



Hon Roger Cook MLA
Deputy Premier
Minister for Health; Mental Health
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WEST PERTH 6005

By email: Minister.Cook@dpc.wa.gov.au

Dear Minister Cook

Statement of Intent

Thank you for your letter dated 29 August 2018 regarding your Statement of Expectation. The CAHS Board is pleased to provide the following response:

Public Sector Reform

The CAHS Board is aware of the four directions for reform, concerning a public sector focused on community needs; enabling the public sector to do its job better; reshaping and strengthening the public sector workforce; and strengthening leadership across government. The Board is keen to work cooperatively with the Department of Health to implement health-related recommendations and report on this, including in the context of the Sustainable Health Review, which for CAHS is a core component of this reform.

Sustainable Health Review

The CAHS Board is fully committed to contributing to the consultation process of the Sustainable Health Review and to the implementation of the interim and final recommendations. The Board supports the directions and interim recommendations as they apply across the health system. Of particular interest to CAHS are the Review's findings in relation to mental health and childhood obesity respectively.

The increased incidence and severity of mental health issues in children and young people is well documented. Declines in per capita funding have continued to affect child and adolescent mental health programs and a substantial increase in investment is needed to meet demand. Specific and continued investment in early intervention mental health services would likely improve long term community outcomes by decreasing serious ongoing mental health issues and hopefully reducing the self-harm, in particular suicide, in a growing number of children and young people in WA.

In relation to obesity, a recent Australian study tracked health costs and health service utilisation for a cohort of overweight and obese children aged 2-4 years, reporting that over a three year period, obese children were 2-3 times more likely to be hospitalised and their healthcare costs were 1.6 times those of healthy weight children. CAHS is committed to playing its part in a concerted community effort, which is multi-agency and able to be developed at multiple touch points by a raft of different staff to counter this issue.



I look forward to the release of the Final Report in November to identify what further steps CAHS can take to improve sustainability to ensure the best care for our children and young people.

Election Commitments

The CAHS Board is working with the Department of Health to progress measures to support our workforce. With particular reference to the protection of frontline staff, CAHS is working on the procurement to increase personal duress alarms in line with the budget allocated by the Department.

Patient Opinion

The CAHS Board is firmly focused on consumer engagement and the patient experience, and all Board members are now subscribed to CAHS Patient Opinion notifications to receive feedback on consumers' experience of our health service. As well as Consumer and Disability Advisory Committees, CAHS has a Youth Advisory Committee, and a consumer representative attends the Safety and Quality Committee of the Board, bringing a valued perspective to matters pertinent to that Committee. The Board is also finalising a Stakeholder Engagement Strategy which includes scheduling consumer feedback consultations. In addition, the chairs of the Consumer and Youth Advisory Committees sit on the Health Service Executive Committee (HSEC).

Safety and Quality

The CAHS Board has actively participated in the implementation of the Hugo Mascie-Taylor report, and I have been the Board Chairs' representative on the Safety and Quality Senior Leadership Reform Group overseeing the implementation of the review. The Board is committed to the timely publication of safety and quality information supporting a culture of openness and transparency about performance, particularly in the environment of a new hospital with increased technical capability. The Safety and Quality Committee is examining methods of publication that meets consumers' needs. The Business Intelligence Unit in CAHS has produced new dashboards which the Executive and Board are finessing to ensure that information is presented as succinctly, accurately and informatively as possible.

Culture

Improving culture and morale has been a primary focus of the CAHS Board over the past 12 months, and will continue. Of the 26 recommendations of the PMH Report, published in June 2017, 23 have been fully implemented, and the remaining three are being progressed. The Chief Executive reports to the Board each month on the status of staff engagement and morale activities. In addition to this, the Shape Our Future Steering Committee, comprised of staff members and headed by Professor David Forbes and Dr Asha Bowen, continues to provide advice and input on cultural issues in CAHS. In May 2018 the Clinical Advisory Group, a group of representatives from across CAHS, was appointed and provides advice to the Board on a range of matters, including staff morale. As well, the Board has commenced a program of regular forums with staff and continued ward and site visits to obtain direct feedback on the functioning and morale of CAHS.

Governance

The CAHS Board is ready and able to provide accurate and timely advice to you and to the Department on governance-related matters. The attestation statement for 2017-18

was provided to you in early August, and Ernst and Young undertook an independent review of the Board's operations and the Board is now considering the recommendations from that review.

With kind regards,



Debbie Karasinski
Chair
Child and Adolescent Health Service Board

21 September 2018