



HEALTH CONSUMERS'
COUNCIL
YOUR VOICE ON HEALTH

Annual Report

2017 - 2018



Join the Conversation
Create a
SHARED VISION

PATIENT EXPERIENCE IS THE HUMAN EXPERIENCE

Introduction

The Health Consumers Council (HCC) is an independent, not for profit organisation passionate about ensuring the consumer is at the heart of our state's health care system. We do this through our individual advocacy service, our engagement program and through our systemic advocacy initiatives.

Vision

- Equitable, person-centred healthcare for all West Australians.

Purpose

- To increase the capacity of all people to influence the future direction of health care and to make informed choices.

Values

Respect: valuing diversity and actively seeking everyone's contribution

Empathy: considering other peoples' world views, experiences and emotions

Equity: advocating for the whole community

Collaboration: working together to achieve positive outcomes

Integrity: aligning our actions with our values

Accountability: taking responsibility for our actions, measuring our effectiveness

Innovation: creating new ways to achieve effective outcomes

Knowledge: applying the latest learning to our practice and procedures

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Strategic Plan Update

Updated outcomes

Each year HCC spends time reviewing the Strategic Plan to ensure we are still on track. This year we spent some time confirming that we had the right language to articulate the outcomes we are hoping to achieve as part of our work.

Key Achievements in 2017-18

Support individuals through advocacy and health literacy

1.1 Increased consumer health knowledge and literacy through our advocacy service, website and other resources.

1.2 Connected advocacy sector to support high quality, consumer-centred and integrated individual advocacy support.

1.3 The voice of Aboriginal health consumers is central to service planning, delivery and review.

Key Achievements:

- Maintain an effective advocacy service – 629 advocacy cases
- Advocacy procedures manual completed
- Patient First Materials done in partnership with WA Health, on HCC's web page

Drive effective consumer, community, clinician and stakeholder engagement

2.1 Consumers are valued as equal and active participants in health service reform.

2.2 Health providers are supported to effectively engage with consumers.

Key Achievements:

- Hosting of Patient Experience Week Gathering of Kindness
- Undertaking community engagement activities to support the Sustainable Health Review

Identify and communicate health trends to key stakeholders

3.1 Community and consumer directed research undertaken in partnership with the WA Health Translation Network has resulted in positive, practical changes for WA health consumers.

3.2 Communications strategy enhances community understanding of the role of HCC and engagement with surveys, services.

Key Achievements:

- National Strategic Approach to Maternity Services consultation through Facebook groups
- Presentation at Stillbirth Senate Inquiry

Maintain an effective and innovative organisation

4.1 HCC's well-supported team can effectively support WA health consumers.

4.2 Diverse streams of income to enhance HCC's sustainability and independence.

4.3 Demonstrable evidence of continuously improving HCC Board effectiveness.

Key Achievements:

- Upgrade of HCC's computer systems
- Launch of new website
- Core funding maintained to December 2020



Chair Report

Five Years at a Glance

Reflection and Engagement

At the conclusion of every Management Committee (Board) meeting, we reflect on the meeting with regards to our HCC values. It gives us the opportunity to focus on “how” we are doing our work and not just on the “what” we are doing. It helps us to “live” the values.

This Annual Report is always a reflection of the previous year and how the HCC is contributing to, and achieving, outcomes that benefit our community. But it is also an indication of the journey... where we are going, what we experience along our way, and where to focus on continuous improvement.

I recently conducted an induction for our newest Management Committee member and in my presentation, there is information related to our Strategy and Five Year Plan:



I also reflected on the previous Annual Report. What in-roads have we made in achieving our Five Year Plan and are we poised for the future?

In 2015, the focus was on re-building the organisation’s foundation both in-house as well as in the community. Structure and engagement were critical success factors in order to achieve this. HCC staff and the Management Committee have been diligent in establishing good governance policies and processes and regular reviews and performance evaluations continue to ensure our foundation remains strong.

Our services and engagement with health providers paved the way towards the HCC now being known for bringing innovative patient-centred engagement

to Australia through our Patient Experience Week strategies and activities.

As we look towards the future, HCC is undertaking a project to define our core competencies and value and how we can leverage these to create new opportunities, particularly those that attract additional funding to the organisation. New Opportunities is about growth that allows for continuous improvement in realising our Vision: Equitable, person-centred healthcare for all West Australians.

A World of Thanks

Thank you to Pip Brennan, our Executive Director and our HCC staff for your contributions this year – your dedication and commitment to furthering the interests of health consumers is recognised and appreciated by our community.

A special thank you goes to all the volunteers who give us their precious time. Whether directly at the HCC, or through consumer representation, you all make a valuable contribution and we are grateful for your service.

With mixed feelings, the Management Committee was sorry to say good-bye to Claire Langdon who moved to Melbourne for an exciting new career opportunity. We also farewelled Kylie Fryer who had been an active Management Committee member for a few years. Kylie’s expertise in the growing area of Mental Health advocacy will be sorely missed, but we all wish her well in her future endeavours and know that she remains dedicated to the vision and purpose of HCC.

Chair Report continued..

At the AGM we will be farewelling Lee Griffiths, who has moved interstate, and Laura Colvin who has taken up a new job opportunity. In their year with us they have helped us move forward with our governance, marketing and membership offerings. This year also sees the end of six years of service for Tom Benson and Tony Addiscott on our Board, and therefore as per our Rules, they will be stepping down this AGM. We thank all of our outgoing Management Committee members for their contributions during the course of their tenures.

Finally, I'd like to acknowledge the volunteer members of the Management Committee and their input to the Committee and participation in sub-committees. Your time and commitment to supporting health consumers makes a difference.

Management Meetings held & meetings attended				
Name	Position	Dates Acted	Meetings Eligible to attend	Meetings Attended
Cheryl HOLLAND	Chairperson	Whole Year	10	10
Richard BRIGHTWELL	Deputy Chair	April 2018 - present	2	2
Marlon FERNANDO	Treasurer	Whole Year	7	3
Tom BENSON	Secretary	Whole Year	10	7
Tony ADDICCOTT	Member	Whole Year	10	8
Nigel D'CRUZ	Member	September 2017 - present	8	7
Claire LANGDON	Member	November 2017 - March 2018	3	3
Lee GRIFFITHS	Member	Whole Year	7	5
Laura COLVIN	Member	Whole Year	7	5
Kylie FRYER	Deputy Chair	November 2017 - April 2018	10	5
Hayley HARRISON	Member	July 2017-October 2017	3	3
John BURTON	Member	July 2017-October 2017	3	3
Board Members Reimbursement for parking expenses			\$416.63	
Board Member Renumeration for acting ED			\$5,353.85	



Executive Director Report

It's that time again, when a reflection of the previous financial year's activities highlights just how much can be achieved with a small band of highly dedicated people. This year has been dominated by the Sustainable Health Review which among many other things has provided a wonderful opportunity to engage with our state through the Community Resource Centre network.

Every year we review where we are at against our Strategic Plan, which is fast coming towards its 2020 limit. This year we chose to refresh and renew our Vision and Purpose.

Vision: Equitable, person-centred healthcare for all West Australians.

Western Australia is the only state whose Health Consumers' Council equivalent offers an independent advocacy service to support people as they access the health system. This flexible, practical support is what helps make our health system more equitable and person-centred. Anyone who visits our office will appreciate just how hard the Advocacy Team work to provide this service, and there are times where we know we have made all the difference to an individual's life. While we can't always get the result that people want, they appreciate being listened to. HCC's Advocacy Team is very well-supported by our Receptionists who refer many more calls to the correct agency or point the person in the right direction.

"If we put fairness at the heart of decision making policies, health would improve and health inequalities would diminish."

Michael Marmot.

Purpose: To increase the capacity of all people to influence the future direction of health care...

Our Engagement Program's Cultural Diversity and Aboriginal Engagement activities ensure that health equity is always on the radar. Every time we run an Introductory or Advanced Consumer Representative workshop we meet more consumers and carers who are moving up to take on leadership roles.

We are passionate about the partnership between consumers and health services to influence our health system. Undertaking the Change Agents training and partnering on the Patient Experience Week events allows us to connect with those who are aligned with this goal. Creating actual change for consumers is always the forefront of our minds.

As we have a seat at the table on a number of key reforms, we are determined to make that seat count, and bring in the voices of Western Australians through online and other engagement mechanisms. The breadth of what we have achieved with so few people is an absolute credit to those who have worked with us in this last financial year.

...and to make informed choices.

Informed choices are supported through literacy tools such as the Patient First and Going Home from Hospital projects that we worked on this year. Our Advocates support informed choice and we note that many of the advocacy cases have at their core a sense of lack of truly informed choice. No-one is more impacted than the consumer when things go wrong, and therefore informed choice needs to be enshrined in our health system. This will be one of our key areas of focus for 2018-19.

"The committee recommends that the Australian Commission on Safety and Quality in Health Care prepare guidance material on effective informed consent processes"

Recommendation 6, Senate Inquiry into Pelvic Mesh

Advocacy

HCC is unique in Australia in that we have an individual advocacy service, and we are very proud of the work that we do through this program, and the changes we can make for some of the people that contact us.

While we can never hope to meet the actual demand with the resources we currently have, we do what we can to support people with their issue, and empower them to find their own way through the system.

We have also referred consumers to the Patient Opinion platform as a way to achieve their goals of providing feedback and creating a safety healthcare system.

We have included stories of change as well as comments from the surveys we have undertaken with consumers who have used our advocacy service.

HCC runs free Legal Nights on the first Wednesday of every month. In 2017-18, our Legal Clinic helped 26 consumers understand their legal options.

"I've been working with a member of your advocacy team. Chrissy Ryan, she is fantastic at what she does and is an asset to any organisation"

A consumer telephoned to say thank you to advocate Kerrie. Her message was "Thank you, thank you, thank you, a million thank you's for helping me and for all the work you've done for me."

Timothy's Story

Timothy was diagnosed with a complex mental health condition in his late teens, which needed specific care from specialized doctors. A change of circumstances led him to seek medical treatment in the public system and an expert Doctor that could help him, but this was challenging. As a result, Tim felt he was being undertreated.

Timothy turned to Health Consumers' Council for support. Kerrie, one of the advocates at the organisation, attended medical appointments with Timothy. She was able to negotiate with the medical staff for more appropriate treatment on Timothy's behalf.

"I felt like I was being given the runaround by the public health system. I needed someone to come into appointments with me who could back me up if needed. I knew she couldn't influence the decision of the doctors, but she made recommendations based on my needs. It made me feel supported."

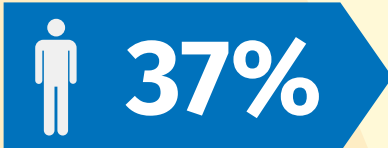
The service that was initially treating Timothy said that they did not have the expertise to manage his condition. They referred him to a private doctor who would have had large, and unaffordable out-of-pocket expenses for Timothy. Fortunately, Kerrie managed to source another private doctor to treat Timothy who agreed to bulk-bill him and provide the care he needed.

"It was amazing relief. I'm very grateful, Kerrie did quite a lot of work for me and she was top notch. The organisation obviously works as it helped me achieve the outcome I needed. A big thank you to Kerrie and the Health Consumers' Council."

Timothy now receives the care he requires and is doing well.

Advocacy

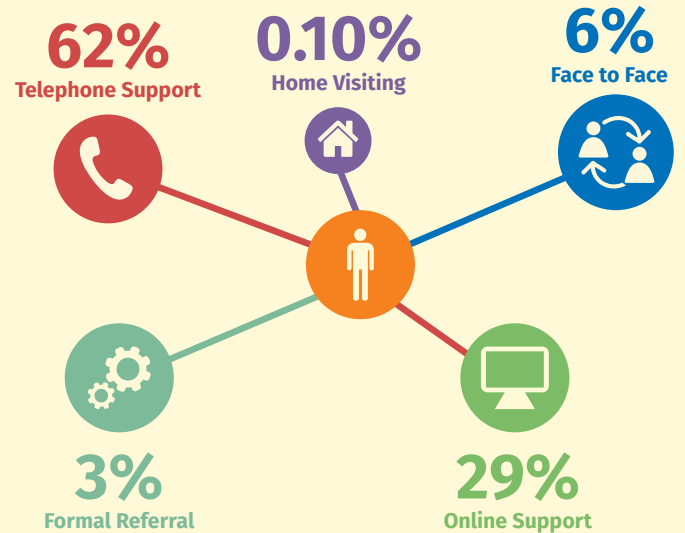
Outputs



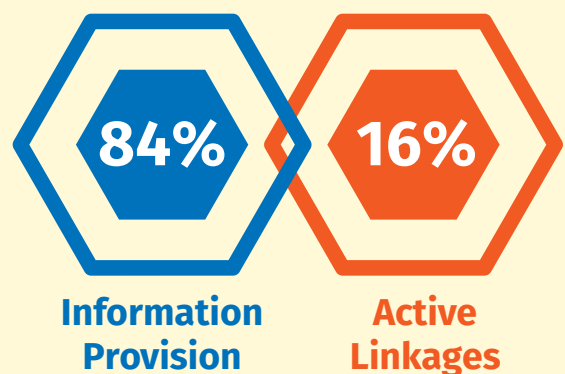
Advocacy Case by Gender		
GENDER	TOTAL	%
Female	393	63%
Male	234	37%
Unknown	2	0%
TOTAL	629	100%



Advocacy Case by Ethnicity		
ETHNICITY	TOTAL	%
Aboriginal/Torres Straight Islander	31	5%
Culturally and Linguistically Diverse	59	9%
Other	358	57%
Unknown	181	29%
TOTAL	629	100%



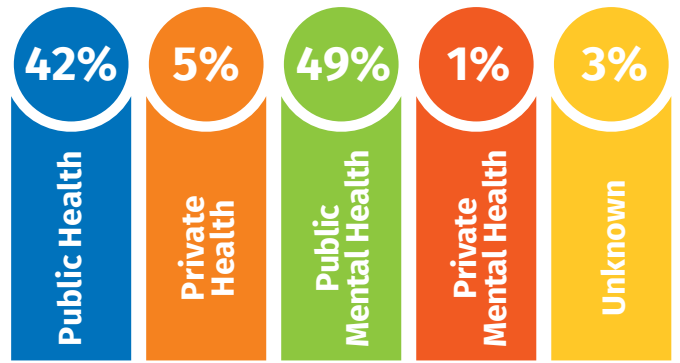
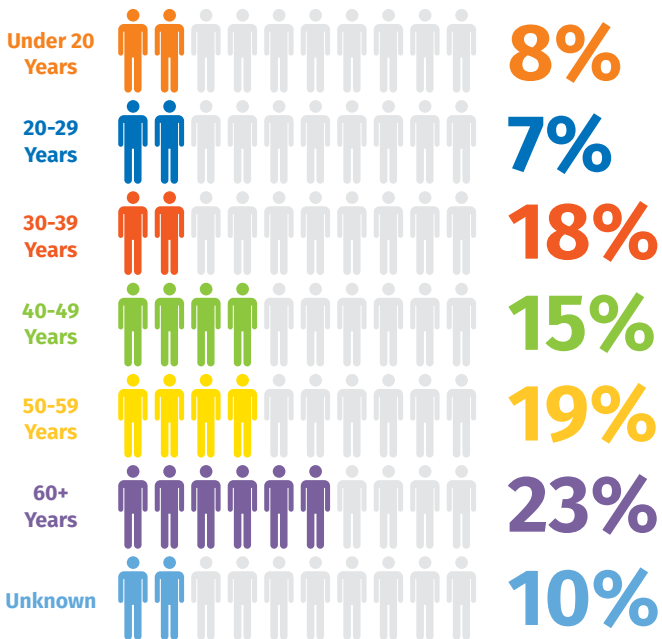
How Many Times We Supported Advocacy Clients		
TYPE OF SUPPORT	TOTAL	%
Telephone Support	2316	62%
Home Visiting	5	0.10%
Online Support – including email	1106	29%
Face to Face	226	6%
Formal Referral/Active Linkages	100	3%
TOTAL	629	100%



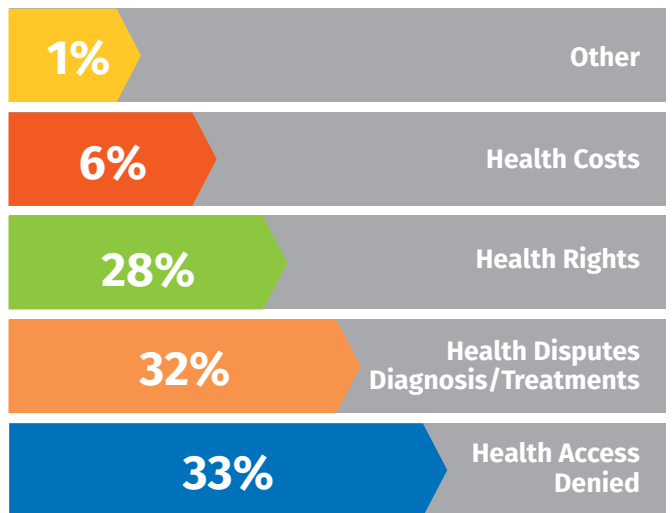
Type of Information and Linkages	TOTAL	%
Information provision	725	84%
Active linkages for non-users of the service	136	16%
TOTAL	861	100%

Advocacy

Outputs



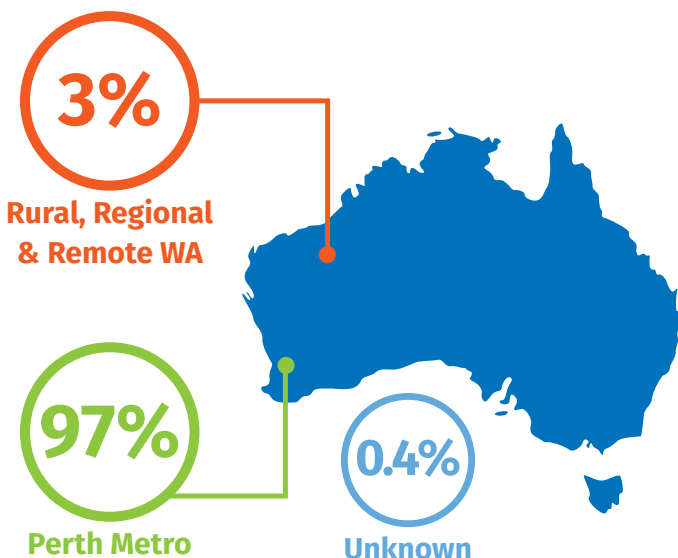
Advocacy Case by Health Setting'		
TYPE	TOTAL	%
Public Health	230	42%
Private Health	24	5%
Public Mental Health	259	49%
Private Mental Health	5	1%
Unknown	11	3%
TOTAL	629	100%



Advocacy Case by Type		
TYPE	TOTAL	%
Health Costs	37	6
Health Rights	177	28
Health Disputes Diagnosis/Treatments	199	32
Health Access Denied	207	33
Other	9	1
TOTAL	629	100

Geographical Location		
TYPE	TOTAL	%
Perth Metropolitan Area	607	97%
Rural, Regional and Remote Western Australia	19	3%
Unknown	3	0.4%
TOTAL	629	100%

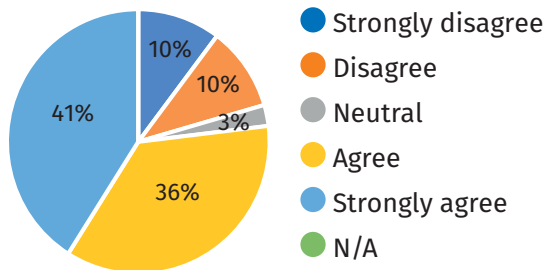
Advocacy Case by Age		
AGE	TOTAL	%
Under 20 years	54	8%
20-29 years	43	7%
30-39 years	113	18%
40-49 years	97	15%
50-59 years	118	19%
60+	139	23%
unknown	65	10%
TOTAL	629	100%



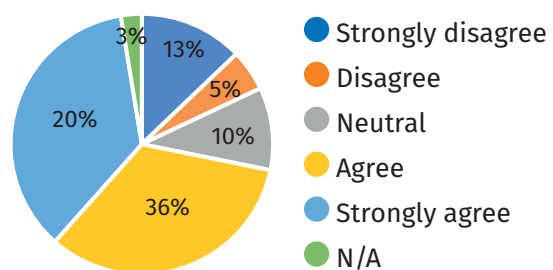
Advocacy

Outcomes

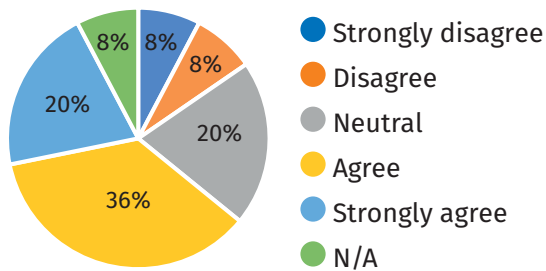
The HCC Advocacy Service was able to assist you with issues you were concerned about.



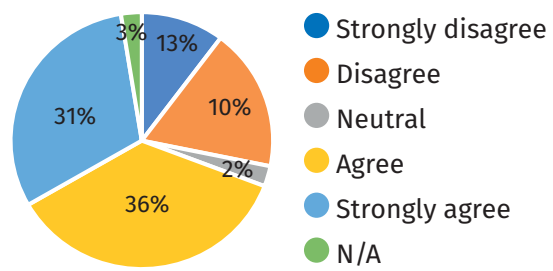
The advocate was able to give you useful information about your rights as a health consumer.



The advocate provided you with information around the different agencies that can help you.



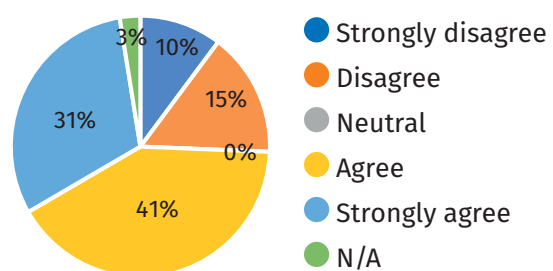
Advocacy assistance was helpful in improving your access to health services.



Advocacy

Consumer would like it recognised that Chrissy Ryan is fantastic at what she does and is an asset to any organisation

The advocate was successful in communicating your point of view to health professionals.





Advocacy story of change

'I've Got My Own Mind': Barrie's Story

In 2017, Barrie was incorrectly diagnosed with dementia and placed in an aged-care facility against his will for almost a year. With the help of an HCC advocate, Barrie eventually returned home to his ex-wife and friend, Pam.

Barrie thought he would be in the aged-care facility for a short time while Pam recovered from illness however but to his shock, he was diagnosed with dementia by the facility's doctor and told he'd remain in care for the rest of his life. He was appointed a guardian and trustee manager who became Barrie's legal decision maker. Barrie recalls living in the facility and says he had no independence, was forced to take dementia medication, and denied access to his bank accounts.

Barrie: "I was told I'd get pocket money, up to \$50 a fortnight, and I got nothing, not a skerrick of it. Pam used to slip me \$10 or \$20, I'd have been lost without it. I felt like a prisoner, locked up at night. I hated being treated like that."

Pam contacted HCC, and advocate Chrissy Ryan helped Barrie lodge an appeal to the State Administrative Tribunal. Barrie lost the appeal due to unfavourable testimony from his doctor and state guardian.

Barrie: "The lady that ran the meeting signed up with the guardian, and she was only interested in what my guardian was saying. We were shut up by her pretty

well. The doctor wrote a letter in support against me, he reckoned I had dementia. That didn't carry much weight for me."

Barrie was keen to dispute the ruling, and his advocate helped him and Pam organise a second appeal, helping them write letters, organise transport and parking, seek out people willing to offer statements of support, and helped arrange a second opinion with a Geriatrician to support the case.

Barrie: "I went to an intelligence doctor at Fremantle Hospital. He said, 'You have not got dementia Barrie, you have not got any symptoms of it.' He wrote a letter and got the judge to read it out, so that anyone [who] was there knew I didn't have it, and I was getting treated for it."

The judge come back, big smile of his face, he looked straight at me and said 'Well Barrie, you've got your own freedom, we've got enough information, and we've come down with a verdict, that you're a free man.' It took a great weight off my shoulders when he announced that."

After winning his second appeal, Barrie returned home to Pam, and had his diagnosis reversed. He freely manages his own health and finances, is no longer being medicated for dementia, and is thoroughly enjoying life back with Pam.

Barrie: "We go down to the shops and have a lunch or a cup of tea. We've been to the casino, we've both had a win there and a loss! We even had Christmas lunch at Rendezvous. It's a very nice place to go to, it wasn't cheap, but that's Christmas!"

Barrie and Pam are very grateful for the hard work put in by their advocate to help them with Barrie's problems.

Pam: "Chrissy has been absolutely fantastic. She has written letters, she has detailed every last little bit on the letter, and she's just so professional with her job. I hope that in time you never, never part with her!"

Despite his negative experience, Barrie has kept his faith in the healthcare system, and has found a new doctor who and supports his life with Pam.

Barrie: "My doctor's a lovely woman. She congratulated me on winning the case, she didn't think I'd have a hope in hell! One day she said to me, 'I know where I'd like to send you, but you wouldn't go. I'd like to put you in a home where you'd be looked after.' But no thank you, I wouldn't get looked after there. I've got my own mind!"

Engagement

Training

In 2017-18 we added into our core Introductory and Advanced Consumer Representative workshops a new offering – School for Change Agents. This is an online offering from NHS Edge. We partnered with WA Country Health Service to watch the five one-hour episodes and debrief them after using Telehealth technology. The program runs each February and links people with an international community all focused on the same ideal of a person-centred, compassionate health system.

The School 4 Change Agents sessions are like a shot of adrenaline for anyone grappling with influencing change in a complex health system. High quality content, delivered in an engaging way, will leave you energised and inspired! Thanks to HCC for facilitating the space.

We also ran our first Standard Two Workshop at Sir Charles Gairdner Hospital with a group of dedicated nurses and allied health professionals on International Nurses Day.

What will you do differently after this Standard Two Workshop?

- Read CAC info
- Definitely use Patient Opinion
- Will try Patient Opinion
- Get out there and ask consumers frequently
- Pursue development of educators joint with other professions
- Get patient involved in developing patient education
- Be inclined to “jump in” then be restrained with new initiative. As said, can always say, “sorry oops”
- Read more relating to consumers and healthcare
- Talk to patients more
- Lots to think about to engage in discussions of how to include consumers
- Go back and consider health literacy again
- Engage people early in process
- Maintain awareness of Patient Opinion
- Send ‘patient information’ information to patients for feedback
- Nothing - continue in the current activities as I feel I already am exploring and value our patient needs/values/wishes

Aboriginal Engagement

This year we have continued to have representation on a number of key committees, including the Integrated Team Care and Aboriginal Patient Journey forums, Perth Children’s Hospital and the Australian Digital Health Agency’s children’s digital health policy. We have also worked with one of Perth’s hospitals to convene a facilitated conversation between the community and its hospital.

Important links with the Langford Aboriginal Association have been strengthened to ensure we can reach into this vibrant community and learn from them.



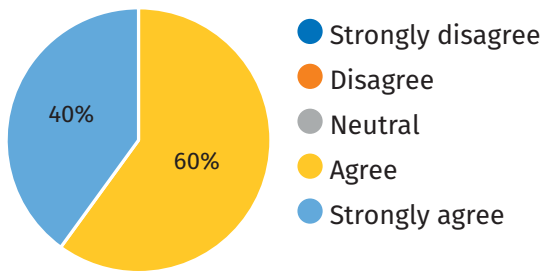
Photo courtesy of Langford Aboriginal Association

Engagement

Outcomes

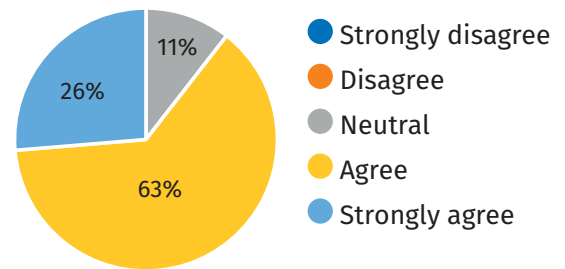
Consumer Representation - Advanced Skills

After attending this workshop I will be better able to engage and work effectively in my role



Standard 2 Masterclass

This workshop has increased my understanding of the new Standard Two



“This workshop has increased my confidence level in being effective as a Consumer Rep and having a very valid voice in healthcare”

Introduction to Consumer Representation

This workshop has provided me opportunities to think, learn and improve my knowledge

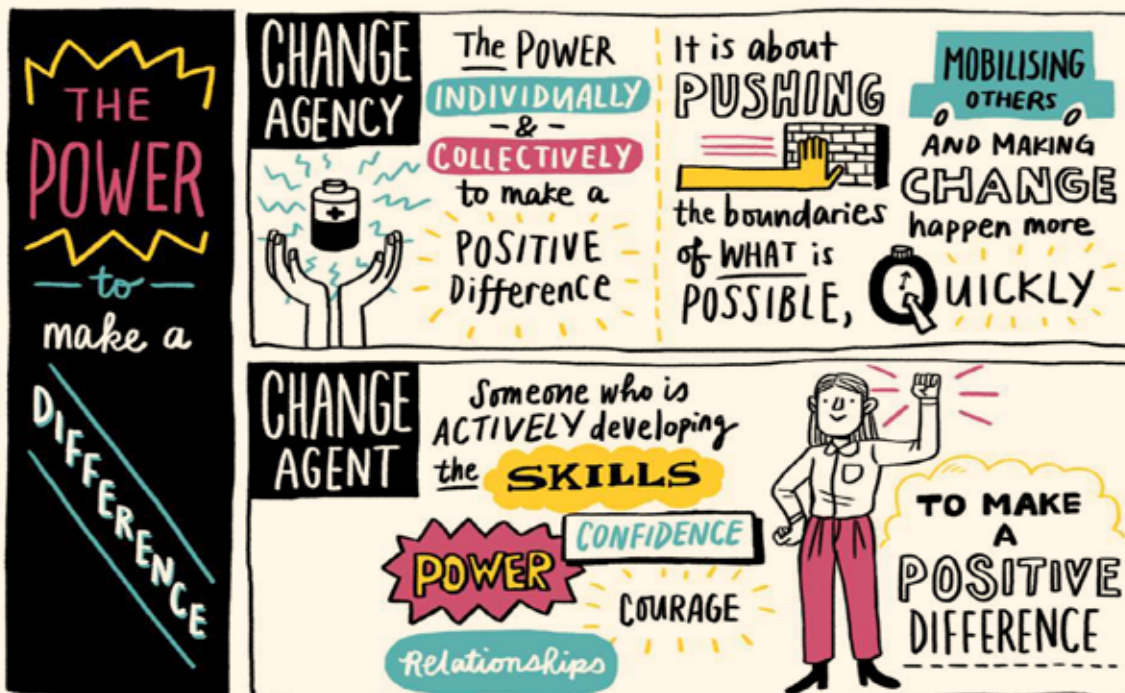
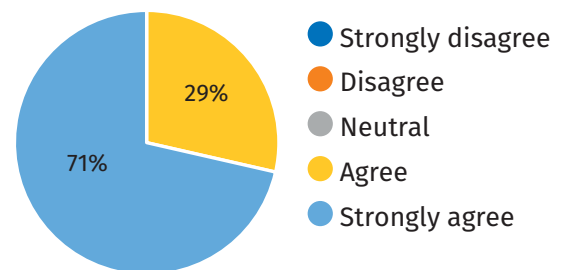
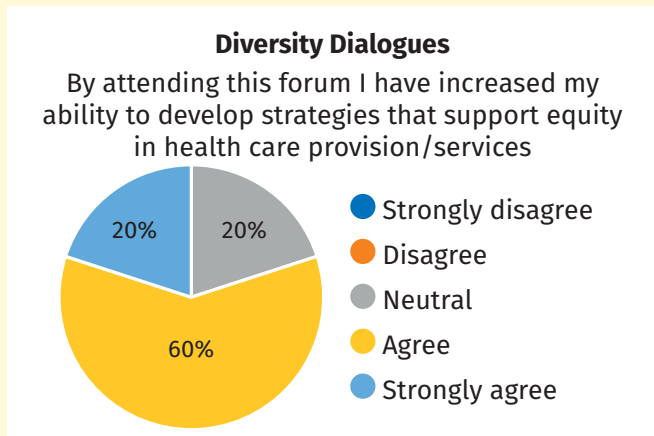


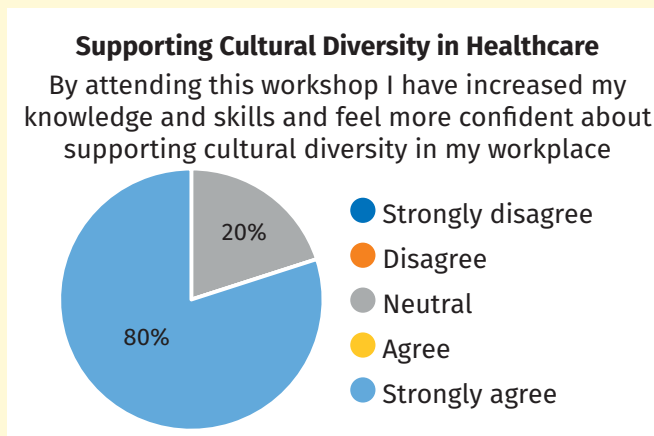
Image courtesy of School for Change Agents, NHS Edge

Engagement

Diversity Dialogues		
By attending this forum I have increased my ability to develop strategies that support equity in health care provision/services		
Response	Number of responses	Percentage of total responses
Strongly disagree		
Disagree		
Neutral	4	20%
Agree	12	60%
Strongly agree	4	20%
TOTAL RESPONDENTS	20	100%



Supporting Cultural Diversity in Healthcare		
By attending this workshop I have increased my knowledge and skills and feel more confident about supporting cultural diversity in my workplace		
Response	Number of responses	Percentage of total responses
Strongly Disagree		
Disagree		
Neutral	1	20%
Agree		
Strongly Agree	4	80%
TOTAL RESPONDENTS	5	100%



Going to hospital booklet

“Thank you for your email and a PDF of your booklet. I am on the committee at Royal Brisbane and Women’s Hospital who is looking at the development of patient booklet. I just wanted to have a look how you approached this difficult task. A brief perusal of your document is very pleasing. You have covered important issues in a way that people will understand. I shall keep you informed and if we develop our booklet (whenever this may be) I shall send it to you. Once again many thanks”

Engagement

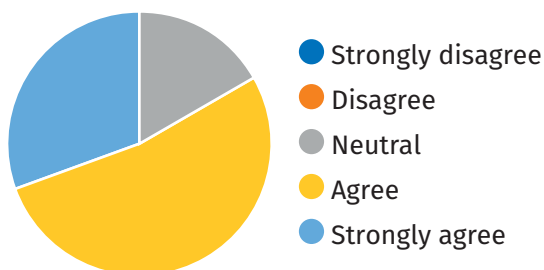
Diversity Dialogues

Two Diversity Dialogues were held, one on Advanced Care Planning and one on use of Interpreters.

Which part of the Diversity Dialogue session did you most enjoy? Why?

- The general conversation - appreciated the willingness to share & build on suggestions
- the clarity of the panel members presentations - especially the emphasis on community education and adjusting Western language models
- Hearing from the panel, their perspectives and their lived experience from cultural perspectives.

After this information session I will feel more confident about asking for an interpreter



Let's Talk Culture

We finalised the contract with the Mental Health Commission by holding two Let's Talk Culture seminars in 2016-17, tackling homelessness and alcohol and other drug use in Culturally and Linguistically Diverse communities.

After attending this Let's Talk Culture forum what will you do differently in your work?

- Reconsider our parent education talk for CaLD families
- Focus on cultural sensitivity and put into practice the knowledge gained
- Be culturally sensitive when engaging potential clients
- Greater understanding, thank you
- Access Organisation of African Communities for help/advice
- Consultation is important
- Look at things from their point of view and where they come from
- Nothing
- Confidentiality and translator services. Very tricky to facilitate a good/confidential interpreter service
- Know a bit more
- Continue to inform and educate myself about best practice

Health Rights presentations and resources

We also reached many English Language students through health rights presentations graded to match student's language acquisition, and the immediate outcomes of the sessions showed positive signs of improved confidence to access services.

We worked on a Going to Hospital booklet as an offshoot of the Patient First project, and this has been translated into the less common languages of people from emerging communities.

"I wanted to say what a marvellous job Louise Ford (Cultural Diversity Manager) did in presenting hospital related information to our students, 115 of whom were present on the day. Judging from the level of engagement, students enjoyed receiving information as much as you enjoyed imparting. Thank you again for a job well done!"

Engagement Projects

Last financial year we were lucky enough to work with the WA Primary Health Alliance on a number of projects.

Informing Models of Primary Care

This is a summary of the feedback from consumers about the features of primary care they would like to see. The full report can be found on our website under the Projects tab.

FEATURE	DEFINITION
Holistic	Care that centers around the patient - may be at the expense of the business (financial model). The holistic approach takes an investment of time and a practice philosophy that's aligned.
Good systems	Having appropriate, robust systems to manage patients (including recall) and record activity. Making sure systems are used well - need to provide adequate training and support for staff.
Role clarity for team – including patient	All individuals being clear on their role, the roles of other team members and understanding how their bit adds to the whole. This also involves patient being clear around their responsibility.
Co-ordinator role	An individual that takes overall responsibility for co-ordination and relevant administrative tasks - working closely with other staff and patients.
Patient empowerment and responsibility	Patients need to take responsibility and understand their role in self-management and working with GP to achieve positive outcomes.
Valuing patients with chronic conditions	This related to putting more priority to patients with chronic disease – and providing more transparency on what this costs the system.
Continuity of care	Patients need continuity in terms of practice and GP. Patients need to access the same practice and preferably the same GP.

Alcohol and Other Drugs Advisory Group



WAPHA continued to fund this project to support a group of committed alcohol and other drug consumer and carers to form an independent organisation. This is being finalised as the Annual Report is going to print.



HEALTH ENGAGEMENT NETWORK

Country Community Engagement

We partnered with WAPHA to

- enhance and enlarge the consumer engagement activities of WAPHA Country PHN
- support the existing WAPHA Country PHN staff to plan and execute consumer engagement activities
- increase community awareness of WAPHA funded providers

This work was undertaken on a region by region basis to ensure a targeted, relevant, localised approach to seeking feedback from consumers on their experiences of primary care services. Each region was involved in at least one consumer engagement activity and received a summary of the activities, findings from the activities and a 12-month engagement plan going forward. WAPHA's Needs Assessment reports were the starting point for WAPHA staff (in partnership with HCC) to identify priority populations to engage with. Existing events and activities were leveraged to ensure the most value for regional visits.

Health Engagement Network a Community of Practice

This is an emerging community of practice for staff and consumer and carer representatives who are involved in consumer and carer engagement across the health system in WA. The aim of the Network is to promote best practice and build capability in consumer/carer engagement and participation across the health sector in WA.

The Network is free to join and is open to everyone – including staff and consumer and carer representatives – with an interest in the practice of consumer and carer engagement in the health system in WA. We have over 200 members so far and its growing all the time!

The Network has been set up with initial support from the Health Consumers' Council and the WA Primary Health Alliance. It is a self-organising community so new members are always welcome.



**More voices =
Better health care**

Our People

Staff

Name	Position	Term
Pip BRENNAN	Executive Director	Whole Year
Sheree MEARS	Operations Manager	Whole Year
Carly PARRY	Advocacy Manager	Whole Year
Chrissy RYAN	Advocate	Whole Year
Kerrie MOCEVIC	Advocate	Whole Year
Bronte DUNCAN	Advocate	Whole Year
Tania HARRIS	Aboriginal Engagement Coordinator	Whole Year
Kirsten HIRD	Administration Assistant	January 2018 to current
Emma CORY	Communications Advisor	March 2018 to June 2018
Louise FORD	CaLD Manager	until July 2018
Tim WILLIAMS	Consumer & Community Engagement Coordinator	until June 2018
Martin WHITELY	Policy & Research Manager	until February 2018
Caitlin HAEUSLER	Administration Assistant	until May 2018
Nadeen CURRAN	Policy Officer	September to November 2017
Kate BULLOW	WA Primary Health Alliance Naïve Inquiry Project	until December 2017
Ashleigh ROCCISANO	WA Primary Health Alliance Country Project	until July 2017
Lucy PALERMO	Marketing & Communications	until August 2017

"Thank you so much for the map and for your time on the phone today. I truly appreciate that you engaged with me for so long and listened to everything I said. You have been supportive of my experiences which is something I struggled to find along the process of being in both the mental health system and the family court system. I felt very uplifted after our conversation and you have given me some motivation to keep going with my journey forward and I cannot thank you enough."



We're Stronger Together

Volunteers

Volunteer Hours 2017-2018

Date	Name	Task
24/7/17	Kaitlyn Johnston	Advocacy Evaluations
19/7/17	Rodrigo Baratella	Membership
25/7/17	Christopher Lau	Advocacy
25/7/17	Alistair Morgan	Advocacy
4/8/17	Meagen Twyeffort	Research & Policy
24/10/17	Abid Hussain	CCE
	Board Members	1x 2hr meeting each month x 9 members
	Committee Members	4x committees with approx. 3x volunteers on each. 1 hr meetings held each month
	Pro bono Lawyer	1x lawyer for 2xhrs each month
Sep-17	Louise Watson	Data Entry/ Administration
Oct-17	Widya Bridges	Data Entry/ Administration
2017	Beatrice Ho	Research & Policy
May-18	Mikaela Oliveri	Administration
2018	Sirad Eimi	CaLD Engagement
2018	Bethany Lorian	Policy
2018	Susan Benson	Advocacy

With thanks to our student contributors and their hard work, to our volunteers and especially Board Members. Together, you contributed more than 1210 hours. We couldn't do it without you!

Board Members

as at 30th June 2018.
Missing - Lee Griffiths



Cheryl HOLLAND
Chair



Laura COLVIN



Nigel D'CRUZ



Richard BRIGHTWELL
Deputy Chair



Tom BENSON
Secretary



Tony ADDISCOTT



Marlon FERNANDO
Treasurer

Partnerships & Systemic Advocacy

Sustainable Health Review

The Sustainable Health Review has provided our state with an opportunity to consider how we want our health system to be into the future. The previous statewide review known as the Reid Report offered an opportunity to invest more in prevention and thereby reduce the gap between health spend and health outcomes. That opportunity wasn't taken, and so here we are again with a chance to put prevention back on the radar.

There is also the opportunity to innovate through engaging with the people that use the health system in order to plan more effectively for our future. HCC firmly believes consumers are an under-utilised resource.

We were lucky enough to have the opportunity to work with Western Australians across our vast state working with LinkWest and the Community Resource Centre network. We worked with Ishar to host face to face sessions to reach culturally and linguistically diverse people and hear their views. The Langford Aboriginal Association hosted us twice to talk about the Reform and influence the final report. We worked with the WA Association for Mental Health, Consumers of Mental Health WA, Carers WA and Helping Minds to convene a separate consultation on mental health for the Sustainable Health Review

The Sustainable Health Review Final Report is due out in early 2019, and will likely direct the activities of hospitals, health services, not for profits and consumer organisations alike. The message that health is about more than clinical indicators definitely came through from all the consultation sessions. The Consumer and Carer Reference Group for the Sustainable Health Review also needs to be acknowledged for all their hard work through the last year.

Partnerships

ConnectGroups Community Booth

After much background work, ConnectGroups have been able to secure funding for a Community Booth at Fiona Stanley Hospital. The purpose of the booth is to connect people leaving hospital with the many peer and community-based supports that can help them stay well and out of hospital. HCC has partnered to facilitate the link between ConnectGroups and South Metropolitan Health Service, and to work with ConnectGroups to support the project's success after the launch in 2019.

Heritage FM Mind Body Program

In 2017-18 we were lucky enough to keep our monthly spot on Heritage FM's Mind and Body program. The program runs each Wednesday and HCC is a guest on the first Wednesday of every month.

Engagement Projects

As noted on page 17, we partnered with the WA Primary Health Alliance and Aha! Consulting in establishing the Health Engagement Network. Aha! Consulting were also a key partner in the Alcohol and Other Drugs Advisory Group project, skillfully facilitating a session to continue to progress the establishment of the Alcohol and Other Drugs Consumer and Community Coalition.

Patient First Project

This year we were able to finalise the Patient First resources which help people prepare for hospital, stay safe in hospital and return back home in good health. These resources are co-hosted in HCC's and WA Health's websites.

Our Members

We're stronger together

Individual Members

In 2017-18 we took the decision for the first time to ask all members to renew their membership each year on 1st July. This was to ensure that we have a group of people who are still connected with HCC's vision for equitable, person-centred healthcare for all West Australians.

As it was a first, we allowed until the 31st October for people to let us know if they still wanted to be a member. After this time, anyone who hasn't contacted us to be renewed is no longer listed as a member. The good news is anyone can re-register at any time to be a member through an easy online form or by contacting us by phone. Membership is still free, however if you require items to be posted we are asking for a \$50 contribution to the cost. If this is a problem for you, we just ask that you let us know.

If you have any queries regarding these plans or would like more detailed information, please don't hesitate to contact us at info@hconc.org.au or 9221 3422 or 1800 620 780.

Organisational Members

We would like to celebrate our new organisational members and look forward to continuing to work collaboratively to achieve systemic outcomes to benefit the health of all Western Australians





PATIENT OPINION in WESTERN AUSTRALIA

IMPACT REPORT FY17/18



586 STORIES SHARED

44 STORIES LED TO CHANGES

204,551 TOTAL PUBLIC VIEWS

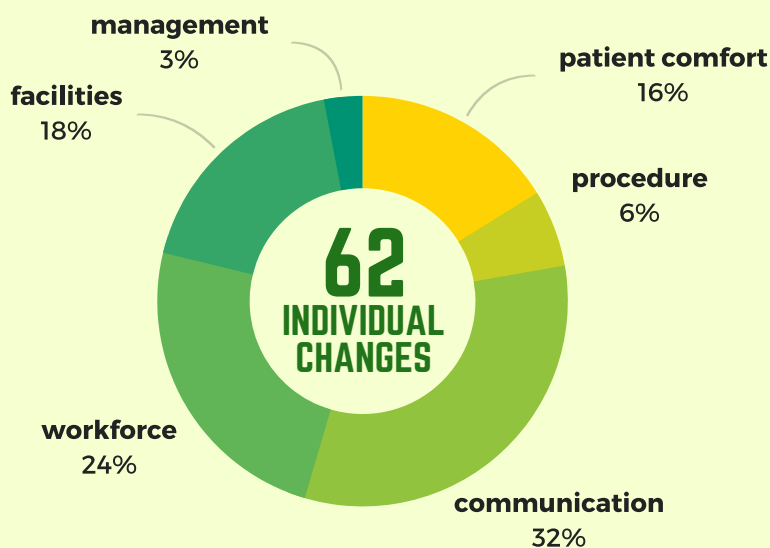
47% ENTIRELY POSITIVE OR NEUTRAL FEEDBACK

14% STORIES WITH CONCERNS LED TO CHANGE ACTIONS TAKEN

TOP 3 MOST COMMON STORY AUTHOR CONCERNS

- communication 138 stories
- support 124 stories
- staff attitude 86 stories

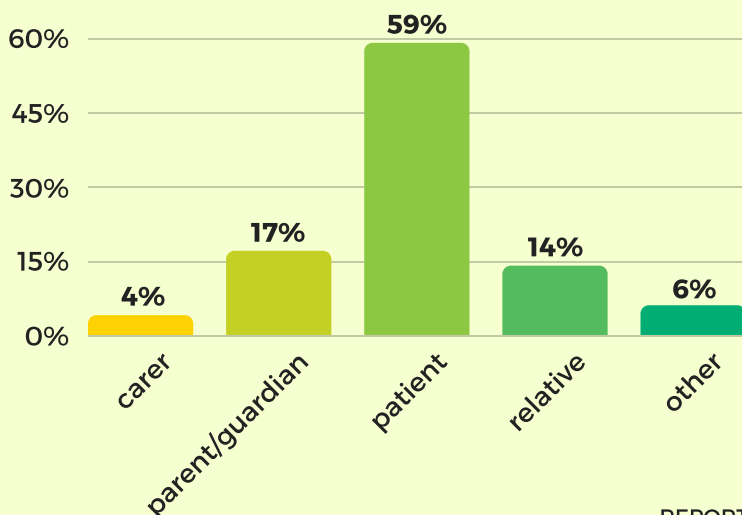
CHANGE ACTIONS TAKEN



TOP CHANGE ACTIONS

- workforce || learning 13
- communication || information 10
- communication || interpersonal skills 7
- patient comfort || privacy 4
- patient comfort || dignity/respect 4
- communication || phone correspondence 3
- facilities || equipment 3

STORY AUTHOR IDENTITY



STORY RESPONSES

- stories that received a response within 2 days of publication **71%**
- stories that have 2 or more responses **20%**

PATIENT OPINION
AUST
BE HEARD.



CARE OPINION
AUST
BE HEARD.



REPORT PREPARED ON 04/10/2018 BY PATIENT OPINION AUSTRALIA

Patient Experience Week

Presenting the winners from 2018 Consumer Excellence Awards held during Patient Experience Week 2018



Health Organisation Award

This category is for organisations working effectively with consumers to improve services. The Award recognises health organisations that demonstrate an ongoing partnership with health consumers to improve health outcomes. Evidence of this in the form of feedback letters from patients and/

or measures (KPIs, goals, objectives) will help support the organisation's candidacy.

WINNER - WA Cervical Cancer Prevention Program (WACCPP)

FINALISTS - Drug and Alcohol Withdrawal Network - DAWN

Bentley Hospital Pet Therapy Program



Health Professional Award

This category is for individuals demonstrating excellence in patient care. The Award recognises health professionals who demonstrate ongoing commitment to improving health outcomes through delivering patient centred, evidence-based health care. Letters from patients and/or measures (KPIs, goals, objectives) will help support the health professional's candidacy.

WINNER - Dr Andrew Davies

FINALISTS - Melissa Vernon, Dr Hans Grobelaar

Health Consumer Award

This category is health consumers demonstrating excellence in contributing to the improvement of the patient experience. It recognises a health consumer who demonstrates commitment to improving health outcomes and/or the patient experience. Evidence of this in the form of feedback letters from consumers/patients/health professionals will help support the health consumer's candidacy.



WINNER - Antonella Segre

FINALISTS - James Stockwell, Debra Letica

Rosemary Caithness Award

This award is to acknowledge outstanding service to health consumers. This award is highly selective and typically the recipient has supported health consumers over many years. The Health Consumers' Council will only award the Rosemary Caithness Award should there be a worthy recipient in any given year

WINNER - Dr Andrew Davies



FINALISTS - Antonella Segre & Team – Connect Groups, Melissa Vernon



Aboriginal/Torres Strait Islander Health Award

This award is to acknowledge outstanding service to Aboriginal/Torres Strait Islander health consumers. The candidate(s) is an Aboriginal/Torres Strait Islander person or organisation. They can be a health professional, consumer, other individual or organisation. Evidence of this in the form of feedback letters from consumers/patients/health professionals will help support the nomination.

WINNER - Leah Bonson

FINALISTS - WA Cervical Cancer Prevention Program

Peter Humphries and Natasha Garlett, , AHLOs



Compassionate Care Award

This award is to acknowledge people providing direct patient care who demonstrate compassion. We are looking for compassionate individuals working in any capacity in the health service or organisation. We are also looking for compassionate teams of health care providers who demonstrate effective

multi-disciplinary care. Evidence of compassionate care in the form of feedback letters from consumers and cares will strengthen the nomination.

WINNER - Colleen McLevie

FINALISTS - Jacqueline Pemberton
 Kerrie Colegate



DIRECTORS:

ROBERT CAMPBELL CA, CPA, RCA, MSW

VIRAL PATEL CA, CPA, FCCA (UK), RCA

ALASTAIR ABBOTT CA, RCA, M FORENSIC ACCOUNTING

Health Consumers' Council (WA) Inc

ABN: 87 841 350 116

Abridged audit report

For the Year Ended 30 June 2018

Scope

I have reviewed the abridged financial report of Health Consumers' Council (WA) Inc for the year ended 30 June 2018 as set out on the following page in accordance with Australian Auditing Standards.

Audit Opinion

In my opinion, the information reported in the abridged financial report of Health Consumers' Council (WA) Inc is consistent with the annual special purpose financial report from which it is derived and upon which we expressed an audit opinion in our report to the members. For a better understanding of the entity's financial position and performance, as represented by the results of its operations and its cash flows for the year, and the scope of our review, this report should be read in conjunction with the annual special purpose financial report and our review report.

Australian Audit

R J Campbell, CA CPA
Registered Company Auditor number 334773
Director



Perth, Western Australia

DATE: 23 October 2018



Health Consumers' Council (WA) Inc

ABN: 87 841 350 116

Abridged financial report for the year ended 30 June 2018

	2018	2017		2018	2017
	\$	\$		\$	\$
STATEMENT OF FINANCIAL POSITION			STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE		
AS AT 30 JUNE 2018			FOR THE YEAR ENDED 30 JUNE 2018		
CURRENT ASSETS			Grants	1,045,247	1,023,320
Cash assets	446,251	686,294	Grants - Commonwealth funding	-	-
Receivables	93,985	25,001	Interest	7,259	7,233
TOTAL CURRENT ASSETS	540,236	711,295	Other income	327,228	92,517
NON CURRENT ASSETS			Employment expenses	(914,005)	(816,309)
Property, Plant & Equipment	148,324	16,668	Operating expenses	(127,142)	(76,327)
TOTAL NON CURRENT ASSETS	148,324	16,668	Administration expenses	(205,365)	(87,861)
TOTAL ASSETS	688,560	727,963	Premises expenses	(125,353)	(130,915)
CURRENT LIABILITIES			Motor vehicle expenses	(6,997)	(6,381)
Payables	162,434	324,125	Depreciation	(38,624)	(15,350)
Provisions	58,268	55,685	Capital grants	149,880	-
TOTAL CURRENT LIABILITIES	220,702	379,810	Total comprehensive income	112,128	(10,073)
NON CURRENT LIABILITIES			Total changes in equity	112,128	(10,073)
Provisions	18,571	10,994	STATEMENT OF CASH FLOWS		
TOTAL NON CURRENT LIABILITIES	18,571	10,994	FOR THE YEAR ENDED 30 JUNE 2018		
TOTAL LIABILITIES	239,273	390,804	Cash flows from Operating Activities		
NET ASSETS	449,287	337,159	Receipts from operations	1,233,017	1,182,886
EQUITY			Payments to suppliers and employees	(1,459,917)	(1,060,216)
Retained Earnings	429,287	285,030	Net cash generated by (used in) operating activities	(226,900)	122,670
Reserves	20,000	52,129	Cash flows from Investing Activities		
TOTAL EQUITY	449,287	337,159	Purchase property, plant & equipment	(170,282)	(1,736)
			Capital grants	149,880	
			Interest received	7,259	7,233
			Net cash generated by (used in) investing activities	(13,143)	5,497
			Cash flows from Financing Activities		
			Net cash generated by financing activities	-	-
			Net increase/(decrease) in cash held	(240,043)	128,167
			Cash at beginning of financial year	686,294	558,127
			Cash at end of financial year	446,251	686,294
STATEMENT OF CHANGES IN EQUITY					
Beginning Retained Earnings	285,031	233,669			
Total comprehensive income	112,128	(10,073)			
Transfers from reserves	32,129	61,434			
Reserves	20,000	52,129			
Closing Retained Earnings	449,288	337,159			

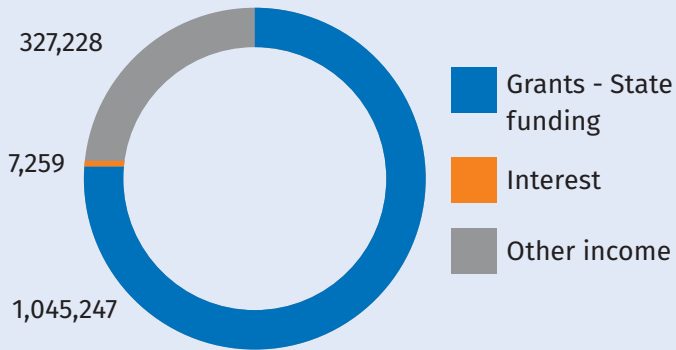
NOTES

The Abridged Financial Report has been derived from the reviewed special purpose financial report that is prepared in accordance with note 1 to that report.

Our Financial Year

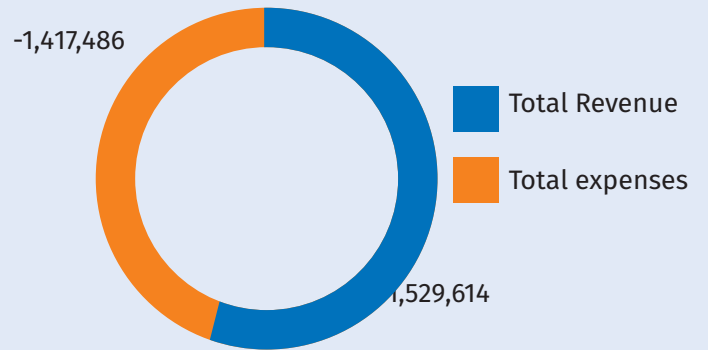
Our Funding

Revenue 2017-18

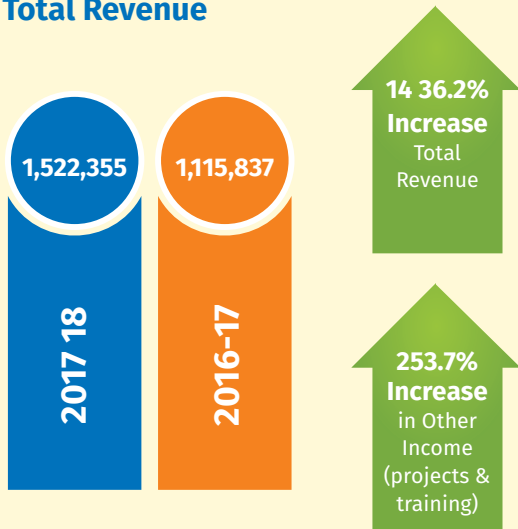


Consolidated Results

Profit & Loss - Net Position=\$112,128

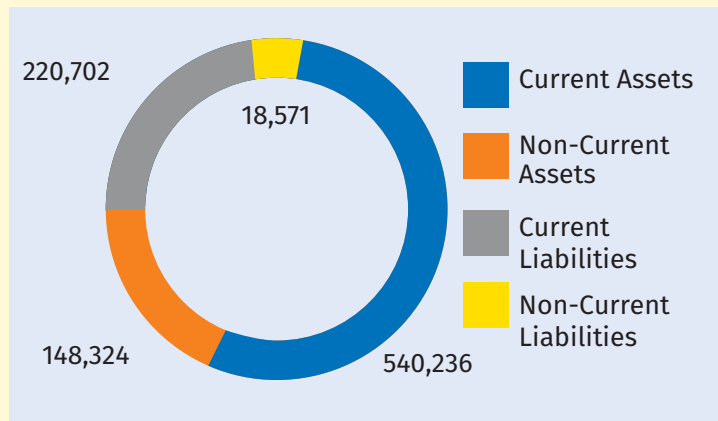


Total Revenue

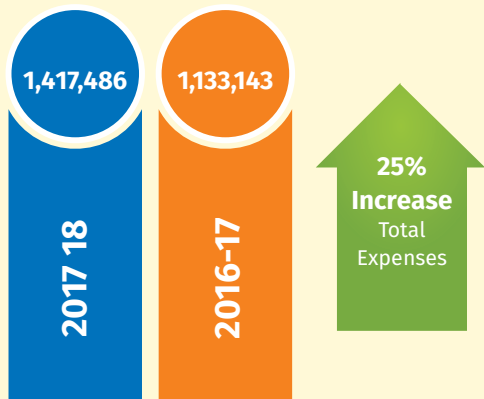


Consolidated Results

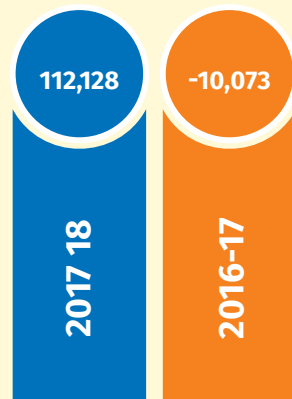
Profit & Loss - Net Position=\$112,128



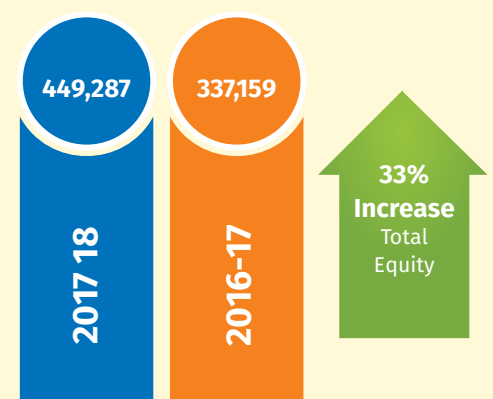
Total Expenses



Total Comprehensive Income



Changes in Equity





Health Consumers' Council

GPO Box C134, Perth WA 6839

Phone (08) 9221 3422 Fax (08) 9221 5435 Country Freecall 1800 620 780

Email info@hconc.org.au Web www.hconc.org.au

ABN 87 841 350 116