



*"It is not the lofty sails but the unseen wind that moves the ship."*



*"You can discover more about a person in an hour of play than in a year of conversation." Plato*

## The focus of this feature is on Sharing Partnership Strategies from Ontario's OHHP Southwest Region.

The following ideas were generated through a HHRC consultation held in August, 2004 with the OHHP coordinators in Southwestern Ontario. The focus of this session was to share practical tools and strategies to:

- recruit relevant partners
- keep partners meaningfully involved
- re-energize partnerships

Consultants Mary Martin Rowe (OPC) and Nancy Dubois and Lisa Mitchell (HHRC) facilitated the process.



**Challenge:** "It takes a lot of time just to TRY to have a coalition."

**Ideas:** Invest the time necessary to nurture a partnership.

- Take time to get to know your partner - have lunch.
- Develop skills as a Coordinator in this - take a college course in Volunteer Management.
- Allocate the time required - designate activities and resources in your Logic Model, program plans and reports to "capacity development" or "community mobilization" strategies.
- Spend a little time at each meeting on socializing - get to know each other.

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**Challenge:** Being an OHHP Coordinator requires a lot of different skills - many that the average public health staff doesn't often bring to the job initially. "You have to juggle so many balls."

**Ideas:** Access the supports you need.

- Book time with a HHRC coach. They can assist with any aspect of your job - budgeting, developing a spread sheet or PowerPoint presentation, interpreting data, brainstorming program ideas - limited only by your imagination.
- Connect with other OHHP Coordinators - regional network meetings, set up discussion groups around OHHP gatherings, set up regular telephone check-ins, call-a-friend!

## "Tools for Assessing Your Partnership"

The 10 Steps to Successful Partnerships, A Self-Assessment Tool  
([www.municipal.gov.sk.ca/toolkit](http://www.municipal.gov.sk.ca/toolkit))  
This tool was adapted from a web-based publication of the U.S. Department of Health and Human Services, Administration for Children and Families, Child Care Bureau, titled The Child Care Partnership Project, How Are WE Doing? A Self-Assessment Tool for Partnerships.

East Leeds Primary Care Trust (UK). Partnership Self-Assessment Toolkit: A Practical Guide to Creating and Maintaining Successful Partnerships. ([www.haznet.org.uk/hazs/hazmap/leeds\\_partner-tool.pdf](http://www.haznet.org.uk/hazs/hazmap/leeds_partner-tool.pdf))

Assessing Strategic Partnership: The Partnership Assessment Tool (UK – © Crown copyright 2003).  
This tool is based on research commissioned by the Strategic Planning Taskforce at the Office of the Deputy Prime Minister (UK) and carried out by the Nuffield Institute for Health. [http://www.odpm.gov.uk/stellent/groups/odpm\\_localgov/documents/page/odpm\\_locgov\\_027312.hcsp](http://www.odpm.gov.uk/stellent/groups/odpm_localgov/documents/page/odpm_locgov_027312.hcsp)

Institute Partnership Assessment Tool. CIHR Institute for Circulatory and Respiratory Health. June, 2004. Access via the HHRC Web Site.

Consult the Partnership section of the HHRC Sustainability Manual. Available on-line via the HHRC.

**Challenge:** In order to engage new community partners, we need to make a compelling case for "WIIFT - What's in it for them?"

**Ideas:** Customize the "pitch" to the potential partner.

- Learn about their mandate (VISION, MISSION, PURPOSE) and decide how your programs can help move them forward.
- Identify personal growth opportunities relevant to them (eg. learn about evaluation).
- Send the best messenger to make "the ask"
  - do it personally!
  - send a partner (Coordinator can support but not lead).
  - select someone influential with this person.



*"You can make more friends in 2 months by becoming interested in other people than you can in 2 years by trying to get people interested in you." Dale Carnegie*

**Challenge:** Steering Committee members are expected to help create sound health promotion plans based on best practice but often don't bring an interest, or skill, in this area. How does a Coordinator make it attractive to be on a Steering Committee?

**Ideas:** Be the "knowledge broker".

- Act as the filter to strategically decide who needs to know/see what.
- Chunk it up - short summaries with an "Implications for our Coalition" focus.
- Include a "Coordinator Update" on each S.C. agenda - short, focused, timely, relevant.
- Create "specialists" - not everyone needs to know everything.
- Access the training provided, mostly free, via the OHPRS.
- Connect how OHHP info can benefit their own organization as well.
- The contribution of a particular partner may not be best used at the SC table. Decide together how to engage partners. Use THCU's "Stakeholder Wheel" as a tool.

## Other tips...

- Attempt to develop common visions, common messaging regarding public information, even joint programs with other CDP local coalitions (eg. FOCUS, Diabetes).
  - Be proactive with the media - watch for stories to piggy-back on. When a national or provincial story breaks, contact media with the local angle for the next day.
  - "Flip it around" - Often when pursuing environmental changes, instead of creating your own new committee, get the right representative from your group "on" an existing committee (eg. the regional master plan committee, the local transportation committee, the newspaper's Editorial Board). Then... watch for the opportunity to take a health spin.
  - Collective partnerships are best suited to address:
    - common messaging (communication activities)
    - environmental/policy changes
    - fostering coordination and connectedness - networking to stay informed.
- Programs undertaken by a collective often get messy and complicated (eg. whose logo on products? Who "owns" the program?). Facilitate the bringing together of a few partners related to specific programs rather than all or many partners.
- Aim to deepen connections with key partner organizations.
    - Send a thank-you letter to the CEO/ED/Board for their specific contribution. Be sure to highlight successes relevant to their mandate.
    - Make a quick update presentation at their AGM.

## Stakeholder Wheel



**CORE** - part of the ongoing team and very involved in "shepherding" the process

**INVOLVED** - engaged in one or more very specific aspects; not involved on an ongoing basis

**SUPPORTIVE** - provide support to the concept and perhaps some form of resource as well (e.g., \$, space, data, access to clients)

**PERIPHERAL** - need to know about the program and be kept up-to-date along the way

Source: The Health Communication Unit, Centre for Health Promotion, University of Toronto

## Related HHRC Resources:

- "Strengthening Community Partnerships" @ heart feature, Summer 2004.
- "Renewing Community Action" @ heart #13, Fall 2002.
- "Building our Partnerships for Beyond 2003" @ heart #11, Winter 2002.
- "Working with Volunteers" @ heart Vol.2 No.1, Winter 1999.
- Heart Health Volunteers The Missing Link, May 2000. Workshop Training Manual.

Visit: [www.hhrc.net/resources](http://www.hhrc.net/resources)

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# @heart

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