

## Patients as Partners

It probably wouldn't surprise you to hear that a Johns Hopkins graduate has created a new IV pole with patient safety benefits. However, you might be startled to learn that this inventor isn't a graduate of Nursing, Medicine, Public Health or Engineering, but a freelance journalist.

In this spring's issue of *Johns Hopkins Magazine*, Cari Lynn Ugent ('97) explained how her long experience tethered to an unwieldy IV pole at a Midwestern hospital compelled her to design a new one. Her anti-tip pole, already in use at the University of Chicago's new children's hospital, has more space for infusion pumps, baskets to hold personal items, an ergonomic handlebar and room to keep an oxygen tank, among other features. We don't know if Hopkins Hospital will eventually buy her product, but it's promising enough to test it.

It's remarkable that, while we caregivers know that patients struggle every day with their IV poles—sometimes tipping them over, stumbling over them, getting them stuck—this advance didn't come from someone working in health care.

Ugent's story illustrates why we need to do a better job of getting patients involved in designing our products and processes. How do we do that? For starters, we can encourage patients to double-check their own care by monitoring what drugs they receive, ask-

ing questions when treatment regimens change, and even reminding us to wash our hands.

I also believe that when new committees are created, we should evaluate whether we need patient representation. So far, we have a short but successful track record with this. Two transplant survivors, Ernest Clayton and Caroline Millett, participated on a 26-member team that helped design the medication use and delivery process for the new children's hospital and critical care tower on the East Baltimore campus.

Confident and assured, Clayton and Millett suggested that we help patients get more information by giving them access to their own computer terminal and letting them see, just as nurses can, what medications have been ordered and given. Patients could also use Web sites to get information on the drugs they're taking. Those features are in our plans for the buildings. We've also followed their advice to design the new hospital rooms to minimize how often visitors and caregivers get in one another's way and to maintain a sense of privacy for patients and their visitors.

Patients, especially those who stay in hospitals for long periods, are motivated to solve safety problems. Whenever possible, we should harness their wisdom.

### **Karen Haller**

Vice President, Nursing and Patient Care Services,  
Johns Hopkins Hospital  
Associate Dean for Clinical Affairs,  
School of Nursing

