

# Health Consumer Representative communication plan

Tools and resources for [Consumer and community engagement | Queensland Health Intranet](#)

Consumers link: [Health consumer representatives | Central Queensland Hospital and Health Service](#)

## Overview

Effective communication in health care delivery is essential for patient safety and the development of high-quality health care services. This is no less important for our health service and the consumers who engage with our services as health consumer representatives. Demonstration of transparent, two-way communication is crucial for building trust and ensuring meaningful engagement.

Our health service has an established Health Consumer Network. Our health consumer representatives engage in many ways at various levels of engagement. It is most critical to ensure our network is well informed with matters that are important to them and their communities.

This plan has been developed in consultation with the Consumer and Community Advisory Committee, as a direct result of their request to be well informed to support the health service to deliver *Great Care to Central Queenslanders* and to ensure the community voice is heard and responded to appropriately.



## Key outcomes

We will ensure our communication with our networks are:

- Timely
- Relevant
- Informed
- Transparent
- Plain English

## Areas to consider and potential barriers

### Health Consumer Representatives:

- Culturally and Linguistically Diverse backgrounds
- Diverse health literacy and health system levels
- Varied experience and skills
- Access to technology and internet
- Communication mode preferences

### Organisational:

- Prioritising of workload and in particular clinical demand impacting priorities and timeliness
- Governance – the layers included in the governance committee structure and key support roles with different operational and professional reporting lines
- Organisational change – organisational change including changes in executive leadership
- Technology – varied systems and platforms

## Our plan

In this communication plan we will set out a structure for how we will communicate with health consumer representatives. As well as how we will inform our health consumers representatives of pathways to follow when communicating with us. With our Consumer and Community Advisory Committee as our first level priority, as they need to be well informed to support their engagement with us and on behalf of the Central Queensland community.

This plan will:

- Identify two-way communication methods
- Identify key stakeholders
- Improve the consistency and strategic alignment of communication
- Improve accessibility and availability of information in various formats and channels
- Close the feedback / communication loop

## Stakeholders

Our stakeholders can be formed into the following groups:

### Health Consumer Representatives

Our health consumer representatives are those who have joined our CQ Health Consumer Network.

They include:

- Consumer and Community Advisory Committee (CCAC)
- Appointed to specific roles on committees
- Consumer Advisory Groups (CAG)
- Consumer Advisory Networks (CAN)

### Organisational

- Committee and groups leads and secretaries
- Recruitment and selection panel chairs
- Central Queensland Hospital and Health Board
- Health Service Chief Executive
- Executive Directors / Executive Sponsor
- Quality and Safety Unit
- Marketing and Communication team
- Practice Leader Patient Experience and Consumer Engagement
- Senior Communication and Engagement Officer
- Aboriginal and Torres Strait Islander Health and Wellbeing, Snr Project Officer Community Engagement
- Media manager

### Community

- Local councils
- Community groups
- Communities of interest
- Traditional owners and Elders

## **Government**

- Member of Parliament offices
- Ministerial or District correspondence
- Department of Health

## **Relevant organisations**

- Health Consumers Queensland
- Central Queensland, Wide Bay, Sunshine Coast Primary Health Network

## **Communication channels**

Our health service has the following channels and methods of communication:

- Media releases
- Website
- Social media
- CQ Health Consumer Network e-newsletters
- Direct email through committees
- Video and phone communication
- In person meetings
- Staff newsletter (the Drift)
- Surveys / feedback / questionnaires
- Representation at community events
- On Country gathering / meetings with Elders, key community leaders and community groups

## **Triggers for informing**

- Committee correspondence
- Community and/or Consumer request for information
- Community health concerns (access to services, wait times)
- Executive, board, or ministerial correspondence
- Hospital or health emergency responses
- Media, in the news or political
- Organisational change including service design and delivery engagement
- Organisational wide accreditation surveying
- Public health event (COVID, environmental)

## **Communication escalation and feedback**

### **Consumer and Community Advisory Committee**

Consumer and Community Advisory Committee (CCAC). This consumer-led committee plays an essential role within the health service and community. The committee speak directly with Executive regularly. Communication requests and/or escalation should be emailed to the secretariat at

[CQHHSEDFN@health.qld.gov.au](mailto:CQHHSEDFN@health.qld.gov.au)

### **Committees, groups, and networks**

Health Consumer Representatives engaging in any of our committees, networks or groups can request information or to escalate matters of importance or concerns through their secretariat, chair, or key contact staff member.

All personal experience (consumer or carer) feedback on hospital and health services outside of our Health Consumer Representative format must follow our compliments and complaints process:

<https://www.cq.health.qld.gov.au/about-us/contact-us/how-we-treat-your-feedback>

### **Process**

We will use this simple method to develop communication for Health Consumer Representatives:

- Message: What do we need to tell them?
- Channel: How are we going to tell them?
- People: Who's responsible for doing it?
- Deadline: By when does it need to happen?

The following table details communication type, methods, channels, audience, and responsibility

## Central Queensland Hospital and Health Service information flow to Health Consumer Representatives

Communication Method / Activity	Details	Audience	Responsibility	Timeframe	Approver/ Custodian	Communication type/format
CE Engage	Purposeful messaging from Health Service Chief Executive (HSCE)	CCAC CAGs	Marketing Manager prepares CCAC Secretariat distributes	As received (within 24 hours)	HSCE	Email
CQ Health Staff News	Workforce e-news, important messaging to all staff	CCAC CAGs	CCAC Secretariat	As required / when relevant	Executive Sponsor	Email
The Drift	Workforce Newsletter (PDF) sent every Friday. Good news, light information sharing to workforce.	CCAC	Media Manager	Weekly (Friday afternoon)	Marketing Manager	Email
Media Releases	Proactive good news stories.  Responses to questions from media, sharing of topical information to media for community.	CCAC	Media Manager	As required (Within 24 hours)	HSCE / Marketing Manager	Email / Website / Social media
CQHHS National Standards Newsletter and Accreditation updates	CQHHS Quality & Safety Unit developed newsletter Email/other updates	CCAC CAGs	Patient Experience and Consumer Engagement Practice Lead	Monthly / when relevant	PEACE P/L	Email
CCAC consumer specific correspondence and documentation	All relevant documents Research opportunities, engagement opportunities not business as usual, areas of interest	CCAC CAGs	CCAC Secretariat	As required (One week prior to meeting)	PEACE P/L Executive Sponsor CCAC Chair	Email  Phone call/s as required

Communication Method / Activity	Details	Audience	Responsibility	Timeframe	Approver/ Custodian	Communication type/format
Committee, groups, network meetings and related correspondence	All relevant documents: agenda, papers, terms of reference, correspondence	Any committee, group, or network	Secretariat	As required / monthly  (One week prior to meeting)	Chair	Email as well as save documents to calendar appointment  In person  Video conference
CQ Health Consumer Network (Health Consumer Representatives)	<a href="#">Website</a> Information for health consumer representatives, access to: <ul style="list-style-type: none"> <li>• Forms</li> <li>• Training</li> <li>• Support</li> <li>• Resources</li> <li>• Information and guides</li> </ul>	Health Consumer Representative network	Communication and Engagement officer	As required	Marketing and Communication	<a href="#">Website</a>  Hardcopy to be offered as required to suit consumer need
CQ Health Consumer Network (Health Consumer Representatives)	e-newsletter for health consumer representatives, topics include: <ul style="list-style-type: none"> <li>• Training/skill building</li> <li>• Expressions of interest</li> <li>• Publication reviews</li> <li>• Surveys</li> <li>• Recruitment panel opportunities</li> </ul>	Health Consumer Representative network	Communication and Engagement officer  And/or  Patient Experience and Consumer Engagement Practice Lead	As required / monthly scheduled	Marketing and Communication	Email  Hardcopy to be offered as required to suit consumer need

<b>Communication Method / Activity</b>	<b>Details</b>	<b>Audience</b>	<b>Responsibility</b>	<b>Timeframe</b>	<b>Approver/ Custodian</b>	<b>Communication type/format</b>
Annual Evaluation 'Consumer Check-In Survey'	As per Health Consumer Representative policy and auditing schedules.	Health Consumer Representative network	Patient Experience and Consumer Engagement Practice Lead	Annually	Not required	Email  Hardcopy to be offered as required to suit consumer need
Annual membership renewals	CQ Health Consumer Network membership is current for 12 months.	Health Consumer Representative network	Patient Experience and Consumer Engagement Practice Lead	Annually / as required	Not required	Email  Hardcopy to be offered as required to suit consumer need
Traditional owners / Elder meetings	Engaging with local Aboriginal and Torres Strait Islander communities on Country, where culturally appropriate	Elders, key community leaders, community groups and consumers	Aboriginal and Torres Strait Islander Health and Wellbeing Team, Workforce as required	As required	Executive Sponsor	Email  Phone call/s as required  In person  Community events

## Health Consumer Representative information and escalation flow into Central Queensland Hospital and Health Service

Health Consumer Representative/s	Details	Responsibility / Contact	Response Timeframe	Approver	Communication type/format
Consumer and Community Advisory Committee (CCAC)	Committee requests relating to: <ul style="list-style-type: none"> <li>- Agenda</li> <li>- Guest</li> <li>- Topic</li> <li>- Meeting details</li> <li>- Meeting apology</li> </ul>	Secretariat for escalation to Executive Sponsor as required <a href="mailto:CQHHSEDFN@health.qld.gov.au">CQHHSEDFN@health.qld.gov.au</a>	2 working days	Not required	Email Phone call Teams In person
	Escalate concern: <ul style="list-style-type: none"> <li>- Relating to committee</li> <li>- Engagement/partnership issue</li> <li>- Payment/remuneration concerns</li> </ul>				
	Discuss: <ul style="list-style-type: none"> <li>- Key topic for quality improvement</li> <li>- Engagement request</li> <li>- National Standard 2 – Partnering with Consumers related topic</li> <li>- Arrange mentoring and support</li> <li>- Discuss training needs</li> </ul>	Patient Experience and Consumer Engagement Practice Lead <a href="mailto:CQHHSPatientExperience@health.qld.gov.au">CQHHSPatientExperience@health.qld.gov.au</a>	2 working days	Not required	Email Phone call Teams In person

Health Consumer Representative/s	Details	Responsibility / Contact	Response Timeframe	Approver	Communication type/format
Consumer Advisory Groups (CAGs) Consumer Advisory Networks (CANs)	Committee requests relating to: <ul style="list-style-type: none"> <li>- Agenda</li> <li>- Guest</li> <li>- Topic</li> <li>- Meeting details</li> <li>- Meeting apology</li> </ul>	Key staff lead for the engagement activity. If unable to contact and need to escalate: Secretariat <a href="mailto:CQHHSEDFN@health.qld.gov.au">CQHHSEDFN@health.qld.gov.au</a>	1-5 working days	Not required	Email Phone call Teams
Health Consumer Representative Network	Requests relating to: <ul style="list-style-type: none"> <li>- application process</li> <li>- engagement journey</li> </ul>	<a href="mailto:CQHealthConsumerNetwork@health.qld.gov.au">CQHealthConsumerNetwork@health.qld.gov.au</a>	As required	Not required	Email Phone call Teams
Health Consumer Representative – each other	<ul style="list-style-type: none"> <li>- Requests for information</li> <li>- Seek and provide updates at committees</li> </ul>	Various	As required	Not required	Email Phone call Teams In person