

# 2016 Annual PFAC Report:

## HealthSouth Rehabilitation Hospital of Western Mass

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Q130. Which best describes your PFAC?

- We are the only PFAC at a single hospital
- We are a PFAC for a system with several hospitals
- We are one of multiple PFACs at a single hospital
- We are one of several PFACs for a system with several hospitals
- Other (please describe):

Q126. Will another PFAC at your hospital also submit a report?

*This question was not displayed to the respondent.*

Q127. Will another hospital within your system also submit a report?

*This question was not displayed to the respondent.*

Q2. Staff PFAC Co-Chair Contact:

Name and Title:	<input type="text" value="Deb Santos Director"/>
Email:	<input type="text" value="deb.santos@healthsc"/>
Phone:	<input type="text" value="413 308-3323"/>

Q2a. Is the Staff PFAC Co-Chair also the Staff PFAC Liaison/Coordinator?

- Yes
- No
- N/A

Q3. Patient/Family PFAC Co-Chair Contact:

Name and Title:	<input type="text" value="James Garrant"/>
Email:	<input type="text" value="deb.santos@healthsc"/>
Phone:	<input type="text" value="413-275-2268"/>

Q4. Staff PFAC Liaison/Coordinator Contact (if applicable):

*This question was not displayed to the respondent.*

Q23.

**Section 1: PFAC Organization**

Q6. This year, the PFAC recruited new members through the following approaches (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Word of mouth / through existing members                       | <input type="checkbox"/> Case managers / care coordinators                          |
| <input type="checkbox"/> Promotional efforts within institution to patients or families | <input type="checkbox"/> Patient satisfaction surveys                               |
| <input type="checkbox"/> Promotional efforts within institution to providers or staff   | <input type="checkbox"/> Community-based organizations                              |
| <input type="checkbox"/> Facebook and Twitter   | <input type="checkbox"/> Houses of worship  |
| <input type="checkbox"/> Recruitment brochures  | <input type="checkbox"/> Community events   |
| <input type="checkbox"/> Hospital publications  | <input type="checkbox"/> Other  |
| <input type="checkbox"/> Hospital banners and posters                                   | <input checked="" type="checkbox"/> N/A - we did not recruit new members in FY 2016 |

Q6a. Please describe other recruitment approach:

*This question was not displayed to the respondent.*

Q7. Total number of staff members on the PFAC:

5

Q8. Total number of patient or family member advisors on the PFAC:

12

Q9. The name of the hospital department supporting the PFAC is:

Administration

Q10. The hospital position of the PFAC Staff Liaison/ Coordinator is:

Director of Quality

Q11. The hospital provides the following for PFAC members to encourage their participation in meetings (click all that apply):

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Parking, mileage, or meals                       | <input checked="" type="checkbox"/> Payment for attendance at other conferences or trainings |
| <input type="checkbox"/> Translator or interpreter services                          | <input checked="" type="checkbox"/> Annual gifts of appreciation                             |
| <input type="checkbox"/> Assistive services for those with disabilities              | <input type="checkbox"/> Conference call phone numbers or "virtual meeting" options          |
| <input type="checkbox"/> Provision / reimbursement for child care or elder care      | <input type="checkbox"/> Meetings outside 9am-5pm office hours                               |
| <input type="checkbox"/> Stipends  | <input type="checkbox"/> Other   |
| <input checked="" type="checkbox"/> Payment for attendance at annual PFAC conference | <input type="checkbox"/> N/A - the hospital does not reimburse PFAC members                  |

Q11a. Please describe other provision by the hospital for PFAC members:

*This question was not displayed to the respondent.*

## Q24. Section 2: Community Representation

Q108. The PFAC regulations require every PFAC to represent the community served by the hospital, which is described below.

Q12. Our catchment area is geographically defined as (if you are unsure select "don't know"):

Hampden County Hampshire County

Q12D.

- Don't know catchment area

Q121.

Tell us about racial and ethnic groups in your area (please provide percentages; if you are unsure of the percentages select "don't know").

Q13aR. Our defined catchment area is made up of the following racial groups (please provide percentages; if you are unsure of percentages please select "don't know"):

American Indian or Alaska Native	<1%
Asian	2%
Black or African American	7%
Native Hawaiian or other Pacific Islander	<1%
White	80%
Other	8%

Q91.

Don't know racial groups

Q13aE. What percentage of people in the defined catchment area are of Hispanic, Latino, or Spanish origin?

17%

Q92.

Don't know origins

Q13bR. In FY 2016, the hospital provided care to patients from the following racial groups (please provide percentages):

American Indian or Alaska Native	.1%
Asian	.6%
Black or African American	5%
Native Hawaiian or other Pacific Islander	.3%
White	91.1%
Other	

Q93.

Don't know racial groups

Q13bE. What percentage of patients that the hospital provided care to in FY 2016 are of Hispanic, Latino, or Spanish origin?

2.9%

Q95.

Don't know origins

Q13cR. In FY 2016, the PFAC **patient and family advisors** came from the following racial groups (please provide percentages):

American Indian or Alaska Native	<input type="text" value="0"/>
Asian	<input type="text" value="0"/>
Black or African American	<input type="text" value="0"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0"/>
White	<input type="text" value="100%"/>
Other	<input type="text"/>

Q97.

Don't know racial groups

13cE. What percentage of **PFAC patient and family advisors** in FY 2016 were of Hispanic, Latino, or Spanish origin?

0%

Q99.

Don't know origins

Q122. Tell us about languages spoken in your area (please provide percentages; if you are unsure of the percentages select "don't know").

Q117. What percentage of patients that the hospital provided care to in FY 2016 have limited English proficiency (LEP)?

*This question was not displayed to the respondent.*

Q118.

Don't know percentage that have limited English proficiency (LEP)

Q126. What percentage of patients that the hospital provided care to in FY 2016 spoke the following as their primary language?

*This question was not displayed to the respondent.*

Q127.

Don't know primary languages

Q119. What percentage of PFAC patient and family advisors in FY 2016 have limited English proficiency (LEP)?

0%

Q120.

Don't know percentage that have limited English proficiency (LEP)

Q123. In FY 2016, what percentage of PFAC **patient and family advisors** spoke the following as their primary language?

Spanish	<input type="text" value="0"/>
Portuguese	<input type="text" value="0"/>
Chinese	<input type="text" value="0"/>
Haitian Creole	<input type="text" value="0"/>
Vietnamese	<input type="text" value="0"/>
Russian	<input type="text" value="0"/>
French	<input type="text" value="0"/>
Mon-Khmer/Cambodian	<input type="text" value="0"/>
Italian	<input type="text" value="0"/>
Arabic	<input type="text" value="0"/>
Albanian	<input type="text" value="0"/>
Cape Verdean	<input type="text" value="0"/>

Q124.

Don't know primary languages

Q14.

The PFAC is undertaking the following activities to ensure appropriate representation of our membership in comparison to our patient or catchment area:

All appropriate patients and family members of all ethnicities are encouraged to attend PFAC meetings.

Q110. Section 3: PFAC Operations

Q15. Our process for developing and distributing agendas for the PFAC meetings (click the best choice):

- Staff develops the agenda and sends it out prior to the meeting
- Staff develops the agenda and distributes it **at the meeting**
- PFAC members develop the agenda and send it out prior to the meeting
- PFAC members develop the agenda and distribute it **at the meeting**
- PFAC members and staff develop agenda together and send it out prior to the meeting
- PFAC members and staff develop agenda together and distribute it **at the meeting**
- Other
- N/A – the PFAC does not use agendas

Q112. If staff and PFAC members develop the agenda together, please describe the process:

*This question was not displayed to the respondent.*

Q113. If other process, please describe:

*This question was not displayed to the respondent.*

Q16.

The PFAC goals and objectives for 2016 were: (select the best choice):

- Developed by staff and reviewed by PFAC members
- Developed by PFAC members and staff
- N/A – we did not have goals and objectives for FY 2016
- Developed by staff alone

Q17. The PFAC had the following goals and objectives for 2016:

The annual goals and objectives for 2016 are outlined as follows: PFAC Membership Recruitment: Recruitment is an ongoing effort with a goal of adding eight new members. A display table with information about PFAC, membership, and meeting times will be provided at our Annual Patient Reunion, which includes both inpatients and outpatients from the previous year, and to date. Case managers continue to provide membership information to patients and families. Health Care Literacy: The PFAC reviews available patient literature to provide feedback and suggest revisions as necessary. Current informational DVD's provided to patients on orientation and discharge are in English with translators available as needed. Additional languages will be provided when available. Safety: The PFAC committee members are included as observers in life safety drills. Members will assist with the planning and implementation of National Patient Safety Week activities. Events related to safety issues are discussed with ideas presented for improvement. Patient Satisfaction/Experience: PFAC works closely with the leadership team to develop strategies for improving the patient experience. Patient satisfaction data is shared with PFAC members, who provide suggestions from a patient's perspective for improvement in applicable areas. These suggestions are shared with clinical leadership. Further inclusion into Hospital Function/Structure: The PFAC will continue to be included in Quality/Performance improvement activities as applicable.

Q18. Please list any subcommittees that your PFAC has established:

No subcommittees have been deemed necessary due to the size of our hospital.

Q19. How does the PFAC interact with the hospital Board of Directors (click all that apply):

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> PFAC submits annual report to Board     | <input type="checkbox"/> PFAC member(s) are on board-level committee(s)                               |
| <input type="checkbox"/> PFAC submits meeting minutes to Board              | <input type="checkbox"/> N/A – the PFAC does not interact with the Hospital Board of Directors        |
| <input type="checkbox"/> PFAC member(s) attend(s) Board meetings            | <input type="checkbox"/> Other  |
| <input checked="" type="checkbox"/> Board member(s) attend(s) PFAC meetings | <input type="checkbox"/> Action items or concerns are part of an ongoing "Feedback Loop" to the Board |

Q114. Please describe other interactions with the hospital Board of Directors.

*This question was not displayed to the respondent*

Q20. Describe the PFAC's use of email, listservs, or social media for communication:

PFAC uses email for communication, and phone calls for those members without internet access.



Q109.

#### Section 4: Orientation and Continuing Education

Q21. Number of new PFAC members this year:

0

Q22. Orientation content included (click all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Meeting with hospital staff                                      | <input type="checkbox"/> Other   |
| <input checked="" type="checkbox"/> General hospital orientation                          | <input type="checkbox"/> In-person training  |
| <input checked="" type="checkbox"/> Hospital performance information                      | <input checked="" type="checkbox"/> Massachusetts law and PFACs                                |
| <input type="checkbox"/> Patient engagement in research                                   | <input checked="" type="checkbox"/> Concepts of patient- and family-centered care (PFCC)       |
| <input checked="" type="checkbox"/> PFAC policies, member roles and responsibilities      | <input type="checkbox"/> Skills training on communication, technology, and meeting preparation |
| <input type="checkbox"/> Health care quality and safety                                   | <input type="checkbox"/> Immediate "assignments" to participate in PFAC work                   |
| <input checked="" type="checkbox"/> History of the PFAC                                   | <input type="checkbox"/> Check-in or follow-up after the orientation                           |
| <input type="checkbox"/> "Buddy program" with experienced members                         | <input type="checkbox"/> N/A – the PFAC members do not go through a formal orientation process |
| <input type="checkbox"/> Information on how PFAC fits within the organization's structure |  |

Q115. Please describe other orientation content:

*This question was not displayed to the respondent.*

Q23. The PFAC received training on the following topics (click all that apply):

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Concepts of patient- and family-centered care (PFCC) | <input checked="" type="checkbox"/> Health care quality and safety measurement  |
| <input type="checkbox"/> Patient engagement in research                                  | <input type="checkbox"/> A high-profile quality issue in the news in relation to the hospital (e.g. simultaneous surgeries, treatment of VIP patients, mental patient discharge, etc) |
| <input type="checkbox"/> Types of research conducted in the hospital                     | <input type="checkbox"/> Other  |
| <input checked="" type="checkbox"/> Hospital performance information                     | <input type="checkbox"/> Health literacy  |
| <input type="checkbox"/> Not Applicable  |   |

Q116. Please describe other topics:

*This question was not displayed to the respondent*

**Q111. Section 5: FY 2016 PFAC Impact and Accomplishments**

**Q83. The following information only concerns PFAC activities in the fiscal year 2016.**

**Q24. The five greatest accomplishments of the PFAC were:**

Q24a. Accomplishment 1:

A suggestion was presented by a visiting patient to develop a process to increase membership by sending invitations to patients and family members three-six months post discharge. Members agreed that patients and families may need time to continue in their rehabilitation process at home prior to attending and participating in PFAC. Additional focus will be on recruiting patients who converted from inpatient to outpatient.

Q24a1. The idea for Accomplishment 1 came from:

- Patient/family advisors of the PFAC
- Department, committee, or unit that requested PFAC input

Q24b. Accomplishment 2:

Provide information about PFAC membership, goals, and purpose at our Annual Patient Reunion which is attended by patients and family members from the previous 12 months. The patient co-chair of PFAC will represent PFAC at this function.

Q24b1. The idea for Accomplishment 2 came from:

- Patient/family advisors of the PFAC
- Department, committee, or unit that requested PFAC input

Q24c. Accomplishment 3:

Q24c/. The idea for Accomplishment 3 came from:

- Patient/family advisors of the PFAC
- Department, committee, or unit that requested PFAC input

Q24d. Accomplishment 4:

Q24d. The idea for Accomplishment 4 came from:

- Patient/family advisors of the PFAC
- Department, committee, or unit that requested PFAC input

Q24e. Accomplishment 5:

Q24e. The idea for Accomplishment 5 came from:

- Patient/family advisors of the PFAC
- Department, committee, or unit that requested PFAC input

**Q25. The five greatest challenges the PFAC had in FY 2016:**

- N/A – we did not encounter any challenges in FY 2016

Q25a. Challenge 1:

The main challenge in 2016 was the recruitment of new members. We have not recruited any new members in 2016, although we have had attendance at a meeting by previous patients and family members who chose not to pursue membership.

Q25b. Challenge 2:

Members did not attend the Annual PFAC meeting. Members who had attended last year felt that many areas discussed were not applicable to a 53 bed rehabilitation hospital.

Q25c. Challenge 3:

Q25d. Challenge 4:

Q25e. Challenge 5:

Q26. The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups, or Board committees (click all that apply):

- |  |   |
|--|---|
| <input type="checkbox"/> Behavioral Health/substance use                                 | <input type="checkbox"/> Eliminating Preventable Harm                               |
| <input type="checkbox"/> Bereavement   | <input type="checkbox"/> Emergency Department Patient/Family Experience Improvement |
| <input type="checkbox"/> Care Transitions  | <input type="checkbox"/> Ethics   |
| <input type="checkbox"/> Code of Conduct   | <input type="checkbox"/> Institutional Review Board (IRB)                           |
| <input type="checkbox"/> Community Benefits  | <input type="checkbox"/> Patient Care Assessment                                    |
| <input type="checkbox"/> Critical Care   | <input type="checkbox"/> Patient Education  |
| <input type="checkbox"/> Other   | <input type="checkbox"/> Patient and Family Experience Improvement                  |
| <input type="checkbox"/> N/A – the PFAC members do not serve on these                    | <input type="checkbox"/> Pharmacy Discharge Script Program                          |
| <input type="checkbox"/> Board of Directors  | <input type="checkbox"/> Quality and Safety   |
| <input type="checkbox"/> Discharge Delays  | <input checked="" type="checkbox"/> Quality/Performance Improvement                 |
| <input type="checkbox"/> Lesbian, gay, bisexual, and transgender (LGBT) – sensitive care | <input type="checkbox"/> Surgical Home  |
| <input type="checkbox"/> Drug Shortage   | <input type="checkbox"/> Culturally competent care                                  |

Q117. Please describe other committees, projects, task forces, work groups, or Board committees:

*This question was not displayed to the respondent.*

Q27.

How do members on these hospital-wide committees or projects report back to the PFAC about their work?

Both patient and staff PFAC members attend Falls Performance Improvement meetings. Information from this meeting is shared at PFAC meetings.

Q28. The PFAC provided advice or recommendations to the hospital on the following areas mentioned in the Massachusetts law (click all that apply):

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Quality improvement initiatives                 | <input type="checkbox"/> Institutional Review Boards  |
| <input checked="" type="checkbox"/> Patient education on safety and quality matters | <input type="checkbox"/> N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2016 |
| <input checked="" type="checkbox"/> Patient and provider relationships              |   |

Q29. PFAC members participated in the following activities mentioned in the Massachusetts law (click all that apply):

- |   |  |
|---|--|
| <input type="checkbox"/> Task forces                                      | <input type="checkbox"/> N/A – the PFAC members did not participate in any of these activities                                 |
| <input type="checkbox"/> Award committees                                 | <input type="checkbox"/> Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees |
| <input type="checkbox"/> Advisory boards/groups or panels                 | <input type="checkbox"/> Selection of reward and recognition programs  |
| <input type="checkbox"/> Search committees and in the hiring of new staff | <input checked="" type="checkbox"/> Standing hospital committees that address quality  |

Q30. The hospital shared the following public hospital performance information with the PFAC (click all that apply):

Q30a. Complaints and serious events

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Complaints and investigations reported to Department of Public Health (DPH) | <input checked="" type="checkbox"/> Healthcare-Associated Infections (National Healthcare Safety Network) |
| <input checked="" type="checkbox"/> Serious Reportable Events reported to Department of Public Health (DPH)     | <input checked="" type="checkbox"/> Patient complaints to hospital  |

Q30b. Quality of care

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Joint Commission Accreditation Quality Report (such as asthma care, immunization, stroke care) | <input type="checkbox"/> Maternity care (such as C-sections, high risk deliveries)                    |
| <input type="checkbox"/> Medicare Hospital Compare (such as complications, readmissions, medical imaging)                          | <input type="checkbox"/> High-risk surgeries (such as aortic valve replacement, pancreatic resection) |

Q30c. Resource use and patient satisfaction

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Patient experience/satisfaction scores (eg. HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems) | <input type="checkbox"/> Inpatient care management (such as electronically ordering medicine, specially trained doctors for ICU patients) |
| <input checked="" type="checkbox"/> Resource use (such as length of stay, readmissions)  |   |

Q30d. Other

- |   |                                |
|---|--------------------------------|
| <input type="checkbox"/> N/A – the hospital did not share performance information with the PFAC | <input type="checkbox"/> Other |
|---|--------------------------------|

Q119. Please describe other hospital performance information:

*This question was not displayed to the respondent*

Q31. Please explain why the hospital shared only the data you checked in the previous questions:

Other areas are not applicable to our hospital.

Q32. Please describe how the PFAC was engaged in discussions around these data above and any resulting quality improvement initiatives:

PFAC open discussions are included in our meeting agenda. A discussion is held concerning any pertinent issues in areas such as resource use, patient experience, Joint Commission surveys and updates, complaints and investigations, reportable events, and infections.

Q33. The PFAC participated in activities related to the following state or national quality of care initiatives (click all that apply):

Q33a. National Patient Safety Hospital Goals

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Identifying patients correctly | <input checked="" type="checkbox"/> Preventing infection             |
| <input checked="" type="checkbox"/> Using medicines safely         | <input checked="" type="checkbox"/> Identifying patient safety risks |
| <input checked="" type="checkbox"/> Using alarms safely            | <input type="checkbox"/> Preventing mistakes in surgery              |

Q33b. Prevention and errors

- |   |  |
|---|--|
| <input type="checkbox"/> Hand-washing initiatives   | <input type="checkbox"/> Team training                             |
| <input type="checkbox"/> Checklists   | <input type="checkbox"/> Electronic Health Records –related errors |
| <input checked="" type="checkbox"/> Fall prevention   | <input checked="" type="checkbox"/> Safety                         |
| <input type="checkbox"/> Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings) | <input type="checkbox"/> Human Factors Engineering                 |

Q33c. Decision-making and advanced planning

- |   |  |
|---|--|
| <input type="checkbox"/> Informed decision making/informed consent                  | <input type="checkbox"/> Health care proxies   |
| <input checked="" type="checkbox"/> Improving information for patients and families | <input type="checkbox"/> End of life planning (e.g., hospice, palliative, advanced directives) |

Q33d.

Additional quality initiatives

Rapid response teams

Integration of behavioral health care

Disclosure of harm and apology

Q33e. Other

N/A – the hospital did not share performance information with the PFAC

Other

Q 120. Please describe other initiatives:

*This question was not displayed to the respondent.*

Q34. Were any members of your PFAC engaged in advising on research studies?

Yes

No

Q 35. In what ways are members of your PFAC engaged in advising on research studies? Are they:

*This question was not displayed to the respondent.*

Q 36.

How are members of your PFAC approached about advising on research studies?

*This question was not displayed to the respondent.*

Q 121. Please describe other ways that members of your PFAC are approached about advising on research studies:

*This question was not displayed to the respondent.*

Q 37.

About how many studies have your PFAC members advised on?

*This question was not displayed to the respondent.*

Q104.

**Section 6: PFAC Annual Report**



Q107.

**We strongly suggest that all PFAC members approve reports prior to submission.**

Q37.5. The following individuals approved this report prior to submission (list name and indicate whether staff or patient/family advisor):

Deb Santos Director of Quality John Hunt CEO Tad Comeau Director of Case Management Janice Kucewicz Chief Nursing Officer Deb Carney Director of Therapy Patient/family advisors: Anthony Before Anthony Cote Carol Aubin Jim Aubin Elaine Hodgman Gerry Slowick Joseph Slowick Jim Garrant Nancy Power Steve Power Jim Godin

Q38. Describe the process by which this PFAC report was completed and approved at your institution (choose the best option).

- Collaborative process: staff and PFAC members both wrote and/or edited the report
- Staff wrote report and PFAC members reviewed it
- Staff wrote report
- Other

Q122. Please describe other process:

*This question was not displayed to the respondent.*

Q106.

**Massachusetts law requires that each hospital's annual PFAC report be made available to the public upon request. Answer the following questions about the report:**

Q39. We post the report online.

Yes, link:

healthsouth.com

No

Q40. We provide a phone number or e-mail address on our website to use for requesting the report.

Yes, phone number/e-mail address:

No