
Partnering with Patients and Families in QI

Are We Ready?

Marie Abraham



Readiness Assessment

- Data transparency
- Flexibility – aims and changes
- Underlying fears and concerns
- Value and purpose
- Leadership support
- Experience with patient and family involvement
- Collaboration and teamwork



Underlying Concerns

- Privacy and HIPAA
- Costly
- We don't have time
- They don't understand our system
- We'll have to do what they say
- Compromise safety and quality
- They will hear negative things about us



Perceived value and purpose of patient and family involvement



Why Involve Patients and Families in QI?

- ◆ Bring important perspectives.
- ◆ Teach how systems work for patients and families.
- ◆ Keep staff grounded in reality.
- ◆ Provide timely feedback and ideas.
- ◆ Inspire and energize staff.
- ◆ Lessen the burden on staff to fix the problems... staff do not have to have all the answers.
- ◆ Bring connections with the community.
- ◆ Offer an opportunity to “give back.”



Experience with patient and family involvement



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PeaceHealth Medical Group

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.
- Use of Shared Decision-making Programs with patients faced with critical decision-making (e.g., back surgery, menopause, advanced directives).
- Just-in-time surveys on monthly newsletter, patient education materials.



Patient and Family Advisors - PeaceHealth Medical Group, Eugene, OR



The **DVD Divas**...the inspiration for a patient safety video:
Your Safety — Your Medications — Your Medical Visit





INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

The Institute for Patient- and Family-Centered Care provides leadership to advance the understanding and practice of patient- and family-centered care in hospitals and other health care settings.

What is patient- and family-centered care?

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Upcoming Conference

The 6th International Conference on Patient- and Family-Centered Care: Partnerships for Quality & Safety

**August 6 – August 8, 2014
Vancouver, British Columbia, Canada**

With leadership support from:



How you want to be treated.

And support from our Program Partner:



[Learn More about International Conferences](#)

OpenNotes ~ Inviting Patients to Read Their Doctors' Notes

In 2010, the [OpenNotes](#)* project started "as a yearlong experiment to investigate patients and doctors' attitudes about sharing a visit note." The investigators invited patients of more than 100 primary care doctors from three diverse medical centers—[Beth Israel Deaconess Medical Center \(BIDMC\)](#), [Geisinger Health System](#), and [Harborview Medical Center](#)—to read their doctor's online notes. The goal was "to help patients become more actively involved in their care and to draw patients and their health care team closer together."



The findings of the initial study are reported in [Inviting Patients to Read Their Doctors' Notes: A Quasi-experimental Study and a Look Ahead](#), published in the *Annals of Internal Medicine*, October 2, 2012. In summary, patients responded with enthusiasm—they used the notes, reported important benefits, and were rarely confused, or upset by what they read. They felt more in control of their care, reported better understanding of their health and conditions, and were more likely to take their medications. The doctors reported minimal impact on their workflow, although many reported that the way in which they took notes changed to make them more understandable for the patients. Clinicians can provide patients with access to visit notes electronically, or they can rely on low-tech means by providing print copies of the notes at the end of a visit or later by mail.

Tom Delbanco, MD and Jan Walker, RN, MBA, co-principal investigators from BIDMC, believe that "fully transparent, open medical records will not only help patients and their families, but also their doctors, nurses, physician assistants, social workers, physical or occupational therapists, and anyone who provides or receives care...OpenNotes does not depend on a computer." [Read More...](#)

*OpenNotes is supported primarily by the [Robert Wood Johnson Foundation's](#) Pioneer Portfolio, with additional funding from the Drane Family Fund and the Florence and Richard Koplou Charitable Foundation.

Upcoming Seminar

Moving Forward with Patient- and Family-Centered Care
Partnerships for Quality & Safety
An Intensive Training Seminar



October 28-31, 2013
Radisson Blu Mall of America
Bloomington, MN

With leadership support from:





Primary Care/Medical Home

Patients and Families as Advisors in Primary Care

Patients and families are being asked to take an active role in their own health care and engage as partners with health care providers to improve their own health or that of their family members - whether that means enhancing their ability to prevent illness, taking steps to insure health care safety, or improving their skills to self-manage a chronic condition.

Building a patient- and family-centered primary care system that views patients and their families as essential members of the health care team demands a change in the culture. Patients and families have expertise, experience, and perspectives that are critical to bringing about this transformation. They become valuable teachers and partners in improving the experience of care of others.

Innovative health care systems are involving patients and families as leaders and advisors for peer education and support. Patients and families are participating with providers in developing medical homes and organizational structures and systems that promote collaborative self-management support. They also are involving patients and families as advisors and partners in other quality improvement and redesign initiatives.



Jean Klein had a successful career in real estate for four decades in Colorado. For 25 years, she was "Mrs. Santa Claus" for the local business association's party for children. She never expected to become a patient advisor for a health care system. But today, Jean Klein, age 81, is an active advisor to the Kaiser Permanente Health Care System!

**Jean Klein, Patient Advisor, Kaiser Permanente Health Care System;
Member, 21st Century Care Innovation Project Team for Skyline Internal
Medicine Clinic; Colorado**

[Read More](#)



Three patient and family advisors work together on a safety initiative.

[Read more](#) about other patient and family advisors.

For ideas on how to involve patients and families as advisors, download [Patients and Families as Advisors in Primary Care: Broadening Our Vision](#)



Additional Resources

Website: www.ipfcc.org

PFAC Network Listserv:

<http://pfacnetwork.ipfcc.org/main/summary>

Email: mabraham@ipfcc.org
institute@ipfcc.org

THANK YOU



Listening to the Voice of the Patient: Using CAHPS® for Improving Care in the Patient-Centered Medical Home

**Dale Shaller, MPA
Shaller Consulting Group
PCPCC Workshop
October 15, 2013**

What is CAHPS?

- CAHPS = Consumer Assessment of Healthcare Providers and Systems
- Most widely used survey tools for assessing the patient's experience with care
- Endorsed by National Quality Forum
- Initiated and funded by AHRQ since 1995
- Consortium members include: AHRQ, CMS, RAND, Yale/Harvard, and Westat

Core CAHPS design principles

- Focus on topics for which **consumers or patients are the best or only source** of information
- Include **patient reports and ratings** of experiences – not “satisfaction”
- Base question items and survey protocols on **rigorous scientific development and testing**, as well as extensive stakeholder input
- All surveys and services are in the **public domain**

CAHPS is strongly correlated with other key outcomes

- Health Outcomes:
 - Patient adherence
 - Process of care measures
 - Clinical outcomes
- Business Outcomes:
 - Patient loyalty
 - Malpractice risk
 - Employee satisfaction
 - Financial performance

CAHPS PCMH Survey Domains

Adult Survey

- Core Composites
 - Access
 - Communication
 - Office Staff
 - Provider Rating
- PCMH Composites
 - Comprehensiveness
 - Self-Management
 - Coordination
 - Shared Decision Making

Child Survey

- Core Composites
 - Access
 - Communication
 - Office Staff
 - Provider Rating
 - Child Development
 - Prevention Advice
 - PCMH Composite
 - Health Goals
-

Stillwater Medical Group Example

- **Aim:** Improve performance on the CG-CAHPS question: "During your most recent visit, did this doctor give you easy to understand instructions about taking care of these health problems or concerns?"
- For SMG, performance on this question was:
 - Below average
 - Strongly correlated with overall provider rating
- **Intervention:** Increase use of After Visit Summary (AVS) function of EMR

Barriers to implementation

- Consistent use of the After Visit Summary (AVS) tool
- Provider time needed to use it and hand it out
- Usefulness of information on the AVS for the patients

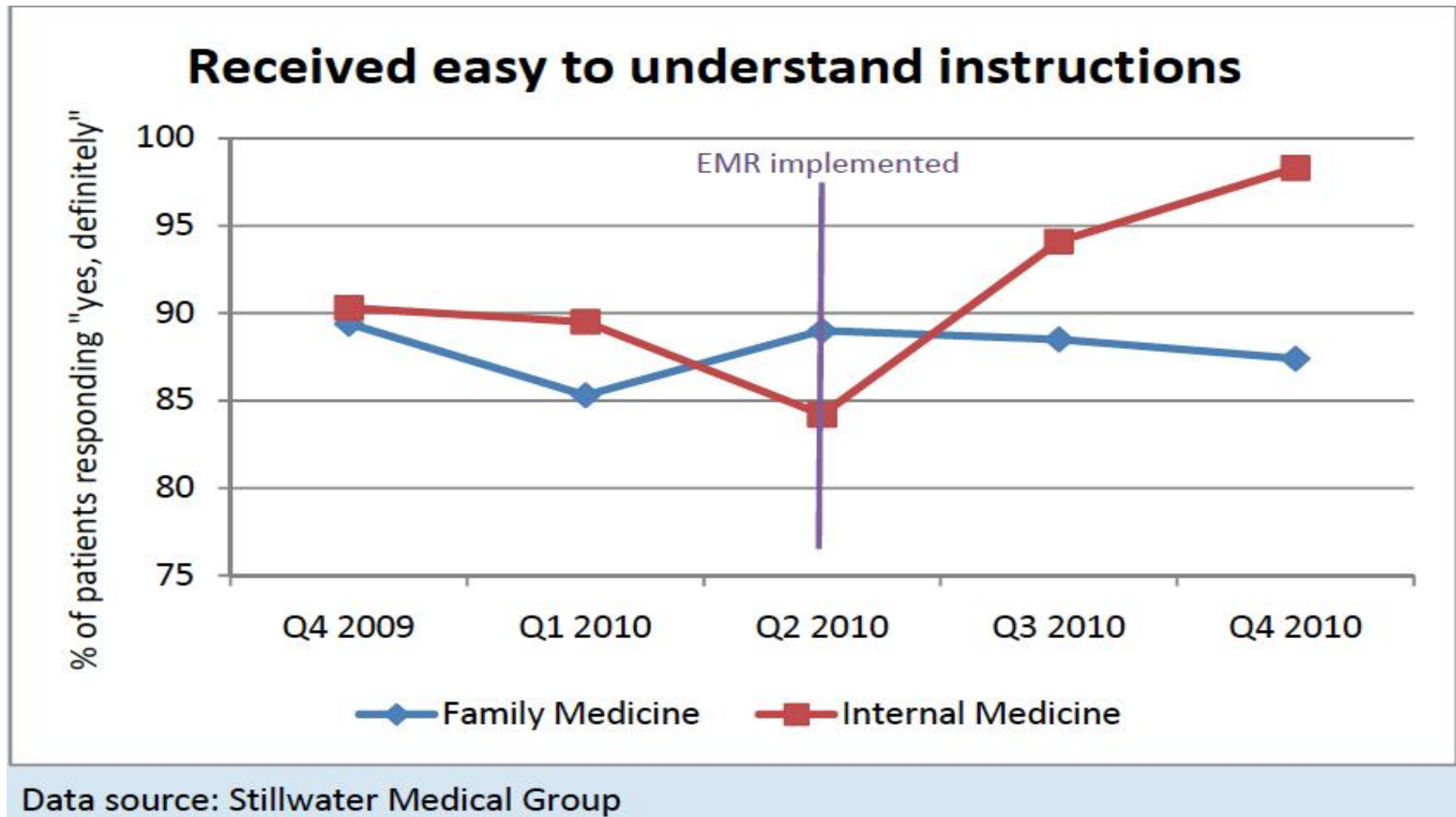


How barriers were addressed

- Sought out early adopters to promote the use of AVS
- Partnered with patients to improve content and delivery
- Automated printout and distribution



Results by department differed by AVS use



Other patient feedback methods

- Comment cards
- Targeted rapid cycle surveys
- Focus groups
- Individual interviews
- Walkthroughs
- Shadowing
- “Mystery shopping”
- Patient and family advisory councils

CAHPS Improvement Guide

- Comprehensive resource for health plans, medical groups, and other providers seeking to improve their performance in the domains of quality measured by CAHPS Surveys
 - Use of the Guide can help organizations:
 - Cultivate an environment that encourages and sustains QI
 - Analyze the results of CAHPS Surveys to identify strengths and weaknesses
 - Develop strategies for improving performance
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Contact Information

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