



Communication Link

# Designing ACT Health services for a growing population

Consultation outcomes report

1.0

July 2023

# Acknowledgement of Country

In the spirit of reconciliation, Communication Link acknowledges the Ngunnawal people, Traditional Custodians of the land on which our head office resides. We acknowledge and respect their continuing culture and the contribution they make to the life of our community in Canberra and the region. We also acknowledge all other Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of all land on which our work and connections may reach, and pay our respect to their Elders, past and present.



# Contents

1.	Executive summary .....	5
2.	Introduction .....	6
2.1	Introduction .....	6
2.2	Relationship to other reports .....	7
3.	Engagement methodology .....	8
3.1	Structure and deliverables .....	8
3.2	Areas of focus .....	9
3.3	Governance structure .....	9
3.4	Promotion .....	9
3.5	Participation .....	10
4.	Process outcomes .....	11
4.1	Health care <b>services</b> across the ACT .....	11
4.1.1	Walk-in centres and community health facilities .....	12
4.2	<b>Accessing</b> ACT health care services .....	12
4.2.1	Navigation and coordination of care .....	12
4.2.2	Financial access .....	13
4.2.3	Services that cater for diverse consumer needs .....	13
4.3	<b>Virtual health</b> care services .....	13
4.3.1	Barriers and opportunities to accessing virtual care .....	13
4.3.2	Enabling access to virtual health care .....	13
4.4	<b>Accessing</b> urgent care .....	14
4.5	<b>Quality and safety</b> of ACT health care services .....	14
4.6	Coordination of care .....	15
4.7	Delivery of <b>integrated care</b> solutions .....	15
4.7.1	Understanding integrated care .....	15
4.7.2	Expectations of integrated care solutions .....	15
4.8	A new Northside Hospital .....	16



4.8.1 Safety .....	16
4.8.2 Services.....	16
5. Conclusion and next steps .....	17
<u>Appendix 1 – Consumer principles .....</u>	<u>18</u>



# 1. Executive summary

Community engagement activities undertaken as part of the *Designing ACT health services for a growing population* engagement strategy explored public perceptions around current health services in the ACT and what may be required across the Territory in years to come. The phased engagement program—commenced in August 2022 and concluded in December 2022 to explore the community's perceptions of the ACT health care system. This engagement was designed to get a broad understanding of public opinion on health care across the ACT in the first phase with deeper consultation occurring through a deliberative style engagement approach for the Integrated Care Program and a range of activities to socialise the Northside Hospital early design concept. Several similar themes arose across eight key focus areas from the information gathered and feedback received from each stream of the engagement program. This included the identification of common barriers to accessing virtual care, financial barriers to accessing health care when not offered a bulk-billed service, use of walk-in centres, lack of clarity in navigation of and access to services across the ACT health care system.

Through the Integrated Care community panel workshops, it was uniquely noted that the ACT Government should address how and where Aboriginal and Torres Strait Islander people want to access health care services based on improved engagement and empowerment with the community rather than through the current service provision. This was reflected through the consumer principles (see Appendix 1) developed by the panel.

Reports provided to Canberra Health Services (CHS) and the ACT Health Directorate (ACT Health) will guide and inform the design and development of future integrated health care services across the Territory as well as the ongoing planning and funding for the Northside Hospital.

This consultation outcomes report provides an overview of program delivery and identification of common themes and record of issues unique to individual streams of engagement.



## 2. Introduction

### 2.1 Introduction

The *Designing ACT health services for a growing population* engagement program was a three-phased engagement program designed to bring together different aspects of the ACT Government's health planning. This aimed to help realise the vision of a person-centred health system that is innovative, effective, and sustainable, and gather feedback on early planning for a Northside Hospital with the Canberra community.

As Canberra's population continues to grow, investment in health services and facilities is vital to cater for this growth—and that means being prepared with a long-term plan across all facets of care.

The ACT Government is looking for ways to improve long-term health outcomes for the community, and make health services more modern, effective, and accessible. Community health options are expanding with significant investment in walk-in clinics, telehealth, at home care as well as preventative and management programs. It is an ongoing transformation of approaches, systems, policies, and infrastructure to improve the lives and health outcomes for all Canberrans.

Through the *Designing ACT health services for a growing population* engagement activities, the ACT Government sought to explore experiences and perceptions of health care across the region and gaps in services and facilities.

The engagement program sought to gather community feedback to ensure that the ACT Government has a well-rounded understanding of what people want and need from changing health care services across the ACT. Activities and information focused on 'person-centred services; safe and effective care' and was built on the foundations of the strategic goals of Access, Accountability and Sustainability – consistent with the *ACT Health Services Plan*.

Outcomes from this engagement program aim to support the ACT Government to continue to progress with their commitment to delivering health care that meets the needs of people accessing the ACT health system now and into the future.

This engagement program focused on the planning and design of future tailored integrated care solutions, and a new Northside Hospital. Consultations also carried a secondary focus on the activation of a clinical services plan for the northside of the ACT that considers access to health services for northside residents as well how the ACT can better balance health service provision across the Territory.

The engagement program was undertaken across three phases:

- Phase one
  - *Designing ACT health services for a growing population* YourSay survey
  - EOI for Integrated Care community panel.
- Phase two
  - Northside Hospital community consultation
  - Integrated Care community panel meets and deliberates.
- Phase three
  - Close the loop with the community
  - Provide outcomes of engagement.

This engagement structure aimed to gauge public opinion on health care across the ACT through Phase one, then dive deeper into two separate engagement streams through Phases 2 and 3. The first



stream of Phase two explored potential integrated care service solutions through a representative, deliberative panel, with the second stream engaging with the community on the new Northside Hospital. Concluding separately, each stream will close the loop with the community through publication of relevant reporting and documentation on the YourSay website.

## 2.2 Relationship to other reports

Reports have been provided at the conclusion of each program phase. As outlined below, where relevant, individual reports have been delivered to address the different engagement streams.

This consultation outcomes report provides an overview of the engagement program delivered under the *Designing ACT health services for a growing population* project, as a whole and highlights key themes and topics similar and unique to each phase and engagement stream.

Table 1 Project report and purpose

Engagement phase	Reports issued	Report purpose
<b>Phase one</b>		
<i>Designing ACT health services for a growing population</i> YourSay survey	Phase one – consultation report	Summarise outcomes of Phase one engagement activities and responses to, and outcomes of the YourSay survey.
EOI for Integrated Care community panel	Phase one – consultation report	Summarise the recruitment process for the ACT Integrated Care Community Panel.
<b>Phase two</b>		
Northside Hospital community consultation	Phase two – Northside Hospital – consultation report	Summarise the outcomes of engagement activities and exploration of interactions with the ACT community regarding the new Northside Hospital.
Integrated Care community panel meets and deliberates	Meeting summaries	Individual summaries from each meeting endorsed by meeting participants
	ACT Integrated Care Community Panel – Process and outcomes report	Summarise the findings of the insights gained from the work undertaken by the ACT Integrated Care Community Panel. Present the consumer principles (see Appendix 1) developed by the panel to guide the design and delivery of future health care services across the ACT.
<b>Phase three</b>		
Provide outcomes of engagement	Consultation outcomes report	Summarise the outcomes of the – <i>Designing ACT health services for a growing population</i> engagement program drawing on key themes and topics similar and unique to each phase and engagement stream.
Close the loop with the community	Consultation outcomes report	Summarise outcomes of the engagement program to provide clear and transparent information to the community regarding community sentiment and expectations for ACT health care services.



## 3. Engagement methodology

### 3.1 Structure and deliverables

As outlined in the community engagement plan, Communication Link supported CHS and ACT Health to gather feedback and ideas from the ACT community to:

1. Inform the design and structure of integrated care options to be implemented across the ACT.
2. Inform development of the Northside Hospital project for of a new, public, Northside Hospital to be located in the north of the ACT.

This engagement structure aimed to gauge public opinion on health care across the ACT, then dive deeper into two separate engagement streams. The first stream aimed to explore the expectations of future integrated care service solutions through a representative community panel. The second stream aimed to engage with the local community on the early concept design for the new Northside Hospital.

Each stream concluded separately, resulting in the:

- endorsement of eight consumer principles developed by the community panel to guide future integrated care solutions
- analysis of consumer sentiment and feedback regarding the early concept design for the new Northside Hospital.

Phase one of the *Designing ACT health services for a growing population* engagement program opened on 8 August 2022 for an initial four-week period - this was extended by one week to close on 16 September 2022.

Facilitated via the ACT Government YourSay platform, the survey offered the community an opportunity to develop an understanding of the ACT Government's objectives for the future of health care across the Territory. It also allowed them to complete an online survey and submit an expression of interest (EOI) to join the integrated care community panel. The YourSay page is at <https://yoursayconversations.act.gov.au/accessing-health-care>

Building on Phase one consultation, a community panel was established to gather insights and perspectives about integrated care and the delivery of health care services closer to where people live.

Panel engagement activity was complex with detailed subject matter that participants were required to understand within the context of community needs that extended past their own.

General feedback on concerns, priorities, and aspirations for the design of future health care services across the ACT was discussed and included improving accessibility and flexibility of access for patients and their care givers, empowering consumer choice and control through people-centred care, better integration of services for non-English-speaking community members, better support for Aboriginal and Torres Strait Islander peoples to access health care the way they want to, rather than assuming everyone wants to access the same types of care the same way and transparency of information and effective information management so that patients have knowledge of, and input into the information on their record.

Concurrently to the integrated care panel activities, a six-week engagement program commenced from 18 October to 29 November 2022 to consult with the community on the early concept design for the new Northside Hospital.



Engagement for the Northside Hospital centred around 5 key themes that focused on understanding the user experience. It did not explicitly seek feedback on potential sites or commercial issues relating to the new Northside Hospital or on clinical services, which are being explored through development of an ACT Clinical Services Plan.

## 3.2 Areas of focus

Outcomes discussed in this report are gathered against the Phase one focus areas and additional information in subsequent phases as shown in table 2.

Table 2 Focus areas mapped against engagement phases and information sources.

	Phase one– YourSay	Phase two – Northside Hospital	Phase two – Integrated Care
Services	✓	✓	✓
Access	✓	✓	✓
Virtual health	✓		✓
Urgent care	✓	✓	✓
Quality and safety	✓	✓	✓
Coordination of care	✓		✓
Integrated care	✓		✓
New hospital	✓	✓	
Additional feedback		✓	✓

## 3.3 Governance structure

Communication Link delivered the engagement and communication activities for this consultation working with and under direction from CHS and ACT Health.

Communication Link worked at the direction of CHS and ACT Health. All collateral and content was prepared by Communication Link and approved by the relevant program managers.

CHS and ACT Health managed all internal ACT Government engagement and additional key stakeholder engagement in-line with advice from Communication Link. CHS and ACT Health channels were utilised for promotion, and this was coordinated from within CHS and ACT Health based on planning undertaken by Communication Link.

## 3.4 Promotion

Promotional activities were centred around a dedicated YourSay page (<https://yoursayconversations.act.gov.au/accessing-health-care>) that was adapted during the engagement phases.

For Phase one engagement, the YourSay page hosted the survey and the EOI form for the Integrated Care Community Panel. Both tools were promoted through ACT government social media channels, stakeholder emails, digital displays, OurCBR newsletter, ACT government intranet pages and through posters displayed in community health centres and walk-in centres.



The YourSay page was also used during Phase two Northside Hospital engagement. This included an early concept design, frequently asked questions, factsheet, activities list and virtual engagement session registration. Additionally, in-person and online events and engagement opportunities were promoted in a range of ways including through social media posts on ACT Health and ACT Government channels, OurCBR newsletter, Involved newsletter, Multicultural Community eNewsletter, via key stakeholder channels, draft Ministerial media release, stakeholder emails, ACT government intranet pages, posters displayed in community health centres and walk-in centres and corflutes displayed at pop-up locations.

### 3.5 Participation

The YourSay survey during Phase one (of 46 questions) received a total of 869 responses including 65 hard copy surveys.

A total of 56 expressions of interest were received to participate in the Integrated Care Community Panel. Of these, 35 people were selected to participate in the panel workshops and 30 confirmed their participation.

A total of 396 people participated in the Phase two Northside Hospital public engagement activities. Of these, 108 people provided feedback through the YourSay channel, 11 attended the stakeholder workshop and an additional 3 stakeholders provided separate feedback via email submissions. The remaining 288 participants provided feedback via the pop-up or drop-in sessions.



## 4. Process outcomes

Through the *Designing ACT health services for a growing population* project, the ACT community was provided multiple opportunities to engage with and provide feedback on various elements of ACT health care services – via completion of the survey on the dedicated YourSay page, participating in the community panel or by attending one of the in-person or online activities for Northside Hospital.

The three engagement streams delivered through this project, while having differing objectives, were developed around the foundation of eight key areas of focus:

- Services
- Access
- Virtual health
- Urgent care
- Quality and safety
- Coordination of care
- Integrated care
- A new Northside Hospital.

The summaries provided in this section are not designed to replace the detailed information contained in the reports outlined in table 1. These summaries are designed to provide an overview of the commonalities and repeated themes heard across consultation activities and provide a centralised record of this.

The online survey in Phase one aimed to explore people's experiences in accessing ACT public health services and gain a high-level understanding of the community perception of the health system and what they want and need from health services.

In Phase two, the community panel was formed to gather informed perspectives to help shape CHS' planning to provide the right relationships and infrastructure to support integrated health care services closer to where people live.

The public engagement activities were designed to gather views and feedback to inform early planning for the new Northside Hospital. Engagement centred around the early concept design to help understand community sentiment and health care service priorities for the facility.

### 4.1 Health care services across the ACT

Throughout the program of engagement, survey respondents, and panel members demonstrated their awareness of the health care services available across the ACT. Survey respondents noted the top three services they were aware of: the hospital emergency department (97%), walk-in centres (94%) and hospital in-patient (91%). The services with the lowest community awareness were counselling and social work (49%) care for older people (43%) and justice health (29 %).

Information given to panel members on the range of services available across the ACT was gratefully received. The Integrated Care Community Panel advised that additional information could be provided on lesser-known services and greater access to information on service availability and access would be beneficial.

Those providing feedback through Northside Hospital engagement activities did not explore current health care services. The focus of this engagement was to obtain feedback on the health care services they would like available in a future hospital environment.



### 4.1.1 Walk-in centres and community health facilities

Survey respondents were asked if they had visited a walk-in centre in the last two years. 65% answered yes, with the locations ranked in order of most visits being Belconnen (231), Gungahlin (155), Tuggeranong (107) and Weston (106).

Survey respondents were also asked if they had visited a Community Health Centre in the last two years. 34% answered yes, with the locations ranked in order of most visits being Belconnen (141), Gungahlin (99), Dickson/Inner North (36), Phillip (34), Weston (26) and City (16).

Panel members were not explicitly asked if they had used these services, however, they provided advice on the current and future use of these facilities. For example, panel members strongly supported a proposal that walk-in centres and community health facilities provide a mix of services rather than specialising in specific services. These results indicate an expectation that more services will be available at health care centres. However further discussion revealed understanding that there are not necessarily enough relevant specialists to enable services to be provided consistently across each centre.

Throughout the panel process, panel members regularly shared strong positive sentiment for the availability of walk-in centres. Members noted that if improvement could be made to these services it would include an option to book a scheduled appointment as well as ability to walk-in and be seen, implementing a transparent triage system, access to wait times and facilities that would make it easier for parents or guardians to wait with children at the service location.

For Community Health Centres, participants noted the potential for these to expand to include greater service access and access to specialists, as well as pharmacy services. Panel members showed strong support for proposals to offer virtual health appointments facilitated by a community health centre staff member and using community health facilities for education and awareness-raising sessions for members of the public.

## 4.2 Accessing ACT health care services

Building on commentary around access to walk-in centres, when asked about services, the community was asked which services they would like better access to which are not currently available in their area. Survey respondents' most mentioned services were paediatrics (19%), mental health (15%), walk-in centre (8%), hospital (7%) and pregnancy (5%).

The demand and need for a number of these services was further reinforced by the feedback regarding health care services people would like to see at a new Northside Hospital. Twenty-one percent of overall feedback received on a new Northside hospital related to clinical, or health care services respondents wanted to see. This included paediatric services (27%), maternity or pregnancy services (12%) and mental health services (6%), which aligns with the outcomes of the Phase one survey.

### 4.2.1 Navigation and coordination of care

As was identified by the panel and highlighted through the survey, consumers often find it difficult to navigate the health system, when coordinating care and arranging health services with more than one provider. Other key issues relating to coordination of care raised through both engagement streams included poor customer service, access to transport to get to services, cost of services and lack of access to bulk billing.



### 4.2.2 Financial access

Cost, lack and difficulty accessing bulk billing services was a consistent theme throughout both streams of engagement. The community panel noted that services are not always transparent about offering bulk billing and many were confused about why some providers did not offer bulk billing. This then presented a barrier for community members in terms of being able to afford to access the service and restricted choice in relation to service providers and wait times.

### 4.2.3 Services that cater for diverse consumer needs

Through all engagement streams, feedback was consistently noted that spoke to a need for better services with greater individual choice to support diverse consumer needs. This included people who do not speak English as their first language, LGBTQIA+ people, people with different cultural needs, people with disability (both visible and invisible) and Aboriginal and Torres Strait Islander peoples.

## 4.3 Virtual health care services

Responses to each engagement stream revealed that the ACT community is aware of, and where possible and appropriate, open to utilising virtual health care services. delivered via phone or video.

When asked about virtual health in the YourSay survey, the majority (83%) of survey respondents were supportive of it being offered as a service option. However, when asked for their preferred way to receive services, only 10% of respondents indicated it was their preferred approach.

### 4.3.1 Barriers and opportunities to accessing virtual care

Community panel participants expressed that virtual care was a good option to have for consumers. However, they also noted that there are times when it is not the best option for an individual (such as needing a physical examination), and that there are financial, technological and capability issues that create barriers for some consumers in accessing virtual health care services. The physical technology and connectivity required to access virtual care is not affordable for all consumers, nor was the cost of a virtual consultation with many providers charging the same as an in-person appointment without the option to bulk-bill.

Those in favour of the service indicated that as an offering for routine or minor ailments and script renewals, it was supported. It was also noted through the community panel that it has great potential for those not able to easily access services in person, such as those with a disability, those in rural or remote areas, and for areas like mental health services.

### 4.3.2 Enabling access to virtual health care

In consideration of the consumer principles developed by the community panel, as well as feedback received from participants on barriers to accessing virtual care, CHS proposed that virtual care could be offered as a health service option; however, it needs to suit individual circumstances and preferences, with technology and user support available. It could be made available at community accessible locations including walk-in centres. This suggestion was strongly supported by participants and aligned with the community panel principles and conversations around providing support out of the home, to access virtual care services.

People who engaged with the Northside Hospital programs also provided feedback suggesting that a new Northside Hospital could be a good location for providing access to virtual health, telehealth, and virtual visits. A hospital could enable accessibility to these services by ensuring the technical ability to enable this in a user-friendly way for those who may not have access to relevant technology, or who may require support to navigate a virtual or telehealth appointment. This could include providing a space, technology and in-person support to book and attend these appointments, potentially



lightening the load and demand for in-person hospital consultations through the Emergency Department or after hours services. This is consistent with feedback received from the Integrated Care Community Panel.

## 4.4 Accessing urgent care

Engagement revealed that the ACT community is aware of the options available to them outside of a hospital emergency department, for accessing urgent / immediate care.

Over 70% of survey respondents have attended a walk-in centre and over half have used the Health Direct phone line (51%).

The community panel advised they would like greater access to walk-in centres. They noted that longer opening hours would help keep more people from presenting at an emergency department, and greater transparency about wait times and triaging, would result in a timely consultation.

The community panel also discussed the need for clear data and information systems integrated into urgent care services to support parents and carers and reduce stress when they are accessing emergency paediatric care for their children and those in their care. These systems should focus on effective capture of data and information and be used to reduce the need for parents to repeat information. This data and information should also be easy to share more broadly outside of immediate urgent and emergency care so that it is applied and factored into the integrated care planning/approach for an individual.

When accessing urgent care, location was identified as the most significant factor in the YourSay survey.

Sixty per cent of survey respondents indicated that they would like a new Northside Hospital to have an emergency department as is currently available at the Bruce Calvary Public Hospital.

Out of those asked what clinical services should be available at the new Northside Hospital, 16% identified emergency services. Other comments asked for a larger emergency department, to reduce waiting times, or the need for specialist emergency areas such as maternity or paediatrics. There was also feedback suggesting that better services in other areas could reduce the reliance on the emergency department.

## 4.5 Quality and safety of ACT health care services

There were a range of topics noted across each of the engagement streams that participants felt were important in delivering health care services that they would consider safe and high quality.

Survey respondents were asked what a health service needs to have to assure them of its quality and safety. Most people provided multiple responses, with quality of service (94%), professional standards (89%), wait times (83%) and good customer service (82%) all ranked highly in the YourSay survey. Culturally appropriate services were also important to quality and safety for 35% of respondents.

A recurring focus on resourcing and training appeared in all engagement streams. Those who engaged with the Northside Hospital activities provided feedback about the need for staff training in cultural awareness, need for diverse staff to work with diverse patients, attract and retain specialists and training new medical professionals. Feedback from this cohort also noted that to have confidence in a health care facility, there it needs to be adequately staffed, and staff must have received appropriate training and experience.



The community panel also expressed these priorities through the consumer principles developed – see Appendix A. These focused on support for staff and caregivers, patient input, and consultation into their individual care with increased access to more health care services, with a focus on better resourcing.

## 4.6 Coordination of care

Opportunities to improve coordination of care across providers was evident through the YourSay survey and was a considerable focus of the community panel discussions.

Communication between service providers was noted as a key issue in both engagement streams.

The community panel noted it was sometimes hard to understand how to access health care services. Many participants noted that navigating the system to access more than one service was very difficult and they had experienced difficulty gaining support or assistance.

Through the community survey, it was reinforced that many people experience issues in navigating the health system to be able to coordinate services. This included not knowing how to organise appointments across public/private systems, what to do when providers are unresponsive and dealing with the volume of administration involved. Panellists also said it was often hard to contact or be contacted by health service providers. This is often compounded when people have more than one provider to deal with, complex health issues, disability, or when coordinating services for their children and panellists noted that this could become very stressful.

## 4.7 Delivery of integrated care solutions

Responses throughout this engagement program have revealed that ACT consumers believe that enabling integrated care across a wide range of services would be beneficial for both the patient and care providers.

### 4.7.1 Understanding integrated care

Survey respondents were asked questions about the term ‘integrated care’, with 69% indicating that they were not familiar with the term. When asked to describe what they think it means, 52% showed through their responses that they had a broad understanding that the term related to multiple healthcare providers communicating and working together to deliver the best possible healthcare to a patient. Most of these responses included ‘multidisciplinary’, ‘holistic’, ‘coordinated’ or similar.

### 4.7.2 Expectations of integrated care solutions

The community panel was provided a definition of integrated care and asked to reflect on how they thought this could be demonstrated through ACT health care system. Continuity of care was a primary consumer principle developed by the panel, defined as ‘the want for a seamless experience when going between health care providers’. This aligned with the survey responses that noted integrated care as encompassing health care that was ‘multidisciplinary’, ‘holistic’, ‘coordinated’, or similar.

Those engaging with Northside Hospital activities were not asked to consider integrated care solutions explicitly, however, feedback received noted an expectation for the new hospital to integrate with community care, mobile care, tertiary care, and walk-in centres/health hubs.



## 4.8 A new Northside Hospital

Centred around the early concepts for the Northside Hospital and focusing on understanding the user experience, the Phase two Northside Hospital engagement program and YourSay survey revealed a range of community expectations for this project.

The Integrated Care Community Panel were made aware of the engagement activities underway and encouraged to participate, however a new Northside Hospital was not a focus of the panel's work.

### 4.8.1 Safety

Most survey responses (60%) related to quality and safety. Of these responses, 49% talked about workforce and 32% mentioned wait times. The most common feedback overall was that the existing hospitals are understaffed and as a result, the wait times are excessive. Respondents suggested that a new hospital requires adequate staffing levels to provide quality care. Other topics mentioned under quality and safety included service quality, professional standards, and public safety.

Feedback relating to safety from the Northside Hospital engagement activities included providing a safe and hygienic environment, the need for decreased patient load, and cultural, socioeconomic, or religious bias impacting on safety.

### 4.8.2 Services

A large portion of survey responses (45%) related to desired clinical services including emergency, mental health, oncology, maternity, allied health, and paediatrics. This aligned with feedback received from the Northside Hospital engagement activities that revealed those engaged expected the hospital to have an emergency department, would like it to be larger than what currently exists at the Calvary Hospital in Bruce and to have additional services that encompassed oncology.



## 5. Conclusion and next steps

Following the conclusion of the *Designing ACT health services for a growing population* engagement activities, a wealth of information has been presented that will help to inform future health service planning.

At the conclusion of the Community Panel, CHS was presented the eight consumer principles developed by the community panel. The CHS team reviewed the consumer principles and presented panel members with proposed actions to address some of the expectations identified in them.

The panel provided confirmation that they would like to see the principles visually reflected in relevant CHS policy and documentation, including on the CHS website. The panel also noted that they would be supportive of user assisted access to virtual care sessions at community-based locations.

The CHS team will continue work to demonstrate the expectations of the consumer principles as it designs and delivers new health care solutions across the ACT into the future. The principles will guide how and where care is provided to cater for the diverse requirements of the local community.

Outcomes from the Northside Hospital engagement program will inform the next stage of planning and early design concept options for the new hospital and potential funding decisions by ACT Government. There will be more opportunities for community engagement over the next few years as the Northside Hospital planning project progresses.



## Appendix 1 – Consumer principles

	Defined	In action
Respect, equality, equity	Consideration of each patient's individual circumstances. Acknowledgement of an individual's culture, belief system, communication, and physical needs so that the care considered and provided is both clinically and personally appropriate.	<ul style="list-style-type: none"> <li>• Training provided to health care providers and support staff who engage with the community at health care service locations so that they are aware of cultural sensitivities and can identify when a patient or community member may require additional support, including the elderly, to actively participate in their health care journey.</li> <li>• Access to representatives who can advocate for, represent, or support those who may have diverse medical needs, be of advanced age, or have unique cultural requirements.</li> <li>• Acknowledgement of Australia as a highly multicultural society through visual and obvious commitment to serving our community at each health care service location so that people from all walks of life feel comfortable to attend.</li> </ul>
Accessibility	Support for patients to access health care services that provide for an individual's communication, financial, physical and environmental requirements in a timely way.	<ul style="list-style-type: none"> <li>• Patient access to resources that identify service availability and wait-times to enable self-selection of service and service providers.</li> <li>• Health care services that respond to individual cultural and social needs by having relevant community representatives available or accessible to support patients when needed.</li> <li>• Clarity in options of financial access, for those needing or seeking support to see a GP so that it is clear where subsidised GP appointments are available.</li> <li>• The tools and functionality to remotely view wait times when in community health intake.</li> </ul>
Clear navigation information and assistance	Provision of clear information, via accessible channels, that supports people of all backgrounds and literacy levels to	<ul style="list-style-type: none"> <li>• Information to be made consistently available across a range of formats to cater to the communication and literacy levels of the community.</li> </ul>

	Defined	In action
	understand, navigate and participate in their journey within the health care services that they need.	<ul style="list-style-type: none"> <li>Information to be made available in an appropriate format via communication channels relevant to individuals, where they seek it.</li> <li>Mechanisms in place for clear, consistent, and timely communication between providers, and between providers and patients when action is required by one or more parties.</li> </ul>
Integrated, well trained, and supported staff	Health care professionals who are supported to participate in an integrated and open health care journey with the patients, considering their views and experience as well as clinical treatment.	<ul style="list-style-type: none"> <li>Having programs and technology available to capture and share the patient health care journey with relevant health care providers.</li> <li>The ability for patients to provide input into records and information available to relevant health care provider via integrated programs.</li> </ul>
Person centred, individualised care	Health care services provided in consideration of the individual as a whole, considering their individual medical, emotional, communication, education and cultural needs and sensitivities and aim to treat the person long-term as well as the immediate issue at hand.	<ul style="list-style-type: none"> <li>Individualised care plans developed with each patient, with input from all relevant health care providers, and plans available and accessible via secure integrated programs.</li> <li>Health care professionals working with patients to identify health care goals and integrating these into individualised care plans.</li> <li>Consideration of alternate health options that may complement clinical treatment, i.e., pet therapy.</li> <li>Flexibility, control and choice over when and how patient care is provided.</li> </ul>
Appropriate care for Aboriginal and Torres Strait Islander community members	Commitment to self-determination and increased involvement of local Aboriginal and Torres Strait Islander communities in identifying preferred ways to access health care services and receive treatment and acknowledgement that one solution does not work for all Aboriginal and Torres Strait Islander communities.	<ul style="list-style-type: none"> <li>Providing health care services at facilities tailored to requirements identified through Aboriginal and Torres Strait Islander – led engagement. A clear focus on services that specialise in the diseases and illnesses that disproportionately impact this community so that patients can access the care they need where and how they want to access it.</li> <li>Providing equitable and culturally humble care to the indigenous community when considering treatment approaches and options.</li> <li>Ensure appropriate representatives are available or accessible to support patients in communicating individual needs or providing health</li> </ul>



	Defined	In action
		care providers with the cultural understanding required to provide the most appropriate care.
Transparency of information sharing	Patient confidence in accuracy and disclosure of relevant health and personal information – including patient experience, treatment specifications and cultural considerations – to all health care professionals who are a part of their health care journey.	<ul style="list-style-type: none"> <li>• Providing means for patients to have access to review the information retained on any file accessible by approved health care providers.</li> <li>• Patient experience feedback sought upon discharge or end of care to inform future care providers as well as address any issues identified.</li> <li>• Health care services share the measures that have been taken to address complaints or feedback which have a clear resolvable action,</li> <li>• Opportunity to provide input to healthcare records to prevent having to tell a person's story many times over.</li> </ul>
Continuous involvement from the community – partners not just involved	Community consultation undertaken to inform the development and establishment of new health care services showing that local patients have input into the design of services available.	<ul style="list-style-type: none"> <li>• Engagement with the community in co-design processes at relevant stages of service and facility design, where possible.</li> <li>• Public reporting that aligns to the outcomes of initial community consultation and provides updates to ensure currency and relevancy.</li> <li>• Community involvement in identification of service requirements for areas across the ACT so that health care services are delivered to meet the unique needs of the community it will service, i.e., more services focused on aged care,</li> <li>• Involving the community in the identification of unique cultural or community-specific training and inclusion requirements so that staff are empowered to provide the best and most appropriate care for the community they service.</li> </ul>

