

Background

As part of a systemwide initiative to improve patient experience, engagement, and safety, CHI Health Missouri Valley implemented our PFAC.

Our timeline:

-December 2017- CHI Health provided a toolkit to implement a PFAC.

Resources were downloaded from the AHRQ website.

-January 2018- Brainstorming session with nursing leadership and staff was conducted to compile a list of possible patient/family members.

-February 2018- Potential members were contacted via telephone and asked to consider joining our PFAC.

-March 2018- We held our first meeting with six community members.

-June 2020- Meetings were cancelled due to COVID.

-September 2021- We resumed quarterly meetings.

-September 2022- Currently, we have 14 active community members with patient representatives from various service areas (Cardiac Rehab, Outpatient Infusion, Rural Health Clinics, and Local LTC facility). Hospital staff members include Vice President of Pt Care Services, Marketing Director, Safety/RM Specialist, Diabetes Educator, Quality Manager, and Rural Health Clinic Director.

Actions Taken

- Each PFAC member is asked to sign a confidentiality agreement before attending their first meeting.
- Patient experience scores and survey response rates are shared at each meeting.
- Valuable feedback is obtained at every meeting. PFAC members serve as our ambassadors in the community.
- Our meeting agendas are flexible and focus on current patient safety concerns.

Implementing a Patient Family Advisory Council (PFAC) in a rural CAH

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Objective

Our objective was to develop and implement a successful PFAC that partners with members of the CAH healthcare team to improve patient outcomes, experiences, and safety.

Outcomes

Specific outcomes:

- Established quiet time everyday from 2pm to 4pm.
- Posted healthcare workers uniform color signage in all patient rooms.
- Rearranged seating in waiting areas.
- Approved fall risk interventions with consideration for patient privacy.

Analysis

Our work has not produced quantitative data. The qualitative value we have received is produced by the members through their feedback, sharing of experiences, and relaying information from other community members willing to share their patient experiences with our PFAC members.



Next Steps

- Continue to communicate PFAC feedback and suggestions for improvement to hospital leadership and other members of the healthcare team.
- Continue to recruit additional members with focus on diversity.
- Continue to focus on patient safety concerns and quality outcomes.

“PFACs have become a critical tool through which the patient/family advisors’ voices can be incorporated into healthcare leaders’ efforts to provide more patient-centered care.”

-Forward, C & Sieck, CJ. Patient and family advisory councils (PFAC) feedback as the voice of healthcare consumers. J Hosp Manag Health Policy 2022;6:5.