

# 2016 Annual PFAC Report: UMass Memorial Medical Center

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:	Ana Mechlin, Patien
Email:	ana.mechlin@umas
Phone:	774-441-6742

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:	Daniel Wolpert
Email:	dwolpert@fleet-safet
Phone:	508-868-3752

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 type="checkbox"/> Patient satisfaction surveys                    |
| <input checked="" type="checkbox"/> Promotional efforts within institution to providers or staff | <input type="checkbox"/> Community-based organizations                   |
| <input checked="" type="checkbox"/> Facebook and Twitter   | <input type="checkbox"/> Houses of worship                               |
| <input checked="" type="checkbox"/> Recruitment brochures  | <input checked="" type="checkbox"/> Community events                     |
| <input 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:

7

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

22

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

Patient Experience

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

Project Coordinator

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 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 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"):

Worcester County, MA

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="0.2%"/>
Asian	<input type="text" value="4%"/>
Black or African American	<input type="text" value="3.6%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value=".2%"/>
White	<input type="text" value="80.7%"/>
Other	<input type="text" value="11.6%"/>

Q91.

Don't know racial groups

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

9.4%

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="0.18%"/>
Asian	<input type="text" value="3.29%"/>
Black or African American	<input type="text" value="5.51%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0.05%"/>
White	<input type="text" value="74.26%"/>
Other	<input type="text" value="16.71%"/>

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?

10.11%

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"/>
Asian	<input type="text"/>
Black or African American	10%
Native Hawaiian or other Pacific Islander	<input type="text"/>
White	80%
Other	10%

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?

10%

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)?

8.23%

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	4.57%
Portuguese	1.22%
Chinese	0.2%
Haitian Creole	0.03%
Vietnamese	0.43%
Russian	0.07%
French	0.03%
Mon-Khmer/Cambodian	0.02%
Italian	0.01%
Arabic	0.52%
Albanian	0.31%
Cape Verdean	

Q127.

Don't know primary languages

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

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	7%
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:

PFAC has been attending and participating in many community events in order to recruit members that represent our community. A representative sits on the Special Population Resource Center Community Advisory Board and we hope to see many new community members from this partnership.

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:

Monthly planning meetings are held to communicate thoughts and ideas. Staff and PFAC members are sometimes given tasks to recruit presenters to the meetings. Presentations from various departments help to keep the group updated on what is happening in the Medical Center. There are also many re-occurring agenda items such as; standing committee updates, manager's meeting updates, review of the minutes, etc. The agenda is then sent in a reminder email to members of the council a week or two in advance to the meeting.

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:

PFAC Representation on Patient Care Committees, Marketing PFAC to Department Heads, Improving the Patient Experience, Recruitment of New Members

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

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

- |   |   |
|---|---|
| <input 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 on a regular basis to provide feedback, suggestions or submit content for the meeting. PFAC also has a facebook page used for recruitment and to update the public on things they are working on.

Q109.

#### Section 4: Orientation and Continuing Education

Q21. Number of new PFAC members this year:

7

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

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Meeting with hospital staff                           | <input type="checkbox"/> Other   |
| <input checked="" type="checkbox"/> General hospital orientation                          | <input checked="" type="checkbox"/> In-person training   |
| <input type="checkbox"/> Hospital performance information                                 | <input checked="" 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 type="checkbox"/> PFAC policies, member roles and responsibilities                 | <input type="checkbox"/> Skills training on communication, technology, and meeting preparation |
| <input checked="" type="checkbox"/> Health care quality and safety                        | <input type="checkbox"/> Immediate "assignments" to participate in PFAC work                   |
| <input 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 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):

Concepts of patient- and family-centered care (PFCC)

Health care quality and safety measurement

Patient engagement in research

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)

Types of research conducted in the hospital

Other

Hospital performance information

Health literacy

Not Applicable

Q116. Please describe other topics:

PFAC Members were given LEAN training and idea board training

**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:

PFAC members participated in a LEAN Green Belt A3 project in which they worked with a clinic to minimize wait times for their patients

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:

PFAC implemented an idea board identical to the idea boards used by each department within the medical center. This helps to keep the PFAC's ideas organized and in line with system goals

Q24bl. The idea for Accomplishment 2 came from:

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

Q24c. Accomplishment 3:

PFAC members joined many standing committees within the organization including, Patient Safety Committee, Infection Control Committee, Cancer Committee, and Patient Flow Committee

Q24cl. The idea for Accomplishment 3 came from:

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

Q24d. Accomplishment 4:

UMass included their Marlboro member hospital in this year's end of year gathering where we celebrate PFAC's many accomplishments

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:

Recruitment of new members representing our community

Q25b. Challenge 2:

Initiation and sustaining community outreach projects

Q25c. Challenge 3:

Attendance at the monthly meetings

Q25d. Challenge 4:

On-boarding of new members

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 checked="" 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 checked="" 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   |

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

Cancer Committee, Infection Control Committee, MyChart implementation work group

Q27.

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

We leave time on the agenda each month for committee members to report out on their committee work.

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 | 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 checked="" 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 checked="" 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 type="checkbox"/> Complaints and investigations reported to Department of Public Health (DPH) | <input type="checkbox"/> Healthcare-Associated Infections (National Healthcare Safety Network) |
| <input 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 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 checked="" 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 type="checkbox"/> Patient experience/satisfaction scores (eg. <input checked="" type="checkbox"/> 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 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:

The hospital shared data that was relevant to what PFAC members were working on. Data was also shared to PFAC members at their request. Data that was not shared was either not requested by PFAC members or was not relevant to their current projects

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

PFAC was engaged in many different ways. PFAC members attended monthly manager's meetings in which they were updated on system goal progress and current system initiatives/projects. Many individuals visited PFAC meetings to present their progress to PFAC and ask for their feedback. PFAC members worked on various project throughout the medical center that related to the above data such as patient wait times and readmission/discharge. PFAC members also joined many standing committees this year that discussed these data topics.

**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 type="checkbox"/> Identifying patients correctly | <input checked="" type="checkbox"/> Preventing infection  |
| <input type="checkbox"/> Using medicines safely         | <input type="checkbox"/> Identifying patient safety risks |
| <input 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 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 checked="" type="checkbox"/> 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:

- Educated about the types of research being conducted
- Involved in study planning and design
- Involved in conducting and implementing studies
- Involved in advising on plans to disseminate study findings and to ensure that findings are communicated in understandable, usable ways
- Involved in policy decisions about how hospital researchers engage with the PFAC (e.g. they work on a policy that says researchers have to include the PFAC in planning and design for every study)



Q36.

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

- Researchers contact the PFAC
- Researchers contact individual members, who report back to the PFAC
- Other
- None of our members are involved in research studies

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?

- 1 or 2
- 3-5
- More than 5
- None of our members are involved in research studies

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):

Dan Wolpert - Family Co-Chair

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:

774-441-6742

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