

Title: Exploring Models of Community Engagement for the Nova Scotia Health System

Team:

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Sponsors/Key Stakeholders:

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Question Proposed:

Develop a set of recommendations based on a review of the three frameworks of community engagement (IAP2, Holland Matrix, STEPS) currently being used by the provincial health authorities and Dalhousie University Medical School on which model would be most effective within the Nova Scotia context. Two additional questions were to be considered through this project:

- Will the model(s) lead to transformative change?
- Will the model(s) improve community engagement within the health system?

Each framework was developed to address gaps within the health care system across North America.

Methods:

We completed a literature search of community engagement models. We then explored in depth the IAP2 (Fig. 1), Holland Matrix (Fig. 2) and STEPS approaches through review of the literature, viewing expert testimony and expert interviews.

We interviewed the public and representatives from the medical community and academic center to identify recurring themes regarding the Dalhousie University Faculty of Medicine and community engagement.

Themes from Interviews

Academic and medical community:

- Community engagement requires a cultural shift in medical school education around serving and engaging society beyond the patient in front of you.
- Change takes time; you need to start small and grow it from the ground up.
- Physicians need to believe that the community knows what is important for them.
- The Medical School needs to be present in the community.

- Success would have Dalhousie Medical School more visible and present in our communities. Co-location and community generated research ideas are examples.

Themes from public in community:

- The medical school helps train doctors, and is important for recruiting and keeping doctors in their communities.
- The community does not distinguish between the training of medical professionals (dentists, physicians, nurses).
- Most people are not sure what the medical school offers beyond training doctors.
- Having a medical school in your community allows the research agenda to be targeted towards improving health care for people in the province and facilitating community care.
- The medical school needs to be out in the community and visible.
- Community values the importance of the medical school in the province.

Quotes from Interviews:

What is the role of Dalhousie Medical School in serving and engaging society?

- Dean Anderson “It’s just the right thing to do”
- Dr. Noni MacDonald “Doing this well means the medical school would not be talking about we, but would be talking about us”
- Dr. David Petrie “Hard to serve society without engaging society.”
- Community member “The medical school could put themselves out there more...”
- Community member “ They produce doctors...the trick is to make ‘em stay.”

Findings:

The Dalhousie Faculty of Medicine recognizes that engaging with the community is a key strategic direction for the future of the medical school and critically important in improving the health care within our region. Community engagement has been outlined in several models (Holland Matrix, IAP2, STEPS), but no one model adequately captures all aspects required for successful implementation.

From our interviews and research, the potential of community engagement will not be fully understood until we ask the questions and listen authentically to the stories of our communities. This communication needs to be two-way sharing and promoting community engagement successes, as there is a gap in knowledge about the full value of the medical school in our communities. True community engagement will require a cultural shift in medical education and practice, and will take time. Community engagement cannot become a priority in academic medicine until it is a core mission of the medical school reflected in education, research and promotion.

Recommendations:

We propose an aggregate that incorporates aspects of all three models reviewed into the community engagement process (Fig. 3): The Holland Matrix, to assess and inform the desired level of organizational community engagement by the medical school, the IAP2 model to clarify the direction, extent of and potential strategies for engagement, and the STEPS model to estimate expected timelines to develop authentic community engagement. This recommendation does not preclude the use of other models to inform the process. Most important is taking action in community engagement, starting even with small steps, then evaluating and modifying as part of an ongoing improvement process.

Next steps:

Dalhousie Faculty of Medicine to incorporate community engagement (serving and engaging society) in admissions, undergraduate curriculum, research strategy and appointment and promotion guidelines. The medical school to implement clear metrics of measurement of community engagement (e.g. Public and Patient Engagement Evaluation Tool) as well as external accountability (e.g. community members advisory group) and impact to support and guide the process.

Figure 1: IAP2 Model

IAP2'S PUBLIC PARTICIPATION SPECTRUM®

NSHA's approach to engagement is founded in the IAP2* Public Participation Spectrum© (see diagram below). While proper engagement practice requires significant planning and development; the IAP2 Spectrum® provides a high-level snapshot and diagnostic tool for helping to make decisions about the level and direction of potential engagement processes.

Increasing Level of Public Impact					
	Inform	Consult	Involve	Collaborate	Empower
Public Participation Goal	To provide the public with balanced and objective information to assist them in the 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 partner 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
Promise to 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.
Example Techniques	<ul style="list-style-type: none"> • Fact sheets • Websites • Open houses 	<ul style="list-style-type: none"> • Public comment • Focus Groups • Surveys • Public Meetings 	<ul style="list-style-type: none"> • Workshops • Deliberate polling 	<ul style="list-style-type: none"> • Citizen advisory committees • Consensus-building • Participatory decision-making 	<ul style="list-style-type: none"> • Citizen juries • Ballots • Delegated decision

Note: Further information about the International Association for Public Participation can be found on their website, www.iap2.org

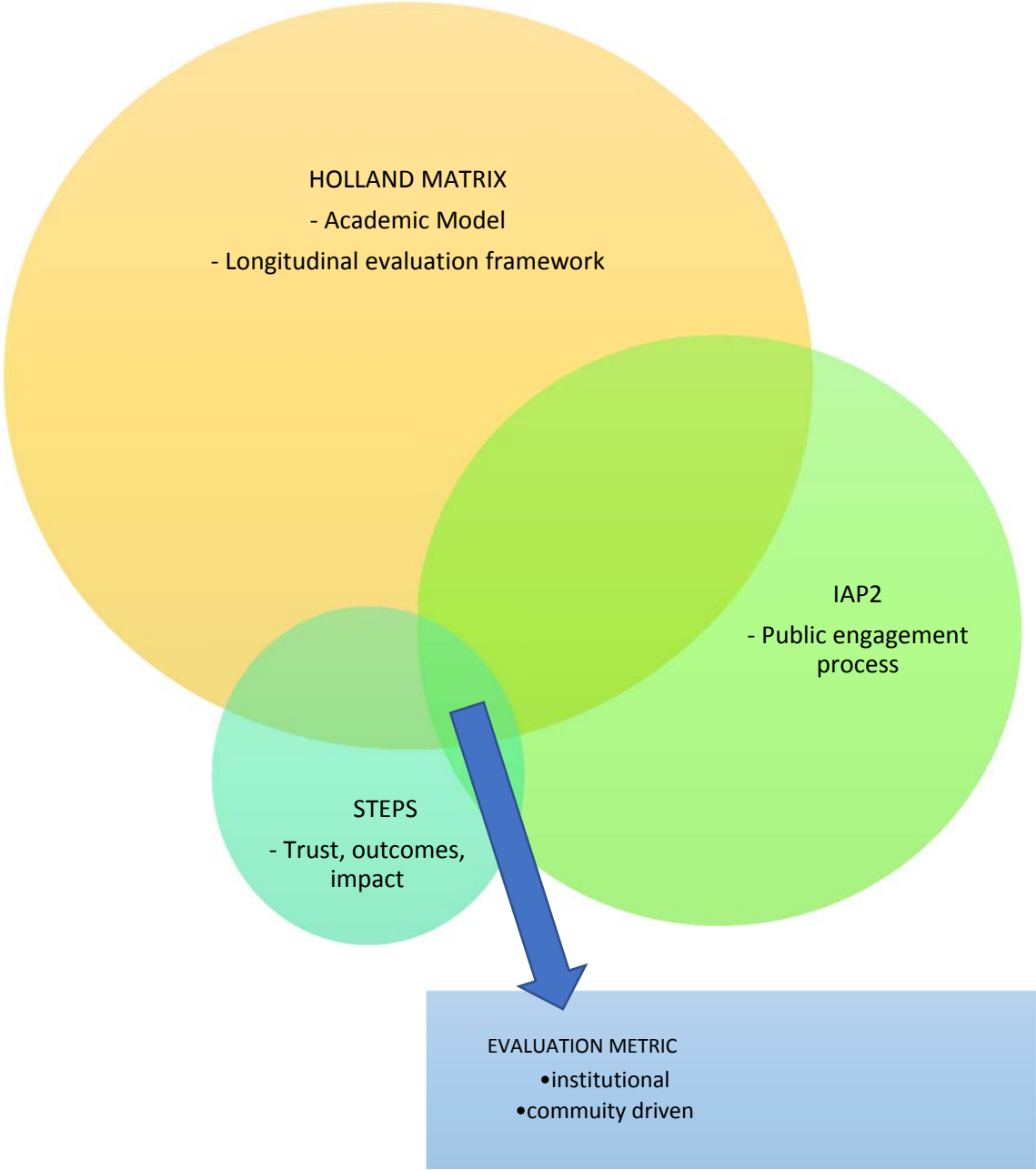
Figure 2: Holland Matrix

Levels of Commitment to Community Engagement, Characterized by Key Organizational Factors Evidencing Relevance to Institutional Mission

	Level One Low Relevance	Level Two Medium Relevance	Level Three High Relevance	Level Four Full Integration
Mission	No mention or undefined rhetorical reference	Engagement is part of what we do as educated citizens	Engagement is an aspect of our academic agenda	Engagement is a central and defining characteristic
Leadership (Pres, VPs, Deans, Chairs)	Engagement not mentioned as a priority; general rhetorical references to community or society	Expressions that describe institution as asset to community through economic impact	Interest in and support for specific, short-term community projects; engagement discussed as a part of learning and research	Broad leadership commitment to a sustained engagement agenda with ongoing funding support and community input
Promotion, Tenure, Hiring	Idea of engagement is confused with traditional view of service	Community engagement mentioned; volunteerism or consulting may be included in portfolio	Formal guidelines for defining, documenting and rewarding engaged teaching/research	Community-based research and teaching are valid criteria for hiring and rewards
Organization Structure and Funding	No units focus on engagement or volunteerism	Units may exist to foster volunteerism/community service	Various separate centers and institutes are organized to support engagement; soft funding	Infrastructure exists (with base funding) to support partnerships and widespread faculty/student participation
Student Involvement & Curriculum	Part of extracurricular student life activities	Organized institutional support for volunteer activity and community leadership development	Opportunity for internships, practica, some service-learning courses	Service-learning and community-based learning integrated across curriculum; linked to learning goals
Faculty Involvement	Traditional service defined as campus duties; committees; little support for interdisciplinary work	Pro bono consulting; community volunteerism acknowledged	Tenured/senior faculty may pursue community-based research; some teach service-learning courses	Community-based research and learning intentionally integrated across disciplines; interdisciplinary work is supported
Community Involvement	Random, occasional, symbolic or limited individual or group involvement	Community representation on advisory boards for departments or schools	Community influences campus through active partnerships, participation in service-learning programs or specific grants	Community involved in defining, conducting and evaluating community-based research and teaching; sustained partnerships
External Communications and Fundraising	Community engagement not an emphasis	Stories of students or alumni as good citizens; partnerships are grant dependent	Emphasis on economic impact of institution; public role of centers, institutes, extension	Engagement is integral to fundraising goals; joint grants/gifts with community; base funding

Barbara A. Holland, 2006. Adapted from Holland, Michigan Journal of Community Service Learning, Vol.4, Fall 1997, pp. 30-41.

Figure 3: Model Recommendations



HOLLAND MATRIX
- Academic Model
- Longitudinal evaluation framework

IAP2
- Public engagement process

STEPS
- Trust, outcomes, impact

EVALUATION METRIC
•institutional
•commuity driven