



Oregon Pediatric

# Partnerships Between Your Improvement Partnership and Families/Family Organizations



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# OPIP Mission & Activities

- OPIP supports a meaningful, long-term collaboration of stakeholders invested in child health care quality, with the common purpose of improving the health of the children and youth of Oregon.
- OPIP staff and projects are focusing on building health and improving outcomes for children and youth by:
  - 1) Collaborating in **quality measurement and improvement** activities across the state;
  - 2) Supporting **evidence-guided quality activities** in clinical practices;
  - 3) Incorporating the **patient and family voice** into quality efforts; and
  - 4) Informing **policies that support optimal health** and development

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# Part 1: Supporting Meaningful Long-term Collaboration of Stakeholders invested in Child Health Care Quality

- **OPIP facilitates the OPIP Partner Committee – Shared table to achieve four goals**
  1. Sharing of successful initiatives and disseminating best practices
  2. Identify areas of synergy
  3. Build collaboration and consensus
  4. Serve as a resource for policymakers in providing guidance & input
- **Families & family organization a key “stakeholder” at this shared table**
  - ❖ OPIP Parent Advisor – Paid position to be on our steering committee and advise all work
  - ❖ Oregon Center for Children & Youth with Special Health Needs (Title V agency for CYSHCN)
  - ❖ Oregon Family-to-Family Health Information Center

# Part 2: Within Our Projects, Ensuring Parent/Youth Participation at All Levels

1. Project design and implementation
  - Project advisory group
  - Advisors to the project team
2. Training and Curriculum
  - Parents/youth provide key note presentation
  - Parents/youth review improvement tools and curriculum we are development to ensure a patient-centered focus
3. Within practices we are working with, focus on inclusion of parents/youth on their QI team
  - Member of QI team
  - Patient advisory groups to the quality improvement activities
4. Use of patient-reported data to guide and evaluate the impact of the QI
5. Report evaluation data back to patients – part of the feedback loop

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# Partnership with Family/Youth Organizations To Support These Efforts

- Title V Agency/Family to Family (Family Voices)
  - Recruited parents
  - Paid parent stipends for presentations
  - Trained parents to be QI partners in the practice
- LEND Trainees (<http://mchb.hrsa.gov/training/projects.asp?program=9>)
  - Trains future leaders in a variety of disciplines to improve the health of children who have or are at risk of developing neurodevelopmental disabilities or other similar conditions such as autism and intellectual disabilities
  - In Oregon: Interdisciplinary Leadership Education in Neurodevelopmental and Other Related Disabilities (LEND)
- Within our health systems
  - Leveraged Consumer Advisory Councils (Required in our CCOs)
- Within our Early Learning Hubs and Early Childhood Comprehensive Systems (ECCS Grant Activities)
  - Leveraged the Parent Advisor Groups (Required as part of their governance)
- Youth Groups
  - School Based Health Alliance
    - Statewide Youth Action Council

# Resources

- OPIP Trainings
  - Parents as Partners – NIPN Call:  
[http://oregon-pip.org/resources/1\\_OPIP\\_ParentPartner\\_NIPN\\_12-20\\_FINAL.pdf](http://oregon-pip.org/resources/1_OPIP_ParentPartner_NIPN_12-20_FINAL.pdf)
  - Parents as Partners – Strategies Practices Can Use  
[http://www.oregon-pip.org/resources/10\\_11\\_ParentPartner%20call.pdf](http://www.oregon-pip.org/resources/10_11_ParentPartner%20call.pdf)
- Resources
  - CMHI Parent Partner Guide <http://www.medicalhomeimprovement.org>
  - NICHQ Powerful Partnerships Handbook <http://www.nichq.org/>
  - IFCC Patient and Family Advisory Council Resource <http://www.ipfcc.org>
- Happy to Answer Questions
  - Colleen Reuland
  - [reulandc@ohsu.edu](mailto:reulandc@ohsu.edu)
  - 503-494-0456