



## NSQHS Standard 2 Partnering with Consumers Definitions sheet – Edition 2

### Partnering with Consumers Audit Tools Definitions

Source: Health Consumers Queensland (HCQ)

Consumer and Community Engagement Framework February 2017

<http://www.hcq.org.au/our-work/framework/>

- **Consumers**

Consumers are people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organisations of consumers, consumer representatives or communities.

Health Consumers Queensland, (2012). Consumer and Community Engagement Framework: February 2012.

- **Carers**

The *Carers (Recognition) Act 2008* identifies a carer as an individual who provides, in a non-contractual and unpaid capacity, ongoing care or assistance to another person who, because of disability, frailty, chronic illness or pain, requires assistance with everyday tasks.

Health Consumers Queensland, (2012). Consumer and Community Engagement Framework: February 2012.

- **Community**

Community refers to groups of people or organisations with a common local or regional interest in health. Communities may connect through a community of place such as a neighbourhood, region, suburb; a community of interest such as patients, industry sector, profession or environment group; or a community that forms around a specific issue such as improvements to public healthcare or through groups sharing cultural backgrounds, religions or languages.

Adapted from Department of Communities (2005) *Engaging Queenslanders: an introduction to community engagement and Health Consumers Queensland*, (2009). Consumer Representatives Program: Consumer Handbook.

- **Consumer engagement**

Consumer engagement informs broader community engagement. Health consumers actively participate in their own healthcare and in health policy, planning, service delivery and evaluation at service and agency levels.

Health Consumers Queensland, (2009). Consumer Representatives Program: Consumer Handbook.

- **Community engagement**

Community engagement refers to the connections between government, communities and citizens in the development and implementation of policies, programs, services and projects. It encompasses a wide variety of government-community interactions ranging from information sharing to community consultation and, in some instances, active participation in government decision making. It incorporates public participation, with people being empowered to contribute to decisions affecting their lives, through the acquisition of skills, knowledge and experience.

Queensland Health, (2010). Community Engagement Manual.

Further information can be found at:

- Health Consumers Queensland: <http://hcq.org.au/>
- Australian Commission on Safety and Quality in Health Care Website: Patient and Consumer Centred Care: <https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/>

### Procedure Informed Consent Form

The tools incorporate key questions to audit patient identification in the informed consent form, as highlighted below.

The form is titled 'Queensland Government Consent Adult (18 years and over) [Procedure Title]'. It includes sections for patient identification (LRN, family name, given name(s), address, date of birth, sex), an interpreter's statement (language, patient's name, interpreter's name and service), patient consent (signature, date), and a doctor/clinician statement (name, designation, signature, date). Red dashed boxes and arrows highlight the patient's name, date of birth, interpreter's name and service, patient's signature and date, and doctor/clinician's name, designation, and signature.

Further information can be found at: Informed Consent: <http://www.health.qld.gov.au/consent/>

## Advance Health Directive (AHD)

Form 4  
Queensland  
Powers of Attorney Act 1998  
(Section 44(2))

**ADVANCE HEALTH DIRECTIVE**

*This form deals with your future health care.*

The time may come when you cannot speak for yourself. By completing this form, you can give directions about your medical treatment at such a time.

This document can be used by non-English-speakers if a qualified interpreter/translator reads it to the person in the person's own language and a signed Statement of Interpreter/Translator is attached. Blank statements are available from GoPrint offices, WC Penfold Stations and most newsagents throughout Queensland.

Queensland Government  
Department of Justice and Attorney-General

ver: 4-9/01/04 1

## The Australian Charter of Healthcare Rights

# AUSTRALIAN CHARTER OF HEALTHCARE RIGHTS


The Australian Charter of Healthcare Rights describes the rights of patients and other people using the Australian health system. These rights are essential to make sure that, wherever and whenever care is provided, it is of high quality and is safe.

The Charter recognises that people receiving care and people providing care all have important parts to play in achieving healthcare rights. The Charter allows patients, consumers, families, carers and services providing health care to share an understanding of the rights of people receiving health care. This helps everyone to work together towards a safe and high quality health system. A genuine partnership between patients, consumers and providers is important so that everyone achieves the best possible outcomes.

### Guiding Principles

These three principles describe how this Charter applies in the Australian health system.

- Everyone has the right to be able to access health care and this right is essential for the Charter to be meaningful.
- The Australian Government commits to international agreements about human rights which recognise everyone's right to have the highest possible standard of physical and mental health.
- Australia is a society made up of people with different cultures and ways of life, and the Charter acknowledges and respects these differences.



For further information please visit [www.safetyandquality.gov.au](http://www.safetyandquality.gov.au)

**AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTHCARE**

### What can I expect from the Australian health system?

MY RIGHTS	WHAT THIS MEANS
<b>Access</b> I have a right to health care.	I can access services to address my healthcare needs.
<b>Safety</b> I have a right to receive safe and high quality care.	I receive safe and high quality health services, provided with professional care, skill and competence.
<b>Respect</b> I have a right to be shown respect, dignity and consideration.	The care provided shows respect to me and my culture, beliefs, values and personal characteristics.
<b>Communication</b> I have a right to be informed about services, treatment, options and costs in a clear and open way.	I receive open, timely and appropriate communication about my health care in a way I can understand.
<b>Participation</b> I have a right to be included in decisions and choices about my care.	I may join in making decisions and choices about my care and about health service planning.
<b>Privacy</b> I have a right to privacy and confidentiality of my personal information.	My personal privacy is maintained and proper handling of my personal health and other information is assured.
<b>Comment</b> I have a right to comment on my care and to have my concerns addressed.	I can comment on or complain about my care and have my concerns dealt with properly and promptly.

We recognise and appreciate that there may be gaps in the scope and questions included in these tools, however, as the audit tools are a constant **'Work in Progress'**, future versions will build upon the existing scope and questions, and incorporate staff feedback and suggestions for improvement.

**Patient Safety and Quality Improvement Service, Clinical Excellence Queensland, welcomes feedback on the audit tools and the measurement plans, to ensure the tools meet the needs of Queensland Health facilities. We appreciate any feedback you can provide for the next version.**

**Please email Patient Safety and Quality Improvement Service on [mars@health.qld.gov.au](mailto:mars@health.qld.gov.au) for feedback or comments.**

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