

Patient Family Advisory Council

Health Care For All Report 2022

Boston Medical Center is New England’s largest safety net hospital. Nearly 75 percent of our patients come from underserved populations, such as the low-income and elderly, who rely on government payers such as Medicaid, the Health Safety Net, and Medicare for their coverage. In addition, more than 27 percent of our patients do not speak English as a primary language. As part of our dedication to serving everyone, we offer all our medical care and services in over 263 languages through our Interpreter Services program.

The PFAC has existed at BMC since 2010. Since 2021, we’ve been undergoing a revamp to achieve two goals:

- Recruit new members to strengthen the PFAC’s representation of BMC’s patient population
- Increase collaborative practices

Quick facts about the BMC PFAC:

- The PFAC is focused on adult healthcare (18 years upwards)
- We meet virtually outside of 9-5 hours for 1.5 hours every month
- Patient and family advisors are reimbursed for their time

After the COVID-19 pandemic halted the PFAC in 2020, we came back together in April 2021 with the aim to recruit at least 7 more members in 2022 and refresh our purpose, scope, and goals for impact.

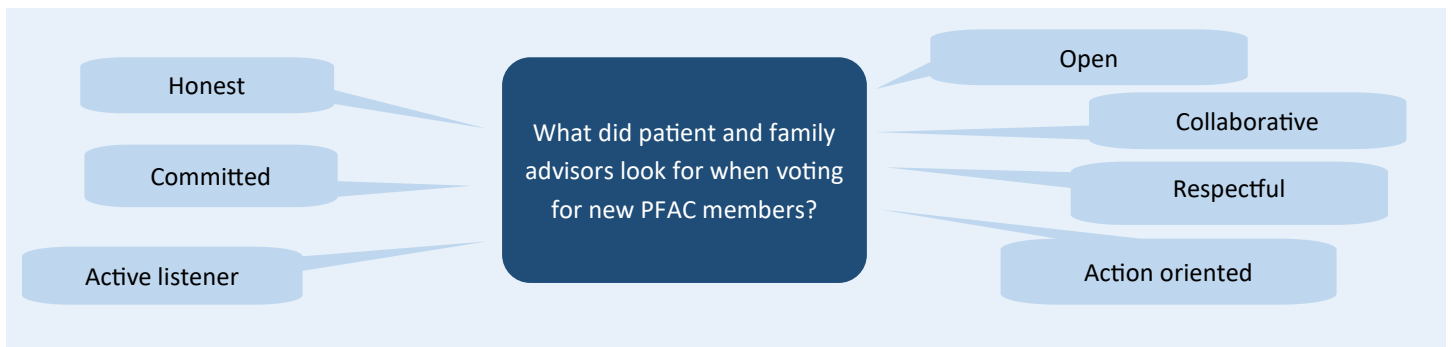
Recruitment calendar

Apr '21	Oct '21	Jan '22	Breakdown
3 Advisors 1 staff member	4 Advisors 1 staff member	6 Advisors 4 staff members	<p>Since April 2021:</p> <ul style="list-style-type: none"> • 3 new advisors have joined • 1 advisor has left due to family circumstances • 5 guests were invited to a PFAC meeting • Sept 2022 update: • 4 guests have been invited to join the PFAC • 1 guest will attend the October '22 meeting • 4 new staff members have joined <p>By November 2022, the PFAC will have 10 Patient Family Advisors and 5 staff members.</p>
Apr '22	Aug-Sept '22	Oct '22	
6 Advisors 5 staff members	5 Advisors 4 guests 5 staff members	9 Advisors 1 guest 5 staff members	

A shared approach to recruitment

Patient and family advisors had an active role in shaping the recruitment strategy and selecting new members. Examples are:

- Electronic recruitment flyer that was created by advisors and BMC staff
- Designing the outreach strategy and materials
- Presenting at Meet and Greets for prospective members to find out more about the PFAC from advisors
- Voting on applications to agree on top candidates



- How we reached out people interested in joining the PFAC:**
- Internal communications
 - Posts in newsletters to nursing, management, physicians etc.
 - Posts in system-wide newsletters to all staff
 - Requests for patients to be referred to the PFAC
 - Word of mouth
 - Calls to action at team meetings
 - Patient-facing communications on campus, e.g. electronic signage in clinics
 - Digital communications
 - BMC website
 - BMC social media
 - NRC Community Insights survey

Nursing's Top 5

The Week Ahead

- Informing, advising, and solving problems...**
- Alongside a shared focus on recruitment, the PFAC have still found time to lend their expertise and insight to ongoing initiatives at BMC. This year has brought a number of clinicians, directors, and senior leadership to seek guidance on:
- Campus redesign
 - Patient facing materials, e.g. welcome packets for inpatients and information cards about clinical roles
 - Wheelchair access
 - BMC webpages



Laying the groundwork for success

Laying the groundwork for a successful PFAC is important to us. That's why we have been intentional and strategic throughout our recruitment phase. Other things the PFAC have been doing to prepare for a year of impact in 2023 are:

- Designing a **feedback form** to effectively communicate with teams across the system
- Sharing **patient stories** and matters '**close to the heart**' to reflect on what we find important and how improvements can be made
- Inviting different teams to speak with us, e.g. Patient Advocacy, to learn **about different parts of the system** and how they affect patient experience

Contact us
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