

WEBINAR

# LET'S TALK ABOUT PERSON-CENTERED CARE DURING PANDEMICS

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Wednesday, March 18, 2020, 11:00 a.m. EDT



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INTERNATIONAL



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# Introductions



Susan Frampton  
President



Sara Guastello  
Vice President,  
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Jim Kinsey  
Vice President, Engagement  
Strategies and Continuum of  
Care Services



Rhonda Williams  
Vice President,  
Engagement Strategies

"Every hand that we don't shake must become a phone call that we place."

"Every embrace that we avoid must become a verbal expression of warmth and concern."

"Every inch and every foot that we physically place between ourselves and another must become a thought as to how we might be of help to that other, should the need arise."

~ Rabbi Yosef Kanefsky



# Goals for Today

1

Provide practical strategies about how your organizations can respond to the COVID-19 outbreak in way that is consistent with your person-centered culture.

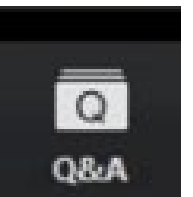
2

Share resources you can use. (Slides and recording will be available from [www.planetree.org](http://www.planetree.org))

3

Hear your concerns. Answer your questions.

Use the Q&A feature to submit questions.



- We are not experts in infectious disease and pandemics.
- Our comments are based on current knowledge and recommendations as of today.
- None of Planetree's recommendations are meant to override your local regulations and requirements.





# Priority #1: Credible, Reliable Information



<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>



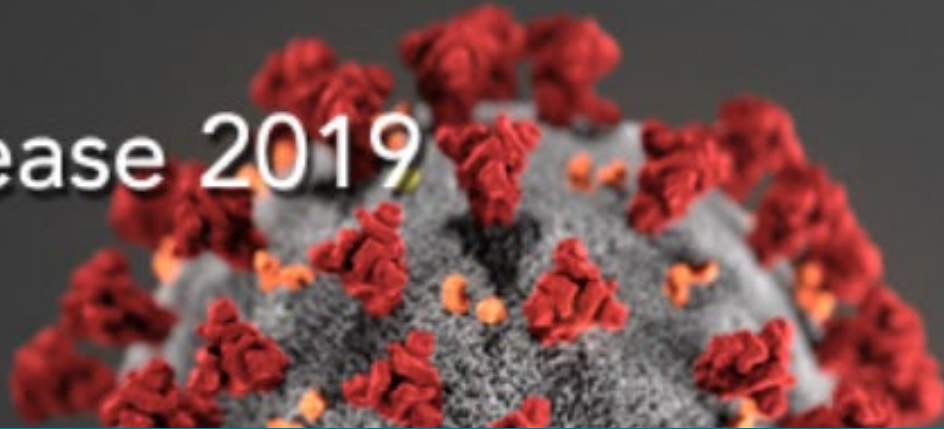
Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>



CDC EPIC Webinar on Wednesday, March 18 at 1 p.m. ET

Coronavirus Disease 2019  
(COVID-19)



[CDC.gov/COVID19](https://www.cdc.gov/COVID19)

Answering 20 Questions about COVID-19

Watch on Facebook: You can participate in this live webinar through the [CDC Emergency Preparedness and Response Facebook](#) page on March 18 at 1 p.m. ET.



# The constants of person-centered care





# Making caring visible

A word cloud centered on the word "EMPATHY" in large, bold, teal letters. Surrounding it are various related terms in smaller, bold, red letters, including "HEAR", "COMPASSION", "CONNECT", "LISTENING", "FEELINGS", "COMMUNICATION", "COMPASSIONATE", "HEARING", "SPEAK", "REQUEST", "GIVING", "DIALOGUE", "INSIGHT", "PRESENCE", "I HEAR YOU MEETING", "CONSCIOUSNESS", "EMOTIONAL RESPONSIVE", "NEEDS", "PRESENT WARMTH", "SAFETY", "HEART", "MUTUAL AWARENESS", "ALIVE", "EMPATHIC", "COMMUNION", "UNDERSTANDING", "SELF-EMPATHY", "AUTHENTICITY", "SOUL", "RELATIONSHIP", "EMOTION UNDERSTAND", and "INTERPERSONAL".



## Three Essential Elements for Effectively Showing Empathy

1. Recognize
2. Communicate
3. Support



# In practice

<b>Scenario</b>	<b>Volunteers are being asked to reduce services they are providing to the hospital and patients.</b>
<b>Recognize</b>	Volunteers: Isolated, Frustrated, Angry You: Frustrated, Sad, Compassion
<b>Communicate</b>	It is hard to describe in words how important our volunteers are to us.  We are in the midst of times requiring us to take unprecedented action, including temporarily reducing volunteer support in the hospital.
<b>Support</b>	We will take every opportunity to communicate updates with you and we very much look forward to resuming the exceptional support you provide for our team.  Are there any questions I can answer to support you right now?



# Evidence-Based Recommendations: VISITATION

## ***Consider these adaptations to patient-directed visitation:***

- Routine screening of visitors for symptoms
- Expectation-setting and education around hand hygiene and cough etiquette for visitors
- Limiting or restricting visitation in instances where it is clinically contraindicated

## ***Be mindful of:***

- The impact of isolation on patients and residents in long-term care
- Allowances for flexibility in special cases, such as end-of-life
- Proactive communication strategies – explain the “why.”



# Sample Language: Visitation Policy

## ATTENTION Caregivers and Visitors

To help prevent the transmission of COVID-19, Griffin Health is taking temporary precautions to protect visitors, caregivers, and the community. All visitors will be screened prior to entry for your safety and the safety of your loved ones. The screening process includes information about symptoms of respiratory illness, and a touch-free thermometer scan to determine body temperature. Based on screening results, visitation and entry may be restricted. We appreciate your cooperation during this time of heightened concern.

### Entry and Visitation Guidelines:

- Visitors, patients, and caregivers may enter through our main entrance only.
- One visitor per patient at a time with additional consideration given in special circumstances such as patients at the end-of-life, pediatric patients and maternity patients in the Childbirth Center.
- Please remain in your loved one's room as much as possible and avoid other areas of the hospital.
- Individuals showing signs of COVID-19 symptoms (fever, cough, shortness of breath) will be asked to return home and are invited to connect with their loved ones through virtual means, such as Skype, FaceTime, or telephone calls.





# Sample Language: Visitation Policy

**We recommend that the following people not visit patients or receive visitors while hospitalized:**

- Those who are at increased risk of severe illness, including people over the age of 70, immunocompromised individuals, and individuals who live with or care for such people.
- Individuals who have tested positive for COVID-19 or are waiting for COVID-19 test results.

As indicated in Governor Lamont's Executive Order No. 7C, there is an increased risk of rapid spread of COVID-19 among people being treated in a communal setting. For this reason at this time, visitation will not be allowed on the CP South Inpatient Psychiatric Unit or in the Post Anesthesia Care Unit (Recovery Room). We suggest connecting with your loved ones through other means such as telephone calls. We will continue to assess these policies to ensure that they reflect the most current knowledge and support our long-standing commitment to person-centered care.



# Other Visiting Considerations

- Basing restrictions due to recency of large group interactions *versus* minimum age
- Active community spread *versus* containment
- Practical *versus* difficult to enforce restrictions
- Other special circumstances



# Making caring visible

Scenario	Visitor has screened positive with a slight fever upon coming to the hospital.
<b>Recognize</b>	Visitor: Angry, Victimized You: Cautious, Protective, Empathetic
<b>Communicate</b>	It sounds like you are very frustrated with not being able to see your Mom right now. We want to assure you that your loved one as well as all other patients are our top priority as we work to move through this situation together.
<b>Support</b>	We have identified a few options for virtual visits that may be helpful. Can I share these with you now?  Again, we deeply apologize for any inconvenience and thank you for your understanding.



## Team rounding and bedside shift change?

- Sharing information between patients and their care team remains essential, especially at this time. Taking recommended precautions to limit the spread of infection should protect patients and allow for rounding and bedside shift change to proceed. Limiting the number of team members and/or residents in acute care environments may be indicated. Continue to honor patient preferences.

## Volunteers?

- Many care facilities are temporarily suspending or reducing volunteer activities to limit potential exposure and based on local directives. Volunteer activities that don't involve patient contact, but support important functions in healthcare settings, are proceeding in some facilities. Reducing volunteer activity could place added burden on staff. Consider virtual volunteer opportunities.



## Activities of our Patient and Family Partner Council?

- It is important to continue to actively engage our PFPCs, as they are a resource that can be extremely helpful at this time, assisting us in spreading credible information to the community. Consider holding meetings virtually and using the meetings to educate members about the facts of COVID 19. Ask them to be a reliable source of information for friends and family members. Reassure them that things will return to a more normal state in the future.





# A Word about Certification

- For teams pursuing Person-Centered Care Certification, be assured that these temporary person-centered adaptations to current practices to respond to COVID-19 will not be barriers to Certification.
- *As always*, evaluations will focus on how you are maximizing access, involvement and engagement while balancing quality and safety – and complying with local mandates.



# The words we choose...

Create the construct for our experience:

Battle      “Hot One”      Frontline

Locked Down      “Chinese Virus”

Victim      We are at war!

Isolate      No Visitors



# Considerations in caring for the most vulnerable

## Reducing Loneliness: The Hidden Social Determinant

- Use technology: it can be very powerful.
- Leverage social media to communicate with families and friends.
- Assist staff in creating meaningful one to one interactions. (using social distancing)
- Find ways to connect multiple times through the day in lieu of group gatherings.
- Check on those individuals in bed frequently.
- Implement a phone bank or call schedule to stay connected with families.
  - Consider a remote use of volunteers for calls to patients and residents.
- Explore creative ways to use music, the arts, literature, etc.
- Employ One Minute of Kindness. (using social distance)





# SHARING RESOURCES

## ABCs of Combating Isolation

[www.pioneernetwork.net/resource-library/](http://www.pioneernetwork.net/resource-library/)

# Other workforce considerations


## Emotional and Other Types of Support:

- Acknowledge the stress and the grief. (huddle or report acknowledgements)
- Be flexible with staff who need to contact personal family members.
- Identify daily ways to assist staff with emotional needs. (rounding, personal touch-points, end-of-shift check-out huddles)
- Respect that they continue to come to work. (appreciative rounding, no shame absences)
- Make pastoral care or chaplaincy available, even virtually. (FaceTime, Skype)
- Be creative with schedules, traditional shifts may not meet staff or organizational needs. (staff inclusion for sense of control)





# Heroes in our midst: Caring for our Caregivers




**PLANETREE**

## CREATING A CULTURE OF CARING FOR STAFF

Healthcare professionals give tremendous amounts of themselves—both physically and emotionally—to their work. Every day (and into the night) healthcare workers have the privilege—but also bear the burden—of being with individuals at their most vulnerable. They bear witness to tragedy and heartbreak, crisis and dysfunction. They work with patients, families and colleagues through immense stress, fear, sadness, guilt and pressure.

The physical and emotional toll of this work is significant. The effects can be long lasting and pervasive, affecting not only the healthcare professional, but patients and families in their care, and the organization for whom they work.

Acknowledging and being responsive to the experience of staff is fundamental to person-centeredness. Below are three initiatives implemented by Planetree Certified organizations to address the realities of being a healthcare worker today and to create a culture of caring for staff.



**3 Initiatives to Create a Culture of Caring for Staff:**

1. Code Lavender
2. Tap Out Initiative
3. Critical Incident Peer Support

Notepad

<https://resources.planetree.org/wp-content/uploads/2018/12/Create-a-Culture-of-Caring-for-Staff.pdf>



Language of Caring  
A BRANCH OF PLANETREE INTERNATIONAL

VOLUME 9  
ISSUE 129

NOVEMBER 2019



# HeartBeat

ON THE QUALITY PATIENT EXPERIENCE™

Soapbox: The Astonishing Impact of “Three Good Things”

<https://www.languageofcaring.com/heartbeat-november-2019/>



# What are your questions, concerns or ideas to share with others?

Please share this recording and slides with others. It will be available at  
[www.planetree.org](http://www.planetree.org).



Be Safe. Be Well.

Thank you for ALL you do.



# Healthcare and Humanity at their Best:

Compassion.  
Quality.  
Partnership.



[planetree.org](http://planetree.org) [languageofcaring.org](http://languageofcaring.org)