



Engagement Toolkit

Revised May 6, 2016

Health PEI
One Island Health System



Table of Contents

Preamble: Introduction to the Toolkit	1
How to Use the Toolkit	1
Background to Engagement at Health PEI	1
Health PEI's Strategic Direction	2
Five W's of Engagement.....	3
Why is Health PEI engaging with patients and members of the general public?	3
What is engagement?	3
Who will Health PEI engage with?	3
When will Health PEI engage with patients and the public?	4
Where will the engagement take place?	4
How will Health PEI engage with patients and the public?	5
Benefits of Engagement.....	5
Health PEI's Responsibility	6
Health Services Act	6
Accreditation Canada.....	6
Guiding Principles.....	7
Strategic Priorities for Engagement	7
Broad Engagement Goals.....	8
Spectrum of Engagement.....	8
The Engagement Toolkit	8
References	9
IAP2's Spectrum of Engagement.....	11
Sample Methods or Techniques for Engagement.....	12
Pamphlets and Fact Sheets	13
Web Sites/ Internet.....	13
Expos, Fairs, and Events	13
1-800 numbers/ Telephone Hot Lines	13
Focus Groups.....	14
Surveys	14
Public Meetings.....	14
Polling.....	14
Public advisory groups	15
Working Groups	15
Workshops	15
World Café	15
Planning Workshops	16
Citizen Advisory Committees	16
Retreat	17
Charrette	17
Citizen Juries	18
Think Tanks	18
Study Groups.....	18
Deciding...Ready, Set, Go?	19
Engagement Checklist.....	20
Evaluate Team Collaboration Skills	21

Best Practices Checklist.....	23
Benefits of Engagement.....	24
Key Leadership Roles in the Engagement Process.....	25
Tips for Health PEI.....	25
Staff Leads.....	25
Identifying Priorities.....	26
Why Engage?.....	26
What are the benefits of engaging public/patients?.....	26
Defining your Engagement Strategy.....	27
Identifying Internal (Health PEI Staff) Partners.....	28
Internal Health PEI Partners/Stakeholder Plan.....	28
Identifying External/Public Partners.....	29
External Public/Patient Stakeholder Plan.....	29
Avoid Engagement Pitfalls.....	29
Recruitment Plan.....	30
What do I need to know when I am recruiting?.....	30
Recruiting Public, Patients and their Families.....	31
Where to find Patient and Families to Serve in Various Roles.....	31
Recruiting for Diversity.....	32
Role Criteria for Public and Patient Engagement.....	33
Sample Volunteer Skills and Criteria:.....	33
Sample Patient and Family (and Caregiver) Advisor Role Descriptions:.....	34
Information for Participants.....	36
What do I need to know about engaging with Health PEI?.....	36
Why should I Consider Being a Patient or Family Advisor?.....	36
Why Does Health PEI want you to be a Patient or Family Advisor?.....	36
What can Patient and Family Advisors Do?.....	36
Examples of ways Health PEI currently partners with patients and families:.....	36
(Sample) Patient and Family Volunteer Advisor Expression of Interest/Application Form.....	37
Sample Interview Questions.....	41
Confidentiality and Non-disclosure Agreement Forms.....	42
SAMPLE Terms of Reference.....	44
Collaborative Partnerships and Preparing for Collaborative Meetings.....	45
Meeting Effectiveness Rating Scale.....	46
List of Non-Governmental Organizations.....	47
Logistics: Encouraging Participation and Reducing Barriers.....	48
There are four key ingredients to encouraging public participation and reducing barriers for participation:.....	48
ACCESSING DIVERSITY.....	48
POWER.....	48
FOOD.....	49
LOCATION.....	49
More Tips:.....	50
Checking in: The Cornerstone Engagement Checklist.....	51
Evaluating Engagement Initiatives.....	52
Evaluation and Getting Feedback from Volunteers.....	53
Engagement Process Questions.....	53
Engagement Outcome Questions.....	53

Evaluation and Getting Feedback from Staff	54
Engagement Process Questions.....	54
Engagement Outcome Questions	54
Sample Thank You Letter to Public/Patient Volunteer	55
Sample Public/Patient Engagement.....	56

Preamble: Introduction to the Toolkit

How to Use the Toolkit

This toolkit is written with information about the engagement process and best practices and it is designed to assist you in your engagement efforts. Engagement is a critical component of today's healthcare system where a focus has been placed on the provision of person-centered care, improved quality and greater transparency.

The Health PEI Engagement Toolkit will:

- (a) help you learn about the various components and key steps of the engagement processes;
- (b) provide you with several sample tools at each stage in the engagement process that you can use with your committee, group, or event; and
- (c) encourage you to evaluate your process and continue to learn and improve current engagement efforts throughout Health PEI.

The toolkit aims to appeal to an assortment of users. It provides some background information about engagement with some very practical tools for activities and examples of how to engage. Some of the material is for internal use (for staff) and other materials may be adapted for use with the public.

The tools provided in the toolkit are **samples** of forms and information that you can edit, adapt, and use based on the type of work or group you are engaging with. You may wish to adapt them depending on the situation or engagement activity in your work.

Background to Engagement at Health PEI

As Health PEI strives towards becoming a high performing health system, the Board of Directors and executive leaders have identified the importance of patient and public engagement as a key priority for the organization. Health PEI recognizes the sustainability of the Island health care system is strongly linked to the community that it serves and to the organization's culture of engagement. The Health PEI Patient and Public Engagement Strategy will be intended to provide an understanding and overview of the broad spectrum of current and future engagement work being undertaken throughout Health PEI supporting its strategic direction. The accompanying toolkit is intended to provide process guidance to Health PEI staff members undertaking engagement work. This strategy and toolkit was developed through consultations with Health PEI divisions and their respective service and project teams.



Health PEI's Strategic Direction

The context for Health PEI's practice of engagement is contained and directed by the organization's strategic direction. Key components of Health PEI's Strategic Plan include the mission, vision, values and goals. A summary of these core elements is provided below in Figure 1. For further information, refer to Health PEI's Strategic Plan. (1)



Figure 1: Strategic Direction

Five W's of Engagement: Why, What, Who, When, and Where

Why is Health PEI engaging with patients and members of the general public?

As Health PEI is looking for ways to improve the health outcomes of Islanders, provide better care by improving the experiences of patients, and develop a sustainable and accountable healthcare system, engagement must take place with those in the healthcare system and members of the community surrounding the healthcare system. (7) The purpose of engagement is to create and empower “ownership” in the healthcare system by:

- Understanding the patients’ and public’s needs, priorities and values about health and healthcare;
- Educating patients and the public so that they can participate in a fully informed way; and
- Ensuring accountability for the system – i.e., what differences the organization is making with the finite resources that are available.

What is Engagement?

Engagement is a critical component of today’s healthcare system where a focus has been placed on the provision of person-centered care, improved quality and greater transparency. Throughout the literature there are various definitions for engagement. Using information from different sources and for the purposes of this strategy, patient and public engagement is defined as:

The active participation of patients, caregivers, family members, community representatives, community groups and the public in how health services are planned, delivered and evaluated and in the development and implementation of policies. Engaged patients and members of the public are involved in defining the issues of concern to them and in making decisions about factors that affect their lives.

Engagement involves the ongoing process of developing and sustaining constructive relationships, building strong, active partnerships at various levels across the healthcare system and holding a meaningful dialogue with stakeholders. (2) (3) (4) (5) (6)

Abelson et al. (3) have described three criteria required for engagement to take place:

- Information is provided to participants about the topic and/or issue being discussed
- There is an opportunity for interactive discussion among participants and also between participants and the organization sponsoring the engagement activity
- There is an explicit process for collecting individual or group input

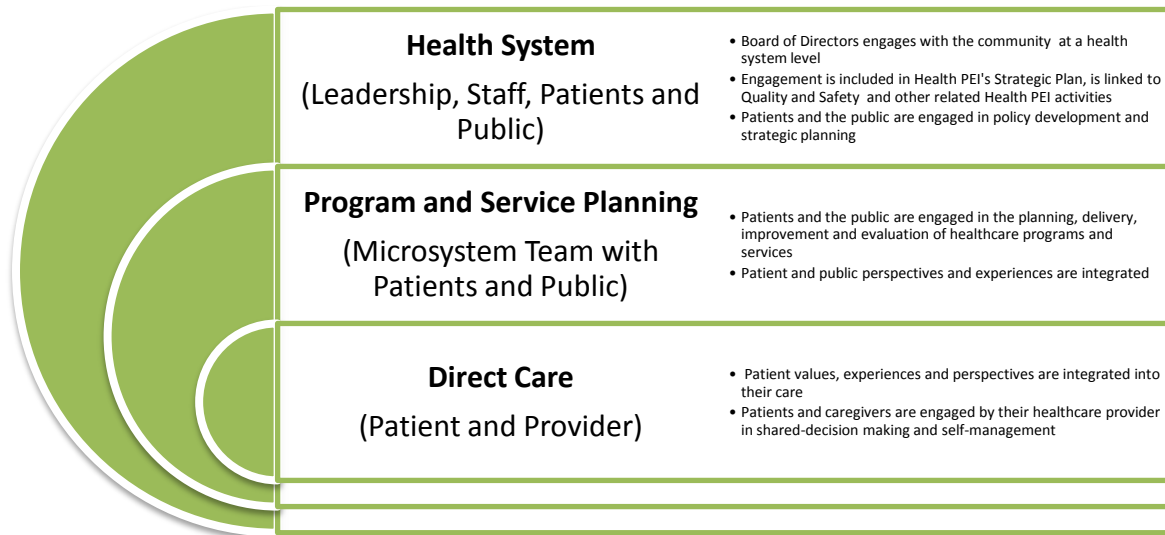
Who will Health PEI engage with?

To bring diverse voices and perspectives to the planning process, Health PEI will engage with patients, clients, families, caregivers, community groups and the general public. During the planning of any type of engagement work, consideration of the purpose, needs and requirements of the work will help inform who engagement participants will be. Engagement with other departments and agencies will also take place as needed.

When will Health PEI engage with patients and the public?

Engagement will take place at different stages of Health PEI’s work as new programs and policies are developed. Patients and members of the public will have engagement opportunities during their direct care with a healthcare provider, as members of working groups and committees to develop new programs and as participants in surveys, interviews and focus groups to inform work such as the Strategic Plan. Engagement will take place in three domains described below in Figure 2 (2) (8) (9) (10):

Figure 2: Domains of Engagement



At the direct care level, patients and/or their caregivers will interact directly with the healthcare provider and have input into shared decisions with their values and experiences being integrated into their care. An example of engagement taking place at this level is the patient’s participation in the diabetes education program or during an appointment with a healthcare provider where next steps in care are discussed.

Patients and members of the public will be engaged in program and service planning through participation as advisors for committees supporting initiatives such as the Cancer Strategy and the Seniors Friendly Initiative.

At the health system level, the Board of Directors engages with the community that it is accountable to through an open dialogue and a robust engagement process which includes board discussions, community meetings and invitations to participate in board meetings. Other opportunities at the health system level include: membership on Quality and Safety Committees and through work supporting the development of the Health PEI Strategic Plan. As Health PEI moves forward, opportunities for further engagement opportunities including board- sponsored focus groups and community advisory groups have been identified by the Board of Directors.

Where will the engagement take place?

Engagement will take place at locations across Prince Edward Island allowing for Island-wide

participation and opportunities for engagement. Locations might include: Health PEI facilities such as hospitals, nursing homes and health centers, in community settings and in homes.

How will Health PEI engage with patients and the public?

Health PEI will use a Spectrum of Engagement (iAP2) that identifies different levels of engagement that correspond to the type of work to be accomplished and involves patients and members of the public. This Spectrum has been developed by the International Association of Public Participation (IAP2) and is used throughout different healthcare systems in Canada and is described on page 12. Engagement activities will be accessible to ensure that patients and members of the public have a reasonable opportunity to participate.

Benefits of Engagement

According to the Institute for Patient and Family Centered Care¹, engagement through patient and family centered care results in:

- Improved patient outcomes
- Improved safety
- Reduced wait times
- Better teamwork to coordinate care
- Improved care providers' job satisfaction

As engagement becomes a central focus of healthcare systems for improving quality of care, long-term benefits of this foundational work have been identified (3) (6) (11) (12) and include:

- Development of a healthcare system that is more responsive to the needs, values and preferences of patients and the public
- Development of accessible and appropriate services leading to better health outcomes
- Provision of valuable insights into what patients and the public value in healthcare
- Higher quality decision and acceptance of these decisions
- Increased transparency and accountability
- Improved quality
- Empowerment to be active and take responsibility in care
- Establishment of a foundation for collaboration between groups which may have different goals and priorities
- Improved healthcare services that are user-focused
- Increased patient and public understanding of how decisions are made in healthcare and the context in which decisions are made
- Improved communication between patients, the public, staff, healthcare providers and healthcare organization
- Increased health literacy and health system literacy

Adapted from:

¹ Institute for Patient and Family Centered Care (2014): Retrieved from: <http://www.ipfcc.org/>

Health PEI's Responsibility

As an organization responsible for a healthcare system, Health PEI must continue to build and maintain effective and meaningful relationships with patients and the public on Prince Edward Island. Engagement is an important responsibility of a healthcare system and is integral for transparent and accountable operations. (3) (13) (14) Health PEI's Patient and Public Engagement Strategy and Toolkit will serve as a companion document to Health PEI's Strategic Plan and subsequent plans which outline Health PEI's organizational direction. The development and implementation of the Engagement Strategy and Toolkit fulfills key requirements:

Health Services Act

This strategy fulfills Health PEI's legislated requirement as defined in the *Health Services Act*, R.S.P.E.I 1988, Cap. H-1.6. (15) The Act states that as a part of Health PEI's strategic planning work, an engagement strategy must be included. The development of Health PEI's strategic plan requires extensive patient and public engagement.

Accreditation Canada

As a component of governing best practices, it is critical that Health PEI has a defined strategy and framework to meet Accreditation Canada Standards. (16) In 2014, significant changes were made to strengthen the client- and family-centered care components of the Qmentum program. Accreditation Canada states that "these new requirements reflect and promote the need for honest and real involvement by clients and families in all aspects of designing, planning, delivering and evaluating healthcare services." (16) The changes that have been integrated throughout the governance, leadership and service excellence standards include:

- Co-design of services
- Client and family representatives on advisory and planning groups
- Clients and families as members of a collaborative care team
- Partnering with clients in planning, assessing and delivering care
- Engaging clients and families
- Respecting client choice
- Monitoring and evaluating services and quality with input from clients and families
- Involving clients and families in identifying quality improvement priorities and safety issues

The goal of these changes is to encourage and support all healthcare organizations to adopt client- and family-centered care principles and practices in their day-to-day work.

Two levels of engagement and collaboration are expected with these changes:

- *Input* from clients and families through advisory committees or groups, surveys, focus groups or informal daily feedback
- *Partnership* with the team by collaborating directly with each individual client and their family

Guiding Principles

With all engagement activities Health PEI will strive to adhere to the following guiding principles (18) (19) (20) (21) (22) (23) (24):

- **Stakeholder involvement informs the organization’s work which can lead to better decisions:**
Decisions that impact the future of the community are better when they are involved.
- **Purpose and intent are clear:**
The goals of the engagement process will be clearly established at the beginning of each initiative or project.
- **Engagement processes are accessible:**
They allow all members of the public a reasonable opportunity to contribute, developing a balanced perspective.
- **Engagement is inclusive:**
It uses a range of tools to engage varied audiences and reflect different levels of participation.
- **Stakeholders understand their role in the process and the decision making process:**
The patients’ and public’s roles and level of involvement will be defined and clearly communicated.
- **Stakeholders are informed:**
Information necessary to understand all relevant aspects of the issue is provided to patients and/or the public throughout the process. The impact of any patient and public engagement is reported and explained.
- **Communication with stakeholders is effective:**
It is clear, concise, objective, understandable and accessible by all.
- **Engagement is proactive:**
Participants are brought in at appropriate times to make informed judgments and impact the outcomes.
- **Engagement is transparent and accountable:**
The process is clear and open.

Strategic Priorities for Engagement

Health PEI has identified its key strategic priorities for patient and public engagement. These include:

- Seek patient and public involvement in health service planning and program design.
- Promote informed choice, involvement and support self-responsibility.
- Ensure timely and effective communication with patients and the public.
- Identify and engage with marginalized and vulnerable groups.
- Identify opportunities to collaborate with other organizations.



Broad Engagement Goals

Offer multiple methods of participation

- Ensure broader patient, public and stakeholder participation in healthcare
- Support Health PEI's organizational Vision, Mission, Values and Goals through enhanced collaboration with internal and external stakeholders
- Integrate and expand upon current public participation and patient activities
- Improve opportunities for patient, public and stakeholder involvement and partnership with Health PEI
- Raise patient and public awareness of Health PEI engagement activities and strategic direction

Spectrum of Engagement

To ensure Health PEI has a robust and meaningful engagement process, recognized engagement best practices have been incorporated into the strategy and toolkit. To guide engagement work, the International Association for Public Participation (IAP2) standard has been adapted by various health care organizations across Canada, including Nova Scotia Capital District Health Authority and Vancouver Coastal Health in British Columbia. The IAP2 standard provides a high level description of the process for and different levels of engagement. (25)

This standard defines categories of increasing levels of participation across a 5-stage spectrum as well as the types of activities that occur at each stage resulting in capacity building to improve health outcomes. It should be noted that depending on the context of each situation certain types of engagement or participation will be more appropriate than others. The healthcare organization can utilize different methods as appropriate to engage with patients and the public. The Spectrum of Engagement is included in the Toolkit.

The Engagement Toolkit

To ensure meaningful engagement, the Board and Health PEI staff members need to be knowledgeable and informed regarding the engagement process and their respective roles and responsibilities. Consultations with staff members from different divisions have resulted in several recommendations to guide the formalization of Health PEI's engagement work. To operationalize and sustain engagement activities, four themes were identified: (1) culture of engagement; (2) engagement supports for staff; (3) engagement supports for patients and public; and (4) engagement process and requirements.

Key components of (4) include developing a readily available toolkit outlining key steps required in the engagement process (e.g. recruitment, consent, logistics); developing an inventory of tools, activities and resources for engagement; and establishing a central location (e.g. Staff Resource Centre) for the toolkit, inventory of resources and any associated documents (e.g. terms of reference, postings for participants, general Health PEI information to be provided to participants).

References

1. **PEI, Health.** *Strategic Plan 2013-2016*. Charlottetown : Government of PEI, 2013.
2. *Patient and Family Engagement: A Framework for Understanding the Elements and Developing Interventions and Policies*. **Carman, K., Dardess, P., Maurer, M., Sofaer, S., Adams, K., Bechtel, C. and Sweeney, J.** 2, s.l. : Health Affairs, 2013, Vol. 32, pp. 223-231.
3. **Abelson, J., Montesanti, S., Li, K., Gauvin, F-P. and Martin, E.** *Effective Strategies for Interactive Public Engagement in the Development of Healthcare Policies and Programs*. s.l. : Canadian Health Services Research Foundation, 2010.
4. **Fraser Health.** *Community Engagement Framework*. 2009.
5. **Southampton NHS.** *Patient and Public Involvement Strategy 2011-2014*. s.l. : University Hospitals NHS Trust, 2011.
6. *Patient and Citizen Participation in Health: The Need for Improved Ethical Support*. **Williamson, L.** 6, 2014, Vol. 14, pp. 4-16.
7. *Systematic review of involving patients in the planning and development of healthcare*. **Crawford, M., Rutter, D., Manley, C., Weaver, T., Bhui, K., Fulop, N. and Tyrer, P.** 30 November 2012, s.l. : BMJ, 2002, Vol. 325.
8. **Canadian Foundation for Healthcare Improvement.** Three Levels of Patient Engagement. *Canadian Foundation for Healthcare Improvement*. [Online] 2015. [Cited: March 17, 2015.] <http://www.cfhi-fcass.ca/sf-docs/default-source/work-with-us/3levelspe-e.pdf?sfvrsn=2>.
9. **Government of British Columbia.** *Integrated Primary and Community Care Patient and Public Engagement Framework*. s.l. : Government of British Columbia, 2011.
10. **Queensland Government.** *Consumer and Community Engagement Framework*. s.l. : Queensland Government, 2012.
11. *Public Engagement in Ontario's Hospitals - Opportunities and Challenges*. **Born, K. and Laupacis, A.** December 2012, Healthcare Quarterly, Vol. 15.
12. **Interior Health.** *Community Engagement Framework*. 2010.
13. *Enhancing Public Input into Decision Making: Development of the Calgary Regional Health Authority Public Participation Framework*. **Maloff, B., Bilan, D. and Thurston, W.** 1, s.l. : Family and Community Health, 2000, Vol. 23, pp. 66-78.
14. *User involvement in identifying health needs and shaping and evaluating services: is it being realised?* **Poulton, B.** 6, s.l. : Journal of Advanced Nursing, 1999, Vol. 30, pp. 1289-1296.
15. **Government of PEI.** Health Services Act, R.S.P.E.I. 1988, Cap. H-1.6.
16. **Accreditation Canada.** Accreditation Canada Standards. 2015.

17. **Health PEI.** Health PEI Board of Directors - Governance Policies. 2013.
18. **Strathcona County.** Strathcona County Public Engagement Framework. 2010.
19. **Vancouver Coastal Health - Community Engagement.** *Community Engagement Framework.* 2009.
20. *Public participation in healthcare priority setting: A scoping review.* **Mitton, C., Smith, N., Peacock, S., Evoy, B. and Abelson, J.** s.l. : Health Policy, 2009, Vol. 91, pp. 219-228.
21. **Baker, G.R.** *Evidence Boost: A review of research highlighting how patient engagement contributes to improved care.* s.l. : Canadian Foundation for Healthcare Improvement, 2014.
22. *Patient and Community Engagement: The Approach at University Health Network.* **Rogers, S. and Howard, G.** 3, s.l. : Healthcare Quarterly, 2014, Vol. 17, pp. 70-73.
23. **Capital Health.** *Involving patients and citizens in decision making: A guide to effective engagement.* s.l. : Capital District Health Authority.
24. *Implementing strategies in consumer and community engagement in healthcare: results of a large scale, scoping meta-review.* **Sarrami-Foroushani, P., Travaglia, J., Debono, D. and Braithwaite, J.** s.l. : BMC Health Services Research, 2014, Vol. 14.
25. **Internal Association for Public Participatoin.** [www.iap2.org.](http://c.y.m.c.d.n.com/sites/www.iap2.org/resource/resmgr/imported/IAP2%20Spectrum_vertical.pdf) [Online] [Cited: March 17, 2015.]
http://c.y.m.c.d.n.com/sites/www.iap2.org/resource/resmgr/imported/IAP2%20Spectrum_vertical.pdf.
26. **Canadian Foundation for Healthcare Improvement.** CFHI. [Online] [Cited: April 2, 2015.] <http://www.cfhi-fcass.ca/sf-docs/default-source/work-with-us/cfhi-pfec-performance-measurement-framework-draft.pdf?sfvrsn=2>.

IAP2's Spectrum of Engagement

Adopted by HPEI to help guide levels of engagement and involvement

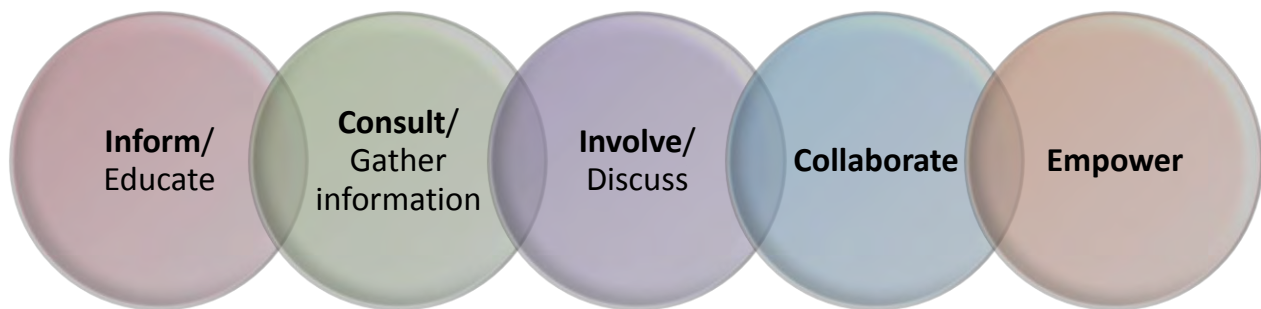
Participation Spectrum					
	Inform	Consult	Involve	Collaborate	Empower
Participation Goal	To provide patients and the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain patient and public feedback on analysis, alternatives and/or decision.	To work directly with the patients and the public throughout the process to ensure that issues and concerns are consistently understood and considered.	To partner with patients and the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision-making in the hands of patients and the public.
Promise to Public/Patient	<i>"We will keep you informed."</i>	<i>"We will keep you informed, listen and acknowledge your concerns and aspirations and provide feedback on how patient feedback influenced decisions."</i>	<i>"We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how patient input influenced the decision."</i>	<i>"We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into decisions to the maximum extent possible."</i>	<i>"We will implement what you decide."</i>
Sample Techniques	<ul style="list-style-type: none"> • Pamphlet • Fact sheets • Web sites • Expos 	<ul style="list-style-type: none"> • Focus groups • Surveys • Public meetings • Polling 	<ul style="list-style-type: none"> • Patient/public involvement in committees/working groups • Workshops • World Café 	<ul style="list-style-type: none"> • Citizen advisory committees • Participatory decision-making • Joint community initiatives: provision of resources for community groups • Retreat • Charette 	<ul style="list-style-type: none"> • Citizen juries • Delegated decision • Think Tanks • Study Groups

Adapted from: International Association for Public Participation (2006). *IAP2's Public participation spectrum (pp. 4)*. In *Planning for effective public participation: Student manual*. Thornton, CO: International Association for Public Participation.

Sample Methods or Techniques for Engagement

There is no one 'correct' engagement method for a given project. The method(s) should be appropriate for the unique barriers and motivation to participate faced by your population(s) of interest and for the type of input you need. Moreover, multiple methods can be used to all feed into the same process (e.g., one could "consult" by conducting surveys for those who have access to the Internet as well as interviews with those who do not and feed the patient input for both methods into program planning). The following is a list of methods that are commonly used for engaging patients.

Note that this is not an exhaustive list of all engagement methods, and some of these methods can be combined.²



² Adapted from:

1. International Association for Public Participation (2006). IAP2's Public participation spectrum (pp. 4). In Planning for effective public participation: Student manual. Thornton, CO: International Association for Public Participation.
2. Fraser Health. Patient Engagement Heard and Valued: A handbook for meaningful engagement of patients that have not traditionally been heard in healthcare planning. Retrieved from: http://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/awesome_handbook-fraserhealth.pdf?sfvrsn=2
3. City of Waterloo. Public Involvement: Guidelines, tools, and worksheets for successful community engagement. Retrieved from: http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf
4. The Health Canada Policy Toolkit for Public Involvement in Decision Making. Corporate Consultation Secretariat, Health Policy and Communications Branch (2000). http://www.hc-sc.gc.ca/ahc-asc/pubs/_public-consult/2000decision/index-eng.php#a79

Inform	What	Why	When	Who
Pamphlets and Fact Sheets	A small booklet or leaflet containing information about a single subject. It may define an issue or promote discourse and informed debate on a subject. It is an ideal way to inform stakeholders and heighten awareness with a broad overview of an issue, policy or program.	Topic description; information to educate, promote, or instruct. The fact sheets are disseminated to the public and the media either on a proactive or reactive basis in order to answer some of the most frequently asked questions on an issue.	Ongoing New policies or programs. A fact sheet is most useful as a strategic compilation of key information sources on an issue for the public.	General public
Web Sites/ Internet	Electronically based information (like a pamphlet or fact sheet).	Reaches people who won't/can't come to a meeting due to distance, busy schedules, or accessibility.	24 days a week 7 days a week 365 days a year	General public, anyone with computer access and ability (computer literacy). May not reach less-affluent or less educated members of the population.
Expos, Fairs, and Events	A central event with multiple activities that provide information and raise awareness.	Focus attention on one element; attract media; raise awareness on multiple levels.	Usually 3 - 4 hours of time that is designed to be convenient to a variety of attendees.	General public
1-800 numbers/ Telephone Hot Lines	A single telephone number that the public can call to ask questions, make comments, or learn about specific events, free of charge to users.	Offer updated information or general news about a special program or issue. Answer questions from the public. The goal is most often a facilitatory one, enabling institutions and the public to communicate quickly, effectively and inexpensively.	Best established at the start of a project. A 1 800 number is usually developed and maintained in response to a current issue.	Most are set up to be publicized widely for use by general public.
Open House	These are events where information is put on public display and the general public has the opportunity to meet members of the staff team working on the initiative as well as any official public representatives.	Open houses are focused on providing information. While there is opportunity for some dialogue, their primary purpose is to ensure accurate information about the initiative is available to the public.	Since the focus is on information sharing, they should be used early in the process, perhaps in conjunction with public meetings, or during later stages when important information reflecting decisions can be provided. To plan appropriately can require up to two months.	Open to all members of the public and are hosted by the staff team and any public representatives. They should be held in community centres or other locations that are easily accessible to ensure that all community groups and residents are provided with equal opportunities to experience.

Consult	What	Why	When	Who
Focus Groups	Focus groups are group interviews. Used as a one-time, highly facilitated meeting with a small group of people to discuss one topic.	Focus groups are less intimidating than big meetings. To generate dialogue about an issue in a small forum.	Provide information and ask questions to key stakeholders. Typically 1 - 2 hours.	A small group of individuals selected to represent either a stakeholder perspective or the diversity within a given population.
Surveys	Random sampling of population, often by telephone or email to gain statistically valid specific information.	Gain perspectives from people unlikely to participate otherwise. Gather input from a cross-section of the public. Obtain a higher rate of response than some other forms of communication.	Before or after a project	A cross section of the population, usually randomly selected.
Public Meetings	Public meetings are normally sessions at which there are both registered and unregistered presentations. This format can result in conflict if the assessment of public opinion on any given topic/issue is not accurate, and that public meetings are not appropriate if an initiative has a significant amount of tension among interests.	They present opportunities for the public to hear and make comment on initiatives. Public groups, municipal representatives and the general public are encouraged to attend, listen, raise questions and make presentations to the chair, panel or facilitator.	Public meetings should be well advertised and should normally occur either in the early stages of the process or in the latter stages of a process when a consensus or direction or range of options has been proposed.	Public meetings should be open to the general public. They should be advertised appropriately so that a broad number of people will be aware of the opportunity. Formal presentations should occupy no more than 30 minutes, followed by comments or registered presenters from the public, with a maximum of 10 minutes per presentation. The balance of the meeting should be spent hearing the comments and questions from the public.
Polling	Often referred to as public opinion polling, polling is used to gauge public attitudes, values and perceptions on various issues.	The main strengths of a poll is its highly representative nature. Using scientifically developed techniques, samples from polls generate an accurate match of the population. Polls allow issue specificity with immediate feedback.	Public opinion polling can be useful for gauging opinion, obtaining raw data and options from stakeholder or client groups, and for determining the public's level of understanding on certain issues.	General public

Involve	What	Why	When	Who
Public advisory groups	This is a formal group or committee established to provide direct comment to the municipality. It may be integrated into the process so that separate meetings of the public and municipal participants are not necessary.	A public advisory group is created so that there is consistent public involvement on the project or initiative.	A group should be formed before the terms of reference for the project are developed.	Members are representatives of all values or interests in the project or initiative. They should have endorsement from the people and interests they represent.
Working Groups	Working groups bring together selected people with a range of perspectives on a topic	They are established to discuss and assess general issues of importance, determine priorities and establish preferences for general procedures and terms of reference. Also, working groups are set up to address technical issues such as information gathering and analysis.	A working group should be established early in the process as part of the design stage. In the later stages, a working group consisting of public interest and municipal representatives concerned with a particular aspect of a project may also be formed.	A working group should be small and informal, ideally with not more than ten people. It should bring together a cross-section of perspectives. Representatives from official interest group positions are not desired at such sessions. The facilitator or chair must be perceived as neutral.
Workshops	A public forum which participants work together on prescribed assignments or exercises to provide specific input to the process.	Encourage public to share perspectives and work together toward result. Foster discussion Surface new ideas and creative problem solving. Get participants engaged in the project and in finding workable, sustainable decisions.	A single session would run at least 2-3 hours and may last up to a full day.	Generally open to the public; may request that participants sign up in advance.
World Café	A meeting process featuring a series of simultaneous conversations in response to predetermined questions. Participants change tables during the process and focus on identifying common ground in response to each question.	To foster open and meaningful discussion Surface areas of commonality and draw people into common problem solving Removes formal atmosphere Gain a high quantity of responses in short amount of time Builds community among diverse participants.	A single world café usually best conducted in 2 - 3 hours.	May be used for an open forum or a group of invited participants.

Collaborate	What	Why	When	Who
Planning Workshops	These are joint working sessions attended by representatives of all participant groups.	A workshop ensures that the parameters of the project are agreed upon by the public as well as the staff.	They should be established early in the process and have a role to play throughout. Consult to determine a central location and time – decided at general meetings. Location and facility must be accessible and convenient to the majority of participants.	Delegated representatives of all interested groups and participating agencies. During informal, preliminary meetings, ask each group to identify a rep or alternatives to attend subsequent meetings and workshops.
Citizen Advisory Committees	An advisory committee, board or council consisting of a group of representatives from a particular community or set of interests, appointed or selected by government bodies to provide comments and advice on an issue. An advisory committee is asked to host and participate in public meetings and conferences. Also, it is expected to provide a sounding board to adequately reflect public opinion and to organize and coordinate the involvement and input of a wide range of people.	Advisory committees, boards or councils are used to: consult the public on the planning and implementation of a project or policy; develop consensus for action on complex issues that have a broad impact on the community; facilitate frequent contact between the community and the consulting agency or the agency sponsoring the consultation; encourage the sharing of information and the negotiating of strategies and solutions; provide two-way communication with a number of interested parties; gain expertise and input from a number of interested groups; review technical data or other material, assist in educating the public; resolve conflict between groups.	Often, the advisory committee members are appointed to terms of one to two years, although shorter terms could be adequate, depending on the particular issue or reform.	A group of representatives from a particular community or set of interests

Collaborate (continued)	What	Why	When	Who
Retreat	A retreat is a meeting convened in a relaxing and supportive environment, often in a natural or rural setting. Participants stay together at the retreat with opportunities for recreational and social activities encouraged within the meeting schedule.	A retreat is a useful technique when: the current environment is too full of distractions; the process is as important as the end product (i.e. people need to feel they contributed to the product and agree to act on the results); there is a need/desire to strengthen the interpersonal relationships and build stronger teams; there is a need to establish different norms of behaviour (i.e. the way people treat each other in the work environment); a "captive audience" is the best way to complete the desired outcomes.	Sufficient time is necessary to plan and organize the retreat. They are most often organized and held once or twice a year. They usually last between one-half a day to three days.	All interested stakeholders; key decision makers
Charrette	An intense brainstorming and decision-making process that brings together all the essential stakeholders for a prolonged meeting or series of meetings in an attempt to generate a broad range of options, criteria for decision making, and a final decision while all decision makers are present.	Promotes the organization's openness to suggestions; generates creative, alternative solutions to problems; facilitates collaborative design.	A minimum of four hours for a modest issue ranging to several days for a complex issue.	All interested stakeholders; key decision makers attend as observers and information resources; project staff could attend as resources; a lead facilitator oversees the event.

Empower	What	Why	When	Who
Citizen Juries	A process that gathers a randomly selected and demographically diverse panel of citizens for 3 to 5 days to carefully examine a complex issue. The Jury makes recommendations to the decision makers and to the public.	Complement, or build upon earlier, more conventional forms of engagement. Involve citizens in a high-quality discussion of a key issue. Help decision makers know what most people would support if they had balanced, comprehensive, information and the chance to think about it with fellow citizens	To involve citizens in a high-quality dialogue about a key Issue. To involve citizens in developing a thoughtful, well informed solution to a public problem or issue	Involves decision makers in order to legitimize and support the process and later report on actions taken as a result of the advice of the jury; a stakeholder steering committee to ensure fairness of process; randomly selected small group of individuals (jury); media to publicize process and provide commentary; community can participate as observers.
Think Tanks	Think tanks bring together creative thinkers to develop innovative solutions to current issues and problems. Although most often used for public policy and planning, think tanks have become a common technique when creative solutions and out-of-the-box thinking are needed in non-governmental organizations and private-sector organizations.	A think tank is a useful technique when: <ul style="list-style-type: none"> ✓ innovative solutions are needed for public policy problems ✓ issues are complex and interdependent ✓ current solutions no longer work and different thinking is needed ✓ there are scholars and thinkers with both insight and expertise to assist government in improving public policies and programs. 	Think tanks usually run for a relatively short period of time (e.g. half a day to three days), depending on the topic and desired outcome.	Participants are selected for their knowledge and expertise, creativity, ability to synthesize and analyze information, and prepare cogent recommendations.
Study Groups	A study group consists of a series of structured and non-structured discussions which take place over a period of time. These discussions can take place through: face-to-face meetings, teleconferences or the use of electronic links.	The process is used to share ideas and opinions on issue areas and to provide advice on direction setting to decision makers. Issue areas include (but are not limited to) the social, ethical, political, economic and scientific fields.	Study groups can be assembled quite quickly. This is especially the case if key participants have already been identified and if the circle is convening locally for an initial, face-to-face meeting.	A study group can be made up of approximately five to 12 people. Participants are selected for their knowledge in a particular area.

Deciding...Ready, Set, Go?

Deciding to Engage

Before you begin, as a team, discuss these questions:

1. What is your reason for wanting to engage?
2. Are we clear on what issues or concerns we are trying to address on this project?
3. Has the project involved patient and families in the past? If so what has been the implications of this?
4. What support do we have from our leadership to ensure the engagement process is successful for the duration of the initiative?
5. What other stakeholders will need to be engaged in this project?
6. Does your team see the value and benefit to partnering with patient and family advisors in your work?



Getting ready

Ensure that your engagement goal benefits patients and families. Is the scope and intended goal of your project:

- To improve service design and/or the process of receiving care?
- To ensure appropriate treatment and care?
- To improve health outcomes?
- To reduce risk factors and prevent ill health?
- To improve safety?
- To improve patient experience?
- To set priorities for action?
- To strengthen accountability?
- To ensure access to treatment?
- To improve transitions between services?



Getting Set

The following checklist will help determine whether a public or patient engagement process will be useful to you. Before you proceed, you will want to ensure you can answer “yes” (3) or “somewhat” (2) to as many questions as possible. You have to decide which of these questions are significant to your project and which are not. It is important to evaluate your responses to these questions carefully, and reflect on these before you proceed with **engagement activities/strategy for your project.**

Engagement Checklist

Rate your answers on the scale of 1-3: 1= no, 2= somewhat, 3= yes.	1	2	3
Does the <i>proposed engagement</i> process contribute to supporting the Health PEI strategic direction?			
Are you able to identify why engagement is important to the outcome? (Have you identified the potential benefits of involving the stakeholders?)			
Are the issues and/or questions clearly defined?			
Does the issue require engagement?			
Have any decisions already been made?			
Can patients and families <i>contribute</i> to the decision in a <i>meaningful</i> and <i>substantive</i> way?			
Is everyone participating in the process equipped or prepared for meaningful engagement?			
Are you prepared to hear their interests and positions? Are you able to identify why engagement is important to the outcome? (Have you identified the potential benefits of involving the stakeholders?)			
Is there enough time for meaningful engagement?			
Is Health PEI (or related project) prepared to commit the required resources to effectively support an engagement process?			
Is strong leadership support present?			
Have you involved community health-based staff, communicators, consultants and staff from other departments who will be involved in the process or affected by the outcomes?			
Are you able to identify why engagement is important to the outcome? (Have you identified the potential benefits of involving the stakeholders?)			
<i>The higher your score, the more ready you are to “go” with your engagement process for your project.</i>			
Total score			

Based on moving through the “Ready, Set, Go” worksheet, you will be able to assess whether or not to move forward with your engagement strategy³. If you score 14 or lower, you might need to revisit your plan for engagement.

³ Adapted with permission from The City of Waterloo at:
http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf

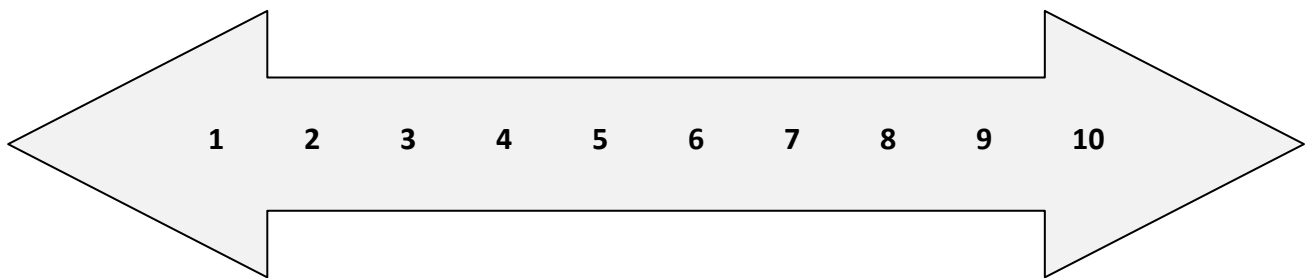
Evaluate Team Collaboration Skills

Use this tool to routinely evaluate team collaboration skills and assess your growth.

Domain	Old Ways	First Steps	Making Headway	Picking Up Speed	Strong Momentum
Respect and Diversity	I see people dealing with each other only as labels and roles (client, mental patient, therapist, doctor). I sometimes feel devalued, demeaned, disregarded.	I am beginning to see others beyond the labels – to recognize and tolerate different kinds of experiences and expertise.	I make a conscious effort to respectfully ask questions of others. I have seen the group openly discuss labels and roles.	I see people sharing smiles, humour and empathy, listening, understanding and equally valuing each other regardless of each person’s status and position. Information and opinions are freely shared.	I see people recognizing and sharing common life experiences, values, and common purpose. Our contributions are much less confined by formal roles.
Structure for Participation	I observe that the discussion is dominated by a few people – everyone doesn’t seem to have the opportunity or feel safe to speak.	There is a structure to support everyone speaking and listening.	Most people in the group speak and are heard.	I feel that our dialogue is creative and includes everyone.	I observe that meetings are lively and members seem to be able to share what they are thinking – I feel that it’s okay to look “dumb” and to disagree.
Trust	I think that others’ intents are self-serving. I am afraid to say what I think.	I’m observing and assessing the safety of the group – such as people’s attitudes, non-verbal communication, whether I have peers here.	I’m experiencing dialogue in which I have the opportunity to hear the views of others. I don’t think the group punishes people who express contrary opinions.	I mostly trust the good intentions and motives of others in the group. I am coming to believe in the value of what we can learn from each other.	I realize that the best resolutions require everyone’s contributions/expertise

Using the 10 point scale below, circle one number to show how well you think the group is functioning/ succeeding:

Nothing ever seems to change.We are achieving meaningful change to help improve people's lives.



Domains/ Areas to work on:	
Plans for change:	
Other comments:	

Best Practices Checklist

As you start discussions about engagement in your work; ask yourself the following questions to ensure that your public engagement plan is following best practices⁴:

- ✓ Has a clear purpose of reason for engagement been communicated?
- ✓ Is the engagement experience designed to ensure a diversity of approaches?
- ✓ Do we have required commitment from staff, and public participants?
- ✓ Do we have a structure that allows people to 'vent' as well as learn?
- ✓ Are we making the best use of technology?
- ✓ Have we given enough time for patients/public to provide input and deliberation in the process?
- ✓ Have we provided sufficient feedback throughout the process for patients/public to assess that the information gathered by staff was used in a credible way?
- ✓ Have patients/public had an influence on when the exercise is best carried out, using their own process, whether or not Health PEI is involved directly?
- ✓ Is this process ready to learn and adapt to new ways of doing things?
- ✓ Have we considered how and when to best involve people based on what we know from past experience?
- ✓ Have we considered our ability to meet people in settings that are familiar to them?
- ✓ Are we operating across departmental boundaries by the issue or initiative?
- ✓ Is the information from related departments integrated and vetted prior to being shared with the public?
- ✓ Is the language from related departments translated into plain English all patients/public can understand prior to being shared externally?
- ✓ Will participants view the experience as positive and fulfilling?



⁴ Adapted with permission from The City of Waterloo at:
http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf

Benefits of Engagement

According to the Institute for Patient and Family Centered Care⁵, engagement through patient and family centered care results in:

- Improved patient outcomes
- Improved safety
- Reduced wait times
- Better teamwork to coordinate care
- Improved care providers' job satisfaction

As engagement becomes a central focus of healthcare systems, long-term benefits of this foundational work have been identified:^{6, 7, 8, 9}

- Development of a healthcare system that is more responsive to the needs, values and preferences of patients and the public
- Development of accessible and appropriate services leading to better health outcomes
- Provision of valuable insights into what patients and the public value in healthcare
- Higher quality decisions and acceptance of these decisions by communities
- Increased transparency and accountability
- Improved quality
- Empowerment to be active and take responsibility in care
- Establishment of foundation for collaboration between different groups which may have different goals and priorities
- Improved healthcare services that are user-focused
- Increased patient and public understanding of how decisions are made in healthcare and the context in which decisions are made
- Improved communication between patients, the public, staff, healthcare providers and healthcare organizations
- Increased health literacy and health system literacy



Adapted from:

⁵ Institute for Patient and Family Centered Care (2014): Retrieved from: <http://www.ipfcc.org/>

⁶ Abelson, J., Montesanti, S., Li, K., Gauvin, F-P. and Martin, E. *Effective Strategies for Interactive Public Engagement in the Development of Healthcare Policies and Programs*. s.l. : Canadian Health Services Research Foundation, 2010.

⁷ *Patient and Citizen Participation in Health: The Need for Improved Ethical Support*. Williamson, L. 6, 2014, Vol. 14, pp. 4-16.

⁸ *Public Engagement in Ontario's Hospitals - Opportunities and Challenges*. Born, K. and Laupacis, A. December 2012, Healthcare Quarterly, Vol. 15.

⁹ Interior Health. *Community Engagement Framework*. 2010.

Key Leadership Roles in the Engagement Process

Health PEI Staff Lead: *Staff Leads are Essential for Successful Engagement!*

The Staff Lead role is essential for successful patient and family engagement. Dedicate one or more Staff Leads to support your patient and family advisors (or volunteers) to sustain long term, face-to-face engagement activities. A Staff Lead is a consistent dedicated person who takes responsibility for building relationships with your public/patient volunteers and advisors. They are the primary point of contact for the Advisor and act as a bridge, supporting advisors to fully integrate and partner with the team. They are also responsible for facilitating and navigating recruitment and orientation of the Advisor along with supporting ongoing communication and administrative needs.

What do Staff Leads do?

- Support ongoing Advisor orientation in collaboration with Volunteer Resources and the team; identify key opportunities for learning and ensure that advisors are supported throughout the process.
- Foster connections between all participants by breaking the ice to create opportunities for stories to be shared. You provide emotional support and ensure that Advisor perspectives are sought out and heard.
- Ensure potential barriers to the full participation of advisors are identified and addressed (i.e. meeting accessibility, hearing or visual impairments, childcare, travel arrangements etc.).
- Prepare and debrief with advisors after engagement activities regularly to answer questions, acknowledge contributions and further develop your relationship with the Advisor.
- Help navigate challenges by connecting leaders, staff and advisors to appropriate individuals when they have questions or concerns and support the resolution of challenging situations.
- Lead (or support) tracking the contributions of Advisors depending on the chosen evaluation strategy. You track successes and challenges from the perspective of leaders, staff and advisors.
- Tell the story of engagement to stakeholders by identifying activities where patient and family advisor input made a difference and find ways to communicate engagement stories out broadly.

Tips for Health PEI

Staff Leads

- Ensure you are consistent and mindful about creating relationships with your advisors. Having many people serve as a lead can be confusing and distract from the relationship that is needed to support patients and families within the complexity of healthcare.
- Ensure that patient or family advisors are treated as equal members of the team from the beginning.
- To avoid *tokenism*, continually communicate with advisors by sharing information, seeking their input and incorporating their feedback.
- Commit to do something with the information shared and stick to the promises you've made to your patient or family members. Remember that patients and families know when their feedback is not being used or welcomed¹.

¹ Adapted from:

Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015.

Identifying Priorities

Why Engage?

An essential ingredient to high quality healthcare is actively including the voice of patients and families to improve quality, safety and health outcomes. There is also a growing movement within the Canadian public to be involved in decisions about how healthcare services are designed and delivered (AHS, 2014).

What are the benefits of engaging public/patients?

Below are goals and benefits listed for public/patient engagement. With your team, review these and select the top five that you are hoping to achieve. This process will help you develop a clear and concise rationale that illustrates why you should engage.

- ✓ Establish good relations with the community
- ✓ Provide timely, accurate, balanced, easily understood information
- ✓ Listen and learn about views, concerns and interests
- ✓ Consult for feedback
- ✓ Work collaboratively to develop recommendations and alternatives
- ✓ Delegate decision-making
- ✓ Bring attention to an important issue
- ✓ Identify a broader range of options
- ✓ Identify areas of conflict, mediate and build resolution
- ✓ Meet the needs or requirements of a regulatory process
- ✓ Avoid negative media
- ✓ Help public/patients develop their own plans and resolve problems/issues
- ✓ Reduce opposition
- ✓ Reduce delays
- ✓ Gain political, administrative and/or civic dividends
- ✓ Conform with a political decision to consult
- ✓ Reduce or prevent crises
- ✓ Manage stakeholder expectations effectively
- ✓ Achieve better decisions
- ✓ Create shared visions embraced by interests
- ✓ Inform public/patients about plans and decisions that will affect their lives
- ✓ Mitigate project impacts
- ✓ Improve project management
- ✓ Help public/patients understand the complexities of the issue
- ✓ Build stakeholder buy-in and shared ownership in the decision implementation and/or evaluation¹⁰

¹⁰ Adapted from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

Defining your Engagement Strategy

Now that you've determined that public engagement is required and you've identified the internal and external audiences that need to be involved, it's now time to establish the best strategy to meet your goals¹¹.

From IAP2's Spectrum of Engagement, now define your engagement strategy:

What **goal** do you have for this engagement activity/process? (e.g. to consult – obtain patient feedback on analysis, alternatives, etc).

What is your **promise** to the patient/public? (e.g. "We will keep you informed, listen and acknowledge your concerns and aspirations and provide feedback on how patient feedback influenced decisions.")

How are you going to do it? (e.g. focus group)

Answering the following questions will help determine the best strategy moving forward.

What messages are we taking out to the public?

What are we asking of the public in return?

When do they need to know it by?

How are we going to deliver it?

How are we going to report back?

What are the mechanisms and target measures for evaluating effectiveness?

Once you have defined your strategy, you can proceed with identifying the techniques that will help you reach your engagement goals.

¹¹ Adapted with permission from The City of Waterloo at: http://www.waterloo.ca/en/contentresources/resourcess/government/public_engagement_guidelines.pdf

Identifying Internal (Health PEI Staff) Partners

Internal Health PEI Partners/Stakeholder Plan¹²

Who needs to be involved?	
Who will be affected by the issue?	
Who may be potentially affected by the issue?	
Who can contribute to a solution that will meet the needs of the widest range of stakeholders and public audiences?	
Who will insist on being involved and cannot be left out?	
What other departments should be involved?	
How should politicians be involved?	

¹² Adapted with permission from The City of Waterloo at:
http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf

Identifying External/Public Partners

External Public/Patient Stakeholder Plan

Avoid Engagement Pitfalls¹³

Engagement can occur in many different ways with varying impacts. To avoid confusion, be clear about how you intend to engage patients and public and what level of engagement you are at. Involving patients and public in decision making is serious business.

Consider and discuss how you will involve¹⁴:

- ✓ Public Interest groups – e.g. Ethnic community associations, stewardship societies
- ✓ Specific demographic groups – e.g. youth or seniors
- ✓ Marginalized, hard-to-reach populations
- ✓ Industry associations and individual industries
- ✓ Scientific, professional, educational, voluntary associations
- ✓ Regional, provincial or federal government or agencies (in terms of policy issues)

To avoid pitfalls consider the following:

- Identify who is involved in the project and what is included in the scope of the advisory work
- Listen to them
- Provide opportunities for skill building and development
- Support them with briefings and information
- Respond to their contributions (you may need to do this before and after each meeting)
- Build a team that can work together and understand each other
- Be willing to learn from other’s experience
- Be willing to change in response to what you have learned

Who should be involved? List names.		
Is a partnering option possible with other levels of government?	YES	NO
Are there potential sensitivities to consider other government agencies might note (design, timing or implementation)?		
Are you including skeptics and cynics, but balancing their potential for disruption so they do not have undue advantage in any event?		

¹³ Adapted with permission from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

¹⁴ Adapted with permission from The City of Waterloo at: http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf

Recruitment Plan¹⁵

This recruitment plan is a template for you to use, adapt, or revise based on your needs for engagement. It can be used as a planning tool when you are thinking about recruiting members of the public for various engagement activities.

What do I need to know when I am recruiting?

The process of identifying, recruiting and working with patients and families and the general public for engagement involves careful consideration and ongoing commitment. Intentional recruitment based on your project's level of engagement supports increased capacity within your area. Involving patients and public who have the appropriate expertise and knowledge can really provide assets to your team and assist you in future initiative.

There are three key aspects to consider as you begin the process of recruitment of public and patients for engagement:

1. Qualities of Skilled Patients and Public

- Ability to share insights and information about their experience in ways that others can learn from them
- Can see beyond their personal experience
- Shows concern for more than one issue
- Listens and respects other's perspectives
- Good interpersonal communication skills and cultural awareness/competence
- Speaks comfortably in a group
- Works well with others
- Shows a positive outlook on life and a sense of humour
- Has the time to participate

2. Important Information to Share with Potential Participants

- Mission and goals of the project or committee
- Expectations for their participation
- Meeting times, frequency, location, and duration. (Include dates if possible).
- Expectations for communication (between meetings and among team)
- Reducing barriers to participation (e.g. best meeting times, etc)
- Benefits of participation (outcomes of involvement)
- Training and Support that will be provided

¹⁵ Adapted with permission from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

3. Participant Readiness: In some cases, you may have public or patient volunteers who have experienced harm in the healthcare system. There are a few things you can consider when partnering with someone after a harmful event:

- Give permission to patients, public, families, and healthcare staff to step away with dignity if they need a break.
- Ensure that open discussion about the events that took place between the patients and health care organization have been had already.

Recruiting Public, Patients and their Families

There are many ways to find potential patient and family volunteers. The way you recruit will vary depending on the level and method of the engagement activity. Generally, the more formal the engagement, the more formal the recruitment method (e.g. recruitment for a long-term provincial advisory council would be more formal than recruitment for a short-term focus group or working committee).

Where to find Patient and Families to Serve in Various Roles

- Contact other divisions to see if there are any existing advisors with health care experiences needed to inform the work you will be doing; but beware of volunteer fatigue.
- The best advisors are the people who have experienced care in the specific program area you are interested in improving. You may already have ideas and relationships!
- Ask other patients and families who are already involved if they have a friend who might be interested in participating.
- Contact patient or family networks, support groups, or advocacy organizations.*
- Post notices in appropriate language on bulletin boards in reception areas in clinics and on hospital units.
- Include information about opportunities for patients and families to participate as advisors in patient surveys.
- Use “key informants” – people in the community who are knowledgeable about patients and families’ needs and are a link to other patient and family groups.*
- Ask community and service leaders.
- Communications groups
- Social media advertising, etc.

*Suitable for recruiting hard to reach groups

Recruiting for Diversity

Traditional ways of engaging patients may exclude marginalized populations¹⁶. “Often, patient engagement strategies are developed to meet planners’ needs, so engagement processes end up reflecting the time and resources that the planner can commit to patient engagement, as well as how they intend to use patients’ input into planning. In these instances, patient engagement strategies are often not sensitive to gender and diversity, and do not account for how different women’s and men’s abilities, resources and social contexts influence their participation in engagement...” (p.5). Therefore, the demographics and healthcare experiences of your patient and families need to align with the services that you are providing. This may involve recruiting from diverse or hard-to-reach groups. Members should come from a broad range of backgrounds and represent diverse genders, expertise, socio-economic levels and cultural demographics. In addition, materials that you develop, provide, or circulate should be written in clear, plain language (Click here: [PEI Literacy Alliance can act as a Resource](#)).

Examples of diverse groups include (but not limited to):

- Those who do not speak English as a first language
- Children/Youth/Seniors (65 Years +)
- Lesbian, gay, bisexual and transgender (LGBT)
- People living with chronic illnesses or disabilities
- Those living in geographically isolated communities
- People with sensory impairments (i.e. scent allergies)
- Newcomers to Canada
- Those living with culturally diverse backgrounds
- People with mobility issues
- People with low levels of literacy
- People with mental illness and/or addictions

Recruitment Checklist (the following items are also included in this toolkit):

- ✓ Information for Participants (of committee, level of involvement etc)
- ✓ Expression of Interest forms (when there is no immediate opportunity) for participants to fill out and submit
- ✓ Application forms for Participants (when there is immediate opportunity) for participants to fill out and submit
- ✓ Interview Protocol (for Health PEI staff)
- ✓ Confidentiality and non-disclosure agreement form
- ✓ Letter to participants and Terms of Reference

¹⁶ Fraser Health. Patient Engagement Heard and Valued: A handbook for meaningful engagement of patients that have not traditionally been heard in healthcare planning. Retrieved from: http://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/awesome_handbook-fraserhealth.pdf?sfvrsn=2

Role Criteria for Public and Patient Engagement

This could be a template for developing criteria or requirements that you would be recruiting for your engagement activity. Feel free to adjust the criteria to meet your engagement activity's needs.

Sample Volunteer Skills and Criteria¹⁷:

- Having received care in PEI is an asset.
- Feels that an advisory role is valuable and that this role will benefit in planning and delivery of safe and high quality service for the patient, family and caregivers.
- Able to communicate the perspective of patients, survivors and family members effectively, thinking beyond individual experience.
- Willing to share opinions and to work within a collaborative approach in a group forum that includes health professionals, senior administrators and others.
- Willing and able to review written materials, in English or French. We do not expect patient representatives to become experts in clinical matters or in research – your experience as a patient/family/caregiver member provides you with a unique perspective to share.
- Willing and able to comply with the expected time commitment, which will primarily occur during weekdays or possible evenings depending on the role.
- Willing and able to comply with the confidentiality agreement requirements of Health PEI.
- Willing and able to comply with the Health PEI Code of Conduct.
- Willing and able to provide a satisfactory criminal record check.
- Personal experience with X treatment or disease within the last X years as either a patient or caregiver (family member or friend who provided care and support).
- Ability to correspond by email is an asset.

¹⁷ Adapted from Health PEI: Cancer Advisor Documents. Unpublished draft documents.

Sample Patient and Family (and Caregiver) Advisor Role Descriptions:

All candidates must have had a sample healthcare experience within the last 10 years.

Sample Provincial Sample health Coordination Steering Committee	2 Volunteer Positions
--	------------------------------

Sample health Patient/Family/Caregiver Advisors will:

- Actively participate in 6 - 10 committee meetings per year (week days or evenings)
- Fulfill a two year term with possible extension
- Provide an important perspective to priority setting, discussions and decisions
- Gain knowledge and understanding of the health system
- Be a valued partner in efforts to improve patient safety and quality of care
- Work collaboratively with committee members, including physicians, lead health system administrators and community partners
- Be supported by a staff partner and receive orientation to the organization and committee
- Successfully complete the application form and participate in the selection process
- Comply with agreed upon terms of reference, codes of conduct, confidentiality and conflict resolution
- Provide a satisfactory criminal record check if selected

Staff Contact: Name of contact, Provincial Sample health Coordinator (email or 902-368-5555)

Sample Health Action Groups	4-8 Volunteer Positions
------------------------------------	--------------------------------

Sample Health Patient/Family/Caregiver Advisors will:

- Have had a sample health experience within the last 10 years in either lung, breast, colorectal or prostate sample health. (please specify on application)
- Actively participate in 6 - 10 action group meetings per year (week days or evenings)
- Have an opportunity to volunteer for small group work if desired to support priorities of the action group
- Fulfill a two year term with possible extension
- Provide an important perspective to priority setting, discussions and decisions
- Gain knowledge and understanding of the health system
- Be a valued partner in efforts to improve patient safety and quality of care
- Work collaboratively with other members, including healthcare providers, health system administrators and community partners
- Be supported by a staff partner and receive orientation to the organization and committee
- Successfully complete the application form and participate in the selection process
- Comply with agreed upon terms of reference, codes of conduct, confidentiality and conflict resolution
- Provide a satisfactory criminal record check if selected

Staff Contact: Name of contact, Provincial Sample health Coordinator (email or 902-368-5555)

Sample Health Care Quality Improvement Team**2 Volunteer Positions**

Sample Health Patient/Family/Caregiver Advisors will:

- Have had a sample health experience within the last 10 years (preferably receiving care in PEI)
- Actively participate in 4 - 8 meetings per year (weekdays)
- Have an opportunity to participate in small working groups to help support quality improvement initiatives
- Fulfill a two year term with possible extension
- Provide an important perspective to priority setting, discussions and decisions
- Be a valued partner in efforts to improve patient safety and quality of care
- Gain knowledge and understanding of the health system
- Work collaboratively with other members, including healthcare providers, health system administrators and community partners
- Be supported by a staff partner and receive orientation to the organization and committee
- Successfully complete the application form and participate in the selection process
- Comply with agreed upon terms of reference, codes of conduct, confidentiality and conflict resolution
- Provide a satisfactory criminal record check if selected

Staff Contact: Name of contact, Provincial Sample health Coordinator (email or 902-368-5555)

Volunteers for Consultation**To Build a List of Volunteers**

Volunteers for future consultation:

- Are needed to support initiatives and program development that will strive to improve patient safety, quality of care and overall satisfaction of the PEI health system
- Should have a vested interest in the sample health prevention, care and information
- Will be contacted when opportunities arise such as focus groups, surveys, material review or research
- Are needed to represent the diversity of our provinces population, including but not limited to rural life, persons with disabilities, fluent in languages other than English, minority populations, a variety of education and employment experiences, new residents or senior populations.
- Provide an important and valued perspective that will advise priority setting, health system planning and service delivery
- Gain knowledge and understanding of the health system
- Be a valued partner in efforts to improve patient safety and quality of care
- Be supported by a staff partner
- Successfully complete the application form

Staff Contact: Name of contact, Provincial Sample health Coordinator (email or 902-368-5555)

Information for Participants

What do I need to know about engaging with Health PEI?

Patient and family advisors play a unique role in helping Health PEI (HPEI) to improve the quality and safety of health services for all islanders. There are many advisor roles in HPEI. The most common are members of advisory committees, boards or councils, document reviewers, participants/speakers at conferences and/or focus groups¹⁸.

Why should I Consider Being a Patient or Family Advisor?

- A chance to improve the quality and safety of health care services for you and your family
- The opportunity to be a part of meaningful discussion and make a contribution
- Increase your ability to understand and share information with other patients and families about the health system and priorities of healthcare
- The opportunity to network with staff, providers and leaders and other advisors.
- Expand your knowledge and skills about patient and family-centered care and your health care system

Why Does Health PEI want you to be a Patient or Family Advisor?

- To improve the quality and safety of healthcare
- Increase the knowledge and skills of leaders and staff about the importance of the experience of patients and families
- Increase our ability to do our jobs better when planning services
- Give a fresh perspective on problems and create innovative solutions

What can Patient and Family Advisors do?

- Participate on long term committees or short term working groups
- Attend focus groups or offer their patient experience story
- Speak at conferences and healthcare events
- Give feedback about facilities and communications planning
- Be members of councils and review teams
- Help educate others by talking about their healthcare experiences as they relate to improving patient and family-centered care
- Become a patient and community engagement researcher

Examples of ways Health PEI currently partners with patients and families:

- Cancer Care Patient Councils and Ethics Committees
- Site-based Advisory teams and Steering Committees
- Supportive family volunteer programs
- Child and Youth Advisory Councils

¹⁸ Adapted with permission from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

(Sample) Patient and Family Volunteer Advisor Expression of Interest/ Application Form

Health PEI and the (Name of) Committee would like to extend thanks to you for your interest in considering volunteering with us. If you have any questions please contact the Health PEI Staff Contact at the information listed below or by calling 902-368-XXXX.

Please complete this form and return it to the Health PEI Staff Liaison. You will be contacted to follow-up on your interests and what a suitable role may be.

Mail:

Health PEI
PO Box 2000
Charlottetown, PE C1A 7N8

Drop Off:

Health PEI
16 Garfield St.
Charlottetown, PE

Email: xxx@ihis.org

Fax: 902-555-5555

Contact Information (Please Print)

First Name: _____ Last Name: _____

Street Address: _____

City/Town: _____ Postal Code: _____

E-mail Address: _____

Day-time Phone Number: _____

What is the best way to contact you?

Phone

Email

Experience

1. Please check the box that best describes your experience with the health system:

- Patient Currently Receiving Treatment (Year of Diagnosis: _____)
- Type of patient: (Year of Diagnosis: _____)
- Family/Caregiver

2. Please tell us where you (or your family member/friend) are receiving/received treatment/care:

- Queen Elizabeth Hospital
- Prince County Hospital
- IWK Halifax
- Community Hospital (Specify: _____)
- Other location: _____

3. What is the type of health issue you or your family member/friend were diagnosed with: (Optional)

- | | | |
|--------------------------|--------------------------|---------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Other: |

4. Please indicate the age range that you belong to:

- 18-29
- 30-49
- 50-74
- 75 and Over
- Under 18 (parent/guardian consent will be required)

5. Are you comfortable communicating in English? (verbal and written)

- Yes
- No

6. Do you speak any other languages? _____

7. A.) Do you have experience as a member of a committee either through paid work or as a volunteer?

- Yes
- No

B.) If yes, please tell us a bit about the committee(s) and your role (s):

Patient and Family Advisor Volunteering

8. How did you hear about the Patient and Family Advisor opportunity?

9. Please tell us why you are interested in being an Advisor?

10. How do you think your experience (including work, volunteer and experience in the health care system) and skills will help you as [e.g. Patient/Family Advisor]? Please feel free to share examples of your experience and/or skills.

11. Is there anything else you would like us to know about you that will help us determine what role you are most suitable for?

12. Are there any areas with the [health issue] journey that you are particularly interested in (e.g. prevention, screening, treatment, or patient support)

13. How long could you commit to participating as a [insert role name here]?

- Less than 1 year 2 years
 1 year Unsure

14. When are you available to volunteer?

- Immediately Preferred Start Date: _____

15. Are you able to participate in activities during weekdays and evenings?

- Yes No

References:

Name:	Name:
Contact (Phone and/or Email)	Contact (Phone and/or Email)

Please return your completed form¹⁹ using the information on page 1.

¹⁹ Adapted from the Health PEI Cancer Patient and Family Volunteer Advisory Application Form

Sample Interview Questions

Why do you want to volunteer with HPEI? ²⁰	Your questions or considerations?	How do you want to interact with HPEI?
Why are you interested in becoming engaged with HPEI?	Tell me about yourself (what you like to do in free time, interests, where are you from?)	What is your preferred method of contact?
Do you have any recent health care experience?	Is there anything you would like us to know about you?	What communications and computer/internet access is available to you? Do you have a phone? The internet?
What area of the health system did your experience take place? (e.g. primary care, hospital)	Are there any kinds of accommodations or support from us that will help you in your volunteer experience?	Are you able to travel (i.e. within your city, general region, or throughout the province)?
Were you the patient, family member or friend of the patient?	Do you bring the perspective of someone from an economic, social, cultural, economic, or geographical group that is either well represented or under-represented in PEI?	How often can we contact you? (Annually, bi-annually/quarterly/ monthly)
What unique life experiences or perspectives would you bring to your volunteer role with HPEI?	Are you a member of a minority population? If so, would you feel comfortable representing their perspective?	Do you have any questions I can help answer right now?
What are your areas of interests/ skills that you wish to contribute?	What other volunteer work have you been involved with? Tell me more...	
Would you prefer to have more formal or informal involvement with HPEI?	Do I have your permission to add your name (and any other information you share with) that will enhance HPEI's diversity of people included in their engagement strategy?	
How do you think you can best contribute to our work?		
Do you feel able to share your experiences in ways that others can learn from? Can you give an example?		
Do you have any concerns about the emotional experiences you may have in sharing your story?		

Tips:

- ✓ Decide who from your team needs to be at the interview.
- ✓ Select team members based on who will be working with the potential volunteers.
- ✓ Ensure that all agree on and understand the selection process.
- ✓ Share the questions with potential volunteers in advance of the interview so they can prepare.
- ✓ A rating scale along with any notes can be used during the interview to help you and the advisor determine if the advisor is the right fit for the engagement opportunity.

²⁰ Adapted with permission from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

Confidentiality and Non-disclosure Agreement Forms

Health PEI
One Island Health System

16 Garfield Street
P.O.Box 2000, Charlottetown
Prince Edward Island
Canada C1A 7N8

Santé Î.-P.-É.
Un système de santé unique

16, rue Garfield
C.P.2000, Charlottetown
Île-du-Prince-Édouard
Canada C1A 7N8

CONFIDENTIALITY and NON-DISCLOSURE OF INFORMATION UNDERTAKING

Health P.E.I. is responsible for the operation and delivery of publicly funded health services in Prince Edward Island and as part of this mandate has created several interdisciplinary committees to ensure high quality patient-centered care within Health PEI programs and facilities, including representation for patients/residents/clients, family or the community on such committees. In order for such committees to be effective, sometimes information of a personal, private or otherwise confidential nature may be shared with the committee members.

Each member of any such committee is required by law to keep confidential all information encountered by them in the course of the committee's actions, and to protect the reputation of the committee, its members, and the privacy of any patient involved. Patient/resident/client, family or community members are required to sign and abide by this Confidentiality and Non-Disclosure Undertaking, in order to participate in the activities of the committee to which they have been appointed.

I, _____, of _____, Province of _____
(print/type name of Representative) *(insert address of Representative)*

Prince Edward Island, have been appointed to the _____
(insert name of committee)

(the "Committee"), the term of my appointment being from _____ to _____
(insert start date of term) *(insert end date of term)*

I understand and agree that:

1. All information made known to me through the course of my involvement with the Committee is sensitive and private and I will keep all such information in strict confidence. I will retain all information obtained from and through the Committee in a confidential manner and will not copy, discuss, disclose, or permit to be disclosed any information provided to me by or on behalf of the Committee, or any other confidential information unless such copying or disclosure is required or specifically authorized by the Committee;
2. My obligation to preserve the confidentiality of all information I obtain through my participation with the Committee will not only be for my term of appointment to the Committee but will continue indefinitely; and
3. If I breach my obligation to preserve the confidentiality of the information, I will be immediately terminated from the Committee.

SIGNED BY ME and witnessed this _____ day of _____, 20____:

Signature of Representative

WITNESSED BY:

Signature of Health PEI representative witnessing Representative signing
Print Name of witness:
Title:

Human Resources – Central
PO Box 2000, Charlottetown
Prince Edward Island
Canada C1A 7N8
www.healthpei.ca

Ressources humaines – Central
C.P. 2000, Charlottetown
Île-du-Prince Edouard
Canada C1A 7N8
www.healthpei.ca

PLEDGE OF CONFIDENTIALITY

I understand that all confidential information to which I have access through my employment with the Health PEI is not to be used or disclosed except for the purpose for which it was collected and as required in the performance of my duties or where otherwise permitted or required by law.

I understand that disclosure of confidential information in a manner not consistent with the purpose for which it was collected and as required in the performance of my duties, except where otherwise permitted, may be cause for disciplinary action as an employee of Health PEI.

Employee Name: _____ (Please Print)

Employee Signature

Date

Employer Representative Signature

Date



SAMPLE Terms of Reference

Health PEI (Title of Your Project/Division) Steering Committee (or type of committee)

Mandate/Work Scope:

Example: To work collaboratively with internal and external stakeholders to build recommendations toward a model and implementation plan for a coordinated approach to Health PEI services which support XXX (e.g. cancer) patients and their families. This work focuses on (describe the target population).

Values: describe the values that underpin the project work

Key Goals and Objectives/Timelines:

List your goals and objectives

Include timelines, including how long the term is (e.g. two years)

Structure:

Priority agenda items will be circulated to the committee prior to the meeting

Minutes will be recorded by a volunteer from the committee.

Meetings will be arranged in advance to accommodate members' schedules

Decision Making Process, Reporting and Accountability:

The group reports to XXX Division within Health PEI.

Quarterly (or bi-annually, etc) updates and reports from this committee will be provided to: (names of management)

The group is responsible for/to: (e.g. make recommendations to forward to management). Describe how recommendations are made (vote?). The Executive Leadership Team and the PEI Department of Health and Wellness are ultimately responsible for final decision making on the direction of programs and services in this area.

Frequency of Meetings:

Describe how often the group will meet, and include dates if you know them.

Role and Responsibilities of Committee Members:

Example: Committee members are requested to be present for all meeting discussions and to follow up on assigned tasks in between meetings as appropriate. If members are not able to attend specific meetings, they are requested to review materials and provide feedback via email.

Procedures for conflict resolution and/or confidentiality

Membership:

COMMITTEE MEMBERSHIP		
Role	Name	Area of work or expertise

Collaborative Partnerships and Preparing for Collaborative Meetings

Successful engagement requires a commitment to developing and supporting a strong partnership between *all* stakeholders. Mutual respect, trust, honesty, equity, dialogue and negotiation are essential elements for successful collaboration. Relationships look different depending on the level of engagement (see *IAP2 Spectrum*) and method of engagement. Patient and families participating in engagement activities that take place face-to-face and over the long term will require more support.

What Does a Collaborative Relationship Look Like²¹?

- Mutual respect for skills and knowledge
- Honest, timely and clear communication
- Understanding and empathy
- Mutually agreed upon goals
- Shared planning and decision making
- Open two-way sharing of information
- Accessibility and responsiveness
- Joint evaluation of progress and successes
- Absence of labeling and blaming

In Preparation for the Meeting:

- ✓ Find a time and location that is convenient for participants and staff.
- ✓ Communicate with your patient and families in their preferred ways and times (i.e. phone during mornings, etc.)
- ✓ Send the agenda and minutes, providing ample time for review in advance by all participants
- ✓ Create a list of all committee members with a brief description of each person's role to increase an advisor confidence
- ✓ Prepare staff by asking them to identify ways to support collaboration with patient and family advisors
- ✓ Offer a mentor for new advisors: an experienced patient and family advisor or existing committee member is ideal
- ✓ De-brief with your advisors immediately following the meeting
- ✓ Have parking passes and expense forms ready. Designate one staff member to be responsible for reimbursement and all logistics for advisors

Helpful tips:

- Work with your patient and families in advance of your meetings to ensure they are comfortable and understand the work. Do this in person when possible.
- Seek to have 2-3 patient representatives. Having just one patient or family on a committee is not recommended; also anticipate that patients and families will not be able to attend all meetings.
- Follow up with volunteers when they miss meetings (i.e. send the minutes, phone to follow up). Let them know that their presence was missed and their participation is valued.
- Create a variety of ways for patients and families to participate (i.e. conference calls, written review of materials, etc)

²¹ (Alberta) Adapted from Calgary Health Region. Involving Patient Experience Advisors on Region Committees and Teams. 2007Jeppson, E.S. and Thomas, J. Families as Advisors: A training guide for collaboration. Bethesda, MD: Institute for Family-CentredCare.1997.

Meeting Effectiveness Rating Scale

This rating scale could be used by Health PEI staff who are involved in an engagement activity that involves meeting(s). It is designed to be a tool that encourages reflection about how effective engagement meetings are with patients, families, and/or staff.

Please rate the questions below where 1= Poor; 2=Fair; 3=Satisfactory; 4=Good; 5=Excellent.	1	2	3	4	5
1. How clear were the goals from the agenda of this meeting to you?					
2. What was your general level of participation at this meeting?					
3. What was the leadership like in this meeting?					
4. What was the quality of the decision making at this meeting?					
5. What was the cohesiveness among the members at this meeting?					
6. How well was this meeting organized?					
7. How productive was this meeting?					

Please answer the following questions with No or Yes, and with comments where appropriate.	No	Yes
8. Was there conflict present at this meeting?		
a) If there was conflict present, was it resolved?		
b) If the conflict was not resolved, please describe why.		

Please answer the following questions and provide any additional comments necessary.
9. What could have been done to make this meeting more effective?
10. Please provide any additional comments you would like to make about this meeting.

Based on how you answered these reflective questions, you may choose to make changes in the process of conducting meetings (e.g. if you have many 1s or 2s); or it may provide you with reflections on how to maintain a process that is working really well for your group.

List of Non-Governmental Organizations

To access the most up-to-date spreadsheet of Non-Governmental Organizations, {insert instructions here}

Logistics: Encouraging Participation and Reducing Barriers

There are four key ingredients to encouraging public participation and reducing barriers for participation:

1. Accessing diverse and marginalized populations (also see Recruitment Plan worksheet for recruiting for diversity)
2. Balancing power relations - making it welcoming; establishing trust
3. Provide food for meetings
4. Carefully choose accessible locations

ACCESSING DIVERSITY

Deciding to recruit from diverse and marginalized groups is the first step (back in your recruitment plan); however, encouraging participation and even accessing these groups is another step. “Diverse and marginalized populations experience barriers to attending a patient engagement session, because they do not learn about the patient engagement opportunity, they do not want to participate or they cannot get to the place where the engagement happens, whether it is at a physical or a virtual location.”²² (p.6). When you are recruiting for diversity, you need to make sure that you advertise in a variety of ways: word of mouth, radio, newspaper, social media, health centres (posters), community centres, pharmacies, grocery stores, etc. For example, if you are looking for a patient to sit on a committee about children with special needs, you might post an advertisement in the waiting rooms for pediatricians.

POWER

Once patients are at a patient engagement session, they may encounter other barriers to participating in a meaningful way. These barriers lie in the location of power in the engagement process, in the ways that power is produced, maintained and transformed. In order to reduce these barriers consider:

- When the engagement happens (e.g. time of day may exclude people who work)
- Where the engagement happens (e.g. events in a city may exclude people who live in rural areas)
- How the engagement is conducted (e.g. online survey may exclude those without internet)
- Who facilitates the engagement (e.g. facilitators need to have good listening skills and work hard to build trust)
- The capacity of public/patients to participate (e.g. events in evening for a committee about children’s health may need to provide child care)

²² Fraser Health. Patient Engagement Heard and Valued: A handbook for meaningful engagement of patients that have not traditionally been heard in healthcare planning. Retrieved from: http://www.cfhi-fcass.ca/sf-docs/default-source/patient-engagement/awesome_handbook-fraserhealth.pdf?sfvrsn=2

FOOD

When you are inviting public and patients to volunteer their time and experiences, it is a good practice to also feed them! People love coming to meetings where food and coffee/tea/water are served. You can be almost guaranteed it will encourage engagement; and they will also come back another time. Remember to be cautious of potential allergies (e.g. provide nut-free snacks, etc).

LOCATION

In order to reduce barriers to public and patient engagement, careful thought to the locations in which you engage is important. Ideally, the space in which you meet should be a neutral, accessible, and safe place for public and patients and Health PEI staff.

Ask yourself:

- What physical barriers might prevent community members from participating in engagement opportunities and how can I best address these? This will include thinking about the needs of people with disabilities, the needs of seniors and access to public transit.
- What is the best location for a meeting or event? Is it well known, accessible by public transit, physically accessible and in an area generally regarded as “safe”?
- What is the best time of day for a meeting or event? You should always consider the difficulties that local community members with jobs outside the area will have in attending daytime events. You should also consider the needs of caregivers and parents, seniors, those reliant on limited public transit and others for whom daytime meetings or events might be more accessible.
- Do participants have access to transportation (consider costs etc)?

See more at: <http://www.artscapediy.org/Creative-Placemaking-Toolbox/Who-Are-My-Stakeholders-and-How-Do-I-Engage-Them/A-Guide-to-Engaging-the-Community-in-Your-Project.aspx#sthash.70vk5Gmp.dpuf>

Contact

There are a few locations that are located in various communities across PEI that are available after typical government hours, that the HPEI Staff could help you book.

Location	Phone	Email
Access PEI Souris	(902) 687-7000	accesspeisouris@gov.pe.ca
Montague (126 Douses Road Boardroom)	(902) 838-0903 (Sue Millington)	smillington@ihis.org
Stratford Town Hall *for community engagement	(902) 569-1995	rarsenault@townofstratford.ca
Charlottetown Aubin Arsenault Building Farm Centre	(902)368-6513 (902) 892-3419 (902) 892-3419	
Harbourside Medical Centre	(902) 432-2600	
Four Neighborhoods Medical Centre	(902) 569-7772	
Hunter River- Central Queens Health Centre	(902) 621-3050	
Access PEI Summerside	(902) 888-8000	accesspeisummerside@gov.pe.ca
Access PEI O'Leary	(902) 859-8800	accesspeioleary@gov.pe.ca
Access PEI Alberton	(902) 853-8622	accesspeialberton@gov.pe.ca

For a complete list of provincial government buildings and spaces, and who to contact to book them, please see: <http://www.gov.pe.ca/infopei/index.php3?number=11094andlang=E>

More Tips:

- Work with community and NGO's who serve various populations
- Partner and communicate with community-based health services where they are already interacting
- Reduce costs associated with participating (e.g. provide bus passes, childcare, stipends, mileage)

Checking in: The Cornerstone Engagement Checklist

The following checklist will help you evaluate if you have met the guiding principles for effective and meaningful public/ patient engagement. This checklist can be used at any point in the project; however, you may wish to use it as a check-in midway through a project.

High scores (3-5's) mean that you are doing well at effectively engaging your group at this point in the project. Scores of 1-2 likely mean you should be reflecting and revising some of your engagement processes.

Please rate the following where 1 = Unsatisfactory; 2 = Less than satisfactory; 3 = Satisfactory; 4 = More than Satisfactory; 5 = Outstanding	1	2	3	4	5
1. Accountability					
The promises made to public/patients about their involvement were kept	1	2	3	4	5
The expected outcomes of the process were achieved	1	2	3	4	5
Opportunities to evaluate the process were provided	1	2	3	4	5
Resources were used responsibly	1	2	3	4	5
The design and implementation of the process were effective	1	2	3	4	5
2. Inclusiveness					
Every effort was made to accommodate diverse needs	1	2	3	4	5
Affected public/patients were reached or involved	1	2	3	4	5
Opportunities to create shared outcomes were provided	1	2	3	4	5
3. Transparency					
The purpose of and promise about engaging public/patients was made clear	1	2	3	4	5
Roles and responsibilities were communicated clearly, were understood and accepted	1	2	3	4	5
Information provided was timely, accurate, balanced, objective, accessible and easily understood	1	2	3	4	5
Feedback was provided on how public/patient input influenced outcomes	1	2	3	4	5
4. Respect					
Appropriate resources were used according to budget	1	2	3	4	5
Staff were trained and capable of supporting effective involvement	1	2	3	4	5
Public/patients' time and resources were respected and used effectively as defined in the TOR agreement	1	2	3	4	5
5. Responsiveness					
Affected groups and communities were kept up-to-date of issues	1	2	3	4	5
Decision-makers were prepared for, and responsive to, public/patients' views.	1	2	3	4	5

Evaluating Engagement Initiatives

Evaluating the process and outcomes of engagement initiatives are an important piece of engagement practices in healthcare^{23, 24}. Alberta Health Services recommends five aspects to designing an evaluation strategy for engagement²⁵. They are listed below.

Designing an Evaluation Strategy for Engagement

1. **Work with the advisors to create an evaluation outline:** Design an evaluation timeline early on in the engagement initiative that includes routine 'check ins' (e.g. before and after meetings). Routine 'check ins' allow you to see if the project is 'on track' for meeting the goals and objectives mutually determined by the team and the advisors. It also allows you to make adjustments to the project as needed and catch issues as they arise.
2. **Determine what exactly needs to be evaluated and how to evaluate it:** Decide what questions need to be asked to determine if the objectives of both the engagement process and the project are being met. Determine what the best method of evaluation might be to get the data you need (e.g. a survey or an interview). Ensure the evaluation questions and process is mutually determined by all stakeholders and meet the needs of all project participants.
3. **Be clear about the data needed to evaluate:** Specify the exact data you will need to complete the evaluation (e.g. time keeping records, expense reports and/or meeting notes) so those involved in the evaluation can be sure to track and record data throughout the project.
4. **Develop an evaluation plan:** Identify key milestones and timelines as well as who will be involved in the evaluation process and what they will do (e.g. who will conduct the interview; report the outcomes of the evaluation to supervisors, etc.)
5. **Determine what will be done with the evaluation information:** will the results be sent to supervisors or other stakeholders? If so, then clarify which stakeholders, and who will disseminate the information.

²³ Fraser Health. Patient Engagement Heard and Valued: A handbook for meaningful engagement of patients that have not traditionally been heard in healthcare planning. Retrieved from: http://www.cfhi-fccss.ca/sf-docs/default-source/patient-engagement/awesome_handbook-fraserhealth.pdf?sfvrsn=2

²⁴ Ontario Local Health Integration Network. LHIN Engagement Guidelines and Toolkit. Retrieved from: <http://webcache.googleusercontent.com/search?q=cache:XCQ5ZxRW8PwJ:www.northwestlhin.on.ca/~media/sites/nw/uploadedfiles/LHIN%2520Community%2520Engagement%2520Guidelines%2520and%2520Toolkit%2520-%2520February%25202011%2520-%2520FINAL.pdf+andcd=2andhl=enandct=clnkandgl=ca>

²⁵ Adapted from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>

Evaluation and Getting Feedback from Volunteers

At the end of each volunteer/engagement experience, it is important to gather feedback from participants about their experience with Health PEI. You can use the following form as a sample of the types of questions you can ask your volunteers/advisors.

Engagement Process Questions Please circle one)				
How detailed, complete and easy to understand was the background information provided to you?	Very	Good	Satisfactory	Not at all
Do you feel you had enough of the right information to take part in the discussion?	YES		NO	
Overall, how was your experience as an advisor or volunteer?				
How could your experience have been improved?				
What would you do differently next time?				
Any additional comments?				

Engagement Outcome Questions				
Overall, how satisfied are you that your opinions were heard and understood?	Very	Good	Satisfactory	Not at all
Overall, how confident are you that your opinions will influence the final decision/outcome?	Very	Good	Satisfactory	Not at all
How satisfied are you with the decision/outcome?	Very	Good	Satisfactory	Not at all
How satisfied are you with the communication of the decision or outcome?	Very	Good	Satisfactory	Not at all
Any additional comments?				

Adapted from: Alberta Health Services A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>.
 Capital Health. Engagement Framework and Toolkit. *Capital Health*. [On Line] 2011. [Cited: July 23, 2011.]
<http://www.cdha.nshealth.ca/system/files/sites/317/documents/engagement-framework-and-toolkit.pdf>.

Evaluation and Getting Feedback from Staff

At the end of each engagement experience, it is important to gather feedback from yourselves about your experience. You can use the following form as a sample of the types of questions you can ask your volunteers/ advisors.

Engagement Process Questions		
How many patient/family advisors or volunteers participated in the engagement activity?		
Were the right patients and families, including hard to reach populations, at the table?	Yes	No
Did you use any incentives to encourage participation? If so, what incentives did you use?	Yes	No
Was staff time within estimates?	Yes	No
Time spent by staff in preparation, delivery, and follow up		
Number of hours estimated:		
Were these budgeted for?		
Number of actual hours:		
Gap? Explain why:		
Were engagement costs within budget? Budget:	Yes	No

Engagement Outcome Questions		
Did the patient engagement activity or the participation of the patient/family advisor or volunteer contribute to the project? If so, explain how. If not, explain why.	Yes	No
Was the decision and rationale communicated to the advisors/volunteers?	Yes	No
Was input from the advisor/volunteer included in the decision-making process?	Yes	No
Was the organizational goal and promise back to public, patients and families achieved?	Yes	No
What would you do differently next time?		
Additional comments?		

Adapted from: Alberta Health Services. A Resource Toolkit for Engaging Patient and Families at the Planning Table. Alberta Health Services. Retrieved on September 11, 2015 from <http://www.albertahealthservices.ca/PatientsFamilies/if-pf-pe-engage-toolkit.pdf>.

City of Waterloo. Public Involvement: Guidelines, tools, and worksheets for successful community involvement. Retrieved from: http://www.waterloo.ca/en/contentresources/resources/government/public_engagement_guidelines.pdf

Capital Health. Engagement Framework and Toolkit. *Capital Health*. [On Line] 2011. [Cited: July 23, 2011.] <http://www.cdha.nshealth.ca/system/files/sites/317/documents/engagement-framework-and-toolkit.pdf>.

[Place Health PEI Letterhead]

Sample Thank You Letter to Public/ Patient Volunteer

[DATE]

[VOLUNTEER NAME]

[ADDRESS]

[CITY, STATE, ZIP CODE]

[COUNTRY]

Dear [VOLUNTEER NAME]:

An essential ingredient to high quality healthcare is actively including the voice of patients and families to improve quality, safety and health outcomes in the work we do in Health PEI. The phenomenal success of [ENGAGEMENT ACTIVITY] is a reflection of the ever-increasing dedication and enthusiasm [X PATIENT] volunteers' display on a continual basis.

I would like to personally thank you for your recent contribution of [x years, months, day) of personal time to the [ENGAGEMENT ACTIVITY]. This would not have been a success without your involvement. Because of your support we [LIST ACCOMPLISHMENTS].

The [PROJECT NAME] was a resounding success, but we couldn't have done it without you! The Project Manger[s], Team Leads [if applicable] and [Agency/Partner Name] appreciate your gift of time, energy and enthusiastic support. We would like to take this opportunity to say a heartfelt "Thank You!".

Best Wishes,

[Name and Signature]

Job Title

Division

Health PEI

Sample Public/ Patient Engagement Volunteer Appreciation Certificate

Presented to:

In recognition of outstanding engagement in support of Health PEI and working to improve access to safe, quality health care of all Islanders.

Name of Staff Lead
Health PEI
Date, Year



Health PEI

One Island Health System

