What is a Patient and Family Advisory Council?

Health care delivery systems are increasingly asking patients, family members, and caregivers for their perspectives on their healthcare. A Patient and Family Advisory Council (PFAC) is one approach. PFAC's are groups of patients, family members, or caregivers who meet regularly and share their experiences of care or collective perspectives on a specific topic. This feedback is then used to inform operations, improvement, or research efforts.

Does SMC have PFAC's???

Yes! There have been several Focus Groups conducted in the past year which include:
- Joint Replacement
- Diabetes
- Lifestyle Education/Weight Loss
- Cardiac/Pulmonary Rehab

Great ideas have been born from these groups with suggestions from both staff and patients. These groups help us grow and learn how to give better quality care for our patients while also keeping them included with their health. If you have ideas on groups or want to be a part of this fun committee, please let Cindy Walsh or Amber Kavan know.

DEFINING A “CARE TEAM”

“A team is a small number of people with complementary skills who are committed to a common purpose, set of performance goals, and approach for which they hold themselves mutually accountable” (Katzenbach & Smith, 1993).

The clinic has regularly scheduled care team meetings for our core chronic condition focus areas which are: Diabetes, Hypertension & Congestive Heart Failure, COPD and Depression. Members of these care teams include a provider, staff nurse, health coach, clinic manager and representatives from other departments as needed. The team identifies essential elements of the health care system that encourage high-quality chronic disease care: The community; health system; self-management support; delivery system design; decision support, and clinical information systems. Within each of these elements, there are specific concepts that teams use to direct their improvement efforts. As the complexity and number of patients seeking care for chronic illness grows, primary care practices are being required to organize in new ways to improve both care and access for these patients. Moving to team based care is integral to maintaining our Patient Centered Medical Home Certification and improving patient outcomes.

Upcoming Quality Events

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Where</th>
<th>What</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 8th</td>
<td>On-going</td>
<td>SMC Facility-Wide</td>
<td>Go-Live and begin using Tell-Me 3 and open ended Q’s to all patients</td>
</tr>
<tr>
<td>January 22nd</td>
<td>1:30-2:30</td>
<td>Board Room</td>
<td>Diabetic Education</td>
</tr>
<tr>
<td>January 30th</td>
<td>1:30</td>
<td>Hansen A &amp; B</td>
<td>Care Transitions Collaborative</td>
</tr>
</tbody>
</table>
The Teach Back Method

1. Use a caring tone of voice and attitude.
2. Display comfortable body language.
3. Use plain language.
4. Ask the patient to explain back, using their own words.
5. Use non-shaming, open-ended questions.
6. Avoid asking questions that can be answered yes or no.
7. Emphasize that the responsibility to explain clearly is on you, the provider.
8. If the patient is not able to teach back correctly, explain again.

Did you know?
Studies have shown that 40-80% of the medical information patients receive is forgotten immediately?

Tell Me 3
1. Tell me your main concern.
2. Tell me what you need to do.
3. Tell me why it’s important for you to do this.

Open-Ended Q’s
1. Tell me about...
2. Why do you think...?
3. What would happen if...?
4. Why do you think...?

Infection Control Corner
Remember:
- Stay home if you are sick!
- Do NOT come to work if you have a fever!
- Wash your hands frequently!
- Cover your cough/sneeze using your elbow!

Proper way to wear a mask

SMC is participating in an NRC case study as of now! We have identified Nurse Communication to be a significant key driver to improve a patient’s experience and this is the area we would like to focus on.

Please help improve patient literacy by educating each patient every time you are in the room. Use the Teach-Back Method and the Tell Me 3 Method to help them understand more and always use open-ended questions. Remember, education ALWAYS begins on admission!

Influenza Control Corner

<table>
<thead>
<tr>
<th>Nebraska Influenza Data</th>
<th>% of influenza test</th>
<th>18.46%</th>
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</thead>
<tbody>
<tr>
<td>% of RSV rapid test</td>
<td>18.98%</td>
<td></td>
</tr>
<tr>
<td>Influenza-associated hospitalizations</td>
<td>194 inpatients</td>
<td></td>
</tr>
<tr>
<td>% of ED visits due to influenza</td>
<td>4.85%</td>
<td></td>
</tr>
<tr>
<td>% of school absence due to illness</td>
<td>4.85%</td>
<td></td>
</tr>
<tr>
<td>Number of influenza outbreaks reported</td>
<td>15</td>
<td></td>
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<tr>
<td>Influenza-associated mortality— all ages</td>
<td>4</td>
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<tr>
<td>Influenza-associated pediatric mortality</td>
<td>0</td>
<td></td>
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Synopsis for Week Ending December 23rd 2017

SMC’s NRC surveys will now be “real-time” for the ED, surgery, outpatient, imaging, and lab. Clinic has had great results with this survey and we are excited to see what feedback our patient’s will give us! Please inform your patient’s that they may receive a call, text or e-mail within 24 hours after they leave SMC. You will also see flyers around the building. If you need some for your department contact someone in the Quality Department at ext. 531.