

Community Engagement



Community Engagement Report

CEAN Workshop:

**Public members in advisory roles with
health care services:**

What is our role?

How do we enhance our effectiveness?

Event Date: March 12, 2011

Prepared by Community Engagement

Community Engagement Advisory Network

Workshop: March 12, 2011

Public members in advisory roles with health care services: What is our role? How do we enhance our effectiveness?

Introduction

The Community Engagement (CE) department of Vancouver Coastal Health (VCH) is supported by a group of members of the public, the CE Advisory Network (CEAN), to enhance patient and public involvement in health service planning and decision-making. It is our collective goal to conduct two events each year, providing an opportunity for members of VCH staff and leadership to meet with members of CEAN to discuss health service issues of concern to both VCH and the public. Past forums have covered topics such as cross-cultural health needs, advance care planning, and supporting VCH's new '*People First*' lens. Based on feedback from CEAN members at our forum of November 2010, it was agreed that the March 2011 event should provide an opportunity for members of the public and healthcare leaders to discuss the *role and effectiveness of public advisors within healthcare*.

Background

'*People First*' is widely understood by health care providers as a commitment to patient-centered care, and includes the involvement of patients and the public in planning and decision-making for healthcare policy and system redesign. The 2006 BC Primary Health Care Charter adopts the 'Patients as Partners' approach, which includes participation in decision-making for individual care, quality improvement and health care redesign. 'Patients as Partners' is also part of the Ministry of Health Services' Key Result Area 3 ('Implement a Model of Integrated Primary and Community Medical Care').

As our regional and provincial health systems move toward increased involvement of public in advisory roles, all stakeholders need to be well prepared for these opportunities. Members of the public need orientation to our systems as well as ongoing support and education to ensure they feel confident and comfortable in these roles. Members of staff and leadership may also need support as well so they can benefit fully from the public perspective that lay advisors bring.

The VCH CE department has developed several tools and workshops over the years to support various committees but a coordinated approach is now needed. In partnership with Impact BC Patient Voices Network, the consumer and family advisory committees of Vancouver Community Mental Health Services, and other groups who include public advisors in planning processes, we plan to create a joint orientation and education program to support the participation of public members at our planning and management tables. This workshop is one of many steps toward this new joint program.

Workshop Planning, Agenda and Attendance

Meetings to plan the workshop were held with CEAN members and staff from VCH and Impact BC in January and February .

The agenda for the day included:

1. A presentation from Dr. Jeff Coleman, Vice President, Regional Programs and Service Integration;
2. A panel discussion with members of the public and staff who sit on advisory committees together, facilitated by CE Director Lucie McNeill;
3. Small group discussions to brainstorm ideas about the role of, and enhanced support for public advisors with healthcare services.

A total of 52 people attended the workshop, with strong representation from members of CEAN (17) and the Patient Voices Network (11), members of VCH Mental Health Services advisory committees (6) and the Richmond Integrated Health Network (IHN) committee (1), as well as staff and leadership from VCH (11), Impact BC (4), the Ministry of Health (1) and the Fraser Health Authority (1).

Opening Remarks

The workshop opened with comments from Dr. Jeff Coleman, explaining the timely nature of this topic at VCH. The health authority wishes to support public involvement at our planning and management tables, as one of the perspectives that feeds into decision making. Clarity is needed about the roles for public members, as well as skills and support, but we also need feedback to inform VCH professionals and staff so they can maximize engagement opportunities with the public.

The expected outcomes for the workshop were to inform:

- The new handbook that will provide an overview of advisory committee roles, responsibilities and skills
- Revisions to the orientation program for members of the public serving in advisory roles
- An initial plan for skills-building workshops to be piloted over the coming year

Panel presentation

To provide context and background for attendees, a panel of four people spoke about their experience working together on advisory committees:

- *Louise Donald* (CEAN member) and *Pat Porterfield* (VCH Regional Leader, Palliative Care) sit on the *VCH Regional Palliative Care Community Reference Committee*, a committee of 8 members of the public and two members of VCH leadership who have met since 2006 to guide implementation of VCH's palliative care strategy.
- *Renea Mohammed* (Mental Health Peer Support Coordinator and Consumer Representative) and *Kim Calsafferri* (VCH Manager for Mental Health Rehabilitation, Consumer Involvement & Family Support) have worked together on a number of public advisory committees since 2005 to ensure consumer and family 'voice' inform planning for all mental health services.

This panel presentation included a large-group discussion with all attendees, raising key ideas that were to be echoed later in the workshop.

What is the role of public members in advisory positions?

- To bring the 'voice' of the public perspective to VCH planning, policy, service delivery and evaluation
- To bring the 'expertise' that comes from lived experience of our services
- To work with healthcare providers toward positive change

- To bring gaps and problems to the attention of healthcare decision-makers: members of the public bring a perspective to healthcare that is different from staff, who already know the system well and may not realise how their familiarity forms their perspective on services
- To act as a 'bridge' to the wider community

What are some skills that make a public representative effective in these roles?

- Able to listen well, and speak up and ask questions with confidence
- Being selective and strategic about when to share personal experience
- Able to value one's own experience, and also see this in the context of others' experience
- Learning and understanding the different types of skills required for advisory work, and applying different skills as appropriate

What is the role of staff in supporting public participation?

- Facilitating optimal use of public involvement beyond tokenism, for example advocating for sufficient numbers of public representatives (so that public members feel comfortable to speak out), and providing an atmosphere that welcomes and values public input
- Providing clear definition of the role and scope of public participation
- Acting as a bridge to healthcare leadership, bringing the public perspective to senior tables
- Acknowledging and appreciating the commitment and effort shown by public members who devote their personal time to prepare for and participate in these opportunities.

Speakers and attendees generally agreed that the overall purpose of working together is to create a better healthcare system, and that there are many shared skills that help staff and public work well together:

- Viewing meetings as an opportunity to exchange knowledge, learn from each other's roles and perspectives, develop a new understanding of issues, and new possible solutions
- Being open to listen to each other, and sharing mutual respect for the expertise brought by each person at the table

In the words of one participant:

"When all advisory members see that their input is valued, and all are participating with equal commitment, that's when real movement and change begins."

Small Group Discussions

Following the panel and large group discussion, participants moved into small groups to discuss four main questions. Discussions were recorded and, after completion, a summary of key points for each topic was presented to the plenary. Results of small group discussions are summarized below.

1. What are my roles, as a member of the public in an advisory position with health care services?

- Bring your own lived experience and personal stories, and the 'voice' of others who cannot be there
- Bring an emotional connection and compassion to the healthcare discussion
- Raise the profile of patient and family priorities in healthcare planning
- Share 'expertise' as patient or family member, as a complement to staff perspective
- Provide constructive criticism, raising awareness of gaps in service and sharing in discussion of possible solutions
- Shape and inform the development of programs and policy at all levels of the health service, from front-line services to the board and senior management level
- Liaise with community, acting as a conduit between the public and the health system

Ratio of staff to public

During this discussion, some group members pointed out that, in order for members of the public to fulfill these roles, it is important that advisory committees provide seats for more than one or two members of the public. Involving a greater number would increase the likelihood of active participation and more productive dialogue.

2. What skills do people need to fulfill advisory roles for health care services?

Participants suggested that people should consider advisors as having a diverse set of skills to use at different times, in order to move ideas forward:

- Comfort with challenging the system - a sense of 'voice'
- Communication skills, with emphasis on both listening skills and how to provide challenging feedback in ways that are business-like, non-adversarial and collaborative
- Open-mindedness, flexibility, tolerance
- Relationship-building skills
- Tenacity and patience
- Networking skills, to bring what you learn at committee back to community (keeping in mind the imperative of confidentiality)
- Research and analytical skills
- Understanding of group dynamics and teamwork
- Ability to be action-oriented, taking shared responsibility for committee work where possible (e.g. not requiring the Chair to take responsibility for all action items)
- Meeting facilitation skills
- Capacity to appreciate the limitations of the committee's scope and influence

There was also discussion about skills needed for staff to be effective in working with the public at planning and management tables, such as:

- Ensuring the meeting and discussion is conducted in a way that public members can fully participate, by being attentive to health authority jargon, providing sufficient preparatory materials, and providing opportunity during meetings for discussion of the public perspective
- Being open to bring the public in early during planning processes
- Acting on feedback where possible, and being able to explain clearly and candidly when feedback cannot be acted on
- Following up with public members to let them know when and how their feedback has been used

3. What can VCH/PVN provide for members of the public at the outset in terms of orientation, preparation and support so people can step into these roles with confidence?

- The structure of VCH, the Ministry of Health and local agencies providing relevant services, and how these work together
- Background information on committee topic (e.g. patient safety, palliative care, etc.), from regional and provincial sources (and from national or international sources, if helpful)
- Understanding the various roles in meetings
- Review of the confidentiality policy and clarity about how to apply this
- Communication skills: how to provide input
- Group dynamics, teamwork and facilitation skills
- Purpose, scope and tasks of the committee
- Biographies/background for all committee members
- A glossary of acronyms
- Mentoring systems, to connect more experienced advisory committee members with new members, and to connect a staff member with the new members

It was also suggested that it would be helpful to have one orientation session with members of the public, a separate orientation session for staff, and then to bring the two groups together for a joint session at the first committee meeting. This joint meeting could also serve as an arena to discuss the meaning and understanding of 'patients as partners', and also develop the Terms of Reference to guide the committee's work.

4. What can VCH/PVN provide for ongoing education, monitoring and evaluation to support public members in these roles?

Ongoing Support

Suggestions to support individual public members on an ongoing basis included:

- Receive meeting minutes promptly, and receive agenda and complete information before meeting in enough time to review
- Ongoing preparatory sessions with members of public before meetings
- Debriefing after meetings, especially after the first few initial meetings
- Provide tools for public committee members to explain the committee's purpose and work to community groups

Ongoing Education

There were also suggestions for workshops that could act as joint networking events for advisory members across our region:

- An update meeting with staff if significant changes occur in the healthcare system
- Media training
- Communication, negotiation and influencing skills
- Annual or semi-annual events to bring together members of various advisory committees that are successful, for shared learning and discussion
- When possible, invite public members of committees to staff learning sessions
- 'Health literacy' - how to read and understand complex materials
- Assessment tools for members of public to identify gaps in their own knowledge or skills, and mechanisms to provide this feedback to committee organizers for action on new education workshops
- Education to be provided in a range of ways: online, webinars, in person, and paper-based methods

Monitoring and Evaluation

It was generally agreed that the committee's process and activities should be monitored and evaluated on an annual basis, looking at the Terms of Reference, reviewing the committee's work, and discussing how the committee can enhance its effectiveness.

Next Steps

By the end of March, VCH and Impact BC staff will have met to review workshop feedback and form action plans. The Community Engagement department will update all workshop participants about the progress of these plans as they are developed and implemented, seeking feedback and joint planning at all stages. Participants will also have the opportunity to provide feedback on any materials or training plans developed as a result of the workshop.

It is hoped this event is the first of many opportunities for public and staff members of various advisory groups in our region to meet on a regular basis, sharing their experience as they strive with us to improve healthcare services.

Evaluation

Workshop evaluation forms were completed by **40 of 52** participants. Responses indicated a high level of satisfaction with all aspects of the event and 37 respondents strongly agreed (28 gave a 5 rating) and agreed (9 gave a 4 rating) with the statement that the workshop had met their expectations.

Asked what they liked about the workshop, respondents stated:

"I gained a lot of insight on how to be an effective committee member. I also learned about some of the obstacles I may come across."

*"The 'just right' balance between open dialogue and learning from speakers & panel."
"Good honest and pragmatic sharing of perspectives."*

"This feels closer to where the action happens. The possibility of real change rears its head."

"I thought that the issues discussed were excellent and the participation was like a breath of fresh air. CEAN is definitely on its way in becoming a force."

Asked what one or two things might have improved the workshop, several respondents noted the room could have been larger to accommodate small group discussion. Some would have preferred a longer session. There was also a note about the confusing parking directions.

On the question of one or two valuable ideas or information participants are taking away from the workshop, respondents stated:

"VCH commitment to public involvement in advisory group sessions. Sharing ideas with PVN and making these contacts was wonderful!"

"The challenge we face in integrating the public at so many levels within our organizations and the need to have a 'public lens' on everything we do."

"Public input is vital to our public health system and its effectiveness. Let's do our part!"

"The fact that the Health Authority seems to be really concerned with dialoguing with the public."