PACT
Collaborative

Information Packet

How should healthcare respond to harm?

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

PACT Pathway to Accountability, Compassion, & Transparency

ARIADNE LABS

Collaborative FOR ACCOUNTABILITY AND IMPROVEMENT

Institute for Healthcare Improvement

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Overview of the PACT Collaborative

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 exacerbate their suffering, adding insult to injury. PACT (the Pathway to Accountability, Compassion and Transparency) helps healthcare organizations improve the way they respond to harm by supporting the implementation of Communication and Resolution Programs (CRPs).

CRPs provide real value for patients and families, providers, and healthcare organizations.

- **For patients and families:** They offer what people want most after harm—honesty, empathy, and assurance that steps are being taken to prevent the same harm from happening again. This can be critical for healing.
- **For healthcare providers:** CRPs provide support for clinicians too. Harm events take an emotional toll, and CRPs create space for reflection, growth, and healing. They also guide clinicians on how to communicate clearly and compassionately after something goes wrong, which can help to rebuild trust and maintain the patient-provider relationship
- **For the system overall:** CRPs improve patient safety by identifying root causes and system failures. They break down barriers to reporting and drive a culture of continuous learning.

CRPs don't increase claims or lawsuits. In fact, research shows they may even reduce both. 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.[1]

CRPs are also endorsed as a best practice and are supported by top healthcare authorities, including:

- The Joint Commission, National Quality Forum, and Leapfrog
- The U.S. National Steering Committee for Patient Safety
- The World Health Organization

The 2023 President's Council of Advisors on Science and Technology (PCAST) report named CRPs as one of a few specific initiatives to transform patient safety, the 2024 CMS Patient Safety Structural Measure included a requirement that hospitals must attest to having "a defined, evidence-based CRP reliably implemented after harm events", and a recent AHRQ-funded literature review confirmed that CRPs are effective and worth implementing.

Ariadne Labs, the Collaborative for Accountability and Improvement, and the Institute for Healthcare Improvement (IHI) have long been leaders in promoting CRPs. They co-founded the PACT Collaborative 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.

Now is the time to launch or strengthen your organization's CRP with the PACT Collaborative!

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[1] 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

Participation in the PACT Collaborative

The first three waves of the PACT Collaborative involved 40 healthcare organizations from across 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
- Broken down silos to allow for true collaboration between patient safety, risk management, quality improvement, claims, and patient relations departments
- Engaged with patients and families to co-develop processes and materials
- Enhanced their harm event identification systems and their event review processes
- Implemented improvements to prevent recurrence of harm events
- Gained confidence in their ability to effectively respond to harm events

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

1. The needed skills and processes to compassionately engage with patients 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.

Participant Testimonial

"The PACT Collaborative has proved essential to helping health systems build Communication and Resolution Programs that work. The strength of the collaborative lies in showing organizations how to convert CRPs from a vision into practice. I'd encourage any organizations seeking to implement a meaningful CRP to join this invaluable effort."

-Allen Kachalia, MD, JD, Senior Vice President, Patient Safety and Quality, Johns Hopkins Medicine

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 by providing:

- Access to expert faculty in the CRP space
- Practical tools and real-world resources
- A supportive network of peers
- One-on-one coaching tailored to your needs
- A clear, step-by-step roadmap to CRP implementation

PACT will help organizations move from a disjointed and inconsistent response to harm events to a highly reliable process for responding to patient harm that supports the needs of all involved.

PACT Collaborative Structure

The PACT Collaborative is modeled on IHI's Breakthrough Series Collaborative. This systematic approach convenes healthcare organizations with shared goals to learn together, share experiences, and accelerate implementation of new processes.

PACT teams will participate in six virtual learning sessions when content will be shared and guidance will be offered. 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.
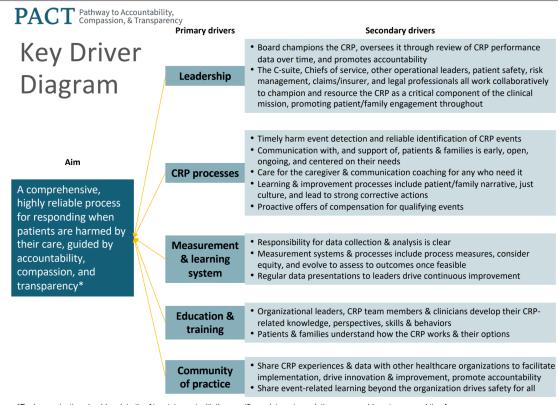
Having the right people on your PACT Collaborative Team is essential to your success. The most effective team will be one with a variety of perspectives and viewpoints, solid knowledge of both the realities of the system and goals of the Collaborative, and the full support of the organization to move 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 relations professionals, patient/family and resident representatives, or clinical directors). There is no limitation on the number of people who may attend.

PACT Collaborative Core Curriculum

As shown in our driver diagram below, the PACT Collaborative is driven by the Core Concepts of Accountability, Compassion, and Transparency. 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
- Measurement and learning system
- Strategies for ongoing education and training
- A community of practice to support your work and challenge your assumptions

Participating in a Collaborative is an excellent foundational approach to creating long-term success. This method helps healthcare organizations accelerate work that is underway and plan for meaningful progress over time. Recognizing that the work of genuinely developing and embedding a robust and meaningful program is a multi-year process, though, 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 Pathway to Accountability, Compassion, & Transparency

Key Driver Diagram

Primary drivers | **Secondary drivers**

Aim

A comprehensive, highly reliable process for responding when patients are harmed by their care, guided by accountability, compassion, and transparency*

Leadership
- Board champions the CRP, oversees it through review of CRP performance data over time, and promotes accountability
- The C-suite, Chiefs of service, other operational leaders, patient safety, risk management, claims/insurer, and legal professionals all work collaboratively to champion and resource the CRP as a critical component of the clinical mission, promoting patient/family engagement throughout

CRP processes
- Timely harm event detection and reliable identification of CRP events
- Communication with, and support of, patients & families is early, open, ongoing, and centered on their needs
- Care for the caregiver & communication coaching for any who need it
- Learning & improvement processes include patient/family narrative, just culture, and lead to strong corrective actions
- Proactive offers of compensation for qualifying events

Measurement & learning system
- Responsibility for data collection & analysis is clear
- Measurement systems & processes include process measures, consider equity, and evolve to assess to outcomes once feasible
- Regular data presentations to leaders drive continuous improvement

Education & training
- Organizational leaders, CRP team members & clinicians develop their CRP-related knowledge, perspectives, skills & behaviors
- Patients & families understand how the CRP works & their options

Community of practice
- Share CRP experiences & data with other healthcare organizations to facilitate implementation, drive innovation & improvement, promote accountability
- Share event-related learning beyond the organization drives safety for all

*Each organization should update the Aim statement with the specific goal, target population, measurable outcome, and timeframe.
Example: *By the end of the PACT Collaborative in 12 months, our organization will run 100% of CRP events identified through our CRP.*

PACT Curriculum Overview

The PACT sessions are adapted to meet the needs of participants each wave. In general, the curriculum will cover the key learning objectives outlined below:

Learning Session for Leaders: Leading Successful CRP Implementation (3 hours)
Learning Objectives:
- Recognize the ways PACT tools and resources will prepare PACT teams to launch your CRP
- Recognize the critical role of leaders in successful CRP implementation
- Identify steps leaders can take today to make your CRP mission critical

Learning Session One: Creating a strong foundation for success with the PACT Collaborative (4 hours)
Learning Objectives:
- Introduce participants to the PACT core concepts and key resources available to help prepare organizations to launch their CRP
- Prepare participants to review and use the PACT process maps
- Identify the ways in which learners can engage with the PACT curriculum and maximize learning

Learning Session Two: Key CRP Components: Early Response and Middle Response (8 hours)
Learning Objectives:
- Define the foundational steps in the early and middle stages of a CRP
- Prepare for identification of CRP events and tracking of CRP processes
- Identify strategies for engaging key parties including clinicians, insurers, communication coaches

Learning Session Three: Communication with Patients & Families Across the CRP Continuum (8 hours)
Learning Objectives:
- Prepare for communication at each of the key points in the CRP process
- Plan for written communication and documentation
- Identify strategies and tools to support teaching harm communication skills at their organizations

Learning Session Four: Middle and Later Response to Harm & Legal Considerations (8 hours)
Learning Objectives:
- Learn techniques to better elicit the patient and family narrative after a harm event
- Prepare your organization for reconciliation conversations with patients and families
- Recognize the role of plaintiff and defense attorneys in successful CRP implementation

Learning Session Five: Advanced CRP Topics (8 hours)
Learning Objectives:
- Examine and discuss advanced CRP topics
- Discuss the importance of sharing learnings from CRP cases within organizations and beyond
- Recognize the critical role for patient and family advocates in co-creating CRPs

Learning Session Six: Continuing your CRP Momentum Beyond the Collaborative (7 hours)
Learning Objectives:
- Reexamine the content, tools, and resources covered over the course of PACT
- Recognize the progress and accomplishments organizations made through PACT
- Discuss how participants can sustain the improvement they are made through PACT

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. Some of these tools are:

- 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
  - Eliciting the Patient Narrative
  - Sharing Event Review Findings with Patients and families

- Process Tools
  - Patient and Family Support Guide
  - Patient and Family Peer Support Network (Betsy Lehman Center)
  - RCA2 (IHI)
  - Peer Support Toolkit (Betsy Lehman Center)
  - Psychological Safety Tip Sheet
  - Resolution Toolbox
  - PACT Guide for CRP Policy
  - PACT Harm Event Checklist

- Tools for Patients and Families:
  - PACT Patient and Family Brochure
  - PACT Patient and Family Pathway

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

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 joint program of the University of Washington and the Armstrong Institute for Patient Safety and Quality at Johns Hopkins University. 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.

The Institute for Healthcare Improvement (IHI) is an independent not-for-profit organization based in Boston, Massachusetts. For more than 25 years, IHI has used improvement science to advance and sustain better outcomes in health and health systems across the world. IHI brings awareness of safety and quality to millions, catalyzes learning and the systematic improvement of care, develops solutions to previously intractable challenges, and mobilizes health systems, communities, regions, and nations to reduce harm and deaths.

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 toCRPs 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 CRPs. Dr. Gallagher's research addresses the interfaces between healthcare quality, communication, and transparency.

Jeff Salvon-Harman, MD, CPE, CPPS, is the Vice President, Safety at the Institute for Healthcare Improvement (IHI). He provides strategic leadership in Safety with deep operational expertise implementing change initiatives and applying quality improvement methods. He is a recognized subject matter expert in high reliability, patient and workforce safety, Human Factors application to Root Cause Analysis, and system level management of quality and safety.

Melissa Parkerton, MA, Melissa Parkerton is the Director of PACT and the Assistant Director of the Collaborative for Accountability and Improvement. With a background in patient safety and healthcare quality improvement, her work now focuses on driving implementation of comprehensive, highly reliable CRPs. She is proud to lead PACT which brings together her passions for Collaborative learning, patient safety, and a compassionate, accountable response to harm.

Lauge Sokol-Hessner, MD, CPPS, is a hospitalist and Associate Professor of Medicine at the University of Washington (UW) in Seattle, Washington. He is also Associate Director of the Collaborative for Accountability and Improvement. He has led CRP work in several ways: communicating with patients and families after adverse events; leading a medical center's peer review program (as the former Senior Medical Director of Patient Safety in the Department of Health Care Quality at Beth Israel Deaconess Medical Center); a member of the leadership team for MACRMI; and coaching several hospitals in Eastern Massachusetts as they implement CRPs.

PACT Collaborative Schedule

The PACT Collaborative is organized around learning sessions and action periods. 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 when new ideas will be tested and implemented.

Learning Sessions are scheduled daily from 9 am -1 pm PT (12 pm-4 pm ET).

PACT Collaborative Schedule

March 11*-12, 2026
April 22-23, 2026
June 10-11, 2026
September 10-11, 2026
November 4-5, 2026
January 13-14, 2027

* Learning Session for Executive Sponsors and Team Leaders only

Cost to Join PACT

Participating organizations that apply before October 3, 2025 will pay $25,000 for a full team to attend all events, access all resources, consult with a faculty coach, and have guidance in understanding their own data. Additional teams sent from the same organization will cost $9,000 per team. After October 3, organizations will pay $29,000 with the same cost for an additional team.

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

PACT Collaborative Application

PACT Collaborative Application Link:
https://harvard.az1.qualtrics.com/jfe/form/SV_0cwt2LiNNRukFHo

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Early Bird Deadline: October 17, 2025
Final Deadline: January 23, 2026
PACT Collaborative Launch: March 11, 2026

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: Early Bird organizations will pay $25,000 to join with access to all events, all resources, and consultation with a faculty coach. Additional teams sent from the same organization will cost $9,000 per team. After October 17, organizations will pay $29,000 with the same cost for additional teams.

Application Submission

Complete the **PACT application here** by January 23, 2026. Participants will be selected and notified no later than February 6, 2026.

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:

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