Contributors

We acknowledge and thank the Community Board Advisory Group (CBAG) for its leadership in shaping our engagement agenda since 2013. We are grateful for the involvement of many consumers and staff who have collaborated to improve healthcare in Metro North.

For more information and opportunities please visit: https://metronorth.health.qld.gov.au/get-involved

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An electronic version of this document is available at https://metronorth.health.qld.gov.au/get-involved

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Connecting for Health: Strategy for inclusive engagement, involvement and partnerships 2019–2021

Glossary

Person, family and community-centred care – healthcare that is respectful of and responsive to individual choices, preferences, beliefs, values and needs of people who access or who need to access care.

Patient – a person who is accessing health services. The term “patient” can be interchanged with “client”, “consumer” or “resident” depending upon the context.

Carer – an individual who provides, in a non-contractual and unpaid capacity, ongoing care or assistance to another person who, because of disability, frailty, chronic illness or pain, requires assistance with everyday tasks.

Community – groups of people with diverse characteristics who are connected through common location, attitudes, cultures and languages, ethnicities or interests. Individuals can be members of multiple communities at once. It describes the population of the area serviced by an organisation, a cultural group or a group of people who all experience a particular health condition.

Community partner – an organisation or representative of an organisation with whom Metro North partners to deliver connected care for individuals, families and communities.

Consumer – a person who is accessing or may need access to health services including their family and carers. Some consumers may become involved in health service planning, design or delivery based on an experience they have had, others may represent the interests of a group of consumers or they may represent someone from their support network such as a family member, carer or friend. How each person defines him or herself in their interaction with Metro North will vary according to factors such as age, gender, sexuality, cultural background, health needs and familiarity with the health system.

Consumer feedback – gives us insights into the patient experience. It includes our processes for managing and responding to complaints, compliments and suggestions in a timely, sensitive and effective manner and for improving services.

Co-design – joint creation of healthcare allowing consumers to be involved from conception phase of an initiative to detailed planning, design, delivery and review.

Digital transformation – Metro North has mapped out a digital transformation process from 2018 through to 2032. This will allow us to access the opportunities offered by digital innovation from real-time data and analytics through to precision medicine.

Directorate – refers to each of the following within Metro North: Royal Brisbane and Women’s Hospital; The Prince Charles Hospital; Redcliffe Hospital; Caboolture/Kilcoy Hospitals; Community and Oral Health; and Mental Health Services; Clinical Support.

Health advocacy

Individual advocacy – the act of representing the consumer, supporting the consumer to represent his or her own interests and ensuring people are empowered to voice their perspectives. This can include self, citizen, parent, family/group or peer advocacy.

Systemic advocacy – to introduce, influence or produce positive long-term changes to attitudes, systems, policies and procedures, to remove barriers, address discriminatory practices and to ensure the collective rights and interests of health consumers are attained and upheld.

National Disability Insurance Scheme (NDIS) – is the new way of providing support for Australians with disability, their families and carers. The NDIS will provide Australians under the age of 65 who have a permanent and significant disability with the reasonable and necessary supports they need to live an ordinary life. As an insurance scheme, the NDIS takes a lifetime approach, investing in people with disability early to improve their outcomes later in life. The NDIS will help people with disability to achieve their goals. This may include funded supports to facilitate greater independence, community involvement, employment and improved wellbeing. It is designed to give people with disability choice and control over how, when and where their supports are provided.

Health Alliance – is an approach to tackling health and health care problems in Brisbane North that transcends the mandate of any one organisation or part of the health sector, and that can’t be fixed by existing approaches. The focus of the Health Alliance to 2020 is on improving the health and wellbeing of three population groups – older people; people who frequently attend emergency departments, children in Caboolture.

Health literacy – enabling people to access and navigate health services, make well informed decisions and take action to manage their health and wellbeing. It includes helping people, find, understand and apply a range of information to be active participants in decisions about healthcare and treatment.

Patient experience – information from a patient on their healthcare experience. We seek to understand how patients experienced the healthcare that they accessed and identifies what we are doing well that we need to continue as well as what we need to stop doing and what we could do better. Patient experience measures can be quantitative (using scoring methodology) and qualitative (descriptions of experience). Both are equally valuable for service improvements.

Standard 2: Partnering with Consumers – the aim of this Standard is to ensure that health services are responsive to patient, carer and consumer input and needs. It is one of eight standards in the second edition of National Safety and Quality in Health Service Standards (November 2017).

Value-based healthcare - focuses upon empowerment, shared decision-making, understanding what matters to patients and delivering high quality care to optimise benefits. Value-based healthcare incorporates:

- better patient experiences and outcomes
- more efficient care
- improved health professional experiences in delivering care.

Values in Action – a Metro North initiative that makes our values of respect, integrity, compassion, high performance and teamwork more than words.
Foreword

Healthcare is about people.

To provide excellent care, we must ensure we're asking and listening to what people want from their healthcare.

Metro North has a focus on value-based healthcare which means we need to know what matters most to people. Connecting for Health provides a framework for ensuring the people we serve are at the forefront of our minds when we're designing and delivering care.

The Strategy will assist us to build on our strengths by involving consumers in the planning and delivery of high-quality healthcare. It acknowledges the invaluable role of patients, carers and families as members of the healthcare team to improve the health journey and provide connected integrated care.

Connecting for Health demonstrates our commitment to integrating consumer and community involvement in every aspect of the health journey and highlights the value of that involvement through better patient experiences and outcomes. We have achieved a great deal together and through Connecting for Health we will continue to be responsive to emerging needs within our community.

Thank you to the consumers and community partners who have helped us reach this point of maturity in consumer and community engagement and contributing to our goal to become Australia's biggest, best and nicest health service.

Dr Robert Stable AM
Chair
Metro North Hospital and Health Board

Mr Shaun Drummond
Chief Executive
Metro North Hospital and Health Service

Our services

Metro North Hospital and Health Service is Australia’s largest and most diverse public hospital and health service.

We provide care to a catchment of more than one million people in the northern Brisbane region.

The Health Needs Assessment describes the diversity within the communities we serve and guides our engagement processes.

Our 18,500 staff work across five hospitals, 14 community and residential care centres, 15 mental health centres and 27 public dental health facilities.

Our diverse health services include surgery, cancer care, maternity, trauma, medicine, mental health and more than 30 specialisation areas such as heart and lung transplantation and burns.
Introduction

Connecting for Health Strategy 2019–21 (Connecting for Health) describes our long-term commitment to engage consumers and communities in continually improving high quality healthcare. We will engage, involve and partner with a diversity of people in a respectful, compassionate and collaborative way.

We have demonstrated many service improvements through consumer and community involvement. Our engagement highlights and outcomes are documented in our Annual Progress Report for Connecting for Health.

Our engagement methods are numerous and varied - focus groups, online surveys, discovery interviews, workforce education, committee membership, project working groups, community expos, selection/judging panels, health journey mapping and many more. We have also continuously reviewed and evaluated how we engage to ensure the way we do this is always relevant and meaningful.

This second edition of Connecting for Health will focus on strengthening consumer and community engagement and further recognition of its contribution to improving patient experiences, person-centred care and outcomes.

Our values of compassion, respect, integrity, high performance and teamwork guide the way we behave and work with each other to deliver care with our communities.

Connecting for Health is guided by Metro North Strategic Plan and supported by several other strategies including Putting People First Strategy, Safety and Quality Strategy; Clinician Engagement Strategy; Health Service Strategy; Research Strategy; and Digital Metro North Strategy.

Connecting for Health requires commitment from our leaders and involves:

• our entire workforce
• our extended workforce including volunteers, students and contractors
• people who access or may need access to our services
• families or carers
• communities
• organisations with whom we partner to deliver care.

Factors likely to influence engagement activities over the next three years include:

• responding to increasing and changing demand as well as evolving community expectations of health services
• the increasing population and changing profile of diversity within Metro North’s catchment
• rapidly changing technologies
• renewal of infrastructure
• significant Commonwealth policy reform across Aged Care and Disability which includes the National Disability Insurance Scheme (NDIS)
• the shift in how we measure success of services to focus on the value of care in relation to patient experience and outcomes rather than the volume of care we provide.

“In the future, even more so than now, the consumer will be central to the delivery of equitable, effective and efficient health care planning and the delivery of connected and integrated care.”

– Professor Mary-Louise Fleming, Board member and sponsor for consumer and community engagement
Purpose of Connecting for Health

Connecting for Health sets a clear direction and course of action to empower consumers to be actively involved in their care and to embed consumer and community involvement in shaping our services.

Priority areas

Connecting for Health priority areas for action will focus on the impact and outcomes of engagement to:

1. **Build a culture** of person, family and community-centred care
2. **Include a diversity** of people and voices
3. **Improve** experiences and outcomes for people who access or need access to our services
4. **Collaborate** for a connected care experience and health journey for individuals, families and communities.

“I have been part of the Metro North journey in consumer and community engagement since joining the Community Board Advisory Group in 2013. Metro North has authentically sought advice to ensure consumers have a voice in improving the health system.

Embedding consumer perspectives in all aspects of the service has added value to individuals, families, health services and health systems. It is critical that this Strategy is genuine, truly engages and delivers for consumers. The journey is always ongoing.”

– Rachelle Foreman
Chair Community Board Advisory Group
Director, Support & Care, Heart Foundation
What we will do and how we will measure success

1. Build a culture of person, family and community-centred care

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<th>What we will do</th>
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<tr>
<td>• support consumers to co-design services and improvements in care</td>
<td>• leadership roles are recruited for engagement capability and values in action</td>
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<tr>
<td>• enable purposeful engagement through flexible practices and tools that</td>
<td>• engagement activities and their outcomes are documented and shared through multiple</td>
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<td>facilitate choice in how and when to engage</td>
<td>and varied mechanisms such as data repository and reporting, case studies, journal</td>
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<tr>
<td>• build shared leadership skills amongst our workforce, consumers and</td>
<td>publications and presentations.</td>
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<td>communities to encourage a culture of partnerships and inclusion</td>
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<td>• close the loop through actions that address improvements informed by</td>
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<td>feedback and lived experience</td>
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<td>• be recognised as a leader for outcomes co-designed with consumers</td>
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<td>and community.</td>
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“This role as a consumer with the hospital gives us an important role in the community to create understanding of the hospital system, its navigation, how to make yourself heard and appreciate the responsibility and stressors of an ever-increasing population to tend.”

– Margaret, consumer

 connecting for Health: Strategy for inclusive engagement, involvement and partnerships 2019–2021
2. Include a diversity of people and voices

**What we will do**

- deliberate and targeted engagement to improve our connection and partnership with diverse groups with equity of access, care we provide and support to live well in the community. Our focus will be on:
  - people who require advocates for decision-making and communication
  - Aboriginal and Torres Strait Islander people
  - people living with disabilities
  - people who experience social disadvantage living on low incomes
  - culturally and linguistically diverse communities (established and new and emerging)
  - people experiencing domestic and family violence
  - people who are homeless or vulnerably housed
  - people living with mental illness
  - people experiencing substance use issues
  - Lesbian, Gay, Bi, Trans, Intersexual and Queer/ Questioning (LGBTIQ)
  - older people, particularly those who may be frail or near end of life
  - rural or remote communities.
- build workforce capability to engage with, activate, understand and respond to a diversity of people and perspectives
- recognise, understand and seek to minimise barriers that some people experience when accessing health services and information by improving health literacy across the sector
- support choice in healthcare by empowering patients and their carers/families as active partners in their healthcare.

**What we will measure**

- The proportion of:
  - new health literacy initiatives involving workforce, consumers, carers, family and community
  - focused events and engagement activities that provide authentic ways to engage diverse populations.

“People are learning and passionate about getting involved.”
– Cody, consumer

“To me cultural diversity means empowerment, it’s a conversation which needs to be had. It’s about us learning from each other so we can grow not only as a service provider but more importantly as a community. It’s important to break stereotypes so let’s throw out the labels, ask questions and engage people and we will learn more than we ever imagined.”

– David Yohan
Metro North Cultural Diversity Coordinator
### 3. Improve experiences and outcomes for people who access or need access to our services

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<th><strong>What we will do</strong></th>
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<tr>
<td>• create environments where people feel confident that providing feedback will result in actions</td>
<td>• increase in patient experiences and consumer feedback captured and improvements implemented at service and system level</td>
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<tr>
<td>• monitor and respond to patient experiences and opportunities for improvement at service and system level</td>
<td>• co-designed activities that are documented or published</td>
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<tr>
<td>• use flexible approaches to monitor patient experiences for people from diverse populations who may be less likely to provide feedback</td>
<td>• feedback from engagement events and activities that is monitored and shared across Metro North to increase consistency in improving care for diverse populations.</td>
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<tr>
<td>• co-design action plans in collaboration with consumers in response to patient experiences to improve healthcare</td>
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<tr>
<td>• build capability for health literacy within our workforce, and for consumers, families and communities</td>
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<tr>
<td>• evaluate consumer and community engagement activities.</td>
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“One of the things I love about being involved as a consumer is that I can help make it easier for people, so that my experiences, my lived experiences, can be learnt from, and that processes that can be quite scary and new for people going through them, can actually be done better, explained better, and with people feeling they have more control...”

— Belinda, carer
4. Collaborate for a connected care experience and health journey for individuals, families and communities

**What we will do**

- innovate new health pathways through partnerships to create sustainable improvements for a connected care experience
- partner across the sector to engage consumers in the Health Alliance priorities
- embed consumer and community engagement in:
  - new services and models of care
  - redesigning settings and environments of care
  - research
  - innovation
  - value-based healthcare
  - health literacy
  - digital transformation
  - NDIS
- collaborate with community partners for a coordinated approach to community health literacy.

**What we will measure**

- new, integrated health pathways that are co-designed with consumers
- system reforms introduced by the Health Alliance that have been co-designed with community partners, consumers and community
- formal partnerships (e.g. Memorandums of Understanding) with community organisations and their outcomes are collated as case studies, journal publications and presented at conferences and forums.

“Communication and networking is critical – across consumers, community organisations and Metro North, as the commonality is patients... We’re all working towards the same goal.”

– Gary, consumer
Critical success factors
In delivering Connecting for Health we will focus upon:

Organisational culture and capability:
• putting our values into action
• monitoring and evaluating person, family and community-centred outcomes for healthcare
• an organisational culture that is open about its processes and performance and works closely with consumers and community organisations
• drivers and leaders of engagement at the executive-level and “from the ground-up”
• collecting and sharing examples of successful engagement and lessons learned
• improving reach and inclusiveness of engagement, focusing on who is not engaged and how to connect with them
• ensuring engagement is authentic and is an ongoing process and not a compliance exercise
• understanding that engagement requires lead-in time and good planning with resources and time dedicated to building trusting relationships.

Skilled, caring and engaging workforce:
• investing in a skilled and empathetic workforce with the ability to build trust and relationships
• a mindset of care and respect that values and empowers consumers as active partners in their health and wellbeing
• developing a workforce that has a strong appreciation for diversity including culture and languages and the need to ensure both are accommodated in delivery of inclusive services
• investing in volunteers to bring their perspective.

Consumer and community capacity and relationships:
• connecting with Health Consumers Queensland for support
• enabling consumers to develop knowledge, skills and experience that allows them to participate as partners to advocate for themselves and for others
• extending existing communication channels and platforms to connect and activate our workforce to link to our communities.

Issues and risks
By Connecting for Health, we aim to prevent or minimise the following issues and risks:
• at the point of care – compromising high quality, safe services and treatment when consumers and their carers are not engaged as active partners in their health
• at the service level – service design that does not consider local consumer and community experiences and needs resulting in misallocation of resources
• at the system level – poor sector capacity to work together to support consumers and communities in Metro North
• at a sector level - a disjointed health care system that is fragmented and poorly coordinated with inconsistent services that are difficult to navigate
• at a population level – widening disparities in health outcomes particularly for those with the highest burden of disease and risk factors.
Benefits of engagement

By involving consumers and communities, we expect the following benefits:

- removing the balance of power between healthcare consumers and healthcare professionals through generating mutual respect that results from a shared understanding of perspectives and enables collaborative decision-making
- understanding trends in consumer-directed care as well as diversity in choices depending upon a person’s values and beliefs
- greater opportunities for people who have first-hand experience as consumers to contribute directly to the design of healthcare and innovative solutions to complex issues
- holistic care that is respectful of and responsive to a range of personal needs, preferences and circumstances including cultural, spiritual, social, community and familial
- an engaged and supported workforce that values respect, compassion and empathy to build trusting relationships with diverse consumers and communities
- informed consumers who understand the changes required and see themselves as active participants and partners in making change
- a culture of working together across organisational boundaries to achieve greater efficiencies and improve the connectedness of services for consumers and community
- enhanced public confidence in the public health system and better use of government funding.
What does Connecting for Health mean for consumers?

1. Build a culture of person, family and community centred-care

As a consumer I can expect:

- to be supported to participate meaningfully
- to see how consumer experiences are shaping services and improvements
- to have the opportunity to work collectively and collaboratively on health service design, review and delivery
- a skilled, respectful, empathic and capable workforce that works collaboratively, constructively and transparently with consumers as partners and decision-makers in the design and delivery of healthcare
- Metro North to have strong and trusting relationships with consumers who represent a broad range of community perspectives
- Metro North to be a recognised leader in consumer and community engagement and provide many and varied opportunities for involvement.

2. Include a diversity of people and voices

As a consumer I can expect:

- that I, my family and community are integral to my healthcare journey and decision-making
- to feel empowered and respected and for my preferences, beliefs and experiences to be considered
- to feel empowered as an active participant in my own health and wellbeing
- health professionals who listen to and respect what matters to me
- my family to be involved as much as I want them to be
- when I am unable to advocate or speak for myself, other independent health advocates are engaged to be my voice
- Metro North to be an inclusive service that aims to facilitate engagement regardless of language, gender, sexuality, culture, age, caring responsibilities, social or financial circumstances, mental health, physical or intellectual ability.

3. Improve experiences and outcomes for people who access or need access to our services

As a consumer I can expect:

- to easily be able to provide feedback about my experiences
- to be confident that there are processes in place to respond to my feedback and to learn from my experiences in the understanding that healthcare is a shared responsibility
- my rights and the options available to me are explained in a way that I can understand, retain and can act upon with the confidence that I am making the best decision for myself
- to be invited and supported to participate in the design, review or delivery of health services
- to have the opportunity to engage in the manner that I choose suited to my interests and experiences
- to hear how my feedback made a difference in Metro North.

4. Collaborate for a connected care experience and health journey for individuals, families and communities

As a consumer I can expect:

- to experience connected services regardless of whether I am receiving care in the hospital, at home, or in the community
- to be provided reliable, accessible health information that I can understand and act upon
- to have a greater understanding of the health system and support services that are available to me
- to be able to return to my community with the opportunity to link up with other consumers or peer networks and social support services.
Who is responsible for ensuring we deliver on Connecting for Health?

Realisation of Connecting for Health is a shared responsibility involving the Metro North Board, executives, staff, volunteers, students, consumers and community partners.

As healthcare providers we all play a critical role in fostering a culture that values consumer and community participation to collaborate and shape the healthcare we deliver.

All staff have responsibilities for engaging consumers and communities. Engagement can occur at the point of care, in service planning, design, delivery or system level changes.

We rely upon the participation of a diversity of consumers, carers and community who are partners in making change.

Metro North leadership responsibilities

Board and Executive sponsors oversee progress towards Connecting for Health.

These sponsors have responsibility for ensuring appropriate governance, direction, resourcing and support at a system level to enable and achieve the priority areas for action.

The Board and Metro North Senior Executive Team are responsible for monitoring progress and compliance with the Hospital and Health Boards Act 2011.

Compliance with Standard 2 for Partnering with Consumers in the National Safety and Quality Health Service Standards is overseen by Metro North Executive Safety and Quality Committee.

Review and reporting

Connecting for Health will be reviewed annually. As part of this process we will monitor progress and report on each priority area.

The Metro North Executive and Board will monitor progress and make recommendations for advancement in collaboration with consumers and community.

References

1 Health Needs Assessment, Brisbane North PHN Metro North Hospital and Health Service 2016/17
2 Australian Commission on Safety and Quality in Health Care, Fact Sheet Partnering with Consumers Standard 2
3 Health Consumers Queensland, Consumer and Community Engagement Framework, February 2017
4 Health Issues Centre, Victoria