



# Patient and Family Engagement at Sinai Health System

# CEO Message

At Sinai Health System, input and insight from patients and families is essential to us improving patient experience and outcomes. Our goal, in partnership with you, is to transform care for our patients, from the beginning of life to healthy aging. To achieve this goal, we consider person-centered care to not only be at the core of our vision, mission and values, but also fundamental to the care that we deliver every day.

Improved patient experience has a direct impact on better patient outcomes. This is why we have positioned the monitoring of patient and family engagement across Sinai Health System as a high-level aim to improve our quality of care. This means that we have listened to the priority issues defined by our patients and use them as indicators in our annual Quality Improvement Plan. In this past year alone, we collaborated with patients and families in 40 per cent of all quality improvement initiatives, with a goal of increasing that number to 50 per cent in 2017/18.

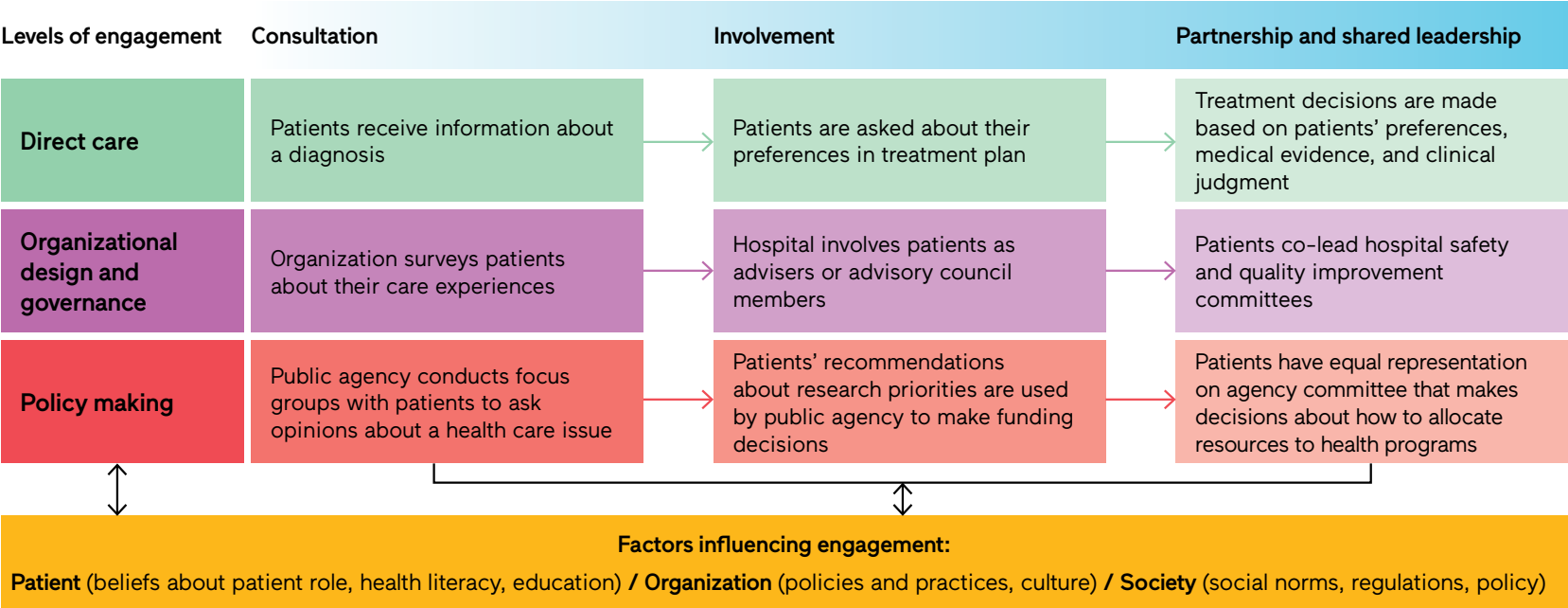
I am encouraged and proud of the impact the wide range of patient and family engagement initiatives are making on our patient's lives. From our collaborations with former patients to improve discharge process at Bridgepoint Active Healthcare, to our highly-engaged Neonatal Intensive Care Unit (NICU) Family Council who are improving the experience for our tiniest patients and their families at Mount Sinai Hospital. These examples demonstrate the power of partnership between health care providers, patients and families.

Our intention in sharing these initiatives is to illustrate to patients and families our ongoing commitment to their experience and encourage them to seek-out opportunities to collaborate with us. I also hope that our staff will be inspired by this booklet. We will continue to look for new opportunities to evolve and improve our programs through patient and family engagement.

Dr. Gary Newton  
President & CEO  
Sinai Health System



# Continuum of Engagement

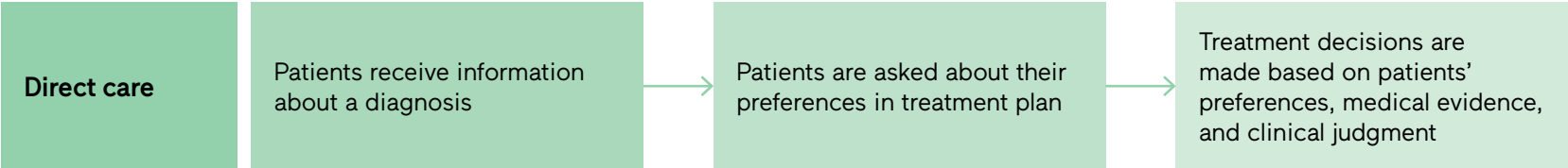


In order to understand how we are engaging patients and families at SHS we have adopted a framework created by Carman et al (2013)<sup>1</sup>. The framework describes three different levels where patients and / or families can be actively engaged. First and foremost **Direct Care** is when the patient is undergoing care and treatment in the hospital and focuses on increasing involvement and partnership with the patient and family in the development of the treatment plan; second is when patients and / or families are engaged at the **organizational** level and occurs outside of the patients individual treatment plan or care environment, but where the patient or family draws upon their experiences to participate in making improvements in the delivery of care and services, for example participating on an advisory council. The third level **Policy** is not included in this booklet and typically involves engaging patient at the network, regional or provincial levels.

The framework categories represent a continuum from consultation, involvement, and partnership / shared leadership. For the purpose of the report we have identified activities that fall in all three categories of engagement. The goal is not always to move toward activities at the far end of the continuum. These activities contained within this book reflect only a small portion of our organizations' efforts to involve patients. The hope is that these stories and ideas will inspire teams from across SHS to engage with patients and families in meaningful ways.

<sup>1</sup> Carman KL, Dardess P, Maurer M, Sofaer S, Adams K, Bechtel C, Sweeney J. Patient and family engagement: a framework for understanding the elements and developing interventions and policies. Health Affairs. 2013 Feb; 32(2):223-231.

# Direct Care



## CONSULTATION

### Sinai Health System hosts patient ombudsman to open conversation about patient experience

During Canadian Patient Safety Week, Sinai Health System used patient story-telling as a way to highlight the role of patients in quality improvement. A patient partner, along with Ontario’s patient Ombudsman used a facilitated discussion to highlight the value of dialogue between patients and care providers.



### Feedback Leads to More Comfortable Experience for Ambulatory Patients

Informal Patient, caregiver and staff feedback was received on the safety of the main entrance hallway to ambulatory care reception (Bridgepoint Site). It was identified that it was a safety concern for those with limited ambulation concerns and decreased stamina; due to the distance to ambulatory care reception. In collaboration with Redevelopment Office Team a potential solution was to provide transport chairs that could be used from parking and the main entrance. Several chairs were trialled and ‘staxis’ were selected by patients, family and staff. There are now ‘staxis’ located on the visitor parking level and the main entrance.



### **Resources to Support Healthy Aging Informed by Patients and Caregivers**

Education Resources to Support Healthy Aging is a series of pamphlets and directories focused on promoting healthy lifestyles, disease prevention strategies, and the navigation of community services available across the Greater Toronto Area. Patients and caregivers were actively involved in the review process of all education pamphlets through a series of in-person workshop sessions. Patients were asked to review resources and provide feedback on content, design, and format prior to their launch and dissemination. Participants also identified future topics of interest for development. Based on feedback from these sessions, the program incorporated edits and recommendations into the education pamphlets.



### **Leadership Safety Walk-Arounds involving patients and families**

Leadership Walk-arounds are conducted by the Nursing Unit Administrator (NUA) and Clinical Resource Nurses (CRN) daily on General Internal Medicine (GIM) units at Mount Sinai Hospital. The goal is to proactively meet with patients and families, and obtain feedback on the care received. Based on feedback from the walk-arounds, the NUA and RN will develop strategies and collaboratively work with other health care team members to address areas for improvement with timelines.

### Learning from patients in a new education program

In September 2016, Patient & Family Centered Care (PFCC) was the topic for the inaugural structured Interprofessional Education (IPE) placement at Bridgepoint, making a strong statement about the value of patient's stories. During this four week curriculum, a group of interprofessional students met weekly with three facilitators (including the patient advisor) and patients to reflect on interprofessional collaborator competencies as they explored the patient's stories. Each tutorial featured a patient sharing their experience and answering questions. Students receive credit from the Centre for IPE at the University of Toronto for participating. Based on this success, patients were integrated into the February 2017 IPE placement; "Caring for the patient with complex needs", and will be considered for all future IPE placements.



*"These sessions helped me feel confident in my role and understand my profession in relation to others, so that I will be able to contribute my expertise more effectively."*

HAMIDEH ZAKERI,  
Project Management Student

### Engaging patients and families to improve the patient experience for rectal cancer

Mount Sinai Hospital is proud to be one of several organizations involved in a three-year Canadian Partnership Against Cancer Rectal Cancer Project that has recently been completed. One of the initiatives for this project was to engage patients to identify and prioritize current gaps in care and co-create solutions to improve their treatment experience. A key component of this project is the participation of a Patient & Family Advisory Council (PFAC), which includes 29 members of patients treated for rectal cancer and their families from across Canada. One of the outputs from this study was the development of a mobile app to help patients better manage at home following discharge from hospital after surgery.

## Patients and Staff Collaborate to Improve Transition from Hospital to Home

Sinai Health System is aiming to improve outcomes and enhance patient experience during discharges from the hospital to the community . SHS was an early adopter of the Toronto Central LHIN and OpenLab's Patient Oriented Discharge Summary (PODS) initiative, a discharge tool for comprehensive discussion with patients/families around five essential elements: information on medications, follow-up appointments, normal expected symptoms and what to do with arising symptoms, lifestyle changes, and resources post discharge.

The tool was first co-designed with patient partners and customized to the Acquired Brain Injury (ABI) population. The interprofessional team delivered PODS two days before discharge to the patients and their caregivers. Patient satisfaction scores on the ABI unit improved from 76% to as high as 96.3%. In December 2016, the Medical Rehabilitation team co-designed with their patient partners and implemented a customized tool. Initial results show a 20% increase in patient experience scores. Additional co-design work for the Stroke and Neurological PODS has been recently completed.

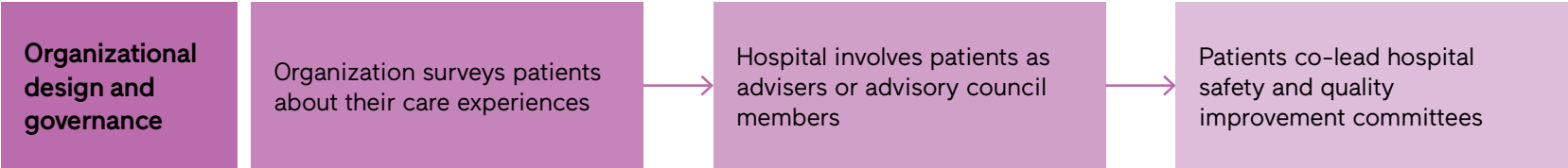
*"One patient's wife noted "As part of the PODS process, both the Pharmacist and Physician made sure that my husband's local care team in Huntsville had the information they needed and that the local pharmacy would be able to meet his needs. It really felt like a team. That's what I felt was most impressive!"*



*"Patients are often anxious about going home. This new discharge process helps them feel a greater sense of control. Collaborating as a team to make sure patients have the information they need written in a way that's easy to understand lessens the stress."*

JENNIFER SANCHEZ, RPN 4S

# Organizational Design & Governance



## CONSULTATION

### Biomedical Scanner Access Ensures Parents Keyless Access to NICU

NICU is a protected unit that has a secured access for entry. Parents are recognized as being an important part of our team and biometrical scanner provides families with keyless access during their stay, without the need to check in or request access. Focus groups were conducted with parents to learn about how parents felt about this initiative. The NICU Family Council were further engaged to develop a new “Welcome Letter to NICU” that outlined the processes which was created based on the feedback provide by NICU Family Advisory group. Parental satisfaction has increased. Number of calls to open a door has decreased by 75%.



*“Mount Sinai and the community here did so much for our family when our daughter was in the NICU. I hope to contribute back, in some small way, to help families going through a similar journey and to offer my perspective as the hospital continues to evolve the care experience.”*

ANIL WIJESOORIYA, Father

*“Having the patient voice represented on hospital committees provides a way for hospital professionals to have a real connection with the population they serve and to have a personal reminder of what our ultimate goal is: to provide the best care experience for the patients we serve.”*

KASIA PYTLIK M.S.W, R.S.W L  
Social Worker and Program Developer  
Neonatal Intensive Care Unit

## Breast Milk Scanner Provides Peace of Mind to Parents

The Breast Milk Tracking system uses unique barcode identifiers to ensure a correct match for every feeding and that the feeding unit has not expired. The system tracks and traces expressed breast milk, donor human milk, and additives. Focus groups were conducted with parents to learn about how parents felt about safety of the breast milk and ways to improve it. Parents were provided with survey before and after implementation of the system. The number of incident reports related to administering wrong breast milk has now decreased to 0 since the implementation of the bar-coding system in January 2015. Surveys conducted after implementation has shown that families have a greater sense of security.

## PARTNERSHIP AND SHARED LEADERSHIP

### Patients and Families Consult on Future Design of Key Care Areas

The Phase 3 redevelopment project at Mount Sinai Hospital is leading to opportunities for patients to provide feedback on design. The new ICU space is designed with single rooms to allow for natural window view and a designated space to accommodate families. As part of the design process a mock-up of the rooms was created where Patient and Family Advisors contributed by providing feedback about how this space should be configured.

The new Schwartz-Reisman Emergency Department will be approximately double the current size of the department. The design of the new space was also informed by the involvement of patients and families acting as advisors after being provided with an opportunity to review the architectural drawings throughout their development and to provide feedback in relation to the design. Many of the features of the new design were the result of consultation with patients and families through patient and family surveys and daily feedback.



*"I commend (you) and SHS for having patient representation as it is so valuable! I have shared how important this is already with two other clients this week. It is so incredibly important to understand issues from the patient's perspective!"*

DONNA ROTHWELL, RN, BScN, MN  
Principal, Program & Project Management Operational Readiness  
Planning - Healthcare Project Delivery OfficeStantec



**Facilitating a partnership and collaboration between staff and patients.**

Family Integrated Care (FICare) is an extension of the principles of Family Centered Care where parents are integral members of their infant’s care team. The goal of FICare is to facilitate a partnership and collaboration between parents and the NICU staff, to promote parent-infant interactions, and to build parent confidence. Parents presence is critical to their infants wellbeing. Parents present on rounds, attend classes and provide day to day care for their infants. Preliminary research suggests that FICare decreases parent stress, results in fewer nosocomial infections, improves infant growth and breastfeeding rates, and improves patient safety. Peer to peer support and Veteran parent engagement through the Parent Advisory Committee is encouraged and supported through program development, education and quality improvement initiatives.



*“I felt compelled to do more for the families and Mount Sinai as a way to give back for the medical care and support provided during my journey.”*

MARIA ELENA FIGUEROA, Mother

## INVOLVEMENT



### **Mental Health Program Serves Chinese Community**

Located in Scarborough, the Mount Sinai Hospital Wellness Centre, is a community mental health program for Chinese speaking seniors and caregivers. Focus groups were conducted which sought the views of community members, seniors, families, community service agencies, family physicians and psychiatrists. A community advisory committee was formed which developed the initial stages of this wellness program. This centre works in partnership with Yee Hong Centre for Geriatric Care and Hong Fook Mental Health Association. The Wellness Centre actively receives feedback about services from patients, family members and community service providers. Between 2006 and 2016, the number of patients served almost tripled.



AT A GLANCE: PATIENT & FAMILY ENGAGEMENT ACROSS SINAI HEALTH SYSTEM

DIRECT CARE	Consultation	Involvement	Partnership and shared leadership	
CONTINUUM OF ENGAGEMENT > CONTINUUM OF ENGAGEMENT > CONTINUUM OF ENGAGEMENT				
<b>Orthopedics</b> D. Watts			Experience Based Co-Design project – the first 48 hours of admission.	
<b>Perioperative &amp; Invasive Procedures</b> L. Wayment	Optimal Care Pathway development	RN Pain Study	Enhanced Recovery After Surgery (ERAS)	
			Orthopedic Pain Management Project	
<b>Emergency Department</b> K. Van Den Broek	MS 560 Form Revision (discharge component) MS 410 Form Revision Nicotine Replacement medical directive development	Falls Auditing	Organ & Tissue Donation Package	
<b>General Internal Medicine (GIM)</b> K. Van Den Broek		Bedside Multi-disciplinary rounds Pressure Injury Prevention Pamphlet Geriatric Information Pamphlets	Geriatric Information Pamphlets Transition Planning Risk Ax (T-PRAS)	
<b>Women’s &amp; Infants</b> J. MacKenzie	Surveys	Birth Plan development	Unit re-design Babysitting program Birth Integrated Care Plan	
<b>In-patient Mental Health</b> K. Van Den Broek		ECT Booking Process Review	Medication optimization and treatment intervention individualized planning	
<b>Ambulatory Care &amp; Community Mental Health</b> K. Van Den Broek	Peer Support input regarding signage and clinical feedback.	Complexity Checklist” developed to address physical and psychosocial health unique to patient  Community Advisory Committee		

	Consultation	Involvement	Partnership and shared leadership
CONTINUUM OF ENGAGEMENT > CONTINUUM OF ENGAGEMENT > CONTINUUM OF ENGAGEMENT			
Ambulatory Care (BH)		Pool info sheet development Development of an ambulatory care brochure (in & out patient) Transport chair trial & selection	
BH Wide		Toronto Central LHIN and OpenLab's Patient Oriented Discharge Summary (PODS) initiative	
BH Wide		Patient and Family Advisors on Falls Flooring Project, Pressure Injury Steering, Falls Steering, Infection	
SHS Wide		Patient and Family Completion of Advanced Directive Documents	MAID (medical assistance in dying)
Infection Prevention & Control	Hand hygiene pamphlet re-design		
ORGANIZATIONAL DESIGN AND GOVERNANCE			
SHS Wide	NRC Picker Surveys	Patient Relations Process Human Rights & Health Equity	QIP 2015/16 Review with Patient and Family Advisors
		Accessibility for Ontarians with Disabilities Act Committee	
NICU J. MacKenzie		Family Advisory Council: Milk Bank Program, Biomedical Scanner Access	



**Bridgepoint  
Active Healthcare**

**Circle of Care**

**Lunenfeld-Tanenbaum  
Research Institute**

**Mount Sinai Hospital  
Joseph & Wolf Lebovic Health Complex**