

Patient and Family Advisory Council

Monday February 26, 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									
Victoria Reiding	X	X	X						
Cindy Machida									
Jane Ross			X		X				
Helene Hamilton		X							
Anna DiTiberio									
Gloria Wade									
Laura Van Landschoot			X						
W. Doyle (Co-Chair) (VP, Patient Services & Chief Nursing Executive)			X		X				
P. Valvasori (Manager Patient Relations and Medical Affairs)		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				
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:

Fred Burke -Community Member of the Quality Committee of the Joint Board of Governors

Valentina Constantinescu – Quality Consultant, SJHH

Abbreviation List:

PFAC = Patient and Family Advisory Council

PFA = Patient and Family Advisor

SJHH = St. Joseph's Healthcare Hamilton

Item	Discussion
1.0 Introduction of New Members	B. King welcomed guests to the council. (See guest list above).
Approval of Agenda	The agenda was approved.
Approval of Minutes	The minutes of the January 22nd meeting were approved as amended.
Announcements	<ul style="list-style-type: none"> • HQO Questionnaire <ul style="list-style-type: none"> • An announcement from Health Quality Ontario (HQO) was posted on the Patient Advisor Portal regarding transitions in care • HQO wants to hear from patients and caregivers about their experience transitioning from hospital to home • Feedback will inform health care quality initiatives across Ontario about how to better support patients as they recover at home after a hospital stay

Item	Discussion
	<ul style="list-style-type: none"> • Follow-up from G. Halyk's Feedback <ul style="list-style-type: none"> • M. Joyner provided an update on items addressed from G. Halyk's presentation • M. Joyner and staff from Redevelopment and Volunteer Resources discussed the idea on having a volunteer greeter at the hospital entrance • M. Joyner reviewed the prospect of having wheelchairs closer to the door by the Tim Hortons Charlton lobby entrance with the Portering manager • Several logistical issues contribute in having wheelchairs situated at this location • More data and consistent reporting will need to take place to determine the best solution to resolve the issue
2.0 Advisor Recruitment	<p>V. Constantinescu provided an update on Advisor Recruitment</p> <ul style="list-style-type: none"> • V. Constantinescu provided an update on progress made in 2017 on patient & family advisor recruitment and work completed • Highlights from 2017: <ul style="list-style-type: none"> • There were 48 advisors across SJHH, 7 newly recruited advisors and 3 advisors resigned • Advisors have been a part of 6 committees, 12 working groups and 7 group consultations • We held 3 advisor orientation sessions collaboratively with Volunteer Resources • We have supported advisors by developing an orientation program and enhancing the recruitment process • We have been able to improve communication among advisors by: <ul style="list-style-type: none"> • Holding a number of patient & family advisor events • Creating a patient & family advisor portal • Updating the patient engagement section on the external Stjoes.ca website • Reviewing different platforms to assist with interactive communication among advisors • Next Steps & Future Goals: <ul style="list-style-type: none"> • Introduce a mentorship program for advisors to improve their role and enhance the patient advisor experience • Establish an evaluation process for advisors • Bi-monthly meetings with staff representation from West 5th, Charlton and Volunteer Resources to update each other on progress & processes to date • An orientation session for new advisors will be scheduled for April 2018 <p>Q: What approaches have you used to recruit new advisors? A: We have used numerous approaches to recruit new advisors. We advertise through our St. Joe's Facebook page and on St. Joe's twitter; announcements have been posted on our St. Joe's website and through local community organizations. We reached out to the aboriginal and francophone groups in the community to promote recruitment. We participated in a few of their meetings to outline St. Joe's patient engagement vision and plan. As of January 2018, we currently have 45 active advisors and our aim is to recruit 10 advisors by April 2018.</p> <p>Q: What happens after an advisor has completed their term on a committee, working group or consultation? A: We are currently working on a process to evaluate the work after an advisor has completed their term on a committee, working group or consultation. The evaluation will be for both advisors and the staff leads to complete.</p> <p>Q: What kind of formal feedback mechanisms do you have in place to evaluate initiatives? How do you know you are making progress on these initiatives? A: It is difficult to measure the impact that an advisor has on the initiatives that arise from a committee, working group or consultation. In April 2018, we will have a formal evaluation process in place to measure the advisor experience based on feedback we receive.</p>

Item	Discussion
	<p>Q: How do you benchmark yourself against other healthcare organizations and are there learnings to development from?</p> <p>A: At this time, we do not have a benchmark to compare to and there is a lack of formal evaluation in the literature. Patient Advisors and staff are able to learn about patient engagement at national conferences, organizational events, and from each other. Many efforts have been made to formalize the patient engagement experience at the Provincial and LHIN levels.</p>
<p>3.0 Interactive Communication Option</p>	<p>V. Constantinescu presented an interactive communication option for advisors</p> <ul style="list-style-type: none"> • V. Constantinescu presented the Facebook platform as an interactive communication option for patient & family advisors • Facebook is an easier platform to manage; it is a free resource; provides better security features and allows for group interaction • A Facebook page could be created for the Patient & Family Advisors at St. Joe’s • On the Facebook page, a secret group will be created • A Facebook secret group allows members to have direct conversations with each other through Facebook messenger and share content with the entire group through Facebook posts • Facebook secret group posts are seen by group members only • Advisors are invited to join the secret group by the Facebook administrator (St. Joe’s staff member) <ul style="list-style-type: none"> • Feedback from PFAC on having Facebook as an interactive communication option: <ul style="list-style-type: none"> • It will reach the largest amount of patient and family advisors and is easily accessible • Allows for group interaction vs other platforms (ex. Snapchat & Instagram) • A few advisors mentioned that they would be more open to using Facebook with the secret group option <p>Q: What are the alternatives if you do not want to use Facebook as a communication tool?</p> <p>A: There are many alternatives available for advisors who do not want to use Facebook. We will continue to post information on the patient & family advisor portal and the St. Joe’s website. Advisors will be able to learn about our achievements, work to date, future goals and opportunities from our semi-annual events, one on one conversations and by communicating and learning from each other.</p>
<p>4.0 Committee Updates</p>	<p>Communication working group</p> <ul style="list-style-type: none"> • A Patient & Family Advisor event will be held on Tuesday May 29th at the West 5th campus and a hold the date email will be sent in the near future • Brainstormed and discussed topics for the May 29th event • Reviewed the different options for an advisor interactive communication platform • The Patient & Family Advisor evaluation survey were sent out on February 16th <p>GIM Geographical bed mapping</p> <ul style="list-style-type: none"> • H. Hamilton provided an update on the GIM Geographical bed mapping project • Meetings are held on a regular basis and planning for the project is set for late summer/early fall <ul style="list-style-type: none"> • GIM program is challenged geographically when there is an increase in overall volume of patients, there is very limited space located within the units to accommodate additional patients, meaning that GIM patients are located in a geographically removed location from other GIM patients or sent to off-service beds within other programs • The current challenge is determining which scenario to plan for. The option is to try each scenario virtually and compare results. <p>Q: Have resources been allocated for patient care in regards to the additional number of beds?</p> <p>A: In the fall of 2017, we hired a number of nursing staff who were allocated for patient care and to help alleviate the pressures from the additional number of beds open. This is a provincial</p>

Item	Discussion
	<p>phenomenon that hardly ever occurs.</p> <p>Focus Group – Risk, Legal, Corporate Affairs</p> <ul style="list-style-type: none"> • Several advisors participated in a focus group held by the Risk, Legal, Corporate Affairs department • During the focus group advisors reviewed the current process for safety incidents and disclosure or how we talk to patients and families after a safety incident happens • The purpose of the focus group was to obtain input regarding their involvement and needs relating to incident reporting and disclosure <p>Falls Prevention Steering Committee & Suicide Prevention Committee</p> <ul style="list-style-type: none"> • There were no updates at this time. <p>Nursing Advisory Council, Peer Advisory Council</p> <ul style="list-style-type: none"> • Deferred
<p>5.0 New Quality Improvement Plan 2018/19</p>	<p>M. Joyner shared an update on the New Quality Improvement Plan 2018-2019 for St. Joseph’s Healthcare</p> <p>ACTION: Presentation on the after visit summary is included on the March PFAC meeting agenda</p>
<p>6.0 Quality Improvement Plan 2017/18 Update</p>	<p>M. Joyner presented the Quality Improvement Plan (QIP) 2017/2018 Quarter 3 Update</p> <ul style="list-style-type: none"> • M. Joyner shared the Quality Improvement Plan for 2017/18 for Quarter 3. • The 4 hospital Patient Safety Priorities are: <ul style="list-style-type: none"> • Improve Medication Safety – Full implementation of medication reconciliation by 2018 • Reduce Infection – Early Warning system to detect a change in a patient’s condition to help early intervention of reducing infection • Improve Transition – Improve patient transition points from unit to unit or from unit to community • Improve Access – Reducing wait times in the outpatient Mental Health area • M. Joyner addressed PFA’s questions, comments and concerns: <ul style="list-style-type: none"> • Implementation of Safewards has been successfully rolled out on all 15 mental health units and a sustainability plan will be included in staff job postings and staff orientation to help promote this initiative into our daily work • Processes are place on reducing the number of incidents of aggression towards staff, to to determine why they happen and to reduce the number of incidents that lead to injury • Staff are trained on caring for patients with responsive behaviours such as dementia • A good sample size of surveys were sent out to obtain the 86% patient satisfaction target <p>ACTION:</p> <ul style="list-style-type: none"> • A presentation on incident reporting including medication safety to be added to the work plan • M. Joyner to bring back information on the different patient populations that contribute to the number of patients readmitted within 30 days on the May agenda • M. Joyner to bring back information on the hospital standardized mortality ratio at an upcoming meeting
<p>7.0 Meeting Evaluation</p>	<ul style="list-style-type: none"> • Distributed
<p>8.0 Date & Time of Next Meeting</p>	<p>Monday March 19, 2018 3:00pm – 5:00pm Dofasco Boardroom</p>