MHA Quarterly Quality Webinar

Patient and Family Engagement, Webinar 2 of 4
Recruiting Patient Family Advisors

May 19, 2016

Slides may be downloaded from the webinar platform and will be posted along with the recorded webinar at www.mhanet.com.
Sheryl Chadwick

Sheryl joined the Family Advisory Board at Children’s Mercy Hospital and Clinics as a charter member in 2003. She served as Chairperson of the Board in 2005. Sheryl was hired by Children’s Mercy Hospitals and Clinics as a Family Centered Care Coordinator in February 2008. Her son was diagnosed with ALL Leukemia in 2000 and underwent 3 ½ years of chemotherapy. He has been seen in 22 different clinics and has had 24 surgeries. She has vast experience with both inpatient stays and outpatient clinics. As the mother of four sons, she hopes to improve the health care experience for all children by promoting a relationship in which family members and providers work together to ensure the best service for all families. Sheryl’s background as a Financial Analyst with IBM compliments her role as a parent on staff by allowing her to critically review outcomes and data from patient- and family-centered care initiatives.
DeeJo Miller

After the life changing event of her 13 year old daughter’s cancer diagnosis in 2004, DeeJo’s focus changed from running a preschool to helping families who enter the hospital system with their children. DeeJo was hired by Children’s Mercy Hospitals and Clinics as a Family Centered Care Coordinator in February 2008 to share her experiences and serve as a voice of the families. Spending over 300 days with her daughter as an inpatient inaugurated her into the health care system while allowing her to maintain the point of view of families. She brings this unique perspective to her job.
Recruiting Patient Family Advisors

Sheryl Chadwick
DeeJo Miller
Family Centered Care Coordinators

Missouri Hospital Association
May 19, 2016
Content Overview

• Benefits of patient and family engagement
• Creating a Patient and Family Advisory Council
• Skills and Qualities of Patient Family Advisors
• Lessons learned
The Region’s Pediatric Health System of Choice

- 354 beds
- 308,830 outpatient visits
- 162,611 ER/UC visits
- 13,649 admissions
- 18,353 surgeries
- 4,986 transports

*All numbers Fiscal 2014
The Evolution of Care

- System centered care
- Patient centered care
- Patient- and family-centered care
“Patient- and family- centered care is an approach to the **planning**, **delivery**, and **evaluation** of health care that is grounded in mutually beneficial partnerships among patients, families, and health care providers.”

Institute for Patient- and Family- Centered Care
Why Patient- and Family-Centered Care?

• It’s the right thing to do

• The Joint Commission
   • Patient-centered communication standards are included in accreditation
     ➢ PC.02.01.21 The hospital effectively communicates with patients when providing care, treatment, and services.
     ➢ RI.01.01.01 The hospital respects, protects, and promotes patient rights.
Patient Family Advisors

Patient Family Advisors are patients or family members who have been identified for their ability to contribute to the provision of care, treatment and services provided at the hospital.
Qualities and Skills of Advisors

• Shares insights and information about their experiences in ways that others can learn from
• Can see beyond their personal experiences
• Has a genuine interest in improving health care
• Committed to partnership and collaboration
• Respects the perspectives of others
• Represents the patients and families served
What is a PFAC?

A Patient Family Advisory Council (PFAC) is a formal council within an organization dedicated to collaborating with patients and families.

- Establishes ongoing relationships with regular meeting times.
- Seeks diverse perspectives representing the populations served.
Creating a PFAC

- Establish support from hospital leadership
- Dedicate resources
- Determine membership requirements
- Create budget
- Create orientation for advisors and staff
- Launch recruitment process
- Partner with Volunteer Department
Partnering with Volunteer Department

- Background checks
- Health requirements
- Volunteer orientation
- Confidentiality/HIPAA training
- Photo ID badge
- Database for tracking hours
- Annual recognition
First Steps with Families at the Table

- Determine council size and structure
- Define purpose and vision
- Set the meeting schedule
- Create bylaws
- Set short term goals
- Identify focus areas
- Maintain history
Sustaining an Effective PFAC

- Align projects and initiatives with hospital strategic plan
- Seek out champions across the organization
- Track accomplishments
- Celebrate and publish successes
- Conduct effective meetings
- Maintain patient/family leadership
- Communicate regularly with advisors
Framework for PFAC

- **Recruit**
  - Identify patients and families with knowledge or experience with the topic at hand

- **Prepare the Advisor**
  - Provide education in the basics of quality improvement
  - Provide confidentiality and HIPAA training

- **Create a Culture of Engagement**
  - Communicate with staff about effectively engaging PFAC members
  - Encourage questions and feedback from staff

- **Implement Improvement Initiatives and Measure Impact**
  - Engage members in improvement initiatives including projects facilitated by patient safety & quality committees
  - Measure the impact on patient satisfaction, quality, safety, and health outcomes
  - Maintain open channels of communication

- **Sustain the Relationships**
  - Update PFAC on projects
  - Share information on additional opportunities to participate in improvement projects

Source: Health Research & Educational Trust, 2015
Family Advisory Boards

2003 Family Advisory Board

2008 El Consejo de Familias Latinas/Hispanas

Parents hired on staff 2008

2012 ICN Family Staff Advisory Council
2014 Inflammatory Bowel Disease PFAC
2015 Cystic Fibrosis PFAC
2016 Food Allergy PFAC
Teen Advisory Boards

• TAB - 1999
  (Teen Advisory Board)

• HOT - 2013
  (Hematology/Oncology Teens)

• KIDS KC - 2014
  (Kids and families Impacting Disease through Science)

• Nephrology Teens - 2016
Early Accomplishments of Children’s Mercy Family Advisory Board

- Developed membership guidelines
- Designed application and interview questions
- Created PFAC page on hospital website
- Held book drive for hospital and clinics
- Presented education for staff
  - Grand Rounds
  - Winning Communications video
- Developed hand washing initiative for families
- Created tip cards for families and visitors
- Started sitting on hospital committees
- Published PFAC annual report
Evolution of PFA Involvement

• Consulted on facility enhancements
• Updated and created new policies
• Provided education for staff
• Developed tools for patients and families
• Served on committees and workgroups
• Changed the culture
PFA Engagement
at the Policy & Design Level

- Policies
- Committees
- Physical Environment
- Communication Tools
Policy Design

- Patient- and Family- Centered Care Policy
- Family Presence Policy
- Patient Rights and Responsibilities
- Visitation or Welcoming Policy
- Professional Boundaries
- Patient/Family Education Policy
- Remember….sometimes practice comes before policy!
Engagement on Committees

- Ethics committee
- Health Literacy committee
- Council on Violence Prevention
- Quality & Safety Council
- Quality & Safety Committee of Board of Directors
- National Patient Safety Goals
- Financial Assistance
- Website Redesign
- Plus many more…
PFAs Engaged in Patient Safety Work

Hospital Acquired Conditions (HAC’s)

- Central Line Associated Bloodstream Infections (CLABSI)
- Catheter Associated Urinary Tract Infections (CAUTI)
- Ventilator Associated Pneumonia (VAP)
- Venous Thromboembolism (VTE)
- Adverse Drug Events (ADE)
- Pressure Ulcers (PU)
- Falls
- Surgical Site Infections (SSI)
- Obstetric Adverse Events (OB-AE)
- Readmissions
Family Educators

- Patient Care Services Orientation
- Graduate Nurse Residency Program
- Department Specific PFCC Training
- Graduate Medical Education
  - Orientation lunch with FAB and TAB
  - In-home visit with family of a child with complex medical needs
  - Death and Dying Workshop
Patient Family Advisors on Committees & Projects

- Hired parents on staff
- PFCC Policy Implemented
- Culture Change

Yearly increments:
- 1998: 3
- 1999: 15
- 2000: 16
- 2001: 17
- 2002: 19
- 2003: 28
- 2004: 30
- 2005: 31
- 2006: 33
- 2007: 42
- 2008: 75
- 2009: 91
- 2010: 108
- 2011: 109
- 2012: 149
- 2013: 156
- 2014: 327
- 2015: 418
Patient and Family Engagement Outcomes

- Communication Tools
- Quality Improvement
- Facilities
Communication Tools

- Nurse Advice Line Magnets
- Admission Notebooks
- Website
- Patient Portal
- Family Centered Care Brochure Series
  - Family Centered Rounds
  - Get the Most from your Child’s Visit
Family Activated Rapid Response

Rapid Response Team (RRT)
Equipo de Respuesta Inmediata

Do you have any URGENT concern about your child’s:

- breathing
- heart rate
- color
- sleepiness
- restlessness
- uncontrolled pain.

Do you think we need to act quickly to help your child?

STEP 1
Talk to your child’s nurse or doctor.

Still concerned?

STEP 2
Call the Rapid Response Team (RRT) and notify your nurse.

- DIAL: 1191
- Say, “I need the Rapid Response Team.”
- Tell the operator your floor and room #.
- The RRT will arrive within 10 minutes.

Usted tiene alguna preocupación URGENTE acerca de:

- respiración
- ritmo Cardiaco
- color
- somnolencia
- inestabilidad
- dolor Incontrolable.

¿Piensa que necesitamos actuar rápidamente para ayudarle a su niño?

PASO 1
Hable con la Enfermera o Doctor de su niño.
¿Sigue preocupado?

PASO 2
Llame al Equipo de Respuesta Inmediata (RRT) y avísele a su enfermera.

- MARQUE: 1191
- Diga, “Necesito al Equipo de Respuesta Inmediata.”
- Dígale a la operadora su piso y su número de cuarto.
- El RRT llegará en cuestión de 10 minutos.
Quality Improvement

- Children’s Mercy Lean System
- Hospital Acquired Conditions committees
- Medication Safety
- Nurse Handoffs at the Bedside
Physical Environment

- Inpatient rooms in new tower
- Overhead lift systems
- Specialized equipment
- Signage
- Parent rooms on inpatient units
- Chapel
- Family accessible bathrooms
- Resource Center for Families
PFA’s in Facility Design

Designing a family accessible restroom

Testing overhead lift system

Children’s Mercy KANSAS CITY
Benefits For PFA’s

- Improves services for my patient and other patients
- Provides an opportunity to bring about meaningful change
- Increases opportunities for me to share information with others
- Feels good to make a contribution
- Is satisfying to give back to the system
- Provides opportunities to network with others
- Expands my knowledge and skills
Benefits for the Organization

- PFA’s see things differently and ask, “Why?”
- PFA’s challenge the status quo
- Staff makes fewer assumptions
- Planning process is improved
- They help carry out the mission of the organization
- Fresh perspectives to problems are shared
- PFA’s are advocates for better services
- PFA’s increase empathy for and understanding of patients and families
Overcoming Resistance

- Ensure the “right” people are in the room
- Increase your champions
- Allow time to gain trust
Tools for Success

There are tools available so you don’t have to recreate the wheel!

- Institute for Patient- and Family- Centered Care: ipfcc.org
- Institute for Healthcare Improvement: ihi.org
- AHRQ: ahrq.gov
- The Beryl Institute: berylinstitute.org
- PFCCpartners: pfccpartners.com
- Listservs
- Other hospitals
Lessons Learned

- Gain support from hospital leadership
- Designate staff member to coordinate the PFAC and PFA’s
- Ask staff for suggestions for potential PFA’s
- Set meeting times that will work for both PFAC members and staff
- Use plain language – avoid acronyms/clinical lingo
- Don’t set expectations too high for the first year – go for the low hanging fruit
- Report back to PFAC and PFA on changes made as a result of their input
- Celebrate accomplishments
- Culture change doesn’t happen overnight – but it’s worth the investment!
References

Institute for Patient and Family Centered Care
www.ipfcc.org

HRET Health Research & Education Trust. (2015, March)
Partnering to improve quality and safety: A framework for working with patient and family advisors
www.hpoe.org/pfaengagement

AHRQ Agency for Healthcare Research and Quality
www.ahrq.gov

IHI Institute for Healthcare Improvement
www.ihi.org

PFCCpartners (Patient and Family Centered Care)
www.PFCCpartners

Institute of Medicine
www.iom.nationalacademies.org
Questions?
Closing
Quality Resource Brief

Patients and Families: Health Care’s Untapped Resource

Hospitals are faced with increasing fiscal pressures, limited resources and expanding expectations from patients, families and other stakeholders regarding the
Patient and Family Engagement Webinar Series

- **Thursday, Aug. 18, Noon-1 p.m.**
  Patient Advocate-Policy Design Strategies
  Register

- **Thursday, Nov. 17, Noon-1 p.m.**
  Family-Centered Rounds
  Register
Put us on your calendar!

- MO HEN OB Harm Reduction Workshop
  - July 28 Hilton Garden Inn – Columbia
  - [Registration](#)
- Quality 101 Conference
  - August 4 Courtyard by Marriott – Blue Springs
  - [Registration](#)
- END of HEN Convening
  - August 24 Courtyard by Marriott – Columbia
  - [Registration](#)
- Monthly HEN webinars
  - Register for all webinars using [this link](#).
- MHA - Monthly What’s Up Wednesday
  - [Register](#) for 2016 WUW

[Other MHA events here](#)
Contact Information

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