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of South Australia**

# **SAAS Volunteer Health Advisory Council 2020-21 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 *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, ASM  
Presiding Member  
SAAS Volunteer Health Advisory Council

Date: 02/09/2021

## From the SAASVHAC Presiding Member



SA Ambulance Service Volunteer Health Advisory Council (SAASVHAC) continued to be active despite disruptions caused by COVID 19.

SAASVHAC continued to actively communicate and consult with SAAS Volunteers, Zone Ambulance Coordinating Committees (ZACCS) and SAAS management, despite the reduced capacity to meet face to face. This ensured the needs, priorities and interests of SAAS volunteers were safeguarded; and the provision of ambulance services to Country South Australia (and on occasions metropolitan Adelaide) was sustained.

ZACCS changed their mode of communication to predominantly online utilising Microsoft Teams to conduct their meetings. This allowed these committees to continue to be actively supporting their local volunteer teams to ensure the provision of an ambulance service to country, rural and remote South Australians.

SAAS volunteers rose to the challenging times that COVID 19 presented and increased their volunteering hours during lockdowns and restrictions as compared to previous years.

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), additional training ambulances and clinical training equipment were 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 enabled them to easily access subjects to study online. Providing assessment and study information electronically has significantly reduced the assessment and marking times that has been experienced in the past, allowing students a greatly improved experience. A lack of connectivity in some country areas was an issue in the use of the iPads.

Increased security around access to Office 365, hosts volunteer email accounts has created challenges for volunteers. Multi-factor Authentication and lack of connectivity remain issues for our volunteers and SAAS provided ongoing support to the volunteers to enable a smooth transition. SAASVHAC continued to advocate on behalf of volunteers to improve this issue.

In March, the Community Engagement Officer (Volunteers) was appointed. The position was engaged to support teams in recruitment and retention and worked closely with volunteers and managers to offer strategies to improve their success rate. SAASVHAC liaised closely with this position to ensure recruitment strategies are current and effective. Whilst this improved the overall number of available operational volunteers there were some areas without improvement and alternative service delivery options need to be explored.

Retention of volunteers continued to be a challenge and was continually addressed by SAASVHAC and SAAS.

Recruiting in some areas continues to be difficult due to changing demographics, the reduction in local farming employment and an ageing population. The introduction of the AA qualification and the AR level engaged new volunteers whilst providing support for Volunteer Ambulance Officers. A well-defined pathway from recruit to Ambulance Assist (AA), Ambulance Responder (AR) and then Ambulance Officer improved retention of SAAS Volunteers and retention continues to be of concern.

Various portfolios were allocated to SAASVHAC members, increasing the involvement and knowledge for the group. This empowered them to be an active and important voice for our volunteers in reporting to management which proved to be extremely beneficial. The ongoing understanding of SAASVHAC members and the cooperation of SAAS management continued to provide excellent feedback to and from the Council. Some portfolios changed slightly over time as projects were completed and additional projects replaced them. The implementation of the portfolios continued to provide a much sought-after involvement and satisfaction of all SAASVHAC members.

SAASVHAC membership was 10 with a desired membership of 12. All positions on SAASVHAC became vacant at the end of 2020 with a new Council elected for the commencement of 2021 with a mix of new members elected and others continuing for another term.

The Presiding Member position was declared vacant and the incumbent was re-elected for the subsequent two years.

The SAAS Volunteer Support Unit supported SAASVHAC in respect to administration and advice; without this support we could not have functioned.

SAASVHAC will continue to communicate positively with SAAS management to further enhance our relationship for the positive outcome of volunteers of all other parties concerned.



Ian Pay, ASM

**Presiding Member**

SAAS Volunteer Health Advisory Council

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## Overview: about the agency

### Our strategic focus

<p><b>Our Purpose</b></p>	<p>SAASVHAC’s purpose is to:</p> <p>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.</p> <p>Represent the interests and needs of volunteers within SAAS across the whole of country South Australia.</p> <p>Provide advice to the Minister and SAAS on matters affecting, or that may affect the volunteer sector within SAAS.</p> <p>Provide advice on any strategic issue that may have an impact on recruitment or retention of SAAS Volunteers.</p>
<p><b>Our Vision</b></p>	<p>A professional, vibrant and committed volunteer workforce delivering best-practice patient care within SAAS, with SAAS being the volunteer organisation of choice.</p>
<p><b>Our Values</b></p>	<p>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.</p>
<p><b>Our functions, objectives and deliverables</b></p>	<p>SAASVHAC continues to focus on:</p> <p><b>Our People</b> – We commit to developing a professional, vibrant, motivated and informed volunteer force which is an integral part of a successful service delivery.</p> <p><b>Communication</b> - We commit to having meaningful, two way, relevant and timely communication with our volunteers, SAAS and our communities.</p> <p><b>Training and Development</b> - We commit to providing fulfilling, flexible and relevant training which supports both the delivery of services and the personal growth of our volunteers.</p> <p><b>Reward and Recognition</b> - We commit to developing an innovative and meaningful strategy which recognises, rewards and promotes achievements and contributions of our volunteers.</p> <p><b>Recruitment</b> - We commit to aligning our retention and recruitment strategies to the fundamental needs of our volunteer community.</p> <p><b>Advocacy and Lobbying</b> - We commit to both identifying and acting upon current, relevant issues which impact volunteers and to a vigorous process of broad community engagement.</p> <p><b>Financial Sustainability</b> - We commit to a well-organised, efficient and transparent process for the control and administration of the CCRF and CORF.</p>

## **Our Membership Structure**

Central Zone – Ian Pay and Jenny Mackenzie

North Zone – Vacant x 2

West Zone – Pauline Britza and Ann Trewartha

Yorke Zone – Chad Liebelt and Kelly Porter

Hills/Fleurieu/KI 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 2020-21 there were no changes to the agency's structure and objectives as a result of internal reviews or machinery of government changes.

## **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

### Agency performance management and development systems

Nil

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

N/A

### Executive employment in the agency

The [Office of the Commissioner for Public Sector Employment](#) has [workforce information](#) 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



## 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/6d184c27-c4dc-4138-9306-b58367817eac>

### 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: [data.sa.gov.au/data/dataset/sa-ambulance-service-volunteer-health-advisory-council](https://data.sa.gov.au/data/dataset/sa-ambulance-service-volunteer-health-advisory-council)

Note: Disclosure of public interest information was previously reported under the *Whistle blowers 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 Advisory Committees, to actively communicate and consult with SAAS Volunteers. The Council 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.

## Public complaints

### Number of public complaints reported

<b>Complaint categories</b>	<b>Sub-categories</b>	<b>Example</b>	<b>Number of Complaints 2020-21</b>
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	N/A

<b>Complaint categories</b>	<b>Sub-categories</b>	<b>Example</b>	<b>Number of Complaints 2020-21</b>
		unreasonable or disadvantages customer	
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
		<b>Total</b>	Nil

<b>Additional Metrics</b>	<b>Total</b>
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 2020-2021 Department for Health and Wellbeing Annual Report, which can be accessed on the SA Health website.

**Compliance Statement**

SAAS VHAC is compliant with Premier and Cabinet Circular 039 – complaint management in the South Australian public sector	N/A
SAAS VHAC has communicated the content of PC 039 and the agency’s related complaints policies and procedures to employees.	N/A

## **Appendix: Audited financial statements 2020-21**

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