Lelis Vernon: Lelis Vernon, NICU mom, FPQC family consultant, VON faculty.

Dawn Stavor: Dawn Stavor AVP Nursing Mariners Hospital

Lorna Doolan: Lorna Doolan, Family Advisor/Advocate, Manitoba, Canada

Teresa Prouty: Hello from Teresa, Family Partnership Coordinator at Dayton Children's Hospital

Caroline DeLongchamps: Hi everyone, its great to be here! I am from The Medical University of South Carolina in Charleston.

Amanda Carter: Amanda Carter, NICU mom and Parent Advocate Volunteer, Wichita KS

Stephen Bokat: Are you starting at noon or 1:00 pm? I thought you said 1:00

From Nadine Oleksy: Nadine Oleksy, National PFAC/Ascension, local Safety Council / AMITA (Chicagoland)

Stephen Bokat: Steve Bokat, Suburban Hospital/Johns Hopkins Medicine PFAC

Karina Kapitanovsky: Hello all! Karina Kapitanovsky. Patient Advocate at Wake Forest Baptist Hospital- Davie Medical Center

Mary Minniti: Welcome to Today’s Webinar. Please introduce yourself and organization. We are glad you could join us.

lillianne. hanning@memorialhermann.org: Lillianne Hanning, Family Centered Care Coordinator, Children’s Memorial Hermann Hospital in Houston

Leigh Townsend: Hi! Leigh Townsend, NICU Family Support Navigator, Woman's Hospital NICU in Baton Rouge

Lisa Smith: Lisa Smith, Family Advisory liaison, Virtua Health

Vivian Bethell: Vivian Bethell, PFA, Ontario CA

Maddison Carlson: Sorry that was accidental with the hand raise haha! I’m a student at UNC-Chapel Hill interning with pediatric feeding and swallowing
Leslie Louie: Leslie Louie, Senior Director, Family Services, Ronald McDonald House BC & Yukon. Hi Bev!

Amy Medovoy: Hello! Amy Medovoy, Child Life Manager at Sutter Medical Center in Sacramento

Laura Megna: Laura Megna, Family Liaison, UPH-Meriter Hospital in Madison, WI.

Lil Banchero: Hi everyone Lil from Anne Arundel Medical Center MD

Joanna Celenza: Joanna from the ICN at Children's Hospital at Dartmouth-Hitchcock in Lebanon, NH

Caroline DeLongchamps: Hello! Hazel Markwell St. Paul University, Ottawa

Myriam Aparecida Mandetta: Hi I am Myriam Mandetta from Nursig School of Federal University from Sao Paulo- Brazil

Desiree Borre: Hi, Patient and Family Services Department at St. Mary's Hospital for Children in NY. Director and SW Team present.

Mary Minniti: We start at noon ET and will conclude at 1:30 pm ET

Jonathan Bullock: Hi all! Jonathan Bullock, national leader for Person and Family Centered Care at Kaiser Permanente

Ruth Ritzema: Ruth Ritzema, Parent Liaison, Bronson Children's Hospital, Kalamazoo, MI

Pam Dardess: Pam Dardess, VP at IPFCC, joining from Durham, right down the road from you, Maddison! I did my MPH at UNC-CH.

Terrie Dashiell: Terrie Dashiell, Community Health and Wellness LifeBridge Health in Maryland

Kerry Reynolds: Hello! Kerry Reynolds, Health Policy Researcher, RAND Corporation


Kelly Loyd: Kelly Loyd, Volunteer Patient and Family Advisor, Medical University of South Carolina, Charleston, SC

Jill Ritchie: Jill Ritchie from Health Excellence Canada
Miranda Merriman: Happy Wednesday! Miranda Merriman, Director of Patient Experience, Luminis Health - Doctors Community Medical Center - Lanham, MD

Mary Minniti: Here are the slides for today’s webinar

Jonathan Bullock: Hi all! Jonathan Bullock, national leader for Person and Family Centered Care at Kaiser Permanente

Adrienne Jacoby: Hello! I’m Adrienne Jacoby, Co-Chair AAMC PFAC in Annapolis, MD

Nicole Lockwood-Womack: Nicole Lockwood-Womack, Family Advisor with the Office of Patient Experience at University of Michigan Medicine.

Cynthia Brisby: Cynthia Brisby - Chief, PFCC, Evans Army Community Hospital, Fort Carson, CO 80913

Charlene Prochnau: Charlene Prochnau, Family Centered Care Coordinator, Glenrose Rehabilitation Hospital, Edmonton, AB

Jessica Laperle: Hello Everyone! So excited about this topic Jessica Laperle, Patient Experience and Child Life at Children’s Hospital at Dartmouth-Hitchcock

Bob Strain: I am a patient partner located in the Fraser Valley (near Vancouver)

Heather Thiessen: I am from Sk and so proud of the work done to ensure the voice of patients and families are part of all we do.

Marie Abraham: Marie Abraham, VP at IPFCC, joining from CT. Happy to see everyone here.

Terri Savino: Hello from Middlesex Health - Middletown CT

Sheila Daniels: Good Afternoon from Middlesex Health PFAC in Middletown CT

Rebecca Kaiser: Hello from Hackensack Meridian Health, Hackensack NJ

Mary Minniti: Hi this is Mary Minniti. Serving as chat moderator. Feel free to share ideas, questions during the presentation. There will be a Q&A at the end of the session.

Mary Minniti: MUSC Health links:
Erin Blakeney: Thanks for sharing the links-- I was just going to ask if they could be shared!

Mary Minniti: UCSF/IPFCC Survey
www.ipfcc.org/bestpractices/covid-19/survey-tracking.html

Mary Minniti: Live link to survey: www.ipfcc.org/bestpractices/covid-19/survey-tracking.html


Nicole Lockwood-Womack: My husband was in the hospital (for a few months) during this time (very ill w/ non-covid related issues). It was very frustrating and scary. It was very difficult to get answers about who was making visitor restriction polices.

Nicole Lockwood-Womack: For example, was it at the government level or an internal decision? I’m not sure if anyone has any insight on this....

Mary Minniti: @Nicole yes, it has been so very difficult for so many during this time.

Susan Teer: Hello IPFCC and Beverly from Houston Methodist.

Mary Minniti: For additional information: PFCC.Connect Informal Conversation https://vimeo.com/582155755


Heather Thiesssen: remember many patients and families already have had harmful memories even before covid so these is just adding to many of the fear and trust issues with health systems. now more than ever we need to make sure to find better ways of creating to ensure all people who enter into healthcare feel safe.

Beth Lamb: Good morning! Representing Ronald McDonald House of Fort Worth in Texas!

Lelis Vernon: Can we have the link for that guidance please?

lillianne. hanning@memorialhermann.org: Agreed. here is Houston cases have risen exponentially this past month and all are shutting down visitation again. It is awful for staff and families.

Mary Minniti: @Heather, your comment is a great reminder to us all

Lelis Vernon: Thanks Marie!!

Caroline DeLongchamps: Thanks. I am on the webinar. Working with Deb and Bev was a very rewarding experience.

Mary Minniti: All resources Deborah will mention can be found at this link

Mary Minniti: IPFCC COVID Website: https://www.ipfcc.org/bestpractices/covid-19/index.html

Nicole Lockwood-Womack: Yes, Heather! Great reminder.

Vicki Stearn: @Heather, thank you!

Lorna Doolan: Truly I can understand the stress and long term hurt; separation from my dying sister non covid, hurts everyday. Friend not allowed to be with her dying husband in ICU after a heart attack, non covid. A Huttetarian family not allowed to see their 87 year old Mother during her hospitalization for a stroke. This is our family, we need to be with our loved ones. For me the restrictions were serious. I also don't understand who was making the decisions. Felt like all the work we have done on Family Centered care had vanished.

lillianne. hanning@memorialhermann.org: Agreed Lorna.

Mary Minniti: @Lorna - I am so sorry this happened to you and others. It is so painful and when you don’t know who and how decisions are made can increase a feeling of helplessness. We are hopeful that these conversations and information will help change the trajectory and improve family presence.

Heather Thiessen: im so sorry Lorna, we have to do better. lots of amazing patient partners who are working hard and voice is being heard and we will get there it is together with passionate health system staff and leaders that we will get there,

Mary Minniti: IPFCC COVID Website: https://www.ipfcc.org/bestpractices/covid-19/index.html

Myriam Aparecida Mandetta: thank you was really very good

lillianne. hanning@memorialhermann.org: How did you deal with the families of covid patients? Were they allowed to walk around the hospital, go to cafeteria, chapel etc? Chances are good that if the patient has covid, the family does also. Looking for answers and advice, not being argumentative.
Teresa Prouty: Our healthcare organizations were extremely under prepared for a pandemic such as this and therefore had a kneejerk reaction in the visitor restrictions without taking into account the impact it would have on patients recovery, caregiver and loved ones mental health as well as our clinical staff who lean on the patient's caregivers as almost support persons in the patients care and healing.

Mary Minniti: Thanks for your question. The panelists will respond during Q&A.

lillianne. hanning@memorialhermann.org: Thank you

Teresa Prouty: Our healthcare organizations were extremely under prepared for a pandemic such as this and therefore had a kneejerk reaction in the visitor restrictions without taking into account the impact it would have on patients recovery, caregiver and loved ones mental health as well as our clinical staff who lean on the patient's caregivers as almost support persons in the patients care and healing.

Mary Minniti: We will ask Sherry to share with us and we will distribute later. Thanks for your patience.

Mary Minniti: @Teresa - I believe everyone was doing the best they could initially in a pandemic we’d never experienced before. Now, we know more and can do better by embracing our partnerships with patients and their families.

Teresa Prouty: I absolutely agree! This was definitely an ever changing situation and we all have learned very valuable lessons all while being able to continue to keep patients, staff and caregivers safe.

Mary Minniti: Teams can be so powerful to help us stay with True North - PFCC.

Heather Thiessen: Teresa, I agree I don't blame anyone for covid, so many lessons learned, hard working healthcare workers, we have found by bringing in the voice of patients and families is helping us to do better. I worry for those who are burnt out both care givers and patients and families, we need to support one another and be kind. so I know I make sure to say thanks to my care team for that bit of kindness goes a long way, and I have gotten thanks back too.

Myriam Aparecida Mandetta: It is very importante to apply all these strategies in our intituion.

Mary Minniti: Agreed @Myriam

Stephanie Bennett: Thanks Jessie!

Heather Thiessen: agree Myriam
Heather Thiessen: Jessie thanks for the land recognition

Gina Peck: Joining from Prince Edward Island, Canada, traditional territory of the Abegweit Mi’kmaq First Nation.

Caroline DeLongchamps: Thanks Jessie! I’m joining from the unceded territories of the Coast Salish People - Musqueam, Squamish and Tsleil-Waututh First Nations.

Susan Teer: Promising news from Texas - SB 2211 related to in person visitation to hospitalized patients during a disaster so our hospital policy must allow for 1 family member to be present. Passed and effective 9/1/21.

Mary Minniti: @Susan - great and real recognition of the importance of family role.

Susan Teer: Yes, a victory for PFCC!


Mary Minniti: Another examples of the essential nature of family- The words used on websites are important to set the tone for families as essential care partners. The Hospital of the University of Pennsylvania begins its COVID Visitor Guidelines with: “Family caregivers are vital members of the care team. During the COVID-19 (Coronavirus) Pandemic, Penn Medicine seeks to maximize family caregiver presence while keeping patients, family caregivers, and staff safe.”

Lorna Doolan: U of Pennsylvania Visitor Guidelines wording is perfect!

Erin Blakeney: Thank you very much for this session-- I have to run to another meeting and wanted to express my appreciation before I go. Thank you!

Miranda Day: will these slides be available after the presentation?

Mary Minniti: Here is the link to the slides https://ipfcc.org/events/family_presence_webinar_8_25_21.pdf

Miranda Day: Thank you.

Mary Minniti: Here are some more great resources from Jessie’s website https://www.healthcareexcellence.ca/en/what-we-do/what-we-do-together/essential-together/essential-together-learning-bundles/?id=1725#?culture=en-CA

Teresa Prouty: Fantastic work!

Mary Minniti: Sherry shared this with me: NICU - one parent and consistent support person of parent’s choice 24/7; COVID-19 visitation dependent on COVID-19 status of the parent and support person - these have been consistent throughout pandemic what are the security questions?

Teresa Prouty: Thank you for sharing this great work!

Vivian Bethell: Thanks very much. Lots of great work and ideas. Have to leave but look forward to receiving additional info.

Margareth Angelo: Thank you for sharing such valuable experiences


Nanci Newberry: Hi Bev! I don't see Susan's comment about the Texas legislation, but I would be happy to be involved in any discussion to learn more and perhaps help with hospitals that TMF Health Quality Institute is working with!

Caroline DeLongchamps: Hello all, this is very encouraging to hear about NICUs but I do think this was not universal. I am a neonatal nurse researcher and have evidence from families where many many NICUs limited to one parent and it was very isolating and overwhelming for the one parent. I am working on getting this data published but there is limited interested. Many NICU families in my study talked about the difficulty they experienced with changes to visitation policies.

Jennifer Symon: Alberta Health Services is allowing sibling visits in pediatrics once again.

Bailey Felkar: Just curious- for any other Canadian HCP's: What is your current pediatric patient to caregiver ratio? London Children's is currently 1:1 for outpatient, and 2:1 for inpatient

Mary Minniti: Promising news from Texas - SB 2211 related to in person visitation to hospitalized patients during a disaster so our hospital policy must allow for 1 family member to be present. Passed and effective 9/1/21. @Susan Teer

Vicki Stearn: Wonderful presentation. Thank you very, very much.

Nanci Newberry: Thank you for those details!

Jennifer Symon: @bailey AHS is currently 2 for both in and out patients with addition of siblings with advanced planned visit.
Paula Griswold: Have any organizations found ways to proactively calm patients/family members as they arrive at the hospital, as stress is so high during the pandemic, and there is higher violence and anger/difficult interactions?

Lisa Smith: From an infection control perspective, the least amount of people in an environment minimizes the incidence of spread of infection. How do your policies ensure infection control with parent/ECP presence?

Paula Griswold: With staff shortages now, have hospitals found ways to engage care partners in explicit activities to support patient needs, to help both the patients and the staff?

Lorna Doolan: Great presentations and information.

Bailey Felkar: Thank you for an informative webinar! Great work

Lisa Smith: thank you for a great presentation!

Rebecca Kaiser: This was excellent- thank you so much!

Patti Bradley: Well done! I appreciate your insights and contributions.

Emilia Garcia: To improve FCC, especially since family presence is limited, does anyone have any other innovative ways to include family (other than webcams at the bedside)?

Susan Leet: Our acute care hospital has seen more anger from families who are limited to 3 family members present at the end of life, even with non Covid patients. We have since expanded this to a maximum of 7, so family members can rotate in and out at the bedside.

Darcel Jackson: At Children's National in Washington DC - we are using staff that are also musicians (pianist, harp, violinist) to play in our atrium, entrance areas, to help provide a more relaxing atmosphere. We are also working on de-escalation training for all staff to help alleviate some of the stress as well as messaging to patients and families that if they find themselves getting extremely stressed, that there are staff and resources to assist so please communicate that to care teams

Susan Leet: Also, when we are able we have end of life prayer services in our outdoor gardens and then the family number present is unlimited.

Linda Waddell: Love what you just said to explain and prepare the family of the policies expectations and most importantly the partnership.

Mary Minniti: @Darcel Thanks for sharing your very practical and helpful strategies.
JOSE ANTONIO GARCIA GARCIA: Thanks for the excellent webinar

Mary Minniti: @SusanL - being flexible to meet needs is so important at this time.

Lorna Doolan: What is your suggestion on who to see if family access is denied? In all the cases I know the patients were non positive for COVID. Families went to hospital management, government officials etc., but no help or interest in accommodating family.

Lisa Smith: Thank you

Mary Minniti: Please let us know how we can improve and what worked well today by filling out Evaluation:

https://www.surveymonkey.com/r/2PDBH9B

Italia Folleco: In Florida due to the surge we are facing, adult hospitals have zero visitors. Lots of anger from family members. Visitations granted only to attenuating circumstances as end of life. Web cams are being used and phone conversation. Children’s Hospital allows 1 parent, and second one 4:30-7:00 pm. It is challenging. Child Life and art, music therapists very involved.

Jennifer Symon: @lorna Alberta Health Services had our clinical ethics team offering 24/7 support to trouble shoot denied access. We also have an appeals process for those denied access.

Jessie Checkley: HEC has not specifically developed resources for patient partners, but have some tools and resources that are available through our Patient Engagement Resource Hub.

Mary Minniti: We invite you to join our ongoing learning community PFCC.Connect-
http://pfcc.connect.ipfcc.org/home

Terri Savino: Need to sign off or another meeting. Thank you for great discussions and resources, be well and stay safe.

Mary Minniti: Join us next month PFCC.Connect Conversation: Re-Energizing Partnerships Amid COVID’s Resurgence on Wednesday, September 15th at noon ET.
https://us02web.zoom.us/meeting/register/tZUsd-ygpiMrGtT5dZ_f4aa43KVX0Qor28mW

Darcel Jackson: Great session. Thank you to all the panelists!

Flor Giusti: Thanks so MUCH!

Gina Peck: thank you for a great presentation

Linda Waddell: Wonderful session and conversation. Thank you so much. Be well everyone.
Sherry Perkins: Thank you all for being here and for your leadership on this!

Joanna Celenza: thank you for an informative session! I always learn from these discussions!!!

Jessie Checkley: Please feel free to follow-up if you have questions about the work or the resources and tools of Essential Together.

Nicole Lockwood-Womack: Thank you, all!

Angela Briley-Wallo: Great session thank you.

Mary Minniti: Evaluation: https://www.surveymonkey.com/r/2PDBH9B

Valerie Willis: Many Thanks!

Lieke Stouthard: Thank you!