



QUALITY STANDARD FOR FAMILY ENGAGEMENT

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Ontario Centre of Excellence
for Child & Youth Mental Health
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mentale des enfants et des adolescents

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Introduction

Consistently delivering a seamless experience and strong outcomes — the care children and youth need, when they need it, how they need it — is key to helping young people in Ontario grow up with good mental health. The 2016 Annual Report of the Ontario Auditor General highlighted a range of opportunities to improve the child and youth mental health system.¹ Woven through the recommendations was a clear reminder that we must focus on the experience and needs of children, youth and families. And there is no one better to tell us what they need than children, youth and families themselves.

Evidence shows that meaningfully engaging youth and families in the child and youth mental health sector can have significant positive impacts on service experience and outcomes. With a voice and an active role in treatment planning and service delivery, Ontario's children, youth and families have their lived experience and context incorporated into their care. This leads to improved outcomes,² better relationships with healthcare professionals delivering care, a stronger sense that needs are being met through services delivered³ and greater satisfaction with care.^{3,4,5,6,7} When youth and families are engaged in their own care, they experience improved

About the Ontario Centre of Excellence for Child and Youth Mental Health

We work to identify our sector's most pressing knowledge gaps and close them with the best available evidence. We make sure that knowledge is accessible, understandable and useful for everyone working to improve mental health outcomes for the province's children, youth and families. We coach agencies to make meaningful changes that systematically improve the quality and accessibility of child and youth mental health services in Ontario. Working closely with youth, families, service providers and decision makers, we help ensure that our sector is equipped with the information and know-how required to deliver high-quality services and to pursue continuous quality improvement.

While developed in a mental health context in Ontario, this quality standard consists of principles-based quality statements that have broader relevance. They can be applied across sectors, in different settings and other locations, to the benefit of many more, children, youth and families.

psychological well-being, behavioural functioning and quality of life,^{4,7} and services overall are more cost-effective.^{8, 9 10} Families experience less stress,^{4, 6, 7, 10} improved family interactions^{10, 11} and more confidence in their ability to support their children and youth through mental health challenges.^{7, 11, 12, 13}

Family engagement and youth engagement are essential drivers of excellence across all aspects of the system.¹⁴ Collectively, we are most efficient and effective when we work not just for children, youth and families, but with them, every step of the way.

What are quality standards?

Pursuing excellence demands that we define it. Together with youth, families, clinicians and researchers, the Ontario Centre of Excellence for Child and Youth Mental Health (the Centre) develop quality standards that support consistent and effective child and youth mental health services across Ontario.

Quality standards are essential to a system that is accountable and constantly improving. They are also central to ensuring that Ontario children, youth and families access and receive consistent high-quality mental health services wherever they are within the province.

Quality standards consist of several quality statements, or principles, that describe what high quality looks like, based on evidence.¹⁵ None of the statements stand alone. Rather, the statements work together to make up a cohesive quality standard. Evidence comes from many sources: the research literature, the experiences of youth and families and the perspectives of service providers.

Quality standards include best practices that describe how high-quality services can happen.¹⁵ They also include indicators to show progress or the impact of these practices. Tools and resources are provided to guide implementation, evaluation and ongoing improvements in applying the quality standards.

Quality standards complement accreditation standards and clinical practice guidelines from professional bodies. Together, these standards and guidelines provide the way to have the best mental health outcomes for everyone involved in the child and youth mental health system.

For more information on quality standards for child and youth mental health, contact cymhstandards@cheo.on.ca.

This standard, like many quality standards, was developed in a context and from an evidence base that largely reflects a Western worldview. We recognize the importance of continually engaging with diverse voices and ever-broadening our sources of knowledge as we support the implementation of this standard and refine it over time.

About this quality standard

Family engagement: an ongoing process that includes families as active decision makers and partners at the organizational and system levels.

What is family engagement?

We define family engagement as an ongoing process that includes families as active decision makers and partners at the organizational and system levels.

A family is a circle of care and support that offers enduring commitment to care for one another, and is made up of individuals related biologically, emotionally, culturally or legally. This includes those who the person receiving care identifies as significant to their well-being.

Partners in family engagement at the system level include (but are not limited to) youth, other families, service providers, child and youth mental health leaders, cross sectoral representatives from other areas (such as education, justice, social services, etc.), communities, community organizations and many others. This quality standard describes critical aspects of engagement at the organizational and system levels and goes hand-in-hand with the quality standard on youth engagement in child and youth mental health system planning.

There is a continuum of family engagement practices, a concept that is visually represented in an adapted version of Hart's Ladder¹⁶ (see Figure 1). The continuum ranges from negative engagement such as manipulation, decoration and tokenism, to the highest forms of engagement, co-development and partnership. These are more fully described in the Centre's resources on family engagement.¹⁷

Why do we need this quality standard?

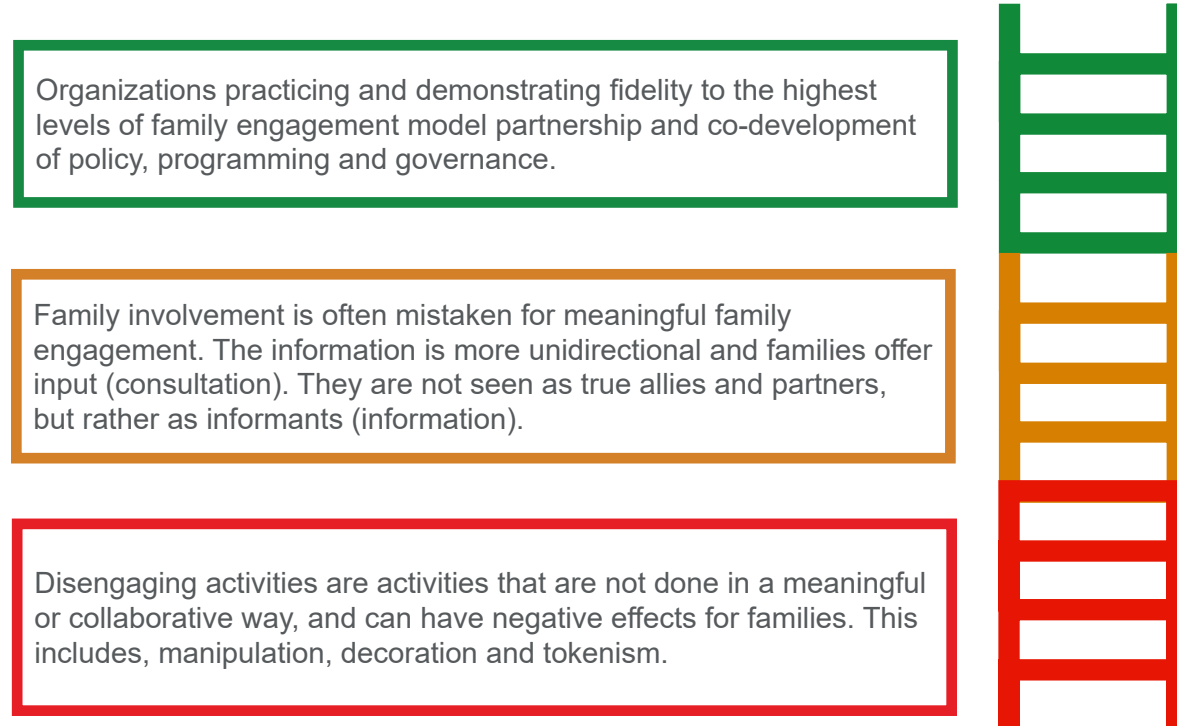
The community-based child and youth mental health sector's ability and dedication to engage families in Ontario has grown over the past several years. Many agencies have been implementing a wide range of family engagement processes within their organizations and across their communities, including having support from the Centre and Parents for Children's Mental Health (PCMH). These

include the development and delivery of training sessions, implementation supports, and various tools and resources.

There has been progress in advancing family engagement across the province, but there is still work to do to ensure that children, youth and families receive the best care and outcomes no matter where in the province they seek care. With the increase in family engagement initiatives, there are some inconsistencies with how family engagement is understood and practised in the child and youth mental health sector.

Establishing a quality standard ensures consistent practices or processes for family engagement. It formalizes family engagement practices and expectations for the system and validates the lived experience of families who engage in system-level efforts. A quality standard on family engagement also serves to provide a baseline of measurement across the province where one does not exist and challenges us as a sector to continue to improve.

Figure 1



This figure illustrates the continuum of family engagement, from highest to lowest levels of engagement. Adapted from Hart's Ladder of Youth Participation¹⁶.

What is the scope of this standard?

Family engagement can occur along a continuum and across three levels.¹⁸ Family engagement at the level of personal care and health decisions is focused on the relationship between families and healthcare professionals and improving health outcomes for children, youth or families. Engagement within an organization is focused on improving programs and services or improving organizational policies and governance.

Engagement at the system level is focused on improvements beyond a single organization. The quality statements in this standard describe family engagement at the system level (that is, beyond the delivery of care or improving programs) and at the highest level of the continuum (co-production and partnership).

This quality standard is relevant to efforts that improve services involving many organizations in a community and efforts that improve the transition or coordination of services across different agencies or sectors.

How was this standard developed?

The Centre co-developed the quality standard for family engagement with an advisory group (see Appendix A) following a validated process (see Appendix B).¹⁵ We reviewed the literature for existing standards or guidelines on family engagement at the system level. We then identified the key areas depicting family engagement at the high end of the continuum and drafted quality statements. We consulted a diverse group of stakeholders across Ontario through surveys and focus groups to gather feedback and revise the quality statements.

This quality standard describes family engagement at the system level, with the highest forms of engagement. What do we mean by “system level”? Ontario’s child and youth mental health care system is made up of the many people and organizations that deliver mental health services to children and youth across the province and the networks and pathways that connect them.

The system also includes the governments and other institutions that provide the resources and structures that enable this care. Family engagement at the system level is focused on improvements affecting these networks, pathways, resources and structures rather than individual organizations.

Quality statements

The quality standard for family engagement is comprised of eight quality statements. None of these statements stands alone. Rather, they intersect and work together to form high-quality family engagement. Those implementing the standard will need to pay active attention to all areas to ensure strong and sustainable family engagement practices.

Each statement will be explained in greater detail in the following pages, including what it means for families, for agencies and for system decision makers. Read on to learn more about the background and rationale of each statement area and the best practices identified through existing literature and stakeholder consultation.



Co-development

Families jointly develop all activities and processes involved in system planning and improvements.



Commitment

All partners are committed to family engagement and those in system leadership roles are accountable for embedding this commitment in system planning and improvement efforts.



Communication

Communication between all partners is timely, clear, respectful and accessible.



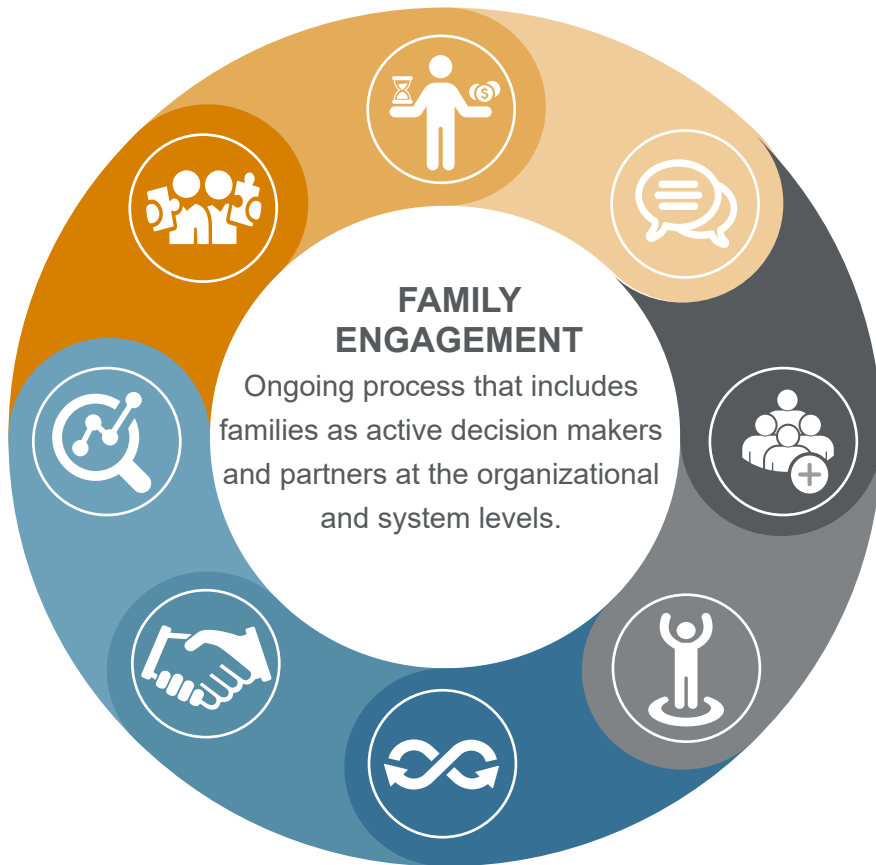
Diversity & inclusion

Family engagement practices are inclusive; the diversity of partners is valued and engagement is representative of the communities served.



Empowerment

All partners share trusting, respectful relationships that enable family experience, expertise and perspectives to be clearly reflected in system planning and improvement efforts.



Research & evaluation

Family and partners jointly research, evaluate and make ongoing quality improvements in all aspects of system planning.



Partnership

Families are essential partners, collaborating in decision-making processes.



Ongoing learning

All partners, including families, have a shared understanding of the philosophy and practice of family engagement and have accessible, ongoing learning opportunities.

Co-development



Families jointly develop all activities and processes involved in system planning and improvements.

What this means for...



Families

Partners value and rely on your experience and expertise and you have opportunities to co-develop organizational projects and system priorities with other partners.



Agencies

You regard families as experts and provide opportunities for them to partner actively. You ensure that the co-development approach is woven into all organizational work, including family engagement processes.



System decision makers

You model co-development, partnering with families in the shared development of policies, system-level priorities and funding and research decisions.

Background and rationale

The practice of meaningful family engagement is built on the premise of families as partners at all levels of mental health service delivery. This is akin to the notion of “nothing about us without us.” For meaningful engagement to happen, it is necessary to create an environment in which families can work side by side with partners to improve programs and services.¹⁹ The process of co-development enables families and partners to reflect on their experiences, define a common purpose, share in

It is necessary to create an environment in which families can work side by side with partners to improve programs and services.



decision-making, work together to identify improvement priorities, implement changes and jointly reflect on achievements with a collective sense of accountability.²⁰

Family members can and should be engaged in co-developing, implementing and evaluating improvements of specific mental health programs and services.²¹ At the organizational level, families can help determine whether existing programs meet their needs and identify improvements. At the system level, families can help define and offer advice on how to address policy changes, propose the introduction of new policies, provide input on funding decisions and implement new standards.^{21,22,23} Importantly, the level of engagement in the process of co-development may look and feel different depending on the setting and other factors.²¹ It is essential to work with families to match the right approach to the right situation at the right time.

Best practices

- Families and partners work together at all stages (including design, implementation and evaluation) of any process or project. Partners ensure it is clear to families how they can partner throughout the process.

Practical examples:

- Work with families to identify areas and topics of interest to them and identify opportunities for involvement that align with these interests.
- Engage families in the co-development, planning, implementation and evaluation of organizational and or system level initiatives (e.g. new programs, pathways or educational supports for families).
- Support family members to take part in the staff hiring process (e.g. participating on a hiring committee, co-developing interview questions).
- When evaluating a program, co-develop evaluation plans, surveys and other evaluation tools.

Best practices

- Families have a mechanism for identifying system-level issues and priorities and addressing them in collaboration with partners.



Practical examples:

- Create roles and opportunities for family members to be co-developers and take part in key decision-making processes.
- Create space for family members to sit on working groups or core teams aimed at planning, implementation and evaluation of programs or services.
- Create opportunities for family members to attend meetings where decisions are being made, without requiring them to take on a specific role (i.e. give them a chance to try-out opportunities).
- Be transparent about decision making from the beginning. Ensure that families are aware of how decisions are being made and how they are part of decision-making processes.
- Embed family voice within governance structures or mechanisms (e.g. members of working groups, advisory councils, board of directors, steering committees).
- Include family members as part of community system planning tables to ensure family needs and priorities are reflected in plans and discussions.

Definitions

co-development: process of working collaboratively on a shared purpose; joint decision-making; a commitment to action and collective accountability among all stakeholders.²⁴

Commitment



All partners are committed to family engagement and those in system leadership roles are accountable for embedding this commitment in system planning and improvement efforts.

What this means for...



Families

Your perspectives are equally valued and consistently embedded at the organizational and system levels.



Agencies

Family engagement principles are built into organizational policies, processes and activities. Leaders exemplify their commitment in strategy and resource allocation.



System decision makers

You treat family engagement as essential, not optional. You plan and allocate funds in a way that ensures family voice is integrated into the mental health system.

Background and rationale

Family engagement requires that partners involved in decision-making work collaboratively with families. Leaders and their organizations must express and exemplify their commitment to family engagement.¹⁰ This includes allocating adequate resources to embed family perspectives at the individual, organizational and system levels.²⁵ Leaders should model family engagement practices in their own work — for example, by jointly developing organizational policies with families — and ensure they are reflected in their organization's vision, mission and goals.^{26, 27}

This buy-in is crucial to bring about change. It can inspire a shared vision of family engagement among staff which helps to foster a culture of engagement within organizations.²⁸ System decision makers, including policy makers, play an important role in ensuring family voice is among those shaping the mental health system.²⁹ They must demonstrate explicit and active commitment to family engagement.³⁰ Government bodies and funding organizations have a particular influence on system-wide family engagement as they have the authority to issue mandates and allocate funding toward family engagement initiatives.³¹



Best practice

- Organizations and system-level partners demonstrate commitment by ensuring targeted resources are available and provided to support and sustain family engagement practices.

Practical examples:

- Communicate leadership commitment to family engagement by informing stakeholders what plans (e.g. action plan) or resources (e.g. staff time) are being put into place to meet the quality standard.
- Allocate resources for engagement work (e.g. include an honorarium budget line for each project or identify staff time for family engagement work).
- Compensate family members for their time and contributions (e.g. honoraria, gift cards) and work with families to identify what incentives are meaningful to them.
- Build a core team that includes organizational or system-level decision makers, service providers *and* family members to collaboratively plan, implement and oversee family engagement initiatives.

Commitment to family engagement includes allocating adequate resources to embed family perspectives at the organizational and system levels.



- Ensure people involved in engagement work have a shared understanding of roles and responsibilities (e.g. through a terms of reference). Roles and responsibilities should be revisited regularly.

Definitions

commitment: willingness to persist in a course of action; a sense of obligation to stay the course; the state or quality of being dedicated to a cause, activity, etc.³²

Communication



Communication between all partners is timely, transparent, respectful and accessible.

What this means for...



Families

Partners listen to what you say and communicate with you often. You receive information in a format, style and language that is accessible and easy for you to understand.



Agencies

You practice active listening and communicate frequently in language that is clear, easy to understand and accessible to everyone. You communicate in many different formats and styles and you ensure that communication is never unidirectional.



System decision makers

You communicate regularly and consistently. You make sure that complex information is presented in a way that everyone can understand. You follow best practices for communication in all you do, and you have mechanisms in place to ensure two-way or multi-way communication.

Background and rationale

Communication is a key ingredient in building and maintaining strong relationships and collaborative partnerships among families, agencies and system decision makers.³³ It is about more than the words

Using empowering language is important to develop strong, trusting relationships and strengths-based partnerships with families.



used to convey a message — it is also about speaking mannerisms, tone and body language. Likewise, communication is not merely about providing information; rather it is a two-way process that requires all parties to be effective listeners.³⁴

Effective communication allows everyone involved to express their feelings and voice their opinions without fear of being ridiculed or attacked (verbally or otherwise).³⁵

Active listening skills are critical for developing rapport, respect and trust.³⁴ Rapport is also built between partners by acknowledging, validating and responding to each other's needs.³⁶

Using a strengths-based approach and empowering language is important to develop strong relationships with families.³¹ Families prefer to be called “partners” or simply “families”. Using collaborative terms such as co-learning and co-creating also helps grow trusting relationships and strengths-based partnerships.³¹ For successful collaboration, partners should also work together to develop shared language, free of jargon.³⁷

Regardless of the method, communication in organizational and system processes should start early on and occur consistently throughout the engagement process. Regular communication between families, agencies and system decision makers may help effect a cultural change toward more a more inclusive and productive child and youth mental health system.^{38, 39}

Best practice

- Multiple accessible methods are used to communicate with families and among all partners.

Practical examples:

- Ensure that communication is multi-dimensional. Use different methods such as in-person, written, phone or email; both formal and informal.

- Co-develop a communication plan with families which includes formal and informal modes of communication, stakeholders involved, timing of communication, etc.
- Support families to be fully engaged in conversations.
 - Have a family peer supporter (if available) or a core team member who connects with family members prior to meetings and activities to ensure that they have the information they need and feel equipped to participate in the way they feel most comfortable.
- Use plain language when communicating with families. Limit the use of jargon and acronyms.
- Work with family members to co-develop parts of organizational or community newsletters.
- Be transparent about the level of engagement that families can expect (e.g. co-development, consultations or sending information out). Agree on level of engagement and accountability from all partners involved.



Definitions

communication: the exchange of thoughts, messages or information between people or among a group of people, using spoken languages, body language, tone of voice and gestures. Effective communication occurs when there is a shared understanding; in other words, the message that is received and understood is the same message that was sent.³⁵

Diversity and inclusion



Family engagement practices are inclusive; the diversity of partners is valued, and engagement is representative of the communities served.

What this means for...



Families

Your family structure and ethno-racial, cultural and social identities are respected and embraced. Engagement activities and environments are inclusive, safe and adapted, where required, to meet your needs.



Agencies

You work to understand the ethno-racial and cultural backgrounds of the families you work with and strive to meet their diverse needs. You make focused efforts to build relationships with families from marginalized communities and ensure engagement practices are culturally appropriate.



System decision makers

You make a concerted effort to engage diverse families in creating policies and ensure their contributions are valued and recognized. This is particularly important when working with marginalized and underrepresented populations.

Background and rationale

Mental health care providers often work with families who represent a range of ethno-racial and cultural identities, living circumstances and family structures.⁴⁰ To be successful, diversity initiatives should use an anti-oppressive approach to practice, support staff to understand and recognize diversity and strive for equity.⁴¹ Partners also need to be aware of their own history, experiences and worldviews, and recognize how these might influence the way they engage and develop relationships with families.³³

Service providers should be familiar with a family's background in order to best support and respond to their diverse and unique needs and preferences with culturally appropriate practices.^{42, 43, 44} While speaking a common language or sharing some cultural traditions might help when supporting families, a shared cultural identity between service providers and service users is not critical for ensuring high quality service.⁴⁵ It is, however, important to ensure inclusive and safe environments in which families feel that their identities are respected and valued.³³

Governing bodies that inform child and youth mental health service design, policies and strategies should engage diverse families who are representative of the communities served. This can ensure a rich array of perspectives and reduces the burden on any one family member to represent the range of voices in a community.⁴⁷

Best practices

- Families and partners reflect the diversity of the communities served.

Practical examples:

- When working towards ensuring equitable service access to all families, adopt a systematic approach



It is important to ensure inclusive and safe environments in which families feel that their diverse identities are respected and valued.



(e.g. via focus groups, planning sessions, etc.) to jointly identifying and addressing current and potential barriers within the organization, community or system

- Provide training on AOP to staff, families and volunteers. The training could include:
 - definitions of anti oppression and anti racism in the context of mental health and the community.
 - sources of power and how power imbalances can be addressed.
 - how to develop AOP policies on how the organization will respond should the policies are not be upheld.
- Engage families from marginalized communities in the co-development of an AOP policy for your organization.

Best practices

- All partners adopt an anti-oppressive practice (AOP) lens and actively use this approach to develop diverse and inclusive processes.

Practical examples:

- Create a space where families feel welcome to speak about their identities but are not 'defined' by these identities.
- Provide information and training to staff on cultural differences regarding differing ways of understanding mental health and well-being.
- Work with families to understand who the members of the community are and how they are accessing services for their children within the community.
 - Review your organization's or community's population health data.
 - Identify voices and perspectives that are missing from current conversations.

- Consult with families in the community to better understand their needs and challenges.
- Work with families to find ways to reach out to those made vulnerable by the system (e.g. work with existing local community groups and associations).
- For advisory councils, co-develop a recruitment policy with family members that addresses and monitors diversity and inclusion..



Definitions

anti-oppressive practice: approach that encourages diversity, prioritizes the needs and strengths of marginalized groups and works to transform structures that create inequalities.⁴⁷

culture: shared experiences of people, including their language, values, customs, beliefs, worldviews, ways of knowing, and ways of communicating. Culturally significant factors encompass, but are not limited to, race/ethnicity, religion, social class, language, disability, sexual orientation, age and gender.⁴⁸

culturally appropriate practices: practices that are responsive to the cultural concerns of racial and ethnic minority groups, including their language, histories, traditions, beliefs and values.⁴⁹

diversity: a broad term that refers to the variety of differences among people, often within the context of culture, education, organizations or workplaces.⁵⁰

equity: fairness; creating equal access and opportunities; achieved by removing barriers that prevent access to mental health care or engagement opportunities, particularly barriers related to gender, race, sexual orientation, income, education and many other identities⁷².

inclusion: striving for equity and maintaining a culture where difference within the collective is embraced, respected, accepted and valued;⁵¹ the process of improving the ability, opportunity and dignity of participation for those disadvantaged on the basis of their identity.⁵⁰

Empowerment



All partners share trusting, respectful relationships that enable family experience, expertise and perspectives to be clearly reflected in system planning and improvement efforts.

What this means for...



Families

Partners in the child and youth mental health system value and rely upon your experience, expertise and perspective. They help you to identify your strengths and build your capacity to influence processes and services at the organization and system level.



Agencies

You take a strengths-based approach, valuing families' lived experiences as expertise and empowering them to use that expertise to inform and co-develop services and processes within your organization.



System decision makers

You model empowerment in family engagement processes, identifying existing strengths in partners and helping them to build their capacity to further influence system-level services and processes.

Families must feel confident to express their insights, needs and concerns and see their perspectives used to inform practices within organizations and across the system more broadly.

Background and rationale

Family engagement is an evidence-informed practice recognized by service providers, policy makers and researchers alike as an integral part of the child and youth mental health sector.¹⁰ Family voice impacts system-level

change as families share their perspectives on service infrastructure and policies that affect their children's lives.^{52, 53} As such, families must feel confident to openly express their insights, needs and concerns without fear of undue negative consequences.²¹

This requires agencies, system decision makers and other partners to recognize, respect and value families' strengths, capacities and lived experiences as expertise.⁵⁴

A strengths-based approach values trust, respect, intention and optimism by emphasizing personal relationships, inviting meaningful participation, acknowledging contributions, providing support and ongoing learning opportunities and concentrating on solutions.⁵⁵ Adopting a strengths-based approach helps empower families by focusing on their existing strengths and helping them to build on their best qualities.⁵⁶ This includes reinforcing qualities that enable families to take on leadership roles and participate meaningfully in decision-making processes. As a result, families are better able to share their unique insights to inform practices within organizations and across the system more broadly.^{28,57}



Best practice

- Family perspective and expertise is embedded in system planning efforts.

Practical examples:

- Co-create designated roles for family members to participate and contribute as individuals with 'lived expertise'. This could be as a board member, an advisor or contributor on a specific project or initiative.
- Provide opportunities for family members to increase their capacity to contribute meaningfully by offering opportunities to learn more about how the child and youth mental health system works.



- Ensure that contributions from family members are reflected in all processes and outcomes (e.g. consulting on system planning work.)
 - If some contributions are not used, reflect this back to family members and explain why not.
- Look for opportunities where family members can play a leadership role within the community or organization (e.g. co-lead a system planning working group).
- Provide joint training for staff and families on the inclusion of family voice and collaboration with family members.

Definitions

empowerment: the process of enhancing the capacities or abilities of individuals to influence or make informed choices and to transform those choices into desired actions and outcomes.⁵⁸

strengths-based approach: an attitude and way of working that focuses more on individuals' internal strengths and resourcefulness and less on weaknesses, failures and shortcomings; putting the spotlight on opportunities, hope and solutions, enabling a positive mindset that helps those involved to build on their best qualities and develop reasonable expectations of self and others.⁵⁶

Ongoing Learning



All partners, including families, have a shared understanding of the philosophy and practice of family engagement and have accessible, ongoing learning opportunities.

What this means for...



Families

You are provided with accessible learning opportunities (during times and in places and ways that make sense for you) to acquire tools, knowledge and skills to be able to engage and partner more effectively at the agency or system level. You can also count on your partners to continually improve their engagement knowledge and skills through ongoing learning opportunities.



Agencies

Your organization supports ongoing learning opportunities for both staff and the families with whom you partner. You work to continually build families' knowledge and skills through modalities that make sense for them.



System decision makers

You make sure all partners, including families, know what skills and knowledge are needed to engage at the system level and you work toward building the necessary preparation into system-level processes.

Background and rationale

The practice of family engagement requires ongoing learning opportunities to increase the knowledge and skills of families, organizational staff and system-level decision

Depending on previous experience, all partners may require preparation and orientation to the philosophy and practices of family engagement. All partners should be provided ongoing training and learning opportunities.

makers alike. Depending on previous experience, all partners may require preparation and orientation to the philosophy and practices of family engagement.

Training and coaching opportunities should be made available to family members who want to become engaged, yet lack specific skill sets, or want to improve in certain areas, like preparing for governance meetings or learning about research and evaluation.⁵⁹ Capacity building for partners can focus on emphasizing strengths-based work with families and exploring ways to engage families.⁶⁰

In addition to being provided on an ongoing basis, learning and training opportunities should model engagement.⁵⁹ For example, those providing learning opportunities might co-develop content with families to ensure that their perspectives, knowledge and lived experiences are reflected.⁵⁹ It is also helpful to work with families to understand and support their readiness to engage, by discussing expectations, goals and options for engagement.⁴⁴

Not all families have the desire or capacity to become engaged in leadership activities. Partners need to be mindful of this and have open conversations with families about their interests.²⁸ For example, family members currently attending to their child's mental health needs may need to dedicate more energy to those pressing personal needs while those further along in their journey in mental health may be better positioned to become strong trainers, mentors, coaches and leaders.²⁹ In any case, families need to decide for themselves their appropriate level of engagement.

Best practices

- All partners are well prepared to participate in all activities and processes, including decision-making. Namely, they are aware of, and knowledgeable about, family engagement policies and practices and other relevant topics.

Practical examples:

- Work with family members to identify their skills and knowledge needs and provide opportunities to increase their individual capacity (whether in family engagement or other areas that your organization or community can support). Examples include mentoring opportunities, shadowing staff, attending workshops, etc.
- Provide joint training for staff and families on the inclusion of family voice, collaboration with family members and empowerment.
- Have a family peer supporter (if available) or a core team member connect with family members prior to meetings and activities to ensure that they have the information they need and feel equipped to participate in the way they feel most comfortable
- Co-develop family engagement policies with family members who are engaged in your work.
- Set realistic timelines that allow for the development of new skills, while ensuring family members can see the project through to completion.

Best practices

- Families inform the environment, format and content of learning opportunities to ensure that such opportunities best facilitate their ongoing growth and learning.

Practical examples:

- Work with families to develop a coaching or mentoring program to help onboard family members who are new to engaging with the agency, committee, etc.
- Make training opportunities available to family members who want to become engaged, but who require specific skills or want to build knowledge in certain areas (e.g. a family member that is involved in an evaluation project may need capacity building in evaluation).





- Consider embracing family-led activities when providing training to families (e.g. include family members as co-facilitators for trainings, workshops, etc.).
- Ensure family members are aware of, and have access to, learning materials on family engagement and other topics that are relevant to their engagement as a family member.

Definitions

learning opportunities: coaching, training or other learning events supporting the pursuit of knowledge and skills to achieve a goal; building on strengths among individuals, organizations and communities.⁶²

Partnership



Families are essential partners, collaborating in decision-making processes.

What this means for...



Families

You are a partner in decision-making processes, and you are given opportunities to build successful relationships with other partners. Your expertise is valued, and you are aware of how your expertise is reflected in final decisions.



Agencies

You value families as partners and work to build successful relationships, avoiding tokenism and offering a range of engagement options in decision-making processes. You are transparent, ensuring families understand how decisions are being made and how their expertise is being integrated.



System decision makers

You collaborate with families when developing policies that impact them. You value their expertise and make sure their perspective is included in decision-making processes. You are transparent, ensuring families understand how decisions are being made and how their expertise is being integrated.

Background and rationale

Family engagement is rooted in authentic, collaborative and respectful relationships among families, service

providers, policy makers and other partners.^{31,62} This represents a clear departure from traditional stigmatizing paradigms blaming families for the mental health problems of their children or excluding them from organizational and system-level decision-making. Building successful relationships with families also requires meaningful engagement without tokenism, which is one of the most significant barriers to fostering trust, mutual appreciation and productive partnerships with families.³¹ As such, it is important to engage families in ways that are empowering and in roles that offer a range of opportunities for worthwhile contributions.⁶³

The evidence-informed practice of family engagement demonstrates that families have valuable skills, lived experiences, knowledge and expertise to contribute to system planning, program development, implementation and evaluation of child and youth mental health services.⁶⁴ Accordingly, families must be empowered as essential partners in decision-making at all stages of a project or process. Leaders need to share power and give up some authority, so families can have a louder voice than traditional dynamics have allowed.^{31,62}

Best practices

- Families and partners build and maintain mutually beneficial trust-based relationships that are evident in their interactions. All partners acknowledge differences in power and position and strive to challenge the processes and habits that uphold these differences.
- Families are actively engaged in decision-making roles.
- All partners work together to establish clear expectations about what family partnership looks like at all levels of decision making.

Organizational and system leaders need to share power and give up some authority, so families can have a louder voice than traditional dynamics have allowed.

Practical examples:

- Work with family members to ensure they feel well oriented, prepared and supported to participate.
- Offer to meet with family members separately before bringing them together in larger meetings.
- Create space for both formal and informal check-ins (e.g. before or after meetings).
- Create regular opportunities within your workplan for individuals to name and have conversations about the potential power dynamics.
- Agree on respectful terminology by referring to families as *your partners* or *families* rather than as *patients* or *clients*.



Best practices

Practical examples:

- Ensure that families are equally and equitably represented and act as active partners in taskforces, workgroups or councils that inform challenges, opportunities and trends within your community or organization.
- Be clear on expectations for how and when family members will end their engagement role or transition through their roles and responsibilities (e.g. develop an exit plan) in the organization or community.
- Be transparent about the type of engagement (e.g. co-develop, consult, inform) being considered for specific activities and how those decisions are being made.
- Be transparent when family input was not used or incorporated.



Definitions

collaboration: an interactive process among individuals and organizations with diverse expertise and resources, joining together to devise and execute plans for common goals as well as to generate solutions for complex problems.⁶⁵

decision-making: process of collecting information, establishing selection criteria, developing possible alternatives or options and evaluating the most appropriate option based on selection criteria.⁶⁶

partnership: collaborative relationship between two or more people. People or organizations in a partnership collaborate to advance their mutual interests. A partnership involves sharing individual skills and resources, while working together toward a common goal.⁶⁷

tokenism: the practice of making only a symbolic effort; trivial engagement of underrepresented groups.¹⁶

Research and evaluation



Families and partners jointly research, evaluate and make ongoing quality improvements in all aspects of system planning.

What this means for...



Families

You are a partner in developing and carrying out program, organizational and/or system-level research and evaluation activities.



Agencies

You work side by side with families to develop and carry out research and evaluation activities at the program, organizational and/or system level, including ongoing evaluation and improvement of family engagement practices.



System decision makers

You regularly and frequently engage families, working jointly to develop and carry out system-level research, evaluation and improvement efforts.

Background and rationale

Family engagement requires ongoing reflection, monitoring, research and evaluation to ensure that services are meeting families' needs and engagement efforts are working.²⁷ Engaging families at all stages of research and evaluation processes helps ensure that the process and outcomes are relevant, meaningful and user-friendly for all involved.⁶¹

In program evaluation, families should have the opportunity to participate in the development of user-friendly surveys



and other research instruments, co-facilitate focus groups and interview participants.⁶⁸ Families can also help interpret, disseminate and present findings.⁶¹ They can offer qualitative insights into the link between evaluation data and services and help improve the tone of messaging to give the findings more real-world relevance and application, especially for the general public.^{21,62} Families can also help increase the impact of findings by presenting them from their own perspectives in conferences, symposia and educational workshops.⁶¹

While engagement efforts have been studied in clinical settings like hospitals, where the environment is highly controlled,⁶⁹ few research studies have looked at engagement in more diverse community-based settings.⁶² This lack of research in the field of family engagement presents an opportunity for organizations to evaluate their own family engagement efforts and add to the body of knowledge for family engagement. Family engagement efforts at the agency-level and the system-level also need to be researched and evaluated more often and more consistently.²⁸

Best practices

- Families are co-developers and co-evaluators of research and evaluation processes (e.g. design, implementation, analysis, dissemination and mobilization).

Practical examples:

- Provide access to training and ongoing learning opportunities about research and evaluation strategies to staff and family members to ensure that both can contribute at the same level.
- Identify the types of evaluation and research approaches that are most relevant (e.g. participatory

Engaging families at all stages of research and evaluation processes helps ensure that the process and outcomes are relevant, meaningful and user-friendly for all involved.

action research, developmental evaluation, etc.) to engaging families.

- Provide informal capacity building opportunities by providing opportunities for family members to attend evaluation meetings.
- Work with family members to inform them why evaluation and research are important within the child and youth mental health sector (e.g. link evaluation and research to youth and family outcomes).



Best practices

- Families actively contribute to ongoing improvements to engagement activities or processes.

Practical examples:

- Inform families about the activities and responsibilities involved in the overall process of research and evaluation and, together, find places and ways for them to be involved. Family members can:
 - help define the problem or evaluation focus.
 - co-develop the evaluation framework or logic model (including activities and outcomes).
 - co-develop evaluation tools such as surveys.
 - facilitate focus groups.
 - co-interpret evaluation and research results.
 - co-present findings to organizational or community stakeholders and other families.
 - co-present at conferences or workshops.
- Set realistic timelines that allow the development of new skills, while ensuring family members can see the project from beginning to end.



Definitions

evaluation: systematic collection and analysis of information to understand whether a project, service or process is doing what it was intended to do and how well (or not) it is doing so.⁷⁰

quality improvement: systematic approach to making changes that lead to better patient [client] outcomes and stronger health system performance. This approach involves the application of quality improvement (QI) science, which provides a robust structure, tools and processes to assess and accelerate efforts for the testing, implementation and spread of QI practices.²¹

research: process of creating new knowledge or the use of existing knowledge in a new and creative way to generate new concepts, methodologies and understandings. This includes synthesis and analysis of previous research to the extent that it leads to new and creative outcomes.⁷¹

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Appendices

Appendix A: Family engagement advisory group

- Brandi Gowan, Family Engagement Specialist, Parents for Children's Mental Health
- Carrie Bullard, Community Engagement Lead, Central Access Project, St. Joseph's Healthcare Hamilton
- Louise Murray-Leung, Family Engagement Lead, Lynwood Charlton Centre
- Mamta Chail-Teves, Executive Director, Wellkin Child & Youth Mental Wellness
- Natalie Markoff, Family member
- Sarah Cannon, Executive Director, Parents for Children's Mental Health
- Vicki Cochrane, Family member
- Vicki Mowat, former Senior Director of Planning and Research, Kinark Child and Family Services

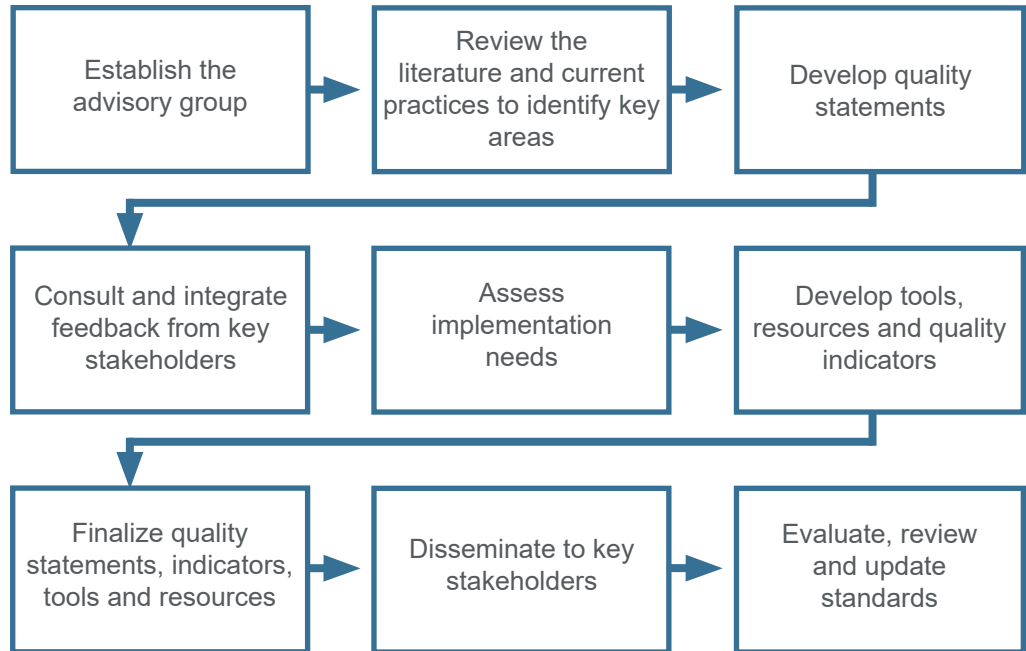
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- Evangeline Danseco, Performance Measurement Coach
- Huma Muhammadi, Research Assistant
- Jana Kocourek, Manager, Engagement and standards
- Julie Breau, Quality Improvement Specialist
- Kamill Santafe, Youth Advisor
- Kristina Rohde, Quality Improvement Specialist
- Marta Krygier-Bartz, Research Assistant

- MaryAnn Notarianni, Director, Special Projects and Operations
- Melissa Edwards, Research Coordinator
- Shruti Patel, Program Associate
- Tracey MacLaurin, Project Coordinator

Appendix B: Standard development process

To develop this quality standard, the Centre adapted the process from Health Quality Ontario's quality standards process and methods guide.¹⁵ The major steps are outlined below.



Appendix C: Glossary

accessible: activities (including communication and processes), products (such as devices) and environments that are designed to be easy to understand, use, participate or access, especially for people who face barriers.

active listening: paying close attention to a conversational partner's words, repeating back key ideas and phrases from time to time to confirm one's understanding of what the person has said. Demonstrates respect for — though not necessarily agreement with — the other person's feelings and views.

anti-oppressive practice (AOP): approach that encourages diversity, prioritizes the needs and strengths of marginalized groups and works to transform structures that create inequalities.

barrier: a circumstance or obstacle that separates people from other people, places or things. Barriers come in many forms — including attitudes, policies and programs, as well as physical, social, communication or transportation obstacles — and may even be unintentional.

co-development: process of working collaboratively on a shared purpose; joint decision-making; a commitment to action and collective accountability among all stakeholders.

collaboration: an interactive process among individuals and organizations with diverse expertise and resources, joining together to devise and execute plans for common goals as well as to generate solutions for complex problems.

commitment: willingness to persist in a course of action, often owing to a sense of obligation to stay the course; the state or quality of being dedicated to a cause, activity, etc.

communication: the exchange of thoughts, messages or information between people or among a group of people,

using spoken languages, body language, tone of voice and gestures. Effective communication occurs when there is a shared understanding; in other words, the message that is received and understood is the same message that was sent.

culture: shared experiences of people, including their language, values, customs, beliefs, worldviews, ways of knowing and ways of communicating. Culturally significant factors encompass, but are not limited to, race/ethnicity, religion, social class, language, disability, sexual orientation, age and gender.

culturally appropriate practices: practices that are responsive to the cultural concerns of racial and ethnic minority groups, including their language, histories, traditions, beliefs and values.

decision-making: process of collecting information, establishing selection criteria, developing possible alternatives or options and evaluating the most appropriate option based on selection criteria.

diversity: a broad term that refers to the variety of differences among people, often within the context of culture, education, organizations or workplaces.

empowerment: the process of enhancing the capacities or abilities of individuals to influence or make informed choices and to transform those choices into desired actions and outcomes.

equity: fairness; creating equal access and opportunities; achieved by removing barriers that prevent access to mental health care or engagement opportunities, particularly barriers related to gender, race, sexual orientation, income, education and many other identities.

evaluation: systematic collection and analysis of information to understand whether a project, service or process is doing what it was intended to do and how well (or not) it is doing so.

evidence-informed: practices and decision-making processes that 1) recognize clinical and practitioner knowledge and expertise and the lived experience of children, youth and families as evidence, alongside academic or research evidence and; 2) systematically search, select, appraise and use all the best available evidence to deliver measurable benefits.

family: a circle of care and support that offers enduring commitment to care for one another, and is made up of individuals related biologically, emotionally, culturally or legally. This includes those who the person receiving care identifies as significant to their well-being.

family engagement: an ongoing process that includes families as active decision makers and partners at the organizational and system levels.

inclusion: striving for equity and maintaining a culture where difference within the collective is embraced, respected, accepted and valued; the process of improving the ability, opportunity and dignity of participation for those disadvantaged on the basis of their identity.

inclusive: see inclusion.

learning opportunities: coaching, training or other learning events supporting the pursuit of knowledge and skills to achieve a goal; building on strengths among individuals, organizations and communities.

partnership: collaborative relationship between two or more people. People or organizations in a partnership collaborate to advance their mutual interests. A partnership involves sharing individual skills and resources, while working together toward a common goal.

quality improvement: systematic approach to making changes that lead to better patient [client] outcomes and stronger health system performance. This approach involves the application of quality improvement (QI) science, which provides a robust structure, tools and

processes to assess and accelerate efforts for the testing, implementation and spread of QI practices.


research: process of creating new knowledge or the use of existing knowledge in a new and creative way to generate new concepts, methodologies and understandings. This includes synthesis and analysis of previous research to the extent that it leads to new and creative outcomes.

resources: the supply of money, materials, staff, physical facilities, attributes, capabilities and other available assets that can be used to support processes and activities.

strengths-based approach: an attitude and way of working that focuses more on individuals' internal strengths and resourcefulness and less on weaknesses, failures and shortcomings; putting the spotlight on opportunities, hope and solutions, enabling a positive mindset that helps those involved to build on their best qualities and develop reasonable expectations of self and others.

tokenism: the practice of making only a symbolic effort; trivial engagement of underrepresented groups.

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695 Industrial Avenue, Ottawa Ontario
Canada K1G 0Z1



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