



NANTUCKET
COTTAGE HOSPITAL
MASSACHUSETTS GENERAL HOSPITAL AFFILIATE

**Patient and Family Advisory Council
Established 2010**

**Annual Report
2016**

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*Nantucket Cottage Hospital is an affiliate of Mass General Hospital
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Patient and Family Advisory Council (PFAC) Report

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NCH Patient and Family Advisory Council Description

Purpose:

The Patient and Family Advisory Councils (Adult & Pediatric) (PFACs) work in partnership with the leadership and clinical staff at Nantucket Cottage Hospital to create an environment of patient- and family-centered care across the entire institution. Nantucket Cottage Hospital's PFACs provides a forum for sharing information among hospital staff, patients and their family members.

PFAC's purpose is to facilitate patient and family member participation in hospital care and decision-making. It contributes to policy and program development and ensures that patient- and family-centered care remains a primary focus in the organization. Emphasis is given to the core concepts of patient- and family-centered care: dignity and respect, information sharing, participation and active collaboration.

The PFACs also serve as a sounding board for initiatives the institution deems necessary to achieving and maintaining balance among the priorities of caregivers, patients and their family members. This includes, but is not limited to, patient and provider relationships, quality improvement initiatives, patient education on safety, quality matters and policies that address the handling of confidential patient information to the extent allowed and required by state and federal law.

The PFACs encourage efforts that assure the priorities and choices of patients and their families are identified in collaboration with involved caregivers to drive the delivery of a high quality health care experience. This is accomplished by participating in committee meetings, community forums, etc.

The four core principles of patient- and family-centered care are;

- -Dignity and respect: Providers consider individuals’ preferences, culture, capacities and abilities in determining care.
- Information sharing: Communication is open, timely, complete and understandable.
- Participation in care and decision-making: Patient and family presence allows for involvement in practice and learning.
- Collaboration in policy, program development and design: Consultation with patients and families occurs at all levels of operation and care delivery.

The NCH PFACs will facilitate patient and family participation in hospital care and decision-making, information sharing and policy in program development efforts.

PFAC Goals:

Provide effective and appropriate communication and collaboration among patients, families, caregivers, staff and the community;

- Promote patient and family advocacy and involvement to meet the needs of those served in the most competent, professional and compassionate way;
- To represent the culturally diverse Nantucket Community and meet the needs of its various ethnic groups; (Asian 1.2%, Black or African American 6.3%, White 88.3%, Latino 10% and Non Latino 4.1% and other 4.1%);
- Ensure commitment to the highest personal, organizational and ethical standards;
- Providing patient and family **centered** care in a responsible and accountable manner;

- Provide efficient service to the community with the highest level of **expertise** while striving for continuous improvement;

Benefits of patient- and family-centered care:

Family presence and safety:

- An engaged and informed family leads to better health care outcomes
- Family observations can improve clinical decision-making
- Families can be allies in preventing medical errors and promoting patient safety

Patient-centered care:

- Increases patient satisfaction
- Helps to supports the development of the Hospital’s medical services to meet the needs of the community
- Helps to identify process improvements contributing to make administrative processes that are clearer and more efficient
- Contributes to increased patient safety and comfort
- Assures better community outreach and greater consistency in quality of care

Structure:

Council membership is comprised of patients, family members, NCH staff, leadership, and Board of Trustees and Advisory Council members. The Council consists of interested individuals throughout the island community. Council members are recruited via word of

mouth, Hospital website, through recommendations of other Hospital personnel and from the Annual report.

Members are committed to building strong relationships with Hospital staff, working to understand the needs of the community and to implement programs and policies to address health care challenges within NCH. Members represent seasonal and winter residents in addition to the young, elderly and disabled, or are ethnic minority members of the Nantucket community. As required by Massachusetts regulation, at least half of the 28 adult PFAC members are patients, former patients or family members. Five NCH staff are also PFAC members. The Pediatric PFAC has 22 members, five of whom are NCH staff.

These two groups represent a diversified group of patients and families from the community. Members from both Councils participate on several of the Hospital's committees including: Emergency Preparedness, Medical Staff, Nursing Practice, Advisory Council, Quality and Safety. The Council reviews publicly-reported quality information (Perception of Care and Quality reports) and has worked with departments to collaborate in these areas to provide the patient perspective on identified issues.

PFAC has a collaborative process between staff and PFAC members to develop and distribute the agenda - review agenda items to be added for next meeting. Specific PFAC goals for 2016 were developed by PFAC members and staff through education, communication and interaction etc.

The PFACs Chair is the Director Clinical Projects as well as a patient and family member. The co- chair for the Adult PFAC is also a member of the Hospital Board of Trustees. The Hospital's Quality Committee is responsible for the oversight of the PFACs.

Confidentiality:

Council members learn of their responsibilities for adhering to the Hospitals' confidentiality requirements during their orientation. Council members review and execute the Partners HealthCare System Confidentiality Agreement. A review of the Patients' Bill Of Rights and Notice of Privacy Practices, which address patients' privacy rights and our confidentiality commitment is done.

Orientation:

An orientation program was developed specifically for PFAC members in order to increase their knowledge of the Hospital and its regulatory requirements. Orientation is usually done one on one with information on:

- Hospital policies and procedures;
- Information about the Hospital's Board of Trustees and its Advisory Council, including their structural relationship;
- Safety concerns related to patient, family and facility issues;
- The role and expectations of members;
- Reviews of: PFAC policy; a conflict of interest disclosure; confidentiality policies; corporate compliance information; complaint handling; Hospital mission, vision and values; the Patients' Bill of Rights; harassment prevention policies; Notice of Privacy Practices; (which addresses patients' privacy rights and our confidentiality commitment), safety and emergency preparedness including fire drills and helicopter safety;

- Forms requiring a signature include those covering confidentiality, compliance and Criminal Offender Record Information (CORI) inquiry and consent;
- A photo identification badge;

Council members receive an orientation and subsequent re-orientation led by the Chair or designee annually. Council members are offered a guided tour of the Hospital facilities.

Continuing education occurs through webinars, guest lectures and written information.

Additional training is available through guidebooks and conferences. Advisors are reimbursed for conferences that require travel.

Required policies and procedures:

The Councils meet monthly at least 10 times per year. Sub-committees and ad hoc task forces meet as deemed necessary. Minutes of the PFAC are kept for all meetings and shared with the Quality Committee and further reported to the Patient Care Assessment Committee (PCAC), which is the Board of Trustees' Quality Committee. Information from these committees is shared with the Board of Trustees. The minutes are archived for five years. Current Council member application forms on file confirm that at least 50 percent of Council members are current or former patients or family members, and are representative of the community served by the Hospital.

Council support:

Administrative support consists of, but is not limited to, providing meeting space, recording the minutes and producing other materials associated with meetings. Members are encouraged to attend conferences and participate in enterprise wide PFAC meetings at no cost to themselves.

The Council’s annual budget includes \$7,250 for education, travel, food, printing, postage and interpreter services. Grants are applied for special projects. Nantucket Cottage Hospital Web Site: <http://www.nantuckethospital.org/About/PFAC.htm>

PFAC impact and accomplishments for 2016:

- A total of 7 new members were added to the PFACs
- A Pediatric Health Fair was held in the Spring of 2016
- PFAC participation for the new hospital building was a major focus for all meetings
- PFAC members continued to provide advice and recommendations in Perception of Care initiatives specifically the metrics of “Likelihood to Recommend”
- NCH shared information and had input on the Patient experience/ satisfaction scores
- PFAC activities related to improving information for patients and families.
- Collaboration with the Nantucket Community School for the “welcome families “ project has started
- Fund raising collaboration with NCH Foundation occurred by creating the “The Little Builders” fund to incorporate the island children into raising money for the new hospital
- Developed a welcome format for new providers who have joined the NCH staff as part of the recruitment and retention activities
- Collaborated with the Physician practices to review information given to newly pregnant mothers
- Started the structure for an “Emergency Travel Fund” for those mothers who are in need of travel to Boston for deliveries.

- Created an emergency information magnet
- The Adult PFAC is planning a community Wellness Fair for October 2016
- Three Council members attended the Annual PFAC conference
- Provided input to the Board of Trustees as part of a strategic plan

Pediatric “Be Well Health Fair”

The Pediatric “Be Well Health Fair” was put on by the Pedi PFAC in March 2016.

Planning started in December with discussion of what should be at the fair as well as and where and when. A team of council members volunteered to work on this project. Two council members were appointed co-chairs and a core team was identified to address different sections. The goal was to work with the support of the Foundation however the PFAC would do the bulk of the work. A grant had been applied for to help support this event. The group felt that it be a community event and very collaborative in nature. Due to the diverse background of the advisors they were a wealth of resources and were able to invite a large varied group of community resources. There were over 53 community and business partners, 27 volunteers and 22 PFAC members that helped to make this event a reality.

The Great Harbor Yacht Club created a sense of warmth and the layout of the vendors/resources/professionals was very conducive to meeting and greeting.

Many attendees did not appear to want to sit and listen to speakers, but did congregate in small groups for 2-3: 1 conversation. The activities for the children created a party atmosphere (Nanpuppets, Music, working with dough and the Photo booth) were big hits. The free give a ways were a surprise (diapers, bibs and ones) and people were thrilled. Our “BE WELL” whale

logo pulled the whole event together and represented the hospital and the PFAC in a very professional manner.

Many parents spent more than 2 hours getting information. The “Buzz” from the community was that it was a huge success! The survey was sent out via email based on the email addresses that were collected for the door prizes. The event was reviewed by the committee the week it happened and suggestions will be fine tuned for next year.

The New Building

The building of a new hospital has been in the forefront of all of the meetings. Members have been included in reviewing plans and making recommendations in to patient flow, privacy, comfort and space to enhance the patient and family experience. There have been astute and keen observations that have helped to improve the process with schematic and design development. Examples of areas that have been a direct result of PFAC input have been but not limited to: the Patient and Family Center, the Tub room in the Maternity department and the Respite room.

Long-Term Goals:

- Providing the voice of the customer to Hospital leaders and staff through sharing of experiences (and those of others) during their interactions with the Hospital;
- Assisting in planning patient-care areas and new programs by providing feedback on projects or initiatives presented by staff;

- Create a forum and collaborate with the Nantucket Diversity and Leadership Group as well as other ethnic groups to develop an understanding of what the culture of health means to them;
- Participating with the design and planning of the new hospital, “a once in a generation responsibility”;
- Participating as full members, providing the patient-family perspective, during discussions and decision-making;
- Advising on policies and practices to support patient and family centered care;
- Helping create and edit patient and family education and communication materials, both written and visual;
- Providing reviews and feedback on publicly reported Perception of Care Survey data;
- Designing Council-specific initiatives to support the infrastructure;
- Speaking to a variety of audiences about patient- and family-centered care;
- Encouraging patients and families to be more involved, to speak up and to help strengthen communication among their fellow patients, family members, caregivers and staff.

Members are expected to participate in meetings and on various committees or projects during their term on the Council. Selection criteria for Council members are determined by identifying individuals who are:

- interested in serving as advisors
- comfortable in speaking in a group with candor
- able to use their personal experience constructively

- able to see beyond their own experience
- concerned about more than one issue or agenda
- able to listen and hear differing opinions
- representative of patients and families served by the hospital or hospital program

Each applicant is asked if s/he was either a recent patient, or a family member of a patient. Dates of their care experiences are also requested. An interview is conducted by the Chair/ co – chair or designee to determine each candidate’s eligibility for membership. Consideration includes how the candidate represents the diverse demographics of the entire community, both year-round and seasonal. Once approved, the Chair/ co-chair or designee notifies the applicant of the decision. Council members are expected to commit for a three-year term which is renewable.

Challenges:

Building a more diverse council that reflects the make up of the Nantucket Community. Finding a time that works for meetings is always a challenge as most of our members are still working. In order to get members to attend the Pedi PFAC meetings, many bring their children to the meetings. Communicating the role of PFAC though out the organization and community continues to be a challenge.

Patient and Family Advisors Council (PFAC)

APPLICATION FORM

Please print:

Name: _____
(Last) (First) (MI)

Address: _____
(On-island) (Street) (City) (State) (Zip)

Address: _____
(Off-island) (Street) (City) (State) (Zip)

Home Phone: (10 digits) _____ Cell Phone: _____
(On-island)

Home Phone: (10 digits) _____
(Off-island)

Work Phone: _____ Cell Phone: _____

Fax: (10 digits) _____

Email Address _____

Language(s) you speak: _____

Will you allow your contact information to be shared with other committee/Advisory Council members? Yes No

I am: A current patient A former patient A family member of a patient

My care provided at Nantucket Cottage Hospital was primarily: (check all that apply)

- Hospitalization (inpatient)
- Emergency Department care
- Clinic visit (outpatient)
- Other programs, departments or services
- Both inpatient and outpatient

The dates of my active care experience at Nantucket Cottage Hospital include:

(Check all that apply)

- 2006 to now
- 2004-2005
- 2002-2003 or before

Why would you like to serve as an advisor?

Issues of special interest to you:

If you have served as an advisor for other programs or organizations, please briefly describe this experience:

Have you done public speaking or teaching? If so, please describe:

Are you able to commit to attending at least 6 meetings/year?

Please specify times when you are able to attend meetings:

Daytime: _____ Evening: _____

I would be interested in helping with:

- Reviewing Patient and Family Perception of Care Tools
- Developing/Reviewing/Family Educational Materials
- Evaluating the Perception of Care for the Outpatient Care Experience
- Evaluating the Perception of Care for the Inpatient Care Experience
- Evaluating Patient Safety and the Prevention of Medical Errors
- Educating New Employees and other Staff about the Experience of Care and Effective Communication and Support
- Participating in Facility Design Planning
- Community outreach
- Improving the Coordination of Care and the Transition to Home and Community Care

Please return this form to:

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