



PFAC Annual Report Form

Health Care For All (HCFA) promotes health justice in Massachusetts by working to reduce disparities and ensure coverage and access for all. HCFA uses direct service, policy development, coalition building, community organizing, public education and outreach to achieve its mission. HCFA's vision is that everyone in Massachusetts has the equitable, affordable, and comprehensive care they need to be healthy.

Why complete an annual report for my PFAC?

Under Massachusetts law, hospital-wide PFACs are required to write annual reports by October 1st each year. These reports must be made available to members of the public upon request. As in past years, HCFA is requesting a copy of each report and submitted reports will be posted on HCFA's website, www.hcfama.org. HCFA recommends using this template to assist with information collection, as well as the reporting of key activities and milestones.

What will happen with my report and how will HCFA use it?

We recognize the importance of sharing of information across PFACs. Each year, we

- > make individual reports available online
- > share the data so that PFACs can learn about what other groups are doing

Who can I contact with questions?

Please contact us at PFAC@hcfama.org or call us at 617-275-2982.

If you wish to use this Word document or any other form, please email it to PFAC@hcfama.org.

Reports should be completed by October 1, 2019.

The survey questions concern PFAC activities in fiscal year 2019 only: (July 1, 2018 – June 30, 2019).

Section 1: General Information

1. Hospital Name: Baystate Medical Center

NOTE: Massachusetts law requires every hospital to make a report about its PFAC publicly available. HCFA strongly encourages you to fill out a separate template for the hospital-wide PFAC at each individual hospital.

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2a. Which best describes your PFAC?
We are the only PFAC at a single hospital − skip to #3 below
☐ We are a PFAC for a system with several hospitals – skip to #2C below
☐ We are one of multiple PFACs at a single hospital
☑ We are one of several PFACs for a system with several hospitals – skip to #2C below
Other (Please describe):
2b. Will another PFAC at your hospital also submit a report?
☐ Yes
⊠ No
☐ Don't know
2c. Will another hospital within your system also submit a report?
⊠ Yes
□ No
☐ Don't know
3. Staff PFAC Co-Chair Contact:
2a. Name and Title: Diane Thomas, RN, Director Patient & Guest Relations
2b. Email: diane.thomas@baystatehealth.org
2c. Phone: (413) 794-5456
☐ Not applicable
4. Patient/Family PFAC Co-Chair Contact:
3a. Name and Title: Diane Barstow
3b. Email: diane.l.barstow@gmail.com
3c. Phone: n/a
☐ Not applicable
5. Is the Staff PFAC Co-Chair also the Staff PFAC Liaison/Coordinator?
✓ Yes – skip to #7 (Section 1) below
☐ No – describe below in #6

6. Staff PFAC Liaison/Coordinator Contact:
6a. Name and Title:
6b. Email:
6c. Phone:
☐ Not applicable
Section 2: PFAC Organization
7. This year, the PFAC recruited new members through the following approaches (check all that apply):
☐ Case managers/care coordinators
☐ Community based organizations
\square Community events
Facebook, Twitter, and other social media
☐ Hospital banners and posters
Hospital publications
☐ Houses of worship/religious organizations
☐ Patient satisfaction surveys
Promotional efforts within institution to patients or families
Promotional efforts within institution to providers or staff
□ Recruitment brochures
☑ Word of mouth/through existing members
Other (Please describe):
\square N/A – we did not recruit new members in FY 2019
8. Total number of staff members on the PFAC: 2
9. Total number of patient or family member advisors on the PFAC: 11
10. The name of the hospital department supporting the PFAC is: Office of Patient Experience
11. The hospital position of the PFAC Staff Liaison/Coordinator is: Director Patient & Guest Relations
12. The hospital provides the following for PFAC members to encourage their participation in meetings (check all that apply):
Annual gifts of appreciation
Assistive services for those with disabilities
Conference call phone numbers or "virtual meeting" options
☐ Meetings outside 9am-5pm office hours
Parking, mileage, or meals
Payment for attendance at annual PFAC conference

☐ Payment for attendance at other conferences or trainings
☑ Provision/reimbursement for child care or elder care
☐ Stipends
☐ Translator or interpreter services
Other (Please describe):
□ N/A

Section 3: Community Representation

The PFAC regulations require that patient and family members in your PFAC be "representative of the community served by the hospital." If you are not sure how to answer the following questions, contact your community relations office or check "don't know."

13. Our hospital's catchment area is geographically defined as: Hampden County

☐ Don't know

14. Tell us about racial and ethnic groups in these areas (please provide percentages; if you are unsure of the percentages check "don't know"):

	RACE			ETHNICITY				
	% American Indian or Alaska Native	% Asian	% Black or African America n	% Native Hawaiian or other Pacific Islander	% White	% Other	% Hispanic, Latino, or Spanish origin	
14a. Our defined catchment area	0	2	9	0	78	9	25	Don't know
14b. Patients the hospital provided care to in FY 2018	0.08	1.28	10.82	0.2	51.23	2.53	34.07	Don't know
14c. The PFAC patient and family advisors in FY 2018	0	0	15	0	85	0	0	Don't know

15. Tell us about languages spoken in these areas (please provide percentages; <u>if you are unsure of the percentages select "don't know")</u>:

	Limited English Proficiency (LEP)	
	%	
15a. Patients the hospital provided care to in FY 2018	5	□ Don't know
15b. PFAC patient and family advisors in FY 2018	0	☐ Don't know

15c. What percentage of patients that the hospital provided care to in FY 2019 spoke the following as their primary language?

%
8
0.11
0.05
0.04
0.10
0.46
0.05
bodian 0.04
0.01
0.39
0.01
0
0.46 0.05 bodian 0.04 0.01 0.39 0.01

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ı	⊢Don't know	7

15d. In FY 2019, what percentage of PFAC patient and family advisors spoke the following as their primary language?

	%
Spanish	0
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

☐ Don't know

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

Section 4: PFAC Operations

17. Our process for developing and distributing agendas for the PFAC meetings (choose):
☐ Staff develops the agenda and sends it out prior to the meeting
☐ Staff develops the agenda and distributes it at the meeting
\square PFAC members develop the agenda and send it out prior to the meeting
\square 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. (Please describe below in #17a)
☐ PFAC members and staff develop agenda together and distribute it at the meeting. (Please describe below in #17a)
Other process (Please describe below in #17b)
□ N/A – the PFAC does not use agendas
17a. If staff and PFAC members develop the agenda together, please describe the process:
Our PFAC has an established history of holding collaborative planning sessions prior to regularly scheduled meetings. Members are asked to complete an evaluation as each meeting ends. The evaluation offers opportunity to recommend future topics Agenda ideas are obtained through member recommendation, PFAC business and request from hospital leaders seeking input from engaging patient voice for improvement.
17b. If other process, please describe:
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18. The PFAC goals and objectives for 2019 were: (check the best choice): ☐ Developed by staff alone ☐ Developed by staff and reviewed by PFAC members ☐ Developed by PFAC members and staff
18. The PFAC goals and objectives for 2019 were: (check the best choice): ☐ Developed by staff alone ☐ Developed by staff and reviewed by PFAC members ☐ Developed by PFAC members and staff ☐ N/A – we did not have goals for FY 2019– Skip to #20
18. The PFAC goals and objectives for 2019 were: (check the best choice): □ Developed by staff alone □ Developed by staff and reviewed by PFAC members □ Developed by PFAC members and staff □ N/A – we did not have goals for FY 2019– Skip to #20 19. The PFAC had the following goals and objectives for 2019: Goal-Recruitment: ongoing need to attract members that better reflect diversity of community.

21. How does the PFAC interact with the hospital Board of Directors (check all that apply):
PFAC submits annual report to Board
☐ PFAC submits meeting minutes to Board
☐ Action items or concerns are part of an ongoing "Feedback Loop" to the Board
☐ PFAC member(s) attend(s) Board meetings
☐ Board member(s) attend(s) PFAC meetings
\square PFAC member(s) are on board-level committee(s)
☐ Other (Please describe):
☐ N/A – the PFAC does not interact with the Hospital Board of Directors
22. Describe the PFAC's use of email, listservs, or social media for communication:
The most preferred methods include email and telephone for team communication. Our members engage in use of listservs, social media and special interest groups to connect with outside groups.
□ N/A – We don't communicate through these approaches
Section 5: Orientation and Continuing Education
23. Number of new PFAC members this year: 4
24. Orientation content included (check all that apply):
☐ "Buddy program" with experienced members
\square Check-in or follow-up after the orientation
☐ Concepts of patient- and family-centered care (PFCC)
☐ General hospital orientation
☐ Health care quality and safety
☐ History of the PFAC
☐ Hospital performance information
☐ Immediate "assignments" to participate in PFAC work
☐ Information on how PFAC fits within the organization's structure
☐ In-person training
☐ Massachusetts law and PFACs
☐ Meeting with hospital staff
☐ Patient engagement in research
PFAC policies, member roles and responsibilities
\square Skills training on communication, technology, and meeting preparation
☐ Other (Please describe below in #24a)
☐ N/A – the PFAC members do not go through a formal orientation process

24a. If other, describe:
25. The PFAC received training on the following topics:
☐ Concepts of patient- and family-centered care (PFCC)
☐ Health care quality and safety measurement
☐ Health literacy
\square A high-profile quality issue in the news in relation to the hospital (e.g. simultaneous surgeries,
treatment of VIP patients, mental/behavioral health patient discharge, etc.)
☐ Hospital performance information
Patient engagement in research
☐ Types of research conducted in the hospital
\square Other (Please describe below in #25a)
☐ N/A – the PFAC did not receive training
25a. If other, describe:

Section 6: FY 2019 PFAC Impact and Accomplishments

The following information only concerns PFAC activities in the fiscal year 2019.

26. The five greatest accomplishments of the PFAC were:

Accomplishment	Idea came from (choose one)	PFAC role can be best described as (choose one)
26a. Accomplishment 1: Investment of time and talent by PFAs to guide hospital leadership from patient perspective.	☐ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input	☐ Being informed about topic ☐ Providing feedback or perspective ☐ Discussing and influencing decisions/agenda ☐ Leading/co leading
26b. Accomplishment 2: Successful recruitment and onboarding of new PFAC members who reflect diversity of our community	☐ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input	☐ Being informed about topic ☐ Providing feedback or perspective ☐ Discussing and influencing decisions/agenda ☐ Leading/co leading
26c. Accomplishment 3: Launch of PFA patient rounding in support of patient-to patient advocacy	☐ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input	☐ Being informed about topic ☐ Providing feedback or perspective ☐ Discussing and influencing decisions/agenda ☐ Leading/co leading
26d. Accomplishment 4: Collaboration with Dept. of Medicine for Simulation training: Area of focus for 2019: end of life care planning.	☐ Patient/family advisors of the PFAC ☑ Department, committee, or unit that requested PFAC input	☐ Being informed about topic ☐ Providing feedback or perspective ☐ Discussing and influencing decisions/agenda ☐ Leading/co leading

	26e. Accomplishment 5: Planned and hosted the 2 nd annual PFAC award event celebrating staff members for exemplary care and compassion.	☐ Patient/family advisors of the PFAC ☐ Department, committee, or unit that requested PFAC input	☐ Being informed about topic ☐ Providing feedback or perspective ☐ Discussing and influencing decisions/agenda ☐ Leading/co leading	
27. The five greatest challenges the PFAC had in FY 2019:				
	27a. Challenge 1:			
	Impacting hospital culture in way where expectation at all levels includes early involvement of patient voice			
	27b. Challenge 2:			
	Ability to keep members excited and engaged about PFAC work, particularly with projects and programming between meetings			
	27c. Challenge 3:			
	Ongoing diversity with attention to improve balance pf patients to staff, particularly in specialty PFACs			
	27d. Challenge 4:			
	Finding rewarding, sustainable way to engage PFAs unable to participate in person			
	27e. Challenge 5:			
		1 II - TV 2010		
	\bigsqcup N/A – we did not encounter	any challenges in FY 2019		

28. The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups,
or Board committees:
☐ Behavioral Health/Substance Use
Bereavement
☐ Board of Directors
☐ Care Transitions
☐ Code of Conduct
☐ Community Benefits
☐ Critical Care
☐ Culturally Competent Care
☐ Discharge Delays
☑ Diversity & Inclusion
☐ Drug Shortage
⊠ Eliminating Preventable Harm
Emergency Department Patient/Family Experience Improvement
☐ Ethics
☐ Institutional Review Board (IRB)
Lesbian, Gay, Bisexual, and Transgender (LGBT) – Sensitive Care
Patient Care Assessment
☑ Patient Education
Patient and Family Experience Improvement
☐ Pharmacy Discharge Script Program
☐ Quality and Safety
☐ Quality/Performance Improvement
☐ Surgical Home
☐ Other (Please describe): Transparency Committee, Age Friendly Collaborative, Cultural Transformation, Search Committee
□ N/A – the PFAC members do not serve on these – Skip to #30
29. How do members on these hospital-wide committees or projects report back to the PFAC about their work?
Regular PFAC meetings include time for members to report out on committee work, progress or projects

30. The PFAC provided advice or recommendations to the hospital on the following areas mentioned in the Massachusetts law (check all that apply):
☐ Institutional Review Boards
☐ Patient and provider relationships
Patient education on safety and quality matters
☐ Quality improvement initiatives
\square N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2018
31. PFAC members participated in the following activities mentioned in the Massachusetts law (check all that apply):
Advisory boards/groups or panels
☐ Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees
Search committees and in the hiring of new staff
Selection of reward and recognition programs
☐ Task forces
□ N/A – the PFAC members did not participate in any of these activities
32. The hospital shared the following public hospital performance information with the PFAC (check all
tnat apply):
that apply): 32a. Complaints and serious events
32a. Complaints and serious events ☐ Complaints and investigations reported to Department of Public Health (DPH)
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☐ N/A – the hospital did not share performance information with the PFAC – Skip to #35
33. Please explain why the hospital shared only the data you checked in Q 32 above:
34. Please describe how the PFAC was engaged in discussions around these data in #32 above and any resulting quality improvement initiatives:
Members have standing seats on Hospital Quality Council, Patient Safety and system-wide Patient Experience teams. In these roles members are actively engaged in performance metrics and data.
35. The PFAC participated in activities related to the following state or national quality of care
initiatives (check all that apply):
35a. National Patient Safety Hospital Goals Identifying patient safety risks
☐ Identifying patient safety risks ☐ Identifying patients correctly
☐ Identifying patients correctly ☐ Preventing infection
Preventing mistakes in surgery
☐ Using medicines safely
☐ Using alarms safely 35b. Prevention and errors
☐ Care transitions (e.g., discharge planning, passports, care coordination, and follow up between
care settings)
☐ Checklists
☐ Electronic Health Records –related errors
Hand-washing initiatives
Human Factors Engineering
☐ Fall prevention
☐ Team training
Safety
35c. Decision-making and advanced planning
☐ End of life planning (e.g., hospice, palliative, advanced directives)
Health care proxies
☐ Informed decision making/informed consent
35d. Other quality initiatives
$oxed{\boxtimes}$ Disclosure of harm and apology

Section 7: PFAC Annual Report

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

40. The following individuals approved this report prior to submission (list name and indicate whether staff or patient/family advisor): Diane Barstow, PFAC Chair, Diane Thomas, Staff Facilitator 41. 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 (Please describe): 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: 42. We post the report online. Yes, link: https://www.baystatehealth.org/-/media/files/about-us/communityprograms/health-initiatives/pfac/pfac-bmc-annual-report.pdf?la=en ∐ No 43. We provide a phone number or e-mail address on our website to use for requesting the report. Yes, phone number/e-mail address: \bowtie No 44. Our hospital has a link on its website to a PFAC page. Yes, link: https://www.baystatehealth.org/-/media/files/about-us/communityprograms/health-initiatives/pfac/pfac-bmc-annual-report.pdf?la=en ☐ No, we don't have such a section on our website