Health Consumers Queensland: Consumer engagement in Primary Health, and Consumer Representatives Program

Presentation to

General Practice Queensland Divisions Forum: Our Community: Our Future

Thursday 4 March 2010

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HCQ’s Consumer Network

• A state-wide register of health consumers and community organisations

• Mechanism for HCQ receiving and providing information about emerging health issues and initiatives

• Pathway to the Consumer Representatives Program
Network members receive …

• HCQ information updates, e-newsletters

• Invitations to HCQ and other government and community health events

• Advice about training opportunities, conferences and workshops
HCQ’s Consumer Representatives Program

- Sources health consumer representatives in response to agency requests for committees, forums, reference and focus groups, advisory bodies and panels

- Consumers provide input from a consumer perspective into national and state health policies and reform initiatives

- Works collaboratively with key agencies and links closely with local and state-wide consumer networks

- Underpinned by nine principles requesting agencies agree to work within
HCQ’s nine consumer engagement principles

1. HCQ acknowledges the right of all consumers to be involved in the planning, implementation and evaluation of health policy, programs and services and their individual care arrangements.

2. Engagement activities should utilise an appropriate range of skills, expertise, knowledge and strategies relevant to each engagement situation.

3. Consumer engagement should be supported by all levels of the consulting organisation and sufficiently resourced so that involvement is a positive and meaningful experience for consumers, carers, community representatives and organisational staff.

4. Consumers should not be financially disadvantaged as a result of their participation in any engagement activity.
5. Consumers should be engaged from the beginning of any engagement activity.

6. Appointments to any consultation process should be equitable, transparent, accountable and efficient.

7. Consumers and the consulting organisation should consider and value each other as equal contributors to the engagement process and act in a mutually respectful manner.

8. All aspects of consumer engagement should recognise and be supportive of the diversity of Queensland health consumers.

9. The Consumer Representatives Program complements and promotes the role of existing consumer and community organisations and networks.
Agencies who use HCQ’s consumer representatives

- Queensland Health
- Other State Government departments and statutory agencies
- Federal Government
- Tertiary institutions
- Community organisations
- National and other state consumer bodies
How the program works


• Request considered in line with HCQ’s priorities, the nature of the request, and principles of program

• Expression of interest process undertaken
How the program works (continued)

• HCQ Selection Committee determines suitable applicant and makes recommendation to agency

• Notification to applicants

• Consumer representative completes orientation and induction with agency and commences

• Information and feedback for HCQ
Work undertaken by consumer representatives

- Input into health policies and programs and enhance quality and safety initiatives – participating in advisory bodies, clinical networks, focus groups - e-Health, advanced health care and end-of-life decision-making policies and initiatives, etc.

- Australian Commission on Safety and Quality in Healthcare – providing feedback to inform the development of a national quality and safety framework and standards.

- Input into the development of new resources such as brochures, surveys and websites.

- Present at state-wide forums on quality and safety issues in the health system.
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