Engaging Stakeholders
FOR HEALTH SYSTEMS STRENGTHENING

Series of Guides for Enhanced Governance of the Health Sector and Health Institutions in Low- and Middle-Income Countries
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The guides and accompanying handbooks on governance represent the collective effort and input of many experts in public health leadership, management, and governance. The LMG Project would like to acknowledge the individuals who have made these materials possible.

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The LMG Project team thanks the hundreds of leaders, managers, and people who govern the health sector and health institutions in low- and middle-income countries, who spent substantial time participating in our surveys and interviews in 2012. The five effective governing practices were identified based on insights they shared during these inquiries. Special thanks are extended to the three Provincial Public Health Coordination Committees and eleven District Health Coordination Committees in Afghanistan who pilot tested the five governing practices, and found that the health system governance and antenatal care visit rate in their provinces had improved.

Finally, LMG would like to thank all of the individuals and organizations striving to improve health sector governance all over the world. We hope the governance guides and accompanying handbooks will serve as valuable resources for the continued support of good governance.
Introduction

Thank you for all that you do to improve the performance of your health system. Good governing practices not only enable you to achieve more significant results in your work but also more sustainable results. Governance in the context of health has come into sharper focus over the past decade. It is one of the essential factors in the pursuit of stronger health systems and greater health impact. There is an emerging body of evidence that shows that effective governance improves health outcomes. Conversely, poor governance overall, and especially in the health sector, contributes to poor health outcomes. It undermines the vitality of a health system, making it less effective, less efficient, less equitable, and less responsive to the people it is intended to serve.

Governance is a collective process of making decisions to ensure continuous vitality and performance of organizations or health systems. Governance is (1) setting strategic direction and objectives; (2) making policies, laws, rules, regulations, or decisions, and raising and deploying resources to accomplish the strategic goals and objectives; and (3) overseeing and ensuring that the strategic goals and objectives are accomplished. Governance for health is governance done with the objective of protecting and promoting the health of the people served by a public or private organization.

(Source: Management Sciences for Health, “How to Govern the Health Sector and Its Institutions Effectively,” The eManager, No. 1, 2013)

Studies, roundtable discussions, and fieldwork done by the Leadership, Management, and Governance (LMG) Project1 funded by the US Agency for International Development defined five governing practices as essential to the effective functioning of governing bodies:

Cultivating accountability

- Engaging stakeholders
- Setting a shared strategic direction
- Stewarding resources
- Assessing and enhancing governance

The LMG Project developed this series of guides and the accompanying training handbooks to help you operationalize each of the five governing practices in your organization. You will have an opportunity to use (1) guides that explain each of the five practices; (2) training handbooks that support and prepare you to apply the governing practices described in the guides, and (3) a series of reading materials, case studies, tools, and resources.

We hope you will find the materials and the training course based on them useful and, as a result of investing your time in the course, that you will be more comfortable, confident, and competent in your governing role. As governance leaders or members of governing bodies, using these guides you will be able to apply the five effective governing practices in your organization, and improve your governance performance and in turn, your organization’s performance. Training course based on these guides will make the learning of the five governing practices more effective and the course will enable you to develop and implement a governance enhancement plan for your organization. The course uses the five guides as required readings for the participants. We have also developed a separate training facilitator’s handbook to help the facilitators deliver the governance enhancement training in a structured way and with maximum effectiveness.

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1 The LMG Project is implemented by a consortium of six partner organizations: Management Sciences for Health, African Medical and Research Foundation, Medic Mobile, International Planned Parenthood Federation, Johns Hopkins University Bloomberg School of Public Health, and Yale University Global Health Leadership Institute. You may visit us at www.lmgforhealth.org.
Purpose and Audience for the Guides

The series consists of five guides on effective governance of the health sector and health institutions:

1. Guide for Cultivating Accountability
2. Guide for Engaging Stakeholders
3. Guide for Setting a Shared Strategic Direction
4. Guide for Stewarding Resources
5. Guide for Continuous Governance Enhancement

The primary users of these guides are the teams of leaders who govern and leaders who manage the health sector and health institutions in low- and middle-income countries. As senior health leaders, the guides are designed to help you implement the five essential governing practices in your organization. The contents of these guides are applicable to the public sector or government organizations and to not-for-profit or nongovernmental organizations (NGO) or civil society organizations. The guides are also applicable at all levels of the health system: national, provincial, district, or community level as well as at the institutional, organizational or health facility level. For example, the Minister or Permanent Secretary or Director of a department in the Ministry of Health and her/his senior leadership team will find the guides and the training course based on these guides useful. The Director or Head of a provincial health department or a district health office or a hospital or a health center and her/his colleagues in the governing body will likewise benefit. Using these materials, members of governing bodies that direct provincial health systems, district health systems, hospitals, and health centers in public and not-for-profit sectors will be able to adapt effective governing practices to their own settings, apply them, improve their governance and, in turn, the performance of their organizations.

To facilitate the structured delivery of the content of the five guides, training handbooks have been developed to accompany the guides and to be used by the training facilitators. The handbooks are designed as the training facilitator’s tool and the training facilitator’s resource for your capacity building as governance leaders (leaders who govern) or management leaders who support good governing practices. Separate training handbooks have been developed for the training of the governance leaders or governing bodies of (1) ministries of health, (2) provincial health departments or provincial health systems, (3) district health offices or district health systems, (4) hospitals, and (5) health centers.

The guides can be used as a self-study resource by the governance leaders or governing bodies to learn the five governing practices and apply them. These are available at www.lmgforhealth.org/expertise/governing.

You may start with taking some of the governance self-assessments that you will find in the appendices in the Guide for Continuous Governance Enhancement. This will help you assess your governing practices. You may then start with the guide for the governing practice where you feel you need to improve the most. Alternatively, you may start with the guide on cultivating accountability, and then move on to the guides on engaging stakeholders, setting shared strategic direction, stewarding resources, and continuous governance enhancement, in that order. The practices are inter-related, one builds on another. This sequence will allow you to benefit from this attribute of the practices. The learning and its application will be more effective if a structured training is organized using the training handbook relevant for your setting. The guides, handbooks, and other resource materials will support your capacity building as leaders who govern or leaders who manage, and leaders who are dedicated to strengthening the performance and results of health systems in low- and middle-income countries.

The learning continuum comprises a carefully designed learning experience consisting of: general orientation of new governing body members; readings, reflection, and collective self-assessment by the governing body; a three-day Governance Academy through which the knowledge on how to
apply the five effective governing practices can best be mastered; implementation of a governance enhancement plan and an action plan to improve selected measures of the organization’s performance; and presentation of lessons learned and results in a regional conference; all of this is supported by continuous governance education using the resources available on the LMG website www.lmgforhealth.org/expertise/governing.

**Governance Learning Continuum**

<table>
<thead>
<tr>
<th>Orientation</th>
<th>Readings and Reflection</th>
<th>3-day Governance Academy</th>
<th>Implementation of Governance Enhancement Plan</th>
<th>Present Results in Regional Conference</th>
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The three-day Governance Academy or governance workshop is at the heart of this learning plan. As described in the accompanying training handbooks, there are twelve sessions in the Governance Academy designed to help participants master the contents of the five guides. The sessions are practice-oriented and based on an experiential learning methodology. The handbooks describe specific trainer goals and learning objectives for each session. Course participants are expected to be teams of governance leaders and senior management leaders from similar settings. For example, participants could be senior governance and management leaders from several different hospitals. However, they should be from hospital settings only so that the focus is on applying the practices in a hospital setting. By the end of the course, the teams would have prepared a governance enhancement plan and an action plan to improve two to three strategic measures of their organization’s performance. When they go back to their organizations, senior governance and management leaders work together as a team to consistently apply the five essential governing practices, implement their plans and improve their organization’s governance and performance.

Governance enhancement plan comprises periodically assessing governing practices and continuously trying to improve these practices through regular governance assessments, governance orientation and education, building diversity in the governing body, cultivating essential governance competencies, conducting productive meetings, establishing governance policies, and using governance technologies like dashboard.

The primary purpose of enhancing governance is improving the organizational performance. For this reason, the governance leaders working with the senior management and key stakeholders develop an action plan to improve two to three strategic measures of the organization’s performance. This involves practical application of the governance capabilities of the governing body and also consistent application of the effective governing practices they learned in course of the governance enhancement education. When the governance leaders see their governance decisions translating into higher organizational performance, they are inclined to consistently apply the effective governing practices. A virtuous cycle is set into motion, improved governance leading to better organizational performance, which in turn motivates the governance leaders to continuously enhance their governance.
Governing Practice—Engaging Stakeholders

Inclusion and collaboration are two important principles that enable effective governance. Being inclusive involves engaging all relevant stakeholders—across gender, age, race and ethnic groups, socioeconomic status, health and disability status, and location—in the decision-making process. Collaboration involves building partnerships across ministries, sectors, and levels of authority. In addition to a Ministry of Health, many other actors in the public sector play a role in improving health in a country. For example, the ministries dealing with water and sanitation, education, finance, economic development, roads, and transportation are all involved in activities that impact health. Collaboration also involves working with private-for-profit and nonprofit groups and civil society organizations and NGOs. Finally, collaboration means working across all levels—local, state, national, and international. Collaboration, participation, inclusion—all are elements of engaging stakeholders.

Inclusion and participation are vital to the achievement of health equity, where all men and women—young and old—have opportunities to improve or maintain their health and wellbeing. For example, the non-representation of women and youth in decision making deeply affects their access to health care because barriers they face are not addressed. Similarly, the perspectives of people with disabilities, the elderly, and the very poor are not adequately represented in the governance decision-making process. Public concerns, needs, and values are able to influence decision making through participation.

Gender responsiveness in governance has the potential to enhance positive health outcomes, not only for women but also for the entire community. Women play three important roles in a health system: as decision makers, as health care providers, and as users of services. Nevertheless, governance structures in health systems and health institutions are often dominated by men. As a result, issues faced by women in leadership, governance, and senior management roles, in the health workforce, and as users of services are too often ignored. It is the responsibility of everyone working in the health system, especially of the leaders who govern, to make their institutions gender responsive.

To explore the good governing practice of engaging stakeholders, you will want to consider the principles and actions presented below:

**Engage Stakeholders:** Identify, engage, and collaborate with diverse stakeholders representing the full spectrum of interested parties

<table>
<thead>
<tr>
<th>Principles underlying the practice</th>
<th>Governing actions you can take:</th>
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<tbody>
<tr>
<td>Participation</td>
<td>• Empower marginalized voices, including women and youth, by giving them a meaningful place and a meaningful role in formal decision-making structures.</td>
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<tr>
<td>Representation</td>
<td>• Ensure appropriate participation of key stakeholders through fair voting and decision-making procedures.</td>
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<tr>
<td>Inclusion</td>
<td>• Extensively hold and enable open meetings, surveys, public comment, public workshops, national forums, and citizen advisory committees.</td>
</tr>
<tr>
<td>Diversity</td>
<td>• Create and maintain a safe space for sharing ideas, so that genuine participation across diverse stakeholder groups is feasible.</td>
</tr>
<tr>
<td>Gender equity</td>
<td>• Provide an independent conflict resolution mechanism accessible by all stakeholders, as diverse stakeholders may have competing interests, giving rise to conflict.</td>
</tr>
<tr>
<td>Conflict resolution</td>
<td>• Elicit and respond to all forms of feedback in a timely manner.</td>
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<tr>
<td></td>
<td>• Build coalitions and networks, where feasible and necessary, and strive for consensus on achieving the shared direction across all levels of governance.</td>
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<tr>
<td></td>
<td>• Establish alliances for joint action at whole-of-government and whole-of-society levels.</td>
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</table>
Engaging Stakeholders

There are many reasons to engage with diverse stakeholders:

1. To get more and better insights to define current challenges more accurately.
2. Participation in problem definition improves the quality of solutions and the willingness of stakeholders to help define practical ways to implement the solutions.
3. Stakeholder participation to define solutions improves the willingness and ability of stakeholders to implement the solutions.
4. Engagement helps advance the awareness and ability of stakeholders to hold decision makers accountable for their decisions.
5. Engagement fosters ownership of the need and willingness to measure results.

To enable effective stakeholder engagement, those who govern wisely embrace a number of activities around the seven imperatives listed below. A variety of tools and resources to support these activities are provided in the Appendix of this guide.

1. Sincere stakeholder invitations
2. Sincere stakeholder engagement
3. Build trust
4. Engage with patients
5. Engage with doctors, other clinicians, and health workers
6. Collaborate with other sectors
7. Gender-responsive governance

In the following sections of the guide, “you” should be interpreted as you the leader who governs—working with your governing body and the senior management team.
Sincere Stakeholders Invitations

Those who govern need the ideas, insights, experiences, money, and political influence of many stakeholders. To secure these valuable resources from stakeholders, they must believe you have a real need for their participation, and they must believe your invitation to participate is significant and sincere. Engagement requires an invitation that is not only sincere, but extended with enough time for that engagement to be fully realized.

Sincere Engagement with Stakeholders

The governing body, working with management, has a responsibility to engage stakeholders. It is also the governing body’s role to support management in engaging stakeholders. There are five ways of working with people in the community and with health workers. Begin by informing and consulting with them, and then involve them in the governance decision-making process, collaborate with them in finding solutions, and finally empower them.

Figure 1: Five Ways of Engaging with Stakeholders

I. Inform
   Keep stakeholders, community members, and health workers informed, and educate them on your organization’s governance policies.

II. Consult
   Listen to people’s and health workers’ concerns and provide feedback.

III. Involve
   Coordinate with stakeholders, community members, and health workers to make sure that their concerns are directly reflected in governance decisions.

IV. Collaborate
   Work with the people and the health workers to formulate solutions.

V. Empower
   Give decision-making in the hands of the people.

To effectively fulfill its responsibilities, the governing body should, in a significant and meaningful way as described above, engage with community representatives, health providers and health workers, and all relevant stakeholders—across gender, age, race and ethnic groups, socioeconomic status, health and disability status, and location—in the decision-making process.
Several considerations to enable sincere invitations and sincere engagement with diverse stakeholders in the governance of your organization are listed below. **Which are the five or six most important considerations relevant to your situation?**

1. Be proactive. Go out into your community to obtain opinions and health concerns from community members and other stakeholders.
2. Provide the community representatives, health workers, and other diverse stakeholders with the information and time they need to participate in a meaningful way in your organization’s decision making. Be open about access to information, and be willing to provide regular briefings and updates to stakeholders.
3. Avoid misunderstanding, miscommunication, and conflict. Provide an independent conflict resolution mechanism accessible to all stakeholders, because diverse stakeholders may have competing interests, giving rise to conflict.
4. Collect input from community representatives, health workers, and other stakeholders before making a decision.
5. Respect cultural practices when consulting with community members and other stakeholders.
6. Have courage, display humility, and establish trust. Allow time to build trust.
7. Empower marginalized voices, including women and youth, by giving them a meaningful place and a meaningful role in formal decision-making structures.
8. Ensure appropriate participation of key stakeholders through fair voting and decision-making procedures.
9. Extensively conduct open meetings, surveys, public comment processes, public workshops, public forums, and citizen advisory committees.
10. Create and maintain a safe space for sharing ideas, so that genuine participation across diverse stakeholder groups is feasible.
11. Be flexible. Be prepared to change the way in which stakeholder dialogue is conducted with different stakeholders.
12. Devote adequate time and resources to the process.
13. Have realistic expectations about what the process of engagement is going to achieve. Demonstrate clarity of purpose. Have internal understanding with regard to the stakeholder engagement strategy and direction.
14. Involve stakeholders in the planning of the process. Ask stakeholders to play a role in developing the agenda.
15. Assign the best people, who have the patience, and who will listen carefully.
16. Be prepared to make real changes as a result of stakeholder dialogue.
17. Engage key stakeholders, which may include “difficult” stakeholders.
18. Acquire individual and organizational skills for communication and engagement with stakeholders.
19. Elicit, and respond to, all forms of feedback in a timely manner.
20. Build coalitions and networks, where feasible and necessary, and strive for consensus on achieving the shared direction across all levels of governance. Establish alliances for joint action at whole-of-government and whole-of-society levels.
21. Build partnerships across ministries. In addition to a Ministry of Health, many other ministries play a role in improving people's health. For example, the ministries dealing with water and sanitation, education, finance, economic development, roads, and transportation have responsibilities and activities that impact health. Identify a health issue that is influenced by policies in different sectors, and work to raise its visibility on the agenda of a decision-making body outside of the health sector.
22. Build partnerships across sectors. Work with private-for-profit and nonprofit groups and civil society and NGOs.
23. Build partnerships across different levels of authority. Work with different levels—local, state, national, and international.

24. Bring together the key players, adopt a collaborative approach for addressing the issue, and adopt a collaborative process that negotiates different interests. At the end of the process, draft and sign an agreement establishing accountabilities.

For each of the top five or six activities you selected, please answer these questions:

1. What are the obstacles leaders who govern or governing bodies are likely to experience in this practice or activity?

2. How might those obstacles best be removed or reduced by the governing body?

3. What are practical ways to help ensure the successful accomplishment of this activity?
**Build Trust**

Trust among stakeholders in governance decision-making processes is an essential but fragile commodity. Trust must be earned, is easily lost, and is difficult to regain. Those who govern must first be trustworthy, and then be prepared to trust in others.

Facilitate the establishment of trust in three relationships:

1. Trust between health providers and health workers, management, and the governing body.
2. Trust between the communities/people and your governing body or the leaders who govern.
3. Trust between health providers and health workers and the community.

**Figure 2: Building Trust**

Of the ways to establish and nurture trust listed below, which are the two or three activities that are most important in your situation?

**Begin with yourself.**

1. Tell the truth, even if it is difficult.
2. Do what is right, sometimes even at personal risk.
4. Do not seek personal gain.
5. Keep promises and commitments. Make your promises and commitments carefully. Make commitments to yourself and keep them.
6. Hold yourself accountable before holding others accountable.
7. Take responsibility for the results. Take responsibility for the decisions that go wrong. Admit your mistakes and explain how you made a decision. Learn from your mistakes.
8. Be a patient listener. Listen to your colleagues, and listen to the stakeholders, health workers, and community members.
9. Be open-minded and consider ideas and points of view different from your own.
10. Seek feedback from your colleagues, and from health workers, community members, and other stakeholders. Establish mechanisms for seeking this feedback on a regular basis. Act on the feedback you receive from them. Be a learner. Broaden your knowledge and skills in public health.
Then, extend trust to health workers, community members, and stakeholders.

1. Treat health workers, community members, and other ministries and sectors as equal partners in achieving the vision of a healthier community. Seek opinions and ideas from them.
2. Sincerely trust in health workers, community members, and other stakeholders.
3. Respect the health workers, community members, and other stakeholders, and show your respect through words and actions.
4. Make your expectations from health workers and the community very clear to them.
5. Recognize the good work of the health workers and contributions of community members and other stakeholders. Give them appropriate credit.
6. Do not withhold information. Be transparent.
7. Do not avoid difficult issues. Deal with them with courage before they turn into major problems.
8. Be just and fair in your decisions. Treat health workers, community members, and other stakeholders in a fair and just manner.
9. Have a strong sense of purpose. Involve health workers, community members, and other stakeholders so that they share and support your purpose.
10. Create a culture in which tolerance and cooperation are valued. Have diverse stakeholders participate in making decisions.

(Source: Adapted from Covey, Stephen MR. The Speed of Trust: The one thing that changes everything. Simon and Schuster, 2006.)

For each of the two or three most important activities you selected, answer the following three questions:

1. What are the obstacles leaders who govern or the governing bodies are likely to experience implementing this activity?
2. How might those obstacles best be removed or reduced by the governing body?
3. What are two or three practical ways to help ensure the successful accomplishment of this activity?
Engage with Patients

The end goal of good governance is a health system that serves the health needs of patients and their families and communities. Leaders who govern wisely and well understand the health needs of the people they exist to serve.

1. **What are the obstacles leaders who govern or the governing bodies are likely to experience engaging with patients and health service users?**
2. **How might those obstacles best be removed or reduced by the governing body?**
3. **What are two or three practical ways to help ensure the successful accomplishment of this activity?**

Patient engagement and patient satisfaction reinforce each other. Studies in a range of different health care settings have identified several factors that are critical to assuring quality of care and patient satisfaction with care.

- Strong committed senior leadership
- Communication of strategic vision
- Engagement with patients and families
- Sustained focus on employee satisfaction
- Regular measurement and feedback reporting
- Adequate resourcing for care delivery design
- Building staff capacity to support patient-centred care
- Accountability and incentives
- Culture strongly supportive of change and learning

Of these many factors above to enhance the quality of care and patient satisfaction, which are the two or three most important to you as a governing body or a leader who governs? What practical steps will your governing body take on these two or three most important determinants of health care quality and patient satisfaction?
Engage with Doctors, Other Clinicians, and Health Workers

Good governance acknowledges the value and power of engaging and focusing the talent, ideas, experiences, and energy of health providers and health workers in the planning and implementation of an organization’s health services. This essential participation, however, needs to be sincerely requested, listened to, and acted upon.

Motivation is key to the success of health workers as well as the health institutions. Health workers can give their best if they are motivated. Which two or three of the following strategies and activities are the most important to build ownership and motivation for engagement of health workers in the governance of your organization?

1. Constantly communicate your vision and goals. Focus your stakeholders and health workers on the end result or the overall team goal.
2. Spell out specific targets, goals, and expectations for behavior and performance, and measure performance. Identify obstacles and help in removing them.
3. Ensure regular and timely feedback is given to health workers on how they are performing against the goals. Ensure this feedback is given in a direct and supportive manner. Feedback is vital to continuous improvement. It motivates and inspires people to use their full potential.
4. Ensure a safe environment is provided to the health workers to do their jobs.
5. Let your health workers know you are willing to listen to them. This will increase their morale. Be an active listener. Make sure your managers listen to their goals and dreams, their past achievement, their concerns, and their challenges, and respect their thoughts and opinions. They may have the best answer for achieving the results you are trying to achieve.
6. Make sure their questions, concerns and complaints are answered.
7. Involve health workers in decision making.
8. Encourage them to undergo training, acquire new skills and grow in their careers.
9. Make sure good work done by the health workers is recognized. Praise them publicly. Praise them four times as much as you criticize their performance. If you need to criticize constructively, do it in a private manner.
10. Reward a health worker as soon as he or she performs excellently and gives excellent results. When rewarding a health worker, consider his or her need for career growth and career advancement, and reward accordingly. Give health workers autonomy to achieve their targets, facilitate their mastery of their jobs, and inspire them to accomplish better health outcomes.

For the two or three most important strategies and activities you selected to motivate health workers to be engaged in governing your organization, please answer the following three questions:

1. What are the obstacles leaders who govern are likely to experience implementing this strategy or activity?
2. How might those obstacles best be removed or reduced by the governing body?
3. What are two or three practical ways to help ensure the successful accomplishment of this strategy or activity?
Engaging with Doctors and Other Clinicians

The Institute for Healthcare Improvement in the United States has developed a framework for how organizations can improve engagement with clinical leaders. Key elements include:

- Discovering common purpose, such as improving outcomes and efficiency.
- Making doctors partners in the organization, and promoting individual responsibility for quality.
- Identifying and encouraging champions, educating leaders, and developing project management skills.
- Using improvement methods, such as performance data, in a way that encourages buy-in rather than resistance.
- Making it easy for doctors to do the right thing for patients.
- Supporting doctors and clinical leaders to take positions on the governing body.
- Involving doctors from the beginning—working with leaders, choosing messages carefully, making doctor involvement visible, communicating candidly and often, and valuing doctors’ time by giving management time to them.

McLeod Regional Medical Center in South Carolina used engagement with clinical leaders to secure major quality advances without any significant financial incentives. Their techniques for engaging doctors included:

- Asking doctors to lead improvement
- Asking doctors what they want to work on
- Making it easy for doctors to lead and participate not wasting their time
- Recognizing doctors who lead, including giving them an opportunity to present to the governing body
- Supporting medical leaders when they are obstructed by difficult colleagues
- Providing learning and professional development opportunities

Of these many factors above to enhance the clinician engagement, which are the two or three most important to you as a governing body or a leader who governs? What practical steps will your governing body take on these two or three most important determinants of clinician engagement?

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Why engage with staff and health workers?

The business case for staff engagement is compelling: organizations with engaged staff deliver better patient experiences, fewer errors, lower infection and mortality rates, stronger financial management, higher staff morale and motivation, and less absenteeism and stress. Patient engagement can deliver more appropriate care and improved outcomes.

What are the values on which engagement rests?

Both staff and patient engagement are grounded in values of openness, collaboration, seeing the world through the eyes of others, and listening to and supporting each individual employee or each individual patient. Engagement needs to be seen through the lens of the person who is being engaged. How they feel and what their experiences are is important to understand.

How do you encourage staff to engage?

You can encourage staff engagement in many different ways. For example:

- Give staff autonomy.
- Enable them to use a wide range of skills.
- Ensure that jobs are satisfying.
- Give staff support, recognition and encouragement.
- Nurture optimism and self-belief.

Engagement is fostered through staff having jobs with meaningful, clear tasks, some autonomy to manage their work, involvement in decision making, and supportive line managers.

When do you say staff is engaged?

It is when your organization values the employee and the employee values the organization. The employees feel respected, listened to, and empowered, and are able to influence and improve care. They have information, skills, confidence, and control over how they do their work. They are part of a well-structured team in an organization that is focused on quality and celebrates success. In short, engaged staff feel valued, respected and supported. It is often described in psychological terms, for example, staff feeling energetic, determined, enthusiastic, and even inspired. They are engrossed in their work and take pride in what they do.

How do you measure employee engagement?

It is measured using three dimensions.

1. Psychological engagement is judged by three questions: “I look forward to going to work,” “I am enthusiastic about my job,” and “time passes quickly.”
2. Advocacy is measured by whether an employee would recommend their organization as a place to work and to receive health care.
3. Involvement is gauged by three questions: “I am able to make suggestions to improve the work of my team,” “there are frequent opportunities for me to show initiative,” and “I am able to make improvements happen.”

How are staff appraisal and staff engagement interrelated?

There is a strong link between appraisal and engagement. Employees who have a well-structured appraisal are likely to have far higher engagement than those who did not. Poorly structured appraisals leave staff feeling worse than if they had not had one.

(Source: Adapted from The King’s Fund. 2012. Leadership and Engagement for Improvement in the National Health Service. London, U.K.)
Collaborate with Other Sectors

Health gains and improvements in health service delivery result from the influence of many factors outside the control of the health sector. Health has many determinants, such as food, water, education, housing, poverty, crime, and pollution. Effective governance seeks to engage with policy makers and leaders from other sectors to make and implement good policies and programs for better health and health services.

In your situation, which two or three of the actions listed below are the most valuable to strengthen intersectoral collaboration of your organization or your health system?

1. Establish intersectoral governance structures, for example, committees and secretariats convening across sectors or ministries.
2. Establish intersectoral committees in legislative bodies, for example, in parliament, state legislatures, and local councils.
3. Establish intersectoral committees at the civil service level, for example, inter-ministerial committees and task forces.
4. Establish funding arrangements to support actions taken across many different sectors to attain health objectives. Mobilize special funds to finance intersectoral action or joint programs for health.
5. Use formal structures and formal processes for engagement beyond government, for example, with the public, other stakeholders, and industry.
6. Obtain a government mandate for aligning different sectors to adopt a “health in all policies” approach.
7. Develop multisectoral agreements on desired health goals and outcomes.
8. Initiate and sustain a coordinated inter-ministerial and intersectoral advocacy and action on the social determinants of health.
9. Implement multisectoral policies on the social and environmental determinants of health, and monitor, measure, and evaluate progress on social determinants of health.
10. Make a commitment to partnership building across sectors at the local level by establishing committees, and regular sharing of information.

(Source: Adapted from McQueen, David V., M. Wismar, V. Lin, C. M. Jones, and M. Davies. 2012. Intersectoral Governance for Health in all Policies. Structures, actions and experiences. World Health Organization.)

Leaders who perform well engaging across sectors tend to:

- Go out of their way to make new connections.
- Have an open, inquiring mind, unconstrained by current horizons.
- Embrace uncertainty and be positive about change.
- Draw on as many perspectives as possible.
- Ensure leadership and decision making are distributed throughout the system.
- Promote the importance of values.
- Invest energy and time in building relationships.
For the two or three most important activities you selected, answer the following three questions:

1. What are the obstacles leaders who govern are likely to experience implementing this activity?
2. How might those obstacles best be removed or reduced by the governing body?
3. What are two or three practical ways to help ensure the successful accomplishment of this activity?

Gender-Responsive Governance

Gender issues are too often ignored or inadequately considered by those who govern. Women and other marginalized populations are often the most in need of services that protect, promote, and nurture their health. Women are also central decision makers about the health of families and communities. Women perform the majority of front-line health care service delivery activities. Governance as well as leadership and management must be gender-sensitive, informed, and inclusive. Effective governance will have a significant proportion of female participants on governing bodies, council, committees, and task forces.

There are many ways to enhance gender dimensions and actions in your governance processes. Of those listed below, which two or three are the most important in your situation?

1. Increase the number of women in leadership, governance, and senior management roles.
2. Mentor women in leadership, governance, and senior management roles,
3. Increase the number of female health workers.
4. Establish quotas and affirmative action coupled with empowerment measures.
5. Reinforce a safe, harassment-free work environment by upholding strict codes of conduct and zero tolerance for discrimination.
6. Institute a gender policy in the organization.
7. Establish a gender-sensitive implementation process that considers the different needs of men and women.
8. Collect sex-disaggregated data and define sex-disaggregated outcomes.
9. Create a comprehensive agenda to overcome discrimination and segregation.
10. Give voice to women and youth in making and implementing policies that affect them.
11. Begin with yourself and build a commitment to gender equality in your organization. Demonstrate an understanding of different needs of men and women and think how your decisions will address these different needs.
12. Build a reputation for gender equality and communicate your gender-related achievements.
13. Identify specific actions and tools to engage with women.
14. Explain how your decisions will directly or indirectly affect the status of women in their families or their communities.
15. Seek advice from women’s organizations, women leaders, and gender experts. Keep in mind that women are not a homogenous group. Ensure representation of different perspectives across socioeconomic and other groups.


17. Seek support from the local community on women’s health issues and women’s leadership issues.

18. Get the full picture. Consulting primarily with men provides only half of the picture. Seek out the views of women to get a more complete picture of potential risks, impacts, and opportunities.

19. Sometimes women are more comfortable talking to other women. Consultation team should have female members in such a case. Get more women in the room. Make meetings more accessible and convenient for women. Use active facilitation for getting women’s input. Hold separate meetings, when necessary.

20. Raise issues that are a priority from women’s perspective. Active intervention may be required to identify issues that are important to women and to make sure they are given adequate consideration.

For the two or three most important activities you selected, answer the following three questions:

1. What are the obstacles leaders who govern are likely to experience in implementing this activity?
2. How might those obstacles best be removed or reduced by the governing body?
3. What are two or three practical ways to help ensure the successful accomplishment of this activity?
Appendix: Stakeholder Engagement Tools

Identify Your Key Stakeholders

Instructions: List your key stakeholders on the left-hand side of the form and then tick which box relates to the stakeholder. If the stakeholder has several ticks, you can then identify them as central to your process.

<table>
<thead>
<tr>
<th>Stakeholder</th>
<th>Responsibility</th>
<th>Influence</th>
<th>Proximity</th>
<th>Dependency</th>
<th>Representation</th>
<th>Policy and strategic intent</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
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<td>B</td>
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</tbody>
</table>

(Source: Adapted from the Australian Government Department of Immigration and Citizenship’s Stakeholder Engagement Practitioner Handbook 2008)

Criteria

1. **Responsibility**: Stakeholder to whom you have a responsibility.
2. **Influence**: Stakeholder with influence or decision-making power.
3. **Proximity**: Stakeholder with whom you interact most, including an internal stakeholder, those with long-standing relationships, and those on whom you depend for day-to-day operations.
4. **Dependency**: Stakeholder who is directly or indirectly dependent on your activities.
5. **Representation**: Stakeholder who by regulation or custom or culture can legitimately claim to represent a constituency, especially clients or health service users.
6. **Policy and strategic intent**: Stakeholder whom you directly or indirectly address through policy or practice.
Illustrative List of Stakeholders of a Provincial Public Health Office

1. Patients and health service users
2. The communities and the populations in the province (men/women/youth/children)
3. Health post community councils, health facility community councils, hospital community boards
4. District health coordination committees
5. Municipalities
6. Provincial Council
7. Provincial and District Governors
8. Ministry of Public Health
9. Provincial directorates of different ministries that impact health (water and sanitation, food and agriculture, environment, women’s affairs, social protection, economy, transport, environment, education, rural development, counter narcotics, information, electricity, etc.)
10. Health workers, physicians, nurses, and other health providers in the public sector
11. Private health sector (hospitals, doctors, nurses, midwives, pharmacists, etc.), their professional associations and unions, and accreditation boards and councils
12. Implementing NGOs and their staff providing basic and essential health services
13. Media
14. National and international NGOs
15. Other civil society organizations, including religious organizations
16. Donors and other sources of funding
Process Flow of Stakeholder Engagement

1. Think strategically
   - Map stakeholders
   - Identify issues
   - Set strategic objectives for engagement
   - Prioritize stakeholders and issues

2. Analyze and plan
   - Review progress
   - Learn from others
   - Identify potential partners
   - Assess your current engagements
   - Draft stakeholder specific objectives
   - Understand and learn about stakeholders and their representatives
   - Check for resource commitments
   - Create an issue-focused plan for engagement

3. Strengthen engagement capacities
   - Strengthen your ability to respond
   - Develop the internal skills and characteristics needed for engagement
   - Consider your stakeholders’ requirements for engagement

4. Design process and engage
   - Identify the most effective engagement methods
   - Design the engagement process

5. Act, review and report
   - Create a plan for action
   - Report back and give assurance to your stakeholders
   - Review the engagement process

Differentiate Crisis Management, Stakeholder Management, and Stakeholder Engagement

<table>
<thead>
<tr>
<th>Crisis Management</th>
<th>Stakeholder Management</th>
<th>Stakeholder Engagement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reactive</td>
<td>Proactive</td>
<td>Interactive</td>
</tr>
<tr>
<td>Vulnerable</td>
<td>Anticipate</td>
<td>Encourage</td>
</tr>
<tr>
<td>Episodic</td>
<td>Regular</td>
<td>Inclusive</td>
</tr>
<tr>
<td>Hostile</td>
<td>Defensive</td>
<td>Prepared to change</td>
</tr>
</tbody>
</table>

(Source: Jeffery, N. 2009. Stakeholder Engagement: A Road Map to Meaningful Engagement. Doughty Centre for Corporate Responsibility, Cranfield School of Management.)
**Key Questions: Sample 1**

The following are key questions to be answered before the stakeholder engagement plan is developed. A stakeholder engagement plan should link to your organization’s overall objectives. This will help the governing body plan the engagement required to support the achievement of these objectives.

<table>
<thead>
<tr>
<th>Organizational objectives</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who are the stakeholders (internal and external)?</td>
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<tr>
<td>What are the objectives of the engagement?</td>
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<tr>
<td>What are the issues associated with the engagement?</td>
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</tr>
<tr>
<td>What are the opportunities of engaging?</td>
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</tr>
<tr>
<td>What are the risks of engaging?</td>
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<tr>
<td>What are the risks of not engaging?</td>
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<tr>
<td>What are the methods of engagement? (Phone / email / face-to-face forums, etc.)</td>
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<tr>
<td>How will you know if you are successful?</td>
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<tr>
<td>How will you build on lessons learned for next time?</td>
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</tbody>
</table>

(Source: Adapted from the Australian Government Department of Immigration and Citizenship's Stakeholder Engagement Practitioner Handbook 2008)
Key Questions: Sample 2

You can use this alternative checklist to make sure that you have answered all relevant questions.

1. Clarify your engagement objective
   a. Why do you need to engage?
   b. What would successful engagement look like?

2. Identify your stakeholders
   a. Who makes the decisions?
   b. Who can influence decisions?
   c. Who are your partners?
   d. Who owns related activities?
   e. Who will be impacted by outcomes?
   f. Who are the beneficiaries?
   g. Who can slow or stop the activity?
   h. Who can make the activity more effective?
   i. Who can contribute resources?
   j. Who may be excluded from participating?

3. Analyze your stakeholders and select your level of engagement
   a. Are you promising to keep them informed of progress?
   b. Are you promising to listen to their ideas?
   c. Are you promising to work with your stakeholders to find solutions?

4. Select your activities and decide on your message
   a. When will you engage and what will your stakeholders contribute?
      i. What are you aiming to achieve at each stage?
      ii. What is your deliverable at this stage?
      iii. Are you engaging with stakeholders to generate ideas?
      iv. Are you engaging with community organizations to seek feedback on options?
      v. Are you asking a group to make recommendations?
      vi. Are you engaging with your partners to make a decision?
   b. Select appropriate engagement activities
      i. What timeframe do you have for the activity?
      ii. What budget do you have?
      iii. Do you, or others on your governing body, have the skills to facilitate engagement activities?
      iv. Are there experts in your organization or your partner organizations who can assist you?
   c. Think about your communication message
      i. Why are you engaging your stakeholders?
      ii. What benefits will your stakeholders gain from engagement?
      iii. How will their input be used?

5. Consider any engagement risks

6. Review your plan and celebrate successes
   a. What has worked well? What has been challenging?
   b. What has been learned?
   c. What has been achieved?
   d. What could have been done differently?

7. Evaluate your engagement strategy

## Engagement Planning Template

This template will help you prepare a stakeholder engagement plan.

### Overview

| Subject of engagement and its scope                  | 
| Strategic objectives and intended outcomes           | 
| Engagement methods                                   | 
| Targeted stakeholder groups and representatives      | 

### Practical Plan

<table>
<thead>
<tr>
<th>Activities &amp; Resources</th>
<th>Responsibility</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparation</td>
<td></td>
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<tr>
<td>Invitation /publicity</td>
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<tr>
<td>Pre-information</td>
<td></td>
<td></td>
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<tr>
<td>Logistics</td>
<td></td>
<td></td>
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<tr>
<td>Venue, timing</td>
<td></td>
<td></td>
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<tr>
<td>Transport, food, lodging etc.</td>
<td></td>
<td></td>
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<tr>
<td>Equipment, etc.</td>
<td></td>
<td></td>
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<tr>
<td>Participant reimbursement</td>
<td></td>
<td></td>
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<tr>
<td>Process to meet desired outcomes</td>
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<tr>
<td>Agenda for the event</td>
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<td></td>
</tr>
<tr>
<td>Ground rules and terms of reference</td>
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<tr>
<td>On the day roles and facilitation</td>
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<tr>
<td>Record keeping</td>
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<tr>
<td>Feedback to participants</td>
<td></td>
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<tr>
<td>Wider communication of results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signals of success (expected outputs and outcomes)</td>
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<td></td>
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<tr>
<td>Participant feedback method</td>
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</tbody>
</table>

### Risk assessment

| Risks | Contingency plan |

Stakeholder Engagement Checklist of Specific Actions

This is a checklist you may use to make sure that you have taken all the actions.

**Instructions:** Place a tick in one of the right-hand columns to indicate whether you have taken all appropriate actions in engaging with stakeholders.

*N/A stands for not applicable.*

<table>
<thead>
<tr>
<th>Stakeholder communication</th>
<th>Open and effective engagement involves both listening and talking</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Two-way communication</td>
</tr>
<tr>
<td></td>
<td><em>(Who do you need to talk and listen to?)</em></td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>1. Clearly define lines of communication.</td>
<td></td>
</tr>
<tr>
<td>2. Maximize community and stakeholder opportunities to say what they want and to provide information and feedback.</td>
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</tr>
<tr>
<td>3. Ensure your organization’s representatives take part in consultation and are accessible to communities and stakeholders.</td>
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</tr>
<tr>
<td>4. Demonstrate active listening by responding to the issues of each community and stakeholder group and being sensitive to their concerns.</td>
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<tr>
<td>5. Determine and use the right channels of communication to ensure the method of communication is appropriate to the relevant communities and stakeholders.</td>
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<tr>
<td>6. Identify appropriate individuals and representatives to ensure the right people are engaged and all stakeholder groups are genuinely represented.</td>
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<tr>
<td>7. Build and maintain honest working relationships through provision of accurate and timely information.</td>
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</tbody>
</table>

**Clear, accurate, and relevant information**

*(What is communicated? What do key stakeholders want to know?)*

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>N/A*</th>
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</thead>
<tbody>
<tr>
<td>1. Identify and assess all relevant social, environmental, and economic determinants of the health issue.</td>
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<td>2. Provide information and analysis that is technically or scientifically sound and relevant.</td>
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<td>3. Provide information in a form that is understandable by the target audience and in a way that genuinely helps people understand and make informed decisions.</td>
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<tr>
<td>4. Ensure access to information.</td>
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<tr>
<td>5. Ensure the information provided is delivered in a culturally appropriate manner.</td>
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<tr>
<td>6. Provide opportunities for communities and stakeholders to ask questions, to seek clarification of information provided, and to contribute their own experiences and information.</td>
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</tbody>
</table>

**Timeliness**

*(When do we communicate?)*

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>N/A*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Seek community and stakeholder views as early in the planning stage as possible.</td>
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<tr>
<td>2. Recognize the need to build relationships, capacity, and knowledge before making decisions.</td>
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<tr>
<td>3. Allow enough time for community and stakeholder issues to be raised and addressed, and for stakeholders to review and respond to information.</td>
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</tbody>
</table>
4. Establish clear and realistic timeframes for community and stakeholder input.

5. Maintain continuous engagement from the planning stage through to implementation, operation, and finally through to evaluation.

6. Ensure timing is convenient to allow adequate community and stakeholder representation.

7. Provide information within appropriate timeframes and contexts and identify the reporting period.

8. Make any critical deadlines and timeframes clear to communities and stakeholders. Recognize, respect, and accommodate changes to timeframes, where necessary.

**Transparency**

Clear and agreed information and feedback processes
(How is information about the engagement process communicated?)

1. Clearly identify your health objectives.

2. Clearly articulate the preferred outcomes of the engagement process.

3. Identify the objectives of the community and stakeholders.

4. Clearly explain or negotiate the decision-making processes and ensure that communities and stakeholders understand your objectives.

5. Clearly outline and negotiate the boundaries of the engagement process, commitment of resources, and level of influence of the various parties involved in the process.

6. Clearly set out the process and provisions for two-way feedback.

7. Reinforce the expected outcomes throughout the process.

8. Report openly the input from all communities and stakeholders and include feedback on their input.

**Reporting**

(What is documented?)

1. Document decisions and outcomes of meetings with communities and stakeholders.

2. Report appropriate information on the consultation through an agreed process.

**Collaboration**

Working cooperatively to seek mutually beneficial outcomes

How capable are stakeholders and community groups of participating in the process?
Where can help be found to support community groups in this process?

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>N/A*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Recognize that adequate time and resources are needed by stakeholders, communities, and you to effectively engage.</td>
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<td></td>
</tr>
<tr>
<td>2.</td>
<td>Work in cooperation.</td>
<td></td>
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<tr>
<td>3.</td>
<td>Comprehensively deal with the issues and seek stakeholder input into responses.</td>
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<tr>
<td>4.</td>
<td>Consider independent mediation processes to deal with disagreements and disputes.</td>
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</tbody>
</table>
**Inclusiveness**
Recognize, understand, and involve communities and stakeholders early and throughout the process

<table>
<thead>
<tr>
<th>What are the cultural characteristics of communities and stakeholders?</th>
<th>No</th>
<th>Yes</th>
<th>N/A*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do they have the ability, experience and access to support or deal with this process?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Identify the relevant communities and stakeholders, recognizing they may change over time.

2. Identify and, where possible, understand community and stakeholder issues, interests, aspirations, and concerns to better define what matters most to the community.

3. Facilitate community and stakeholder engagement.

4. Acknowledge and respect the diversity of communities and stakeholders.

5. Respect the culture and heritage of local communities, including the indigenous populations of the area.

6. Accept the different agendas of different communities and stakeholders and ensure that dominant groups are not the only voices heard.

7. Ensure there are appropriate systems, with minorities and other marginalized groups having equitable and culturally appropriate ways to engage, so groups that may be under-represented or hard to reach take part.

8. Acknowledge that it may not be feasible to involve the entire community.

9. Prepare a consultation plan and tailor engagement strategies to meet the needs of community and stakeholder groups, their accessibility, and information needs.

**Integrity**
Conduct engagement in a manner that fosters mutual respect and trust

<table>
<thead>
<tr>
<th>What is the ability to build credibility and confidence?</th>
<th>No</th>
<th>Yes</th>
<th>N/A*</th>
</tr>
</thead>
</table>

1. Agree on the ground rules for the process and obey them. Explain what the process is trying to achieve.

2. Be open about the nature of the engagement process and make it clear from the beginning what decisions are outside the scope of the process.

3. Clearly articulate what is negotiable and what is not negotiable in the engagement process, and give reasons for decisions.

4. Ensure realistic expectations are set and agreed to early in the process.

5. Take responsibility for your actions and live up to promises.

6. Report often on progress, accurately and promptly.

7. Acknowledge and respond to stakeholder concerns.

8. Treat people fairly and without discrimination.


10. Be honest, even when the outcome is not in your favor.

(Source: Adapted from the Australian Government Department of Immigration and Citizenship’s Stakeholder Engagement Practitioner Handbook 2008)
**Stakeholder Engagement Indicators**

The following are examples of possible performance indicators that could be used to measure the effectiveness of your stakeholder engagement.

<table>
<thead>
<tr>
<th>Description</th>
<th>Measure of success</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Enhanced community confidence</td>
<td>Majority of difficult/significant issues identified and addressed before they impact on confidence.</td>
</tr>
<tr>
<td>2. Improved resolution of emerging issues</td>
<td>Issues identified and strategies in place prior to their escalation.</td>
</tr>
<tr>
<td>3. Positive client feedback or no negative client feedback</td>
<td>Number of appreciation letters or complaints.</td>
</tr>
<tr>
<td>4. Simplified conflict resolution</td>
<td>No significant conflicts exist with key stakeholders that are not being addressed.</td>
</tr>
<tr>
<td>5. Increased organizational effectiveness</td>
<td>Indicators of organizational or health system performance.</td>
</tr>
<tr>
<td>6. No instances of systemic “poor” practice reported by stakeholders that are not being addressed</td>
<td>Percentage of specific practice suggestions made by key stakeholders that have been adopted.</td>
</tr>
<tr>
<td>7. Enhanced two-way communication</td>
<td>Staff and external stakeholder satisfaction with quality of two-way dialogue.</td>
</tr>
<tr>
<td>8. Resources mobilized</td>
<td>Estimate of resources realized by effective engagement.</td>
</tr>
<tr>
<td>9. Bridge cultural gaps</td>
<td>Ongoing relationships with specified cultural groups.</td>
</tr>
<tr>
<td>10. A culture of innovation and learning in policy and practice by incorporation of stakeholder perspective</td>
<td>Stakeholder perspective formally considered in making of policy and practice plans.</td>
</tr>
</tbody>
</table>

(Source: Adapted from the Australian Government Department of Immigration and Citizenship’s Stakeholder Engagement Practitioner Handbook 2008)
References and Resources

Inclusion and Participation


Gender Responsiveness


Intersectoral Collaboration for Health


