



**TASK FORCE ON PATIENT AND FAMILY ENGAGEMENT
FOCUS ON HOSPITAL AND HEALTH SYSTEM LEVEL INTERVENTIONS (DAY 1)**

**North Carolina Institute of Medicine
630 Davis Drive, Suite 100
Morrisville, NC 27560
10:00 – 3:00
June 19, 2014
Annotated Agenda**

Goals for the Meeting: To identify evidence-based and best practices for engaging patients more actively in their own care at the hospital and health system levels (eg, through culture change, patient and family advisory councils, communications/operations changes. Note: This is the first meeting of two meetings devoted to this topic.)

10:00 – 10:15 WELCOME, INTRODUCTIONS, & INPUT

Kimly Blanton, MIS, MLS

Patient Advocate
Vidant Health
Co-chair

Melanie Bush, MPAff

Assistant Director, Policy and Regulatory Affairs
Division of Medical Assistance
North Carolina Department of Health and Human
Services
Co-Chair

Warren Newton, MD, MPH

Director, North Carolina AHEC Program
William B. Aycock Professor and Chair
Department of Family Medicine
University of North Carolina School of Medicine
Co-chair

10:15 – 10:30 OVERVIEW OF DAYS SESSION

Kimberly Alexander-Bratcher, MPH

Project Director and Research Associate
North Carolina Institute of Medicine

(Note: Ms. Alexander-Bratcher will remind the Task Force about what we covered in prior meetings, give a brief overview of the day's meeting, and remind the group what we will be covering in future meetings)

10:30 – 11:45

PATIENT AND FAMILY ADVISORY COUNCILS

FRAMING OVERVIEW

Sue Collier, MSN, RN, FABC

Performance Improvement Specialist

Patient-Family Engagement

North Carolina Quality Center/North Carolina Hospital Association

(Note: Sue Collier joined the North Carolina Quality Center April 1, 2013 as a Performance Improvement Specialist in Patient-Family Engagement. Prior to joining the NCQC, Ms. Collier was employed by Vidant Health for over 32 years. She began her career with Vidant Health as a staff nurse, head nurse and clinical specialist in Trauma/Surgical clinical services. Ms. Collier lead an innovative hospital-wide initiative in the early 90's designed to improve patient experiences across inpatient and outpatient settings and served as a corporate leader in the system's planning, marketing and strategic development division for over 14 years. Ms. Collier developed the corporation's first office of Patient-Family Experience and led the corporation's nationally recognized portfolio of change initiatives designed to create meaningful partnerships with patients and families. Her vision is to create and sustain patient-centric models of care delivery to improve the quality of life for people in NC.)

PANEL

Kimly Blanton, MIS, MLS

Patient Advocate

Vidant Health

(Note: Kim Blanton has experienced multiple ED and physician visits and hospital readmissions during the past decade due to a diagnosis of heart failure. Her experiences provide compelling examples of how vital patient and family engagement are to assuring safe, effective transitions of care. Her story highlights the criticality of physician and provider communications to reduce not only readmissions but to effect patient activation. Ms. Blanton has shared her expertise and perspectives with board leaders, state, and national organizations. She serves on a variety of teams at the state and national level and is actively engaged in designing, implementing, and evaluating healthcare services in partnership with healthcare providers. Ms. Blanton has a Masters in Information Sciences and a Masters in Library Sciences from North Carolina Central University.)

Amy Jones

Administrator

Office of Patient and Family Experience

Vidant Health

(Note: Amy Jones began her career in health care 30 years ago as a Respiratory Therapist at Vidant Medical Center and has led the development of several community-based programs for children with chronic diseases and their families including one of the first pediatric asthma programs in the country. Her professional work with children and their families throughout the continuum of care and her own personal experiences with the healthcare system led to her passion and commitment to patient and family engagement in care and decision-making. Ms. Jones was recognized as the North Carolina Respiratory Care Practitioner of the

Year and has spoken on the value of patient and family partnerships at national and international conferences. Ms. Jones currently serves as the Administrator for Vidant Health's Office of Patient and Family Experience.)

E. Benjamin Money, Jr. MPH

President & CEO

North Carolina Community Health Center Association

(Note: E. Benjamin Money, Jr., MPH joined the North Carolina Community Health Center Association in June 2001 and has served as Chief Executive Officer since December 2008. Mr. Money directs the Association's staff in providing training, technical assistance, and resource development, for all federally qualified health centers in North Carolina. Ben represents the interests of health centers before state and federal legislative and administrative entities. Ben holds a B.S. in health education and psychology from Springfield College in Massachusetts, and an MPH in public health from the University of North Carolina at Chapel Hill. His career spans over 30 years - with work in public health, community mental health, faith-based non-profits, and health care to the homeless programs.)

(Note: Panelists have been asked to give a brief overview and discuss 4 questions:

- 1) What has been their experience with PFACs?*
- 2) What do they think works best about them?*
- 3) What problems or challenges arise with them?*
- 4) If we wanted to expand them into more practices, hospitals and health systems, what else do we need to do?)*

11:45 – 12:15

LUNCH

12:15 – 1:45

PATIENT AND FAMILY ENGAGEMENT: CULTURE CHANGE

SMALL GROUP DISCUSSION

1:45 – 3:00

NEXT STEPS & FEEDBACK

Adam Zolotor, MD, DrPH

Vice President

North Carolina Institute of Medicine

(Note: Dr. Zolotor will lead a discussion to solicit ideas from the Task Force about possible recommendations to promote the use of evidence-based or promising practices at the hospital and health system levels to promote patient and family engagement. He will begin the discussion with a short recap of what we discussed in the patient and provider meetings to foster the discussion.)