



RANDOLPH HEALTH

PATIENT AND FAMILY ADVISORY COUNCIL

ANNUAL REPORT FY17

October 2016-September 2017

Randolph Health
Patient and Family Advisory Council (PFAC)
FY17 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 this 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 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 Hodgins, 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, Tremonte Crawford, RN, MSN, Vice President and Chief Nursing Officer and Debbie Dowling, Senior Director of Quality Management.

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 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: During FY17 RH PFAC included a total of 8 different patients, former patients or family members; 3 RH staff representatives including Director of Volunteer Services, Director of Service Excellence, and a Clinical Representative; 3 hospital leaders including RH Chief Medical Officer, RH Chief Nursing Officer and the Director Quality Management and Administrative Support staff. In addition to the membership, guests are invited to most every meeting to share information or present items for input. 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

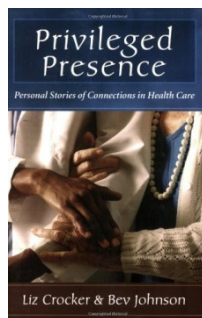
Recruitment is an ongoing and important educational tool that serves to further the culture of patient and family centered care across the RH system. Any individual interested in exploring the steps to become an active Patient and Family Advisor is encouraged through various media to contact the Randolph Health Volunteer Office by calling: 336-629-8886 or email: sylvia.beamer@randolphhealth.org

PFAC Meetings:

During FY17 the group met ten times for at least 1.5 hours each time. 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 Director of Quality Management. New members who joined the group in FY17 were Lilly Bossong, Patient and Family Advisor and Susan Sherrill, 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 that we can acknowledge our own help to further healing within our listeners. Each Patient and Family with a patient story. These stories importance of their work. As work engagement there is a vision to the organization. The book



our similarities and it is through stories uniqueness. Both of these processes storyteller selves as well as within our Advisory Council (PFAC) meeting starts help the council members focus on the continues with patient and family increase the patient story telling across "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 FY17 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)
- Telestroke and Teleneurology Implementation Team
- 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

The PFAC provided input for several new initiatives during the year such as the “Books for Babies” program that provides newborns and parents with reading readiness tools, the new Randolph Health branding, a new process for physician and nurse rounding at the patient’s bedside, antimicrobial stewardship public education, the new tele-stroke and tele-neurology programs and a review of mental health first aid education and community programs.

PFAC Awards and Recognition:

The RH PFAC 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 is 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

There were eight individuals from various departments across the organization nominated for the FY17 award:

- Chanda Casey, RN – Clinical Informatics
- Trey Clendenin, PT-Rehabilitation Services
- Tracie Cole- Lead House Supervisor-Nursing Support
- Jennifer Loflin, RN-Maternity Services Unit
- Charlotte Welborn, RN-Medical Pediatric Services
- Lois Hodgin, RN-Progressive Coronary Unit
- Robin Cockerham, Social Worker-Home Health
- Liz Smith, MS, CC-SLP,-Rehabilitation Services



Each of the individuals nominated showed exceptional commitment to engaging patients and families while providing the care and services needed to improve health. Chanda Casey a Registered Nurse who works in both Clinical Informatics and the Maternity Services Unit was the FY17 award winner. She was selected for her extraordinary service to patients and their families by engaging patients and their families in their care with pet therapy, lean process improvement, and educational efforts encompassing many areas of peri-natal care. Her nomination provided evidence that she goes above and beyond normal duties by tirelessly giving time, efforts and creative work to improve the patient and family experience. Special recognition was provided to all of the nominees at one of the monthly Department Director Meetings and with a special article in the employee newsletter, “The Buzz” and on the Randolph Health Website: <https://www.randolphhealth.org/patients-and-visitors/patient-family-advisory-council/awards-recognition/>.

PFAC Continuing Education: Members of the RH PFAC have participated with continuing education programs that have been provided by multiple collaborative partners by computer based webinars such as Premier, the North Carolina Quality Center and the Carolinas Health

System Hospital Innovation and Improvement Network. The topics have been enlightening and have helped the PFAC to engage in new ideas and strategies. **FY17 Goals:** During FY17 the organization collaborated with the CMS Partnership for Patients—Hospital Improvement and Innovation Network (HIIN) 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.

During FY17 the PFAC set four primary goals. and made progress with completing them:

- Prepare a 2016 PFAC Annual Report and identify a list of individuals for the report distribution- Completed
- Develop and report dashboard data and distribute results at least quarterly -Completed
- Develop an education program for clinical staff and volunteers to increase knowledge of tools and techniques used for Patient and Family Engagement-Action plan developed and continuing as an ongoing project for FY18
- Develop a recruitment strategy to increase the number of PFAs to a total of 12-Action plan developed and continuing as an ongoing project for FY18

In addition to the work that is ongoing from FY17, the committee decided that an important goal for FY18 is to work towards improving the discharge planning process. In addition to the FY18 goals the committee has made a list of important “Just Do It” projects to improve the committee and patient and family engagements during the coming year.

