

Country Health SA Local Health Network

# A Partnership Framework for Health Advisory Councils and Country Health SA

A guide to collaboration and engagement to help meet  
the health care needs of country South Australians

2017 - 2022



Government  
of South Australia

SA Health



## Acknowledgments

The Partnership Framework Working Party would like to thank the many volunteers who support local HACs across country South Australia and those who gave their time, expertise and views to work with us to develop the Health Advisory Councils and Country Health SA Partnership Framework (the Framework).

We would especially like to acknowledge the high level of input and valuable advice from members of HACs who attended the Annual Health Advisory Council Conference in June 2016 and who committed their time and expertise to work collectively on recommendations.

We also express appreciation for the high level of support and advice from the Presiding Members Panel during the development of this document.

We acknowledge the Aboriginal people of the many traditional lands and language groups of South Australia. We acknowledge the wisdom of Aboriginal Elders both past and present, pay respect to Aboriginal communities of today and are committed to improving the health aspirations of our Aboriginal youth.

## Members of the Partnership Framework Working Party

### Health Advisory Council members

Karyn Reid, Working Party Chair; Presiding Member, Port Augusta, Roxby Downs and Woomera HAC

Barrie Moyle, Chair, Presiding Member Panel; Presiding Member, Naracoorte HAC

Jeff Fuller, Hills Area HAC member

Dean Johnson, Presiding Member, Eastern Eyre HAC

Helen Tucker, Yorke Peninsula HAC member

Darren Keenan, Presiding Member, Kangaroo Island HAC

### Country Health SA

Jeanette Brown, Manager Executive Services

Natalie Gibson/Janet Pretsell, Senior Communications Advisor

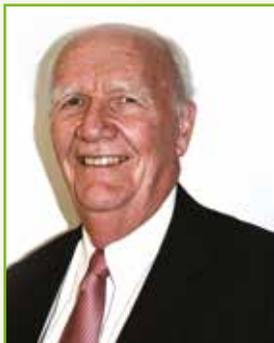
Bronwyn Venning, Strategic Partnerships Coordinator, Barossa Hills Fleurieu Region

Ros McRae, Regional Director, Flinders and Upper North Region

Kerri Reilly, Executive Director and Nick Wilson, Principal Project Officer, Aboriginal Health

Bill Slattery, Service Development Manager, Yorke and Northern Community Health

## Forewords



**Peter Blacker**

Presiding Member,  
Country Health SA  
Governing Council

I commend this document and congratulate all involved in its development. It comprehensively outlines the history, roles and mutual responsibilities for effectively engaging, listening and advocating for the very core of our health system – the people who rely on it.

This document represents the culmination of many months of work between representatives of the Health Advisory Councils and Country Health SA. Its inception, construction and production truly represent all that we can – and must – achieve by working together for the betterment of all who access health services in country South Australia.



**Maree Geraghty**

CEO,  
Country Health SA

At its heart, this document represents true partnership. It goes beyond traditionally held perceptions of distinctly separate entities and sets out how, by working together, we can provide the people of South Australia with the very best rural health service.

This is an aspirational document but it is a practical one too. Transparency and accountability drive our performance and we are committed to ensuring that those who rely on our health services are the focus of all that we do.

Our commitment to community engagement is absolute and declared in key Country Health SA publications, including the Strategic Plan and the Community and Consumer Engagement Strategy. It is a standard against which Country Health SA measures itself and which it is accredited against.

By working collaboratively with our Health Advisory Councils and ensuring they are supported appropriately, engaged constantly and listened to intently, we will continue to grow better health services.



**Barrie Moyle**

Chair,  
Presiding Members Panel

I am exceptionally proud of this document and of those who worked so hard to produce it. It provides our Health Advisory Councils with a robust framework for genuine engagement with our communities and provides a practical mechanism through which we can authentically and effectively advocate on their behalves.

It also provides a pathway by which we as Health Advisory Councils can work together with each other and with Country Health SA to realise our shared goals and seek meaningful resolution to the challenges inherent in our diverse and constantly evolving health system.



# Table of contents

- Executive summary..... 4
- Section 1: Background ..... 5
  - 1.1 Health Advisory Councils in South Australia and the *Health Care Act 2008*
  - 1.2 Country Health SA Local Health Network
  - 1.3 Health Performance Council
  - 1.4 The Partnership Framework in context
- Section 2: The intent and aims of the Partnership Framework..... 9
  - 2.1 Purpose
  - 2.2 Aims
  - 2.3 Principles and values
- Section 3: Evaluation..... 13
- Section 4: Partnership Framework Plan 2017-2022..... 14
  - 4.1 Strategy One: Engagement between Country Health SA and the HACs
  - 4.2 Strategy Two: Engaging with our communities
- Section 5: Appendices ..... 23
  - Appendix 1: Acronym definitions
  - Appendix 2: Policy context
  - Appendix 3: References
  - Appendix 4. National Safety and Quality Health Service Standard 2 – Partnering with Consumers

# Executive summary

The Health Advisory Councils and Country Health SA Partnership Framework has been developed to validate the position of Health Advisory Councils (HACs) as a key consumer engagement and advocacy structure across country South Australia and to raise the profile of HACs across country health sites and communities.

The Framework acknowledges the special role that HACs play in their local communities and the value this systematic local engagement can bring to country health services. It also acknowledges the legislative responsibility applied to HACs that ensures they are best placed to provide a broad whole-of-community perspective to community participation and engagement.

The commitment to a partnership approach and the facilitation of agreed actions over the next five years will support and encourage more effective engagement opportunities between Country Health SA Local Health Network (Country Health SA) and HACs, and between HACs and their respective communities. It will enhance opportunities for improved health services and enable country communities to be engaged in meaningful interaction in relation to these services.

The Framework encompasses the principles and values of the IAP2 Spectrum of Public Participation, as well as the six key principles outlined in the South Australian Government's Better Together program.

The Framework is founded on two levels of engagement:

- > interaction between Country Health SA and HACs
- > interaction between HACs and the communities they represent and advocate for.

To facilitate the aims of the Framework, this document outlines actions at each level.

Country Health SA and HACs are committed to working together in a coordinated and respectful manner to implement the agreed actions, thereby fulfilling the purpose and delivering on the outcomes established by the Framework.



## Section 1: Background

### 1.1 Health Advisory Councils in South Australia and the *Health Care Act 2008*<sup>1</sup>

Following the dissolution of independent Boards of Directors for hospitals, the Government of South Australia introduced the *Health Care Act 2008* (the Act). Among other matters, the Act provides for the administration of hospitals and other health services, and the establishment of a Health Performance Council and Health Advisory Councils.

The Act specifically sets out the establishment of HACs, and their functions including:

- > advise on the health service needs, priorities and issues within the Local Area, with particular emphasis on those issues in the context of consumers of health services, carers and volunteers
- > advise on health service needs and issues outside of the Local Area, with particular emphasis upon those issues in the context of consumers of health services, carers and volunteers
- > ascertain the health needs of the community and the attitude of the community to the development of health services within the community
- > advocate on behalf of the community with Country Health SA to support the planning and provision of health services as part of an integrated statewide health system for the benefit of the community
- > hold assets for the benefit, purposes and use of the Health Unit or Health Units on terms and conditions determined or approved by the Minister
- > undertake such other activities as the Advisory Council may determine for the benefit or support of health services in the local area.

There are currently 39 local HACs across country South Australia and they are all guided by constitutions or rules approved by the Minister for Health. Some HACs are incorporated and some are unincorporated, however, they have the same responsibilities in relation to community engagement and advocacy.

A key HAC responsibility is that of engagement with and advocacy for local communities. The following responsibilities noted in the Act clearly describe the role of a key community engagement and advocacy structure:

- > to act as an advocate to promote the interests of the community, or a section of the community
- > to provide advice about any relevant aspect of the provision of health services from the perspective of consumers of those services, any carers or volunteers or the community more generally
- > to provide advice about relevant health issues, goals, priorities, plans and other strategic initiatives
- > to provide advice or assistance in undertaking the development or implementation of systems or mechanisms designed to support the delivery of health services or programs
- > to provide information to and consult more broadly with the consumers of any relevant services, any relevant carers or volunteers, and the community more generally
- > to encourage community participation in programs associated with supporting the provision of health services and to promote the importance of carers and volunteers in assisting to achieve successful outcomes
- > to consult with other bodies that are interested in the provision of health services within the community
- > to provide advice to the Minister about any matter referred to it by the Minister or the Chief Executive.

Country Health SA's vision is to be the best rural health service and it is committed to growing better services in country and to keeping people well at home. Country Health SA is committed to partnering with individuals, communities and staff to deliver high quality, high value health care that enhances the lived experience of rural and remote South Australians and their carers and families.

Country Health SA Local Health Network Strategic Plan 2015-2020

The Country Health SA Local Network Health Advisory Council Incorporated (the Governing Council) is the overarching HAC under which the Presiding Members Panel (PMP) is positioned. The purpose of the PMP is to strengthen liaison and communication between local HACs and the Country Health SA Governing Council, and to support effective engagement at the community level between local HACs and their respective communities. The PMP consists of nominated members from the other 39 HACs across country South Australia.

Figure 1. Health Advisory Councils: Links to health governance



## 1.2 Country Health SA<sup>2</sup>

Country Health SA is part of SA Health and oversees the rural public health system in South Australia. It provides acute health services to more than 100,000 people and to a further 175,000 emergency presentations each year across the network. The network incorporates 64 hospitals and approximately 220 health services sites, and employs more than 8000 people. Country Health SA is accredited with the Australian Council on Healthcare Standards.

HACs are consultative bodies that advise the Minister for Health to provide a more coordinated, strategic and integrated health care system to meet the health care needs of South Australians. Country Health SA works with the Country Health SA Governing Council and the 39 other HACs to provide industry leadership across the rural public health system in South Australia.

## 1.3 Health Performance Council and relationship to Health Advisory Councils<sup>2</sup>

The Health Performance Council (HPC) is an independent health advisory body that provides independent advice to the Minister for Health about the operation of the health system and health outcomes for South Australia and specific population groups.

Every four years, the HPC is required to provide a report to the Minister that assesses the health of South Australians and changes in health outcomes over the reporting period. The report must identify significant health trends and review the performance of the health system against the objects of the Act, as well as identifying other significant issues.

Section 11(2) of the Act sets out that the HPC should seek to obtain the views of HACs about the extent as is reasonable and relevant in the circumstances, in the performance of its functions outlined in the Act. As a result, it is expected that the HPC will consult the HACs as part of any review process concerning the performance of the health system and health outcomes for South Australians and specific population groups.

## 1.4 Contextual background to the Partnership Framework

Local Health Advisory Councils ensure that the links with local communities across country South Australia previously forged by Hospital Boards remain in place. There is growing evidence that community participation and effective community engagement results in improved health care, and more appropriate health services. Since the change of role in 2008, from governance, to one of community participation and advocacy in planning and evaluating service provision within local communities, HACs have continued to foster relationships and engagement between management of local health services and their respective communities.

In 2011 the Health Performance Council undertook a review of the arrangement concerning HACs across country South Australia and concluded that, despite the legislation and consequent processes developed to support HACs, the structure was not meeting HAC membership expectations and that members generally were disappointed with the governance arrangements. Following this review, Country Health SA made a number of changes designed to strengthen the HAC structure. However, feedback from participants at the 2016 HAC Conference indicated that members were still concerned about the opportunity for purposeful engagement, the perceived value of HACs and their ability to participate effectively within the system.

Recognising the value of sustainable Health Advisory Councils in strengthening health services, and in response to the wide ranging constructive feedback provided by these participants, Country Health SA and the Governing Council asked the Presiding Members Panel to establish a working party to respond. This working party comprised key Country Health SA staff and interested HAC members, and was tasked to construct an improved engagement strategy specifically between Country Health SA and HACs. Two key themes emerged:

1. The need for improved communication pathways and more effective engagement opportunities between Country Health SA and HACs, and between HACs and their respective communities.
2. The requirement that the Annual HAC Conference be used as a tool by the HAC membership to inform, engage, influence decisionmaking on statewide issues relevant to the HACs and their communities, and to provide educational opportunities to HAC members.

The purpose of the Framework is to establish the HAC structure as the key consumer organisation in the Country Health SA system.

## Section 2: The intent and aims of the Partnership Framework

### 2.1 Purpose of the Partnership Framework

The Framework acknowledges the special role that HACs have in their local communities and the value systematic local engagement can bring to country health services. It also acknowledges the legislative responsibility applied to HACs that ensures they are best placed to provide a broad whole-of-community perspective to community participation and engagement.

HACs acknowledge the important role that Aboriginal consumers play in improving health outcomes for Aboriginal people and communities. Moving forward, we acknowledge the need to increase Aboriginal membership on all HACs to complement the work of the Country Health SA Aboriginal Community and Consumer Engagement (ACCE) Strategy and function of the Country Health SA Aboriginal Health Experts by Experience Register.

HACs also acknowledge that representation by other consumer, carer, and community groups at various levels in Country Health SA is important and is not excluded by this specific partnership that Country Health SA has with HACs.

### 2.2 Aims of the Partnership Framework

The Framework is designed to improve participation across the public participation spectrum, using nominated and endorsed community representation and applying the legislated role of HACs to central engagement and local community engagement. Communities are thereby empowered through increased capacity for partnership approaches and participatory decision-making.

The Framework outlines two overarching strategies in which specific actions or processes are articulated that will affect the purpose of the Framework.

These actions aim to:

- > reflect the foundation legislation
- > define the structure of the HAC committees within Country Health SA, their roles and responsibilities, and the lines of communication and accountability of these committees
- > ensure the role of HACs is embedded in Country Health SA governance structures
- > raise the profile of HACs in Country Health SA, in regional and local sites and in relevant communities
- > improve the health literacy and health governance literacy of HAC members
- > support Presiding Members and other members to provide leadership within the HAC structure
- > improve communication and engagement processes between Country Health SA/HAC and local communities
- > empower communities to make decisions about relevant health issues and health services.

## 2.3 Principles and values

### International Association for Public Participation (IAP2) Framework<sup>3</sup>

The IAP2 Spectrum of Participation was developed by the International Association of Public Participation and is recognised internationally as a framework that guides best practice in community participation for health and other service industries.

The Framework embraces these principles and values to provide a platform for identifying and endorsing the full range of participation and engagement strategies available to Country Health SA and HACs. This approach ensures legitimate and effective participation by HAC constituents.

### IAP2 Core Values<sup>3</sup>

Public participation approaches may vary greatly in their application but are guided by the IAP2 Core Values which:

- > are based on the belief that those who are affected by a decision have a right to be involved in the decision-making process
- > include the promise that the public's contribution will influence the decision
- > promote sustainable decisions by recognising and communicating the needs and interests of all participants, including decision makers
- > seek out and facilitate the involvement of those potentially affected by or interested in a decision
- > seek input from participants in designing how they participate
- > provide participants with the information they need to participate in a meaningful way
- > communicate to participants how their input affected the decision.

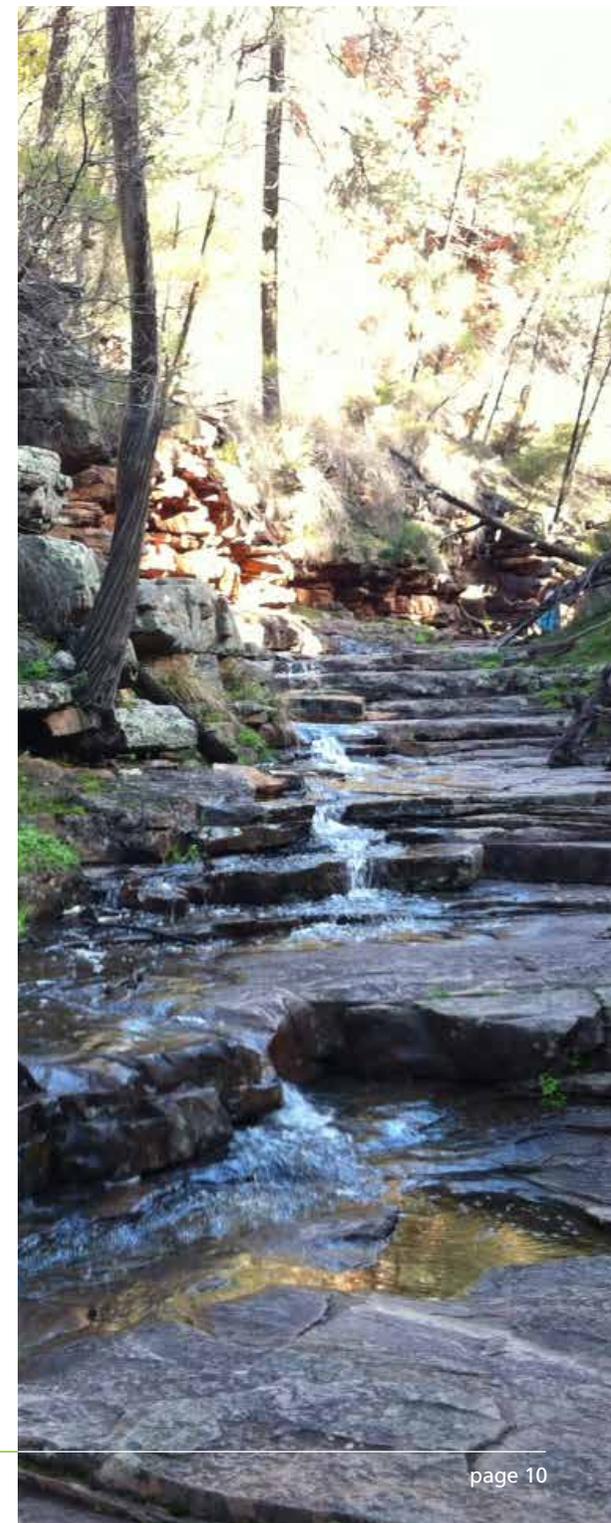


Figure 2: IAP2 Public Participation Spectrum

		INCREASING IMPACT ON THE DECISION → → → → →				
		 INFORM	 CONSULT	 INVOLVE	 COLLABORATE	 EMPOWER
Public Participation Goal		To provide the public with balanced and objective information to assist them in understanding the problem, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and identification of the preferred solution.	To place final decision-making in the hands of the public.
Promise to the Public		We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

Used with permission from the International Association for Public Participation. This version adapted by the South Australian Government's Better Together program [www.bettertogether.sa.gov.au](http://www.bettertogether.sa.gov.au)

## Other key values identified by the Partnership Framework Working Party

The Framework encompasses other values and principles which include:

- > early engagement
- > honesty
- > developing trust
- > respectful behaviour
- > communications in appropriate language and in accessible formats
- > always identifying the role and purpose of any message or activity
- > creating meaningful opportunities to engage

Additionally, the Framework will encompass the principles of the Government of South Australia's Better Together program, which sets out six principles to provide a consistent approach to engagement across government and to guide best practice<sup>4</sup>. These principles are:

### *We know why we are engaging*

When Country Health SA engages, we will be clear about the extent to which HACs and their communities can influence the directions or decisions. The way that we communicate will make clear to our audience what can and cannot be influenced by their engagement.

Utilising this knowledge and learning from their experiences, HACs will be best positioned to represent and advocate on behalf of our community for improved experiences and outcomes in care for local people. We also recognise the value of engaging in partnership with Country Health SA, with the key benefit being the opportunity to receive broad and diverse input into the business and operations of delivering the best care for rural communities.

### *We know who to engage*

HACs will engage with their communities in both broad and targeted ways. We will engage with Country Health SA, and other key stakeholders ensuring integration of feedback into the engagement process.

### *We know the history*

HACs have already been involved in engaging the community over the course of many years. They have also been engaged in many and varied ways as community advocates. HACs and Country Health SA will be aware of this history and will take into account all that has already been learned from previous engagements.

### *We start together*

Country Health SA and HACs will engage as early as possible. Engagement is about providing information to HACs and, in turn, to the community who will ideally be involved in developing a range of ideas, options and potential solutions. Following any engagement Country Health SA and HACs will report on how feedback has been incorporated into future directions or how decisions have been influenced.

### *We are relevant and engaging*

When Country Health SA or HACs engage, we will use methods that are inclusive and provide the opportunity for all to contribute feedback, allowing broad and diverse participation.

Country Health SA engages because we know that partnering with consumers and community in the planning, design and evaluation of health services results in safer and better quality services for all.

HACs engage because we recognise the wealth of knowledge and experience that our community has, particularly with relation to the community's health and wellbeing.

HACs have a deep understanding of their local health services and local communities and are valued partners in engaging with our consumers and the community. Country Health SA and HACs will work together in the development of key messages to take to the public.

We will be clear about what you have told us already in asking what else we need to know.

### **We are genuine.**

When Country Health SA engages with HACs we will provide people with a variety of real, accessible, and timely opportunities to participate. Together we will recognise and celebrate the value of participation and together, Country Health SA and HACs will develop inclusive methods of engaging to enable genuine participation and contribution.

When HACs engage with our communities, we will use inclusive methods, to maximise the community's ability to participate and contribute. We will report to our community how their feedback was used in decision making, or future directions.



## Section 3: Evaluation

A consumer participation activity is required to be recorded as ongoing evidence to support health service accreditation (NSQHSS Standard 2).

This Framework supports but surpasses the principles and strategies outlined in the Country Health SA Community and Consumer Engagement Strategy as it relates specifically to HAC structure and engagement. It will also provide important information to the Health Performance Council as it reviews HAC governance, capacity and sustainability over the next five years.

The Framework and any developed operational plan will be evaluated through an annual review and reporting process facilitated by Country Health SA in consultation with the Presiding Members Panel.

# Section 4: Our Partnership Framework Plans for 2017-2022

## 4.1 Strategy One: Partnership between Country Health SA and HACs

Our commitment: to work in a partnership framework that will:

- > strengthen the quality and timeliness of information sharing and consultation processes
- > provide improved collaboration and engagement opportunities
- > empower HACs to effectively engage with their communities
- > provide accurate advice and successful advocacy on behalf of their communities.

Engagement between Country Health SA and Advisory Councils

	Increasing impact on the decision → → → → →					→ → → → →				
Definition and examples of service planning	 INFORM	 CONSULT	 INVOLVE	 COLLABORATE	 EMPOWER					
Major variation or development. Problem identified but no solution on the table						Tools for mass insight. <b>HACs are the decision maker</b>				
Significant variation or development. Change in demand for specific services or modernisation of service.  This may, on occasions, be where a project has been identified with a need to nut out the detail.  Example: changing how or where and when large scale services are delivered.				Formal mechanisms to partner to formulate solutions/refine ideas.  <b>HACs are the key innovators with joint decision making</b>						
Minor change.  Need for modernisation or change of service where proposals have been set out and work actioned.  Example: the SA Virtual Emergency Service (SAVES), changing provider of existing services, pathway redesign when the service changes.		Formalised structures in place to ensure that feedback is sought/facts checked and collated.  <b>HAC concerns and aspirations are reflected in decision making</b>								
Ongoing activity.  Performance data or proposals made as a result of routine patient/ service user feedback.  Example: New policy on falls prevention, workforce development.	Information provision (CHSA policy and community insight).  <b>HACs are informed</b>									

OBJECTIVE	SPECTRUM	ACTION	WHO
To provide an organisational structure and human resource that demonstrates the value of HACs and provides capacity to facilitate effective, coordinated and collaborative processes and outcomes, in relation to the responsibilities of the Country Health SA HAC system	Collaborate	<p>Appoint at least one designated Community Engagement Officer as a part of the Communications team in Country Health SA.</p> <p>This role will support the PMP and HACs to effectively engage with their communities by:</p> <ul style="list-style-type: none"> <li>&gt; supporting PMP/HACs in key events and projects such as. the planning and facilitation of the annual HAC Conference</li> <li>&gt; ensuring suitable information, in suitable formats, is made available in good time for PMP/HACs to effectively engage</li> <li>&gt; facilitate effective and coordinated processes for distribution of this information to and from HACs</li> <li>&gt; facilitate an effective and coordinated process for the endorsement, distribution and implementation of all collaborative decisions concerning HAC policy and processes</li> <li>&gt; creating suitable reporting and evaluation frameworks that detail the outcomes of engagement programs</li> <li>&gt; ensuring strong linkages between Standard Two Work Groups and HACs.</li> </ul>	Country Health SA (CHSA)
	Collaborate	<p>Provide effective support to PMs and HACs in their local area including:</p> <ul style="list-style-type: none"> <li>&gt; facility and secretariat support</li> <li>&gt; meeting venues and management</li> <li>&gt; storage facilities</li> <li>&gt; provision of video conferencing and/or phone linkages and bookings</li> <li>&gt; transport (when appropriate)</li> <li>&gt; minute taking and agenda construction</li> <li>&gt; provision of a generic email address and monitoring</li> <li>&gt; record and correspondence management and storage</li> <li>&gt; physical assistance with arrangements for expos, community meetings etc.</li> </ul>	Regional Directors
Raise the health literacy and awareness of the role and responsibilities of HAC members	Inform	Update HAC information on the Country Health SA website	PMs
	Collaborate	Implement the standardised HAC Orientation Package and process endorsed in 2016. Review annually	CHSA/PMP and PMs
	Involve	Develop a list of training opportunities that can be offered to new and current HAC members	CHSA/PMP
		Provide an on line portal to access relevant documents for information and/or consultation	
		Provide SA Health and Country Health SA media releases to all PMs for distribution to all HAC members	

OBJECTIVE	SPECTRUM	ACTION	WHO
Raise the profile of HAC across Country Health SA	Inform	Continue to invite and include HAC members in the Country Health SA All Staff Forums	CHSA
	Involve	Consider inviting HAC presentations to staff through this forum	CHSA/PMP
Develop a CHSA organisational chart that describes the links between the Country Health SA operational structure, state health structure and the HAC structure			
Strengthen communication pathways between Country Health SA and HACs	Collaborate	Launch the Partnership Framework at the 2017 HAC Conference and distribute to staff across all Country Health SA sites	CHSA/PMP
		Provide the document to all HACs for distribution to HAC members	
		Provide a one or two page summary of the document	
	Collaborate	Develop an operational plan to provide ongoing implementation and evaluation of the Partnership Framework	CHSA/PMP/HACs
	Inform	Ensure all documents associated with the Partnership Framework are accessible through the on line portal	CHSA
	Involve	Continue with HAC profiles and new articles in the Country Health SA magazine	CHSA/PMPs
	Inform, Involve	Maintain regular information briefs from the CEO through the PMP meeting	CHSA/PMP representatives
		Ensure minutes of the PMP meeting are generated as soon as possible following meetings and that regional PMP representatives undertake timely distribution to all relevant PMPs	
	Involve	PMs to agenda information and consultation opportunities for review by all members on a regular basis	PMPs/Members
		Develop and use a standard format for a written six monthly site-specific report to all HACs from Regional Directors. This report to focus on agreed content including data and identified issues that require consideration and consultation with HACs	CHSA/PMP and Regional Directors
Reports outside the six month timeframe can be tabled verbally			
Introduce a standing HAC agenda item on Extended Regional Management Committee meetings to ensure timely identification of issues to be referred to HACs		Regional Directors/ Regional Managers	
Develop and use a standard format for a written six monthly report from the Governing Council to Regional HAC Forums		Governing Council	
Introduce a standing HAC agenda item on Governing Council and PMP meeting agendas to ensure timely identification of issues to be referred to HACs		CHSA/Governing Council and PMP Chairs	
	Develop and Implement a standard template for HAC reporting requirements to Country Health SA	CHSA/PMP	

OBJECTIVE	SPECTRUM	ACTION	WHO
Strengthen consultation and engagement opportunities and processes between Country Health SA and HACs	Consult	Implement the recommendations endorsed in 2016 to establish a Country Health SA/HAC Conference Planning Committee which will collaboratively plan each annual HAC Conference and ensure the forum supports networking, consultation, interaction and decision-making	CHSA/PMP and Conference Planning Committee
	Inform	Strengthen the function of Regional Combined HAC forums by providing speakers and two monthly reports from Regional Directors, and six monthly reports from the Governing Council	CHSA/Governing Council/Regional Directors and PMs
	Collaborate	Ensure information that refers to changes and potential changes in service provision or health site facilities are placed on local HAC agendas in a timely manner, and that appropriate regional staff attend HAC meetings to address these issues	CHSA/Regional Managers and PMs
Strengthen information sharing and consultation between local HACs and local Standard Two Work Groups	Involve	Maintain local HAC representation on Regional Standard Two Work Groups and develop functional reporting mechanisms between both committees	Regional Directors/ Lead of Standard Two Work Groups and PMs
Enhance collaboration and participatory decision-making between Country Health SA and HACs	Collaborate	Maintain the PMP as the key committee to coordinate HAC membership in country-wide participatory decision-making	CHSA/Governing Council and PMP
Strengthen opportunities for local HAC members to partner with staff to improve patient centred care in local health services	Collaborate	Formalise HAC representation on key CHSA governing committees at the central and regional level	CHSA
		Review the Terms of Reference for these committees to include HAC representation	
		Identify and use a consistent process for nominations	
	Collaborate	Identify and endorse the process by which Regional HACs are involved in regional health planning and evaluation	CHSA/Regional Directors and PMP
		Introduce country wide interest/portfolio for PMs	CHSA/PMP
		Invite local HAC members to participate in the Service Matters training program as co-facilitators	CHSA/Standard Two Working Parties
		Review other potential training partnership opportunities and develop a register of potential training opportunities	CHSA/PMP
		Offer supportive training to HAC members to sustain a partnership approach to staff training	CHSA
		Involve	Place consumer training opportunities on the Standard Two Working Group agenda

OBJECTIVE	SPECTRUM	ACTION	WHO
Quantify the level of HAC, Aboriginal Health Experts by Experience (AEE) and other consumer and carer representation and participation in Country Health SA	Collaborate	Develop a register of health consumer participation across each health site or region that delineates HAC, AEE representation and other type of community, consumer, carer participation	CHSA/Standard Two Work Groups and PMP
Encourage collaboration between local HAC and AEE members	Collaborate	Provide local Aboriginal Health Experts by Experience register to local HACs	CHSA
Strengthen the opportunities and capacity for HACs and respective communities to make effective decisions	Empower	Develop the annual HAC Conference workshops to facilitate decision-making on appropriate issues	CHSA/HAC Annual Conference Planning Committee
		Develop process to incorporate these decisions into CHSA planning and implementation	CHSA/PMP
		Review of pertinent legislation governing HAC roles and responsibilities	
		Identify clear lines of communication and a recommended process in relation to escalation of local or statewide issues through the system, for instance an appropriate approach to escalate issues beyond the regional level	
		Develop a flow chart that demonstrates this process	

## 4.2 Strategy Two: Partnership between HACs and their communities

Our commitment: to work in a partnership framework that will:

- > support the effective provision of advice to communities
- > afford improved consultation and engagement opportunities
- > empower our communities to be involved in reasonable and authentic decision-making processes.

### Engagement between Health Advisory Councils and the community

	Increasing impact on the decision → → → → → → → →				
Definition and examples of service planning	 INFORM	 CONSULT	 INVOLVE	 COLLABORATE	 EMPOWER
<p><b>Major variation or development.</b> Problem identified but no solution on the table</p>					<p>Tools for mass insight. <b>Community is the decision maker</b></p>
<p><b>Significant variation or development.</b> Change in demand for specific services or modernisation of service.  This may, on occasions, be where a project has been identified with a need to nut out the detail.  Example: changing how or where and when large scale services are delivered.</p>				<p>Formal mechanisms to partner to formulate solutions/refine ideas. <b>Community supports HACs to innovate</b></p>	
<p><b>Minor change.</b> Need for modernisation or change of service where proposals have been set out and work actioned.  Example: SA Virtual Emergency Service (SAVES), changing provider of existing services, pathway redesign when the service changes.</p>		<p>Formalised structures in place to ensure that feedback is sought/facts checked and collated. <b>Community concerns and aspirations are reflected in HAC feedback</b></p>			
<p><b>Ongoing activity.</b> Performance data or proposals made as a result of routine patient/service user feedback.  Example: New policy on falls prevention, workforce development.</p>	<p>Information provision (CHSA policy and community insight).  <b>Community is informed</b></p>				

OBJECTIVE	SPECTRUM	ACTION	WHO
To provide an organisational structure and human resource that demonstrates the value of HACs and facilitates effective, coordinated and collaborative engagement processes between HACs and their respective communities	Collaborate	Appoint at least one designated Community Engagement Officer as a part of the Communications team in CHSA who is responsible for supporting a coordinated and effective response by all HACs in relation to their community engagement responsibilities and strategies	CHSA
Raise the profile of HACs in local communities	Inform	Facilitate a communications campaign to ensure communities understand the role and function of their HAC	CHSA/HAC
		Develop communications about the role of HACs, broadly across CHSA as well as locally and regionally and inclusive of their regional role engaging with community and consumers	
		Produce promotional materials for use at community events	
		Produce promotional materials for distribution throughout local communities	
		Develop photo board displays in health sites – of HAC member at each health unit including acute, aged care and community health facilities	
		Distribute the Health Advisory Councils and Country Health Partnership Framework to health service staff and key community organisations. Retain copies for community members in appropriate form and language	
	Distribute the Country Health SA video Growing Better Health Services to HACs		
	Involve	Ensure other materials and visual information that is produced is available and distributed to HACs	
Use the local media to inform the community	Consult	Produce a newsletter that can be distributed to key community organisations on a regular basis	HAC
	Inform	Encourage the development of a regular local newsletter or articles for local publication and community feedback	CHSA
	Involve	Provide a clear media policy for HACs	CHSA/PMP
		Ensure all PMs and HAC members are offered comprehensive media training within the first six months of appointment	

OBJECTIVE	SPECTRUM	ACTION	WHO
Identify and undertake effective ways to involve and consult with local communities	Consult	Agree on targeted issues and policies for consultation and engagement statewide or locally as appropriate	CHSA/HAC
	Inform	Provide contact details to the community including a generic email address	HAC
	Inform Consult	Attend local events to raise the profile of HAC and to undertake specific consultation processes	
	Inform Consult	Support local HACs to investigate the appropriateness of using social media to connect with their local community	CHSA/HAC
	Inform	Develop a community listing including existing committees, groups and known structures within the community	HAC
Maintain effective representation of key community populations within the HAC membership	Involve Consult	Regularly review community representation across the membership of local HACs (annually)	HAC
	Inform Consult	Regularly review specific health issues and populations across the local HAC geographical area (annually)	Regional Planner/ HAC
		HAC participation in broader community planning including Local Government public health planning and primary health planning etc	PM/HAC
		Facilitate regular community forums with existing networks in the community	
Involve Consult	Consider surveys to gain specific or general information from communities or targeted populations	HAC/CHSA	
Encourage engagement with other key community organisations	Inform Consult Involve Engage	Develop a local engagement strategy that outlines actions and timelines for engagement with key community organisations and networks	PM/HAC
Partner with other key community organisations	Collaborate	Facilitate representation or regular guest positions on/to the HAC from key organisations such as Primary Health Networks, local government, local doctors associations and active local health forums	PM/HAC
	Collaborate Empower	Agenda items for active advocacy in HAC and other appropriate committee meetings	PM/HAC
		Use the previously endorsed escalation process for advocacy issues	PM/HAC
		Keep communities informed on current advocacy issues	HAC
Build capacity and opportunity for community decision-making	Involve	Attend consultative meetings as an advocate for community groups or the wider community	HAC
	Empower	Facilitate and attend citizens' jury style forums when appropriate	CHSA/PM/HAC
	Empower	Facilitate community meetings for particular consultations and participatory decision-making meetings	PM/HAC

# Section 5: Appendices

## Appendix 1: Policy context

The development of the Health Advisory Councils and Country Health SA Partnership Framework is informed by international, national and state policies, and frameworks including:

- > A Framework for Consumer and Community Engagement
- > Country Health SA Community and Consumer Engagement Strategy
- > Country Health SA Aboriginal Community and Consumer Engagement Strategy and Aboriginal Health Experts by Experience.
- > Aboriginal Cultural Respect Framework
- > National Safety & Quality Health Services Standards (NSQHSS)<sup>5</sup>
- > SA Health Plans
- > Country Health SA Strategic Plan 2015-2020.

## Appendix 2: Acronym definitions

ACCE	Aboriginal Community and Consumer Engagement Strategy
AEE	Aboriginal Health Experts by Experience
CCES	Community and Consumer Engagement Strategy
CHSA	Country Health SA
HAC	Health Advisory Council
HPC	Health Performance Council
IAP2	International Association for Public Participation
NSQHSS	National Safety and Quality Health Service Standards
PM	Presiding Member
PMP	Presiding Members Panel



## Appendix 3: References

1. Government of South Australia, *Health Care Act 2008*. Adelaide. SA. [www.legislation.sa.gov.au](http://www.legislation.sa.gov.au)
2. Government of South Australia, SA Health website, [www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au), accessed February 2017.
3. International Association for Public Participation, 2014, IAP2 Public Participation Spectrum [www.iap2.org](http://www.iap2.org), accessed February 2017.
4. Government of South Australia, Better Together website, [www.bettertogether.sa.gov.au](http://www.bettertogether.sa.gov.au), accessed February 2017.
5. Australian Commission on Safety and Quality in Health Care (ACSQHC) 2011, National Safety and Quality Service Standards, ACSQHC, Sydney [www.safetyandquality.gov.au](http://www.safetyandquality.gov.au)

## Appendix 4: National Safety and Quality Health Service Standard 2 – Partnering with Consumers (excerpt from Standard 2 Fact Sheet)

The aim of this Standard is to ensure that health services are responsive to patient, carer and consumer input and needs. In brief, this Standard requires that:

- > governance structures are in place to form partnerships with consumers and carers
- > consumers and carers are supported by the health service organisation to actively participate in the improvement of the patient experience and patient health outcomes
- > consumers and carers receive information on the health service organisation's performance and contribute to the ongoing monitoring, measurement and evaluation of performance for continuous quality improvement.



## For more information

**Country Health SA Local Health Network**

**Telephone: (08) 8226 6120**

**Email: [HealthCHSA@sa.gov.au](mailto:HealthCHSA@sa.gov.au)**

**[www.sahealth.sa.gov.au](http://www.sahealth.sa.gov.au)**

Public - I1-A1



[www.ausgoal.gov.au/creative-commons](http://www.ausgoal.gov.au/creative-commons)

© Department for Health and Ageing, Government of South Australia.  
All rights reserved. FIS: 17004.8-1 June 2017.



**Government  
of South Australia**

SA Health