

Safer Together: The Essential Role of an In-Person Care Partner

Changing Visitation in Healthcare Facilities

As a result of the COVID-19 pandemic, strict visitor restrictions were put in place for infection prevention in hospitals, clinics, outpatient services, and congregate care settings. While restrictions did prevent additional infections, they also caused unintended safety consequences for patients and residents, as well as increased emotional and physical burdens on clinicians, patients, residents and their families.

At the Minnesota Alliance for Patient Safety (MAPS), we know that hospitals, clinics, and congregate care settings want loved ones present for patients or residents, but also want to control and lessen the spread of infection, with a special concern for those individuals identified as high risk. We also know that patients and congregate care residents have experienced heightened anxiety and distress, and they want a loved one to be present during care encounters. We believe the presence of family and loved ones is critical for safety for all stakeholders. Planetree International just released “Person-Centered Guidelines for Preserving Family Presence in Challenging Times”¹ in May 2020, which has been widely endorsed and helped inform MAPS in creating this document.



Minnesota can lead the way in [creating sustainable programs and policies for In-Person Care Partners](#), the essential support that patients and residents need for safe care.

After inviting community input for this document, MAPS aims to:

- Provide a **definition of an In-Person Care Partner** for use across care settings in Minnesota
- Demonstrate that the In-Person Care Partner is **vital for patient safety**
- **Seek endorsement and stories** of the In-Person Care Partner role and its essential nature for safety
- **Provide a toolkit and consultation services for healthcare leaders** to support development of a sustainable and effective In-Person Care Partner program

¹ Planetree Preserving Family Presence During Challenging Times: Principles and Practical Strategies, Updated June 30, 2020

Defining the In-Person Care Partner

As visitor guidelines evolve, the essential role of in-person safety support for patients and residents must not be overlooked. The In-Person Care Partner is distinct from a “general visitor” to a healthcare facility or congregate care setting.

An In-Person Care Partner is a family member or individual chosen by the patient/resident to be physically present to support them during healthcare encounters. As a welcome member of the care team, the In-Person Care Partner assumes an active role and positively contributes to safe, high-quality care. In-Person Care Partners agree to comply with all current infection prevention and control measures in place at organizations and communities, including wellness screenings and personal-protective equipment requirements. In situations where the patient/resident cannot speak for themselves, is otherwise incapacitated or cannot identify who should be present, staff will take a broad definition into account and will make the most appropriate decisions possible regarding an In-Person Care Partner with available information.²

Why In-Person Care Partners Are Essential

In-Person Care Partners are far more than just a “visitor” to the facility. In-Person Care Partners are welcome members of the care team and improve patient safety by:

- Detecting and speaking up about potential errors; they provide a valuable, additional set of eyes and ears
- Observing and communicating important details and changes in condition or behaviors
- Aiding the patient/resident in the management of complex or critical information
- Ensuring continuity of care and appropriate follow-up through transitions and across settings, including home
- Providing emotional support and contributing to the patient/resident’s wellbeing
- Honoring and helping incorporate personal values, preferences into care; celebrating rituals with/for the patient/resident—particularly if founded in cultural traditions unfamiliar to staff
- Alleviating caregiving burdens for staff and providers; can include attending to physical, psychological, spiritual, and emotional needs of patients and residents

In-Person Care Partners are Essential for Safety

We believe In-Person Care Partners are an essential protective factor for safety during healthcare encounters—including hospitalizations, outpatient visits, or care encounters within congregate care settings. The presence of this role builds trust and honors person-centered care as patients, families, and residents are included in care and treatment decisions. Strict visitor restrictions due to COVID-19 exposed the essential need for in-person support of patients as well as residents in congregate care settings. With safety at the forefront—and using input of patients, residents, and families—the designation of the In-Person Care Partner role by healthcare organization assures the safest care possible now and into the future.

Recommendation

We recommend health care organizations and congregate care settings promptly assess and revise their visitation and care policies to define and include the role of In-Person Care Partners. The presence of the In-Person Care Partner is per the patient or resident preference and as permitted by state and federal guidelines. Balanced with the healthcare organization’s ability to welcome In-Person Care Partners’ presence is the healthcare organization’s ability to maintain effective infection prevention and control practices, with serious consideration given to the safety benefits of In-Person Care Partner. During times when state and federal regulations restrict In-Person Care Partner presence, we recommend organizations and care settings continuously prepare for resuming inclusion of these valued partners for safety as soon as permitted. The need for strict access restrictions should be assessed and continually based on current factual evidence.

During the COVID-19 pandemic alongside all our communities, MAPS’ stakeholders understood uncharted territory calls for new approaches. MAPS continues to demonstrate leadership in safety by convening a forum which enables the collective voice of patients and families, in partnership with health care organizations, to develop innovative solutions to make care safer everywhere. The MAPS advisory council is available to member organizations to provide feedback and guidance on program development.

² The Institute for Patient-and Family-Centered Care. Changing Hospital “Visiting” Policies and Practices: Supporting Family Presence and Participation 10/2010.

To further develop a comprehensive toolkit of resources and support, MAPS is **IN SEARCH OF:**

- **Organizations and congregate care settings** taking innovative strides to allow In-Person Care Partners to be part of healthcare admissions, visits, and care encounters
- **Patients, residents, and family members as well as clinicians, organizations, and care settings** who can share stories of how In-Person Care Partners made care safer

Please email maps@mnpatientsafety.org as you change or plan to change policies to allow for an In-Person Care Partner. We will feature your organization and stories on our social channels and website. We'd love to share with the community to spread these efforts!

This Document Authored by

The statewide **Community Advisory Council (CAC)** facilitated by MAPS. The CAC involved over **65 patient and family member advisors** who serve their health systems and communities. This document is the result of over **9 collective meetings, numerous conversations,** and an estimated **300 hours of input** from their experiences and healthcare journeys. Involved patients and family members seek care and/or volunteer time with Allina Health, Children's Minnesota, Gillette Children's, HealthPartners, JustUs Health, Lake Region Healthcare, M Health Fairview, North Memorial, and Riverwood Healthcare Center among others. Lexington Writing Firm provided pro bono writing services for MAPS and CAC, as well as editing services to help create this document.

Supported by

The MAPS Board of Directors

Organizational Endorsement by (MAPS is actively seeking organizational endorsements)



In-Person Care Partner resources will be available soon on the MAPS website | mnpatientsafety.org

For more information regarding consultation services on implementation | maps@mnpatientsafety.org

For questions or media inquiries, contact Catherine Hinz, MAPS Executive Director | chinz@mnpatientsafety.org

Safe care everywhere.

About Minnesota Alliance for Patient Safety (MAPS)

MAPS works towards the mission of safe care everywhere by engaging a diverse stakeholder coalition that includes a devoted a Board of Directors, membership leaders, dedicated staff, and over 100 members that broadly represent Minnesota's health

care community. MAPS efforts are focused on educational programming, original projects, patient and family engagement, and collaboration across all care settings. Visit mnpatientsafety.org to learn more.

MAPS is a subsidiary of Stratis Health. Together, we improve safe care by working on priority health care safety issues. Visit stratishealth.org to learn more.