

# 2016 Annual PFAC Report

## Shriners Hospitals for Children Springfield

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?

- Yes
- No
- Don't know

Q2. Staff PFAC Co-Chair Contact:

Name and Title:	<input type="text" value="Samantha West, Chi"/>
Email:	<input type="text" value="sswest@shrinenet.org"/>
Phone:	<input type="text" value="413-735-1251"/>

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="Mark Porter, parent c"/>
Email:	<input type="text" value="mporter@shrinenet.o"/>
Phone:	<input type="text" value="413-735-1294"/>

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 checked="" 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 checked="" type="checkbox"/> Patient satisfaction surveys         |
| <input checked="" 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 checked="" type="checkbox"/> Recruitment brochures  | <input checked="" type="checkbox"/> Community events                     |
| <input checked="" type="checkbox"/> Hospital publications  | <input type="checkbox"/> Other   |
| <input type="checkbox"/> Hospital banners and posters  | <input 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:

8

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

Child Life

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

Lead Child Life Specialist

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 type="checkbox"/> Payment for attendance at other conferences or trainings              |
| <input checked="" type="checkbox"/> Translator or interpreter services          | <input type="checkbox"/> Annual gifts of appreciation  |
| <input type="checkbox"/> Assistive services for those with disabilities         | <input checked="" type="checkbox"/> Conference call phone numbers or "virtual meeting" options |
| <input type="checkbox"/> Provision / reimbursement for child care or elder care | <input checked="" type="checkbox"/> Meetings outside 9am-5pm office hours                      |
| <input type="checkbox"/> Stipends   | <input type="checkbox"/> Other   |
| <input 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"):

urban

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	<input type="text" value="1%"/>
Asian	<input type="text" value="4%"/>
Black or African American	<input type="text" value="7%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="2%"/>
White	<input type="text" value="66%"/>
Other	<input type="text" value="20%"/>

Q91.

Don't know racial groups

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

63%

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	<input type="text" value=".1%"/>
Asian	<input type="text" value="2%"/>
Black or African American	<input type="text" value="5.5%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0%"/>
White	<input type="text" value="67%"/>
Other	<input type="text" value="25%"/>

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?

26%

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="3%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0%"/>
White	<input type="text" value="77%"/>
Other	<input type="text" value="20%"/>

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?

65%

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)?

65%

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?

Spanish	<input type="text" value="58%"/>
Portuguese	<input type="text"/>
Chinese	<input type="text" value=".05%"/>
Haitian Creole	<input type="text"/>
Vietnamese	<input type="text"/>
Russian	<input type="text" value="2%"/>
French	<input type="text"/>
Mon-Khmer/Cambodian	<input type="text"/>
Italian	<input type="text"/>
Arabic	<input type="text"/>
Albanian	<input type="text" value="2%"/>
Cape Verdean	<input type="text"/>

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	45%
Portuguese	
Chinese	
Haitian Creole	
Vietnamese	
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	
Albanian	
Cape Verdean	

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:

Our PFAC regularly has the option of bringing in a Spanish Speaking interpreter for our high volume of Spanish speaking members, if needed. Additionally, we continue to invite members from diverse backgrounds, as they travel often from abroad for treatment and stay at our Ronald McDonald house during their child's course of treatment. Signage in multiple languages advertising PFAC and it's mission, educates families at differing stages of treatment both those who visit from local areas, and destinations outside of immediate location to encompass our broader catchment area.

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:

At each PFAC meeting, we review past agendas, and create future agendas during roundtable discussion of new information, guest speakers, or pertinent themes important to patients and families. This year, we had a lapse in participation for one cycle, and the format/process of agenda creation as well as membership onboarding was revamped, to improve the member engagement going forward.

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 goal for 2016 was continue strengthen the role of the community and to pursue recruitment and active participation by family members. We provided enthusiasm to the program with a new series of fliers, newsletter mentions, in-services in each department for recruiting parents as members, and lowered the age of patient involvement to capture our older teens in PFAC activities. By changing the process in which we disseminate information, and advertise, we grew our member base. Additionally, we initiated the option to call in for meetings that a member cannot attend that cycle, in order to increase the option to solicit feedback, and involve members who are unable to meet in person. We also worked with department leaders in hopes of receiving input and ideas they may have to contribute which will allow us to implement more of a team approach.



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

n/a

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 checked="" type="checkbox"/> PFAC member(s) are on board-level committee(s)                               |
| <input checked="" 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 checked="" 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:

once a parent or older patient expresses interest by filling out the flier, or contacting the child life department for more information, the member's name and phone number is retained for follow up calls one month, and again at one week prior to meetings. The agenda is also disseminated at those times, to solicit ideas for topics of interest, or pertinent issues that parents wish to discuss.

Q109.

#### **Section 4: Orientation and Continuing Education**

Q21. Number of new PFAC members this year:

5

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

- |  |  |
|--|--|
| <input type="checkbox"/> Meeting with hospital staff   | <input type="checkbox"/> Other   |
| <input type="checkbox"/> General hospital orientation  | <input checked="" type="checkbox"/> In-person training   |
| <input checked="" type="checkbox"/> Hospital performance information                                 | <input type="checkbox"/> Massachusetts law and PFACs   |
| <input type="checkbox"/> Patient engagement in research  | <input 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 checked="" 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 checked="" 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:

revamping the current recruitment process, educational materials, and communication styles on PFAC to be able to reach more patients and families who wish to be apart of the PFAC mission.

Q24aI. The idea for Accomplishment 1 came from:

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

Q24b. Accomplishment 2:

conducting cross departmental in-services on PFAC recruitment for departments to better advertise and inform parents of the PFAC meetings, and its purpose

Q24bI. The idea for Accomplishment 2 came from:

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

Q24c. Accomplishment 3:

adding a "call in" option for parents who are unable to make the meeting in person so that they can continue their active involvement

Q24cI. The idea for Accomplishment 3 came from:

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

Q24d. Accomplishment 4:

lowering the age of membership to 14 in order to allow for more teen members to attend, with their parent

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:

Provide one meeting a year to target the BFIT athletic group where parents are already in the building, and can learn more about PFAC with an evening information session, in hopes of recruiting more members

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:

One meeting in June yielded low turn out, and thus a cancelled PFAC meeting. It was determined through communication that the summer was difficult for parents to make it into the building

Q25b. Challenge 2:

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 checked="" 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                                  |

Q 117. 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?

we have guest speakers at the PFAC meetings, which vary depending on the expert of current issues, new program developments, or improvements throughout the hospital.

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 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 checked="" type="checkbox"/> Inpatient care management (such as electronically ordering medicine, specially trained doctors for ICU patients) |
| <input 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 |
|---|--------------------------------|

Q 119. 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:

Our QI leader regularly shares parent Press Ganey survey feedback, safe care guidelines, opportunities for improvement noted, mission of the hospital, upcoming events, and new programs

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

Public Hospital Performance Information was shared verbally at committee meetings, through written press ganey results, as well as through mailed agenda and meeting minutes to the PFAC distribution lists. Board member contribution was helpful in allowing up to date information newly disseminated.

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

- Identifying patients correctly
- Using medicines safely
- Using alarms safely

- Preventing infection
- Identifying patient safety risks
- Preventing mistakes in surgery

Q33b. Prevention and errors

- Hand-washing initiatives
- Checklists
- Fall prevention
- Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings)

- Team training
- Electronic Health Records –related errors
- Safety
- Human Factors Engineering

Q33c. Decision-making and advanced planning

- Informed decision making/informed consent
- Improving information for patients and families

- Health care proxies
- End of life planning (e.g., hospice, palliative, advanced directives)

Q33d.

Additional quality initiatives

- Rapid response teams
- Disclosure of harm and apology

- Integration of behavioral health care

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

Q35. In what ways are members of your PFAC engaged in advising on research studies? Are they:

*This question was not displayed to the respondent.*

Q36.

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

*This question was not displayed to the respondent.*

Q121. Please describe other ways that members of your PFAC are approached about advising on research studies:

*This question was not displayed to the respondent.*

Q37.

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):

Sandra Morales, PFAC staff member Michelle Foley, PFAC staff member

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:

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:

413-735-1251 sswest@shrinenet.org

No

Q41. Our hospital has a link on its website to a PFAC page.

Yes, link:

No, we don't have such a section on our website