



*South Shore Hospital  
2011 Patient Family Advisory Council  
Annual Report (FY11)*

*I. Introduction*

South Shore Hospital is committed to fully integrating the principles of Patient and Family Centered Care (PFCC), and fully respects and values the important roles that patients and families have in enhancing the quality and safety of health care. Through our PFCC approach, members of our health care team partner with patients and families to make sure we are providing care that best meets the individual needs of our patients. Our hospital intends to continue to involve patients and families in all aspects of care, from planning, to delivery, and evaluation.

The formation and continued growth of our Patient Family Advisory Council (PFAC) is the cornerstone of our commitment to Patient and Family Centered Care. Our PFAC brings together patients, their families and South Shore Hospital administrators, physicians, nurses, and allied health professionals. The Council draws upon the valuable knowledge and experience of its members to help guide our PFCC approach. Our PFAC assists in the development of new services and programs, in finding solutions to problems or challenges and in identifying ways that South Shore Hospital can improve the hospital and home care experience for our patients, their families and our colleagues.

The 2011 Patient Advisory Council Annual Report includes the accomplishments of South Shore Hospital's PFAC (fiscal year 2011) as well as a work plan for future Council engagement.

*II. Formation of the Patient Family Advisory Council at South Shore Hospital*

The Patient and Family Advisory Council (PFAC) of South Shore Hospital was formed in September, 2009, and its first meeting was in January 2010. Meetings are monthly.

*III. Patient and Family Advisory Council purpose and goals*

Our PFAC works in active partnership with those who work at South Shore Hospital to promote healing, caring, and comforting that facilitates improved patient experiences, optimal clinical outcomes, and sustained wellness, post-care.

*IV. Council members*

**Qualifications of Council members**

Patients, family members and staff from South Shore Hospital are eligible to be PFAC members. Members should be committed to building a partnership of advisors and hospital colleagues, working together to understand the needs of the community members they serve, and to implement programs and policies to address the health care needs that align with South Shore Hospital's mission statement:

*South Shore Hospital exists to benefit the people of our region  
by promoting good health, and by healing, caring and comforting.*

Potential PFAC members come from a variety of sources, including the PFAC itself, patient advocates, hospital leaders, and our community. A list of potential PFAC members is generated and maintained by the hospital's patient relations department.

### **Selection and retention criteria for Council members**

Potential PFAC members complete an application form. A PFAC Co-chair contacts the candidate and conducts a preliminary phone interview. After successful completion of the phone interview, PFAC candidates are invited to interview with two or three PFAC members. Following the interview, recommendations for eligibility for appointment are made to the Council. If the decision is to appoint, one of the interviewing Council members contacts the applicant to extend an offer. The potential PFAC member is given the option to attend a Council meeting before accepting the position.

### **Member selection criteria**

An interview form is used as a guide when prospective candidates are interviewed.

### **Council member application form**

Application forms have been created by the PFAC.

### **Council member recruitment plan**

Patient Family Advisory Council members, Patient and Family Centered Care Committee members, and South Shore Hospital colleagues all help to recruit and recommend potential Council members. Requests are made to the hospital's Patient Relations Department.

### **Updates to Council membership**

A list of potential candidates for membership on the PFAC, or for taskforce work, is maintained in the hospital's patient relations department.

### **Makeup of the Council**

South Shore Hospital's PFAC comprises 20 members. A total of 13 members are patients, former patients or family members; three are hospital colleague representatives; three are senior leaders; and one provides administrative support. PFAC is led by three hospital executives: John Stevenson, MD, senior vice president/chief medical officer; Joseph Cahill, executive vice president/chief operating officer and Sandra Geiger, vice president of performance excellence.

### **Council members represent the population served by the hospital**

At the time of this report the community representatives of the PFAC consist of six women and seven men. They represent 11 communities served by South Shore Hospital. The Council includes a chief of police, former paper company CEO, stay-at-home mom, shipyard captain, fisherman, hockey player, cancer survivor, retired teacher, and marketing professional.

Their experiences with patient care at South Shore Hospital include joint replacement, chronic pain, inpatient medical and inpatient surgical stays, visits to the emergency department, pediatric and mother/infant care, cardiac care, outpatient diagnostics and testing, and a family member as a care partner.

### **Election of officers and structure of Council**

South Shore Hospital's PFAC officers include two Advisors from hospital senior leadership to the Council and will include two Chairpersons, known as Co-Chairs. The Co-Chairs are responsible for setting PFAC meeting agendas, chairing and conducting meetings, coordinating between Council members and staff, providing leadership for Council members, and serving on committees and projects. The hospital Advisors are a resource for the Co-Chairs.

Candidates for the Co-Chair positions are nominated from Council members having at least one year of experience as a Council member. A nominating committee may be selected by the Council. Nominations also are accepted from the floor prior to election.

Co-Chairs are elected by an affirmative vote of two-thirds of the members present and voting.

The standard term is two years; even if this means the Co-Chair will serve four, one-year active membership terms. The term of office begins January 1 after the election, unless otherwise specified. The election will be held in November.

A Co-Chair may resign from office at any time. The Council may choose to elect a replacement to complete the term of the office or to leave the position open until the next scheduled election.

### *V. Organizing the Council(s)*

Using information from the Institute for Patient and Family Centered Care, South Shore Hospital continues to embrace the motto, "Nothing About Us, Without Us" -- a reminder that decisions about patient care must fully involve patients and families. The council's work is guided by the Institute for Patient and Family Centered Care's core principles: Dignity and Respect, Information Sharing, Collaboration and Participation.

### **Council members' terms of service**

For the first year, active membership consists of a term of either one year or two years – half the Council for one-year term and the remaining for a two-year term. One-year terms are renewable at the end of each year for three years. Two-year terms are renewable at the end of the two years for one additional term. Individuals are polled for their preference for continued membership at the end of each year. Upon completion of first terms, all outgoing Council members are replaced with three-year terms. All active members must be in compliance with the requirements for active status.

### **Attendance expectations**

Members are expected to participate in monthly meetings consisting of two to three hours, and on various committees or projects that will require a varied number of hours. Members are expected to participate on a minimum of one committee or project at all times.

### **Council members' duties**

PFAC member duties are to propose and/or participate on hospital teams and committees to assure that certain patient and family perspectives and principles are represented during the creation of improvement processes and policies, as well as during the development of new facilities and services.

Council members may resign or request a leave of absence (LOA) from the Council at any time during their terms. A member may request a LOA when unusual or unavoidable circumstances require the member be absent from meetings for an extended period of time – up to one year. The member must submit his/her request in writing to the co-chairs, stating the reason for the request and the length of time requested. The Co-Chairs determine if the request is approved. If a member can not return at the end of the requested time period, he/she resigns from the Council. After any resignation, the Council may choose to replace the position or leave it open until the next rotation of members.

### *VI. Council activities*

The Patient and Family Advisory Council at South Shore Hospital had a productive year. In 2010 the council worked together to establish guidelines and learn about South Shore Hospital and the expected role of a PFAC member.

In April 2011 the following PFAC goals for 2011 – 2012 were approved by the council:

- 1. COLLABORATE WITH HOSPITAL COLLEAGUES AND LEADERSHIP TO IMPROVE THE PATIENT/FAMILY EXPERIENCE**
- 2. INTEGRATE PATIENT ADVISEMENT INTO KEY STRATEGIC AND OPERATIONAL AREAS**
- 3. CONTINUE COUNCIL DEVELOPMENT & EDUCATION**

These goals were operationalized with membership and input on the following committees. Members participate in the Inpatient Experience Committee led by Mark Mahnfeldt, RN, director of critical care/medical surgical nursing. Unit leaders and managers meet with PFAC members to discuss methods of improving care. The Pratt 5 North Committee is a unit-specific group comprised of staff and PFAC members that meet to learn best practices as they relate to principles of PFCC. This has helped Pratt 5 North staff better understand and provide the patient and family centered care that patients and families need during a hospital stay.

PFAC representatives are also members of the Patient and Family Centered Care Committee (PFCC): The primary purpose of this committee is to promote PFCC principles to all SSH colleagues & physicians by offering education and training opportunities about patient and family centered care.

A subcommittee of the PFCC is the Family Presence Taskforce. This committee has developed guidelines that define when and how family members will be given the option of being present during a resuscitation event of their loved one and how to support them. PFAC members reviewed and participated in the training of clinical staff.

Project VIP committee is developing requirements and design criteria for a new application that will provide online and kiosk-based functions for registration and scheduling for outpatient services. Rollout of this new application is planned for 2012.

The Facility Planning/Interior Design Committee meets on an as-needed basis to discuss interior design, including colors, fabrics, floor and wall surfaces, seating areas, etc. for new construction and remodeling interior areas of the hospital. PFAC member opinions are valued regarding both esthetic and comfort points of view for the patient, in both waiting and treatment areas.

PFAC members were invited to participate in the Quality Council (QC). QC members represent leaders from all areas of the hospital and meet to address patient satisfaction, regulatory measures, and delivery of care and process issues. PFAC representatives to the QC have provided input to the annual Performance Improvement Plan and to ongoing discussions relating to quality of patient care.

The purpose of the Human Resources Subcommittee is to have PFAC participation in interview process for hiring new hospital leadership and/or other key positions. These positions have included senior level management including the executive director of the Cancer Center and service line directors. Questions include applicant's knowledge of Patient and Family Centered Care principles. Members submit a written report to HR and this input is considered in the hiring decision. PFAC and PFCC members are also members of the Patient Council of the Cancer Center.

Several subcommittees are in the planning process. They include the Patient Advisement Integration Committee, the Building/Facilities Subcommittee and the Patient/Family Education & Written Materials Subcommittee.

### **Council member orientation, training and continuing education**

The PFCC committee determined the objectives and components of the PFAC member orientation. PFAC members were oriented to South Shore Hospital by members of the human resources department. New members of PFAC are oriented before they attend their first meeting.

The objectives of orientation are to assure that Council members are aware of their PFAC roles and responsibilities, personal and facility safety roles, and responsibilities including their responsibility to safeguard patient and other confidential information.

Orientation includes an overview of the hospital's mission and the PFAC mission. Members of the human resources department along with the hospital's compliance officer review personal and hospital safety topics as well as how to safeguard confidential information. An orientation booklet was created by the human resources department and includes: general information about South Shore Hospital; South Shore Hospital's mission, vision, and values statements; overview of the hospital's ASPECTS of Caring service excellence standards; the role of the patient advisor; patient rights and responsibilities; confidentiality, emergency and safety notification procedures; fire safety; and personal safety. In addition there is collaboration with the Patient and Family Centered Care Subcommittee to develop a plan for recruiting, orienting and on-boarding new associate advisors.

### **Training for Council members**

PFAC members are encouraged to attend educational programs available to hospital staff and volunteers.

To assure that Council members are comfortable with interviewing prospective leadership candidates, PFAC members participate in a behavioral interviewing educational program presented by the hospital's human resources department.

### **Council members' engagement across various South Shore Hospital initiatives**

There are several PFAC members actively participating on task forces and committees. PFAC members have been involved in the interview process of leadership positions at South Shore Hospital. In September 2010, several members of the PFAC were presenters at a leadership meeting where the philosophy of Patient and Family Centered Care was highlighted and leaders were asked to integrate the principles into the daily work of their departments.

### **Responsibilities of members of the Council in following South Shore Hospital policies**

PFAC members are expected to uphold the same standards and requirements as South Shore Hospital employees with regard to safeguarding confidential information. Included in the PFAC orientation materials is information about the applicability of HIPAA.

After completing the HIPAA education and reading the information, it is expected that the PFAC member would:

- Understand and follow South Shore Hospital's confidentiality standards.
- Report any violations of South Shore Hospital's confidentiality standards by calling the hospital's director of compliance.

## *VII. Council policies and procedures*

PFAC meets at least quarterly. Regular meetings are on the third Wednesday of each month from 6-8:30 p.m., unless otherwise decided, presuming the presence of a quorum.

Special meetings may be called by the Co-Chairs as necessary. Council members receive a minimum of 24 hours notice prior to a special meeting and are provided with an agenda.

### **Minutes of Council meetings**

PFAC meeting minutes are electronic and emailed to PFAC members after each meeting. The vice president of performance excellence is responsible for communicating PFAC accomplishments to South Shore Hospital's Board of Directors at least annually.

## *VIII. Support for the Council*

The Patient and Family Centered Care (PFCC) committee determined that PFAC should establish its own structure and policies. The PFCC committee recognizes, however, that the PFAC should have administrative and clerical support.

Members of the PFAC are instructed to park in the hospital's Cancer Center garage. Parking is free of charge.

**Council budget**

PFAC expenses are paid by South Shore Hospital, as part of the patient relations department's budget.

*IX. Achieving and maintaining Council success*

The PFAC continues to operate utilizing the approved by-laws.

**Reporting accomplishments of the Council**

Accomplishments are tracked through meeting minutes and reported at least annually to South Shore Hospital's Board of Directors. Accomplishments are tracked by the PFAC itself.

A self-assessment of the Council is completed during the months of November and December.

The results of this assessment assist with the ongoing growth and development of the council and its members.

*X. Council agendas*

The first PFAC Council meeting agenda was created by Sandra Geiger, vice president of performance excellence. The agenda consisted of an introduction to South Shore Hospital and overviews of clinical programs, medical staff and patient family centered care. There was also a presentation from a family advisor member of the Patient and Family Centered Care committee regarding his experience as a family advisor.

Items from the September 2011 agenda included:

**I. COUNCIL DEVELOPMENT & EDUCATION**

- Community Benefits Presentation – Peg Holda, vice president marketing/communications and community benefits officer
- Program Update – Rose DiPietro, vice president, clinical, outpatient and home care
- Membership Update – Walt Fraser

**II. SUBCOMMITTEE WORK TIME: 6:30 p.m. – 7:30 p.m.****III. PATIENT EXPERIENCE IMPROVEMENT**

- Subcommittee Update

**IV. PATIENT ADVISEMENT ADVANCEMENT**

- Subcommittee Update
- Active Patient AdviseMENT Updates – All

**IV. INFORMATIONAL/ADJOURN**

- Expansion Update – Joe Cahill
- Recommendations for Future Topics

**UPCOMING AGENDA ITEMS**

- *October* – Jim Green, Orthopedics
- *November* – Emergency Department
- *December* – Eugene Duffy, Program Manager Paramedic Services

**Agenda items for the upcoming Council meetings**

Agendas are currently in development for October, 2011 through September, 2012.