

RANDOLPH HEALTH

PATIENT AND FAMILY ADVISORY COUNCIL

ANNUAL REPORT FY16

October 2015-September 2016

Randolph Health Patient and Family Advisory Council (PFAC) FY16 Annual Report

PFAC Overview: The Randolph Health Patient and Family Advisory Council (PFAC) established a forum for patients and families to collaborate as partners in concert with the health care team. Council members share and bring their unique perspectives of the healthcare experiences provided at Randolph Health. The result of this partnership has a valuable impact on the planning, delivery and evaluation of health care at Randolph Health along with the goal of promoting quality, safety and satisfaction. The success of this work is based on principles of patient-and-family-centered care, impacting the care from bedside to the boardroom.

PFAC History: Improving patient and family engagement was established as a Quality Committee priority by the Randolph Health Board of Directors during 2014. As our journey began, the hospital was fortunate to partner with the Premier QUEST 3.0 Program (Quality, Efficiency, Safety and Transparency) and the North Carolina Hospital Association Quality Center's national initiative Partnership for Patients (NoCVA) to develop, implement and evaluate strategies to increase patient and family engagement across our continuum of care. A Patient and Family Engagement Steering Committee was formed to learn best practices and to work on completing a rigorous action plan. As part of the action plan, the Board of Directors invited Beverly Johnson, a nationally recognized author and leader in Patient and Family Engagement, to speak about the leader's role in Patient and Family Engagement (PFE) at the Annual Board/Medical Executive Committee retreat that was held April 26, 2014. The action plan also included multiple educational opportunities for leaders and staff to learn more about how physicians, staff and volunteers could be more effective with engaging patients and families to own their care. Another key action plan item was to develop a Patient and Family Advisory Council (PFAC). After developing a strong infrastructure that included a PFAC Charter, a recruitment and orientation plan for Patient/Family Advisors and other advisory committee members, and setting routine meeting dates and times; the first PFAC meeting was held on March 26, 2015. The long term goals outlined in the PFAC Charter set the stage for the PFAC's ongoing work as the future began to unfold. Regular meetings of the PFAC continued during 2015 and 2016 with the engagement of a core group of dedicated Patient and Family Advisor (PFA) volunteers: Joan Arasta, Gary Blevins, Patty Sullivan, Paul Rossiter, Bob McGlohon, Lisa Hodgin, Stephanie Sandlin, and Kevin Garcia. In addition, Phyllis Jones was asked to serve as a PFA on the Board Quality Committee. The PFAC's early guidance was provided by three hospital executives: Charles B. West, Jr. MD, Chief Medical Officer, Tremonteo Crawford, RN, MSN, Vice President and Chief Nursing Officer and Debbie Dowling, Senior Director of Quality Management.

The PFAC Charter (a supplemental document) was developed as a foundation document that helps to guide and lead the PFAC's work.

The PFAC Charter Mission states: The Randolph Health PFAC is dedicated to the collaboration between the healthcare team and patient/family advisors to provide respectful, compassionate and safe healthcare and to promote health and wellness in our hospital and the communities we serve.

The PFAC Charter Vision states: By working side by side, patient/family advisors and healthcare workers can create a patient experience through education and support that empowers an individual to maximize their quality of life in spite of hospitalization, illness, injury and/or disability thereby improving outcomes.

PFAC Membership: The RH PFAC comprises 14 members in FY16. A total of 7 members are patients, former patients or family members; 3 are RH representatives including Director of Volunteer Services, Director of Service Excellence, and a Clinical Representative; 3 are senior leaders including RH Chief Medical Officer, RH Chief Nursing Officer and Senior Director Quality Management and 1 provides Administrative Support. Patients, family members and staff of RH are eligible to be PFAC members. Members should be committed to the PFAC mission as quoted above. Potential PFAC members complete an application form, undergo an interview and if appointed receive an orientation through Volunteer Services.

PFAC Recruitment: The RH PFAC members and RH leadership and clinical staff collaboratively recruit and recommend potential Council members. The Volunteer Services Director coordinates applications, interviews and if selected orientation. Randolph Health selects members of the PFAC based on the principles of creating a council that is representative of the communities it serves and bringing a broad range of diversity and experience. Members are chosen who are patients or a family member of patients served by Randolph Health.

Criteria for prospective PFAs include the ability to:

- share insights and experiences in productive ways
- listen well
- collaborate on solutions
- see beyond his/her own care experience
- have passion for improving the health care experience for all
- respect diversity and differing opinions
- have the desire to improve the quality and safety of health care

Recruitment is an ongoing and important educational tool that serves to further the culture of patient and family centered care across the RH system. Any individual interested in exploring

the steps to become an active Patient and Family Advisor is encouraged through various media to contact the Randolph Health Volunteer Office by calling: 336-629-8886 or email: sylvia.beamer@randolphhealth.org

PFAC Meetings: The RH PFAC meets 10 times per year in a pre-reserved conference area. During FY15 the group met seven times and during FY16 they met eight times. The 1 hour meetings were expanded to 1.5 hours toward the end of the year due to the important agenda items the council was addressing. As the charter states it is expected that regular members attend at least 75% of the meetings. Minutes and agenda are provided to the membership prior to each meeting. Meetings are presided over by the Chair and Co-Chair and facilitated by the Sr. Director of Quality Management.

Each meeting is initiated with a "Patient Story". A typical meeting includes two presentations followed by discussion. Topics align with RH operating goals and are generated by the facilitator and new business proposed by the membership. Examples of focus are new hospital initiatives, communication strategies, marketing materials, patient and family support protocols, policies and improvement projects.

The Impact of the "Patient Story": Stories told by patients, families, and caregivers can bring about profound changes to understanding in healthcare. It is through stories that we can best connect with others by identifying our similarities and it is through stories that we can acknowledge our own uniqueness. Both of these processes help to further healing within our storyteller selves as well as within our listeners. Each Patient and Family Advisory Council (PFAC) meeting starts with a patient story. These stories help the council members focus on the importance of their work. As work continues with patient and family engagement there is a vision to increase the patient story telling across the organization. The book "Privileged Presence-Personal Stories of Connections in Healthcare" written by Liz Crocker and Bev Johnson is given to each member of the PFAC to thank them for the work they are doing to improve Patient Family Engagement.

Patient and Family Involvement at Randolph Health: Input from Patient and Family Advisors on various committees helps to provide the voice of the patient when planning and or making decisions about policies or practices that are been developed or changed within the organization. During FY15 and FY16 there was involvement of patients and families in multiple areas of the organization including:

- Board of Directors Quality Committee (national best practice)
- Patient and Family Advisory Council (PFAC)

- Shared Governance Council
 - Patient Outcomes Council
 - Care Transitions Committee
 - Nurse Practice Council
- Stay Well (Pace program)
- Cancer Program ad hoc participation in Cancer Center Advisory Committee for Performance Improvement Opportunities
- Randolph Health Orthopedics "WOW Team"
- Branding Task Group

PFAC Awards and Recognition: During 2016 the Randolph Health's Patient and Family Engagement work received statewide recognition with two awards. The North Carolina Hospital Association in partnership with the NC Quality Center recognized Joan Arasta with the "Outstanding Patient and Family Advisor" award. In addition, the "Randolph Health Orthopedics WOW" team who worked to improve the orthopedic surgery patient's overall experience starting in the office setting was recognized with the "PFAC Impact Award".





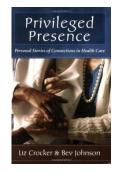
The RH PFAC has developed award criteria for an internal award the "Patient and Family Engagement Leadership Award". The plan is to present this award annually to an individual who has had a major impact with Patient and Family Engagement and will be based on the following criteria:

- The potential for improving patient safety, quality and/or patient experience
- Addresses an issue that impacts a significant number of patients and/or staff
- The degree to which the innovation may help decrease cost for patient, family or facility

- Development of Patient Family Engagement despite many other duties and priorities
- Creativity and innovation ("out of the box" thinking)
- Evidence that individual partners well with PFAC, leaders, staff and organization in decision making and improving the patient experience
- Extent to which individual devotes time and energy to PFE

PFAC Continuing Education: Members of the RH PFAC have participated with continuing

education programs that have partners such as the Premier Quality Center programs. These and statewide meetings as well as have been enlightening and have and strategies. A highlight of FY16 several hospital stakeholders by a President/CEO of the Institute for



been provided by multiple collaborative Sprints, Premier QUEST and the NC programs have been offered at national by computer based webinars. The topics helped the PFAC to engage in new ideas was the educational sessions provided to renowned national leader Bev Johnson, Patient and Family Centered Care.

PFAC Future and FY17 Goals: During FY17 the organization is collaborating with the CMS Partnership for Patients—Hospital Improvement and Innovation Network to continue to expand our work with Patient and Family Engagement. Carolinas Health System is leading the collaborative efforts and is providing Randolph Health with various tools and resources to help engage the patient and family in their healthcare.

For FY17 the PFAC set four primary goals and is making progress with completing them:

- Prepare a 2016 PFAC Annual Report and identify a list of individuals for the report distribution
- Develop and report dashboard data and distribute results at least quarterly
- Develop an education program for clinical staff and volunteers to increase knowledge of tools and techniques used for Patient and Family Engagement
- Develop a recruitment strategy to increase the number of PFAs to a total of 12

