

## Stakeholder feedback – taking the “pulse”

### Introduction:

The Tasmanian Health Consumer organisation sought feedback from its stakeholders via its inaugural newsletter on what areas the new organisation could focus on during its first 12 months.

A total of 55 people responded and the information provides an indicator to test the pulse of those interested, it is not definitive nor scientifically constructed. Therefore, interpretation of the data is important – it tells us there is a bundle of activities that the organisation could focus on but at this stage we should not necessarily rank one item as being more important than the other.

The question asked: - “Please list in order of priority the three most important issues that you believe the Tasmanian Health Consumer organisation should focus on”.

The results show 12 key areas of priority, of which 4 relate to the way the organisation works and the remaining 8 highlight health issues that the organisation could focus on. There was no real difference in the area of focus listed as number priority number one verses the results for priority area number two or three.

Direct quotes from consumers against each of these 12 areas are listed on the following pages to give more meaning to each item.

## Priority areas of focus<sup>1</sup>:

## Number of responses

Provide an avenue for a consumer voice	12
Equity of access to health services	10
Mental Health	10
Implement and advocate for co-design principles	10
Improve health literacy	10
Primary health care interventions	8
Regional and rural health	8
Social determinants of health	6
Preventative health	6
Improve community based health care	6
Coordination or collaboration of advocacy groups	5
Provide resources and training to consumers	5

### How we work

- Provide an avenue for a consumer voice
- Implement and advocate for co design principles
- Coordination or collaboration of advocacy groups
- Provide resources and training to consumers

### Health related issues – potential areas of focus

- Equity of access to health services
- Improve community based health care
- Primary health care interventions
- Regional and rural health
- Social determinants of health
- Mental Health
- Improve health literacy
- Preventative health

Note 1: The results are the sum of the areas of focus for priority 1, 2 and 3 collectively

## Provide an avenue for a consumer voice

“Involve consumers in decision making”

“Provide means for individuals and groups to voice specific health concerns”

“Consultation with CCEC (Community Engagement Councils) to provide consumer representatives for health projects and programs”

“Ensure the consumer voice is taken seriously and becomes a more valued part of the development of health policy and programs”

“Lobbying Government for services that should be provided around the State and participating in public forums, preparing submissions and speaking publicly on matters identified by patients as important”

“Providing a voice for health consumers, particularly marginalised members”

“Empowering clients” and “Citizen contribution to action”

“Identifying health areas (including disease specific groups) requiring local Tasmanian consumer advocates and whom are currently not represented in existing NGO's/stakeholder and funded organisations”

“Building and growing a genuine consumer voice and providing opportunities for consumer engagement and participation” and “a voice to Tasmanian health spending”

## Equity of access to health services

“Advocacy for equity of access to health services”

“Improving access to quality healthcare for all Tasmanians”

“Affordable, accessible, timely health services”

“Cultural safety of marginalised and stigmatised people”

“Young people’s access to health”

## Mental Health

“Mental health supports for those that are not eligible for NDIS”

“Improved hospital mental health services, including increased staff and beds”

“Youth mental health”

“Discharge planning from ED following Mental State Examination”

“Increased Mental Health services”

## Implement and advocate for co-design principles

“Facilitating opportunities for consumers, administrations and clinicians to truly co-design projects, and processes”

“Consumer involvement in redesign of health systems”

“Influencing health policies and priorities in Tasmania”

“Meeting the standard of 'Co-Design' necessary for meaningful change”

“Support effective public health interventions”

“Engaging consumers in all aspects of health development and delivery”

“Providing opportunities for consumer engagement and participation”

“True consumer input and recognition of community input”

## Improve health literacy

“Improving health literacy of the community” and “consumers”

“Health education”

“Early intervention, education including working with Dept of Education around curriculum of health in schools”

“Health literacy environment of our health services”

“Reliable, timely and accessible information for consumers in a way that works for them”

## Primary Health Care interventions

“Maintain health and wellbeing - primary health care”

“Provision of adequate medical practitioners”

“Access to primary health”

“Promote increasing Bulk Billing GP practice number and hours or days of operation”

“Challenges with coordination of physicians for conditions such as MND”

“Improving clinician's ability to engage with consumers”

“Respect for the client him or herself from practitioners”

## Rural and regional health

- “Better access to health care in rural areas”
- “Local health solutions including services, prevention, education”
- “An increase of health service delivery to rural areas”
- “More services made available in/to rural regions”
- “Lack of services in rural and regional areas”

## Social determinants of health

- “Social determinants / barriers of health”
- “Practitioners and others being aware of all the conditions (health and social) impacting on clients”
- “Appropriate employment opportunities for all and inexpensive fresh food options”
- “Cultural safety of marginalised and stigmatised people and poverty and homelessness “
- “Awareness raising/lobbying for priority areas such as housing and health services”

## Preventative Health

“Advocating for preventive health activities”  
“Funding for prevention and health promotion”  
“Health Promotion”  
“Preventative health being resourced and valued”

## Improved community based health care

“Keeping people supported in their community by understanding their needs so they don't end up in the acute sector”  
“Better public healthcare services outside hospitals especially allied health”  
“Non-emergency presentations to casualty departments treated within the community”  
“Well-resourced public health system and creating the possibility of more 'emergency clinics' in suburbs for minor emergencies to take pressure off the hospitals”  
“Improved funding of community health”

## Provide resources and training to consumers

“Provide resources and training for consumers”

“Peer support and education of consumers”

“Providing opportunities for consumer engagement and participation and informing, organising, training and supporting consumers”

## Coordination and collaboration of advocacy groups across Tasmania

“Coordination of all consumer advocacy groups in Tasmania”

“Coordinating and sharing knowledge about smaller organisations supporting Tasmanians”

“Finding effective ways to engage and connect so all voices are heard”

“Identifying how to help health consumers develop/establish their disease specific consumer group and how they can feed into the larger voice of consumer health needs and identify supports that can be offered to these groups to be able to function and be sustainable in the longer term, given the often-high turnover of advocates due to ongoing health issues”

“Have a representative group of members”