

**UMass Memorial Medical Center
Patient and Family Advisory Council**
Established March 2010

**Annual Report:
October 2012 – September 2013**

Web site: www.umassmemorial.org/pfac

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UMass Memorial Medical Center

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Purpose and Goal

Patient and Family Centered Care remains at the core of the Mission, Vision and Values of UMass Memorial Medical Center (UMMMC). The Patient and Family Advisory Council (PFAC) works as a true partner with the Medical Center to bring the patient voice and perspective to improve quality and patient safety, enhance services, enrich the overall patient and family experience, and foster a culture of care and caring at UMass Memorial.

The PFAC advises UMass Memorial on matters including, but not limited to:

- Patient and provider relationships
- Policies and procedures related to care and caring
- Quality improvement initiatives
- Patient education on safety and quality matters to the extent allowed by state and federal law

This year the PFAC identified two main priorities to help drive change within UMass Memorial; these were to work in partnership to create communication care standards and enhance facility cleanliness. The dedication of PFAC members, along with the Medical Center commitment to patient and family centered care, laid the foundation for the collaborative work to address these goals. In addition, the Patient and Family Advisory Council and the Children's Medical Center Family Advisory Council came together and participated in shared meetings to collaborate and share information. These and other initiatives are outlined in the "Engagement and Accomplishment" section of this report.

Membership

PFAC membership is comprised of current or former patients or family members who are at least 18 years of age, and UMass Memorial leaders and staff. Membership is reflective of users/providers from a variety of services (inpatient and ambulatory) and of the diverse populations served by the Medical Center.

The UMass Memorial Medical Center PFAC had its first meeting in March 2010. During the course of this year, the PFAC worked to achieve a staggered membership term. Some members reached the end of their term and new members were recruited. Recruitment efforts have increased by taken a multi-faceted approach in reaching out to the community (e.g. brochures, Facebook, internal communications, etc.) The charter stipulates that 50% of PFAC members be patients or family members; we have sustained a more than 50% patient/family member representation since inception. At the close of this year membership included eighteen patient or family members and eight Medical Center leaders or staff. The Medical Center membership includes: the Chief and Associate Chief Quality Officers, Chief Nursing Officer, the Director Patient Experience, a physician of the Medical Group, project coordinator from the Department of Quality and Patient Safety and administrative support.

Procedures regarding membership are outlined in the PFAC Charter which is reviewed annually, by both patients, families and staff members. It specifies conditions of membership regarding training, orientation, confidentiality, participation, and voting. Membership types include full voting membership and the non-voting Associate membership. Member terms are 2 to 3 years staggered to balance new ideas of incoming members and gain from the experience of existing members.

Monthly Council meetings were held on the fourth Tuesday on the month 6pm-8pm with the exception of December and August Each meeting had a quorum; minutes are on file and have been shared with the Clinical Performance Council (the governing body to which of the UMMMM PFAC reports).

In addition to the UMass Memorial Medical Center “over arching” Patient and Family Advisory Council, there are some local Patient/Parent & Family Advisory Councils representing specialty services and/or practice sites. These include: The Children’s

Medical Center Family Advisory Council, Neonatal Intensive Care Unit (NICU) Family Advisory Council, Pediatric Intensive Care Unit (PICU) Family Centered Care Committee, Barre Community Health Center Patient Advisory Council, Plumley Village Health Services Patient Advisory Council, and the newly established Psychiatric Patient Family Advisory Council. The Hahnemann Family Health Center Patient Advisory Council is in the process of implementation.

Council structure and membership is outlined below:

- **Children’s Medical Center Family Advisory Council** – encompasses all Children’s Medical Center disciplines.
 - Re-established in October 2011
 - Fourteen members: 7 Parent members and 4 Medical Center members
 - Meet 2nd Tuesday of the month 6pm-8pm
 - **NICU Family Advisory Council**
 - Established in December 2010
 - Ten members: 5 Parent members and 5 Medical Center members
 - Meet 2nd Wednesday of the month 7pm-8:30pm
 - **PICU Family Centered Care Committee**
 - Established in 2007
 - Nineteen members: 11 Parent members, 2 Teen members and 6 Medical Center members.
 - Meet first Wednesday of the month 6pm-7:30pm
 - **Barre Community Health Center Patient Advisory Council**
 - Established in March 2012
 - Twenty six members: 23 Patient/Family members and 3 Health Center members
 - Meet bi-monthly; 2nd Wednesday of the month 6pm-7:30pm
 - **Plumley Village Health Services Patient Advisory Council**
 - Established in October 2011
 - Twelve members: 8 Patient members and 4 Health Center members
 - Meet quarterly; evening meetings 1 ½ hours
- Psychiatric Patient Family Advisory Council
Established in October 2013

Each respective Council has a defined process for selecting Council members. General, considerations include:

- Types of UMass Memorial services the candidate/family member has used
- Specific areas of interest for improvement
- Unique skills of the candidate
- Perspective on key elements of patient and family-centered care
- Interest in serving on the PFAC
- Good listening skills and ability to listen to diverse opinions
- Respect of other's ideas and perspectives
- Ability to use own experience to educate and learn and to see beyond own experience
- Realistic expectations
- Diversity, representation of patients and families served by UMass Memorial

All council members must apply for and be approved as Medical Center volunteers through the Volunteer Office. Volunteer on-boarding includes initial and annual training related to:

- Infection control
- Safety and security
- HIPAA (Health Insurance Portability and Accountability Act) & confidentiality
- Emergency management
- Procedures regarding parking/ID badge

Governance

Each Council has its own governance. The UMass Memorial Medical Center PFAC has co-chairs; one is a patient/family member and the second is the Director of Patient Experience. A Project Coordinator from the Department of Quality and Patient Safety supports the co-chairs.

PFAC Member Engagement & Accomplishments

Collectively, our various Patient/Parent and Family Advisory Councils have partnered with the Medical Center to assess, review and strategize on how to improve the patient experience in the multifaceted spectrum of services within our health care system. Our

essential and valued patient/family member council members have rolled up their sleeves and worked in tandem with the Medical Center on patient centered care initiatives.

Patient/Family member council roles may include but are not limited to:

- Participation on committees, task forces, value streams, advisory boards;
- Review of publicly-reported quality and patient experience information;
- Participation on committees addressing patient safety;
- Participation on search committees and in the hiring of new hospital staff;
- Participation in reward and recognition programs;
- As co-trainers for clinical and non-clinical staff, in-service programs, and health professional trainees;
- Any other role in accordance with policies and procedures.

UMMMC PFAC Engagement & Accomplishments:

- **Health Care for All PFAC Conference:** Eleven PFAC patient/family members attended the annual HCFA conference and participated in the various workshops available. Three PFAC members were involved in the planning of the event. After the event all conference information was shared with all other PFAC members who were unable to attend.
- **PFAC Health Confidence Project:** One PFAC patient/family member joined the conference call in August hosted by Health Care for All. This call focused on discussing the development of tools to be used by patients to improve transitions in care and build a patient's level of confidence in caring for themselves.
- **Emergency Department Focus Group:** Four PFAC patient/family members participated in an Emergency Department focus group led by an ED physician and medical center staff. This group was aimed at evaluating and improving the initial experience of patients as they enter the Emergency Department.
- **“Human Interaction/Communication” Component Team:** Two PFAC patient/family members are active participants of this team. The purpose of the committee is to promote compassionate and respectful human interaction, encourage family presence, and implement strategies to improve communications that are easily understood by patients and families. The PFAC member has done formal presentations to the PFAC and Patient Experience Steering Committee regarding team progress, such as the implementation of a service recovery model at a pilot practice site. Our PFAC patient/family member co-chair has joined on facilitating Respond with H.E.A.R.T trainings for staff at all levels to enhance the patient experience through improved human interactions and communications.

- **Pathway/Signage:** Three PFAC patient/family members have continued to partner with Capital Planning to improve signage and pathways at the remaining two campuses in need of new improved signage.
- **Community Relations African Community Outreach/Education Assessment Team:** Two PFAC members expressed an interest in working with the Community Relations Dept. to educate the various immigrant African populations about health care in the US and how to access care. This workgroup involves these PFAC members, other community representatives and Medical Center staff to assess a possible initiative. This group is in the early stages of meeting.
- **Patient Partner Program:** Two PFAC members and four other patient partners participate in the “Patient Partner Program” that started in the fall of 2011. This program provides a patient-patient companionship and friendly visit that is a positive distraction to our inpatients. Patient partners provide comfort and conversation to help patients relax, raise their spirits and lend support during their healing process. They engage patients in conversations by listening to topics of interest, thereby providing positive distractions during the patient’s hospital stay.



- **“Ask Me” Greeter Program:** One PFAC patient/family member welcomes and assists visitors in one of our cardiac care units with directions and general information related to this unit. The “Ask Me” Greeter Program can now be found in the Emergency Departments at both the Memorial and University campuses with the goal of ensuring that patients waiting to be seen for ED services are comfortable. PFAC patient/family members were also involved in a training video aimed at orienting new greeters to the greeter role.
- **Lean - Process Improvements:** Two PFAC patient/family members recently attended a one-day white belt training aimed at introducing Lean methodology and tools used to improve processes.



- **Shhh: Silent Hospitals Help Healing:** One PFAC member is working with Medical Center Staff to assess “quiet at night” and implement initiatives to help promote a quieter, healing environment for our patients at night. Additional PFAC members and Children’s Medical Center Family Advisory Council members have participated in photo shoots to help augment this campaign.

- **Patient Education: Patient and Family Feedback:** Eleven PFAC members are working to help the hospital in evaluating newly developed, revised patient education materials. All contributions for patient education are made electronically allowing PFAC members another way to get involved.
- **PFAC and Children's Medical Center Family Advisory Council (CMC-FAC) Patient Experience Video:** Both the PFAC and CMC-FAC identified communication as an area of improvement for the Medical Center. The PFAC and CMC-FAC worked collaboratively to make a video that tells "their story" about their experiences (what went well & should be replicated, as well as, when things did not go well, what could have improved the experience). This powerful video will bring the patient-family voice to staff and engage staff to make the patient experience positive; underscoring that every interaction is meaningful. It will be used in a variety of educational and process improvement venues. This video is currently being used in our H.E.A.R.T trainings, aimed at improving the patient experience through human interactions and communication.
- **WooFood:** One PFAC member is working with the medical school and WooFood which is aimed at making healthy food options and choices easy for Worcester residents of all ages. This program was student-founded and is actively a student-led organization that has recently been co-chaired by one of our very own PFAC members.

Other non-PFAC Patient Centered initiatives involving patients at UMass Memorial:

- **Patient Experience Steering Committee:** Five patient/family members participate in this committee to provide both consultation and review of patient centered care progress and initiatives within the Medical Center.
- **Caring Talents Program:** One patient donates his time every two months to play classical guitar in lobbies or designated units. Several other volunteers also contribute their talents to this program. Music is a universal language that contributes to the healing environment for our patients, visitors and staff. This year art was added as a form of meditative therapy for our patients in the Oncology Infusion Center and on the Bone Marrow Transplant Unit.

Children's Medical Center Family Advisory Council (CMC-FAC) Engagement and Accomplishments:

- **Pediatric Menu Improvement Team:** Several CMC-FAC parent members worked with food services and nursing to enhance and improve inpatient Pediatric menu offerings and graphics. Seven day menu changes have been finalized and approved by the CMC-FAC.
- **Lily's Pad Design Committee:** One PFAC member worked with Capital Planning and Pediatrics to help design a waiting area for children that have compromised immune systems.
- **Staff Appreciation Initiative:** Several CMC-FAC parent members formed a subcommittee to look at a venue for CMC-FAC to recognize nurses from the varied units

(inpatient and ambulatory) within the Children's Medical Center at UMass Memorial. Members submitted some of their favorite photos, a vote was taken and the "winning photos" were enlarged, framed and will have recognition plaques affixed to present to the nursing staff to promote healing environments in their respective break rooms.

Neonatal Intensive Care Unit (NICU) Family Advisory Council Engagement and Accomplishments:

- During this past year the NICU Family Advisory Committee has been busy. In addition to hosting a Parents of Premies Day celebration complete with a catered lunch and scrapbooking project, shopping for and wrapping holiday gifts for the babies and their older siblings and having personalized picture frames at each baby's bedside on Mother's and Father's Day the committee has been hard at work on several other initiatives.
- **Fundraising:** This past year we were successful in creating a new fund, "Neonatal ICU Patient & Family Advisory Fund". This is an account established for the express purpose of funding items, programs and services that will directly and positively impact the babies and families stay in the unit. The committee is also working on filming a video appeal that will be used for fundraising purposes for the newly created fund. It will feature current NICU babies as well as graduates of all ages.
- **Parents of Premies Day:** This past March we hosted a celebration honoring the dedication and commitment it takes to be the parent of a premature baby. We had a catered lunch for the families and had a scrapbooking project that was very well received by the families and staff. It was a wonderful event and we plan to make it an annual event.
- **Family Walk Rounds:** We instituted a new program called, "Family Walk Rounds". A family member from the committee comes to the NICU, tours around the unit with a staff representative from the committee and looks at the unit with fresh eyes. The staff is here day in and day out and is looking at it from a different perspective. It is great to have a family really look objectively at the unit and give honest feedback as to what we are doing well and how we can improve. Some ideas generated from the rounds include a sign over our doorbell and adding additional coat hooks outside the pods.
- **Negotiating Parking Fees:** Many of our families were negatively impacted by the changes made to the parking pass program. Parents had to limit their visiting due to the higher parking costs. The committee found this unacceptable. The committee drafted a letter to the hospital administration and was successful in negotiating free parking for families that are in the unit for more than 40 days.
- **Kangaroo Care Brochure:** The Kangaroo Care brochure we created last year was approved, printed and put into circulation. Due to the committee's efforts to empower NICU parents to ask for Kangaroo Care time there has been an increase in the practice within the unit.

- **Growing the NICU FAC:** As our committee finishes up its third year, families and staff members have fulfilled their time commitments we have experienced some recent turnover. We continue to find creative ways of growing the membership of our committee. We have posted a recruitment link on the UMASS Child Life Department's Facebook page and we are hoping to do the same with the general UMASS Facebook page. We drafted a recruitment letter and have passed it out at the March of Dimes walk and other events involving graduate families. We are also piloting a program of giving a gift bag out to families that come back to visit the unit. It includes a growth chart, board book and other fun items. We have also put in a recruitment pack. If this initiative works out and we generate new FAC members we will coordinate it on a larger scale.

Pediatric Intensive Care Unit (PICU) Family Centered Care Engagement and Accomplishments:

- **Parent/Guardian Access:** swipe card that allows them access back into the unit without phoning in.
- **"Drew View" Cameras:** installed in PICU. Three were purchased through a family donation, whose son had passed in the PICU. The cameras are similar to the NICU which allow family to see their child when they can't be at the bedside.
- **PICU Renovations:** Input from committee on PICU FAC parents \$200,000 renovation project which is in process now.
- **Pediatric Menu Improvement Team:** Several PICU FAC parent members worked with food services and nursing to enhance and improve inpatient Pediatric menu offerings and graphics. New menu includes healthy and cultural choices.
- **PICU Thank-You Notes:** One PICU FAC parent requested a template for thank you notes that are sent out to community people who donate items to the PICU. Donations have included tooth brushes and toothpaste, blankets, journals and personal care items for parents/guardians.
- **Ronald McDonald Room:** One PICU FAC parent became a volunteer for the Ronald MacDonald room,
- **PICU FAC Recruitment:** Several new parent members were on-boarded this year.
- **PICU Mission Statement:** reviewed and approved by all PICU FAC parent and staff members.
- **Family Centered Care Needs Assessment Questionnaire:** The entire PICU FAC was involved in developing this questionnaire aimed at...
- **PICU FAC Access:** PICU FAC parent members are now able to call-into meetings if they are unable to be there in-person, allowing parent members to engage in monthly meetings.

Barre Community Health Center Patient Advisory Council Engagement and Accomplishments:

- **National Committee for Quality Assurance, Patient Centered Medical Home:** As part of our PCMH/NCQA Level 3 certification, we have developed a very dynamic and engaged group of patients, staff and providers, which make up the Patient Advisory Council (PAC), lead by Cynthia Jeremiah, M.D. and Alice LeBlanc, our Clinical Care Manager at the BFHC. In a short time, we have been able to make several improvements with our processes and workflow initiatives that centered on our telephones and registration areas. Our continued focus on better communication in the health center and throughout the local community has led us to another project. The group is excited about writing their first informational column in the Barre Gazette, which will help inform the community about work being done by the group.



- **New Patient Informational Packets:** We are still in the development stages of our new patient packets that will notify newcomers about the Barre Family Health Center and our next project is looking toward forming an Alzheimer's support group for families and caregivers.
- **Volunteers:** Our volunteers that work at the information desk have been a wonderful addition to the "hometown" feeling we have here in Barre! Their smiling faces provide the greeting we want our patients and guests to receive when they arrive at our facility!

Plumley Village Health Services Patient Advisory Council Engagement and Accomplishments:

- **PVHS Newsletter Health up to date:** In September of 2012 the Plumley PFAC decided that a newsletter should be developed as a communication tool for the clinic to both improve patients' health knowledge and increase attendance at wellness and educational events. One member had prior experience in publishing and graphics and volunteered to do all the layout and graphics. Other members suggested topics to staff for the various issues including a clinic calendar of events and wellness programs, health information, recipes, "spotlight" or introduction of clinic staff, and explanation of clinic procedures. The newsletter has evolved into a quarterly color publication in both English and Spanish which is handed out in the clinic.

- **Outreach and Wellness Programs:** Patient members worked with staff to identify needed program/materials/services. Outcomes included: two Cooking Matters courses (6 week series of classes focused on cooking healthy at a low cost.); Nutrition education for children through nutritionist and 5210 Lets Go program; Healthy Heart Program; Women's Group; Exercise groups.
- **Plumley Village Health Fair:** Six patient members helped plan and participated in the Plumley Village Health Fair.
- **Narcotics Policy:** PFAC members provided feedback about the proposed new process and made suggestions to improve

Evaluation

Formally and informally, PFAC members are periodically asked to evaluate the effectiveness of meetings and appropriateness of agenda items.

To view the **Patient and Family Advisory Council charter**, click below to be redirected to the UMass Memorial Medical Center's Patient and Family Advisory Council website.

<http://www.umassmemorial.org/quality-and-safety/patient-and-family-advisory-council>

The **Patient and Family Advisory Council** and the **Children's Medical Center Family Advisory Council** both were in attendance at this year's Health Care for All PFAC conference; the posters below were showcased at the event in recognizing some recent accomplishments.

The UMass Memorial Patient and Family Advisory Council (PFAC) seeks to foster a culture of care and caring where patients are nurtured in body, mind and spirit.

Positive Process Improvements using Lean

- Problem/Issue: Inefficiency in various workflows throughout the hospital system, and how they affect the patient experience, and the staff.
- Aim/Goal: Eliminate wasted/duplicated efforts; improve efficiency allowing staff more time with patients.
- Intervention: Provide a patient's perspective in various process improvement projects and work-groups throughout the hospital system.
- Lessons Learned: By involving representatives of all those involved in and affected by the workflows at issue including the patients, meaningful improvements can be achieved.
- Next Steps: Continued involvement at this level of process improvement.

"Having everyone in the room (including the patient's perspective), and having the dialog with everyone's input, led to some real breakthroughs in improved efficiency." – PFAC Member

Patient Partner Program

- Problem/Issue: Patients often lack an opportunity to talk with staff about topics important to them, besides why they are in hospital. These conversations provide opportunity for them to talk with someone about family, hobbies, current events, history, etc.
- Aim/Goal: Provide comfort and conversation to help patients relax, raise their spirits and lend support during their healing process.
- Intervention: Engage patients in conversation by listening to topics of interest, thereby providing positive distraction during their hospital stay. Serve as a liaison to staff, helping to minimize non-clinical questions from patients. Serve in an advocacy role, by answering questions and providing non-medical information/education. Provide support to visiting family members as appropriate.

"This program provides intrinsic rewards to the Patient Partner volunteer. It truly is a pleasure to see a patient respond with humor and enjoyment during a visit." – PFAC Member

Human Interactions & Communications Video

- Problem/Issues: Address the need to improve in patient centered care and increase sensitivity to patients needs
- Aim/Goal: Sensitize healthcare providers and staff of the hospital to the feelings and needs of the patients and families
- Intervention: PFAC members participated in video to share their hospital experiences
- Results: People shared how they felt. They were honest and very informative
- Lessons Learned: People like to be treated with respect and empathy
- Next Steps: Use the video for training of new employees

"We believe that when employees and health care providers see this video they will better understand the patients' feelings and will respond in a caring way." – PFAC Member

"Ask Me" Greeter Program

- Problem/Issue: Patients and visitors entering the hospital had difficulty knowing where to go for appointments, etc.
- Aim/Goal: To provide directions for patients and visitors regarding their destination, in a simple and straight-forward manner.
- Intervention: Walking patients and visitors where they needed to go because it was very noticeable to that they were feeling very lost and a bit overwhelmed as to where to go.
- Results: Patients and visitors were very appreciative and were grateful to have someone to guide them where they needed to go.
- Next Steps: The "Ask Me" greeter continues to provide excellent acknowledgement and carry-through in assisting with the directional needs of the patients and visitors who enter the hospital and needing such assistance.

"For me, being a Greeter for "Ask Me" provided me the opportunity to reach out and help patients and visitors locate their destination within the hospital, doing so in an open and welcoming manner. They responded to this very well!" – PFAC Member

**UMass Memorial Medical Center
Patient and Family Advisory Council**
For more information, email us at PFAC@umassmemorial.org

**UMass Memorial
Children's Medical Center**

We value integrity, respect, diversity, collegiality, and lifelong learning as the basis for accomplishing our mission.

Family Education Boards

- The CMC FAC worked with the Pediatric Primary Care staff to revise the family education boards located in each exam room. Below are key ideas contributed by the Family Advisory Council. FAC brought many suggestions including a standard font as well as specific information that should be clarified for parents and families.
- One helpful suggestion was to create seasonal information sheets such as, handouts about ticks and Lyme disease in the summer.
- Form holders were installed in each of the exam rooms to hold the education handouts, allowing parents and families to read/take what education they need.

"I can honestly say the boards look very different than planned – staff and providers are very excited about the finished product – and we are grateful for the CMC FAC involvement in the process!" – CMC Staff Member

Pediatric Menus

- The CMC FAC worked with the Medical Center's Food and Nutrition Services to create a child friendly menu that increased food options and offered more flexibility for pediatric patients.
- Accomplished through cooperation and open communication between members of the Family Advisory Council and Food and Nutrition Services.
- Parents and families of the CMC FAC, consulted with their children for additional ideas.
- The CMC FAC gained recognition for their help in the re-design on the new menu.

"I was particularly impressed by the cooperation and willingness to produce this menu change in order to improve the experience for our pediatric patients and their families." – FAC Parent

Nurse Recognition Photos

- CMC FAC members submitted their own photographs and ultimately selected five to frame and present to the nursing staff on each of the patient care areas to express appreciation.
- Relatively simple/easy to accomplish project, with big impact.
- Photos were framed and presented with a plaque and a hand written card.
- Photos also help in providing a healing environment.
- Photos can be enjoyed by all shifts in each unit and have a lasting impact.
- The photographers (members of the FAC) were honored to have their photos chosen and included in this project; it was a positive experience in both directions.
- Response has been very positive, and even somewhat surprisingly so. The staff in the units were grateful and felt proud to be appreciated.

"This had even better results than we had anticipated." – FAC Parent

**Children's Medical Center
Family Advisory Council**
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