Care Partner Sprint

Office hours
October 21, 2021

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

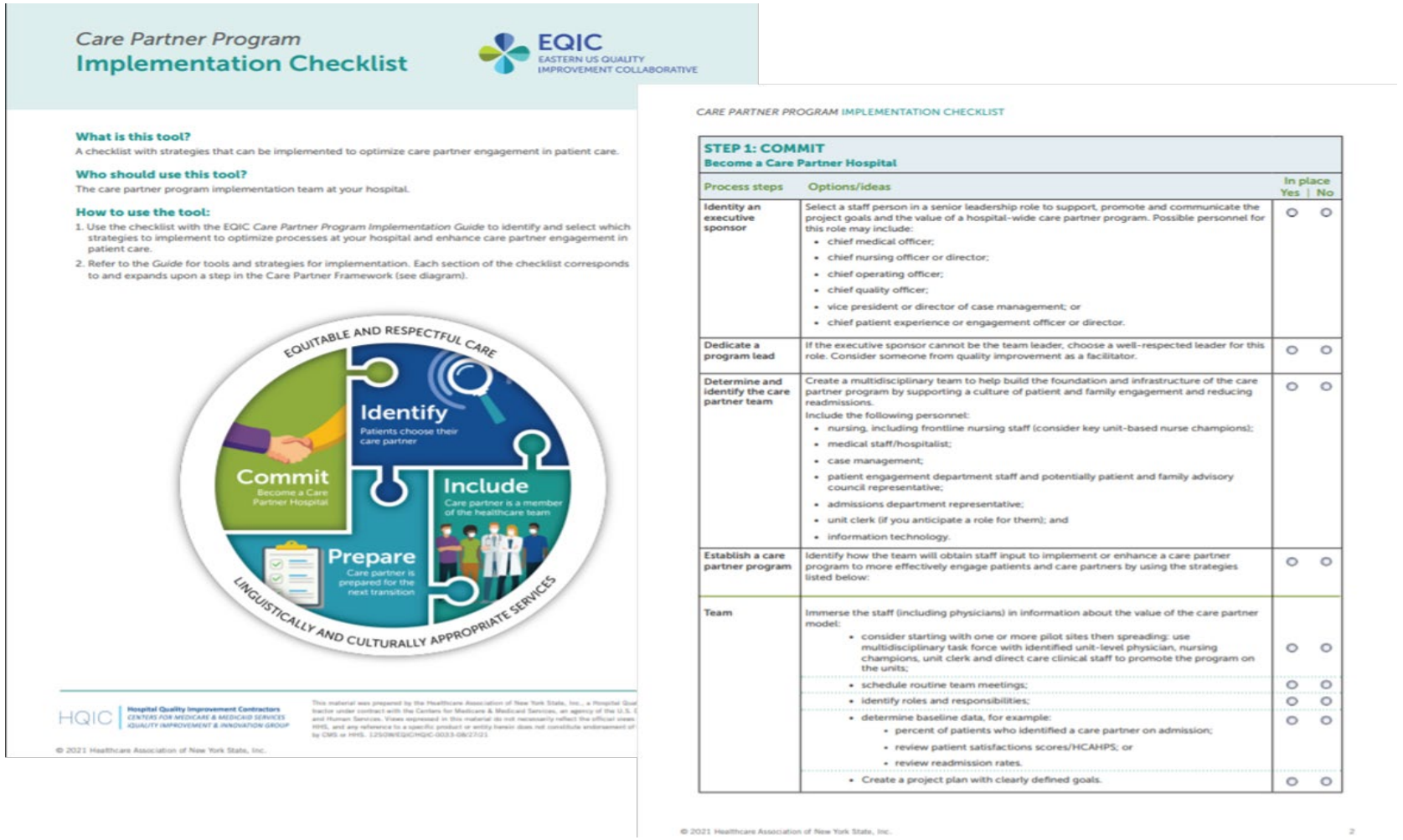
HQIC Hospital Quality Improvement Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES iQUALITY IMPROVEMENT & INNOVATION GROUP

This material was prepared by the Healthcare Association of New York State, Inc., a Hospital Quality Improvement Contractor under contract with the Centers for Medicare & Medicaid Services, an agency of the U.S. Department of Health and Human Services. Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 12SOW/EQIC/HQIC-0001-04/28/21

This session is for you to network and share!

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

Care Partner Implementation Checklist



Care Partner Program
Implementation Checklist

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

What is this tool?
A checklist with strategies that can be implemented to optimize care partner engagement in patient care.

Who should use this tool?
The care partner program implementation team at your hospital.

How to use the tool:
1. Use the checklist with the EQIC *Care Partner Program Implementation Guide* to identify and select which strategies to implement to optimize processes at your hospital and enhance care partner engagement in patient care.
2. Refer to the *Guide* for tools and strategies for implementation. Each section of the checklist corresponds to and expands upon a step in the Care Partner Framework (see diagram).

HQIC | Hospital Quality Improvement Contractors
CENTERS FOR MEDICARE & MEDICAID SERVICES QUALITY IMPROVEMENT & INNOVATION GROUP

CARE PARTNER PROGRAM IMPLEMENTATION CHECKLIST

STEP 1: COMMIT
Become a Care Partner Hospital

Process steps	Options/ideas	In place Yes	No
Identify an executive sponsor	Select a staff person in a senior leadership role to support, promote and communicate the project goals and the value of a hospital-wide care partner program. Possible personnel for this role may include: • chief medical officer; • chief nursing officer or director; • chief operating officer; • chief quality officer; • vice president or director of case management; or • chief patient experience or engagement officer or director.	○	○
Dedicate a program lead	If the executive sponsor cannot be the team leader, choose a well-respected leader for this role. Consider someone from quality improvement as a facilitator.	○	○
Determine and identify the care partner team	Create a multidisciplinary team to help build the foundation and infrastructure of the care partner program by supporting a culture of patient and family engagement and reducing readmissions. Include the following personnel: • nursing, including frontline nursing staff (consider key unit-based nurse champions); • medical staff/hospitalist; • case management; • patient engagement department staff and potentially patient and family advisory council representative; • admissions department representative; • unit clerk (if you anticipate a role for them); and • information technology.	○	○
Establish a care partner program	Identify how the team will obtain staff input to implement or enhance a care partner program to more effectively engage patients and care partners by using the strategies listed below:	○	○
Team	Immerse the staff (including physicians) in information about the value of the care partner model: • consider starting with one or more pilot sites then spreading: use multidisciplinary task force with identified unit-level physician, nursing champions, unit clerk and direct care clinical staff to promote the program on the units;	○	○
	• schedule routine team meetings;	○	○
	• identify roles and responsibilities;	○	○

	• determine baseline data, for example:
	  • percent of patients who identified a care partner on admission;
	  • review patient satisfactions scores/HCAHPS; or
	  • review readmission rates.
		○	○

	• Create a project plan with clearly defined goals.	○	○

https://qualityimprovementcollaborative.org/focus_areas/readmissions/docs/NYSPFP_CP_ImChecklist.pdf

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

Please share:

What key staff and physician members are members of your hospital or system care partner team?

Who is the lead/co-lead in your hospital?

Who is the executive sponsor of the care partner program?

Identify a champion, form a team

Executive Sponsor

CMO, CNO, chief experience officer

Team Lead

MD, Nurse, QI, patient experience, case manager

- Prioritize work
- Support team
- Increase visibility

Team

- frontline nursing
- medical staff/hospitalist
- quality improvement
- case management
- dietician
- home healthcare
- admission department representative
- information technology

The Care Partner Program implementation team should develop "tests of change" to facilitate effective implementation and foster continuous improvement, using process and outcome measures to guide the work.

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

Data measures

What potential QI pilot data elements will your team monitor during development of a care partner program;

- PDSA cycle measures
- Intermediate or long term process measures
- Outcome measures

Let's talk about process measures vs outcome measures? What have your teams chosen?

Proposed process and outcome measures

Outcome Measures	Example Process Measures*
Readmission rate	% patients with a CP identified
HCAHPS #20: "my preferences"	% CPs received teach-back
HCAHPS #21: "understand what to do"	% CPs participated in consults
HCAHPS #22: "understand meds"	% CPs involved in discharge
	% CPs satisfied with involvement
	% Satisfied on post-discharge phone call

PDSA "Small tests of change"

Some measures can be short term or intermittent over time

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

https://www.hcahpsonline.org/globalassets/hcahps/survey-instruments/mail/qag-v16.0-materials/updated-materials/2021_survey-instruments_english_mail_updated.pdf

Establish baseline

Did anyone find that the care partner identity was being collected/documented but that information is not currently shared with the healthcare team?

Can you get a report from your EHR? How are you planning to monitor?

Is your team currently documenting conversations with or the presence of family, friend, support person or care partner when at the bedside or spoken to by a member of the team?

Designing your care partner program

- What EQIC tools will your program adopt or adapt?
- How will you get patient and care partner feedback on your program?

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

https://qualityimprovementcollaborative.org/focus_areas/readmissions/tools_resources/

Educate staff

- How did you educate your staff?
- Provider staff
- Nursing staff
- Other

EQIC
EASTERN US QUALITY IMPROVEMENT COLLABORATIVE

https://www.cdc.gov/vaccines/covid-19/training-education/index.html

Promote care partner program widely

- In-services/orientation
- Screen savers
- Patient television channel
- Posters
- Brochures
- Media

EQIC
EASTERN US QUALITY
IMPROVEMENT COLLABORATIVE

Identify

- What did you find in your facilities that do have the law CARE Act regulation?
- Who will be the first person to ask a patient to identify the care partner?
- Who is the next person?
- Where will it be documented?

Script for assisting patient to identify a care partner

Is there anyone who would like to share?

"We have learned that patients do better if they have someone participating in their care in the hospital and helping after you go home. Do you have someone who can help you?"

"Is there someone who helps you at home? Someone who you would like to learn about your situation and can help you while you are here and when you leave the hospital?"

"Is there someone you can identify as a care partner while you are in the hospital and when you go home?"

"We will update this person about your care while you are in the hospital, and we will teach them—along with you—to understand your condition and help get you ready to go home and look after you to stay well when you leave the hospital."

How will you make the care partner visible to the health care team?

- White board
- Huddle board
- Visible in EHR

Badge or wristband?

Introduce the care partner to the team

- Orient the care partner
  - Unit schedule
  - Rounds
  - Daily update
- Invite to rounds
- Add to the rounding script
  - “Does this patient have a care partner?”
  - “Who will be updating the care partner today?“

Thank you.

EQIC

EASTERN US QUALITY
IMPROVEMENT COLLABORATIVE