A Plan to Jump Start Patient- and Family-Centered Care at
Penn State Hershey Children’s Hospital
Objectives

- Identify process of conducting PFCC assessment
- Discuss methods PSHCH included and engaged patients and families in development of PFCC strategic plan
- Identify measurements of patient-and family-centered care initiatives
Penn State Hershey Children’s Hospital

- Children’s Hospital is within 500 bed hospital
- 105 bed inpatient Children’s Hospital
- Level I Trauma Center
- Level III NICU
- 16 Child Psychiatry beds
- 10 Pediatric Rehab beds
<table>
<thead>
<tr>
<th>Date</th>
<th>PFCC Event</th>
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<tbody>
<tr>
<td>2001</td>
<td>Developed Family Advisory Council and Family Faculty program</td>
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<td>2002</td>
<td>PICU became open unit to families 24/7</td>
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<td>2003</td>
<td>Developed Advisory Council for Teens</td>
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<td>2004</td>
<td>Achieved highest Patient Satisfaction in history of PSHCH (95&lt;sup&gt;th&lt;/sup&gt; percentile)</td>
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<tr>
<td>2009</td>
<td>NICU became open unit to families 24/7</td>
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<td>2009</td>
<td>Attended 5&lt;sup&gt;th&lt;/sup&gt; International PFCC Conference</td>
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<td>2009</td>
<td>Conducted assessment of PFCC in daily practices</td>
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<td>2010</td>
<td>Created 5 year strategic plan to improve PFCC in Children’s Hospital</td>
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<td>2011</td>
<td>Bedside Shift Report, Hourly Rounds, and Leadership Rounds implemented with help of FAC</td>
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<td>2012</td>
<td>Reassessment of PFCC in daily practices</td>
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<td>2012</td>
<td>Adjustment of PFCC Strategic Plan</td>
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PFCC Assessment

- 40 participants
- 20 questions
  - 17 scaled (1-5)
    - Tailored to separate groups (physicians, nurses, families, etc)
  - 3 open ended
    - What PFCC examples do we do currently?
    - What are the barriers?
    - What changes would you like to see in regards to PFCC?
PFCC Assessment Questions

- Taken from IPFCC assessment tool
- Topics included
  - Leadership view/support of PFCC
  - Family presence
  - Family input
  - Communication
  - Discharge planning
  - Family resources
  - Family support
Themes from Results

- **Staff Culture**
  - Inconsistency among staff on PFCC values/policies
  - Communication needs to be improved between staff and between staff and families
  - Improve acknowledgement/acceptance of family’s expertise and goals for patient

- **Staff Resources**
  - More continuing education on PFCC, how to set limits/expectations with families, psychosocial issues, cultures
  - More support services/opportunities for staff
Themes continued

- Family Resources
  - Translator services
  - Improve and increase Educational Materials/Opportunities prior to discharge
  - Mentor/Parent to Parent program
  - More support services on “off shifts”
Strategic Plan Timeline

- 5 Year Plan
  - Provided objectives for each goal
  - Measurement tools for each
    - Patient Satisfaction scores for specific questions
    - Number of Family Advisors
    - Number of presentations
    - Evaluations of Family Faculty Presentations
  - Re-assessment - midway through strategic plan
5 Year Strategic Plan

5 Main Goals

- Integrate families in quality improvement
- Ensure full partnership with families in planning and implementing policies and programs
- Improve staff commitment to Patient- and Family-Centered Care
- Ensure that clinical learning environments create opportunities to observe Patient- and Family-Centered Care
- Provide families with support during hospitalization
Goal #1

Integrate families in quality improvement

- Increase number of trained families in Family Faculty
  - Created speaking opportunities for nursing units, faculty, residency program, medical school, nursing school, ancillary staff
- Create educational opportunities for families to learn care prior to discharge
  - NICU classes, simulation babies/labs for practice, begin education when first hospitalized
- Each hospital committee has Family Advisor
  - Increased Family Advisors on hospital committees from 1 to 13
Goal #2

Ensure full partnership with families in planning and implementing policies and programs

- Created task force to improve Discharge Process
  - Family Advisor is member
- Created task force for Family-Centered Rounds
- Increase awareness for Family Advisory Council
  - Internally and to Community
  - Created brochure and external website, attended Community Days, promoted FAC to departments and units
- Invite Family Member to be part of Children’s Hospital Board of Trustees
Goal #3

Improve staff commitment to PFCC

- Create recognition and awards for PFCC
- Develop staff knowledge of skills and values of Patient- and Family-Centered Care
  - Created and present education for staff on an ongoing basis, monthly PFCC scenarios
- Promote Patient- and Family-Centered Care internally and Community
  - Created PFCC brochures, external website focus on PFCC, etc
- Improve patient care to reflect PFCC
  - Nursing hourly rounds, bedside shift change at bedside, incorporate family’s values and goals into patient care
- Make “Improving Patient- and Family-Centered Care” an organizational goal
Goal #4

Ensure that clinical learning environments create opportunities to observe Patient- and Family-Centered Care

- Implement Family-Centered Rounds across all disciplines
- Create blog for staff to use as a resource for PFCC
- Improve communication between departments, staff, and disciplines
  - Created communication tool between staff members
- Improve communication between staff and families
  - Created Patient Care Journal
Goal #5

Provide families with support during hospitalization

- Provide monthly activities for Patients/Families
- Offer family support groups or Parent to Parent matches
  - NICU Parent to Parent program, Family Greeter Program
- Provide opportunities for family care
  - Provide massage therapy and hair dresser weekly
- Increase staff support for families
  - Part-time position approved to start in fall
Sharing of Results

- Family Advisory Council
- Physician faculty
- Nursing Councils
  - Owned initiatives
    - Bedside Shift Report
    - Hourly Rounding
    - Family Faculty for Continuing Education
- Interdisciplinary Teams
  - Owned Initiatives
    - PFCC Education
    - Discharge Process
Family Input

- Families participated in survey
- Strategic plan was presented to Family Advisory Council
  - Brainstormed project ideas to address goals
    - External website about services and patient-and family-centered care
    - Cub’s Eye- Information Directory
    - NICU Parent to Parent
    - Family Greeters program
    - Family care opportunities- hairdresser, massages, etc.
Re-assessment Results

- Re-evaluated strategic plan half way through

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<tr>
<td>Overall (Scale 1-5)</td>
<td>3.44</td>
<td>3.84</td>
<td>3.93</td>
<td>3.96</td>
<td>3.33</td>
<td>3.74</td>
<td>3.41</td>
<td>3.52</td>
<td>3.06</td>
<td>3.68</td>
<td>3.45</td>
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- Overall scores have improved
- Staff/faculty scores have improved more than families
- Will complete another re-assessment at the end of 5 year strategic plan
Lessons Learned

- Include Family Advisory Council in every step of the strategic plan
  - Council is well respected and feedback from families is important to the process
- Educate staff about PFCC services, programs, initiatives already in place
- Complete reassessment halfway through strategic plan and make adjustments to meet goals
- Be patient with results
- Celebrate successes and champions
Questions?

Feel free to contact us:
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