PHASE 1: READINESS & LEADERSHIP SUPPORT

- Why are we engaging?
- What are your expectations and hopes?
- Have we consulted with the right supports?
- What will you do with the input?
- Are your goals clear?

PHASE 2: PLANNING THE ENGAGEMENT & PREPARING THE TEAM

- within the team
- Do you have infrastructure in place

PHASE 3: RECRUITMENT, ON-BOARDING & ORIENTATION

PHASE 4: ENGAGEMENT ACTIVITIES

- The engagement has clear beginning, ending, and goals
- How will you minimize risk and potential harm?
- Are the team members involved committed to this process in a respectful and caring manner?

PHASE 5: EVALUATION OF **ENGAGEMENT**

- What are the evaluative pieces of this engagement?
- How will outcomes of the evaluation be measured?
- How will outcomes be shared with the individuals who were engaged?

PHASE 6: REPORT BACK & RESPECTFUL ENDINGS

- Those conducting the engagement have a plan to communicate back how input was used, actioned and decisions impacted as a result
- What if one party wishes to end the engagement?

- What is the awareness across the team to "why we are taking this on"?
- Are leaders supportive of this engagement
- Do you truly believe in the value of the lived experience
- Is empathy authentic

participation

your community

your story holds

changing culture

established

and caring

to take on this journey

the wisdom lives vs. tokenism

• Is empathy authentic

team to be respectful

• Does leadership ensure support, time, resources

• Are there unique needs you have to enable

How can this opportunity enhance your life and

• Do you feel safe in this environment and trust the

• Are you able to share openly regardless of what

• Has the team developed trust among themselves

Clear communication channels and responsibilities

The difference between engaging lived experience

• Are supports in place for team debrief, processing

because it is the right thing to do and that is where

• Do we need consultation with specialists on

• Who are your resources and supports

• What are your goals for engaging

- Who is already engaging individuals with lived experience in our area/community
- Should we consult with: AHS Provincial Patient and Family Advisory Group, AHS SCN Patient Engagement Reference Group, community agencies/partners, other AMH advisory councils,
- You have identified how you will seek out, engage and on-board those with lived experiences
- · Required infrastructure is in place (reimbursement, transportation, parking, childcare, etc.)
- Documentation has been kept to a minimum but is now prepared (role expectations, consents, releases, confidentiality etc.)

• You have been approached in a respectful manner

• You are clear on your role and reason for engaging

clearly outlining what the group is looking for

• You have had opportunity to review and seek

support before signing any documentation

• I know expenses and barriers to engage will be

You feel prepared to engage

removed

I know who to call with questions

- Develop and provide appropriate level of orientation to the initiative
- Development of ORI engagement methods has occurred based on uniqueness of the site and expectations and goals
- The engagement has begun, tools and resources are in place to guide the team and support the lived experience participants to build relationships through the process
- Leadership is aware and visibly supporting the engagement

• You are invited into the engagement in a

• You feel respected, cared for, involved

• You are clear on your role

- Will this engagement be evaluated not just for its outcomes but also areas to grow in future
- Does leadership commit to ongoing culture change as determined by the team and the lived experience engaged
- Honest and safety around how the team perceived the engagement

• You know your feedback on the engagement

process is welcomed and will be listened to

• You know how your input was used or why it was

- The team can identify successes and goals or areas for improvement before the next engagement
- Ensure responsibility for respectful ending to the engagement relationship is clear
- Impacts and outcomes of engagement are shared broadly and supported in future initiatives
- How will you ensure you are well and ready to end
- the engagement • Do you feel safe to end the engagement at any time
- What are your goals after this opportunity
- (future engagement, community referral etc.) • You are aware that your role was critical and created change
- You know the outcomes and next steps
- · You felt respected and cared for
- You know how your input and experience impacted
- You are clear when the engagement has concluded

- What support do we need, or have we offered • You feel comfortable with the spaces and readiness supports before we engage (community, friend) of the group you are meeting with
 - You feel heard and your needs before engaging have been met
 - What type of engagement are you comfortable
 - Who would you like to have come with you
 - Do you feel comfortable with the team you are consulting with, if not what do you need?
 - Are you prepared for what this engagement may include (emotion, vulnerability etc.)
- - Leadership supports the direction of engagement
 - · Orientation for all is complete and a sense of understanding the importance of engagement now
- Awareness of the importance of ongoing support for all involved has been addressed
- · Capacity is built within the team to support future engagement activities
- If the reasons why either party is engaging change, a pause and re-evaluation will occur
- The team has a debrief process in place
- All parties identify what worked and what needs to change or grow
- Engagement was purposeful and positive
- A culture of mutual trust and respect has been developed
- Teaching what ending needs to look like may need to occur for all parties
- Next steps will be set if engagement activities will continue or take new directions

- What type of engagement is best (video, teleconference, audio,1:1, written etc.) • Has a conversation occurred about space (will a
- child be present, will there be active use, is lived experience person still grieving a loss?) • Who will be designated as the 'liaison' or contact
- and support person throughout the process • If the reasons why either party is engaging change, a pause and re-evaluation will occur
- Awareness and respect of hopes and expectations for all parties is critical to success
- The Voice of Patients and Families: A Getting Started Guide www.albertahealthservices.ca/assets/ info/pf/pe/if-pf-pe-voice-patient-families-guide.pdf
- Engagement Readiness Checklist http://insite. albertahealthservices.ca/assets/pe/tms-pe-readiness-checklist-for-partnering-with-patient-and-family-advisors.pdf
- Empathy Mapping https://www.albertahealthservices.ca/assets/info/hp/cdm/if-hp-cdm-empathy-mapping-summary.pdf
- Seek support in your zone through AHS Engagement & Patient Experience zone-based consultants as well as local Patient/Family Advisors

- · Have your team members developed relationship, rapport and trust (this is a time component) Training is complete and the team has addressed
- barriers, concerns, biases, fears and feels supported and ready to engage
- Are you familiar with protocols for each unique type of engagement
- Have you consulted where the individual with lived experience is most comfortable? YOU CAN COME TO THEM...meet in a space of their choosing, keeping safety for all in mind (will lived experience person be under the influence, etc.)
- Are there adaptations needs to your space to be welcoming and safe for everyone
- Are there resources available for all parties if required (team may need further support in learning to work with those in active addiction, lived experience individual may wish to move from addiction to treatment)
- AHS online learning modules: Patient Engagement 101
- (Available Spring 2018) Meaningful Engagement Module1: Roles & Responsibilities of Patient Advisors; Module 2: Roles and Responsibilities of Staff; Module 3: Creating Meaningful Engagement
- AHS EPE Patient Engagement Guidebook- https:// www.albertahealthservices.ca/assets/info/pf/pe/ if-pf-pe-guidebook-for-engaging-patient-family-advisors.pdf

- Recruitment is about building relationship, this is a
- Orientation is ideally held face to face to build relationship and trust; conducted by leaders/ facilitators leading the initiative

time commitment by all

• This is where the risk of tokenism vs authentic engagement can become blurred

• AHS Patient and Family Engagement toolkit

• How to Involve People Who Use Drugs

OSjcoMnObC2L.pdf

http://insite.albertahealthservices.ca/assets/pe/

AHS Patient and Family Advisor Resources- https://

www.albertahealthservices.ca/info/Page15876.

http://towardtheheart.com/assets/uploads/

15161442266vojisI05U2QPZPuPU4p56pnp6F

tms-pe-patient-engagement-resource-kit.pdf

those with lived experience; this has been planned for and mitigated Processes are in place to support applying the

• Ways to include the voice of patients and families

toolkits can be leveraged and customized as need-

ed for PHC Contact: patient.engagement@ahs.ca

ment & Patient Experience zone-based consultants

• http://insite.albertahealthservices.ca/17294.asp

Existing AHS Engagement & Patient Experience

• Seek support in your zone through AHS Engage-

as well as local Patient/Family Advisors

• During engagement is the most vulnerable time for

- learning's from the engagement processes
- Do all parties understand the risks, expectations and goals of the other and how to open conversation up if these change
- A disengagement plan is in place that is positive
- There is no failure, but rather this is a journey
- How to reconnect if an abrupt ending occurs
- Referrals for on-going support made if requested
- At no time should an engaged lived experience individual feel "dropped" or suddenly alone. Clear support is critical
- (coming soon Spring 2018) Evaluation Tool for Patient Engagement in SCNs
- Contact: patient.engagement@ahs.ca
- https://www.cfhi-fcass.ca/sf-docs/default-source/ patient-engagement/awesome_workbook-fraser-
- http://insite.albertahealthservices.ca/assets/pe/ tms-pe-the-value-of-engaging-patients-and-familes.
- AHS EPE Patient Engagement Guidebook https://www.albertahealthservices.ca/assets/ info/ pf/pe/if-pf-pe-guidebook-for-engaging-patient-familv-advisors.pdf

Primary Health Care Opioid Response Initiative