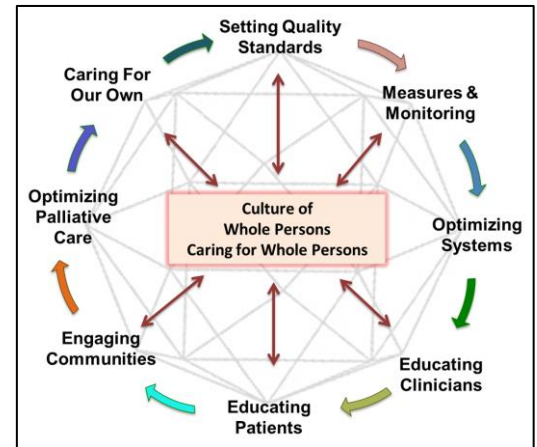


## A Strategic Approach to Transforming Health Care

### *Making Whole Persons Caring for Whole Persons the New Normal*

Providence's [Institute for Human Caring](#) seeks to make health care more relational and less transactional and improve lives in the communities we serve. We are clinicians, educators, and health systems experts who believe everyone deserves the best care possible for physical health as well as for emotional, social and spiritual well-being. The Institute's goal: change health care culture to make whole persons caring for whole persons and their loved ones the new normal.

The Institute's non-incremental change strategy includes multiple, mutually-reinforcing components to help re-set expectations among all stakeholders and corresponding patterns of practice in a manner that is consistent with Providence's Mission, Vision, and Core Values.



**Non-Incremental Change**

#### Setting Quality Standards

The Institute is defining expectations for whole persons caring for whole persons that are built on published guidelines and best practices of national specialty organizations and quality standards. Our quality-improvement dashboards monitor the frequencies of practices related to advance care planning, goals-of-care conversations, symptom management, and referrals to palliative care and hospice care.

#### Measures and Monitoring

Progress toward these best practices and quality expectations is tracked by corresponding measures of patient and family experience, provider satisfaction, and health care services value. We monitor key processes and health outcomes related to advance care planning and goals-of-care conversations, physician utilization of our Caring for Whole Persons courses and tools and patients' outcomes, as well as access to quality and financial impacts of specialized palliative care.

#### Optimizing Systems

The Institute is streamlining provider workflows and processes so clinicians can readily implement caring for whole person approaches with their patients. For example, the Institute designed new features within Epic for clinicians to record advance care planning and goals-of-care conversations in distinct note types, and within a "one-stop" page to access those notes, which also includes a patient's CPR status, advance directive, and POLST documents. Innovative short-form advance directives and the ability of providers to document patients' verbal designation of a Trusted Decision Maker help "make the right way the easy way." These designs in Epic are being expanded to other electronic health record systems that are used across Providence, including Meditech, Allscripts, Kinnser, and Aria.

#### Educating Providers

The Institute's provider education portfolio is focused on clinical communication, goals-of-care clarification, and shared decision-making. It also emphasizes symptom management (including safe use of opioids) as well as avoidance of harms. A critical goal is to build the capacity and skillset of caregivers who treat people who are seriously ill or nearing the end of life. Using the Serious Illness Conversation Guide © (developed by colleagues at Ariadne Labs), the Institute's Advanced Communication Training (ACT) enables clinicians to build skills for asking questions needed to design a highly personalized plan of care for each patient. The ACT program also introduces clinicians to the online CME and CEU modules of the [Center to Advance Palliative Care](#) (CAPC). The Institute secured

a system-wide membership with CAPC, making these valuable continuing education programs available at no cost to PSJH providers.

### **Educating Patients**

We partner with other organizations to make a variety of educational tools available. These resources facilitate shared decision-making and empower patients to make sure that their medical care is aligned with their values, preferences, and priorities. These tools include videos by [ACP Decisions©](#) and conversation guides in our [Advance Directive Toolkits](#).

### **Engaging Communities**

Communities are under-recognized, untapped resources for improving care and quality of life for frail elders, seriously ill people, and loved ones. ACP Decisions©, The Conversation Project, and Honoring Choices are valuable resources to encourage and support community-based conversations. In collaboration with its members, we promote the use of these tools in faith communities, senior centers, workplaces, and high schools, among others. Additionally, we are part of the statewide Caring for Whole Persons Initiative (CWPI) between the California Catholic Conference and the Alliance of Catholic Healthcare. The CWPI brings caring for whole persons to Catholic health systems and their hospitals and implements caring for whole person programs in dioceses and parishes.

### **Optimizing Palliative Care**

We are partnering with palliative care (PC) and executive leadership across Providence to develop a national model for high quality PC. We are working to ensure that patients and their loved ones have consistent access to palliative care expertise. The Institute's Palliative Practice Group is building sustainable financial models, applying sophisticated measurement methodologies, and exploring innovative care delivery models, such as TelePC, to meet people's needs. Providence leadership endorsed the Institute's financial impact analyses, as well as recommended minimum specifications for the composition of the interdisciplinary PC teams. The Institute is leading a system-wide effort to enhance PC across the system. The initiative is supported by detailed analyses showing positive financial impact and bed use for patients who receive early PC consultation, a workforce inventory of the PC service line for each hospital, and monthly operational snapshots that monitor a) percentage of hospitalized adults who receive PC consultations, b) the proportion of those occurring within the first hospital day, c) levels of unmet need (characterized by patients with  $\geq 4$  co-morbidities who were not seen by PC during their hospitalization) and d) operational steps employed to enhance PC operations in each hospital.

### **Caring for Our Own**

Storytelling and listening have proven clinical value for patients and caregivers. In collaboration with StoryCorps, the Institute's [Hear Me Now](#) program records stories from caregivers, patients and communities to advance and foster a culture of listening across Providence. The Institute curates an extensive digital library of these stories – edited versions are on the [Hear Me Now](#) website; full recordings are archived at the American Folklife Center at the Library of Congress. The Institute developed Face Behind the Mask badges for caregivers, to show patients what their providers look like when not in full personal protective equipment. Providence also has adopted Institute proposals for employee health plan incentives based on advance care planning that have become national models.

### **A Culture of Whole Persons Caring for Whole Persons**

The Institute's [Get to Know Me](#) posters enhance whole persons caring for whole persons for hospitalized patients, including those in the ICU who are too sick to communicate with their doctors and nurses. They enable patients and loved ones to visually remind all who enter a hospital room that the person who is ill is a whole person – with desires, needs, interests, accomplishments and people whom he or she loves. Additionally, the Institute regularly sponsors and participates in cultural events because arts celebrate the richness of life even in the most difficult times.