

2018-2022 Communication & Community Engagement Plan



Dryden Regional Health Centre

Since its incorporation in 1952, the Dryden Regional Health Centre (DRHC) has provided professional, compassionate, safe and high quality patient health care to the community of Dryden and surrounding area.

The Dryden Regional Health Centre is an integrated small, rural and northern health service organization located in Northwestern Ontario and part of the North West Local Health Integration Network (LHIN 14). Our service area includes all residents within Dryden and the surrounding area, including the Townships of Machin and Ignace as well as the First Nation communities of Migisi Sahgaigan First Nation (Eagle Lake), Wabigoon Lake Ojibway First Nation and Wabauskang First Nation.

We support the work of 375 staff, Physicians, and volunteers with an annual operating budget over \$33 million. The DRHC is a progressive and visionary organization that has had great success in implementing innovative programs and services to bring quality care closer to home for its service area.

The DRHC provides governance and management for the Dryden Area Family Health Team supporting primary care for some 14, 000 people. Services are delivered by a multidisciplinary team of family Physicians, Nurse practitioners, Nurses and allied health personnel.

As an acute care health centre, the DRHC provides a full range of inpatient services including medical, surgical, obstetrical, chronic, rehabilitative and palliative care. Ambulatory services include emergency, surgical day care, specialty clinics, and oncology services and provides home and community rehabilitative services supported by an excellent team of rehabilitation professionals.

The DRHC supports a busy visiting specialist program for orthopaedic, rheumatology, plastic surgery, endoscopy, paediatrics, otolaryngology and obstetrical gynaecology services. Many of these specialties also provide elective surgical procedures, minimizing the need for patient travel and bringing specialty care closer to home. These services are complemented and supplemented by a comprehensive telemedicine network. Diagnostic services include a CT Scan, x-ray, ultrasound, and fully accredited, ISO certified laboratory services.

The DRHC also delivers a wide range of mental health and addictions services including: counselling, case management, crisis response and residential non-medical withdrawal and addictions treatment.

In October 2017, the DRHC launched it 2018-2022 strategic planning process, and as a first step, featured opportunities to engage with stakeholders, partners and communities within our catchment area to identify the major challenges faced in the delivery of health care services.

To help address these challenges, the DRHC Board of Directors recommended key priorities for the 2018-2022 strategic plan that realize and sustain organizational successes and support the growth and development of new initiatives designed to improve the patient experience and support the ongoing delivery of safe, innovative, high quality healthcare.

Our Purpose



Our Values

Dryden Regional Health Centre is committed to providing a safe, caring and inclusive environment based on our five core values:

RESPECT

having the regard for the feelings, wishes and rights of others

HUMILITY

having a modest opinion of one's own importance; not believing you are superior to others

INTEGRITY

being honest, fair and doing the right thing even when no one is looking

ACCOUNTABILITY

taking ownership and responsibility for one's actions and decisions

COMPASSION

committed to understanding an individual's circumstance with a desire to help

Our Priorities

Our Patients & Families

- Integrate mental health across all services
- Work with specific groups of patients and families to understand and improve their experience across the continuum of care
- Advance evidencebased care, quality, and safety

Our People

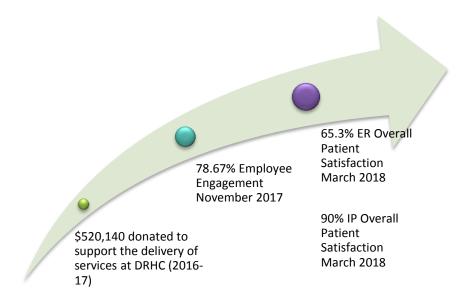
- Strengthen leadership capability
- Continue to build a respectful, inclusive, safe, and healthy culture
- Enhance the wellbeing of our people

Our Partners

- Engage with Indigenous peoples to develop culturally safe and appropriate care to better meet their health needs
- Work with our local, district, and regional partners to make high quality care more accessible and better coordinated

Our Reach:





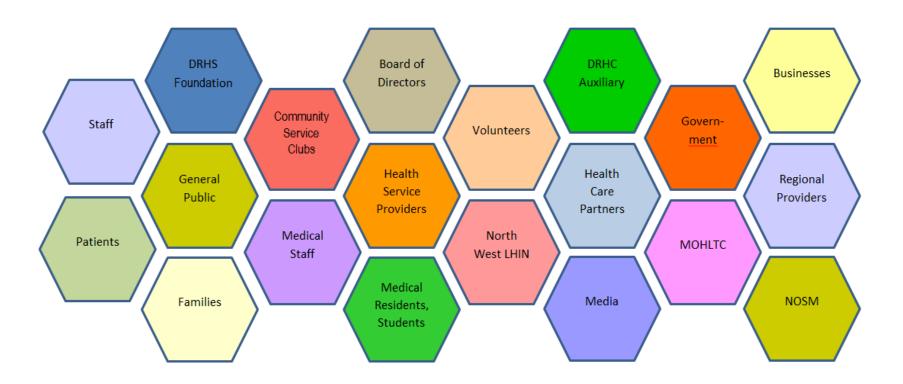
Scope

This plan outlines the anticipated communications and engagement activities of the Dryden Regional Health Centre for the period June 2018 through to March 31 2022, coinciding with the release of the organizational Strategic Plan "Care That Works".

Our Impact:

The 2018-2022 Communication and Community Engagement Plan is meant to be fluent; all identified activities will be refined, updated and revised for continuous efficacy.

Audiences/Stakeholders



Communications and Community Engagement Objectives

Support the Strategy

Embrace & Foster Relationships

Protect the 'Brand'

A. Support the Corporate Strategy

The DRHC is committed to providing honest, timely, and straightforward communications through clear and concise information to our patients and their families, our people, our partners, and our community,

To support the Health Centre's corporate goals, this Plan aims to ensure that members of the Board, staff, physicians, and volunteers are well informed about the organization's strengths, opportunities for improvement, and strategic directions to enable them to speak knowledgably and to confidently advocate with patients, families and the community at large.

The Dryden Regional Health Centre is dedicated to effective internal and external communications that will:

- demonstrate the organization's commitment to accountability and transparency;
- clearly communicate and further the initiatives and strategic directions of the DRHC;
- support and embrace effective two-way communications;
- enhance patient and employee relations by motivating and engaging employees; and
- maintain and foster the organization's reputation in the community.

"If communication is the transfer of meaning, then for successful communication to occur, you should understand something just as I do."



James O'Rourke, Effective Communication

1. Promote **the organizational strategy**. Ongoing efforts will occur at all levels of the organization to provide continual education, provide updates, and reinforce the four-year (2018-2022) organizational strategic plan.

STRATEGIES:

- i. Publication and release of the 2018-2022 Strategic Plan "Care That Works" including presentation to internal and external partners and stakeholders (June December 2018)
- ii. Standardized logos, administrative templates (letterhead, agendas etc.) and presentation templates (PowerPoint)
- iii. Huddle Boards alignment with new focus areas, goals and measures
- iv. Corporate Publications Annual Report, program/service brochures and posters, promotional banners, signage
- v. Annual progress report to community stakeholders on the advancement of strategic initiatives
- vi. Internal engagement general staff meetings, CEO Chat 'n Chew, activities designed to support and maintain an engaged, respectful, safe and healthy culture (Workplace of Choice, Staff 4 Staff etc.)
- 2. Extend the organizational reach using digital media.

a. Corporate website

Website traffic runs at a modest average of 964 people who engaged with our Page on a weekly basis. DRHC's website underwent a design refresh in the fall of 2017, however with the organization's new purpose statement, strategic plan, and changing communication demands, ongoing updates will be important.

Management of the site will be maintained with support from the Information Management/Information Technology team, Director, Stakeholder Engagement & Relations, Manager, Recruitment and Fundraising, and the VP Support Services/Human Resources. The site will continue to evolve with new and improved content.

In order to meet the needs of today's consumers, the site will be consistently monitored and enhanced to improve flow and usability.

STRATEGIES:

i. Continue to explore opportunities to maximize the DRHC website to its fullest potential, recognizing that it is an increasingly important source of information for both internal and external communities.

- ii. Continue quarterly content review/updates to keep the DRHC website fresh, including updates on key projects and issues, summaries of Board Meetings, news releases, photos, newsletters, etc.
- iii. Explore opportunities to host a secure portal for Board of Directors.
- iv. Explore opportunity to integrate independent websites such as the DRHC, Dryden Area Family Health Team, Crisis Response Services, and Dryden Regional Mental Health & Addiction Services
- v. Ensure compliance with the Accessibility Standard for Information and Communications Standards through the Accessibility for Ontarians with Disabilities Act.

b. The Pulse (DRHC Intranet)

The internal website is used as a portal for organizational communications. Announcements are regularly communicated via the home page.

STRATEGIES:

i. Future redesign will ensure the site meets the needs of the organizational team and aligns with the organizational strategic initiatives, values, and purpose. Enhancements will make the site more intuitive and user-friendly driving more staff to review consistent communications through this medium.

c. Social Media - Facebook, Twitter

Rapid information delivery has moved us beyond traditional media to a vastly expanding social media reality. Guided by an internal social media policy, the open and transparent communication creates and maintains our presence on Facebook, LinkedIn, Instagram, Twitter, and YouTube. Pages are regularly updated with timely content and photographs related to health centre activities, services, disruptions (e.g. parking closure), provincially-recognized health topics, and wellness content. Our current Facebook reach is strong with approximately 1,082 followers (~1094 page likes per month).

d. Video - Talk with local Doc, CEO messaging, Board of Directors meetings

Video media will be used to reinforce the work of the Health Centre; supporting staff recognition programs and volunteer efforts have been deemed priorities. Additional use of video content will be explored in the coming year as data has proven this medium to be a powerful social media tool.

STRATEGIES:

i. Explore opportunity to video-record and broadcast Board of Directors and Health Services Foundation regular meetings on the organization's intranet (internal audience)

- ii. Design and implement a Newsfeed feature on the home page of The Pulse (DRHC Intranet) to provide current events in the organization and in the healthcare sector across the district, regionally and provincially
- iii. Explore opportunity for podcasted messages, blogs, video messaging from the CEO for organizational broadcast (DRHC TV CEO newscasts)

3. Optimize Internal Organizational Communications

STRATEGIES:

- i. Elevation of Vocera for organization-wide dissemination of media releases, memos, etc. using text messaging
- ii. Development and implementation of a distinct communication email address to highlight and draw attention to organizational communications (i.e. DRHC NEWS@drhc.on.ca)
- Optimize use of the digital donor display board in the patient waiting area and in the cafeteria for greater public messaging
- Review communications and advertising agreements/contracts to optimize opportunity to independently create and manage content.



B. Embrace and Foster Partnerships

Support the Strategy

Embrace & Foster Relationships

Protect the 'Brand'

The Dryden Regional Health Centre is committed to on-going community engagement strategies that will:

- inform, educate, consult, involve and empower stakeholders in planning and decision-making processes to improve the health care system
- collaborate with community partners, staff, management and volunteers to design health care services that are family and patient-centred and reflective of the needs of the community
- support and enhance the organization's commitment to transparency and accountability

The DRHC is dedicated to a culture of participation with programs, services, and institutions to support openness and learning through ongoing public engagement.

The DRHC respects and embraces the diversity of people, ideas and information throughout its catchment area and will continue to encourage input into the careful planning and development of health care services to meet the needs of the community.

IAP2'S PUBLIC PARTICIPATION SPECTRUM



The VAP2 Federation has developed the Spectrum to help groups define the public's role in any public participation process. The VAP2 Spectrum is quickly becoming an international standard.

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

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STRATEGIES:

a. Internally (Employees, Medical Staff, Volunteers)

Analyses of the DRHC Pulse Employee Experience Survey results from October 2017 (Appendix C) show that information is gleaned most significantly by email, Huddles and face-to-face meetings (Huddles, staff meetings etc.). Internal communication and community engagement activities will be focused on maximizing these medium to support and encourage an engaged environment.

- i. Email designated communication email address to draw attention to new information
- ii. Huddle Boards and Huddles
- iii. General staff meetings
- iv. CEO Chat 'n Chew, blogs, podcasts
- v. The Pulse (Intranet) optimize utilization
- vi. Patient Stories written, video etc.
- vii. DRHC TV
- viii. Rounding for Outcomes

b. Public

- i. Public Forums/Report Back to the communities
- ii. Initiate proactive and regular dialogue with the broader public about the operations of the hospital and future directions.
- iii. Seek forums such as service clubs and other organizations to meet with the public
- iv. Community forums at least once per year. If significant changes are anticipated, undertake a more extensive community engagement process to inform planning for the delivery of services that meet the specific health care needs of the community.
- v. Provide an Annual Report to the Community to profile the activities and performance of DRHC.

c. Patients and Families

- i. Patient Experience Groups
 - Become more attuned to the experiences of our clients, patients, and their families by working with specific groups of individuals and families to understand and improve their experience across the continuum of care.

- Work with the North West LHIN as early adopters for patient experience groups.
- Work with the North West LHIN where required to develop a patient experience evaluation framework.

Patient and Family Advisory Council

The Patient and Family Advisory Council is an opportunity for patients and families to collaborate as partners in care and help shape the patient experience at the DRHC. Their experience, insights, expertise and perspectives are invaluable to improving quality, safety and the delivery of compassionate care.

- Facilitate the continuance of patient and family member input into organizational policies, program design and practices that affect the patient experience.
- Forge new collaborations with existing administrative Committee structures to embed the patient voice.
- Continue recruitment exercises to ensure patient/family member representation across the continuum of care incorporating perspectives and collaborations pertinent to the delivery of care.
- Continue to embrace, foster and promote the culture and philosophies of patient and family centred care.

d. Indigenous Populations

- i. Welcome, support and encourage engagement with Indigenous peoples to advance strategic initiatives and enhance culturally safe and appropriate care.
- ii. Respect principles of Indigenous self-determination and the traditions and languages of Indigenous peoples.
- iii. Further explore opportunities to profile local, Indigenous art providing a welcoming environment.
- iv. Identify areas and opportunities for signage in the traditional languages of our areas.

e. Partners

- i. Continue to work with our local, district, and regional partners to make high quality care more accessible and better coordinated.
- ii. Maintain exceptional relationships between DRHC and the Northern Ontario School of Medicine, the DRHC Auxiliary and the Dryden Regional Health Services Foundation.
- iii. Ongoing recognition through donor boards.

f. Communications in French

- i. Continue to identify French-speaking staff and volunteers who are able to work with patients and families in French.
- ii. Employ the translation services of Interpreters when necessary and script translations from L'Accueil Francophone du Thunder Bay.
- iii. Continue collaborations with Le Réseau du mieux-être francophone du Nord de l'Ontario to advance access to culturally safe health care services where possible.
- iv. Continue to comply with mandatory French Language Services planning and reporting.

g. Government

- i. Ensure opportunity to meet with the local MPP semi-annually or as needed to advocate for advancements in health care, and highlight service delivery successes and challenges.
- ii. Coordinate presentations by the DRHC Board Chair and CEO to municipal councils at least once a year.

2. Media Relations

We recognize that timely and accurate media attention can support accountability, transparency, favourable reputation, recruitment and retention, employee and community engagement, reward and recognition, and fundraising and funding.

Every effort is made to communicate with the media in a pro-active rather than a reactive manner.

Media coverage is reported to the leadership team, Board and other parties on a bi-annual basis or as required.

STRATEGIES

- i. Execute a proactive media relations strategy that creates and sustains a positive DRHC, its quality of care, medical and staff expertise and technological advancements.
- ii. Embrace opportunity to feature articles to local print media of good news stories, focusing on front-line staff and physicians.

- iii. Distribute regular news releases on new initiatives that enhance the quality and safety of patient care. Focus on profiling the organization's unique strengths.
- iv. Work with physicians and health care professionals to participate in media interviews when local media are looking for experts on a range of topics.
- v. Utilize the media as an efficient way to educate and inform the public.
- vi. Ensure positive relationships are maintained with the local media by continuing to provide timely responses to requests for information.
- vii. Utilize Board Meetings as an opportunity to share information with the media. Provide media with access to spokespeople following the meeting.



C. Protect the Health Centre Brand

Support the Strategy

Embrace & Foster Relationships

Protect the Brand

The Health Centre is complex and constantly growing and evolving. Communicating with a unified appearance in all formats will help our patients, staff, Board, physicians and community better understand who we are, the services we offer and the values we share.

Communications will be designed to:

- Reinforce the organization's image; and
- Increase the organization's reputation within the health care sector and within the community.

STRATEGIES:

- 1. Corporate standards have been designed and implemented throughout the organization. Ongoing implementation and sustaining of the brand will take place to ensure a professional image.
- 2. Provide assistance to departments in producing materials that will be distributed externally or posted in public areas to ensure brand consistency and a professional look for printed information.
- 3. Ensure consistent use of a strong brand that supports the organization's new purpose statement, values, and strategic direction.

Overarching Key Messages

The Dryden Regional Health Centre is committed to:

- accountability and transparency;
- the delivery of quality rural health care with patients and clients at the centre of care;
- services that demonstrate and uphold the organizational values of respect, accountability, humility, compassion and integrity;
- collaboration for integrated systems of care ensuring the right care is provided at the right time from the right provider;
- adopting system change as necessary recognizing an ever-evolving health care environment;
- · careful planning for good decisions to meet changing demands;
- responsibility for the use of the public's money.

Crisis/Emergency Communications

Without careful communication, crises have the potential to damage the organization's reputation, as well as the reputations of our employees, stakeholders, or services.

In crisis or emergent situations, we are more likely to be unprepared, have insufficient information, and be under time pressures and more intense scrutiny outside the organization.

Addressing a crisis:

- Get information determine the real problem in the short term and the long term
- Put people in place assemble an effective team with the required expertise
- Work in alignment with the organizational goals, values and Standards of Behaviour and Emergency Disaster Planning
- Strategize highlight ways to address and resolve the problem, and how/when/what to communicate in the short-term and in the long-term
- Communicate
 - Adapt messaging to the appropriate audience
 - Explain the organization's position

- o Disseminate clear, factual information to inform the audience in a timely manner
- Provide control over what is being said and rely on limited spokespersons who are knowledgeable, authoritative, responsive, patient, and good humoured
- Manage expectations know what to expect; deliver on what is promised.

Monitoring / Evaluation

For *internal* audiences, feedback to leaders, questions in forums and meetings, attendance at meetings and special events, responses to the engagement surveys and intranet traffic help provide an indication of the effectiveness and receptiveness of corporate messaging.

Measurement of *external* communication effectiveness can be gauged by media coverage (positive, negative, neutral), participation in Health Centre events, letters to the editor, survey responses, social media followers, complaints related to communications, website traffic, donation influence and volunteer recruitment. Informal feedback in meetings with elected and other officials on their perception of the Health Centre and its programs also provides a glimpse into the usefulness of outreach efforts.

On a continuing basis, news sources including newspapers, radio stations, social media and the Internet will be monitored for mention of the DRHC or matters related to the work of the DRHC in order to:

- assess the effectiveness of DRHC communications and modify where necessary
- allow quick response to queries or to seamlessly exchange information where required
- illustrate community, regional and provincial interest
- assist in managing the reputation of the DRHC.

Mentions of the DRHC collected through this monitoring will be summarized and reported back to the Governance Committee of the Board of Directors twice yearly.

Roles

President and Chief Executive Officer

- Primary spokesperson for the organization;
- Participate in two-way communication with stakeholders gathering input and feedback for goal-setting, strategic plan development and operational guidance; and
- Ensure that the overall business strategy and associated corporate messages, behaviors and actions are constantly synchronized with DRHC's senior leaders, Directors and Managers to reinforce a unified team.
- Build and maintain positive, effective relationships with community, district and regional stakeholders.

Chair of the Board of Directors (in addition to those identified for the Board of Directors)

Primary spokesperson for the Board of Directors;

Board of Directors (DRHC and Dryden Regional Health Services Foundation)

- Participate in two-way communication with stakeholders gathering input and feedback, assisting in goal-setting, and strategic plan development;
- Act as an ambassador and promoter for Dryden Regional Health Centre;
- Enhance the organization's public image by sharing the organization's purpose, accomplishments and goals and promoting the value of the organization to the community;
- Support and reinforce the goals of the DRHC 2018-2022 Strategic Plan, DRHC Values and Standards of Behaviour.

Managers and Directors

Understand that communication is part of the management role that when well done will increase overall DRHC
effectiveness. Respected front-line managers build credibility for new initiatives with other employees.

Medical Staff/Hospital Staff/Foundation/Auxiliary/Volunteers

Serve as community ambassadors, highlighting how DRHC is meeting the healthcare needs of the community.
 Understand the work underway to ensure the DRHC's long-term viability and sustainability.

Appendix A - The Core Principles for North West LHIN Community Engagement

These seven recommendations reflect the common beliefs and understandings of those working in the fields of public engagement, conflict resolution, and collaboration.

1. Careful Planning and Preparation

Through adequate and inclusive planning, ensure that the design, organization, and convening of the process serve both a clearly defined purpose and the needs of the participants.

2. Inclusion and Demographic Diversity

Equitably incorporate diverse people, voices, ideas, and information to lay the groundwork for quality outcomes and democratic legitimacy.

3. Collaboration and Shared Purpose

Support and encourage participants, government and community institutions, and others to work together to advance the common good.

4. Openness and Learning

Help all involved listen to each other, explore new ideas unconstrained by predetermined outcomes, learn and apply information in ways that generate new options, and rigorously evaluate public engagement activities for effectiveness.

5. Transparency and Trust

Be clear and open about the process, and provide a public record of the organizers, sponsors, outcomes, and range of views and ideas expressed.

6. Impact and Action

Ensure each participatory effort has real potential to make a difference, and that participants are aware of that potential.

7. Sustained Engagement and Participatory Culture

Promote a culture of participation with programs and institutions that support ongoing quality public engagement.

(North West LHIN website March 2018)

Appendix B – International Association of Public Participation (with permission)

IAP2'S PUBLIC PARTICIPATION SPECTRUM



The IAP2 Federation has developed the Spectrum to help groups define the public's role in any public participation process. The IAP2 Spectrum is quickly becoming an international standard.

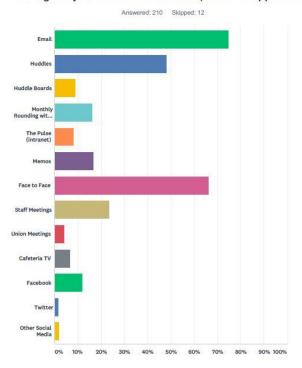
ACHERATINE IMPACT ON THE DECISION							
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Appendix C – DRHC Pulse Employee Experience Survey October 2017



Q70 I get my best information from: (check all applicable)



RESPONSES	
74.76%	157
48.10%	101
9.05%	19
16.19%	34
8.10%	17
16.67%	35
	74.76% 48.10% 9.05% 16.19% 8.10%

References



Effective Communication 2015; Dorling Kindersley Publishing



International Association for Public Participation



North West LHIN Community Engagement Core Principles

LHIN Community Engagement Guidelines and Toolkit, February 2011



Governance and Leadership Standards: Version 12 January 2018

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