



MINUTES

HPC ref: 22-HPC-2311

Health Performance Council meeting number 70

Date and time:	Thursday, 6 October 2022, 12:30pm – 3:30pm (ACST)
Location:	Online via Microsoft Teams
Purpose:	Health Performance Council meeting
Chaired by:	Prof Stephen Duckett
Members present:	Prof Judy Searle (Deputy Chair), Dr Daniel Tyson, Dr Diane Watson, Kae Martin, Mohammad Al-Khafaji, Tanya Lehmann
Secretariat:	Andrew Wineberg, Nick Cugley
Invited guests in attendance:	None
Apologies:	Prof Martin Hensher

Outcomes:

1. Welcome to meeting and Acknowledgment of Country

- Chair opened the meeting with an Acknowledgment of Country.
- Council noted apology from Martin Hensher.

2. Register and declaration of interests

- Nil to report.

3. Approval of draft minutes of HPC meeting #69 (held on 18 August 2022)

- Council confirmed the minutes of the previous meeting as a true and correct record of the meeting.
- Council approved signed minutes of previous meeting be made available on the HPC website.
- Council noted the status of recommended actions arising from the previous meeting.

4. HPC 4-yearly report

- Council noted correspondence from the Minister (see agenda item 7) requesting the 4-yearly report be provided "as expeditiously as possible".
- Council noted the Minister's letter also notes the report is due for tabling in Parliament by the end of this sitting year (1 December 2022).
- Council agreed to review a final draft of the report prepared by the Secretariat at its 17 November 2022 meeting for approval.
- Council agreed to have the 4-yearly report finalised and delivered to the Minister for tabling in Parliament before 1 December 2022 (the last sitting day of Parliament).

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- Council reviewed the working draft of the 4-yearly report prepared by the Secretariat and provided editorial guidance and feedback on content, style, look and feel:
 - Add an age-sex pyramid for South Australia compared to Australia to the demographics section.
 - Add narrative and commentary on data limitations and context where large changes over time or large differences between regions are observed. For example, country services can differ in operation, acuity, or workforce makeup from their metropolitan counterparts. This may explain some observed differences in selected performance metrics, such as ED or elective surgery wait times. Another example is that time series changes may be explained by changes to counting rules or updates to data definitions between years.
 - Add to the Chair's introduction some commentary on the quality and limited availability of data on cultural and language diversity, the impact this has on monitoring, and suggested actions for the health system.
 - Add narrative and commentary to the LHN trend graphs, highlighting areas of greatest gain or decline and noting "quiet achievers" amongst the LHNs.
 - Add length of stay by LHN for all overnight inpatients indicator to the Enhancing Patient Experience section to provide context to the wait times performance metrics.
 - Add a technical appendix and a statement on data quality to the report.
 - Healthengine is only one way to book a GP appointment and Healthengine reported wait times data in the 4-yearly report may not be representative. Determine what percentage of all GP bookings are made via Healthengine for context and put Healthengine table in the report after AIHW and Services Australia-sourced data.
 - State and territory graphs in the 4-yearly report are sorted in the same order that ABS does in their reports (ie. NSW, Vic, Qld, SA, WA, Tas, NT, ACT). Council agreed to keep this ordering convention in its 4-yearly report.
 - Change order of LHN graphs in the 4-yearly report to metropolitan alphabetical (CALHN, NALHN, SALHN), then WCHN as it's a statewide service located in metro, then country alphabetical (BHFLHN, EFNLHN, FUNLHN, LCLHN, RMCLHN, YNLHN).
 - Report sample sizes behind ambulance median, 90th percentile and seen-within-30-minutes response times data for context.
 - Investigate feasibility of reporting ambulance wait time data by category, recognising tight timeframes to have report completed by deadline.
 - Graph median and 90th percentile ambulance response times by state and territory over the last several years from the RoGS-sourced data.
 - Note known data quality issues behind outpatient wait times data.
 - Add total maintenance care beddays graphs to maintenance care section for additional context; check that the definition of maintenance bed-days accords with that used by AIHW and add a note to clarify.
 - Investigate feasibility of reporting cancer survival rates by age and sex, recognising tight timeframes to have report completed by deadline.
 - Council noted update from Secretariat that potentially preventable admissions data has been removed from SA Health's hospital inpatient activity data collection due to data quality concerns, but agreed to leave this indicator in the 4-yearly report.
 - Investigate feasibility of reporting a demographic breakdown of Covid deaths, recognising tight timeframes to have report completed by deadline.

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- Indicators to be removed from the 4-yearly report as it is unlikely suitable data will be sourced in time to meet the deadline. These indicators may be considered again for inclusion in the Council's update to the 4-yearly report in early 2023:
 - 〉 Remove years of potential life lost indicator.
 - 〉 Remove preventable mortality / avoidable deaths indicator.
 - 〉 Remove interpreter services requested/provided indicator.
 - 〉 Remove breakdown of costs by sameday/overnight, staff types and select DRGs indicator.
 - 〉 Remove first-year professions employed indicator, unless suitable data is obtained in time to include.
 - 〉 Remove nursing and medical workforce projections indicator.
 - 〉 Remove state budget spent on Covid response indicator.

5. Palliative Care Inquiry

- Council noted correspondence from the Minister (see agenda item 7) requesting that the Council commence its inquiry and summary terms of reference.
- Council agreed to discuss at its 17 November 2022 meeting future work to be undertaken to complete the inquiry.
- Chair and Secretariat agreed to discuss and plan technical steps required to complete the inquiry.

6. Chair's communication meetings

- Council noted Chair's update on progress of moving HPC and Secretariat functions out of DHW and into the Commission on Excellence and Innovation in Health (CEIH).
- Council noted Chair's update on progress of the draft Memorandum of Administrative Arrangement (MOAA) (see agenda item 7) between HPC and CEIH that proposes how the Council and the Commission can work together administratively while retaining functional independence from each other.
- Diane agreed to email Stephen her advice on the draft MOAA.

7. Correspondence – incoming / outgoing

- Council noted the correspondence.
- Council noted tabled documents:
 - Correspondence from the new CE of DHW replying to HPC Chair.
 - Draft MOAA that sets out how HPC and CEIH will work together while retaining independence.

8. Secretariat updates

- Council noted the updates (addressed in agenda item 6.)

9. Next meetings – dates to be agreed

- Council noted the details of the next meeting on 17 November 2022, including that it will be a face-to-face meeting and the start time has been updated to 9:00am ACST.
- Secretariat will send out a calendar update to members reflecting the change of time.

10. Any other business

- Nil to report.

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Meeting closed at 2:00pm ACST.

Responsibilities taken:

Agenda item	Responsible party	Action	Due date
3	HPC Secretariat	Make signed minutes of the previous meeting available on the HPC website.	17 Nov 2022
4	HPC Secretariat	Continue developing 4-yearly report as directed.	17 Nov 2022
5	HPC Secretariat	Chair and Secretariat discuss and plan technical steps required to complete the inquiry.	17 Nov 2022
6	HPC members	Diane Watson to email Stephen Duckett advice on the draft MOAA.	17 Nov 2022
9	HPC Secretariat	Send calendar update to members that reflects earlier start time of next meeting.	17 Nov 2022

Unresolved issues/Details to be addressed (if any):

Unresolved issue	Responsible party	Next steps to be taken
Nil.		

Date of next meeting:

Date: 17 November 2022, 9:00am–3:30pm (Adelaide time).

Venue: Meeting room 4, Level 2, CitiCentre Building, 11 Hindmarsh Square, Adelaide.
This will be a face-to-face meeting with teleconference facilities available for members who cannot attend in person.

I certify that this is a true and accurate record of the meeting outcomes:



Prof Stephen Duckett

Chair, Health Performance Council

17 November 2022