



# Sustaining Patient-Centered Cultures Across the Continuum of Care

IOM  
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*patient-centered care in healing environment*

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# Patient-Centered Organizational Culture... is it sustainable?

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**“... we found that 18 months after implementing our patient-centered bedside shift report, that it was only happening 50% of the time, and never on weekends...”**

**“...with all the hard work focused on improving the patient experience in healthcare over the past decade, why did only 251 hospitals get five stars on Medicare’s new rating...”**


**“...we put a Patient & Family Partner Council together for our multi-specialty practice to meet 2014 NCQA standards, but we couldn’t keep them interested, and after a few meetings it petered out...”**



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# We looked to a few of the experts...

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- Leaders of CMS 5  hospitals
- International Patient & Family Partners Council
-  Planetree Designated Healthcare Organizations w/10+ yrs
- Partnership for Patients PFE Dimensions

How does establishing a patient-centered culture benefit:

- Employees
- Clinicians
- Customers/Patients and Families

How do you effectively embed a sustainable patient-centered culture?

- Infrastructure
- Practices
- Measurement

# Patient-Centered Care is not another 'thing' to do, you have to integrate it into all other efforts

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**Define** patient-centered care as a core element of clinical quality, not as separate customer experience activities

**Make** patient-centeredness a goal of all your other priorities



# Build Supportive Infrastructure

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How do you effectively embed a sustainable patient-centered culture?

- **Infrastructure**
  - Practices
  - Measurement



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**I.A:** A **multi-disciplinary task force**, including patients/residents and family members, is established to oversee and assist with implementation and maintenance of patient-/resident-centered practices. Active participants on the task force include a mix of non-supervisory and management staff and a combination of clinical and non-clinical staff. The group meets regularly (every 4-6 weeks) on an ongoing basis.

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**I.B:** A **patient-/resident-centered care coordinator** or point person is appointed who is able to commit the time required to champion related activities on an ongoing basis.

**I.C:** **Periodic focus groups** are conducted on-site by qualified, independent vendor

## I. Structures and Functions Necessary for Culture Change

Multi-disciplinary task force, inclusive of patients and family members, to oversee implementation of patient centered practices & priority-setting

Dedicated champion(s) responsible for PCC activities

Periodic focus groups/listening sessions

Patient and Family Partnership Council

Quarterly meetings (at a minimum six times a year) and access to decision-makers, or some other effective mechanism to obtain regular input from patients/residents and community. Participation is representative of the community served.

**I.F:** Leadership exemplifies approaches that motivate and inspire others, promote positive morale, mentor and enhance performance of others, recognize the knowledge and decision-making authority of others and model organizational values, as demonstrated in focus groups with staff, employee experience survey results and the adoption of **transformational leadership practices**.



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# Patient-Preferred Practices

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How do you effectively embed a sustainable patient-centered culture?

- Infrastructure
- **Practices**
- Measurement



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# Listen to the voice of the patient and implement preferred practices & innovations with their involvement

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- All settings:
  - Family care partners
  - Shared decision-making
  - Empathy & communication skills training
- In-patient settings:
  - 24/7 patient-directed visitation
  - Patient & Family Centered bedside shift report
  - Transition plan with patient & family input





# Measurement

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How do you effectively embed a sustainable patient-centered culture?

- Infrastructure
- Practices
- **Measurement**



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# Quality checking your patient-centered strategies

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**“... we found that 18 months after implementing our patient-centered bedside shift report, that it was only happening 50% of the time, and never on weekends...”**

Implementation

**Performance**

Monitoring



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# Create Accountability with Metrics:

## Sample Patient-Centered Care Quality Dashboard

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### Medical Center

### Patient Centered Care Quality Dashboard

	Baseline	Data Source	Target	Stretch	1st Q '14	2nd Q '14	3rd Q '14	4th Q '14	2014 YTD
<b>PFCC Specific Metrics</b>									
Bedside Report Offered (% documentation by RN)	78	name of source	80	85	82	82			82
Informed of Shared Medical Record (% documentation by RN)	72		75	80	79	76			78
Care Partner Documentation (% documentation by RN)	54		55	60	53	55			54
Community Advisory Council (# of participants)	39		40	45	49	41			45
Volunteer Hours	4543		4500	4600	2767				
<b>Patient Satisfaction (HCAHPS)</b>									
Overall Rating (9 or 10)	74		75	80	76	79			78
Yes, Patients Would Definitely Recommend the Hospital	76		80	85	81	88			85
Aggregate Score (8 Categories)	71		75	80	74	78			76
Appropriate Care Score	95		96	97	94				
<b>Annual Metrics</b>									
Physician Satisfaction (Overall Satisfaction)	72		75	77					46
Physician Satisfaction (Likelihood to Recommend)	48		75	77					33



# Create Accountability with Metrics: Sample Patient-Centered Care Quality Dashboard

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## PCC QUALITY DASHBOARD

W----- MEDICAL CENTER



	Satisfied	Not Satisfied	% Satisfied
Total Criteria	44	25	▲
% Satisfied	64.71%		

### JDI (Just Do It) High Impact/ Low Effort

#### I. Structures & Functions

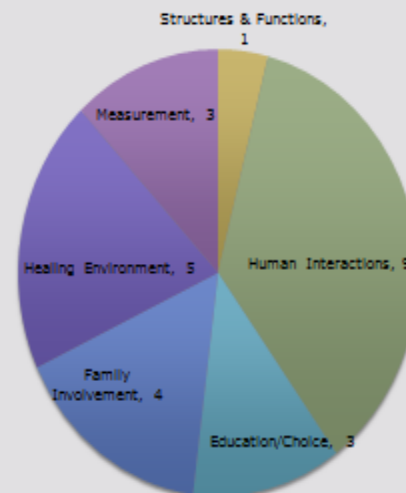
	Satisfied	Not Satisfied	Org. Status
I.A-Task Force with Patients/Family/Residents	0	1	▼
I.B-Coordiators	1	0	▲
I.C-Annual Focus Groups	1	0	▲
I.D-PCC Strategic/Operational Goal Alignment	1	0	▲
I.E-PFAC; Resident Council; Access to Decision Makers	1	0	▲
I.F-Transformational Leadership	1	0	▲
<b>Total Structures &amp; Functions</b>	<b>5</b>	<b>1</b>	▲

#### II. Human Interactions

	Satisfied	Not Satisfied	Org. Status
II.A-Retreat; PCC Immersion Program	1	0	▲
II.B-Physician Engagement	0	1	▼
II.C-Continuing Education on PCC	1	0	▲
II.D-PCC in New Employee Orientation	1	0	▲
II.E-Active Teams in Place	1	0	▲
II.F-Formal Process for Personalized Care	0	1	▼
II.G-Care for the Caregiver/Staff Support/Ergonomics	0	1	▼
II.H-PCC embedded in HR Systems/Practices	0	1	▼
II.I-Reward and Recognition	1	0	▲
II.J-Staff Engagement Survey	1	0	▲

### PFCC Excellence Criteria Gap Analysis

(Component Area, # remaining criteria that need to be satisfied)



#### XI. Measurement

	Satisfied	Not Satisfied	Org. Status
XI.A-CAHPS Acute	1	0	▲
XI.B CMS Core Measures Acute	1	0	▲
XI.C Safety Survey	1	0	▲
XI.D-Patient Perspective Behavioral Health	1	0	▲
<b>Total Measurement</b>	<b>4</b>	<b>0</b>	▲



# Patient-Centered Designation Self-Assessment Tool

*Guidelines for excellence in creating  
Patient-Centered Hospitals, Resident-Centered  
Communities or Client-Centered Healthcare  
Organizations*  
[www.planetree.org](http://www.planetree.org)

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<http://planetree.org/designation-criteria-and-self-assessment-tool/>

