

SA Ambulance

# SERVICE AGREEMENT

1 July 2020 – 30 June 2021



SA Ambulance Service



#### **Version Control**

Version No.	Changes Made	By Whom	Date
V1	Draft Service Agreement	K Lang	14/05/2020
V2	Amendments to reflect LHN feedback. Summary provided in formal correspondence.	K Lang 14/07/2020	
V3	Amendments to the Funding Allocation table in Part E due to update to HPA from final funding model run.K Lang24/07/		24/07/2020
V4	Reference to the State-wide Workforce Plan has been removed,	K Lang	15/09/2020
	A new section titled, Quality Improvement and Funding Considerations, has been added to the Strategic Partnerships section in Part B.		
	Reference to the Safety and Quality Account has been added to Part B.		
	The KPI Architecture has been amended to reflect feedback from SAAS.		
V5	Part C: Services updated as per SAAS request	S Clark	06/01/2021
	KPI targets updated.		

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## **PART A – INTRODUCTION, OBJECTIVES AND GOVERNANCE**

#### Introduction

The Agreement supports the delivery of safe, effective and accountable high quality health care by formally setting out the performance expectations and funding arrangements between the Department for Health and Wellbeing (DHW) and the South Australian Ambulance Service (SAAS) during the term of the Agreement.

The content and process for preparing the Agreement is consistent with the requirements of the <u>Health Care Act 2008</u> and the <u>National Health Reform Agreement (NHRA)</u>.

Fundamental to the success of the Agreement is:

- 1) A strong collaboration between SAAS and the DHW.
- 2) The Parties' commitment to achieving high standards of governance, transparency, integrity and accountability.
- 3) The Parties' commitment to upholding the South Australian Public Health Sector Values.

#### **Objectives of the Service Agreement**

The Agreement is designed to:

- 1) Describe the strategic priorities and Government commitments for the DHW and SAAS and the mutual responsibilities of both Parties.
- 2) Describe the key services and accountabilities that SAAS is required to meet including particulars of the volume, scope and standard of services.
- 3) Describe the performance indicators, associated reporting arrangements and monitoring methods that apply to both Parties.
- 4) Describe the sources of funding that the Agreement is based on and the manner in which these funds will be provided to SAAS including the commissioned activity and criteria, and processes for financial adjustment.
- 5) Detail any other matter the Chief Executive considers relevant to the provision of the services by SAAS.

#### Legislative and Regulatory Framework

The Agreement is regulated by the <u>Health Care Act 2008</u> and the NHRA which provides the Commonwealth funding contribution for the delivery of public hospital services and details a range of reforms.

The NHRA requires the State of South Australia to establish Service Agreements with each health service for the commissioning of health services and to implement a performance and accountability framework, including processes for remediation of poor performance.

In delivering health services, SAAS is required to meet the applicable conditions of any National Partnership agreements between the State Government and the Commonwealth Government (including any commitments under related implementation plans).

#### Governance

<u>The Charter of Responsibility</u> sets out the legislative roles and responsibilities of the Department for Health and Wellbeing (DHW), Local Health Networks (LHNs), and South Australian Ambulance Service (SAAS) which is consistent with the *Health Care Act 2008* and articulates the shared commitment and accountabilities of each Party to support the operation of the South Australian health system.

<u>The SA Health Corporate Governance Framework Summary</u> provides the high level architecture of critical strategic documents required to deliver services under this Agreement.

Without limiting any other obligations, SAAS must also comply with:

- < All Cabinet decisions and directives applicable to SAAS.
- < All Ministerial directives applicable to SAAS
- < All agreements entered into between the South Australian and Commonwealth Governments applicable to SAAS.
- < All State Government policies, standards, instructions, circulars and determinations applicable to SAAS and policies and directives applicable to SAAS.

DHW will ensure that any decision or agreement impacting on SAAS will be discussed and formally communicated to SAAS.

#### Amendments to the Service Agreement

An amendment of the Agreement will occur where there is a change to the Chief Executive's commissioning intentions, i.e. a change to funding, to deliverables or to other requirements contained within the Agreement.

Whilst a Party may submit an amendment proposal at any time, including the commencement or cessation of a service, formal negotiation and finalisation must be communicated in writing between Parties and follow the process as laid out in the Service Agreement Amendment Fact Sheet (link to be provided).

#### **Commencement of a New Service**

In the event that either Party wishes to commence providing a new service, the requesting Party will notify the other Party in writing prior to any commencement or change in service (services in addition to those already delivered, and/or where new funding is required). The correspondence must clearly articulate details of the proposed service, any activity and/or funding implications and intended benefits/outcomes.

The non-requesting Party will provide a formal written response to the requesting Party regarding any proposed new service, including any amendments of KPIs (new or revised targets), and will negotiate with the other Party regarding funding associated with any new service.

#### **Cessation of Service Delivery**

Either party may terminate or temporarily suspend a service by mutual agreement. Any proposed service termination or suspension must be made in writing to the other Party, detailing the patient needs, workforce implications, relevant government policy and sustainability considerations. The Parties will agree to a notice period. Any changes to service delivery must maintain provision of care and minimise disruption to patients.

#### **Dispute Resolution**

Resolution of disputes will be through a tiered resolution process, commencing at the local level and escalating to the Chief Executive and, if required, through to the Minister for Health and Wellbeing. Further information is specified in the <u>Service Agreement Dispute Resolution Fact Sheet</u>.

#### Agreements with Other Local Health Networks and Service Providers

The DHW is responsible for supporting and managing whole of health contracts. Where a service is required for which there is an SA Government or SA Health panel contract in place, SAAS is required to engage approved providers.

Where a service is required outside of an approved panel contract, SAAS may agree with another service provider for that service provider to deliver services on behalf of SAAS according to their business needs.

The terms of an agreement made with any health service provider do not limit SAAS's obligations under the Agreement, including the performance standards provided for in the Agreement. In the event that SAAS is experiencing difficulties in establishing required Service Agreements, DHW will provide assistance as appropriate within their role of system leader.

## PART B: STRATEGIC PRIORITIES AND GOVERNMENT COMMITMENTS

#### Purpose

Part B describes the strategic priorities and Government commitments for DHW and SAAS, and the mutual responsibilities of both Parties, for the period of the Agreement.

#### **Strategic Direction**

The State Government's key priority is to rebalance the South Australian health system in a way that represents the values of the community, delivers the highest standards of safe and quality care and is economically viable for the future. The State Government will use international best practice to develop specific programs that keep people as well as possible and reduce their need to use the existing hospital system by providing increased options for health care provision in the home and community.

The Parties will co-ordinate and partner to assist in rebalancing the health system and to achieve the key goals, directions and strategies articulated within the following:

- < <u>SA Health Strategic Plan 2017 to 2020</u>
- < South Australian Health and Wellbeing Strategy 2020-2025
- < State Public Health Plan 2019-2024
- < SA Mental Health Services Plan 2020-2025
- < <u>SA Health Clinical Services Capability Framework</u>

SAAS has a responsibility to ensure that the delivery of health care services is consistent with SA Health's strategic directions and priorities and that these and local priorities are reflected in strategic and operational plans.

It is acknowledged that SAAS will implement local priorities to deliver the SA Government and SA Health priorities, and meet the needs of the population.

The following strategic deliverables are 2020-21 priorities:

#### **Managing Capacity and Demand**

SAAS must work with LHNs to improve ramping to meet seasonal demand and to support the development and implementation of state-wide improvement strategies to ensure a significant reduction in delayed Transfer of Care (ambulance paramedic handover to emergency department clinician) and associated ambulance ramping, including local protocols and escalation plans and ensuring clinical review of any delayed transfer greater than 60 minutes.

#### Service Delivery Model

SAAS will continue to embed work planning into business operations and to undertake future workforce planning modelling, including clinical risk mapping in both metro and country regions, to inform the future service delivery model and the clinical care required to service the community of South Australia. The DHW will endeavour to support SAAS in this endeavour via grant provision.

#### **Strategic Partnerships**

#### **DHW Commitments**

DHW is committed to working in year with the LHN to:

- < Consider and discuss the clinical review of any delayed transfer greater than 60 minutes.
- < Assist in the process of the implementation of the EMR

#### **Quality Improvement and Funding Considerations**

The SAAS profile has experienced ongoing changes throughout the years which have resulted in the need for consideration of funding arrangements, activity delivery and performance to drive improvement across the system and maintain a quality improvement focus.

SAAS and DHW, in partnership with LHNs, Primary Health Care providers and the Department of Treasury and Finance, will work in year to develop a shadow funding model that maps activity and cost structures to three broad funding models: population based; activity based; and product based. This shadow funding model will compare each funding model against a range of criteria and generate an evidence base for ongoing funding reform decisions and the appropriateness of current and potential KPIs.

#### Agreed Transfer of Care (ATOC) Project

SAAS will work with metropolitan LHNs to implement the Agreed Transfer of Care project in 2020-21 to ensure the accurate capture of transfer of care times as a priority, providing quarterly updates on progress.

#### **Premier and State Priorities**

The delivery of both Premier's and State priorities is the responsibility of DHW, all LHNs and SAAS, and it is expected that all entities will work together to ensure successful delivery.

SA Health is responsible for the delivery of a number of Government commitments in 2020-21 and whilst led by the DHW, the support of the LHN, SAAS, non-government, education, research, private and Commonwealth sectors are critical to their delivery.

#### **Government Commitments**

The Government continues its strong investment to improve the State's health care system efficiency and effectiveness through a range of initiatives. Where required, SAAS will work collaboratively with DHW and provide support to implement these initiatives.

#### Safety and Quality Account

Annually, SAAS will complete a <u>Safety and Quality Account</u> (the Account) to demonstrate its achievement and ongoing commitment to improving and integrating safety and quality activity. The Account, due 19 May 2021, will provide information about the safety and quality of care delivered by SAAS, including reporting on the percentage of patients who report a clinically meaningful pain reduction and progress against the Hibbert Response.

## **PART C: SERVICES**

#### **Purpose**

Without limiting any other obligation of SAAS, Part C sets out the key services that SAAS is required to deliver under the terms of the Agreement.

#### **Service Profile**

SAAS is to maintain up-to-date information for the public on its website regarding its relevant facilities and services (where applicable).

SAAS is the statutory provider of ambulance services in South Australia and is responsible for providing timely and safe access to appropriate care for each resident of South Australia as part of an integrated health network of clinical services.

SAAS will continue to provide the following, as part of an integrated network:

#### **Emergency Services**

- < Delivery of high quality clinical care and coordination of referral, transport and retrieval services for emergency and time sensitive patients.
- < Triple zero (000) call receipt and patient triage and dispatch of ambulance and specialist resources to emergency incidents.
- < Pre-hospital emergency and urgent care, treatment and/or transport.
- < Emergency management services and multi-agency operations.

#### **Trauma Services**

- < Aeromedical and Medical Retrieval services.
- < Coordination of State Rescue Helicopter Services, via SAAS Emergency Operations Centre (EOC).
- < Management of the Royal Flying Doctor Services (RFDS) contract for fixed-wing inter-hospital air transfers and coordination of medical assistance in rural and remote areas in South Australia.

#### **Other Services**

- < Natural disaster and major event management.
- < Coordination of the Patient Transport Service (PTS) for the safe transport of patients from hospital to home, home to hospital, and nursing home to nursing home.
- < Management of Call Direct, a 24-hour personal monitoring emergency service.
- < Provision and administration of the Ambulance Cover subscription scheme.

#### **SAAS Emergency Operations Centre**

SAAS Emergency Operations Centre (EOC) has state-wide responsibilities for:

- < Triple zero (000) call receipt, patient triage and ambulance dispatch.
- < Coordination and dispatch of the Patient Transfer Service, moving non-emergency patients around the state.
- < Coordination of State Rescue Helicopter Services, via SAAS EOC.
- < Management of the Royal Flying Doctor Service contract for fixed-wing inter-hospital air transfers.

Within the EOC is situated a clinical hub comprising of Medical Retrieval Consultants, Nurse Retrieval Consultants and EOC Clinicians providing 24-hour clinical care and advice across the state.

#### SAAS Rescue, Retrieval and Aviation Services (RRAS)

SAAS MedSTAR and SAAS MedSTAR Kids deploy highly trained teams of doctors, paramedics and nurses to manage the retrieval of critically ill or injured adults, children and neonates. Patients are retrieved via ambulances, helicopters and fixed-wing aircraft from the metropolitan area, across the state and interstate when needed.

Special Operations Team (SOT) rescue paramedics deliver the specialist technical rescue service for SAAS under the RRAS directorate. SAAS also has rescue capability based in some regional areas managed by suitably skilled career and volunteer staff.

#### **Emergency and Major Event Management**

SAAS emergency preparedness is integral to the State's emergency response arrangements and includes allocation of suitable SAAS resources and an appropriate command structure. SAAS major event management involves a planning role in a range of major public and sporting events across the state, many of which SAAS attends.

It should be noted that whilst management and planning are within budget allocations, actual deployments are currently not funded. SAAS will capture additional costs of deployments separately to facilitate funding considerations including under Commonwealth arrangements.

#### **Metropolitan Operations**

SAAS's metropolitan services are currently divided into the following areas:

- < Metro North, managing all stations in the northern metropolitan suburbs and the metropolitan Single Paramedic Response Intervention (SPRInt) team.
- < Metro Central, managing all stations in the eastern and western metropolitan suburbs, including the central business district.
- < Metro South, managing all stations in the southern metropolitan suburbs and the Extended Care Paramedic (ECP) team.
- Metro Non-Emergency, managing the Emergency Support Service, Patient Transport Service, and other non-emergency initiatives such as mental health. This service is based in the metropolitan area but also transfers patients in and out of regional areas.

#### **Country Operations**

Emergency ambulance response and patient transfer services in South Australian regional areas are largely provided by more than 70 stations, with a mix of career (based in major regional centres) and volunteer staff. Of these 70 stations, 21 are in the state's major regional centres.

There are approximately 100 SAAS trained staff at mining sites across the state who, while employees of specific mine sites, provide a vital service to those communities in response to emergency situations.

#### **Aboriginal Health Services**

SAAS is responsible for working collaboratively with the DHW's Aboriginal Health, other relevant health services, support organisations and Aboriginal community-controlled health services to continue to implement the regional Aboriginal Health Improvement Plan to support services meeting the needs of the local Aboriginal population.

The DHW's Workforce Services will work collaboratively with, and support, SAAS to implement the <u>SA</u> <u>Health Aboriginal Workforce Framework 2017-2022</u> which identifies key strategies for SA Health to attract, retain and develop Aboriginal staff, and consequently increase the number of Aboriginal people working across our organisation.

# PART D: DELIVERY AND PERFORMANCE

#### **Purpose**

Part D outlines the performance indicators, associated reporting requirements and monitoring methods that apply to SAAS.

#### **Performance Framework**

The SA Health Performance Framework 2020-21 (link to be provided) sets out how the DHW, as the leader and steward of the public health system, monitors and assesses the performance of public health services and resources within South Australia. The Performance Framework uses performance indicators to monitor the extent to which SAAS is delivering the high level objectives set out in the Agreement. SAAS should refer to the SA Health Performance Framework for further information about the performance assessment process.

SAAS will endeavour to meet targets for each KPI identified in the table below as described under the four domain areas; access and flow, productivity and efficiency, safe and effective care and people and culture.

More detailed information regarding the 2020-21 KPI architecture, including KPI descriptions, levels (Tier 1, Tier 2, shadow and monitor), calculation methodology, targets and reporting frequency is available in the 2020-21 KPI Master Definition Document.

#### **Data and Reporting Requirements**

SAAS will provide data to the DHW on the provision and performance of health services in a timely manner and as required by the Chief Executive, including the real time data feed to support the real time patient flow dashboards. This extends to data pursuant to ad hoc requests, and will maintain compliance with the requirements for the provision of all data outlined in the Enterprise Data And Information (EDI) Data Requirements, 2020-2021 Bulletin (link to be provided).

On occasion there will be a requirement for SAAS to access DHW data, and vice versa, to fully complete effective performance. Where a requirement exists, SAAS would require a reciprocal data sharing arrangement with the relevant LHNs to enable SAAS to effectively discharge its functions through the Agreed Transfer of Care of patients. All data sharing will be undertaken in compliance with the Enterprise Data and Information (EDI) Data Requirements, 2020-2021 Bulletin.

SAAS is also required to maintain up-to-date information for the public on its website regarding its relevant facilities and services including population health, inpatient services and other non-inpatient services and community health.

2020-21 KPI Architecture			
Subdomain	Tier 1	Tier 2	Target
Emergency	Ambulance Hospital Clearance Time		>=80.0%
Timeliness	'000' Calls Answered in 10 Seconds		>=95.0%
	Response Time (Urban Centres) - Priority 1		>=60.0%
		Response Time (Urban Centres) - Priority 2	>=90.0%
		Roster Performance (Metropolitan)	>=95.0%
Finance	End of year net variance to budget (\$m)		<=0.0
		Workforce Cost	<=0.0% YTD Variance to YTD Budget
	Average Incident Cost		<= previous year
Activity		IHT (RFDS) within funded activity	<=+/-2.5%
	Open Disclosure Rate for all Actual SAC 1 & 2 Patient Incidents		>=95.0%
	Pain Reduction		>=50.0%
	'000' Emergency Call Audit - Partial Compliance		<=10.0%
	'000' Emergency Call Audit - Low Compliance		<=10.0%
Effectiveness of Care	'000' Emergency Call Audit - Non Compliance		<=7.0%
	Cardiac Arrest with ROSC Rate – Resuscitation was attempted		>=12 month rolling average
	Cardiac Arrest with ROSC Rate – VF/VT cardiac arrest		>=12 month rolling average
	STEMI - Arrival at PCI Facility within 60 minutes		>=70.0%
	Suspected STROKE - Arrival at CSU Facility within 60 Minutes		>=80.0%
	Number of Work Health and Safety Related Incidents Due to Challenging Behaviour in the Workplace		<= previous year
Workforce		Completion of Performance Reviews in Line with the Commissioner's Determination	>=80.0%
	New Workplace Injury Claims		<= previous year
		Expenditure for Workplace Injury Claims	<= previous year at same development point
		Aboriginal and Torres Strait Islander Employment Rate	N/A (Monitor)
		Employees with Excess Annual Leave Balance	=0.0%

# PART E: FUNDING AND ACTIVITY LEVELS

#### Purpose

Part E sets out:

- < The sources of funding that the Agreement is based on and the manner in which these funds will be provided to SAAS.
- < The funding provided for delivery of activity.

#### South Australian State Budget 2020-21

Due to the impact of COVID-19 the State Budget has been delayed and will released later in 2020. The budget provided in this Agreement is as at 13 May 2020 and may be subject to change based on the release of the State Budget. Funding allocations will be updated through formal processes post release.

For further detail, refer to https://statebudget.sa.gov.au/

#### **Funding Allocation**

Funding Allocation				
Funding Type	Revenue (\$)	Expenditure (\$)	Net Result (\$)	
Ambulance Operating Services				
DH Recurrent Allocation	147,263,000	0		
Operating	158,534,000	301,785,000		
Capital				
DH Allocation	16,065,000	0		
Non-Cash Items				
Depreciation/Amortisation	0	17,251,000		
Non Impacting Accruals	0	3,387,000		
Total Allocation	321,862,000	322,423,000	(561,000)	

Note: Budget Allocation funding is a point in time allocation as at 13 May 2020, and may be subject to change from the Department of Treasury and Finance.

The Funding Allocation outlined above is inclusive of \$4m provided to SAAS for delivery of the Electronic Medical Record Project in 2020-21.

#### **Electronic Medical Record Project**

DHW is committed to supporting SAAS in delivering the Electronic Medical Record (EMR) Project. The EMR Project aims to provide an integrated mobile dispatch and patient clinical report system to support SAAS in delivering sustainable safe quality care to patients.



### **Estimated Activity Levels**

The DHW and SAAS will monitor actual activity against estimated levels during 2020-21 as part of quarterly performance reviews.

Estimated Activity Levels		
Activity	Revenue (\$)	
Calls Answered by the EOC	'000' Calls: 253,097 Non-emergency Calls: 96,336	
Fleet Activity - # of requests	Metro – 227,877 Region – 82,180	
Fleet Activity - # of responses	Metro – 259,645 Region – 90,381	
Fleet Activity - # patient transports	Metro –  160,685 Region – 61,972	
Fixed Wing Activity - # of requests	# of Requests: 6,627 # of Flights: 4,186 # of Patient Transports: 6,627	
Rotary Activity - # of requests	# of Requests: 763 # of Flights: 763 # of Patient Transports:629	



## SIGNATURE

This is a Service Agreement (the Agreement) between the Chief Executive of the Department for Health and Wellbeing (Chief Executive) and South Australian Ambulance Service Incorporated (the Parties) which sets out the Parties' mutual understanding of their respective statutory and other legal functions and obligations through a statement of expectations and performance deliverables for the period of 01 July 2020 - 30 June 2021.

Through execution of the Agreement, SAAS agrees to meet the service obligations and performance requirements as detailed in Part A-Part E of the Agreement. The Chief Executive agrees to provide the funding and other support as outlined in the Agreement.

**David Place** Chief Executive Officer South Australian Ambulance Service

**Dr Chris McGowan** Chief Executive Department for Health and Wellbeing

Date: 14/1/21 Signed:



## **APPENDIX 1 – COMPANION ARCHITECTURE**

Without limiting any other obligations, the delivery of services under this Agreement requires the LHN and DHW will comply with: Australian Health Service Safety and Quality Accreditation (AHSSQA) Scheme Better Placed: Excellence in Health Education 2017-2019 Charter of Responsibility **Clinical Services Capability Framework** Commonwealth Aged Care Quality and Safety Commission (where applicable) **Disaster Resilience Policy Directive Emergency Management Act 2004** Fifth National Mental Health and Suicide Prevention Plan Health Care (Governance) Amendment Act 2018 Health Care Act 2008 National Clinical Governance Framework National Health Reform Agenda National Partnership Agreements between the State and Commonwealth Government National Safety and Quality Health Service Standards NDIS Code of Conduct NDIS Practice Standards and Quality Indicators Office for the Ageing (Adult Safeguarding) Amendment Act 2018 Office for the Ageing Act 1995 Public Health Act 2011 SA Health Aboriginal Cultural Learning Framework SA Health Aboriginal Workforce Framework 2017-2022 SA Health Accreditation Policy Directive SA Health Clinical Placement Principles SA Health Clinical Services Capability Framework SA Health Corporate Governance Framework Summary SA Health Enterprise Data Information Plan SA Health Performance Framework 2020-21 SA Health Research Ethics Policy Directive



SA Health Research Focus 2020 Framework SA Health Research Governance Policy Directive SA Health Strategic Plan 2017 to 2020 SA Medical Education and Training Principles SA Mental Health Services Plan - 2020-2025 Service Agreement Amendment Fact Sheet Service Agreement Dispute Resolution Fact Sheet South Australian Aboriginal Cancer Control Plan 2016-2021 South Australian Aboriginal Diabetes Strategy 2017-2021 South Australian Aboriginal Heart and Stroke Plan 2017-2021 South Australian Health and Wellbeing Strategy 2020-2025 Standards for General Practice (where applicable) State Emergency Management Plan State Public Health Plan 2019-2024 The Mental Health Act 2009 All other policies and directives applicable to DHW

## For more information

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