

# SAAS Volunteer Health Advisory Council

## 2021-22 Annual Report

SAAS Volunteer Health Advisory Council 216 Greenhill Road, Eastwood SA 5063 <u>http://www.saambulance.com.au</u> Contact phone number: 8274 0335 Contact email: Health:SAASVHAC@sa.gov.au ISSN: 1837-0418 Date presented to Minister: 30 September 2022

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To: Chris Picton 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:

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

Date: 01 September 2022

Signature:

Alay

## From the SAASVHAC Presiding Member



SA Ambulance Service Volunteer Health Advisory Council (SAASVHAC) continued to be active despite the COVID-19 impacts.

SAASVHAC continued to communicate and consult with SAAS Volunteers, Zone Ambulance Coordinating Committees (ZACC) and SA Ambulance Service (SAAS) management, despite the reduced capacity to meet face to face.

The communication strategy by SAASVHAC ensured the needs, priorities and interests of SAAS volunteers were safeguarded and the provision of ambulance services to country South Australia were sustained.

On occasion, country volunteers supported their metropolitan crews with work capacity.

ZACCs continued to meet predominantly online during the COVID-19 period, utilising technology to conduct their meetings. This allowed these committees to continue to actively support their local volunteer teams to ensure the provision of an ambulance service to country South Australians.

SAAS volunteers again rose to the challenging times that COVID-19 presented and continued their volunteering hours during lockdowns and restrictions as well as adapting to changes in clinical procedures and vaccination mandates.

SAASVHAC continued to support an increase in funding allocated specifically to volunteer training from extra funds generated from the Country Operating Reserve Fund (CORF). Following the approval to convert funds within the Country Capital Reserve Fund (CCRF), the additional training ambulances and clinical training equipment have been purchased and rolled out as part of a three-year program. This, together with an overall education package, ensured that our volunteers had the highest level of training at their disposal. This equipment enhanced the level of training, particularly in the practical application of volunteer training.

The initiative to issue iPads to students has enabled them to access online study easily. A lack of connectivity in some country areas continues to be an issue for some volunteers.

SAAS continued to support volunteers who experienced some issues with the introduction of security access to their email accounts and these challenges have been rectified over time. SAAS provided ongoing support to the volunteers with implementing different internet connections and whilst supported not all areas/stations are suited to some IT connections. SAASVHAC continues to advocate on behalf of volunteers to improve connectivity issues.

The SAAS Community Engagement Officer has supported volunteer teams in recruitment and retention and has worked closely with volunteers and managers to offer strategies to improve their success. SAASVHAC liaised closely to ensure recruitment strategies were current and effective.

While this enhanced the overall number of available operational volunteers, some areas remain without improvement and alternative service delivery options must be continually explored.

Retention of volunteers continued to be a challenge with SAASVHAC and SAAS management continually addressing the challenges. Recruiting in some areas is difficult due to changing demographics, the reduction in local farming employment and an aging population.

The Ambulance Assist (AA) and Ambulance Responder (AR) qualifications have engaged new volunteers who provided support to Volunteer Ambulance Officers (AO). A well-defined pathway from recruit to AA, AR and then AO, has improved retention of SAAS volunteers and continues to be a focus for SAASVHAC and SAAS.

The portfolios that were allocated to SAASVHAC members increased the involvement and knowledge of the Council. This has empowered members to continue to be active and vital voices for our volunteers in reporting to management. The ongoing understanding of SAAVHAC members and the cooperation of SAAS management continued to provide excellent feedback to and from the Council. Portfolio areas have changed during the reporting period as projects were completed and additional projects started. The implementation of the portfolios continued to provide a much sought-after involvement and satisfaction of all SAASVHAC members.

SAASVHAC had a membership of 12 with continued support from the SAAS Volunteer Support Unit with administration and advice, and without this support, SAASVAC could not function.

SAASVHAC will continue to communicate positively and effectively with SAAS management in order to enhance our relationship and achieve a positive outcome for all volunteers.

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Mr 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 for the needs, priorities, and issues concerning volunteers within SAAS in its provision of ambulance service to the country regions of South Australia.
	Represent the interests and needs of volunteers within SAAS across all country regions of South Australia.
	Provide advice to the Minister and SAAS on matters affecting or affecting the volunteer sector within SAAS.
	Provide advice on any strategic issue that may impact the recruitment or retention of SAAS Volunteers.
Our Vision	To be 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 the representation of the Zone Advisory Committees while being open, honest, and transparent in communication with the Management of SAAS.
Our	SAASVHAC continues to focus on:
functions, objectives and	<u><b>Our People</b></u> – We commit to developing a professional, vibrant, motivated and informed volunteer force which is an integral part of a successful service delivery model.
deliverables	<b><u>Communication</u></b> – We commit to meaningful, relevant and timely communication with our volunteers, SAAS and communities.
	<u><b>Training and Development</b></u> – We commit to providing fulfilling, flexible and relevant training which supports both the delivery of services and the personal growth of our volunteers.
	<b><u>Reward and Recognition</u></b> – We commit to developing an innovative and meaningful strategy which recognises, rewards and promotes achievements and contributions of our volunteers.
	<b><u>Recruitment</u></b> – We commit to aligning our retention and recruitment strategies to the fundamental needs of our volunteer community.
	<b>Advocacy and Lobbying</b> – We commit to identifying and acting upon current, relevant issues which impact volunteers and to a vigorous process of broad community engagement.
	<b><u>Financial Sustainability</u></b> – We commit to a well-organised, efficient and transparent process for the administration of the CCRF and CORF.

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## **Our Membership Structures**

Central Zone - Ian Pay and Jenny Mackenzie

West Zone – Pauline Britza and Ann Trewartha

Yorke Zone - Chad Liebelt

Hills/Fleurieu/Kl Zone - Jonathan Jaensch and Tracey Bellamy

Murray Mallee Zone - Noel Johncock and Julie Barrie

Limestone Coast Zone – David Walker and Kathy Rowbotham

#### Changes to the agency

During 2021-2022 there were the following changes to the agency's structure and objectives as a result of internal reviews or machinery of government changes.

• The resignation of Mrs Kelly Porter from the Yorke Zone.

#### **Our Minister**



Hon Chris Picton MP 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

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

#### Agency response to COVID-19

N/A Reflected in the SAAS Annual Report 2021-2022.

#### Agency contribution to whole of Government objectives

N/A

#### Agency specific objectives and performance

N/A

#### **Corporate performance summary**

N/A

#### Employment opportunity programs

N/A

#### Agency performance management and development systems

N/A

#### Work health, safety and return to work programs

N/A

\*number of claimants assessed during the reporting period as having a whole person impairment of 30% or more under the Return-to-Work Act 2014 (Part 2 Division 5) \*\*before third-party recovery

Data for previous years is available at: <u>https://data.sa.gov.au/data/dataset/6d184c27-c4dc-4138-9306-b58367817eac</u>

Executive employment in the agency

The <u>Office of the Commissioner for Public Sector Employment</u> has a <u>workforce</u> <u>information</u> page 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

Other financial information

N/A

Other information

N/A

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## **Risk management**

#### Risk and audit at a glance

SAASVHAC is unincorporated so the assets and liabilities are included in the financial 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: <u>https://data.sa.gov.au/data/dataset/6d184c27-c4dc-4138-9306-b58367817eac</u>

#### Public interest disclosure

Number of occasions on which public interest information has been disclosed to a responsible officer of the agency under the *Public Interest Disclosure Act 2018:* 

Nil.

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

Note: Disclosure of public interest information was previously reported under the *Whistleblowers Protection Act 1993* and repealed by the *Public Interest Disclosure Act 2018* on 1/7/2019.

## Reporting required under any other act or regulation

Act or Regulation	Requirement
Health Care Act 2008	SAASVHAC continued through the zone committees to communicate and consult with SAAS Volunteers. The Council also worked alongside SAAS to safeguard the needs, priorities, and interests of SAAS Volunteers to provide an ambulance service to country regions of South Australia.

## **Public complaints**

#### Number of public complaints reported

SAASVHAC is unincorporated so the public complaints are included in the SAAS Annual Reports 2021-2022.

Complaint categories	Sub-categories	Example	Number of Complaints 2021-22
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

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Complaint categories	Sub-categories	Example	Number of Complaints 2021-22
Policy	Policy content	Policy content difficult to understand; policy unreasonable or disadvantages customer	N/A
Service quality	Information	Incorrect, incomplete, outdated 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	N/A

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

Data for previous years is available at: https://data.sa.gov.au/data/dataset/eb1d34b4-7fda-4f0a-a943-f766872ca6f1 **11** | P a g e

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## Appendix: Audited financial statements 2021-22

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