

Section of Act	Comments
Amendments (multiple) substitution of term “users” for “consumers”	<p>HCA supports this amendment for the following reasons; It further recognises the evidence base of consumers as actual or potential recipients of community/health services. HCA recognises that consumers may be referred to as <i>patients, clients</i> and by association, <i>families, carers</i> and other members of the users support networkⁱ. HCA consciously use the term <i>consumers</i>. A consumer actively chooses services and is able to be involved in decision-making and not solely a passive recipient care.</p> <p>The term consumer includes family and carers (in the broadest definition) who often have an important role in health care decision making and care giving.ⁱⁱ</p> <p>This should not be confused with <i>customer</i>, people who use healthcare services are much more than simply customers of services or merely subjects of care. Rather people consume health care services available to them and in varying degrees, make choices and decisions about the services they useⁱⁱⁱ. Consumers therefore have perspectives that will drive how they use and experience these healthcare services which will ultimately impact their choice and health outcomes^{iv}. The contribution consumers and communities provide is their lived experience of health services and their unique perspectives, views and experience of using these services.</p>
4 – Interpretation <i>carer</i>	HCA believes the current definition of <i>carer</i> to mean a person who is a carer for the purposed of the Carers Recognition Act 2005 is limiting.
Part 4, Division 1 s24 Who may complain	<p>HCA believes that a family member or carer should be included as a recognised person who may complain separate to S24(l) any other person....</p> <p>This recognises the important role and trusted relationship the consumer has with their family and/or carer (as identified by the consumer) in advocating and/or representing the consumer’s needs, preferences and interests (more significantly and external to, and independent of, the community or health service provider).</p>
Part 4, Division 1 s26 Form of complaint	<p>HCA recommends that the Commissioner ensure, in determining an approved manner in which complaints can be made, that no artificial barriers to making a complaint are imposed on consumers who wish to complain, and forms of complaint are recognised in the broadest possible context.</p> <p>HCA recommends this should include making a verbal complaint and the Commissioner where indicated, initiating a formal complaint as the result of a telephone inquiry by a consumer or carer.</p>

	<p>HCA notes s74 of the Act and provision for the safety of the consumer however, would also highlight the issue that many consumers, family and carers hold that making the complaint directly to the service provider may precipitate negative repercussions by the service provider resulting in risk/safety concerns for the consumer and may deter consumers, family and carers from raising a complaint.</p> <p>HCA recommends no artificial barriers to making a complaint are imposed including not having made an initial complaint to the service provider, where the consumer, their family or carer have legitimate concerns of risk/safety.</p>
<p>S11 subsection (5) insert 6(a), (b),</p>	<p>HCA, in the reading of this section 6(a) and (b), interprets this to mean there must be a code of conduct AND the volunteer has posed actual/potential risk.</p> <p>This does not appear to provide for a circumstance where there is no code of conduct and the volunteer has posed actual/potential risk.</p> <p>HCA is unsure what powers does that Act have to address the practices of this person?</p>
<p>Amendment of heading Part 6 Div 5</p>	<p>HCA agrees with this amendment to substitute “unregistered health practitioner” for certain health service providers”</p> <p>HCA believes that this does not assume that all providers of certain health services are referred to or should be referred to as health practitioners (albeit unregistered).</p> <p>The term <i>unregulated health practitioners</i> can include health professions who hold a qualification but also include cafe workers roles who may have minimal or no requirements for qualification or training.</p> <p>HCA recognises consumers are often confused about who is and is not a health practitioner and may assume a person who calls themselves a health practitioner (irrespective of unregulated) has training, qualifications, regulation, standards and licensing requirements. and believes the term <i>health practitioner</i> should only refer to health practitioners eligible for registration with a relevant Board (through AHPRA).</p>
<p>Amendment s56C Commissioner may take action</p>	<p>HCA notes the Commissioners powers to (c) publish a public statement.... HCA, as the peak body for health consumers voice in South Australia, have an important mandate to inform consumers about HCSSS findings and have the consumer networks to facilitate this information.</p>

ⁱ SA Health A Framework for Active Partnership with Consumers and the Community 2013

ⁱⁱ Health Consumers New South Wales

ⁱⁱⁱ Wolf (2018) Consumer Perspectives on Patient Experience, The Beryl Institute

^{iv} Consumer Perspectives on Patient Experience 2018