



Algoma OHT/Sault Area Hospital  
Community Partnership Toolkit

# **PARTNER HANDBOOK**

---

## Table of Contents

Community Partnership and Engagement.....	4
Person-Centred Care.....	4
What is Community Partnership and Engagement? .....	4
The Importance of Language: “Patient” vs. “Community” .....	5
Guiding Principles for Engagement .....	5
The Role of a Community Partner .....	6
Roles and Responsibilities.....	6
Role Expectations .....	7
Our Commitment .....	7
Characteristics of a Successful Community Partner .....	7
Preparing for Meetings.....	8
Meeting Elements: .....	8
Additional Resources .....	9



## Dear Community Partner,

Welcome to the Algoma Ontario Health Team (AOHT)! We're a team of local health professionals, organizations, and community members working together to improve the health system in Algoma. The AOHT is one of 50 Ontario Health Teams working to strengthen health and social services across the province.

In Fall 2021, we submitted our **Patient, Family and Caregiver Partnership and Engagement Strategy** to the Ministry of Health outlining a commitment to embedding community voices in all levels of AOHT work. This means including patients, clients, family members, caregivers, people with lived and living experience, and other citizens in leadership and working groups. This work ensures that our health system is actively planned in partnership with those who experience it.

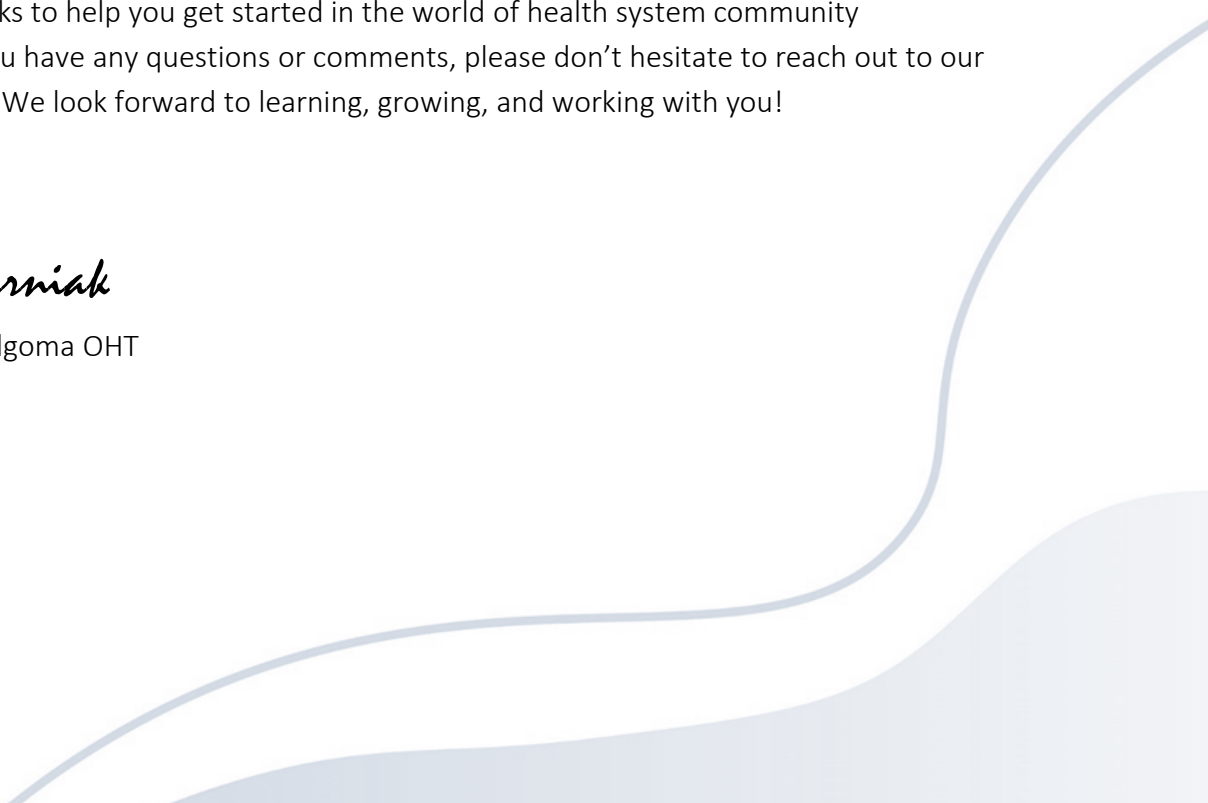
In this spirit, we're thrilled to have you join our team and share your expertise to improve care in Algoma. As part of this role, you will actively partner with project managers, clinicians, and other professionals across the AOHT to build projects that are better informed to meet the needs of our community. We hope that you will share your experience and knowledge, be a voice for those who aren't at the table, and actively champion community-centred care in all facets of our work.

As you jump in, we hope you'll take a few minutes to flip through this handbook that we've put together to provide some background information on our team and work. We've also included some tips and tricks to help you get started in the world of health system community engagement. If you have any questions or comments, please don't hesitate to reach out to our team at any time. We look forward to learning, growing, and working with you!

Sincerely,

*Stephanie Parniak*

Patient Partner, Algoma OHT



# Welcome to the Algoma OHT! We're thrilled to have you onboard. Let's get started.

## Community Partnership and Engagement

### PERSON-CENTRED CARE

Person-centred care is an approach to providing care that is grounded in connection between health system professionals and the community members they serve. In taking this approach, we recognize the importance of partnering with community members to improve care access and experience. This approach is the foundation of our community partnership and engagement program.

### WHAT IS COMMUNITY PARTNERSHIP AND ENGAGEMENT?

Community partnership and engagement can refer to any activity where community members are consulted or involved in a project, policy, decision, etc. In health and social services, engagement with patients, clients, families, caregivers, and people with lived experience is the key to delivering services that are tailored to the needs of the community. Community partnership and engagement can include low commitment activities like surveys and group discussions, or high commitment activities like long-term working group or leadership participation. At the



Algoma OHT, we are working to provide a range of opportunities for partnership and engagement across leadership and operations.

### **“Nothing about me, without me.”**

You will often hear this phrase used amongst community partners. This philosophy is about working **with** individuals rather than **doing things to** or **for** individuals. In essence, if community members are affected by decisions being made, they should be at the table.

### **THE IMPORTANCE OF LANGUAGE: “PATIENT” VS. “COMMUNITY”**

You may notice that when speaking broadly about our partnership and engagement activities, we use the term “community” partnership and engagement instead of the more traditional “patient” partnership and engagement. Across OHTs, you will hear many different names for engagement work – including patient and family engagement; patient, family, and caregiver (PFC) engagement; patient/client, family, and caregiver engagement.

Our use of “community” engagement is meant to be holistic and inclusive. This language acknowledges that not everyone who is involved in health system work identifies strictly as a patient; we also work with clients (used often in social services/mental health and addictions fields), family members, caregivers, and people with lived or living experience. However you identify, you are welcome on our team!

### **GUIDING PRINCIPLES FOR ENGAGEMENT**

The following principles guide how we engage with the community.



#### **Collaborative**

The AOHT will ensure that all engaged voices will have space to share ideas and lived experiences without fear of judgment. Health and social system professionals will have the opportunity to learn alongside patients/clients, families, and caregivers and engage in/co-design project work in an environment that is welcoming, respectful, and open to growth.



### **Culturally Safe**

The AOHT will provide culturally safe engagement opportunities at every level. We expect that all citizens in the region will be treated with respect.



### **Accessible**

The AOHT will remove barriers to participation and create engagement opportunities that are transparent and easy to understand for participants of all backgrounds.



### **Accountable**

The AOHT will create and embed evaluative structures into engagement work to ensure that community voices are being acted upon and outcomes are consistent and continuously on track to meet our strategic engagement goal.

## **The Role of a Community Partner**

Community partners can be patients, clients, families, caregivers, people with lived experience, and other citizens who interact with health and social services. They are part of a formal council, committee, working group, survey group, or other table where they contribute experience and insight to ensure the voice of the community is brought into the decision-making process.

### **ROLES AND RESPONSIBILITIES**

- Participate as an active member of the group you've joined and attend meetings regularly
- Tell your story and share your point of view
- Advocate for patient, family, and caregiver needs from a broad perspective
- Participate in the development of new processes, programs, and services
- Objectively listen to and appreciate the views of others
- Contribute ideas and suggestions that will enhance community involvement in health system planning and decision-making
- Promote improved collaboration and relationships between community members and staff

## ROLE EXPECTATIONS

- Attend meetings as required
- Read meeting materials in advance of the meeting and come to the meeting prepared to contribute and discuss agenda items
- Respect the collaborative process and understand that final decision-making related to care and process improvements is the responsibility of AOHT organizations
- Maintain confidentiality of patient and organizational sensitive material



## OUR COMMITMENT

- Explain internal processes and terminology as needed for clarification and understanding
- Help orient you to virtual meeting software as needed
- Provide a safe space for you to contribute and be respected for your insight and suggestions
- Work with you to address any question or concerns related to involvement
- Provide initial orientation and training, as well as ongoing training (where required), to ensure you're well-equipped and comfortable to actively participate

## CHARACTERISTICS OF A SUCCESSFUL COMMUNITY PARTNER

- Respectful of others and their perspectives
- Comfortable speaking in a group and interacting with others
- Good listener
- Ability to use personal experience constructively
- Ability to see beyond own experience
- Ability to see the big picture
- Demonstrate a non-judgmental and positive attitude
- Work collaboratively with other community partners and staff
- Desire to expand knowledge and skills
- Desire to participate in creating meaningful change
- Ability to maintain confidentiality of patient and organizational information



## Preparing for Meetings

Meeting frequency and structure will depend on the working group or committee you've joined. We will set you up with a champion from your group to go over basic information about the group, what's been worked on to date, and key priorities moving forward. Prior to each meeting, you may receive documents to review. These can include a meeting agenda, minutes from previous meetings, and/or documents that will be discussed in upcoming meetings. It is expected that community partners will review these materials in advance of meetings and come prepared to discuss and contribute in a meaningful way.

### MEETING ELEMENTS:

**Agenda:** An agenda will often be prepared and circulated in advance of the meeting (typically a few days ahead). This document or list can include meeting details (currently virtual), meeting time, and topics that will be discussed at the meetings. Community partners are welcome to suggest additional discussion items for the agenda.

**Minutes:** Minutes are notes that summarize the discussion that took place during the prior meeting and highlight action items before next meeting. Minutes are often circulated just after the meeting. Community partners are welcome to note any changes or additions to minutes.

**Briefing Note:** Briefing notes are a tool used by staff members to bring items and ideas forward to leadership, community partners, or other teams. This document will summarize any relevant background information, the issue at hand, and what next steps need to be taken (i.e. endorsement, consultation, feedback, input, other).

### To be an active and effective member of a meeting, you can:

- Come prepared – go through the agenda in advance and review items as required
- For each agenda item, ask yourself: How can I contribute to the discussion? What could be some possible concerns? What is relevant to bring to this discussion?
- Be involved
- Be a good listener



- Support your fellow community partners
- Initiate dialogue instead of debate
  - Debate is argumentative and challenges the viewpoints of others
  - Dialogue is about reserving judgment, listening, asking questions, and building shared understanding

## Additional Resources

1. Institute for Patient and Family Centred Care: <https://www.ipfcc.org/>
2. Health Quality Ontario Patient Partnering Framework:  
<https://www.hqontario.ca/Patient-Partnering/Patient-Partnering-Framework>
3. Ontario Hospital Association Patient and Family Engagement:  
<https://www.oha.com/quality-safety-and-patient-and-family-centred-care/patient-and-family-engagement>
4. Ontario Caregiver Organization: <https://ontariocaregiver.ca/authentic-engagement-and-co-design-are-the-key-ingredients-to-meaningful-change/>

## Time to dive in!

If you have addition questions or comments,  
please reach out to Leah Hodgson at  
**[leah.hodgson@algomaoht.ca](mailto:leah.hodgson@algomaoht.ca)** or **705-989-4813**.

**Website:** [www.algomaoht.ca](http://www.algomaoht.ca)

**Facebook:** [www.facebook.com/algomaoht](http://www.facebook.com/algomaoht)

**Twitter:** [www.twitter.com/algomaoht](http://www.twitter.com/algomaoht)

**LinkedIn:** [www.linkedin.ca/company/algoma-ohr](http://www.linkedin.ca/company/algoma-ohr)



ÉQUIPE SANTÉ  
**ALGOMA ONTARIO**  
HEALTH TEAM