

Administration

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Our commitment to service

NSW Health is committed to providing the people of NSW with the best possible health care. Our commitment to service explains what you can expect from the public health system as an Australian resident, no matter who you are, or where you live in NSW.

Standards of service

NSW Health will:

- | Respect your dignity and needs
- | Provide care and skill, in keeping with recognised standards, practices and ethics
- | Offer access to a range of public hospital and community-based health services. Eligibility criteria apply to some services
- | Offer health care based on individual health needs, irrespective of financial situation or health insurance status.

Medical records

Generally, people can apply for access to personal health information or other personal information relating to them. Access should be requested from the clinical information department or manager of the health service the person attended, or the head of the organisation that collected the personal information.

A Freedom of Information (FOI) application may also be lodged, requesting access to records. Access may not be granted in special circumstances, as determined by the *Freedom of Information Act 1989*.

Records are kept confidential and are only seen by staff involved in the care and treatment of the person, except where disclosure to third parties is required or allowed by law.

Treatment services

NSW Health will:

- | Allow for and explain public and private patient treatment choices in a public hospital
- | Clearly explain proposed treatments, such as significant risks and alternatives, in understandable terms
- | Provide and arrange free interpreter services
- | Obtain consent before treatment, except in emergencies, or where the law intervenes regarding treatment
- | Assist in obtaining second opinions.

Additional information

NSW Health will:

- | Allow people to decide whether or not to take part in medical research and health student education (although in some circumstances, information may be used or disclosed without consent, for public interest research projects. Strict conditions apply, including privacy legislation).
- | Respect a person's right to receive visitors, with full acknowledgement of culture, religious beliefs, conscientious convictions, sexual orientation, disability issues and right to privacy.
- | Inform a person of his or her rights under the *NSW Mental Health Act 2007*, if admitted to a mental health facility.

Applications for financial assistance towards travel and accommodation costs, incurred by patients who are disadvantaged by distance and who have to travel more than 100 km (one way) to access specialist medical treatment not available locally, can be made to the Transport for Health program in the area health service where they live. Contact details for the Transport for Health offices can be accessed via the NSW Health web site.

Consumer participation

NSW Health Care Advisory Council

The NSW Health Care Advisory Council (HCAC) is the peak community and clinical advisory body providing advice to the Minister for Health and the Director-General. It is co-chaired by Rt Hon Ian Sinclair, AC and Professor Judith Whitworth, AC.

The council met five times in 2008-09 and provided advice on the following priority issues:

- | Special Commission of Inquiry into Acute Care Services NSW Public Hospitals
- | Clinical Service Redesign Program evaluation second report
- | National registration and accreditation scheme
- | NSW Health Obesity Strategy and NSW Government Plan for Preventing Obesity in Children, Young People and their Families 2008-2011
- | Population Health Strategies for Aboriginal Communities in NSW
- | The NSW Mini-budget
- | Final Report of the Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals
- | Australian Health Care Agreement - Council of Australian Governments
- | Final Report of the Special Commission of Inquiry into Child Protection Services in NSW
- | Addendum paper addressing primary and community care for children and young people with chronic disease and their transition to adult services
- | NSW Government Response to the Final Report of the Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals
- | NSW Government Response to the Final Report of the Special

Commission of Inquiry into Child Protection Services in NSW

- | Community Health Review
- | Interim report from the National Health and Hospital Reform Commission.

The HCAC newsletter promotes the outcomes and achievements from the health priority taskforces and the HCAC to their membership and broader health networks. Produced as a quarterly publication in print and electronic form, the first issue was published March 2008.

Each edition profiles one of the taskforces in-depth, as the "In Focus" segment to highlight important issues relevant to them, promote resources developed and advise on future projects. Taskforces also contribute with guest editorials and updates on key activities. The four newsletters published in 2008-09 contained the following articles:

September 2008

Editorial: Rt Hon Ian Sinclair, AC & Professor Judith Whitworth, AC

In Focus: Sustainable Access Health Priority Taskforce

Guest editorial: Chronic, Aged and Community Health Priority Taskforce

December 2008

Editorial: Minister for Health, Hon John Della Bosca MLC

In Focus: Critical Care Health Priority Taskforce

Guest editorials: NSW General Practice Council, Maternal and Perinatal Health Priority Taskforce

March 2009

Editorial: Director-General NSW Health, Professor Debora Picone, AM

In Focus: Rural and Remote Health Priority Taskforce

Guest editorial: Population Health Priority Taskforce

June 2009

Editorial: NSW Minister for Health, Hon John Della Bosca MLC

In Focus: Children & Young People's Health Priority Taskforce

Guest editorials: *Keep Them Safe: A Shared Approach to Child Wellbeing,*
Caring Together: The Health Action Plan for NSW



Health Priority Taskforces

Health priority taskforces (HPTs) provide advice to the Director-General on policy directions and service improvements in each of the high-priority areas of the NSW health system.

There were ten HPTs operating in 2008-09:

- | *Aboriginal Health* - Provides direction and leadership and develops agreed positions relating to Aboriginal health policy, strategic planning and broad resource allocation issues.
- | *Children and Young People's Health* - Facilitates provider and consumer leadership of children and young people's health services.
- | *Chronic Aged & Community Health* - Provides access to information on patient/carer/clinician/population, access to and implementation of appropriate integrated care, funding and workforce.
- | *Critical Care* - Responsible for critical care services planning.
- | *Greater Metropolitan Clinical Taskforce* - Supports the clinical service network and evolving groups such as acute aged care and gynaecological oncology.
- | *Maternal & Perinatal* - Provides direction and leadership for NSW maternal and perinatal services.
- | *Mental Health* - Responsible for prevention, early recognition, early intervention and promotion and acute care.
- | *Population Health* - Focuses on strategies and actions that support ten new directions for population health gain in NSW.
- | *Rural and Remote Health* - Monitors the implementation of the NSW Rural Health Report and NSW Rural Health Plan.
- | *Sustainable Access* - Responsible for the review of the waiting list policy, predictable surgery program, patient journeys and emergency department performance targets.

Information Management & Technology changed its name to Information, Communications and Technology HPT in 2007. It did not meet in 2008, pending HCAC & HPT review recommendations. A health priority taskforce for Workforce has not been convened.

Area Health Advisory Councils

There are eight area health advisory councils (AHACs), one for each area health service and one for the Children's Hospital at Westmead. They advise chief executives on policy, planning and delivery of health services.

Each council includes people who have experience in the provision of health services, representing the interests of consumers, health services and the local community. At least one member must also have knowledge, expertise or experience of Aboriginal health.

Councils submit an annual report to the Minister for tabling in Parliament. Council chairs and chief executives also participated in two area health advisory council forums, to discuss common issues and challenges, including consumer and clinician engagement.

In May 2009, a convention further supported the work of the councils. AHACs have a lead role in the implementation of the Government Response to the Special Commission of Inquiry into Acute Services in NSW Public Hospitals, *Caring Together: The Health Action Plan for NSW*. The convention provided an opportunity for NSW Health to outline this enhanced function and to assist council members in their role of developing and monitoring local implementation plans. The program was designed to:

- | Consult AHACs on the implementation of *Caring Together*
- | Identify new ways to support and facilitate relationships between AHACs, clinicians, consumers and area health service executives for improved performance.



Disability action plan

Disability action plan

The Department of Health aims to create an inclusive workplace and harness the contribution and potential of all people, including those with a disability. To this end its Disability Action Plan is being reviewed and will focus on enhanced strategies to achieve these objectives.

Some current initiatives to facilitate the experience of people with a disability within the department are listed below:

- | The learning and development (L&D) program plays an important role in raising disability awareness, by providing information on anti-discrimination concepts and guidelines and by fostering an inclusive workplace culture. Courses that address these issues include induction/orientation, staff selection techniques and various management and leadership programs. Disability awareness training has also been scheduled for August 2009.
- | The department's coaching and performance system (CAPS) assists managers and employees to identify learning and development needs and opportunities to access professional development programs. This is an important development tool for employees with a disability.
- | People with a disability and their carers may access flexible work arrangements provided through the department's flexible working hours agreement.
- | A workplace adjustments process is available for employees requiring modifications to their workstation or surrounding environment.



Equal employment opportunity

The Department of Health has a strong commitment to equal employment opportunity (EEO) and recruits and employs staff on the basis of merit. This provides a diverse workforce and a workplace culture where people are treated with respect.

Significant EEO outcomes for 2008-09 appear below:

- | A positive statistical representation of women. Currently 62 per cent of the department's employees are women, including representation on its management board and among its senior officers.
- | Journey of Healing activities organised by a department-wide team, including a traditional smoking ceremony, accompanied by singing and didgeridoo playing.
- | Disability awareness training for employees of the department and allied health organisations.
- | A well-attended International Women's Day function, with presentations by key female employees, including:
 - | a NSW Public Sector Fast-track graduate
 - | an experienced and valued employee commenting on her positive experience in accessing the department's flexible working arrangements for maternity leave and child care

- | the recipient of the 2009 Margaret Samuel Memorial Scholarship for Women.

UNIFEM ribbons were also available, with funds raised donated to their Pacific Market project.

Equal Employment Opportunity Management Plan 2009-10

The following activities are proposed for the 2009-10 EEO management plan:

- | Review and consolidate existing relevant policies and processes across the Department of Health to achieve improved employment access and participation by EEO groups
- | Collect accurate EEO data to monitor benchmarking and performance improvement activities
- | Using the department's computerised human resource information system as an effective tool for EEO reporting
- | Promoting the employment of people from diverse equity groups.

A. TRENDS IN THE REPRESENTATION OF EEO GROUPS

EEO GROUP	BENCHMARK OR TARGET	PERCENTAGE OF TOTAL STAFF							
		2002	2003	2004	2005	2006	2007	2008	2009
Women	50	59	59	60	63	62	61	63	62
Aboriginal people and Torres Strait Islanders	2	1.5	2	2	2.8	1.6	1.1	1.08	1.26
People whose first language was not English	20	19	20	20	19	20	19.8	18.17	19.5
People with a disability	12	3	4	4	4	3	3.4	2.96	2.99

B. TRENDS IN THE DISTRIBUTION OF EEO GROUPS

EEO GROUP	BENCHMARK OR TARGET	PERCENTAGE OF TOTAL STAFF							
		2002	2003	2004	2005	2006	2007	2008	2009
Women	100	90	90	95	95	96	93	93	93
Aboriginal people and Torres Strait Islanders	100	94	n/a	n/a	n/a	n/a	n/a	96	95
People whose first language was not English	100	89	92	91	90	90	93	93	91
People with a disability	100	102	100	101	98	97	105	119	118

NOTE: Staff numbers are at 30 June, and exclude casual staff.

A Distribution Index of 100 indicates that the centre of the distribution of the EEO group across salary levels is equivalent to that of other staff. Values less than 100 mean that the EEO group tends to be more concentrated at lower salary levels than is the case for other staff. The more pronounced this tendency is, the lower the index will be. In some cases the index may be more than 100, indicating that the EEO group is less concentrated at lower salary levels. The Distribution Index is calculated by software provided by the Office of the Director of Equal Opportunity in Public Employment on Equal Employment Opportunity (ODEOPE).

Ethnic affairs priority statement

ACHIEVEMENTS 2008-09

GOAL	AREA HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENTS 2008-09
Keep people healthy	Greater Western	Transcultural Mental Health – well-being workshops	Workshops for Cantonese, Italian, Mandarin and Filipino communities provided education about well-being, awareness of mental health and access to mental health services.
	Hunter New England	Towards a Healthy Life – a CALD community health education project	<i>Towards a Healthy Life</i> is a health information and education project for people from culturally and linguistically diverse (CALD) backgrounds. It links them with health professionals who provide information they may not otherwise access. New groups for Thai and Mauritanian women and the Vietnamese community were established. Topics included family relationships (domestic violence), use of interpreters, use of medications, cervical health, stroke prevention, exercise and arthritis.
	North Coast	Rural and Remote Mental Health outreach project 2006-2009	A collaborative access and equity initiative for CALD communities in rural, regional and remote NSW, involving the Transcultural Mental Health Centre (TMHC), the Service for Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS), Refugee Health and Health Care Interpreter Services (HCIS) and the Centre for Rural and Remote Mental Health. It included mental health education and information, delivered in a range of languages and a spiritual leaders' mental health information session.
	Northern Sydney Central Coast	Refugee check-up program	A comprehensive check-up program for newly-arrived Tibetan humanitarian entrants continued. It is co-ordinated by the Multicultural Health Service, in partnership with Oral Health, Child and Family Health, Chest Clinic, STARTTS and local GPs and optometrists in the Northern Beaches area. 100 per cent participation rate in 2008-09.
	South Eastern Sydney Illawarra	Health information for newly-arrived refugees and migrants	Information about the Australian health system and services for refugee new arrivals, including Medicare, bulk-billing and Health Care card, medical appointments, immunisation, public hospitals.
		Multicultural men's health project	Provided a comfortable setting for long-term unemployed and retrenched men over 55 years from CALD (including Portuguese, Spanish, Greek and Serbian) backgrounds to meet and to develop employment skills, reduce isolation and improve knowledge about men's health issues.
	Sydney South West	Waterpipe tobacco awareness campaign	Raised awareness in the community of the harms of waterpipe tobacco smoking, as well as the legal requirements for waterpipe tobacco retailers. The campaign targeted Arabic-speaking health and welfare professionals and was supported by fact sheets and newspaper and radio advertising.
		Cycling Connecting Communities – Vietnamese cycling	A family cycling adventure for the Vietnamese community, in partnership with Fairfield Council, Canley Heights Community Health Centre and Western Sydney Cycling Network. A Vietnamese language promotional flier went to all Vietnamese shops/businesses in Cabramatta, Canley Vale and Fairfield. A cycling education session targeted members of the Vietnamese Women's Association.
	Sydney West	Midnight Basketball program	Collaboration between the area's youth health services, Midnight Basketball Australia and Auburn City Council provided drug and alcohol and nutrition education and related messages to young people. A large proportion of the audience was from CALD, particularly African, backgrounds, living in the Auburn area.
		CALD Communities Eat Smart – Go for 2 & 5 project	A 'CALD Communities Eat Smart – Go for 2 & 5' event in August 2008, promoted good nutrition and other healthy lifestyle messages for protection against heart disease, some cancers, diabetes and obesity. Over 100 people from CALD backgrounds, including Chinese, Korean, Arabic, Indian and Iranian, attended.

ACHIEVEMENTS 2008-09

GOAL	AREA HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENTS 2008-09
Keep people healthy	Sydney West	Multicultural Problem Gambling Service poster	Partnership between the Multicultural Problem Gambling Service and the Australian Hotels Association (NSW) developed a large multilingual poster display in hotel gaming rooms across NSW. In 20 languages it promotes free treatment services. They include a facility to enable problem gamblers to exclude themselves from hotels in their area and the offer of face-to-face counselling in more than 40 different languages.
Deliver high quality services	Greater Western	Interpreter services	An information package 'How to Access the Health Care Interpreter Services' was distributed across the health service. Health Care Interpreter Service training for clinical staff continued across the area. Contact details for the interpreter service are on the health service's web page.
	Hunter New England	Inpatient visits to people from CALD backgrounds: John Hunter, Royal Newcastle and Belmont hospitals	CALD inpatients in these hospitals increased by 786 during 2008-09. The multicultural health liaison officer visited 63 per cent of the patients, exceeding the benchmark of 60 per cent. Visits include audit of medical charts to check staff compliance with NSW Health procedures. There was 99 per cent compliance. Visits also assessed patients' on-going needs after discharge. Support was offered where needed.
	North Coast	Refugee health clinic	Delivers comprehensive health assessment for newly-arrived humanitarian entrants and provides ongoing health care for refugees unable to access mainstream services.
	Northern Sydney Central Coast	Healthy Restaurant - Healthy Workers project	Raised awareness among restaurant workers about tobacco-related harm and quit smoking programs. It included messages for the community, restaurant owners, service providers, Chinese Quitline, scripts for radio interviews and advertisements and a marketing campaign with Chinese newspapers and local media.
	South Eastern Sydney Illawarra	Cultural competence workshops	Delivered to four HIV/STI services the HIV community team, Albion Street Centre, Sydney Sexual Health Centre and Kirketon Road Centre to promote better access to these services by people from CALD backgrounds.
	Sydney South West	Breastfeeding support services	An audit of breastfeeding support services available for groups at risk of low breastfeeding rates, including women from CALD backgrounds, was conducted.
	Sydney West	"Having a Baby in Australia"	The "Having a Baby in Australia, We Speak Your Language" CD was played to CALD women from 36 weeks gestation onward, in the women's health clinic and birth units at Westmead and Auburn. It has been distributed to all SWAHS maternity services and been widely promoted nationally.
"Myths of Gaming Machines"		A fact sheet, "Myths of Gaming Machines", developed for people from CALD backgrounds, was translated into Arabic, Bosnian, Chinese, Croatian, Farsi, Greek, Indonesian, Italian, Korean, Macedonian, Maltese, Polish, Portuguese, Serbian, Spanish, Tagalog, Turkish and Vietnamese.	
Provide the health care people need	Greater Western	Transcultural Mental Health forum – "Connecting with our Communities"	Promoted improved inter-sectoral links, strengthened agencies' knowledge of CALD-related issues and the system's capacity to meet the special service needs of this population.
	Hunter New England	MOMS (Mums, Obstetrics & Multicultural Service) Maitland Hospital	Provided support to CALD pregnant women by phone, email and home visits. Midwives offer the program to women who attend the clinic. It aims to reduce women's isolation and improve their understanding of obstetric and postnatal care and early parenting skills. It also links women with other mothers from similar backgrounds and with other agencies.
	North Coast	Transcultural Rural and Remote outreach project 2006-2009	A collaborative access and equity initiative for CALD communities in rural, regional and remote NSW, involving the Transcultural Mental Health Centre (TMHC), the Service for Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS), Refugee Health and Health Care Interpreter Services (HCIS) and the Centre for Rural and Remote Mental Health. It provides workforce development for mental health clinicians and local service providers on the needs of CALD clients and education and information on mental health, including well-being workshops to CALD communities.
	Northern Sydney Central Coast	Outreach clinic	Provided at Dee Why Primary School by Northern Beaches Child and Family Health Services. Improved access to services for large number of parents and children from CALD backgrounds in the Dee Why area.
	South Eastern Sydney Illawarra	Well women's health program	Clinics offered breast and cervical screening and education and information on a range of women's health topics. Routine screening for domestic violence for all women. Over 40 per cent were from CALD or refugee backgrounds. Clinics connect women with services providing longer-term management and care. Community education sessions linked with other initiatives, including Macedonian/Arabic cross-cultural work, Spanish women's project and TAFE community college English language classes, community organisations and St George Migrant Resource centre.

ACHIEVEMENTS 2008-09

GOAL	AREA HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENTS 2008-09
Provide the health care people need	Sydney South West	Food security project - Warwick Farm, Villawood	Collaboration between the health service, Fairfield Council, STARTTS and TAFE involved extensive range of activities to raise awareness about good nutrition and food security. They included workshops on healthy eating and exercise for parents at Warwick Farm Primary School and quarterly community newsletter and other health information in major community languages. Courses at TAFE colleges and local community centres, community events and community kitchens to promote healthy eating skills. Other events included a breakfast club at Villawood East Public School and the New Life New Land project that teaches refugees horticultural skills.
	Sydney West	Clinical pathways for women who experience adverse health impacts from female genital mutilation (FGM)	Education program has established clinical pathways, involving two uro-gynaecologists and two psychosexual counsellors, for women who experience adverse health outcomes from FGM.
		Celebration of Culture – cultural days for women from communities which practise FGM	Over 350 women from seven communities, who had not previously had contact with the NSW FGM Program, responded to invitation to attend “A day of celebration and commitment to change”. They examined cultural practices across the globe which impact on women’s mental and physical health. They also examined teachings from two faith groups on the traditional practice of FGM and the NSW law prohibiting it.
Manage health services better	Greater Western	Community engagement	Greater Western Area Health Advisory Council has established a formal process to involve Bila Muuji Incorporated in service planning relevant to its members.
	Hunter New England	Better interpreter services in Royal Newcastle Hospital ambulatory care centre (ACC) and John Hunter Hospital Emergency Department (ED)	New protocols at Royal Newcastle Hospital ensure that patients needing an interpreter are identified more efficiently. Interpreters are now booked when appointment is made and patients given priority. Interpreters wait no more than 20 minutes. ACC displays multilingual signs and promotional material for multicultural events, campaigns, or health initiatives. John Hunter Hospital ED also ensures interpreters for clients who need them. Hands-free portables assist ED telephone interpreting.
	North Coast	Education and information for health professionals	Education for community, health professionals, medical students, GPs and school children, provided information tailored to each audience on a wide range of topics. They covered recovery from mental illness, refugee health care and services and interpreter services. Sexual safety, cross-cultural communication, translation for specialists, GPs and other health professionals were included, together with a presentation from the Drug and Alcohol Multicultural Education Centre.
	Northern Sydney Central Coast	ACHS accreditation	Northern Beaches Health Service received accreditation from the Australian Council on Health Care Standards (ACHS) to 2013. The service was commended for its approach to multicultural health issues.
	South Eastern Sydney Illawarra	Diversity walk-arounds program at St George Hospital	Diversity walk-arounds across 34 wards of St George Hospital over eight months during 2008-09 aimed to improve access to and use of interpreters, staff communications with people from CALD backgrounds and cultural awareness among staff. Knowledge of the implications that rules about visitors and visiting hours may have for particular cultural groups was stressed. Improvements include hands-free phones for interpreting, promotion of interpreter services among visiting medical officers, enhanced protocols to ensure that staff use interpreters whenever needed and know how to access relevant resources over the intranet.
	Sydney South West	NSW AIDS Program Statewide services review	Merger of the Transfusion-related AIDS Service with Multicultural HIV/AIDS and Hepatitis and relocation within Sydney South West Area Health Service, will provide better services to priority CALD populations.
	Sydney West	Multilingual signs	Interpreter service and multilingual signs have been installed in all entrances and waiting rooms across all facilities in SWAHS.



PLANNED INITIATIVES 2009-2010

GOAL	AREA HEALTH SERVICE	PROJECT/INITIATIVE	PLANNED FOR 2009/10
Keep people healthy	Greater Western	Health services for the Sudanese community in Orange	Examine the special health care needs of the Sudanese community in Orange.
	Hunter New England	Bringing health services to the abattoirs	Collaboration between Tamworth abattoirs, Transcultural Rural Mental Health Service, Hunter New England Mental Health and Multicultural Health services and the "Pit Stop" men's health program, will provide outreach health promotion and basic health checks for workers at Tamworth abattoirs.
	Northern Sydney Central Coast	Resource production	Tibetan language DVD on how to access local health services, produced by Multicultural Health Service, will include information on emergency services, oral health, child and family health, women's health and lifestyle issues, such as healthy eating and physical activity.
	South Eastern Sydney Illawarra	Antenatal education for refugee women	Antenatal education sessions using interpreters, will help pregnant refugee women understand birthing options and procedures, so they can exercise informed choices for birthing and early childhood.
		Multicultural youth project "Talking Tactics Together"	A school-based drug and alcohol prevention program will focus on young people from Arabic, Macedonian and Serbian backgrounds. It will train bilingual facilitators to organise specific-language workshops for parents and young people.
	Sydney South West	Pilot playground markings in primary school in Fairfield	Playground markings will be used to increase physical activity of primary school students in Fairfield, which has a high proportion of children from CALD backgrounds.
		Healthy eating and physical activity at supported playgroup	Pilot project will establish a supported playgroup in inner western Sydney - which has a high proportion of CALD clients - to promote healthy eating and physical activity.
	Sydney West	Antenatal classes for southern Sudanese	Classes will target isolated and hard-to-engage Sudanese women who attend antenatal clinic.
Deliver high quality services	Greater Western	Interpreter services	E-learning tool for 'How to Access Health Care Interpreter Services' education package, will improve staff access to training material and compliance with interpreter procedures.
	Hunter New England	Rewriting the ED pathways at John Hunter Hospital	Clinical nurse specialist will review and revise ED pathways and all documentation about use of interpreters and CALD patients. This will increase onus on staff to ensure that interpreters are used when required.
	Northern Sydney Central Coast	Discharge process	Discharge/transfer protocol at Royal North Shore and Ryde Health Service will be reviewed to identify patients who require interpreter service.
	South Eastern Sydney Illawarra	'Quickscreen' falls-risk assessment	Community health staff will be trained to use 'Quickscreen' falls-risk assessment tool to identify and refer for assessment, older CALD people at risk of falling. Falls-risk assessment tests will be adapted to suit clients who may not have good literacy in their native language. An example is converting the written English visual acuity test to a pictorial version and using interpreters.
	Sydney South West	Hepatitis C – Vietnamese DVD	Existing audiovisual resource that informs people with low, or poor literacy, about hepatitis C treatment and care, will be translated into Vietnamese.
	Sydney West	Introduction of e-orders for interpreters bookings	Health Care Interpreter Service will continue to develop capacity for all outpatient departments to place e-orders for interpreters.

PLANNED INITIATIVES 2009-2010

GOAL	AREA HEALTH SERVICE	PROJECT/INITIATIVE	PLANNED FOR 2009/10
Provide the health care people need	Greater Western	Health newsletter	Bathurst Neighbourhood Centre will be assisted to produce a health newsletter for the CALD community in Bathurst.
	Hunter New England	Telephone interpreting	Digital cordless answering systems with two handsets, will be set-up in emergency departments, day clinics and delivery suite to facilitate telephone interpreting.
	North Coast	Carers support program	Information and assistance on health services and hospital system will be provided to Sudanese community.
	Northern Sydney Central Coast	Access to telephone interpreter service	Hands-free dual handset telephones for emergency and maternity departments and community health services will improve access to telephone interpreting services.
	South Eastern Sydney Illawarra	Cordless speaker phones for interpreter use	Launch and set-up portable cordless speaker telephone handsets for interpreter service throughout facilities.
	Sydney South West	Oral health pilot project - High Street Youth Health Service	Dedicated oral health clinic for Afghan women and children in collaboration with Auburn Youth Centre.
Manage health services better	Greater Western	Review of Greater Western Strategic Plan	Review and update strategic plan to strengthen health of CALD populations.
	Hunter New England	End-of-life planning	Research into end-of-life decision-making among CALD communities will complement similar study for English-speaking community.
	Northern Sydney Central Coast	Promotion of health care interpreters	Effective use of interpreters will be promoted by newsletters and promotional material, including stickers denoting patient's need and monitoring uptake of Health Care Interpreter Service training by clinicians.
	South Eastern Sydney Illawarra	Diversity management leadership training	Training at Royal Hospital for Women will make staff aware of cross-cultural communication and issues. Diversity plan will be developed to integrate cultural awareness within services.
	Sydney South West	Identify emerging priority CALD community needs for HIV and hepatitis C services	Monitoring infection rates and trends of HIV and hepatitis C among CALD populations, including humanitarian efforts to improve service delivery to these groups.
	Sydney West	Web page for chest clinic clients	Dedicated web site will enable chest clinic to post information and educational material in all languages online. Improve community access to information and linkages with other related sites.

Human resources

The Corporate Personnel Services Unit (CPS) within Workplace Relations and Management Branch is responsible for developing, implementing and evaluating a broad range of human resource initiatives.

NSW Health requires a workforce that is highly qualified, flexible, innovative and effective. CPS works toward positioning the department as an employer of choice and successful in attracting, developing and retaining the quality staff it needs to fulfil its function for the wider public health system.

CPS provides comprehensive human resource management services, including expert advice on organisational design, staffing needs and conditions of employment, staffing issues such as equity, professional development, performance management, grievance resolution and industrial relations issues. CPS provides a range of services to management and staff, including recruitment, learning and development, salaries, occupational health and safety, workers compensation and rehabilitation, job evaluation and establishment.

CPS also provided extensive organisational development support throughout the department, including:

- ▮ Training and coaching services to management and staff
- ▮ Managing restructuring consultations and negotiations with employee representative organisations
- ▮ Advising management on structures and transitional processes
- ▮ Providing advice and assistance in developing and evaluating new position descriptions
- ▮ Managing redeployment and recruitment processes
- ▮ Information for managers and staff on new award conditions.

Seven joint consultative committee (JCC) meetings were held throughout the year. These are a productive forum for consultation between management, staff and unions on a wide range of matters affecting the department's employees.

Achievements

- ▮ Contributed to the *NSW Public Sector Workforce Strategy 2008-2012*, by employing three Fast-track graduates in the Department of Premier and Cabinet's 2009 program, adding to the two graduates employed in the previous year. This initiative contributes to diversifying the age and skills mix of the organisation and helps increase the number of young people within the NSW public sector.
- ▮ Partnered with managers and staff to raise awareness of the department's Coaching and Performance System (CAPS). This has a positive flow-on effect for CPS, reducing grievances and building a stronger workplace culture based on goal alignment, work plans, professional development and coaching.
- ▮ Effective management of workers compensation claims, with less work time being lost.
- ▮ Initiatives to achieve savings of 1.5 per cent from the Savings Implementation Plan.
- ▮ NSW Health achieved accreditation as a breastfeeding-friendly workplace.

Industrial relations policies and practices

The department has maintained a harmonious industrial relationship with staff and unions throughout the year. There have been no industrial disputes.

The joint consultative committee (JCC) has adopted the principles of the Department of Premier and Cabinet's Consultative Arrangement Policy and guidelines. The JCC, consisting of department staff, officials and delegates of both the NSW Public Service Association and the NSW Nurses' Association, met seven times throughout the year. Department representatives and each of the unions in turn, chaired the meetings.

Matters discussed included restructuring of divisions and branches, devolution and realignment of branch functions, OH&S issues and the Cutting Red Tape Review.

Policies are regularly reviewed to ensure they remain current and relevant.

Learning and development

A comprehensive range of learning and development programs and services was provided to assist staff in achieving organisation goals and priorities and in developing their individual careers.

Approximately 30 course programs were available to employees each quarter, with the addition of new courses, including Accelerating Implementation Methodology, to help staff improve the success rate of their projects by overcoming personal and cultural barriers to change, Writing Cabinet Minutes and High Performance Memory.

NSW Health also participates in the NSW sector-wide executive development programs co-ordinated by the Department of Premier and Cabinet.

Awards and Scholarships

The department conducted staff awards and scholarships in 2008-09, including:

- | Quarterly staff awards for excellence
- | Margaret Samuel Memorial Scholarship for Women
- | Peter Clark Memorial Scholarship for Men

In 2008-09, departmental employees were recognised across the public sector, with both the NSW Service Medallion and the Public Service Medal.

Significant HR and OHS initiatives in the public health system

To support the implementation of the NSW Health Occupational Health, Safety and Injury Management Profile, the NSW Health Registered Training Organisation, in consultation with health services, the NSW Nurses' Association and WorkCover NSW, released a training package titled "Conducting an Audit using the NSW Health Occupational Health, Safety and Injury Management Profile". The aim is to ensure that there are sufficient numbers of adequately qualified OHS profilers to meet the NSW Health auditing requirements.

Code of Conduct

NSW Health has published a code of conduct to assist staff by providing a framework for day-to-day decisions and actions while working in health services. Specifically, it:

- | States the standards expected of staff within health services in relation to conduct in their employment
- | Assists in the prevention of corruption, maladministration and serious and substantial waste, by alerting staff to behaviour that could potentially be corrupt or involve maladministration or waste
- | Provides a resources list to assist staff to gain further information or more detailed guidance

The Code of Conduct was published in 2005. There were no amendments or additions in the reporting period.

Further information on the NSW Health Code of Conduct is available from the Corporate Personnel Services Branch. The complete document is available on the NSW Health web site.



NSW Health workforce

Significant Workplace Relations Matters

During the early part of the 2008-09 reporting period, the major focus was on the conclusion of memorandums of understanding (MOUs) with the main health unions and the implementation of agreed changes, through variations to industrial awards and related policies.

During the reporting period the Health Services Union's work value and special case claim for ambulance officer awards proceeded before the Industrial Relations Commission (IRC). On 12 September 2008, the IRC brought down its decision, adopting the department's proposed classification structure, but also creating a third additional pay point for paramedic specialists. The IRC awarded increases in the range of 8.5 per cent to paramedics (the largest classification, formerly called ambulance officers), through to 15 per cent for clinical training officers, district officers and superintendents. There were numerous and extensive changes to conditions of employment of ambulance officers, particularly relating to rosters and meal penalties.

Under the 2008-10 MOU with the NSW Nurses' Association, the association was provided with leave to make application to the IRC for increases to night shift penalties and salary increases for experienced nurses (registered nurse year 8 and above). The nurses' claim was heard by a full bench of the IRC in the first two weeks of May 2009. The decision remains reserved.

In settlement of a dispute before the IRC, an agreement was reached between the department and the Australian Salaried Medical Officers' Federation (ASMOF) about emergency physicians. In line with a recommendation of the IRC, emergency physicians were provided with a 25 per cent allowance for three years, from the first full pay period on or after 15 May 2009. The allowance is subject to meeting specified conditions about working arrangements and participation in initiatives arising from the report of the Garling Special Commission of Inquiry.

Other ongoing work is being undertaken to give full effect to the Government's response to the Garling Inquiry, through the creation of new job roles, including the employment of clinical support officers.

Statewide Human Resource Policies released in 2008-09

Minimum Requirements for the Engagement of Overseas Funded International Medical Graduates (PD2009_036)

Sets out the minimum requirements for the engagement of overseas funded international medical graduates in the NSW public health system, including assessment of competence, employment screening, checks, letters of offer, written agreements with the overseas funding body, supervision and record-keeping. It also provides guidance on indemnity and insurance, professional registration and visa matters.

Staff Specialist/Visiting Practitioners Appointments (including clinical academics): Critical Actions Compliance Declaration (PD2008_060)

Outlines responsibilities for ensuring that particular critical actions are completed during the selection and appointment process and signed-off as completed, prior to start of work.

Cytotoxic Drugs and Related Waste: Safe Handling in the NSW Public Health System (PD2008_059)

Outlines safe handling of cytotoxic drugs and related waste, agreed WorkCover notification requirements for the use of cyclophosphamide and the requirement to ensure that the WorkCover guideline is to be its primary source of guidance when implementing this policy directive.

ChemAlert Chemical Information Management System – Implementation (PD2009_006)

Outlines the requirement for the public health system to use the ChemAlert system as its chemical register and to ensure that all hazardous substances and dangerous goods are entered onto the system. It also outlines requirements for system governance, administration, staff access and use and the management of information on the system.

Occupational health and safety

NSW Health is committed to ensuring the health, welfare and safety of staff and visitors to the workplace.

Highlights

The following occupational health and safety (OH&S) initiatives were implemented during 2008-09:

- | Review and audit of workplace safety and injury management systems took place as per *Working Together – The Public Sector OH&S and Injury Management Strategy for 2005-2008*
- | Review of first aid personnel ensured that their certificates are current and in compliance with OH&S legislation
- | The OH&S committee met bi-monthly to consult managers and union representatives on behalf of staff, on strategies for managing and improving workplace health and safety.
- | New members of the committee obtained certification in OH&S consultation
- | The OH&S co-ordinator provided training for staff in ergonomic workstation set-up during Safe Work Australia Week and promoted involvement in healthy initiatives, such as Walk to Work and Ride to Work
- | The department's induction program provided an opportunity for the OH&S co-ordinator and the chair of the OH&S committee to inform staff and managers of workplace health and safety and risk management initiatives and to advocate the department's OH&S mission statement, promoting health and safety as *"Everybody's Responsibility"*.

Strategies to improve occupational health and safety include:

- | Ongoing commitment to achieving the objectives of the department's OH&S mission statement
- | Implementation of a healthy lifestyle program for employees to promote general health and well-being
- | Ongoing consultation with staff on issues affecting and promoting health and safety in the workplace
- | Ongoing commitment to promoting risk management and injury prevention strategies
- | Promotion of the department's employee assistance program and other resources available to employees.

Workers compensation

In accordance with *Workers Compensation Act 1987* and *Workplace Injury Management and Workers Compensation Act 1998*, the NSW Department of Health provides access to compensation, medical assistance and rehabilitation for an employee who has sustained a work-related injury.

The department's injury management process delivers effective return-to-work programs, with a view to returning staff to pre-injury duties as quickly as possible. The capacity to provide suitable duties and gradual return-to-work programs is reflected in the reduction/minimisation of work time lost. Ongoing consultation with stakeholders takes place, to review the management of existing claims.

The department continued to participate in *Working Together – The Public Sector OH&S and Injury Management Strategy for 2005-2008*, conducting a review and audit of workplace safety and injury management systems.

The department managed 21 new workers compensation claims during 2008-09. Two were declined by the insurer. The greatest number was for falls, slips and trips - a total of nine (one of nine in 2007/2008).

While the number increased, 10 of the 21 (48 per cent) occurred outside the department's building and consisted of journey and recess claims.

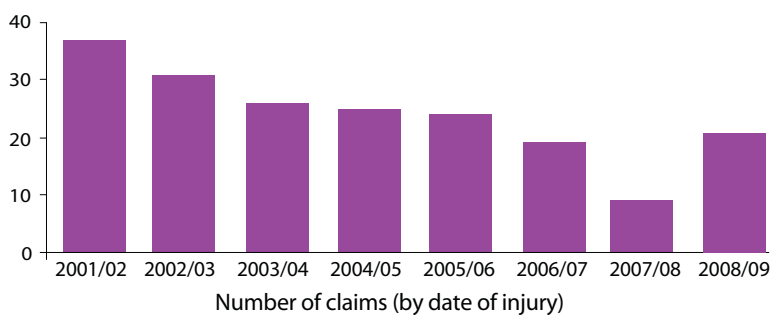
Strategies to improve workers compensation and return-to-work performance include:

- | Implementation of strategies in line with *Working Together*, to reduce workplace injuries
- | Ongoing commitment to providing meaningful suitable duties to employees who sustain a workplace injury and provision of effective return-to-work programs
- | A focus on injury management strategies to aid timely return to work, maintaining regular contact with stakeholders throughout their claims
- | Regular review meetings between the department and the insurer to monitor claim activity and costs.



NSW Department of Health data

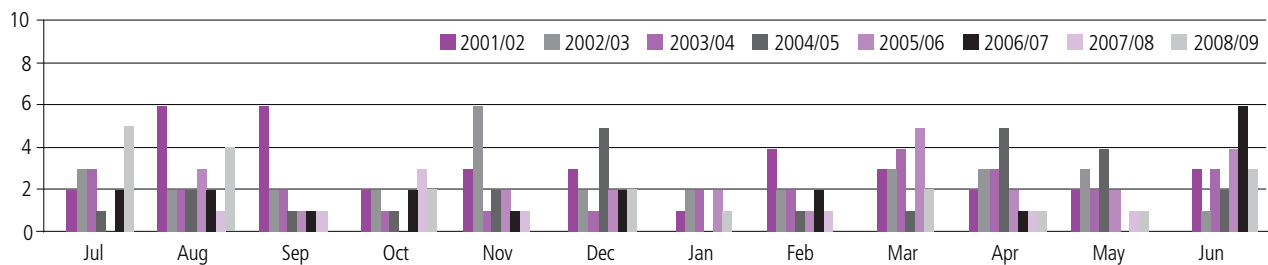
Number of new claims each year from 2001/02 to 2008-09 financial years



Year	Claims
2001-02	33
2002-03	31
2003-04	26
2004-05	25
2005-06	23
2006-07	19
2007-08	9
2008-09	21

(Claims data based on accepted claims as at 2007/08 financial year)

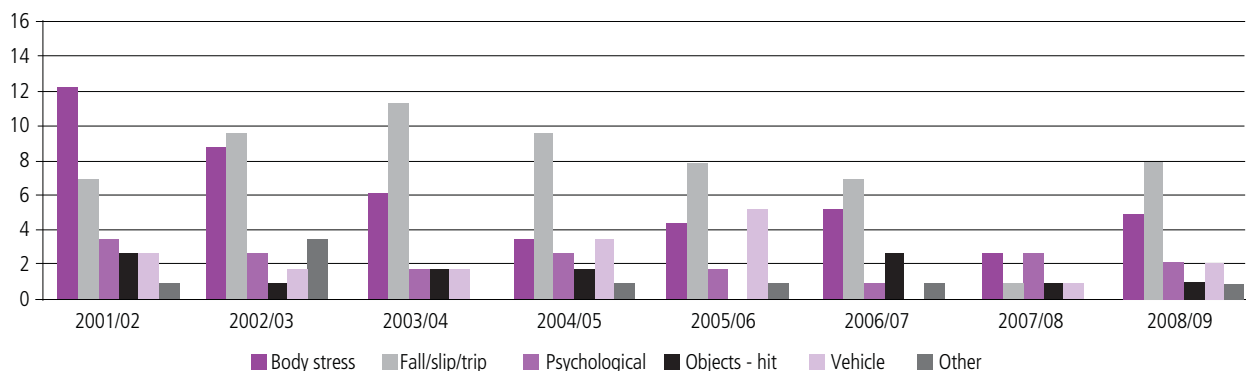
Claims each month from 2001/02 to 2008-09 financial years



Categories of workers compensation claims each month 2008-09 financial year

Injury/illness	Jul 08	Aug 08	Sep 08	Oct 08	Nov 08	Dec 08	Jan 09	Feb 09	Mar 09	Apr 09	May 09	Jun 09	TOTAL
Body stress	3	2	-	-	-	-	-	-	-	-	-	-	5
Fall/slip/trip	1	2	-	-	-	-	-	-	2	1	1	1	8
Psychological	-	-	-	1	-	-	1	-	-	-	-	-	2
Objects - hit	1	-	-	-	-	-	-	-	-	-	-	-	1
Vehicle	-	-	-	1	-	1	-	-	-	-	-	2	4
Other	-	-	-	-	-	-	-	-	-	-	-	-	1
Total	5	4	0	2	0	2	1	0	2	1	1	3	21

Categories of workers compensation claims from 2001-02 to 2008-09 financial years



Categories of workers compensation claims from 2001-02 to 2008-09

YEAR	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09
Body stress	14	10	7	4	5	6	3	5
Fall/slip/trip	8	11	13	11	9	8	1	8
Psychological	4	3	2	3	2	1	3	2
Objects - hit	3	1	2	2	0	3	1	1
Vehicle	3	2	2	4	6	0	1	2
Other	1	4	0	1	1	1	0	1
Total	33	31	26	25	23	19	9	21

Overseas visits

BY DEPARTMENT OF HEALTH STAFF 2008-09

The schedule of overseas visits is for NSW Department of Health staff. The reported instances of travel are those sourced from general operating funds or from sponsorship arrangements, both of which require departmental approval.

Christie, Louis – Director, Emergency, Greater Western AHS
Contract management & support of overseas recruitment services for health professionals
London, England
General Funds

Fellows, Lorraine – JMO Manager, South Eastern Sydney Illawarra AHS
Inaugural conference of the College of Emergency Medicine & British Medical Journal Careers Fair. Interviews
London / Berlin / Amsterdam - Europe
General Funds

Gavel, Paul – Director, Workforce Planning, Sydney South West AHS
Contract management & support of overseas recruitment services for health professionals
Ireland / England
General Funds

James, Greg – President, Mental Health Review Tribunal
International Society for the Reform of Criminal Law conference
Dublin, Ireland
General Funds

Machiraju, Rama – Project Officer, Cancer Institute NSW
Sixth Australasian Conference on Safety and Quality in Health Care
Christchurch, New Zealand
General Funds

Morrison, Moira – JMO Manager, Nepean Hospital
Contract management & support of overseas recruitment services for health professionals
Ireland / England
General Funds

Musto, Jennie – Manager, Population Health
NZ Food Safety Authority and NSW Food Authority meeting
Wellington, New Zealand
General Funds

O'Callaghan, Emer – Manager, Workforce Planning Hunter New England AHS
Attend career expos, conferences. Interview candidates
London / Berlin / Amsterdam – Europe
General Funds

Ramin, Geoffrey – Director, Emergency North Coast AHS
Contract management & support of overseas recruitment services for health professionals
London, England
General Funds

Taitz, Jonny – Director, Clinical Operations South Eastern Sydney Illawarra AHS
Contract management & support of overseas recruitment services for health professionals
London, England
General Funds

Taylor, Lee – Manager, Population Health, NSW Health
Inaugural meeting of the International Data Linkage Consortium & visit Oxford Record Linkage Study
London, England
General Funds

Thoms, Debra – Chief Nursing & Midwifery Officer
Attend conference of Australia & New Zealand Council of Chief Nurses
Keri Keri, Auckland, New Zealand
General Funds

Ward, Kate – Manager Population Health, NSW Health
Attend the Epidemic Intelligence Service conference & meetings
Atlanta, USA
General Funds



Privacy management plan

The department provides ongoing privacy information and support to the NSW public health system. The NSW Health Privacy Contact Officers network group met twice in 2008/ 2009 and has had input into:

- | The five-year statutory review of the *Health Records and Information Privacy Act 2002*
- | The start of the Health Records and Information Privacy (Accredited Chaplains) Regulation 2008 in October 2008. Publication of the Chaplaincy Services and Privacy Law Information Bulletin (IB2008_044)
- | Development of the NSW Health Online Privacy Training Program
- | The departmental review of privacy training in orientation for health service staff and agreement within the network group of a minimum standard for this training
- | The NSW Health Patient Rights and Responsibilities leaflet
- | Development of a privacy information leaflet for NSW Health staff.

The department's privacy contact officer has attended or presented to various groups or committees in 2008-09, including:

- | Presentation to the Combined Familial Cancer Clinic Meeting in November 2008
- | Presentation to the NSW Health Freedom of Information Officers' network meeting in March 2009
- | Presentation to Justice Health staff in April 2009
- | Attendance at the Electronic Health Record (EHR) Steering Committee meetings
- | Participation in the Health Care Records Policy Consultation Group and assistance in development of the Health Care Records Policy.

Internal review

Three applications for internal review were received by the department in 2008-09.

1. One was received in June 2008 and completed in August 2008. It related to the department's conduct about the *Health Records and Information Privacy Act 2002*.

The application was about a lack of information provided to the applicant regarding the electronic health record pilot program *Healthelink*. The findings of the internal review concluded that, while there was no breach of the requirements of the HRIP Act, more could have been done at the time of consultation to inform the applicant of the *Healthelink* program.

2. An application was received in December 2008 and completed in February 2009 relating to the department's conduct about to the *Privacy and Personal Information Protection Act 1998*.

The applicant had requested a copy of an investigation report held by the department into a recent grievance relating to the applicant. This was withheld. The applicant complained that her right to access information about herself under Information Privacy Principle 14 had been breached.

The internal review found that no breach had occurred. Reasons for withholding access were that department policies do not require a report of this nature be provided and PPIPA allows for information to be withheld, where the report contains personal information relating to other people, such as in this case. It was recommended that the applicant apply for access under the FOI Act.

3. A further privacy complaint relating to *Healthelink* was received in April 2009, but was later withdrawn.

Senior executive service

Number of CES/SES positions at each level within the Department of Health

SES Level	At 30 June 2009	At 30 June 2008
8	1	1
7	3	4
6	3	2
5	2	2
4	7	8
3	13	15
2	6	8
1	2	4
Total positions	37	44

Number of female CES/SES officers within the Department of Health

At 30 June 2009	At 30 June 2008
17	18



Senior executive performance statements

Professor Debora Picone, AM

Position Title: Director-General

SES Level: 8

Remuneration: \$411,770

Period in position: 2 years

Professor Picone achieved the performance criteria contained in her performance agreement.

Significant achievements in 2008-09

- | Ensured appropriate support and response to a range of reviews of and by NSW Health, including:
 - | The Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals
 - | The Special Commission of Inquiry into Child Protection Services in NSW
 - | The Joint Parliamentary Committee on the Health Care Complaints Commission's investigation into the factual circumstances surrounding the appointment of Dr Graeme Reeves
 - | Legislative Council Inquiry into the Program of Appliances for Disabled People (PADP)
 - | Legislative Council Inquiry into the management and operations of the Ambulance Service of NSW
 - | Legislative Council Inquiry into the Radium Hill uranium smelter site in Nelson Parade, Hunter's Hill
 - | Legislative Council Inquiry into overcoming Indigenous disadvantage in NSW.
- | Undertook extensive consultation required to inform the development of *Caring Together: The Health Action Plan for NSW*, the Government's response to the Special Commission of Inquiry into Acute Care Services in NSW Public Hospitals. This involved a close analysis of the report and recommendations. Around 12,000 people provided input, either face-to-face, via the web, in workshops or submissions. The Government accepted 134 of the 139 recommendations. Professor Picone has established clear accountabilities for implementation and continues to listen actively to local views, to inform real and sustainable change to improve patient care. She has established processes to ensure that staff from across NSW Health are being engaged in planning and delivery of strategies to deliver safe, high quality and compassionate health care for NSW communities.

- | Provided leadership through financial management of the \$13.2b health budget. Professor Picone is managing significant demand and budget issues, particularly as a result of wages pressure. She is working with Treasury and the Department of Premier and Cabinet on efficiency measures and with health services, to manage resources in light of continued increases in demand. Innovative and flexible solutions continue to be explored to improve business performance and cost management.
- | Continued to develop and implement models of care to provide safe and cost efficient services to be delivered both in the community and hospital-based. The Chronic Disease Management Office was established, to develop policy and Statewide plans for chronic and complex care, to guide action and decision-making across NSW Health.
- | Led five NSW State Plan priorities - meeting the majority of performance targets. There were over 2.4 million attendances at emergency departments. Triage benchmarks were achieved for categories 1, 2, 4 and 5. Significant effort is being made to improve the category 3 benchmark. The Director-General has also led strategies under the State Plan, to improve survival rates and quality of life for those suffering from chronic disease, through strategies that target common lifestyle risk factors. These include development of the *NSW Government Plan for Preventing Overweight and Obesity in Children, Young People and their Families 2009-2011* and the *Get Healthy Information and Coaching Service*.
- | Represented NSW Health and provided strategic direction and input into a range of high-level cross-jurisdictional and inter-agency forums, including the Australian Health Ministers' Advisory Council, which she chaired. An improved financial outcome for NSW was achieved under the National Healthcare Agreement and National Partnership Agreements.

Dr Richard Matthews

Position Title: Deputy Director-General, Strategic Development

SES level: 7

Remuneration: \$366,250

Period in position: 5 years

The Director-General has expressed satisfaction with Dr Matthews' performance throughout 2008-09.

Dr Matthews achieved the performance criteria contained in his performance agreements.

Significant achievements in 2008-09

- | Led the NSW Health response to the NSW Special Commission of Inquiry into Child Protection Services, including development and implementation of *Keep Them Safe: a shared approach to child wellbeing 2009-2014*.
- | Implementation of the new episode funding policy to drive improved efficiency in NSW public hospitals.
- | Led Health reform for NSW through the Council of Australian Governments' health reform process.
- | Led the renegotiation and implementation of the next Australian Health Care Agreement (2008/09-2012/13) for NSW.
- | Continued support to the Health Care Advisory Council, health priority taskforces, area health advisory councils and other key advisory bodies, including the General Practice Council, Ministerial Council on Hearing (MSC-H) and NGO Advisory Committee.
- | Provided strategic direction to the implementation of the Integrated Primary Health and Community Care Policy, including the establishment of after-hours GP clinics and the HealthOne NSW program.
- | Led development of the NSW Trauma Services Plan and Radiation Oncology Strategic Plan.
- | Established five new multi-purpose services at Bingara, Tingha, Merriwa, Warialda and Batlow.
- | Completed and published the Community Health Review, to stimulate consideration of the future of community health services in NSW.
- | Expanded the Aboriginal Maternal and Infant Health Service (AMIHS). There are 25 existing services and at 30 June 2009, 11 of these are newly-established.
- | Continued to drive the implementation of national mental health policy and the NSW mental health policy (Inter-agency Action Plan on Better Mental Health, New Directions in Mental Health).
- | Implementation of the *Mental Health Act 2007* and *Mental Health (Forensic Provisions) Act 1990*.
- | Continued leadership and management of the NSW Institute of Rural Clinical Services and Teaching.
- | Establishment of a new chronic disease management program to provide co-ordinated and enhanced care for older people with chronic and complex disease.

Dr Tim Smyth

Position Title: Deputy Director-General, Health Service Quality, Performance and Innovation

SES Level: 7

Remuneration: \$347,700

Period in position: 8 months

Dr Smyth achieved the performance criteria contained in his performance agreement.

Significant achievements in 2008-09

- | Successfully integrated three new branches into the division.
- | Led consolidation of multiple performance agreements for health services into integrated performance management framework, starting July 2009.
- | Co-ordinated health service operational planning and response to influenza pandemic.
- | Project-managed establishment of Bureau of Health Information.
- | Developed new funding model for planned surgery.
- | Appointed by Australian Health Ministers' Advisory Council as Commissioner, Australian Commission on Safety and Quality in Health Care.

Karen Crawshaw

Position Title: Deputy Director-General, Health System Support

SES Level: 7

Remuneration: \$358,830

Period in Position: 2 years

Ms Crawshaw has achieved the performance criteria contained in her performance agreement, which focus on strategic leadership in the areas of workforce, corporate and business services, assets and procurement, corporate governance, risk management, legal services and the Health legislative program.

The Director-General has expressed satisfaction with Ms Crawshaw's performance throughout this period.

Significant achievements in 2008-09

- | Led NSW's participation in development of the National Accreditation and Registration Scheme for Health Professionals.
- | Implementation of the new service check register, to improve pre-employment screening within NSW Health.
- | Promulgation of the NSW Health enterprise-wide risk management policy and framework.



- | Negotiation of wages agreements with health unions within Government policy parameters.
- | Oversight of the Health legislative program, including *Mental Health (Forensic Procedures) Act 2009* and the *Public Health (Tobacco Control) Act 2008*.
- | Led a program of Statewide improvements in financial management and procurement reform.
- | As executive sponsor of NSW Health's corporate IT systems program, oversaw substantial progress of a new payroll and employee services system.
- | Oversight of timely responses by NSW Health and its entities to summonses and requests issued by the Special Commission of Inquiry into Acute Care in NSW Public Hospitals.
- | Oversaw the provision of appropriate guidance to NSW Government departments regarding the response to pandemic (H1N1) 2009 influenza.
- | Oversaw the development of the *Public Health (Tobacco) Act 2008*, which started 1 July 2009.
- | Oversaw the inclusion of ambulance despatch information into PHREDSS. This system continues to provide the most up-to-date information on issues of public health concern.
- | Established the NSW Get Healthy Information and Coaching Service, the first of its kind in Australia.
- | Progressed planning for the first NSW Teen Dental Survey of 14 and 15 year olds.
- | Increased the percentage of NSW population with access to water fluoridation.
- | Implemented the Early Childhood Oral Health (ECOH) Program.

Dr Kerry Chant

Position Title: Deputy Director-General, Population Health and Chief Health Officer

SES Level: SES Level 6

Remuneration: \$309,788

Period in position: 5 months

The Director-General has expressed satisfaction with Dr Chant's performance in 2009 in the position of Deputy Director-General, Population Health and Chief Health Officer. Dr Chant achieved the performance criteria contained in her performance agreement.

Dr Chant had been acting in the position of Deputy Director-General, Population Health and Chief Health Officer since 3 May 2008.

Significant achievements in 2008-09

- | Participated in strategic initiatives and policy development within the Australian Health Ministers' Advisory Council sub-committees - the Australian Health Protection Committee and the Australian Population Health Development Principal Committee.
- | Chairs the National Oral Health Plan Monitoring Group.
- | Represented NSW on the National Health and Medical Research Council.
- | Led preparation for and response to public health issues during World Youth Day 09.
- | Led the NSW Health response to pandemic (H1N1) 2009 influenza.
- | Oversaw public health planning for response to a radiation emergency within NSW.
- | Supported the development of the business case which led to the inaugural National Preventive Health Partnership Agreement between NSW and the Commonwealth.
- | Oversaw the development of the NSW Implementation Plan for the National Partnerships Agreement on Closing the Gap in Indigenous Health Outcomes, with \$180.38M of new investment over four years.
- | Progressed the release and implementation of the Aboriginal Family Health Worker Operational Guidelines.
- | Implemented the recommendations of the NSW Review of Hepatitis Treatment and Care Services, including an 80 per cent increase in the dedicated hepatitis C investment in area health services (AHSs), expansion of treatment capacity within AHSs, piloted the expansion of community-based prescribing of antiviral treatment and established partnership mechanisms in each AHS, bringing together clinical leaders, affected communities and other key stakeholders.
- | Strengthened the management of chronic hepatitis B in the community, via the establishment of a Statewide training program for general practitioners, practice nurses and other community-based clinicians.
- | Provided ongoing training to AHS public health personnel in epidemiology, disease investigation and control.
- | Released a new-look *Health of the People of NSW: Report of the NSW Chief Health Officer*.

- | Oversaw the roll-out of single ethical review across NSW Health, which has seen substantial improvements in the timeliness of ethical and scientific review of multi-centre research since its introduction in July 2007. In the 2008-09 financial year, 609 multi-centre projects were reviewed by a lead HREC. A further 802 single centre research projects were reviewed by a NSW Health HREC.
- | Supported the Centre for Health Record Linkage (CHeReL) in collaboration with the Cancer Institute NSW. CHeReL now hosts a master linkage key of over 25 million records, the largest infrastructure of its kind in Australia. During 2008-09, 35 record linkage projects were conducted, covering topics such as provision of information on numbers of people with coronary heart disease, diabetes and asthma.
- | Establishment of Statewide management for the NSW Anaphylaxis Education program at CHW.
- | Establishment of Statewide organ tissue transplantation service based at SESIAHS and implementation of Commonwealth initiatives for organ and tissue transplantation.
- | Introduction of universal pre-storage leuco-depletion of the blood supply.
- | Introduction of bacterial testing for platelets.
- | Successfully conducted the mid-term review of the NSW HIV/AIDS Strategy 2006-2010, the NSW Sexually Transmissible Infections Strategy 2006-2010, the NSW Hepatitis C Strategy 2007-2010 and the Implementation Plan for Aboriginal People 2006-2010.
- | Completed a review of 22 AIDS Program funded Statewide services and initiated implementation of the review recommendations.
- | Reviewed and strengthened policy on the management of people with HIV infection who place others at risk.
- | Organised a pilot program through the AH&MRC Aboriginal Health College for a competency-based education package specific for needle and syringe program (NSP) workers on Aboriginal cultural sensitivity. The package will be delivered to all NSP workers across NSW during 2009/10.
- | Funded the AH&MRC to develop and implement an Aboriginal HIV/STI social marketing campaign 'Use Condoms & Enjoy Your Freedom', which was conducted in January and February 2009.
- | Worked in partnership with the Department of Education and Training (DET) on a project to implement training of school teachers across NSW on teaching sexual health and related issues.



Ken Barker

Position Title: Chief Financial Officer, Health System Support

SES Level: 6

Remuneration: \$292,050

Period in Position: 15 years (22 years in this, or similar position)

The Deputy Director-General, Health System Support has expressed satisfaction with Mr Barker's performance throughout 2008-09. Mr Barker achieved the performance criteria contained in his performance agreement.

Significant achievements in 2008-09

- | Provided effective financial management and control of the NSW Health budget, with the result within tolerances established by Treasury.
- | Provided financial leadership and direction to assist a number of health services to better align expenditure and revenues to performance.
- | Pro-active leadership in improving creditor results at 30 June 2009 and liaison between creditors and health services throughout the year.
- | Oversaw the costing exercise of recommendations relating to the Government's response to the Special Inquiry into Public Hospitals.
- | Initiated processes that allowed for 2009-10 health service allocation letters to issue on State Budget day (16 June 2009) and for health services to issue their allocation letters four weeks later (14 July 2009) including, where appropriate, a clear linkage between budget, activity (including case weighted separations) and staff, with such information publicly available, consistent with "Caring for Health – The Way Forward".

- | Implementation of the Capital Resource Distribution Adjustment policy across the eight area health services to reflect the cost of capital and make transparent the capital share.
- | Provision of advice to protect NSW Health's financial interest in respect of Albury Wodonga Health and Sydney Cancer Centre (proposed).
- | Co-ordination of implementation of five pathology clusters across NSW Health under a business platform structure.
- | Developed models for standardised licensing arrangements for visiting medical officers providing outpatient services in public hospitals.

David Gates

Position Title: Chief Procurement Officer

SES Level: 6

Remuneration: \$282,390

Period in Position: 13 Years

Significant achievements in 2008-09

- | Directed the capital investment of \$819M within three per cent of full achievement against the Budget Paper target.
- | Managed the development and endorsement of the 2008 NSW Health Total Asset Management Plan, including the co-ordination of revised area health service asset strategies and the ten-year Capital Investment Strategic Plan.

- | Directed strategic procurement initiatives, including the achievement of targeted savings for transfer to front-line services, the development of nine new Health-specific contracts and the overarching five-year procurement plan, the transition of the departmental Procurement Implementation Unit into the Health Support Services Procurement Hub and the submission to the State Contracts Control Board for Health to become an accredited procurement agency.
- | Directed the procurement advisory service and managed specialist procurement tenders in ambulance rotary and fixed-wing services and in pharmaceuticals and other clinical services.
- | Directed the development of capacity sharing projects aimed at increased efficiency and effectiveness in health care delivery, with initial focus on non-emergency transport, Lifehouse at RPA, the Chris O'Brien Cancer Centre, Medical Equipment Managed Services and the Medical Imaging Reform Program.
- | Directed the promulgation of the NSW Health Sustainability Strategy and the adoption of the Sustainability Advantage Program to confirm priority actions towards the Government target of carbon-neutral by 2020.
- | Managed the renewal of the department's lease at 73 Miller Street North Sydney, ongoing facility management services and the development of crisis and business continuity plans.
- | Managed support services to the department in knowledge, records and electronic data management and information technology network and services.



Michael Rillstone

Position Title: Chief Information Officer

SES Level: 5

Remuneration: \$259,850

Period in position: 3 years

Mr Rillstone achieved the performance criteria contained in his performance agreement. During 2008-09, he provided leadership in the areas of information and technology, with a focus on strategy, management, governance and advice on information and technology programs.

Significant achievements in 2008-09

- | Leadership in the roll-out of the information management and technology program, which has been a major focus of activity across the State, providing new and improved information and technology capability across the health system.

- | Supported the development of the national e-health agenda, with programs underway in support of National e-Health Transition Authority, National Health CIO Forum and National Health Information Regulatory Framework.
- | Implemented effective governance and leadership forums with area health service chief information officers, clinicians and directors of corporate services.
- | Improved monitoring of Finance's realisation of benefits and management reporting from investment in information technology.
- | Established a highly-skilled information and management technology team, which has significantly contributed to improved advice and management of information technology programs.
- | Negotiated Statewide contracts for information and management technology capability, resulting in significant savings in ongoing maintenance and software costs.
- | Completed business cases in support of the ICT Strategy.
- | Completed feasibility studies of proposed State initiatives.
- | Led development and deployment of ICT policy.
- | Initiated key programs in the areas of bills, rosters, payroll, infrastructure and community health.
- | Negotiated new wages memorandum of understanding with the Health Services Union for the ambulance paramedic workforce.
- | Oversight of major special case in the Ambulance Service, resulting in a new classification system and better management of fatigue, breaks and overtime for ambulance officers. Established the first health and wellness program in an award, to support death and disability provisions for paramedics.
- | Development of new awards, incorporating a new classification system for the oral health workforce, including additional benefits to address workforce shortages.
- | Management of major arbitration for nurses' nightshift claim, with no increase in nightshift payments or penalties awarded.
- | Managed successful appeal of Industrial Relations Commission decision, to confirm 50/50 share of salary packaging benefits in relation to meal entertainment claims for staff specialists.
- | Developed structures to support *Caring Together* recommendations on grievance handling and management of bullying complaints and provided leadership on initiatives such as identification of staff, hand washing, grievance handling and the assistant workforce.
- | Support and advice to area health services on workforce initiatives in relation to budget alignment.
- | Managed implementation of the Premier's Directive on the wages freeze and SES/HES reductions.
- | Provided leadership on workforce aspects of management of the H1N1 Influenza epidemic.

Annie Owens

Position Title: Director Workplace Relations and Management

SES Level: 5

Remuneration: \$235,596

Period in position: 10 months

Ms Owens achieved the performance criteria contained in her performance agreement.

Significant achievements in 2008-09

- | Managed progressive implementation of 2008 wages memorandums of understanding with NSW Nurses' Association and the Health Services Union, including the making of new awards and the monitoring of wages offsets.
- | Negotiated a memorandum of understanding for senior salaried doctors and settlement of emergency physician claims, including a package of reforms to better support implementation of *Caring Together* in emergency departments.



Significant publications

Books/Booklets

- | Actioning Strategies for Curbing Chronic Disease
- | Get Healthy Information & Coaching Service booklet
- | Medicare Teen Dental Plan 'what you need to know'
- | My Pregnancy Record
- | NSW Health Home and Community Care (HACC) minimum data set version 2 workbook
- | Physical Health for Mental Health handbook
- | Public Oral Health Directions 2008
- | Quality of Healthcare in NSW Chartbook 2007
- | "Take the Lead" Strengthening the Nursing/Midwifery Unit Manager role
- | Vocational Education, Training and Employment (VETE) pilot project

Brochures and flyers

- | BMJ Careers Fair - handout
- | Get Healthy Information & Coaching Service brochure
- | Good for kids, good for life brochures
- | Graduate Rural Incentive Scheme flyer
- | Opportunities for Emergency Physicians flyer
- | Physical Health for Mental Health campaign brochure
- | Smoking and your oral health
- | STEPS information brochure
- | Vocational Education, Training and Employment Service (VETE) information pack

- | Youth Alcohol Action Plan 2006 to 2010

- | Welcome to Emergency - brochure

- | Workforce recruitment material 2008 - flyer for SARRAH conference

Fact sheets

- | Skin Cancer
- | Tobacco and health fact sheet: Waterpipe tobacco

Manuals and information kits

- | Capacity Building Infrastructure Grant (CBIG) information kit - round 3
- | Essentials of Care manual
- | Mental Health for Emergency Departments - a reference guide 2008 - A4 and A6 versions



Newsletters

- | HCAC quarterly newsletter

Policies/guidelines

- | Cardiac Monitoring in Adult Patients
- | Clinical guidelines for Nursing and Midwifery Practice in NSW: identifying and responding to Drug and Alcohol Issues
- | Medical Locum Agency Audit guidelines
- | NSW clinical guidelines for the Care of Persons with Comorbid Illness and Substance Use Disorders in Acute Care Settings
- | Operational guidelines for Aboriginal Family Health Workers
- | Paediatric clinical guidelines - Acute management of fever in infants and children: revised 2009
- | Supporting Families Early (SFE) package: Maternal and Child Health Home Visiting Policy Primary Health Care

Posters/postcards

- | Aboriginal nations maps in NSW area health services
- | Actioning Strategies for Curbing Chronic Disease
- | Cardiac Monitoring in Adult Patients poster
- | Good for kids, good for life posters
- | Pieces of the puzzle
- | Physical Health for Mental Health campaign posters
- | Solid Oral Oxycodone Products for Pain Relief posters
- | STEPS A3 and A4 posters
- | Welcome to Emergency posters



Reports

- | NSW Health Annual Report 2007-08
- | Caring Together: The Health Action Plan for NSW - Garling Response
- | Decisions relating to no resuscitation (CPR) orders
- | Guidance for Implementing Smoke-free Mental Health Facilities in NSW
- | Issues in the Costing of Large Projects in Health and Healthcare
- | NSW Mothers and Babies 2006
- | NSW Multicultural Mental Health Plan 2008-2012
- | NSW Supplement NHMRC National Statement on Ethical Conduct in Human Research
- | NSW Tobacco Action Plan 2005-2009 Evaluation Framework
- | 2008 Report on Adult Health from the New South Wales Population Health Survey
- | Soft Drinks, Weight Status and Health Report
- | Report from the Medication Safety Self-assessment Program (MSSA)
- | Review of Hepatitis C treatment and care services
- | Report of the Chief Health Officer 2008
- | Report on the Aboriginal students' residential workshop KATCH 2008



