

## Patient and Family Advisory Council

Monday April 16, 2018 ~ 3:00pm – 5:00pm

Dofasco Boardroom

### MINUTES

	Sept 18/17	Oct 16/17	Nov 20/17	Jan 15/18	Feb 26/18	Mar 19/18	April 16/18	May 28/18	June 18/18
Bernice King (Co-Chair)									
Gary Halyk					X				
Jennifer Armstrong					X				
Louise Dore					X				
Michael Slusarenko							X		
Victoria Reiding	X	X	X				X		
Cindy Machida									
Jane Ross			X		X				
Helene Hamilton		X				X			
Anna DiTiberio									
Gloria Wade									
Laura Van Landschoot			X			X			
W. Doyle (Co-Chair) (VP, Patient Services & Chief Nursing Executive)			X		X		X		
P. Valvasori (Manager Patient Relations and Medical Affairs)		X		X		X	X		
L. Volman (Director of Nursing Practice, Mental Health & Addiction)			X		X				
F. Wilson (Manager, Patient & Family Collaborative Support Services)	X	X	X		X	X			
N. Debeau (Occupational Therapist, Forensic Psychiatry Program)			X						
B. Cowell (Manager, Hemodialysis)			X		X				
M. Joyner (Director, Quality Department)									
J. Williams (Resource)									

**X = Regrets**

 = Not a current member

#### Guests:

Ray Rocci - Member of the SJHH Joint Board of Governors

Dianne Husbands – Manager Pre-Operative Clinic, West 5th

Julie Holmes – Director, Ambulatory Services, King

John Woods – Vice-President Strategic Initiatives, St. Joseph's Health System

#### Abbreviation List:

PFAC = Patient and Family Advisory Council

PFA = Patient and Family Advisor

SJHH = St. Joseph's Healthcare Hamilton

GIM = General Internal Medicine

Item	Discussion
<b>1.0 Introduction of New Members</b>	B. King welcomed guests to the council. (See guest list above).
<b>Approval of Agenda</b>	<b>The agenda was approved.</b>
<b>Approval of Minutes</b>	<b>The minutes of the March 19th meeting were approved as amended.</b>
<b>Announcements</b>	<ul style="list-style-type: none"> <li>• Inclement Weather/Meeting Cancellation               <ul style="list-style-type: none"> <li>• PFA's discussed the issues around inclement weather and meeting cancellations</li> <li>• In future, all meeting cancellation notices to be sent out prior to 12pm the day of the meeting at the latest</li> </ul> </li> </ul>

Item	Discussion
	<ul style="list-style-type: none"> <li>• During inclement weather, the meeting may be held by teleconference based on the priority of agenda items</li> <li>• Around the Bay 2019 <ul style="list-style-type: none"> <li>• PFA's who would like to participate in the Around the Bay 2019 were asked to hold March 31<sup>st</sup> in their calendars</li> </ul> </li> <li>• May PFAC meeting <ul style="list-style-type: none"> <li>• The Monday May 28<sup>th</sup> PFAC meeting will be cancelled due the Patient &amp; Family Advisor event being held on Tuesday May 29<sup>th</sup> from 12-4pm at the West 5<sup>th</sup> Campus</li> </ul> </li> <li>• Membership changes <ul style="list-style-type: none"> <li>• B. Cowell will no longer be attending PFAC as the representative from the Nurse Managers Council</li> <li>• K. Baguley, manager of the head and neck unit, will be attending PFAC meetings as of June 2018</li> </ul> </li> </ul>
<p><b>2.0 Pre-Op Clinic Update</b></p>	<p>D. Husbands &amp; J. Holmes presented work they have implemented to Improve the Patient Experience at the Pre-Operative Clinic</p> <p>Highlights from the presentation:</p> <ul style="list-style-type: none"> <li>• Many improvements have been implemented at the Pre-Op clinic that were contributing factors impacting clinic flow:</li> <li>• A patient survey was used to assess the patient experience post-Dovetale implementation <ul style="list-style-type: none"> <li>• Objective: Determine the current patient journey time and assess patient satisfaction on factors impacting clinic flow</li> <li>• The "patient journey" is defined as the total time between when the patient first enters the clinic (prior to registration) and when a patient leaves the clinic (after attending all scheduled appointments)</li> <li>• 184 patients participated in the study and one of the patients volunteered to collaborate with the clinic team</li> </ul> </li> <li>• Information regarding clinic flow will be collected on a continuing basis to improve the patient experience which includes: <ul style="list-style-type: none"> <li>• Tracking daily results; staff in clinic, types of patients, same day appointment add-ons, time the clinic is completed</li> <li>• Monitoring the wait room and sending patients for bloodwork or x-rays earlier</li> <li>• Continuing to work with the Volunteer Resource department</li> </ul> </li> <li>• Next Steps <ul style="list-style-type: none"> <li>• Optimize scheduling through Dovetale</li> <li>• Requested information to be generated through the reporting function from Dovetale</li> </ul> </li> </ul> <p><b>Q: The percentage regarding improved way finding was 89.4% based on 4.47. How is this result determined?</b></p> <p>A: 4.47 represents the response score of 1 to 5, that the patient allocates to the question being asked, with the number 1 being a low score and the number 5 being high score. The results of 4.47 translates to a percentage of 89.4 based on the 184 patient survey sample size.</p> <p><b>Q: When you call a patient to remind them of their appointment, do you leave a voice mail with all of the appointment details?</b></p> <p>A: Due to confidentiality, we are only able to leave a basic message with a number for the patient to call back in order to receive all of their appointment details. If we do not hear back from the patient, the appointment information is sent to the surgeon who will follow up with the patient.</p>

Item	Discussion
	<p><b>Q: Was there a decrease in the quality of patient care based on the improvements made to the patient wait time?</b></p> <p>A: The average patient journey in February 2018 was 1 hour and 38 minutes. This is a 6 minute improvement since December 2017. The quality of patient care was not affected. We feel that that with the implementation of Dovetale, patient information for the physician to review is more accessible and has reduced the amount of time the physician would take to find the information required for the patient appointment. Dovetale also requires specific fields to be completed by the physicians, which prompts them to ask patients the right questions about their medical condition. If the patient arrives prior to their appointment time we have two clinic clerks available to register the patient immediately. We have a volunteer who greets the patient, checks that they have their patient information package with them and directs them to the registration desk. We group by patient types on specific appointment days and are mindful about scheduling appointments near the end of the clinic day.</p>
<p><b>3.0 Strategic Planning Process</b></p>	<p>J. Woods presented on the Strategic Planning process.</p> <p>Highlights from the presentation:</p> <ul style="list-style-type: none"> <li>• In 2017, the strategic planning working group met with approximately 150 staff, volunteers, patient &amp; families to determine what is important to have in our strategic plan</li> <li>• These working groups indicated that the 3 areas of focus would include; Compassionate Care, Our People and Research &amp; Innovation</li> <li>• What is important for this plan: <ul style="list-style-type: none"> <li>• Plan must touch the hearts of our workforce</li> <li>• Incorporate storytelling and be relatable</li> <li>• Show Catholic values in creative/inclusive ways</li> <li>• Need to know what we stand for – have an “inspiring message”</li> <li>• Reflect the real work we are doing</li> <li>• Must have results/metrics</li> </ul> </li> <li>• A process advisory group will be established to continue the work on developing the strategic plan</li> <li>• J. Woods gathered feedback, comments and answered questions from PFAC: <ul style="list-style-type: none"> <li>• Disconnect between our mission and our staff/advisor experience</li> <li>• Mission vision vague – are we living the plan or are we living our vision</li> <li>• Patient &amp; Families have to be incorporated into the plan</li> <li>• Patient engagement has to take place at the front line</li> <li>• Look at the community perspective, where does St. Joe’s fit and what is our role</li> <li>• How do we put the compassionate care into practice</li> <li>• How do we get patient &amp; families involved in research initiatives</li> <li>• How do involve patient &amp; families into the technology vision</li> </ul> </li> <li>• J. Woods gathered feedback from the proposed question to the group “What does Communication mean to you?” <ul style="list-style-type: none"> <li>• Staff need to be able to answer what is patient engagement and what is the Patient &amp; Family Advisory Council</li> <li>• Partnership between patients and clinicians</li> <li>• What to do when there is a breakdown in communication among staff patients and families</li> <li>• Patient &amp; families are becoming much more educated in their care and empowered by voicing their concerns. This will lead to better patient care and help to build a stronger relationship between staff, patients &amp; families</li> <li>• Use of unit communication boards is a great step forward</li> <li>• Connecting compassionate care with the reality of what is taking place on the unit level and at the front line</li> </ul> </li> </ul>

Item	Discussion
	<p><b>ACTION:</b> J. Woods to provide an update on the strategic planning process to PFAC on a regular basis starting in Fall of 2018</p>
<p><b>4.0 Committee Updates</b></p>	<p><b>Emergency Department (ED) Quality Council</b></p> <ul style="list-style-type: none"> <li>• G. Halyk provided an update from the ED Quality Council</li> <li>• An extensive list of standing agenda items are discussed at every quality council meeting</li> <li>• Some of these items include; Patient flow results, patient safety and quality improvement initiatives, mission stories, program updates, policy review, results from quality of care reviews, nursing priorities</li> </ul> <p><b>Nursing Advisory Council</b></p> <ul style="list-style-type: none"> <li>• National Nursing week is taking place from May 7 – 11, 2018</li> <li>• B. King, J. Ross, C. Machida are attending on behalf of PFAC and NAC</li> <li>• Nurses are establishing projects to align with the strategic plan</li> </ul> <p><b>GIM Geographical bed mapping</b></p> <ul style="list-style-type: none"> <li>• Sub-committees have been established to work on the geographical bed mapping planning</li> </ul> <p><b>MHAP Family Advisory Council</b></p> <ul style="list-style-type: none"> <li>• G. Wade provided an update from the MHAP Family Advisory Council</li> <li>• The chief privacy officer presented on patient/family consent</li> <li>• Family information booklet is being published</li> <li>• The Families matter event will be held on May 3<sup>rd</sup> for everyone to attend</li> </ul> <p><b>Orientation Committee</b></p> <ul style="list-style-type: none"> <li>• C. Machida provided an update from the Orientation Committee</li> <li>• A 90 minute presentation on patient engagement will be presented to staff at the new staff hospital orientation</li> <li>• The intent is to have this established by the May 2018 staff orientation</li> <li>• A patient/family advisor will tell a story at each orientation session based on lived experience</li> <li>• In future, the committee would like to provide an education session to existing staff on every hospital unit</li> </ul> <p><b>Peer Advisory Council</b></p> <ul style="list-style-type: none"> <li>• J. Armstrong provided an update from the Peer Advisory Council</li> <li>• A sub-committee has been established to work on anti-bullying</li> <li>• A BBQ event is taking place in the summer to provide awareness to staff on bullying</li> </ul> <p><b>Additional updates</b></p> <ul style="list-style-type: none"> <li>• On April 6<sup>th</sup> a presentation was given to the Kidney donors and recipients at King Campus which was very informative and well attended</li> </ul> <p><b>Falls Prevention Steering Committee</b></p> <ul style="list-style-type: none"> <li>• There were no updates at this time.</li> </ul> <p><b>Communication Working Group</b></p> <ul style="list-style-type: none"> <li>• There were no updates at this time.</li> </ul>
<p><b>4.0 Patient Engagement Plan</b></p>	<p>M. Joyner presented on the Patient Engagement Plan</p> <p>Highlights from the presentation:</p> <ul style="list-style-type: none"> <li>• The plan was developed in collaboration with staff and Patient &amp; Family Advisors and also informed by feedback received from a number of forums. The following corporate areas of focus were established:</li> </ul>

Item	Discussion
	<ul style="list-style-type: none"> <li>• Patient &amp; family Advisor Recruitment, Orientation and on-going support</li> <li>• Communication between staff, patients/families</li> <li>• Family involvement in care planning at all points of changes in patient condition and planning</li> <li>• Enhance process for patients and families to voice concerns/suggestions with support and no retaliation</li> <li>• Staff culture</li> </ul> <p><b>ACTION:</b> M. Joyner to provide results from the 2016 Patient Experience Culture Survey (St. Joe's staff) when presenting results from 2018</p>
<b>5.0 Meeting Evaluation</b>	<ul style="list-style-type: none"> <li>• Distributed</li> </ul>
<b>Date &amp; Time of Next Meeting</b>	Monday June 19, 2018 3:00pm – 5:00pm Dofasco Boardroom