



**ALWAYS EVENTS®**  
**HEALTHCARE SOLUTIONS BOOK**



**DECEMBER 2012**

## Always Events® Healthcare Solutions Book

In 2009, the Picker Institute launched an initiative designed to significantly elevate patient experience through the identification and implementation of Always Events. Always Events are those things that are so important to patients and families that they should occur in every healthcare interaction, for every patient, every time. The Picker Institute encouraged organizations to identify their own Always Events in the areas of communication and transitions of care, two essential foundations of a positive patient experience and areas that represent significant opportunities for improvement. More than 80 organizations answered this call to action to identify Always Events and twenty-one of these organizations were awarded small matching grants (\$50,000 or less) to implement their programs. Several recipients of Graduate Medical Education grants also incorporated Always Events into their programs.

The grantee organizations have implemented the Always Events concept to address many of the most vexing challenges in healthcare today and have achieved great success in partnering with patients to overcome those challenges. In addition, since many other organizations have developed successful programs that meet both the spirit and criteria of the Always Events program, the Picker Institute developed a recognition program to allow organizations to apply for and obtain official recognition as Always Events.

The Solutions Book presents a snapshot of twenty successful grantee and recognized programs and is designed to help healthcare organizations quickly scan key features of these Always Events projects. Brief summaries of the Always Events are included in this Solutions Book, along with a list of tools developed. Each of the referenced tools is available for free download through the Picker Institute's online Always Events Toolbox ([http://alwaysevents.pickerinstitute.org/?page\\_id=882](http://alwaysevents.pickerinstitute.org/?page_id=882)). In addition, contact information for the organizations that developed the tools is included to enable you to reach out directly to them.

The Solutions Book is designed to be used in conjunction with the *Always Events Blueprint for Action*. The Blueprint provides more detail to organizations interested in developing their own Always Events initiatives to improve the patient experience, engage staff, and transform healthcare.

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## I. SOLUTIONS FOR CARE TRANSITIONS CHALLENGES

In the United States healthcare system, patients experience many transitions of care both within and between healthcare settings. Unfortunately, these transitions are often handled poorly. Insufficient information is provided and/or critical information is misunderstood. Poor transitions create frustrating, expensive, and even life-threatening consequences for patients and families. They also contribute to unnecessary readmissions to the hospital, which impacts not only the well-being of patients, but the hospital's financial well-being as well.

Healthcare providers recognize the need to improve transitions, even when they occur within the same institution. In the Agency for Healthcare Research and Quality's patient safety culture survey, which is used to assess staff perceptions of patient safety in more than 1,000 hospitals nationwide, handoffs and transitions comprised the second lowest scoring area (non-punitive response to error was one percent lower). More than 50% of the hospital staff members responding to the survey agreed with the following statements:

- "Things 'fall between the cracks' when transferring patients from one unit to another."
- "Important patient care information is often lost during shift changes."
- "Problems often occur in the exchange of information across hospital units."
- "Shift changes are problematic for patients in this hospital."

*(AHRQ, Hospital Survey on Patient Safety Culture: 2012 User Comparative Database Report.)*

Opportunities to improve transitions are not limited to the hospital setting. Many initiatives, including the National Transitions of Care Coalition, are designed to address this urgent need for improved coordination and integration of care from the patient perspective, regardless of the setting in which the patient is being treated.

In light of both the importance of the subject and the significant opportunities for improvement, Care Transitions (including transitions between and within healthcare organizations) was selected as one of two focus areas for the Always Events grants. Several Always Events grantees took on this challenge and created programs to improve transitions, including:

- Hospital Discharge
- Handoffs
- Partnering with Patients and Families to Reduce Readmissions

By implementing one or more of these Always Events strategies, it is possible for healthcare organizations to improve not only the patient experience, but quality, safety, and organizational financial health as well.

## SMART Discharge Protocol<sup>SM</sup>

**ALWAYS EVENT<sup>®</sup> SOLUTION:** Always engage the patient in a “SMART” discharge process that helps to ensure that key information is consistently discussed and understood. A SMART discharge includes communication about:

- **S** - Symptoms
- **M** - Medications
- **A** - Appointments
- **R** - Results
- **T** - Talk with me

These five items are captured throughout the hospital stay on a worksheet designed for use by patients and families, incorporated into the electronic medical record discharge instructions, and used as a checklist at the time of discharge.

### AVAILABLE TOOLS:

- [SMART Discharge Worksheet](#)
- [SMART Discharge Protocol FAQs](#)
- [SMART Discharge Self-Learning Packet](#)
- [SMART Discharge Training Presentation](#)

**SETTING:** Hospital, three units (Medical-Surgical, Neonatal Intensive Care, Heart and Vascular)

### RESULTS AND IMPACT:

- Decreased emergency room visit and readmission rates
- Improved HCAHPS performance in discharge information domain

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The image shows a worksheet titled "Be Smart, Leave S.M.A.R.T." with a subtitle "The Communication Journal Revisited". The worksheet is divided into five sections, each with a corresponding icon and a set of lines for notes:

- Symptoms I should look for:** (Warning icon)
- Medication notes:** (Pill icon)
- Appointments:** (Calendar icon)
- Results:** (Document icon)
- Talk with me more about:** (Speech bubble icon)

At the bottom, there is a footer: "Call AAHSMC at 443-481-4000 for urgent health questions after you leave the hospital."

## PATIENT-CENTERED BEDSIDE SHIFT-TO-SHIFT HANDOFFS

**ALWAYS EVENT® SOLUTION:** Always include patients in a bedside shift-to-shift handoff process using the ISHAPED protocol. ISHAPED refers to:

- **I** - Introduce
- **S** - Story
- **H** - History
- **A** - Assessment
- **P** - Plan
- **E** - Error Prevention
- **D** - Dialogue

A research study and training tool kit and evaluation program were developed with input from patient, family, and parent advisors. ISHAPED also is being incorporated into the electronic medical record.

### AVAILABLE TOOLS:

- [ISHAPED Patient Centered Bedside Report Tool](#)
- [ISHAPED FAQs](#)
  - Separate FAQs: Nurses, Parents and Guardians, Patients and Families
- [ISHAPED Training Videos](#)
  - Introduction
  - Videos by patient type: Adult Med/Surg, Confused Med/Surg Patient, Post Partum, Pediatric Patient and Parent
  - ISHAPED Coaching Example
  - Techniques to Enhance Communication and Patient Engagement

**SETTING:** Five-hospital healthcare system

### RESULTS AND IMPACT:

- Patients reported viewing the bedside report favorably
- Program is being used as a model for development of other system-wide patient-centered initiatives

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## CLINIC HANDOFFS

**ALWAYS EVENT® SOLUTION:** Always conduct a patient-oriented clinic handoff when transitioning patients from one provider to another in a resident clinic using ten CLINIC SAFE tips for improving transitions. The tips above the line apply to the departing resident and the tips below the line apply to the resident assuming care.

- **C** - Clearly Notify Patients
- **L** - Look over patient panels
- **I** - Identify High Risk Patients
- **N** - New PCP Signout
- **I** - Insist patients follow-up
- 
- **C** - Call patients who miss visits
- **S** - Study follow-up promptly
- **A** - Assume care immediately and promote ownership
- **F** - Find patients who fall through the cracks
- **E** - Encourage supervision

The tip sheet also includes guidance on how to identify high-risk clinic handoff patients.

### AVAILABLE TOOLS:

- [EPOCH CLINIC SAFE Pocket Card](#)
- [Doctor Transition - Patient Visit Tool](#)
- [Clinic Handoff Video](#)
- [MedEd Portal iCollaborative Materials](#)

**SETTING:** Internal medicine residency clinic

### RESULTS AND IMPACT:

- Decreased emergency department and inpatient hospital utilization
- Increased percentage of patients seeing the correct physician after the transition

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## PARTNERING WITH PATIENTS AND FAMILIES TO REDUCE READMISSIONS

**ALWAYS EVENT® SOLUTION:** Always actively partner with patients and families in care transitions through the use of transitions liaisons and personalized educational tools. Tools include a patient medical journal that enables patients/families to record and organize healthcare information.

### AVAILABLE TOOLS:

- [Transitions of Care Partnership Project Overview](#)
- [Transitions of Care Management Call and Questionnaire](#)
- [Case Management Initial Assessment and Readmission 30 Day Assessment](#)
- [Patient Medical Journal Templates](#)

**SETTING:** Hospital and community-based home care, rehabilitation and nursing care facilities or organizations

### RESULTS AND IMPACT:

- Decrease in readmission rate
- Increase in patients reporting they felt ready to return home
- Increase in patients reporting they understood their medications at the time of discharge
- Caregivers report that medical journal is an effective family communication tool

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## II. SOLUTIONS FOR COMMUNICATION CHALLENGES

During the development of the Always Events initiative, patients, families, healthcare providers, and key thought leaders consistently emphasized the primary importance of communication to patient- and family-centered care. As one focus group participant noted, “If you have communication . . . everything else will fall into place, because that’s the first starting point.” This observation is consistent with AHRQ’s focus group research during the development of the HCAHPS survey, in which consumers identified “communication with physicians, nurses, and all hospital staff,” as a key characteristic of hospital quality, “with many indicating this was the most important characteristic for them.” *Soafer, S. et al., “What Do Consumers Want to Know about the Quality of Care in Hospitals?” Health Services Research 40(6) Part II: December 2005.* Unfortunately, healthcare providers typically aren’t good judges of what their patients understand and often believe they have communicated effectively when they have not. (See, e.g., Olson DP and Windish DM, “Communication Discrepancies Between Physicians and Hospitalized Patients” *Arch Intern Med* 2010; 170 (15): 1302-1307.)

Communication is not only a key to effective patient-provider partnerships, it is fundamental to patient safety. When hospital patients were surveyed about their own roles in patient safety, the most common response was that they believed their role was to follow their healthcare providers’ instructions. (*Rathert C, Huddleston N, Pak Y “Acute Care Patients Discuss the Patient Role in Patient Safety” Health Care Manage Rev, 2011, 36(2), 134-144.*) Yet in many cases, even basic instructions are not being provided to patients, as evidenced by national HCAHPS performance scores.

Promoting effective communication not only involves consideration of the interactions between patients, families and providers, but also an understanding of the factors that impair communication among providers themselves. Several Always Events grantees have successfully implemented Always Events primarily designed to improve communication, including:

- Nursing Communication
- Physician Communication
- Multi-disciplinary Communication
- Evaluating Understanding

Implementing one or more of these Always Events strategies may help organizations improve both the patient and staff experience.

## TEACHING “ALWAYS” BEHAVIORS FOR NURSES

**ALWAYS EVENT® SOLUTION:** As part of their orientation program, nurses new to the facility participate in a comprehensive training module related to six “Always” behaviors that foster communication with patients. Patients and family members serve as faculty for the training.

The specific Always Events® identified by the hospital are:

- **A** – Address and refer to patients by the name they choose, not their disease
- **L** – Let patients and families know who you are and your role in the patient’s care
- **W** – Welcome and respect those defined by the patient as “family”
- **A** – Advocate for patient and family involvement in decision making to the extent they choose
- **Y** – Your name badge: ensure patients can read it.
- **S** – Show patients and families the same respect you would expect from them

### AVAILABLE TOOLS:

- [Always Events pre-session evaluation](#)
- [Always Events post-session evaluation](#)
- [Always Events behavioral checklist](#)
- [Unit-based preceptor observation form](#)

**SETTING:** Hospital

### RESULTS AND IMPACT:

- 87% of respondents reported that the training changed their understanding of patient and family centered care; 40% indicated their understanding was “considerably or completely changed” by the program

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## TEACHING "ALWAYS" BEHAVIORS FOR PHYSICIANS

**ALWAYS EVENT® SOLUTION:** Improve physician communication by identifying common "potholes" that can derail patient-centered care during hospital admission and at the time of discharge and teaching specific Always Events that can prevent or "fill" these potholes. Two alternative acronyms used to describe the Always Events are POTHOLEs and PATIENT:

- **P** – Pay attention
- **O** – Orient patients and families
- **T** – Test understanding
- **H** – Humanism - Be kind
- **O** – On-time care
- **L** – Let patients explain
- **E** – Expectations - what should patients expect?
  
- **P** – Pay attention
- **A** – Active listening to patients
- **T** – Timeliness
- **I** – Introduce all team members
- **E** – Expectations, manage them
- **N** – Niceness/Manners
- **T** – Test understanding

<b>P</b>	<b>PAY ATTENTION</b> - Meaningful listening - Discharge "time-outs"
<b>O</b>	<b>ORIENT PATIENTS AND FAMILIES</b> - Who's who, who's in charge - Rhythm of the ward/service
<b>T</b>	<b>TEST UNDERSTANDING</b> - Explain without jargon - Solicit questions
<b>H</b>	<b>HUMANISM – BE KIND</b> - Adult-to-adult amenities - Empathize
<b>O</b>	<b>ON-TIME CARE</b> - Realistic timelines - Update, empathize
<b>L</b>	<b>LET PATIENTS EXPLAIN</b> - Open-ended inquiries - Is there anything else?
<b>E</b>	<b>EXPECTATIONS - WHAT SHOULD PATIENTS EXPECT?</b> - What happens next - Coordinate, explicate

**AVAILABLE TOOLS:**

- [POTHOLEs Pocket Card](#)
- [POTHOLEs Presentation](#)

**SETTING:** Hospital

**RESULTS AND IMPACT:**

- Increased understanding of patient-centered care and confidence in implementing principles of patient-centered care was reported by house staff following training

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## PREPARING PHYSICIANS FOR CHALLENGING CONVERSATIONS

**ALWAYS EVENT® SOLUTION:** Improve physician communication by preparing physicians to always have end of life decision making conversations with family members of patients with advanced dementia before the patient's condition becomes acute.

### AVAILABLE TOOLS:

- Video: "How do you have the conversation?" Discussing goals of care with family members of patients with dementia.
- Video: Module to Educate Trainees about Care of Persons with Dementia
- Video: The Conversation Project: A medical student discusses her end of life wishes with her mother.

**SETTING:** Residency program

### RESULTS AND IMPACT:

- Residents reported improved comfort level with conversations and indicated the training module was valuable

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## IMPROVING RESPONSIVENESS

**ALWAYS EVENT® SOLUTION:** The “Always Responsive” program uses a multi-faceted approach to improving communication and responsiveness. The program includes processes and tools designed to improve communication between patients and staff, as well as processes and tools focused on improving communication among staff. The seven interventions employed are:

### **Patient Processes and Tools:**

- Hourly safety rounds
- Care team face sheets
- Patient/family-centered white boards
- Welcome video

### **Staff Processes and Tools:**

- Care team communication boards
- Support service report cards
- A learning coach (for staff)

### **AVAILABLE TOOLS:**

- [Always Responsive Intervention List](#)
- [Always Responsive Job Aids: Hourly Safety Rounds and White Boards](#)
- [Care Team Face Sheet](#)
- [Welcome Video](#)

**SETTING:** Hospital; initially implemented on two adult medicine units  
Aspects of the program have been expanded to other hospital units

### **RESULTS AND IMPACT:**

- Increased HCAHPS responsiveness scores
- Patients reported that the interventions were effective and improved their care
- Staff reported that the interventions (other than support service report cards) were effective in improving communication and care coordination

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## TEACH-BACK

**ALWAYS EVENT® SOLUTION:** Always use a teach-back method to communicate with patients during hospital discharge, primary care follow-up and the initial home health visit. Healthcare providers are educated in the benefits and use of teach back through a video training toolkit.

### AVAILABLE TOOLS:

- [Complete Always Use Teach-back! Training Toolkit](#)
- [Teach-Back Videos](#)
- [Elements of Competence for Using Teach-Back Effectively](#)
- [Always Use TeachBack! Observation Tool](#)
- [Always Use TeachBack! Conviction and Confidence Scale](#)
- [Always Use Teach-Back! Coaching Tips](#)
- [Making Teach-Back! An Always Event](#)

**SETTINGS:** Hospital, primary care, home health

### RESULTS AND IMPACT:

- Significant increase in the use of teach-back by clinicians
- Significant decrease in the use of closed-loop (yes/no) questions
- In observed encounters, patients were able to successfully teach back

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**Always Use  
Teach-back!**

### **III. SOLUTIONS FOR PATIENT AND FAMILY PARTNERSHIP ACROSS THE CONTINUUM**

At its core, an Always Event is based on a thoughtful understanding of the patient and family experience of care and strong and effective partnerships. It is not enough to focus on patients and to do the things we think they need; to be truly patient-centered, healthcare providers must partner with patients and families to see what the experience is like through their eyes and work together to improve it. Patients and families aren't merely healthcare "consumers," they are architects and designers of an effective healthcare system.

Organizations often seek patient perspectives and guidance on a formal basis through use of patient and family advisors, councils, focus groups, and review of survey data. Patients and family members are constantly interacting with healthcare providers, however, and careful listening to these relatively informal exchanges can result in tremendous innovation.

The grantees featured in this section have developed innovative ways not only to listen carefully, but to truly engage patients and families as partners in a variety of settings across the continuum, specifically:

- Inpatient Hospital Settings
- Adult
- Pediatric
- End-of-Life Care for Neonates
- Outpatient Settings
- Long-term Care Settings

In these projects, patients and families aren't just contributing ideas and feedback, they are an integral part of the programs.

## PARTNERING WITH PATIENTS FOR PAIN MANAGEMENT

**ALWAYS EVENT® SOLUTION:** Always have a comprehensive conversation about pain and comfort with every patient. Using a tool to guide that conversation, the Comfort and Pain Control menu, assures that a full range of options for pain control and comfort are shared with the patient and available at the bedside as a reference throughout their stay. The menu is a four-page guide to pain management strategies, including: comfort items (e.g. warm compress), medication, comfort actions (e.g. repositioning), personal care items, relaxation options (e.g. stress ball), and boredom relievers.

### AVAILABLE TOOLS:

- [The Comfort and Pain Control Menu](#)

### SETTING:

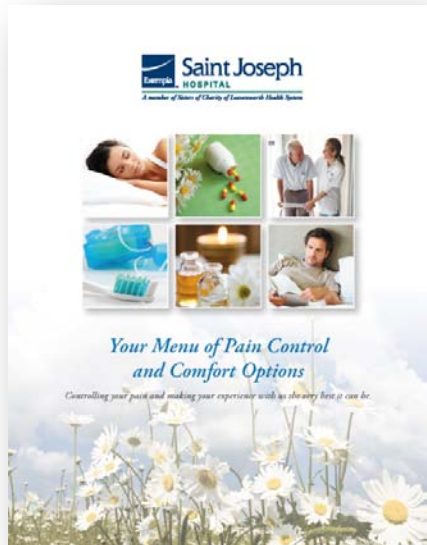
Initially one hospital; program is now being expanded to other system hospitals

### RESULTS AND IMPACT:

- Increased HCAHPS scores on pain management
- Patients expressed appreciation for the additional pain management information and compared use of the menu to a spa-like experience
- Staff was pleased to have a trigger tool to guide pain conversations
- Empowered additional staff members to respond to patients' pain

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## PARTNERING WITH FAMILIES TO IMPROVE CARE FOR HOSPITALIZED PATIENTS WITH DEMENTIA

**ALWAYS EVENT® SOLUTION:** Hospitalized patients with dementia always receive care targeted to their stage and type of dementia. Hospitals partner with family members to foster continuity and safety across settings and to personalize care. An assessment is conducted upon admission to gather detailed information about the patient’s needs and routines. Families are provided with guidance on how to minimize any negative effects of the hospitalization on the patient.

### AVAILABLE TOOLS:

- [Partner with Me Patient/Family Questionnaire](#)
- [Pre-hospitalization Checklist for Patients/Families](#)
- [Patient Room Care Plan](#)
- [Partner with Me Chart Care Plan](#)
- [Hospital Volunteer Partner with Me Competency Checklist](#)
- [Caregiver Visitation Hospital Schedule](#)
- [Evaluation: Partner With Me Project](#)
- [Partner with Me Volunteer Protocol](#)
- [Video: Partnering with Family Caregivers: A Guide for Hospitalization](#)

**SETTING:** Initially two pilot hospital units, in the process of expanding to other units, outpatient settings, and skilled nursing facilities.

### RESULTS AND IMPACT:

- Family caregivers and staff members reported that the individualized care plan was helpful
- Staff members indicated that participation in the program improved the patient’s care and that family members benefitted from having their loved one in the program
- Volunteers are enthusiastic about their role in program

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## **GUARDIAN ANGELS**

**ALWAYS EVENT® SOLUTION:** Always assign each transplant patient and family a “guardian angel” when they arrive at the hospital to alleviate anxiety, assist with navigation, facilitate communication between family and the clinical care team, provide accurate, timely updates, and promote continuity of care. Guardian angels are paid employees, who are carefully trained.

### **AVAILABLE TOOLS:**

- [Guardian Angel Job Description](#)
- [Guardian Angel Handoff Report Template](#)
- [Guardian Angel Patient and Family Pick Up Questionnaire](#)
- [Guardian Angel Brochure](#)
- [Guardian Angel Orientation Checklist](#)

**SETTING:** Hospital transplant service

### **RESULTS AND IMPACT:**

- Positive qualitative feedback from patients, family, and staff

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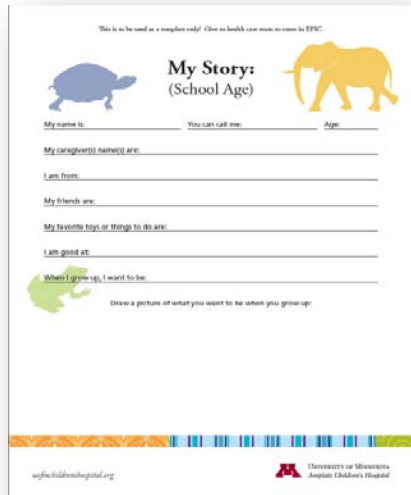
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## MySTORY: PARTNERING WITH PEDIATRIC PATIENTS AND FAMILIES

**ALWAYS EVENT® SOLUTION:** At the beginning of a hospital stay, always gather information about patient values, preferences, and needs (referred to as “MyStory”) and document the information in the electronic medical record. All team members use MyStory to create meaningful, personalized interactions and to involve children in care decisions and care planning.

### AVAILABLE TOOLS:

- MyStory Templates
  - Newborn
  - Infant and Toddler
  - School Age
  - Teen
  - Adult
- MyStory Champion Commitment
- MyStory Education Module
- MyStory Poster



This is to be used as a template only! (How to health care team to use for EPRC.)

**My Story:**  
(School Age)

My name is: \_\_\_\_\_ You can call me: \_\_\_\_\_ Age: \_\_\_\_\_

My caregiver(s) name(s) are: \_\_\_\_\_

I am from: \_\_\_\_\_


My friends are: \_\_\_\_\_

My favorite toys or things to do are: \_\_\_\_\_

I am good at: \_\_\_\_\_

When I grow up, I want to be: \_\_\_\_\_

Draw a picture of what you want to be when you grow up:

www.childrenshospital.org 

**SETTING:** Initially children’s hospital, inpatient and outpatient settings, expanded to adult medical center

### RESULTS AND IMPACT:

- Increased pediatric patient satisfaction
- Increased parent satisfaction

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## PARENT MENTOR PROGRAM

**ALWAYS EVENT® SOLUTION:** Always offer each family of a new pediatric cancer patient a trained parent-mentor to support them throughout their child’s treatment and recovery or bereavement. The “PAIR Mentors” program refers to “Parents Assisting Inspiring and Reassuring.” Mentors provide peer support, empower the family to effectively communicate and partner with staff, and connect parents to hospital and community resources.

### AVAILABLE TOOLS:

- [Mentor Evaluation Form](#)
- [PAIR Mentors Program Policies](#)
- [Presentation](#)
- [Mentor Training Curriculum](#)

**SETTING:** Children’s Hospital, Solid Tumor and Leukemia services

### RESULTS AND IMPACT:

- Qualitative feedback from parents, mentors, and staff has been positive
  - Parents paired with mentors are enthusiastic about the program
  - Mentors indicate they feel supported, well-trained and believe they are making a difference
  - Staff members indicate the program has enhanced their partnership with patients and families
- Topics of mentor/mentee interactions validate that empowering families to partner and communicate effectively with staff is a key feature of the program. The vast majority of interactions focused on communication, asking questions, and/or partnering with staff.

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## CLOSE TO ME<sup>SM</sup>

**ALWAYS EVENT<sup>®</sup> SOLUTION:** Always increase early onset and frequency of skin-to-skin holding of premature infants (“kangaroo care”) through the “Close to Me” program, a comprehensive set of awareness and educational activities, tools and products for parents and healthcare providers.

### AVAILABLE TOOLS:

- [Close to Me Flyer](#)
- [Close to Me Parent Education Presentation](#)
- [Close to Me Staff Education Presentation](#)
- [Online Course: Close to Me<sup>SM</sup>: The Evidence-Based Case for Kangaroo Care](#)

**SETTING:** Neonatal Intensive Care Units (NICUs) at several hospitals

### RESULTS AND IMPACT:

- More positive staff attitudes toward kangaroo care
- More frequent parent requests for kangaroo care
- Increased parent knowledge and perception of success
- Earlier onset of kangaroo care among babies less than 28 weeks gestation

### CONTACT INFORMATION:

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Touching or holding a baby skin-to-skin (“kangaroo care”) in the NICU is one of the most comforting things many parents can do for their child, and no equipment can substitute for it.

It’s good for a baby’s health because it often can:

- Keep a baby warm
- Stabilize a baby’s heart rate
- Help a baby gain weight
- Reduce discomfort a baby may feel



“I will never forget the first time my newborn was placed on my chest. She curled right up into me, and in that moment, I finally felt like a mother. Nothing else existed but my daughter and me.”  
— Denise R.

For information on pregnancy and newborn care, visit [marchofdimes.com](http://marchofdimes.com).

## PREMATURE LIFE TRANSITIONS PROGRAM

**ALWAYS EVENT® SOLUTION:** Always provide compassionate, patient-and family-centered end of life care to families as they transition from curative care to end-of-life care, infant death, and bereavement. A nursing bereavement care training curriculum helps to build communication skills for staff, and tools and resources are designed to support the family.

### AVAILABLE TOOLS:

- [Premature Life Transitions Program Presentation](#)
- [Always Event Observation Tool](#)
- [Family Meeting Always Event Checklist](#)
- [Premature Life Transitions Memory Book](#)
- [Bereavement Care Team Letters](#)
- [Simulation Training Family Meeting Script](#)

**SETTING:** Hospital Newborn Special Care Unit, expanding to a second hospital

### RESULTS AND IMPACT:

- Improvement in clinician communication skills, knowledge, and comfort level with end-of-life and bereavement care
- Positive feedback from parents

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## MAKING THE MOST OF YOUR VISIT

**ALWAYS EVENT® SOLUTION:** Always help to prepare patients for their office visits by using the *Making the Most of Your Visit* form in the waiting room. The form assists patients in preparing for their visits by documenting how they are managing their health and the questions they want to ask their healthcare provider. An educational curriculum engages staff in using the tool and building effective communication skills.

**AVAILABLE TOOLS:**

- Making the Most of My Visit Form (MMV)
- Presentation

**SETTING:** Several Primary Health Clinics

**RESULTS AND IMPACT:**

- Patients have indicated the tool helps them communicate more effectively with their providers
- Providers have expressed improved satisfaction with patient self-management support

**CONTACT INFORMATION:**

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**Making the Most Out of Your Visit**

- Your doctor and team members want you to get the most from your visit. Review this form before entering the exam room.
- Write down questions to ask your doctor in the space below. Bring this form into the examining room.
- Bring your medicine. Each time you visit the doctor, bring all of the prescription and over-the-counter medicines you are taking. Example includes vitamins, minerals, and herbal preparations.

Today's Visit: _____/_____/_____			
1. "I am managing my Health...":			
"Excellent" 	"Good" 	"Not Good" 	"Not Sure" 
2. "What do I want to ASK my Provider today?"			

\*\*\*DO NOT FILE IN CHART—Give to FM Care Coordinator\*\*\*

CIRCLE SITE: PAC SF VAL CP SV HM

Revised 3/6/2012

## ROUTINE DEMENTIA SCREENING

**ALWAYS EVENT<sup>®</sup> SOLUTION:** Always screen patients 70 years of age or older for mild cognitive impairment (MCI) or dementia during their annual primary care health exam. A web-based cognitive assessment tool developed by the National Institutes of Health is the initial screen, followed by a full dementia assessment if necessary, guided by EMR templates. Ongoing training provides doctors with the education they need to be able to recognize dementia.

### AVAILABLE TOOLS:

- [Henry Ford Health System Brain Health Brochure](#)
- [Henry Ford Health System Mild Cognitive Impairment Brochure](#)
- [Henry Ford Health System Eligibility Screening Tool](#)
- [Cognitive Screening Exam Template](#)
- [Presentation: NIH Toolbox Dementia Screening](#)
- [Test preparation card](#)
- [Physician talking points](#)

**SETTING:** Two health system internal medicine clinics

### RESULTS AND IMPACT:

- Increased screening for cognitive impairment
  - 76% of those patients offered screening accepted it
  - 43% of those offered screening completed it

### CONTACT INFORMATION:

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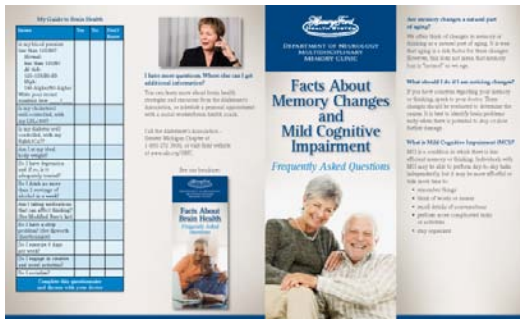
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## **SAME PAGE TRANSITIONAL CARE**

**ALWAYS EVENT® SOLUTION:** Always use a portable personal health record to ensure consistency across the continuum of care, particularly in transitions between hospitals and long-term care facilities. The template for the personal health record is a validated web-based self-assessment tool (How's Your Health). This tool is used in conjunction with a Care Partner program, in which the patient identifies one or more family/friends to partner in healthcare planning.

**AVAILABLE TOOLS:**

- Care Partner Agreement
- Care Partner Resource Videos
- Planetree Same Page Care Patient Notebook
- How's Your Health Videos

**SETTING:** Two hospitals and three long-term care settings

**RESULTS AND IMPACT:**

- Increased patient confidence in their ability to manage their own health

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## IV. SOLUTIONS FOR PATIENT SAFETY CHALLENGES: FALL PREVENTION

Improved patient safety is a goal & outcome of many of the Always Events projects. The two projects in this section focused on improving safety by preventing falls.

**ALWAYS EVENT® SOLUTION:** Two Always Events programs addressed fall prevention:

1. **Safe Patient Mobilization (SPM) Program:** Always engages interdisciplinary staff, patients, and families in fall prevention as a safety initiative.
2. **Video Education:** Always encourages patients and families to partner with providers to prevent falls during their hospital stay by watching a video available through the hospital's television patient education system.

### AVAILABLE TOOLS:

#### **SPM Program:**

- STOP Our Patients From Falling Checklist
- SPM Stop Sign

#### **Video Education:**

- Fall Prevention Handout
- Fall Prevention Video

### SETTING: Hospital

- *SPM Program:* House-wide
- *Video Education:* Initially implemented in two units, now expanding house-wide

### RESULTS AND IMPACT:

- *SPM Program:* Significant reduction in fall rate; increase in HCAHPS responsiveness scores
- *Video Education:* Trend line decrease in falls in intervention units compared to control units

### CONTACT INFORMATION:

#### **SPM Program**

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#### **Video Education Program**

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“Regardless of what we do for a living, we are all patients at some time in our lives. And when that time comes, we like to believe that our needs and preferences really drive every healthcare decision.”

**Dr. Karen Davis, President  
The Commonwealth Fund**

**An excerpt from Always Events-Turning Never Events into a Smile**

“Always Events® implies a system that looks not at what is wrong with medical care today but searches for the elements that are “right,” i.e. those valued by most patients. By identifying the elements that should always occur from the patient perspective, then systems can be re-engineered to ensure that they do, in fact, always happen.”

**- Tom James, MD, Medical Director  
National Network Operations at Humana**

“There is the right and the wrong in meeting patients’ needs, and Picker sets the right standards.”

**Margaret Mahoney, Past President  
The Commonwealth Fund**

“Patient-centered healthcare begins and ends with the recognition that patients are the most important managers of their health and care.”

**Dr. Ed Wagner  
Director, MacColl Institute  
for Healthcare Innovation**

“Family-centered care...means partnering with parents at all levels: at the bedside, and also when we plan the health care delivery system. We can’t assume we know what families need. We need their input in designing systems that meet their needs and improve clinical outcomes and the experience of care.”

**James M. Anderson  
Former President and CEO  
Cincinnati Children’s Hospital Medical Center**



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