

Transforming healthcare transport: putting patients first for better care

The Victorian Healthcare Association's submission to the Non-Emergency Patient Transport (NEPT) review.

Executive summary

The Victorian Healthcare Association (VHA) welcomes the opportunity to respond to the review of NEPT and respond to the questions raised in the [NEPT Review Discussion Paper](#) (May 2023). The VHA notes the intent of the NEPT Review to strengthen care for Victorians by centralising the NEPT sector under a public entity. The Victorian Government made an election commitment on 18 November 2022 to review the existing procurement arrangements for NEPT.

The government identified market fragmentation and multiple private providers as a key driver for the NEPT review. A reference group led by Member for Melton Steve McGhie will deliver a final report to government by the end of 2023.

Non-Emergency Patient Transport plays a critical role in healthcare delivery across the state. Irrespective of public or private ownership, the VHA's submission insists on upholding key principles that guarantee improved outcomes for the community, healthcare services, and the public healthcare system.

The VHA is calling for the creation of a unified NEPT model that functions as a system. This submission makes three policy recommendations to achieve this.

- 1. Place-based coordination:** The VHA is calling for the strengthening of the NEPT sector through the healthcare transport model to embrace autonomy of contracting at the local level.
- 2. A tiered model that separates non-emergency and emergency transport care needs:** The review must separate NEPT from emergency transport care needs through strong governance and operating models.
- 3. A 'better off' overall guarantee:** The VHA insists on upholding key principles that guarantee improved outcomes for the community, healthcare services, and the public healthcare system.

The VHA has engaged extensively with its members to independently inform this submission. The key themes of the [Department of Health's discussion paper](#) have been explored throughout the consultation process. The findings of this submission are independent to the department's consultation and included an all-of-membership survey and tailored consultation with executives from over 20 member organisations. These targeted consultations are representative of our diverse membership from small rural health services to metro hospitals.

Background

Victoria's health system

The Victorian health system is operating under immense pressure. Our public health services continue to deliver high-quality care, while facing increased presentations and increased patient acuity, at a time of significant workforce shortages.

One of the most public displays of this pressure is ambulance offload delays. While this may be perceived as a simple issue relating to ambulances and hospital emergency departments, it is symptomatic of broader, interrelated challenges occurring across the health system – including the integral role of NEPT that ensure efficient patient flow.

NEPT can significantly impact service flow through delaying the discharge of patients which contributes to bed block and ambulance ramping. In turn a strong NEPT system reduces the risk of adverse events and increasing the availability and efficiency of emergency ambulance services. It is fundamental that the review of NEPT does not compromise the healthcare transport needs of Victorians.

About the VHA

The VHA is the peak body supporting Victoria's public health and community health services to deliver high-quality care. Established in 1938, the VHA represents Victoria's diverse public healthcare sector, including public hospitals, aged care and community health services.

The VHA advocates on behalf of its members on sector-critical issues by engaging and influencing key decision-makers involved in policy development and system reform. The VHA has conducted significant research on patient flow and believes that systemic solutions lead to better health outcomes for all Victorians. This research is referenced in the recent issues paper [Unblocking the System](#), which discusses topics of relevance to the NEPT review.

Policy recommendations

Recommendation 1: Place-based coordination

The VHA is calling for the strengthening of the NEPT sector through the healthcare transport model to embrace autonomy of contracting at the local level.

Advanced integration and coordination

The review must promote integration across the system by establishing a unified structure for NEPT. The creation of a unified structure will ensure the NEPT sector will be seen as a system of care. Unity across the public healthcare system will drive the coordination of operations and contribute to enhancing statewide patient and bed flow.

The development of an NEPT system must not be developed in isolation – NEPT must be considered in the context of the broader healthcare system, including integration of digital capabilities. This is particularly important with the introduction of the *Health Legislation Amendment (Information Sharing) Bill 2023*.

Localised care

Local management of NEPT is vital for effective bed flow management within healthcare services. A key metric for success is timely movement of patients. Local autonomy empowers healthcare facilities to adapt

NEPT services to reflect their patient needs, optimise resource allocation, and facilitate smoother patient transitions.

A place-based approach promotes flexibility, responsiveness, and closer collaboration between healthcare providers and NEPT service providers, ultimately enhancing the overall efficiency and effectiveness of NEPT and contributing to improved patient care outcomes.

Recommendation 2: A tiered model that separates non-emergency and emergency transport care needs

Separation of care needs between non-emergency and emergency transport should be reinforced throughout the review process to ensure patients receive transport that matches their acuity level. To achieve this, the review must implement a strong governance model that flows into operation across the healthcare system and separates NEPT from high-acuity emergency transport. A clear distinction between the care requirements will ensure that patients receive the appropriate level of care during transport, while optimising the use of resources and minimising costs for the hospital and public healthcare system.

Governance

Separate governance for NEPT and emergency transport is required to ensure the distinct nature and requirements of each service are captured throughout the healthcare system. NEPT involves the transportation of stable patients who do not require immediate medical intervention, while emergency transport deals with urgent and life-threatening situations. Separate governance structures enable appropriate and tailored oversight and management of each service, ensuring that the unique needs, regulations, and standards are appropriately addressed.

Operations

Combining operations for NEPT with acute transport services can lead to challenges, particularly when patients receive transport that does not match their acuity level. One significant challenge is the potential mismatch between the level of medical support provided during transport and the patient's specific needs. Combining operations may lead to inefficiencies in resource allocation, where limited resources are not appropriately distributed based on patient acuity, potentially straining hospital capacity and increasing costs unnecessarily.

Pathways for workforce

The separation of NEPT and emergency transport offers a valuable workforce pathway to paramedicine by providing individuals with opportunities to gain hands-on experience and develop essential skills.

Working in NEPT exposes individuals to the healthcare environment, allowing them to interact with patients and develop a solid foundation in patient care. Workforce pathways enable individuals to enhance their medical knowledge and skills, which can serve as a strong foundation for transitioning into a career in paramedicine.

This exposure to the field and the practical experience gained in NEPT can contribute to a smoother transition into paramedic training and practice, growing the healthcare workforce pipeline.

Recommendation 3: A 'better off' overall guarantee

The NEPT review background paper outlines the Victorian Government's political agenda to centralise the NEPT sector under a public entity. Irrespective of public or private ownership, the VHA insists on upholding

key principles that guarantee improved outcomes for the community, healthcare services, and the public healthcare system.

Community access to care

It is fundamental that any reform following the NEPT review improves services for the community. Improvement would ensure services are patient centred and appropriately follow the journey of the patient throughout their care until they are able to safely return home. Services must be accessible across the state and provide timely, safe and reliable services.

Efficiency and effectiveness

Any shift to a public entity should be accompanied by strategies to optimise efficiency and effectiveness in service delivery, which are currently driven by a multi-provider private market. Cost-effectiveness measures, streamlined processes, and improved resource management should be built into reform to mitigate potential cost shifting, while ensuring Victorians do not miss out on the care they need.

Financial net benefit

The review should ensure that transitioning from a competitive multi-provider NEPT model to a public entity does not result in cost shifting to public healthcare services or the community.

Establishing the NEPT under a public entity will require the Victorian Government to subsidise overhead costs currently absorbed by the private market. This review should ensure costs are appropriately budgeted and subsidised by the government and do not result in cost shifting to service budgets.

Conclusion

The VHA is calling for a system-wide approach to NEPT that unifies care across the state. Regardless of the transition to a public or private entity, the VHA is calling for an NEPT system that guarantees improved outcomes for the community, healthcare services, and the public healthcare system.

The VHA believes that systemic solutions lead to better health outcomes for all Victorians, as referenced in the recent issues paper [Unblocking the System](#), which examines solutions to patient flow.

The VHA welcomes the opportunity to contribute to the NEPT review and extends thanks to members who supported the development of the submission through their valuable sector insights.



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