

## C.07 Client/Carer/Community Involvement in Service/Organisation Planning/Delivery/Evaluation

### 1.0 INTRODUCTION/BACKGROUND

Mercy Services recognises that positive outcomes for consumers require both involving clients/carers/community in service delivery and involving them in organisational planning/delivery/evaluation at an organisational level. Involvement of clients and carers in organisational planning/delivery/evaluation is also a way of expressing our values which see them as people with skills, knowledge, strengths and an inherent dignity.

There are various levels of involving external stakeholders in an organisation. Below is a table adapted from Health Canada's widely accepted understanding and use of the levels of community engagement (Gregory 2006:8):

Level	Purpose	When useful
1 Low level of public involvement and influence	Inform or educate	<input checked="" type="checkbox"/> When factual information is needed to describe a policy/program/process <input checked="" type="checkbox"/> When a decision has already been made <input checked="" type="checkbox"/> When there's no opportunity to influence the outcome <input checked="" type="checkbox"/> If the issue is simple <input checked="" type="checkbox"/> In a crisis
2	Gather information	<input checked="" type="checkbox"/> When the purpose is to listen <input checked="" type="checkbox"/> When policy is being shaped <input checked="" type="checkbox"/> When there is no firm commitment to do anything
3. Mid level of public involvement and influence	Discuss	<input checked="" type="checkbox"/> When a two-way information exchange is needed <input checked="" type="checkbox"/> When people have an interest in an issue and are likely to be affected by the outcome <input checked="" type="checkbox"/> When there's an opportunity to influence the outcome <input checked="" type="checkbox"/> When input may shape the policy
4	Engage	<input checked="" type="checkbox"/> When Mercy Services needs to discuss complex issues with clients and other people <input checked="" type="checkbox"/> When there's a capacity to shape policies <input checked="" type="checkbox"/> When there's an opportunity for shared agenda-setting and open timeframes <input checked="" type="checkbox"/> When Mercy Services is willing/able to respect the opinions generated by clients and other people
5 High level of public involvement and influence	Partner	<input checked="" type="checkbox"/> When Mercy Services wants to empower clients and other people to manage a Mercy Services process/program <input checked="" type="checkbox"/> When clients and other people have accepted the challenge of developing solutions themselves <input checked="" type="checkbox"/> When Mercy Services agrees to implement the solutions generated by clients and others

Definitions:

- A client is defined as: a person who is a current or potential user of a Mercy Services service.
- A carer is defined as a person who provides unpaid care and support to a client. This definition includes parents and guardians caring for children.
- Community is defined as organisations and individuals (who are not Mercy Services employees) who have an interest in Mercy Services and/or who are affected by Mercy Services.

**2.0 SCOPE**

The purpose of this policy is to clarify why, when and how Mercy Services involves clients/carers/community in its planning/delivery/evaluation.

**3.0 POLICY STATEMENT**

Mercy Services will make reasonable efforts to involve clients/carers/community in a collaboration regarding Mercy Services planning/delivery/evaluation.

Mercy Services aspires to facilitate a partnership with clients and carers to such a degree that they say “Mercy is doing it with us not for us”.

**4.0 PROCEDURES**

**4.01 How Mercy Services will involve clients, carers etc and how this will be measured**

Level of involvement in organisational planning/delivery/evaluation	Performance will be measured by:
Inform or educate	Number of editions of Mercy Services newsletter available in paper form at Mercy Services reception desks
	Number of clients/carers/community representatives sent the Mercy Services monthly newsletter (including via email or post)
	Number of “What’s New” information bulletins posted on Mercy Services website
Gather information	% of clients who return biennial Client Satisfaction Survey
	% of Policy revisions where clients/carers/community representatives were offered the opportunity to comment on the draft
Discuss	% of programs that involved clients/carers/community representatives in the development/evaluation of their annual plan

Level of involvement in organisational planning/delivery/evaluation	Performance will be measured by:
	% of Strategic Plan development processes in which clients/carers/community representatives are offered the opportunity to contribute their views % of consultations that included clients/carers/community representatives in the design and use of resources, newsletters, brochures etc to ensure that the content meets the clients/carers/community need for information and that material is presented in language that is clear and free from jargon.
Engage	% of consultative committees/workgroups with consumer/carer/community representation Currently: <ul style="list-style-type: none"> <li>• Mercy Services Reconciliation</li> <li>• Mercy Services Community Consultations (usually mid-year and Annual Presentation Night)</li> </ul>
Partner	% of Governance/Management committees with consumer/carer/community representation Currently: <ul style="list-style-type: none"> <li>• Mercy Services Board</li> <li>• Mercy Services Board – Education Fund</li> <li>• Mercy Services Board – Finance &amp; Audit</li> <li>• Mercy Services Board – Community Housing</li> </ul>

#### 4.02 Training and support to assist clients, carers etc to fulfil their consultative role

Mercy Services will offer relevant training to clients/carers/community representatives who are involved in Mercy Services consultative roles.

All forums and processes that offer clients/carers/community representatives the opportunity to contribute their views will have an appropriately qualified staff person who will explain their role to clients/ carers/ community representatives. This support person will be available to answer questions and use alternative means of explaining the issues.

#### 4.03 Compliance

Compliance with this policy is being measured by:

- a) all clients are invited at least once every two years to participate in the development/review of Mercy Services Policy; and
- b) all clients are invited at least once every year to participate in the Mercy Services Consumer and Community Forum.

#### 4.04 Evaluation

The performance indicators for the evaluation of this policy are:

- a) at least 75% average satisfaction score from respondents in client satisfaction survey.

## 5.0 REFERENCES

<b>1. Australian Standards</b>	a) None identified
<b>2. Legislation</b>	a) Anti-Discrimination Act, 1977 (NSW) b) Disability Inclusion Act, 2014 (NSW)
<b>3. Professional guidelines</b>	a) None identified
<b>4. Codes of Practice</b>	a) None identified
<b>5. Codes of Ethics</b>	a. Australian Association of Social Workers Code of Ethics 2010 <a href="http://www.aasw.asn.au/document/item/1201">http://www.aasw.asn.au/document/item/1201</a> b) Australian Psychological Association Code of Ethics <a href="http://www.psychology.org.au/Assets/Files/APS-Code-of-Ethics.pdf">http://www.psychology.org.au/Assets/Files/APS-Code-of-Ethics.pdf</a> c) Code of Ethics for Nurses in Australia 2008 <a href="http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#codesofethics">http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#codesofethics</a> d) Integrity in the Service of the Church <a href="https://www.catholic.org.au/media-centre/media-releases/cat_view/10-organisations/38-national-committee-for-professional-standards">https://www.catholic.org.au/media-centre/media-releases/cat_view/10-organisations/38-national-committee-for-professional-standards</a> e) Mercy Services Code of Conduct
<b>6. Evidence</b>	a) Gregory J. <i>A framework of consumer engagement in Australian health policy: Developing a framework for the AIHP Study</i> . Melbourne VIC; Australian Institute of Health Policy Studies; 2006. <a href="http://healthpolicystudies.org.au/component/option,com_docman/task_doc_view/gid,104/Itemid,145/">http://healthpolicystudies.org.au/component/option,com_docman/task_doc_view/gid,104/Itemid,145/</a>
<b>7. Mercy Services Values</b>	a) Justice, Respect, Care, Unity, Service

## 6.0 OTHER RELATED POLICIES

- A.03 Code of Conduct – Staff/Volunteers
- C.01 Management Roles and responsibilities
- C.03 Operational Planning
- C.04 Program Performance and Monitoring
- E.01 Service Guarantee
- E.03 Meeting Individual Needs
- E.04 Client Fees
- E.05 Client Participation, Decision Making & Advocacy
- E.06 Involvement of Families and Friends
- E.08 Complaints
- E.09 Client Records
- E.10 Nursing Care
- E.11 Coordination with other services
- E.12 Client Exit From Programs
- E.13 Cultural Awareness
- E.14 Duty of Care
- E.15 Protection and Vulnerable Adults from Abuse and Neglect
- E.16 Protection of Children from Abuse and Neglect
- E.18. Privacy
- G.01 Work Health Safety

**7.0 RELATIONSHIP WITH STANDARDS**

<b>Aged Care Accreditation Standards</b>	<b>Home Care Standards</b>	<b>NSW Disability Standards</b>	<b>EQiP Standards</b>
1.1, 1.2, 1.4, 1.5, 1.8, 1.9, 2.1, 2.2, 3.1, 3.2, 3.10, 4.1 4.2	1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 2.1, 2.2, 2.3, 2.4, 2.5, 3.1, 3.2, 3.3, 3.4, 3.5	1.1, 1.2, 1.3, 1.6, 1.7, 1.8, 2.1, 2.2, 2.5, 2.6, 4.4, 5.1, 5.2, 5.3, 5.4, 5.5, 5.6, 5.7, 6.4, 6.5, 6.7	1.1.2, 1.1.3, 1.1.4, 1.2.2, 1.3.1, 1.6.1, 1.6.2, 1.6.3, 2.1.3, 3.2.1, 3.2.5

**8.0 DOCUMENT CHANGES RECORD**

<b>Dates of change</b>	<b>Section altered</b>	<b>Natures of changes made</b>
14/07/2011	Whole document	First record of document
14/11/2012	All Sections	Organisation name updated
21/01/2013	a) 4.3 Compliance and 4.4 Evaluation	a) New sections
31/03/2016	a) 1.0 Introduction/Background b) 4.01 How Mercy Services will involve clients, carers etc and how this will be measured c) 4.02 Training and support to assist clients, carers etc to fulfil their consultative role d) 4.03 Compliance e) 4.04 Evaluation f) 5.0 References g) 6.0 Other related policies h) 7.0 Relationship with Standards	a. Remove from definition of "client" those who make "indirect use of services" b. INFORM/EDUCATE - Remove requirement that newsletter is monthly; DISCUSS – remove duplicated Strategic Plan process; ENGAGE – remove WHS, environmental responsibility and quality improvement but add 6 monthly community consultations; PARTNER – remove management team c. Remove orientation (as training requirement covers this). Remove requirement that staff person also be support person to client/carer/community representative (not always desirable or realistic) d. Change frequency of consultation forum from every two years to at least once a year e. Change from complaint to average score from client satisfaction survey f. Update Legislation and Codes of Ethics g. Update h. Update Disability Standards and add Aged care Accreditation Standards
Review due 31/03/2019		