# Implementation Workbook

Welcome to the Implementation Workbook which accompanies **‘*Using social media as a tool to facilitate consumer engagement in service design and quality improvement: A guide for hospitals, service providers and consumers’*.**

This workbook is most useful for service providers and consumers as they undertake planning to implement social media as a tool for consumer engagement in their own hospital or health service.

This workbook is not a standalone resource. Instead, it provides tools to help you implement the strategies and actions outlined in the guide. Each tool is linked to a different section of the guide. If you are seeking more information, please refer to the relevant section of the guide provided alongside each tool.

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## Organisational readiness checklist

The checklist has been developed by mapping organisational enablers for social media-based consumer engagement against the domains of the [Organisational Strategy for Improvement Matrix (OSIM)](https://www.bettersafercare.vic.gov.au/sites/default/files/2019-08/OSIM-3rd-edition_Administration_guide-pdf.pdf) from Safer Care Victoria (State of Victoria) and the Clinical Excellence Commission (State of New South Wales). This checklist corresponds to information provided in **Section 2.1.1 Establishing organisational readiness**. This checklist can be used to guide discussions to plan for the implementation of social media-based consumer engagement, or to audit existing systems and processes to determine areas for improvement.

| **OSIM Domain** | **Organisational readiness indicators** | **Reflective questions to aid implementation/auditing** | **Indicator in place? Y/N?**  **If N - notes/plan for improvement** |
| --- | --- | --- | --- |
| **Organisational systems and structures**  The organisation’s processes and management of processes, and its demonstrated ability to drive improvement | Social media governance documents (including policies and written processes) are easily available to all users (consumers and providers) and cover social media-based consumer engagement activities | Do we have governance documents which cover social media use?  How can staff members and consumers access our documents which govern how we use social media? |  |
| Social media governance documents are not only solely focused on risk avoidance. They also provide guidance on using social media to promote and improve services | What information do our governance documents contain about the ways staff can use social media within their roles?  What information do our governance documents contain that restricts the use of social media?  Is the balance between using social media and restricting use reasonable?  Do we need to rewrite the policy so consumer engagement via social media is compliant with our organisational policies and processes? |  |
| Organisational social media policies and processes align with other organisational policies and requirements, such as organisational codes of conduct and the [Australian Charter of Healthcare Rights](https://www.safetyandquality.gov.au/consumers/working-your-healthcare-provider/australian-charter-healthcare-rights). | Are our social media policies and process in alignment with other organisational governance documents?  Are our social media policies and process in alignment with external requirements, such as the Australian Charter of Healthcare Rights? |  |
| Organisational social media policies and processes comply with legal requirements including, but not limited to, legal requirements around confidentiality, privacy and copyright | Do our social media policies and processes protect all users (staff, consumers, community members) from potential breaches in privacy and confidentiality?  Have we checked with our legal department that our social media policies and processes are compliant with relevant laws, legislation and regulations? |  |
| Organisational social media governance documents describe how information gathered through social media will be used, and the measures in place to protect staff and patient privacy | How will information gathered through social media be used?  What measures are in place to protect staff and patient privacy when using social media-based engagement methods?  Do our social media governance documents describe our information use and privacy processes?  Are these documents easily accessible to staff members and patients? |  |
| Consumer representatives and service providers collaborate to develop organisational governance documents and plans related to social media-based consumer engagement. | How are consumer representatives involved in the development of organisational governance documents related to social media?  How are consumer representatives involved in the development of social media consumer-engagement plans? |  |
| Organisation has clear processes in place for how consumer feedback/patient experience feedback informs service design and QI which includes feedback received through social media channels | How does consumer/patient experience feedback inform service design and QI activities?  Are the processes for the use of consumer/patient experience feedback documented and easy to follow?  How do we collect and analyse feedback given through social media channels?  Do the documented processes include the use of feedback given through social media? |  |
| The administrative requirements of engaging consumers in service design and QI activities (through social media and other methods) are not so onerous that they serve to prevent consumer engagement | If a staff member wants to engage consumers in service design and QI activities, what administrative tasks do they need to complete?  Are these tasks too onerous for our staff members to complete alongside their other job requirements?  Can staff members seek support with completing these tasks?  Are there different/additional tasks required if social media is used as an engagement method? Are these reasonable/necessary? |  |
| Documentation around requirements for ethics approval for consumer engagement in service design and QI activities is clear, easily accessible by all stakeholders, and easy to follow. | Is it clear when and why ethics approval is required for consumer engagement in service design and QI?  Are these requirements clearly documented and easy to follow?  Can staff members seek support to meet ethics requirements? |  |
| Remuneration policies and processes for consumers involved in engagement activities are easy to follow, accessible to staff and consumers, and include information about remuneration for all modes of engagement (including face-to-face and social media). | Do we have policies and processes around remuneration for consumers involved in engagement activities?  How often are these policies and processes reviewed?  How are consumers involved in the development and review of remuneration policies and processes?  How are these policies and processes made accessible to staff and consumers?  Do these remuneration policies and processes include information about remuneration for social media-based engagement activities? |  |
| **Workforce capability and development**  The knowledge, skills and abilities of the workforce related to improving work processes and systems, and availability of training to build capability | There are staff with social media expertise within the organisation who can act as champions and mentors | Who has social media expertise within the organisation?  How are they supported to act as organisational champions or mentors for others around the use of social media? |  |
| Staff with social media expertise have regular contact and clear communications pathways with consumer engagement and quality improvement staff | How do staff with social media expertise communicate and work with consumer engagement and QI staff?  Are there any joint projects between communications, consumer engagement and QI staff? |  |
| Relevant position descriptions, workplans and work appraisal processed include social media-based consumer engagement activities. | Which position descriptions include social media-based consumer engagement activities?  Who in the organisation has social media-based consumer engagement as part of their work plan? |  |
| Staff and consumer representatives involved in consumer engagement activities are provided training in social media-based engagement methods | What training (internal or external) is available around social media?  Does this training cover social media-based engagement methods?  Is this training offered to staff members and consumers involved in planning or delivering consumer engagement activities? |  |
| Training in social media-based engagement methods is provided to service providers and consumer representatives involved in consumer engagement activities | What training (internal or external) is available for staff and consumers around the use of technology and social media?  Is training offered to all staff members and consumers involved in social media-based consumer engagement activities?  Is ongoing support offered to all staff members and consumers involved in social media-based consumer engagement activities? |  |
| Adequate resourcing in terms of money, staff, time, and equipment is allocated to social media-based consumer engagement activities, including for any moderation processes where required. | What resources are available for staff wanting to undertake social media-based consumer engagement activities?  What resources are available for consumers involved in social media-based consumer engagement activities? |  |
| The hospital supports access to social media for all users (consumers and providers) when required. This includes access to internet, social media platforms and relevant software, and may extend to the provision of hardware if use of social media for engagement is essential and the user does not have access to a computer or mobile device. | Can staff access social media sites using the hospital internet and their work device?  Can consumers access the internet for free when on site (e.g., through Wi-Fi, computers in the library, internet kiosks)?  Are social media sites accessible through the free internet access available to consumers?  Do consumers know how they can access the internet for free when on site?  What alternative methods of engagement (face-to-face, survey etc) been developed for people who are unable to access social media?  If social media-based engagement is essential to full and effective engagement in a service design or QI activity, how is the hospital supporting consumers and staff to access internet, software and hardware if needed? |  |
| **Results and system impact**  The means by which results are measured and tracked, and the emerging benefits communicated | Plans for the evaluation of social media-based consumer engagement activities are made at the same time as planning the activity. | How will social media-based engagement activities be evaluated? Evaluation measures may include analytics data, sentiment analysis, user experience, impacts on the outcomes of service design or QI activities, or other appropriate measures.  How have consumers been involved in developing the evaluation plan? |  |
| Evaluation of social media-based engagement activities is not solely based on reach and demographic data provided by social media platforms (e.g., Facebook Insights data). | How will social media-based engagement activities be evaluated?  Does our evaluation plan contain measures which can evaluate:   * How well social media worked as a consumer engagement tool; and * The outcomes of the health service design or QI process? |  |
| There are mechanisms in place for sharing the outcomes service design and QI activities with the consumers who were engaged in them (either through providing data or by being involved in co-design activities) | How will we share the results of service design or QI activities with consumers who contribute data which informed the project (e.g., through feedback on social media, consultation activities, surveys etc)?  How will we share the results of service design or QI activities with consumers who are involved in co-design activities or other decision-making roles? |  |
| There are mechanisms in place for sharing the knowledge and experience gained through social media-based consumer engagement activities within the organisation and more widely with other services | How will you share the knowledge and experience you gain through conducting social media-based engagement activities with people in your hospital (staff and consumers) who were not involved?  How will you share the knowledge and experience you gain through conducting social media-based engagement activities with other hospitals and health services? |  |
| **Culture and behaviours**  The mechanisms to support and embed a continuous improvement environment, including leaders’ awareness of their role in driving improvement | The leadership of the organisation supports the use of social media as a tool for consumer engagement | How do our organisation’s leaders show their support for the use of social media as a tool for consumer engagement? |  |
| There is whole-of-organisation buy-in to the use of social media as a tool for consumer engagement | How has the use of social media as a tool for consumer engagement been shared throughout our organisation?  How has organisational buy-in to the use of social media as a tool for consumer engagement been demonstrated? |  |
| Departments/staff responsible for social media-based consumer engagement (including communications, quality improvement, consumer engagement, information technology, and consumer representatives) can work together effectively | How do communications, QI, consumer engagement, IT staff and consumer representatives communicate with each other?  How are communications, QI, consumer engagement, IT staff and consumer representatives supported to build relationships with each other?  Are there any current projects which involve communications, QI, consumer engagement, IT staff and consumer representatives? |  |
| Communications staff communicate with other areas of the hospital, including consumer representatives, and understand their role in designing and improving hospital services | How do communications staff communicate with other areas of the hospital?  How do communications staff communicate with consumer representatives?  What do communications think their role is in designing and improving hospital services?  How are communications staff involved in service design and QI projects? |  |
| The information gathered, and consumer contributions made, through social media-based consumer engagement are not viewed as being of lower importance than information or contributions through other engagement methods | How is the information gathered through social media-based consumer engagement used to inform service design and QI?  How is social media used to enable consumers to contribute to the service design and QI activities?  How does the information gathered, and contributions made, through non-social media consumer engagement activities contribute to service design and QI activities? Is this different to social media-based information and contributions?  What attitudes and beliefs do staff hold towards the value of information gathered or consumer contributions made through social media versus those made through other methods? |  |
| The organisation advocates for high speed, low cost, internet access Australia-wide | How does our organisation advocate for accessible internet for all people in Australia? |  |

## Building your social media community

This planning tool has been developed from the enablers for building a social media community identified through our research and corresponds to information provided in **Section 2.1.2 Building your organisation’s social media presence**. This tool can be used to plan how you will build the social media community involved in your organisational social media pages/channels. You might already do some of the actions outlined below, or you may decide that some of the actions are not possible or necessary for your community. Because this is a new area of research and ‘one size does not fit all’ you might also identify other actions that you need to use to grow your community.

| **Strategy** | **Actions to support this strategy** | **Will we implement this action? Y/N** | **How will we implement this action?** | **Who will be responsible?** | **Timeline** | **How will we measure success?** |
| --- | --- | --- | --- | --- | --- | --- |
| Consider which platforms to use and understand platform features which may impact engagement with target audiences | Involve consumer representatives (including members of specific target audiences) in the development of organisational social media plans and strategies |  |  |  |  |  |
| Understand the range of communication channels – including existing social media platforms – used by the organisation, and any restrictions on access and use of new/existing channels due to infrastructure or organisational policy constraints. |  |  |  |  |  |
| Have organisational pages across multiple social media channels |  |  |  |  |  |
| Consider adding Instagram to your suite of organisational pages |  |  |  |  |  |
| Audit the demographics of your current social media audience using the data available from the platforms you use. |  |  |  |  |  |
| Work to make your social media channels more accessible |  |  |  |  |  |
| Utilise social media platform features which encourage two-way engagement, such as polls and quizzes |  |  |  |  |  |
| Understand social media features like algorithms and targeted advertising, and use these to reach target audiences and/or increase engagement |  |  |  |  |  |
| Promote organisational social media pages to consumers and the wider community | Promote social media pages through existing organisational communication channels (e.g., website, email, display boards within the hospital, newsletters, health information outputs) |  |  |  |  |  |
| Encourage staff to tell consumers about the existence of organisational social media pages |  |  |  |  |  |
| Encourage consumer representatives and staff who use social media to share organisational social media pages and posts with their social media networks. |  |  |  |  |  |
| Connect your organisational social media pages with the social media pages of relevant consumer- and condition-specific organisations. |  |  |  |  |  |
| Develop high quality and engaging content | Most posts on organisational pages which aim to engage consumers should be consumer-focused (e.g., consumer representative profiles, patient stories, health information for the community) rather than staff- or organisation-focused. |  |  |  |  |  |
| If your organisation is trying to reach a range of audiences through social media (e.g., consumers/community, staff, research community) consider using different platforms for different target audiences/purposes. |  |  |  |  |  |
| Collaborate with members of target audiences to create content that is relevant to them and their community. |  |  |  |  |  |
| Collaborate with consumers who represent diverse backgrounds and experiences from your hospital’s community and target audiences when creating social media content. |  |  |  |  |  |
| Create opportunities for consumers to make and contribute user-generated content |  |  |  |  |  |
| Co-create or share social media content with consumer- and condition-specific organisations. |  |  |  |  |  |
| Share content that is evidence-based and trustworthy |  |  |  |  |  |
| Share content that is suitable for low-English literacy audiences, including Simple or Plain English content, audio-visual content and translated content |  |  |  |  |  |
| Publicly acknowledge and celebrate the contributions consumers make to service design and QI through social media, and share the outcomes of social media-based consumer engagement activities |  |  |  |  |  |
| Ensure it is very clear when information shared on organisational social media pages is related to fundraising or may lead to other costs or other commitments, such as being placed on a mailing list or attending an event. |  |  |  |  |  |
| Aim for a consistent organisational style across your communications (social media, website, audio-visual material, printed health information etc). Your organisational look and feel – including organisational ‘voice’, and the visual, writing and communication styles, should be as similar as possible across all platforms. |  |  |  |  |  |
| Have a process in place for managing patient or consumer feedback given through social media | Actively monitor and moderate organisational social media channels |  |  |  |  |  |
| Understand the typical ways that consumers are providing feedback to your organisation through social media, and the types of feedback that is being given. |  |  |  |  |  |
| Evaluate how feedback given through social media is currently responded to, acted upon, and informs service design and QI activities. |  |  |  |  |  |
| Ensure the process for managing patient or consumer feedback received through social media does not create barriers to giving feedback. |  |  |  |  |  |
| Adopt a ‘no wrong door’ approach to receiving feedback which supports patients and consumers to engage with the feedback process no matter the method they use to communicate with the organisation. |  |  |  |  |  |
| Avoid approaches which redirect social media users to alternative feedback pathways without support or without passing on the feedback received (e.g., telling users that they will need to complete an online form to get their concerns addressed because feedback is not received through social media) |  |  |  |  |  |
| If you are receiving large volumes of unsolicited patient experience feedback through social media channels you need to understand why. It likely indicates that other feedback mechanisms offered by the hospital are failing to meet patient/consumer needs. |  |  |  |  |  |
| The same processes should be used whether the feedback received through social media is positive or negative |  |  |  |  |  |
| Organisations need to determine consistent processes for how public feedback is responded to, and when/if social media posts are removed or hidden, and this process should be clear to all social media users |  |  |  |  |  |

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## Planning a safe social media community

This planning tool has been developed from the enablers for making social media communities safe identified through our research. This tool corresponds to information provided in **Section 2.1.3 Making social media spaces safe**. This tool can be used to plan your strategies and actions around safety in your social media-based consumer engagement activities. You might already do some of the actions outlined below, or you may decide that some of the actions are not possible or necessary for your community. Because this is a new area of research and ‘one size does not fit all’ you might also identify other actions that you need to use to grow your community.

Please note that this is not intended as a definitive list of strategies and actions for moderating or managing safety in social media spaces. Your communications team should also be able to provide further advice about social media safety.

| **Strategy** | **Actions to support this strategy** | **Will we implement this action? Y/N** | **How will we implement this action?** | **Who will be responsible?** | **Timeline** | **How will we measure success?** |
| --- | --- | --- | --- | --- | --- | --- |
| Social media governance documents and community standards are available and accessible for all users | Make organisational social media policies available to any stakeholders affected by them. |  |  |  |  |  |
| Create social media community standards for organisational pages and private spaces in collaboration with consumer and provider users and post these on the organisation’s social media pages. |  |  |  |  |  |
| Social media policies and community standards must be clear about whether any data will be gathered through social media, and how this may be used to inform service design and QI activities. |  |  |  |  |  |
| Social media monitoring and moderation | Actively monitor social media pages, and moderate discussions in-line with community standards when required. |  |  |  |  |  |
| Consider using automatic moderation tools available on some platforms, such as page moderation word lists or pre-moderation of posts. |  |  |  |  |  |
| Understand that social media users can interact 24/7 and have plans in place for monitoring social media pages outside of business hours. |  |  |  |  |  |
| Be prepared for negative comments and discussions of polarising topics | Anticipate negative reactions to social media content, and negative posts on social media pages, and have plans in place for responding to/managing negative posts. |  |  |  |  |  |
| Have specific plans in place for managing social media comments or messages involving self-harm or suicide, threats of harm to others, disclosure of illegal activities, and potential defamation. |  |  |  |  |  |
| Be strategic about posting content that may be controversial or create a lot of discussion – have a plan in place for how discussions will be managed, and time posts so that adequate staff are available for monitoring and moderation. |  |  |  |  |  |
| Enable private messaging features for social media accounts, and endeavour to respond to private messages soon after they are received. |  |  |  |  |  |
| Respect user privacy | Allow users to control their own privacy settings. |  |  |  |  |  |
| Have options for users to use pseudonyms or be anonymous. |  |  |  |  |  |
| Gain permission before posting content about a person (patient/consumer or staff member), whether they are identifiable or not. |  |  |  |  |  |

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## Planning a social media-based consumer engagement activity in your project

This planning tool has been developed from the enablers for social media-based communication identified through our research. This tool corresponds to information provided in **Section 2.2 Using social media-based consumer engagement in your service design or QI project**. This tool presents a series of questions for project managers and participants to consider when planning social media-based consumer engagement activities, alongside further information which can guide planning and decision making around each key question.

| **Key questions** | **Further information to guide planning** | **Our plan** |
| --- | --- | --- |
| How will consumers from target audiences be involved in creating the project plan? | Consumer representatives from target audiences should be involved in determining the best methods of engagement with their communities. If social media is to be used, representatives from target audiences can provide guidance on:   * Which platforms to use to reach their community * Which engagement methods are best? * Recruitment strategies * The potential barriers to social media-based engagement (e.g., access to internet and devices, written-language heavy nature of communications, disability access issues, privacy, or anonymity requirements) and can help devise strategies to overcome or minimise these * Developing social media content which meets community needs |  |
| What will social media be used for?  Which platforms will we use?  How will we use them? | In service design and QI activities, social media can generally be used for two broad purposes – to **gather information** (see *Section 2.2.2* *Using social media to gather data to inform service design and QI)* or as a **virtual room** where consumers and providers can work together (see *Section 2.2.3 Using social media as a collaborative space for service design and QI*).  Deciding on what social media will be used for in your project will guide your choice of platform(s) and methods of use. |  |
| How will social media-based methods complement other methods of engagement? | Social media-based methods of engagement can enhance other methods of engagement (such as face-to-face) and vice versa. By using social media-based methods alongside other methods, engagement activities have the potential to reach a larger and more diverse audience and create more opportunities for relationship building and interaction between those involved in the service design or QI work. |  |
| How will consumers be recruited into social media-based engagement activities? | Consumer recruitment can happen through social media or via other methods. Potential strategies include:   * General callouts through hospital social media and other communication channels * Targeting consumers who already use social media to be involved in the project * Asking existing consumer representatives to be involved in the social media-based activities * Providers and consumer representatives sharing recruitment information through their social media channels and networks * Engaging with existing online consumer communities |  |
| What training or other support is needed by consumers and providers involved in the service design or QI activity? | For social media-based activities, training and access to internet, devices and social media platforms needs to be considered for consumers and providers in addition to any upskilling required around consumer engagement and service design/QI. |  |
| How long will engagement activities go on for, and how much time are they estimated to take? | Having an estimate of time frames and commitment from the start of the project will allow both consumers and providers judge their ability to be involved and plan their time around other commitments. |  |
| How will the social media channels be monitored and moderated? | Creating a safe environment is essential for social media-based consumer engagement activities. See *Section 2.1.3* *Making social media safe* for more information about monitoring and moderation of social media spaces |  |
| How will the findings from consumer engagement activities be used to inform service design and QI and influence changes? | All people participating in service design and QI activities should know how their information and contributions will be used to create positive change within the organisation. This should be clear the beginning of their engagement. Knowing how the findings from consumer engagement activities will be used to make positive change also informs project evaluation planning. |  |
| How will the outcomes of consumer engagement activities be shared with the wider community? | Social media channels are an ideal place for sharing the outcomes of consumer engagement. Seeing their contributions creating positive change, and being acknowledged for the work they are doing, are important motivators for consumers and providers involved in service design and QI work. Additionally, sharing how you conducted social media-based consumer engagement can also help other organisations, service providers, and consumers to try using social media in their own consumer engagement activities. |  |
| How will social media-based consumer engagement activities be evaluated? | Evaluation plans for social media-based consumer engagement activities must be considered during planning the activities. Consumers and target audiences of the activities should be involved in planning the evaluation.  The evaluation of social media-based engagement activities should be based on a range of data types – not just the data provided by social media platforms (e.g., analytics data). This type of data typically only gives the numbers, and demographic breakdown of people, who have seen or interacted with certain posts or activities. It does not provide useful evaluation data such as whether people acted on the posts, or whether there has been a change to services because of social media-based engagement activities. Evaluations based solely on social media audience demographics data will not be sufficient to evaluate social media-based consumer engagement activities.  To help you plan your evaluation:   * Existing tools for evaluating consumer engagement, such as the [NSQHS Standards User Guide for Measuring and Evaluating Partnering with Consumers](https://www.safetyandquality.gov.au/publications-and-resources/resource-library/nsqhs-standards-user-guide-measuring-and-evaluating-partnering-consumers), may help with the development of evaluation plans for social media-based consumer engagement. * The [Evaluation Framework 2.0](https://gcs.civilservice.gov.uk/publications/evaluation-framework/) from the UK Government Communication Service provides a very comprehensive approach to evaluating and reporting communication activities, including stakeholder engagement activities. |  |

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## Building a collaborative project team on social media

This planning tool has been developed from the enablers for social media-based communication identified through our research. This tool corresponds to information provided in **2.2.3 Using social media for collaborative consumer engagement approaches.** This tool presents a series of strategies, further information and guiding questions which can help groups to negotiate their approach for building a strong social media-based team.

| **Strategy** | **Further information** | **Example discussion questions** | **Responses and plans** |
| --- | --- | --- | --- |
| Understand and address individual and group needs | The method of engagement and/or the social media platform being used may cause barriers which prevent participants from being fully involved in engagement activities. Work with participants to understand and address any barriers they are experiencing so that everyone can participate equally. | Is anyone experiencing problems with:   * Accessing or navigating the platform? * Contributing to discussions (e.g., posting in forums, viewing responses etc)?   Are there any other problems or frustrations we are experiencing because of the way we are using social media in the project? |  |
| Discuss with all participants (consumers and staff) their needs in terms of safety, security, and privacy. Involve the group in creating group standards and mutually agreed plans for managing and moderating discussions. | What are our concerns about privacy or safety in this social media space? How can we manage these?  What are some group rules or standards you think that everyone should follow?  Who should be responsible for leading these discussions?  Should the discussion be moderated? If so, what are the moderation rules? For example, when should posts be blocked/removed; who should be responsible for moderation? |  |
| Determine what each participant (consumers and staff) needs to feel that their involvement is valued by the organisation and personally beneficial for them and aim to meet those needs where possible. | What do you hope to get out of being involved in this group?  What would make you feel valued?  How would you like your contributions acknowledged? |  |
| Determine the training and support needs of all participants (consumers and providers) in relation to technology, social media, consumer engagement, or QI/service design. | What training or support do you need to be able to participate fully in this group? |  |
| Share group roles | Provide opportunities for all participants (consumers and providers) to take on key social media roles (such as moderation, facilitating discussions, developing content). Providing opportunities for all participants to take on different roles within the group, particularly leadership roles, can help flatten hierarchies and address the power imbalances that often exist within consumer engagement activities. | There are different roles possible in this group such as <name roles>. Do we want individuals to take on and keep different roles, or would we like to take turns at trying out different roles in the group? |  |
| Create opportunities for interpersonal connection | Give participants time and space within the project to develop personal connections and relationships in addition to the time they spend working on the project. This may include providing social media spaces for general conversations unrelated to the project work and holding videoconferences, face-to-face meetings and/or in-person events. | How can we get to know each other better?  What opportunities are there for us to get to know each other outside of this social media group/this project?  Should we have a separate channel for social discussions? |  |
| Plan for diversity | Strive for diverse participation of cultures, ethnicities and experiences across all participants and groups roles in the consumer engagement activity, including in leadership roles. | How can we attract a broad range of people to be involved in this activity?  Are there any groups of people whose voices are not currently represented in this project? |  |
| Celebrate and promote success | Celebrate and promote the contribution of participants within social media-based engagement activities and the influence these activities have had on service design and QI projects. | How would you like your contributions acknowledged?  How can we share the work we are doing with other people in our organisation?  How can we share the work we are doing with people outside our organisation? |  |
| Encourage all participants to share their involvement through their own social media accounts if they want to. This can help participants grow their own social media presence and may lead to further opportunities or networks that benefit the individual, QI or service design team or organisation. | How can we help you to share your experiences in this group through your own communities?  How can this project help you to grow your own social media profile? |  |

## Linking social media-based engagement activities to the National Standards

Involving consumers in organisational governance, service design and QI corresponds to actions required in [Standard 2: Partnering with Consumers in the National Safety and Quality Health Service Standards (NSQHS Standards)](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard). Using social media as an engagement tool may help with meeting hospital accreditation needs.

Undertaking the auditing and planning processes related to **organisational readiness** for social media-based consumer engagement may assist with fulfillment of:

* Integrating clinical governance
  + [Action 2.1](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/clinical-governance-and-quality-improvement-systems-support-partnering-consumers/action-21)
* Applying quality improvement systems
  + [Action 2.2](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/clinical-governance-and-quality-improvement-systems-support-partnering-consumers/action-22)
* Communication that supports effective partnerships:
  + [Action 2.8](https://www.safetyandquality.gov.au/standards/national-safety-and-quality-health-service-nsqhs-standards/partnering-consumers-standard/health-literacy/action-28)
  + [Action 2.9](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/health-literacy/action-29)
  + [Action 2.10](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/health-literacy/action-210)
* Partnerships in healthcare governance planning, design, measurement and evaluation:
  + [Action 2.11](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-211)
  + [Action 2.12](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-212)
  + [Action 2.14](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-214)

Planning for, and conducting, social media-based consumer engagement in **service design and QI projects** may assist with fulfillment of:

* Applying quality improvement systems
  + [Action 2.2](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/clinical-governance-and-quality-improvement-systems-support-partnering-consumers/action-22)
* Communication that supports effective partnerships:
  + [Action 2.8](https://www.safetyandquality.gov.au/standards/national-safety-and-quality-health-service-nsqhs-standards/partnering-consumers-standard/health-literacy/action-28)
  + [Action 2.9](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/health-literacy/action-29)
  + [Action 2.10](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/health-literacy/action-210)
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  + [Action 2.11](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-211)
  + [Action 2.12](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-212)
  + [Action 2.14](https://www.safetyandquality.gov.au/standards/nsqhs-standards/partnering-consumers-standard/partnering-consumers-organisational-design-and-governance/action-214)