

# **Caring Community** A Bridge Between Professional and Community Care

Canada Research Chair in Patient and Public **Partnership** 

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### **Context**

- Health and social issues are mutually reinforcing each other.
- Social challenges are often unaddressed in medical care, while community organizations struggles to address healthcare issues.
- Experienced patients and engaged citizens are experts in navigating across the healthcare system and their community, but their role is rarely recognized nor integrated within existing structures.
- Caring Community started as a small-scale experiment within a primary care practice in Montreal (Canada). The project co-leaders started caring together for patients in situations perceived as "clinical gridlocks" by professionals.

# **Mission & Target population**

#### Mission

Partnering with patients, citizens, clinicians and decision- makers to bridge community and professional care.

#### **Target population**

Community members with complex medical and social needs. This is a generic community-focused intervention rather than a disease or population-specific initiative.

#### **Impact**

This initiative is embedded in an ongoing action-research project. Anticipated impacts include:

- 1. Builds patients' self-care capacity, social capital, and community connection;
- 2. Recognizes patients and citizens partners as full members of community-based primary care teams;
- 3. Promotes social participation and full citizenship;
- 4. Connects health professionals and community resources for integrated medical and social care;
- 5. Builds community capacity through collaboration across healthcare, community and local governments.

### **Intervention & Governance Model**

- Patient partners with significant lived experience, integrated in primary care teams, coach other patients in developing their self-care capacity, understand their life goals and needs, and facilitate collaboration with clinicians and community members;
- •Citizen partners with community engagement experience, facilitate navigation across community resources, support patients' (re-)integration in their community, and encourage social participation and recovery as full citizens;
- Clinician partners identify patients with complex social and medical needs, facilitate trustful relationships with patient and citizen partners, and integration of extended community-based primary care teams beyond the clinic's wall;
- •Local Decision-Makers from the community, healthcare, and municipal government levels foster supportive environment for integration of care, mutual support and development through co-governance, community co-funding, collaborative arrangements, and policy change.

#### **Caring Community** Community Promote Development social participation **↑** Social Capital Local and health **Decision-†** Care Competencies Makers Citizen Clinician Partners | **Partners** Community **Patient** People Support **Partners** Citizens Professional caring for each other Self-Care healthcare Coaching ↑ Health × **†** Social **Patient** caring for himself **↓** Heath **Patient ↓** Social receiving care



### What this initiative is about

Caring Community promotes collaboration between different members of the community, capitalizing on the ability of patients and citizens to create social connections and take care of each other. Patient and citizen partners meet with patients on a regular basis to discuss issues related to their illness, social situation, life project, and find ways to reduce the impact of obstacles on their daily life as citizens, by collaborating with other members of the community (eg. patient's family, clinician, community worker). A patient partner can guide the patient to better communicate his symptoms, pain, and objectives regarding his treatment, to improve the quality of his relationships with his care team, as well as with his family, and promote the support he recieves. As experts of the community, citizen partner can invite patients to take part in activities or use services available in the neighborhood (eg. art therapy sessions, support groups, food banks), to better meet their needs (eg. to break out of their social isolation).

# **Key learnings**

- It is feasible to integrate patient and citizens as members of extended community-based primary care teams. However, it takes time, mutual trust, structured recruitment, role clarification, and sensitivity to professional and institutional barriers.
- Improvements in care outcomes (eg. reduced hospitalization and emergency room visits) and social well-being (eg. improved connections with family members and community resources) have been noted, particularly for individuals with most complex needs;
- Stabilizing the co-governance and co-funding of the initiative are key issues to address for the scaling-up and sustainability of the intervention.

# **Partners & Funding**

The project is co-led by the local municipal government, healthcare institution, community organisations and a research organization, with shared funding from research, government and philanthropic resources ( $\simeq$ 75-100k / year).

Caring Community received external support to strenghten its co-governance and sustainability plan, with secured seed money for implementing the model in other communities.









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