# Consumer Engagement Policy

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## SECTION 1: Policy framework

### Policy Statement

**[insert organisation name here]** is committed to the active and meaningful involvement of consumer representatives to inform [Insert organisation name here] activities, including policy, project and resource development, strategic planning, advocacy and governance. **[insert organisation name here]** recognises the value of the consumer voice and are committed to leading the way in supporting and promoting consumer representation and engagement within its member organisations.

### Purpose and scope

This policy has been developed to provide **[insert organisation name here]** with guidance around engaging with consumer representatives. The purpose of this policy is to ensure consumer engagement at **[insert organisation name here]** is guided by current and consistent practices.

This policy applies to all **[insert organisation name here]** employees, board members and student placements, and encompasses:

* purpose of **[insert organisation name here]** engagement with consumer representatives
* principles for consumer engagement
* planning and recruiting consumer representatives
* engagement tools and mechanisms

This policy does not provide detailed guidance on:

* project management – refer to **[insert name of and provide hyperlink to policy covering this area]**
* stakeholder or contractual relationships – refer to **[insert name of and provide hyperlink to policy covering this area]**
* communications - refer to **[insert name of and provide hyperlink to policy covering this area]**
* event management – refer to **[insert name of and provide hyperlink to policy covering this area]**

### Definitions

|  |  |
| --- | --- |
| **[Insert organisation name here]** **Board of Directors** | The legally responsible managing body of the organisation. Includes Board President, Vice President, and Ordinary board members. |
| **[Insert organisation name here] Executive Group** | Comprises of senior management in the organisation |
| **[insert organisation name here]** **staff** | Comprises of all professional staff employed by **[insert organisation name here]**, not including students and volunteers. |
| **Consumer**  | Anyone who accesses, has accessed, or may access, a program or service. Not limited to those currently accessing a program/service. |
| **Consumer engagement/ participation**  | Activities promoting the involvement of consumers in service participation structures. |
| **Consumer representative/s** | An individual or group who takes up a formal role to advocate and represent the issues and concerns of others with experiences similar to their own within an organisation or health setting. |
| **Peer worker**  | A peer worker uses their lived experience to help individuals engaged in treatment. Peer workers assist people with alcohol and/or drug issues to get the best possible outcome that meets their individual needs, drawing on their own lived experience. |
| **Project**  | A temporary endeavour undertaken to create a unique outcome, product, service, or result. |
| **Project Life Cycle / Phase** | A collection of generally sequential project management phases that include:* Initiation and start up—authorising the project or phase.
* Planning and design—defining and refining objectives and selecting the best methods and approach to achieve project goals and objectives.
* Implementation—coordinating people and other resources to carry out the project plan.
* Monitoring and control—monitoring and measuring progress regularly to identify variances from the project plan so that corrective action can be taken when necessary.
* Closure—formalising acceptance of the project and bringing it to an end.
 |

### 1.4 Principles

This policy is underpinned by the following principles:

* Consumer participation and engagement should be carried out in the spirit aligned with **[insert organisation name here]** values that include respect, integrity, inclusion and collaboration.
* Engagement with consumer representatives is integral to the development, implementation and evaluation of all **[insert organisation name here]** activity and should never be tokenistic
* Multiple levels of consumer engagement are needed and should occur at all levels of the organisation structure, and not in isolation.
* Adequate and dedicated resources are provided to support consumer representatives in their roles.
* Identify the most appropriate consumer representative for each role, considering the importance of diversity in consumer representation.

### 1.5 Outcomes

This policy is designed to achieve the following outcomes:

* **[Insert organisation name here]** engages with consumer representatives to inform **[insert organisation name here]** activities, including policy, project and resource development, strategic planning, advocacy and governance.
* Be part of the effort to improve engagement with consumer representatives in AOD work.

### 1.6 Functions and delegations

|  |  |
| --- | --- |
| **[Insert organisation name here] Board/ Board of Directors** | * Endorse and ensure compliance with the Consumer Engagement Policy.
* Be aware of key Consumer related activities.
 |
| **[Insert organisation name here] CEO or Manager/Executive Group** | * Ensure compliance with the Consumer Engagement Policy.
* Communicate with the Board regarding key consumer engagement activities.
* Facilitate communication about consumer engagement across the Program Services team.
* Provide support and advice to the Program Services team as required.
 |
| **[Insert organisation name here] Staff** | All staff* Comply with the Consumer Engagement Policy and seek guidance in the event of uncertainty as to its application.
* Where relevant to your role, support consumer engagement in project development, implementation and evaluation.
* Contribute to communication across the organisation about consumer engagement.
* Where relevant to your role, identify and lead opportunities for consumer engagement in project development, implementation, and evaluation.
 |

### 1.7 Policy implementation

All employees are responsible for understanding and adhering to this Policy. Review of this policy should occur in consultation with consumers.

### 1.8 Risk management

This Policy is monitored using the **[insert organisation name here]** Risk Register, which should be monitored regularly at meetings pertaining to organisational governance and practice.

Refer to **[insert organisation name here]**:

Risk Register

***Note\****

*If your organisation has a Quality Improvement Compliance Register-or similar document-, add this beneath the ‘Risk Register’ listed in 1.8*

*\*Please delete note before finalising this policy.*

## Section 2: Policy Detail

### 2.1 Purpose of consumer participation

Consumers play a valuable role with their contribution to AOD service planning, development and evaluation. They offer unique insights, perspectives and knowledge that may otherwise be missed or overlooked by other stakeholders. These contributions inform more responsive practices, programs, policies and frameworks resulting in improved health and social outcomes as well as assist organisations meet legal accreditation requirements.

### 2.2 Role of the consumer representative

Consumer representatives use their lived experience to advocate for improvements to service delivery and organisational management in the AOD sector and overall health care system. The role of a consumer representative is to provide feedback and advice to health, AOD services and policy advisors to influence healthcare service policy, systems, and practice for positive change and reform.

Key roles of the consumer representative include:

* Ensure the perspectives of AOD consumers are at the centre of all discussions.
* Provide a perspective which reflects both the representative's experiences accessing AOD treatment and the collective experiences of issues impacting on people who use AOD.
* Raise consumer concerns and views, ask questions, test assumptions, and identify gaps.
* Assist organisations and health professionals to see the perspective of someone with lived experience of AOD treatment that is separate to a clinical perspective.
* Be connected and provide feedback to their own formal and informal networks.
* Maintain confidentiality and disclose any conflicts of interests.
* Speak up when they disagree, be able to raise their concerns and have this formally acknowledged.

### 2.3 Planning consumer participation

Engagement with consumer representatives requires forethought and planning. The purpose and role of the consumer representative needs to be clear before recruiting them to any activities.

**[Insert organisation name here]** activities, including projects and resource development, require appropriate stakeholder engagement, including consumer representatives. Consumers need to be involved from the initial stages of a project and should continue through to evaluation and review to ensure the project is acceptable to and meets the needs and requirements of intended beneficiaries. Refer to Project Management Policy for further guidance.

**[Insert organisation name here]** encourages consumer representation at relevant **[Insert organisation name here]** events. For larger events when an organising committee is required (e.g., conferences) consumer representatives should be engaged. Refer to the Project Management policy for further guidance.

When planning consumer participation, the following questions should be considered:

* What is the purpose for engaging a consumer representative/s?
* How will engaging with consumers add value to the project/activity/working group?
* Who should be involved? What lived experience or cultural diversity needs to be considered?
* Why would consumers want to be involved in this project/activity?
* In what way will we engage with the consumer representative to achieve the best outcomes?
* What finanical and other resources are needed?
* Where will the consumer engagement activity take place? Is it accessible for the consumer representative/s?
* When during the project cycle do we need to engage the consumer representative/s?
* When is the best time to start recruiting the consumer representative/s?
* When will you schedule the consumer engagement activity?
* How will we recruit the consumer representative/s?
* How will the consumer be supported thoughout their involvment? Or, what structures are in place to ensure the saftey and wellbeing of the consumers involved.

#### 2.3.1 Identifying and recruiting consumer representatives

Before commencing the recruitment process, be clear about the purpose of consumer engagement and what lived experience or cultural diversity is required for meaningful partnership. The skill set of consumers will vary, so consideration is needed when engaging consumer representatives to what skills and knowledge they have in relation to the topic/area they are being asked to provide consultation on.

Where possible, it is important to consult with consumers from diverse backgrounds, for example: Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds, gender and sexuality diverse people and people from rural and remote locations.

Consumer representatives can be recruited through touching base with bodies like [The NSW Users and AIDS Association (NUAA)](https://nuaa.org.au/), [NADA,](http://nada.org.au) NADA [member services](https://nada.org.au/members/), and other community organisations.

As one consumer cannot represent the needs and perspectives of every person or community who use AOD, where possible, consumer representatives should be supported to consult with their peers on issues they have no experience of, or issues that require wider consultancy due to their importance.

If you are organising an event with consumer representatives, ensure you let consumers know important details like:

* Could there be media at the event?
* How big the audience approximated to be
* If you would like to record the event and make the recording publicly available

#### 2.3.2 How to partner with and support consumer representatives

Supporting consumer representatives means enabling them to be more effective in their roles. **[Insert organisation name here]** can enhance the contributions of consumer representatives by thinking through and planning who will be the most suited consumer representatives for the activity, and what are ways to best support their engagement should be done in the spirit of partnership, with an equal working relationship.

**[Insert organisation name here]** is actively committed to promoting the principles of equal opportunity and strives to support all staff including consumer representatives in an environment which is fair, inclusive and diverse and supportive of health and wellbeing. For more details refer to the Human Resources policy and **[insert organisation name here]** equal employment opportunity principles.

It is important to ensure consumer representatives are provided with clear directions and enough information. Try not to use technical jargon/acronyms where possible. **[Insert organisation name here]** should always use person centred language when discussing alcohol and other drugs and the people who use them. Refer to [NUAA/NADA's Language Matters resource](https://www.nada.org.au/resources/language-matters/) for further guidance.

Well orientated and supported consumers will be effective partners by ensuring:

* Consumers are provided with a clear description of the purpose of their engagement and nature of their role.
* Consumers are provided any relevant information prior to meeting – for example: project plan/objectives, background information.
* Consumers are provided a comprehensive orientation of project/activity.
* Consumers are introduced to other staff and people involved in the project/activity
* A glossary of terms is provided where possible, in addition to an explanation of acronyms and relevant health literacy.
* Time is allowed for regular check ins with consumers. Sometimes consumers can be asked to speak on topics that are sensitive and trigging. Upon completion of project contact consumer within 48 hours to ascertain if there are any follow up support needs.

For more practice guidance for partnering and supporting consumer representatives refer to:

[Consumer Health Forum Australia fact sheet supporting consumer engagement](https://chf.org.au/sites/default/files/how_committee_secretariats_can_support_consumer_representatives.pdf)

[Health Consumers QLD A Guide for health staff engaging with consumers](https://www.hcq.org.au/wp-content/uploads/2018/06/HCQ_StaffGuide.pdf)

### 2.4 Remuneration and reimbursement of consumer representatives

Consumer representatives must be reimbursed and remunerated for their contribution and expenses. Consumer representatives are experts with unique skills, and as such, require appropriate remuneration, as other staff and professionals who are invited on to committees are.

**[Insert organisation name here]** strives to ensure consumer payments are consistent, transparent, and fair. Remuneration and reimbursement should be made promptly.

The following points must be considered when reimbursing and remunerating consumer representatives:

* Payment or reimbursement arrangements need to be in place and explained to consumer representatives prior to the beginning of their participation. This includes discussion about the expected timeframes for the activity/representation type. Payment or reimbursement amounts must be negotiated before the activity or event.
* Any additional assistance arrangements must be discussed and reasonable costs negotiated between **[insert organisation name here]** staff and the consumer, depending on the project and individual consumer needs and may include:
	+ Travel costs; airfares, taxis, kilometre rate for private vehicles,
	+ Preparation/resourcing for expenses such as: phone calls, postage and faxes, copies of articles;
	+ Expenses for people living with disabilities; for example, carer costs, papers in large print;
	+ Expenses for people with children; for example, childcare costs;
	+ Other expenses; for example, doctor or pharmacist charges for changes to scripts for those on opioid treatment.
* To reduce turnaround time for consumer representatives endeavour to have claim forms available at any event where consumers are to be paid and process in a timely manner.
* To reduce consumer costs, utilise reply-paid envelopes and call consumers rather than expecting them to contact you.

#### 2.4.1 **Representation Type & Associated Fees**

The types of consumer representation and associated fees tabled below are specific to **[insert organisation name here]** activities. Fees set have been guided by Health Consumer NSW Health recommended payment rates for remuneration of health consumer representatives in NSW engaging with health services.

Ensure you factor in reasonable preparation time when calculating fees. For example, if a consumer will appear on a 1 hour panel, the consumer should be paid for that hour, **in addition to** the time they spent preparing for that event.

***Note\****

*Delete representation types not relevant to your organisation*

*\*Please delete note before finalising this policy.*

|  |  |
| --- | --- |
| **Representation Type** | **Fee** |
| Consumer representatives on ongoing, regular, high level/forums | $60/hour (4 hours and under\*)$50/hour (Over 4 hours\*)\*Include preparation, pre-reading and travel timeConsumers should also be reimbursed for any related activities to their engagement. For instance: parking, travel expenses, printing costs, childcare. However, this should be negotiated and agreed to before arrangements are made. |
| Consumers who contribute in person at a non**-[insert organisation name here]** event. For instance, conference presentation, panel discussion | $50/hour\*\*Include preparation, pre-reading and travel time |
| Consumers who contribute via video or audio for a **[insert organisation name here]** event (approx. 60 minutes) | $40 |
| Consumers interviewed by member services on behalf of **[insert organisation name here]**. For instance, focus groups, consultations (45 – 60 minutes), focus testing resources | $40 minimum. Remuneration negotiated dependent on program budget and representation requirements  |
| Consumers who participate as a committee member for a meeting hosted by [**insert organisation name here]**. For instance, Project Advisory Group representatives | $50/hour\*\*Include pre-reading and preparation time |
| Document reviews such as policies and recourses. Consumers may be asked to review documents and provide feedback. Time allocated to review documents will be on a case-by-case basis due to the size and feedback required  | $60/hour (4 hours and under\*)$50/hour (Over 4 hours\*) |

### 2.5 Training and support for [insert organisation name here] staff

**[Insert organisation name here]** staff should be provided with information, training and resources on how to work effectively with consumer representatives. **[Insert organisation name here]** staff should be familiar with best practice guidelines on person centred language to use when discussing alcohol and other drugs and the people who use them.

If **[Insert organisation name here]** staff have any questions or support needs on how to work effectively with consumer representatives, they should discuss this with their direct supervisor and can contact NADA’s Consumer Engagement Coordinator.

Refer to [NUAA/NADA's Language Matters resource](https://www.nada.org.au/resources/language-matters/) for further guidance about person centred language.

## Section 3: references

### 3.1 Internal References

#### 3.1.1 Forms and templates

* Consumer Representation Claim Form
* [Australian Tax Office Statement of Supplier](https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/)

#### 3.1.2 Policies and procedures

* Communication Policy
* Functions and Delegations Matrix
* Risk Management Policy
* Risk Registerc
* **[Insert organisation name here]** Strategic Plan
* Work Health and Safety Policy

*\*Note
Templates for 3.1.2 can be found in the NADA Policy Toolkit. Other internal documents you can list for 3.1.2 if you have them are: External Relationships policy, Feedback and Complaints Management policy- or similarly named policies.*

*\*Please delete note before finalising this policy.*

### 3.2 External References

#### 3.2.1 Legislation

* [Privacy and Personal Information Act 1998 (NSW)](https://legislation.nsw.gov.au/view/html/inforce/current/act-1998-133)
* [Privacy Act 1988 (Cth)](http://www7.austlii.edu.au/cgi-bin/viewdb/au/legis/cth/consol_act/pa1988108/)

#### 3.2.2 Resources

* [Australian Charter of Health Care Rights](https://www.safetyandquality.gov.au/consumers/working-your-healthcare-provider/australian-charter-healthcare-rights)
* [NADA consumer participation audit tool](https://www.nada.org.au/resources/consumer-participation-audit-tool/)
* [Health Consumers NSW - remuneration and reimbursement of health consumers](https://www.hcnsw.org.au/for-health-consumer-organisations/remuneration-and-reimbursement-of-health-consumers/)
* Consumer Health Forum of Australia Information for Consumers Fact Sheet
* [Health Consumers QLD A Guide for health staff engaging with consumers](https://www.hcq.org.au/wp-content/uploads/2018/06/HCQ_StaffGuide.pdf)
* [WANADA Improving consumer engagement in the AOD Sector](https://www.hcq.org.au/wp-content/uploads/2018/06/HCQ_StaffGuide.pdf)
* [Consumer Health Forum Australia supporting consumer engagement fact sheet](https://chf.org.au/sites/default/files/how_committee_secretariats_can_support_consumer_representatives.pdf)
* [Greater, Meaningful Involvement of People Who Use Illegal Drugs: A Public Health, Ethical, and Human Rights Imperative](http://www.hivlegalnetwork.ca/site/wp-content/uploads/2013/04/Greater%2BInvolvement%2B-%2BBklt%2B-%2BDrug%2BPolicy%2B-%2BENG.pdf)

#### 3.2.3 Websites

* [Health Consumers NSW](https://www.hcnsw.org.au/)
* [Queensland Health Consumer and community engagement framework and strategy](https://www.health.qld.gov.au/sunshinecoast/about_us/publications-and-reports/comsplan)
* [NSW Users and Aids Association (NUAA)](https://nuaa.org.au/)
* [Australian Injecting and Illicit Drug Users League (AIVL)](https://aivl.org.au/)
* [International Network of People who Use Drugs (INPUD)](https://inpud.net/)

## Section 4: Performance

**4.1 [Insert organisation name here] Policy Performance Measure**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Performance Indicator** | **Source** | **Number** | **Frequency** | **Recorded** |
| Staff incorporate consumer participation activities in project plans | Project Plans | any increase | Annual | QI Register -Policy KPIs |
| Number of consumer engagement used across all **[insert organisation name here]** program and activities | Financial reports | any increase | Annual | QI Register -Policy KPIs |

***Note\****

 *If your organisation does not have a ‘QI register for Policy KPIs’, see* [*here*](https://www1.health.gov.au/internet/main/publishing.nsf/Content/DCC9E1DB6C39C2CFCA257E92000AE255/%24File/Appendix%204%20-%20Template%20-%20Quality%20Improvement%20Register%20%28D15-827068%29.pdf) *for a QI Register example template.*

 *\*Please delete note before finalising this policy.*