



MARYLAND
Health Care
Commission



Maryland Health Care Commission
LEARNING NETWORK

Optimizing the Role of Patient and Family Advisory Councils

An MHCC Learning Network Event

MARCH 14, 2025

CME Disclosure, Accreditation and Designation Statement



▶ **Accreditation Statement**

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint providership of MedChi, The Maryland State Medical Society and the Maryland Health Care Commission. MedChi is accredited by the ACCME to provide continuing medical education for physicians.

▶ **Designation Statement**

MedChi designates this virtual meeting for a maximum of 1AMA PRA Category 1 Credits. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

▶ **Disclosure Statement**

The planners and reviewers for this activity have reported no relevant financial relationships to disclose.

Learning Objectives



- ▶ Define PFACs and their role in healthcare
- ▶ Highlight key benefits and success stories
- ▶ Share actionable strategies for effective implementation



AGENDA

- I. **Gene Ransom**, *MedChi*, Opening Remarks
- II. **Melanie Cavaliere**, *MHCC*, Overview of Maryland Landscape and MHCC Practice Transformation Activities
- III. **Ron Cox**, *Director, Patient Experience, Johns Hopkins Community Physicians*, Subject Matter Expert
- IV. **Allyson Crouse**, *Patient Experience Manager, Johns Hopkins Community Physicians*, Subject Matter Expert
- V. **Pamela Brooks**, *Johns Hopkins Community Physicians, Water's Edge*, practice perspective
- VI. **Sarah Crislip**, *Johns Hopkins Community Physicians, Greater Dundalk*, practice perspective
- VII. Q&A





MedChi, The Maryland State Medical Society (MedChi)





Advancing Practice Transformation



Background



- ▶ Advancing practice transformation has been an MHCC strategic priority for more than a decade
- ▶ Maryland law tasked MHCC with implementation and management of the Maryland Multi-Payor PCMH Program from 2011 through 2016
- ▶ The MHCC, MedChi, and the University of Maryland School of Medicine Department of Family and Community Medicine partnered with the New Jersey Innovation Institute to complete practice transformation activities in Maryland as part of the federal Transforming Clinical Practice Initiative from 2015 to 2019
- ▶ The MHCC has contributed to planning and policy development for the Maryland Primary Care Program since its inception in 2017

Advancing Practice Transformation

Program Overview



- ▶ In June 2021, MedChi CTO was competitively awarded a grant to complete transformation activities
- ▶ A crucial role of MedChi CTO is providing practice coaching on specific transformation topics and approaches, such as quality improvement and tools to help sequence and manage change essential to succeed in a value-based care model
- ▶ Program milestones:
 - Milestone 1 – Readiness Assessment
 - Milestone 2 – Workflow Redesign
 - Milestone 3 – Training
- ▶ Approximately 86 practices have completed program milestones to date

Learning Network Events



- ▶ The MHCC convenes peer learning network events in collaboration with local and national health care leaders on topics such as health equity, advanced care delivery, and practice transformation
- ▶ More information on learning network events is available at:
mhcc.maryland.gov/mhcc/Pages/apc/apc_icd/apc_icd_learning_networks.aspx



Advanced Care Delivery Events



► Prior events available on the [Learning Network](#) include:

INNOVATIVE CARE DELIVERY MODELS: IMPLEMENTING CONTINUOUS QUALITY IMPROVEMENT

December 2024

Representatives from two physician practices and a subject matter expert discuss areas where care delivery and operations can be improved through data analysis, feedback, and goal setting with clear and measurable targets for improvement. Speakers give examples of how they test new approaches and interventions in their own practices, regularly track progress and adjust as needed to optimize outcomes.

[Watch Now](#)

[Download Slides](#)



EXPLORING CRISP DATA: BEST PRACTICES FOR ACCESS AND USE

October 2024

Representatives from three physician practices and a subject matter expert discuss the value and clinical benefit of utilizing data from CRISP, the State-Designated Health Information Exchange (HIE). Speakers explore ways HIEs can be leveraged to improve care delivery and chronic care management, such as incorporating HIE reports (e.g., radiology and laboratory reports) into practice workflows.

[Watch Now](#)

[Download Slides](#)





New for 2025

Questions to Consider



- ▶ What are some of the challenges your organization has faced in implementing PFACs, and how have you addressed them?
- ▶ How do you measure the impact of your PFAC initiatives, and what key metrics have been most useful?
- ▶ Is a town hall model more effective than a traditional standing PFAC structure?
- ▶ How do you ensure that feedback gathered from PFAC meetings leads to actionable changes within your organization?
- ▶ Can you share a specific success story where PFAC input led to a meaningful improvement in patient care or experience?
- ▶ As you work toward developing PFACs, what lessons from your current model will you carry forward, and what adjustments are you considering?
- ▶ What advice would you give to other healthcare organizations looking to refine or establish their own PFAC programs?



**Ron Cox, Director,
Patient Experience**

**Johns Hopkins
Community Physicians**

Subject Matter Expert



Allyson Crouse, Patient Experience

**Johns Hopkins
Community Physicians**

Subject Matter Expert



Strengthening Healthcare Through Patient and Family Advisory Councils

This presentation will explore the pivotal role of Patient and Family Advisory Councils (PFACs) in enhancing patient-centered care, improving healthcare outcomes, and building trust between providers and communities in Maryland.

Introducing JHCP



LOCATIONS

Over 50+ locations, including a new clinic in Arlington, Virginia, offering primary and specialty care services



SCOPE OF PRACTICE

Comprehensive services covering more than 30 specialties, including Primary Care, Cardiology, Obstetrics and Gynecology, Ophthalmology, Surgery, and Urogynecology and Pelvic Health



MISSION

Committed to bringing Johns Hopkins Medicine's expertise to local communities, ensuring accessible and personalized healthcare

JHCP IS A LEADING HEALTHCARE PROVIDER NETWORK, DEDICATED TO DELIVERING EXCEPTIONAL, PATIENT-CENTERED CARE ACROSS THE REGION.



Purpose

This presentation aims to highlight the vital role that Patient and Family Advisory Councils (PFACs) play in shaping the future of healthcare in Maryland. We will share insights, success stories, and strategies for effective PFAC implementation in the medical practice setting.

Introduction



OBJECTIVE OF THE PRESENTATION

Define PFACs and their role in healthcare, highlight key benefits and success stories, and share actionable strategies for effective implementation.



WHAT IS A PFAC?

PFACs are formal groups that partner patients, family members, and healthcare professionals to improve healthcare delivery.

PFACS PLAY A CRUCIAL ROLE IN ENHANCING PATIENT-CENTERED CARE AND IMPROVING HEALTHCARE DELIVERY.

The Importance of PFACs

- **ENHANCING PATIENT-CENTERED CARE**

Aligning care delivery with individual patient needs, preferences, and values to provide personalized, holistic care.

- **IMPROVING OUTCOMES**

Studies show that active patient involvement in their care leads to better clinical outcomes, reduced complications, and higher patient satisfaction.

- **BUILDING TRUST AND TRANSPARENCY**

Strengthening the relationship between healthcare providers and the communities they serve by incorporating patient and family perspectives.

Core Functions of PFACs



PATIENT AND FAMILY FEEDBACK

Gathering insights from patients and families to shape organizational policies, services, and care delivery.



COLLABORATIVE PROBLEM- SOLVING

Bringing together patients, families, and healthcare providers to address systemic issues in care delivery.



EDUCATION AND ADVOCACY

Informing healthcare staff about the patient and family perspective to improve understanding and care.



DESIGN INPUT

Contributing to the design of healthcare facilities, communication tools, and other patient-facing resources.

PFACS SERVE AS A CRITICAL BRIDGE BETWEEN PATIENTS, FAMILIES, AND HEALTHCARE PROVIDERS, ENSURING THAT THE PATIENT VOICE IS INCORPORATED INTO ALL ASPECTS OF CARE DELIVERY AND SYSTEM DESIGN.

Benefits of PFACs

FOR PATIENTS AND FAMILIES

- Greater involvement in care decisions, feeling valued and heard
- Sense of purpose to be advocates for their community

FOR PROVIDERS

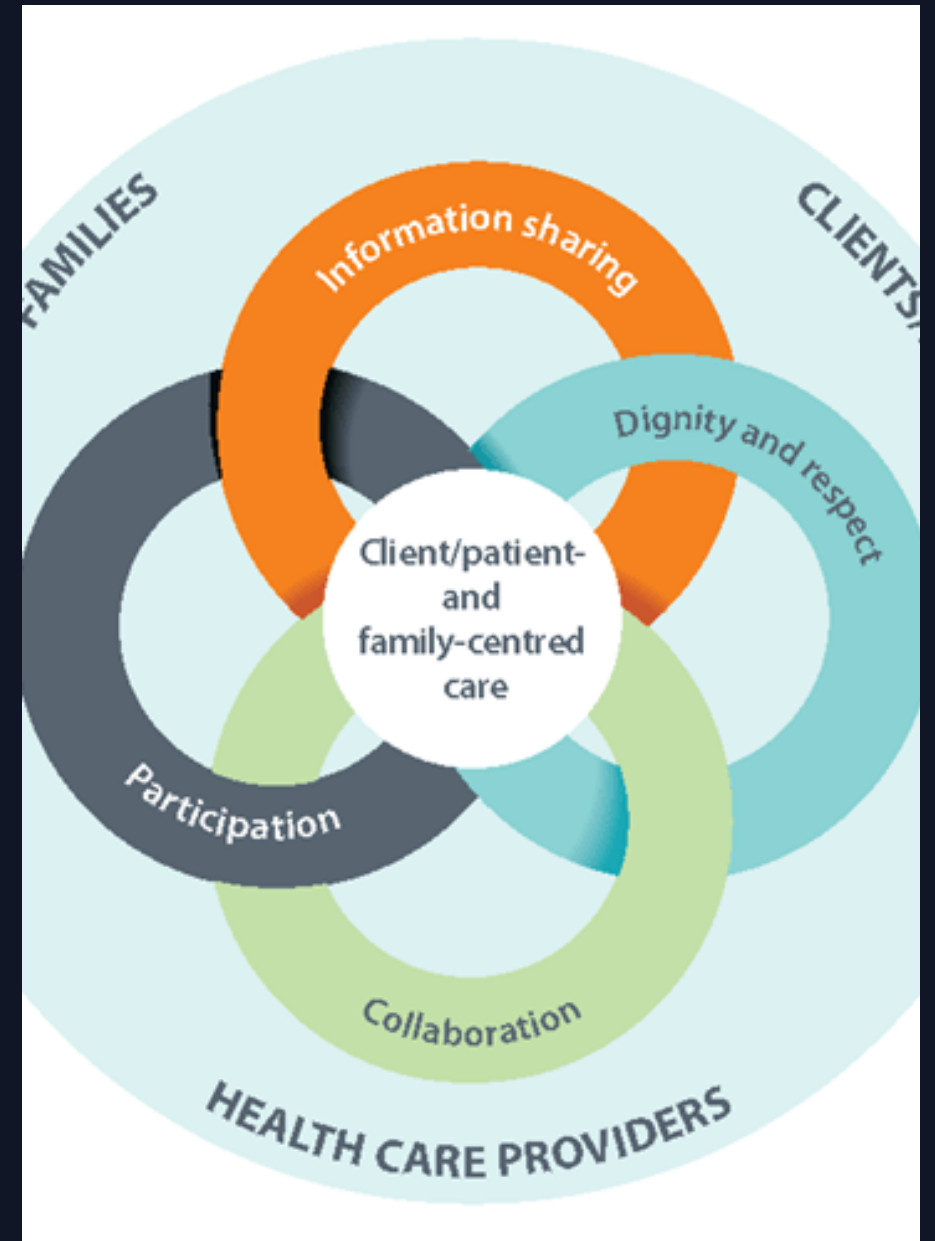
- Access to unique insights, improved satisfaction scores
- Enhanced partnership with the patient populations we serve

FOR HEALTHCARE SYSTEMS

- Increased efficiency and reduced errors
- Ensures diversity of perspective and increases the review of change to enhance efficiencies
- Allows us to review the success of an implemented change and share that process with other practices where it may be beneficial.

Maryland's Progress with PFACs

Maryland has demonstrated a strong commitment to patient-centered care through various state-level initiatives. The Maryland Patient Safety Center and the state's Health Services Cost Review Commission's emphasis on quality-based payment models aim to integrate patient and family voices in policy development, ensuring healthcare systems are held accountable for both outcomes and patient experiences.

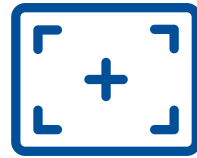


Success Factors for PFACs



LEADERSHIP BUY-IN

Securing support from executive leadership and clinical champions is crucial for PFAC success and integration within the healthcare system.



CLEAR GOALS

Establishing well-defined objectives, metrics, and a formal charter helps PFACs stay focused and measure their impact.



DIVERSE REPRESENTATION

Ensuring the PFAC membership reflects the diversity of the patient population, including underrepresented groups, strengthens the council's effectiveness.



ONGOING TRAINING

Providing PFAC members with training and resources empowers them to contribute their insights and perspectives meaningfully.

BY ADDRESSING THESE KEY SUCCESS FACTORS, HEALTHCARE ORGANIZATIONS CAN BUILD THRIVING PFACS THAT DRIVE MEANINGFUL CHANGE AND IMPROVE PATIENT-CENTERED CARE.

Challenges and Solutions

RECRUITING DIVERSE MEMBERS

Leverage community networks, partner with local organizations, and actively outreach to underrepresented groups to ensure diverse PFAC membership.

SUSTAINING ENGAGEMENT

Celebrate small wins, provide ongoing training and development opportunities, and foster a collaborative culture to maintain member engagement over time.

ALIGNING PFAC GOALS

Regularly review PFAC objectives and ensure they are well-aligned with the organization's priorities and strategic priorities. Establish clear communication channels between the PFAC and leadership.

JHCP's Approach to Patient and Family Advisory Councils (PFACs)



JHCP'S APPROACH TO PFACS

JHCP (Johns Hopkins Community Physicians) takes a slightly different approach to PFACs compared to the traditional model.



TOWN HALL FORMAT

JHCP's PFAC structure is more like a drop-in town hall format, which they have found to be more effective in their medical practice setting with multiple locations.



REGIONAL PFACS

JHCP is actively working on developing regional PFACs with standing members to ensure representation from different practice locations within each region, complementing the existing town hall model.

JHCP'S APPROACH TO PFACS COMBINES A TOWN HALL FORMAT WITH THE DEVELOPMENT OF REGIONAL PFACS, ALLOWING THEM TO ENGAGE PATIENTS AND FAMILIES IN MULTIPLE WAYS ACROSS THEIR DIVERSE PRACTICE LOCATIONS.

Agenda Building and Recruitment

Strategy with invites

- Time of day – older patients prefer morning or early afternoon meetings (especially in fall in winter).
- Empower your team:
 - Suggest provider/MA teams come up with 3-5 names of engaged patients to nominate.
 - MOA teams to suggest 3-5 names based on their expertise
- Build agenda ahead of meeting to entice attendance and participation.



Agenda Building and Recruitment



Strategy with invites – creating agenda in the invite to get people interested.

- Example: Infectious disease expert at peds – discussion surrounding vaccine and safety for kids in schools.
- Meet and Greet with a new provider.
- What are people asking about in the office right now? Common trends?
 - Operations? Extended clinic hours? Saturday Hours
 - Access Discussions
 - Medicare wellness visits? – Do our patients know the difference between visit types (wellness vs physical)? What is the provider looking for? When do we add an additional visit level charge? “No Touch Visit”?
 - Quality – Education surrounding colorectal screenings- Cologuard? Barriers to complete? Education about options to screen?
 - Pediatric Wellness – Discussing with parents about different appointment types.

Free Agenda Items

Informed About Delays

- How would you like to be informed about delays?
- How often would you like us to provide updates?
- Would you like a communication board?
 - If so, how often would you like a personal update in addition to the communication board?
- Are we making progress?

Feeling Heard

- What does this question mean to you?
- In or out of a healthcare setting, when have you experienced excellent service where you felt heard?
- How can we improve OUR patient partnerships?
- Are we making progress?

Staff Working Together

How Well The Staff Worked Together To Care For You?

- What does this question mean to you?
- What's working well?
- What could be improved to increase partnerships?
- Are we making progress?

Allow time for formal assessments and follow-up discussions

Will your M&A do any of the following:

- ✓ Improve quality and patient safety?
- ✓ Improve financial performance?
- ✓ Improve site CG-CAHPS survey scores?
- ✓ Improve patient outcomes?
- ✓ Reduce the risk of malpractice?
- ✓ Reduce errors and adverse events?
- ✓ Enhance clinics competitiveness?
- ✓ Increase employee satisfaction and retention?
- ✓ Increase patient satisfaction and retention?



Meaningful and Actionable (M&A)

S

Specific

Make your goal specific and narrow for more effective planning

**M**

Measurable

Make sure your goal and progress are measurable

**A**

Achievable

Make sure you can reasonably accomplish your goal within a certain time frame

**R**

Relevant

Your goal should align with your values and long-term objectives

**T**

Time-based

Set a realistic but ambitious end date to clarify task prioritization and increase motivation



Site	_____	<p>A meaningful action item from a PFAC meeting is a specific, measurable, and achievable task or initiative that directly addresses the concerns, suggestions, or feedback provided by patients and their families. This action item should aim to improve patient care, enhance the healthcare experience, or resolve identified issues. It must include clear objectives, assigned responsibilities, a timeline for completion, and criteria for evaluating success.</p>
Dept(s)	_____	
PXO/Site Leader	_____	
Date of PFAC	_____	
Objective:	_____	

Steps	
Assigned Responsibilities	
Timeline	
Evaluation Criteria	

Improving Patient Experience: Timely and Transparent Communication About Delays

DEVELOP A NOTIFICATION SYSTEM

Implement a system to notify patients of any delays in their scheduled appointments. This could involve automated text messages, emails, or in-app notifications to keep patients informed about changes to their appointment times.

STAFF TRAINING

Train administrative and clinical staff on how to effectively communicate delays to patients and manage their expectations. This includes providing consistent messaging, empathizing with patient concerns, and offering solutions or alternatives.

WAITING ROOM UPDATES

Install displays in the waiting room to provide real-time updates on wait times and delays. This will help set accurate expectations for patients and reduce frustration caused by unexpected delays.

FEEDBACK MECHANISM

Create a system for patients to provide feedback on the delay communication process. This can include a survey or a dedicated feedback channel, allowing the practice to identify areas for further improvement.

Improving Patient Communication About Delays

ASSIGNED RESPONSIBILITIES

Clearly define the roles and responsibilities for different staff members in managing patient communication about delays: Administrative staff will handle notifications and updates for patients in the waiting area, clinical staff will communicate with roomed patients about delays and provide estimated wait times, and practice leadership will collect and analyze feedback to identify areas for improvement.

IMPLEMENTATION TIMELINE

Outline the timeline for implementing the communication processes: 1 month for staff training, 1 month for display installation, and ongoing feedback collection to continuously evaluate and refine the approach.

EVALUATION CRITERIA

Establish clear metrics to measure the effectiveness of the communication changes: patient experience surveys to gauge satisfaction with delay communication, monitoring the accuracy of estimated wait times provided to patients, and regularly reviewing feedback to assess the overall effectiveness and make necessary adjustments.

Practice Spot Light





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M E D I C I N E

JHCP Waters Edge

PFAC SUCCESS



Helping Our Community



Outreach Strategies



Importance of Outreach

Every outreach effort contributes to a successful PFAC turnout and meeting. Engaging patients helps us understand their perspectives.



Recruitment Focus

Staff Involvement – Patient outreach and meeting attendance are now part of staff annual goals.

Personal Invitations – Employees are split into Spring and Fall PFAC teams and must invite 5 patients each. Bonus if at least 2 attend.

Timing – Year-round discussions with patients about PFAC benefits and participation.

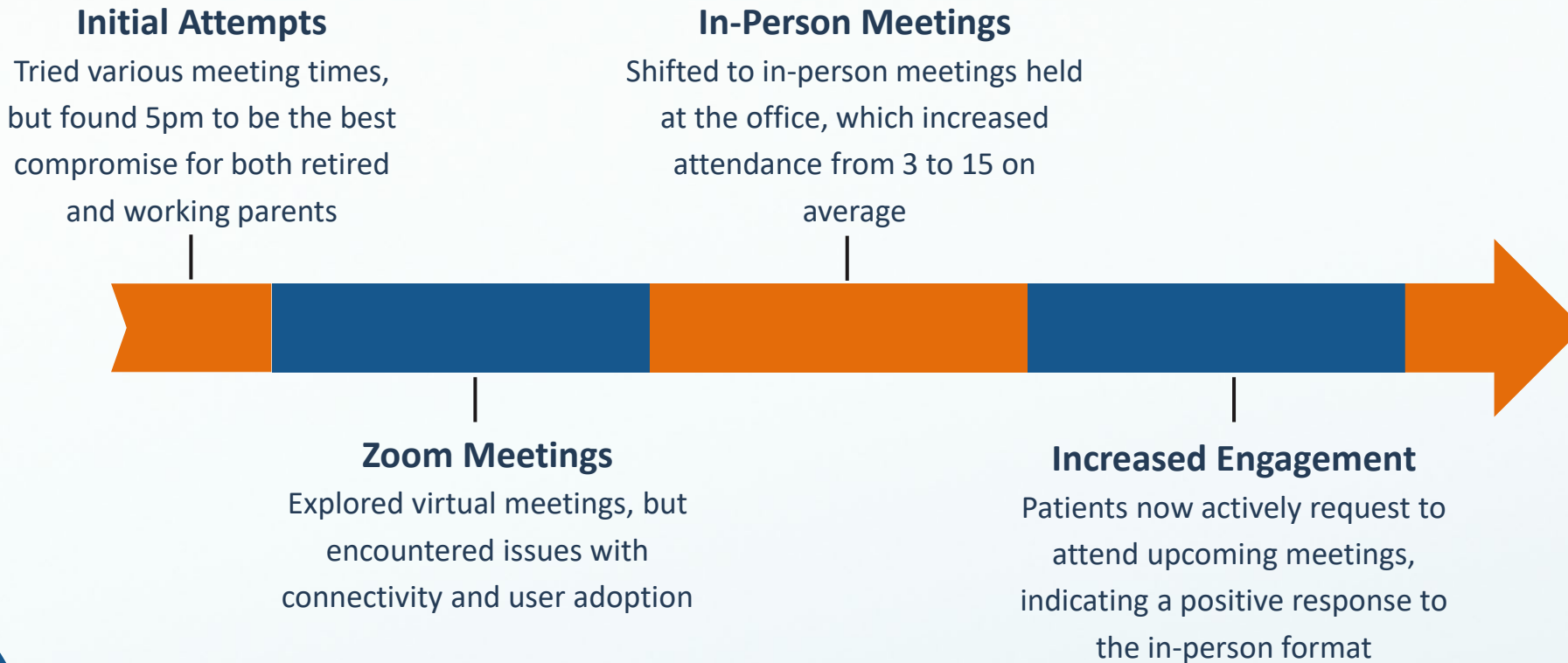


Tangible Outreach Tools

Flyers placed at key locations (front desk, checkout windows). These flyers provide meeting details and topic information.

Staff proactively engage patients showing interest by extending personal invitations.

Timing: Finding the Sweet Spot for Successful Meetings



What does “Feeling Heard” Mean to You



- What does this mean to you, in or out of the healthcare setting?
- When have you experienced excellent service where you felt heard?
- How can we improve OUR patient partnerships?
- Are we making progress?

Taking Action After PFAC Meeting



Post Meeting Review

- Team compiles responses and identifies meaningful, actionable items.
- Focus is on concerns we can address (e.g., alternative specialist options, not external factors like wait times).



Specialty Appointment Solutions

- Maintain and update a reliable list of specialists.
- Offer alternative specialist referrals when scheduling difficulties arise.
- Keep track of patient-reported access issues for future improvements.



Commitment to Patient Needs

- Acknowledge patient concerns.
- Provide proactive solutions to enhance their healthcare experience.



The image features a modern, geometric background. On the left, there are large, overlapping triangular shapes in dark blue and yellow. The right side of the image is a white background with a complex, interconnected network of thin white lines forming a mesh of irregular polygons. Centered on this white background is the text "Q&A" in a bold, dark blue, sans-serif font.

Q&A



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M E D I C I N E

**JHCP GREATER DUNDALK
PFAC SUCCESS**



PFAC TIMELINE

Meeting Topics

Team Communication

Host PFAC



Date Selection

Patient Outreach

Topics and Guest Speakers

Join The PFAC Council Biannual Virtual Meetings

(PFAC) Patient and Family Advisory Council

PFAC is a committee that partners family members with a division of staff to make compassionate patient care a priority by determining methods that can enhance the patient experience and promote family-centered care.



MEETING 11/14/2024 @ 12:00PM

- Do you have suggestions to improve families' experiences throughout treatment?
- Are you insightful, optimistic, a great communicator and listener?
- Can you commit just an hour of your time twice a year?

If YES - We want to hear from YOU!

ASK THE FRONT DESK FOR DETAILS

MEETING TOPICS:

- MyChart Q&A
- Weight Management
- Open discussion for future meetings

(410) 288-4800
www.hopkinsmedicine.org



Priority Partners Food Drive
Event



Prescription Cost Savings Tool
Abigail Trần, PharmD, BCACP



MyChart Q&A

Camille Vincent and Mary VanDuyne

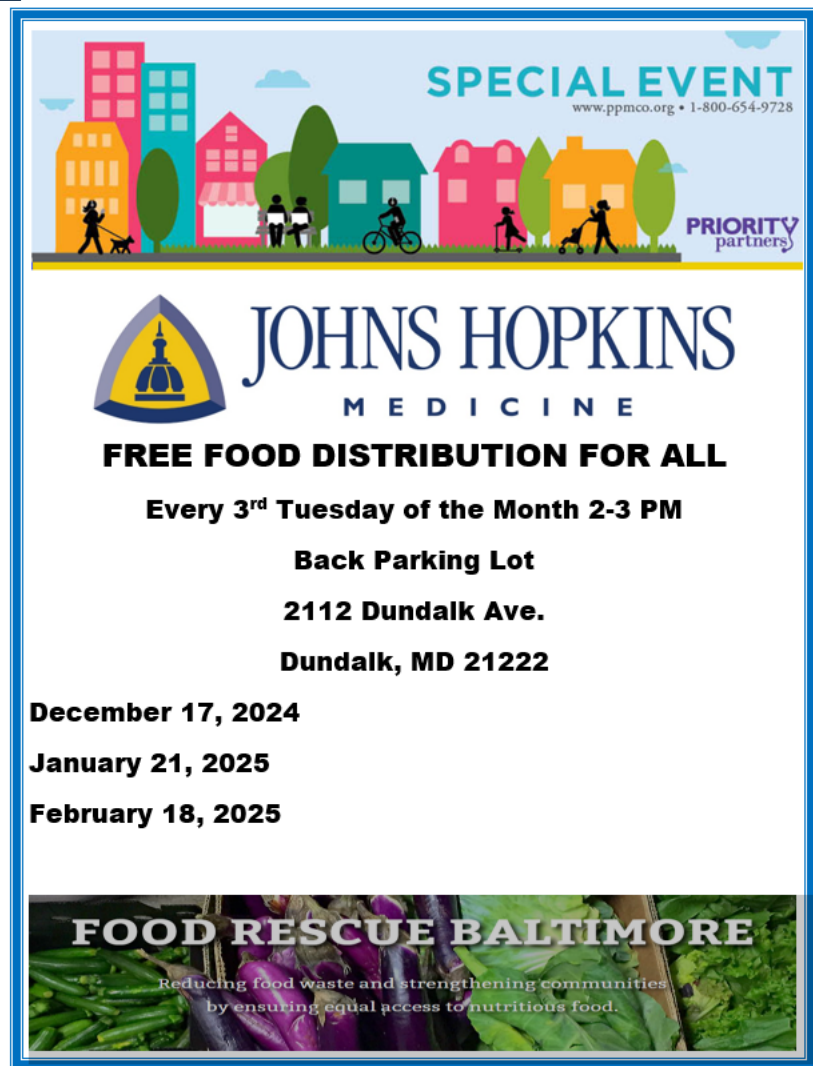


Weight Management

Danielle North, PA-C.
Certified Physician Assistant



Priority Partners Food Drive Event



The flyer features a colorful illustration of a neighborhood with houses, trees, and people walking and riding a bicycle. Text on the flyer includes: 'SPECIAL EVENT' with the website 'www.ppmco.org • 1-800-654-9728' and the 'PRIORITY partners' logo. Below this is the 'JOHNS HOPKINS MEDICINE' logo and the text 'FREE FOOD DISTRIBUTION FOR ALL'. The event schedule is listed as 'Every 3rd Tuesday of the Month 2-3 PM' at the 'Back Parking Lot', '2112 Dundalk Ave.', 'Dundalk, MD 21222'. Dates for the event are 'December 17, 2024', 'January 21, 2025', and 'February 18, 2025'. At the bottom, the 'FOOD RESCUE BALTIMORE' logo is shown with the tagline 'Reducing food waste and strengthening communities by ensuring equal access to nutritious food.' over a background of fresh vegetables.

SPECIAL EVENT
www.ppmco.org • 1-800-654-9728

JOHNS HOPKINS
MEDICINE

FREE FOOD DISTRIBUTION FOR ALL

Every 3rd Tuesday of the Month 2-3 PM

Back Parking Lot
2112 Dundalk Ave.
Dundalk, MD 21222

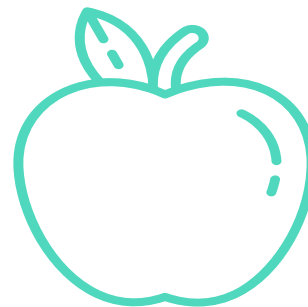
December 17, 2024
January 21, 2025
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FOOD RESCUE BALTIMORE
Reducing food waste and strengthening communities
by ensuring equal access to nutritious food.

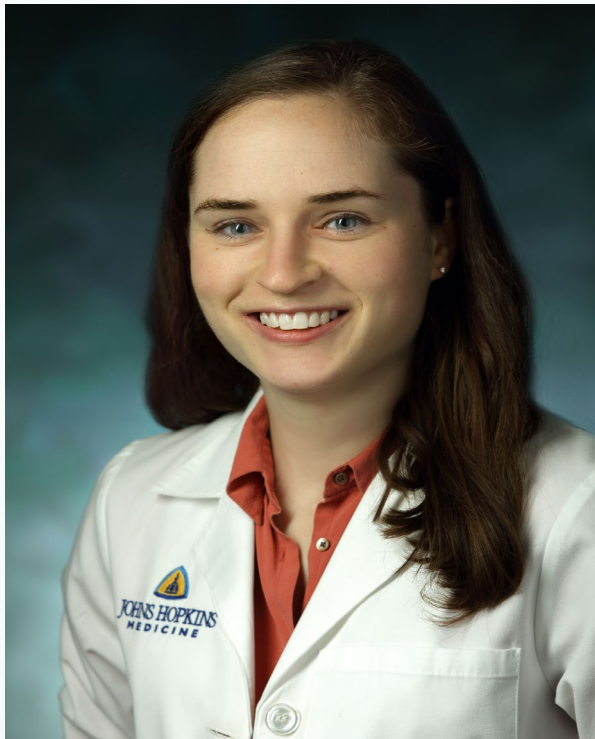
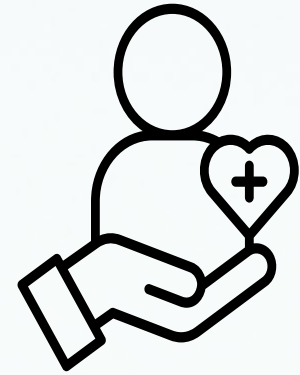
- Created flyers for patients to take home from clinic
- Shared with local church
- Site initiative to screen patients for food insecurity - Social Drivers of Health
- Run report of patients who screen positive

Questions

Worried About Running Out of Food in the Last Year?
Ran Out of Food in the Last Year?



Prescription Cost Saving Tool



Abigail Trần, PharmD, BCACP

Prescription Cost Savings Tool

This tool provides potential solutions to medication cost issues. The best way to get information about deductibles, preferred pharmacies, and formulary is for the patient to call their insurance provider directly.

	Commercial	Medicare <small>Confirm part D coverage</small>	Medicaid <small>Income < 138% FPL (\$1564/mo for single person as of 2024)</small>	Uninsured
Prescription Savings www.goodrx.com	[Solid Blue Bar]			
Low Cost Pharmacies www.costplusdrugs.com www.rxoutreach.org Walmart \$4 Prescriptions	[Solid Green Bar]			
Manufacturer Copay Cards*	[Solid Pink Bar]			
Maryland SHIP www.shiphelp.org LIS & SPDAP		[Solid Yellow Bar]		
Patient Assistance Programs* www.needymeds.org	[Dashed Purple Bar]	[Dashed Purple Bar]		[Dashed Purple Bar]
Grants* www.healthwellfoundation.org www.panfoundation.org	[Dashed Red/White Bar]			

Solid: general eligibility
 Dashed: conditional eligibility

*Coverage is typically for brand name medications. Patients can sign up online and apply the code at the pharmacy (mail-order pharmacies may be excluded).
 *Coverage and eligibility (e.g. income, out of pocket spending) vary. Check specific program requirements carefully.

Hannah Rapp, 2024

MyChart Q&A

Johns Hopkins Medicine MyChart

Presenters: Camille Vincent and Mary VanDuyne

MyChart

Your health. Your knowledge. Your connection.



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Agenda

 Top MyChart Features

 Feedback on Content

 Top 3 Takeaways

 Q&A session



MyChart Features

What You Can Do With MyChart



Connecting and
Sharing



Health



Messaging



Scheduling and
Appointments



Payment and
Insurance



Preferences



Mobile Features

Personal Information

- Add demographic information in MyChart, like:
 - Address
 - Gender information
 - Your preferred name
 - Your contact information
 - Preferred language to receive medical care
- What are these items used for?
 - Communications regarding care
 - Personalize care for all
 - Help those at risk of healthcare disparities



Communication Preferences

General

Contact Information

Email


Mobile phone

[Review contact information](#)

Settings

 **Email**
34 of 43 notifications turned on

 **Text message**
6 of 16 notifications turned on

 **Verification needed**
We need to verify that we can reach you at your mobile number [Verify](#)

 **Phone**
3 of 3 notifications turned on

 **Mail**
3 of 5 notifications turned on

Update my preferences for communications I receive about others

To update how you receive communications about a specific person, switch to their record.

Save changes


Details

Appointments 
Email, Text message, Phone

Messages 
Email


Health 
Email, Text message, Phone, Mail


Billing 
Email, Mail

Questionnaires 
Email

Account Management 
Email

News and Announcements 
Email, Phone, Mail

Telehealth 
Email

To Do 
Email

View Your Test Results



Easy access to results



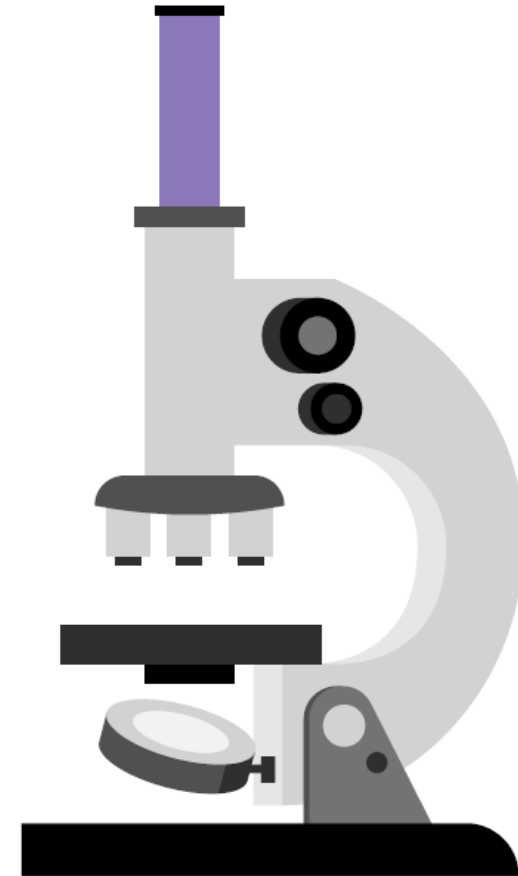
See trends in data over time



Helpful visuals



Especially useful for tracking chronic illness





Sharing your information

- Link MyChart accounts across organizations for easier access
- Allow caregivers and loved ones access to your medical record
- Share secure links to providers seen at other organizations

Invite someone to have access to your record



- 1** We will email an invitation to someone you trust. Use their exact name and email address that we have on file in our system.

* Indicates a required field.

Who are you inviting?

* Invitee name

Charles Poct



- 2** From the email, they can log in to their MyChart to accept the invitation.



- 3** They must verify they know you by entering your date of birth.

Where should we send this invitation?

* Invitee email

emailaddress@email.com

* Confirm invitee email

emailaddress@email.com

* What kind of access would you like this person to have to your chart?

Full Access

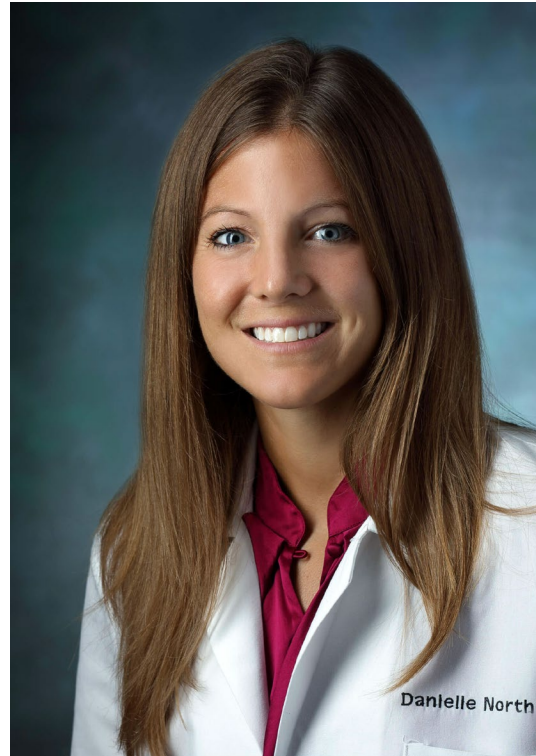
Schedule Only Access

What may this person have access to?

Ability to view the patient's results and after visit summaries, message providers on behalf of the patient, schedule appointments, and pay outstanding balance and prepayments.

Send invite

Weight Management

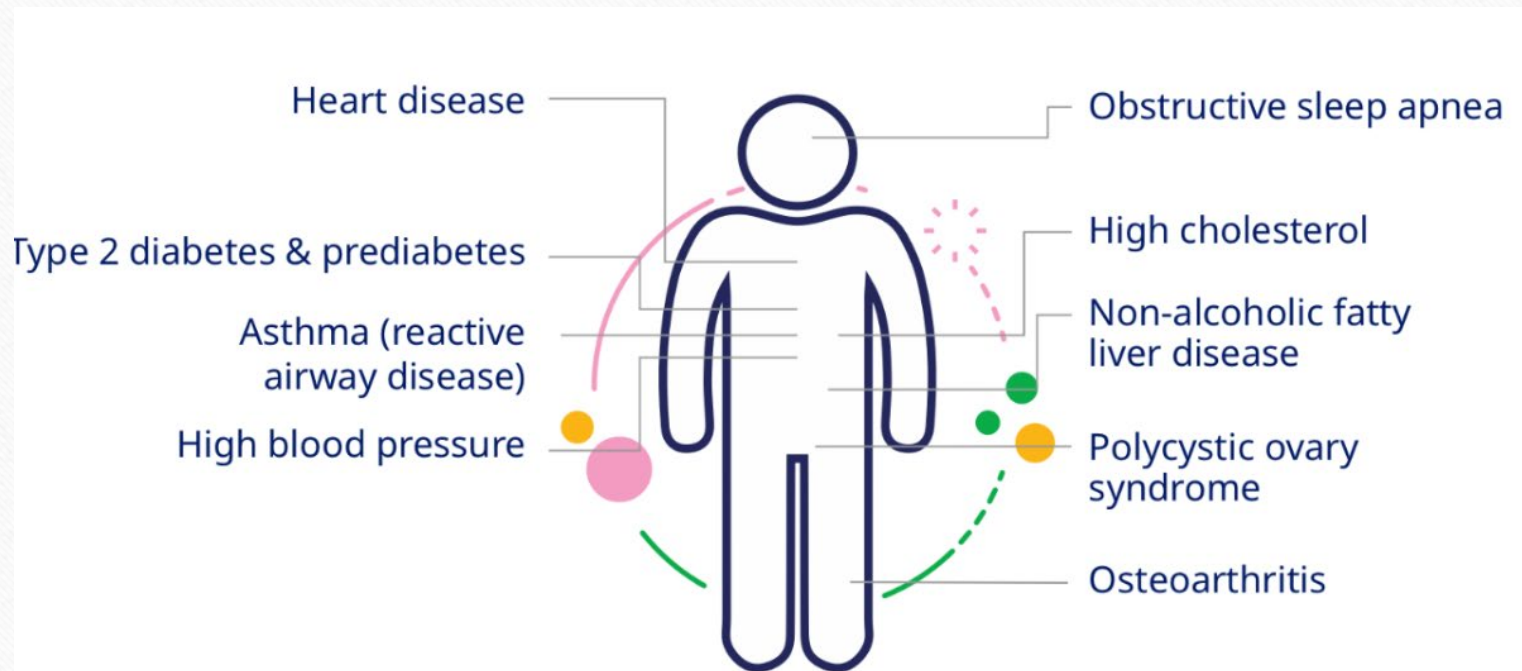


Danielle North, PA-C.
Certified Physician Assistant



Why Weight Matters?

- Excess weight can impact:



Small Change

- 2.5 % Weight loss (200 lb initial weight)=5 lb weight loss
- 5% Weight loss (200 lb initial weight)= 10 lb weight loss
- 10% Weight loss (200 lb initial weight)= 20 lb weight loss
- 15% Weight loss (200 lb initial weight)= 30 lb weight loss

How do I get big results???

BIG results

- Case Study 1:
- 54 y/o male with past medical hx of diabetes, hypertension, fatty liver, OSA, hyperlipidemia initial visit in 2/2024:
- Weight: 356
- BP: 139/75 on three BP meds, A1c: 8.0 (two diabetes meds), LDL: 156 (on statin), Severe OSA (on CPAP), elevated liver function test (ultrasound showing fatty liver)

BIG Results

- Case Study #1 cont'

Monthly visits with using myfitness pal to track macros, goal of walking 30 minutes 5 days a week, chair yoga 1 time a week. Working on wearing CPAP more and aiming for 7 hour of sleep and meal planning and prepping on Sunday.

9/2024: WT: 306 BP: 102/65 (on 1 BP medication), LDL: 98 (no change in statin), mild OSA (on repeat sleep study), A1c: 5.7! (on only 1 diabetic medication)



**THANK
YOU!**

Q&A

Actionable Steps for Stakeholders



SUPPORT PFAC INITIATIVES

Provide resources to help establish and sustain PFAC programs across your organization.



ENCOURAGE COLLABORATION

Promote partnerships between PFACs and the healthcare system to align efforts and share best practices.



MONITOR IMPACT

Develop a set of metrics and evaluation frameworks to measure the effectiveness of PFAC initiatives in improving patient-centered care and outcomes.



FOSTER INNOVATION

Facilitate the sharing of innovative PFAC practices and strategies across healthcare systems in the to drive continuous improvement.

BY TAKING THESE ACTIONABLE STEPS, ORGANIZATIONS CAN EMPOWER PATIENTS AND FAMILIES TO BECOME TRUE PARTNERS IN SHAPING THE FUTURE OF HEALTHCARE IN THE STATE.



Conclusion

Patient and Family Advisory Councils (PFACs) have emerged as a vital component in the pursuit of patient-centered healthcare and improved outcomes. As a broader concept, the presence of PFACs within Maryland's healthcare system positions the state as a national leader in the adoption and innovation of this collaborative approach.

Thank you



THANK YOU FOR ATTENDING!

We appreciate your time and participation in this event.



Q&A SESSION

We have set aside time for a Question and Answer session. Feel free to ask any questions you have.

THANK YOU ALL FOR YOUR ENGAGEMENT AND INPUT. WE LOOK FORWARD TO YOUR CONTINUED SUPPORT.

Round Table Discussion



- ▶ What are some of the challenges your organization has faced in implementing PFACs, and how have you addressed them?
- ▶ How do you measure the impact of your PFAC initiatives, and what key metrics have been most useful?
- ▶ How did JHCP determine that a town hall model was more effective than a traditional standing PFAC structure?
- ▶ How do you ensure that feedback gathered from PFAC meetings leads to actionable changes within your organization?
- ▶ Can you share a specific success story where PFAC input led to a meaningful improvement in patient care or experience?
- ▶ As you work toward developing regional PFACs, what lessons from your current model will you carry forward, and what adjustments are you considering?
- ▶ What advice would you give to other healthcare organizations looking to refine or establish their own PFAC programs?





THANK YOU



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