



Canadian Foundation for
**Healthcare
Improvement**

PROSPECTUS

Partnering with Patients and Families for Quality Improvement
A Canadian Foundation for Healthcare Improvement Collaborative

The Canadian Foundation for Healthcare Improvement is a not-for-profit organization funded through an agreement with the Government of Canada. The views expressed herein do not necessarily represent the views of the Government of Canada.

Canadian Foundation for Healthcare Improvement

cfhi-fcass.ca

Executive Summary

Overview

The Canadian Foundation for Healthcare Improvement (CFHI) is inviting applications from motivated organizations to join a pan-Canadian collaborative focused on Patient and Family Engagement (PFE).

The goal of the collaborative is to build capacity and enhance organizational culture to partner with patients and families in order to improve quality (for example patient- and family- centred care, coordination of care, safety and efficiency) across the healthcare continuum.

We invite you to join this collaborative. In doing so, you are asked to identify a quality improvement priority or existing initiative relevant to your organization that would benefit directly from partnering with patients and families. CFHI faculty, coaches and peers will help your team develop, implement and measure strategies to meaningfully partner with patients and families in quality improvement. You will learn how to effectively capture and measure the impact of this partnership on quality, outcomes and your organizational culture.

Timeline

The collaborative will run from July 2014 to December 2015. An optional information call will be held for organizations that are interested in learning more about the collaborative on April 16, 2014, from 11:00-12:30 Eastern Time. Interviews with each team will be scheduled, following receipt of their expression of commitment. Applications will be accepted, starting immediately, until May 29, 2014. Notification of results will be communicated to applicants by June 20, 2014. Successful organizations must sign a Memorandum of Understanding, outlining commitments and expectations before July 30, 2014. In preparation for a mandatory in-person workshop taking place in Montreal on October 2, 2014, teams will create a draft project charter that includes engagement and measurement plans. Webinars will be scheduled throughout the duration of the collaborative to support your improvement journey with patients and families.

Participation Criteria

To be eligible for participation, interested Canadian organizations are required to complete an [expression of commitment](#) (application and budget proposal), which demonstrates senior leadership support, capacity for meaningfully involving patients and families, and dedicated financial and/or in-kind resources for project implementation and measurement.

Program Funding

CFHI will provide funding of up to \$50,000 each to a maximum of 15 Canadian teams for direct costs related to participation in the collaborative. CFHI will also provide quality improvement expertise through faculty, coaches and leading experts to support teams to improve quality of care, health outcomes and efficiencies in partnership with patients and families.

Contact

If you have questions about the collaborative, please contact Maria Judd, Senior Director, Patient Engagement and Improvement at Maria.Judd@cfhi-fcass.ca.

Why Participate?

CFHI's support to 17 organizations, through our Patient Engagement Project (PEP) initiative (2010-2013) demonstrated the rewards that come when management, providers and patients work together towards better care, systems and outcomes. Effective partnership between patients, providers and management is the most promising way of meeting the challenges of an aging population, an explosion of chronic disease and limited budgets.

Our PEP initiative resulted in improvements to patient-provider communications, the patient experience and other quality domains, including efficiency¹. Involving patients and families in understanding and designing improvements to care leads to new insights and better results than occur when providers work on their own.

This collaborative will increase your organization's ability to:

- Enhance engagement of clinicians, staff, patients, families and leaders to accelerate an identified organizational quality improvement priority.
- Assess the current state of readiness to meaningfully partner with patients and families on quality improvement initiatives.
- Strategically focus on infrastructures, processes and behaviours that enable meaningful and effective engagement for improvement.
- Improve skills and build capacity in patient and family engagement, performance measurement, quality improvement, leadership, change management and sustainability.
- Align quality improvement goals and activities with what's important to patients and families.
- Recognize the benefits of combining patient stories and survey data to understand and measure the patient experience.
- Build an effective leadership strategy to foster and embed patient and family engagement at all levels.
- Network and exchange approaches, tools, resources, measures and lessons learned with other leading organizations and teams who are partnering with patients and families for quality improvement.

Who Should Participate?

Canadian healthcare organizations and ministries are eligible to apply. Organizations include, but may not be limited to: healthcare service delivery organizations; regional health authorities and Local Health Integration Networks; government organizations and agencies; primary care office practices or physician groups; and community organizations (such as a Community Care Access Centre in Ontario).

Participating organizations may wish to reach beyond their usual boundaries to develop multi-stakeholder partnerships. Partnering relationships could include health care organizations and groups such as social service agencies, local governments, disease-based agencies, public health departments, educational institutions, civic, and other non-profit or voluntary organizations focused on improving healthcare.

¹ See "Learn about the impact of PEP" at <http://www.cfhi-fcass.ca/WhatWeDo/PatientEngagement.aspx>.

CFHI wants to work with Canadian organizations across the healthcare continuum that:

- Understand that partnering with patients and families is fundamental to the patient experience and transformational change and the sustainability of quality initiatives.
- Embed patient and family engagement and patient- and family- centred care in their organizational priorities.
- Demonstrate readiness to advance patient- and family- centred care and patient and family engagement.

And are committed to:

- Partnering with patients and families for quality improvement.
- Building upon and adding to the existing resources and structures that support patient and family engagement and patient- and family-centred care.
- Measuring the value and impact of partnering with patients and families on quality improvement initiatives and processes.

Organizations

The collaborative is designed to offer support to participating Canadian organizations with the following characteristics:

- Engagement of patients and families in quality improvement is an organizational priority supported at the senior level.
- Quality improvement goals have been defined and articulated.
- Structures and mechanisms are in place or there is a commitment to partner with patients and families for inclusive and appropriate participation in improvement activities.
- Processes are in place or there is a willingness and commitment to ensure patients, families and staff have the necessary knowledge, skills and resources to engage in quality improvement in a meaningful way.
- Appropriate resources have been dedicated to ensure successful implementation and measurement. (Each participating team will designate an executive sponsor, a project lead with the time, resources and accountability to succeed, a measurement lead to support the tracking of results over time and a patient or family advisor).

Team members

The ideal team will be comprised of, at minimum, four team members assuming the following project roles:

- **Executive Sponsor** An individual who will ensure top-level organizational involvement in all the phases of the quality improvement initiative (design, implementation, evaluation, sustainability and spread).
- **Project lead:** An individual responsible for the allocation and management of resources, to ensure deliverables are attained in a timely manner.
- **Evaluation and performance measurement lead:** An individual with some expertise in data and/or quality improvement, including some experience in measurement and indicator identification to track the progress of results over time.
- **Patient or family advisor:** An individual who has experience and expertise as a service user within your healthcare organization.

Teams are welcome to include additional team members beyond those listed above. In addition to patients and families, we encourage you to consider involving quality improvement directors and managers, patient safety leads, quality improvement professionals, managers, clinicians such as

physicians, nurses, nurse practitioners, pharmacists and other individuals committed to partnering with patients and families for quality improvement.

Expectations of the Participating Organizations and Team Members

Successful team will be asked to sign, by July 30 2014, a Memorandum of Understanding with CFHI that reflects CFHI's support and the commitment of the organization(s) and team members to participate fully in all aspects of the program.

Participating organizations are expected to send, at their own expense, three members of the team (project lead, measurement lead and patient/family advisor) to the in-person workshop taking place on October 2, 2014 in Montreal, QC and the final summative workshop in the fall of 2015. Registration fees for both events will be waived for teams in the collaborative.

A proposed budget plan detailing the allocation of the funding from CFHI as well as financial and/or in kind resourcing provided by the teams is required in the application. CFHI's learning model builds organizational capacity so no more than 20 percent of the funds provided can be used for external consulting services.

Collaborative Components and Timeline:

CFHI's Partnering with Patients and Families for Quality Improvement Collaborative will promote networking and exchange among the entire cohort and will include:

- July 15, 2014: Orientation webinar from 13:00-14:00 Eastern Time. The webinar will introduce the collaborative to participating teams, provide an overview of the collaborative and curricular content, and introduce the faculty and staff who will support your quality improvement initiative.
- September 16, 2014: Launch webinar from 13:00-15:00 Eastern Time. The webinar will provide teams with content and support for pre-work in preparation for the first in-person meeting. We ask that the project lead, measurement lead and patient/family advisor participate.
- October 2, 2014: One-day in-person workshop in Montreal, QC. The workshop will provide teams with content and support to move their quality improvement initiative forward. We ask that the project lead, measurement lead and patient/family advisor participate.
- October 3, 2014: Teams are encouraged to participate in an optional 1-day in-person Invitational Conference on International Leading Practices in Patient and Family Engagement. The conference follows the October 2nd workshop and is co-sponsored by the McGill University Health Centre and CHFI. There is no charge for teams to participate.
- Access to CFHI's patient and family engagement learning resource centre.
- Access to online learning, tools and activities.
- Regularly scheduled progress reporting and content webinars.
- Ongoing support from CFHI's patient and family engagement and quality improvement faculty, coaches, staff and leading experts.

CFHI faculty and staff will provide content and facilitate exchange to support teams in the collaborative on key topics including:

- What is patient and family engagement? What is quality improvement? What are the "winning conditions" for connecting patient and family engagement with quality improvement?
- Development of your patient and family engagement for quality improvement initiative aim statement and driver diagram.

- Preparation of a project charter, including plans for measurement and outcomes, stakeholder mapping, communication and sustainability/spread.
- Stakeholder engagement/community asset mapping and preparation for implementation.
- Project design, implementation and measurement for improvement.
- Synthesis and analysis of data to drive change.
- Patient- and family-centred leadership, change management and leadership competencies for improvement.
- Sustaining and spreading the patient and family engagement for quality improvement initiative.

Application Process

For more information about the collaborative and how to apply, we encourage you to join us by [registering for an informational call on April 16, 2014, from 11:00 a.m. to 12:30 p.m. Eastern Time.](#)

Expressions of commitment (application and budget proposal) will be accepted in French or English starting immediately and will be reviewed on a rolling basis. Selection interviews will be scheduled with teams following receipt of their application and budget proposal. The deadline for submission is May 29, 2014, **or when the program has reached capacity.** Notification of results will be communicated to applicants by June 20, 2014.

Teams will be selected by CFHI and advisors based on the strength of their alignment with requirements described within the Prospectus and CFHI considerations of overall composition of the cohort of teams in terms of diversity of setting and context.

Please submit, by e-mail only, your completed [expression of commitment](#) (in PDF and MS Word format) and include an:

- Abbreviated curriculum vitae (1-3 pages) for each team member.
- Timeline chart including key dates, major activities and milestones for each phase of the quality improvement initiative you propose to undertake.

E-mail completed applications to Jessie Checkley at Jessie.Checkley@cfhi-fcass.ca.

For further information, please e-mail or call Maria Judd at Maria.Judd@cfhi-fcass.ca or 613-728-2238 (250) or Jessie Checkley at the address above or 613-728-2238 (356).

By completing the application form, the organization and team members confirm that they understand and abide by [CFHI's Conflict of Interest Policy](#), including rules regarding eligibility of foundation employees, trustees and agents.

CFHI plans to limit enrollment in the Partnering with Patients and Families for Quality Improvement Collaborative to up to 15 organizations; therefore, you are encouraged to apply well before the deadline.

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Appendix A: CFHI Core Faculty and Staff

François Champagne is full professor of health care management, health policy and health care evaluation in the Department of Health Administration, researcher at the Institut de recherche en santé publique (IRSPUM), and collaborator in the Unité de santé internationale at the School of Public Health, Université de Montréal. He was Scientific Officer of the Canadian Health Services Foundation, now the Canadian Foundation for Healthcare Improvement from 2003 to 2013 and was Chair of the Advisory Board of the Institute of Health Services and Policy Research from 2004 to 2007. He was one of the co-leaders of HEALNet, a Canadian network of centres of excellence dedicated to research on optimizing the use of research funding to improve decisions in the health system. He received in 2002 a Career Recognition Award from the Quebec Program Evaluation Society. His current research interests are in the area of integrated delivery systems, healthcare improvement, change management, evaluation and organizational performance and the use of evidence in management.

Maria Judd Senior Director, Patient Engagement and Improvement is responsible for developing and implementing strategies, programs and activities in support of CFHI's mission, with a particular focus on engaging patients and families in healthcare improvement work. Maria's passion for healthcare improvement has evolved from her diverse roles within the health system, such as a community health centre board member, clinician, program manager and researcher. She has extensive experience in knowledge transfer and exchange, establishing and promoting new ventures, creating education programs, developing clinical practice guidelines and convening expert groups.

Roger McAdam and his wife Dixie have raised two daughters in the shadows of the Rocky Mountains in Southwestern Alberta. He retired from his teaching career nine years ago. Roger has been a member of Alberta Health Services' Patient/Family Advisory Group since its inception over 4 years ago and has co-chaired the committee for the past two years. Roger has served as a patient adviser on AHS's Patient Safety Executive Committee and AHS's QAC. He sits as a member of the Patient First Steering Committee. Roger has been given the opportunity to speak to policy makers, health care workers, patients, families and volunteers to promote the inclusion of the Patient Voice at all levels of care and decision making. Before EVERY decision, EVERY policy, EVERY initiative and EVERY action, we must pose the question "Is this in the best interest of the patient?" If we are able to answer "YES", we manifest Patient Centered Care.

Angela Morin has been partnering with healthcare professionals providing input in policy and facility design, quality improvement and program development as a Patient and Family Experience Advisor at Kingston General Hospital since November 2011. She currently sits on the Kingston General Hospital and the Southeast Regional Cancer Centre Patient and Family Advisory Councils as well as Accreditation Canada's Client and Family-Centred Care Advisory Council. In addition to her volunteer role as an advisor, Angela has extensive experience motivating and coaching professionals as a Career Transition Consultant with Lee Hecht Harrison, a global talent mobility firm. Angela's experience supporting a close friend through her breast cancer journey continues to motivate her to bring the patient and family voice to health care.

Patricia O'Connor is the Director of Nursing and Chief Nursing Officer of the McGill University Health Centre (MUHC), and an assistant professor in the Ingram School of Nursing at McGill. She is a Certified Health Executive and Past President of the Academy of Canadian Executive Nurses. Patricia completed an EXTRA Fellowship with Canadian Health Services Research Foundation (2004-06), a fellowship with the Canadian College of Health Leaders, focusing on reducing adverse events (2007-09), and in 2008-09,

a U.S. Commonwealth Fund Harkness Fellowship in Health Policy and Practice, examining innovations in interdisciplinary work redesign in the U.S. and Canada. Her current interests are focused on engaging patients and frontline staff in the redesign of care delivery systems, and on the development of high performing, interprofessional quality improvement teams.

Kaye Phillips is Senior Director of Evaluation and Performance Improvement at the Canadian Foundation for Healthcare Improvement, bringing ten years of experience in applied research and evaluation to the position. Kaye is responsible for leading the design, implementation and integration of performance measurement and evaluation across CFHI's programs and for providing support to our collaborative improvement teams as they generate on-going learning's and measurable results. Kaye holds a Ph.D. from the University of Toronto's School of Social and Administrative Pharmacy and is an alumna of the Ontario Training Center in Health Services and Policy Research (OTC).

Melanie Rathgeber is the founder and lead consultant of MERGE Consulting, a health system improvement firm based out of British Columbia. Her experience in improvement and evaluation has provided her with a strong basis to facilitate both large and small scale improvement initiatives. Melanie led improvement and measurement initiatives at two provincial quality councils (Saskatchewan and British Columbia). Her improvement experience spans a variety of health care sectors including primary care, acute care, and chronic disease. Melanie has a passion for teaching; she has been on faculty with British Columbia's Quality Academy since its inception in 2010 and has been an advisor and educator for the Canadian Institute for Healthcare Improvement since 2013. Melanie believes strongly in client-centred care and optimizing the role of patients, clients, and families in understanding and improving their health care experiences.

Jennifer Rees is the Executive Director of Engagement and Patient Experience, a section within Alberta Health Services (AHS) which fosters collaborative relationships between patients, families and health care providers to ensure the patients voice is heard during planning, delivery and the point of care. Her vision in strategic planning, program development and implementation, alongside team building are held in high esteem. From frontline hands on care to her progressive leadership roles, Jennifer keeps the patient and their journey in her vision at all times.

Eleanor Rivoire is the Executive Vice President and Chief Nursing Executive at Kingston General Hospital, and an Assistant Professor, School of Nursing at Queen's University. She is a senior healthcare executive with more than 30 years experience within the clinical, education and administrative domains of professional practice. She has a keen interest and expertise in transforming the patient experience with a focus on patient- and family-centred care, as well as with models of interprofessional practice and education. She is engaged in managing changes that bring about policy and process improvements within healthcare and professional practice, and result in improved quality and safety outcomes.

Other expert faculty will be joining this core faculty group.

Appendix B: Collaborative Timeline At-a-Glance

	April 2014	May 2014	June 2014	July 2014	August 2014	Sept 2014	Oct 2, 2014	Nov-Dec 2014	Jan 2015	Feb-Apr 2015	May 2015	Jun-Aug 2015	Sept 2015	Fall 2015
Launch of Call for submissions April 2, 2014	●													
Information Call April 16, 2014	●													
Development of application and proposed budget. Deadline May 29, 2014		●												
Team interviews	●	●	●											
Notification of results communicated to applicant teams June 20, 2014			●											
Sign-off of MOU between organizations and CFHI July 30, 2014				●										
Webinars				●		●			●		●		●	
Coaching calls					●			●		●		●		
In-person workshops							●							●
Access on-line portal				●	●	●	●	●	●	●	●	●	●	●
Dissemination/ spread													●	●