

# Annual Report 2010-11

Health Performance Council



Government  
of South Australia

Health Performance Council

**Health Performance Council  
Annual Report 2010-11**

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**Government  
of South Australia**

Health Performance Council

The Hon John Hill MP  
Minister for Health  
GPO Box 2555  
ADELAIDE SA 5000

Dear Minister

In accordance with the *Public Sector Act 2009*, the *Public Finance and Audit Act 1987* and the *Health Care Act 2008*, I am pleased to submit the annual report and financial statements of the Health Performance Council for presentation to Parliament.

This report provides an accurate account of the operations of the Health Performance Council for the financial year ending 30 June 2011, in compliance with the Department of the Premier and Cabinet Circular on Annual Reporting Requirements.

Yours sincerely

A handwritten signature in blue ink, appearing to read "Anne Dunn".

Anne Dunn  
Chair  
Health Performance Council

30/09/2011

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## Message from the Chairperson

In July 2008, the Health Performance Council (HPC) was established by the Health Care Act 2008 (the Act) to provide independent advice to the Minister for Health and four-yearly reports to the South Australian Parliament on the:

- overall performance of the SA health system
- health status of South Australians, and
- methods used to engage South Australians in improving their health outcomes

The HPC comprises 15 members including the Chair, and five Deputy members. I am pleased to advise that current HPC member Ms Barbara Hartwig was appointed Deputy Chairperson on 26 May 2011. The HPC is supported by a three person Secretariat which provides professional and dedicated work to the Council.

The HPC has achieved a great deal over this past year and I would like to thank the Council Members, Deputies and Secretariat for their service and valuable contribution.

On 31 December 2010, the HPC submitted its inaugural report, *Reflecting on Results – Review of the Public Health System for 2008–2010* to the Minister for Health.

This was our first review of the health system's performance and took into account the:

- strategic directions within Government's health portfolio including relevant targets within South Australia's Strategic Plan
- significant trends, health outcomes and future priorities of the health system
- community and individual engagement strategies and outcomes

The report was tabled in Parliament on 8 February 2011 together with an interim response from SA Health. In June 2011 SA Health released a formal response which welcomed the HPC's review and acknowledged performance areas requiring additional focus.

With the first report finalised, the HPC has begun establishing the scope for the next four-yearly review.

In addition, the HPC is required to report on the operations of the country Health Advisory Councils (HACs) and local health services. Specifically, the HPC is required to provide a report to the Minister for Health on:

- the effectiveness of HAC's in promoting the interests of local communities
- the satisfaction levels with HAC governance arrangements from the perspective of the members of HAC's, the local community and the hospital
- any significant issues relating to the operations of HAC's considered relevant by the HPC

The HPC established a HAC Review Advisory Committee comprising representatives from the HPC and country HACs. This group is overseeing the process of the review and is currently engaged in an extensive consultation process across the State with HAC members, senior Health Department staff and relevant community members. Following analysis of the outcomes of this consultation HPC will reach conclusions about the operations of country HACs and submit its evaluation report to the Minister for Health by December 2011.

Finally on behalf of the HPC members and deputies, I wish to thank those individuals and organisations that we have engaged and collaborated with over the past 3 years, and in particular SA Health for their cooperation at all times. By working with the health care sector and South Australians I believe we can improve the health system's accountability in delivering better health care outcomes for all.



Anne Dunn  
Chairperson

## HPC Member List

**Chair** Ms Anne Dunn AM

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**Members**

Dr Michael Beckoff  
Professor Justin Beilby  
Ms Rachel Bishop  
Ms Barbara Hartwig  
Professor Michael Kidd AM  
Mr Laurence Lewis AM  
Professor Robyn McDermott  
Honourable Carolyn Pickles  
Dr Melissa Sandercock  
Mr John Singer  
Mr Thomas Steeples  
Dr Thomas Stubbs  
Dr Diane Wickett  
Mr Ian Yates AM

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**Deputy Members**

Mr James Dellit (Deputy to Thomas Steeples)  
Mr Geoffrey Harris (Deputy to Michael Beckoff)  
Mr Christopher Overland (Deputy to Ian Yates)  
Dr Michael Rice AM (Deputy to Melissa Sandercock)  
Dr Tahereh Ziaian (Deputy to Rachel Bishop)

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**Secretariat Staff**

Ms Barbara Power – Director  
Ms Marcela Perez – Senior Project Officer  
Ms Julie Edwards – Administration Officer

## 2010-11 Highlights

### 1. Release of the Health Performance Council's Reflecting on Results 2010 Report

On 30 December 2010 the HPC submitted its **Reflecting on Results** inaugural 2010 report on the public health system to the South Australian Minister for Health and the Parliament.

The HPC reviewed key aspects of SA Health's performance during 2008–2010. The review focused on the *SA Health Strategic Plan 2008–2010* (SAHSP), which explicitly stated that this was SA Health's public statement on where they are headed and what people can expect from them.

This report detailed the HPC findings on how SA Health is meeting the key objectives and targets it set within its strategic directions to improve health outcomes for South Australians. The HPC found:

#### ***There are good results in many areas...***

- The majority of South Australians are living longer in good health
- The SA health system is changing to meet future health needs
- SA Health is making progress in improving services to the South Australian community
- Health services in the community are taking shape
- A strong focus on maintaining a sustainable and safe hospital sector

#### ***...While achieving results in other areas remains a challenge***

- Systematic collection and analysis of client data and information on the client/patient's experience and quality of care outcomes in the health system were not well developed
- A greater focus on continuity of care is needed
- Inadequate alignment between strategic intent and performance monitoring
- More dynamic community relationships needed
- 'One size does not fit all' for South Australia's diverse population

The Minister for Health tabled the report in Parliament on 8 February 2011, together with an interim response from SA Health. In June 2011, SA Health released its formal response in which it welcomed the review and commended the HPC on its inclusive and professional approach in reviewing South Australia's large and complex public health system.

The HPC is pleased to report that SA Health's formal response acknowledged the performance areas requiring additional focus and included specific actions to improve future performance. The HPC will continue to monitor and report progress on these areas in the 2014 review report.

### 2. Review of Country Health Advisory Council Governance Arrangements

The Act requires the HPC to review the governance arrangements between country HACs and local health services and provide a written report to the Minister for Health in 2011.

During 2010-11 the HPC commenced working with HACs and Country Health SA (CHSA) to obtain the views of local community representatives, past and present council members and health service personnel in country regions.

### 3. Planning the 2014 Health Performance Council Health System Performance Review

Planning for the 2014 performance review of the SA public and private health systems is underway with the development of a Health System Performance Framework. The HPC framework adapted from the National Health Performance Framework (2008) outlines the key performance domains of a health system and provides the HPC with an evidence based structure for the identification of suitable performance measures and analysis of results.

## Health Performance Council

The HPC is a Ministerial advisory body established on 1 July 2008 under Part 3, section 9 of the Act.

The 15 members (including chairperson) and five deputies were appointed by the Governor of South Australia for a four year term. They were chosen for their collective capacity, qualifications, experience and expertise. Prescribed bodies were consulted in the appointment process for the HPC members.

The broad spectrum of member expertise gives the HPC capacity to provide independent, high level advice to the Minister for Health on the performance of the South Australian health system in achieving the objects of the Act.

The HPC is supported administratively by a three person secretariat and, with the Minister's approval, may make use of other public sector staff, services or facilities in undertaking its role.

As the first of its kind to be established in Australia the HPC provides for greater public accountability for the health outcomes achieved by the South Australian health system.

### Governance

The HPC operates within the responsibilities outlined in Part 3, section 9 and Schedule 1, section 6 of the Act, relevant sections of the Health Care Regulations 2008 and the HPC Terms of Reference.

### Functions and Organisational Structure

The HPC's key function is to conduct four-yearly performance reviews of the South Australian health system against the objects of the Act and submit a report to the Minister for Health on:

- The operation of the various health systems established within the State
- Significant trends in the health status of South Australians including trends in health outcomes and, as appropriate, for particular population groups
- The effectiveness of methods used within the health system to engage communities and individuals in improving their health outcomes
- Any other significant issues considered relevant by the HPC

The HPC submitted its first performance review report to the Minister for Health on 31 December 2010, with its next four-yearly report due on 31 December 2014.

The HPC is also required to provide to the Minister for Health with an annual report on its operations and key strategic directions during the proceeding financial year. This is the third annual report for the HPC since its commencement.

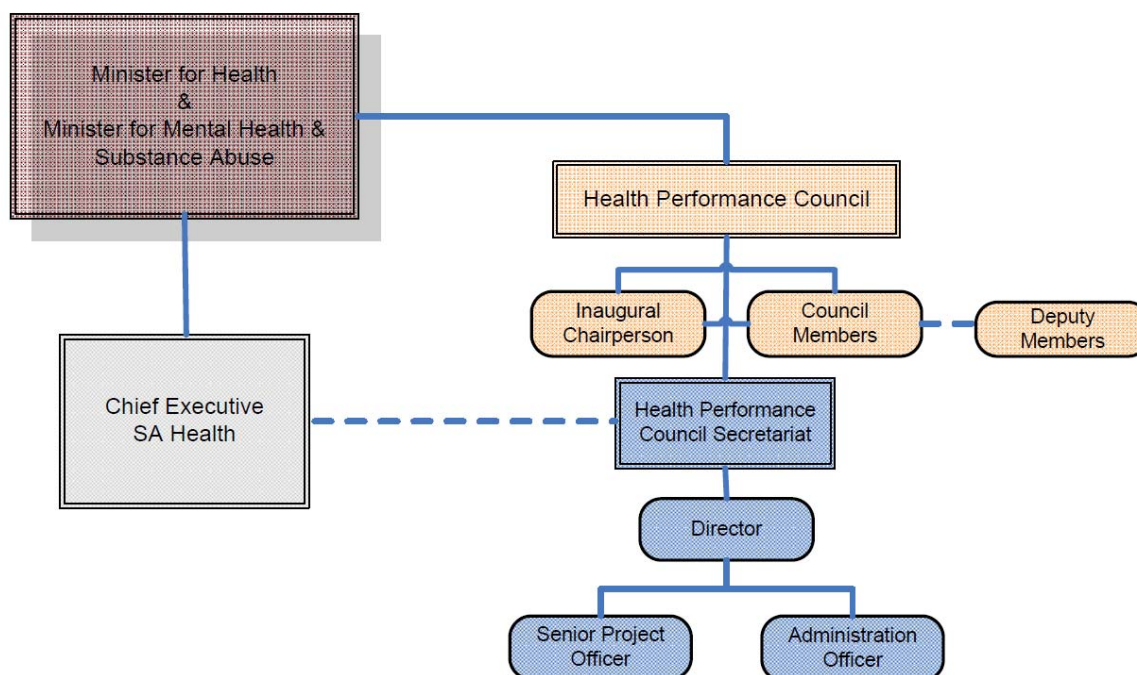
In addition to the on-going annual and four-yearly reports, the HPC is required to provide the Minister for Health with a report on the operations of the HACs in country areas of South Australia in 2011. In accordance with the Act the HPC is specifically required to report on:

- Effectiveness of HACs in promoting the interests of local communities
- Satisfaction levels with HAC governance arrangements from the perspective of the members of HACs, the local community and the hospital
- Any significant issues relating to the operations of HACs considered relevant by the HPC

The HPC has commenced its review of the HACs and will submit its report to the Minister for Health by December 2011.



## Organisational structure as at 30 June 2011



N.B. The Staff in the HPC Secretariat are employed by SA Health (the HPC is not an employing body) but work autonomously in the provision of high level secretariat services to the HPC. The Director HPC Secretariat is accountable to the Chief Executive, Department of Health for the effective management of staff and resources and accountable to the Chair HPC for the provision of high level independent advice and the overall performance of the Secretariat.

### Key Relationships

In order to ensure the HPC is well informed about health issues affecting South Australians and the health system, the HPC has established working relationships with stakeholders and interested parties involved with the public and private health systems. These include but are not limited to:

- The Minister for Health and the Minister for Mental Health and Substance Abuse
- Relevant national, state and local government agencies
- Health Advisory Councils in country areas of South Australia
- Prescribed bodies named in the Act

### Health and Health Systems Defined

Health is a concept that is defined by the World Health Organisation as a 'state of complete physical, mental and social wellbeing and not merely the absence of disease and infirmity' (WHO 1946).

Health when viewed in a broader social and economic context can be viewed as an outcome of the combined efforts of the performance of the health system, social and economic organisation and actions of individuals.

Health inequalities are the result of structured unfairness and result largely from the impact of social and economic conditions on people's lives. These impacts determine their risk of illness and capacity to maintain health and wellbeing and ability to gain access to and use health services effectively.

Efforts directed at reducing social disadvantage contribute to health equity.

## The South Australian Health System

South Australia's health system comprises a mix of public, private, and non-government sector providers that work independently and collaboratively at a national or state capacity, for the achievement of health outcomes. The services provided to individuals across the health care continuum range from health protection and promotion through to end of life care, within diverse settings, geographical locations and service delivery models.

The health system is supported by other agencies (for example, research and central statistical agencies, consumer, volunteer and advocacy groups, professional organisations and educational and training institutions) and other organisations that contribute to the broader health and wellbeing agenda.

Overall coordination of the public health care delivery system is the responsibility of Australian Government and State/Territory health ministers.

## South Australia's Health Portfolio Context

Over the past few years, there has been significant reform activity across the whole system. These reform initiatives are being implemented in a challenging context of increasing demand for services, health workforce shortages, efficiency reviews, regional governance restructures and the emerging national health care reforms.

The national and state health systems reforms are designed to meet changing and growing demands for different and accessible services by a diverse and ageing population.

Under the functions listed in the Act, the HPC is required to take into account strategic objectives that have been set or adopted within the Government's health portfolios when reviewing the performance of South Australia's health systems.

# Health Performance Council Strategic Directions 2008–2011

## Our Vision

South Australia has a safe, high quality, integrated health system with appropriate community engagement that contributes to optimal health outcomes for South Australians.

The HPC enables South Australia to be recognised as having an independent and evidence based appraisal of its health system.

## Our Mission

The HPC is committed to the provision of independent advice to the Minister for Health on improving the health status of South Australians and the overall performance of the SA health system including its engagement with individuals and communities.

## Our Values

The HPC members are guided by the following values:

Respect	We value and recognise the differences, beliefs, customs, and heritage within the community
Accountability	We are committed to the responsibilities under the Act
Excellence	We are committed to the best use of resources to deliver the best possible service
Independence	We value being able to act, speak or think without externally imposed restraints
Openness	We value clear and open communication and decision making processes

The HPC demonstrates the behaviours it values in its interactions with others when reviewing the performance of the SA health system.

## Our Strategic Directions

The HPC will:

1. Focus on reviewing the SA health system's performance in achieving strategic objectives that have been set or adopted within Government's health portfolios
2. Review the effectiveness of governance arrangements between the country HACs and their hospitals/health services as required under the Act
3. Deliver a quality advisory service to the Minister for Health and the community through the SA Parliament
4. Promote our role to the SA health system and wider community

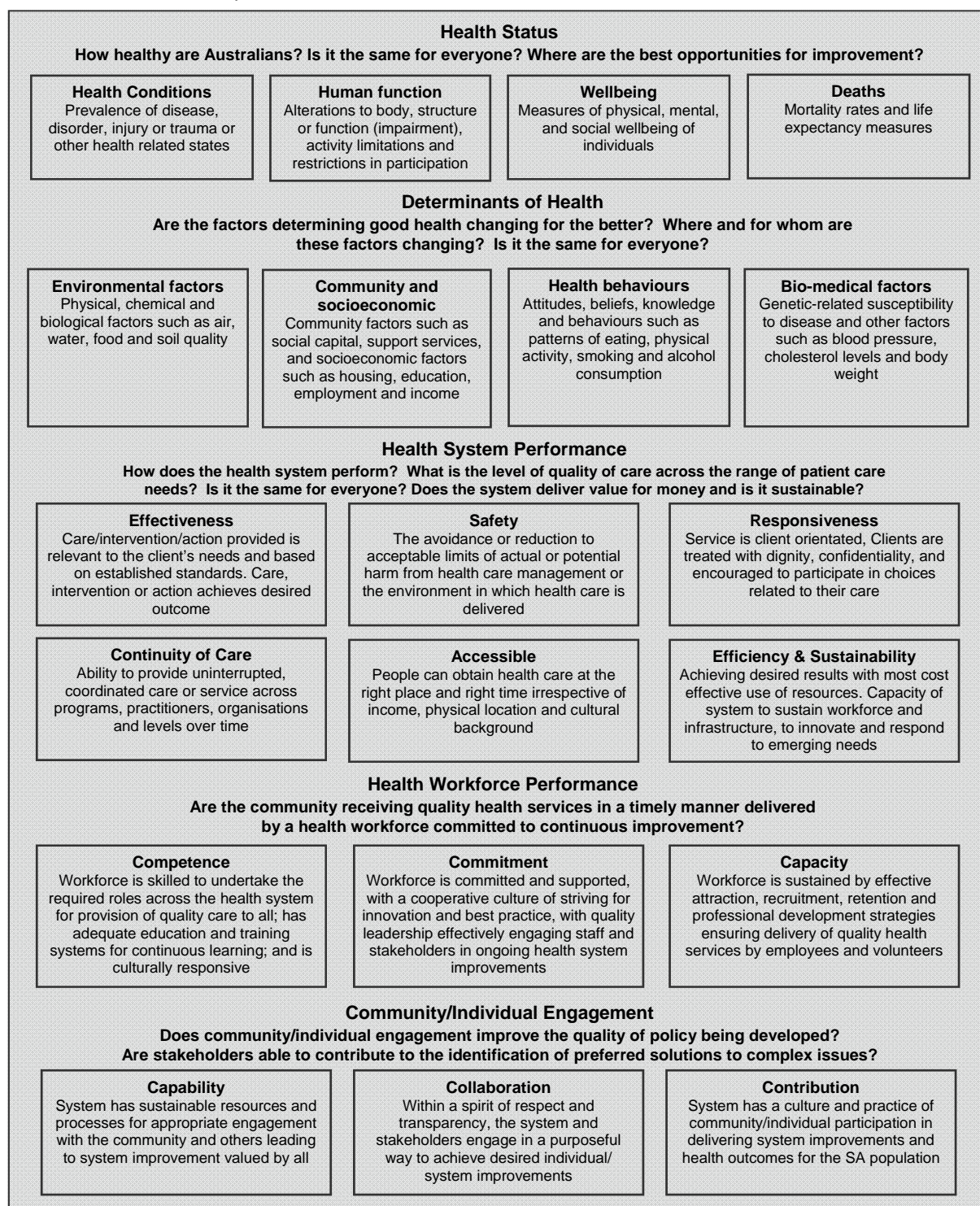
## Our Performance Monitoring Framework

Health systems are complex with many different accountability relationships for the achievement of outcomes. The HPC has a fundamental responsibility to collect and analyse relevant performance data and information generated within this challenging context.

Health system performance monitoring by the HPC delivers improved system accountability and produces transparent, evidence based findings that support continuous improvement. An effective assessment of the SA health system's performance starts with a coherent performance-monitoring framework that identifies the various dimensions and levels of system performance.

The HPC has adapted the following National Health Performance Framework for this purpose (with the inclusion of specific health workforce and community engagement domains).

Table 1 HPC Health System Performance Framework





## Our Progress during 2010-11

Over the past 12 months, the HPC has focussed on three areas:

### 1. 2010 Review of the Performance of the Public Health System

Under the functions listed in the Act, the HPC is required to take into account strategic objectives that have been set or adopted within the Government's health portfolios when reviewing the performance of South Australia's health systems.

The Council of Australian Governments (COAG) health agreements and the following key state documents set the context for South Australia's health portfolios and reform agenda during 2008-2010:

- South Australia's Strategic Plan
- Health Care Act 2008 (the Act)
- South Australia's Health Care Plan 2007-2016
- SA Health Strategic Plan 2008-2010 (SAHSP)

Within this complex context the HPC reviewed key aspects of SA Health's performance from 2008–2010. The review scope was limited to the priorities within the SAHSP which explicitly states that this is SA Health's public statement on where they are headed and what people can expect from them.

SAHSP states it would:

- Strengthen primary health care
- Enhance hospital care
- Reform mental health care
- Improve the health of Aboriginal people

SAHSP further states it:

- Is committed to the values of integrity, respect and accountability
- Values care, excellence, innovation, creativity, leadership and equity in health care provision and health outcomes
- Demonstrates these values in its interactions with others in SA Health, the community, and those for whom it provides care

Within these parameters the HPC assessed the performance of the SA public health system.

SA Health's overall performance was evaluated in relation to:

- Its policies and strategies to achieve the South Australian Government's key health outcomes
- State health system performance measures, standards and benchmarks (SA Health was assessed against its own measures, not new ones established by the HPC)
- Significant trends, health outcomes and future priorities of importance to the State Government
- Community and individual engagement strategies and outcomes

### Review Limitations

The HPC did not review the whole public health system functions and services. Many essential SA Health services and functions were not specifically identified in the SAHSP and were therefore outside the review scope.

The 2010 HPC Report did not include a review of South Australia's private health system.

The HPC based its findings on available information and data gathered during 2008–2010. It accepted information and data provided by SA Health and particular stakeholders at face value.

The HPC acknowledges the information and data provided might not have always reflected the most recent changes in the health care system as these can occur at a faster rate than information systems can reveal.

## Review Methodology

The review process comprised the following steps:

1. The HPC submitted review questions (based on SAHSP strategic directions and key objectives) to SA Health that sought written responses on the following:
  - Relevant key performance indicators, targets and expected outcomes
  - Monitoring results relating to:
    - Health status improvements
    - Health system improvements
    - Regional variations in health status outcomes and system improvements
    - Relevant trends from monitored key performance indicators
  - Improvements in health status and service delivery for:
    - Aboriginal and Torres Strait Islander people
    - People living in rural and remote communities
    - People with mental health issues
  - Contribution of individual/community engagement approaches to health service improvements
  - Monitoring and data limitations
  - Service delivery challenges/future directions

### The Health Performance Council Community and Stakeholder Engagement

The importance placed by government on community engagement to foster sustainable, inclusive and involved communities, was demonstrated under the Act. Within this the HPC is tasked with the responsibility of assessing the effectiveness of methods used within the health system to engage communities and individuals in improving their health outcomes.

In performing the statutory obligations under the Act, the HPC identified and defined 'effective', in relation to community/stakeholder engagement, and agreed that:

*'In its broadest sense, community/stakeholder engagement refers to the opportunities, processes and mechanisms made available to members of the South Australian public, regardless of status, culture, gender, sexuality or age, to have a say in the development, delivery, planning and evaluation of health services and health system priorities.'*

The HPC actively consulted with informed health sector stakeholders and sought their views on SA Health's performance against its 2008–2010 strategic directions. Represented stakeholders included the country Health Advisory Councils, Ministerial Advisory Councils, non-government sector peak bodies, health professional bodies, local government bodies, the universities and advocacy groups.

The HPC's community engagement process was guided by the following principles:

<b>Effective</b>	The outcomes of community engagement would inform HPC's decision-making and advisory service to the Minister for Health
<b>Appropriate</b>	Engagement was undertaken with the relevant sections of the community as required and duplication would be avoided
<b>Inclusive</b>	To ensure the HPC's advice to the Minister remained balanced and broadly representative of the views of the South Australian community, the HPC engaged community groups representing the disadvantaged and socially excluded
<b>Coordinated</b>	The HPC adopted community engagement best practice mechanisms to ensure a consistent and coordinated approach to its community engagement activities

Consultation methods included questionnaires, face-to-face forums, interviews, written submissions and meetings. Information gathered via questionnaires was categorised using SA Health's strategic objectives and emerging themes identified. A summary of the information collected was reviewed, discussed and validated, at every community/stakeholder engagement forum hosted by the HPC.

The stakeholder forums sought participants' views about how SA Health was performing in the areas committed to in the SAHSP. Forums were held as follows:

- On 4 and 5 February 2010, the HPC met with a number of key stakeholders representing remote Aboriginal communities and the organisations providing Aboriginal health services throughout South Australia.
- On 8 and 9 February 2010, the HPC held separate forums with the following stakeholder organisations:
  - Non-government health service providers (8 February 2010)
  - Consumer advocacy groups (8 February 2010)
  - Professional bodies and universities (9 February 2010)
- On 21 April 2010, the HPC met with representatives of the country HACs.

The engagement of key consumer advocacy groups and professional bodies, who have long established relationships with the South Australian public health system, resulted in the collection of valuable feedback. This was used by the HPC to identify the priority areas requiring improvement that fell within the scope of this review, and has informed the findings in this report.

## 2. Review of Country Health Advisory Council Governance Arrangements

Under the Act, country HACs have been established to give local communities continued direct input into their health priorities and planning. In accordance with the Act, the HPC is required to review the HACs within a reasonable time after the third anniversary (1 July 2011), of the HACs having been established.

As part of developing the review scope, the HPC met with representatives from the 41 HACs in September 2010 and agreed to establish a committee comprising representatives from the HPC, country HACs and Country Health SA. The committee's role is to advise the HPC on the development and implementation of the review process.

The Advisory committee has an important role assisting the HPC in the development of the stakeholder engagement process and communications plan.

Using the intrinsic knowledge of the HACs and CHSA regional cluster directors to identify individuals and community organisations with adequate knowledge of the HACs, the HPC is currently obtaining feedback from the three key stakeholder groups named in the Act.

To ensure the validity of the stakeholder selection methodology, the HPC procured the services of an independent consultant to review the stakeholder engagement plan prior to implementing the consultation activities on behalf of the HPC.

The stakeholder consultation component of the review extends from 30 May 2011 to 29 July 2011 and comprises a survey specifically targeted to each of the three key stakeholder groups, available in hard copy, electronic or phone interview format.

Information gathered as a result of the stakeholder engagement process will be utilised to identify themes which the HPC will then use to develop its findings based on the available evidence prior to preparing a draft report.

The final report will be submitted to the Minister for Health by 31 December 2011.

### 3. Planning the 2014 Health Performance Council Health System Performance Review

The following table provides a summary overview of the progress to-date for the HPC's 2014 review of the South Australian health system.

Table 2 Key Targets and Progress towards the 2014 Health System Review

Strategic Direction	2010-11 Outcomes	Progress at 30 June 2011
1. Review the performance of South Australia's health system for the period 2008-2010	<ul style="list-style-type: none"><li>• First 4 year report submitted to the Minister for Health</li></ul>	Completed 30 Dec 2010
2. Review the performance of South Australia's health system for the period 2011-2014	<ul style="list-style-type: none"><li>• 2014 performance review framework developed</li><li>• Priority performance review areas identified</li><li>• 2014 review stakeholder engagement framework developed</li><li>• Commence the 2014 review of South Australia's health system</li></ul>	Completed  In progress. Will be completed by 30 Dec 2011  In progress. To be completed by 30 Dec 2011  In progress. To be completed by 30 Dec 2014
3. Deliver quality advisory services to the Minister for Health	Establish the HPC's Strategic Directions for 2010-12 and annual work plan  Establish linkages with relevant national and international organisations	Completed  Commenced & ongoing
4. Promote the HPC to South Australia's health system and wider community	<ul style="list-style-type: none"><li>• Stakeholder engagement framework developed</li></ul>	Ongoing

## On the Horizon

The HPC's main goal for the first half of the next financial year is to complete the stakeholder engagement component of its review of the operations of country HACs in accordance with requirements under the Act.

The review report will be submitted to the Minister for Health by 31 December 2011. Once the report is tabled in the South Australian Parliament, it will be available to the public on the HPC's website.

Over the next three years, the HPC will actively build on the lessons learnt from the 2010 review.

The HPC plans to complete developing the process it will use for reviewing the performance of the South Australian health system for the period 2011 to 2014. During the second half of 2011, the HPC will conduct a series of stakeholder engagement activities to assist with the development of the 2014 Review scope. Data collection for the review is expected to commence in January 2012. The HPC's second 4-yearly report is due to be submitted to the Minister for Health by 31 December 2014.



# Health Performance Council Membership Details

## Membership Criteria

The Act specifies that the HPC members be appointed by the Governor of South Australia on the recommendations of the Minister for Health in accordance with the Act, for a period not exceeding four years. The Governor can also appoint a suitable person to be the deputy of a member of the HPC.

The HPC members collectively in the opinion of the Minister:

- Have a high level of knowledge of, and expertise in, the provision of healthcare or the administration of health services
- Are able to represent the diversity of South Australia's communities
- Have experience, skills and qualifications required to enable the HPC to carry out its functions effectively

The Minister for Health consulted with the prescribed bodies listed in the *Health Care (HPC – Appointment of Members) Regulations 2008* in relation to the selection of persons for appointment to the HPC by the Governor of South Australia.

The selection of HPC members has taken into account SASP targets relating to Women in Leadership. The gender balance in the HPC membership supports the attainment of Target 5.1 Boards and Committees: increase the number of women in all State Government boards and committees to 50% by 2008.

The appointment of Ms Anne Dunn as the Inaugural Chairperson of the HPC supports the attainment of Target 5.2 Chairs of Boards and Committees: Increase the number of women chairing state government boards and committees to 50% by 2010.

HPC member, Ms Barbara Hartwig, was appointed Deputy Chairperson of the HPC on 26 May 2011.

## Members

During the 2010-11 reporting period, the HPC comprised the following members and deputies:

### **Ms Anne Dunn AM – Inaugural Chairperson**

(appointed until 28 May 2012)

Ms Dunn has had a distinguished career in the public service and extensive experience in chairing boards and committees including the National Regional Women's Advisory Council, the Adelaide Festival Centre Trust, the Australia Council for the Arts and the South Australian Training and Skills Commission. She previously served as a director of the Australian Rural Leadership Foundation, Australia Uniform Building Code Council, Local Government Grants Commission and the SA Government Management Board. Ms Dunn has also been CEO of the Port Phillip Council in Victoria and in South Australia she was the CEO of the Department of Arts and Cultural Heritage, the Department of Family and Community Services, the Department of Local Government and a Commissioner of the Public Service Board. She is currently the Managing Director of M I Murren Enterprises.

### **Ms Barbara Hartwig - BN CF – Deputy Chairperson**

(appointed until 25 June 2012)

Ms Hartwig has worked in the nursing profession since 1970. During her long career, she has been actively involved in the Australian Nursing Federation (SA Branch) and the Nurses Board of South Australia, holding various positions including Chair of the Board as well as Chair of various committees. Ms Hartwig was previously the Chair of the Country Health SA Board and Chair of the Mid North Regional Health Service Board. For the past eight years she has been working in Aged Care.

**Dr Mike Beckoff - MBBS, FACRRM, FAICD, Assoc Dip Agric (Dist)**

(appointed until 25 June 2012)

Dr Beckoff has had over 30 years experience in the health sector in a diverse range of areas, including mental health, rural health, men's health, sexual therapy and general health. Dr Beckoff is currently Chair of Murray Mallee General Practice Network; Statewide Steering Committee of the Mental Health Shared Care in GP Program for SA Health, SA Inner Country Health Network Local Health Alliance, Murray Mallee Mental Health Forum and is on the Board of General Practice SA (Chair 2005-2010). He is currently Clinical Adviser - Mental Health for Country Health SA as well as a member of various Department of Health and Country Health SA reference groups.

**Professor Justin Beilby - MD, MPH, FRACGP, DRCOG, DA**

(appointed until 25 June 2012)

Professor Beilby is currently the Executive Dean, Faculty of Health Sciences at the University of Adelaide and is still active in general practice. Professor Beilby has broad experience of the Australian and South Australian health care system and has been actively involved in research, both clinical and policy related in the areas of workforce planning, primary care financing, chronic illness and the quality use of medicines for over 20 years. He has held various positions on boards and committees including: Deputy Chair of the Children, Youth and Women's Health Service; and Independent Chair of the Medical Benefits Scheme Item Restructuring Working Group. Professor Beilby is a member of the Department of Health Clinical Senate and has been in the past a member of the National Health and Hospital Reform Commission. He is currently President of the Medical Deans of Australia and New Zealand.

**Ms Rachel Bishop - BSc (NRM)**

(appointed until 25 June 2012)

Ms Bishop has worked in the South Australian Public Sector for over 12 years and is currently the Community Representative – Cardiology Clinical Network in the Department of Health. For the past four years, Ms Bishop has volunteered at the Women's and Children's Hospital (WCH), helping to establish support groups and playgroups for parents of tube fed babies and those with children who have congenital heart disease. Ms Bishop has also been involved with the WCH and the Women's and Children's Hospital Foundation in the creation and promotion of a South Australian support book for families of children living with a chronic or life threatening illness 'No such thing as a Silly Question'.

**Professor Michael Kidd AM - MBBS, MD, DCCH, Dip RACOG, FRACGP, FACHI, FAFPM (Honorary), FHKCFP (Honorary), FRNZCGP (Honorary), FCGPSL (Honorary), MAICD**

(appointed until 25 June 2012)

Professor Kidd is Executive Dean of the Faculty of Health Sciences at Flinders University. He also works as a general practitioner with a special interest in the care of people with HIV. He is the President-elect of the World Organization of Family Doctors and is a past president of the Royal Australian College of General Practitioners. He chairs the Australian Government's Ministerial Advisory Committee on Blood Borne Viruses and Sexually Transmissible Infections and is a member of the Australian Government's Medical Training Review Panel. He chairs the South Australian Health and Medical Research Council. He is a past chair of Doctors for the Environment Australia and a member of the boards of Therapeutic Guidelines Limited, the Arts and Health Foundation, the Channel 7 Children's Research Foundation, FCD Health, Flinders Reproductive Medicine, Northern Territory General Practice Education and the Cora Barclay Centre.

**Mr Laurie Lewis AM**

(appointed until 25 June 2012)

Mr Lewis is the current Chairman of the Consultative Council of Ex-Service Organisations. Previously, he has been Chair of the Repatriation General Hospital Advisory Board and Chair of the Repatriation General Hospital Board of Directors. Mr Lewis is also a member of the Veterans' Advisory Council (SA); National Ex-Service Round Table on Aged Care and has also acted as advisor to the War Widows Guild of South Australia. Mr Lewis has a strong understanding of the public health system and the veteran community.

**Professor Robyn McDermott - MBBS, FAFPHM, MPH, PhD**

(appointed until 25 June 2012)

Robyn McDermott has recently taken up the role of Foundation Director of SA NT Datalink and Professor of Public Health after 5 years as Pro Vice Chancellor Health Sciences at the University of South Australia. She has previously worked as a clinician, health service manager and researcher in rural and remote Australia and South East Asia and also as a consultant for WHO, AusAID, World Bank, and the Australian and Northern Territory Governments. Robyn is a past President of the Australasian Faculty of Public Health Medicine and a member of the NHMRC Academy. Her main research interests are Indigenous Health, chronic disease epidemiology and health systems improvement. She has recently acted as spokesperson for the Australasian College of Physicians on Climate Change and Health.

**Hon Carolyn Pickles**

(appointed until 25 June 2012)

Ms Pickles was a Member of the Legislative Council, South Australian Parliament for 17 years. She held the position of Government Whip, Chair of the Social Development Committee of Parliament, Chair of the Industries Development Committee and chaired a number of select Committees on issues such as public housing, Aboriginal health, child protection policies in SA. She chaired the Social Development Committee which brought down the well recognised report on HIV/AIDS. In 1994 Ms Pickles was elected as Leader of the Opposition in the Legislative Council, a position she held until her retirement in 2002. On retirement Ms Pickles was appointed Chair of the Board of the Children, Youth and Women's Health Service and during that time was involved with many significant reforms in that service including: the development of the Family Home Visiting Program; Child Protection Audit; and a five year Aboriginal Health Strategy. She is currently Deputy Chair of Adelaide Symphony Orchestra Board and State Library of South Australia Foundation Board.

**Dr Melissa Sandercock - BMBS, MHKCOG, FRANZCOG**

(appointed until 25 June 2012)

Dr Sandercock has worked within the obstetrics and gynaecology fields since 1988. She currently works in private practice as an obstetrician and gynaecologist and has a strong interest in the future of private obstetric care as part of the ongoing model of care for women in the future. Dr Sandercock is a member of various committees, including: Chair of the Perinatal Committee at Calvary North Adelaide, the Clinical Review Committee at Calvary North Adelaide; the Medical Advisory Panel for the Medical Insurance Group Australia; and the Editorial Committee for the Australian Medical Association (SA). Dr Sandercock is particularly interested in women's health issues.

**Mr John Singer - Adv Dip CServMgt**

(appointed until 25 June 2012)

John Singer has a strong background in the health, community and wellbeing of the Aboriginal people. Mr Singer has been an active participant on several boards and committees including: National Aboriginal Community Controlled Health Organisation; Aboriginal Health Council of SA; Country Health SA; Anangu Remote Health Alliance; and Centre for Clinical Research and Excellence in ATSI Health. Additionally, Mr Singer is the Director of the Nganampa Health Council, which is the largest Aboriginal community controlled health service in remote Australia. Mr Singer has a long standing commitment to the health and wellbeing of the Aboriginal community as well as broad experience in indigenous health.

**Mr Thomas Steeples - BSc, GradCertMgt**

(appointed until 25 June 2012)

Mr Steeples has had significant experience in the health sector over the past 20 years. Currently Mr Steeples is the manager of Streetlink Youth Health Service. He also lectures in Counselling in Adelaide University's Discipline of General Practice. Mr Steeples is the Vice-President of the Youth Affairs Council of South Australia and a previous Chairperson of the Health Consumers Alliance of SA.

**Dr Thomas Stubbs - BSc (Hons), PhD, Dip Ed, L.Mus.A, FAICD, FAIM**  
(appointed until 25 June 2012)

Dr Stubbs brings over 30 years of public sector experience to the role. He was Acting Chief Executive of Health prior to his appointment as Chief Executive of the Government Reform Commission, and had previously had numerous senior Executive roles in a range of agencies including Health, Environment, and Premier and Cabinet. He had extensive national involvement in the areas of information management, electronic health records and primary health care. He is now Managing Director, Executive Advisory Services, providing advice to the public and private sectors in relation to information management, health system management and reform, and Executive recruitment and development.

**Dr Diane Wickett - RN RM DipN, BN (Edu) MN (Advanced Practice), PhD**  
(appointed until 25 June 2012)

Dr Wickett has been involved in the area of nursing and midwifery locally, nationally and internationally, for over 30 years. Dr Wickett has held several senior roles which have developed a high-level of understanding of the issues for the nursing and midwifery professions. These roles include: Chair of the Royal College of Nursing; Professional Officer, Australian Nursing Federation; Manager Registration and Investigations, Nurses Board of South Australia; Director – Education, Royal District Nursing Service; Board Member Resthaven Inc; and Deputy Chair of the Overseas Qualifications Board.

**Mr Ian Yates AM – BA (Flin), MAICD**  
(appointed until 25 June 2012)

Mr Yates is currently the Chief Executive of COTA Australia, the national body of the Councils on the Ageing (COTA). He is also Chief Executive of COTA SA. Since 1989 Mr Yates has had involvement in various health related committees in SA including the Home and Community Care Program Ministerial Advisory Committee; Northern Venture Coordinated Care Trials; Health of Older Persons Policy advisory committee; Deputy Chair of the Repatriation General Hospital; Board Member of the Southern Adelaide Health Service; Board Member, Deputy Chair and then Chair of the Cancer Council of SA and Deputy Chair of the SA Council of Social Service. He is also Deputy Chancellor and Resources Committee Chair of Flinders University. At the national level Mr Yates serves on a number of advisory bodies to the Department of Health and Ageing; is a member of the consumer advisory bodies to both the Australian Securities and Investment Commission and the Australian Competition and Consumer Commission. From 1 July 2011 he has become a Director of the Commonwealth Government's Aged Care Standards and Accreditation Agency.

## **Deputy Members**

**Mr James Dellit - BA Dip Ed**  
(deputy to Mr Steeples – appointed until 25 June 2012)

Jim Dellit has a long career as an educator and is currently director of an international educational consulting company; [www.jdellit.com.au](http://www.jdellit.com.au). He was formerly an Executive Director in the SA Department of Education and more recently an Adjunct at the University of SA. He has a lifelong engagement in education and has published articles and reports, and presented papers at national and international conferences on curriculum issues, particularly focussing on inclusion. His current work focuses on ICT, educational standards, intercultural education and evaluations.

Jim suffers from renal failure and has been treated with dialysis and renal transplantation. His experiences have encouraged him to undertake voluntary health policy and advocacy work nationally and internationally. He is a member of the international medical research Cochrane Collaboration and has been a Board Member of the Renal Cochrane Collaboration, and undertaken research and reviewing tasks for it. Jim has participated in the development of renal treatment guidelines joining the CARI (Caring for Australians with Renal Impairment) Guidelines Steering Committee in 2001. He was the consumer representative on the national Renal Transplant Advisory Committee between 2003-2011 and was a consultation consumer for the recently developed National Transplant Guidelines.

**Mr Geoffrey Harris - BAgSc, PostGradDip (Public Policy)**  
(deputy to Dr Beckoff - appointed until 25 June 2012)

Geoff Harris is currently the Executive Director of the Mental Health Coalition of SA (MHCSA). The MHCSA is the peak body for mental health in SA and aims to improve services for people with mental illness, particularly better supports to enable people to live well in the community. Mr Harris has wide experience having worked in mental health, health and Aboriginal-controlled non-government organisations in both SA and the NT. He has also served on many Boards including as President of the NT Council of Social Services, Board Member of ACOSS, elected Alderman on the Alice Springs Town Council and as a Director of two community-owned enterprises. He has formally studied public policy and economics and at the Menzies School of Health Research and produced the book 'Environmental Health Handbook - a practical manual for remote communities in central Australia'.

**Mr Christopher Overland – BA**  
(deputy to Mr Yates - appointed until 25 June 2012)

Chris Overland has had a varied career, starting in 1969 when he became a Patrol Officer in Papua New Guinea. He returned to Australia in 1974 and took up a position in the SA Education Department. In 1979 he joined the SA Health Commission where he served in several senior roles including as Chief Project Officer in the Public and Environmental Health Division and Manager, Executive Services, in the Chairman's Office. In 1989 he was appointed as Chief Executive of the Mount Gambier Hospital and was subsequently appointed as Regional General Manager, South East Region. In 2001 he was appointed as Director of the Office for the Ageing where he gained further knowledge and experience in the health, ageing, community care and aged care industries. In 2004, Chris was appointed as Chief Executive of the Repatriation General Hospital. He retired in April 2006 to pursue personal interests and is currently President of COTA Seniors Voice Inc.

**Dr Michael Rice AM - ED, MBBS, FRACP**  
(deputy to Dr Sandercock - appointed until 25 June 2012)

Michael Rice is currently a consultant paediatrician in both private and public hospital practice and has a particular interest in the care of children with cancer. He has had a long association with the Royal Australasian College of Physicians, as a national examiner and Council member, and also with the Australian Medical Association as a Federal Councillor and as a former President of the AMA (SA). Michael was the inaugural chairman of the SA Clinical Senate from 2003 to 2007. In recent years he has been involved in child advocacy at both state and national levels.

**Dr Tahereh Ziaian - MEdPsych, PhD (Health Psych), MAPS**  
(deputy to Ms Bishop - appointed until 25 June 2012)

Dr Tahereh Ziaian is a senior lecturer and course coordinator in the School of Nursing and Midwifery of the University of South Australia. She is a community health psychologist with a long and extensive engagement in trans cultural psychology and public health. Her research and consultancy activities at the state, national and international level have made a substantial contribution to the public discourse on migrant and refugee mental health. Dr Ziaian has been selected for the University of South Australia's Research Leadership Program to provide new leadership for the institution and the wider state and national research effort. She is currently a member of the Samson Health Research Institute and the lead investigator of a large scale research project investigating the prevalence and nature of mental health problems affecting newly arrived refugee children and adolescents. She is also involved in a Trans-Tasman research project to develop an innovative model of service development for refugee youth with mental health problems. She is currently a member of the editorial board of the Australian Community Psychologist and the Journal of Muslim Mental Health. She has been the recipient of a British Commonwealth Award for Excellence in Women's Health for the 'Non-English Speaking Background Women and Violence Project' in June 1997, and the 'Equal Opportunity Achievement Award, Individual Category' in 1996.

## Executive Support

Pursuant to Part 3, section 14 of the Act, the Minister for Health is obliged to provide the HPC with the staff and resources that it reasonably needs to carry out its functions.

In accordance with the Act, the HPC Secretariat provides administrative and project support to the Council. The Secretariat comprises: a Director; a Senior Project Officer; and an Administrative Officer.

The HPC with the Minister's approval, may make use of other public sector staff, services or facilities in undertaking its role.

## Health Performance Council's Operations

### Bi Monthly Meetings

Regular bi-monthly council meetings were held during 2010-11 as indicated in Table 2.

Table 3 HPC Members and Deputies meeting attendances in 2010-11

	19-Aug-10	21-Oct-10	09-Dec-10	17-Mar-11	09-Jun-11	Total
Ms Anne Dunn AM	•	•	•	•	•	5/5
Dr Michael Beckoff	•	•	•	•	•	5/5
Professor Justin Beilby	•	•	•			3/5
Ms Rachel Bishop	•	•	•	•	•	5/5
Ms Barbara Hartwig	•	•	•	•	•	5/5
Professor Michael Kidd AM	•	•	•			3/5
Mr Laurence Lewis AM	•	•	•	•	•	5/5
Professor Robyn McDermott			•		•	2/5
Honourable Carolyn Pickles	•	•	•	•	•	5/5
Dr Melissa Sandercock	•	•	•	•	•	5/5
Mr John Singer		•	•			2/5
Mr Thomas Steeples	•	•	•	•	•	5/5
Dr Thomas Stubbs	•	•	•	•	•	5/5
Dr Diane Wickett	•	•	•	•	•	5/5
Mr Ian Yates AM		•	•	•	•	4/5
Mr James Dellit <sup>‡</sup>	•	•	•	N/R	N/R	3/3
Mr Geoffrey Harris <sup>‡</sup>	•	•		N/R	N/R	2/3
Mr Christopher Overland <sup>‡</sup>	•	•		N/R	N/R	2/3
Dr Michael Rice AM <sup>‡</sup>	•	•	•	N/R	N/R	3/3
Dr Tahereh Ziaian <sup>‡</sup>	•	•	•	N/R	N/R	3/3
Table Key	<div>• Attended this meeting</div> <div>Apology</div> <div><sup>‡</sup> Deputy to a member</div> <div>N/R Deputy not required to attend meeting</div>					

Under Schedule 1, section 6 of the Act, the HPC may establish committees or sub committees to advise or assist it carry out its functions.

## Freedom of Information Statement

The *Freedom of Information Act 1991* gives members of the public a legally enforceable right to access information held by the South Australian Government, subject to certain restrictions.

### Functions of the HPC affecting the public

The HPC is a Ministerial advisory body established on 1 July 2008 under Part 3, section 9 of the Health Care Act 2008 (the Act).

The 15 members (including chairperson) and five deputies were appointed by the Governor of South Australia for a four year term. They were chosen for their collective capacity, qualifications, experience and expertise. Prescribed bodies were consulted in the appointment process for the HPC members.

The broad spectrum of member expertise gives the HPC capacity to provide independent, high level advice to the Minister for Health on the performance of the South Australian health system in achieving the objects of the Act.

The HPC's key function is to conduct four yearly performance reviews of the SA health system against the objects of the Act and submit a report to the Minister for Health on:

- The operation of the various health systems established within the State
- Significant trends in the health status of South Australians including trends in health outcomes and, as appropriate, for particular population groups
- The effectiveness of methods used within the health system to engage communities and individuals in improving their health outcomes
- Any other significant issues considered relevant by the HPC

The HPC submitted its first report in December 2010. Furthermore the HPC is required to provide the Minister for Health with an annual report on its operations and key strategic directions during the proceeding financial year.

In addition to the on-going annual and four-yearly reports, the HPC is required to provide the Minister for Health with a report on the operations of the HACs in country areas of South Australia by 31 Dec 2011.

In accordance with the Act, HPC is specifically required to report on:

- Effectiveness of HACs in promoting the interests of local communities
- Satisfaction levels with HAC governance arrangements from the perspective of the members of HACs, the local community and the hospital
- Any significant issues relating to the operations of HACs considered relevant by HPC

The internet site at <http://www.hpcsa.com.au> provides an overview of the HPC roles and functions.

### Public participation

The HPC in the performance of its functions obtains, to such extent as is reasonable and relevant in the circumstances, the views of –

- Members and deputies
- Health Advisory Councils
- Advisory committees established by the Minister for Health

## **Types of documents held**

The internet site <http://www.hpcsa.com.au> contains information about the HPC's vision, mission, values, members, deputies, secretariat staff, and terms of reference.

The HPC's Annual Reports are available on the HPC's internet.

The HPC will provide four yearly reports on the overall performance of the health system, identifying significant trends, health outcomes and future priorities for South Australia's health system. The first of these four year reports, *Reflecting on Results – Review of the Public Health System's Performance for 2008-2010* was submitted to the Minister for Health in December 2010. This report is available on the HPC's internet site.

The HPC is currently working on its second four year report which will be submitted to the Minister for Health by 31 December 2014.

## **Arrangements and procedures for seeking access to records and policies**

Applications for access to information under the Freedom of Information Act 1991 including purchase costs or amendment of the HPC's records should be addressed to:

The Principal Officer – FOI  
Health Performance Council

PO Box 3246  
Rundle Mall SA 5000  
Telephone: (08) 8226 3188  
Facsimile: (08) 8226 5220  
<http://www.hpcsa.com.au>



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