

Engagement Activity(ies) and Date:

Which stakeholders were involved in your engagement activities/process?

Who was invited but did not engage? What voices/groups did you discover needed to be included, but were not included initially?

Which level of engagement on the SHA Engagement Continuum did your engagement process fall into (refer to the continuum table below)? Did your engagement activities match your stated your engagement level?

Which step of engagement was the most challenging and why?

How did you try to ensure a sense of psychological safety and cultural sensitivity/awareness/safety in your process?

Did you do an evaluation of your engagement process? What were the findings? If not, what prevented you from doing so?



How did you do a Report Back to the community/group you were engaging with? If this was not done, what prevented you from doing so?

What were your key successes?

What other learnings did you glean from your engagement process?

How did you incorporate the engagement learnings into your planning/decision-making processes? If this was not done, what prevented this from happening?

## SHA Engagement Continuum

	<b>Inform</b>	<b>Consult</b>	<b>Involve</b>	<b>Collaborate</b>	<b>Co-Lead</b>
<b>Engagement Goal</b>	To provide patients, families, First Nations and Métis Peoples, communities, staff, and physicians with balanced and objective information to help in understanding the current state and opportunities for change.	To obtain feedback from patients, families, First Nations and Métis Peoples, communities, staff, and physicians on analysis, options, and/or decisions.	To work directly with patients, families, First Nations and Métis Peoples, communities, staff, and physicians throughout the process to address concerns and ensure that needs are validated and will be considered.	Patients, families, First Nations and Métis Peoples, communities, staff, and physicians are active partners in each aspect of the decision being made, including defining reasonable options and the preferred solution.	Decision-making is in the hands of patients, families, First Nations and Métis Peoples, communities, staff, and physicians, fostering participation and equity through partner-driven priorities.
<b>Our Promise</b>	SHA will: <ul style="list-style-type: none"> <li>• Keep you informed.</li> </ul>	SHA will: <ul style="list-style-type: none"> <li>• Keep you informed.</li> <li>• Listen to you, and acknowledge your concerns, needs, and visions.</li> <li>• Offer feedback on how your input influenced the decision.</li> </ul>	SHA will: <ul style="list-style-type: none"> <li>• Work with you to ensure your concerns, needs, and visions are visible in the alternatives that are developed.</li> <li>• Offer feedback on how your input influenced the decision.</li> </ul>	SHA will: <ul style="list-style-type: none"> <li>• Ask you for input and ideas to create solutions.</li> <li>• Incorporate your input and recommendations into the decisions to the maximum extent possible.</li> </ul>	SHA will: <ul style="list-style-type: none"> <li>• Clarify scope of decision.</li> <li>• Work with you as partners.</li> <li>• Implement what you decide.</li> </ul>