




## Ways to engage consumers, carers and communities

A starter menu of methods  
and important questions

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about this section 


## About the Learn what's strong and what's wrong cards

Find out what to keep doing (what's strong) and what to change (what's wrong).

*For example, some parts of a service may work well and other parts might need big or small changes. A community facing health challenges will also have strengths.*

Use the **blue method cards** to choose a few methods instead of relying on one. 


Use the **red important questions cards** to follow the Six ways of working. 


about this section 


## About the Find and make ideas cards

When we know what needs to change we can design things. Making can help us to think differently.

*For example, if we know a waiting room needs to change we might collect inspiration from other services in and outside of health. Then, we might draw it and build models from cardboard or something else.*

Use the **pink method cards** to decide what to do. 


Use the **red important questions cards** to follow the Six ways of working. 


about this section 

## About the Try things out cards

Talking about ideas in meetings isn't enough. Before we spend money, we need to try ideas to learn what works, what doesn't and to make improvements.

*For example, we might build a cheaper version of a new waiting room using cardboard to try it out with different people. Then, make changes to the design before making it for real.*

Use the **green method cards** to decide what you'll do. 

Use the **red important questions cards** to follow the Six ways of working. 



# About the Learn what's strong and what's wrong cards

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*For example, some parts of a service may work well and other parts might need big or small changes.*

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# Important questions

while you are learning ...  
what's strong  
and what's wrong

Card 1 of 4

important questions (1 of 4)



**Who needs to be involved?**

What do they need to take part?

Are we expecting communities to come to us?

Are we expecting one method (e.g. surveys) to work for everyone and tell us everything?

What else could we use?



important questions (2 of 4)



**Who don't we hear from?**

**What do data and stories tell us?**

Such as learnings from past projects and reviews, complaints and compliments, audits, patient stories, advocacy, research, etc.

**What knowledge can we build on?**

**Do we need to ask people to re-tell their stories?**



important questions (3 of 4)



**Do we (staff) need to lead the research, the review or the story-gathering?**

**Could we co-lead with consumers and carers?**

How could we do that well?

**Who makes the decisions about the goals, questions, methods and outputs?**

**Who will present the findings?**

Can we co-present the findings?

important questions (4 of 4)



**How will we keep people informed about the stories they share?**

How will we communicate in ways that meet the needs of the people we're working with?

**Have we said how stories and data will be used?**

How much can people's stories influence change?

**How will we minimise harm for the person sharing their story and the people hearing it?**

learn what's strong and what's wrong 🗣️



## Do a community meal

Host a meal to listen, to explore opportunities, challenges, ideas or just to connect. Make it nourishing. Make time for community connection and networking. Give before you take.

In-person

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## Do community-led or peer-to-peer research

Consumers, carers and communities co-lead research from start to end. Trained researchers can work alongside community members to help out and do research too.

In-person Online

learn what's strong and what's wrong 🗣️



## Have a town hall

Host a conversation to listen, to explore opportunities, challenges or ideas, or to do something else. Make it welcoming.

In-person Online

learn what's strong and what's wrong 🗣️



## Do one-to-one chats or interviews

Talk with consumers, carers, communities and staff about their experiences and/or ideas. You can have a lot of structure or be informal.

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learn what's strong and what's wrong 🗣️



## Use images, art, performance or poems

Learn about people's experiences and/or ideas through creative writing, art, performances or visuals – for example, PhotoVoice.

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## Run citizen juries or mini-publics

Get a small group of people who know and care about an issue or topic to explore and debate it, over a few or many days.

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## Hang out at community events

Meet communities where they are. Build relationships before asking communities to help you or come to meetings. Partner with community groups and organisations.

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## Run workshops and focus groups

Have a dedicated group session to discuss something. Hold purposeful and regular sessions for different communities. Workshops don't work for everyone. Use other methods too.

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## Observe

With consent, observe what's happening in a service or community. Try not to get in the way. Use all your senses. Notice the gaps between what people say and what they do.

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## Make sense of stories and data

Many people have told their stories before. Bring existing stories and data together. Maybe in new ways. What gaps do consumers, carers, staff and communities notice?

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## Use diary studies

Over time, people record their experiences – for example, of using a home monitoring device or of getting a treatment. Use a paper diary, a digital diary, social media or something else.

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learn what's strong and what's wrong 🗣️



## Map the service journey

Understand consumer, carer and staff experiences through mapping. Use visuals. Look beyond a single part, team or task.

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## Yarning

Yarning must be led by Aboriginal people. According to the Agency for Clinical Innovation, yarning is: "A conversational process that involves the sharing of stories and the development of knowledge in a culturally prescribed and respectful way."

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# About the Find and make ideas cards



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*For example, if we know a waiting room needs to change we might collect inspiration from other services in and outside of health. Then, we might draw it and build models from cardboard or something else.*

Use the **pink method cards** to decide what to do.



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# Important questions

while you are ...  
finding and making ideas

Card 1 of 2

## important questions (1 of 2)

Who needs to be involved?

Whose ideas are usually seen as being the best?

How will we change that?

Whose ideas might have been overlooked or under-appreciated?

How will we think about the unintended consequences of the ideas?

Who gets to assess the ideas? How?

## important questions (2 of 2)

Are we expecting everyone to come up with ideas quickly using writing?

How will we offer a range of ways for people to share their ideas?

How will we feed back to people who share their ideas?

How will we help each other imagine different or new ideas?

Will we build on what's working already? Or has worked before?



*"I'm not sure what ideas to suggest. I need more time to think about it."*



## Collect ideas

We can learn from other services, other countries and other sectors. Collect ideas together. Build on ideas. Building on ideas respects what's working and is easier than starting from scratch.

Phone

In-person Online



## Make a mood board

Mood boards are collages that can include colours, images (drawings, photos), fonts, patterns, words and other things. They help us explore how something could "look and feel" (design preferences), and learn how to talk about a topic (e.g. sexual health) with a community.

In-person Online



## Look beyond technology

Technology can help but it's not the only thing we should care about. Technology can be problem-solving and also problem-causing. Technology impacts the planet, too. Explore non-technology solutions.

In-person



## Make a model

Models can help us think differently and work on ideas together. The layout of a new building, for example. Make two-dimensional and three-dimensional models out of paper, cardboard, lego, wood and other things.

In-person



## Run a public idea challenge

Ask communities and staff what could work. Give background on what needs to change. Offer different ways to submit ideas (e.g. using social media, drawing, writing, video, sending mail or something else).

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## Make a storyboard

Tell the story of how something could work in frames or scenes. Storyboards don't have to be fancy. Free technology can help. Move the scenes around and add new ones to develop ideas. Make changes as you work together.

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## Draw the idea

Drawing can help us think about ideas in a new way. We don't have to be good at drawing. To build creative confidence we can buddy-up artists with staff, consumers, carers and community members.

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## Do a mash-up

A mash-up mixes parts of ideas (existing and new) to make something that works. To improve a waiting room, for example, you might mix ideas from hotels, from science fiction and from airports.

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## Go back in time

New ideas aren't always the best ideas. Sometimes we need to remember what we did before. That might be 10 years ago, or 10,000 years ago. Respect First Peoples' knowledge.

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## Come up with ideas in different ways

There are lots of ways to generate ideas - using "how might we" questions, 10 plus 10, bodystorming, using cards, the power of 3, reverse brainstorming, using speculative design and many other ways.

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# About the Try things out cards

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# Important questions

while you are ...  
trying things out

Card 1 of 3

important questions (1 of 3)



Are we willing to change our ideas?

Who needs to be involved?

What are we trying to learn?

How will we learn about different things? For example:

- Will people use it?
- Does it work? Is it safe?
- Is the idea possible? Legal? Sustainable? Ethical?

important questions (2 of 3)



Do our ideas match a clear problem or opportunity?

Or, do we have a solution looking for a problem?

Are we being honest about what we can do with communities and staff?

*For example, we may not include all feedback or we may not get funding to implement an idea.*

Are we asking the right questions of the right people?

*For example, asking questions about whether people want it or if it can be done.*

important questions (3 of 3)



Who decides on the learning goals, questions and methods?

Do staff need to lead the activities?

Could we co-lead with consumers and carers?

Who will do the analysis, synthesis and reporting?

Who will make the decisions on what gets implemented?

Are we being honest about this?

How will we let people know what's been done with their feedback?

Or if something is going ahead or not?

try things out



## Service simulation or walk-through

Try parts of a service to see if they work. You could use cardboard, a prototyping or simulation space, tabletop models or walk-through. Involve many kinds of bodies and people.

 In-person

try things out



## Usability testing

A session where someone who would use the thing (e.g. a procedure or technology) works through tasks with a moderator or facilitator. The tasks are to learn how easy the thing is to use and know what to improve.

 In-person  Online

try things out



## Randomised control trial (RCT)

Trying out a way of doing healthcare through a “controlled” process. Controlled means there is one group that gets the thing (e.g. a treatment) and one group that doesn't. That helps to measure what works and doesn't.

 In-person  Online

try things out



## Interviews

After trying out a new technology, service or process, use interviews to learn about someone's experience. Get their feedback. Don't ask leading questions such as “Do you like it?”

 In-person  Online  Phone