

**2017 Patient and Family Advisory Council Annual Report**  
**PFAC activities in fiscal year 2017 only: (July 1, 2016 – June 30, 2017)**

**Section 1: General Information**

Holy Family Hospital is one of several PFACs for a system with several hospitals

Staff PFAC Co-Chair Contact:

- Suzy Goodspeed, Director of Spiritual Care  
suzy.goodspeed@steward.org  
978-521-8151
- Adeline Parkinson, Data Analyst for the Quality & Safety department  
adeline.parkinson@steward.org  
978-687-0156 X2771

Patient/Family PFAC Co-Chair Contact:

- Mary Ellen Sorensen
- Eva Ruiz

**Section 2: PFAC Organization**

**This year, the PFAC recruited new members through the following approaches:**

- Hospital banners and posters
- Hospital publications
- Promotional efforts within institution to patients or families
- Promotional efforts within institution to providers or staff
- Recruitment brochures
- Word of mouth/through existing members

**Total number of staff members on the PFAC:**

- 7

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

- 8

**The name of the hospital department supporting the PFAC is:**

- Quality & Safety

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

- Data Analyst

**The hospital provides the following for PFAC members to encourage their participation in meetings:**

- Conference call phone numbers or “virtual meeting” options
- Parking is available
- Meals

**Section 3: Community Representation**

**Our hospital’s catchment area is geographically defined as:**

- Merrimack Valley

**Racial and ethnic groups in this areas:**

	RACE						ETHNICITY
	% American Indian or Alaska Native	% Asian	% Black or African American	% Native Hawaiian or other Pacific Islander	% White	% Other	% Hispanic, Latino, or Spanish origin
14b. Patients the hospital provided care to in FY 2017	0.09	1.15	1.93	0.03	67.34	19.20	30.01
14c. The PFAC patient and family advisors in FY 2017	0	0	0	0	98.4%	.08%	1.52%

**Languages spoken in this area:**

	Limited English Proficiency (LEP) %	
15a. Patients the hospital provided care to in FY 2017	25%	<input type="checkbox"/> Don't know
15b. PFAC patient and family advisors in FY2017	0	<input type="checkbox"/> Don't know

**Percentage of patients that the hospital provided care to in FY 2017, spoke the following as their primary language?**

	%
Spanish	20.24
Portuguese	0.19
Chinese	0.07
Haitian Creole	0.11
Vietnamese	0.24

Russian	0.08
French	0.14
Mon-Khmer/Cambodian	0.04
Italian	0.11
Arabic	0.35
Albanian	0.02
Cape Verdean	0

**Percentage of PFAC patient and family advisors spoke the following as their primary language?**

	<b>%</b>
Spanish	.08%
Portuguese	0%
Chinese	0%
Haitian Creole	0%
Vietnamese	0%
Russian	0%
French	0%
Mon-Khmer/Cambodian	0%
Italian	0%
Arabic	0%
Albanian	0%
Cape Verdean	0%

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

- The committee is working with Interpreter Services and Community Benefits to ensure that our Latino community is made aware of the PFAC for the hospital.

**Section 4: PFAC Operations**

**Our process for developing and distributing agendas for the PFAC meetings:**

- PFAC members develop the agenda and send it out prior to the meeting

**The PFAC goals and objectives for 2017 were:**

- Developed by PFAC members and staff

**The PFAC had the following goals and objectives for 2017:**

- Recruitment
- PFAC members to become embedded in the hospital committee structure, with more participation.
- Put together a reporting schedule for PFAC to review and discuss the hospital reporting items.

**Subcommittees that the PFAC has established:**

- None

**PFAC interaction with the hospital Board of Directors:**

- PFAC submits annual report to Board
- PFAC submits meeting minutes to Board
- PFAC member(s) attend(s) Board meetings
- Board member(s) attend(s) PFAC meetings
- PFAC member(s) are on board-level committee(s)

**Describe the PFAC’s use of email, listservs, or social media for communication:**

- The PFAC uses email only.

**Section 5: Orientation and Continuing Education**

**Number of new PFAC members this year:**

- 3

**Orientation content included:**

- History of the PFAC
- Hospital performance information
- Information on how PFAC fits within the organization’s structure
- In-person training
- PFAC policies, member roles and responsibilities
- Skills training on communication, technology, and meeting preparation
- Hospital volunteer orientation process is followed

**The PFAC received training on the following topics:**

- Concepts of patient- and family-centered care (PFCC)
- Health care quality and safety measurement

**Section 6: FY 2017 PFAC Impact and Accomplishments**

**The following information only concerns PFAC activities in the fiscal year 2017.**

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

<b>Accomplishment</b>	<b>Idea came from (choose one)</b>	<b>PFAC role can be best described as (choose one)</b>
Accomplishment 1: Staff secret shopper rounds. Rounding the hospital posing as lost patients/family members, waiting for staff to go above and beyond. They are presented with a gift card on the spot as a thank you. Also rounded planting random trash and waiting to see if staff will pick it up. Working to keep our hospital clean and safe. Again, they are presented with a gift card for going above and beyond.	<input type="checkbox"/> Patient/family advisors of the PFAC <input checked="" type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading

<p>Accomplishment 2: Got the hospital to order more Wheel chairs/bed pans/commodes for our larger patients.</p> <p>If a patient is coming in for an appointment and is requesting a wheel chair, now no matter what the size of the patient, they can call the front desk and reserve the chair to be waiting for them when they arrive.</p>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input checked="" type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
<p>Accomplishment 3: Including the up and coming October meeting, the group met four times this year.</p>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input checked="" type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
<p>Accomplishment 4: We were able to recruit two new members.</p>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input checked="" type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
<p><b>26e. Accomplishment 5:</b></p>	<input type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading

**The five greatest challenges the PFAC had in FY 2017:**

Challenge 1:

We are a two campus hospital (two different communities). Recruitment to include community member from both campuses has been difficult.

Challenge 2:

Recruiting members that fit our diverse patient population.

Challenge 3:

Focusing on PFAC appropriate projects. Focusing more on making the hospital a better place for patients.

**Challenge 4:**

Having the resources (funds) to work on projects. We are given limited funds for marketing.

**Challenge 5:**

Trying to determine the best time for the group to meet. We have very busy committee members trying to juggle many responsibilities. What is the best time for everyone?

---

**The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups, or Board committees:**

- Behavioral Health/Substance Use
- Board of Directors
- Ethics
- Patient Care Assessment
- Patient and Family Experience Improvement
- Quality and Safety

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

- This is still a work in progress and one of our goals for FY2018.

**The PFAC provided advice or recommendations to the hospital on the following areas mentioned in the Massachusetts law:**

- Patient and provider relationships
- Patient education on safety and quality matters

**PFAC members participated in the following activities mentioned in the Massachusetts law:**

- Standing hospital committees that address quality

**The hospital shared the following public hospital performance information with the PFAC:**

- **32a. Complaints and serious events**  
Healthcare-Associated Infections (National Healthcare Safety Network)
- **32b. Quality of care**  
Joint Commission Accreditation Quality Report (such as asthma care, immunization, stroke care)
- **32c. Resource use, patient satisfaction, and other**  
Patient experience/satisfaction scores (eg. HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems)

**Please explain why the hospital shared only the data you noted above:**

- There is no set schedule for the discussion of hospital performance data. This is one of our goals for FY2018.

**The PFAC participated in activities related to the following state or national quality of care initiatives:**

- **35a. National Patient Safety Hospital Goals**  
Preventing infection
- **35b. Prevention and errors**  
Fall prevention
- **35c. Decision-making and advanced planning**  
Improving information for patients and families
- **35d. Other quality initiatives**  
Integration of behavioral health care

**Describe the process by which this PFAC report was completed and approved at your institution:**

- Staff wrote report and PFAC members reviewed it
- Review from hospital Senior Leadership

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

- The PFAC report is posted on the Holy Family Hospital website, under the PFAC section.
- As contact information for patients/family members, the staff co-leader phone numbers and emails are posted on the website.

**Reviewed/Approved by the HFH Patient Family Advisory Council/HFH Senior Leadership  
September 2017**