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

Contact:
Manager, Health Community Council Coordination
Office of the Director-General
147-163 Charlotte Street Brisbane Q 4000
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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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 Sunshine Coast 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 Sunshine Coast Health Community Council membership has remained stable at six members during the year. A total of eight meetings were held at Nambour General Hospital and Maleny Soldiers Memorial Hospital, tours of both facilities were conducted. One council member has been appointed to the Sunshine Coast Health Foundation and the Chairman is a member of the Sunshine Coast Hospital Stakeholder’s Advisory Group.

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

Mary Prosser
Chairperson
Sunshine Coast 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

Sunshine Coast 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>Mary Prosser</td>
<td>9 July 2007 – current</td>
</tr>
<tr>
<td>Council member</td>
<td>Peter Bryant</td>
<td>9 July 2007 – current</td>
</tr>
<tr>
<td>Council member</td>
<td>Susan Foyle</td>
<td>9 July 2007 – current</td>
</tr>
<tr>
<td>Council member</td>
<td>Helen Irvine</td>
<td>9 July 2007 – current</td>
</tr>
<tr>
<td>Council member</td>
<td>Kerry Staines</td>
<td>9 July 2007 – current</td>
</tr>
<tr>
<td>Council member</td>
<td>Michael Bradburn</td>
<td>9 July 2007 – current</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General practitioners</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

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

Location

There is at least one health community council for each health service district. Sunshine Coast Health Community Council is located within the Sunshine Coast & Cooloola 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>8</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>411.60</td>
</tr>
<tr>
<td>Member fees</td>
<td>3,430.34</td>
</tr>
<tr>
<td>Other costs</td>
<td>Nil</td>
</tr>
<tr>
<td><strong>Total expenditure:</strong></td>
<td><strong>$3,841.94</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, Sunshine Coast 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>Review of community engagement methods</td>
<td>Strategies developed for the utilisation of existing forums in order to promote the role and function of the council and receive input from the local community.</td>
<td>Progressing</td>
</tr>
<tr>
<td>and techniques.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distribution by council members of the “Draft Code of Health Rights and Responsibilities” for the Health Quality &amp; Complaints Commission to various community groups.</td>
<td>Increased visibility of council members and raised awareness of the draft code and encouraged feedback.</td>
<td>Completed</td>
</tr>
<tr>
<td>Health Service Planning: Council members are planning to be involved in an ongoing community engagement process for the dissemination of information about the new Sunshine Coast University Hospital.</td>
<td>Council members to have a formal role in public information sessions presenting details on the Sunshine Coast University Hospital.</td>
<td>Progressing</td>
</tr>
</tbody>
</table>

Other

The council has been maintaining a keen interest and providing input into District Health Service Planning activities. As well as activities relating to the new hospital, the council has also had a focus on health hub development issues and concerns regarding timely construction and adequate bed numbers, ability to recruit adequate clinical staff to meet future requirements, location of buildings and ease of patient access to the hospital site, ease of access by emergency vehicles and by private vehicles in an emergency situation, proximity to railway station to hospital site and sufficient onsite parking to adjust to future needs.
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, Sunshine Coast 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>Reports considered</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>Council receives a comprehensive monthly report that details patient activity data across the district and a range of performance indicators. Reports include: complaints management; management of clinical incidents and sentinel events; Variable Life Adjusted Display Data (VLADs); credentialing and privileging; and clinical risk management.</td>
<td>Monthly</td>
<td>Discussions flowed from the reports regarding waiting times for surgery and recruitment of specialists, sick leave and workload, follow-up of adverse media coverage.</td>
</tr>
<tr>
<td>On a quarterly basis the Council receives a rotational presentation of patient safety and quality information.</td>
<td>Monthly</td>
<td>The Council provided feedback, encouragement and recognition as appropriate.</td>
</tr>
<tr>
<td>Qualitative information is provided on service delivery issues including new or expanded services and other related issues of interest including capital works progress.</td>
<td>Monthly</td>
<td>The Council provided feedback, encouragement and recognition as appropriate.</td>
</tr>
</tbody>
</table>

| Other | Nil |

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Sunshine Coast Health Community Council Annual Report 2007-08
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, Sunshine Coast Health Community Council did not undertake specific activities to enhance community education about public health services. The council determined that it was appropriate that they focus on their own education prior to engaging with broader community education initiatives. A comprehensive induction program for council members was developed and included an overview of clinical governance, complaints management, management of clinical incidents and sentinel events, VLADS, credentialing and privileging, clinical risk management.

This background assisted council members in their reviews of the monthly and quarterly reports. Discussions flowed from the reports regarding waiting times for surgery and recruitment of specialists; sick leave and work load; follow up of adverse media coverage. No specific recommendations have been made.

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.