

# QI TALK TIME



Building an Irish Network of Quality Improvers

## **Partnering with Patients - Accelerating Quality and Safety Improvement**

**June 20, 2017**

**Eleanor Rivoire**

**Connect**

**Improve**

**Innovate**

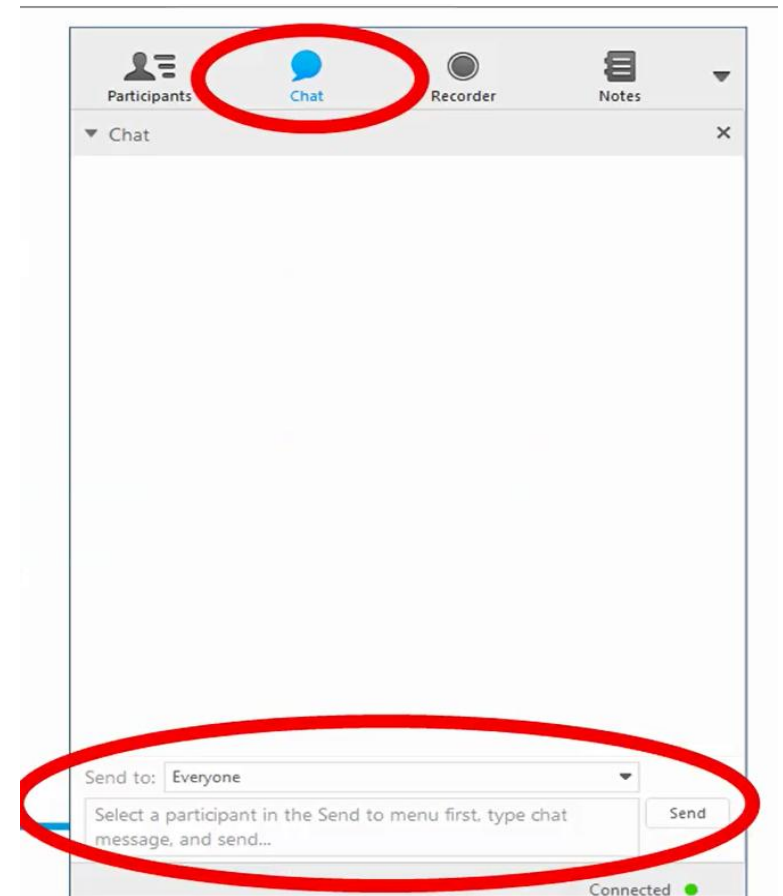
# Eleanor Rivoire

- Eleanor is an Independent Healthcare Advisor after being a senior executive with more than 35 years of strategic, operational and transformational leadership experience in Canadian acute care and academic health settings.
- A Registered Nurse, with a MSc (Paediatrics), she is accomplished with building relationships, leadership development, change management, and communication. Her track record of planning and leading organizational change to improve organizational performance has been strengthened by her keen interest and expertise in transforming the patient experience with a focus on patient- and family-centred care, as well as with models of interprofessional care and education.
- Eleanor is engaged in promoting and enabling patient and provider partnerships to inform planning and decision making about healthcare, professional practice policy, process improvements, leading to improved quality and safety outcomes for patients, families and care providers.
- Work is done in partnership with organizations such as Accreditation Canada/HSO; Canadian Foundation for Healthcare Improvement, Healthcare Canada, the Canadian Patient Safety Institute etc



# Tips for a successful webex

- Interactive
- Sound
- Chat box function
  - Comments/Ideas
  - Questions
- Q&A at the end
- **Twitter: @QITalktime**



*When “I” is  
replaced by “we”,*

*..even  
“illness”  
becomes  
“wellness”.*

## Patient-and Family-Centred Care

Respect & Dignity  
Information Sharing  
Participation  
Collaboration

Institute for Patient- and Family-Centered Care

## Engagement/Partnership



# Patient and Family Centred Care

*“the experience (to the extent the informed, individual patient desires it) of transparency, individualization, recognition, respect, dignity and choice in all matters, without exception, related to one’s person, circumstances and relationships in health care.”*

Don Berwick, 2009

# Patient and Family Centred Care

*“an approach to care that guides all aspects of planning, delivering and evaluating services, with the foundation being mutually beneficial partnerships between patients and families and services providers.”*

Adapted from IPFCC, 2008

Saskatchewan Ministry of Health, 2011

Accreditation Canada, 2015

# Definitions

- **Patient-Centred Care:**

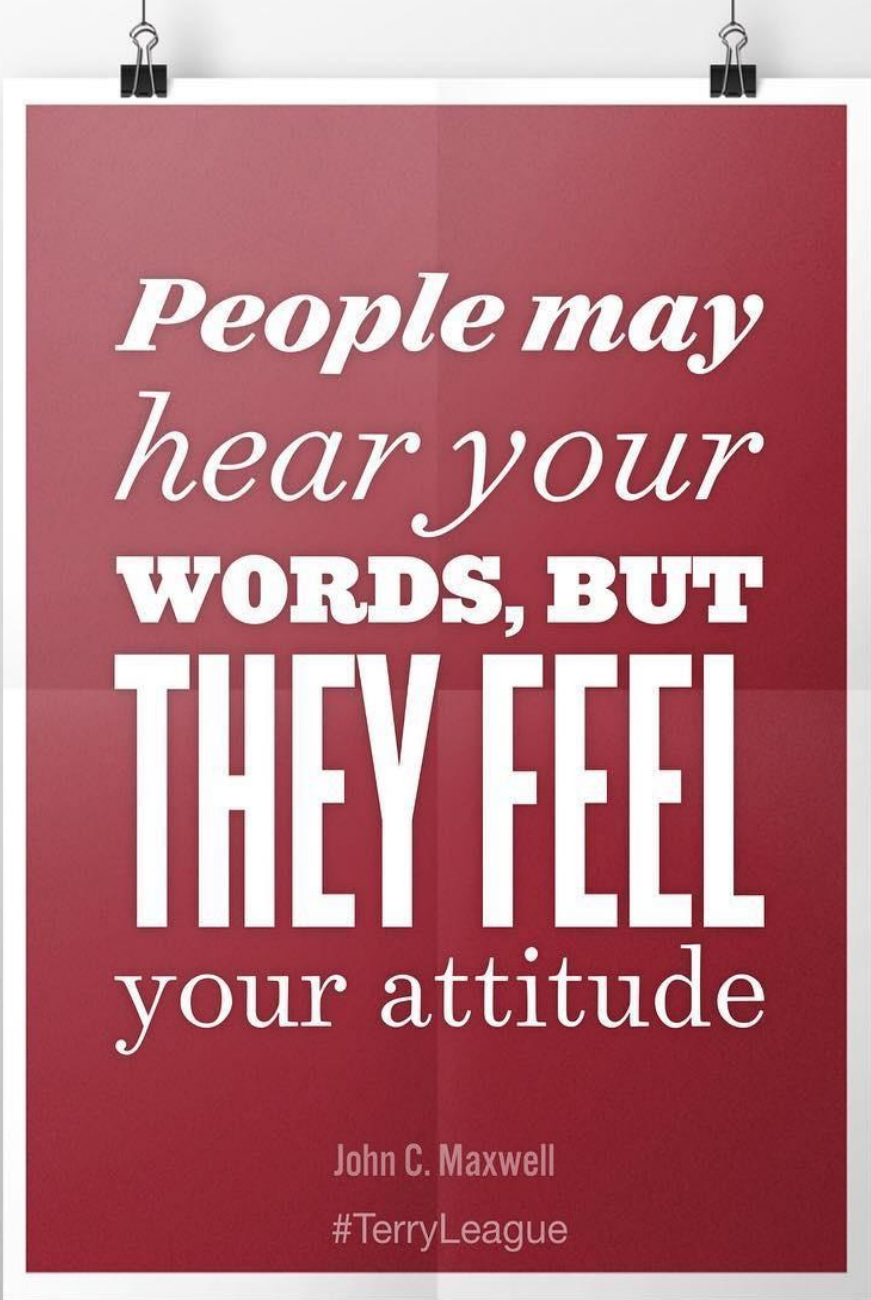
- An overall philosophy and approach that ensures that everything individual providers or healthcare organizations do clinically or administratively is based on patient needs and preferences
- Planning care, evaluation of services, research, training, staff recruitment

- Fooks et al. Healthcare Papers 2015. The Patient Experience in Ontario - 2020: What is possible?

# Definitions

- **Patient Experience:**

- How patients perceive and experience their care
- Involves ability to hear what is said, measure the experience and develop the capacity to use the information to change practice, policies and roles.



*People may  
hear your*  
**WORDS, BUT**  
**THEY FEEL**  
*your attitude*

John C. Maxwell

#TerryLeague

## Patient-and Family-Centred Care

Respect & Dignity  
Information Sharing  
Participation  
Collaboration

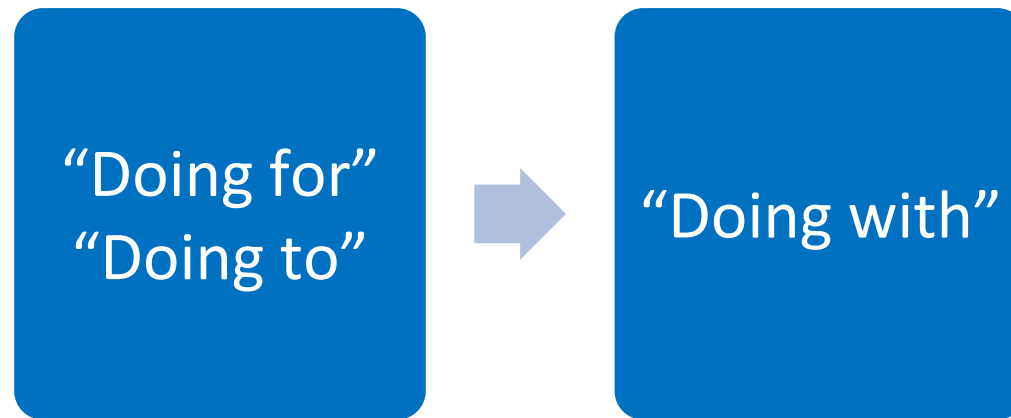
Institute for Patient- and Family-Centered Care

## Engagement/Partnership



# PFCC & Patient/Family Engagement

Different lens on Stewardship



# Definitions

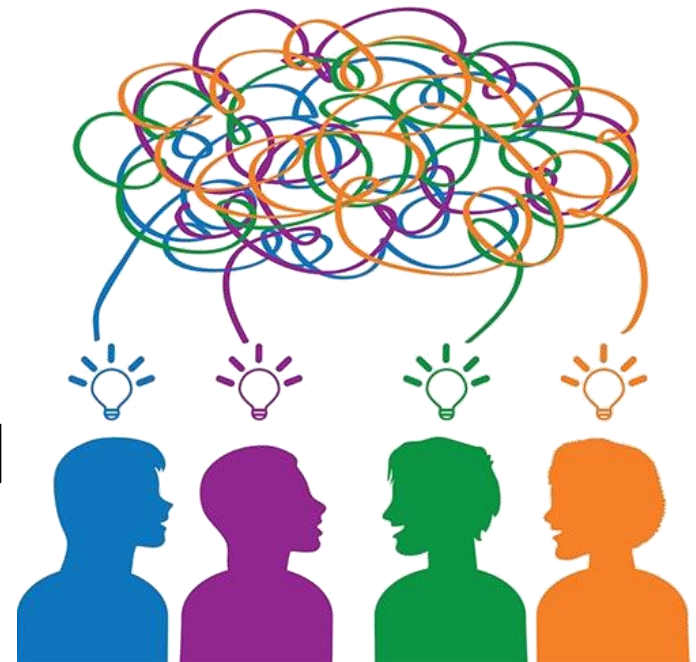
- **Patient Engagement:**
  - The way in which individual providers or health care organizations solicit patient needs and preferences to ensure they are delivering patient-centred care

# Definitions

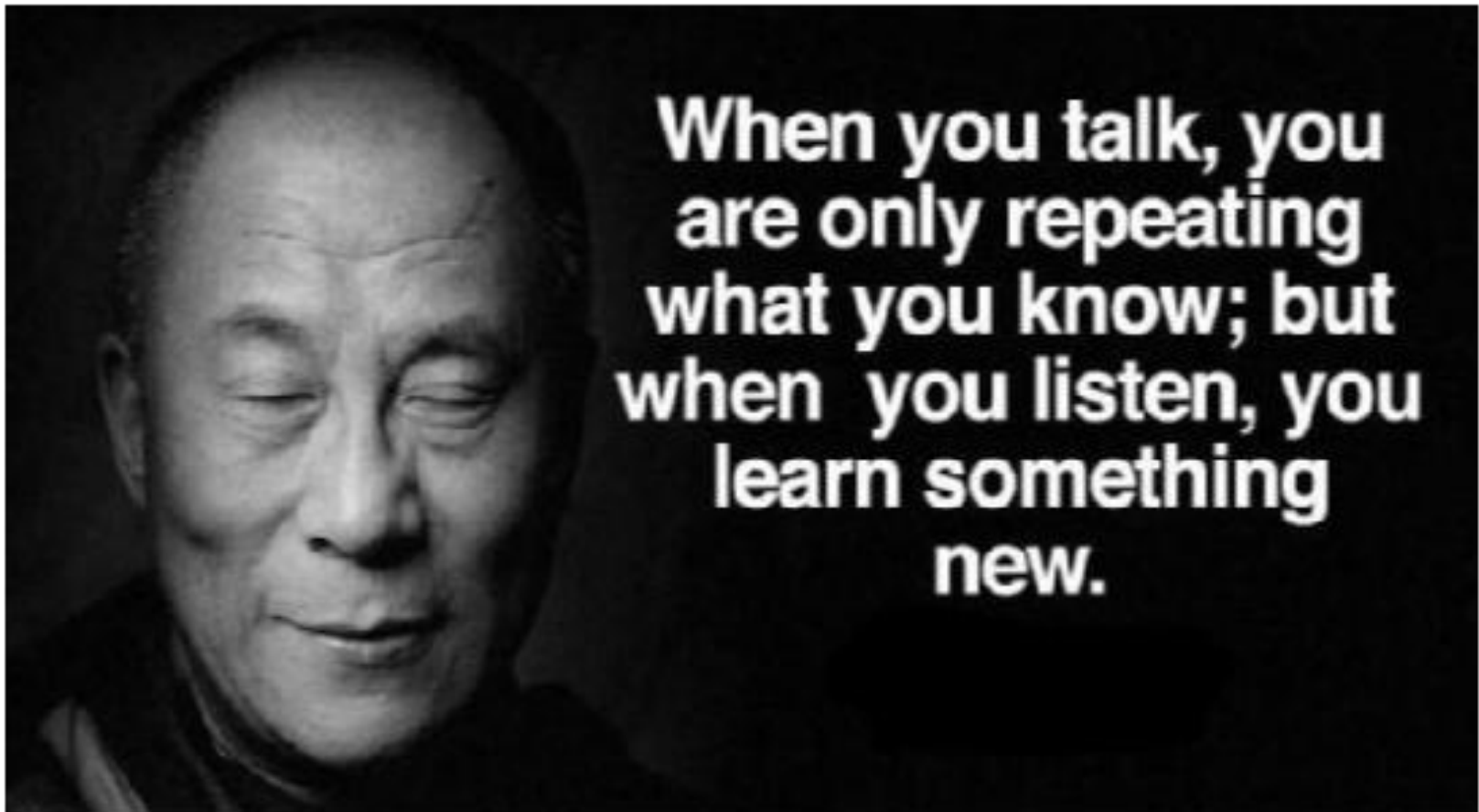
- **Partnership:**
  - is an arrangement in which two or more individuals share the profits and liabilities of “something”
  - is an arrangement when parties, known as partners agree to co-operate to advance their mutual interest

# Partnership ...defined by

- overarching goals
- levels of give and take
- areas of responsibility
- lines of authority
- how success is evaluated & distributed



# Partnership ...defined by sharing



# Partnership - Sharing

- **Healthcare Providers**
- Clinical expertise
- Administrative expertise
- System knowledge

\* Sharing amongst & between teams of healthcare providers



# Partnership - Sharing

- **Patients & Family**
- Experience of illness
- Experience of “self”
- Experience of the healthcare system and providers



# Partnership - Sharing

- **Healthcare Providers**

- Clinical expertise
- Administrative expertise
- System knowledge

- **Patients & Family**

- Experience of illness
- Experience of “self”
- Experience of the healthcare system and providers

*Respect me, Hear me, Work with me*

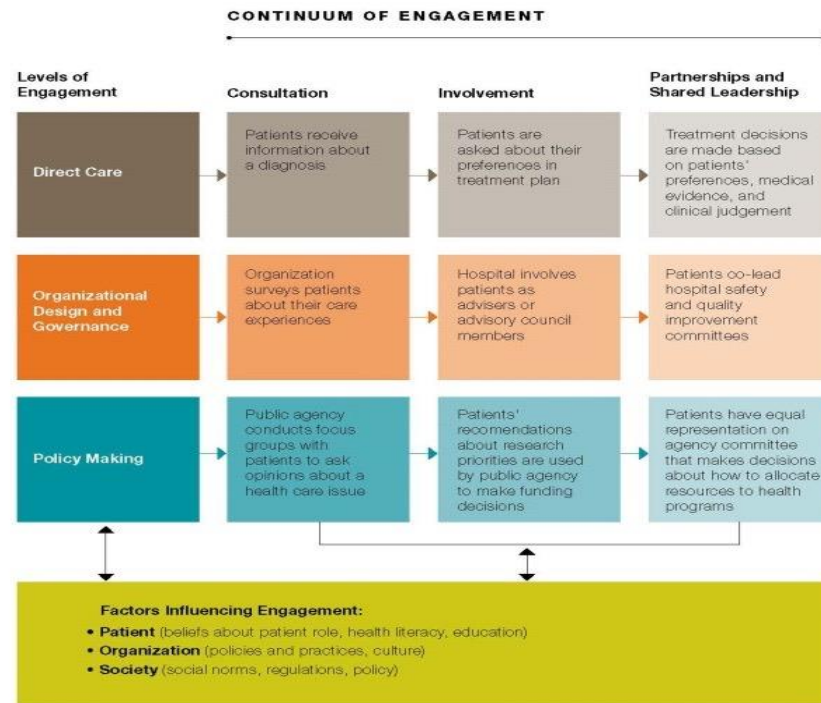
# Partnership - Sharing



- Better Information
- Better Decisions
- Better Outcomes

# A Multidimensional Framework for Patient and Family Engagement in Health and Health Care

Health Affairs



Source: Kristi L. Carman, Pam Derdeus, Maureen Maurer, Shoshanna Sofaer, Karen Adams, Christine Bechtel, and Jennifer Sweeney, "Patient and Family Engagement: A Framework for Understanding the Elements and Developing Interventions and Policies," *Health Affairs* 32, no. 2 (2013): 223-31.

Leading with ...  
Partnering with ...  
**Patients and Families**



*“Paternalism is the past... and the future must see patients recognized as partners in their care and experts in their own conditions - an ambition to which clinicians and health services managers regularly pay lip service, but which has yet to be fully realized.”*

*Angela Coulter, 2014*

# Current Healthcare Landscape

Climate of:

- Economic challenges
- Political/positional uncertainties
- Turbulence with health system redesign
- Consumer/customer mindset
- Far reaching & immediate access to information

# Context - Current Driver Globally



**World Health  
Organization**

- WHO Global Strategy on Integrated People-centred health services 2016-2026

# Context- Current Driver Nationally



Figure 4: Framework for Improving Quality

# Context - Drivers Organizationally

Accreditation Canada

Canadian Patient Safety Institute

Patients for Patient Safety

Canadian Foundation for Healthcare Improvement

HealthCareCAN

Patients Canada &....

Professional Organizations &....

Academic institutions &....



# **ACCREDITATION** **CANADA**

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Better Quality. Better Health.

- ***In partnership with the client and family***
  - The team collaborates directly with each individual client and their family to deliver care services. Clients and families are as involved as they wish to be in care and delivery.
- ***With input from clients and families***
  - Input from clients and families is sought collectively through advisory committees or groups, formal surveys or focus groups, or informal day-to-day feedback. Input can be obtained in a number of ways and at various times and is utilized across the organization.

# Accreditation Canada - 2016

- Have client-and family-centred care as a guiding principle
- Co-design services with health care providers and clients
- Create an organizational structure and culture that supports implementation, spread and success of a client-and family-centred model
- Include client and family representatives on advisory and planning groups

# Accreditation Canada - 2016

- Include clients and families as part of a collaborative care team
- Partner with clients and families to ensure their understanding and meaningful participation in their care
- Respect client choice so they can be involved in their care to the level they wish
- Monitor and evaluate services with input from clients and families

# The Winning Conditions for Meaningful Patient Engagement

Strategy for achieving

always

Outstanding

collaboration

quality

use technology

compassion respect safe

Patient-centred

innovation

Doctors

Staff teamwork

listening to patients

efficient

Leadership

listening and respect

delivering on promises

within budget

listening and respect

**KGH** Kingston General Hospital

Outstanding care, always

# Winning Conditions



## 1. Strategy ... .... with Annual Plans

### KGH Annual Corporate Plan 2012-13 Translating our strategy into action.

Achieving our strategy	KGH 2015 Strategy for achieving Outstanding Care, Always	We are a community of people dedicated to transforming the experience of our patients and families through innovative and collaborative approaches to care, knowledge and leadership.	
		KGH 2015 Outcome	2012-13 Milestones
	KGH 2015	Outstanding Care, Always	100% of Accreditation Canada requirements are met with an unconditional three-year award Quality Improvement Plan targets are met
	Transform the patient experience through a relentless focus on quality, safety and service	Patients are engaged in all aspects of our quality, safety and service improvement initiatives	Overall patient satisfaction is at or better than the provincial teaching hospital average
		All preventable harm to patients is eliminated	Patient safety culture ratings improve by 20%
			Medication reconciliation is completed for every internal medicine program inpatient at admission
			The number of new patients who acquire infections in our hospital is reduced by 10%
		All preventable delays in the patient journey to, within and from KGH are eliminated	KGH overall average length of stay is better than expected length of stay
			The emergency department wait time for admitted patients is improved by 20%
			Clinical services meet the provincial wait time target
			Cancer Care Ontario access to care indicators are met

# Winning Conditions

## Leaders & Leadership Support



# 10 Things Fab Leaders Do!

1. INTRODUCE  
THEMSELVES

#hello my name is...

2. Less Talking  
...MORE LISTENING

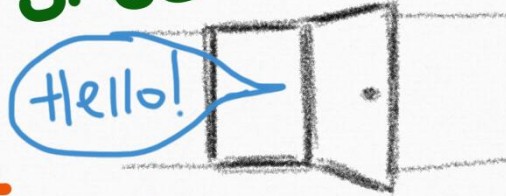
3. EMPOWER!

Help others develop  
as leaders. Encourage  
learning from  
~~mistakes~~ mistakes

4. LIVE THE  
VALUES



5. BE ACCESSIBLE



6. GIVE CREDIT  
AND  
THANKS

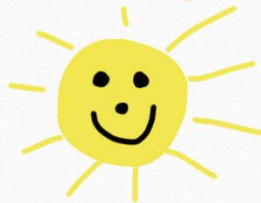


7. REMAIN POSITIVE

... even when having a bad day!



positive  
pants!



8. WELCOME  
CHALLENGE

I recognise I don't  
have all the answers, and  
I seek different views.

9. BALANCE

When to  
intervene...  
and when to  
get out of the way!



10. LEARN  
AND DEVELOP



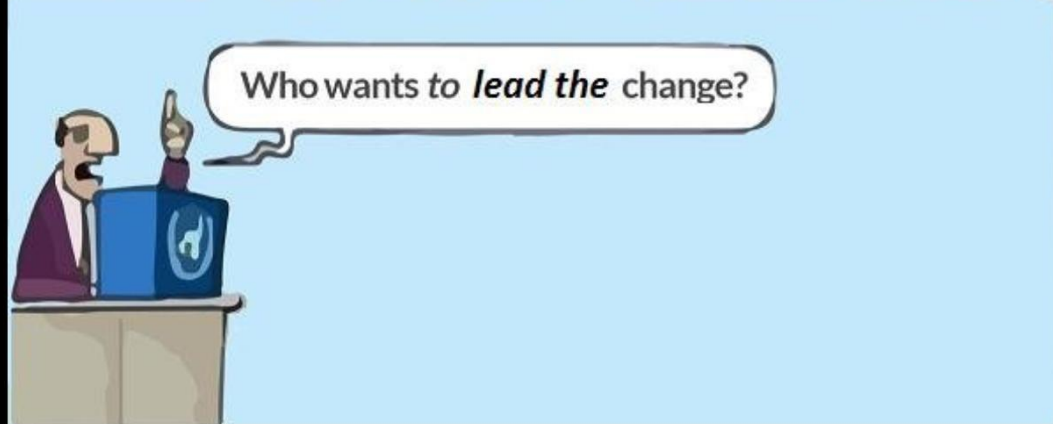
@helenbevan

# Winning Conditions

# Organizational Champions



14.31



# Winning Conditions

## Partners



# There are so many ways to listen...and learn!

Leadership  
Rounding

Point of Care  
Interactions

Patient  
Engagement  
Research

Patient, Family,  
Resident Councils

QI Teams &  
Committees

Provincial  
Experience of Care  
Survey Data

Structured  
Interviews

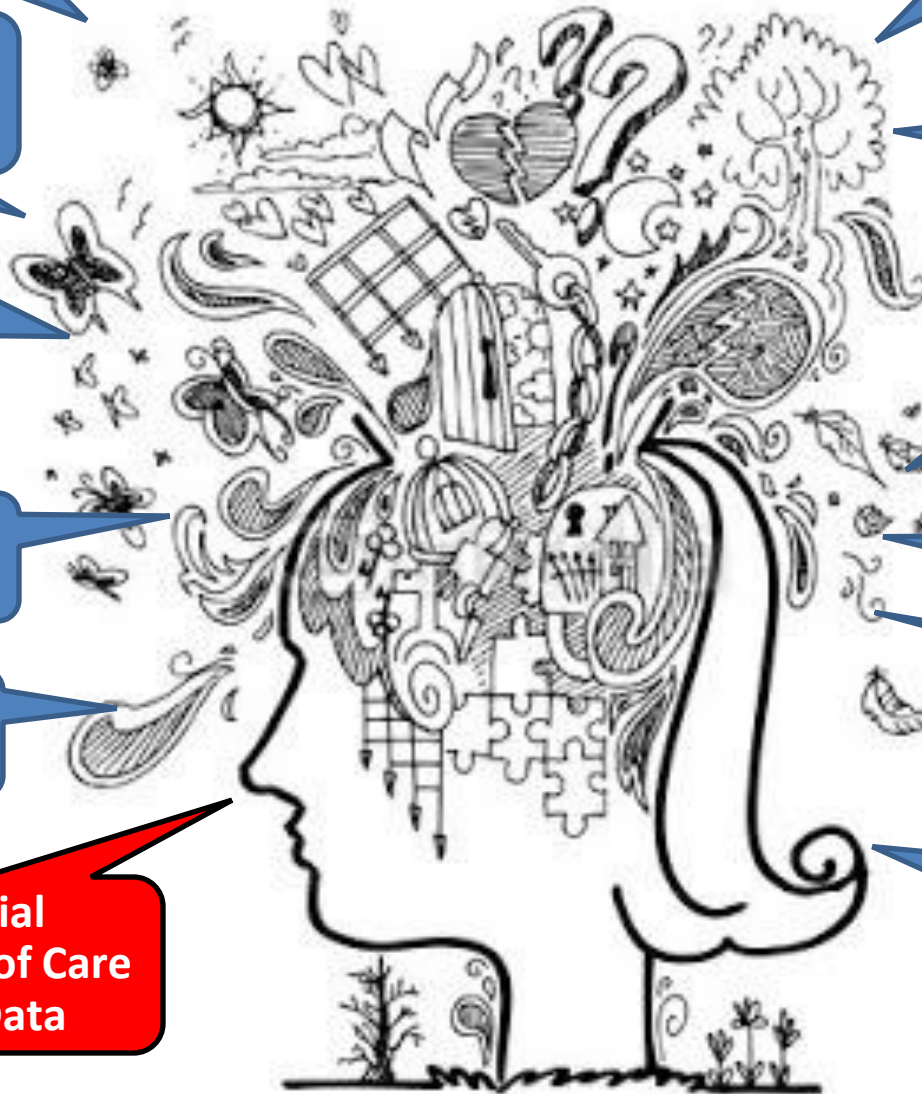
Patient Journey  
Mapping

Complaints and  
Compliments  
Data

Comment Cards

Patient and  
Family Stories

Focus Groups,  
Cognitive  
Interviews



# Winning Conditions

**Performance  
Improvement Mind**



# Winning Conditions

## Infrastructure



Position Descriptions

Terms of Reference

Policies

Space for Advisors

Signage

Identification Badges

Decision-making Processes

# Winning Conditions

## Patient Centred Leadership



...every person ...every day

Assessing

Including

Sharing

Learning

# Winning Conditions

## Sustainability



# Winning Conditions

## Sustainability

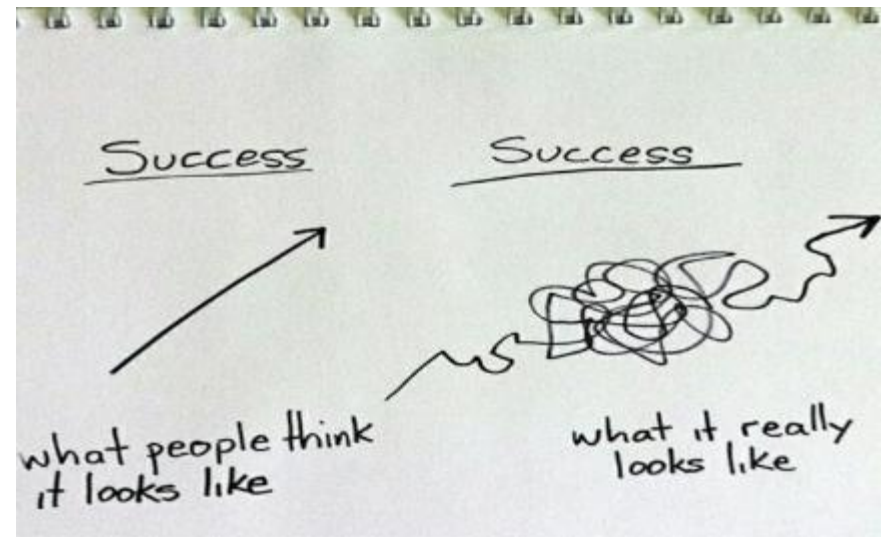


# Winning Conditions

1. Strategy with Annual Plans
2. Leadership Support
3. Organizational Champions
4. Partners
5. Performance Improvement Mindset
6. Infrastructure
7. Patient Centred Leadership
8. Sustainability

*There are no secrets to success. It is the result of preparation, hard work and learning from failure.*

*Colin Powell*



# Sensitivity to Resistors

Bureaucratic

Personal

Positional

Technical

Political



# Challenges

- Language
- Culture - skepticism, distrust, apathy
- Scope and pace of changes
- Long held practices
- Absence of “research”
- Time, energy and resources
- Risk of tokenism/incentivizing
- Keeping it authentic

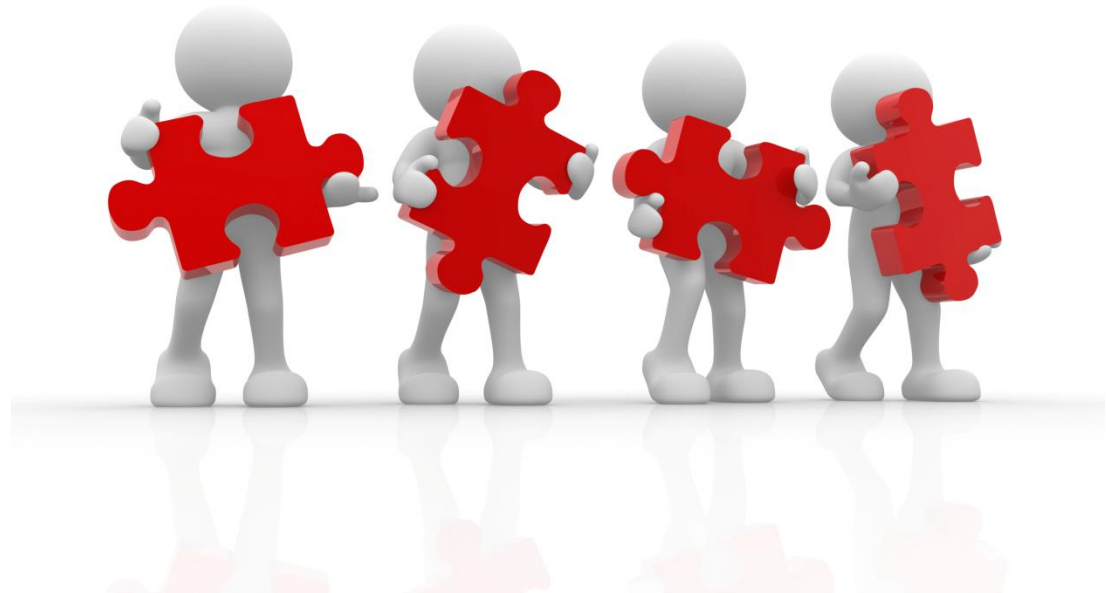


# Value Proposition



# Value Proposition

- Organizational
- Patients & Families



# Value Proposition

## Organizational

- Improved care coordination
- Lower operational costs - staffing & utilization
- Lower capital costs - better product/equip selection
- Improved staff engagement ratings
- Improved HHR measures (recruitment, retention, ST, OT)
- Reduced medico-legal costs
- Delivery on mandate
- Accreditation

# Value Proposition

- Organizational
- Patients & Families



# Value Proposition

## Patients & Families

- decreased anxiety
- improved information exchange
- decreased critical incidents
- decreased codes (code white/yellow)
- clear directives
- greater satisfaction ratings
- engagement and wish to give back

# Tactics

## People

- ID badges; review/revision of role descriptions; consultation & regulated health professional suggest orders; Advisor involvement with interviews; Patient led feedback forums

## Technology/Information/Environment

- Interprofessional documentation tools; Wall desks to facilitate room-side charting; increased computer access; communication technology (i.e. Vocera; white boards); signage and accessibility features

## Processes

- Family Presence; Recruitment and Interview language/engagement; Discharge processes (“bullet rounds”; early engagement of Allied Health; consult phone line; MD to MD consults)

# Consider...

- Is what we do  
...meaningful...respectful...efficient...integrated  
??
- Is the client/family voice sought/provided?
- How is input used?
- Are our clients engaged throughout the  
service/program/organization?
- Are we providing training/education/support to  
staff and client advisors to fulfill opportunities
- Do we tell stakeholders (clients, families, staff, physicians,  
and expectations? volunteers) how their input impacts care and services?
- How do/can we provide evidence that we are client and family  
centred?



# Key Lessons Learned

- Don't over-simplify/underestimate the complexity
- Connect the dots
- Engage all stakeholders early & frequently
- Communicate, communicate, communicate
- Listen and learn ... & use findings to ensure sustainability and ongoing improvement
- Be flexible without compromise. Not if.... how?
- Patience! Change takes time - complex change takes more time
- Celebrate & Share!



**Knowledge – Experience – Instincts**

**Culture – Processes – Outcomes**

**Should we – Can we – Will we**



A little  
progress  
each day  
adds up  
to big  
results.

Questions  
or  
comments???

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- Follow us on Twitter @QITalktime



- Watch recorded webinars at your convenience on HSEQID QITalktime page



**Next Webinar:**

***Tues August 1<sup>st</sup> 1-2 pm:***

***Topic: Having an effective coaching conversation***

***Speaker: Elaine Fallon***

**Director of Nursing and Midwifery**

**&**

**Framework for Improving Quality Advisor**

**Quality Improvement Division**

**HSE**

**QI TALK TIME**



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Quality Improvement Division

# Thank you and stay tuned.....

Thank you from all the team @QITalktime:

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