

2015 PE LAN Lessons Learned

All Chat comments from PE LAN Learning Session 5 – September 2 and 3, 2015

What is the best advice you can give patients and staff that are starting a FPR program?

- Be open and Positive when talking with patients. Seek out more information so that they are able to answer questions asked
- DON'T BE AFRAID TO ASK QUESTIONS
- To work with a patient who has changed his life around with dialysis
- one to one explanation of role of FPR to patients thinking of accepting role
- focus on patient's strengths to engage them in participating with clinic
- listen to patients
- Our clinic took a team approach to approaching the patients from all levels from management down to show how we think they would be great
- one to one explanation of role of FPR to patients thinking of accepting role
- I would recommend seeking out pt's w/ positive attitudes. Those that see need for improvement, but are willing to help change. Both of our FPRs are good resources for new pt's because of their pos. attitude - they can be very motivational.
- Listen to patients from their perspective
- just clarifying roles as FPR are only what pt is able to do, to not overwhelm potential FPRs
- Identify willing candidate with good rapport.
- Our staff selected Pts we felt had relationships with their peers and would be, in our opinions, good in the role of FPR but they declined when asked.
- At our facility we have patients that have good rapport with the other patients on their shift. They have positive attitudes and are eager to try new things
- Seek as much pt involvement as possible.
- Select patients with a positive attitude and who enjoys speaking with other patients.
- We encourage pt participation by encouraging them to be a voice for the dialysis community.
- Be excited about it yourself when you talk to patients. Reach out in an encouraging way.
- Make sure all employees and patients have plenty of prep time to complete all required tasks
- Asking our FPR's for their input on what would best effect outcomes with patients at our facility. For example, we are creating an education program for our pt's that better explain clinic outcomes with treatment times, fluid gains, procedures, mechanics of the machine, etc.
- to our surprise the FPRs were more than willing to participate and in one case one of the FPRs was, to some degree, doing some coaching with pts on her own
- choose patients who have a lot of friends among other patients
- I utilized the workbook as a lobby time activity and all patients worked as a team
- Utilize staff to encourage patients who are involved the most in the clinic and in their care.
- Keep it simple; don't overwhelm patients with too many roles and responsibilities. We have 2 trained FPR's and may have one more soon for our 3rd shift.
- Don't pre-judge who will be interested in being FPR. Patients who have not previously shown interest in participating may change their mind.
- For staff be positive and encouraging to the patients so they are confident about being an FPR.
- Choose patients that are interested in being an advocate for the other patients, as well as any patient who encourages other patients help facility to improve their processes.
- Let them know it will not require a huge commitment of their time
- Conduct pt education during shift change and for the education to be perform in the lobby where everyone can participate

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- Pt. are just busy and do not want to commit the time to do it
- Our FPRs are patients who were friendly with other patients
- Biggest barrier to recruiting FPR's is the amount of training/calls. Feel that it is overwhelming if they cannot do the majority of work required while they are already on dialysis
- Greatest barrier is being a home only clinic where patients are not here but once or twice a month. Second is finding patients that have the time as many of our patients work and/or live a distance away from the unit.
- Demographically the patients have limited transportation and patients refuse to spend any additional time to give their input this is a major barrier for my clinic

How has Campaign 1 impacted patients at your facility?

- Some pts found the workbooks silly. Others enjoyed them and did on treatment. It was a mixed response.
- I did fluid education with all patients, but if pt completed workbook, they were entered in a raffle for a prize, which was a fluid survival kit. I feel it was beneficial - would like to see August QAI results for IDWGs to get better idea
- Those patients who were invested in change, it was very effective. At least one patient is still weighing each morning, logging his weights & seeing improvement with IDWGs. Most patients seemed to understand and answer questions at approp level.
- Have had some good discussions with clients.
- It worked well for some patients who like activity books. And timing was good with our fluid initiatives.
- My patients found some of the wording confusing
- Definitely going to continue using these fluid modules!!!
- Patients feel this are too lengthy/diffucult to understand. Some don't know how to read and comprehend
- Good tool with different approaches for patient education available in both english and spanish.
- Module re-educated ,reinforced to importance fluid mgmt , came from other authority part of Government , other than facility level
- Positive impact
- Made a mistake and pressed ineffective, however has been somewhat effective. Patients were able to complete with ease but as patient stated a minute ago repetition is the key
- one RD at CC clinic had a cart with all different size fluid containers w/ the amount (oz/ml) on them and showed pts as a visual aid. Very successful
- We provided our patients the workbook and explained the process and offered assistance in completing. A lot of our patients are illiterate and felt that was an obstacle in completing. A few opted to take it home to complete, and did not bring back. A few said it was long.
- helped get PCT's involved in more discussions with patients
- patients are more knowledgeable as observed by comments they make.
- Some patients found helpful. Most of our PD patients are compliant with fluid intake.
- some patients stated workbooks were beneficial
- This campaign 1 came at a great time and partnered with our Fluidwise initiative and helped reinforce the other education we had been giving previously.
- Staff has continued to utilize the information from the workbooks to educate patients.
- Patients were very receptive to the fluid management workbook, it gave the RD and MSW some new ways to communicate the effect of fluid on the patients' health.
- Our SWs bought melons weighing 0.5kg, 1kg, etc., and had patients hold them to feel how that much weight actually feels to carry.

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- Our IDWG dropped from 44% to 32 %, almost at goal of 30%.
- The visuals of Flow with fluid overload were helpful
- I hear patients talking to staff and each other about how much fluid to bring in and take off. It has opened up communication.
- got patients to talking about it
- It helped our pts better understand their dry weight and the reasons for limiting fluids.
- I think the most effective activity related to fluid mgmt was having a dietician intern come in and show pts what particular amounts of fluid looked like (different sized cups, etc)...pts were very involved and it was helpful to have something tangible. I think this resulted in better understanding.
- Patients started asking questions to nurses about their dry weights.
- Our fluid compliance has improved.
- Information was provided to each shift via television monitor on the clinic floor.
- The workbook opened up the dialogue in the clinic about fluid management. Patient were discussing among themselves and with staff.
- We have noticed a increase in dialogue about fluid management among the Patients with each other. It's as if their starting to encourage each other towards success
- the IDWG has improved. More discussion between patients and the whole team about IDWG
- Overall, the workbook helped to remind patients of the importance of controlling fluid. They were more open and discussing with LMSW and RD. Some of them; however, felt that it was juvenile.
- We went from 43% to 32% we talk with the pt's and mail them some inform home to encourage them.
- Patients are understanding the dangers of fluid overload. Our fluid excessive percentage has dropped.
- The tool helps them to understand the impact of fluid overload
- We had pts that were not typically interested/involved in their care, complete the fluid management packet and ask questions. It brought our clinic together as a team to come up with new ideas to improve pt quality outcomes.
- Patients have opened up their ideas about fluids and are finding ways to talk to each other about ways that work for them in controlling their fluids.
- SW and dietician collaborated together with pt in this shared goal and it appeared to be well received.
- Fluid management improved although we have had a difficult time engaging patients. We have had increased participation by MD.
- Overall the pts who do not have a hx on fluid overload did well while the ones with a hx of fluid overload were happy to learn more on how to reduce their fluid overload.
- tool helped some pts visualize impact of fluid overload
- We had pts that were not typically interested/involved in their care, complete the fluid management packet and ask questions. It brought our clinic together as a team to come up with new ideas to improve pt quality outcomes.
- I was just speaking with a patient today who was sharing with me about her s/s she did tell me that she had taken in less than 2 liters. and that she knew that fluid overload was not an issue. I was so proud that she was able to identify what her fluid goal should be.
- Very few pts. turned in their workbook. Our population is limited in their ability to complete workbook.

How has Campaign 2: Missed Treatments Workbook impacted the patients at your facility?

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- We had a positive response to the missed treatment workbook. Our Missed treatments have gone down and we raffled some lunch bags to our patients as appreciation for their adherence. Our team reviews weekly on our core team meeting.
- pts were more aware of the consequences of missing treatment
- Missed Treatment module was very effective in showing real examples and possible fatal outcomes for missing dialysis. Pt appeared to enjoy module
- From July to August --- missed treatments decreased by 3; AMAs decreased 9
- Some overall improvement. I like the fact that the workbook assist the patients with identifying achievable goals.
- Made our home patients realize missed treatments can affect them as well
- minimal because the information is a review of what is already discussed
- unsure. major impact on our missed tx numbers are 2 patients that are likely d/c'ing tx overall. mostly same pts
- it was somewhat effective , , clinic already had similar process before , tis Module encouraged the process .
- did not seem to impact those already missing multiple treatments per month
- We have a low missed treatment rate already. Campaign 2 supports and supplements education that we give our patients. We are a growing clinic and will continue to utilize the workbooks with our new patient admits.
- meant to put somewhat ineffective
- We had previously started a missed treatment project, which included assigning a missed treatment manager. For this reason, no improvement noted with this new project.
- Depending on learning style. many patients enjoyed the visual teaching...others just want to hear and not asked to do activities...Pt. can repeat some of information...people do not miss as much..
- We printed the workbook. We identified a couple of patients who miss 3 or more treatments. The workbook has too many pages to print for each patient. I wanted to make copies of certain activities in the module instead of printing a workbook for each patient. Most patients won't keep the workbook or participate. If we give it to them in smaller pieces it may get a better response.
- Most of the patients who were disinterested in the activities are the ones who have difficulty with making treatments. Some other incentive or perhaps family/friends are needed to recruit
- another opportunity to review one on one is helpful
- bag w/ small mister fan, biotene(mouthwash), gum, spritzer bottle, small fluid container, small spiral notbook to log fluid intake, hand sanitizer
- assembling treat bags with promotional items and food to use with workbook this month
- Both workbooks had lots of words- that meant someone had to read for patients with either vision impaired or lack of reading skills. Sometimes by the time we got to the activity itself - they had forgotten the lead up to the task.
- An observation; we are on the border and often have pts who take off to Mexico to visit family and missed treatments; also we have pt who experience bouts of diarrhea and miss one treatment per month. We have one pt who would miss one treatment per week and after an extended hospitalization is doing better and for the month of August missed one treatment.
- We are also on the border and experience the same issues as others.
- Our SME went from an average of 4 missed treatments in March to 0 missed treatments in the last 3 months. She became very involved in creating a newsletter for our clinic that was appreciated by our patients.
- When dealing with young pts, meet with them on a regular basis and educate them on their ESRD; keep informing them that their bodies can only take so much fluid abuse

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- Our missed treatment rate has unfortunately gone up. Some of our patients have substance abuse issues - lead to apathy. We have had others who "just don't feel well" and decline to reschedule. Another issue is that our clinic is very full and we don't have the luxury to reschedule as easily as we have done in the past.
- Campaign 2 - somewhat effective
- our missed treatment numbers improved slightly. They liked the puzzles. Unfortunately, the patients who needed it most did not complete it
- Our missed txts have improved with positive reinforcement and helped us reschedule and continue to recognize those who have showed up for all tx in a month. We have a prize cart that we let those patients choose from.
- An observation; the coloring of the kidney system was positive for everyone; it was a "fun" activity for the pts.
- Pts did report misconceptions of the effects of missed tx. If we dont educate, others will and it might not be the right answer
- We created a survey for our pt's to determine what reasons were most common for our pt population missing treatments. We are tailoring our education and conversations around those issues.
- Some of my patients actually enjoyed doing the activities! The workbooks definitely generated conversations. I can see them being an effective tool for our patients.
- Our facility felt it was a good additional education tool for our patients, it helped us to reduce missed treatments. Unfortunately a few of our patients felt the information was somewhat elementary and were offended by the product's simplicity.
- The patients enjoyed the activity workbook and felt it was helpful to them with understanding the risk of missing treatments.
- Gets the patients thinking and remembering what can happen when they miss and why it's so important.
- Missed treatments have decreased slightly in our clinic. Pt's recognizing more the symptoms of missing treatments and fluid gains.
- Our missed treatments have improved. We do have about 3 patients who continue to miss treatments.
- We offered prizes for completing each modules which promoted the patients to complete these modules. Patients are now more educated about the complications of missing treatments
- The rate of missed treatments at the clinic have shown a slight decrease and some of the more non-compliant pts have actually not missed as many treatments as before. A patient stated that he finally started to understand why we kept bringing up to him to not miss treatments.
- Having re-educate and remind patients of the importance of completing all scheduled txs, has helped in having less missed treatments
- I think it's just helped to make pts more aware of the impact missed tx has on their health. It's helpful to reinforce the information with different material.
- Having re-educated patients about importance of coming to treatment has helped provide a better quality of life for the patients and given patients more flexibility
- Our missed treatment rate has been an up an down process. We have 5 patients that chronically miss. We continually council them and educate them. The workbook ideas have reinforced what we have educated the patients about.
- We give Perfect Attendance certificates and calendars for Missed Treatments showing pts how many hours of dialysis they have missed during the month.
- The workbook is really helping patients be reeducated on missed treatments.
- Our SWs/RDs put all pt. names who come for each treatment for the month in a drawing and the winner(s) get a bag of goodies. Our patients LOVE IT!

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- Campaign 2 We loved the campaign. It went thru a trial run with the FPR Advisory Council meeting. It was introduced by SW and supported by all teammates with review and follow up. Patients responded quickly. Workbook was assigned for patients with a 1 week turnaround. Patients finished their workbooks by their second treatment. Most all patients seemed to have key takeaways. Risk for death and hospitalization noted. What was interesting is that patients said they felt engaged and felt the team cared enough to sit chairside with the patients for review. We have a very low missed treatment rate; one missed treatment that fits PE-LAN criteria of 1 during August. Even though we have a history of low missed treatment rate patients felt information provided was useful and that they learned something new.
- We started a campaign about a yr. ago to try to reduce our missed treatments. That endeavor has been highly effective. This present campaign has reinforced the positive effects of not missing or shortening their treatment time.
- Webinar did help. Effective and the chat feedback allowed me to read and gain knowledge and ideas from other facilities.
- Our missed tx has actually improved greatly over the past few months. We were at 70+, now we are at 25+. We are happy with the improvement and we feel that there's a general shift in the view towards missing tx w the pts.
- We neither agree nor disagree with the question regarding PE LAN contributing to increased patient engagement. The activities/workbooks in this project is information that we already cover with our patients on a regular basis.
- Small prizes do make a difference.
- I like having extra education tools to use with our patients. Variety is most helpful.
- The need of awareness.

PE LAN Evaluation

1. What did you learn?

- Patients: The awareness of how missed treatments can affect you.
- Patient: This is my first webinar. I'm a new FPR, new to my center, and new to dialysis. Patients are totally overwhelmed with information when they start and quickly forget the basics. Repetition is important - very important.
- Patient: greater understanding and manner in which fluid intake and treatment compliance will benefit all dialysis patients
- learned how to message to patients the workbook idea
- We came up with new ideas for pt engagement.
- Should have spent more one-on-one time in some cases - kind of simple things could stump someone (like not having a crayon or color pen, just write the appropriate color word ie red or green). Pts tended to be more motivated to work on at least part of it when a small giveaway was offered for completing any portion of it...,
- this has been helpful to find new ways to engage pts. I've learned that many pts really do want to be involved, given the opportunity.
- I learned how much FPR are a good idea for clinics but involvement is challenging with all the other things that are required of the MSW.
- Learned more symptoms of fluid management and missing treatments. Patients became more involved and opened up to LMSW and RD during treatments.

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- We found other patients like having another patient to go to. They are more comfortable sometimes talking to a peer about concerns or issues.
- I learned from Campaign 1. I did not know pasta had fluid in it, and most of my patients did not either.
- learned alternative approaches to patients and their learning style
- Patients value extra 1:1 time with reviewing education materials.
- New and creative ways to discuss and reward pts who are working on fluid management and perfect attendance.
- Learned better ways to educate patients.
- The greatest impact on PE LAN is getting patients to realize they are ultimately in control of their dialysis treatment.
- it's through communication that we learn from each other; the same holds true for the pts
- New ways to address things- liked having new handouts
- learned how to improve fluid management/missed treatments and help patients reach their goal;
- The programs helped me improve my organizational skills. My workload, not unlike most, is heavy and it was quite a challenge to include one more task. The greatest challenge has been to see that some patients are not open to change or learn new ways of doing things. Poor appreciation return is sometimes very discouraging. I overcame my challenge by engaging in deep self analysis and at least, cognitively understanding that my job is to do my best and by that I already succeeded.
- pts. have a greater influence on each other over staff.
- Pasta has fluid
- This help us to educate or reinforce education to all the patients , not only targeted number of patients , lot of supporting material , rather than clinic creating , it provided through this project , all the staff member able to participate , repetition help patient understand importance
- Patient engagement is important.
- it is very difficult to get patients to participate with the workbooks, Too much information in too little time.

2. What was the greatest benefit to you?

- Patient: The greatest benefit to me was having the opportunity to share experiences with other patients. They were ready to share as well. It is unfortunate that I have limited time, but we look forward to recruiting more FPRs.
- Increased adherence to fluid management and treatment. greatest benefit is that patient's are doing better
- i like hearing the other ideas
- opening lines of communication
- information
- We feel the workbooks were easy to follow, which covers the wide range of our patient demographics. The FPR's were an asset as they help reinforced the goals and objectives we were trying to discussed.
- have noted where some patients are still bringing in their workbooks so still interested - cool!
- The greatest benefit is getting other ideas to work with pts.
- There was good feedback from patients who were vested in modules. It gave them something to do during dialysis. It was a great tool for patient education. It also gave FPRs a sense of responsibility in helping our patients understand fluid management and missed treatments
- The greatest benefit to me was seeing the increased communication between our staff and the patients. It had been such that things were "the same old thing" all the time. This gave us other ways to discuss topics and how to create fun things to use to involve patients and families.

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- Creating better relationships with the staff and being useful to other pts experience.
- It's been helpful to hear what activities and ways other clinics are addressing issues that have been regularly reviewed with pts even prior to this program.
- Greatest benefit was the open dialogue between staff and patients about the workbooks.
- The greatest benefit from the workbooks, by providing additional education on missed treatments.
- Patient: keeping track of my EDW so i know what makes me feels bad
- The project helped to open dialogue between patients and staff on these topics.
- Workbook was a great idea to us. For missed treatments it is a workbook we will use for all incoming patients as it was useful and user friendly.
- The project positively impacted our facility outcomes. We are already working on presenting other subjects in a similar manner.
- in general, it is just a good thing to have the pts interacting w each other and supporting each other. These topics are clear, and important.
- We like getting the new ideas.
- We have been aggressively working on missed treatments for past yr. and a half and therefore our missed treatments are very low. We tried to concentrate on our pts. that miss one or more treatments a month but that number was limited. We therefore gave workbook to as many pts. as we could. Those that completed workbook were very proud and pleased to have completed their workbook. This workbook helped reinforce what we have already been working on.
- My overall experience was positive. The material/resources was informative and helpful.
- Not so much learned, but motivated staff to get patients more involved in their own care.
- This was a benefit for me to provide information that I have already discussed before in a different and new way.

3. What was the greatest challenge?

- getting people to listen
- finding FPR, keep explaining to different set of patients
- Getting patients to complete the workbooks/participation
- The greatest challenge is the number pages in the workbook.
- The material covered is fundamental to successful treatments, but there are different levels of patient comprehension (too easy for some, too difficult for others). Most patients in our clinic find it a "chore" to complete written materials but on the other hand love the personal interaction.
- time constraints were unable to overcome
- time was the greatest challenge; made a day to commit to it
- Did not really overcome the challenge of not having staff (PCT's)willing to help
- Missed treatments continue to be our greatest challenge with our pt population.
- TIME is a great challenge with all of the tasks and responsibilities that social workers have.
- Greatest challenge has been getting FPR's
- The greatest challenge was the indifference from patients who were not interested in participating with the workbooks.
- Getting staff to help
- patients who were not wanting to participate
- Greatest challenge - still those pts that are not in a ready state of change this project didn't have much help for them but they still got the information. We still work with those pts .

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- Greatest challenge was completing workbooks within time frame for staff who are only at each clinic 1 day per week. Utilized other staff some to assist when they were willing.
- Greatest challenge was finding the extra time needed but we worked as a team to get this done.
- The greatest challenge was meeting the deadlines, we overcame this by working together as a team to get all patients educated and following up with the patients.
- The greatest challenge in my clinic is getting patients to participate. We overcame this with persistence and we also gave praise to the patients that participated.
- The greatest challenge is having material that is appropriate and engaging.
- Biggest challenge was getting patients to do the workbook. Once we started offering prizes our completion rate jumped to 50% on campaign 1. On campaign 2 we did not have work on getting patients involved.
- Greatest challenge - time to go through the entire work book. Also, some patients were offended because the material was juvenile. We targeted patients who needed the education to make the most of our time. Also, the workbooks overlap with initiatives that were already ongoing at the facility. So we have seen very little impact in fluid or missed treatments related to the workbooks, but I think that's because we were already educating our patients on these issues.
- Greatest challenge was with the Fluid Book. It was a little high level for patient usage. Our clinic spent more time explaining the modules as it could be confusing. Overcoming the challenge was to focus on only two brief aspects of fluid as some of the exercises were over the patient's head.
- Greatest challenge was sometimes educational level. We were able to better explain what the questions were asking.
- The greatest challenge was completing the workbooks. However the activities and project overlapped with other projects going on in the facility regarding Missed Treatments.
- Challenge of time and getting other staff to participate in the project.
- The challenge was to educate home patients that these issues can still be a challenge for them and educating them how to prevent these challenges in their case. Our challenge was to talk to patients about being FPR since these patients are only at the facility once or twice a month. Those pts who were interested don't have enough time to talk to other patients due to conflict in their work schedule.
- The greatest challenge was patient participation. Unfortunately, it has been difficult to get patient engagement up, as patients want to dialyze and "go home."
- Can be cumbersome to get patients involved and would like to include more staff persons so that the weight is not pushed on one or two persons to complete modules
- Short time frame and number of pts to reach.
- Get PCT's to help
- The greatest challenge was following up with workbooks that went home with patients. Some became disinterested, some lost, some forgot.

4. How did you overcome the challenge(s)?

- By providing small incentives for those who participated.
- greatest challenge is time and overcoming negativity of some patients which we overcame with steadfastness
- The greatest challenge was realizing that home patients were not going to fill these out at home and bring them back in. I started to ask them to complete them at the clinic during their appointment and discussing it at that time.
- We have done surveys, provided education, and come up with new programs to address missed treatments.
- The greatest challenge has been to find the time to coordinate projects within the clinic; an enthusiastic FPR has helped.

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- Open clinic remodel upsets balance of clinic, may have more success after this is complete.
- This year I have been trying to recruit more staff to help me so that I don't get burnt out as the only clinic social worker.
- Getting the teammates time to work with all the patients is an important piece.
- Education
- Once we got the whole staff involved, it made it so much easier.
- get all staff involved
-

5. How did you recognize/celebrate patients that completed the workbooks?

- We rewarded the patient with a renal friendly protein bar.
- we did drew after each project drawing name and prize distribution at chairside
- they were placed on bulletin board
- We provided a lot of staff encouragement to pts that completed workbooks!
- small prizes for completing the workbooks helped
- This is an area of opportunity for us; we really need to come up with a way to celebrate pts. We continue to have discussions on ways to do this.
- We celebrated by ringing a bell by the scale when pts meet their EDW. Or they would ring the bell if they met their IDWG goal. Then the team would cheer and congratulate the pts. IDWG >5% decreased from 51.6% to 36.4% in the past 3 months.
- We did pens and breath drops as prizes.
- We had a Lunch and Learn for our FPSs. 3 out of the 5 came and it was very positive.
- Monthly meeting with patients and doing games and giving prizes is really helpful and make treatment more fun they have something different to look forward too.
- we gave perfect attendance awards, raffles
- prizes
- We celebrated our patients by giving them words of encouragement, celebrating their successes, giving out nominal gifts and certificates.
- Praise means a lot to them.
- All recognition was verbal.
- Verbal recognition
- Pt's enjoyed getting the prizes for completing the workbook.
- had a party chairside
- those patients who completed the workbooks, we gave them sunglasses.
- We recognize pts with positive feed back
- We recognized patients with prizes for turning it in.
- Incentives - raffle prizes, etc. Patients for the most part enjoy activities/prizes here.
- patients were recognized with treat bags and there is going to be an auction this month for patients to buy things with monopoly money they received for good labs
- Verbal Thank you, did not come up with a way to celebrate. We will work on this.
- Provided praise and goody bags.
- We tried to follow up each day with staff and encourage.
- We are hoping to build incentives like prizes. We are going to use completed workbooks as "entries" and are hoping to get donations from local businesses for prizes.

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- SW presented workbooks in the lobby during shifts and shift change with sugar-free candy