

Clinical Service Community Representative Program



To Listen, Act, Make Better, Together

January 2024

Purpose

The purpose of this document is to describe the DASSA Clinical Service Community Representative program, roles and responsibilities within DASSA, and its integration into the SALHN Consumer Engagement model.

This document supports the SALHN Consumer Engagement approach which is described in the SALHN Consumer Engagement Handbook.

Role

The role of the Clinical Service Community Representative (CSCR) is to be independent of, but working in partnership with, staff in the provision of holistic care by increasing the involvement of clients, and where appropriate, carers and families. The aim is supporting client-centred care and thus improving the care experience for clients and staff.

CSCRs are allocated to clinical service areas (following a successful recruitment process) to speak to clients about their experiences and feedback their comments to staff. The CSCR acts as an information conduit for staff. Positive feedback is passed on to staff, and any issues raised by clients will be investigated.

Our CSCRs speak with clients to identify areas of excellence, opportunities for improvement, and issues that need to be resolved immediately. They also support us to monitor our performance in relation to safety and quality initiatives and the Australian Healthcare Charter of Rights.

LISTEN	To our clients about their experiences
ACT	By reporting feedback to our staff
MAKE BETTER	By working with us on activities to improve the client's experience
TOGETHER	Building networks across DASSA and SALHN

The CSCR role requires a commitment of 2 hours onsite per fortnight, plus an additional 1 hour per fortnight of report writing. CSCRs attend or participate at service team meetings at a maximum of once per month. These are opportunities to bring the client perspective to the conversation.

Opportunities for this role within clinical services include:

- Assist with staff recruitment as a member of an interview panel.
- Facilitate and contribute to staff training and development.
- Describe their lived experience to current clients.
- Participate in local quality improvement activities.
- Review locally developed client and community information.

Expectations of the role

- Spend 1-2 hours fortnightly, Monday to Friday (excluding public holidays) between 9am-4pm, liaising with at least five (5) clients / families / carers to encourage discussion about their needs and experiences (via phone or in person).
- Report immediately to the Service Manager any urgent concerns raised by the client.
- Provide a fortnightly report on their visit to the Service Manager with a copy sent to the Coordinator CPP via email Health.DASSACPP@sa.gov.au.
- Provide a monthly attendance record to the Coordinator CPP via email Health.DASSACPP@sa.gov.au, endorsed by the Service Manager. Monthly attendance records should include any voluntary hours completed.
- Inform the relevant Service Manager if they are unable to attend the site due to planned or unplanned leave.
- Comply with the Code of Ethics and behavioural expectations of the service and SALHN.
- Address any concerns/complaints that you may have directly with the Service Manager.

There is an expectation that time spent participating in this role includes voluntary hours such as training (including online and mandatory training), and professional development opportunities. CSCRs may also be offered non-reimbursable opportunities to participate within the service.

CSCRs will be set up with an SA Government email on appointment and are expected to utilise this email for all official communication relating to their role.

Reporting

Reports must be submitted within 48 hours of attendance and detail:

- Responses to the Australian Healthcare Charter of Rights questions.
- Responses to set questions as required by the service.
- Issues and/or concerns that require follow up and action by the Service Manager.
- Comments or suggestions from the client regarding their care, the service, or DASSA/SALHN.
- The Coordinator CPP will provide a regular report to the DASSA Community Advisory Council summarising the feedback received over the reporting period and identifying key themes.

Escalation

It is outside the scope of the CSCR role to obtain or discuss clinical and client level information

If, while conducting client interviews, a CSCR is alerted to any issues or concerns they must follow the appropriate escalation process:

- Urgent for immediate action
 - concerns that require urgent action are to be reported immediately to the Service Manager, or a member of the clinical team if a manager is unavailable.

- Urgent concerns should also be detailed in the weekly report emailed to the Service Manager.
- Non-urgent action
 - concerns that require non-urgent action are to be raised with the Service Manager or clinical team before the CSCR concludes their shift.

Probation

CSCRs are appointed for an initial 12-month term with a probationary period of 3 months. If at the end of the initial 12-month term the CSCR, Service Manager and Coordinator CPP are satisfied with the arrangements, the CSCR can be extended for an additional 12 months.

If a CSCR is not meeting service expectations, a discussion will be held between the CSCR, Coordinator CPP, and Service Manager to discuss an appropriate way forward. Similarly, if Services are not meeting expectations, then appropriate discussions will be held.

Evaluation at 3 months post appointment to a CSCR role

CSCRs are appointed for a provisional 3-month period to allow opportunity for both the CSCR and the clinical service to evaluate the partnership. This process will be coordinated by the Coordinator CPP.

CSCRs and Service Managers are also encouraged at any time to provide feedback on their experiences and seek guidance and support in managing a concern.

The Coordinator CPP can be contacted on 7425 5036 or by emailing Health.DASSACPP@sa.gov.au

CSCRs will also be encouraged to complete an annual evaluation of the role.

Networking

All CSCRs will be invited to participate in the SALHN Community of Practice. Attendance at these forums is voluntary and no reimbursement for attendance will be provided.

Confidentiality

All personal information regarding a member of the Clinical Service Community Representative Program is strictly confidential and is stored securely.

No personal information regarding the CSCR can be shared with a third party outside DASSA Community Partnership team/SALHN Consumer Engagement Unit.

All CSCRs are required to read, understand, and sign a Confidentiality Agreement prior to commencement.

It is a condition of appointment that CSCRs do not use or disclose, directly or indirectly, any confidential information to any person or organisation, either for their own benefit or that of others.

Confidential information refers to any information relating to clients, or staff or volunteers working within DASSA and SALHN. Failure to maintain confidentiality will result in termination of the CSCR appointment.

CSCRs are requested not to give their own personal details to clients or their relatives or friends.

If you have any concerns about privacy, please contact us via email
Health.DASSACPP@sa.gov.au

Roles and Responsibilities

For this program to succeed, it is necessary for both the Service Manager and CPP staff to support the Community Representative in this role.

Service Manager

Supports the Clinical Service Community Representative allocated to their service by:

- Providing a comprehensive orientation and induction to the clinical environment.
- Supporting the activities of the Community Representative by providing opportunities to contribute to staff meetings, complete client experience surveys, and support local education and awareness including the impact of stigma.
- Facilitating an environment and culture where the contributions of the CSCR are valued and respected.
- Following up and actioning any concerns raised through the CSCR reports.
- Communicating generalised feedback to service staff and using the information to improve systems, processes, and practices.
- Using the information and improvements implemented from this program to populate the Service Quality Board to demonstrate the principles of Listen, Act, Make Better, Together.

DASSA Coordinator Community Partnership Program / Manager Safety, Quality & Risk

Supports the successful delivery of the program by:

- Coordinating the recruitment process in collaboration with the Service Manager when an opportunity for partnership is identified.
- Providing an Appointment letter.
- Provide an orientation to:
 - DASSA, SALHN, and the specific role.
 - Completion of mandatory training via SAH Education platform.
 - Completion of all required documentation.
 - Completion of mandatory requirements prior to commencement including National Police Check (reimbursement through DASSA), evidence of COVID-19 vaccinations, and completion of statement of interest form and confidentiality agreement.
 - Significance of privacy and confidentiality.
- Facilitate the resolution of any concerns that the CSCR may have.
- Ensuring linkages with the SALHN Community of Practice.

Mandatory training

CSCRs must complete the following training modules:

Mandatory Training	
<ul style="list-style-type: none"> • White Ribbon – Level 1 • Emergency Awareness (annually) • Partnering with Consumers & Community (3 yearly) 	<ul style="list-style-type: none"> • Aboriginal Cultural Learning (5 yearly) • Code of Ethics (5 yearly)

There is an expectation that time spent participating in this role includes voluntary hours such as completion of training, including online and mandatory training.

Reimbursement

CSCR's are entitled to reimbursement for their time spent in community participation activities. Reimbursements are processed in line with the SA Health Sitting Fees and Reimbursement for External Individuals Policy Directive.

Reimbursements are to be submitted to the Coordinator CPP (email: Health.DASSACPP@sa.gov.au) within two (2) weeks of the claimed activity occurring. Under the SA Health Policy, claims older than three (3) months will not be processed.

Reimbursements must be submitted using the SA Health Consumer Sitting Fee and Reimbursement Claim Form.

Claim forms must be authorised by the relevant Service Manager prior to submission to the Coordinator CPP.

CSCRs are entitled to the following reimbursements:

- Time spent gaining client feedback; up to 2 hours per clinical service per fortnight.
- Report writing (up to 1 hour per service per fortnight).
- Meeting attendance as requested by Service Manager (attendance plus travel expenses and additional monies if papers are required to be read prior to the meeting (up to 1 hour preparation time)).
- Presentations and training to staff and/or clients as requested. Reimbursement includes time to prepare the presentation and time for delivery of the presentation plus travel costs.
- Travel up to 32kms one way.