What was the issue?
Northern Health took an early engagement approach to developing their Person- and Family-Centred Care Strategy based on clear evidence that person- and family-centred care is most successful when done in partnership with stakeholders and by engaging people (patients), their families and caregivers earlier rather than later in the process. Recruiting patients and other stakeholders to the Development Group leading this regional effort led to the creation of the Person- and Family-Centred Care Strategy Steering Group and the Person- and Family-Centred Care Implementation Group.
Person- and family-centred care was described by Northern Health as an approach to the planning, delivery, and evaluation of health services grounded in mutually beneficial partnerships among health-care providers, patients/clients and families. To achieve a person- and family-centred care strategy that would guide the work in health care across Northern Health, it was crucial that the Development Group also report regularly through Northern Health Executive and Board Committee processes to embed the person- and family-centred care work and direction throughout Northern Health.

**Fast Facts**

- **Spectrum:** Collaborate
- **Number of Stakeholders:** 40
- **Type of Stakeholders:** Patient partners, health-care providers, health-care staff
- **Families Involved:** Yes
- **Ministry Priority:** All Ministry priorities encompassed
- **Health Outcomes:** Person- and Family-Centred Care Strategy for Northern Health created with patient partner and family input, and ongoing involvement of patient partners in the implementation of the strategy.

**What was the engagement?**

The Development Group began their work in July 2015 and finished in January 2016. Northern Health used the Patient Voices Network to recruit patient partners from each of the Northern Health service delivery areas (Northwest, Northern Interior and Northeast). The team leading the project oriented the patient partners before the engagement, answered questions throughout the engagement, and worked closely with patient partners to ensure that they had a positive experience (e.g., assisting patient partners that required IT support).

It was clearly communicated to patient partners that their role was to ensure that the views and interests of patients and family members are included in the strategy.

The engagement efforts also included a deliberate cross-section of Northern Health staff, including: point-of-care staff, support services (laundry, housekeeping and dietary) and regional finance. The promise to all stakeholders involved was that project leads would look to stakeholders for advice in developing, implementing and evaluating this regional policy to ensure that health care provided is responsive to the patient partner’s and other stakeholders’ experience.

The meetings throughout the engagement process were largely done as teleconferences or webinars unless stakeholders were able to join the Northern Health team at one of the sites.
There was one large in-person meeting at the beginning of the Development Group’s work. This initial meeting was called a Person-and Family-Centred Care Dialogue and involved equal numbers of Northern Health and PVN participants.

**What was the outcome?**

The project had a set timeframe with clearly outlined key deliverables, and volunteers were committed and involved throughout the entire process. Once input was received from patient partners, and reviewed by the executive, the project team reported back to the stakeholders and closed the loop. The information gathered from the engagements was compiled, themed and used to directly inform the three key deliverables that were presented to the executive and the board.

The engagement led to a system-wide improvement as it became the foundation of the Northern Health deliverables. These were a Person- and Family-Centred Care Strategy, Framework, and the first action steps that continue to be implemented. The information gathered throughout the engagement process will also contribute to a longer term system change as the work continues, and will allow Northern Health to expand on their other areas of success.

Directly resulting from the Person- and Family-Centred Care Development Group’s work, Northern Health has formed the Person- and Family-Centred Care Structure Strategy Group and the Person- and Family-Centred Care Implementation Group – both ongoing committees. Not only will this work impact the Northern Health system, but other groups across the province have asked to learn from the work done.

The engagement process also resulted in positive long-term outcomes for many involved. Sharing, engagement, awareness and partnerships continue with some initial members of the development group stepping forward to be on the new Strategy Steering, or Implementation Groups. Others have learned from the process, shared their experience in their communities and created additional interest for the continuing engagement work on the Person- and Family-Centred Care Strategy.
Northern Health is expecting this engagement work to produce great results with regards to the Triple Aim strategy, but it is still too soon to demonstrate clear outcomes. The team is expecting to measure these results in the future.

Based on the feedback received from patient partners and staff, the engagement was a great learning opportunity for everyone involved. The engagement demonstrated opportunities for new direction in patient- and family-centred care work, and a shift in perspectives of everyone involved. Engagement with patient partners and other key stakeholders was described by Sheila Gordon-Payne, the project lead, as “the right approach to build on for the present and upcoming years.” Clear and prominent leadership, an important element of sustainable patient- and family-centred care efforts, was also demonstrated during the engagement process.

In the words of Angela De Smit, executive sponsor: "Northern Health has intentionally focused our work on people and their families by seeking to understand what really matters to them. We accomplish this by inviting patients to be part of committees and through community consultations. This work has brought us closer to keeping the patients’ needs at the core of our service delivery."

**How can you get involved with health-care engagements?**
Contact: Sheila Gordon-Payne at sheila.gordon-payne@northernhealth.ca