

# Patient & Public Engagement at VCH: Senior Leadership Survey 2016

In December 2016, the Community Engagement (CE) department sent out the fourth annual Patient & Public Engagement (PPE) Survey to VCH staff and Board Leadership. The survey is intended to assess the health authority's capacity for, and culture of, patient and public engagement. This year, we included a question around the potential use of online engagement to reach out to populations. The CE team was pleased to receive 133 responses to the survey. On behalf of the CE team, we'd like to thank those of you who participated in the survey. Here is a snapshot of the results:

## What We Asked

Survey Questions fell into 5 categories:

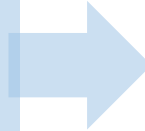
**Integrity of Design and Process** – Does leadership feel that VCH has an explicit and organized strategy with regards to patient & public engagement?

**Participatory Culture** – Does VCH have a cultural commitment to patient & public engagement values and principles within its structure?

**Influence and Impact** – Is VCH Leadership aware of the results of engagement processes and how they have influenced change within the organization?

**Collaboration and Common Purpose** – How aware is VCH leadership about new relationships with stakeholders, the public, funders, community organizations and government departments that have formed due to engagement work happening within the organization?

**Summative Questions** – Individual's opinions about how VCH is engaging with the public, and what resources are in place for such engagement.



## What We Heard

### Integrity of Design and Process:

- More than half of the respondents were aware that VCH has an organized patient & public engagement strategy in place, however less was known about VCH's participation in international and national public engagement initiatives.
- Many respondents were aware of direct resourcing for engagement within VCH, but less was known about indirect resourcing, such as funding from large scale projects to support engagement processes.

### Participatory Culture:

- The majority of respondents believed that VCH is culturally committed to doing patient & public engagement work and felt that public input is used in service planning and decision making.
- Over 60% of respondents however did not feel they had received an adequate amount of training in public engagement to support them in their roles.
- There was not a lot known about whether the organization seeks public input when doing financial planning or when planning capital projects.

### Influence and Impact:

- Overall there was a lack of knowledge about the influence and impact of patient and public engagement within VCH.
- While some were aware of how engagement activity influenced relevant decisions at the program level, less was known about how the Board takes into account patient and public input.

### Collaboration and Common Purpose:

- The majority of respondents agreed or strongly agreed that patient & public engagement work fostered collaborative relationships with stakeholders and that trust was built as a result.

### Summative Questions:

- There were mixed opinions on whether VCH has an appropriate level of engagement activity, but the majority felt that the appropriate resources to support this work are lacking.

**85%** of leaders would use online survey tools if they were available to reach a larger audience

**85%** of leaders feel they have decisions to make that would benefit from engaging with patients & families

## Recommendations from our Leaders

### INCREASE EDUCATION & AWARENESS ABOUT CE

- Increase awareness and education among staff about the great work taking place and resources available.
- Professional development opportunities should be offered and promoted.
- Increase awareness of resources available to staff other than CEAN.

### ENGAGE MORE DIVERSE POPULATIONS

- More equitable engagement of populations within VCH needed. Efforts to engage Central Coast community.
- Need to reach out to those that do not speak English and those who would not readily attend an engagement event.

### PRIORITIZE CE AT AN ORGANIZATIONAL LEVEL

- Use accreditation results to prioritize engagement throughout the organization.
- Build in sustainability for CE and develop a more coordinated organizational approach to engagement.

### REFINE AND SIMPLIFY CE PROCESSES

- Simplify current process for accessing CEAN involvement.
- Engage with patients at point-of-care, e.g. acute, rehab, community, public health, residential care services, etc.
- Involve public more when decisions are being made.
- Address staff anxieties about bringing patients/families to the table.

### AVOID TOKENISTIC ENGAGEMENT

- Meaningful engagement needed to avoid tokenistic engagement.
- Engagement needs to be more grassroots and conversation-based where real input can be shared.

### THINK BEYOND ENGAGEMENT

- We need to work with our partners and our clients to do more than engage the public but actually effect change.

## Q: What does patient and family-centred care mean to our Leaders?

*"Putting patients and families at the centre of all that we do; listening, engaging, explaining what we do and why what are our challenges and theirs and how we can support one another."*

*"Asking the patient and family what is of value to them and aligning our organization's strategies to provide that value."*

*"A framework for how we operationalize care."*

*"Meaningful engagement of clients and families in their care, in the development of services, and in the evaluation of services."*

*"That we include the patients and families in decisions that impact them. In a broader context it means that we proactively and appropriately engage the community in planning for health care services in their communities."*

*"Putting the needs of the patient and family above all else."*

*"A safe environment whereby patients/families are able to freely express "what matters" to them and great consideration is taken such that patients are heard and respected and actions reflect what was shared or important to patients/families."*

### Based on what we heard, this year the CE Team will...

1. Seek opportunities to make training available for staff and leaders that encourages patient and public engagement
2. Embed the value of engagement into new staff orientation sessions
3. Find ways to demonstrate and strengthen awareness of the value of patient and public engagement in strategic development and decision making
4. Develop tools and mechanisms to engage with more diverse populations, including the creation of online communities
5. Simplify existing Community Engagement processes to make it easier for leaders and staff to access patient and public engagement tools and resources

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