

## HEALTH CARE FOR ALL



# **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 1<sup>st</sup> 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, <u>www.hcfama.org</u>. 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 <u>PFAC@hcfama.org.</u>

Reports should be completed by October 1, 2020.

2020 Patient and Family Advisory Council Annual Report Form
The survey questions concern PFAC activities in fiscal year 2020 only: (July 1, 2019 – June 30, 2020).
Section 1: General Information
1. Hospital Name: Martha's Vineyard Hospital
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.
1a. 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
$\Box$ We are one of multiple PFACs at a single hospital
☑ We are one of several PFACs for a system with several hospitals – <b>skip to #2C below</b>
$\Box$ Other (Please describe):
1b. Will another PFAC at your hospital also submit a report?
$\Box$ Yes
$\boxtimes$ No
□ Don't know
1c. Will another hospital within your system also submit a report?
$\boxtimes$ Yes
$\Box$ Don't know
3. Staff PFAC Co-Chair Contact:
2a. Name and Title: Dedie Wieler RN, CPHQ: Quality and Safety Specialist, Advisory Services
2b. Email: dwieler1@partners.org
2c. Phone: 617-877-5369
$\Box$ Not applicable
4. Patient/Family PFAC Co-Chair Contact:
3a. Name and Title: Brenda Brathwaite
3b. Email: brenda_brathwaite@verizon.net
3c. Phone: 508-693-5810
$\Box$ Not applicable
5. Is the Staff PFAC Co-Chair also the Staff PFAC Liaison/Coordinator?
⊠ Yes – skip <b>to #7 (Section 1)</b> below □ No – describe below in # <b>6</b>
6. Staff PFAC Liaison/Coordinator Contact:
6a. Name and Title:
6b. Email:
6c. Phone:
$\Box$ Not applicable

Section 2: PFAC Organization	
<ul> <li>7. This year, the PFAC recruited new members through the following approaches (check all that apply):</li> <li>Case managers/care coordinators</li> <li>Community based organizations</li> <li>Community events</li> <li>Facebook, Twitter, and other social media</li> <li>Hospital banners and posters</li> <li>Hospital publications</li> <li>Houses of worship/religious organizations</li> <li>Patient satisfaction surveys</li> <li>Promotional efforts within institution to patients or families</li> <li>Promotional efforts within institution to providers or staff</li> <li>Recruitment brochures</li> <li>Word of mouth/through existing members</li> <li>Other (Please describe):</li> <li>N/A – we did not recruit new members in FY 2020</li> </ul>	
8. Total number of staff members on the PFAC: 5	
9. Total number of patient or family member advisors on the PFAC: 5	
10. The name of the hospital department supporting the PFAC is: Quality and Safety Department	
<b>11. The hospital position of the PFAC Staff Liaison/Coordinator is:</b> Quality and Safety Specialist, Advisory Services	
<ul> <li>12. The hospital provides the following for PFAC members to encourage their participation in meetings</li> <li>(check all that apply):</li> </ul>	
$\Box$ Annual gifts of appreciation	
$\Box$ Assistive services for those with disabilities	
$\blacksquare$ Conference call phone numbers or "virtual meeting" options	
$\Box$ Meetings outside 9am-5pm office hours	
$\boxtimes$ 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):	
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	3

### 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: The island of Martha's Vineyard.

Don't know

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

		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	1.6	0.3	3.9	0	88.1	4.8	1.6	🗆 Don't know
	14b. Patients the hospital provided care to in FY 2020	0.73	0.63	5.22	0.05	83.26	6.27	0.05	🗆 Don't know
	14c. The PFAC patient and family advisors in FY 2020			20		80			□ 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>):

15a. Patients the hospital provided care to in FY 2020	7.46	Dere/t lan anus
		🛛 Don't know
15b. PFAC patient and family advisors in FY 2020	0	🗆 Don't know

4

15c. What percentage of patients that the hospital provided care to in FY 2020 spoke the following as their primary language?

	%
Spanish	0.39
Portuguese	6.94
Chinese	0.02
Haitian Creole	0.01
Vietnamese	0.02
Russian	0.01
French	0.04
Mon-Khmer/Cambodian	0
Italian	0.03
Arabic	0
Albanian	0
Cape Verdean	0

Don't know

15d. In FY 2020, 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 langue		

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:

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17. O	our process for developing and distributing agendas for the PFAC meetings (choose):
	$\Box$ Staff develops the agenda and sends it out prior to the meeting
	$\Box$ 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)
	$\Box$ Other process (Please describe below in #17b)
	$\square$ N/A – the PFAC does not use agendas
	17a. If staff and PFAC members develop the agenda together, please describe the process: The PFAC co-chairs develop the agenda and during meetings any member may present a topic for discussion.
	17b. If other process, please describe:
18. T	he PFAC goals and objectives for 2020 were: (check the best choice):
	Developed by staff alone
	Developed by staff and reviewed by PFAC members
	Developed by PFAC members and staff
	$\square$ N/A – we did not have goals for FY 2020– <b>Skip to #20</b>
19. T	he PFAC had the following goals and objectives for 2020:
	MVH Council Goals
1. 2. 3.	<ul> <li>To advise the Hospital regarding the Master Facility Plan as it unfolds.</li> <li>To review and revise the PFAC Bylaws and Operating Guidelines/Procedures. Completed 5/2020.</li> <li>To review and provide input on various Hospital quality improvement projects.</li> <li>The first project involves working with the acute unit and outpatient units in improving the process for obtaining, documenting and tracking healthcare proxy information throughout the MVH System.</li> </ul>
4.	To study the communication flow between Hospital staff and patients/families at various points of care.
	The new Call Center
	Receptionists
	<ul> <li>Patient/family medical questions/follow-up concerns</li> <li>Advance questionnaires too many re-asking the same questions already answered in Patient Gateway</li> </ul>
<b>20. P</b>	lease list any subcommittees that your PFAC has established: NA
	6
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	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
	PFAC member(s) are on board-level committee(s)
	$\Box$ Other (Please describe):
	$\Box$ 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: We held the bulk of our meetings via zoom due to the pandemic. We also use email to share information and gather opinions between meetings.
	N/A – We don't communicate through these approaches
	Section 5: Orientation and Continuing Education
	23. Number of new PFAC members this year: 7
	24. Orientation content included (check all that apply):
	"Buddy program" with experienced members
	$\Box$ Check-in or follow-up after the orientation
	$\boxtimes$ Concepts of patient- and family-centered care (PFCC)
	$\Box$ General hospital orientation
	$\boxtimes$ Health care quality and safety
	$\boxtimes$ History of the PFAC
	$\Box$ Hospital performance information
	□ Immediate "assignments" to participate in PFAC work
	$\boxtimes$ Information on how PFAC fits within the organization's structure
	$\Box$ In-person training
	Massachusetts law and PFACs
	$\Box$ Meeting with hospital staff
	Patient engagement in research
	$\boxtimes$ PFAC policies, member roles and responsibilities
	$\Box$ Skills training on communication, technology, and meeting preparation
	$\Box$ Other (Please describe below in #24a)
	$\Box$ N/A – the PFAC members do not go through a formal orientation process
	24a. If other, describe:
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25. Tł	he PFAC received training on the	following topics:				
Concepts of patient- and family-centered care (PFCC)						
	oxtimes Health care quality and	l safety measurement				
	Health literacy					
		issue in the news in relation to the hospital (e.g. simultaneous surgeries, nental/behavioral health patient discharge, etc.)				
$\boxtimes$ Hospital performance information						
Patient engagement in research						
	$\Box$ Types of research cond	ucted in the hospital				
	Other (Please describe)	below in # <b>25a</b> )				
	$\Box$ N/A – the PFAC did no	ot receive training				
	25a. If other, describe:					
	Section 6: FY	2020 PFAC Impact and Accomplishments				
	The following informa	ation only concerns PFAC activities in the fiscal year 2020.				
26. Pl						
26. Pl	26a. What were the three greate or perspective?	est accomplishments/impacts of the PFAC related to providing feedback				
	_	est accomplishments/impacts of the PFAC related to providing feedback Idea came from (choose one)				
Acco	or perspective? omplishment/Impact omplishment/Impact 1:					
Acco Acco PFA	or perspective? omplishment/Impact omplishment/Impact 1: AC provided valuable feedback	Idea came from (choose one)				
Acco Acco PFA on t	or perspective? omplishment/Impact omplishment/Impact 1: AC provided valuable feedback the Hospital's covid 19	Idea came from (choose one)				
Acco Acco PFA on ti resp	or perspective? omplishment/Impact omplishment/Impact 1: AC provided valuable feedback	Idea came from (choose one)				
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26b. What were the three greatest accomplishments/impacts of the PFAC related to influencing the institution's financial and programmatic decisions?

Accomplishment/Impact	Idea came from (choose one)
Accomplishment/Impact 1:	□ Patient/family advisors of the PFAC
PFAC advised the Hospital regarding the Master Facility Plan and the opening of the rural health clinic, including a tour.	Department, committee, or unit that requested PFAC input
Accomplishment/Impact 2:	Patient/family advisors of the PFAC
PFAC participated in discussions regarding new patient signage as the master plan departmental relocations are taking place. This became very important with the many unplanned changes relating to the pandemic. (See accomplishment #1 under 26a.)	⊠ Department, committee, or unit that requested PFAC input
Accomplishment/Impact 3: The PFAC goal to study the communication flow between Hospital staff and patients/families at various points of care is currently in progress.	<ul> <li>Patient/family advisors of the PFAC</li> <li>Department, committee, or unit that requested PFAC input</li> </ul>

26c. What were the three greatest accomplishments/impacts of the PFAC related leading/co-leading programs and initiatives?

Accomplishment/Impact	Idea came from (choose one)
Accomplishment/Impact 1: Continued work regarding health care proxy education and outreach in the community.	<ul> <li>Patient/family advisors of the PFAC</li> <li>Department, committee, or unit that requested PFAC input</li> </ul>
Accomplishment/Impact 2:	<ul> <li>Patient/family advisors of the PFAC</li> <li>Department, committee, or unit that requested PFAC input</li> </ul>
Accomplishment/Impact 3:	<ul> <li>Patient/family advisors of the PFAC</li> <li>Department, committee, or unit that requested PFAC input</li> </ul>
	9

27. The five greatest challenges the PFAC had in FY 2020:
Challenge 1: The PFAC reorganization with multiple new members
Challenge 2: Being effective despite the restrictions caused by virtual meetings.
Challenge 3: Each member needing to learn how to use Zoom.
Challenge 4: Continued outreach to the Brazilian community for a PFAC member.
Challenge 5:
$\square$ N/A – we did not encounter any challenges in FY 2020
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
$\Box$ Care Transitions
$\Box$ Code of Conduct
$\Box$ Community Benefits
□ Critical Care
Culturally Competent Care
□ Discharge Delays
Diversity & Inclusion
Drug Shortage
Eliminating Preventable Harm
Emergency Department Patient/Family Experience Improvement
□ 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 and Safety □ Quality/Performance Improvement
□ Surgical Home
□ Other (Please describe):
$\square$ N/A – the PFAC members do not serve on these – <b>Skip to #30</b>
$\Box W/A = the TTAC members do not serve on these = 5kp to \#50$
29. How do members on these hospital-wide committees or projects report back to the PFAC about their work?
Information is shared during PFAC meetings.
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

 $\boxtimes$  Patient and provider relationships

Patient education on safety and quality matters

 $\boxtimes$  Quality improvement initiatives

 $\Box$  N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2020

# **31.** PFAC members participated in the following activities mentioned in the Massachusetts law (check all that apply):

□ Advisory boards/groups or panels

#### $\Box$ Award committees

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
- $\boxtimes$  Standing hospital committees that address quality
- $\Box$  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 that apply):

#### 32a. Complaints and serious events

Complaints and investigations reported to Department of Public Health (DPH)

□ Healthcare-Associated Infections (National Healthcare Safety Network)

□ Patient complaints to hospital

□ Serious Reportable Events reported to Department of Public Health (DPH)

#### 32b. Quality of care

□ High-risk surgeries (such as aortic valve replacement, pancreatic resection)

- □ Joint Commission Accreditation Quality Report (such as asthma care, immunization, stroke care)
- □ Medicare Hospital Compare (such as complications, readmissions, medical imaging)
- □ Maternity care (such as C-sections, high risk deliveries)

#### 32c. Resource use, patient satisfaction, and other

□ Inpatient care management (such as electronically ordering medicine, specially trained doctors for ICU patients)

⊠ Patient experience/satisfaction scores (eg. HCAHPS - Hospital Consumer Assessment of Healthcare Providers and Systems)

□ Resource use (such as length of stay, readmissions)

 $\Box$  Other (Please describe):

 $\square$  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: Routine agenda items were postponed due to the covid 19 crisis.

34. Please describe how the PFAC was engaged in discussions around these data in #32 above and any resulting quality improvement initiatives: The hospital changed it's patient satisfaction questionnaire vendor in July and the new tool was presented to PFAC by the Director of Quality and Safety. As a result of the presentation, two members of PFAC have joined the new Patient Experience Committee along with the

PFAC staff member cochair. A cochair of the Patient Experience Committee has also joined PFAC. The plan is for patient experience information to flow freely between the two groups.

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  $\boxtimes$  Identifying patient safety risks □ Identifying patients correctly □ Preventing infection □ Preventing mistakes in surgery  $\boxtimes$  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  $\boxtimes$  Electronic Health Records –related errors □ Hand-washing initiatives □ Human Factors Engineering □ Fall prevention □ Team training  $\boxtimes$  Safety 35c. Decision-making and advanced planning End of life planning (e.g., hospice, palliative, advanced directives)  $\boxtimes$  Health care proxies Improving information for patients and families □ Informed decision making/informed consent 35d. Other quality initiatives □ Disclosure of harm and apology □ Integration of behavioral health care  $\Box$  Rapid response teams  $\Box$  Other (Please describe):  $\Box$  N/A – the PFAC did not work in quality of care initiatives 36. Were any members of your PFAC engaged in advising on research studies?  $\Box$  Yes

⊠ No – **Skip to #40 (Section 6)** – MVH does not originate any research studies although the hospital may participate in studies originating in the Mass General Brigham System. Those research studies are thoroughly vetted at the originating hospital.

#### 37. 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)

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

 $\Box$  Researchers contact the PFAC

- □ Researchers contact individual members, who report back to the PFAC
- □ Other (Please describe below in **#38a**)
- $\Box$  None of our members are involved in research studies

38a. If other, describe:

#### 39. About how many studies have your PFAC members advised on?

□ 1 or 2 □ 3-5

 $\Box$  More than 5

 $\Box$  None of our members are involved in research studies

#### 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): Dedie Wieler, staff; Brenda Brathwaite, advisor; Claire Seguin, staff; Julia Burgess, advisor; Emily DeChambeau, staff; Nicole Cabot, advisor; Marissa Lefebvre, staff; Susan Silk, advisor; Pat Hayward, staff and Karen Burke, advisor.

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

 $\boxtimes$  Staff wrote report and PFAC members reviewed it

□ Staff wrote report

 $\Box$  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:

□ 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: □ No

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

⊠ Yes, link: https://www.mvhospital.com/guide/information/services/patient-and-family-advisory-council

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