Practitioners First

Early Lessons in Patient Engagement

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CCI

Collaboration for Change Initiative

Presenter Disclosure

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Relationships that may introduce potential bias and/or conflict of interest:

- No relationships to declare.

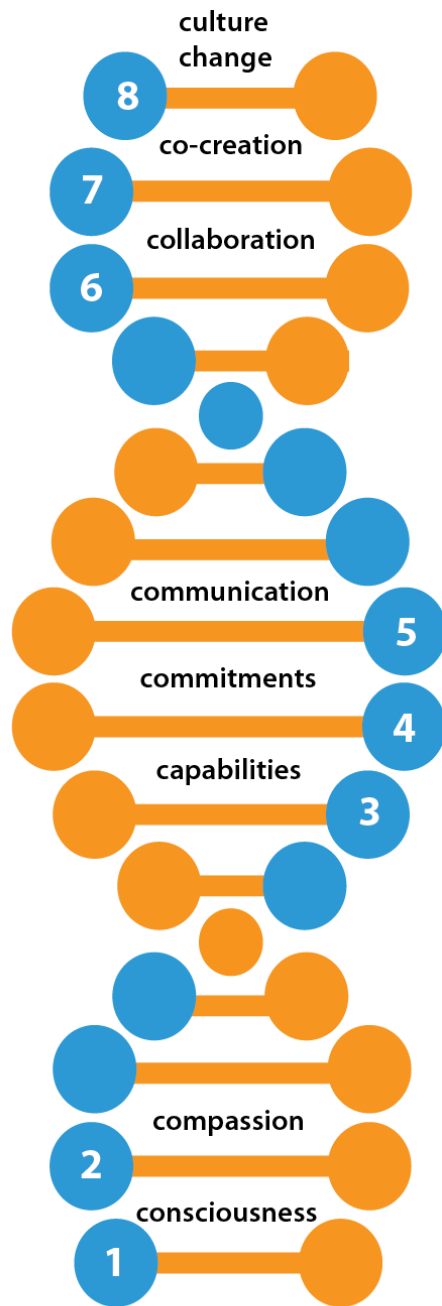# Introductions

Don, Jake, Pieter

System Mapping

Current State

The Double-Helix

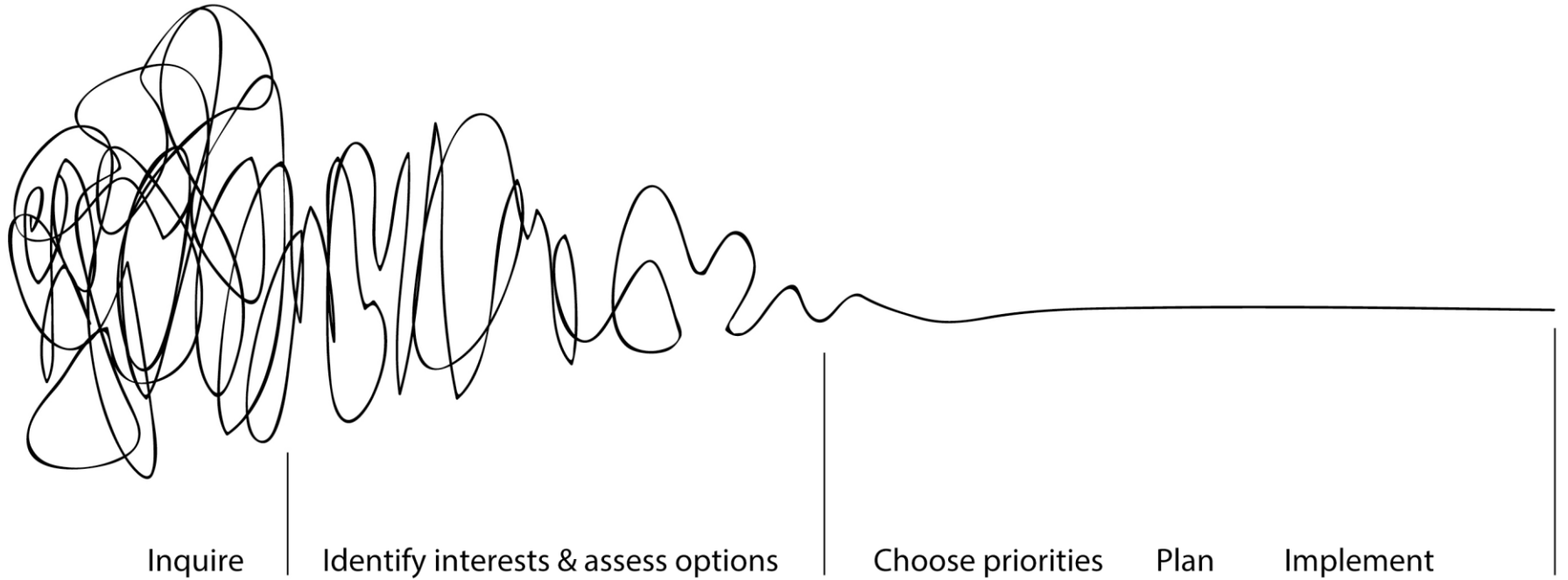A metaphor for our journey

Double helix of engagement

A progressive interweaving and deepening of relationships over time.

A spiralling upwards that leads to...

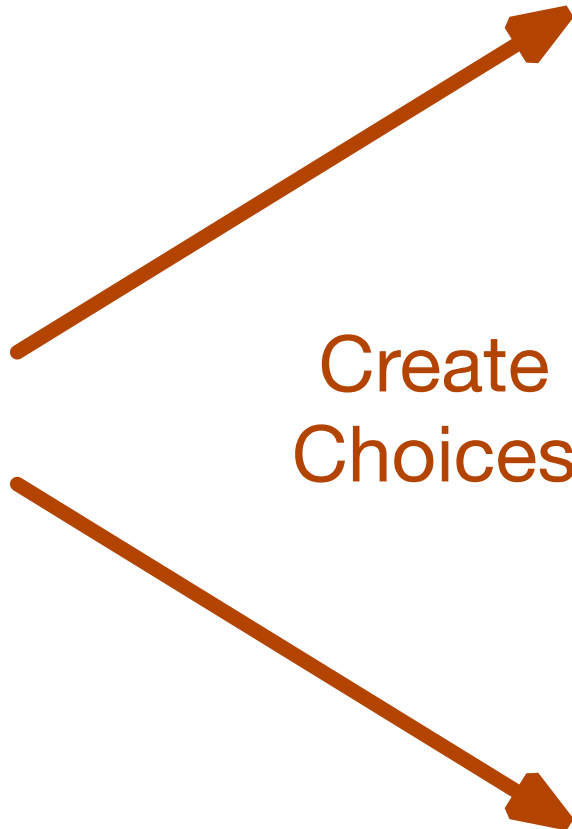*increased trust, collaborative capacity, and creativity.*

Uncertainy / patterns / insights

Clarity / focus
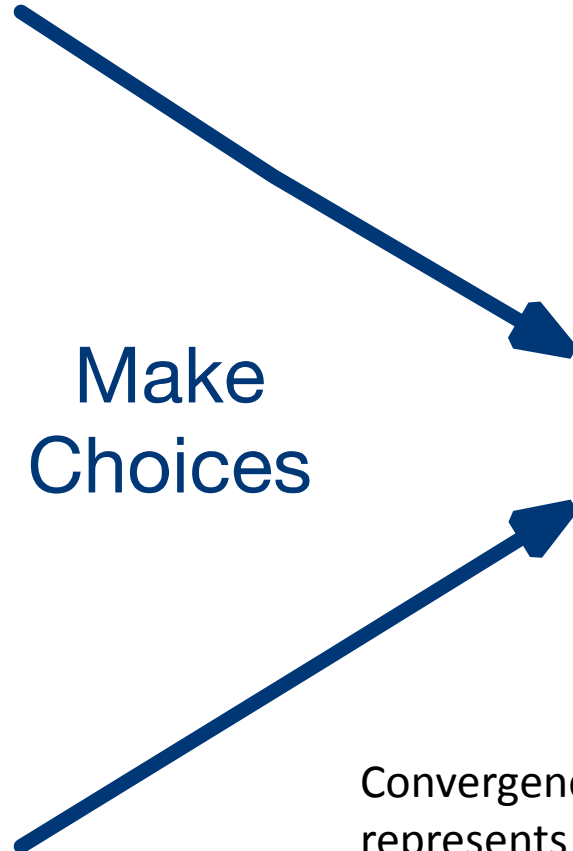
Inquire

Identify interests & assess options

Choose priorities

Plan

Implement

THINKING STRATEGIES

DIVERGENT

- Co-creative
- Design Thinking
- Integrative
- Lateral
- Reflective
- Visual
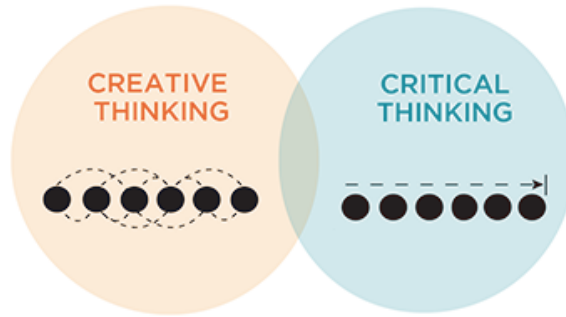
CONVERGENT

- Analytical
- Mathematical
- Legal
- Operational
- Scientific
- Strategic
- Systems

CREATIVE THINKING

CRITICAL THINKING

ATTRIBUTES

Open
Generative
Expansive
Iterative
Visual
Human-centred
Collaborative

Thoroughness
Clarity
Accuracy
Precision
Evidence
Fairness

1. Consciousness

Building personal & team readiness for engagement

Consciousness

- Consciousness represents the internal process of increasing awareness and mindfulness.

- It includes the emotional/spiritual readiness to enter into relationships with others and to embark on a process without a predetermined outcome.

- *How do we prepare both practitioners and patients for a journey of discovery?*

- *How do we cultivate the radical curiosity required for true understanding to emerge?*

MINDSETS

Empathy

Embrace ambiguity

Learn from setbacks

Creative confidence

"Show don't tell"

Optimism

Iterate, iterate, iterate

Evidence-Informed Decision-making

Contextual Evidence

Experiential Evidence

Best Available Research Evidence
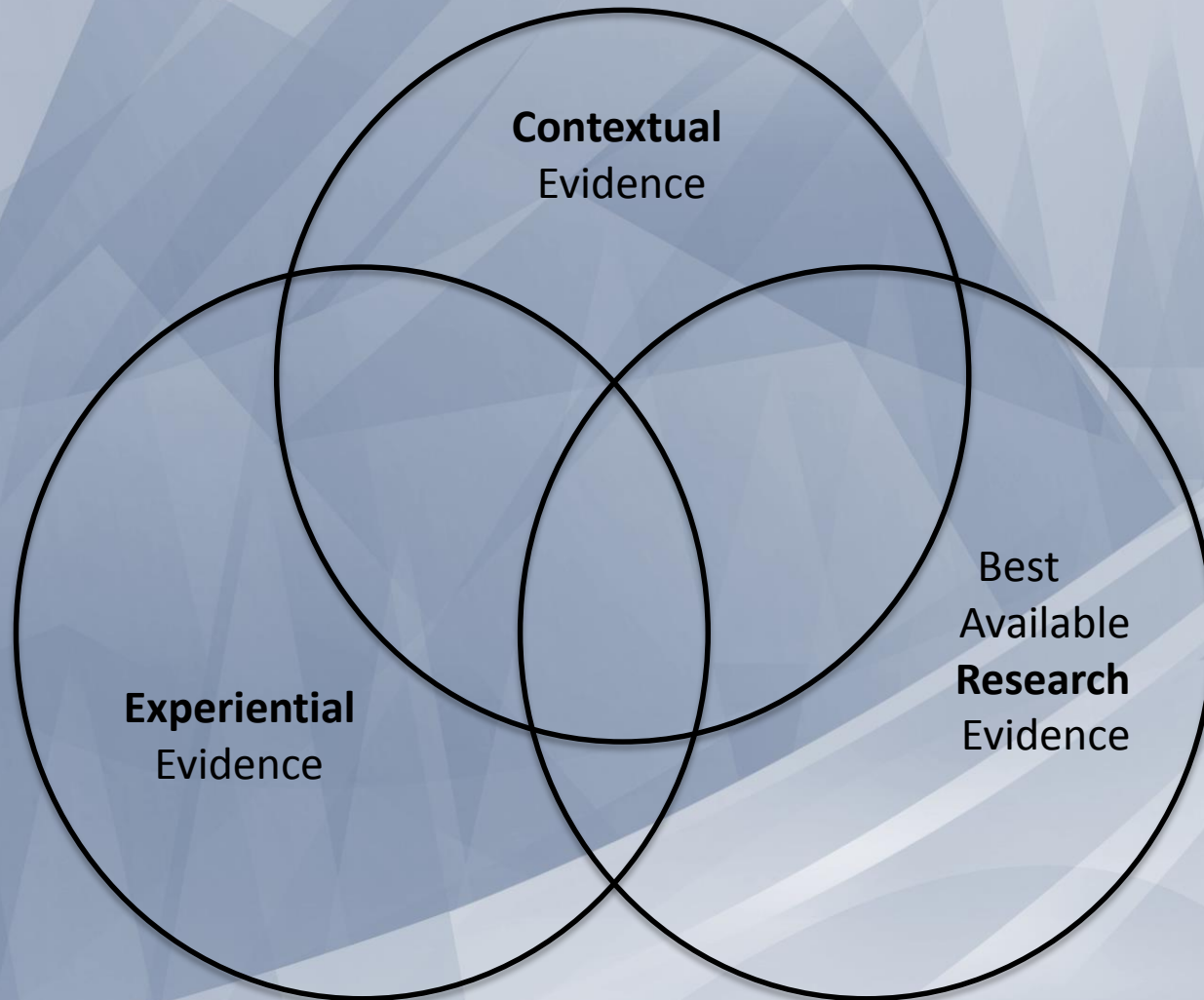
Source: http://www.cdc.gov/features/UnderstandingEvidence/

Purpose – to – Practice

Purpose

A way of deepening our understanding of why and how we will act in the world.

Participants

Person

Principles

Practices
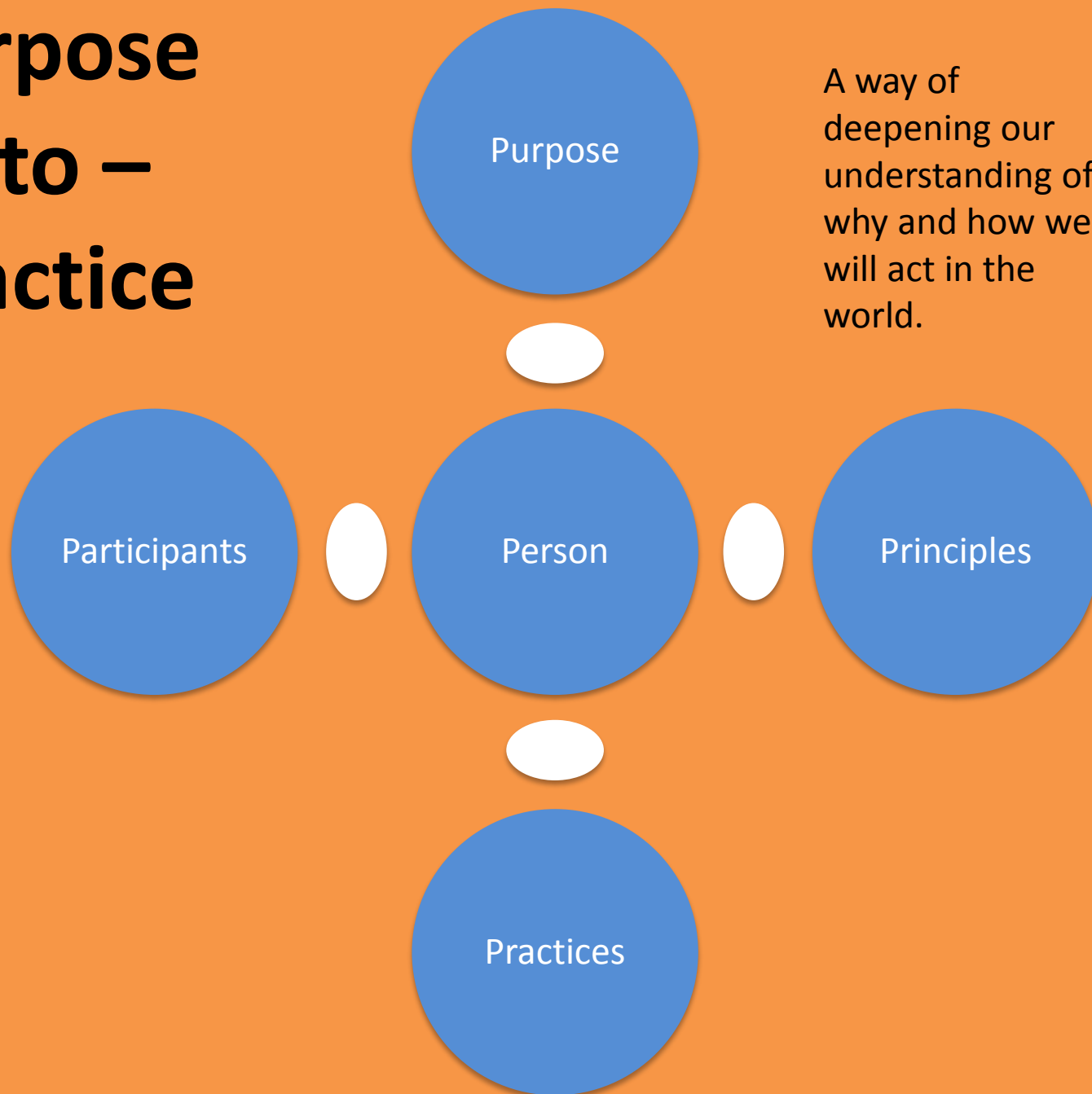
Polarities and Tensions

Dependency and unrealistic expectations	versus	Equity of power and responsibility
Reacting to need	versus	Promoting change
Serving All (Community Health Centre)	versus	Serving the Neediest (Niche-focus)
Medical needs	versus	Social/Emotional needs
Medical Home	versus	Community Centre
Isolation	versus	Belonging
Assumptions	versus	Empathetic understanding
Creating dependence	versus	Maintaining trusting relationships
Grooming for entitlement	versus	Tailoring services to needs
Independence	versus	Interdependence

2. Compassion

Increasing empathy and mutual understanding

Compassion

- Empathy is the **beating heart** of reciprocal relationships.

- Successful engagement requires acknowledging that power and knowledge is unequally distributed in many social settings. Inequalities are exacerbated by differences in social economic status, cultural backgrounds, worldviews, and health belief systems.

- *How do we honour the experiences of all participants?*

- *How do we create conditions where we can safely explore interests, values, as well as hopes and fears?*

SAYS
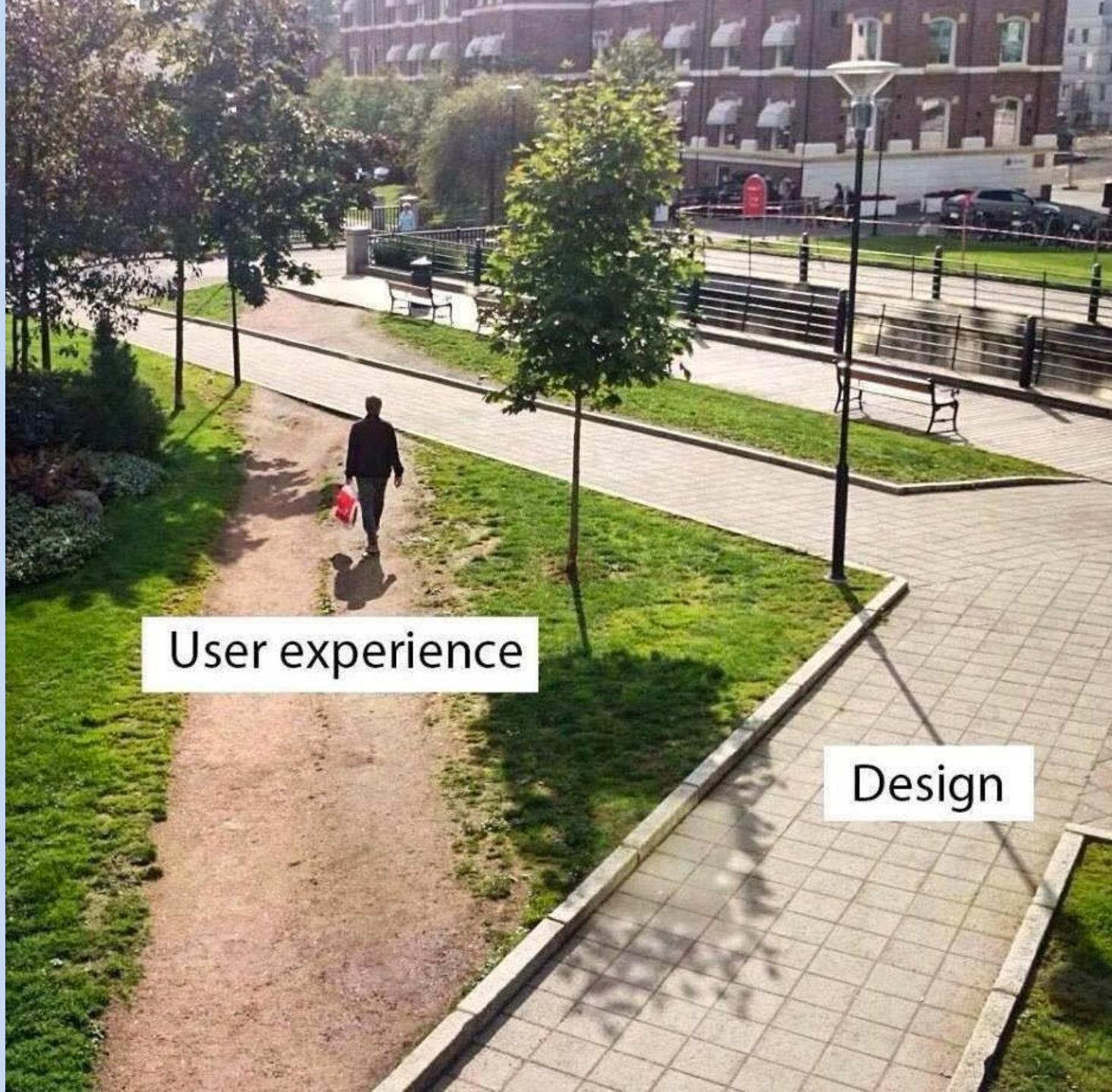
I don't speak english

What should I do next?

I don't understand

What happened to me?

What's the medicine about?

What's the treatment

THINKS

Who can help me

What did doctor say?

Did i understand correctly

I want to know what happened to me?

Should I come back? When?

I hate hospital

Vivian
Chinese Mom
Diabetes
Age 59

DOES

Repeat the question

Call family member who speak english

Speaking in her own language

Confused expression

Try to find someone to help

Body language

FEELS

Fear

Uncertain with what doctor/nurse said

Uncomfortable

Unhappy with language barrier

Frustrated with this situation

3. Capabilities

Creating conditions to support and sustain engagement

Engagement-Capable Environments

Enlisting and preparing patients

Asserting patient experience and patient-centred care as key values and goals

Communicating patient experiences to staff

Ensuring leadership support and strategic focus

Engaging staff to involve patients

Supporting team and removing barriers in engaging patients and improving quality
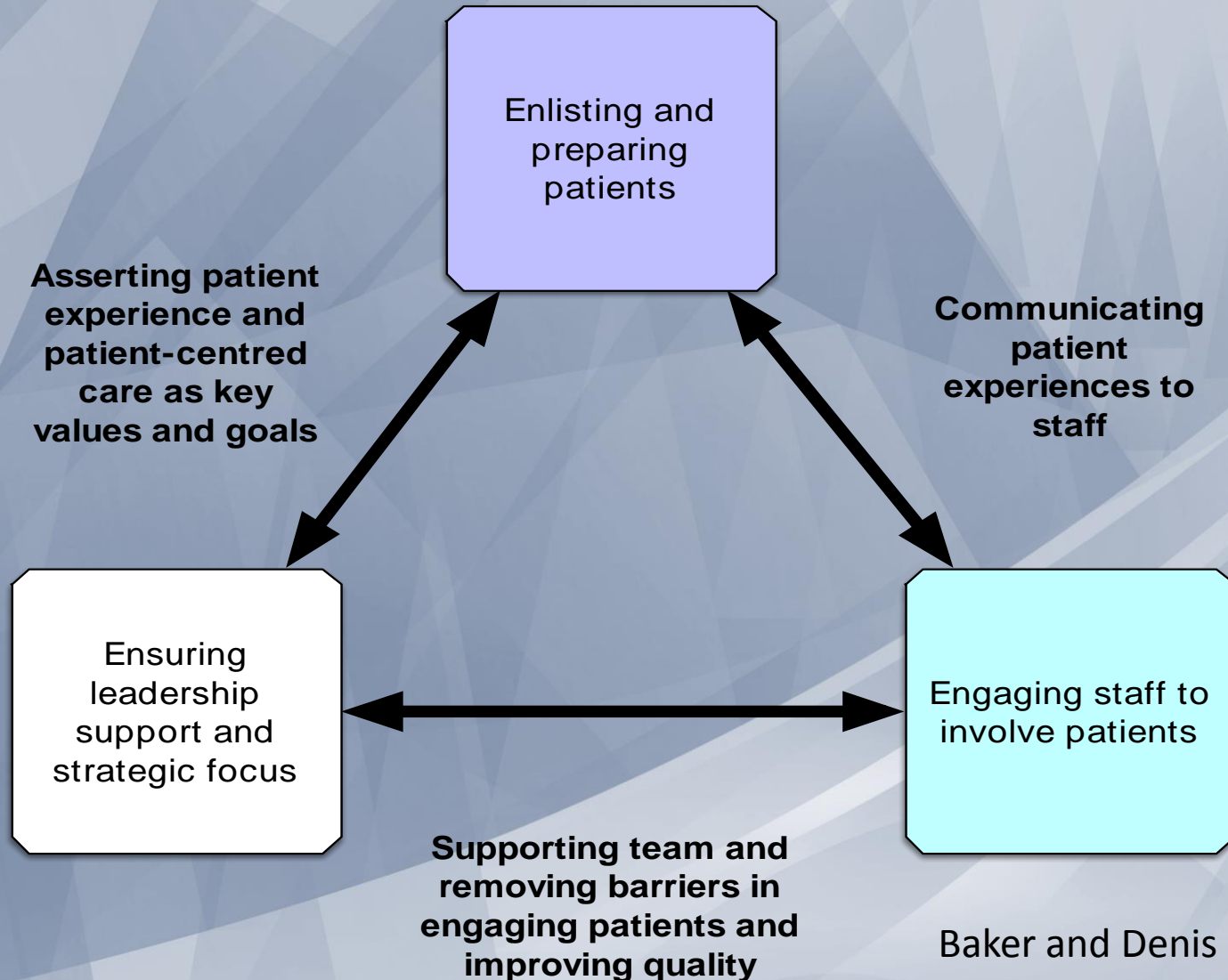
Baker and Denis (2011)

4. Commitments

Public promises and levels of engagement

Preconditions for Effective Collaboration

1. **Dependability:** Team members honour commitments and meet expectations.

2. **Structure and clarity:** High-performing teams have clear goals and have well-defined roles within the group.

3. **Meaning:** The work has personal significance to each member.

4. **Impact:** The group believes their work is purposeful and positively impacts the greater good.

5. **Psychological Safety:** Members feel secure in sharing their ideas, expressing vulnerability, taking risks together, and reflecting on their performance. Members create space for others. Group norms reinforce empathy and conversational turn-taking.

Increasing Trust

Increasing Capacity

Dilemma

#1 Commit to collaboration

#2 Co-define dilemma

#3 Co-design process

#4 Co-create solution

#5 Co-deliver actions

Solution

Appreciative mindsets

Deliberative processes

✓ Check point
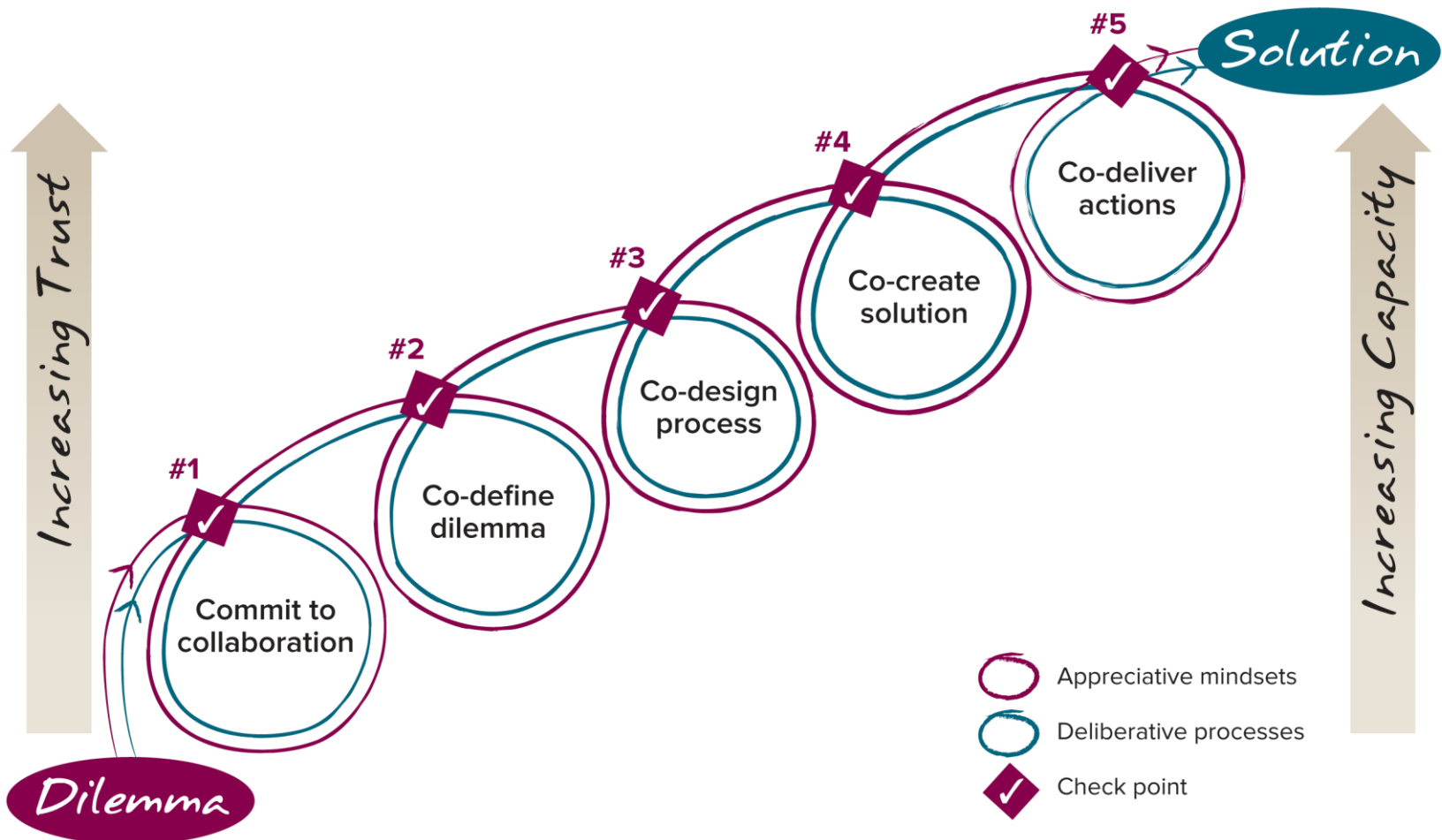
Build readiness • Build relationships • Build capability

APPRECIATIVE MINDSETS + DELIBERATIVE PROCESSES = ENDURING SOLUTIONS

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IAP2 Spectrum of Public Participation

Increasing Level of Public Impact →

	Inform	Consult	Involve	Collaborate	Empower
Public participation goal	To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis, alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution.	To place final decision-making in the hands of the public.
Promise to the public	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provide feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

Continuum of engagement →

Levels of engagement	Consultation	Involvement	Partnership and shared leadership
Direct Care	Patients receive information about a diagnosis	Patients are asked about their preferences in treatment plan	Treatment decisions are made based on patients' preferences, medical evidence and clinical judgement
Organizational design and Governance	Organization surveys patients about their care experiences	Clinic involves patients as advisors or advisory council members	Patients co-lead clinic safety and quality improvement committees
Policy making	Public agency conducts focus groups with patients to ask opinions about a healthcare issue	Patients' recommendations about research priorities are used by public agency to make funding decisions	Patients have equal representation on agency committee that makes decisions about how to allocate resources

Factors influencing engagement
- *Patient* (beliefs about patient role, health literacy, education)
- *Organization* (policies and practices, culture)
- *Society* (social norms, regulations, policy)

[Carmen et al 2013]

5. Communication

Cultivating dialogue and learning

Debate	Dialogue
Key Use	**Key Use**
- Used for problem solving where parameters are known and conventional solutions are still working. - May create expanded thinking/knowledge about a topic. - May create a 'win/lose' scenario. - Usually used to confirm what "I" already know.	- Used to explore new territory. - Uncover unknown assumptions. - Encourages deeper understanding of diverse perspectives – not about winning or losing - Cultivates the creative and reflective capacity of people. - Can be the basis for breakthroughs. - To move to new perspectives about self and the world.
Attributes	**Attributes**
- Approach tends to support dominant positions/voices – best story wins. - People look for conclusions. - Belief systems prevail. "I know what I know." - Closed systems. - Knowledge focused.	- Enhances the other person through acceptance. - No conclusions – just understanding and learning. "I don't know what I don't know." - Emerging beliefs - open systems. - Relationship focused.

Skills
Listening
Paraphrasing
Questioning
Reflecting
Summarizing

Processes
Name the issue
Clarify concerns
Clarify Interests
Open-ended questions
(needs, wants, fears,
hopes, concerns)
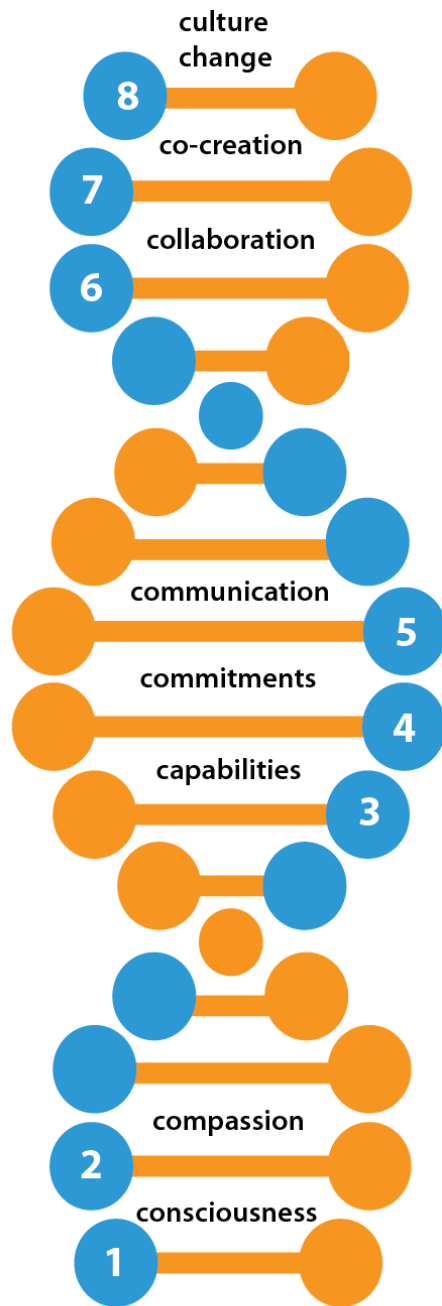Explore Options
Build Agreement

**Finding
Agreement**

Self-Awareness
Be curious
Beware of positions/assumptions
Be aware of tone/body language

Closing Reflection

Anticipated next steps in our journey

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"We can't impose our will on a system. We can listen to what the system tells us, and discover how its properties and our values can work together to bring forth something much better than could ever be produced by our will alone."

Donella H Meadows,
Dancing with Systems