



Consumers Health  
Forum **OF** Australia

# Annual Report

## 2019-2020



representing consumers on national health issues

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# WHO WE ARE

The Consumers Health Forum of Australia (CHF) draws on consumer and community knowledge and experience to relentlessly drive innovation and improvements to the Australian health and human service system.

We are the national consumer peak body representing a wide variety of consumer organisations and individuals with an interest in health care consumer affairs.

Our membership is extensive and includes illness groups, disability groups, state peak health consumer organisations, professional, research and other health sector bodies. This diversity ensures we have the capacity, credibility and authenticity to provide deep, well-informed consumer insights and perspectives to governments and other decision makers.

**CHF works to achieve safe, quality, timely health care for all Australians, supported by accessible health information and systems.**

**We acknowledge the Australian Aboriginal and Torres Strait Islander peoples of this nation.**

**We acknowledge the traditional custodians of the lands on which our organisation is located and where we conduct our business – the Ngunnawal people.**

**We pay our respect to ancestors and Elders, past, present and emerging, for they hold the memories, traditions, culture and hopes of Aboriginal and Torres Strait Islander Australia.**

# VISIONS & VALUES

The Consumers Health Forum of Australia (CHF) has a vision for **a world class health and social care system centred on consumers and communities.**

CHF's work each day and each year contributes to achieving this vision.

We are committed to serving as advocates in the ongoing development and improvement of Australian health policy and practice.

To achieve our vision CHF **works together** with our members, partners and with our fellow stakeholders. We **respect the expertise, knowledge and skills** within and outside our organisation. We are **committed to excellence** and **act with integrity**. We are **daring in the pursuit of our purpose**.

**The Board of CHF is pleased to present the Annual Report for 2019–2020 which outlines our key achievements and areas of focus over the past year.**



# WHAT IS THE CHAIR SAYING?

2019-20 has been a year like no other in healthcare. Much of the country suffered enormous trauma as a result of climate change related events such as drought, bushfires and hailstorms, all commanding unprecedented policy and service delivery responses. The COVID-19 pandemic soon followed putting enormous potential strain on our health system and challenges to policy makers. This environment translated into a busy yet productive time for CHF as we focused on business as usual as well as playing our role in bringing consumers' insights to the pandemic response.

## Strategic focus

2020 is the mid-point in our current Strategic Plan 2018-2020. With change forever a constant in health, it was timely that we ensured it remained fit-for-purpose. We commenced 2020 with a strategic workshop with Board, staff and guest speakers. The workshop affirmed our key policy priorities where we continue to advocate for action: primary care reform, integrated services and systems, medicines policy, and preventive health. Digital health and attention to quality and safety were identified as overriding themes.

We recognised the value and potential in some of CHF's assets particularly Australia's Health Panel, Collaborative Pairs Australia and Real People, Real Data and decided to make some judicious investments from our own reserves in further developing and expanding Collaborative Pairs.

We committed to a program of strategic events where the spotlight can be put on the issues that matter to consumers, spearheaded by our Shifting Gears Summit, an inaugural Australasian consumer experience and leadership conference.

## Governance

CHF is governed by a high functioning, skills-based Board. We added to its diversity and continued our commitment to supporting emerging consumer leaders appointing Ms Roxanne McDonald from the Youth Health Forum as a Director.

CHF's financial performance in 2019-20 was pleasing. Under the guidance of the Finance, Audit and Risk Management (FARM) Committee chaired by Jan Donovan, the Board monitors CHF's finances which featured a steady diversification of income from government and other sources and, for the first time in many years, a modest surplus result. It is particularly pleasing that we report this result after investing some of our own reserves in some priority projects.

CHF's Governance Committee chaired by Jo Watson, continued to oversight a rolling review of all CHF's policies to ensure they reflect contemporary best practice.

## Our horizon

CHF is well embedded as Australia's pre-eminent voice for healthcare consumers, and we will continue to strive to ensure that we constructively and comprehensively continue to bring consumer insights to national policy discussions and discourse.

As it became apparent that the consumer voice will be all the more important as we embark on a journey of health policy and service reform that adapts our system to respond to 'COVID normal', CHF formed a Consumer Commission to work with us on a blueprint for reform. Their work and the insights of members will shape CHF's future advocacy.

I would like to thank my fellow Directors on the CHF Board, the talented and committed CHF team, all our members and the many consumers who devote their time to supporting our work. CHF can only function optimally with these ingredients in place.

*Tony Lawson, Chair*



# WHAT IS THE CEO SAYING?

*It is with much pleasure in the achievements of the CHF team that we bring you our Annual Report for 2019–2020.*

## Advocating for impact

CHF contributed to several government consultations and official inquiries including the Federal Budget, the Productivity Commission Inquiry into Mental Health and the Royal Commission into Quality and Safety in Aged Care. We welcomed the Australian Government's 10 Year Primary Health Care Plan and National Preventive Health Strategy and I was appointed to the expert steering groups advising on both.

We continued to host our Thought Leadership Roundtable series bringing together consumers, researchers, providers and policy makers to do 'deep dives' into contemporary health care issues of interests to consumers to make recommendations for change. In November 2019 we invited the Royal Australian College of General Practitioners (RACGP) and the NHMRC Partnership Centre for Health System Sustainability to join with us to examine social prescribing. The roundtable report has been used by PHNs and state organisations to scope activities in this area and has informed our joint advocacy for new policy.

As COVID loomed and affected our community so deeply, we worked with the NHMRC Australian Ethics Committee to develop a pandemic ethical framework and facilitated the participation of several consumers in this exercise.

CHF Talks was launched, a monthly webinar for members and stakeholders to put the spotlight on key and emerging issues. We closed off the year with the establishment of a Consumer Commission, a forum of consumer leaders, and a network of health experts, to work with us on a major policy piece on the future horizons for healthcare as we emerge from and learn to live with COVID as well as both the service transformation and service deficits it exposed.

## Consumers shaping health

The consumer voice has impact when it is supported by data. CHF's program of consumer research continued to consolidate spearheaded by Australia's Health Panel, our online community of people interested in health consumer issues who consent to participate in a program of monthly 'take the pulse' surveys. We conducted surveys on topics such as telehealth and pharmacy services and created a 'results hub' on the website to disseminate the results. Major studies included Patient Activation in Australians with Chronic Illness.

We completed the evaluation of the Collaborative Pairs Australia national demonstration and embarked on a program of work to develop Collaborative Pairs Australia 2.0 to incorporate improvements and to enable a virtual mode of delivery. This unique program based on the forerunner developed by The King's Fund in the UK equips a consumer and clinician pair with joint leadership and collaborative practice skills.

Our panel of consumer leaders diversified and we secured three years of funding to establish a Youth Health Forum to bring the insights of young people into our work, forming a network of around 60 young people from around the country, supported by twelve Young Leaders.

We completed our auspice of Health Consumers Tasmania with the newly formed consumer organisation for that state incorporating as an independent new organisation.

We initiated the Shifting Gears Summit - the first ever Australasian consumer leadership and experience conference - with the generous support of several sponsors.



Board in February 2020



Leanne Wells, Minister for Health, Greg Hunt and Tony Lawson

## Partnering for purpose

We were delighted with several new partnerships in 2020. We have a Working Together Agreement with NPS MedicineWise and commenced discussions with the Digital Health Cooperative Research Centre to join them as their national consumer collaborator.

Our close association with the NHMRC Partnership Centre for Health System Sustainability and the Australian Health Research Alliance continued, and we joined the National COVID-19 Clinical Guidelines Taskforce as a consumer and community partner. Our most recent research is a collaboration with the Centre for Research Excellence in Adolescent Health, partnering with the Youth Health Forum.

We continued our involvement with the Australian Ethical Health Alliance and its links with the APEC Business Ethics Initiative and became a member of the Climate Change for Health Alliance.

## Resilient and strong

In addition to adding to the depth and diversity of our community of consumer leaders, the avenues through which we gain consumer insights remain strong. Membership is stable and growing and our five Special Interest Groups spanning topics such as safety and

quality, digital health and rural and remote continued to add considerable value to both our work as well as being engaged by government and stakeholders.

As a small to medium enterprise, we made some operational changes to improve our efficiency such as moving to Sharepoint, improvements that proved fortuitous when the CHF team worked from home at the peak of the pandemic.

I would like to thank the talented CHF team for their passion for consumer-centred care, commitment to excellence, team spirit and contribution to our 2019-20 achievements.

Leanne Wells, CEO

# WHAT HAVE WE DONE IN 2019-20?

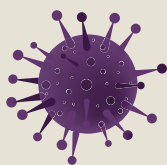


Worked with our growing **member base of 250** organisations and individuals, reaching millions of consumers.

Identified and supported **90+ representatives** in areas that include medicines advice, health care homes, digital health and PBS.



**Advised agencies** including Department of Health, PHNs, Australian Digital Health Agency, NPS MedicineWise, Australian Institute of Health and Welfare and National Health and Medical Research Council (NHMRC).



With COVID-19, **advanced consumer interests** on reforms including telehealth, held webinars with health leaders, joined National COVID-19 Clinical Evidence Taskforce.



Supported the National Youth Health Forum and Rural and Remote, Safety and Quality, Digital Health and Health Research **Special Interest Groups**.

Partnered with the **research community** including the Australian Health Research Alliance.

Promoted **health literacy** for consumers through our Be Health Aware site.



Granted 13 events use of the **CHF Tick**.

Initiated the Australian and NZ **consumer leadership and experience summit**.

Pioneered **Collaborative Pairs in Australia**, an innovative consumer and clinical leadership development program



We're #withconsumers



Kept **members and stakeholders** informed through publications healthUPdate, Consumers Shaping Health and Health Voices



Appointed to the federal Ministerial Primary Health Care **10 Year Plan Steering Group** and the **National Preventive Health Strategy Steering Committee**.



Conducted seven **Australia's Health Panel** surveys including on aged care, My Health Record, climate change, social prescribing, Telehealth, after hours care.



Released, with RACGP and the National Health and Medical Research Council (NHMRC) Partnership Centre for Health System Sustainability, the **Social Prescribing roundtable table report**

Engaged with our **9,000+** followers on Twitter, and our **growing social media** platforms of 1000+ Facebook, and 350+ Linked In followers.



Generated **100s of media mentions** and interviews in TV, radio and print.

Published **40+ media releases** and 20 blogs.



Received **56,000 visits** to CHF website.

Maintained an email list of over **3,500 subscribers**.

**Promoted the consumer** case to parliamentarians and government



**Represented internationally** including at APEC Business Ethics Forum in Santiago; hosted a delegation from Singapore Health Ministry.



# OUR OBJECTIVES

## OBJECTIVE ONE

### ADVOCATING FOR IMPACT

CHF will make credible, authoritative and constructive contributions to national policy and system design. CHF will strive to set the agenda for a consumer centred health system and advocate for the changes needed to realise that future.

## OBJECTIVE TWO

### CONSUMERS SHAPING HEALTH

CHF will support meaningful and authentic consumer engagement and participation at all levels in the health system. CHF will equip consumer leaders to act with impact and influence. CHF will facilitate opportunities to build capacity and improve the practice of consumer centred health care.

## OBJECTIVE THREE

### PARTNERING FOR PURPOSE

CHF will work with members and networks to maximise the impact of the consumer voice at the national level. We will strategically partner with stakeholders to shape better health care by ensuring that a consumer focus is always front and centre.

## OBJECTIVE FOUR

### RESILIENT AND STRONG

CHF will maintain and grow a strong and diverse membership. We will ensure our governance and leadership is of the highest standard. We will strengthen our organisational resilience and assure our financial sustainability.

# OUR PROGRESS

## OBJECTIVE ONE: ADVOCATING FOR IMPACT

### Setting the agenda

CHF continued to push for real health reform to ensure we have a sustainable high-quality health care system that meets the needs of all Australians. We led discussions on some key issues including:

- Social Prescribing Roundtable and Report in partnership with RACGP and the NHMRC Partnership Centre for Health System Sustainability as academic partner
- Members Policy Forum to discuss priorities for the Federal Budget 2020
- Development of a Consumer Position Statement: Ethical Issues Arising from the COVID-19 Pandemic Ethics
- Report Card on the Seventh Community Pharmacy Agreement highlighting the need for more reform in community pharmacy
- Joint roundtable with the Pharmaceutical Society of Australia on medicine safety as the tenth National health priority

### Participation in policy discussions

CHF continued to be invited to participate in a range of policy discussions at roundtables, forums, events and workshops as well as being invited to provide representation on key policy advisory committees. Like everyone else we had to switch direction with the advent of the COVID-19 pandemic and work to ensure the consumer voice and interest was prominent in those discussions. This presented challenges as well as opportunities to explore new ways of engaging and new areas and issues for that engagement.

In 2019-20 CHF participated in many committees and events including:

- Primary Health Care Reform Steering Committee
- Expert Steering Committee for the National Preventive Health Strategy
- Workshops developing an Ethics Framework for Pandemics
- Public hearing for the Productivity Commission Inquiry into Mental Health
- Stakeholder roundtables for the Seventh Community Pharmacy Agreement
- Therapeutic Goods Administration Consultative Committee
- Independent Review of Therapeutic Goods Advertising Arrangements
- Australian Competition and Consumer Commission Consumer Consultative Committee.

### Priority areas

Work continued on priority areas including primary health care, digital health and medicines and community pharmacy.

#### Primary Health Care Reform

CHF has been very involved in the development of the 10 Year Primary Health Care Plan. CHF is represented on the Expert Steering Committee for the plan and has participated in most of the consultations. We ran a series of consumer virtual 'kitchen table' discussions to find out what people thought about primary care, what they saw as the challenges and ideas they had to improve it. This was in addition to a consumer roundtable run with the Department of Health.

We have identified the potential for social prescribing as a way of delivering truly person-centred, comprehensive care that embraces social and lifestyle risk factor management. This is being pursued through the 10 Year Primary Health Care Plan and the National Preventive Health Strategy.



*Tony Lawson at Members Policy Forum*



*Prof Tim Shaw (Digital Health CRC), Leanne Wells, Tony Lawson, Dr Karen Luxford (The Australian Council on Healthcare Standards) & Dr Rob Grenfell (CSIRO) at Board and Staff retreat in Feb 2020*

## Digital Health

Digital health continues to be a priority for CHF. Past efforts have focussed on collaborating with the Australian Digital Health Agency (the Agency) to better understand consumer experiences with the My Health Record (MHR) platform. This work culminated with several new case studies undertaken and submitted to the Agency in early April. We also began consulting on the statutory review of the MHR legislation due to be finalised by the end of the calendar year.

In late 2019 CHF signed a contract with the Agency to promote consumer awareness and uptake of electronic prescribing measures. This was intended to be the focus of our digital health work over an 18-month period commencing in February. However, while the COVID-19 pandemic accelerated the launch of electronic prescribing, it also limited it to certain 'communities of interest' (COIs) across the country. The result has been a reduced need for consumer communications and a realignment towards gathering consumer experience data instead.

We continue to undertake work on the broader digital health agenda including: work on mobile health apps; cooperating with the Good Things Foundation on digital literacy; working with the Digital Health CRC and the Centre of Excellence in Digital Technology to Transform Chronic Disease Outcomes on various projects and thought leadership activities.

## Community Pharmacy

Negotiations for the Seventh Community Pharmacy Agreement continued through 2019-2020 with the agreement being signed in June 2020. CHF participated in the multi-stakeholder roundtables that informed the negotiations as well as having several bilateral conversations with the Department of Health. We issued our assessment of the Agreement which identified that the opportunity for significant reform and innovation had been missed. We were successful in improving the governance arrangement for the agreement. As a new member of the Stakeholder Consultative Committee, CHF has a more direct channel through which to raise concerns on emerging issues.

## COVID-19

The COVID-19 pandemic required rapid deployment of new service models, to address not only the significant health system requirement for diagnosing and treating people with COVID-19, but to ensure people were able to access necessary health services for all conditions in a way consistent with minimising the risks of contracting and spreading the virus.

CHF was involved in discussion about giving people access to telehealth, including running a survey on this and hosting a consumer webinar to explain the initiative and start collecting consumer experiences of telehealth. We were also involved in the development of the home delivery of medications initiative through community pharmacy and the accelerated rollout of e-prescribing.

We instigated a series of special Members Bulletins to help people find accurate and evidence-based information on the pandemic. We also hosted a webinar with two of the Deputy Chief Medical Officers, to explain what measures had been introduced and to give consumers the opportunity to raise issues of concern.

All CHF webinars are available at <https://chf.org.au/events-past>



Leanne Wells, Tony Lawson and Cassandra Goldie  
(CEO, ACOSS)



**CHF**

**Self care .... patient power**

*A follow-up webinar on the  
Blueprint report - Wed 28 Oct*

## Submissions and inquiries

CHF continued to work to ensure the consumer voice was heard through participation in parliamentary inquiries, which were limited due to the impact of COVID-19 on the parliamentary sitting and business cycle.

We made submissions to the following parliamentary inquiries in 2019-20:

- Senate Select Committee on COVID-19
- Adequacy of Newstart and related payments and alternative mechanisms to determine the level of income support payments in Australia

In addition to submissions to parliamentary inquiries CHF made submissions to many government and other consultations. These included:

- Draft of Australia's national response to the third World Health Organisations Global Patient Safety Challenge – Medication without harm
- National Rural Health Commissioner, Policy options to improve access, distribution and quality of rural allied health services and response to the final report
- Royal Commission into Aged Care Quality and Safety
- Draft Standards for General Practice Residential Aged Care
- Draft Consumer Guide for the Australian Charter of Healthcare Rights
- Royal Australia and New Zealand College of Radiology Consultation Paper: Establishing and Sustaining Regional, Rural and Remote Radiation Therapy Centres
- Australian Commission on Safety and Quality in Health Care - Draft National Digital Mental Health Services Standards
- Productivity Commission Inquiry into Mental Health
- Australian Council of Governments (COAG) National Obesity Strategy
- Royal Commission into Natural Disasters

All of CHF submissions are available on the CHF website at [www.chf.org.au/publications/policy/submissions](http://www.chf.org.au/publications/policy/submissions).

## Media and communications

The onset of COVID-19, as everywhere, prompted significant changes in our communications activity with virtual conferencing such as Zoom and webinars becoming routine.

COVID-19 related issues in the last quarter of the year, from March 2020, became a dominant focus of our media activity with nine media releases on COVID-19 related developments including telehealth and elective surgery.

We ran three successful webinars in April and May with a total of 991 people registering their interest in them, watching live or requesting the replay.

Leanne Wells was regularly sought for comment by the media, television, radio and newspapers. The most frequently raised issue by media seeking CHF reaction was again private health insurance and out of pocket costs which also accounted for 12 media releases over the period. Another common topic for media releases was telehealth/digital health. The topics on which Leanne commented to the media were wide-ranging, and these included the Consumer Commission, climate and health, social prescribing, the Pharmacy Agreement, mental health, youth health and aged care. CHF issued 50 media releases.

We published 24 blogs on issues including COVID-19 and isolation, the road map to recovery post-COVID-19, climate and health, the National Health Information Strategy and My Health Record.

# WEBSITE

The **CHF website** had 57,000 visitors, 56,000 of them new users, who together made 74,752 page views. Health Voices, the website for CHF’s journal received 10,000 visitors and 18,000 page views, 68 % of visitors were from Australia.

# SOCIAL MEDIA

CHF’s **Twitter** following grew from 8,500 to 9,160 followers. Our 348 tweets and more than 2,000 twitter mentions generated 500,000 impressions, indicating reader attention.

**Facebook** followers grew by 147 to 1046, an increase of 14%. On an average 28 day period CHF reached 12,000 people on Facebook

Like all our social media channels, **LinkedIn** achieved steady growth, doubling followers from 211 to over 400

Visitors to CHF’s **YouTube** channel recorded 45,150 views. The channel added 105 subscribers over the reporting period.

Figure 1: CHF news mentions by month

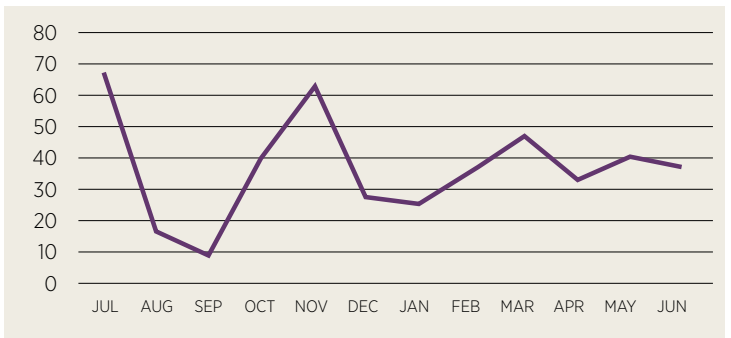


Figure 2: CHF social media mentions by month

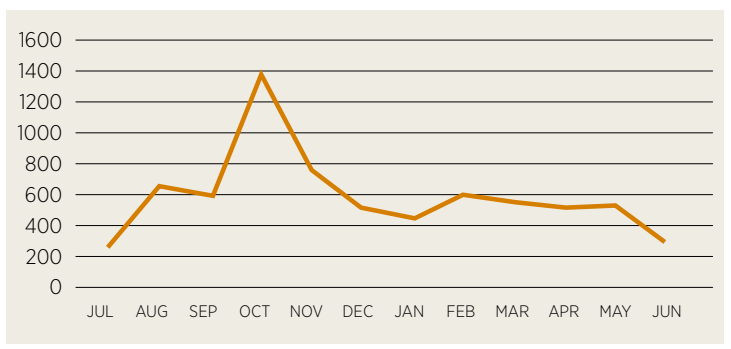
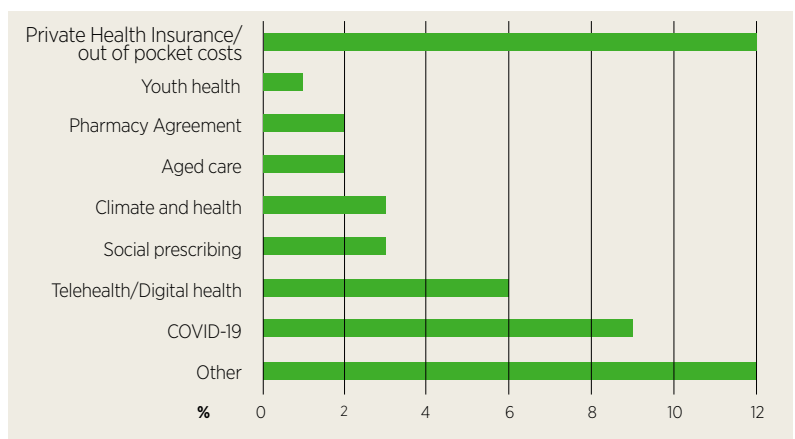


Figure 3: CHF media releases by topic





Leanne Wells at the Sydney North Primary Health Network AGM.

## OBJECTIVE TWO: CONSUMERS SHAPING HEALTH

### CHF's Consumer Program

Consumers are the link that enables health service providers to become aware of the importance and diversity of consumer needs. CHF is regularly approached by committee organisers from the Department of Health, the Australian Commission on Safety and Quality in Health Care, Medicines Australia, universities and many other stakeholders to nominate consumers to their committees/ advisory groups.

CHF assists with sourcing consumer advocates in two ways. In a select number of cases we run a selection and nomination process nominating consumers to a limited number of high-level national committees. Where we cannot assist in this way, we advertise consumer advocate opportunities to our national network, with applications going directly to the committee organisers.

The function of the Consumer Program is to nominate, support, train and coordinate consumer advocates for national committees to ensure that the views and interests of health consumers are represented at the national level.

CHF received over 110 requests for consumer advocacy during 2019-20. CHF is pleased with the strong response we received to our calls for nominations from people who are exceptionally qualified and well-placed to bring the consumer perspective to important life-changing work. CHF supported 91 consumers working on numerous strategic national health decision-making committees. CHF extends our sincere thanks our valued consumer advocates their dedication to improving health care throughout 2019-20.

### Special interest groups

CHF has established Special Interest Groups (SIGs) as an additional way to involve our members and consumer representatives in shaping our policy and advocacy work. Each of the Groups is co-facilitated by a CHF secretariat member and a consumer member. Interest in these groups has grown over the year and we have established additional groups to reflect our priority policy areas. As well as providing comment and input into external consultations we are increasingly using the SIGs to inform our own advocacy work and to assist with the design and execution of projects.

### Safety and quality special interest group

Safety and Quality in healthcare is an important focus for CHF. The Safety and Quality in Healthcare SIG was established in 2018 to work with CHF and connect with the Australian Commission on Safety and Quality in Health Care for user testing of resources such as decision support tools, consumer factsheets and consumer tools. With the group now well established, we are working to expand the SIGs involvement on policy issues to more than simply a 'reactive' group, but a group that also works proactively on topics that align with CHF's priority areas, including but not limited to: health literacy, patient activation, and shared decision-making.

During 2019-2020 in addition to the work with the Australian Commission on Safety and Quality in Healthcare the SIG was involved in a range of consultations including:

- Royal Australasian College of Surgeons: revised draft resource 'A Patient's Guide to Surgical Fees – Five Things to Know'



Leanne Wells, Melissa Sheldrick and Belinda Wood at the Pharmaceutical Society of Australia Conference 2019

- Therapeutic Goods Administration: consultation on a proposal to clarify that certain sports supplements are therapeutic goods
- Cancer Council Australia: draft 'Informed Financial Consent: Information for Patients with Cancer' Patient Information Leaflet
- LASA: Voluntary Aged Care Code of Practice Development

Members of the Safety and Quality SIG also informed the questions for Australia's Health Panel survey on 'Shared Decision-Making' and worked closely with CHF and NPS MedicineWise to inform various stages of the Consumer Health Literacy Segmentation and Activation Research Project.

## Rural and remote health special interest group

The Rural and Remote Health SIG was established in May 2019 to ensure CHF includes the voices of rural and remote consumers in all our policy and advocacy work. It provides: a channel for rural and remote health consumers to raise their concerns and issues; gives CHF access to a broader pool of rural and remote consumers; and gives Government enhanced access to rural health consumers through CHF's Consumer Representatives Program.

During 2019-2020 the Rural and Remote Health SIG was involved in a range of consultations including:

- Australian Government, National Rural Health Commissioner: Discussion Paper for Consultation – Rural Allied Health Quality, Access and Distribution
- National Rural Health Alliance & NBN: Rural Digital Health Workshop
- CHF Stimulus Paper: Rural, regional and remote consumer insights on the future state of primary health care and the intersection between primary health care and prevention
- Cancer Council Australia: draft 'Informed Financial Consent: Information for Patients with Cancer' Patient Information Leaflet

- Royal Australian and New Zealand College of Radiologists, Faculty of Radiation Oncology: Establishing and Sustaining Regional Rural and Remote Radiation Therapy Centres
- Department of Health: National Medical Workforce Strategy
- Western NSW PHN: After-hours GP Services – survey distribution ideas to reach consumers without internet and/or phone

Members of the Rural and Remote Health SIG inform and develop content for our quarterly e-newsletter covering important topics impacting people living in rural and remote areas. Topics covered during 2019-2020 include:

- Travel for Treatment (Spring 2019)
- Access to Health Services (Summer 2019-2020)
- Preventive Health and Primary Health Care (Autumn 2020)
- COVID-19 (Winter (2020))

## Primary health care special interest group

The Primary Health Care SIG was established in February 2020 to inform CHF's input to the development of the 10 Year Primary Health Care Plan and advocacy for more coordinated, comprehensive and multidisciplinary approach to primary health care. Its key objectives are to: identify what matters to consumers in primary health care; identify where improvement can be made; and provide a consumer perspective on the changes needed among health professionals and policy makers to deliver coordinated, integrated, consumer-centred primary health care.

During 2019-20 the Primary Health Care SIG was involved in a range of consultation including:

- Australian Government proposal to establish a Voluntary Patient Enrolment Scheme
- Productivity Commission inquiry into Mental Health



## Australia's Health Panel needs your voice!

Join Australia's first modern, interactive online platform devoted to harnessing your views about the state of the nation's healthcare system.

<https://chf.engageable.net/>



*Lisa Gelbert, Leanne Wells, Prof Chris Freeman (Chair Pharmaceutical Society of Australia), Monica Boogs & Prof Shane Jackson*

- 10 Year Primary Health Care Plan consumer consultations
- National Medical Workforce Strategy
- My Health Record Consumer Experience Survey
- Cancer Australia's Investigating symptoms of lung cancer: a guide for all health professionals
- CHF Position Statement on Ethical Issues Related to COVID-19
- RACGP Choosing Wisely Survey
- CHF submission to the Royal Commission into Natural Disasters

## Research and data special Interest group

The Research and Data SIG was formed in late 2019 with 20 interested consumers and had two meetings in the first half of 2020. As well as providing consumer insights into external research projects the SIG has provided input into all of CHF's own research projects.

The SIG has been involved in a range of activities including:

- Australian Bureau of Statistics Census 2021 questionnaire input
- The 'Join Us' Australian Health Research Register
- The National Health Information Strategy
- The Office of the National Data Commissioner Government Agency Data Sharing agreement
- Australia's Health Panel run by CHF.

## Digital health special interest group

The Digital Health SIG was formed in March following the commencement of the digital health policy officer. The 18 volunteers were part of the first cohort meeting every other month from May onwards. This attendance figure remained steady until the end of the financial year.

The aim of the group is to establish what issues matter to consumers, identify potential areas of improvements, and help with the sustainable development of new digital systems.

The SIG also formed a critical part of CHF's undertaking with the Australian Digital Health Agency to raise awareness and scrutinise plans for the rollout of electronic prescribing. Keys tasks included reviewing media material (such as commercial scripts) created by the Agency and helping to map out risks and opportunities of the token-based format from a consumer perspective.

Other topics of discussion included: defining digital health for consumers; principles for human-centred design; and breaking down provider-centric care models.

## Youth Health Forum

2019 - 2020 was an important year for the Youth Health Forum (YHF), starting with securing government funding to continue over the next three years. Formal recognition and support during a year when many young people have felt overlooked has meant that our work is more relevant and important than ever.

In April 2020 CHF recruited thirty new members to expand the YHF and bring fresh insights and experiences to the discussion. We established a Youth Leadership Group to ensure the strategic direction, projects, events, and advice to CHF on broader issues is youth-led.

The activities undertaken by the YHF in 2019-2020 include:

- Recruitment of 10-12 Young Leaders for two-year terms to work with CHF and the YHF
- Planning and facilitating a virtual catch-up event and satellite roundtable workshops
- Developing recommendations on Life Transitions and Youth Pathways into Services in collaboration with academic partners the Wellbeing Health & Youth NHMRC Centre of Research Excellence in Adolescent Health
- Leadership and capacity-building activities for Young Leaders to help them fulfil their roles with CHF or in a skill that they are interested in developing each year





Michael Brennan, Chair, Productivity Commission at Members Policy Forum



# Collaborative Pairs Australia

A Consumers Health Forum Partnership

- A four-part Young Advocates Webinar Series involving discussions with experts in health policy, advocacy, communication, and research translation
- Representation of Young Leaders and YHF members in national policy and program development discussions
- Developing resources for the CHF's #BeHealthAware health literacy portal and a guide for engaging and consulting with young people
- Establishing formal partnerships with other organisations (government agencies, Primary Health Networks, health services, community services, and research organisations) to deliver opportunities for the YHF to connect with service providers and people in policy, government and academia

## Collaborative Pairs Australia

Collaborative Pairs has continued to be implemented with two main programs being delivered to Safer Care Victoria and the National Registration Program. The impact of COVID 19 meant that both these programs had to pivot to a virtual format. This became the catalyst for engaging professional instructional designers to redesign the Collaborative Pairs program into a virtual format which has now been completed. This program will now be piloted in Western NSW PHN commencing in November 2020 and an evaluation will be undertaken with funding from the Australian Commission on Safety and Quality in Health Care (ACSQHC).

Program improvements were introduced in both these programs which included:

- In between session coaching
- A pre and post measure of collaborative practice to assess progress in partnership development
- Final evaluation survey

As the funding provided by the initial founding partners has been expended, a major priority is to secure funding to provide the infrastructure to scale up the Collaborative Pairs Australia Program. To this end, CHF has been

working with Urbis to develop a social impact prospectus which can be pitched to potential funders to assist CHF in scaling up the Collaborative Pairs Program for broader rollout and funding for the next 3 to 5 years.

Highlights in 2019-20 include:

- The National Demonstration Trial was completed with the Literature Review and the Executive Summary from the external evaluation published on the CHF website. A fuller, more detailed report was provided to CHF
- All pairs completed the Safer Care Victoria program despite the impact of COVID 19. This was one of our most successful programs to date
- All pairs completed the National Registration Program. These pairs represented Coordinare (Southeastern NSW PHN), Western NSW PHN, Australian Digital Health Agency and Headspace
- The Collaborative Pairs program has been redesigned into a fully virtual program and will be piloted in Western NSW PHN This includes articulation of the learning architecture, High Level Designs and a full set of branded professionally designed powerpoint slides for facilitators as well as a workbook for participants
- The pilot aims to use the Collaborative Pairs program to enable the implementation of Western NSW's PHN integrated co-commissioning model by building the capacity of consumer and clinical leaders to contribute in the areas of chronic disease and mental health.
- An application for trademarking Collaborative Pairs Australia has been completed
- A paper was successfully accepted for publication in a peer-reviewed journal

Dickinson, H, Brown, A, Robinson, S, Parham, J, Wells, L. Building collaborative leadership: A qualitative evaluation of the Australian Collaborative Pairs trial. Health Soc Care Community. 2020; 00: 1- 10. <https://doi.org/10.1111/hsc.13151>

## Australia's Health Panel

Australia's Health Panel is an interactive on-line platform dedicated to collecting the views of Australians about the state of the nation's health care.

In 2019-20 we ran seven surveys through Australia's Health Panel on the following topics:

- My Health Record (July 2019)
- Social Prescribing (Sep 2019)
- Shared Decision Making (Oct 2019)
- Climate Change and Health (Jan 2020)
- After Hours Primary Care (Feb 2020)
- Telehealth (Mar/Apr 2020)
- The COVIDSafe App (May 2020)

The number of registered panellists rose to over 600 people and the number of respondents to the individual surveys varied from 66 to 218. We also developed a results hub on the CHF website ([chf.org.au/australias-health-panel-results](http://chf.org.au/australias-health-panel-results)) and reworked the internal processes on the AHP website to improve the notification system for registered panellists.

CHF extends its thanks to all our panellists.

## ABS

As part of the Health Statistics Advisory Group (HSAG) for the Australian Bureau of Statistics (ABS), CHF has had input into projects by:

- Attending quarterly HSAG meetings
- Participating in a Privacy Impact Assessment on proposed changes for the 2021 Census
- Joining the Sodium and Potassium Expert Advisory Group to provide input on a project monitoring Hyperkalaemia levels in the community
- Participating in stakeholder consultation for the Multi Agency Data Integration Project (MADIP)

In March 2020 the ABS repurposed the HSAG group to become the Intergenerational Health Surveys Advisory Group for the period June 2020-June 2023 to provide input into the Intergenerational Health and Mental Health Study 2021-2023 project announced by Health Minister Greg Hunt. However, no further work happened as part of the HSAG/IHSAG as the COVID-19 pandemic directed resources elsewhere.

## CHF Research

The Patient Activation Measure results and report were publicly released in October 2019.

The Consumer Sentiment Survey results and report were published in May 2020 as our academic partners at the Australian Institute for Health Innovation scoped out their intended academic publications from the project. This included the first academic paper "Changes in public perceptions of the Australian healthcare system: A decade of change" which was submitted to the Medical Journal of Australia in June 2020.

As part of the Australian Clinical Trials Alliance we participated in a workshop on increasing awareness of and access to clinical trials for people with CALD backgrounds. We also contributed to a journal article on "The importance of involving consumers in research design during pandemic" which was submitted to the Journal of Bioethical Inquiry in June 2020.

Leanne Wells was appointed to the Executive Committee of the Australian Health Research Register "Join Us" led by The George Institute, which has the aim of connecting health researchers with those who are interested in participating in health research.

## Patient Access Consent and Outcome Measures (PACOM) Project

The Department of Health contracted CHF to deliver the multi-year Patient Access, Consent and Outcome Measures Project (PACOM) in late 2019. This project has three areas of inquiry: investigating patient experiences accessing medical records, investigating attitudes towards secondary data consent and reviewing patient-reported outcome measures and patient-reported experience measures (PROM/PREM) for Australian usage.

## OBJECTIVE THREE: PARTNERING FOR PURPOSE

CHF continues to be a member of and active in multi-party alliances including the National Oral Health Alliance and Australian Ethical Health Alliance. We also work bilaterally with a number of our members and other key stakeholders including NPS MedicineWise, Palliative Care Australia, the State and Territory Health Care Consumer Peak Organisations, the National Mental Health Commission, the Australian Digital Health Agency and the Australian Commission on Safety and Quality in Health Care.

### Partnering for purpose

CHF continues to actively participate in a wide range of multi-party alliances including the Climate and Health Alliance and the National Oral Health Alliance. We also work bilaterally with our members and other key non-government stakeholders including the Australian Council on Social Services, Palliative Care Australia, NPS MedicineWise, Mental Health Australia and the State and Territory Health Care Consumer Peak Organisations. We have strong links with key Government agencies including the Australian Digital Health Agency and the Australian Commission on Safety and Quality in Health Care.

We also work with academic organisations to ensure we are always advocating for evidence-based policies and practice. We are a partner in NHMRC Partnership Centre for Health System Sustainability and are working with others including the Digital Health CRC, the NHMRC Advanced Health Research and Translation Centres and the Wellbeing Health & Youth NHMRC Centre of Research Excellence in Adolescent Health.

### NPS MedicineWise

CHF and NPS MedicineWise established a Working Together agreement which sets out how both organisations will work together to ensure consumers are at the centre of our efforts to achieve quality use of medicines and better health decision-making. This includes a continuation of business as usual activities and new ways of working.

Under the agreement, CHF and NPS MedicineWise will focus on building leadership and capacity within the health consumer community to strengthen participation and embed best practice consumer and community engagement across quality use of medicines programs and initiatives.

Key priorities include promoting value-based health care, quality use of medicines, consumer co-design and health literacy; a consumer leadership and mentoring program; and examining consumer health literacy and activation from the perspective of 'grass roots' consumers as it relates to medicines and safe use to inform policy and programs.

This partnership is timely with the COAG recognising Quality Use of Medicines and Medicine Safety as the 10th National Health Priority.

### Social prescribing

In November 2019 CHF partnered with RACGP, and with the NHMRC Partnership Centre for Health System Sustainability as academic partner, to host a roundtable on social prescribing in Australia.

Social prescribing is the practice where health professionals have the resources and infrastructure to link patients with social services or groups in a bid to address the social determinants contributing to poor health and stave off issues of loneliness and social isolation.

The benefits of social prescribing are wide-ranging and include health, economic, social and productivity gains, with the ultimate benefit being improved health and wellbeing for individuals and communities. The roundtable identified the potential for social prescribing to facilitate a more engaged, empowered, strengths-based approach and build capacity for people to meet their own needs.

Roundtable participants included people from across the health and community sectors who have been engaged in the ongoing conversations about integrated care and the need to address the social determinants of health, as well as those who have started to introduce and trial social prescribing approaches in their local communities.



Leanne Wells at the Northern Sydney Primary Health Network AGM



They included consumer advocates, clinicians, health and social care providers, academics, health economists, government and policy experts from across Australia. The roundtable report was released on 11 February 2020.

## National COVID-19 Clinical Evidence Taskforce

The National COVID-19 Clinical Evidence Taskforce (the Taskforce) has brought together the peak health professional bodies across Australia whose members are providing clinical care to people with COVID-19. The aim of the Taskforce is to provide up-to-date, national, evidence-based guidelines for the clinical care of people with COVID-19 across all settings and across the full course of the disease.

In line with an identified need for the consumer voice in its deliberations, CHF was appointed to the Taskforce as its Community and Consumer Partner, and has assisted with consumer involvement in:

- the governance and leadership of the Taskforce with the appointment of two senior consumer advocates as members the Guideline Leadership Group (GLG)
- the establishment of the Consumer Panel to consider the recommendations arising from the Expert Guidance Panels and provide advice on the consumer/community implications of the recommendations.

The Consumer Panel commenced its work in June 2020 and will continue with its fortnightly meetings. It is due to work through till the end of December in the first instance.

## AIHW

CHF partnered with Australian Institute of Health and Welfare (AIHW) for two projects in 2019-20. The first was a Consumer Awareness Project for the development of a National Primary Care Data Asset in Oct/Nov 2019. This included running two webinars bringing an AIHW Consultation process about developing such an Asset to

the attention of consumers and running a consumer focus group to get consumer views about the initial proposal for the Asset. A blog and report summarising the project findings were published in late November 2019.

The second was another consumer awareness raising project, this time for the National Health Information Strategy in Feb/March 2020. Again, this project aligned with an AIHW consultation focused on developing a National Health Information Strategy for all of government health data. This included nominating consumers to attend workshops across different capital cities and hosting a Q&A webinar featuring AIHW staff and NHIS consultant Dr Norman Swan. Originally a focus group and second webinar were also included, however due to the COVID-19 pandemic the initial webinar had to be delayed and the focus group cancelled, with the funds for both redirected to hosting a digital COVID-19-safe webinar in April 2020. A blog and report summarising the project findings were published in May 2020.

## Therapeutic Goods Administration

Our 12-month contract with the Therapeutic Goods Administration (TGA) to provide ongoing consumer support concluded in October 2019. The final period of the contract was reworked to focus on the development of an overall Consumer Engagement Strategy. This was submitted and accepted for action by the TGA at the end of the contract.

In addition, we continued to advocate for consumer interests on the TGA's Therapeutic Goods Advertising Advisory Council and the Medical Device Action Plan Working Group. We also continued to put submissions into many consultations and workshops covering the full range of issues on medicine and medical device regulation. We also assisted the TGA with organising a Medical Device Consumer Workshop and continue to work with them in promoting their message to consumers.

# OBJECTIVE FOUR: RESILIENT AND STRONG

## CHF governance

CHF's Constitution allows a maximum of nine Directors, with six of the Directors being elected on a rotational basis from the membership. The Board may also appoint up to three skills-based Directors.

In August 2019 Roxxanne McDonald was appointed to the Board following a recruitment process to identify an emerging youth leader.

At the Annual General Meeting (AGM) held in November there was a single vacancy on the Board of Directors and Mr Tony Lawson was elected unopposed. At the 2019 AGM CHF also re-appointed auditor BellChambersBarrett for the 2019-20 financial year.

Throughout the year, the Board, either as a whole or via one of its two subcommittees, met regularly to ensure that the governance and leadership of the organisation

continued to be of the highest standard. In addition, the Board lent its support to several important community-wide initiatives:

- Alongside some 50 other significant organisations, the Board signed a joint letter to the Prime Minister and the 'Time to Fix Mental Health - Charter 2020' consensus statement developed by Mental Health Australia
- The Board supported the National LGBTI Health Alliance by signing a joint statement for the inclusion of LGBTI data in the 2021 Census
- Joined the Climate and Health Alliance and supported it's call for action on hazardous air pollution as a result of bushfires

In February 2020, the Board and Staff participated in a mid-term review and refresh of the 2018-22 Strategic Plan.

## Directors' terms and board meeting attendance

Name	Position	Term of Office	Board meetings 2019–2020	
			Number eligible to attend	Board Meetings Attended
<b>Current Directors</b>				
Tony Lawson <sup>1</sup>	Chair	To AGM 2022	12	11
Jo Watson	Deputy Chair	To AGM 2021	7	5
Lara Alexander	Director	To AGM 2020	9	8
Roslyn Chataway	Director	To AGM 2021	9	8
Rowan Cockerell	Director	To AGM 2020	12	9
Mark Diamond	Director	To AGM 2021	7	5
Jan Donovan	Director	To AGM 2020	9	8
Roxxanne McDonald <sup>2</sup>	Director	To AGM 2022	7	5
Christine Walker	Director	To AGM 2020	7	5

1. As Chair of the Board Mr Tony Lawson is an ex officio member of all sub-committees of the Board however his attendance at all sub-committee meetings is not required.

2. Roxxanne McDonald was appointed to the Board in August 2019

## CHF's Members

CHF members are highly valued partners. Our membership comprises individual members along with consumer organisations with an interest in health, including illness groups, disability groups and specific population groups such as youth, older people and women. A comprehensive list of our valued members is available at <https://chf.org.au/our-members>

Our membership continues to grow and at the end of the 2019-20 financial year had grown to 221 members. Over the last financial year, twenty new organisations joined CHF. CHF's growing membership base ensures a diversified consumer voice is informing our work. As a consequence, our pool of consumer representatives is also diversified improving our representation of health consumers. The surge in CHF's work since the onset of COVID-19 has highlighted the value of the consumer voice at a time of health crisis. Our members' experience, knowledge and involvement is integral to CHF's work has been even more vital during this crisis, helping us to shape a better health system and better consumer health outcomes for all Australians.

Our members are kept up to date on key health reform issues through our publications, member alerts and events. CHF members influence the national health agenda by contributing to CHF surveys and polls, events, consultations and campaigns.

## CHF tick

The #withconsumers tick is a logo demonstrating a health organisation's commitment to integrating the experience and insight of consumers into their work.

The CHF tick is available, on application, for single use in association with national and international conferences, major events and flagship publications by organisations or individuals with an interest in health consumer affairs. Its use is granted to organisations that have demonstrated that they put consumers in healthcare first in their activities, such as their governance arrangements, projects, events and publications.

During 2019-20, in our first year of operation, CHF granted the use of the CHF Tick to the following events:

- Asia Pacific Conference on Integrated Care
- Loddon Mallee Regional Clinical Council (LMRCC)
- Loddon Mallee Regional Consumer Forum - Communication in Healthcare
- Safer Care Victoria - Giant Steps: Towards better safer care
- Wellbeing Health & Youth Engagement Framework



# GLOSSARY

ACHS	The Australian Council on Healthcare Standards
ACSQHC	Australian Commission on Safety and Quality in Health Care
ADHA	Australian Digital Health Agency
CMI	Consumer Medicine Information
MHR	My Health Record
NHMRC	National Health and Medical Research Council
NPS	National Prescribing Service
PHN	Primary Health Network
RACGP	Royal Australian College of General Practitioners
SIG	Special interest group
TGA	Therapeutic Goods Administration
VAHI	Victorian Agency for Health Information

# ACKNOWLEDGEMENTS

CHF gratefully acknowledges the following organisations for their support of CHF activities in 2019–20:

Australian Digital Health Agency  
Australian Institute of Health and Welfare  
Coordinare- South Eastern PHN  
Department of Health – including the Therapeutic Goods Administration  
headspace  
Monash University (National COVID-19 Guidelines Taskforce)

Murrumbidgee PHN  
National Mental Health Commission  
NPS MedicineWise  
Palliative Care Australia  
Safer Care Victoria  
South East Melbourne PHN  
Victorian Agency for Health Information  
Western NSW PHN

## Sponsors

### **Social Prescribing Roundtable Sponsors**

Department of Health  
National Mental Health Commission  
Capital Health Network

### **Shifting Gears Summit Sponsors**

Australian Commission for Safety and Quality in Health Care (Principle Sponsoring Partner)  
Australian Digital Health Agency (Principle Sponsoring Partner)  
Department of Health (Principle Sponsoring Partner)  
NSW Health (Principle Sponsoring Partner)  
Australian Clinical Trials Alliance  
AGPAL Group of Companies  
Australian Health Research Alliance  
Bureau of Health Information  
Centre for Culture, Ethnicity and Health  
CSIRO  
Office for Health and Medical Research (clinicaltrialsNSW)  
Partnership Centre for Health System Sustainability  
PHN Cooperative  
RACGP  
Telstra Health

### **Summit Project Advisory Committee**

Yvonne Zurynski  
Anthony Brown  
Paresh Dawda  
Renee Greaves  
Anne Marie Hadley  
Debra Kay  
Lea Kirkwood  
Belinda McLeod Smith  
Lynne Maher  
Fiona Martin  
Michelle Maxwell  
Jennifer Muller  
Bronwyn Smith  
Alison Verhoeven  
Raj Verma

### **Academic Partners and Other Supporters**

NHMRC Partnership Centre for Health System Sustainability  
Centre for Research Excellence in Adolescent Health  
Australian Health Research Alliance  
Digital Health CRC  
NHMRC Centre of Research Excellence (CRE) in Digital Technology to Transform Chronic Disease Outcomes.  
Croakey Health Media  
Urbis Consulting



# FINANCIAL REPORTS

**FOR THE YEAR ENDING 30 JUNE 2020**

Consumers Health Forum of Australia Ltd

ABN 82 146 988 927

## **Financial Statements**

### **For the Year Ended 30 June 2020**

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## AUDITOR'S INDEPENDENCE DECLARATION UNDER S60-40 OF THE AUSTRALIAN CHARITIES AND NOT-FOR-PROFITS COMMISSION ACT 2012 TO THE DIRECTORS OF CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

As lead auditor of Consumers Health Forum of Australia Ltd, I declare that, to the best of my knowledge and belief, during the year ended 30 June 2020 there have been no contraventions of:

- i. the auditor independence requirements as set out in the *Australian Charities and Not-For-Profits Commission Act 2012* in relation to the audit; and
- ii. any applicable code of professional conduct in relation to the audit.

James Barrett, CA  
Registered Company Auditor  
BellchambersBarrett

Canberra, ACT  
Dated this 17<sup>th</sup> day of September 2020

## CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

### DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2020

The directors present their report on the company for the financial year ended 30 June 2020.

#### Directors

The names of each person who has been a director during the year and to the date of this report are:

Names	Position	Appointed/Resigned
Tony Lawson	Director, Chair	
Jo Watson	Director, Deputy Chair	
Lara Alexander	Director	
Ros Chataway	Director	
Rowan Cockerell	Director	
Mark Diamond	Director	
Jan Donovan	Director	
Christine Walker	Director	
Roxanne MacDonald	Director	Appointed 15 Augst 2019

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

#### Principal activities

The principal activities of Consumers Health Forum of Australia Ltd during the financial year were to provide information, representation and advocacy on national health issues for its membership of health consumer organisations. No significant changes in the nature of the company's activities occurred during the financial year.

#### Significant Changes in State of Affairs/Operations

The COVID-19 pandemic has not impacted negatively on CHF operations: our cashflow and funding agreements were not disrupted in any major way and we were able to continue to operate at full scale and meet our obligations to funders. There was some delays and change to strategies under some funding agreements and these were approved by our funders. In late March, CHF closed our office and implemented a safe working from home policy for all staff. In early June we put in place a COVID safe return to work plan and began transitioning back to the office.

#### Objectives

The company's objectives are to:

1. Develop and promote consumer-centred health system policy and practice to governments, stakeholders, providers and clinicians
2. Engage with the members of CHF to ensure collective consumer voices are involved in the co-design of health system change and innovation

## CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

### DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2020

#### Strategies for achieving the objectives

To achieve these objectives, the company will:

##### **Objective One - Advocating for Impact:**

CHF will make credible, authoritative and constructive contributions to national policy and system design. CHF will strive to set the agenda for a consumer centred health system and advocate for the changes needed to realise that future.

##### **Objective Two - Consumers Shaping Health:**

CHF will support meaningful and authentic consumer engagement and participation at all levels of the health system. CHF will equip consumer leaders to act with impact and influence. CHF will facilitate opportunities to build capacity and improve the practice of consumer centred health care.

##### **Objective Three - Partnering for Purpose:**

CHF will work with members and networks to maximise the impact of the consumer voice at the national level. We will strategically partner with stakeholders to shape better healthcare by ensuring that a consumer focus is always front and centre.

##### **Objective Four - Resilient and Strong:**

CHF will maintain and grow a strong and diverse membership. We will ensure our governance and leadership is of the highest standard. We will strengthen to our organizational resilience and assure our financial sustainability.

#### New Accounting Standards Implemented

The entity has implemented three new Accounting Standard that are applicable for the current reporting period. AASB 15: *Revenue from Contracts with Customers*, AASB 1058: *Income for Not-for-Profit Entities* and AASB 16: *Leases* have been applied using the cumulative effect method; that is, by recognising the cumulative effect of initially applying AASB 15, AASB 1058 and AASB 16 as an adjustment to the opening balance of equity at 1 July 2019. Therefore, the comparative information has not been restated and continues to be reported under AASB 118: *Revenue*, AASB 117: *Leases* and AASB 1004: *Contributions*. Also to note in relation to AASB 16 is that the entity applied the temporary relief for peppercorn leases under AASB 2018-8 to measure the right of use assets at cost on initial recognition. Further information is provided in Note 1.

#### Information on directors

Current Directors:

Tony Lawson (Chair)

Experience Tony has been a member of the CHF Board since 2010 and Chair since 2014. He was re-elected as Chair at the November 2017 Board meeting.

Tony strives to operate at strategic levels in policy forums and meetings conducted by and with CHF, always promoting enhanced consumer participation and engagement in every encounter.

## CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

### DIRECTORS' REPORT

#### FOR THE YEAR ENDED 30 JUNE 2020

Tony has managed not-for-profit organisations and was Chair of the SA peak consumer health body for six years. Tony has extensive experience in managing and implementing governance frameworks in a diverse range of organisations both as a leader and independent adviser. In more recent times Tony has managed a charity foundation which provides support to Palliative Care. He has undertaken many health consumer participation projects and produced many reports and published articles on health issues.

Overall, he has been involved at the highest levels in consumer health for over a decade and continues to strive to provide decisive and strategic leadership to CHF representing the interests of Australian healthcare consumers.

#### Jo Watson (Deputy Chair)

**Experience** Jo Watson was appointed to the CHF Board in 2012 and has been Deputy Chair since 2014. She was re-elected Deputy Chair at the November 2017 meeting.

Jo was the Executive Director for the National Association of People living with HIV Australia (NAPWHA) from 1998 to 2014. Over the past several decades she has been a community advocate actively engaged in the areas of health policy, especially access to medicines, and optimal public health interventions.

She was the consumer nominee of the Pharmaceutical Benefits Pricing Authority (PBPA) from 2002 to 2012 and has been a consumer nominee to the Pharmaceutical Benefits Advisory Committee (PBAC) since 2013. In 2017 Jo was appointed as the inaugural Deputy Chair of PBAC. She is also the Chair of the HTA Consumer Consultative Committee, established in 2017 within the Commonwealth Department of Health.

Jo is the CHF nominated Director on the Board of the Australian GP Accreditation Ltd Group (AGPAL) and is the Chair of the CHF Governance Committee.

#### Lara Alexander

**Experience** Lara Alexander was elected to the CHF Board in 2017.

Lara is a Certified Practising Accountant with almost 20 years working in the not-for-profit sector at the Senior Management or Executive Management level. Lara is currently the Chief Executive Officer (CEO) of St Vincent de Paul Society Tasmania. Previously, Lara has worked for eight years in the Aged Care sector as General Manager with Presbyterian Care Tasmania. Other organisations that Lara has worked for include St John Ambulance WA, Cancer Council WA, Save the Children and Bethesda Hospital.

Since 2008, Lara has been a Board Director with the Immune Deficiencies Foundation Australia, and is also chair of that Board since 2017.

Lara has worked closely with consumers in these various roles, understands their frustrations and has assisted consumers to find their way through what is at times a difficult regulatory path. Lara has a strong understanding of regulatory compliance in many areas of the health sector and the impact of these regulations on consumers, and has worked with a number of Boards in developing policies and procedures around finance, investments, internal control, delegations, compliance, etc.

CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

DIRECTORS' REPORT

FOR THE YEAR ENDED 30 JUNE 2020

Ros Chataway  
Experience

Ros has over 40 years' experience working in the healthcare field in the public and private sector. Responsibilities include managerial, clinical and administrative roles at corporate and clinical levels. Ros has managed the Safety, Quality and Risk Management Unit in the acute hospital setting and has been able to implement change in staff practices arising from the feedback that consumers provided to the unit.

Ros had extensive experience with the Consumer Advisory Council at the Queen Elizabeth Hospital, and enjoys the exchange of ideas and input from consumers from a broad range of backgrounds. Ros has been a Board member of Health Consumers Alliance (HCA), SA from since 2013- 2018 and is the President of the Australasian College of Health Service Management (ACHSM), SA Branch. She is a Registered Nurse and Midwife and has completed a Law degree and a Bachelor of Behavioural Science (Psychology). She is currently undertaking a Masters of Business Administration (MBA) and working part-time as an Australian Council on Healthcare Standards (ACHS) Surveyor, whilst also caring and advocating for her palliative mother.

Rowan Cockerell  
Experience

Rowan Cockerell was elected to the CHF Board in 2014 and re- elected in 2017.

Rowan has worked across healthcare and community services, aged care and service development projects for over 38 years. Over this time she has held executive positions across the private, not-for-profit and public sector. As CEO of the Continence Foundation of Australia, Rowan is an advocate for the interests of Australians affected by, or at risk of, bladder and bowel control problems and pelvic floor dysfunction. Rowan has a Masters in Business and is a Graduate of the Australian Institute of Company Directors.

Mark Diamond  
Experience

Mark holds a post-graduate degree in Social Work and has extensive experience in management of public sector community services, health and aged care organisations in four state and territory jurisdictions over a period of 30 years. More recently he was appointed as CEO of the National Rural Health Alliance – the national peak body for rural, regional and remote health. He now operates his own consulting firm providing assistance and support to the health and aged care sectors, including services located in rural and remote areas.

Mark has skills and experience in hospital, health service and aged care management in metropolitan, regional and isolated rural areas, and has skills in leadership, project management, change management and service redesign. He has a strong interest in rural and remote health, mental health, Indigenous health, primary health care and aged care. He is a Fellow, former Board Director and Life Member of the Australasian College of Health Service Management and a Board Director with the Health Consumers Alliance of South Australia. He was appointed in 2019 to the Aged Care Workforce Remote Accord – a key national leadership group responsible for recommending to government the strategies needed to address workforce issues in remote and very remote Australia.

## CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

### DIRECTORS' REPORT

FOR THE YEAR ENDED 30 JUNE 2020

#### Jan Donovan Experience

Jan was appointed to the CHF Board in 2014 and reappointed in 2017. She Chairs the Finance, Audit and Risk Management Committee of the Board.

She has substantial experience in public policy, strategy and governance matters at Board level through her nine years (1998- 2007) as a member of the Board of the National Prescribing Service (NPS Medicines Wise) and five years (2005-2009) as a member of the Board of the Australian Primary Health Care Research Institute at ANU.

Jan has participated in National Policy Forums at the strategic level for three decades including eight years with Council on the Ageing - six years in the role of National Policy Officer. Jan is a passionate advocate for addressing health equity and the social determinants of health with a focus on people with chronic illness, primary health care and of the national medicines policy, mental health, aged care and indigenous health.

Jan also has secondary teaching qualifications and experience in education including in Papua New Guinea and Timor Leste. She has a strong interest and participates in research initiatives aimed at raising the health literacy of Australians particularly vulnerable Australians.

Her current appointments as a health consumer representative include to the Community Council of the South East Melbourne Primary Health Network, Deputy Chair- Health Technologies Assessment Consumer Consultative Committee, the Drug Utilization Sub Committee PBAC, the Australian Institute for Health and Welfare Primary Care Committee, the Evaluation Committee of Health Care Homes, and the Medicines Safety Committee for the Australian Digital Health Agency.

#### Christine Walker Experience

Christine Walker was elected to the CHF Board in 2017. Christine has 20 years' experience as a Director on Boards, and in governance, strategic planning, and building an evidence base around the needs of people with chronic illnesses in the health system through research and consultancies. Christine works to include consumers and the community in all levels of health service and policy development. Currently Christine is Executive Officer of the Chronic Illness Alliance Inc, a Board member of the Epilepsy Foundation Victoria, and member of the Melbourne Genomics Health Alliance Community Advisory Group, the Executive of the Australian Health Care Reform Alliance, the RACGP National Standing Committee on Quality Care, and the Independent Advisory Committee on Medicinal Cannabis for the Department of Health and Human Services Victoria. Past Board memberships have included NPS Medicinewise and the Western Health Service in Victoria.



**CONSUMERS HEALTH FORUM OF AUSTRALIA LTD**

**ABN 82 146 988 927**

**DIRECTORS' REPORT**

**FOR THE YEAR ENDED 30 JUNE 2020**

**Roxanne MacDonald  
Experience**

Roxanne was appointed to the CHF Board in 2019. Roxanne is consumer and carer representative in the youth health space and has had a focus on mental health. She is a member of CHF's Inaugural Youth Health Forum and is currently one of the Forum's Young Leaders.

She served a two-year term on Orygen's Youth Advisory Council and has worked with several other organisations including Children's Health Queensland, Australian Government Department of Health, and the Queensland Centre for Mental Health Research. She is also a consumer representative with Health Consumer's Queensland.

Roxanne is currently the Marketing Coordinator at Australian childhood cancer support organisation, Redkite. She is passionate about young people being meaningfully involved at all levels of Australia's health system.

**CONSUMERS HEALTH FORUM OF AUSTRALIA LTD**  
**ABN 82 146 988 927**

**DIRECTORS' REPORT**  
**FOR THE YEAR ENDED 30 JUNE 2020**

**Meetings of directors**

During the financial year, 9 meetings of directors were held, 4 board meetings and 5 meetings of subcommittees. Attendances by each director during the year were as follows:

Director Name	Directors' Meetings		Subcommittee Meetings	
	Number eligible to attend	Number attended	Number eligible to attend	Number attended
Tony Lawson	4	4	8	7
Jo Watson	4	4	3	1
Lara Alexander	4	3	5	5
Ros Chataway	4	3	5	5
Rowan Cockerell	4	2	8	7
Mark Diamond	4	2	3	3
Jan Donovan	4	4	5	4
Christine Walker	4	4	3	1
Roxanne MacDonald	4	4	3	1

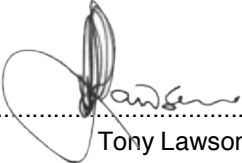
**Members guarantee**


The company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$ 1 each towards meeting any outstanding obligations of the company. At 30 June 2020 the total amount that members of the company are liable to contribute if the company is wound up is \$250 (2019: \$265).

**Auditor's independence declaration**

The lead auditor's independence declaration for the year ended 30 June 2020 has been received and can be found on page 8 of the financial report.

Signed in accordance with a resolution of the Board of Directors:

Director:  .....  
 Tony Lawson

Director:  .....  
 Jan Donovan

CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME  
FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
Revenue	2	2,052,851	2,007,260
Other income	2	62,938	22,938
Employee benefits expense	3	(1,168,155)	(1,159,939)
Depreciation and amortisation expense	3	(48,734)	(16,354)
Interest expense	3	(4,570)	-
Administration expense		(165,720)	(235,345)
Project contractor and consultancy fees		(415,906)	(359,523)
Insurance		(25,337)	(11,705)
Rental expense	3	(13,529)	(50,702)
Repairs, maintenance and vehicle running expense		(44,923)	(22,438)
Travel and accommodation		(48,157)	(117,769)
Workshop expense		(37,855)	(113,301)
Other expenses		(5,273)	-
<b>Current year surplus / (deficit) before income tax</b>		<b>137,630</b>	<b>(56,878)</b>
Income tax expense	1(j)	-	-
Net current year surplus / (deficit)		<u>137,630</u>	<u>(56,878)</u>
<b>Other comprehensive income</b>			
Total other comprehensive income for the year		-	-
<b>Total comprehensive income / (loss) for the year</b>		<u>137,630</u>	<u>(56,878)</u>
Net current year surplus / (deficit) attributable to members of CHF		<u>137,630</u>	<u>(56,878)</u>
Total comprehensive income / (loss) attributable to members of CHF		<u>137,630</u>	<u>(56,878)</u>

CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2020

	Note	2020 \$	2019 \$
<b>ASSETS</b>			
CURRENT ASSETS			
Cash and cash equivalents	4	1,317,447	913,795
Trade and other receivables	5	9,652	2,699
Other assets	6	89,347	25,184
Financial assets	7	400,000	400,000
TOTAL CURRENT ASSETS		1,816,446	1,341,678
NON-CURRENT ASSETS			
Other assets	6	8,800	8,800
Financial assets	7	26,045	26,045
Property, plant and equipment	8	39,736	49,534
Right of use assets	9(i)	61,802	-
TOTAL NON-CURRENT ASSETS		136,383	84,379
TOTAL ASSETS		1,952,829	1,426,057
<b>LIABILITIES</b>			
CURRENT LIABILITIES			
Trade and other payables	10	1,164,330	863,878
Provisions	11	114,448	85,663
Lease liabilities	12	38,995	-
TOTAL CURRENT LIABILITIES		1,317,773	949,541
NON-CURRENT LIABILITIES			
Lease liabilities	12	34,484	-
TOTAL NON-CURRENT LIABILITIES		34,484	-
TOTAL LIABILITIES		1,352,257	949,541
NET ASSETS		600,572	476,516
<b>EQUITY</b>			
Retained earnings		600,572	476,516
TOTAL EQUITY		600,572	476,516

CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

STATEMENT OF CHANGES IN EQUITY  
FOR THE YEAR ENDED 30 JUNE 2020

	<b>Retained Surplus</b>	<b>Total</b>
	<b>\$</b>	<b>\$</b>
<b>Balance at 1 July 2018</b>	533,394	533,394
<b>Comprehensive income</b>		
Net (deficit) for the year	(56,878)	(56,878)
<b>Balance at 30 June 2019</b>	<u>476,516</u>	<u>476,516</u>
<b>Balance at 1 July 2019</b>	476,516	476,516
Cumulative adjustment upon adoption of new Accounting Standards (AASB 16)	(13,574)	(13,574)
<b>Balance at 1 July 2019 restated</b>	<u>462,942</u>	<u>462,942</u>
<b>Comprehensive income</b>		
Net surplus for the year	<u>137,630</u>	<u>137,630</u>
<b>Balance at 30 June 2020</b>	<u><u>600,572</u></u>	<u><u>600,572</u></u>

CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

ABN 82 146 988 927

STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES:</b>			
Receipt from customers		2,616,792	1,929,790
Government subsidies	2	50,000	-
Interest received	2	10,048	9,747
Finance costs	3	(4,570)	-
Payments to suppliers and employees		(2,227,785)	(2,226,603)
Net cash generated from / (used in) operating activities		<u>444,485</u>	<u>(287,066)</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES:</b>			
Payment for property, plant and equipment	8	(4,800)	(12,671)
Net cash (used in) investing activities		<u>(4,800)</u>	<u>(12,671)</u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES:</b>			
Repayment of lease liabilities		(36,033)	-
Net cash (used in) financing activities		<u>(36,033)</u>	<u>-</u>
Net increase / (decrease) in cash held		403,652	(299,737)
Cash and cash equivalents at beginning of financial year		913,795	1,213,532
Cash and cash equivalents at end of financial year	4	<u>1,317,447</u>	<u>913,795</u>

## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

### Report on the Audit of the Financial Report

#### Opinion

We have audited the accompanying financial report of Consumers Health Forum of Australia Ltd (the registered CHF), which comprises the statement of financial position as at 30 June 2020, the statement of profit or loss, statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information, and the directors' declaration.

In our opinion, the accompanying financial report of Consumers Health Forum of Australia Ltd has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* (the ACNC Act), including:

- (i) giving a true and fair view of the registered CHF's financial position as at 30 June 2020 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards – Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

#### Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the registered CHF in accordance with the ACNC Act and ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### Emphasis of Matter

We draw attention to Note 18 of the financial report which notes the outbreak of COVID-19 as a global pandemic and how this has been considered by the directors in the preparation of the financial report. The impact of COVID-19 is an unprecedented event, which continues to cause a high level of uncertainty and volatility. As set out in the financial statements, no adjustments have been made to financial statements as at 30 June 2020 for the impacts of COVID-19. Our opinion is not modified in respect of this matter.

#### Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the annual report for the year ended 30 June 2020 but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

### **Responsibilities of the Directors for the Financial Report**

The directors of the registered CHF are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the *Australian Charities and Not-for-profits Commission Act 2012* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the registered CHF to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the registered CHF or to cease operations, or has no realistic alternative but to do so.

The directors are responsible for overseeing the registered CHF's financial reporting process.

### **Auditor's Responsibility for the Audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the registered CHF's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the registered CHF's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the registered CHF to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.





## INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF CONSUMERS HEALTH FORUM OF AUSTRALIA LTD

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

James Barrett, CA  
Registered Company Auditor  
BellchambersBarrett

Canberra, ACT  
Dated this 17<sup>th</sup> day of September 2020

[www.chf.org.au](http://www.chf.org.au)