

Communicating for Engagement

Why communicate for effective engagement?

- Motivate participation.
- Build trust in the process and people involved.
- Set and meet expectations of the individuals involved.
- Respect the investment of time of those individuals.
- Validate what they said, and what was heard.
- Inform them of results and how the feedback influenced decisions.

***Quick Tip: Avoid a communication void:** The absence of communication can be filled by negativity, rumour, or misperceptions which can risk the project and lead to unnecessary time addressing and fixing issues.*

Building blocks for engagement communication

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| <p>1. Communicate clear value, purpose, goals and expectations, along with a proposed level of the engagement.</p> | <p>3. Continue to communicate after engagement sessions: acknowledge participation, and additional personal check ins to clarify concerns or make additional connections.</p> |
| <p>2. Communicate intentionally in the session itself to capture authentic feedback (whether in person or zoom)</p> | <p>4. Use consistent feedback loops on multiple communications channels to inform session participants and other stakeholders about what was heard, next steps, and how feedback will be/was used.</p> |

***Quick Tip: Communicate a strong value proposition for busy doctors and commit to meet it.** Message: Why engage? What will you influence with your investment of time?*

1. Communicate clear value, purpose, goals and level of engagement.

Plan and be clear on your messages, and communicate:

- What is the opportunity and purpose?
- Why engage? What is the value of investing time? What decision will participants influence?
- Who will be involved?
- What is the level of engagement: inform, consult, collaborate or involve? (IAP2)
- What are the expectations: when, how, and how much time it will take, remuneration?
- What questions will you ask specifically?
- What background information and evidence can you share to consider?
- How will feedback be used, specifically, in the decision?

Quick Tip: Use MSA newsletters, department meetings, e-mail and/or personal invitations between colleagues (the most effective) to reach out to physicians and other stakeholders for participation.

2. Communicate intentionally within the session

Before the meeting

- Co-create agendas with stakeholder groups to ensure on same page before meeting about goals and expectations. Ask: *How does your stakeholder group want to be engaged? What do we want to achieve together?*

During the meeting

- In the meeting, communicate value, purpose, expectations, level of engagement, and how feedback will be used - and intended level of engagement.
- Check in with participants to validate their expectations: Is this how you expect and want to be engaged? Suggested adjustments?
- Leave time for participants to evaluate the meeting: Ask:
 - *Do you have additional thoughts to share?*
 - *Were your expectations met? (check: inform, consult, collaborate or involve?)*
 - *What could be improved?*
What was most meaningful to you personally about this engagement?
 - *What would you like to see for next steps?*
- *Quick Tip: Face-to-face communication in meetings is a more effective than e-mail. Plan carefully what you need to communicate in that session to use the opportunity for the greatest benefit.*

3. Continue to communicate after engagement sessions

- **Send a thank you e-mail to all participants** with:
 - appreciation of their time and insights
 - an overview of what was heard: key themes, insights and learnings ([Feedback Loop template below](#))
 - next steps / expected process for using the feedback.
- **Personally phone or e-mail with participants after engagement meetings** to check in on how they are feeling, to clarify issues, and/or follow-up on ideas or making connections.
- **Offer an online option** for further feedback, such as online polls.
- With longer projects that take time for results, **ensure you continue to communicate along the way** while the work is underway to arrive at an outcome or decision.

Quick Tip: Don't let this communication step fall through the cracks. The engagement is not over when the meeting is over. Conversations need to continue.

4. Create consistent feedback loops and channels

- **Prepare a "what we heard" summary** and messages about how specific feedback was used to influence the decision. [Get Feedback Loop template here](#)
- **Share feedback details in person** at relevant committee, department MSA meetings.
- **Additionally share details by e-mail** with those who participated.
- **Share a shorter summary** with members who did not participate: e-news, MSA meetings.
- **Share in person at an MSA meeting using an interview-style approach** for even greater impact and trust building in the process. Ask leaders in person:
 - *What did you set out to do, and who did you hear from?*
 - *What key themes and insights and what did you learn?*
 - *What aspects of the feedback helped to improve/change the intended decision?*
 - *How did/will the feedback specifically influence the decisions?*
 - *Barriers? How/why could you **not** use (some) feedback?*
 - *What was the most positive outcome of the engagement?*
- **Offer online poll for further feedback** about how participants felt about the decision, and how the process could have been improved for future engagements.
 - What was most meaningful about this engagement? How can it be improved?
- **Share positive results upward with additional partners and health authority executives** to demonstrate the value of physician engagement.

Quick Tip: Communication feedback loops can't be overlooked for their critical importance in the engagement process to build trust and momentum for further work - and overall to build a sustained, engaged medical staff culture.

ADDITIONAL RESOURCES

[Communications best practices for busy doctors \(pdf\)](#)

Effective Meeting Tips - from Interior Health Regional Forum

TIPS YOU CAN USE: Effective meetings



More than just a meeting: creating a safe, effective forum and environment for building trust, relationships, and collaboration



BEFORE THE MEETING

Timing and method

- Respect schedules: meet outside of clinic hours.
- Ramp frequency up /down as needed.
- Face to face is best: Zoom is popular for flexibility of schedules.

Planning for discussion

- Co-create agendas with each group's burning issues + shared priorities.
- Include topics worth everyone's time: bold, relevant, burning issues + wellness.
- Invite guests as needed: e.g. operations, engagement partners, quality leaders.
- Discuss rules for facilitating a respectful, psychologically safe environment.

Facilitation

- Have consistent leaders commit to attend meetings regularly, and listen.
- Try to include physician facilitators who still do clinical work.



DURING THE MEETING

Setting the tone

- Acknowledge and check in around wellness.
- Allow people to express vulnerability and anxiety.
- Be inclusive: encourage people who wouldn't normally speak up.
- Be open to courageous and frank discussions.
- Elevate the positive: gratitude, hope; what people *can* do.
- Be mindful of silos: ensure one group doesn't dominate.

Effective engagement

- Fill information voids with facts and details.
- Have an open round table to solicit ideas and concerns.
- Don't have the host do all the talking. Let physicians discuss problems together.
- Be transparent about health authority limitations.
- Be mindful about setting expectations.

Sharing up and across

- Share news from the ground & regional/provincial tables.



AFTER THE MEETING

Follow through

- Flag what can be escalated and supported.
- Follow up and always get back to people using formal and personal feedback loops.
- Have leaders available after the meeting for continuity of strategies.

Continued sharing

- Have participants commit to sharing information back to their local groups.
- Connect groups together for further cross-pollination.

