

**BUILDING BRIDGES:  
COLLABORATIVE HEALTH POLICY DEVELOPMENT**

**FINAL REPORT**

**Submitted to:**

Health Canada  
Population and Public Health Branch  
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Maritime Centre  
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**April 2004**

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### Appendices

Project Time Line and Work Plan

Focus Group Results from Policy Development Workshops

Results from Meetings on Policy with Ethnic Minority Seniors and Health Care Boards

Letter from Minister of the Department of Health and Community Services

Letter from Registered Nurses Association of Ontario

Abstract of the paper to be presented at the Registered Nurses Association of Ontario Conference, "Effecting Changes in Elder Health Care based on Identified Healthcare needs of Ethnic Seniors"

## 1. Rationale

Many immigrant and ethnic minority seniors in Metro St. John's are challenged by issues related to their accessing and using health care services, including hospital, home-based and long-term care. These issues include language barriers, cultural and religious differences, dietary needs, privacy, unwanted isolation and lack of and access to information, which might place their health at risk. This information was part of the data collected by two previous projects of the Seniors Bridging Cultures Club.

With financial assistance from the "Population Health Fund" of Health Canada and the "Community Investment Fund" of Health and Community Services – St. John's Region, the Seniors Bridging Cultures Club developed and implemented the project, "Building Bridges: Health Care For All." During the implementation of the project, it became evident to participants and key stakeholders that it was necessary to continue the process of collaboration between ethnic minority seniors and the health care leaders with a goal to influencing health care policies. This was accomplished in partnership with representatives from the three health care boards, ethnocultural associations and community organizations in the St. John's Region.

## 2. Project Description

### a) *Project Goals, Objectives and Intended Outcomes* Goals

- To develop strategies which would build on the awareness raised during the "Building Bridges: Health Care For All" conference held with health care leaders and ethnic minorities in the St. John's region in October 2002;
- To work with health care leaders in the development of culturally-appropriate health care policies.

### Objectives

- To facilitate workshops with ethnic minority seniors on policy development, with a view to preparing them to influence health policies;
- To hold cultural sensitivity workshops with the three health care boards in the Metro St. John's Region; namely, Health Care Corporation of St. John's, Health and Community Services – St. John's Region, and St. John's Nursing Home Board;
- To provide opportunities for ethnic minorities and health care leaders to work together to develop culturally-appropriate health policies;
- To monitor the progress regarding the commitments made by health care leaders at the end of the "Building Bridges: Health Care For All" conference.

## Intended Outcomes

- To build capacity among ethnic minority seniors to influence policies affecting their health care;
- To continue the process of collaborating with leaders and senior management of the three health care boards in the development of more culturally-appropriate health care policies.

### b) *Primary Project Activities*

- Held regular meetings with Advisory Committee, consisting of representatives from the three health care boards, ethnocultural associations and community organizations;
- Researched and developed policy tools for workshops;
- Held two policy workshops with ethnic minority seniors;
- Organized meetings with the leadership of all three health care boards;
- Organized preparatory meetings with ethnic minority seniors to present policy issues to health care leaders;
- Presented health care concerns and recommendations to all three health care boards;
- Monitored and evaluated the project by submitting quarterly reports to Health Canada and monthly reports to the Seniors Resource Centre Board.

### c) *Inclusion of Target Population*

The project included ethnic minority seniors and representatives of the health care boards in the following ways:

- Served on the Advisory Committee;
- Liaised with respective health care boards;
- Reviewed policy development workshop tools;
- Facilitated policy development workshops;
- Participated in the policy development workshops;
- Connected project with ethnocultural communities;
- Prepared presentations to deliver to health care leaders and staff;
- Presented health care needs and recommendations to health care leaders of three health care boards;
- Made presentations on cultural sensitivity during a public Ethics Forum organized by the Health Care Corporation of St. John's.

### d) *Managing and Monitoring the Project*

The following approaches were used to manage and monitor the project:

- Adhered to the Work Plan and Time Table submitted with the project proposal (see attached);

- Held regular advisory committee meetings with key stakeholders;
- Submitted quarterly reports to Health Canada;
- Submitted monthly reports to the Seniors Resource Centre Board;
- Presented regular reports to the Seniors Bridging Cultures Club;
- Evaluated policy development workshops;
- Kept regular correspondence with health care leaders.

### 3. Partnerships

The roles of partner organizations included: serving on the advisory committee, connecting the project to the appropriate health care leaders and ethnic minority seniors, assisting in facilitating the policy workshops, monitoring and evaluating the project, participating in meetings with health care boards and making presentations on health care policy issues.

The members of the Project Advisory Committee were:

Fagner, Glenda	Health Care Corporation of St. John's
Flynn, Lisa	Seniors Resource Centre
Hernandez, Maria	Seniors Bridging Cultures Club
Howlett, Irene	Health and Community Services – St. John's Region
Kashyap, Renu	Link Volunteer
Kutty, Yamuna	Link Volunteer
Law, Rebecca	Memorial University of Newfoundland School of Pharmacy
Lester, Rosemary	Seniors Resource Centre
Mackey, Janet	Association for New Canadians
McMillan, Elsie	St. John's Nursing Home Board
Noseworthy, Elizabeth	Seniors Resource Centre
Power, Bill	Seniors Bridging Cultures Club
Quaicoe, Lloydetta	Project Coordinator
Sen, Purnima	Newfoundland and Labrador Health in Pluralistic Societies
Singh, Puran Cheema	Sikh Society of Newfoundland and Labrador
Swamidas, Melly	Multicultural Women's Organization of Newfoundland and Labrador

Partnerships were also established with the leaderships of the three health care boards:

Allan Bradley (C.E.O.)	St. John's Nursing Home Board
Beverly Clarke (C.E.O.)	Health and Community Services – St. John's Region
George Tilley (C.E.O.)	Health Care Corporation of St. John's

### 4. Evaluation

- a) and b) There is a separate Evaluation Report.
- c) *Project Achieved Intended Outcomes*

The project achieved its intended outcomes by building capacity among ethnic minority seniors to influence health care policies. The two policy

development workshops were effective in preparing the ethnic minority seniors who made presentations to the health care leaders and senior management of each health care board.

The project also continued the process of collaboration with health care leaders who were willing to implement the recommendations presented by ethnic minority seniors in the short term and considered the long-term implementation of other recommendations (see attached).

The Seniors Bridging Cultures Club and the ethnic minority communities built stronger relationships with the health care leaders. This was evident in the opportunity given to one of the ethnic minorities to make a presentation during an Ethics Forum organized by the Health Care Corporation of St. John's.

As a direct result of the project, an ethnic minority senior currently serves on the Seniors Liaison Committee of the Health and Community Services – St. John's Region. In response to our request, the provincial Minister of Health and Community Service has considered for appointment seniors from ethnic minority groups to the Health Boards in St. John's (see attached letter).

d) *What Worked and What Didn't Work*

Engaging the key stakeholders in the project worked well because, serving on the advisory committee and meeting on a regular basis kept them knowledgeable about the progress of the project. The policy development workshops were effective in empowering ethnic minority seniors to take charge of the project and bring their concerns and recommendations to health care leaders.

Utilizing a Work Plan and Time Table and holding regular informative meetings kept everyone informed of what was happening. This was integral to the success of the project. Collaboration between the ethnic minority seniors and the health care leaders, who are the policy decision makers, was a valuable strategy as it allowed the health care leaders to hear first hand from the ethnic minority seniors.

The fact that health care leaders took the time from their busy schedule to meet with ethnic minority seniors demonstrated to the seniors that these leaders were interested in their concerns and willing to do something about it. Implementing some of their recommendations reinforced the willingness of health care leaders to make their policies and the delivery of services more culturally inclusive.

We learned from this project that it takes time to build relationships and cultivate the kind of rapport needed to sustain such a relationship. Both the health care leaders and ethnic minorities need each other to improve the services and programs for seniors. This project also taught the ethnic

minority seniors that they have a lot (their experiences and knowledge about the issues) to offer policy decision makers. If given the time, guidance and human and material resources, ethnic minority seniors do have the capability and capacity to influence policies.

What didn't work was the opportunity to take the work back to the larger ethnic minority community. Building capacity to influence public policy takes years over a period of time to develop relationships with policy decision makers and follow-up on the progress of the awareness raised and activities accomplished. Had more time being given to the project, it would have allowed for the implementation of actual written policy changes.

e) *Utilization of Evaluation Results*

The evaluation results are already being used in promoting Health Canada's success story as part of a resource to be disseminated shortly, entitled "What Works! Putting Community Issues on the Policy Agenda."

The evaluation results will be used to continue the process of influencing health care policies through presentations and involvement by ethnic minority seniors on health care related committees.

The Seniors Resource Centre is on the e-mail list of the "Task Force on Newcomer access to Health Care in Nova Scotia" and will be sharing the results of the project with them.

## **5. Sustainability**

a) *Aspect of the project that will remain after the funding ends*

During the project's advisory committee meeting on March 29, 2004, it was decided that the committee will continue to meet and carry out the activities in influencing health care policies through monitoring the recommendations put forward to health care leaders. The Seniors Resource Centre would continue to provide support through the program coordinator of the Seniors Bridging Cultures Club. Ethnic minority seniors will be available to make presentations to health care institutions, as and when these opportunities become available.

b) *Sharing Results of the Project with Others Working on this Issue*

One of the Advisory Committee members will be presenting key aspects of the project at the 3<sup>rd</sup> Annual International Conference of the Registered Nurses Association of Ontario. The conference, entitled "Older People Deserve the Best! Building a Policy Framework and Innovative Service for Elder health and Elder Care," will be held in Toronto on September 22 & 23, 2004 (see attached).

The information gathered from the project will be shared at the Seniors Resource Centre's provincial conference, "The Faces of Elder Abuse" to be held in St. John's in May 2004. This conference will involve a wide range of key stakeholders, including the health care professionals.

## **6. Conclusions and Recommendations**

This has been a valuable project because the collaboration among health care leaders, community organizations and ethnic minority communities has built the foundation for further opportunities for more inclusive and long-term solutions to the health care needs of ethnic minority seniors in the St. John's Region. As demonstrated by Health Canada's choice of this project for its success story, the process was as important as the accomplishments. Members of the Seniors Bridging Cultures Club and ethnic minority seniors now have the opportunity to serve on the St. John's Health Boards and committees, including the Seniors Liaison Committee of Health and Community Services – St. John's Region.

This final report will be sent to the leaders and senior management of all three health care boards, advisory committee members and participants of the project. As indicated above, the advisory committee recognizes the importance of this project and the need to keep these issues on the agenda of the government and health care boards. Advisory Committee members have committed their time and resources to assist in monitoring the recommendations presented to health care leaders and seeking other sources of funding to continue on a larger scale the health care policy goals of the Seniors Bridging Cultures Club.