

The Patient and Family Meeting Program: Enhancing Palliative Care Integration

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Introduction

Studies demonstrate benefits of early palliative care. It is unclear how to best provide scalable, integrated supportive care alongside disease directed treatment in a way that expands primary palliative and effectively leverages specialty palliative care. Family meetings are frequently used to communicate medical information, but patients and families often have difficulty understanding the information provided.

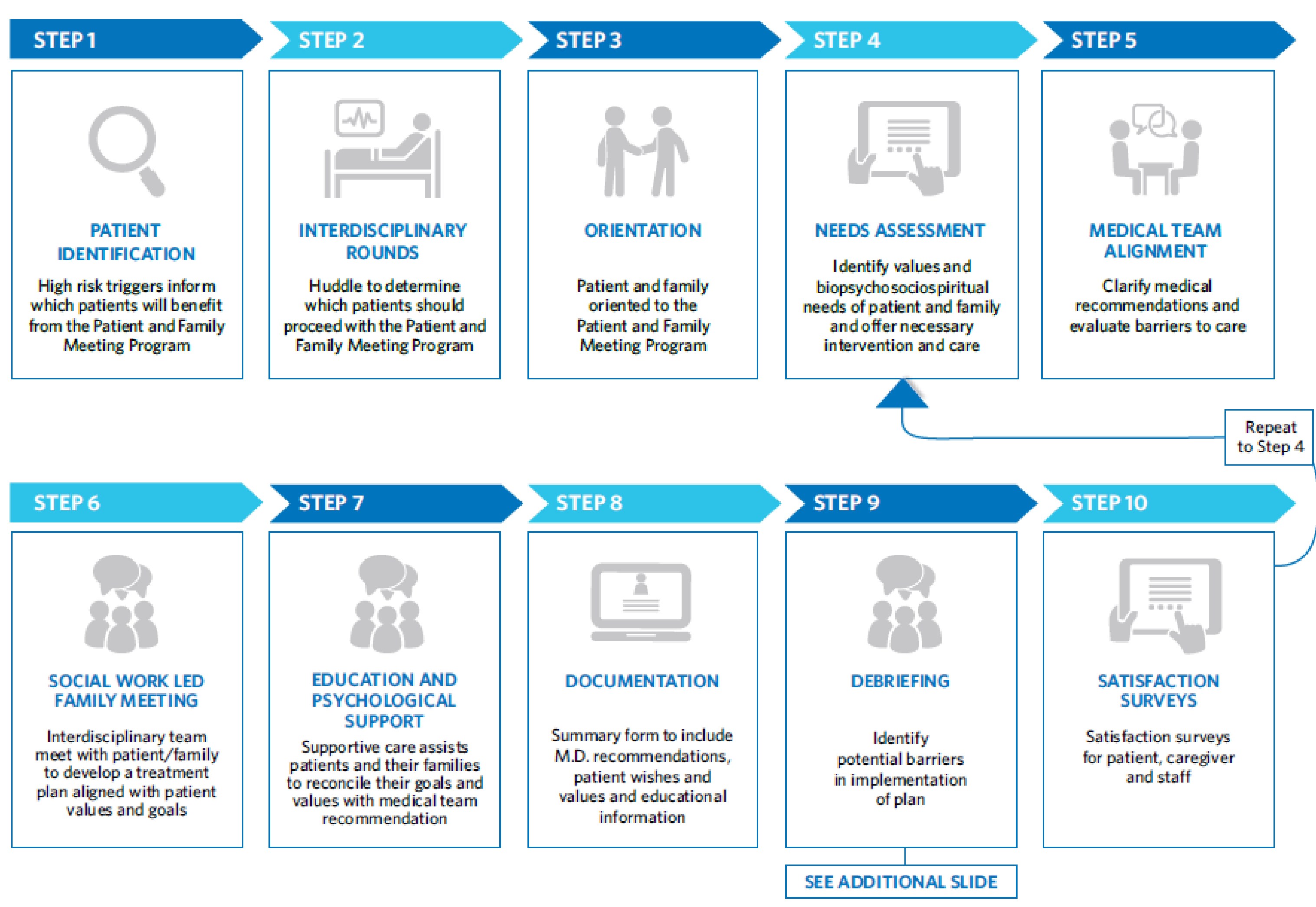
Objectives

Design a scalable, mixed model palliative program centered around family meetings.

Methods

At City of Hope National Medical Center, we developed a 10-step model alongside provider specific training to facilitate shared medical decision making that aligns a patient's goals and values with provider medical recommendations. This program allows staff to work at the top of their license, improves efficiency, and leverages relevant palliative disciplines. We developed screening tools, palliative consult triggers, and patient-centric educational material. An electronic family meeting summary form was designed to highlight patient values, facilitate information retention, improve medical decision making, and ease documentation burden.

Patient and Family Meeting Model Overview



Patient-centric Handouts

WHAT IS THE PURPOSE OF THE FAMILY MEETING?
The purpose of the Family Meeting is to assist patients, families and the health care team to effectively and efficiently communicate and make decisions. Family Meetings are the best way to address your ongoing concerns and questions. Family Meetings are also a good way to learn about the patient's values regarding health care preferences. These meetings help you feel heard and supported and understand better how your health care team works together.

WHEN DO FAMILY MEETINGS OCCUR?
Family Meetings are a routine part of care in the intensive care, other inpatient settings and during your outpatient clinic appointments. They can be requested by the patient, family member or health care team. Family Meetings are often scheduled to address:

- An admission into the Intensive Care Unit
- A change in the patient's condition
- Alignment of medical care with the preferences of the patient
- Changes in the direction of care based on the serious nature of the medical situation

WHO CAN COME TO A FAMILY MEETING?
The patient, family members and others invited by the patient may attend. If the patient cannot be present or is unable to communicate, it is important for the Medical Decision Maker to be present. A Medical Decision Maker is a person who can share your wishes and make health care decisions for you if you are unable to make them yourself. When the patient is a minor, a primary caregiver, usually one or both parents, must attend. Members of the patient's health care team such as physicians, nurses, social workers, chaplains or anyone who has cared for the patient or who has experience working in similar situations may also attend. For further information about Family Meetings, please contact [\[Phone Icon\]](#)

INFORMATION ABOUT FAMILY MEETINGS FOR PATIENTS AND FAMILIES



Communication among a patient, family members and the health care team is particularly important when a loved one is confronting a serious medical situation. A Family Meeting is the best way to get up to date information from the medical team and specialists. It is also an opportunity to become familiar with your values/wishes and preferences and make sure that they align with the medical recommendations. We want to ensure we communicate consistently and in a timely manner with you and your family.

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Orientation Materials

SUPPORTIVE CARE TEAM

There are many clinicians and caregivers supporting patient care in the hospital and outpatient clinics, including your primary physician, critical care physician, nurse, pharmacist, nutritionist and respiratory, occupational and physical therapists. Based on patient and family requests and needs, including medical team assessments, supportive care specialists (described below) are often involved in the care of your loved one and work alongside your primary physician to enhance care. Always feel free to ask questions and share any concerns you may have. This will help us make the best decisions and plan your care together.

CLINICAL SOCIAL WORKER: Issabela Benitez, L.C.S.W., Teressa Hung, L.C.S.W., Renee Kang, L.C.S.W., Michele Ochoa, L.C.S.W., Marnie O'Brien, L.C.S.W., Lindsey Soderstrom, M.S.W. Social workers partner with the patient, family and medical team to facilitate family meetings and ensure that patient values and wishes are respected, acknowledged and honored. They provide support to you to increase your coping and your ability to make informed decisions.

CLINICAL PSYCHIATRY: Jessica Salinas, M.D. Psychiatrists are doctors with expertise in mental health issues. They provide diagnosis and advanced medical and behavioral interventions of various emotional problems that already may be present before a cancer diagnosis or come about during the course of cancer.

CLINICAL PSYCHOLOGY: (Marianne A. Craig, Ph.D.) Psychologists are doctors with expertise in mental health issues. They help caregivers access local resources when away from home, connect to additional supportive care services and are available for other practical patient and caregiver needs.

NAVIGATOR: David Teis, B.S., Terry Hernandez Patient navigators support and prepare patients and families as they move about the hospital from inpatient or outpatient. They help caregivers access local resources when away from home, connect to additional supportive care services and are available for other practical patient and caregiver needs.

Touch Based Screening Tool



Resources to Develop Patient & Family Meeting Programs



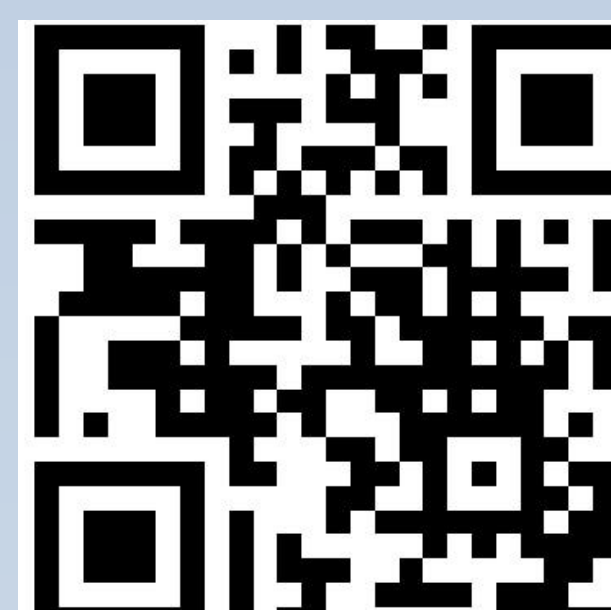
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VITALtalk



CCCC Decision Guides



Center to Advance Palliative Care



Serious Illness Care Ariadne Labs

Results

Early iterations of the program in the ICU have demonstrated successful screening of patients and caregivers, increased provider efficiency and satisfaction, and correlated length of stay reductions. We will formally evaluate the model in its entirety in the coming months.

Conclusions

Family meetings are important forums to communicate complex medical information and are a ubiquitous focal point to integrate relevant components of palliative medicine allowing for enhanced patient and family-centric care. The Department of Supportive Care Medicine will offer the model, educational sheets, consult triggers, and samples of the electronic family meeting summary form as free downloadable resources.

Next Steps

- Transition the program to our new EMR platform (Epic)
- Improve analytics to evaluate efficacy of the model
- Expand program to new settings and disease groups

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