PARTNERS IN HEALING:
INVITING FAMILY INTO THE
HEALTHCARE TEAM

Michelle Van De Graaff, RN BSN
Intermountain Healthcare
What is *Partners in Healing*®?

Voluntary program to:

- Engage patients and family as *partners* in hospital care
- Improve family communication with the healthcare team
- Incorporate patient and family preferences into care
- Increase efficiency and responsiveness
- Prepare patients and families to manage health at home
Kiribati
ORIGINAL PARTNERS IN HEALING PROGRAM
Original Partners in Healing
EXPLAINING THE PURPOSE

• We hope to help you learn how to do specific cares so that when you take your loved one home, you will feel comfortable with that transition.

• We wish to have you as a partner in care so that current needs and potential discharge needs of your loved one can be met more efficiently.

• We also want to partner with you to give and receive important information about your loved one.
# OPEN HEART SURGERY PATHWAY FOR RAPID RECOVERY PATIENTS AND FAMILIES

<table>
<thead>
<tr>
<th>ADmissions</th>
<th>INtensive Care</th>
<th>Day of surgery</th>
<th>NURSE</th>
<th>OTEOPA</th>
<th>RTSH xãY</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDICAL CAR</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>SURGERY</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>NURSE</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>DENTISTS</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>PAED</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>HTM</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>WARD RX</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>UPH CAM</td>
<td>Sx</td>
<td>Tx</td>
<td>Rx</td>
<td>Rx</td>
<td>Rx</td>
</tr>
</tbody>
</table>

**Intervention**
- Review of the operation note
- Evaluation of the patient's condition
- Preparation for discharge
- Follow-up with the patient's primary care physician
- Discharge planning
- Education for the patient and family

**Follow-up**
- Follow-up appointments with the primary care physician
- Follow-up with the surgeon
- Discharge instructions

**Supports**
- Emotional support
- Physical therapy
- Dietary counseling

**Medicine**
- Antibiotics
- Pain management
- Postoperative care

**Nutrition**
- Nutritional assessment
- Dietary advice
-_postoperative care

**Assessment**
- Vital signs
- Oxygen saturation
- Pain assessment

**Interventions**
- Pain management
- Oxygen therapy
- Physical therapy

**Education**
- Discharge instructions
- Home care instructions
- Follow-up appointments

**Exclusions**
- Pre-existing conditions
- Allergies
- Drug interactions

**Specialty**
- Cardiology
- Pulmonology
- Nephrology

**Professional**
- Cardiac surgeon
- ICU nurse
- Anesthesiologist
- Respiratory therapist

**Resources**
- Intermountain Healthcare
- Patient education materials
- Support groups

**Conclusion**
- The patient's rapid recovery pathway
- Discharge planning
- Follow-up appointments

**Details**
- Timeframe
- Specific interventions
- Nurse involvement
STERNAL PRECAUTIONS FOLLOWING OPEN HEART SURGERY

Sternal Precautions Following Open Heart Surgery

After open heart surgery it is important for patients to follow several guidelines to protect the incision on their chest. We call these sternal precautions.

To get to your heart, your surgeon needed to make a cut on your chest and also cut through the breast plate bone (sternum). When finished, the surgeon closed the sternum with wire and also closed the skin.

The purpose of sternal precautions is to minimize any potential harm to the incision/bone to allow for maximum healing. These are to be followed for 6 to 12 weeks, as people heal at different rates. Your doctor will say when you no longer need to follow these precautions.

- Keep arms close to body
- Avoid overhead reaching
- Avoid reaching behind you
- Avoid pushing or pulling using arms
- No lifting more than 10 pounds
- No Driving

These precautions may require a change in lifestyle for a short period of time. Get assistance from others as needed for activities such as getting out of bed, standing from a chair, dressing, bathing, driving, lifting small children or pets, vacuuming, and getting things out of high cupboards. Once you are stronger and have properly healed, you will be able to perform these types of activities independently.
KEY INGREDIENTS FOR
HEALTHY LUNGS AFTER SURGERY

Breathing Exercises

Every Two Hours

HUG COUGH

Out Of Bed In The Chair
HOW TO APPLY TED HOSE
## Sample Checklist

**Partners in Healing**

### Checklist After Surgery

- Deep breathe with Intermountain humidifier every 2 hours while awake.
- Dough with head pillow every 2 hours while awake.
- Get up to the chair (or needs), stand up and call for help as needed.
- Asks in hip belt (cardio rehab will contact you).
- Oxygen needs (check daily) before surgery, then with some real-time as needed.
- Change and needs (T.E.A) twice daily.
- Place compression boots while in bed (if we "like"
- Get warm 
- Empty urine and vomit 
- Bath and comb (yellow or red) 
- Change 
- Get help with all activities, call for help with all equipment.

### Intermountain Healthcare
**OLD CHECKLIST**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>TURNOVER</th>
<th>CHAIR</th>
<th>MARK</th>
<th>FLUIDS</th>
<th>LURINE</th>
<th>TID</th>
<th>MEDS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>8:00</td>
<td>am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9:00</td>
<td>am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10:00</td>
<td>am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>11:00</td>
<td>am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>12:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8:00</td>
<td>pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Deep breathe with incentive Spriometer every 2 hours as needed
- Cough with bent knee every 2 hours as needed
- Get up to the chair for needs 3 times a day (sit for help as needed)
- Walk in the hall (Cardiac Rehab will contact you)
- Dietary needs (clarify daily dietary restrictions with nurse and assist as needed)
- Change and wash TCO hair daily
- Place commode over sit while a bed (if no TID)
- Set alarm blankets as needed
- Empty urine and wipe mouth (in ml) and color (yellow or amber) and character (clear or cloudy)
- Wear gloves as needed
- Underbed fall risk prevention
- Before and after activity, call for help with all equipment (catheter, IV pole, catheter, oxygen, etc.)
Partners in Healing®

Poster, Brochure and Video in the TICU Waiting Room
PARTNERS IN HEALING SURVEY

1. The partners in Healing program greatly enhanced our transition to home.
2. I would highly recommend this program.
3. Please write your general suggestions or concerns below.

Rating Scale: 1-5 (5 completely agree, 1 completely disagree)
PARTNERS IN HEALING SURVEY RESULTS

1. The Partners in Healing program greatly enhanced our transition to home.
   • 1 = 2 responses
   • 2 = 1 response
   • 3 = 6 responses
   • 4 = 23 responses (22%)
   • 5 = 74 responses (70%)

   97/106 = 92% of respondents rated it a 4 or 5

2. I would highly recommend this program to other patients and families.
   • 1 = 1 response
   • 2 = 0 responses
   • 3 = 5 responses
   • 4 = 6 responses
   • 5 = 94 responses (89%)

   100/106 = 94% of respondents rated it a 4 or 5
POSITIVE PERCEPTION OF PROGRAM

• “We (wife and I) thank you for allowing us the dignity to be part of each other’s lives.”

• “I have participated in this program twice in the past 8 months and would highly recommend it to anyone. It really distinguishes IMC as a facility for total care.”
"The opportunity to assist the medical team by bringing drinks and warm blankets to the patient made him feel much more comfortable and me feeling like I contributed to his healing."

"I loved it because I could get things for my husband without waiting."
INCREASE FEELING OF EMPOWERMENT AND CONFIDENCE

• “Partners in Healing empowered me during such a difficult time. It also allowed my husband to recover faster…”

• “Also, I felt I was really helping and useful rather than just “sitting and waiting” all the time. The nurses and CNAs treated me like a true partner.”
PARTICIPANTS STRONGLY RECOMMEND THE PROGRAM

• “I think this should be mandatory rather than optional.”

• “It would be good to give this to family at the beginning so they know what is expected during recovery. I got it the day before dismissal.”
Partners in Healing® – Clinical Outcomes Study
September 2008–October 2016

• Retrospective review of thoracic surgery patients:
  • 465 participants in Partners in Healing, 200 were matched with control patients
  • Controls exactly matched by surgical procedure, age, attending surgeon, year of procedure
  • *Reduction in 30 day all-cause readmissions*

- Coronary bypass
- Open valve repair or replacement
- Pericardial window
- Thoracotomies
- Video assisted thoracotomies
- LVAD implantations
- Heart transplants
- Ascending aortic aneurysm repairs
- Esophagogastrectomies
- Esophageal repairs
- Sympathectomies
- Pectus excavatum repair
Glen and Lori Clayburn
HISTORICAL APPROACHES

• Relatives/family members should (mostly) stay out of the ICU because they may:
  • Distract nurses or physicians
  • Agitate the patient
  • Bother other patients
  • Hurt themselves, emotionally or physically
  • Dislodge equipment and/or hurt the patients
  • Decrease work satisfaction for nurses, contribute to burnout and high turnover
DEHUMANIZATION
PROBLEMS FOR PATIENTS

• Patients experience anxiety, depression, traumatic stress (both acute and post-acute)
• They also experience powerlessness and learned helplessness
• They also experience dehumanization
• Being separated from loved ones makes the distress worse
PROBLEMS FOR FAMILIES

• Families experience anxiety, depression, traumatic stress (both acute and post-acute): PICS-F
• They also experience powerlessness and learned helplessness
• Being excluded and made to feel more powerless may make the stress of the ICU even worse

Recognizing, Naming, and Measuring a Family Intensive Care Unit Syndrome (PICS-F)

Giora Netzer¹,² and Donald R. Sullivan³,⁴

PICS IS COMMON

• More than a third of family members have PICS-F

• Complicated bereavement is common

• Probably two-thirds of patients have PICS-P; perhaps half have psychological distress
LEARNED HELPLESSNESS IS COMMON

• About half of ICU families have it
Humanizing the Patient

- Relatives are often *the world authorities* on the humanity of the individual patients
- The humanity of the patient is often threatened in the ICU
  - They are confused or unconscious
  - Often unable to manage their own waste
  - ICU procedures are painful and often disfiguring
- Relatives can rehumanize patients for clinicians
GOALS

• Build real collaboration
• Humanize patients and families
• Help relatives have a sense of control
• Avoid needless anxiety related to arbitrary exclusion
• Allow loved ones to calm and reassure the patient
“FACILITATED SENSEMAKING”

- Judy Davidson’s concept
- Give families tasks to do, so that they can feel a little bit of control and “make sense” of the crisis

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal care/healing</td>
<td>Applying lip balm, giving a hand and/or foot massage, assisting in passive range-of-motion exercises, praying if spiritual assessment indicates prayer is appropriate, engaging in cognitive exercises with cards, dominos, or word search puzzles</td>
</tr>
<tr>
<td>Bring normalcy into the room</td>
<td>Reading aloud, talking about daily events, bringing in cards/pictures from home</td>
</tr>
</tbody>
</table>

* These activities are primarily meant to give a patient's family members purpose while they visit and suggest actions to help them define their new roles. Involvement in cognitive exercises that use familiar tools provides a means to personally gauge a patient's progress toward recovery.
How does Partners in Healing® work?

1. Admit packet
2. Activity checklist
3. Tour of unit
SUPPLY ROOM DOOR SIGNS (BLANKETS, FOOD)
Partners in Healing

DOOR MAGNET
STICKERS
## Participation Log

---

<table>
<thead>
<tr>
<th>Partners in Healing Weekly Participation Log</th>
<th>Unit: __________________________</th>
</tr>
</thead>
</table>

**Note:** Each Monday, please email the previous week’s log to partnersinhealing@email.org and include PHI in sol subject line.

<table>
<thead>
<tr>
<th>Date</th>
<th>Patient Name</th>
<th>Medical Record #</th>
<th>Room #</th>
<th>Nurse Name</th>
<th>Partner Names</th>
<th>Comments / Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

---

---
Benefits to the Nursing Staff

• “It takes some of the burden off of us.”
• “It helps assure the patient is moving forward.
• “The family knows the patient better than we do.”
• “The Partners in Healing patients don’t call you as much.”
• “They go home knowing how to help. They get their questions answered while they are in the hospital.”
• “They learn when to call the doctor after they get home and probably avoid a readmission.”
Videos and Transcriptions

YouTube Channel Name is Partners in Healing ACVU

Chapter 1
https://youtu.be/sUp8Rosj1Lg

Chapter 2
https://youtu.be/fVZkkpQmHtM

Chapter 3
https://youtu.be/K_qtdT4ANRc

Chapter 4
https://youtu.be/0hykWMGLcAs

Chapter 5
https://youtu.be/9es6vdAE1Y4
Joey & Nola Camaliche's Service Excellence Story
Questions?

Email your experiences/feedback
michelle.vandegraaff@imail.org