



Person-Family Engagement Thrives at University Hospitals Health System in Cleveland

University Hospitals Health System, Cleveland, Ohio; 1,032-bed, tertiary medical center; affiliate of Case Western Reserve University

University Hospitals Health System in Cleveland, Ohio, excels at meeting Person-Family Engagement (PFE) Metrics. (Person-Family Engagement is the new Centers for Medicare and Medicaid Services term for Patient and Family Engagement.) The UH Health System is a model for other hospitals seeking to succeed at PFE. "UH Health has the structure in place to meaningfully engage patients and families at the point of care, in organizational policy and procedure-making and in organizational governance," said Kellie Goodson, Director of HIIN Delivery and PFE Lead for Vizient.

The system's 1,032-bed, tertiary medical center, **University Hospitals**, is an affiliate of Case Western Reserve University and includes **University Hospitals Rainbow Babies & Children's Hospital**, **University Hospitals Seidman Cancer Center** and **University Hospitals MacDonald Women's Hospital**.

Led by **Chrissie Blackburn**, Principal Advisor of Patient and Family Engagement (PFE), the UH Health System has established 24 Patient and Family Advisory Councils (PFACs) across the system that serve hospitals, physician practices, outpatient pediatrics, adult psychiatry, home care and numerous other services and programs. At UH Health System, PFACs are known as Patient and Family Partnership Councils, and members of these councils are called patient family partners.

The system has also consistently increased the number of patient and family partners participating on quality committees and boards across the organization.

As a result, UHHS-HCAHPS patient satisfaction scores in the categories of Communication with Nurses, Response of Hospital Staff, Communication about Medications and Discharge Information have all risen over the years (see accompanying graphs).

"We learned that as a system we can be successful in implementing PFE practices and that the patient and family voice can enhance how we deliver care," Blackburn said. "We also recognized that stories can be useful in reminding team members why they chose health care as a profession."

In her position, Blackburn said, "I want to help other people to navigate the health care system and also to avoid hiccups along their journey, safety events and poor experiences so that health care can be more holistic in its approach." In their PFE efforts, the UH Health System has seen many instances where "patients and families demonstrated that their experiences directly impacted their health and that these experiences can teach leaders and staff what needs to be improved."



Chrissie Blackburn

Blackburn explained how the UH Health System addresses each of the following Partnership for Patients PFE Metrics:

Metric 1: Planning checklist with patients known to be coming to the hospital

The UH Health System is in the process of developing a tool with a multi-disciplinary team. The tool will include a medication checklist, daily plan of care, discharge planning checklist, location of places to eat at the hospital, parking, directions and other information. The tool will be placed in a binder that will be useful to patients as they plan their hospital stay, will be updated while they are in the hospital, and be a resource they can take with them when they leave (to keep their primary care physician informed on what took place at the hospital).

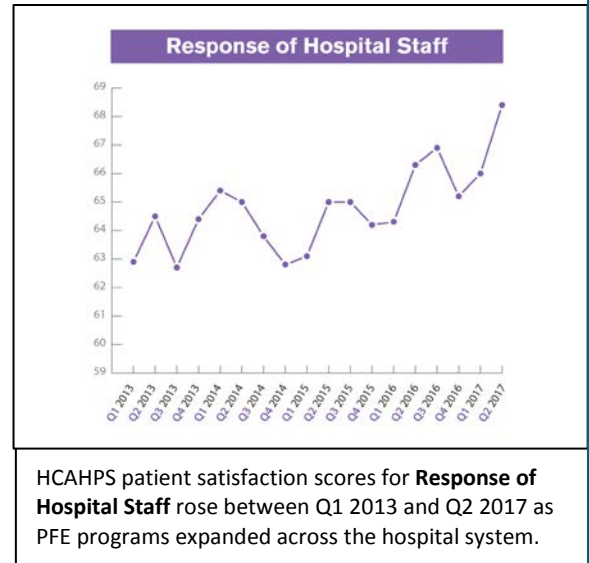
Metric 2: Shift change huddles at the bed or bedside rounding

Nursing staff was educated about the benefits of shift change huddles at the bedside. Nurses were shown video scenarios, examples of the research that showed the benefits of this approach, and learned how best to do these warm handoffs via role-playing scenarios. The vice president of Nursing is consistently monitoring to make sure shift change huddles are happening, as bedside shift change

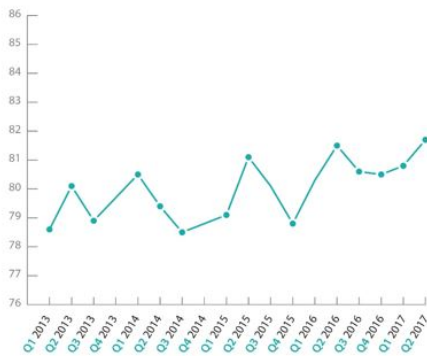
huddles represent a large cultural shift from previous practices, Blackburn explained.

Metric 3: Dedicated patient engagement staff

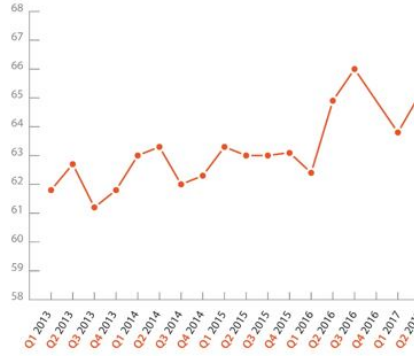
The UH Health System has a long-standing reputation as a patient and family-centered organization. Blackburn's PFE position was created to enhance this reputation and fully engage patients and families as partners. Blackburn was appointed as the principal advisor of PFE in January 2014. There were numerous stakeholders involved in supporting a designated leader and a PFE structure, including UH senior leaders and directors, volunteer services, the legal department, nursing leaders and various patient and family advisors.



Communication with Nurses



Communication About Medications



Patient Satisfaction Rises

UH Health Systems HCAHPS Patient Satisfaction Scores in “**Communication with Nurses**,” “**Communication About Medications**” and “**Discharge Information**” all showed significant improvement from Q1 2013 to Q2 2017.

Discharge Information



Metric 3, continued

“You have to dedicate someone” to lead the PFE efforts, Blackburn said. “Whether that is someone who is already employed or someone you bring on for this role. Or you can put this position in the Patient Experience department. We’ve been successful because it falls under Quality. That person needs to report at the highest level possible. You don’t necessarily need to create an FTE. By having that dedicated person, that dedicated area — it’s absolutely imperative for success.”

Explained Goodson, “We see organizations structure their PFE staff in many ways, there’s no one right way; however, in

order for this work to be seen as a priority, PFE staff and/or PFE councils need to report to a member of the C-suite.”

Blackburn added, “The dedication of various team members across the system to implement PFE practices is what has helped immensely in reaching our goals. Our system Partnership Council staff liaisons and Patient Experience managers have played an important role in operationalizing Patient and Family Engagement.”

Blackburn recommended ensuring that the PFE leader can continue his or her education by participating in HIIN webinars and attending conferences. It’s vital that this person learn from other people in similar positions from other hospital systems, she said. “There’s no degree in this,” Blackburn added. “There needs to be that opportunity to learn how this job functions, what it is and what it’s not. It helps immensely and gives you support.”

Metric 4: Patient and Family Councils/patients and families on committees

“Metric 4 is really a great starting point,” Blackburn said. “It becomes your backbone for PFE.” At UH Health Systems, forming patient and family councils was seen as a priority. “Physicians reached out to me, nurse practitioners — it’s been really successful,” Blackburn said. “The staff are enjoying these meetings.” Blackburn wants to dispel the misconception about PFACs that “patients and families are going to sit around and tell you how angry they are.”

How do you know you’re selecting the right people to be on your advisory committee? UH Health Systems uses a READI tool to select patients and family members for the PFACs. The READI Patient and Family Advisor™ (according to their trademarked tool) “is someone who is RESPECTFUL, collaborates, speaks up and listens with hospital staff. Has EXPERIENCE of care at University Hospitals and is able to share their experiences to enhance care. Is APPRECIATIVE of other patients and families and hospital staff. Is DEDICATED to enhancing safety, quality and experience for all patients and families. Is INVOLVED in his/her own or a loved one’s care, and creates opportunity to partner with the hospital and other patients and families based on his/her experiences.™

Potential members of the Patient and Family Partnership Councils are screened and go through a behavioral interview process. Sometimes people are turned away if they are not yet ready. “We’re very strict in our process so we are getting the READI patients and family members,” Blackburn said.

Metric 5: Patients and families serving on governing boards or board committees

This innovative idea — of having patients and family members serve on hospital boards — has had success at UH Health Systems. Blackburn knows of instances of a PFE member on the board (at University Hospitals Parma Medical Center in Parma, Ohio) as well as examples of a hospital board member serving on a PFAC. Having the perspective of a patient or family member in board discussions is invaluable, as is the contribution of the hospital board member to the PFAC. “There’s a great exchange of information,” Blackburn said.