



Annual Report

2022-2023



HEALTH CONSUMERS'
COUNCIL



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

Acknowledgement of Country

Health Consumers' Council acknowledges Aboriginal and Torres Strait Islander peoples and communities as the Traditional Custodians of the land we work on, specifically the Whadjuk people of the Noongar nation. We pay our respects to Elders past, present and emerging.

Australia always was and always will be Aboriginal land.

Recognition of Lived Experience

Health Consumers' Council recognises the individual and collective expertise of those living with health challenges. We recognise their vital contribution at all levels and value the courage of those who share this unique perspective for the purpose of partnering to achieve better health outcomes for all.

Diversity and Inclusion

Health Consumers' Council is committed to cultivating inclusive environments for staff, consumers, and stakeholders of all backgrounds, genders, sexualities, cultures, bodies, and abilities; recognising and fighting against the systemic discrimination faced by many people within WA's healthcare system.

*We use the term 'consumer' in its broadest sense to include health consumers, patients, people with lived experience, carers, family members, and community members.

Chair Report

MALLIKA MACLEOD

Reflections on Leadership

As I think about the work of HCC, each of my colleagues come to mind for their unique skills and shared passion. They are the powerhouse, backbone, lifeblood of the organisation and their connections to each other and the big task ahead is what keeps them cohesive and all on the same page. However, the person to lead the operations team and wrangle the Management Committee has to always have that something special. Thank you to our leaders, our people who filled in to keep the wheels in motion, the Management Committee and most importantly to the staff.

Suzanna Robertson was with us in the Executive Director role for a short but good time. Arriving in the midst of family challenges, the team sprang into action to continue the work and support the ED with what I expect are some of the skills we all honed while in the grasp of a pandemic. Suzanna led the team from remote, supported by Clare who acted in the ED role for three months, and the team secured the DOH core contract until December 2025, with the agreement created in 2015 given a much needed contemporary service outcomes update to better reflect our work.

Suzanna also moved us into the new premises on Lord Street in Mount Lawley, and the opportunities to become a training hub and community facility that supported the work of our organisational peers was realised. Sadly Suzanna resigned in December and left HCC in January, presenting the challenge of recruitment over the summer break. However, with the nimble action of the Management Committee we moved to a holding pattern to get us through the down time of the summer and therefore breathing room before recruitment. Sincere thanks to Rebecca Smith for taking on the acting Executive Director role, which meant her wisdom and eye for detail was sadly missed as she stepped down from the MC.

In the interest of transparency, a holding pattern was the right decision and recruitment for a new ED was not a pressure we had to face at a time when the team was already coping with a new home and all that entails with a fit out and being surrounded by years of work in neat boxes. We welcomed Clare to the ED role without the fanfare you might expect, but Clare was right there on the team already... and approached the appointment and the opportunity to reconsider the structure, especially with Rebecca by her side.

Thank you to the work of the Finance and Risk Management Committee, ably chaired by Ian Ludlow. A staple group of people in organisations everywhere, and the governance engine room of compliance and contract management.

Farewell and welcome

We have had some changes in our Management Committee over the year. We sincerely thank outgoing member Tina Taira-Waldon, and welcomed new members: Glen, Niall and Natalie, following a hotly contested election at the AGM in 2022, and Kim joined us in 2023 to fill the vacancy created by Rebecca Smith stepping down. Unfortunately, since June 2023 Glen and Natalie both had to reluctantly step down due to personal circumstances and I thank them for their contributions.

Management Committee meetings have remained online, and our in-person time is a rare treat, however this has meant best access for all members who come from all over metro, some zooming into our meetings while travelling, others in regional locations. Thank you to every committee member for their important and varied contributions over the year, every one of you living up to the skills you promised to share with HCC.

I look forward to a smoother year ahead, but know that whatever challenge is thrown our way, this nimble team of kind and generous fellow humans will make it work and be there for each other when things get tough.

Congratulations to all on another year that taught us the importance of belonging and that everyone has something to contribute to the better health and wellbeing of all Western Australians.



Mallika Macleod and Clare Mullen



Executive Director Report

CLARE MULLEN

Reflecting on another big year, we've seen the many benefits that come out of nurturing a strong team culture. In a year of leadership changes, settling into a new office, and a move to cloud-based IT systems, we also faced a growth in demand for our advocacy service, and a steep increase in requests for engagement work outside of our existing contract. It was an honour to step into the Executive Director role in May 2023.

I thank outgoing Executive Director Suzanna Robertson for her commitment to exploring how we could refine how we work, and to Rebecca Smith for her willingness to step down from the Management Committee to take the interim leadership role at the start of the year. Thanks too, to the HCC Management Committee for being there through this period.

There are a couple of big things on the horizon for 2024. HCC will turn 30 in April, and we will celebrate with the consumers who are at the heart of our organisation, as well as the health and community services staff who support our vision. As we review our strategic direction, we will be learning from the successes and wisdom of the past to guide us and the health consumer movement in WA into the future.

A strong and confident consumer movement is much needed!

Right now, Western Australians are experiencing a melting pot of change and reform impacting on our health and wellbeing. These include changes in primary care, emergency access, urgent care, aged care, and disability services – as well as the review of the National Health Reform Agreement, which looks at how health is funded between the State and Federal Governments.

We know how critical it is that these changes are informed by, and designed in partnership with, people who navigate these services every day. Particularly the people who experience multiple layers of exclusion due to discrimination, poverty, and “service-centred services”.

It's never been more important to have a strong, connected network of people with the confidence, skills, and experience to speak up for consumers and speak truth to power.

For HCC, this means continuing to widen our circle to bring more people with a range of perspectives to the table, as well as continuing to work in collaboration with other health, mental health, and social care consumer, carer, and lived experience groups.

Having more grassroots perspectives being spoken into rooms where major decisions are being made has the power to lead to the transformation in health and wellbeing that our community deserves.

I feel enormously privileged to walk alongside other consumer, carer, community, and lived experience leaders, representatives, and advocates at this pivotal time for the WA community.

We're stronger together!



About Us

OUR HISTORY

Health Consumers' Council was established in 1994 as an independent "voice" on health issues and concerns and to represent the community on health policy, planning and decision making. We advocate with and for consumers at an individual and systemic level to achieve our vision of equitable, person-centered, quality healthcare for all Western Australians.

ADVOCACY SERVICE

We provide independent advocacy to support people to uphold their health rights. When something has gone wrong within the WA health system, we can help by walking alongside our clients to help them find answers. Our advocacy service is available to any person with an issue in the WA health system. Our advocates can provide support, information, guidance and representation, and speak, write, or act on a client's behalf to promote, protect and defend their rights, opinions, and concerns.

ENGAGEMENT

We provide support, education, connection, facilitation, and networking to ensure people can have a say in health policy, planning, and review. Our team works closely with the health system to ensure ongoing improvements in healthcare delivery and better information for consumers. We believe in the importance of authentic, productive partnerships to create the WA health service we all aspire to. Our approach is centred on ensuring the rights and interests of all people living in WA are listened to, understood, and upheld. We are particularly focused on ensuring the voices of those who have been marginalised by society, or whose voices are often missed, are included in important conversations.

ABORIGINAL ENGAGEMENT

We are focused on ensuring Aboriginal voices are heard in important conversations, to address the systemic, societal, and individual racism, inequity, and injustice in our health system that can lead to poorer health outcomes. We know that health advocacy plays a big part in addressing these issues, so we provide training for health services staff to gain a better understanding of the barriers and enablers for Aboriginal people in our health services and systems. We work with community to identify barriers that, when addressed, can improve access and service delivery to Aboriginal consumers.



CULTURAL DIVERSITY

WA continues to experience higher than national average population growth through migration; over half of West Australians have at a parent born overseas. We speak 240 languages across a vast state. However, many people from Culturally and Linguistically Diverse backgrounds experience challenges when navigating a complicated and often unfamiliar health system. Language barriers, systemic, societal, and individual racism, and practices that are not culturally safe can lead to poor service use and health outcomes. The voices of people from Culturally and Linguistically Diverse backgrounds are often left unheard. Through workshops for health providers and consumers, we advocate and agitate for effective engagement and provision of care for people from diverse cultures.

SYSTEMIC ADVOCACY

We are more powerful when we work together. Our systemic advocacy work aims to use consumer insights and perspectives to affect long-term change, to achieve our vision of equitable, person-centred, quality healthcare for everyone in Western Australia. We combine what we hear from consumers with our extensive knowledge of the health system and the insights gained from our individual advocacy service, to deliver a powerful consumer perspective. We aim to influence positive long-term changes that support and respond to the needs of the community. Our systemic works extends to legislation, policy, and practice in the public and private sectors.



CHAMPIONING CONSUMERS

We know consumers want to be involved in the design and delivery of their health services, and we're committed to working alongside them to achieve this. We offer support, education, and networking to both consumers and health services and staff, to help them connect and learn from each other. This year, we launched the Consumer Leadership Academy for active and experienced consumer representatives; shared with our consumer representative network more than 200 opportunities to have a say in WA health, through surveys, research, advisory committees and board level opportunities; and continued to advocate for appropriate remuneration and support for consumer participation, representation and consultation across the system.

HEALTH SERVICE CONSULTING

HCC has a trusted reputation and extensive consumer networks built across our 30 year history. With a deep understanding of the issues that impact diverse consumers, a wealth of collective knowledge, data and experience around working with the health system, and the ability to provide unique and nuanced insights, we offer immeasurable value to those wanting to deliver health services based on consumer needs. Our for-purpose offerings include consumer engagement advice and consultancy, planning, community consultation, workshop facilitation, and consumer representative recruitment. You cannot have effective, efficient, and safe health services without involving consumers.



Our Impact

1118

PEOPLE CONTACTED
OUR ADVOCACY
SERVICE FOR HELP
WITH THE WA HEALTH
SYSTEM

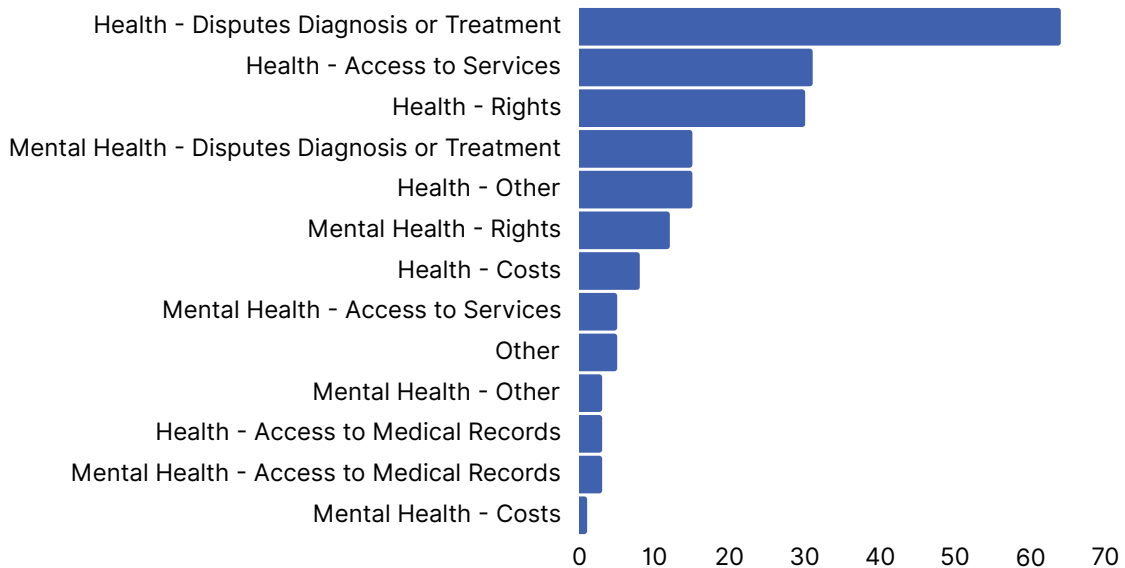
66%

OF ENQUIRIES WERE
FROM NEW CONTACTS

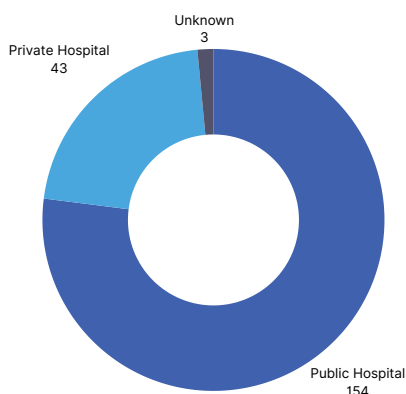
200

ADVOCACY CASES
WERE RESOLVED

Demand for our individual advocacy service continues to grow each year. In 2022-2023, we had 1118 new enquiries, compared to 1050 in 2021-2022. Since 2019-2020, new enquiries have increased by 29%. Despite not advertising our advocacy service, 66% of the people who contacted our team this year had never accessed our advocacy service before.



Resolved cases



“Many thanks for your advice and assistance extended to me today, with your advice and support, I feel confident attending the meeting and I felt that I was not alone in the meeting.”

ADVOCACY CLIENT

55+

EVENTS AND WORKSHOPS WITH CONSUMERS AND HEALTH STAFF

120

PEOPLE GUIDED TO CRAFT A MEANINGFUL ACKNOWLEDGEMENT OF COUNTRY

54

PEOPLE BEGAN THEIR JOURNEY AS A CONSUMER REPRESENTATIVE

126

CULTURALLY AND LINGUISTICALLY DIVERSE PEOPLE LEARNED ABOUT RIGHTS, RESPONSIBILITIES, AND CHOICES IN HEALTH CARE

25

COMMITTEES WITH A HCC REPRESENTATIVE TO ADVOCATE FOR CONSUMERS

485

HOURS OF PAID CONSUMER PARTICIPATION

138+

CONSUMER PERSPECTIVES SHARED IN MEETINGS AND FORMAL RESPONSES

27k

DOLLARS PAID TO CONSUMER REPRESENTATIVES



1442

Posts



5573

People



105k

Post Reach



58k

Website Views

“It was a wonderful workshop exactly as it was. Just the right time frame, opportunities to ask questions and time to reflect on the deeper reasons for why [this topic] is so important.”

WORKSHOP ATTENDEE

Our Highlights

Feedback

“Thank you so much for your help in arranging today’s regional focus on [this topic]. The participants were well informed, adequately prepared and provided invaluable insights throughout the course of the session... This first focus group has set a strong foundation (and very high bar!) for subsequent sessions in this project. This is testament to HCC’s strengths and your hard work in making this happen in such a short period of time.”

CONSULTING CLIENT

Aboriginal Patient Advocacy Training

We partnered with the National Justice Project and The Aboriginal Health Council of WA to develop training for organisations and staff who work with Aboriginal people. It aims to help them support their clients and communities. All participants responded that they would be better able to engage and work more effectively in their role or community after completing this training. After this training, participants said they would “listen more”, “treat people as patients first”, “practice active listening”, and “effectively advocate for my patients”.



Consumer Leadership Academy

In 2023 we trialled a new approach to further learning, replacing our Advanced Consumer Representation training with Consumer Leadership Academy learning sessions. These sessions aim to address important issues faced by consumers actively advocating for positive change across the WA health system. In our first session, focused on Dealing with Conflict, 18 consumer representatives heard advice from our Executive Director Clare Mullen about having crucial conversations. Consumers shared their experiences and discussed practical tips based on real life scenarios.



Health Rights, Responsibilities, and Choice

Across 7 sessions, 126 attendees who identified as being from Culturally and Linguistically Diverse backgrounds were given information on using the WA health system. These sessions were conducted in English and through Vietnamese, Karen, Arabic, Farsi, Dari, Macedonian, Kirundi, and Mandarin interpreters. Conversations were focused on health rights and responsibilities, choosing the right health service, and going to hospital. We encouraged participants to share their experiences and exchange ideas about asking questions of their doctor and providing feedback to services. These conversations about health care help inform our ongoing engagement activities.

Our Highlights

Emergency Access Reform Program

This wide-reaching program looks at how people move through a hospital setting, to ensure the people who really need the high-level healthcare of an emergency department can access that care promptly. We want to ensure patient experience measures are included as key indicators alongside other system measures, and that new approaches to providing care are tracked to assess their impacts on health outcomes and patient safety. With funding from the Department of Health, we established a consumer working group to inform this project. The working group provides informed feedback on a range of issues. HCC also sits on the project steering committee.

Women and Babies Hospital Relocation

In April 2023, the WA Minister for Health announced the new Women and Babies Hospital would be relocated to the Fiona Stanley Hospital precinct, provoking a strong community reaction. Through a coordinated response with other consumer organisations, we pushed for more information and established a consumer group to have a voice at the table for ongoing discussions. This work is ongoing, with HCC and the consumer group meeting with the Director General for WA Health to discuss how consumers can have the opportunity to influence decisions and be involved in this process as active participants.



Consumer, Carer, and Community Networking

Consumers need opportunities to network, learn from, and encourage each other. Twice a year we hold networking sessions for consumer, carer, family, and community representatives and lived experience advocates. We provide a supportive space to connect with other representatives, and hear updates about key issues in the health sector and from HCC. In our Bunuru session, we heard from special guest Elizabeth Deveny from Consumers Health Forum of Australia about the national consumer landscape. Feedback from participants included that this session was “informative, knowledgeable, and very easy to listen to”.

Organ Donation in WA

In February 2023, the Standing Committee on Public Administration began an inquiry into organ and tissue donation in WA, looking at improving organ and tissue donation rates in WA. HCC provided a submission to the enquiry based on the yarns, stories, and experiences of Aboriginal and Culturally Diverse consumers we consulted with through a Community Awareness Grant in 2021. We were asked to speak further to these learnings and appeared before the Standing Committee for a hearing in June 2023. We were joined by a consumer advocate with experience of a double lung transplant, who shared her powerful story during our grant activities and added her voice to this important conversation.



Our Highlights

Positive Changes in Reproductive Technology Law

The WA Government has accepted a series of recommendations from its Ministerial Expert Panel (MEP) on Assisted Reproductive Technology (ART) and Surrogacy laws. HCC has been advocating strongly in this space since the Independent Review began in 2019; we made a written submission, hosted a community briefing, and encouraged individuals affected to make submissions. Almost all the changes we advocated for have been recommended, highlighting the power of community involvement and advocacy.

Empowering People Impacted by Weight Issues

The WELL Collaborative empowers people impacted by weight to make progress on their terms. It was established by WA Health, WA Primary Health Alliance, and HCC as part of the implementation of the WA Healthy Weight Action Plan 2019 – 2024. A focus this year has been to nurture a receptive audience to hear lived experience stories. We supported a consumer to provide their insights in a clinical education session, and on a podcast episode about weight stigma alongside an academic and a dietician. We ensured a safe space for people impacted by severe and complex obesity to be involved in planning for a new integrated model of care for early intervention and management of overweight and obesity.

Sustainable Health Review

Sustainable Health Review work regained momentum as the health system moved to the reality of living with COVID. The Minister for Health reaffirmed the Government's commitment to implementing the SHR and reiterated that the SHR is about an equitable patient-centred system; a health system, not a hospital system; giving a voice to consumers. It was agreed that 6 of the 30 recommendations would receive focused support: Recs 11, 13, 17, 22, 23 and 26, which relate to improvements in outpatients, care for people with complex conditions, workforce, and digital health. HCC has championed targeted consumer and lived experience partnership and involvement, with specific consumer involvement activity across all of these priorities except Rec 23.



Consumer Stories

Supporting Health Consumer Rights

A mental health consumer contacted our advocacy service as they were receiving treatment in hospital and required further information about their rights as a voluntary patient. This is a common enquiry to our advocacy service, with mental health enquiries accounting for almost 40% of all enquiries each year.

The consumer explained that their treating team had told them they were unable to leave the hospital and that if they tried to do so, they would be placed under an involuntary treatment order. **The consumer contacted us as they were unsure about their rights and if they could challenge the treating team's statement.**

Our Advocacy and Intake Officer (IAO), who is often the first point of contact with our advocacy team, was able to talk to the consumer about their rights as a voluntary patient. They explained the criteria that would need to be satisfied for their treating team to be able to place them under the Mental Health Act 2014 (WA) as an involuntary patient, and discussed the potential consequences should the consumer discharge against medical advice.

Additionally, the IAO offered to contact the consumer's treating team, to communicate the individual's concerns of being told they were unable to leave the premises and to gain a better understanding of the treating team's concerns about the patient leaving. Upon contacting the treating team, the IAO established that the voluntary consumer did not satisfy the conditions required under the Act to be made an involuntary patient, and therefore reminded the treating team of their legislative obligations towards voluntary mental health consumers.

As a result of our advocacy actions, this consumer felt more confident to make informed decisions about their treatment. They were able to better assert their rights, and were discharged from the facility with the appropriate supports in place. Had the consumer not contacted our advocacy service, it's likely they wouldn't have been able to achieve this outcome.

Everyone who is seeking or receiving care in the Australian health system has certain rights regarding their care. **Often, with access to the right information and support from our team, consumers are better able to advocate for themselves to work towards their preferred outcome.**

Consumer Stories

Safety in Healthcare

What does it mean to feel safe in a healthcare setting? What does it look like, sound like, feel like? And what makes a healthcare setting feel unsafe?

In February 2023, we asked eight groups of consumers what safe and high-quality health care means to them, in a series of online and face-to-face workshops. With a focus on consumer groups who are often marginalised and/or at high risk of unsafe care, we produced eight reports to feed into the WA Safety and Quality Strategy.

The focus groups included Aboriginal people; Culturally and Linguistically Diverse people; young people aged 15-21; people with chronic conditions; people with disability; people who identify as LGBTQIA+; and people living in regional WA.

The themes we heard in these conversations resonated across the groups. Safe care is not just about safe clinical practices – it is important that people feel safe, too. It means being treated with respect in an authentic, culturally appropriate manner. Consumers want to be listened to, and really be heard, because they are the experts in their own experience. There was a focus on the need for regular, consistent, and clear communication; coordinated care across the health system; and compassionate care.

“I shouldn't have to request things to get good care. I'm sick, my mind isn't in a good place, why should I have to be well enough to request an ALO [Aboriginal Liaison Officer]?”

“A lot of the time, when you are trying to explain, you aren't being heard. If they don't understand or hear you, how are they meant to help you?”

The eighth group we spoke to had experience of the care transition from paediatric to adult health services. This group was suggested due to an understanding that transitioning between care settings can often be the point where additional clinical incidents occur.

Our team heard a multitude of stories from both parents and young people about poor handover, a lack of understanding of rare diseases, and gaps in services when moving to adult services, and the negative impacts these had on themselves, and their families. From treatment plans and histories that didn't transition with the child, and not having the right size equipment in ED for a young person who previously would have attended a paediatric hospital, to specialist services that were suddenly unavailable in adults services, a lack of communication and coordination between departments and hospitals, and changes to medications and processes once entering adult services, the descriptions that this group shared were harrowing and impactful.

“Only a few weeks ago, I saw both a doctor and nurse who were about to treat my daughter. It turned out neither had even heard of the condition my daughter had, even though it should be right there in their notes. They were about to do things to her that could have been disastrous. The health record is still sitting with [the paediatric service] and the doctors don't use it at all.”

Hosting peer-to-peer conversations in safe and supported spaces allows us the privilege of hearing many stories that otherwise wouldn't be shared with health services. We hold these stories in our hearts, and are committed to sharing them in every possible avenue we can find where they might make a difference.

We were able to amplify the stories we heard as part of this consultation in two important ways. Consumers advocates Lee and Sherrie, who took part in the workshop, shared their experiences of going through this transition in services with their children. With thanks to paediatric and adolescent oncologist Dr Thomas Walwyn, we wrote an article for Medical Forum magazine about childhood cancer survivorship and the fragmented transition to adult services, based on lived experience. This magazine reaches practising WA GPs and specialists, plus select doctors in training (more than 5,200), and it is one of the avenues we use to get stories in front of the people who can make change happen.

“We'd had lots of hands holding onto us and stepping us through everything in the child services, and all of a sudden that was going to be taken away from us...he felt like there was very little information given to him about what to expect in adult services. He felt dismissed, and I felt the safety net had been removed.”

We kept this momentum going by liaising with Dr Thomas Walwyn to share lived experiences at an Australian and New Zealand Children's Haematology/Oncology Group pre-Annual Scientific Meeting workshop focused on paediatric to adult transition. Our Engagement Manager Tania Harris spoke at the workshop to an audience of clinicians, consumers and non-government organisations, about what consumers want, and need, in this space. We also supported Lee and Sherrie to share their lived experience as parents of children who had been through this transition, giving them the opportunity to put consumer views front and centre for those involved in this area of healthcare.

We will continue to look for avenues to share the important insights we learned through these community conversations about safety in healthcare, as we work to improve services for future consumers and families.



**SHARE YOUR SAFETY & QUALITY NEEDS IN
HEALTHCARE**



Government of Western Australia
Department of Health

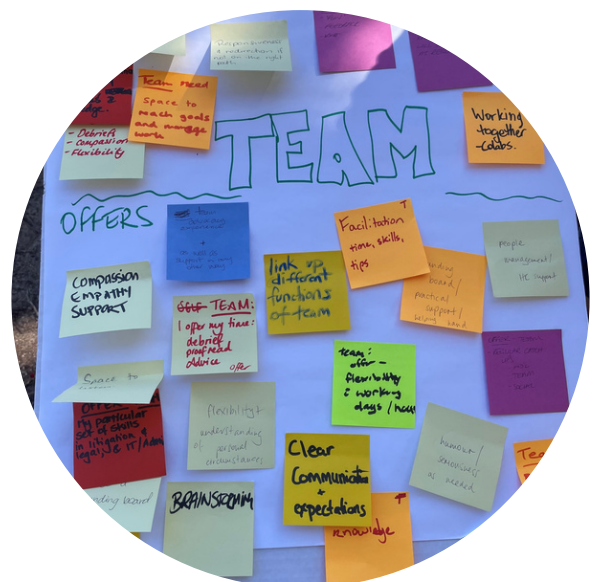
Our Team

1 July 2022 - 30 June 2023

Clare Mullen – Executive Director
Suzanna Roberston – Executive Director (Until January 2023)
Rebecca Smith – Interim Deputy Director Operations
Tania Harris – Engagement Manager, Aboriginal and Disability Engagement Lead
Nadeen Laljee-Curran – Cultural Diversity Lead
Jasmina Brankovich – Policy and Systemic Advocacy Lead
Kieran Bindahneem – Engagement Officer
Rachel Seeley – Marketing and Communications Lead
Lydia Gallant – Marketing and Communications (Until March 2023)
Aimee Riddell – Corporate Services Lead
Donelle Stevenson – Administration Officer
Emily Duffield – Administration Officer (Until 1 July 2022)
Tania Boylen – WELL Collaborative Digital Engagement Coordinator
Sam Smith – Advocacy Manager
Brooke – Policy Advocacy Officer (Until January 2023)
Brontë – Advocate
Chrissy – Advocate
Danika – Information and Advocacy Officer (Until November 2022)
Helen – Information and Advocacy Officer
Jenni – Information and Advocacy Officer
Lucy – Advocate (Until November 2022)
Kerrie – Advocate
Rachel – Advocate

Management Committee

Mallika Macleod – Chair
Richard Brightwell – Deputy Chair
Rebecca Carbone – Secretary
Ian Ludlow – Treasurer
Michael Crowley – Member
Meredith Waters – Member
Glen Knight – Member
Natalie Borrellini – Member
Niall Naghten – Member
Kim Brewster – Member
Tina Tuira-Waldon (until December 2022)
Rebecca Smith (until January 2023)



Our Thanks

Thank you for your ongoing support of our vision

We acknowledge and thank the **WA Department of Health** for their commitment to supporting an independent voice for the community on all aspects of health policy, planning, and decision making. We thank the **WA Mental Health Commission** for their contribution towards our individual advocacy service for people accessing mental health services.

Working in partnership is vital to achieving positive health outcomes. These are some of the key organisations we've worked with this year:

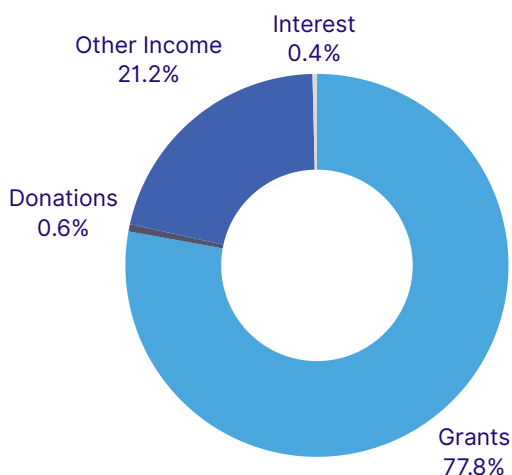
Aboriginal Health Council of WA
Alcohol and Other Drug Consumer Community Coalition
Asthma Australia
Australian Commission on Safety and Quality in Health Care
Behaviour Change Collaborative
Breast Screen WA
Cancer Council WA
Care Opinion
Carers WA
Child and Adolescent Health Service
Community Legal WA
ConnectGroups
Consumer and Community Involvement Program
Consumers Health Forum of Australia
Consumers of Mental Health WA
Culture Care WA Inc
Curtin University
Department of Justice, Corrective Services Division Health Services
DonateLife WA
East Metropolitan Health Service
Enrolled Nursing Cooperative
Financial Counsellors Association of Western Australia
Foodbank WA
Genetic Services of Western Australia
Helping Minds
Ishar Multicultural Women's Health Centre
Medical Forum
Miracle Babies Foundation
National Justice Project
North Metropolitan TAFE
Office of Population Health Genomics
People With disabilities WA
Professor Grant Waterer
WA Country Health Service
WA Primary Health Alliance
Western Australia Council of Social Services
Western Australia Health Translation Network
What the Doctor Said
William Langford Community House



Financials

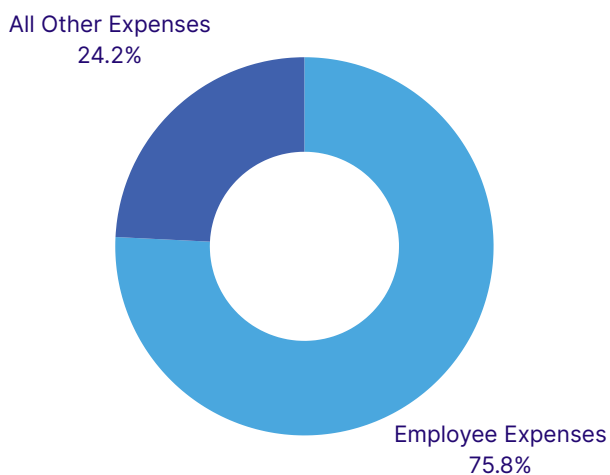
REVENUE

Total Revenue: \$1,640,382



EXPENSES

Total Expenses \$1,625,941



Treasurer's Report

Health Consumers' Council is in a good financial position with retained earnings and cash balances available to support continuing operations, and holding a great reputation with our funders and in the community for work performed.

The Management Committee is focussed on the strategic future, seeking opportunity, and managing risks facing the organisation. The reality for all not for profits predominately funded by Government is managing the challenge that the rate of increase in Government funding does not keep pace with the rate of increase in operating expenses and particularly employee expenses.

HCC has operated for many years predominantly with a single Government funding contract with the Department of Health. Over the last 5 years the HCC team has worked to leverage the significant knowledge and skills of the staff team to deliver additional services and training on a fee for service basis, to increase the delivery of services to the community. These additional clients include government and private organisations. A key focus in all business areas continues to be the improvement in the systems and processes that are used to deliver services to the community to improve efficiency and effectiveness. I acknowledge all of the team, the Management Committee, and the staff in working diligently towards HCC's goals.

Ian Ludlow FCA
November 2023

***Full financial report is available on request**

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HEALTH CONSUMERS' COUNCIL

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