Patient- and Family-Centered Care:

Improving the Present While Planning for the Future
Suburban Patient and Family Advisory Council Members

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Patient- and Family-Centered Care: Improving the Present While Planning for the Future

Suburban Hospital’s Patient and Family Advisory Council (PFAC) is pleased to present its 2018 Annual Report. This report summarizes the PFAC’s activities from July 2017 through June 2018—a year in which the PFAC continued to expand its involvement in the hospital’s operations. The PFAC is the voice of patients and their families in everything the hospital does. As we are fond of saying: “Nothing about us, without us.” At its heart, the PFAC’s efforts are focused on promoting Patient- and Family-Centered Care (PFCC). The key elements of that concept, as defined by the Institute for Patient- and Family-Centered Care, are:

- Patients and their families are treated with dignity and respect.
- Health care providers communicate and share complete and unbiased information with patients and their families in ways that are supportive and useful.
- Health care providers encourage and support patients and families to participate in care and decision-making at the level the patients and their families choose.
- Patients, families, and health care providers work together to improve every aspect of the health care system.

Suburban’s PFAC is composed of both volunteer community members, known as Patient Family Advisors (PFAs), and senior Suburban Hospital staff. This structure models collaboration of patients, families, and health care providers, and begins at the top. The PFAC is co-chaired by volunteer PFA, Stephen Bokat, and the hospital’s Vice President and Chief Nursing Officer, LeighAnn Sidone. Joint leadership sends a message to both the staff and community of the importance of patient/family/provider partnership, that the PFAC is an essential element of the hospital’s operations, and that its views are to be considered in making significant decisions. As a result, it is standard operating procedure for the PFAs to participate in hospital committees, councils, initiatives, and meetings. The advisors do not simply attend meetings, but actively participate, presenting the patient and family voice to hospital operations.

As we have said in prior reports, the success of the PFAC is wholly dependent on the support of Suburban’s senior management. We are indeed fortunate to have the complete support of the senior management team, Jacky Schultz, President, LeighAnn Sidone, Vice President and CNO, and Joe Linstrom, Vice President of Operations; all three of whom serve as staff members of the PFAC.
The other ingredient for the PFAC’s success is a committed core of volunteer PFAs. Suburban’s PFAs collectively contribute untold hours of their time to the PFAC, attending a multitude of meetings, bringing to the table the patient and family voice. In addition, PFAs contribute in other ways, as described in this report, including using their skills, such as writing, editing, and interviewing, to name a few, to advance the practice of PFCC at Suburban.

The title of this year’s report, *Improving the Present While Preparing for the Future*, reflects the fact that Suburban is undergoing dramatic change as it transforms its campus, including a new building which will result in private rooms for almost all patients, new surgical suites with the latest technology, and convenient physicians’ offices. Suburban’s PFAC has been intimately involved in the planning for the new campus, including review of patient room mock ups and working with contractors designing signage for the new building. Of course, this involvement began with the new garage that opened last year and will continue with the many aspects of moving and accommodating patients and families in the new facility.
Suburban’s PFAC continued many of its previous efforts to advance the practice of PFCC at the hospital. Ongoing efforts are summarized in the PFA collaboration chart that is included later in this report. What follows is a summary of the highlights of the past year.

**Improving Staff Communication with Patients and Families**

**PFA Interviews of Patients and Families about Hospitalist Care**

Improving patient and family communication with hospitalists, nursing, and other clinical staff continues to be a top priority for the PFAC. Since 2016, a team of PFAs has collaborated with hospitalist leader Atul Rohatgi, M.D., assistant medical director and a PFAC member, to develop a questionnaire and conduct interviews of patients and their families about their experience with their hospitalists. The questionnaire consists of open-ended and specific behavior questions. The PFAs interview the patients and families in-person during the patient’s stay, asking the questions orally and taking notes of their responses. The responses are anonymous; no patient-identifying information is collected. In 2017, senior hospitalist Shanthi Nadar, M.D., assumed responsibility for meeting with the hospitalists and sharing the feedback obtained from the PFA interviews. Her role now includes individual coaching along with using the feedback provided by the responses to the questionnaires. The PFAs collaborated with Drs. Rohatgi and Nadar several times this year to revise the questionnaire based on user experience. The team of PFAs conducts about 25 interviews a month, and hospitalists report that they find the feedback very helpful in targeting how to improve communication skills.

Shanthi Nadar, M.D., and PFA Toby Levin made a presentation on Suburban’s Hospitalist Interview Program at the 8th Annual Meeting of the Institute for Patient- and Family-Centered Care. (see page 11)

**Multidisciplinary Rounds at the Bedside**

Multidisciplinary Rounds (MDR) at the bedside are an established core best practice of patient- and family-centered care. MDR improves care coordination, reduces length of patient stay, reduces patient and family stress, and enables patients and families/care partners to be active partners in the patient’s care planning and treatment. At Suburban, the multidisciplinary teams include hospitalists, nurses, case managers, social workers, and pharmacists as well as the patient and their families/care partners. In short, MDR improves communication across the care team. Patients and their families/care partners are encouraged to be a part of the conversation about the patient’s condition and care and to share relevant information, raise questions, and voice concerns about the safety, quality, and experience of care. The resulting
coordination of care and improved communication produces better health outcomes and a more positive experience of care.

Suburban first initiated MDR in the Progressive Care Unit (PCU), with the collaboration of PFAs Barbara Kahl and Toby Levin and unit leaders Amir Nader, M.D., Medical Director, Progressive Care Unit, Kimberly Kelly, RN, Nursing Director for Critical Care, and then Unit Manager, Cora Abundo, RN. These unit leaders received the first PFAC Patient- and Family-Centered Care Leadership Award in 2014 for implementation of bedside shift report and MDR at the bedside. MDR was then introduced in the ICU.

In the fall of 2017, a collaborative effort involving an interdisciplinary team led by unit Nursing Director, Courtney Cornell and hospitalist leader Atul Rohatgi, M.D. brought MDR to the Oncology Unit 6300. PFA Barbara Kahl participated in its early planning. Then in 2018, building on the success of the Oncology MDR program, another interdisciplinary team led by Nursing Director Eunice D’Augustine and Dr. Rohatgi worked together to design and implement MDR on Adult Medical Unit 4300. PFA Toby Levin represented the PFAC on the team, which is now working to expand MDR to the Acute Medicine Unit 4400. At the Annual Medical Staff Meeting and Reception on June 21, 2018, the PFAC presented Cornell and D’Augustine the 2018 Patient- and Family-Centered Care Leadership Award in recognition of their team leadership advancing MDR.

CUSP Teams

Comprehensive Unit Based Safety Programs or CUSP Teams identify “defects” and analyze root causes and devise solutions. A “defect” is anything that might lead to preventable patient harm. The teams attempt to answer the question of “how will the next patient be harmed” in their respective units and then devise solutions so that that harm never occurs.

In 2016-17, PFAs served on three CUSP teams: Orthopedics, a general medical unit, and the Progressive Care Unit. The number of CUSP teams at Suburban has substantially expanded, as has the involvement of our PFAs. In addition to the three teams noted above, PFAs now
serve on CUSP teams from the Emergency Department, the Perioperative Department (pre-op, surgery, and the post-anesthesia care unit or PACU), and another adult medical unit. The current focus of these teams ranges from falls to handoffs, both within unit and between units. One example of the role played by our PFAs occurred in the Orthopedics Department where patient falls are a constant concern. As an alert to the staff, patients at risk of falling were dressed in yellow gowns and socks. The PFA pointed out that while the staff knew the meaning of the yellow gowns and socks, the patient and their families did not. It was agreed by the team it made sense to provide the patient with a yellow bracelet labelled “FALL RISK.”

**Diabetes Management**

PFA Barbara Kahl continues to contribute to Suburban Hospital’s various initiatives to advance its goal—spearheaded by Mihail “Misha” Zilbermint, M.D., Suburban Hospital’s director of endocrinology—to become a Diabetes Center of Excellence and ultimately to qualify for The Joint Commission’s Inpatient Diabetes Certification Program. Barbara brings her experience parenting a child with Type 1 diabetes, and counseling individuals and families with loved ones who live with Type 1 diabetes to her work as a PFA.

Barbara serves on two committees led by Dr. Zilbermint. The Glucose Steering Committee is an interdisciplinary group that includes physicians, nurses, certified diabetic educators, the clinical nutrition manager, community health and wellness staff, pharmacists, hospitalists, a patient family advisor, and others. The group oversees a variety of projects throughout the hospital to monitor and improve the care and education of patients with diabetes. Barbara brings the patient and family voice to this group, as well as to the Diabetes Champions Committee, which consists mostly of nurses who receive monthly continuing education on the management of patients with diabetes. The nurse champions are encouraged to take what they learn back to their various nursing units.

In addition to bringing the general perspective of the patient and family to these two committees, Barbara also encourages clinicians to distinguish between Type 1 (an autoimmune disease) and Type 2 (a metabolic disease) diabetes, as appropriate. The importance for this distinction is based on her knowledge that many people do not distinguish between these two diseases and, in the experience of the Type 1 diabetes community, clinicians often are more knowledgeable about treating Type 2 diabetes, which is much more common than Type 1.

In the coming year, Barbara also will serve as a PFA on the Johns Hopkins Armstrong Institute’s Diabetes Clinical Community.
Patient Education & Handbook

PFAs have participated in monthly meetings of the Patient Education Committee of the Nursing Staff’s Professional Development Council since shortly after the founding of the PFAC. This year, the PFAC worked with the Committee to completely revise Suburban’s Patient Handbook, which is given to all patients upon admission to the hospital. The Handbook provides key information needed by patients and families from how to order meals to where to park.

In addition, our PFAs participated in the Education Fair for hospital staff to acquaint everyone who attended with the various projects of the PFAC. The Fair was very successful with over 100 attendees who enjoyed visiting each display and learning about various hospital-wide services available to our patients. Based on this year’s success, there will be future fairs of this kind. The PFAC knows that as staff members learn more about the PFAC’s role, the more likely they are to include PFAs in their substantive meetings and decisions. PFAs continued their participation in the expansion and refinement of the use of Emmi® patient engagement software and Krames Patient Education videos and print materials.

The Service of Remembrance

In collaboration with Suburban’s Spiritual Care and Nursing staff, PFAs from the PFAC continue to play a role in planning and conducting Suburban Hospital’s Annual Service of Remembrance. This event is designed for families who in the prior year lost a loved one who received care at Suburban and for staff who cared for these patients.

The program—which includes music, participation by hospital clinicians, staff, and PFAs, and a flower ceremony—is very moving. Following the program, refreshments are served during a reception enabling families attending to connect personally with Suburban staff and PFAs.

Suburban held the 2018 Service on Sunday, April 29. For the first time, the event could not be held at Suburban, due to construction constraints. Initially this limitation posed some challenges to members of the planning committee—LeighAnn Sidone, PFAC co-chair; Rev. Barbara G. McKenzie, director of spiritual care, Pam Fogan, director of volunteer services, Kris Hakanson, director of patient and family experience and PFAs Toby Levin and Barbara Kahl. The selection of The Women’s Club of Bethesda for the venue and the creativity of the committee resulted in a lovely event, with a record attendance.

Participation in Johns Hopkins Medicine’s Patient- and Family-Centered Care Clinical Community

Suburban Hospital’s Patient and Family Advisory Council continues to be a leader across Johns Hopkins Medicine by sharing its knowledge and experience implementing patient- and family-
centered care practices. This year, the PFAC had the privilege of having five members participate in Johns Hopkins Medicine’s Armstrong Institute’s institution-wide, Patient- and Family-Centered Care Clinical Community (PFCC-CC): PFAs Steve Bokat, Toby Levin, Barbara Kahl, and Vicki Stearn, as well as Kris Hakanson Suburban’s director of patient and family experience. What is more, Vicki has been the volunteer co-lead of the PFCC-CC. One of Hopkins’ Armstrong Institute for Patient Safety and Quality’s 22 Clinical Communities, the PFCC-CC is tasked with 1) facilitating and sharing best practices among Hopkins’ many PFACs and PFAs; 2) promoting and executing patient- and family-centered care principles and activities; and, (3) ensuring the patient and family perspective and voice are heard. In her role as co-lead, Stearn also sits on Johns Hopkins Medicine’s Board of Trustees’ Subcommittee on Patient Safety and Quality and the Advisory Board of Johns Hopkins School of Medicine’s Continuing Medical Education Department. She continues in that role through FY 2019.

III. AWARDS

Suburban’s PFAC annually presents an award within the hospital to one or more people who best demonstrate the tenets of patient- and family-centered care. Hospital programs that partner with the PFAC and its PFAs also received awards.

Emergency Department
PFAs assisted the Emergency Department Nursing Council in applying for the Lantern Award, which the Department received in the Summer of 2018. This is a prestigious award given by the Emergency Nurses Association that recognizes emergency departments that demonstrate exceptional and innovative performance in leadership, practice, education, advocacy, and research. The PFAs highlighted their efforts to prepare information brochures for families of patients undergoing psychiatric evaluation, to assist in completely revising the brochure this year, and to clarify the policy regarding family presence during resuscitation of critically ill patients.

Intensive Care Unit
Suburban’s Intensive Care Unit (ICU) received a bronze level Beacon Award for Excellence from the American Association of Critical-Care Nurses. The application for the award highlighted the ICU’s close working relationship with the PFAC to strengthen patient- and family-centered care in the unit (see below for more about the PFAC’s efforts to strengthen PFCC in similar units across Johns Hopkins Medicine).
Clinical Care Awards for Implementation of Patient- and Family-Centered Care Best Practices

In 2016, Leo Rotello, M.D., director of Critical Care Medicine and the co-chair of the Armstrong Institute Critical Care Clinical Community, invited PFAs Barbara Kahl and Toby Levin to work with him to develop a program to incentivize and reward clinical care units for their PFCC best practices. The PFAs collaborated with Dr. Rotello to draft the criteria for a JHM system-wide multi-level award program. Each applicant unit is evaluated on PFCC core best practices, including 24/7 family presence, bedside shift report, bedside multidisciplinary rounds, and family presence during resuscitation procedures. Award eligibility requires written documentation supporting these practices as well as documentation demonstrating how these practices are communicated to patients and families. The number of these practices successfully implemented determines the award level—bronze, silver, gold or platinum—if any, a unit may earn. The program is now a joint program of the Armstrong Institute’s PFCC Clinical Community and the Critical Care Clinical Community.

Clinical Care units across JHM are eligible to apply for an award, and several applications were submitted in 2017. An Executive Committee made up of PFAs Kahl and Levin, (members of the PFCC Clinical Community), as well as Drs. Rotello and Bradford Winters (co-chairs of the Critical Care Clinical Community), reviewed the applications and conducted site visits; efforts that require the commitment of a huge number of hours. The first award presentations are scheduled to be part of the annual Armstrong Institute Clinical Excellence Award Program later in 2018. As a result of his work on this initiative as well as others, Dr. Rotello was one of two recipients of Suburban’s PFAC 2017 PFCC Leadership Award.
We were very pleased that this program received second place in the 2017 Institute for Patient- and Family-Centered Care’s (IPFCC) Partnership Award. This award recognizes innovative partnerships among patients, families, and health care professionals.

PFAC 2018 PFCC Leadership Award

Each year, the PFAC presents the PFCC Leadership Award to those within the hospital who best exemplify the tenets of Patient- and Family-Centered Care. The Oncology Unit, led by Courtney Cornell, Nursing Director; and the Adult Medical Unit, led by Eunice D’Augustine, Nursing Director; received the PFAC’s 2018 PFCC Leadership Award. These units were recognized for their implementation of Multidisciplinary Rounds at the bedside. The nomination for the award noted that this core PFCC best practice improves care coordination, reduces patient and family stress, and enables patients and families/care partners to be active partners in the patient’s care planning and treatment. Cornell and D’Augustine accepted the awards on behalf of their teams at Suburban’s 2018 Annual Medical Staff Meeting.

Lisa Allen JHM, Chief Experience Officer, Toby Levin, Suburban PFA, Barbara Kahl, Suburban PFA, and Leo Rotello, M.D. at IPFCC award ceremony.

Kathleen McGuiness, PFA and LeighAnn Sidone, PFAC co-chair, award the 2018 PFAC PFCC Award to Courtney Cornell and Eunice D’Augustine, on behalf of their nursing units.
PFAs took an active role during the year making presentations on the role of PFACs in general and the active role of Suburban’s PFAC.

- Steve Bokat, PFA co-chair, joined two senior Suburban nurses, Karen Carlson and Cathy Clark, addressing the JHM Patient Education Winter Retreat about many patient education activities taking place at Suburban and the PFACs integral role in those activities. At the same retreat, PFA Deborah Kovach gave a moving presentation about the difficulties of navigating the hospital setting as the care partner for a disabled person, in this case her brother.

- Bokat also spoke at a JHM Armstrong Institute for Patient Safety and Quality Quarterly meeting where he gave a presentation titled “Provider-Patient Partnership, Improving Communication to Prevent Harm” addressing the role of PFAs on CUSP teams.

- The Institute for Patient- and Family-Centered Care’s 8th International Conference, co-sponsored by JHM Armstrong Institute for Patient Safety and Quality, convened in Baltimore in June 2018. Suburban’s PFAs participated in this conference as attendees, volunteers, and presenters. PFAs and staff partnered on three panel presentations. As mentioned above on page 4, where this project is described in more detail, Shanthi Nadar, M.D., and PFA Toby Levin presented on the PFAC project to improve hospitalist communication.

- In addition to the presentation on our hospitalist communication initiative, Suburban PFAs participated in two other presentations at the conference. Steve Bokat joined Judy Holloway, Suburban’s Quality and Patient Safety Coordinator; and Kim Kelly, Critical Care Nursing Director, in a presentation highlighting the participation of PFAs on Comprehensive Unit Based Safety Programs (CUSPs). These groups are designed to catch safety problems before patients are harmed and are discussed in more detail on page 5. Bokat also addressed this topic with Eunice D’Augustine, one of Suburban’s Nursing Directors and a PFAC member at a Johns Hopkins’ Armstrong Institute conference.

- Stearn, previously mentioned as a Suburban PFA, and also serves as co-lead of the Johns Hopkins’ Patient- and Family-Centered Care Clinical Community, joined a panel of Hopkins’s staff presenting at the same conference on how the Clinical Community accomplishes its goal.

- At a Patient-Provider conference sponsored by Johns Hopkins Medicine, PFA Kathleen McGuiness participated in a PFA panel discussion about PFCC and Vicki Stearn served on a panel discussing “What will it take to Make Patient-Centered Care a Reality?”
Suburban’s PFAs work with the staff on a whole range of initiatives, in addition to those described above. PFA collaborations are summarized in the following chart.

### Organization Name

<table>
<thead>
<tr>
<th>Organization Name</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Medicine 4400 Unit Council</td>
<td>PFAs work with staff on unit initiatives.</td>
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<tr>
<td>Armstrong Institute Patient- and Family-Centered Care Clinical Community</td>
<td>Representatives of all Johns Hopkins Medicine (JHM) PFACs participate to promote patient- and family-centered care and harmonize PFACs across the system.</td>
</tr>
<tr>
<td>Campus Enhancement Project User Groups</td>
<td>PFAs serve on multiple user groups on the design of the new building including patient rooms, lobby, dining services, conference center, wayfinding.</td>
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<tr>
<td>Clinical Care PFCC Certification Award Program</td>
<td>Joint effort of the PFCC and Critical Care Clinical Communities to recognize JHM Clinical Care Units for their PFCC best practices. PFAs serve on Executive Committee for this Program.</td>
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<tr>
<td>Clinical Decision Unit Advisory Council</td>
<td>PFAs meet with unit leaders to provide advice on unit initiatives.</td>
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<tr>
<td>Comprehensive Unit-based Safety Program (CUSP) Committees</td>
<td>CUSP goal is to build a strong patient safety culture. CUSPs identify “defects” and analyze root causes and devise solutions. A “defect” is anything that might lead to preventable patient harm. PFAs worked with Orthopedic CUSP team to identify reasons for patient falls, with ED CUSP on Falls, Perioperative CUSP on handoffs, and with a general medical unit CUSP.</td>
</tr>
<tr>
<td>Cross Continuum Collaboration</td>
<td>PFA participation on care coordination with outside rehab, long-term care facilities, assisted living facilities, and home health care services.</td>
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<tr>
<td>Diabetes Champions</td>
<td>PFA participates in diabetes education program for nurses and other clinicians for staff and patients.</td>
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<tr>
<td>Discharge Planning</td>
<td>PFA participates with interdisciplinary group working to improve the discharge process.</td>
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<tr>
<td>Emergency Department Collaborative</td>
<td>PFA participates with ED staff to review ED operations in pursuit of speedy, safe, and effective patient treatment.</td>
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<tr>
<td>Ethics Committee</td>
<td>Small group of physicians and others, including PFAs, discusses ethical issues raised by patient care.</td>
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<tr>
<td>Falls Team</td>
<td>PFAs are part of Nursing’s Quality, Safety, and Service Council focusing on reducing the incidence of falls.</td>
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<tr>
<td>Food &amp; Nutrition Service</td>
<td>PFAs work with the Director, Chief Dietitian, and staff to provide patient/family perspective, particularly with regard to new food selection and menus.</td>
</tr>
<tr>
<td>General Surgery/Trauma Unit Council</td>
<td>PFAs work with staff on unit initiatives.</td>
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<tr>
<td>Glucose Control Steering Committee</td>
<td>Interdisciplinary group, including PFA, works to improve diabetes care and education in patient population.</td>
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In addition to its participation on these various operational teams, the PFAC promotes education and implementation of PFCC through the following activities, many of which were first described in its 2015 Annual Report and are ongoing commitments:

- PFAs participate in **New Employee** (monthly) and **Volunteer** (periodic) **Orientations**; brief new staff and volunteers on PFCC and the role of the PFAC and PFAs.
Annually, the PFAC grants the **PFAC Leadership in Patient- and Family-Centered Care Award**. Since 2014, each spring the PFAC presents the award at the Annual Medical Staff awards reception. This year’s award recognized recipients for **Leadership in Implementing Multidisciplinary Rounds at the Bedside**. Multidisciplinary Rounds at the bedside include hospitalists, nurses, case managers, social workers, and pharmacists. Patients and their families/care partners are encouraged to be a part of the conversation about the patient’s condition and care and to share relevant information, raise questions, and voice concerns about the safety, quality, and experience of care. This core PFCC best practice improves care coordination, reduces patient days, reduces patient and family stress, and enables patients and families/care partners to be active partners in the patient’s care planning and treatment.

Helps select the Suburban Hospital Volunteer of the Year (Hollins Award). Volunteers assist patients and families in many ways.

PFAs review hospital and unit **educational materials** as part of the Patient and Family Education Committee (e.g., Palliative Care, Oncology, Clinical Decision Unit, and Diabetes education)

PFAs promote improvement in Physician Communication. PFAs conducted observations of hospitalists and intensivists to provide feedback on communication skills and met with physician leaders to discuss additional roles in 2016-2017. Interviewed patients and families about the care received from the hospitalists, and hospitalist leaders provided this feedback to their team. Also worked with the hospitalist team to develop a video explaining the role of the hospitalist, which is now available at: [https://www.hopkinsmedicine.org/suburban_hospital/medical_services/care_team/hospitalists/index.html](https://www.hopkinsmedicine.org/suburban_hospital/medical_services/care_team/hospitalists/index.html)

PFAs attend and participate at periodic Suburban’s **Leadership Development Forums** and **Nursing Retreat**, as well as **Armstrong Institute Patient Safety Summit** and **JHM Town Halls**.

PFAs continue **staff education about the PFAC and PFCC** for units and departments. Examples include Environmental Services, Registration, parking attendants, and the hospital security team.

PFAs work with the directors of the Marketing & Communications Department, the Foundation, and Community Health and Wellness to **educate the community about patient- and family-centered care and the PFAC** through the quarterly community newsletter, now titled **Johns Hopkins Medicine Suburban**, the Suburban website, and other community outreach efforts.
The PFAC continues to recruit new members, with a focus on greater diversity, and to improve orientation of new members.

PFAs, in collaboration with Suburban’s leadership, updated Suburban’s *Family Presence Policy* to invite patient’s care partner to remain 24/7 with only limited exceptions. (Policy is posted on hospital website.)

PFAs worked with the Patient and Family Education Committee to revise the Suburban Hospital Patient Handbook.

In collaboration with nurse leaders and staff nurses, patient family advisors continue to support implementation of *Bedside Shift Report* (BSR) on all units. The original BSR pilot, which patient family advisors helped develop for the PCU, incrementally expanded to all units. (Pilot planning included research, implementation planning, producing training materials, participation in training, and design of pre and post implementation of BSR questionnaires and competency metrics.) Patient and family advisors conduct BSR observations when requested by units to help improve and sustain the program.

Work with the *Palliative Care Program* to promote information about palliative care and end-of-life conversations and decision-making on Suburban’s website. See resources and pages at links below.

Palliative Care:

Hospice Care:

Compassionate Decision Making:
https://www.hopkinsmedicine.org/suburban_hospital/planning_your_visit/patient_medical_information/compassionate_decision_making.html

As the chart and summary demonstrate, patient family advisors are active partners with staff across the hospital’s operations, helping to build the PFCC culture at Suburban. The PFAC will continue to work with Suburban’s leadership to strengthen the partnership between patients, families, and providers.
In addition to all the ongoing activities already summarized, the PFAC will:

1. Collaborate on initiatives to support Suburban’s application—submitted in June 2018—to become a Magnet recognized hospital. The Magnet Recognition Program was developed by the American Nurses Credentialing Center, a subsidiary of the American Nurses Association, to recognize health care organizations that provide the very best in nursing care. It is the highest level of recognition that an organization can receive for quality nursing care.

2. Seek input from communities that are under-represented on the PFAC through community outreach and expansion of the PFAC.

3. Work to improve PFAC webpage to include PFCC resources for the community.

4. Continue participation in user groups to provide input into Suburban’s Campus Enhancement Project, including plans to create a Patient and Family Resource Center.