

Culture change through consumer engagement and partnerships,
Health Consumers Queensland

MARK TUCKER-EVANS: I'd like now to invite Melissa Fox, the chief executive officer of Queensland health consumers to introduce or secondary plenary session. It's an exciting snapshot of the consumer engagement that we've witnessed and supported across Queensland since 2015. But as Melissa will note, Health Consumers Queensland has been going since 2008 initially as a ministerial advisory committee and like to acknowledge those members of that committee who are in the room with us today, and with the funding of the Queensland Government over the last couple of years we've been able to deepen that work. So this is going to be a short, sharp presentation from both consumers and staff and members of the system so Melissa?

MELISSA FOX: I wish I could move this sign so you could see more of me! Thank you to all our staff and - sorry - turn the page, Health Consumers Queensland is blessed to have a team of staff who have experience in effective consumer engagement, either as consumers or health service staff themselves or in fact both. And they have passion. We wanted to provide this opportunity for each of our staff members to reflect on the significant changes highlights and challenges that they have observed or influenced in consumer and community engagement over the past two years since we became a funded independent organisation although we have existed in various forms since the 2008. Each of our staff members will then introduce a consumer carer or health staff member who will share their observations on the barriers and service improvements that staff and consumers have experienced on their journey in terms of effective partnerships. My role as CEO is to ensure that our hard working team of eight staff cover-

ing the whole state have the support resources and expertise to implement the mission, vision and strategic direction of our organisation. This includes each of us being living examples of the values of our organisation, leadership, having a positive impact, fairness, innovation, partnership, and perhaps most importantly, zing and zest. We also have a responsibility to ensure that we're maximising the impact of the significant financial investment that this State Government has made in our organisation. So that the Queensland health system can receive the most profound benefits of meaningful consumer and community engagement. As such, Griffith University is undertaking an external evaluation of the impact of our services with their initial report due in November. We hope that this will confirm what we hear anecdotally about the positive impact of our work but we will also embrace any learnings about how we can continue to improve the supports, strategic advice and training that we provide and there is a session at the end of today's concurrent sessions with some of the initial work done by Griffith University, I encourage you to attend that. Sometimes I'm in the privileged position of supporting projects which are working to transform not only services themselves but the long-term relationships between stakeholders. Two current examples are the Barrett commission of inquiry implementation project which you've just heard about and the Logan together community in maternal and child health hubs. Both involve staff and consumers being willing to trust, listen, codesign and realise a shared vision for a more person-centred delivery of health care. But I know from the current experiences that we hear and there are too many, from both staff and consumers, that there is still much work to do to ensure that every Queensland health consumer is guaranteed kind, compassionate, consumer-centred care. This will take a long-term culture shift and communication training with a focus on customer service and empathy. Many of the projects and issues that I support are triggered by a poor experience of care, either an issue of error or quite often poor communication. We need more consistency from health services around responsiveness, transparency, and an ability to demonstrate that the system has learnt from these mistakes. I provide our organisational expertise on a number of high level committees in areas including maternity, occupational violence, cannabis, NGO quality assurance and more. I regularly along with

our chairman and other staff members provide strategic advice on the issues concerning consumers and how to engage them to ensure and seek information in order to improve the health system and the department, the Minister's office, parliamentary hearings, the Australian competition commission on safety and health quality quality. I think this shift is based upon a desire for more transparency, accountability and informed decision making and an understanding that consumers have to receive services that aren't just clinically safe but feel safe to us and are also safe spiritually and culturally. The challenge is that despite this high level support, and a rapid increase in the amount of consumer and community engagement activity in this system in Queensland particularly, since the introduction of the national safety and quality health service standards, the consistency of resourcing and the depth and effectiveness of engagement across the system has varied. Our organisation has a vital role to play to reduce this variability and as such I would like to introduce Anne Curtis our project manager to describe the increased desire for staff to seek our assistance to build their engagement skills so that they can partner effectively and meaningfully. Anne Curtis, our project manager.

ANNE CURTIS: Good morning everyone. Just before I do, there's someone who I would like to introduce because she's always hiding. Such an integral part of our office, our very small staff and she pays us, and this is Nicole who is our office manager standing over at the door there. So you get to meet all our three project officers soon and our project support person Sue. I've been with Health Consumers Queensland now for two years and started in 2015 when we got our funding of \$2.6 million from Queensland Health and that's when our staff all started working so my reflections are that the key drivers were the national safety and health quality service standard, and the requirement for Queensland hospitals and health services to have consumer engagement strategies, over the last five years, there's been a rapid increase in the amount of engagement going on in activity within the health services. The support that we've seen in that time over those last two years has increased markedly so we've been able to provide training, we provide strategic advice and provide recruitment to consumers. So where two years ago we might have just had a few requests for training we now

have a training calendar that's got 30 trainings, work shops and webinars planned or that were already facilitated and we all them all coming online. We're a busy group of people. So the things though, that as we go around, we also seeing that consumers are given more and more opportunity to have a voice in the system and even at the a State-worldwide level which is fantastic, so for the first time this year as an example of what this is like up there right now, we're providing the graduate certificate in consumer and community engagement. This is the only accredited course in Australia. Queensland Health very kindly advertised this with my email address through their alert and we put it out through our e-news. I had a rainfall of emails come through one afternoon. They are still coming today, weeks later. Every day, there's such a reflection of the interest in this work across the state. A lot of these are coming from clinical staff, they might be HR staff, the staff all levels of the health services, of Queensland Health, department itself and I read every single email, just over 300 of them, and what they say is I know that course is booked out, can I please come because I'm about to start doing this work in my service area, we're about to start engaging with consumers, we're doing this work and we don't know how to do it better. It's fantastic to see that interest is really there at all levels, very encouraging. Our requests for our strategic advice, it's just growing all the time and we were just full on and also the recruitment of our consumers. Ultimately if I had one thing that I'd like to see happen in the health system, going forward, because we identify in our trainings, that there are barriers to inventing this work - embedding this work into health services. If we could break those barriers down, remove them, where this work become just a part of every day business for health services, then that is my one wish for the future. So now just to share these reflections on the last two years I'd like to introduce Stephen Stuart, the manager of the strategic policy unit at Queensland Health.

STEPHEN: Good morning. Thank you Anne. So Anne asked as per the program about what has happened in the last two years. In summary one thing that happens now is we start doing work - and I know this happens in other areas, and the question of how are you engaging consumers is asked. It's fair to say that hasn't happened as much previously and I think the examples like provided by Jeannine of in years gone past the

Barrett centre work wouldn't have happened in the way it is now with meaningful engagement. Just like to reiterate comments, each of these large scale projects, it's also important to note that day to day work, how much more consumer engagement is happening. A couple of the other departmental staff here provided examples of where that is happening, for example in e-health, providing representatives for various committees, IT and system upgrades and particularly in patient safety and quality programs to support conditions in delivering high quality safer care and also looking at patient safety and now are how we can do better next time. Also raising awareness to the executive, and health consumers collaborative, made up of representatives, consumers and executive of the department, sharing those experiences to engage with that level so they can direct work down through the department to better engage consumers. Often we're one step removed from the department. We work to support frontline staff to do the work of their services but the engagement of consumers Queensland has really helped to reduce that barrier, I think we're getting better at it. We still have a lot to do of course. The training that Anne gave was a perfect example of that and all the staff encourage you to attend that. Looking forward to further work with Health Consumers Queensland and consumers themselves to embed that in our work for ideally as per what Anne said, we'd like it to be the standard rather than something that we're looking to do better. Thank you.

ANNE CURTIS: Thank you. Jo is right up the back there. She's one of our project officers. Over to her.

JO SMETHURST: I'm a project officer and I work three days a week and I'm incredibly busy working three days a week to support the consumers in our State-wide network to build their capacity and confidence to do this really meaningful work with consumer partners. I work closely with Sue. Every week she is sending out emails, twice a week, you may get emails from us with opportunities for consumers to be involved in things, whether it's speakers at a conference or free conference registrations or attending four day forums or speaking to minutes at something or sitting on a state-wide working group that will be meeting for the next three years and when I started two years ago we would send those emails to our network in the ad hoc basis when we received

these requests. Tuesdays for new things, Friday is for reminders and absolute urgent requests so just know we are being mindful of us getting your emails but I also want to thank you for expressing expressions of interest for that every time we have a consumer request. We get lots of great people saying put your hand up. It takes courage, it takes heart, it takes a great degree of emotional intelligence to put yourself how there and sit as an outsider on a group often on your own speaking up and looking after the interests of consumers, so all of you who do that, I get teary, thank you from the bottom of my heart because you do make a difference and what you do is valuable and meaningful. Tasha is saying "don't cry" thanks. And consumers support each other. We keep monitoring each other, keep rubbing shoulders and backs and gives each other a bit of congratulation, you're doing a great job because sometimes it is challenging and sometimes we just need a little bit of love and comfort to keep on going. I am - that wasn't what I was going to say, I have notes and I haven't actually said what I was going to say but that's OK. The other thing is the reason that those requests are growing is because of the visibility of consumers because intelligent awesome people keep putting themselves out there, keep speaking up at plenary sessions like this, keep talking about love and compassion and talking about the needs of consumers and carers and people see that and go "oh, I want so and so at my forum." They contact us and will actually request "can I please have so and so?" We have a whole pool of people who are awesome, let's do an open and fair and transparent process so everyone gets a go. Thank you for being those Defence Forces for change because your visibility, your courage is creating opportunities for more people just like you to get up and do this as well so thank you. I know that was more than one minute. I would love to ask Liz Miller who does an awful lot of work with metro South partnering with Emma, so much so that she doesn't admit to her son what she's done on that day in case she gets in trouble... I'm going to hold the microphone for her. LISA: I would like to share a wonderful experience that I've had. When I was invited to take part in a business planning session with one of the hospital facility departments. This was a the first time that they'd invited an outsider in but they said that they were really wanting to hear the voice of the consumer so it was more than just a tonenistic effort of ticking a box to

say, "Yes we've had a consumer engaged with us." Of course I was delighted to get an invitation like that. But my first question to them was "what do you expect of me? How can I contribute really well and what can I do to prepare before hand?" That actually led to an invitation for me to come and meet with them in the week before hand with the team who were going to be facilitating that day so that I could find out who would be there, what their roles were and what part they wanted me to play. They really were so delightful because they said, "How can we accommodate your needs?" I said, "You know everybody else in the room, but of course I'll be the stranger who doesn't know a single face." They said, "We can all wear badges" they gave me a list of who was there and what was their role, I felt a lot more confident about walking into that room and comfortable that when I was speaking to somebody I'd actually know their name. I should add that they gave me this huge slab of information to read and I thought I wouldn't get any sleep for the next few days but I did ask them how I could best prepare. So the planning day came and went and it was an amazing experience of being involved with a group of people who really wanted to hear, how could a consumer have some input into what they want their future to look like. Some of the questions I was able to ask were was at appropriate times I'd say, "You're talking about moving from the traditional medical model of providing care to being more patient and family-centric, how are you going to do that? What will that look like on a daily basis and how will you know that you're achieving those outcomes? Or when you collect feedback and data about patient experience, how are you know if you're getting information about what is important to patients about their care and how will that be reflected in your analytics, will you value the qualitative information as much as the qualitative because that's the traditional research method. You have to do everything as a randomised control trial and that's the way they've been taught. There needs to be a shift towards really valuing and appreciating what the consumer voice has to contribute to health care in general. As I reflected on that experience I thought there were a few principles here that are really important in any constructive consumer engagement activity and indigenous as a consumer level for us we need to find out what's expected of us as be as well prepared and informed before hand as we can be, we should

be reading widely, finding out what other people are doing in other parts of the world so we have some solutions potential solutions to bring and not just issues and problems to the table. We need to also think globally in terms of the big picture, because sometimes we get bogged down in our particular experience and what that's meant for us or our family or friends that we've had, but I think we also need to remember that health care's provided by people who are generally caring but who often work in a complex and difficult environment and a system that's often slow to change. Then at the organisational level, I think it's really nice to be welcomed into a meeting and to be introduced to people and to have them say introduce you as somebody who has got something important to say and organisations can smooth the way, like this group did for me, by making sure that it's a mutually beneficial interaction. I think they also can help us to come prepared by providing information before hand, making sure that we're included in emails distributed to the rest of the team so you don't get there and find out that everyone else has some information ha you weren't given prior to the meeting because that makes you feel left out, and I think that we need to also remember that the ultimate aim is to envision and find collaborative solutions for a safer and better way of delivering health care to every patient every single time. That's what everybody should be working together. To round off my minute, probably two minutes now - I just want to finish off with some wise and encouraging words from an amazing Canadian consumer volunteer who says "participation and activism in health care is truly an act of citizenship. Every door can open, you just need to open it a little and let the patient voice in, if you give it a try and respectfully learn all you can and look for opportunities you are able to have an influence." Thank you.

APPLAUSE

JO SMETHURST: See what I mean about this courageous consumers on the network? I didn't give Liz much warning that I was going to call on her to have a chat with everyone and thank you so much Liz, your wisdom and everything, you've just written our

guide for consumers! And now I'd like to introduce you to Reema, another project officer at health consumers officer, our newest member of staff and we've thrown her in the deep end giving her a microphone this morning.

REEMA NARESH: Yes I am the most recent addition to this amazing dynamic and very small team. I come from the island nation of Fiji and my heritage is Indian. In my culture and my tradition, we spend a lot of time learning from our old stories and trying to understand where we come from which allows us to understand where we need to be right now which gives us perspective on where we need to go and my first three weeks of being with Health Consumers Queensland I heard a lot of stories from all the amazing consumers I got to meet and each consumer has an amazing story to tell and for me consumer engagement is all about hearing these stories and listening really well to them. Because I have been very short in this path, in this group, I'm going to reflect to you a story or my experience of consumer engagement in my previous role. In my previous role I worked as a health worker for children's health Queensland in an amazing program called the Good Start Program. In this program, consumer engagement happened in an amazing way so the staff that were recruited so as their multicultural health worker I was recruited to work with Fiji and Indian community and in the same way we had Tongan health workers, Papua New Guinean health workers and all the communities represented and this meant we were able to connect really quickly with the group that we needed to work with. This allowed us to have conversations with them and certainly lots of stories were exchanged and we were able to produce programs and resources that were really tailored to this group. This kind of work is happening and it's really wonderful to see that and I'm pleased to let you know that one of my colleagues from my good start team, Kirsten Kira is going to be presented today on one of these amazing programs on maternal health so do check out her program. The other thing I want to quickly share is a barrier that sometimes I often hear in department, having worked in Queensland Health is that culturally and linguistic people don't connect with services and I guess what I want to say about that is that if you get us on board and help us to co-design things we'll be right there with with with you. I look for-

ward to sharing my experience of working with cultural and linguistically diverse people and in the land I come from and to share with each of you to help you with consumer engagement and during the break come and say hi and meet with me so I can get to know you better and now it's my pleasure to introduce Jo, a person-centred lead for the Townsville health service.

JO SMETHURST: One of my roles has been to establish the consumer engagement program across the health service over the last couple of years. With the conception of our mental health service this has been quite new for most of our staff and when people ask me to think about what's been happening in the last couple of years a quote from a lady called Myer Angela came to mind "when you know better you do better." I think that sums up what it's been like for us in the last couple of years is that it's been a journey and it's been a journey that's required a lot of patience and if you ask my husband I'm not a very patient person, I'd like change to happen tomorrow. We're working with complex health systems that's not the way it works I've had to be very patient and the consumers on this journey have had to be as well as we take steps towards embedding consumer partnership into our organisation. One of the things really important as one who likes to see change happen quickly, I had to learn that's been really important both from a staff perspective and from a consumer perspective to ensure that those experiences are partnership positive, to take it at a pace where we are ensuring that consumers feel safe and that staff feel safe in that process. Being able to pace it in a way where the organisation is ready to embrace consumer partnership has been really important and it's been an important lesson for me to learn. A couple of years ago, in 2014 I had some conversations with staff members and I mentioned about having consumers on recruitment panel and at that point there was a gasp in the room like that was something they'd never heard of before. I think that's a long way in a couple of years, the culture has shifted once people start working with people in their organisation, sometimes the barriers are time and patient for people to move forward. - sometimes the barriers are time and patience for people to move forward. I'll now introduce Chelsea to you, a project officer.

CHELSEA GOURGARD: Make this short and sweet. As Reema said my name is Chelsea and I'm one of the project officers at Health Consumers Queensland. On my reflection we've continued to work with the primary health networks and private hospitals from across the State. And they have continued to strengthen the way we partner with consumers and the community this way that is real and authentic. Great to see how many PHNs are creating innovative ways to engage with consumers for example, central Queensland Wide Bay and Sunshine Coast PHNs are presenting today, you'll hear how they have heard from consumers and carers about the ways they wanted to partner with them. Ratepayer making the assumption about what was going to suit their consumer and carers. Others are also showing how comfortable they are partnering with consumers by thinking about the ways in which to measure the effectiveness of the organisation's consumer engagement and we've also provided both work shops and training to PHNs and private organisations across Queensland. Thank you.

APPLAUSE

NAOMI: I want to cover off the points that have already been made. As a PHN as commissioners of local service needs in primary care we are really focussing on developing a framework that enables consumer and carer needs to be embedded and heard as every day business. At Brisbane North we aim to include it across our form assessment, so not just in delivery but throughout the entire process. Some of the opportunities we're focussing on addressing are increasing cooperation with our Metro North NHS but working with the whole sector to develop transparent and effective models for true partnership to address the complex social health needs in our communities. Taking the lead from our excellent mental health sector work to promote and enhance consumer engagement across the primary health sector more broadly we're proud of the efforts of our consumers and carer reps in the mental health safe who have spent years advocating for advanced support opportunities to ensure the services which they access to designed to meet their needs. I light light the members of our network here

with us today but also all of the consumer and carer representatives in the room today and ask them to take back to those networks that you work with as an engagement professional this is your work and your professionalism and your positive attitudes that you bring to the room that make it so easy for to us volcano to broadly engage across the health sector. Congratulations to you all.

APPLAUSE

MELISSA FOX: Thank you to all of our staff and the speakers for sharing your reflections. We'll continue to celebrate the positive shifts and your achieve achievements, what's important is that Queenslanders expect to be involved in our own care and improving the health system. Beyond next year's forum and beyond the end of our three year contract in June of next year, we're hopeful that a continuation or maybe even an increase in our funding would ensure that consumers and the health system can continue to benefit from you working together to tackle the challenges of our hell system, additional investments on top of our current funding would provide greater ability for us to be able to support rural and remote communities in your own communities, increased ability for to us respond to every increasing requests and proactively targeting those health services most in need of support and also being able to have more capacity to support health services to evaluate the impact and the benefits of their engagement activities. We look forward to continuing to support your work and reflect on more of your achievements. If you're not a member of our email network please do join so that you can get those emails that Jo talked about and we can learn from what you're doing. Before we break for morning tea, I would like to take the opportunity to thank all of our incredible team, not just for sharing their learnings with us now, but also again in creating today's inspiring and successful event, this time for us we'll be able to challenge of being in a regional city which also brings so many benefits. All of the teams have pitched into informing the program but our main thanks really go to Chelsea for building on the last year including to listening to all of your feedback so I

wanted to take the opportunity now to thank Chelsea for all of your hard work in making today a success.

APPLAUSE

And thank you too to Nicole and Sue, if you could come up here, for all of your help for making it possible for all of the consumers to be here, who we provided you with travel and accommodation support, for providing weeks of administrative and organisational support. We're really so grateful to have all three of you in our team.

APPLAUSE

Is Sue here? Outside? So please apologies that we're running a bit late. We will attempt to stick to time and come back here in this two concurrent can sessions. Please join us for morning tea, networking and visiting the learning pods in the foyer and we hope you enjoy the rest of the day.