

Children's Mercy Kansas City

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Health Literacy Events

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Apr 19th, 2:15 PM - 4:15 PM

### Small Group Project: Strategic Planning Using the GROW Model (Goals, Reality, Options, and Way Forward)

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## Overview

The GROW Model is a method for problem solving and setting goals. Participants worked through the first three (3) steps as a large group (**G**oals, **R**eality, and **O**ptions). Attendees then chose options to work on in small groups with the goal of developing a realistic and actionable SMART Goal. Additional leading questions in the **O**ptions and **W**ay Forward sections helped in the development of these goals.

Large group responses and final SMART goals are included below.

## Goals

### What issue do I want to work through?

- Improve patient care and outcomes
- Improve documents and access to information
- Improve relations with patients, family and community
- Increase organizational buy-in
- Decrease admissions and ER/Urgent Care visits
- Reduce errors

### What are the consequences if I don't take action?

- Poorer outcomes
- Higher costs
- More errors
- Non-adherence
- Increased disparities
- Lower patient/family trust and satisfaction

## Reality

### Briefly, what has been happening?

- Variations and inconsistency in materials, process, demonstration

### What have I tried so far?

- Joining the Health Literacy Committee
- Connecting with Communications and Marketing
- Analyzing data related to procedures

### What were the results?

- Utilizing teach back more
- Charting in Cerner more
- Not documenting accurately

**What is my sense of the obstacles for me? For others?**

- Resources (especially time)
- Establishing workflows
- Getting buy-in from the parents

**What different way might others describe this situation?**

- Outside providers think we give "too much info"
- Lack of standardization
- Need more efficiency
- There is a disconnect between internal groups due to lack of transparency
- Need more bidirectional sharing/learning

## Options

**Describe "fantasyland" - if I could do anything, what might I do?**

- Ideas were shouted out and written on post-it notes. After brainstorming concluded, the post-its were organized into the following categories:
  - Language Availability (resources in multiple foreign languages)
  - Staffing Models
  - Written Materials (plain language)
  - Standardization/Resource Centralization
  - Training/Education
  - Gathering Feedback
  - Technology Usability

Participants then separated into small groups based on these categories in order to work through the rest of the worksheet with the ultimate goal of developing a realistic SMART Goal.

### ***Remaining Questions Answered in Small Groups***

**What might get in my way?**

**If I were watching myself work through this issue, what would I recommend?**

**If others are involved, what would they need to hear/see to get their attention?**

**Which of these options interest me enough to explore further? (Begin thinking to yourself during large group discussion)**

## Way Forward

**If I were watching myself work through this issue, what would I recommend?**

**What might get in my way?**

**If others are involved, what do they need to hear/see to get their attention?**

**What and when is my next step? (SMART Goal)**

**How will I go about it?**

**How might I overcome the obstacles I identified?**

## Small Group SMART Goals

### Language Availability

Outreach (needs assessment) to identify departments and clinics for the top five documents that need to be translated and to obtain the top five languages seen / encountered in the last 12 months in these areas by October 31, 2018.

### Staffing Models

Within one (to three) months, we will research and identify modes of expanded nursing roles (care navigator, clinical nurse leader) which would serve as liaisons between disciplines and function to some capacity as educator, discharge planner, etc. to integrate health literacy into practice.

### Written Materials

Make a checklist to be used when creating new patient handouts / instructions that ensure health literacy objectives are met by the end of the year.

### Standardization

Create a digital repository for all patient education materials (written, audio, video, pictures, etc.) that can be accessed by Children's Mercy staff by April 2019.

### Training/Education

Increase patient's compliance by 10% within 1 year for patients attending doctor's appointments after reminded by the patient portal.

### Gathering Feedback

Decrease understanding and increase understanding of dep brain stimulator function and placement in children less than 7 years of age (Dystonia Patients) in the next 6 months.

### Technology Usability

Assure all appropriate clinical and customer stakeholders are present from the beginning of the IT planning process, through the launch and are able to provide clear feedback prior to implementation by TBD.