

Family Centered Patient Advocacy: A Training Program

Helping Families Become Part of the Medical Team

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Introduction - This program will train family members and the friends of the patient to become part of the medical team and help develop the skills for partnership for the best possible outcome in care.

Training will follow the “*Family Centered Patient Advocacy Training Manual*,” developed by PULSE with generous funding from **Gilead Sciences Inc, Long Island Unitarian Universalist Fund, National Patient Safety Foundation, North Shore LIJ Health System and NY State Senator Kemp Hannon**. Participants included in the development of this program consist of local, national and world leaders in patient safety. The collaboration of medical professionals, community members, healthcare advocates and patient safety experts has made this educational tool the first of its kind in the country since 2005.

Background - According to a 1998 report by the Institute of Medicine, each year an estimated 44,000 to 98,000 people die in hospitals due to preventable medical errors¹ A 2004 report from Health Grades Inc., a healthcare quality ratings company based in Colorado, has put that number still higher at 195,000.² But even at the lowest estimate, more people die from medical mistakes in hospitals than from breast cancer, AIDS and motor vehicle accidents combined.

The Agency for Healthcare Research Quality (AHRQ) a department of U.S. Health and Human Services (www.ahrq.gov) reports that “*the single most important way you can help to prevent errors is to be an active member of your health care team. That means taking part in every decision about your health care. Research shows that patients who are more involved with their care tend to get better results*”.

In July 2006, The Institute of Medicine released another report that “medication errors are among the most common medical errors, harming at least 1.5 million people every year”³

The committee that wrote the July 2006 report recommended a series of actions for patients, health care organizations, government agencies, and pharmaceutical companies. The recommendations include steps to increase communication and improve interactions between health care professionals and patients, as well as steps patients should take to protect themselves.

Family members are expected to be a patient’s advocate. But, what exactly is the role of an advocate, and how can they be most effective, when the families own emotions can easily get in the way?

The Family Centered Patient Advocacy Training Program has been developed to include the family member or friend of a patient scheduled for surgery, diagnosed with a life changing ailment, suddenly injured or scheduled for an invasive procedure. This workshop has been developed to help empower the community or family member to understand their role as an advocate and partner to ensure the best possible outcome in the patients care.

A trained advocate can help:

- A patient’s compliance and reduce the chance of patient hospital readmission,
- Assist the patient in understanding the diagnosis, care plan and discharge instructions,
- Assist in reducing medical errors with training in policy and patient safety standards,

- Speed the recovery of a patient who has assistance from professional help at home, trained community members, family and friends.

Topics – Topics covered in this program are;

- Falls,
- Infections,
- Literacy,
- Medication management
- Surgery safety
- Critical Communication skills.

Supplies – Power point, Hand outs

Time Commitment –

- 1 hour, an introduction to patient safety.
- 2 hours covers the basic advocacy skills and communication.
- 3 hours will add role play and a pre/ post-test.
- An all-day class will include participation from local medical professionals.

Cost – TBD (Please call to discuss time commitment)

Instructors:

Charles E. Cal., MS, MBA, R.N., - Mr. Cal is the Director of Program Evaluation at the Krasnoff Quality Management Institute a division of North Shore-Long Island Jewish Health System and Adjunct Professor at New York Medical College, Valhalla, and Baruch College, New York City. He holds two Masters degrees, one in Nursing Administration and another in Business Management. His expertise is in the coordination and development of quality management curricula. He has held numerous positions within the NS-LIJHS and at present is on various professional organizations within healthcare. Mr. Cal is the Vice-President and Chairman of the Board of PULSE of NY.

Ilene Corina: Voted one of Modern Healthcare's 100 most powerful people in healthcare, Ilene Corina is a nationally recognized advocate and community health speaker for patient safety. She does bedside advocacy and blogs about her experiences. She is the president and founder of PULSE New York, a nonprofit, grassroots, community based patient safety organization. She has won numerous awards for her work and is on the board of The National Patient Safety Foundation and The Joint Commission and a graduate of the American Hospital Association Patient Safety Leadership Training. Corina has been teaching patient safety in the community since 1997 and lectures throughout the country at medical conferences and community groups about partnering for the best possible outcome.

Leslie Farrington, MD: Dr. Farrington has been an OB-GYN for over 20 years. Presently she sees patients on Long Island and has been an advocate for her own family on numerous occasions. Dr. Farrington was an advisor to PULSE for the development of the Family Centered Patient Advocacy Training. She has been studying non-violent communication and compassionate communication since 2008. Dr. Farrington is a Board Member of PULSE of NY.

1. <http://books.nap.edu/openbook.php?isbn=0309068371&page=1>
2. <http://www.medicalnewstoday.com/articles/11856.php>
3. <http://www8.nationalacademies.org/onpinews/newsitem.aspx?RecordID=11623>