



Community Engagement Strategy and Operational Plan 2010-2012

Dated: January 2011



**As your community hospital, Bluewater Health
will cultivate an environment that values open
communication, relationships and partnerships with
those we work with and serve.**

Table of Contents

	Page #
1.0 Introduction and Purpose	1
2.0 Definition of Community and Community Engagement (CE)	3
3.0 Guiding Principles for Community Engagement	4
4.0 Stakeholders	6
5.0 Framework	7
6.0 Governance Policy - Community Engagement	9
7.0 The CE Process – Overview and Resources	9
8.0 Community Engagement Priorities for 2010/11	11
9.0 Resource Requirements	11
10.0 Monitoring and Evaluation	12

Appendices

- A. Governance Policy - Community Engagement
- B. Community Engagement Strategy Inventory - Aligned with Framework and Priorities
- C. Collaborative Initiatives Inventory
- D. Communication Plan and Community Engagement Template

1.0 Introduction and Purpose

Introduction

In 2009, the Board of Directors of Bluewater Health established the Community Engagement Strategy Development Committee on the recommendation of the Governance Renewal Task Force to assist in the development of a broad strategy for community engagement (CE). A number of factors at the time led to this decision including:

- One of the key responsibilities of the Board under the modified Pointer-Orlikoff governance model adopted by the BWH Board is "Fostering Relationships" with key stakeholders.
- Several of a provincially-appointed investigator's recommendations addressed components of community engagement including clarifying the role of community advisory panels and community representatives on board committees, and strengthening relationships with various stakeholders including, but not limited to, physicians, nurses, other staff and the rural community.
- Section 16 (6) of the *Local Health Services Integration Act* (LHSIA) (the legislation which created the LHINs) requires health service providers (including hospitals) to "engage the community of diverse persons and entities in the area where it provides health services when developing plans and setting priorities for the delivery of health services".
- The 2008 provincial Auditor General's Annual Report on Hospital Board Governance, as well as provincially-appointed hospital supervisor and investigator reports have stressed the need for sound community engagement processes in hospitals.
- The July 2010 report "The LHIN Spin" reported on the investigation into the Hamilton Niagara Haldimand Brant LHIN's use of CE in its decision making processes. In the report the Ontario Ombudsman Andre Marin identified a number of concerns and recommended concrete steps to ensure greater clarity, consistency and transparency with respect to CE for LHINs. Several important points were made in the report which should be considered by hospitals and other health service providers as they develop CE plans and processes.

In addition, the new Strategic Plan approved by Bluewater Health (BWH) for 2009-12 included the following as one of its five strategic priorities:

Exceptional Relationships - "As your community hospital, Bluewater Health will cultivate an environment that values open communication, relationships and partnerships with those we work with and serve"

More generally, it was recognized that BWH, like all healthcare organizations, is operating in an environment of constant change, growing financial uncertainty and increasing demands and expectations from internal and external communities. A sound CE strategy to support Bluewater Health in successfully responding to these multiple challenges was determined to be of paramount importance.

In its January 2010 report, the Committee made recommendations to the Board with respect to community engagement definitions, rationale, guiding principles, framework and identified strengths, and areas for improvement under current BWH community engagement activities. The Committee concluded that **Bluewater Health currently has a robust combination of community engagement**

processes that cover three basic categories of community engagement: interpersonal, print media and electronic media. It further noted that there is a vibrant array of community engagement strategies that involve personal contact with stakeholders at various intervals depending on the issue, from speaking engagements by senior staff and board members to the Advisory Panels. Bluewater Health also effectively uses print media with both internal and external stakeholders. **It was recommended that these strategies be continued and enhanced where appropriate.** Exploration of current Web 2.0 technologies (e.g. social media technologies) was recommended in order to enhance BWH's electronic presence and complement current electronic, interpersonal and print media methods of engagement in use.

The Committee's summary recommendation was for BWH's senior management to build upon the work of the Committee by developing an operational plan outlining the Community Engagement (CE) strategy for the hospital by September 2010. This overarching strategy should be designed to align current processes and initiatives, along with new ones as needs change, into a coherent framework and to facilitate ongoing monitoring of its effectiveness.

In response to that recommendation, this document was developed in collaboration with the Department of Communications & Public Affairs.

Purpose

Bluewater Health's mission is to create exemplary healthcare experiences for patients and families every time. Effective community engagement will support the organization in achieving this mission by helping us to:

- Assess the needs of the community
- Bring diverse voices and differing perspectives into the planning and decision-making process
- Target resources where they are most effective and needed by the community
- Enhance services based on community feedback
- Contribute to better health outcomes for the people we serve
- Demonstrate Bluewater Health's accountability to the community
- Build trust and credibility with communities
- Foster positive relationships
- Inspire confidence in and commitment to Bluewater Health
- Prepare stakeholders for the future of healthcare

This Community Engagement Strategy and Operational Plan was developed in support of Bluewater Health's commitment to ongoing engagement with stakeholders and communities that have a stake in, or will be impacted by our actions and decisions, both present and future.

The objectives of the strategy and plan are to:

- build awareness, understanding, support and trust with internal and external stakeholders
- deliver on Bluewater Health's commitment to openness, timeliness and accountability in decision-making processes
- develop and embed effective processes for obtaining community input that represents the views of the people the hospital serves
- ensure that engagement becomes an integral component of the hospital's governance, management and operating processes
- support the achievement of our vision: *Exceptional Care - Exceptional People - Exceptional Relationships* and strategic priority: *Exceptional Relationships* - "As your community hospital, Bluewater Health will cultivate an environment that values open communication, relationships and partnerships with those we work with and serve"
- meet the requirements of Section 16 (6) of the *Local Health Services Integration Act* (LHSIA) that the hospital have a community engagement plan
- support the identification of service gaps, potential solutions, proposed new, increased or decreased service delivery and continuous improvement in the quality of care

The strategy and plan is designed to inform and assist the BWH Board of Directors, managers and staff - all decision-makers - in better understanding *what* community engagement is, the process itself, BWH priorities, tactics and processes, and to support the identification and pursuit of opportunities for engagement with stakeholders in their areas of responsibility.

Similar to the hospital's strategic planning cycle, this strategy and plan is based on a 3-year planning cycle (2009-12), with an annual review and update.

The development of this Community Engagement Strategy and Operational Plan is an iterative process that will continue to be modified as Bluewater Health evolves and gains more knowledge and expertise in community engagement. As such, Bluewater Health will continue to review and refine the CE Strategy based on input from the Board, management and Advisory Panels.

2.0 Definitions of Community and Community Engagement

Bluewater Health's CE Strategy is founded upon the following definitions:

Our community is those we work with and serve.

Community engagement is a process which enables two-way dialogue and interaction between Bluewater Health and the community so that its members can be informed and involved in the planning and, when appropriate, the decision making process for healthcare services and policies that touch their lives. The process is informed by the IAP2's "Public Participation Spectrum" which addresses five goals of potential interaction and the different behaviours and roles the 5 drive: **Inform, Consult, Involve, Collaborate and/or Empower**.

3.0 Guiding Principles for Community Engagement at Bluewater Health

Bluewater Health's CE Strategy is founded upon ten guiding principles under which we will operate and for which we will be accountable to our community. These principles are intended to orient the Board, management, staff and volunteers and all stakeholders to the approach that the hospital will take in its community engagement work.

	Guiding Principle	Rationale
1	<p>Every member of our community is a stakeholder*.</p> <p>*See stakeholder identification below</p>	<p>At one time or another everyone in our community will have contact with Bluewater Health or will be affected by our decisions. Therefore, on issues of broad public concern, we will look for appropriate opportunities to engage interested stakeholders (individuals and groups from our community).</p>
2	<p>Diverse voices contribute to better decisions.</p>	<p>It is intended that by involving individuals and groups from diverse backgrounds who are directly affected by our decisions it will result in more informed decisions and outcomes.</p>
3	<p>Two-way dialogue is essential between BWH and its community.</p>	<p>The purpose is to listen and learn, as well as to inform, share and educate.</p>
4	<p>In an effort to deliver patient and family-centred care, we will focus on engagement activities that encourage input from patients, and other key stakeholders.</p>	<p>Patients and families who have experience in our system are uniquely equipped to share with us important input about what we can do to make Bluewater Health more patient- and family-centred.</p>
5	<p>We will consider the patient's entire healthcare experience in every interaction.</p>	<p>The patient experience spills over organizational boundaries, highlighting the need for partnership, cooperation and collaboration with other agencies and partners.</p>
6	<p>It is our goal to bring diverse and marginalized voices into the planning and decision-making process.</p>	<p>This will allow for the consideration of perspectives that would not otherwise be heard.</p>
7	<p>We recognize the importance of candid communication and strive to be open and transparent in how we share information about Bluewater Health's decision-making with the community.</p>	<p>Bluewater Health routinely consults with the community about key system decisions including planning and policy. All major decisions have multiple (technical, best practice, legislative, or financial) considerations in addition to community engagement. Efforts will be made to communicate these inputs or</p>

	Guiding Principle	Rationale
		constraints to the committees and communities.
8	We will engage the community as partners in healthcare.	Bluewater Health’s engagement strategy and processes will be grounded in the International Association of Public Participation’s (IAP2) Public Participation Spectrum - inform, consult, involve, collaborate, empower . This spectrum and its application to Bluewater Health’s community engagement work is expanded upon in Section 5.
9	We will engage the community with integrity to build trust and credibility.	Bluewater Health will make reasonable efforts to ensure that community input and recommendations are solicited in time to be fully considered by decision-makers. We make commitments to the community in good faith and will honour them.
10	We will complete the circle of engagement.	Bluewater Health will reconnect with those involved on how their input was considered in decision-making and will monitor and evaluate the effectiveness of its engagement processes.

4.0 Stakeholders

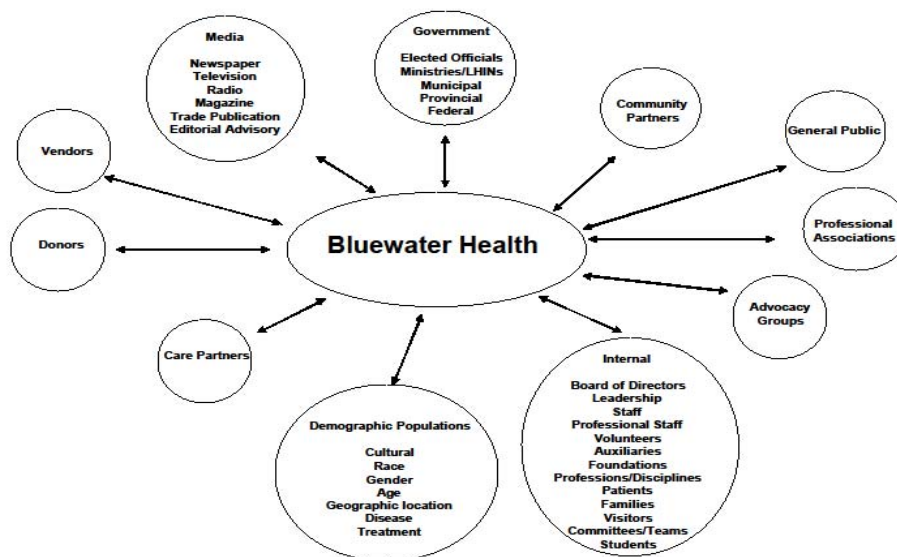
Bluewater Health is committed to an inclusive CE Strategy as demonstrated in the broad definition of community upon which the Bluewater Health CE Strategy is founded - *our community is those we work with and serve*. In order to promote inclusiveness, a situational analysis and stakeholder identification is a part of each of our CE opportunities which would include, among others, the following questions:

- Who should be informed, consulted, involved ...?
- Who is likely to be affected?
- Who is likely to be interested?

Individuals, groups of individuals, or organizations who will either be affected by BWH activities or have the ability to impact BWH activities may be considered as key stakeholders for a particular issue.

For all processes and tools used in the CE Strategy, participants must know and understand why they are receiving the communication or being asked to participate (e.g. information sharing, input, advice, decision-making) and when asked to participate must feel their input is valued by the hospital leaders and making a difference for the hospital and community served.

The following diagram provides a general overview of possible stakeholder groups:



It is not always practical or possible to engage all stakeholders in decision-making given time constraints, the rapidly changing healthcare environment, and limited human and financial resources. Therefore BWH will devote time, effort and financial resources to engage defined stakeholder communities and consider in its selection those who are most likely to be affected. These stakeholders include but are not limited to:

Staff, Physicians & Volunteers: Individuals providing care at the front line and support services are critical to our success. They have knowledge and opinions about our services and the care provided.

Patients & Families: Our attitudes, choices, activities and way of delivering care have a direct and profound effect on our patients.

Health Service Providers/Partners: The organizations and professionals who provide care to individuals before and after care at BWH are important stakeholders when we contemplate changes.

Funding Partners: MOHLTC and ESC LHIN have a large stake in the actions and success of BWH. They have the responsibility of integrating the system and supporting all citizens.

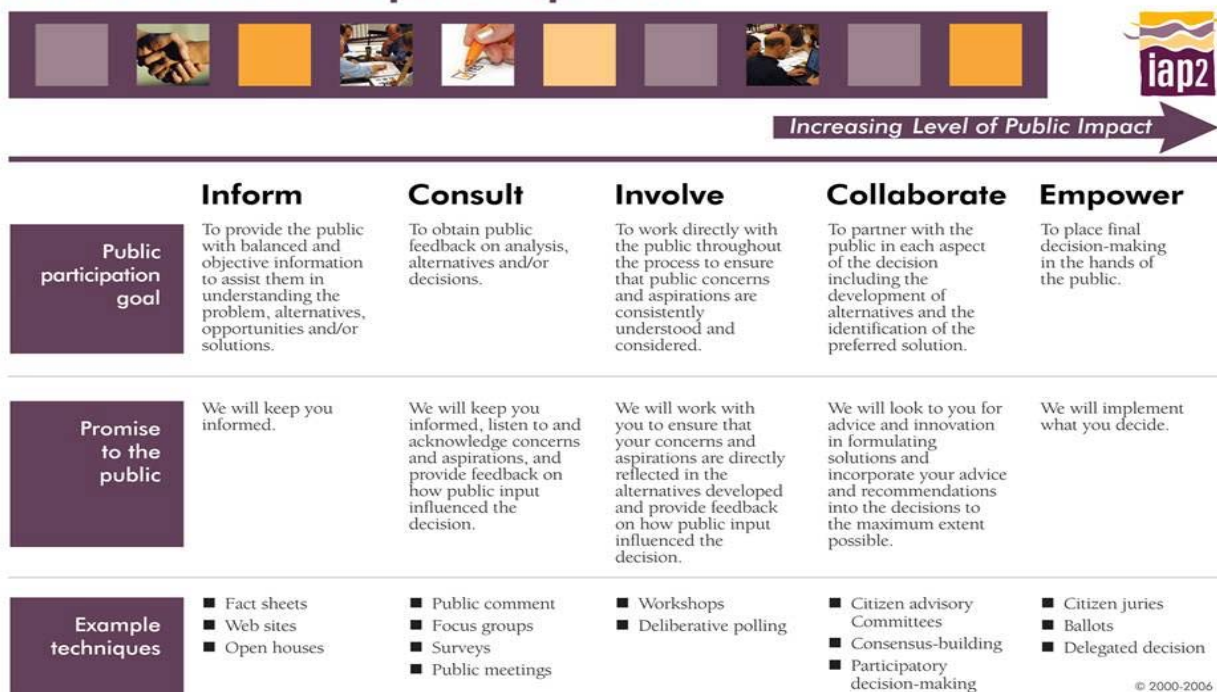
Donors: Those who provide significant financial support have a vested interest. Their tangible support is evidence of their concern for local healthcare and understanding of our mission and vision as well as their confidence in us to deliver on our promise.

Media: Those third-party communication channels through which news, education, data, or promotional messages are disseminated. Media includes newspapers, magazines, TV, radio, billboards, direct mail, telephone, fax, and internet .

5.0 Framework

Bluewater Health’s CE Strategy will be grounded in the use of the Public Participation Spectrum (*Informing, Consulting, Involving, Collaborating, Empowering*) of the International Association of Public Participation (IAP2) (see below) as the framework for community engagement at Bluewater Health. This framework outlines Bluewater Health’s commitment to CE and recognizes that different approaches may be appropriate for achieving different engagement goals and outcomes.

IAP2’s Public Participation Spectrum



The IAP2 spectrum describes five goals for public participation ranging from Informing (with a low level of public involvement) to Empowering (with a high level of involvement). ***The appropriate goal for a CE process will depend on the underlying rationale for CE in a particular situation.*** A single CE process can span a number of goals, with one goal predominating. In a complex project, there may be different types of engagement at different periods of time and for different stakeholders. It is important, however, that the objective in each case is clear and transparent to all stakeholders, to avoid misunderstanding or the creation of unrealistic expectations.

To set appropriate expectations, when identifying BWH's CE goal, the promise or commitment the organization wishes to make to its stakeholders must be clear:

- If a decision has already been made and the objective is simply to keep stakeholders informed about an issue, then the CE goal will be to ***inform***.
- If a decision has not yet been made and the organization commits to keeping stakeholders informed and to listening to and acknowledging their concerns, with feedback on how that input influenced the decision, then the CE goal will be to ***consult***.
- If the organization commits to reflecting the concerns and aspirations of stakeholders in the alternatives developed and provide feedback on how their feedback influenced the decision, then the CE goal will be to ***involve***.
- If the organization turns to stakeholders for their advice in forming solutions, and commits to incorporating this advice into decisions to the maximum extent possible, the CE goal is will be to ***collaborate***.
- If the organization commits to assisting stakeholders to manage and control their own process, for example by providing training, resources or other supports, with the stakeholders making the ultimate decision, then the CE goal will be to ***empower***.

Take for example recent communications and community engagement work regarding the CEEH ED. In partnership with the ESC LHIN and its reference panel, tactics included media, public forum, staff engagement sessions, presentations/education of issues, householder mail drop, suggestion boxes and on-line stakeholder feedback.

6.0 Governance Policy - Community Engagement

The Board of BWH has approved a policy to guide the community engagement work and process. It addresses the Board's responsibilities for establishing a CE strategy for BWH and the delegation of responsibilities to the CEO for the development, implementation, monitoring and evaluation of a CE operational plan consistent with the strategy. See Appendix A for the policy.

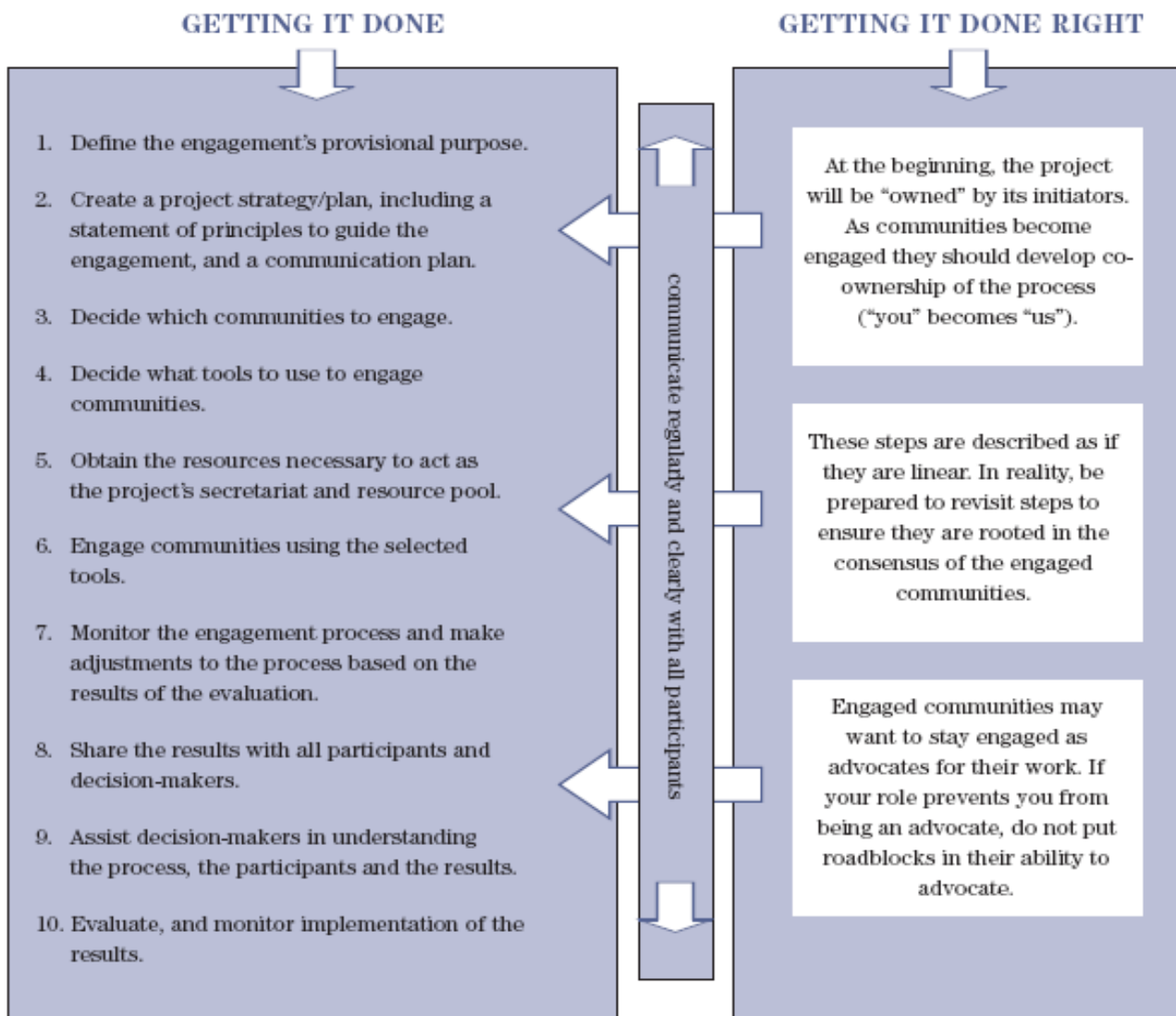
7.0 The CE Process – Overview and Resources

BWH's CE Strategy includes a variety of ongoing processes, mechanisms and initiatives that cover both internal and external audiences and incorporate such tactics as two-way dialogue, print media and electronic media. These are outlined in the CE Strategy Inventory in Appendix B.

In addition, it is recognized that an opportunity for community engagement exists when BWH is contemplating a new, changed, reduced or eliminated clinical program, service, project or process, when time and circumstances permit. In these situations, the Executive Council (EC) will consider whether a community engagement process should be developed and applied involving appropriate stakeholder groups, with oversight by the Governance and Nominating Committee of the Board. Any community engagement that is undertaken should align to at least one of the CE goal statements in BWH's CE Strategy.

Such a process will include the following steps and/or considerations:

- 1) Based on a recommendation from a member of the Executive Council (EC), EC will decide whether a formal community engagement process is needed. The Communication Plan and CE Template (Appendix D) provides a checklist to guide the decision-making process as to whether CE is needed for the project and will be used for this purpose by EC.
- 2) If the answer is no, then information about the changing process or project will be communicated to identified stakeholder groups.
- 3) If the answer is yes, an engagement plan is developed using the model depicted below to plan the process when timing and circumstances permit. In keeping with this model, the BWH Communications Plan and CE Template(Appendix D) will be used by the executive sponsor (EC member) as a guide, with input from Communications & Public Affairs and Special Projects, to identify the purpose, objectives, timeline, stakeholder groups, timeline and required resources. EPIC, Engaging People Improving Care, an electronic "toolkit" on community engagement (CE) for healthcare contains a variety of additional resources to support the implementation of the Template. <http://www.epicontario.ca>
- 4) The executive sponsor (EC member) who initiated the plan will report to EC, the Governance and Nominating Committee and the Board of Directors on outcomes of the engagement process for consideration in decision-making, as appropriate to the project upon which the engagement process has been undertaken.
- 5) Management will keep the Governance and Nominating Committee and the Board apprised of the status of engagement processes being undertaken through its regular CE updates to the Committee and/or CEO Reports to the Board.
- 6) It is anticipated that the result(s) of community engagement, may mean changes to the original decision, action steps or timeline, to introduce or eliminate/reduce a program, service, project or process.
- 7) Such community engagement processes may result in patients and their families coming forward with personal information or involve labour relations, property or financial issues. The engagement plan must recognize the need to maintain confidentiality of individuals, and abide by hospital bylaws and policies.



In support of BWH's Strategic plan, a set of community engagement (CE) priorities has been established for the organization. Tactics and activities to address these priorities are identified in the CE Strategy Inventory in Appendix B and the Collaborative Initiatives Inventory in Appendix C., and in executive and departmental strategic plan implementation plans. Alignment of the CE priorities, tactics and activities with BWH's CE framework is also reflected in these inventories.

The CE priorities for 2010/11 are to:

1. Inform and involve the community in the transition to the new building and ongoing renovation project.
2. Strengthen capacity and engagement of the CAP and RHAP to provide meaningful advice and input into hospital decision making.
3. Act upon opportunities to strengthen relationships with employees, Professional Staff and volunteers as identified in the recent Employee engagement, physician satisfaction and volunteer satisfaction surveys.
4. Build internal commitment, culture and capacity for community dialogue and engagement
5. Strengthen dialogue with community service partners and patients and families at the program and departmental levels with goal of improving quality of care, service coordination and integration, and resource utilization.
6. Review the Ministry and LHIN CE Guidelines to ensure BWH's CE Strategy is aligned

7. Monitor the Excellent Care for All Act and its requirements for CE and complete work to achieve compliance

9.0 Resource Requirements

Community engagement, done well, requires time, effort, materials, and focused attention. Although the government and public expect higher levels of CE in healthcare, no additional funding has been made available. The current department of Communications and Public Affairs is comprised of 2.5 FTE with little capacity for workload growth. Dependant upon the frequency, need, scale and scope of BWH CE activities, additional resources will be required – either internally or externally.

As described in the Communications Plan and CE template (Appendix B), it is envisioned that Communication and Public Affairs and the Special Projects Administrator will provide guidance and counsel on planning and implementation of the communications & community engagement process.

Communications & Public Affairs will act in a consultative role to support leaders with their communication plans and needs, and provide advice, resources and templates to guide communications planning. The Special Projects Administrator will act as a resource for leaders with respect to Bluewater Health's CE Strategy and the implementation of CE principles and processes.

CE cost considerations will include whether some CE activities require a facilitator. With or without a facilitator, CE costs will normally include:

- print and radio advertisements
- household mailer
- production and distribution of print materials
- design and production of display materials (e.g. storyboards)
- survey tools (development and tabulation)
- venue rentals for community meetings
- multi-media audio-visual equipment (e.g. large screen projection, PA, wireless microphones)
- catering

Low or no cost opportunities could include such tactics as public service announcements, radio morning show or call in shows, existing hospital publications (e.g. Pulse), board meetings, elected officials' meetings, website content, e-blasts, chamber of commerce newsletter inserts and social media opportunities.

Using a recent scenario as a touchstone (CEEH ED community engagement), it is not unusual to incur costs of \$5,000 per initiative (excluding a facilitator and staff time)

It is recommended that BWH establish an annual CE budget of \$25,000.

10.0 Monitoring and Evaluation

Successful implementation of BWH's Community Engagement Strategy requires hospital staff and physician leaders to shift behaviour (e.g. engaging community members in planning) and attitudes (e.g. believing that the contributions of community members will result in a stronger final product). Furthermore, to be successful, all hospital leaders need to take accountability for identifying and pursuing opportunities for community dialogue and engagement within their area of responsibility. It is part of a leadership role.

A Community Engagement strategy is only useful if it achieves its goals and objectives. We will therefore evaluate the success of our community engagement efforts by conducting a three (3) year review of the CE Strategy against the CE goals and objectives as outlined in Section 1.

The Governance and Nominating Committee (G and N) of the Board will provide oversight for the hospital's CE Strategy by monitoring its implementation and effectiveness and reporting to the Board on a regular basis. To fulfill this role, management will annually present to the Board through the Governance and Nominating Committee for review, an overview of the CE Strategy and Operational Plan which will include the key priorities, updated tactics and related timelines, including a report on progress and achievements/outcomes against these priorities. Annual progress reports will also be provided to the CAP and RHAP at the beginning of each fiscal year. During the review, advice will be sought on changes and improvements to the CE Strategy and Operational Plan.

Moving forward, the G and N Committee will also be responsible for reviewing and addressing issues that arise during plan implementation based on input from management, the CAP and RHAP and generally as needs arise. To facilitate its role, CE will be a standing, quarterly item on the G and N Committee agenda.

In addition to monitoring and evaluating the overarching strategy, it is important that BWH evaluate each CE process that is undertaken to determine what worked, what could have been improved and what lessons were learned. The information gained from these evaluations will be invaluable to the organization in identifying areas for improvement in future CE processes. The Communications and CE Template includes an evaluation component to support this process (Appendix D). Key issues identified through the evaluation process should be used to strengthen BWH's CE Strategy as it evolves.