

Ontario Health Team

Patient, Family and Caregiver Partnership and Engagement Strategy

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Language

Our Ontario Health Team strives to include the diverse lived experiences that comprise our North Western Toronto Ontario Health Team (NWT OHT) community. In this document, the terms “patient”, “client”, “community member”, and “resident” will be used interchangeably to describe those that use various health care services.

The term “caregiver” is sometimes not inclusive to all the people who participate in a person’s care. We will be using additional terms like “care partner” and “care advocate” to incorporate all people who help with or advocate for another’s care.

Introduction

Our Patient/Client, Family and Caregiver Advisory Committee (PFAC) has developed this partnership and engagement strategy with the help of the NWT OHT Secretariat members. Our Committee is comprised of a diverse group of patient/client, family and caregiver advisors whose lived and life experiences provide our OHT with invaluable knowledge on how we can improve our services, programs and initiatives through person-centred care. All of our PFAC members and our Senior Executive Committee of the NWT OHT, which is the decision-making body of our OHT have endorsed this document and were empowered to develop this engagement strategy.

Developing our PFAC

In August 2021, the NWT OHT set out to develop a PFAC that would be uniquely composed of community members who are representative of the North Western Toronto community. Our Senior Executive Committee came to the collective decision to house the PFAC selection and recruitment process within the Health Equity Committee as that group is responsible for helping the OHT align with the principles of equity, diversity, inclusion and anti-racism. Expression of Interest Applications were distributed through our partner organizations asking for any members who were interested in co-designing OHT initiatives to put forward an application. We received many applications across our partner organizations from those who were enthusiastic to join in collaboration and partnership.

Recruitment and Selection Process

Our Health Equity Committee developed a skills matrix that would be used to select our candidates and priority would be give those who self-identified with gender identity, race/ethnicity, Indigeneity, preferred/spoken languages, immigration status, disabilities, sexual orientation, age and any other self-identifying categories they felt comfortable in sharing with the selection committee. This ensured that we recruited a diverse and representative group of PFAC members to inform our OHT work.

Our Process

Our NWT OHT PFAC is comprised of 10 advisors who met weekly to discuss the committee's Terms of Reference, the Partnership and Engagement strategy and other OHT work.

We spent a total of 12 hours over 6 weeks dedicated to ensuring that the partnership and engagement strategy was reflective of our community.

Goal

As a collective of health care providers, our goal for this strategy is to provide our plan for engaging and co-designing with our NWT OHT PFAC and, more broadly, within our community. This document was created in consultation with our PFAC and has been shared across our NWT OHT to our various working groups and committees.

This strategy was designed pursuant to the Ministry's guidance document¹ and adapted as necessary to the local context of our OHT.

Strategic Goal

“To provide our patients/clients, families, caregivers/partners and community members with reliable, safe, equitable, accessible, culturally-safe, and barrier-free care in a respectful manner through partnerships with organizations across multiple sectors in our community. This would be done through an Anti-Racism and Anti-Oppressive practice.”

Guiding Principles:

These guiding principles are the foundation of how we will work together with both community and health care organizations to provide equitable and accessible care that center our community needs.

Partnership and Collaborative Co-Design

Authentic, timely, and ongoing engagement to inform meaningful and effective partnerships. This engagement process will be mutually beneficial and will actively involve all participants.

Learning

All NWT OHT activities should include patient/client, family, caregiver, and provider partners who are ready and willing to learn from and about each other in an open, collaborative and bi-

¹ Ontario Health Teams, Patient, Family, and Caregiver Partnership and Engagement Strategy: Guidance Document (2021), 1-9.

directional manner. This may include other participants' experiences and perspectives, facts about the issue at hand, or how the system and the care delivered within it may improve.

Empowerment

Patients, families and caregivers should be empowered to openly express their needs, perspectives and concerns in a safe environment without fear of reprisal.

Accountability

Healthcare providers and organizations must be held accountable to their patient/client/community populations and there will be ongoing communication with patient/families/community members on how feedback is incorporated into improvements or changes. Communication can be encompassing of training, education, resources and having this be accessible to the NWT OHT community.

Transparency

Transparency means that healthcare professionals and organizations are honest and open in all communications when it comes to engaging with patients, families and caregivers, including positive and negative implications of treatment. Healthcare organizations should strive to list and provide access to all policies and procedures and make this available to patients/clients and community members.

Responsiveness

Being responsive means that healthcare providers and organizations recognize the value of and act upon the feedback received from patients/clients, their families and caregivers and the general public. It is important to recognize that concerns expressed by these stakeholders provide an opportunity for the NWT OHT to improve. Responsiveness from health care organizations include dignity, confidentiality, autonomy, prompt attention, and social supports².

Respect

Health care professionals and organizations are expected to show respect for their patient/client, family and caregiver partners by actively demonstrating appreciation and understanding of their time, ideas, disabilities, challenges, knowledges, accessibility needs, lived experiences, worldviews and cultural backgrounds.

Equity, Diversity and Inclusion

Healthcare providers understand and respond to the unique needs of those who have been historically disadvantaged due to systemic racism by the healthcare system. They must demonstrate and value the diversity of their communities and health needs. Their services will be accessible with regard to mental and physical disability and will strive to remove those barriers to participation and create a safe environment for the community.

Empathy and Compassion

Healthcare providers will strive for care that provides a safe space for patients/clients to feel heard and feedback welcome. Ongoing communication and reporting back to community members is essential for empathic and compassionate care.

² Charles Darby et al., *World Health Organization: Strategy on Measuring Responsiveness*, 1.

Engagement Domains

These engagement domains are areas where we will continue to engage with our PFAC and our community at large to ensure that our activities and initiatives are providing person-centred care.

Policy, Strategy, and System Level Discussions within NWT OHT

NWT OHT and its members work together with patients, families and caregivers to enable system-level changes by removing barriers, like those pertaining to systemic racism. This can include driving improved health outcomes, influencing health priorities, influencing our future OHT plans and processes, and advocating for appropriate resources needed to complete projects. By embedding patient, family and caregiver partners within collaborative decision-making structures, OHTs will be enabled to foster a culture of system co-design that is more likely to be long-standing and effective. Co-design can be a way of including and creating more balanced and inclusive health care solutions.

Program and Service Design

NWT OHT engages in partnership with patients/clients, families and caregivers for the purpose of improving specific health programs, services, and other organization-wide projects such as quality and safety improvement initiatives, and transparent and open dialogue with senior leaders of the OHT.

Governance and Leadership

Healthcare partners at a senior level are receptive to, and have enabled opportunities for, patients/clients/community participating in collaborative decision-making. There is transparency and accountability in the interactions with senior leadership.

Personal Care and Health Decisions

Engaging in the domain of personal care and health decisions means healthcare professionals must partner with patients/clients, families and caregivers in processes of shared decision-making and care. This includes providing patient/clients/community members with care that is specific to their needs (culturally-safe and relevant care, care for aging population).

Engaging in Community

Healthcare partners make an effort to engage and meet with the community outside clinical settings - e.g. community events - and provide community specific context. This would include considering socioeconomic constraints of the community and actively identifying potential engagement barriers the community might face. We must consider non-traditional ways of engaging, such as through community-led initiatives.

Virtual Methods

Engaging in this domain means that health care providers will evaluate and use multiple methods of including patients/clients that focus on accessibility and inclusion.

Engagement Approaches

These engagement approaches were adopted from the best practice guidelines of the International Association for Public Participation (IAP2) model³ as well as Health Quality Ontario's Patient Engagement Framework⁴. They provide the ways in which we commit to engaging with our community through various different mixed methods.

The NWT OHT PFAC has outlined the methods of engagement through various levels of engagement with the NWT OHT community. In discussing these approaches, it was important to the group to address and emphasize that these methods of community engagement should consider accessibility and potential barriers throughout the process which includes being aware of and having access to all relevant Policies and Procedures.

Share

Goal: Health organizations provide information that is easy for patients/clients and their caregivers/partners to access, understand and act upon, help to support personal care decisions, as well as to support engagement about a program, service, policy or decision. This information will be made accessible to the public for accountability and transparency of our health care organizations. Healthcare organizations will actively listen to the community when concerns are raised.

Methods:

- Social media updates
- Notice on NWT OHT website
- Newsletter
- Videos (with transcript)
- Podcast
- Posting on housing notice boards, elevators, with partner organizations offices
- Flyers
- Initial intake of a patient/client at an organization

Consult

Goal: Health professionals, organizations and system planners get objective and confidential feedback from patients/clients and their caregivers/partners on a health issue, policy, or decision that needs to be made.

Methods:

- Survey or poll
- Information sessions
- Interviews
- Online Discussion forum
- Public meetings

³ International Association for Public Participation. *Spectrum of Public Participation*. (n.d.) 1.

⁴ Health Quality Ontario. *Ontario's Patient Engagement Framework: Creating a strong culture of patient engagement to support high quality health care* (n.d.) 1-21.

Deliberate

Goal: Patients/clients and their caregivers/partners are engaged to discuss a health issue, policy, or decision, and begin to explore solutions with healthcare professionals.

Methods:

- Sharing patient/client/caregiver/community member experiences
- Patient/client journey mapping
- Workshops
- Ad-hoc meetings with OHT members and PFAC through working groups and committees

Collaborate

Goal: Patients/clients and their caregivers/partners can advocate and provide input to health professionals, planners and organizations working together to find and apply solutions to a health issue, policy or discussion.

Methods:

- Committee and working group representation
- Focus groups
- Town hall with the opportunity of a Q&A
- Virtual discussion forum

Empower

Goal: Patients/clients and their caregivers/partners, health professionals, planner, and organizations co-design and implement solutions to a health issue, policy or decision with expediency as needed. This would include partner organizations opening opportunities where people who have lived experience with disability can be included and involved in co-designing.

Methods:

- Advisory committee leadership role (Co-Chair position)
- Co-Design opportunities for programming

Enablers

Enablers are tactics that will help us meaningfully engage with our community.

A Culture of Continuous Quality Improvement

An ongoing commitment from NWT OHT partners/members to continuously improve and use the experiences, perspectives and needs of patients/clients, families and caregivers/partners to identify and implement continuous improvement activities.

Ongoing Orientation, Education and Communication

Providing patients/clients, families and caregivers with ongoing training, support, tools, and resources to enable them to meaningfully contribute in their role as partners/advisors. An ongoing commitment to creating an environment for advisors to thrive includes thoughtful consideration for new advisors into existing structures, the use of inclusive/non-exclusionary

language, and creating respectful environments for patients/clients, families and caregivers to share their lived/living experiences, etc.

Commitment to Diversity, Inclusion, Health Equity and Cultural Competence

Engaging patients/clients, families and caregivers through the lens of health equity means healthcare professionals, planners, and organizations have a responsibility to engage with – and respond to – the unique needs of Indigenous, Black, or other racialized, and/or Francophone patients, families or caregivers who have long been disadvantaged by the health system. It also requires a concerted effort to include and highlight voices of a diverse range of populations.

Minimizing Barriers

Considering and addressing barriers to participation such as financial and logistical (i.e. time and length of meetings); minimizing any chronic/systemic barriers related to factors such as race and disability; addressing barriers to participation through other enablers such as education, resources, training, technology support, etc.

Skillset Matching

Ensuring that the right patient, family and caregiver advisors are sought for the diverse spectrum of work (i.e. various domains of engagement) that can occur within our NWT OHT. Advisors with specific lived experience, knowledge, and advisory skill sets will be better positioned to contribute meaningfully when matched with the appropriate role or capacity.

Rigorous Research and Evaluation

Evaluating the process, outputs, and effects of engagement activities to demonstrate value and build a case for new and improved ways of partnering with patients, families, and caregivers.

Commitment to Transparency

Ensuring that patients/clients, caregivers and family members have access to relevant health information and knowledge needed to inform their care. This must include being made aware of, and having easy access to all relevant Policies and Procedures.

References:

- 1) Government of Ontario. (n.d.) Ontario Health Teams: Guidance for Health Care Providers and Organizations. Retrieved December 21, 2021, from https://health.gov.on.ca/en/pro/programs/connectedcare/oht/docs/guidance_doc_en.pdf 9
- 2) World Health Organization. (n.d.) Strategy on Measuring Responsiveness. Retrieved December 21, 2021, from <https://www.who.int/responsiveness/papers/paper23.pdf#:~:text=This%20paper%20describes%20the%20World%20Health%20Organisation%20%28WHO%29,attention%2C%20socialsupport%2C%20basic%20amenities%2C%20and%20choice%20of%20provider.>
- 3) International Association for Public Participation. (n.d.) Spectrum of Public Participation. Retrieved December 21, 2021, from <https://organizingengagement.org/models/spectrum-of-public-participation/>.

- 4) Health Quality Ontario. (n.d.) Ontario's Patient Engagement Framework: Creating a strong culture of patient engagement to support high quality health care. Retrieved March 12, 2021, from <https://www.hqontario.ca/Portals/0/documents/pe/ontario-patient-engagementframework-en.pdf>