Engaging the Patient and Family to Improve Health Care Outcomes
AMGA IQL
October 5, 2012

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Session Overview

- Why Patient and Family Centered Care?
- Kaiser Permanente’s Journey
- Methods of Engaging Patients
  - Shared Decision Making
  - Video Ethnography
  - Shadowing
  - Patient Advisory Councils
  - Rounding for Outcomes
About Kaiser Permanente

- Nation’s largest nonprofit health plan
  - Integrated health care delivery system
    - 9 million members
    - 16,000+ physicians
    - 182,000+ employees
    - Serving 9 states and the District of Columbia
      - 36 hospitals
      - 533 medical offices
      - $44.2 billion operating revenue*

- Scope includes ambulatory, inpatient, ACS, behavioral health, SNF, home health, hospice, pharmacy, imaging, laboratory, optical, dental, and insurance

*Source: 2010 Kaiser Permanente Annual Report
Platform for Optimizing Care Delivery

- Aligned Payment Model
- Patient Centered Approach
- HIT Enabled Care Delivery
- Physician-Led Teams

Kaiser Permanente
Principles of Patient and Family-Centered Care

- Dignity and Respect
- Information Sharing
- Participation
- Collaboration

*From the Institute for Patient- and Family-Centered Care*
PFCC Commitment

- On a scale of 1 to 5, where would you place your organization in its commitment to PFCC?

   1  2  3  4  5
   Low  High

- On a scale of 1 to 5, rank your commitment and actions you’ve taken to advance PFCC in your area.

   1  2  3  4  5
   Low  High

- On a scale of 1 to 5, where would you place yourself in your skills and capacity to lead PFCC in your organization?

   1  2  3  4  5
   Low  High
“Never underestimate the power of a small group of committed people to change the world. In fact, it is the only thing that ever has.”

– Margaret Mead
Shared Decision Making

Shared decision making:
- A patient has ≥ two effective treatment options
- Options have different constellations of side effects
- They work with their doctor to understand their options
- The patient chooses the one that's right for them

With Shared Decision Making, organizations have seen:
- Improved quality (outcomes that are more concordant with patient’s values)
- Improved patient satisfaction
- Improved utilization of resources
SDM Pilots at Kaiser Permanente

- 2 Regions
- 9-12 months
- Decision aid: video (online or DVD)
- Initiated by physician
- Four preference sensitive conditions:
  - Osteoarthritis of the Knee
  - Osteoarthritis of the Hip
  - Prostate Cancer Treatment
  - Herniated Disc
- Tracked:
  - Usage
  - Patient experience
  - Clinician experience
  - Utilization
Lessons Learned

Providers & Staff Engagement

Seamless Workflows & Automation

Training
**Video ethnography – a new tool**

**Ethnography** is a qualitative method that involves interviews and observation to understand, interpret, and describe experience, systems, processes, organizations and cultures.

We define **Video Ethnography** as the rapid, applied use of ethnographic methods using video to capture observation and interviews in order to analyze and then share key findings to quality improvement teams, leaders, and others across an organization or institution.
The Power of Video Ethnography
Catalyzing change

Video Ethnography +
Patient & family, staff, physician engagement +
additional data

Results

Significant reduction in readmission rate in 6 months

Improvement Efforts
6 Steps to Using the Patient and Family Centered Methodology to Improve Care:

1. Select a Care Experience.
2. Evaluate the current state by using innovative tools that look at everything through the eyes of the patient and family and develop a sense of urgency to drive change.
3. Develop your PFCC Working Group.
4. Create a shared vision by writing the story of the ideal patient and family care experience as if you were the patient.
5. Identify your PFCC projects and form project teams.
Shadowing

- Follow patients through the process, seeing care from their perspective
- Use people with fresh eyes
- Start and stop from how the patient encounters the system, not by department

Shadowing guide is available at http://www.pfcc.org/guides/ShadowGuide.pdf
Results of Shadowing

- Areas of Opportunity to Improve Patient Comfort:
  - Took too long to check in
  - Thin gowns made women feel vulnerable and exposed
  - Patients had to carry clothes from room to room
  - Lack of mirrors
  - Cold

- Areas of Opportunity to Improve Communication:
  - Many patients did not know what to expect for testing, timing nor diagnosis
  - Patients were confused about next steps

- Areas of Opportunity to Improve Timeliness
  - Patients with a first abnormal mammogram were uncomfortable with a 2 week wait.
  - Patients with a history of DCIS wanted a diagnostic study as the first evaluation
Why Patient Advisory Councils?

- They improve care!
-Errors alone won’t erode trust but failure to manage them will
- It’s the right thing to do!
Examples of Patient Advisory Council Work

Members…

- Provide input on communications, initiatives & projects
- Identify issues that can be improved
- Help other members
Local Patient Advisory Councils

- 12 Patient/Family Advisory Councils in Kaiser Permanente Southern California (since 2006)
- Quarterly Patient Involvement Calls help coordinate councils across the region.
- ‘Special’ Advisory Groups
Regional Member Advisory Council

- First in Kaiser Permanente, 3rd in the US
- Advisors from all KP Southern California medical centers
- Can work on regional level issues
- Initial areas of focus:
  - Improving facility communications
  - Simplifying information flow between facilities
  - Establishing illness-related support groups
Rounding for Outcomes

What is it?

- An evidence-based approach to having senior leaders speak with members and patients about their care experience and sharing their feedback with staff.
- An evidence-based practice designed to improve service, build teams, remove service barriers, and align all levels of the organization.

Why?

- Engages senior leaders in service improvement efforts and helps them to lead effectively.
- Drives performance improvement and accountability through tracking mechanisms.
- Provides staff with objective, timely recognition and feedback.
- Builds trust and confidence and creates a safe patient experience.
Feedback to Staff and Providers

- Immediate and specific recognition of excellent performance creates or reinforces a culture of excellence.

- Immediate and specific coaching on performance gaps, with clear expectations for immediate correction creates or reinforces culture of excellence.

**Two sides of the same coin.**
Rounding for Outcomes: Tracking Tools

Electronic Rounding Tools:
- Active Strategy
- Rounding Plus

### Rounding Logs

#### DIRECT REPORT ROUNDS FOR ALICIA

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<th>Direct Report</th>
<th>Freq</th>
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**TOTAL**
- 3/7 = 43%
- 4/8 = 50%
- 9/8 = 75%
- 1/9 = 11%

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#### Stoplight Report

**Rounding for Outcomes Follow-up Stoplight Report**

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<th>Item / Process</th>
<th>Date Delayed Until</th>
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Questions?

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