



Kingston Health Sciences Centre

Centre des sciences de
la santé de Kingston

ANNUAL REPORTS OF HDH AND KGH PATIENT & FAMILY COUNCILS



Hôpital
Hotel Dieu
Hospital



Hôpital Général de
Kingston General
Hospital

Background to Patient & Family-Centred Care

Both Hotel Dieu Hospital and Kingston General Hospital have a solid history of partnering with patients and embedding patient and family-centred care (PFCC) in their respective strategies. While the journeys to date have followed slightly different paths, integration provides a welcome opportunity to contemplate a shared future whereby patient partnership serves as a founding cornerstone of the new hospital corporation.

What is Patient- and Family-Centred Care?

The phrase “Patient- and Family-Centred Care” has become part of the healthcare lexicon. It can however be interpreted in different ways and it is therefore important to define what we mean by it. At its heart Patient- and Family-Centred Care is built upon four core principles:

Respect & Dignity: We listen to and honour patient and family perspectives and choices. Their knowledge, values, beliefs and cultural backgrounds are respected and incorporated into everything we do.

Information Sharing: We share complete unbiased information with patients and families to help them participate in their care.

Participation: Patients and families are encouraged and supported to participate in their care and decision-making.

Collaboration: Patients and families collaborate with health care leaders in policy and program development, implementation, and evaluation; in health care facility design; and in professional education, as well as in the delivery of care.

All the principles require active engagement between patients, families and staff at every level of an organization, and can be translated to work at a regional and system level.

Supporting Patient- and Family-Centred Care at Kingston Health Sciences Centre

With the integration of the Hotel Dieu and Kingston General there is an opportunity to bring the best learnings around Patient- and Family-Centred Care from each site to the new organization. Each site has approached Patient- and Family-Centred Care in different ways and we now have the opportunity to reflect on those approaches and to decide how we will move forward in the future. To that end, a steering committee consisting of Patient Experience Advisors from each site along with Elizabeth Bardon and Daryl Bell met to brainstorm how to best support Patient- and Family-Centred Care. The following recommendations will be made to a joint meeting of the Patient and Family Advisory Councils in September:

- Patient Experience Advisors will be referred to as Kingston Health Sciences Centre advisors (no longer HDH or KGH advisors)

- The site specific Patient and Family Advisor Councils will join to form the Kingston Health Sciences Centre Council.
- The title of Patient Experience Advisor will change to Patient and Family Advisor.
- An advisor experience survey will be sent to all advisors in order to best determine how to support and encourage advisors.



HOTEL DIEU HOSPITAL PFAC ANNUAL REPORT

Background

As part of Hotel Dieu Hospital's strategic direction under "Excellent Experience, Excellent Care", the role of Patient Advisor was created at HDH in 2012. In September 2013, a Patient & Family Council was formed.

Patient & Family Council normally meets monthly from September to June and is Chaired by a Patient Experience Advisor (Adrian Storm). All PEAs are currently members of Council. Administrative support is provided by Elizabeth Bardon and Jane Warner.

Membership

Given the small team of advisors at the HDH site, all advisors have chosen to serve as members of Patient Council. Members included:

- Susan Bedell
- Patti Cox
- Madison Koekkoek (resigned May 2016)
- Donald Mann
- Rita MacDonald (resigned May 2017)
- Adrian Storm (Chair)
- Sue Maranda (resigned January 2017)
- Gwen Batten
- Lynda McArthur (resigned December 2016)
- Mohamed Bayoumi (member of KGH PFAC who joined HDH PFAC in fall 2016 as an 'exchanged' member)

Daryl Bell joined Council as an ex officio member in April of 2017 following integration of the HDH and KGH sites into Kingston Health Sciences Centre.

Patient Council Meetings

An annual work plan was developed that included regular reports on the following topics:

- Health Care Tomorrow updates (E. Bardon, staff resource)
- Quarterly reports on quality, risk and safety (J. Schweitzer, staff resource)
- Quarterly updates on the corporate scorecard results (J. Schweitzer, staff resource)
- Regular updates on the Regional Patient Advisor Council (PEA Don Mann reported)
- Education sessions (normally monthly at the beginning of the meeting)
- Integration updates (E. Bardon, staff resource)
- Regular updates on the process and winners of twice annual PFCC grants of up to \$2000 for projects submitted by staff to enhance PFCC in their areas. Funds are made available through designated donations to UHKF for this

- purpose. (PEA Don Mann reported as Chair of the Committee)
- Round table by PEAs to review the work they have been involved in since the previous meeting.

Janine Schweitzer also engaged members on the development of the Quality Improvement Plan for F17/18 and reported on last year's QIP results.

Members of Council were also provided with a draft copy of the Hospital Annual Planning Submission (HAPS) narrative for review prior to completion.

Education at Patient Council Meetings

Most Patient Council meetings begin with twenty minutes of education to help orient advisors to activities, programs and people within the organization. Examples of education sessions provided as part of the Council meetings this year included:

- Bariatric Program (Kristine Canty, Nurse Practitioner)
- No Show issues (Dr. Jason Beyea from ENT and Rachael Smith-Tryon from Records & Registration)
- HDH Wifi project (Andrew Gissing, Gary Hudson from IT and Project Management)
- Competency Based Medical Education (Vic Sahai, Chris Gillies, Dr. Damon Dagnone)
- Annual Corporate Plan (Theresa MacBeth, Director of Strategy Mgmt & Communications)



- Adrian Storm (PEA), Jennifer Sawyer (staff member) and Elizabeth Bardon (staff member) also co-presented a summary of the lessons learned from the 7th International Conference on Patient & Family-Centered Care that they attended in July of 2017. Adrian, Jenn and Elizabeth had presented a poster at the conference, which was also shared with Council as part of the broader

presentation about key conference takeaways.

Activities

A few highlights from this year's Council meetings and advisor activities:

- Members spent time this year to better understand key issues that impact patients and families in order to partner with staff on projects and work related to the following themes:
 - Supporting the frail elderly
 - Encouraging patients to speak up and be active partners in care
 - Addressing the very high rate of No Shows for booked appointments
- PEAs Susan Bedell and Patti Cox worked with Rev. Dr. Neil Elford and his team in Spiritual Care on a plan to roll out Advance Care Planning programs and tools at HDH;
- PEA Rita MacDonald participated in the Ambulatory Clinics Committee, in a review of Pre-Surgical Screening, on the Accessibility Committee, and reviewed applications for the PEA role;
- PEA Gwen Batten served on the PFCC Grants Committee and the Exceptional Healer Award Committee;
- PEA Lynda McArthur served as a member of the Medical Aid in Dying working group at HDH to develop a policy and approach, as a member of the Health Quality Ontario's inaugural Patient Council, and as a member of the Integration Transition Team and Naming Committee;
- Don Mann represented HDH on the Regional Patient Advisory Council (RPAC) for Health Care Tomorrow and provided regular updates to our Council about those meetings. Don also reviewed countless policies and documents and Chaired the PFCC Grants Committee;
- Adrian Storm served a member of the Cardiac Rehab Working Group undertaking a review of the program with a goal of reducing wait times and streamlining service to improve access while living within the program budget. He also served as a member of the Management & Communications Committee (MCC) and attended meetings with members of the Expert Panel of Ontario hospital executives who visited Kingston in January, served on hiring panels, attending Club Change and was a member of the Exceptional Healer Award Committee;
- Patti Cox presented about PFCC to second year nursing students at Queen's University and to all new residents in July with an advisor from the KGH site. She also participated in several patient safety walkabouts and was a member of

the Exceptional Healer Award Committee and the PFCC Grants Committee;

- Susan Bedell served on the Chief of Staff selection committee, participated in discussions about the model for spiritual health in an ambulatory setting and was a member of an OHA group considering how to get patient input on critical incidents. She also served as Chair of the Exceptional Healer Award Committee and a member of the PFCC Grants Committee;
- Several PEAs participated in training by Human Resources for serving on future interview panels;
- Several advisors participated in meetings with the team on site in March to conduct the values integration assessment process (VIAP); and
- Patti Cox served as an “exchanged” member of the KGH site PFAC and Mohamed Bayoumi served as an “exchanged” member of the HDH site PFAC
- Advisors reviewed and contributed to the development of several policies and procedures and reviewed documents for legibility and ease of understanding;
- Advisors were actively engaged in the public integration event (Adrian Storm was a speaker; advisors helped craft language for the plaque for the tree in City Park).



Exceptional Healer Award

The Patient & Family Council at the Hotel Dieu Hospital (HDH) site of Kingston Health Sciences Centre (KHSC) established a new annual award – The Exceptional Healer Award – which recognizes physicians who demonstrate in clinical practice the core

concepts of patient and family-centred care: dignity and respect, information sharing, participation and collaboration.

A total of 22 physicians were nominated by patients, family members and staff - clear evidence of a need for patients and family members to show how deeply they appreciate their physicians. Ophthalmologist Dr. Tom Gonder and anesthesiologist Dr. Richard Henry are the first winners of the Award. Drs. Gonder and Henry were selected for showing dignity, respect, sharing information, participation and collaboration with other doctors. The awards were presented at a special ceremony on Thursday, June 29 at Hotel Dieu Hospital.

Susan Bedell
Patient Experience Advisor and
Chair, Exceptional Healer Award Committee

PFCC Grants

Through designated donations to UHKF made for this purpose, up to \$2000 has been available twice per annum to support projects that will enhance patient and family-centred care at HDH. The PFCC Grants Committee chaired by PEA Don Mann and which includes a subset of advisors as the voting members distributed \$2000 in funding in June 2016 and again in December 2017 to support projects submitted by staff.

In June 2016:

- \$500 was allocated to fund a portable air conditioning unit for the bariatric education classroom;



- \$369 funded a research display board for the Brock 1 corridor to inform patients/families about HDH research; and

- \$1130 was allocated to purchase new wipeable, comfortable chairs for the Phase 2 surgical waiting area for families.

In December of 2016:

- \$400 was allocated to upgrade a water fountain in the lobby to allow patients, families, staff and the general public to fill water bottles safely; and

- \$550 was provided to peri-anesthesia to

furnish the pediatric day surgery waiting area.

Message from Chair of HDH Patient & Family Council

First and foremost, I would like to take this opportunity to extend my sincerest gratitude to former Chair Lynda McArthur who served in the role since inception of the Council. She was the guiding light the fledgling council relied upon. Her dedication and leadership are missed and I wish her the very best going forward. I would further like to thank all PEAs who have decided to move on and are no longer with us. Your contributions are your legacy.

It is now my honor and privilege to serve as Chair to the Patient and Family Advisory Council. PEAs represent the missing voice in advocating for the patient. We speak on behalf of the patient perspective, representing the people behind the medical record or health card identifier. I'm very pleased with the work our PEAs have accomplished this past year. From the overwhelming community response and support received for the inaugural Exceptional Healer Award, to all of the smaller projects and committees we have been a part of.

This past year marked the beginning of a new journey with several key milestones. Integration of the two hospitals provided an onus on the PFACs at each respective site to also explore options towards amalgamation. We are currently in the midst of such discussions and I look towards our future with assuredness and positive expectation. May this signal the beginning of a new and flourishing chapter in Patient and Family Centered Care at Kingston Health Sciences Centre.

Adrian Storm
Patient Experience Advisor and
Chair, HDH Patient & Family Council

KINGSTON GENERAL HOSPITAL ANNUAL PFAC REPORT

Background

The KGH 2015 Strategy for Achieving Outstanding Care, Always states that by 2015, *“Our patients are fully in the driver’s seat, participating meaningfully in every initiative that can influence their care and service, and that patients will become involved in all aspects of our care, safety and service-improvement initiatives.”*

Patient- and family-centred care was foundational to the KGH Strategy and very specifically to the first strategic direction of *“Transforming the patient experience through a relentless focus on quality, safety and service”* and continues to inform the refreshed strategic directions for the Kingston Health Sciences Centre.

The segment of the report provides an update on the past year’s activities of the KGH Patient and Family Advisory Council.

Philosophy

KGH embraces the Institute for Patient- and Family-Centered Care’s comprehensive definition of Patient and Family Centred Care as *“an approach to the planning, delivery and evaluation of health care that is grounded in mutually beneficial partnerships among patients, families and health care.”* The KGH Patient and Family Advisory Council, which was launched in February 2010, developed an easily remembered definition: **“Respect me, Hear me, Work with me”**. This simplified description also translates such that expectations are applicable whether you are a patient or a staff member.

KGH was committed to incorporating the Patient- and Family-Centred Care principles in all that we did and to building upon the KGH Principles of Respect, Engagement, Accountability, Transparency and Value for Money. We have much to celebrate and much to encourage us as we move forward on this journey. This review will highlight what has been done, what we are doing and where we plan on going.

Structures

The Interprofessional Collaborative Practice Model provides the framework for Patient- and Family-Centred Care. It is within this model that much of the engagement of patients and their families takes place. Engagement of the patient is central to care delivery, and the model views families, as defined by the patient, not as visitors but as essential members of the team. Interprofessional Education supports both Patient- and Family-Centred Care and the Interprofessional Collaborative Practice Mode. Education of healthcare professionals in effective ways of collaborating both with other professionals and with patients and families is essential to the success of the Interprofessional Collaborative Practice Mode and Patient- and Family-Centred Care, and ultimately in a safe, quality and satisfying patient experience.

At the heart of the structure of the Patient- and Family-Centred Care initiative at KGH is the Patient and Family Advisory Council, established in February 2010. The council

currently consists of 12 Patient Experience Advisors and 5 staff. The Patient and Family Advisory Council serves in an advisory capacity, providing input to and making recommendations on matters that impact the experience of patients and their families at Kingston General Hospital. Information and requests flow into the Patient and Family Advisory Council through hospital wide committees, councils or individuals seeking the perspective of patients.

Patient Experience Advisors are typically former patients or family members of former patients who volunteer their time to be members of committees, councils and working groups and/or to partner on improvement teams. Processes have been developed to increase and sustain the Patient Experience Advisors. With respect to recruitment, there are many approaches which include the patient relations service; word of mouth, and Patient Experience Advisor/ staff/ self-referrals. They then are supported in becoming involved with work that aligns to their experience and interests. Patient Experience Advisors are members of councils, committees and working groups across the organization and are playing an ever increasing role.

The work with Patient- and Family-Centred Care and patient engagement began in 2010/11 with 3 Patient Experience Advisors and has grown to now involve 54 Patient Experience Advisors. Patient Experience Advisors participate as full members on all committees making decisions materially affecting patient care.

In fiscal year 2016/17 Patient Experience Advisors volunteered 4876 hours of their time. All working with Patient Experience Advisors know this calculation to be an underestimate.

Education

Until a year ago the Institute for Patient and Family-Centered Care, a US based organization, has hosted 2 annual learning institutes, one in the spring and one in the fall. These gatherings brought together over 600 attendees, predominantly from the United States but increasingly from Canada and around the world, who are sharing expertise and seeking ways to make patient care more patient-centred.

KGH has been supporting a number of staff and Patient Experience Advisors at these conferences for the past 6 years as a means of increasing the understanding of Patient- and Family-Centred Care and gradually increasing the capacity within the hospital to lead and support ways of embedding the Patient- and Family-Centred Care principles and Patient Experience Advisor perspective in everything we do.

To date there have been a total of 36 staff and 17 Patient Experience Advisors who have participated in the learning institutes. With the uncertainty of whether the Institute will continue with these conferences we are looking at other alternatives to create educational opportunities for our advisors and staff.

To support the orientation and ongoing educational needs of our staff, physicians and volunteers, in-house Patient- and Family-Centred Care education is provided at each new hire orientation. The number of staff who have formally completed the introduction to Patient- and Family-Centred Care now totals over 3000 which represents approximately two thirds of the employee workforce.

An online education module instructing on the 5 Patient- and Family-Centred Care standards is required of each staff member.

In support of the Communication standard there has been on-going training in H.E.A.R.T. (Hear, Empathize, Apologize, Respond, Thank). H.E.A.R.T. is a communication tool which provides staff and physicians the skill set and the re-enforcement to better engage patients, families and each other. Forty KGH trainers received training from Cleveland Clinic (creators of the program) staff. The training has evolved over time and now consists of an on-line learning module and an hour of face to face skills development.

Recognition

KGH continues to be looked to as a resource at an international level for Patient- and Family-Centred Care. Since April 2016 we have been approached 59 times by organizations for teleconferences, video-conferences or site visits raising our total since we began to 307 external agencies. This has created a rich network from which we also learn.

Patient Experience Advisors and staff also respond to various requests for speakers and external Board and Committee membership including the following:

- Accreditation Canada as a Member of the Client and Family Advisory council
- Beryl Institute
- Canadian Foundation for Healthcare Improvement (CFHI) as a Coach and Faculty Member
- Cancer Care Ontario Provincial Patient and Family Advisory Council
- CFHI Design Committee
- Health Quality Ontario (HQO) as a Board member
- Health Quality Transformation Conference
- HQO Governance Committee
- HQO Quality Standards Committee
- Institute for Patient- And Family Centred Care International conference
- Member of Ontario Patient Ombudsman Interview Panel
- OHA Advisory Council
- Ontario Palliative Care Network

Organizations approaching KGH since April 2016

Alberta Health
Australian Gov't
Baycrest Health Sciences
Bruyere Continuing Care Ottawa
CHEO
CMHA
CPSI
Eastern Health, NL
Glenrose Rehabilitation Hospital
Health Quality Ontario
Health Sciences North
Hawkesbury & District General
Horizon Health Network
Health Quality Ontario
Huron Perth Healthcare Alliance
Kemptville District Hospital
Lakeridge Health
Mackenzie Health
Manitoba Health
Montfort Hospital
Mumford Centre Halifax
Napanee Hospital
National Hospital Singapore
Norfolk Health
North Bay Regional Health
Centre
NORTH YORK GENERAL
Northwest Territories
Ontario Hospital Association
Ottawa Hospital
Perth & Smiths Falls District
Hospital
Providence Health Care,
Vancouver
Rouge Valley Health System
Saint Elizabeth Research Centre
Markham ON
Sask Cancer Agency
Sault Area Hospital
St Joseph's Hamilton
St. Joseph's Health Care,
London
St. Joseph's Care Group
Sunnybrook hospital
William Osler

Partnering



Patient Experience Advisors partner in innumerable ways throughout KGH. In fiscal year 2016/17 Patient Experience Advisors have partnered with staff in over 100 hiring interviews. They have 212 active positions on 114 long and short term committees. KGH is truly fulfilling our Strategy's vision of "Our patients are fully in the driver's seat, participating meaningfully in every initiative that can influence their care and service, and that; patients will become involved in all aspects of our care, safety and service-improvement initiatives."

Patient and Family Council Agenda Items

The monthly meetings of the Patient and Family Advisory Council see a variety of agenda items including:

- Translation services
- Choosing Wisely Campaign
- Decision Making Framework
- Auditing of Access to Hospital Electronic Data & Information Privacy
- Discharge information for Patients
- Falls Prevention Strategy
- Baby Friendly Initiative
- Mixed Gender Rooms
- Home First
- Integration Plan
- Stroke Care
- Parking Up-date

- Hand hygiene
- Patient Satisfaction/Feedback
- Advanced Care Planning and Goals of Care
- Health Literacy
- Patient Behaviour Management and Least Restraint
- The Role of Medical Students
- Privacy Policies
- Blocked Phone ID
- Patient Flow update
- Medical Assistance In Dying FAQ for patients and families
- Quality Improvement Plan
- Nutrition Survey Results
- Cardiac Pamphlet
- Resolving Issues Regarding Plan of Care
- Therapeutic Hypothermia
- PATIENT- AND FAMILY CENTRED CARE Standards' Audit Results
- Hospital Naming
- Bedside Shift Report
- Steering Group for PATIENT- AND FAMILY CENTRED CARE
- Advisor Survey
- Annual Corporate Plan
- Curtains
- UHKF Patient Mailer Program and Letter
- FAVORS Volunteer

The South East Regional Cancer Patient and Family Advisory Council advises on Cancer care at KGH's Cancer Centre and across the South East, and at a provincial level provides input to Cancer Care Ontario. Thirteen Patient Experience Advisors sit on this council along with 5 staff members. It is chaired by Patient Experience Advisor Marla Rosen and Tyler Hands the Interim Director of the Oncology Program

The Renal Program has a well established Patient and Family Advisory Council which was formed in September of 2015 and which meets monthly to advise on the local and regional Renal Program. It is co-chaired by Patient Experience Advisor Vivian Bethell and Wilma Cohrs Director of the Renal Unit.

Quality Improvement

This year, the Quality Improvement Indicator is to achieve a 98% compliance rate for the 5 Patient- and Family-Centred Care standards developed and put in place two years ago. These standards were developed to provide consistency across the organization with some being applicable to support/service areas and all being applicable to inpatient units.

Challenges & Opportunities

As can be expected with any transformational change, there can be many challenges,

and with those come great opportunities to innovate and lead. Challenges that have presented since the launch of work focusing on Patient- and Family-Centred Care have included the following:

- Ensuring everyone has a basic understanding of, and a commitment to Patient- and Family-Centred Care.
- Skepticism and resistance to change
- Preventing overextension and burnout of voluntary Patient Experience Advisors
- Focusing on and supporting our need to continuously learn & improve as we go forward
- Ensuring availability of funds to cover the need and cost of educational events for Patient Experience Advisors and staff
- Intentionally supporting staff in engaging patients and families at the frontline.
- Working with physician schedules and communication methodologies to enable their engagement and understanding of Patient- and Family-Centred Care and patient engagement
- Minimizing strain on corporate resources as the program grows
- Sharing our learning with other organizations

To address these challenges, we will continue with deliberate focus to put in place and sustain drivers that contribute to this cultural transformation. As examples:

- Ensuring senior leadership commitment and support
- Having clear accountability for processes that enable patient and family engagement
- Identifying unit/program/service based Patient- and Family-Centred Care champions
- Ensuring education and training of health care professionals and service providers including in-house orientation and continuing educational sessions for Patient Experience Advisors, staff and physicians and sustaining educational and networking opportunities within the broader health care system
- Continuing to recruit and support Patient Experience Advisors
- Ensuring that as corporate policies are developed, reviewed and revised to integrate the language and reflect responsibilities that align with Patient- and Family-Centred Care philosophy
- Creating a workplace that supports Patient- and Family-Centred Care adoption and continuing to work toward Outstanding Care, Always by supporting and monitoring the application and adherence to Patient- and Family-Centred Care Standards
- Supporting the continued rollout of the customer service program H.E.A.R.T.
- Continuing to support and facilitate the voice and experience of the patient/family being heard and embedded in improvement processes,
- Continuing to monitor progress with and respond to quality, safety and

satisfaction measures.

Summary

KGH is meeting its strategic vision of partnering with patients and families so as to include their perspective in all decisions which materially impact the patient experience. It is through the active engagement with patients and families and the partnering on decision making bodies that the patient and family perspective is being included and valued. KGH is recognized as a system leader in enabling patient engagement and with practices that enable Patient- and Family-Centred Care. The Kingston Health Sciences Centre now has an opportunity to be a world leader in Patient- and Family-Centred Care.

