

Destination Health

HPI–Montréal section, in close collaboration with the CHUM's health promotion team, organized a thematic meeting on World Health Organization–Health Promoting Hospital standards 2 and 3: assess patients' needs for health promotion; and provide prevention information and interventions for users.

Integrating health promotion into clinical and organizational practices: the CHUM's experience

A health promoting hospital (HPH) is a health institution that incorporates the World Health Organization's definition of health, that is, a complete state of physical, mental and social well-being. It is a hospital that recognizes that the status quo is no longer possible, in light of the increasing burden of chronic diseases. Strategies that enable patients to take a more active role in managing and improving their health should be implemented.

A health promoting hospital is a partner in the healthcare process: provision of safe, evidence-based quality care, and consideration for the needs expressed by patients. The process necessitates working in partnership with patients. To accomplish this, an HPH invests in information, health education and therapeutic education, and seeks to understand the principles of health literacy. An HPH integrates health promotion principles and care partnership into the concept of quality.

.../ page 2



A WORD FROM THE COORDINATOR

The Quebec Network of Health Promoting Institutions held a meeting last January 20. The theme was "integrating health promotion and disease prevention into clinical and organizational practices", an issue of growing concern among stakeholders.

The event was the outcome of a strong collaboration between the HPI network and Centre hospitalier de l'Université de Montréal. It was organized with a view to shed light on strategies that facilitate integration of health promotion and disease prevention into care and services and to enable members to share their experiences.

One challenge our institutions must meet, in addition to obtaining the necessary resources, is defining this rather broad field of intervention, which ranges from clinical prevention to the creation of health-supporting environments. In this context, several issues need to be addressed regarding prioritization of promotion and prevention activities and the implementation of initiatives in all care units and facilities.

The guiding principles for WHO–HPI health promotion standards are currently being defined. Some of these principles are highlighted in practice and research: principles related to patient participation and empowerment, and those that fuel a holistic vision of health, such as adoption of a multidisciplinary approach and integration of care partnership. Finally the principle of equality, applied cross-sectionally, must be part of all interventions so that special attention is given to vulnerable groups.

Health promoting institutions implement a range of actions based on those various principles, one project and one team at a time. This issue of Destination Health goes over the experiences and strategies presented on January 20.



Dr. Mylène Drouin
Deputy medical director for programs and partnerships
Direction de santé publique de Montréal
Coordinator of the Quebec Network of Health Promoting Institutions

... /

In 2006, the CHUM added health promotion to its mission and, in 2007, joined the International Network of Health Promoting Hospitals and Health Services. It proposes a multi-strategy approach that fosters concrete actions inspired by WHO's health promotion standards, through interprofessional collaboration and patient participation: health education and information activities, integrated preventive approaches, a food policy, and welcoming waiting rooms.

See [the presentation given by Dr. Michèle de Guise](#), Centre hospitalier de l'Université de Montréal.



Patient as caregiver

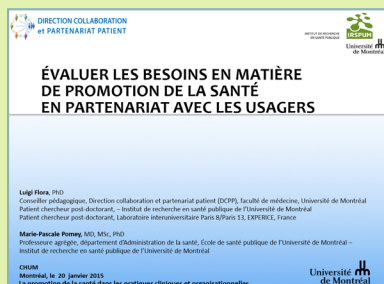
"Let the patient revolution begin."
British Medical Journal

Luigi Flora, post-doctoral patient-researcher, has put the issue of patient-partner in its historical context. Since the year 2000, changes made to health services have followed a patient-centred approach: patient expertise and disease self-management are beginning to be recognized, and decisions about the treatment plan shared. The patient spends little time with the health professional and lives with the disease; therefore, the patient becomes the caregiver.

In the model, developed at Université de Montréal, the patient plays a part in three broad areas: education for health professionals, care and research.

See the presentation by Luigi Flora, Direction collaboration et partenariat patient, Faculté de médecine, Université de Montréal:

[Évaluer les besoins en partenariat avec les usagers](#)



Getting our health promotion messages across effectively and responding better to the needs of our populations

To reduce the health impacts of literacy-related difficulties, health establishments should focus efforts on communicating in plain and culturally appropriate language for all interactions with users. **A few tools were developed recently to assist adaptation:** [a lexicon of alternative words](#), (in French only); a guide on health literacy ["Pour qu'on se comprenne"](#), (in French only); a guidance document for health professionals at the CHUM; and a [patient education portal for CHUM patients](#) as well as one [for MUHC patients](#).

Valérie Lemieux and Valérie Lahaie presented two initiatives as examples of the application of literacy principles: A breast cancer screening program, and health information and education activities at the CHUM.

See the presentation given by Ms. Lemieux, from Direction de santé publique de Montréal, and Ms. Lahaie, from Centre hospitalier de l'Université de Montréal: [Intégrer les principes de littératie en santé dans les activités d'information et d'intervention](#).



Hôpital du Sacré-Coeur de Montréal's approach adapted to the needs of older adults

A major clinical project, in line with a health promoting hospital strategy, was implemented at Hôpital du Sacré-Coeur de Montréal in 2012: an approach adapted to the needs of older adults. The project is in keeping with the ministry's terms of reference as well as the institution's management policy.

To assess the needs of older adults, the hospital screens all individuals aged 75 or over who go to the emergency department; when an older patient is hospitalized, the risks of falling and of pressure ulcers are assessed, as are the "AINÉES" signs (independence, skin integrity, diet, elimination, cognitive and behavioural states, sleep). Once the needs have been evaluated, preventive interventions are carried out: information and education are given out, using a patient-partner approach.

This process is conclusive. Team adherence is good, targets are reached and services are better matched to patients' needs.

See the presentation by Dr. Chantale Desrochers, head of general medicine, and Isabelle Yelle, assistant to the director of nursing care and quality: [L'approche adaptée aux personnes âgées à l'Hôpital du Sacré-Coeur de Montréal](#).



Health promotion lab

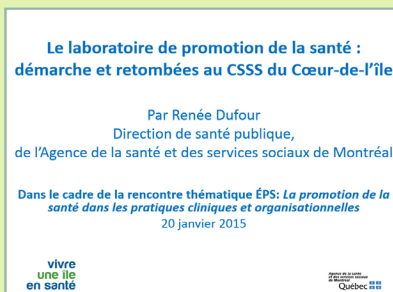
The health promotion laboratory is a support project for CSSS teams. It was developed using a participatory and reflective approach, inspired by communities of practice. The project is aimed at professional development and change in team practices, with a goal of bolstering actions to prevent health problems.

The project was elaborated by Montréal's public health department as a result of a study showing that it is difficult to integrate health promotion and disease prevention activities into day-to-day practice when schedules are full and resources are rare.

The health promotion lab is working with a group of health care providers and administrators, most of whom are with a CSSS team, that meets on a regular basis to reflect on and discuss their practices. Through a variety of well-planned activities, participants are asked to develop a common language, think about the issues in their districts and select one on which they want to work, draw a profile of their practices, build a vision of partnership, and develop and implement a new intervention targeting social and environmental determinants of health, in response to the issue chosen. (Reference: Un laboratoire de promotion de la santé : quand réflexion rime avec innovation, 2013)

See the presentation by Renée Dufour, Direction de santé publique de Montréal:

[Le laboratoire de promotion de la santé avec des équipes de CSSS](#)



Birthing centre: A centre for excellence in health promotion

The CHUM's birthing centre adopted a health promotion strategy in 2008, thanks to a donation from the Lucie and André Chagnon Foundation. "A pregnancy presents an opportunity to influence behaviours," says health promotion adviser Sabrina Ourabah, who emphasizes that it was an easy decision for the CHUM to turn the birthing centre into a centre for excellence in health promotion. There are two components to its promotion activities: an information component (fact sheets, waiting rooms, web site); and an intervention component (counselling on lifestyle habits, group interventions, smoking cessation support).

See the presentation by Sabrina Ourabah and Ginette Busque of the Centre hospitalier de l'Université de Montréal:

[Le centre des naissances du CHUM](#)

Guide Priorité Santé (GPS): A health promotion tool

Focused on overall health, this tool is designed to inspire people to take control of their own health and to encourage clinical settings to integrate prevention and promotion. This publication grew out of a project at CSSS Sud-Ouest-Verdun designed to provide accessible and effective preventive care to people who don't have a family doctor.

The overall goal of the guide is to walk individuals through the health self-empowerment process. The guide includes sections on lifestyle habits, various cancers, infectious diseases and psychosocial well-being.

Health professionals in primary care settings and in other care giving facilities that wish to integrate prevention activities will soon have access to this tool.

For more information, see the presentation by Andrée Gilbert and Sylvie Roberge from Direction de santé publique de Montréal: [Le guide priorité santé\(GPS\), un outil pour favoriser la promotion de la santé.](#)

Input from participants

Things we should remember...

that patients and their loved ones are experts in situations that involve their health and life goals, and are architects of change when it comes to transformations they wish to make. They have the resources and creativity needed to overcome challenges they face.

to work more closely with clinical settings and, to accomplish this, promote initiatives that are in place.

the importance of health education and integration of the principles of literacy.

that regardless of the care setting or clientele, it is very important to adapt information tools to potential users' levels of understanding.

that it is important that doctors—indispensable partners—be included in our projects.

that partnership in local networks is key to prevention.

it is not possible to integrate health promotion and disease prevention into clinical practice without political will within the establishments.

the importance of evaluating health promotion and disease prevention needs in partnership with users.

INTEGRATING HEALTH PROMOTION AND DISEASE PREVENTION

into clinical and organizational practices — A few numbers:

- 48 people
- 11 videoconferencing sites
- 25 member establishments
- 8 presentations

The presentations can be accessed on the event's Web page

Knowledge Building

Reading suggestions

INSPQ (2014). Référentiel de compétences en prévention et promotion de la santé et des services sociaux du Québec.

INSPQ recently launched a health promotion and prevention competency framework to implement a competency development plan for health professionals. The framework also covers other aspects, such as harmonization of practices, staffing, recruitment, staff evaluation and career management, and general competency management. See document

Standards for equity in health care for migrants and other vulnerable groups, Self-Assessment Tool for Pilot Implementation, 2014, HPH Task Force Migrant Friendly Hospitals and Health Services. *The International Network of Health Promoting Hospitals and Health Services task force on migrant-friendly and culturally competent health care has developed standards designed to monitor and measure equity in health care for migrants and other vulnerable groups. See document*

INPES (2014). Prendre en compte les inégalités sociales de santé en médecine générale. *INPES has put together a document intended for general practitioners explaining how to consider social inequalities in health for each patient seen. The document includes a questionnaire that is completed with patients to identify eventual obstacles in the person's trajectory of health as well as solutions to overcome them. See document*

PROVOST, M.-H., L. MOREAULT and L. CARDINAL. Accompagner un changement dans les pratiques cliniques préventives : apprentissages et conditions critiques. Rapport de recherche-action. Québec : ministère de la Santé et des Services sociaux (coll. L'intégration de pratiques cliniques préventives), 2013, 83 p. *This report outlines lessons learnt from a collaborative project between a public health department, Health and Social Service Centres and clinics. The project involved providing ongoing support to clinicians to help them better integrate prevention into their practices. See document*

World News

23rd International Conference on Health Promoting Hospitals and Health Services

June 10 to 12, 2015

Oslo, Norway

Person-oriented health promotion in a rapidly changing world

Co-producing health – healthcare for people by people

[For more information](#)

Upcoming Events

Rassemblement pour la santé et le mieux-être en entreprise 2015
Palais des Congrès de Montréal

25 et 26 mai 2015

[For more information](#)

Destination Health is a triannual publication of the Québec Network of Health Promoting Institutions.

Editor: Mylène Drouin · Coordination and writing: Marie-Dominique Charier · Special contribution: Jaime Jimenez-Pernett,
Translation: Sylvie Gauthier · Graphics and layout: Linda Daneau

ISSN 1929-2910

Contact us at: reseauquebecoiseps@sss.gouv.qc.ca

Agence de la santé
et des services sociaux
de Montréal

Québec 

<http://www.eps.santemontreal.qc.ca>