

Include Always: An Innovative Model for Authentic Patient and Family Engagement

Lisa Juliar: PFE consultant
Minnesota Hospital Association

Patty Henderson: VP Nursing and Clinical Services

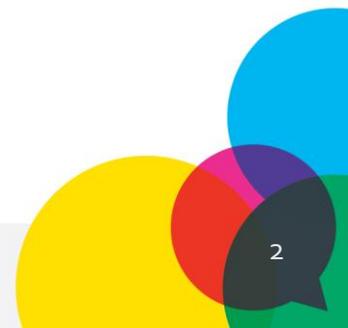
Jon Braband: CEO and President
Glencoe Regional Health Services



Patient ...what?



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Why should patients and families always be fully included as part of the team?

- Better Outcomes
- Improvements in patient safety and quality
- Better patient experiences and satisfaction
- Increased healthcare professional satisfaction and retention.
- Lower healthcare costs

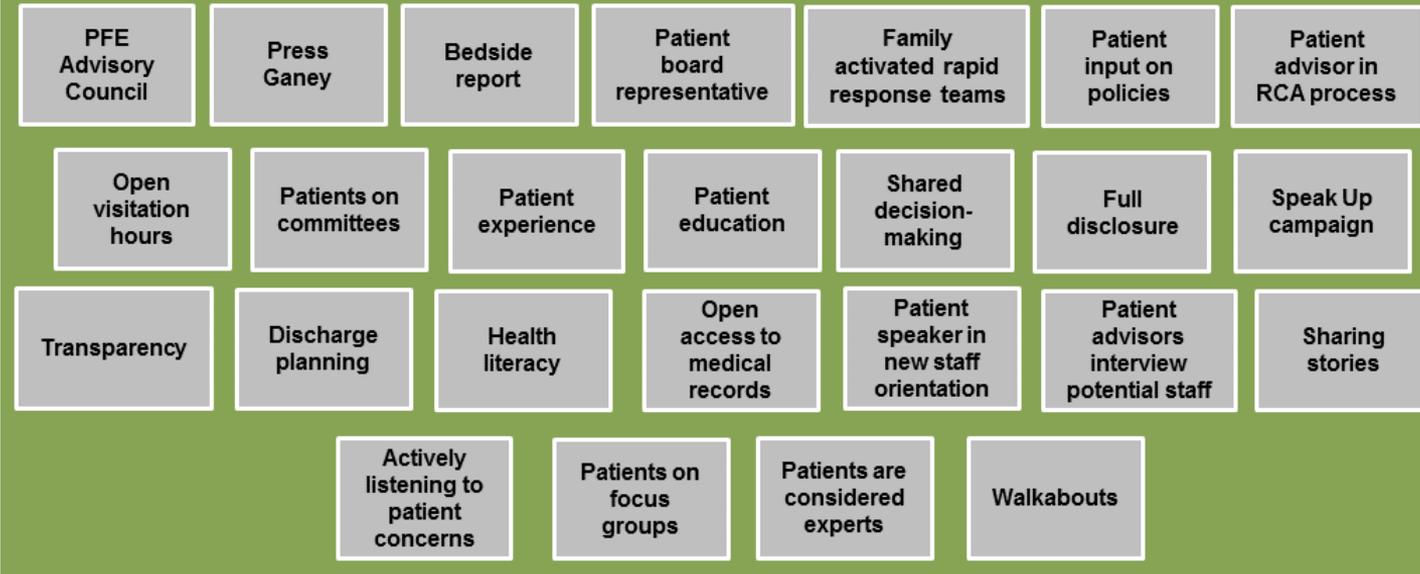
•*from HRET/AHA & the Betty & Gordon Moore foundation



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What might patient and family engagement look like?



include

always™



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New perspective:

Rather than doing things
to and **for** your patients,
think about partnering
WITH your patients.



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Introducing...



A model for authentic Patient and Family Engagement

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Mission

Include Always. That's what we aim to do. Include patients and families at every level throughout the health care system. Through conversations, sharing ideas, and inviting the patient in, the outcome will be better health care for everyone. We're not launching a campaign that begins and ends. Together, we're creating a cultural shift, a unified mindset where the patient is truly one of us. It's a whole new health care approach. It takes a whole lot of change. It takes courage. It takes all of us working together to make our system the best it can be. We will listen more, engage often, and Include Always.



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Patient & Family Engagement Campaign Goal

Develop a campaign intended to help build relationships and translate resources into something meaningful that hospitals and patients and families can use, engage with and act upon. Every Minnesota hospital will have a dedicated PFE contact and PFAC



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MHA Include Always Pilot Project

- Goal: Provide tools and simple steps to help hospitals develop a PFE program and PFAC
- Four hospitals
- Varying stages of patient and family engagement
- Site visits with PFE consultant
- Virtual learning sessions with networking
- Fast turnaround!
- Outcome: All have dedicated PFE person and functioning PFAC

Lessons learned on the journey

- Not a linear journey
- This is culture change, it takes time to develop relationships
- Start small and be patient
- Leadership buy-in and support is essential
- Patients want to participate in meaningful work
- Hospitals need concrete, tangible steps and tools to effectively engage patients and families
- Program development with patient consultant has been key
- The process does not need to be prescriptive...be creative and have fun with it!

Highlight: Glencoe Regional Health Services



- 25-bed critical access hospital



- 110-bed long term care skilled nursing facility (nursing home)



- Orchard Estates:
40-unit independent senior housing

Glencoe Regional Health Services



Glencoe Clinic



Stewart Clinic



Lester Prairie Clinic

GRHS PFAC Champions

- Cindy Noga- Risk Management Coordinator
 - Melanie Krulikovsky- LTC Director of Nursing
 - Patty Henderson-VP of Nursing and Clinical Services
 - Jon Braband-President and CEO
 - Seven Patient Advisors
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The Beginning of Our Journey

- Lisa Juliar's August Phone Call
- Facility Assessment
- Identification of Attainable Goals
 - Include patient engagement in our Mission Statement
 - Identify plan for member recruitment
 - Arrange speaking opportunities for Lisa to tell her Patient Story to the Board, Senior Team, Medical Staff and the potential PFAC members

Recruitment Efforts

- Care Coordinator's Role
- LTC DON Role
- Application for committee membership and membership responsibilities
- Tea held on November 24th with Lisa Juliar invited to share her patient story

Information Session with Lisa Juliar

We invite you to learn more!

Monday, November 24, 2014

4:00 p.m.

GRHS Conference Room A

(Use the dome entrance at 1805 Hennepin Ave. N., Glencoe)

Lisa Juliar from the Minnesota Hospital Association will be on site to share her story and her work with patient and family advisory councils.

Refreshments will be served. RSVP by calling Cindy at 864-7823.



Jon's Support for Our Journey

- “We think we know how to deliver excellent care, but we want to know what excellent care means to YOU”.



Success Story: Before

- Before: hard for patients to access wardrobe because of computer and curtain. Patients felt space was for nursing staff.



Success Story: After

- After: new wardrobes were installed near the bathroom. They are easily accessible for patients.



GRHS PFAC Committee

- Story of Engagement: Dennis's Story



Examples of PFAC Successes:

- PFAC Member Involvement
 - Amenities Committee
 - LTC Bed Trial
 - LTC Resident Story and Outcome
 - Advisors invited to the June Management Council meeting
 - Patient Advisor recruited to the MHA PFAC
 - Patient Advisor added to the HCAHPS Discharge Process Domain committee

PFAC Members



Awareness, Acknowledgment and Assessment

- Leadership needs to embrace the concept and support the work
- Bring in a patient to tell their story
- Acknowledge that patients are needed as part of the team, not just active participants in their care
- Use an informal assessment to see where your hospital is and determine the best place to start
- Bring awareness to EVERYONE: patients, families, leadership, staff, community...



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LOGO
APPLICATION



BUTTONS

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“I wish the same nurse gave me my shots every time.”

- Kathy, is learning how to live with diabetes.
#includealways

include
always™

In partnership with
Your Hospital Logo Here

Patients: Hear them out. Let them in.
Let's remember to include the voice of patients and families at every point in their health care journey.
When we truly communicate we all get better.

Recruit, recruit, recruit:

- Dedicated person or **team**
 - Passionate
 - Be open & creative to who it could be
 - Diverse
 - Training is key
- Patients (ideally 4-10)
 - Get recommendations from staff
 - Patients with good & bad experiences
 - Family members
 - Diverse
 - Training is key

Patient & Family Advisory Councils:

- Best foundation for creating & sustaining PFE
- Begin with orientation & training
- Officially make them part of the team
- Meet monthly
- Meaningful work
- Benefits
- Quick wins

MHA Next Steps

- Statewide kick-off held April 22, 2015
- Spread PFE statewide
 - Virtual learning sessions
 - Networking phone calls
- 1:1 PFE consults and site visits
- Include Always website www.includealways.org
 - Tools and resources to support PFE work
 - Sample agendas, sample policies, assessment tools, promotional materials (buttons, poster templates, etc.)
- Development of PFE certification program
 - Hospital Staff
 - Patient Advisors

Minnesota will:



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Resources for patient and family engagement:

- <http://www.hpoe.org/resources/hpoehretaha-guides/18-> Partnering to Improve Quality and Safety :A Framework for Working with Patient and Family Advisors from HRET, HPOE and AHA in partnership with Tanya Lord, Patient and Family Engagement Consultant
- http://c.ymcdn.com/sites/www.npsf.org/resource/resmgr/LLI/Safety_Is_Personal.pdf - Report of the Roundtable on Consumer Engagement in Patient Safety from The National Patient Safety Foundation's Lucian Leape Institute
- <http://patientfamilyengagement.org/vision> - Road map recently developed by the Gordon and Betty Moore Foundation and the American Institutes for Research
- <http://www.ipfcc.org/advance/topics/annual-reports.html> PFAC annual reports and resources for leaders
- <http://www.ahrq.gov/professionals/systems/hospital/engagingfamilies/guide.html> Guide for engaging patients and families from AHRQ

Questions?

Contact:

Lisa Juliar, PFE consultant or Nora Vernon, Safety/Quality

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Thank You!



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