

RVH Patient & Family Advisory Council Annual Report

2017



PFAC Members



Left to right, front row: Irene Rekowski, Barb Carriere, Carol-Ann Simson, Chris Ferguson, Candice Dick, Mary McGrath. Back row: Garry Warren, Stephen Lyons, Gary McFarlane, Kathy Berry, Bonnie Nolan. Missing: Jo-Anna Damm.

PFAC member statements



I was pleased to be asked to be on this committee and I have been a healthcare provider all my life. I am also a caregiver and support for my husband who has been in RVH since September 2015. I am very interested in patient care and our hospital and hope I can be of some benefit.

I enjoy the topics brought forward to us and I enjoy the contribution and varied experiences of my fellow committee members.

-Carol Ann Simson



I joined PFAC to help support the great work of the Renfrew Victoria Hospital in gratitude for the support and care that was provided to my mother during her 8-month stay on the 3rd floor.

I enjoy knowing that we are contributing to ongoing improvements in the care of

patients and their families.

Seeing the new hospital ID tags and the 24-hour visiting policy put into practice was great.

—Mary McGrath





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Renfrew Victoria Hospital Patient and Family Advisory Council (RVHPFAC)

Mandate

As experts in patient and family experiences, patients are in the position to provide recommendations on improving the planning, delivery and evaluation of care services within the framework of Patient and Family Centred Care. The RVH Patient and Family Advisory Council (RVHPFAC) is dedicated to enhancing care providers' understanding of the needs of patients and family members who use their services with the goal of helping provide an exemplary patient experience.

Responsibilities

Advisory Council Members will be consulted and involved in matters where the input of patients and their families is valued. The range of matters will include, but is not limited to the following topics:

- A. Provide the perspective of patients and their supporters on the planning, delivery and evaluation of care at RVH.
- B. Contribute to the understanding and improvement of the patient and family experience.
- C. Assist in reviewing and providing feedback on patient satisfaction.
- D. Promote improved partnerships between patients, families, staff and physicians.
- E. Provide input on policy and program development which impact service delivery for patients and families.

- F. Provide recommendations on the identification of healthcare needs and gaps.
- G. Participate in education regarding Patient and Family Centred Care.
- H. Provide an opportunity for care providers to recommend changes that improve Patient and Family Centred Care.

Patient and Family Advisory Member Role Description

RVH and the Patient and Family Advisory Council uphold the values of quality, dignity and respect, patient focus, patient safety, leadership, and responsiveness and adaptability. It is committed to Patient and Family Centred Care that respects the role of patients and families. Patient and Family Members are a critical part of our healthcare team, being experts on the experience of disease, just as healthcare professionals are experts on diagnosis and treatment of disease. It is imperative that patients and families are treated with respect and dignity, are informed, are partners with the healthcare team and are empowered by staff to care for themselves. As experts in Patient and Family experience within healthcare, RVHPFAC members advise, advocate, educate, and empower staff, patients, and families.

Role

- Advise on behalf of all families, not just their own experience.
- Represent the RVHPFAC on committees, councils and projects for which patient or family presence is requested.
- Promote and support improvements of Patient and Family Centred Care at RVH.
- Work in partnership with staff and other patients and families to achieve excellence in Patient and Family Centred Care.
- Respect the diversity of other perspectives, values and beliefs.

Responsibilities

- Attend meetings (minimum 80%).
- Respond to queries between meetings as appropriate.
- Participate on sub-committees and task groups as necessary.
- Advocate the concepts of Patient and Family Centred Care.
- Maintain confidentiality regarding all matters handled by RVHPFAC members.
- Follow all Terms of Reference as outlined by the Renal Patient and Family Advisory Council.

Message from the RVH President and CEO: Randy Penney



Dear Patient and Family Advisory Council Members:

Patients and families are central to everything we do at Renfrew Victoria Hospital. As a patient-centred hospital, our Patient and Family Advisory Council (PFAC) members are essential to our ability to deliver quality, safe and coordinated care. As trusted volunteer advisors, they have provided new ideas and perspectives in areas across the hospital. The insights and personal stories we hear from PFAC members inspire and inform how we respond to the complex needs of individuals and their families, both medically and emotionally.

In the first year and half of service, PFAC has demonstrated an outstanding commitment and has had a positive impact on the development of hospital-led initiatives and the broader healthcare system as a whole, by participating in:

- Policies and Procedures, including 24 Hour Family Visiting, Violence Flagging, Code Blue
- Family Presence, Gender Sharing Patient Rooms
- · Videos related to care changes
- · Best Practices retreat days
- · Participating in RVH Care Team meetings
- Staff ID Badges
- Discussions on Smudging Ceremonies, Wayfinding Signage, New Blinds for Dialysis Unit, Wi-Fi/Face Time Access

On behalf of the Board of Directors, staff, physicians and volunteers at RVH, we are grateful to all members of the Patient and Family Advisory Council for partnering with us to deliver an exceptional patient experience. Your time, talent, energy, passion, and drive are greatly appreciated and invaluable to the Renfrew Victoria Hospital.

Congratulations on a successful first 18 months, and all the best for the year ahead!

Sincerely, Randy Penney RVH President & CEO

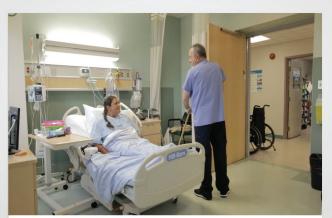
2016–2017 Accomplishments: Education and Awareness

NODD Initiative builds trusting relationships through communication

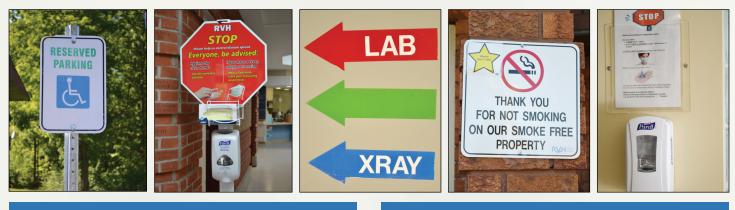
PFAC members participated in the design and development of a video to demonstrate how patients want to engage with healthcare professionals. PFAC member Joanna and staff illustrate the NODD (Name, Occupation, Duty, Departure) principles when entering and leaving patient rooms.

Hand Hygiene Signage in the Emergency Department

PFAC members reviewed the hand hygiene signage and its placement.



RVH INTRODUCES THE N.O.D.D. INITIATIVE Rosfrew Victorie Hospital





I received a phone call from Chris Ferguson asking me to join PFAC. I was pleased to accept as I was looking to be involved with something re RVH.

The committee has made me aware of the changes in charting, patients' rights and care, signage and many improvements.

This gives PFAC members an opportunity to make suggestions and express their opinions. This is very important for families, patients and staff.

Members of the committee provide family members a venue to speak their concerns and know that they will be addressed.

—Barb Carriere



I was contacted by Chris in January of 2016 after a five-month stay in the hospital following surgery that resulted in me becoming septic. It is an honour for me to give back to this community in a mindful way even though I am retired from social work. This was also an opportunity for me to use skill sets

that I have, which include a lifetime of living with the challenges of a permanent disability.

This committee is a results-orientated one. Over the years, I have sat on boards and/or committee's that are not as quick to see results/plans implemented. Over this past year recommendations for the staff ID badges and the 24-hour visitation protocols come to mind. I had input regarding the staff badges and also the gender sharing of patients' rooms.

—Candice Dick

2016–17 Accomplishments: Policy and Best Practice

Integrating the patient and family perspective into policy formulation

Throughout 2016–17, PFAC Advisors have been invited by staff to contribute to the development of policies addressing several diverse aspects of RVH patient care services.

These collaborations of staff and PFAC Advisors create opportunities to facilitate movement toward patient-centric policy formulation. Through early engagement with the council members, the following policies have moved to a new level of understanding and quality, incorporation patient and family perspectives.



Violence-free environment

Violence in the hospital environment is a real issue for the safety of patients, families and staff. PFAC has provided advice to the clinical team on key messaging to support a safe patient care environment.



Best Practice Guideline Implementation

In 2016–17, RVH continued our journey as a BPSO designated organization. A strong focus included implementation of person and family centred care. There was a marked increase in volunteer involvement with patients and family members joining us on this journey.



Providing safe transitions in care: Gender sharing rooms

Patients and families tell us what is important to them, thereby assisting the healthcare team to focus resources where needed. PFAC brought us a patient story that demonstrated unintentional effects of shared gender rooms, and policy change was implemented.

Integration PFAC advisor perspective & experience

Shaping Policy • Collaborative review of draft policy * Consideration of PRAC input

Policy Formation

Advancing
patient-centric
healthcare policy
Continuous
improvement

Visiting hour policy change

Engaging PFAC provided clarity, focus and alignment with the issues presented by 24/7 visiting hours. The result is a joint partnership to advocate for the appropriate approach and communications that address staff concerns while still considering patient and family needs.

Code Blue presence policies

Families sometimes have to make difficult decisions about the care for their loved ones in the hospital. PFAC helps us see what is truly important in the engagement with patients and families and how to communicate and work with families through these difficult decisions.

2016–17 Accomplishments: Engagement and Health System Transformation

Members of the RVHPFAC sit on various hospital committees (e.g., Emergency department) to provide the patient and family perspective.

PFAC members have also attended the RVH/SFMH Best Practice Spotlight Organization (BPSO) retreat day for its inaugural meeting in 2016 and the second annual gathering in 2017, to shared their personal stories and the input they have given on numerous hospital initiatives.



RVH PFAC members participated in the 2016 and 2017 BPSO retreat days.



I was honoured when a couple of existing PFAC members suggested that I join the committee—patient advocacy is an important part of my job, which is a nice fit with the role that PFAC has at RVH.

The PFAC are a diverse group with a common goal: patient and family centred care. It's a privilege

to witness and be part of the important discussions that occur at PFAC and to see the suggestions for change come into effect.

—Krista Helferty



I decided to get involved with the PFAC committee because it was a way for me to give back to RVH. The care I received from RVH has been phenomenal over the years and it was something I always wanted to do. It's been such an honour to be a member of this committee and a very gratifying experience.

I enjoy being able to work together with other patients, family members, caregivers and staff members to help identify roadblocks in areas to improve the quality of care. This committee has allowed the patients' voice to be the heart of the decision-making. The changes that we have made... patients and family members will see them to be meaningful changes.

—Stephen Lyons



After working at this hospital, I thought I may have some interest in its upkeep. The care of patients is very important to me, as my son is a patient. There have been a lot of changes since I retired.

I like to help if I can.

—Irene Rekowski



I got involved because I wanted to give back something. When I was given the chance to join the PFAC, I jumped at the chance. I now know it was a great opportunity and am happy to help as much as I can.

I love the fact that we get to make suggestions on how the hospital will proceed with patient care.

The fact that we can see how our suggestions and ideals are implemented is fantastic. I am happy that the entire hospital is wanting to work with the committee to improve patient care in all aspects.

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— Gary McFarlane



I was very pleased to be asked to be on the PFAC team. I have been an employee of RVH for greater than 30 years and I have always been proud of the way the patients are put first. However, I sit on this committee because my late husband was a patient at RVH and I have had a good

look at the care here at RVH from both sides of the coin. As a patient, it is very important to be treated with good care and respect from staff. This experience also reinforced the fact that patients' families need a lot of support and guidance during these difficult times and once again RVH staff exceeded all expectations. This certainly was our experience and therefore I agreed to sit on this committee as times and expectations change, and I wanted to be a part of the team to help keep good policies and procedures in place for continuing excellent patient satisfaction.

This committee is made up of members with many different backgrounds and hospital experiences. Everyone is there for the same reason. Patients will remain number one. Each member's ideas are gratefully accepted and discussed.

This committee has been involved with many changes, e.g., white boards in patient rooms, privacy curtains for dialysis patients, visiting hours extended, signage, healthy menus, etc. I also sit as a PFAC member on the ER team—always looking to ensure that patients and their families are involved in their treatments and future care plans.

—Bonnie Nolan



I decided to get involved because my wife is a patient at RVH and I wanted to give back in some small way if possible. I had brought forward the idea of making it easier to access the internet for patients at RVH. Now my wife's iPad automatically connects upon leaving and returning.

—Garry Warren



Our family moved to Renfrew in 1951 and since that time we have counted on RVH to care for us all. While my brothers and I later moved away to work, we knew our parents had excellent doctors and RVH staff if needed. Our mom lived to be 87 and our dad almost 100 with him leaving Quail Creek at

well over 99 and spending his last 5 months on 3rd floor at RVH. Our memories of his last months there with all the loving care given to him every day inspired me to give back somehow when I could.

My husband and I retired and moved back to Renfrew in 2004, not expecting to need medical care until later on, but we knew we were in a town that could provide the best care once we required it. It was discovered in 2009 that my husband suffers from a rare disease and it has been a battle that we face often, but we do that together with the caring doctors and RVH staff in all departments. With dialysis preparation started we have the most qualified doctors and modern nephrology facility anywhere provided to us at RVH.

My participation on the Patient and Family Advisory Committee is a way to keep involved with the new and upcoming changes for patients and family members and helping in any way I can. Even when the care you have received seems to be the best I have now learned how RVH never stops making changes to make it even better for everyone coming through their doors.

A small way to give back, but with other members like myself we have been able to take many ideas and suggestions from the initial discussion stage to a completed action stage.

At our initial meeting, I mentioned that the hospital was putting male and female patients in the same room. Some elderly patients found this difficult to deal with. It was decided by RVH that from now on when a patient is being admitted into a shared room with a patient of the opposite sex that the patients and family members involved are made aware in advance and can discuss any issues they may have with staff members.

Many projects have been completed but there are still many more for committee members to work on.

I enjoy every meeting and feel proud to be able to help in any way I can by giving my time whenever needed.

—Kathy Berry

2016–17 Accomplishments: Increased participation by volunteers

Our volunteer council has provided input on a variety of projects:

- way finding signage and renovations
- increased use of volunteers (ambassadors at doors)
- improved staff ID badges—easier for patients and families to read

Get involved and learn more

Our volunteer advisory members



RVH believes that by partnering with patients, family members and caregivers, we can develop a deeper understanding of the patient perspective and apply this to our planning to better meet your needs. We believe that through patient and family involvement we will ask better questions and enable us to provide exceptional patient care.

Chris Ferguson, Vice President of Patient Care Services

More opportunities for engagement in 2017

- care team meetings
- nursing retreats to improve care
- patient safety staff education days
- process for leadership recruitment

For more information about the RVH Patient and Family Advisory Council, visit our website: http://renfrewhosp.com/pfac.php



The RVHPFAC is a truly motivating committee, and it is an inspiration to feel their grassroots energy. They are an asset to RVH in delivering quality patient care. The following are some of their contributions:

Knowledge: They have gained through their individual experiences;

Inspiration: They are motivators and inspire others to get more involved;

Global: No one is in it for themselves. As a group, they act for all patients, families and employees at RVH;

Goals: They set goals and follow through with commitments;

All in: They put 100% into everything they do, even though they may be facing challenges and have busy lives.

Cathy O'Neil RVH Board CQI

