



Partnering with Consumers Framework

2022 - 2025



LISTENING AND ACTING ON THE WISDOM OF CONSUMERS

Our Vision

Thriving communities in North East Victoria, achieving the best quality of life for everyone.

Our Purpose

To be leaders in health, who transform and deliver high quality, safe healthcare for all.



Northeast Health Wangaratta acknowledges the Traditional Owners of the land on which we work and live, and pays respect to the Elders – past and present – for they hold the memories, traditions, culture and hopes of Aboriginal and Torres Strait Islander peoples across our region.

We are proud and committed to embrace the spirit of reconciliation and learn more from the local Aboriginal and Torres Strait Islander community about how best to improve the health, social and economic outcomes of First Nations' people.

We are committed to LGBTQIA+ equity and inclusive practice for LGBTQIA+ patients, carers, visitors and our team.

Northeast Health Wangaratta respects and celebrates all forms of diversity. We welcome and value people from all walks of life to access our services and join our team.

Contents

- 1. Introduction 1
- 2. NHW Partnering with Consumers policy statement 2
- 3. NHW Partnering with Consumers policy - important definitions 3
- 4. Domains and levels of participation 4
- 5. Types of partnering 5
- 6. Enabling partnership - roles, systems, processes and tools 8
 - 6.1 Role of the consumer 8
 - 6.2. Role of NHW 10
- 7. Appendices12
 - 7.1 Appendix A:
NHW Partnering with Consumers Policy12
 - 7.2. Appendix B:
Alfred Health Partnering with Consumers Guidelines – Consumer
Categories and Activities 16
- Acknowledgements.....17

1. Introduction

Northeast Health Wangaratta (NHW) is the specialist referral hospital for the Central Hume region of Victoria and is the largest employer in the Rural City of Wangaratta. As an organisation providing health care for the community of Wangaratta and its surrounds, it is important that consumers have a voice that is heard in regards to their own healthcare and also the provision of healthcare more broadly. It is essential that we develop meaningful partnerships with consumers across all ages, diverse backgrounds, cultures, abilities and personal beliefs, and consider their input in decision making, both at a personal and broader level.

Consumer involvement is particularly important in the areas of improving patient safety, assisting us to define service requirements and improve patient experience. The NHW Partnering with Consumers Framework is based on Safer Care Victoria's *Partnering in Healthcare – a framework for better care and outcomes*. It also incorporates the requirements of the Australian Commission in Safety & Quality Commission's *National Standards (Version 2), Standard 2, Partnering with Consumers*.

Given this, NHW has adopted the following Partnering with Consumers Framework – it specifies what we stand for in relation to partnering with consumers.

2. NHW Partnering with Consumers policy statement

Consumers will be included as essential members of the healthcare team. Northeast Health Wangaratta will meaningfully partner with them in:

1. Individual care and treatment.
2. Service planning, design, delivery and evaluation.
3. Organisational governance, policy, planning, resource allocation, reporting.

To support this, NHW will adopt the five consumer engagement domains outlined in *Partnering in health care - a framework for better care and outcomes*. These are:



Personalised and holistic – individualised and connected care that is compassionately and respectfully delivered.



Working together – care and services are co-designed with consumers and staff.



Shared decision making – consumers are provided with the information, support, processes and space to participate.



Equity and inclusion – all people have their health care needs equally well met, language inclusive, culturally safe, reflective of cultural or ethnic heritage or community, such as social class, gender, occupational status, income, sexual orientation, ability, disability, religion and education.



Effective communication – respectful communication and health literacy that consumers can 'readily understand and act on'.

Northeast Health Wangaratta will ensure that appropriate governance structures, policies, protocols, resources, training and evaluation are in place to facilitate consumer and community participation.

3. NHW Partnering with Consumers policy - important definitions

The following three key definitions act as the conceptual backbone for effect partnering with consumers:

Consumer: Refers to past, present and potential users of NHW health services and may include patients, clients, residents, carers, relatives, kin, guardians, advocates and community members.

Partnering with consumers: Is the process of improving health outcomes through meaningfully partnering with consumers, to improve the wellbeing of themselves and their community. This includes participating in the decision making that affects:

1. Individual care and treatment.
2. Service design, delivery and evaluation.
3. Organisational governance policy, planning, resource allocation and reporting.

Safer Care Victoria and other health providers often refer to these as ‘the three levels of participation’.

Meaningful Partnering: Is the type of partnership with consumers and can include the process of engagement such as, informing, consulting, and structures of membership, partnership, collaboration and control. It is supported and enabled through a range of formal and informal roles, process and systems.

These three concepts are supported by several associated concepts, processes, roles, relationships and structures that are common in the work of NHW and in the wider health sector. In summary these are as follows (full definitions can be found in Appendix 1):




<p>Concepts and Processes</p> <ul style="list-style-type: none"> Patient experience Patient or person centred care Health Literacy Shared Decision Making 	<p>Roles & relationships</p> <ul style="list-style-type: none"> Family Carer Health Consumer Representative Key Contact Consumer Advisors Register Volunteer Community member
<p>Structures</p> <ul style="list-style-type: none"> Consumer Advisory Committee Partnering with Consumers Program 	

Northeast Health Wangaratta has adopted Safer Care Victoria's five domains for Partnering in Healthcare. These are:

- Personalised and holistic
- Working together
- Shared decision making
- Equity and inclusion
- Effective communication

4. Domains and levels of participation

The following infographic from Safer Care Victoria *Partnering in Healthcare Framework* has brought together the 5 domains for partnering with the three settings or levels for participation giving us a succinct overview of what NHW is seeking to achieve.

<p>Personalised and holistic</p> <p>Individualised and connected care</p> <p>Compassion and respect</p> <p><i>'I am respected and receive personalised care that treats and supports me as a whole person.'</i></p>	<p>Direct care level</p> <p></p> <p>Consumers participate in their own healthcare, treatment, as do their family and carers.</p> <p>Health service enables and support consumers to be equal partners in their care, including through shared decision-making.</p> <p><i>'I receive personalised care where my healthcare holistically responds to my unique characteristics, cultures, beliefs and experiences – and those of my family and carers.'</i></p>	<p>Service level</p> <p></p> <p>Consumers participate in service design, delivery and quality improvement.</p> <p>Health services partner with consumers in decisions about the design and delivery of services, including through community advisory committees, working groups, quality and safety committees, and service design working groups.</p> <p>Consumers provide feedback, ideas and personal experiences to drive change.</p> <p><i>'We use appropriate information strategies, so consumers can participate in a meaningful way, and we monitor access barriers to our services and structures.'</i></p>	<p>System level</p> <p></p> <p>Consumers, carers, and communities participate in system-wide quality and safety improvement in healthcare organisations and the Department.</p> <p>Healthcare organisations partner with consumers in governance, planning and policy development, including through hospital boards and clinical governance.</p> <p>Government organisations partner with consumers in governance, planning and policy development.</p> <p><i>'Our organisation has supporting frameworks, policies tools and resources to partner with consumers and uses consumer feedback and healthcare experience data to improve healthcare quality and safety.'</i></p>
<p>Working together</p> <p>Care is co-designed with patients, families and clinicians</p> <p>Coordination and continuity of care</p> <p><i>'I am included as a respected partner in learning about and improving healthcare.'</i></p>			
<p>Shared decision-making</p> <p>Use of decision aids, decision support coaching</p> <p>Increase use of patient reported outcome measures (PROMS), patient reported experience measures (PREMS)</p> <p><i>'I am empowered with making informed decisions about my healthcare.'</i></p>			
<p>Equity and inclusion</p> <p>Patient reported language services provision</p> <p>Cultural safety, diversity of consumer participation</p> <p><i>'I receive care of equal quality that is safe, effective and responsive to my needs.'</i></p>			
<p>Effective communication</p> <p>Respectful communication, health literacy, Ask Me 3, Teach Back</p> <p><i>'I receive high quality information that I can readily understand and act on.'</i></p>			
<p>Accountability drivers</p> <p>Health service strategic plan Health service quality improvement plan, policies and monitoring frameworks Victorian health services performance monitoring framework Statement of priorities Delivering high-quality healthcare: Victorian clinical governance framework Department policies Victorian Healthcare Experience Survey National Safety and Quality Health Service Standards (second edition) </p>			

5. Types of partnering

Meaningful consumer partnerships at NHW will require different methods of engagement. This can be thought about as a continuum from a single act of passing on important information to the handing over of full control to consumer(s) for the partial or full delivery of a system improvement, service or project.

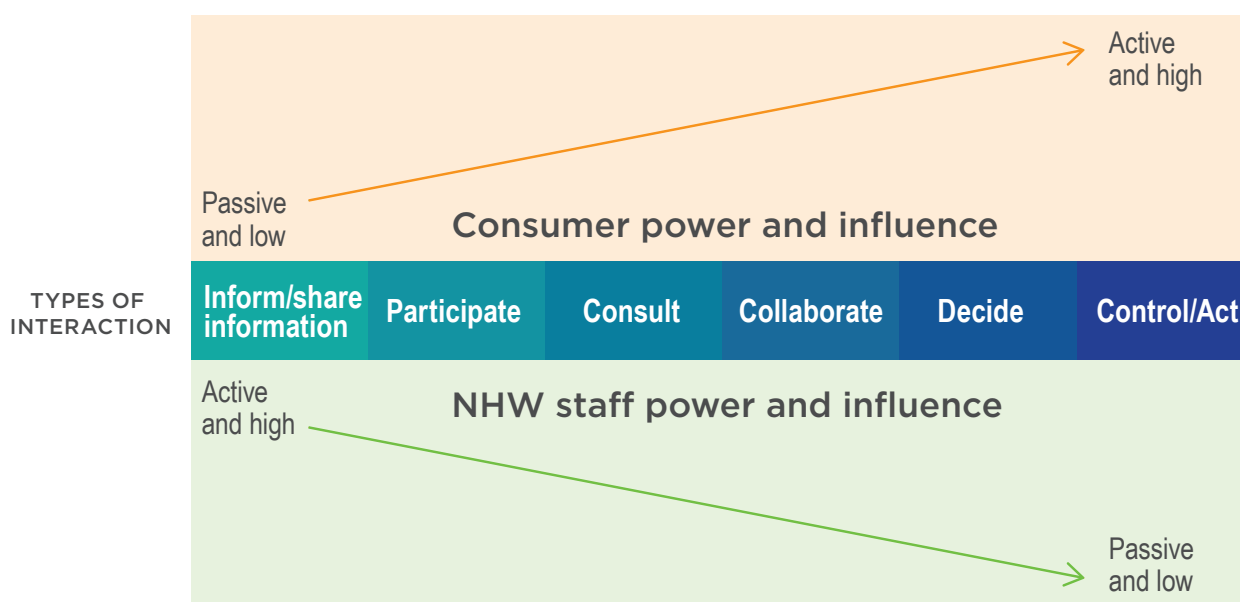
Central to effective partnering is the recognition of:

1. The power differential that exists in any interaction between the consumer(s) and NHW staff member.
2. The importance of how power is held, expressed and shared by both NHW staff and the consumer(s).
3. The type of interaction required to achieve the best outcome in any of the three settings or levels for partnering.

The following graphic outlines the types of partnerships which can be described as along a continuum that is consistent with the level of power and influence in any given interaction, forum, project etc, held by either the consumer(s) or a NHW staff member. It is important to note that all types of interactions and levels of power and influence are important and valuable and the key is to:

1. Work out which 'type of partnership' best fits the task at hand.
2. Ensure the nature of how power is held, expressed and shared is consistent with the 'type of partnership'

The Partnering Continuum



NHW staff power and influence operates on a spectrum of power, from high to low, increasing in responsibility and influence as the consumer relinquishes control and authority and decreasing levels of responsibility as the consumer(s) take up control and authority.

Consumer power and influence operates on a spectrum of power, from low to high, increasing in responsibility and influence as the consumer takes up control and authority and decreasing levels of responsibility as the consumer relinquishes control and authority.

At one end of the continuum, there is primarily staff determined decision making where the consumer receives passive amounts of information when a decision has been made. At the other end of the scale, there is self-determined decision making by the consumer(s) and they are in full control of the decision making and associated impacts. The relational dynamics of the partnership is determined by the sharing of power as per this scale and most importantly the type of partnering required for any given task or body of work. The quality of the relationship is determined by how sensitively these dynamics are acknowledged and worked with. The table below gives more detail on each ‘type of partnership’:

Consumer Role	Description	Consumer power & influence	NHW staff power & influence
Inform/ Share	Consumers are provided with information to help understand an issue or decision.	Low - Knowledge increases power to make informed decisions; access to complaints/feedback processes.	High – Full control of process and information flow; subject to complaints/ feedback processes.
Participate	Consumers take part in an activity, service or program provided by NHW.	Low – Choice whether to participate or not, scope of input limited by terms of provider; some negotiation with staff possible; access to complaints/feedback processes	High - Staff set terms and scope of engagement. Subject to complaints/ feedback processes.
Consult	Staff discuss a decision or issue with consumers to test thinking and obtain feedback on a decision. Reciprocal dialogue is expected.	Medium - Provide input and feedback. Scope for advocacy and input new consumer priorities and preferences. Some influence over final decision.	High - Control over the process and the degree to which consumer feedback is integrated.

Consumer Role	Description	Consumer power & influence	NHW staff power & influence
Collaborate	Staff or consumer(s) initiate a partnership to explore options or recommendations. Both parties provide equal input and work together to develop agreed solutions/decisions.	Medium/Shared - Joint decision making, shared power. Identify solutions and influence decisions. Commitment to listen and incorporate staff views, ideas and/or advice into solution finding.	Medium/Shared - Share power and authority for joint decision making. Commitment to listen and incorporate consumer views, ideas and advice into solution finding.
Decide	Consumers lead the decision making process, including initiating issues for action. Staff role is to listen, facilitate, advise then enact decision.	High - Authorised to prioritise, make decisions, control resources. Expect staff to adopt and enact decision.	Low - Relinquish decision making power and authority to consumers. Commit to enacting final decision.
Control/Act	Entirely consumer led initiative, conceived, planned and executed by the consumer(s). Consumer led decision making, leading or working in partnership with staff to implement decisions. Co-production, where consumers are involved in every aspect of a project from initiation to delivery.	High/Total – Full responsibility, choice and control. Authorised, supported and empowered to lead and act. Control of decisions and resources, implement in partnership with staff.	Low/None - Relinquishing of power and responsibility. Support consumer(s) in leadership roles. Working in partnership with consumer(s) initiating projects and executing decisions.

6. Enabling partnership - roles, systems, processes and tools

There are a range of **formal or informal** roles, systems, process and tools required to support and enable each type of partnership at NHW.

This Partnering with Consumers Framework describes the roles of the consumer and NHW as follows:

6.1 Role of the consumer

There are different levels at which people can become partners in helping achieve their own health goals and also support NHW to achieve its vision and mission. Consumers can be involved:

As a **LEADER** in their own healthcare through:

- Maintaining optimal health, wherever possible.
- Actively participating in their own healthcare whilst a patient by:
 - Establishing their own goals of care with healthcare providers.
 - Being an active participant in bedside handover.
 - Questioning clinical staff about their condition and treatment so they have clear understanding.
- Taking responsibility of their own healthcare after discharge from hospital by:
 - Knowing how to care for their condition.
 - Knowing when and how to seek help.
 - Optimising their general health.

Area of participation	Areas applicable	Tools and tactics to enable participation
Increasing the understanding of individual health care needs	Inpatient services	<ul style="list-style-type: none"> • Patient Care Boards • Bedside clinical handover • Hourly patient rounding (rounding is defined as when nursing staff communicate with all patients in a clinical area every hour of a shift) • Managers rounding on patients • Patient/family escalation of concern process • Provide consumer information in appropriate languages and formats • Use of interpreter services when consumers require them

Area of participation	Areas applicable	Tools and tactics to enable participation
Education and support to maximise health and prevent hospital admission	Community	<ul style="list-style-type: none"> • Antenatal health promotion • Smiles 4 Miles program • Healthy School Canteens project
Improving the information provided to our consumers to increase their understanding of health more broadly	Organisation wide	<ul style="list-style-type: none"> • Greater focus on health literacy • Involve consumers in review of publications • Develop digital information

As a **PARTNER** in improving our health service through:

- Providing consumer experience via feedback and surveys.
- Participating in community forums/focus groups.
- Attendance and input on specific committees.
- Partaking in working groups.

Area of participation	Enablers of participation
Committee representation	<ul style="list-style-type: none"> • Community Advisory Committee, Resident and Carer forums (Illoura), Consumer Experience Committee and Diversity and Inclusion committees • Community perspective on services, publications and planning • Conduit between community and NHW • Information sharing
Community Forums	<ul style="list-style-type: none"> • General and targeted externally facilitated forums that provide information and suggestions for service improvement • Bi-monthly meeting with key stakeholders from the local Aboriginal & Torres Strait Islander community, including representatives from Dirrawarra Indigenous Network and local Aboriginal Controlled organisations. • Targeted focus groups
Feedback systems	<ul style="list-style-type: none"> • Identify process and service improvement opportunities • Where appropriate, actively involve consumers in story sharing and improvement suggestions via the complaint system • Satisfaction surveys • Patient stories developed for workforce learning tools
Volunteer program	<ul style="list-style-type: none"> • Structured participation across organisaition

6.2. Role of NHW

Northeast Health Wangaratta also plays a role to ensure there are meaningful partnerships established. These roles include:

Assisting with Health Literacy – making sure information we provide to consumers is easy to read and presented in a format that allows the consumer to understand. This will assist in a consumer’s understanding of their condition(s) and managing such at home, as well as providing the opportunity for meaningful input at an organisational management level.

Education – ensuring consumers understand their health condition(s), how to best manage their condition(s), as well as an understanding they are safe in the hospital environment.

Providing different forums for involvement – understanding that consumers may wish to participate in different ways and offer a range of options and opportunities to feedback into the health service. Examples of this may be membership on different forums and committees and completion of in house realtime surveys and external surveys such as the Victoria Health Experience Survey (VHES).

Responsibilities of NHW in supporting partnering with consumers

Board of Directors

- Active involvement in development and monitoring of the annual Consumer Advisory Committee Action Plan
- Participation in selecting engagement activities
- Attendance of the Community Advisory Committee (three Board members with one member acting as Chair)

Executive

- Appropriately resource the Partnering with Consumers program to ensure meaningful participation
 - Provide leadership to develop organisational systems and processes for consumer partnerships
 - Ensure the strategies for ongoing organisation-wide consumer partnerships are developed, implemented and evaluated
 - Ensure processes are in place for adequate training of consumers on committees
 - Undertake the Safer Care Victoria self-assessment against the domains and priorities at minimum every 2 years
-

Responsibilities of NHW in supporting partnering with consumers

Managers

- Assist in educating consumers in order to develop knowledge about their condition(s) and care, as part of the daily patient rounding process
- Ensure all consumer feedback is analysed and actioned where appropriate
- Oversee consumer experience survey results and monitor improvements undertaken in response to identified deficit areas. This includes VHES (inpatient and emergency services) and Resident Satisfaction Surveys (Illoura)
- Develop training and support mechanisms for consumers to facilitate their constructive engagement, participation and feedback
- Develop and present education materials and programs to the workforce related to partnering with consumers

General staff

- Actively involve consumers in the health care process
 - Clearly explain procedures and discuss goals of care with consumers daily
 - Encourage and respond constructively to consumer feedback
 - Undertake training in consumer partnerships where appropriate
 - Provide education to consumers about how to best manage their care at home
 - Actively support/initiate quality activities related to partnering with consumers
-

Governance

Every year a **Consumer Advistoy Committee Action Plan** will be developed. This plan will be discussed and endorsed by the NHW Board of Directors.

The Action Plan will include actions required to increase meaningful consumer partnerships, targets to be achieved, responsibilities and timeframes.

The Action Plan will be reviewed quarterly by the Consumer Advisory Committee and this review presented to the Board of Directors.

7.1 Appendix A: NHW Partnering with Consumers Policy



Title	PARTNERING WITH CONSUMERS		
Document type	Policy	Document owner / Responsibility for review	Director of Performance Improvement
Department	Chief Executive Officer	Authorised by	Board
Section	Administration		

Areas applicable	All Directors, People Leaders, workforce team
Areas NOT applicable	Nil
Individuals & groups consulted	Consumer Advisory Committee
Accreditation Standard <i>(Office use only)</i>	NSQHS Standard 2 Partnering with Consumers
Related documents	<i>Partnering With Consumers Framework, Consumer Advisory Committee TOR Consumer Advisory Committee Action Plan</i>

Purpose

Partnering with consumers in the design, delivery and evaluation of health care services is a recognised factor in improved safety, quality and experience of care. This is supported by the Australian Commission on Safety and Quality in Healthcare that outlines consumer participation as integral to the development, implementation and evaluation of health policies, programs and services¹. To that end NHW is committed to integrating a partnering with consumers approach throughout our services and governance structures, to ensure that consumers are part of the healthcare team from bedside to Boardroom. This policy outlines that approach.

Definition

Core definitions

Consumer: Refers to past, present and potential users of NHW health services and may include patients, clients, residents, carers, relatives, kin, guardians, advocates and community members.

Partnering with Consumers: Is the process of improving health outcomes through meaningfully partnering with consumers.

Associated definitions

The work of partnering with consumers is supported by a number of associated concepts, processes, roles, and structures. These are as follows:

¹ <https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard>

No: NHW0188006 V 1.0	Approval Date: 02/06/2022	Review and Update by: 02/06/2025
Page 1 of 4		
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Concepts and Processes

Consumer experience is the consumer’s description and definition of the care and services they would value, prefer and actually receive

Consumer or person-centred care is an approach that puts the person at the centre of both their own care and the planning, design, delivery and evaluation of health services. It is interchangeable with personalised and holistic care where mutually beneficial partnerships among health care providers, consumers and families lead to better outcomes. It involves treating consumers and/or carers with dignity and respect, communicating and sharing information between consumers and/or carers and healthcare providers, encouraging and supporting participation in decision making, and fostering collaboration with consumers.

Health Literacy is how people understand information about health and health care, and how they apply that information to their lives, use it to make decisions and act on it.² Health literacy has two components; individual health literacy and the health literacy environment:

- Individual health literacy is the skills, knowledge, motivation and capacity of a consumer to access, understand, appraise and apply information to make effective decisions about health and health care, and take appropriate actions
- The health literacy environment is the infrastructure, policies, materials, people and relationships that make up the healthcare system, which affect the ways in which consumers access, understand, appraise and apply health related information and services³.

Shared Decision Making includes the process by which health decisions are made by consumers and health professionals, using the best available evidence and discussion of what consumers would value and prefer.

Roles & relationships

Family includes both immediate and extended family and kinship

Carer is a person who is actively involved in providing unpaid care the consumer of health services, such as a family member or guardian.

Health Consumer Representative is a person who has taken up a formal role to advocate on behalf of health consumers and/or to bring a consumer perspective from personal experience in partnership activities within a health organisation.

Key Contact is the person responsible for providing support to the Consumer Representative.

Consumer Advisors Register is a group of past or current consumers of health services (patient or carer, family member or other significant relationship) preferably of NHW but not exclusively, who use their experiences in conjunction with staff to contribute to service

² NSQHS Standard 2, 2021

³ NSQHS Standard 2, 2021

No: NHW0188006 V 1.0	Approval Date: 02/06/2022	Review and Update by: 02/06/2025
Page 2 of 4		
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Title **CONSUMER PARTICIPATION POLICY**

design, planning, implementation and evaluation. Consumer advisors at NHW reflect the diverse individuals and communities that use our services.

Volunteer is an individual that gives their time willingly for the common good and without financial gain.

Community member is a member of the community within which NHW delivers services.

Structures

Consumer Advisory Committee: Board sub-committee which supports the integration of consumer, carer and community views into all levels of health service governance, strategy operations, planning and policy development and advocates to the Board on behalf of consumers, carers and the community representatives ⁴ Members of the Committee can include consumers, carers, community representatives, staff and board members.

Partnering with Consumers Program: Responsible for the recruitment, orientation, education and support of Consumer Representatives and provision of support to staff in partnering with consumers.

Policy statement

Consumers will be included as essential members of the healthcare team. NHW will be a meaningful partner with them in

1. Individual care and treatment
2. Service planning, design, delivery and evaluation
3. Organisational governance, policy, planning, resource allocation, training and reporting

To support this NHW will adopt the five consumer engagement domains outlined in 'Partnering in health care - a framework for better care and outcomes'⁵. These are

4. Personalised and holistic – individualised and connected care that is compassionately and respectfully delivered.
5. Working together – care and services are co-designed with consumers and staff.
6. Shared decision-making – consumers are provided with the information, support, processes and space to participate.
7. Equity and inclusion – all people have their health care needs equally well met, Language inclusive, culturally safe, reflective of cultural or ethnic heritage or

⁴ Safer Care Victoria, Building your healthy Community. A guide for health service community advisory committees 2020).

⁵ Safer Care Victoria, Partnering in Healthcare, A Framework for Better Care and Outcomes

No: NHW0188006 V 1.0	Approval Date: 02/06/2022	Review and Update by: 02/06/2025
Page 3 of 4		
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Title **CONSUMER PARTICIPATION POLICY**

community, such as social class, gender, occupational status, income, sexual orientation, ability, disability, religion and education.

- 8. Effective communication – respectful communication and health literacy that consumers can ‘readily understand and act on.

NHW will ensure that appropriate governance structures, policies, protocols, resources, training and evaluation are in place to facilitate consumer and community participation.

References

- 1. <https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard>
- 2. NSQHS Standard 2, 2021
- Error! Bookmark not defined..** NSQHS Standard 2, 2021
- 4. Safer Care Victoria, Building your healthy Community. A guide for health service community advisory committees 2020).
- 5. Safer Care Victoria, Partnering in Healthcare, A Framework for Better Care and Outcomes

Acknowledgements

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Australian Home Care Standards, August 2013, Australian Aged Care Quality Agency.
Australian Aged Care Quality Accreditation Standards, August 2013, Australian Aged Care Quality Agency.
National Standards for Disability Services, December 2013, Department of Social Services.
Australian National Standards for Mental Health Services, 2010, Department of Health.
Australian Charter of Healthcare Rights, July 2008, Australian Commission on Safety and Quality in Health Care.

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Page 4 of 4		
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7.2. Appendix B: Alfred Health Partnering with Consumers Guidelines – Consumer Categories and Activities

GUIDELINE



Title PARTNERING WITH CONSUMERS IN HEALTHCARE

CONSUMER CATEGORIES AND ACTIVITIES

Table 1 below outlines the formal and informal categories and descriptors:

Table 1

Category	Activity Description
FORMAL	<ul style="list-style-type: none"> An activity that requires a consumer to have a formal partnership agreement or role statement. Usually requires a consumer to have a lived experience of the health service or of a disease group. Requires a consumer to participate in formal committees, advisory groups, working groups or reference groups and attend meetings regularly either at the health service site or via teleconferencing/conference calling. Includes reviews of serious and confidential incidents and matters. Length and duration of engagement can vary from one off to a longer term. Research or any activity that requires ethics approval. Specific quality improvement projects or Redesign activities that are for a prescribed duration. Any high risk or highly confidential activity.
INFORMAL	<ul style="list-style-type: none"> A broad range of activities where there is usually low risk Activities that are usually one-off or ad hoc Examples of this include focus groups, testing of hospital menus or other patient products, other one off activities a consumer panel reviewing patient information to ensure readability <p><i>N.B (For assistance with categorising activities contact the Patient Experience Team)</i></p>

Table 2: Some examples of formal/informal activities (these are only a guide)

Proposed activity	Type of participation	Consumer participation activity
1. Measure patient experience	Recruit a consumer to undertake surveys/interviews with patients having a similar experience.	INFORMAL
2. Implement new Patient Communication Boards on all wards across the health service	Participate in a focus group to inform the development of new Patient Communication Boards.	INFORMAL
3. Provision of training and education to health service staff regarding a specific service or lived experience	Consumers develop and deliver education to staff and other consumers with a strong focus on the lived experience.	FORMAL
4. Redevelopment of a service or care model for a specific patient group	Recruit a consumer to a specific group focussing on this service and care with a strong focus on the lived experience.	FORMAL
5. Development of the design and layout of a new ward	Recruit a consumer to the project development, planning and steering groups.	FORMAL
6. Advisory Committees	Consumers support Alfred Health in the continuous development and improvement of a related service relative to their medical condition, e.g. CF Advisory group or the health service more broadly, Consumer Advisory Committee (CAC)	FORMAL

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Page 2 of 9

The hard copy of this document may be out of date. To ensure you are reading the current version, check the policy and guideline site on the Alfred Health Intranet.

Acknowledgements

Northeast Health Wangaratta acknowledges the following organisations:

Alfred Health

Australian Commission on Safety and Quality in Healthcare

International Association for Public Participation Australia

Safer Care Victoria

Uniting Vic/Tas



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