Ministry of Health Patient, Public and Stakeholder Engagement Framework

This summary tool supports the planning, design, management, reporting, communications and evaluation of engagement activities in which people and organizations that are impacted by a decision participate in the process of making that decision. This summary uses best practices in engagement and aligns with the Ministry of Health's policy recommendations.

PRINCIPLES

Overarching principles that guide engagement at the individual, community and health-care system levels

- 1) A deep commitment to respect, dignity, and listening to understand;
- 2) A recognition that the Triple Aim cannot be achieved without engaged patients at all levels;
- 3) Person-centredness takes place across all levels and works to ensure that the motto "nothing about me, without me," is respected and realized;
- 4) Engagements need to work for patients;
- 5) Trust-based relationships are critical to achieving individual, community and system goals; and
- 6) Engagements use co-design techniques that actively involve all stakeholders (employees, patients, families, caregivers, managers, providers, leaders, citizens, and health-sector organizations) in the design process to help ensure the results meet their needs and are usable.

LEVELS OF Select the level of engagement from the Spectrum of Engagement¹ ENGAGEMENT

INFORM



Provide clear, meaningful and objective information to stakeholders. Examples include news releases, fact sheets, posters, pamphlets and e-mails.

CONSULT



Listen and acknowledge stakeholder ideas and concerns. Provide feedback on how their input affected the decision. Examples include surveys, focus groups, interviews and Delphi technique.

INVOLVE

Work with stakeholders to address their ideas and concerns. Provide feedback on how their input affected the decision. Examples include workshops, world cafes and forums.



Work together with stakeholders on developing solutions. Include their recommendations into the decision as much as possible. Examples include advisory committee, card storming, round tables and consensus forums.

EMPOWER

Decision-making is placed in the hands of stakeholders within established boundaries or `givens`. Examples include voting, citizen panels, think tanks and delegation.

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PROCESS

| | Ensure commitment from key sponsor(s)/decision maker(s) | | | | | | | | |
|--------|---|----------------------------|------|---|---|---|--|---|--|
| Step 1 | Establish the engagement planning team Up to five people with different perspectives, one with engagement planning experience and two patients or | | | | givers. | Develop a project overview A decision statement on what decision is being made, by whom, when and for what | | | |
| | Seek to understand external perceptions of the decision | | | | | | | | |
| Step 2 | Engagement needs analysis Up to 10 pre-interviews to understand stakeholder interests and concerns with the decision. | | | Impact analysis and stakeholder mapping Identify the likely direct, indirect and unintended impacts of the decision. Next identify stakeholder communities and/or individuals. | | | | | |
| Step 3 | Select level of engagement from the Spectrum of Engagement ¹ | | | | | | | | |
| | INFORM Provide information | CONSULT Obtain feedback | Addr | INVOLV Address id and conce | | COLLABORATE Work together to develop solutions | | EMPOWER Stakeholders make decision | |
| Step 4 | Identify decision-making processes and commitment to stakeholders | | | | | | | | |
| | Decision making process List each step with the stakeholders' role. Outcomes and outputs of each step become engagement objec tives. Different levels of engagement are possible. | | | | Engagement design Choose engagement technique(s) that fit the level on the Spectrum. | | le l | Communications plan Develop clear consistent materials and distribution plan. | |
| Step 5 | Develop an implementation plan | | | | | | | | |
| | List key tasks, timeline, deadline Qua and planning lead. and | | | velop measures lantify success by how well outputs d outcomes support the decision of by the number of attendees). | | | Plan reporting back Report to participants on how their input affected the decision. | | |

References and Resources

- 1) International Association for Public Participation. IAP2's Public Participation Spectrum. Available at: https://cdn.ymaws.com/www.iap2.org/resource/resmgr/foundations_course/IAP2_P2_Spectrum_FINAL.pdf
- 2) Ministry of Health. Patients as Partners Initiative. Patient, Family, Caregiver and Public Engagement Framework and other engagement resources. Available at: <u>https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/patients</u>

