

Foundations of Healthcare Excellence Jigsaw Puzzle

The activity

The **Foundations of Healthcare Excellence Jigsaw Puzzle** is a facilitation reflection activity designed to help participants explore how patient safety, equity, engagement and cultural safety are interconnected, and how together they create the conditions for excellence in care.

Everyone involved in care, whether delivering it or receiving it, has a role to play in shaping safer, more equitable and more person-centred health systems. Each of these foundations is important on its own, but their real power lies in how they connect and reinforce one another in practice.

This facilitation guide is designed to be used alongside a set of accompanying puzzle pieces, each featuring a reflection question. Each puzzle piece represents one perspective or entry point into the broader conversation. The activity can be facilitated using one or multiple pieces, depending on the group size and time available.

Why complete the Foundations of Healthcare Excellence Jigsaw Puzzle?

The jigsaw puzzle activity supports structured reflection and dialogue on the relationships between patient safety, cultural safety, equity and engagement, and how these elements shape healthcare experiences and outcomes. Like a jigsaw puzzle, the full picture comes into focus only when all the pieces are considered together.

Through the jigsaw puzzle activity, participants are supported to:

- reflect on how individual beliefs and behaviors influence safety, cultural safety, equity and engagement
- examine how health systems at regional, provincial and pan-Canadian levels influence safety, cultural safety, equity and engagement across individuals, teams and institutions
- develop a deeper understanding of the interconnected nature of patient safety, cultural safety, equity and engagement
- identify concrete actions to help create safer, more equitable and culturally safe care and engagement-capable environments

How to conduct the activity

Time required

Time requirements are flexible and depend on how the activity is structured. The jigsaw puzzle can be adapted to suit different formats and timeframes.

Suggested formats

The activity is intentionally versatile and can be approached in several ways, including:

- **Gradual reflection** – Explore one puzzle piece at a time (for example, one per week), either individually or through a facilitated group discussion. This approach supports deeper reflection and slows learning to build over time.
- **Group workshop or conference session** – Select multiple puzzle pieces and use them to facilitate a workshop, conference session or team event. This format encourages rich dialogue and shared learning among a larger group.

Group size and participation

This activity can be completed as an individual self-reflective exercise; however, it is most effective when undertaken as a group. Meaningful reflective conversations can occur with as few as two participants. Each puzzle piece can be explored by groups of up to eight people. For larger gatherings, divide participants into smaller groups to foster rich, engaging conversations.

Who to include:

The activity is suitable for a wide range of participants, including:

- clinical and nonclinical staff, regardless of their role and position
- healthcare leaders and board members
- patients, residents, clients and care partners (consider inviting a patient partner to share their experiences or co-facilitate)
- volunteers
- community partners and members of the public

Tools you will need:

- **The Foundations of Healthcare Excellence Jigsaw Puzzle** (see the Appendix for the puzzle pieces with reflection questions) – The number of puzzle pieces discussed will vary based on the number of participants and available time.
- **Facilitation tools** – Sticky notes, a flip chart, markers, a whiteboard and other materials for capturing key insights, discussions and action items.
- **Camera for photos** – If the team is interested in taking photos during the activity, ensure all participants are comfortable and have consented to having their images captured and shared.

Hosting your puzzle activity

1. Identify a facilitator

Their role is to create a safe and welcoming environment that encourages open sharing and learning. The facilitator needs to have strong listening skills, be able to navigate difficult conversations and keep the activity running on time.

2. Prepare for sensitive conversations

Discussions about patient safety, cultural safety, equity and engagement may evoke emotions as people reflect on their own personal experiences within healthcare or more broadly. Identify and have available resources to offer participants in case difficult or emotional conversations arise. Consider exploring trauma-informed training resources, such as the Alberta Health Services [Trauma Training Initiative](#) and the EQUIP Health Care [Trauma- and Violence-Informed Care Foundations Curriculum](#), as you prepare to host this activity.

3. Plan your approach

Before hosting the activity, consider:

- **Choosing the format** – Use existing forums such as team meetings, lunch and learns, safety huddles or conferences.
- **Determining group size** – Assess how many participants will take part and, if necessary, plan to break out into smaller groups.
- **Selecting puzzle pieces** – Determine how many puzzle pieces will be explored in each session and whether the puzzle will be completed in stages over time.

4. Host the activity

A. Set the tone

Begin by emphasizing the importance of creating a non-judgmental, inclusive and psychologically safe space. Encourage openness and respect, and reinforce that all perspectives and experiences are valued, and that space is held for everyone to contribute to the discussion.

B. Acknowledge sensitivities

Let participants know that the topics discussed may be sensitive or triggering. Clearly communicate that support and resources are available either during or after the session if needed.

C. Introduce core themes

Explain the significance of patient safety, cultural safety, equity and engagement, and the importance of understanding how these elements interact. Encourage participants to reflect on how these foundations, together, support excellence in care.

D. Provide context

Depending on time and resources, consider sharing examples from the resources listed below, presenting a patient story or inviting a participant to share a relevant experience. Encourage discussion around how safety, equity, engagement and cultural safety are reflected in both the care delivered and the care experienced by patients and families. [Lew's story – Two Care Journeys](#) may be a helpful example.

E. Distribute the puzzle pieces

Provide participants with the selected puzzle piece(s) and associated reflection question. Puzzle pieces may be assigned intentionally or distributed at random. In group settings, each small group typically explores one puzzle piece at a time, though groups may work through multiple pieces over the course of a longer session.

F. Encourage individual reflection

Invite participants to take one to two minutes to self-reflect on the question posed.

G. Facilitate group discussion

Guide a group discussion using a structured facilitation method such as [1-2-4-all](#) to ensure meaningful engagement.

H. Deepen the conversation

After reflection and discussion, pose key follow-up questions to reinforce learning and encourage action:

- What key learning have you taken away from your own reflections?
- What insights emerged from your discussion in small groups?
- What is one action that you will take as a result of this conversation? Consider whether this action is at the individual, team or institutional level. Facilitators may wish to capture these actions to support follow-up conversations or inform future improvement efforts.

Tips for success:

- **Create a welcoming environment** that supports psychological safety and shared learning.
- **Acknowledge that discussions may surface experiences of bias, discrimination or racism**, and be prepared with resources to support participants' well-being.
- **Facilitators should attend to their own (and others') well-being**, recognizing that these conversations can be emotionally demanding.
- **Multidisciplinary participation** can broaden perspectives and deepen learning.
- **Thoughtful pre-planning** – including format, group size and pacing – will strengthen the overall experience.
- **Come prepared with appropriate equipment** (e.g. the Foundations of Healthcare Excellence Jigsaw Puzzle and facilitation tools)
- **Ground discussions in lived experience** to support meaningful reflection on culturally safe and equitable care.

Debrief

After the activity, consider debriefing with a few trusted colleagues to reflect on the activity's success and how to improve it.

Consider asking:

- What went well?
- Even better if...
- Next time try this...

We would love your feedback!

There are many ways to build this puzzle. We encourage you to innovate and would love to hear your feedback on other facilitation approaches. Please share your ideas with us at safety-securite@hec-esc.ca

Resources:

Healthcare Excellence Canada. (2025) [Foundations of Healthcare Excellence](#).

This is a series of self-paced learning activities that can be used as a starting point for highlighting how patient safety, cultural safety, engagement-capable environments and health equity are interconnected in shaping care experiences.

Longwoods Videos. (n.d.). [The impacts of racism on healthcare quality and safety in Canada: A case study and practical advice from Ontario Midwifery](#)

This recorded webinar highlights the importance of achieving safety by addressing systemic racism in healthcare. It features a discussion and learnings from a case study presented by the Association of Ontario Midwives.

Boakye PN, Prendergast N, Bandari B, Brown EA, Odutayo A, & Salami S. (2023). [Obstetric racism and perceived quality of maternity care in Canada: Voices of Black women](#). *Women's Health*, 19(1), 1–13. <https://doi.org/10.1177/17455057231199651>

Obstetric racism can affect access to quality maternal healthcare and contribute to poorer health outcomes for Black women. In this original research article, the authors asked Black women in Toronto to share their experiences receiving care during pregnancy or childbirth and how they felt about that care. Participants reported that their care was dehumanizing and lacked quality.

First Nations Health Authority. (n.d.). [Remembering Keegan: A BC First Nations Case Study Reflection](#). see also this [CBC report](#))

The case study reflection report shares the story of Keegan Combes, a Skwah First Nation man who died at the age of 29 following a delayed diagnosis and treatment after an accidental poisoning in September 2015. The case study aims to foster reflection among healthcare providers on systemic racism and cultural safety to prevent similar tragedies and improve care for Indigenous peoples in BC.

Centre for Addiction and Mental Health (CAMH). (n.d.). [Dismantling Anti-Black Racism: A Strategy of Fair & Just CAMH](#).

Across Ontario and at CAMH, oppression of and disadvantage against Black communities is evidenced by ongoing racial disparities in mental health and well-being. This report outlines priority areas focused on achieving results for patients and families, staff and for CAMH, and includes 22 actions that aim to decrease anti-Black racism at CAMH by 2022.

[Black Health Alliance, Health Inequities](#). (n.d.).

Black Health Alliance partners to improve the health and well-being of Black communities. Their website notes that Black people experience health disparities compared to the Canadian population overall, and that mental health and addictions within Canada's African, Caribbean and Black population are profoundly misunderstood and stigmatized. For example, Black Ontarians face higher rates of restraint and confinement under the mental health and addictions system.

Appendix


What can I do to learn more about how inequities in care impact the quality and safety of care?

Appendix




How do I practice active listening when engaging patients and caregivers to broaden my understanding of safer, more equitable and culturally safe care?

Appendix



**In what ways do
my unique lived
experiences
influence my
interactions with
peers, patients,
caregivers and
communities?**

Appendix




How do our organizational policies and practices enable or act as barriers to providing safe and high-quality healthcare?

Appendix



What does our organization do to support the involvement of patients, caregivers and communities in our work to make care safer, culturally safe and equitable?

Appendix

A large, bright yellow puzzle piece is centered on the page. It has four interlocking tabs and blanks. Inside the piece, the following text is written in a bold, black, sans-serif font:


**How does our organization
bring together insights
from safety, equity and
experience data to drive
meaningful improvement?**

Appendix




What opportunities exist to create a more integrated and coordinated approach to safety, equity, engagement and cultural safety across the health system?

Appendix



How can action on patient safety, including cultural safety, help reduce health inequities? How can action on health inequities help improve patient safety?

Appendix



How do power dynamics influence the way care is provided? Can you think of an example?

Appendix

