-economic status, population and healthcare needs.

The services we provide include:

- Acute care;
- Sub-acute care;
- Palliative care;
- Mental health;
- Drug and alcohol services;
- Residential care; and
- Ambulatory and community services.

In 2015-16, Eastern Health delivered almost 1.2 million episodes of patient care.

These services are delivered from 8 precincts and more than 40 individual sites. Eastern Health is organised into eight directorates which are defined by clinical programs and corporate functions that run across the health service as illustrated in Figure 2b. This matrix style structure supports the integration of clinical programs and corporate services across all of Eastern Health’s facilities.

Figure 2b – Eastern Health Organisational Profile

Clinical Directorate	Program	Larger Sites	Corporate and Clinical Support Directorates
Acute Health	Emergency and General Medicine	Angliss Hospital Box Hill Hospital Healesville Hospital Maroondah Hospital Peter James Centre Wantirna Health Yarra Ranges Health	Access and Patient Support Services Corporate Projects & Sustainability Finance, Procurement and Information Services Human Resources & Communications Medical Services and Research Quality, Planning and Innovation
	Specialty Medicine		
	Surgery		
	Women & Children		
Continuing Care, Ambulatory, Mental Health & Statewide Services	Ambulatory and Community Services		
	Continuing Care		
	Mental Health		
	Statewide Services		

2.2. Research

We have an active research focus and strong affiliations with some of Australia’s top universities and educational institutions. Over the past 5 years, the Eastern Health Human Research Ethics Committee has approved more than 1000 applications to undertake research at Eastern Health. This research involves all disciplines and is often undertaken in partnership with other organisations and includes

traditional research, as well as clinical studies and clinical trials. The results of this research are improvements in health outcomes for our community, as well as more efficient and effective utilisation of our resources to deliver patient care.

Eastern Health's Office of Research and Ethics, under the leadership of our Chief Medical Officer, has collaborated with the Eastern Health Foundation and other funding bodies to award grant funding to researchers across Eastern Health for this important work. These grants have totalled more than \$500,000 over the past three years.

2.3. Education

The transfer of our expert knowledge to our colleagues and the next generation is of vital importance in advancing the skills of our workforce and the healthcare sector more broadly. Education is broken into two broad target audiences being undergraduate students and postgraduate students. Across these two sectors, education is supported in the fields of medicine, nursing, allied health and a range of other support and administrative functions which are essential to the efficient and effective running of a health service.

The education we provide is collaborative across fields and is provided in partnership with a wide range of universities and other training institutions. Over the past 3 years, Eastern Health has hosted a total of [awaiting confirmation of number] undergraduate students and [awaiting confirmation of number] postgraduate students. Across the entire organisation, a combined total of 75,546 clinical placement days were hosted for students in 2014/15. This equates to an average of 207 individual students every single day of the year.

2.4. Our sites

Eastern Health operates from 40 sites, organised around 8 precincts across the eastern metropolitan area of Melbourne. A map of these precincts and the primary services available at each site is provided in Figure 2c. Eastern Health's larger sites are detailed below.

Angliss Hospital

Angliss Hospital, established in 1939, is located in Upper Ferntree Gully. The Hospital supports low complexity inpatient and outpatient healthcare needs across a broad range of health services which include emergency and general medicine, surgery, maternity, paediatrics and rehabilitation as well as ambulatory care programs to care for patients in their own homes.

Angliss Hospital is currently undergoing a \$20million redevelopment which includes the establishment of an intensive care unit and expansion of the paediatric and short stay areas.

Box Hill Hospital

Box Hill Hospital, established in 1956, is located in a busy medical and education precinct of Box Hill. The hospital supports the delivery of high complexity inpatient and outpatient health care services in the streams of emergency care, general and specialty medicine, intensive care, surgery, maternity, paediatrics, specialist outpatient clinics, mental health services for adults, adolescents and children and allied health services, and is a hub for teaching and research.

Box Hill Hospital is nearing the end of a \$407.5m redevelopment which has delivered additional capacity to care for people living in the east which has included the construction of a new 10 storey health services building.

Healesville Hospital and Yarra Valley Health

The Healesville Hospital, established in 1957, is located in Healesville and supports the delivery of low complexity inpatient and outpatient healthcare services. As a result of a major redevelopment of this site, most of the hospital services have been temporarily relocated at this time. This exciting capital project will deliver a new operating theatre, a new 6 chair renal dialysis unit, a fully redeveloped inpatient ward and a redeveloped community health centre with additional consulting suites and treatment spaces.

Maroondah Hospital

The Maroondah Hospital, established in 1976, is located in Ringwood East and supports the delivery of medium to high complexity inpatient and outpatient services across a broad range of health services which include emergency, general and specialty medicine, intensive care, general and specialist surgery, paediatrics, specialist outpatient clinics, allied health services and adult mental health.

As an especially land-locked site, Eastern Health is currently finalising a long-term master plan for the Maroondah Precinct in collaboration with the Department of Health and Human Services. This work will ensure that future expansion of the site makes the best use of the space available. At the same time, planning is underway for the development of stage 1 of a Comprehensive Cancer Centre within the precinct which will focus on screening, assessment and treatment of breast cancer.

Peter James Centre

The Peter James Centre, established in 1985, is located in Burwood East. It supports the delivery of inpatient and outpatient care across health services which include rehabilitation, geriatric medicine, aged persons' mental health services, aged care assessment services, aged psychiatry assessment, haemodialysis, residential care and transition care.

Managing access to health services for our communities is possible in part by making sure that patients receive the care and services they need in the most appropriate location for them. The Peter James Centre allows Eastern Health to move patients out of an acute hospital when they no longer need that intensity of care and ensure fair and equitable access throughout the community.

Wantirna Health

Wantirna Health was established in 2007 and is located in Wantirna. The hospital supports the delivery of inpatient and outpatient services across clinical streams which include palliative care, rehabilitation and specialist clinics. A large community rehabilitation centre and a range of other ambulatory-based services are delivered from this site. Wantirna Health is also home to Eastern Health's education precinct which was opened in 2014.

Yarra Ranges Health

Yarra Ranges Health, established in 2008, is a same-day facility located in Lilydale. The hospital supports the delivery of services across clinical streams which include specialist day, rehabilitation and outreach services, day surgical services, chemotherapy, antenatal and postnatal care, audiology services and a youth mental health service.

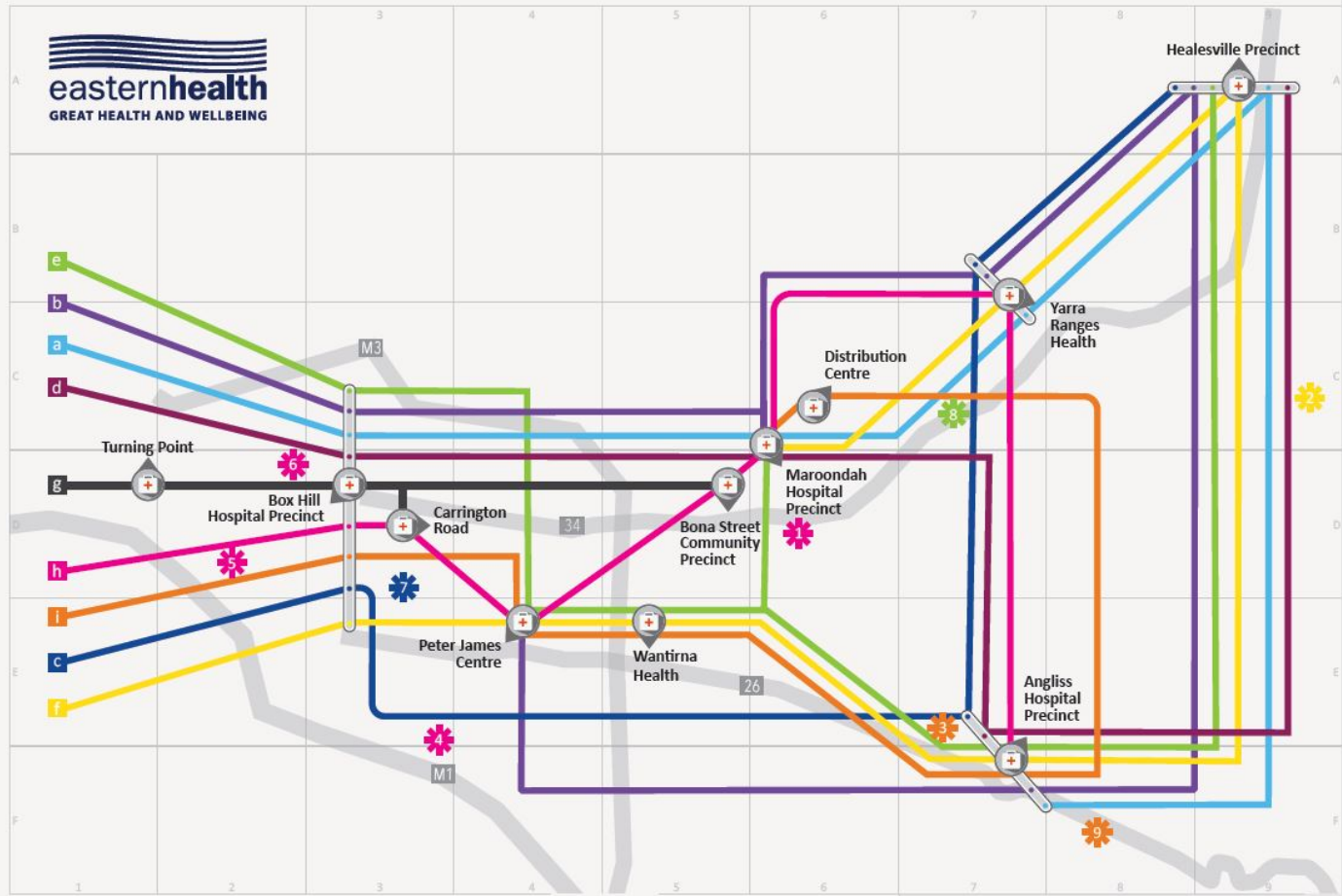
Other sites

Eastern Health provides a comprehensive range of residential, ambulatory and community-based services through numerous smaller sites which are located throughout the eastern metropolitan region.

Each of these sites and the staff who work in them, play an important role in ensuring that safe, high quality health services are available at the right time and as close to a patient's home as possible.

Figure 2c Eastern Health Site, Precinct and Program Map

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EASTERN HEALTH SITE, PRECINCT & PROGRAM MAP

SECONDARY SITES

- ✿ 1 Railway Avenue
- ✿ 2 Yarra Junction
- ✿ 3 Angliss Opportunity Shop
- ✿ 4 Waverley Clinic *
- ✿ 5 Canterbury Community Care Unit
- ✿ 6 Linwood Mont Albert Prevention and Recovery Care
- ✿ 7 Lactation Support Unit
- ✿ 8 Mooroolbark Aged Care Facility
- ✿ 9 Pathology Collection Centre Tecoma
- Eastern Health Precincts
- Freeway/Highway
- Precinct program link

* Services currently based at Carrington Road

HOW TO USE THIS MAP

The primary purpose of this map is to highlight the intersection of Eastern Health's programs and services across its many sites and precinct locations. Programs and services represent all of Eastern Health's eight designated Clinical Programs as well as Clinical Support & Corporate Services. The line and the line colour is matched against each program and illustrates the spread across Eastern Health.

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PROGRAM KEY

Line	Program	Associated Precinct
a	Surgery	Angliss Hospital Box Hill Hospital Healesville Maroondah Hospital Yarra Ranges Health
b	Specialty Medicine	Angliss Hospital Box Hill Hospital Healesville Maroondah Hospital Peter James Centre Yarra Ranges Health
c	Women & Children	Angliss Hospital Box Hill Hospital Healesville Yarra Ranges Health
d	Emergency & General Medicine	Angliss Hospital Box Hill Hospital Healesville Maroondah Hospital
e	Continuing Care	Angliss Hospital Box Hill Hospital Healesville Maroondah Hospital Peter James Centre Wantirna Health
f	Ambulatory & Community Services	Angliss Hospital Box Hill Hospital Healesville Maroondah Hospital Peter James Centre Wantirna Health Yarra Ranges Health
g	Statewide Services	Bona Street Community Box Hill Hospital Carrington Road Turning Point
h	Mental Health	Angliss Hospital Bona Street Community Box Hill Hospital Carrington Road Maroondah Hospital Peter James Centre Yarra Ranges Health
i	Clinical Support & Corporate Services	Angliss Hospital Box Hill Hospital Distribution Centre Maroondah Hospital Peter James Centre Wantirna Health

AT MAY 2016

2.5. Our staff

Eastern Health works hard to attract and retain the best staff. We employ staff across a wide range of disciplines and specialties to ensure the right skills and knowledge are available when they are needed. A large proportion of our staff (60.5 per cent) lives within our primary catchment area, with a further 12.7 per cent living within our secondary catchment area (figure 2d).

Figure 2d- Eastern Health staff by home address as at January 2016

Area	No of people	%
Boroondara	444	5.1%
Knox	904	10.3%
Manningham	514	5.9%
Maroondah	1143	13.1%
Whitehorse	1075	12.3%
Yarra Ranges	1224	14.0%
Total staff living within Eastern Health's primary catchment area	5304	60.5%
Total staff living in secondary catchment	1107	12.7%
Total number of staff	8748	

Source: Eastern Health

As can be seen in figure 2e, almost half of all staff employed across Eastern Health are nurses (45.5%) with the second largest cohort of staff being allied health. This includes such disciplines as physiotherapists, occupational therapists, speech pathologists, dietitians and podiatrists.

Figure 2e- Eastern Health staff by classification as at January 2016

Classification	No of people	%
Nurse (all types)	3977	45.5%
Doctors (all types)	1248	14.3%
Allied Health	2352	26.9%
Other Classification	1170	13.4%
Total number of staff	8748	

Source: Eastern Health

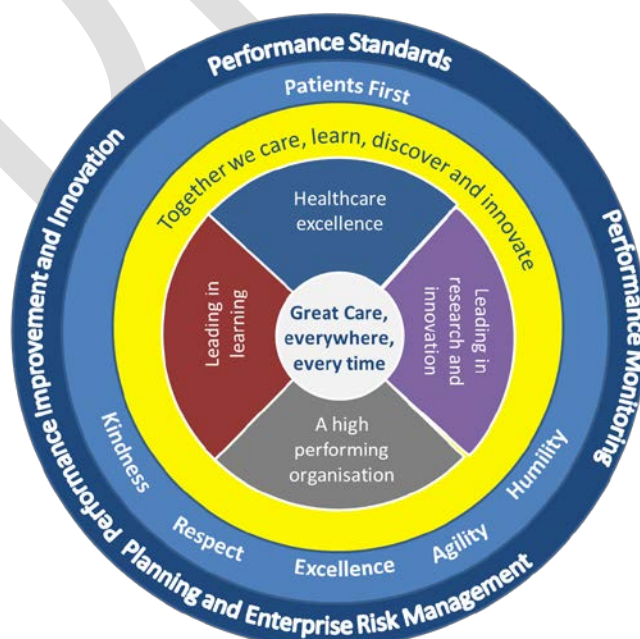
3 The progress we have made in pursuit of Performance Excellence

Eastern Health's previous Strategic Plan was extremely successful and under it, the organisation grew and matured significantly. Over the 5 years to 2015 the following key statistics are worth considering:

- The number of staff employed across Eastern Health has increased from 8373 to 8683
- The number of volunteers has multiplied from 350 to more than 900
- Emergency department presentations grew 6.8% from 142,143 to 151,810
- The number of ambulance arrivals has increased 13.3% from 35,759 to 40,527
- Total number of operations performed across the health service grew 4.9% from 29,626 to 31,083
- The number of babies born increased 3.7% from 4,489 to 4655
- The number of patients admitted for care fell 2.4% from 146727 to 143186 individuals
- The total number of service events across all streams of care ballooned from 800,000 to 1,200,000
- The number of research proposals receiving ethics approval increased from 189 in 2010 to 228 in 2015
- The number of undergraduate students who attended clinical placement at Eastern Health [awaiting confirmation of data]
- Our annual operating budget has increased from \$730 million to \$818 million
- We invested \$575 million in infrastructure development
- Opened an additional 85 beds (from 1380 to 1465) with the equivalent of 54 of these beds for patients receiving care in their own home.

Eastern Health uses a Performance Excellence Framework which is designed to ensure the achievement of the strategic intent of the organisation. All organisational systems and processes are considered and reviewed from a Performance Excellence approach to ensure that Eastern Health is a high performing organisation. Figure 3a represents this Framework.

Figure 3a Performance Excellence Framework



Eastern Health monitors the performance of the organisation via a comprehensive scorecard which aligns key indicators with the achievement of the organisation's strategic intent. Comparison of the scorecard between 2010 and 2015 has identified that, despite some changes to the indicators each year in line with Department of Health and Human Services regulatory requirements, Eastern Health has achieved significant improvements in the areas of:

- The percentage of patients identified as category 2 urgency on the elective surgery waiting list seen within the recommended time (no more than 90 days) improved from 50% to more than 75%.
- The use of seclusion and restraint within our mental health inpatient units has dropped by a factor of 4. In addition, follow up of these clients after their discharge from inpatient care now occurs 90% of the time, which is a significant improvement since 2010 when the post-discharge follow-up rate was 65%.
- The percentage of patients presenting to our emergency departments seen within the recommended time for their respective triage category increased from 56% to 80%.
- Discharge information is provided to consumers and other healthcare providers almost 98% of the time. Five years ago Eastern Health was providing this information less than 90% of the time.

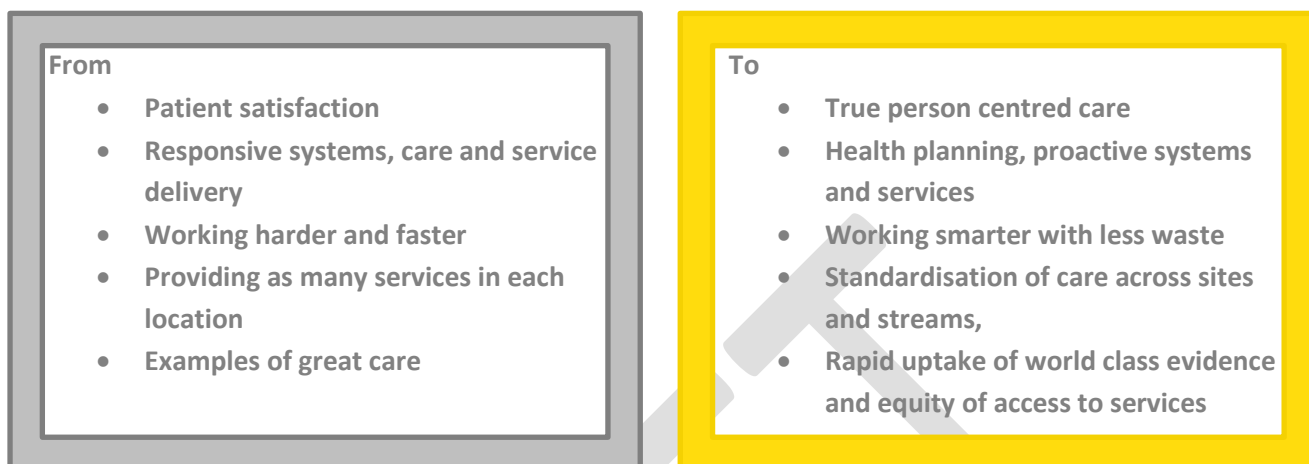
Over the 5 years of our previous Strategic Plan, Eastern Health has experienced a number of changes in both the types of services provided and the way in which these services are delivered.

For example, as technology is developed and our understanding and management of clinical risks has evolved, Eastern Health now provides some services which were historically the domain of only the largest tertiary health services in the state. Across the continuum of care, a range of services are now provided via a home-based model which only a few years ago would have necessitated an admission to an acute hospital. This migration of service delivery down the continuum of care is expected to accelerate into the future, driven by a range of factors including person-centred care, research and more efficient utilisation of finite resources.

Key initiatives we have completed over the past 5 years which have materially enhanced the care we provide to our community include:

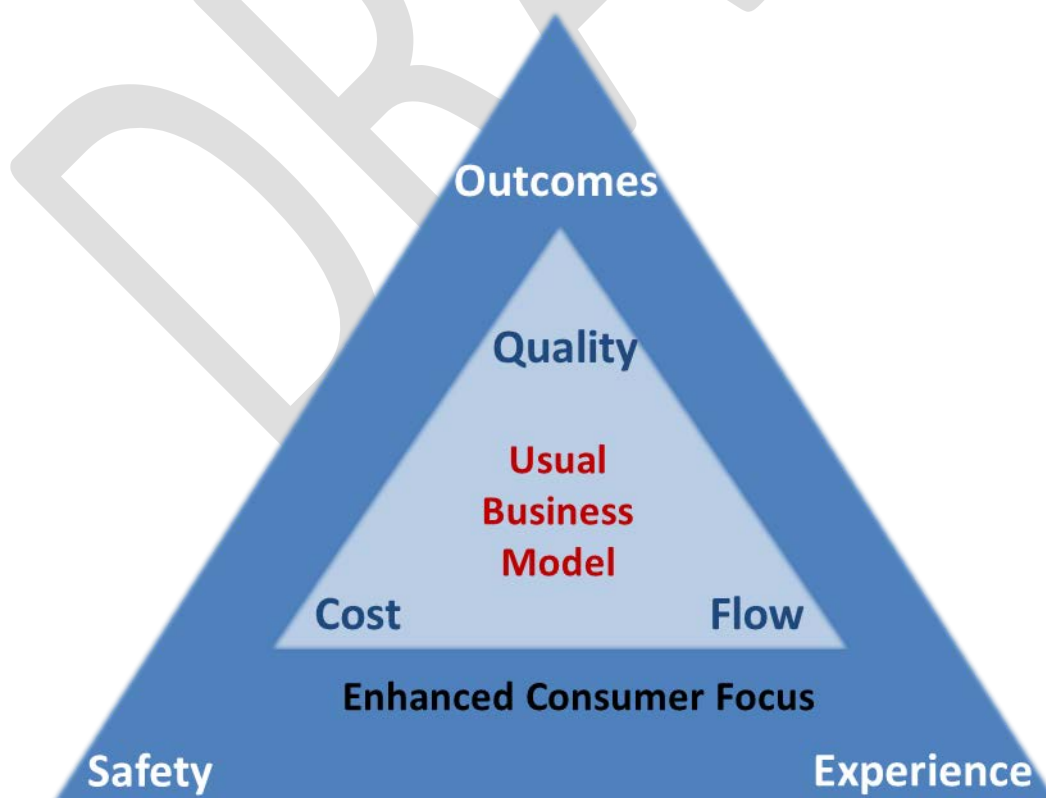
- The building of the new Box Hill Hospital, upgrades at both Maroondah Hospital and Angliss Hospital, and the redevelopment of Healesville Hospital which is currently underway;
- The establishment and substantial growth of the Eastern Health Foundation has seen significant contributions from a range of donors to support service delivery, the purchase of new equipment and research to be undertaken;
- The development of Eastern Health 2022: The Strategic Clinical Service Plan 2012-2022, which continues to guide the development of health services to meet the changing needs of our community;
- The development and implementation of a Research Plan to guide the development of research activities and the systems which support them;
- Significant progress has been made towards making Eastern Health a fully digital health service with the recent development of a Digital Information Plan to guide and support this work into the future;

The development and implementation of a performance excellence approach to service delivery and system improvement over the past 5 years has also ensured that Eastern Health is well positioned to continue to meet the challenges associated with the healthcare industry of the 21st century. Into the future Eastern Health will focus on delivering great care, everywhere, every time.



This will be done through an ongoing focus on our consumers. Figure 3b represents the balance and overlap between a usual business model which focusses on quality, cost and flow, and an enhanced consumer focus on outcomes, safety and experience. In order to effectively manage a modern health service, Eastern Health must focus equally on all elements across both models.

Figure 3b Usual and enhanced business models



4 The policies we work under

Eastern Health plays a significant role in the achievement and delivery of Government policy and the priorities of the Victorian Health system. The evolution of health care around the world, in response to both external and internal factors, continues to drive adaptations within Government policy and priorities. Eastern Health strives to ensure that we respond both promptly and effectively to the changing needs of our community.

There are currently a number of policies which particularly influence strategic planning at Eastern Health and have informed the development of this plan, along with other planning documents developed by Eastern Health, including Eastern Health 2022: The Strategic Clinical Service Plan. The list below is not intended to be exhaustive, rather to provide details on the most prominent and significant for the whole organisation.

4.1. Victorian Health Priorities Framework 2012–2022: Metropolitan Health Plan

The Metropolitan Health Plan is aimed at creating an equitable, sustainable health system which identifies seven priority areas for further developing Victoria's health system. These are:

- developing a system that is responsive to people's needs;
- improving every Victorian's health status and experiences;
- expanding service, workforce and system capacity;
- increasing the system's financial sustainability and productivity;
- implementing continuous improvements and innovation;
- increasing accountability and transparency; and
- utilising e-health and communications technology.

In addition to these priority areas, the Metropolitan Health Plan also identifies ten guiding principles against which these are all aligned. The ten principles are:

1. Universal access and a focus on those most in need;
2. Equitable outcomes across the full continuum of health;
3. Person and family-centred;
4. Evidence-based decision making;
5. Capable and engaged workforce;
6. Responsibility for care spans the continuum;
7. Maximum returns on health system investments;
8. Sustainable use of resources through efficiency and effectiveness;
9. Continuous improvement and innovation; and
10. Local and responsive governance.

4.2. Victorian Public Health and Wellbeing Plan

The Victorian Public Health and Wellbeing Plan establishes a vision for the state of Victoria 'free of the avoidable burden of disease and injury so that all Victorians can enjoy the highest attainable standards of health, wellbeing and participation at every age'. The plan identifies the public health and wellbeing needs of the people of Victoria across age groups, geographic location and socio-economic status. In order to deliver health and wellbeing improvements at every stage of life, 6 focus areas are identified to promote a healthy life. These are:

- Healthier eating and active living;
- Tobacco-free living;
- Reducing harmful alcohol and drug use;
- Improving mental health;
- Preventing violence and injury; and
- Improving sexual and reproductive health.

4.3. Doing it with us not for us: Strategic direction

Doing it with us not for us sets out the guiding principles of consumer participation for public hospitals, mental health services, community health services and residential aged care facilities. The aim of the policy is ‘For consumers, carers and community members to participate with their health services and the Department in improving health policy and planning, care and treatment, and the wellbeing of all Victorians’.

4.4. National Health Reform Agreement

The National Health Reform Agreement is an agreement between the Commonwealth of Australia and all of the States and Territories. The aim of the agreement is to improve health outcomes for all Australians and to improve the sustainability of the health system across Australia. The agreement details how the Commonwealth and the States will work together to implement new arrangements for a nationally unified and locally controlled health system to achieve:

- improved patient access to services and public hospital efficiency through the use of activity based funding (ABF) based on a national efficient price;
- sustainability of funding for public hospitals by increasing the Commonwealth’s share of public hospital funding through an increased contribution to the costs of growth;
- improved transparency of public hospital funding through a National Health Funding Pool and a nationally consistent approach to ABF;
- improved standards of health care through the Australian Commission on Safety and Quality in Health Care;
- improved performance reporting through the establishment of the National Health Performance Authority;
- improved accountability through the Performance and Accountability Framework;
- improved local accountability and responsiveness to the needs of communities through the establishment of Local Hospital Networks and Medicare Locals;
- improved provision of GP and primary healthcare services through the development of an integrated primary health care system and the establishment of Medicare Locals; and,
- improved aged care and disability services by clarifying responsibility for client groups.

4.5. Health 2040: A discussion paper on the future of healthcare in Victoria

Health 2040 is a discussion paper designed to elicit views from stakeholders and the community relating to:

- Establishing a clear vision for Victoria’s health system;
- Establishing realistic goals for the health system;
- What the health system should look like in the future; and
- Making sure that all Victorians have access to high-quality treatment and services.

It does this while recognising a range of key challenges facing the health system including ageing of the population, higher levels of chronic disease impacted by lifestyle choices, disparities in health outcomes across various groups of the population and ongoing financial constraints impacting on capacity to fund the system in the future.

4.6. Victorian health and medical research strategy: Discussion paper

The *Victorian health and medical research strategy Discussion paper* proposes a vision to optimise wellbeing and improve the health outcomes of Victorians. The objective of the strategy is to embed health and medical research into the Victorian health system with the view of accelerating the translation of research into clinical practice and the community. Eight key themes are identified in the discussion paper. These are:

- integrating research, education and healthcare;
- developing a convergence science capability;
- optimising big data and informatics;
- implementing a world-leading clinical trials system;
- developing the next generation health and medical research workforce;
- advancing international collaborations, industry-research engagement and innovation;
- securing development and commercialisation opportunities; and
- optimising funding models and sources.

4.7. People in Health: Developing Victoria's health workforce

People in Health: Developing Victoria's health workforce recognises and supports the Metropolitan Health Plan and the need ensure workforce development occurs across all stages of health careers from students to experienced practitioners and specialists in their field. The plan also recognises the importance that the workforce plays in both the delivery of health services, and the cost (constituting two-thirds of Victoria's health spending). The development of the health workforce must be underpinned by the best practice principles of capacity, quality, innovation and effective governance.

Investment in developing the workforce will focus on four key areas across the career continuum:

- students from the university and vocational education and training (VET) sectors
- entry-to-work including internships and graduate programs
- postgraduate and specialist training
- up-skilling and continuing professional education.

4.8. Plan Melbourne

Plan Melbourne is a plan for the entire city of Melbourne which integrates future planning and development in relation to land use and utilisation, transportation and other social infrastructure. It is a long term plan with views to 2050 and considers growth in population and employment, while managing environmental sustainability and enhancing liveability. This plan is currently being refreshed with a discussion paper released in October 2015 and further community and stakeholder consultation currently underway.

4.9. Targeting Zero: supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care

This report provides a range of insights into the future of the quality and safety environment in which Victorian health services operate. It suggests the development of a new Safety and Quality Bill and a review of the Health Service’s Act to ensure that patient safety is the highest priority of health services across the state. In addition, a range of actions have been implemented or planned which will impact on how Eastern Health ensures the safety and quality of the care provided to our community. The state government and Department of Health and Human Services will:

- Establish a new health information agency to overhaul the way in which data and information is shared across the health system;
- Establish a Victorian Clinical Council to provide clinical expertise to the Government, the Department and health services on how to make our hospitals safer;
- Consult with stakeholders on the development of a Duty of Candour law where health services must apologise to any person harmed while receiving care, and explain what went wrong and what action will be taken;
- Provide boards with the information they need to improve the quality and safety performance of health services.

5 Who we care for

Eastern Health cares for patients across our primary and secondary catchment areas regardless of their age, sex, background or orientation.

Our primary catchment area is all of the Statistical Local Areas (SLAs) for which Eastern Health treats the greatest number of publicly admitted patients of any public health service. Our secondary catchment area is the SLAs for which Eastern Health treats the second greatest number of publicly admitted patients. Despite some slight differences in the catchments of specific clinical programs (for example Mental Health and Statewide Services) the primary and secondary catchments as defined above will constitute the Eastern Health catchment for all analysis within this Strategic Plan.

According to Victoria in Future 2015, the population residing within Eastern Health’s primary catchment area is almost 774,000 individuals, with a further 324,000 residing within our secondary catchment area. The SLAs which constitute Eastern Health’s primary and secondary catchment areas, and their respective populations (forecast as at 30 June 2016) are detailed in Figure 5a below.

Figure 5a – Eastern Health’s primary and secondary catchments and populations

Primary Catchment Area	Population	Secondary Catchment Area	Population
Boroondara - Camberwell N.	48,251	Boroondara – Hawthorn	40,343
Boroondara - Camberwell S.	56,004	Boroondara– Kew	33,316
Knox– North-East	68,121	Cardinia – North	26,646
Knox – North-West	47,573	Knox South	42,322

Manningham - West	94,478	Monash - Waverley East	83,097
Manningham – East	26,706	Monash - Waverley West	54,304
Maroondah - Croydon	64,033	Murrindindi – East	6,376
Maroondah - Ringwood	48,937	Murrindindi – West	7,336
Whitehorse - Nunawading W.	54,945	Nillumbik - South	30,373
Whitehorse - Box Hill	62,896		
Whitehorse - Nunawading E.	51,108		
Yarra Ranges – Dandenongs (part of Yarra Ranges South-West)	29,545		
Yarra Ranges - North	13,487		
Yarra Ranges – Lilydale (part of Yarra Ranges South-West)	77,323		
Yarra Ranges – Seville (part of Yarra Ranges South-West)	13,890		
Yarra Ranges – Pt B (Upper Yarra Valley)	229		
Yarra Ranges - Central	16,465		
Sub-Totals	773,992		324,115
Grand Total			1,098,107

Source: Department of Environment, Land, Water and Planning, Victoria in Future 2015

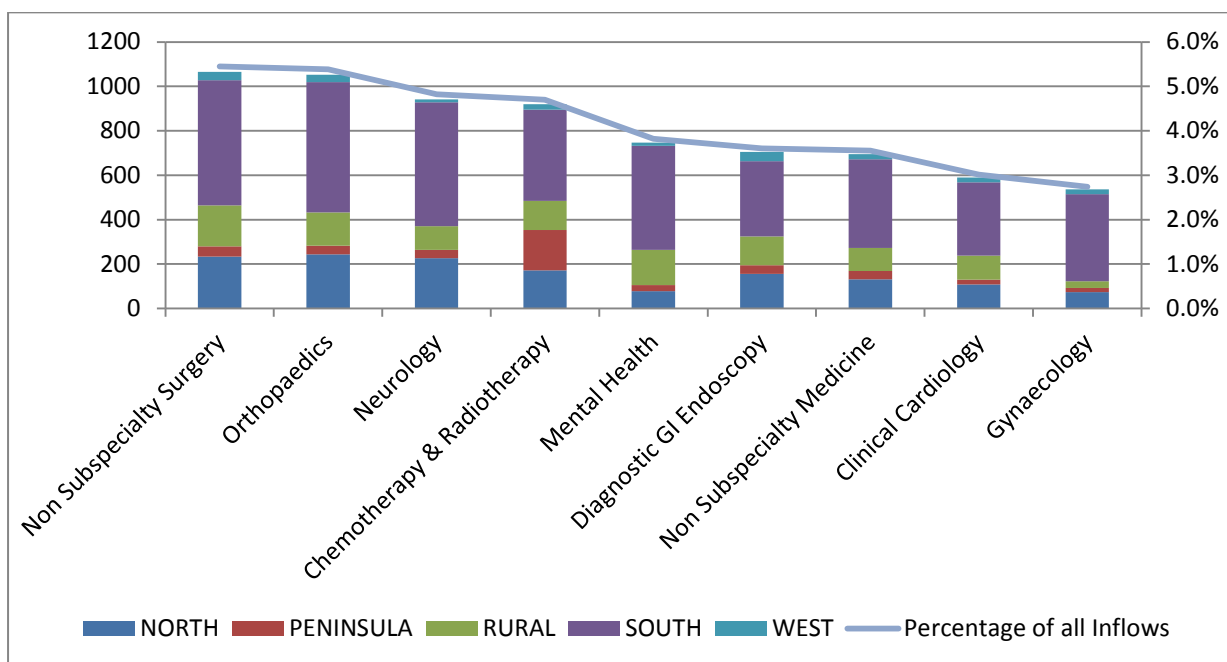
Figure 5b illustrates Eastern Health’s primary and secondary catchment areas, which geographically are the largest of any public health service in Melbourne. This figure also shows the locations of our major sites within the catchment area. The primary catchment alone covers in excess of 2,800 square kilometres.

Figure 5b Eastern Health’s Primary and Secondary Catchment areas



Seventy-five per cent of Eastern Health’s admissions to hospital relate to patients who live within our primary catchment area. This is a drop of 7 percentage points over the 5 years since our last strategic plan was developed, which provides an indication that Eastern Health is becoming a more significant statewide provider with larger inflows from other regions. These patients come to Eastern Health from a range of areas with a wide range of health conditions. The largest inflow is from the Southern Planning Region for haemodialysis which collectively accounts for almost one third of all patients treated outside of their residential catchment by Eastern Health. Excluding this group, the largest inflows by source and MCRG are provided in Figure 5c.

Figure 5c Top MCRG and source of Admissions to Eastern Health outside Primary catchment (excluding Dialysis)



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

5.1. Population forecasts

Figure 5d illustrates that the population in Eastern Health’s primary and secondary catchment areas is expected to grow at a significantly slower rate than forecast for Metropolitan Melbourne. This is in large part due to the fact that the eastern region of metropolitan Melbourne does not contain a designated population growth corridor. The highest rate of growth within the primary catchment is for Yarra Ranges – Lilydale which is forecast to grow in population from 77,323 individuals (2016 est.) to 95,025 by 2031, a growth rate of 22.9%. By contrast, the LGA of Yarra Ranges – Dandenongs is forecast to see a small decline in population of 0.9% (256 individuals) over the same time period.

Figure 5d Eastern Health’s catchment population by Local Government Area

Local Government Area	Population		
	2016	2031	% Growth
Boroondara - Camberwell N.	48,251	53,356	10.6%
Boroondara - Camberwell S.	56,004	59,257	5.8%
Knox – North-East	68,121	78,644	15.4%
Knox – North-West	47,573	54,633	14.8%
Manningham - West	94,478	110,253	16.7%
Manningham – East	26,706	28,232	5.7%
Maroondah - Croydon	64,033	73,343	14.5%

Maroondah - Ringwood	48,937	56,859	16.2%
Whitehorse - Nunawading W.	54,945	60,183	9.5%
Whitehorse - Box Hill	62,896	75,273	19.7%
Whitehorse - Nunawading E.	51,108	54,228	6.1%
Yarra Ranges – Dandenongs (part of Yarra Ranges South-West)	29,545	29,289	-0.9%
Yarra Ranges - North	13,487	14,301	6.0%
Yarra Ranges – Lilydale (part of Yarra Ranges South-West)	77,323	95,025	22.9%
Yarra Ranges – Seville (part of Yarra Ranges South-West)	13,890	15,199	9.4%
Yarra Ranges – Pt B (Upper Yarra Valley)	229	257	12.0%
Yarra Ranges - Central	16,465	17,608	6.9%
Primary Catchment Area Total	773,992	875,940	13.2%
Boroondara – Hawthorn	40,343	47,876	18.7%
Boroondara – Kew	33,316	35,316	6.0%
Cardinia – North	26,646	37,499	40.7%
Knox South	42,322	45,920	8.5%
Monash - Waverley East	83,097	87,689	5.5%
Monash - Waverley West	54,304	61,037	12.4%
Murrindindi – East	6,376	7,618	19.5%
Murrindindi – West	7,336	8,543	16.5%
Nillumbik - South	30,373	30,693	1.1%
Secondary Catchment Area Total	324,115	362,192	11.7%
Metropolitan Melbourne	4,623,137	5,982,778	29.4%
Victoria	6,053,354	7,701,106	27.2%

Source: Department of Environment, Land, Water and Planning, Victoria in Future 2015

5.2. Our ageing population

While it is not anticipated that Eastern Health’s catchment will face significant growth in the overall population of its catchment, it is a different story when the ageing of that same population is considered. The median age of the population has been rising for many years owing to both a long-term decrease in fertility and increases in the average life expectancy of Victorians. The large cohort of the population colloquially referred to as ‘Baby Boomers’, born between 1946 and 1964, are now aged

between 51 and 70 years. This large population group will continue to age and increase their demand on health care services as they do so.

All of the Local Government Areas which make up Eastern Health's primary catchment area have a higher average age than Victoria or metropolitan Melbourne. Overall, this is expected to increase over the forecast period to 2031: currently 22.8% of the catchment population is aged 60+ (19.0% for metropolitan Melbourne) which is expected to increase to 28% by 2031 (22.4% for metropolitan Melbourne).

Significantly, the primary catchment population below the age of 35 years is expected to grow at a rate well below the catchment average and the number of individuals aged between 50 and 59 years is expected to fall, while the population between 80-84 and 85+ is expected to grow by 90.0% and 80.6% respectively.

The breakdown of population by age for Eastern Health's primary catchment both now and into the future is presented in Figure 5e.

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Figure 5e Catchment population growth by age

Age Group	Eastern Health Catchment				2031		Percentage of population by age at 2031	
	2016		Growth 2016-2031		Population	Percentage	Melbourne Metro	Victoria
	Population	Percentage	Population	Percentage				
00-04	42978	5.6%	5162	12.0%	48140	5.5%	6.0%	5.9%
05-09	44550	5.8%	4703	10.6%	49253	5.6%	6.1%	6.0%
10-14	45657	5.9%	3755	8.2%	49412	5.6%	5.9%	5.9%
15-19	48996	6.3%	2083	4.3%	51079	5.8%	6.0%	5.9%
20-24	53051	6.9%	1250	2.4%	54301	6.2%	6.5%	6.2%
25-29	54048	7.0%	-230	-0.4%	53818	6.1%	6.8%	6.5%
30-34	51141	6.6%	3345	6.5%	54485	6.2%	7.0%	6.8%
35-39	47608	6.2%	9474	19.9%	57082	6.5%	7.4%	7.1%
40-44	51423	6.6%	8133	15.8%	59556	6.8%	7.5%	7.2%
45-49	54913	7.1%	200	0.4%	55112	6.3%	7.0%	6.8%
50-54	52817	6.8%	-4061	-7.7%	48757	5.6%	5.9%	5.8%
55-59	50093	6.5%	-645	-1.3%	49448	5.6%	5.5%	5.6%
60-64	43505	5.6%	6762	15.5%	50266	5.7%	5.1%	5.4%
65-69	40085	5.2%	6257	15.6%	46342	5.3%	4.5%	4.9%
70-74	32178	4.2%	11507	35.8%	43685	5.0%	4.1%	4.5%
75-79	24680	3.2%	13369	54.2%	38049	4.3%	3.4%	3.7%
80-84	17451	2.3%	15711	90.0%	33162	3.8%	2.7%	2.9%
85+	18817	2.4%	15176	80.6%	33992	3.9%	2.6%	2.7%
Total	773991		101949	13.2%	875940			

Source: Department of Environment, Land, Water and Planning, Victoria in Future 2015

Older people generally have a much higher demand for health services than younger people as a result of challenges associated with managing multiple chronic illnesses. It is this ageing of our catchment population which is expected to have the biggest impact on demand for health services into the future. This includes both the number of admissions to hospital, and even more significantly, the number of bed days (i.e. a measure of the volume of resources) they occupy over a period. In the 2014-15 year, consumers aged 70-84 and 85+ required a much greater proportion of Eastern Health resources than their population proportion would suggest, as demonstrated in Figure 5f.

Figure 5f Eastern Health activity and resource utilisation by age group 2014-15

Age Group	Total Separations	% Total Separations	Total bed days	% Total bed day	% population
0-14	9529	6.7%	23558	5.6%	17.2%
15-44	32890	23.0%	79101	18.9%	39.6%
45-69	49130	34.3%	117891	28.2%	31.2%
70-84	39865	27.8%	126553	30.3%	9.6%
85+	11772	8.2%	70382	16.9%	2.4%

Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

5.3. Community profile

Information about the Eastern Metropolitan region (the majority of which constitutes our primary catchment area) has been extracted from the Department of Health and Human Services' Eastern Metropolitan Region statistical profile compiled utilising data from 2014. Eastern Health wishes to acknowledge the Department for this work which has informed the development of this Strategic Plan.

Religion, culture, ethnicity and our indigenous population

In comparison with Victoria, the eastern metropolitan region has lower proportions of people born in Australia and higher proportions of people born in non-English speaking countries. Across the entire eastern metropolitan region, there is a lower proportion of people born in Australia (68.5%) than the rest of Victoria (72.3%). Cultural diversity within the region is higher than the Victorian average with almost 25% of the population born in a non-English speaking country. The largest proportion of these individuals were born in China, India, Malaysia and Italy respectively. A slightly larger percentage (26.7%) speaks a language other than English when at home, including Mandarin, Cantonese, Greek, Italian and Vietnamese.

Despite the entire region having a population who identify as Aboriginal or Torres Strait Islander below the statewide average, there is a larger than average percentage in the Yarra Ranges LGA.

The eastern region sees a higher than average number of new settler arrivals into the region per 100,00 population, with a relatively lower percentage of these considered as 'humanitarian' arrivals.

Socio-economic status

Employment and income levels across the region are slightly above the Victorian average, with a smaller percentage of individuals on low wages (less than \$600 per week). In addition, the rate of eligible individuals receiving the age pension is below the statewide measure (indicating a higher rate a self-

funded retirees). Despite these income levels, the level of food insecurity across the region is on par with the statewide average.

A lower than average number of households within the region are experiencing mortgage stress, however the percentage experiencing rental stress is in-line with the state average. This is despite the percentage of rental housing which is considered 'affordable' being markedly below the statewide average (2.7% vs 18.4%).

The level of education amongst the population of the eastern region ranks extremely well when considered across the state, with the LGAs ranked highest in the state for the percentage of students attaining minimum literacy and numeracy skills as well as the percentage completing year 12 and who have completed a higher education qualification.

Crime within the region is well below the state average including in areas such as drug usage and possession, family violence incidents and issues associated with gaming machine and gambling losses.

While the overall picture presented by the figures above is one of a region with strong economic and social credentials, they mask a significant section of the catchment population which faces marked socio-economic disadvantage. These areas tend to include those areas further east within the catchment including:

- Knox: Bayswater, The Basin, Boronia and Ferntree Gully
- Yarra Ranges: Woori Yallock, Launching Place, Warburton, Yarra Junction, Millgrove, Yarra Glen, Dixons Creek and Healesville.

Health and wellbeing

The population of the eastern metropolitan region in general, experiences a higher quality of life and health than that of the average Victorian.

Overall life expectancy across the region is slightly higher than the statewide average for both males and females. People reporting fair or poor health and those reporting a high to very high degree of psychological distress also constitute lower than average percentages.

The overall health of the local community including such things as rates of smoking, obesity, excess alcohol consumption, poor diet and levels of physical activity are all on par with or better than the respective statewide average for these indicators. In addition, the rates of high blood pressure, heart disease and osteoporosis are also either in line with or less than the statewide averages. The rates of cancer screening across the population for common cancer types (e.g. breast cancer and bowel cancer) are all above average, which may in part contribute to the higher than average incidence of cancer per 100,000 individuals (for both males and females) as a result of better identification.

As might be expected in consideration of the information above, the rates of avoidable death from such diseases as cancer, cardiovascular disease and respiratory disease are all below their respective statewide averages.

Access to health services

Associated with the management of the health of the population of the eastern metropolitan region, the population overall has a relatively high rate of access to health services including General Practitioners, Health and Community Care services (HACC) and hospital services, both inpatient care and emergency departments. This means that Eastern Health experiences greater demand for its emergency, inpatient and ambulatory care services per 100,000 head of population than most other health services.

6 The care we provide

6.1. Our health services

Eastern Health provides a comprehensive range of safe, high quality health services to people and communities that are diverse in culture, age, socioeconomic status, population and healthcare needs. Our health services are organised into clinical programs which run across the organisation as detailed in figure 6a

Figure 6a: Eastern Health Clinical Service Profile

Directorate	Clinical Program	Clinical Service Group	Clinical Support
ACUTE HEALTH	Emergency and General Medicine	1. General Medicine	Clinical Support Services (Including, but not limited to Pathology, Medical Imaging, Pharmacy, Allied Health, Anaesthetics, Biomedical Engineering, Health Information Services, etc.)
		2. Emergency Services	
		3. Intensive Care Services	
	Women & Children's	4. Gynaecology	
		5. Maternity Services	
		6. Neonatology	
		7. Paediatric Services (includes Paediatric Medicine, Paediatric Surgery)	
	Specialty Medicine	8. Cardiology (includes interventional cardiology)	
		9. Dermatology	
		10. Endocrinology	
		11. Endoscopy services	
		12. Gastroenterology	
		13. Haematology	
		14. Infectious Diseases	
		15. Neurology (includes Acute Stroke and Multiple Sclerosis Services)	
		16. Oncology, Chemotherapy and Radiotherapy	
		17. Renal Medicine and Dialysis	
		18. Respiratory Medicine	
		19. Rheumatology	
	Surgery	20. Breast & Endocrine Surgery	
		21. Colorectal Surgery	
		22. Ear, Nose & Throat Surgery	
		23. General Surgery	
		24. Ophthalmology	
		25. Orthopaedic Surgery	

CONTINUING CARE, AMBULATORY & COMMUNITY, MENTAL HEALTH AND STATEWIDE SERVICES		26. Plastic Surgery	
		27. Thoracic Surgery	
		28. Upper Gastro-Intestinal Surgery (includes Bariatric Surgery)	
		29. Urology	
		30. Vascular Surgery	
	Mental Health		31. Adult Mental Health
			32. Acute Aged Persons' Mental Health
			33. Child and Youth Mental Health Service (CYMHS)
	Continuing Care		34. Geriatric evaluation and management
			35. Residential Aged Care
			36. Palliative Care
			37. Rehabilitation
	Ambulatory & Community Services		38. Ambulatory Services
			39. Transition Care Program (TCP)
			40. Community Health
	Statewide Services		41. Turning Point, Alcohol and Other Drugs
		42. Spectrum (statewide service for people who have personality disorders)	

Eastern Health has a health service delivery system which supports both patient flow and the standardisation of care. This system is depicted in figure 6b

Figure 6b: Eastern Health Health Service Delivery System



6.2. Activity

Eastern Health is a busy metropolitan health service providing for the needs of the community. This includes the local community in eastern metropolitan Melbourne, as well as the community of Victoria or in some cases, nationally.

Figure 6c illustrates the extent to which activity across Eastern Health has changed over the past five years – particularly community, ambulatory and outpatient activity. This shift towards greater delivery of health care services via an ambulatory, non-hospital-based model is occurring across the health system more broadly and will continue to be a focus into the future.

Figure 6c: Eastern Health activity 2010/11 – 2014/15

Type of activity	2010/11	2011/12	2012/13	2013/14	2014/15	5-year growth
Inpatient separations	146727	147139	131527	135584	143186	-2.4%
Inpatient bed days	429,325	426,342	406,840	402,605	417,485	-2.8%
Emergency Department presentations	141202	141290	142791	143365	151823	7.5%

Outpatient attendances	153,309	169,992	189,737	204,083	186,015	21.3%
Other occasions of services (Ambulatory, community, telephone and online)	385421	325610	364009	382650	397507	3.1%

Source: Eastern Health

As noted earlier, older people generally have a much higher demand for health services than younger people. Over the past 5 years, we have seen an overall drop in inpatient separations of 2.4%, and a slightly greater drop in total bed days. While this generally supports our focus on getting patients home faster, a breakdown of this information by age groups tells a very particular story. Figure 6d indicates the number of admissions by age group, while figure 6e provides the total bed days by these same age groups over the past 5 years. Eastern Health has seen a significant reduction in total admissions for those under the age of 69 however above 70, the number of admissions has grown markedly. Achieving reduced lengths of stay has been successful in all age groups except those aged 85 and above.

Figure 6d: Eastern Health Inpatient Admissions by age group 2010/11 – 2014/15

Age Group	2010/2011	2011/2012	2012/2013	2013/2014	2014/2015	Growth rate 2010/11 to 2014/15
0-14	10,236	10,089	8,315	8,979	9,529	-6.9%
15-44	37,551	37,265	30,466	30,986	32,890	-12.4%
45-69	51,333	49,811	44,880	45,814	49,130	-4.3%
70-84	37239	39000	36797	38859	39865	7.1%
85+	10368	10974	11069	10946	11772	13.5%
Grand Total	146727	147139	131527	135584	143186	-2.4%

Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

Figure 6e: Eastern Health Inpatient bed days by age group 2010/11 – 2014/15

Age Group	2010/2011	2011/2012	2012/2013	2013/2014	2014/2015	Growth rate 2010/11 to 2014/15
0-14	23833	24197	21983	22914	23558	-1.2%
15-44	84773	85944	78963	76332	79101	-6.7%
45-69	120200	118381	114336	113130	117891	-1.9%
70-84	137213	135649	128771	127755	126553	-7.8%
85+	63306	62171	62787	62474	70382	11.2%

Grand Total	429325	426342	406840	402605	417485	-2.8%
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Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

This picture of growth in demand particularly within the older population across the Eastern health catchment can also be seen in presentations to our three Emergency Departments. While the overall growth in demand was a healthy 7.5% over the 5 year period, this level of demand varied across age groups as can be seen in table 6f. The majority of this growth in demand was focused at Box Hill Hospital (21.7%) with much lower growth in demand experienced at Maroondah Hospital (4.3%) and a small decline in demand at Angliss Hospital (-3.7%).

Figure 6f: Eastern Health Emergency Department presentations by age group 2010/11 – 2014/15

Age Group	2010/2011	2011/2012	2012/2013	2013/2014	2014/2015	Growth rate 2010/11 to 2014/15
0-14	26897	26795	25760	27033	28580	6.3%
15-44	54468	54808	55289	54193	57147	4.9%
45-69	33096	33051	33640	34171	36409	10.0%
70-84	18394	18209	18956	18773	19748	7.4%
85+	8347	8427	9146	9195	9939	19.1%
Grand Total	141202	141290	142791	143365	151823	7.5%

Source: Department of Health and Human Services: Emergency Forecasting Model 2016

6.3. Self-sufficiency

Eastern Health has considered how well each of the clinical services is coping with public demand for inpatient services amongst people living in Eastern Health's primary catchment area. The proportion of public inpatient demand for health services that Eastern Health is meeting is referred to as our 'self-sufficiency'. Health Services utilise a benchmark of 70 per cent as a target where they are said to be self-sufficient in meeting the needs of the local population for each clinical stream. This recognises that up to 30 per cent of public demand may be met outside a health service's local residential area for a number of reasons including personal choice, higher level service requirements or admission to a hospital close to where people work, visit or holiday.

In the 2014-15 financial year, Eastern Health's overall self-sufficiency rate was 68%. This is the same as reported in Eastern Health 2022: The Strategic Clinical Service Plan 2012-2022, and 5 percentage points higher than reported in our 2010-2015 Strategic Plan. Between each clinical stream, there was significant variation however, from a highest rating of 81% for mental health, to the lowest rates (i.e. below 10%) for services which Eastern Health does not currently provide, which include transplantation; dentistry and ophthalmology. Eastern Health continues to focus on improving our self-sufficiency for the community by aligning our services and resources to meet changing healthcare needs. The recent

capital redevelopment at Box Hill Hospital in particular, has provided additional capacity for us to do this.

Demand for healthcare services is not met only within the public sphere however. The percentage of overall inpatient activity met by the private healthcare providers in 2014-15 was 53%. This varies considerably across the different clinical streams, from extremely low rates for Geriatric Evaluation and Management (GEM) and Alcohol and Drug services, to very high rates for such things as dentistry, ophthalmology and palliative care.

Figure 6g provides details of the self-sufficiency and private activity from Eastern Health's primary catchment area.

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Figure 6g Eastern Health Primary Catchment Activity and Self-sufficiency 2014-15

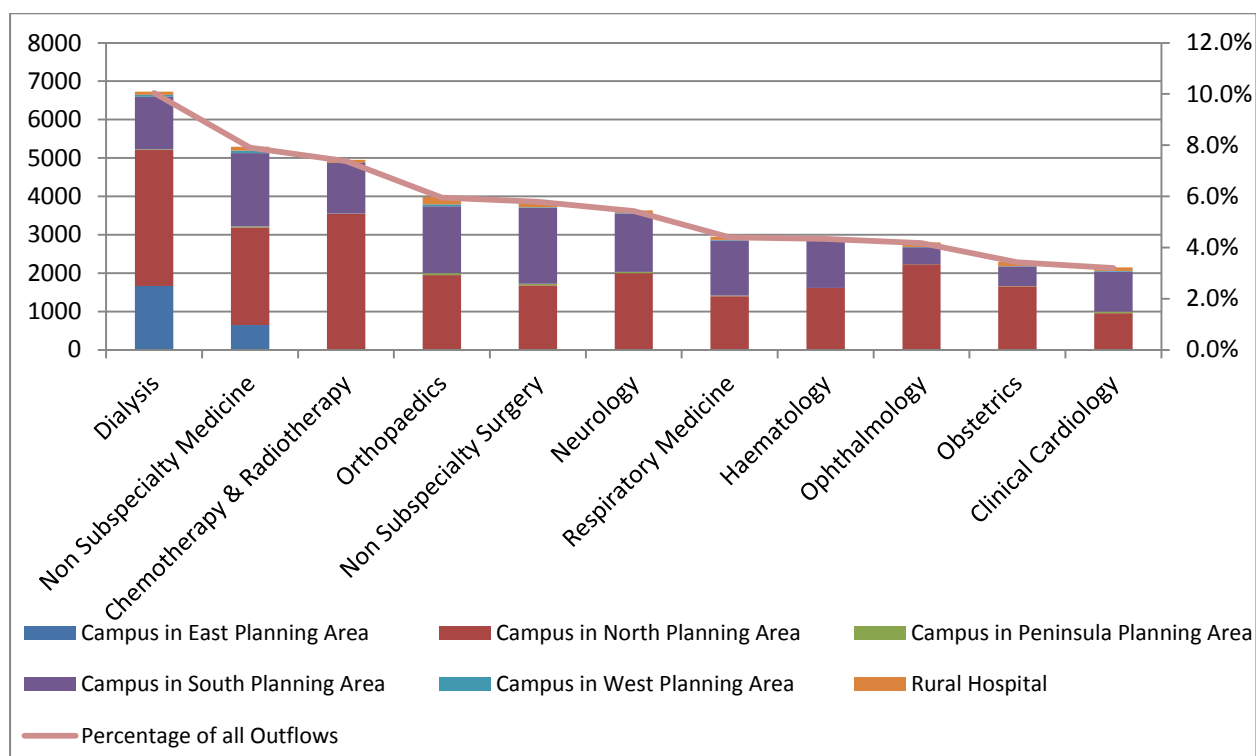
MCRG Name	All Admissions	All Public Admissions	EH Admissions	Private Admissions	% Private Admissions	Self-sufficiency	EH 2022 Self-sufficiency	Movement in Self-sufficiency
Mental Health	13,283	2,535	2,169	10,748	81%	85.6%	74%	11.6%
Dialysis	39,308	29,523	24,299	9,785	25%	82.3%	74%	8.3%
Clinical Cardiology	9,412	6,831	5,355	2,582	27%	78.4%	78%	0.4%
Rheumatology	757	449	341	308	41%	75.8%	48%	27.8%
Diagnostic GI Endoscopy	28,769	5,375	4,070	23,394	81%	75.7%	73%	2.7%
Unqualified Neonate	4,072	4,034	3,022	39	1%	74.9%	75%	-0.1%
Upper GIT Surgery	2,933	1,595	1,190	1,338	46%	74.6%	80%	-5.4%
GEM	1,996	1,982	1,465	14	1%	73.9%	69%	4.9%
Colorectal Surgery	2,344	984	717	1,360	58%	72.9%	76%	-3.1%
Non-Subspecialty Surgery	14,597	9,305	6,657	5,292	36%	71.5%	75%	-3.5%
Gastroenterology	4,480	3,182	2,276	1,298	29%	71.5%	77%	-5.5%
Obstetrics	9,859	5,987	4,254	3,872	39%	71.1%	66%	5.1%
Breast Surgery	1,810	559	397	1,251	69%	70.9%	69%	1.9%
Rehabilitation Sub-Acute	6,642	2,300	1,602	4,342	65%	69.7%	66%	3.7%
Drug & Alcohol	1,046	1,046	721	-	0%	68.9%	81%	-12.1%
Respiratory Medicine	12,028	6,765	4,651	5,263	44%	68.7%	74%	-5.3%
Orthopaedics	23,011	9,130	6,265	13,881	60%	68.6%	70%	-1.4%
Urology	10,585	4,128	2,772	6,457	61%	67.2%	65%	2.2%
Palliative Care	7,994	926	613	7,068	88%	66.1%	65%	1.1%
Immunology & Infections	4,576	3,207	2,100	1,369	30%	65.5%	67%	-1.5%
Neurology	9,330	7,416	4,749	1,914	21%	64.0%	67%	-3.0%
Plastic & Reconstructive Surgery	4,116	2,930	1,869	1,187	29%	63.8%	61%	2.8%
Vascular Surgery	2,689	996	634	1,693	63%	63.6%	55%	8.6%
Endocrinology	2,510	1,612	1,016	898	36%	63.0%	63%	0.0%
Gynaecology	13,034	3,779	2,355	9,255	71%	62.3%	65%	-2.7%
Oncology	3,690	1,926	1,165	1,764	48%	60.5%	50%	10.5%

Chemotherapy & Radiotherapy	20,487	9,063	5,440	11,424	56%	60.0%	64%	-4.0%
Qualified Neonate	2,003	1,362	818	641	32%	60.0%	58%	2.0%
Dermatology	951	665	369	286	30%	55.5%	58%	-2.5%
Haematology	8,630	5,061	2,802	3,569	41%	55.4%	52%	3.4%
Non-Subspecialty Medicine	21,681	8,608	4,668	13,073	60%	54.2%	70%	-15.8%
Interventional Cardiology	5,029	1,587	850	3,442	68%	53.5%	68%	-14.5%
Ear, Nose & Throat	6,057	2,512	1,331	3,546	59%	53.0%	56%	-3.0%
Psychiatry	394	345	182	49	12%	52.8%	60%	-7.2%
Renal Medicine	2,349	1,541	813	809	34%	52.7%	54%	-1.3%
Head & Neck Surgery	1,090	396	204	695	64%	51.6%	48%	3.6%
Uncategorised	417	95	47	322	77%	48.9%	n/a	n/a
Rehabilitation Acute	76	23	10	53	70%	43.5%	48%	-4.5%
Extensive Burns	74	65	28	9	12%	43.4%	47%	-3.6%
Unallocated	319	125	54	195	61%	43.4%	n/a	n/a
Tracheostomy	247	193	75	54	22%	38.6%	51%	-12.4%
Neurosurgery	2,974	1,373	478	1,601	54%	34.8%	35%	-0.2%
Cardiothoracic Surgery	723	323	73	400	55%	22.4%	24%	-1.6%
Posthumous Organ Procurement	5	5	1	-	0%	20.0%	0%	20.0%
Ophthalmology	14,111	2,327	99	11,785	84%	4.2%	8%	-3.8%
Dentistry	4,703	355	1	4,348	92%	0.3%	n/a	n/a
Transplantation	45	45	-	-	0%	0.0%	0%	0.0%
Grand Total	327223	154560	105055	172663	53%	68%	68%	

Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

Patients travelling outside of Eastern Health’s primary catchment area for their healthcare needs will occur for a range of reasons. These can include the location of their employment, family or where they are at the time they become ill (e.g. if they are holidaying elsewhere in Victoria). The outflow of patients to each area for the top MCRGs is provided in Figure 6h.

Figure 6h: Top Eastern Health outflows by MCRG



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

It is worth recognising that the volume of patients flowing into Eastern Health’s services is less than one third of the total outflow by number of admissions. In addition, while the largest inflows are from the Southern Planning Area, the largest outflows are to the North Planning Area. This is likely to relate to both the availability of specialist tertiary hospitals within the Northern Planning Area (e.g. Mercy Hospital for Women, Peter MacCallum Comprehensive Cancer Institute, The Royal Victorian Eye & Ear Hospital and the Royal Dental Hospital) and in part, the location of Eastern Health’s services within the catchment itself.

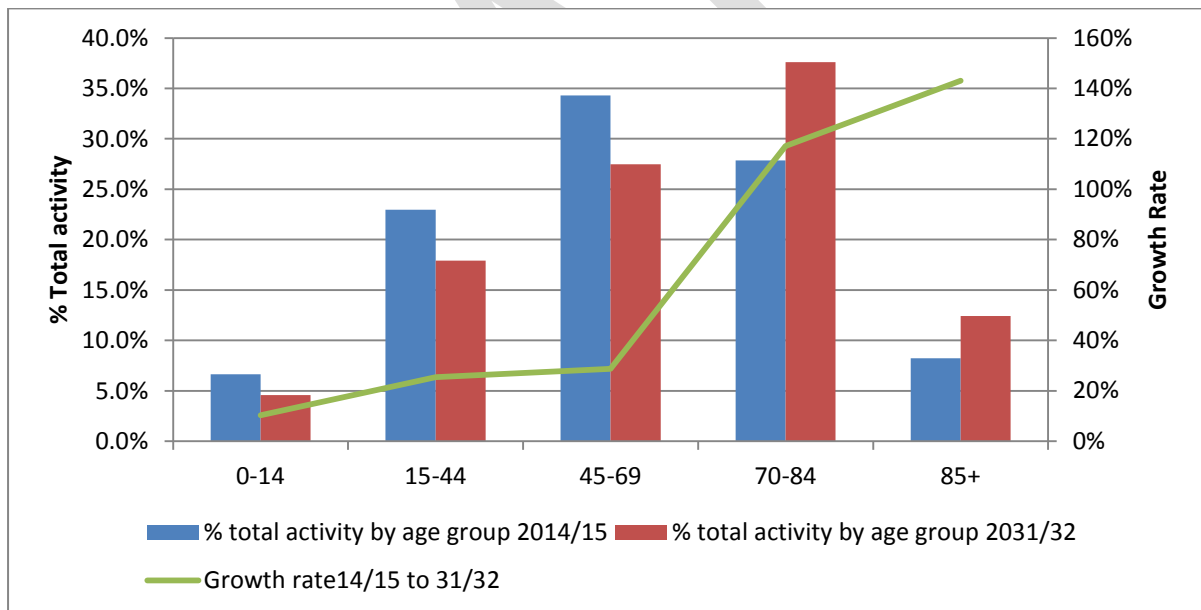
While self-sufficiency is not typically calculated for emergency presentations, it is worth recognising 77% of all emergency department activity was provided to residents within the primary catchment, with significant levels of demand from adjacent Local Government areas of Monash and Cardinia. In addition, Eastern Health consistently provides roughly 73% of all Emergency Department demand from our primary catchment. As might be expected, the Emergency Departments of partner organisations at Austin Hospital, Royal Victorian Eye and Ear, Royal Children’s and Monash Medical Centre also experience a relatively large volume of presentations from Eastern Health’s primary catchment.

6.4. Future demand for healthcare services

The future growth and ageing of the population (refer to sections 5.1 and 5.2 respectively) are expected to result in increasing demand for healthcare services into the future. This rising demand will be widespread across the majority of services and care types, however this change will not be uniform across all areas or age groups. With thanks to the Department of Health and Human Services, forecasting of service demand has been undertaken from 2014/15 to 2031/32 utilising a standardised model. This forecasting has identified that by 2031/32, demand for inpatient based services will see demand grow from 143,186 separations to 230,258 separations; a growth rate of 60.8%. Growth in demand from a total bed day perspective is forecast to be just over half this rate at 34.9%.

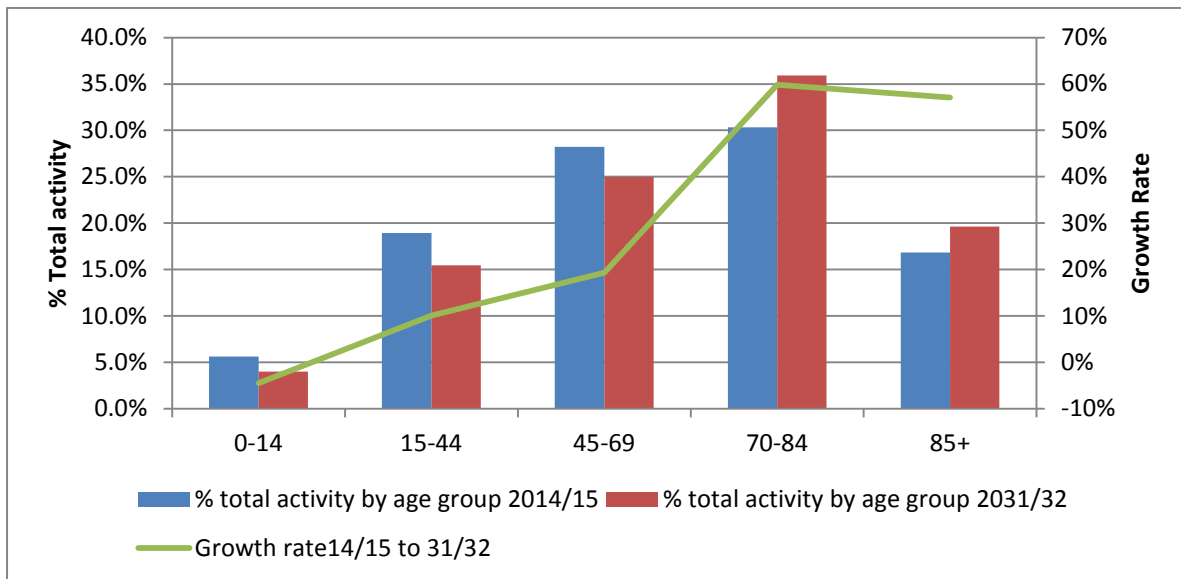
Figure 6i shows the proportion of both current and projected future inpatient activity by age group, including the relevant growth rate between 2014/15 and 2031/32. This figure uses separation numbers, while figure 6j shows this same information using total bed day data. Together, these figures clearly highlight that health service demand for those patients aged 70 and above will continue to grow at a much higher rate into the future than those aged below 70, both in terms of separations and bed days. Identifying and implementing alternative models of care (i.e. non-bed based) particularly for these patients will continue to be a focus for Eastern Health.

Figure 6i: Inpatient separations - current, future and growth by age group



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

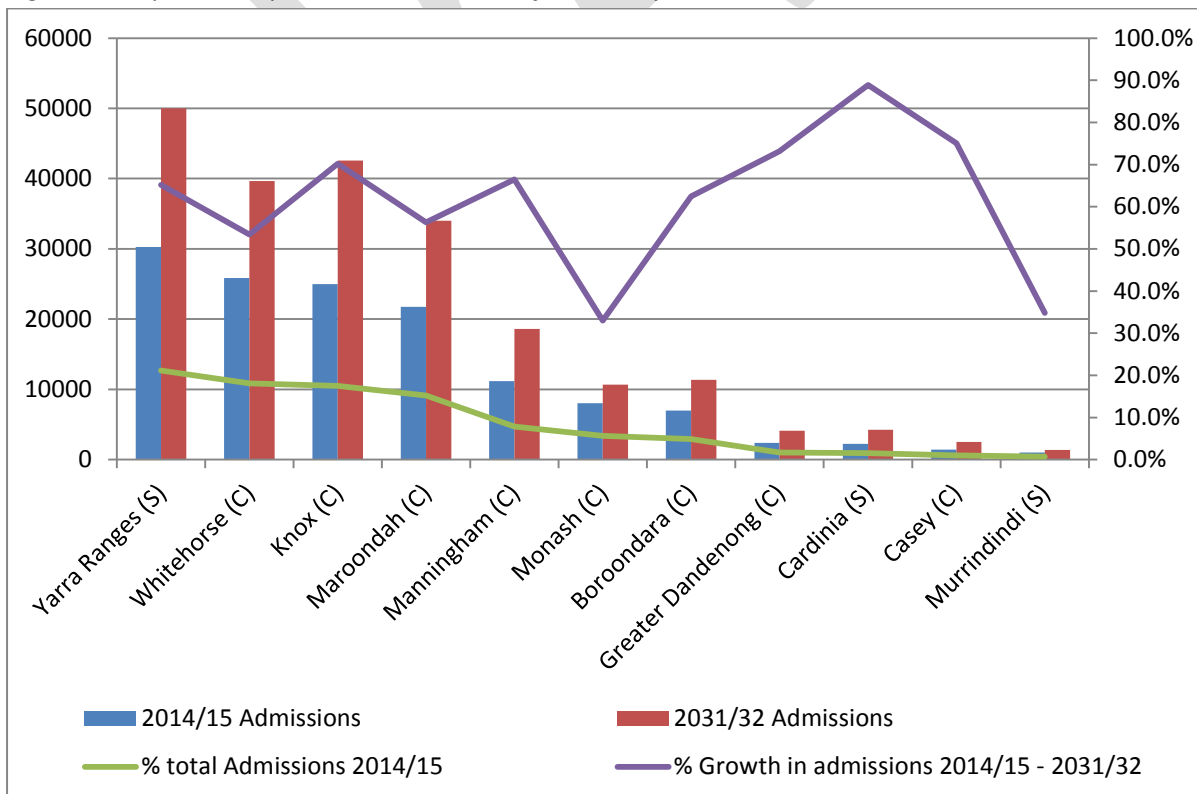
Figure 6j: Inpatient bed days - current, future and growth by age group



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

Just as forecast growth is not uniform across age groups, it is similarly not uniform across the Local Government Areas (LGAs) that Eastern Health serves. Figure 6k depicts the recent and projected demand for inpatient care (measured in separations) by LGA, including the respective growth rate and the percentage of total admissions from each of these LGAs from the 2014/15 financial year. It shows that the largest level of demand will come from Yarra Ranges, while a greater rate of demand growth into the future will see Knox take second place from Whitehorse.

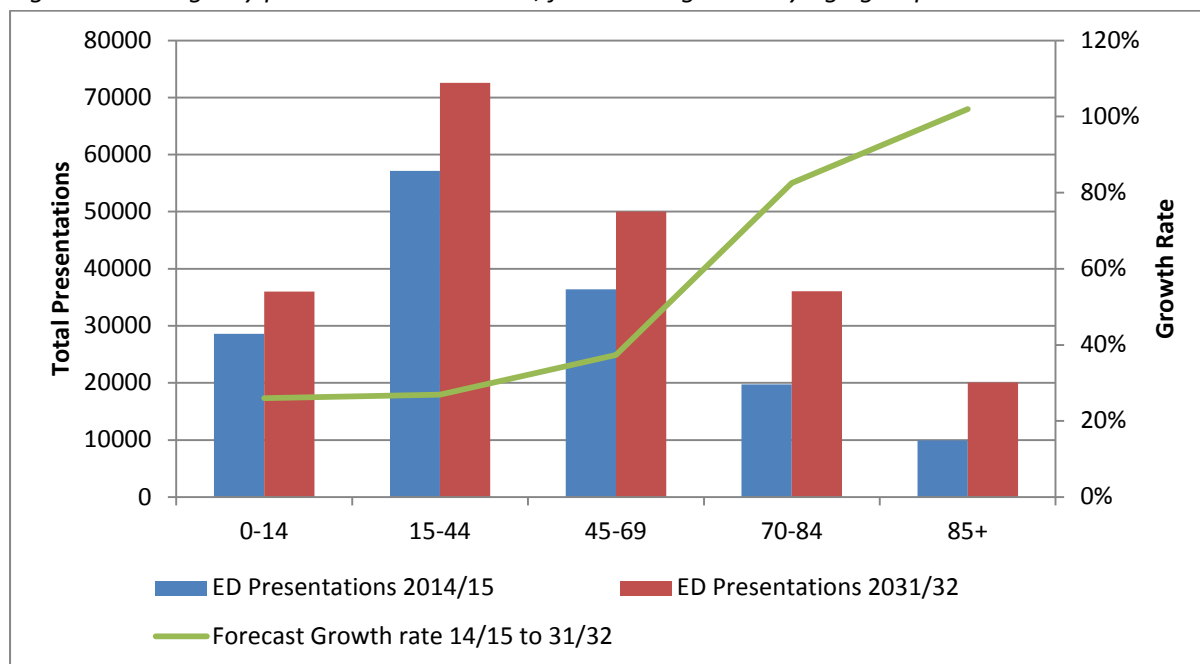
Figure 6k: Inpatient separations current and forecast by LGA



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

The future increase in Emergency Department presentations is also expected to be significant, with forecast growth of 41% projected between 2014/15 and 2031/32. This growth is equally skewed with higher rates of growth forecast in the older age cohort of the population, however this is not expected to materially change the current distribution of presentations with the 15-44 year age group constituting more than one third of this activity.

Figure 6l: Emergency presentations - current, future and growth by age group



Source: Department of Health and Human Services: Inpatient Forecasting Model 2016

7 Learning through research

Eastern Health aims to be a leading health service in the implementation of evidence-based research at the point of service delivery. We will change the way Eastern Health identifies and manages people with health issues, based upon what we learn through this research and that of others in the healthcare field. In accordance with recommendations from Eastern Health 2022: The Strategic Clinical Service Plan 2012 – 2022, we will pursue the development of an active research program in collaboration with our organisational partners, whereby research is translated into clinical practice and clinical practice is used to inform research with the impact being improved healthcare outcomes for the community.

The Board of Eastern Health approved the inaugural Eastern Health Research Strategy in 2011. This plan identified a number of gaps in the way we supported research across the organisation and five specific goals were laid out for the future. These were:

- i. expand research infrastructure supports;
- ii. increase the number of Eastern Health publications;
- iii. increase the number of research students;
- iv. apply for NHMRC certification of the Ethics Committee; and

- v. enhance research governance.

Eastern Health is pleased to be able to report that all 5 of these goals have either been met, or substantially progressed. For example:

- The establishment of an Office of Research and Ethics has resulted in the development of enhanced management systems and the formalisation of teaching and support for researchers. Eastern Health has now formally partnered with a clinical research agency.
- The establishment of the Eastern Health Foundation Research Grants Scheme in 2012. Through this scheme, dedicated research grants have been made available for researchers across the organisation in a wide range of fields. A total of 33 grants have been awarded in the 5 years since its inception, awarding some \$650,000 over this time through a competitive process overseen by the Eastern Health Foundation Research Advisory Committee.
- The number of publications referencing Eastern Health has steadily grown over recent years from 24 in 2010 to more than 200 in 2015.
- Research students include both postgraduate research students (i.e. Masters and PhD levels) and increasingly, junior medical staff (JMS) who undertake research as part of their training. In order to attract and retain these students, Eastern Health must have robust support systems in place, supported by expert staff. The increasing interest of JMS in research will need to be considered in future planning of the Office of Research and Ethics. Good research support is becoming an important attractant to trainee doctors. Over the past 4 years, Eastern Health has hosted more than 175 postgraduate research students.

Eastern Health aims to become a leader in the implementation of evidence-based research at the point of service delivery, embedding both the undertaking of research and implementing the outcomes into every day, standard work practices. At Eastern Health, research is currently being undertaken across a wide range of clinical areas and disciplines. These include areas such as:

- Ageing;
- alcohol and other drugs;
- mental health and wellbeing;
- neurology;
- oncology;
- haematology;
- endocrinology;
- respiratory medicine;
- gastroenterology;
- renal medicine;
- allied health;
- nursing; and,
- operational management (organisational).

All of this research activity would not be possible without the engagement and support of our clinical support services, such as pharmacy, medical imaging and pathology departments, which also undertake their own research activities. The support of our library services is also of great value to our ongoing research efforts.

A new research plan is currently under development which will continue to strengthen the development of research across the organisation. Eastern Health, through this strategic plan and its Research Plan, recognises the important role that research plays in the future of health care, its effective delivery and the management of our health service. In recognition of this, Eastern Health will:

- focus on knowledge translation to improve the way we utilise research findings to achieve improved health outcomes with our patients;
- continue to invest in research that will help overcome known challenges in population health within the eastern region of metropolitan Melbourne;
- continue to increase our focus on research, including in such areas as:
 - education and training of our students and staff;
 - population-based health service planning and evaluation;
 - population-based epidemiological studies;
 - laboratory-based research; and
 - clinical trial research.
- evaluate new models of care across an array of clinical streams and the entire continuum of care including ambulatory care models; and
- evaluate the effectiveness of quality and safety management systems in improving the quality of care and health outcomes.

8 Sharing our knowledge through education

Awaiting receipt of the OTED review report which is expected shortly.

9 Our organisational partners

Eastern Health is supported in the great work it does by a wide and varied range of organisational partners. These partners support Eastern Health across all areas of operations including health services, undergraduate and postgraduate education and research. In this way, Eastern Health ensures that it operates in an efficient and effective manner contributing to the great health and wellbeing of the community.

The relationships that we have with our partners vary in their form and function depending upon the nature of the partnership. Such partnerships can take the form of contracts, leases, licences, memoranda of understanding or informal arrangements.

Eastern Health currently has in place strategic partnerships with:

- Community representatives through a register and membership of the Eastern Health Community Advisory Committee;
- The Department of Health and Human Services;
- Other health services;
- Community Health services;
- The Eastern Region Primary Health Network;
- Universities and other training institutions;
- Research organisations and funding bodies; and
- Local governments and their agencies.

In addition to these partners, a wide range of products and services are procured by Eastern Health annually. In line with the requirements of the recent Health Purchasing Policy, and to support Eastern Health's strategy in regard to organisational sustainability, a Procurement Strategy has been developed. Procurement activity in 2015/16 (excluding building construction works) involved almost 2500 different suppliers. Ongoing relationships exist with many of these suppliers.

Like Eastern Health's own services, the nature and type of these partnerships change and evolve over time to ensure that services meet the needs of the community across all services and the full continuum of care.

10 Our challenges and opportunities

The healthcare system in which Eastern Health operates is constantly evolving in response to a broad range of internal and external factors. Changes in this environment will often present Eastern Health with a range of both challenges and opportunities which must be considered and acted upon. Over the past 5 years, Eastern Health has embedded a robust framework of Performance Excellence in order to manage these challenges and to take advantage of opportunities. Implementing and managing the scope and volume of change across the organisation required to do so will continue to present both an opportunity and a challenge for Eastern Health. Identifying and prioritising our focus of effort towards those initiatives which will deliver the greatest gains in health outcomes for individuals and the wider community will always receive significant attention. This Strategic Plan will guide Eastern Health in the decisions it makes to achieve great health outcomes with our community.

A number of key challenges and opportunities for Eastern Health into the future are detailed below.

10.1. Minimising variation and eliminating harm

The healthcare system of Victoria is primarily focussed on improving and maintaining the health and wellbeing of the population. Like all providers and organisations that operate within this system, Eastern Health holds above all things an imperative to do no harm to patients in their care. Errors in the individual delivery and collective management of healthcare services are internationally recognised as a significant issue. Harm to patients can occur as the result of such things as falls, medication errors, pressure injuries and instances of aggression. Eastern Health is not unique in the rate and type of incidents involving our patients and there continues to be a strong focus on minimising these errors. One of the ways in which such incidents can be addressed is through the standardisation of care, and in particular reducing the variation in service type and quality between providers, sites and programs.

The recent release of 'Targeting zero: Supporting the Victorian hospital system to eliminate avoidable harm and strengthen quality of care' by the Department of Health and Human Services has brought this into even greater focus. Eastern Health will continue to work toward successfully delivering on the themes embedded within this report which include:

- Making safety and quality improvement a core goal of the department and health system.
- Ensuring our board is highly skilled, independent and effective.
- Improving the flow of information to facilitate identification of deficiencies in care and focus attention on opportunities for improvement.

- Ensuring robust clinical governance and safety and quality performance.
- Engaging clinical leaders to strengthen, direct and lead efforts to improve safety and quality of care.
- Focussing our systems on improving patients' experience of care.

10.2. Equity of access in the face of changing demand

With the changes anticipated in the gross population and the specific demographics within the eastern metropolitan region of Melbourne, Eastern Health will continue to focus on ensuring equity of access to all consumers across all service streams and care models. The largest forecast areas of demand will be as a result of ageing of the local population. Specific information about the current and forecast population and service demand can be found in sections 5 and 6 respectively.

In addition to the increasing older population, the eastern region of Melbourne is both culturally and linguistically diverse. Consumers from a wide range of cultural and ethnic backgrounds receive care through Eastern Health and providing care which is sensitive to their individual needs is extremely important.

10.3. Consumer health literacy and expectations of care

The recent rise of the term 'Dr Google' is sometimes seen as both a positive and a negative by those in the healthcare industry. The overall health literacy of the community is slowly increasing, with the 'baby boomer' generation in particular taking a greater interest in their own health and wellbeing. While this interest can pose a range of challenges in a complex endeavour such as health, this level of ownership and responsibility can only be positive in the long term. Eastern Health will continue to work towards building the health literacy of our consumers in regard to their own health and wellbeing, self-management options and what they can expect in working together with Eastern Health.

10.4. Leadership and the workforce

Leading Eastern Health into the future will require a significant focus of effort from all staff. Ensuring the workforce has the skill and capability necessary to adapt to and implement organisation-wide changes to meet the needs of consumers will require leadership at all levels of the organisation. Like our past successes, the future success of Eastern Health and of this Strategic Plan will be built not just on the success of one individual, but of all our staff, working together.

As noted in section 2.5 of this Strategic Plan, the workforce of eastern Health primarily lives within the eastern catchment which it serves. In addition to the challenges noted above, this also means that the workforce overall is also getting older. Eastern Health is committed to continuing to achieve great outcomes for our consumers and community while at the same time supporting an ageing workforce.

10.5. Delivering services sustainably

Health care is a resource-intensive industry consuming time, money and environmental resources at a rising rate which is a focus for funding agencies, providers and the community as a whole. Achieving great outcomes for the resources invested in delivering health care is a key focus for Eastern Health. The sustainability of Eastern Health's operations from a financial and environmental perspective is a key priority for the organisation. A significant contribution towards achieving this

will be utilising the full capacity of our infrastructure and having efficient and effective systems to manage the flow of consumers both in and out of our service streams.

10.6. Managing health information and organisational knowledge

Amongst other things, health care is primarily a service and knowledge based industry. In order for services to be delivered and managed as efficiently and effectively as possible, health information at an individual level and system-wide level must be shared, appropriately analysed and considered to inform appropriate and timely decisions. Robust and comprehensive systems and processes are required to manage health information throughout the healthcare team, and across the continuum of care. Similarly, the management of organisational knowledge will continue to support the implementation of evidence-based clinical practice and the standardisation of care across the organisation.

10.7. Utilising technology to enhance care delivery and outcomes

Utilisation of technology within the healthcare industry in Australia is continuing to expand, however is still only delivering a fraction of the benefits which have been envisaged and achieved by providers in other countries. Eastern Health is leading Victoria in many of the ways that technology enhances the delivery and management of services across the organisation. The ongoing drive towards a fully-functioning electronic medical record across the continuum of care and the digitally-enabled Box Hill Hospital are just two examples of this. Eastern Health will continue to look for ways that technology can support the achievement of its strategic intent.

11 Enabling our strategy

Organisational planning does not stop at the level of this Strategic Plan. To support each of our four strategic initiatives, a specific, more detailed plan is required. Eastern Health currently has two such plans, being Eastern Health 2022: The Strategic Clinical Service Plan 2012-2022, and a Research Plan which is currently being revised. In addition, a plan for education services incorporating both undergraduate and postgraduate learning, and a plan for Eastern Health to develop as a high-performing organisation will both be developed following the release of this strategic plan.

a. Eastern Health 2022: The Strategic Clinical Service Plan 2012-2022

The Strategic Clinical Service Plan was developed in response to the many challenges facing health care and considers the services, in type and model of care and current activity and future service demand for health care in Melbourne's east. Eastern Health 2022 provides a plan of action across all clinical streams, including service, staffing and infrastructure requirements amongst others, which will ensure Eastern Health has both the capability and capacity to meet the health needs of the community in 2022.

b. Research Plan

In 2011 the inaugural Eastern Health Research Strategy was approved. This document was developed to support Eastern Health's aim to be a leading health service in the implementation of evidence-based research at the point of service delivery. Five key goals were identified in this plan. They were:

- i. expand research infrastructure supports;

- ii. increase the number of Eastern Health publications;
- iii. increase the number of research students;
- iv. apply for NHMRC certification of the Ethics Committee; and
- v. enhance research governance.

Since this time, great progress has been made and a second Research Plan is currently under development. It will build on the work of the inaugural Research Strategy to further strengthen Eastern Health's active research program to ensure our focus is on utilising research outcomes to improve healthcare outcomes.

c. Education Plan

The provision of education services at Eastern Health continues to be managed and delivered primarily based on discipline (refer to section 8 for details). The development of a comprehensive plan for education will ensure that Eastern Health effectively supports our current workforce in the development of specialist knowledge and expertise, as well as the next generation of the healthcare workforce.

d. People Strategy

Eastern Health's greatest asset is its people. The People Strategy recognises this and supports Eastern Health's strategic direction to continue to build the organisation as a great place to learn and work. This plan identifies four strategic areas of focus with linked objectives to enable an integrated and sustainable approach to strengthen all aspects of the employee lifecycle and organisational growth. These are:

- Attract and retain;
- Develop and engage;
- Align and deploy; and
- Strengthen Eastern Health's culture.

This plan is currently in its last year and a wide range of initiatives have now been implemented and embedded into the routine business of Eastern Health and its employees. This plan will be reviewed in the near future to ensure it remains contemporary and aligned with organisational strategy.

e. Great Digital Information Strategy

This strategy supports and enables Eastern Health's commitment to utilising Information and Communication Technology innovatively to support health care. Recognising recent achievements such as making progress towards an electronic medical record, the development of a digitally-enabled hospital at Box Hill and key software system upgrades, this plan identifies key areas of focus for ICT into the future, which will support Eastern Health to achieve its strategic intent. This plan identifies a future state of ICT that will provide:

- An application environment that supports the delivery of integrated, patient-centric information;
- An infrastructure environment that promotes security and accessibility of information;
- Organisational capability that allows Eastern Health to continuously improve the ICT environment.

In order to achieve this future state, the plan also provides a 5 year roadmap of activities around three phases of:

- Consolidating a 'core' of integrated health systems;
- Enhancing clinical capabilities to deliver the ICT vision; and
- Reviewing and refining the ICT to deliver health service-wide integrated solutions.

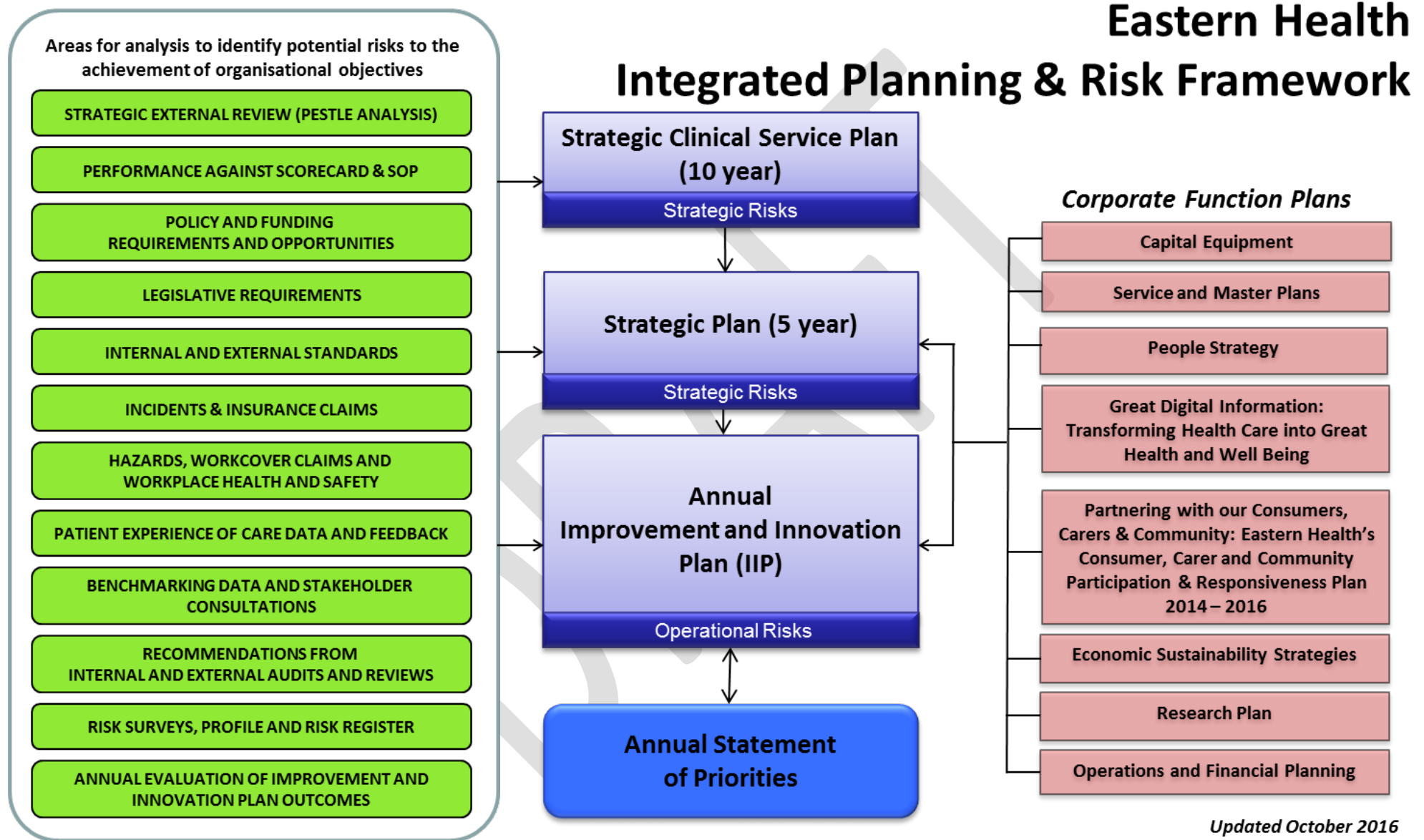
12 Implementing and monitoring our plan

13.1. Aligning organisational focus

Over the past 5 years, the majority of organisational systems and processes have developed and grown to strongly align with the elements contained within the last strategic plan. This new strategic plan builds on the success of the past 5 years and is an evolutionary step in strategic development. As such, it is expected that while some adjustment may be required in the first year of this plan, wholesale review of organisational systems will not be necessary.

Our existing Integrated Planning and Risk Framework (Figure 13a) will be one such system which will require a comprehensive review to ensure the alignment of planning and risk management within the context of this new strategic plan. It will recognise and acknowledge this strategic plan as the highest tier of planning, supported by plans for each of the four strategic initiatives and their implementation on an annual basis. The adoption of a new integrated planning and risk framework will support the widespread cascading of organisational priorities and reinforce system design to adapt to both current and future challenges and opportunities in line with Eastern Health's strategic intent.

Figure 13a: Eastern Health Integrated Planning and Risk Framework



13.2. Measuring and monitoring our success

Eastern Health utilises a scorecard reporting tool to monitor its performance towards achieving its strategic intent. Governance oversight of performance against the organisation's strategy is achieved through the reporting of the scorecard to both the Executive Committee and the Board on a monthly basis.

A range of strategic performance measures have been developed (refer to section 1 Overview for details) which will guide the organisation on its strategic journey. (At the time of issuing this draft for consultation, these measures and associated targets remain under review). The full suite of performance measures which are utilised by the organisation to monitor the achievement of the strategic plan will be reviewed in the first full year of this plan to ensure they are appropriately aligned with each of the 4 strategic initiatives and 14 priority goals.

A comprehensive progress review of the implementation of this strategy will be undertaken at the end of year 3 of this plan. A component of this review will include consideration of these indicators and their associated targets to ensure that they will continue to support the achievement of this strategic plan.

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