



Winnipeg Regional
Health Authority
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“Public Engagement in Health: Community Perspectives”

(Summary Version)

Community Health Advisory Councils January 2012

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Preface

This report contains the ideas and feedback generated by the Community Health Advisory Councils over the course of 2 meetings held from September to November 2011.

The Councils were asked by the Winnipeg Regional Health Authority's Board to explore the topic of public engagement as it is one of the WRHA's six strategic directions identified in the 2011-16 strategic plan. The Councils shared their insights and suggestions about public and patient engagement that would help inform the guiding principles of public engagement and the public engagement plan. They provided feedback on what public engagement means to them, the value of public engagement, suggestions for public engagement activities, and considerations for ensuring that public engagement is successful and meaningful for both participants and the WRHA.

The Report includes:

- An overview of the methodology, context for the exploration of the topic, Council perspectives on the meaningful and value of public engagement, recommendations for public engagement activities, and considerations for successful engagement.

Appendix A provides a map of the Winnipeg health region's community areas

Appendix B provides lists of Council members, Board liaisons, and staff that support the work of the Councils

It is hoped that this report will be useful to the WRHA Board, Senior Management, the Public Engagement Council, and the many staff within the region who work with patients, clients, family members, and members of the public to get their input and ideas to help us build a better health care system.

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Executive Summary

The Community Health Advisory Councils (CHAC's) have been providing advice and their unique community perspectives on significant health issues to the WRHA Board for nine years. There are six Councils that represent community areas from across the Winnipeg health region. Each Council is comprised of up to 15 individuals from diverse backgrounds, all with the desire to ensure that the health system and health services continue to meet the needs of people in the Winnipeg health region.

In September 2011, the Board of the Winnipeg Regional Health Authority (WRHA) asked the Community Health Advisory Councils (CHAC's) to explore the topic of public engagement as it is one of the WRHA's six strategic directions identified in the 2011-16 strategic plan. The Councils would be sharing their insights and suggestions about public and patient engagement that would help inform the guiding principles of public engagement and the public engagement plan.

How they explored the topic of public engagement

At the first meeting of each Council, Staff shared information about the strategic direction of "fostering public engagement" and the development of the WRHA Public Engagement Council, its role in building a culture of engagement within the WRHA and its main work, and, how the CHAC's exploration of public engagement would assist in the development of guiding principles and a 5 year plan of public/patient engagement activities across the Winnipeg health region. Council members were then asked to respond to the questions, "What does public engagement mean to you?" and "What do you think the benefits of public engagement could be to the WRHA?"

At the second set of meetings, Council members were asked the following questions, "What are your ideas for public engagement activities?" and "What do you think are the most important considerations in making sure public engagement is successful?"

What is public engagement?

Public or citizen engagement is based on the belief that those who are affected by a decision have a right to be involved in the decision-making process. The World Health Organization defines it as "a process by which people are enabled to become actively and genuinely involved in defining the issues of concern to them, in making decisions about factors that affect their lives, in formulating and implementing policies, in planning, developing and delivering services and in taking action to achieve change".

"(Public engagement in health) demonstrates that everybody is valuable and has something to contribute to bettering society and health." (Member, River East and Transcona CHAC)

The Councils' input on public engagement supports the WRHA's plan of broader engagement that includes the general public, consumers of health services, patients, caregivers, advocates, and community/health service providers and organizations.

The major themes that Council members touched on when considering what public engagement means to them included – it is a democratic and empowering process; it is a venue for the public and patients to participate in decision-making in health; it allows the region to gain a better understanding for the context of health issues; and it is a transparent process that builds trust and a sense of shared ownership of the system. It must be meaningful and done with the intention of using the input. Overall, public engagement demonstrates that the WRHA values people/the community and what they can learn from them.

“Public engagement enables people to be part of the reform. It builds trust and confidence. When you participate you learn about the obstacles and challenges to improving the system. Participation equals involvement – shaping what your health care system looks like. This creates ownership.” (Members, St Boniface and St Vital CHAC)

The benefits and value of public engagement for the WRHA

Council members felt that there was tremendous value in public engagement and that the WRHA would benefit in a number of ways from engaging the public and users of the health care system. They also felt that individuals benefit from participating in engagement activities by acquiring more knowledge, the feeling of being empowered, and by the sense of community they feel as a result of participating. Some of the key benefits for the region include -- making more informed decisions which then result in better health outcomes, public buy-in and support of decisions, shared responsibility for tough decisions, increased trust and ownership of the system, a more positive image of the WRHA, improved relationships with users of the system and other key stakeholders, increased individual commitment to their well-being, and opportunities for community building.

“People will become more engaged and will feel a heightened sense of ownership of the system and have a vested interest. It is our system -- I had a say and I made a difference.” (Member, River East and Transcona CHAC)

Engaging the public in health builds a positive image of the WRHA, increased public trust, improved relationships, and builds community. ***“If public engagement is demonstrated, it will help build trust at the individual level and at the community level. If the WRHA responds with tangible tools and strategies, it will be seen as more positive – that it can address issues, manage problems, and build empathy.”*** (Member, Downtown and Point Douglas CHAC)

Council ideas for public engagement activities

Council members provided suggestions for public engagement topics, venues, populations that should be engaged, suggested links into communities, and methods to engage – the “what”, “who”, and “how” of public engagement in health.

Councils suggested that the topics that the WRHA chooses to engage the public and users of the system on should be a balance between issues that are a priority to the WRHA and issues that are of interest to a population.

Another factor in public engagement that the Councils felt was critical to its success is engaging and getting input from diverse populations, especially the most vulnerable who are the biggest users of the health care system. Diverse populations include people from different cultural, ethnic, and faith backgrounds, different socio-economic groups and professions, different sexual orientations, and individuals with physical and mental health challenges. It also includes gender and diversity of age.

The region should ***“target as many people as possible (in their) communities. We should find out what issues are important to each specific community -- mental health, teen health issues, etc. The demographic make-up of a community may influence what issues are important to them.”*** (Member, River East and Transcona CHAC)

Unique approaches to engagement were suggested by a number of Councils, targeting different populations – from Newcomers to family members supporting a frail elderly relative. The approach they suggested was to hold workshops that would be of interest to a specific population and use that as an opportunity to also engage on a topic that was of interest to the region. Engagement must include Newcomers, seniors, teens, and First Nations and Aboriginal populations.

All of the Councils stressed the importance of taking engagement to people, to communities. This could include community or cultural organizations, work places, homeless shelters, seniors’ buildings, places of faith, food banks, shopping malls, and street parties. And, Councils recommended that staff utilize community cultural, faith, and/or education leaders in planning the most appropriate approach to engagement with that population.

Council members strongly recommend that the WRHA utilize a broad range of media and mediums in both promoting engagement activities and as approaches to engaging targeted populations and the public. ***“Use the WRHA website, email, social media, blogs, and Facebook to ask questions and get feedback on important topics.”*** (Member, River Heights and Fort Garry CHAC)

Many of the Councils recommended that engagement include surveys after care and comment cards or touch-screens that patients can use to give feedback after a care experience.

A number of the Councils felt that it made sense to use the existing relationships that WRHA programs, sites, and staff have with organizations and networks in communities across the region to engage.

Councils felt that there was much for senior management at the WRHA to gain from participating in “walk-about” at health care sites as a way to engage patients and family members about their experience with the system. One Council suggested that the complaints process was an engagement opportunity and that this type of feedback from users of the system should be shared with staff and be utilized.

Councils’ suggestions to ensure that public engagement is successful

At the heart of engagement, the program, site or the region as a whole needs to approach it with an openness to receive the input and be prepared to make changes.

“You need to be prepared to make the changes before you engage about a specific issue and put aside interests.” (Member, Downtown and Point Douglas CHAC)

Council members felt that it is important for the WRHA to set a positive tone when laying the groundwork for future engagement. Promoting the engagement that has already been done and how the input has been used is an important aspect of that.

Council members stated the importance of being both creative when engaging community members and courageous as well. One of the biggest challenges to engaging the public is getting them interested and inspired enough to participate. This means choosing topics that connect with people and that they are interested in.

All of the Councils stated that it was critical to adjust your engagement approach to the population that you are engaging. ***“Who we engage impacts how we engage.”*** (Member, Downtown and Point Douglas CHAC)

“You need to take into consideration different cultures and the appropriate level and approach to engagement. Every culture has their own way of being active in their community.” (Member, Seven Oaks and Inkster CHAC)

Members of the Councils also shared the importance of creating a non-threatening, comfortable environment for the participants of an engagement activity; that people need to feel comfortable and safe before they can be engaged.

Make sure to offer many different ways for people to provide input. ***“Make sure that there are enough ways to have voices heard – have many different opportunities for input and (ways) to participate.”*** (Member, St Boniface and St Vital CHAC)

Recommendation

And, when planning engagement activities, it is important to identify and address subtle barriers to engagement – language, cultural, and socio-economic barriers for example.

“We should be considering language barriers when we target cultural or language groups. We need to address this barrier and provide support so that everyone can participate.” (Member, River East and Transcona CHAC)

In order for engagement to be successful, it is also important to utilize the expertise of staff from the programs or sites relevant to the targeted engagement activity. Ensuring that engagement staff are genuine, humble, and connect with the participants helps create an environment that is comfortable and safe for engagement.

“Be genuine, be connected, and build understanding. Honour people when engaging them, be humble.” (Members, Downtown and Point Douglas CHAC)

Council members also stated that it was important to set clear goals for each engagement activity and be clear with participants about what to expect and their role. It is also important the engagement facilitator is a good match and appropriate for the population that is being engaged. The facilitator must be skilled and neutral. And, reporting back about how the decision or issue was impacted by their input is a necessary part of any engagement initiative.

Council members also suggested that health care providers need to be able to take input on care experiences from patients and family members in an appropriate and positive manner as this kind of feedback to the system is also a level and type of engagement.

Key Challenges identified

Overall, Council members identified some key challenges that the WRHA needs to address in order to have meaningful public and patient engagement.

1. At the heart of engagement, the program, site or the region as a whole needs to approach it with an openness to receive the input and be prepared to make changes.
2. Getting members of the public and users of health services interested enough to participate in engagement initiatives. This means choosing topics that connect with people and that they are interested in.

3. Ensuring that the biggest users of the system are engaged.

Key Recommendations:

Council members made a range of recommendations regarding public engagement that included populations to engage, topics of engagement, approaches to engagement, and engagement planning and process suggestions.

1. Set a positive tone when laying the groundwork for future engagement. Promote what engagement has already been done and how input was used.
2. Get input from diverse populations, especially the most vulnerable who are the biggest users of the health care system. Engagement must include Newcomers, seniors, teens, and First Nations and Aboriginal populations.
3. Adjust the engagement approach to the population that is being engaged and identify and address barriers to engagement (cultural, linguistic, socio-economic, etc).
4. Create a non-threatening and comfortable environment for engagement participants.
5. Take engagement into communities and workplaces.
6. Offer many different ways for people to provide input – from surveys to focus groups and on-going advisory groups.
7. Utilize a broad range of media and mediums in both promoting engagement activities and as approaches to engaging targeted populations and the public.
8. Hold workshops that would be of interest to a specific population and use that as an opportunity to also engage on a topic that is of interest to the region. (examples – Newcomers, caregivers, teens)
9. Use the existing relationships that WRHA programs, sites, and staff have with organizations and networks in communities across the region to engage.
10. Engagement planning and process recommendations:
 - a. Work with community cultural, faith, and/or education leaders in planning the most appropriate approach to engagement with that population.
 - b. Utilize the expertise of staff from the programs or sites relevant to the targeted engagement activity.

- c. Set clear goals for each engagement activity and be clear with participants about what to expect and their role.
 - d. Ensure that the engagement facilitator is a good match and appropriate for the population that is being engaged. The facilitator must be skilled and neutral.
 - e. Report back to engagement participants about how their input was used.
11. Support and train health care providers so that they can respond appropriately and positively to feedback from patients and family members because input from them should also be considered as a type of engagement.
12. Have members of senior management at the WRHA participate in “walk-about” at health care sites as a way to engage patients and family members about their experience with the system.
13. Consider the complaints process as an engagement opportunity for the region. Input and recommendations from the complaints process should be shared with staff and considered when improving services.

Section I

Report Summary

Introduction and Methodology

Priority Issues and the Community Health Advisory Councils

In September 2011, the Board of the Winnipeg Regional Health Authority (WRHA) asked the Community Health Advisory Councils (CHAC's) to explore the topic of public engagement as it is one of the WRHA's six strategic directions identified in the 2011-16 strategic plan. The Councils would be sharing their insights and suggestions about public and patient engagement that would help inform the guiding principles of public engagement and the public engagement plan. The WRHA wants to ensure that meaningful public input on potential strategies and methods to engage the public are planned and implemented.

The Community Health Advisory Councils are comprised of residents of the geographic community areas that each Council represents along with some representation from the Boards of health organizations also located in the community areas. The Councils are diverse in terms of culture, socio-economic status, professional backgrounds and work experience, age, and gender. Members of the six CHAC's participate in an orientation session prior to beginning their exploration of strategic priorities of the health region.

Population Health Framework and Perspectives from their community

The Community Health Advisory Councils use a population health framework when exploring health issues – taking into consideration the social, environmental, economic, and other factors that impact the health of a population. A population health approach helps identify factors that influence health, to analyze them, and to weigh their overall impact on our health.

The Meetings

At the first meeting of each Council, Staff shared information about the strategic direction of “fostering public engagement” and the development of the Public Engagement Council, its role in building a culture of engagement within the WRHA and its main work, and, how the CHAC's exploration of public engagement would assist in the development of guiding principles and 5 year plan of public/patient engagement activities across the Winnipeg health region.

Council members were then asked to respond to the questions, “What does public engagement mean to you?” and “What do you think the benefits of public engagement could be to the WRHA?”

At the second set of Council meetings, discussion notes from first meeting were reviewed and Council members were invited to add any additional thoughts they had on the first questions. Staff then provided a summary of their responses about what they felt public engagement “means” and the benefits/value of public engagement that they identified. Staff shared information on a scan of public/patient engagement activities

currently underway by the WRHA. This was done so that Council members would have an idea of the range of activities and issues of public/patient engagement in health. Council members were then asked to respond to the following questions, “What are your ideas for public engagement activities?” and “What do you think are the most important considerations in making sure public engagement is successful?”

Presentation to the Board of the Winnipeg Regional Health Authority

Discussions from the meetings of all six Community Health Advisory Councils are synthesized and compiled into this report. Co-Chairs of the Councils presented this report to the Board of the Winnipeg Regional Health Authority in January 2012.

Background on public engagement

Public or citizen engagement is based on the belief that those who are affected by a decision have a right to be involved in the decision-making process. The World Health Organization defines it as “a process by which people are enabled to become actively and genuinely involved in defining the issues of concern to them, in making decisions about factors that affect their lives, in formulating and implementing policies, in planning, developing and delivering services and in taking action to achieve change”. (World Health Organization, 2002, 10) Public engagement is two-way communication and collaborative solving with the goal of achieving better and more acceptable decisions. (International Association for Public Participation, 2007 and Creighton & Creighton, 2008)

The Winnipeg Regional Health Authority’s new 5 year Strategic Plan includes “Foster Public Engagement” as one of the 6 new Strategic Directions identified for the region. This Strategic Direction guides the WRHA to “Work with the community to improve its health and well-being by forging partnerships and collaborating with those we serve.” Having public input on the development of the guiding principles of public engagement and the regional public engagement plan is an essential first step. Public or citizen engagement is based on the belief that those who are affected by a decision have a right to be involved in the decision-making process. The World Health Organization defines it as “a process by which people are enabled to become actively and genuinely involved in defining the issues of concern to them, in making decisions about factors that affect their lives, in formulating and implementing policies, in planning, developing and delivering services and in taking action to achieve change”.

What does public engagement mean?

To begin the exploration of the topic of public engagement with the Councils, it was important to find out what Council members’ understanding, perception, and expectations of public engagement in health was. Council members participated in an orientation when they begin their terms. The orientation includes background on public engagement along with the work and role of the CHAC’s.

“(Public engagement in health) demonstrates that everybody is valuable and has something to contribute to bettering society and health.” (Member, River East and Transcona CHAC)

When we talk about “public” engagement, who are we referring to? Who do you think should be engaged? Councils’ input supports the WRHA’s plan of broader engagement that includes the general public, consumers of health services, patients, caregivers, advocates, and community/health service providers and organizations.

The major themes that Council members touched on when considering what public engagement means to them included – it is a democratic and empowering process; it is

a venue for the public and patients to participate in decision-making in health; it allows the region a better understanding for the context of health issues; and it is a transparent process that builds trust and a sense of shared ownership of the system. It must be meaningful and done with the intention of using the input. Overall, public engagement demonstrates that the WRHA values community and what they can learn from community members.

It is a democratic, power-sharing, and empowering process

All of the Councils view public engagement as an example of democracy in action. When public engagement is done properly, it evens the playing field and empowers community members and users of the system to have a say, creating an **“on-going exchange of information between equal partners.”** (Member, St Boniface and St Vital CHAC)

“(Public engagement is not just communication and consultation. It is the vigorous involvement of the community; power-sharing.” (Member, Seven Oaks and Inkster CHAC)

“Public engagement is participatory democracy.” (Member, River Heights and Fort Garry CHAC)

Allows the region to hear and understand the stories behind the statistics

Activities that engage members of the public and users of the health care system enable decision-makers to have a better understanding of the context of a health care issue as a result of gaining perhaps a different or new perspective on an issue.

“It is a process for actively listening to what the public has to say.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Public engagement allows the region to **“hear the stories behind the statistics, through the engagement of organizations and people active in their communities.”** (Member, Downtown and Point Douglas CHAC)

It is a venue for patients and the public to share concerns and suggestions

Public engagement in health provides a venue for patients and members of the public **“to express their needs, expectations, and concerns.”** (Member, Seven Oaks and Inkster CHAC) Council members shared that **“when you make a decision, you should be asking the end-users, the consumers how they see it. They will be able to tell you what the problems are, especially, patients of on-going services, like dialysis.”** (Member, River East and Transcona CHAC)

An issue raised by the Councils was that ***“the biggest users of the system are seemingly least engaged; they are not being asked for (their) input or ideas.”*** (Member, River East and Transcona CHAC)

It must be meaningful and not token

Public engagement must not be token. It must be a meaningful and intentional process of taking into account the input of community members and users of the health system.

“(Public engagement) is not yelling into the wind. It should be somewhere where peoples’ input will be taken into account when making decisions and planning. This creates a sense of accountability.” (Member, St Boniface and St Vital CHAC)

“The public needs to feel that their input and ideas are taken on board and valued.” (Member, St James-Assiniboia and Assiniboine South CHAC)

It builds trust and confidence and ownership of the system

When public engagement in health is done well, it builds trust and confidence in the health care system and creates a sense of ownership as well.

“Public engagement enables people to be part of the reform. It builds trust and confidence. When you participate you learn about the obstacles and challenges to improving the system. Getting people to take ownership of the health care system is key. They will care more. I see it as a civic duty. Participation equals involvement – shaping what your health care system looks like. This creates ownership.” (Members, St Boniface and St Vital CHAC)

“Trust is built, for those willing to participate and be heard.” (Member, River East and Transcona CHAC)

The benefits of public engagement for the WRHA

Council members felt that there was tremendous value in public engagement and that the WRHA would benefit in a number of ways from engaging the public and users of the health care system. They also felt that individuals benefit from participating in engagement activities by acquiring more knowledge, the feeling of being empowered, and by the sense of community they feel as a result of participating. Some of the key benefits for the region include -- making more informed decisions which then result in better health outcomes, public buy-in and support of decisions, shared responsibility for tough decisions, increased trust and ownership of the system, a more positive image of the WRHA, improved relationships with users of the system and other key stakeholders, increased individual commitment to their well-being, and opportunities for community building.

The opportunity to make better decisions and improve health outcomes

All of the Councils felt that engaging the public and users of the system on important health issues would enable the region to make more informed decisions which results in improved health outcomes. ***“It helps the WRHA look more objectively at health and health system issues”*** (Member, Seven Oaks and Inkster CHAC) and ***“helps give the system a balanced perspective.”*** (Member, St James-Assiniboia and Assiniboine South CHAC)

Public buy-in and support of decisions and shared responsibility for tough decisions

Councils shared that another benefit of engaging the public is that ***“people buy into decisions when they have been involved and asked for their input.”*** (Member, St Boniface and St Vital CHAC) There would be ***“shared responsibility for tough decisions if the public is engaged.”*** (Member, River East and Transcona CHAC)

Council members also suggested that public involvement in budget and priority setting exercises could be beneficial as the region would ***“learn about priorities from public’s perspective.”*** (Member, St Boniface and St Vital CHAC) Public participation could help ***“ensure that the health care system is sustainable. The public needs to be involved and proactive in order to do this.”*** (Member, Seven Oaks and Inkster CHAC)

Increased awareness for the region and the public

“As the WRHA becomes more aware of public opinions and their ideas and the public becomes more engaged and aware of the system and issues, it would result in increased awareness for both the public and the WRHA.” (Member, River East and Transcona CHAC) Engagement of community members and users of the health system allows for a ***“better transfer of knowledge to and from the community.”*** (Member, Downtown and Point Douglas CHAC)

“There is a need for continuous and on-going engagement of the public because the health system is not static and needs to adjust and adapt to changes in the community, needs, demographics, etc.” (Member, Seven Oaks and Inkster CHAC)

It creates a sense of ownership of the system -- at individual and community level
All of the Councils felt that one of the greatest benefits of public engagement for the region is the sense of ownership of the system that is created as a result.

Public engagement creates ***“a sense of ownership of the system and it is valued more as a result. People will take care of it and use it appropriately. There is a financial benefit in that.”*** (Member, River Heights and Fort Garry CHAC)

“People will become more engaged and will feel a heightened sense of ownership of the system and have a vested interest. It is our system -- I had a say and I made a difference. They will then start caring more about their community’s broader well-being.” (Members, River East and Transcona CHAC)

It builds positive image of the WRHA, increased public trust and improved relationships
Another important benefit for the region is that ***“if public engagement is demonstrated, it will help build trust at the individual level and at the community level. If the WRHA responds with tangible tools and strategies, it will be seen as more positive – that it can address issues, manage problems, and build empathy.”*** (Member, Downtown and Point Douglas CHAC)

If the WRHA ***“validates the public for their input, opinions of the system will improve because they feel that they were listened to and that the WRHA is acting on their input.”*** (Member, St James-Assiniboia and Assiniboine South CHAC) This ***“would lead to an improved relationship between the WRHA, health care providers, and patients and families.”***(Member, River Heights and Fort Garry CHAC)

Public engagement ***“develops or builds trust and legitimizes decision-making.”***
(Member, Seven Oaks and Inkster CHAC)

It builds individual commitment to own health
Public engagement is something that not only benefits individuals who participate; it also can build the commitment that individuals have to their own health. It serves an educational purpose as well -- ***“educating the public about the appropriate use of health care services, as there is a finite amount of money to fund health care.”***
(Member, River Heights and Fort Garry CHAC)

Public engagement ***“will result improvements in health promotion, people taking ownership of their health, care, and treatment.”*** (Member, Downtown and Point Douglas CHAC)

It creates opportunities to build community

And, finally, public engagement can create opportunities to build “community” and support the region working collaboratively with communities.

“Public engagement creates a sense of community” (Member, Downtown and Point Douglas CHAC) and ***“opportunities to build community by bringing individuals and groups together to explore and work on different health and health system issues.”*** (Member, St James-Assiniboia and Assiniboine South CHAC)

“You build a sense of community when you engage. It can be a bonding experience when people discuss and provide input. There’s a shared interest and concern in the issue.” (Member, River East and Transcona CHAC)

“It is the beginning of collaborative work together.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Ideas for public engagement activities

At the beginning of the second set of meetings on public engagement, staff shared information about the levels of public engagement. The International Association of Public Participation (IAP2) describes five levels of engagement (from “inform” to “empower”) each with an increasing level of public involvement and impact.

- **Inform** – “to provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions”(techniques include: fact sheets, web sites, open houses)
- **Consult** – “to obtain public input on analysis, alternatives, and/or decisions”(techniques include: public comment, focus groups, surveys, public meetings)
- **Involve** – “to work directly with the public throughout the process to ensure that public concerns and aspirations are consistently understood and considered” (techniques include: workshops, deliberative polling)
- **Collaborate** – “to partner with the public in each aspect of the decision including the development of alternatives and the identification of the preferred solution” (techniques include: citizen advisory committees, consensus-building, participatory decision-making)
- **Empower** – “to place final decision-making in the hands of the public” (techniques include: citizen juries, ballots, delegated decision)

Staff also shared the range of public engagement activities and approaches that the WRHA has undertaken from on-going advice from and consultation with the CHAC’s as advisory to the Board to focus groups on emergency departments and patient feedback via surveys. Providing information on the levels of engagement and the range of activities that the region has undertaken served as a good starting point for positive brain-storming sessions with the Councils.

Council members provided suggestions for public engagement topics, venues, populations that should be engaged, suggested links into communities, and methods to engage – the “what”, “who”, and “how” of public engagement in health.

“WHAT?” Suggested Topics that the WRHA should ask for input on

Councils suggested that the topics that the WRHA chooses to engage the public and users of the system on should be a balance between issues that are a priority to them and issues that are of interest to a population. Many Councils suggested that the priority topics should include health promotion and the role of disease prevention in health, and getting feedback on the services that patients/clients receive. Other ideas included engaging about emergency department usage, alternative approaches to health, spirituality and health, getting Newcomers’ perspectives of their experience using the health care system, and cultural issues related to health care. Members also shared the importance that the WRHA develop a process to prioritize what topics or issues they should focus public engagement efforts on.

The WRHA should ***“engage different cultural groups about what is important to them related to the health system. This could be about cultural issues related to how health care is delivered to them.”*** (Member, St Boniface and St Vital CHAC)

The region should ***“target as many people as possible (in their) communities. We should find out what issues are important to each specific community -- mental health, teen health issues, etc. The demographic make-up of a community may influence what issues are important to them.”*** (Member, River East and Transcona CHAC)

Link workshop info-sharing and engagement to targeted populations

Unique approaches to engagement were suggested by a number of Councils, targeting different populations – from Newcomers to family members supporting a frail elderly relative. The approach they suggested was to hold workshops that would be of interest to a specific population and use that as an opportunity to also engage on a topic that was of interest to the region.

“Engaging family members is important because of the increasing numbers of the elderly in the health care system. (They would be interested in) learning more about how family members can advocate for their elderly family member. The WRHA should have engagement tied to an info sharing session. Bring in an “expert” to share information with family members.” (Member, St Boniface and St Vital CHAC)

“Engagement of Newcomers could be approached as part of a workshop where they receive information about the health care system, about their rights, how the health system works, and where they can go if they have complaints or concerns. Use interpreters and send information about engagement to community centres, faith groups, and cultural associations.” (Member, St Boniface and St Vital CHAC)

One Council suggested targeting men about self-care through their professional bodies and workplaces. ***“A potential topic – how to stay healthy? The WRHA could ask***

questions about self-care. The WRHA needs to meet people where they gather. Get their attention, feedback. The WRHA could target factory workers, retirees, office workers, and professions like taxi drivers and bus drivers; those professions where it is hard to stay healthy.” (Member, Seven Oaks and Inkster CHAC)

“WHO?” Suggested Populations the WRHA should Engage

Engage different populations – ages, gender, Aboriginal, Newcomers, vulnerable populations, people with mental health issues, etc.

All of the Councils felt that it was most important to engage vulnerable populations, who are often the biggest users of the system. Engagement must include Newcomers, seniors, teens, and First Nations and Aboriginal populations.

“More engagement needs to be done with Aboriginal and First Nations people about specialized services and opportunities to participate. The region needs to consider appropriate cultural approaches to engagement. Allow Aboriginal people to lead their own engagement process in order to make the respondents more comfortable with the process.” (Member, St Boniface and St Vital CHAC)

“Advocacy is a huge need, if a person has a mental health issue, speaks another language, and for the elderly who don’t know the medical “language”. The WRHA needs to consider all aspects of society including the homeless, street workers, and children. We need to hear all of their voices.” (Member, Downtown and Point Douglas CHAC)

A number of Councils shared the importance of engaging teens and provided suggestions for approaches and potential issues of engagement.

“Getting teens involved is really important. Use confidential surveys to get their opinions about health care, experience with their doctor, their comfort level going to a clinic, etc. Share info about engagement through health classes and Facebook and use social networking (Twitter, Facebook) to get their input on issues like child hood obesity. It would be helpful to get input from the targeted group in designing the engagement activities. Use school websites to post Wiki’s (short videos that describe engagement, etc.).” (Member, St James-Assiniboia and Assiniboine South CHAC)

Sometimes patients or other health care system users are unable to participate in engagement activities. A couple of Councils suggested getting family members to provide input. ***“Get feedback from family members on behalf of relatives who are too frail to provide feedback.”*** (Member, St Boniface and St Vital CHAC)

“HOW?” Suggested Approaches to Public Engagement in Health

Take engagement out into communities, work places, etc.

All of the Councils stressed the importance of taking engagement to people, to communities. This could include community or cultural organizations, work places, homeless shelters, seniors’ buildings, places of faith, food banks, shopping malls, and street parties.

“Engage community members at community barbeques and at street parties in North Point Douglas. Staff could go there and get to know community members.” (Member, Downtown and Point Douglas CHAC)

“Go to Main Street project, Siloam mission, etc. The homeless population are huge users of health care but we need to go to them to engage.” (Member, River Heights and Fort Garry CHAC)

“Engage people at food banks, like at St Mary’s United Church. There are lots of people and they stay for at least 1 and ½ hours. They are a target population and they feel comfortable there.” (Member, St Boniface and St Vital CHAC)

“Branch out to seniors’ homes and buildings to engage the senior population and get their input.” (Member, River Heights and Fort Garry CHAC) ***“Have information sessions at seniors’ buildings and centres.”*** (Member, St James-Assiniboia and Assiniboine South CHAC)

“Connect with people in the work place – it is a big population. Use their interest in prevention and workplace wellness as a platform to engage. The WRHA could bring in guest speakers.” (Member, River Heights and Fort Garry CHAC)

“Most churches have groups that outreach to the shut-in, elderly, and people with mental health issues – this could be another way to get input from the vulnerable, frail, and elderly populations.” (Member, St Boniface and St Vital CHAC)

“Set up information booths in malls where seniors and retirement building shuttle buses go, etc.” (Member, St James-Assiniboia and Assiniboine South CHAC)

A couple of Councils suggested running town hall meetings. ***“Hold town hall meetings and use experienced facilitators. Talk to people where they are, where they gather and have a member of senior management attend. Hold round tables with community stakeholders – a balanced representation of community – for all day work shops.”*** (Members, St James-Assiniboia and Assiniboine South CHAC)

Go through community, cultural, faith, education leaders to connect with people
Councils recommended that staff utilize community cultural, faith, and/or education leaders in planning the most appropriate approach to engagement with that population. They can help with the planning of the activity, promotion, potential participants, location of the activity, and discussion facilitation as well. These community engagement activities could take place in community and cultural centres. ***“The St Boniface University, Centre Culturel Franco-Manitobain and the Sam Cohen auditorium at the St. Boniface Research Centre are all excellent potential venues that could be considered to reach the French-speaking population.”*** (Member, St Boniface and St Vital CHAC)

“(When planning engagement), go through cultural or ethnic leaders and utilize Elders in the Aboriginal community. Speak to a representative of a cultural association to find out the best approach to engage – from both cultural and faith backgrounds.” (Members, Seven Oaks and Inkster CHAC)

Use whole range of media – especially social media, websites
Council members strongly recommend that the WRHA utilize a broad range of media and mediums in both promoting engagement activities and as approaches to engaging targeted populations and the public.

“Use the WRHA website, email, social media, blogs, and Facebook to ask questions and get feedback on important topics.” (Member, River Heights and Fort Garry CHAC)

“Use Twitter, texting, and Facebook to engage the younger population.” (Member, Downtown and Point Douglas CHAC)

“Use internet, print, media, and mail to get the same message across different mediums -- can reach more people to promote opportunities for engagement in health.” (Member, River East and Transcona CHAC)

Council members encouraged the use of community newspapers, newsletters, and posters to share information about engagement. A number of the Councils were very enthusiastic about the region participating in a weekly segment on health with a local television program, like “Big Breakfast TV”.

“Big Breakfast TV – the WRHA should have a weekly segment on health.”
(Member, River Heights and Fort Garry CHAC)

Surveys after care and Comment Cards at health care sites

Many of the Councils recommended that engagement include surveys after care and comment cards or touch-screens that patients can use to give feedback after a care experience. Other options for post care feedback included on-line surveys at home or on the WRHA website, mailed surveys to complete, and the use of a third party (like a volunteer) to assist patients/clients in completing a survey.

“Use surveys or questionnaires so that patients can provide feedback after a care experience – like a hospital stay, for example.” (Member, St Boniface and St Vital CHAC)

“Could look at conducting patient surveys through other health care providers, like chiropractors, physiotherapists, family doctors, midwives, etc.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Use the region’s existing links/relationships with community organizations and networks to engage

A number of the Councils felt that it made sense to use the existing relationships that WRHA programs, sites, and staff have with organizations and networks in communities across the region to engage.

“Partnerships are important. People feel comfortable with people that they know and they need to feel comfortable in order to provide feedback. Use existing groups and networks that they WRHA has connections to.” (Member, River East and Transcona CHAC)

“Depending on the issue, you may be able to use an established network – like Newcomer organizations and new mom groups.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Visits to health care sites – walk abouts

Councils felt that there was much for senior management at the WRHA to gain from participating in “walk-about” at health care sites as a way to engage patients and family members about their experience with the system.

“Go out to people. Do a mobile meet and greet at hospitals, like in the MS wing at Health Sciences Centre, at ER departments, etc. Have senior management talk to patients and family members about how their experience is going, what their concerns are, etc.” (Member, River Heights and Fort Garry CHAC)

“Have senior management walk through sites.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Use complaints process as an opportunity for engagement

One Council suggested that the complaints process was an engagement opportunity and that this type of feedback from users of the system should be shared with staff and be utilized.

“Direct staff members field a lot of complaints. I’m not sure what happens after they have been redirected, but they should be sharing resolutions with staff. The complaints process, both from the public and staff perspectives, is an engagement opportunity.” (Member, St Boniface and St Vital CHAC)

Suggestions to ensure that public engagement is successful

The last question that Councils were asked in their exploration of the topic of public engagement in health was, “what does the WRHA need to do in order to ensure that public engagement initiatives and activities are successful?” Members were encouraged to consider their own experience with engagement and what factors contribute to making it a positive experience/successful and what are other considerations for making engagement meaningful for both the participant and the WRHA.

Be prepared to make changes, to use the input – before you go and engage about that issue

At the heart of engagement, the program, site or the region as a whole needs to approach it with an openness to receive the input and be prepared to make changes. The region also needs to consider what input could lead to better health outcomes when deciding on topics of engagement.

“You need to be prepared to make the changes before you engage about a specific issue and put aside interests.” (Member, Downtown and Point Douglas CHAC)

“As an organization, what do we need to learn from the public for better health outcomes?” (Member, Seven Oaks and Inkster CHAC)

Build on positive tone, history of how the WRHA has engaged and used input

Council members felt that it is important for the WRHA to set a positive tone when laying the groundwork for future engagement. Promoting the engagement that has already been done and how the input has been used is an important aspect of that.

“We need to change the overall tone – that all health care news is negative. We need to build on the positive. It is important to set the groundwork to get people involved and engaged and interested in providing input into the system.” (Member, River East and Transcona CHAC)

“Build trust in engagement. Promote what is being done already, how input is being used.” (Member, River East and Transcona CHAC)

Be creative, be willing to take risks – have courageous conversations

Council members stated the importance of being both creative when engaging community members and courageous as well, given the complexity and difficulty of addressing the significant link between poverty and poor health outcomes and the risks that are taken when engaging about difficult health system issues.

“The region needs to be creative when engaging. You have to be willing to take risks and have to be willing to advocate even if it’s risky, like on the issue of poverty. The Board could take this on. Increasing incomes will improve health outcomes.” (Member, Downtown and Point Douglas CHAC)

“Have courageous conversations.” (Member, River East and Transcona CHAC)

Need to inspire and connect in order to engage

One of the biggest challenges to engaging the public is getting them interested and inspired enough to participate. This means choosing topics that connect with people and that they are interested in.

“Engaging the public, not being apathetic, getting people interested is critical. It doesn’t matter how much you communicate if no one is listening or interested. Make sure that the process gets them talking and have an interesting and timely topic for them to provide input on.” (Members, River East and Transcona CHAC)

“Participation/engagement happens when there is interest and concern.” (Member, Seven Oaks and Inkster CHAC)

Who you engage impacts how you engage

All of the Councils stated that it was critical to adjust your engagement approach to the population that you are engaging. ***“Who we engage impacts how we engage.”*** (Member, Downtown and Point Douglas CHAC)

“The group that you target will influence “how” you engage them. Think about the population and how they get and share information, like the elderly and youth.” (Member, River East and Transcona CHAC)

“Use unique approaches and engage people where they are – shopping malls, etc.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“You need to take into consideration different cultures and the appropriate level and approach to engagement. Every culture has their own way of being active in their community.” (Member, Seven Oaks and Inkster CHAC)

Get input from diverse populations, especially most vulnerable – the biggest users of the system – get everyone to the table

Another factor in public engagement that the Councils felt was critical to its success is engaging and getting input from diverse populations, especially the most vulnerable

who are the biggest users of the health care system. Diverse populations include people from different cultural, ethnic, and faith backgrounds, different socio-economic groups and professions, different sexual orientations, and individuals with physical and mental health challenges. It also includes gender and diversity of age.

“(Get) input from a diverse group – occupations, way of life, on meaningful topics that are relevant to community, individuals, and the health care system.” (Member, St Boniface and St Vital CHAC)

“(Engagement initiatives need participants that are) representative of diverse populations and it should be interactive and on-going.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“There must be participation from First Nations, Aboriginal, Metis, Inuit people – we need to get everyone at the table.” (Member, Downtown and Point Douglas CHAC)

Make it comfortable and fit needs of group that you are engaging

Members of the Councils also shared the importance of creating a non-threatening, comfortable environment for the participants of an engagement activity; that people need to feel comfortable and safe before they can be engaged. Incentives like the opportunity to socialize, eating together, and the opportunity to acquire new knowledge and skills was also identified as being important components.

“Participants need to feel comfortable and not intimidated before they can share.” (Member, River Heights and Fort Garry CHAC)

“Go to where the people are – like the homeless population at shelters, children and parents through schools, etc.” (Member, St Boniface and St Vital CHAC)

“For meaningful feedback, you need to create a safe forum for people to provide their thoughts, etc. – like Newcomers.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“Provide incentives (for their participation), like the group, good food, sharing a meal.” (Member, River East and Transcona CHAC)

“It is always good to talk to people where they feel most comfortable. We should be going to them.” (Member, Downtown and Point Douglas CHAC)

Make sure to offer many different ways for people to provide input

Given the region should provide engagement opportunities for diverse populations, engagement approaches also need to be diverse – from filling out surveys to participating in on-going advisory councils.

“Make sure that there are enough ways to have voices heard – have many different opportunities for input and (ways) to participate.” (Member, St Boniface and St Vital CHAC)

“Use a range of mediums to engage. Use social media with a monitor to pull ideas out. But, there is a need to consider that not everyone has access to technology.” (Members, St James-Assiniboia and Assiniboine South CHAC)

“I would like to have an opportunity to fill out evaluation form (could do this on the website as well) and share what my experience was because I was afraid to give negative feedback. We need to have the option to provide feedback anonymously.” (Member, River East and Transcona CHAC)

“Address the fear that some older people, Newcomers, and others have about providing negative feedback or criticism of the system. (Assure them) that it will not impact their care.” (Member, River East and Transcona CHAC)

Address barriers

When planning engagement, it is important to identify and address subtle barriers to engagement – language, cultural, and socio-economic barriers for example.

“We should be considering language barriers when we target cultural or language groups. We need to address this barrier and provide support so that everyone can participate.” (Member, River East and Transcona CHAC)

“Engage and have engagement materials in multiple languages.” (Member, River Heights and Fort Garry CHAC)

“When engaging people whose first language is not English, use facilitators with different languages and/or interpreters to share information and to engage.” (Member, Seven Oaks and Inkster CHAC)

One Council member pointed out the challenges and barriers that people with a low income face. She shared that ***“we need to meet peoples’ basic needs before they are able and willing to be engaged. (Maslov’s hierarchy of needs)”*** (Member, River East and Transcona CHAC)

Utilize expertise from whatever program/site/community you are engaging –
In order for engagement to be successful, it is also important to utilize the expertise of staff from the programs or sites relevant to the targeted engagement activity.

“Have an expert present in case there are questions about the particular program/topic that is the focus of the engagement activity. A unique approach is necessary to engage older population who are worried about asking questions, giving feedback, etc. Have staff that work with this population help design the public engagement approach, questions, etc.” (Member, St Boniface and St Vital CHAC)

Be genuine

Ensuring that the engagement staff are genuine, humble, and connect with the participants helps create an environment that is comfortable and safe for engagement.

“Be genuine, be connected, build understanding. Honour people when engaging them, be humble.” (Members, Downtown and Point Douglas CHAC)

Set clear goals for each engagement activity and be clear with participants about what to expect and their role

It is also critical to set clear goals for each engagement activity and share with participants. Their expectations, the process, and their role also need to be clear. Evaluation of engagement is essential.

“Set clear goals of what you want to accomplish and how you will go about engaging.” (Member, Seven Oaks and Inkster CHAC)

“Provide expectations about the engagement (activity) and the role of participants.” (Member, River Heights and Fort Garry CHAC)

“Evaluate engagement activities and use feedback to improve.” (Member, River Heights and Fort Garry CHAC)

Make sure that staff that are running engagement activities are skilled

Council members also shared the importance of having the appropriate engagement facilitator to match the population that is being engaged. Gender, culture, and power issues need to be considered when planning and choosing a facilitator. The facilitator must be skilled and neutral.

“(In choosing) a facilitator, you need to consider who is most appropriate for each target group in terms of culture, gender, etc. Break down some barriers to

involvement by considering who is facilitating and potential power issues. The facilitator needs to be knowledgeable and friendly. (Members, River Heights and Fort Garry CHAC)

“The neutrality of the person who facilitates a public engagement activity is really important. The provider has all of the power so the patient may have concerns about fall-out if they give negative feedback about care – like residents at personal care homes.” (Member, St Boniface and St Vital CHAC)

“Need to educate the engager with training, guides about the “how-to’s” of engagement that cover responsibilities, relationship between the engager and the patient/community member and the relationship between the engager and their supervisor. Need to acknowledge the levels of authority and decision-making. This includes who decides if the input will be used.” (Member, Downtown and Point Douglas CHAC)

Report back about how the decision or issue was impacted by their input

All of the Councils felt that the participants of an engagement activity need to know what happened with their input.

“(There needs to be) a feedback system. If we ask the public about an issue, we need to make sure that we tell them what we did with their input.” (Member, River Heights and Fort Garry CHAC)

“Report back to people – they need to know that they made a difference. Get back to them in a tangible way. They will be more likely to provide input the next time.” (Member, Downtown and Point Douglas CHAC)

“(You) need to let people know how their input was used. People want to see the results and impact of their input.” (Member, Seven Oaks and Inkster CHAC)

Help health care providers learn how to receive feedback from patients

Council members also suggested that health care providers need to be able to take input on care experiences from patients and family members in an appropriate and positive manner as this kind of feedback to the system is also a level and type of engagement.

“Need to educate health care providers about how to receive feedback – especially negative feedback.” (Member, River East and Transcona CHAC)

Other ideas:

Some additional suggestions that Councils had for making engagement successful including the following ideas/comments:

“Piggy-back on other community health events, networks, etc. and use as an opportunity to engage.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“Public education and the proper use of the system is part of public engagement.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“Give and take – sometimes the group might want to talk about something else. Give them an opportunity for input on that too.” (Member, River East and Transcona CHAC)

There were a couple of insightful comments about engagement that summarize what is essential to making it meaningful:

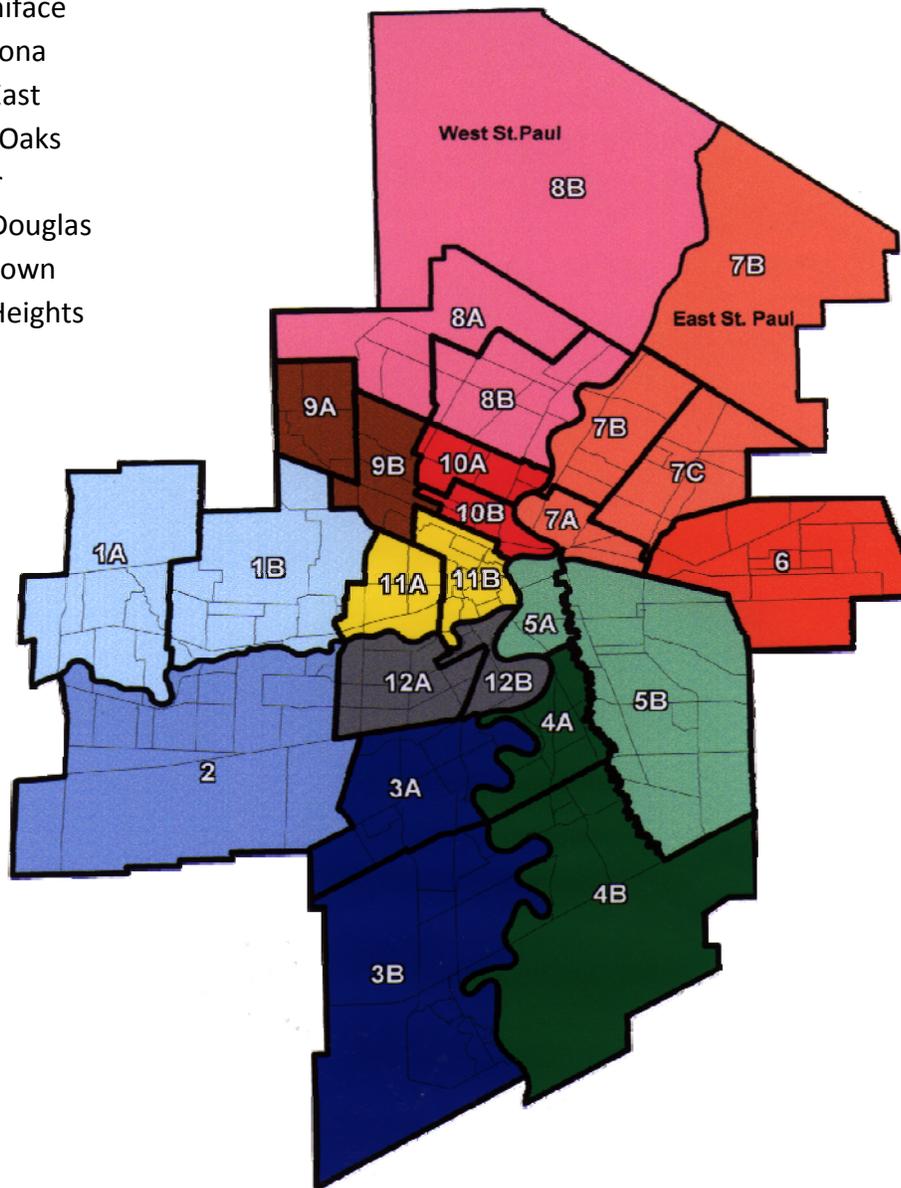
“You cannot underestimate the importance of a non-threatening environment and a good facilitator.” (Member, St James-Assiniboia and Assiniboine South CHAC)

“Don’t underestimate the human connection – being together, feeding off each other, sparking ideas, etc.” (Member, St James-Assiniboia and Assiniboine South CHAC)

Appendix A

Map of the Community Areas in the Winnipeg Health Region

- 1 St. James – Assiniboia
- 2 Assiniboine South
- 3 Fort Garry
- 4 St. Vital
- 5 St. Boniface
- 6 Transcona
- 7 River East
- 8 Seven Oaks
- 9 Inkster
- 10 Point Douglas
- 11 Downtown
- 12 River Heights



Appendix B

Acknowledgements

Members of the Community Health Advisory Councils

Board Liaisons to the Councils

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Downtown/Point Douglas
River East/Transcona
River Heights/Fort Garry
Seven Oaks/Inkster
St. Boniface/St. Vital
St. James-Assiniboia/Assiniboine South

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