MH ECO TOOLKIT

Booklet 1

INTRODUCTION
Please note that the resources for this sample MH ECO Introduction Booklet are available for download at:

The MH ECO Project Team provides training, consultancy and assistance for services implementing the MH ECO quality improvement methodology.

MH ECO TOOLKIT

INTRODUCTION

Booklet one

Version 1.2

2014
## CONTENTS: BOOKLET ONE

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### 1. What is MH ECO?

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**Legends used in the Toolkit**

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<td><img src="image.png" alt="Light Bulb" /></td>
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**Blue text**

Blue text refers to resources for use in a MH ECO project. The resources are available on a CD when the toolkit is purchased in hard copy format. When the toolkit is purchased as a download, the resources are available as web based downloads. The templates are provided for modification according to the needs of users.
MH ECO TOOLKIT OVERVIEW

Who is the Toolkit for? The MH ECO toolkit will be of value to any organisation working with consumers and carers who want to utilise their lived experience of the service to improve service quality.

In particular the toolkit will be of interest to any organisation that has a commitment to improving the quality of experiences for people accessing their mental health services.

What is the Toolkit? The MH ECO Toolkit comprises a collection of structured methods that assist organisations to utilise consumer and carer experience to improve mental health services.

The MH ECO Toolkit enables organisations to access the largest untapped resource in mental health—consumers, their families and supporters. It provides tools that allow consumers and their carers to utilise their lived experience in actively participating in improving services and not simply be regarded as passive receivers of health services. The tools enable service users to play a much greater role in helping identify service gaps and needs, propose solutions, test them out and implement them in collaboration with staff.

The toolkit was developed by the research teams from the Victorian peak mental health consumer and carer
organisations whose role it is to represent the voices of consumers and carers state wide. The tools are the result of the collective lived experience of all those who have been involved in the MH ECO project over the past 6 years.

The toolkit consists of this introductory booklet and five booklets that directly relate to each step of the MH ECO process.

The toolkit comes with a one day training program for persons who will be implementing the toolkit in their organisation.

The suite of tools can be used to identify and address a broad range of issues that are of concern to consumers, carers and service providers. Alternatively, individual tools can be used to work with stakeholders in addressing a particular aspect of service delivery. This sample introductory booklet is provided free of charge as an introduction to the MH ECO methodology.

Individual tools can be used in a range of different scenarios depending on the needs of the organisation from service wide applications to specific programs.
The toolkit enables organisations to:

1. **Collect** experience based data from consumers and carers. The toolkit provides fully customisable questionnaires (developed from consultations with consumers and carers). It also includes comprehensive information on administration methods, how to run focus groups and conduct one on one interviews.

2. **Identify** key issues for consumers and carers. The toolkit includes a guide for analysing data collected into broad themes and touch points for use in the co-design process.

3. **Co-design** service improvements with consumers, carers and staff. Co-design is the signature feature of the MH ECO methodology as it is the process of turning experience based information into plans for action. The kit provides a step by step guide on how to organise and manage MH ECO Collaboration and Co-Design groups (see booklet 6).

4. **Implement** experience informed service quality improvement. The toolkit outlines a method of incorporating stakeholder experiences of receiving and providing services into an organisation’s quality improvement process with the goal being to improve the future experiences of stakeholders.
The Benefits of using the Toolkit

The MH ECO Toolkit offers organisations benefits, such as:

- Providing an evidence-based and action-oriented set of tools for quality improvement
- Facilitating quality improvement processes which incorporate the unique perspectives of service providers, consumers and carers
- Enabling a more efficient use of an organisation’s time and resources by providing a succinct, step-by-step process for working with consumers, carers and staff to identify issues and work together on solutions
- Helping organisations to meet accreditation requirements for increased consumer and carer participation
- Providing a method for continuous quality improvement processes at both program and service levels
- Building capacity within services for consumers, carers and staff to work together effectively and confidently
- Strengthening consumer and carer workforce capacity through personal and professional development achieved through training and involvement in the MH ECO process
- Comprising a modular format that allows flexible implementation depending on service requirements.

The following table describes the specific benefits of using the MH ECO methodology by stakeholder group.

**Table 1. MH ECO Benefits by Stakeholder Group**

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Consumers</th>
<th>Carers</th>
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| **Supports accreditation processes; addresses legislation and policy requirements for consumer and carer participation (national and state)** | Incorporates individual consumer experiences of care into system improvement  
Training in participation increases skills and confidence of consumers  
Increases consumer involvement in service evaluation  
Provides individual consumers with an opportunity to contribute to systemic change  
Provides an effective avenue for ‘being heard’. | Incorporates individual carer experiences of care and support into system improvement  
Training in participation increases skills and confidence of carers  
Increases carer involvement in service evaluation.  
Provides individual carers with an opportunity to contribute to systemic change  
Provides an effective avenue for ‘being heard’. |
| **Utilises lived experience to inform quality improvement** |  |  |
| **Builds organisational capacity for collaborative work with consumers and carers** |  |  |
| **Promotes culture change – outcomes extend beyond action plans** |  |  |
| **Provides a structured approach for engaging consumers & carers.** |  |  |
Core Values underlying MH ECO

The development of the MH ECO methodology has been guided by the following core values:

**Empowerment** – Consumers and carers are highly valued for their participation and contributions, which can really make a difference to organisational culture.

**Partnership** – Consumers and carers are meaningfully involved as equal partners in the MH ECO process.

**Commitment** – Commitment to improving consumer and carer experiences of care and support.

**Recovery** – MH ECO focuses on the needs, priorities and expectations of consumers and carers thereby promoting recovery and wellbeing oriented services.

**Transparency** – All parties are fully informed on the MH ECO process and provided with valid and reliable information.

“MH ECO generates high quality evidence about the experience of consumers and carers, evidence that is critical to effective system reform. This methodology provides a structural approach that has the potential to actively engage consumers, carers and staff in co-designing service improvements.”

The MH ECO Evaluation Report 2011 by Dr Delwyn Goodrick & associates

“MH ECO – An extremely valuable experience, powerful and positive with a great respect for everyone’s point of view. This model of working should be much more widely implemented.”

A project participant
1. What is Mental Health Experience Co-Design? (MH ECO)?

MH ECO is an innovative methodology which draws on the lived experience of carers, consumers and staff to effectively co-design and improve quality of service. The toolkit booklets directly relate to steps in the MH ECO process.

The impetus for the development of a new quality improvement initiative in part reflected Australian national and state mental health policy that aligns consumer and carer participation with effective quality improvement (National Mental Health Plan 2009-2014; National Standards for Mental Health Services, 2010; Safety and Quality in Public Mental Health Services (2004). These policy statements reinforced the need for improved engagement of consumers and carers at all levels of service delivery, including planning, implementation and evaluation.

From 2006, the Victorian Department of Health funded the Victorian Mental Illness Awareness Council (VMIAC) and Tandem Inc. to conduct the Consumer and Carer Experiences of Care and Support Project. The Project evolved from a survey project to a quality improvement initiative which is named MH ECO – Mental Health Experience Co-design. MH ECO applies a leading edge methodology in engaging all stakeholders to work in partnership to co-design and improve quality of service. This effective consumer and carer focused approach has gained national and international
exposure (see recommended reading section 2.2 and MH ECO website for further information).

Figure 1 below is a diagram of the complete MH ECO methodology showing all of the steps involved in a full MH ECO project.

**Figure 1 MH ECO Process Flowchart**

The diagram also illustrates the information flow that occurs between the Co-Design and Collaboration Groups in the co-design phase of the MH ECO methodology. Each of the steps named in the diagram are explained in detail in the MH ECO toolkit booklets.
1.1 Benefits of the MH ECO methodology

*Implementing the MH ECO methodology assists in:*

- Gaining an understanding of consumers’ and carers’ experiences of the service
- Co-designing service quality improvements through collaboration between consumers, carers and staff
- Generating meaningful and sustainable service level changes based on lived experience
- Building on the capacity of consumers and carers to participate in planning, delivery and evaluation of the service in partnership with staff.

> "Yes, so the process of the identifying, gathering the feedback and the experience of people and then understanding that together, and developing actions is the most powerful part of this whole methodology."

A staff member

1.2 The MH ECO Methodology

The MH ECO methodology consists of two broad areas of activity which are information gathering and co-designing for quality improvement (please refer to Figure 1). These activities are preceded by suitable project planning and subsequent promotion to stakeholders.

Information gathering generates both quantitative and qualitative information from consumers and carers about
their experiences of receiving care. In addition, qualitative information is collected from staff about their experiences of providing care. This involves a mixed method research design in which consumers and carers are provided with separate questionnaire administrations, focus groups, and individual interviews (see booklets 2 and 3). After these activities, focus groups are held with staff to provide an avenue for their input as service providers.

The closed items in the questionnaires primarily provide sample wide quantitative information for statistical analysis. The most positive and least positive aspects of experience with the service are then identified through analysis of the questionnaire data. These aspects, termed ‘touch points’, inform the co-design activities.

Qualitative information about consumers’ and carers’ experiences of care is gathered from the responses to open ended items in the questionnaires, focus groups and in the form of narratives from semi-structured interviews. The focus groups are also used to gain a deeper understanding of the touch points identified from the analysis and to provide triangulation of the data.

In the MH ECO co-design process, staff, consumers and carers work together in groups to utilise their collective experiences to improve problematic aspects of service identified in the touch points. Training for those people involved in the MH ECO co-design process is normally provided to facilitate effective participation in these groups.
The Collaboration Group is the first of the groups to be established and this group oversees the co-design process. The first task of the Collaboration Group is to consider the touch points identified from the data collection analysis process (see booklet 4). The group then formulates objectives, and allocates one objective to each Co-Design Group of which there may be up to three such groups in an MH ECO project.

Members of each Co-Design Group work together on their allocated objective to develop an action plan, which is subsequently fed back to the Collaboration Group for review. Based on the review the Collaboration Group then makes recommendations for consideration by the organisation’s quality committee or senior management for inclusion in the quality improvement process.

1.3 What is an MH ECO Project?

An MH ECO project is a structured way of implementing the MH ECO methodology in an organisation or individual program. The over-arching aim of the project is to provide experience based information about the service which is used to inform quality improvement through the use of co-design principles. The project may involve all, or selected, steps in the MH ECO methodology as outlined in Figure 1. When all steps are followed, the experience based information would then be used to inform a co-design process for service quality improvement. In an example of a selected step approach, a service may choose to conduct a
survey of their consumers and carers to elicit baseline information about their experiences of receiving services and this may be all that the organisation requires at that time.

An MH ECO project is a process requiring allocation and co-ordination of resources such as staff, adequate funding, time and infrastructure to be successful. It also requires ongoing planning and co-ordination which is best carried out by a steering committee (please see section 1.7).

1.4 Is your organisation MH ECO ready?

Before undertaking the MH ECO project, it is advisable to determine the organisation’s readiness for the project. Readiness is dependent on a number of factors including:

- Executive and senior management commitment to the project and it’s goals
- The presence of enthusiastic personnel who can act as local champions and advocates for the project
- The availability of adequate resources for the project
- The availability of up to date contact lists of consumers and carers
- Whether the MH ECO project aligns with existing quality improvement structures and activities.

To assist in assessing your service’s readiness please complete the MH ECO readiness checklist (see resource 3.1) prior to the project commencement.
Expert advice

It is highly recommended that a designated project officer is employed to liaise with stakeholders, organise meetings and resources and write reports. The quality manager is ideally placed to act as the project manager.

Handy Hint

MH ECO consultants are available to assist you with assessing your organisation’s readiness. Please email: info@mheco.org.au

Resources (CD and Web download)

MH ECO readiness checklist (3.1)

1.5 MH ECO Project Planning

Initiating an MH ECO project at your organisation will involve determining if there is a need for ethics approval (see this booklet section 1.6), planning the project and writing a detailed project brief (see resource 3.2).

The project planning is ideally co-ordinated by the quality manager or a senior service manager who has a good overview of the organisation’s quality improvement processes.
The project brief provides a format for summarising planning and includes the following:

- **Project objective (s)** - States what is to be achieved by the project
- **Scope of the project** - Outlines which aspect(s) of the service is to be the focus of the project e.g. the whole organisation or a specific program
- **Key Tasks** - Details information about how and when the project objective(s) is to be achieved i.e. what specifically needs to be done to achieve the objective(s). *(see resource 3.3)*
- **Project Governance** - States who is involved and who is responsible for project management, steering committee and reporting.
- **Stakeholders and partnerships** - Identifies who needs to be consulted. *(see resource 3.9)*
- **Risks and contingencies** - Details what might affect the successful completion of the project and how is this to be managed
- **Project costing** - Provides a breakdown of the expected costs
- **Evaluation plan** – Details how to measure the success of the project.

Developing a comprehensive timeline of the project by using a project planning tool such as a Gantt chart *(see resource 3.3)* is an essential activity which will help to ensure the completion of the project within the proposed timeframe. The Gantt chart can also be used to inform everyone about
the progress of the project. Referring to the Project brief template (see resource 3.2), the MH ECO flowchart (3.4) and the MH ECO program logic (see resource 3.5) located in the resources may assist in developing the complete project plan and Gantt chart.

**Resources (CD and Web download)**

- Project brief template (3.2)
- Gantt chart template (3.3)
- MH ECO flowchart (3.4)
- MH ECO program logic (3.5)

**1.6 Ethics Approval**

MH ECO is a quality improvement project. It is commonly accepted that quality improvement projects do not require ethics approval from a human research ethics committee. However, MH ECO includes some research methods which involve gathering information from consumers and carers about their experiences of care. It is recommended that a local research ethics committee should be informed and consulted to seek their appraisal of the project. There are benefits to having ethics approval, especially if the project report, or papers arising from it, will be submitted for publication.

Please refer to the National Health and Medical Research Council website for developments in this area:

1.7 Project Governance

Project governance requires the establishment of a formal steering committee which meets on a suitably regular basis. The suggested membership could include consumer and carer representatives, senior clinicians, program managers and the quality manager. It is advisable that the steering committee is chaired by a member of the service executive.

The steering committee:

- Develops project guidelines and engagement strategies
- Monitors project progress and implementation
- Assists in the evaluation of project outcomes.

1.8 Promoting the Project

A major factor in a successful MH ECO project is to consult widely and involve as many stakeholders as practicable.

Promotion of the MH ECO project throughout the organisation maximises engagement of all key stakeholders.
Explaining the MH ECO Project at regular staff meetings raises awareness and provides an avenue for garnering support. This is a good time to ask staff to begin to update their consumer/carer contact details (see Booklet 2).

The MH ECO promotional DVD (see resource 3.6) and brochures can be used to inform stakeholders about the MH ECO process. The A3 size MH ECO posters (see resource 3.7) and the project brochure (see resource 3.8) can be displayed at reception waiting areas, meeting rooms and staff rooms.

**Handy Hint**

Develop a stakeholder engagement plan (see resource 3.9) in order to ensure maximum participation.

**Resources (CD and Web download)**

MH ECO promotional DVD (3.6)
MH ECO sample poster template (3.7)
MH ECO sample brochure template (3.8)
Stakeholder engagement plan template (3.9)
1.9 Official website

The MH ECO website can be used to access information and support. The MH ECO website address is: http://www.mheco.org.au

“MH ECO Improves the capacity of consumers and carers to participate in planning, delivery and evaluation of the service. Co-Designing service improvements with consumers and carers ensures the service is responsive...

Participants, including consumers, carers and staff have been enriched through participation in MH ECO. Staff identified that MH ECO had contributed to increased levels of confidence and improved the capacity of consumers and carers to actively engage in discussions and deliberations about their experience.” The MH ECO Evaluation Report 2011.

2. MH ECO Toolkit Development

MH ECO was developed over a six-year period as a methodology for service quality improvement. As noted earlier it is based on gathering consumer and carer experiences of care and engaging consumers, carers and staff in co-design for service improvement.

The MH ECO Toolkit has been written by members of the MH ECO project team who were involved in the development, implementation and evaluation of MH ECO methodology at both clinical and community health services in Victoria, Australia.
2.1 Overview of the Toolkit Booklets

This toolkit is a comprehensive set of tools and resources for a complete MH ECO project.

The Full Toolkit comprises:

- This Introduction booklet, which provides an overview of MH ECO and each of the booklets
- Five booklets offering step by step guides on how to use the various tools
- Resources on CD or as web based downloads, which include all the listed templates and a ten minute MH ECO promotional video clip.

The booklets have been designed to enable a service to implement either the full MH ECO quality improvement process or a combination of individual quality improvement tools of MH ECO suitable to a service’s need.

The individual booklets have been grouped together into two broad categories, information gathering and service co-design. Booklet 1 is this introduction booklet.

The information gathering tools are contained in:

- Booklet 2: Consumer and Carer Questionnaire – the collection of quantitative and qualitative data
- Booklet 3: Focus Groups and Interviews – the collection of qualitative data
- Booklet 4: Data Analysis and Reporting – data analysis, identification of touch points and reporting.
The service co-design tools are contained in:

- Booklet 5: Training for Participation – providing consumers, carers and staff with skills to participate in co-design.
- Booklet 6: Collaborating for Co-Design. – utilising consumer, carer and staff experience to collaboratively develop action plans for service quality improvement.

Various combinations of tools (booklets) may be used according to a service’s requirements. For example, if an organisation requires information on carer issues, a decision may be made to use the carer questionnaire (Booklet 2) in conjunction with the analysis tool (Booklet 4). On the other hand a service may already have existing information which can be used with the quality improvement tools (Booklets 5 and 6).

The tools can also be implemented on a regular basis as part of an organisation’s continuous improvement cycle.

Each Booklet in the MH ECO toolkit provides a listing of the resources for each of the activities involved in each step. These resources are available on the Resource CD or via download for use as guides or customisable templates.

For reference purposes, the diagram on the next page (Figure 2) shows the sequence in which the booklets are used when a full MH ECO project is implemented.
Figure 2: Full MH ECO Project Booklet Use Sequence

MH ECO Toolkit

Information Gathering

- Booklet 1: Introduction
- Booklet 2: Consumer and Carer Questionnaire
- Booklet 3: Focus Groups and Interviews
  - Consumer and Carer Focus Groups
  - Staff Focus Groups
  - Individual Interviews

Quality Improvement

- Booklet 4: Information Analysis and Reporting
- Booklet 5: Training for Participation
- Booklet 6: Collaborating for Co-Design
  - Collaboration Group
  - Co-Design Groups
  - Action Plans
2.2 Recommended Readings


3. Resources

3.1 MH ECO readiness checklist

3.2 Project brief template

3.3 Gantt chart template

3.4 MH ECO flowchart

3.5 MH ECO program logic

3.6 MH ECO promotional DVD

3.7 MH ECO sample poster for guidance only

3.8 MH ECO sample brochure for guidance only

3.9 Stakeholder engagement plan template

Resources available for download at: