

South West
LOCAL HEALTH INTEGRATION NETWORK

RÉSEAU LOCAL D'INTÉGRATION DES SERVICES DE SANTÉ
du Sud-Ouest

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APPENDIX B:

Community Engagement Framework

May 8, 2006

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Background

Local Health Integration Networks (LHINs) were established with a mandate to improve access to, and the quality of, health services for the residents of Ontario through strengthened integration and coordination. LHINs represent a key component of the government's vision for an integrated health system that delivers the services that people need and offers an innovative response to some of the significant challenges now facing the Ontario health care system. Some of these factors driving the need for change include:

- Ontario's aging population is contributing to rising health care costs and will continue to do so well into the future;
- Health care costs have been rising at rates that are significantly higher than average economic growth within the province;
- New and emerging technologies generate increasing demand and costs;
- Financial and human resource constraints threaten the sustainability of our current system;
- The current system is comprised of thousands of health care providers and services that are increasingly difficult to coordinate centrally; and
- Often consumers are left to find their way through the health care system, making their own arrangements as they move from one health service to another.

To meet the changing demands on the system, LHINs have been created as a vehicle for integrating local health care services and facilitating the movement of patients across the continuum of care. A key component of our mandate is to work in concert with our community partners to make the health care system more patient-centred and responsive to local needs.

The South West LHIN will provide leadership for community engagement locally and implement a comprehensive approach to community engagement so that the collective wisdom of our communities will be available to help guide and influence change within our health system. We will endeavour to keep all partners informed and engaged, foster positive relationships across the local health system, and encourage involvement in all aspects of our activities.



Framework for Community Engagement

The *South West LHIN Community Engagement Framework* shares our goals and guiding principles for community engagement, and proposes an approach to develop meaningful conversation as we embark on this journey with our partners. The ideas and principles outlined here will provide the foundation for more detailed strategies and plans to ensure active participation in every aspect of our work in the community. We view the Framework as a living document which will evolve and change over time, and we invite input from our partners to help refine it over time.

What do we mean by Community Engagement?

Our definition of *community* is broad and includes any collection of individuals that is tied together by geography, common characteristics or a shared interest. *Community engagement* then, is the process of working collaboratively with and through groups of people that have been brought together by geographic proximity, common characteristics, or a special interest in order to address issues affecting the well-being of their community¹.

The value of community engagement is recognized throughout the Ontario health care system and has been highlighted as a priority of the provincial government. Engagement can create transparency, promote responsibility for priority-setting, and encourage shared ownership of initiatives and strategies to achieve our goals. Ongoing dialogue amongst our partners also contributes to knowledge sharing and enables the development of new and positive relationships across the community.

Who will be involved?

Within our communities, various groups will be affected by, or have the ability to affect, the activities of the LHIN. These groups – *our partners* – will be the focus of our engagement activities. Our partners include:

- Members of the public and residents who reside within the LHIN boundaries
- Consumers (patients or clients) and their families
- Transfer payment provider agencies and other service providers
- Established networks and local partnerships
- Other LHINs and province-wide networks and organizations
- Government at all levels including municipal and provincial partners

¹ Center for Disease Control and Prevention, Public Health Practice Program Office (1997). Community engagement: definitions and organizing concepts from the literature. Atlanta, Georgia. (www.cdc.gov/phppo/pce/part1.htm).



Service providers, in particular, will play a critical role and will continue to be accountable for ensuring the engagement of consumers in their own planning processes. A detailed list of our partners is provided in Appendix A.



Our Goals and Guiding Principles

The South West LHIN's commitment to building and maintaining a vibrant dialogue with our partners is demonstrated by our four goals of community engagement:

Focus on the people who use health care – We will work in partnership to build a system that places the consumer at the centre and engage with those who are most knowledgeable about their needs, experience and satisfaction with health care services.

Enhance local accountability – We will enhance accountability by providing opportunities for input into decision-making and fostering a sense of mutual responsibility for achieving goals.

Balance priorities – We will work to ensure that the full diversity of voices in the community are heard, and to build a shared sense of responsibility for achieving balance among competing priorities.

Develop system capacity and sustainability – We will draw on the knowledge and capacity of our partners to identify needs and to help build sustainable, long-term local solutions.

PRINCIPLES OF ENGAGEMENT

<i>Shared Vision</i>	We will work with the community to develop and implement plans that are consumer-centred, focused on population health, and consistent with legislative and regulatory requirements.
<i>Mutual Respect</i>	We will build relationships and engage our communities using methods appropriate to the groups that we are working with and the objective that we are trying to achieve. We will be respectful and inclusive of all our partners.
<i>Accountability</i>	We will establish a community engagement approach that enables timely and meaningful dialogue and through evaluation we will ensure that our community engagement efforts are meeting established objectives.
<i>Transparency</i>	We will utilize an open process clearly stating the purpose, goals, objectives, expectations, and the manner in which engagement activities will influence decision-making within the South West LHIN.
<i>Commitment</i>	We will work with our partners to achieve a consumer-centred, sustainable health care system.



Achievement of our goals will depend on a shared commitment to the community engagement process, and continuing involvement from our partners. Our objectives in the coming months will be to:

- Provide communities with balanced and objective information to promote understanding of the South West LHIN mandate and the responsibilities and expectations of all partners;
- Obtain feedback and recommendations on community needs, service gaps, and opportunities for service coordination and integration;
- Work directly with our partners to ensure that all community concerns are understood and considered;
- Build and strengthen relationships throughout the South West LHIN to identify and develop integrated service delivery solutions.

Our Approach

The South West LHIN has developed a comprehensive, multi-faceted approach to community engagement that will invite input and participation from across diverse interests and geographies. The key building blocks of our approach are summarized below.

Building on Existing Networks and Relationships

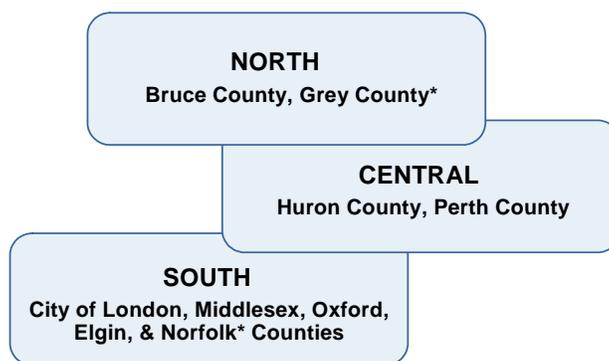
We recognize that there are many groups and networks with a particular health interest or focus that currently exist within the South West. Many of these are well-established and have effectively responded to community needs or local integration opportunities. We will work closely with these networks and bring together new groups with participants from across the South West to work on priority strategies, initiatives and processes. As appropriate, these groups will also be invited to assist in the design and implementation of specific community engagement activities with consumers and the public.

We also recognize that the South West LHIN is home to approximately 925,000 people representing 7.5% of the population of Ontario and that there are hundreds of organizations and groups that are our partners. We are in the process of developing an inventory of South West LHIN networks and groups so that we will be able to establish a working relationship with these important health partners.

Creating Geographic Community Engagement Areas

Experience has shown that it is difficult to plan for large dispersed populations based on “LHIN-level” characteristics because this approach often obscures disparities in health status, access and needs in different parts of the region.

To keep community engagement meaningful and relevant we propose to organize within and across three geographic areas with the input and support of local Area Provider Tables. This will leverage the tremendous work that has already occurred in the South West LHIN and enable us to effectively engage local consumers with and through geographically-based provider networks. The map provided in Appendix B illustrates the proposed geographic areas of the South West LHIN.



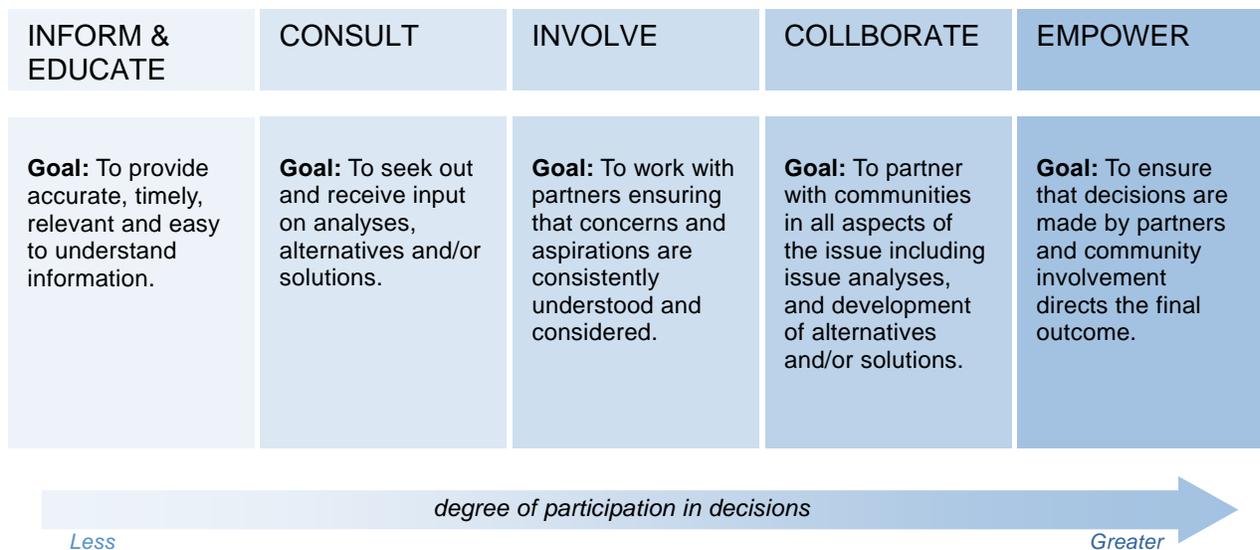
** Municipality is partially located within South West LHIN*

These community engagement areas have been identified to provide an opportunity for broad based engagement across the LHIN. It is recognized that clients and service providers will cross these boundaries for services and geographical areas are intended to enhance, not limit, community engagement. The designation of these geographic areas may be modified in the future based on feedback from our partners and a more thorough analysis of population characteristics and service consumption patterns.

Integrating a Full Spectrum of Engagement Techniques

We envision a continuum of community engagement methodologies, incorporating a range of techniques from broad-based open forums to highly focused issue-specific round tables. We acknowledge that our partners have many demands on their time and will work to tailor our engagement activities to ensure the relevance to those involved. We will chose our techniques based on the level of engagement appropriate to our specific objectives or goals – from simple information sharing at one end of the continuum to more active participation and empowerment at the other.

The continuum below shows the relationship between the levels and illustrates that the more complex the issue and the greater the need for community involvement in decision-making, the more multi-faceted the engagement activities become. In each case, our engagement activities would have a different objective or goal. A summary of selected tools and techniques is provided in Appendix C.



Adapted from the IAP2 2000 Public Participation Spectrum; Arnstein, S. (1969). A ladder of citizen participation. Journal of the American Institute of Planners, 35, 216-224; Vancouver Coastal Health Authority Community Engagement Framework



Evaluating the Framework

A community engagement framework is only useful if it achieves its objectives. Therefore, the following aspects will be monitored and reviewed as we design our engagement activities with the objective to build our expertise and continue to refine our approach and techniques:²

- Participants have a clear understanding of the goals and objectives of the engagement, including the level and method;
- Participants are clear about the scope of the engagement and have a shared understanding of each others' roles, responsibilities and authority;
- The engagement takes place when there is a real opportunity to influence the outcome;
- Sufficient resources (time, budget, technology, etc.) and expertise are invested to achieve success;
- Accessible opportunities are available that embrace the broad diversity of community interests;
- The process is responsive to the input and needs of participants;
- Relevant and credible information is gathered and distributed to participants in a timely manner and in a manner suitable to the intended audiences; and
- The communication leads to a mutual understanding of process and an understanding and acceptance of outcomes.

Next Steps

The *South West LHIN Community Engagement Framework* is intended to describe an inclusive approach to engagement that reaches out to as many communities as possible. We recognize that the development of this Framework is an iterative process and that it will continue to be modified as we evolve and gain more knowledge and expertise.

We look forward to working with our partners and invite your feedback on this – our proposed Community Engagement Framework. Your time and effort in doing so are appreciated.

Together we will make a difference in the health of our communities!

² Adapted from Vancouver Coastal Health Authority Community Engagement Framework (www.vch.ca)

Framework Appendix A: Examples of Our Partners

Residents/public	Individuals who reside within the LHIN boundaries. A communication plan will be developed to engage the general public.
Clients/patients/care givers/families	Individuals who receive services from health providers within the South West LHIN or surrounding LHINs.
Transfer Payment Providers (agencies that will be funded directly by the LHIN)	<ul style="list-style-type: none"> • Community Support Services • Mental Health and Addictions • Hospitals • Long-Term Care Homes • Community Care Access Centres • Community Health Centres
Other Service Providers	<ul style="list-style-type: none"> • Family Health Teams • Physicians (Family physicians and specialists) • Nurses/ Nurse Practitioners • Public Health • Other (e.g., private retirement homes) • Human Services Providers (examples include: Children’s Mental Health, Police, School Boards)
Local Networks	<ul style="list-style-type: none"> • Rural Health Networks • South West Ontario Digital Imaging Network Project • South West Ontario Geriatric Assessment Network • South Western Ontario Regional Stroke Network
Other LHINs/ Provincial Networks	<ul style="list-style-type: none"> • Cardiac Care Network • Cancer Care Ontario • Stroke Strategy
Government	<ul style="list-style-type: none"> • Ministry of Health and Long-Term Care • Ministry of Children and Youth Services • Ministry of Community and Social Services • Ministry of Health Promotion • Cities, Municipalities and Mayors • Members of Parliament (MPs); Members of Provincial Parliament (MPPs)
Others	<ul style="list-style-type: none"> • Funders • United Ways • Associations and Societies • Provincial Associations • Professional Associations • Regulatory Colleges • Health Care Industry Associations • Business Community <ul style="list-style-type: none"> Chambers of Commerce Large employer groups

Framework Appendix B: South West LHIN Geographic Areas



Framework Appendix C: Tools and Techniques for Engagement

<i>Tool/Technique</i>	<i>When to use them</i>	<i>Benefits/Risks</i>
Action Planning Event (i.e. forum or workshop)	When you need to produce plans of action that are owned by those affected by them or who will implement them.	Need to be structured, carefully planned and appropriately facilitated.
Advertising / Public Service Announcements	When you need to reach a broad audience of people within a community.	Can be expensive. Hard to target or to monitor effectiveness. Can miss key groups.
Advisory Committees/ Reference Groups	When you need consistent input or advice over a period of time from people who have good local knowledge.	Time consuming to recruit and establish. Need effective participants. Need a good facilitator and Terms of Reference. Need a sunset clause.
Brochures & Printed Material	When you need to have basic information on aspects of the project to hand or mail out.	Expensive to produce. Need a distribution method to get them to the right people. Important to have any written material translated for particular groups in a project area, or an indication where interpreters can be accessed in a number of languages.
Community Research	When you need to strengthen the partnership with specific stakeholders to provide further insights into an issue or Framework.	A team with participation from key stakeholders is required to share the responsibilities and outcomes of any research.
Fact Sheets/ Information Sheets	When you need to provide consistent accurate information on aspects of the project to stake holders.	Written information needs to be clear, jargon free and illustrated where possible. Important to have any written material translated for particular groups in a project area, or an indication where interpreters can be accessed in a number of languages.
Focused Group Discussions	When you need generate discussion and insights on aspects of your projects.	A skilled facilitator is needed to ensure outcomes are achieved. Timing and neutral venue are critical to ensure participation. Some reimbursement for travel may be needed.
Interactive Web Sites	When you need to provide accessible, clear and appropriate information cost-effectively to a broad cross-section of stakeholders and then collect easily to analyze responses for them.	Web sites can provide lots of information cost-effectively to those people with access to computers and the Internet. Web sites can also include response forms that can be completed electronically and e-mailed back to the sender for immediate analysis. Web sites can also allow stakeholders to ask questions and receive answers with the question and answers accessible to all.
Media or Publicity	When you need to disseminate clear and simple information within a community quickly.	Relationships with a journalist need to be established early so they understand the project. Media releases need to be structured with simple clear messages.



<i>Tool/Technique</i>	<i>When to use them</i>	<i>Benefits/Risks</i>
Newsletters	When you need to keep people regularly informed about progress of a long-term project.	Newsletters can be printed and distributed by mail or letterboxing, electronically distributed by e-mail or posted on the Internet. Requires the establishment and maintenance of a stakeholder database. Requires good writing/design as well as illustrations and photographs. Important to have any written material translated for particular groups in a project area, or an indication where interpreters can be accessed in a number of languages.
Open Houses	When you need to present ideas or plans to a broad cross-section of stakeholders in an area and obtain responses in an informal way.	Need well-illustrated displays that convey accurate information. Need staff available to take questions, discuss ideas and gauge reactions. Can include a questionnaire to collect and analyze responses.
Small Group Workshops	When you need to generate discussion and insights on aspects of your projects from a known group of stakeholders.	Need to set a clear agenda and have a facilitator who can keep the group on track. May need to reimburse group members for travel and offer meals/refreshments if the workshop lasts longer than 2 hours.
Questionnaires & Surveys	When you need to obtain specific structured responses on specific issues to obtain quantitative measurable results.	Less effective in obtaining responses to complex issues. Mail, telephone, web or face-to-face responses can be sought. Mail traditionally provides poor response rates. Important to have any written material translated for particular groups in a project area, or an indication where interpreters can be accessed in a number of languages.
Written Submissions	When you need to obtain detailed responses to a specific issue from a broad range of stakeholders.	Can exclude stakeholders who do not have time, skills or resources to write submissions. Advertising for submissions needs to be broad based and not just in newspaper Public Notices.