

Consent Form

Patient and Caregiver Stories for Change

Background information.

The Community Engagement (CE) Team supports members of the public to provide feedback and help shape health care services within Vancouver Coastal Health (VCH) (for more information visit cean.vch.ca). The CE Team is providing a new way for patients and caregivers to participate in quality improvement through *Patient and Caregiver Stories for Change*. This initiative will collect patient and family caregiver stories about the experience of receiving health care services within VCH. These stories will be used to help staff understand what it is like to receive care and help staff to learn what we are doing well and what could be changed in order to improve patient and family experiences. Stories may be submitted by patients or caregivers (anyone who provides support to a close friend or family member) of people who have received care within VCH.

The goal of this initiative is to build a library of patient and caregiver stories. These stories may be posted anonymously on the Community Engagement Advisory Network Website (cean.vch.ca). Staff within VCH will be able to search the story library and find stories that can be used for a variety of purposes, such as education, or quality improvement. For example, stories may be used to educate new nurses on how to provide patient-centered care. This will allow the patient voice to be included in decision making.

Your participation is voluntary.

Your participation is voluntary. You have the right to refuse to participate. If you decide to share your story, you may choose to withdraw your story at any time by contacting the CE Team. As the story may have been posted publically on the CE Website, we are not able to guarantee that the story has not been used elsewhere, but we can take it off of the website and delete it from our computers.

What happens if you decide to participate?

If you decide to participate, we will give you a template that will help guide you to write a short story that is less than 500 words. You can take as much time as you need to complete your story. When you are done, you can submit the template to the CE Team by email to ce@vch.ca. If you require a paper copy of the template, you can contact Belinda Boyd or Saori Yamamoto to receive a copy by mail (with return postage).

Your story will not be edited, but names may be removed or changed to protect privacy. Your story may be posted anonymously on the CE Website and/or shared with staff within VCH. Your story and contact information will be stored on the CE Team database within VCH.

Are there any risks involved with participating?

While your story will be anonymous, certain details in your story may be identifiable. Receiving health care services can be a personal experience, please consider what you are comfortable sharing publicly. If you are a family member or caregiver, consider how your loved one would feel about you sharing their personal information. It is best to ask for their permission first before submitting your story to VCH. Writing your story may be upsetting if you and your family have had a negative experience. Please let the CE Team know if you have any concerns.

What are the benefits to participating?

Sharing your story can help staff to learn from your experiences which could help improve health care services in the future.

Will you be paid for participating?

You will not receive payment for your participation.

How will your privacy be maintained?

Your confidentiality will be respected. Your contact information will not be released without your consent. All stories will be shared anonymously when posted online or used by other staff members in VCH. Your contact information will be stored on a password protected computer database that can be accessed only by the CE Team.

Who can you contact if you have questions?

If you have any questions or concerns, you can contact: Belinda Boyd (Leader, Community Engagement) at Belinda.Boyd@vch.ca / 604-708-5334 or Saori Yamamoto (Community Engagement Advisory Network Coordinator) at Saori.Yamamoto@vch.ca / ce@vch.ca / 604-714-3779.

How will your story be used in the future?

Your story may be used for a variety of purposes within VCH. This may include, but is not limited to, education and training of staff, quality improvement projects, board meetings, or conferences. We may like to contact you in the future to ask additional questions about your experience, invite you to share your story in person, or to participate in other quality improvement or education opportunities related to the topics identified in your story. Can we contact you in the future?

Please tick one of the options below.

Yes, please contact me in the future. No, I do not want you to contact me in the future.

Consent and Signature

Participation is entirely up to you. You have the right to refuse to participate. If you decide to take part, you may choose to remove your story at any time without giving a reason and without any negative impact on your access to further services from Vancouver Coastal Health. Your signature below indicates that you consent to participate and share your story with Vancouver Coastal Health.

Participant Name

Participant Signature

Date (dd/mm/yyyy)

Participant Email

Participant Phone Number