

SAAS Volunteer Health Advisory Council 2019-2020 Annual Report

SAAS Volunteer Health Advisory Council

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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 *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, ASM Presiding Member SAAS Volunteer Health Advisory Council

Date 23/09/2020

Signature

Alan



From the SAASVHAC Presiding Member

During 2019 – 2020 SAAS Volunteer Health Advisory Council (SAASVHAC) has continued through the Zone Advisory Committees, to actively communicate and consult with SAAS volunteers. The council has also worked alongside SA Ambulance Service (SAAS) to safeguard the needs, priorities and interests of SAAS volunteers in order to continue the provision of an ambulance service to country South Australia.

The ongoing involvement of SAASVHAC and its support of extra funding via the Country Operating Reserve Fund (CORF) has seen additional resources being allocated to the area of volunteer training resulting in an improved training regime being implemented. In addition to the Country Capital Reserve Funds (CCRF) the allocation of additional funding provided to SAAS from the Department of Treasury and Finance has seen the addition of training ambulances come to fruition and the necessary clinical training equipment together with an overall education package to ensure that our volunteers have the highest level of training at their disposal.

The acquisition of iPads by SAAS and issuing to those new volunteers studying the courses has provided the much needed electronic platform for their learning and has enabled them to more easily access course material and to study on line, providing assessments and study information electronically thereby reducing the assessment time and marking times that had been experienced in the past.

Changes in demographics, the reduction in local employment in particular farming and an aging population have meant recruiting new volunteers in some country regions to be a challenge. The introduction of the Ambulance Assist level and Ambulance Responder level has seen a change in the types of crews able to respond to community needs. Whilst this has seen an increase in new recruits in some areas and aims to improve the overall number of available operational volunteers it will still see some areas without improvement.

A well-defined pathway to Ambulance Officer via an Ambulance Assist to Ambulance Responder aims to improve retention of SAAS volunteers. This pathway has now been implemented and the uptake by Ambulance Assist level volunteers has proved to be beneficial in regards to additional on road crews.

The establishment of portfolios allocated to members of SAASVHAC has shown to have been of immense benefit. This has empowered the members to be an active and important voice on behalf of our volunteers by increasing their understanding and knowledge of various departments within SAAS. The understanding of SAASVHAC members and the collaboration with SAAS Management continues to provide excellent feedback to and from the Council.

SAASVHAC membership is currently 11 with a desired membership of 14. There has been a change of four members throughout the two-year term, with two newly elected representatives replacing the Central and Murray Mallee members. The North and Yorke zone members have yet to be replaced.

The beginning of 2021 will see a newly appointed SAASVHAC membership and it is hoped that all zones will once again be represented.

The volunteer contribution to rostering and training during the world wide COVID-19 pandemic showed outstanding commitment to SAAS and the broader community. Due to work from home restrictions, we saw an increase in the ability of volunteers to cover rosters within their region.

COVID-19 has provided challenges to the way SAASVHAC have normally met. Restrictions saw volunteer teams transition to meeting online conducted via Microsoft teams with a reduced format. During this time Council was still able to maintain a service, albeit limited, and the portfolios certainly assisted with this.

The SAAS Volunteer Support Unit continues to support SAASVHAC in all aspects of required administration and advice, without which the council could not function.

SAASVHAC will continue to advocate on behalf of all SAAS volunteers, ensuring that we enhance our relationships with all stakeholders to ensure a positive outcome for volunteers.

Ian Pay, ASM **Presiding Member** SAAS Volunteer Health Advisory Council

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Overview: about the agency

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, objectives and	SAASVHAC continues to focus on: Our People – We commit to developing a professional, vibrant, motivated and informed volunteer force which is an integral part of a successful service delivery.
deliverables	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 CCRF and CORF.

Our Membership Structure

Central Zone – Ian Pay and Alison Rodgers North Zone – Vacant x 2 West Zone – Arminda Graves and Pauline Britza Yorke Zone – Chad Liebelt x 1 vacancy Hills/Fleurieu/KI Zone – Tom Jewson and Jon Jaensch Murray Mallee Zone – Noel Johncock and Julie Barrie Limestone Coast Zone – Michelle Everett and David Walker

Changes to the agency

During 2019-2020 changes to the membership structure included:

Resignations:

Erica Joseph – Yorke Zone Tracey Bellamy – Central Zone

Appointments:

Julie Barrie – Murray/Mallee Zone Alison Rodgers – Central Zone.



Our Minister

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

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

Other related agencies (within the Minister's area/s of responsibility)

Department of Health and Wellbeing Central Adelaide Local Health Network Northern Adelaide Local Health Network Southern Adelaide Local Health Network Women's and Children's Local Health Network Barossa Hills Fleurieu Local Health Network Eyre and Far North Local Health Network Flinders and Upper North Local Health Network Limestone Coast Local Health Network Riverland Mallee Coorong Local Health Network Yorke and Northern Local Health Network

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

The <u>Office of the Commissioner for Public Sector Employment</u> has a <u>workforce</u> <u>information page</u> that provides further information on the breakdown of executive gender, salary and tenure by agency.

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

The details of South Australian Government-awarded contracts for goods, services, and works are displayed on the SA Tenders and Contracts website. <u>View the agency</u> <u>list of contracts</u>.

The website also provides details of across government contracts.

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

Public interest disclosure

Number of occasions on which public interest information has been disclosed to a responsible officer of the agency under the *Whistle-blowers 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 2019–2020 SAASVHAC has continued, through the Zone Advisory Committees, to actively communicate and consult with SAAS volunteers. The council has also worked alongside SAAS to safeguard the needs, priorities and interests of SAAS volunteers in order to continue the provision of an ambulance service to country South Australia.
	The ongoing involvement of SAASVHAC and its support of extra funding via CORF has seen additional resources being allocated to the area of volunteer training resulting in an improved training regime being implemented. In addition to CORF the allocation of additional funding provided to SAAS from the Department of Treasury and Finance has seen the addition of training ambulances come to fruition and the necessary clinical training equipment together with an overall education package to ensure that our volunteers have the highest level of training at their disposal.
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	Changes in demographics, the reduction in local employment in particular farming and an aging population have meant recruiting new volunteers in some country regions to be a challenge. The introduction of the Ambulance Assist level and Ambulance Responder level has seen a change in the types of crews able to respond to community needs. Whilst this has seen an increase in new recruits in some areas and aims to improve the overall number of available operational volunteers it will still see some areas without improvement.

Reporting required under the Carers' Recognition Act 2005

Nil

Public complaints

Number of public complaints reported

Complaint categories	Sub-categories	Example	Number of Complaints 2019-2020
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

Complaint categories	Sub-categories	Example	Number of Complaints 2019-2020
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
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	Nil

Note: the section below is mandated

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

A whole of SA Health response will be provided in the 2019-2020 Department for Health and Wellbeing Annual Report, which can be accessed on the SA Health website.

Appendix: Audited financial statements 2019-2020

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