



## Meeting Virtually

Several CAPS members, including **Marty Hatlie**, attended a twenty person “March” on Washington, DC in September. They joined in planting flags honoring many persons who had experienced medical error. Spend two minutes on a video about the event here: <https://youtu.be/cm4G9MFipkA> . To join the over 9000 persons who have attended the full **#Unite for Safe Care PSMF** offerings including a speech by former President Bill Clinton, go here: <https://youtu.be/fvzjYZRUB0> (Be sure to scroll to the point you would like to watch.)



**CAPS** also attended virtual Conference events including those presented by **NAHQ, PCORI, the IPFCC and PFCC Partners**. These were learning experiences both in the sense of the subject matter covered and how to attend a virtual long-form event. The events recorded sessions available for review later. I found attending “in-person” virtually helpful because we could participate in the real time chat.

My colleagues **Joan Gallegos** and **Jodi Hansen** and I presented a session at the **IPFCC Conference** that focused on Patient and Family Advisory Councils at the System or Organizational level. **CAPS** regularly seeks input from our Consumer Advisory Panel (CAP). Our thirty **CAPS CAP** members come from all over the country and all of our meetings, even prior to the COVID-19 world, were virtual. Persons attending our IPFCC session shared their concerns about holding virtual PFAC meetings. Helpful tips around attending virtual events include muting your device when not speaking. This limits interruptions from others in your environment. If you’re appearing on camera, try to adjust the view so it mostly captures you, not your ceiling. Avoid having a light source behind you, as that will make you harder to see. Consider turning off your camera if you have others in the room or need to leave briefly. These guidelines and others may be shared with PFAC members to improve your virtual meeting effectiveness.

**Marie Abraham** from the Institute for Patient and Family Centered Care shared that they found in a recent study that only 25% of PFACs use an agenda. Agenda are particularly important, I think, when you have a virtual meeting. Sending out an agenda or screen sharing an agenda will help guide your discussion and focus participant input.

While we addressed some of the issues around holding PFAC meetings virtually, I also recommend the work our colleagues Sheryl Chadwick, DeeJo Miller, Kathryn Taff, and Amanda Montalbano, at Children’s Mercy Hospital in Kansas City. Their excellent article, TeleBoard: The move to a virtual family advisory board, in the *Patient Experience Journal* (<https://pxjournal.org/journal/vol7/iss2/17/>) Besides detailing how they were able to engage PFAC members virtually, the authors also offer a good example of how to measure PFAC engagement and productivity.

### In this Newsletter, read on for:

- Our interview with **Chrissie Nadzam Blackburn, MHA Principal Advisor, Patient and Family Engagement University Hospitals Health System, Cleveland, Ohio.**
- We focus on Stroke and Sepsis and Mask wearing in the **Graphics Garden!**
- For an extraordinary list of links to COVID-19 resources, check out our **PIPSQC** shout out on page 5.

We’re all looking forward to a time when we may again meet in person! -**Lisa Morrise**

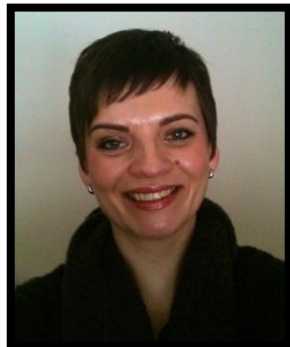
# Consumers Advancing Patient Safety

Consumers Advancing Patient Safety is a 501(c)(3) not-for-profit organization that envisions a partnership between consumers and providers to create global healthcare systems that are safe, compassionate and just. CAPS champions patient safety led by consumers in partnership and collaboration with providers.

October 2020



## Consumer Advocate Panel (CAPS CAP) Interview with Chrissie Blackburn



Consumers Advancing Patient Safety caught up with the inimitable **Chrissie Blackburn**, MHA, who works with twenty Patient and Family Partnership Councils (PFPCs) at **University Hospitals Health System** in northeast Ohio. Chrissie shared a little about the unique background and passion she brings to the work:

**CAPS:** When did you start your advocacy?

**Chrissie:** I think it really started the day my daughter was born in 2007. She had a number of issues related to STAR Syndrome, a one in a million genetic condition it turns out she shares with me! Her issues were significant enough to require immediate and regular intervention, including congenital chronic kidney disease.

I grew up on patient quality and safety, almost without knowing it. My Mom, Deborah Nadzam Melnyk, PhD, is now retired from that work. She has worked with both the Cleveland Clinic, starting their patient safety program, and the Joint Commission, where she was Vice President of performance measurement and the government contract director for Joint Commission Resources where she led one of the original Hospital Engagement Networks (HENS). Healthcare safety and advocacy were regular dinner time conversations. I chose, however, to pursue a career as an esthetician.

When my daughter was born, she was admitted to the Newborn Intensive Care Unit. I immediately began asking to see labs, labels, asking persons to wash their hands. Indeed, speaking up was second nature to me. My husband Chuck, a Marine, was stationed in San Diego when our daughter was born. We moved back to Cleveland on a humanitarian transfer to be close to family and to have our daughter's care at University Hospitals Rainbow Babies and Children's Hospital. Over the next four years, our daughter's needs were intense. My patient safety training came in handy. One time, for example, I knew to stop radiology from using contrast for a scan for our daughter, knowing that it could harm the kidneys. Life was steering me in a new direction. Within a two-month time period in 2011 I joined the University Hospitals' Rainbow Babies and Children's Patient and Family Partnership Council and started earning my master's degree in Healthcare Administration. I also talked with Marty Hatlie and started working with the PFE Network as part of the original CMS Partnership for Patients.

**CAPS:** How has your advocacy evolved?

**Chrissie:** Things really took off like a rocket after that two-month time period in 2011. Because of my national involvement, the staff liaison for the PFPC introduced me to the Chief Quality Officer. We met and because of my unique background, I could talk to him as a parent of a patient using executive language. Another important turning point was working with the Chief Nursing Officer to develop a new position for the organization where the qualification included being a patient or family member. I developed an understanding of the system from the inside out and the outside in. I could see how the system unknowingly creates challenges for patients and families. Through harnessing three key components: respect, language and relationships, we were able to advance patient and family centered care and improve outcomes in quality, safety and experience.

**CAPS:** What projects have you been involved in?

**Chrissie:** Some of the first projects I worked on with the former Chief Nursing Officer and former Chief Quality Officer was the development of education materials that demonstrated transparency around healthcare acquired conditions.

We helped patients and families understand what they could do to prevent harm and to know when they should and could speak up. We also worked on a system wide strategy for PFE, developing PFPCs in every hospital and leveraging those councils to infuse the patient and family voice into our organization.

Currently I am working with our Chief Clinical Transformation and Quality Officer to educate patients about Home Care Services and how discharge to home could be more advantageous to them than going to a Rehab or Skilled Nursing Facility.

I am trying to help mentor and develop our next generation of patient and family partners, both at the UH Hospitals and nationally. I am so excited to see some of our patient and family partners take on a greater role of advocating on the national stage.

**CAPS:** What would you recommend to persons who want to advocate for quality and safety?

**Chrissie:** First, I think patient and family advocates need to educate themselves. Consider getting the books the Quality and Safety officers have and using their language. Connect with other patient advocates. Also, know where your personal passion is within your experience. Remind yourself that when you go into a new area you need to assess your understanding of what is being discussed prior to taking a stand. My personal passion has been safety and communication at the bedside.

**CAPS:** What would you recommend health care systems do to improve quality and safety?

**Chrissie:** First and foremost, LISTEN. Then, own what you may be hearing. Absorb and share those messages from patients and families. Please do not be frightened or put off by what you hear. Patients and family members want to work with you. We both need to listen to each other. I'd also urge organizations to respect the patient language and stories. If you know what we are saying, but we don't use exactly the correct terminology, foster trust by showing your understanding instead of needing to correct us. Second, ASK patient family partners what they want to be involved in. Many times, I have been told staff or leaders are hesitant to ask our partners for too much of their time. When one of our partners heard this she simply said "Ask us. We are able to decide what we have time for and what we are interested in!"

**CAPS:** What are your future plans?

**Chrissie:** I am planning to pursue a Doctorate in Behavioral Health Management. I want to expand my understanding of Value Based Care, Patient Engagement, Patient Managed Health and the Quadruple AIM. I want to partner with leaders to enhance the patient and family voice in point of care and improvement efforts.

Thanks Chrissie! Contact Chrissie Blackburn at [Chrissie.Blackburn@UHospitals.org](mailto:Chrissie.Blackburn@UHospitals.org), 216-844-3370. Here is a link to more information about Patient and Family Advisory Councils at UH Hospitals: <https://www.uhospitals.org/patients-and-visitors/patient-and-family-partnership-councils>

These are the videos in a series of COVID-19: Patients, Families and Providers in Conversation. These videos are a collaboration of three organizations:

Consumer Advancing Patient Safety (CAPS), Project Patient Care (PPC) and Healthcare and Patient Partnership Institute (H2Pi).



You can view all of these videos on the Consumers Advancing Patient Safety YouTube Channel. Please go the link below and be sure to hit subscribe **and** notify so you will know when a new, relevant video has been uploaded!

<https://www.youtube.com/channel/UC7f7J8ynAwpDQpJWQX9mjQQ>

- **New! A Physician/Patient point of view on the importance of your continued care.** – a conversation with Dr. George Bakris
- **Preparing for a Hospital Visit** – a conversation with Rosie Bartels
- **Learning from COVID-19 Patients** – a conversation with Josh Weissburg
- **Elective Procedures in Hospitals** – a conversation with Kellie Goodson
- **The Important Role of Telehealth in Mental Health** – a conversation with Wendy Hayum-Gross
- **Health Equity During Covid-19** – a conversation with Ron Wyatt, MD, MHA, IHI Fellow
- **Finding Hope and Meaning through stories** – an introduction to stories with Tracy Granzky and MedStar
- **How has the COVID-19 Pandemic affected you personally** – the first of several conversation videos with Helen Haskell, Crystal Morales, Josh Weissburg, Vonda Vaden-Bates, Tim McDonald, MD, Pat Merryweather-Arges, Steve Burrows, Margo Burrows, and David Mayer, MD
- **What stories have you heard or experienced that are COVID related that we can't forget?**
- **What technology or innovations look transformative for the future as a result of COVID-19?**
- **What will this teach us for the future of healthcare?**
- **COVID-19 Testing** – a conversation with Moira P. Larson, MD, MBA
- **Long Term Care Facilities Part One** – a conversation with Pat Merryweather-Arges
- **Long Term Care Facilities Part Two** – a conversation with Dr. Swati Gaur

Consumers Advancing Patient Safety often partners with other organizations seeking to improve Quality and Safety. When possible, we support their efforts here:

On September 14<sup>th</sup> the **Institute for Healthcare Improvement (IHI)** together with the **Agency for Healthcare Research and Quality (AHRQ)** published [\*Safer Together: A National Action Plan to Advance Patient Safety \(NAP\)\*](#) which sets forth 17 recommendations for achieving safer care and reducing harm to patients and caregivers. The **NAP** envisions a coordinated, proactive strategy with the aspirational goal of zero preventable harm, implemented through public-private partnership in which risks are anticipated and systemwide safety structures and processes are applied across the entire healthcare continuum among all stakeholders.

The **National Action Plan 17** focus on four foundational and interdependent priority areas:

- Culture, Leadership, and Governance
- Patient and Family Engagement
- Workforce Safety
- Learning Systems

Eliminating inequities at the point of care is also a prominent theme in the **NAP**, which was released together with a *Self-Assessment Tool* and an *Implementation Resource Guide*. **CAPS** was represented on the National Steering Committee that produced the plan by **CAPS President Helen Haskell** and **Co-founder Marty Hatlie**. **The Hospital Improvement Innovation Network (HIIN)** in which CAPS has been active is cited as an exemplar of an effective Learning System. [Five guides produced by CAPS](#) to implement the Person and Family Engagement (PFE) metrics used by the HIINs are listed as key implementation resources.

###

**The Paediatric International Patient Safety and Quality Community (PIPSQC)** curated a large list of resources to explore relative to COVID-19. This is the most comprehensive list we have seen. Find it here:

<http://www.pipsqc.org/RESOURCES/COVID-19-AND-PATIENT-SAFETY> . The resources are divided into these topics:

- Patient Safety
- Pediatric Patient Safety
- Neonatal Patient Safety
- Covid-19 and Collateral Damage
- Covid-19 and Collateral Damage to Children
- Covid-19 and Country Resources
- Covid-19 and Diagnostic Safety
- Covid-19 and Emergency Safety Care
- Covid-19 and Equity
- Covid-19 and Evidence Based Care
- Covid-19 and Health and Worker Safety
- Covid-19 and Human Factors
- Covid-19 and the Infodemic

- Covid-19 and Information Technology
- Covid-19 and Long-Term Care
- Covid-19 and Medication Safety
- Covid-19 and Mortality
- Covid-19 and Outpatient Care
- Covid-19 and Patient and Family Centered Care
- Covid-19 and Personal Protective Equipment (PPE)
- Covid-19 and Quality Improvement
- Covid-19 and School Reopening
- Covid-19 and Surge Capacity
- Covid-19 and Survivorship

And, these resource pages:

#### **COVID-19 and Patient Safety**

[AGENAS - Call for good practice - Focus Emergenza Covid - 19](#)

[AHRQ - COVID-19 Resources](#)

[AHRQ Patient Safety Network \(PSNet\) - Topics - COVID-19](#)

[APSF - COVID-19 Anesthesia Resource Center](#)

[ASPR TRACIE - Novel Coronavirus Resources](#)

[CDC - Information for Healthcare Professionals about COVID-19](#)

[CEC - COVID-19 Infection Prevention and Control - Resources for health and other workers in NSW](#)

[CEC - Safety Fundamentals to support teams during COVID-19](#)

[CIEHF - COVID-19 Human Factors Response](#)

[IHI - COVID-19 Guidance and Resources](#)

[ISQua - COVID-19 Information and Resources](#)

[Johns Hopkins - Coronavirus Resource Center](#)

[NAM - COVID-19 Responses & Resources](#)

[National COVID-19 Clinical Evidence Taskforce](#)

[NIH - COVID-19](#)

[Patient Safety Movement Foundation \(PSMF\) - COVID-19 Resources for Clinicians](#)

[Patient Safety Movement Foundation \(PSMF\) - COVID-19 Resources for Hospitals](#)

[PreventEpidemics.org - COVID-19 Resource Library](#)

[UN - COVID-19 Response](#)

[WHO - COVID-19 - Country & Technical Guidance](#)

[WHO - Patient Safety - World Patient Safety Day](#)

[WHO - World Patient Safety Day - Health Worker Safety: A Priority for Patient Safety](#)

#### **COVID-19 and Pediatric Patient Safety**

[AAP - COVID-19: Overview & Evaluation - Pediatric Collection](#)

[AAP - Critical Updates on COVID-19](#)

[AAP - SONPM National Registry for Surveillance and Epidemiology of Perinatal COVID-19 Infection](#)

[CHA - COVID-19 Resources for Pediatric Educators](#)

[CHA - COVID-19 Resource and Updates](#)

[Children's Hospitals' Solutions for Patient Safety \(SPS\) - Hospital Resources](#)

[Coronavirus in Kids \(COVKID\) Tracking and Education Project](#)

[DFTB - COVID Resources](#)

[EAP - COVID-19 - National and International Guidelines](#)

[EMSC - COVID-19](#)

[EMSC - COVID-19 - Hospital Pediatric Preparedness](#)

[EMSC - National Pediatric Readiness Project - Readiness Toolkit](#)

[EMSC - Pediatric Disaster Preparedness Quality Collaborative \(PDPQC\)](#)

[EMSC - Pediatric Disaster Preparedness Toolkit](#)

[ESPNIC - COVID-19 Outbreak - Recommendations](#)

[Healthy Newborn Network \(HNN\) - COVID-19 Interim Guidance](#)

[Melbourne Children's - COVID-19 kids research evidence update](#)

[National Pediatric Disaster Coalition \(NPDC\) - Resources](#)

[OPENPediatrics - COVID-19](#)

[PIPSQC - COVID-19 and Children](#)

[Pediatric Overflow Planning Contingency Response Network \(POPCoRN\) - Health System Operations](#)

[PMNCH compendium of COVID-19 related partner resources on women's, children's and adolescents' health](#)

[RCPCH - COVID-19](#)

[Save the Children - COVID-19](#)

[Save the Children - COVID-19 Information and Guidance](#)

[SCCM - COVID-19 Rapid Resource Center - Category: Pediatrics](#)

[UNICEF - COVID-19 resources for policymakers and front-line workers](#)

[UNICEF - Data - COVID-19 and Children](#)

[UNICEF - Maternal, newborn and child survival](#)

[UNICEF - Quality of Care](#)

[WFPICCS - COVID-19 Resources](#)

[WHO - Maternal, newborn, child and adolescent health](#)

[WHO - World Patient Safety Day](#)

[WHO - World Patient Safety Day 2020 - Campaign Page](#)

[World Vision - COVID-19 resource page](#)

## The Graphics Garden:

### 5 benefits of wearing a mask:

- 1 You can eat all the onion and garlic you want.
- 2 You save money on lipstick.
- 3 Who doesn't love accessorizing?
- 4 It brings out the color of your eyes.
- 5 It keeps you and the people around you safe.



**Spread knowledge. Save lives.**

### KNOW THE SIGNS OF STROKE

**B E F A S T**

**BALANCE**

**EYES**

**FACE**

**ARMS**

**SPEECH**

**TIME**



Call 911 immediately if you or someone else is having a suspected stroke.




When it comes to sepsis, remember  
**IT'S ABOUT TIME™**. Watch for:




-  **TEMPERATURE**  
higher or lower than normal
-  **INFECTION**  
may have signs and symptoms of infection
-  **MENTAL DECLINE**  
confused, sleepy, difficult to rouse
-  **EXTREMELY ILL**  
Severe pain, discomfort, shortness of breath

Watch for a combination of these symptoms. If you suspect sepsis, see a doctor urgently, CALL 911, or go to a hospital and say, **"I AM CONCERNED ABOUT SEPSIS."**

 **SEPSIS ALLIANCE**      [sepsis.org](http://sepsis.org)      ©2020 Sepsis Alliance



### Evolution of an infection to sepsis can be prevented by:

- Early detection of sepsis signs and symptoms**  

- Prompt seeking of medical care**  

- Prompt antimicrobial treatment and its reassessment**  


## Please visit:

Our web page at [www.patientsafety.org](http://www.patientsafety.org). Find resources, archived recordings a form to share your story or sign up for this newsletter!

And, please like our Facebook Page <https://www.facebook.com/patientsafety.org/?ref=bookmarks>.

Do you have information for the CAPS Newsletter?

Please send us information about what you are doing to Advance Patient Safety. Send it to [capspatientsafety@gmail.com](mailto:capspatientsafety@gmail.com)

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