



## **PEDIATRICS SUPPORTING PARENTS KEY STRATEGIES AND ACTION ITEMS FOR FAMILY PARTNERSHIP**

**About this guidance:** These 12 strategies can be implemented through the noted action items to embed sustainable family partnership into the fabric of your program. While some bullets could fall under multiple headers, they are organized for clarity under the one that seems like the best fit. This guidance can help your backbone teams have conversations, create policies, and draft the necessary plans, practices, and procedures to strengthen efforts to implement and improve family partnership.

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### **Groundwork for Culture Shift**

#### **1. Consider co-creation with families a necessary process and a movement.**

- Establish formal policies that recognize family co-creation as a core value and integrate it into mission statements, strategic plans, and processes.
- Offer training for staff and administrators on the philosophy of co-creation and its importance to ensure the longevity of family advisory/accountability boards.
- Create a shared language/glossary that promotes understanding, clarity and collaboration ensuring effective communication and alignment in goals and actions.

#### **2. Honor and elevate families' expertise/lived experiences and compensate them adequately for it.**

- Create an official compensation policy for family leaders. Ensure the process is transparent, with clear criteria and timely payments.
- Offer non-monetary benefits, i.e., skill-building opportunities, networking events, transportation, childcare, and meals for meetings.

#### **3. Invest in the processes, infrastructure, and workforce to uplift, support, and empower the movement.**

- Allocate dedicated funding for family engagement initiatives and create paid positions for family leaders.
- Provide resources like meeting spaces, technology, and materials.

#### **4. Establish an environment that makes reciprocal relationships of contributing and receiving.**

- Provide bias/equity training for all staff so they can establish supportive and collaborative relationships with parents and families.
  - Foster a culture of mutual respect through team-building activities and recognition programs.
  - Create and imbed feedback loops where families and staff can continuously share how collaboration impacts their experiences.
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#### ***Fostering Partnership***

#### **5. Share power among stakeholders throughout all processes. Create and use consensus-building tools and divide decision making among families, staff, and administrators.**

- Draft agreements, tools, and structures that ensure family leaders are decision makers.
- Outline and formalize shared governance at the PPC level and adopt decision-making tools and structures that include families as voting members. For example, Gradients of Agreement (GOA) and affinity mapping.
- Provide training for families and staff about these methods to ensure inclusive collaboration.
- Consider equitable meeting facilitation so family leaders can lead discussions and set agendas.

#### **6. Collect diverse perspectives to create solutions that are equitable and culturally responsive.**

- Establish recruitment strategies for family leaders from varied backgrounds. Use focus groups, surveys, and community outreach to gather input from underrepresented voices.
- Partner with local cultural organizations to co-host listening sessions and gather feedback.

#### **7. Co-design, implement, and continually refine programs and services.**

- Ensure that the teams evaluating and refining programs and services include not just clinicians and staff representatives, but also family leaders.
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## **Access to Information**

### **8. Ensure every person involved has the same access to information and opportunities to participate.**

- Use accessible communication methods—translated materials, jargon-free materials, translation services, plain language materials, and assistive technology. Offer flexible meeting formats (virtual/in-person) to accommodate diverse needs.
- Create an inclusive participation guide outlining available support options for families (transportation, childcare, technical assistance, etc.).
- Ensure family leaders know where to access information and/or who to go to for information needed for co-creation (i.e., assign a “point person”).

### **9. Ensure that family partners have access to the information and resources necessary for them to be equitable partners around budgeting and financial decision making.**

- Involve family leaders in all things budgeting, funding, and grant writing and provide training on these topics if needed.

### **10. Commit to transparency.**

- Include family leaders in regular meetings.
- Establish feedback mechanisms to gather input and address questions and concerns.
- Share meeting recordings, transcripts, notes, and/or summaries.

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## **Capacity Building**

### **11. Provide ongoing professional development/capacity building for family leaders.**

- Offer workshops, mentorship, and networking opportunities for family leaders. Create content that covers leadership skills and advocacy.
- Establish peer-to-peer learning circles where family leaders share experiences.

### **12. Create succession plans for family leaders and other key players.**

- Develop leadership pipelines. Identify and mentor new family leaders and create a shadowing program that pairs them with experienced family leaders.
- Create job descriptions and document roles, responsibilities, and transition plans to maintain continuity.



**PEDIATRICS SUPPORTING PARENTS  
FAMILY PARTNERSHIP COMMUNITY OF PRACTICE:  
SESSION OVERVIEWS AND RESOURCES**

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## Introduction

Pediatrics Supporting Parents (PSP) held a six-month-long Community of Practice (CoP) for members of the Proof Point Communities (PPC). The CoP was co-facilitated by Hope Williams-Burt of the Bay Area PPC, Allysa Ware, PhD, MSW of Family Voices, and Sarah MacLaughlin, LSW with ZERO TO THREE. The CoP covered many aspects of Family Partnership, including assessing readiness for engaging with families, narrative medicine exercises, and the Family Voices continuum of engagement. There was also a focus on defining co-creation and crafting key strategies and action items for prioritizing family partnership.

This document serves as a reference for PPC Learning Community members who were not able to attend the CoP. It is also a comprehensive summary to revisit or to use while orienting new staff members. It offers a brief overview of each CoP session, key learning objectives and talking points, PDFs of PowerPoint slide decks, and links to key tools and resources introduced throughout the sessions.

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## PSP Co-creation Definition

Aspects of each PPC's co-creation definition were combined to create the following overarching definition.

**Pediatrics Supporting Parents Co-creation Definition:**

*Co-creation is the process of authentic partnering between professionals and those with lived experience, rooted in shared decision making and mutual respect, to advance a shared goal or outcome.*

 PEDIATRICS Supporting PARENTS

## High-Level Tools

**Key Strategies and Action Items:** The participants of the Family Partnership CoP created this overview of important strategies and corresponding actions for operationalizing co-creation across multiple topic areas. [Access and download this tool.](#)

**Strategy and Action Planning Template:** This tool provides a template with an example for creating a plan for implementing actions and strategies. [Access and download this tool](#), then modify it for your PPC.

**Family Engagement in Systems Assessment Tool (FESAT) Resources:** These tools from Family Voices help programs assess family engagement in policies, practices, and other systems-level initiatives. The [FESAT](#) and accompanying [User's Guide](#) can be used for this purpose and it's recommended to repeat it every six to twelve months. This companion document, [Family Engagement in Systems \(FES\) Toolkit](#) provides strategies, resources, and guidance to promote and strengthen effective family engagement. You can [download additional resources here](#).

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## Session One

### Overview

Session One introduced the Hope Transformation Model and a readiness assessment from Family Voices. The session shared ways to support the transformation and culture shifts that enhance family partnership and highlighted the various levels of readiness an organization can have around family partnership and engagement.

### Key Learning Objectives and Talking Points

- **Transformation is Dynamic:** Participants explored the Hope Transformation Cycle and the way that thinking, behavior, and data impact outcomes. This model also highlights the importance of transparency and accountability in building the trusting relationships that support transformation/culture shifts around family partnership.
- **Assessing Family Partnership Readiness:** The Family Voices readiness assessment for engaging families was reviewed and discussed with a focus on identifying where PPCs are and assessing how to reach the next level.

### PowerPoint Slides and Key Tool

- [Session One Slides including Family Voices Levels of Readiness](#)

- **Family Voices Readiness Assessment:** This tool offers a checklist for considering the organization’s readiness on a scale from *baseline* to *questioning* to *interested* to having genuine *buy-in*.
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## Session Two

### Overview

Session Two focused on identifying “a-has” from the readiness assessment and offered an introduction to Narrative Medicine practices and how they can support family engagement and partnership. Participants engaged in experiential listening and writing practices.

### Key Learning Objectives and Talking Points:

- **Language is a Powerful Tool:** Participants discussed the importance of language and how it can convey partnership and shared power, or not.
- **How “Close Reading” and Radical Listening Relate to Co-creation:** Participants learned the practice of Narrative Medicine which involves the practice of paying close attention through listening as a modality for increasing understanding through communication.

### PowerPoint Slides and Resources

- **Session Two Slides including Narrative Medicine Slides**
  - **Narrative Medicine: A Model for Empathy, Reflection, Profession, and Trust:** This article from the *Journal of The American Medical Association* about Narrative Medicine and Narrative Competence explores ways in which physicians can have more empathic engagement with patients.
  - **Narrative Humility:** This research in *The Lancet* explores and acknowledges that patients' stories are dynamic and complex, requiring a humble and curious approach.
  - **Powerful Prescription:** This *Lumen Magazine* article (beginning on page 31) tells the story of how one hospital practices Narrative Medicine with staff, clinicians, patients, and families.
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## Session Three

### Overview

Session Three gave an overview of the *Continuum of Engagement* from Family Voices as well as examples of family leader co-creation activities for each level. The session focused on the difference between collaboration and co-creation with discussion around how to overcome barriers to true co-creation through small shifts. Participants honed their PPC's co-creation definitions and identified commonalities among them.

### Key Learning Objectives and Talking Points:

- **Continuum of Engagement:** The session explored the range of ways parents and family leaders can be meaningfully engaged in co-creation/co-design at their PPCs.
- **Creating the conditions for co-creation:** Participants discussed the key differences between collaboration and co-creation, barriers to co-creation, and small shifts that can have profound influence.

### PowerPoint Slides and Key Resource

- [Session Three Slides including Co-creation Definition Discussion](#)
  - [Continuum of Engagement Overview:](#) This one-pager outlines five levels of family engagement and how they build upon one another.
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## Session Four

### Overview

Session Four focused on finalization of each PPC's co-creation definition, discussion about an overarching PSP definition, and how to operationalize that definition through a variety of key strategies.

### Key Learning Objectives and Talking Points:

- **Draft of PSP co-creation definition:** Participants responded to a combined co-creation definition that incorporated key aspects of each PPC's definitions.
- **Brainstorming key strategies:** Group discussion centered on how each PPC will live out their co-creation definition by considering critical processes, procedures, and policies to have in place to ensure co-creation with family leaders.

### PowerPoint Slides

- [Session Four Slides](#)

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## Final Session

### Overview

The final session focused on finalizing the work on key strategies and action items. Participants also added headers, rearranged and recategorized the strategies, and reworded language for maximum accessibility and impact for this high-level tool.

### Key Outcomes and Tools:

- **Defining Actions Items for Key Strategies:** Participants finalized the key strategies and then moved from the “what” of the strategies to consider the “how” of family partnership regarding each one—landing on action items for operationalization. The [Key Strategies and Action Items](#) document is listed under the High-Level Tools section at the top of page 4 along with a [Strategy and Action Planning Template](#) for organizing your PPC’s tasks and approach.

### PowerPoint Slides and Key Resources

- [Final Session Slides](#)
- [Family Voices Family Engagement in Systems Toolkit](#): This toolkit is based on the same framework of the four strategic domains as the FESAT and offers checklists and strategies to guide programs in designing and implementing family partnership.