

2020  
To  
2024

# SWSLHD Primary & Community Health

## Staff Guide to

## Consumer & Community Participation



FINAL DRAFT – 29/09/2020



**Health**  
South Western Sydney  
Local Health District



## Acknowledgement

South Western Sydney Local Health District (SWSLHD) Primary and Community Health (P&CH) acknowledges the traditional owners of the land described in this document as south western Sydney: the Darug, Dharawal and Gundungurra peoples and their continuing connection to this land. We pay our respects to the Elders past, present, and thank them for leadership in improving the health of local Aboriginal people and communities.

We wish to thank the following for their contribution to the P&CH Staff Guide to Consumer & Community Participation – 2020-2024.

- P&CH Community Voices
- P&CH Staff

Sponsored by: Justin Duggan (General Manager for P&CH)

Prepared by:

- Sharon Smith and Patricia Thomson (Consumer and Community Representatives for and on behalf of P&CH Community Voices)
- June Nvene (P&CH Consumer and Community Participation Manager)

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Further copies can be downloaded from the SWSLHD website [swslhd.health.nsw.gov.au/ccp/pch.html](https://swslhd.health.nsw.gov.au/ccp/pch.html)

**P&CH CONSUMER & COMMUNITY  
PARTICIPATION MANAGER CONTACT DETAILS**  
Mobile No: 0457 504 516

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## Why is Consumer & Community Participation important for Primary & Community Health?

Consumer and Community Participation (CCP) is important to Primary & Community Health (P&CH) as it refers to health services '**working with**' rather than '**doing to**' people

- Improves quality and safety of services and enhances how health 'should be doing business'
- Clients and consumers have a 'human right' to participate in health services
- Delivers better outcomes for clients and improves the performance of health systems
- It makes the health service accountable
- Supports accreditation – documentation and evidence

## Who and how will we strengthen and improve the practice of Consumer & Community Participation?

### P&CH Consumer & Community Participation Manager

The Consumer & Community Participation Manager reports to the General Manager and is supported by the SWSLHD CCP Unit.

The CCP Manager can assist staff with:

- Understanding how to partner with their clients in supporting the National Standards;
- Undertaking the Gold Tick approval process;
- Developing and reviewing of client's pamphlets, brochures and flyers;
- Recruiting and supporting consumer and community participants;
- Advocating for P&CH Community Voices to ensure that their views and opinions are heard and valued;
- Patient and Carer Experience Interviews (PaCE);
- Advocating for resources to improve CCP eg My Journey of Care, seeding grants for staff projects;
- Organisation of consumer and community related health events/activities (eg CCP Annual Conference, Carers Week, International Day for People with Disability (PwD));
- Gathering client/consumer/community feedback.

## P&CH Directors and Managers

CCP is everyone's business and responsibility, from our individual staff relationships with clients/consumers/community to actively partnering with them to improve the health services.

As a Director or Manager, the following areas highlight where you should be consulting clients and consumers:

- Involving Consumer and Community Representatives (CCR) in your [Committee Meetings](#).
- Starting meetings with a consumer related story;
- Engaging with clients and consumers (eg discuss at Team Meetings by having a standing CCP Agenda Item);
- Including P&CH CCR in staff recruitment processes;
- Ensuring we are meeting the communication needs of our diverse consumers;
- Developing and reviewing strategic documents, plans, models of care (MoC);
- Planning, managing or implementing quality improvement projects, programs or activities.

Your role in supporting your staff/team to:

- Ensure **ALL** new and reviewed brochures/pamphlets/flyers goes through the "Gold Tick" process;
- Provide feedback to our clients/consumers/community (eg "You Said, We Did");
- Promote recruitment of clients and consumers for P&CH Community Voices;
- Apply for Seeding Grants that promote CCP activities;
- Ensure patient journeys/story and PaCE Interviews are collected;
- Staff mandatory and other training is completed (refer to Page 10).

## What's my responsibility as a Staff Member?

CCP is everyone's business and responsibility, from our individual staff relationships with clients/carers/community to actively partnering with them to improve the health services.

Your role is to:

- Make CCP something you do each day (eg involve your clients in their care plan);
- Ensure **ALL** new and reviewed brochures/pamphlets/flyers goes through the "Gold Tick" process;
- Encourage your clients to complete the My Experience Matters Survey;

- Ensure Patient Journeys and PaCE Interviews are collected;
- Apply for Seeding Grants that promote CCP activities;
- Ensure you do all staff mandatory and other training is completed (refer to Page 10).

## All Staff need to familiarise themselves with these documents

Click on the picture for the hyperlink to the document.



Information Standards for Client Pamphlets

This is what the Gold Tick looks like



P&CH Consumer & Community Participation: Tick of Approval Procedure

## How to engage your clients, consumers and community voices Consultations

Under Standard 2, staff should engage with their own clients at the beginning of a consultation, as the document is being developed.

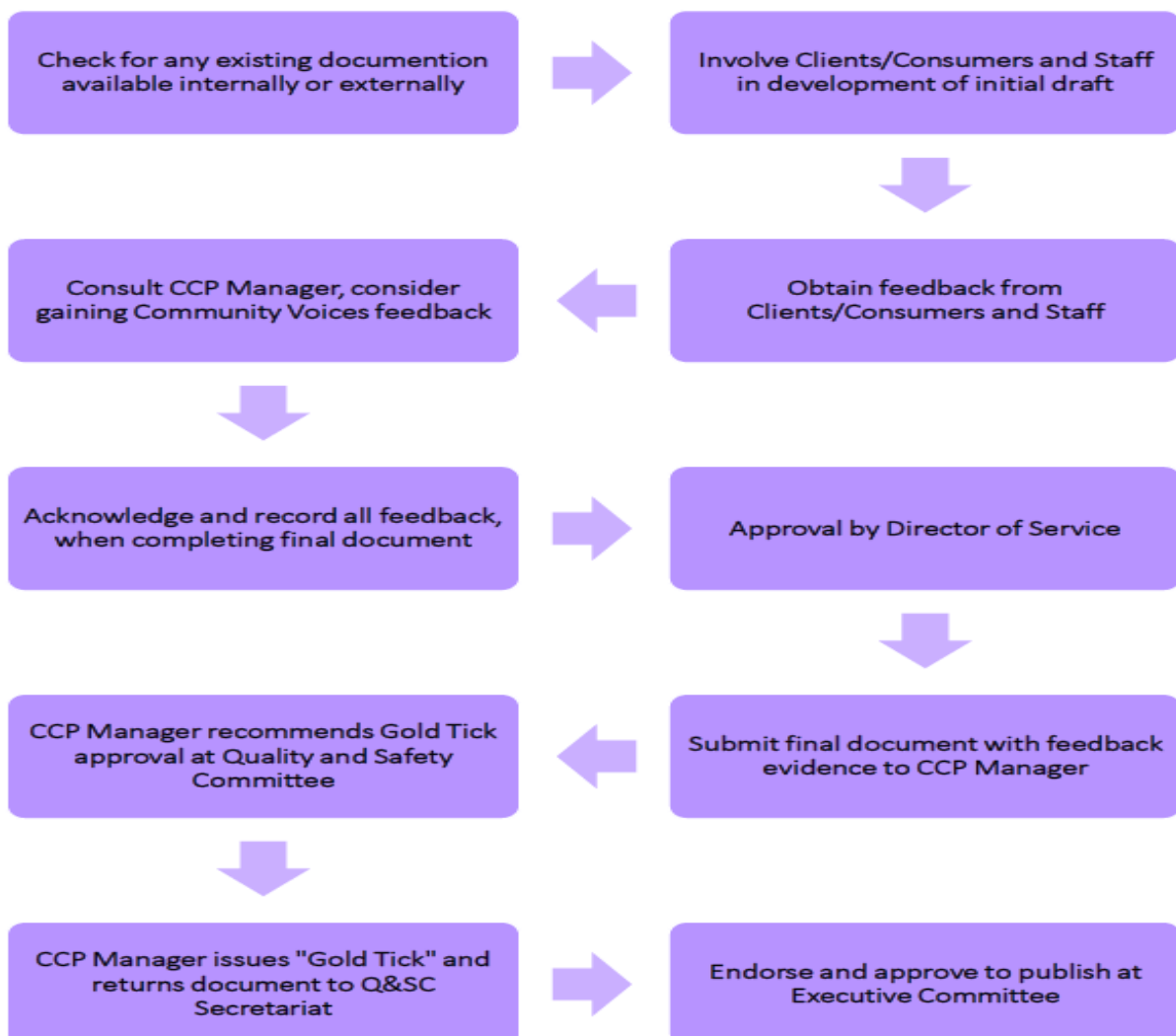
Consultations should be undertaken when:

- a gap has been identified;
- creating a MoC for a new or existing service;
- developing information for clients.

**At the beginning of the consultation process, staff should involve CALD, ATSI, and PwD clients within their services.**

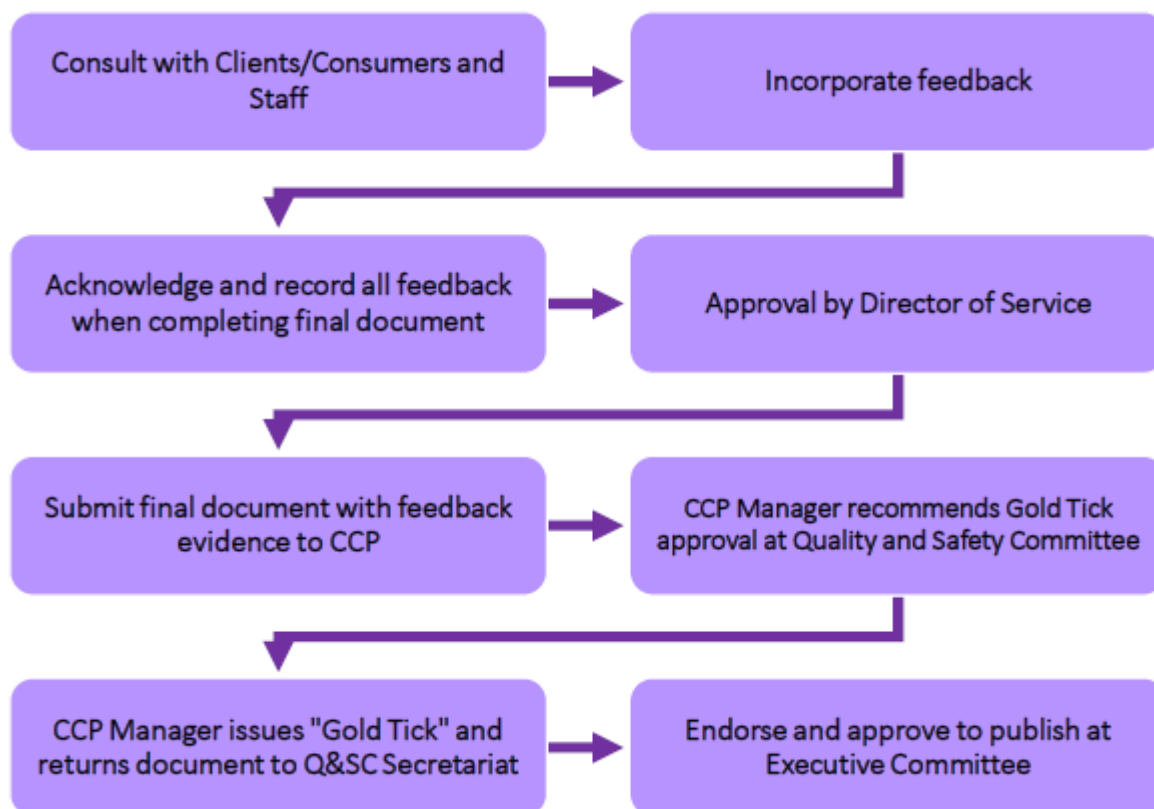
When the consultation is completed, any notes or a draft document should be given back to those who attended, along with the feedback form, to review and return.

### Developing Documents



## Reviewing Documents

In order to support staff reviewing documents (eg client information/MoC/procedures and guidelines), P&CH has guidelines on “Information Standards for Client Pamphlets” and “P&CH Consumer and Community Participation: Tick of Approval”.



## Community Voices

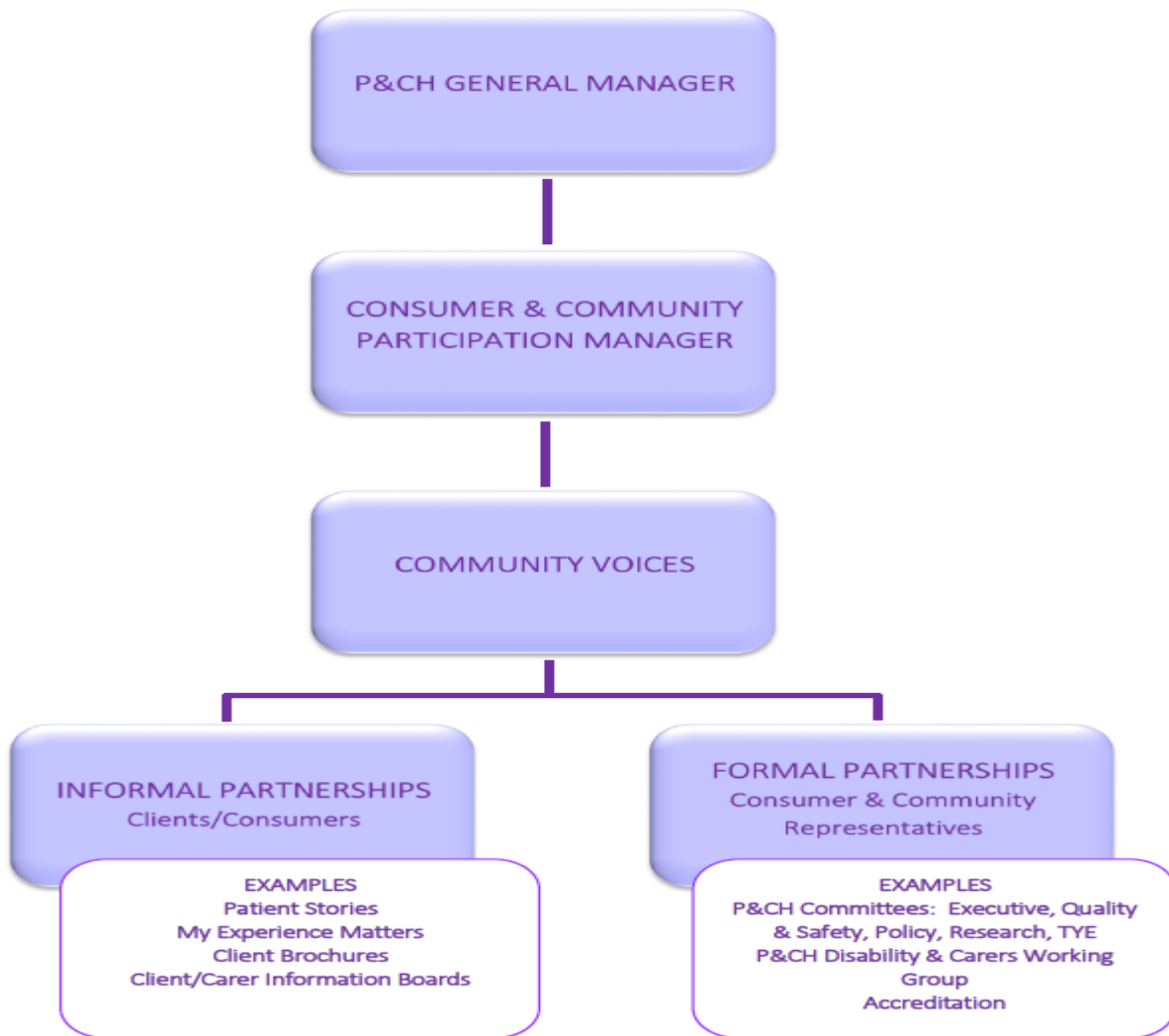
Community Voices are a group of Clients/Consumers, Carers and Community Representatives with experience in health care services. Community Voices is a consultative group that works in partnership with the health service to improve quality and safety of services. Their participation in providing comments and advice on service planning, and working with staff through the accreditation process, enhances P&CH services.

### Partnerships with Consumers can be Informal and Formal

- Informal Partnerships – working with Clients/Consumers and Carers to incorporate their views into the design of new services and participation in planning, implementing and evaluating existing services.
- Formal Partnerships – working with Clients/Consumers and Carers who have become SWSLHD CCR, have signed the NSW Health Code of Conduct, and completed the relevant checks. This enables CCR to be part of P&CH committees, working groups,



commenting on higher level documents, assisting with staff development, and representing P&CH at the LHD level.



## Transforming Your Experience

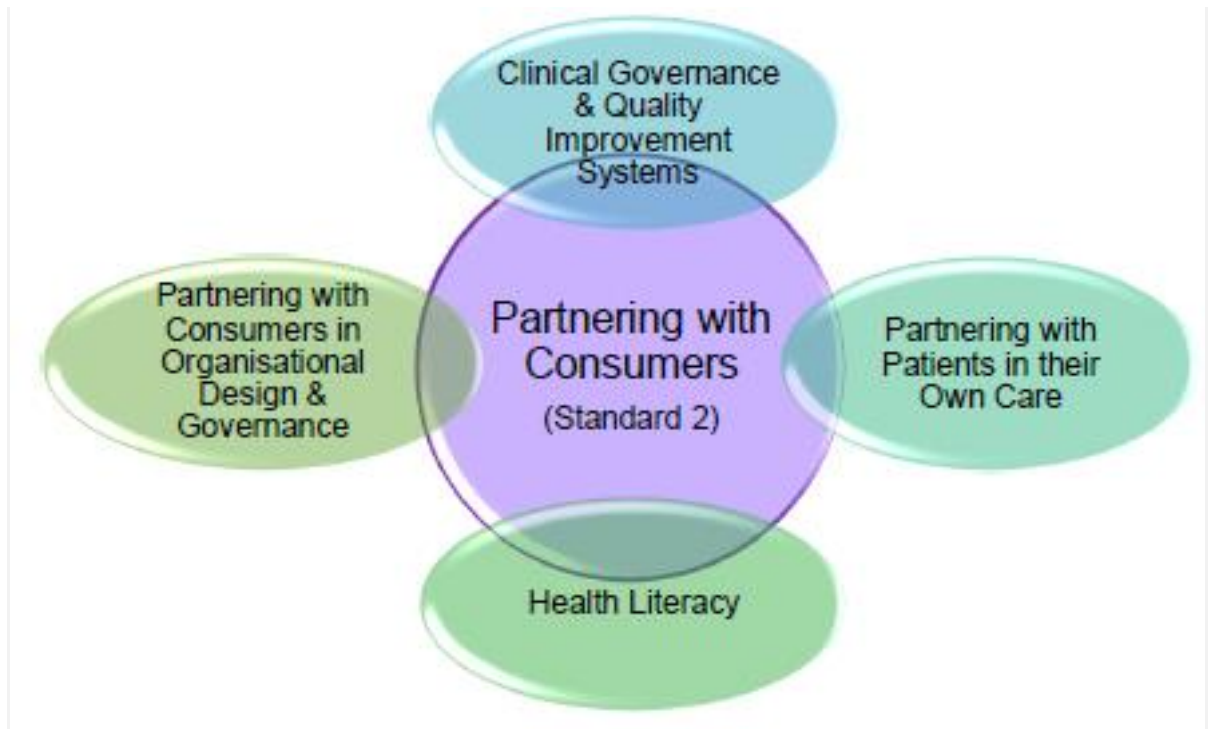
[Transforming Your Experience](#) (TYE) is SWSLHD's five-year strategy to positively transform how our patients, consumers, staff and communities experience our organisation. The Strategy provides us with a clear direction for working together to deliver safe and quality health services and build the health of our communities – now and into the future.

The CCP Unit is an integral part of TYE. Since the commencement of the Strategy, the CCP Unit and the CCR have been active partners in designing, developing and implementing the TYE Strategy, in recognition of the need to enhance both patient and staff experience.

Each Facility and Service have a TYE Implementation Committee, where CCR are part of its membership.

## Partnering With Consumers

P&CH is committed to implementing the [National Safety and Quality Health Service Standards Second Edition](#). **Partnering with Consumers is included across all the standards with the exemption of Standard 1.**



## The National Standards

The Australian Commission on Safety and Quality in Health Care (ACSQHC) developed the National Safety and Quality Health Service (NSQHS) Standards. They aim to protect the public from harm and improve the quality of health service provision. The Standards provide a nationally consistent statement about the standard of care consumers can expect from their health service organisations. Standard 2 – Partnering with Consumers is recognised as integral to the delivery of safe, quality care.

## Clinical Governance & Quality Improvement Systems

*Systems are designed and used to support patients, carer, families and consumers to be partners in healthcare planning, design, measurement and evaluation.*

**ACTION:** Integrating clinical governance

2.1 Clinicians use the safety and quality systems from the Clinical Governance Standard when:

- a. Implementing policies and procedures for partnering with consumers
- b. Managing risks associated with partnering with consumers
- c. Identifying training requirements for partnering with consumers

**ACTION:** Applying quality improvement systems

2.2 The health service organisation applies the quality improvement system from the Clinical Governance Standard when:

- a. Monitoring processes for partnering with consumers
- b. Implementing strategies to improve processes for partnering with consumers
- c. Reporting on partnering with consumers

Useful Documents	Examples
CCP Orientation Slides	CCP Annual Reviews
Information Standard for Clients Pamphlets	CCR on P&CH Committees eg Executive, Q&S, TYE, Policy, Research, Disability & Carers Working Group
P&CH Consumer and Community Participation: Gold Tick	CCR presentation to Q&S
P&CH Staff Guide	Consumer Surveys eg. Carer's Week
P&CH Strategic Direction Statement	My Experience Matters (MEM)
PaCE Interviews	P&CH Committee Action Plans
Training	You Said We Did
<ul style="list-style-type: none"> <li>➤ Patient Centred Care</li> <li>➤ Advance Care Planning</li> <li>➤ Disability - Let's Talk Disability; Intellectual Disability Resources; Community and Inclusion; Partnering with Carers</li> </ul>	Risk Huddles

## Partnering with Patients in their Own Care

*Systems that are based on partnering with patients in their own care are used to support the delivery of care. Patients are partners in their own care to the extent that they choose.*

**ACTION:** Healthcare rights and informed consent

2.3 The health service organisation uses a charter of rights that is:

- a. Consistent with the Australian Charter of Healthcare Rights
- b. Easily accessible for patients, carers, families and consumers

2.4 The health service organisation ensures that its informed consent processes comply with legislation and best practice

2.5 The health service organisation has processes to identify:

- a. The capacity of a patient to make decisions about their own care
- b. A substitute decision-maker if a patient does not have the capacity to make decisions for themselves

**ACTION:** Sharing decisions and planning care

2.6 The health service organisation has processes to clinicians to partner with patients and/or their substitute decision-maker to plan, communicate, set goals, and make decisions about their current and future care

2.7 The health service organisation supports the workforce to form partnerships with patients and carers so that patients can be actively involved in their own care

Useful Documents	Examples
Guardianship (Guardianship Policy)	Care Planning and documenting it in files
Health Charter of Rights (English and Culturally and Linguistically Diverse (CALD), PWD)	Client and Carer Case Conference
Health Literacy Roadmap	Client/Carer Nurse education on treatment
Information Standard for Clients Pamphlets	Consent
Patient Privacy brochure	Determining capacity to make decisions
Patient story and consent form templates	Ensure consent is documented
Rights & Responsibilities brochure	PaCE
	Service Agreement
	Substitute decision-maker

## Health Literacy

*Health service organisations communicate with patients in a way that supports effective partnerships.*

**ACTION:** Communication that supports effective partnerships

2.8 The health service organisation uses communication mechanisms that are tailored to the diversity of the consumers who use its services and, where relevant, the diversity of the local community

2.9 Where information for patients, carers, families and consumers about health and health services is developed internally, the organisation involves consumers in its development and review

2.10 The health service organisation supports clinicians to communicate with patients, carers, families and consumers about health and health care so that:

- a. Information is provided in a way that meets the needs of patients, carers, families and consumers
- b. Information provided is easy to understand and use
- c. The clinical needs of patients are addressed while they are in the health service organisation
- d. Information needs for ongoing care are provided on discharge

Useful Documents	Examples
Carer's pamphlet	CCR on committees (eg Policy Committee)
Health Literacy Roadmap	Consumer feedback on MoC
Information Standard for Clients Pamphlets	Gold Tick feedback for brochures
Respecting the Difference Training	Interpreter Service brochure
Teach-back (My Health Learning)	Training records about cultural awareness and diversity
Working in Culturally Diverse Context Training	

## Partnering with Consumers in Organisational Design & Governance

<i>Consumers are partners in the design and governance of the organisation.</i>
<b>ACTION:</b> Partnerships in healthcare governance planning, design, measurement and evaluation
2.11 The health service organisation: <ul style="list-style-type: none"> <li>a. Involves consumers in partnerships in the governance of, and to design, measure and evaluate, health care</li> <li>b. Has processes so that the consumers involved in these partnerships reflect the diversity of consumers who use the service or, where relevant, the diversity of the local community</li> </ul>
2.12 The health service organisation provides orientation, support and education to consumers who are partnering in the governance, design, measurement and evaluation of the organisation
2.13 The health service organisation works in partnership with Aboriginal and Torres Strait Islander communities to meet their health care needs
2.14 The health service organisation works in partnership with consumers to incorporate their views and experiences into training and education for the workforce

Useful Documents	Examples
Consultations Forum – Open Space Technology SWSLHD Aboriginal Health Plan 2017-2021 Seeding Grants CCP Framework	CCP Annual Review Consultations Forums with consumers CCR as members of P&CH Committees CCR presentation to Q&S Models of Care MEM Mapping of Consumer involvement P&CH CCP Manager orientation of CCR P&CH Committee Members Annual Evaluation P&CH Committee Terms of Reference Patient stories Presentations to P&CH Staff from CCR Quality Forums where consumers are involved Teach-back

## Definitions

**Consumers:** A person who is receiving care in a P&CH Health service.

**Consumer & Community Representative:** Provides a consumer perspective, contributes consumer experiences, advocates for the interests of current and potential health service users, and takes part in decision-making processes (ACSQHC).

**Patient Centred Care:** Patient Centred Care is healthcare that is respectful of, and responsive to the preferences, needs and values of patients, consumers and the community, with dimensions including respect, emotional support, physical comfort, information and communication, continuity and transition, coordination of care, involvement of family and carers, and access to care.

**Health Literacy:** Health literacy is the extent to which consumers can obtain, process, and understand information about health care, services and the health system. It also refers to a consumer's capacity to use that information to make decisions about their health care. This includes, but is not limited to, consumers with limited English proficiency, those with socio economic vulnerabilities, those from an Aboriginal and Torres Strait Islander (ATSI) background, communities from Culturally and Linguistically Diverse (CALD) background and children and young people.

**Partnership:** Health services staff working with clients, consumers rather than doing to/assuming what services people want.

## Acronyms

ACSQHC	Australian Commission on Safety and Quality in Health Care
ATSI	Aboriginal and Torres Strait Islander
CALD	Culturally and Linguistically Diverse
CCP	Consumer & Community Participation
CCR	Consumer & Community Representatives
MEM	My Experience Matters
MoC	Models of Care
NSQHS	National Safety and Quality Health Service
P&CH	Primary & Community Health
PaCE	Patient and Carers Experience Interviews
PwD	People with Disabilities
SWSLHD	South Western Sydney Local Health District
TYE	Transforming Your Experience