

OFFICIAL

Eyre and Far North Local Health Network Consumer Representative/Expert Orientation and Information Book

September 2023

Contents

Welcome	4
Consumer and Community Engagement Strategy	5
Our Strategy	6
Principles of Engagement	6
Enablers	7
About EFNLHN	8
Health Advisory Councils	10
Introduction to being a Consumer Representative	13
Responsibilities of a consumer representative / expert	13
Privacy and Confidentiality	14
Code of Ethics	14
Training and Support	15
Fees and Expenses	15
Health Consumer Rights	16
Guidelines for Committee Chairperson / Secretariat	18
At the Meeting	19
After the Meeting	20
Notes	21
Consumer Orientation and Information Book Evaluation	22
Appendix 1 Confidentiality agreement for consumers	23

Acknowledgement of Country

The Eyre and Far North Local Health Network acknowledges the Traditional Owners of the unceded land on which we work, learn and live.

We recognise the unique place held by Aboriginal and Torres Strait Islander peoples as the original owners and custodians of the lands and waterways across the Australian continent, with histories of continuous connection dating back more than 60,000 years. We also acknowledge their enduring cultural practices of caring for Country.

We pay respect to Elders past, present and future, and acknowledge the importance of Indigenous knowledge in health care. As a community of health professionals we are privileged to work and learn every day with Indigenous colleagues and partners.

Version	Date	Amendment	Amended by:
1.0	Jan 2021	Draft created	Quality Risk Safety (QRS) Team
2.0	September 2023	Version revised to reflect current arrangement	Jane Robinson, Director Governance and Strategy

Welcome

Welcome and thank you for expressing an interest in becoming a consumer member of one of our committees and/or work groups. We look forward to welcoming you and supporting you to be able to contribute to our planning and decision-making.

For anyone who already uses our health or aged care services or is preparing to use them, your views and insights are very important to us. We want to support you to be able to feel confident to contribute and able to be heard.

This Consumer Orientation and Information Book has been developed to provide you a summary of what the Eyre and Far North Local Health Network does and the role of other community engagement mechanisms e.g. Health Advisory Councils.

You'll find information about what being a consumer member means, the benefits of consumer participation and how we can work together to improve health outcomes. This includes the roles and responsibilities for consumer representatives/experts, tips for effective consumer advocacy and information on privacy, confidentiality, SA Public Sector Code of Ethics, respectful behaviours, consumer training and support.

This booklet also provides you with general information relevant to our committee work and processes. If you have any specific questions that relate to the duties that you are undertaking, or wish to clarify anything at all, please refer to the committee's Chairperson for support and guidance.

I look forward to welcoming you and working with you.

Julie Marron

Eyre and Far North Local Health Network Chief Executive Officer



Glossary of terms

EFNLHN	Eyre and Far North Local Health Network
HAC	Health Advisory Committee
HCSCC	Health & Community Services Complaints Commissioner
LHN	Local Health Network

EFNLHN Consumer and Community Engagement Strategy

The Eyre and Far North Local Health Network’s (EFNLHN) Governing Board has developed and monitors the EFNLHN [Consumer and Community Engagement Strategy 2020- 2023](#), which sets the strategic priorities for and highlights the importance of involving and engaging local consumers and communities in decision making about the provision of local health services. The Strategy was developed after extensive consultation.

The Strategy is built on the principles set out in the South Australian Health and Community Services Complaints Commission (HCSCC) Charter for Health and Community Services Rights (2011) and the SA Carer Recognition Act (2005).

Our Strategy

Consumer Engagement is about empowering residents, consumers and communities to play an active role in decision making about their health service. The Eyre and Far North Local Health Network values the positive contributions consumers, carers and local communities make to improving local health services.

The EFNLHN Consumer and Community Engagement Strategy (CCES) 2020-2023:

- Outlines EFNLHNs approach and core engagement strategies
- Describes the infrastructure and governance mechanisms EFNLHN uses to support engagement
- Details how EFNLHN will measure, monitor, evaluate and improve engagement activities.

Principles of Engagement

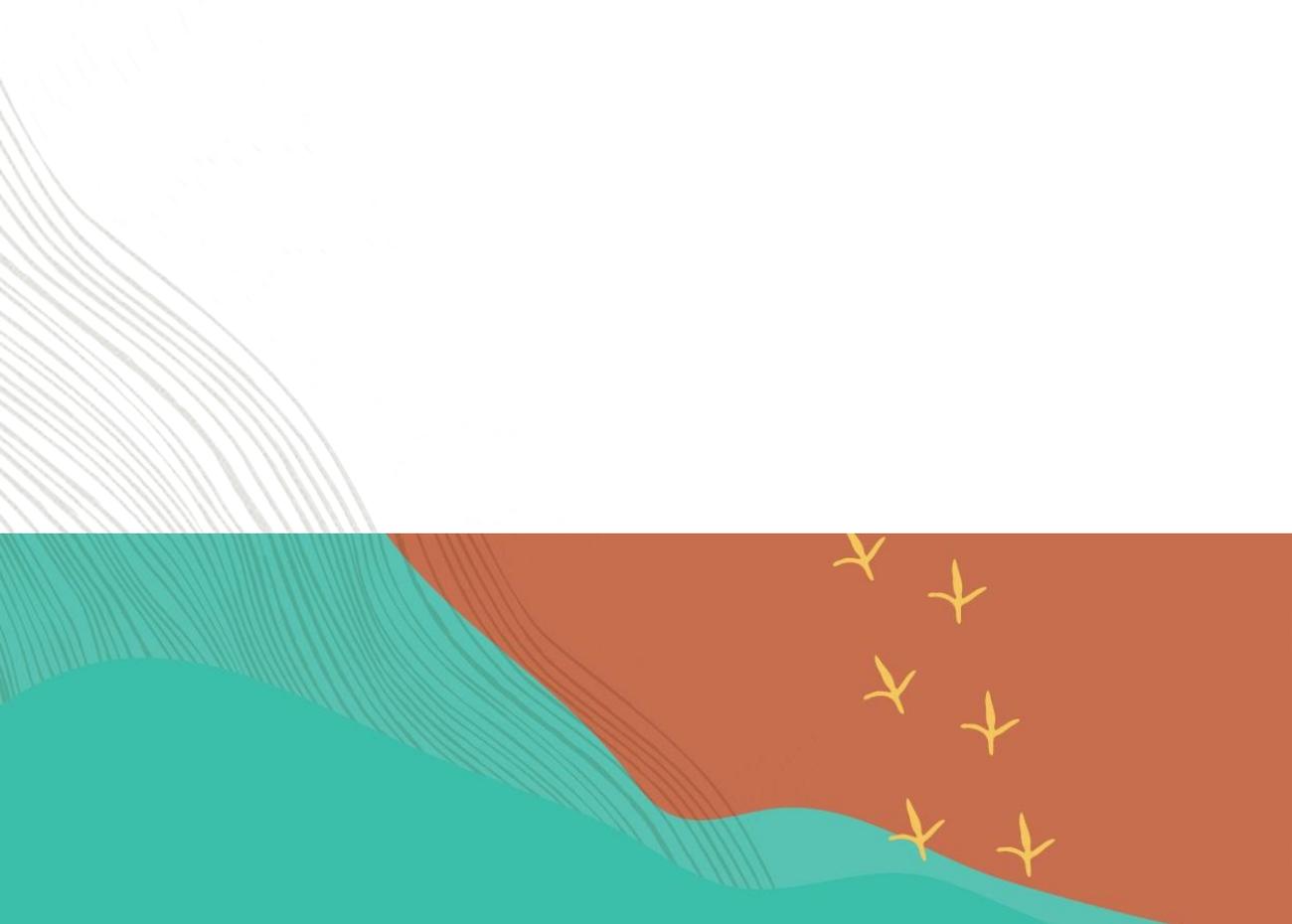
The EFNLHN Consumer and Community Engagement Strategy (CCES) is consistent with the SA Health Consumer and Community Engagement Strategic Framework (CCESF) 2020-23 Principles of Engagement, as set out in the table below:

Partnering	Empowering	Transparent	Meaningful	Respectful
Consumers, carers and the community must be active in service design and decision making.	Consumers and the community are provided with the skills to participate effectively.	Open and inclusive decision making at all levels. Sharing information is essential to ensuring safety, quality and consumer centred care.	Authentic relationships exists between consumers, the community and health professionals.	The role of all people engaged with EFNLHN is valued.

Enablers

EFNLHN's approach to community and consumer engagement is guided by core enablers which support achievement of the Consumer and Community Engagement Strategy; they are fundamental in guiding EFNLHN to successfully plan, manage and implement engagement activities. Those enablers are;

- 1: Inclusive of diversity:** Strengthening health system participation and partnership with diverse communities and engaging effectively with these diverse groups.
- 2: Accessible and informed opportunities to participate:** Promoting engagement opportunities that are accessible to the broadest range of consumers, carers and community groups to meaningfully participate.
- 3: Partnering in co-design, planning and evaluation:** Partnering with consumers, carers and the community in planning, implementation and evaluation of its service.
- 4: Systems, strategies and mechanisms for active engagement:** Ensuring systems, strategies and mechanisms to actively engage with consumers, carers and the community.
- 5: Consumer-centred best practice:** Ensuring consumer, carer and community engagement practices meet national standards and are informed by best practice.



About Eyre and Far North Local Health Network

Our Local Health Network (LHN) is part of a statewide public sector organisation called SA Health and is responsible for the planning and delivery of hospital and health services over 337,626 square kilometres, taking in the Eyre Peninsula, west to the West Australia border and north to the Northern Territory border.

There are 10 Local Health Networks (LHNs) in South Australia responsible for planning and delivery of health and wellbeing services; we are the largest LHN by area in SA and one of the largest in Australia.

Communities include Ceduna, Cleve, Coober Pedy, Cowell, Cummins, Elliston, Kimba, Oodnadatta, Port Lincoln, Streaky Bay, Tumbly Bay and Wudinna.

We provide services to a resident population of just over 40,000. According to the Australian Bureau of Statistics 2016 Census, the population was:

- 50.9% male
- 49.1% female
- 11.6 % Aboriginal and Torres Strait Islander (compared with State average of 2.3%)
- 31 % aged 0 to 24
- 51.7% aged between 25 and 64
- 15.1 % aged 65 to 84, and
- 2.2 % 85 or over.

Governance

Eyre and Far North Local Health Network is led by a [Governing Board](#) which is responsible for setting strategic priorities and monitoring the organisation's performance and compliance with legislative, regulatory and standards requirements.

The Governing Board is accountable to the SA Minister for Health and Wellbeing, who is supported by the SA Department for Health and Wellbeing (DHW). EFNLHN works closely with the SA Department for Health and Wellbeing, which sets policies and budgets for the 10 Local Health Networks and monitors the SA Health system's performance.

The Governing Board has developed the [EFNLHN Strategic Plan 2020 -2025](#), which sets out five strategic priorities for the LHN to achieve:

- Responsive services and care
- Skilled, supported and sustainable workforce
- Aboriginal Health is Everyone's Business
- Interconnected Mental Health Services
- Vibrant Aged and Disability Care

The day-to-day operations of EFNLHN are led by a Chief Executive Officer, supported by an Executive Team.

Hospital and health services and facilities

EFNLHN provides health, aged care and disability services both in hospitals and in the community, with more aged care beds than hospital beds, and more episodes of community-based care than hospital and aged care beds combined.

EFNLHN runs 11 hospitals, 10 of which are co-located with aged care facilities, as well as community, disability and community mental health services.

Our largest hospital is at Port Lincoln – it is also our only hospital which is not co-located with an aged care residential service.

Port Lincoln Hospital and Health Service provides emergency, acute inpatient, surgical specialties, maternal and neonatal, chemotherapy, renal dialysis and dental services. Hospital services are co-located with community health services.

Ceduna District Health Service provides emergency, inpatient, surgical, maternal and neonatal, chemotherapy, renal dialysis and residential aged care services. Medical services are co-located with health, community, allied health and dental care services.

We run a total of 10 Multi Purpose Services sites, which co-locate hospital and residential aged care services, with pooled Commonwealth and State funds. They provide emergency, inpatient care, community care and residential aged care services, and are located at:

- Ceduna District Health Service
- Cleve District Hospital and Aged Care
- Cowell District Hospital and Aged Care
- Coober Pedy Hospital
- Cummins and District Memorial Hospital
- Elliston Hospital
- Kimba District Hospital and Aged Care
- Streaky Bay Hospital
- Tumby Bay Hospital and Health Services
- Wudinna Hospital

EFNLHN also owns and manages three medical practices – at Coober Pedy, Ceduna and Mid Eyre Medical Practice, which covers Cleve/Kimba/Elliston.

The LHN also runs health clinics at Lock and Oodnadatta.

Mobile renal dialysis is provided from a specially designed truck fitted with dialysis chairs which visits remote Aboriginal communities, including the Anangu Pitjantjatjara Yankunytjatjara (APY Lands). The Purple House Dialysis Unit in Pukatja commenced dialysis services in August 2019.

The Amata Family Well Being Centre provides services to meet identified community needs in the APY Lands.

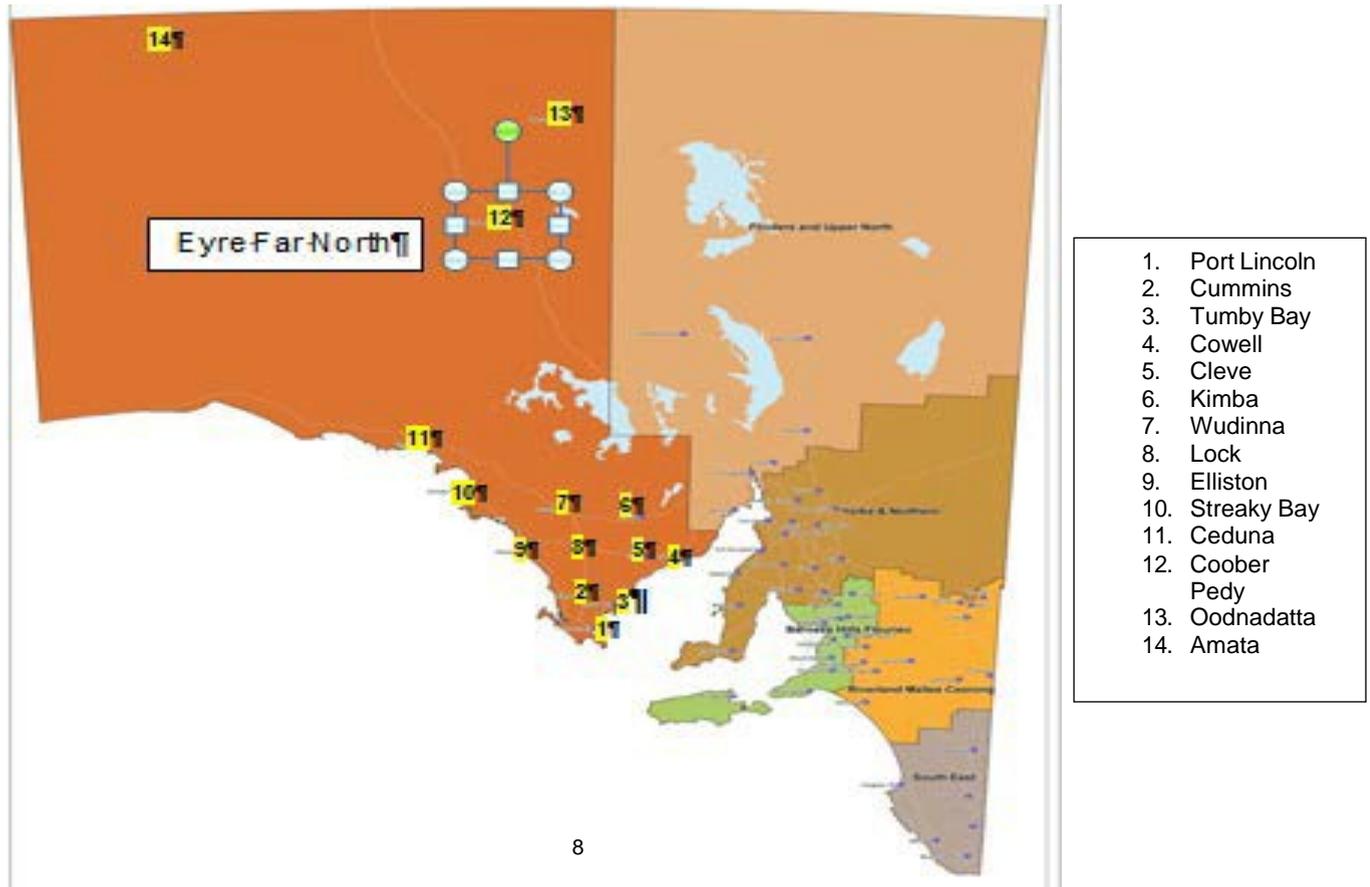


Table 1: EFNLHN service sites

Aged Care (residential)

Aged care residential services are provided at the Multi Purpose Services sites, which bring together residential aged care and hospital services at hospital sites:

- Ceduna Hospital/ Ceduna Village Hostel
- Cleve Hospital/ Crestview Hostel (Cleve)
- Coober Pedy Hospital
- Cowell Hospital/ Franklin Harbour Village (Cowell)
- Cummins Hospital and Miroma Place Hostel
- Elmhaven (Elliston)
- Kimba Hospital/ Kimba Pioneer Memorial Hostel
- Streaky Bay Hospital/ Elmhaven (Streaky Bay)
- Tumby Bay Hospital and Uringa Hostel
- Wudinna Hostel.

Mental Health Services

Community-based Mental Health services are located at Port Lincoln, with staff visiting communities across the LHN. The team provides services for people aged 16 and over. Regional communities are also supported via the telehealth network.

The LHN also is supported by an integrated network which includes inpatient beds located at Rural and Remote Inpatient Units at Whyalla, Berri and Mount Gambier, as well as a Community Rehabilitation Services based at Whyalla.

The country-wide Rural and Remote Mental Health Service provides Distance Consultation and Liaison Service, including the Emergency Triage and Liaison Service (ETLS), Older Persons Consultation Liaison Service and Tele-Psychiatry, as well as the newly created Borderline Personality Disorder Collaborative.

Country Health Connect (community-based services)

Country Health Connect offers a wide range of community, in-home and residential aged care, early childhood and disability support services. Our professional and well trained staff work with clients to keep them well and independent at home.

Country Health Connect are registered National Disability Insurance Scheme (NDIS) service providers with responsibility for program governance and operational management. The Country Health Connect NDIS team work in partnership with NDIS participants across the Network and have a strong focus on:

- respecting participant's choices and wishes.
- supporting dignity or risk.
- supporting participants to achieve their own goals and be involved in planning their care.
- delivery of high quality and safe supports.

Health Advisory Councils

Health Advisory Councils were established under legislation (*Health Care Act 2008*) and are aligned with specific local hospital sites to represent the views of their communities. The membership of Health Advisory Councils (HACs) includes at least six and a maximum of eight community members. The role of a Health Advisory Council is to:

- Advise EFNLHN about local health issue and priorities, based on consumer and community feedback
- Advocate for local health services on behalf of their communities
- Communicate and consult with their communities and with EFNLHN, and
- Provide a consumer and community viewpoint in the planning, design and evaluation of local health services.

There are six HACs in the Eyre and Far North:

- Ceduna Health Advisory Council Inc
- Eastern Eyre Health Advisory Council Inc
- Far North Health Advisory Council Inc
- Lower Eyre Health Advisory Council Inc
- Mid-West Health Advisory Council Inc
- Port Lincoln Health Advisory Council Inc

Introduction to being a consumer representative / expert

EFNLHN recognises the importance of including consumers on decision-making committees and work groups, bringing new perspectives, supporting development of partnerships between consumers and the health service and support for programs or services, and contributing to improving the quality of care and use of resources.

There is a formal process for appointment of a consumer representative (rep) to an EFNLHN governance committee or experts by experience register, which EFNLHN will assist with. Notification of a vacancy can be done formally, via a recruitment or expression of interest process. A consumer may also express interest more informally, through contact with EFNLHN staff and/or services.

A consumer rep may be appointed either to represent the consumer interest generally, or to advocate for the needs and views of a specific group e.g. consumers with chronic illness.

There is a balance to be struck by a committee or work group – a consumer rep is expected to be prepared to represent the interests of consumers as a collective but cannot be expected to know everything about consumer issues. They should also not simply provide a narrow personal view on an issue. Keeping in touch with a network of consumer contacts or other advocacy organisations will help to provide that broad view of the consumer interest.

The role of a consumer rep in any particular situation must be to represent only the interests of consumers. A committee rep who is expected to represent the interests of both consumers and another stakeholder group may encounter a situation in which those interests differ, and perhaps even conflict. A consumer rep should never be put in that position.

Building understanding of health issues and health services from a service-user point of view is a key role for consumer reps, which the EFNLHN can help with. To be effective, a consumer rep will need to be able to represent consumer interests objectively and assertively.

A consumer rep can be a lone voice amongst many health care professionals, service providers, industry and government representatives. EFNLHN will provide access to training and support in order for reps to build confidence to influence committee outcomes, and in dealing with the unfamiliar culture and practices of professional committees.

What is a consumer representative / consumer expert?

A consumer rep or expert is an individual who brings their specific lived experience as a health care consumer to their membership of a committee or workgroup in order to advocate for other consumers.

They might be a member of a government, professional body, industry or non-governmental organisation committee, and take part in the decision-making processes on behalf of consumers.

What is the role of a consumer representative / expert?

The role of a consumer representative/expert is to provide a consumer perspective, which differs from the perspective of other committee or workgroup members, who may bring a public sector, service provider, industry, academic or professional perspective.

The role of the consumer representative involves:

- protecting the interests of consumers, service users and potential service users
- presenting how consumers may think and feel about certain issues
- contributing consumer experiences
- ensuring the committee recognises consumer concerns

- reporting the activities of the committee to consumers.

Benefits of Consumer participation

International and national evidence clearly demonstrates the benefits of consumer participation in governance work, contributing to:

- Improvements in health outcomes
- An active role for consumers in managing their own health
- Advice leading to more accessible and effective health services
- Participation by those traditionally marginalised by mainstream health services
- Development, implementation and evaluation of health strategies and programs, which is integral to their success.

Isn't everyone a health care consumer?

Most people have been health care consumers at some point in their lives. However, not every committee member can represent consumers. Other committee members, such as service providers, health care professionals, industry representatives and government officers, are members to represent those interests. They cannot do this and represent consumers at the same time.

A person whose primary experience is as a consumer is best placed to represent consumer views because their judgment is not clouded by another perspective.

Responsibilities of a consumer representative/expert

Consumer representatives may represent one or more consumer communities. Their responsibilities are to:

- maintain an active network within their communities and keep in contact with other consumer representatives / experts
- anticipate and describe the impact on the consumers they represent regarding issues discussed by the committee
- suggest the likely response of their consumer communities to any strategies proposed by the committee, particularly when direct consultation with consumers is not possible
- keep in touch with their consumer communities and keep them informed about the activities of the committee, within reasonable bounds of confidentiality
- contribute, as a positive member, to the credibility and overall role and direction of the committee or group
- encourage the committee or group to actively consult more broadly with other consumers
- encourage the committee to keep consumers informed about decisions of the committee and advise about effective methods of reaching their consumer communities.

Limits to your role as a consumer representative / expert

A committee or group should not expect you, as a consumer member, to:

- Have a technical background in the subject under discussion. Your role is to provide consumer perspectives on an issue. Most consumers are not technical experts in medicine or research but have legitimate interests in it from a service user point-of-view.
- Undertake consumer consultations beyond what is required to inform your own input at the meeting or to ensure your own accountability to their constituency. If wider consumer consultation is required, you can advise the committee on how this might be achieved but should not be expected undertake this work yourself.
- Expect you to know the views of all consumers. Consumer members of committees or groups are there to represent your lived experience and advocate for consumers within your constituency.

Privacy and Confidentiality

EFNLHN committee work involves dealing, from time to time, with information that is confidential and sensitive in nature. This confidentiality must be respected.

During the course of a meeting, a free and frank exchange of views and opinions may be necessary to facilitate the development of a recommendation, it is imperative that any such discussion remains strictly confidential.

Eyre and Far North Local Health Network (EFNLHN) is required to comply with public sector policies and laws about privacy and confidentiality of personal information obtained whilst undertaking its work. This includes personal information obtained from consumer reps through participation in committee work. EFNLHN will not give out any personal information to anyone without your consent.

EFNLHN is bound by the SA Public Sector Code of Ethics, which has strict requirements in relation to duty of care, confidentiality and privacy, as well as legislation that outlines when and to whom personal information can be disclosed. There are significant penalties for breaches of these provisions.

EFNLHN has a duty of care to take all reasonably practicable steps to ensure the health, safety and welfare of individuals impacted by its business. Any information provided by a consumer rep will be kept strictly confidential and will be stored in a secure file.

In certain circumstances there are some laws that require SA Health to provide personal information it holds to others. If you have any concerns about your privacy, or would like a copy of our policies, please speak to your committee Chairperson in the first instance.

The SA Health "Confidentiality agreement for consumers" form is included as Appendix 1 for you to complete and return to your Chairperson.

Consumer representatives / experts and the media

Consumer members of committees or groups are in a privileged role with access to information which may not be available to the wider community. To enable a relationship of mutual trust between EFNLHN and consumer representatives, consumer reps are not to proactively discuss this information with media outlets nor make any public comment without formal approval by EFNLHN.

Committees and work groups make collective decisions and usually the Chairperson is the spokesperson for that bodies work and decisions.

OFFICIAL

There may be occasions when media coverage is sought by EFNLHN and your involvement will be discussed and agreed.

If you require assistance, please discuss this with your committee Chairperson in the first instance.

Code of Ethics

EFNLHN committee members need to abide by the SA Public Sector Code of Ethics and are bound by rules and guidelines when it comes to professional conduct standards such as professional and courteous behaviour, making public comment, handling official information, use of Government/public resources and conflicts of interest. A copy of the Code of Ethics can be found at: <http://publicsector.sa.gov.au>

Respectful Behaviour

Consumer representatives / experts are expected to comply with the [SA Health Respectful Behaviours Policy Directive](#). Click on the link provided or go to the SA Health website.

The policy directive promotes a positive and professional working environment and a culture of respect to ensure staff and consumers are valued and supported.

It is widely recognised that effective teamwork is strongly correlated with the delivery of safe, quality patient care. Interpersonal relationships and behaviour can have a significant impact on individuals, the productivity of a team and service quality.

Respectful behaviour is a core element of effective teamwork which underpins safe quality care. Disrespectful behaviour has a negative impact on organisational performance and wellbeing of staff and must be managed.

Training and Support

SA Health is committed to the formal induction and orientation of consumer representatives / experts and volunteers to the values, goals, cultures, plans, policies and procedures within SA Health. It is important that all volunteers participate in an effective induction and orientation program prior to or upon engagement within SA Health where possible. Part of that process is making yourself familiar with this booklet.

Fees and Expenses

To ensure consumer representatives / experts have the opportunity to fully participate as a committee member, meetings will be centralised where possible and transport opportunities may be available with other committee members. Consideration will also be given to scheduling meetings at a time when the consumer representative will not suffer a loss of income. Technologies such as teleconferences, video conferencing will be implemented and utilised where possible.

Reimbursement of reasonable out-of-pocket expenses e.g. travel, negotiated with the committee Chairperson prior to being incurred, will be met by EFNLHN.

Health Consumer Rights

Health & Community Services Complaints Commissioner (HCSCC)

The Health & Community Services Complaints Commissioner is an independent, impartial and confidential free service that assists people, service users, carers and service providers – with complaints about health or community services in South Australia. This includes government, private and non-government health and community services. The HCSCC recommends that complaints first be directed to the health service about which the complaint is referring to and all public health services have a complaints process. If the response from the respective health service is not deemed satisfactory by the consumer or complainant, the HCSCC will intermediate.

Charter of Rights

[The Health & Community Services Complaints Commissioner Charter of Rights](#) was developed following consultation with service users, carers and health and community service providers in 2010. The Minister for Health tabled the Health & Community Services Complaints Commissioner Charter of Health and Community Services Rights in the South Australian Parliament on 8 March 2011. On the 23 June 2011, the Charter came into effect.

The Health & Community Services Complaints Commissioner Charter sets out the rights of all people who use most health and community services in South Australia and to the family members, carers and nominees who act on behalf of a person seeking or using a service.

Services include a wide range of health and community services in the public, private and non- government sectors.

For more information, go to: <http://www.hcsc.nt.gov.au/complaints/making-a-complaint/how-to-make-a-complaint-with-th-hcsc/>

If you would like assistance locating information or resources, or you would like a resource downloaded and printed for you, please speak to your committees Chair person or administrative support staff or your health service contact person.

Guidelines for Committee Chairperson / Secretariat

The information below provides an overview for key committee roles.

What can consumer representatives / experts provide?

Consumer representatives will add value and integrity to decision-making processes ensure that the diversity of consumers is acknowledged, respected and adequately represented.

Consumer representatives can help a committee by:

- explaining how consumers are likely to view a situation or problem
- identifying what consumers are likely to view as the priorities in a particular situation
- suggesting how the consumer perspective relates to the view of other stakeholders
- anticipating what the consumer response might be to devised strategies
- offering solutions to a problem that will meet the needs of consumers, and
- predicting how their constituency will respond to proposals and ideas.

To benefit fully from the contribution of consumer representatives, committee members need to welcome and explore opinions, suggestions or conclusions offered, and perhaps seek justification of the views expressed.

The committee chairperson and members can often enhance the contribution of a consumer representative through different and innovative approaches to support their involvement.

Small things often make a big difference!

Before the meeting

Before a consumer rep joins a committee or workgroup, EFNLHN will:

- Touch base well before the meeting and brief them
- Provide the terms of reference and describe the committee's role in lay terms
- Provide background information, this may include annual reports, websites, articles, previous committee papers and terms of reference
- Provide information about the Chair, other members of the committee
- If the committee has already met, provide relevant information so the consumer representative can catch up
- Minimise or explain jargon used in discussions and in papers, include a glossary of terms
- Find out how the consumer representative would prefer to be contacted.

- Clarify if the consumer rep can print large documents and has access to email, and if not, make other arrangements to engage and provide information
- Clarify what the arrangements are for the first meeting.

Considering the needs of consumer representatives

- Send agenda and papers well in advance of the meeting date (at least one week).
- Minimise the upfront costs for the consumer representative where ever possible
 - Use a free-phone number or phone the participants for teleconferences
 - If a consumer representative calls STD, offer to return the call
- Be clear from the outset about the committee guidelines for covering costs.

At the meeting

The Chairperson is key to establishing the role of the consumer representative on the committee. It is good practice to:

- Welcome and introduce the consumer representative to the rest of the committee at the start of the meeting and ask other members of the committee to introduce themselves
- Wear name tags or sit behind name plates
- Ensure other committee members are aware of the role of a consumer representative and the reasons for their involvement
- Ensure the consumer representative has the opportunity to express a viewpoint
- Bring the consumer into conversations by asking them for direct input into the discussion
- Discuss this prior to the meeting as the consumer may not feel comfortable raising issues in a larger meeting in the first instance
- Explain or avoid jargon or abbreviations
- Help the consumer representative build relationships by introducing them to others.
- Make arrangements for the next meeting.

After the meeting

- Promptly pay sitting fees (if appropriate) and reimburse any expenses the consumer may have incurred (such as mileage, parking)
- Explain the process EFNLHN uses for making payment
- Check how the consumer representative found the meeting and whether there is anything that can be done to improve this experience
- Ensure that all members of the committee accept and understand the role of the consumer representative; it is up to the Chair to help all committee members work well with one another
- If further orientation would be helpful, consider arranging for the consumer representative to work with other committee members. This builds relationships between them and helps the consumer representative to learn more about the topic under discussion
- Consider whether one consumer representative is enough. If there is strong representation of other interest groups on the committee then you may need to strengthen the consumer representation
- Consider whether wider consumer consultation is needed on a particular topic. The consumer representative can speak on behalf of other consumers on some occasions but if more detailed input is sought or the views of a larger group of consumers, the committee may need to organise a consultation. The consumer representative could provide input on how this should be done or what should be included in it.

Consumer Orientation and Information Book Evaluation

The aim of this booklet is to provide you with general information about taking up the role of a consumer representative on a committee or working group.

We would appreciate your feedback on the information provided in this booklet and how helpful it has been in preparing you for this role.

Please rate on a scale of 1 to 5 your satisfaction, 1 being poor and 5 being excellent:



	poor		average		excellent
Overall content of information:	1	2	3	4	5
Information / background on Country Health SA Local Health Network	1	2	3	4	5
Explanation of the consumer representative role	1	2	3	4	5
Explanation of role expectations	1	2	3	4	5
Explanation of Committee/ Working Party responsibilities	1	2	3	4	5
Opportunity to contribute and ask questions	1	2	3	4	5

Do you have any suggestions on how this information could be improved or any additional information that would be useful?

Please complete this form and return to:
Health.EFNLHNQRSTeam@sa.gov.au

Country Health SA Partnering with Consumers Confidentiality Agreement for Consumers

In the course of your role as a consumer member of a committee, board or work group, you will come into contact with information that must be kept confidential.

- > Confidential information means information or an opinion, whether true or not, relating to a natural person or the affairs of a natural person whose identity is apparent or can be guessed from the information disclosed. It also refers to information relating the organisation and its operations.
- > A breach of confidentiality can occur as a result of inappropriate discussion, access to, or disclosure of any matters regarding confidential information of the health service.
- > You should discuss with the Chairperson of your committee / work group if you feel that this confidentiality agreement is hindering your role. You may wish to clarify with the Chairperson of your committee whether particular operational matters are confidential or able to be shared in order to gain a broader consumer viewpoint and assist in your role.
- > Any breach of confidentiality may result in termination of the role.
- > As acknowledgement that you have read this agreement and that you understand the health service's stance on disclosure of confidential information, please sign below.

AGREEMENT

I have read the above information and understand Country Health SA Local Health Network's position, and my responsibility, on disclosure of information. I acknowledge the consequences that will result if I release confidential information and I agree to maintain confidentiality.

Name of consumer member:

Committee:

Signature _____ Date: _____

Name of witness:

Designation of witness

Signature _____ Date: _____

This form is to be filed and retained by the Region / Directorate

Document location/owner: CHSA Partnering with Consumers Work group

Version No. 3

Date of Issue: 6/10/16

Last Review Date: 18/10/18

Next Review Date: 18/10/20



For more information

Eyre and Far North Local Health Network

Oxford Terrace

Port Lincoln SA 5606

sahealth.sa.gov.au/eyreandfarnorthlhn

Follow us at: facebook.com/EFNLHN

OFFICIAL

© Eyre and Far North Local Health Network, Government of South Australia.
All rights reserved.