AGENDA

FACULTY

Catherine DesRoches, DrPH, Executive Director, OpenNotes, Boston, MA
Beverley H. Johnson, President/CEO, Institute for Patient- and Family-Centered Care, Bethesda, MD

Jonathan Bullock, Principal Consultant, Kaiser Permanente’s National Service Quality, Oakland, CA
Amy Cohen, PhD, BCBA, PMP, PFCC Program Manager, Jeffords Institute for Quality, University of Vermont Medical Center, Burlington VT
Kerry Litman, MD, CPPS, Family Physician, Physician Lead for PFCC, Quality Director, Kaiser Permanente, San Bernardino County Medical Center, San Bernardino, CA
Stephen F. O’Neill, BCD, JD, Behavioral Health Specialist, OpenNotes, Boston, MA
Podge Reed, Patient and Family Advisor, Johns Hopkins Hospital, Baltimore, MD
Liz Salmi, Senior Multimedia Communications Manager, OpenNotes, Sacramento, CA
John Santa, MD, MPH, Director of Dissemination, OpenNotes Portland, OR
Deborah Wachenheim, MPP, Manager of Stakeholder Engagement, OpenNotes, Boston, MA
James Wallace, MD, Chief of Radiation Oncology, Leader of Cancer Service Line, University of Vermont Medical Center, Burlington VT

OBJECTIVES

• Develop a shared understanding of the core concepts and strategies of patient- and family-centered care and OpenNotes and how they can enhance quality, safety, the experience of care, and the work experience for clinicians and staff.

• Describe practical strategies for partnering with patients and families in:
  o Information access/transparency.
  o Care planning, decision-making, medication management, self-management support, and care coordination.

• Describe the innovation of OpenNotes: the research, and its use in ambulatory care settings, including mental health.
• Discuss OpenNotes implementation and the lessons learned.

• Describe future implications of OpenNotes: OurNotes, Safety/Diagnostic Error Correction and Prevention, Interoperability.

• Describe practical strategies for involving patient and family advisors and consumer organizations in advancing the practice of patient- and family-centered care, and the use of OpenNotes in ambulatory settings.

7:30 am  Registration, Networking, and Continental Breakfast

8:00 am  Welcome and Introductions  
(Cait DesRoches)  
(Bev Johnson)

8:20 am  OpenNotes: A Patient Perspective  (Liz Salmi)

8:35 am  University of Vermont Health Network: Ambulatory Care Implementation Strategies for PFCC and Open Notes  
(Jim Wallace and Amy Cohen)

9:05 am  OpenNotes Research: Patient Outcomes  (Liz Salmi)

9:20 am  Patient and Family Advisors and OpenNotes: A Personal Story and a Health System Story  
(Jonathan Bullock and Podge Reed)

9:45 am  Group dialogue/Q&A

10:00 am  BREAK

10:15 am  OpenNotes and Culture Change: A Clinician Perspective  
(Kerry Litman)

10:45 am  Sharing Mental Health Notes  (Steve O’Neill)

11:20 am  Brief reports from implementers

11:50 am  Group dialogue/Q&A

12:15 pm  IPFCC and OpenNotes Resources  
(Deb Wachenheim and Bev Johnson)
12:30-1:30 pm  LUNCH

Facilitated table discussions of concerns, questions, and hot topics. Bring to breakouts.

1:30-3:30 pm  TRACK #1 Building the Commitment to PFCC and the Transparency of Open Notes within Health Systems

Facilitated by a faculty team (Deb Wachenheim, Bev Johnson, Amy Cohen, Jim Wallace, Jonathan Bullock, Steve O’Neill, Kerry Litman, and Podge Reed)

Luncheon Tabletop Issues for Discussion


Roles of PFACs—In Planning, Implementation, and Evaluation of OpenNotes and Designing the Communication to Patients and Families


Exploring the Implementation Hot Topics—Clinician resistance, mental health, adolescent issues (proxy), opt out/opt in, hiding notes, reminders, strategies to promote the use by patients and clinicians

OpenNotes and Reaching Culturally Diverse and Traditionally Underserved Communities

Enhancing Safety through PFCC and OpenNotes

Wrap Up/Next Steps

1:30-3:30 pm  TRACK #2 Policy and Consumer Organizations (Breakout)

Facilitated by a faculty team (John Santa, Cait DesRoches, Steve O’Neill, Liz Salmi, IPFCC faculty)
Luncheon Tabletop Issues for Discussion

Issues for Vendor Consideration—best practices, required support, PFAC involvement in EMR design, availability to small clinician practices

Strategies for Building Awareness of OpenNotes Availability and How Patients and Families Can Use Notes—50% of OpenNotes implementers are not informing patients of notes availability (Opportunity for PFACs to help design how this information is communicated to patients and families)

Mental/Behavioral Health—A growing gap in information sharing. How to approach from a policy point of view

Certification of OpenNotes implementation—Evaluating the quality and impact of an OpenNotes Implementation


OpenNotes and Safety—Diagnostic errors, Malpractice Risk, Risk Management, Early research results

Wrap Up/Next Steps

3:30 pm ADJOURN