

# Consumer and Carer Engagement Framework



Updated February 2026



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**Marathon Health pays respect to the traditional custodians of the land we stand upon.  
This seal represents our commitment to working with our communities for a better future for all.**

## From the Board

Marathon Health is committed to protecting the wellbeing and human rights of our stakeholders.

At the heart of our consumer and carer engagement is the acknowledgement that Marathon Health is impacted by, and has an impact on, those with whom we interact. We recognise the importance of the knowledge and perspective consumers and carers bring to the health journey and how we can improve our service delivery. The value of engaging with consumers and their carers across a range of Marathon Health services is key to understanding the capacity and relevance of our services in addressing client and community needs.

This document is the framework to guide the activities of Marathon Health; to ensure genuine engagement and participation with our stakeholders, promote collaboration with and learnings from consumers and carers, to enhance supported and sustainable design and delivery of our services.

## From the CEO

Marathon Health is committed to developing and delivering quality health and wellbeing services, together with the communities we work in. An important part of this is ensuring consumers and carers have the opportunity to partner in their care.

This framework guides our services, ensuring that the voice of consumers and carers is at the core of all we do. It outlines how we will engage consumers and carers to be involved in decision making relating to the planning, design, delivery, measurement and evaluation of our services – and through this consultation, we will collect and use the feedback and experience to design fit-for-purpose, person-centred recovery journeys.

Backed by an organisational culture that prides itself on collaboration and understanding, we encourage all of our staff to build relationships and partner with consumers – enabling us to be more confident that we are delivering high-quality and responsive services, that meet the needs of the people who use them. This is supported by ongoing training and upskilling opportunities and is underpinned by a robust governance structure.

I acknowledge the important role consumers, carers and community members have made in developing this framework and would like to thank everyone who has contributed.

**Megan Callinan**  
CEO, Marathon Health

## Purpose

The purpose of this document is to guide and inform the development and ongoing strategy for consumer and carer participation within Marathon Health. One of our core strategies for our [2025-2029 Strategic Plan](#) is the amplification of consumer voice.

This framework guides the engagement of consumers and their carers at a program, organisational, and systemic level to continue the delivery of quality client focused services in line with our ICARE values.

This document intends to:

- Support the continued and enhanced engagement and participation of consumers and carers within Marathon Health
- Ensure Marathon Health provides a safe space for consumers and carers to give feedback and receive appropriate response
- Guide Marathon Health in building meaningful consumer and carer engagement and participation in individual, program based and organisation wide contexts with the opportunity for codesign and coproduction
- Provide structure for reviewing progress of consumer and carer inclusion and adapting services to maintain development and best practice over time
- Create an environment that encourages and values the voice, perspective, and participation of the consumer – ensuring shared decision making



## Defining our language

**Engagement** refers to methods and actions taken by organisations to involve the public, consumers and carers generally but also allows for decision-making, co-design and co-production processes to be undertaken.

**Consumers** are people who identify as having a living or lived experience of a health or wellbeing challenge and, irrespective of whether they have a formal diagnosis, have accessed services and/or received treatment. This includes people who describe themselves as a 'peer', 'survivor' and 'expert by experience'.

**Carers** are people, often family members, who provide, or have provided in the past, ongoing personal care, support, advocacy and/or assistance to a person with health or wellbeing challenge.

**Consumer representative** is a consumer who is representing other consumers OR who is representative of consumers in some way through their own experience/knowledge.

**Carer representative** is a carer who is representing other carers OR who is representative of carers in some way through their own experience/knowledge. <sup>2</sup>

Feedback refers to providing a personal experience perspective with the service, both positive and negative, to collect information on consumer/carers experience.

**Consultation** is seeking input from consumers and carers related to the development of Marathon Health processes, including policies and procedures.

**Codesign** is creating a plan with consumers and carers that meets the needs and expectations of those accessing the service. <sup>1</sup>

**Coproduction** includes a codesign element along with consumer and carers as partners in the delivery and evaluation of the service.

## Representative FOR:

- May have been elected or nominated by consumers/carers
- Will consult with consumers/carers in some direct way
- Will feed back to committee, focus group, working group or alike, the perspectives of the consumers/carers they consulted with
- They then feedback to consumers/carers about any outcomes or responses as a consequence of the representation

## Representative OF:

- May be appointed by an organisation on the basis of their lived experience knowledge base, and the expertise they bring
- No expectations of consulting with or feeding back to consumers/carers about the representation they undertake but may do this casually
- Would be expected to stay up to date in their knowledge through reading, attending events etc
- More likely to draw from their own perspectives

## Example:

In a community that supports individuals with disabilities, there is a need for effective representation of both consumers (people with disabilities) and carers (family members or primary supporters). A local government agency is working to improve its disability services, and two types of representatives are involved in shaping policy: a representative FOR (Sarah) and a representative OF (John).

Sarah is a carer for her adult son, who has a disability. She is nominated and elected by a group of carers in the local community to serve on a working group reviewing the accessibility of local disability services.

John is a person with a disability who has spent years navigating the disability support system. Due to his deep understanding of the challenges faced by individuals with disabilities, he is appointed by the government agency as a representative OF the consumer community.

**Representative “FOR” (Sarah):** Sarah represents a group (carers) and directly consults with them to advocate for their needs. Her representation is shaped by the collective feedback she gathers.

**Representative “OF” (John):** John represents individuals with disabilities based on his personal experience. He does not need to consult with the broader community but advocates from a place of lived knowledge and expertise.



## About consumer and carer engagement and participation

Historically, the structure of our health systems has profoundly impacted consumers and carers, often contributing to trauma. Upholding the right to self-determination – ensuring individuals can pursue their economic, social, and cultural development without interference – is essential for mental health and overall wellbeing<sup>3</sup>. Addressing systemic issues in healthcare is therefore a fundamental human rights issue. By integrating the lived experience knowledge of consumers and carers with recovery-focused, person-centred care, meaningful progress toward wellbeing can be achieved. Building communities of wellbeing empowers consumers and carers, equipping them with skills, resources, and opportunities for shared learning while fostering resilience and growth<sup>4</sup>.

Incorporating diversity and inclusion principles into health and well-being services enables more effective engagement with marginalised groups, providing valuable insights to adapt services to meet the unique needs of these high-risk populations<sup>5</sup>.

Meaningful engagement and participation not only enhances outcomes for consumers and carers, but also delivers significant benefits to other stakeholders, including staff, policy makers and funders. Without active involvement of consumers and carers, the ability to assess progress toward achieving goals and outcomes is greatly diminished.

## What is consumer and carer engagement and how we do it?

Consumer and carer engagement involves actively including consumers and carers in decision-making processes at both individual and organisational levels. At the individual level, this means empowering individuals to make informed decisions about their own health, treatments, and illness management (consumer-centred care). At the organisational level, it encompasses participation in shaping policies, service design, delivering, and evaluation of services.

In addition, Marathon Health is committed to becoming a health-literate organisation that empowers individuals to access, understand, and use health information effectively. We recognise that clear communication and accessible resources are essential for improving health outcomes and promoting equity in care.

The [National Mental Health Commission \(NMHC\)](#) identified six key principles of best practice for consumer and carer engagement and participation <sup>1</sup>. These principles have been adopted and adapted by Marathon Health in alignment with our ICARE values. Embedding best practices into our policies and procedures and equipping staff with the necessary resources and knowledge, will ensure meaningful engagement and participation are effectively implemented.

### **1. Conceptualising participation and engagement as routine practice**

This means having guiding documents for how consumer and carer participation will be implemented throughout the organisation. This involves an intentional and purposeful shift of focus and power from doing to and for, to doing together with consumers and carers. Beliefs, assumptions, and attitudes are critical here and can foster or undermine participation and engagement. Genuine respect for consumers and carers and the value that they offer is essential. Where challenges exist, they need to be recognised, addressed, and mitigated by the organisation.

### **2. Skills and knowledge are recognised and developed**

Supporting stakeholders, including organisation leaders, all staff, consumers, and carers to share their voice, and to support the development of skills needed to share their voice where appropriate. This competency goes to the learning of lived experienced, other skills consumers and carers have, as well as the ability to be involved in codesigning services and making informed decisions about service modelling.

### **3. Leadership culture**

Fostering a supportive environment for engagement from inclusive leadership, that thereby influences an organisational culture of inclusion and engagement. Leadership needs to be recognised, and opportunities need to be offered for development with staff members, consumers, and carers. Leadership is a core requirement of recovery on a personal level and becomes a source of inspiration and hope at the communal level.

### **4. Dedicated resourcing**

This means ensuring dedicated staff and budget towards consumer and carer engagement activities, to sustain meaningful participation. Genuine co-production is generally more time-consuming than top-down decision-making and requires careful strategic planning, including human resource management. There also needs to be enough time for everyone to think about and discuss issues. Participation often becomes tokenistic when timeline pressures take priority over time required to consider questions and issues deeply. Relational expertise is honoured in the coproduction and codesign process.

## 5. Respect, safety, and support

Respect, safety and support are fundamental in ensuring a safe environment throughout the organisation for people to share their health and wellbeing experiences, in a supported and inclusive way that promotes respect and empowerment. It is important to remember that safety is about the environment in which the activities occur and the issues under focus. It is not about targeting specific individuals or creating processes that apply only to health and wellbeing consumers and carers. The supports needed to do so may differ, and in some cases consumers and carers may have greater resilience due to their previous experiences. This includes the consideration of diversity and inclusion, where adjustments should be made to facilitate varied needs and capacities of engagement and participation. Similarly, it includes culturally appropriate pathways that require a holistic approach incorporating connections to Country, culture, and community.

## 6. Evaluation and quality improvement

Engagement and participation are embedded in quality improvement through listening, responding and actioning feedback and consultation in design, development, and delivery methods. Evaluation is itself an opportunity for engagement and participation. Not only can consumers and carers participate in evaluating programs and services as users, but they can also participate in objective evaluation of those programs and services. This includes evaluation design and methods, collecting and interpreting feedback and planning how to use it.

The following table demonstrates different levels and types of consumers and carer engagement across the organisation, including feedback and consultation participation.

	A. Individual	B. Service/program	C. Organisation	D. Policy/system
1. Design	Shared decision-making in treatment and care planning	Co-design of services and programs (as appropriate)	<ul style="list-style-type: none"> <li>Steering committee</li> <li>Advisory groups</li> <li>Representatives in working groups</li> </ul>	Co-design of policies and strategies (as appropriate)
2. Governance		<ul style="list-style-type: none"> <li>Reference groups</li> <li>Steering committees</li> </ul>	<ul style="list-style-type: none"> <li>Representatives on committees</li> <li>Consumer/carer-led committees, equal representation in decision making bodies</li> </ul>	
3. Delivery	Self-help programs and tools	<ul style="list-style-type: none"> <li>Peer workers</li> <li>Peer-led programs</li> </ul>	Consumer-led and carer-led training for staff	Regular reviews of policy and its implementation by consumer and carer representatives
4. Evaluation	Experience surveys	<ul style="list-style-type: none"> <li>Consumer and carer feedback</li> <li>Co-evaluation</li> </ul>	<ul style="list-style-type: none"> <li>Interviews with consumer and carer representatives</li> <li>Regular audit of engagement activities</li> </ul>	

**Figure 1.** Matrix of engagement and participation activities (CMHC practical guide) <sup>1</sup>

## How engagement and participation align with our organisational values

Marathon Health’s ICARE values are at the centre of our organisational culture and guide how we develop policies and procedures to suit the needs of our consumers and their carers. Marathon Health values align seamlessly with consumer and carer engagement, fostering an environment for quality service delivery and improved client experiences, all aimed at achieving better outcomes for rural Australians.

## How does engagement and participation align with our Strategic Plan?

Our Strategic Plan is central to organisational culture and guides the development of operational procedures. Marathon Health is committed to facilitating consumer and carer engagement in line with the Strategic Plan – which is built on four pillars – Consumers, Services, Workforce and Organisation. The below table highlights how consumer and carer engagement align with the organisation’s strategic direction and ultimate vision of enabling country Australians to thrive.

	 <b>Our consumers</b>	 <b>Our services</b>	 <b>Our workforce</b>	 <b>Our organisation</b>
<b>Organisational level</b>	<p>Consumer engagement and feedback systems in use</p> <p>Creating culturally safe and accessible services</p>	<p>Collecting meaningful data that demonstrates value, impact and informs continuous improvement</p>	<p>Growing and diversifying our workforce of the future, specifically:</p> <ol style="list-style-type: none"> <li>1. First Nations workforce</li> <li>2. Enabling workforce</li> <li>3. Early career clinicians</li> </ol>	<p>Considering the financial, environmental and social impacts of the work we do</p>
<b>Program level</b>	<p>Programs developed in collaboration with consumer stakeholders and community</p>	<p>Developing services that are collaborative and integrated across the care journey</p>	<p>Giving our staff the confidence to adopt new models of care and ways of working</p>	<p>Enhancing capability to deliver excellence in care with a focus on co-production, integration and partnership</p>
<b>Consumer level</b>	<p>Empowering consumers to lead their health and wellbeing journey</p>	<p>Services are meeting consumer goals and community expectations</p>	<p>Consumers experience a positive work culture and practices that are based on our values</p>	<p>Safeguarding our consumers through a focus on clinical and cyber excellence</p>



## **Clinical Governance Framework**

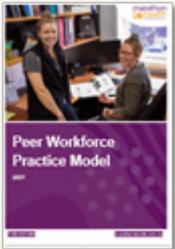
Our Clinical Governance Framework places the consumer journey at the centre of everything we do and explains our commitment to delivering quality services.

Consumer and carer engagement and participation is directly linked to improving the experience and outcomes of the consumer journey – supporting consumers to have a good experience by participating in their care planning and goal setting.



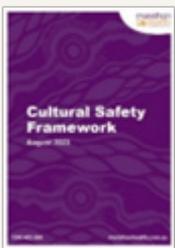
## **Monitoring, Evaluation and Continuous Improvement Framework**

This Framework is key in the collection, review, and improvement of service delivery across the organisation. Consumer and carer engagement fit in closely with this; aiming to also collect information to provide quality services. These documents work together to ensure the continued improvement of Marathon Health's quality workplace, knowledge, and services.



## **Peer Workforce Practice Model**

Our Peer Workforce Practice Model directs a culture of inclusion for people with a lived experience; valuing the knowledge and perspective this can provide to the organisation in providing informed services. This is in line with the goals of the Consumer and Carer Engagement Framework weaving the lived experience perspective into the design and delivery of Marathon Health services.



## **Cultural Safety Framework**

Our Cultural Safety Framework integrates Marathon Health's values and purpose, with First Nations values relating to the importance of connection.

## Diversity and Inclusion

Marathon Health's Diversity and Inclusion Policy outlines our commitment to providing equal opportunities for staff, along with respect and dignity for service users. Marathon Health aims to create engagement opportunities, and work with diverse groups to improve services and support, reflective of the needs of local communities.

### Lived experience

People with a lived experience provide valuable insight into how Marathon Health can support the needs of the community and continue to provide quality services. Marathon Health aims to include people with a lived experience of a health or wellbeing challenge to inform our service design and delivery.

### Aboriginal and Torres Strait Islander peoples

Marathon Health recognises Aboriginal and Torres Strait Islander peoples as Australia's first people, and endeavours to provide culturally safe services and a welcoming workplace. Staff are provided cultural sensitivity awareness training, and we ensure we work in partnership with First Nations individuals, communities, and organisations to design, create and deliver services that focus on the physical, social, emotional, cultural, and spiritual wellbeing, for both the individual and as a community.

### LGBTIQA+

All Marathon Health and headspace offices are ACON registered Safe Places and strive to create a visibly welcoming environment for the LGBTIQA+ community. Staff are encouraged to familiarise themselves with LGBTIQA+ safe terms and are provided resources and training to ensure inclusive practice. Engagement with the LGBTIQA+ community can support Marathon Health to continue providing inclusive and appropriate services.

### Culturally and linguistically diverse people

Marathon Health aims to employ a diverse workforce, reflective of local communities. Translation options are provided, both verbally and written, to ensure informed consent and understanding from service users. Staff are also upskilled to understand how to offer culturally and linguistically diverse services. In our journey to provide culturally inclusive services, Marathon Health seeks ongoing feedback and consultation to increase cultural awareness and enhance the experience of consumers and their carers.

### Disability

Marathon Health supports equal opportunities for everyone as consumers, carers or employees and aims to achieve an organisational culture that reflects this. Marathon Health provides advocacy in this area to the best of our ability, and shares information about independent advocates where out of scope. Marathon Health strives to support the voice of all disability types to be engaged in developing our service design and delivery. This includes assisting consumers and carers where needed who may not be able to provide feedback or consultation independently.

## Young people

Marathon Health recognises the right of young people to participate in all realms of life. Marathon Health will provide a safe environment enabling young people to participate in service design, service delivery and feedback ensuring the voice of young people is heard and incorporated into our practices.

Marathon Health will adapt services to suit age-appropriate engagement. Children and young people who are Marathon Health clients should be involved in making decisions and choices about things that affect them, to a level which is appropriate for their capacity to understand and their decision-making skills.

## Older people

Similar to young people, older people may also need additional considerations in service delivery to assist engagement with Marathon Health. These considerations include alternate options for technology-based activities and considerations for accessibility based on individual needs. Marathon Health will work with these people in case-by-case scenarios to deliver services appropriate to their capacity for understanding and decision-making.

## Rural and remote communities

Within our corporate vision and purpose is a strong emphasis on the importance of servicing rural and remote communities, and ensuring quality services are easily accessible for country Australians. Service delivery needs are often unique to these communities who have additional barriers to engagement. Marathon Health endeavours to address these barriers through engagement of consumers and carers. Creating space for varying levels of engagement can inform how to continue modifying supports to meet community needs.

## The consumer journey

### Consumer and carer engagement across the consumer journey

The consumer is central to Marathon Health's services, and we partner with consumers and carers to develop and deliver safe and high-quality services at every stage of their journey with us.

We value the input of consumers and carers in improving our service design and delivery to enhance consumer experience within the organisation. Consumer and carer input also enables us to better understand community need, informs service development, and enhances business practices to ensure safe and equitable access to support.

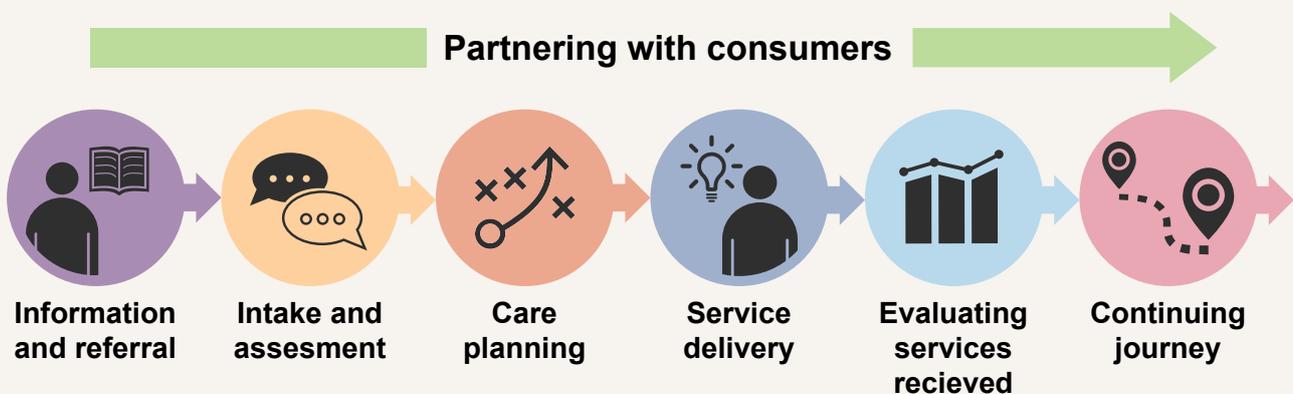


Figure 2. shows how consumer and carer engagement is embedded in the consumer journey across the six stages.



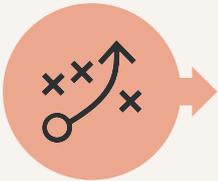
### **Information and referral**

Program and organisational information are understandable, available, and consumers and carers can easily access services when in need. Consumers and carers are instrumental in providing insight for how information is marketed and distributed to ensure accessibility for different groups.



### **Intake and assessment**

Marathon Health designs intake and assessment processes in a way that makes the consumer and their carers feel comfortable, respected, and heard; while making informed decisions on eligibility with the help of consumers and carers.



### **Care planning**

Partnering with consumers and carers at the care planning stage leads to consumer-focused goals, increased engagement, and better service experience. This is a key aspect of delivering consumer-centred supports. Staff provide education around available options for the consumers and carers and work together to implement the most suitable for the individual.



### **Service delivery**

Marathon Health want consumers and carers to feel engaged in their care and are receiving services that meet their needs and the needs of the community. Consultation for service design and collecting ongoing feedback helps guide service delivery to achieve this.



### **Evaluating services received**

Consumer and carer feedback and consultation is used to evaluate service design and delivery and provide knowledge on areas for development. Service users are an integral part of evaluating services, having been engaged in the program for each of these stages.



### **Continuing journey**

Consumers and carers can use their experience of the organisation to provide feedback and consultation for future direction and continuous improvement. Through creating partnerships with consumers and carers we engage in a space of empowerment that continues with the consumers and carers past Marathon Health.

## Acknowledgements

Marathon Health would like to acknowledge the invaluable contributions to this document provided by:

- Optimal Health
- Consumers Health Forum of Australia
- headspace Dubbo Youth Reference Group
- Marathon Health's Consumer and Carer Consultation session
- Marathon Health staff

These parties contributed their lived experience, knowledge and time to the development of the consumer and carer engagement framework.

## Appendix A: Community and organisation consultations

During the development of this document Marathon Health conducted consultation across three stages including internal, external organisations, and consumers and carers.

Marathon Health gives thanks to all internal staff who worked on the document, reviewed and gave feedback during this development phase. Marathon Health also gives thanks to external organisations, consumers and carers who provided consultation throughout various stages of development.

Special thanks go to:

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**Rebecca Edwards**, Consumer and Community Engagement Expert Advisor, Consumers Health Forum of Australia

**Youth Reference Group**, headspace Dubbo

**Marathon Health consumers and carers** who participated in our consultation group

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**Marathon Health** is a not-for-profit, registered charity delivering high quality health and wellbeing services to people wherever they choose to live.

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