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WESTERN NSW

An Australian Government Initiative

WNSW PHN

**Community
Engagement
Framework**

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Who We Are

Western Health Alliance Limited

Western Health Alliance Limited was formed in May 2015 when four founding member organisations came together with the common motivation of addressing the primary health needs of Western NSW communities, and to respond to the commonwealth government policy that introduced the Primary Health Network (PHN) system.

The PHN system was created by the Australian Government to improve the coordination, efficiency, and effectiveness of primary healthcare across the nation. The Western Health Alliance Limited was awarded the Western NSW Primary Health Network (WNSW PHN) contract and since day one, the board and staff have been committed to the ongoing support of our communities. That guiding organisational purpose has remained to this day. Over 10 years since, additional members have joined and much has changed but the objectives remain; to improve the primary health outcomes for the communities of Western and Far West NSW. Working side-by-side, we strive to achieve our purpose, together, with our communities.

Western NSW Primary Health Network

Western NSW Primary Health Network (WNSW PHN), is one of 31 Primary Health Networks across Australia, established to support frontline health services and increase the efficiency and effectiveness of primary health care.

Our focus is patients who are at risk of poor health outcomes and working to improve the coordination of their care, so they receive the right care in the right place at the right time. We work closely with key stakeholders including general practice, other health care providers, Local Health Districts, hospitals and the broader community to align services with the health needs of the region.

WNSW PHN is a not-for-profit organisation primarily funded by the Australian Government.

Our region covers both Far West and Western NSW Local Health Districts.

Vision

Lead, support and strengthen person-centred primary health care for Western and Far West NSW.

Purpose

To ensure social justice, access, and equity in primary healthcare for the people of Western and Far West NSW.

Introduction and Purpose

Appropriate planning and engagement are critical to the success of any project. This Community Engagement Framework along with the [WNSW PHN Planning Framework](#) has been developed to support WNSW PHN staff in the design, implementation and evaluation of community engagement plans to the standard expected by the organisation and the community. By following the steps in these Frameworks we are committing to practicing engagement methods, where staff will be able to manage their projects and stakeholders to the standard expected.

This Framework provides guidance for how WNSW PHN works with health consumers and communities to achieve desired health outcomes. The Framework applies to public and private health service organisations delivering health promotion, prevention, primary, acute, sub-acute and community health services and with community and consumers receiving our services.

The principles and strategies in this Framework enable authentic engagement and codesign. It provides a process to plan, develop, action and review engagement strategies.

This Framework aims to encourage and guide the WNSW PHN team to initiate engagement with consumers and community before projects start, and to be a better partner in community-led projects.

In preparing this Community Engagement Framework, the WNSW PHN has drawn from past experiences of staff who are engaging with the community, as well as from key stakeholder groups, research and best practices in the field of community engagement promoted by the International Association for Public Participation (IAP2) Australasia. Knowledge gleaned from other States and Local Government Councils, community organisations and businesses within and beyond Australia have also been useful. Specifically, materials from the following organisations have been referred: IAP2 Australasia, Glenorchy City and the Health Consumers NSW publication entitled *Consumer and Community Engagement Model*.

Please note, some of the linked documents in this Framework are accessible to WNSW PHN staff only.

What is Community Engagement?

Consumer and community engagement is the way we collaborate with and listen to people, responding to what we hear. Engaging with consumers and community is key to WNSW PHN's core business.

Community engagement is defined by:

- Planned process – defined purpose, clear procedure
- Community role – focus on shared and collective power and responsibility, not personal interests
- Information exchange – giving and receiving of information by WNSW PHN and the community
- Different methods – foster inclusiveness by valuing diversity
- Actions and Decisions – aims to influence the actions and decisions of WNSW PHN and the community.

When engaging consumers and community, we will ensure that we reach out to a broad range of community-based stakeholders and the people we are connected to around us. These connections are often place-based with a richness of diversity and roles.

WNSW PHN views consultation and stakeholder engagement as part of broader community engagement. This involves more than just stakeholders and includes varying levels of public participation as defined by the International Association of Public Participation (IAP2) Spectrum, which we have used to develop this framework.

Definitions

Community: A group or groups of people or organisations with a common local or regional interest in population and individual health.

Consumer: a person who uses, has used or is a potential user of health services, includes their family and unpaid carers.

Health Service provider: any accredited service provider that delivers services for the community and consumers.

Co-design: Co-design is a way of bringing consumers, carers, families and health workers together to improve services. It creates an equal and reciprocal relationship between all stakeholders, enabling them to design and deliver services in partnership with each other.

Planning, designing and producing services with people that have experience of the problem or service means the final solution is more likely to meet their needs.

Guiding Principles

Adapted from the Health Consumers Framework Model, WNSW PHN identifies the following nine guiding principles that support and drive the planning, development, action and review of our engagement activities.

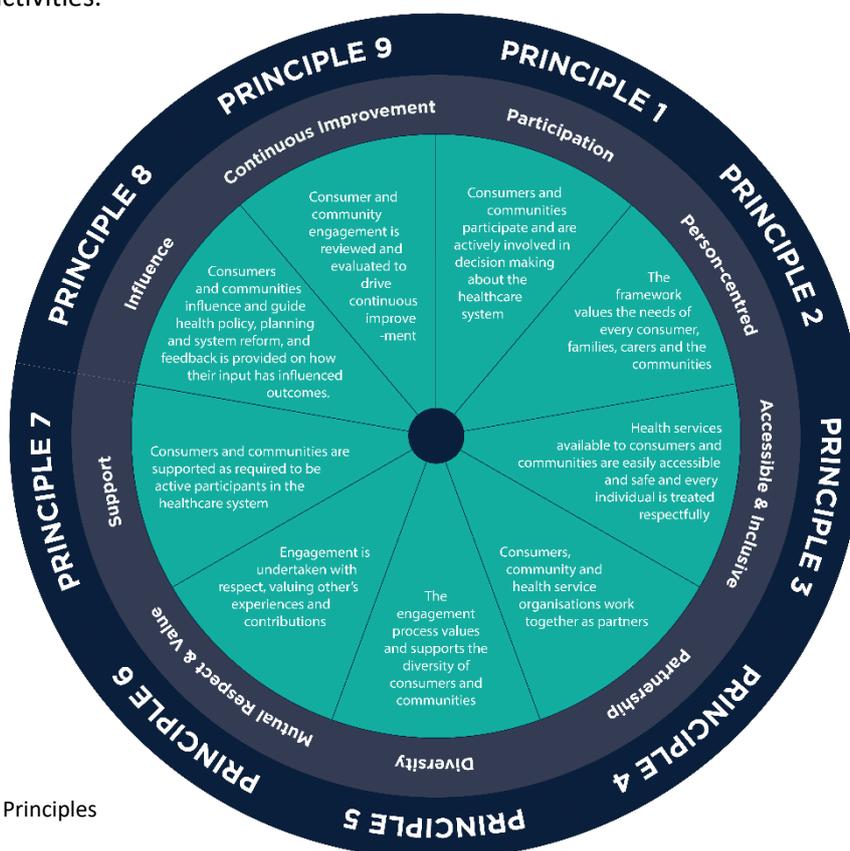


Figure 1: Guiding Principles

WNSW PHN Engagement Model

The five levels of engagement are shown in the table below. This is a modified IAP2 spectrum of engagement. This model was developed by consumers we've engaged with in the development of this Framework. There are differences in the use of new or modified labels that reflect the needs and understandings of our community.

Codesign as a process is seen in higher engagement levels, such as Build and Enable.

Codesign is enabled when there is an environment that promotes equal partnership, consumer leadership and value of consumer knowledge and expertise.

As we engage and commission services, we will aim to seek the highest level that is appropriate and possible.

Information and guidelines on how to co-design is not provided in this framework – see the Agency for Clinical Innovation's [A Guide to Build Co design Capability](#) for more information.

SHARE	ACKNOWLEDGE	EXPLORE TOGETHER	BUILD	ENABLE
Tell people about the project. Provide the public with balanced and objective information to assist them in understanding the problem alternatives, opportunities and solutions.	Recognise that consumers and community have knowledge to share. Ask what they think. Obtain public feedback on analysis, alternatives and / or decision.	Have a conversation, enable dialogue with different people and roles throughout the project. Work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	Work together to create change. Partner with the public in each aspect of the decision including the development of alternatives and the identification of preferences.	Enable and make space for others to lead the change. Be a participant in their change process. Work with the public to implement jointly agreed solutions.

Table 1: The Five Levels of Engagement

Our Engagement Approach

Our engagement activities will be designed in a way that is suitable to consumers, the community and the project.

We aim to collaborate with consumers by creating a safe place for genuine dialogue and collaboration. This type of engagement facilitates respectful, constructive and sustainable relationships between stakeholders.

We acknowledge that relationships that enable collaboration and empowerment are ongoing, complex and can take time.

Our Commitment to Engagement

WNSW PHN values the insights and expertise that consumers and the community bring to improving the health and wellbeing of our community and seeks to hear the voices of Aboriginal people with self-determined health services.

Engaging with those who use health services and their communities around them provides visibility to the depth of their practical knowledge and lived experience of their health system needs. This includes access to and use of WNSW PHN services. This knowledge can be applied to health service decision making, policy development, service delivery and evaluation.

Engaging people to make decisions on the health services that will directly impact them can lead to improved health outcomes.

Our Focus:

1. Involve consumers in service design and commissioning with a one health system mindset.
2. Consult in a way that embraces the diversity of the community with a focus on Aboriginal health and wellbeing utilising our [Waluwin Aboriginal Engagement Strategy](#).
3. Communicate transparently with the community and consumers by providing feedback and updates following consultation.
4. Include consumers in evaluation of services to understand what matters to them with a focus on patient reported outcome/experience measures.

Who is involved?

The best outcomes are made possible when responsibility and power is shared between the WNSW PHN, commissioned service providers, the community and consumers. One of the challenges in the

WNSW PHN region is that there are often overlaps between these stakeholder groups in our communities.

Ideally, staff will not take on the role of a consumer within engagement activities in their service. Their knowledge of the service may bias their interaction as a consumer, making it difficult for them to be independent. Staff may participate in engagement activities as staff representatives rather than consumers. There are two exceptions to this:

- staff who are participating in an activity coordinated by an area of the health service outside of their own role, who have specific representative experience and skills; and
- peer workers whose roles are primarily to support consumers.

The WNSW PHN will ensure its engagement reach extends to population groups who face barriers to accessing healthcare and are less likely to volunteer to engage in activities through commonly used engagement methods (e.g. call for volunteers in media advertisements).

These diverse groups may include, but are not limited to:

- Socially and economically marginalised groups
- People living in remote communities
- Aboriginal and Torres Strait Islander people
- Vulnerable members of the community including people with a disability, people who are homeless and those that are at risk of homelessness
- Culturally and linguistically diverse peoples and refugees
- Lesbian, gay, bisexual, transgender, intersex and queer people (LGBTIQ)
- Young people

Guide to Implementing the Framework

The WNSW PHN Community Engagement Framework has been developed with reference to our individual and community needs combined with known community engagement exemplars. The following section guides your activities. A supporting guide “Engagement In Action” has been designed to be used in all projects, helping you to shape your engagement activities and outcomes with stakeholders.

The framework includes the following three stages:

1.1 Context and Scope

This stage explores the context, background, history, importance, timing and project objectives.

1.1.1 Focus

Consumer and community engagement can occur in all facets of health, so it is important to know the aim and purpose of the project.

Consumers can be involved in projects that set priorities for the strategic planning of a statewide service or an entire health region, developing health literate information, and making decisions about their own care.

Your project engagement scope may include:

- Individual – consumers as partners in their own healthcare and treatment
- Service – program and service delivery focused on partnerships at a facility level
- Network – regional engagement across service providers enabling input into broader plans across service areas e.g., health and hospital services, PHNs, NGO and community organisations
- System – policy, reform and legislative influence across government jurisdictions.

ASK:

- What is the project/program about? What is the aim of the project?

1.1.2 Context

A strong understanding of your project rationale, background and its objectives will help you to get clear on the type of engagement you need to undertake. Less complex projects are likely to make use of lower levels of engagement.

The principal engagement activity for WNSW PHN is conducting the strategic Needs Assessment to inform what new services need to be commissioned and evaluated. This activity requires a higher level of input from the community.

ASK:

- Why are we doing it?
- Who does it benefit?
- What are the pressures?
- What are the risks and benefits?
- What decisions need to be made?

1.1.3 Limits and Constraints

The level of engagement may vary depending on the stage you are at in the project and if you are experiencing constraints or boundaries.

Knowing the project stage will help determine who, how and when to engage to progress to the next stage. Each project stage has an element of engagement. This may vary depending on the purpose of the project's stage.

Engagement should take place across the planning, implementation, monitoring, evaluation and review stages. It is an integral part of the continuous improvement process. Good engagement occurs early at the priority setting and planning phase and can (and should) continue through to evaluation and review as in the diagram below.



Figure 2: When do we Engage Framework by Health Consumers Queensland

Constraints and boundaries considered in the planning phase can include:

- Budget and financial limitations
- Timing of activities and when the project needs to be completed
- Geographical area
- Demographics
- Any 'non-negotiables'

1.2 People

This stage identifies the people that should be involved and engaged within the project or program. It considers who they are, their role and interest in the success of the project.

1.2.1 Background

When identifying the people who are important in the project, the Project Manager also needs to consider any history or issues relating to potential stakeholders and how that may influence the project. It is also important to consider similar projects that have been completed with stakeholder engagement; learn and re-use what worked well.

ASK:

- Who will lead the engagement? Is it the WNSW PHN, another organisation, consumers, families and carers or the community?
- Who is co-hosting or partnering with us?
- Have hard to reach and vulnerable communities been included and accessed? Who are the community members and public that are interested? Who are the key groups with a passion for or interest in the issues? Is there anyone missing from the list?

1.2.2 Identify stakeholders

Knowing who is important to engage with will help you to determine how to engage with them. This will include the project lead, any partners or co-hosts, interested and influential stakeholders.

Consider who from the consumer and community network will influence and ensure the success of your project. Include as much detail in your Expression of Interest as possible to ensure you have the right people involved.

You should also consider the impact of the project on the stakeholders. Consider if there are marginalised communities involved, and if you have considered the most appropriate ways to reach and engage them.

1.3 Purpose and Influence

Being clear about the purpose and the desired outcome of the engagement is essential to deciding how the community should be engaged. It also generates goals and criteria for the evaluation process.

Being clear about the purpose and desired outcome of the engagement is key to knowing how people can be involved and why. The depth and purpose of engagement as well as the role of the consumer in the engagement will determine how you engage.

Examples of why to engage include:

- providing information
- legal or standards compliance

- social license
- behaviour change
- relationship development
- generating support for change
- capacity and capability building
- drafting or reviewing a policy, strategy, plan
- identifying problems or opportunities to address
- delivering a new service
- generating alternatives, new ideas or further propositions
- understanding reactions
- implications or consequences of a proposal

Use the **Engagement in Action** guide at the end of this document to record your thinking and planning.

You will now be able to communicate and provide the following to your key stakeholders:

- A clear understanding of the context and scope of your project/program, who is involved and their level of influence and your purpose and goals.
- Your planned outcomes and anticipated experience for those being involved and engaged.

The Develop stage is your opportunity to shape the detail to implementation. Work with a small group of key stakeholders to identify outcomes and the experiential aims and develop an engagement strategy.

Clarify:

1. The planned outcome of the engagement
 - *What are you looking for?*
 - For example: inform, gaining an understanding, a list of issues and concerns, input, feedback, comment, ideas, solutions, alternatives, decisions, next steps etc.
2. The experiential aims of the engagement
 - *What effect do you want this activity to have on our stakeholders?*
 - For example: informed, robust discussion, calmness, called to action, supported, understood, valued, appreciated etc.

Applying the guiding principles will naturally lead to a “doing with” engagement approach rather than a “doing to or for”. Using approaches that maximise engagement opportunities for more equal

and reciprocal relationships, the sharing of roles and responsibilities, including decision making, is likely to result in positive changes.

Create a project timeline including:

- major tasks that need to be completed, who can do them and the deadline
- decisions that need to be made and who can make them
- how can consumers, families, carers and stakeholders be genuinely involved in these processes?

The IPA2 model is a continuum framework rather than a hierarchy. Depth of engagement is determined by project complexity and stage. Project managers are encouraged to start at the highest level relevant to the project, all levels to the left of this are also included. For example, if you start at consult – it is likely you will ‘consult’ and ‘inform’. Each level of engagement and the mechanism should be represented in the project plan.

The fifth level of engagement, ‘empower’, is the most complex level of engagement and represents true co-design from the community where the WNSW PHN will be asked to participate rather than lead. It represents a high level of engagement maturity.

There are many ways to engage consumers and community in projects. The following table provides some typical methods used by the WNSW PHN to help you determine what is the best method and depth of engagement.

This is also an opportunity to determine how to know if the engagement and project is successful, meeting desired outcomes outlined in the previous steps.

SHARE	ACKNOWLEDGE	EXPLORE TOGETHER	BUILD	ENGAGE
Websites	Public Comment	Workshops	Advisory committees	Multipurpose health services
Fact Sheets Media releases	Surveys	Round Tables	Scenario building	Steering committees
Displays	Public Meetings	Working Parties	Clinical networks	Strategy groups
Education programs	Conferences	Stakeholder Needs	Planning committees	Boards
Information delivery forums	Discussion papers	Assessment Forums		
	Focus groups	Panels		

Table 2: Typical Methods used by WNSW PHN under the Five Levels of Engagement

Related Documents

- [WNSW PHN Planning Framework](#)
- [Waluwin Aboriginal Engagement Strategy](#)
- Agency for Clinical Innovation: [*A guide to build co-design capability*](#)

Engagement in Action Guide

Plan

1.1 Context and Scope

1.1.1 Focus

- a. What is the program about?
- b. What is the aim of the project?
- c. Where is the area of impact for engagement?
- d. Where will the engagement occur?

1.1.2 Context

- a. Why are we doing this project?
- b. Who does it benefit?
- c. What are the risks and benefits?

1.1.3 Limits & Constraints

1. What stage is the project at?
 - a. Assess need
 - b. Plan and design services
 - c. Promote the implementation by commissioned service provider
 - d. Evaluate
2. What are constraints we need to consider
 - a. Geographical area – size and associated constraints
 - b. Access
 - c. Demographics
3. What is the budget and associated financial constraints?
4. What are the non-negotiables by whom?

1.2 People

1.2.1 Background

1. Is there any history or specific issues relating to people involved that we need to consider?
2. Has there been a similar project we can learn from and re-use?

1.2.2 Identify

Consider who will influence and ensure the success of your project. Include as much description as possible to ensure you have the right people involved.

TIP: Use the format <consumer/community role> who have a <need for engagement>. This will help you to focus.

Consider:

1. Who will lead the project?
2. Who is co-hosting or partnering with us?
3. Who are the key groups with a passion or interest in the project and planned outcome?
4. Who are the community members and public that are interested?

1.3 Purpose & Influence

Depth of Engagement

1. Why make the effort to engage?
2. What do you want from the stakeholders involved?
3. What do they want from us?
4. What influence do the stakeholders have on decisions and actions?

Based on the above thinking – what level of engagement will help you to achieve your planned outcome (see Table 1):

1. Share (inform)
2. Acknowledge (consult)
3. Explore together (involve)
4. Build (collaborate)
5. Enable (empower)

1.4 Mechanisms of Engagement

Looking at the previous information gathered, you can now determine the best way to engage and achieve the desired outcome.

Consider:

1. What major tasks need to be undertaken, completed and when and by whom?
2. What decisions are required and by whom? How can consumers, families, carers and stakeholders be genuinely involved in the above?
3. What are the outcomes we are looking for?
4. What does success look like? For whom?

Document Control

Version	Date	Author
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