

Appendix D - Community Engagement

Populations and Questions

Manitoulin Health Centre engaged the community in a comprehensive consultation process, to obtain input concerning key questions relating to strategic planning, and to invite reflection and comments on the draft Vision Statement and Strategic Directions. For the purpose of this consultation, four different population groups were defined: Physicians and Health Service Organizations, the General Public, Employees, and Managers and Board Members.

Questions were developed and assigned to each group. Many of the questions were asked of all populations, with the goal of the consultation process to identify commonalities in views across all populations. The chart included on the following page provides a summary of the questions asked of each of the different groups, with column headings identified as follows: ORG - Physicians and Health Service Organizations; PUB - General Public; EMP - Employees; and BOA - Managers and Board Members.

Figure D-1: Summary of Questions by Respondent Group

Question	ORG	PUB	EMP	BOA
What MHC services do you value most and why?	x	x		
The Board of Directors of MHC believes that Manitoulin Island residents are served best by MHC having two sites. Please rate your level of agreement with this statement. (5-pt Likert scale)	x	x	x	x
What do you identify as MHC's greatest strengths?	x	x	x	x
What do you identify as MHC's greatest weaknesses?	x	x	x	x
What are the greatest opportunities for MHC programs/services over next three years?				x
What are the greatest challenges/threats for MHC programs/services over next three years?				x
What existing programs/services should be expanded, if any, and why?	x	x	x	x
What existing programs/services should be discontinued, if any, and why?	x	x	x	x
What new programs/services should be established, if any, and why?	x	x	x	x
How would you describe MHC as a partner?	x			
What recommendations would you give to MHC as a partner ?	x			
What opportunities do you see for collaboration with MHC?	x			
What factors are affecting your health?		x		
If MHC were to do only one thing differently, what would you suggest it be, in order to make the most positive difference to the people served?	x	x	x	x

Question	ORG	PUB	EMP	BOA
An organization's Vision Statement is meant to describe to the public, its employees and other organizations what it is striving to become. MHC has crafted one that says, 'Putting patients first, as we lead within our health care network.' We would like your feedback concerning this potential Vision Statement. a) Do you understand what this Vision Statement means? b) Do you think that this a good Vision Statement for MHC? If not, why?	x	x	x	x
Strategic Directions identify broad categories of actions that an organization will take to move toward achieving its vision. MHC has identified three potential Strategic Directions: <ul style="list-style-type: none"> • Enhance our patients' experience. • Live our leadership role. • Foster an environment that supports knowledgeable and engaged staff. Do you think that these are good Strategic Directions for MHC to adopt? If not, why?	x	x	x	X

Methodology

Certain Health Service Organizations were invited to participate in a personal telephone interview with the consultant. If they were unavailable to participate in an interview or preferred not to, they were provided a link to an electronic version of the same survey that they could complete anonymously, online. The following organizations were invited to provide input in this way:

- Assiginack Family Health Team
- Espanola Regional Hospital and Health Centre
- Gore Bay Medical Group
- Health Sciences North
- Manitoulin Centennial Manor
- Manitoulin Lodge
- North East CCAC
- North East LHIN
- Wikwemikong Nursing Home

An initial introduction to the process and invitation to participate was sent out by the Chief Executive Officer, and the consultant followed up with phone calls to schedule the interviews. Two follow-up phone calls were made to organizations that were unavailable during the first attempt to call, in an effort to engage everyone. Telephone interviews were conducted during April, 2013.

The following groups were invited to attend individual two-hour facilitated sessions to review the same questions as the Health Service Organizations noted above:

- North East Manitoulin Family Health Team

- Manitoulin Central Family Health Team
- First Nations Health Services, hosted by United Chiefs and Councils of Mnidoo Mnising, including: Noojmowin Teg Health Centre, Mnaamodzawin Health Centre, Wikwemikong Health Centre, and M'Chgeeng Health Centre

These facilitated sessions occurred on April 10 and 11, 2013.

All Physicians were invited by email to share their views, either by completing an online or paper survey, or by participating along with their Family Health Team or Medical Group during a telephone interview or facilitated session.

Representatives from eight different municipalities were also invited to complete the same survey, either on-line or on paper.

One hundred and fifty-six employees were invited to complete a web-based survey, in order to provide their input. Twelve Managers and eight Board Members were also invited to complete a separate web-based survey.

The public was invited to provide their input by completing online surveys or paper surveys, or by attending one of two evening town hall style sessions, where a facilitator led them through the questions noted above. Advertisements appeared in *The Expositor* on April 3 and 10, 2013, inviting the public to complete the survey online (including survey links), request paper copy or attend a town hall style meeting. The same advertisement appeared in *The Recorder* on March 29 and April 5, 2013. One town hall session was held in Little Current, on April 10, 2013 and one session was held in Mindemoya on the next evening. Reporters from both newspapers attended the town hall meetings and subsequently published articles about the strategic planning process. Links to the online survey were included in these articles, providing the public with another invitation to share their views.

Respondent Characteristics

As a result of the online surveys, town hall sessions, telephone surveys, and individual meetings, input was obtained from various stakeholder groups as follows:

- General Public - 17
- Physicians and Health Care Organizations - 13
- Employees - 33
- Managers and Board Members - 13

Men and women were equally represented in the survey responses received from the General Public. More than 90% of respondents were over the age of 50, and almost half of this group was over the age of 65.

Two physicians provided input through the stakeholder surveys. In addition, interviews were completed with the Executive Directors of three Manitoulin Island Family Health Teams, several First Nations Health Service Organizations, a Long Term Care Home, a neighbouring hospital, and Community Care Access Centre.

Four municipal representatives shared their views.

Thirty-three employees, four managers, and eight Board Members provided input as well.

The remainder of this Appendix provides a summary of the feedback received from this consultation, presented by question and by respondent group where applicable. The purpose of this document is to identify the themes or commonalities in the opinions expressed by respondents. A 28-page supplementary document is available upon request, detailing all comments as submitted.

Responses

What MHC services do you value most and why?

The General Public, and Physicians and Health Service Organizations were asked to identify the services that they value most.

Both of these groups noted most often the services offered by the Emergency Department. Members of the General Public cited next most frequently Laboratory and Diagnostic Imaging as services that they value highly.

The General Public values physician resources and the quality of medical care - both as provided by local family physicians and visiting specialists. Physicians and Health Services Organizations also value access to visiting specialists and televideoconferencing technology.

Several of the responses from the General Public noted their appreciation for having an MHC site close to them.

The Board of Directors of MHC believes that Manitoulin Island residents are served best by MHC having two sites. Please rate your level of agreement with this statement.

Overall, four out of every five people surveyed support the statement that MHC's two-site configuration best serves the needs of local residents. This view is held most strongly by Managers and Board Members and least strongly by Physicians and Health Service Organizations.

Figure D-2: Level of Agreement with Two-Site Configuration

Number

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
General Public	1	0	2	3	9
Physicians and Health Service Organizations	0	2	1	3	6
Employees	1	2	5	9	16
Managers and Board Members	0	0	1	2	10
Total	2	4	9	17	41

Percentage

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
General Public	7%	0%	13%	20%	60%
Physicians and Health Service Organizations	0%	17%	8%	25%	50%
Employees	3%	6%	15%	27%	48%
Managers and Board Members	0%	0%	8%	15%	77%
Total	3%	5%	12%	23%	56%

What do you identify as MHC's greatest strengths?

All groups identified that staff were one of MHC's greatest strengths, with the Employee group echoing this most frequently. All groups with the exception of Employees also noted that physicians are a significant strength. Staff and physicians were described as caring, friendly, compassionate and hard-working.

The General Public identified MHC's Emergency Department, Diagnostic Imaging and Laboratory Services as strengths, whereas Employees valued Obstetrics, the Operating Room and Specialist Visits.

Managers and Board Members noted that that MHC's connection with the community, and the community's support for the organization is a strength, as is MHC's leadership and willingness to collaborate with others.

There were no shared themes in the input provided by Physicians and Health Service Organizations, with responses covering the gamut of services and attributes from willing partnership to supportive administration, specific services (e.g. Emergency Department and visiting specialists), caring staff and skilled physicians.

What do you identify as MHC's greatest weaknesses?

The General Public individually identified several weaknesses, only three of which were shared by more than one respondent: a desire for longer hours of Laboratory Service in Mindemoya, a desire for obstetrics in Mindemoya, and comments that improvements are needed in demonstrating respect for clients and general bedside manner.

All groups except for the General Public identified the reality of operating two sites as a weakness. Physicians and Health Service Organizations spoke in terms of challenges to resourcing, continuity of services, inefficiencies (inabilities to achieve economies of scale), and lack of standardization. Managers and Board Members noted cultural challenges, perceptions that one site is superior to the other, economic challenges, duplication of equipment and baseline staffing, lack of cooperation in favour of competition, and community divisions. Employees commented on the disunity, competition, and lack of understanding between the two sites, and the overall lack of cohesion. Several employees commented that the position of the Mindemoya site manager is missed.

Concerns were expressed by some of the First Nations provider groups in relation to lack of representation of First Nations people on the Board, inactivity of the Anishinabe Mekwaatawgsajig Council, and lack of First Nations volunteers/translators.

Employees strongly identified communication as a weakness within the organization, on many different levels - between staff and management, between sites, between departments, and with respect to the clarity and timeliness of messaging. Some employees noted their perception that they are not listened to.

Managers and Board Members articulated a second shared theme relating to staff education - the amount of resources allocated to orientation, training and staff development and challenges of remaining current within budget.

What are the greatest opportunities for MHC programs/services over next three years?

This question was asked of Managers and Board Members only, with two shared themes emerging from the comments provided.

The first theme encourages MHC to continue to expand services locally, so that people can avoid travelling to Sudbury. Suggestions specifically targeted increasing the number and type of visiting specialists, expanding Cardiology Services to include pacemaker and defibrillator checks, expanding services for Dialysis, Chemotherapy and Mental Health, supporting eye surgery, and developing programs for surgical and stroke rehabilitation.

The second opportunity identified that MHC should work with other organizations to coordinate existing services and to develop new ones. The need for palliative care in a hospice setting was specifically identified in response to this survey question and others.

What are the greatest challenges/threats for MHC programs/services over next three years?

This question was asked of Managers and Board Members only, with the resounding, shared response that funding cutbacks and funding shortfalls are the greatest challenge to MHC. Secondary themes noted that changing population demographics, and employee and physician recruitment and retention would also challenge the organization.

What existing programs/services should be expanded, if any, and why?

Responses from all groups focused on a desire to expand outpatient services, identifying Physiotherapy most frequently, followed by Chemotherapy. From there, the list grew to include: Dialysis, Laboratory Services (notably in Mindemoya), defibrillator checks, and Ultrasound.

In response to this question and the one following later in the survey which asks about new programs, several respondents from all categories identify the desire for MHC to add CT services to Diagnostic Imaging.

The General Public also noted a desire for more patient education with a focus on healthy lifestyle choices and wellness.

What existing programs/services should be discontinued, if any, and why?

The General Public did not identify any programs or services that should be discontinued.

Managers and Board Members encouraged MHC to consider discontinuing services and programmes that are not funded. However, they acknowledge that this may result in hardships to people who may be obliged to pay for or travel to services that are no longer available close to home.

Physicians and Health Service Organizations specifically identified that PSA and celiac testing should be delisted or charged for, and that blood typing should not be done for 'silly reasons' (e.g. blood type diet). They encouraged MHC to work with other health service organizations to put in place the missing pieces of the puzzle to reduce/eliminate patient days relating to ALC.

What new programs/services should be established, if any, and why?

As mentioned previously, there is a desire among some respondents in all categories for MHC to establish a CT service on Manitoulin Island. No other suggestions were shared by all groups; however, some themes were shared within each group.

Physicians and Health Service Organizations encouraged MHC to work with other organizations to develop transportation for local residents to access health services both on- and off-Island. They also believe that the population's health would benefit if mammography services could be provided locally.

Managers and Board Members suggested that MHC should repurpose some of the existing inpatient beds for restorative care, palliative care or hospice.

There were no shared responses in the comments received from the General Public. Individual suggestions included:

- Provide facilities and structures to support people in remaining healthy - indoor and outdoor exercise facilities, and leisure centres.
- Increase the availability of respite care and assisted living, and provide these services in settings that are more attractive to the public.
- Be ready to serve the needs of aging baby boomers.

How would you describe MHC as a partner?

This question was only asked of Physicians and Health Service Organizations and was responded to in very positive terms. Overall, MHC is seen as a good partner and is described as open, approachable, responsive, collaborative, trustworthy, and a good communicator.

What recommendations would you give to MHC as a partner?

This question was only asked of Physicians and Health Service Organizations and was answered with a shared theme framed in generic terms: Partner with others to achieve shared goals on behalf of the people of Manitoulin Island. Build on existing relationships.

What opportunities do you see for collaboration with MHC?

This question was only asked of Physicians and Health Service Organizations. Many suggestions were offered, but voiced by only one respondent. There were only two shared comments. One suggested that there may be opportunities to collaboratively schedule staff in conjunction with other organizations to create meaningful part-time or full-time work, where one organization cannot offer it on their own. The other suggestion identified the need for MHC to work in collaboration with others organizations to develop and coordinate mental health and addictions services.

What factors are affecting your health?

This question was asked of the General Public only. Of the people who did respond to the question, most indicated that the normal aging process is the biggest factor affecting their health. Individuals also referred to specific factors such as: smoking, poor diet, diabetes, cancer, hypertension and joint replacement.

If MHC were to do only one thing differently, what would you suggest it be, in order to make the most positive difference to the people served?

There was little commonality in the responses provided by the General Public, with at least two people mentioning that residents would be best-served if MHC were to focus on ensuring better follow up after their hospital stay or visit; giving patients more information on health, treatments, and medications; and treating people respectfully.

Physicians and Health Service Organizations identified three areas for MHC to focus on:

- Ensure good flow of patient information to community physicians and primary care providers
- Work with others to identify patient-centred approaches to inter-agency process improvement
- Engage with the community and health service partners to identify health needs, then plan and implement solutions

Two people identified that it would be beneficial to rebuild a single site hospital, with an expanded range of services.

There was little consistency in the responses provided by Employees, with only two suggestions shared by more than one person. One of these recommended improving the Physiotherapy Department, both in relation to its equipment and overall size. The second recommended focusing on changes to ensure more consistency, mutual support and accountability among staff..

Comments offered by Managers and Board Members did not demonstrate great consistency either, but can be rolled up to provide recommendations to improve the culture between the two sites and reinforce, support and/or improve staff and inter-departmental processes in order to improve the patients' experience.

An organization's Vision Statement is meant to describe to the public, its employees and other organizations what it is striving to become. MHC has crafted one that says, 'Putting patients first, as we lead within our health care network.' We would like your feedback concerning this potential Vision Statement.

a) Do you understand what this Vision Statement means?

More than 95% of the survey respondents understand what the proposed Vision Statement means, indicating that this statement is clear and easy to interpret.

Figure D-3: Level of Understanding of Proposed Vision Statement

	Number		Percentage	
	Yes	No	Yes	No
General Public	13	1	93%	7%
Physicians and Health Service Organizations	11	0	100%	0%
Employees	29	1	97%	3%
Managers and Board Members	13	0	100%	0%
Total	66	2	97%	3%

b) Do you think that this a good Vision Statement for MHC? If not, why?

Over 80% of respondents overall believe that the Vision Statement is a good one for MHC to adopt. However, the General Public was least supportive of the Vision Statement, with only half of them supporting this statement.

Figure D-4: Level of Support for Proposed Vision Statement

	Number		Percentage	
	Yes	No	Yes	No
General Public	6	6	50%	50%
Physicians and Health Service Organizations	10	1	91%	9%
Employees	26	3	90%	10%
Managers and Board Members	11	2	85%	15%
Total	53	12	82%	18%

Despite the fact that people have overwhelmingly indicated (in the first part of this question) that they understand the statement, they identified through their comments lack of clarity about what is meant by 'leading' and what is meant by 'network'. It was suggested by several respondents that a better phrase would be 'lead and collaborate' within the network. One person commented that the statement was too limiting, while others commented that it was too vague.

Several people commented that it will be important to communicate the vision to everyone within the organization, and to work with all staff so that they are aware of what specific changes are required and are committed to achieving the vision. They cautioned that ongoing monitoring is required to ensure that everyone is acting in accordance with the commitment to put patients first.

Strategic Directions identify broad categories of actions that an organization will take to move toward achieving its vision. MHC has identified three potential Strategic Directions:

- **Enhance our patients' experience.**
- **Live our leadership role.**
- **Foster an environment that supports knowledgeable and engaged staff.**

Do you think that these are good Strategic Directions for MHC to adopt? If not, why?

Over 90% of the respondents support the three draft Strategic Directions, believing that they are appropriate for MHC to adopt. One person said, 'Sounds great! I want to work there.'

Figure D-5: Level of Support for Proposed Strategic Directions

	Number		Percentage	
	Yes	No	Yes	No
General Public	12	2	86%	14%
Physicians and Health Service Organizations	10	1	91%	9%
Employees	29	2	94%	6%
Managers and Board Members	13	0	100%	0%
Total	64	5	93%	7%

Several respondents offered suggestions that will be helpful in implementing the Strategic Directions:

- It will be important to develop a common understanding among all staff of the commitment to patients and the things that will be done to enhance their experiences.
- Staff training or retraining will be a significant component in support of 'enhancing our patients' experience'.
- Objective feedback will be needed from patients to evaluate their experience at the hospital.