



2020 ANNUAL REPORT

CAROLINE DELONGCHAMPS, PFCC MANAGER

PATIENT- AND FAMILY- CENTERED CARE

Department:

Caroline DeLongchamps, PFCC Manager

Kelly Loyd, Volunteer Patient and Family
Advisor and Family Faculty

Quintyn McKaughan, PFCC Volunteer

Reports to:

Dr. Danielle Scheurer, CQO

MUSC Health System

Dr. David Bundy, CQO

MUSC Charleston

When patients, their families, doctors, nurses, and other healthcare professionals form a partnership that benefits everyone, this is Patient-and Family-Centered Care (PFCC).

It means working “with” patients and families,
rather than just doing “to” or “for” them.

Our ultimate goal is for MUSC care team members, patients and
families to work together to ensure the best outcomes and enhance
the quality and safety of health care.

OUR FOCUS

Core Concepts of Patient- and Family-Centered Care

from the Institute for Patient-and Family-Centered Care (IPFCC)

Dignity and Respect

Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of care.

Information Sharing

Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete and accurate information in order to effectively participate in care and decision-making.

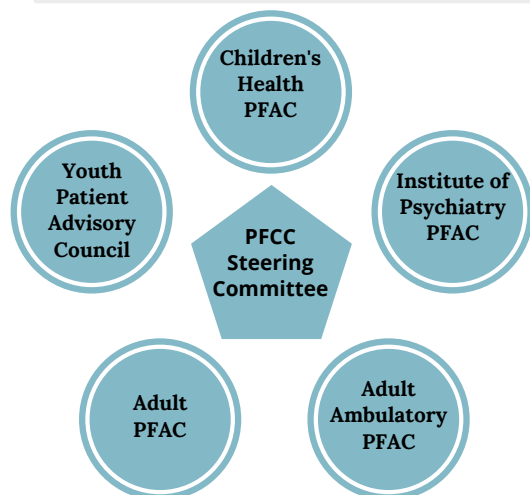
Collaboration

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

Participation

Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.

PATIENT AND FAMILY ADVISORY COUNCILS (PFACS) & FAMILY FACULTY



A PFAC is a meaningful partnership between patients, their families and MUSC care team members. Patients and families work as advisors by sharing their unique perspectives that can help MUSC Health improve the way care is delivered. All of our PFACs meet monthly.

We call these volunteers Patient and Family Advisors (PFAs). Each Council is chaired by a volunteer PFA and MUSC care team members serve as staff liaison, executive champion and standing members.

In addition to the PFACs, PFAs may serve on hospital committees and/or the Family Faculty program. Family Faculty members teach the core concepts of PFCC by sharing their stories in our 6 colleges.

**66 PFAs + 50 Care Team Members =
116 Total PFAC Members**

14

Orientation/education sessions taught by PFAs

22

Committees with PFA participation

1,770
Record # of PFA Hours Donated!

PFCC STEERING COMMITTEE

This team includes members from each PFAC as well as key stakeholders in the organization. The idea is to come together to share best practices from each Council and create innovative ways to foster a culture of partnerships at the health system level.

The PFCC Steering Committee meets monthly and has been successful connecting people who might not otherwise interact with one another to promote a PFCC culture.

COMMITTEES WITH PFA PARTICIPATION

1. Rounding on families prior to CHWP Move-Day
2. Safety Rounds
3. Scarce Resource Allocation Policy Review with the Ethics Committee
4. Welcome Video for GetWell Network
5. PFCC Steering Committee
6. Design Team for Williamsburg Hospital
7. Critical Care Quality
8. Patient Engagement Operations Committee
9. Task force to redesign the Emergency Department
10. Covid Screening Team
11. Patient and Family Education
12. MyChart Steering
13. Tracer Task Force - Ambulatory Clinics
14. Quality Executive Committee
15. Ambulatory Rounding for Warm Greetings
16. Family Presence Policy in Pre-Op Areas
17. Artwork Committee
18. Root Cause Analysis
19. Pre-Admission Checklist for Children and Women's (SJCHWP)
20. Family Resource Guide (SJCH/PTWP)
21. L & D and NICU signage and Wayfinding (SJCH/PTWP)
22. IOP Partnership Forum

ORIENTATION/EDUCATION SESSIONS TAUGHT BY PFAs

1. IP-741; Fall and Spring courses that included Student Interviews with 20 PFAs
2. D+I Training: "Hear with your Eyes and See with your Heart"
3. IP Caregiver course for PT/OT/PA students
4. Patient Safety Webinar
5. Patient Story filmed for the Patient Story Library
6. More Than Words Class - College of Pharmacy
7. IOP Orientation - 8 sessions of "A Walk in their Shoes" presented by PFAs during new care team member orientation.

PFAC HIGHLIGHTS



CHILDREN'S HEALTH PFAC

- A PFA created a membership list including head shots and biographies of each member.
- Several PFAs provided input on the Scarce Resource Allocation Policy with the Ethics Committee.
- One PFA worked with a physician to create a presentation for several public webinars on COVID-19 as it related to the re-opening of schools.
- Reviewed countless patient-facing documents including a COVID + results notification letter, patient-facing tip sheets, and the MyChart/Proxy.
- A PFA is a member of a national group called Improving Renal Outcomes Collaborative (IROC).
- Reviewed new menu for SJCHWP and made recommendations and additions.
- Worked with the GWN team to edit the Welcome Video script and participate in filming.

YOUTH PATIENT ADVISORY COUNCIL

- Their work included recruitment strategies, discussions about the challenges of the pandemic and quarantine.
- Continued discussions about the challenges of online school, wearing masks and concerns with peer group interactions.
- Participated in a mask-wearing video that was shared on social media platforms.
- Discussed the pros and cons of virtual medical visits and gave input on a pre-admission checklist for patients and families.

INSTITUTE OF PSYCHIATRY PFAC

- Recruited 2 new PFAs and 6 new CTMs including a physician, nurse manager, director and the administrator for IOP.
- Advisors participated in new employee orientation by sharing their stories.
- The council supported numerous programs and donations including the Rides and Resources for Recovery and Project CART.
- Supported NAMI Charleston Area programs to include local mental health education and support programs.
- An Amazon Patient Wish List was created to provide opportunities for staff, families and community partners to donate comfort items.

ADULT PFAC

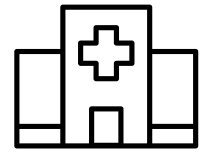
- Several members attended weekly Safety Rounds. They also served on various committees such as Quality Executive Committee, Critical Care Quality, PFCC Steering, and several design teams for new MUSC Health locations.
- 3 PFAs served on the Family Faculty program and taught a class to Pharmacy students.
- Participated in a mask-wearing video that was shared on social media platforms.

ADULT AMBULATORY PFAC

- The chair started debrief and planning sessions with the PFCC mgr following each monthly PFAC meeting.
- PFAs attended multiple national webinars to learn what other organizations were doing during the pandemic.
- A PFA participated in a national webinar for Vizient as a speaker.
- A PFA taught a class for MUSC care team members about providing compassionate health care.
- PFAs conducted interviews with students for IP-741, an interprofessional course for first and second year students.
- A PFA participated in The Patient and Family Advisory Network as well as the National HIT Advisory Council.
- Mask-wearing PSA recorded and shared on social media platforms



SJCH/PTWP MOVE DAY!



The week before the move to **Shawn Jenkins Children's Hospital and Pearl Tourville Women's Pavilion (SJCH/PTWP)**, PFA's provided gift bags to parents in the old hospital. Bags included a Family Resource Guide, instructions about the move, meal tickets and a parking pass.

On the day of the move, they distributed approximately **185 Welcome Bags** to each patient room. These bags were designed by the Child Life Department and PFAs helped assemble and deliver. Depending on the age of the patient, the bag contained a pillowcase or quilt, along with some fun items like sunglasses, a stress ball and a coloring book.



11 PFAs spent **52 hours** helping acclimate families to the new building.

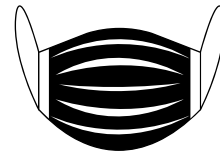
PRIOR TO MOVE DAY:

- PFAs rounded on families to provide information and resources.
- 2 PFAs gave tours to family members who would be transitioning to the new NICU.



- **26 family members** were involved in the design of the new hospital for over a year.
- A volunteer family leader who organized parent involvement was integral in this process from the selection of architects all the way up to move day. A total of **7 years** working on this project!

GLOBAL PANDEMIC



In March everything changed. The foundation of a PFCC culture is ensuring families are not considered visitors but valuable members of the team. COVID-19 forced us to restrict visitation, which meant our patients would receive care isolated from family and loved ones.

Emergency operations included a restricted family presence and visitation policy to ensure the safety of our patients, families and care team members.

However, when MUSC moved into emergency operations, so did our PFACs. They never missed a meeting and they got to work right away assisting with the new language in the family presence and visitation guidelines!



“Thank you for allowing me to be part of the solutions to these current challenges. I know I say some critical, hard to hear and even humorous things, but I promise it is to help improve MUSC Health because we are the best hospital in the state. -Connie Montgomery, PFA”

PFA OFFICE HOURS

Children's Hospital leaders, Dr. Mark Scheurer, Chief of Children's & Women's, and Amy Hauser, RN and Administrator for Children's and Women's, decided to create weekly PFA Office Hours shortly after moving into emergency operations. "The monthly PFAC meetings just aren't enough" said Dr. Scheurer. He and Amy wanted to establish a way to hear directly from our families to understand what they were experiencing. In addition, they wanted to keep PFAs informed about what was happening in the hospital.

Things were changing very quickly and they knew we were going to make mistakes. However, they also knew that we could course-correct much faster with our PFAs working with us in real time.

END OF LIFE FAMILY PRESENCE FOR COVID + PATIENTS

Following months of heart-breaking stories and moral distress experienced by care team members and families, a policy was developed to allow family presence for dying patients.

My father received amazing care for two weeks while a patient at MUSC. The nurses made sure that the end of his life was peaceful. The hardest part was not being able to be with him. So instead, our entire family gathered outside, found a beautiful spot in the shade, played his favorite music and prayed. Not being at his side during this time was heartbreaking.

-Son of an MUSC COVID + patient

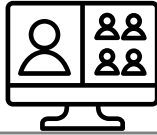
The PFCC Manager worked with Palliative Care, nursing leadership and the legal department to craft a policy that would provide guidance and support for family members who wanted to visit a loved one dying from COVID-19.

In addition, this provided support for our care team members who were experiencing moral distress as a result of caring for patients dying alone.

On October 23, for the first time since the COVID crisis started, our teams worked together to ensure a family was together to say good-bye to their loved one.

TIMELINE OF THE YEAR

January 21: CDC announces first US Coronavirus case.



March 5: PFA presents for Vizient Webinar, "Integrating the Patient Voice".

March 24: PFAs offered feedback on friendly messaging to families for the "Street Sweeping" initiative in the CH.

March 30: PFA guidance on using telecommunications for family visitation.

April 30: PFAs filmed thank you videos that were shared with care team members across the health system.

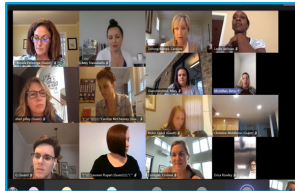
April 15: PFAs write a Guiding Principles document for the staff to encourage the use of technology during rounds.

March 17: PFAC helps write new family presence and visitation guidelines.

March 30: PFCC Mgr. worked with the President's office to make the case for iPad donations.

April 13: PFACs worked with the Patient Safety Mgr. to secure donations for the Delirium Project and provided a list of items for isolated patients.

March 17: MUSC Health moves into Emergency Operations and the CH PFAC is the first to meet virtually.



April 13: Mark Scheurer and Amy Hauser create weekly "PFA Office Hours" for the CH PFAC.

April 17: PFAs write scripting for nurses to explain the restricted visitation policy, the risk of visiting in person and how we would communicate with families.

April 20: During PFA Office Hours, a member shared her story which resulted in a policy change, allowing parents to be present for a COVID test when appropriate.




July 7: A PFA writes a tip sheet to help patients complete registration and MyChart activation for COVID testing.

October 23: Family presence is permitted for a patient dying with COVID-19.

May 26: PFAs assist with writing the Adult Ambulatory mask guidance information sheet.

June 19: PFAs craft patient and family facing messaging regarding the new universal COVID screening policy for all admissions.



September 22: The PFCC Department and Human Resources collaborated to involve PFAs in all interviews 'Administrator' and above.

June 1: PFAs review and offer feedback on the Scarce Resource Allocation Policy with the Ethics Committee.

August 5: Two families invited to share their experiences during a meeting with PICU physicians.

July 17: The Adult and CH PFAs created videos about the importance of wearing masks to protect our healthcare workers and community. These were shared on social media platforms.

August 20: MUSC "Welcome Back" Letter for patients written by a PFA for distribution by the CEO.

April 22: "The Vanishing Patient" survey with PFAs. Answers were provided to the CEO.

1. Are you afraid to come to an MUSC facility?
2. What would make you feel safe?

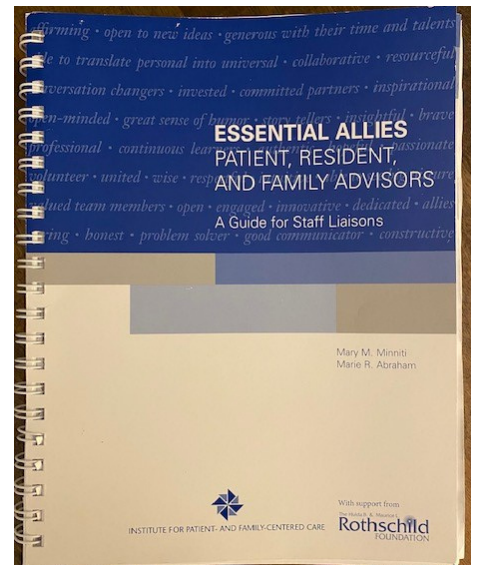
December: PFAs invited by the CQO to serve on the Vaccine Task Force.



PFAC WORKSHOP FOR THE RHN'S

Presented by: The PFCC Manager and a Volunteer PFA

- The workshop was held at MUSC Health Florence.
- The purpose was to teach the RHN's the importance of having PFACs, how to get started and how partner in meaningful ways with patients and families.
- We welcomed care team members from Florence, Lancaster and Marion and we talked about the importance of:
 - Building relationships
 - Finding PFCC champions in their respective hospitals
 - Educating care team members about PFCC/PFAC
 - Finding what inspires you
 - Creating your elevator speech
- Each staff liaison received a copy of *Essential Allies*, a resource guide from the Institute for Patient-and Family-Centered Care



PFAC DEEP DIVES

The PFCC Steering Committee spent 5 months conducting "Deep Dives" into each PFAC.

During the PFCC Steering meetings, the staff liaison and chair of each PFAC shared the history, accomplishments and challenges of the Council.

The 5 PFACs identified accomplishments to celebrate as well as barriers and challenges to address. Following the final presentation, 2 PFAs presented a summary of the collective presentations. They included membership, PFAC engagement, facilities, document reviews and patient engagement.

A few accomplishments included:

- Active involvement with patient safety improvement efforts
- Parental presence during anesthesia induction
- Family badges instead of "visitor badges" for parents
- PFAs speaking at orientation for new care team members
- PFA influence on patient-facing documents and policies

Barriers included:

- Recruiting more diverse members
- Identifying projects
- Lack of organizational awareness of the PFAC
- Virtual meetings hindering relationship building



The lack of diversity for all 5 PFACs was identified as the most common barrier and the most critical to address. A decision was made to create a Diversity and Inclusion task force that would be co-chaired by a PFA and a member of the MUSC D+I team.

THE POWER OF ONE

A VOLUNTEER PFA AND FAMILY FACULTY MEMBER CREATES PARTNERSHIPS IN MANY WAYS.



COMMITTEES

- QUALITY EXECUTIVE COMMITTEE
- CHWP NUTRITION MANAGEMENT
- PFCC STEERING
- PATIENT ENGAGEMENT OVERSIGHT
- WEEKLY CHWP PFA OFFICE HOURS
- PEDIATRIC TELEHEALTH TASK FORCE
- ADULT AMBULATORY PFAC
- ADULT PFAC
- 2 WEST EMERGENCY DEPT. REDESIGN TASK FORCE
- CHWP ARTWORK COMMITTEE



EDUCATION

- COORDINATOR FOR THE FAMILY FACULTY PROGRAM
- CO-FACILITATED REGIONAL HOSPITAL PFAC WORKSHOP
- VIZIENT WEBINAR PRESENTATION
- PFA PANELIST FOR VIZIENT WEBINAR ON OPENING UP HEALTHCARE SETTINGS
- PRESENTED AT PEOC
- PRESENTED AT PATIENT SAFETY WEBINAR
- CH GRAND ROUNDS PLANNING



RCA'S PARTICIPATED ON 24 ROOT CAUSE ANALYSIS MEETINGS



ROUNDING

- CHWP SAFETY ROUNDS
- SAFETY WEEK ROUNDING
- ADULT SAFETY ROUNDS



INTERVIEWS

- PARTICIPATED IN INTERVIEW FOR SENIOR ENGAGEMENT COORDINATOR
- PARTICIPATED IN SENIOR LEADER INTERVIEW - IOP ICCE ADMINISTRATOR
- PARTICIPATED IN NICU, FAMILY RESOURCE COORDINATOR/MARCH OF DIMES POSITION



560 HOURS OF VOLUNTEERING FOR PFCC THATS EQUIVALENT TO A .25 FTE



COVID - 19

- CONTRIBUTED TO COMMUNICATION TO PATIENTS AND FAMILIES RE: INPATIENT TESTING
- COVID-19 SCREENING CALL TRAINING SESSION
- COVID SCREENING CALLS
- TELEHEALTH TIP SHEETS
- PATIENT-FACING TIP SHEETS FOR USE OF TECHNOLOGY
- SCRIPTING FOR NURSES FOR ENGAGING PATIENTS WITH TECHNOLOGY



MEDIA

- INTERVIEW RE: CHILDREN'S PFACS - DEBORAH DOKKEN + BEV JOHNSON
- INTERVIEW WITH ARCHITECTURAL DIGEST RE: CHWP
- PARTICIPATED IN APPLE PHOTO SHOOT
- RECRUITING & COORDINATING PATIENTS AND FAMILY FOR APPLE PHOTO SHOOT
- RECRUITING & COORDINATING VOLUNTEERS FOR ARCHITECT EXTERIOR PHOTO SHOOT



MEETINGS

- SAFETY COACH MEETINGS
- PARTICIPATED IN SD & DD MEETINGS FOR NEW MUSC WILLIAMSBURG/LAKE CITY HOSPITAL
- LAKE CITY/KINGSTREE SITE VISIT
- WILLIAMSBURG/LAKE CITY INTERIOR DESIGN MEETINGS
- ADULT PFAC STRATEGY MEETINGS
- L&D AND NICU WALKTHROUGHS WITH ART COMMITTEE MEMBERS & RN MANAGER TO ASSESS WAY FINDING ISSUES - SBAR SUBMITTED FOR RESOLUTION
- MEC GUIDING PRINCIPLES MEETING



CHWP MOVE

- 14 HRS ON MOVE DAY:
- ASSEMBLED & DISTRIBUTED 118 BAGS
- ASSEMBLED & DISTRIBUTED PRE-MOVE PACKETS TO NURSING STAFF
- COORDINATED AND ORIENTED PARTICIPANTS FOR PRE-MOVE AND MOVE DAY ROUNDING
- PARTICIPATED IN OVERHAUL OF CH PATIENT & FAMILY RESOURCE GUIDE
- REVIEWED & COMMENTED ON COUPLET CARE GUIDELINES
- CONTRIBUTED TO CH USNWR SUBMISSION

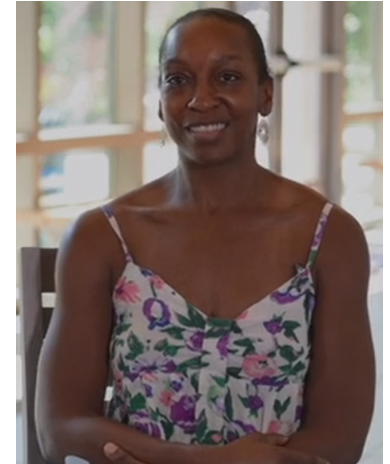
PFCC EDUCATION

PATIENT STORY LIBRARY

We give patients and their families the opportunity to educate care team members by sharing their stories.

The videos are located in MyQuest for students, faculty and care team members at MUSC Health. Stories can be used to start a meeting, connect to purpose or share with others to teach the core concepts of PFCC.

In the wake of George Floyd's death, Leslie Jackson shared her story about what it felt like to be a black woman receiving care in a predominantly white environment. In her video she describes ways in which health care workers can address issues related to health care disparities.



MORE THAN WORDS

In collaboration with the Office of Humanities, Family Faculty members tell their healthcare stories to MUSC students.

More Than Words is an opportunity for students to listen to personal patient experiences and engage in meaningful dialogue about the value of Patient- and-Family-Centered Care.

Sessions provide an introduction to the *medical humanities*, *narrative medicine*, the *Family Faculty program* and their expanding role in health care education and practice.

In 2020 we had the opportunity to conduct a session with the College of Pharmacy prior to COVID cancelling future classes.

PFCC IN STUDENT CURRICULUM

Nationally innovative and recognized by Vizient and the IPFCC, these IP courses were co-created by the PFCC manager and Faculty members from the University.

IP 741-CLINICAL CARE/PATIENT-AND FAMILY-CENTERED CARE (SPRING AND FALL)

IP-741 is a required interprofessional course offering and PFCC is one of the options in this section!

The course consists of four face-to-face sessions, online modules and a group project in which students develop and present a patient-centered solution to a design challenge. Students access the Patient Story Library to learn how to create an empathy map as well as the core concepts of PFCC. They also conduct interviews with PFA's for this class. A volunteer advisor organizes the participation of PFA's to prepare them for the student interview.

IP CAREGIVER CLASS

This class was offered to PT, OT and PA students. Following a presentation about narrative medicine from the Director of Humanities, the PFCC manager shared a brief explanation about the core concepts of PFCC and introduced a PFA and her husband. They shared their stories and answered questions from the students. The session helped provide a greater understanding of the challenges for caregivers.

HUMANITIES FLEX: COLLEGE OF MEDICINE

This class included a patient story as well as an overview of PFCC and current efforts at MUSC Health. There was time for discussion with the students as well so they had an opportunity to ask questions specific to their areas of interest.

AWARDS + RECOGNITION



- **Mark Scheurer and Amy Hauser** - Annual Quality Year-in Review Awards PFCC Partnership Award;
 - Mark and Amy received this award for starting weekly PFA Office Hours soon after the COVID-19 crisis began.
- **Caroline DeLongchamps** - Fresh Voices in Humanities, Governors Award
- **Caroline DeLongchamps** - Outstanding Service to Interprofessional Education, MUSC
- **IOP PFAC** - Donations received to support the "Rides and Resources for Recovery (\$1,500) and Project CART (\$1,500)

SPEAKING ENGAGEMENTS



CAROLINE DELONGCHAMPS

- Children's Hospital Association; Dallas, TX
Next Generation of Quality in Children's Healthcare Design Workshop
"Patient and Family Vision for Health and Healthcare Design Workshop"
- Virginia Hospital and Healthcare Association Patient Safety Summit - Richmond, VA
Keynote - "The Journey to Patient- and Family-Centered Care"
- The Children's Hospital Association - Keynote Kansas City, MO - Virtual
"The Journey to Patient- and Family-Centered Care"
- VA Strategic Planning Retreat - Keynote VA - Charleston, SC
"Patient- and Family-Centered Care for High Reliability"
- Vizient National Webinar Virtual
"Increasing Patient and Family Confidence While Ramping Up"
- Vizient Video Video shared nationally
"MUSC-Patient and Family Advisors and the Power of One"
- IPFCCs 9th International Conference; Partnerships for Quality Virtual
"Ask An Expert" session

ADDITIONAL SPEAKERS

- Vizient Webinar - Kelly Loyd, Dr. Danielle Scheurer and Caroline DeLongchamps Virtual
"Integrating the Patient Voice"
- Vizient National Webinar - Kelly Loyd and Gwyn Hargrett Hunter (PFA's) Virtual
"Connecting with Patients during COVID-19 - A Panel Discussion"

STORIES PROMOTE CHANGE

PFAS SHARE THEIR EXPERIENCES TO MAKE A DIFFERENCE

PFA TEACHES ABOUT COMPASSION IN HEALTHCARE

Connie Montgomery taught a class called "Hear With Your Eyes and See With Your Heart" about the importance of providing compassionate care to patients and their families. MUSC care team members received Diversity & Inclusion credit for attending the class.



Connie Montgomery

PATIENT STORY INITIATES POLICY CHANGE

During one of the weekly "PFA Office Hours" calls, Stephanie Lee shared her experience with her daughter who had to have a COVID test. The two were separated for the test and while Stephanie understood the reason for this, Abby did not. It took several nurses to hold her down and she was very upset.



Abby and Stephanie Lee

Stephanie suggested that it would be less traumatizing for Abby if she could be one of the people to hold Abby down, thus reducing the risk of transmission of the virus to one of our care team members. Our leaders were grateful to hear the story only moments after it happened and the policy was changed within 24 hours. This change made it possible for a parent to be present for a COVID test when appropriate.

ADVOCATE FOR VISUALLY IMPAIRED PATIENTS AND FAMILIES

Linda Jenkins is blind and she shared an experience about the difficulty she had riding an elevator at one of our clinic locations. The elevator lacked audio support so navigating her way to the appropriate floor was a challenge.



LINDA JENKINS

After sharing her experience, leaders ensured the elevators were equipped with the proper technology to ensure our visually impaired patients and families could navigate the building.

PATIENTS TEACH THROUGH STORY



Kristen Barner and her husband David spoke with students from the College of Health Professions. They shared Kristen's story and explained her injury as well as the complications of living with a disability. David spoke about caring for his wife and answered questions from the students about how to care for the caregiver. Following the class, Kristen and David were invited to attend the presentation of projects done by students. One student presented Kristen with this beautiful painting and said it reminded her of Kristen and David's story.

NORTH STAR DURING COVID CRISIS

This message from the Charleston CQO, David Bundy, M.D. appeared in the CEO's "Clinical Connections" e-mail and reminded MUSC care team members that our patients and families are at the center of everything we do.

Patient- and family-centered care (PFCC) is a North Star principle at MUSC Health. By that I mean that PFCC concepts guide our way as a system. When we are uncertain about how to proceed, striving to keep patients and families at the center of our care keeps us 'on course.'

These past few weeks in the COVID-19 era have underscored for me the importance of PFCC to our work at MUSC. Caroline DeLongchamps, MUSC Health's Manager of PFCC, recently reminded me of the four core concepts of PFCC: respect and dignity, information sharing, participation and collaboration. Each of these concepts not only applies every day to our work, but has specific applications as we dramatically reimagine our care processes during and after the ongoing pandemic.

Fortunately, lessons learned from prior pandemics can help us. Bev Johnson, President and CEO of the Institute for Patient- and Family-Centered Care (IPFCC), recently wrote:

[We] learned many important lessons from the SARS global outbreak in 2003. Among these lessons was that more thoughtful policies and practices were needed to support the physical health and mental well-being of patients, families, and the staff and clinicians working in health care settings. While infection prevention is paramount, we must also consider how to provide support for the physical and psychological safety and comfort of patient and families. Fortunately, in contrast to 2003, we have technology that can be used in creative ways to help maintain connections, lessen the impact of social isolation, and promote health and well-being.

During this time, patient and family advisors (PFAs) ... can serve as important partners in ensuring safety, communicating credible and understandable information, and in facilitating outreach to communities. Coordinators of PFCC and staff liaisons are in a critical position and can collaborate with PFAs to:

- *Develop and convey accurate and science-based public health messages about COVID-19 to the broader community;*
- *Implement a variety of strategies, including the creative use of technology, to minimize the impact of social isolation and contribute to patient safety, health, and well-being; and*
- *Be part of the team communicating appreciation and providing support for the health care workforce. Working virtually and using technology tools, PFCC coordinators and staff liaisons in collaboration with PFAs can also help develop training for front-line staff who are implementing family presence and visiting restriction policies to prevent further spread of COVID-19. They can ensure that respect is conveyed to all and the concepts of partnership and family connection are reinforced.*

I couldn't agree more, and I hope that each of you will continue to view PFCC as your North Star, guiding you through these challenging yet meaningful times.

*Dr. David Bundy, MD, MPH, FAAP
MUSC Charleston, Chief Quality Officer*

