Emerging Minds.

National Workforce Centre for Child Mental Health

Case study: Establishing authentic child and family collaboration partnerships in Wesley Mission Queensland's O-12 years mental health service

Aboriginal and Torres Strait Islander peoples should be aware that this resource may contain images or names of people who have passed away.

1. Introduction

This case study examines a partnership between Emerging Minds and Wesley Mission Queensland (WMQ) that supported WMQ to incorporate the lived experiences of children and families in the development of a new O-12 years mental health¹ service (Wesley Kids).

Emerging Minds seeks to partner with organisations around Australia as part of its strategy to support system-wide implementation of improved child mental health practices. In October 2020 WMQ made contact with Emerging Minds seeking guidance on best practice co-design processes to ensure its programs meet the social and emotional wellbeing of children O-12 years. The initiative was delivered through in-kind support by staff at Emerging Minds and WMQ, and some additional funding from WMQ.



2. Initative description and objectives

This initiative comprised two components:

- ad hoc support from Emerging Minds as a 'critical friend'; and
- the <u>Child and Family Partnership Toolkit (CaFP</u> <u>Toolkit)</u> developed by Emerging Minds for organisations implementing partnerships with lived experience advisors.

The initiative aimed to support WMQ in achieving the following objectives:

- Incorporate children's voices in the design and delivery of the Wesley Kids service
- Re-align WMQ practices with current evidence based best practice on co-design with children in the O-12 years age range
- Establish authentic partnerships that contribute to quality programs and bring value to participants; and
- Create child and family friendly physical spaces in the new service that meet the needs of the community.

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^{1.} An ecological approach to children's mental health recognises the influence of social, biological, psychological, economic and environmental factors in children's lives, including social determinants of health and exposure to adversity. The mental health of a child can move across a continuum of wellbeing, from well, to coping, to struggling, to unwell. (National Childrens Mental Health and Wellbeing Strategy, National Mental Health Commission, 2021.)

So, engaging Emerging Minds was really around how do we do that properly and well, and in a way that it's genuine and not tokenistic.

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(a) Emerging Minds-WMQ partnership

The Emerging Minds-WMQ partnership has been carried out through a series of face-to-face and online meetings and email exchanges since November 2020 and remains open for further communication where needed.

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We got involved with Emerging Minds really early on to see what kind of relationship we might be able to have with them. And it morphed into, I think what we ended up calling, 'a critical friend' in terms of talking through what our model was looking like, how that might translate to practice, how we might do co-design or customer advisory groups ... what that could look like.

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(b) Child and family partnerships toolkit

Early in the partnership, the Emerging Minds team suggested that the CaFP toolkit could be a useful resource for WMQ in its implementation of lived experience partnerships for Wesley Kids. Following review of the toolkit, WMQ determined that it was well-suited to its needs and sought to implement the step-by-step guide.

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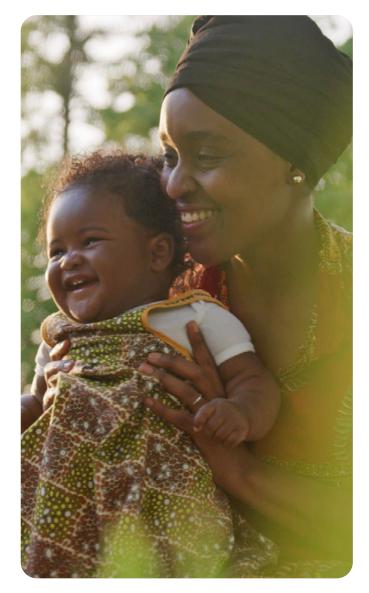
'It fitted the model that we have developed around Wesley Kids ... It was quite practical, so it was easy for us to take that and implement it.

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3. Outcomes

Interviewees identified a number of process outcomes that have resulted from this initiative, including using the CaFP Toolkit to guide partnering and co-design processes, conducting age-appropriate focus groups with children and parents/carers on the initial development of the Wesley Kids service, and establishing two ongoing lived experience advisory groups to inform Wesley Kids program development and quality improvement. These process outcomes have led to subsequent impact outcomes including substantial changes to Wesley Kids physical spaces and the development of new Wesley Kids programs to respond to needs identified by children and families.

Process and impact outcomes are summarised on the following page.



Process outcomes	
a) Wesley Kids' program manager used the CaFP Toolkit to guide their partnering and co-design processes with children and families.	'I think it met our needs and yes, I don't know that we would have got to where we got to, but it would've taken longer and we would've spent a lot more time doing research and trying to gather that information ourselves rather than having the toolkit we could go to.' WMQ 5
 b) Three focus groups held to inform the development of the Wesley Kids service: Parents/carers Children 0–5 years with parents in attendance; and Children aged 6–13 years. 	'The statement that we used was: "The purpose of these focus group discussions is to gain meaningful feedback, insight, and opinions on child and family mental health service provision from parents and children in the local community. This information gathered will be used to inform the growth and development of Wesley Kids." WMQ 4
 c) Two lived experience advisory groups established and sustained: Parents/Carers Children 8–12 years. 	'Those ongoing advisory groups were a way to create that feedback loop and keep people involved so that it wasn't just a token, one-off kind of exercise.' WMQ 4
Impact outcomes	
d) Physical spaces have been made more welcoming and suitable for families, including Aboriginal and Torres Strait Islander families, based on suggestions from children and parents.	'Another tangible example would be we used to just have some chairs in front of reception And that was the waiting space. And we had feedback from children and from carers that they really didn't like that as the waiting space it was really public but also it was really hard for them to distract and entertain children in that space while they were waiting for an appointment. So we converted an office into a waiting room. So, now families and children can come through to the waiting room, which has got toys and books and different size chairs' WMQ 5
e) New Wesley Kids programs have been designed in response to specific needs identified by advisory groups and the community.	'We've been able to actually design therapeutic groups based on needs that our advisory groups have identified. So for example, we were hearing a lot from parents and from kids about there's just so many kids experiencing increased anxiety. So, we designed a group for kids just to teach them about anxiety and strategies they can use, and give them that peer support.' WMQ 4
f) Children and family advisors feel safe and valued by WMQ.	'And all of the outcomes we got back were really positive and reaffirmed that we had achieved what we'd set out to in terms of making people feel really valued and safe and respected.' WMQ 4
g) Wesley Kids has established a positive reputation in the Gold Coast community.	'We've built a really nice and strong community on the Gold Coast of families and children and other key stakeholders. We've got a really positive reputation in the community.' WMQ 4

4. Context

External context

WMQ's decision to establish the Wesley Kids mental health service was a response to the lack of mental health services for children O–12 years on the Gold Coast and the challenges for families in finding mental health support for children. WMQ committed to resourcing a O–12 years service without initial government funding to address this service gap in the hope that government would eventually provide funding support.

In seeking to partner with children and families on the design of the new service, WMQ found little guidance available on partnering with children in the O-12 years age bracket.

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We looked around to see who else was doing co-design and consultation with under 12-year-olds and we really couldn't find a lot of information. There wasn't a lot of research; there wasn't a lot of practice happening.

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Internal context

WMQ embarked on its commitment to partnering with children and families in the context of a number of favourable conditions within its organisational environment.

a) Values and purpose

WMQ's organisational values and purpose were instrumental in motivating WMQ to seek out the views of children and families in designing the new Wesley Kids service. The stated values of WMQ are: respect for the person, integrity, compassion, justice, empowerment and innovation. These values guided not only WMQ's decision to use the CaFP toolkit, but also the manner in which it carried out the activities recommended by the toolkit.

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And I think those values really underpin the toolkit as well. It's all about empowering people, respecting them, making sure they're looked after, being transparent. So I think the values just aligned perfectly.

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b) Authorising environment

A notable contextual factor in this case study is the very strong authorising environment at WMQ, with commitment to partnering with children and families ranging across implementing staff up to board members. This whole-of-organisation commitment is operationalised through a number of organisational instruments including a draft customer participation framework, a practice framework for mental health services, a strategic plan and the inclusion of child and family partnerships in the position description and key performance indicators of the Wesley Kids program manager.

This environment enabled the Wesley Kids program manager to establish processes that support child and family partnerships across multiple levels in the organisations as recommended by the CaFP toolkit.

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For lived experience partnerships to be successful, you need lots of cogs in the machine to be working together ... the toolkit ... speaks to those different cogs

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The environment also gave Wesley Kids authority and support to respond to the improvement suggestions that came from children and families, as far as possible and within budgetary constraints.

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I think the fact that they had leadership support and endorsement to go ahead with this gave them permission to be able to seek to improve the service in ways that really maximised the outcomes for children and families.

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c) Existing capabilities

WMQ staff had a range of existing skills and capabilities that Emerging Minds staff identified as helpful to WMQ in progressing this initiative.

The Wesley Kids program manager and clinicians were experienced mental health clinicians with skills in engaging children and families including using hands-on creative and play-based activities. WMQ has experience in running youth mental health services and also has experience in employing an adult lived experience workforce. However, partnering with children aged O-12 years and parents/carers as lived experience advisors was a new experience for the organisation.

Emerging Minds staff were of the view that a learning and improvement mindset motivated WMQ to seek out external expertise to strengthen their existing capabilities.

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... a characteristic that's been a positive influence is the ability to be vulnerable enough as a service to open yourself up to other people. Because I think that takes a lot of trust and a lot of courage and vulnerability to say, "Can you have a look at what we're doing?" ... And I think that is a huge enabling factor for any organisation or service looking to make change...

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... we certainly saw Emerging Minds as being the expert in the field around mental health and engaging children and their carers in feedback and consultation ... the reputation of Emerging Minds made it trusted for us.

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d) New service opportunity

Developing a service model for the new Wesley Kids service provided WMQ with an opportunity to involve children and families in service design from the outset. There was a strong desire from WMQ to take the time to properly plan and implement evidence based best practice collaboration processes that would bring value to the service and participants. ... because we were creating a brand new mental health service, we knew there was a need, but we wanted to really speak to the families who would be using our service. So, we wanted to know not only what they needed, but how they would best feel supported. And we wanted to get children and families involved right from the beginning. So, it was a really incredible opportunity for us to do that.

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e) Funding and resourcing

The funding situation for Wesley Kids is unusual due to WMQ committing to establishing the service without initial government funding. The service is resourced by WMQ on a year-to-year basis using existing WMQ mental health staff and by finding small amounts of WMQ funding for advisory groups, running events, children's toys and activities, and capital improvements.

While this brings a high degree of uncertainty for the program's future, it has also given Wesley Kids the flexibility to respond to community needs with new programs, for instance on anxiety, suicide and grief, that may not have been within the scope of a government-funded service. Funded service scope is commonly identified by organisations as a barrier to practice and program changes, and innovations to better respond to children's and families' needs.

5. Mechanisms of change

In this case study, the mechanisms of change describe the ways WMQ staff, and to a lesser extent, WMQ child and family partners, have responded to this initiative (the relationship with Emerging Minds and using the CaFP toolkit). The change processes outlined below appear to have been instrumental to the achievement of initiative outcomes. The mechanisms of change were generated by grouping themes identified in the qualitative analysis, interpreting the relationships between the themes in each group, and consolidating these themes into two key mechanisms of change.

a) Confidence: The CaFP toolkit and relationship with Emerging Minds provided WMQ with confidence that its partnerships with children and families were safe and of value

The WMQ staff were highly motivated to ensure their partnering processes were evidence-based and likely to lead to safe and genuine collaboration. WMQ chose to use the CaFP toolkit in its entirety, working step-by-step from start to finish as a way of ensuring it followed a comprehensive process. In following the practical steps and using the checklists, WMQ addressed a wide range of planning, policy and implementation considerations including duty of care to advisory group participants, induction processes, remunerating participants, considering power imbalances and evaluating the experiences of advisory group participants.

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... I used it right from the planning stage through to the evaluation stage.

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By following the logic of the toolkit and seeking feedback or guidance from time to time from the Emerging Minds team, WMQ had the confidence to apply the advice in its own setting. They were able to leverage existing skills and also took confidence from the toolkit's advice that it can be helpful to start with 'small steps'.

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I think for us it was just really a guide to make sure that we covered everything ... So, I used the checklists and the templates because we just really wanted to make sure our process was comprehensive, holistic and best practice that really safeguarded the wellbeing of all the participants.

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... they had skills in engagement ... the toolkit really gave them the confidence that they were doing the process the right way, so they knew how to create situations where they could engage in a developmentally appropriate way with children and an appropriate way with parents. It gave them that sense that they were on the right track...

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b) Integrity: The intent with which WMQ engaged children and families has resulted in responsive service design and improvement

WMQ staff describe being genuinely curious and excited about hearing the thoughts and ideas of children and families. There was a view from WMO interviewees that the service would be better if children and families were listened to. There was also an appreciation that many of the service's participants would have had past experiences where their views were not taken into account and the harm this can do, particularly when building relationships with children. Having experience in mental health, and in working with adult lived experience staff, WMQ were aware that simple compliance was not sufficient for building authentic relationships that benefit services and participants. Emerging Minds staff observed that WMQ's organisational values and commitment to lived experience partnering led to a high degree of purpose and integrity in how they established and conducted partnerships.

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... their really intentional, evidencebased way of working and their general desire to really have positive outcomes for their client group and their region.

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Consistent with the advice of the toolkit, and also WMQ's own values, WMQ used clear, respectful and transparent communication when engaging with children and families. Children and families were advised of the purpose of each interaction. Wesley Kids staff also kept advisory groups informed of the progress of their ideas and suggestions, and consistent and transparent messages were developed in relation to limitations on what could be changed or achieved. ... we made sure to let people know that we would implement ideas and feedback, but obviously there was no guarantee that we could cater for everybody's ideas and advice.

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WMQ was also respectful of the time and financial impositions on advisory group members, and recognised children and families for the valuable contribution they were making to the organisation. Where possible, Wesley Kids has demonstrated responsiveness to the views of advisory group members, as well as other children and families in the broader community, on a range of smaller and larger topics. Wesley Kids continues to make significant service improvements and innovations directly informed by its child and family partners.

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So, I think definitely use the toolkit and I think align it to a purpose. Don't do it because you think it's the right thing to do. Do it because you genuinely believe is that you need to hear that voice and that that voice needs to be informing service design and delivery.

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6. Challenges

Despite the favourable conditions and sound process, WMQ has encountered challenges. The key challenge has been accommodating the busy lives that children and families lead and finding times that families can be available to participate in advisory forums. After trialling different arrangements and times of the day and week, WMQ has found that running children's advisory group workshops during school holidays works best for children and parents. The parents/carers advisory group meets once a quarter with a blend of face-to-face and virtual meetings.

The lack of government funding is a fundamental challenge for the Wesley Kids service as a whole which leaves the service unable to plan beyond one year at a time. Other challenges have been finding the best way to compensate families for their time, setting expectations around what the advisory groups can influence and change, and recruiting sufficient numbers of advisory group members, including members with diverse backgrounds and experiences. In navigating these challenges, WMQ has been guided by its values and commitment to persist and adapt when necessary.

7. Limitations

This case study has relied on WMQ staff for reporting outcomes that have resulted from the initiative. No access was available to experience data from children and parent/carer advisors, nor was access available to any Wesley Kids service data, including client satisfaction data.

8. Conclusions and implications

WMQ's use of Emerging Minds 'critical friend' support and the CaFP toolkit have resulted in collaborative partnerships with children and families that are informing the design and delivery of Wesley Kids programs. There were a large number of favourable organisational factors that enabled WMQ's implementation of the CaFP toolkit. Organisational values including respect, integrity and empowerment, and a whole-of-organisation commitment to lived experience partnering, were identified as especially instrumental to establishing and sustaining authentic partnerships. Important mechanisms for driving the implementation of child and family partnerships were WMQ's confidence in the evidence-informed process of the CaFP toolkit, and the integrity with which WMQ applied the toolkit in its own setting, demonstrating responsiveness to children's and parents'/carers' views and needs.

This case study indicates that following an evidence based process with integrity and purpose, within a supportive organisation, and with additional ad hoc implementation support when required, could be enablers for authentic child and family lived experience partnering in other organisations and contexts.

This case study was produced by:



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