

# **Achieving the Optimal Patient and Family Experience 2018 National Expert Advisory Panel**



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## Letter from the Executive Director

We are pleased to share the proceedings from our fourth annual meeting of the Sala Institute for Child and Family Centered Care (Sala) National Expert Advisory Panel (NEAP), a group of nationally recognized thought leaders and experts in the areas of patient engagement, safety, resilience, outcomes research, education and learning, technology, and children's healthcare. This year's meeting was held at NYU Langone Health in October 2018. Attendees included members of the NEAP, guest speakers, and colleagues from the newly formed Sala Internal Professional Advisory Group. (See Appendix A for a full list of NEAP members and participants.)

The goal of this report is to share a summary of the meeting's presentations and discussions as well as to demonstrate how the meeting outcomes will help shape Sala's vision and strategic goals for the next five years. As we look to the future, we are energized by the exciting work ahead.

Sincerely,



Fiona H. Levy, MD  
Executive Director, Sala Institute for Child and Family Centered Care  
Vice Chair for Clinical Affairs, Department of Pediatrics

## Background and Overview

Sala was founded with a vision to create an enduring, broad, and flexible family centered culture that would best serve children at Hassenfeld Children's Hospital at NYU Langone and beyond. Leveraging key areas of focus—resilience, experience, quality and safety, and learning—we have worked in partnership with patients, families, and healthcare professionals to guide the evolution of a family centered culture at Hassenfeld Children's Hospital. Within the unique structure of Sala, the four centers function to design, promote, and fund the implementation of new programs and initiatives that are integral to the care provided at Hassenfeld Children's Hospital.

The fall of 2018 marked the fifth anniversary of Sala and provided the impetus to reflect on past achievements and to plan for opportunities ahead. Throughout the last five years, many people and events have informed the creation of Sala-supported programs and initiatives. Going forward, we look to the output of the 2018 NEAP meeting and the recommendations from the Sala Year-Five Programmatic Assessments as two key influences in the design of a Sala Strategic Plan for our next five years. (See Appendix B for details on the Year-Five Programmatic Assessments.)

During Sala's first five years, our efforts were focused on the recruitment of needed expertise and building of foundational programming in support of family centered care, resilience, and quality and safety at Hassenfeld Children's Hospital. For our next five years, we are now positioned to build upon this foundation, leveraging Sala's unique structure and key partnerships, and direct our efforts in support of an optimal patient and family experience at Hassenfeld Children's Hospital.

**As we prepare to advance this work, we do so with the belief that to achieve an optimal patient and family experience, we must consider "experience" through a broader lens than before, now accounting for safety and quality, satisfaction, engagement, and resilience synergistically and simultaneously. It is on the basis of this tenet that we invited attendees of the NEAP meeting to inform our strategic approach to this work.**

## NEAP Meeting Introduction

The meeting began with Fiona H. Levy, MD, Executive Director, Sala Institute for Child and Family Centered Care, sharing how and why the Sala leadership team arrived at the topics of discussion and goal for the 2018 NEAP meeting.

Dr. Levy explained that Sala leadership identified three potential drivers of patient and family experience viewed through our proposed broader definition: learning, technology, and staff resilience. The selection of these three levers was informed by the many people and experiences that have shaped the work of Sala over the last five years and the results of our recent Sala Year-Five Programmatic Assessments.

Dr. Levy explained the goal of the NEAP meeting was to develop an understanding of how Sala could:

- **Create learning opportunities for trainees, staff, healthcare professionals, patients, and families that support the practice of patient and family engagement**
- **Harness the power of technology to facilitate patient and family engagement**
- **Address the emotional, psychosocial, and physical needs of frontline staff and providers so they are prepared, able, and willing to engage with families**

Dr. Levy shared the meeting design and flow and suggested that to meaningfully discuss and plan Sala's future focus, we needed to understand Sala's past and present successes and opportunities. The meeting continued with the Sala executive director and two of the center directors highlighting a few of Sala's achievements over the last five years, including strengths and opportunities for improvement and advancement.

# NEAP 2018 Meeting Agenda

- Brief overview of Sala Centers' achievements to date and review of year-five Programmatic Assessment findings presented by Sala center directors and Sala Institute executive director
- Keynote talk on current state of patient experience presented by national content experts
- Presentations on learning, technology, and staff resilience presented by content experts, each subsequently followed by a facilitated panel with group discussion
- Synthesis of NEAP common themes and recommendations

## Sala: From Foundation Building to Innovation

K. Ron-Li Liaw, MD, director, KIDS of NYU Foundation Center for Child and Family Resilience, and Lucy Pereira-Argenziano, MD, director, Center for Patient Safety and Quality, presented brief summaries of the work that has been accomplished. Dr. Levy presented the summary on the Center for Child and Family Experience as well as an overview of the Year-Five Programmatic Assessments conducted by external national experts that helped inform the focus areas and approach proposed to the NEAP.

### KIDS of NYU Foundation Center for Child and Family Resilience (CCFR) Fostering excellent care, comfort, and well-being

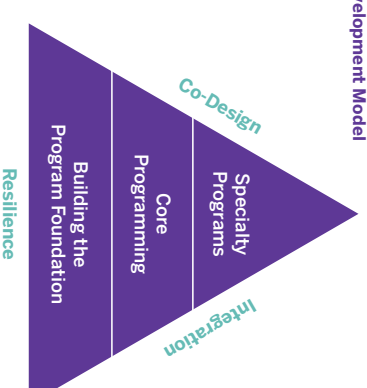
Dr. Liaw reflected that CCFR's work for the first five years focused on building psychosocial programmatic foundations and closing staffing gaps in areas such as child life, social work, child psychology, pain management, spiritual care, and nutrition.

With the foundation laid and support from Sala, Dr. Liaw and her colleagues were enabled to swiftly enhance and develop specialty programs to provide coping, comfort, and resilience support for children, families, and staff, always following a structured approach: building on a strong programming foundation, adopting the practice of co-design, integrating into existing work, and driving toward child and family resilience (Figure 1.)

#### ➤ Key Achievements:

- Implemented the Family Stress Screening and Response System in Pediatric Acute and Intensive Care
- Established the Integrated Behavioral Health Program at the Fink Children's Ambulatory Care Center
- Enhanced effective pain management for infants and children
- Harassed expertise to establish the Pediatric Advanced Care Team (PACT) and Pediatric Integrative Health Programs

Figure 1: Program Development Model



## Center for Patient Safety and Quality (CPSQ) Working as a team to eliminate preventable harm

Dr. Pereira-Argenziano described CPSQ's initial priority to build a robust infrastructure with the goal of eliminating preventable harm to infants, children, and young adults at Hassenfeld Children's Hospital through the provision of safe, effective, and high-quality care.

The work began with the implementation of foundational elements of a quality and safety program (Figure 2.) These included:

- Recruiting leaders with expertise in safety and improvement science
- Engaging existing clinical leaders in safety and improvement work
- Establishing a quality and safety committee and data infrastructure within Hassenfeld Children's Hospital
- Participating in international safety and improvement collaboratives in order to speed the adoption of best practices and grow expertise
- Beginning work to improve family engagement in harm prevention

With the support of Sala, teams of clinical leaders and frontline staff identified key standards of excellence and are working to achieve consistent implementation across all of Hassenfeld Children's Hospital.

### ➤ Key Achievements:

- Led participation in and execution of CHSPS Hospital Acquired Condition Reduction Work
- Facilitated participation in key national pediatric care improvement collaboratives such as Improving Pediatric Sepsis Outcomes
- Provided expertise and leadership to Cause Analysis program for risk detection, analysis, mitigation, and corrective action
- Supported and provided expertise for implementation of the medical center's work to become a High Reliability Organization

Figure 2: Driving Safety and Quality at Hassenfeld Children's Hospital



## Center for Child and Family Experience (CCFE) Engaging children and families as partners

Dr. Levy explained that one of CCFE's initial priorities had been the building of key partnership programs that would serve as the foundation of much of Sala's work to come. These included the Sala Family and Youth Advisory Councils, Sala Family Advisors, Sala Patient and Family Faculty Program, and the Sala Knowledge Library.

Following the inception of this foundational programming, the center has focused on developing and implementing innovative programming in support of child and family centered care at Hassenfeld Children's Hospital. As a result of our patient and family partnership programs (Figure 3), we are able to

- Prepare family members to serve on hospital committees
- Provide peer support to families whose children are receiving care throughout Hassenfeld Children's Hospital
- Partner with expert clinicians to teach family centered care principles to staff and trainees

- Participate in the co-design of key hospital programs and initiatives, uniting the distinct expertise of health professionals, children, and families to advance the care at Hassenfeld Children's Hospital

### ➤ Key Achievements:

- Grew Sala Family and Youth Advisory programs in size, diversity, and breadth of partnership
- Supported the child and family education program through MyWall, Welcome Materials, and the Sala Knowledge Library
- Advanced the Sala Patient and Family Faculty Program
- Engaged family members to serve on our Hassenfeld Children's Hospital safety and quality improvement teams
- Supported implementation of family centered care best practices

Figure 3: Patient and Family Partnership Programs





## Year-Five Programmatic Assessments

In the late summer and fall of 2018, we undertook three separate programmatic assessments of patient and family centered culture, the Quality and Safety Program, and the Pediatric Advanced Care Team (PACT) at Hassenfeld Children's Hospital. These assessments provided an external expert review of the effectiveness, breadth, and depth of Sala-supported programs.

The three assessments were structured similarly. They were conducted by nationally recognized experts, and each included a review of written materials, interviews with staff and parents of hospitalized children, and the observation of delivery of care within Hassenfeld Children's Hospital.

The assessments identified areas of strength and opportunity within each of the programs as well as several high-level themes that spanned all of the programs. Dr. Levy summarized the findings from the program assessments in order to inform the subsequent discussion regarding Sala's future strategic plan. (See Table 1 for summary findings.)

Table 1: High-level strengths and opportunities identified during programmatic assessments

Strengths	Areas of Opportunity
<p><b>Infrastructure</b></p> <ul style="list-style-type: none"><li>• Strong Hassenfeld Children's Hospital leader support for Sala and its programs</li><li>• Successful integration of Sala programs into the infrastructure and operations of Hassenfeld Children's Hospital</li><li>• Interdisciplinary nature of Sala team and core programs</li><li>• Strong family partnership in co-design and implementation of initiatives</li><li>• Improved attention and focus on quality and safety through a firmly established quality and safety program</li></ul> <p><b>Expertise</b></p> <ul style="list-style-type: none"><li>• Keen respect for Sala team's expertise and engagement</li><li>• Demonstrable track record of and commitment to development of unit clinical leaders to lead safety work</li></ul> <p><b>Family Centered and Safety Culture Foundations</b></p> <ul style="list-style-type: none"><li>• Broad recognition and appreciation of the importance of family centered care, family partnership, and safety</li><li>• Evident creation of a strong cultural foundation over five years developing, implementing, and supporting initiatives and quality outcomes</li><li>• Demonstrable organizational value placed on family centered care, family partnerships, and safety as evidenced by families on committees and on staff</li><li>• Visible implementation of national best practices</li><li>• Demonstrable growth of PACT services across in-patient setting and integration into the culture of caring for seriously ill children and their families</li><li>• Ready access to useful information and operational data for Palliative Care consults</li></ul>	<p><b>Program Expansion</b></p> <ul style="list-style-type: none"><li>• Mature the quality improvement portfolio of work to match the strength and breadth of the safety work</li><li>• Further practices of a "just culture" across all areas of Hassenfeld Children's Hospital</li><li>• Expand current efforts to ambulatory setting and perioperative areas</li><li>• Ensure consistency of safety practices</li><li>• Ensure consistent application of family centered practices and implement additional practices, such as leader rounding</li><li>• Focus more on innovation as a way to integrate the work of all three centers</li><li>• Develop programming for staff resilience to support engagement with patients and families</li><li>• Develop and implement approaches to provide care coordination</li><li>• Enhance PACT inpatient clinical service efficiency to allow for development of outpatient programs</li><li>• Continue to expand PACT</li><li>• Spread existing quality improvement expertise to PACT</li><li>• Continue to grow PACT to support staff</li><li>• Develop opportunities to partner with patients and families for PACT</li></ul> <p><b>Measurement</b></p> <ul style="list-style-type: none"><li>• Develop a more comprehensive measurement strategy in order to assess the quality and consistent use of standard practices and to assess the intended outcomes of the intervention</li><li>• Identify and track additional clinical and financial metrics for PACT</li></ul> <p><b>Education</b></p> <ul style="list-style-type: none"><li>• Develop a formalized, coordinated education program for Hassenfeld Children's Hospital staff and trainees, including ongoing competencies and orientation</li><li>• Enhance education to clinical team about the added value of PACT</li></ul>

To explore our belief that patient and family experience should be viewed through a broader lens than previously considered, we invited nationally recognized experts from the field of patient experience to provide the keynote address.

# Keynote Address:

## A Strategic Blueprint for Transformational Change: Imperatives for Patient Experience in Hospitals across the United States

During the Keynote address, Rachel Biblow, Press Ganey senior vice president of transformational solutions, and James Merlino, MD, Press Ganey chief transformation officer, shared their expertise in the field of patient experience and their knowledge of national efforts. Ms. Biblow and Dr. Merlino presented frameworks that highlighted the complexities of patient and family experience in the care of children and offered what they consider to be imperatives in our attempt to transform current efforts to improve experience to highly reliable, highly integrated work with significant impact for patients, families, and staff.

Ms. Biblow began by emphasizing the critical interdependency of safety, quality, and patient centrity as the primary elements of patient and family experience. These elements can be optimally achieved only when care teams are engaged and supported by the system. Dr. Merlino expanded upon this idea, explaining that while patient experience started as simply measuring satisfaction or focusing on "customer service," it has evolved to encompass all components of care: "Experience is not about happiness, it is about how we deliver care."

With this holistic definition of experience in mind and supporting Sala's broadening approach to patient and family experience, Ms. Biblow recommended three best practices to approach transforming the experience of care (Figure 4):

- Inventory current state of initiatives and programs contributing to each element of experience in order to consolidate and prioritize.
  - Agree on and embrace a definition of patient experience based on the unique culture at Hassenfeld Children's Hospital in order to be intentional about improving the patient experience. A clear definition of experience leaves little open to interpretation.
  - Develop strong leaders with a shared plan to create a culture of engagement that drives critical competencies of empathy, emotional intelligence, and managing people. Integration and prioritization of these competencies ensures everyone is working as a team toward the same goal of optimal experience.
- In reflecting on his own experience as a surgeon and national leader in patient experience, Dr. Merlino noted, "We know how to do the clinical piece really well; our challenge is to take care of the people aspect." The "people aspect"—creating an engaged culture and addressing people and systems that degrade the culture—is what will help drive patient and family experience.

Figure 4

### Top Three Best Practices





## Learning, Technology, and Resilience: Presentations, Facilitated Panels, and Group Discussion

After meeting participants were provided background on Sala's vision, foundational programs and achievements, strengths and opportunities, and the need for transformational change as hospitals across the country work to address patient experience, they were asked to discuss three selected focus areas—learning, technology, and staff resilience—as drivers of patient and family experience at Hassenfeld Children's Hospital.

### For each of the three topics:

- Content experts gave brief presentations designed to provide context for the focus area, specifically on existing work at Hassenfeld Children's Hospital and NYU Langone and on trends and progress in the national landscape.
- Sala leaders facilitated small panel discussions during which panelists shared their reflections and expertise in response to the prior presentation and facilitator questions.
- Meeting attendees joined in open questions and discussion.
- Presentations and panel discussions were guided by three to four specific questions designed to challenge thinking and stimulate group discussion.





## Session 1: The Learning Environment as a Catalyst of Patient and Family Engagement in the Moment of Care

**Speakers:** Heather Howell, MD, assistant professor of pediatrics and director of the Pediatric Residency Program at the NYU School of Medicine, and Donna Hallas, PhD, clinical professor of nursing and director of the Pediatric Nurse Practitioner Program at the NYU Rory Meyers College of Nursing

**Panelists:** Steve Muething, MD; Donna Hallas, PhD; Leora Horwitz, MD; Heather Howell, MD; Beth Silber, MPA, Sala family advisor

### Session 1 Guiding Questions:

- Building on your skills and knowledge in the field of medical education, what is the current state/near future state of healthcare professional education as a facilitator of patient and family engagement?
- What can learning environments do to advance or encourage patient and family engagement?
- What is the risk of not addressing patient and family engagement in student and staff education?

### Session 1 Presentation:

In reflecting on their experiences at NYU Langone and work across the country, Dr. Howell and Dr. Hallas both shared that building foundational knowledge of family engagement and preparing medical residents and nursing students to effectively engage with patients and families are key components to driving experience of care for both the clinicians and patients and their families. Dr. Howell noted that residents perceive family engagement as important, but due to the current models of training and gaps in training curricula, residents often lack the confidence in advanced communication with patients and families, potentially hindering optimal patient and family engagement. Dr. Hallas expressed the same sentiment for nursing students, recommending prioritizing problem-based and simulation-based learning to supplement existing classroom sessions. These training approaches provide students and trainees with an opportunity to master skills required for effective patient and family engagement, including critical thinking abilities and interpersonal skills.

### Session 1: Summary of Key Points from Presentation, Panel, and Group Discussion

1. Improved experience of care for patients, families, and staff requires that healthcare professionals and trainees acquire foundational knowledge of family engagement.  
While many trainees and young professionals learn by modeling the engagement behaviors of senior clinicians, rarely is there opportunity for direct training on family engagement. Additionally, the national trend of increased supervision of trainees has led to more observation than practice of engagement behaviors. This can lead to variation in practice, something often noted by patients and families. Explicit training could help clarify behavioral expectations and embed patient and family engagement principles into a competency or skill-based assessment, increasing reliability and consistency of patient and family engagement practice across the institution.
2. Patients and families may benefit from receiving guidance and education on engaging with their care team.  
Families do not necessarily know how to effectively engage with their care team; providing them with more support on how to partner with providers could benefit both staff and families. This might also better prepare patients and families with what to expect when being cared for in an academic medical center and could give families a more complete and accurate understanding of how their team communicates, who the different providers are, and options on how best to engage their team to meet their unique goals.
3. There is an opportunity to broaden the type of learning modalities used when building foundational knowledge of patient and family engagement as a driver of family centered culture, safety and quality, and staff resilience.  
There are multiple learning opportunities in which foundational knowledge can be built, including a Hasenfeld Children's Hospital staff and physician orientation, interprofessional didactic sessions, and immersive simulations with debriefs and feedback.  
In order to build foundational knowledge that is consistent and applicable across all members of the care team, a standard curriculum should be developed that considers the breadth of individuals who interact with patients and families throughout a hospital admission and across the care continuum.





## Session 2: Harnessing the Power of Technology to Facilitate Patient and Family Engagement

**Speaker:** Nader Mherabi, senior vice president, vice dean, and chief information officer, NYU Langone Health

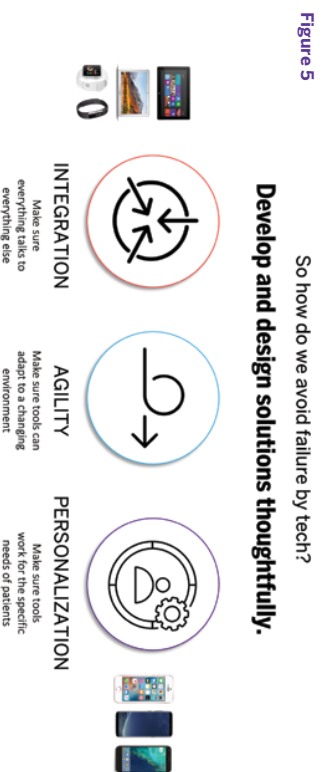
**Panelists:** Kathy Gorman, MSN, RN; Devin Mann, MD; Nader Mherabi; Michael Smith, JD, family advisor

### Session 2 Guiding Questions:

- Building on your expertise in this field, what is the current state/near future state of technology as a facilitator of family engagement in care?
- What can technology bring to the table to enhance partner partnerships?
- What is the risk of not using technology to enhance family partnership?
- Does use of technology pose any inherent risk to engaging families?

### Session 2 Presentation:

In reflecting on his experiences at NYU Langone and beyond, Mr. Mherabi shared that the majority of people in the United States use digital tools in most aspects of their lives and so now more than ever technology has gained traction in healthcare, helping facilitate patient and family engagement and supporting patient/provider communication. Mr. Mherabi suggested that patient and family engagement has the potential to continue to infinitely benefit from digital tools. He stressed that in order to be successful, these tools need to be created securely, thoughtfully, and with significant provider and family involvement. Mr. Mherabi highlighted three key concepts critical to the creation of technologic solutions (Figure 5).



### Session 2: Summary of Key Points from Presentation, Panel, and Group Discussion

1. There are four primary areas of patient and family engagement where tools can be deployed and used to enhance care: real-time communication, condition-specific education and community building, logistics and care management, and real-time observation/monitoring. In order to be successful, IT integration needs to prioritize the advancement of patient and family engagement while ensuring functionality for both clinicians and patients and families.
2. When considering implementation of new technologies, we must ensure that providers, staff, and patients and families are engaged beginning in the planning phase. Opportunities are often missed when discussions about selection and implementation of technology happen in silos. Providers and families conveyed the importance of integrated and agile technology that limits the number of platforms or applications needed and can be easily accessed from any device or location. Technologies should be co-designed to promote flexibility and personalization when possible to meet varying needs of providers, patients, and families.
3. The maturation of technology beyond today's electronic medical record that can "tell the patient story" could have a large impact on the experience of care for both providers and patients and families. Families are often asked to repeat information for different care team members and in different care settings. From the family perspective, this can impede building trust with the medical team, and from a provider perspective, there is concern that information may be inadvertently omitted or inconsistent.
4. There is opportunity for technology to have a great impact on patient and family education. Technology can take patient and family education beyond handouts to two-dimensional and three-dimensional technologies, which could exponentially increase the experience, understanding, and safety of care.





## Session 3: The Role of Staff Resilience in Fostering Patient and Family Engagement

**Speakers:** K. Ron-Li Llaw, MD, director, KIDS of NYU Foundation Center for Child and Family Resilience and Annie Robinson, MS, wellness program facilitator, NYU School of Medicine

**Panelists:** Bernard Dreyer, MD, Annie Robinson, MS, Cindy Christian, MD, Leilani Schweitzer, K. Ron-Li Llaw, MD, Sara Chokshi, DrPH, family advisor

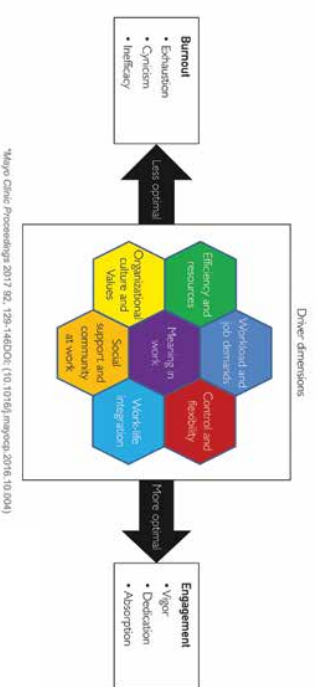
### Session 3 Guiding Questions:

- Building on your expertise in this field, what is the current state/near future state of staff resilience?
- How can environments that foster staff resilience enhance provider, patient, and family engagement?
- What is the risk of not fostering staff resilience?
- Does fostering staff resilience pose any inherent risk to the quality of care, productivity of staff, or level of engagement with families?

### Session 3 Presentation:

Dr. Llaw and Ms. Robinson discussed the recent national call to action to identify and address contributors to burnout in medical schools and throughout academic medical centers. Together, they highlighted some of the more commonly ascribed causes of burnout across the individual, local, and system levels (Figure 6). The symptoms of burnout result in a disengaged workforce that could significantly impact the experience of care—both satisfaction and outcomes—for patients and families. They shared strategies being adopted nationally to reduce burnout and to promote engagement, and they discussed the resources and practices that the NYU School of Medicine has recently adopted to promote medical student well-being.

**Figure 6**  
**Key Drivers of Burnout and Engagement**



### Session 3: Summary of Key Points from Presentation, Panel, and Group Discussion

1. Develop staff resiliency programming based on the notion that healthcare providers are inherently resilient and that there is inherent reward in caring for children and their families. Positive relationships with patients and families contribute significantly to providing meaning to the work of healthcare professionals. We should consider providing staff training in effective and transparent communication as a way of bolstering these valued relationships and therefore improving resiliency.
2. Consider a shift in focus from building the resiliency of individuals to preventing and reducing individuals' stress, particularly from inefficient systems. There is opportunity to work toward eliminating unnecessary processes that waste time and resources and lead to frustration and stress. Additionally, when thinking about designing new systems and processes, consider staff satisfaction, as well as staff capacity, capability, and readiness to take on something new.
3. Address the inherent stress of caring for sick children and their families. There is opportunity to offer staff the same support we provide currently for patients and families. Can we make space and time for reflective practice, wellness resources, support, and debriefings?
4. Build systems or processes that make it easy to give positive feedback and express gratitude to interprofessional colleagues at all levels of the institution. Positive and impactful actions occur daily and recognition promotes joy in work, but there is no easy mechanism to deliver positive feedback currently at Hassenfield Children's Hospital.

# Putting It All Together

By the conclusion of the 2018 NEAP meeting, we had identified three well-defined areas of opportunity to inform the goal of optimal patient and family experience at Hassenfeld Children's Hospital.

## 1. Advance the foundational knowledge of family centered care principles and practices for healthcare professionals, staff, and patients and families.

Considerations for achievement:

- Focus on a standardized curriculum that incorporates critical competencies and behaviors for all care team members throughout Hassenfeld Children's Hospital.
- Ensure leaders at all levels promote the practice of continual learning.
- Incorporate a wide range of influences, from technology to interprofessional collaboratives, to create and innovate the standardized curriculum and approach to family centered care training. Training should provide an opportunity for staff to practice and receive feedback from peers and families.
- Provide patients and families with a variety of learning opportunities that support them in their engagement with the healthcare team. Ensure that these are individualized and flexible in order to meet patients and families where they are in the healthcare journey.

## 2. Create capacity in our staff to have meaningful engagement with patients and families by simultaneously addressing healthcare professional and staff well-being and by improving efficiencies in existing systems and processes.

Considerations for achievement:

- Build upon the inherent resiliency of healthcare providers by giving staff opportunities to receive and provide support and to share successes and gratitude.
- Promote provider and staff engagement and wellness as the positive antithesis of burnout, characterized by vigor, dedication, and absorption in work.
- Promote partnership with patients and families as a key contributor to joy in work, and use varying learning modalities to teach family engagement through all levels of the organization.
- Focus on reducing added stress that comes from having inefficient processes and systems. These processes and systems are often the cause of variation in staff engagement with patients and families.
- Encourage technology solutions to be integrated into processes when it can facilitate elimination of waste and when there is benefit for providers and patients and families.
- Ensure technology is co-designed or chosen with provider and patient and family input to implement technologies that are integrated and sustainable. Technologies should be integrated to avoid having providers, patients, and families navigate between many different platforms or applications. These technologies need to be easily adopted as part of routine practice for providers and to effectively engage patients and families.

## 3. Augment the current center, department, and project-based approach to improving patient experience and safety with one that is integrated around a shared goal to optimize the experience of care for patients, families, healthcare professionals, and staff.

Consideration for achievement:

- Develop an integrated goal that promotes the convergence of safety, clinical excellence, workforce engagement and well-being, and patient and family experience to achieve optimal experience of care.



## Moving Forward: Sala's Strategic Plan 2019–2023

We believe that with strong foundational programming in place at Hassenfeld Children's Hospital and the unique structure of Sala, we are well positioned to leverage our expertise and resources and direct our efforts to optimize the patient and family experience in a manner that synergistically and simultaneously addresses safety and quality, satisfaction, engagement, and resilience. The 2018 NEAP meeting provided support for this goal and important guidance in how to approach the work.

Uniting the learnings from the NEAP meeting, the results of our Sala Year-Five Programmatic Assessments, the thoughts of a newly formed Sala Internal Professional Advisory Group, and the observations and priorities of leaders from Hassenfeld Children's Hospital, we created a Sala Strategic Plan that accounts for center-specific efforts to sustain and advance existing programming and defines an ambitious, integrated Global Aim to guide our work for the next five years:

**Global Aim: To leverage Sala in support of Hassenfeld Children's Hospital leadership, to optimize patient and family experience through creating and sustaining a patient and family centered culture, providing safe and quality care, and developing and supporting a resilient workforce.**

As a first step in achieving our Global Aim, we have defined a Strategic Goal for fiscal year 2019. In doing so we required that the goal:

- Align with Sala vision and ongoing center-specific operational work
- Include a measurement strategy that aligns with existing data requirements and priorities, provide no additional burden to clinical staff, include opportunities for point of care measurement, and be reflective of a broader definition of patient and family experience that includes satisfaction, safety, and resilience
- Consider recommendations from the NEAP meeting and external expert Year-Five Programmatic Assessments, and accounts for Hassenfeld Children's Hospital leadership and staff priorities
- Support achieving our Global Aim
- Be viewed as achievable and important

### Sala Integrated Strategic Goal for Fiscal Year 2019

**To improve patient and family experience in a target unit as measured by a 20 percent improvement in a composite experience measure\* by August 31, 2019.**

Driving our ability to meet this goal will be:

- **New work targeting staff wellness and engagement**
- **Continued and enhanced efforts to ensure consistent patient and family engagement**
- **Unrelenting attention to achieving excellent safety outcomes**

Across these efforts will be adherence to the principles of:

- **Creating a compelling case in support of change**
- **Improved efficiency of key operational processes**
- **Fostering a learning environment that supports patient and family engagement**
- **The practice of co-design**
- **Leveraging technology**

We are excited to continue our journey, building upon five years of work and advancing efforts in support of the children and families cared for at Hassenfeld Children's Hospital and the healthcare professionals and staff who deliver the care.

\*Our planned composite measure includes a patient and family feedback component coupled with a safety measure. Patient and family feedback will be captured through a survey, using existing validated questions. The safety measure used will be a Serious Harm Event score that represents the count of serious harm events that occur in Hassenfeld Children's Hospital.





## Appendix A

## NEAP Members in Attendance

**Maren Batalden, MD, MPH**, is associate chief quality officer, associate director of Graduate Medical Education for Quality and Safety, and director of Medical Management within the Accountable Care Organization at the Cambridge Health Alliance (CHA) in Cambridge, Massachusetts. The CHA is an integrated healthcare delivery system that includes a network of primary care clinics, three emergency departments, two community hospitals, comprehensive behavioral health services, and a public health department. Dr. Batalden provides leadership for improvement initiatives in the domains of inpatient care, care transitions, and cross continuum population health projects for patients with chronic disease. She is clinically active as a hospitalist and is engaged in teaching quality, safety, and systems improvement to undergraduate, graduate, and mid-career health professional learners. In all of her work—as a practicing clinician, an educator, and a leader of institutional change projects—she is interested in using the lens of co-production to catalyze more effective partnership between patients and health professionals.

Dr. Batalden completed her undergraduate education at St. Olaf College in Minnesota and earned a master's degree in public health from the University of North Carolina at Chapel Hill. She graduated from Harvard Medical School and completed a residency in internal medicine at the Brigham and Women's Hospital in Boston, Massachusetts. She is an assistant professor in medicine at Harvard Medical School.

**Cindy W. Christian, MD**, holds the Anthony A. Latini Endowed Chair in the Prevention of Child Abuse and Neglect at The Children's Hospital of Philadelphia (CHOP). She is a professor of pediatrics and associate dean of admissions at the Perelman School of Medicine at The University of Pennsylvania.

Dr. Christian completed her pediatric residency and child abuse pediatrics fellowship at CHOP, where she has spent her career. For more than two decades, she directed the child protection program there. She is faculty director of the Field Center for Children's Policy, Practice and Research at The University of Pennsylvania. She is a past chair of the American Academy of Pediatrics Committee on Child Abuse and Neglect, and the immediate past chair of the sub-board on Child Abuse and Neglect for the American Board of Pediatrics. From 2010–2015, Dr. Christian served as the first medical director for the Philadelphia Department of Human Services, leading the development of policies and strategies to improve the health of Philadelphia's dependent children.

**Bernard Dreyer, MD**, is a general and developmental behavioral pediatrician who has spent his professional lifetime serving poor children and families. Professor of pediatrics at NYU Langone, Dr. Dreyer leads the Division of Developmental/Behavioral Pediatrics, is director of pediatrics at Bellevue Hospital, and also works as a hospitalist. He was interim chair of the Department of Pediatrics at NYU Langone from 2004–2005 and from 2007–2008. For over 30 years, he led a primary care program at Bellevue, including co-located mental and oral health services and clinics in homeless shelters. His research is focused on interventions in primary care to improve early childhood outcomes, including early brain development and obesity.

Dr. Dreyer is a past president of the American Academy of Pediatrics (AAP), having served a one year term as president in 2016. He has been AAP NY Chapter 3 president, and a member of the Committee on Pediatric Research and the Executive Committee of the Council on Communications and Media. He co-chaired the AAP Health Literacy Project Advisory Committee, including editing the AAP publication *Plain Language Pediatrics*. He has served as a member of the Executive Committee of the Section on LGBT Health and Wellness. As president-elect, president, immediate past president, and now as a past president he has taken a leadership role in the AAP's Strategic Priority on Poverty and Child Health. He has been asked by the AAP to be the medical director of AAP Policies. The AAP publishes more than 80 policies, clinical reports, technical reports and clinical practice guidelines each year. He is also a member of the AAP Task Force on Addressing Bias and Discrimination, and on the Executive Committee of the Pediatric Academic Societies. Dr. Dreyer was president of the Academic Pediatric Association (APA), and founded and chairs the APA Task Force on Childhood Poverty and the APA Research Scholars Program. He also hosts a weekly radio show, *On Call for Kids*, on the Sirius XM Doctor Radio Channel.

**Kathleen Chananu Gorman, MSN, RN**, is executive vice president of Patient Care Services and chief operating officer at Children's National Health System since 2012.

Past leadership roles include senior vice president of patient care services and chief nursing officer (CNO) at The Children's Hospital of Philadelphia and assistant dean of clinical practice at the University of Pennsylvania School of Nursing. Previous to being the CNO, she was the vice president of quality and clinical support services at Children's National Health System.

Ms. Gorman received her bachelor's degree and Master of Science in nursing from the University of Nebraska Medical Center, College of Nursing. She is a nurse leader who has advanced patient safety, quality, and clinical resource management to improve care outcomes and inform policy for children and families. Ms. Gorman has presented and published extensively on quality, safety, outcomes, and leadership in healthcare. In advancing the national agenda on improving child health through pediatric quality, she has led and participated in committees under the National Quality Forum, The Leapfrog Group, Children's Hospital Association (CHA), American Board of Pediatrics, Institute of Medicine, and others.

Ms. Gorman serves on the Board of Directors for The DAISY Foundation, the Quality, Safety and Performance Committee for CHA, and Finance Committee for the American Academy of Nursing. She was the recipient of the distinguished Alumni Award for the University of Nebraska Medical Center and is a graduate from Wharton School of Business. Johnson & Johnson Nurse Executive Fellow program. She has been recognized as a top woman leader by *Becker's Hospital Review*.

Ms. Gorman was inducted as a fellow in the American Academy of Nursing in 2014. She is a member of the Leadership Greater Washington class of 2016 and in 2017, she was named to top female leadership in Washington, D.C. as "Woman Who Mean Business".

**Leora Horwitz, MD, MHS**, is director of the Center for Healthcare Innovation and Delivery Science at NYU Langone, director of the Division of Healthcare Delivery Science in the Department of Population Health at NYU School of Medicine, associate professor of Population Health and of Medicine at NYU Langone, and a practicing hospitalist. Her research focuses on improving the safety and quality of healthcare delivery, particularly in the context of transitions in care. Prior to NYU Langone, she was on faculty at Yale where in addition to conducting federally-funded research on transitions in care, she chaired the Yale-New Haven Hospital Physician Handoff Committee and Readmission Committee and developed quality measures for the Centers for Medicare & Medicaid Services. At NYU Langone, among other projects, Dr. Horwitz is the PI of the AHRQ-funded NYU Langone Patient Imaging Quality and Safety (PIQS) Laboratory, and is PI of the CMMI-funded Greater New York City Practice Transformation Network.

**Fiona Levy, MD**, serves as the inaugural executive director of the Sala Institute for Child and Family Centered Care at Hasenfield Children's Hospital at NYU Langone, and vice chair for Clinical Affairs for the Department of Pediatrics at New York University School of Medicine. Dr. Levy came to NYU Langone from the Cohen Children's Medical Center of New York, where she served as the chief quality officer for Cohen Children's and the Pediatric Service Line at the North Shore-LIJ Health System, and professor of Pediatrics at Hofstra North Shore-LIJ School of Medicine.

Prior to her return to her hometown of New York City, Dr. Levy was the vice president for Quality and director of Hospital Access and Inpatient Services at Children's Medical Center Dallas and professor of Pediatrics at UT Southwestern School of Medicine.

Dr. Levy earned a bachelor's degree in chemistry from Wellesley College, and received her medical degree from New York Medical College in Valhalla, New York. She completed a residency in pediatrics at SUNY Health Science Center in Syracuse, New York and a fellowship in critical care medicine at Children's Hospital and Medical Center, Seattle, Washington.

Dr. Levy also has a master's degree in business administration from Washington University in St. Louis. Dr. Levy has served as a member of the Patient Safety Team for the Child Health Patient Safety Organization, The Clinical Steering Team for Children's Hospitals' Solutions for Patient Safety, and currently sits on the Children's Hospital Association Quality and Performance Committee of the Board of Trustees.

**K. Ron-Li Liaw, MD**, is the director of the Sala Institute Center KIDS of NYU Foundation Center for Child and Family Resilience, chief of service for Child and Adolescent Psychiatry and co-director of the Pediatric Psychiatry Consultation-Liaison Service at Hasenfield Children's Hospital at NYU Langone. Dr. Liaw is a clinical associate professor of Child and Adolescent Psychiatry at the NYU School of Medicine and pediatric integration and quality leader for the Department of Child and Adolescent Psychiatry. Her areas of expertise include children's and families' responses to acute and chronic stress, trauma, and resilience, co-morbid medical and mental health issues, patient and family-centered care, integrated care and systems redesign, wellbeing and strength-based approaches to health promotion and family empowerment.

Dr. Liaw received her bachelor's degree in anthropology from Rice University and her medical degree from Baylor College of Medicine with High

honors. She completed her adult psychiatry training at Harvard Medical School, Massachusetts General Hospital, and McLean Hospital, where she served as chief resident. She also completed a research fellowship at the Dana-Farber Cancer Institute and the Mind/Body Institute as well as a clinical fellowship in psychodynamic psychotherapy at the Boston Psychoanalytic Society and Institute. Dr. Liaw completed her child and adolescent psychiatry residency at NYU Langone Medical Center.

Dr. Liaw has served as the assistant unit chief of the Adolescent Inpatient Unit at Bellevue Hospital, where she was director of staff education. She is the professor for the NYU College of Arts and Science undergraduate course, *Looking Back on Growing Up*, a child development course through the use of cinema. She is the NYC wellness consultant for Paul Newman's Hole in the Wall Gang Camp, serving children with cancer and other life-threatening illnesses, and serves on the advisory board for NYC Parents in Action.

Dr. Liaw has received numerous teaching and clinical awards from the American Psychiatric Association, American Academy of Child and Adolescent Psychiatry (AACAP), Harvard Medical School, and NYU School of Medicine. She was the recipient of the Laughlin Fellowship, given annually by the American College of Psychiatrists to the 10 residents from the U.S. and Canada who are most likely to make a significant contribution to the field of psychiatry.

"Be CAP-tivated" is a 10-minute film produced by the Workforce Committee of AACAP and its Campaign for America's Kids. It documents a "day in the life" of four young and engaging child and adolescent psychiatrists, including Dr. Liaw. She was invited presenter at TEDxNYU 2013 and gave a talk entitled, "The H Word," interweaving patient and family stories and the building of a new children's hospital. She was an invited guest on NBC's TODAY Show to provide expert advice on how to talk with kids about death and divorce. Dr. Liaw was named to the 2013 Super Doctor's Rising Stars list published in the New York Times Magazine.

**Michèle Lloyd** is vice president for Children's Services at Hasenfeld Children's Hospital at NYU Langone. As the senior leader of children's services since 2012, she is responsible for ensuring the strategy and operations for the seamless integration of programs and services for children and their families across the medical center. In collaboration with the Children's Services leadership team, she oversees the key priority areas of patient safety and quality, child and family experience, program growth, and financial sustainability. Along with the chair, Department of Pediatrics, she provides senior leadership to the Salla Institute for Child and Family-Centered Care.

Prior to NYU Langone, Ms. Lloyd worked in several capacities as a senior leader at The Children's Hospital of Philadelphia. Most recently as senior vice president for operations, she provided executive leadership for a diverse portfolio of patient care services and administrative operations during a period of unprecedented organizational transformation and growth.

**Catherine Scott Manno, MD**, is the Pat and John Rosenwald Professor of Pediatrics and chair of the Department of Pediatrics and an internationally recognized pediatric hematologist who helped to develop pioneering approaches for the treatment of bleeding disorders. She was recruited to NYU Langone in 2008 as chair of the Department of Pediatrics. Dr. Manno came to NYU Langone from the Children's Hospital of Philadelphia, where she had been a faculty member for over twenty years. She is a fellow of the American Academy of Pediatrics, a member of the American Pediatric Society, a former Chair of the NIH-NHLBI Program Project Review Committee and a member of the Board of the American Medical School Pediatric Department Chairs. On June 24, 2018, under Dr. Manno's leadership, NYU Langone opened the Hasenfeld Children's Hospital, a 160,000-square-foot facility with 68 single-patient rooms providing the most advanced care in the New York City area with more than 400 doctors who are experts in more than 35 medical and surgical specialties.

**Nader Mherabi** is the senior vice president and vice dean, and chief information officer, responsible for all information technology (IT) activities for NYU Langone Health and for information technology's development as a strategic organizational asset. He previously was vice president for IT Product Solutions and chief technology officer for NYU Langone, responsible for technology strategy, infrastructure engineering, networks, data centers, application architecture, systems deployment, and support across the institution. Mr. Mherabi currently leads NYU Langone's digital transformation initiative, driving the integration of the institution's workflows, revolutionizing the digital patient experience and clinical environment, and empowering the institution with big data and advanced analytics to improve care delivery and efficiency.

Mr. Mherabi has designed and implemented many large-scale, diverse systems for NYU Langone and has extensive experience in hospital clinical systems integration, research IT, and education systems. He has developed an operational architecture for in-house application development and integration, as well as an electronic data repository, warehouse and dashboards center, research-specific infrastructure

for computation and collaboration, and scores of mid-size applications for research, education, and clinical care environments.

During his more than 30 years in the IT field, Mr. Mherabi has implemented large-scale systems for top fortune 500 companies worldwide, such as Credit Suisse and Citigroup, and held several prominent IT management positions including senior director at Mount Sinai–NYU Health, vice president at Credit Suisse First Boston, vice president at Citibank, and senior application developer at AT&T and Auror Consulting.

**Stephen Muehtling, MD**, is the chief quality officer and the co-director of the James M. Anderson Center for Health Systems Excellence at Cincinnati Children's Hospital Medical Center and professor of Pediatrics at The University of Cincinnati College of Medicine. Dr. Muehtling was awarded the Michael and Suzanne Fisher Family Chair for Safety at Cincinnati Children's Hospital Medical Center. He now focuses on the strategic goals of Cincinnati Children's to improve all aspects of care including safety, outcomes, experience, and affordability. His improvement work and research focuses on high reliability culture, situation awareness, managing by prediction, and lean leadership.

Dr. Muehtling was one of the founders of the Children's Hospital Solution for Patient Safety (SHS) and now serves as the Strategic Advisor. This network of more than 125 children's hospitals across the U.S. and Canada is collaborating to eliminate serious harm for both patients and staff. He serves on multiple national pediatric safety groups and is a frequent consultant for regional, national, and international safety and quality initiatives. He has lectured in more than a dozen countries.

Dr. Muehtling started as a solo practitioner and spent the first decade of his clinical career building a pediatric practice and inpatient unit in rural Indiana. He then focused on inpatient systems at Cincinnati Children's as the first leader of the Hospital Medicine program and was at the forefront of multiple transformations in care delivery including family-centered rounds, systematic adoption of evidence-based practice, and inpatient microsystems.

**Lucy Pereira-Argenziano, MD**, is the director of the Salla Institute Center for Patient Safety and Quality and a member of the Division of Neonatology in the Department of Pediatrics at Hasenfeld Children's Hospital at NYU Langone. Dr. Pereira-Argenziano received her medical degree from SUNY Health Sciences Center of Brooklyn. She completed her Pediatric Residency and Neonatal-Perinatal Fellowship at Cohen Children's Medical Center, North Shore-LIJ. In addition, Dr. Pereira-Argenziano

received quality improvement training through the Greater New York/United Health Fund Clinical Quality Fellowship and the Intermediate Improvement Science Series (ISS2) at Cincinnati Children's Hospital. She serves as the Children's Hospitals' solutions for patient safety ventilator acquired events (VAE) hospital acquired condition co-lead.

**Leilani Schweitzer** is assistant vice president for Communication & Resolution at Stanford Health Care. Ms. Schweitzer did not choose a career in health care, it chose her. In 2005, her son, Gabriel, died after a series of medical mistakes. Now she works in Risk Management at the same hospital where those errors happened. In her work with Stanford's Risk Management, she uses her own experience with medical errors to navigate between the often insular, legal, and administrative sides of medical error and the intricate, emotional side of the patient and family experience. Her work on communication and resolution gives her a unique view of the importance and complex realities of disclosure and transparency in healthcare. Her TEDx talk about transparency in healthcare has been viewed more than 100,000 times. She speaks nationally on disclosure and compassion after unexpected medical outcomes.

**Eileen Sullivan-Marx, PhD, RN**, is dean of New York University Rory Meyers College of Nursing and the Erline Perkins McGriff Professor of Nursing and professor emerita of Scholarly Practice, clinician-educator, University of Pennsylvania School of Nursing. She is a renowned nursing leader, educator, and clinician known for research and innovative approaches in primary care, testing methods of payment for nurses, particularly with Medicaid and Medicare, sustaining models of care using advanced practice nurses locally and globally, and developing health policy in community-based settings. Dr. Sullivan-Marx is president-elect of the American Academy of Nursing (AAN) where she has been a fellow since 1997 and is an AAN edge runner.

In addition to AAN, Dr. Sullivan-Marx holds fellowships in the Gerontology Society of America and the New York Academy of Medicine. She is a member of the Board of Directors of the Arnold P. Gold Foundation. Dr. Sullivan-Marx has been on numerous community planning and advisory boards. From 2010–2012, she was an American Political Science congressional fellow and senior advisor to the Center for Medicare & Medicaid Services Office of Medicaid and Medicare Coordination, just after passage of the Affordable Care Act. As part of this position, she worked to bring promising models of care to scale.

She has served as chair of the Pennsylvania Commission on Senior Care Services in 2008 and as a member of the Philadelphia Emergency Preparation



Review Commission in 2006. In New York City, she is co-chair of the Mayor's Summit on Mental Health Workforce Planning; of note, she was the first nurse to serve as the American Nurses Association's representative to the American Medical Association's Resource Based Relative Value Update Committee and did so for 11 years. She demonstrated through research that nurse practitioner and physician work

## Guest Speakers

**Rachel Biblow** is the senior vice president of Transformational Solutions at Press Ganey. She provides strategic vision and partners with organizations to integrate, execute, and advance the ability to deliver safe, high-quality, and compassionate care experiences across their systems.

Prior to joining Press Ganey, Ms. Biblow served for more than 15 years at the Children's Hospital of Philadelphia (CHOP). During her tenure, she worked directly with patients and families, as well as serving in a variety of leadership roles with expanding scope and influence. In her most recent role, she served as the senior director of Patient and Family Services and enterprise co-sponsor for the Patient and Family Experience initiative. In addition to the strategic and operational oversight for several clinical support areas, she led the design, strategy, and implementation of an enterprise-wide initiative to improve overall patient and family engagement and experience. Through collaborative efforts, she commissioned high-performing and cross-functional teams to establish organizational values and standards that served as the foundation for the organization. These essential building blocks catapulted necessary changes that accelerated system and process improvements and reaffirmed CHOP's long-standing commitment to partnering with patients and families.

She is passionate about improving safety, quality and the overall experience in healthcare and has served on a variety of committees to advance these efforts, including Ethics, Value-Based Care, Transparency Advisory Council, and Quality Improvement Committees. She is a firm believer that exceptional care experiences are a team sport and requires each and every one of us to play a role.

Ms. Biblow is a founding leader in establishing the National Pediatric Experience Collaborative formed in 2016. The Collaborative is a consortium of leading children's hospitals working together to improve and advance safe, high quality, and compassionate care experiences across all systems. She is an international speaker on Experience, Family Centered Care, Social Work leadership, and has presented at multiple health systems and conferences.

can be valued equally in that payment structure. She has received the International Sigma Theta Tau Honor Society Best of Image research award (1993), the Hippensteel Founder's Award for excellence in practice award (2011), the Springer Publishing Research Award, and the Doris Schwartz Gerontological Nursing Research Award. She is recipient of the Distinguished Alumni of the University of Rochester.

She holds a bachelor's degree in Psychology from Pennsylvania State University and a master's in Social Work from the School of Social Policy and Practice at the University of Pennsylvania. In addition to her work at CHOP, she served on the Board of Directors for the Make-A-Wish Foundation of Philadelphia and Susquehanna Valley, where she also contributed as a volunteer wish-granter. She currently serves on the National Medical Advisory Board and Philadelphia Regional Board of Directors for Team IMPACT and the Executive Steering Committee for the National Patient Experience Policy Forum. She is a member of the Society for Social Work Leadership in Health Care, National Association of Social Workers, and the Association for Patient Experience.

**Kathryn Curran** is the chief of staff of the Strategic Consulting and Advisory Division at Press Ganey. In this role, Ms. Curran brings her varying experiences from business development, marketing, and strategic events to the team to help advance the consulting and advisory strategy. She interacts with both the consulting and advisory teams to facilitate communication and continuity of efforts across the group. Ms. Curran acts as a central point of contact for client requests outside of advisory and consulting engagements, and helps in organizing strategic discussions and coordinating client needs.

Ms. Curran has been at Press Ganey since 2012 and during that time has held roles of increasing responsibility from aiding and sourcing acquisitions as director of business development to leading a team to develop, market, and execute Press Ganey's strategic events as director of marketing and strategic events. Under Ms. Curran's leadership, Press Ganey grew the National Client Conference from 2,100 to almost 3,000 attendees over five years and added several specialty leadership summits focused on pediatrics, safety, transparency, nursing, and engagement. In addition to advancing thought leadership, her outreach through Press Ganey's strategic events has resulted in significant growth for the business.

Prior to joining Press Ganey, Ms. Curran worked at Jefferies Healthcare Investment Banking as a business analyst where she was accountable for an array of

daily financial and company analyses for the Head of Healthcare Banking. In addition, she prepared prospective client presentations, group revenue forecasts, and annual budget reviews. Ms. Curran also implemented the Healthcare Marketing Task Force and coordinated with the firm's Global Head of Marketing to successfully promote and execute industry deals.

Ms. Curran holds a bachelor's degree in Communications from Boston College.

**Donna Hallas, CPNP, FAANP, PhD, PMHS,**

**PPCNP-BC** is a clinical professor and director of the Pediatric Nurse Practitioner (PNP) Program at New York University Meyer's College of Nursing. She is a pediatric nurse practitioner and a pediatric primary care mental health specialist. Dr. Hallas has provided comprehensive healthcare to medically complex children and adolescents, many of whom had behavioral health problems. For over 20 years, she has had a clinical practice serving vulnerable children, adolescents, young adults, and their parents. Her research focuses on improving healthcare outcomes for young children. She implemented a funded study on oral health care for newborns and young children of mothers on the postpartum unit. She has conducted and presented the results of a randomized controlled trial to improve the social-emotional development of toddlers and improve maternal confidence in caring for toddlers at research conferences. She is currently the principal investigator (PI) on a 3-year HRSA grant for preceptor development that has designed and implemented an online educational program to educate nurse practitioner preceptors in current clinical educational strategies to prepare nurse practitioner students to be "practice-ready" upon graduation. She is the PI for a randomized controlled trial on vaccine hesitancy in prenatal and postpartum women and has presented preliminary findings at the 2018 National Immunization Conference in Atlanta, Georgia. She has presented findings from her work at state, national, and international conferences. Her first book, titled *Behavioral Pediatric Healthcare for Nurse Practitioners: A Growth and Developmental Approach to Interpreting Abnormal Behaviors*, was published in August, 2018.

Dr. Hallas is the digital editor for *Contemporary Pediatrics*, writing a monthly column. The PNP Corner. She is a faculty scholar of the International Qualitative Institute at Alberta, Canada. Dr. Hallas is an active member of several nurse practitioner organizations and is a fellow of the American Academy of Nurse Practitioners and the National Association of Pediatric Nurse Practitioners.

**James Merlino, MD**, joined Press Ganey in 2015 as president and chief medical officer of the Strategic Consulting Division. In 2018, he assumed the expanded role of chief transformation officer to ensure that Press Ganey's solutions align with current and future industry needs. An accomplished surgeon and industry leader in improving the patient experience, Dr. Merlino has played a critical role in shaping Press Ganey's strategic direction. Under his leadership, the Press Ganey Strategic Consulting Division has experienced rapid growth, both in the number of consultants serving the company's health care clients and in the breadth and depth of services they are able to provide. In 2017 and 2018, they were named one of the fastest growing consulting groups in the U.S. by Consulting Magazine, and in 2018 they were named by Forbes as one of the best management consulting firms.

Prior to joining Press Ganey, Dr. Merlino served as chief experience officer and associate chief of staff at the Cleveland Clinic health system, as well as a practicing staff colorectal surgeon at the organization's Digestive Disease Institute. He was responsible for leading strategic programs to improve the patient experience across the system. He spearheaded numerous groundbreaking initiatives to ensure the highest standards for patient care as well as to improve patient access and referring physician relations. He also championed organizational cultural alignment around the patient as a key component of patient centered care.

Dr. Merlino is actively involved in many industry organizations and nonprofits dedicated to improving patient care. He is the founder and current president of the Association for Patient Experience, a nonprofit organization committed to enhancing the clinical, physical, and emotional health care environment. Dr. Merlino is also a founding executive council member of the Institute for Innovation, a nonprofit research collaborative dedicated to advancing the science of improving patient care and performance. Recognized as an expert in improving the patient experience, Dr. Merlino is frequently invited to speak on strategies to redefine care around the needs of the patient. In 2013, he was named to *HealthLeaders* magazine's *HealthLeaders 20*, highlighting those making a difference in health care, and has been recognized as one of Becker's Healthcare's 50 Experts *Leading the Field of Patient Safety* in 2015, 2016, 2017, and 2018. He has been widely published in academic journals, and in 2014 he released his first book, *Service Fanatics: How to Build Superior Patient Experience the Cleveland Clinic Way*. He is the co-editor of *Zero Harm: How to Achieve Patient and Workforce Safety in Healthcare* (2018), the first comprehensive guide to delivering care that ensures the safety of patients and staff alike.

Dr. Merlino holds a bachelor's degree in business administration from Baldwin-Wallace College and a medical degree from Case Western Reserve University School of Medicine. He completed his general surgery training at University Hospitals of Cleveland and his colorectal surgery fellowship at Cleveland Clinic. During his residency, he took a two-year research sabbatical to complete an AHRQ-funded research fellowship in Health Services Research.

**Annie Robinson, MS**, holds the position of wellness program facilitator at New York University's Medical School. This entails developing and teaching curricula in reflection, self-awareness, and wellbeing to physicians across the spectrum from UME through GME and into clinical practice. She also participates in systemic strategizing about how to improve medical education and the clinical environment to support greater resilience in individuals and medical culture. She earned a graduate degree in Narrative Medicine at Columbia University, and is trained in positive psychology, mindfulness and meditation, yoga, and doula support. Ms. Robinson also has a private practice as a wellness coach.

## Sala Internal Professional Advisory Group

**Chris Brown, MS, CCLS**, is a certified child life specialist and the director of Therapeutic Recreation, Child Life and Creative Arts Therapies at NYU Langone Health. Primary responsibilities include managing therapeutic recreational and creative arts programs and services provided to pediatric inpatients and outpatients at Hassenfeld Children's Hospital, as well as to several adult inpatient units at Tisch Hospital. She is excited to coordinate services in the new Hassenfeld Children's Hospital 7th floor Children's Center including play spaces, a new broadcast studio, a family resource center, and an outdoor terrace.

Ms. Brown has a bachelor's degree from Purdue University and a master's degree from Nova Southeastern University. Her Child Life career has included internship training at Johns Hopkins Hospital and clinical or managerial positions at James L. Kerner Hospital in Baltimore, MetroHealth Medical Center in Cleveland, Cook Children's Medical Center in Fort Worth, Children's Memorial Hospital in Chicago, The Children's Hospital of Philadelphia, Dell Children's Medical Center in Austin, and UF Health in Gainesville. Ms. Brown has assumed leadership roles reflective of her dedication to the Child Life profession, having held several board and committee positions with the

**Beeth Silber, MPA**, is the family consultant at the Sala Institute for Child and Family-Centered Care at Hassenfeld Children's Hospital at NYU Langone. In this role, Ms. Silber supports family centered care programs by providing family advisor leadership for programs and valued patient and family perspective on hospital committees. Ms. Silber established the Sala Family Advisory Council, comprised of families of children with a variety of diagnoses and care experiences. As council chair, she recruits, orients, and trains new family advisors. She frequently teaches health care professionals about the impact of illness on families through the Family Faculty Program. She has developed the Sala Family-to-Family Program, bringing families together for support and connection during hospitalizations and outpatient visits. A respected and central voice in safety and quality initiatives, Ms. Silber is co-author of the publication, *Keeping a Child Safe in the Hospital: A Qualitative Study of Parent Perspectives*. Previously Ms. Silber served as a family advisor at Kravis Children's Hospital at Mount Sinai and as a parent advocate in the Oncology Clinic. She obtained her Bachelor of Science at Cornell University in Policy Analysis and Master of Public Administration in Health Policy and Management from NYU University Wagner Graduate School of Public Service.

Association of Child Life Professionals (ACLP), and is a past-president of both ACLP and the Association for the Care of Children's Health. She served as liaison to the American Academy of Pediatric (AAP) Committee on Hospital Care for eight years and authored the 2014 AAP Policy Statement on Child Life Services. As a frequent speaker at national and international conferences and author of several professional publications, chapters, and articles, Ms. Brown's areas of expertise include the therapeutic value of play, patient and family centered care, interdisciplinary education and collaboration, palliative care and bereavement, and program development.

**Sara Chokshi**, an inaugural member of Sala's Family Advisory Council (FAC), brings the patient and family perspective both to the FAC as well as to her role as assistant director of the HIBRID (Healthcare Innovation Bridging Research, Informatics and Design) Lab in NYU School of Medicine's Department of Population Health. A social scientist by training, Ms. Chokshi's research centers around supporting patient and family centered care through the user-centered design of digital tools for patients, families, and clinicians. She and her husband Samir are parents to two boys, one of whom is a Hassenfeld Children's Hospital at NYU Langone NICU graduate.

**Jason Fisher, MD, FACS, FAAP**, grew up in the suburbs of NYC and received his medical degree from the Boston University School of Medicine. He completed his general surgery residency training at New York Presbyterian Hospital, Columbia University Medical Center. During his residency, Dr. Fisher completed two additional years of training as the Extracorporeal Membrane Oxygenation (ECMO) Fellow at the Morgan Stanley Children's Hospital of New York Presbyterian. He went on to complete his pediatric surgery fellowship at the Cincinnati Children's Hospital Medical Center.

Dr. Fisher is certified by the American Board of Surgery in General Surgery and Pediatric Surgery. He is a fellow of the American College of Surgeons, the American Academy of Pediatrics, and the American Pediatric Surgical Association. His primary clinical interests lie in ECMO and congenital diaphragmatic hernia, as well as colorectal disorders and minimally invasive surgery. Since joining NYU Langone in 2012, he established the institution's first Neonatal and Pediatric ECMO program. This program has since earned a Pathway to Excellence Award from the Extracorporeal Life Support Organization, and has fueled the growth of the NYU Langone Fetal Diagnosis and Treatment center, for which he serves as co-director. Building on his background in High-Reliability Organizations and quality-safety from his time in Cincinnati, Dr. Fisher has served as a master trainer for the NYU Langone HRO transformation. With a passion to ensure that every child who undergoes a procedure across the NYU Langone enterprise experiences the highest standards of quality, safety, and experience, he founded and chairs the Children's Services Perioperative Quality and Safety Committee for the Hassenfeld Children's Hospital. Additionally, Dr. Fisher has an extensive background in computer programming, database architecture, and web application development. He is board certified in Clinical Informatics, and is a physician informantist in surgery for NYU Langone Health, helping leverage clinical expertise with advanced applications of modern clinical data systems.

**Jodi Herbsman, PT, DPT**, graduated from New York Medical College with a master's degree in physical therapy in 2000. In 2010, she received her doctorate in physical therapy from University of Scranton. Dr. Herbsman has worked at Risk Rehabilitation at NYU Langone Health since 2000 in a variety of roles including staff and senior physical therapist, assistant unit and unit supervisor of acute care, and currently the program manager of acute care rehabilitation services. As program manager of Acute Care Rehabilitation Services, Dr. Herbsman manages the daily operations of physical therapy, occupational therapy and speech-language pathology services in Tisch Hospital, Kimmel Pavilion including The Hassenfeld Children's

Hospital. The Stephen D. Hassenfeld Center Children's Center for Cancer & Blood Disorders and Frink Children's Ambulatory Care Center. In 2016, Dr. Herbsman completed an Intermediate Improvement Science Series (I2S2) through Cincinnati Children's Hospital. She won a Patient Safety Award for her early mobility work in the medical and surgical intensive care units. She has presented at national conferences on the topics of adult and pediatric early mobility and has one publication on this topic.

Dr. Herbsman is a member of several hospital-wide and children's services leadership and quality and safety committees. She is co-leading several quality improvement initiatives for children's services including decreasing stress in patients and families admitted to the hospital for intracranial video EEG and pediatric delirium.

**Heather Howell, MD**, is an academic neonatologist who is an assistant professor of Pediatrics at the NYU School of Medicine. She assumed the role of program director for the Pediatric Residency in July 2018 after spending six years as an associate program director. Her interests in education have focused on optimizing the individual experience for pediatric residents during training. She helped to develop the individualized curriculum tracks that currently exist in our training program and have also been involved in the roll out of the scholarly pathways. She developed a unique, highly individualized career exploration rotation for interns to increase exposure early in training to possible career options. She was able to present an abstract of this project at a national meeting hosted by the Association for Pediatric Program directors. In addition, she has worked on incorporating simulation as an educational tool to teach trainees a wide set of patient-care skills with a recent publication on the use of simulation to boost neonatal resuscitation skills in pediatric residents. She is the medical director of the Neonatal Comprehensive Care Program which is a developmental follow-up program for infants who were hospitalized in the neonatal intensive care unit. Her interests in neonatology include long-term neuro-developmental outcomes of high-risk infants. Lastly, she also has an interest in the use of indirect calorimetry to assess energy expenditure in high-risk infants, and has two recent manuscripts accepted for publication.

**Erin Lauringer, MSW, LCSW**, received her Master of Social Work degree from Columbia University School of Social Work in 2006 with a specific focus on health, mental health, and disability services. As a pediatric medical social worker at various New York City hospitals, Ms. Lauringer has devoted her practice towards helping children, adolescents, and families cope with and adjust to chronic and life threatening illnesses. She is currently an administrative supervisor



for the Social Work Department (Pediatrics/ Psychiatry) at NYU Langone Health and oversees Pediatric and Perinatal Bereavement Program at the Hassenfeld Children's Hospital. Ms. Launger has a special interest in the psychological, emotional, and social effects of childhood illness, grief and bereavement, and family centered care.

**Beverly Mitchell, BSN, RN, CNOR**, is the assistant nurse manager for the Hassenfeld Operating Room, where she manages the staff and daily operations of Hassenfeld's pediatric ORs and procedure rooms. She holds a Bachelor of Science in Nursing from New York University's Roy Meyers College of Nursing, as well as a bachelor's degree and Master of Fine Arts in arts administration. She is a graduate of Cincinnati Children's Intermediate Improvement Science Series. Ms. Mitchell entered nursing after a 15-year career in the theater.

**Pradeep Mally, MD**, is the chief of the Neonatology Service and director of the Neonatal-Perinatal Fellowship Training Program and Residency Education in the Neonatal Intensive Care Unit at NYU Langone. Recruited to the Neonatology Program from

New York Medical College Westchester in 2002, Dr. Mally is pursuing innovative research on the use of neurally adjusted ventilator assist (NAVA) as a new mode of neonatal ventilation. He is also involved in a number of clinical research projects such as late preterm neonates and its morbidities and identifying biomarkers of neonatal sepsis. Dr. Mally is also involved in the Neonatology Program's quality care and patient satisfaction and is particularly involved in the education of residents, medical students, and fellows, and was chosen as Best Pediatric Teaching attending of the NYU Pediatric House staff (2004–05). He has mentored fellows, residents, and students alike several of whom have presented their research at national meetings, and/or published peer-reviewed papers. He is the Fellow of the American Academy of Pediatrics.

**Nicole A. Plasio, BSN, RN, CPN**, is a pediatric and neonatal transport senior nurse clinician and clinical resource nurse at Hassenfeld Children's Hospital at NYU Langone Health. In addition to her clinical responsibilities, Ms. Plasio oversees many of the operations for the Pediatric and Neonatal Transport Team and is responsible for dissemination of new and sustaining education programs for her team. She is the co-chair of the pediatric sepsis oversight committee liaison and interventions work group and serves on many quality and safety committees throughout Hassenfeld Children's Hospital, for which she is responsible for monthly data collection, tracking, and reporting. Ms. Plasio is a member of the Quality and Performance Improvement Council and Nursing Practice Council at an institution-wide level and is the nursing lead for the Pediatric Interdisciplinary Resuscitation Program.

Prior to her work at Hassenfeld Children's Hospital, she was a clinical neonatal intensive care nurse at New York Presbyterian Hospital and at The Children's Hospital of Philadelphia. Ms. Plasio holds a Bachelor of Science in Nursing from New York University's Roy Meyer's School of Nursing.

**Michael Smith** is a family advisor on the Family Advisory Council (FAC) of Hassenfeld Children's Hospital. He is excited to be part of a diverse group of parents that provide crucial input to hospital staff and leadership to ensure programs and initiatives are co-designed with patient and family perspectives. Mr. Smith learned of the FAC after his son underwent surgery to repair a congenital heart defect at NYU Langone Health, and he applied to volunteer. Being able to advise the hospital on various aspects involving a child's stay and recovery, and to see that advice being utilized with the opening of the new Hassenfeld Children's Hospital, has been very moving to him. Mr. Smith works as in-house counsel to The Harry Fox Agency, the leading provider of rights administration, licensing, and royalty services for the music industry. He assists the various divisions within the company with their legal needs, and advises corporate leadership on current issues that may impact the company.

## Appendix B

## Sala Year-Five Programmatic Assessments

### Patient and Family Centered Culture at

**Hassenfeld Children's Hospital** assessment focused on the Sala-supported programs, resources, and initiatives for comprehensiveness and effectiveness, and staff understanding and application of family centered best practices.

*Review included:*

- Center for Child and Family Experience strategic plans
- Sala-supported partnership programs
- Development and implementation of family centered care best practice standards
- Approach to family centered care education and training for clinical and support staff
- Child and family resources and educational materials
- Approach to distribution and utilization of patient and family experience data as it relates to advancing patient and family centered care
- Outcome measurement strategy

*Reviewers:*

**Sara Toomey, MD, Mphil, MPH, MSc**

Chief Experience Officer at Boston Children's Hospital  
Assistant Professor of Pediatrics, Harvard Medical School

**Lisa Rubino, MBA**

Director, Patient Experience at Boston Children's Hospital

### Quality and Safety Program at Hassenfeld

**Children's Hospital** assessment focused on components of the Quality and Safety Program supported by Sala's Center for Patient Safety and Quality. Review included evaluation of the infrastructure, effectiveness, and outcomes.

*Review included:*

- Center for Patient Safety and Quality strategic plans
- Hassenfeld Children's Hospital Quality and Safety Performance Improvement Plan (QSPIP)
- In-patient and ambulatory quality and safety committees' structure, function, and outcomes
- Development and implementation of safety best practice standards
- Staffing model in support of quality and safety work
- Approach to Quality Improvement and Safety Science education and training for clinical and support staff
- High Reliability Organization work plan and outcomes

*Reviewers:*

**Anne Lyren, MD, MSc**

Clinical Director of the Solutions for Patient Safety  
National Children's Network

**Joyce Deptola, RN**

Director of Quality and Safety at University Hospital  
Rainbow Babies and Children's Hospital

### Pediatric Advanced Care Team (PACT) Program

assessment focused on the Sala-supported PACT program and its integration with Integrative Health and Acute Pain Programs, in order to evaluate infrastructure, effectiveness, and outcomes.

*Review included:*

- Center for Child and Family Resilience strategic plans
- Alignment with PACT national best practices and standards
- PACT Team
  - Composition and capacity
  - Organizational structure and linkages to NYU Langone Health Supportive Care Program (Adult Palliative Medicine) and NYU School of Medicine Department of Pediatrics
  - Staffing, coverage, and team functioning
  - Competencies and professional development
  - Team and provider wellbeing
- Service standardization and optimization
- Program development
- Integration with Hassenfeld Children's Hospital Integrative Health Program
- Integration with Hassenfeld Children's Hospital Acute Pain Program

*Reviewers:*

**Joanne Wolfe, MD, MPH**

Director, Pediatric Palliative Care  
Division Chief, Pediatric Palliative Care Service,  
Department of Psychosocial Oncology and Palliative  
Care, Dana-Farber Cancer Institute  
Associate Professor of Pediatrics,  
Harvard Medical School



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