Patient and Family Engagement Strategy

April 10, 2013
Webinar Agenda

• Overview & Introductions – Kathy Wallace
• Why is Patient & Family Engagement the Right Thing to do? – Carrie Brady
• Patient & Family Advisor Response – Bob and Barb Malizzo
• Review of Patient & Family Engagement Calendar of Activities – Karin Kennedy
• Commitment to Participate – Kathy Wallace
• Questions
National Quality Strategy

Aims and Priorities

1. Making care safer by reducing harm caused in the delivery of care
2. *Ensuring that each person and family are engaged as partners in their care*
3. Promoting Effective Communication & Care Coordination
4. Prevention & Treatment of Leading Causes of Mortality
5. Working with communities to promote wide use of best practices to enable healthy living
6. Making quality care more affordable for individuals, families, employers, and governments by developing and spreading new health care delivery models
National Quality Strategy Initiatives

- Patient-Centered Outcome Research Institute
- Focusing on Priority Conditions
  - National HIV/AIDS Strategy
  - Strategic Framework for
  - Multiple Chronic Conditions
- Medical Homes
- Accountable Care Organizations
- Health Insurance Exchanges
- Administrative Simplification

- Reduction of Healthcare Acquired Conditions
- Safe Use Initiative
- Partnership for Patients
- HITECH
- Value-Based Purchasing
- Readmission Reduction Program
- HCAHPS
- Healthy People/Healthy Communities
- National Quality Strategy
- Better Care
- Affordable Care

- Community Health Needs Assessment
- Patient-Centered Care Improvement Guide
- CDC Community Transformation and Self Management Grants
- Putting Prevention to Work in Communities
Partnership for Patients

Organization & Safety Culture

Patient & Family Engagement

Transparent Safety

CMS Support
Hospital Engagement Networks, Community Care Transitions Programs, National Contacts

Federal Programs
Medicare, Team STEPPs, Aging Network, Patients, SORHs, Medicaid, NHSN, CUSP Initiative, QIOs

Partners
Associations, Long Term Care, Unions, Patients, Researchers, NPP, Providers, Employers, Advocates, CBOs

- Falls
- CAUTI
- CLABSI
- SSI
- Ob
- EED
- Pressure Ulcers
- Re-admits
- VAP
- ADE
- VTE

Indiana Hospital Association
Engaging Patients, Reducing Harm

• Purpose of the P&FE Collaborative
  ➢ To accelerate the Coalition for Care’s progress on patient and family engagement (P&FE), IHA will implement a P&FE collaborative in 2013.

• Target number of participating hospitals
  ➢ To recruit at least 40 hospitals to participate in P&FE collaborative

• Measurement of success
  ➢ Measured using the CMS criteria on the monthly level of participation reports.
Measuring Success

• P1—Prior to admission, hospital staff provides and discusses with every patient that has a scheduled admission, allowing questions or comments from the patient or family, using a planning checklist that is similar to CMS's Discharge Planning Checklist.

• P2—Hospital conducts shift change huddles and does bedside reporting with patients and family members in all feasible cases.

• P3—Hospital has a dedicated person or functional area that is proactively responsible for patient and family engagement and systematically evaluates patient and family engagement activities.
Measuring Success

• P4—Hospital has an active Patient and Family Engagement Committee OR at least one former patient that serves on a patient safety or quality improvement committee or team.

• P5—Hospital has at least one or more patient(s) who serve on a governing or leadership board and serves as a patient representative.
Introduction of P&FE Collaborative Contributors

• Carrie Brady - a national expert to serve as consultant and expert to support the IHA efforts

• Bob and Barb Malizzo - serve as the voice of the patient for the Collaborative
Redefining the Engagement Imperative

Carrie Brady, JD, MA

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Why Engage?

• It’s the right thing for patients and providers
• Engagement supports other organizational imperatives
  – Quality/Safety
  – Regulatory
  – Reimbursement
• Lack of engagement is a barrier to both individual and organizational success
Published in February 2013 Issue of Health Affairs

What the Evidence Shows About Patient Activation: Better Health Outcomes and Care Experiences; Fewer Data on Costs

Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients’ ‘Scores’

Enhanced Support for Shared Decision-Making Reduced Costs of Care for Patients with Preference-Sensitive Conditions

Survey Shows That Fewer Than a Third of Patient-Centered Medical Home Practices Engage Patients in Quality Improvement
“[T]here was an inverse relationship between [patient] participation [in their care] and adverse events . . . [P]atients with high participation were half as likely to have at least one adverse event during the admission.”

What Is Engagement?
As Defined by CMS Metrics:

Point of Care:
1. Discharge planning checklist discussed prior to admission
2. Shift change huddles/bedside shift reporting

Policy & Protocol:
3. Dedicated functional area for patient and family engagement
4. Active patient and family engagement committee or patient advisor

Governance:
5. Patient representative on governing board
What Is Engagement?
As Defined in AHRQ Report

“A set of behaviors by patients, family members, and health professionals and a set of organizational policies and procedures that foster both the inclusion of patients and family members as active members of the health care team and collaborative partnerships with providers and provider organizations. . . . [T]he desired goals of patient and family engagement include improving the quality and safety of health care in the hospital setting.”

(Maurer M et al., Guide to Patient and Family Engagement: Environmental Scan Report, AHRQ Publication No. 12-0042-EF, May 2012)
AHA Framework for Engaging Healthcare Users

Framework for Engaging Health Care Users

Individual
- Increase the skills, knowledge and understanding of patients and families about what to expect when receiving care
- Demographics
- Prior Experience
- Knowledge
- Skills
- Attitudes

Health Care Team
- Promote shared understanding of expectations among patients and providers when seeking care
- Bedside Inpatient Unit
- Emergency Department
- Clinic
- Exam Room
- Home

Organization
- Encourage partnerships and integrate the patient and family perspective into all aspects of hospital operations
- Hospital
- Patient-Centered Health Home (PCHH)
- Accountable Care Organization (ACO)

Community
- Expand the focus beyond the hospital setting and find opportunities to improve overall community health
- Schools
- Neighborhoods
- Public Health
- Faith-based Groups
- Community Groups
- Coalitions

Information Sharing... Shared Decision Making... Self-Management... Partnerships
Attempting to Engage without Truly Engaging

“Most of the literature on patient and family engagement focuses on what patients could do (or what researchers and policymakers want patients to do), instead of discussing what behaviors patients and family members currently engage in or would be willing to engage in.”

Environmental Scan, p. 27
What HCAHPS Tells Us About Engagement

Engagement at the Front Lines

Commitment
Responsibility
Participation
Battle/Conflict
Appointment
We Have An Appointment to Engage

- Engagement as obligation
  - CMS Requirements
  - Focus on Compliance

- Engagement is on the “to do” list but not a priority or core part of the organizational culture
The Battle Begins

Are you ready to engage?
Barriers to Patient Engagement
(Environmental Scan)

Patient Barriers
- Fear and uncertainty
- Low health literacy*
- Provider reactions

Provider Barriers
- Professional norms and experiences
- Fear of litigation
- Perceived effort

*In a recent study, 53% of survey respondents agreed or strongly agreed that “most medical information is too hard for the average person to understand” - Environmental scan, p.25
Facilitators of Patient Engagement
(Environmental Scan)

Patients
- Self-efficacy
- Information
- Invitations to engage
- Provider support

Providers
- Motivation
- Organizational processes
- Implementation strategies
Organizational Process Factors Influencing Ability to Implement/Sustain Change

(Environmental Scan)

- Understanding of/experience with patient and family engagement
- Formal and informal leadership
- Hierarchy
- “Slack” resources
- Internal alignment
- Absorptive capacity
- Culture
“Give it to me straight, Doc. How long do I have to ignore your advice?”
Engagement as a Responsibility

• Engaged in pursuit of a common goal

• Partnering with patients and families becomes a core part of how you do business

• Expectations are clear – everyone understands their respective roles

• The responsibility doesn’t end at discharge
Missed Connections

- 50+ pages of written materials provided at discharge

- Instructions to obtain appointments with five different providers

- No identified point of contact

- No one knowledgeable about the comprehensive care plan

- No follow-up or coordination

Beth Ann Swan, Dean of Jefferson School of Nursing, Thomas Jefferson University, PA  Health Affairs, 31, no.11 (2012):2579-2582
“Higher patient satisfaction with inpatient care and discharge planning is associated with lower 30-day readmission rates even after controlling for hospital adherence to evidence-based practice guidelines.”

Engaged to be Married

Mutual respect

Life-long commitment

Continuous partnership across the continuum
1. Define roles.
2. Ask (before and after you tell).
3. Recognize and utilize your allies.
Defining Roles

Individual Level Example

Patient as Commander in Chief

- Patient identifies the goal
- Patient has expertise in and educates provider about personal health, habits, feasibility of recommendations
- Patient is the ultimate decision maker

Health Care Provider as General

- Healthcare provider identifies the diagnosis
- Healthcare provider has expertise in range of treatment options
- Healthcare provider educates patient about options and makes recommendations
Ask *(before and after you tell)*

- Patient and family engagement requires an ongoing open dialogue with providers at all levels
  - Individual, healthcare team, organization, and community
- Identify what is most important to the patient
  - E.g. Twin Rivers Regional Medical Center Sacred Moment [http://alwaysseventspickerinstitute.org/?p=1789](http://alwaysseventspickerinstitute.org/?p=1789)
- Verify understanding
  - E.g. Iowa Health System Teach Back Toolkit [www.teachbacktraining.com/](http://www.teachbacktraining.com/)
Recognize and Utilize Your Allies

- Patients
- Families
- Volunteers
  - Former Patients
- Non-clinical staff
- Community partners
- Peers/hospital association
Patient and Family Advisor Response from the Malizzo Family

Bob and Barb Malizzo
Review of Patient & Family Engagement Calendar and Activities

Karin Kennedy
Key Strategies for P&FE Collaborative

• Conduct monthly coaching calls on the second Wednesday of the month* from 11 a.m. to noon Eastern Time
  – Call to Action will be made during each call
  – The next month’s call will begin with a report out on progress

• Incorporate P&FE topic into the Patient Safety Summit May 7

• Compile a resource guide for the hospitals to assist them in their implementation strategies

*Subject to availability of speaker
# Focused Webinars

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<tr>
<th>Date</th>
<th>Type of Meeting</th>
<th>Audience</th>
<th>Focused Topic</th>
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<tbody>
<tr>
<td>May 7</td>
<td>In-person (Patient Safety Summit)</td>
<td>CEO, CMO, CNO, PFE team lead</td>
<td>Implementing P&amp;FE Strategies at the Organizational Level</td>
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<tr>
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<td></td>
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<td>• Transforming the patient safety culture by developing and sustaining meaningful partnerships with patients and families</td>
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<tr>
<td>June 12</td>
<td>Webinar</td>
<td>CEO, CMO, CNO, PFE team lead</td>
<td>Implementing P&amp;FE Strategies at the Organizational Level</td>
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<td></td>
<td>Dr. Tim McDonald (unconfirmed)</td>
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<td>• Patient representation on a governing or leadership board</td>
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<td>• Incorporating patient and family advisory councils into patient safety, quality improvement and other hospital committees</td>
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<tr>
<td>July 10</td>
<td>Webinar</td>
<td>PFE team lead, CNO, nursing directors, nurse managers, case managers</td>
<td>Implementing P&amp;FE Health Care Team Level Strategies</td>
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<tr>
<td></td>
<td>Carrie Brady present</td>
<td></td>
<td>• Patient and family involvement in beside change-of-shift reports</td>
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<td>• Patient- and family-activated rapid response</td>
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<td>• Discharge planning checklist</td>
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<tr>
<td>Aug. 15</td>
<td>In-person meeting</td>
<td>PFE team lead</td>
<td>P&amp;FE Strategies at the Community Level</td>
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<td></td>
<td>Carrie Brady present – topic TBD</td>
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<td>• Providing health education and literacy classes</td>
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<td>• Understanding diverse populations</td>
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<td><strong>Other</strong></td>
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<td>• Engaging patients and families through the generations – how to approach through generational differences</td>
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<td>• Dedicating resources for P&amp;FE</td>
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<td>Sept. 11</td>
<td>Webinar</td>
<td>PFE team lead</td>
<td>• TBD</td>
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<td>Oct. 9</td>
<td>Webinar</td>
<td>PFE team lead</td>
<td>P&amp;FE Strategies at the Community Level</td>
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<td>• Supporting safe and healthy working environments</td>
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<td>Nov. 13</td>
<td>Webinar</td>
<td>PFE team lead</td>
<td>Implementing P&amp;FE Strategies at the Organizational Level</td>
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<td>Carrie Brady present</td>
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<td>• Evaluating P&amp;FE activities</td>
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<td>Dec. 11</td>
<td>Webinar</td>
<td>PFE team lead</td>
<td>The Future of Health Care Engagement</td>
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<td></td>
<td>Carrie Brady present</td>
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Focused Webinars

• Access to the monthly webinars will remain the same throughout the year. Currently, pre-registration is not required.
Commitment to Participate

• Complete Commitment via Survey Monkey located at https://www.surveymonkey.com/s/PFE_Commitment by April 30

• Agree to the following:
  – Work on adopting and implementing as many of the Patient and Family Engagement Strategies as possible throughout 2013
  – Actively participate in the webinars and events
  – Respond to the Call to Action, and
  – Agree to willingly share our engagement experiences.

• Identify someone from your organization who is coordinating P&FE

• Identify your Senior Executive who will be your champion
Thank you