HANDBOOK FOR COMPLIANCE ASSESSMENT OF MACY RECOMMENDATIONS

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SECTION 1: INTRODUCTION

The Manitoba Advocate for Children and Youth (MACY) has developed the following handbook to describe the procedure for the creation and compliance assessment of MACY recommendations.

In accordance with section 11(1d) of *The Advocate for Children and Youth Act* (ACYA), the Manitoba Advocate must monitor the implementation of recommendations included in reports following investigations made under section 27 or special reports made under section 31. These reports can be public or not public.

SCOPE

This handbook applies to recommendations made in both reports after an investigation of a serious injury or death of a child, youth, or young adult and in public special reports, undertaken by the Investigations or Research Programs.

This handbook does not apply to recommendations made under previous legislation and previously monitored by the Manitoba Ombudsman. Compliance processes for those recommendations remain the same.

OBJECTIVES

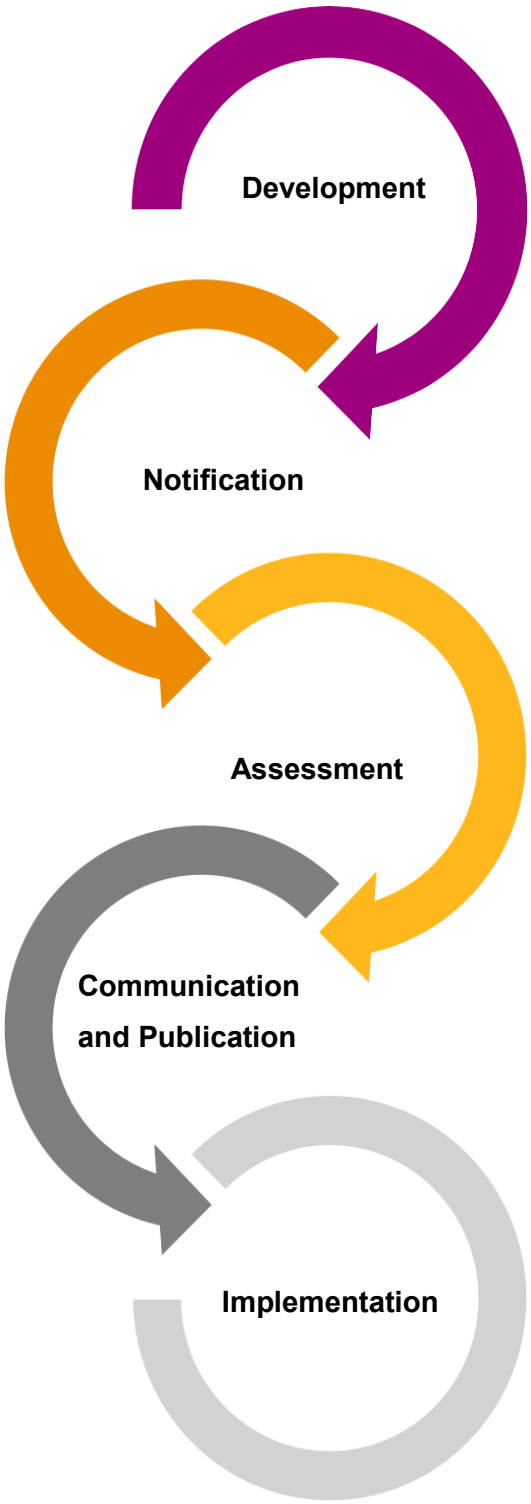
The objectives of this handbook are:

- To ensure accountability, transparency, consistency, and comparability of the compliance assessments.
- To provide a standardized process to guide the MACY Quality Assurance (QA) Program conducting compliance assessments and public bodies tasked with responding to recommendations.

REFERENCE MATERIAL AND ACKNOWLEDGEMENT

This process was adapted from the compliance work of the European Systemic Risk Board, an oversight body of the European Union, with their permission. We are grateful and acknowledge their support and guidance. For more information see the Handbook on the assessment of compliance with ESRC Recommendations (April 2016).

Figure 1. The Life-Cycle of a Recommendation



SECTION 2: RECOMMENDATION DEVELOPMENT

The following section outlines the steps taken in the process of recommendation development. This includes articulating the finding, reviewing and assessing evidence, reviewing existing responses, considering outstanding recommendations, and drafting the recommendations (Figure 2).

PROCESS FOR RECOMMENDATION DEVELOPMENT

The Recommendation Development Form is used to facilitate the process of recommendation development.

ASSESSING THE EVIDENCE

Following the articulation of a finding, a review of best practices takes place. This includes multiple sources of information such as academic articles, grey literature, and more. Particular attention to Indigenous-led and Manitoba practices should be taken in the process of analyzing the evidence including findings from the review of best practices, expert interviews, stakeholder views, and other sources of information. To ensure recommendations reflect the best available evidence, an assessment of the evidence must consider:

STRENGTH

This includes consideration of the type and quality of studies or evidence available, as well as inconsistencies in the findings. For support in evaluating the strength of evidence of research studies consider: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4671889/ and https://ktdrr.org/ktstrategies/evidence.html

APPLICABILITY TO MANITOBA CONTEXT

Evidence should be reviewed with a statement on applicability to the target population and also the Manitoba context, whether the evidence is ‘directly’, ‘partially’, or ‘not applicable’ and why. If evidence is not directly applicable to the population or context, consider the degree to which findings can be extrapolated.

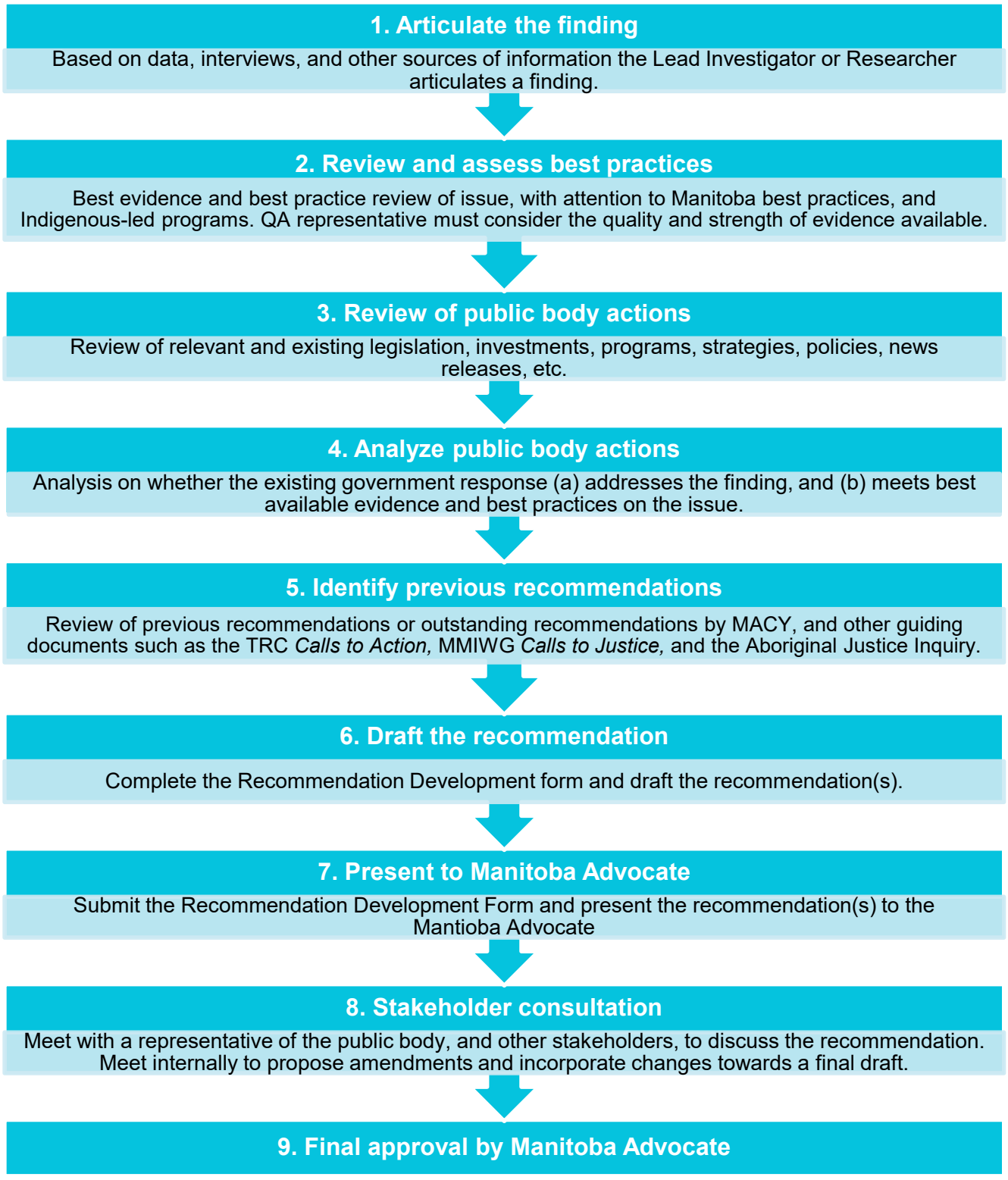
EQUITY IMPACT

Assessment of the extent to which the recommendations may impact health or social inequalities and children's rights. This assessment will pay attention to social differences including class, gender, ethnicity, disability, culture and sexual orientation and how these would be impacted by the recommendation.

COST EFFECTIVENESS

Consideration of the cost-effectiveness and economic evidence should be added, if available. If limited information on cost effectiveness exists, consider adding other ways to estimate cost effectiveness including exploring the counter factual such as the cost of not acting on an issue.

FIGURE 1. PROCESS FOR RECOMMENDATION DEVELOPMENT



FORMAT AND WORDING OF RECOMMENDATIONS

Following an assessment of the evidence, public body actions, and analysis of gaps, recommendations are drafted during the report writing process by the QA representative in collaboration with the lead Investigators and Researchers producing reports. Recommendations should clearly specify the intervention or action to be taken, the actors, and the context or circumstances. Recommendations must be developed with consideration to the compliance and implementation process. The Manitoba Advocate is involved throughout the recommendation drafting process from concept to final wording.

RECOMMENDATION ELEMENTS:

- **Stand alone:** Recommendations should be clearly understood without reference to supporting material (supporting information can be included in the Implementation Guide).
- **A clear public body**: This is the department(s), authorities, agencies, or other public bodies responsible for the implementation of recommendations.
- **A single action:** Recommendations are reviewed for a singular purpose. Whenever possible, if there are multiple purposes, multiple recommendations are developed about the same theme. Actions should be as specific as possible.
- **Details** (sub-recommendations): The details of a recommendation provide compliance criteria, or actions required, from the public bodies to achieve the objective or substantive goal (intent) of the recommendation.
- **Children's Rights Impacted:** Identifying the children's right(s), as articulated in *The United Nations Convention on the Rights of the Child* (UNCRC), that this recommendation is addressing. A recommendation may also reference *Calls to Action* from the Truth and Reconciliation Commission of Canada's (TRC) Final Report, *Calls to Justice* in the Final Report of the Missing and Murdered Indigenous Women and Girls (MMIWG) Inquiry, the *United Nations Declaration on the Rights of Indigenous Peoples* (UNDRIP), or other foundational or guiding documents. This section speaks to the intent of the recommendation.

RECOMMENDATION WORDING

- Concise and unambiguous. So that the target audience knows what to do in practice and the public knows what is being recommended.
- Acknowledge Indigenous People's rights to self-determination. This can include requirements for consultation in the details or primary sections of the recommendation.

- Consider the strength of a recommendation by reflecting on the verb use. The words ‘must’, ‘should’, ‘could’, ‘should not’, or ‘may’ are important in the compliance assessment process.

RECOMMENDATION REVIEW

The QA representative in collaboration with the lead Investigator or Researcher will present recommendation drafts at a meeting with the Deputy Manitoba Advocates and the Manitoba Advocate for Children and Youth. The purpose of this meeting is to discuss recommendations, finalize a draft, and prepare for stakeholder consultation.

STAKEHOLDER CONSULTATION

It is essential to incorporate the views and advise of experts, including experiential people, service users, and public bodies. Once the Manitoba Advocate has agreed to the draft recommendations, a stakeholder consultation is conducted on the full draft recommendations.

CONSULTATIONS MUST ALWAYS INCLUDE:

- The views of those charged with implementing the recommendation, including representatives from the public body being researched or investigated.
- Experts in the field which include academic experts, peoples with lived experiences, and service providers.
- The Elders Council at the Manitoba Advocate for Children and Youth and/or Knowledge Keeper.
- First Nations, Metis, and Inuit (FNMI) communities, FNMI governments, and/or FNMI organizations.

CONSULTATIONS MAY ALSO INCLUDE:

- The families of children, youth, and young adults are consulted, where appropriate to the content and type of special report or investigation.
- Experiential youth through consultation activities, where appropriate to the content and type of special report or investigation.

MEETING FOLLOWING STAKEHOLDER CONSULTATION

The QA representative and lead Investigator or Researcher meets to review the evidence in light of stakeholder responses, revise the recommendation (if necessary) and finalize the Implementation Guide. They will add to the Recommendation Development Form:

- summary of stakeholder responses to the guidance consultation
- summary of the impact of stakeholder responses on the draft recommendation (as necessary)

If it appears from the consultation that stakeholders do not endorse or have concerns regarding a recommendation, the QA representative in collaboration with the lead Investigator or Researcher should articulate:

- the possible reason(s) (for example, they may have concerns over training issues, resources, or capacity)
- whether to amend the recommendation or associated recommendations to support implementation.

RECOMMENDATION APPROVAL

The Manitoba Advocate is provided with the updated Recommendation Development Form with information about stakeholder consultation, the draft Implementation Guide, and a final draft of the recommendation for approval. Final wording and approval rests with the Advocate.

The overall goal is to create recommendations that are feasible and can be implemented to make a tangible difference to the lives of children, youth, young adults, and families in Manitoba.

RECOMMENDATION EXAMPLE

Recommendation 11: The Manitoba Advocate for Children and Youth recommends that the Collaborative Inter-departmental Working Group on Infant Mortality be reinstated and review cases of sleep-related infant deaths quarterly to look at trends and leverage this information to create and implement interventions to prevent future deaths.

IMPACT OF RECOMMENDATIONS 9, 10, AND 11:

- Through the systematic collection and analysis of data, gaps in healthcare will be identified to inform and evaluate interventions that reduce infant mortality, in partial fulfillment of the Truth and Reconciliation Commission *Call to Action* No. 19.

DETAILS OF RECOMMENDATION 11:

- The Collaborative Inter-departmental Working Group on Infant Mortality will meet quarterly in a year.
- Annual reports on trends of sleep-related infant deaths will be produced, detailing suggestions for improvement of programs and initiatives.

SECTION 3: NOTIFICATION OF A RECOMMENDATION

Following the completion of a report under section 27 or section 31 of the ACYA, the Quality Assurance Program will draft Recommendation Notification Letters to all public bodies identified in each recommendation.

The notification of both a recommendation and the recommendation monitoring process occurs in two stages.

1. **Formal notification letters** are sent from the Manitoba Advocate to the Minister of the department named in the recommendation, or other leader of a public body, using the Template Notification Letter. The letter will outline:
    - The name of the report and link to the report.
    - The recommendations made to the department or public body.
    - If not known, the letter will request the **key contact** or responsible person charged with following up on the recommendation. This person may be the Manitoba Advocate for Children and Youth Recommendations Action Planning (MACY-RAP) Committee representative for a particular department.
    - If known, the letter will identify the key contact and the overall monitoring and communication process.
2. Recommendation notification letters will be sent from the MACY Quality Assurance Program to the **key contact** from the public body and will include:
    - The monitoring processes (a copy of this handbook).
    - Recommendation reporting templates.
    - Implementation guidance for each recommendation.
    - An invitation to a virtual or in-person presentation on the report findings and recommendations to familiarize the key contact person with the report.

IMPLEMENTATION GUIDES

Implementation Guides provide public bodies with concrete information regarding the intent of each recommendation and the expectations for compliance, by comparing actions to the compliance scale. Implementation Guides are created by the Quality Assurance representative and shared with key contacts during the notification process.

SAMPLE RECOMMENDATION

Recommendation 11: The Manitoba Advocate for Children and Youth recommends that the Collaborative Inter-departmental Working Group on Infant Mortality be reinstated and review cases of sleep related infant deaths quarterly to look at trends and leverage this information to create and implement interventions to prevent future deaths.

- The Collaborative Inter-departmental Working Group on Infant Mortality will meet quarterly in a year.
- Annual reports on trends of sleep-related infant deaths will be produced, detailing suggestions for improvement of programs and initiatives.

Through the systemic collection and analysis of data, gaps in healthcare will be identified to inform and evaluate interventions that reduce infant mortality, in partial fulfillment of the Truth and Reconciliation *Call to Action* No. 19.

SAMPLE IMPLEMENTATION STANDARD

LEVEL	STANDARDS	EVIDENCE
Fully Compliant	• The Collaborative Inter-Departmental Working Group has met quarterly to review infant deaths for that quarter, and plans to continue doing so in the future. • Annual Reports are produced to detail infant deaths and provide recommendations.	• Terms of Reference outlining a regular meeting schedule, and details on the Annual Report. • Dates and attendees at previous meetings. • Meeting minutes. • Copy of Annual Report.
Largely Compliant	• The Collaborative Inter-Departmental Working Group has met quarterly. • They have not yet developed an Annual Report with recommendations on infant death.	• Terms of Reference outlining a regular meeting schedule, and details on the Annual Report. • Dates and attendees at previous meetings. • Meeting minutes.
Partially Compliant	• The Working Group met once and developed a Terms of Reference; have more meetings scheduled. • Not yet developed an Annual Report.	• Terms of Reference outlining a regular meeting schedule, and details on the Annual Report. • Date and minutes of meeting.
Limitedly Complaint	• The Working Group planned to meet, but the meeting was cancelled/did not occur. • Not yet developed a Terms of Reference, not developed an Annual Report.	• Date, times, and invitees at meeting.

DEVELOPING IMPLEMENTATION TIMELINES

When a new recommendation is issued, the Quality Assurance representative will meet with the key MACY-RAP Subcommittee contact to review the Implementation Guides, and to develop and identify target timelines with benchmarks for implementation. This will also be an opportunity for key contacts to ask questions about process and clarify any outstanding questions they may have.

FINAL IMPLEMENTATION GUIDES AND TIMELINES

The final Implementation Guides and timelines will be sent to the key MACY-RAP Committee and Subcommittee contacts, and filed electronically. These are the standards by which progress on the recommendation will be assessed. Public bodies will have an annual opportunity to request revisions to the Implementation Guide and timelines in January of each year.

SECTION 4: RECOMMENDATION MONITORING SCHEDULE

The assessment schedule for recommendations follows an annual cycle. There is one formal submission and assessment per year. The annual formal submission to the Manitoba Advocate is expected by **May 31 of every year**.

Only recommendations that were issued at least six months prior to May 31 of that year will be assessed.

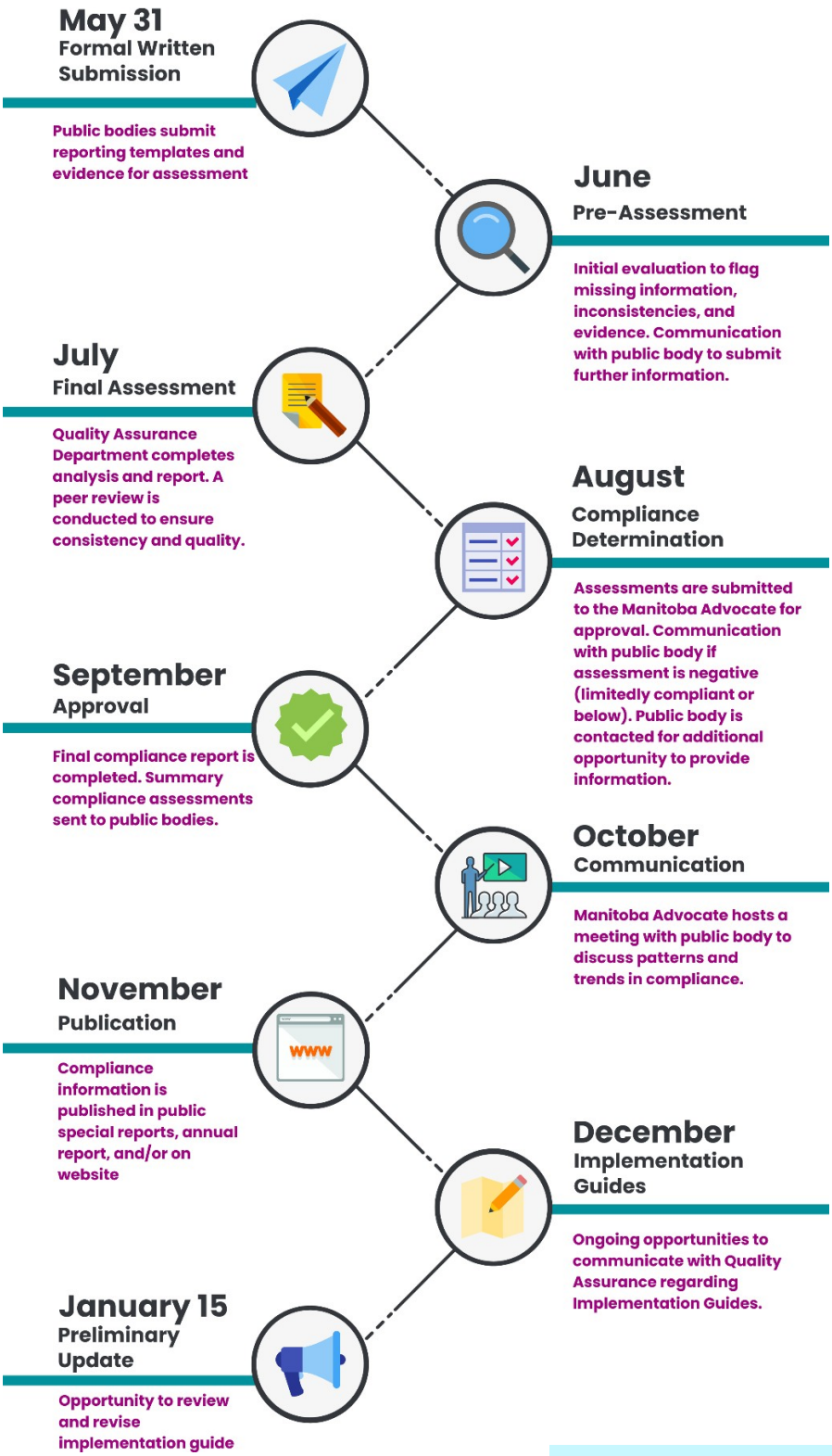
From June until September in any given year, the QA Program follows the assessment procedure outlined below in Section 5. Once assessments have been completed, but prior to the publication of assessment, the Manitoba Advocate will host an annual meeting with all MACY-RAP Committee representatives, which include Deputy Ministers, to report on the status of recommendations at large.

Prior to the close of the calendar year in December, the summary assessment report and compliance levels will be published on the Manitoba Advocate's website and/or in a public report.

By January 15 of each year, key MACY-RAP Subcommittee contacts are expected to submit a self-assessment and, if needed, to review and re-submit the Implementation Guide and updated timelines to the QA Program. The MACY-RAP Subcommittee will meet with QA in January of each year to discuss progress with the implementation of the recommendation.

All submissions from public bodies are to be sent to the Manitoba Advocate by the noted date, by e-mail to: monitoring@manitobaadvocate.ca.

ANNUAL SCHEDULE



Timelines may change depending on circumstances.

SECTION 5: ASSESSMENT

PRINCIPLES OF ASSESSMENT

The following principles guide assessments of recommendations:

- **Fairness, consistency, and transparency** – equal treatment of all public bodies throughout the assessment process.
- **Effective communication** – open and ongoing dialogue with each public body to ensure there are no information gaps.
- **Principle of proportionality** – public bodies' actions will be relative to capacity, responsibility, and legal powers of the public body to which recommendations are addressed.
- **Independence** – assessments will be free from bias.
- **Child-centred** – responses to recommendations will be measured based on their compliance to the intent of the recommendation and the impact on the rights of children in Manitoba, as outlined in the *United Nations Convention on the Rights of the Child* and other guiding documents.

COLLECTING INFORMATION

Timeline: By May 31, each year.

Public bodies mentioned in a recommendation communicate to the Manitoba Advocate any actions they have undertaken to implement a recommendation and/or provide adequate justification for not doing so. To ensure fairness, the assessment is limited to recommendations that were released at least six months prior to May 31 of that year. Information on recommendations released within six months of May 31 of that year will be included in future updates and formal assessments.

The reporting templates are completed by the public bodies and submitted to the Manitoba Advocate, via the monitoring@manitobaadvocate.ca account by May 31 of each year.

If reporting timelines cannot be met, the public body should communicate directly to the Manitoba Advocate. Delays in reporting might result in the inability to conduct an informed assessment. This assessment can be corrected upon receipt of information.

PRE-ASSESSMENT

Timeline: Early June

The pre-assessment is the initial evaluation of the response by the Quality Assurance representative assigned to the recommendation. The main issues with compliance are identified at this stage, and questions regarding the response are drafted.

Objectives of the pre-assessment include:

- Flagging missing information, insufficient justification, and/or unrelated information.
- Highlighting inconsistencies with previous responses.
- Identifying the quality of evidence provided to support each statement, if any.
- Making a preliminary assessment on the degree of compliance.

COMMUNICATION

Timeline: Mid-June

Based on this pre-assessment, Quality Assurance representatives will communicate with key contacts from public bodies to report missing information or any initial questions that may prevent a full assessment of compliance.

Public bodies are expected to submit any outstanding information or respond to outstanding questions.

FINAL ASSESSMENT METHODS

Timeline: July

The **Implementation Guides** outlined in the notification phase will be the basis for the assessment of responses from public bodies.

The QA representatives will analyze each response in reference to both the recommendation and the details. Alternative actions to the recommendations and recommendation details will be analyzed in reference to the intent of the recommendation, as detailed in the recommendation or the Children's Rights Impacted or Impact section of the recommendation.

Answers without sufficient supporting evidence, including written evidence of reports, policies, or meetings mentioned in responses, may be deemed incomplete and may be assessed lower on the compliance scale as a result.

COMPLIANCE LEVELS

The compliance scale measures the public body's level of compliance to a recommendation and sub-recommendation, including relevant compliance criteria.

Numbers are assigned to each compliance level in order to be able to conduct analysis of progress in the compliance of recommendations by report, issue, and public body.

THE LEVELS ON THE SCALE ARE:

- **Fully compliant (FC = 1)** – a public body complies entirely with the requirements of the recommendation.
- **Largely compliant (LC = 0.75)** – requirements have been met almost entirely and only negligible requirements remain to be implemented.
- **Partially compliant (PC = 0.5)** – the most important requirements have been met; certain deficiencies affect the adequacy of the implementation, but without resulting in a situation where the given recommendation has not been acted upon.
- **Limitedly compliant (LMC = 0.25)** – the requirements have been fulfilled to a limited degree, resulting in a significant deficiency in the implementation.
- **Non-compliant (NC = 0)** – none or almost none of the requirements have been met; even if steps have been taken towards implementation, actions taken are not in line with the nature and intent of the recommendation, or no actions have been taken.
- **Insufficiently explained (IE = 0)** – the recommendation was not acted upon and the explanation given for the lack of implementation of the recommendation, or actions taken as alternatives to the recommendation, are not sufficient to justify the inaction or do not meet the intent of the recommendation.
- **Alternate solution (AS = 1)** – the recommendation was not acted upon but a complete and well-reasoned explanation for the lack of implementation of the recommendation has been provided, and a different action has been proposed which meets the intent of the recommendation.

Final Compliance Levels and Colour Codes

FINAL ASSESSMENT

Timeline: July

The final assessment created by the Quality Assurance Program includes:

- A summary of the information provided.
- Analysis of the information provided.
- A determination of the compliance level for each recommendation.
- Justification for compliance level assignment based on Implementation Guides.

PEER REVIEW

Timeline: July

Following the final assessment, the Quality Assurance Program will undertake a peer review process. The aim of the peer review is to evaluate internal compliance with the principles and methods of assessment. Once the final assessment has been carried out, a final cross-check of the compliance assessments and their rationale is conducted by Quality Assurance representatives (other than those who conducted the main assessment) and overseen by the Program Manager of Research and Quality Assurance.

COMPLIANCE DETERMINATION MEETING

Timeline: August

Once the peer review is completed, the Quality Assurance Program will present compliance findings and levels at a meeting with the Deputy Manitoba Advocate of Investigations, Research, and Quality Assurance and the Manitoba Advocate for Children and Youth to review final compliance determinations prior to summary reports being written to address any preliminary issues. Compliance determinations are finalized by the Manitoba Advocate.

COMMUNICATION WITH PUBLIC BODIES

Timeline: August

The Quality Assurance representative will contact the public body assessed and share the summary compliance assessment in the following circumstances:

- if missing information prevents an informed compliance assessment.

- if public bodies receive negative assessments including: non-compliant, insufficiently explained, or limitedly compliant. Public bodies will be given the opportunity to provide further explanation and information which might influence their compliance level.
- if questions remain or evidence is outstanding for summary compliance assessments deemed to be positive, public bodies will be provided with an additional opportunity to submit further explanations or information which might influence their compliance level.

The Quality Assurance Program may reclassify the compliance levels for recommendations to these public bodies in light of any additional information.

COMPLIANCE REPORTS

Timeline: August

The compliance report is drafted as the main deliverable of the assessment. It includes a detailed description of the public bodies' implementation of the recommendation, the level and reasoning, and a colour-coded table with levels.

An additional summary compliance report is prepared, outlining the main findings. The summary compliance report will be made public for public recommendations.

APPROVAL OF COMPLIANCE REPORTS

Timeline: September

Approval of the summary compliance reports is provided by the Manitoba Advocate. The summary compliance reports must be submitted to both the Deputy Manitoba Advocate of Investigations, Research, and Quality Assurance, and the Manitoba Advocate for review. At this point, the reports will be considered one of the following:

- Approved, no comments
- Approved, with minor comments
- Not approved

Once a compliance report is approved, the formal assessment is deemed completed. If a compliance report is not approved, actions will be taken to revise and resubmit the compliance report for approval by the Manitoba Advocate.

SECTION 6: COMMUNICATION AND PUBLICATION

Compliance information is made available publicly by the Manitoba Advocate through MACY's website, annual report, and public reporting.

COMMUNICATING ASSESSMENT REPORTS

Timeline: September

The Quality Assurance Program submits the summary compliance reports to the public bodies.

If a public body disagrees with the Manitoba Advocate's compliance report and compliance determination, it may request an annex reflecting that fact be included in the publication of the summary compliance report.

MEETING WITH THE MANITOBA ADVOCATE

Timeline: October/November

Following the notification of summary compliance reports, the Quality Assurance Program will organize a meeting between the Manitoba Advocate and the public body (e.g., MACY-RAP table of Deputy Ministers). At this meeting the Manitoba Advocate will report and discuss trends in overall implementation of recommendations by the public body in question and by issue.

MACY-RAP Representatives will have the opportunity to ask questions.

PUBLICATION OF SUMMARY COMPLIANCE REPORT

Timeline: November/December

After the compliance assessment on a public recommendation has been finalized, the Manitoba Advocate publishes a summary compliance report on the Manitoba Advocate's website. The summary report also includes an analysis of progress on each recommendation.

In addition, a summary of the compliance levels will be available publicly through the website and the assessments of public recommendations are included in the Manitoba Advocate's annual report.

ANALYSIS AND PRESENTATION

Analysis of the recommendations is presented:

1. **By Compliance Level** – recommendations are aggregated by compliance level.
2. **By Issue** – each recommendation is coded with a specific systemic issue they are addressing, and progress on an issue is presented.
3. **By Public Body** – each recommendation is addressed by a primary department which responds to recommendations. If multiple departments are addressed, the recommendation is coded as Government of Manitoba (GOM). Each public body is provided an overall assessment on compliance with all recommendations addressed to them.

SECTION 7: PRELIMINARY WRITTEN SUBMISSION

The following section describes the activities between the publication of summary reports and the next annual submission by public bodies.

PRELIMINARY WRITTEN UPDATE

Timeline: January 15 of each year

By January 15 of each year, representatives from each public body or department will submit a preliminary written update on progress made for each recommendation, which includes a self-assessment and a revised timeline for implementation, if needed.

Public bodies are to submit their preliminary written updates to the Manitoba Advocate by email to: monitoring@manitobaadvocate.ca.

REVIEW OF PRELIMINARY UPDATE

Timeline: January

Quality Assurance representatives will review the preliminary update and schedule a meeting with the MACY-RAP Subcommittee representative to discuss concerns, questions, and progress in the implementation of the recommendation. This is also an opportunity to discuss alternative solutions for recommendations that experience barriers to implementation as written.

SECTION 8: RECOMMENDATION IMPLEMENTATION

If, following a final assessment, a recommendation is deemed “Fully compliant” and complete by the Manitoba Advocate:

- The Manitoba Advocate will submit a letter to the Minister(s) of departments or leader(s) of a public body mentioned in the recommendation with cc. to the MACY-RAP Committee Representative to this effect.
- The recommendation will be deemed “Fully compliant” on the website.
- Information will be highlighted and reported in the annual report.

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