Profiles of Excellence

Patient and Family Engagement

BC Children's Hospital
An agency of the Provincial Health Services Authority

Sunny Hill Health Centre for Children
A program of BC Children's Hospital

BC Women's Hospital+ Health Centre
An agency of the Provincial Health Services Authority

February 2017

At BC Children's Hospital, Sunny Hill Health Centre and BC Women's Hospital and Health Centre, we strive to build our services around our patients and families.

Patient and family centered care is at the heart of what we do, every day. To do it well, we must engage patients and families in every step of their care.

As described by Accreditation Canada, patient and family centred care is an approach that fosters respectful, compassionate, culturally appropriate, and competent care that responds to the needs, values, beliefs, and preferences of patients and their family members.

It starts with having meaningful conversations with our patients and families and engaging them in decisions that matter to them.

Patients and families work in collaboration with our teams to plan and co-design services and to influence programs and services in real time, as they are created. They partner with us to make decisions about their day-to-day clinical care, and to provide input into organization-wide changes and priorities. This includes everything from day to day feedback to advisory committees, to surveys and focus groups.

Our approach to patient and family engagement is supported by the Provincial Health Services Authority's five values: Respect people, Be compassionate, Dare to innovate, Cultivate partnerships, Serve with purpose. These values underpin our people, leadership and culture.

We are proud of our patient and family engagement initiatives, and we appreciate that – by design – they will continue to be a work in progress. We are sharing this booklet with you as a way to recognize and celebrate some of the excellent work being done across our hospitals.

Through these, and other inspiring stories, we learn from our patients and families, every day. Thank you for continuing to do what you do best:

caring for, and with, our patients and families

Sincerely,

Barbara Fitzgerald
Chief Nursing Officer and Head of Interprofessional Practice and Patient Experience
BC Children's Hospital, BC Women's Hospital & Health Centre and Sunny Hill Health Centre for Children

To share your stories of Patient and Family Engagement:
Contact Cinthia Pagé, Patient Experience, Cinthia.Page@cw.bc.ca

This simple change in surgical services has had a huge impact for families with children on the autism spectrum

Surgical Services

BC Children's Hospital

One mom's voice impacts many

Simple change eases recovery for children on the autism spectrum

When it comes to post anesthetic recovery, BC Children's Hospital uses two different recovery locations. The first location is where children receive specialized care immediately after anesthesia. The second is where they recover and receive ongoing care before going home.

Some families with children on the autism spectrum struggled with that process. For these children, waking up from a surgery in an unfamiliar room is very stressful and confusing. They struggle with the added stimulation that comes from moving from one location to another or with a new care provider. Children cry, try to get out of bed, and express their fear in loud, emotional ways.

A mother living through that experience told the staff, "This is harder that it has to be. You've got to find a better way to do this." And staff listened.

The Anesthetic Care Unit changed the patient flow for children on the autism spectrum. These families now remain in the first recovery location until they are ready for discharge home. This reduction in unnecessary stimulation and the continuity of their care provider team throughout their recovery has meant that these patients are back in the care of their families – who are the experts in their individual needs – more quickly than before.

This simple change in surgical services has had a huge impact for families with children on the autism spectrum. It's a great example of how listening and partnering with our patients and families improve their experience!

Learn more about this project: Contact Trish Page, Program Manager, tpage@cw.bc.ca

Photo credit: Pediatric Intensive Care Unit, BC Children's Hospital

"Life isn't about waiting for the storm to pass, it's about learning how to dance in the rain."
~ Vivian Greene

Pediatric Intensive Care Unit

BC Children's Hospital

Honouring teen's graduation dream

Pediatric Intensive Care Unit helps family enjoy experiences outside hospital

Seventeen-year old Brianna wanted to go home. But, it seemed impossible. A fatal spinal tumour had left the grade 12 student paralyzed and attached to a ventilator 24 hours a day. She also wanted to attend her high school graduation. This, too, seemed impossible.

Brianna's spirit and determination inspired a BC Children's Hospital pediatrician to hold a brainstorming meeting with other health care providers to see what could be done to optimize her stay in hospital as she faced the end of her life. Following the meeting, BC Children's Pediatric Intensive Care Unit worked with Brianna and her family to create experiences outside of the hospital environment. This meant providing specialized support to the family, including a nurse and respiratory therapist at all times. The care team's involvement extended beyond regular working hours and included outings to concerts, botanical gardens, amusement fairs, and going to Brianna's home on a few occasions.

Brianna celebrated a major milestone – finishing high school – with support of sip and puff technology and an iPad from her hospital room. A graduation ceremony was held at the Hospital and was attended by many of the staff, physicians and leaders who had come to know and admire her during her six months stay. Brianna lived to make it to her school's official graduation ceremony, where she received a standing ovation from a full theatre as she crossed the stage, accompanied by her father. She passed away shortly afterward, in the comfort of her own home.

The experience of working with Brianna made it clear that excellent patient care cannot be given alone. Brianna will forever be remembered in the Pediatric Intensive Care Unit for her beautiful smile, inspiring wisdom beyond her years, and ability to make the best out of every situation. As Brianna used to recite, "Life isn't about waiting for the storm to pass, it's about learning how to dance in the rain," by Vivian Greene.

Learn more about this project: Contact Kristine Thibault, Quality Lead, kthibault@cw.bc.ca

They needed to strike a balance between the questions they wanted to ask and their patients' limited energy to provide feedback

Complex Chronic Diseases

BC Women's Hospital + Health Centre

Daily feedback from patients strengthens new program

Team develops quick and easy engagement tool

The team behind the new Complex Chronic Diseases program is forging new territory. They are introducing the model of care for the first time in North America. While the program believed they were on the right track, they wanted to be certain, but didn't have a way to hear from patients on a regular basis.

The team knew they needed to strike a balance between the questions they wanted to ask and their patients' limited energy to provide feedback. So, the team developed a quick tool for patients to rate their experience, tell them what was going well, and share how the team could do better. The tool also provides an opportunity for patients to be contacted about their experience.

The program team made the decision to review feedback daily; not only to action the suggestions offered, but also to provide staff with much needed feedback around what they were hearing from individual patients.

The biggest benefit of the feedback effort is that patients are having direct input into future direction and development of the program, as their suggestions are being integrated on a regular basis. Patients have a chance to talk about their experience and many have shared that they value contributing to the betterment of the program for future patients. The team also reports that they feel validated by the feedback they are receiving and they appreciate the positive impact their work is having on a patient population that was unheard and underserved for so long.

Feedback has become an integral part of the daily routine, as staff and patients identify opportunities to make the program and team even better.

Learn more about this project: Contact Jill Pascoe, Program Manager, Jill.Pascoe@cw.bc.ca

Connect4Care is being co-designed through continuous learning with families, and is evolving as we work together

Connect4Care

BC Children's Hospital

Connect4Care: Making sense of multiple services

New program helps families navigate complex and specialty care

Feedback from families was clear: the current silo approach of healthcare services does not meet the needs of children and youth with multiple and complex presentations. Families often have to carry the weight of coordinating speciality care and they experience challenges with sharing information across multiple services. Sometimes the challenges and delays mean losing opportunities for early intervention.

After receiving consistent feedback from families and patients from three clinical areas (Sunny Hill, Mental Health, Neurology), it was clear a change was needed. Research and family feedback, including formal interviews with 12 families, showed us that there was a need for:

- increased communication and collaboration between services to plan and manage assessments and care,
- a single point of contact for families, and
- parents to be included as part of the team, fully participating as partners.

The Connect4Care Service was designed in response to these gaps and challenges. The service coordinates care and supports collaboration across multiple services for children with a high level of complex medical, behavioural and developmental needs. Connect4Care is being co-designed through continuous learning with families, and is evolving as we work together to identify and meet their needs as they navigate our services. The program also develops bridges between the hospital and services within the patient's home community.

The navigation support means families are able to spend more time with their children rather than organizing and coordinating services.

Learn more about this project: Contact Rita Janke, Quality Leader, rdjanke@cw.bc.ca, or Kate Thomas-Peter, Director Projects, Quality Improvement, Evaluation, kthomaspeter@cw.bc.ca

Families now sit together with the care team to write the transition report

Acute Rehabilitation Program

Sunny Hill Health Centre

“Why do I have to wait so long to receive our discharge reports?”

Turns out staff and patients were asking the same question

A couple of years ago, the Acute Rehabilitation Program of Sunny Hill Health Centre became aware of a problem. Families were waiting 3 to 12 weeks before receiving discharge reports from multiple clinical professionals, often causing delay in their child’s treatment or rework for the community professionals. The discharge process was confusing and frustrating to parents and patients, as well as time-consuming and laborious for staff. It was time for a change. A big one.

At every step of the review, impacted participants were involved. Program Leaders interviewed parents, families and professionals to understand the problem, and engaged community professionals who care for the patients after their discharge from the acute rehabilitation program. An interprofessional team including past family members and community professionals gathered for a one day engagement event where they reviewed the current state and best practices, developed a shared vision and goals, and created a change plan. From that co-design session emerged the clear message that we needed to move towards creating a single interprofessional transition report. A report that contains key information, that is ready on the day of transition to home, and reduces the time the team currently spends on reports.

After a lot of listening and discussions, the team mocked case studies and invited more families to test the new model and provide feedback. Through the engagement process, the new transition model emerged with families and patients as active contributors of the discharge report. Families now sit together with the care team to write the transition report, and they leave Sunny Hill with the report in their hands and with knowledge that connections with their new therapists have been made.

Learn more about this project: Contact Karen Derry, Collaborative Practice Leader, kderry@cw.bc.ca

Women, family participants and health care providers identified a range of issues that impact Indigenous peoples' access to healthcare and their overall experience

Indigenous Health Program

BC Women's Hospital + Health Centre

Reducing barriers to health among Indigenous women

Resources to improve access and coordination of complex care

There are few local resources that are equipped to co-manage both the specialized care needs and the general impact that caring for a sick family member has on a family. The Indigenous Complex Care Coordination was initiated to help address that challenge. The program is a new service under development with BC Women's Indigenous Health Program that aims to improve access to and coordination of health services for Indigenous women and children with complex care needs. Improvements focus on the journey from the community to specialized care, and back to the community.

Twenty-seven interviews were held with Indigenous women and families, health care providers, Indigenous liaison team, and health leaders in order to inform the development of the new service. Women, family participants and health care providers identified a range of issues that impact Indigenous peoples' access to healthcare and their overall experience. Lack of resources and accommodations, distance, silos, lack of community links, and complex parents'/guardians' needs were some of the issues identified as barriers to equitable access to health care.

From the interviews emerged key recommendations, such as providing comprehensive discharge planning and health and social systems navigation for Indigenous women and children with complex health care needs, working collaboratively with community to help breakdown silos between the hospital and community, and promoting cultural safety.

All these recommendations, and more, are now integrated and part of the mission of this new Indigenous Complex Care Coordination Service. An inspiring example of meeting our populations where they're at.

Learn more about this project: Contact Rochelle Lesueur, Operations Lead, Rochelle.Lesueur@cw.bc.ca

It is crucial to create an environment where people feel safe, secure, valued and important

Emergency Department

BC Children's Hospital

Engaging patients and families begins at the front door

Team builds trust and improves services through daily feedback

Treating families as partners is at the heart of BC Children's Emergency Department. When families come, their main goal is clear: they want their child to get better. From the moment they arrive, they want to know that our team is here for them, that they are safe, and that we are working together to help their child get better. The way a patient or a family is met has an impact on their whole experience, and relationships have to be established quickly so that trust can be built from the start.

It is crucial to create an environment where people feel safe, secure, valued and important. Comment cards are one of the strategies used by the Emergency Department to engage patient and families in creating a safe and welcoming place. On the top of that feedback card, patients and families can read: "What can we learn from you today?"

Through the comment cards, all input is welcome. They are designed for patients and families to tell the teams what worked for them, what did not work, what could be done better, and what is important for them and their family.

Comments are collected and reviewed on a daily basis. When comments require actions or a change in practice, team members strategize new ways of delivering services based on the feedback received.

The Emergency Department plans to setup a board where staff will report on what has been done to address patient and family feedback – closing the loop and inviting more suggestions as we move forward together.

Learn more about this project: Contact Caroline Chilvers, Quality Leader, Caroline.Chilvers@phsa.ca

We learned from our families that communication is one of our biggest opportunities for enhancing care

Family Integrated Care

BC Children's Hospital

Communication is an issue; white boards are a solution

A simple and effective way to communicate with patients, families and staff

When BC Children's Hospital embarked on its vision to design and build the new Teck Acute Care Centre, we did not envision that white boards would be such a vital component.

As part of the comprehensive planning for the Centre, we engaged a wide range of people who would be impacted, from patients and families to medical and surgical teams. We asked them to consider how family centred care could be strengthened in the new Centre. Through formal feedback and direct patient observation, we learned from our families that communication is one of our biggest opportunities for enhancing care.

As a result, we set out to maximize our use of white boards to better communicate with all team members, patients and families. The boards provide a central spot for sharing timely information and key contacts among the team, and they provide an opportunity for patients and families to write down questions and concerns for the team. The rooms in the new Teck Acute Care Center have been designed to enhance the use of the white boards as a primary method of communication for everyone – patients, families, and the care teams.

The white boards are one simple way we are demonstrating our commitment to integrate the needs of our family members into our care planning and delivery.

Learn more about this project: Contact Ashlynn Mehta, Quality Leader, Ashlynn.Mehta@cw.bc.ca

It became clear that we couldn't design the optimal care experience for mothers and babies without involving mothers at every step of the design process

Neonatal Program

BC Women's Hospital + Health Centre

"Why can't I receive my care in the same room as my baby?"

A simple question that prompted MotherBaby Care practice

When patients, families and professionals gathered to help design the new Teck Acute Care Centre, a series of challenges, suggestions and questions emerged.

One of the questions came from a mother who had recently given birth in the Newborn Intensive Care Unit. She asked, "Why can't I receive my postpartum care in the same room as my baby?"

The question took participants by surprise. Their initial response was, "because we have never done it" and "because we are not set-up for that." But that simple question planted the seed of something new, and soon, perspectives shifted. Instead of "How can we do this?" people were now asking, "How can we not?" A single-room care model would support best practices and increase parents' confidence in caring for their preterm infant.

In partnership with parents, a core group of champions took on the challenge to test the new approach. Mothers who received care in the newly renovated rooms commented on the design and how the model could continue to be improved. It became clear that we couldn't design the optimal care experience for mothers and babies without involving mothers at every step of the design process.

That crucial question, asked from an engaged parent, informed a movement in redesigning care in the Newborn Intensive Care Unit and helped us redefine a model of care where parents are present and included in all aspects of care for their infant. From there, MotherBaby Care was born.

Learn more about this project: Contact Julie de Salaberry, Program Leader, jdsalaberry@cw.bc.ca

The feedback and impact was immediate. Women shared that they appreciate the time and ability to connect and support each other

Oak Tree Clinic

BC Women's Hospital
+ Health Centre

No one understands a patient's experience like another patient

Peer Group connects diverse groups of women though shared experiences

For a long time, women facing a diagnosis of HIV told us that they wish they had the chance to speak with other women living with HIV. They wanted to talk about their challenges, support each other, and build a meaningful community. Many of the women who came to Oak Tree Clinic started to connect with each other informally and build networks outside of the clinic to support and help one another. As their grassroots network began to develop, Oak Tree Clinic and BC Women's Hospital sought opportunities to support them in growing their connections.

The teams partnered with the women who came to the clinic to better understand and support their efforts. Out of the partnership, and with support from MAC AIDS Grant, the Peer Support Groups began. The Groups are for women and are led by women – all of whom come from various backgrounds and experiences and are connected through their diagnosis.

The feedback and impact was immediate. Women shared that they appreciate the time and ability to connect and support each other. They value having a safe space to talk about their experiences without facing the stigma and judgement so many patients face related to their diagnosis. The Peer Support Groups also provide women with an opportunity to take on a leadership role in the groups if they want to.

The Peer Support Groups are enjoying strong success. Not only do they help build long-standing relationships, they also integrate new participants who are looking for connection and support. We now have five Peer Support Groups across the Lower Mainland and are continuously looking for ways to further integrate peer support into care.

Learn more about this project: Contact Jill Pascoe, Program Manager, Jill.Pascoe@cw.bc.ca

Adolescents in the groups have made a significant impact on our practice and have influenced how we provide care

Oncology/ Hematology / BMT

BC Children's Hospital

Adolescents with cancer want to be 'normal'

Oncology Teen Support group celebrates almost 10 years of connection and support

Adolescents with cancer have a wide range of support needs, not the least of which is to feel "normal." The Oncology/Hematology/BMT team at BC Children's Hospital recognizes that adolescents often feel isolated and alone as they spend extended periods of time away from their school and peer network.

To help them, The Oncology Teen Group was developed. The Group shares and copes with their cancer experiences through peer connection, relationships, and activity.

The Oncology Teen Group has been in existence for almost 10 years, and was initiated out of focus groups held with adolescents with cancer. Staff who attended the initial focus group recall being struck at how quickly connections were made. The immediate relationships that formed between the participants validated staff's observation of the need for peer contact and connection.

Today, the Oncology Teen Support group meets monthly and is facilitated by oncology program child life specialists and social workers. The team strives to promote connection and to engage each participant. The support group welcomes up to 20 participants every month – an amazing venue for support!

Over the years, adolescents in the groups have made a significant impact on our practice and have influenced how we provide care. The Oncology Teen Group is an invaluable source of vital support for teens with cancer.

Learn more about this project: Contact Kristina Jackson, Child Life Specialist, kjackson@cw.bc.ca

Staff listened, and in response, they partnered with families to create the new "Child Psychiatry Unit Guide for Families"

Child, Youth & Reproductive Mental Health

BC Children's Hospital

"We need better information about what to expect during our stay"

Families spoke, we listened, and together we developed helpful resource for families

The Child Psychiatry Unit program follows a model of care that requires patients to be on the unit for about four weeks. Families are given large amounts of information about their stay, and it can be overwhelming and difficult to remember.

Families have told the Unit that they would like a greater understanding of the program and want to feel welcomed as part of the team that supports their children during their stay. Staff listened, and in response, they partnered with families to create a new "Child Psychiatry Unit Guide for Families".

The guide assists families who are looking for a comprehensive resource that will help them understand the overall structure of the program, as well as daily routines and staff roles. The unit invited multiple families to co-design the content, provide feedback on staff developed sections, and independently author the "Tips for Families" section of the guide.

The collaboration resulted in a robust and helpful resource to empower patients and families as team members during their stay at the Child Psychiatry Unit. The guide is now provided as an e-resource and has been well received by both staff and families.

Learn more about this project: Contact Melanie Rathgeber, Quality Leader, Melanie.Rathgeber@cw.bc.ca

Finding a place where families can receive compassionate care means a lot to them

RICHER

BC Children's Hospital

Providing accessible care to those facing social barriers

Partnering with patients, families and youth in their communities

Established in 2006, the RICHER Initiative, or Responsive Interdisciplinary Child/Community Health Education and Research, serves vulnerable children and families in Vancouver's inner-city neighbourhoods – specifically Grandview/Woodlands, Strathcona and the Downtown Eastside. The first program of its kind in BC, the RICHER Initiative seeks to address the social determinants of health and challenges in health care access for children, youth and families. Through RICHER, an interdisciplinary team of health providers deliver "place based" integrated health care to families through community clinics, schools and community centres.

"If you pay attention to the places that children naturally congregate and bring care to venues that families trust, then families will get access to that care. That's proven to be very true in our experience with RICHER," says Lorine Scott, one of RICHER's founding members.

RICHER partners with families and the community to address barriers to care, and helps restore their trust in the system. Many families living in those neighbourhoods struggle with poverty, stigma and discrimination, and don't benefit from equal access to health care. Finding a place where families can receive compassionate care means a lot to them.

Thanks to RICHER, many children whose complex developmental, mental and/or physical conditions would have gone undiagnosed now receive the care they need, right in their community.

Learn more about this project: Contact Parveen Johal, Program Secretary, pjohal3@cw.bc.ca

Photo credit: Rozon Family

"We couldn't have done it without her support."
~ Rozon Family

Indigenous Health Program

BC Women's Hospital + Health Centre

Culturally safe services help a family's health journey

Victor's story illustrates the value of patient liaisons

Despite some recent improvements, it is widely recognized that there are significant disparities in the health of Indigenous Peoples in Canada compared to other Canadians. BC Women's Hospital is working with patients and families to help change that.

In an effort to create a more equitable health care experience, the Indigenous Patient Liaisons at BC Women's Hospital offer assistance to improve the quality of health care delivery to Indigenous patients through direct patient support and staff education. Indigenous Patient Liaisons partner with families to recognize and mitigate barriers to health and wellness. Below is a testimony of a family who benefited from support of the Indigenous Patient Liaison:

"Our journey was a whirlwind that started when we came to BC Women's Hospital to eventually have our son Victor born via C-section a week later. From the beginning, Susan Soloman, Aboriginal Patient Liaison, was there for us when we needed her. Susan was able to help us set up accommodation and meal allowance payment, which took a lot of stress off of us. I stayed in Vancouver with my son and my husband went back and forth to the Island to work and came back on his days off to be with us. Susan knew we were going through a tough time and was always available, even just to lend an ear. During our time in Vancouver she was able to connect us with an Elder who gave Victor a traditional welcome ceremony. This made us feel so special and part of the family and community. It was very easy to connect with Susan if we had any questions during our time there, via phone, text message or email; she was very quick to get back to us. We are now in our hometown of Victoria and Susan continues to help us. We will be back in a few months for Victor's repair surgery and hope to connect with her again. We couldn't have done it without her support. Sincerely, the Rozon Family"

Learn more about this project: Contact Susan Solomon, Indigenous Patient Liaison, susan.soloman@cw.bc.ca

"Most people in your situation would not take that on."
Her reply,
"I'm not most people."

Perinatal Program

BC Women's Hospital + Health Centre

Paving the way for women with spinal cord injury

Mother of two helps pave way for others who want to have children

A few years ago, the Perinatal team of BC Women's Hospital started noticing an increase in pregnancies among women with Spinal Cord Injury. The perinatal journey for women with spinal cord injury and their families was not a smooth one, and there was little evidence-based research published to guide clinicians in their perinatal care.

Here is "AA's" story. A woman with spinal cord injury, AA wanted to get pregnant. When she asked her family doctor about her options, she heard, "Most people in your situation would not take that on." Her reply, "I'm not most people."

AA was referred to BC Women's Hospital by the GF Strong Sexual Rehabilitation Service, and her journey began. When she became pregnant, she often had to help make the connection between maternity services and the spinal cord specialists, and she recalls that they were "almost like separate worlds."

Her care team listened to what she had to say and learned more about her journey. Because of that partnership, bridges were formed. AA's engagement contributed to the creation of the Spinal Cord Injury Perinatal Interest Group, a multidisciplinary group that includes patients and families, representatives of BC Women's, GF Strong Rehabilitation, Spinal Cord Injury BC, and other health professionals. Together they work to increase dialogue and awareness between health professional and women with spinal cord injury who are interested in sexuality, fertility and reproductive health.

Out of this collaborative work, BC Women's has accessible rooms for delivery and postpartum and continues to educate and bring people together to ease the journey for pregnant women with spinal cord injury. AA is now the mother of two healthy children, and her engagement paved the way for others.

Learn more about this project: Contact Melanie Basso, Senior Practice Leader, mbasso@cw.bc.ca

Families walk the line between supporting young adults and empowering them to take responsibility for their health

Organ Transplant

BC Children's Hospital

Engagement tool helps kids and families transition to adult care

Organ Transplant team ON TRAC to support transition

Transitioning from childhood to adulthood can be difficult at the best of times. For chronically ill children, the transition into adult programs can be more stressful.

Patients and families have shared their plight with us. They've told us, it's like falling off a cliff. Kids have to change care providers and orient to new programs, while families walk the line between supporting young adults and empowering them to take responsibility for their health.

This isn't news to the Multi-Organ Transplant team. Receiving an organ transplant can enhance quality of life for patients with life-long health challenges, but it also means being on anti-rejection medication and having regular medical check-ups for the rest of their lives.

Children receiving organ transplants need help to start planning for their transition to adult life. To guide them, the Multi-Organ Transplant team started to use the ON TRAC tools. ON TRAC is a provincial initiative to support youth and young adults with chronic health conditions and/or disabilities as they plan, prepare and transfer from pediatric to adult health care services. The goal of transition is to offer a step-by-step process (beginning at age 12), where care providers help youth and parents gain skills and knowledge to enter into the new adult system (by age 18). The toolkit offers activities, tools and resources, which are fully adaptable for each patient.

Using ON TRAC as an engagement tool allows youth and young adults to become empowered and better equipped to navigate their care and advocate for what they need. This is a path we are happy to walk with them!

Learn more about this project: Contact Jessie Ahuja, Registered Nurse, jahuja@cw.bc.ca

Photo credit: Youth Advisory Council

"Advising hospital policies from a youth perspective, and helping professionals see how "kids think" are very important to us."
~ Youth Advisory Council

Youth Advisory Council

BC Children's Hospital

Network of youth provides insight to shape care now and in the future

Youth Advisory Council drives patient education and engagement projects

The BC Children's Hospital Youth Advisory Council is a group of diverse and energetic youth, aged 12-23, who are dedicated to promoting excellence in patient-centred care for adolescents. The Youth Advisory Council was established in 2010 to help design and implement a number of youth driven patient education and engagement projects.

Not only does the Council focus on improving patient care services, it also provides vital peer support for patients and siblings who are coping with the reality of their physical and mental health challenges during a vulnerable time. The Council demonstrates the potential to drive change through youth engagement, shaping both present and future medical practice and health care policy.

When asked what the members were the most proud of, they joyfully admit that, "Advising hospital policies from a youth perspective and helping professionals see how "kids think" are very important to us." The ability to bond with people from all backgrounds and health professions, having their feedback taken seriously, and witnessing their impact on the work done at BC Children's is also a source of pride for these dedicated, resourceful, and dynamic advisors.

Among their many accomplishments, their "Get oriented" video – a tool for new youth patients navigating their journey at BC Children's Hospital – has more than 25,000 You Tube views. Impressive!

The Council's tireless commitment and service to the hospital, in the face of their own significant health challenges, is an inspiration.

Learn more about this project: Contact Sabrina Gill, Nurse Clinician, sgill2@cw.bc.ca

Photo credit: Debbie Johannesen

These simple words, asking for my daughter's feedback, and partnering with her in her care, was the lifeline she needed

Obstetrics Services

BC Women's Hospital + Health Centre

"What can we do to help you feel better?"

Reassuring words and thoughtful questions helps new mom through birthing experience

In my current role as the Quality and Safety Director for BC Women's Hospital, and my new role as a Grandmother, I witnessed many inspiring moments where my daughter and her husband partnered with the healthcare team for the birth of my granddaughter. My daughter, who is a healthy 32-year-old woman, was planning on delivering at BC Women's Hospital under the supervision of a Registered Midwife.

Her due date came and went, and my daughter was referred to BC Women's to have herself and the baby evaluated. Things were perfectly normal which was comforting. However, as a long weekend was coming she was worried it would be days before she would be seen by an obstetrician should she not go into labor by herself. She voiced her concern, and the obstetrician again reassured my daughter that all things looked good, but he then asked, "What can we do to help you feel less worried about your baby?"

These simple words, asking for my daughter's feedback, and partnering with her in her care, was the lifeline she needed. She felt heard and cared for.

The baby was checked on the long weekend and was in good shape. A few days later my daughter was admitted to the hospital and labour was induced. Every step of the way during her labour and birthing experience, my daughter and her husband were well informed and they always had input into the decisions made. To me, this was healthcare at its finest. The nurse, midwife, obstetrician and anesthesiologist worked in concert to give my daughter and her husband a wonderful birthing experience. The result was a calm and serene birth of a beautiful baby girl named Zoë. We are grateful to the BC Women's team for providing excellent patient centred care!

Learn more about this project: Contact Debbie Johannesen, Quality & Safety Director, djohannesen@phsa.ca