



# Relationship to Partnership Framework 2022-2026


Updated: May 2022


**OUR  
WEST  
SYDNEY**



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WentWest acknowledges the Darug people as the First Nations peoples and the traditional custodians of the land on which we work. We pay our respects to Elders, past and present and extend that respect to all Aboriginal and Torres Strait Islander people within Western Sydney.

**Artwork by Mia Jackson 2017**

Mia Jackson is a Wiradjuri woman from Peak Hill, Dubbo, who lives with her family in Western Sydney.

Mia's artwork is inspired by mums and bubs and healthy families.

“ **NOTHING  
ABOUT US,  
WITHOUT US** ”

- James Charlton, Disability rights activist

No policy should be decided without the full and direct participation of members of the group affected by that policy.

## **Contributors and acknowledgements**

*This strategy would not be fit-for-purpose had it not been for the ongoing intelligent and insightful guidance provided by WentWest community and consumer partners. We acknowledge the excellent model delivered by Health Consumers NSW in partnership with WentWest in 2015-16 and honour its intent in this Framework. We acknowledge with gratitude the talented, purposeful and committed WentWest people who provided significant input to this strategy. This includes WentWest staff and members of the Consumer Advisory Council and Clinical Council who were consistently generous with their time and thinking. We also express our gratitude to the WentWest people who historically paved the way for the development of this relationship strategy and the many other WentWest pioneers on whose shoulders we stand.*

# WORKING IN PARTNERSHIP

Western Sydney is one of the most diverse communities in Australia. It has vibrant communities with proud and resilient histories. As the Primary Health Network, we lead integrated care for equitable access to the services needed by our Western Sydney communities.

This Framework guides us as we nurture sustainable and meaningful partnerships with the people and communities of our region. Our values drive our practice to ensure that people who find services harder-to-reach are respectfully included in closing the gaps in healthcare.

A dedicated *Relationships to Partnerships* team became part of our WentWest family in 2021. This team supports WentWest to build our relationships with Western Sydney communities and partner organisations. This is how we collectively influence primary health care transformation.

There are many partners to thank, not least our Clinical and Consumer Advisory Councils in their valuable leadership and insight which support our partnerships across our patch.

We have built this Framework around four pillars:

- Building partnerships that level the playing field so that all people access services they need
- Building partnerships that support seamless connections within health and social care in Western Sydney.
- Having evidence-based tools and resources to support meaningful partnerships across Western Sydney
- Rigorous evaluation of all our partnership activities so that our practices are evidence-based.

We look forward to working with all our partners to build equity and close the gaps in Western Sydney.

Ray Messom

CEO  
WentWest Limited

As Chair of the WentWest Consumer Advisory Council, I can attest to WentWest's commitment to consumers and the community of Western Sydney. My consumer colleagues and I have been very involved in developing this Framework which I am happy to endorse.

Western Sydney holds history and stories from a diverse community of health consumers that WentWest actively listens to, learns from and responds to. Western Sydney diversity is reflected within the Consumer Advisory Council, which makes our contribution vital to the work of WentWest.

By aligning the *Relationships to Partnership* Framework with the Quadruple Aim, WentWest Strategic Priorities, identified Community health needs and WentWest Commissioning principles, WentWest is leading a commitment to dovetail the suite of frameworks in meeting Consumer and Community needs.

I welcome the values-based approach found in this Framework, as it respectfully reaches out and builds relationship with consumers who find services hard-to-reach in Western Sydney. It strengthens our understanding of the health inequities which continue to provide challenges for the people in Western Sydney.

The focus on infrastructure building is also timely. WentWest is a relatively new organisation with a track record of active support for the people of the West. Now is the time to consolidate the systems that sustain our partnerships.

I, along with my consumer colleagues from the Consumer Advisory Council, look forward to continued partnership as this Framework takes effect. Ultimately our Western Sydney consumers and communities are the beneficiaries of all the heart-felt and values-based work of the WentWest family.

Ian Hoffman

Chair  
WentWest  
Consumer Advisory Council

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**CALD**

Culturally and Linguistically Diverse.

**Co-design**

Designing WITH service users not FOR them.

People who are affected by an issue sharing their experiences and working out how to solve challenges together with service providers.

**Commissioned services**

commissioning refers to a continuous cycle of developing and implementing health services based on a rigorous process of planning, procurement, monitoring and evaluation

**Community**

Groups of people or organisations with a common local or regional interest. Communities may connect on many levels including but not limited to place, culture or interest.

**Consumer**

People who use, have used or are potential users of health services.

**Consumer representative**

Usually a volunteer who partners with health service staff to plan design, monitor and evaluate health services.

**Equity**

Equity is achieved when action is taken to ensure that all people no matter their disadvantage have an equal opportunity to access health and social care

**GP**

General practitioner - a medical doctor who practices in the community, usually self-employed.

**IAP2**

International Association for Public Participation.

**LHD**

Local Health District. The Western Sydney Local Health District is our partner (WSLHD).

**PCMH**

Patient Centred Medical Home - a model for GP which is patient-centred; accessible; comprehensive; coordinated; continuous; committed to quality and safety.

**Primary Care**

Primary health care is the entry level to the health system and is usually a person's first encounter with the health system. It includes a broad range of activities and services that are delivered outside the hospital setting.

**Primary Health Network**

A "Primary Health Network" is a local organisation whose job is to understand the health care needs of people in that local area, and, on behalf of the Commonwealth, pay for services the local community needs to be healthy and well.

**Quadruple Aim**

Widely accepted as a framework to optimise health system performance. The goal is to enhance patient experience, improve population health, reduce costs, and improve the work life of health care providers, including clinicians and staff.

**WentWest**

Another name for the Western Sydney Primary Health Network.

# GLOSSARY



**This Framework's purpose and scope**

# From relationships to partnerships for the health and wellbeing of Western Sydney people

**The WentWest Relationship to Partnership Framework ("The Framework") shows us how.**

It details the priorities, actions, principles and processes we use to support a values-based and standardised approach to partnering with Western Sydney communities and our broader relationship groups.

It shows how we will achieve our objectives and responsibilities with our partners.

Our eyes are open to the partnership opportunities that are all around us when we think collectively and avoid transactional (one-off) ways of thinking. We promote new ways of thinking ("transformation") about primary care in Western Sydney.

This Framework applies to all WentWest relationship and partnership activities. The scope of these activities extends from the commissioning and enabling of services and programs to supporting integration and capacity building across the Primary Health Network - *transformation*. It reaches across working with all levels of government to progress local, state and national priorities, to developing WentWest's community and consumer partnership program.

It is not meant to guide clinical interactions between patients and providers - individual codes of conduct will inform these. However, it is recognised that many of the principles and ideas in this Framework will be relevant in the clinical encounter.

The Framework has been developed with reference to best-practice for relationship and partnership development. The breadth of the Framework enables WentWest to respond *mindfully, sensitively, consistently and systematically* to a wide range of situational, cultural, national and international drivers.

# RELATIONSHIP TO PARTNERSHIP FRAMEWORK

The Framework reflects our commitment to our community.  
We are accountable for progressing WentWest's purpose within this Framework.



## Vision

Healthier communities, empowered individuals, sustainable primary healthcare, workforce and system.

## Our principles



Sustainable

Ways of relating



Levels of relationship



Balanced and inclusive



Collaborative



Our purpose

Working in partnership to lead better system integration and coordination, strengthening equity and autonomy for Western Sydney communities and the people who care for them.



Evidence-based

Tools and systems



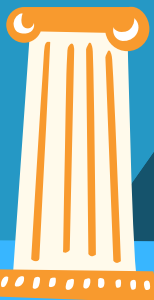
Relationship groups



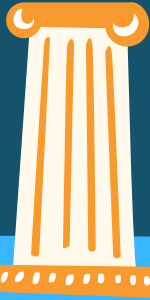
Respectful



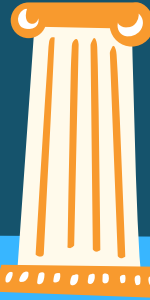
Open and transparent



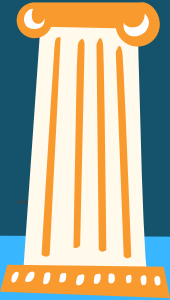
Addressing gaps and equity



Supporting Integrated care

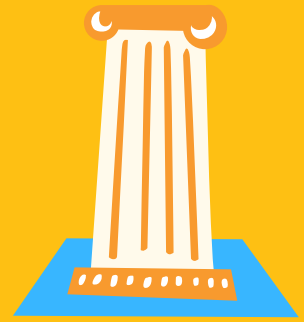


Tools and infrastructure



Research and data

# P I L L A R S



## PILLARS



**Addressing gaps and equity** - Building partnerships that level the playing field so that all people access the services they need

1



**Supporting integrated care** - Building partnerships that support seamless connections within health and social care in Western Sydney

2



**Tools and infrastructure** - Having evidence-based tools and resources to support meaningful partnerships across Western Sydney

3



**Research and data** - Rigorous evaluation of all our partnership activities so that our practices are evidence-based

4

# ADDRESSING GAPS AND EQUITY

Building partnerships that level the playing field so that all people access the services they need.

**11.2%**

of private dwellings had no internet access in 2016.

4.1% of children aged 15 or younger live-in dwellings without internet access [1]



**57%**

of LGBTIQ+ people report high levels of psychological distress [2]

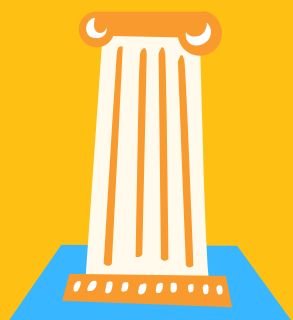


More than 22% of children in Western Sydney are developmentally vulnerable on one or more domains above the national average [3]



Western Sydney is a culturally diverse and vibrant landscape. We are home to one of NSW's largest Aboriginal populations (1.7% of our community identifies as Aboriginal, compared to 1.5% in Greater Sydney). Almost half of our community were born overseas and 39.4% of the population does not speak English. By 2030 Western Sydney will expand by 38% to reach 1,313,288 people.

- [1] Public Health Information Development Unit, Torrens University.
- [2] Hill, A. O., et al. (2020). Private Lives 3: The health and wellbeing of LGBTIQ people in Australia ARCSHS Monograph Series No 122. Melbourne, Australian Research Centre in Sex, Health and Society.
- [3] Australian Early Development Census, Data Explorer 2021. <https://www.aedc.gov.au/data/data-explorer>



**PILLAR 1**

**"Inequity is inequality that doesn't have to be"**

- Dr Michael Fasher



## PILLAR 1

### What are the social determinants of health?

There is a close relationship between people's health and the living and working conditions which form their social environment [4]. Social inequalities and disadvantage are the main reason for avoidable and unfair differences in health outcomes and life expectancy across groups in society, according to the World Health Organisation.

*This pillar recognises that in order to address health inequity we need to promote social care through our partnerships.*

### Western Sydney's profile

Western Sydney residents experience a higher range of health risk factors in comparison to NSW. Our residents also report barriers to accessing healthcare services at a rate that exceeds almost all other Sydney Primary Health Networks. Many people from diverse backgrounds have complex life experiences.

### Communities who find services hard-to-reach

There are some communities who experience entrenched disadvantage, sometimes inter-generational. Our goal to level the playing field means that we reduce the barriers to building relationship and partnership with specific groups including - but not limited to:

- Aboriginal and Torres Strait Islander people
- Culturally and linguistically diverse communities (including refugees and new migrants)
- Veterans
- People experiencing homelessness
- LGBTIQ+ individuals.

We seek out new ways to reach people. We offer multiple opportunities for all our partners to explore and co-design solutions to make Western Sydney a healthier community.

[4] Wilkinson R & Marmot M eds. 2003. The social determinants of health: the solid facts, 2nd edn. Copenhagen: World Health Organization Europe.

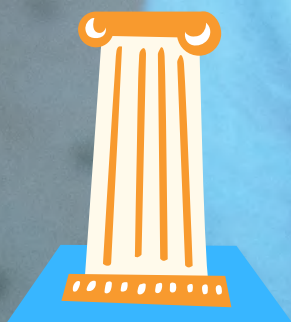
## What will we do?

- Strengthen partnerships with Western Sydney First Nations communities.
- Strengthen partnerships with Western Sydney migrant and refugee communities.
- Identify, understand and confirm the gaps in health outcomes with Western Sydney communities.
- Develop co-designed plans to address the equity gaps with Western Sydney communities.
- Co-create solutions to address the gaps with communities finding services harder to reach.
- Communicate with health literacy, cultural sensitivity and the relationship in focus.



# SUPPORTING INTEGRATED CARE

**Building partnerships that  
support seamless  
connections within health  
and social care in Western  
Sydney**



**PILLAR 2**



## PILLAR 2

### WentWest Consumer Advisory Council and the WentWest Clinical Council

While the Consumer Advisory Council guides consumer and community partnership building, the Clinical Council is instrumental in providing clinical insights and advice.

Membership of both Councils is aligned with the priorities of the [WentWest Needs Assessment](#), [WentWest's Strategic Plan](#) and the [Commissioning Framework](#), and the diverse population demographics of Western Sydney.

In 2022 WentWest will provide training and support for Council members to lead and mentor a broad network of consumers and community members with the knowledge and insights to actively guide the transformation.

In 2022 we have a focus on building our network of consumers and people with lived experiences of interacting with our health and social systems in Western Sydney. We are committed to providing the educational and networking support with this group to build a deep understanding of the service landscape in our district, and to promote health literacy.

## What will we do?

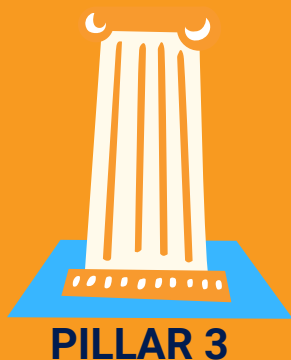
- We are clear and concise about who we are. As a result, communities understand a range of potential outcomes when partnering with us.
- We support our Consumer Advisory and Clinical Council members to be leaders and mentors for a broader network of consumers and community leaders.
- We build a health literate network of consumers who represent the diversity in Western Sydney.
- With our consumer network, we co-design approaches to increase seamlessness in the service landscape in Western Sydney.

## Why do we need integrated care?

*Shalini from Western Sydney had been seeing her GP for a condition which worsened and she needed to go to hospital. She was dismayed that all the information in her GP record was not known by the hospital. Her medicines list was not accurate and she worried that a lack of information was leading to errors that could have been prevented. After she left hospital she needed a number of services. Her GP was really helpful but a lot of the time she had to find these services herself. Shalini felt exhausted and realised that the health services in her local area were not very connected or available. Shalini's story is not uncommon. "Integrated care" aims to prevent stories like Shalini's by connecting up health & social care services.*

# TOOLS AND INFRASTRUCTURE

Having evidence-based tools and resources to support meaningful partnerships across Western Sydney



**PILLAR 3**



## PILLAR 3



Dr Philip Lee, Consumer Advisory Council member



Fabian Galbraith, Consumer Advisory Council member

### What will we do?

- Using fit-for-purpose tools, our workforce continues to systematically build productive relationships into partnerships.
- We build a rich repository for staff to access evidence-based tools and resources for their partnership-building activity.
- We capture and promote stories illustrating how partnership experiences lead to positive strategic change.
- Our community-facing website is functional and meaningful as a library and a discussion forum.
- We use a comprehensive relationship tracking tool to systematically capture, track and report on our partnership activities.
- We understand the best tool for the job and systematically use it.

# RESEARCH AND DATA

Rigorous evaluation  
of all our partnership  
activities so that our  
practices are  
evidence-based



**PILLAR 4**



## PILLAR 4

WentWest has a history of active involvement in research. In 2021 a University of Sydney researcher joined WentWest in a conjoint appointment. An expert primary health researcher, her appointment has elevated WentWest's capacity to undertake a range of research projects aligned with the Strategic Plan. The 2022 appointment of our Chief Data Officer will elevate the expansion of internal data and insights capabilities and support research thinking across WentWest.

Research priorities are informed by ongoing health needs assessments in Western Sydney. To identify the priority health needs we learn through our partnerships with health service providers, community leaders and consumers.

In 2021 we also initiated the "Western Sydney Health and Social Care Research Collective". This was the result of three co-design workshops with over fifty researchers and consumers. This is a work in progress, hosted by WentWest on the community-facing web platform, [OurWestSydney.com.au](http://OurWestSydney.com.au).

## What will we do?

- We undertake all our partnership activities with rigorous research methodology to capture, analyse and share our experiences.
- Data informs the direction and planning of our relationships and partnerships.
- We promote collaboration between consumers, communities and researchers to drive a research agenda that matters to Western Sydney people.



WentWest is leading research into the partnership experiences of consumer representatives and health staff in a primary care setting. This is bridging a gap in knowledge about consumer /staff partnerships, and building on recent research in the hospital sector in Western Sydney [5]



## TRANSACTION – RELATIONSHIP – PARTNERSHIP

### What's the difference?

A **transaction** is a one-off event or series of interactions. There's no commitment to each other's long-term success.

A **relationship** is an ongoing connection that may or may not outlive the current situation. Although both parties may have expectations about a common goal, this is not shared and a commitment is not made to achieving the goal together.

A **partnership** is a commitment to an ongoing relationship with a shared goal. A partnership needs time and investment in the human context both parties inhabit.



*"When a relationship evolves into a deeper understanding between WentWest and another person or organisation, partnership is possible. The partnership matures as we become aware of, and where possible, accommodate, each other's objectives along the way. These objectives may or may not be related to the shared goal".*

- Coralie

[5] Wales, Lababedi, Coles, Lee, Clarke. (2021). "Consumer representative experiences of partnership with health workers in Australia." *Patient Experience Journal* 8(3): 64-78.

# VALUES AND PRACTICE. HOW DO THEY RELATE?

## What are values?

Values are behind everything we do. What we do and the way we communicate is driven by our values. This is why it is crucial that we know what they are.

**WentWest's values are: EXCELLENCE - LEADERSHIP - RESPECT - EQUITY - CREATIVITY**

These values are visible throughout our organisation. WentWest demonstrates **leadership** in Western Sydney through its **respectful** work supporting transformation in primary care to bring about **equity with the people of Western Sydney**. WentWest people are carefully selected for their **excellence** - in expertise and practice. WentWest people are **creatively** looking for opportunities to level the playing field.

For the purpose of the Relationship to Partnership Framework, **equity and respect** are particularly crucial.

### **EQUITY is about a level playing field.**

*Jack is tall and can reach a higher shelf than Jill, who is short. They are unequal in height, this is "inequality". However we can do something about it. If they use a step ladder Jill can reach the shelf - we have "equity". Equity requires thought and action so that people can operate on the same level - the "level playing field".*

Dr Michael Fasher, Western Sydney GP says *"Inequity is inequality that doesn't have to be"*. Michael says for inequality to be inequitable two conditions are required: The inequality **can** be remedied, but the inequality **has not** been remedied. The message is that if we believe in equity, we must take action where we find inequality, and this is what WentWest does. We are thoughtful about what we need to do to make sure that all people have access to healthcare.

***Levelling the playing field so that people can equitably and easily access services is about Pillars 1&2. Pillars 3&4 enable a systematic approach to achieving the first two.***

That's not where we stop, however. While **equity** is a main player, we are also very interested in **dignity** and our communications are rooted in clarity and health literacy. We remain **creative** and look for opportunities for equity. In many ways **it's about respect**.

**The way we communicate and act with each other are strong indicators of respect.** Equitable communication is rooted in clarity, plain language and thoughtfulness. We are aware of and challenge our assumptions and promote health literacy.

### **TIPS: writing for health literacy**

- ✓ Most important idea first
- ✓ Short sentences
- ✓ One idea per sentence
- ✓ No more than three syllables per word
- ✓ Avoid saying the same thing in several different ways (be concise)

### **RESPECT is a practice with many parts**

*"When I feel respected I feel someone is listening, believing me, not judging me. They value my time and guard my dignity. When all this happens, I am able to function as well as I can".*

## Who holds the "power"?

Some of the traditional ways of operating within organisations are not working well for us today. When decisions, direction and power is held by only one or a few, the others have little say in what happens. They are powerless.

In WentWest's reform agenda, we recognise that traditionally, power is not equally shared. Power has been held by well-intentioned old-school hierarchies who have historically made decisions "for" others.

WentWest's goal is to facilitate the transfer of power back in to the community, consumers and those providing care who are able to make changes and reform the services, sector and system. Some call this "empowerment" and yet, it's really "transfer-powerment". Another way to think about this is that we **support the autonomy** of communities who know best about their experiences of that community in line with "nothing about us without us".

New ways of thinking work towards sharing power, actively reaching out and pulling in others to understand the current situation together. This means we make decisions together. The diagram below describes concisely the difference between traditional power vs new power thinking. It is adapted from "New Power" by Jeremy Hiemens [6].

Hiemens says:

“

*Old power works like a currency. It is held by a few. Once gained, it is jealously guarded, and the powerful have a substantial store of it to spend. It is closed, inaccessible and leader-driven. New power operates like a current. It is made by many. It is open, participatory and peer-driven. Like water or electricity, it's more forceful when it surges. The goal with new power is not to hoard it but to channel it.*

”

### OLD POWER

- Currency
- Held by few
- Top down
- Leader driven
- Closed
- Transactional

### NEW POWER

- Current
- Made by many
- Bottom up
- Peer driven
- Open and transparent
- Relational

[6] Heimans, J. and H. Timms (2018). New power, Macmillan Publishers Aus.

# WHO IS WENTWEST?

## THE WESTERN SYDNEY PRIMARY HEALTH NETWORK



Since 2002, WentWest has been part of the Western Sydney community, offering support and education to primary healthcare providers. We have built key partnerships to progress the region's health system, including transforming systems of care to make them more accessible and person-centred.

In 2015, the Commonwealth Government established 31 **Primary Health Networks** (PHNs) across Australia.

We are WentWest, the Western Sydney Primary Health Network. We operate in the Local Government Areas of Blacktown, Paramatta, Cumberland, and the Hills Shire.

Primary Health Networks are independent organisations working to streamline health services – particularly for those at risk of poor health outcomes – and to better coordinate care so people receive the right care, in the right place, at the right time.

With community partners WentWest identifies Western Sydney's health needs. Then we commission health service providers to address needs to improve health outcomes. In this way we are a health service "commissioner". We are responsible for planning and funding primary health care services in Western Sydney.

### What is a Primary Health Network?

A "Primary Health Network" is a local organisation whose job is to understand the health care needs of people in that local area, and, on behalf of the Commonwealth, pay for services the local community needs to be healthy and well.



Ms Rita McKenzie Aboriginal Cultural Liaison Coordinator, WentWest



Mr Abbas Razi Alvi - Community leader Western Sydney

**350**

General Practices  
in Western Sydney



Area of  
**766**  
Square  
kilometres

Population:  
**1,154,083**  
Projected to reach:  
**1,600,015**  
by 2036

**1.7%**

of the population  
identifies as Aboriginal  
and/or Torres Strait  
Islander



### Non-English-speaking Top 5 place of birth:

	India 7.5%
	China 5.1%
	Philippines 3.5%
	South Korea 1.7%
	Sri Lanka 1.6%

**39.4%**

of the  
population is  
non-English  
speaking



# OUR RELATIONSHIP LANDSCAPE

Important relationship groups



The following diagram of our important relationships is not exhaustive but provides an overview of WentWest's diverse relationship landscape.

At different points in time, the way we build relationships with each group will vary and the nature of the relationship may vary too. Some individuals may naturally exist in more than one of the groups listed below. These categories are descriptive only.



# STRATEGIC ALIGNMENTS

## Partnerships support commissioning

- Clear process and governance systems
- Intelligence gathering and analysis
- Collaboration for continuous improvement
- Cultural competency through listening and learning
- Data informed and person-centred design



Read our Commissioning Framework



## Quality partnerships crucial for WentWest plan

- Transformation of general practice to Patient Centred Medical Homes (PCMHs) and health care neighbourhoods
- Co-designed models of care based on understanding the needs of our communities

Read our Strategic Plan



Read our 2022 Needs Assessment



## Partnerships support the Quadruple Aim

- Patient Experience of Care
- Quality and Population Health
- Sustainable Cost
- Improved Provider Satisfaction



Read about the Quadruple Aim



## National Agreement on Closing the Gap July 2020 (section 17C)

- We are accountable for Closing the Gap
- We are culturally safe and responsive to the needs of Aboriginal and Torres Strait Islander people
- this includes through the services we fund

Read the National Agreement



## The First 2000 Days Framework

- The importance of the first 2000 days - take action to get better outcomes
- Universal, evidence-based, seamless care
- Additional care pathways for and when needed

Read about the first 2000 days



## Culturally Responsive Clinical Practice: Working with People from Migrant and Refugee Backgrounds



RACGP: Healthcare for refugees and asylum seekers

## Western Sydney Local Health District Community and Consumer Partnership Framework 2021-2025



## The National Children's Mental Health and Wellbeing Strategy



# FROM RELATIONSHIP TO PARTNERSHIP

Values underpin all our practices. The WentWest values of excellence, leadership, respect, equity and creativity give rise to a number of principles which we bring to our conscious ways of practice.

These six principles guide our approach to building relationships which will continue to evolve over time to become partnerships. They have been clarified with our partners so that our practices are aligned with what matters to them. We are accountable and use these principles to build partnership.

## Balanced and inclusive



- We practice the philosophy: "Nothing about us, without us"
- We consider all views and aim for consensus
- We co-create opportunities to participate: reducing barriers, creating connections, being meaningful and supportive, and reaching out to traditionally less-heard voices
- We remain individually sensitive to the needs and objectives of our partners

## Evidence-based



- We understand the context for relationship groups to ensure we understand their perspective
- We learn from, report and share our partnership experiences. We continuously grow our partnership approach based on our experiences
- We share information from reliable evidence-based sources

## Sustainable



- We communicate what is in and out of scope to avoid wasting our partners' time
- We close the loop by continuously feeding back how partners' input has been used
- Our relationships are meaningful. We are not tokenistic

## Respectful



- We communicate thoughtfully and listen actively
- We commit resources to do what we say we are going to do
- We are non-judgemental, sensitive, warm, trustworthy, and an active partner
- We ensure we provide a safe space for our partners

## Transparent



- We provide information that is accurate and timely
- We ensure our partners have sufficient time to prepare and participate
- We accurately share key information whether positive or not

## Collaborative



- We promote partner successes
- We commit to building the capacity of our partners and incorporating their contributions into our decisions

Excellence

Leadership

Respect

Equity

Creativity

WentWest Values

# RELATIONSHIP SPECTRUM

Levels of relationship



Ways of relating



We acknowledge the seminal work of the International Association for Public Participation (IAP2) whose Core Values and Public Participation Spectrum have provided guidance to many in the field. From IAP2 we have adapted our Relationship Spectrum to suit the values and purpose of WentWest.

Effective relationship building will not be the same for every group or every situation. These levels set the common language and expectations that support the detailed planning of activities and relationships with our stakeholders.

**Importantly, as we continue along the spectrum, trust and the quality of the relationship grows. At the same time, we increase the level of control we share with our partners.**

**At WentWest we aspire to support autonomy in Western Sydney.**

SUPPORT  
AUTONOMY

PARTNER

INVOLVE

CONSULT

INFORM

**Provide balanced and evidence-based information to assist people to understand a problem, opportunity or solution.**

#### Methods

- Emails
- Newsletters
- Webinars
- Website
- Interactive online platforms
- Advisory and inter-agency meetings

**Obtain feedback on ideas, analysis, alternatives and decisions.**

#### Methods

- Interactive online platforms
- Surveys
- Conversations
- Governance groups
- Workshops
- Steering committee/s
- Subject matter experts

**Work with people so that we understand and consider their concerns and goals.**

#### Methods

- Governance groups
- CommunityHQ
- Surveys
- Conversations
- Workshops
- Steering committee/s
- Subject matter experts
- Working groups
- Commissioned providers

**Partner with people in each aspect of the decision including the development of alternatives and the preferred solution.**

#### Methods

- Co-Design Workshops
- Working groups
- Steering Committees
- Interactive online platforms
- Governance groups
- Focus groups / workshops
- Commissioned services

**We support our partners to be final decision makers in matters that affect them**

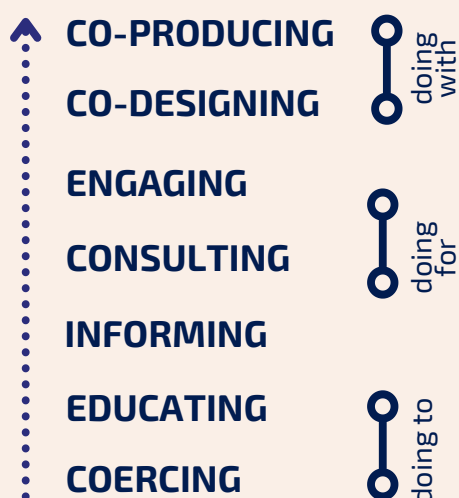
#### Methods

- Partnerships
- Working groups
- Commissioned Services
- Co-Design initiatives

TRUST and PARTNERSHIP grows over time

CONTROL is increasingly shared

## CO-DESIGN AND CO-PRODUCTION ARE HIGH ON THE SPECTRUM



This spectrum of participation is another way to view partnership within our landscape of important relationships. We can see that the higher the activity on this ladder, the more partnership is achieved. At the highest level, professional training and lived experience are valued equally [7].

A good question:

**"Is my initiative doing to, doing for, or doing with?"**

WentWest aspires to "doing with" as it's aligned with our partnership values.

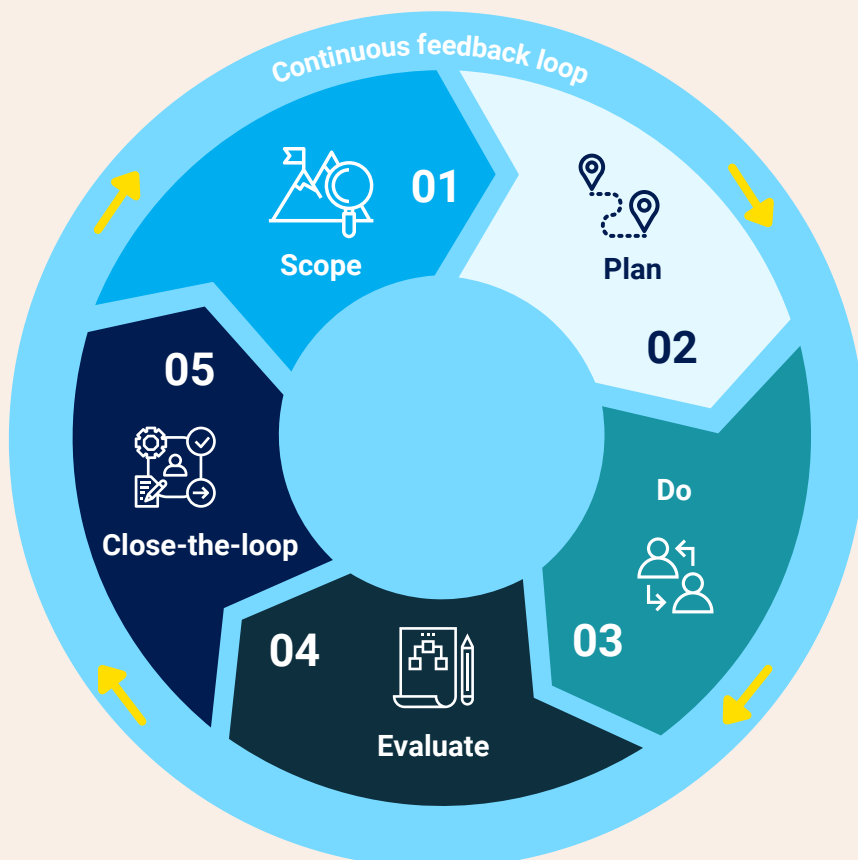
[7] Adapted from <http://sigeneration.ca/co-production>



## PRACTICAL STEPS

We follow a five-step process of scoping, planning, doing, evaluating, and closing the loop for every partnership activity. The first step is to start a conversation with the Relationships and Partnerships team who can support you.

The process is a dynamic and ongoing cycle where there is space for continuous feedback and improvement. Over time, this approach will build a credible evidence-base of outcomes which will inform increasingly meaningful and productive approaches.



### Scope 01

Share with the Relationships and Partnerships team your ideas. Consider resources, previous experiences and how deep and broad the activity should be.

### Plan 02

Define your goals and who should be involved. Consider risks and how you will manage them. Develop a timeline and run sheet. Consider how you will measure progress against your objectives.

### Do 03

Conduct your partnership event in a way that aligns with WentWest's Relationship Principles. During this stage, remain ready to respond to unexpected challenges.

### Evaluate 04

Set up your evaluation plans early with the systems and processes necessary to ensure the intended results are being achieved.

### Close-the-loop 05

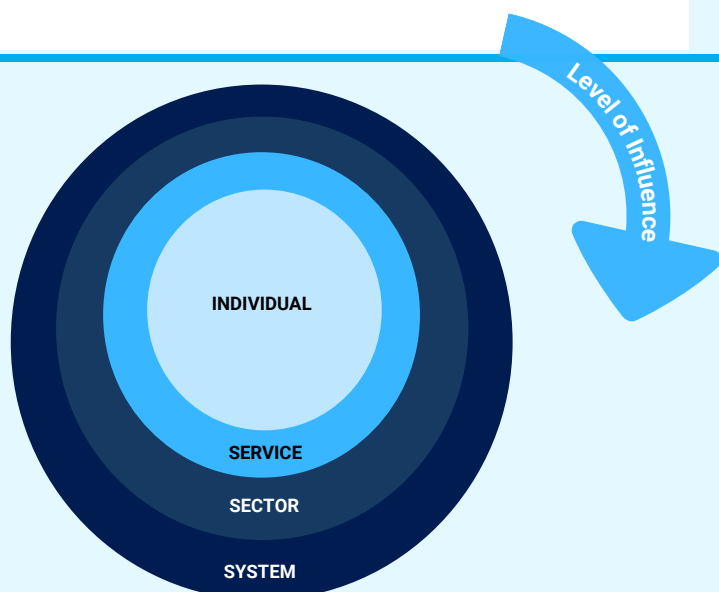
Identify opportunities from the experience. Determine actions, revisit goals, and plan next steps for follow-up and future opportunities. **Non-negotiable:** communicate back to participants how you have used their input

# PARTNERSHIP INFLUENCE

WentWest builds relationships into partnerships as part of everyday practice. This constant flow of partnership building has a cumulative effect on the influence we, together with our partners, exert on the broader landscape.

Consistently applying the Framework will enable WentWest and our stakeholders to maximise our impact on primary health outcomes, creating greater influence at the individual, sector, service, and system levels.

**In practice, this means that every relationship matters.**



## INDIVIDUAL

The way we relate with individual consumers, family, carers and health professionals to function as partners in the co-design of service models

## SERVICE

The way we partner with organisations and service providers to co-design, deliver, monitor and evaluate discrete service models or projects.

## SECTOR

The way we partner with local or subject specific groups to understand or influence change in a region, place or common area of interest.

## SYSTEM

The way we partner with thought-leaders and influencers to be a lever for community identified change. We seek to influence policy, strategy, legislation, large-scale reform initiatives, with inter-jurisdictional co-operation and strategic partnerships.

\*This definition of partnership influence was adapted from WA Primary Health Alliance's Stakeholder Engagement Framework, July 2021

## WHAT IS "KAIROS"? The time is right for WentWest ...

*"By this the Greeks meant the right or opportune moment for doing, a moment that cannot be scheduled, as it is poised unpredictably between beginnings and ends. It does not submit to chronos, which is mere arithmetic: a minute, an hour, a day, a decade, the work of timekeepers. Kairos exists as a potential, a mode of improvisation, of responding to a sudden opening in the fabric of time. No theory can enable or plan for it. Abandon the fixed plan, wait for the moment to arrive, and then act. At nineteen I had been struck by this, had decided that this was how I would live my life. It seemed then to be purely a matter of resolve; instead, it requires an inhuman patience. And faith... And when the opening appears it must be passed through without hesitation..."*

*"The Greeks compared it to the moment in weaving when the shuttle can be passed through threads on the loom, the instant when a gap opens in the warp of the cloth and the weaver must draw the yarn through to make the pattern..."*

From Labyrinth by Amanda Lohry

# The team 2022

"We are values-based practitioners.  
Our values drive how we serve  
Western Sydney communities"

## Lauren Fawcett

### Relationships to Partnerships Practitioner

Lauren works with communities to identify and focus on what matters to them. *"I really like the idea of collectively changing the status quo for the better. Luckily, as a WentWester we can influence the health and wellbeing of communities. We are always mindful of the social determinants of health, and we support communities in creative and purposeful ways. I love it".*

On any one day Lauren might be having conversations with community members, writing a report, or developing a TikTok campaign. She is mid-way through a Master's degree in Social Change and Development at the University of Newcastle.



## Alicia King

### Events Practitioner



As a logistics specialist, Alicia organises events for WentWest. A significant part of her work is focused on organising educational events for General Practice staff. Alicia works with internal teams to plan and deliver events

based on the comprehensive needs assessment which identifies gaps in services across Western Sydney. Alicia says: *"I like the idea that I can organise a consistent process, from start to finish and see that an event has worked well and gets a good outcome. I get a kick out of seeing that process work nice and smoothly - it's meaningful for me. I want it to be as easy as possible to attend and for participants to get what they need from it"*

## Dr Coralie Wales Relationships to Partnerships Practice and Strategy



Before coming to WentWest in 2021, Coralie had facilitated a partnership between Western Sydney communities and the Western Sydney Local Health District. Coralie enjoys being in the Primary Health Network, connecting up communities with some of the innovative programs commissioned by WentWest. Her interests hover around the shift from old ways of thinking about health and social care to new, collective ways of thinking and taking action. She facilitates Cltizen Juries and uses co-design as one of her main tools in the kit. Her PhD uncovered the importance of relationship building in the therapeutic encounter between provider and receiver of health services.



## OUR WEST SYDNEY



 [OurWestSydney.com.au](https://OurWestSydney.com.au)

 [@OurWestSydney](https://www.instagram.com/OurWestSydney)

 [@OurWestSydney](https://www.tiktok.com/@OurWestSydney)

In early November 2021 WentWest started an Instagram, TikTok, and Facebook campaign called "We're the West." The campaign is about celebrating the West and our community effort during the pandemic to keep each other safe. The campaign addresses COVID-19 vaccination hesitancy and mental health awareness through Q&A videos between young people and GPs.

### Dr Natalie Cochrane (left) and Dr Jaspreet Saini (right) on Our West Sydney





## WENTWEST STORIES



SCAN ME

CONNECT  
WITH US  
ONLINE AND  
STAY UP TO  
DATE



[wentwest.com.au](http://wentwest.com.au)



<https://www.linkedin.com/company/wentwest>



[facebook.com/WentWestLtd](https://facebook.com/WentWestLtd)

Example of our  
work in 2021



Western Sydney PHN, South Western Sydney PHN, Nepean Blue Mountains PHN, South Eastern NSW PHN, Northern Sydney PHN, and Central and Eastern Sydney PHN joined forces to create a video campaign in 12 languages encouraging community members to get vaccinated and reach out for mental health support. Scan the check in codes below or click to view the full video playlists.

Kun Huang, Councillor at Cumberland City Council



**Get the Job  
playlist**



SCAN ME

**Check in on your  
wellbeing.playlist**



SCAN ME

Stephanie Kim, Community member



Maryam Zahid, Director of Afghan Women on the Move





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