

Examples of Participation

SWSAHS Community Representatives Network

The Community Representatives Network is an autonomous body of community representatives that is resourced by SWSAHS. The Community Representatives Network was established to enable representatives to discuss issues and support one another in their role as representatives. The Network also provides an organised way for SWSAHS to keep in contact with its Community Representatives. The Community Representatives Network comprises a group of people in local communities who work with SWSAHS in developing its consumer and community communication and participation structures. Individuals who reside within the boundaries of SWSAHS are eligible for membership of the Network.

The Network has an executive group that is known as the SWSAHS Consumer/Community Council (CCC). The SWSAHS CCC consists of sector representatives and support staff. There are 3 sector representatives nominated by each sector network. Those representatives must be community residents. One of those representatives is an alternate delegate who attends each meeting as a non-voting member. Support Staff include the Area Manager of Community Participation, Sector Coordinators and other support staff. Support staff are non-voting members.

The Network held its first planning day in 2002. Membership of the Network continues to grow with 190 current members.

Emergency Department Tours & Information Sessions at Bankstown-Lidcombe Hospital

Tours and information sessions for community members will be conducted within the Bankstown-Lidcombe Hospital Emergency Department from February 2004.

Community representatives and members of various non-government organisations will be trained with the skills required to lead the tours.

The tours will provide participants the opportunity to book into specific language group sessions including Arabic, Vietnamese and Greek languages. Aboriginal workers will also organise tours for the Aboriginal community. Tours will be conducted weekly providing there is a demand and tour leaders are available.

Information sessions will involve the showing of a 10-minute video about emergency departments, a brief talk, then a tour around the Department. Refreshments will be served at the end of each tour and a member of the Emergency Department staff will be available to answer questions.

Participants will also be asked to complete a questionnaire to help improve the sessions and identify other types of information they would like to receive.

Examples of Participation (continued)

Macarthur Health Community Council (MHCC)

Macarthur Health Community Council is an independent body made up of local people who take an active interest in the Macarthur Health Service. It first met in December 2002.

The establishment of the Community Council came out of a comprehensive 12-month consultation process involving consumers, carers and other community stakeholders. A group of interested consumers, community members and key health service staff subsequently developed a community participation model central to which is the Macarthur Health Community Council.

The Council consists of 18 community members and 7 members of the Macarthur Health Service Executive Team. It meets regularly to advise and work with Macarthur Health Service on policy, planning, service provision, safety, quality of care and accreditation. The Council has 4 main roles:

- to advocate for community involvement in Macarthur Health Service;
- to act as an advisory council to the Macarthur Health Service Executive;
- to be a strategic link between the Macarthur community and Macarthur Health Service; and
- to monitor the commitment of Macarthur Health Service to be honest, open and transparent to the Macarthur community.

The Community Council has links with, and representation on, the other primary governing bodies of Macarthur Health Service including the Clinical Advisory Council, the Finance Executive and the Quality Executive. A number of working groups and consultative committees report directly to the Community Council. Priorities for the Community Council for 2004 include:

- the development of a communication strategy between the Macarthur Health Service and its communities;
- the creation of guidelines for developing consumer-friendly resources; and
- the continued involvement of community representatives in the audit of consumer complaints management processes.

SISTA ACT

SISTA ACT is a community development project working with female injecting drug users who are street-based sex workers in the Cabramatta area. The project is collaboration between Cabramatta Drug Health Service (formally known as Drug Intervention Service Cabramatta) and the Sex Workers Outreach Project (SWOP).

SISTA ACT began after a request from local sex workers for a group where they could come together to discuss relevant issues and develop skills and knowledge. Sex workers were contacted through outreach services and asked to identify their needs. Stage 1 of the project began in 2001 and involved the development of a weekly meeting group. Staff facilitated this group, which covered topics such as sexual health, drug use, personal safety, legal issues and self-defence. Four local sex workers were trained as peer educators and employed to provide education and support to other participants.

In an evaluation at the end of stage 1, participants identified a need to continue meeting. Stage 2 of the project involved outings, art activities and more sessions concerning self-care. During this stage, a peer educator was included on the SISTA ACT Advisory Committee. Staff and group participants have identified the need to extend the group to women with current or past drug issues who do not necessarily identify as sex workers. During the next twelve months the group will expand in this way, with the continuation of peer based street outreach.

The SISTA ACT project has accessed more than 89 sex workers. Its success derives from the inclusion of consumers from the outset and development of partnerships between services.

Examples of Participation (continued)

Supporting Nurses to Involve Consumers in Their Health Care

This project was commissioned by the Australian Nurses' Federation (ANF) and Royal College of Nursing Australia (RCNA). Its aim was to examine barriers to the development of nurse-consumer partnerships in the acute healthcare context. The project sought to identify strategies that support nurses to involve consumers in their healthcare at both individual and service levels. The project occurred over an 8-month period during 1999-2000 and was managed by a committee comprising members from peak nursing organisations and consumer representative organisations.

Workshops were conducted to collect data relating to nurse-consumer partnership issues. The workshops were designed to:

- raise awareness of the benefits of partnerships between nurses and consumers;
- identify issues related to the maintenance of partnerships;
- collect examples of best practice nurse-consumer partnership experiences; and
- identify strategies to support nurses to involve consumers in their health care.

Results from analysis of pre and post workshop surveys of nurse's attitudes to nurse-consumer partnerships demonstrated a strong belief in, and commitment to, the notion of partnership. Both nurses and consumers identified a large number of best practice examples. Consumers strongly identified the way in which information was conveyed between health professionals to patients as important to best practice. In many of their best practice examples, nurses referred to effective communication and establishment of nurse-client relationships based on trust and consumer empowerment as determining factors for successful partnership outcomes.

Strategies to support nurses to involve consumers in their health care were categorised under headings. Communication and specifically the transfer of information were again identified as important issues.

The project produced a report that recommended the strategies identified be made widely available to health professionals and the best practice scenarios be used as a basis for the development of best practice guidelines.

Information sourced from: Australian Nursing Federation, 2001 *Project to Support Nurses to Involve Consumers in Their Health Care*.