

## Frequently Asked Questions: Community Engagement & Integration

### Introduction

With respect to integrations under Section 27 of the Local Health System Integration Act (LHSIA), the Toronto Central LHIN expects that the decision to integrate has been informed by appropriate community engagement by the health service providers involved in the proposed integration. Information about community engagement is to be included in informal notice of voluntary integration to the Toronto Central LHIN.

The following **FAQs** have been developed as guidelines for the submissions. The application of these guidelines will vary from provider to provider and depending on the nature of the integration being proposed.

### 1. What is community engagement?

There are many definitions of community engagement, for example:

*“Community engagement refers to the process of getting communities involved in decisions that affect them. This includes the planning, development and management of services, as well as activities which aim to improve health or reduce health inequalities.”<sup>1</sup>*

Community engagement is a critical input to health care decision-making. The results of community engagement, along with research evidence, help define priorities and point to solutions in health services.

### 2. How does the Toronto Central LHIN define community?

“Community”, for the purpose of community engagement by the LHIN and health service providers, has been defined in section 16(2) of LHSIA as: patients and other individuals in the geographic area of the LHIN, health service providers and any other person or entity that provides services in or for the local health system, and employees involved in the local health system.

### 3. What are methods and techniques for effective community engagement?

There are many methods and techniques for effective community engagement including, but not limited to; focus groups, town halls, surveys, advisory committees, etc. The International Association for Public Participation at [www.iap2.org](http://www.iap2.org) provides numerous examples.

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<sup>1</sup> Popay J (2006) Community engagement and community development and health improvement: a background paper for NICE (available on request by emailing [antony.morgan@nice.org.uk](mailto:antony.morgan@nice.org.uk) or [lorraine.taylor@nice.org.uk](mailto:lorraine.taylor@nice.org.uk)).

#### 4. What does the Toronto Central LHIN consider to be effective community engagement?

In order to help health service providers engage their communities effectively, the Toronto Central LHIN's Community Engagement Strategy includes seven principles. Health service providers are encouraged to consider these principles in planning their own community engagement activities.

##### *Inclusive*

We will engage with the full range of healthcare consumers, providers, and communities that have a stake in, or will be impacted by, our plans. We will implement specific outreach activities to engage hard-to-reach and marginalized populations.

##### *Timely*

We will engage with stakeholders early and often in the planning process, allowing sufficient time for meaningful dialogue, consultation and plan modifications. Our goal is to provide stakeholders with enough time to share information with their partners prior to and after engagement.

##### *Appropriate*

We will use a variety of methods of communication that reflect the needs of our stakeholders, while being efficient in the use of our resources and those of participating stakeholders. The key will be flexibility and understanding that common methods of engagement may not be effective for some stakeholders.

##### *Accessible*

We will provide clear, accessible and comprehensive information to facilitate stakeholder involvement with issues and decision making – striving to eliminate the barriers of language, culture and disabilities.

##### *Responsive*

We will be respectful of, and responsive to, stakeholder input. We will modify or refine plans and actions to reflect stakeholder advice, where appropriate.

##### *Transparent*

We will engage with stakeholders openly and will be transparent about our purpose, goals, accountabilities, expectations, and constraints and how stakeholder engagement will be used in decision making.

##### *Balanced & Equitable*

We will balance the participation and influence of various stakeholder groups

5. How can health service providers ensure they meet obligations to engage the community in integration decisions?

Health service providers are encouraged to define their community broadly, including local residents, other HSPs or organizations providing services in the LHIN, labour and union representatives, volunteers, employees, etc. In determining the level of engagement with each stakeholder or community group, HSPs should define the interest of each group, in the proposed integration, and prioritize community engagement accordingly.

For example, the International Association for Public Participation provides a spectrum of community engagement from the lowest level to the highest: Inform, Consult, Involve, Collaborate, Empower. HSPs should select the level of engagement based on how much impact the integration decision will have on each stakeholder - the greater the impact the higher the level.

Effective community engagement goes hand in hand with effective communications. HSPs are encouraged to use proactive communication strategies to ensure appropriate feedback loops with each stakeholder group they engage.

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