

SAAS Volunteer Health Advisory Committee 2018-19 Annual Report

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To: The Honourable Stephen Wade MLC Minister for Health and Wellbeing

This annual report will be presented to Parliament to meet the statutory reporting requirements of *the Health Care Act 2008 (SA)* and the requirements of Premier and Cabinet Circular *PC013 Annual Reporting*.

This report is verified to be accurate for the purposes of annual reporting to the Parliament of South Australia.

Submitted on behalf of the SAAS Volunteer Health Advisory Council by:

Ian Pay SAAS Volunteer Health Advisory Council Presiding Member

Date: 27/09/2019

From the SAASVHAC Presiding Member

During 2018-2019 SA Ambulance Volunteer Health Advisory Council (SAASVHAC) has, through the Zone Advisory Committees continued to actively communicate and consult with SA Ambulance Service (SAAS) Volunteers, and to communicate closely with SAAS to safeguard the needs, priorities and interest of SAAS Volunteers thereby continuing the provision of an ambulance service to country South Australia.



The Minister for Health and Wellbeing announced a further \$3.6 million investment in October 2018 to continue to support volunteer training over the next three years. This funding will also support four clinical support staff until June 2021 to develop course content, enhance our e-learning system and provide 22 education kits, including manikins, monitor simulations, dummy drug products and a suite of iPads so that volunteers can train locally.

Volunteers now have access to a SAAS provided email to improve communication and information sharing, including clinical notices, policies and procedures. Whilst the uptake by volunteers to use this format was initially quite slow we are now seeing a continued growth each month and have implemented strategies to help increase participation.

SAASVHAC have advocated for a defined pathway for volunteers to progress to Ambulance Officer via an Ambulance Responder course which is hoped will improve retention of Volunteers. This pathway has been developed with a successful pilot course being delivered in February 2019, and planning has commenced for and this to be an established pathway for volunteers.

The sustainability of the current volunteering service delivery model within SAAS has been a large focus of SAASVHAC in 2018/19, with a workshop being held with key stakeholders to brainstorm ideas on what volunteering will look like in 2030. From this workshop a strategy and subsequent projects will be established to scope how SAAS can maintain the volunteering service delivery model whilst acknowledging that volunteering in 2030 may look very different to the current model.

With the announcement of the State Government's four year, \$20 million Rural Health Workforce Strategy, SAASVHAC have commenced working with SAAS management on the review of the sustainability of country ambulance services. A workshop will be held in October 2019 with identified stakeholders from rural health, including rural volunteers/paramedics, doctors, health care professionals and leaders. The aim of this workshop will be to develop strategies to ensure the Ambulance Service strives to accommodate the changing volunteering patterns in rural and regional areas.

SAASVHAC currently has a membership of 11 with a desired membership of 14. In recent times we have seen two members leave for various reasons and a recruitment process is being undertaken to replace those members.

SAASHAC will continue to communicate positively with SAAS Management to further enhance our relationship for the positive outcome of all parties concerned.

Ian Pay SAASVHAC Presiding Member

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Overview:

Our strategic focus

Our Purpose	SAASVHAC's purpose is to:
	Provide advice and advocate on the needs, priorities and issues concerning volunteers within SA Ambulance Service (SAAS) in its provision of ambulance service to country South Australia.
	Represent the interests and needs of volunteers within SAAS across the whole of country South Australia.
	Provide advice to the Minister and SAAS on matters affecting, or that may affect the volunteer sector within SAAS.
	Provide advice on any strategic issue that may have an impact on recruitment or retention of SAAS Volunteers.
Our Vision	A professional, vibrant and committed volunteer workforce delivering best-practice patient care within SAAS, with SAAS being the volunteer organisation of choice.
Our Values	To support, promote and understand SAAS volunteers through representation of the Zone Advisory Committees, whilst exhibiting open, honest and transparent communication with management of SAAS.
Our functions,	SAASVHAC consists of volunteers who undertake an advisory and advocacy role on behalf of all SAAS volunteers.
objectives	SAASVHAC continues to focus on:
and deliverables	Our People – We commit to developing a professional, vibrant, motivated and informed volunteer force which is an integral part of a successful service delivery.
	Communication - We commit to having meaningful, two way, relevant and timely communication with our volunteers, SAAS and our communities.
	Training and Development - We commit to providing fulfilling, flexible and relevant training which supports both the delivery of services and the personal growth of our volunteers.
	Reward and Recognition - We commit to developing an innovative and meaningful strategy which recognises, rewards and promotes achievements and contributions of our volunteers.
	Recruitment - We commit to aligning our retention and recruitment strategies to the fundamental needs of our volunteer community.
	Advocacy and Lobbying - We commit to both identifying and acting upon current, relevant issues which impact volunteers and to a vigorous process of broad community engagement.
	Financial Sustainability - We commit to a well-organised, efficient and transparent process for the control and administration of the Country Capital Reserve Fund (CCRF) and Country Operating Reserve Fund (CORF).

Our Membership structure

Central Zone – Ian Pay and Tracey Bellamy North Zone – Vacant x 2 West Zone – Arminda Graves and Pauline Britza Yorke Zone – Chad Liebelt and Erica Joseph Hills/Fleurieu/KI – Tom Jewson and Jon Jaensch Murray Mallee Zone – Noel Johncock and vacant x 1 Limestone Coast Zone – Michelle Everett and David Walker

Changes to the Membership

During 2018/19 there were changes to the membership structure with the resignation of both the North Zone and Murray Mallee Zone Representative.

Our Minister

Hon Stephen Wade MLC is the Minister for Health and Wellbeing in South Australia

The Minister oversees health, wellbeing, mental health, ageing well, substance abuse and suicide prevention.



The agency's performance

Performance at a glance

SAASVHAC is an unincorporated body which provides advice to the Minister for Health and Wellbeing via the Chief Executive – SA Health and the Chief Executive Officer – SAAS, on behalf of SAAS Volunteers.

Agency contribution to whole of Government objectives

N/A

Agency specific objectives and performance

N/A

Corporate performance summary

N/A

Employment opportunity programs

Nil

Agency performance management and development systems

N/A

Work health, safety and return to work programs

N/A

Executive employment in the agency

N/A

Financial performance

Financial performance at a glance

As the SAASVHAC is unincorporated; its assets and liabilities are included in the financial reports of SAAS.

Consultants disclosure

N/A

Contractors disclosure

N/A

Risk management

Risk and audit at a glance

As the SAASVHAC is unincorporated; its risk and audit management are included in the broader organisational reports of SAAS.

Fraud detected in the agency

Nil

Strategies implemented to control and prevent fraud

SAASVHAC members and SAAS volunteers abide by any relevant SAAS Strategies to control and prevent fraud.

Data for previous years is available at: https://data.sa.gov.au/data/dataset/99688f93-d6e3-4523-a6af-ae1e0940945b

Whistle-blowers disclosure

Number of occasions on which public interest information has been disclosed to a responsible officer of the agency under the *Whistleblowers Protection Act 1993:*

Nil

Data for previous years is available at: <u>data.sa.gov.au/data/dataset/sa-ambulance-service-volunteer-health-advisory-council</u>

Reporting required under any other act or regulation

Act or Regulation	Requirement
Health Care Act 2008	During 2018-2019 SA Ambulance Volunteer Health Advisory Council (SAASHVAC) has, through the Zone Advisory Committees continued to actively communicate and consult with SAAS Volunteers, and to communicate closely with SAAS to safeguard the needs, priorities and interest of SAAS Volunteers thereby continuing the provision of an ambulance service to country South Australia.
	Volunteers now have access to a SAAS provided email to improve communication and information sharing, including clinical notices, policies and procedures. Whilst the uptake by volunteers to use this format was initially quite slow we are now seeing a continued growth each month and have implemented strategies to help increase participation.
	The sustainability of the current volunteering service delivery model within SAAS has been a large focus of SAASVHAC in 2018/19, with a workshop being held with key stakeholders to brainstorm ideas on what volunteering will look like in 2030. From this workshop a strategy and subsequent projects will be established to scope how SAAS can maintain the volunteering service delivery model whilst acknowledging that volunteering in 2030 may look very different to the current model.
	SAASVHAC have advocated for a defined pathway for volunteers to progress to Ambulance Officer via an Ambulance Responder course which is hoped will improve retention of Volunteers. This pathway has been developed with a successful pilot course being delivered in February 2019, and planning has commenced for and this to be an established pathway for volunteers.
	With the announcement from the state government's four year, \$20 million Rural Health Workforce Strategy, SAASVHAC have commenced working with SAAS management on the review of the sustainability of country ambulance services. A workshop will be held in October with identified stakeholders in rural health, including rural volunteers/paramedics, doctors, health care professionals and leaders. The aim of this workshop will be to develop strategies to help ensure the Ambulance Service strives to accommodate the changing employment and volunteering patterns in rural and regional areas.

Reporting required under the Carers' Recognition Act 2005

Nil

Public complaints

Complaint categories	Sub-categories	Example	Number of Complaints 2018-19
Professional behaviour	Staff attitude	Failure to demonstrate values such as empathy, respect, fairness, courtesy, extra mile; cultural competency	N/A
Professional behaviour	Staff competency	Failure to action service request; poorly informed decisions; incorrect or incomplete service provided	N/A
Professional behaviour	Staff knowledge	Lack of service specific knowledge; incomplete or out-of- date knowledge	N/A
Communication	Communication quality	Inadequate, delayed or absent communication with customer	N/A
Communication	Confidentiality	Customer's confidentiality or privacy not respected; information shared incorrectly	N/A
Service delivery	Systems/technology	System offline; inaccessible to customer; incorrect result/information provided; poor system design	N/A
Service delivery	Access to services	Service difficult to find; location poor; facilities/ environment poor standard; not accessible to customers with disabilities	N/A
Service delivery	Process	Processing error; incorrect process used; delay in processing application; process not customer responsive	N/A
Policy	Policy application	Incorrect policy interpretation; incorrect policy applied; conflicting policy advice given	N/A
Policy	Policy content	Policy content difficult to understand; policy unreasonable or disadvantages customer	N/A
Service quality	Information	Incorrect, incomplete, out dated or inadequate information; not fit for purpose	N/A
Service quality	Access to information	Information difficult to understand, hard to find or difficult to use; not plain English	N/A
Service quality	Timeliness	Lack of staff punctuality; excessive waiting times (outside of service standard); timelines not met	N/A

Complaint categories	Sub-categories	Example	Number of Complaints 2018-19
Service quality	Safety	Maintenance; personal or family safety; duty of care not shown; poor security service/ premises; poor cleanliness	N/A
Service quality	Service responsiveness	Service design doesn't meet customer needs; poor service fit with customer expectations	N/A
No case to answer	No case to answer	Third party; customer misunderstanding; redirected to another agency; insufficient information to investigate	N/A
		Total	N/A

Additional Metrics	Total
Number of positive feedback comments	N/A
Number of negative feedback comments	N/A
Total number of feedback comments	N/A
% complaints resolved within policy timeframes	N/A

A whole of SA Health response will be provided in the 2018-19 Department for Health and Wellbeing Annual Report, which can be accessed on the <u>SA Health website</u>".

Appendix: Audited financial statements 2018-19

As the Health Advisory Council is unincorporated, its assets and liabilities are included in the financial reports of SAAS.