INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

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Envisioning Your Ideal Clinic (or Patient Experience, Service, Program): A Team Exercise

This is a great activity for an interdisciplinary group (including patient and family advisors) to do together prior to starting a formal quality improvement team to develop and design a new program, create a Patient-Centered Medical Home, or redesign current services. It can also be done as part of a larger group or learning collaborative with multiple individual teams envisioning their own ideal clinic. It will be helpful if the group has been oriented to the general concepts around the purpose for the team and/or improvement effort prior to completing this exercise. This exercise takes about 45-60 minutes to complete depending on the size of the group. It will take longer if there are many teams completing the activity.

You will need a large sheet of paper, can be flipchart paper, and large colorful pens or markers. (Avoid dry erase pens as their odor can cause headaches.) If this exercise is being done with a group with multiple teams participating, have enough supplies of markers and paper for each team.

Instructions:

You can start with a summary of the Core Concepts of Patient- and Family-Centered Care.

Respect and Dignity. Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs, and cultural backgrounds are incorporated into the planning and delivery of care.

Information Sharing. Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete, and accurate information in order to effectively participate in care and decision-making.

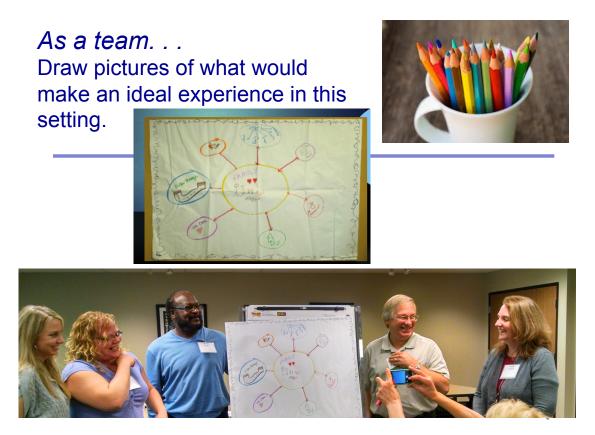
Participation in Care and Decision-Making. Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.

Collaboration. Patients, families, health care practitioners, and health care leaders collaborate in policy and program development, implementation, and evaluation; in facility design; and in professional education, as well as in the delivery of care.

Either have your team think ahead about the questions below or have each person answer question #1 and then do a quick brainstorm around question #2. The example below uses the ideal clinic as the point of focus for the questions. You could just as easily ask about a specific service or program you are designing or working to improve (e.g., registration process, medication reconciliation process, program for self-management of chronic conditions).

- Question 1: "What do you like about your clinic? How does your clinic 'live out the values' of mutual respect/dignity for all, sharing information in an affirming way, participation in decision-making and collaboration on improving the care experience?"
- Question 2: "What would an ideal clinic be like? Take a few minutes to consider this and then spend time brainstorming together."

Give the team about 15-20 minutes to do the exercise. Observe the interactions of the group members. Encourage everyone to draw and share their ideas and perspectives. Ensure the advisors are involved in the activity.



When everyone is finished, ask the group to share what they have envisioned. If this exercise is done in a large group setting with multiple teams, ask each team to select someone to share the drawing and their team's thoughts about the ideal with the group.

Thank the group for their participation. Advise them to hold on to their drawings or take a photo of their drawing as a reminder of their vision.

<u>Tips:</u>

- Take pictures of the teams around their picture to document this effort. If possible, encourage them to share the results with others involved in the improvement effort.
- Guided facilitation is sometimes needed in situations where one or two people are dominating the conversation or drawing. It is critical everyone has permission to actively contribute and be co-creators in the drawing of the ideal.

Provided by the Institute for Patient- and Family-Centered Care (www.ipfcc.org)