

An Australian Government Initiative

# Stakeholder **Engagement Framework**





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Introduction	
Purpose	
CESPHN's external stakeholders	
Engagement objectives	
Engagement principles	
Engagement strategies	
Commissioning Framework	
Engagement model	1
IAP2 Public Participation Spectrum	
Stakeholder engagement events	1
Communication channels	14
Governance structures	10
Measuring outcomes	18

# Introduction

Central and Eastern Sydney Primary Health Network (CESPHN) engages with a diversity of stakeholders to achieve our organisation's vision of healthy and thriving communities.

CESPHN recognises that meaningful engagement with primary health practitioners, other health and social care services and consumers of health care services is essential to improving and transforming primary health care.

We are guided by CESPHN's <u>Strategic Plan</u> which outlines four strategic goals:

- Address community health and wellbeing needs
- Facilitate connected and quality care
- Demonstrate leadership for the central and eastern Sydney region
- Achieve organisational excellence

Purposeful engagement is essential for CESPHN to achieve these strategic goals.

# **Purpose**

This Stakeholder Engagement Framework outlines how CESPHN engages with stakeholders and provides guidance for CESPHN employees.

## This framework:

- Defines CESPHN's engagement approach and purpose
- Identifies CESPHN's key stakeholders
- Outlines CESPHN's methods of communication, engagement and participation
- Enables a consistency of approach across the organisation



# **CESPHN's external stakeholders**



## Community

CESPHN engages with community members, consumers, carers and people with lived and living experience through their involvement on Community Council, advisory groups, working groups and as participants in the co-design of services and programs. Community members can register to be involved in consultations through Voices4Health.



## **Community organisations**

CESPHN works closely with a wide range of community organisations through both its Community Council and advisory groups as well as through commissioning community organisations to deliver services.



## **Healthcare professionals**

CESPHN engages extensively with GPs, general practice staff, allied health providers, specialists and other health, disability and aged care providers. Our engagement is broad and can include information provision, practice support visits and education sessions. The CESPHN Clinical Council comprises of primary care clinicians and representatives of local health districts and networks.



## **Member organisations**

CESPHN has seven member organisations that include five general practice companies, an allied health network and a community services/community member network. The member organisations elect directors to the CESPHN (EIS Health) Board and their chairs meet quarterly with the CESPHN Board Chair and Executive.



## **Local Health Districts and Specialty Health Networks**

CESPHN partners with Sydney and South Eastern Sydney local health districts, St Vincent's Health Network, Sydney Children's Hospital Network and Justice Health. Joint executive committees meet quarterly to drive progress against common priorities. Together we work towards joint planning and health solutions to avoid duplication and improve effectiveness for the common populations we serve.



## **GP** representatives

CESPHN supports GP representation on hospital clinical councils to foster partnerships between primary and acute health care. GP representatives share CESPHN updates with the councils and reports on key points and recommendations after each meeting.



## **Government and funding bodies**

CESPHN engages with Commonwealth, state, local government, members of parliament, ministers, government departments, philanthropic organisations and corporate entities. These engagements often concern advocacy, funding and working in partnership.



## **Other PHNs**

CESPHN works closely with other PHNs as part of NSW and ACT PHN networks, and national PHN committees and Communities of Practice.



## **Universities**

CESPHN engages with universities on many projects, committees and multi-stakeholder initiatives and supports specific research.

# **Engagement objectives**

- Increase awareness and understanding of CESPHN's work
- Build credibility and trust
- Provide opportunities for stakeholders to influence decisions made
- Build strong collaborative relationships
- Provide accessible health and service information
- Promote patient-led care

- Commission appropriate and responsive services
- Advocate for the community's health needs
- Provide high-quality education to primary health care practitioners
- Build the capacity of primary health care
- Report to funders
- Support relevant research

# **Engagement principles**

The following principles guide CESPHN's engagement:

- **Respect:** CESPHN values stakeholders as experts.
- Mutual benefit: Engagement should be mutually beneficial and meaningful to both CESPHN and the stakeholder.
- Transparency: CESPHN is transparent about the level of influence participants' engagement

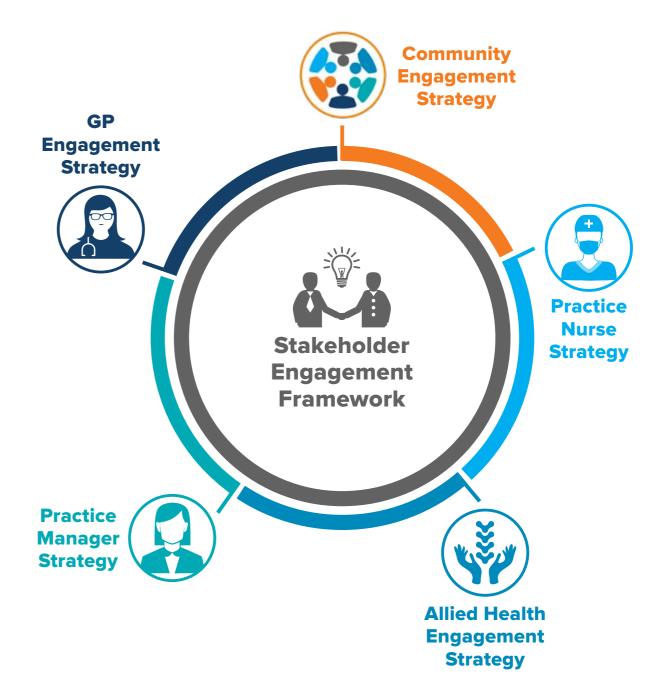
will have on the outcome and keep participants informed of outcomes of engagement.

- Inclusive: CESPHN values and aims to include diverse voices, including those with lived and living experience.
- Ethical: CESPHN is committed to providing fair remuneration for consumer and health care professional involvement in engagement.

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# **Engagement strategies**

Further detail on how CESPHN engages with key health stakeholders is outlined in the following specific engagement strategies.



# **Commissioning Framework**

Alongside the above engagement strategies the <u>CESPHN Commissioning</u> <u>Framework</u> outlines CESPHN's engagement with service providers.

# **Engagement model**

CESPHN draws on the IAP2 Public Participation Spectrum to understand the level of participation of stakeholders in any PHN engagement activity. The Spectrum shows a range of engagement along a continuum. None is better than another, it is about having a conscious and transparent understanding about the level of stakeholder engagement related to each activity, understanding the level of stakeholder influence, and whether communication is one-way or two-way communication. The type of participation depends on the goals, timeframes, resources and appropriate role and responsibility of the PHN in the decision to be made.

# **IAP2** Public Participation Spectrum

## **INFORM**

To provide stakeholders with balanced and objective information

# **CONSULT**

To obtain feedback in order to make decisions about health service information, service delivery options, project design, etc.

## **INVOLVE**

To work directly with stakeholders throughout the process to ensure their concerns are consistently understood and considered

## **COLLABORATE**

To work with stakeholders in each aspect of the decision including the development of alternatives and the identification of the preferred solution

# **EMPOWER**

To place the final decision making in the hands of stakeholders

Method of engagement	Inform	Consult	Involve	Collaborate	Empower
Consultation The way CESPHN consults with stakeholders varies according to the need and stakeholder group, and can include targeted surveys, focus groups, interviews, etc	<b>✓</b>	<b>✓</b>			
Co-design Co-design involves stakeholders in the development of new services or where community-informed solutions can help to solve complex challenges	<b>\</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	
Interagency meetings CESPHN staff attend regional interagency meetings to build our knowledge of local health and social issues. Through these forums we contribute to addressing the social determinants of health and communicate the work of CESPHN. CESPHN facilitate some networks, such as the Disability Network and the Aboriginal Workers Circle.	<b>\</b>	<b>✓</b>			
Continuing Professional Development  The education program is developed annually by working closely with GPs and allied health professionals and identifying their learning needs. The CPD topics are determined through a collaborative approach with an Advisory Committee and evaluation and feedback from previous events	<b>\</b>	<b>✓</b>			
Peer group learning The Peer Group Learning program is a professional development avenue for primary healthcare professionals in the region. This format provides in-depth understanding of an area or topic and allows health professionals to share their own experiences and knowledge with peers in a safe setting		<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>\</b>
Practice Support and Digital Health  Through trusted relationships and two-way engagement, CESPHN supports primary care providers to deliver high-quality, coordinated and digitally enabled care.  The Practice Support team engages with practices on a quarterly basis through structured visits, providing tailored advice and support around accreditation, uptake of Practice Incentive Payment Quality Improvement (PIP QI) initiatives and continuing professional development.  The Digital Health program works collaboratively with providers to strengthen digital capability and drive adoption of My Health Record, secure messaging, referrals and electronic prescribing					

# Method of engagement

Stakeholder engagement events	Inform	Consult	Involve	Collaborate	Empower
Annual strategy workshop Relevant stakeholders share insights and feedback, helping shape CESPHN's strategic direction on particular issues	<b>✓</b>	<b>✓</b>			
Annual Primary Health Awards  The Awards recognise primary health care professionals and organisations' initiatives that provide an exceptional service, an outstanding contribution, or a quality improvement to primary health care in Central and Eastern Sydney	<b>✓</b>				
Thrive Together Forum  A one-day forum where staff working in mental health, alcohol and other drugs, and suicide prevention services can exchange expertise and information about the innovative programs and initiatives shaping mental health care in Central and Eastern Sydney	<b>✓</b>	<b>✓</b>			

# **Method of engagement**

Communication channels	Inform	Consult	Involve	Collaborate	Empower
CESPHN website  Curated information for three stakeholder groups – GPs, allied health and community	<b>✓</b>	<b>✓</b>			
Social media (X, Facebook, Instagram, YouTube and LinkedIn)  Provide health and service information in a quick accessible and interactive way	<b>✓</b>	<b>✓</b>			
Thrive Together Forum  A one-day forum where staff working in mental health, alcohol and other drugs, and suicide prevention services can exchange expertise and information about the innovative programs and initiatives shaping mental health care in Central and Eastern Sydney	<b>✓</b>	<b>✓</b>			
Sydney Health Weekly Provides key health information, upcoming training and community resources to 10,000 primary care professionals	<b>✓</b>	<b>✓</b>			
Program-specific enewsletters Immunisation, Antenatal Shared Care, EORA - Aboriginal Health and Wellbeing, Alcohol and Other Drugs, Continuing Professional Development, Aged Care,	<b>✓</b>	<b>✓</b>			
CESPHN Update  Monthly publication that provides the latest information about services and updates related to primary health care	<b>✓</b>				
Service Directories  CESPHN provides an extensive directory to assist people to find the health or wellbeing service they need. Service providers control the information they provide	<b>✓</b>	<b>✓</b>			
Community information sessions	<b>/</b>	<b>✓</b>			

# **Method of engagement**

Governance structures	Inform	Consult	Involve	Collaborate	Empower
EIS Health Board	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>√</b>
Member companies	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>✓</b>	<b>√</b>
Clinical Council and Community Council	<b>✓</b>	<b>✓</b>	<b>✓</b>		
Advisory groups and working groups	<b>✓</b>	<b>✓</b>	<b>✓</b>		

# **Measuring outcomes**

CESPHN monitors and evaluates all stakeholder engagement with the aim of continuous improvement.

The following are some of the approaches used to measure outcomes, more details on outcome measures are included in the specific strategies for each stakeholder group.

- Request feedback from stakeholders
- Annual stakeholder engagement survey
- Online engagement feedback opportunities
- Evaluation of CESPHN
   Continuous Professional
   Development education
   and event

- Evaluation of GP practice engagements
- Social media, newsletter and website analytics
- Compliments and complaints received
- Annual reporting of specific engagement strategies to the Board
- Stakeholder-informed metrics (stakeholders help to define what success looks like)
- Outcomes and recommendationsfocussed evaluation (quantitative, qualitative)
- External evaluation of programs where relevant or appropriate
- Discussions/recommendations from Clinical and Community Councils



