# PARLIAMENT OF VICTORIA

**Public Accounts and Estimates Committee** 



# 2024–25 Financial and Performance Outcomes Questionnaire

**Monash Health** 

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#### Monash Health

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# **Introduction – Financial and Performance Outcomes Questionnaire**

The Committee's inquiry into the 2024–25 Financial and Performance Outcomes examines:

- the Government's actual versus budgeted expenditure and revenue
- the actual versus target performance outcomes at a departmental/agency level
- other expenditure unforeseen at the time of preparing the 2024–25 Budget, and outcomes achieved.

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

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

This questionnaire seeks information on the departmental/agency financials for the 2024–25 financial year, what was achieved during the year and how that compares to expectations.

#### Timeline and format

Responses to this questionnaire are due by 5.00pm on Thursday 13 November 2025.

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

#### Consistency with the budget papers

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

#### Basis of consolidation

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

#### Guidance

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

Charlotte Lever, Lead Analyst – <a href="mailto:charlotte.lever@parliament.vic.gov.au">charlotte.lever@parliament.vic.gov.au</a>
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# **Section A: Output variances and program outcomes**

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

For all initiatives that were completed in 2024–25 please provide details of the expected outcomes for the community and the actual outcomes achieved to date. Please use initiatives names as specified in *Budget Paper No. 3: Service Delivery* and link the initiative to the responsible output(s) and portfolio(s).

	Year and funding	allocated	Actual data of completion			Output(s) and	
Initiative	Elinding I		Actual date of completion (month and year)	Expected outcomes	Actual outcomes	portfolio(s)	

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# **Question 2 (all departments) Program outcomes**

Outcomes reflect the impact on the community of the goods and services provided by a department. The questions in this section relate to the outcomes that the department contributed to in 2024–25.

- a) Using the table below, please outline the five programs that delivered the most important outcomes in the community<sup>1</sup> achieved by the department in 2024-25, including:
  - The name of the program
  - The output(s) and portfolio(s) responsible for delivery of the program
  - The program objectives iii.
  - The actual outcome achieved iv.
  - The actions taken to deliver the actual outcome (i.e. the most important elements/essential parts that led the department to deliver the outcome).

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

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<sup>1 &#</sup>x27;Outcomes' are the impact of service delivery on the community rather than a description of the services delivered. An outcome could be considered important for a variety of reasons, such as the amount of funding allocated to the program, the public interest in the service or goods being delivered or where particular actions taken by the Department delivered improved outcomes.

- b) Using the table below, please outline the five least performing programs<sup>2</sup> that did not deliver their planned outcomes in the community by the department in 2024–25, including:
  - i. The name of the program
  - ii. The output(s) and portfolio(s) responsible for delivery of the program
  - iii. The program objectives
  - iv. The actual outcome achieved
  - v. Explanation for not achieving the planned outcome (including a description of what actions were taken to try and achieve the planned outcome).

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

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<sup>&</sup>lt;sup>2</sup> Note programs in this question relate to programs delivering services, and do not signify the department's five least performing performance measures.

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

a) Please identify all output(s) and portfolio(s) (and relate them to departmental programs) for which the department received additional funding after the 2024-25 Budget.

For each output, please quantify the additional funding, indicate the source of the additional funding (e.g. Treasurer's Advance, unused prior years appropriations under section 32 of the Financial Management Act 1994 (Vic), supplementation through a Temporary Advance under section 35 of the FMA, or any possible sources of funding as listed in the Resource Management Framework (2024), (section 4)) and explain why additional funding was required after funding was allocated in the Budget. If the additional funding is a Treasurer's Advance, please also explain either how and why it was 'urgent and unforeseen' as per the RMF (section 4.4), or whether it was a contingency release.

Output(s) and portfolio(s)	Program	Program objectives	Funding allocated in 2024–25 Budget	Additional funding (\$ million)	Source of additional funding as per the Resource Management Framework	Funding utilised 2024–25	Reasons why additional funding was required
	Total 2024–25						

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

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

# **Question 4 (all departments) Central contingencies**

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

Please provide information regarding funding received from central contingency in 2024–25, including: the output and portfolio or Government decision related to the funding, the amount of funding received, the amount of funding utilised, funding received through previous budgets for the same purpose and why funding from contingency was required.

Output(s) and portfolio(s) or Government decision associated	Funding received	Funding utilised 2024–25	Funding received in previous budget/s for same purpose. Please specify which budget	Reasons why funding was required
Total 2024–25				

# Question 5 (all departments) Victoria's Housing Statement

For output and asset initiatives delivered in 2024–25 that contributed to the *Victorian Housing Statement: The decade ahead 2024–2034* please list:

- The name of the initiative
- The timeframe of the initiative
- The funding allocated to the initiative in 2024–25 (\$ million)
- The actual funding utilised in 2024–25 (\$ million)
- What impact the initiative had in 2024–25 on:
  - i. Housing affordability
  - ii. Victoria's planning system
  - iii. Housing supply
  - iv. The regulation of rental properties
  - v. Public housing supply
  - vi. Community housing supply
  - vii. Affordable housing supply

Please quantify these impacts where possible, for example the actual impact on housing supply and public, community and affordable housing supply.

				affordability planning of rental supply housing housing housing housing						
Initiative	Timeframe of initiative	Funding allocated 2024–25 (\$ million)	Funding utilised 2024–25 (\$ million)						Affordable housing supply	

# Question 6 (Department of Health only) 2024–25 Budget funding allocation by output and performance

a) Please provide a detailed breakdown of the actual amount spent in 2024–25 by output, for DH's four largest outputs by budget. Please list what line items contribute to the output and an explanation for any variances of ±5% based on budgeted vs actuals by output.

Output	Line items contributing to output (insert more lines as necessary)	2024–25 Budget (\$ million)	2024–25 actual (\$ million)	Variance (%)	Explanation for variance	Outcomes delivered
Admitted Services						
Non-Admitted						
Services						
Mental Health						
Clinical Care						
Ambulance Services						
Total		\$2,334 million				

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

Category	As at 30	As at 30 June 2023	As at 30 June 2024	As at 30	Variance between 2023 and 2024 Explanation for the variance between	Variance between 2024 and 2025 Explanation for the variance between
	June 2022	June 2023	June 2024	June 2025	30 June 2023 and 2024	30 June 2024 and 2025

	<del> </del>	:	
Number of			
patients			
treated in			
emergency			
departments			
Number of			
hospital beds			
total			
Number of			
intensive care			
unit beds total			
Average time			
spent in			
waiting rooms			
– emergency			
departments –			
non-mental			
health patients			
Average time			
spent in			
waiting rooms			
<ul><li>emergency</li></ul>			
departments –			
mental health			
patients			
Number of			
patients			
waiting for			
treatment –			
elective			
surgery			
Number of			
emergency			
department			
staff (FTE)			

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

a) The 2024–25 Budget allocated \$3 billion in payments on behalf of the state to the National Disability Insurance Agency.<sup>3</sup> In relation to outcomes achieved in 2024–25, please provide the following information on disability services and support in Victoria:

Department of Families, Fairness and Housing	30 June 2023	30 June 2024	30 June 2025
Number of people with disability in Victoria			
Number of NDIS participants			
Number of NDIS participants - identified as culturally and linguistically diverse			
Participant satisfaction with services received			
Average wait time to access NDIS package			
Disability workforce - number of workers			
An update on NDIS Workforce and Skills Plan			

b) Please outline the five most significant disability services/programs provided by the Victorian Government in 2024–25, including amount expended, funding source and outcomes achieved for people with disability.

Service/program	Amount expended in 2024–25	Funding source	Outcomes achieved for people with disability

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<sup>&</sup>lt;sup>3</sup> Department of Treasury and Finance, Budget Paper No. 5: 2024–25 Statement of Finances, Melbourne, 2024, p. 95.

## **Section B: Asset investment**

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

Please provide details of all capital asset programs where:

- a) there was a variance between TEI at announcement compared to the TEI as at 30 June 2025 of equal to or greater than ±5% and an explanation for the variance
- b) the estimated completion date at announcement is different to the completion date as at 30 June 2025 and an explanation for the change
- c) the scope of the project at announcement is different to the scope of the project as at 30 June 2025.

#### Capital expenditure

Project	Output(s) and portfolio(s) and/or agency responsible for the project	Total actual expenditure from announcement to 30 June 2025 (\$ million)	TEI at announceme nt (\$ million)	Details of TEI changes between announcement and 30 June 2025 (\$ million)	Revised TEI as at 30 June 2025 (\$ million)	Variance between TEI at announcement compared to revised TEI as at 30 June 2025 Budget (±5%) explanation

## Completion date

Project	Output(s) and portfolio(s) and/or agency responsible for the project	Estimated completion date at announcement	Revised completion date as at 30 June 2025	Explanation

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#### Scope

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

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

Please provide the following details about asset investment projects that were completed in 2024–25:

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

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

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

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

Please list all projects included in 2024–25 that were allocated to the department and were classified as HVHR and the project objectives. Please also specify which Gateway reviews, if any, were completed during 2024–25 and business case details for each project.

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

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

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

- a) The total estimated PPP investment value, the total actual expenditure from announcement to 30 June 2025, or the actual expenditure to 30 June 2025 and the benefits of using the PPP financing model when delivering/funding a project over other financing methods. Please provide specific benefits for each individual project.
- b) Where the estimated completion date at announcement is different to the completion date in the 2024–25 Budget, and an explanation for any variance.
- c) Where the scope of the PPP at announcement is different to the scope of the project as it is presented in the 2024–25 Budget.

#### Investment value and benefit of using PPP model

Project name	Project objectives	Output(s) and portfolio(s) and/or agency	Total estimated PPP investment value at the start of the project (\$ million)	Total actual expenditure since the announcement to 30 June 2025 (\$ million)	Actual expenditure in year ending 30 June 2025 (\$ million)	Benefits of using PPP model versus other delivery/funding models

#### **Completion date**

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

#### Scope

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

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

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

- a) The total estimated investment value, the total actual expenditure from announcement to 30 June 2025, or the actual expenditure to 30 June 2025 and the benefits of using the alliance contracting model when delivering/funding a project over other financing methods. Please provide specific benefits for each individual project.
- b) Where the estimated completion date at announcement is different to the completion date in the 2024–25 Budget and an explanation for any variance.
- c) Where the scope of the alliance contract at announcement is different to the scope of the project as it is presented in the 2024–25 Budget.

#### Investment value and benefit of using alliance contracting model

Project name	Project objectives	Output(s) and portfolio(s) and/or agency	Total estimated investment value at the start of the project (\$ million)	Total actual expenditure since the announcement to 30 June 2025 (\$ million)	Actual expenditure in year ending 30 June 2025 (\$ million)	Benefits of using alliance contracting model versus other delivery/funding models

#### **Completion date**

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

#### Scope

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

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# **Section C: Revenue and appropriations**

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

Please explain any changes equal to or greater than ±10% or \$100 million between the actual result for 2023–24 and the actual result for 2024–25 for each revenue category detailed in your operating statement. Please also indicate what any additional revenue was used for or how any revenue reductions affected service delivery and then link it to the relevant output and portfolio.

Please also detail the outcomes in the community<sup>4</sup> achieved by any additional expenses or the impact on the community of reduced expenses (if there was no impact, please explain how that was achieved).

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

If there were no revenue/income categories for the department/agency for which the 2024–25 expenditure changed from the prior year's expenditure by more than ±10% or \$100 million, you do not need to answer this question. If this is the case, please indicate 'no relevant line items' in the table(s) below.

Revenue category	2024–25 actual (\$ million)	2023–24 actual (\$ million)	Explanations for changes ±10% or \$100 million	How the additional revenue was used/the impact of reduced revenue. If no impact, how was this achieved	Relevant output(s) and portfolio(s)
Government Grants (State) – Operating (combined revenue and income)	2,730	2,346	Increases to NWAU rates and sustainability grants provided.	No impact. The revenue is used to support patient care.	
Patient, resident and private practice fees	95	79	Patient Fees increase across the board particularly with activity increasing in Emergency Departments and the Victorian Heart Hospital.	No impact. The revenue is used to support patient care.	

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<sup>&</sup>lt;sup>4</sup>That is, the impact of service delivery on the community rather than a description of the services delivered.

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Other Interest	18	4	Increase in bank interest	Supports operational requirements	
			received		l

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

Please explain any variances equal to or greater than ±10% or \$100 million between the initial budget estimate (not the revised estimate) and the actual result for 2024–25 for each revenue category detailed in your operating statement. Please also indicate what any additional revenue was used for or how any revenue reductions affected service delivery and then link it to the relevant output and portfolio.

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

Revenue category	2024-25 Budget estimate (\$ million)	2024–25 actual (\$ million)	Explanations for changes ±10% or \$100 million	How the additional revenue was used/the impact of reduced revenue. If no impact, explain why	Relevant output(s) and portfolio(s)
Patient, resident and private practice fees	82	95	Patient Fees increase across the board particularly with activity increasing in Emergency Departments and the Victorian Heart Hospital.	No impact to patient care	
Other revenue from operating activities	166	114	The difference represents a reallocation of an EBA support grant between other revenue (in the budget) and State revenue (in actuals).	No impact to patient care	
Government Grants (State) – Capital	101	141	Capital for Major Projects. This is difficult to budget as the projects are controlled by the Government.	Increased capital provided by the Government for: FY2025 programs of work include Kingston residential aged care; Monash Medical Centre Tower expansion; Cranbourne Community Hospital; Improving Safety in Acute Mental Health Intensive Care Areas; Casey Hospital Emergency Department Expansion Program	

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Other capital purpose income	20	16	Reduction of internal capital allocation	No impact on patient care. Used for Health Service projects, infrastructure and critical plant and equipment replacement.	
Other interest	1	18	Increase in bank interest received	Supports operational requirements	

# **Section D: Expenses**

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

Please explain any changes equal to or greater than ±10% or \$100 million with regards to the actual result for 2023–24 and the actual result for 2024–25 for each category of expenses detailed in your operating statement. Please explain any changes equal to or greater than ±10% or \$100 million with regards to the actual result for 2024–25 and the 2024–25 budget estimate. Please also detail the outcomes in the community<sup>5</sup> achieved by any additional expenses or the impact on the community of reduced expenses (if there was no impact, please explain how that was achieved).

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

Expenses category	2023–24 actual \$ million	2024–25 actual \$ million	Explanations for variances ±10% or \$100 million	Outcomes achieved by additional expenses/impact of reduced expenses. If no impact, how this was achieved
Employee expenses	2,507	2,610	Increase of 4.1% due to the Superannuation guarantee, EBA increases and an increase to annual leave provisions.	Meet statutory superannuation and EBA requirements
Depreciation and Amortisation	162	218	Increase in building deprecation as a result of a significant valuation increase in in the prior financial year.	Meet accounting standards

Expenses category	2024–25 budget \$ million	2024–25 actual \$ million	Explanations for variances ±10% or \$100 million	Outcomes achieved by additional expenses/impact of reduced expenses. If no impact, how this was achieved
No relevant line items – No items with variances ±10% or \$100 million				

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<sup>&</sup>lt;sup>5</sup>That is, the impact of service delivery on the community rather than a description of the services delivered.

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

- a) For each of the savings initiatives detailed in the 2023–24 and 2024–25 Budgets please provide the following details of the impact on service delivery:
  - Savings target in the 2023–24 and 2024–25 Budget and the amount of the savings target allocated to the department/entity.
  - Actual savings achieved in 2023–24 and 2024–25, the specific actions taken to achieve the savings target allocated, areas where savings were found and the impact of the measures taken to achieve the savings targets. Please include the link to the relevant output and portfolio impacted. Please be as specific as possible to your department or agency when providing your responses.

Savings initiative in the Budget	Savings target allocated to the department/entity in 2024–25 \$ million	Actual savings achieved in 2024–25 \$ million	Specific actions taken to achieve the allocated savings target	Areas where savings were found	What was the impact as a result of the measures taken to achieve the savings target?  (e.g. frontline and/or other areas of business that saw the impact)  If no impact, how was this achieved	Which output(s) and portfolio(s) were impacted (if relevant)
Not						
applicable						

- b) If any savings initiatives listed above were met in part by reducing Victorian Public Service (VPS) roles in 2024–25 please list:
  - The applicable savings initiative and budget
  - The number of roles reduced in 2024–25 by actual FTE number
  - The actual savings achieved by reducing roles in 2024–25 (\$ million)
  - The number of roles reduced by each VPS/Executive classification by actual FTE number
  - The functions or roles impacted by the reduction
  - The impact of role reductions on service delivery. If there was no impact, how this was achieved.

Savings initiative in the Budget	Number of roles reduced in 2024–25 (actual FTE)	Actual savings achieved in 2024– 25 due to roles reduced \$ million	Number of roles reduced by VPS/Executive classification (actual FTE)	Functions or roles impacted by the reduction	Impact of role reductions on service delivery If no impact, how this was achieved

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

The 2024–25 Budget included targets for 'reprioritisations and revenue offsets' to fund new initiatives (2024–25 Budget Paper No. 2, p. 60). This is in addition to any savings or efficiencies resulting from expenditure reduction measures. For the department (including all controlled entities),<sup>6</sup> please indicate:

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

Area of expenditure originally funded	Area of expenditure actually funded	Value of funding reprioritised in 2024–25 (\$ million)	Impact of reprioritisation of funding. If no impact, how was this achieved	Output(s) and portfolio(s) impacted (if relevant)

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<sup>&</sup>lt;sup>6</sup> That is, please provide this information for the department on the same basis of consolidation as is used in the budget papers.

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

a) Please indicate how much the department spent on contractors (including labour hire) and consultant arrangements during 2022–23, 2023–24 and 2024–25. Labour hire arrangements include the cost of engaging the labour recruiting firm, plus additional costs paid to the labour recruiting firm for the provision of the services of the contractor. Please also explain variances equal to or greater than ±10% between years and list the business areas impacted and how.

#### **Contractors (including labour hire)**

2022–23 Actual \$ million	2023–24 Actual \$ million	2024–25 Actual \$ million	Explanation for variances (2022–23 over 2023–24) ±10%	Explanation for variances (2023–24 over 2024–25) ±10%	Which business areas were impacted/benefitted and how?	Please link your response to relevant output(s) and portfolio(s)

#### **Consultants**

2022–23 Actual \$ million	2023–24 Actual \$ million	2024–25 Actual \$ million	Explanation for variances (2022–23 over 2023–24) ±10%	Explanation for variances (2023–24 over 2024–25) ±10%	Which business areas were impacted/benefitted and how?	Please link your response to relevant output(s) and portfolio(s)

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

Please detail the type and value of dividends, amounts equivalent to dividends, non-dividend grants, and capital repatriations paid by your agency to the general government sector in 2024–25, explaining the reasons for any significant changes over that period and the impact of any changes on the entity.

Please provide the economic funding ratio or accounting funding ratio as applicable at 30 June 2025. Please provide details of the methodology used for the ratio calculation.

Type of dividend paid	2024–25 Budget (\$ million)	2024–25 Actual (\$ million)	Explanations for variances ±10% or \$100 million	Impact on the agency (including on financial position, investment, impacts on service delivery or infrastructure projects). If no impact, how this was achieved.	Funding ratio at 30 June 2025

Economic funding ratio / accounting funding ratio as at 30 June 2025	Details of the methodology	

# **Section E: Overall financial performance**

# Question 20 (all departments) Impact of unforeseen events on financial performance – 2024–25

Please outline and quantify, where possible, the impacts of unforeseen events over 2024–25 on the department/agency's financial performance.

Line item in the comprehensive operating statement for the financial year ended 30 June 2025	2024–25 Budget	2024–25 Actual	Impact of unforeseen events
Total revenue and income from			
transactions			
Total expenses from			
transactions			
Net result from transactions (net			
operating balance)			

# Section F: Public sector workforce

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

a) Please provide total FTE as of 30 June 2023, 30 June 2024, 30 June 2025 and provide explanation for more than ±-10% change in FTE between years. In the explanations of variance please list what categories and role types/functions variances predominantly applied to.

30 June 2023 Actual FTE	30 June 2024 Actual FTE	30 June 2025 Actual FTE	Explanations of variance ±-10% between 30 June 2023 and 30 June 2024 (including categories and role types/functions)	Explanations of variance ±-10% between 30 June 2024 and 30 June 2025 (including categories and role types/functions)
16,301	16,338	16,299	n/a < 10% change	n/a < 10% change

b) For 2024–25, please provide information regarding any staffing challenges faced by the department, including but not limited to: staff shortages by category or position name, positions that were hard to staff, positions that were vacant for 6+ months, positions that have not equalled or surpassed attrition.

Monash Health has historically had difficulty recruiting into the Mental Health program however has started to see some traction in this space.

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

In the table below, please detail the salary costs for 2022–23, 2023–24 and 2024–25, broken down by ongoing, fixed-term and casual, and explain any variances equal to or greater than ±10% or \$100 million between the years for each category.

Employment category	Gross salary 2022–23 (\$ million)	Gross salary 2023–24 (\$ million)	Gross salary 2024–25 (\$ million)	Explanation for any year-on-year variances ±10% or \$100 million
Ongoing	1,950	2,133	2,304	Ongoing positions being secured to reduce premium agency etc. Also increasing Super Guarantee and EBA increases impacting overall payments.
Casual	244	209	152	Less reliance on casual staffing and recruiting into ongoing positions where possible
Total	2,162	2,308	2,423	

# Question 23 (all departments and entities) Executive salary increases

Please detail the number of executives who received increases in their base remuneration in 2024–25, breaking that information down according to what proportion of their salary the increase was, and explaining the reasons for executives' salaries increasing in each bracket.

Increase in base remuneration		on of this amoun	reases in their base t in 2024–25, apart nent agreements	Reasons for these increases
	Female	Male	Self-described	
0-3%				All movements in line with employment agreements
3-5%				
5-10%				
10-15%				
greater than 15%				

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

Please list the Enterprise Bargaining Agreements (EBAs) concluded in 2024–25 that had an impact for the department/agency. For each EBA, please show the number of employees affected and the change in employee expenses attributable to the EBA.

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

# **Section G: Government decisions impacting on finances**

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

Please identify any Commonwealth Government and National Cabinet decisions during 2024–25 which had not been anticipated/not been concluded before the finalisation of the State Budget in 2024–25 and their impact(s) on the department's/entity's finances or activities during those years (including new funding agreements, discontinued agreements and changes to funding levels). Please quantify the impact on income and expenses where possible.

Commonwealth Government decision	Impact(s)	Impact(s) in 2024–25		
Commonwealth Government decision	on income (\$ million)	on expenses (\$ million)		
	1			
National Cabinet decision		in 2024–25		
National Cabinet decision	on income (\$ million)	on expenses (\$ million)		

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### Section H: General

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

- a) Please list all internal<sup>7</sup> and external reviews/studies/evaluations, established, commenced or completed by or on behalf of the department/agency in 2024–25 and provide the following information:
  - i. Name of the review/study/evaluation and which portfolio and output/agency is responsible
  - ii. Reasons for the review/study/evaluation
  - iii. Terms of reference/scope of the review/study/evaluation
  - iv. Anticipated/actual duration of review/study/evaluation and completion date
  - v. Anticipated findings and outcomes of the review/study/evaluation
  - vi. Estimated cost of the review/study/evaluation and final cost (if completed)
  - vii. Where completed, whether the review/study/evaluation is publicly available and where. If no, please provide an executive summary and please explain why the full document is not publicly available.

Name of the review (portfolio(s) and output(s)/agency responsible)	Reasons for the review/evaluation	Terms of reference/scope	Anticipated/actual duration and completion date	Anticipated findings and outcomes	Estimated cost (\$)	Final cost if completed (\$)	Publicly available (Y/N) and URL If no, provide executive summary and explain why not available.
Data Integrity – Victorian Emergency Minimum Dataset (VEMD)	Part of Internal Audit Annual Plan	Consideration of processes to support complete, timely and accurate recording and reporting of VEMD data submitted by	Reported November 2024	Identify control weakness and opportunities	\$33,625	\$33,625	N – internal audit activity

<sup>&</sup>lt;sup>7</sup> Internal reviews do not include internal costings. Internal reviews/evaluations include any reviews or evaluations undertaken by your department and not given to external consultants. Internal reviews/evaluations do not include inquiries carried out by Parliamentary Committees or reviews undertaken by integrity agencies.

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Return to Work Management Practices	Part of Internal Audit Annual Plan	Monash Health to the Department of Health Victoria (DoH) and to consider the processes and systems Monash Health has in place to foster compliance with data reporting requirements.  Consideration of processes to support staff returning from work following injury and / or ill employees to facilitate the return to safe and appropriate employment as soon as	Reported November 2024	Identify control weakness and opportunities	\$56,490	\$56,490	N – internal audit activity
Legislative Compliance	Part of Internal Audit Annual Plan	possible.  Consideration of processes and controls that support the identification and monitoring of legislative requirements	Reported May 2025	Identify control weakness and opportunities	\$47,075	\$47,075	N – internal audit activity

		across Monash Health.					
Research Governance	Part of Internal Audit Annual Plan	Consideration of Monash Health's research governance and leadership and clinical / research performance effectiveness to support effective and safe research activities across Monash Health.	Reported February 2025	Identify control weakness and opportunities	\$60,525	\$60,525	N – internal audit activity
Capital Works Governance Review	Part of Internal Audit Annual Plan	Consideration of governance arrangements, policies and procedures, and management practices that are in place to manage capital works projects at Monash Health.	Reported February 2025	Identify control weakness and opportunities	\$43,040	\$43,040	N – internal audit activity
Cyber Security – IT Third Party Risk Management	Part of Internal Audit Annual Plan	Consideration of the processes and controls that support the management of security and resilience risks	Reported November 2025	Identify control weakness and opportunities	\$47,075	\$47,080	N – internal audit activity

		related to IT third parties.					
Compliance with the Standing Directions under the Financial Management Act 1994, including Purchasing Cards	Part of Internal Audit Annual Plan	Consider the key business processes that Monash Health has established to foster compliance with the Standing Directions of the Minister for Finance.	Reported August 2025	Identify control weakness and opportunities	\$20,175	\$20,175	N – internal audit activity
Internal Audit follow up	Part of Internal Audit Annual Plan	Examine evidence to support 'high' and 'medium' risk rated findings of previous Internal Audit projects and all risk rated findings specifically in relation to Cyber Internal Audit projects that have been closed by management during the financial year. Obtain and examine evidence to	Report at each Audit Committee meeting during FY25	Identify if control weakness and opportunities have been appropriately addressed	\$26,900	\$26,899.5	N – internal audit activity

#### Monash Health

support			
management			
actions that are			
recorded as			
'recommended			
for closure' to			
assess whether			
there is			
adequate			
evidence to			
support that the			
underlying risk			
and root cause			
of findings have			
been			
addressed.			

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

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

## Question 27 (all departments and water corporations [question 27(c) only]) Climate change

a) Under FRD 24 Reporting of environmental data by government entities, Victorian Government organisations must report their greenhouse gas emissions and other environmental impacts. Please list the department/entity's internal targets for reducing greenhouse gas emissions in 2024–25 and the department/entity's performance against these internal targets.

Internal target for reducing greenhouse gas emissions 2024–25	Performance against internal target as at 30 June 2025						
<ul> <li>Please outline and quantify where possible th reduction pledge.</li> </ul>							

c) [Water corporations only] Victoria's water corporations have targets related to greenhouse gas emissions and renewable electricity under the *Statement of obligations (Emissions reduction)*.<sup>8</sup> For each individual water corporation please list applicable targets from the statement of obligations and progress toward or performance against the target as at 30 June 2025.

Applicable target	Progress toward or performance against target as at 30 June 2025

 $<sup>{}^8\</sup>text{ https://www.water.vic.gov.au/\__data/assets/pdf\_file/0029/668306/statement-of-obligations-emission-reduction-2022.pdf}$ 

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

Please describe the progress made and actions taken to implement the department's Adaptation Action Plan in 2024–25. What measurable impact have these actions had on addressing the impacts of climate change?

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

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

a) Please provide the following information on performance measures that did not meet 2024–25 targets.

Performance measure	2024–25 target (Budget)	2024–25 actual (Annual report)	Variance	Explanation	Output(s) and portfolio(s) impacted

b) Please provide the following information for objective indicators where data was not available at publication of the annual report 2024–25.

Objective indicators stated in annual report for which data was not available at date of publication	Best available data for 2024–25 and relevant date	Explanation for the absence of data in annual report	Action taken to ensure timely data for 2024–25 annual report

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

Please list a minimum of three main challenges/risks faced by the department/agency in 2024–25.

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

	Challenge experienced	Internal/ External	Causes of the challenge	Action taken to manage the challenge/risk
1.	The need for a reformed health system, shifting from competition to collaboration between health services, and with strengthened, formalised partnerships between health services and community and primary care services to ensure patients receive the right care closer to home	External	Growing population needing to get the right care in the right place by the right team.	<ul> <li>Health Service Partnership collaborations</li> <li>Monash Health participated in a range of collaborations as part of the South East</li> <li>Metro Health Service Partnership, prior to transition to the Local Health Service</li> <li>Network model. These include:</li> <li>Better at Home – to deliver more care within patients' homes where appropriate</li> <li>Specialist Care Referrals – to more effectively manage referrals across the South East Melbourne region</li> <li>South East Metro Surgical Centre – feasibility analysis</li> <li>Southern Melbourne Integrated Cancer Service forecasting project regarding the National Lung Cancer Screening Program</li> <li>By mutual agreement, some of these collaborations will continue into the next financial year. This includes the Joint Primary Care &amp; Population Health Advisory Committee, which is taking a regional approach to addressing the population health needs of the community of South East Melbourne, centred around 4 main themes:</li> <li>Strategic and inclusive stakeholder engagement</li> <li>Equity-centred, co-designed program with priority populations</li> <li>Strengthened system connectivity and cross-sectional co-ordination</li> <li>Targeted, data-driven population health campaigns with measurable engagement outcomes</li> </ul>

				Support for rural and regional health services
				Monash Health provided a range of supports to rural and regional health services, particularly in the Gippsland region. This work continues into the next financial year.
				A Clinical Services Agreement between Monash Health and Bass Coast Health was enacted whereby Monash Health provided clinical support for Bass Coast Health inpatients with infectious diseases. This included on-site ward rounds, telehealth support, specialist consulting clinics, antimicrobial stewardship, infection prevention support and provision of education and training for clinicians.
				Additionally, in collaboration with Bass Coast Health, a specialist consulting pilot was undertaken for 6 months, diverting patients on Monash Health specialist consulting waiting lists to Bass Coast Health clinics where there was additional capacity in General Surgery and Orthopaedics.
				Existing clinical support and training relationships were maintained with other Gippsland health services, including West Gippsland Healthcare Group and Latrobe Regional Health.
				Collaboration with Primary Care
				Continuing into next year Monash Health is working closely with Primary Care via the Monash Health GP Liaison Unit. The unit provides a central point of contact for GPs and facilitates positive engagement between Monash Health and GPs. Activities over 2024–25 have included delivery of a GP webinar series around both clinical issues and Monash Health processes and systems.
				Monash Health also works in partnership with the South East Melbourne Primary Health Network and Eastern Melbourne Primary Health Network. Initiatives for 2024–25 have included the Health Services Plan initiative regarding Specialist Care Referrals (as per above) and ongoing support for Urgent Care Clinics (particularly those supporting Dandenong and Casey Hospitals).
2.	Delivering equitable access to planned surgery and drive	External	An increase in planned surgery and waitlists	Monash Health continued to maintain 100% of patients waiting longer than clinically recommended on the planned surgical list were contacted. The service also expanded to complete digital reassessment by procedure group, further

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	reform in alignment with the Planned Surgery Reform Blueprint.			<ul> <li>streamlining the identification of patients at risk of clinical deterioration.</li> <li>In 2024–25, the surgical program partnered with specialist consulting to streamline the audit process for patients awaiting outpatient appointments. This resulted in improvements in:</li> <li>Process efficiency: Reduced end-to-end audit duration from 4 months to 6 weeks.</li> <li>Digital engagement: Achieved a 64% patient engagement rate with the digital process, exceeding the predicted 40%. This led to a reduction of approximately 6,000 to 7,000 letters, resulting in significant cost and environmental savings.</li> <li>Data quality: Developed a reconciliation report to support data cleansing and improve waitlist accuracy.</li> <li>Waitlist management: Approximately 5,000 referrals were removed from the outpatient waiting list as part of the program of work.</li> </ul>
3.	The provision of appropriate and culturally safe services, programs, and clinical trials for and as determined by Aboriginal people, embedding the principles of self-determination.	External	Service demand and equality of care	Monash Health provides Aboriginal Hospital Liaison services weekday, Monday to Friday, and recently extended to weekend hours in 2024–25. Monash Health has recruited additional liaison staff to provide coverage to all acute and sub-acute sites in 2024–25.  Monash Health's Cultural Safety Plan documents activities and actions to create culturally safe and welcoming environments.  Monash Health continues to roll out mandatory Cultural Awareness training to all staff with 98% completion rates in 2024–25. Monash Health also provides additional training facilitated by Aboriginal organisations in priority programs.  Monash Health worked with Traditional Owner group the Bunurong Land Council to name the new sites and facility spaces. The Bunurong Land Council has also been engaged in design consultation for future major capital works at Monash Medical Centre site.

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## Question 31 (all departments) Lapsed or abolished bodies

Please list all existing bodies (authorities, offices, commissions, boards and/or councils) within the department that either lapsed or were abolished in 2024–25 and provide the following information:

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

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

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## **Question 32 (all departments) Newly created bodies**

Please list all newly created bodies (authorities, offices, commissions, boards and/or councils) created within the department in 2024–25 and provide the following information:

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

Name of the body	Date body created	Expenditure in 2024–25	FTE staff	Purpose/function(s) of the body	Who the head of the newly created body directly reports to

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## **Section I: Implementation of previous recommendations**

## **Question 33 (relevant departments only)**

a) Please provide an update on the status of the implementation of each of the recommendations that were made by the Committee in its *Report on the 2023–24 Financial and Performance Outcomes* and supported and supported-in-principle by the Government.

Department	Recommendations supported and supported-in- principle by Government	Actions taken at 30 September 2025

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

Department	Recommendations supported and supported-in- principle by Government	Actions taken at 30 September 2025

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## **Section J: Department of Treasury and Finance only**

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

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

Regarding the 'net cash flows from investments in financial assets for policy purposes' in the GGS cash flow statement for 2024–25, please provide:

- a) the top five projects that contributed to the variance recorded in each year
- b) the initial budget estimate (not the revised estimate) for net cash flow in 2024–25 (source: 2024–25 BP5 p. 9) and the actual net cash flow in 2024–25
- c) an explanation for variances between budget estimate and actual net cash flow.

	Project name	Department	Output(s) and portfolio(s)	Estimated net cash flow in 2024–25	Actual net cash flow in 2024–25	Variance explanation
1.						
2.						
3.						
4.						
5.						
	Other					
Tot	al net cash flow					

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

Regarding the 'purchases of non-financial assets' by the GGS in 2024–25 (source: 2024–25 BP 5, pg. 30), please compare the initial budget estimate for each department to the actual value of 'purchases of non-financial assets' for each department, explaining any variances equal to or greater than ±10% or \$100 million (please fill all blank spaces) and then link it to the relevant output and portfolio. For variance greater than ±10% or \$100 million, please provide a breakdown of the non-financial asset purchased.

By department	Types of non-financial assets	Initial budget estimate 2024–25 \$ million	Actual 2024–25 \$ million	Variance (%)	Variance explanation	Relevant output(s) and portfolio(s)
Department of Health						
Department of Families,						
Fairness and Housing						
Department of Jobs, Skills, Industry and Regions						
Department of Transport and Planning						
Department Education						
Department of Justice and Community Safety						
Department of Energy, Environment and Climate Action						
Court Services Victoria						
Department of Premier and Cabinet						
Department of Government Services						
Department of Treasury and Finance						
Parliamentary Departments						

## **Question 36 (DTF only) Revenue initiatives**

Regarding the revenue initiatives announced in the 2024–25 Budget, please provide an explanation for the variances equal to or greater than ±10% or \$100 million between budget estimates and the actual results.

Initiative	2024–25 budget estimate (\$ million)	2024–25 actual (\$ million)	Explanation for any variance ±10% or \$100 million

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

Regarding expenses of the GGS in 2024–25 (source: 2024–25 BP5, p. 28), please compare the initial budget estimates (not the revised estimate) for each department to the actual expenses for each department, explaining any variances equal to or greater than ±10% or \$100 million (please fill all blank spaces) and then link it to the relevant output and portfolio.

By department	Initial budget estimate 2024–25 \$ million	Actual 2024– 25 \$ million	Variance (%)	Variance explanation	Relevant output(s) and portfolio(s)
Department of Health					
Department of Families, Fairness and Housing					
Department of Jobs, Skills, Industry and Regions					
Department of Transport and Planning					
Department Education					
Department of Justice and Community Safety					
Department of Energy, Environment and Climate Action					
Court Services Victoria					
Department of Premier and Cabinet					
Department of Government Services					
Department of Treasury and Finance					
Parliamentary Departments					

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## **Question 38 (DTF only) Economic variables**

Please indicate the estimated and actual result for the following economic variables. For the estimate, please use the initial estimate used in preparing the 2024–25 budget papers. For any variance equal to or greater than ±0.5 percentage points, please provide an explanation for the variance. Please fill all blank spaces.

Economic variable	Budget estimate 2024–25	Actual 2024–25 result	Variance	Explanation for variances equal to or greater than ±0.5 percentage points
Real gross state product				
Labour force participation rate				
Unemployment rate – overall				
Unemployment rate – male				
Unemployment rate – female				
Underemployment rate				
Youth unemployment				
Youth underemployment				
Consumer price index				
Wage price index				
Population				
Household consumption				
Property prices				
Property volume				
Employee expenses				