



Reporting back to the Community Health Advisory Councils about how their input is used



May 2013

The WRHA is committed to keeping track of how the ideas and suggestions of the Community Health Advisory Councils are used internally by the WRHA Board and programs and externally by other relevant stakeholders.

- All CHAC Reports are made public and posted on the WRHA website www.wrha.mb.ca
- As the Reports are shared with so many key partners, we can only report on what we know.
- We continue to receive very positive feedback on the Councils from other Regional Health Authorities in Manitoba as well as other jurisdictions across Canada

Sustainability of the Health Care System: Community Perspectives (January 2013)

- The WRHA Public Engagement Council is using the feedback on approaches to sustainability to develop a broader public engagement plan to get feedback on creating a more sustainable health system
- Criteria for decision-making was referenced in the Board's review of strategy for a community-based health services structure
- Feedback on criteria for decision-making will be included as part of review of the piloting of PBMA in the region

“Caring Across Cultures: Community Perspectives about how to increase the Cultural Proficiency of Health Care Providers and the Health Care System” (May 2012)

- Based on the engagement of CHAC members, patient participation in all Cultural Proficiency and Diversity organizational, structural, and clinical interventions throughout the region will occur
- To date, the CHAC report has informed the development of a Cultural Proficiency and Diversity Self-Assessment Toolkit to facilitate programs with establishing their own Cultural Proficiency and Diversity action plan

- CHAC members input will also serve to develop a knowledge mobilization tool to facilitate staff orientation to Cultural Proficiency and Diversity
- The WRHA has recommended to Manitoba Health that Manitoba Health registration forms include culture and language

Public Engagement in Health: Community Perspectives (January 2012)

Learning from Patient Experiences: Community Perspectives (June 2008)

- A Tool kit for Public and Patient Engagement has been created utilizing the suggestions that Council members providing for “successful engagement”; the avenues for making this information available across all areas of the WRHA is being explored
- This Report was included in a provincial review of public engagement processes in Manitoba
- An action plan has been developed for patient and public engagement in the region – this report was utilized in its development
- The Public Engagement in Health report continues to be used by the Public Engagement Council (WRHA) to guide public engagement activity, which includes guiding principles
- The Quality and Patient Safety Program has acted on one of the recommendations – to consider and use feedback that they receive through the complaints process to help highlight issues that may need to be addressed within the system – they have developed a format to tell the stories of complaints brought forward and opportunities for informing change – “Learning from Feedback” – these will eventually be posted on the WRHA website.

Building Public Trust of the Health Care System: Community Perspectives (May 2011)

- The CHAC’s highlighted the fear that many patients or clients may feel in reporting or sharing negative feedback about a care experience – especially the elderly as they may feel that this will impact their on-going care (this issue was also brought forward in the CHAC report on Learning from Patient Experiences Report)
 - In response to this issue, the CHAC’s recommended that volunteers be used to collect feedback – this recommendation is being acted on in a pilot project where volunteers are being trained and utilized by the Quality and Patient Safety Program in partnership with the Home Care Program, to collect feedback from clients about their overall experience. The evaluation of this pilot, will help us identify opportunities to utilize volunteers to collect feedback in other service areas -- the piloting of this initiative has been completed and it now being considered for broader use across programs
- Members of the Quality and Patient Safety Team continue to reference this report when writing reports and meeting with quality improvement teams

Building a Primary Care System: Feedback on Primary Care Home and Network (January 2011)

- This report is being referred to in the implementation of primary care networks across the region

- Primary Care Networks are evolving in the province – the Councils supported the development of the networks and strengthening the relationship with all family physicians in Winnipeg; WRHA has received approval from Manitoba Health to support the development of 6 primary care networks in Winnipeg. There will be one in each of the community area pairs. As these evolve, the networks will be referred to the report.
- As the Primary Care Networks are being established, as recommended by the Councils, other providers from different positions will be included. The WRHA is also implementing various supports to encourage Collaborative Care. Primary Care has now supported this approach at all WRHA sites and is moving towards supported fee-for-service family physicians in working with other providers. Feedback from the Councils stressed the importance of considering public needs and access, especially for those with chronic disease. The Primary Care Program Team has continued to dedicate resources from the Chronic Disease Collaborative to assist in developing teams that will support enhanced chronic disease management. This work has gained interest from the evolving primary care networks.
- The Primary Care Program is undertaking a review of all of its primary care clinics with the goal to enhance capacity. The CHAC report has been used to also ensure further public engagement in included in this process.

Chronic Disease – Accessing Health Care and Barriers to Self-Management (January 2010)

- The Chronic Disease Collaborative continues to regularly use the report. A provincial Chronic Disease Self-Management advisory committee is now in place. The initial focus of this group is to enhance chronic disease self-management and to better link current activities to ensure that people have the opportunity to participate in programs that are best suited to them.

Issues that Impact the Health of Immigrants and Refugees: Community Perspectives (February 2008)

- An intergovernmental department committee is exploring the potential development of provincial interpreter services across service sectors (includes other service areas such as education, justice, children’s services, and social services) based on the success of the Language Access Program and the need for interpretation outside of health
- Through language and ethnicity indicators group, a plan is in place to identify what languages a patient speaks and this group is working on how to collect data and inform the system to make it safer
- This report was used in the development of the Cultural Proficiency Framework which is now posted on the website. As noted, this framework is now used in the development of action plans.
- BridgeCare Clinic is now also able to accommodate privately sponsored refugees as well as government sponsored refugees
- Language Access services continue to experience increased activity in meeting the needs of newcomers in Winnipeg. This indicates increased awareness for the need to ensure communication with all patients regardless of language.

Other ways that CHAC input and processes being used

- The CHAC manager remains engaged as part of a national network on public engagement in health.
- The experience of the CHAC's continues to inform the development and support of broad public and patient engagement across the Winnipeg health region – including consulting programs and sites on engagement initiatives