

Sturdy Memorial Hospital
Patient and Family Advisory Council
FY 2016 Annual Report

This annual summary report outlines Sturdy Memorial Hospital's Patient and Family Advisory Council (PFAC) establishment and accomplishments from the preceding year, as specified in the 2009 105 CMR 130, 1800 and 1801 hospital licensure regulations.

The council membership remains constant in representation from patient representatives with a few changes to the hospital representation due to role transition and restructure. The hospital co-chair position is now held by the Director of Quality Improvement and Risk Management.

In our December 2015, the annual report was reviewed, and feedback was requested regarding format. Lucy Lukoff hospital co-chair stated she was likely going to return to using the compilation of minutes due to technical issues. Membership and the mission of the committee were reviewed. JoAnn Rapoza Director of Quality and Risk, suggested inviting different SMH staff to serve as members. It was felt as long as the Committee maintains the 50/50 breakdown of patients/family members & staff membership would be open to any interested candidate. Members who were present committed to continuing for another year. Members were invited to Schwartz rounds which was titled, "Humor in Medicine," (Holly Jolly).

Lucy Lukoff shared information about building projects currently in the planning stages.

1. New 20-bed unit is being built on the 2nd floor where there is currently shell space. All beds will be private. The beds will not be additional licensed beds, but will help with environment noise & infection control.

2. The Wellness Center is being planned for the 2nd floor, where out-patient physical therapy resides now. Services offered will include weight-management, cardiac & pulmonary rehab, & diabetes out-patient management. The Committee was invited to provide input/ideas they felt are needed in the community. Dana T. suggested that we review the Dana Farber's welcome center as it was designed by their PFAC.

Lucy L. discussed the Motivational Interviewing Program which deals with how to speak with patients about healthy living. JoAnn R. suggested having Keri D. from Physical Therapy to give a presentation to the Committee around her implementation of Motivational Interviewing.

Lucy L. discussed the HCAHPS results & handouts given out for review. Performance for 2015 was reviewed and areas identified for improvement were: Responsiveness of Hospital Staff & Communication about Medicines. Action plans will be instituting around improvement.

The Patient Services Dept. 2016 goals were reviewed & discussion ensued around the volume of quality measures & reporting that is required. The Committee discussed the MHA Patient Care

link data which is publically available & contains nursing sensitive measures as well as other quality indicators, including staffing.

The Committee discussed potential areas of interest for 2016, which include:

-Motivational Interviewing

-End of Life

-Building Projects

The committee met on March 3, 2016, Peg Flocco attended the meeting and provided education and discussion regarding the diabetes support group. Lucy Lukoff asked the group for their suggestions on effective communication regarding announcements and information about new programs. Kathie Hague, (marketing), informed the group about the numerous means of communications being used and available. A group member spoke about the STAR program, and what a great service to patients it provides. Kathi Hague spoke about the new cancer marketing campaign which will be rolled out in the April-October time frame.

Ken Kanady spoke about attending the Schwartz Center Rounds in December & gave very positive feedback about attending the event.

Lucy Lukoff, discussed patient satisfaction the Press Ganey, handouts & SMH's ranking. Help with toileting as soon as you want was not ranked high for SMH. This has now become a Quality and Service Excellence nursing goal & part of the call light answering initiative.

Rose Antonino outpatient nursing director, introduced herself to the Group & provided her background. She spoke about the crew building construction. Some of the services that will be provided are: Reiki therapy, acupuncture & medically supervised weight loss management. Brigham & Women's will be on-site 1 day a month to discuss surgery options for the morbidly obese. The OBERA balloon procedure is now being offered. Costs of non-covered services are being held low. Patients can utilize the exercise wellness without a referral in the hospital under nurse supervision/respiratory.

Andy Metters, director of pharmacy spoke about the hiring of an infectious disease pharmacist. He reported on dedicated services, and future plans that Sturdy has around antibiotic stewardship. The antibiotic resistance policy was explained and reviewed. The antibiogram chart was discussed which is used hospital wide. SMH data (c-difficile, vaccines & antibiotic use) are reported to numerous agencies, CDC, etc. Zika virus informational session was held to educate doctors, and to alert them to the signs and symptoms of the virus.

At our June 2, 2016 meeting, it was announced that co-chair Lucy Lukoff has resigned her position at Sturdy. Arrangements will be made with the Medical Staff Office to assign a new staff co-chair. Introductions were made to welcome new community member Jay Elias to the committee. Kerri Dickinson, Director of Rehab Services, presented key aspects of Motivational Interviewing (MI) theory and techniques. The goals of MI are to:

- Engage in a collaborative conversation style for strengthening a person's own motivation

and commitment to change.

- Meet patients in their stage of readiness in order to evoke positive life style changes that can be sustained over time that will improve health and quality of life.
- Improve the relationship between healthcare provider and patient in order to motivate positive behavior.

Several communication techniques were reviewed and discussed amongst the council members. Slides of the presentation were made available through a handout.

The Annual PFAC conference is being held on June 3rd. Two tickets have been purchased with Ken Kanady being one of the attendees, and Jay Elias second.

Our September 1, 2016, meeting was held with introductions of new staff members and co-chair. Marita Prater will assist in the transition of the oversight of this committee from Nursing to Medical Staff Office. Marita introduced Joe Barrett as Nursing Quality Coordinator, replacing Lucy Lukoff and Nellie Jacob as Director of Quality & Risk, replacing Jo Ann Rapoza.

Joe Barrett presented patient survey results for the nursing units. Key areas for improvement were noted: Response of staff (new rounding procedure in place,? technical issue with phones, additional staff added); communications regarding medications and after discharge care (post-d/c calls will be made for follow-up and a Hospitalist will be assigned daily if needed for consultation). Follow-up actions included, clarification of discharge calls, to eliminate duplication. Joe Barrett will obtain hospital comparison data, and report results post implementation of purposeful rounding by nursing staff.

Jay Elias attended the conference. Jay shared with the group his experience of the conference as being a meaningful experience. Discussions around how to tap into the needs of the community and performance of the council occurred. Engaging hospital administration was mentioned. End of Life care was a constant topic. Jay shared the benefits and difficulties for having these discussions around different forms; and their legal weight. Jay also announced that he will be presenting at the Risk Management Seminar held at Sturdy on 9/28/16. Annual review of PFAC mission and membership will be reviewed at December's (2016) meeting

Respectfully submitted,

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Risk Management and Medical Staff Office

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