

Applying a framework to promote effective communication of public health guidance to emergency department clinicians

Public Health 2016 Workshop

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DISCLOSURE OF COMMERCIAL SUPPORT

- None of the presenters at this session have received financial support or in-kind support from a commercial sponsor.
- None of the presenters have potential conflicts of interest to declare.



Learning Objectives

1. To **describe a framework** for effective communication of public health guidance to emergency department clinicians in the setting of emerging public health incidents
2. To **apply a framework** for effective communication of public health guidance to emergency department clinicians to example scenarios of emerging public health incidents
3. To **compare and contrast** how a framework for effective communication of public health guidance may be applied in different public health settings

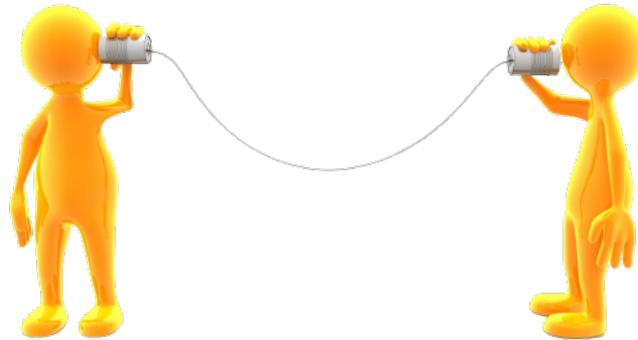
Agenda

0 - 10 min	Introductions & opening activity
10 - 25 min	Framework presentation
25 - 35 min	Questions on framework
35 - 70 min	Group activity: Speed dating
70 - 85 min	Wrap-up
85 - 90 min	Evaluation

Opening Activity

Meet your table:

- Name, role, organization
- What would your role be in communication during a public health incident?



Objective 1

- To **describe a framework** for effective communication of public health guidance to emergency department clinicians in the setting of emerging public health incidents

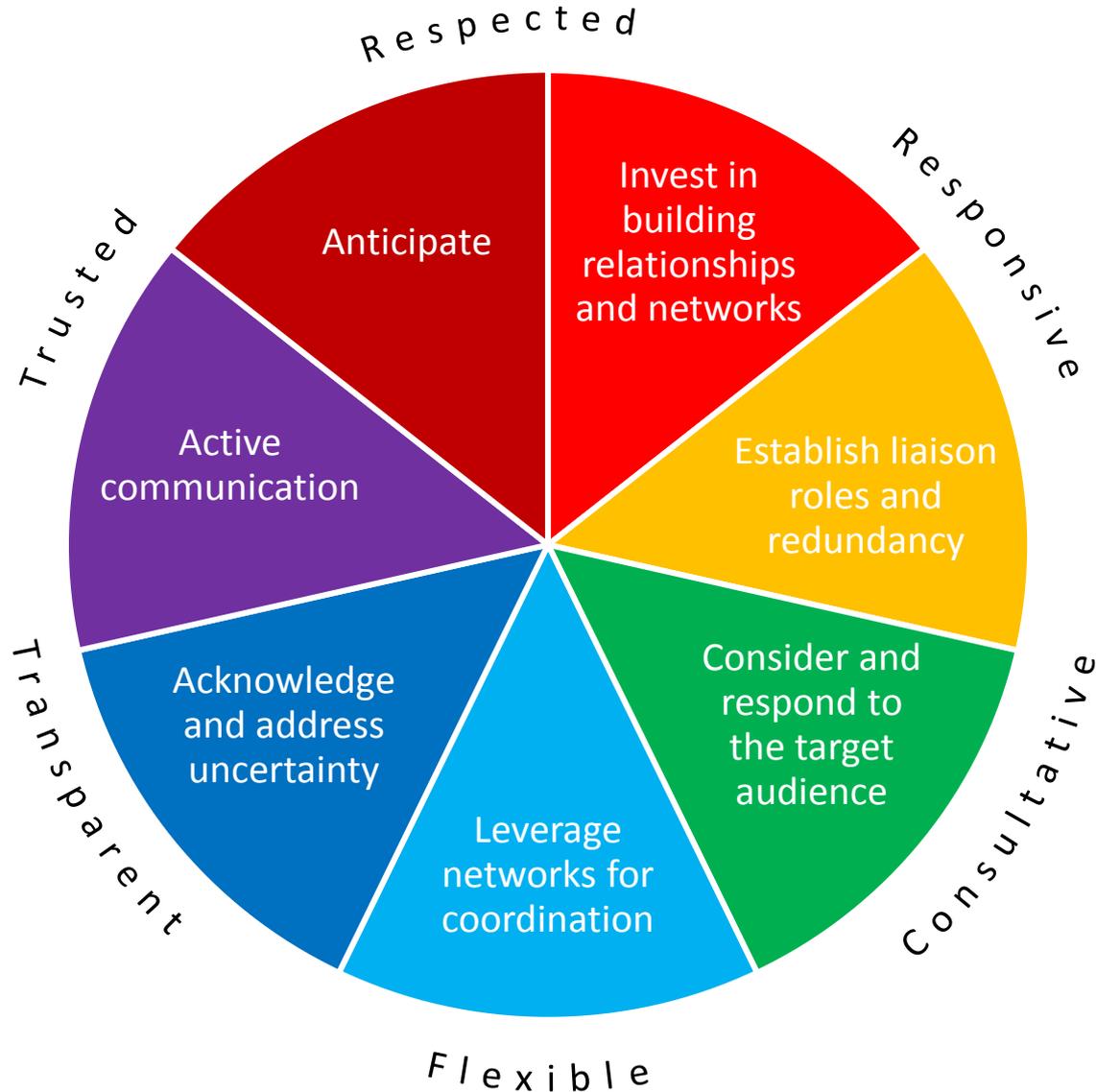
Rationale for framework

- Limited evidence to inform communication between clinical settings and public health
- In the context of diverse, emerging public health incidents, communication from public health is often urgent
- The emergency department (ED) represents the front line of the health system and a key interface with the community
- Clinicians working in EDs are at high-risk for exposure to emerging health threats
- Evidence to inform communication in this setting is particularly scant

Development of framework

- The study firstly explored strategies and challenges in communication at the local level in Ontario
- Secondly, we developed the framework for effective communication of public health guidance to ED clinicians
- Developed from a **qualitative** research study
- Interviewed 26 key informants (urban, urban-rural, rural):
 - Public health decision-makers
 - Emergency department administrators
- Interviews conducted over 4 months (2014-2015)

Framework for effective communication of public health guidance to ED clinicians

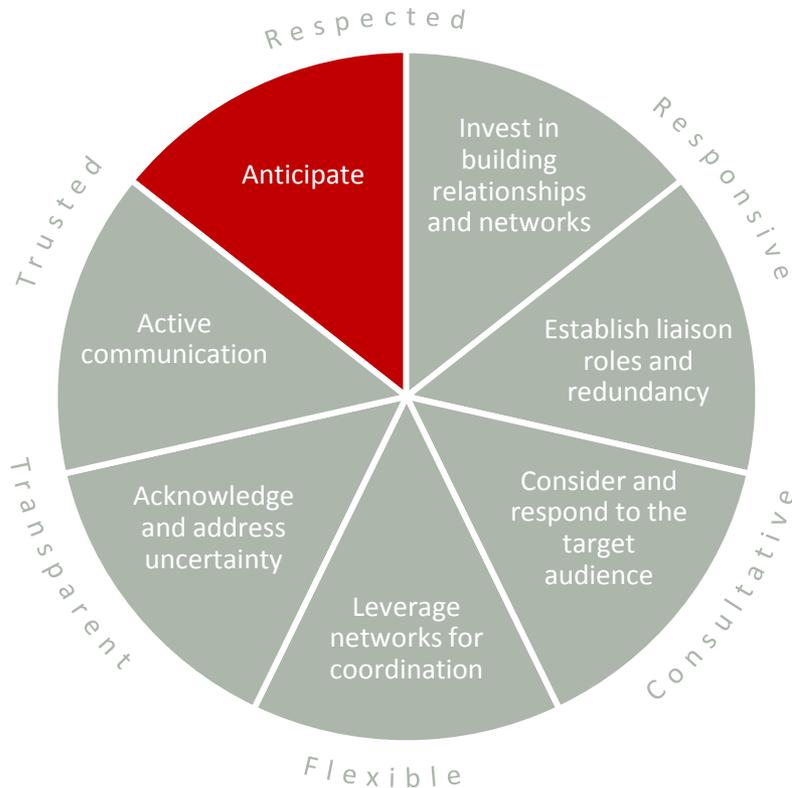


Setting the stage – Emerging infectious disease

- **Setting:** Ontario
- **Public health risk:**
 - Potential for imported cases of an infectious disease not commonly seen in Ontario
 - This disease is spread by close contact and has associated serious morbidity
 - Implications for health care workers

Anticipate

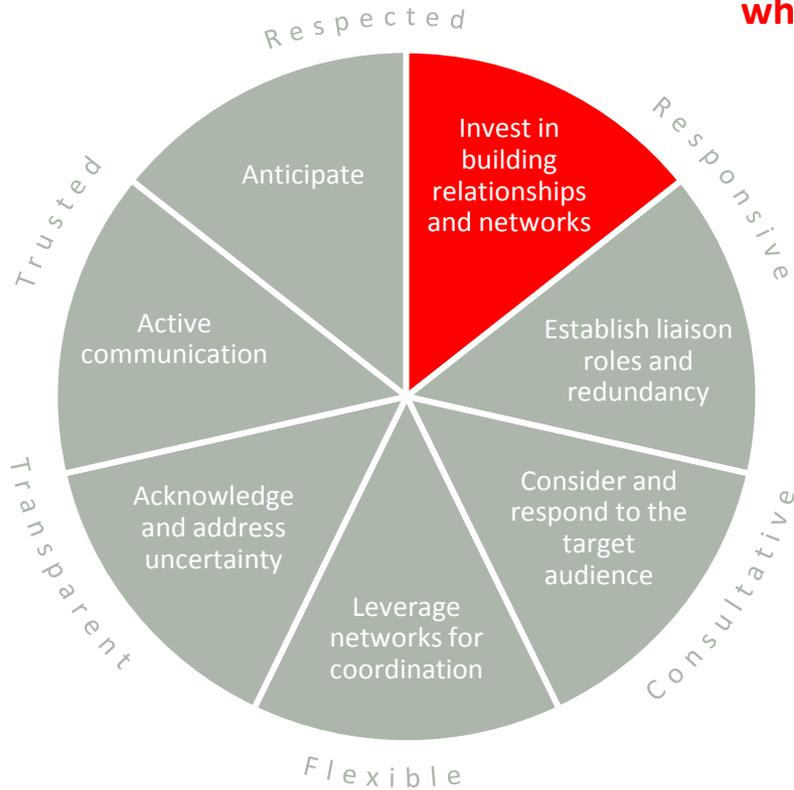
“...probably one of the most important roles is anticipation.” (PH participant)



Prepare and plan collaboratively in the non-emergency setting to build capacity for effective communication, bridge sectors and jurisdictions, and build relevant networks

Invest in building relationships and networks

“Somebody...who will help you with your knowledge translation piece when it counts.” (PH participant)



Establish, promote and invest energy in relationships, partnerships and networks

Establish liaison roles and redundancy

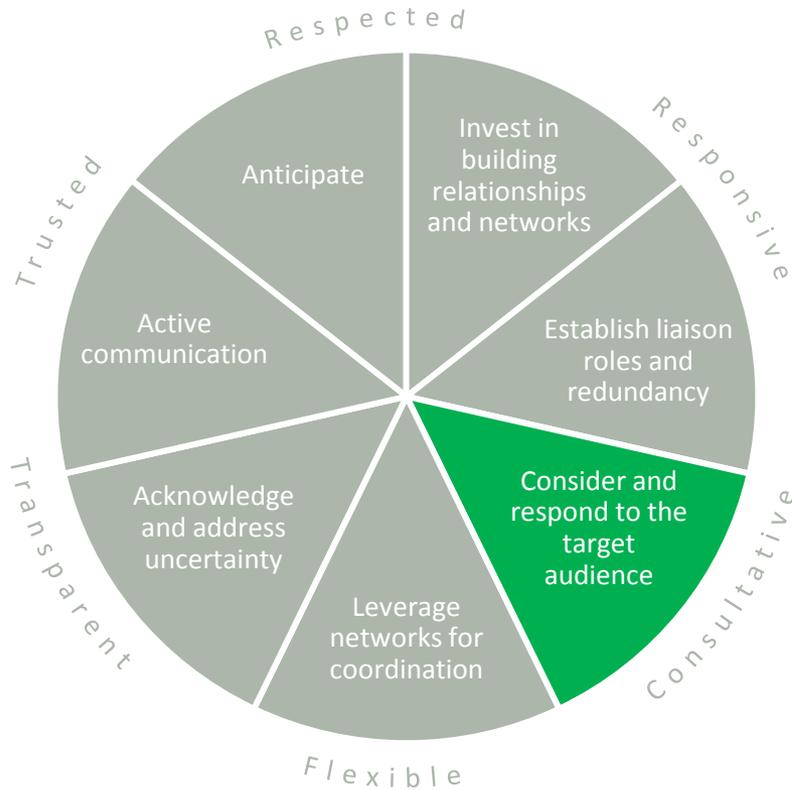
“I work in collaboration with infection control, and I look to them for a lot of guidance...” (ED participant)



Develop and implement liaison roles to effectively transmit timely communication, promote redundancy across communication channels, and provide opportunity for feedback

Consider and respond to the target audience

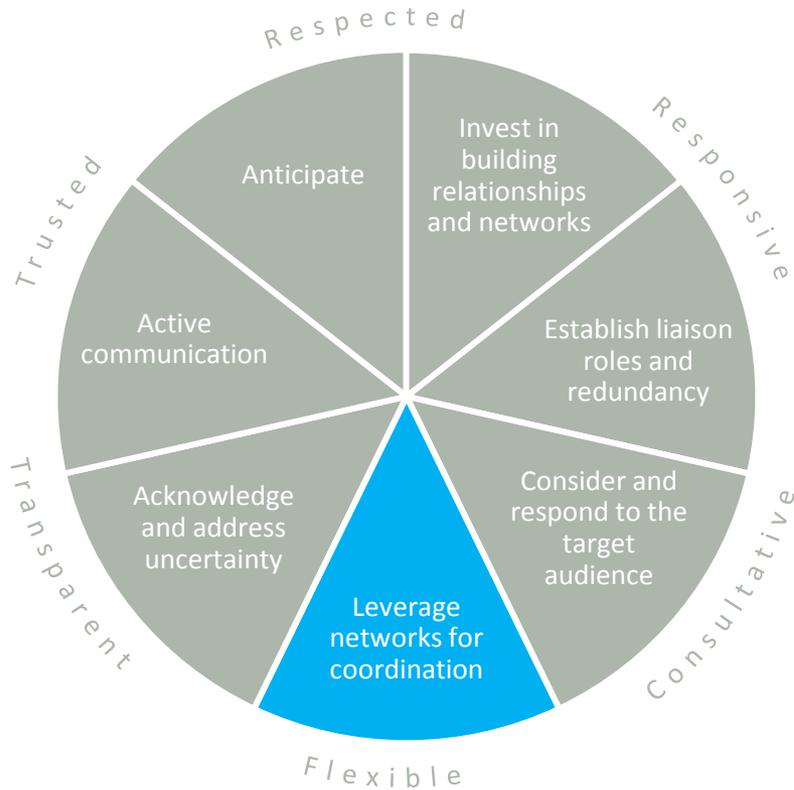
“They have very hectic shifts. They are not there during regular working hours.” (PH participant)



Consider the unique demands of the target setting and **recognize incongruities** across settings. **Develop accessible and feasible methods** to facilitate the exchange of information that accounts for the setting.

Leverage networks for coordination

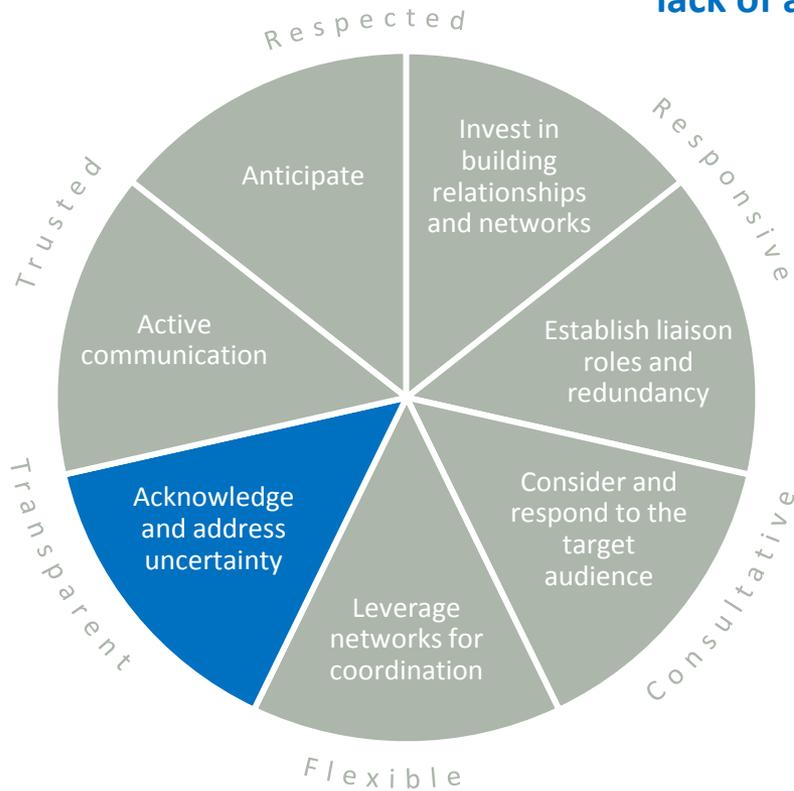
“Collectively we end up coming up with a pretty stable, rational response.”(ED participant)



Use networks within and across institutions/sectors/jurisdictions to promote coordinated communication action

Acknowledge and address uncertainty

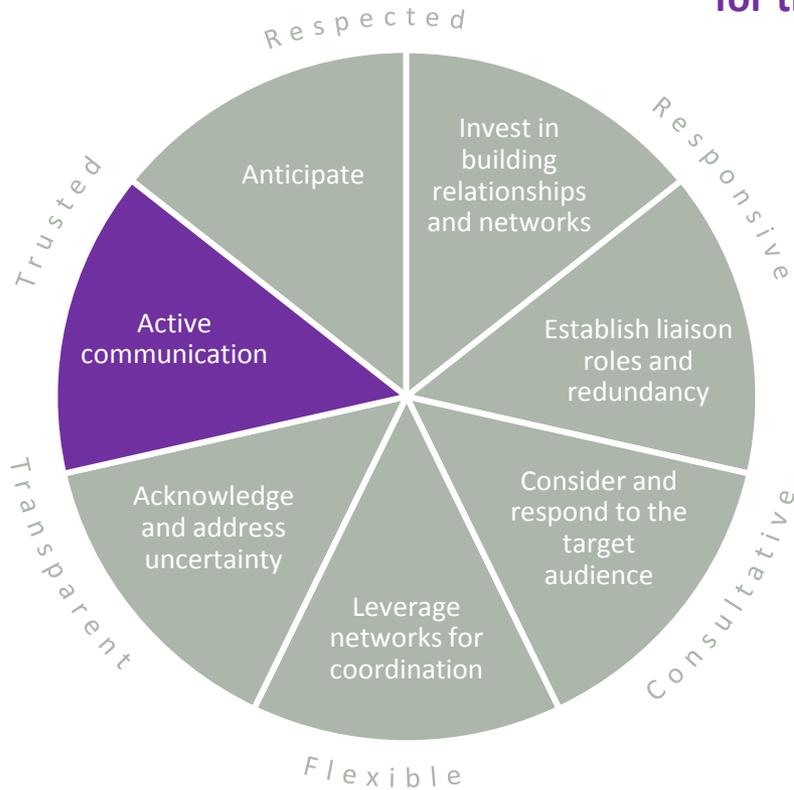
“The lack of information communicated was perceived to reflect a lack of action and a lack of attention.” (ED participant)



Understand, acknowledge and respond to the limitations of the message and situation

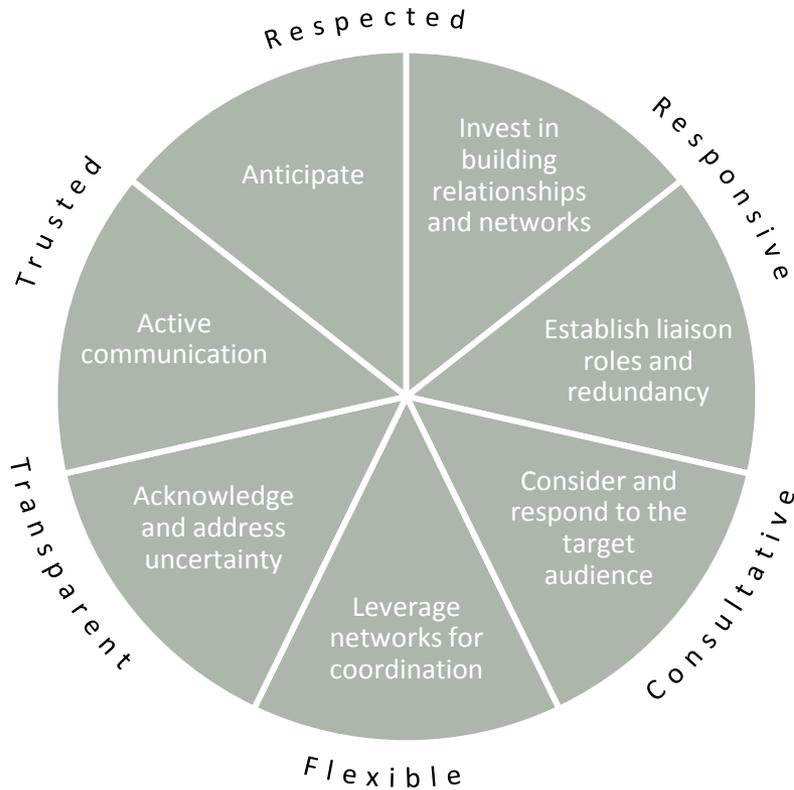
Active communication

“... it was mass confusion. So, I organized a meeting primarily for them, so that they could understand a little more about what was happening.” PH participant)



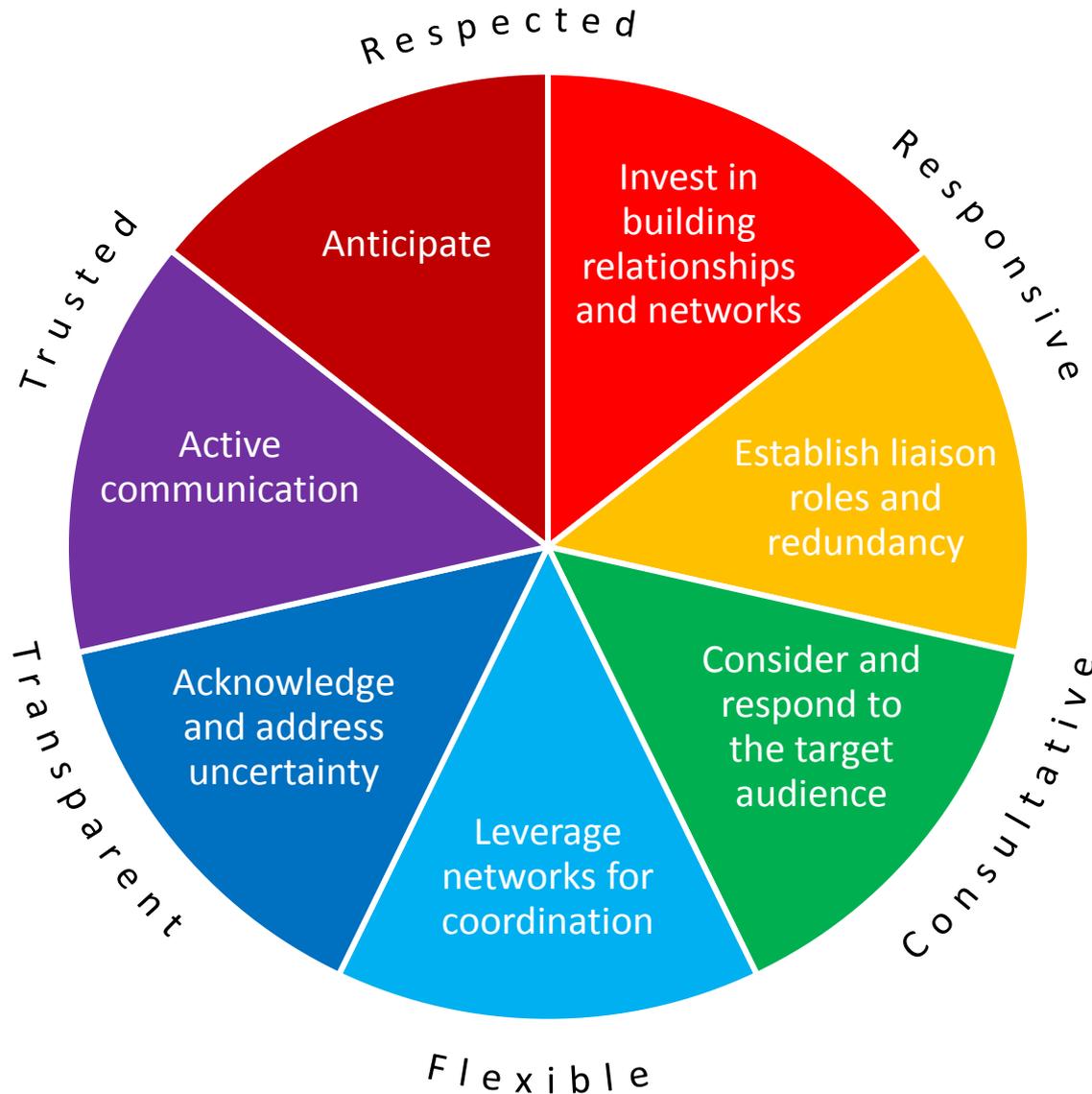
Actively engage in multiple modes and methods of communication for EPHI information to facilitate timely dissemination, knowledge translation and provide opportunity for feedback

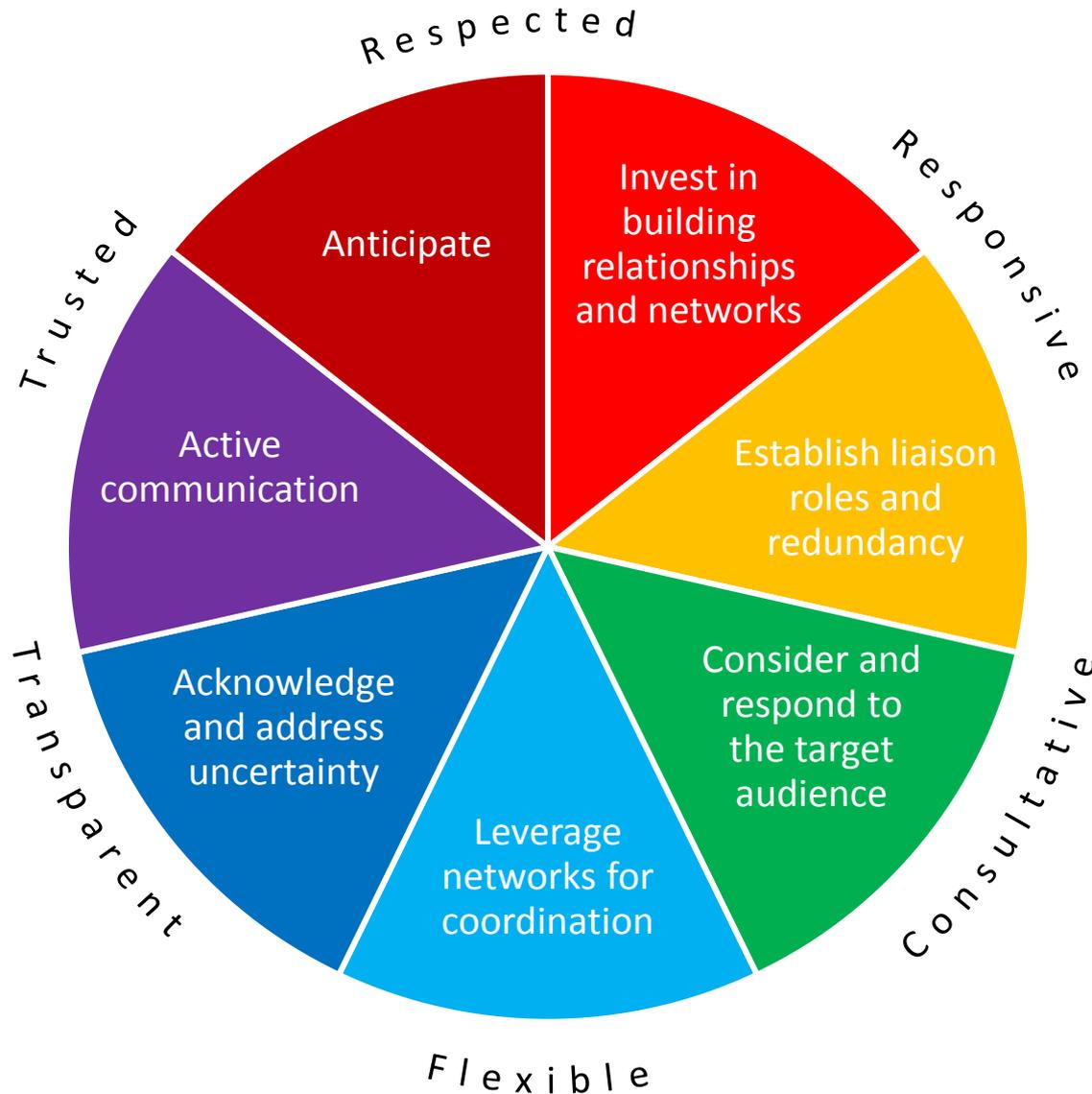
Qualities



- Key qualities that are rooted in the relationships between individuals at the local level:
 - *Trusted*
 - *Respected*
 - *Responsive*
 - *Transparent*
 - *Flexible*
 - *Consultative*

Final Thoughts





Objective 2 and 3

- To **apply a framework** for effective communication of public health guidance to emergency department clinicians to example scenarios of emerging public health incidents
- To **compare and contrast** how a framework for effective communication of public health guidance may be applied in different public health settings

Small Group Activity: Speed Dating



Scenario – An Emerging Infectious Disease

- **Setting:** Ontario
- **Public health risk:**
 - Potential for imported cases of an infectious disease not commonly seen in Ontario
 - This disease is spread by close contact and has serious associated morbidity
 - This has implications for health care workers

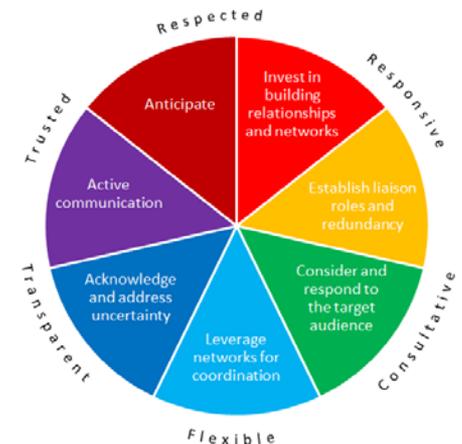
Scenario – An Emerging Infectious Disease

- Public health officials wish to communicate information and guidance to multiple emergency departments in their region:
 - **General information**
 - Description of infectious disease
 - Incubation period
 - Transmission
 - **Areas for action**
 - Take travel history
 - New laboratory testing instructions
 - Type of infection control precautions
 - PPE recommendations

Group Activity: Speed Dating

Format

- Each facilitator is assigned one of the framework elements:
 - Invest in building relationships and networks
 - Acknowledge and address uncertainty
 - Active communication
 - Establish liaison roles and redundancy
 - Anticipate
 - Consider and respond to the target audience
 - Leverage networks for coordination

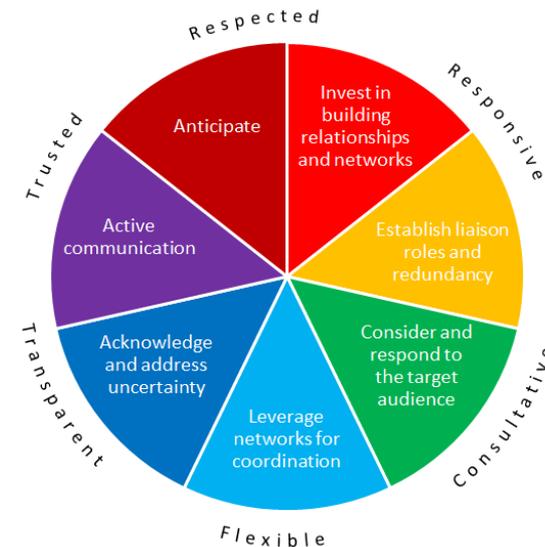


Group Activity: Speed Dating

- In relation to the scenario, consider these questions for each element:
 1. What challenges might you encounter?
 2. What skills and/or resources do you think will be necessary?
 3. What activities could be done to action the element?

Wrap-up: How did it go?

- Your experience with the framework today:
 - What worked well
 - Challenges
 - Application in practice



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- Sarah Nayani, PHO
- Shannon Tracey, PHO



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Feel free to contact us if you'd like to be in touch:

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Ontario Health Unit Peer Groupings

Urban (Peer Groups B, G, J)

1. Durham Regional Health Unit
2. Halton Regional Health Unit
3. City of Ottawa Health Unit
4. Simcoe Muskoka District Health Unit
5. Waterloo Health Unit
6. Wellington-Dufferin-Guelph Health Unit
7. City of Toronto Health Unit
8. Peel Regional Health Unit
9. York Regional Health Unit

Rural (Peer Groups D, H)

1. Grey Bruce Health Unit
2. Huron County Health Unit
3. Perth District Health Unit
4. Renfrew County and District Health Unit
5. Northwestern Health Unit

Urban-Rural (Peer Groups A, C)

1. Brant County Health Unit
2. Elgin-St. Thomas Health Unit
3. Haldimand-Norfolk Health Unit
4. Haliburton, Kawartha, Pine Ridge District Health Unit
5. City of Hamilton Health Unit
6. Hastings and Prince Edward Counties Health Unit
7. Kingston, Frontenac and Lennox and Addington Health Unit
8. Lambton Health Unit
9. Leeds, Grenville and Lanark District Health Unit
10. Middlesex-London Health Unit
11. Niagara Regional Area Health Unit
12. Oxford County Health Unit
13. Peterborough County-City Health Unit
14. The Eastern Ontario Health Unit
15. Windsor-Essex County Health Unit
16. District of Algoma Health Unit
17. Chatham-Kent Health Unit
18. North Bay Parry Sound District Health Unit
19. Porcupine Health Unit
20. Sudbury and District Health Unit
21. Thunder Bay District Health Unit
22. Timiskaming Health Unit