



INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

SUBMIT ABSTRACT
ONLINE BY JULY 1, 2011
Go to www.ipfcc.org

The 5th International
**CONFERENCE ON PATIENT-
AND FAMILY-CENTERED CARE**

Partnerships for Quality and Safety

CALL FOR ABSTRACTS



JUNE 4-6, 2012 • THE OMNI SHOREHAM HOTEL • WASHINGTON, DC • WWW.IPFCC.ORG





PARTNERSHIPS

WHO SHOULD SUBMIT

The Institute for Patient- and Family-Centered Care invites abstracts from adult health care, geriatrics, pediatrics, newborn intensive care, medical homes, accountable care organizations, primary care, integrative health care, chronic illness care, emergency care, critical care, long-term care, behavioral and mental health, and public health.

The following are invited to share their experiences and accomplishments in advancing the practice of patient- and family-centered care:

- Patient/Family – Health Care Provider Teams
- Patient and Family Advisors and Leaders
- Health Care Administrators and Managers
- Health Care Practitioners
- Integrative Health Care Practitioners
- Stress Management and Mind-Body Specialists
- Health Care Educators and Information Specialists
- Child Life Specialists
- Psychologists/Psychiatrists
- Social Workers
- Faculty, Researchers, and Students in Schools of Medicine, Nursing, Social Work, Education, Allied Health, and other related fields
- Architects/Interior Designers
- Health Care Planners, Policy Makers, and Government Agency Leaders
- Funders of Health Care Programs

Priority consideration will be given to abstracts that include patient and family advisors/leaders as presenters.



PARTNERSHIPS WITH PATIENTS AND FAMILIES TO ENHANCE QUALITY AND SAFETY

The Institute for Patient- and Family-Centered Care is pleased to announce the invitation for Call for Abstracts for *The 5th International Conference on Patient- and Family-Centered Care: Partnerships for Quality and Safety*. Patient- and family-centered care offers a framework and strategies for managing the complexity of health care in the 21st century—coordination of care across settings, the ever-expanding use of technology, the need for new facilities, the risk of medical error, the increasing numbers of people living with chronic conditions, the need to develop systems of care to reduce the disparities in health care and to respond to the aging population, the pressure to control costs, and the need to improve workforce capacity.

Partnerships with patients and families in direct caregiving, as well as in improving and expanding systems of care and in the education of health professionals, are a key aspect of patient- and family-centered care, and they are essential to the quality and safety of health care.

Share your innovative and strategic approaches to patient- and family-centered care and inspire others to move their organizations ahead in partnering with patients and families to enhance quality and safety.

INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

Patient- and family-centered care is an approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnerships among patients, families, and health care providers. These partnerships at the clinical, program, and policy levels are essential to assuring the quality of health care.

Since 1992, the Institute for Patient- and Family-Centered Care has provided national and international leadership to advance the understanding and practice of patient- and family-centered care. By promoting collaborative, empowering relationships, the Institute facilitates patient- and family-centered change in all settings where individuals and families receive care and support.

The Institute also serves as a central resource for policy makers, administrators, program planners, direct service providers, educators of health care professionals, design professionals, and patient and family leaders.

CONFERENCE PROGRAM

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The 5th International Conference on Patient- and Family-Centered Care will showcase innovative and exemplary programs that are dedicated to collaboration among health professionals, patients, and families. The conference will provide opportunities to address emerging issues in patient- and family-centered care at the direct care level as well as the organizational level. It will include presentations from hospitals, primary care, specialty ambulatory settings, community-based programs, public health and mental health agencies, patient- and family-led organizations, schools of medicine, nursing, and other health and helping professions as well as the VA health system and military treatment facilities. The conference will feature a variety of formal and informal meetings, including plenary sessions, concurrent/topical breakout sessions, networking discussions, video sessions, and poster presentations.



Abstracts, representing innovative and exemplary patient- and family-centered programs, are invited for the following eleven key topics. As guidance for potential abstracts, several suggestions for content are listed under each topic.

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ABSTRACT TOPICS

Leadership for Advancing the Practice of Patient- and Family-Centered Care

- Developing the organizational infrastructure to support patient- and family-centered practice and effective sustained partnerships with patient and family advisors and leaders
- Strategies for linking patient- and family-centered care with quality and safety initiatives
- Developing the business case for patient- and family-centered care
- Designing effective measurement tools and strategies

Developing and Sustaining Effective Partnerships with Patient and Family Advisors/Leaders

- Effective approaches to recruiting, selecting, and sustaining the involvement of patient and family advisors
- Enhancing communication, partnership, and leadership skills of patient and family advisors and leaders
- Creating and sustaining effective patient and family advisory councils and other collaborative endeavors
- Education and support for patients and families to develop and lead peer support programs
- Partnering with patients and families in strategic initiatives such as research and evaluation, quality improvement, patient safety, and health care redesign

Collaboration with Patients and Families in Primary Care

- Partnering with patients and families in creating medical homes and redesigning primary care
- Partnering with patients/families and staff/clinicians across disciplines to implement self-management support for chronic conditions

Changing the Concept of Families as Visitors in Hospitals and Other Health Care Facilities

- Encouraging family member presence and participation in rounds and nurse change of shift report
- Supporting staff and clinicians to partner with patients and families as allies for quality and safety
- Partnering with patients and families to improve transition planning and other care transitions to reduce errors and readmission
- Responding to pandemic situations with patient- and family-centered guidelines, policies, and programs

Education of the Public to Promote Active Engagement in Health Care

- Support and education to promote partnerships in care, personal and family health, well-being, and resiliency and to manage the stress of long-term conditions
- Education and support for patients and their families to become active in ensuring patient safety
- Education and support for decision-making for end-of-life/palliative care

Mind-Body Programs and Practices within a Patient- and Family-Centered Framework

- Creating, implementing and sustaining mind-body programs to enhance individual and family resilience and self-management of stress and chronic conditions
- Developing effective metrics and best practices for evaluating mind-body programs
- Developing the business case for mind-body programs

See more Abstract Topics on next page...



CONFERENCE PROGRAM

Overcoming Current Challenges in Health Care

- Developing partnerships with patients and families challenged by poverty, literacy issues, and cultural differences to improve access and decrease disparities in health care
- Developing partnerships with patients and families to advance patient- and family-centered practice in military and VA health systems
- Developing partnerships with elders and their families to promote culture change within long-term care communities

Supporting Patient- and Family-Centered Care Through Information Technology

- Partnering with patients and families to enhance access to information and improve systems for charting and documentation
- Expanding meaningful use of health information technology to encourage patient and family engagement and improve continuity of care across settings
- Using social media to promote patient and family support and engagement

Facility Design and Planning to Support Patient- and Family-Centered Practice

- Designing healing environments that support patient- and family-centered practice and enhance individual and family strengths and improve quality, safety, and cost efficiency
- Partnering with patients and families in all phases of facility design planning, construction, and planning for occupancy

Patient- and Family-Centered Curricula for Students, Trainees, and the Continuing Education of Health Care Professionals

- Developing skills and attitudes for interdisciplinary collaboration, collaboration with patients and families, and coordination of care across settings and the continuum of care
- Linking education for patient- and family-centered practice with cultural and linguistic competency
- Linking education for patient- and family-centered care with mind-body practices to enhance resiliency and support stress self-management of chronic conditions and stress
- Expanding the use of patient and family faculty

Research Methods and Approaches

- Developing quantitative and qualitative approaches and methods to measure the impact and outcomes of patient- and family-centered practice and the impact of partnering with patients and families to change and improve health care

Role of Funders and Government Agencies

- Describing strategies used by public and private funders and agencies to create partnerships with patients and families and advance the practice of patient- and family-centered care
- Developing incentives to hold health care organizations accountable for patient- and family-centered practice



ABSTRACT SUBMISSIONS

ONLINE ABSTRACT SUBMISSION PROCEDURE

The Institute for Patient- and Family-Centered Care has an easy online abstract submission process. Create an abstract account by going to www.ipfcc.org and click the Call for Abstracts link. Abstract Guidelines and Instructions are also available at this location for your review prior to submitting your online abstract.

Abstract submissions will be reviewed by the Abstract Review Committee and invitations to present will be issued on or near October 1, 2011. Presenters must confirm invitation of acceptance within two weeks.

Please contact the Institute for Patient- and Family-Centered Care at (301) 652-0281 or events@ipfcc.org for more information.

TYPES OF PRESENTATIONS

We strongly encourage creative and innovative ways of presenting material.

Presentation: Presentations will be allotted 30-60 minutes with additional time for questions and answers.

Video: Video sessions will be allotted 20-30 minutes with additional time for questions and answers.

Poster: Posters are 4' x 8' visual displays of innovation. A poster representative must be present at specified times on opening day of the poster session to respond to questions.

In some cases, presentations discussing similar programs or initiatives may be combined. Presenters will be informed of this upon acceptance of abstract.

GUIDELINES FOR ABSTRACT SUBMISSIONS

Create an abstract account by going to www.ipfcc.org. Then, click on the Call for Abstracts link. **Abstracts must be submitted by 5 pm ET on July 1, 2011.**

Your abstract submission should include the following:

Title of Abstract: The title should be concise but clear enough to indicate the nature of your presentation.

Abstract Summary: Briefly describe the purpose and content of your presentation in 40 words or less. If your abstract is accepted, this summary will be printed in the conference promotional materials.

Abstract: Create an abstract that can be included in the conference educational materials, using the online template. Please avoid non-standard abbreviations.

Abstract should include:

- Description of program/initiative/study, including methods/activities, description of patient and family involvement, and organization where program/initiative/study takes place (300 words or less);
- Outcomes (50 words or less);
- Lessons learned (50 words or less); and
- Resources, tools, or handouts that will be shared with attendees.

Educational Grid: For each submission, complete an educational grid outlining your proposed session. As part of the Educational Grid, please identify 2-3 measurable objectives that directly relate to your abstract. The objectives should be written as a response to the statement, "After attending this session, participants will be able to..."

Biographical Data/Conflict of Interest: Each presenter included in the abstract must submit biographical information that includes a short (one paragraph) biographical sketch. Also, each individual must complete the Conflict of Interest Form.

For detailed Information and Instructions about abstract submissions, go to www.ipfcc.org/events/abstract-information.pdf.

CONFERENCE REGISTRATION FEES

All presenters must register for the conference. The Institute is unable to cover any related costs of attendance. We encourage presenters to stay for the entire conference to facilitate networking among attendees. A special presenter registration fee is available for conference presenters.

Presenter Registration Fees

Professionals	\$495
Patient-Family Advisors/Leaders	\$375

Early Bird Fees for Other Conference Attendees

Individuals/Professionals	\$945
Teams of 4 or more (per person)	\$875
Patient-Family Advisors/Leaders	\$475
One Day Fee	\$400

Registration Fees

Individuals/Professionals	\$995
Teams of 4 or more (per person)	\$925
Patient-Family Advisors/Leaders	\$525
One Day Fee	\$450

Pinwheel Sponsors are eligible to receive a \$50 discount, excluding Presenter and One Day Registration Fees.



Sponsorship Benefits

1. Signage acknowledging support at the conference
2. Printed listing of support in conference syllabus
3. One complimentary conference registration (\$995 value)
4. Link to your organization's home page from the Institute website and your logo on the Institute's website
5. Complimentary one-year recognition as an Institute Pinwheel Sponsor (\$1,500 value)

Sponsorship Opportunity

Investment

Welcome Reception (Benefits 1-5) \$10,000

A highlight of the conference will be the Welcome Reception where attendees have the opportunity to network in a relaxing social atmosphere.

Additional benefits: 10'x10' exhibit booth (non-transferable), napkins with company logo at Reception; full-page ad in syllabus; special recognition

Pinwheel Reception (Benefits 1-5) \$7,000

This Reception will bring together leading health systems and organizations to thank them for their leadership in advancing the practice of patient- and family-centered care. By sponsoring this event, you are increasing your visibility with key leaders who are committed to improving the quality of health care as Pinwheel Sponsors.

Additional benefits: Napkins with company logo at Reception; full-page ad in syllabus; special recognition

Leadership Symposia or Luncheon (Benefits 1-5) \$7,000 - \$10,000

Internationally-recognized leaders will participate in discussions on implementing patient- and family-centered change at the executive level. Health care leaders will have the opportunity to network and learn from true champions of change. Offer a welcome and provide your collateral materials to these key leaders.

Additional benefits: Full-page ad in syllabus; 'Welcome' comments; special recognition

Refreshment Breaks (Benefits 1-5)

Select a break session and have your company logo prominently displayed.

Beverage Break \$4,500

Additional benefit: one-half page ad in syllabus

Healthy Snack/Beverage Break \$7,000

Additional benefits: Logo on napkins; full-page ad in syllabus

Syllabus (Benefits 1-5) \$7,500

The conference syllabus provides the conference schedule of events, abstract synopses, and presenter index. This publication is the key conference document and an informative study tool. Each attendee will receive a conference syllabus.

Additional benefits: 10'x10' exhibit booth (non-transferable); advertisement on outside back cover of syllabus

Plenary Speaker (Benefits 1-5) \$5,000

Each day, internationally-known leaders and innovators for patient- and family-centered care will address conference participants. This sponsorship associates your organization with a high-profile speaker.

Additional benefits: Company logo on screen during Plenary; full-page ad in syllabus; special recognition

Poster Session (Benefits 1-4) \$3,000

Poster presentations, selected by an expert review committee, will be displayed in the Exhibit Hall. These posters demonstrate some of the most successful patient- and family-centered care initiatives in hospitals and health systems across North America.

Additional benefits: Quarter-page ad; special recognition

Tote Bags (Benefits 1-4) \$3,000

Make a lasting impression and imprint your logo on the conference tote bag. The tote bag will hold the syllabus and other handouts, and will be given to each attendee. Organization logo will be imprinted along with the Institute logo.

Name Badges (Benefits 1-4) \$2,000

Your organization will be recognized for providing conference name badges.

Exhibit Booth Fees

10% discount if before 12/31/11

Prime Location (Benefits 2-3) \$2,250

Corporate/Commercial/Company (Benefits 2-3) \$1,850

Health Care Organization/Government/

Non-Profit (Benefits 2-3) \$1,250

Take-One Table (shared table; ID sign) \$350

Exhibitor Sponsorships (see Prospectus for details)

Platinum Exhibitor (Benefits 1-5) \$7,500

Gold Exhibitor (Benefits 1-5) \$6,200

Silver Exhibitor (Benefits 1-5) \$3,500

Bronze Exhibitor (Benefits 1-4) \$2,400

Syllabus Advertisements

Inside Back: \$800 Full Page: \$350

Inside Front: \$650 One-half Page: \$200

To receive the Exhibitor/Sponsorship Prospectus, go to www.ipfcc.org or call 301-652-0281.

2011 PINWHEEL SPONSORS

The Institute for Patient- and Family-Centered Care appreciates the support of our Pinwheel Sponsors for their commitment to advancing the understanding and practice of patient- and family-centered care. These recognized leaders continue to make a significant difference in promoting this philosophy of care, and thus serve as role models to us all.

PINWHEEL CHAMPION

Anne Arundel Medical Center

Annapolis, MD

Baptist Health South Florida

Miami, FL

Baptist Memorial Hospital

Memphis, TN

Baylor Health Care System

Dallas, TX

Brigham and Women's Hospital

Boston, MA

Bronson Healthcare Group

Kalamazoo, MI

Catholic Healthcare West

San Francisco, CA

Children's Cancer Hospital at

The University of Texas

M.D. Anderson Cancer Center

Houston, TX

Children's Hospital Boston

Boston, MA

Children's Hospitals and Clinics

of Minnesota

Minneapolis, MN

Children's Hospital London Health

Sciences Centre

London, Ontario, Canada

Children's Hospital at Providence

Anchorage, AK

Children's Hospital of Michigan

Detroit, MI

Children's Hospital of Pittsburgh of

UPMC

Pittsburgh, PA

Children's Medical Center

Dallas, TX

Children's Mercy Hospitals and

Clinics

Kansas City, MO

Children's National Medical Center

Washington, DC

Cincinnati Children's Medical

Center

Cincinnati, OH

Columbia St. Mary's

Milwaukee, WI

Dana-Farber Cancer Institute

Boston, MA

East Tennessee Children's Hospital

Knoxville, TN

Essentia Health

Duluth, MN

Flagstaff Medical Center

Flagstaff, AZ

Hasbro Children's Hospital/

Rhode Island Hospital

Providence, RI

Holland Bloorview Kids

Rehabilitation Hospital

Toronto, Ontario, Canada

Hurley Medical Center

Flint, MI

Joe DiMaggio Children's Hospital

at Memorial

Hollywood, FL

Johns Hopkins Children's Center

Baltimore, MD

Kaiser Permanente—San Diego

San Diego, CA

MCG Health System

Augusta, GA

Memorial Healthcare System

Hollywood, FL

Methodist Le Bonheur Healthcare

Memphis, TN

Miami Children's Hospital

Miami, FL

Missouri Foundation for Health

St. Louis, MO

Moffitt Cancer Center

Tampa, FL

National Association of Children's

Hospitals and Related Institutions

(NACHRI)

Alexandria, VA

Nationwide Children's Hospital

Columbus, OH

North Carolina Center for Hospital

Quality and Patient Safety

Cary, NC

Onslow Memorial Hospital

Jacksonville, NC

Poudre Valley Health System

Fort Collins, CO

Riley Hospital for Children at

Indiana University Health

Indianapolis, IN

San Jacinto Methodist Hospital

Baytown, TX

Seattle Cancer Care Alliance

Seattle, WA

Seattle Children's

Seattle, WA

South Shore Hospital

South Weymouth, MA

St. Francis Medical Center

Lynwood, CA

St. Louis Children's Hospital

St. Louis, MO

The Children's Hospital of

Philadelphia

Philadelphia, PA

Thunder Bay Regional Health

Sciences Centre

Thunder Bay, Ontario, Canada

UNC Health Care System

Chapel Hill, NC

University Health Systems

of Eastern Carolina

Greenville, NC

University of Louisville Hospital

Louisville, KY

University of Michigan Health

System

Ann Arbor, MI

University of Minnesota

Medical Center, Fairview

Minneapolis, MN

University of Wisconsin Hospital

and Clinics

Madison, WI

Vanderbilt University Hospital

Nashville, TN

Women and Infants Hospital

of Rhode Island

Providence, RI

PINWHEEL SUPPORTER

Kasian Architecture Interior Design

Vancouver, British Columbia, Canada

KI

Green Bay, WI

* Commitments as of May 13, 2011



INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

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The 5th International
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Partnerships for Quality and Safety

June 4–6, 2012

The Omni Shoreham Hotel
Washington, DC

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Submit Abstract by July 1, 2011



CORE CONCEPTS OF PATIENT- AND FAMILY-CENTERED CARE



Dignity and Respect. 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. 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 health care facility design; and in professional education as well as in the delivery of care.