# Alcohol and Other Drugs (AOD) Consumer Engagement Framework





NSW Ministry of Health 100 Christie Street ST LEONARDS NSW 2065 Tel. (02) 9391 9000 Fax. (02) 9391 9101 TTY. (02) 9391 9900 www.health.nsw.gov.au

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# Message from the AOD Consumer Reference Committee (CRC)

We welcome this opportunity to work with the AOD Branch, seeking to build relationships between consumers and staff that lead to improved service provision on the ground. It's an amazing opportunity for the CRC to see how the AOD Branch operates and enables interested parties to engage in the process, inputting ideas and strategies that supports AOD Branch's work. It gives the CRC a platform to speak and be heard, creating a direct line of communication between policy writers and consumers, which effectively speaks of 'an ear to the ground' approach. The CRC recognises the importance of collaboration and is committed to participating in honest and open discussions around the issues impacting consumers.

The Consumer Engagement Framework is about bedding down processes to work closely alongside teams across the AOD Branch in a professional and timely manner. We hope the advice provided through the "consumer lens" assists in increasing AOD consumers' awareness of and education about AOD treatment services.

The CRC is passionate about progressing a number of priorities in the next 12 months. These priorities include earmarking vulnerable populations to engage with, encouraging closer links between AOD and mental health and advocating for increased resourcing and supervision in the AOD peer workforce. The CRC recognises the benefits of growing a peer and consumer workforce including better consumer engagement and wellness, improved service provision and to humanise and assist in the treatment pathway for consumers and carers which is often not an easy road.

The CRC looks forward to providing not only feedback but also being involved in developing policies and programs that aim to deliver consumer-focused AOD treatment. We are all delighted to be involved and look forward to not being a tokenistic 'tick box' committee but one that adds significant value.

Yours sincerely,

AOD Consumer Reference Committee (Co-written by Adrienne Jensen and Benjamin Steele on behalf of the CRC)

Robbie Lloyd

Ben Steele

Anne Sweeney

Adrienne 'Abbey' Jensen

Veronica Ganora

Melanie Joyce (NUAA representative)

Francine Campbell

Frannie Campbell

# Message from the A/Executive Director, Alcohol and Other Drugs

I'm delighted to have the opportunity to introduce you to the Consumer Engagement Framework for the Alcohol and Other Drug (AOD) Branch, Centre of Population Health, NSW Ministry of Health. The framework has been developed with consumers who are members of the Consumer Reference Committee (CRC).

The CRC is a co-led committee which was formed in late December 2018. The aim of the committee is to ensure that policies and programs delivered by the AOD Branch are person centered and address the needs of consumers.

Understanding and reflecting on the lived experience of consumers is pivotal to ensuring comprehensive strategies which address the impact of harm related to alcohol and other drug use in our communities and to the accessibility and appropriateness of services. The development of this Consumer Engagement Framework provides a pathway for the AOD Branch to consistently integrate the voice of consumers into harm reduction initiatives, policy, clinical practice, psycho-social support and all service delivery.

I am proud that this Consumer Engagement Framework was co-written with the members of the CRC. Building these kind of partnerships to ensure stronger communities and provide better customer service is such important work.

I would like to personally thank the CRC members for sharing their expertise and vision with the AOD Branch in the development of the Framework. It will be key to guiding the commitment of the AOD Branch to ensure consumer participation in all aspects of our work.

Daniel Madeddu, A/Executive Director, Alcohol and Other Drugs

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## Purpose of the AOD Consumer Engagement Framework in the AOD Branch

The purpose of the Consumer Engagement Framework, herein described as the Framework is to:

- Provide a pathway for consumer engagement that can be integrated into all activities within the AOD Branch
- Foster a partnership between the CRC and AOD Branch to ensure the CRC contributes meaningfully to the development and implementation of AOD Branch policy, programs and decisions
- Formally recognise the value of the lived experience of consumers and their role in informing and encouraging best practice in AOD programs and services.

Co-written by Kath Sutherland and Veronica Ganora

## How the Framework was developed

The CRC is a formalised diverse group of consumers with lived experience of AOD treatment who were selected through an expression of interest from across Sydney and also regional NSW. The CRC has had a thorough induction at the NSW Ministry of Health with Health Consumers NSW moderating consumer engagement training and two workshops to date. The training was valuable, it helped the CRC to understand the role of a health consumer and more specifically, our role as a CRC member in relation to the AOD Branch. At the training, we understood that the AOD Branch would like to work with the collective voice of the CRC. The AOD sector in NSW is very large and complex and the CRC now has a clearer understanding of how it fits within the AOD Branch at the Ministry.

Two workshops were facilitated by Health Consumers NSW to develop content for the Framework. At both workshops and the first official meeting, the CRC had significant influence throughout the process of discussing the content of the Framework, particularly the overall objectives and principles of the Framework which was fantastic. We could see that a lot of feedback has been sought and follow up by the AOD Branch. The AOD Branch listened and considered what the CRC said. This was evident in Workshop Two when we discussed the Consumer Engagement Approaches. The CRC feel like we've made a contribution and the AOD Branch is willing to hear what we say. The level of consultation by the AOD Branch has been consistent throughout the whole engagement process. We as a committee have contributed more than we would have imagined.

The Framework is the first step towards the CRC and AOD Branch really working together. We look forward to continuing the momentum of good collaboration.

Co-written by Anne Sweeney and Ben Steele

# **Goal of the AOD Consumer Engagement Framework**

Goal of the AOD Consumer Engagement Framework

People with a lived experience actively working together with the AOD Branch to improve the experiences of customers accessing health services who are impacted by alcohol and other drug use

## Through these guiding principles

Partnership Humanity: People First Diversity Meaningful engagement Participation

### By applying these engagement approaches

Inform Consult Involve Collaborate Empower and embed

## To achieve these shared objectives

Person centred care	Barriers are identified, addressed and overcome
Empowerment	Consumer participation is embedded and respected in all AOD work
Open communication	Promoting service delivery improvement

## Governance

The Consumer Reference Committee (CRC) is linked to the clinical governance structure of the AOD Branch.

The role of Committee members is to advise and to offer recommendations to the AOD Branch based on their own experience with accessing AOD services.

The main responsibilities of the CRC are to:

- Provide advice and support to assist in the development and implementation of a Consumer Engagement Strategy for the AOD Branch that aligns with its strategic directions
- Provide advice and recommendations to the AOD Branch on opportunities to improve engagement and communication with AOD consumers and the NSW community to inform the development of AOD plans, projects, programs and initiatives
- Serve as a reference point for the AOD Branch by offering recommendations and advice based on their own lived experience with accessing AOD services

The vital role of CRC members is to offer feedback to the AOD Branch on consumer issues at bi-monthly meetings, engaging with the AOD Branch and Consumer co-chairs or AOD Liaison Officer. The AOD Branch will use this framework as an operational guide to support engagement with consumers who are representatives on the CRC.

# **Benefits of engaging with consumers**

On Tuesday 5 February 2019, the CRC participated in an Introductory Consumer Representative Training session facilitated by Health Consumers NSW where they identified and discussed the benefits of consumers and carers, the AOD Branch and AOD services working together to improve consumers' experience.

#### Benefits to consumers and carers:

- Reduced stigma and discrimination
- Helps consumers and carers navigate the "unknown"
- Better health outcomes
- Link people into services better
- Encouraging management to listen to their community
- Increased trust and improved relationships between providers and consumers

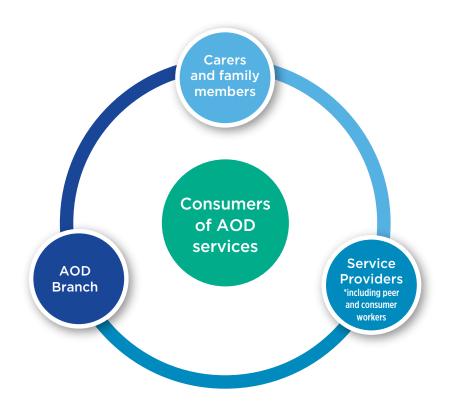
#### Benefits to service providers:

- Increased understanding that consumers come to a service with their own knowledge and expertise
- Services learn to meet consumers where they are at
- Support consumers on their pathway
- Meets accreditation requirements
- Increased attention to what is important to consumers accessing services

#### Benefits to the AOD Branch:

- Humanises and supports integration of the experience of consumers into the development of policies and programs
- Increases awareness of unique needs of consumers from diverse backgrounds
- Connects policy officers to honest feedback on the impact of treatment and care
- Provides a source of information to create training for staff
- Increases understanding of the complexities of consumer experience

The diagram demonstrates the partnership and participative approach to working together to improve the experiences of AOD consumers by respecting diversity, putting people first and engaging meaningfully with consumers and their carers. It also highlights how the Framework aims to embed consumer participation in all aspects of work led by the AOD Branch. This done by empowering and encouraging open communication with the CRC. The close collaboration amongst consumers, carers, service providers and the AOD Branch ensures that consumers accessing AOD health services is person centred and promotes service delivery improvement where barriers are identified, addressed and overcome.



# Principles of consumer engagement within the AOD Branch

#### Partnership

Working together as partners and creating opportunities to enable consumer expert perspectives to inform the work of the Alcohol and Other Drugs Branch.

#### Diversity

Being proactive in identifying and including diverse life experiences of consumers. Accepting and exploring individual differences including race, gender, sexual orientation, socio-economic status, religious beliefs in a safe, positive and respectful environment.

#### Participation

Listening to consumer voices in every aspect of the engagement process, valuing their important contribution and ensuring that their participation is meaningful to consumers themselves

#### Humanity: People First

Demonstrating respect and dignity for all. Showing empathy and compassion, and meeting consumers where they are on their recovery journey.

#### Meaningful engagement

Collaborating in a transparent and informed manner with a focus on improving the lived experience of service interaction consumers.

# **Objectives of consumer engagement within the AOD Branch**

#### Person-centred care

Person-centred care is about listening to and responding to what consumers are saying. It recognises that individuals define what success means for them and individual success is celebrated in its own right. It also refers to meeting consumers where they are at in their recovery.

#### Empowerment

Consumers are empowered and supported to build their capacity and platform as champions of the AOD lived experience. Consumers are recognised as being experts to engage with and inform the development of AOD policy and programs.

#### **Open communication**

Open communication is about listening to the lived experiences of consumers, valuing inclusiveness, transparency and sharing of information on education and treatment about AOD services in NSW. Efforts to break down barriers to foster open communication amongst a consumer's recovery network is a move towards patient-empowered care.

#### Barriers are identified, addressed and overcome

Identifying and addressing barriers is about recognising the difficulties in working towards equitable access to treatment. This involves improving consumers' ability to understand and use health information so that they can make decisions about their health care, engaging 'seldom reached' communities that may not be fully accessing services and identifying clients' unmet needs.

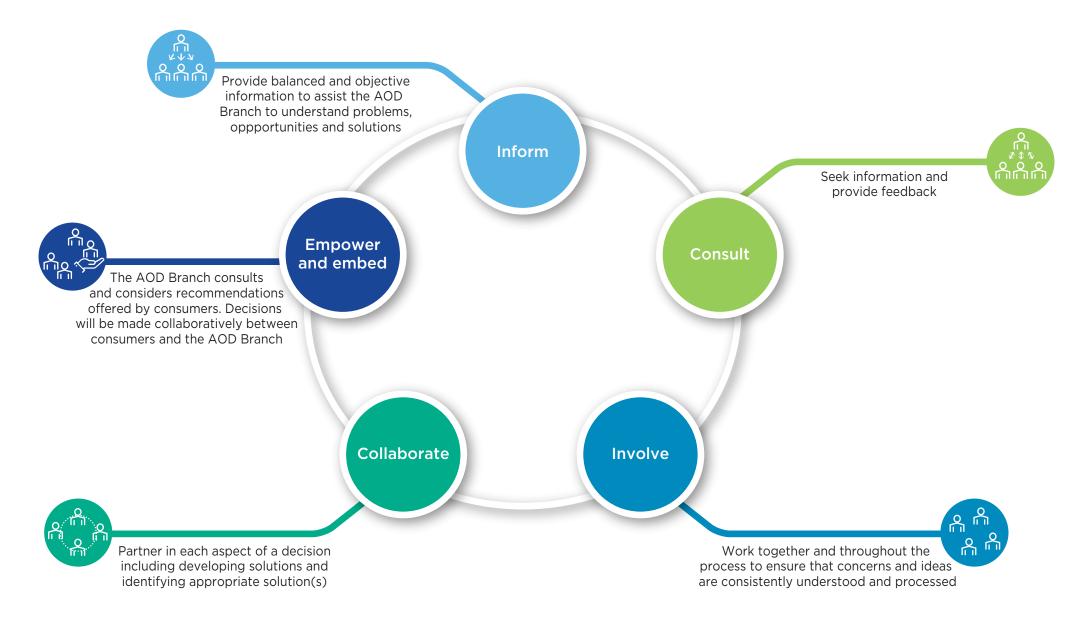
#### Consumer participation is embedded in all AOD work

To effect change is to have valued representation and meaningful participation from consumers and to embed consumer participation as a standard and accepted part of the policy development process in the AOD Branch. This will result in developing consumer-focused policy, programs and treatment services and increase the community's acceptability of being an AOD Consumer Representative.

#### Promoting service delivery improvement

To ensure consumer safety, we are committed to promoting continuous quality improvement of existing programs and services to improve consumers' experience, level of satisfaction of the service and success rates. Quality improvement of services also considers the timely availability of suitable services for consumers.

# **Consumer Engagement Approaches**



# **Consumer Engagement Approaches**





Inform is a process of sharing information between the AOD Branch and AOD consumers, their families and carers.

The process of informing can happen in two ways:

- Consumers informing the AOD Branch of their lived experience to understand problems, opportunities and solutions
- The AOD Branch provides opportunities for the community to understand and be informed of alcohol and drug issues that may impact them. The NSW Health's Your Room website is an example of sharing alcohol and drug information to increase awareness and understanding.

AOD consumers can be informed through many approaches which may include (but are not limited to) forums, workshops, media releases, fact sheets, social media, brochures, letters and videos. Consulting is an opportunity for AOD consumers to provide expert feedback, raise concerns, offer recommendations, discuss options and develop solutions.

Consultation presents opportunities for the AOD Branch to be informed, listen to and acknowledge concerns, and provide feedback on how consumer lived experience influenced the piece of work and/or decision.

In addition to working with the CRC, ways of consulting with the AOD consumers include undertaking focus groups, surveys, public forums and workshops, and online feedback. These activities entail providing one-off feedback.

### Involve



Involving AOD consumers is about working together with the AOD Branch throughout the process to ensure that concerns and ideas are consistently received, understood and considered.

The process of involvement is about ensuring that AOD consumers' concerns and aspirations for policy improvement are reflected in the solutions developed and provide feedback on how their input influenced the piece of work and/or decision.

The AOD Branch established the Consumer Reference Committee which is representative of the AOD community to be involved in the development and implementation of AOD policy and programs.

Involving AOD consumers may entail consumer representation on advisory panels, consultative committees, participation on multi-stakeholder forums and workshops for developing policies and programs. These activities may require consumers' ongoing participation.

## **Consumer Engagement Approaches**

Collaborate



Collaboration is a process of the AOD Branch partnering with AOD consumers in each aspect of a decision, including developing solutions and identifying an appropriate solution(s).

By collaborating, the AOD Branch seeks expert advice and innovation in forming solutions and incorporating AOD consumers' experiences and recommendations into decisions about AOD policy and programs to the maximum extent possible.

The AOD Branch collaborates with the Consumer Reference Committee to develop the AOD Consumer Engagement Framework.

Collaborating with AOD consumers could include participating in stakeholder initiatives, partnerships, selection panels, reference and working groups. Collaborative projects enable opportunities for co-design and sharing of responsibilities between AOD Branch and the Consumer Reference Committee.

### Empower and embed



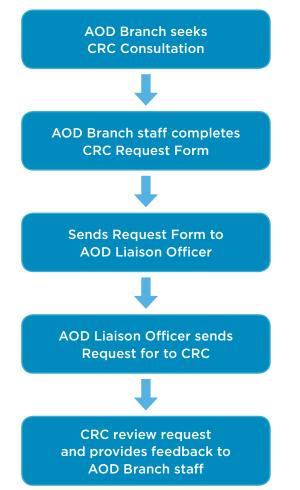
This approach ensures that all teams in the AOD Branch are committed to consulting and considering all recommendations by AOD consumers in all aspects of their work.

The CRC will have the opportunity to work collaboratively on developing the consumer engagement approaches that inform the implementation of the Framework.

AOD consumers will be empowered by taking leadership of CRC-led projects with support from the AOD Branch that aim to improve engagement with the community affected by alcohol and drug use.

## **Request Form Process**

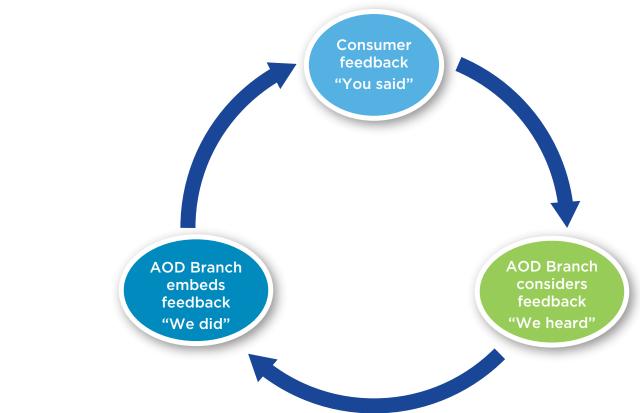
An **AOD CRC Request Form** was developed as a tool for the AOD Branch to facilitate a streamlined process for engaging with the CRC. The flow chart (below) outlines the process for engaging with the CRC by using the Request Form. The template for the Request Form can be found in the Tool kit of resources section.



## **Feedback Process**

It is important the AOD Branch informs the CRC about the outcomes oftheir work and where possible, at every stage of the consultation process. Similarly, it is also valuable for the CRC to provide feedback to the AOD Branch about their consultation experience. There are some feedback tools you may like to use to share constructive feedback:

- Consumer Reference Committee e-Survey
- AOD Branch Feedback Form
- CRC providing feedback as a standing item at bi-monthly meetings.



# **Toolkit of resources**

## **AOD Consumer Reference Committee Request Form**

The aim of the Request Form is to inform the CRC about the level of engagement that is being sought from them. This ensures the CRC is provided with focused information which will help them to determine their capacity to participate. In turn, this also ensures the AOD Branch is attracting the appropriate CRC member(s) with the expertise to offer feedback.

The Request Form includes questions related to:

- The aims and background information about the project
- Two to three key questions or tasks being asked of the CRC
- The nature of the consultation (i.e. providing one-off feedback, representation on an Advisory Committee, Working Group etc.)
- Frequency of meetings
- Deadline for responding to requests

## **CRC e-Survey**

CRC e-Survey is emailed to CRC members to provide feedback about how they were engaged by AOD Branch staff. This is a useful tool for the AOD Branch to continually improve engagement with consumer representatives.

## **AOD Branch Feedback Form**

The Feedback Form aims to provide the CRC with feedback about how their input influenced the development or implementation of the project. This is to be completed by the AOD Branch after consultation process is completed.

The Feedback Form includes questions related to:

- How consumer consultation added value to the project
- Barriers to consumer consultation
- Suggestions for improvement

## **Request to the AOD Consumer Reference Committee (CRC)**

Please complete the following form if you would like to consult the CRC for:

- Feedback on resources
- Consultation
- Seeking interest to participate on committees, focus groups, working groups

Complete sections of the form relevant to your request. You are encouraged to include attachments for more information.

Please send this form to Angela Hua, Senior Project Officer at Angela.Hua@health.nsw.gov.au

We will be in touch with you shortly.

Thank you for consulting with the CRC.

## **Tips for completing the Request Form**

- Use plain English
- Keep messages concise and clear as possible
- Provide definitions for acronyms
- Provide definition for medical terminology
- Use paragraph spacing to ensure readability
- Please refrain from 'copying and pasting' content language can appear bureaucratic
- Prioritise 2-3 key questions



Name:	Team:				
Project Title:	Email:				
Section 1: Please indicate how you will be engaging with the CRC by ticking the relevant level of engagement:         □ Inform       □ Consult       □ Involve       □ Collaborate       □ Empower and Embed         Section 2: What would you like the CRC to provide comment on?	<b>Section 7:</b> What are two-three key questions or tasks you would like to ask the CRC? [Provide at least two key questions you would like the CRC to respond to]				
[For e.g. provide feedback on a resource, options paper, participate as a consumer rep on a committee]	<ul> <li>Section 8: Where and when will the consultation, workshop, focus group etc. take place?</li> <li>[Include information about dates and location of the consultation and options for teleconference or Skype facilities]</li> <li>[If date and time hasn't been confirmed, advise that the schedule of consumer representative will be prioritised]</li> </ul>				
**Please complete this section for ad hoc requests or discrete pieces of work					
Section 3: Please provide an estimate of the number of hour/s likely to be spent on this activity.	**Please note: Complete this section if you are seeking consumer representation on a committee or working group				
Section 4: What is the aim(s) of the project?	Section 9:				
[Briefly outline the project's aims or goals]	<ul> <li>i. The Project Chair is requesting a Consumer Representative from CRC to participate on the [name of committee]</li> <li><i>• [Add information about the skills, knowledge and experience required, number of consumer representatives you would like, if there are any other consumer representation on the committee etc.]</i></li> <li>ii. Outline the frequency of meetings, how consumer representatives can</li> </ul>				
<b>Section 5:</b> Provide some background information about the project [Briefly describe the project for the CRC's information]	<ul> <li>participate in meetings i.e. face to face, teleconferencing or Skype</li> <li>[Provide details of number of meetings to attend, where meetings will take place, t/c or skype facilities]</li> </ul>				
	<ul> <li>iii. How long will the consumer representative be sitting on the committee?</li> <li><i>[Include time frames for how long the project will run for and the duration of a committee meeting]</i></li> </ul>				
Section 6: i. Who is the target audience(s)? ii. When and where do you plan to disseminate the resource or implement the project?					
iii. How will this project impact service users?	Section 10: When would you like the CRC to provide feedback by?				
	• [This includes dates of when you would like the CRC to be involved in consultations, committees etc.]				

# **CRC e-Survey**

Thank you for your participation in this engagement opportunity. We would appreciate your feedback about your experience so that we can continually improve. The survey will take approximately 3-5 minutes to complete.

To complete the survey, please select **FORWARD** message and place an 'x' in the box.

1. W	hich project were you involved in?	5. Please tick the appropriate box(s) which best describes the level engagement:	
			Inform
			Consult
2. D	o you identify as (you can select more than one)		Involve
	A support person (a family member, carer, friend, significant other)		Collaborate
	A community member		Empower and embed
	An individual working in the alcohol and other drug sector	6. What did you like best?	
	An individual working in another sector		
	Other (please specify)		
3. D	o you live:		
	In the metropolitan area	7. W	'hat did you like least?
	In a regional, rural or remote area		
4. D	o you identify as (you can select more than one)		
	Aboriginal or Torres Strait Islander		
	Culturally and Linguistically Diverse	8. D	o you have any further comments or suggestions for improvement?
	A person with a disability		
	A sexual and gender diverse person		
	A young person		
	None of the above		
	Other (please specify)		

With the engagement experience, how satisfied were you with the following (place an 'x' in the box)	Very Satisfied	Satisfied	Neutral	Unsatisfied	Very Unsatisfied	Comments/NA
Felt welcomed and introduced						
Felt your input was acknowledged and valued						
Felt comfortable sharing your experience and opinions						
Support and understanding was provided to you by staff						
The information was communicated in a way you understood						
The context and purpose of your role in the process was clearly explained						
How your input will be used to influence decisions was explained						
The information provided to you beforehand (i.e. meeting agenda and papers)						
Sufficient time was provided to complete the task						
I liked the engagement method and/or style used						
The day and time of the engagement was suitable						
The application and/or selection process for this engagement opportunity						
The reimbursement process						

## Feedback to the AOD Consumer Reference Committee (CRC)

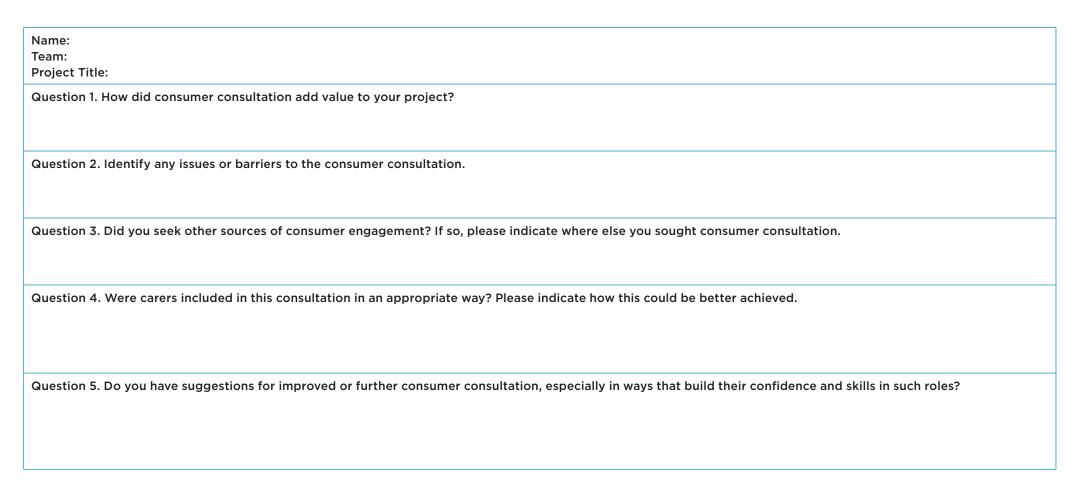
Dear AOD Branch staff,

The CRC request that you please complete this **feedback form** to indicate how their input has or has not been incorporated into the development of your project or consultation process.

The feedback form is a way of informing the CRC about what happened with their information.

Please send this form to Angela Hua, Senior Project Officer at Angela.Hua@health.nsw.gov.au

Thank you for your participation in consumer engagement.



## **Evaluation of the AOD Consumer Engagement** Framework

A process and outcome evaluation of the AOD Branch's Consumer Engagement Strategic Plan will be conducted after the first year of implementation in 2019/2020. The evaluation will also review the Framework and the Toolkit.

# Acronyms

ADAN	Aboriginal Drug and Alcohol Network	DATS Program	Drug and Alcohol Treatment Service Program		
ADF	Alcohol and Drug Foundation	ED	Emergency Department		
ADIS	Alcohol and Drugs Information Service	FASD	Foetal Alcohol Spectrum Disorder		
AOD Branch	Alcohol and Other Drugs Branch	FDS	Family Drug Support		
AHMRC	Aboriginal Health and Medical Research Council	IDAT	Involuntary Drug and Alcohol Treatment		
ATOP	Alcohol Treatment Outcomes Profile	LHD	Local Health District		
AOD Policy Unit	Lead and coordinate cross government AOD strategy and policy advice in the AOD Branch	MERIT Program	Magistrates Early Referral Into Treatment Program		
Description		NADA	Network of Drug and Alcohol Agencies		
Buprenorphine	A prescription drug which is taken as a replacement in treating heroin and methadone dependence <sup>1</sup>	Naloxone	A drug that can temporarily reverse opioid overdose		
Carer	Any individual who provides care and support to a family member or friend who has an alcohol or other drug dependency	NCETA	The National Centre for Education and Training on Addiction		
		NUAA	NSW Users and AIDS Association		
CCC Program	Continuing Co-ordinated Care Program	Prevention and	Lead AOD prevention, education, community development and harm		
CDAT	Community Drug and Alcohol Team	Harm Minimisation, AOD Branch	reduction policy and programs to reduce health, social and econom impact of AOD on individuals, families and community National Safety and Quality Health Service Standard 2: Partnering w patients in their own care		
Clinical Policy Unit, AOD Branch	Lead development, implementation and monitoring of AOD clinical policy, programs and treatment services	NSQHS Standard 2			
Clinical Safety and Quality Branch	Focus AOD and health policy and services on person centred, safe and quality care by improving corporate and clinical governance, data and information, and stakeholder engagement	NSQHS Standard 5	National Safety and Quality Health Service Standard 5:		
Consumer	A person who uses or has previously used AOD services. This includes	ΟΑΡ/ΟΤΡ	Opiate Agonist Treatment/ Opioid Treatment Program		
	family, carers and significant others, regardless of whether they use the services themselves. It can also include people who are refused services or refuse services <sup>2</sup>	PREMs	Patient Reported Experience Measures		
		PROMS	Patient Reported Outcome Measures		
Consumer leaders	Patients, service users and carers who work with, and for others to influence decision-making at a strategic level	SUPPS	Substance Use in Pregnancy and Parenting Services		
DAMEC	Drug and Alcohol Multicultural Education Centre	System Enablers Unit, AOD Branch	Lead development, implementation and monitoring of AOD services delivered through non-government organisations, court diversion		
DANA	Drug and Alcohol Nurses Association		programs, and engagement with other health service providers		
DASAS	Drug and Alcohol Specialist Advisory Services	TOR	Terms of Reference		

1 Carers NSW Australia https://www.carersnsw.org.au/facts/who-are-carers

2 The reason why we're here. Uniting Care, Re Gen. Page 11



