Patient-to-Partner: Engaging Patients and Families as Organizational Advisors

California Hospital Volunteer Leadership Conference

February 16-19, 2015
Indian Wells, CA

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Hospital Quality Institute

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Desert Regional Medical Center

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Session Objectives

1. Offer practical advice on how to effectively engage patients/families as advisors in hospital operations and improvement

1. Discuss lessons learned from a 11-hospital collaborative Patients On Board

2. Highlight the process in one hospital, from the perspectives of hospital leader and patient advisor

3. Discuss synergy with volunteer services
Advancing quality and patient safety in California

- Align, Harmonize, Simplify, Streamline
- Innovate
- Take excellence to scale for statewide impact
2015 Accelerate Reliability

HQI Annual Conference
November 12 & 13, 2015
Sheraton Grand Sacramento Hotel
Sacramento Convention Center

Join us for the Hospital Quality Institute 2015 Annual Conference. Learn strategies and tools for achieving reliable care and delivering value to each patient, each time, and in each community. For more information, visit www.hqinstitute.org/hqi2015.
California’s HCAHPS Performance

State Compare Performance - CMS HCAHPS Composite Score (Quarter 4 2011 - Quarter 3 2012)

- Bottom Quart: 66.00% to 69.98%
- 3rd Quart: 69.99% to 71.81%
- 2nd Quart: 71.82% to 73.87%
- Top Quart: 73.88% to 77.27%

National Avg. = 71.69%
Top 10% = 80.70%

Hospital Quality Institute
It's time to administer the patient satisfaction survey.
# P4PEx: Partnership for Patient Experience

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<tr>
<th>DATA USE STRATEGIES</th>
<th>AIM</th>
<th>VALUE TO MEMBERS</th>
<th>METHOD</th>
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<tr>
<td>In-depth understanding of the state of patient experience in CA hospitals. Help increase the understanding of HCAHPS and other experience data among hospital leaders, providers and front-line staff.</td>
<td>Benchmarking and contextualizing. Highlight gaps &amp; focus areas. Increase experience data literacy among leaders, providers and front-line staff.</td>
<td>- Study current state (HCAHPS, org. surveys, interviews, site visits, ethnography). - Study success factors of high performing hospitals, including those in diverse environments. - Develop comparative reports with identified gaps &amp; focus areas; assessment of survey methods for response variation. - Disseminate findings and provide opportunities for peer interaction, sharing and networking around data. - 1:1 consulting.</td>
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<th>COMMUNICATIONS</th>
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<tr>
<th>IMPROVEMENT STRATEGIES (PROGRAMS, TOOLS &amp; RESOURCES)</th>
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<td>Assist member hospitals articulate evidence-based, culturally competent organizational approaches to patient engagement and experience improvement. Develop and deliver strategic programs, tools and resources to help member hospitals advance improvement, paying particular attention to issues of cultural diversity. Advance programs state-wide with sensitivity to local context &amp; population. Prioritize improvement efforts on the “low outlier” hospitals.</td>
<td>Leadership skills around patient partnership / engagement and experience improvement. Staff/provider skills for partnering with patients and creating excellent experience in diverse contexts. Exposure to best practices, tools &amp; resources. Peer networking &amp; exchange; mutual learning within California-based communities of practice.</td>
<td>Conferences and other learning opportunities for leaders and clinical teams to advance and spread strategies for improvement. Peer networking &amp; sharing opportunities in-person and online. Tools/resources. Current Programs: ➢ Patients On Board: a 4-month collaborative of 11 CA hospitals to integrate patients and families as advisors in organizational improvement and operations. Includes establishing meaningful participation within hospital structures and committees. Envisioned Programs: ➢ Language of Caring: build the skills for reliable conveyance of empathy across cultures. Implemented via Train-the-Trainer model. ➢ P4PEx “Leadership Academy”: build the skills organizational leaders need in order to develop and facilitate improvement in patient experience.</td>
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**Goal:** Measurably improve the experience of diverse patients and families as an integral component of safe and effective care in California hospitals.

**Patient Experience:** The sum of all interactions, shaped by an organization’s culture, that influence patient perceptions across the continuum of care.

**Contact:** Boris Kalanj, Director, Cultural Care and Patient Experience, bkalanj@hqinstitute.org, (916) 552-7694
In partnership with Patient and Family Centered Care Partners, Hospital Quality Institute is leading Patients On Board - a four-month collaborative of eleven California hospitals. Through a combination of in-person & virtual collaborative learning, and individualized support, the hospitals are working to develop authentic ways to engage patients and their families as partners in organizational improvement, governance and design.

**Building a Team**
Each organization has an internal implementation team
- C-Suite Executive Sponsor (suggested time allocation 4 hrs./week.)
- Patient Engagement Coordinator (suggested time allocation 10-20 hrs./week, depending on scope. Can be new or reassigned existing position.)
- At least 2 other interdisciplinary team members

**How It Works**
Each team will meet 3 or more objectives:
- Identify an Executive Leadership member with accountability for patient/family engagement activities.
- Recruit, engage and integrate PFAs.
- Complete at least 1 meeting of a newly established PFAC, comprised of 1/3 staff and 2/3 patients and families with direct experience in the hospital and a plan to continue regular meetings.
- Appoint at least one PFA as a member of at least one organizational improvement team or committee.
- Involve at least one PFA on the organization’s Patients on Board coordinating team.

**Participating Hospital Systems:**
- Chino Valley Medical Center
- Desert Regional Medical Center
- Desert Valley Hospital
- Hemet Valley Medical Center
- John Muir Health
- Kaiser Permanente South Sacramento
- Kindred Hospital La Mirada
- Menifee Valley Medical Center
- Methodist Hospital of Southern California
- San Gabriel Valley Medical Center
- Tahoe Forest Hospital

**Curriculum**
The Collaborative follows PFCC Partners’ 5 Gateways for Partnering with Patients & Families as Improvement Partners:

<table>
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<th>Gateway</th>
<th>Description</th>
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<tr>
<td>Gateway 1</td>
<td>Setting the Table in the Organization</td>
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<tr>
<td>Gateway 2</td>
<td>Recruitment of Patient &amp; Family Advisors (PFAs)</td>
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<tr>
<td>Gateway 3</td>
<td>Training &amp; Orientation of PFAs</td>
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<td>Gateway 4</td>
<td>First Meetings</td>
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<td>Gateway 5</td>
<td>Sustainability Practices</td>
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For more information contact Boris Kalanj
(916) 552-7694
bkalanj@hqinstitute.org
Video: Contra Costa Regional Medical Center

https://www.youtube.com/watch?v=FnoRHSnZCE8
Patients on Board

Encouraging DRMC patient and family engagement through the formation of a Patient and Family Advisory Council
Desert Regional Medical Center

- Private, for-profit medical center
- Part of the Tenet Healthcare System
- 385 licensed beds
- 1,784 staff members
- 270+ outsourced department staff
- 371 physicians
- 300+ Volunteers and “Volunteens”
- Accredited by The Joint Commission
The Problem

- Stagnant patient experience scores
- Culture focused on doing “to” and “for” patient
- Convoluted processes created without patient input
- Negative signage and first impressions
- Little recognition of “Voice of Patient”
- Reactive vs. proactive
Patient- and Family-Centered Care

- 24-hour visitation
- Trained all nurses on bedside handoff report
- Reinforced hourly rounding
- Removed negative signage
- Patient- and family-advisory council

Patient- and Family-Centered Care Committee:
CNO, Director of Quality, Nursing Director, 4 Clinical Nurse Managers, Coordinator of Patient Support
Patients on Board

Our Vision:

As the hospital where patients and families choose to get their care, we will partner with a wide range of patient and family advisors representing the diverse nature of our community. These advisors will help us realize an environment where our patients are calm, confident and comfortable by providing their perspective on the pillars of Quality, Service, People, Cost and Growth.
Collaborative Process

- Charter
- Communication strategy
  - Director’s Council
  - Patient Services Council
  - Staff meeting on nursing units
- Recruitment/Selection
- On-boarding
- Volunteer Orientation
Moving Forward

• Development of the council
  Continued recruitment for diversity
  Advisors to lead council
  Agenda creation
  Peer mentoring/training

• Utilization of advisors
  Quality and safety committees
  New-hire orientation
  Program development
  Process Improvement
  Educational materials
  Human Resources
Patient Experience Volunteers

- Engaged Patient Relations Volunteers who were already doing informal care rounds on acute hospital units
- Volunteers able to capture more objective information – patients have less fear that they will experience retaliation
- Purchased 10 iPads for rounding purposes
- Utilized Marbella rounding software from Get Well Network
Patient Experience Volunteers

- Ten volunteers total. Two volunteers each day round on a portion of the hospital.
- All volunteers are retired age and above.
- Very few had any experience with mobile devices.
Patient Experience Assessment

Seven standard questions:

1. Did all employees clearly explain what they were going to do for you or to you?
2. Have all employees been extremely kind and courteous to you and your family?
3. During all shift changes, did at least two nurses discuss your care with you?
4. Have you been asked your goals today?
5. Has the staff been consistently asking you whether you have pain?
6. Did the staff visit you frequently enough to anticipate your needs?
7. If you or a family member were sick, would you choose to come back to Desert Regional Medical Center?

- Alerts were triggered for negative responses.
- Nursing directors responsible for responding same day for service recovery.
**Patient Experience Assessment Form**

**Unit:** 1C

1. Room Number: 

DIRECTIONS: If the patient does not clearly state "Yes," check "No."

**INTRODUCTION SCRIPT** "Hi my name is _________ (state your name) and I am one of the (state your title) at Desert Regional Medical Center. Our goal at Desert is to provide the VERY BEST healing environment possible and assure you are receiving excellent care. Would you mind if I asked you a couple questions to see how we are doing?"

2. 1. Did all employees clearly explain what they were going to do for you or to you?
   - Yes
   - No

3. 2. Have all employees been extremely kind and courteous to you and your family?
   - Yes
   - No

4. 3. During all shift changes, did at least two nurses discuss your care with you?
   - Yes
   - No

5. 4. The shift change handoff process gives me confidence in the healthcare I receive at Desert Regional.

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   1 = No
   5 = Very Confident

6. 5. The shift change handoff process allows me to contribute to my healthcare goals.

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   1 = I do not agree
   5 = I agree
Lessons Learned

• Don’t wait until you have everything perfect.

• Culture change takes time.

• Engage advisors in the planning – Capitalize on strengths of group.

• No need to invent the wheel.
Q & A

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