



The following are ideas to help define the broad scope of projects that have the potential to receive funding. **Note: Each example includes the potential impact of the project as well as how the voice of patients and families are integrated into the project idea.**



## DIRECT CLINICAL CARE PROJECT EXAMPLES

- 1. Developing a school re-entry information booklet for children who are returning to school after a significant absence due to illness or injury.**

Parents and youth have indicated that they feel lost returning to school following an absence due to illness or injury. Staff typically do not have the time, nor the comprehensive knowledge, to adequately inform and educate children and their families how to successfully return to school physically, socially, emotionally, and academically. A collaboration among hospital staff (i.e., social workers, case managers, child life specialists), schools, school district experts, and patient and family advisors holds opportunity to create effective education that provides helpful information and increases the confidence of youth who are returning to school as well as their families and school personnel.
- 2. Developing a peer support program for patients living with a chronic illness (e.g., diabetes, cancer, etc.).** Peer support programs have been found to be beneficial to: mentees, by empowering them to help themselves; mentors, by providing an opportunity for them to give back; and staff, by enhancing and supporting clinical care models with peer mentors who address concerns, saving time for clinicians. Patients have expressed an interest in participating in peer support programs both as mentors and mentees in efforts to improve coping skills and quality of life (mentees) as well as to experience the reward that comes from helping others (mentors). A collaboration among patient and family advisors and clinicians could benefit patient care through the creation of a peer support program.



## SUPPORT SERVICES PROJECT EXAMPLES

- 1. Developing empathy simulation training for staff who deliver meal trays.**

During meal times, it's common for patients to call their nurse to help them set up their food tray. It has been noted that staff who pass food trays frequently place the tray in a space free from clutter — which may mean that it is not in reach of the patient. Additionally, some patients have trouble seeing and hearing clearly and opening containers. Simulation training provides the opportunity for staff to better empathize with what it may be like to be bedridden with visual, hearing, and dexterity limitations that prevent them from eating their meals when delivered. Post-simulation reflection creates the opportunity to think about how they may change behaviors and practices when delivering meal trays. Engaging patient and family advisors in simulation training and reflection brings 360 degree views to the education of support staff.



## SAMPLE PROJECTS (cont.)

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- 2. Developing a first and last impressions volunteer escort program.** Patients have expressed frustration over finding their way throughout large hospital complexes as well as managing to travel distances when not feeling well or when living with disability. Engaging patient and family advisors to create a volunteer escort program that welcomes patients/families when entering a Beaumont facility (first impression) and helps them return to their mode of transportation upon leaving the facility (last impression) has the potential to reduce stress for patients and families, arrive to destinations in timely ways, support their physical needs, and improve overall experiences.



### COMMUNITY HEALTH PROJECT EXAMPLES

- 1. Developing a parish nurse program for adults with chronic health conditions who are socially isolated.** Patients who are socially isolated and with co-morbidities are much more likely to experience exacerbations of illness and admissions/re-admissions that could potentially be prevented. Through a collaboration among high-risk patients, discharge planners and churches/places of worship, a volunteer program can be created to support high-risk patients who are admitted to Beaumont Health hospitals. This effort could potentially impact patient's clinical outcomes and their quality of life. For certain patients without family, churches/places of worship provide social and emotional connections that would otherwise be non-existent. This "parish nurse" program that assigns a congregant to an at-risk inpatient enrolled in the program has the potential to reduce social isolation during hospitalization through hospital visitation and help successfully transition the patient home after discharge by engaging them in discharge planning and education.
- 2. Developing a community support program for children at risk for chronic illness due to obesity.** Obesity can have a harmful effect on the body by placing the person at risk for cardiovascular disease, diabetes, asthma, and musculoskeletal problems as well as anxiety and depression. Community-based programs have the potential to prevent childhood obesity and thus improve the health of communities. A collaboration between staff, schools, afterschool programs and children holds potential to create a comprehensive education and community support program that reduces the risk of obesity among high-risk youth.