## PARTNERS IN HEALING®

Michelle Van De Graaff RN, BSN

November 18, 2021

**EQIC** 

**Eastern US Quality Improvement Collaborative** 





### WHAT IS PARTNERS IN HEALING®?

 Voluntary program which engages patients and family as partners in hospital care:

- Prepares patients and families to manage health at home.
- Increases efficiency and responsiveness.
- Improves family communication with the healthcare team.





# **KIRIBATI**







# **CALEB**







### INTERMOUNTAIN MEDICAL CENTER



## ORIGINAL PROGRAM DESIGN





TIME	IS/COUGH (Incentive Spirometer)	CHAIR FOR MEALS	WALK IN HALL	FLUIDS (30 ml= 1 ounce)	URINE (in ml/ color	TED HOSE	☐ Deep breathe with Incentive
8:00	Spirometer)	IVIEALS	HALL	1 ounce)	Color		Spirometer every 2 hours wh awake
							Cough with heart pillow every
am 9:00							hours/as needed
							$\square$ Get up to the chair for meals
am 10:00			-				times a day (call för help as needed)
							□ Walk in the hall (Cardiac Reha
am				-		-	will contact you)
11:00							Dietary needs (clarify daily
am		-					dietary restrictions with nurs
12:00							and assist as needed)
pm						-	☐ Change and wash TED hose do
1:00							☐ Place compression boots while bed (if no TEDs)
pm		-	-	-	-	-	Get warm blankets as needed
2:00	,						Empty urine and write amount
pm				-		-	ml.) and color (yellow or ambe
3:00							and character (clear or cloud
pm	·			-	-	-	☐ Wear gloves as needed
4:00							☐ Understand fall risk prevention ☐ Before and after all activity, a
pm							for help with all equipment
5:00							(chest tube, IV pole, catheter
pm						-	oxygen, etc.)
6:00							
pm					-	-	
7:00							Healing for life
pm				-	-	-	
8:00							
om							) but Intowns a cost of
							Intermounta Healthcare

#### Date

TIME	IS/COUGH (Incentive Spirometer)	CHAIR FOR MEALS	WALK IN HALL	FLUIDS (30 ml= 1 ounce)	URINE (in ml/ color	TED HOSE
8:00						
am						
9:00						
am						
10:00 am						
11:00						
am						
12:00						
pm						
1:00						
pm						
2:00 pm						
3:00 pm						
4:00 pm						
5:00 pm					,	
6:00 pm						
7:00 pm						
8:00						
pm						

# HOW DOES PARTNERS IN HEALING® WORK?

- Introduce with brochure
- Train participant
  - Badge
  - Activity checklist
- Tour dietary/blankets
- RN chart teaching
- RN/PCT chart ongoing tasks

### Partners in Healing







Door sign

#### PARTNERS IN HEALING

Families partnering with healthcare teams to care for patients and prepare them to transition home



We are happy to invite you to participate in the "Partners in Healing" program with us. As a family member or friend to our patient, we invite you to become a partner with us in the care of your loved one. We have several purposes for

- 1. We hope to help you learn how to do specific cares so that when you take your loved one home, you will feel more comfortable with that transition
- 2. We wish to have you as our partner in care so that current needs and potential discharge needs of your loved one can be met more efficiently
- 3. We also want to partner with you to give and receive important information about your loved one

This program is completely voluntary. Please know that at any time, you may choose to take a break from the program. We will only assume you are participating if you are wearing the "Partners in Healing" badge.

Thank you for your willingness, and we hope you will find you can become an effective partner in healing with us.

#### THROUGH PARTNERS IN HEALING YOU CAN SHARE IN THE CARE RESPONSIBILITIES OF YOUR LOVED ONE

- . You will receive a pin to wear to show that you're part of the program. When we see the pin, we'll know we can include you in your loved one's care.
- . We will teach you how to do specific caregiving tasks. This will help you be more prepared to help your loved one when they
- . You can give us important information about your loved one and their condition. For example, we may ask you to keep track of what foods they ate, how many times they used the restroom, or whether they took a walk in the hallway.
- . We will show you how to make sure your loved one is safe and well cared for. This might include making sure that everyone washes their hands before entering the room, or helping to prevent falls.





Murror	Rosmo	sneibi	litia

- Understand how to prevent falls
- · Always wash hands before and after touching patient
- · Order food for patient (clarify daily diet order and restrictions
- · Always use call light for help if problems arises
- with nurse or dietitian) · Wear gloves as needed

Partner Responsibilities

Patient Name:

Please write in each hour that you will be helping the patient Example: 8 a.m., 9 a.m., 10 a.m. **Core Activities** 

Review medicine purposes and possible side effects Learn proper body mechanics to safely lift the patient Safely help the patient to chair for meals Safely help the patient on walks in the hall

Safely help the patient to restroom

Record urine color (yellow or amber) Record urine character (dear or cloudy)

Get warm blankets as needed

Measure amount of meal eaten
(all most, some, little, or none)

Learn to apply and change TED hose

Learn how to assess and care for a wound Learn to give aerosolized respiratory medicines

(with a respiratory therapist)

(with a nurse or a pharmacist)

Learn to change a colostomy bag

Record weight

Apply braces

Record blood pressure

Measure fluid intake (in mL, 30 mL = 1 ounce)

Measure urine amount (in mL, 30 mL = 1 ounce)

**Additional Activities** 

Deep breathe with the incentive Breathing Spiromete every two hours (while awake)

. Cough with pillow every two hours (or as needed)

Apply leg squeezers (sequential compression device)

Learn to give diabetes medicines or medicines by injection

- . Call if you need any help with equipment (chest tube, IV pole, catheter, oxygen, etc.)
- Review the Activity Checklist with Partners, and Initial those activities
- · Carefully train each Partner to perform the appropriate activities
- Follow up each shift to ensure the activities are being done correctly . After completion, review the Activity Checklist and sign your name
- · Ask your patient care tech to chart this information electronically
- · Save this signed copy for the patient's medical record

rse Name: Nu	urse Signature:	Nurse Initials:	Date:
h Name: Tim	e Documented in Patient Chart	Added form to Patien	t Record:

Partners in Healing Activity Checklist



Do not discard this form



### Partners in Healing® Activity Checklist



Patien	t Name: Partner P	eame(s):			Date(s		-				
Ple	ase write in the date & time you completed the task. (Example: 02/01/2018 8:15 a.m.)										
Staff Initials	Core Activities • All Activities are individualized based on patient and partner needs • They are directed by caregiver team										
	Get warm blankets										
	Get ice chips, water, or snacks										
	Deep breathe with the Incentive Spirometer every hour (while awake)										
	Measure amount of meal eaten in percentages (100%, 75%, 50%, 25%, etc.)										
	Assist with patient hygiene needs										
	Apply leg squeezers (sequential compression device)										
	Using proper body mechanics, safely help the patient to chair for meals, walks in the hall, and to/from restroom.										
Staff Initiate			Additiona	l Activities							
	Cough with pillow every two hours (or as needed)										
	Measure fluid intake in ml. (30mL = 1 ounce)										
	Measure urine output in mL (30mL = 1 ounce)										
	Record urine color and character										

IHCPIH004 4/2018 ©Intermountain Health Care, Inc. (2018) Page 1 of 2

Partners in Healing® Pediatric Activity Checklist

Record weight Record blood pressure

Intermountain Partners in Healing

Patien	t Name:	Pa	rtner Name(	s):		D	ate(s):		
	se write in the date & time you completed the task. (Example: 02/01/2018 8:15 a.m.)								
Staff Initiate			Core A	ctivities					
	Assist your child in personal care  bathe linen change brush teeth								
	Infection control  in high touch cleaning  review current precautions  clutter free room in housekeeping needs  review off unit guidelines								
Start! Initiate		Activ	ities Which	Require Le	arning				
	Measure fluid intake  Goal of ml's per day								
	Proper body mechanics to move your child with a tubes a lines a devices								
	Use proper body mechanics to move your child pin bed/chair preposition every two hours p to the bathroom p down the hall pout of bed 3x / day p p p								
	Assisting with respiratory care  treatments bubbles incentive spirometry goalx_per day								
	Assisting in wound or incision care  □ colostomy bag □ wound □drain  □ surgical site								
	Assessing and caring for a line  □ Central line, dressing to be changed  □ Feeding tube, tube to be changed								
	Giving medications by injection and by mouth								
	Help monitor and record vital signs  □ blood pressure □ heart rate □ weight  □ respiratory rate □ temperature □ oxygen								
	Apply and change medical devices								

IHCPIH001 4/2018 ©Intermountain Health Care, Inc. (2018) Page 1 of 2

□ leg squeezers □ braces □ bags



#### Partners in Healing® Labor & Delivery Activity Checklist



Patien	t Name:		Partner Name(s):							Date (s):		
Plea	ase write in the date & time you completed the task. (Example: 02/01/2018 8:15 a.m.)											
Staff	Core Activities • Core Activitie	s are indivi	dualized b	ased on pal	tient and p	artner nee	ds • They a	re directed	by caregiv	er team		
Intian	Review medication purposes and check for possible side effects.								,			
	Obtain ice chips, popsicles, and/or clear liquids per physician's order											
	Measure fluid intake (30 ml = 1 ounce)											
	Get warm blankets as needed											
	Change pads and towels as needed											
	Provide labor support											
	Provide therapeutic labor environment in room											
	Position catheter tubing and urine bag											
	Apply leg squeezers (sequential compression device)											
Staff Initiate				Monitor-Re	lated Tasks							
	Plug in cord for blood pressure gauge											
	Plug in external fetal monitor											
	Attach TOCO parts to monitor											
Staff Initials		В	ody Mechar	nics to safely	lift/position	n the patien	t					
	Safely help position the patient (birthing ball, birth positions)											
	Safely help patient on walks in the hall and to											

Partners in Healing® Mom & Baby Activity Checklist

Intermountain Partners in Healing

Patien	t Name:		_ Partner N	lame(s):			Date(s):				
Ple	ase write in the date & time you completed the task. (Example: 02/01/2018 8:15 a.m.)										
Staff Initiate	Core Activities for Mom • Core Acti	vities are i	ndividualiz	ed based or	n patient a	nd partner	needs • Th	ney are dire	cted by car	regiver tear	m
	Review medication purposes and check for possible side effects.										
	Obtain ice water and snacks										
	Get warm blankets as needed										
	Fill ice pack										
	Provide therapeutic environment in room										
	Assemble breast pump kit/wash breast pump										
Starff Initiate		Bod	y Mechanio	s to safely	lift/position	on the patie	ent				
	Safely help Mom on walks in the hall (baby in crib)										
	Safely help Mom to the restroom										
	Safely position Baby on back in crib (back to sleep)										
Staff Initiate			C	ore Activiti	es for Baby	1					
	Record feedings and diaper changes on log										
	Assist with breast/bottle feeding and positioning										
	Assist with burping Baby										
	Ensure safe sleep positions for Baby										
	Assist with Baby skin-to-skin contact										

IHCPIH003 4/2018 ©Intermountain Health Care, Inc. (2018) Page 1 of 2

### Nrse Flow 50168

#### Partners in Healing® ICU Activity Checklist

NYL	Intermountair
	Danton and In Handling

	(Example: 02/01/2018 8:15 a.m.)										
Start british	Core Activities • Core Activities	s are indivi	dualized b	ased on pat	ient and pa	artner need	ds • They a	re directed	by caregiv	er team	
	Help keep a daily diary of events.										
	Assist with passive movement exercises.										Г
	Apply lip balm or moisturizing lotion and light body massage.										
	Assist with patient hygiene (baths, brushing hair, etc.)										
	Obtain and keep track of patient's personal effects (glasses, dentures, shoes, etc.)										
	Apply leg squeezers (sequential compression device)										Г
	Help create a quiet, healing space for the patient										Г
	Learn to keep day/night cycle consistency										
	Learn how to evaluate a wound										
Staff Initials		Addition	al Activiti	es for Patie	nts in Less	Critical Cor	ndition				
	Review medicine purposes and possible side effects with appropriate staff										
	Help keep patient comfortable										
	Safely help the patient to a chair for meals										
	Help feed the patient snacks and drinks or set up tube feed										
	Measure oral intake of calories										
	Learn how to apply 8P cuff & oxygen monitor										
	Safely help patient to the restroom or on walks in the hall (as directed by care team)										
	Measure urine in mt (30mt = 1 oz.) and record color										

198		

#### Partners in Healing® NICU and Special Care Nursery Activity Checklist

Pa	rtnei	s in I	Heal	ing

Patien	(Name:	Part	ner Name	s(s):					Date:	
	Please write in the date &	time you	completed	the task. (Ex	ample: 02/l	71/2018 8:11	(a.m.)			
Staff Initiate	Basic Care Activities (Activities are individualized based on patient and partner needs. They are directed by caregiver team)									
	Ensure hand hygiene for all people visiting baby									
	Maintain safety of baby's bedding device (crib siderails up, close port holes of isolette, raise side panels of warmer, etc.)									
	Provide therapeutic and quiet environment in room									
	Practice safety around equipment, lines and devices									
	Transfer from isolette/crib/warmer to hold with assistance									
	Assist nurse by providing containment/calming during cares									
	Change and weigh diapers (save diaper for nurse to assess)									
	Obtain abdominal girth measurement									
	Change pulse oximeter site									
	Demonstrate safe sleep and skin-to-skin positions									
	Position safely using comfort or developmental care products (i.e. swaddle, gel pillow, z-flow, swing, Boppy)									
	Assist with bathing/swaddle bath									
	Perform hair/scalp and skin care on non-ventilated baby									
	Perform oral care on baby- if baby ventilated assistance required									
	Change baby's clothes (nurse to assist with lines/devices)									
	Apply lip balm or moisturizing lotion (as directed by nurse)									
	Perform light infant massage (when developmentally appropriate)									
Staff Initias	Feeding Activities									
	Assemble and manage breast pump kit parts and nipple shield									
	Breast/bottle feed baby using appropriate technique and pacing									
	Assist with taping/securing NG/OG. Help measure tube to ensure correct placement.									
	Perform colostrum/milk swabbing if ventilated assistance required									
	Recognize cue-based feeding; start and stop signs									
	Position and burp baby									
	Obtain pre/post breastfeeding test weights (as applicable per hospital)									
	Record the feeding (whiteboard, checklist)									





# **VIDEO**

https://youtu.be/MOBHHGGkGuY







### PARTNERS IN HEALING®-- CLINICAL OUTCOMES STUDY

### September 2008- October 2016

Published in CHEST Journal February 2018 Volume 153, Issue 2, Pages 572-274

DOI: 10.1016/j.chest.2017.09.046

Michelle Van De Graaff RN BSN, Sarah J Beesley MD, Jorie Butler PhD, Jose Benuzillo MA MS, Justin B Poll Phd, Thomas Oniki PhD, Morgan Francis BS, Dale Cable RN, MSN, Ramona O Hopkins PhD, Donald L Lappe MD, Samuel M Brown MD

https://www.ncbi.nlm.nih.gov/pubmed/29406225

# Retrospective review of adult cardiothoracic surgery patients:

- 465 participants in Partners in Healing, 200 were matched with control patients
- Controls were exactly matched by surgical procedure, age, attending surgeon, year of procedure
- A 2-sided p < .05 was considered statistically significant, **study** p = 0.003
- 65% reduction in 30 day all-cause readmissions

### 7,982 patients underwent relevant procedures:

- Coronary bypass
- Open valve repair or replacement
- Pericardial window
- Thoracotomies
- Video-assisted thoracotomies
- LVAD implantations
- Heart transplants
- Ascending aortic aneurysm repairs
- Esophagogastrectomies
- Esophageal repairs
- Sympathectomies
- Pectus excavatum repair



### PATIENT DEMOGRAPHIC CHARACTERISTICS AND OUTCOMES

Variable	All Partners in Healing Matched Participants (n = Participants (N = 465) 200)		Matched Control Subjects (n = 200)	P Value a	
Age, mean ± SD, y	$\pm$ SD, y 59.6 $\pm$ 15.42 64.5 $\pm$ 11.4		64.5 ± 11.4	.947	
Female	120 (25.8%)	52 (26.0%)	61 (30.5%)	.187	
APR-DRG severity of illness	.811				
1 (Minor)	69 (15.1%)	21 (10.5%)	23 (11.5%)		
2 (Moderate)	204 (44.7%)	105 (52.5%)	98 (49.0%)		
3 (Major)	118 (25.8%)	47 (23.5%)	50 (25.0%)		
4 (Extreme)	65 (14.2%)	26 (13.0%)	29 (14.5%)		
30-d all-cause readmission	32 (6.9%)	10 (5.0%)	27 (13.5%)	.003	
30-d all-cause mortality	6 (1.3%)	2 (1.0%)	3 (1.5%)	.500	
Length of stay, mean ± SD, d	9.1 ± 6.6	8.8 ± 5.3	8.9 ± 7.2	.856	
No. of ED visits within 30 d of discharge b	.309				
0 visits	410 (88.4%)	177 (88.5%)	167 (84.7%)		
1 visit	46 (9.9%)	23 (11.5%)	27 (13.7%)		
2 visits	6 (1.3%)	0	2 (1.0%)		
3 visits	2 (0.4%)	0	1 (0.5%)		

APR-DRG = All Patient Refined Diagnosis Related Group.



a Between matched participants and matched control subjects.

b Only patients discharged alive were included in this secondary outcome analysis (all patients = 464; case subjects = 200; control subjects = 197).

### **SURVEY RESULTS**

Participants invited to complete survey (n=106):

"1. The *Partners in Healing* program greatly enhanced our transition home"

92% rated it 4 or 5 out of 5

"2. I would highly recommend this program to other patients and families" 94% rated it 4 or 5 out of 5

### SURVEY RESULTS continued

- 3. "Please write your general suggestions or concerns below"

  106 unstructured written responses were qualitatively analyzed and four themes were identified:
- a. Family members expressed praise and gratitude for Partners in Healing
- b. Family member acquired relevant caregiving skills
- c. Family members reported feeling empowered, integrated into the care team, reduction in anxiety, increased confidence in home caregiving tasks and like they were aiding the patient's healing process.
- d. Family members thought the program should be offered to all families and during all phases of hospitalization including ICU.

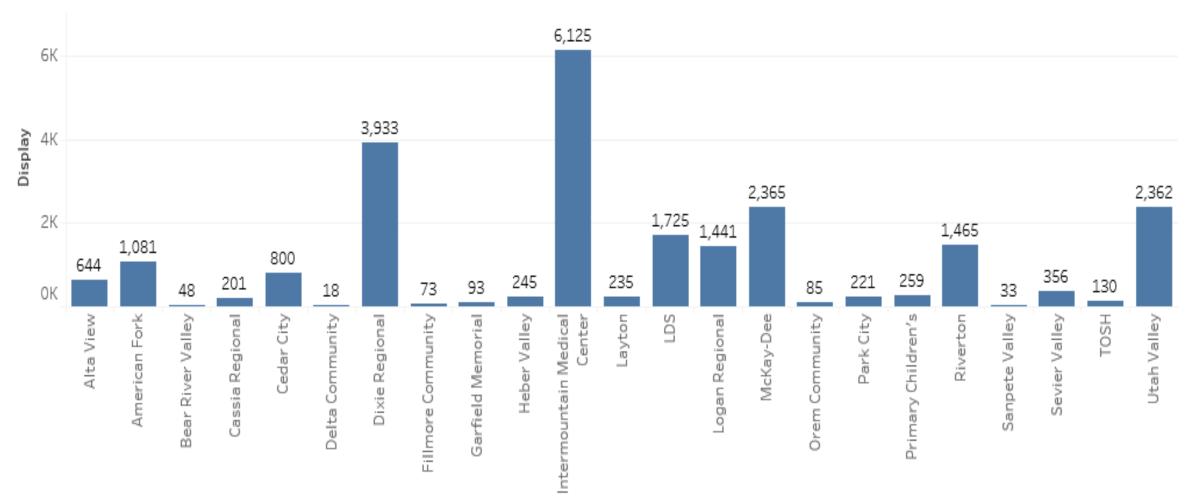


### **SURVEY RESULTS**

### Sample of Participant Quotes

- "We (wife and I) thank you for allowing us the dignity to be part of each other's lives."
- "I really appreciated being given the authority to assist in my husband's recovery."
- "Once this program is fully up and running it will help families make the **transition** to bringing their loved one home. And, we think it helps the staff too when the "Partner" knows what to do Win-win!!! We're glad we were here for this."
- "Partners in Healing empowered me during such a difficult time. It also allowed my husband to recover faster..."
- "...more importantly [this program] gives the family member better understanding of what needs to be done and why, so the patient can recover more quickly."
- This program helped me [the caretaker] feel the confidence that I would be able to do what is needed once we arrive home."





## PATIENT EXPERIENCE OUTCOME STUDY

### December 2012 - December 2016

	Program Participants	Matched Non- Participants	Difference
Care Transitions Domain	68.7	62.3	+6.4
Understood purpose of medications	66.7	65.9	+0.7
Staff took preferences into account	67.3	58.3	+9.1
Understood managing of health	71.4	63.6	+7.9
Nurse Communication Domain	80.2	76.0	+4.2
Nurses treated with courtesy & respect	87.8	84.6	+3.1
Nurses listened carefully to you	73.5	72.7	+0.8
Nurses explained things understandably	79.6	71.0	+8.6
Pain well controlled during stay	68.9	67.3	+1.6
Got help as soon as wanted	58.7	61.1	-2.4
Number of Patients (N)	49	636	

Numbers in table are "top box" HCAHPS scores

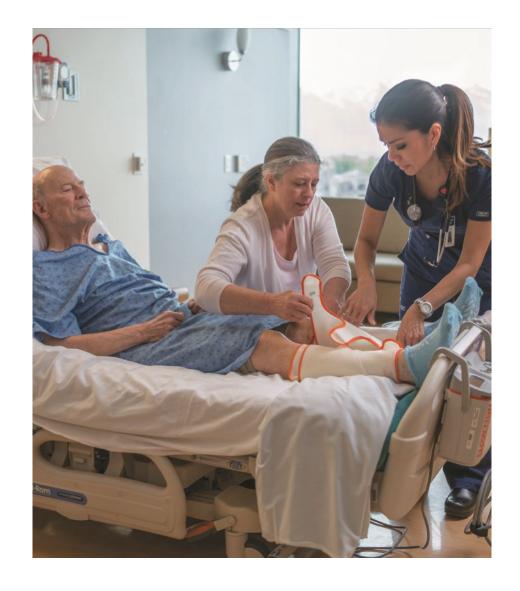


### STAFF PERCEPTION

### Benefits of *Partners in Healing®*

- Patients and families are more confident in their care, making their transition home much easier.
- Patients may recover faster. Families can often encourage a patient toward progress more easily than a clinician can.
- Patient safety is enhanced. Improving communication between the patient, family member, and care team increases safety.
- Patient needs are met more efficiently, allowing staff additional time to complete critical tasks.







# michelle.vandegraaff@gmail.com

# <u>Partners in Healing: Postsurgical Outcomes After Family Involvement in Nursing Care.</u>

Van De Graaff M, Beesley SJ, Butler J, Benuzillo J, Poll JB, Oniki T, Francis M, Cable D, Hopkins RO, Lappe DL, Brown SM.

Chest. 2018 Feb;153(2):572-574. doi: 10.1016/j.chest.2017.09.046.Chest. 2018. PMID: 29406225

# <u>Partners in Healing: Redesign and expansion of family involvement in inpatient nursing care.</u>

Van De Graaff M, Hopkins RO, Gee J, Beesley SJ, Butler J, Richards T, Crowley A, Lappe D, Brown SM.. Nursing. 2021 Nov 1;51(11):64-68. doi: 10.1097/01.NURSE.0000795328.29869.94.Nursing. 2021. PMID: 34678826

