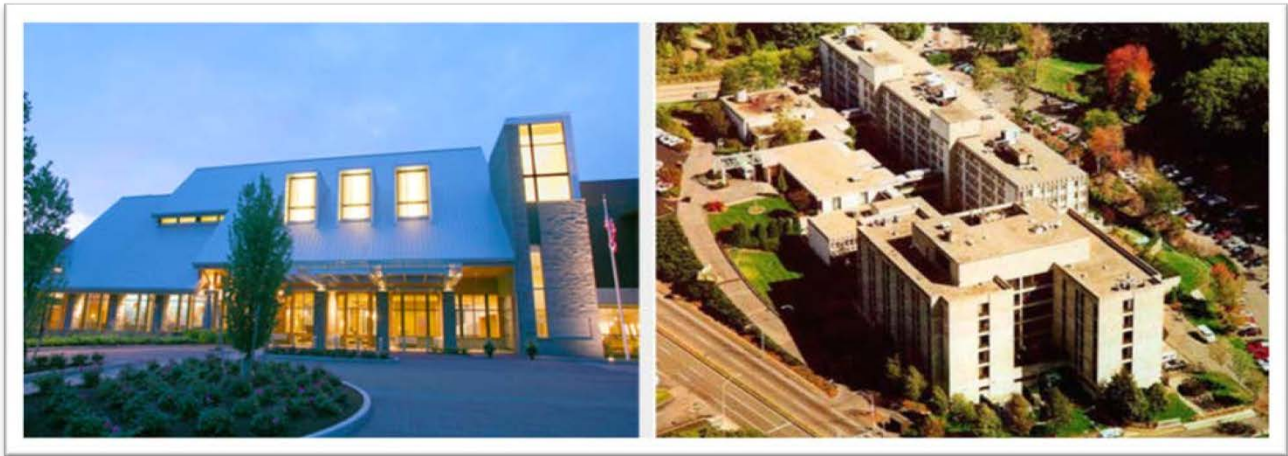




2018 Patient Family Advisory Council (PFAC) Annual Report



Hospital Name: Hebrew Rehabilitation Center

Date of Report: September 30, 2018

Year Covered by Report: October 1, 2017-September 30, 2018, or Fiscal Year (FY) 2018

PFAC Established: 2010

Staff PFAC Co-Chair Contacts: Tammy Retalic, Chief Nursing Officer & Vice President of Patient Care Services, Rabbi Sara Paasche-Orlow, Director of Spiritual Care

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PFAC Co-Chair: Carol Westheimer, GCM

Report is available by request at: <http://www.hebrewseniorlife.org/families-hrc-boston>

Summary

This report summarizes the goals, membership, meetings, actions, and impact of the Hebrew Rehabilitation Center (HRC) Family Advisory Council, and its work in collaboration with the HRC Patient Councils.

This year some members of HRC's PFAC offered the following reflections on their involvement:

"I like being on the Advisory Council because it is nice to participate in a group where we are listened to, we affect change, and the quality of patient care is improved. And that you know, the philosophy of the organization is forward thinking." CW

"Being on the Advisory Council has opened new windows into the complex system that HSL maintains. The board's interest is in not only providing state of the art patient care but also it's interesting being at the forefront of new technologies and new modes of thinking about aging. It has really stimulated my thinking about how our parents age and how we age and how we enter a new era of expanding life options in old age." JH

PFAC Goals:

- To augment communication between family members and staff.
- To ensure that the voices of family members are incorporated into the care decisions including policy and procedures at HRC.
- To provide a forum for information sharing about the changes and challenges associated with patient care.
- To gain insight and feedback to improve our partnership with families and to improve the patient and family experience.

PFAC Membership and Recruitment:

In FY18, PFAC comprised 10 highly engaged family members and six HRC staff members. Coordinated by a HRC Community Life Liaison, the PFAC is co-chaired by a family member, HRC's CNO & VP of Patient Care Services, and Director of Spiritual Care.

Additional staff members include the Executive Director of the HRC-NewBridge campus, Director of Nursing, Roslindale, and Associate Chief Nursing Officer, HRC-NewBridge.

Membership in HRC's PFAC is designed to reflect the populations we serve, which means working to have family members represent all floor communities throughout HRC.

New members are recruited through staff referrals, flyers placed on all floors, a digital board announcement, a post in the family newsletter, and a webpage with applicant information on the HSL public website.

New candidates are vetted through the completion of an application form and an in-person interview with one of the co-chairs.

PFAC members receive dinner at each meeting, and if requested can have travel reimbursed. They do not receive stipends.

PFAC Agendas and Meetings:

The PFAC meets for two hours 8-10 times per year. At each meeting the group suggests agenda items for future meetings. The co-chairs draft the agenda to include these suggestions, as well as to respond to ideas or concerns that are raised in the meetings. HRC and HSL Department Leader are often invited to present and provide discussion and insights.

PFAC Agenda Items and Impact:

- Review of Emergency Preparedness procedures. Input from PFAC resulted in writing an emergency preparedness letter to include in admission materials and suggestions for new protocols for family communication during emergencies.
- Review of Family and Patient Satisfaction survey in order to get feedback on ways to improve the patient care experience.
- Facility updates.
- Further editing and approval of PFAC bylaws.
- Discussion on hearing aids and glasses, and identifying areas of concern and some possible solutions. This discussion resulted in a nursing leadership team process improvement project and immediate efforts to create a standard process and protocol for cleaning of eye glasses, as well as new follow-up work to ensure regular audiology appointments for patients who need them.
- Creation of a HRC-NewBridge PFAC Memory Support Unit subcommittee to increase involvement by families in unit activities and events, and to help families better understand the disease progression. Efforts to meet the needs of this group continue to evolve.
- Reports from Patient Councils from both campuses.
- Review of progress to date on safe transport of patients to medical appointments. PFAC recommended that information on this process be communicated to family members.
- Review of care coordination with family members. PFAC suggestions focused on family communication before and after a care coordination meeting. PFAC also suggested a mandatory orientation session for new family members to help them learn more about HRC. PFAC members contributed feedback and recommendations and documents were finalized and implemented in March.

PFAC Agenda Items and Impact Continued:

- Presentation on the new HSL Center for Memory Health.
- Presentation and discussion about HRC work on reducing the use of antipsychotics in LTCH.
- Presentation and discussion about the Music and Memory Program and the Art on the Brain research project.
- Presentation on purposeful rounding, that is, how staff present to patients and having more intentionality in ensuring each interaction is positive for patient.
- Presentation by Quality Improvement, including new data on falls and pressure ulcers. PFAC members asked whether there was capacity to help track in the chart how much staff support and succeed in having patient's engage in activities correlating to their interests.

PFAC Challenges:

When HRC patients pass away, their family members will often resign from the PFAC. This can lead to difficulty maintaining the census of family members on PFAC. For example, this past year, three members resigned due to the death of their family member, and we recruited new members.

In the past the PFAC struggled to reflect the population of Russian-speaking seniors in our care, but we now have an appropriate number of Russian-speaking family members.