

# The PACT Collaborative



## Information Packet

How should healthcare respond to harm?

*Join Us on the Pathway to Accountability,  
Compassion, and Transparency*

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## PACT Overview

Patients entrust their lives to healthcare providers. Healthcare providers, in turn, aim to promote wellness, heal what can be healed and relieve suffering, all with comfort and compassion. Yet, when patients are harmed by their healthcare, too often they experience defensiveness and disregard that actually exacerbate their suffering, adding insult to injury. PACT, the Pathway to Accountability, Compassion and Transparency, helps health providers improve the way they respond to harm. PACT helps providers implement Communication and Resolution Programs (CRPs) which can mitigate further harm and avoid pouring salt on the wounds of patients whom the healthcare system has hurt instead of helped. These programs strive to ensure that patients and families injured by medical care receive prompt attention, honest and empathic explanations, sincere expressions of reconciliation including financial and non-financial restitution, and reassurance from efforts to prevent future harm to others. Decades of study and interest in CRPs are resulting in increased implementation with the hope that supporting patients, families, and caregivers after harm could become the norm rather than the exception.<sup>1</sup>

Ariadne Labs and the Collaborative for Accountability and Improvement have long been leaders in promoting Communication and Resolution Programs. They co-founded the PACT Collaborative, in partnership with the Institute for Healthcare Improvement, with the goal of guiding PACT Collaborative participants in gaining knowledge, skills, and tools they need to implement a comprehensive, highly reliable process for responding to harm events with accountability, compassion, and transparency.

Recognizing the variety of healthcare structures, needs, and experience with harm event response programs, PACT now offers three different paths:

- Organizations that are brand new to a comprehensive harm event response process and want to explore the concepts on their own time may choose to join the **PACT Community of Practice** which provides access to the change package and some limited guidance for implementation.
- Organizations that are ready to fully implement or dramatically improve their harm response program may choose the robust support of the **PACT Collaborative**.
- Organizations with a mature harm event response program in place, a desire for a community of support around sustainability, and readiness to step up as an innovative leader in the field will opt for the **PACT Leadership and Innovation Network**.

A comprehensive path would have an organization begin with the PACT Community of Practice to develop a solid foundation with the core concepts. When they're ready for the next step, they would participate in the PACT Collaborative to implement a full program. They would then advance to the PACT Leadership and Innovation Network for ongoing engagement. Some organizations will be ready to skip one or more steps to accelerate their engagement with PACT.

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<sup>1</sup> Gallagher TH, Boothman RC, Schweitzer L, Benjamin, EM. Making communication and resolution programmes mission critical in healthcare organisations. *BMJ Quality & Safety* 2020;29:875-878.3

## The PACT Collaborative

The first wave of the PACT Collaborative involved 19 healthcare organizations from 11 states around the US. Through their participation in PACT, they have:

- refined and adopted process maps to guide a consistent response to harm events,
- developed programs to support providers, staff, patients, and families after harm events,
- engaged with patients and families to co-develop processes and materials,
- broken down silos to allow for true collaboration between patient safety, risk management, quality improvement, claims, and patient relations departments,
- enhanced their harm event identification systems and their event review processes, and
- gained confidence in their ability to effectively respond to harm events.

### Participant Testimonial

*"Participation in the PACT Collaborative has given our organization the knowledge and tools required to develop our CRP. The faculty and support staff are impressive and they have gone above-and- beyond to provide the professional support and guidance needed for our success. Participants selected by the PACT Collaborative faculty to enrich learning experiences were excellent and added depth and perspective to the numerous topics covered. Abundant resources (handouts, video recordings, etc.) were readily available for immediate use. The virtual platform allowed true collaboration with other healthcare organizations and the technology worked flawlessly. I highly recommend participation in the PACT Collaborative to any organization desiring to embark on the development of a CRP or wanting to enhance an existing program."*

-Sharn Devun, MSN, RN, CPQH, Director of Risk Management, Hendrick Health

The next wave of the PACT Collaborative will build on all that we learned from our first participants to ensure that organizations entering the Collaborative will finish with:

1. The needed skills and processes to compassionately engage with patients or residents and their families after harm, ensuring that their needs drive the response process.
2. Organizational and operational processes implemented to support an accountable, compassionate, and transparent response to harm.
3. A defined approach to measuring harm response processes and outcomes to support reliability and sustainability of the program.

## Opportunity for Oregon Healthcare Organizations

The Oregon Patient Safety Commission (OPSC) and PACT are partnering to create a cohort of Oregon healthcare organizations to participate in the PACT Collaborative together. This cohort will ultimately become a foundation for continued collaboration and the help to improve how Oregon's healthcare organizations respond to patient harm.

### Financial Support Available

OPSC is offering a limited number of partial scholarships, **covering half of the cost** of enrollment, to Oregon healthcare organizations that participate in PACT's Oregon Cohort.

[Learn more about PACT's Oregon Cohort](#)

## Benefits of the PACT Collaborative

The PACT Collaborative helps healthcare systems and providers create a comprehensive process to respond to harm in a holistic and compassionate manner. The PACT Collaborative goes far beyond the trainings that many organizations have previously undertaken, featuring new tools and resources, metrics, individualized learning from core faculty, and shared learning among peers. PACT will help organizations move from a disjointed and inconsistent response to harm events to a highly reliable process for responding to patient harm, supporting the needs of all involved. One of the unique benefits of PACT participation is the cross-fertilization of ideas and learning among the Collaborative Teams that this approach facilitates.

### Participant Testimonial

*"Many healthcare organizations believe that the right way to bring healing and resolution to patients and families when an unexpected and unwelcomed outcome occurs is through honest, open and ongoing communication. However, achieving that goal requires providing their staff with the training, tools and ongoing guidance they need to be successful. But organizations don't have to build these resources alone. The PACT Collaborative can help any organization achieve success. Whether the organization is just beginning this important work or is well on its journey, the resources provided by PACT are invaluable now and will continue to be so in the future. Being a member of PACT also brings with it the fellowship and support of the PACT member organizations and their professional staff. Our job together has really just begun."*

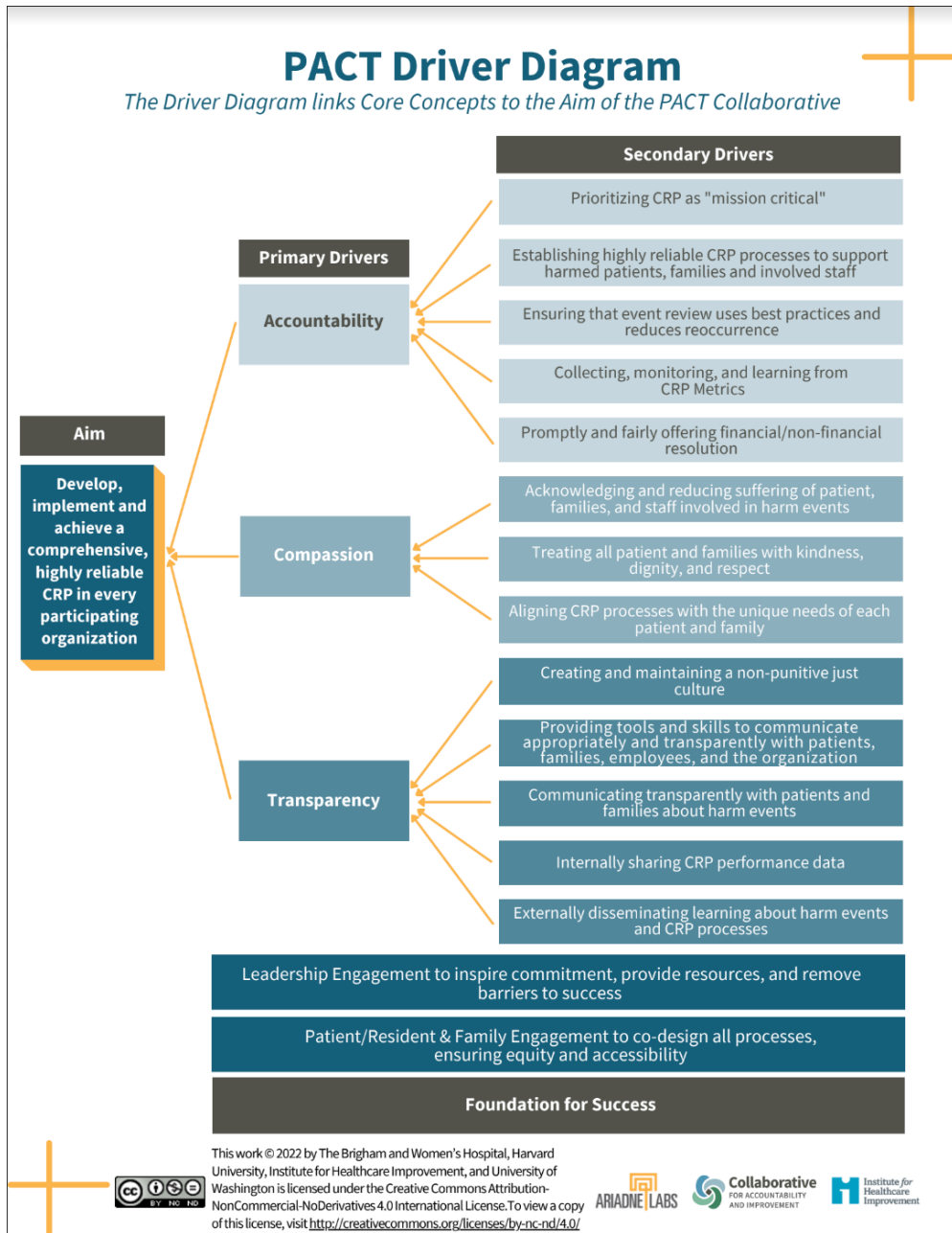
Larry Smith, Vice President, Corporate Risk Management Service, Medstar

## **PACT Collaborative Structure and Core Curriculum**

The PACT Collaborative is modeled on IHI's Breakthrough Series (BTS) Collaborative. This systematic approach convenes healthcare organizations to test and measure practice innovations while sharing their experiences to accelerate learning and widespread implementation of best practices. Participants work together with other organizations who share their goals.

As shown on our driver diagram on page 6, the PACT Collaborative is organized around the Core Concepts of Accountability, Compassion, and Transparency, as well as the foundational elements of Leadership Engagement and Patient and Family Engagement. As a participant in this Collaborative, you will be provided with innovative tools and robust support for the key drivers of successful harm response program implementation:

- Strong leadership engagement
- Highly reliable processes
- Creating a learning organization
- Respectful patient partnership
- Support for impacted patients and families, as well as involved providers
- Measurement strategies & tools



Participating in a Collaborative is an excellent foundational approach to creating long-term success. This method can help healthcare organizations accelerate work that is underway and plan for meaningful progress over time. Recognizing, however, that the work of genuinely developing and embedding a robust and meaningful program is a multi-year process, PACT offers ongoing support. At the conclusion of the Collaborative, graduates will be invited to join the PACT Leadership and Innovation Network, an ongoing community of organizations committed to advancing optimal harm response in their own organizations and beyond.

## PACT Tools and Resources

Innovative tools and resources are essential to support effectiveness and consistency. PACT tools build on the content of the CANDOR Toolkit developed by the Agency for Healthcare Research and Quality in 2009, offering new guides, tools, and tip sheets that can be used by any healthcare organization. Faculty will introduce tools during the Collaborative with structured guidance for how to use them for the best experience and outcomes. Those tools include:

- Measurement tools:
  - PACT Measurement Guide
  - PACT Data Tracking Tool
  - PACT Patient/Family Experience Measures
  - PACT Provider Experience Measures
- Communication tools:
  - PACT Patient and Family Communication Tip Sheet
  - PACT Communication Coaching Guide
  - PACT Patient Engagement in Event Analysis Tool
- Process tools:
  - Patient and Family Support Program Guide
  - Patient and Family Peer Support Network (Betsy Lehman Center)
  - RCA2 (IHI)
  - Peer Support Toolkit (Betsy Lehman Center)
  - Psychological Safety Tip Sheet
  - Resolution Toolbox
- Tools for Patients and Families:
  - PACT Patient and Family Brochure
  - PACT Patient and Family Pathway

## Organizations Leading PACT

**Ariadne Labs** is a joint center for health systems innovation at Brigham and Women’s Hospital and Harvard T.H. Chan School of Public Health. Ariadne develops simple, scalable solutions that dramatically improve the delivery of health care at critical moments to save lives and reduce suffering. Their vision is for health systems to deliver the best possible care for every patient, everywhere, every time.

**The Collaborative for Accountability and Improvement** (CAI) is a program of the University of Washington. CAI serves to advance highly reliable communication-and-resolution programs that meet the needs of patients, families, and providers for accountability, compassion, transparency, and improvement after patient harm.

### Participant Testimonial

*"Participating in PACT during the Covid Pandemic was both a litmus test for our commitment to this work and a ballast for it. I am confident that PACT helped our organization move the dial on this work during one of the most challenging times in healthcare."*

Frank Korn, Director of Risk Management,  
Dartmouth-Hitchcock



## PACT Core Faculty

**Evan Benjamin, MD, MS, FACP** is Director of Community Innovation at Ariadne Labs. He is associate professor of Medicine at Harvard Medical School and associate professor of Health Policy and Management at Harvard School of Public Health where he teaches health care systems, quality improvement, and patient safety. He was the former co-chair of MACRMI, a Massachusetts alliance to implement Communication and Resolution Programs (CRPs) across the state. Dr. Benjamin's research focuses on the impact of CRPs on patient and provider experience as well as outcomes of cost and patient safety.

**Thomas H. Gallagher, MD, MACP** is a general internist who is Professor in the Department of Medicine at the University of Washington, where he is Associate Chair for Patient Care Quality, Safety, and Value. Dr. Gallagher is also a Professor in the Department of Bioethics and Humanities, and the Executive Director of the Collaborative for Accountability and Improvement, an organization dedicated to advancing the spread of Communication and Resolution Programs. Dr. Gallagher's research addresses the interfaces between healthcare quality, communication, and transparency.

## PACT Collaborative Schedule

The second PACT Collaborative will have six learning sessions over the course of a year. Learning Sessions are an excellent opportunity to experience the “All Teach, All Learn” dynamic of a Collaborative as we create time for sharing successes among teams, interacting with faculty, learning about new changes to test, solidifying skills in the Model for Improvement, and team planning for the next action period. Five learning sessions will be highly interactive virtual sessions and one will be a simulation-rich in-person session.

PACT Learning Sessions will occur in alternate months, beginning in May 2023. Specific dates will be set in early 2023:

- July 2023
- September 2023
- November 2023
- January 2024
- March 2024
- May 2024

## Cost to Join PACT

Participating organizations will pay \$25,000 for a full team to attend all events, access all resources, consult with a faculty coach, and submit data for evaluation and feedback. Additional teams sent from the same organization will cost \$8,500 per team.

A limited number of partial scholarships are available for critical access hospitals, FQHCs, and long-term care facilities. If you would like to be considered for a scholarship, please send an email to [pact@ariadnelabs.org](mailto:pact@ariadnelabs.org) requesting a conversation with a PACT Collaborative faculty member.

At the conclusion of the PACT Collaborative, participants will be invited to join the PACT Leadership and Innovation Network which offers support for continued development and sustainability, opportunities for program recognition, the option of revisiting Collaborative content with the next wave, participation in workgroups to explore new directions for the field, and visibility as leaders in this essential emerging field.

The organizations leading PACT are non-profits, and the tuition and sponsorships are intended solely to cover the program costs.

## Additional FAQs about PACT

### What would participation in PACT be like?

Of the six eight-hour learning sessions, five will be virtual (each presented over two half-days) and one of which will be an in-person session presented over a single full day. Between learning sessions, Collaborative Teams will enter action periods, implementing the best practices introduced in the learning sessions, attending monthly check-ins with a smaller cohort within the Collaborative, and consulting with their assigned faculty coach. The PACT Collaborative also involves extensive shared learning among the participating organizations, building upon their experiences to date, which may occur during learning sessions or action periods.

### What type of data will participants collect and share?

PACT Collaborative Teams will submit data via the PACT PSO. Submitted data will include process and outcome data that will be shared back in reports to help each organization understand the reliability of their program as it improves over time and in relation to the other PACT participants.

### Who from my organization would be involved in PACT?

Having the right people on your PACT Collaborative Team is essential to your success. The most effective team will be one with a variety of perspectives and viewpoints, solid knowledge of both the realities of the system and goals of the Collaborative, and the full support of the organization to move forward and make changes.

Each team will include an Executive Sponsor, a Team Leader responsible for day-to-day Collaborative activities, a clinician champion, and the key staff involved in the organization's harm response program (e.g., risk managers, claims professionals, patient safety officers, patient/family and resident representatives, or medical directors). There are no limitations on the number of people who may attend our virtual sessions, although there may be team size limits for our in-person session. Guidance and consultation on your team composition will be provided to all who join the PACT Collaborative.

## Patient and Family Advocate Testimonial

*"If organizations are going to truly take care of patients and families after medical harm, they need structured programs supported and embedded in their organizations. PACT helps teach organizations what to do from the minute a patient is harmed to the conclusion of the process where the patient and family feel they have the answers and support they need to re-engage in their life and the world."*

Carole Hemmelgarn, Patient and Family Advocate

# PACT Collaborative Application

**Application Deadline:** September 1, 2023

**PACT Collaborative Launch:** October, 2023

**Note:** Participants will be selected and notified on a rolling basis. Due to limited space, we encourage you to complete your application as soon as possible to guarantee a spot in the PACT Collaborative.

**Cost:** Participating organizations will pay \$25,000 for a full team to attend all events, access all resources, consult with a faculty coach, and submit data for evaluation and feedback. Additional teams sent from the same organization will cost \$8,500 per team. A limited number of partial scholarships are available for critical access hospitals, FQHCs, and long-term care facilities. If you would like to be considered for a scholarship, please send an email to [pact@ariadnelabs.org](mailto:pact@ariadnelabs.org) requesting a conversation with a PACT Collaborative faculty member.

## About Your Organization

Organization Name \_\_\_\_\_  
Organization Headquarters Address \_\_\_\_\_  
Organization Service Area \_\_\_\_\_  
Organization Liability Insurer(s) \_\_\_\_\_  
Number of locations/facilities \_\_\_\_\_

## About Your Collaborative Leadership

Each Collaborative Team will designate a team leader who will be responsible for day-to-day engagement in the Collaborative and who will serve as the primary contact for all Collaborative activities. Each organization will also designate an executive sponsor who will endorse the work of the team, provide oversight, empower the team to move forward, and assist with removal of barriers to success.

Team Leader _____	Executive Sponsor _____
Role _____	Role _____
Phone _____	Phone _____
Email _____	Email _____

Who will be the administrative contact for scheduling, finances, and agreements?

Administrative Contact \_\_\_\_\_  
Role \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

## About Your Current Processes

For each component, mark the number that best represents your organization's current practice.

### Your Organization's Current Processes

	1	2	3	4	5
	Solidly in place, consistently applied	In place and often applied	In place and applied selectively	Not in place, but has been discussed	Not in place and has not been discussed

### Components

We review harm events to determine whether to use our harm response process	1	2	3	4	5
We offer emotional support to providers and staff involved in a harm event	1	2	3	4	5
We offer emotional support to patients and families involved in a harm event	1	2	3	4	5
We conduct preliminary event reviews within 72 hours of knowing of the harm event	1	2	3	4	5
We elicit the patient and family narrative of the harm event	1	2	3	4	5
We provide communication training to staff	1	2	3	4	5
We provide communication coaching to providers before harm communication discussions	1	2	3	4	5
We present event analysis findings and prevention plans to patients and families	1	2	3	4	5
We proactively offer compensation if the harm event was due to an error or system failure	1	2	3	4	5

## Letter of Interest

Please provide a letter of interest that includes:

- An explanation of the reasons why your organization should be selected to participate
- An assurance of support from each of the following:
  - Your executive sponsor
  - Your organization's board of directors
  - Your organization's medical executive committee or other governing body for healthcare staff
- If your organization has multiple facilities, explain why you have selected this facility or these facilities to participate

## Application Submission

Send your complete application and letter of interest to [pact@ariadnelabs.org](mailto:pact@ariadnelabs.org) by September 1, 2023. Participants will be accepted and notified on a rolling basis. If you are applying on behalf of multiple facilities from your organization, please complete an application for each team. You only need to submit one letter per organization.

## Questions

Please reach out to:

**Melissa Parkerton**

Director, PACT

[mparkerton@ariadnelabs.org](mailto:mparkerton@ariadnelabs.org)

or

**Paulina Osinska**

Associate Director, PACT

[osinsp@uw.edu](mailto:osinsp@uw.edu)