

Partnering with Consumers Case Study:

Illawarra Shoalhaven Local Health District

Person-centred approaches and consumer partnerships

Person-centred approaches and strong consumer partnerships are critical for delivering care that meets people's needs, achieving better health outcomes for communities and ensuring better value for health services. They also underpin the Partnering with Consumers Standard of the National Safety and Quality Health Service Standards. However, each health service organisation is on its own journey and must determine what strategies work best for their local communities and service delivery contexts.

This case study is one of eight, designed to assist other organisations working to embed person-centred care. It highlights the person-centred approaches and strategies that the Illawarra Shoalhaven Local Health District (LHD) uses to partner with consumers, including:

- A. Building community health literacy through the Patient Information Portal**
- B. Conducting consumer walkthroughs and wayfinding audits**
- C. Embedding consumer representatives in clinical governance and quality improvement structures**
- D. Supporting members of the workforce to effectively communicate with patients**
- E. Working with and supporting families and carers.**




These themes and good practice examples have been aligned with the four criteria of the Partnering with Consumers Standard, and the seven attributes of high-performing person-centred healthcare organisations (the attributes), which are detailed below.



Seven attributes of high-performing person-centred healthcare organisations





Snapshot of the Illawarra Shoalhaven Local Health District

Where	What	Whom
 <p>Public provider south of Sydney</p>	 <p>8 hospital sites Approximately 58 locations provide community health services More than 7,300 workforce members</p>	 <p>Population of more than 400,000 people Consumer base is rapidly growing and becoming more diverse</p>

Overview

The Illawarra Shoalhaven LHD is a large service provider that must meet the needs of a rapidly growing consumer base. Top-down leadership and commitment is helping to embed a culture that values consumer input. This is key to building systems, policies and processes to embed partnering with consumers across the LHD. The LHD is especially advanced in promoting improvements in health literacy and developing high-quality, easy-to-understand materials for consumers.

A. Building community health literacy through the Patient Information Portal

Criterion  Health literacy	Attribute  Comprehensive care delivery
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Within the Illawarra Shoalhaven LHD's Health Literacy Framework, the Patient Information Portal (PiP) and PiP process are used to improve the quality of written consumer health information. These tools are well-established, academically validated and supported by consumer representatives. Members of the LHD workforce use the process to develop, test, refine, store and search for locally developed materials.

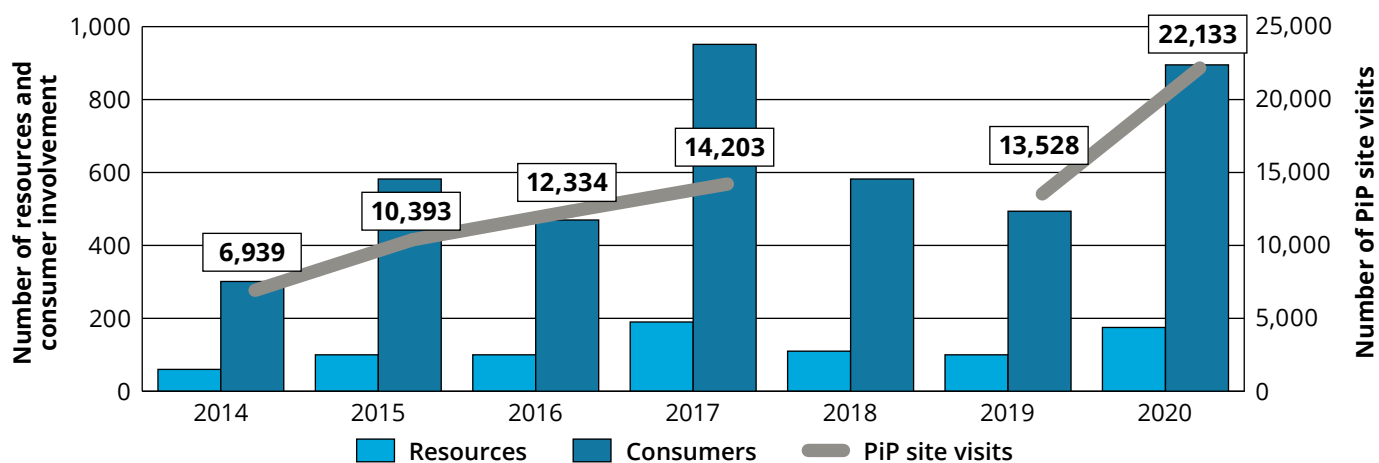
The PiP process has five steps:

1. The author registers the resource in the system and drafts materials in line with standardised guides and templates
2. The author tests the resource for readability – a score of Grade 6–8 (age 12–14 years) is required

3. The PiP Coordinator uploads the resource as a 'draft for comment' for two weeks so the author can test with consumers; feedback is logged using a standardised response template
4. The author reviews all feedback, makes any necessary changes and tests for readability again
5. The PiP Coordinator checks that all steps are completed, files evidence of feedback and changes that were made, and publishes the resource to the PiP.

The PiP process is now embedded in the routine practice of the LHD workforce. Between 2014 and 2020, the number of patient resources developed locally and the number of consumers engaged to test resources have both increased (Figure 1).

Figure 1: Number of resources developed, consumers engaged and Patient Information Portal (PiP) visits, 2014–2020



More than 100 health literacy ambassadors across the LHD promote the PiP process, review and update documents, and support PiP service improvements. These ambassadors are crucial to the PiP process.

In addition to the PiP, other ways the LHD builds health literacy include:

- Translating documents into languages other than English for the growing multicultural community
- Engaging consumer representatives with lived experience to review mental health materials
- Using bedside communication boards to support dialogue between patients and members of the workforce.

B. Conducting consumer walkthroughs and wayfinding audits

Criterion



Health literacy

Attribute



Comprehensive care delivery

The Illawarra Shoalhaven LHD started the Wayfinding Program in 2012. Every three years, consumer representatives partner with LHD to conduct wayfinding audits to ensure that community members can easily navigate through the facilities. Consumers provide specific feedback to the LHD on facilities with wayfinding issues. Improvements made based on these recommendations, such as better signage and installing self-opening doors, have led to a better consumer experience. For example, patient experience data showed an increase in the number of patients who said signposting was 'definitely' easy to follow for the Wollongong Emergency Department, rising from 56% in 2014 to 71% in 2019.

Another example comes from a wayfinding volunteer:

“ I have never been able to go to the hospital on my own and navigate my way around, and to me the most important thing was the signage. It was impossible for even a sighted person, I thought, having signs hanging from the roof with chains ... for vision-impaired people – people with any disability – we're focusing ahead for our safety.

The wayfinding with health has been the most rewarding for me, some of my best advocacy work ... because a lot of the time I get invited to different things and never hear the outcome, but I was invited back to the hospitals to see the end result!

– Aileen Muscat, Illawarra Shoalhaven LHD Wayfinding Volunteer 2015–19.

C. Embedding consumer representatives in clinical governance and quality improvement structures

Criterion



Clinical governance and quality improvement systems to support partnering with consumers

Attribute



Purpose, strategy and leadership

Attribute



Governance

The Illawarra Shoalhaven LHD is still evolving in its approach to embedding consumer representatives in clinical governance and quality improvement structures. Executives and senior managers felt there had been 'pockets' of consumer engagement across the LHD using standard processes – for example, having three consumer representatives on the LHD Clinical Governance Council.

The LHD is working to improve consumer representation at all levels, which must be supported by the whole organisation. Executives and senior management are committed to recognising the importance of and valuing the consumer voice. This is now echoed by senior clinical leads on governance committees. This significant culture change was also supported by:

- Using patient stories to open governance committee meetings, to embed real patient experience
- Recruiting skilled and confident consumer representatives who feel empowered to ask questions and contribute to discussions.

The LHD is focusing on ensuring that consumer representatives match the diversity of the local community. They also want to offer ways for consumer representatives to share their experience with peers across the LHD and with other organisations more broadly.



We needed to get clinical staff to value and trust having a consumer voice in a forum where we are vulnerable – it's a space where we challenge each other on clinical practice. We had to do a lot of work to demonstrate to clinicians that there was a reason for consumers to be in that space.

– Executive team member

D. Supporting members of the workforce to effectively communicate with patients

Criterion



Partnering with patients in their own care

Attribute



People, capability and culture

The Illawarra Shoalhaven LHD has focused on building the skills and capabilities of their workforce so that they can effectively communicate with consumers. For example, the Teach Back method is a way to confirm that consumers understand the information that they have been given. Members of the workforce give patients information and then ask them to repeat it back, in their own words. This provides an opportunity for patients, families and carers to ask questions, and for members of the workforce to correct any misunderstandings. The Teach Back program is being trialled in parts of the LHD, with a plan to roll it out more broadly.



I participated in a Teach Back session with some clinicians. It seemed a revelation to them that sometimes patients might not understand health information.

– Consumer representative

E. Working with and supporting families and carers

Criterion



Partnering with consumers in organisational design and governance

Attribute



Partnerships

The Illawarra Shoalhaven LHD has made a concerted effort to partner with and support families and carers. Examples include:

- Involving carers in an ongoing informed consent project, where a team (including a consumer representative) has sourced patient, family and carer experience data, and safety and quality data, to understand current processes for sharing information and gaining informed consent
- Developing specific carer representative committees for mental health services, so carers can share their views and enhance their own safety and experience, as well as the experience of those using the service
- Proactively supporting carers of those with mental health issues who may face risks to their safety outside of the service setting – for example, it is mandatory to document if a carer may be at risk, and there are structured processes for early intervention
- Running a formal carer program that helps the LHD cater to the needs of carers by providing better access to information, services and support, including information booklets and videos of carers talking about their lived experience, and education, information and support programs
- Identifying carers in a patient's electronic healthcare record to support enhanced communication with members of the LHD workforce.



One of the biggest challenges is getting staff to understand who a carer is and what their role is. There are often questions like 'What does this mean for decision making? Who is the legal decision maker?'

– Consumer representative

Find out more

Further information and resources on the attributes of high-performing person-centred healthcare organisations, the Partnering with Consumers Standard and the development of the case studies include:

- [Person-centred healthcare organisations](#)
- [National Safety and Quality Health Service Standards](#)
- [Illawarra Shoalhaven Local Health District.](#)

Acknowledgements

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