

PFCC Partnership Tips and Tools for the Practice Coach in Patient-Centered **Medical Home Transformations**

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In our time together . . .

- ▼Role of QI Specialists and other practice facilitators in promoting patient- and family-centered care (PFCC) and the power of patient/family engagement in quality initiatives.
- ▼Assessing practice readiness to engage patients and families by laying the foundation for positive expectations.
- ▼How to engage leadership sponsorship and buy-in.
- ▼ Exploration of tools and strategies for practice coaches to guide and convene advisors and/ or advisory groups to be successful.



In our time together . . .

- ▼How to use patient experience of care data with advisors and the practices to identify meaningful project or improvement efforts to undertake.
- ▼ Discussion of a roadmap that identifies where to start, how to improve and how to sustain this effort in the clinic environment.





Examples of Advisory Roles – Clinic Settings

- Serving on a Patient and Family Advisory Council
- ▼ Joining a team focused on a particular improvement area (e.g. care for the patient with diabetes or asthma)
- Creating and/or reviewing educational materials, patient portals and outreach materials.
- ▼ Facility design or remodeling or wayfinding improvements.
- ▼Improving self-management support for patients.
- ▼Peer mentors, educators or coaches.







Getting Started – Developing Specific Knowledge about Patient- and Family-Centered Care

- Recognize your current foundation and profound knowledge about practice improvement and working with groups, leaders and clinicians.
- Become familiar with patient- and family-centered care concepts and principles.
 - Website links www.ipfcc.org http://forces4quality.org/compendium-tools-engagingpatients-your-practice-intro www.ihi.org
 - Publications
 - http://www.ipfcc.org/resources/guidance/index.html
- ▼ Identify the nuances of working with patients and families
 Tips for Group Leaders and Facilitators on Involving
 - Patients and Families on Committees and Task
 Forces





What is Patient- and Family-Centered Care?

What is Patient and Family-Centered Care?

An approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, patients, and families.

It redefines the relationships in health care by placing an emphasis on **collaborating** with people of all ages, at all levels of care, and in all health care settings.



Patient- and Family-Centered Core Concepts defined by IPFCC

- ▼ People are treated with respect and dignity.
- Health care providers communicate and share complete and unbiased information with patients and families in ways that are affirming and useful.
- Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.
- ▼ Collaboration among patients, families, and providers occurs in policy and program development and professional education, as well as in the delivery of







Patient- and family-centered care is working "with" patients and families, rather than just doing "to" or "for" them.



Why Patient- AND Family-Centered Care and not just Patient-Centered Care?

Individuals, who are most dependent on health care, are most dependent on families...

The very young;

The very old; and

Those with chronic conditions.



Families can be allies for quality and safety; they often are the constant support across settings and assist with transitions of care. They can participate in the development of a care plan and support adherence to the plan.

Why Patient- AND Family-Centered Care and not just Patient-Centered Care?

Social isolation is a risk factor.

Research is clear that isolating patients at their most vulnerable times from the people who know them best places them at risk for medical error, emotional harm, inconsistencies in care, and costly unnecessary care (Cacioppo & Hawkley, 2003;Clark, 2003).

The majority of patients have some connection to family or natural support.

Cacioppo, J. T., & Hawkley, L. C. (2003). Social isolation and health, with an emphasis on underlying mechanisms. Perspectives in Biology and Medicine, 46(3), S39-S52.



Patient and Family Engagement

A Definition . . .

"...patients, families, their representatives working in active partnership at various levels across the health care system—direct care, organizational design and governance, and policy making—to improve health and health care."

Carman, K. L., Dardess, P., Maurer, M., Sofaer, S., Adams, K. Bechtel, C, Sweeney, J. (2013). Patient and family engagement: A framework for understanding the elements and developing interventions and policies. *Health Affairs*, *32*(2), 223-231.



Patient and Family Engagement

Patient and family engagement is a strategy for building a patient- and family-centered system of care. It is a priority consideration and essential to health reform at four levels:

- At the clinical encounter...patient and family engagement in direct care, care planning, and decision-making.
- At the practice or organizational level, patient and family engagement in quality improvement and health care redesign.
- At the community level, bringing together community resources with health care organizations, patients, and families.
- At policy levels locally, regionally, and nationally.



"At every opportunity within the organization, it's your role to ask, 'How can we get patients and family members involved?' Over time, others begin to ask the question when you aren't there."

Deborah Hoffman Toffler
Director, Volunteer Services and the
Shapiro Center for Patients and Families
Dana-Farber Cancer Institute







Patients and Families . . .

Essential Partners in Quality Improvement and Medical Home Implementation



Getting Started – An Assessment Bundle

- Assess attitudes for patient and family involvement in the clinic
 - Checklist for Attitudes Great tool for direct conversations with leaders/sponsors
 - Partnering With Patients And Families To Accelerate Improvement Readiness Assessment – Useful with existing teams/ committees
- ▼Address concerns & dispel myths
- ▼ Identify champions within organization and across disciplines and enlist their assistance



Gaining Leadership Buy-in



- ▼Assess interest, concerns and issues.
- ▼Provide data and tell compelling stories.
- ▼Align involvement of patients and families with current work; frame approach as the way work is done.
- ▼Respect bottom-line.
- ▼Measure results and engage leaders in patient and family advisor activities.
- ▼Celebrate successes.



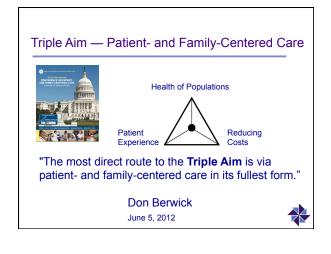
A Key Lever for Leaders . . . Putting Patients and Families on the Improvement Team

In a growing number of instances where truly stunning levels of improvement have been achieved

Leaders of these organizations often cite—putting patients and families in a position of real power and influence, using their wisdom and experience to redesign and improve care systems—as being the single most powerful transformational change in their history.

Reinertsen, J. L., Bisagnano, M., & Pugh, M. D. Seven Leadership Leverage Points for Organization-Level Improvement in Health Care, 2nd Edition, IHI Innovation Series, 2008. Available at www.ihi.org.





Groom and Utilize Leadership Enthusiasm

Providence Medical Group

Joe Siemienczuk Chief Executive



Useful Framework for Participation		
Depth of Engagement	Patients and Family Role	Things to Consider
Ad Hoc Input	Survey or Focus Group Participants	Ensure diversity and representation, validity
Structured Consultation	Council or Advisors- provides QI input	Early consult supports partnership model
Influence	Occasional Review/ Consultants to project	Allows flexible ways to participate; requires background/orient.
Negotiation	Member of QI Group	Training in QI approach
Delegation	Co-Chair of QI Group	High level of expertise or skill
Advisor Control	Implementer or peer support role	Strong training component, mentoring and compensation

Preparing Advisors for Quality and Safety Committees

- Orientation on the quality improvement (QI) methodology used in your organization and any definitions and tools.
- Background on the particular QI project, including review of the charter, purpose or aim statement, members of the team and their title, role and expertise, and summarizing any data that was used to select the project.
- In preparation for joining a committee at this stage, update the advisor about current topics that have been discussed and will be decided at the advisor's first meeting.

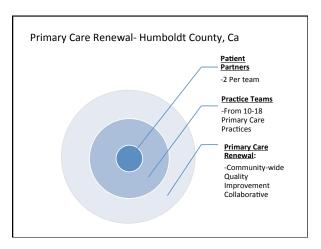
Preparing Advisors for Quality and Safety Committees (cont.)

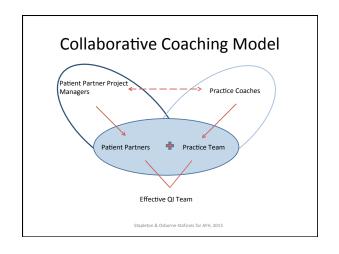
- Talk with the advisor about the use of data in this group.
- Set-up a meeting with the Chair of the committee to meet the advisor ahead of time and identify a staff or current advisor on the committee who can mentor the advisor as they begin their participation.











Lessons Learned in Humboldt



- One size doesn't fit all: coaches may need to rely on a variety of techniques to engage patients at various practice settings:
- Provide clarityReframe focus
- Seek opportunities for engagement
 Mitigate challenges
- Share best practices
- Collaboration and communication between practice coaches and patient program leads is essential!

Osborne-Stafsnes for AFH, 2013

How Does A Clinic Invite Patient and Family Participation?





Patient- and Family-Centered Core Concept **Collaboration**

Health care professionals invite patients and families to join quality improvement teams and safety efforts.



Approval logo that appears on all materials reviewed by the



Poster of primary care doctor used in recruiting patients & families to participate in clinic redesign.

Staff and clinicians build on the expertise and experience of patients and families to improve or redesign services, information or education materials.

What is a Patient and Family Advisory Council?

- ▼ Formal mechanism within an organization to create authentic collaboration and partnerships.
- Establishes ongoing relationships over time with regular meeting times and terms of service.
- ▼ Seeks diverse perspectives representing the populations served
- ▼ Organizational leadership sponsors the effort.
- ▼ Council provides input vehicle for a variety of issues.
- ▼ Role of Advisors:
 - Partners in key areas within the organization (quality, safety, program development, policy).
 - Initiates and identifies opportunities for improvement in patient and family experience of care.

Collaboration Beyond Advisory Councils



- Invite patients with a chronic condition to participate in a clinic team working on improving educational materials or programs to that population of patients.
- ▼ Identify patients new to the clinic to participate in a "photo walk-about" to take pictures of ways the clinic is welcoming and places where the messages could be more positive or where way-finding is confusing.
- Ask patients and family what is one change we could make that would improve your experience? Collect the responses and form a clinic team with advisors to follow-up on suggestions.



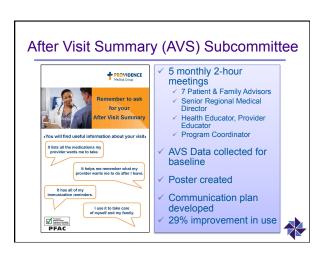
Creating the Expectation for Partnership in Clinical Care WE care door YOU and Your PRIORITIES. WE are a TEAM B Dr. Murphy Gerardo, M.A.









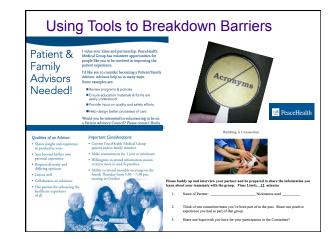




- > Patient & Family Advisors were part of PCMH steering committee meetings
 - Reported results monthly to PFAC
- Sub-committee was formed based on patients' interest
 - TV's in clinics
 - Patient & Family Advisors interviewed other patients in lobby
 Patient Education materials created

 - Better understanding of how to engage patients in their medical homes





Medication Oversight Safety Team

- √ Patient Family Advisors joined QI Safety initiative to support medication reconciliation efforts underway
- ✓ Initiated patient education effort to improve medication partnership
- ✓ Advisors continue to do community outreach at senior centers and encourage sustained focus by the organization on this important topic M.A.P. YOUR

MEDICATIONS

PeaceHealth





A Patient-Centered Medical Home Team Fillingame

- Collaborative pilot between PeaceHealth Medical Group and Regence Health Plan 2008-2011.
- Designed with patients and families; ongoing patient and family advisor consultation during implementation.
- Winner of the STFM 2010 Practice Management Award for Practice Improvement.
- Highlighted research brief by the UCSF Center for the Health Professions, Revised December 2011.
- Now a working model that is informing PHMG in their implementation of medical homes in three states (OR.WA,AK).



Family Practice Management







Engaging Patients and their Families in Care

- ▼ Patient Orientations—Introduction to Team Concept.
- ▼ Quarterly Newsletters on Health and Wellness.
- ▼ Providing incentives—pedometers, recognition.
- ▼ Asking—What is Important to You? What would you like to work on? How do you best learn?
- ▼ Encouraging family involvement.
- ▼ Strength-based approach—Appreciative Inquiry.
- Motivational interviewing and patient-centered goalsetting
- ▼ Utilizing peer support through Shared Medical Appt.



Inviting Participation in Practice Changes

- ▼ Patient Advisors recruited from Team Fillingame panel
- ▼Extensive use of advisors in development of:
 - New Patient Orientation.
 - Use of Patient Activation Measure and Coaching for Activation.
 - Creating welcoming space in the lobby with computer, magazines, etc.
 - Use of Shared Decision-making Programs with patients faced with critical decision-making (back surgery, menopause, advanced directives, etc.).
 - Just-in-time surveys on monthly newsletter, patient education materials.



PeaceHealth Medical Group Outcomes and Improvements

Summary:

- Steady and sustained reduction in use of urgent care or emergency room for care that is best provided in medical home.
- Improved access to care; both appointment access as well as access to information and care by phone.
- Improved control of blood pressure use of group visits and outreach.
- Improvement in knowledge, skills and confidence in self-managing (Patient Activation).
- Greatest referral to tobacco quit line and follow through in state.
- Increased referral and use of community resources including the Living Well with Chronic Illness classes.

The Role of Measurement and Documentation



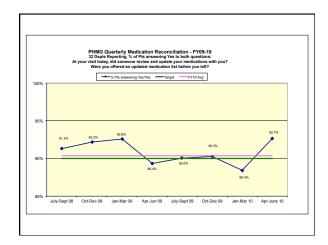
Three Key Areas of Measurement

Measure the effect of patient- and family-centered care on key outcomes.

[Patient Experience of Care]

- ▼Document the efforts and impact of patient and family advisors.
- ▼Share outcomes with leaders, clinicians, staff, patients, residents, families, and community members.









Beginning Measures: Use of Advisors

Summary Stats:

- How many patients and family advisors have been recruited and selected?
- · Are they representative of population served?
- What are the assignments of the Advisors?
- What number of hours do they contribute? Monthly, Yearly?

Process measures:

- What is our largest recruitment source?
- · What is the retention rate of advisors?
- What is the stated reason for leaving?

Qualitative Questions:

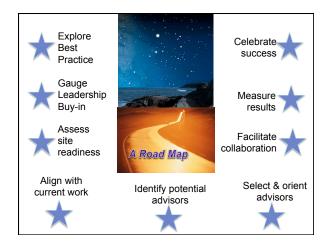
 Do our participants identify the experience as collaborative?



In summary, to have successful partnerships in medical homes . . .

- ▼ Clinic leadership demonstrates its commitment.
- A skilled facilitator for collaborative endeavors is appointed with dedicated time for this work.
- ▼Patient and family advisors, who are committed to partnering with the clinic and others in the community, are selected and supported.
- ▼There are meaningful opportunities to work together, listen, and learn.







Inviting new partners into the work requires a thoughtful approach and ultimately is very rewarding.



A Moment to Reflect



- What existing quality improvement activities are underway that could benefit from patient and family involvement?
- ▼ What ideas did you generate when clinic examples were shared?
- What support might you need to integrate advisors into the medical home transformation?



For more information or questions: mminniti@ipfcc.org 541-520-3655



Resources

- √ A Checklist for Attitudes
- ✓ How to Conduct a "Walk About"
- ✓ Patient-Centered Medical Home –

Engaging Patients and Families – Benefits for Physician Practices

- Preparing Advisors for Quality and Safety Committees
 Partnering with Patients and Families to Accelerate Improvement Readiness Assessment
 Tips for Group Leaders Involving Patients and Families
 Framework for Patient and Family Involvement in Quality Improvement

