



NEWS



American Hospital
Association

WINTER 2012

From the President...

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Kate Clarke, President

Greetings Dear Colleagues!

As we prepare to close 2012, I reflect on SHCA's accomplishments this year and am excited and amazed at the achievements. Our strategy this year was to focus on some very core efforts including supporting state and regional chapter development, completing a new publication, refreshing the SHCA Professional Awards Program, connecting with new members, creating just-in-time education opportunities, collaborating with other groups and of course coordinating the Annual Conference.

The Chapter Development Committee, lead by Kim Pedersen, has created tools to assist chapter leadership in meeting the requirements of their affiliation agreements. A webinar

was recently held reviewing the agreement and various components of affiliation. The webinar is available to chapter leadership. Please contact the SHCA offices for more information.

Linda Reiser and the Publications Committee have been focused on completing a complaints and grievances resource. Started last year and brought to completion this year, the publication is a quick reference for a patient centered approach to addressing complaints and grievances. We are very excited to announce that it will be available for purchase in 2013!

The Awards Committee, led by Steve Cahoon, has worked diligently over the last year to streamline the SHCA awards application process. Please visit the SHCA website for details and consider applying for one of the many award opportunities. It is a wonderful way to promote your professional advancement!

The Nominations Committee, chaired by Amy Wellington, has been hard at work assembling the Ballots for the 2013-2014 Board Elections. One of the aspects of SHCA that I value most is that we

From the President...

(continued)

are an organization led by volunteers; individuals who, at one time, were new members. We value and promote development within the membership and welcome emerging leaders to the table. Amy, the Board, and I encourage participation in the many committees, not only because the work of the committees is vital to our livelihood, but also because this is where our future leaders come from! Please make sure you vote in this year's election and consider applying when the call for volunteers comes out in the spring.

Focusing on bringing value to our membership we have the Advocacy and Communications Committee chaired by Tammy Miller. This group identifies valuable content, that is of interest to the profession, for the various news and information sources sent to you by SHCA. Additionally, the Member Value Committee, lead by Kathy Overton, has worked on keeping membership strong by retaining current members and ensuring that we are engaging and welcoming new members as they join. The Organizational Growth and Development Committee has also worked to identify collaboration opportunities with other groups.

With sincere gratitude we thank Donna Johnson and the Annual Conference Planning Committee. They have been hard at work since May of this year coordinating

the various aspects of the Annual Conference. The 2013 Annual Conference "Connecting and Inspiring Patient Advocates" will be held in St. Louis April 3-5. Registration is open so be sure to visit the Conference page on the SHCA web site: www.shca-aha.org/annual and register!

Pulling all of these important activities together really does take a village, and we are fortunate to have a wonderful village of volunteers and AHA staff! From the 2012-2013 Board of Directors to the committee volunteers, I am honored to have the opportunity to work alongside such dedicated and skilled professionals.

Your Executive Committee of the Board, Amy Wellington, Carol Santalucia and I, were fortunate to participate in the first ever Personal Member Group (PMG) Leadership Meeting at the American Hospital Association in Chicago last month. This was a wonderful opportunity to network and strategize with the leaders of other groups that represent our hospitals. Some examples of the other Personal Member Groups' focus are materials management, risk management, human resources and many more. While we all have different audiences, and our individual roles at the hospital level vary, one common theme among all of us is making sure that patient satisfaction and patient safety stays a priority. We

also found tremendous value in networking with other PMG Leaders. A special thanks to Liz Summy, Vice President of the PMG Division, for providing us this unique and invaluable opportunity.

It has been a busy and exciting year, and as it comes to a close I would like to express my heartfelt gratitude to each of you who have worked so hard to help SHCA achieve these many successes!

I wish you all very safe and happy winter holiday season!

Kate Clarke



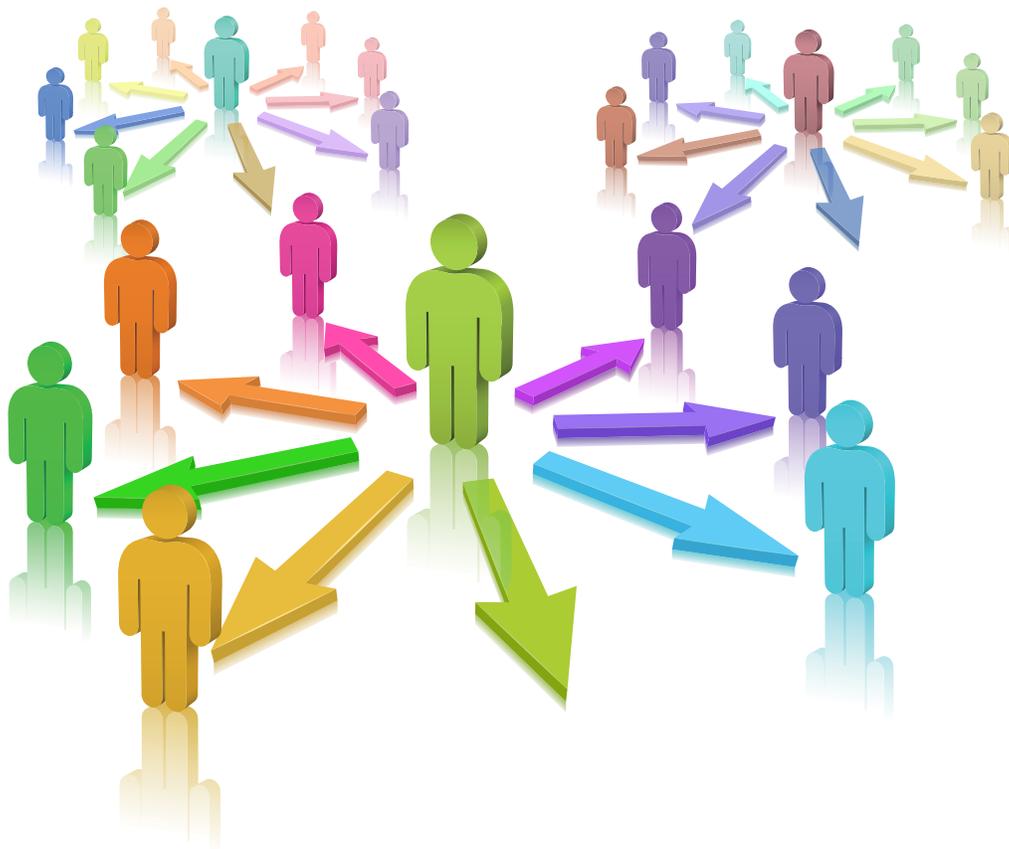
Member Benefit Spotlight



SHCA is excited to announce a LinkedIn group for our members. LinkedIn allows professionals to connect with each other to exchange knowledge, ideas, and opportunities. SHCA's LinkedIn group provides you with a new way to increase your network and provides another means to learn and share, that will ultimately help the patients you serve.

Go to: www.linkedin.com/groups/Society-Healthcare-Consumer-Advocacy-SHCA-4676776/about to join the SHCA LinkedIn group.

Don't have a LinkedIn account? It only takes a few minutes to set one up and you will be connecting in no time. Visit www.Linkedin.com to begin.



SHCA Awards Program - Recipient Interview

As the Awards Program opens for 2013 we wanted to take this opportunity to spotlight one of the many SHCA members who have already received an award. Kathy Stewart, the Director of Patient Relations at St. Mary's Medical Center in Evansville, IN, received an Achieved APEX award in 2005 and reached the Distinguished level in 2007. She was recently interviewed by Awards Chair Steve Cahoon.

Tell us a little about yourself:

I work at St. Mary's Medical Center, in Evansville, Indiana, which is a member of Ascension Health. I serve as a liaison between the patient/family and hospital to provide a channel through which the patient may identify unmet needs, voice concerns and seek solutions to specific problems. The hospital is a multi-specialty, Level 2 Trauma center, and Magnet designated by the ANCC. I created the program and have served in this role for 28 years.

How long have you been a member of SHCA?

I joined SHCA in 1984, then known as NSPR, the National Society for Patient Representatives. My first conference was in Tarpon Springs, FL. The national conferences are a must for me. Even after many years of attendance, I continue to gain new information, insights, and renewal. I could not do this job without the support from SHCA, its leadership, and its members.

What prompted you to apply for an APEX award?

Receiving APEX recognition is a validation of the work we do each day. When I reviewed the requirements, it seemed that I had met the criteria for the Achieved level so it was just a matter of taking the time to organize my responses for the application. This was the biggest challenge for me but now that the application process has been revised I think it will be much easier for applicants at all levels.

When did you feel you were ready to apply for the Distinguished level?

Receiving the Achieved level was motivating and inspired me to apply for the Distinguished level, which is the second of the three levels. As I work on projects and initiatives in my hospital now, I am mindful that the work may help me meet the criteria for the Fellow level.

Can you explain what it means to have reached the Distinguished level?

It creates a sense of internal satisfaction that comes from the hard work we do each day to serve others. I am honored that our profession recognizes our work.

There is now a new APEX application process; are you considering applying for the Fellow award?

Yes, I am working on the Fellow level application and am happy that the application process is now so streamlined!

What advice do you have for someone considering applying for an APEX award?

Go For It! Take time to read the criteria to make sure you meet all the requirements. Even if you don't meet them all yet, reviewing the criteria may help you plan future projects to benefit both your hospital and satisfy an APEX criteria. The award and recognition will validate and inspire you to continue doing the great work you do each day for patients and their families, physicians, and hospital staff.



Patient Navigation - *Guiding the Way*

Among the many forms of patient advocacy is the ability to help patients make their way successfully through the healthcare system. For those of us who are passionate about making a difference in healthcare, it is important to be aware of an emerging field that does just that: patient navigation.

What is Patient Navigation?

First pioneered by Dr. Harold P. Freeman in 1990, patient navigation provides individualized assistance to patients, families, and caregivers to help overcome healthcare system barriers and facilitate timely access to quality medical care. Patient navigators act as the support hub for all aspects of a patient's movement through the healthcare system. The navigator is trained to anticipate, address, and overcome barriers to care and to guide patients through the healthcare system during a very difficult time. Examples of some frequently encountered barriers that may be eliminated through patient navigation include:

- Financial barriers (including uninsured and under insured)
- Communication barriers (such as lack of understanding, language/cultural)
- Medical system barriers (fragmented medical system, missed appointments, lost results)
- Psychological barriers (such as fear and distrust)

- Other barriers (such as transportation and need for child care)

These barriers may cause patients to miss appointments or delay their care until they are very sick. Navigators reduce these barriers by identifying patient needs and directing them to sources of emotional, financial, administrative, or cultural support. A navigator can be a:

- Lay individual who can coordinate needed healthcare services
- Trained healthcare professional (social worker, nurse)

A lay navigator can eliminate many of the previously mentioned barriers, but as treatment becomes more complex in terms of social or clinical services, a clinically trained navigator should step in. This approach is very cost-effective in that highly trained healthcare professionals are not spending time on work that can be handled by non-clinical staff members, such as a lay navigator.

Pilot Program

Navigation is not only the right thing to do – it's the smart thing to do. In 2011, The Center for Health Affairs, which provides services and resources aimed at enhancing Northeast Ohio's healthcare community, partnered with Accenture to develop the first ever navigation pilot program in Northeast Ohio.

The goal of the pilot program was to prove the business case in hospitals that navigators not only help the patients, but also help the bottom line.

The pilot followed three navigators at two local hospitals. These positions, jointly funded by Accenture and The Center, focused on disease-specific and process improvement issues within each facility. With individual metrics having been determined based on each hospital's needs, the pilot drew conclusions by comparing data gathered during the navigation pilot to data gathered in the previous year when a navigator was not in place.

The preliminary results of the pilot program have indicated that the use of navigators increased revenue and provided greater efficiency for both pilot hospitals. For example, in one hospital, by helping facilitate the appointment calendar and supporting patients in a variety of ways, the navigator maximized the number of patients who came in for treatment. Through this, the hospital was able to recoup the cost of the navigator's salary in just two and a half months, after which the navigators work contributed solely to the bottom line of the organization.

Enhancing the Patient Experience

Patient navigation serves as a wonderful means to enhancing the patient experience. It is not limited to uninsured or underserved patients,

Patient Navigation: Guiding the Way (continued)

which was its original purpose when Dr. Freeman developed the concept in 1990. As patient care is so often delivered in a fragmented manner, particularly related to those with chronic diseases, patient navigation can create a seamless flow for all patients as they journey through the healthcare continuum. Patient navigators are the experts who help patients experience the best of our healthcare system by developing key relationship to personally help them navigate it successfully.

Conclusion

Since its origin in Harlem over two decades ago, patient navigation has rapidly expanded to become a nationally recognized healthcare service delivery model. In fact, the American College of Surgeons Commission on Cancer has mandated navigation services for all accredited institutions by 2015. In addition, the Affordable Care Act includes patient navigation requirements.

So, as our healthcare system continues to become more and more complex, we can advocate for patient navigation services and virtually integrate a fragmented healthcare system for individual patients and their families.

*Carol Santalucia, MBA
SHCA President-Elect
Vice President
CHAMPS Patient Experience*



The 2013 Healthcare Equality Index

As lesbian, gay, bisexual, and transgender (LGBT) Americans have become more visible, hospitals have begun to explore the particular challenges faced by this long overlooked group of patients. Thanks to a 2011 Joint Commission standard requiring hospital non-discrimination policies to protect LGBT patients, as well as new CMS Conditions of Participation calling for equal visitation for LGBT patients, LGBT patient-centered care is receiving much attention.

A unique resource for hospitals interested in assessing themselves vis-à-vis best practices in LGBT care is the LGBT Healthcare Equality Index, a free online survey administered by the Human Rights Campaign Foundation. Participating hospitals receive comprehensive information and resources, a customized needs assessment, free online training for staff, and the opportunity to be publicly recognized for their commitment to optimal LGBT care. For more information

about the Index, open now through February 15, visit www.hrc.org/hei.

*Shane Snowdon
Director, Health & Aging Program
Human Rights Campaign
Foundation*



SHCA 2013

ANNUAL CONFERENCE ST LOUIS

Connecting & Inspiring Patient Advocates

APRIL 3 - 5

Registration is now open for our 2013 Annual Conference!

www.shca-aha.org/annual

Attendees at this key event for patient advocates will enjoy exceptional education sessions, excellent networking opportunities and exposure to key industry vendors.

Whether you are new to the patient advocacy field, or a seasoned veteran, this is a must attend event for those that advocate to improve the patient experience. Plan NOW to attend the 2013 Annual Conference on April 3-5 in St. Louis, MO.

CONFERENCE AT-A-GLANCE

Date: Wednesday April 3 to Friday, April 5, 2013

Location: Renaissance Grand Hotel, St. Louis, MO (rooms in the SHCA block are just \$119 per night plus tax)

REGISTRATION FEES

\$575 — member, early bird rate *(before 2/15/13)*

\$725* — nonmember, early bird rate *(before 2/15/13)*

\$575 — government rate *(no expiration)*

\$650 — member regular rate *(after 2/16/13)*

\$800* — nonmember regular rate *(after 2/16/13)*

* *The Nonmember rate includes a one-year individual SHCA membership.*

Student Rate NEW! — Students who show proof of status can register for the conference for just \$425 early bird or \$525 regular.

SPECIAL OFFER! The first 50 early bird registrants to the conference will receive one complimentary registration (\$79 value) to SHCA's first ever hot topics webinar, taking place in February, 2013. Register today before this offer runs out!

Visit www.shca-aha.org/Annual for more information or visit www.shca-aha.org/shca-aha/events/regconf.html to register.

ATTENTION EXHIBITORS AND SPONSORS

The SHCA Annual Conference is the cornerstone event for the Society and attendees rely on the exhibit hall to learn about vendors who can help them improve the patient experience on a daily basis. Meet face to face with over 200 attendees in the patient advocacy field by exhibiting or sponsoring.

Excellent opportunities are still available, so access the prospectus at www.shca-aha.org/shca-aha/media/onsite_conf.html.

Member to Member: Attending the 2013 SHCA Conference

Whether you are a new or seasoned Patient Advocate you may ask yourself “what can the SHCA conference do for me?”. As a fellow member, I can tell you that it is one of the most informative, interactive and educational conferences I have ever attended.

As a new Patient Advocate to the field, with less than four months in my role when I attended my first SHCA conference, I was absolutely amazed by all that the conference has to offer its members. From the social events, to the education pieces, to the new friendships formed, it was a wonderful experience. Being able to learn so much and come away from the event with at least one new skill or resource that you can

apply to your job immediately is priceless. For me personally, I learned a lot about CMS Standards, letter writing, and many other procedures that helped me change some of my own hospital’s policies and processes.

It’s a great opportunity to network and bounce ideas off of other advocates and find out what they are doing in their organizations that may benefit you. There is also a SHCA bookstore which had some great publications related to various aspects of patient advocacy. And if you are a nurse or a social worker in this field, you even have the opportunity for CEU’s to be applied for attending the conference.

SHCA’s 2013 Annual conference will be held April 3-5 in St. Louis, MO. More information can be found in this newsletter or by visiting: www.shca-aha.org/annual

Don’t miss this excellent opportunity to grow your professional knowledge and personal network. I’ll see you there!

Shaunda Coleman
Patient Advocate
Liberty Hospital, MO



Patient Advocacy - A View from the Outside

When I started working for SHCA in July of this year I was excited, but also nervous. I came from a real estate association and didn't even know there were patient advocates in hospitals until I began researching for my interview at the American Hospital Association. How would I be able to serve my new members properly? What do they deal with on a day to day basis? What does day to day even look like for a patient advocate?

To help me answer these questions I asked our current President, Kate Clarke, if I could shadow her for a day to get a real sense of what patient advocacy is all about.

Patient advocates need to communicate well with a wide range of constituents in order for the patient to have the best possible experience.

She graciously agreed and I recently spent a day at Cadence Health in Winfield, IL. It was a wonderful experience and I am so grateful that Kate allowed me to get this insider's view. I learned a lot but wanted to share some of what I took away from the day.

Working at a hospital isn't like Grey's Anatomy

OK, so I didn't expect McDreamy to greet me at the door (although it would have made my day even better!) but part of me envisioned us moving quickly from one patient complaint emergency to the next with no time to spare. And while

it wasn't quite like that it became clear, pretty quickly, that our members are busy people who have to turn on a dime to take care of yet another patient issue.

No two patient advocate roles are the same

I had a lot of questions for Kate about a patient advocate's day to day responsibilities and tasks and I learned very quickly that there is no "one size fits all" when it comes to our members. The core of the job is obviously the same but there seems to be myriad differences between one advocate and another. Area of responsibility and staff size

are good examples. Some advocates manage the interpreter services or volunteer services at their hospital while others focus solely on advocacy. Many advocates are one person departments while others are part of a team of people all focused on the same role. The one thing that became very clear to me early on though is that no matter what their set up is, each one of our members is passionate about what they do.

Communication is key

I was struck by what an important role effective communication played during my day at Cadence.

From dealing with an irate patient who felt they were mistreated during their stay to educating nurses about how the impact of communication with patients affects a patient's level of comfort, and ultimately their overall satisfaction. Patient advocates have to communicate well, with a wide range of constituents, in order for the patient to have the best possible experience.

Patient advocates and SHCA staff share some things in common

While we clearly work in very different settings we both want to serve our customers to the best of our ability. We are always looking for new ways to improve our customer's experience with our organization. And we all have to deal with frustrations caused by technology!

While I still have a lot to learn, I definitely have a better understanding of what you, the member, goes through on a day-to-day basis, which will ultimately help me do my job better. If you would like to contact me directly I would love to hear from you with comments, suggestions or questions. Please feel free to drop me an email at lurban@aha.org.

Liz Urban

Program Manager – Society for Healthcare Consumer Advocacy



SHCA Education Update



SHCA Domains of Practice
Certificate Program



SHCA is pleased to announce the dates for our Domains of Practice certificate program for 2013. This curriculum serves as the “Essentials” for effective healthcare patient advocacy, so whether you are new to the profession or looking for education on a specific area of patient advocacy, the Domains have what you need. The modules are presented in a webinar format and members receive discounted pricing. You can either purchase each module individually or select the season pass for even greater savings.

SHCA 2013 Domains of Practice Module	Webinar Date (all 2013)
Module 1: Patient Advocacy	January 16
Module 2: Healthcare Management – Leadership	February 13
Module 3: Healthcare Management – Administration	March 13
Module 4: Business Communication	April 17
Module 5: Interpersonal Communication	May 15
Module 6: Conflict and Conflict Resolution	June 19
Module 7: Grievance and Complaint Management	July 17
Module 8: Crisis Planning and Crisis Communication	August 14
Module 9: Qualitative Research Methods & Data Analysis	September 11
Module 10: Quantitative Research Methods & Data Analysis	October 16
Module 11: Data Management	November 13
Module 12: Customer Service and Customer Excellence	December 11

For more information, and to register, visit the education section of the SHCA website:
www.shca-aha.org/shca-aha/education/competency/9domains_curriculum.html#mod_fees

Leaders Learn from Leaders - SHCA 2013 Call for Domains Faculty is now open

SHCA is seeking faculty with excellent teaching abilities to help us shape the future of patient advocacy through high quality instruction. We have a number of faculty positions open for the 2013 Domains of Practice curriculum, so consider applying today. Visit www.surveymonkey.com/s/ZM96LBW for more information.

SHCA Education Update (*continued...*)

SHCA Hot Topic Webinars - New for 2013!

In an effort to increase our member benefits and provide timely educational opportunities to our members SHCA will be launching a brand new webinar series in 2013. Hot topic webinars will be held quarterly and will cover pressing issues in patient advocacy and the healthcare field.

The first webinar, scheduled for February 20, will focus on complaints and grievances and will feature a live Q&A session for attendees. The session will be available for purchase after the live webinar for those unable to participate on the day.

Members can purchase each webinar separately for just \$79 or select the bundle of all four programs for \$199, which is a savings of nearly 40%! The webinar format is a convenient and affordable way for you and your colleagues to continue your education. Just pay one fee, provide one computer and speaker phone, and invite as many people to listen and watch as you wish!

Sign up for the February Hot Topic webinar at: <http://tinyurl.com/dyggq2kf>

Purchase the Hot Topic bundle at: <http://tinyurl.com/cmscsmy>

New Complaints and Grievances Publication Coming Soon!

SHCA's Publications Committee is in the final stages of developing a brand new educational resource. This resource, entitled A Patient-Centered Approach to Handling Complaints and Grievances has been designed as a handy go-to resource for patient advocates, and others in healthcare organizations, anticipate, meet, and even exceed the expectations of patients receiving care.

The publication is a quick reference to the Centers for Medicare and Medicaid Services (CMS) regulations regarding the complaint and grievance management process and includes background on the creation and evolution of the CMS regulations, the intent of the guidelines, and examples of policies to assist in managing grievances and complaints more effectively in one's organization. Stay tuned as more information will be available in early January.

SHCA Leaders Welcome New Members

New members are the lifeblood of a growing organization and we are excited to welcome the following members, who recently joined, into the SHCA family. We look forward to helping you grow professionally and personally in 2012 and beyond.

Kathleen Adamski
 Claire Aragon
 Choo Chan
 Bradley Clark
 Natalie Cruse
 Julie Danker
 Cheri Glockner

Lisa LaPierre-Lee
 Carrie Law
 Vida Lock
 Elizabeth Mendoza
 Robyn Miller
 Chris Ruggeri
 Jana Sperry

New Member Spotlight

Carrie Law

Advocate Supervisor
 Stormont-Vail HealthCare
 Topeka, KS

Tell us about your facility:

Stormont-Vail Regional Health Center is a fully accredited acute-care referral center for northeast Kansas. We provide services for hospitalized patients, as well as for a growing number of outpatients. We are the second oldest hospital in Kansas.

How long have you been in the healthcare field?

Not long! I began my career at Stormont-Vail in September 2012. Prior to that time, I worked in the funeral industry and a big-box retail environment.

What is your current role and what do you like the most?

I am the Patient Advocate Supervisor. We have a team of four employees and eight volunteers. We have the

privilege of visiting our patients and their family members daily to ensure their healthcare needs are being met and that they are satisfied with their stay.

Describe the value you find in being a member of SHCA:

I look forward to learning and growing in this field. I'm sure the information I'll gain from other SHCA members - and from the organization itself - will benefit my staff and me.

