



**California Patient Relations Association
Advanced Patient Relations Certification©**

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About CaPRA

The California Patient Relations Association (CaPRA) is a not for profit healthcare organization dedicated to individuals working as Patient Relations Professionals (PRP) currently employed in hospitals, health maintenance organizations, home health agencies, long-term care facilities and other health-related organizations.

Patient Relations Professionals (PRP) includes patient representatives, guest relations, physicians, nurses, social workers and others who work as advocates for patients and families.

A. MISSION

The mission of the California Patient Relations Association is to lead the advancement of PRP by supporting the role of professionals who represent and advocate for consumers across the healthcare continuum.

CaPRA achieves its mission by:

1. Providing its members with education, information, and networking opportunities.
2. Serving as a resource for consumers, payers, the community, and other healthcare professions on issues such as:

Patient education

Patients' rights

Patient experience

Ethics

Patient satisfaction/measurement

Complaint and grievance management/ Customer service/Service Recovery

B. VALUES

We advocate for healthcare consumers in order to improve the healthcare experience of those we serve: patients, families, and others.

Therefore we believe:

- In respect for their right to control their healthcare decisions;
- The dignity of patients shall never be compromised;
- Respect, caring and compassion are as important as patient care technology;
- Education and information are vital to informed healthcare decision-making.

As members of the California Patient Relations Association, we believe:

- Values and ethics are the foundation of our professional practice; In the value of collaboration with other healthcare professionals;
- Taking action to create change in the healthcare system is our responsibility;
- Continuing Education and information are critical to our professional development.

About Advance Patient Relations Certification (APRC)

Certification is awarded by CaPRA indicating that the candidate has met the outlined APRC practice requirements and is an Advanced Practitioner as set forth by the organization. Those who achieve this status may use the initials APRC after their names. APRC is not a required certification to hold a position as a Patient Relations Professional (PRP), but it does indicate achievement of competencies at an advanced level.

This manual is designed to assist the advocates interested in applying for the APRC designation. It contains information on how to acquire the APRC designation. To avoid problems with the processing of your application, please follow the guidelines outlined in this manual and comply with the published deadlines.

WE RECOMMEND THAT YOU KEEP THIS /Manual FOR REFERENCE THROUGHOUT YOUR APPLICATION PROCESS

A. TERMS DEFINED

Certificate Program -This is a college/university or the Beryl Institute's program in which classes in Patient Representative/Relations meet the core subjects listed on form A5. Those who successfully complete the course(s) receive a certificate to confirm they have completed the requirements of the class.

Certification — A form of credentialing conferred by CaPRA. The person who holds certification has met the criteria set forth by CaPRA as a recognized advanced practitioner.

Advanced Practitioner – One who is accomplished in their career as a Patient Representative/Relations by the number of years successfully served as a Patient Representative/Relations and by the quality of their work.

B. APPLICATION CRITERIA REQUIREMENTS

To qualify for this designation an advanced practitioner must meet the following criteria:

1. Show proof at a minimum of
 - Five (5) years on the job experience in addition to a bachelor's degree; or
 - Seven (7) years on the job experience and an associate degree; or
 - Ten (10) years on the job experience with a high school diploma or GED, certificate program
2. Currently working in the field as a Patient Relations Professional; and
3. Demonstrate that your Scope of Practice encompasses the Standards of Practice (See References page 6); and
4. Agree to abide by the Code of Ethics (*See References page 8*; and

C. APPLICATION REQUIREMENTS Part 1

The candidate is responsible for submitting all required materials to the APRC Review Board at one time. Incomplete applications will be returned. Use the *Candidate's Checklist* on page 9. Materials you will be required to provide include:

To achieve the certification, eligible applicants must:

1. Submit a completed Application PACKET
2. Submit Two (2) letters of reference; from direct manager and coworker (*Forms A2 and A3*)
3. Complete and submit the application (*Forms A4 and A5*)
4. Complete and submit the Continuing Education form.
5. Submit documentation of 50 contact hours within the past five (5) years and how the Continuing Education credits earned relate to your professional practice or completion of an approved certificate program such as the Cleveland State University Patient Advocate Certificate Program, SHCA Certificate Program, Beryl Institute Patient Advocate Certificate Program, etc.
6. Submit a personal statement describing your vision of a Patient Relations Professional in today's environment (*maximum of 1,500 words*).
7. Complete two (2) Grievance Case Studies from this manual, demonstrating your knowledge and expertise.
8. Submit a Performance Improvement Project or Program instituted by you or in which you participated.
9. CaPRA will confirm receipt of the completed application to the email address provided by the candidate. Applications will then be reviewed by APRC Review Board to ensure eligibility requirements have been met prior to the candidate being notified of approval to sit for the interview. Please allow up to fifteen (15) business days for the APRC application to be processed. Receipt will be sent as confirmation.

10. SCORING

Scoring of the Application Packet will apply as follows:

Item	Total Pts Possible	Minimum Required Pts
1. Case Study #1	80	64
2. Case Study #2	80	64
3. Performance	80	64

Applicants are required to score a minimum of 80% for each item to receive designation.

11. Notice of Application Approval
Once the APRC Review Board confirms the candidate has met the eligibility requirements, instructions for completing the interview will be sent to the candidate via the email address provided on the application within fifteen (15) business days of receipt of the completed application packet.

If the applicant does not successfully meet the written requirements, the applicant will not progress to the phone interview. Applicant will be notified with recommendations on improving the written requirements for certification. The deadline for reapplication will be included in the letter.

The applicant will be asked to re-submit with corrections/additions and pay an additional fee of \$75.00.

12. Fees must accompany application.
Please make checks payable to CaPRA. All fees must be paid before an application will be reviewed by the committee. Application Fee: \$200.00.
13. Completed applications, along with all supporting documentation and the appropriate application and exam fees should be mailed to: or submit by electronic...
APRC Review Board
CaPRA
136 Santa Rosa Avenue
San Francisco, CA 94112

D. APPLICATION REQUIREMENTS Part 2

1. Phone Interview
As part of the certification process, the applicant is required to participate in an interview conducted by three (3) members of the Certification Committee whose credentials will be made available upon request . This will take place via conference call. Upon approval of your application packet, you will be notified within ten (30) business days via email and requested to participate in the phone interview. Once the interview date and time have been scheduled, you will receive a confirmation email outlining the details for accessing the call.

The committee will ask several questions regarding your role as a patient advocate, citing your case study responses and process improvement project. You may anticipate the interview lasting up to two (2) hours.

Total points possible for Phone Interview are 60 points. Minimum required points is 48 points.

2. Notification of Final results
Candidates will receive notice of final results and APRC status via email within thirty (30) business days of completing the interview.

Candidates receiving a score of 48 points on the phone interview or higher on the phone interview will be awarded the APRC designation. The new designee will receive a certificate, sent to the address provided on the application, and will be recognized in the CaPRA quarterly newsletter and on the CaPRA website.

Candidates who score 47 points or below on the phone interview will not be awarded the APRC designation. A letter will be mailed to the applicant with recommendations on improving the interview portion of the certification.

The applicant will be asked to re-interview and pay an additional fee of \$75.00
The deadline for the second interview will be included in the letter.

K. RENEWAL

Renewal is required every five (5) years. Renewal is based on calendar year from date of certification. A renewing designee will be sent an email notification of upcoming lapse in certification along with a APRC Renewal Form, similar to Form A5, that will ask the APRC renewing applicant to provide documentation of a minimum of 50 contact hours in the past five (5) years. The email notification will be sent one (1) year prior to renewal date. There will be no grace period. Renewal fee is \$150.00. A candidate missing renewal is required to reapply and complete the full certification process, including the full application fee.

Renewal period is every 5 years in order to give you ample time to complete the required 50 contact hours of continuing education.

L. PROGRAM NOTICES

Confidentiality

Applicant's contact information, payment information and application status is confidential.

CaPRA will publish the names of those awarded the APRC designation in the *CaPRA Connection* newsletter and on the CaPRA website.

Non-discrimination

CaPRA does not discriminate on the basis of race, color, religion, political convictions, national origin, sex, disability, sexual orientation, gender identification or age.

Changes to the APRC application process, requirements and fees

Eligibility requirements, fees and materials are subject to change without prior notice. All applicants are required to meet and abide by the fees and application requirements on the date their application is received by CaPRA. When submitting your application, please note the effective date on the application and manual, and check the CaPRA website for any updated documents.

References

A. STANDARDS OF PRACTICE

1. Grievance & Complaint Management

The Patient Relations Professional receives grievances, complaints and concerns from patients, their families and others; analyzes the grievance/complaint/concern with appropriate service departments for resolution and responds to the grievance/complaint according to CMS Grievance Guidelines* and appropriate regulatory agencies.

When a possible liability is introduced through customer complaints, the institutional risk management personnel are involved as appropriate.

Grievances/complaints/concerns are summarized and compiled for reports to organizational leadership toward future improvement of customer service and healthcare practices.

2. Mediation/Conflict Negotiation

The Patient Relations Professional intervenes in conflicting interactions and communications involving the interests of patients and others in the healthcare environment; promotes reconciliation, compromise, or settlement.

While resolving conflict, the Patient Relations Professional keeps the welfare of the patient as the priority.

3. Data Management

The Patient Relations Professional manages data related to patient opinions grievances, complaints, suggestions, compliments and concerns and other relevant statistical material; compiles data and information for potential process improvements. He/she manages written or electronic materials using organizationally specific or prescribed data security.

4. Interpersonal Communications

The Patient Relations Professional and is a skilled listener able to represent the perspectives of the involved parties and is able to express ideas effectively and appropriately in a manner that meets the needs and abilities of the individual patient/designee and for the organization

5. Crisis Intervention

The Patient Relations Professional works to manage crisis situations for the safety of the patient, family and care providers and the stabilization of the crisis/event. When indicated, the appropriate hospital staff is accessed.

6. Patient Rights

Ethics and Values

The Patient Relations Professional is aware of the philosophical issues and ethical principles related to healthcare practices; involved with ethical decision making or consultation on matters related to ethical concerns; aware of policies and guidelines i.e. for informed consent, capacity/competency, confidentiality, related to patient rights within the areas of patient care as well as research, investigations, or clinical trials.

The Patient Relations Professional is aware of the philosophical issues and ethical principles related to healthcare practices; involved with ethical decision making or consultation on matters related to ethical concerns; aware of policies and guidelines i.e. informed consent, capacity/competency, confidentiality related to patient rights within the areas of patient care as well as research, investigations, or clinical trials.

The Patient Relations Specialist has current knowledge of the process for instituting and maintaining an Advance Directive, for consulting with or convening and Ethics Committee Review, and the Patient's Bill of Rights and Responsibilities

Patient Relations Professional possess knowledge of or access as reference to federal or state laws pertaining to ethical provision of care as well as pertinent Joint Commission and regulatory agency standards.

7. Customer Service/Service Excellence

The Patient Relations Professional is familiar with theories and practices involved in developing integrated customer service initiatives, which may include any of the following:

Hiring Practices

Performance Appraisals

Reward and Recognition

Management Practices

Policies and procedures

Staff Education

8. Measuring Patient Satisfaction

The Patient Relations Professional has the knowledge and ability to use various measurement tools, integrate data and prepare meaningful reports, and insures the use of that information, demonstrating how patient satisfaction data impacts the way the organization delivers care.

9. Healthcare Management

Global Perspectives

The Patient Relations Professional has knowledge of and seeks active involvement in the changing healthcare environment. Contributing to local and national issues in the healthcare domain is an expectation of this role.

The Patient Relations Professional has knowledge to support positive change in the healthcare setting. Understanding of information in these areas is needed to support this professional role:

- Healthcare Account Maintenance Reimbursement
- Current and Pending Legislation
- Third Party Payers
- National and local Healthcare -Changes
- Managed Care

Organizational Management

On an organizational *level*, the Patient Relations Professional maximizes *every* opportunity to be involved in management and quality improvement efforts, bringing into focus the patient at all times in areas such as:

- Accreditation
- Budgeting
- Policies, Procedures and Institutional Practices
- Quality Improvement Programs

*Reference: CMS Interpretive Guidelines for Patient Grievances §482. 13.
Society for Healthcare Consumer Advocacy

B. CODE OF ETHICS

Patient Relations Professionals *have* a primary responsibility to the patient or their designee which includes accountability and unbiased and respectful communication in the efforts to advocate on the patient's behalf

Patient Relations Professionals support the ethical principle of justice and support the autonomy of the patient or surrogate decision maker, showing both personal and professional integrity within the scope of their professional responsibilities.

Patient Relations Professionals *have* an obligation to inform patients or their designee of their rights and responsibilities as they relate to patient services provided by healthcare professionals, the healthcare organization, or to communicate with regulatory agencies in an effort to identify or resolve conflict

Patient Relations Professionals promote and protect the confidentiality of patients within the scope of their responsibilities and in adherence to HIPAA, providing information when assessed as necessary to patients as to the limits of that confidentiality.

Patient Relations Professionals maintain the integrity of the profession by identifying, developing and utilizing knowledge to establish standards and advance professional practice.

Patient Relations Professionals are committed to a continuing education model in order to remain current with industry standards and regulatory changes maintaining professional expertise and demonstrating proficiency by the completion of educational units.

Patient Relations Professionals are obliged to avoid conflicts of interest in practice; to manage conflict with the safety of the patient in mind, to maintain professional honesty, to adhere to a personal work ethic where any benefit (economic or for self-interest) will be refused.

Patient Relations Professionals will collaborate impartially with other disciplines on behalf of the patient to reach resolution and identified goals

D. See the attached CaPRA Scope of Practice for more details.

Candidates Checklist

To assist you in submitting an eligible application, please complete this checklist and include it with your application. All components must be included or your packet will be returned as incomplete. Thank you.

- Current CaPRA member

- Form A2 and A3: Letters of Reference
- 1 form from your direct manager:
Name of Sender _____

- 1 form from a coworker:
Name of Sender _____
- Form A4 and AS: Application Form and Employment/Education History with Documentation of Course Work
- Certificate of completion for all course work
- Description of course work

- Personal statement of how you see the role of patient Representative (*No more than four pages or 1,500 words*)

- Case Study #1

- Case Study #2

- Performance Improvement Project/Program (*No more than six pages or 2,500 words*)

- Application Fee: \$200.00

SUBMIT COMPLETE PACKAGE TO:

APRC Review Board
C/O Irene Zbiczak
136 Santa Rosa Avenue
San Francisco, CA 94112

APRC SUBMISSION PACKET



Eligibility Requirements

To be eligible for the APRC, candidates must meet requirements in education, professional experience and areas of professional development; and provide proof of these achievements.

Application

APRC Candidates are currently working in Patient Relations Professional positions whose scope of practice encompasses the *Standards of Practice* (see page 11). A qualified applicant should be a CaPRA member in good standing and must have acquired the minimum required experience in one of the following combinations:

- five (5) years on the job experience and a bachelor's degree, or
- seven (7) years on the job experience and an associate degree, or
- ten(10) years on the job experience with a high school diploma or GED.

Applications are accepted twice a year – deadline is March 1 and September 1.

Re-submission

Applicants may re-submit for the APRC designation as stated in the letters of recommendations.

Each additional time a candidate re-submits the APRC application, the appropriate application fee is required.

Certification Process

The Certification process consists of submitting two (2) letters of reference; one from a direct manager and one from a coworker; a completed application and fee; a personal statement describing your vision of patient relations in today's environment; two (2) case studies; a written performance improvement project/program; and demonstrated knowledge of the scope of patient relations: Grievance and Complaint Management, Mediation/customer Service/Service Excellence, Measuring Patient Satisfaction, Health Care Management, Organizational Management, Joint Commission/Regulatory Issues, Patient Safety. All required materials must be submitted by the applicant to arrive to the CaPRA APRC Board at the same time. Upon passing the document review, a telephone interview will follow, requiring a score of 80% in each area of evaluation for award of the APRC designation.

Renewal

Renewal is required every five (5) years. Renewal is based on calendar year from date of certification. Renewing

APRC designee will receive notification and instruction for renewal via email provided at the time of application.

Documentation of continued education (*a minimum of 50 contact hours every five (5) years*) will be required at the time of renewal. A candidate APRC designee missing renewal is required to reapply and complete the full certification process including fees. A renewal fee of \$150.00 is required to maintain APRC status as well as active membership in CaPRA.

Confidentiality

Applicant's contact information, payment information and APRC status is confidential. CaPRA will publish those awarded the APRC designation in the CaPRA Connection newsletter.



PROFESSIONAL LETTER OF REFERENCE FROM DIRECT MANAGER

The applicant below is applying for Patient Relations Advanced Practice Certification administered by California Patient Relations Association, and has asked that you provide a letter of reference. We appreciate your time and effort in supplying the information requested. If you would like to disclose this letter to the applicant, please provide a copy to the applicant in addition to sending the original via email to zbiczai@sutterhealth.org . CaPRA will not provide a copy to the applicant.

Thank you for your assistance.

Name and title of Person Writing the Recommendation: <i>(please print)</i>
Address
Email
Phone

Name of Applicant: (please print) _____

1. How long has the applicant been under your direct supervision/management? _____
2. Of other patient representatives you have known, how does this applicant rank in terms of professional ability on a scale of 1-5 using the chart below? _____

5	90% or more of case load is addressed timely with excellence
4	80% or more of case load is addressed timely With efficiency
3	70% or more of case load is addressed timely with no error
2	60% or more of case load is addressed timely with no error
1	<60% of case load is addressed timely with no error

3. Briefly describe what you believe to be a professional strength of the applicant.
4. Briefly describe what you believe to be a professional opportunity for growth of the applicant.
5. Please comment upon this individual's interpersonal skills and ability to function effectively as part of a diverse community.
6. Please provide any additional comments that you deem relevant regarding the applicant.
7. Do you recommend the applicant for Patient Relations Advanced Practice Certification?
- Recommend highly
 - Recommend
 - Insufficient basis for making recommendation
 - Recommend with reservations
 - Do not recommend

Signature _____

Date _____

LETTER OF REFERENCE FROM COWORKER

The applicant below is applying for Patient Relations Advanced Practice Certification administered by California Patient Relations Association, and has asked that you provide a letter of reference. We appreciate your time and effort in supplying the information requested. If you would like to disclose this letter to the applicant, please provide a copy to the applicant in addition to sending the original via email to zbiczai@sutterhealth.org . CaPRA will not provide a copy to the applicant.

Thank you for your assistance.

Name and title of Person Writing the Recommendation: <i>(please print)</i> _____
Address _____ _____
Email _____
Phone _____

Name of Applicant: (please print) _____

1. How long have you known the applicant?

2. Briefly describe the professional relationship you have with the applicant, citing any projects or programs you have worked together on.

3. Briefly describe what you believe to be a professional strength of the applicant.

4. Briefly describe what you believe to be a professional opportunity for growth of .the applicant's.

5. Please comment on this individual's Interpersonal skills and ability to function effectively as part of a diverse community.

6. Please provide any additional comments that you deem relevant regarding the applicant.

Signature _____

Date _____

Name (with credentials) _____

Title _____

Organization Address _____

City, State Zip _____

Phone _____

Email _____

Please select one of the following:

- New APRC Applicant
- Re-submitting APRC Applicant
- Renewing APRC Applicant

Demographics: Gender: M F

Age: Under 25 25-36 36-50 over 50

You are employed: Full time Part-time

How many years experience do you have as a Patient Relations Professional? ____

Fees:

New Application \$200.00

Re-submission \$75.00

Renewal (before lapse) \$150.00

Total Payment \$ _____

Education: Check all that applies

- High School or GED/Diploma Program
- Associate Degree _____
- Bachelor Degree _____
- Master Degree _____
-
- Doctoral Degree _____
- Other certification(s) _____

About APRC

APRC status provides both internal and external rewards. APRC designees enjoy the pride of recognition for being among the elite in the critical and demanding field of Patient Relations Professionals. APRC is of substantive skills that provide value and distinction in an increasingly competitive marketplace.

Once your completed application packet has been assessed, CaPRA Certification Board will notify you within fifteen (15) business days with the status of your application and further instructions. If you have any questions, please contact CaPRA Data Manager at 650-696-5565.

Agreement of Applicant

I understand that I cannot use the APRC designation until have completed the certification requirements and have been notified in writing that it has been awarded to me.

In addition, I hereby consent and swear that the information contained in this application is correct and complete to the best of my knowledge.

Applicant Signature _____

Date _____

Eligibility requirements, fees and materials are subject to change without prior notice.

EDUCATION

Certificate/Diploma/Degree	Major	School	Year Earned	Documentation Attached
Sample: Bachelors of Science	Nursing	San Francisco State University	1985	Transcript/degree

Continue on another sheet if necessary

EMPLOYMENT HISTORY

Employer and Address	Position Title	Main Position Duties - reflect in % (should total 100%)	Years Employed
Sample: Hospital of the City 1111 City Street Los Angeles, CA 90210	Patient Relations Coordinator	Complaint/Grievance Management – 50% Patient satisfaction Survey Management – 30% Interpreter Services – 10% ADA coordinator – 10%	2000 - present

Continue on another sheet if necessary

Documentation of classes attended in the following areas of requirement:

Complaint Management Crisis Intervention Customer Service/ Service Excellence Data Management Healthcare Management	Interpersonal Communication Joint Commission/ CMS/Regulatory Measurement Patient Satisfaction Mediation/Conflict Negotiation	Organizational Management Patient Rights Other topics related to the scope of practice
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Be sure to attach a copy of the certificate of completion for all classes listed and a description of class content. NOTE: Course work must be within the last five (5) years.

Acceptable course work and documents: CE certificate from any continuing education courses, training, seminars and/or home study in the above areas. Grade document or transcript of college level courses in the above areas. Must "pass" or receive a grade of "C" or above. NOTE: One semester unit of academic credit is equal to 15 clock (*or contact*) hours. One quarter unit of academic credit is equal to 10 clock (*or contact*) hours. One CE is defined as one contact or clock hours. A total of 50 contact hours required.

REQUIREMENT	COURSE PROVIDED BY	DATE	HOW APPLIED TO WORK	CEU CREDITS
TOTAL UNITS				

PERSONAL STATEMENT

Prepare a typed personal statement describing your vision of the Patient Relations Professionals in today's environment. DO NOT include patient information or hospital proprietary information.

Be sure your personal statement does not exceed the maximum of 1,500 words.

Formatting requirements:

- Arial 12pt font
- single spaced
- left aligned
- 1" top and bottom margins
- 1.25" left and right margins

GRIEVANCE CASE STUDIES

CRITERIA FOR CASE STUDIES

Each case study will be scored based on the following eight essential functions of patient Representative, or *Standards of Practice*. Each function carries a maximum weight of 10 points for a total of 80 points available. An applicant must receive a total score of at least 64 points in this section to be eligible for APRC designation.

Criteria	Look for
1. Grievance and Complaint	1.1 Receives grievances/complaints/concerns from patient/families and others 1.2 Analyzes the grievance/complaint/concern with appropriate service departments for resolution 1.3 Responds to the grievance/complaint according to CMS Grievance Guidelines and appropriate regulatory agencies 1.4 Involves Risk Management when a possible liability is introduced 1.5 Issues are summarized and compiled for reports to management and for future improvement
2. Mediation/Conflict Negotiation	2.1 Intervenes in relationships of conflict 2.2 Involves interested parties (family, staff, physician, others) 2.3 Promotes reconciliation, compromise or settlement
3. Crisis Intervention	3.1 Manages crisis situations 3.2 Focuses on the well-being of the patient/family Stabilizes the crisis event
4. Interpersonal Communication	4.1 Communicates patient-focused issues with clarity and skill 4.2 Involves all interested parties 4.3 Develops a personal rapport with patients, families, and all healthcare providers
5. Patient Rights	5.1 Understands and applies the principles of Bioethics 5.2 Understands and communicates information related to Advance Directives 5.3 Attends or is aware of the proceedings of the Ethics Committee 5.4 Understands and communicates information related to Patient Bill of Rights 5.5 Aware of relevant legal issues relative to medical ethics 5.6 Understands and communicates information related to federal and state laws and other regulatory agency standards
6. Data Management	6.1 Collects patient grievances/complaints/concerns 6.2 Compiles information for retrieval and decision making 6.3 Handles written material using organizations security procedure/policy 6.4 Manages data collected moved forward for performance improvement

<p>7. Customer Service/ Service Excellence</p>	<p>7.1 Develops customer service initiatives 7.2 Develops Staff Education 7.3 Understands and utilizes information related to Hiring Practices 7.4 Understands/ Manages Performance Appraisals 7.5 Understands and communicates information related to Management Practices 7.6 Understands and communicates information related to Policies and Procedures 7.7 Understands and communicates information related to Reward and Recognitions</p>
<p>8. Patient Satisfaction</p>	<p>8.1 Uses valid measurement tools 8.2 Integrates data 8.3 Prepares reports 8.4 Demonstrates how patient satisfaction impacts how the organization delivers care</p>

CASE STUDY #1

You are working as a patient advocate in your facility. You receive a request from the surgical unit of the hospital asking you to see a patient who has many complaints and wants to "talk to someone who can do something about the terrible way she is being treated." You agree to meet with the patient as quickly as possible. You first speak with the nurse caring for the patient and then visit the patient. You learn the following:

Susan Jones, a 32 year old woman who is one day post-op, is uncomfortable and very angry. The nurse tells you that Susan had not seen a physician for many years and went to an urgent care facility due to pain on her right side which was preventing her from working a physically demanding job. The physician at the urgent care center checked her vital signs and performed basic lab work which came back as normal. She was afebrile. He explained that he didn't think it was appendicitis, and asked if she had injured herself while working, which she denied. As part of his assessment the physician wanted to run a pregnancy test, and do a pelvic exam but Susan refused, saying "I couldn't be pregnant and I don't have any problems with that" The physician instructed the patient to seek care if her symptoms increased or caused her concern recommending that she follow-up with her primary care physician as needed. Ms. Jones chose not to follow up, but continued to work, taking higher doses of OTC pain medications, to mask her symptoms. While at work, her pain suddenly increased causing her to "faint". 911 was called and she was transported to your emergency department.

After initial examination in the ED, Susan was rushed to emergency surgery, which revealed a ruptured ectopic pregnancy. Surgery was successful, but the surgeons needed to remove part of her right fallopian tube. She had lost a good deal of blood, but is now stable. Ms Jones was medicated for pain regularly and as ordered since surgery, but today she has many complaints.

When her surgeon visited, he told her how serious her condition was on admission to the hospital. He explained what had been done, and told her, based on her current condition, that he was concerned she might be developing an infection. He will be ordering blood cultures. She is angry because she continues to have pain. The surgeon shared his opinion that had she followed up with her physician sooner, her condition could have been diagnosed prior to rupture of the fallopian tube, requiring only a laparoscopic surgery rather than the more extensive abdominal surgery — needed to stop the bleeding and save her life. The patient, according to the report from the nurse, was yelling at the doctor, "You are just saying that to cover up for not doing a good job!" She repeatedly asked the staff why she might have an infection, why her pain was not going away, and how was she going to manage without working while recovering?

As you walk into Susan's room, you can see that she has been crying, but she immediately puts on a defensive attitude. You introduce yourself and explain your role in the hospital. She immediately lists a number of things about the hospital that she doesn't like and that she isn't "better like she should be." She threatens to call her "boyfriend to come take her home." You try to interject that you would like to help her, but she questions your statement saying, "You work for this place, too, right, so you are on their side."

1. Describe the potential underlying cause(s) of Susan's complaints, comments and anger.
2. Describe your actions or methods to establish communication and foster trust or support
3. Describe your responsibility to the hospital, the patient, the physician and staff.
4. Explain your options for resolution: identify additional barriers to resolution.

Directions: Document how you would handle case study #1, step by step. Be sure to reference any applicable standards of practice that apply.

CASE STUDY #2

Your assignment as a patient advocate in your facility includes responding to requests from the Emergency Department (ED). You receive a call from the ED to assist in a confusing case.

An 82 year old woman was brought in by ambulance to the ED on Monday afternoon and was diagnosed with a major ischemic CVA stroke. She is unresponsive. Her husband was found wandering outside by neighbors who called the police. The husband is apparently suffering from dementia and is an unreliable historian. His wife was found on the floor in the living room, where he thought "she was sleeping". It is unknown how long she had been there. EMS records provide the home address. The EMS technicians were very concerned not only about her condition, but that of her distraught and confused husband. EMS brought both to the ED. The husband has been medically evaluated, and aside from the mental confusion is physically fine. The patient is admitted.

1. Based on your scope of service, identify additional information or disciplines needed to establish your next steps.
2. Identify any limitations you may have here as this patient's advocate.

You had implemented your next steps and the situation is stabilized. The husband is being cared for temporarily by a social services agency. The next day you receive a call from a Joyce Phillips, who says she is searching for her parents. After some discussion, you believe you can verify that Ms. Phillips is the daughter of the elderly couple brought to the ER. She is able to tell you the following:

The couple, *Frank and Doris Wright*, have three children, two of whom live out of town. Joyce tells you that her mother was doing well to the best of her knowledge, but struggling to take care of her husband, who was diagnosed with Alzheimer's disease. Doris refused to have Frank "put in an institution". Joyce and her family live in the same state, but about 25 miles away. Joyce talked with her mother often, visiting her when she could. Joyce and her husband would visit and do some of the heavier tasks around the house. However, Doris was a proud woman and wanted to remain independent. Joyce was concerned that her mother was taking "too much on," but she seemed to be "in control" when Joyce visited. Joyce said that she does not think that her parents have a Living Will or an Advance Directive or Durable Power of Attorney. Joyce's sister Linda lives 2,000 miles away and is unable to help. Joyce's brother Bob travels extensively and cannot provide consistent care. He tries to visit his parents when his schedule allows.

Joyce was away for a long weekend with her husband to celebrate their wedding anniversary. She had spoken with her mother prior to leaving, and everything seemed fine. She called when they returned home, and became worried when the phone wasn't answered. She drove to the home to find it empty, called the police, and was told that her parents were brought to the hospital. She has come hurried to the hospital to meet you.

3. Describe your approach to the daughter. State your initial plan of care.
4. Prioritize the issues needing attention in your role as a patient advocate.

Direction: outline your initial steps prior to and after contact with the daughter. Include references to applicable standards of practice that apply.

PERFORMANCE IMPROVEMENT PROJECT/PROGRAM

Describe a performance improvement project/program instituted by you or one in which you participated. Briefly describe the model of process improvement used, including 1) a needs assessment, 2) planning process, 3) who was involved (*multi-disciplinary team*), 4) what position the team leader held, 5) your level of accountability in the project program, 6) timeline, 7) evaluation and 8) monitoring process(es).

Examples of a project are: a performance improvement project, a customer service training program, an education program for staff or consumer. *Be sure that this is a project that has been in place long enough so you can demonstrate the evaluation and/or ongoing monitoring process.*

Include all forms, documents, minutes, timeline dates, pre and post measured metrics, and any other relevant information. Explain your role/responsibility directly related to the success of the project/program. DO NOT include patient information (PHI) or hospital proprietary information.

Be sure your project/program report:

- Is of a quality publishable in a professional journal;
- Cites specific evidence of a professional literature search and associated sources;
- Contains citations/footnotes/references that are consistent with the Publication Manual of the American Psychological Association (APA), or other appropriate format sources (*e.g., New England Journal of Medicine: Requirement for Manuscripts Presented to Biomedical Journals*);
- Does not exceed the maximum of 2,500 words.

The project will be scored based on the above eight areas with each area carrying a maximum of 10 points for a total of 80 points possible. A minimum of 64 points is required to pass this section (*please see the score sheet*).

Scoring

Applicant: _____

Performance Improvement Project/Program Score Sheet

The Performance Improvement Project/Program will be scored using the following score sheet. A maximum of 10 points may be awarded for each of the required variables for a total of 80 points.

An applicant must receive a minimum 64 points to be eligible for APRC designation.

ITEM	SCORE	MAX SCORE	COMMENTS
Identified the Model of Improvement used		10	
Needs Assessment		10	
Planning Process		10	
Evaluation		10	
Monitoring		10	
Multi-team involvement		10	
Level of Applicant's Accountability		10	
Time line		10	
TOTAL SCORE		10	

Applicant: _____

PHONE INTERVIEW

As part of the certification process, the applicant is required to sit for an interview conducted by three (3) members of the Certification Committee. This will take place via conference call. Upon review of your packet, you will be notified of application approval status within ten (10) business days via email and requested to participate in the phone interview. Once the interview date/time have been scheduled, you will receive a confirmation email outlining the details for accessing the call.

The committee will ask several questions regarding your role as a patient representative, citing your case study responses and process improvement project. You may anticipate the interview lasting up to two (2) hours.

The phone interview will be scored based on six areas of concentration. Each area carries a weight of 10 points for a total of 60 points available. A minimum of 48 points is required to pass this section.

ITEM	SCORE	MAX SCORE	COMMENTS
Writes policies		10	
Involved w/ TJC/CMS		10	
Budgeting		10	
Discussion of Case Study #1		10	
Discussion of Case Study #2		10	
Discussion of Performance Project		10	
TOTAL SCORE			

AFFIDAVIT OF APRC APPLICATION

Applicant's Name: _____

Date: _____

The undersigned Applicant hereby certifies and swears that all information provided in this application is true and factual. Should the Society find through confirmation or any other means that any statements made by Applicant are not factual; such statements will jeopardize Applicant's ability to be awarded or to retain the APRC designation. The undersigned Applicant declares that the following information is true:

I am an Applicant for the APRC designation and as a part of that application process I certify that I have completed this application and the information contained herein is correct and complete to the best of my knowledge.

Signature of Applicant: _____

Applicant's Manager or Human Resource Administrator

I hereby certify that to the best of my knowledge the above statement concerning the application which the Applicant completed is true and correct and accurately reflects the professional and educational work completed by Applicant.

Name of Manager _____

Manager's Signature

Manager's Address _____

Phone _____

Date _____