Western NSW Primary Health Network

Consumer & Community Engagement Framework

June 2020

Who we are

Western NSW Primary Health Network (WNSW PHN), is one of 31 Primary Health Networks across Australia, established to support frontline health services and increase the efficiency and effectiveness of primary health care.

Our focus is patients who are at risk of poor health outcomes and working to improve the coordination of their care, so they receive the right care in the right place at the right time. We work closely with key stakeholders including general practice, other health care providers, Local Health Districts, hospitals and the broader community to align services with the health needs of the region.

WNSW PHN is a not-for-profit organisation primarily funded by the Australian Government.
Our region covers both Far West and Western NSW Local Health Districts.

Vision
Western NSW Primary Health Networks strategic vision is supporting, strengthening and shaping a world class, person-centred primary health.

Purpose
Social Justice, access and equity in quality primary health.

Purpose of the Framework

The purpose of the Consumer and Community Engagement Framework is to establish a best practice model for engaging with consumers and community to build partnerships that manage resources and enable services.

It guides how WNSW PHN works with consumers and communities to achieve desired health outcomes. The Framework applies to public and private health service organisations delivering health promotion, prevention, primary, acute, sub-acute and community health services and with community and consumers receiving our services.

This Framework outlines guiding principles and strategies to enable authentic engagement and codesign. It includes a toolkit & guide to be used by all, providing a process to plan, develop, action and review engagement strategies in line with our guiding principles.

This Framework aims to encourage and assist the PHN to initiate engagement with consumers and community from the outset of our work, and to enable the PHN to be a better partner in community led projects.

Definitions

Community: A group or groups of people or organisations with a common local or regional interest in population and individual health.

Consumer: a person who uses, has used or is a potential user of health services, includes their family and unpaid carers

Health Service provider: any accredited service provider that delivers services for the community and consumers.

Co-design: Co-design is a way of bringing consumers, carers, families and health workers together to improve services. It creates an equal and reciprocal relationship between all stakeholders, enabling them to design and deliver services in partnership with each other. Planning, designing and producing services with people that have experience of the problem or service means the final solution is more likely to meet their needs[1].

What is consumer and community engagement

Consumer and community engagement is the way we collaborate with and listen to people, responding to what we hear. Engaging with consumers and community is key to WNSW PHN to be able to develop and deliver services that are fit for purpose and led by those that use them.

When engaging consumers and community, we will ensure that we will reach out to a broad range of community-based stakeholders and the people we are connected to around us. These connections are often place based with a richness of diversity and roles.

1 - https://www.aci.health.nsw.gov.au/__data/assets/pdf_file/0013/502240/Guide-Build-Codesign-Capability.pdf

We draw on best practice guidelines in consumer and community engagement developed by International Association of Public Participation (IAP2) which has been modified for our purpose. More detail is provided in next section.
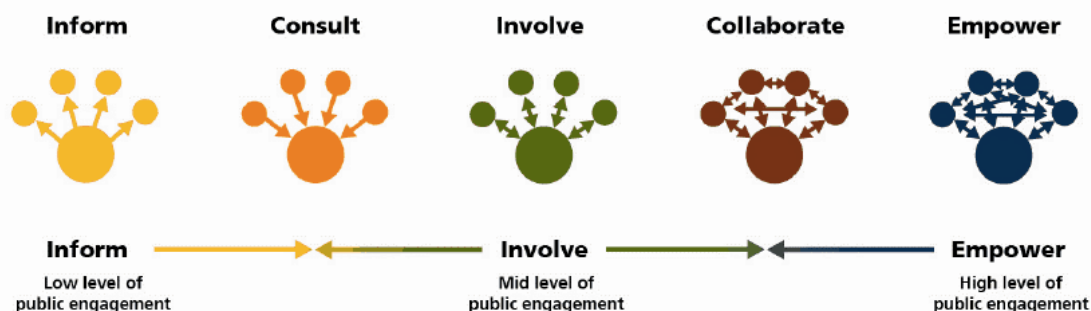

Figure 1: IAP2 Model

Guiding principles[2]

Adapted from the Health Consumers Framework Model, WNSW PHN identifies the following nine guiding principles that support and drive the planning, development, action and review of our engagement activities.

Figure 2: Guiding Principles for Community and Consumer Framework

IAP2 public participation spectrum

The five levels of engagement are shown in Table 1 below. This is a modified IAP2 spectrum of engagement. The key difference is the use of new or modified labels that were developed by consumers engaged in develop this framework.

These labels are complementary and enable greater understanding with our community. Codesign as a process is seen in higher engagement levels – Build and Enable.

Codesign is enabled when there is an environment that promotes equal partnership, consumer leadership and value consumer knowledge and expertise. As we engage and commission services, we will aim to seek the highest level that is appropriate and possible. Information and guidelines on how to co-design is not provided in this framework – see ACI's "A Guide to Build Co design Capability" for more information[3].

Western NSW Primary Health Network Engagement

SHARE	ACKNOWLEDGE	EXPLORE TOGETHER	BUILD	ENABLE
Tell people about the project Provide the public with balanced and objective information to assist them in understanding the problem alternatives, opportunities and solutions	Recognise that consumers and community have knowledge to share. Ask what they think. Obtain public feedback on analysis, alternatives and / or decision	Have a conversation, enable dialogue with different people and roles throughout the project Work directly with the public thoroughly the process to ensure that public concerns and aspirations are consistently understood and considered	Work together to create change. Partner with the public in each aspect of the decision including the development of alternatives and the identification of preferences	Enable and make space for others to lead the change. Be a participant in their change process Work with the public to implement jointly agreed solutions

Table1: Western NSW Primary Health Network Engagement Framework based on IAP2

Our Engagement approach
Our engagement activities will be designed in a way that is suitable to consumers, the community and the project.

Where possible we will aim to collaborate together with consumers by creating a safe place for genuine dialogue, reciprocity, and collaboration to occur. This type of engagement helps empathetic relationships to grow between all stakeholders, acknowledging vulnerabilities and enabling us to move forward together.

We acknowledge that relationships that enable collaboration and empowerment are ongoing, complex & can take time.

3 - https://www.aci.health.nsw.gov.au/__data/assets/pdf_file/0013/502240/Guide-Build-Codesign-Capability.pdf

Why Consumer and Community engagement – the PHN Promise

WNSW PHN values the insights and expertise that consumers and the community bring to improving the health and wellbeing of our community.

Engaging with those who use health services and their communities around them, provides visibility to the depth of their practical knowledge and lived experience of their health system needs. This includes access to and use of WNSW PHN services. This knowledge can be applied to health service decision making, policy development, service delivery and evaluation.

Engaging people to make decisions on the health services that will directly impact them can lead to improved health outcomes.

The promise of Western NSW Primary Health Network is to engage with consumers and community to:
1. Involve consumers in design and commissioning of services relevant to consumers needs.
2. Consult in an appropriate way that embraces the diversity of the community
3. Communicate and share fully with the community and consumers involved. This includes providing feedback and updates following consultation.
4. Include consumers in evaluation of services to understand what matters to those receiving the services

Who is involved?
Best outcomes are made possible through the shared responsibility of WNSW PHN, those they commission (the service providers) the community and consumers. One of the challenges in Western NSW PHN region, is that there are often overlaps between these stakeholder groups in our communities.

Ideally, Staff will not take on the role of a consumer within engagement activities in their service. Their knowledge of the service may bias their interaction as a consumer, making it difficult for them to be independent. Staff may participate in engagement activities as staff representatives rather than consumers. There are two exceptions to this:
- staff who are participating in an activity coordinated by an area of the health service outside of their own role, who have specific representative experience and skills; and
- peer workers whose roles are primarily to support consumers[5].

WNSWPHN will ensure their engagement reach also extends to population groups who face barriers to accessing healthcare and are less likely to volunteer to engage in activities through commonly used engagement methods (e.g. call for volunteers in media advertisements).

These diverse groups may include, but are not limited to:
- Socially and economically marginalised
- People living in remote communities
- Aboriginal and Torres Strait Islander People
- Vulnerable members of the community including people with a disability, people who are homeless & those that are at risk.
- Culturally and linguistically diverse peoples and refugees
- Lesbian, gay, bisexual, transgender, intersex and queer people (LGBTIQ)
- Young people[6].

4 - Consumer Focus Collaboration. (2001). The Evidence Supporting Consumer Participation in Health, Commonwealth Department of Health and Aged Care, Canberra, Australia.this report.
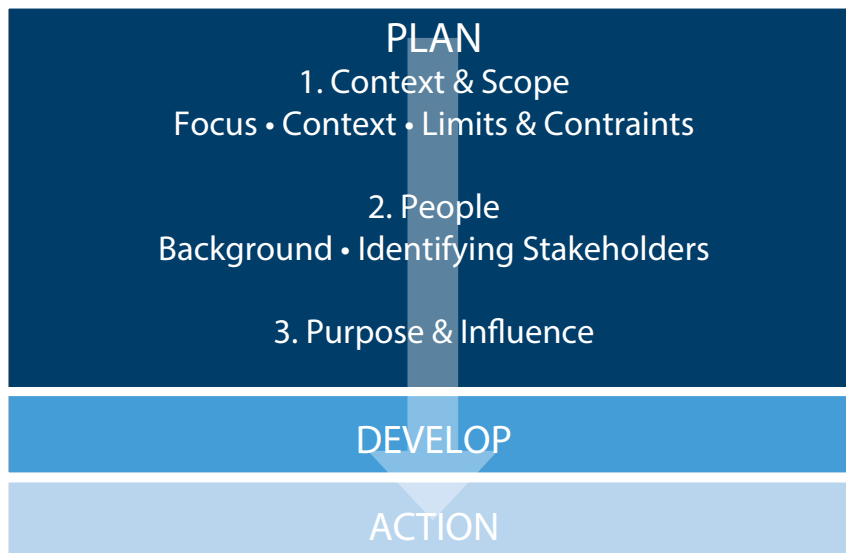5 - http://www.hcq.org.au/wp-content/uploads/2017/03/HCQ-CCE-Framework-2017.pdf
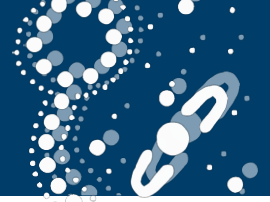
Guide to Implementing the Framework

The WNSWPHN framework has been developed with reference to our individual & community needs combined with known community engagement exemplars . The following section guides your activities. A supporting guide "Engagement In Action" has been designed to be used in all projects, helping you to shape your engagement activities and outcomes with stakeholders.

The framework includes the following three stages,
- PLAN – define your focus, identify key people and understand your purpose.
- DEVELOP – Communicate and ready your engagement and project plan
- ACTION – engage and work through your project plan to attain your aims.

PLAN
1. Context & Scope
Focus • Context • Limits & Contraints

2. People
Background • Identifying Stakeholders

3. Purpose & Influence

DEVELOP

ACTION

1.1 Context and Scope

This stage explores the context, background history, importance, timing and what needs to happen in your project.

1.1.1 Focus

Consumer and community engagement can occur in all facets of health, so it is important to know the aim and purpose of the project.

Consumers can be involved in projects that deal with priority setting for strategic planning of a statewide service or an entire health region, developing health literate information, and making decisions about their own care.

The focus of your project may require engagement such as ;
- Individual – consumers as partners in their own healthcare and treatment
- Service – program and service delivery focused on partnerships at a facility level
- Network – regional engagement across service providers enabling input into broader plans across service areas eg health and hospital services, PHNs, NGO and Community organisations
- System – policy, reform and legislative influence across government jurisdictions.

ASK:
What is the project/program about?
What is the aim of the project?

1.1.2 Context

Knowing the project context will help you understand the complexity of the project. This is an indicator of the type of engagement required for the project. Less complex projects are likely to make use of lower levels of engagement.

The principal engagement activity for WNSW PHN is conducting the strategic Needs Assessment to inform what new services need to be commissioned and evaluated. This activity requires a higher level of input from the community.
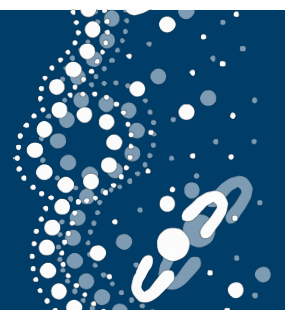
ASK:
Why are we doing it?
Who does it benefit?
What are the pressures?
What are the risks and benefits?
What decisions need to be made?

1.1.3 Limits and constraints

The level of engagement may vary depending on the stage you are at in the project and any constraints or boundaries.

Knowing the project stage will help to determine who, how and when to engage to progress to the next stage. Each project stage has an element of engagement. This may vary depending on the purpose of the projects stage.

Engagement should take place across planning, implementation, monitoring, evaluation and review and is an integral part of continuous improvement processes. Good engagement occurs early; at the priority setting and planning phase and can (and should) continue through to evaluation and review as in the diagram below.

Figure 3: When do we enage framework by Health Consumers Queensland[5]

Constraints and boundaries considered in the planning phase can include :
- Budget and other financial limitation
- Timing of activities and when the project needs to be completed
- Geographical area
- Demographics
- Any "non-negotiables"

ASK:
How far along the project are we?
What are the constraints and boundaries?

1.2 People

This stage identifies the relevant people to be involved & engaged with in the project or program. It considers who they are, their role and interest in the success of the project.

1.2.1 Background

While the context has been determined in the Plan stage, it is important to scan the stakeholder environment within that context.

When identifying the people who are important in the project, the Project Manager also needs to consider any history or issues relating to potential stakeholders and how that may influence the project. It is also important to consider similar projects that have been completed with stakeholder engagement, learn and re-use what worked well.

ASK:
Who will lead the engagement? Is it the PHN, another organisation, consumers, families and carers or the community?
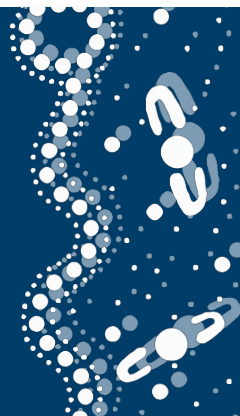Who is co-hosting or partnering with us?
Have hard to reach & vulnerable communities been included and accessed?
Who are the community members and public that are interested?
Who are the key groups with a passion or interest in the issues?
Is there anyone missing from the list?

1.2.2 Identify stakeholders

Knowing who is important to engage with will help you to understand how to engage with them. This will include the project lead, any partners or co-hosts, interested and influential stakeholders.
Consider who from the consumer and community network will influence and ensure the success of your project. Include as much description in your Expression of Interest as possible to ensure you have the right people involved.

Consider also the impact of the project on the stakeholders. Also consider if there are marginalised communities involved, and if you have taken into account appropriate ways to reach and engage them.

1.3 Purpose and Influence

Being clear about the purpose and the desired outcome of the engagement is essential to deciding how people can be involved. It also generates goals and criteria for evaluation of the process.

Being clear about the purpose and desired outcome of the engagement is key to knowing how people can be involved and why. The depth and purpose of engagement as well as the role of the consumer in the engagement will determine how you engage.

Examples of why to engage includes:

- providing information
- legal or standards compliance
- social licence
- behaviour change
- relationship development
- generating support for change
- capacity and capability building

- drafting or reviewing a policy, strategy, plans
- identifying problems or opportunities to address
- delivering a new service
- generating alternatives, new ideas or further propositions
- understanding reactions,
- implications or consequences of a proposal

Use the Engagement in Action guide to record your thinking and planning. You will now be able to communicate and provide information to your key stakeholders:

- A clear understanding of the context and scope of your project/program, who is involved and their level of influence and your purpose and goals.

- Your planned outcomes and anticipated experience for those being involved and engaged.

PLAN - DEVELOP - ACTION
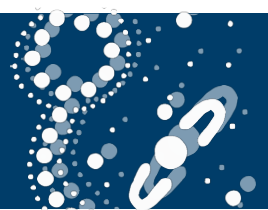
The develop stage is your opportunity to shape the detail to implementation. Work with a small group of key stakeholders to identify outcomes and the experiential aims and develop an engagement strategy.

Clarify:
1. The planned outcome of the engagement
    - What are you are looking for?
    - For example: inform, gaining an understanding, a list of issues and concerns, input, feedback, comment, ideas, solutions, alternatives, decisions, next steps etc.
2. The experiential aims of the engagement
    - What effect do you want this activity to have on our stakeholders?
    - For example: informed, robust discussion, calmness, called to action, supported, understood, valued, appreciated etc.

Applying the guiding principles will naturally lead to a "doing with" engagement approach rather than a "doing to or for". Aiming for approaches that will maximise engagement opportunities for more equal and reciprocal relationships, the sharing of roles and responsibilities, including decision making, is likely to result in positive changes

Create a project timeline using the project charter and project management plan template and identify:
- major tasks that need to be undertaken, completed and when and by who
- decisions that are required and by who?
- how can consumers, families, carers and stakeholders to be genuinely involved in the detail above?

PLAN - DEVELOP - ACTION
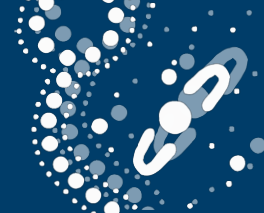
How you have planned, developed your engagement and project will influence the type of action to take. Key is where on the spectrum of engagement (see image in earlier section). The IPA2 model is a continuum framework rather than a hierarchy. Depth of engagement is determined by project complexity and stage. Project managers are encouraged to start at the highest level relevant to the project, all levels to the left of this are then also included. For example, if you start at consult – it is likely you will consult and also inform. Each level of engagement and the mechanism should be represented in the project plan.

The fifth level of engagement, Empower, is the most complex level of engagement and represents true co-design from the community where the PHN will be asked to participate rather than lead. It is a high level of engagement maturity and represents a very different role for the PHN.

There are many ways to engage consumers and community in projects. The following table provides some typical ways used by WNSW PHN to help you determine what is the best method and depth of engagement. This is also an opportunity to determine how to know if the engagement and project is successful, meeting desired outcomes outlined in the previous steps.

SHARE	ACKNOWLEDGE	EXPLORE TOGETHER	BUILD	ENABLE
Websites Fact Sheets Media releases Displays Education programs Information delivery forums	Public Comment Surveys Public Meetings Conferences Discussion papers Focus groups	Workshops Round Tables Working Parties Stakeholder Needs Assessment Forums Panels	Advisory committees Scenario building Clincial networks Planning committees	Multi purpose health services Steering committees Strategy groups Boards

1. PLAN
1.1 CONTEXT AND SCOPE

1.1.1 FOCUS
a.   What is the program about?
b.   What is the aim of the project?
c.   Where is the area of impact for engagement?
d.   Where will the engagement occur?

1.1.2 CONTEXT
a.   Why are we doing this project?
b.   Who does it benefit?
c.   What are the risks and benefits?

1.1.3 LIMITS & CONSTRAINTS
1.   What stage is the project at?
    a.   Assess need
    b.   Plan and design services
    c.   Promote the implementation by commissioned service provider
    d.   Evaluate
2.   What are constraints we need to consider
    a.   Geographical area – size and associated constraints
    b.   Access
    c.   Demographics
3.   What is the budget and associated financial constraints?
4.   What are the non-negotiables by whom?

1.2 PEOPLE

1.2.1 BACKGROUND
1.   Is there any history or specific issues relating to people involved that we need to consider?
2.   Has there been a similar project we can learn from and re-use?

1.2.2 IDENTIFY
Consider who will influence and ensure the success of your project. Include as much description as possible to ensure you have the right people involved.
TIP : Use the format <consumer/community role> who have a <need for engagement>. This will help you to focus.
Consider:
1.   Who will lead the project?
2.   Who is co-hosting or partnering with us?
3.   Who are the key groups with a passion or interest in the project and planned outcome?
4.   Who are the community members and public that are interested.

1.3 PURPOSE & INFLUENCE

Depth of Engagement
1.   Why make the effort to engage?
2.   What do you want from the stakeholders involved?
3.   What do they want from us?
4.   What influence with the stakeholders have on decisions and actions?
Based on the above thinking – what level of engagement will help you to achieve your planned outcome:
1.   Share (inform)
2.   Acknowledge (consult)
3.   Explore together (involve)
4.   Build (collaborate)
5.   Enable (empower)
See Table 1

1.4 MECHANISMS OF ENGAGEMENT

Looking at the previous information gathered you can now determine the best way to engage and achieve the desired outcome.

Refer to examples provided in Figure 3

Consider:
1.   What major tasks need to be undertaken, completed and when and by who?
2.   What decisions are required and by who? How can consumers, families, carers and stakeholders be genuinely involved in the above?
3.   What are the outcomes we are looking for?
4.   What does success look like? For whom?