## Client & Family Centred-Care is a Guiding Principle of The Port Hope Northumberland Community Health Centre (PHNCHC)

1. The governing body, leadership, and staff of the PHCHC are fully committed to quality and safety and to the **principle of client and family centred care.** Therefore there is a desire to seek input and feedback from clients, and to partner with them and the community we serve. This includes:

    a) **Gathering** information from them about their needs
    b) **Partnering** with them to design our programs
    c) **Measuring, monitoring and evaluating** services together
    d) **Soliciting** feedback and advice on how to improve the quality, accessibility, and safety of our services
    e) **Learning** from them about the barriers and experiences they face when trying to access services
    f) **Providing** information needed to support their involvement
    g) **Reporting** back to them on the results of initiatives and on the quality of our performance.

    Evidence:

    - Client and Family Input Matrix
    - Focus Groups
    - Client & Family Advisory Roundtable (CFAR)
    - Membership on Decision Making Committees
    - Client Experience Surveys
    - Compliments & Concerns Brochure
    - Complaints Policy
    - Suggestion Box
    - Client Orientation Sessions
    - Program Feedback Forms
    - Occurrence Reports
    - Website

2. The PHNCHC provides a wide variety of programs and services that have been implemented in response to ongoing assessment of the community's needs. The Centre sees 'The Community' as its broad-based client and works to address the health care needs of 'The Community of Northumberland'. The CHC philosophy of care encompasses the Social

Determinants of health and works to engage the community in seeking solutions to address the systemic issues that are affecting the health of the citizens of Northumberland. Seeking input from the Community is an ongoing process and at the heart of the PHNCHC's mandate.
Evidence:

- Community Needs Assessment
- Model of Care
- Documentation of Social Demographics
- Community Partnerships and Committee Involvement
- Involvement in Health Links, Collective Impact Projects
- Canadian Index of Wellbeing Project

3. Additionally, all individuals who seek health care from the PHNCHC health care team are placed at the center of their care and work in partnership with the team to create a plan of care that works towards their goals.
   Evidence:
   - Quality Improvement Plan (QIP) Progress Report on Client Experience Survey
   - Client Feedback
   - Client Orientation Messages

4. Each member of the PHNCHC clients' health care team is focused on getting to know their clients and on earning their trust so that they are able to work together to optimize health and wellbeing.
   Evidence:
   - Length of Appointment Times
   - Client Feedback
   - Outreach Work
   - Client Rights and Responsibilities
   - Complaints Process
   - Compliments & Concerns Brochure

5. Along the health journey, clients may visit many different places such as, specialists, the hospital, community agencies, pharmacies, mental health centres, etc. Wherever the journey takes clients, the PHNCHC health care team wants to be fully involved and play an integrated and coordinated part in their care.
   Evidence:

- Work with Hospitals to Obtain Shared Data on Patient Care
- Involvement in Health Links
- Tracking of Referral Data (internal/external)
- Community Mobilization Situation Table
- Outreach Sites
- Community Partnerships
- Education/Tours/Information Exchange with Other Agencies

6. The primary health care team and the allied health professionals at the PHNCHC work together to offer personalized and integrated health care plans, medication reviews, health information and teaching, coaching and advice, support and encouragement, as well as referrals and connections to other services as required.
   Evidence:
   - Internal Consultations and Referrals
   - Shared Electronic Medical Record (EMR)
   - Cross Team Interprofessional Collaboration (e.g. Primary Care/Diabetes Team, Memory Clinic, Pharmacist Consultation, Inter-team Meetings)

7. The PHNCHC seeks to increase accessibility by opening early (7:00 am) three mornings a week, staying open later (until 7:00 pm) two days a week, providing an 'after hours' on-call service to help clients obtain medical direction when the Centre is closed, and by maintaining a good supply of urgent appointment spots each day to get clients in as soon as possible when they are sick. The Centre also works to reduce barriers to access for those unable or reluctant to seek services at the CHC site by conducting home visits and by doing outreach in the community where people with barriers to access often meet or access other allied services.
   Evidence:
   - On Call Data
   - Posted Hours
   - Daily Urgent Care Access
   - QIP Progress Report
   - Outreach Work
   - Home Visits