

# 2016 Annual PFAC Report: Hallmark Health System

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:	<input type="text" value="Cheryl Warren, MS, R"/>
Email:	<input type="text" value="cwarren@hallmarkhe"/>
Phone:	<input type="text" value="781-306-6402"/>

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:	<input type="text" value="Missy Garrity"/>
Email:	<input type="text" value="fmgarity@gmail.com"/>
Phone:	<input type="text" value="617-426-0600"/>

Q4. Staff PFAC Liaison/Coordinator Contact (if applicable):

Name and Title:	Sue Appleyard, MSW
Email:	sappleyard@hallmar
Phone:	781-979-3439

Q23.

**Section 1: PFAC Organization**

Q6. This year, the PFAC recruited new members through the following approaches (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Word of mouth / through existing members                                  | <input type="checkbox"/> Case managers / care coordinators               |
| <input checked="" 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 type="checkbox"/> Facebook and Twitter  | <input type="checkbox"/> Houses of worship                               |
| <input checked="" type="checkbox"/> Recruitment brochures  | <input checked="" type="checkbox"/> Community events                     |
| <input checked="" 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:

7

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

Multiple hospital departments support the PFAC including Quality Assurance, Case Management, Nursing Administration, Environmental Services, Compliance and Information Services.

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

Social Work Manager

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 checked="" 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 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"):

The communities of Malden, Medford, Melrose, Reading, Stoneham, and Wakefield, and secondary communities of Everett, North Reading, and Saugus, and surrounding communities north of Boston.

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="less than 2%"/>
Asian	<input type="text" value="9%"/>
Black or African American	<input type="text" value="7%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="less than 2%"/>
White	<input type="text" value="74%"/>
Other	<input type="text"/>

Q91.

Don't know racial groups

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

8%

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="0.08%"/>
Asian	<input type="text" value="3.27%"/>
Black or African American	<input type="text" value="2.77%"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0.01%"/>
White	<input type="text" value="88.78%"/>
Other	<input type="text" value="3.09%"/>

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?

data not seperately collected

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" value="0"/>
Asian	<input type="text" value="0"/>
Black or African American	<input type="text" value="0"/>
Native Hawaiian or other Pacific Islander	<input type="text" value="0"/>
White	<input type="text" value="100%"/>
Other	<input type="text" value="0"/>

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?

0%

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)?

8.4%

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	1.1%
Portuguese	0.7%
Chinese	0.79%
Haitian Creole	1.01%
Vietnamese	0.49%
Russian	0.24%
French	0.16%
Mon-Khmer/Cambodian	0.04%
Italian	0.90%
Arabic	0.86%
Albanian	0.076%
Cape Verdean	0.002%

Q127.

Don't know primary languages

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

0

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	<input type="text" value="0"/>
Portuguese	<input type="text" value="0"/>
Chinese	<input type="text" value="0"/>
Haitian Creole	<input type="text" value="0"/>
Vietnamese	<input type="text" value="0"/>
Russian	<input type="text" value="0"/>
French	<input type="text" value="0"/>
Mon-Khmer/Cambodian	<input type="text" value="0"/>
Italian	<input type="text" value="0"/>
Arabic	<input type="text" value="0"/>
Albanian	<input type="text" value="0"/>
Cape Verdean	<input type="text" value="0"/>

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:

Increasing the diversity of our PFAC has been an area in which we have struggled historically. We do carefully review new PFAC applications to assess whether or not a potential new member will add to the Committee in a way that represents the larger community served at the hospital; and we have been successful in recruiting members who represent different age groups. We continue to struggle to recruit members of different racial or ethnic backgrounds; however, we have reached out to our partners in Hallmark Health Community Benefits as well as the Hallmark Health Diversity Committee for suggestions.

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:

Agenda topics often arise from PFAC members during meeting discussions; however, the PFAC Chair (community member), Co-Chair (staff member) and Vice Chair (staff member) communicate via email or phone to discuss a formal agenda prior to the meeting. The agenda is then emailed out to the whole Committee prior 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:

1. Integration of the Patient and Family Voice. 1.1 Develop PFAC orientation material and identify community members to represent the group at new RN staff orientation. 2. Patient Safety 2.1 Work with Facilities to institute the use of umbrella bags at the entrances of each hospital to reduce fall risk related to water dripping on the floors. 3. Quality 3.1 Further evaluate the Better Together Campaign by reviewing the Hallmark Health System Visitor's Policy and poll nursing to get their input on visiting hours. 3.2 Work with RN staff to find ways of reducing noise on the inpatient units, especially during evening hours. 4. Improving Information for Patients and Families 4.1 Work with the hospital leadership to ensure compliance with the Notice of Observation Treatment and Implication for Care Eligibility Act for Medicare patients. 4.2 Continue to support efforts to enhance the patient experience by reviewing communication techniques used by the hospital system. 5. Outreach/Recruitment 5.1 Update the Hallmark Health PFAC website with a new photo. 5.2 Make PFAC informational brochures available at the outpatient offices, inpatient units and at community events. 5.3 Work with the Marketing Department to highlight and advertise our PFAC activities.

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

Nursing orientation subcommittee

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

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> PFAC submits annual report to Board     | <input type="checkbox"/> PFAC member(s) are on board-level committee(s)  |
| <input checked="" 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 checked="" 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:

We use email to communicate with one another in-between meetings. We also communicate with physicians via the Hallmark Health Medical Associates listserv for recruitment purposes, and we will be working with the Marketing Department to utilize the Hallmark Health Facebook page and inpatient television channel for recruitment as well.

Q109.

#### Section 4: Orientation and Continuing Education

Q21. Number of new PFAC members this year:

1

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

- |   |  |
|---|--|
| <input type="checkbox"/> Meeting with hospital staff                                      | <input type="checkbox"/> Other   |
| <input checked="" type="checkbox"/> General hospital orientation                          | <input type="checkbox"/> In-person training  |
| <input type="checkbox"/> Hospital performance information                                 | <input 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 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 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):

- |   |   |
|---|---|
| <input type="checkbox"/> Concepts of patient- and family-centered care (PFCC) | <input checked="" type="checkbox"/> Health care quality and safety measurement  |
| <input type="checkbox"/> Patient engagement in research                       | <input type="checkbox"/> 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) |
| <input type="checkbox"/> Types of research conducted in the hospital          | <input type="checkbox"/> Other  |
| <input checked="" type="checkbox"/> Hospital performance information          | <input type="checkbox"/> Health literacy  |
| <input type="checkbox"/> Not Applicable                                       |   |

Q116. Please describe other topics:

*This question was not displayed to the respondent*

**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:

The Hallmark PFAC developed orientation material and identified 3 community members to represent the group at new RN staff orientation

Q24aI. The idea for Accomplishment 1 came from:

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

Q24b. Accomplishment 2:

Worked with Facilities to institute the use of umbrella bags at the entrances of each hospital to reduce fall risk related to water dripping on the floors

Q24bI. The idea for Accomplishment 2 came from:

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

Q24c. Accomplishment 3:

Further evaluated the Better Together Campaign by reviewing the Hallmark Health System Visitor's Policy. PFAC then wrote a recommendation to Hospital Leadership regarding the policy as related to the Better Together Campaign.

Q24c. The idea for Accomplishment 3 came from:

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

Q24d. Accomplishment 4:

Updated the Hallmark Health PFAC website with a new photo

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:

Worked with HH Marketing to highlight and advertise our PFAC activities.

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:

As noted above, recruiting a diverse membership that is more representative of the population that Hallmark Health serves has been challenging for us.

Q25b. Challenge 2:

While our PFAC has been successful in working with various departments specifically requesting our involvement, efforts to date to broaden the impact of PFAC have been more separate than integrated.

Q25c. Challenge 3:

We have worked closely with Hallmark Health Marketing Department in order to promote the PFAC; however, have still had difficulty with recruiting new membership.

Q25d. Challenge 4:

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 type="checkbox"/> Emergency Department Patient/Family Experience Improvement |
| <input type="checkbox"/> Care Transitions  | <input checked="" 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 type="checkbox"/> Quality and Safety   |
| <input type="checkbox"/> Discharge Delays  | <input 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:

Environment of Care Committee and Nursing Orientation

Q27.

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

They present overviews and updates at our monthly meetings.

Q28. The PFAC provided advice or recommendations to the hospital on the following areas mentioned in the Massachusetts law (click all that apply):

Quality improvement initiatives

Institutional Review Boards

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

Patient and provider relationships

Q29. PFAC members participated in the following activities mentioned in the Massachusetts law (click all that apply):

Task forces

N/A – the PFAC members did not participate in any of these activities

Award committees

Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees

Advisory boards/groups or panels

Selection of reward and recognition programs

Search committees and in the hiring of new staff

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

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

Healthcare-Associated Infections (National Healthcare Safety Network)

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

Patient complaints to hospital

Q30b. Quality of care

- |  |   |
|--|---|
| <input checked="" 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 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 checked="" type="checkbox"/> Patient experience/satisfaction scores (eg. 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 |
|---|--------------------------------|

Q 119. 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:

We shared the above data based on PFAC members' interest, timeliness of Committee discussions and salient topics impacting our Hospitals.

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

The Vice President of Quality provided our PFAC with a PowerPoint presentation on Serious Reportable Events and discussed SRE's that occurred at our Hospitals. The PFAC had an opportunity to discuss the incidents and provide feedback on ways to prevent such events in the future. Additionally, the Director of Performance Improvement provided our PFAC with a presentation regarding the patient experience, particularly as related to employee engagement. Our PFAC then provided feedback on ways we felt the employee engagement initiatives would or would not impact the patient experience.

**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 type="checkbox"/> Preventing infection                      |
| <input type="checkbox"/> Using medicines safely         | <input type="checkbox"/> Identifying patient safety risks          |
| <input type="checkbox"/> Using alarms safely            | <input checked="" 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 checked="" type="checkbox"/> Fall prevention<br>Care transitions (e.g., discharge planning,<br><input type="checkbox"/> passports, care coordination, and follow up<br>between care settings) | <input type="checkbox"/> Safety                                    |
|  | <input type="checkbox"/> Human Factors Engineering                 |

Q33c. Decision-making and advanced planning

- |   |   |
|---|---|
| <input type="checkbox"/> Informed decision making/informed consent                  | <input type="checkbox"/> Health care proxies  |
| <input checked="" type="checkbox"/> Improving information for patients and families | <input type="checkbox"/> End of life planning (e.g., hospice, palliative,<br>advanced directives) |

Q33d.

Additional quality initiatives

- |   |  |
|---|--|
| <input type="checkbox"/> Rapid response teams           | <input type="checkbox"/> Integration of behavioral health care |
| <input type="checkbox"/> Disclosure of harm and apology |  |

Q33e. Other

- |  |   |
|--|---|
| <input type="checkbox"/> N/A – the hospital did not share performance<br>information with the PFAC | <input checked="" type="checkbox"/> Other |
|--|---|

Q120. Please describe other initiatives:

Pre-op screening

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:

*This question was not displayed to the respondent.*

Q36.

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

*This question was not displayed to the respondent.*

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?

*This question was not displayed to the respondent.*

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):

Patient/Family Advisors Rick Catino Virginia Caruso-Bove Jonelle Eccleston Missy Garrity Karen McGarrahan Carolyn Resendes Judy Worthley Staff Sue Appleyard Susan Corbett Justin Ferbert Kelley McCue Deb Murphy Cheryl Warren

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:

Link will be available after the Oct 1 report subm

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:

781-979-3439

No

Q41. Our hospital has a link on its website to a PFAC page.

Yes, link:

<http://www.hallmarkhealth.org/patient-family-ad>

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

Q113. Please provide an email address if you would like to receive a confirmation with a copy of this report after the report is submitted:

sappleyard@hallmarkhealth.org