# COMMUNITY ENGAGEMENT FRAMEWORK

your COMMUNITY HEALTH

With thanks

The Community Engagement Framework was developed in partnership. Special thanks are extended to Your Community Health's Consumer Advisory Committee, the management team at Your Community Health, and the Capability and Impact directorate for your guidance and insights. Thanks are also extended to the staff, consumers and volunteers who participated in the staff planning day in October 2022 you helped paint the picture of where community participation and engagement was and where it should go.
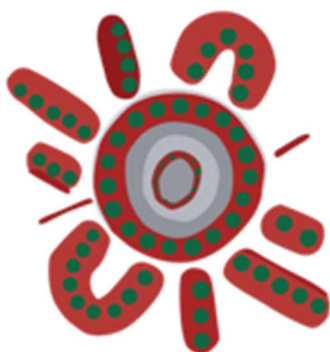
Acknowledgement of Traditional Custodians

We acknowledge the Traditional Custodians of the land on which our organisation is located and where we conduct our business, the Wurundjeri Woi Wurrung people of the Kulin Nation. We recognise their deep connection to land, waters and culture and are dedicated to honouring their traditions. We pay our respects to Elders, past, present and emerging and acknowledge that sovereignty was never ceded.

Statement of inclusivity

We are committed to providing an inclusive and accessible environment where people and communities of all identities and backgrounds (including but not limited to, ethnicity, faith, socio-economic circumstance, sexual orientation, gender identity, ability, bodies, migration status, age and Aboriginal and Torres Strait Islander descent) are accepted, safe and celebrated.

Contents

1. A note on language

Language can be powerful. Sometimes there are no single set of definitions to describe how people experience their health and wellbeing or how they define themselves. The same language can sometimes empower and embolden some, whilst stigmatising and diminishing others.

This document has chosen to use the umbrella term '*community*' to include people who have an interest in Your Community Health (YourCH), whether they identify as a client, consumer, potential user of the service, carer, family member, someone with lived experience, volunteer or interested citizen. Arriving at a single term for the purposes of this Framework does not intend to reduce or replace language that is favourable to you, but rather aims to unify under one term.

The language used in this document aims to be inclusive and respectful, but it also acknowledges that not everyone will agree with the terminology chosen. There is diversity in personal experiences of health and wellbeing, and there is diversity in how various services use and apply language.

Further, YourCH operates across multiple health and community service domains, and the language can change. For example, a clinician can talk about a patient, client or consumer and all are meaning the same person, whilst those using the National Disability Insurance Scheme will see the term 'participant' to signify themselves.

2. Who is our community?

YourCH sits within the City of Darebin and most services provided overlap with these boundaries. However, YourCH's Trans and Gender Diverse in Community Health (TDGiCH) and vaccination programs are state-wide.

Below is some key information on YourCH clients and the broader community.

YourCH
17,664 clients

DAREBIN
150,335 population

FIRST NATIONS PEOPLES
YourCH 1.7%
DAREBIN 1%

BORN OVERSEAS
YourCH 36.9%
DAREBIN 31.4%

LOCATION

YourCH
29.4% postcode 3073
East Reservoir
Reservoir
North Reservoir
Keon Park

DAREBIN
In Darebin areas of disadvantage are in pockets of the municipality, including most parts of Preston, Reservoir, Kingsbury and around Northland

TOP FIVE LANGUAGES

YourCH	DAREBIN
ARABIC	GREEK
GREEK	ITALIAN
MANDARIN	MANDARIN
VIETNAMESE	ARABIC
ITALIAN	VIETNAMESE

IDENTITY

YourCH 4.3%
YourCH 53.5%
YourCH 42.2%

VICTORIA 1.1%
DAREBIN 48.6%
DAREBIN 51.4%

Data extracted from the Quality Account and Annual Report 2021-2022[i], Census data 2021[ii] and the health and wellbeing of the lesbian, gay, bisexual, transgender, intersex and queer population in Victoria.[iii]
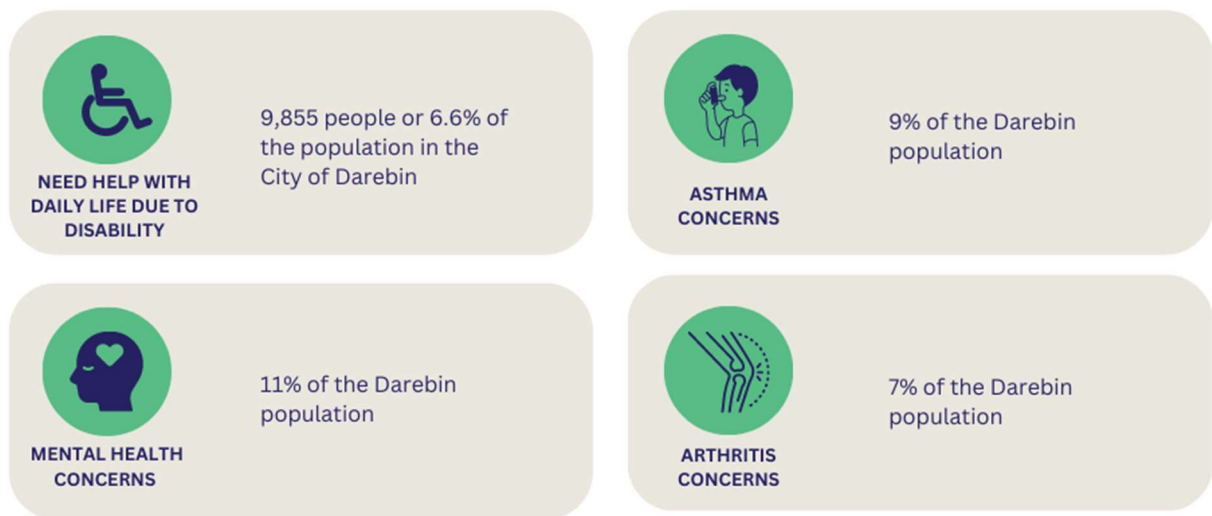
Data extracted from Census data 2021.[iv]

The community at YourCH is diverse. In particular, YourCH has a long history of prioritising and working with the communities outlined in Figure 1.

Figure 1. Priority communities of YourCH
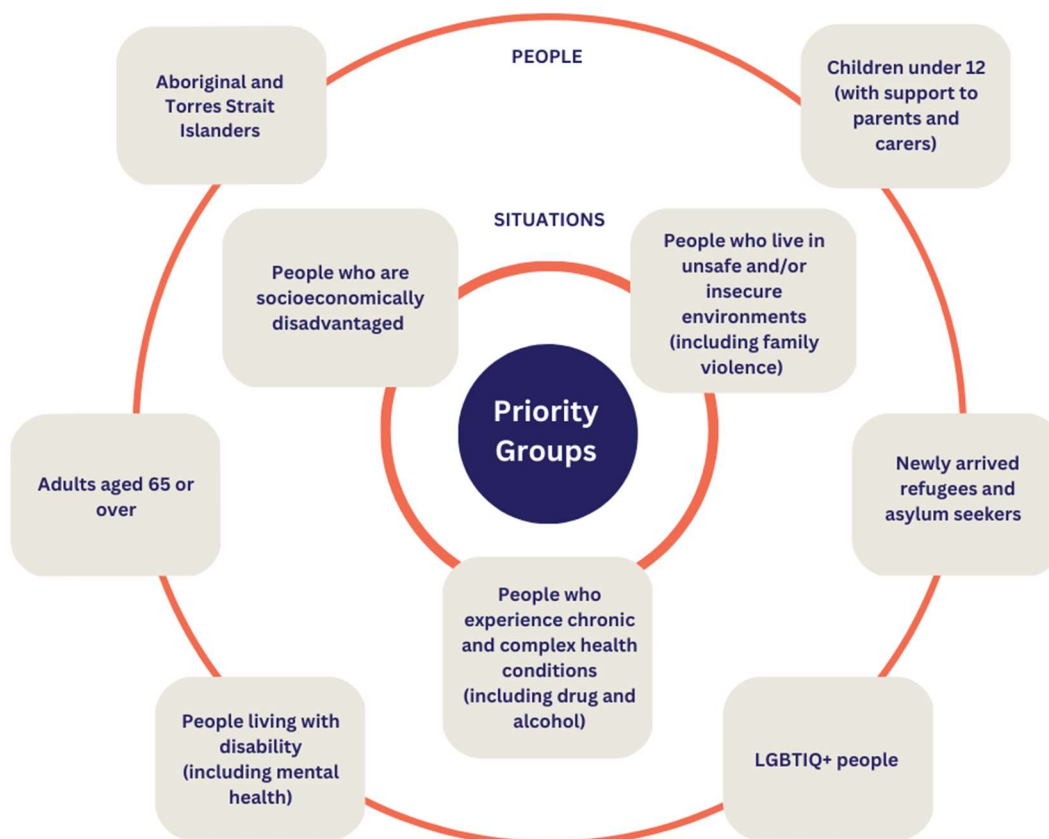
3. Definitions

There are some terms which can be viewed in multiple ways or carry multiple meanings. To assist the following definitions are used:

- Community – refers to people who have an interest in YourCH including those with lived experience or consumers such as clients, carers, families; volunteers; community advisory committee members; potential users of the service; and, other interested community members and partners
- Community engagement (also known as consumer participation) – is a process of developing relationships and opportunities where community and Your Community Health work together on health and wellbeing issues to achieve positive impacts and outcomes for the person and the wider community.
- Volunteering – is someone who willingly gives their time for a common good without the intention of financial gain.[v]

4. What is community engagement?

Community engagement is a process of developing relationships and opportunities where community and YourCH work together on health and wellbeing issues to achieve positive impacts and outcomes for individuals and the wider community. Community engagement is fundamentally about providing meaningful opportunities for the community to have input into our decision-making processes.[vi]

Community engagement has a long history at YourCH and emerged from community advocacy for and with the health service. In 2014 YourCH established its first Consumer Advisory Committee (CAC). The CAC continues today and has deep relationships with management and staff. Community engagement is not a once off event but rather, an iterative ongoing conversation between YourCH and the community we serve.

Consumer Advisory Committee members Glenn, Hanh, David, Alycia, Annissa

5. Why is community engagement important to YourCH?

Samira*, a migrant woman experiencing family violence started working with YourCH's Refugee Liaison Officer in 2018. Through this one-to-one relationship, Samira was linked in with the Arabic Women's Social Support group, which she attended on a weekly basis for several years. Being connected to this group played an integral role in Samira reclaiming her own sense of identity and independence.

Social connections forged via this group led to Samira commencing a career in community pharmacies, where she continues to work today. When YourCH launched the *Together Project* she saw this as an opportunity to give back. She continues to volunteer in this program, running drop-in sessions where she listens to community concerns. Samira is also on the Together Project Advisory Group where she and other members undertake community capacity building projects, such as the Festival of Belonging.

Consent has been obtained to use this information.

Engagement enables YourCH to build relationships with the community. Effective engagement helps to build and sustain cohesive relationships, and provides YourCH with the means to reach out to those who may not already be connected with us.

The benefits of effective community engagement are experienced by all but vary slightly for community and YourCH.

The benefit to community means, community will:

- know that they are listened to and valued;
- have choice and flexibility in their care;
- see how services and systems developed respond to and reflect their needs;
- understand how YourCH plans and makes decisions.

The benefit to YourCH means, YourCH will:

- know decisions made consider the rights, needs, preferences and values of the community;
- experience better outcomes and decisions relating to service and policy developments;
- build trust with community which will generate greater confidence in the health service.

6. Principles

To outline and guide YourCH's commitment to community engagement, the following three principles were developed with the project advisory group.

Community are partners

This means
- We value our community
- We are in constant conversation with and listen to our community
- We have effective and varied approaches for community engagement
- Our relationships are purposeful and grounded in mutual respect
- We acknowledge the power imbalance between community experience and the 'professional'
- We advocate together – the lived experience shapes our direction

We champion equity and inclusion

This means
- Human rights inform our work
- We create safe spaces for this work to happen
- We recognise the need for different approaches
- Our work is reflective of the diverse communities we serve

We invest in community engagement

This means
- We support our community so they can engage
- We support staff to have the skills to meaningfully engage
- We all embed community engagement into our day-to-day work
- We adapt – if something doesn't work, we reflect, learn and change

7. Community engagement at YourCH

YourCH works with the community in many different ways, from people attending medical or physiotherapy appointments, to inviting the community to be part of program or strategic planning processes. Broadly, the way YourCH engages with the community is through:

- **Individual care and practice** – this is where the person and the health care practitioner work together to address a person's healthcare needs, including treatments, and identify what services are needed. These are often the first relationships community members form with YourCH.

Volunteer listening posts – volunteers from a range of backgrounds spend time in the wait rooms at YourCH and help clients to feel comfortable whilst awaiting their appointments.

- **Service/program area reviews and development** – where community have input the development, review and evaluation of service delivery in how programs, services or facilities are developed, delivered, evaluated and improved.

High risk accommodation response – a program which provided support and public health messaging on COVID safety for residents in high-risk accommodation across the municipality of Darebin.

- **Across the organisation** – community provide input into organisational planning, development and evaluation, and policy and advocacy review.

Reconciliation – in 2022 YourCH developed their first Reconciliation Action Plan in partnership with community members and Barrbunin Beek Gathering Place.

8. Spectrum of community engagement

Community engagement occurs for many reasons and comes in different forms. Engagement can be short term and one directional when trying to inform or educate the community on a health issue, through to working closely with and partnering community to design and deliver a service. All forms of engagement are necessary and important. Knowing when and where to undertake various forms of engagement can be difficult.

The International Association of Public Participation's (IAP2) Spectrum of Community Engagement[vii] (Figure 2) is an internationally recognised tool that assists health services, governments, community services and more to consider what type of engagement is needed when. The spectrum recognises five spheres of engagement. Each sphere outlines a goal, along with the commitment and role of community and YourCH to the process. Figure 3 show examples of the spectrum of community engagement at YourCH.

Figure 2. Spectrum of community engagement

INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
GOAL To provide community with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions	**GOAL** To obtain community feedback on analysis, alternatives and/or decisions	**GOAL** To work with the community throughout the process to ensure that community concerns and aspirations are consistently understood and considered	**GOAL** To partner with community in each aspect of decision making, including the development of alternatives and the identification of preferred solutions	**GOAL** To place final decision making in the hands of the community. Empowerment refers to a process by which people gain greater control over decisions and actions affecting their lives
PROMISE To keep you informed	**PROMISE** We will listen to and acknowledge concerns and aspirations, provide feedback on how the community input influenced the decision	**PROMISE** We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how community influenced the decision	**PROMISE** We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions as much as possible	**PROMISE** We will work with you to realise your decisions and aspirations
ROLE OF COMMUNITY Listen	**ROLE OF COMMUNITY** Contribute	**ROLE OF COMMUNITY** Participate	**ROLE OF COMMUNITY** Partner	**ROLE OF COMMUNITY** Partner or lead

Figure 3: What does the spectrum of community engagement look like in practice?

INFORM

YourCH staff take an outreach approach (of going to where the community is at rather than making community come to them), to raise awareness and provide vaccinations to the community. In February 2023, the team were at Midsumma Carnival helping the community understand Mpox and what they needed to do to protect themselves.

CONSULT

The High-Risk Accommodation Response (HRAR) team's purpose was to provide public health messaging and support for COVID-19 safety measures for residents in high-risk accommodation. The HRAR team were able to build trusted and respectful relationships with the residents which allowed them to safely manage COVID-19 symptoms and/or seek vaccination. The HRAR program was effective at gaining a deeper understanding of people's needs and the team were able to support and advocate for additional health and wellbeing needs of the residents.

INVOLVE

YourCH was able to call on CAC to take on the role of consumer advisors during their dental reaccreditation in 2022. The CAC were instrumental in representing the consumer perspective and we're able to speak to the reviewers to explain how dental services were received by the community.

COLLABORATE

YourCH's first ever Reconciliation Action Plan (RAP) brought together community, the local Gathering Place and staff in a deliberative way. The RAP was named Kaydo Kertheba meaning Walk Together in the Wurundjeri Woi wurrung language. It outlines actions which build deeper relationships, fosters respect for First Nations peoples and cultures and creates meaningful opportunities for advancing reconciliation with the wider community.

EMPOWER

YourCH's Board is made up of community members who assist in setting the governance and strategic directions of the organisation. They are able to do this work by recognising good health has social, environmental and economic factors which contribute to health and wellbeing.

9. Effective community engagement – how we do it

There are eight key steps to consider when undertaking community engagement (Figure 4). These steps are especially helpful when working in the service/program and organisational level and are adapted from the Victorian Government's *Public Engagement Framework* 2021-2025 and IAP2's *Quality Assurance Standard: For Community and Stakeholder Engagement*.[viii]

Figure 4. The community engagement process

Define	• define the problem you are looking to address and the purpose of engagement
Understand	• understand stakeholder and community interests, values and opportunities for engagement
Design	• design appropriate engagement processes
Deliver	• deliver genuine, inclusive and respectful engagement
Review	• review and interpret the engagement information and data gathered
Apply	• apply the outcomes of the engagement to inform the decision-making process
Report	• report feedback and 'close the loop' on engagement
Evaluate	• evaluate the success of the engagement and share lessons learnt

Each step is outlined below in greater detail to assist you in planning your community engagement activities. It is there as a guide for consideration. Some of the identified actions may not be appropriate for your needs.

Define

In defining the purpose of the engagement, consider:

- Defining the problem or issue you are seeking to explore.
- What is the project scope, including –
    - Issues that need to be addressed and what decisions need to be made;
    - Practical considerations such as timelines, budget, lifespan, risks;
    - What is and is not negotiable;
    - Establish key performance indicators and outcomes.

- Who is affected by the issue / need?
- Identifying your evaluation process to measure effectiveness of engagement.

Understand

To understand community, consider:

- Building an understanding of the community, such as demographics, local issues, history and interaction (or lack of) with YourCH.
- Identifying potential stakeholders
  - those who may be affected, could influence or have an interest;
  - consider values, culture and attitudes towards engagement;
  - consider power dynamics or conflicts amongst stakeholders and how to address these.
- Has similar work happened before? What can be learnt or built on?
- How might community want to engage e.g., capacity and willingness?
- What information is needed to create informed participation?

Design

To design the engagement process, consider:

- Designing inclusive and accessible methods for communication (and recruitment).
- Identifying inclusive and accessible engagement methods and tools, perhaps more than one method is needed. Use the Spectrum of Community Engagement (Figure 2) to help determine level of engagement wanted and the Tools and Techniques to identify possible approaches. Consider -
  - If these methods ensure trust and safety of participants;
  - Seeking appropriate consent;
  - Identifying potential risks and how to mitigate them.
- What information and data do you need to gather?
  - Engagement questions should be based on findings from steps 1 and 2;
  - What data will you gather and what measurements does this give you;
  - How you will gather, manage and analyse data gathered. This includes how you manage privacy matters.
- How will you manage out of scope issues? Consider referral pathways.
- Have you understood the needs of participants?
- Ensure you have a safety plan in place for emotional and physical wellbeing – support should be available during and after an engagement process.

Deliver

In delivering a genuine, inclusive and respectful engagement plan, consider:

- Are the barriers to participation removed? For example:
    - Use of plain language, closed captioning (online), hearing loops (in person), translators (Auslan or language), room for assistive animals;
    - Allowing adequate time for genuine conversations, exploration and/or feedback;
    - Providing suitable information in advance of activities to support participation.
- Providing acknowledgements - including of country (or organising Welcome to Country) and lived experience.
- Engaging with a sense of openness and enquiry, acknowledging the value and input of participants.
- Setting clear parameters, including
    - How involvement informs decision making;
    - Safety of self and others;
    - What is in or out of scope and what that means;
    - Timelines;
    - Opportunity to follow up or provide feedback – both for additional community input but also feedback findings of the engagement;
    - How data will and will not be used.

Review

In reviewing and interpreting engagement data and information, consider:

- Any gaps in information or absence of key community groups and if additional engagement efforts needed.
- Where possible or appropriate, review findings with community to ensure correct interpretation e.g., sending a summary report or short video, follow up conversations to clarify or confirm key points or meaning.
- Collating and analysing data collected to -
    - Identify themes, priorities and preferences;
    - Identify any biases or limitations, consider if you need to take additional rectifying actions;
    - Catalogue information that was out of scope (may be relevant elsewhere and helps to demonstrate a demand or interest).

Apply

When applying the outcomes of the engagement, consider:

- How did the engagement contribute to the decisions and outcomes under consideration.
- Are there additional opportunities or mechanisms for community to work with decision-makers to help strengthen the outcomes.

Report

When reporting back and 'closing the loop' on community engagement, consider:

- Providing feedback to participants before final decisions are made, if appropriate.
- Sharing results of the decisions and outcomes, including any next steps with all stakeholders identified in step 2.
- Where relevant, publishing updates and final outcomes of community engagement.

Evaluate

When evaluating the success of the engagement and lessons learnt, consider:

- Undertaking a reflective 'lessons learnt' discussion with colleagues periodically and at the conclusion the engagement.
- Documenting or mapping the impact the engagement has had on the community and relationships with key stakeholders.
- Evaluating the engagement process itself and approaches used.

10. Tools and techniques

Outlined below are various tools and techniques which can be used to assist in developing community engagement strategies in practice.

10.1 Techniques for the *inform* stage

These techniques aim to raise awareness or educate.

Service and organisational practice

- Information sessions and door knocks – an interactive and responsive way of conveying information.
- Fact sheets, newsletters, displays, posters, social media channels (online and print) – a potentially wide-reaching form of sharing information which can be referred back to as needed.
- Ask Me 3 – a consumer health education campaign where consumers ask three specific questions to better understand their health conditions and what they need to do to stay healthy – useful for appointments.

Individual practice

- Teach back method –a way to confirm consumer understanding, by using their own words – useful during client appointments.

10.2 Techniques at the *consult* stage

These techniques seek feedback on specific issues and have low levels of influence from the community.
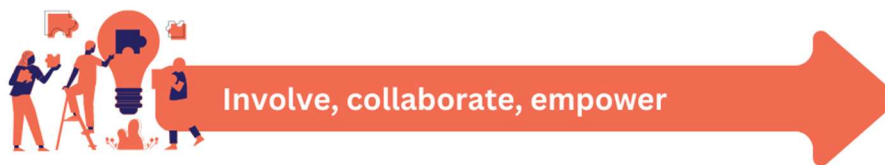
Service and organisational practice

- Surveys and feedback forms – generally a directed form of written communication, can be applied widely but reliant on a degree of literacy and confidence from the respondent.

- Interviews and focus groups – allows for specific and in-depth information to be gathered verbally, especially useful for those who are unable or unwilling or uncomfortable to write.
- Social media commentary and online discussion forums – a monitored and transparent online environment where people can share their ideas.

<u>Individual practice</u>

- Person-centred care plans – care which respects and responds to preference, needs and values of the person.

10.3 Techniques for the *involve, collaborate and empower* stage

These techniques have high levels of community influence and seek to work in partnership with the community to identify, explore and find solutions to health and community concerns.

<u>Service and organisational practice</u>

- Codesign/coproduction processes – an approach to participatory design that seeks to actively involve all stakeholders (staff, citizens) in a process to help ensure the result meets their needs and is usable e.g., developing outreach programs that better suit community needs.
- Advisory committees and reference groups – formal groups to guide and support decision making.

<u>Individual practice</u>

- Shared decision making – involves collaboration between clients and their healthcare provider to bring together the client's health and wellbeing goals and preferences with the best available evidence about benefits, risks and uncertainties of treatment to reach the most appropriate healthcare decision with that person and their supports.

11. Community engagement and governance at YourCH

YourCH's commitment to community engagement is demonstrated through the accountabilities and communication pathways outlined in Figure 5.

Figure 5. Governance of community engagement at YourCH
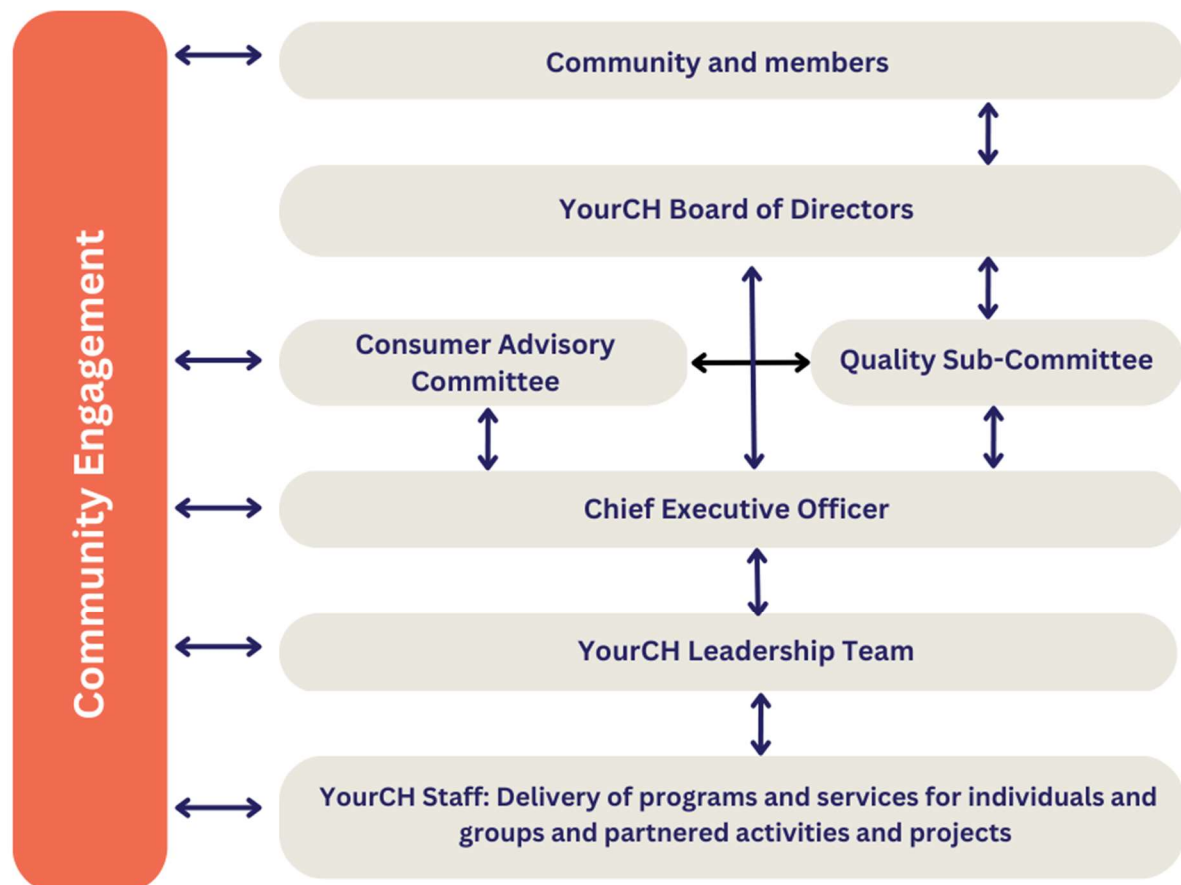
Appendix A

External resources

- Teach back method – an approach used by health care workers to check that clients have understood the health issue and actions needed to address the health issue(s) https://www.ahrq.gov/health-literacy/improve/precautions/tool5.html
- Ask Me 3 – a consumer health education campaign where clients ask three specific questions to better understand their health conditions and what they need to do to stay healthy. 1) What is my main problem? 2) What do I need to do? And 3) Why is it important for me to do this? https://cbrhl.org.au/wp-content/uploads/2020/11/YES-AskMe3_Brochure_ENGLISH.pdf Poster and brochure translations into French, Spanish and Portuguese can be found here https://www.ihi.org/resources/Pages/Tools/Ask-Me-3-Good-Questions-for-Your-Good-Health.aspx
- Person-centred care – is care which respects and responds to preference, needs and values of clients and consumers https://www.safetyandquality.gov.au/our-work/partnering-consumers/person-centred-care
- Shared decision making – involves collaboration between clients and their healthcare provider to bring together the clients values, goals and preferences with the best available evidence about benefits, risks and uncertainties of treatment to reach the most appropriate healthcare decision for that person https://www.safetyandquality.gov.au/our-work/partnering-consumers/shared-decision-making

Internal resources

- Consulting consumer on your communications – seeking the consumer tick of approval on written information New Guide: Consulting Consumers on your Comms
- Co-design info sheet – Project planning and review – a deliberative engagement method that works with interested community to identify and respond to community needs Co-design info sheet
- Project Plan Template – PPRT Template 2018

References

[i] Your Community Health (2022) Quality Account and Annual Report 2021-2022
https://www.yourch.org.au/news-events/reports-and-publications/

[ii] City of Darebin, Community Profile https://profile.id.com.au/darebin?WebID=10

[iii] Victorian Agency for Health Information (2017) The health and wellbeing of the lesbian, gay, bisexual, transgender, intersex and queer population in Victoria: Findings from the Victorian Population Health Survey 2017 https://vahi.vic.gov.au/report/population-health/health-and-wellbeing-lgbtiq-population-victoria

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[vii] International Association of Public Participation (2015) Quality Assurance Standard: For Community and Stakeholder Engagement https://iap2.org.au/wp-content/uploads/2019/07/IAP2_Quality_Assurance_Standard_2015.pdf

[viii] Adapted from: Department of Premier and Cabinet Victorian Government (2021) Public Engagement Framework 2021-2025

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