Patient and Family Partner Handbook
What is a Patient and Family Partner?

Patient and Family Partners have received health care themselves, or have a family member who has received care. This care might be as a resident in a long-term care facility or as an inpatient or outpatient visiting a health centre. Patient and Family Partners use their experiences with health care delivery to bring a patient- and family-focused lens to health care improvement. Patient and Family Partners volunteer their time and receive a specialized orientation to complete this work.

Patient and Family Partners cannot be employed by Providence Health Care, or any other health care institution while serving as a Patient and Family Partner. This includes but is not limited to Vancouver Coastal Health, Fraser Health, and the Provincial Health Services Authority.

Patient and Family Partners are volunteers. They are not reimbursed financially for their time.

Why is PHC partnering with patients and families?

At PHC we recognize the importance of patient and family voices in making a better health care system. Historically health care improvement has often focused on people who work in the system, such as doctors, nurses, technicians, or physiotherapists. Evidence and day-to-day experience shows us that in fact everyone’s voice needs to be included – not just the people who provide the care. This is why PHC is partnering with patients and families to provide effective person and family centred care.
What is person-and family-centred care?

Person-and family-centered care is an approach to planning, delivering, and evaluating health care. It is based on a partnership between healthcare providers, patients and residents, and their families. In person-centered care, patients and residents define their family and determine how family will be part of their care and decision making.

By volunteering as a Patient and Family Partner, you can use your experiences with the health care system to improve health care delivery for everyone served by PHC.

Providence Health Care – who we are

Providence Health Care is the largest Catholic health care organization in Canada. We operate six facilities in Vancouver, B.C. Three hospitals - St. Paul’s, Mount Saint Joseph and Holy Family - deliver acute care, residential and rehabilitation services. Four residential facilities - St. Vincent's: Langara, St. Vincent's: Honoria Conway-Heather, St. Vincent's: Brock Fahrni and Youville Residence - focus on intermediate and long-term care for seniors.

Guided by the principle *How You Want To Be Treated*, we deliver compassionate care to 350,000 patients and residents each year. While large enough to support the most advanced medical technologies, Providence remains patient and family focused, and a community-orientated organization that values leadership, independent thinking and courageous choices.

Vision:
Driven by compassion and social justice, we are at the forefront of exceptional care and innovation.

Mission:
Inspired by the healing ministry of Jesus Christ, Providence Health Care is a Catholic health care community dedicated to meeting the physical, emotional, social and spiritual needs of those served through compassionate care, teaching and research.

Values:

*SPIRITUALITY:*
We nurture the God-given creativity, love and compassion that dwells within us all.

*INTEGRITY:*
We build our relationships on honesty, justice and fairness.

*STEWARDSHIP:*
We share accountability for the well-being of our community.

*TRUST:*
We behave in ways that promote safety, inclusion and support.

*EXCELLENCE:*
We achieve excellence through learning and continuous improvement.

*RESPECT:*
We respect the diversity, dignity and inter-dependence of all persons.
What do Patient and Family Partners do at PHC?

Roles and tasks will differ from group to group but generally, the Patient and Family Partner role includes:

- bringing patient and public experiences to the attention of an advisory committee
- helping the committee see how issues might be understood from a non-institutional perspective
- helping health care staff consider patient and family needs in their planning
- sharing your knowledge, skills and experience with PHC staff and leadership, and with each other
- learn from each other’s perspectives in the committee’s discussions

You will never be asked to bring the collective patient experience to a committee. We ask you to bring only your personal experience as a patient, resident or family member. This means that you do your best to bring your own journey with health care into the committee’s experience and offer reflections on what it means to be a patient. It’s impossible to be the voice of all patients and family members.

How do I become a Patient and Family Partner?

If you want to volunteer to be a Patient and Family Partner, contact us at careexperience@providencehealth.bc.ca or 604-806-9345. You may also contact the Patient Voices Network at www.patientsaspartners.ca to become a volunteer. They may contact you for a variety of volunteer opportunities, both at PHC and all over British Columbia.

The Patient Voices Network and PHC

The Patients as Partners Patient Voices Network (PVN) is a BC Ministry of Health Initiative run by Impact BC. PVN provides an orientation on becoming a Patient and Family Partner and continued support while volunteering. While the orientation is not mandatory, PHC and many of our current Patient and Family Partners highly recommend it as a way to find out more about the role. The orientation can be arranged with the PVN with next orientation dates shown on their website: www.patientsaspartners.ca.

Now that you know more about the role of Patient and Family Partners at Providence, here is some information to help you prepare for the work you will do.

How do I prepare for meetings?

Preparing for the initial meeting:

Prepare a brief verbal introduction of yourself, telling people:

- your name
- that you are a Patient and Family Partner
- any relevant experience (professional, voluntary, personal) that shows what you bring to the meeting or group
- what motivated you to join the committee or group
- your expectations about the work and how much time you have to give to the group

Things you may want to bring to the meeting:

- Paper copies of any documents you were sent before the meeting, such as the agenda or items for discussion. You may want to create a binder to keep all documents and papers together.
- Note-taking materials – pen and notebook or paper.
Preparing for meetings, continued

Preparing for subsequent meetings:
To be an active and effective member of a meeting, you can:
• Go through the agenda in advance and review items.
• Get involved – participate at the level you feel comfortable, and understand that your voice is valued.
• For each agenda item, ask yourself:
  - how can I contribute to the discussion?
  - what could be some possible public concerns?
  - what is relevant information to bring to this discussion?

Guidelines on how we want to work together
• Be respectful and open to each person’s ideas and opinions.
• Listen to learn and understand. One person speaks at a time without interruption. Please turn off cell phones and pagers.
• Participate! Share your ideas and experiences. Also, you can pass if you do not wish to contribute to any particular conversation.
• Share air time. Make sure everyone has a chance to speak.
• Patient/family partners and staff should avoid acronyms and abbreviations, or define them if they can’t be avoided.
• Be respectful of confidentiality. We must always keep private any personal information shared in the room.
• Respect start and end times. We will always try to start and end promptly. Do your part to respect times, session activities, breaks, etc.
• Take care of yourself. Do what you personally need to stay focused and involved: stand and stretch, use washrooms, etc.
• Humour is welcome. Remember to enjoy yourself.
• Let us know what we can do to make the sessions work for you.

Source: Patients as Partners | Patient Voices Network
“Guidelines on how we want to work together”

Debate versus dialogue
Another aspect of being effective as a Patient and Family Partner is to look at your goal when meeting with others. There can be many different goals for committees, but one goal that is common to all groups is to have a culture of dialogue. Many think dialogue is just talking back and forth but it’s more than that!

Dialogue is the art of a good conversation. Debate means stating your point of view without taking time to consider other options, or getting your point across while trying to make others back down. Dialogue is the process of putting two or more different opinions together to create a unified idea.

<table>
<thead>
<tr>
<th>Debate</th>
<th>Dialogue</th>
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<tbody>
<tr>
<td>Assumes that there is a right answer and someone has it.</td>
<td>Assumes that many people have pieces of the answer and together they can create a solution.</td>
</tr>
<tr>
<td>Defending assumptions as truth</td>
<td>Revealing assumptions for re-evaluation</td>
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<tr>
<td>Combative: participants attempt to prove the other side wrong.</td>
<td>Collaborative: participants work together toward common understanding.</td>
</tr>
<tr>
<td>Defending one’s own views against those of others.</td>
<td>Reflecting on and re-evaluating one’s own views.</td>
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<tr>
<td>Listens to find flaws and make counterarguments.</td>
<td>Listens to understand, find meaning and agreement.</td>
</tr>
<tr>
<td>Searches for problems and weaknesses.</td>
<td>Searches for strengths and value in others’ ideas.</td>
</tr>
<tr>
<td>Countering of the other position without consideration of feelings or relationship – often belittles or deprecates the other person.</td>
<td>Genuine concern for the other person and seeks to not alienate or offend.</td>
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About winning About discovering new options.
Privacy and confidentiality in your role as a Patient and Family Partner
While you volunteer as a Patient and Family Partner, you may encounter information or circumstances that are confidential or private to individual people or to the health care organization. We ask that you respect privacy, as others in the room have been asked to respect your privacy.

All participants are asked to sign the “Pledge of Confidentiality/Statement of Understanding” on page 13. Please return the signed confidentiality form to your committee leader. If you have questions about signing the pledge or want more information please talk to the committee leader.

Reimbursement while acting as a Patient and Family Partner
Patient and Family Partners who are taking part in committees, councils, meetings, or other PHC-related gatherings may be reimbursed for approved expenses that they have incurred getting to these meetings.

In order to be financially responsible, we ask that you choose the most cost-effective option where possible. We also ask you to send in your expenses regularly throughout the year rather than waiting until the end of the year. This ensures you get reimbursed in a timely manner.

Send your signed claim form with original receipts to the Professional Practice office:
Providence Health Care
Professional Practice and Nursing
1081 Burrard Street
Vancouver, BC V6Z 1Y6

The following items are eligible for reimbursement. Parking and mileage reimbursement rates and limits may change.
- Parking to a maximum of $18/day
- Mileage at $0.52/km to a maximum of 60 km (each way) for one meeting each day
- Transit fare (to and from the meeting only)

Please see page 15 for the claim form. PHC reserves the right to refuse reimbursement requests that are unreasonable.

Individual committees may provide refreshments. It varies depending on the department and the committee. Unfortunately PHC cannot guarantee that all meetings will have refreshments available.

Common challenges for Patient and Family Partners
“So, David, what do patients think?”
Staff members see you as ‘representing the public.’ It is not possible, of course, for you to represent all public opinion on the committee, as you are one person with one set of life experiences. Even if you have worked or volunteered with many people whose health is affected by the committee’s scope (e.g. diabetes or mental illness), you cannot ‘represent’ their opinions or experiences.

How to answer?
You could say: “I can’t speak to everyone’s experience, but here is my experience…”

“This work is so slow! We’re not DOING anything!”
Committees often work quite slowly. This can be frustrating for members of the public who may be used to concrete results and fast turn-around. Change takes time, and it can take a considerable length of time before committee members start to see the impact of their efforts. The role of Patient and Family Partners is vitally important to this work, but the work is very much a ‘long-term investment’. Please speak to the committee leader if you become concerned. You may be raising a timely concern for the committee to consider!

Remember, one of the biggest changes is simply having a patient and family voice present. You are instrumental to this change. You may not be able to see the impact of all the changes, but your presence is felt by other members of the team. Collaboration can be the first step in improving the overall care experience.

How much time will it take to be a Patient and Family Partner?
Patient and Family Partners are involved at the level they choose. This means that the amount of time and level of involvement you wish to contribute is up to you. Some of our Patient and Family Partners volunteer six to eight hours a month. Others volunteer one hour a month. Some of our volunteers give a few hours of their time for a one-time commitment – and others prefer to volunteer over a long period of time. Please advise the committee or leader of the project you are involved in about how much time you have to give.
How do I find a project or committee that fits my goals as Patient and Family Partner?
To get involved contact the PVN at www.patientsaspartners.ca and they can connect with you with different projects at PHC. You can also contact the staff or leader of the program you or your family member is receiving care from and ask if you can participate as a Patient and Family Partner. In addition to the Patient Voices Network and the unit leader, you can also contact the Professional Practice Office at careexperience@providencehealth.bc.ca or call 604-806-9345 to get involved.

Orientation and support for Patient and Family Partners
In addition to the orientation that the Patient Voices Network provides, PHC holds several orientation sessions for Patient and Family Partners each year. The PHC orientation provides a look into the organization, provides key contacts, orientates Patient and Family Partners to meeting areas in the organization, and connects you to a contact person if you have any questions while volunteering as a Patient and Family Partner. There is no cost to attend the PHC orientation.
To find out about the next Patient and Family Partner orientation at PHC contact us at careexperience@providencehealth.bc.ca or call 604-806-9345. We will connect you with a committee or project sponsor before the PHC orientation. They will give you specific details about the committee or project you are volunteering for.

What are the limits to my role as a Patient and Family Partner?
Volunteering as a Patient and Family Partner is a great way to share experiences you have had in a hospital, clinic, or long term care setting and make care better. Volunteering as a Patient and Family Partner is not an opportunity to “vent” or share a bad experience. Personal stories about care can provide very meaningful reasons why care needs to be improved. Being a Patient and Family Partner may not provide a ‘fix” to an issue, but it can provide an opportunity for discussion.

What if I want to stop volunteering as a Patient and Family Partner?
You can choose to stop volunteering as a Patient and Family Partner at any time. Please tell your project leader that you are no longer volunteering. If you wish, let them know why you are no longer volunteering. You may also wish to contact the Patient Voices Network to let them know you no longer wish to volunteer your time.

Questions?
To learn more about Patient and Family Partners in general and their work at PHC, contact the Practice Consultant for the Care Experience Strategic Direction at 604-806-9345 or careexperience@providencehealth.bc.ca. If you want to know more about your specific role in a committee, contact the leader of the committee or project you are working with.

If you are registered with the Patients as Partners | Patient Voices Network, they can also provide assistance for issues resulting from your experience as a Patient and Family Partner.

Resources and references
• The Patients as Partners | Patient Voices Network website at www.patientsaspartners.ca
• The Institute for Patient and Family Centered Care www.ipfcc.org
• CPH 1500: Travel & Business Expense Reimbursement Policy
• CPH0400: Signing Authority
• Patient & Public Advisors Handbook – a VCH Community Engagement and Patients as Partners | Patient Voices Network collaboration
• Paper prepared by Shelley Berman, which was based on discussions of the Dialogue Group of the Boston Chapter of Educators for Social Responsibility (ESR). http://www.youblisher.com/p/66699-Dialogue-Vs-Debate/
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