

The Partners in Care program

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Implementation of the Partners in Care program

- How?
- What benefits does it bring?
- Winning conditions
- Challenges and opportunities

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Participation in the Partners in Care (PIC) Program

- · Continuous improvement cycles in collaboration with the Université de Montréal
- Organizational context

Governance and structure

- Professional practice committee
- PIC coordinating committee including a patient partner
- Continuous improvement team for the co-creation of projects
- Patient advisors and patient coach

Other projects

- Patient partner trainer for patient advisors
- Doctoral research project
- Referral centre for users and families with a bank of patient partners
- Patient partner trainers at the Université de Montréal for CSS courses

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Five PIC continuous improvement teams

Breast cancer

- Hematopoietic cells
- Inflammatory bowel disease
- Colorectal surgery
- Pain clinic





Breast cancer team

- 3rd continuous improvement cycle (CIC)
 - Lack of information and knowledge to make informed choices
 - Quality of workshops provided for patients
 - Educational activities co-animated with patient partner
 - Life after treatment for breast cancer
 - Genetics
 - Hormonal therapy
 - Pre-surgery education sessions
 - Results
 - High rates of participation and satisfaction
 - Interest in collaborating as patient partners
 - Writing for project on chemo-brain
 - · Workshops on side effects in radiation oncology

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What benefits does it bring?

- Use of experiential knowledge to improve the quality of care and services
- Catalyzing effect of patient involvement
- Concrete way to live healthcare partnership
- Gives meaning to the concepts
- Pride in accomplishments
- Reflective processes in action
- · Feedback pre and post improvement cycle,
- Satisfaction questionnaire in the 4th improvement cycle
- Discussion group with patients/families
- Evaluation of satisfaction with educational activities
- Measurement issue to be pursued

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Winning conditions

- Organizational
 - Support from leadership
 - PIC coordinating committee including a patient partner
 - Medical-administrative leadership and physician involvement
 - Foundation support
 - Coaching from the OCPP
 - History of collaboration with the OCPP
 - Networking and sharing of knowledge and experience
 - Structured and adaptive efforts
 - Individual support
 - · Training, tools and expected competency profile
 - · Key players: Patient coach, LCE
 - Confidentiality agreement

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Challenges and opportunities

Challenges

- Voluntary participation by teams reaching critical mass
- Balance between procedures and actions in meetings
- Reaching SMART objectives within 3 to 6 months
- Integration, support and training of patient partners and coach
- Mesuring progress in patient safety and quality of care
- Opportunities
- Creation of a Patient Partnership office
- Ways of recognizing the contribution of patient partners
- Continuous quality improvement team association with quality expertise

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Testimonial

I would like to thank the team responsible for providing the lectures on breast cancer and its treatment. You cannot imagine the comfort these sessions bring us. We are not only informed on the subject but are totally involved in the healing process.

These meetings help to relieve pressure on the "system" while involving patients completely in their journey towards well-being. My attitude towards my diagnosis has changed. The future looks optimistic. You have helped to de-dramatize the words "breast cancer"

Please pass on these comments on to Dr. Leblanc and all those involved in the

Oncology program.

Sincere thanks

Ms Poirier

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