This report:
– fulfils statutory reporting requirements; and
– provides operational and performance data for the
  2007-08 financial year.

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Manager, Health Community Council Coordination
Office of the Director-General
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GPO Box 48 Brisbane Q 4001

More information on Health Community Councils can be
found on the website: www.hcc.qld.gov.au

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addressed by email to:
HCC-Coordination@health.qld.gov.au or by mail to:
The Manager, Health Community Council Coordination,
Queensland Health, GPO Box 48, BRISBANE 4001.
Letter of transmittal

The Honourable Stephen Robertson MP
Minister for Health
Member for Stretton
GPO Box 48
Brisbane Qld 4001

Dear Minister

I am pleased to present to you the Mackay Health Community Council Annual Report for 2007-08. This report is a statutory function of the council and provides an outline of our performance during the year.

The report highlights activities against our key statutory functions of:

– undertaking community engagement about the health of, or health care for, the community;
– monitoring the quality, safety and effectiveness of public sector health services delivered in the council’s district; and
– enhancing community education about the delivery of public sector health services.

The council acknowledges its opportunity to play an important role in the reform process of Queensland Health thereby improving health service delivery for all Queenslanders and building trust and confidence between the community and Queensland Health.

The Mackay Health Community Council has had a very busy and challenging year as we have been involved in the campaign to achieve a new hospital for Mackay. This work has involved attending forums and meetings to present the reasons of why certain proposals by the various community groups would or would not be the best option for the future health needs of the district. The announcement by the Minister that Mackay will receive funding needed to develop a new health facility on the current hospital site is welcomed by the Health Community Council.

We look forward to continuing our role within the community, working in partnership with Queensland Health and most importantly being able to bring continued improvements in the delivery of health services through our role and functions.

Yours sincerely

Karalyn J Huxhagen
Chairperson
Mackay Health Community Council
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### About health community councils

Health Community Councils are a key component of the Queensland Government’s commitment to reforming the public health system and improving health service delivery for all Queenslanders.

Queensland’s 36 Health Community Councils are advisory bodies established under the provisions of *Health Services Act 1991*. The councils play an important role in the governance of public sector health services and work in partnership with Queensland Health.

The focus of the councils is to provide a community perspective in regards to the delivery of public sector health services in the local district. Councils do this through community engagement, community education and looking at safety, quality and effectiveness of the delivery of public sector health services within the local district.

Councils provide an opportunity for community members to participate in decision-making about health services by providing feedback about what is working well and areas for improvement. Council members facilitate community participation and contribute specialist knowledge and expertise to the delivery of public sector health services in the local district. Queensland Health is responsible for providing administrative and funding support to councils to meet their responsibilities. Councils provide an annual report to the Minister for Health on the performance of council functions during the year at the end of each financial year.

### Structure of Queensland Health in 2007-08

This reflects the structure of Queensland Health in 2007-08. A restructure of Queensland Health is being implemented during 2008-09.
Establishment

Mackay Health Community Council was established under the authority of the Health Services Act 1991 on 9 July 2007.

Councils ordinarily do not consist of more than eight members and, if practicable, must include at least one member who is a general practitioner. Councils must also not include more than one member who is engaged in the delivery of public sector health services in the council’s district.

Membership

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
<th>Term of appointment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chairperson</td>
<td>Karalyn Huxhagen</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Kim Wilson</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Greg Thomsen</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Ivy Foxlee</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Jeff Timor</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Michelle Davis</td>
<td>9 July 2007 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Raelene Phillips</td>
<td>May 2008 - current</td>
</tr>
<tr>
<td>Council member</td>
<td>Lola Mudie</td>
<td>May 2008 - current</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>General practitioners</td>
<td>0</td>
</tr>
<tr>
<td>Members engaged in the delivery of public sector health services in council district</td>
<td>1</td>
</tr>
</tbody>
</table>

Location

There is at least one health community council for each health service district. Mackay Health Community Council is located within the Mackay Health Service District of Queensland Health. Refer to Appendix A for a map of health service districts.

Statutory functions

Section 28M of the Health Services Act 1991 (the Act) prescribes that health community councils are advisory bodies having the following functions.

(a) undertaking community engagement activities about the health of, or health care for, the community, including, for example—

(i) obtaining information and feedback from users of public sector health services about public sector health service issues; and

(ii) considering planning proposals in relation to the delivery of public sector health services, and facilitating community debate and feedback on the proposals; and
(iii) advocating for users of public sector health services, so as to influence decision-making about the delivery of the services;

(b) monitoring the quality, safety and effectiveness of public sector health services delivered in the council’s district;

(c) considering and evaluating reports about the delivery of public sector health services in the council’s district;

(d) enhancing community education about the delivery of public sector health services;

(e) advising, and making recommendations to, the manager for the council’s district about the matters mentioned in paragraphs (a) to (d);

(f) giving the Minister, within 3 months after the end of each year, a written report on the performance of its other functions during the year; and

(g) performing other functions as directed by the Minister.
Operations

For the reporting period of 9 July 2007 to 30 June 2008.

Meetings

Councils should meet at least once every two months in addition to any specific meetings directed by the Minister.

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Council meetings held</td>
<td>10</td>
</tr>
<tr>
<td>Extra meetings held at direction of Minister</td>
<td>0</td>
</tr>
<tr>
<td>Special assignment activities undertaken</td>
<td>0</td>
</tr>
</tbody>
</table>

Record keeping

Queensland Health is responsible for managing the records of Health Community Councils within the district and ensuring compliance with the provisions of the Public Records Act 2002 and Information Standard 40.

Budget expenditure

Council members are remunerated in accordance with the Queensland Government’s Remuneration Policy. Fees outlined for chairpersons and members include meeting fees and special assignment fees. Other costs include travel allowances, motor vehicle allowances, catering, venue hire and any other costs associated with the activities of the council.

<table>
<thead>
<tr>
<th></th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chairperson fees</td>
<td>956.00</td>
</tr>
<tr>
<td>Member fees</td>
<td>3,599.00</td>
</tr>
<tr>
<td>Other costs</td>
<td>34.00</td>
</tr>
<tr>
<td><strong>Total expenditure:</strong></td>
<td><strong>$4,589.00</strong></td>
</tr>
</tbody>
</table>
Community engagement

The Act provides that Health Community Councils undertake community engagement activities about the health of, or health care for, the community. Councils may do this through:

- obtaining and providing information and feedback to and from users of public sector health services about public sector health service issues;
- considering planning proposals in relation to the delivery of public sector health services, and facilitating community debate and feedback on the proposals; and
- advocating for users of public sector health services, so as to influence decision-making about the delivery of the services.

In 2007-08, Mackay Health Community Council undertook the following community engagement activities.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Health Community Council was asked by the Primary Health Care Partnership (PHCP) group to appoint a representative and a proxy to attend the Primary health care partnership meetings. This representative has also been invited to participate at the working party level and is actively involved in developing material for the Podiatry, early initiation of insulin, kidney disease (PIK) project. This representative also has a role in identifying other worthwhile projects that could be undertaken in the next funding round.</td>
<td>Attendance at PHCP and PIK working party meetings.</td>
<td>Progressing</td>
</tr>
<tr>
<td>Chair of the council invited to chair the Mackay Base Hospital (MBH) redevelopment community reference group.</td>
<td>The chair has met with the Redevelopment coordinator. Terms Of Reference and a suggested mix of appropriate organisations and groups to approach to be part of the community reference group was developed. The council has given input into the make up of the reference group at council meetings. The redevelopment coordinator attends each council meeting and keeps the council abreast of all issues and progress.</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
At least one council member attends the SICH (Significant Investment in Capital for Hospitals) meeting. This meeting involves local business people, interest groups, universities and other interested organisations. As a collective we were able to present to our local members and the Minister a united front to achieve the best possible health facility in this area. Ongoing

Attendance at a meeting of residents whose homes abound the hospital and who may be affected by the building of the new hospital. Residents gained an understanding of the building process and the District Manager (DM) gave undertakings that the project liaison officer would be available to discuss issues as they arise. Issues of access, noise and fences were addressed and group indicated that they were pleased with Queensland Health’s commitment to listen and address their issues. Ongoing

Council met with members of the older women’s network and the regional development group to discuss their concerns with inadequate provision for transition in care places in the new hospital development. This group has continued to be part of many meetings that council members also attend. The DM and the redevelopment coordinator have provided information and ideas to this group to keep them fully informed. Further meetings are planned. Ongoing

**Other**

The council chair attends James Cook University (JCU) community reference group meetings.

The chair attends several different meeting of the Mackay Division of GP’s as the council representative.

A Community Engagement Plan is being developed.

Actively meet with other groups such as Aboriginal and Torres Strait Islander health, disability support group.
Monitoring quality, safety and effectiveness

The Act provides that Health Community Councils monitor the quality, safety and effectiveness of public sector health services delivered in the council’s district. Councils can do this by considering and evaluating reports about the delivery of public sector health services in the district and then advising and making recommendations to the district manager.

In 2007-08, Mackay Health Community Council monitored the quality, safety and effectiveness of public sector health services through the following reports.

<table>
<thead>
<tr>
<th>Reports considered</th>
<th>Regularity</th>
<th>Feedback or recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient and Quality Committee Reports</td>
<td>Monthly</td>
<td>Recommended that these reports are provided to council with an addendum providing an explanation of any uncommon terms used.</td>
</tr>
<tr>
<td>Complaints Reports</td>
<td>Monthly</td>
<td>Council noted higher than usual level of complaints in relation to delivery of mental services and recommended the District Manager consider an investigation.</td>
</tr>
<tr>
<td>District Managers Report</td>
<td>Monthly</td>
<td>Council are happy with content and discussion generated. They have recommended to the District Manager that at future meetings presentations are made from various areas to provide Council with information and education.</td>
</tr>
<tr>
<td>Re-development Co-ordinator report</td>
<td>Monthly</td>
<td>This is a significant issue for the District and Council are happy with the report. The co-ordinator presents the report.</td>
</tr>
</tbody>
</table>

Other

The council chair visited with key staff members and attended the clinical head staff meetings to outline the role of the council. The council chair stayed in email and phone contact with key staff who have been heavily involved in local issues such as obtaining a new hospital.
Community education

The Act requires that Health Community Councils enhance community education about the delivery of public sector health services. Councils may do this through receiving factual information from the district manager about public sector health services and giving that information to the community and raising community awareness and understanding about available services, service delivery and issues impacting on public sector health services in the district.

In 2007-08, Mackay Health Community Council enhanced community education through the following activities.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in the Diabetes Expo.</td>
<td>Raised awareness of role of Health Council</td>
<td>Completed</td>
</tr>
<tr>
<td>Development of a brochure explaining the role of the council and how to contact us. This brochure is used by members at activities that they attend.</td>
<td>Council members have developed more of a profile as to who to contact with problems.</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

Other

Nil

Special assignment activities

Councils may be directed by the Minister to undertake other functions. Additionally, a council chairperson or member may undertake specific activities on behalf of or representing the council outside the council’s planned activities or arrangements. Special assignment fees are applicable for these activities or arrangements.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Outcome</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nil</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix A

Structure of Queensland Health in 2007-08.

This map reflects the structure of Queensland Health in 2007-08. A restructure of Queensland Health is being implemented during 2008-09.