

Keeping a Patient and Family Advisory Council Vibrant

August 7, 2014







Webinar Agenda

- Welcome & Introductions Karin Kennedy
- Hospital Story Schneck Medical Center's experience running a patient and family advisory council for several years and how to keep it vibrant.
 - Shery Tiemeyer, RN, BS, CCM, director of patient/volunteer services Schneck Medical Center in Seymour
 - Suki Wright, MSM, CSSBB, director organizational excellence
- Patient and Family Engagement Resources Karin Kennedy
- Wrap-up/Questions Karin Kennedy

Patient & Family Advisory Councils



Schneck Medical Center, Seymour, Indiana

Shery Tiemeyer



- Organizational Leader: Customer Service & RN Case Manager
- Oversees VOC initiatives throughout the system

- Suki Wright
 - Quality Outcomes & Performance Improvement
 - Incorporating VOC for organizational alignment and effectiveness

Schneck Medical Center

- Main campus, 93 all-private suites
- State-of-the-art Cancer Center
- Three Family Care Centers
- Approximately 900 Employees
- Active Physicians (60),
 52% hospital employed
- 150 Volunteers



Objectives



Discuss why SMC formed a PFAC



Foundation for engagement



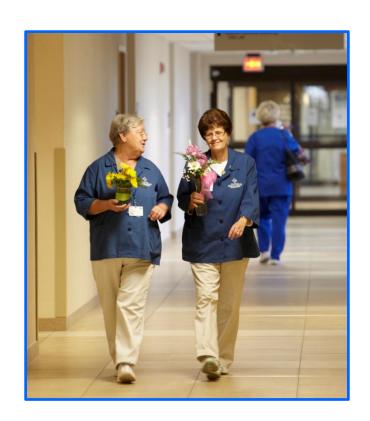
Share lessons learned

Why was PFAC formed?

- Identify and understand opinions of patients and families
- Form mechanism to incorporate viewpoints
- Capture anecdotal experiences and feedback
- Develop a partnership for problem solving

Member's perspective

- Advocate for my family, friends, employees
- Community involvement
- Gain better understanding of operations of the hospital



Partnership for Problem Solving

- Involved in dialogue that is more than just angry patients
 - Patient Safety
 - Health system learning
 - Improvement activities
 - Understand patient/family perspectives
 - Changes in healthcare and how those changes impact patients, their families, and the organization

Patient Family Advisory Council

- Community representation from all service markets
- Hospital representation include:
 - BOT member (also on Customer Service Team)
 - CEO
 - EVP CAOO
 - VP Financial Services
 - Hospitalist
 - Risk Manager
 - Director of Patient Services
 - Director of Marketing

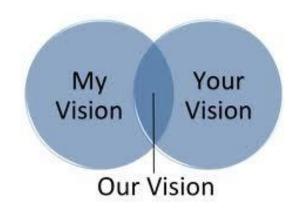
Logistics

- Quarterly
- 2 hour duration
- Dinner provided
- Rotating schedule from afternoon to evening meeting based on member's preferences
- Additional meetings are scheduled based on need and task

Foundation for Engagement

Common knowledge & shared vision

- Education & Communication
 - Ongoing educating national changes and impact at a local level
 - Transparency
 - Share good, bad, and ugly
 - Patient testimonials
 - Involvement
 - Share experiences
 - Problem Solve
 - Advocate



Shared Vision



Vision: To Be an Organization of Excellence Every Person, Every Time

Mission: Schneck Medical Center

To provide quality care to all we serve.

Mission: Patient Family Advisory Council

Fostering collaboration to improve patient experience and quality of care.

Ongoing Communication & Education

- Orientation
 - Director meets with each new member
 - Setting Expectations
 - Orientation packet
- Standing Agenda items at meetings
 - Customer Satisfaction Scores
 - VOC
 - Safety Report
 - What's new at Schneck
- Changes in healthcare
 - Guest Speakers

Orientation - Setting expectations

- Members
 - To be a good advisor and collaborator
 - Advocate for hospital
 - Attend most meetings
 - Get involved
 - To be good listeners

- Schneck Medical
 - Ensure PFAC members that their voices and influence are making positive changes
 - To respect perspectives
 - To be good listeners

Ongoing Communication & Education

Agenda

TOPIC

Introductions & Schneck experiences

- 1. New Members
- 2. Patient Portal Update
- 3. Construction Update
- 4. Safety report
- 5. New Employee Orientation
- 6. What's New at Schneck
- 7. Customer Service Training
- 8. Roundtable Discussion
- 9. Tour—Will plan as construction progresses



September meeting--plan review of Patient Handbook

Transparency

- Share customer satisfaction scores
- Outcome results
- Current performance improvement initiatives
- Challenges
- Successes
- Good, bad, and ugly



Involvement

- New employee orientation
 - Members are part of the training
- Simulations
 - Customer Service
 - Safety
 - Secret Shoppers
- Input on policies, patient education
 - Patient Rights & Responsibilities
 - CRT & Code policy
 - Discharge Instructions
 - Signage



Involvement

A key engagement factor for the council is letting them know how we act upon their input and use this information to improve the patient experience and quality of care



ED Satisfaction Scores



ED Satisfaction Benchmark 100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0% 91/3,01/3, 11/3, 21/3, 11/4, 51/4, 31/4, 11/4, 61/4 →Nurses → Doctors — Overall

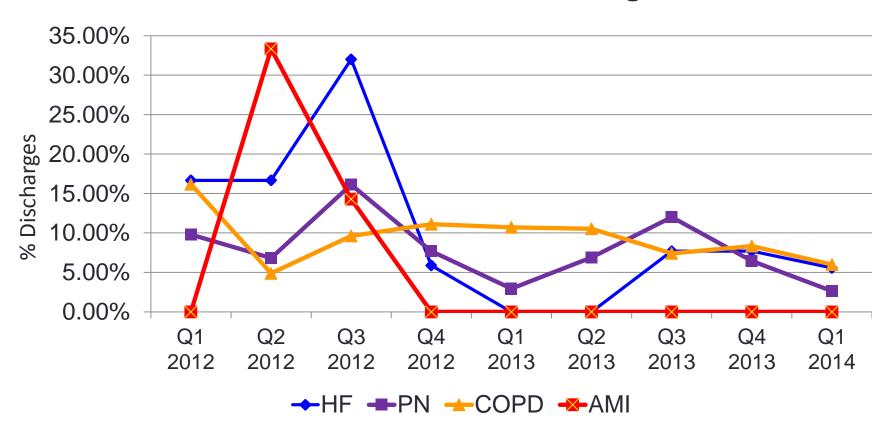
Involvement

Patient Family Advisory Council Survey

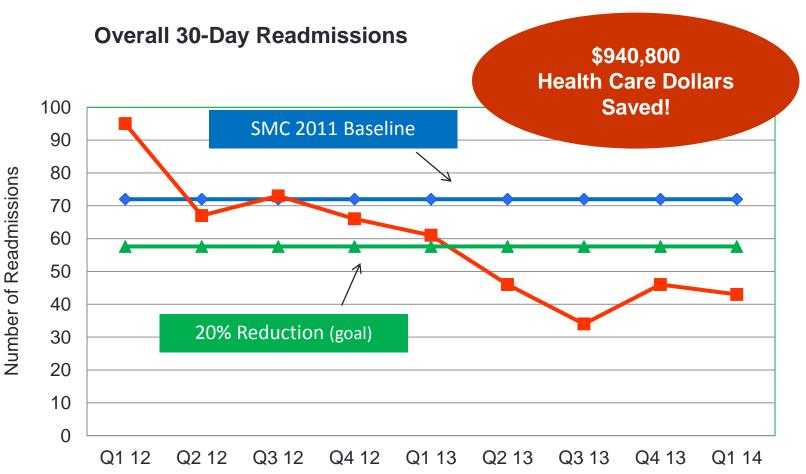
- Safety survey from PFAC revealed that their top three biggest concerns for safety were:
 - Hospital Acquired Infections
 - 2. Lab Errors
 - 3. Surgical Errors
- Risk Manager presented results for these three areas and explained our Just Culture.

2013 Breakthrough Readmission

Readmission: % of Discharges



2013 Breakthrough in Reducing Readmissions: From 100 per quarter to 40 per quarter



Cut "harm across the board" by 68%: 19 patients per quarter to under 8*

Total Harms per Quarter

ADE 12, CAUTI, CLABSI, Falls 38, OB 54 & 55, PU 58, SSI, VAP, VTE



^{*}Does not include readmissions

What's New PFAC

- Adding PFAC members to New Employee Orientation training
- Members from PFAC will be a part of customer service training
- Patient Testimonials



PFAC members participate on internal hospital committees

Challenges

- Ensuring a good mix of members
- Getting them to talk
- Talking too much
- Difficult conversations
- Meeting times
- Balancing anecdotal, perspectives, and realities
- Integrating new members
- Providing an open environment

Keys to Success

 Constant communication, learning, and evolution

Share and link results to the work of the council

Get them involved in the PI initiatives

Impact

 Departments throughout the hospital are seeking their input

 Other departments are looking into forming PFAC specific to their services

Positive feedback from the members of PFAC

Patient & Family Advisory Councils



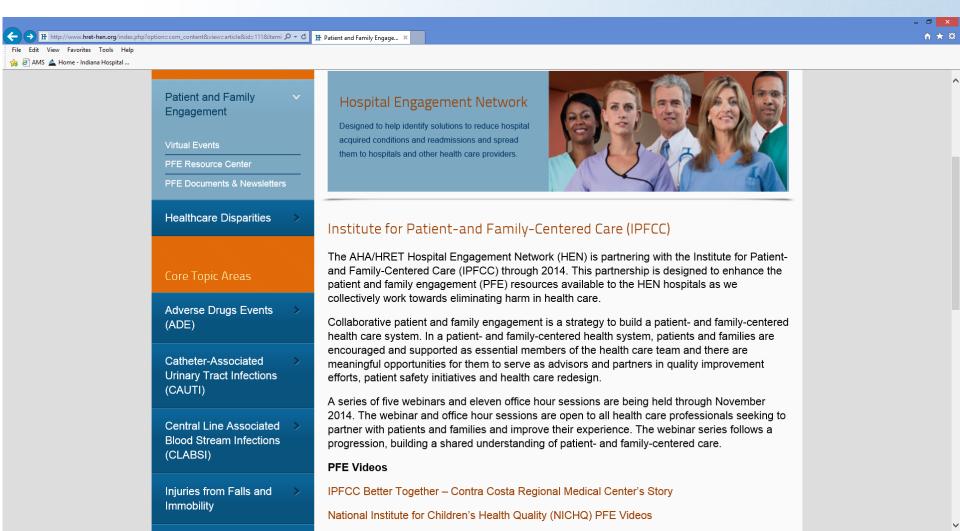
THANK YOU!







HRET Resources





HRET Resources

AHA/HRET Hospital Engagement Network (HEN) Patient and Family Engagement Newsletter



Issue 1 - August 4, 2014

Changing Visiting Policies and Practice



Isolating patients at their most vulnerable time from the people who know them best places them at risk for medical error, emotional harm, inconsistencies in care, difficult transitions and unnecessary costs. Yet in many hospitals and health systems, outdated visiting policies still separate patients from

their families and other loved ones during hospital stays. Policies and practices related to family presence and





Institute for Patient- and Family-Centered Care Resources



I.C.U.s is neither caring, compassionate, nor necessary." Read the entire blog post.

Dood the commentary by Anna Dath, CEO of Centra Costa Dagional Medical Center in

The Westin Bayshore

Vancouver, British Columbia.

Cambridge, MA

With leadership support from:



Better Together:

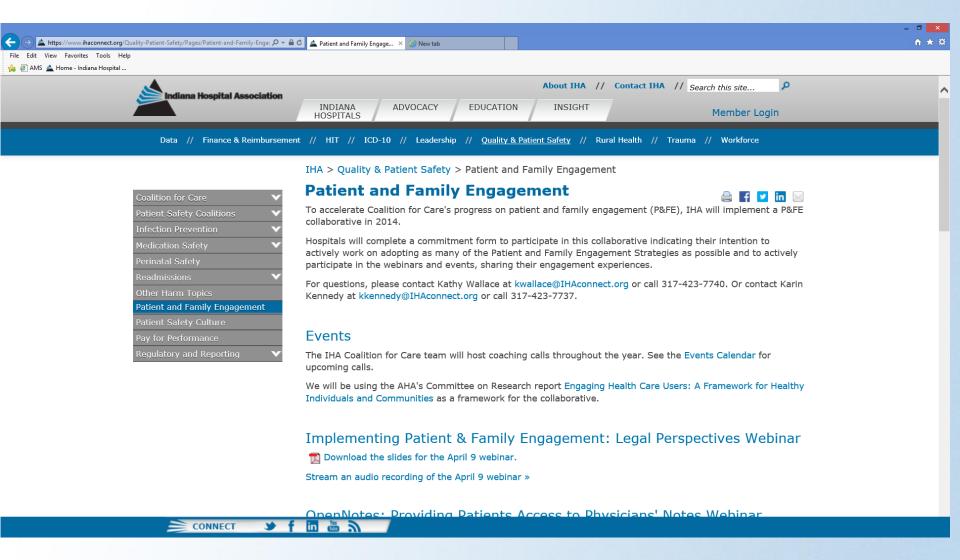
Partnering with Families

- IPFCC is committed to changing policies in 1,000 hospitals by 2017 and to equip hospital leaders with the rationale, strategies and tools needed to change visiting policies.
- As a pledging organization, your hospital will be listed on IPFCC's website and have the opportunity to become part of an online learning community to share strategies, challenges and successes.
- Pledging requires a commitment at a leadership level to take one concrete step to begin the change process, for example:
 - Review your organization's policy and website, with input from patients, families, clinicians, and other staff
 - Elicit input from patients and families about their experience of hospital "visiting" policies
 - Complete the Better Together Organizational Self-Assessment
 - Review other Better Together resources on IPFCC's website
 - Define another action step appropriate to your organization



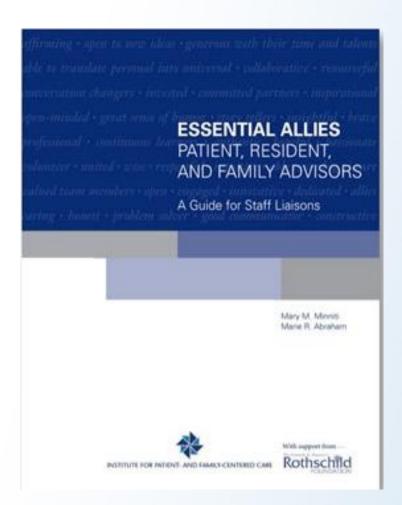


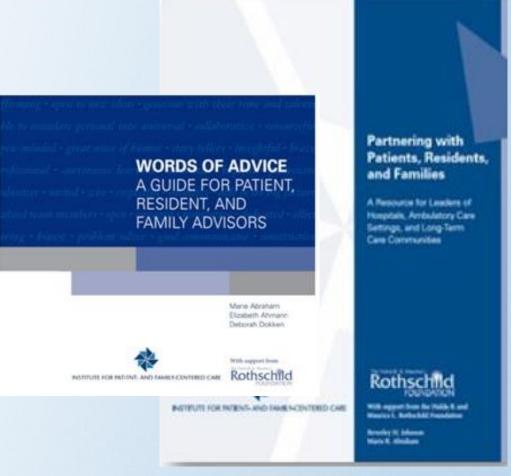
IHA Resources

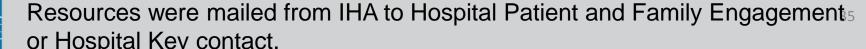




Indiana Hospital Association Institute for Patient- and Family-Centered Care Resources









Evaluation & Follow-up

- Webinar funded by CMS through the Partnership for Patients
- CMS reviews results and wants 80% of participants to evaluate educational sessions
- Please complete the simple three question evaluation by August 14, 2014:
 - https://www.surveymonkey.com/s/2014 08 07 PFEAdvisory Council
- Link to evaluation and webinar recording will be distributed to participants within one week



Thank you