



# Holy Family Hospital Patient and Family Advisory Council 2019 Annual Report

(PFAC activities in fiscal year 2019 (July 1, 2018 – June 30, 2019))

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## Section 1: General Information

The Holy Family Hospital Patient Family Advisory Council (PFAC) is one of several groups within the Steward Health Care System. The PFAC Staff Co-Chair and Liaison/Coordinator contact information is noted below:

- Adeline Parkinson, Quality Analyst for the Quality & Safety department  
adeline.parkinson@steward.org  
978-687-0156 X2771

The PFAC Patient/Family Co-Chair names are noted below:

- Mary Ellen Sorensen
- Eva Ruiz

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## Section 2: PFAC Organization

This year, the PFAC use the following recruitment approach:

- Hospital publications
- Recruitment brochures
- Word of mouth/through existing members

Total number of staff members on the PFAC: 11

Total number of patient/family member advisors on the PFAC: 4

The name of the hospital department supporting the PFAC is: Quality & Safety

The hospital position of the PFAC Co-Chair and Staff Liaison/Coordinator is: Quality Analyst

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

- Free parking
- Lunch/snacks
- Translator or interpreter services

### Section 3: Community Representation

Our hospital's catchment area is geographically defined as the 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	
14a. Our defined catchment area								UTD
14b. Patients the hospital provided care to in FY 2019	0.14%	1.19%	2%	.04%	66%	21%	.66%	
14c. the PFAC patient and family advisors in FY 2019								UTD

Languages spoken in this area:

	Limited English Proficiency (LEP) %
15a. Patients the hospital provided care to in FY 2019	18%
15b. PFAC patient and family advisors in FY2019	0%

Percentage of patients that the hospital provided care to in FY 2019, spoke the following as their primary language?

	%
Spanish	15.5
Portuguese	.016
Chinese	0.06
Haitian Creole	0.12
Vietnamese	0.17
Russian	0.05
French	0.08
Mon-Khmer/Cambodian	0.03
Italian	0.07

Arabic	0.27
Albanian	0.01
Cape Verdean	0.01

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%

The PFAC is currently working with the Marketing/Community Outreach Director to ensure that the surrounding communities are made aware of the Holy Family Hospital PFAC.

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## Section 4: PFAC Operations

Development of Agenda:

- PFAC members and staff develop the agenda and send it out prior to the meeting.
- Items might be topics generated by discussion at the prior meeting.
- Items might be brought to the group from hospital groups/staff.

Method of communication:

- The group communicates via email only.

FY 2019 goals and objectives: (same in FY 2018):

- Recruitment
- Choose appropriate projects for the group.
- Create a reporting schedule for PFAC to review and discuss the hospital reporting items.
- Goals and objectives were developed by PFAC patient/family member advisors and staff collectively.

Sub-groups developed:

- Cultural Diversity poster sub-group continues.
- The group will be working with the Patient Experience Committee in 2020.

Annual report shared:

- PFAC submits all annual reports to the hospital Board of Directors.

## Section 5: Orientation and Continuing Education

New Members for FY 2019:

- 4 new staff members.
- No new patient/family member advisors.

Orientation content includes:

- History of the PFAC
- Hospital performance information
- Information on how PFAC fits within the organization’s structure
- Massachusetts law and PFACs
- PFAC policies, member roles and responsibilities

Member training:

- The PFAC members did not receive any specific training, however do receive the monthly hospital scorecard which outlines the hospital results of all quality metrics for the calendar year. There is discussion that takes place regarding the hospital performance.

## Section 6: PFAC Impact and Accomplishments

The following information only concerns PFAC activities in FY 2019.

Accomplishment	Idea came from (choose one)	PFAC role can be best described as (choose one)
<b>Accomplishment 1:</b> Created crossword puzzle packets for the inpatients courtesy of the HFH PFAC.	<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 type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading
<b>Accomplishment 2:</b> PFAC revitalized the work being done on the cultural diversity poster. Currently working on graphics and printing process with new Director of Marketing / Community Outreach.	<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 type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading

The four greatest challenges the PFAC had in FY 2019:

Challenge 1: Recruitment. It is very difficult to find members from our communities that wish to participate in the PFAC group, as well as maintain the members that we currently have.
Challenge 2: Educating the staff members about the hospital PFAC. Let and their ability to help with hospital projects.



Challenge 3: Attendance: Member availability is limited at times.

Challenge 4: Since the hospital has budgeting constraints, the PFAC does not have access to regular resources. This can be difficult for the group to work on projects.

PFAC staff members sit on the following committees:

- Ethics Committee
- Quality and Safety committee
- Patient Experience of Care

Members on these hospital-wide committees report back to the PFAC about their work. The group is working on a more robust hospital reporting schedule for PFAC for the FY 2020. The patient and family advisors do not serve on any hospital-wide committees at this time.

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

- Patient experience/satisfaction scores ( HCAHPS, ED and Ambulatory Surgery satisfaction results) Medicare Hospital Compare (Such as complications and readmissions)
- Maternity Care (Such as C-sections, episiotomies, breast feeding, elective deliveries)
- Resource use (Such as length of stay)

PFAC involvement with HCAHPS data and any resulting quality improvement initiatives:

- The regional patient experience manager works closely with the PFAC group.
- Starting with 2020, the corporate patient experience staff will work with the local PFAC teams to engage participation in the hospital activities.

PFAC did not participate in activities related to:

- Massachusetts law regarding PFAC
- State or national quality of care initiatives
- Research studies.

Holy Family Hospital posts all Annual Reports on the hospital website, located in the PFAC section.

[www.holyfamily-hospital.org/about-us/patient-and-family-advisory-council](http://www.holyfamily-hospital.org/about-us/patient-and-family-advisory-council)

This Annual PFAC Report was completed and approved, using a collaborative process between staff and PFAC members.