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The Monroe Carell Jr. Children’s Hospital at Vanderbilt Family Advisory Council was an early adopter of family advisory council integration into Children’s Hospital operations.

Today the council is compiled of 25 parents and guardians whose children receive treatment at Children’s Hospital. These members work in partnership with executive leaders to improve care.

The foundation for the council was built using a patient- and family-centered philosophy and has evolved into a well-integrated team which continues to meet monthly. Additionally, advisors are at the table when work is happening for groups like the Hospital Acquired Condition (HAC) committees and the staff nurse council, proactively bringing perspectives of patients and families.

A leadership and training model has been implemented to ensure advisors develop competencies to successfully participate in the work at Children’s Hospital.

In 2017, two additional groups of advisors with narrowed focus of Neonatal Intensive Care Unit and Cystic Fibrosis were added. And in 2018 a group with a focus on Primary Care kicked off their advisory group.

The Vanderbilt University Hospital Patient & Family Advisory Council began with twelve patients and family members who were nominated by their nurses and physicians and invited to participate.

One evening each month over dinner, with Terrell Smith serving as temporary facilitator (thereafter led by a patient or family member serving as Chair), Vanderbilt leaders began to engage with the group.

The council’s first work list arose from a question posed by CEO David Posch, "What would you like to work with us on improving in the next couple of years?" Over the past 12 years, leaders, managers, researchers, faculty, and staff members have grown to recognize the value of the Council.

It has earned a reputation as a well-informed group of intelligent, thoughtful, and candid individuals who are eager to collaborate to improve Vanderbilt’s quality and service.

Now, when discussions about important new programs or projects arise, planners seek the Council’s advice, and frequently request council members to become members of their work teams.
The Vanderbilt Behavioral Health Patient and Family Advisory Council began when key leaders at our psychiatric hospital saw the need to more effectively engage patients and families in the overall treatment experience, as well as the redesign of programs/services and various aspects of our facility.

We have broadened our group and focus to include representation from other levels of care, including outpatient services and partial hospitalization programs to better address the needs of patients and families.

Our group meets monthly over dinner with members of our leadership team who immensely value this collaborative partnership and its work. A key focus of the group’s work has been on patient and family education materials, resources, and overall treatment process improvement.

As one of only a handful of councils focused in the behavioral health arena, members have the honor and privilege to provide information that will assist other organizations across the country in establishing a council dedicated to the needs of individuals and family members dealing with issues of mental illness.

Our medical center recognized that not all patients and family members could participate in a monthly meeting on campus. Some lived further away, had health issues that made coming to a meeting difficult, had work or family conflicts, or had transportation difficulties which prohibited their involvement. As our campus and service grew, we needed to find a way to reach a broader demographic of patients who come to us for treatment.

To that end, Advise Vanderbilt was launched. Our on-line advisory panel is comprised of approximately 5,000 patients. Our community has participated in over 30 surveys and expanded to include dedicated segments of Children’s Hospital and LGBTQ patients.

We have a very high participation rate when we send questions out to our on-line advisors. We have also discovered that a large percentage of our on-line advisors are willing to come on campus for special collaboration to develop improvements that enhance our service.
We nurture a caring, culturally sensitive, and professional atmosphere as we continuously invest in the well-being and aspirations of our people.

from top
VUH council members; VBH council members; CH council members
ACCOMPLISHMENTS

**VUH, CH** Shared the Patient & Family Promise with over 5000 people at *New Employee Orientation*, highlighting the impact upon them as a patient or family member when employees exhibited Promise behaviors.

**VUH, CH, VBH** Participated as representatives on Vanderbilt University Medical Center Committees: Patient and Family Engagement Steering Committee, Patient Experience Coordinating Committee, Nursing Awards Committee, and Vanderbilt Program in Interprofessional Learning or VPIL. (8 advisors)

**VUH, CH, VBH** Participated in online surveys as *e-visors for Advise Vanderbilt.*

**CH** Shared their stories and the impact each employee has on their patient and family experiences at *Children’s Hospital New Employee Orientation* with approximately 250 people.

**VUH** Presented at *New Employee Orientation for VBH* with approximately 100 new employees.

**CH** Served as representatives on the Pediatric Emergency Department Patient Experience Committee, monthly Staff Nurse Council, presented at three staff meetings with the Environmental Services team and two staff meetings with the Pharmacy team.

**AV** Helped select a new design for Vanderbilt Health’s presence at *First Tennessee Park.*

**CH** Spoke at Leadership Assembly in a session *highlighting diversity.*

**VBH** Participated in first ever *VBH Behind the Scenes Event* to elevate and cultivate potential supporters.

**CH** Shared feedback about *patient flow and amenities for the new off-site pediatric surgery, imaging, and specialty clinic building opening in December 2019.*

**CH** Provided feedback and offered solutions for *wayfinding signage during construction* of four-floor expansion in Children’s Hospital.

**VBH** Participated in the *2018 Behavioral Health Day on the Hill* to increase awareness with our government officials. (2 advisors)

**CH** Toured and *shared feedback about room design and furniture* for the Children Hospital’s four-floor expansion project.

**CH** Worked with the nursing team and chief nursing officer to *implement the Daisy Award.*

**VUH** Served on the *Executive Diversity Committee.*

**VBH** Participated in initial taping of content for *VBH specific videos.* (4 advisors)

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**VUH** Vanderbilt University Hospital    **CH** Children’s Hospital    **VBH** Vanderbilt Behavioral Health    **AV** Advise Vanderbilt
Collegiality is a central characteristic of our culture and defines how we serve our patients, those we teach, and the local and worldwide community.
<table>
<thead>
<tr>
<th>Acronyms</th>
<th>Accomplishments</th>
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</thead>
<tbody>
<tr>
<td>VUH, CH, VBH</td>
<td>Patient Experience Update / provided feedback to the Senior Director of Patient Experience regarding aspects of the overall patient experience.</td>
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<tr>
<td>VBH</td>
<td>Provided recommendations as we implemented our new Intensive Outpatient Program (IOP) for young adults.</td>
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<tr>
<td>CH</td>
<td>Met with executive leadership to share experiences and promote initiatives to examine and improve safety and security in Children’s Hospital.</td>
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<td>AV</td>
<td>Gathered feedback to better understand the reasons behind missed/canceled appointments and ways that VUMC can help.</td>
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<td>CH</td>
<td>Reviewed, revised, and endorsed Children’s Hospital policy “Patient and Family Special Events.”</td>
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<td>VBH</td>
<td>Assisted as we established volunteer roles in some of our clinical areas.</td>
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<tr>
<td>VUH</td>
<td>Provided suggestions and recommendations as we engaged a full-time chaplain to provide spiritual care services to our patients and their families.</td>
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<tr>
<td>VUH</td>
<td>Featured in training video about a culture of service that was shown at Leadership Assembly and shared with clinical staff as part of a service training initiative.</td>
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<tr>
<td>VUH</td>
<td>Collaborated with nursing and physician leadership from the Emergency Department to improve service to patients and families.</td>
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<tr>
<td>VUH</td>
<td>Assisted our Nutritional Services team in meal planning and implementation of new menus for patients and families.</td>
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<tr>
<td>VBH</td>
<td>Provided feedback that has resulted in overhead music in our lobby to promote a calming environment.</td>
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<tr>
<td>VBH</td>
<td>Provided assistance for our VBH clothing closet.</td>
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<tr>
<td>CH</td>
<td>Welcomed the Family Resource Center team to learn about available resources and to identify ways to increase visibility and usage.</td>
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**ACCOMPLISHMENTS**

AV – Submitted feedback about how to improve the emergency room waiting experience at the Children’s Hospital.

VBH – Contributed critical feedback as we engaged an exercise specialist to work with our patients.

VUH – Met with Sodexo leaders and chefs from Nutrition Services about leadership changes and plans to improve food service for patients and staff.

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**ACCOMPLISHMENTS**

**VUH, CH** Advisors served as Nursing Quality Committee representatives.

**VBH** Completed the Adolescent Handbook for all adolescent patients.

**VUH** An advisor accompanied nursing administration and a quality consultant on Safety Rounds.

**VUH, CH, VBH** Executive Director of Quality discussed collaboration with the councils for Quality, Safety & Risk Prevention – council advisors were invited to participate on current focus committees and work-groups such as medication reconciliation and the opioid crisis. Several advisors actively participated in these work-groups.

**CH** Monthly participation on Pediatric Patient Education Oversight Committee (3 advisors).

**VUH, CH, VBH** Advisors met with pharmacists to discuss medication reconciliation and offer suggestions to improve the process from the patient/family perspective.

**VBH** Reviewed patient education materials specific to mental health diagnoses/conditions.

**VUH** Peripheral Intravenous Infiltration Extravasation (PIVIE) Hospital Acquired Condition (HAC) work group – monthly meeting – work of three advisors on the group includes evaluation and revamp of education materials including the creation of a “trading card” which the IV therapist reviews and leaves with parents.

**VUH** Provided feedback on the design of our the new 14 bed adult unit.

**VUH** Five advisors participated in focus groups, a council member served on the End of Life Committee, including meeting with physician leaders: Senior VP for Quality, Safety and Risk Prevention; the Chief of Clinical Staff, VUMC and Senior Associate Dean for Health Sciences Education to collaborate on the development on the End of Life program.

**VBH** Reworked language for patient materials addressing appropriate boundaries and safety matters for all patients.

**VUH** Provided feedback and endorsement with Quality Consultants for a proposal for the use of hand hygiene wipes for hospital patients.

**VUH** Met twice with School of Nursing faculty to provide feedback on a grant-sponsored initiative to help financially-challenged senior citizens to complete their Advanced Care Plan and a Healthcare and/or Financial Power of Attorney.

**VBH** Participated in the redesign of the Adult Patient Orientation process and materials.

**VUH** Learned about patients with opioid-related problems seen in the ED from the Physician Leader in the Emergency Department and provided patient representative on opioid work-group.

**VBH** Provided key feedback on multiple quality, safety and risk prevention initiatives.

**CH** Central Line Associated Bloodstream Infection (CLABSI) HAC-work of the two advisors on this work group includes design and messaging for a patient engagement tool to increase and empower family engagement and participation in care.
VUH  Provided feedback for faculty physician ethicist and law students about the Informed Consent Revisions for Otolaryngology.

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VBH  Collaborated with leadership regarding various renovations and upgrades to gym space and its use in programming for our patients.

CH  2 advisors participated in the Bedside Shift Change Hand-offs work group, designing roll out of the initiative.

From top: End of Life workgroup; new VBH Adolescent Handbook.
We invest our resources in a manner that supports our long-term obligation to society; to achieve local, national, and worldwide impact in improving health.
VUH, CH, VBH Provided guidance and insights for the My Health At Vanderbilt (patient portal) Enrollment Initiative.

VUH, CH, VBH Offered feedback on Vanderbilt Health at Walgreens affiliation.

AV Assessed the viability of strategic growth initiatives for the Asthma, Sinus and Allergy Program.

VBH Provided feedback that resulted in the establishment of a VBH specific Financial Counseling Program.

AV Tested three competing designs for a Childhood Cancer fundraising drive.

CH Reviewed branding plan and shared feedback and suggestions for new pediatric cancer campaign.

VUH Presented at the 8th International Conference on Patient- and Family-Centered Care in Baltimore entitled “E-visors: A Quantum Leap in Patient/Family Advisory Participation.”

CH Participated in 17 events as Children’s Hospital ambassadors, sharing their stories and helping to steward donors.

VUH Provided feedback for Women’s Health design session created for the launch of the redesign of women’s services.

CH Attended “Behind the Scenes” events for the opportunity to have a closer look at the pediatric oncology and neurology services.

VBH Provided key feedback on the billing process.

AV Measured the impact of a new orthopedic clinic opening in Williamson County.

CH Youth advisory council participation in collaboration with Family Voices of Tennessee to connect youth with special health care needs, chronic illness or disability.

VBH Provided feedback for the Certificate of Need (CON) application for a 14-bed expansion project.

CH Created Primary Care Clinical Advisory Group.

AV Establishment of a separate Advise Vanderbilt LGBTQ Community to address the specific health care needs of LGTBQ patients and families.
We seek excellence and leadership as we advance our systems of care, educational practices and our commitment to discovery.
VUH, CH, VBH  Shared experiences and feedback before and after the launch of new electronic medical record (EPIC).

VUH, CH, VBH  Met with physicians to discuss ideas for improvement to the After-Visit Summary.

VBH  Offered ongoing feedback as the EPIC optimization work continued from multiple perspectives: clinical, billing, eStar, medical information, etc.

CH  Met with hospital school teachers in Children’s Hospital to learn about and advocate for Tennessee Hospital Homebound rule.

CH  Participated in the 5 Shot Shorts program, incorporating a tool with photos to share patient and family stories by documenting “a day in the life” of children and families.

VUH, AV  Participated in the “Front Desk of the Future” design session.

VUH  Provided feedback about Alexa app.

AV  Volunteered to share stories of how they would like to use technology to manage their health in 2030.

VUH  Provided suggestions on redesign of the physician biography section of Vanderbilt Health website.

VUH  Indicated preference on a strategy to use volunteers to sign up patients in the waiting rooms for MHAV.

VUH  Provided feedback and endorsement to Emergency Department Leadership about using FAST PASS technology for visitor badges in the ED to enhance security.

CH  Spoke to Meharry medical students sharing perspectives from a parent with a child with complex illnesses.

VUH  Provided suggestions on redesign of the physician biography section of Vanderbilt Health website.