CALL FOR ABSTRACTS
SUBMIT ABSTRACT ONLINE BY DECEMBER 4, 2019

9TH INTERNATIONAL CONFERENCE ON PATIENT- AND FAMILY-CENTERED CARE:
Partnerships for Quality, Safety, and Equity

NASHVILLE, TN
AUGUST 18 – 20, 2020
RENAISSANCE NASHVILLE HOTEL

INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE®

WITH LEadership SUPPORT FROM
VANDERBILT UNIVERSITY MEDICAL CENTER

WITH PARTNERSHIP SUPPORT FROM
Beaumont
The Institute for Patient- and Family-Centered Care (IPFCC) is pleased to announce the Call for Abstracts for the 9th International Conference on Patient- and Family-Centered Care: Partnerships for Quality, Safety, and Equity.

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 professionals. These partnerships at the clinical, program, and policy levels are essential to assuring the quality and safety of health care for all.

Share your innovative and effective approaches to advance patient- and family-centered care and create meaningful and sustainable partnerships to achieve better health, improved health equity, improved patient experience, improved workforce experience, and lower cost.

WHO SHOULD SUBMIT AN ABSTRACT

Does your work advance the practice of patient- and family-centered care? Are efforts to improve health care for all grounded in partnerships among health care professionals, patients, and families? Are individuals from underserved and vulnerable populations involved in developing programs and strategies to achieve health equity? If so, we invite you to submit an abstract.

IPFCC welcomes submissions from:

- Patient and Family Advisors and Leaders
- Administrative Leaders and Board Members
- Physicians, Nurses, Social Workers, Therapists, Pharmacists, Child Life Specialists, Chaplains, Security, and Other Staff
- Leaders for Safety and Quality
- Patient Experience and Patient Relations Personnel
- Researchers and Evaluators
- Human Resources Personnel
- Community-Based Agency Leaders and Personnel
- Faculty and Students in Schools of Medicine, Nursing, Social Work, and Allied Health
- Architects, and Facility Design Personnel
- Policy Makers, Government Agency Leaders, and Funders

CONFERENCE PROGRAM

The 9th International Conference will showcase exemplary programs dedicated to collaboration among health care professionals, patients, and families to address the challenges in our complex health care system. The Conference provides opportunities to share innovations across all settings at the direct care level as well as the organizational, community, regional, and national levels.

The Abstract Review Committee, comprised of both IPFCC staff, and external expert reviewers, will give priority consideration to submissions that include patients or families as co-presenters and highlight meaningful collaborative roles for patients and families in all aspects of programs, projects, or initiatives. Abstracts will also be reviewed on the following criteria:

- Consistent with patient- and family-centered core concepts
- Innovative
- Promotes health equity and reduces disparities
- Evidence-based and includes evaluation
- Effectiveness of proposed presentation/poster

Details about the review criteria are available on IPFCC’s website and online abstract submission site.
ABSTRACT TOPICS

Role of Leadership
Leadership practices resulting in widespread adoption of PFCC and measurable change and improvement. Potential focus areas:

- Developing infrastructure to build and sustain organizational commitment to PFCC
- Linking PFCC with major priorities such as patient experience, harm and readmission reduction, social determinants of health, cost effectiveness, and value-based care
- Creating a culture of safety and high reliability in partnership with patients and families
- Applying PFCC concepts and strategies to improve the work experience of staff and clinicians
- Creating accountability for clinicians and staff for PFCC
- Involving patient and family advisors on governing boards, board-level committees, and strategic planning teams
- Developing the business case for PFCC

Essential Allies—Patient and Family Advisors
Effective strategies and tools to increase the capacity and diversity of patient and family advisory programs. Potential focus areas:

- Recruiting, preparing, and supporting patients and families who represent the diversity of communities served to be advisors
- Preparing patient and family advisors to partner effectively in areas such as safety, quality, equity, patient experience, staff experience, value, governance, and strategic planning
- Strengthening communication, partnership, and leadership skills of patient and family advisors
- Sustaining patient and family advisory councils and expanding other advisory roles
- Implementing peer-led support and education programs

Better Together—Patients and Families as Partners
Strategies used in hospital and post-acute settings to welcome and include patients and families as partners in care, care planning, and decision-making. Potential focus areas:

- Implementing processes to eliminate restrictive “visiting” policies and educate and support staff for change in practice
- Implementing the Better Together bundle (family presence, bedside shift change/rounds, and family participation in transition planning)
- Supporting and educating staff and clinicians to involve patients and families in the Better Together Bundle
- Communicating the role of patients and families as partners in care through informational materials, websites, media, and other means

Partnerships in Primary and Other Ambulatory Care
Programs and initiatives in which patients and families are actively involved in changing the outcomes and experience of care. Potential focus areas:

- Improving access to care
- Enhancing communication and shared decision-making between clinicians and patients
- Advancing meaningful patient engagement through OpenNotes and other effective health technologies
- Making patient and family informational materials more accessible and useful to diverse populations
- Improving medication management
- Integrating behavioral health into primary care
Health Equity Through Partnerships
Initiatives grounded in collaboration with underserved and underrepresented communities to eliminate disparities in health and health care. Potential focus areas:

- Implementing effective strategies to increase access to and utilization of health care services
- Ensuring programs and practices are culturally responsive and linguistically competent and address self-determined priorities and needs of communities served
- Expanding opportunities for individuals from diverse communities to partner in planning and evaluating policies, programs, and practices in all settings of care
- Integrating strategies that address social determinants of health into systems of care, health professional education programs, or research

Partnerships in Research and Evaluation
Projects focused on research and evaluation planned and conducted with patients and families. Potential focus areas:

- Developing approaches and tools to measure the outcomes of patient- and family-centered practice, partnerships with patient and family advisors/leaders, and PFCC education for health professionals
- Exploring the relationship between PFCC and experience, quality, safety, equity, and value
- Preparing patients, families, evaluators, and researchers to partner in all phases of research and evaluation
- Collaborating with patients and families in efforts such as research prioritization and measure development

Education for Interprofessional and Collaborative Practice
Educational programs planned and delivered in partnership with patients and families. Potential focus areas:

- Developing interprofessional curricula with patient and family advisors
- Developing students’ and trainees’ communication skills to strengthen collaboration with patients and families and with other disciplines
- Preparing patients and families as faculty in pre-clinical and clinical training programs, professional education, or staff development
- Improving skills for interdisciplinary practice such as bedside rounding, pain management, or team-based care
- Linking education for PFCC with cultural responsiveness and linguistic competency

Emerging Innovations
Programs and initiatives that address urgent problems in health care in partnership with patients and families. Potential focus areas:

- Improving pain management and reducing the rate of opioid use
- Improving behavioral health including treatment for substance use disorder
- Planning and implementing approaches to improve maternal and child health and reduce disparities in rates of mortality and morbidity
- Advancing age-friendly systems of care by applying PFCC concepts
- Enhancing safety and security in health care settings for patients, families, and staff
- Developing and testing health information and artificial intelligence technology that is useful and meaningful to patients and families
TYPES OF PRESENTATIONS

Creative, interactive, and innovative presentations are strongly encouraged. IPFCC offers both oral and poster presentation options for submissions.

Oral presentations:
Educational programs planned and delivered in partnership with patient and family advisors. Potential focus areas:

- **Presentation** (30-60 minutes). Standard presentation with time included for audience questions and discussion
- **Skills Workshop** (60 minutes). Interactive, hands-on session offering attendees opportunity to learn, discuss, and practice new skills
- **Panel Discussion** (60 minutes). Moderated panel of speakers with time included for audience questions and discussion

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

Poster presentations:
Posters are visual displays of innovation (8’ wide by 4’ tall). Only individuals who will serve as poster presenters at the Conference should be included in submissions (other contributors can be included on the actual poster). A poster representative must be present at specified times to respond to questions. The Poster Sessions schedule will be determined after decisions about abstracts are announced.

GUIDELINES FOR ABSTRACT SUBMISSIONS

Abstracts must be submitted by 5 pm ET on December 4, 2019.

Your abstract submission must 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 included in the Conference promotional materials.
- **Abstract**: Create an abstract that can be included in the Conference attendee materials, using the template provided online. Please avoid non-standard abbreviations.

Abstract should include:

- Outcomes (50 words or less);
- Lessons learned (50 words or less); and
- Educational Grid: For each submission, complete an educational grid outlining your proposed session or poster. 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...”
ONLINE ABSTRACT SUBMISSION PROCEDURE

IPFCC 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, including Review Criteria, are available at this location. We strongly encourage that you review these prior to submitting your online abstract.

Abstract submissions will be reviewed by the Abstract Review Committee and invitations to present will be issued at the end of January 2020. Presenters must confirm acceptance within two weeks.

For detailed information and instructions about abstract submissions, go to https://ipfcc.org/call-for-abstracts-instructions.

Please email IPFCC at: events@ipfcc.org for more information.

CONFERENCE REGISTRATION FEES

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

Registration Fees for Presenters

| Professionals | $545 |
| Patient-Family Advisors/Leaders | $425 |

Registration Fees for Other Conference Attendees

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<tr>
<th>Registration Type</th>
<th>Early Bird Fee Before June 17, 2020</th>
<th>Regular Fee After June 17, 2020</th>
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<tbody>
<tr>
<td>Individuals/Professionals</td>
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<td>Teams of 4 or more (per person)</td>
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<td>Patient-Family Advisors/Leaders</td>
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<td>One Day Fee</td>
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HOTEL INFORMATION

The Renaissance Nashville Hotel is located in the heart of downtown Nashville aka “Music City” and is within walking distance to Broadway and sites such as the Ryman Auditorium, Country Music Hall of Fame and Museum, and Bridgestone Arena.

The Renaissance Nashville is holding a limited number of rooms for Conference participants at a group rate until July 27, 2020. We encourage you to make your reservations early, as rooms may sell out before the cut-off date and Nashville is a popular destination. To make your reservations, contact the hotel at:

Reservations Toll Free: 877-901-6632
Reservations Local Phone: 615-255-8400

Indicate that you are with the “IPFCC 2020 International Conference” to receive this special group rate. Hotel reservations can also be made online at http://ipfcc.org/conference-hotel.

The room rates are $239 single/double occupancy. All room rates are subject to the current state, local, and occupancy taxes, which are currently 15.25%. The special group rate will be in effect three days before and after the Conference for those arriving early or extending their stay to enjoy Music City.

INSTITUTE FOR PATIENT- AND FAMILY-CENTERED CARE

IPFCC, established in 1992 as a non-profit organization, is a nationally and internationally recognized leader in advancing the understanding and practice of patient- and family-centered care. For over 25 years, IPFCC has worked with organizations to develop meaningful and sustainable partnerships among patients, families, and health care professionals in clinical care, safety and quality improvement, policy development, education of health care professionals, and research.

IPFCC serves as a central resource for policy makers, administrators, clinicians and staff, educators of health care professionals, researchers, design professionals, and patient and family advisors/leaders.

IPFCC • 6917 Arlington Road, Suite 309 • Bethesda, MD 20814 • 301-652-0281 • www.ipfcc.org