



Winnipeg Regional
Health Authority Office régional de la
Caring for Health santé de Winnipeg
À l'écoute de notre santé

“Declaration of Patient Values for the Winnipeg Health Region”

Local Health Involvement Groups

May 2015

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Preface

This report contains the ideas and feedback generated by the Local Health Involvement Groups (LHIGs), the Patient and Family Advisory Council (PFAC), and a focus group which included members of the Home Care, Mental Health, and Long Term Care Advisory Councils over the course of meetings held in February and March 2015.

In September 2014, the Board of the Winnipeg Regional Health Authority (WRHA) asked the Local Health Involvement Groups (LHIGs) in the fall of 2014 to develop a Declaration of Patient Values for the region.

The Report includes:

- An overview of the methodology and context for the exploration of this topic, and
- The Declaration of Patient Values

Appendix A – WRHA Mission, Vision, Values (Strategic Plan 2011-2016)

Appendix B – Map of the Community Areas in the Winnipeg Health Region

Appendix C – Acknowledgements

The Declaration of Patient Values was first presented by LHIG Co-Chairs at their year-end meeting on April 22, 2015. It was formally presented to the Board at their May 2015 meeting.

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Section I

Report Summary

Introduction and Methodology

The Local Health Involvement Groups (LHIGs) have been providing advice and their unique community perspectives on significant health issues to the WRHA Board for 13 years. They were formerly known as Community Health Advisory Councils (CHACs). In 2013, the Province of Manitoba passed Bill 6, *The Regional Health Authorities Amendment Act*, (Improved Fiscal Responsibility and Community Involvement). This Act mandated the creation of Local Health Involvement Groups (LHIGs) to strengthen local involvement in regional health authorities. The change in name did not impact the membership and role of the Councils in the Winnipeg health region.

The Local Health Involvement Groups are comprised of 80-90 residents of the 12 geographic community areas that each Group represents. There is also some representation from the Boards of health organizations also located in the community areas of the Winnipeg health region. The Groups are diverse in terms of culture, socio-economic status, professional backgrounds, work experience, age, and gender. Members of the six LHIGs participated in an orientation session prior to beginning their exploration and provision of input on topics for their 2014-15 meetings.

Background/Rationale for Exploring this Topic

The Local Health Involvement Groups were asked by the Board of the Winnipeg Regional Health Authority in the fall of 2014 to develop a Declaration of Patient Values for the region. Developing the Declaration is a legislative requirement, under Bill 38, the Regional Health Authorities Amendment Act:

- 24.1 A regional health authority must, within the time specified by the minister and after consulting with residents of its health region, establish a declaration of patient values, in accordance with guidelines and procedures provided by the minister, and make it available to the public.

While a number of health care organizations within the Winnipeg health region (hospitals, community health clinics, and personal care homes) have their own charters of patient rights/ declarations of patient values developed by their Boards, a regional declaration of patient values did not exist.

The Declaration is intended to reflect the values of those receiving services within the Winnipeg health region and the involvement of caregivers, family members, and others who support patients. It will inform policy and processes within the system, like patient relations, human resources, etc. and can be reflected upon in decision-making at the senior levels of the organization, as commonly happens with values documents. There will be significant work done in sharing the Declaration with staff and applying across the region and ensuring that the values within the Declaration compliment the values/rights in place at many WRHA-funded organizations. The goal is that these values become reflected in the day to day practices and

decision-making, and that the Declaration will play an important role in shaping care in the future.

Methodology/Approach

While input of the Local Health Involvement Groups was critical to the development of the Declaration of Patient Values, there was an opportunity to engage members of the program advisory councils and the Patient and Family Advisory Council in the process as well. Members of the program advisory councils (Mental Health, Home Care, and Long Term Care) are the clients/residents and family members of people accessing services from those programs.

As a result, the approach to develop the Declaration involved creating opportunities through single meetings and focus groups to get input from our public, patient, client, and family engagement groups.

- Six Local Health Involvement Groups (LHIGs)
- Patient and Family Advisory Council (PFAC)
- Focus group – members invited from the:
 - Mental Health Advisory Council
 - Home Care Advisory Council
 - Long Term Care Advisory Council

Consultations with the LHIGs, PFAC, and Focus Groups took place in February and March 2015. Input from all of the meetings and focus group discussions was collected and reviewed by engagement staff who then created a draft declaration of patient values based on that input. The draft Declaration of Patient Values was be shared with all participants for feedback. A small working group of LHIG members and members from the program advisory councils met to review the feedback and agree on final changes to the Declaration. The final version of the Declaration of Patient Values was presented by Co-Chairs of the LHIGs at their year-end meeting on April 22, 2015 and was formally shared and presented to the Board in May 2015.

LHIG and PFAC Meetings/Focus Group – background information and questions for input

At each meeting, participants received background information about the rationale and context for developing a Declaration of Patient Values for the Winnipeg health region and examples from other health care sites in Winnipeg and Ontario.

Exploration into the values that should be reflected in the care that they receive in the health care system began with discussing the WRHA's current mission, vision, values. (Appendix A) This document is very concise and recognizes the values of dignity, care, and respect as being integral to the system and how care is delivered.

Participants were asked if there were other values that they felt would be important to add as the second step to building a Declaration of Patient Values. LHIGS consider issues of equity and transparency/ accountability when exploring and providing feedback on all of their topics.

Health equity is the goal that all people reach their full health potential and are not held back by the socially determined but modifiable barriers associated with poverty. Considering both equity and transparency/accountability was especially important when exploring values about patient care and experience. Staff wrote the additional values down (both on laptop and on flipcharts). Participants assisted in grouping the values into themes (like dignity and respect, knowledge and information sharing, care and compassion). The agreed upon groupings were then written down on flipcharts posted on walls in the meeting room.

Participants were then asked to consider how a value (or grouping of values) would look like or be experienced by them when using health services. How would that value be realized in actions and what is most important to them about that particular value. They were also asked to consider how their own actions could help realize that value.

For example:

- “In terms of dignity, as a patient, family member the most important aspect about this value to me is...”
- “In terms of communication and sharing information, as a patient, family member, I will...”

Participants were provided a few different options for providing input -- they could write their ideas down on Post It notes and then place them on the flipchart, they could use markers and write their feedback directly onto the flipcharts, or they could discuss in small groups and have staff write their ideas onto the flipcharts. Most participants chose to write their ideas down on Post It notes.

The Downtown and Point Douglas LHIG chose to focus on what was important to the patient and family in terms of how they were treated and they how they experienced care. This LHIG was most concerned about the decision to build a declaration of patient values versus a declaration/charter of patient rights; worried that “values” softened accountability of the health care system. They want to ensure that the values of respect, dignity, compassion, and non-judgment (especially) are reflected in care that they receive every time they interact with the system.

Concerns, Considerations, and Questions for the Board and Senior Leadership regarding the Declaration of Patient Values

When the background information was shared at the meetings, many participants questioned the rationale behind developing a declaration of patient values versus a declaration of patient rights. A number of participants felt that “values” softens the accountability of the health care system which was a concern to them whereas “rights” would connect to expectations of care and accountability of health providers and staff more concretely. Others were comfortable with a values approach because they saw this as a connection to the ethical dimensions of care.

Participants also shared a concern about how this would be perceived by patients and family members. Will it be important and meaningful to them? What will this declaration mean to me as a patient when I see it? They also recommended that the WRHA consider what will happen if a patient feels that their experience did not reflect the values in the declaration.

With the existence of charters of patient rights, etc. at a number of health care sites across the region, participants felt that it was important that the Board determine how this Declaration of Patient Values would support those existing charters and what would need to be considered in sharing the declaration with those sites and organizations.

LHIG members and other participants felt it was important to know what the commitment of the Board to the Declaration and how it could be translated and reflective of how care is delivered. The Declaration could be incorporated into staff training, for example. They also encourage the Board and Senior Leadership to reflect on the Declaration in governance and decision-making processes.

Feedback on Values and Building the Declaration

In the exercise of reflecting on WRHA's core values of dignity, care, and respect, participants were invited to share ideas for additional values that were important to them. A number of themes arose in all of the meetings. These included:

- Communication
- Information Sharing
- Knowledge
- Honesty
- Access/Timeliness
- Honesty/Transparency/Accountability

In the challenging process of reviewing and refining 100's of value statements from the participants, staff identified key themes that reflected what was most important as a patient or family member during an experience with the health care system. These were:

- Dignity and Respect
- Care and Compassion
- Feeling Safe
- Open and Transparent Communication
- Being an equal partner in my care
- Getting support in my healthcare journey

Under each of the value pairings there are key statements from the participants of how those values would look in terms of behaviour/actions by staff and about how that experience would feel to them as a patient or family member.

Feedback from participants about how they (as patients and family members) can realize the values through their own actions was consistent and covered the values of open and transparent communication, dignity and respect, and being an equal partner in my care. The value of using health care resources appropriately was also brought forward by many participants.

As an active partner in my care, I will:

- Be open and share information about my health including my symptoms, challenges, concerns, expectations, and goals.
- Ask questions if I don't understand.
- Set a positive tone and be respectful of all members of my health care team.
- Try my best to follow my care plan and inform health providers if I'm having difficulty doing so and work with my healthcare team to resolve issues.
- Use health care resources appropriately

Equity and the Declaration of Patient Values

Health equity is the goal that all people reach their full health potential and are not held back by the socially determined but modifiable barriers associated with poverty.

The discussion about equity at the meetings was core to the development of the Declaration. Participants highlighted the need to ensure that those patients and families who were experiencing poverty and other barriers (language, culture, mental health issues, etc.) needed to be reflected in the Declaration. The theme of equity was incorporated into all of the other core values, especially respect and dignity, care and compassion, feeling safe, and open and transparent communication.

Key statements that speak directly to building equity:

- *I value:*
 - Being seen as an individual with unique life experiences and needs.
 - Being treated with respect and compassion, without judgment of my condition, culture, or my life.
 - Healthcare providers who want to get to know me and ask me questions about my culture, background, family, etc. so that they can provide the best care possible.
 - Being able to communicate what I need to, to the right people and understanding what is happening to me.
 - Getting help from interpreters or others who can help me communicate if I need it.
 - Trusting that the healthcare team will treat me with the respect and dignity if I am unable to participate in my care due to the nature of my illness.
 - Feeling truly listened to.
 - Getting my healthcare provider's full attention.
 - Knowing what is going on and be able to say yes or no to it.
 - Getting information about my health situation and all of the options for treatment shared in a way that I can fully understand.
 - Taking part in making informed decisions about my care.

Declaration of Patient Values

This declaration is intended to reflect the values of those receiving services within the Winnipeg health region and the involvement of caregivers, family members, and others who support patients.

When I or people I care about need health care...I value:

Dignity and Respect

- *Being seen as an individual with unique life experiences and needs.*
- *Being treated with respect and compassion, without judgment of my condition, culture, or my life.*
- *Having my privacy respected as much as is possible throughout my care.*

Care and Compassion

- *Healthcare providers who are caring and compassionate when they work with patients, families, and others who support them.*
- *Healthcare providers who want to get to know me and ask me questions about my culture, background, family, etc. so that they can provide the best care possible.*

Feeling safe

- *Being able to communicate what I need to, to the right people and understanding what is happening to me.*
- *Getting help from interpreters or others who can help me communicate if I need it.*
- *Trusting that the healthcare team will treat me with the respect and dignity if I am unable to participate in my care due to the nature of my illness.*

Open and transparent communication

- *Feeling truly listened to.*
- *Getting my healthcare provider's full attention.*
- *Knowing what is going on and be able to say yes or no to it.*
- *Getting information about my health situation and all of the options for treatment shared in a way that I can fully understand.*
- *Taking part in making informed decisions about my care.*

Being an equal partner in my care

- *Being considered a partner in my care, not just a patient receiving care.*
- *Having those people who are supporting me included in my healthcare team.*
- *Being informed and invited to take part in the decisions that affect me.*
- *Flexibility of healthcare providers in responding to my changing needs over the course of my health issue.*
- *Being enabled to achieve my health goals so that I can live as full a life as I am able to.*

Getting support in my health care journey

- *Getting support to make sure that my experience moving through the health care system is well-coordinated and that the connections between services, health care sites, specialists, etc. will be smooth and timely.*
- *Knowing what to expect – how long I might need to wait for care, other resources to connect to, and options that I might have.*

As an active partner in my care, I will:

- Be open and share information about my health including my symptoms, challenges, concerns, expectations, and goals.
- Ask questions if I don't understand.
- Set a positive tone and be respectful of all members of my health care team.
- Try my best to follow my care plan and inform health providers if I'm having difficulty doing so and work with my healthcare team to resolve issues.
- Use health care resources appropriately

This declaration was developed through consultation with WRHA public and patient engagement volunteers.

Recommendations for the Sharing the Declaration with Staff and the Public:

Participants at the meetings and in the focus group shared ideas for how to share and promote the Declaration. This was also discussed in the small working group of LHIG members and members from the program advisory councils who will continue to meet as required to provide feedback on the development of a communication and implementation strategy for the Declaration.

- Having different versions of the Declaration – some more graphic with less text all the way to full text that could be especially helpful for staff to have more details
- Sharing stories behind the core values with a poster series or videos to animate them and bring them to life – for example, each paired value (Care and Compassion, Respect and Dignity, etc.) could have a poster or a short video with a story about a patient/family member and what that particular value means to them

Appendix A

WRHA Strategic Plan – 2011 to 2016

WRHA Mission, Vision, and Values

Vision

- Healthy people
- Vibrant communities
- Care for all

Mission

- To coordinate and deliver safe and caring services that promote health and well-being.

Values -- We value:

- Dignity as a reflection of the self-worth of every person
- Care as an unwavering expectation of every person
- Respect as a measure of the importance of every person.

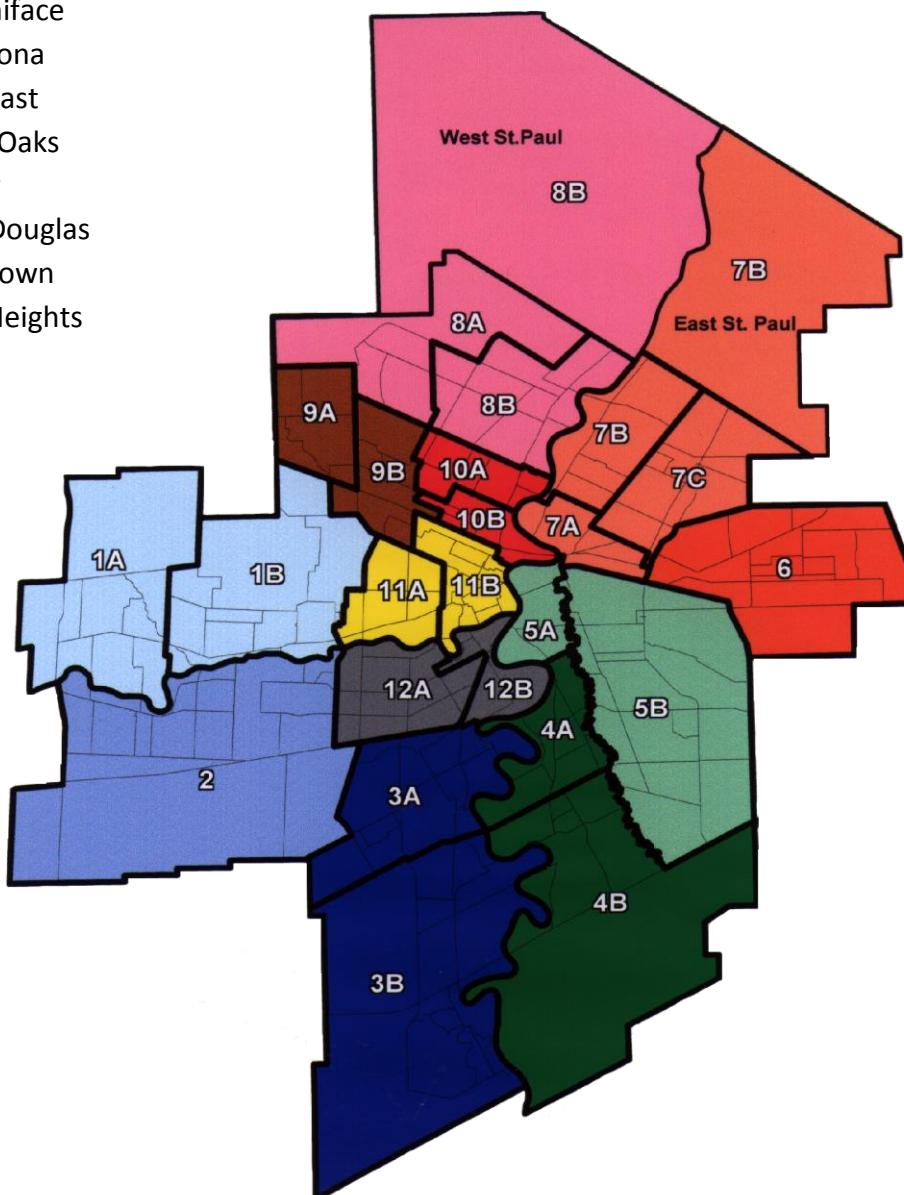
Commitment -- We are committed to:

- Innovation that fosters improved care, health, and well-being
- Excellence as a standard of our care and service
- Stewardship of our resources, knowledge and care.

Appendix B

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 C

Acknowledgements

Members of the Local Health Involvement Groups

Board Liaisons to the Groups

Support Staff for Groups

Members of Local Health Involvement Groups 2014-2015

Downtown/Point Douglas Group

Dennis Ballard	Harry Paine
Davada Carlson	Lissie Rappaport
Todd Donahue	Alberto Sangalang
Blair Hamilton	Barbara Scheuneman
Kendra Huynh Williams	Doreen Szor
Ian Montalbo	Carla Veldcamp
Christine Nijimbere	

River East/Transcona Group

Frank Fiorentino	Judy Posthumus
Visaka Jackson	Brian Reinisch
Michael Josefchuk	Brenda Paley
Darlene Karp	Brenda Rocchio
Nina Kostiuk	Sandra Sanders
Norman Meade	Peter Veenendaal
Sheron Miller	Ashley-Dawn (AD) Zallack
Maureen Peniuk	

River Heights/Fort Garry Group

Elissa-Marie Bittner	Natalie LoVetri
Barbara Bourier-Lacroix	Melanie Matte
Tom Dickie	Lana McGimpsey
Navsharn Dhaliwal	Amy Passmore
Kevin Fontaine	Amanda Rozyk
Alison Hamilton	Karen Velthuys
Lorraine Klymko	Tim Wildman
Meryle Lewis	

Seven Oaks/Inkster Group

Rawlee (Satch) Bachoo	Len Offrowich
Margaret Banasiak	Terry Rear
Susan Burko	John Sawchuk
Elsa Garcia	Diana Szymanski
Louise Evaschesen	Jagdeep Toor
Joanna Flores	Jacquie Tucker
Elizabeth Kopp	Ginny Witkowski-Sudlow
Jocelyn Lantin	

St. Boniface/St. Vital Group

Kristin Albo-Berkowits	Kitty Leong
Mona Audet	Keith Lowe
Helene Beauchemin	Rose Marsden
Bathelemy Bolivar	Elsie Nabroski
Tim Church	Gisele Toupin
Laura Enns	John Wylie
Grace Gillis	Derek Yakielashek
Jim Kolson	

St. James-Assiniboia/Assiniboine South Group

Sangeet Bhatia	Ken Howell
Dayna Blackthorn	Angela Keno
Brian Clerihew	Diane Longeran
Dennie Cormack	Lawrence Klepacheck
Danita Dubinsky Aziza	Georgette Martin-Couture
David Friesen	Christine Portelance
Wendy French	

WRHA Board Liaisons (non-voting members of Groups)

Elaine Bishop and Joan Dawkins	Downtown/Point Douglas
Sheila Carter and Doris Koop	River East/Transcona
Bruce Thompson and Jeff Cook	River Heights/Fort Garry
Stuart Greenfield	Seven Oaks/Inkster
Josée Lemoine and Rob Santos	St. Boniface/St. Vital
Joanne Biggs and Jean Friesen	St. James-Assiniboia/Assiniboine South

Community Area Directors/Staff (non-voting members of Groups)

Louis Sorin	Downtown/Point Douglas
Debra Vanance	River East/Transcona
Dana Rudy	River Heights/Fort Garry
Carmen Hemmersbach	Seven Oaks/Inkster
Susan Stratford/Monique Constant	St. Boniface/St. Vital
Marlene Stern	St. Boniface/St. Vital
Pat Younger	St. James-Assiniboia/Assiniboine South
Kellie O'Rourke	St. James-Assiniboia/Assiniboine South

Support Staff for Groups

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