# Shared Commitment 1: Engagement and leadership priorities for individuals, families and carers

#### Shared commitment 1 seeks to achieve:

- meaningful opportunities for individuals, families and carers to participate as equal partners in the co-design, planning, monitoring and evaluation of mental health, drug and alcohol services and in all levels of policy development
- *individuals, families and carers who are informed, equipped and empowered to voice their perspectives, particularly in relation to their rights.*

## Actions

### Mapping consumer, family and carer engagement and leadership in Queensland

In February 2017, the Commission released the results of an engagement mapping project undertaken by Urbis which sought to measure the level, type, and range of engagement activities with service users, consumers, family and carers across Queensland's government, non-government and private mental health and alcohol and other drug sectors.

Urbis commenced the project by undertaking stakeholder consultations with 38 participants, including people with a lived experience, families, carers and support people as well as representatives from policy, funding and peak organisations, and service delivery organisations. Sixty-three services then completed an online survey. The project did not provide a definitive map or audit of engagement practice. It did find that stakeholders view engagement activities as providing a genuine opportunity to drive change. Importantly, the engagement process needs to be specific, focused and part of an ongoing dialogue.

Services that responded to the survey identified that engagement could have an impact at both the strategic and the operational levels of service delivery; however, engagement most commonly occurred to support people in their recovery journey and to seek feedback on service delivery. The findings also showed that engagement processes for these services are still in their developmental stages.

### Stretch2Engage: Draft best practice principles for consumers, families and carer engagement

The Commission engaged a consortia led by the Queensland Alliance for Mental Health including the Queensland Network of Alcohol and Other Drug Agencies and Enlightened Consultants to develop best practice principles for engaging service users in the design and delivery of mental health and alcohol and other drug services.

The principles are included in the *Stretch2Engage Service Engagement Framework for Mental Health and Alcohol and Other Drug Services* (Stretch2Engage), which was published by the Commission in February 2017. Following extensive research and consultation undertaken by the consortia, Stretch2Engage provides a framework for use by government, non-government and private mental health and alcohol and other drug services. It aims to guide efforts to increase and improve engagement of people with a lived experience, their family and carers.

The Stretch2Engage Framework is founded on values which acknowledge engagement of people with a lived experience, their families and carers as a human right fundamental to citizenship. This sees engagement as being important in its own right while acknowledging the benefits to services who engage effectively.

### Meaningful engagement: Barrett Commission of Inquiry

The Queensland Health approach to implementing the Government Response to the Barrett Commission of Inquiry (the Inquiry) was built on a government commitment to transparency and meaningful engagement of people with a lived experience, their family and carers, including those associated with the former Barrett Adolescent Centre, at every stage. This began at a structural/governance level with consumer and carer representatives included on the overarching Steering Committee which oversaw implementation of the Government Response to the Inquiry's recommendations. In this capacity they had access to and reviewed all reports and documentation.

Each of the six recommendations also provided opportunities for engagement and participation of young people with a lived experience and their families in a more specific way. For example, their involvement in workshops to inform development of the Model of Service for the new Adolescent Extended Treatment Facility (Recommendation 4) and then review of the preliminary Model of Service was critical in ensuring a lived experience perspective was embedded in the documentation. Health Consumers Queensland played an important role in recruiting a range of consumers and carers to be involved in these areas of work and supported them throughout.

Key documents, implementation updates and a consultation opportunity were all published on the Queensland Government Youth Mental Health website to maximise transparency and provide an opportunity for the public to be informed about the implementation without having to be directly involved or identified.

Finally, a series of 12 Youth Mental Health Forums were held during May and June 2017 across Queensland. The Queensland Department of Health in conjunction with Health Consumers Queensland and the Department of Education and Training visited regional areas across Queensland accompanied at each site by a consumer or carer representative. These visits were undertaken to update and offer the opportunity for further input into the implementation of the government response and future development of services for young people with severe and complex mental health needs.