



Engaging with Partner Organisations

HSE Communications guidance & toolkit

1. Introduction

In the HSE, we know that people are more likely to seek our help, report symptoms, show up for appointments and follow health advice if they trust and have confidence in us. It is no exaggeration to say that for a health service, trust can be a matter of life and death. All of our communications activity and programmes aim to build and maintain trust and confidence in our health service and its future.

Many of the people who use our services are members of voluntary or community organisations. This could be a patient representative organisation, a voluntary organisation, an advocacy organisation or a sporting organisation.

Our teams and staff often engage with these partner organisations to inform or improve our health services and our messaging through partner input. Engagement such as this is a mark of a quality service. Partner organisations also have an important role in helping to share and communicate health updates and messages to their members.

This toolkit will help HSE teams who are planning a communication programme to consider, plan and implement partner engagement as part of that work.

What builds trust?

When we conducted research to understand what builds trust in the HSE, three of the most important needs were¹:

- 1. People feeling we listen to them and take their views into account.
- 2. Showing that we understand people's needs, and that we include them and other important stakeholders in decision-making about their health and wellbeing.
- 3. Communicating with people with respect, and in ways that are easy to understand.



¹ HSE Trust and Confidence research 2021.

The aim of this toolkit

This toolkit provides a step-by-step guide to developing and implementing a stakeholder communications and engagement plan with external organisations and representatives.

The toolkit aims to:

- support consistent stakeholder engagement practice across the HSE
- show how stakeholder engagement can link seamlessly with other communications channels
- provide practical tools to support effective, inclusive and appropriate engagement
- support and reinforce relevant HSE guidance and resources.

This toolkit focuses on direct engagement – such as group consultations, group discussions, qualitative research or other interactive methodologies. Engagements should be, engaging! Doing this well allows us to really listen and understand people's views and needs, and including people in decision-making helps us make decisions that people feel they can trust. It also helps us find out if our communications are useful to people and are achieving what we want them to achieve.

Context

This stakeholder engagement toolkit builds on the HSE's Change Guide and Better Together: The Health Services Patient Engagement Roadmap. Specifically, this toolkit is a resource for engaging externally with various groups and/or organisations, usually as part of a wider programme of internal or external communications. It is worth noting that the Change Guide focuses on our internal stakeholders and Better Together focuses on patient engagement.

If you are looking for public/patient input and consultation, please link in with the HSE National Patient Forum and National Patient Representative Panel team.

The National Patient Forum is the first point of reference for HSE divisions and clinical care programmes when seeking input from patients/public in the planning, design and delivery of services and will act as a sounding board for implementation of new and existing national programmes.



We have incorporated our experiences to date and recent research on trust and stakeholder engagement to provide what we hope are helpful tools and guidance for those seeking to engage with stakeholders.

You can find more information on the **National Patient Forum here** •

You can also find out more about Patient and Public Involvement (PPI) here

How HSE Communications can help

There are resources available through HSE Communications to support and enhance your stakeholder engagement work.

Our local, regional, and national communications teams work with all health services and their teams across the country to deliver a wide range of communications projects.

HSE Communications provides services that include:

- Communications strategy & planning
- Social marketing and behaviour change campaigns
- Press & media relations, media analysis & training
- Public information programmes
- Public relations advisory
- Brand development; market research and insight development
- Digital content and design for HSE.ie sites for the public, for staff and for regional and national services
- Social media strategy and management
- Video and audio content development
- HSE information line 1800 700 700
- Internal and staff communications; publications, reports and health literacy
- Health Matters Staff Magazine content, publishing and distribution
- Crisis communications & emergency planning
- Training and development in communications
- Professional management of contracts for advertising, media buying and digital development
- Irish language services
- Stakeholder engagement communications guidance



You can find more information on HSE Communications services here 🔊

You can request communications support from the HSE Communications Division here

Engaging stakeholders

Who is a stakeholder?

'Stakeholder' is the name for everyone who is influenced by, or has influence on, your organisation. For the HSE, that is pretty much everyone in Ireland. ²

However, this toolkit is specifically designed for those wanting to engage with external partner organisations, for example, organisations from the community and voluntary sector.

If you are not yet sure who your stakeholders are, do not worry, stakeholder mapping tools are in this toolkit to help you to identify your stakeholders (see planning step 2 in this toolkit).

What is Stakeholder Engagement?

The purpose of engagement can range from relationship development and community capacity-building through to public participation to inform decision-making and service development.

We usually engage with our stakeholders:







Listening and collaborating are about gaining new knowledge to help the HSE do what it does better. Communicating can be part of that too, but the focus there is usually to inform or promote knowledge, understanding or action among others.

Many stakeholders and stakeholder groups will already have a history of engagement with the HSE. This experience will inform how your engagement project progresses and how stakeholders might engage with you in the first instance.

² The HSE's Research & Development *Stakeholder Engagement Guide* provides an excellent overview of some of the HSE's stakeholders. Please see: https://hseresearch.ie/wp-content/uploads/2021/09/Guide-no-4-Stakeholder-engagement-.pdf



Why is listening important?

One of the biggest drivers of distrust is the feeling that we are not really listening and not responding to concerns and addressing what matters to people. This may be a result of individual experiences, or frustration with specific systems and processes, or other factors.

In this toolkit, we focus on listening in a formal context, through established processes.

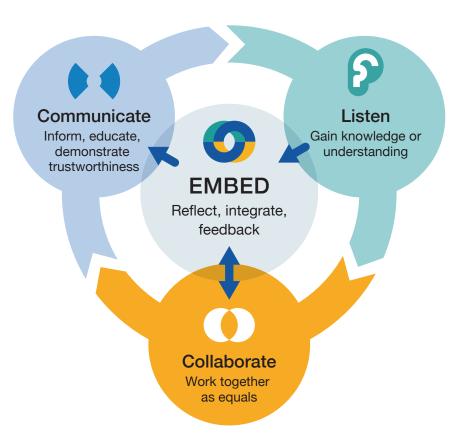
Why is collaborating important?

We can't possibly know and do everything, and collaboration and partnerships are valuable ways of developing solutions that are both practical and ethical. In addition, engagement – both listening and collaborating – is important when we have to make difficult decisions, particularly if those decisions will impact patients and other people who use our service or wider society. Trust research shows that people trust decisions when they can see they have not been taken behind closed doors, but by experts and involving 'people like me' (or those representing their perspective) in an open and trustworthy process.³

Why is communicating important?

Everything we do in the health service requires effective communication. As an example, it is important to inform people about our services so people understand why, how and where to access those services.

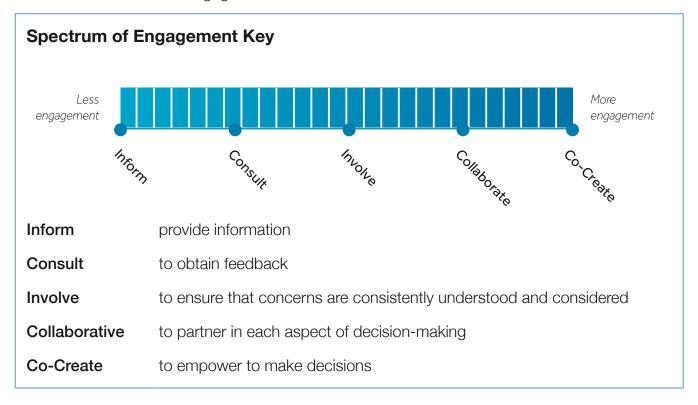
Communication style⁴ has a significant impact on how we engage with people, develop effective working relationships and support people. You can find more information on an effective communication style from the **HSE Change Guide**.



³ Please refer to Edelman Trust Barometer research.

⁴ HSE - OD&D (2008: 12) People's Needs Defining Change - Health Services Change Guide

According to the World Health Organization's (WHO) Stakeholder Mapping Guide⁵, it is important to consider what level of engagement is needed:



Designing and delivering meaningful engagement

Any engagement has to be meaningful for you and your stakeholders. Recent research has identified three main characteristics that make engagement meaningful, as follows:

- shared purpose
- trustworthy process
- visible impact.



⁵ WHO Stakeholder Mapping Guide: https://cdn.who.int/media/docs/default-source/reproductive-health/contraception-family-planning/stakeholder-mapping-tool.pdf?sfvrsn=981f5162 3

Meaningful engagement asks:



Shared Purpose

Is the purpose of the engagement a good use of your time and HSE budget? Will it be a good use of time for potential participants?

It shouldn't be a tick box exercise or something where decisions have already been made and views are not going to be taken seriously.



Trustworthy Process

Participants and others can see that the process is open, honest, fair, respectful and inclusive, particularly of those most likely to be impacted. It is delivered competently and with integrity.



Visible Impact

Participants and others are able to see the impact of the engagement on decision-making and practice. Where trade-offs and competing priorities mean that impacts are different to participants' expectations, the rationale is explained.



Delivering meaningful engagement

Key steps

Planning Step 1: Clarify purpose

To clarify the purpose of your engagement, it is important to:

- Define the purpose. From the outset, it is important to define the reason for undertaking your stakeholder engagement. This may involve outlining the problem you are trying to address, the decision you wish to reach or the relationships you want to build.
- **Define the objectives.** Are you trying to reach a certain decision or hoping to gather feedback on a proposal? Whatever the reason, the project objectives should be clearly defined and aligned to your service plan and the **HSE Corporate Plan**.
- Service/project objectives vs. engagement objectives. Objectives may
 vary for each stage of developing a service or a project and may differ from
 the overall service or project objective. For example, a project objective may
 be to implement a new app to help service users find local services and the
 engagement objective may be to inform potential users how to access the app.
- Be inclusive. It is important to ensure that potential critics and those most likely to be negatively impacted by the service/project are included.
- You might consider setting SMART goals. SMART goals are specific, measurable, attainable, realistic and timely. You can find more information about setting SMART goals here.

Please refer to **Template A: Stakeholder engagement purpose & objectives** for more information.

You might also consider the 5 W's of involvement, you can find more information here.



Planning Step 2: Understand who to engage – stakeholder mapping and prioritising

There are many ways of mapping the potential stakeholders with whom you need to engage. Here we are exploring one that helps with problem identification, mapping and prioritising simultaneously. It is called **Stakeholder Mapping by Impact.**

It involves a series of questions about the impact of the issue/project under discussion and mapping these according to impact and influence.

Consider these 6 questions:

- 1. Who could be most negatively impacted and why?
- 2. Who could be most positively impacted and why?
- 3. Who can help us understand what we might have missed?
- 4. What would failure look like?
- 5. Who needs to be around the table to help us to understand and minimise the negative impacts and maximise the positive ones?
- 6. Who do we need to collaborate with, listen to and communicate with to make the benefits as widespread as possible and minimise the risks of failure?

Next, map out who you need to involve⁶:

The links to these are in **Template B** below.



You can find helpful templates in the HSE Change Guide – Working with Service Users, Families, Citizens, Communities and Staff. \bigcirc

⁶ Please see HSE Change Guide: https://www.hse.ie/eng/staff/resources/changeguide/resources/template-611-interest-influence-mapping-grid.pdf

Figure 26: Influence-Interest Mapping Grid

HIGH Identify and address Keep fully engaged their needs High interest/high influence Low interest/high influence Key players -**Engage and consult** focus efforts on this group. on interest areas. Involve in leadership Try to increase level and setting direction. of interest. **Engage and consult** Aim to move to at all stages right-hand box INFLUENCE Increase engagement **Monitor** High interest/low influence Possible advocates/ Low interest/low influence supporters for the change Inform via general Keep informed and consult communications, on interest areas. newsletters, website, Citizens and service users often fall into this category - take mail shots, etc. steps to increase their Aim to move to influence by empowering them to be involved and to become right-hand box active citizens LOW HIGH **INTEREST** Adapted from: Eden and Ackermann (1998: 122) [103]; Bryson, J. M. et al (2011) [40]



People's Needs Defining Change - Health Services Change Guide

Template 6.1.1: Interest Influence Mapping Grid (continued)



Adapted from: Eden and Ackermann (1998: 122) [103]; Bryson, J. M. et al (2011) [40]. People's Needs Defining Change – Health Services Change Guide

Planning Step 3: Ensure clarity on limitations and barriers

There is no such thing as a perfect engagement so don't let worries about competence, fear of failure or desire for perfection get in the way.

It is, however, important to ensure that we are not promising what we can't deliver when we engage with people, so it is worth being explicit about the constraints as part of engagement planning and delivery.

Every form of engagement has barriers and limitations. It might be funding, it might be your lack of expertise in a certain area, stakeholders' lack of capacity to engage or that the trust of your potential participants has been lost for various historic reasons.

For example, if there are organisational or political constraints on certain courses of action, but you still need to understand what people want or need – say so in advance. Clear is kind. Clarify what is and isn't possible before you start so that people can choose to engage or not, but at least you have been honest and trust is not further eroded by expectations that cannot be met.

Consider possible constraints from your own perspective and also with whom you may want to engage. This could also be part of the opening session of an engagement – being open about issues and asking for openness in return.

The HSE Better Together Health Services Patient Engagement Roadmap (2022) has a helpful **Engagement Methods Toolkit**, that provides details on different types of engagement.



Step 4: Designing and delivering a trustworthy process

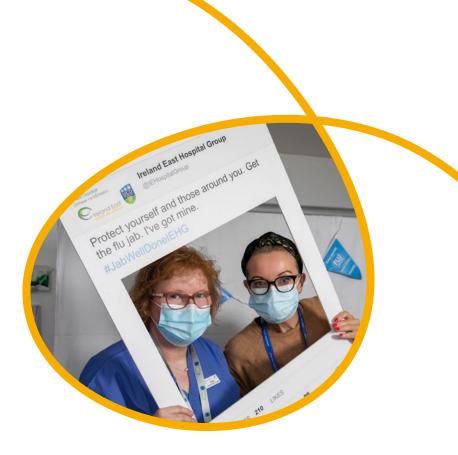
The 4 Trust Drivers identified by HSE trust research provide an excellent framework for designing a process that participants can and do trust and that works for them. The ideas here are suggestions from over 130 civil society groups and analysis of citizen dialogues, as follows:

Public Good

- Participants can see by your stated purpose and desired outcomes that the engagement is based on serving the public good.
- This is communicated clearly in aspirations for the engagement, invitations, agendas and reports.

Respect

- Are you involving stakeholders early enough for their perspectives to make a meaningful impact?
- How do you intend to give feedback about how their contribution has contributed to decision-making?
- Are you ready to suspend judgment? Are you ready to listen and take seriously all experiences?
- Are you clear that experience, not just expertise is valuable and are seeking out contributions of all types?
- Some perspectives may be more difficult than others to obtain. Are you ensuring you don't give up on seeking a perspective because it is harder to reach certain people?
- Are you respecting people's circumstances by making the engagement at a time and place convenient for them? This may also be about balancing the convenience for participants of online engagement with the perhaps higher quality of engagement that happens face-to-face.



- Are you properly supporting and valuing people's participation?⁷
- Are you providing appropriate language support, e.g. translation in all its forms?
- Are you avoiding HSE jargon and using clear, plain language?
- Are you ensuring that certain perspectives or voices don't dominate both in choice of participants and meeting facilitation?

Integrity – honesty and openness

- Are you open and honest, in process design and communication, about any important limitations to the process or the capacity for the project to make change?
- Are you answering all questions honestly and openly, even difficult ones?
- Are you ensuring the process is open enough to inspire trust, whilst also ensuring safe sharing and psychological and physical safety of participants?
- Are you open and honest about how participants' feedback has contributed to changes in the way we do things?

Competence

- Do you have the resources and internal buy-in to deliver the engagement you have proposed to participants?
- Engagements should be, engaging! Do you have the necessary methodological design expertise, but also do you know how to make it interesting, involving and relevant?
- Are you clear about what information and knowledge participants may need to contribute properly?
- Do you have competence in facilitation would an independent facilitator be better for participants?
- Do you have a GDPR process in place? Refer to HSE GDPR information to be sure.
- Have you considered the TORs and consent to participate?
- Is there a process of evaluation of success of the engagement? Does this include evaluation by participants?



⁷ For example, where appropriate, with financial compensation for their time, travel to the venue etc.

Step 5: Consider your stakeholder engagement readiness

Before starting stakeholder engagement, it is useful to know what you already have in place or need in order to deliver meaningful stakeholder engagement. To deliver stakeholder engagement that your stakeholders find useful, you will need to be prepared to invest a significant amount of time and effort, and consider the staffing and skills needed.

Most importantly, however, is your preparedness to act on the information you receive from the stakeholders, rather than just responding. This includes taking action as needed, and possible behaviour change by the health service and its staff as required, to best meet the needs of service users.

It is important to consider your existing capacities.

- Who will manage the stakeholder engagement work?
- Who will chair the stakeholder engagement work?
- Will you do this in person or online? Ask your stakeholders what will work best for them.
- Do you have a secure database of all of your stakeholders?
- How will you engage your colleagues in the stakeholder engagement process?
- Do you have your GDPR processes in place? Refer to the HSE GDPR policy.
- How will you develop insights from stakeholder engagement and how will it influence your service/project?

Step 6: Develop the stakeholder engagement plan and timeline

In the stakeholder engagement planning process, it is important to have an engagement plan that addresses your objectives and meets the needs of the stakeholders. Most likely, stakeholders will have differing capacities to participate and a plan, with a clear timeline, will help accommodate and encourage diversity in participation.

As part of this step, consider a short risk assessment and make a contingency plan where appropriate.

Please refer to Template C: Stakeholder engagement plan and timeline.



Step 7: Invite stakeholders

Once you have identified your external partner organisations (your stakeholders), you will want to contact them and invite them to participate. At the point of invitation, the stakeholders must be given clear information on what they are participating in, what is expected of them in the process, and the timeframe.

Step 8: Engagement

Once external partner organisations (your stakeholders) have agreed to participate in the process, the first meeting takes place. Depending on your timeline and objectives, the stakeholder engagement process may be one formal engagement, or a series of formal engagements.

For the first meeting, you will want to provide background information, address any questions, provide updates regarding service or project status and explain what exactly you want the stakeholders to help with.

Your timeline will be very important. If your stakeholder engagement requires a series of meetings, check in with the stakeholders during the process to see when they think the engagement process needs to come to an end.

During the engagement process, it is important you take every opportunity to provide feedback to your stakeholders so they understand how their input has been used or shared.



Step 9: Feedback – demonstrating visible impact

What makes engagement meaningful for participants is to know that their contribution has been taken seriously and their perspective has had an impact on the outcome under discussion. Where trade-offs and competing priorities mean results are different to participants' hopes or expectations, the rationale should be explained openly.

Research shows that people don't expect their every view to be necessarily incorporated, but explanations as to why not are essential to building trust in the process and outcomes. Where important issues are not addressed, honesty and openness are essential.

- Who are you going to engage with internally and externally to ensure you can take appropriate action on the feedback you have received? This is critical, deciding what to change based on the feedback provided, how to do it and then communicating about it.
- How are you planning to give feedback to participants about the impact of their contribution on the project under discussion?
- Where this may be different to expectations, how are you communicating the reasons behind these decisions?
- How are you planning to involve them further as your project evolves? How are you planning to give feedback as the project develops?

The HSE Better Together Health Services Patient Engagement Roadmap (2022) has helpful templates to close-the-loop for communicating the impact.



Step 10: Evaluation

Undertake evaluation that includes an evaluation by participants. Be creative about getting feedback from participants. Ensure it can be anonymous if they desire it.

Consider:

- Did the engagement achieve its objectives for you and for participants?
- What worked and what didn't work for you and them?
- What learnings can you bring to your next engagement process?
- What happens next with the project and is more collaboration, listening or communication necessary?

Communicate your evaluation honestly as part of demonstrating Visible Impact.

The HSE Better Together Health Services Patient Engagement Roadmap (2022) has helpful **Evaluating and Reporting Templates**, that provide details.

Sharing some of our key learnings during the COVID-19 stakeholder engagement process

- Be clear on the: who, what, where, when, how and why.
- Lead with integrity and the HSE values (care, compassion, trust and learning). If you don't know an answer, explain that you don't know yet.
- Be clear on what you need input on and what can't be changed (what is negotiable and what is not).
- Manage expectations and be clear on the objectives of the stakeholder engagement process. Revisit this at the beginning of each meeting to set the intentions.
- For the Chair, consider before each stakeholder engagement meeting what you are hoping the stakeholders will think, feel and do as a result of the stakeholder engagement meeting.
- Identify stakeholders early.



- Get stakeholders talking to each other and collaborating there is added value for stakeholders when they get to network as part of the process.
- Listen, really listen. Seek to understand before being understood.
- Ask what matters to them, and what matters most.
- Be inclusive. We want all voices in the room, including those who will be most impacted and those who may be critical.
- Say thank you and acknowledge the work of your stakeholder colleagues.
- Follow up.
- Communicate: develop and maintain a communications plan. Storytelling, if relevant
 to your work plan, can be an effective means of demonstrating in practice the potential
 impact of the service and can have positive behavioural influence. Stakeholders can
 be key in helping to generate and share such stories, and might be the next step in
 partnering with your stakeholders.
- Sometimes there will not always be enough time for meaningful stakeholder engagement; for example, at the beginning of the COVID-19 pandemic. If this is the case, always ask "what can I do"? Do you already have a database of your stakeholders? If so, can an email outlining the 'now and the next' to your stakeholders help? In some instances, an email at short notice can really help in sharing information or asking for input.

Tips to ensure engagement is genuine (from the HSE Better Together Patient Engagement Roadmap)

- Establish clearly defined goals. Be clear why are you seeking to engage patients, families and carers.
- Ensure the degree of engagement is consistent with the goals for any given engagement activity.
- Engage Patients early, i.e. from the design stage of the engagement activity.
- Do not engage when the decision has already been made.



- Have a minimum of 2 patient representatives, but ideally strive for a 50%/50% mix of people who attend healthcare services and healthcare staff in any engagement activity.
- Develop a shared mission, clear purpose and intent.
- Use techniques such as values and belief exercises and narratives to facilitate shared understanding.
- Identify expectations and concerns of all involved at the outset of the engagement activity.
- Clarify roles and responsibilities of patient and staff representatives in engagement activities/have role descriptions.
- Agree rules of engagement how the group will work together.
- Be authentic, ensure your intent to engage is genuine.
- Level the power gradient:
 - Ensure all relevant information is shared openly with all who are involved in the engagement activity.
 - Use language that everyone can understand and avoid the use of clinical jargon.
 - Build capacity.
 - Support all involved to participate fully in the activity.
 - Ensure all involved have an equal voice in all aspects of the engagement activity.
- Close-the-loop: communicating back the impact of people's input and feedback.

The HSE Better Together Engagement Methods Toolkit is a valuable resource of information and **is available here**, and further resources are **available here**.



Templates

Template A: Stakeholder engagement purpose & objectives

What is the stakeholder engagement purpose? What are the stakeholder engagement objectives? What are the service/project objectives? Why do you need to engage? What is the scope of your stakeholder engagement? include a line or 2 on scope within the doc.

What are the risks of stakeholder engagement? What are the benefits for stakeholders? What stakeholder engagement has already occurred? What are your negotiable and non-negotiable elements? What limitations will you need to consider, such as time, staffing and resources? Will you need more than one stage of stakeholder engagement? Will you engage different stakeholders using different methods?

Template B: Identification of stakeholders

You can find useful templates in the HSE Change Guide – Working with Service Users, Families, Citizens, Communities and Staff:

Template 6.1.1: Influence-Interest Mapping Grid

Template 6.1.2: Guidance on Stakeholder Mapping and Analysis

Template 6.1.3: Guidance to Develop Engagement and Communication Plan

Below is a sample stakeholder mapping grid from the World Health Organization (WHO) with **more information available here**.



SAMPLE STAKEHOLDER MAPPING GRID

1. IDENTIFY KEY STAKEHOLDERS

To identify key stakeholders in reproductive health and family planning service delivery, consider a list of everyone who may have an interest in the current implementation team's objectives now and potentially in the future. It may not be practical or necessary to engage with all stakeholder groups with the same level of intensity all of the time. This list is likely to change

3. MAP RELATIONSHIPS

over time.

To map the relationships between objectives and other stakeholder roles, consider how each stakeholder may contribute to helping to achieve incorporation of updated MEC/SPR recommendations into national policy.

Name of organization	Name of Contact per- son/s (Title and level)	Level of influence	Type of influence	Priority of engage- ment	Role and Type of engage- ment
Ministry of Health	Family Plan- ning Office	Hígh	-Develops national family planning plans -Develops policy	Important (Inform, consult, col- laborate,	-Leading the process -Continuous engagement -Feedback Loop
Ministry of Finance	Budget dísbursement level	Hígh	- Determines level and timing of funding	Important (Inform, collaborate)	Through the Ministry of Health
Ministry of Education	Director	Hígh	-Provides train- ing	Important (Inform, collaborate)	- Through the Ministry of Health
Family Planning Providers	Physician, Nurse, Communi- ty Health Worker, Midwives	Hígh	-Adoption of the guidance -Direct service and implementation influence -policy influence	Important (Inform, collaborate, involve)	- Contínuous engagement
Non- governmen- tal organiza- tions	Program Officer	Hígh	-Budget influence -Level of supply of commodities 	Important • (Inform, collaborate, involve)	- Contínuous engagement
Professional Societies	President or Executive member	Moderate to High	-Dissemination -Direct service and implementation influence	Hígh (Inform, consult, involve)	- Early en- gagement - Presentation at Society meetings
WHO and WHO Coun- try Offices	WHO COUN- try office focal point	Moderate	-A resource for tools, templates (MEC and SPR), and guidance duri	Important (Inform, consult, collaborate, involve)	-Continuous engagement - Part of the implementa- tion team
Individual Advocate	Fírst Lady, Mayors' offic- es,	Moderate	-catalytic	Somewhat important (Advocate)	- Launch meet- ing

2. ANALYSE STAKEHOLDERS



To analyse stakeholder perspectives, interests, roles and engagement in implementation, consider:

- What is their organization's mission and primary contribution towards reproductive health and family planning?
- What is the desired outcome of their efforts?
- · What motivates their work?
- · What is their capacity to engage implementation?
- Are they supportive or critical of the family planning guidance or the proposed implementation process?

When possible, speak to the stakeholders, to glean their interest and potential role(s) in WHO MEC/SPR planning guidance.

4. PRIORITIZE LEVEL OF ENGAGEMENT



Prioritizing stakeholder engagement should be directly informed by your analysis of stakeholders. Those with a high level of influence may be prioritized to engage with at the outset of the implementation process. All stakeholders contribute to implementing the family planning guidance; however, it is important to consider the level and phase at which they should be engaged.

Template C: Stakeholder engagement plan and timeline				
Stakeholder group (who)				
Reason for engagement (why)				
Timeline for engagement (when)				

Engagement methods (how)
Potential risks (and contingencies)
Engagement channels/forums
Key messages

Feedback channels	
Delivery resources	
Budget needed?	

Levels of Engagement:

Co-Creation

Stakeholders affected by the work and often not included in the decision-making regarding strategies for improving outcomes take the lead in making decisions and taking action

Collaborate

Stakeholders are partners in identifying and developing assumptions for change and component strategies of the program/practice through two-way engagement with program leadership and an emphasis on co-learning. Stakeholders share in decision-making.

Involve

Stakeholders are part of the process in identifying assumptions for change and component strategies of the program practice needed. Stakeholders identify various alternatives for strategies through two-way engagement with program leadership and decision-makers, but do not contribute to decision-making

Consult

Stakeholders are asked to provide feedback on the assumptions for change and component strategies, for improving outcomes. Stakeholders have a limited role, whereby they are asked questions and provide a response.

Inform

Stakeholders are informed of the work, including core assumptions for change and component strategies, for improving outcomes. Stakeholders are engaged using pull communication (information is made available and onus is on stakeholder to find it) or push communication (information is actively broadcasted to stakeholders).

International Association for Public Participation (2018). Spectrum of Public Participation. Retrieved from https://www.iap2.org/page/pillars

EFFORT

Resources

For communications advice and guidance, please see https://www.hse.ie/eng/about/who/communications/ requestingcommunications-support/advice-guidance.html, where you can find guidance on a range of topics including videos, event management, posters, QR codes, webinars etc.

Framework for Meaningful Stakeholder Engagement, SocietyInside/ECNL, 2023, Hilary Sutcliffe, 2023.

HSE Corporate Plan 2021-2024: https://www.hse.ie/eng/services/publications/corporate/hse-corporate-plan-2021-24.pdf

HSE Better Together Patient Engagement Roadmap

HSE Change Guide: https://www.hse.ie/eng/staff/resources/changeguide/resources/

HSE Research & Development Stakeholder Engagement Guide (2021): https://hseresearch.ie/wp-content/uploads/2021/09/Guide-no-4-Stakeholder-engagement-.pdf

Health Information and Quality Authority (HIQA)

Engaging with Stakeholders – https://publications.iarc.fr/Book-And-Report-Series/larc-Working-Group-Reports/Best-Practices-In-Cervical-Screening-Programmes-Audit-Of-Cancers-Legal-And-Ethical-Frameworks-Communication-And-Workforce-Competencies-2023

Department of Health and Human Services, State of Victoria, Department of Health and Human Services, Stakeholder Engagement Toolkit, February 2018.

Make it Matter: Creating communications strategies in the non-profit sector, by Joe Barrell, Charity Comms Publishing, 2014.

Institute for Healthcare Improvement, https://www.ihi.org/

PPI Ignite Network@ UCC webinar

https://nirn.fpg.unc.edu/sites/nirn.fpg.unc.edu/files/resources/Stakeholder%20Engagement%20Process%20Handout.pdf

https://www.edelman.com/trust/trust-barometer

World Health Organization (WHO) Stakeholder Mapping Tool: https://cdn.who.int/media/docs/default-source/reproductive-health/contraception-family-planning/stakeholder-mapping-tool.pdf?sfvrsn=981f5162_3

Partnership Principles: Building a New Relationship between Voluntary Organisations and the State in the Health and Social Care Sectors: https://www.gov.ie/pdf/?file=https://assets.gov.ie/251951/d4e6fafb-7127-48c3-b7a4-40192b4b4dec.pdf#page=null