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ACTS ADMINISTERED

Acts administered

- *Anatomy Act 1977 No 126*
- *Assisted Reproductive Technology Act 2007 No 69*
- *Cancer Institute (NSW) Act 2003 No 14*
- *Centenary Institute of Cancer Medicine and Cell Biology Act 1985 No 192*
- *Drug and Alcohol Treatment Act 2007 No 7*
- *Drug Misuse and Trafficking Act 1985 No 226, Part 2A (jointly with the Minister for Police and Emergency Services, remainder, the Attorney General)*
- *Fluoridation of Public Water Supplies Act 1957 No 58*
- *Garvan Institute of Medical Research Act 1984 No 106*
- *Health Administration Act 1982 No 135*
- *Health Care Complaints Act 1993 No 105*
- *Health Care Liability Act 2001 No 42*
- *Health Practitioner Regulation (Adoption of National Law) Act 2009 No 86 and the Health Practitioner Regulation National Law (NSW) (except section 165B of that Law and section 4 of that Act in so far as it applies section 165B as a law of New South Wales, the Attorney General)*
- *Health Professionals (Special Events Exemption) Act 1997 No 90*
- *Health Records and Information Privacy Act 2002 No 71*
- *Health Services Act 1997 No 154*
- *Human Cloning for Reproduction and Other Prohibited Practices Act 2003 No 20*
- *Human Tissue Act 1983 No 164*
- *Lunacy and Inebriates (Commonwealth Agreement Ratification) Act 1937 No 37*
- *Lunacy (Norfolk Island) Agreement Ratification Act 1943 No 32*
- *Mental Health Act 2007 No 8*
- *Mental Health Commission Act 2012 No 13*
- *Mental Health (Forensic Provisions) Act 1990 No 10, Part 5 (remainder, Attorney General)*
- *New South Wales Institute of Psychiatry Act 1964 No 44*
- *Poisons and Therapeutic Goods Act 1966 No 31*
- *Private Health Facilities Act 2007 No 9*
- *Public Health Act 2010 No 127*
- *Public Health (Tobacco) Act 2008 No 94*
- *Research Involving Human Embryos (New South Wales) Act 2003 No 21*
- *Smoke-free Environment Act 2000 No 69*

Legislative changes

New Acts

- *Nil*

Amending Acts

- *Cancer Institute (NSW) Amendment Bill 2012*
- *Health Legislation Amendment Act 2013*
- *Human Tissue Legislation Amendment Act 2012*
- *Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Act 2013*
- *Tobacco Legislation Amendment Act 2012*

Repealed Acts

- *Public Health Act 1991*
- *Sydney Hospital (Trust Property) Act 1984 No 133*

Orders

- *Drug and Alcohol Treatment Amendment (Substances) Order 2013*
- *Health Services Amendment (Justice Health & Forensic Mental Health Network) Order 2013*
- *Health Services Amendment (St Vincent's Hospital Sydney Limited) Order 2013*
- *Public Health Amendment (Scheduled Medical Conditions) Order (No 2) 2012*

Subordinate legislation

Principal Regulations made

- *Drug and Alcohol Treatment Regulation 2012*
- *Fluoridation of Public Water Supplies Regulation 2012*
- *Health Records and Information Privacy Regulation 2012*
- *Public Health Regulation 2012*

Significant Amending Regulations made

- *Health Records and Information Privacy Amendment (Information Transfer) Regulation 2012*
- *Mental Health Amendment (Community Treatment Order) Regulation 2012*
- *Poisons and Therapeutic Goods Amendment (Supply by Pharmacists) Regulation 2013*
- *Public Health Amendment (Miscellaneous) Regulation 2012*

Repealed Regulations

- *Health Records and Information Privacy Regulation 2006*
- *Fluoridation of Public Water Supplies Regulation 2007*
- *Public Health (Disposal of Bodies) Regulation 2002*
- *Public Health (General) Regulation 2002*
- *Public Health (Microbial Control) Regulation 2000*
- *Public Health (Skin Penetration) Regulation 2000*
- *Public Health (Swimming Pools and Spa Pools) Regulation 2000*

DISABILITY ACTION PLAN

2009–14

The NSW Ministry of Health has developed the NSW Health Disability Action Plan, which includes action plans of other agencies within NSW Health. The NSW Health Disability Action Plan can be found on the NSW Health website.

The Disability Action Plan commits NSW Health to the following principles:

- People with a disability are fully valued members of the community.
- People with a disability are entitled to equitable access to services provided to the general community.
- In the provision of services to people with a disability the focus remains on the whole of life needs of the individuals and their capacity to participate fully in the community.
- Participation of people with a disability in decision making processes leads to better informed policy and outcomes for people with a disability.
- The development of cultural competence is elemental to effectively support the diversity of people with a disability.
- The unique needs of people of Aboriginal background with a disability are recognised, respected, and addressed appropriately.
- The legal rights of people with a disability are recognised and protected.
- People with a disability have equal right to employment and respect.

Achievements in 2012-13 include:

A highlight of work under the Disability Action Plan is the continued progress on the implementation of the Service Framework to Improve the Health Care of People With Intellectual Disability (the Service Framework). As part of the Service Framework, three pilot services have been established to provide specialised health services for people with an intellectual disability. Two of these three services commenced operation in 2012-13: the service operated by the Sydney Children's Hospital at Westmead, which commenced providing Specialised Disability Health clinics in August 2012; and the Northern Sydney Local Health District (LHD) pilot service, which was officially opened by the Minister for Health in February 2013. Clinics for adult clients, paediatric clients and adult psychology clinics commenced in March 2013.

South Eastern Sydney LHD has capitalised on the established clinic already operating by building partnerships with a range of local government and non-government service providers in Illawarra Shoalhaven.

Of note NSW Health is engaging with the Commonwealth regarding implementation of the National Disability Insurance Scheme.

GOVERNMENT INFORMATION (PUBLIC ACCESS) ACT 2009

Review of proactive release program – Clause 7(a)

The NSW Ministry of Health reviews its information on a regular basis and routinely uploads information on the website that may be of interest to the general public. This includes reviewing and updating a wide range of publications and resources for the public, including reports, factsheets, brochures and pamphlets. Factsheets are also available in other languages from the NSW Multicultural Health website. The most accessible way for the public to access this information is on the NSW Health website.

The NSW Ministry of Health also uploads on its website information bulletins that provide advice to the NSW public health sector; Health Statistics that allow users to access data and tailor reports about the health of the NSW population; NSW population health surveys that provide ongoing information on health behaviours, health status and other factors that influence the health of the people of NSW; Policy Directives that communicate material that is to be complied with and implemented by the NSW public health system and Guidelines that provide advice or guidance to the NSW public health system.

Number of access applications received – Clause 7(b)

During 2012-13, the NSW Ministry of Health received 92 formal access applications under the *Government Information (Public Access) GIPA Act 2009*. A total of 57 have been completed including 10 carried forward from the previous reporting period. One application has been withdrawn and 27 applications were transferred to other agencies. There were 17 applications received which were undecided as at 30 June 2012 and have been carried forward to the next reporting period.

During the reporting period, four applications were invalid as they did not comply with the formal requirements of Section 41 of the *GIPA Act*.

Number of refused applications for Schedule 1 information – Clause 7(c)

During the reporting period, the NSW Ministry of Health refused one access application because the information being requested was referred to in Schedule 1 to the *GIPA Act* (Information for which there is conclusive presumption of overriding public interest against disclosure).

Statistical information about access applications (Clause 7(d) and Schedule 2) are included in Tables A-H pages 112-113.

Table A: Number of applications by type of applicant and outcome* NSW Ministry of Health 2012-13

	ACCESS GRANTED IN FULL	ACCESS GRANTED IN PART	ACCESS REFUSED IN FULL	INFORMATION NOT HELD	INFORMATION ALREADY AVAILABLE	REFUSE TO DEAL WITH APPLICATION	REFUSE TO CONFIRM OR DENY WHETHER INFORMATION IS HELD	APPLICATION WITHDRAWN
Media	11	6	6	3	0	0	0	0
Members of Parliament	4	1	2	3	1	2	0	0
Private sector business	9	1	1	5	0	1	0	0
Not for profit organisations or community groups	4	3	0	0	0	0	0	0
Members of the public (application by legal representative)	1	1	1	0	0	0	0	0
Members of the public (other)	2	0	1	6	0	0	0	0

*More than one decision can be made in respect of a particular access application. If so, a recording must be made in relation to each such decision. This also applies to *Table B*.

Table B: Number of applications by type of application and outcome, NSW Ministry of Health 2012-13

	ACCESS GRANTED IN FULL	ACCESS GRANTED IN PART	ACCESS REFUSED IN FULL	INFORMATION NOT HELD	INFORMATION ALREADY AVAILABLE	REFUSE TO DEAL WITH APPLICATION	REFUSE TO CONFIRM OR DENY WHETHER INFORMATION IS HELD	APPLICATION WITHDRAWN
Personal information applications*	0	0	0	3	0	0	0	1
Access applications (other than personal information applications)	32	12	10	16	1	4	0	0
Access applications that are partly personal information applications and partly other	1	0	1	0	0	0	0	0

*A **personal information application** is an access application for personal information (as defined in clause 4 of Schedule 4 to the Act) about the applicant (the applicant being an individual).

Table C: Invalid applications, NSW Ministry of Health 2012-13

REASON FOR INVALIDITY	NUMBER OF APPLICATIONS
Application does not comply with formal requirements (section 41 of the Act)	4
Application is for excluded information of the agency (section 43 of the Act)	0
Application contravenes restraint order (section 110 of the Act)	0
Total number of invalid applications received	4
Invalid applications that subsequently became valid applications	0

Table D: Conclusive presumption of overriding public interest against disclosure: Matters listed in Schedule A to Act, NSW Ministry of Health 2012-13

	NUMBER OF TIMES CONSIDERATION USED*
Overriding secrecy laws	0
Cabinet information	1
Executive Council information	0
Contempt	0
Legal professional privilege	0
Excluded information	0
Documents affecting law enforcement and public safety	0
Transport safety	0
Adoption	0
Care and protection of children	0
Ministerial code of conduct	0
Aboriginal and environmental heritage	0

*More than one public interest consideration may apply in relation to a particular access application and, if so, each such consideration is to be recorded (but only once per application). This also applies in relation to *Table E*.

Table E: Other public interest considerations against disclosure: Matters listed in table to section 14 of the Act, NSW Ministry of Health 2012-13

	NUMBER OF OCCASIONS WHEN APPLICATION NOT SUCCESSFUL
Responsible and effective government	6
Law enforcement and security	0
Individual rights, judicial processes and natural justice	12
Business interests of agencies and other persons	5
Environment, culture, economy and general matters	0
Secrecy provisions	0
Exempt documents under interstate Freedom of Information legislation	0

Table F: Timeliness, NSW Ministry of Health 2012-13

	NUMBER OF APPLICATIONS
Decided within the statutory timeframe (20 days plus any extensions)	17
Decided after 35 days (by agreement with applicant)	1
Not decided within time (deemed refusal) – (Note: all applications continued to be processed with the applicant receiving Notice of Decision)	39
Total	57

Table G: Number of applications reviewed under Part 5 of the Act (by type of review and outcome), NSW Ministry of Health 2012-13

	DECISION VARIED	DECISION UPHELD	TOTAL
Internal review	0	0	0
Review by Information Commissioner*	0	0	0
Internal review following recommendation under section 93 of Act	0	0	0
Review by ADT	0	0	0
Total	0	0	0

*The Information Commissioner does not have the authority to vary decisions, but can make recommendations to the original decision-maker. The data in this case indicates that a recommendation to vary or uphold the original decision has been made by the Information Commissioner.

Table H: Applications for review under Part 5 of the Act (by type of applicant), NSW Ministry of Health 2012-13

	NUMBER OF APPLICATIONS FOR REVIEW
Applications by access applicants	0
Applications by persons to whom information the subject of access application relates (see section 54 of the Act)	0

MULTICULTURAL POLICIES AND SERVICES PROGRAM

NSW Health achievements 2012-13

HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENT 2012-13
Central Coast LHD	Interpreter Awareness Project – Stage 1	<p>This project aimed to improve the percentage of interpreting services provided when required for clients. Achievements included:</p> <ul style="list-style-type: none"> • Commencement of a pilot project in Central Coast Local Health District (CCLHD) Emergency Departments with continued liaison between these and multicultural health services • Development of a cooperative working partnership with Hunter New England LHD's Health Care Interpreter Service • Increased staff training in the utilisation of interpreter services • Development and distribution of multicultural health resource kits within CCLHD • Identification of areas of high need / low compliance for rollout of the Interpreter Awareness Project – Stage 2
Hunter New England LHD	Health Education Simbu Soccer Teams	<p>This project targeted young men aged 16 to 24 who belong to the Newcastle African Soccer Club and are from many different African countries. These young men are keen to be integrated into the local community but run the risks associated with exposure to drug taking and alcohol abuse common for their age group. Members of the drug and alcohol and mental health teams attended the Friday night training sessions, interacted with the young men and provided information on mental health and drug and alcohol issues. The players have welcomed this initiative and have asked for more than the six sessions which have been allocated</p>
Illawarra Shoalhaven LHD	<i>Heartmoves</i> for CALD communities	<p>The purpose of this program was to engage Culturally and Linguistically Diverse (CALD) communities in chronic disease self-management through a group program of facilitated physical exercise and health literacy activities. In addition, the program provided the participants with increased access to primary and ambulatory care services and gave allied health professionals outreach and cultural competency experience.</p> <p>Twenty 10 week physical activity ethno-specific and mixed multicultural group programs were funded through Wollongong City Council's Healthy Communities Initiative. The programs included health education sessions.</p> <p>The outcomes of the program included:</p> <ul style="list-style-type: none"> • 363 participants attended physical activity programs with a high average attendance rate • All groups self-reported significant physical and emotional benefits • Four groups are now partially or fully self-funded for sustainability
Mid North Coast LHD	Coffs Harbour Refugee Health Clinic	<p>This clinic provides early health assessments for humanitarian entrants recently arrived in Coffs Harbour when referred by Anglicare Humanitarian Services Agency</p>
Murrumbidgee LHD	Refugee Health Assessment Service	<p>The Refugee Health Assessment Service was established in August 2010. This service is a collaboration between MLHD and the Murrumbidgee Medicare Local. Weekly clinics are staffed by a Refugee Health Nurse (RHN) and supported by local General Practitioners (GPs) who have a special interest in refugee health. The MLHD supports the clinic with funding for the RHN. The clinic provides initial health assessments, pathology services, immunisations, health screening and treatment for newly arrived refugees in the first two to three months of settlement. The patients are then linked to GP services with ongoing care provided by the GP of the patients' choice</p>
Nepean Blue Mountains LHD	CALD Peri-natal Photography Project	<p>Photography and patient interviews were used to track the journey and experiences of CALD mothers across Nepean Blue Mountains LHD facilities during their pregnancy and delivery over a period of nine months. Eight women from different cultural backgrounds participated in the study. The project aimed to minimize health risks for CALD women through the provision of quality feedback on service delivery and identification of strategies to improve the patient journey.</p> <p>The findings highlighted the need to develop and implement procedures to ensure women from CALD backgrounds are provided with language-specific information about hospital processes and systems, provided with interpreters as required, informed about child birth education programs and encouraged to communicate cultural expectations. The need for staff to improve recording of patient information in clinical databases and to ensure that informed consent is obtained at relevant stages of the patient's care was also highlighted. A report on key findings and recommendations will be delivered and a photographic exhibition staged.</p>
Northern NSW LHD	Recruitment of a Non English Speaking Background (NESB) Member to the Northern NSW LHD Community Engagement Advisory Council.	<p>Although the proportion of the Northern NSW LHD population who are from CALD backgrounds is small compared to the NSW average, the District's Community Engagement Advisory Council (CEAC) identified that it needed to recruit a CALD background member. An non-English speaking background (NESB) person working in a community liaison position, which supports NESB communities, has been appointed to the CEAC</p>
Northern Sydney LHD	The Physical Activity and CALD Seniors Project	<p>A pilot project was conducted in Northern Sydney LHD to:</p> <ul style="list-style-type: none"> • Raise awareness of the need to exercise among older people from CALD backgrounds • Promote existing exercise programs in the community for the well-aged • Implement a home based exercise program for the frail aged <p>One component of the project targeted the bilingual workforce (including bilingual workers, volunteers and group leaders). The second component targeted frail older people from four community groups (Chinese, Farsi/Persian, Indian and Italian). Project work included the development of culturally and linguistically appropriate health promotion resources and the delivery of four language/cultural specific workshops for frail older people to enable them to use the 'Staying Active, Staying Safe: Basic Exercises to Prevent Falls' program at home</p>

HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENT 2012-13
South Eastern Sydney LHD	Development of e-learning tool: Connecting with carers from CALD backgrounds in mental health settings	This highly interactive multimedia learning package is designed to assist mental health professionals to enhance their knowledge, skills and confidence in connecting with carers from CALD backgrounds. It contains film footage of a Macedonian play on mental health and stigma, and uses a case study approach. The e-learning tool builds multicultural aspects into existing models of care. The tool, developed in partnership with the Mental Health and Multicultural Health Service of the South Eastern Sydney LHD was launched in November 2012 by the Hon Kevin Humphries MP, Minister for Mental Health and Healthy Lifestyles
South Western Sydney LHD	Coping with Care Giving: An intervention for Chinese and Spanish speaking carers of people living with Dementia	A pilot research study to trial an intervention with Chinese and Spanish-speaking carers of people living with dementia was conducted in partnership with South Western Sydney LHD, NSW Spanish and Latin American Association for Social Assistance and funded by UNSW Dementia Collaborative Research Centre. This intervention was based on a US model where it resulted in a reduction in stress and depression amongst Chinese and Spanish speaking carers and an increased ability to cope with care giving. Key achievements: <ul style="list-style-type: none"> • Piloted and evaluated 'Coping with Care Giving' • Adapted the intervention to the Australian context with manuals available in English, Chinese and Spanish. • Analysis of individual subscales showed a reduction in depression, anxiety and stress levels amongst Spanish speakers and reduced levels of depression amongst the Chinese community. • Findings presented at two conferences and a draft paper for publication completed
Sydney LHD	Empowering CALD carers with knowledge and resources	This project received a 2012 Sydney LHD Quality Award under the category 'Improving Primary Health Care in the Community'. This project reached approximately 900 carers from eight CALD communities over a three-year period (2010-2012). It aimed to empower CALD carers by providing information and resources on carer specific services and supports. It was implemented through culturally appropriate interventions such as the use of community-based bilingual health workers, interpreter services, multi-media and translated resources and ethnic media. These strategies reduced language barriers, celebrated cultural diversity and helped to bridge the gap between CALD communities and the mainstream health system. 94% of participants indicated significant improvements in their knowledge of health and related services available to them.
Western NSW LHD	Interpreter Service Utilisation	WNSWLHD made promoting awareness of the Health Care Interpreter Service to staff and amongst culturally and linguistically diverse communities a key focus in 2012-13. Achievements included: <ul style="list-style-type: none"> • Education on working with interpreters provided to staff in October 2012. 65 staff attended information sessions provided by the Coordinator Rural Health Care Interpreter Service (RHCIS) at Dubbo, Orange and Bathurst. • Training of local interpreters conducted at Orange and Bathurst (by RHCIS Manager) with associated media to promote access to interpreters to the community. Outcomes included three radio interviews and two newspapers articles promoting use of interpreters when accessing health services. • Health Service Managers of non-procedural sites provided with information on mandatory requirements for use of interpreters and posters in multiple languages promoting the RHCIS. • One page article in the WNSWLHD newsletter on the mandatory requirements for working with interpreters and actively recruiting local interpreters. The outcome has been a 93% increase in Occasions of Service for interpreters (from 265 in 2011-12 to 513 in 2012-13).
Western Sydney LHD	Official Launch of 'Breastfeeding and Postnatal Care' booklet by the Translation Service	In 2011-12, the Western Sydney Infant Feeding Group, the Maternity Liaison Officers Resource Development Group and the Translation Service of Western Sydney LHD worked collaboratively to produce a postnatal information booklet 'Breastfeeding and Postnatal Care'. The booklet was translated into eight languages: Arabic, Chinese traditional, Chinese simplified, Farsi, Hindi, Korean, Punjabi, and Tamil. The booklet was launched in October 2012 at Westmead Hospital by the Hon Jillian Skinner, Minister for Health and Minister for Medical Research. The launch was very successful and received extensive media coverage including SBS Radio and ethnic media.
PILLARS		
Agency for Clinical Innovation	Nutrition information resources for consumers	The purpose of this project was to develop new information resources for consumers and carers about food and nutrition in NSW hospitals and about Home Enteral Nutrition (HEN) services in NSW. The ACI Nutrition Network developed a HEN information guide for consumers and information for patients and carers on HEN services in NSW. These resources were translated into seven community languages: Arabic, Vietnamese, Chinese (traditional and simplified), Greek, Italian and Spanish. They are available on the ACI and Multicultural Health and Communication Service websites.
Bureau of Health Information	NSW Patient Survey Program – Interpreter Service	To support CALD peoples' participation in the NSW Patient Survey Program, the BHI engaged the services of the Multicultural Health Communication Service to translate information into 24 languages. The BHI also engaged the Health Care Interpreter Service to assist people to participate in the survey.
Clinical Excellence Commission	Patient and Family Activated Escalation (REACH)	The goal of the REACH program is to provide an avenue for patients, families and carers to independently escalate care to a rapid response / emergency response team if they notice a recent change in their condition (patient) or the person they care for (family, carer) and have a 'worrying concern'. Consumer information has been translated into over 6 languages, specific to the lead site populations.
Health Education and Training Institute	Online learning module – Working in Culturally Diverse Contexts	HETI has developed and delivered an online learning module 'Working in Culturally Diverse Contexts', now on the HETI website.
NSW Kids and Families	NSW child Personal Health Record	The NSW child Personal Health Record (the 'Blue Book') is provided free to every parent with a new baby and parents moving from interstate or other countries. Relevant parts of the child Personal Health Record have been translated into additional community languages and existing translations have been updated to reflect the revised 2013 version. Parts are now available in Arabic, Chinese (simplified), Chinese (traditional), Dinka, Hindi, Indonesian, Khmer, Korean, Lao, Nepali, Somali, Tamil, Thai, Turkish and Vietnamese.

HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENT 2012-13
HEALTH NETWORKS		
St Vincent's Health Network	Diversity Health Day	St Vincent's Health Network's Diversity Health Day objectives were to enhance cultural competence, increase understanding of specific cultural needs, acknowledge and celebrate diversity, engage with our clinicians and understand their learning needs, and work with local communities and universities. The cross campus event involved guest speakers discussing multicultural mental health and health literacy, a poster exhibition, resource table and multicultural afternoon tea. The event was opened by St Vincent's Chief Executive Officer. The survey results demonstrated improved staff understanding of cultural competence and culturally sensitive care.
Justice Health & Forensic Mental Health Network	Forensic Hospital Multicultural Service	The Forensic Hospital is developing a multicultural service which includes a literacy and numeracy program for CALD patients and a 'Teaching English to Speakers of Other Languages' course. CALD patients are able to access transcultural mental health assessments, celebrate religious festivals of different cultures, receive specific culturally appropriate diets and have access to specific religious ministers (e.g. Rabbi, Imam).
Sydney Children's Hospitals Network (NB: this report relates to SCH Randwick only)	Accessing developmental surveillance – Understanding the barriers for CALD communities	This project has improved health literacy and awareness in CALD communities in the Botany Bay local government area (LGA) regarding child development, identifying developmental vulnerability and knowing where to go when parents are concerned. It has also increased awareness of general practice primary health care services in the Botany Bay LGA and of current developmental surveillance services available through the Sydney Children's Hospital, including early childhood nursing and community child health services. The project's outcomes are informing service development for developmentally vulnerable children so that it is accessible and culturally responsive to families from CALD backgrounds.
STATEWIDE HEALTH SERVICES		
NSW Ambulance	Emergency Interpreting Access	The Ambulance Service Control Centres use an interpreter service that can be accessed by phone 24 hours a day. If a triple zero call is received from someone who is non-English speaking, a strict procedure is followed to ensure that there is no delay in providing an ambulance. The call taker will initiate an ambulance response immediately prior to contacting the interpreter and then uses triage questions via the interpreter to ensure that the patient's condition is clearly ascertained and to obtain critical information for the response. This resource may also be accessed at scene. In 2012-13, NSW Ambulance used emergency interpreting services on 2,240 occasions.
Multicultural Health Communications Service	Multicultural Health Communication Service Website and Multilingual Quitline	Over the past five years, the Multicultural Health Communication Service has undertaken significant efforts to increase hits to its website. As a result, hits on the website reached 5 million per year in 2012 and a new website was launched in 2013. Further, Multilingual Quitlines were established over four years ago and from 2012 the lines were integrated into Quitlines NSW. As a consequence calls have gone up from 20 to 500 per year. The Chinese, Arabic and Vietnamese communities can also now access lines in their own language.
Multicultural HIV and Hepatitis Service	CALD Hepatitis B Project	This project aims to increase awareness of chronic hepatitis B among priority CALD communities in NSW. Key strategies include: <ul style="list-style-type: none"> • The development of a chronic hepatitis B resource in plain English and seven priority languages: Arabic, Chinese, Vietnamese, Khmer, Indonesian, Korean and Thai. To date 27,000 resources have been distributed to a range of key agencies • The implementation of a community development project with the Korean community which has seen the establishment of the Korean Health Committee, the delivery of 23 community workshops with over 500 attendees, two radio interviews on SBS and eight articles in the Korean language press • The development and implementation of a series of hepatitis B workshops targeting key community based workers drawn from a range of services. Seven workshops have been delivered in Sydney metropolitan area with over 100 participants.
Multicultural Problem Gambling Service for NSW	Interactive e-resource	In response to research findings of an increase in online problem gambling, the Multicultural Problem Gambling Service for NSW (the MPPGS) developed a new e-resource 'Interactive or Online Gambling – Clues that you or someone close to you may have a problem and tips on how to gamble responsibly online'. This resource is translated into: Croatian, French, Hindi, Macedonian, Persian, simplified Chinese, traditional Chinese, Turkish and Vietnamese languages and is available on the MPPGS website.
NSW Education Program on Female Genital Mutilation	Development of online clinical training resource for medical practitioners	An e-learning DVD package has been developed in partnership with the HETI. The package is designed to enhance the knowledge and skills required by doctors, medical staff and allied health professionals to care for women and families affected by Female Genital Mutilation (FGM).
NSW Refugee Health Service	Refugee Health Nurse Program	The Refugee Health Nurse Program provides health assessments and screening tests to newly arrived refugees and links individuals and families to general practitioners and the NSW Health system. The program operates from 11 clinic locations across Sydney, and 1963 clients were seen between 22 October 2012 (when the program became operational) and 30 June 2013.
Transcultural Mental Health Centre	Consumer Medication Brochure Series	This initiative arose from the Ministry's Multicultural Mental Health Implementation Committee. The brochures were developed to assist clinicians working with consumers and their carers on a range of topics and medications including: antipsychotic medications, benzodiazepines, bipolar disorder – how medicine can help, clozapine, depression – how medicine can help. The brochures give an explanation of the medicines, how they work, side effects, how they should be used and where to seek help if needed. The online resources are available from the Transcultural Mental Health website in English and 15 community languages: Arabic, Chinese-simplified (Mandarin), Dari, Hindi, Korean, Chinese-Traditional (Cantonese), French, Greek, Indonesian, Italian, Punjabi, Spanish, Tamil, Turkish and Vietnamese.
Women's Health at Work Program (WHAW)	Media Campaign for CALD working Women	This project has been developed to enable CALD women who are either employed or looking for work to be informed on key issues relating to employment, wages, their rights in the work place, workplace health and safety, women's health, diet and exercise. The information has been developed in seven languages. Bilingual Community Educators will act as key spokeswomen for WHAW and provide the information in collaboration with ethnic radio. Information will also be made available on audio and on the WHAW web site.
Health Protection NSW	Immunisation Awareness Campaign	NSW Health is implementing an immunisation awareness campaign in 2013 to educate and inform the community and immunisation providers about the importance of ensuring that children are fully immunised on time. In addition to a campaign website, smartphone app and posters, a brochure was developed and translated into 23 community languages. All print materials are available for ordering from the Better Health Centre. The intended outcome is that people from CALD groups targeted by this campaign will be more aware of the importance of children being vaccinated on time.

HEALTH SERVICE	PROJECT/INITIATIVE	ACHIEVEMENT 2012-13
MINISTRY OF HEALTH BRANCHES		
Integrated Care Branch	Support for implementation of the <i>Policy and Implementation Plan for Healthy Culturally Diverse Communities 2012 to 2016</i>	The Plan was launched in April 2012 and is NSW Health's strategic plan for improving multicultural health in NSW. The Integrated Care Branch is responsible for supporting implementation of the Plan and has done so in the following ways: Establishment of a Multicultural Health Plan Implementation Group, funding and guidance for the NSW Statewide Multicultural Health Forum to be held in November, funding support for Multicultural Health Week 2012 and 2013, and collation and submission of NSW Health's annual Multicultural Policies and Services Program report to the Community Relations Commission.
Epidemiology and Evidence	NSW Population Health Survey	Inclusion of the top five main language groups spoken within the NSW population to ensure people with English as a second language are able to participate within the survey should they wish to do so and to improve the production of unbiased estimates for the NSW population. These languages are Arabic, Chinese, Greek, Italian, and Vietnamese. Within the 2012 survey a total of 436 respondents chose to participate in the survey in one of the five languages.
Office of the Chief Health Officer	Implementation of the <i>Public Health Act 2010</i> and <i>Public Health Regulation 2012</i>	This project aimed to inform the public of the commencement of the <i>Public Health Act 2010</i> and the <i>Public Health Regulation 2012</i> through the placement of advertisements in key ethnic newspapers and provision of information sheets on key areas of the Act and Regulation, available via the Public Health Legislation website in six community languages.
System Relationships and Frameworks	ComPacks: Information for Patients and Families – Supporting a safe return home from hospital	ComPacks is a statewide non-clinical service that assist patients of the 143 participating NSW public hospitals to access case management and community support services for up to six weeks following hospital discharge. The program aims to reduce a person's unnecessary length of time in hospital and provide a safe, supported, transfer home from hospital and prevent avoidable re-admission. After consultation with LHDs, ComPacks Community Service Providers and the NSW Multicultural Health Communication Service, ComPacks information brochures have been translated into Arabic, Chinese, Croatian, Greek, Italian, Macedonian, Polish, Serbian, Spanish and Vietnamese. The brochures were awarded a NSW Multicultural Health Communications Award 2013 in the category of 'Booklet/Brochures'.
Workforce Planning and Development	Rural Doctors Network (RDN) International Medical Graduate (IMG) Orientation Program	NSW Health has provided \$130,009 in funding to the NSW Rural Doctors Network (RDN) to undertake an International Medical Graduate (IMG) Orientation Program. This program supports IMGs with conditional area of need registration in rural NSW. The Program aims to ensure that IMGs commencing in area of need posts understand the Australian health system and are able to work effectively in both community and hospital settings. The RDN provides a three day orientation program for IMGs, assistance with enrolling IMGs in Rural Emergency Skills Training courses, and support for the Hunter New England LHD in the development of appropriate orientation programs for IMGs who work across both the general practice and public hospital sectors.
The Centre for Oral Health Strategy NSW	Healthy Mouth – Something To Smile About	This project, a partnership with South Western Sydney LHD Oral Health and the NSW Refugee Health Service, aimed to improve the oral health knowledge and practices of newly arrived refugees. A multilingual DVD resource was developed in eight languages, providing culturally and linguistically appropriate oral health information for newly arrived refugees in NSW. The resource helps individuals and families of refugee background to make healthy choices and thereby reduce dental problems. The DVD has an early intervention and prevention focus. Evaluation of the resource indicated a significant increase in oral health knowledge on key messages delivered and knowledge retention.

NSW Health planned initiatives 2013-14

HEALTH SERVICE	PROJECT/INITIATIVE	PLANNED INITIATIVES 2013-14
Central Coast LHD	CALD Get Healthy / Better Health Self-Management Project	This project seeks to improve health outcomes for clients from Culturally and Linguistically Diverse (CALD) communities with a chronic health condition. Project work will include: <ul style="list-style-type: none"> • Facilitation of a generalist Better Health Self-Management (BHSM) workshop and BHSM Review Group in partnership with the Self-Management Support Service • Targeting specific language groups to participate in BHSM training program to become bilingual BHSM facilitators • Promotion of culturally appropriate health messages for CALD background communities • Education workshops to be conducted for local GPs and health professionals working with CALD background clients on the Get Healthy Information and Coaching Service.
Hunter New England LHD	A project to increase CALD representation on advisory boards and committees	Few members of new and emerging migrant communities feel confident to engage with government agencies to express the needs of their communities, so it can be difficult to find representatives of these communities willing to serve on advisory boards and committees. The aim of this project is to identify members of new and emerging communities willing to undertake a six week program aimed at: identifying perceived barriers to engagement with health boards and committees, developing specific skills to negotiate the removal of those barriers, promoting effective liaison between migrant and established communities.
Illawarra Shoalhaven LHD	Mental Health Service CALD Patient Journey Interviews	The purpose of this initiative will be to conduct a minimum of 10 patient journey interviews with CALD consumers of the Illawarra Shoalhaven Local Health District (ISLHD) Community Mental Health Service. The intended outcomes will be: <ul style="list-style-type: none"> • Obtain patient journey feedback from a minimum of 10 CALD mental health service consumers • Identify key service strengths and any challenges experienced by CALD consumers to inform quality improvement initiatives for ISLHD mental health • Build capacity in ISLHD mental health services to conduct patient journey interviews with CALD consumers
Murrumbidgee LHD (MLHD)	Murrumbidgee LHD Plan for Healthy Culturally Diverse Communities	MLHD established a Multicultural Policy Implementation Committee in April 2013, with membership comprising key stakeholders from MLHD, Medicare Locals, local government and non-government organisations. This committee will continue to meet in 2013-14 to collaborate on mapping existing services, identifying service gaps or improvements required, and develop actions to support local implementation of NSW Health multicultural policies, including multicultural mental health and refugee health.

HEALTH SERVICE	PROJECT/INITIATIVE	PLANNED INITIATIVES 2013-14
Nepean Blue Mountains LHD	CALD 'Moving On' Program	In partnership with the Medicare Local and Arthritis NSW, the Multicultural Health Unit will be piloting the Moving On program with CALD communities in each of the local government areas (LGA) in the district. The Moving On program is a generic chronic disease self-management program designed for anyone with any kind of long-term health condition such as diabetes, heart disease, asthma, arthritis. The program will cover eleven topics and is run in a group setting by two leaders, a health professional leader and one lay leader who has a chronic disease. Targeted communities include the Greek community in the Penrith LGA, the Maltese community in the Hawkesbury LGA and the Dutch and German communities in the Lithgow and Blue Mountains LGAs.
Northern NSW LHD (NNSWLHD)	Improving health staff knowledge of the telephone interpreter service	The recently appointed CALD representative on NNSW LHD's Community Engagement Advisory Council has identified the need to improve health staff knowledge of the telephone interpreter service. In response, an article will be developed for an upcoming NNSW LHD newsletter to highlight use of this service. CALD members of the community will also be asked to sign up to the NNSW LHD community engagement database, which is utilised to inform community members and organisations of opportunities to be involved in health events/activities/services.
Northern Sydney LHD (NSLHD)	Health Care Interpreter Service promotion	NSLHD will be implementing a project to increase awareness of the health care interpreter service in CALD background communities. Project activities will include the development of a consumer friendly brochure promoting the availability of interpreting services and interpreter required cards. The resources will be developed in partnership with community representatives. To assist in communicating the information to CALD background communities, NSLHD staff will also deliver information sessions on interpreting services to CALD community groups in community venues. New multilingual posters promoting interpreting services will also be developed for display in NSLHD facilities.
South Eastern Sydney LHD	Pilot project to trial computer tablets in inpatient settings with Chinese patients	This project aims to assess the feasibility of using computer tablets to disseminate translated health information to an inpatient population, focusing on Chinese speaking patients in the Cardiology Ward at St George Hospital. In 2013-14, a range of translated hospital orientation and other patient information resources will be preloaded onto computer tablets and given to patients on arrival in the ward. The acceptability of the tablet computer device and the usefulness of the translated health information will be evaluated to determine the feasibility of using this technology with other multicultural populations.
Southern NSW LHD	Filipino, Thai and Vietnamese women – participation in cervical screening	These emerging cultural groups of women are often marginalised due to rural isolation (lack of transport, appropriate / affordable services, female health practitioners). Frequently they had had little or no health care and are not participating in cervical screening. The Women's Health program will target these groups with the aim of improving their rate of participation in cervical screening.
South Western Sydney LHD	'Falling in between the cracks': Barriers to diabetes self-management in culturally diverse patients from non-English speaking backgrounds	This study aims to explore the understanding of diabetes, its nature and health implications and self-management practices in English-speaking migrants from non-English speaking backgrounds. This research aims to uncover the issues for people with diabetes who fall in between the gap of the English-speaking host culture and migrants who are not proficient in the host language. For those linguistically challenged individuals, interpreters and translations are often provided to address the language barrier, however, for those who are able to speak English, 'cultural interpreters' may be needed to deal with cultural issues influencing health and self-management. The intended outcomes are that patients referred to the diabetes clinic of Campbelltown and Liverpool hospitals in the last two years will be reviewed. Patients who are of Filipino or Indian ethnicity will be invited to participate in the study. This research may help health professionals to care more efficiently for these patients.
Sydney LHD	CALD Healthy Lifestyle Program 2013-14	This program will involve SLHD Multicultural Health Service working in partnership with a range of relevant agencies to provide a healthy lifestyle program for local CALD communities. The program will include cancer prevention in partnership with the Cancer Council NSW and BreastScreen; physical activity and nutrition programs in partnership with non-government organisations, relevant health professionals and with support from local councils; tobacco use prevention projects in partnership with the SLHD Health Promotion Service; health literacy programs focussing on the aged (falls prevention), using medicines wisely, young families (parenting programs), women's and men's health.
Western NSW LHD (WNSWLHD)	Facilitate increased access to interpreters for individuals living in rural and regional communities	This initiative will benchmark performance in the use of interpreters (occasions of service) for WNSWLHD against another rural region with similar demographics. Results will be provided to Executive and Health Service Managers with recommendations for improvement. Strategies will be developed (e.g. use of videoconference) to provide education on working with interpreters to smaller communities. The intended outcome is for the rate of Health Care Interpreter Service usage in rural and regional areas to be comparable to the rate of population and health need, and equivalent to an LHD with similar demographics.
Western Sydney LHD	Connecting Care for CALD background communities	This statewide initiative will be adapted to the needs of the CALD population living in Western Sydney LHD. It includes intensive collaboration with clinical services in mapping existing services to identify gaps in service delivery and access barriers. Healthy lifestyle programs will be adapted and relevant resources will be translated. Multicultural health workers and bilingual community educators will be engaged to promote the service and educate CALD background communities about self-management programs. Cultural competence training will be offered to staff working on self-management programs.
PILLARS		
Agency for Clinical Innovation	Multicultural Health Managers and CALD stakeholder input into ACI models of care	The Agency for Clinical Innovation (ACI) has confirmed a new mechanism to consolidate input from LHD Multicultural Health Managers into ACI models of care. ACI will also include input from these managers and CALD stakeholders into the development of ACI's Consumer Engagement Framework.
Bureau of Health Information (BHI)	Stakeholder engagement	BHI is finalising a stakeholder mapping and identification project that will inform future stakeholder engagement activities and focus on working more closely with target audiences, including CALD communities. Engagement opportunities will be present across a range of work programs, including reports, presentations, workshops and research projects.
Clinical Excellence Commission	Health Literacy Guide	The Health Literacy Guide will be targeted at hospitals and health services and will focus on practical issues surrounding health literacy such as navigation, communication, literacy and numeracy. It will also cover assessment of barriers to health literacy. The Guide will be accessible on the CEC Partnering with Patients internet page. In support of the Guide, the CEC will provide assistance to NSW hospitals and health services.

HEALTH SERVICE	PROJECT/INITIATIVE	PLANNED INITIATIVES 2013-14
Health Education and Training Institute	Statewide Learning Management System	HETI will monitor staff uptake of its online learning module 'Working in Culturally Diverse Contexts' via the new statewide learning management system linked to HETI's online learning centre.
NSW Kids and Families	Youth Health resource kit	This resource kit will provide information for staff who provide health services for young people. The resource kit will be adapted from the Adolescent Health GP Resource Kit second edition, which resulted from a collaboration between the Transcultural Mental Health Centre and the then Centre for the Advancement of Adolescent Health. The theme of working well with young people from diverse cultural backgrounds is integral to the resource kit, which includes a specific chapter on culturally competent practice. It is planned to publish the resource kit in both online and hard copy formats.
HEALTH NETWORKS		
St Vincent's Health Network	Data collection for language and interpreter fields	This project aims to improve recording of language and interpreter fields in clinical patient databases using prompt alerts to staff on admission to assess the need for an interpreter.
Justice Health & Forensic Mental Health Network	Care Navigation Support Program self-management education	The Care Navigation Support Program (Connecting Care) is planning to facilitate several small group education sessions for patients from CALD backgrounds with the assistance of interpreters. The aim is to facilitate access to interpreters and educate CALD background patients on their chronic disease in order to help them to make informed decisions on their health care.
Sydney Children's Hospitals Network (NB: this report relates to SCH Randwick only)	Tour of Sydney Children's Hospital for multicultural groups	This tour will be an opportunity for the multicultural community to see how a children's hospital runs and the range of family-friendly services it offers, together with a welcoming morning tea. Interpreters will be available to facilitate communication between speakers and visitors and accompany the group on a tour of the hospital to visit departments, wards and other areas of interest.
STATEWIDE HEALTH SERVICES		
NSW Ambulance	Chaplaincy Services	NSW Ambulance is seeking to engage the services of an Islamic chaplain to provide pastoral care to its Muslim staff and to provide support to the broader Islamic community in times of crisis. This voluntary position will give the Chaplaincy Team additional capacity, especially in South Western Sydney LHD, which has a significant Islamic population. The chaplain will act as a liaison between ambulance staff and Islamic families during times of emergency, and help to inform NSW Ambulance about Islamic cultural and religious practices.
Multicultural Health Communications Service	Organ Donation	For this statewide project the NSW Multicultural Health Communication Service is working in conjunction with Transplant Australia and the Organ and Tissue Donation Service to target CALD communities to increase awareness about organ donation and its benefits.
Multicultural HIV and Hepatitis Service	Asian Gay Men's Project	An analysis of recent NSW HIV notification data has revealed an increase in notification rates among CALD gay men, in particular those from Asian backgrounds. The Asian Gay Men's Community Development Project will implement a range of targeted strategies designed to increase HIV knowledge and awareness, and decrease stigma and discrimination.
Multicultural Problem Gambling Service for NSW	Increasing presence at Catholic Clubs	This initiative will focus on information dissemination and cultural competency training to Catholic Clubs' floor staff in order to increase mental health literacy among CALD community members impacted by problem gambling and enhance engagement and referral pathways to services, in partnership with the Catholic Care GAINS (Gambling Awareness, Intervention and Support) program.
NSW Education Program on Female Genital Mutilation	Implementation of statewide training program on new clinical guidelines	These draft guidelines for pregnancy and birthing care for women affected by Female Genital Mutilation (FGM) have been developed in response to the needs of women now living in NSW who have previously experienced FGM. Once approved, the guidelines will be distributed to LHDs for implementation. The Professional Education Officer will map out a training schedule for all NSW hospitals, particularly where it is known that people from FGM practicing communities have been or are to be resettled.
NSW Refugee Health Service	Refugee Health Nurse Program Evaluation	The Refugee Health Nurse Program will be evaluated to determine that the program was implemented as intended, and assess whether newly arrived refugees have benefited from the program.
Transcultural Mental Health Centre	TranSCRIBE Anthology	The Transcultural Mental Health Centre (TMHC) coordinates a biennial young writer's initiative known as TranSCRIBE, which is open to all young people aged 12-24 years across NSW. Since the competition began in 1998, over 2,200 entries have been received. The Ministry's Mental Health Drug and Alcohol Office provided funding for the compilation of an anthology targeting young people, accessible across the state. The anthology will also be a resource for mental health professionals to engage young people and their families with a section on young people's mental health, recovery and help seeking behaviours. The anthology will include the stories of winning entries and finalists from the eight TranSCRIBE events. The book launch is scheduled for Mental Health Month, October 2013. Following this, copies will be sent to all secondary schools, key libraries and youth agencies in NSW. The event will also be used as a vehicle to invite young people, schools and relevant agencies to participate in TranSCRIBE 2014.
Women's Health at Work Program	Development of a training package to inform and prepare CALD women who are planning to enter the workforce	At the end of this four-module training program participants will have: <ul style="list-style-type: none"> • increased their knowledge and understanding of the history of employment for women in western societies and identify the similarities and differences in their own societies in history and currently • gained an understanding of unions, industrial relations/agreements, and private enterprise • understood the importance of self care and how to access women's health services • gained an understanding of workplace health, safety and manual handling techniques • learned how to write a CV, apply for a position, dress for an interview, and been given the opportunity of practicing interview skills. Bilingual Community Educators will be trained to deliver the package, whose implementation will be evaluated over the next 12 months.

NSW CARERS (RECOGNITION) ACT 2010

NSW Health is committed to working with carers to improve the quality of life of carers and the people they care for. This responsibility is shared throughout all levels of the public health system.

The *NSW Carers (Recognition) Act 2010* recognises that 11 per cent of the NSW population are carers. Under the *NSW Carers (Recognition) Act 2010*, all staff and agents of NSW Health are required to:

- understand the *NSW Carers Charter* and take action to reflect its thirteen principles in policy and service delivery
- have processes in place to consult with carers on policy matters that may affect them
- have human resource policies in place to serve the needs of the NSW Health workforce who are carers.

Implementation of the Act has been progressing across NSW Health over the 2012-13 financial year and NSW Health services have reported the progress achieved to the Ministry. The *NSW Carers (Recognition) Act 2010* and the *NSW Carers Charter* are available on the NSW Ministry of Health website with a range of other helpful carer resources.

The Ministry of Health has developed human resource policies that provide support to NSW Health employees who are carers and their managers. Advice about the rights of carers who are employees of NSW Health and the obligations of managers to employees who are carers is available on the NSW Health website. Key initiatives that have been progressed over the 2012-13 financial year include the eCarer online education program and the Top 5 program.

The eCarer program was developed by Western Sydney LHD in consultation with the Ministry of Health, LHD staff, Carers NSW and carers. The training program includes four modules to assist NSW Health staff and managers fulfil their obligations under the *NSW Carers (Recognition) Act 2010* and the accompanying *NSW Carers Charter*. The e-learning program went live in June 2013 and LHDs are currently promoting the package.

Top 5 is a patient-centred initiative which promotes dialogue between staff and the carer of a patient who has a cognitive impairment. The carer's knowledge and expertise in communicating with and caring for the patient are acknowledged, and strategies are identified and recorded. On admission to an acute care setting the five best strategies for providing support to a patient are identified through discussion with the patient's carer, or carers. The initiative was conceived and piloted in Central Coast LHD and has been rolled out in 15 hospitals across NSW by the Clinical Excellence Commission (CEC). Implementation began in July 2012 and the final report of the evaluation is expected by January 2014.

PRIVACY MANAGEMENT PLAN

Compliance summary

The Ministry provides ongoing privacy information and support to the NSW public health system. Specific projects this year have included:

- development of the Privacy Information Leaflet for Staff. A new resource summarising privacy obligations for all staff
- assistance with the development of the Carer's Leaflet: Patient information and privacy
- guidance for health service staff regarding the requirements for retention of records in relation to the Commissions of Inquiry into Child Sexual Abuse
- development of Online Privacy Training materials in partnership with the Health Education and Training Institute (HETI).

The Ministry's Privacy Contact Officer has attended or presented to various groups or committees in 2012-13, including:

- participation in the Health Chaplaincy Liaison Group
- Ministry of Health privacy orientation for Public Health Officer trainees
- privacy presentation for the Ministry's Workplace Relations Branch
- privacy presentation for the Greater Western Human Research Ethics Committee (HREC)
- privacy presentation for the NSW Ministry of Health HREC Executive Officer and RGO Roundtable Meeting.

The NSW Health Privacy Contact Officers network group has met twice within the year to update staff on changes to policy and legislation relevant to privacy management, and to discuss compliance actions resulting from privacy complaints and internal review.

Internal Review

The *Privacy and Personal Information Protection Act 1988* provides a formalised structure for managing privacy complaints relating to this Act and the *Health Records and Information Privacy Act 2002*. This process is known as Internal Review.

During 2012-13, the Ministry of Health received no applications for Internal Review.

PUBLIC INTEREST DISCLOSURES

The NSW Ministry of Health developed an internal reporting policy during 2011 in consultation with NSW Health agencies. The policy PD 2011_061 Public Interest Disclosures (PID) was implemented on 30 September 2011 in compliance with the legislative requirements for public organisations to implement an internal reporting policy.

The policy applies to all NSW Health organisations and requires each agency to appoint a Disclosures Co-ordinator and to ensure employees are aware of how to report serious misconduct. The Ministry has assisted in the implementation of the policy by conducting two PID Forums for disclosures co-ordinators and contact officers, including training sessions provided by the NSW Ombudsman. The Ministry of Health has published contact details for all disclosures co-ordinators on the Ministry intranet, and each LHD is required to have the disclosures co-ordinators details published on their own Intranet. The Compliance Unit at the Ministry assisted agencies to meet their reporting requirements to the NSW Ombudsman and provides a liaison point for co-ordinators, disseminating relevant resources and information to disclosures co-ordinators across NSW Health.

Each agency has provided a tailored staff awareness strategy to suit the size, location and structure of the agency. Strategies included policy briefings, email notifications, training sessions including internal training and sessions conducted by the NSW Ombudsman PID Unit as well as use of the NSW Ombudsman e-learning training session. Many agencies are providing education about PIDs to new employees on induction.

SENIOR EXECUTIVE PERFORMANCE STATEMENTS

Dr Mary Foley

Position Title: Director General

SES Level: 8

Remuneration: \$476,200

Period in Position: 2 years, 3 months

In 2012-13, Dr Foley provided high level executive leadership and management of the NSW Health system and led negotiations with the Commonwealth and other States and Territories to ensure the effective and sustainable implementation of National Health Reform within the context of the NSW Government's own reform agenda for NSW Health.

Building on the governance and funding reforms introduced in 2011-12, which support enhanced local decision making and for the first time linked funding to clinical care, Dr Foley has provided executive oversight of the next key stage of

reform for the NSW Health system, which is focused on the development of new models of integrated care in partnership with the Pillars and LHDs.

Key achievements in 2012-13

- Achieved key targets and measures set out under Goals 11 and 12 in the *NSW 2021: A Plan to Make NSW Number One* and the *NSW Government response to the Final Report of the Commission of Audit* (August 2012).
- Refined the NSW Health funding, purchasing and performance frameworks implemented in 2011-12 and introduced Activity Based Funding for sub-acute, mental health and outpatient services across the 15 LHDs, the Sydney Children's Hospitals Network, St Vincent's Health Network and Justice Health & Forensic Mental Health Network.
- Developed effective partnerships with the private and non-government sector through a range of initiatives including planning for the new Northern Beaches Hospital, finalising arrangements between Royal Prince Alfred Hospital and LifeHouse for the provision of world class cancer services.
- Established NSW Kids and Families to provide system-wide leadership and champion outstanding health, wellbeing and healthcare for all mothers and babies, children, young people and families in NSW.
- Established NSW Health Pathology to improve service delivery and to reduce the cost of pathology services for LHDs.
- Oversaw legislative changes to include the Cancer Institute NSW as the sixth Pillar within the NSW Health governance framework.
- Delivered the Strategic Review of the Ambulance Service of NSW, including a review of the operational effectiveness, financing and governance of the service and a review of its aeromedical (rotary wing) operations and the development of related Reform Plans.
- Oversaw development of key NSW Health policies including a Women's Health Framework, NSW Service Plan for People with Eating Disorders and Advanced Planning for Quality Care at End of Life.

Karen Crawshaw PSM

Position Title: Deputy Director General, Governance, Workforce and Corporate

SES Level: 7

Remuneration: \$412,200

Period in Position: 6 years, 9 months cumulative as Deputy Director General

In 2012-13, Ms Crawshaw oversaw the provision of legal, legislative and property services, by the Ministry, was responsible for leading Ministry work on procurement and asset management policy, and for supporting high standards of governance and accountability across NSW Health. Ms Crawshaw led key industrial relations negotiations and consultation and provided strategic leadership on action to enhance the culture, productivity and capacity of the NSW Health workforce.

The Director General has expressed satisfaction with Karen Crawshaw's performance.

Key achievements in 2012-13

- Provided strategic leadership in meeting the government's election commitment to provide 2,475 additional nurses and continued the implementation of the staffing arrangements under the Nurses' and Midwives' Award.
- Provided executive leadership of the human resource, governance and legal changes required to conclude implementation of the Governance Review of NSW Health.
- Led wage negotiations for 2012-13 which were conducted under the provisions of the *Public Sector Wages Policy* and management oversight of industrial relations across NSW Health.
- Leadership in implementation of the NSW Health Workplace Culture Framework including conduct of the second of a series of *Your Say* staff surveys across NSW Health.
- Strategic oversight of negotiations for a long term service partnership with Lifehouse at RPA.
- Leadership and development of strategies to enhance the productivity and capacity of the NSW Health workforce including:
 - implementation of the Respecting the Difference Aboriginal Cultural Training Strategy
 - partnering with the NSW Department of Education and Communities to develop a scholarship programme to increase the number of enrolled nurses across NSW Health
 - development of a new Work Health and Safety policy for NSW Health supported by effective governance tools
 - working with other States, Territories and the Commonwealth on strategic management of medical internship.
- Led further development of effective health system local decision making through the publishing of a revised Corporate Governance Compendium and provision of a program of training for Districts and Network board members.
- Strategic oversight of the Health Legislative Program.

Dr Rohan Hammett

Position Title: Deputy Director General, Strategy and Resources

SES Level: 7

Remuneration: \$412,200

Period in Position: 1 year, 5 months

Dr Rohan Hammett joined the Ministry in February 2012 from the Commonwealth Department of Health and Ageing (DoHA) where he had been the National Manager of the Therapeutic Goods Administration and a member of the Executive of DoHA.

The Director General has expressed satisfaction with Dr Hammett's performance.

Key achievements in 2012-13

- Oversaw the ongoing design and implementation of the NSW State Funding Model based on activity-based payments.
- Led the implementation of the National Health Reform Agreement requirements in NSW.

- Oversaw implementation of recommendations from the Commission of Audit.
- Delivered the NSW Health Total Asset Management Plan.
- Continued management of the Grants Management Improvement Program.
- Provided Secretariat support for the NSW Minister at the Standing Council on Health.
- Attended Australian Health Ministers' Advisory Council meetings.
- Represented NSW on the Hospitals Principal Committee.
- Managed inter-government negotiations and Commonwealth-state Relations for NSW Health.
- Managed the policy areas supporting Aged Care, Primary Health, Rural Health, and Multicultural Health.
- Developed new funding programs to support Pain Management and Palliative Care.
- Member of the Board of Health Infrastructure advising on capital developments across NSW, the Sax Institute and the Boards of the Agency for Clinical Innovation and the Clinical Excellence Commission.

Dr Kerry Chant

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

SES Level: 7

Remuneration: \$412,200

Period in Position: 4 years, 5 months cumulative as Chief Health Officer and Deputy Director General

Dr Kerry Chant is a public health physician with extensive experience in the NSW public health system. Dr Chant leads strategic population health programs and policies which address tobacco use, obesity, chronic disease prevention, public health emergencies, Aboriginal Health as well as maternal and child health.

The Director General has expressed satisfaction with Dr Chant's performance.

Key achievements in 2012-13

- Managed the development and implementation of the Save the Date to Vaccinate immunisation campaign involving television and radio advertisements, shopping centre posters, brochures and other resources, including a vaccination reminder 'app' that parents can download to their mobile phone.
- Led the rollout of human papillomavirus (HPV) vaccination for boys in Year 7 of high school, along with the first year of a two year catch up vaccination program for boys in Year 9.
- Achieved significant progress in the reach of programs implemented to reduce overweight and obesity rates in children and young people (5-16 year):
 - 73 per cent of early childhood services have participated in training to June 2013
 - exceeding the 2012-13 target of 35 per cent with over 40 per cent of participating services adopting program practices to agreed standards
 - 63 per cent of all primary schools in NSW have participated in training to June 2013.

- Developed and launched the Increasing Organ Donation in NSW: Government Plan 2012, which implements the National Reform Agenda, with the goal of boosting donation rates in NSW.
- Developed and implemented the Strategic Framework Oral Health 2020 which sets the platform for oral health action in NSW into the next decade.
- Promoted increased access to fluoridated public water supplies.
- Developed and implemented the NSW HIV Strategy 2012-15: A New Era which aims to virtually eliminate new HIV infections in NSW by 2020 by increasing testing, treatment and safe sex practices.
- Developed and launched the NSW Aboriginal Health Plan 2013-23, which outlines a vision, goal and strategic direction to meet the challenge of closing the health gap between Aboriginal and non-Aboriginal people by sharing the responsibility for achieving health equity for Aboriginal people in NSW.
- Implemented the Type 2 Diabetes module, which is part of the Get Healthy Service and available to all NSW adults.
- Managed the development of the Advance Planning for Quality Care at End of Life Action Plan 2013–18, which identifies strategic partnerships with other government agencies and sectors to improve this aspect of planning for end of life care in primary, acute and aged care settings.
- Implemented the *Tobacco Legislation Amendment Act 2012* which amends the *Smoke-free Environment Act 2000* to make the additional public outdoor places smoke-free areas from 7 January 2013.

Ken Whelan

Position Title: Deputy Director General, System Purchasing and Performance

SES Level: 7

Remuneration: \$403,845

Period in Position: 12 months

Ken Whelan Joined the Ministry in July 2012 having had over 20 years Senior Management experience in the Health sector with 15 of those years as a Chief Executive in Hospital and Health services in both New Zealand and Queensland.

The Director General has expressed satisfaction with Mr Whelan's performance.

Key achievements in 2012-13

- Developed functional relationships with all LHD and Pillar Chief Executives to ensure the agreed Accountability Framework is understood, implemented and monitored.
- Developed the Supported Accountability Performance Framework for NSW Health and ensured the framework is understood to achieve buy in from LHDs.
- Evolved the purchasing framework for NSW Health to ensure purchasing is aligned to improved health outcomes.
- Led the review of NSW Ambulance and ensured the implementation plan is actioned.
- Led the review of aeromedical services in NSW which has resulted in an agreed reform plan.
- Oversaw the restructure of the Mental Health and Drugs and Alcohol Office following establishment of the Mental Health Commission.

- Delivered the Whole of Hospital Program across NSW which is being implemented across pilot sites in 2013 and rolled out across the state in 2014.
- Supported achievement of the National Elective Surgery Targets (NEST) at state level and demonstrated a significant improvement in National Emergency Access Targets (NEAT) across the state.
- Developed and delivered an updated Performance Framework which guides the sector through the Purchaser/ Provider model now in place in NSW.
- Adopted a more population based approach in the 2013-14 Service Agreements.
- Commenced work on the development of a more equitable and consistent Public Outpatient Framework which will be implemented in the 2013-14 fiscal year.

John Roach PSM

Position Title: Chief Financial Officer

SES Level: 6

Remuneration: \$328,650

Period in Position: 4 years, 11 months

John Roach commenced as NSW Health's Chief Financial Officer from July 2009 having held previous senior executive appointments within the NSW Government and NSW Health including Chief Executive of HealthShare NSW and Director of Financial and Corporate Services at the former South Eastern Sydney Illawarra Area Health Service.

The Deputy Director General, Strategy and Resources, has expressed satisfaction with Mr Roach's performance during 2012-13.

Key achievements 2012-13:

- Provided effective financial management and control of NSW Health's \$17.3 billion recurrent budget and complied with NSW Government requirements to manage the NSW Health recurrent budget within net cost of services limits.
- Successfully implemented revised budget allocation and cash payment systems to LHDs and other controlled entities of NSW Health to comply with National Health Reform Agreement requirements from 1 July 2012.
- Provided strategic advice to the Director General and the Minister for Health to support their involvement in the Cabinet Standing Committee on the Expenditure Review.
- Served as the principal representative on matters of financial management and performance in monthly performance review meetings with LHDs and Specialty Health Network Chief Executives to ensure compliance with financial benchmarks and targets, liquidity management within budget parameters and implementation of remedial actions where required.
- Led the process to improve the timeliness of payment of small business invoices by LHDs and other reporting entities, achieving 98 per cent of small business suppliers being paid within 30 days by end June 2013, a 26 per cent improvement during 2012-13.
- Substantially improved end of year financial statement reporting procedures resulting in the timely completion of 30 June statutory accounts within Treasury mandated deadlines.

- Built stronger relationships with reporting entity Audit and Risk Committee Chairs to facilitate improved financial audit compliance.
- Strengthened governance over revenue policy and led the development of IT revenue support tools for frontline staff.

David Gates

Position Title: Director Business and Asset Services and Chief Procurement Officer

SES Level: 5

Remuneration: \$292,450

Period in Position: 6 years cumulative as Director, Business and Asset Services and Chief Procurement Officer

The Deputy Director General Governance Workforce and Corporate has expressed satisfaction with Mr Gates' performance.

Key achievements in 2012-13

- Provided policy direction and leadership in the achievement of NSW Health goods and services procurement savings targets. This included the upgrade to the NSW Health procurement web-portal providing procurement practise support across NSW Health.
- Managed a program of business reforms including the Lifehouse at Royal Prince Alfred Hospital lease and service delivery agreement.
- Executive leadership of the implementation of the new asset and facility management information system, capable of delivering a state consistent asset register and associated asset management systems and tools. Completed real property audits in two LHDs.
- In environmental sustainability, developed the NSW Health strategy 2012-15, had input into the audit office energy performance review and scoping studies on LHD energy management initiatives.

Leanne O'Shannessy

Position Title: Director Legal and Regulatory Services and General Counsel

SES Level: 5

Remuneration: \$292,450

Period in Position: 5-6 years cumulative as General Counsel

In 2012-13, Ms O'Shannessy provided legal and legal policy advice to the public health system. Ms O'Shannessy was responsible for the development of legislative proposals and management of the Subordinate Legislation Program and litigation (including oversight of legal panels for employment law and medico-legal/coronial matters) involving the Ministry or involving issues of statewide significance and conducts regulatory compliance, including oversight and conduct of prosecutions.

The Deputy Director General, Governance, Workforce and Corporate has expressed satisfaction with Ms O'Shannessy's performance.

Key achievements in 2012-13

- Managed the Health Legislative Program including the Subordinate Legislative Program including:
 - *Public Health Amendment (Vaccination of Children Attending Child Care Facilities) Act 2013* – to support vaccination of children
 - *Human Tissue Legislation Amendment Act 2012* – to support policies and strategies aimed at increasing donation rates in NSW
 - *Public Health Regulation 2012* – to support the commencement of the *Public Health Act 2010*
 - Report on the Review of section 7(4)(c)(i) of the *Private Health Facility Act*.
- Managed the development of a series of training modules designed to support LHD and Specialty Health Network board members in undertaking their roles.
- Managed the review of funding arrangements for the Therapeutic Advisory Group and transition from the Ministry to the Clinical Excellence Commission.

Annie Owens

Position Title: Director, Workplace Relations

SES Level: 5

Remuneration: \$276,870

Period in Position: 4 years, 9 months

In 2012-13, Ms Owens managed the Ministry's human resources strategy and provided support and guidance to staff on all personnel issues. Ms Owens managed the systemwide industrial relations issues, including the arbitration and negotiation of wages and employment conditions. Ms Owens also managed personnel functions and administration of the Health Executive Service and led human resources and workplace health and safety policy development relevant to the NSW Health Service.

The Deputy Director General Governance Workforce and Corporate has expressed satisfaction with Ms Owens's performance.

Key achievements in 2012-13

- Managed the wage negotiations for 2012-13 conducted under the provisions of the Public Sector Wages Policy.
- Managed the introduction of a new Work Health and Safety policy.
- Managed the continued implementation of Staffing Arrangements under the Nurses and Midwives' Award.
- Developed a revised policy for Executive Performance management.
- Established Ministry recognition and reward programme.

SENIOR EXECUTIVE SERVICE

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

SES LEVEL	AS AT 30 JUNE 2013	AS AT 30 SEPTEMBER 2012*
8	1	1
7	4	4
6	1	1
5	5	5
4	11	10
3	6	6
2	3	2
1	2	0
Total positions	33	29

Number of female CES/SES officers within the Ministry of Health:

AS AT 30 JUNE 2013	AS AT 30 SEPTEMBER 2012*
15	14

* From 1 July 2012, a revised Ministry executive structure was implemented following a Governance Review of NSW Health.

ENVIRONMENTAL SUSTAINABILITY

The NSW Health Environmental Sustainability Strategy 2012-15 sets out the NSW Health vision, identifies opportunities to incorporate environmental sustainability into our business and proposes strategic priorities for action.

NSW Health is committed to participating in broader sustainability programs, which includes being an active member of CitySwitch and participation in Earth Hour and Mobile Muster.

Energy management

- A statewide business case for an Energy Performance Management Strategy was completed. It identifies the need for development of procurement pathways to access new and emerging areas of the market, alternative financing mechanisms, targets and benchmarks, and capacity building alongside many other areas critical to the implementation of a successful energy management program.
- The implementation of the Energy Performance Management Strategy will establish a framework for LHDs to undertake improved energy management across their facilities.

- In 2012-13 five applications were approved under the Sustainable Government Investment Program and \$5.1 million was invested in energy efficiency projects. Projects included the completion of a major control system and lighting upgrade at Westmead Hospital, a chiller replacement at Maitland Hospital, a boiler upgrade at St George Hospital, lighting upgrades across a number of sites in the Mid North Coast LHD and at the NSW Ambulance Headquarters.
- NSW Health and the Office of Environment and Heritage entered into a partnership to develop a hospitals energy and water benchmarking tool, which is scheduled to be rolled out by June 2014.
- 27 Ambulance stations across the Illawarra and Hunter regions received over \$300,000 worth of energy and water efficiency upgrades under the Office of Environment and Heritage's Government Building Retrofit Program. These projects are expected to save around \$51,000 in utility bills, 240 megawatt hours of electricity and one million litres of water each year.
- In June 2013 NSW Health accepted the majority of recommendations provided by the Auditor General in the Performance Audit: Building energy use in public hospitals.

Waste Reduction and Purchasing Policy

NSW Health has shown commitment to recycling, reusing and providing education in the area of waste reduction and procurement. Some examples include:

- Liverpool Hospital is the first NSW hospital to recycle PVC medical products such as oxygen masks and tubing and IV fluid bags. Products are taken to a recycling facility where they are turned into reusable product. The Hospital also recycled 98 per cent of waste paper and office materials.
- The Health Education and Training Institute developed a targeted Waste Management Education Program to drive improved levels of recycling and whole-of-life purchasing methods across the LHDs.
- HealthShare reused 75 per cent of existing office furniture in a new fit out in the Newcastle Service Centre to reduce the amount of waste to landfill and reduce costs.
- The Ministry of Health has rolled out a security-card printing system which has reduced the amount of printing paper and toner wasted. Additionally, a revamp of the stationery available for purchase by the Ministry now includes a range of quality recycled products.

