

	CLINICAL POLICY TITLE: Fraser Health Mental Health & Substance Use: Family and Natural Supports Inclusion and Support			Page 1 of 7
	AUTHORIZATION: Family Support and Inclusion Steering Committee	DATE APPROVED: JULY 2018	CURRENT VERSION DATE: JUNE 2019	

Version	Date	Comments / Changes
1.0	July 2018	Initial Policy Released
2.0	June 2019	Revision

1. PURPOSE OF THIS POLICY

Description

Involvement of Family and Natural Supports is a vital component of the framework of Recovery, which guides the People/Person we serve (Patient/Client/Person with Lived Experience) service provision in Fraser Health's Mental Health & Substance Use services (MHSU).

People we serve, Service Providers, as well as, Family and Natural Supports benefit greatly when Family and Natural Supports are involved and supported as partners in the care and support of People we serve with mental health and/or substance use issues and/or concerns. The presence, participation and support of Family and Natural Supports enhance the People we serve, and Family and Natural Supports experience of care, improve management of brief, chronic and acute illnesses/concerns, enhance continuity of care, and prevent hospital readmissions.¹

The purpose of this policy is to:

- Provide continuity of care for the People we serve;
- Ensure uninterrupted case management, community and, or clinical services between the child and youth mental health and adult mental health systems;²
- Help transition from one service to another, within and/or through a specific service, with the People we serve and their support network as intact as possible;
- Achieve optimal outcomes for the People we serve through collaboration with each other: People we serve, Family and Natural Supports, and Service Providers;
- Guide Service Providers to support, educate and involve Family and Natural Supports;
- Implement all of the above, guided by the values of: 1) pluralism, 2) patient-centred care (including trauma informed practice) and 3) health equity in our attitudes, decisions, and actions as we engage diversity in the workplace. By living up to these values, staff and the organization will also be living up to the Fraser Health values of Respect, Caring and Trust.³

2. SCOPE

This policy applies to all Fraser Health Mental Health and Substance Use services.

At the practice level, this policy applies to all staff including but not limited to: nurses (RN/RPN/LPN/NPs), physicians, social workers, all allied health care professionals, and contracted community partners involved in providing service.

¹Fraser Health Mental Health & Substance Use Service: Families Are Part of the Solution, A Strategic Direction for Family Support & Inclusion, 2011

²Youth Mental health Transition Protocol Agreement between the Ministry for Children and Family Development and Ministry of Health and Health Authorities, 2015

³Fraser Health Policy: Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017

If a Child or Youth needs additional support in understanding and coping with parental mental health and /or substance use issues, efforts should be made to support this individual in linking them to appropriate resources in their community.

3. POLICY

3.1. Collaboration among People we serve, Family and Natural Supports and Service Providers

Collaboration involves at least three experts: the Mental Health/Substance Use Service Provider who has specialized training and clinical experience; the Person we serve, who knows their own preferences and subjective experiences; and the Family and Natural Supports who have subjective knowledge of their loved one's experience, and play a valuable therapeutic role in supporting their loved one, and who may also need support themselves.

Mental Health and Substance Use service staff recognize and acknowledge the importance of collaboration among the People we serve, Family and Natural Supports and Service Providers in: policy and program development; professional orientation and education/training; the development of the Person we serve's treatment/recovery plan; and, the continuity and delivery of service.

Partnership has at least three critical components: communication, respect and collaboration:

Service Providers are encouraged and allowed to dialogue, obtain, and share, as much information as possible recognizing the:

- Guidelines of BC's Mental Health Act:
http://www.bclaws.ca/civix/document/id/complete/statreg/96288_01
- BC's privacy legislation, FOIPPA:
http://www.bclawsca/EPLibraries/bclaws_new/document/ID/freeside/96165_00
- Fraser Health, Policy: [Sharing of Information between patient/clients, families/natural supports, and health service providers in Fraser Health, Mental Health & Substance Use Program, 2017](#)

Respect requires that Service Providers recognize and value the contributions that Family and Natural Supports can and do make. The Family and Natural Supports' strengths, expertise and contributions must be actively sought and acknowledged.

Collaboration requires an organizational culture where policies and practices will be conducive to Family and Natural Supports' participation, including, but not limited in all phases of service: treatment, community rehabilitation and recovery process.

3.2. Family and Natural Supports involvement with Mental Health and Substance Use service staff in service planning of the People we serve.

Family and Natural Supports will be given the opportunity to be included in service planning of their loved ones as follows:

- a) Receiving information and education from staff about resources and services available within Fraser Health and community service providers;
- b) Being part of service planning that encourages People we serve to consider the involvement of Family and Natural Supports in their service and recovery plan;
- c) Given the opportunity to collaborate with their loved ones and staff in all stages of service including assessment, treatment and discharge decisions, and decisions that may be determinants of health (e.g. housing, income, employment supports, etc.);

- d) Will be actively encouraged to share collateral information with both the staff and People we serve that may be relevant to their service on a regular, ongoing basis;
- e) Unless the Person we serve does not want Family and Natural Supports involvement, or Family and Natural Support involvement is assessed by the staff as being detrimental to the Person we serve's service. Non-involvement will be regularly reviewed.

3.3. Protection of Privacy and Confidentiality

Fraser Health complies with FOIPPA in collecting, using and disclosing the People we serve personal information.⁴ Staff must have up to date and complete knowledge about consent issues and protocols for releasing information, and apply that knowledge consistently and across departments.

Alongside the importance of collaboration as outlined in 3.1, Fraser Health recognize People we serve right to privacy:

<https://www.fraserhealth.ca/patients-and-visitors/privacy-rights-and-confidentiality/>

When engaging Family and Natural Supports, Service Providers will take into account both the values and beliefs of the Family and Natural Supports and the respect and dignity of the People we serve.

Family and Natural Supports as a third party have a right to confidentiality as outlined in FOIPPA Sec. 22. http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/96165_00. Family and Natural Supports can request that information shared with staff be held in confidence. Service Providers must check with Family and Natural Supports on whether information Family and Natural Supports are sharing can and needs to be, held in confidence. However, there are exceptions based on the principle of 'continuity of care', that requires information to be shared, for example, risk of harm to self or others.

3.4. Responsibilities of Service Providers

Service Providers to People we serve:

Mental Health and Substance Use staff in discussions with the People we serve will be able to assist them in determining the role of their Family and Natural Supports in their recovery/service plan: this will include but not be limited to the following:

- a) Working with the Person we serve to identify and keep a record of the names of Family and Natural Supports to be involved, the nature of information to be shared, and to what extent Family and Natural Supports will be invited to participate and to what extent this involvement will be;
- b) Discussing the issue of confidentiality and information sharing, including the ability to share necessary information with those who are providing service within the context of "consistent purpose", for continuity of care and to address safety concerns;
- c) Assessing and subsequently review the Person we serve's ability to provide informed consent for Family and Natural Supports involvement, and, accordingly obtain and document consent.
- d) Actively engage Family and Natural Supports in giving their ideas for developing and implementing a recovery/service plan, including collaboration on key care issues (e.g. crisis plan, transition care, and housing);
- e) Where the Person we serve consents or where it is not possible to collect information directly from them, Service Providers will be able to ask Family and Natural Supports for any information necessary to provide care, unless a negative outcome could be reasonably expected as outlined in Sec. 3.2(e)

⁴Fraser Health, 'Caring for Your Information – Notice to our Patients, Clients and Residents

Service Providers to Family and Natural Supports:

- a) Provide adequate support, information, education and guidance to Family and Natural Supports so they may effectively support the People we serve in their recovery, including education and guidance on the following:
 - Why information is being shared and the responsibility to protect the privacy of the Person we serve's information;
 - Available support services and family counseling opportunities.
 - Education on the illness itself including any medications (including side effects and how to manage them) and other effective treatment interventions.
- b) Communicate with Family and Natural Supports in the language of their choice whenever possible.

Team/Program/Unit Managers, Coordinators, Clinical Supervisors, Mental Health and Substance Use staff/service providers:

- a) Reviews with People we serve and Family and Natural Supports their expectations around their ongoing involvement and support;
- b) Encourage Family and Natural Supports involvement in recovery/service planning;
- c) Ensure a welcoming environment for Family and Natural Supports in the Mental Health and Substance Use centres and services, including engaging those from culturally and linguistically diverse backgrounds;
- d) Provide consultation and supervision to Service Providers in effective collaboration with Family and Natural Supports;
- e) Seek Family and Natural Supports input and representation in the planning and evaluation of services;
- f) Where necessary facilitate conflict resolution between the People we serve and Family and Natural Supports and/or Service Providers.

Leadership (CEO, VP, Executive Director, Directors and Managers):

- a) To consistently facilitate the use of this policy.

4. DEFINITIONS

Collaboration: A process of mutual sharing and working together to achieve common goals in such a way that all persons or groups are recognized and growth is enhanced.⁵

Continuity of Care: If a Person we serve's personal information was collected for health care purposes, public bodies may release necessary information to third parties for 'continuity of care'. This means public bodies may disclose information to health care professionals/service providers, family members and natural supports, or to other persons, such as friends and relatives, involved in a Person we serve's care for the purpose of that care. The release of information must be in the best interests of the health of the Person we serve.⁶

Diversity: The descriptive reality that people are different from one another.⁷

⁵ Stanhope and Lancaster (2000)

⁶ Guide to the Mental Health Act, Appendix 13, Freedom of Information and Protection of Privacy: Fact Sheet. Ministry of Health, November 2004.

⁷ Fraser Health, Policy: Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017

Family and Natural Supports: The term Family and Natural Supports includes more than biological family members. It is meant to capture a full range of relationships of importance to the People we serve including but not limited to significant others who support and/or care for the People we serve.⁸

FOIPPA: This is the BC Freedom of Information and Protection of Privacy Act.

Health Equity: Valuing health equity involves striving to reduce differences in psychosocial and physical health outcomes between individuals, subgroups and populations that are unfair.

Health equity is defined in the following way:

- Health services are available, accessible, acceptable and of sufficient quality to those who need them the most.
- The scale and intensity of health services for any population subgroup is proportionate to the level of disadvantage and need of that subgroup.
- Health resources are distributed according to the scale and intensity of needs, as above.⁹

Patient-Centred Care: A holistic (bio-psychosocial-spiritual) approach to delivering care that is respectful and individualized, allowing negotiation of care, and offering choice through a therapeutic relationship where people are empowered to be involved in health decisions at whatever level is desired by that individual who is receiving the care (Morgan & Yoder, 2012, p. 8). It is also an approach to the planning, delivery, and evaluation of health care that is based on partnerships between health care providers, patients (Persons we serve) and families (Family and Natural Supports) (Institute for Patient and Family Centred Care). While we recognize that person-centred care as a term emphasizes the importance of holistic approaches, we wish to be more precise by referring to the 'patient' [Person we serve] in relation to care-providers, family members [Family and Natural Supports] and the healthcare system.¹⁰

People we serve (Patient/Client/Person with Lived Experience): This includes residents (e.g. Support Housing and Residential Program), clients/persons with lived experience (e.g. people with a case manager from the Mental Health and Substance Use service program), and patients (e.g. a person in acute or tertiary mental health care). People we serve refers to anyone receiving services from Fraser Health Mental Health and Substance Use programs.

Pluralism: Pluralism describes a general approach to responding to diversity.¹¹

It involves valuing our differences and coming together with our various perspectives to find common solutions to common problems. We understand diversity as a good thing.

- We treat all people with respect, defined specifically as:
 - Treating them with kindness and compassion
 - Listening to their perspectives to understand without judgment, then
 - Sharing our own perspectives with the goals of seeking collaboration and working through issues.
- Individuals and subgroups living and working together seek common values-based solutions to common problems without compromising their deepest values.
- Individuals and subgroups can maintain their own identities (meaningfully held values, beliefs, practices) within the laws of the broader society.
- We do not attempt to change each other; but rather to build common foundations on which to move forward.

⁸ Fraser Health - 'Sharing of Information: Patients, Families, Health Care Providers in Mental Health and Substance Use, Policy Number 02-2351

⁹ Fraser Health, Policy: Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017

¹⁰ Fraser Health, Policy: Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017

¹¹ Fraser Health, Policy: Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017

Service Providers: These are programs/staff employed by Fraser Health or directly contracted by Fraser Health, for example: community mental health centers, sessional physicians/psychiatrists, clubhouse programs, vocational rehabilitation counselors, Substance Use services, etc.

Trauma Informed Practice: This practice emphasizes the importance of all health care systems and service providers understand that trauma is a common human experience, and have the opportunity to offer all people healing experiences. Trauma informed practice as a ‘way of being’ does not require or expect that People we serve disclose their trauma. Trauma informed care requires health systems and service providers to actively seek to avoid traumatizing or re-traumatizing People we serve in care delivery.¹²

5. PROCEDURE

N/A

6. REFERENCES

Fraser Health, CLINICAL PRACTICE GUIDELINE: [Sharing of Information between patients/clients, families/natural supports, and health service providers in Fraser Health Mental Health and Substance Use program, 2017](#)

Fraser Health, Policy: [MHSU’s Caring for Your Information – Notice to our Patients, Clients and Residents.](#)

Fraser Health, Policy: [Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017](#)

Fraser Health, Policy: [Sharing of Information between patient/clients, families/natural supports, and health service providers in Fraser Health Mental Health & Substance Use Program, 2017](#)

Fraser Health, Policy: [Fraser Health, Release of Information \(ROI\) Manual:](#)

Fraser Health, Policy: [Freedom of information and Protection of Privacy Act \(FOIPPA\)](#)

Fraser Health, Policy: [Guide to BC MH Act:](#)

Fraser Health, Policy: [The Mental Health Act, 2005:](#)

Fraser Health, Policy: [Vancouver Coastal Health, Policy CA 4200, Family Involvement with Mental Health & Addiction Services, 2013](#)

Fraser Health, Policy: [Youth Mental Health Transition Protocol Agreement between the Ministry for Children and Family Development and Ministry of Health and Health Authorities, 2015](#)

7. APPENDICES

Members of the Shared Work Team

Shared Work Team Members	Alban Goulden	Family Member, MHSU Family Support and Inclusion Steering Committee Member and Co-chairperson
	Carl Lindstrom	Person with Lived Experience; MHSU Family Support and Inclusion Steering Committee Member
	Len Polak	MHSU, Clinical Coordinator – Family Support Services; MHSU Family Support and Inclusion Steering Committee Chairperson

¹² Fraser Health, Policy: [Respecting Diversity in Daily Interactions, Care Planning and System Design, 2017](#)

	Renee Poley	Family Member; MHSU Family Support and Inclusion Steering Committee Member
	Wade Osborne	MHSU, Tri Cities Community Mental Health & Substance Use Services Liaison; MHSU Family Support and Inclusion Steering Committee Member
Team Leader	Len Polak	MHSU, Clinical Coordinator – Family Support Services; MHSU Family Support and Inclusion Steering Committee Chairperson