

Patient & Family Advisory Councils: Winning Strategies and Best Practices

Healthcare PX

Improving the Patient Experience

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Background



- Spent 2 weeks in the ICU with my sister in 2014
- Researched her unknown infection – talked to experts (former reporter)
- No one listened to me – very dismissive
- Passed away – tragic and traumatic
- Where's the patient voice?

My Patient & Family Advisory Council (PFAC) Experience

- Identified my hospital Kaiser Permanente PFAC and joined
- Elected to serve on Regional Patient and Family Advisory Council for Southern California, representing 4.2 million patients
- Selected as first co-chair of the Beryl Institute Global Patient and Family Advisory Board.



PFAC Research

- Conference call – CEO would not start a PFAC because no evidence
- 2014 Grant from the Beryl Institute
- Anecdotes – PFACs saved hospitals money, improved safety, and enhanced the patient experience
- Cited at conferences
- Pursuing a PhD – dissertation is on PFACs.

Agenda

- Background
- 3 Recent Study Results
- Support
- Recruitment
- Meetings and Engagement
- Content and Agenda Management
- Accomplishments and Impact
- Resources
- Questions?



PFAC Introduction

- Crossing the Quality Chasm published (2001) – close quality gap by IOM (now NAM)
- Healthcare goals to improve quality (STEEEP):
 - Safe
 - Timely
 - Effective
 - Efficient
 - Equitable
 - Patient-centered
- Focus on patient preferences.

PFAC History

Boston
Children's
Hospital

Massachusetts
mandated
PFACs

1982

2006

2010

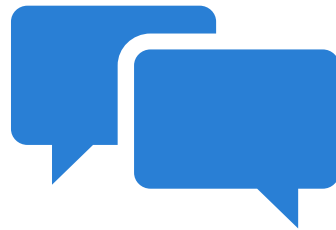
HCAHPS patient
satisfaction surveys
tied to Medicare
reimbursements



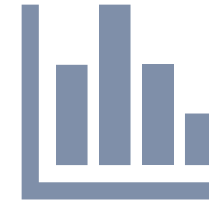
Three Studies – Mixed Methods



Literature Review
143 articles
Published



Qualitative – 20
hospitals
Under Review



Quantitative – 203
participants

Support

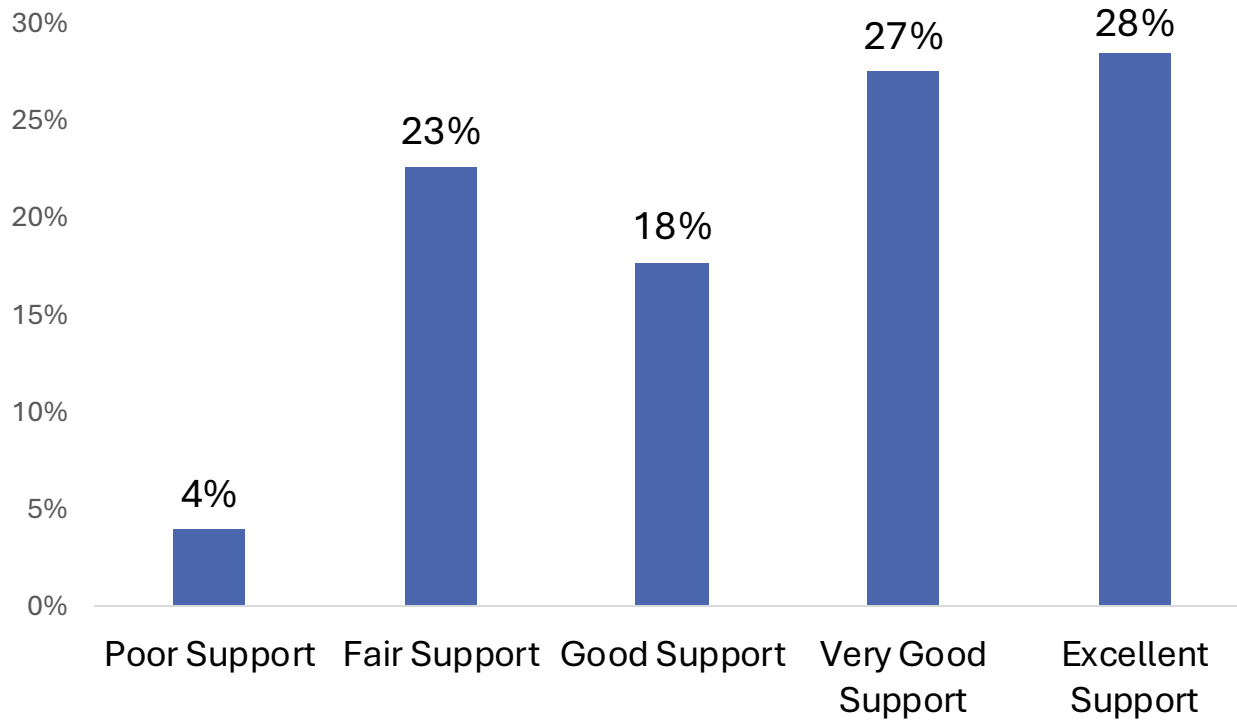
Garnering Support across the Organization Is Necessary



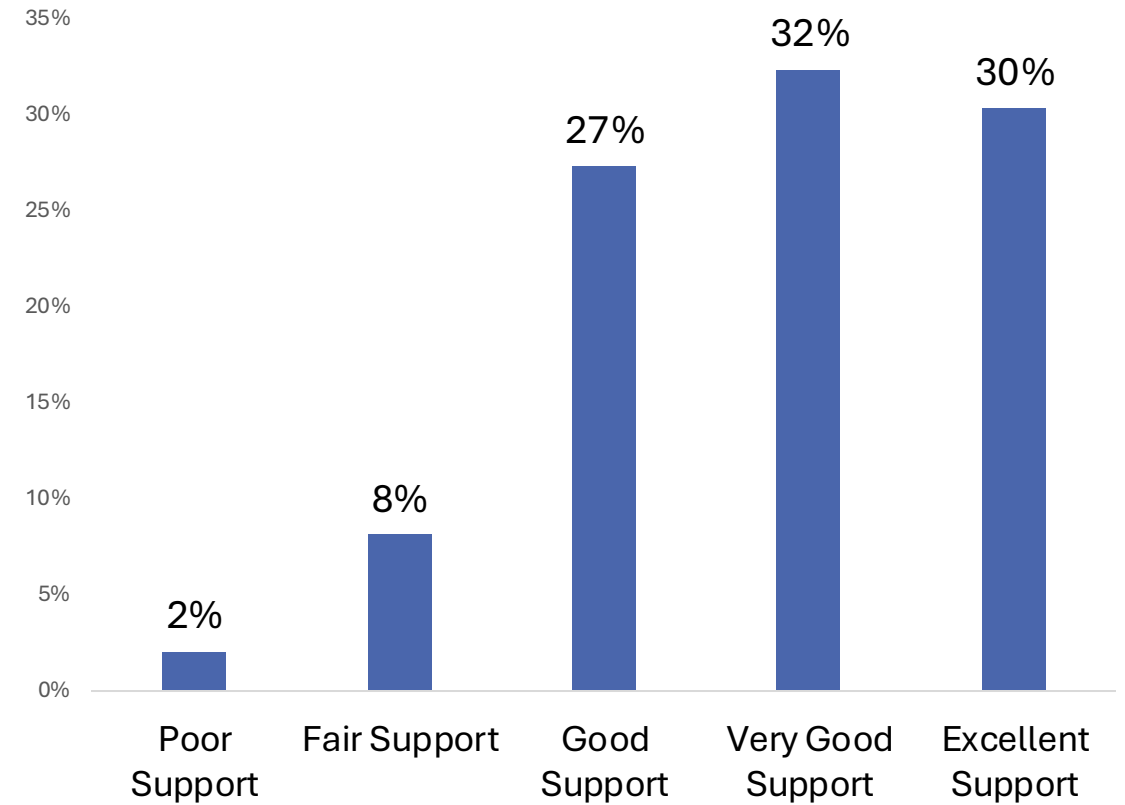
“Knowing that we have executive support within our hospital has been, I think, critical to our success.”

1. Executive sponsor – C-suite
2. Champions – high-level leaders
3. Administrators – logistics
4. Departments – content
5. Patients & families - engagement

Executive support (CEO, President, CNO, etc.)



Champion Support



If champion **appointed**, less support
If champion **applied**, more support



Leadership Support Impact

Amount of Meeting Content

Hospitals with higher levels of leadership support were more likely to report having sufficient content to fill PFAC meeting agendas.

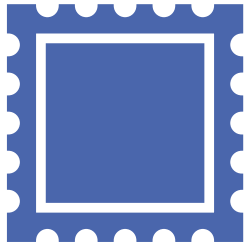
Pre-Meetings with Departments

Leadership support was statistically significant in how frequently the leaders/co-chairs met with the departments that planned to obtain input from the council about their initiatives or programs. Pre-meetings **enable more structured and proactive partnership** between the departments and the council, and they may also **improve preparation, ensuring content is appropriate and goals are aligned.**

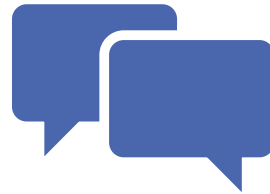
Higher Engagement Level

Three levels: 1. Stamp of Approval 2. Feedback 3. Co-design

What role do members have with initiatives?



Stamp of approval - PFAC
was asked for approval on an
already completed initiative
3%



Feedback - department
listened to the PFAC provide
input on a project in progress
65%



Codesign - PFAC was involved
at the inception of the project
24%

Banned by some PFACS

Lack of CEO/President Support

PFAC volunteers on
interview
committee

Board selects
patient-centered
focus

PFAC lead meets with
new CEO re
accomplishments

Prove the Value
Measure
Measure
Measure

Questions about Support?

Recruitment and Onboarding



Best Practice

PFAC Focus

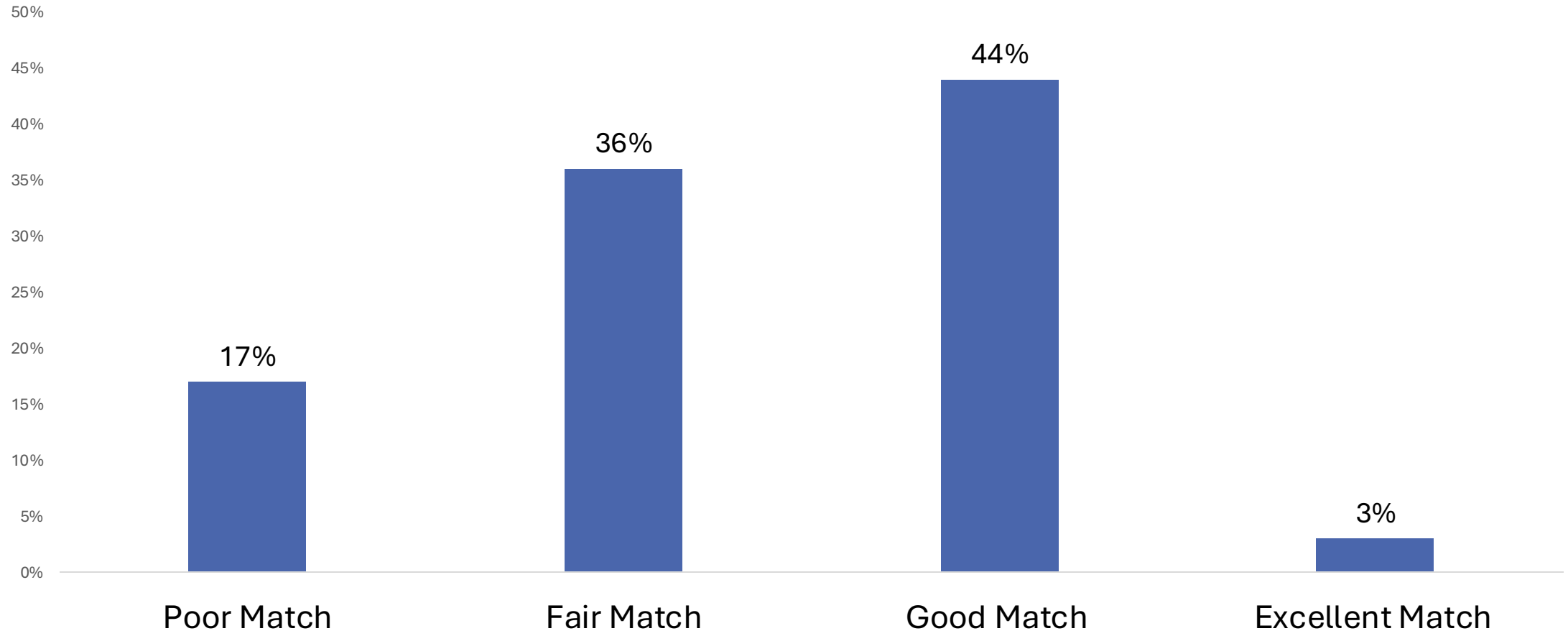
Literature Review

- 70% of articles about a PFAC had a focus...of those...
- 42% dealt with a specific condition, such as cancer
- 35% focus on person, such as youth
- 16% was both – youth with cancer

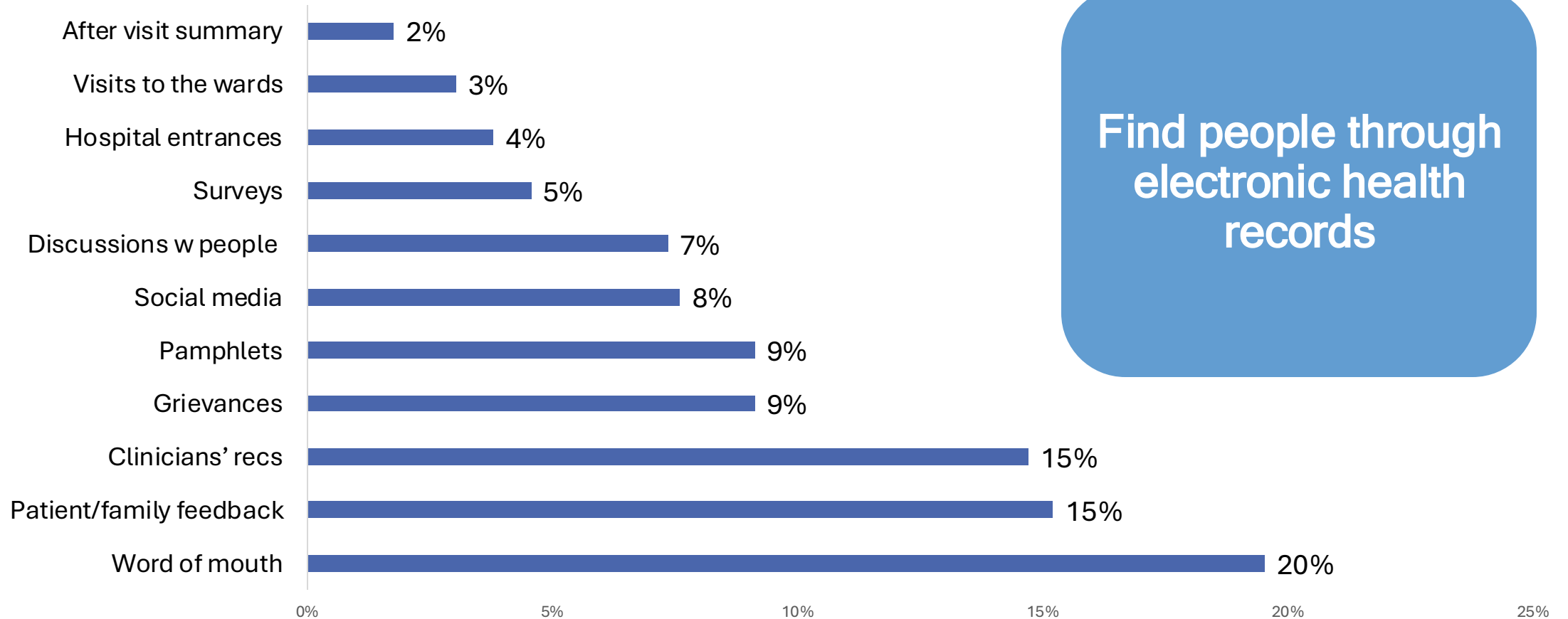
Statistical Analysis

- More content
- Higher engagement level
- More coaching & training
- Increase process & outcome measurements

How well do the demographics of your PFAC match the hospital's demographics?



What methods do you use to recruit members?



Recruitment Challenges

Problem:

3 hospitals closed PFAC
due to disruptive
members; Not a good fit
(“*not ready*”) - Members
had an “*axe to grind*” or
angry about their
hospital experience &
focused on one issue

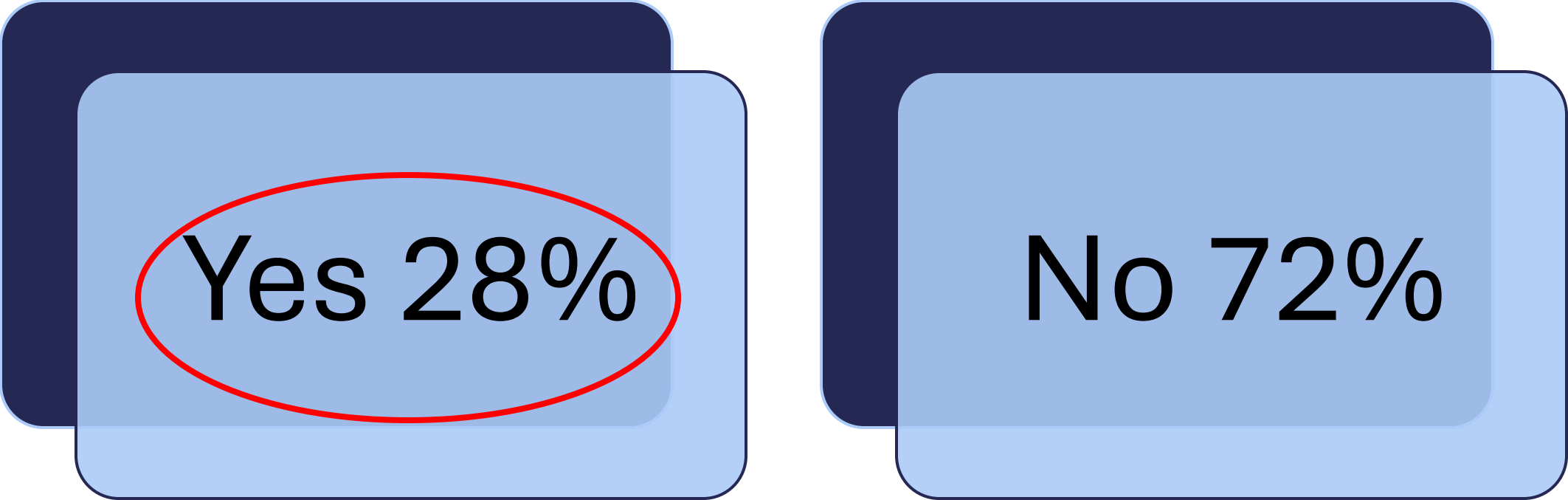
Solution:

Candidate interviews
Discussion w patient’s doc
Litigation
Trial meeting
Documents-Norms
Coaching

Benefit:

Productive Council

Do potential members attend a Council meeting before being invited to join?



Yes 28%

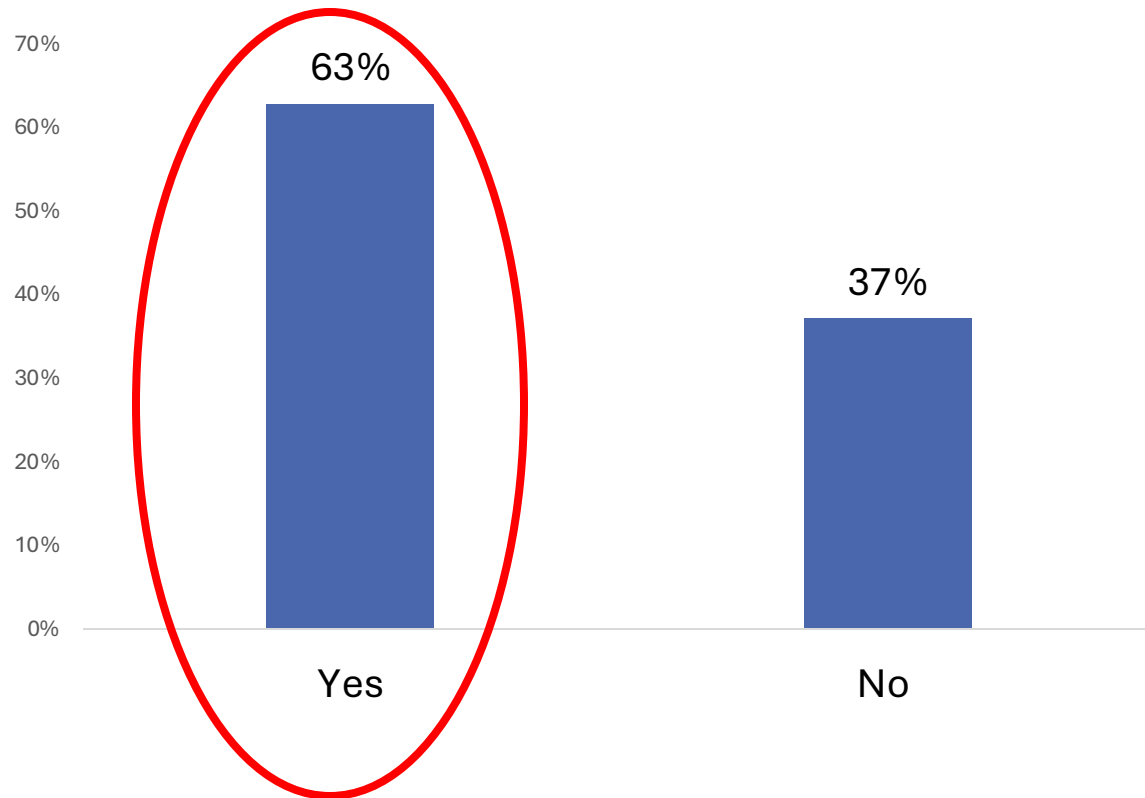
No 72%

How many members are on the PFAC?

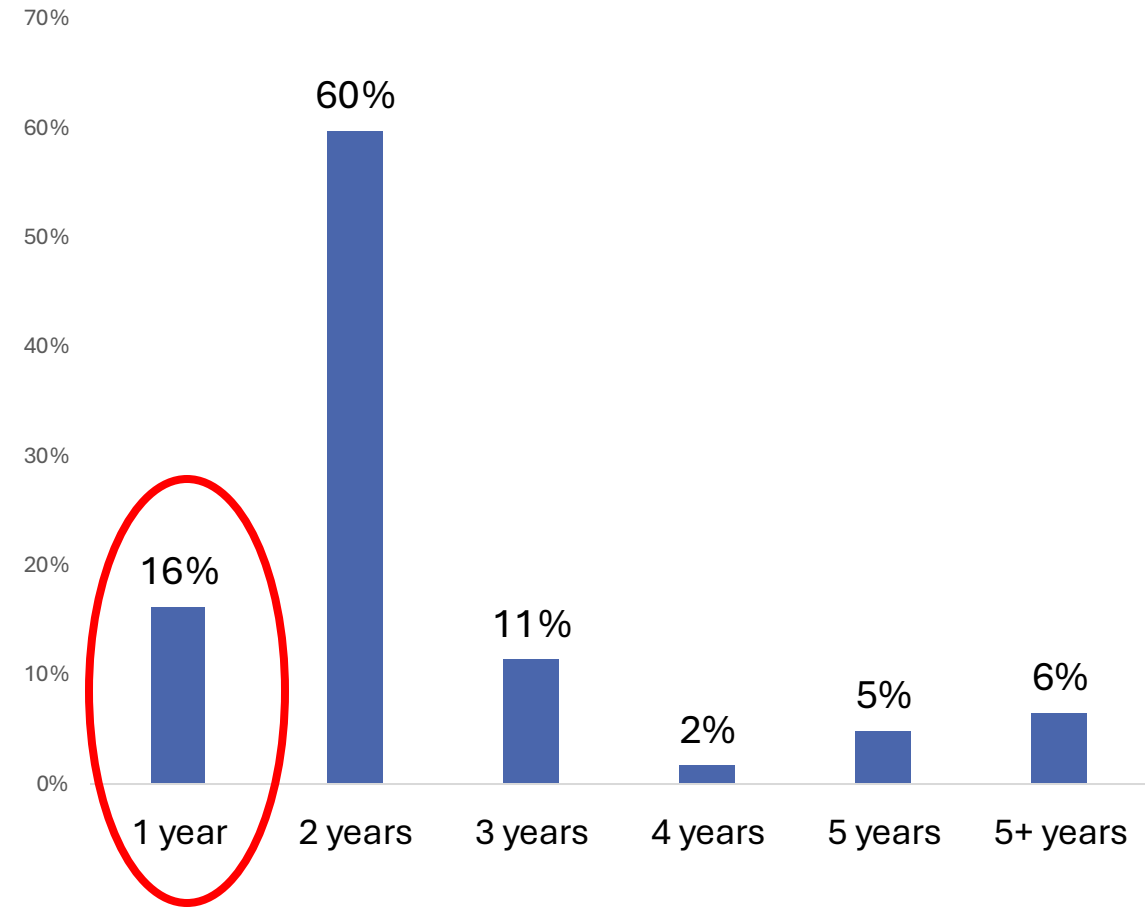
Patient/family
volunteers -
13

Hospital
employees -
7

Is there a defined term of membership?



What is the duration of the term?

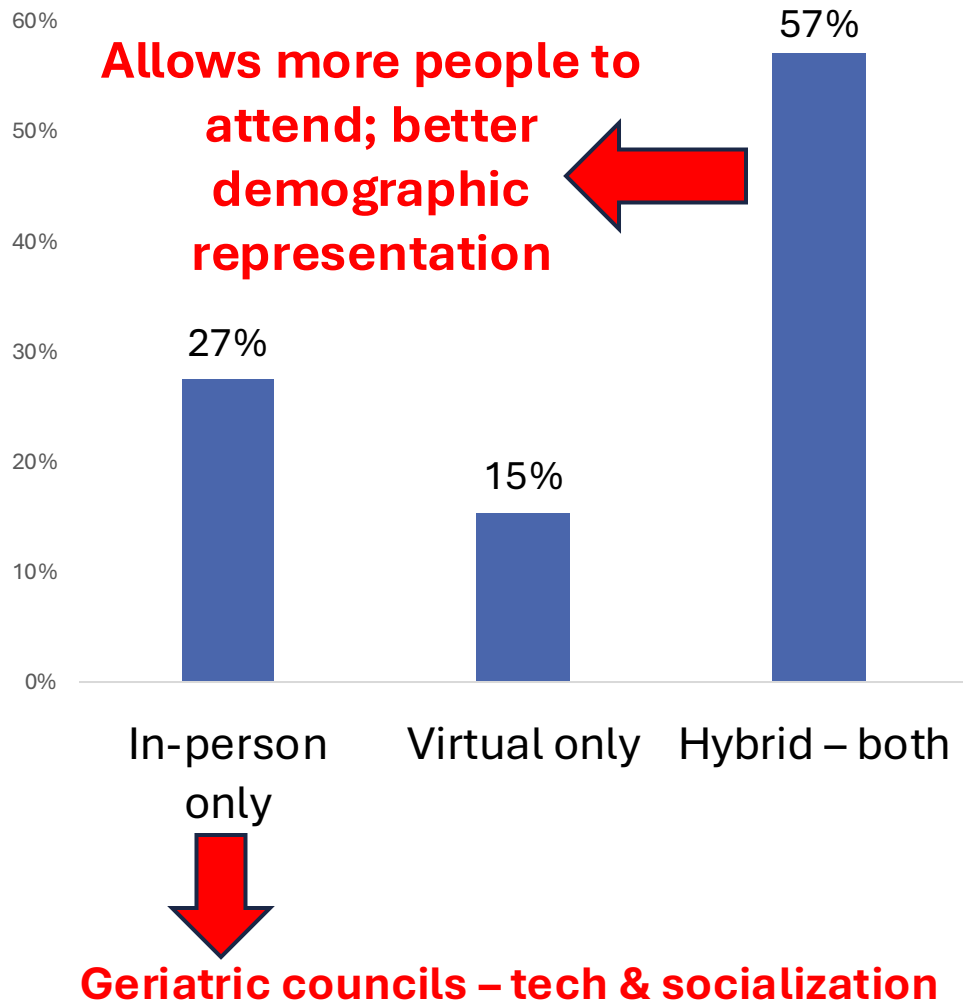


Re-apply after one year

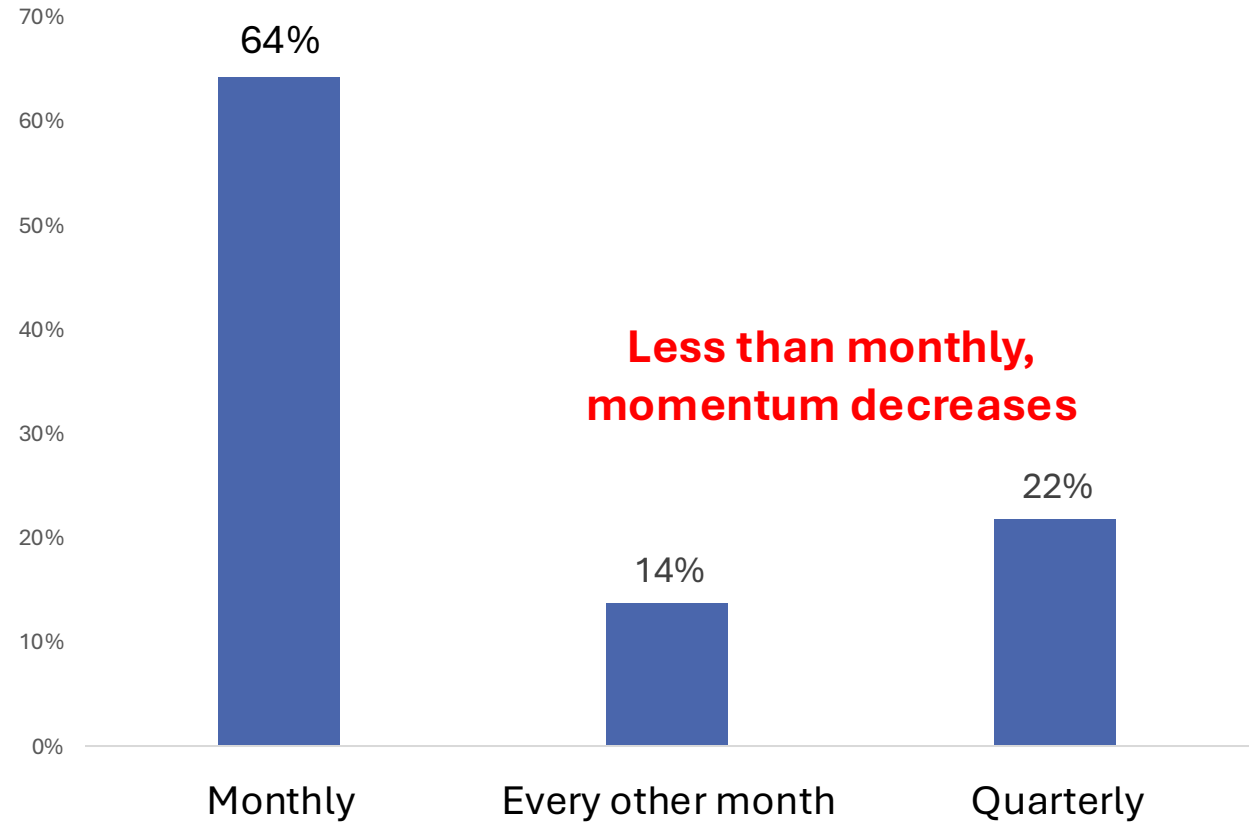
Questions about Recruitment?

Meetings and Engagement

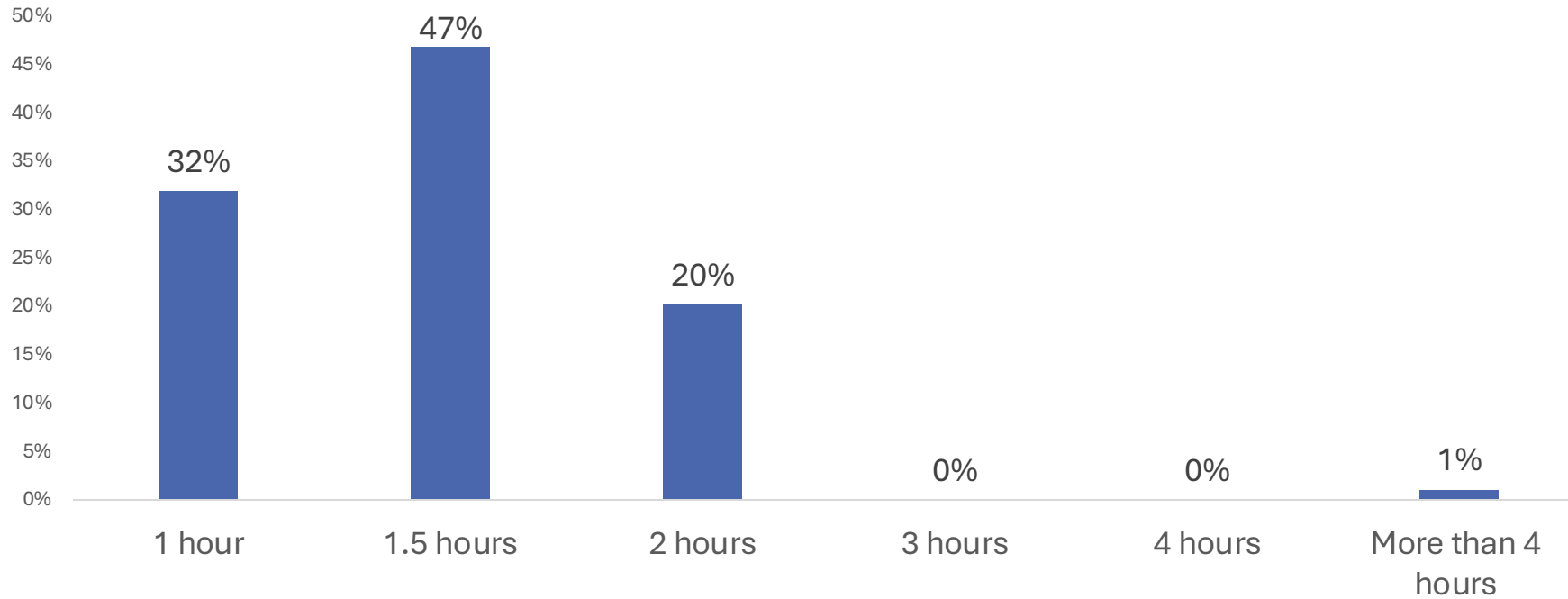
How does your PFAC meet?



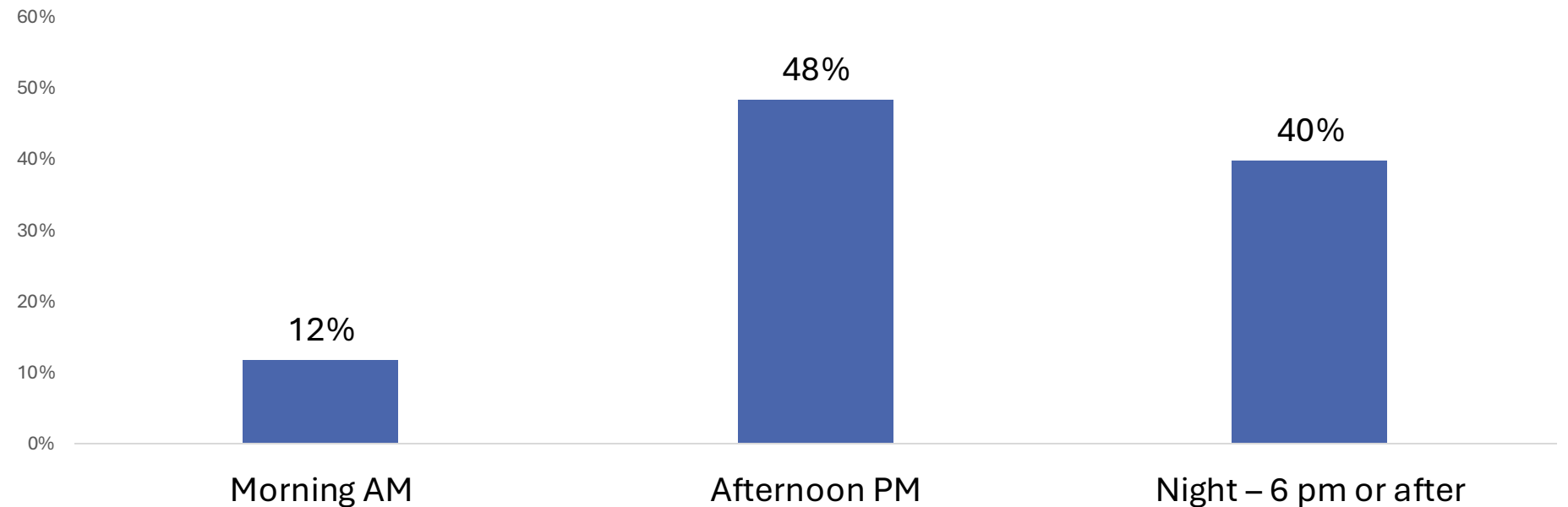
How often does your PFAC meet?



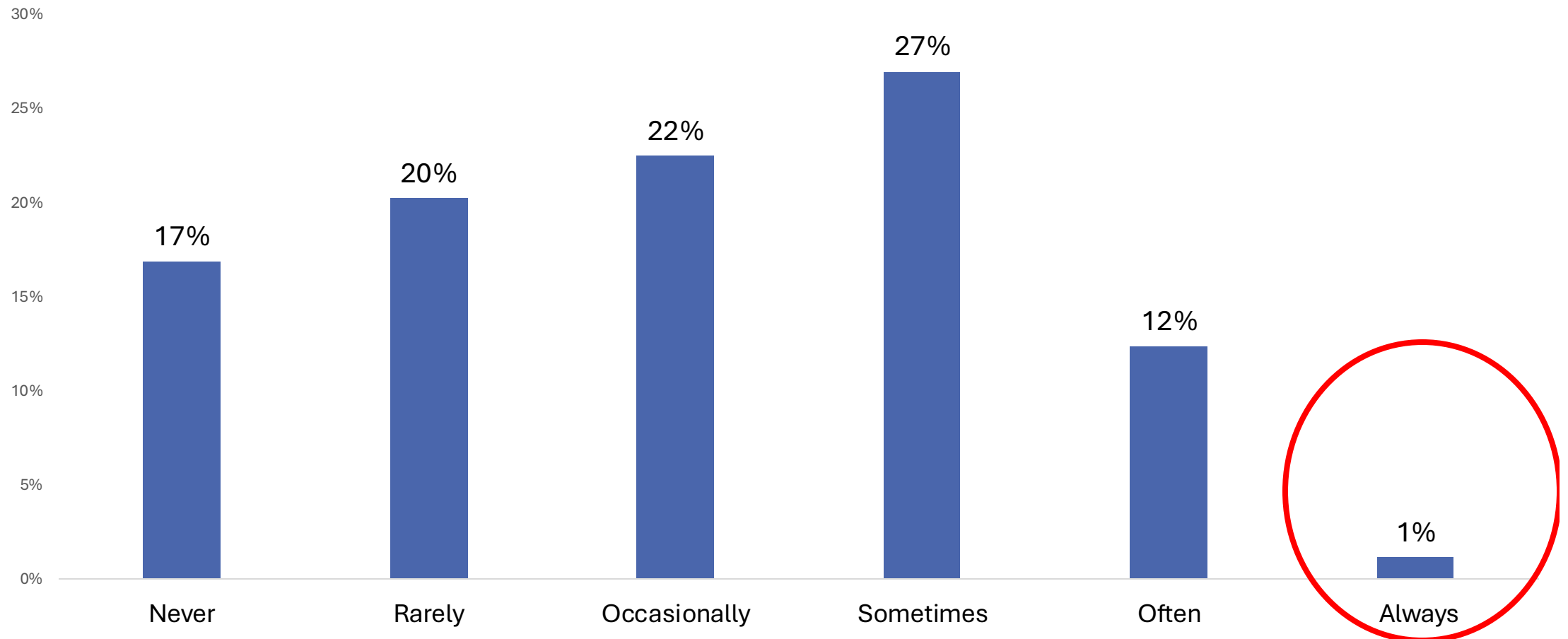
How long do PFAC meetings typically last?



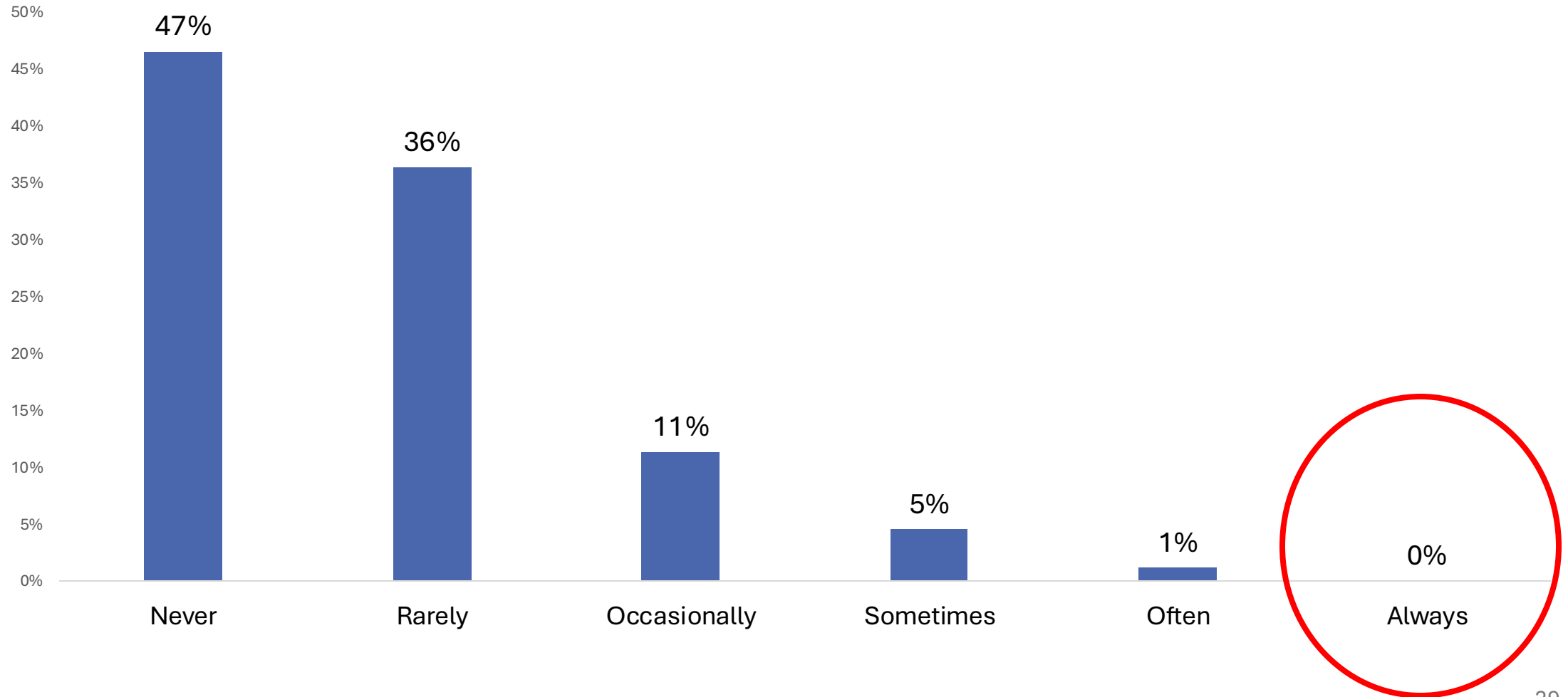
At what time of day does the meeting start?



How frequently do you provide training for your PFAC members?



How often do you work privately with members regarding their behavior during PFAC meetings?

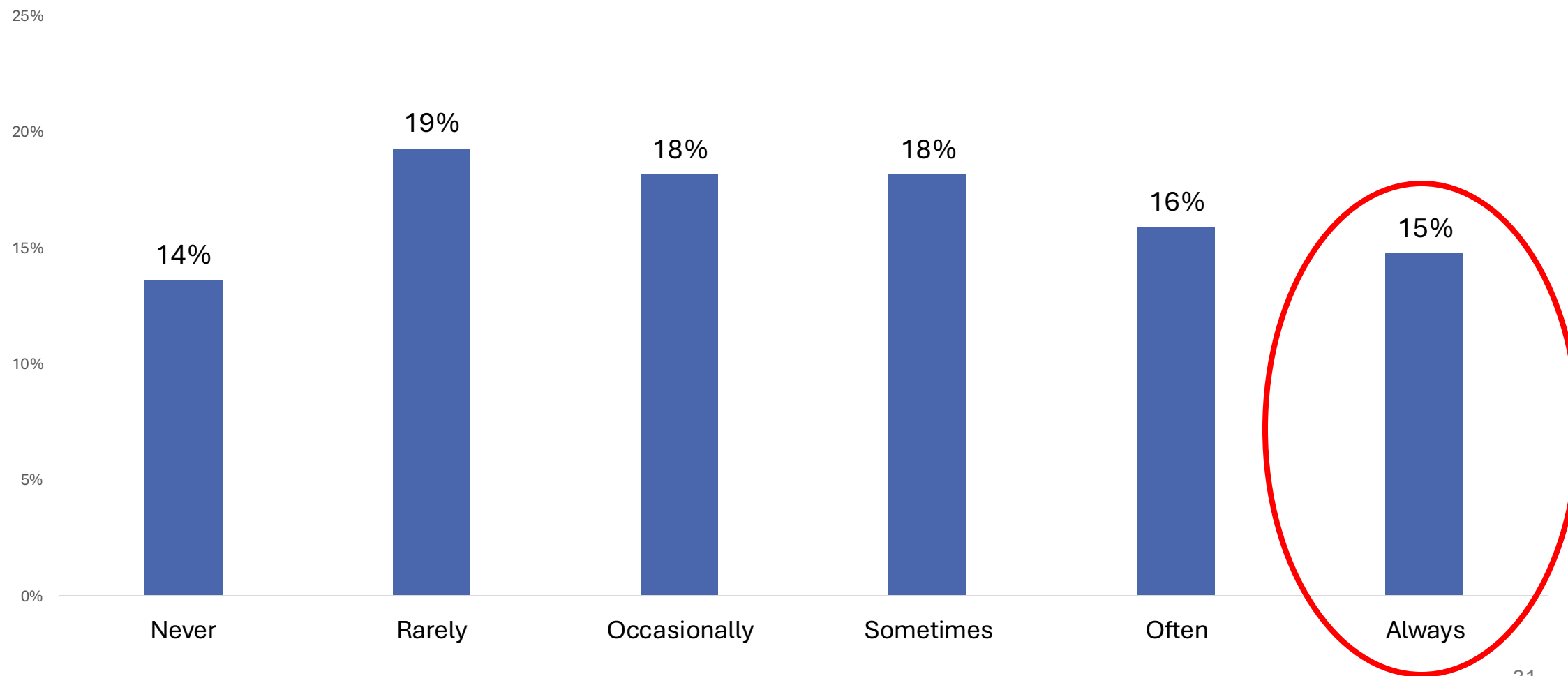


Effective PFAC Operation Takes Planning

- **Pre-meetings** to review content
- **During** meeting format
- **Post meeting** debrief and surveys.



How often do you have pre-meetings with departments before they present to the PFAC?



Pre-Meeting Goals

- Short PPT deck
- No acronyms
- Questions for council members
- Pre-meeting homework.

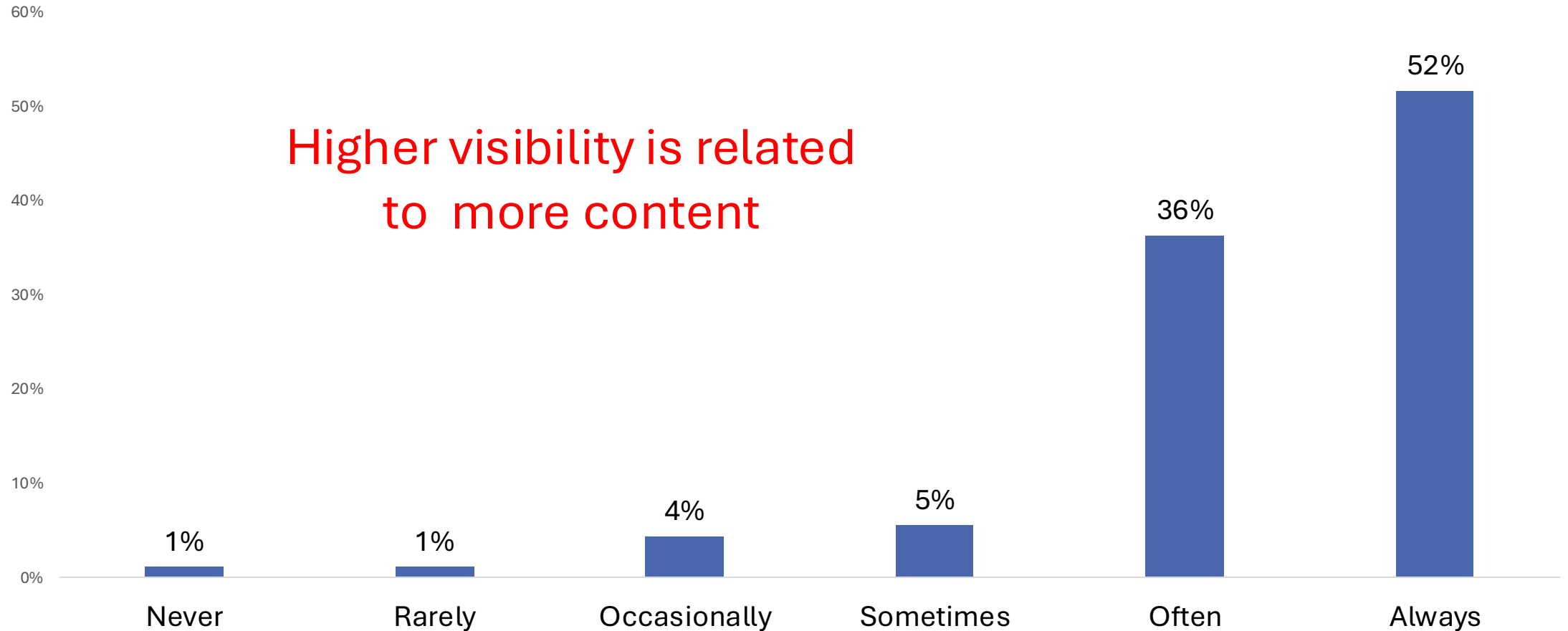


During Meeting -Recommendations

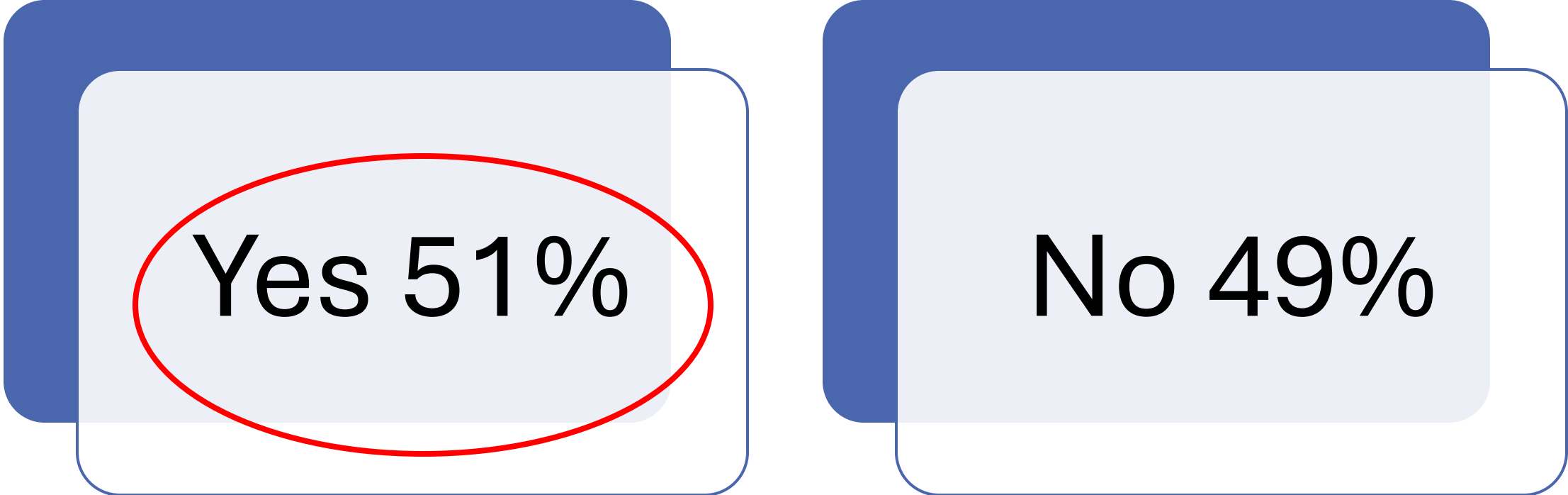


- Teach story telling – Problem - Solution – Benefit format
- Use Round Robins to give everyone a voice
- Employ “ditto” if nothing to add
- Say “LMO” (let’s move on) for long winded narratives
- Coach volunteers.

How often do you have enough content (initiatives) to fill your meeting agendas?



Does your PFAC have annual goals?



Yes 51%

No 49%

You can't manage what you don't measure.

- **Specific** - Clearly define what you want to achieve. Avoid vague goals like “meet with departments.” Instead, aim for “meet with one department at every meeting.”
- **Measurable** - Set quantifiable criteria to track progress. For example, "increase meeting feedback scores by 15%."
- **Achievable** - Ensure the goal is realistic and attainable given your resources and time constraints. Avoid setting goals that are impossible to reach.
- **Relevant** - Align your goals with your overall objectives and priorities. Make sure the goal contributes to your bigger picture.
- **Time-bound** - Set a deadline for achieving the goal. This creates a sense of urgency and accountability.

SMART Goals



Post-Meeting: Process and Outcome Measures

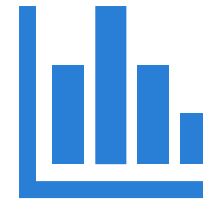
Can You Identify the Impact and the Value?



Feedback from
presenters



Feedback from
members



Measure
initiatives

Value of Measurement: Proof of Concept

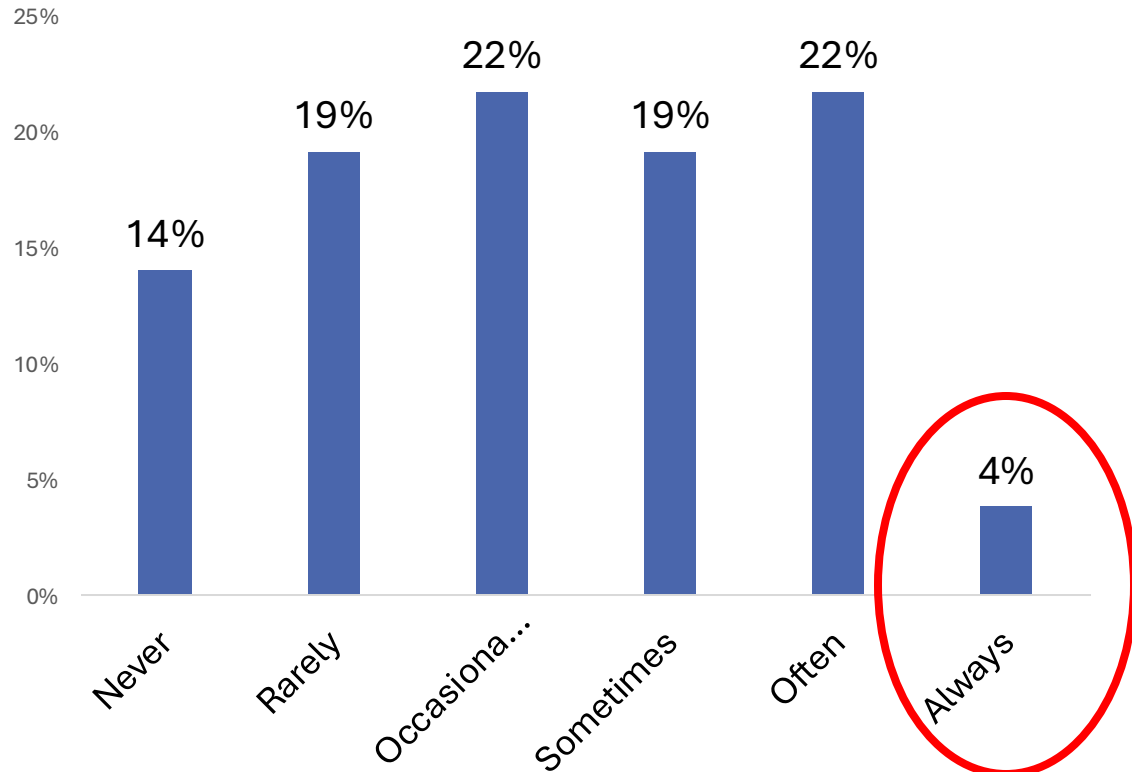
Types of Measurement (AHRQ)

Process	Structure	Outcome
<ul style="list-style-type: none">• Activity• E.g. # meetings, # of PFAC projects	<ul style="list-style-type: none">• Capacity• E.g. Wait time reduced by 10%; 3% more people could be seen	<ul style="list-style-type: none">• Impact• Gold Standard• Pre/post metric• E.g. Procedure cancellations decrease by 50% after PFAC revised directions

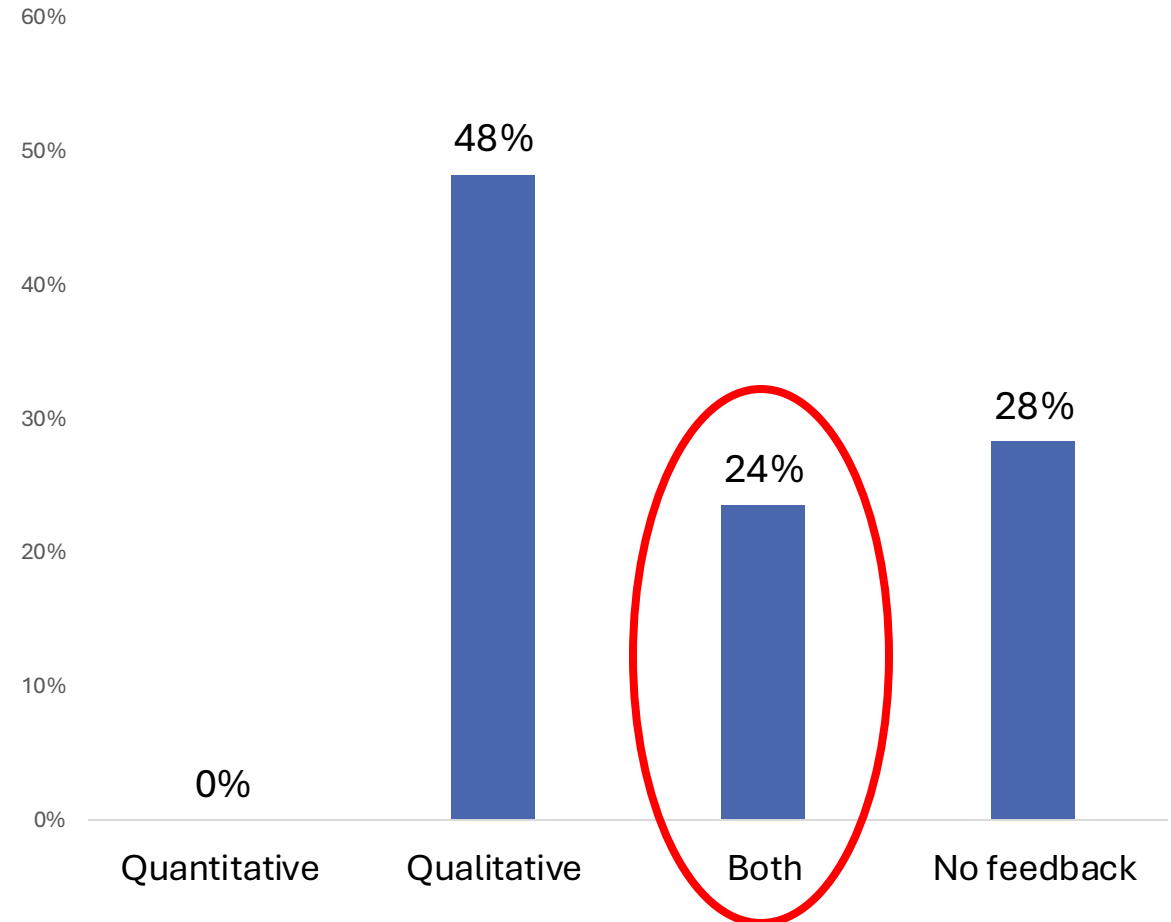
Recommendations: Outcomes & Responses

	Initiative	PFAC Recommendation	Outcome/Response
1	Overcrowded hospitals caused patients to be on gurneys in the Emergency Department hallways.	The PFAC recommended a number of ideas for the patients.	<i>"It was phenomenal work that the PFAC did. Satisfaction rates increased."</i>
2	Patients want to be discharged from the hospital as soon as possible.	The PFAC came up with early discharge ideas.	<i>"This was one of our key metrics."</i>
3	Food always received low scores from patients.	The PFAC offered many suggestions.	<i>"Our patient scores for food are in the 90th percentile."</i>
4	In the obstetric unit, follow-up appointments were important but frequently not booked.	The PFAC suggested booking the appointment before discharge.	<i>"Satisfaction rates went up, and readmission rates went down."</i>
5	Patients were hitting their shins on walkway benches, painted the same color as the walls.	The PFAC suggested colorful paint.	<i>"That's the value of outside eyes."</i>
6	Patients did not like their names called out or listed on a leaderboard for confidentiality reasons.	PFAC recommended a pager system.	<i>"Patients could go to the cafeteria while waiting."</i>
7	The hospital was rebranded with new signage to be hoisted on the building.	The PFAC provided feedback on the initial plan.	<i>"We went back to the drawing board and came up with a different plan."</i>
8	Clinicians were lax in washing their hands.	The PFAC helped create a video.	<i>"Handwashing increased."</i>

How often do you obtain feedback from departments about their experience?



Is the feedback quantitative or qualitative?



Department Survey for Feedback

On a scale of 1 to 5, how would you rate the following (1 = poor, 5 = excellent)

1. The meeting pre-planning (calls, discussion, information you received, etc.) with the PFAC co-chairs
2. The meeting discussion with PFAC members
3. The value of the PFAC input you received at the meeting
4. The impact the PFAC's input will have on your project
5. Your interest in bringing other projects to the PFAC

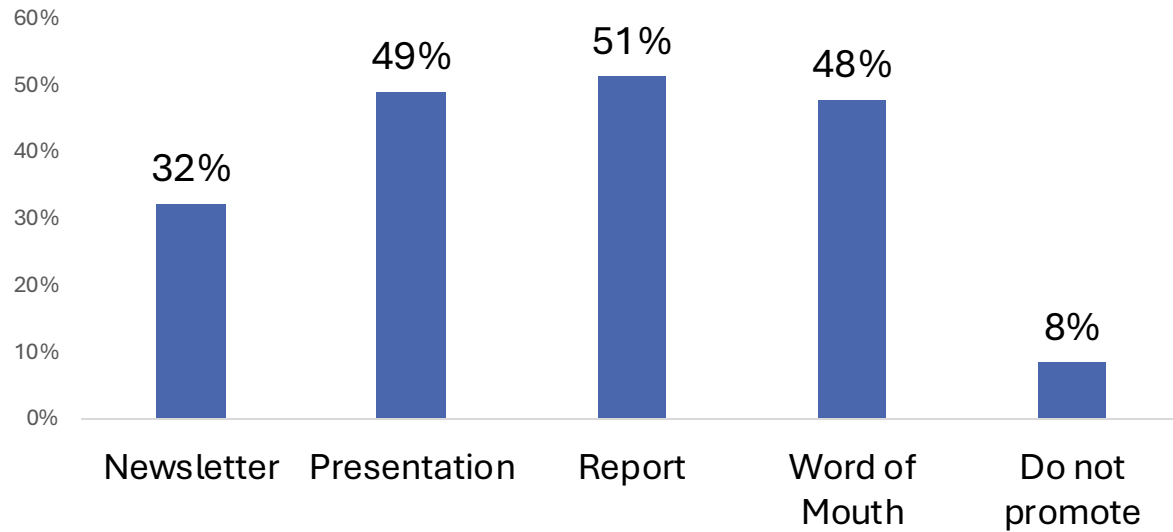
In a few sentences...

1. How would you describe the benefit of the PFAC's feedback?
2. What was the most impactful idea that you heard at the PFAC meeting?
3. Please share examples of actions/next steps that you are going to take based on the discussion and advice you received from the PFAC.
4. Please indicate any areas where we can improve presenters' interaction with the PFAC in the future.

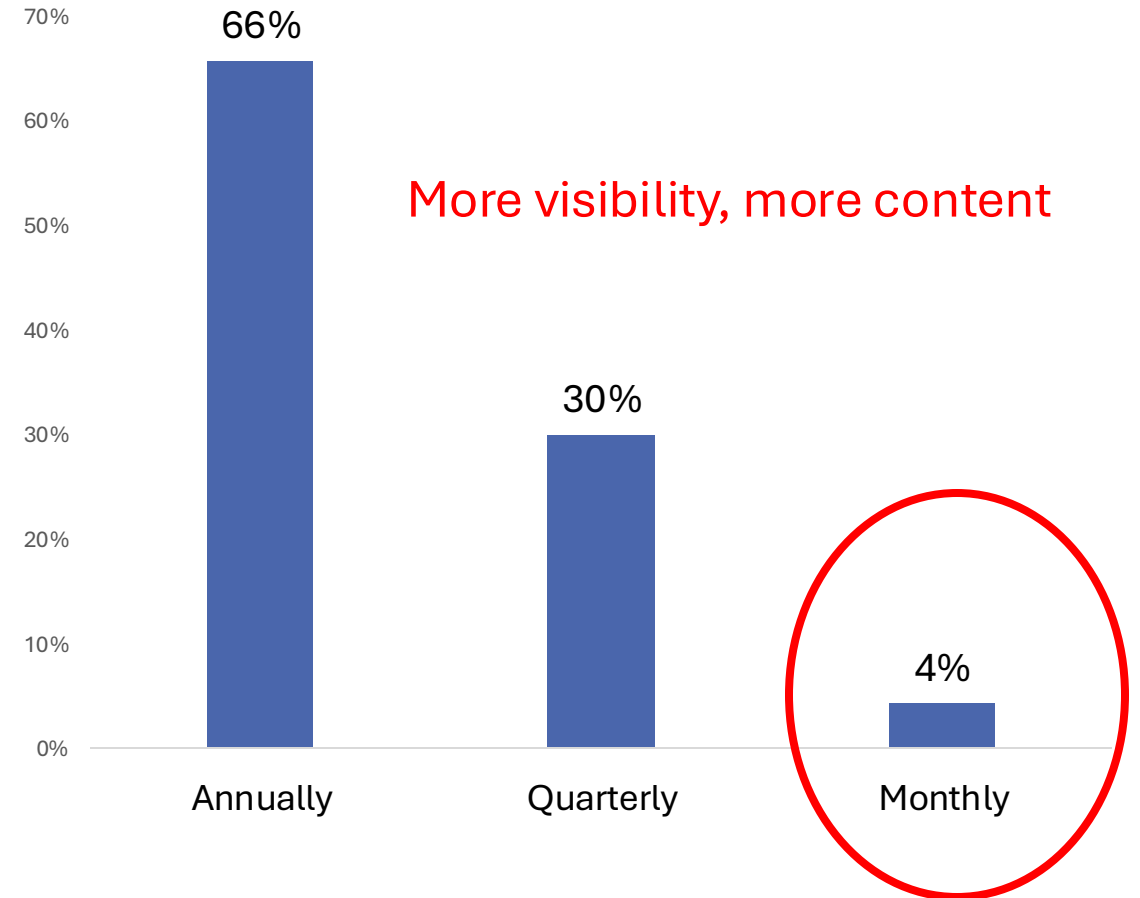
Questions about Meetings and Engagement?

Accomplishments and Impact

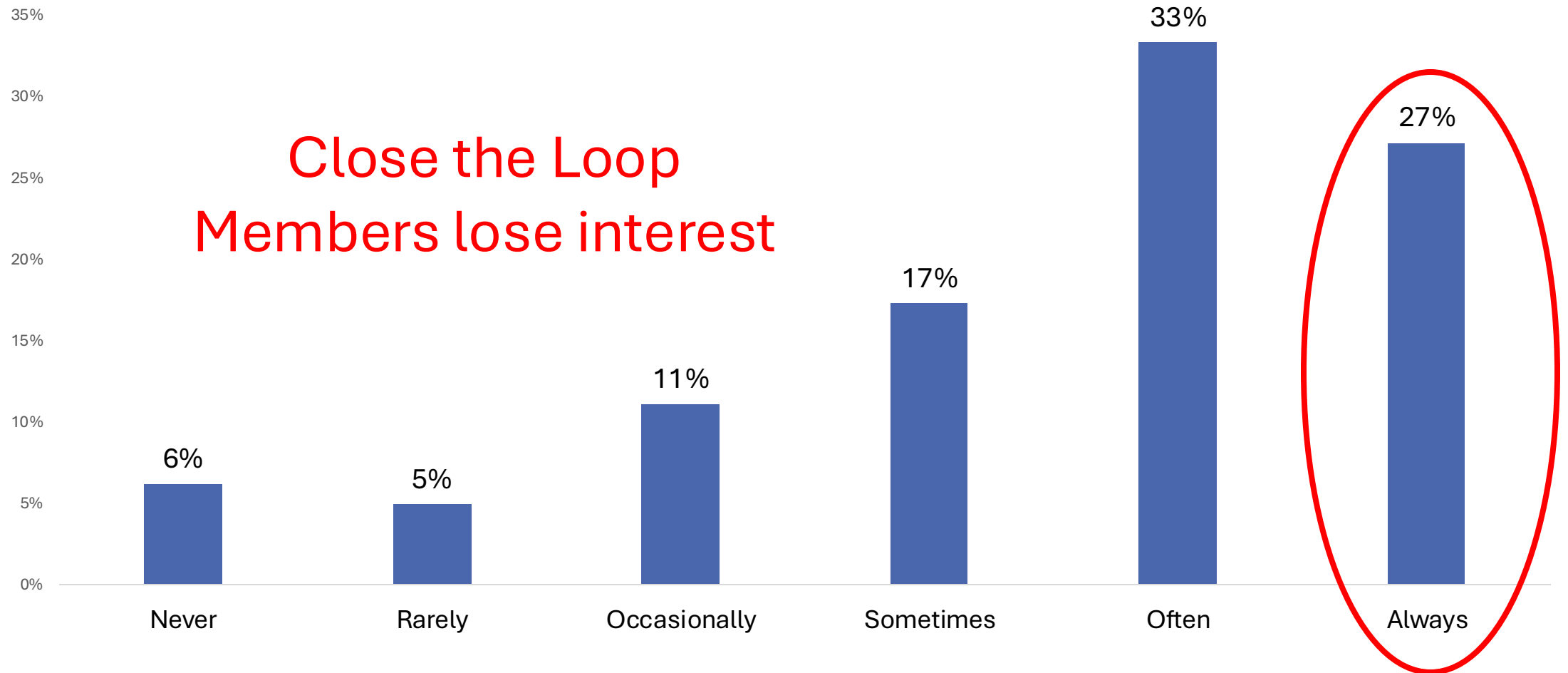
How do you promote the accomplishments?



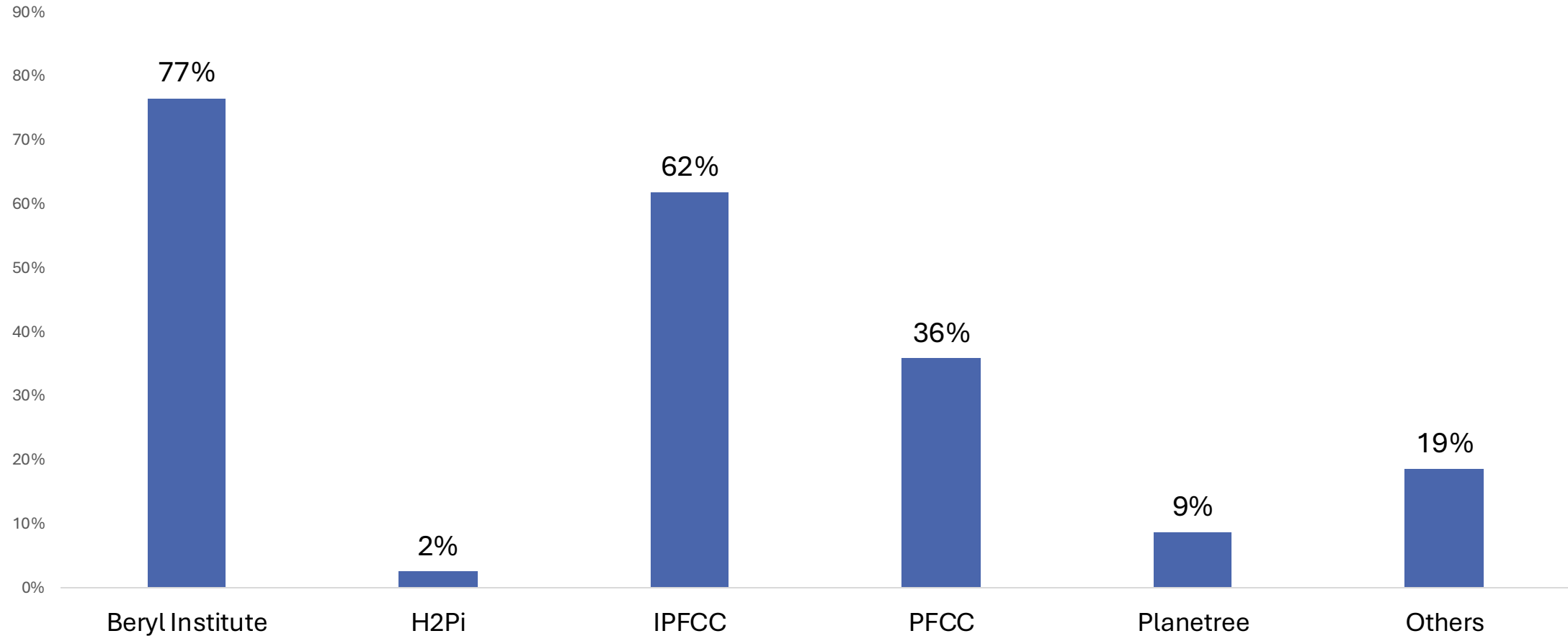
How often do you promote the accomplishments?



How frequently is the departments' implementation of PFAC advice shared with the Council?



What organizations do you rely on for information about starting or strengthening your PFAC?

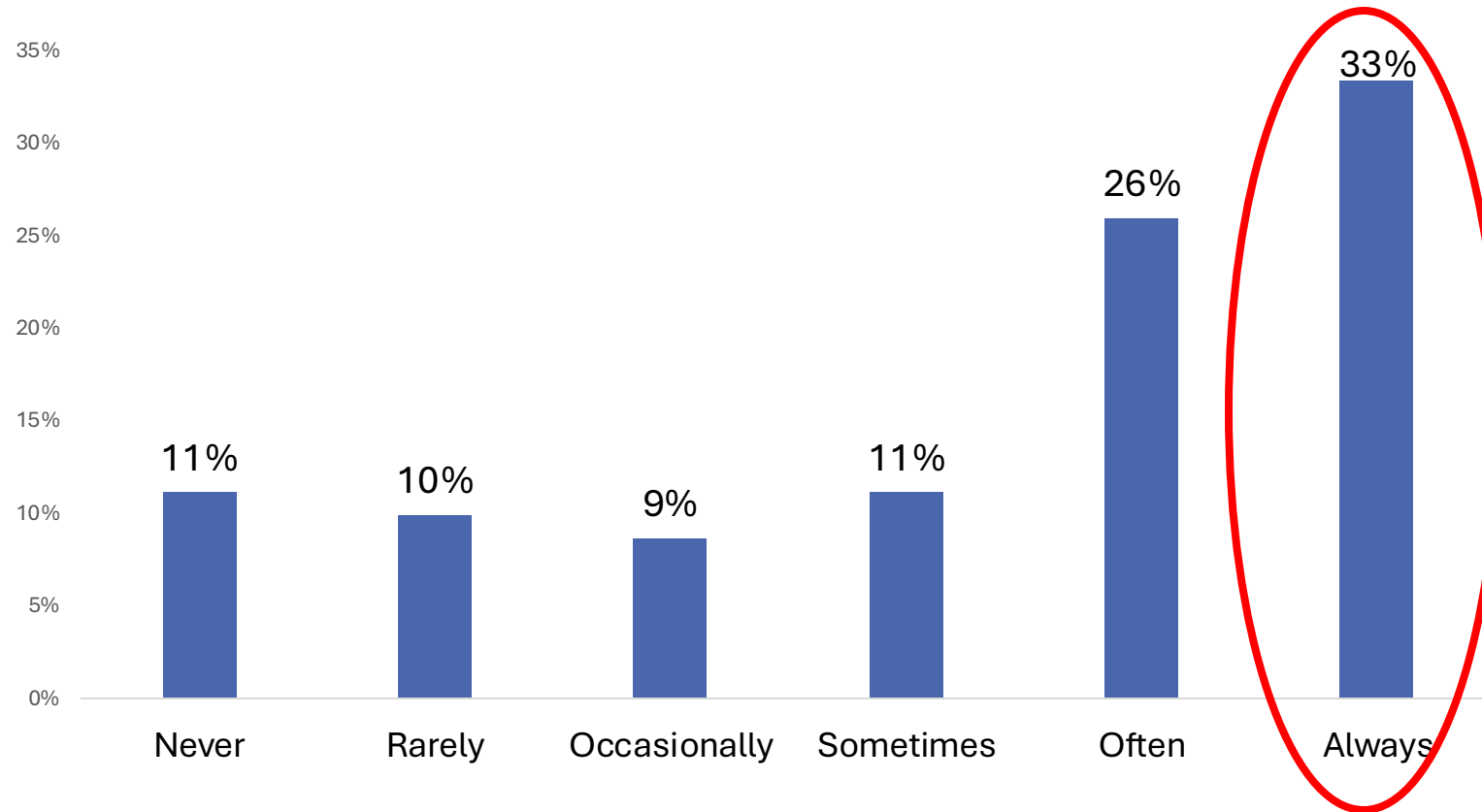


How often do you track process metrics? (e.g., number of meetings, number of initiatives, etc.)

- Never
- Rarely
- Occasionally
- Sometimes
- Often
- Always



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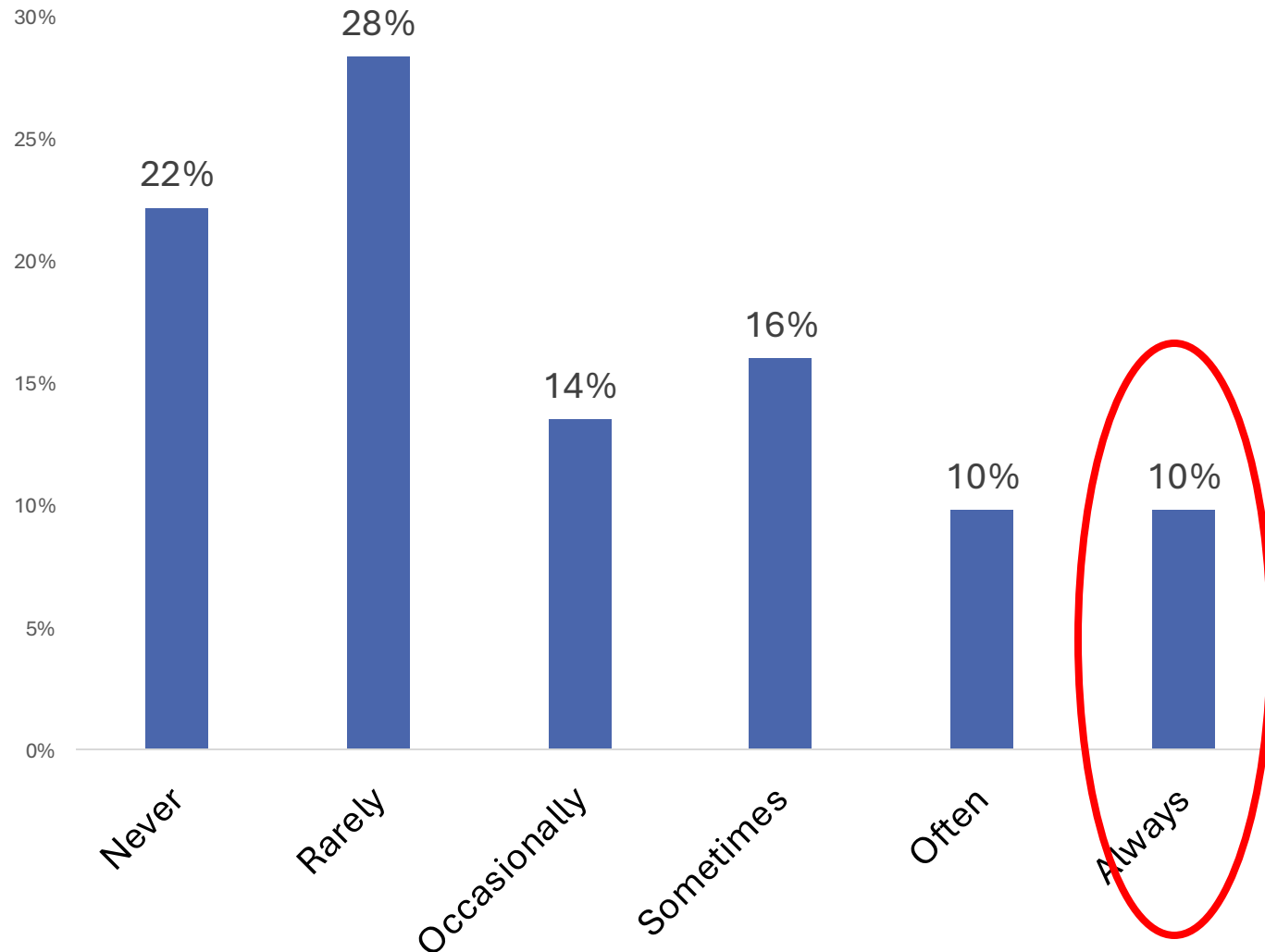
How often do you track outcome metrics? (e.g., improvement in patient experience scores, reduction in falls, etc.)

- Never
- Rarely
- Occasionally
- Sometimes
- Often
- Always



How often do you track outcome metrics?

(e.g., improvement in patient experience scores, reduction in falls, etc.)



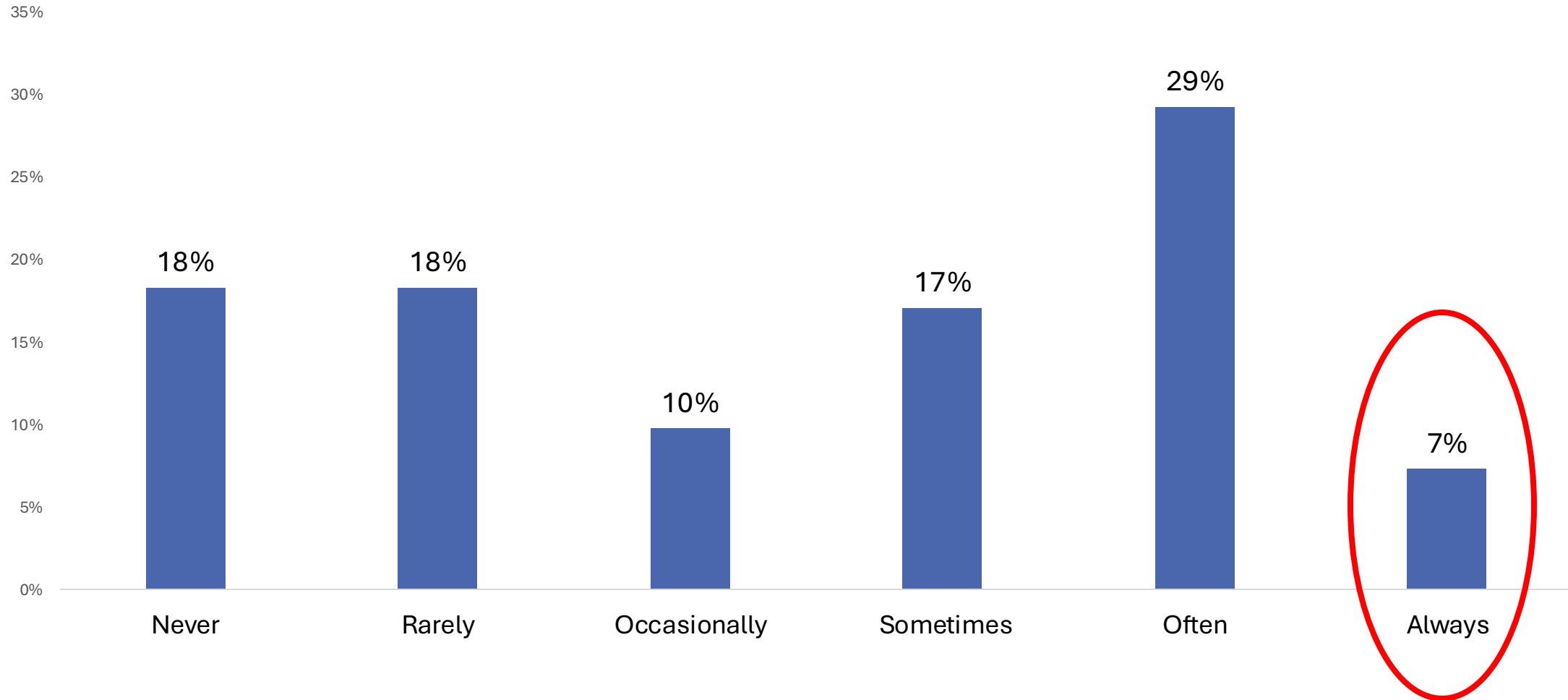
**Not 1
outcome
metric in
reviewing MA
annual
reports twice**

How often do you measure the impact of the PFAC on initiatives?

- Never
- Rarely
- Occasionally
- Sometimes
- Often
- Always

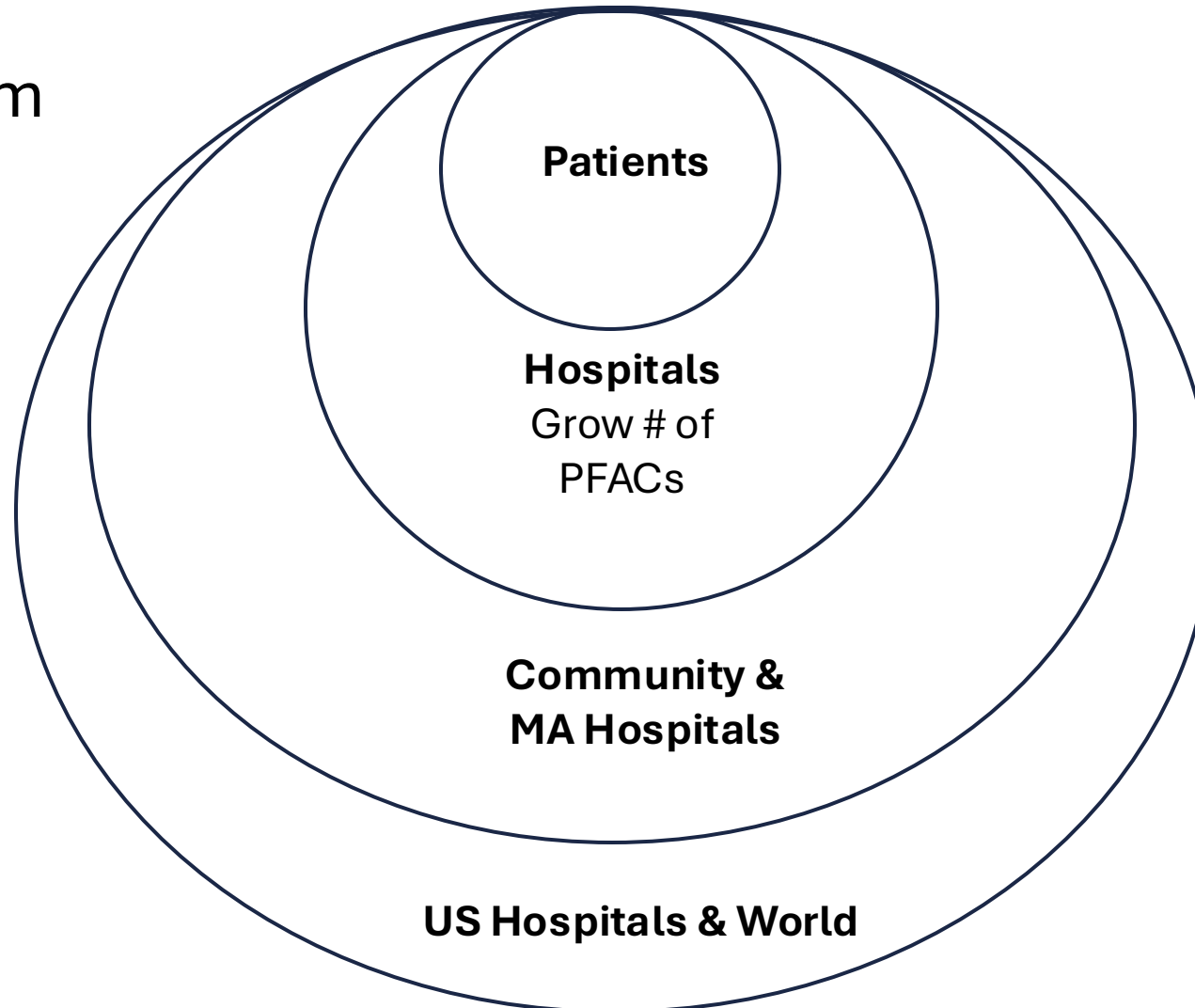


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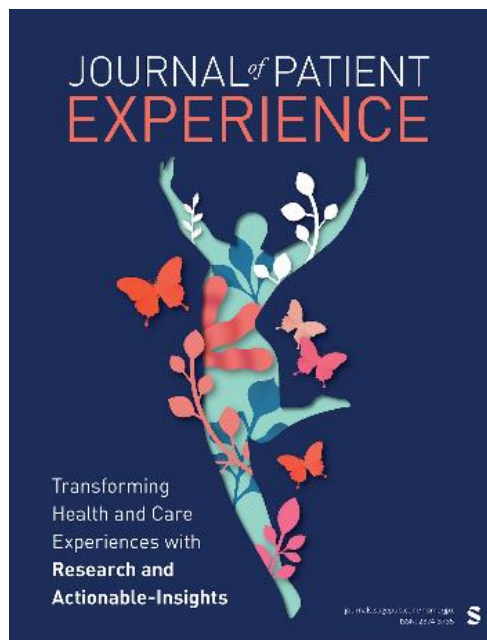


Why Are Metrics Important?

PFAC Ecosystem



**MA is a lighthouse
in embedding the
patient voice in
healthcare**



The Patient Experience
SYMPOSIUM

Boston
October 6-8



Success of Patient and Family Advisory Councils: The Importance of Metrics

<https://doi.org/10.1177/23743735231167972>

<https://icdevents.com/conferences/9th-annual-patient-experience-symposium/>

Take Aways



1. Solicit leadership support
2. Carefully select members
3. Include virtual modality to increase demographic representation & reduce the budget
4. Increase member engagement by closing the loop
5. Measure initiatives and feedback quantitatively and qualitatively to prove value
6. Use process and outcome metrics
7. Promote accomplishments frequently.

QUESTIONS – COMMENTS

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**Send me an email if you would
like invitations to webinars,
podcasts, etc.**